



**NATIONAL
VIRAL HEPATITIS**
ACTION PLAN

**PARTNER PLANNING GUIDE
2017-2020**



Developed by the Office of HIV/AIDS and Infectious Disease Policy,
Office of the Assistant Secretary for Health,
U.S. Department of Health and Human Services,
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For more information about the National Viral Hepatitis Action Plan and viral hepatitis visit
www.hhs.gov/hepatitis/

Background

We have the knowledge and tools to save lives and win the fight against hepatitis B virus (HBV) and hepatitis C virus (HCV). The National Viral Hepatitis Action Plan, 2017–2020 (Action Plan) builds upon the past six years of coordinated efforts by federal and nonfederal stakeholders working to respond to the growing threat of viral hepatitis to the health of Americans.

The Action Plan identifies four national goals for 2020:

- Prevent new viral hepatitis infections
- Reduce deaths and improve the health of people living with viral hepatitis
- Reduce viral hepatitis health disparities
- Coordinate, monitor, and report on implementation of viral hepatitis activities

Everyone has a role to play in the battle that is being mounted against viral hepatitis in the United States. Representatives from more than 20 federal agencies and offices developed the plan with significant input from state, county, Tribal, city, and other nonfederal organizations from across the country. Although federal staff helped to develop it, the Action Plan is more than a federal plan; it is a national plan. The Action Plan identifies shared goals, priority strategies, and indicators to guide individuals and organizations from all sectors of society to strengthen and monitor our collective national response to viral hepatitis. The importance of this effort was underscored in a National Academies of Sciences, Engineering, and Medicine [report](#), which concluded that eliminating hepatitis B and hepatitis C as a public health threat in the United States is feasible if the right steps are taken.

The Action Plan recognizes that success cannot be achieved by federal action alone—it will require the support and commitment of a broad mix of stakeholders from both the public and private sectors. The Action Plan will serve as a framework for facilitating coordination and collaboration and is flexible enough to accommodate diverse perspectives and approaches to addressing viral hepatitis.

This guide is intended for individuals, groups, and organizations conducting strategic planning efforts for HBV and/or HCV that will assist in making effective use of and aligning with the National Viral Hepatitis Action Plan, 2017–2020.



THE ACTION PLAN IS A NATIONAL PLAN.

Everyone has a role to play in the battle
against viral hepatitis in the United States.

How to Use This Guide

The Action Plan provides a framework for all key stakeholders. Its purpose is to strengthen the nation's response to viral hepatitis, and it seeks to improve the coordination of viral hepatitis activities across all sectors. This guide was created to assist individuals, groups, and organizations in identifying opportunities and actions that contribute to achieving the Action Plan's goals for 2020. These can be actions by organizations, actions that engage a network or an entire state or sector, and actions that complement, amplify, or extend the strategies and recommendations detailed in the Action Plan. Other resources that provide guidance for organizations that are developing their own viral hepatitis action plan can be found on the [Viral Hepatitis Community Action section](#) of the U.S. Department of Health and Human Services (HHS) viral hepatitis website and such as [The Community Response to Viral Hepatitis – Contributions Toward Achieving the Goals of the Viral Hepatitis Action Plan](#), which includes more than 70 nonfederal stakeholders that are fighting viral hepatitis in their communities and across the nation; blogs written by community partners; and reports from stakeholder consultations and webinars.

By describing actions that are part of their own viral hepatitis partner plan, organizations can share ideas on intra-agency coordination and collaboration with external partners, as well as better describe and communicate their contributions toward achieving our national viral hepatitis goals.

Instructions

Stakeholder participation is essential to ensuring the overall success of the Action Plan. We encourage groups and organizations to use this Partner Planning Guide to brainstorm and discuss ideas, potential activities, challenges, tools, resources, and partnerships related to the Action Plan's goals and strategies.

This guide features a section on each goal that includes a brief summary of the goal, strategies from the Action Plan, links to recommended actions and opportunities for stakeholders, and initial discussion questions for groups to use during planning efforts. Below are some specific steps that are recommended for groups using this guide and on the following page is a graphic hand out that may help groups as they work through the steps.

1. **Know your epidemiology:** Seek epidemiological and qualitative data on the scope of the epidemic in your defined area (e.g., city, county, state, health care system), such as the rate of new infections, hepatitis mortality data, demographics of the epidemic, and vaccination rates. These data can help identify areas and populations with the greatest need.
2. **Know your capacity:** Review the mission of your organization or partnership for alignment with the identified area(s) of need. Assess organizational and/or partnership capacity and resources (e.g., funding, staff, knowledge, technology) available to address the identified area(s) of need.
3. **Set your goals:** Review the goals of the Action Plan, and select the goals that best align with the areas of need identified in Step 1, and the mission of the organization or stakeholder group.
4. **Choose the best strategies:** Identify the strategies from the Action Plan that address the identified area(s) of need. There may be more than one strategy that addresses the area(s) of need; select as many strategies as are possible to implement based on your capacity and resources available.
5. **Engage stakeholders:** Use the questions in the planning guide to frame a discussion between all involved stakeholders. The discussion questions for each strategy from the Action Plan are designed to help you identify the following:
 - Specific actions that you, your organization, or other organizations can take to help implement the Action Plan;
 - Specific partners you could engage; and

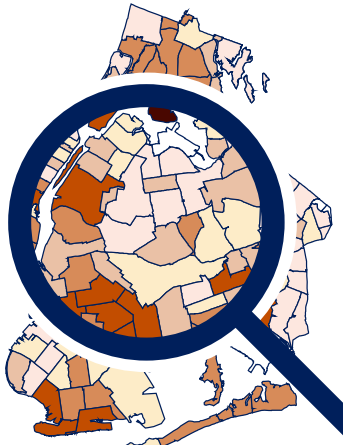
- Key messages that communicate the need for actions and how the actions align with the Action Plan goals and/or strategies.
6. **Plan your actions:** At the end of the planning guide there are blank Action Planning Sheets to help you organize the strategies and actions from the discussion. In addition to the items described above, the action planning sheet includes estimated start and completion dates for the planned actions; resources necessary to implement the planned actions; and the potential reach and impact of planned actions.

Throughout implementation of the Action Plan, partnership and collaboration have been among the most effective strategies for addressing viral hepatitis. During viral hepatitis partner planning efforts, reaching out to a broad range of potential partners in both the public and private sectors is recommended. Potential state partners include the Centers for Disease Control and Prevention's (CDC's) funded [Viral Hepatitis Prevention Programs](#), CDC's [Perinatal Hepatitis B Prevention Programs](#), and the [state epidemiologists](#). Partners may also include departments of health (state and local), academic programs and researchers, health care providers and clinics, community organizations of all kinds, schools and youth programs, advocates, professional associations, substance use disorder treatment programs, pharmaceutical and diagnostics companies, hospitals, businesses, workforce wellness programs, corrections programs, and others.

At the end of this planning activity, you should have a strong foundation on which to build your viral hepatitis program and collaborations that are responsive to local needs and contribute toward achieving our national goals in line with the National Viral Hepatitis Action Plan. To enhance collaboration efforts and guide your work, once your viral hepatitis partner plan is completed, it is important to share it with colleagues within your organization, workgroups or coalitions, community planning groups, and other stakeholders. In addition, the Office of HIV/AIDS and Infectious Disease Policy requests that partners share their plans by sending them to Corinna Dan, Viral Hepatitis Policy Advisor, at corinna.dan@hhs.gov.

HOW TO USE THIS GUIDE

Know your epidemiology: review information on the local epidemic, including rates of new infections, demographics, etc., to identify **areas of need**.



Know your capacity: assess organizational and partnership capacity and alignment with identified needs.



1

2

Set your goals: select Action Plan goals that align with the needs.



Choose the best strategies: from Action Plan strategies that align with capacities and needs.



3

4

Engage stakeholders: using questions in the planning guide related to the strategies, discuss, and plan specific actions.



Plan your actions: complete the Action Planning Sheets to share and coordinate to implement the actions.



5

6

Using Indicators Helps Track Progress

The Action Plan is an ambitious plan that outlines **4 goals**, **24 priority strategies**, and **91 recommended actions**. HHS recognizes that it is not enough to simply state goals; specific targets for each goal are necessary to track progress and focus efforts. To that end, [17 indicators](#) of progress were developed to support partners in efforts to achieve our collective goals through implementation of the Action Plan.



Careful selection of indicators is an important element of viral hepatitis planning that can illustrate and support progress toward our shared goals. Indicators are powerful tools that allow partners to track progress as well as focus on actions that “move the needle” toward achieving a goal. Once specific actions and targets have been identified, all partners are encouraged to establish indicators of progress that align with the Action Plan.

It may be useful to ask questions such as:

- What data are available that can help monitor the viral hepatitis epidemic?
- Which goals (and targets) from the Action Plan can we adopt? Which goals need to be modified to fit the epidemic in our populations or areas?

The previous pages described six steps that will guide the development of your viral hepatitis plan. To further illustrate and support progress using indicators of progress for selected actions and targets identified through the planning process, partners should take the following additional steps:

1. **Set Achievable Targets** – Set targets that reflect each partner’s ability and commitment toward advancing each goal. Setting specific, reasonable targets will help guide actions and enables progress to be measured.
2. **Establish Indicators of Progress** – Using the indicators in the Action Plan as a guide, choose indicators that will effectively measure progress over time. It is important to note that actions do not need to have a direct impact on indicators to be considered successful. Developing variety of actions is important for advancing progress towards an indicator. A single action alone may not be enough to achieve a particular goal; however collective actions can successfully lead to reaching a target.



The Action Plan identifies effective strategies to prevent new viral hepatitis infections. Awareness of the prevalence viral hepatitis in the U.S. is low among health care providers and the general public. Campaign information has not reached many people in at-risk communities. Increasing awareness about HBV and HCV and the sharing of personal stories by persons whose lives have been affected by viral hepatitis can reduce the stigma and discrimination experienced by people with the infection. Sharing evidence-based facts and dispelling common myths about viral hepatitis in classrooms, community settings, and faith communities is a relatively simple way to raise awareness.

The best way to prevent HBV infections is with the HBV vaccine. Since the early 1990s, implementation of the universal HBV vaccine birth dose has reduced new HBV infections in the United States by more than 80 percent. However, efforts to vaccinate at-risk adults have not been as effective.

There is currently no vaccine that prevents HCV infection. Most new infections occur among people who inject drugs. HCV prevention among this population is effective using a combination of services, including, substance use disorder treatment, comprehensive syringe services programs, and education, testing, and treatment for the HCV-infected. For both HBV and HCV infection, targeted prevention for the populations most affected, development and evaluation of prevention interventions, and continued research on the development of vaccines and effective use of treatments as prevention are needed.

STRATEGIES

- ➡ 1.1 – Increase community awareness of viral hepatitis and decrease stigma and discrimination
- ➡ 1.2 – Build capacity and support innovation by the health care workforce to prevent viral hepatitis
- ➡ 1.3 – Address critical data gaps and improve viral hepatitis surveillance
- ➡ 1.4 – Achieve universal hepatitis A and hepatitis B vaccination for children and vulnerable adults
- ➡ 1.5 – Eliminate mother-to-child transmission of hepatitis B and hepatitis C
- ➡ 1.6 – Ensure that people who inject drugs have access to vital hepatitis prevention services
- ➡ 1.7 – Reduce the transmission of viral hepatitis in health care settings among patients and health care workers
- ➡ 1.8 – Conduct research leading to new or improved viral hepatitis vaccines, diagnostics tests, and treatments and the optimal use of existing tools to prevent, detect, and treat viral hepatitis

Examples of Goal 1 recommended activities for stakeholders can be found in the [National Viral Hepatitis Action Plan](#) on pages 43-45.

Goal 1 Discussion Questions: Prevent New Viral Hepatitis Infections Strategies 1.1–1.5

Strategy 1.1: Increase community awareness of viral hepatitis and decrease stigma and discrimination.

What activities can you conduct to increase community awareness about viral hepatitis? Who are key partners you can engage with to increase awareness about the impact of viral hepatitis in your community, availability of testing, and effectiveness of treatment. What activities can you conduct to decrease viral hepatitis-related stigma and discrimination in your community?

Strategy 1.2: Build capacity and support innovation by the health care workforce to prevent viral hepatitis.

What types of provider training can your organization do/promote to expand effective viral hepatitis prevention efforts? How can you support dissemination and implementation of innovative prevention practices in health care settings?

Strategy 1.3: Address critical data gaps and improve viral hepatitis surveillance.

What existing viral hepatitis data can you use to guide prevention and program development? Are there data gaps? What can you/your organization do to improve clinical monitoring and public health surveillance in your organization and/or community?

Strategy 1.4: Achieve universal hepatitis A and hepatitis B vaccination for children and vulnerable adults.

How can your organization increase hepatitis A and B vaccination rates for infants, children, and vulnerable adults? Consider how strategies may differ for different target audiences.

Strategy 1.5: Eliminate mother-to-child transmission of hepatitis B and hepatitis C.

What activities can your organization undertake to raise awareness about and/or reduce perinatal hepatitis B and hepatitis C? How can these efforts effectively reach pregnant women and their partners and/or health care providers caring for pregnant women?

Goal 1 Discussion Questions: Prevent New Viral Hepatitis Infections Strategies 1.6–1.8

Strategy 1.6: Ensure that people who inject drugs have access to vital hepatitis prevention services.

What steps can your organization take to ensure that persons who inject drugs have access to viral hepatitis prevention, care, and treatment information and services, as well as comprehensive recovery services including syringe service programs?

Strategy 1.7: Reduce the transmission of viral hepatitis in health care settings among patients and health care workers.

How can your organization reduce the risk of transmission of viral hepatitis in medical settings? What opportunities do(es) you/your organization have to raise awareness about viral hepatitis prevention in health care settings?

Strategy 1.8: Conduct research leading to new or improved viral hepatitis vaccines, diagnostics tests, and treatments and the optimal use of existing tools to prevent, detect, and treat viral hepatitis.

Are there ways you/your organization can conduct research or work with researchers to develop and evaluate activities to improve viral hepatitis prevention, testing, and treatment? How can your organization support dissemination of research, model programs, and effective practices?

GOAL 2



Reduce Deaths and Improve the Health of People Living with Viral Hepatitis

We can reduce deaths associated with viral hepatitis and improve the health of people living with HBV and HCV infection by using strategies identified in the Action Plan. Diagnosing infection early, linking people to care, and ensuring they receive the recommended care, treatment, and/or cure are critical in this effort. There has been some improvement in this area, but many people do not have access to affordable care and treatment, and there is a need for additional training and capacity building for the health care workforce.

Efforts that may help achieve this goal include making health care more affordable for more Americans, increasing the use of preventive services such as screening and vaccination, and using health information technology to support widespread screening and improve care quality and access to treatment. Ryan White Care Act programs for people living with HIV can serve as a foundation for treating clients coinfecting with HIV and HBV, and cure clients coinfecting with HIV and HCV.

Other critical efforts that will reach large numbers of chronically infected individuals, as well as those at risk for infection, include expanding viral hepatitis education and services that are provided in correctional settings and increasing the number and accessibility of evidence-based substance use disorder treatment programs that provide integrated care. Improved monitoring of services and research on the effectiveness of care and treatment services and model programs will further support advancements toward this goal and promote efficient use of taxpayer dollars.

STRATEGIES

- ➡ 2.1 – Build the capacity of the health care workforce to diagnose viral hepatitis and provide care and treatment to persons infected with viral hepatitis
- ➡ 2.2 – Identify persons infected with viral hepatitis early in the course of their disease
- ➡ 2.3 – Improve access to and quality of care and treatment for persons infected with viral hepatitis
- ➡ 2.4 – Improve viral hepatitis treatment among persons living with HIV
- ➡ 2.5 – Ensure that people who inject drugs have access to viral hepatitis care and [evidence-based treatment](#) services
- ➡ 2.6 – Expand access to and delivery of hepatitis prevention, care, and treatment services in correctional settings
- ➡ 2.7 – Monitor provision and impact of viral hepatitis care and treatment services
- ➡ 2.8 – Advance research to enhance identification, care, treatment, and cure for persons infected with viral hepatitis

Examples of Goal 2 recommended activities for stakeholders can be found in the [National Viral Hepatitis Action Plan](#) on pages 48–50.

Goal 2 Discussion Questions: Reduce Deaths and Improve the Health of People Living with Viral Hepatitis

Strategies 2.1–2.5

Strategy 2.1: Build the capacity of the health care workforce to diagnose viral hepatitis and provide care and treatment to persons infected with viral hepatitis.

What training can your organization do or promote to enhance viral hepatitis care and treatment?

What policies, processes and/or technological interventions (e.g., clinical decision support) could your organization implement to improve implementation of viral hepatitis screening, care, and treatment?

Strategy 2.2: Identify persons infected with viral hepatitis early in the course of their disease.

What can your organization do to promote viral hepatitis testing and diagnoses? How can you use surveillance or other assessment methods, technology, or information interventions to expand education, counseling, testing, and linkage to care among groups at the greatest risk for undiagnosed infection?

Strategy 2.3: Improve access to and quality of care and treatment for persons infected with viral hepatitis.

How can your organization help improve access to and quality of care and treatment for persons infected with viral hepatitis? Are there specific activities that have been shown to be effective in doing this in special populations and/or the communities you serve?

Strategy 2.4: Improve viral hepatitis treatment among persons living with HIV.

How can your organization effectively engage and link persons with viral hepatitis and HIV coinfection to viral hepatitis care and treatment? What proportion of persons with coinfection have been linked to viral hepatitis care and treatment?

Strategy 2.5: Ensure that people who inject drugs have access to viral hepatitis care and [evidence-based treatment](#) services.

What actions can you/your organization take to expand access to viral hepatitis prevention, care, and treatment information and services for persons who inject drugs?

Goal 2 Discussion Questions: Reduce Deaths and Improve the Health of People Living with Viral Hepatitis
Strategies 2.6–2.8

Strategy 2.6: Expand access to and delivery of hepatitis prevention, care, and treatment services in correctional settings.

What roles can your organization play in expanding viral hepatitis education, access to and delivery of hepatitis prevention, care, and treatment services in correctional settings? Are there opportunities to partner with reentry or alternative correctional programs to provide viral hepatitis education and services?

Strategy 2.7: Monitor provision and impact of viral hepatitis care and treatment services.

How can your organization improve monitoring and provide information about the provision and impact of the viral hepatitis prevention, care, and treatment services it provides?

Strategy 2.8: Advance research to enhance identification, care, treatment, and cure for persons infected with viral hepatitis.

Are there ways your organization can conduct research or work with researchers to identify and assess strategies to improve viral hepatitis prevention, care, and treatment for the populations and/or communities served?

GOAL 3



Reduce Viral Hepatitis Health Disparities

Some groups are at greater risk of HBV and HCV infection than others. Those groups include persons born from 1945-1965 (baby boomers), people who inject drugs, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, African Americans, people in correctional facilities, Veterans, homeless individuals, men who have sex with men, and people living with HIV. Achieving our 2020 viral hepatitis goals is only possible by understanding and focusing efforts on groups experiencing health disparities. It is important to recognize that different drivers may determine risk in these subgroups and that different approaches may be needed in order to reach the members of these diverse populations with different risks and different needs. For example, it is likely that elevated HCV infection rates among baby boomers are due to exposure that occurred during a medical procedure before modern standards for sterile procedures were routinely implemented. On the other hand, the increased risk of infection among incarcerated persons is largely driven by injection drug use.

Communities disproportionately affected by viral hepatitis often grapple with a range of challenges related to economic and social conditions. Language, cultural, and health care access barriers can be compounded by lack of employment, education, and community infrastructure. Chronic viral hepatitis further compounds these challenges by causing missed days of work, decreased productivity, and additional health care needs and expenses. Even in communities where these issues are not the primary drivers of increased risk, the lives of at least some of the individual people who make up a community will be affected.

One effective approach to addressing public health issues in communities is to meaningfully engage with community members and organizations. Identifying a well-respected community organization or leader may open doors to additional partnering opportunities. These partners can identify culturally competent and linguistically appropriate education and care activities. Groups such as health professional groups/chapters, social clubs, and religious and social justice organizations can all play a part in increasing awareness about viral hepatitis by educating community members and health professionals and combatting stigma and discrimination. These collaborative efforts can lead to increased screening, earlier diagnoses, and better outcomes for people living with chronic viral hepatitis. Monitoring health disparities for those with viral hepatitis will help to ensure that targeted efforts are reaching those who need it most. Further research is needed in this area to better understand and identify effective actions that will ultimately lead to a reduction in health disparities for those infected viral hepatitis.

STRATEGIES

- ➡ 3.1 – Decrease health disparities by partnering with and educating disproportionately impacted communities where priority populations live about the benefits of viral hepatitis prevention, screening, care, and treatment
- ➡ 3.2 – Improve access to care and the delivery of culturally competent, and linguistically appropriate viral hepatitis prevention and care services
- ➡ 3.3 - Monitor viral hepatitis-associated health disparities in transmission, disease, and deaths
- ➡ 3.4 - Advance basic, clinical, translational, and implementation research to improve understanding of viral hepatitis health disparities

Examples of Goal 3 recommended activities for stakeholders can be found in the [National Viral Hepatitis Action Plan](#) on pages 53 – 54.

Goal 3 Discussion Questions: Reduce Viral Hepatitis Health Disparities

Strategies 3.1–3.4

Strategy 3.1: Decrease health disparities by partnering with and educating disproportionately impacted communities where priority populations live about the benefits of viral hepatitis prevention, screening, care, and treatment.

What activities can you undertake to increase community awareness about health disparities in viral hepatitis? What organizational partnerships will be needed for these actions to be most effective?

Strategy 3.2: Improve access to care and the delivery of culturally competent, and linguistically appropriate viral hepatitis prevention and care services.

How can your organization improve access to culturally competent viral hepatitis prevention and care services? What actions can you undertake to assess your organization's current level of cultural competency and improve it, as needed?

Strategy 3.3: Monitor viral hepatitis-associated health disparities in transmission, disease, and deaths.

What state, local, or organizational data or information can your program use to monitor viral hepatitis-associated health disparities?

Strategy 3.4: Advance basic, clinical, translational, and implementation research to improve understanding of viral hepatitis health disparities.

What partners can you engage with to advance research on viral hepatitis disparities and effective activities to address them?

GOAL 4



Coordinate, Monitor, and Report on Implementation of Viral Hepatitis Activities

Viral hepatitis resources remain limited and are often dispersed across various programs, agencies, and systems. To reach our national goals, thoughtful coordination of efforts will be important at all levels and among diverse partners. The [Viral Hepatitis Prevention Program](#) and the [Perinatal Hepatitis B Prevention Program](#), two programs available in most states, are important resources. Their program staff are knowledgeable about state coalitions, networks, and programs that are addressing viral hepatitis. [State epidemiologists](#) are another valuable resource who monitor and investigate viral hepatitis cases in their states. The state-level data they provide may help target programs to areas and populations with the greatest need. Improved coordination of these and other resources, as well as data collection and reporting, is needed within health systems and across sectors at national, state, and local levels. Given the association of viral hepatitis and substance use disorder, coordination with substance use prevention and treatment, including efforts to respond to the threats posed by the opioid epidemic, are important areas for coordination and collaboration.

STRATEGIES

- ➔ 4.1 – Increase coordination of viral hepatitis programs across the federal government and between federal agencies, state, territorial, Tribal, and local governments
- ➔ 4.2 – Encourage development of improved mechanisms to monitor and report on progress toward achieving national goals
- ➔ 4.3 – Strengthen timely availability and use of data
- ➔ 4.4 – Regularly report on progress toward achieving the goals of the National Viral Hepatitis Action Plan

Examples of Goal 4 recommended activities for stakeholders can be found in the [National Viral Hepatitis Action Plan](#) on pages 56–57.

Goal 4 Discussion Questions: Coordinate, Monitor, and Report on Implementation of Viral Hepatitis Activities

Strategies 4.1–4.4

Strategy 4.1: Increase coordination of viral hepatitis programs across the federal government and between federal agencies, state, territorial, Tribal, and local governments.

How can you coordinate with and/or support state or local government in your area to improve viral hepatitis services to the populations you serve? What additional organizations could be further engaged in coordination efforts?

Strategy 4.2: Encourage development of improved mechanisms to monitor and report on progress toward achieving national goals.

How can your organization improve its monitoring and reporting efforts with respect to viral hepatitis prevention, care, treatment, and/or health disparities? How will you use these data to improve efficiency, outcomes, and effectiveness of viral hepatitis prevention, care, and treatment?

Strategy 4.3: Strengthen timely availability and use of data.

What processes can you implement in your organization to collect and use viral hepatitis data to inform leadership and guide program and resource planning?

Strategy 4.4: Regularly report on progress toward achieving the goals of the National Viral Hepatitis Action Plan.

How can your organization most effectively report, both internally and to your external stakeholders, on your viral hepatitis programs and how they contribute to the National Viral Hepatitis Action Plan?

Action Planning Sheets

<h1 style="margin: 0;">Action 1</h1>		
Related Goal and Strategy		
Lead Organization		
Partners		
Key Messages and Activities		
Resources Needed to Implement Action (Information, materials, or tools needed to support action)		
Dates	Start	Finish
Expected Reach (Anticipated # of people to be served)		
Expected Impact (Describe what success will look like)		
Contact Person (Name and Phone Number)		

Action 2		
Related Goal and Strategy		
Lead Organization		
Partners		
Key Messages and Activities		
Resources Needed to Implement Action (Information, materials, or tools needed to support action)		
Dates	Start	Finish
Expected Reach (Anticipated # of people to be served)		
Expected Impact (Describe what success will look like)		
Contact Person (Name and Phone Number)		

Action 3		
Related Goal and Strategy		
Lead Organization		
Partners		
Key Messages and Activities		
Resources Needed to Implement Action (Information, materials, or tools needed to support action)		
Dates	Start	Finish
Expected Reach (Anticipated # of people to be served)		
Expected Impact (Describe what success will look like)		
Contact Person (Name and Phone Number)		