

**Team Name:** Central Massachusetts Regional Public Health Alliance

**Major Activities:** The Central Massachusetts Regional Public Health Alliance (CMRPHA) was formed through an intergovernmental agreement. The Alliance comprises the City of Worcester and six contiguous towns of varying sizes, and is led by the City of Worcester Public Health Division.

Worcester sought to establish the Alliance in order to strengthen public health in the region. Worcester is the largest city in the area, and historically has been very successful in securing a variety of public health grants, some of which now benefit other towns in the Alliance. Worcester developed contracts with each of the towns in the Alliance, through which it provides a health officer in addition to different services to meet the towns' individual needs. The Alliance has a regional governance council comprising all of the town managers.

The most significant programmatic change to occur through this effort was the consolidation of environmental health programs. The environmental staff in each of the Alliance towns became WDPH staff, in order to ensure that environmental health services are all provided consistently across the region. Most staff members were assigned only to the town from which they had come, and stayed in their workspaces, although a couple of staff were assigned to two towns. In addition, new policies and procedures were derived from the "best" of the existing policies and procedures. The staff all underwent training as well, as another strategy to ensure continuity. Finally, WDPH conducted a time-motion study to determine the most appropriate fee schedules for environmental health services.

WDPH actively implemented programs to decrease tobacco and drug use throughout the region, as part of the regional Community Health Improvement Plan that it developed. This reflected a new activity for all of the towns in the alliance, as they had not had a community health improvement plan before.

WDPH developed a CMRPHA logo for use by all Alliance members, and uses it on all materials related to CMRPHA activities.

**Major Accomplishments:** The establishment of the CMRPHA reflects a significant accomplishment in itself. Massachusetts is well-known for its strong home rule, making it unusual for much collaboration between and among municipalities.

The transition to WDPH-provided public health services occurred in a fairly smooth manner. The revised policies and procedures that emerged did not affect the customers. In addition, the new staffing pattern made it much easier to cover staff absences when they occurred.

The completion of a time-motion study for environmental health resulted in extremely well-calculated fees for those services.

As the project period ended, WDPH was applying for PHAB accreditation, and planned to include documentation that reflected its work with each town. Assuming it achieves accreditation status, all Alliance members will be served by an accredited health department.

**Challenges:** The biggest challenge has been to instill a regional public health identity in each of the Alliance members. Some of the towns view themselves as part of a public health alliance, while others

view the relationship as merely a contractual arrangement. The health officer worked diligently throughout the project period to maintain the visibility of the public health services that each town received, strengthen relationships with the town managers and boards of health, and otherwise promote a regional public health identity as established through the intergovernmental agreement.

In addition, the staff who became employees of WDPH faced some challenges when the new arrangement began. Some confusion existed because although the employer changed, the employee's location did not. All of these "new" employees were subject to learning new policies and procedures, and this created stress at the outset which eventually subsided over time.