

**One Health Commission  
Strategic Plan  
July 20, 2014**

**I. Charter**

The Charter of the One Health Commission is to ‘Educate’ and ‘Create’ networks to improve health outcomes and well-being of humans, animals and plants and to promote environmental resilience through a collaborative, Global, One Health approach.

**A. Goals**

1. **Connect** - One Health Stakeholders
2. **Create** - Strategic Networks / Partnerships
3. **Educate** - about One Health issues to support a paradigm shift in information sharing, active health interventions, collaborations, and demonstration projects

**B. Outcomes**

1. Increased Interdisciplinary Programs / Teams
2. Increased Information Sharing / Networking
3. Improved Disease Prevention / Interventions
4. Improved Approaches to Therapy
5. Improved Public Health
6. Improved Environmental and Plant Health
7. More focused research on One Health issues

**II. CORE VALUES AND GUIDING PRINCIPLES**

- A. Leadership** – We serve with a visionary responsibility for the future instilled with the highest level of trust to develop and implement an integrated strategy for improved health worldwide.
- B. Excellence** – We promote the highest standards of excellence throughout the scope of One Health to ensure the development of a transcending culture of quality and continuous improvement at all levels.
- C. Collaboration** – We promote engagement and collaboration with and among like-minded organizations and individuals, as well as diverse, fragmented and competitive entities, to achieve the strength of a united force working for the benefit of all.
- D. Trust** – We strive for absolute scientific integrity through all communications, resources, projects and programs to ensure the credibility of our work along with the importance and value of the One Health approach.
- E. Transparency** – We strive for open and interactive communications with and among members, partners, staff, and other stakeholders to create the highest level of ethics throughout our work.
- F. Adaptability** – We strive to be flexible, innovative and responsive to maintain consistently positive and constructive approaches to the issues, and to meet the changing needs of our global society.
- G. Stewardship** – We maintain responsible management practices to uphold the highest standards of accountability regarding our work and the use our funds.

### **III. PRIMARY STRATEGIES AND KEY OBJECTIVES**

#### **A. Strategies**

Establish a lean organizational structure with minimum essential paid staff that utilizes contracted services for flexibility and leverages contributions of volunteers and contributions of institutional services wherever possible to advance the work of the One Health Commission.

1. Establish a One Health Commission sponsorship model with a tiered contribution structure, including sponsor categories for institutions, industry and individuals, in order to provide the foundational funding for the work of the Commission; and to be supplemented with activity fees, sponsorships, grants and other funding that may be available and appropriate for specific programs and activities.
2. Explore and evaluate multiple means for communication and develop those that are most effective for creating awareness, developing support, advocating most effectively and establishing the OHC as a leading center for One Health information and communications.

#### **B. Key Objectives**

1. Increase the number of speaking opportunities at major conferences and symposia annually.
2. Expand and build traffic to the OHC website with links to related information and organizations.
3. Create a One Health Commission email newsletter that provides abstracts and links to news concerning One Health and the Commission.
4. Develop an annual One Health Symposium.
5. Develop Op Eds, press releases and evaluate their effectiveness to advance One Health.
6. Evaluate the use of on-line webinars (providing CE credits) for professionals regarding One Health
7. Proactively seek to collaborate with like-minded organizations, through alliances and joint projects, programs and activities.

### **IV. MAJOR PROGRAMS AND ACTIVITIES**

#### **A. Past and Current Demonstration Projects**

##### **1. Student Outreach Program: Protecting People and Their Pets**

The first OHC demonstratoin project was the Student Outreach Program “[Zoonoses: Protecting People and Their Pets](#)”. This program curriculum centers on the Human-Animal Bond and zoonotic disease recognition and treatment. The curriculum, including an online course, is designed to be placed in medical, public health, veterinary and other health-related professional schools to introduce One Health principles and collaboration across health professions. The Center for Food Security and Public Health (CFSPH) developed this curriculum and an accompanying textbook at its own expense. The OHC is working with the CFSPH to identify partners that will help pay for the development and delivery of the program. The course will be provided free of charge to colleges and students. A portion of the development and delivery funds will be donated to the OHC.

## **2. Bat Rabies Education Poster Campaign with the Global Alliance for Rabies Control and Bat Conservation International**

The second Demonstration Project was partnering with the Global Alliance for Rabies Control and Bat Conservation International to create two Bat Rabies Education posters that are now circulating around the world.

, ([Adult](#) version at

[https://www.onehealthcommission.org/documents/filelibrary/resources/Never\\_touch\\_a\\_b\\_at\\_Adultfinal\\_1213\\_BC0191B363B10.pdf](https://www.onehealthcommission.org/documents/filelibrary/resources/Never_touch_a_b_at_Adultfinal_1213_BC0191B363B10.pdf)

[Child](#) version at

[https://www.onehealthcommission.org/documents/filelibrary/rabies\\_poster/Never\\_touch\\_a\\_bat\\_childfinal\\_1213\\_190D0C618329A.pdf](https://www.onehealthcommission.org/documents/filelibrary/rabies_poster/Never_touch_a_bat_childfinal_1213_190D0C618329A.pdf))

### **B. Future Activities / Initiatives**

1. The OHC Board of Directors will select future OHC actions and projects based on:
  - a) The magnitude, severity, and potential impact of the health challenge
  - b) The extent to which a One Health approach is clearly needed to tackle the challenge
  - c) The potential to fill identified ‘gaps’ in One Health activities such as the need for shared One Health curricula in health professional education
  - d) The potential outcome and values to be achieved are transformative
  - e) The level of interest on the part of potential collaborating organizations.
  - f) The level of interest on the part of individual experts willing to volunteer their time to be part of the Working Group (recruited from the Council of Advisors and leading OHC members, and including at least one member of the Board of Directors)
  - g) The extent to which the project is expected to be additive to work already underway by other organizations
  - h) An estimate of the resources and timeframe required to successfully complete the demonstration project
  
2. It is anticipated that proposals for future demonstration projects may arise from multiple sources, including annual surveys of the Council of Advisors. An initial survey (summer 2012) of the Board of Directors and Council of Advisors suggests that the OHC should seek to develop and pursue initiatives in high priority areas, including but not limited to the following:
  - a) Infectious Diseases (Surveillance, Prevention and Response)
  - b) Safety and Security of Food and Water (Diseases and Supply)
  - c) Ecosystem Health (Wildlife, Plants and Environment)
  - d) Antimicrobial Resistance
  
3. Proposals for a demonstration project will include a preliminary draft of the project charter, which shall be developed prior to consideration by the Board of

Directors. For demonstration projects that are approved by the board, it is expected that the Working Group will contribute its expertise to finalize the charter prior to undertaking the demonstration project. Charters will be expected to include the following information:

- a) Definition of the health challenge to be addressed and why it is important
- b) Summary of relevant prior and current work by others addressing the problem
- c) Purpose and specific objectives of the proposed demonstration project
- d) Proposed funding resources needed and the plan to secure such resources
- e) Action plan including the work process, specific activities, deliverables and timeline
- f) Staffing plan for the working group, including expertise requirements and potential volunteers to be recruited for the Working Group
- g) Definition of other resources that may be needed to support the demonstration project and the plan to secure such resources
- h) Governance plan involving the OHC and other collaborating organizations as appropriate to provide guidance and oversight

## V. Communication Programs and Activities

- A. The purpose of communication programs and activities is to expand the OH way of thinking into all health domains.
- B. Active One Health ‘Teams’ Created and Active
  1. **International Who’s Who in One Health Webinar Team** –Many folks in the One Health community cannot get to Bangkok, Davos, Australia, London or Amsterdam, but they can log into a free international webinar. Prominent One Health leaders from around the U.S. and the world will be invited to speak for 15-20 minute slots over 8 hours about their ongoing One Health activities. Participants can slip into and out of the webinar to hear speakers of interest.
  2. **Professional Continuing Education (Webinars) Team** – This team formed spontaneously when it was suggested that the OHC partner with AVMA to sponsor an online One Health CE webinar for practicing veterinarians. The group quickly decided to create a CE/CME series on One Health issues targeted jointly at *clinical* veterinary and human health practitioners. The AVMA has agreed to provide CE for DVMs and the team is investigating how to offer CME for physicians. If you can help with this, please contact the Team Chair. Team Members include:
  3. **IOM Team/Committee** - This team/ committee formed in January 2014 in response to an exploratory email in fall 2013 to the One Health community from Dr. Patrick Kelly, Director of the Board on Global Health at the Institute of Medicine (IOM).The team will work toward facilitating an IOM study on gaps in One Health Education in professional health education across Veterinary and Human Medical Schools and in Environmental Health education settings. These gaps have been recently elucidated by Rubin et al. (2012) ([Link to article](#)) The IOM is an independent, nonprofit organization that works outside of government to

provide unbiased and authoritative advice to decision makers and the public (ref Wikipedia). Established in 1970, it is the health arm of the National Academy of Sciences, which was chartered under President Abraham Lincoln in 1863. ([IOM Website](#)). Nearly 150 years later, the National Academy of Sciences has expanded into what is collectively known as the [National Academies](#), comprised of the [National Academy of Sciences](#), the [National Academy of Engineering](#), the [National Research Council](#), and the IOM.

- a. **OHC History with IOM:** In November 2009, after the One Health Commission was chartered the previous June, a One Health Commission Summit (inaugural event) was held in November of 2009 in partnership with the National Academies of Science in Washington, D.C. Nine speakers included senior officials from the USDA, CDC, FDA, NIEHS, and U.S. Agency for International Development, academia, state government, and Kansas Bioscience Organization. [Click here](#) to view the Executive Summary of the One Health Summit.
  - b. At the Summit, the National Academies announced its intent to conduct an Institute of Medicine/National Research Council consensus study on One Health and a proposal titled ‘ ‘One Health” and the Enhanced Integration of Human, Animal, and Environmental Health Sciences’ was written. However, funding has not yet been identified for this study. ([See Executive Summary of the OH Summit](#))
4. **Public Service (Radio) Announcements Team** - This multidisciplinary team is creating for distribution a series of One Health Public Service Announcement (PSA) radio shorts. The first one, ‘What is One Health?’ is under development with plans for four more, two on infectious disease topics, one ecosystem topic, and one food safety topic. Future proposed topics include Lyme disease, Bat Rabies, Salmonellosis (food safety). Please send suggestions and interest in being involved to the Chair of the committee or the OHC staff.
5. **Future Teams under development and seeking support**  
One Health Narratives/ Case Study Team to identify and collect One Health narratives and scientific, evidence-based case studies from the One Health Community. These narratives will be posted on the OHC website to ‘teach by example’.
- a) Newsletter support Team
  - b) Policy Statements/Recommendations Team
  - c) Legislative Watch Team
  - d) One Health Library Support Team
  - e) One Health in the News Team
  - f) Zoonoses: Protecting People and Their Pets distribution Team
  - g) OH Professional Writing Team

## VI. ORGANIZATIONAL STRUCTURE AND STAFFING

### A. Current Contracted Staff and Service Providers:

Executive Director

Associate Executive Director

Website Host Firm

Accounting firm

Database management Firm

**B. Proposed staff as activities are required and funding is available:**

Development Officer (fund raising)

Communications Manager

Administrative Specialist

C. Depending upon the level of contributions received from the early sponsorship drives, it is anticipated that some of these roles may necessarily initially be part-time roles. The timing for the transition of these roles to full-time positions, as well as the addition of staff to manage increased numbers of demonstration projects and other programs and activities of the OHC will depend upon the level of support from its sponsors and additional funding support that OHC is able to raise through fees, grants, sponsorships and other revenues that may be available to support One Health programs and activities.