Other Focus Areas:
ÅAccess to Care
ÅBreast Health
ÅCultural Competency
ÅDomestic Violence & Sexual Assault
ÅEmergency Preparedness
ÅHealthy Eating & Active Living
ÅHealth Literacy
ÅParenting & Prenatal Education
ÅWorkforce Development

Target Audience
Adolescent
Children
Elderly
GLBTQ
Men
Women

Goal Statement	Target Audience	Metric	Baseline FY 2012	Goal FY 2013
Chronic Disease (i.e. Asthma, Cancer, Cardiovascular Disease, Diabetes, Stroke)				
Increase participation in classes and risk screenings for the prevention of chronic disease by 15%	Immigrants; Individuals classified as ñat-riskò	Number of adults who participate in risk screenings and classes	362	434
Increase the number of classes that provide chronic disease management tools by 20%	Primary Service Area	Number of classes	38	46
Provide grant opportunity to community organizations to fund innovative chronic disease program	Primary Service Area	Grants awarded	No	Yes
Mental Health/Stress				
Increase the number of stress/mental health programs offered to the community by 30%	Adults, Teens, Women and Men	Number of programs	13	17
Increase the number of participants by 15% in stress management programs	Adults, Teens, Women and Men	Number of participants	162	186
Provide grant opportunities to community organizations to fund innovative mental health initiatives	Primary Service Area	Grants awarded	No	Yes
Substance Abuse (i.e. Alcohol, Opiates, Tobacco)				
Increase number of prevention and education programs offered	Adults and children	Number of programs	1	4
Increase number of participants in intervention programs by 20%	Individuals affected by substance abuse	Number of participants	14	17
Provide grant opportunities to community organizations to fund innovative substance abuse programs	Primary Service Area	Grants awarded	No	Yes
Community Health Improvement				
Actively participate in collaboration and capacity building within the community	Primary Service Area	Average hours per month staff actively participate in coalitions and task forces	5.5	8
Continue to provide financial support and leadership to the Greater Lowell Health Alliance	Greater Lowell Health Alliance	Staff hours dedicated to task forces	87	100

Program Scorecard

	Key Strategic Measures
Chronic Disease	-Participation in classes -Number of Chronic Disease Self-Management and Diabetes Self-Management classes -Track number and type of support Groups that occur -Increase the number of Diabetes programs offered to the community -Increase number of risk screenings for cardiovascular disease -Increase number of information sessions on warning signs and symptoms -Award organization(s) with mini grant to accomplish an innovative program(s) in regards to Chronic Disease
Stress/Mental Health	-Increase the number of programs offered to the community for stress and mental health -Increase number of participants in classes and events -Provide grant opportunities to community organizations to help them with their efforts in regards to mental health -Award organization(s) with mini grant to accomplish innovative program within Mental Health
Substance Abuse	-Continue to host Al-Anon and AWOL weekly meetings - Continue to coordinate and track the Freedom from Smoking program - Educational programs on opiates, and prescription drugs - Award organization(s) with mini grant to accomplish innovative program within Substance abuse
Community Health Improvement	- Participate in over 15 community coalitions and task forces - Host meetings for community-based organizations - Participate in community events including health fairs and public health campaigns -Financial support for the GLHA -Provide leadership to the GLHA task forces (i.e. Tobacco, Healthy Weight, Cultural Competence)