Form Approved
OMB No. 0990-NEW
Exp. Date 06/30/2010

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990- . The time required to complete this information collection is estimated to average 1 hour, 30 minutes to complete, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

ONC Community College Consortium Operations Plan

This operations plan template is a guide for each Community College Consortium (CCC) and member Co
describe their plan for contributing to the Program's shared goal of training 10,000 graduates per year ov
Please click on Instructions for abbreviated instructions on using this Operations Plan tool. Please see th
"Guidelines for CCC Operations Planning" for detailed instructions and guidance on completing this plan.

Version history

CCC/CC Update Version	CCC/CC Point of contact	CCC/CC approval date
1.00	Sally Smith	2/25/2010
e.g., XXXXXX	*name of primary author*	*e.g., mm/dd/yy*

mmunity Colleges (CC) to
er time.
e accompanying

ONC approval date	ONC approver
2/28/2010	John Project Officer

e.g., mm/dd/yy *name of ONC approver*

ONC Regional Extensio

Please see the "REC Operations

General instructions
Contacts
Mission & vision
Service area
Student enrollment

CCC Milestones
Org chart
Staff
Sub-recipients
Stakeholders
Key activities

Gantt chart
Risk mitigation

›n Center Operations Plan -- Description and Abbreviated Instructions

Planning Guidelines" for more detailed information on the Operational Plan

The Operations Plan is the principle planning document for the CCC. Like a business plan, it describes the goals & objectives of the CCC and how the CCC proposes to achieve these goals &

This Operations Plan template is provided to each REC as an aid to creating a realistic plan for meeting the REC's goals, and to standardize basic data collection and terminology to allow tracking and information-sharing across RECs.

This template is designed to capture structured data consistently across the entire CCC program. Please do not alter the templates outside of the data input fields shaded in orange, as indicated in the legend to the left.

In addition to the brief instructions provided here, more detailed guidance can be found in the "CCC Operational Planning Guideline" document.

Please enter contact information for the CCC and its Sub-Recipients as appropriate. (Note: Sub-recipients are those organizations or contractors that will receive Federal money for performing CCC activities.) This will be the main input to ONC's CCC contact list so please keep it updated as often as necessary.

The Mission Statement and Vision Statements are vital for setting the course of the CCC over the next two years. The Mission & Vision section is designed to capture the CCCs high-level statement about who it serves, what it would like to accomplish, why its services are valuable, and ultimately how the CCC's activities will train the requisite number of HIT professionals. Ideally, the mission and vision should define the CCCs ambitions in a way that is meaningful to the CCCs member Community Colleges and stakeholders.

Key questions that the mission statement should address are:
• Who will the CCC serve?
• What does the CCC want to accomplish?
• What value will the CCC provide and why is it well-positioned to accomplish its objectives?

Key question that the vision statement should address are:
• The training capacity that the consortium will achieve after two years
• Percent of students that are employed in Health Information Technology

Geographic service area defines the state/territory, counties, and zip codes in which the REC will operate. For multi-state RECs, please enter state, county, and zip codes for each state separately in the columns provided. County and zip code information may be pasted into the worksheet from sources such as www.downloadzipcode.com or the US Postal Service.

The consortium as a whole will provide training in all the ONC defined six workforce roles. Number of students enrolled in each of the six workforce roles? What are the professionals backgrounds of the students?

main milestones identified in the FOA, which are:
Enrollment
• Milestone 1: Number of students enrolled in the programs supported by this initiative
• Milestone 2: Number of students graduating from programs supported by this initiative
Workforce Training Roles
• Milestone 3: Training in how many of the six workforce roles are being provided
Employment and Earnings
• Milestone 4: Employment rate – percent of students employed in first quarter after exit from the program
• Milestone 5: Employment retention rate – percent of students employed in first quarter after exit from the program and still employed in the second and third quarters
• Milestone 6: Average earnings
Please enter the number of new students that you expect to enroll in a given milestone in a given session. For example, if 50 students are expected to enroll in September 2010, record “50” for Milestone 1 (M1) for September, 2010. If an additional 25 students are expected to enroll in January

The Org chart tab highlights the CCC’s relationships with its stakeholders and sub-recipients.

Recognizing that each CCC will have its own job titles for categories, and that individuals may perform more than one function, the Staff tab provides a grid to map CCC personnel to the key CCC functions. As these named individuals will be responsible for participating in National Coordination committee meetings, collaborative learning activities, please provide the names of the individuals who are actually in charge of the function. Please note any positions that have been newly created so these may be reported to meet ARRA reporting requirements. Listed below are definitions of the core functional roles that the CCC is responsible for performing.

Sub-recipients are organizations who will receive federal funds through the Community College Consortium lead awardee. Please fill out all of the information requested.

Each CCC will have a wide variety of stakeholders with whom it will have formal as well as informal relationships that taken together will form the CCCs approach to achieving its objectives. Identifying stakeholder roles, responsibilities, and expectations are critical inputs to the development of a meaningful Operations Plan. Making this information available to ONC and other CCCs will greatly facilitate the development of learning communities and channels for knowledge-sharing across CCCs. The CCC should list all partnerships including partners, contractors and stakeholders with contact information.

To accomplish the goals and objectives of the program each CCC will need to engage in the following activities: 1) Outreach plan for recruiting students and finding employment and placement for the graduates of the program. This would include developing program publicity plan and materials, developing a program Web site 2) Consortia Committee Participation Coordination - Creating a regional partnership of entities that are interested in workforce development. 3) Educational Materials/ Curriculum – design the program in sufficient detail to get the program approved. 4) Dissemination of nationally developed curriculum material. In cases were the nationally developed curriculum developed material is not used, the material should be reviewed to ensure the course materials meet the standards of the centrally developed curriculum. 4) Admission Process – establish admissions criteria and other policies; develop application forms and other materials. 5) Progress reporting and program evaluation – forms and procedures for course evaluation, forms and procedures for overall program evaluation.

The Gantt chart is simply a timeline of the Key activities defined above. The template is designed to provide a simple depiction of the activities and high-level timelines associated with each function. Please enter a "1" into the chart cells to change the color and illustrate the activity timeline. (Note: the months are calculated based on the project start date in the Baseline section)
The HIT programs in the Community Colleges will be new six month programs. The plan should identify barriers and challenges to achieving the goals, objectives and outcomes (outlined on page 14 of the program announcement). It is important that potential risks are identified and that risk mitigation steps are put in place early in the implementation of the HIT programs. This will ensure that CCC managers will be aware of potential risks, will monitor the programs for these risks, and will be prepared to respond rapidly. Risks and mitigation steps may also be shared with other CCCs so all may benefit. This section should also include ALL grant restrictions specified in the CCC's Notice of Grant Award.

Primary contact information - (Lead Institution)

Lead Institution information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts at Lead Institution	
CCC primary contact name	
telephone number	
email address	
CCC secondary contact name	
telephone number	
email address	
ONC GMO name	
telephone number	
email address	
ONC PO name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	

email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	

State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	

email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	

DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

Additional contact information - (CCC Sub-Recipient Office)

Sub-Recipient information	
Organization name	
Street address	
City	
State	
Zip code	
Website	
DUNS number	
Primary contacts	
Sub-Recipient primary contact name	
telephone number	
email address	
Sub-Recipient secondary contact name	
telephone number	
email address	

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.myrecname.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@myrecname.org

enter first and last name
enter 10 digit phone number
e.g., myname@myrecname.org

enter first and last name of ONC Grant Management Officer
enter 10 digit phone number
e.g., name@hhs.gov

enter first and last name of ONC Project Officer
enter 10 digit phone number
e.g., name@hhs.gov

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number

e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield

pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number

e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org

9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter name
e.g., 12 Main Street
e.g., Springfield
pick from drop-down list
e.g., 01234-0000
e.g., www.organization.org
9 digit Dun and Bradstreet Data Universal Numbering System number

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

enter first and last name
enter 10 digit phone number
e.g., myname@organization.org

Mission statement for the CCC Program

Double-click on box to type directly into it; use alt-enter to start new paragraph

Example: The Mission of CCC is to train a skilled workforce to support the adoption of EHRs, exchange health information am
health care providers and public health authorities, and the redesign of workflows within health care settings to gain the quality
and efficiency benefits of EHRs, while maintaining individual privacy and security.

Vision statement for the REC program

Double-click on box to type directly into it; use alt-enter to start new paragraph

Example: Our vision for 2012 is 10,000 students trained in HIT to facilitate a transformed health system through the use of hea
information technology (HIT).

Geographic Service Area

For in counties in top of sheet; scroll down to fill in zip codes

Community College Name #1	*Community College Name #2*
State or territory #1	State or territory #2
Texas	**Alabama**

Full names of counties (Boroughs for Alaska, Parishes for Louisiana)	Full names of counties (Boroughs for Alaska, Parishes for Louisiana)
Aurora	

State or territory #1	State or territory #2
South Dakota	
Zip Codes Represented	Zip Codes Represented
57001	
57002	
57003	
57004	
57005	
57006	
57007	
57010	
57012	
57013	
57014	
57015	
57016	
57017	
57018	
57020	
57021	
57022	
57024	
57025	
57026	
57027	

57028	
57029	
57030	
57031	
57032	
57033	
57034	
57035	
57036	
57037	
57038	
57039	
57040	
57041	57041
57042	57042
57043	57043
57045	57045
57046	57046
57047	57047
57048	57048
57049	57049
57050	57050
57051	57051
57052	57052
57053	57053
57054	57054
57055	57055
57056	57056
57057	57057
57058	57058
57059	57059
57061	57061
57062	57062
57063	57063
57064	57064
57065	57065
57066	57066
57067	57067
57068	57068
57069	57069
57070	57070
57071	57071
57072	57072
57073	57073
57075	57075

57076
57077
57078
57079
57101
57103
57104
57105
57106
57107
57108
57109
57110
57117
57118
57186
57188
57189
57192
57193
57194
57195
57196
57197
57198
57201
57212
57213
57214
57216
57217
57218
57219
57220
57221
57223
57224
57225
57226
57227
57231
57232
57233
57234
57235

57076
57077
57078
57079
57101
57103
57104
57105
57106
57107
57108
57109
57110
57117
57118
57186
57188
57189
57192
57193
57194
57195
57196
57197
57198
57201
57212
57213
57214
57216
57217
57218
57219
57220
57221
57223
57224
57225
57226
57227
57231
57232
57233
57234
57235

57236		57236
57237		57237
57238		57238
57239		57239
57241		57241
57242		57242
57243		57243
57245		57245
57246		57246
57247		57247
57248		57248
57249		57249
57251		57251
57252		57252
57253		57253
57255		57255
57256		57256
57257		57257
57258		57258
57259		57259
57260		57260
57261		57261
57262		57262
57263		57263
57264		57264
57265		57265
57266		57266
57268		57268
57269		57269
57270		57270
57271		57271
57272		57272
57273		57273
57274		57274
57276		57276
57278		57278
57279		57279
57301		57301
57311		57311
57312		57312
57313		57313
57314		57314
57315		57315
57317		57317
57319		57319

57321		57321
57322		57322
57323		57323
57324		57324
57325		57325
57326		57326
57328		57328
57329		57329
57330		57330
57331		57331
57332		57332
57334		57334
57335		57335
57337		57337
57339		57339
57340		57340
57341		57341
57342		57342
57344		57344
57345		57345
57346		57346
57348		57348
57349		57349
57350		57350
57353		57353
57354		57354
57355		57355
57356		57356
57358		57358
57359		57359
57361		57361
57362		57362
57363		57363
57364		57364
57365		57365
57366		57366
57367		57367
57368		57368
57369		57369
57370		57370
57371		57371
57373		57373
57374		57374
57375		57375
57376		57376

57379		57379
57380		57380
57381		57381
57382		57382
57383		57383
57384		57384
57385		57385
57386		57386
57399		57399
57401		57401
57402		57402
57420		57420
57421		57421
57422		57422
57424		57424
57426		57426
57427		57427
57428		57428
57429		57429
57430		57430
57432		57432
57433		57433
57434		57434
57435		57435
57436		57436
57437		57437
57438		57438
57439		57439
57440		57440
57441		57441
57442		57442
57445		57445
57446		57446
57448		57448
57449		57449
57450		57450
57451		57451
57452		57452
57454		57454
57455		57455
57456		57456
57457		57457
57460		57460
57461		57461
57465		57465

57466		57466
57467		57467
57468		57468
57469		57469
57470		57470
57471		57471
57472		57472
57473		57473
57474		57474
57475		57475
57476		57476
57477		57477
57479		57479
57481		57481
57501		57501
57520		57520
57521		57521
57522		57522
57523		57523
57528		57528
57529		57529
57531		57531
57532		57532
57533		57533
57534		57534
57536		57536
57537		57537
57538		57538
57540		57540
57541		57541
57543		57543
57544		57544
57547		57547
57548		57548
57551		57551
57552		57552
57553		57553
57555		57555
57559		57559
57560		57560
57562		57562
57563		57563
57564		57564
57566		57566
57567		57567

57568		57568
57569		57569
57570		57570
57571		57571
57572		57572
57574		57574
57576		57576
57577		57577
57579		57579
57580		57580
57584		57584
57585		57585
57601		57601
57620		57620
57621		57621
57622		57622
57623		57623
57625		57625
57626		57626
57630		57630
57631		57631
57632		57632
57633		57633
57634		57634
57636		57636
57638		57638
57639		57639
57640		57640
57641		57641
57642		57642
57644		57644
57645		57645
57646		57646
57648		57648
57649		57649
57650		57650
57651		57651
57652		57652
57656		57656
57657		57657
57658		57658
57659		57659
57660		57660
57661		57661
57701		57701

57702		57702
57703		57703
57706		57706
57709		57709
57714		57714
57716		57716
57717		57717
57718		57718
57719		57719
57720		57720
57722		57722
57724		57724
57725		57725
57730		57730
57732		57732
57735		57735
57737		57737
57738		57738
57741		57741
57744		57744
57745		57745
57747		57747
57748		57748
57750		57750
57751		57751
57752		57752
57754		57754
57755		57755
57756		57756
57758		57758
57759		57759
57760		57760
57761		57761
57762		57762
57763		57763
57764		57764
57766		57766
57767		57767
57769		57769
57770		57770
57772		57772
57773		57773
57775		57775
57776		57776
57779		57779

57780		57780
57782		57782
57783		57783
57785		57785
57787		57787
57788		57788
57790		57790
57791		57791
57792		57792
57793		57793
57794		57794
57799		57799

CCC Student Enrollment

	Number	
Number trained in each workforce role		
Total number of Students	85	
Practice Workflow/Information Redesign	30	
Clinician/Practitioner consultant	10	
Implementation Support Specialist	15	*Note: The total number of stude*
Implementation Managers	10	
Technical Software Support staff	10	
Trainers	10	
Students Professional Backgrounds		*Note: This is the number for all*
Information Technology	20	
Health related profession	30	

ents should match estimate provided in your FC

the students in the consortium

DA response

CCC/CC Milestones

Baseline version *(last approved milestone baseline)*

Baseline document name	Date
Northern Virginia Community College	4/14/10
enter document name here	mm/dd/yy

CCC starting month	April-10	Note: this date drives baseline months
	Month 2010	

Student Enrollment

Measures	April	May	June	July	August
Milestone baseline					
M1: Number of students enrolled in the program					
M2: Number of students graduating from programs					
M3: Training in how many workforce roles					

Employment and Earnings

Measures	Q 1	Q2	Q3	Q4
Milestone baseline				
M1: Employment rate - percent of students employed in first quarter after exit from program				
M2: Employment retention - percent of students still employed in second and third quarter				
M3: Average earnings				

September	*October*	*November*	*December*	*January*	*February*	*March*	*Total*
	40			45			85
							-
							-

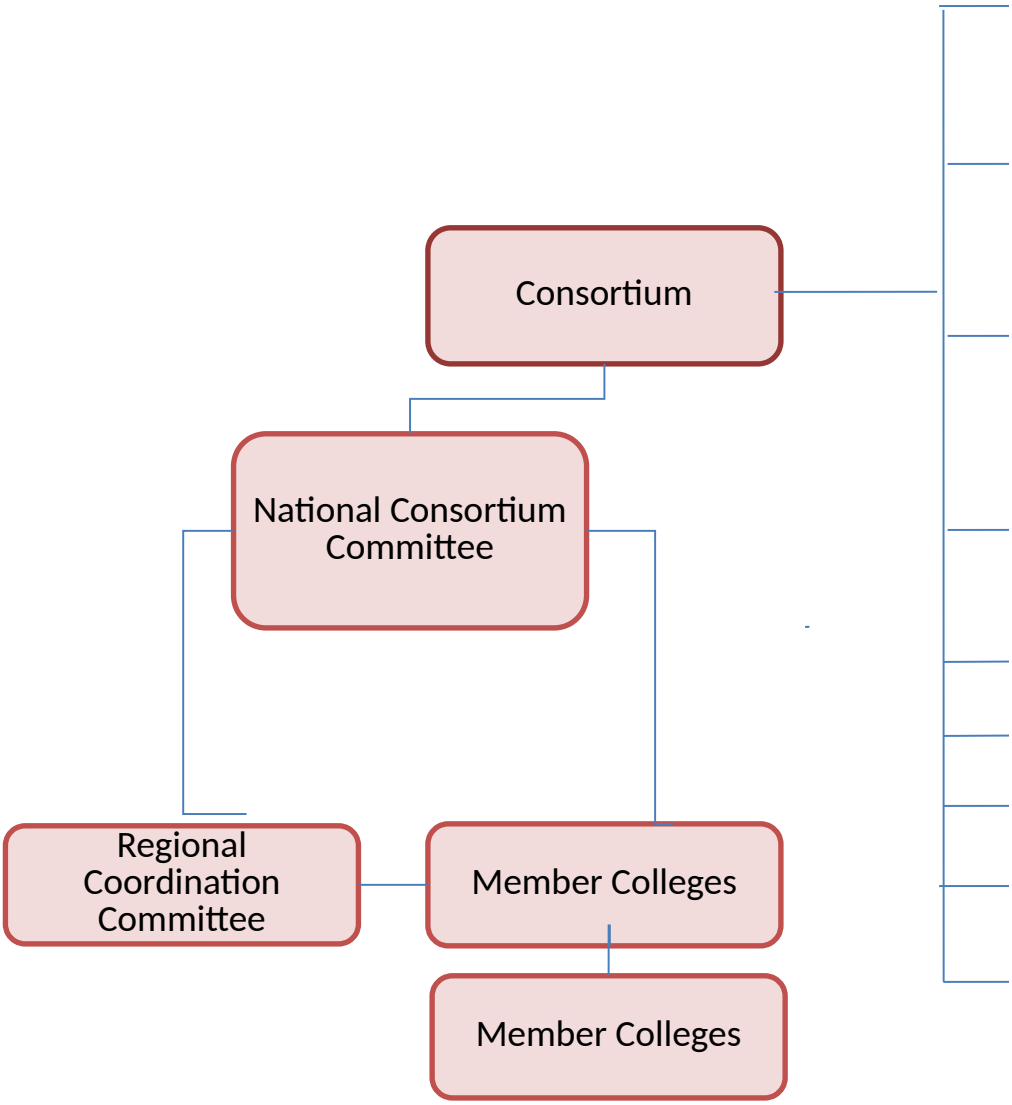
Jump to Front P

Legend

Data entry field
Reference field
Calculated field

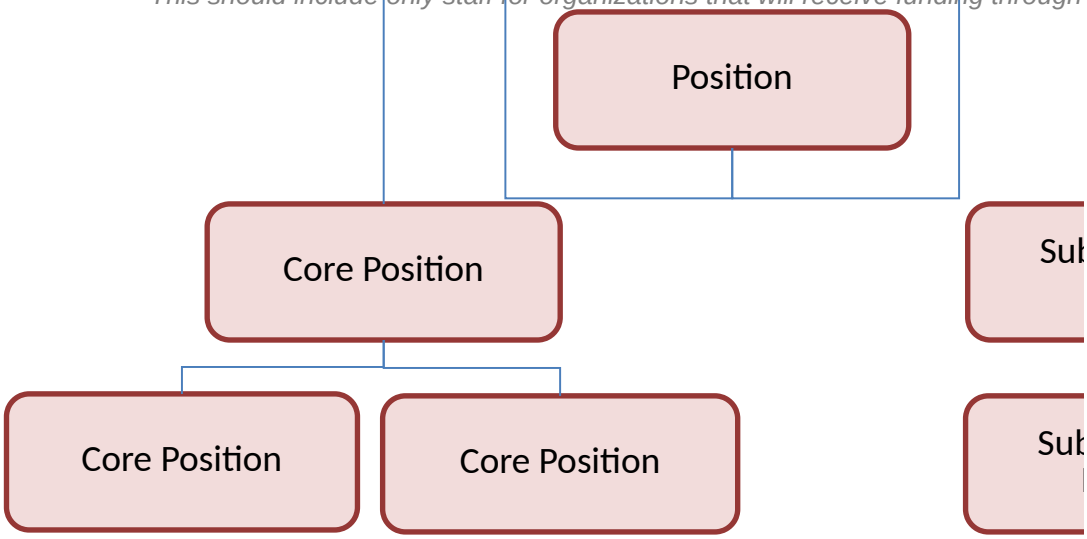
CCC relationships with sub-recipients, partners, and stakehol

Please modify the diagram as appropriate to show how your CCC connects wit



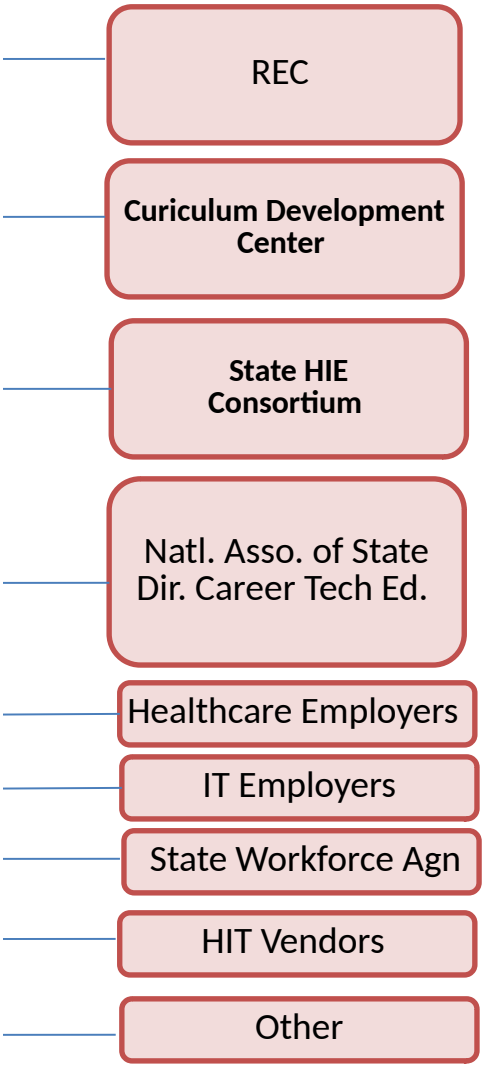
CCC Staff organization chart

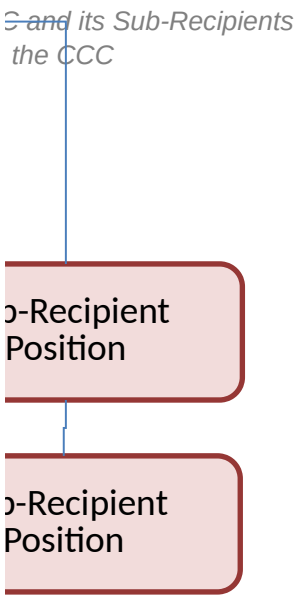
Please modify the diagram as appropriate to show the organization of your CCC
This should include only staff for organizations that will receive funding through



ders

h other stakeholders and partners




C and its Sub-Recipients
the CCC
o-Recipient
Position
o-Recipient
Position

Staff list

CCC/CC functional role	Organization
Authorized Representative	
Project Director	
Finance Lead	
Education and Outreach Coordinator	
Curriculum Specialist	
Training, Retention & Placement Manager	
Faculty	
Faculty	
Faculty	
Other (please specify)	
Other (please specify)	

Role as defined in FOA

Name	Title	Newly Hired? (Y/N)
First name last name	*Position title*	*Y or N*

Phone number	Email

e.g., xxx-xxx-xxxx

Sub-recipient list

Sub Recipient Name	Description of Role in CCC	DUNS number	Street Address

City	State	Congressional District	Amount of Award	Amount of Award Distributioned	Sub Award Date

Stakeholders

Organization type	Organization name
Information Technology Employers	
Health Care Employers	
National Association of State Directors of Career Technical Education Consortium	
Regional Extension Centers	
Federally Qualified Health Centers	
Rural Health Centers	
Other Community Health Centers	
State/Local/Tribal Government (Public health, health care, or other partnering institution)	
State Health Information Exchange Coordinator	
State Medicaid Director	
Health Plans	
Hospital Systems	
Public Hospital	
Critical Access Hospitals	
Laboratories	
Local workforce programs	
Medicare Quality Improvement Organizations	
Federal Stakeholders (HHS regional office, VA, IHS, etc.)	
Other (please specify)	
Other (please specify)	
Other (please specify)	
Other (please specify)	
Other (please specify)	
Other (please specify)	

Contact Name	Phone	Email

Role	Level of Stakeholder Support (levels below)	Affliated National Organization

Consortium Key activities

Insert rows as necessary below

Service area	Description of each activity	Goal of each activity	Outcome
Outreach/Collaboration			
Develop Outreach Communication plan	Set plan for CCC to communicate with associations and organization affiliated with healthcare industry to identify students and faculty for new program	To insure transparency among all healthcare and IT stakeholders and partners of new program and needs	Get support from organizations/ associations to help local MCC with student recruitment and hiring of faculty
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Consortia Committee Participation/Coordination			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Education Materials/Curriculum			
Develop process for approving existing CC curriculum			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Dissemination of Nationally Developed Materials			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Support for faculty recruitment/CC organization support			
activity 1 (please specify)			
activity 2 (please specify)			

activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Progress Reporting and Program Evaluation			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Other			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Other			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Other			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			

General description of the approach to this domain of activities

Short description of each activity and the goal for the activity

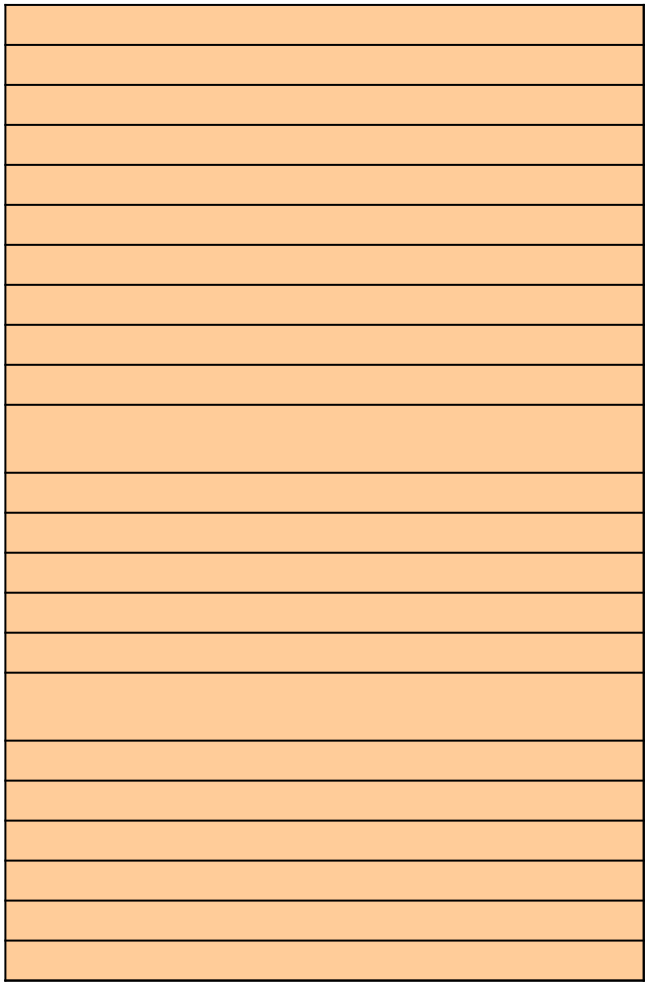
Member Community College Key activities

Insert rows as necessary below

Service area	Description of each activity	Goal of each activity	Dates/Outcomes
Identify Faculty			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Partnerships			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Student Recruitment			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Establish Program Elements			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Career Placement			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Progress Reporting and Program Evaluation			
activity 1 (please specify)			

activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Certification			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Participation In Consortium Activites			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Collaboration with ONC Programs			
activity 1 (please specify)			
activity 2 (please specify)			
activity 3 (please specify)			
activity 4 (please specify)			
activity 5 (please specify)			
Other			

Challenges Requiring Support and/or Assistance



Gantt chart

Please type a "1" in the cell indicating activity/month as per your plan

Insert rows as necessary below

Service area	Apr-2010	May-2010	Jun-2010	Jul-2010	Aug-2010	Sep-2010	Oct-2010	Nov-2010	Dec-2010	Jan-2011
Outreach/Collaboration										
Develop Outreach Communication plan										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Consortia Committee Participation/Coordination										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Review of Education Materials										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Dissemination of Nationally Developed Materials										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Admission Process										

activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Admission Process										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Progress Reporting and Program Evaluation										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Designated Faculty										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Other										
activity 1 (please specify)										
activity 2 (please specify)										
activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										
Other										
activity 1 (please specify)										
activity 2 (please specify)										

activity 3 (please specify)										
activity 4 (please specify)										
activity 5 (please specify)										

Feb-2011	Mar-2011	Apr-2011	May-2011	Jun-2011	Jul-2011	Aug-2011	Sep-2011	Oct-2011	Nov-2011	Dec-2011	Jan-2012	Feb-2012	Mar-2012

Key risks and mitigation steps

Insert rows as necessary below; please indicate "none" as applicable; double-click on cell to see entire cell

Category	Detailed description	Risk/restriction mitigation steps
Grant restrictions		
Operation Plans from MCC	Wil not receive operation plans from MCC in time to lift grant restriction	Work with MCC to complete the operation plan in time
restriction 2 (please specify)		
restriction 3 (please specify)		
Outreach/Collaboration		
risk 1 (please specify)		
risk 2 (please specify)		
risk 3 (please specify)		
Consortium Committee Participation and Coordination		
risk 1 (please specify)		
risk 2 (please specify)		
risk 3 (please specify)		
Avaliabity Education Materials/Curriculum		
risk 1 (please specify)		
risk 2 (please specify)		
risk 3 (please specify)		
Organization		
risk 1 (please specify)		
risk 2 (please specify)		
risk 3 (please specify)		
Sustainability		
risk 1 (please specify)		
risk 2 (please specify)		
risk 3 (please specify)		
Other (please specify)		

risk 1 (please specify)		
risk 2 (please specify)		