



BME STRATEGIES



Merrimack Valley communities, safer and stronger together

# MERRIMACK VALLEY PUBLIC HEALTH ALLIANCE STRATEGIC PLAN 2026 - 2030

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# SECTION 1: OVERVIEW

## 1.1 EXECUTIVE SUMMARY

The Merrimack Valley Public Health Alliance (MVPHA) engaged in a strategic planning process as part of the Public Health Excellence (PHE) Grant for Shared Services. The strategic planning process was supported by BME Strategies and occurred from February to June of 2025. The resulting strategic plan, outlined here, details an overview of the strategic planning process, final mission and vision statements and guiding principles, five-year strategic priorities and goals, and one-year objectives. The plan outlines initial steps for future implementation and sustainability planning. The strategic plan is for a five-year period from 2026-2030.

## MISSION

The mission of the Merrimack Valley Public Health Alliance is to meet member communities' public health needs through collaboration, public education, and increased efficiency.

## VISION

We envision a coalition that efficiently and proactively shares and provides resources to protect and enhance the well-being of all member communities.

## GUIDING PRINCIPLES

- *We strive to provide the highest level of public health services.*
- *We are motivated by integrity and ensuring that Board of Health powers are used to produce positive outcomes for community members.*

## STRATEGIC PRIORITIES



**Ensure all shared and municipal staff have the training and certifications required to meet administrative and public health needs.**



**Improve public health communication to residents across the region.**



**Prioritize high-quality and proactive public health programming and performance among member communities.**



**Ensure the long-term sustainability of shared public health within our region.**



**Ensure MVPHA's ongoing commitment to health and racial equity.**

A detailed set of five-year goals and one-year objectives mapped to the aforementioned strategic priorities are outlined in the strategic plan.

## 1.2 CONTEXT

The Merrimack Valley Public Health Alliance (MVPHA) was formed in July of 2023, as part of the Public Health Excellence (PHE) Grant for Shared Services. MVPHA currently consists of seven member municipalities: Amesbury (host municipality), Georgetown, Groveland, Merrimac, Newbury, Rowley, and West Newbury.

Since its inception, MVPHA spent the majority of fiscal year 2024 (FY24) working on and signing an intermunicipal agreement. In FY25, a regional health inspector and public health nurse were hired and the Alliance engaged in a strategic planning process supported by the consulting team of BME Strategies from February through June of 2025. The purpose of the strategic planning process was to develop a roadmap to outline the Alliance's purpose and long-term goals, which is detailed in this document.

## 1.3 PROCESS OVERVIEW & BOARD APPROVAL

MVPHA's strategic planning process began in February 2025 and concluded in June 2025. The group met monthly to discuss, provide feedback, and vote on key elements of the strategic plan. The strategic planning process consisted of three main phases: preparation, design, and finalization. The preparation phase spanned from February through April and resulted in the development of a mission, vision, and guiding principles. The design phase spanned from April through May and resulted in the development of strategic priorities, five-year goals, and one-year objectives. The finalization phase spanned from May through June and resulted in an implementation roadmap and final strategic plan.

During the preparation phase, one-on-one stakeholder engagement interviews were conducted. The purpose of the stakeholder engagement interviews was to glean additional insight and context important to the development of strategic priorities, goals, and objectives in the design phase of planning. Six individuals were interviewed, including members of the MVPHA Advisory Board, MVPHA Regional Staff, and active board of health members of MVPHA member towns. Additional details on key themes resulting from this exercise and analysis can be found in the Environmental Scan.

The BME Strategies consulting team supported the strategic planning process. The primary MVPHA members involved in the strategic planning process included:

- Ann Marie Casey, Chief of Staff, Amesbury
- Jim Wilson, Building Inspector and Interim Health Director, Amesbury
- Deb Ketchen, Health Agent, Amesbury and Merrimac
- Bill Holt, Health Director, Georgetown
- Rosemary Decie, Health Agent, Groveland
- Chris Berube, Board of Health Chair, Merrimac
- Deb Rogers, Health Director, Newbury
- Frank Marchegiani, Health Director, Rowley
- Paul Sevigney, Health Agent, West Newbury
- Collin Schaefer, Regional Health Inspector
- Pam Palombo, Regional Public Health Nurse
- Erika Syokau, Shared Services Coordinator, BME Strategies
- Cynthia Baker, Senior Public Health Consultant, BME Strategies

## BOARD APPROVAL

On June 23, 2025, the MVPHA Advisory Board voted to adopt the plan.

# SECTION 2: MISSION, VISION, & GUIDING PRINCIPLES

Mission statements are traditionally action-oriented and describe an organization's purpose. Vision statements describe the difference an organization intends to make in the world and the statements seek to inspire organizations to achieve long-term goals. Guiding principles create a framework for an organization's decisions and are aligned with its values; they serve as guidelines and values for decision-making and behavior.

Generating MVPHA's mission, vision, and guiding principles began with a visioning exercise to obtain input from Alliance members on their public health values and the Alliance's greatest hopes, needs, and concerns. The results of this exercise were used to develop drafts of a mission, vision, and guiding principles, which were sent out to Alliance members for review and feedback. The final versions of the mission, vision, and guiding principles were presented and voted on at the April MVPHA strategic planning meeting.

## MISSION STATEMENT

The mission of the Merrimack Valley Public Health Alliance is to meet member communities' public health needs through collaboration, public education, and increased efficiency.

## VISION STATEMENT

We envision a coalition that efficiently and proactively shares and provides resources to protect and enhance the well-being of all member communities.

## GUIDING PRINCIPLES

We strive to provide the highest level of public health services.

We are motivated by integrity and ensuring that Board of Health powers are used to produce positive outcomes for community members.

# SECTION 3: STRATEGIC PRIORITIES, GOALS, & OBJECTIVES

Strategic priorities are traditionally the main focus areas of a strategic plan to be accomplished in a five-year timeframe. Goals typically describe a general, long-term (five-year) aspiration, while objectives are specific, measurable actions that can be taken to achieve goals and strategic priorities in the short term (one-year). Goals and objectives are mapped to strategic priorities.

Generating MVPHA's strategic priorities, goals, and objectives began with a strengths, weaknesses, opportunities, threats, inclusion, and equity (SWOTIE) activity to obtain input from Alliance members on the biggest areas of need. The results of this exercise, along with feedback from one-on-one interviews with key stakeholders and a crosswalk analysis of gaps in performance standards, were used to develop drafts of strategic priorities, goals, and objectives, which were sent out to Alliance members for review and feedback. The final versions of the mission, vision, and guiding principles were presented and voted on at the May MVPHA strategic planning meeting.

## **Strategic Priority 1 (5-year timeframe):**

Ensure all shared and municipal staff have the training and certifications required to meet administrative and public health needs.

## **Goal 1 (5-year timeframe):**

Create a standard operating procedure (SOP) amongst member communities within shared service arrangement (SSA) to attend and share training needs and opportunities.

## **Objectives 1.1-1.3 (1-year timeframe):**

1.1 SSA staff identify member communities with expertise in specific performance standard content areas (tobacco use prevention, food protection, housing, administration, community sanitation, environmental protection, and disease control and prevention), identify helpful trainings, and create resources for member communities requiring assistance.

1.2 Determine shared staff and member communities' specific training needs and create a mechanism to track when trainings have been completed.

1.3 Create annual training plans incorporating Alliance-wide and individual needs to attain and maintain certifications and provide better planning for training scheduling.

**Strategic Priority 2 (5-year timeframe):**

Improve public health communication to residents across the region.

**Goal 2 (5-year timeframe):**

Develop robust public engagement tools and practices to inform, educate, and engage with the public about the SSA.

**Objectives 2.1-2.5 (1-year timeframe):**

2.1 Utilize SSA website to inform the public and shared communities of ongoing coalition work, announcements, and resources.

2.2 Develop a content creation cadence to present important coalition meeting decisions and public health content (including findings of strategic planning process) to the public and municipal leadership.

2.3 Determine a mechanism for soliciting public questions and feedback about the SSA and its work (e.g., website comment submission).

2.4 Create an “MVPHA Communications Packet” for tabling events.

2.5 Create MVPHA social media presence on relevant platforms that is regularly updated with communications.

**Strategic Priority 3 (5-year timeframe):**

Prioritize high-quality and proactive public health programming and performance among member communities.

**Goal 3 (5-year timeframe):**

Ensure that all member towns meet 100% of the Performance Standards (PS) and Foundational Public Health Services (FPHS), as required by MA DPH.

**Objectives 3.1-3.5 (1-year timeframe):**

3.1 Establish mechanisms for ongoing monitoring and evaluation of infectious disease case investigation activities and epidemiological trends to maintain high standards of quality and efficiency, identifying and addressing areas for improvement as necessary.

3.2 Assess staffing and workload to allocate resources effectively for infectious diseases investigations and epidemiology, adjusting shared staffing models as needed for sustainability and ensuring coverage with backup staff when necessary.

3.3 Assess staffing and workload to allocate resources effectively for all inspections, adjusting shared staffing models as needed for sustainability and ensuring coverage with backup staff when necessary.

3.4 Ensure that major gaps identified in the crosswalk analysis relating to tobacco use prevention and disease control and prevention are fully addressed.

3.5 Develop a plan to address recommendations from MA DPH on meeting FPHS.

**Strategic Priority 4 (5-year timeframe):**

Ensure the long-term sustainability of shared public health within our region.

**Goal 4 (5-year timeframe):**

Determine financial and operational resources, processes, and procedures to ensure that MVPHA is prepared for long-term success.

**Objectives 4.1-4.5 (1-year timeframe):**

4.1 Develop written standard operating procedures (SOPs) for key shared services processes (e.g., process for hiring shared staff, example shared staff job descriptions, process for requesting assistance from each other on achieving PS and/or FPHS).

4.2 Appropriate administrative staff is hired and/or identified to search and apply for relevant grants.

4.3 Appropriate administrative staff is hired and/or identified to search for grants and apply for one additional grant to continue to support MVPHA's shared public health work.

4.4 Create a mechanism to request support from SSA shared staff.

4.5 Create a mechanism to identify and pool additional, non-PHE funds that can strengthen SSA activities (e.g., opioid settlement funds).

**Strategic Priority 5 (5-year timeframe):**

Ensure MVPHA's ongoing commitment to health and racial equity.

**Goal 5 (5-year timeframe):**

Address the needs of underserved and high-need populations in the region.

**Objectives 5.1-5.5 (5-year timeframe):**

5.1 Review available state and local data sources to determine specific populations with the highest infectious disease, chronic disease, and behavioral health needs across member communities.

5.2 Identify environmental justice population areas in the region and reach out to organizations providing direct services to Environmental Justice Block Grant recipients to inform areas of unmet needs and opportunities to collaborate.

5.3 Create a subcommittee/task force to focus on regional hoarding issues and mitigation strategies.

5.4 Provide ongoing, required racial equity training for shared services staff and municipal staff.

5.5 Provide ongoing training about cultural humility, culturally responsive services, and trauma-informed services for shared service staff and municipal staff.



# SECTION 4:

## FUTURE PLANNING

### 4.1 EXTERNAL FACTORS

Moving forward, it is important to keep in mind external factors outside of the immediate work of the Alliance that may impact MVPHA's shared services work. This will allow for proactive planning to potentially mediate and address barriers that may arise from these external factors. External trends, events, or other factors that may impact MVPHA's work include:

- Current levels of available federal funding for shared services work due to political climate
- Foundational Public Health Services (FPHS) rollout by the Massachusetts Department of Public Health's Office of Local and Regional Health
- Downstream impacts of State Action for Public Health Excellence (SAPHE) 2.0
- Opioid settlement funds and resulting potential for sharing of additional funding

### 4.2 KEY FACTORS TO SUPPORT LONG-TERM SUSTAINABILITY

Similar to external factors, it is also pivotal to engage in sustainability planning to ensure MVPHA's ongoing success and move towards long-term financial and operational independence. Strategic Priority 4 seeks to address and plan for long-term sustainability. However, long-term sustainability will need to remain an ongoing planning item to ensure MVPHA's success. Key factors to support long-term sustainability include:

- Process for adding additional member towns to the shared service arrangement
- Regular grant application submission for a variety of funding sources and types
- Work towards becoming part of town budgets
- Identification of public/private partnerships

### 4.3 YEAR ONE IMPLEMENTATION

MVPHA will track progress in achieving its strategic priorities, goals, and objectives using a methodical process, a tracking tool, and review meetings. Objectives will be incorporated into the FY26 work planning process and tracker provided by the Massachusetts Department of Public Health's Office of Local and Regional Health, with specific activities outlined to meet objectives. Regional staff will provide updates to the Shared Services Coordinator at monthly regional staff meetings. Every four months, the regional staff and Shared Services Coordinator will provide updates on the strategic plan to the advisory board. Below is a table with a high-level overview of MVPHA's strategic priorities, goals, and objectives, which includes anticipated objective timelines and owners. On an annual basis, the Advisory Board will review the strategic plan priorities, goals, and objectives to ensure continued alignment, make any necessary amendments based on progress to date and external impacts, and set the objectives and activities for the next fiscal year.

## GOALS AND OBJECTIVES

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Strategic Priority	Five-Year Goals	One-Year Objectives	Timeline	Owner(s)
1. Ensure all shared and municipal staff have the training and certifications required to meet administrative and public health needs.	1. Create a standard operating procedure (SOP) amongst member communities within shared service arrangement (SSA) to attend and share training needs and opportunities.	1.1 SSA staff identify member communities with expertise in specific performance standard content areas (tobacco use prevention, food protection, housing, administration, community sanitation, environmental protection, and disease control and prevention), identify helpful trainings, and create resources for member communities requiring assistance.	Y1	Regional inspector (RI), regional nurse (RN), and shared services coordinator (SSC)
		1.2 Determine shared staff and member communities' specific training needs and create a mechanism to track when trainings have been completed.	Y1	RI, RN, and SSC
		1.3 Create annual training plans incorporating Alliance-wide and individual needs to attain and maintain certifications and provide better planning for training scheduling.	Ongoing	RI, RN, and SSC
2. Improve public health communication to residents across the region.	2. Develop robust public engagement tools and practices to inform, educate, and engage with the public about the SSA.	2.1 Utilize SSA website to inform the public and shared communities of ongoing coalition work, announcements, and resources.	Ongoing	RI, RN, SSC, Admin Staff, and Advisory Board
		2.2 Develop a content creation cadence to present important coalition meeting decisions and public health content (including findings of strategic planning process) to the public and municipal leadership.	Y1	RI, RN, Admin Staff, SSC
		2.3 Determine a mechanism for soliciting public questions and feedback about the SSA and its work (e.g., website comment submission).	Y1	RI, RN, and SSC

## GOALS AND OBJECTIVES

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Strategic Priority	Five-Year Goals	One-Year Objectives	Timeline	Owner(s)
		2.4 Create an, "MVPHA Communications Packet," for tabling events.	Y1	RI, RN, and SSC
		2.5 Create MVPHA social media presence on relevant platforms that is regularly updated with communications.	Y1 and ongoing	RI, RN, and SSC
3. Prioritize high-quality and proactive public health programming and performance among member communities.	3. Ensure that all member towns meet 100% of the Performance Standards (PS) and Foundational Public Health Services (FPHS), as required by MA DPH.	3.1 Establish mechanisms for ongoing monitoring and evaluation of infectious disease case investigation activities and epidemiological trends to maintain high standards of quality and efficiency, identifying and addressing areas for improvement as necessary.	Y1 and ongoing	RN
		3.2 Assess staffing and workload to allocate resources effectively for infectious diseases investigations and epidemiology, adjusting shared staffing models as needed for sustainability and ensuring coverage with backup staff when necessary.	Y1 and ongoing	RN and SSC
		3.3 Assess staffing and workload to allocate resources effectively for all inspections, adjusting shared staffing models as needed for sustainability and ensuring coverage with backup staff when necessary.	Y1 and ongoing	RI and SSC
		3.4 Ensure that major gaps identified in the crosswalk analysis relating to tobacco use prevention and disease control and prevention are fully addressed.	Y1	RI, RN, and SSC
		3.5 Develop a plan to address recommendations from MA DPH on meeting FPHS.	Ongoing	RI, RN, and SSC

## GOALS AND OBJECTIVES

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Strategic Priority	Five-Year Goals	One-Year Objectives	Timeline	Owner(s)
4. Ensure the long-term sustainability of shared public health within our region.	4. Determine financial and operational resources, processes, and procedures to ensure that MVPHA is prepared for long-term success.	4.1 Develop written standard operating procedures (SOPs) for key shared services processes (e.g., process for hiring shared staff, example shared staff job descriptions, process for requesting assistance from each other on achieving PS and/or FPHS).	Y1	SSC
		4.2 Appropriate administrative staff is hired and/or identified to search and apply for relevant grants.	Y1	SSC
		4.3 Appropriate administrative staff is hired and/or identified to search for grants and apply for one additional grant to continue to support MVPHA's shared public health work.	Y1	SSC and Admin Staff
		4.4 Create a mechanism to request support from SSA shared staff.	Y1	RN, RI, Admin Staff and SSC
		4.5 Create a mechanism to identify and pool additional, non-PHE funds that can strengthen SSA activities (e.g., opioid settlement funds).	Y1	RN, RI, Admin Staff and SSC
5. Ensure MVPHA's ongoing commitment to health and racial equity.	5. Address the needs of underserved and high-need populations in the region.	5.1 Review available state and local data sources to determine specific populations with the highest infectious disease, chronic disease, and behavioral health needs across member communities.	Y1 and ongoing	RN and SSC

## GOALS AND OBJECTIVES

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Strategic Priority	Five-Year Goals	One-Year Objectives	Timeline	Owner(s)
		5.2 Identify environmental justice population areas in the region and reach out to organizations providing direct services to Environmental Justice Block Grant recipients to inform areas of unmet needs and opportunities to collaborate.	Y1 and ongoing	RN and SSC
		5.3 Create a subcommittee/task force to focus on regional hoarding issues and mitigation strategies.	Y1	RI, RN, and SSC
		5.4 Provide ongoing, required racial equity training for shared services staff and municipal staff.	Ongoing	SSC
		5.5 Provide ongoing training about cultural humility, culturally responsive services, and trauma-informed services for shared service staff and municipal staff.	Ongoing	SSC