
Selecting Strategies, Developing Title V Plans and Finding Alignment within the Broader Context of Public Health

Oregon Title V Grantee Meeting
February 27, 2018



MATERNAL AND CHILD HEALTH SECTION, TITLE V
Public Health Division

Objectives:

- Review (and celebrate!) the integrity of the process to identify priorities and strategies
- Share resources and approaches to selecting strategies for local implementation
- Orient to sample priority logic model to aid planning
- Consider alignment opportunities with other public health initiatives

Poll Question:

In planning for Y3 (FY2019), how far along are you in the decision making process today?

Choose all that apply:

- We've chosen the priority(ies) for our LHA
- And, we've chosen the strategy(ies)
- And, we've figured out our activity(ies)
- And, we've honed in on measure(s)
- No decisions yet, still weighing the choices

**Respond using the poll app.

Priority Selection

- Data analysis and review
 - Trends for national performance measures
 - Racial and ethnic disparities
- Partner and stakeholder survey
- Statewide scan of community health assessments
- Significance of the issue for Oregon
- Context
- Alignment

Strategy Selection

- Evidence review
- Research and review of national and state sources
- Webinars with MCAH partners

Strengthen the Evidence Advancing the Application of MCH Science

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Search

Strengthen the Evidence Base for Maternal and Child Health (MCH) Programs is a HRSA-funded initiative that aims to support states in their development of strategies to promote the health and well-being of maternal and child health populations in the United States.

This initiative, undertaken through a partnership among Johns Hopkins Women's and Children's Health Policy Center, the Association of Maternal and Child Health Programs, and the Welch Library at Johns Hopkins, facilitates the transformation of the MCH Title V Block Grant Program.

NEW!
Visit our [Evidence Reviews](#) to view evidence-based/informed strategies identified from the literature on each of the 15 National Performance Measures

JOHNS HOPKINS
BLOOMBERG SCHOOL
of PUBLIC HEALTH
Women's and Children's Health Policy Center

How do we know the needs of our communities?

- Community Health Assessments (CHAs)
- Community Health Improvement Plans (CHIPs)
- Statewide reports from OHA/PHD
- Census data
- Oregon Vital Statistics data
- Primary data collection
- Other partner organizations' assessment data
- Asset mapping
- Surveys
- Focus groups
- Strategic plans

Other Potential Selection Criteria

- Alignment with
 - Current portfolio of work
 - Staffing and capacity
 - Community partners
 - Community initiatives
- Local significance of priority and strategy(ies)
- Alignment with
 - Accreditation
 - Modernization
- Activate or advance a commitment to:
 - Social determinants
 - Equity and inclusion
- Potential
 - To leverage
 - Impact
 - Reach
- Builds on
 - Strength
 - Gap

Table Discussion (5 minutes):

What other data and criteria have you used / could be used to inform choices for priority and strategy selection, and work plan development?

*Share experiences and ideas with your tablemates.

**Choose a messenger to share out at least 1-3 ideas and comments per table through the poll app.

Logic Model Preview!

Inputs	Strategies	Activities	Outputs	Outcomes
Assets and resources in your community (samples provided for you)	Menu of evidence based options	Tactics you'll take to advance the selected strategy (samples provided for you)	Menu of measures for each strategy <ul style="list-style-type: none"> • Accountability • Quality improvement • Evaluation 	Short, Mid and Long – includes the Title V national performance measures
LHAs describe your own	LHAs select from the menu	LHAs describe your own	LHAs select from the menu	No changes needed here

Alignment with:

Accreditation domains + Foundational capabilities

Accreditation Domains	Foundational Capabilities
Domain 1: Conduct assessments focused on population health status and health issues facing the community	Assessment and epidemiology
Domain 3: Inform and educate about public health issues and functions	Communications
Domain 4: Engage with the community to identify and solve health problems	Community partnership development
Domain 5: Develop public health policies and plans	Policy and planning
Domain 7: Promote strategies to improve access to healthcare services	Health equity and cultural responsiveness
Domain 8: Maintain a competent public health workforce	Leadership and organizational competencies
Domain 10: Contribute to and apply the evidence base of public health	The heart of what we do!

Approaches to planning:

Work backwards on the logic model

- Consider the short term outcome(s) you hope to achieve
- Look for strategies that align
 - Measures can be a good clue!
 - And, don't let the sample activities and measures limit a strategy's possibilities!
- Weigh your inputs and what you know about your community
- Consider the sample activities AND don't stop there!
- Think about who | what | where | when to help craft your activities

Approaches to planning: Work backwards on the logic model

Oregon MCH Priority Area: Physical Activity

Inputs	Strategies	Sample Activities	Outputs	Short term Outcomes
<p>Staffing & expertise</p> <ul style="list-style-type: none"> • Programs • Assessment, Evaluation, Epi • Managers • Community Health Workers <p>Funding / resources</p> <ul style="list-style-type: none"> • Title V • Other <p>Partnerships within agency</p> <ul style="list-style-type: none"> • Healthy Communities • SBHC <p>Community partnerships</p> <ul style="list-style-type: none"> • Schools • Districts • EI/ECSE/SpEd • County planning • County transportation • Police • Safe Kids Coalitions <p>Data</p> <ul style="list-style-type: none"> • State and national performance measures • Community Health Assessments 	<p>1. Support physical activity in child care settings through policy, training and workforce development</p>	<ul style="list-style-type: none"> - Provide TA and training to ECE providers - Provide coaching for implementation - Provide TA and support for policy development and implementation 	<p>1.1 Number of policies or policy briefs developed, promoted, or implemented</p> <p>1.2 Number of providers trained</p>	<ul style="list-style-type: none"> - Increased knowledge about importance of physical activity - Improved attitudes about physical activity - Increased community engagement and partnerships for physical activity - Increased and/or improved policies supportive of physical activity - Increased access to physical activity choices - Increased resources for the promotion of physical activity
	<p>2. Support physical activity before, during and after school, for all children, including those with special needs</p>	<ul style="list-style-type: none"> - Participate in School Wellness committees to strengthen policies - Develop and support SRTS programs - Develop and support joint use agreements - Partner with education partners on training for staff and inclusion of physical activity goals in IEPs and 504 plans 	<p>2.1 Number of new partnerships developed with schools/districts</p> <p>2.2 Number of schools/districts that have adopted physical activity policies</p> <p>2.3 Number of joint use agreements</p>	
	<p>3. Improve the physical environment for physical activity</p>	<ul style="list-style-type: none"> - Participate in land use, planning, and transportation meetings - Inventory and map community to identify needed improvements 	<p>3.1 Number of completed maps, inventories, or assessments</p> <p>3.2 Number of new partnerships developed</p>	
	<p>4. Increase safe and active transportation options</p>	<ul style="list-style-type: none"> - Promote and grow active transportation options for all ages - Participate in land use, planning, and transportation meetings - Be the voice of "health at all tables" 	<p>4.1 Number of opportunities to inform strategic direction in community, or to convene and influence decisions</p> <p>4.2 Number of schools/districts that have increased safe and active transportation options</p>	
	<p>5. Promote policies and programs for healthy worksites, with a focus on physical activity</p>	<ul style="list-style-type: none"> - Provide TA and support in healthy worksite policy development and implementation 	<p>5.1 Number of presentations re: policy change</p> <p>5.2 Number of sites w/ policy change</p> <p>5.3 Number of new policies in place</p>	

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Approaches to planning: Identify your opening move

- Target population(s) for focus
- Community initiatives
- Settings
- Relationships and partnerships
- Health in all policies

Approaches to planning:

Levels of intervention

Level of influence	Examples (spectrum of prevention)
Individual / relationship	Strengthening individual knowledge and skills
Community	Promoting community education; fostering coalitions or networks
Institutional	Changing organizational practices, educating providers
Societal	Influencing policy and legislation

Approaches to planning: Levels of intervention

Oregon MCH Title V Priority Area: Food Insecurity

Inputs	Strategies	Sample Activities	Outputs (Process Measures)	Short term outcomes
<p>Staffing & expertise</p> <ul style="list-style-type: none"> • Programs • Assessment, Evaluation, Epi • Managers • Community Health Workers <p>Funding / resources</p> <ul style="list-style-type: none"> • Title V • WIC • Other <p>Partnerships within agency</p> <ul style="list-style-type: none"> • Healthy Communities • SBHC • WIC <p>Community partnerships</p> <ul style="list-style-type: none"> • DHS (Snap & Snap-Ed) • Schools (school meals) • Child care (child and adult care food program) • Early Learning • Local food pantries 	<p>1. Screen & Intervene: screen clients for food insecurity & provide referrals for food assistance</p> <hr/> <p>2. Support or provide food security education</p>	<ul style="list-style-type: none"> - Implement a validated food insecurity screening tool - Address client factors that may increase vulnerability to health impacts of food insecurity - Link clients / families to resources - Provide food prescription/ medically-tailored meal program for vulnerable populations - Conduct food insecurity screening across a targeted population - Support / promote community partners to conduct screening - Promote health care facilities to implement universal food insecurity screening - Provide training to improve referral/intervention - Establish referral pathways to community resources & food assistance programs <hr/> <ul style="list-style-type: none"> - Sponsor education programs in the community - Reduce barriers to class attendance through enabling services - Sponsor community based education and outreach campaign - Provide training for health care staff about food insecurity & related issues 	<p>1.1 Percent of clients that are screened for food insecurity</p> <p>1.2 Percent of clients with positive food insecurity screenings that are referred to resources</p> <hr/> <p>2.1 Percent / Number of clients /community members who received education</p> <p>2.2 Number of education &/or outreach campaigns sponsored</p> <p>2.3 Percent of staff trained</p>	<ul style="list-style-type: none"> - Increased knowledge about importance of food security - Improved attitudes about food security - Increased skill in support of food security - Increased community engagement and partnerships for food security - Increased or improved policies and programs supportive of food security



Approaches to planning: Levels of intervention

Oregon MCH Title V Priority Area: Food Insecurity

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Approaches to planning: Levels of intervention

<ul style="list-style-type: none"> Local Extension services Farmers & Farmers Markets County Planning Food Policy Council Other <p>Data</p> <ul style="list-style-type: none"> State and national performance measures Community Health Assessments Community Health Improvement Plans Census USDA household food insecurity Feeding America's Map the Meal Gap <p>Evidence base / best practice</p> <ul style="list-style-type: none"> Promoting Food Security for All Children, American Academy of Pediatrics Policy Statement Oregon Title V Strategies: Food Insecurity Toolkit 	<p>3. Increase access to healthy, affordable food, (including food assistance safety net programs)</p>	<ul style="list-style-type: none"> - Develop partnerships to address barriers in accessing food resources - Promote access to fruits & vegetables - Conduct outreach and education - Engage in local needs assessment or planning process - Sponsor volunteers/interns to provide outreach and strengthen partnerships - Engage schools in access to healthy food through school-based policies 	<p>3.1 Number of community partnerships strengthened/ developed with focus on improving access to healthy food</p> <p>3.2 Percent of clients provided with access to affordable healthy food</p> <p>3.3 Number of needs assessment or policy planning processes engaged in</p> <p>3.4 Number of outreach or education activities conducted</p>
	<p>4. Increase economic stability for individuals and families</p>	<ul style="list-style-type: none"> - Promote savings & asset building programs for individuals & families - Promote & provide outreach about income-support programs 	<p>4.1 Number of promotion activities targeting savings & asset building programs for individuals & families</p> <p>4.2 Number of outreach activities that promote income support programs</p>

Approaches to planning: Levels of intervention

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Putting it all together...

- Reflect on your knowledge (technical, quantifiable, contextual, interpretive) of your community
- Use your CHA, CHIP and strategic plan to inform Title V choices
- Select strategies and activities that align with foundational capabilities and accreditation domains
- Work “higher” in the level of interventions



Table Discussion (5 minutes):

How do you see Title V in relation to accreditation, modernization, triennial reviews, and other public health initiatives in your community? How could those relationships be stronger?

*Share experiences and ideas with your tablemates.

**Choose a messenger to share out at least 1-3 comments through the poll app.