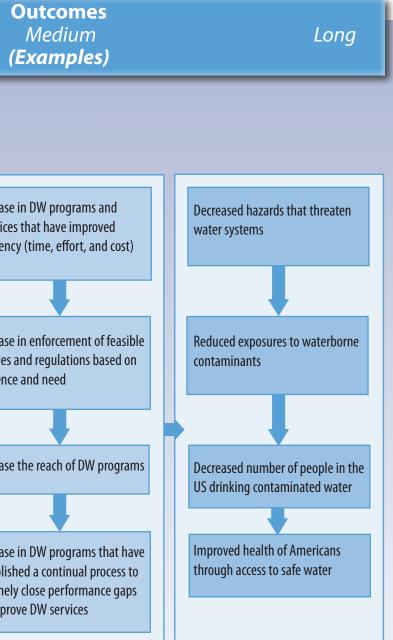
## **Logic Model**

## Using the Environmental Public Health Performance Standards to Improve Program Performance to Control Drinking Water Exposures

| Inputs   |   | Activities<br>(Examples  | ;) | Outputs  |    | Short   | (                                  |
|--|---|--|----|--|----|---|------------------------------------|
| Drinking water<br>programs and   |   | Strategy: Improve drinking water (DW) program efficiency and effectiveness by closing programmatic gaps  | ]  |  |    |   |                                    |
| activities:<br>Public and private<br>partnerships<br>Proven experience   |   | <ul> <li>Organize DW quality, water system and health data in a format that aids clear communication and interpretation by the public and policy makers.</li> <li>Collect and use DW hazard, exposure, and health outcome data from a range of sources involved in environmental and public health protection (e.g. epidemiology, disease registries, tracking partners, local and state departments of environmental quality).</li> </ul> |    | <ul> <li>Surveillance systems established</li> <li>The timely processing of DW samples &amp; inspections</li> <li>Investigations/assessments completed to relate DW problems to environmental factors</li> <li>The implementation of community meetings with diverse representation</li> <li>The delivery of targeted DW educational activities (social media, web, etc.)</li> <li>Partnerships/coalitions establshed</li> </ul> |    |   | Increase<br>practice<br>efficience |
| in water program<br>management<br>Completed<br>performance<br>assessment of DW<br>program using<br>the 10 essential<br>services, including<br>gap analysis and |   | Develop partnerships with epidemiologists, statisticians, laboratory professionals, toxicologists, hydrologists, and others needed to assist in analyzing DW program data (hazards, exposures, health outcomes).   |    |  | th | Increase in community awareness<br>of DW problems, hazards,<br>exposures and related illness                        |                                    |
|  |   | Establish working environments/coalitions so that multiple partners<br>(e.g., health department, planning and zoning, public works, building,<br>environmental advocacy groups, and the media) have a forum to work<br>together on DW education and promotion activities.  |    |  |    |   | Increase<br>policies a<br>evidence |
|  |   | Develop partnerships among government agencies and the private sector to enhance DW program effectiveness.   |    |  |    | Increase in awareness and<br>knowledge about the policies/<br>regulations that affect DW                            | Increase                           |
| performance<br>improvement plan<br>to address gaps   | • | Promote prevention and protection policies for community members who<br>bear a disproportionate burden of disease, or that are at greater risk of<br>exposure to DW hazards.   |    | A plan to revise and create feasible new policies/   |    |   | Increase                           |
| Leveraged funding  |   | Organize the updating and/or modification of existing, or new laws, regulations, and ordinances designed to assure and improve DW protection programs and DW quality.  | •  | <ul> <li>regulations/ recommendations</li> <li>A plan to collect standardized data to identify</li> </ul>  |    | Increase in the willingness   | establisi<br>routinel<br>to impro  |
| Policy environment   |   | Create and provide leadership for work groups of multiple agencies that<br>have responsibility for assuring that DW program services delivery system is<br>coordinated, timely and responsive to all community members.  |    | <ul> <li>hazards and exposures</li> <li>An evidence-based intervention plan to identify &amp; remove hazards</li> </ul>  |    | of partner organizations to<br>collaborate in evidence-based<br>activities to reduce exposure to<br>DW contaminants |                                    |
| CDC:   |   | Communicate workforce gaps and needs to appropriate stakeholders<br>(governing bodies, advisory groups, academic institutions, and public and<br>private agencies) that have the capabilities to effect change.  |    | A written, inclusive workforce improvement plan to assure timely delivery of DW services   |    | •   |                                    |
| Technical Assistance,  |   | Develop an activity to assess and measure the satisfaction of stakeholders<br>and residents with drinking water services program that includes a process to<br>provide increased quality of services.  |    | A plan to assess the improvement of customer satisfaction  |    | Increase customer satisfaction with DW services   |                                    |
| Training, Guidance   |   | Develop partnerships with colleges, universities and research organizations needed to conduct drinking water research to improve program performance.  |    | A written agreement between DW researchers to prioritize issues and share findings   |    |   | -                                  |



## **Program Scope**

- Safe water activities focus on individuals and systems not protected by the Safe Drinking Water Act.
- Safe water priorities are to improve drinking water program performance and reduce exposure to waterborne contaminants in the US.