

Program Element #15: Healthy Communities (HC) (formerly “Tobacco-Related and Other Chronic Disease Programs”); Phase II – Implementation

1. **Description.** Funds provided under the Financial Assistance Agreement for this Program Element may only be used, in accordance with and subject to the requirements and limitations set forth below, to implement Healthy Communities (HC) activities in the following areas:
 - a. **Application of HC Assessment and Capacity-Building Efforts:** In coordination with the Tobacco Prevention and Education Program (TPEP), implement prioritized objectives based on the local plan developed through the HC Training Institutes. Implementation of prioritized objectives should incorporate prevention, risk reduction and management activities related to arthritis, asthma, cancers, diabetes, heart disease and stroke.
 - b. **Facilitation of Community Partnerships:** Accomplish movement toward establishment of policies, environments and systems that support healthy communities through a coalition or other group dedicated to the pursuit of agreed upon best and promising practice objectives based on HC community assessments. Community partners should include non-governmental entities as well as community leaders.
 - c. **Development of Local Champions:** Foster ongoing communication and education with community leaders, including elected leaders, on effective, comprehensive strategies for reducing the burden of tobacco-related and other chronic diseases in communities, schools, worksites, and health systems through establishment of policies and sustainable system change. Coordinate with statewide partners for strategic planning for the purpose of developing and sustaining a county and statewide infrastructure for tobacco-related and other chronic disease prevention and health promotion.
 - d. **Promotion of Healthy Food and Physical Activity:** Promote healthy food choices and physical activity opportunities for chronic disease prevention and risk reduction through the establishment of policies and sustainable systems change that supports healthy communities, schools, worksites, and health systems.
 - e. **Countering Unhealthy Food and Tobacco Influences:** Promote protection from exposure or access to secondhand smoke, tobacco products, unhealthy foods, and the advertising and promotions of tobacco and unhealthy food through establishment of policies and sustainable systems change that supports healthy communities, schools, worksites, and health systems. Promote and connect to arthritis, asthma, cancer, diabetes, heart disease, and stroke chronic disease self-management and the Quit Line in all activities.
 - f. **Facilitate Development of Chronic Disease Self-Management Networks and Systems:** Promote optimal availability of and access to chronic disease self-management programs in communities, schools, worksites, and health systems through the establishment of policies, environments and local delivery systems for chronic disease self-management. Promote the Quit Line in all activities. Establish sustainable evidence-based self-management programs, including comprehensive, chronic disease management programs tailored to specific chronic conditions including arthritis, asthma, cancer, diabetes, heart disease, and stroke. Incorporate the promotion of tobacco cessation, healthy eating and physical activity into chronic disease management systems.

- g. Integrate tobacco use reduction in all Healthy Communities interventions:** Conduct tobacco use reduction strategies in all HC Program activities in partnership with Tobacco Prevention & Education Programs. Utilize the experience and accomplishments gained from TPEP to build HC policy and systems change in the broader contexts of other risk factors and chronic conditions including arthritis, asthma, cancer, diabetes, heart disease, and stroke.
 - h. Enforcement:** Assist, through formal agreements with OPHD, with the enforcement of statewide chronic disease prevention and control laws.
- 2. Procedural and Operational Requirements.** By accepting and using the financial assistance funding provided by Department under the Financial Assistance Agreement and this Program Element, LPHA agrees to conduct HC Program activities in accordance with the following requirements:
- a.** LPHA must have on file with the Department an approved Local Program Plan developed in response to a Request for Applications or Proposals that specifies minimum requirements for which funding is available no later than July 30 in year one and by July 30 in year 2 and thereafter. The Department will supply the required format and current service data for use in completing the plan. LPHA shall implement its HC activities in accordance with its approved Local Program Plan. Modifications to this plan may only be made with Department approval.
 - b.** LPHA must assure that its HC program is staffed at an appropriate level, depending on its level of funding, as specified in the award of funds for this Program Element as indicated in the Request for Applications or Proposals.
 - c.** LPHA must use the funds awarded to LPHA under this Agreement for this Program Element in accordance with its budget as approved by Department. Modifications to the budget may only be made with Department approval. Funds awarded for this Program Element may not be used for medical treatment, delivery of cessation services, or other health-related efforts not devoted to HC as determined by the Department.
 - d.** LPHA must attend all HC Program meetings, as reasonably required by the Department. LPHA must participate in HC Program evaluation activities, as reasonably required by the Department.
 - e.** LPHA must comply with Department's HC Program Guidelines and Policies, including as amended from time to time.
 - f.** LPHA must coordinate its HC Program activities and collaborate with other entities receiving HC Program funds or providing HC services.
 - g.** In the event of any omission from, or conflict or inconsistency between, the provisions of the Local Program Plan and the Department-approved Budget, the provisions of the Agreement and this Program Element, the provisions of the Agreement and this Program Element shall control.

3. **Reporting Requirements.** LPHA must submit quarterly Local Program Plan reports on a schedule to be determined by Department. The reports must include, at a minimum, LPHA's progress during the quarter in completing activities described in its Local Program Plan. LPHA must submit the following upon request by Department: outcomes reports that detail quantifiable outcomes of activities and data accumulated from community-based assessments included in the Local Program Plan. LPHA must participate in coordinated HC Program evaluation activities, as reasonably required by the Department.

4. **Performance Measures.** If LPHA completes fewer than 75% of the planned activities in its Local Program Plan for two consecutive calendar quarters in one state fiscal year, it will not be eligible to receive funding under this Program Element in the next state fiscal year.