



## **Council on Linkages: Strategic Directions, 2011-2015 Administrative Priorities**

**July 28, 2011**

During the Council on Linkages Between Academia and Public Health Practice (Council) strategic planning, several priorities for effective administration of the Council were identified. The Council Chair and staff have begun planning to address these priorities. The following details our anticipated initial steps.

### **Communication: Use communication tools effectively to increase access for diverse audiences to Council initiatives and products.**

The key priority identified in the area of communication was increasing awareness of and access to Council activities and products. Currently, several communication methods are used to disseminate information about the Council and its products. These include: maintaining the Council website, producing and distributing the Council on Linkages Update, publishing news articles on the PHF website, blogging on the PHF Pulse blog, and participating in national conferences and meetings through presentations and exhibits. We propose four initial steps toward enhancing Council communication activities:

- Maintain use of the communication methods listed above, while exploring opportunities to maximize the impact of these communication channels in reaching our broad public health audience.
- Pilot test the addition of Twitter to our current communication strategies as a way to push out information. The pilot test will involve establishing communication goals, a pilot time period, and ways to measure success. This pilot test will be initiated within the next three months.
- Request assistance from Council Representatives to explore how Council Representatives and Member Organizations can help us enhance Council communication strategies.
- Discuss ways to enhance Council communications during the fall/winter Council meeting.

### **Funding: Secure funding to support Council activities.**

Funding is likely to remain a concern for the Council for the foreseeable future. Securing and maintaining adequate funding levels to advance the work of the Council remains a priority for us.

## **Governance: Review governance structure of the Council.**

Two items were identified in the area of governance: holding regular elections for Council leadership and possible expansion of Council leadership to include an executive committee.

1. *Regular Elections.* According to the Council's *Constitution and Bylaws*, Article VI – Council Leadership, the leadership of the Council consists of an elected Chair. The term of the Chair is two years, and there is no limit to the number of terms a Council Representative can serve in this position. All Council Representatives who have served a minimum of two years and have worked in public health practice are eligible to stand for election. Each Council Member Organization, through its Representative, has one vote in the election, and the result is determined by a majority affirmative vote.<sup>1</sup> Preparation for an election for the Council Chair position has begun. A request for nominations has been distributed. Voting is expected to occur in mid-July, with the winner announced at the July meeting of the Council.
2. *Executive Committee.* The idea of establishing a formal executive committee to assist in governing the Council has been previously considered. Currently, the Chairs of the Council Workgroups and Task Force serve as an informal executive committee that conducts Council business in between Council meetings. The Council Chair monitors the work conducted and reports to the full Council. This arrangement has served the Council well over the years and has enabled flexibility in responding to changing circumstances.

## **Membership: Explore desirability of and opportunities for Council membership expansion and diversification.**

Two priorities under the umbrella of membership have been identified: expansion and engagement.

1. *Council Membership Expansion.* The question of whether expansion of the Council's membership would be desirable has been raised. Some Council members have proposed expanding Council membership, while others have expressed concern over membership growth. We would like to be strategic about any decisions that are made and request that the Council revisit this topic at a future meeting.
2. *Council Member Engagement.* Prior to considering expanding Council membership, we propose to maximize engagement of existing Council members. Each Council Representative is responsible for serving as a communication liaison between the Council and his/her Member Organization and constituency, engaging in the business of the Council at meetings, and contributing to the development of Council resources. Council Representatives have the opportunity to participate more extensively in Council initiatives through involvement with Council workgroups. Building on this foundation, we propose the following initial steps to increase engagement:
  - More clearly communicate to new Council Representatives the activities of the Council and opportunities for involvement.

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<sup>1</sup> Council on Linkages Between Academia and Public Health Practice. (2006). Council on Linkages Between Academia and Public Health Practice: Constitution and Bylaws.

- Periodically remind Council Representatives of ongoing activities and opportunities to become involved.
- Actively request Council Representative assistance in communicating Council activities to our broad public health audience through activities such as writing for the PHF Pulse blog.
- Contact all Council Member Organizations to discuss the Council and its future directions. The Council Chair and Director will speak via conference call with the Representative, director/CEO, and staff contact of each Council Member Organization within the next six to nine months.

To assist in accomplishing these initial steps, we will be asking all Council Representatives to provide current professional information, including an updated CV and brief biography, within the next three months.

**Staffing: Maintain Council staffing and convening role of the Public Health Foundation.**

Staffing of the Council is closely tied to Council funding and, as such, will likely continue to be an area of concern. Maintaining adequate staffing levels to support a productive Council remains a priority for us.

**Technology: Explore uses of technology to facilitate Council activities.**

Technology priorities center on the use of technology to efficiently conduct Council activities. A key Council activity is communication and the use of technological tools, such as the Council website, the PHF Pulse blog, and Twitter, within communication efforts was discussed above under the priorities for Communication. Many of the communication methods used to disseminate information to the public also serve as means to disseminate information to Council Representatives and Member Organizations. Additionally, we propose to:

- Redesign the Council workgroup pages within our website to become more of a “home” for workgroup activities where all relevant information, such as current activities, resources under development, and upcoming meetings, can be accessed. This redesign will begin within the next three months.
- Request assistance from Council Representatives to help us identify ways to maximize the value obtained from the technologies we currently use and investigate promising new technologies and their potential value for the Council.

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We are committed to the continued success of the Council on Linkages Between Academia and Public Health Practice. Feedback and ideas related to administrative issues are welcome from Council members at any time.