

Domains Supported by NCCDPHP that Prevent and Reduce Chronic Diseases and Promote Health – Strategies within Domains

Area	Surveillance and Epidemiology (including translation and dissemination of data for action)	Environmental Approaches - that promote health and support and reinforce healthful behaviors	Health Systems Interventions	Community-Clinical Linkages
<p>Chronic diseases and conditions:</p> <ul style="list-style-type: none"> • Arthritis • Cancer • Diabetes • Heart Disease • Obesity • Stroke 	<p>Collect appropriate data to monitor risk factors and chronic conditions of interest through surveillance systems (such as the BRFSS, NPCR and other cancer screening data systems, Vital Statistics, and Medicare data sets), rapidly develop and disseminate data reports in easy-to-use and understand formats, describe multiple chronic conditions, and use data to drive state and local public health action.</p> <p>Conduct surveillance of behavioral risk factors, social determinants of health, and monitor environmental change policies and laws related to healthful nutrition,</p>	<p>Comprehensive workplace wellness including health insurance coverage for preventive services.</p>	<p>Organized systems of care to deliver high quality clinical and other preventive services :</p> <ul style="list-style-type: none"> -electronic health records with registry function, decision support, and electronic reminders; -team-based care; -population care across panel of patients; -systems to ensure adequate follow up of abnormal screening tests, and timely treatment. -Patient Centered Medical and Dental Home. <p>Delivery of high-quality screening for breast, cervical, and colorectal cancers that promotes high rates of use, including referral and follow-up</p> <p>Expanded scopes of work for allied health professionals (e.g., pharmacists, nurses),</p>	<p>Available, accessible arthritis, diabetes, chronic disease self-management education programs, including physical activity programs, to reach at risk populations in community settings, such as worksites, YMCA/YWCAs, schools, senior centers, and other local organizations.</p> <p>Use of allied health professionals to enhance mgt of HBP/cholesterol, A1C (e.g., pharmacist and/or dental provider model).</p> <p>Increase use of the CDC-approved evidence-based lifestyle change program to prevent or delay onset of type 2 diabetes among people at high risk.</p> <p>Implement systems to increase provider referrals</p>

	<p>physical activity, tobacco, community water fluoridation, and other areas.</p> <p>Collect cancer surveillance data to assess cancer burden and trends, identify high risk populations, and guide planning and evaluation of cancer control programs (e.g., prevention, screening and treatment efforts).</p>		<p>allowing them to assist in the medical management of chronic diseases.</p> <p>Health care information systems with automated physician prompts or patient reminder letters for screening and follow-up clinical counseling.</p> <p>Quality improvement of clinical care for cancer screening and screening/control of A1C, blood pressure, BMI, and cholesterol, and tobacco use.</p>	<p>of people with prediabetes or multiple diabetes risk factors to sites offering the CDC-approved lifestyle change program.</p> <p>Use of allied health providers (nurses, dentists, etc.), community health workers, and/or patient navigators in supporting control of high blood pressure, high cholesterol, and A1C.</p> <p>Effective outreach to the population to increase use of clinical and other preventive services.</p> <p>Reimbursement policies for community health workers in improving management of chronic diseases.</p> <p>Coverage/reimbursement for diabetes self-management education and chronic disease self-management support programs.</p> <p>Develop guidelines and systems within clinical care</p>
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Nutrition	Surveillance of behavioral risk factors and monitor environmental change policies and laws related to healthful nutrition.	<p>Nutrition standards for food and beverages offered in settings to include state agencies, local and tribal governments, private sector businesses, schools, child care and education facilities, senior centers, and other facilities serving older adults.</p> <p>Accessible, available, and affordable healthful foods in communities, including provision of full service grocery stores, farmers markets, small store initiatives, mobile vending carts, and restaurant initiatives.</p> <p>Comprehensive school policies to promote healthful nutrition, including: -Implement IOM</p>	Breastfeeding policy in birthing hospitals using Baby Friendly Hospital Initiative policy recommendations and implementing "Ten Steps for Successful Breastfeeding in Hospitals"	

		<p>recommendations on competitive foods (e.g., vending or a la carte items);</p> <ul style="list-style-type: none"> -Limit the availability of unhealthy foods; -Offer drinking water free of charge throughout day. 		
Oral Health	<p>Collect, use, and disseminate data including BRFSS, PRAMS (oral health question), Basic Screening Survey and Water Fluoridation Reporting System On oral diseases, risk factors, and use of preventive oral health services.</p>	<p>Access to community water fluoridation</p>	<p>Access to clinical and preventive oral health services.</p> <p>Increase access to and use of clinical and preventive oral health services including the provision of preventive services to young children in physicians' offices along with assessment and anticipatory guidance.</p> <p>Increase the number of pediatricians who provide preventive oral health services and who link patients with a dental provider if no provider is identified.</p> <p>Expand existing scope of practice for dental hygienists and other allied health professionals, especially in public health settings.</p>	<p>Access to school-based and school-linked dental sealant programs (and, where needed, referral to dental home for those without a dental provider).</p>
Physical Activity	<p>Conduct surveillance of</p>	<p>Policies for the built</p>		

	behavioral risk factors and monitor environmental change policies and laws related to physical activity.	<p>environment to promote active transportation (e.g., complete street designs, safe routes to school programs, promoting bicycling as a mode of transportation, health impact assessments).</p> <p>Policies and environmental support for:</p> <ul style="list-style-type: none"> - required daily, quality physical education in schools -daily physical activity; standards in early care and education; -access to physical activity for employees through worksite wellness initiatives. <p>Comprehensive school policies to promote physical activity.</p>		
Reproductive Health	Conduct surveillance of health behaviors and policies for women before, during, and after pregnancy using the Pregnancy Risk Assessment Monitoring System (PRAMS) to	Evidence-based screenings, counseling and procedures that address women's greater need for services over the course of a life-time Institute Of Medicine (IOM) recommendations	Provision of quality, accessible, and confidential family planning services, including contraceptive methods and services	

	<p>translate and disseminate data for action and collaborate with state PRAMS coordinators in using findings for program strategies and policies as appropriate.</p> <p>Use BRFSS to continuously assess health status of and receipt of preventive services by women of reproductive age</p> <p>Link administrative, vital records, and hospital discharge data to conduct surveillance on the prevention of preterm births and pregnancy complications.</p>			
Tobacco	<p>Conduct youth and adult surveillance of tobacco knowledge, attitudes and behaviors (ATS/NATS, YTS/NYTS); translate and disseminate data and information for action.</p>	<p>Evidence-based tobacco control policies:</p> <ul style="list-style-type: none"> • Comprehensive smoke-free air policies (i.e. no smoking in workplaces, restaurants and bars; 	<p>Delivery of smoking cessation services and treatments - including providing quitline coaching and cessation treatments as covered benefits.</p> <p>Changing health systems to embed cessation into routine</p>	<p>Tobacco-free campus for inpatient substance-abuse treatment and mental health facilities and increased access and delivery of cessation service to these populations.</p> <p>Collaboration between</p>

	<p>Conduct surveillance of and monitor enactment of policies and laws related to tobacco control.</p>	<ul style="list-style-type: none"> • Public education initiatives to increase awareness of dangers of tobacco use, promote quitting, and change social norms related to tobacco use; • Strategies to reduce access to tobacco (e.g. increase product price, transform the retail environment), • Expanded smoke-free policies in multi-unit housing and/or outdoor areas; <p>Tobacco free policies on college campuses and at worksites.</p>	<p>health delivery systems (e.g. tobacco-use screening and provider reminders in electronic medical records, delivery of cessation in hospital care settings).</p> <p>Dental provider reimbursement for tobacco screening and counseling including referral to quitlines.</p> <p>Providers' education on tobacco cessation during pregnancy</p>	<p>health care professionals and the community/government to increase availability of community resources that promote cessation (e.g. increase access, promotion and delivery of cessation at outpatient treatment facilities.</p> <p>Increased promotion of cessation services at voluntary substance-abuse treatment meetings and among mental health providers.</p>
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