Collaborating with Partners and Community Members to Change Public and Organizational Policy

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Webinar Logistics

• The lines are muted. If you wish to mute/unmute your line to ask/answer a question, please do the following:
  • To unmute your own line, press *7
  • To mute your own line, press *6.

• Throughout the presentation and during the Q&A session, if you have a question, please use ReadyTalk’s ‘raise your hand’ feature or use the chat box to indicate you have a question. The facilitator will call your name and ask for your question.
PROJECT REQUIREMENTS & PHAB STANDARDS AND MEASURES: POLICY CHANGE IN CHIP DEVELOPMENT AND IMPLEMENTATION
Project Requirements: Developing and Implementing a CHIP

Engage Community Members and LPHS Partners

“Community members must be engaged in a meaningful and substantive way throughout the CHA and CHIP processes, including indicator selection, data collection, data analysis, data presentation and distribution, issue prioritization, CHIP creation, implementation of CHIP, and monitoring of results.”

“Partners should be engaged in a strategic way throughout the CHA and CHIP processes, including gaining access to data, mobilizing community members, data collection, data review, issue prioritization, and CHIP implementation.”
Project Requirements: Developing and Implementing a CHIP

Required characteristics of the CHIP:

Background information that does the following:

- Describes the jurisdiction for which the CHIP pertains and a brief description of how this was determined.
- Briefly describes the way in which community members and LPHS partners were engaged in development of the CHIP, particularly their involvement in both the issue prioritization and strategy development.
- Includes a general description of LPHS partners and community members who have agreed to support CHIP action. Reference partners’ participation in the short term and long term as applicable.
Project Requirements: Developing and Implementing a CHIP

Required characteristics of the CHIP:

Priority issues section that does the following:

• Describes the process by which the priorities were identified.
• Outlines the top priorities for action.
• Includes a brief justification for why each issue is a priority.
• Shows alignment of community priorities with state and Tribal health improvement priorities as well as national priorities.
• Includes at least one priority aimed at addressing a social determinant of health that arose as a key determinant of a health inequity in the jurisdiction.
• Identifies community assets and resources.
• **Includes policy changes needed to accomplish health objectives.**
Required characteristics of the CHIP cont’d:

A CHIP implementation plan that does the following:

• Provides clear, specific, realistic, and action-oriented goals.
• Contains the following:
  • Goals, objectives, strategies, and related performance measures for determined priorities in the short-term (one to two years) and intermediate term (two to four years),
  • Realistic timelines for achieving goals and objectives.
  • Designation of lead roles in CHIP implementation for LPHS partners, including LHD role.
  • Formal presentation of the role of relevant LPHS partners in implementing the plan and a demonstration of the organization’s commitment to these roles via letters of support or accountability.
  • Emphasis on evidence-based strategies.
  • A general plan for sustaining action.
PHAB Requirements: Developing and Implementing a CHIP

*Be sure to review the standards listed below to identify the measures and required documentation that PHAB seeks related to developing a CHIP.

Standard 5.2: Conduct a comprehensive planning process resulting in a tribal/state/community health improvement plan
For example…

Measure 5.2.2L: Produce a community health improvement plan as a result of the community health improvement process

*Required documentation*: CHIP dated within the last five years that includes 1a: Community health priorities, measurable objectives, improvement strategies and performance measures with measurable and time-framed targets; 1b. *Policy changes needed to accomplish health objectives*; 1c. Individuals and organizations that have accepted responsibility for implementing strategies; 1d. Measurable health outcomes or indicators to monitor progress; and 1e. Alignment between the CHIP and the state and national priorities.
Learning Objectives

At the completion of the session participants will be able to:

• Discuss the various meanings of policy change as it relates to health improvement.
• Discuss effective strategies for working with policymakers.
• Understand the general tenets of policy-making processes.
• Frame at least one of their selected strategies as a policy initiative.
• Identify the type of campaign work that is required at the various stages of policy or program development, implementation and monitoring and evaluation.
• Consider how to leverage other sectors’ policy platforms to advance policies with public health implications.
• Build a campaign to drive implementation of selected strategies, especially those related to policy change, included in the CHIP.
• Discuss Health in All Policies and Health Impact Assessments and how they relate to policy.
• Describe the project and PHAB documentation requirements for CHIP implementation plans and activities.
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Kenneth Smith, PhD, NACCHO

WELCOME TO TODAY’S GUESTS
What are the various levels of policy change that might be considered when working towards community health improvement goals?
Public Policy (State, County, Local)

Policy Areas:

Laws and Ordinances
Resolutions
Regulations and Rules
Taxes
Funding Requests and Reallocation of Funds
Land Use Development
Programmatic
Operating
Organizational Policy (Agencies, Non-profits, Businesses)

Policy Areas:

- Regulations and Rules
- Operating
- Programmatic
- Funding
Cabarrus County, North Carolina

- Population: 178,000
- Largely urban, with rural pockets
- 30 miles north of Charlotte, NC
- Prominent industries:
  - NASCAR/Auto Racing
  - Biotechnology (NC Research Campus)
  - Formerly, manufacturing
# Levels of policy change-Cabarrus County

<table>
<thead>
<tr>
<th>Organizational Policy</th>
<th>Public Policy</th>
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<tbody>
<tr>
<td><strong>YMCA</strong></td>
<td>Complete Streets Ordinance</td>
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<tr>
<td>• Tobacco-free policy</td>
<td></td>
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<tr>
<td>• Healthy food and beverage policy</td>
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<tr>
<td><strong>S&amp;D Coffee, Inc.</strong></td>
<td>Tobacco Ordinance</td>
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<tr>
<td>• Stairwell Initiative</td>
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<tr>
<td>• Tobacco-free policy</td>
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<tr>
<td>• Healthy food options</td>
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<td>• Healthy living opportunities</td>
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What is the policy-making process? How do you influence it to work towards policy change?
What is the policy-making process?

Policy-making Venues

- Community forums
- Discussion groups
- Chamber of Commerce and business groups’ meetings
- Public hearings
- Work sessions or presentations to elected officials
- One-on-one meetings with elected officials and staff of key organizations
- Debates
- Media
How do you work to make policy change?

- Clearly frame the issue or problem
- Develop proposed solutions and strategies that specifically address the issue/problem
- Use evidence-based or best/promising practice strategies
- Determine if any related policies exist and if so, why they don’t work
- Focus on cost savings as much as possible
- Use data to tell the story about the problem
- If possible, show a connection of the issue to your local government’s strategic plan
- Develop short, consistent message and talking points
- Identify and understand any opposition to the proposed policy change
- Educate the public, community opinion leaders, and elected officials on the problem and proposed policy change
- Find community organizations who will be allies
- Find credible and trusted community leaders to advocate for the proposed policy change
Strategies for policy change - Cabarrus County

1. Identify health issue(s)
2. Select partners
3. Develop strategy
4. Create policy & adopt
5. Monitor and evaluate
Strategies for policy change - Cabarrus County

- Community Needs Assessment
- Primary and secondary data
- ACHIEVE funding
Strategies for policy change - Cabarrus County

Wheel of Engagement

- Identify health issue(s)
- Select partners
- Develop strategy
- Create policy & adopt
- Monitor and evaluate

ACHIEVE

- Elected Official
- Schools
- Health Insurer
- Hospitals
- Transportation/Planning
- Public Health
- Media
- Parks & Recreation
- Foundation
- Chamber of Commerce
- Corporate
- Academia
- Faith

NACCHO
National Association of County & City Health Officials
Strategies for policy change - Cabarrus County

- Team Retreat
  - Education - policy vs. program
  - Action plan - Measurable objectives
- Monthly Team Meetings
- Educate decision-makers
Strategies for policy change - Cabarrus County

- Draft policy
- Make the case
- Organizational vs. Public policy process
What should a community consider when trying to decide whether to initiate a policy change strategy to address a community health issue versus creating or updating a program that is focused on individual behavior change?
Community Considerations for Policy Strategies

- This is condition/problem dependent
- Determine the appropriate evidence-based strategy
- Changing existing or creating new policy, or creating or changing a program or not always mutually exclusive
- Decide who needs to be involved in the decision and who has the authority to approve the final decision
- Determine what resources are needed for either a policy or program being considered
Policy vs. Program- Considerations

- Sustainability
- Cost
- Capacity

NACCHO
Policy vs. Program- A Cost Comparison in Cabarrus

ENERGIZE- Obesity Prevention Program

Total Cost: $30,080 over six months
- Staff
  - $12,500 (.5FTE x 6 months)
  - $5,760 (2 Exercise Specialists & 1 Nutrition Educator x 12 wks)
  - $1,000 (Motivational Speaker)
- Incentives
  - $5,500 (22 youth x $250/child)
- Food
  - $4,320 (60 youth & parents x $6/person x 12 wks)
- Equipment
  - $1,000 (hand weights, resistance bands, sports equipment, etc.)

Results (youth):
- BMI ↓ 1.08 pts
- Fasting Blood Glucose ↓ 18.45 pts
- Triglycerides ↓ 90 pts
- Total Cholesterol ↓ 19.17 pts
- Systolic Blood Pressure ↓ 5.23 pts
- Diastolic Blood Pressure ↓ 7.77 pts

Impact: 22 youth & 38 adults

ACHIEVE- Policy and environmental change project

Total Cost=$40,000 over three years
- Staff
  - $25,000 (.10FTE x 3 years)
- Travel & Training
  - $8,000 (13 partners & staff x 3-day Action Institute in Tampa, FL)
  - $4,500 (13 partners & staff x 2 planning retreats)
- Meeting Expenses
  - $2,500 (10 meetings/year x 3 years x 13 partners/staff)

Results:
- 21 policy changes
- 18 environmental changes

Impact:
- Theoretically- 178,000 youth & adults
- Likely- 80,000
What are some upstream approaches you would recommend LHDs and their allies use to help build healthy communities through policy, environmental, and systems change?
<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>HEALTH IMPACT ASSESSMENT</th>
<th>HEALTH IN ALL POLICIES</th>
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<tr>
<td><strong>Definition</strong></td>
<td>“HIA is a systematic process that uses an array of data sources and analytic methods and considers input from stakeholders to determine the potential effects of a proposed policy, plan, program, or project on the health of a population and the distribution of those effects within the population. HIA provides recommendations on monitoring and managing those effects.”</td>
<td>Health in All Policies is a systems change whereby health considerations are incorporated in all aspects of the policy process among the many sectors that shape the determinants of health.</td>
</tr>
<tr>
<td><strong>Ultimate Aim</strong></td>
<td><strong>Uncover and address health impacts</strong> of new plans, programs, projects, and policies</td>
<td>Engagement of all agencies in all sectors in order to address the determinants of health <strong>at all stages of the policy process.</strong></td>
</tr>
<tr>
<td><strong>Intervention Target</strong></td>
<td>Existing plan, program, project or policy</td>
<td>Decision systems: decision makers and the decision-making process</td>
</tr>
<tr>
<td><strong>Intervention Stage in policy cycle</strong></td>
<td>Prior to and post implementation</td>
<td>Policy formulation through post implementation</td>
</tr>
<tr>
<td><strong>Analytical focus</strong></td>
<td>Prospective and predictive</td>
<td>Retrospective (root causes maps), concurrent (decision-making process), and prospective (health lens analysis)</td>
</tr>
<tr>
<td><strong>Level of Change</strong></td>
<td>A single plan, program, project or policy</td>
<td>Decision system</td>
</tr>
<tr>
<td><strong>Type of change</strong></td>
<td>Episodic</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Tools and procedures</strong></td>
<td>Multiple, prescriptive</td>
<td>Multiple, exploratory</td>
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</tbody>
</table>
Many decisions that shape communities where people live, learn, work, and play are made outside of the health sector. What strategies can LHDs and their allies use to help decision-makers understand their impacts on health and to consider these impacts when developing policy?
Strategies for Influencing Decision-Makers

1. Know the issues
2. Talk with key staff responsible for such issues as planning and zoning, housing, transportation, and parks and recreation

Strategies:

• Attend community meetings
• Attend meetings of civic associations and citizen advisory boards/commissions
• Comment on draft plans
• Comment on related programmatic and funding issues
• Seek comments on your draft plans
• Be recognized as an invaluable resource of knowledge
• Educate staff involved in other issue on how their work impacts health
• Write letters to the editor on how other key issues impact health
Questions and Discussion
Contact Information

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CHIP Resources

• Issue Prioritization Tip Sheet
• CHIP Implementation Plan Template
• 90 Day Implementation Steps Worksheet
• What Works for Health database: http://www.countyhealthrankings.org/what-works-for-health
• Take Action Cycle Webinar Series by the County Health Rankings and Roadmaps project: http://www.countyhealthrankings.org/blog/123

Visit the CHA/CHIP Network to access these resources and more!
Model Practices Application Requirement Clarification

- Focus on population health outcomes are an ideal application
- A certain process for or initiative within your CHA and CHIP work for which you have qualitative or quantitative data for process or short-term outcome measures would be appropriate
- Examples
  - Strategies used to Increase array of partners attending CHA/CHIP steering committee meetings
  - High levels of community engagement in process or portions of the process
  - Process for obtaining CHA and CHIP input from underrepresented or marginalized parts of the community
  - Successful strategies to involve community members and/or partners in community areas where low response rates to assessment activities
  - Strategies or processes used to ensure hospital and LHD requirements were addressed
  - Processes for ensuring the social determinants of health were considered

*Data sources could then include attendance logs, # of surveys or focus groups completed, before and after comparisons of # of topics in respective requirements addressed, etc.*
The next CHA/CHIP training webinar will be on:

‘Distributing and Communicating about the CHIP’

*Presenter and Date:* TBD

10/10/12 from 2:30 – 4 PM ET

Please complete the evaluation before logging off the webinar.