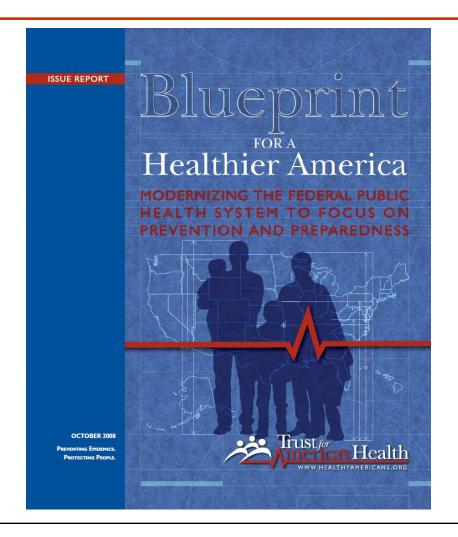
Blueprint for a Healthier America

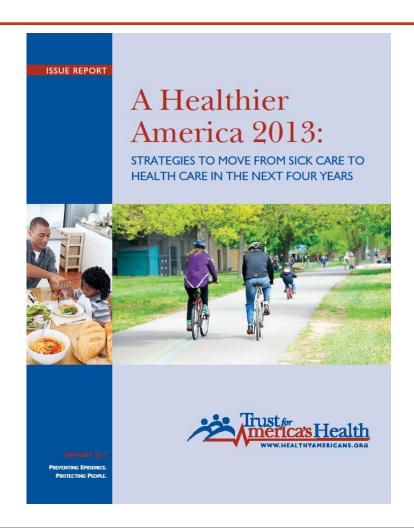
- □ Audience: POLICYMAKERS
- □ Summarizes and "translates" policy recommendations using tested or developed messaging strategies to position and advocate concepts
- □ Focuses on high-level recommendations and pushing the envelope for new ideas and leveraging new opportunities (like mechanisms/potential from ESSA and others)





Blueprint for a Healthier America

- □ Release timing: October 2016
- Will incorporate ideas from ongoing Collaborative meetings and work and a range of other experts
- Two big picture visions:
 Rethinking "community
 prevention" and modernizing
 basic governmental public
 health.





Community Prevention

One Local Manager in each community manages community health efforts of a multi-sector collaborative.

MANAGER ROLE

 Convening and managing community

partners/stakeholders

- Strategic planning/goal setting
- Managing and integrating funding, programs and policies
- Analyzing outcomes and shared impact (health and economic)



POTENTIAL MANAGER ORGANIZATIONS

- Integrator
- Community health trust/fund
- Community development financial institution (CDFI)
- · Public health agency
- Social service agency
- Nonprofit/community organization
 Hospital or local health
- system • Community health
- center University
- Foundations

Exploring All Possible Funding Streams

Capitalize on all possible sources of intervention support and funding, for example:

- Medicaid
- New Market Tax credits
- Community Development Funds/ eg. CDFIs
- Community benefit (nonprofit hospitals)
- Community Health Trust (CDFI for health)
- Philanthropic investments
- Reinvestment grants
- Government grants (across departments) across federal/state/local levels)

STATE SUPPORT CENTER



One State Support Center provides support to all local managers within a state.

STATE SUPPORT CENTER ROLE

- Conduct or coordinate needs assessments
- Collects/connects local data across sectors
- Assists community to define goals
- Provides menu of evidence-based programs/policies to match needs and goals
- Provide/coordinate technical assistance for implementation of programs/policies
- Conduct evaluation and quality improvement for programs/policies
- Inform advancing of national research efforts POTENTIAL MODELS
- EPIScenter
- Communities that Care
- PROSPER
- Build on Evidence Banks, e.g. Child Trends, NIH, CDC, etc

NECESSARY COMPONENTS within each

COMMUNITY



Understanding Community Needs

Utilize Community Needs Assessments (CNAs) conducted by various groups:

- Nonprofit (e.g., community centers, hospitals)
- · Public Health Departments
- Education and Health (ESSA requirement)
- Community Services Block Grant
- · Child Welfare



Understanding Community Assets and Resources

Leverage and analyze existing resources in the community, including:

- Underlying health system, including Public Health Department (with foundational services like epi lab surveillance) and Health Care Systems (including hospitals, public and private payers)
- · Existing social service programs
- Cross-sector strengths and connections (housing, transportation, education, etc.)
- Local institutions and business/private sector community
- · Community engagement



Building Support for the Vision of Healthy Schools, Healthy Students – (to be 'refined')

- □ A clean, safe, healthy environment in which to learn where parents can feel confident their children will be safe and supported every day;
- A positive culture and climate where students and educators are encouraged to do well and given the tools they need to succeed;
- □ Promoting social and emotional learning as well as academic instruction;
- Supporting a "trauma-informed" approach to supporting students who may be experiencing toxic stress and toward more effective discipline approaches that provide support to students and their families;
- □ CONTINUED...



Building Support for the Vision of Healthy Schools, Healthy Students (to be 'refined')

- □ Early identification of needs of children and connecting and providing students with the programs and services to help them thrive (physical, mental and behavioral health, special education, social services, and others);
- Opportunities to be physically active throughout the day and attractive, sufficient space and facilities to engage in activity and physical education;
- □ Good nutrition is promoted and safe drinking water and healthy school meals and snacks are readily available to all students regardless of family income; and
- □ Increasing school-based health services where they needed, including mental health services and fostering increased integration of health, education and social services.



Recommendations Summarizing the Work of the Collaborative + Current Opportunities for Change

- □ Prioritizing a Healthy, Positive School Climate;
- □ Early Identification and Support for Concerns, Including Early Warning "Chronic Absenteeism" Initiatives;
- □ Understanding Needs School Health Assessments (for Schools Receiving Sufficient Safe and Healthy Grants);
- □ Preventing and Reducing Health Risks Supporting Evidence-Based Prevention Programs and Social-Emotional Learning;
 - Case Study Examples: Preventing Substance Misuse and Bullying
- □ Expanding Obesity Prevention Promoting Better Nutrition and Increasing Physical Activity Before, During and After School; and
- ☐ Increasing School Health Services Including Mental and Behavioral Health and Improving Coordination Between Education and Health Services and Other Social Service.

