New York State Department of Health
Prevention Agenda 2013-2018
Action Plan Re-Fresh Chart
December 2015

The New York State Department of Health has updated the Prevention Agenda's recommended set of evidence based programs, policies and practices to help local communities address local priorities. These recommendations are based on a review of the scientific literature, consultation with subject matter experts within the Department and external partners and the actual experience of local partnerships as reported on the Update Survey completed in December 2015.

The goal of this revision is to provide local communities with a set of interventions that offer local communities the best prospects of making meaningful progress in addressing chosen priorities. For each recommended intervention, the charts include short-term process measures to assess progress, as well as resources describing evidence-informed policies, programs and systems changes that will improve the variety of factors known to affect health.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent Chronic Diseases
December 2015

	Focus Area 1: Reduce Obesity in Children and Adults		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Create community environments that promote and support healthy food and beverage choices and physical activity.	Increase the number of institutions with nutrition standards for healthy food and beverage procurement.	Number of municipalities, community-based organizations, worksites and hospitals that develop and adopt policies to implement nutrition standards (cafeterias, snack bars, vending)	NYS Prevention Agenda. Promoting the Adoption and Use of Nutrition Standards
		Number of individuals (and their demographic data if available) potentially accessing settings that have adopted policies to implement nutrition standards for health food and beverage procurement	NYS Prevention Agenda Fact Sheet: Promoting Nutrition Standards for Healthy Food and Beverage Procurements
	Increase the number of municipalities that have Complete Streets policies.	Number and percent of residents that reside in a jurisdiction with Complete Streets policies, plans and practices	NYS Prevention Agenda Fact Sheet: Promoting Complete Streets
		Percent of roads in a jurisdiction that become subject to Complete Streets policies, plans and practices	NYS Prevention Agenda: Complete Streets training
		Number of municipalities where new or enhanced policies, plans and practices that promote Complete Streets are proposed	National Complete Streets Coalition: Elements of a Comprehensive Complete Streets Policy
		Number of municipalities that adopt and implement policies, plans and practices that promote Complete Streets	

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent Chronic Diseases
December 2015

	Focus Area 1: Reduce Obesity in Children and Adults		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
	Promote physical activity in community venues through signage, worksite policies, social support and joint use agreements.	Number and type of community venues that promote physical activity through signage, worksite policies, social support and joint use agreements Number of adults who have access to community venues that promote physical activity through signage, worksite policies, social support and joint use agreements	ChangeLab Solutions. Move This Way: Making Neighborhoods More Walkable
Prevent childhood obesity through early child care and schools.	Encourage early childcare programs to enroll in the Child and Adult Care Food Program (CACFP) and in the Eat Well play Hard program (EWPH).	Number of childcare programs enrolled in CACFP and EWPH	NYSDOH website: Child and Adult Care Food Program
	Encourage districts to prohibit advertising and promotion of less nutritious foods and beverages, to adopt and implement standards for competitive foods, and to implement Comprehensive School Physical Activity Programs (CSPAP).	Number of districts with local wellness policies that prohibit advertising and promotion of less nutritious foods and beverages, adopt and implement standards for competitive foods, and implement CSPAP	CDC website: Comprehensive School Physical Activity Program
	Increase the number of schools with comprehensive and strong Local School Wellness Policies (LWPs).	Number of schools that adopt and implement comprehensive and strong LWPs	Comprehensive School Physical Activity Programs: A Guide for Schools
	Promote mandatory active recess in schools.	Number of schools that adopt mandatory active recess policies	Mandatory Daily Active Recess Guide

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Prevent Chronic Diseases
December 2015

Goals	Recommended Intervention for Local Action	Recommended Short Term Process Measures	Resources
Focus Area 1: Reduce Obesity in Children and Adults			
Expand the role of health care, health services providers and insurers in obesity prevention.	Recruit hospitals to participate in quality improvement efforts to increase breastfeeding exclusivity at discharge.	Number of hospitals that have joined NYS BQIH, NYC BHC, Great Beginnings NY, or Latch on NYC	NYSDOH Website: Breastfeeding Promotion Program
	Encourage and recruit pediatricians, obstetricians and gynecologists, and other primary care provider practices and clinical offices to become New York State *Breastfeeding Friendly Practices.*	Number of primary care practices that are designated as *NYS Breastfeeding Friendly* Number and demographics of women reached by policies and practices to support breastfeeding	NYS Prevention Agenda Fact Sheet: Increasing Breastfeeding
Expand the role of public and private employers in obesity prevention.	Use the *Business Case for Breastfeeding* to encourage employers to implement breastfeeding-friendly policies.	Number of employers that have implemented lactation support programs Number and demographics of women reached by policies and practices to support breastfeeding	Breastfeeding Partners. Making It Work Toolkit HRSA Business Case for Breastfeeding
	Implement nutrition and beverage standards in public institutions, worksites, and other key locations such as hospitals.	Number and type of key community locations that adopt and/or implement nutrition and beverage standards Number of adults that have access to key community locations that adopt and/or implement nutrition and beverage standards	Healthy Workplace Food Toolkit Healthy Hospital Food Toolkit NYS Department of State Local Government Services resources and trainings website
	Increase coverage for the national Diabetes Prevention Program (NDPP) by working with self-insured employers.	Number of self-insured employers with NDPP as a covered benefit and the number of employees with access to NDPP as a covered benefit through their self-insured employer	Prediabetes: A Healthcare Provider's Toolkit for Action

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Prevent Chronic Diseases
December 2015

	Focus Area 2: Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Prevent initiation of tobacco use by youth and young adults, especially among low socioeconomic status (SES) populations.	Encourage municipalities to implement policies that protect youth from tobacco marketing in the retail environment, also known as the point-of-sale (POS). Decrease availability and increase price of tobacco products.	Number of municipalities that restrict tobacco marketing in stores, including: o Tobacco display restrictions o Limiting the number, type and location of licensed tobacco retailers o Prohibiting the use of coupons and multi-pack discounts Number of tobacco retailers in a given community	Prevention Agenda Fact Sheet: Protecting Youth from Tobacco Marketing in the Retail Environment
Promote tobacco use cessation, especially among low SES populations and those with poor mental health.	Increase awareness of Medicaid benefits for smoking cessation including counseling and medication. Promote use of evidence-based tobacco dependence treatments among those who use tobacco.	Number of Medicaid enrollees who smoke and utilize the cessation benefit Number of providers who deliver evidence-based assistance to their patients who smoke including brief counseling, medications and arrange for follow-up	Public Health Service Guidelines 2008 Update: Treating Tobacco Use and Dependence
Eliminate exposure to secondhand smoke.	Encourage adoption of smoke-free policies in publicly and privately operated housing.	Number of public housing authorities, nonprofit community development corporations, supportive housing providers and market-rate apartment management companies that have passed 100% smoke-free policies to include all sections of their building, personal and common areas	Prevention Agenda Fact Sheet: Promoting Smoke-Free Policies in Multi-Unit Housing

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Prevent Chronic Diseases
December 2015

	Focus Area 3: Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Increase screening rates for cardiovascular diseases, diabetes and breast, cervical and colorectal cancers, especially among disparate populations.	Implement policy and environmental approaches to increase the number of community members with access to recommended colorectal cancer screening services.	Number of worksites implementing paid time off or flex time policies for cancer screening Number of patients navigated to and/or through screening Number of screening events held in partnership Number of transit vouchers provided	Prevention Agenda Fact Sheet: Reducing Structural Barriers to Cancer Screening Prevention Agenda Fact Sheet: Increasing Cancer Screening through Public Awareness and Promotion
	Implement evidence-based activities that increase public awareness about colorectal cancer screening.	Number of partners, employers, and local elected officials participating in awareness events	National Colorectal Cancer Roundtable: 80% by 2018 Communications Guidebook: Effective messaging to reach the unscreened
	Promote uptake of guideline-recommended cancer screening by increasing awareness that cancer screening is a covered benefit among newly insured men and women.	Number of media alerts (press releases, sample articles) distributed Number of media mentions/stories promoting cancer screening Number of events held, promoted and attended	National Colorectal Cancer Roundtable. Steps for Increasing Colorectal Cancer Screening Rates: A Manual for Community Health Centers
	Promote provider practice implementation of evidence-based interventions to increase evidence-based cancer screening including the recommendation that patients be offered options for colorectal cancer screening.	Number of mobile vans offering colorectal cancer screening through take-home fecal tests Number of providers that deliver evidence-based interventions	The Guide to Community Preventive Services

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent Chronic Diseases
December 2015

Focus Area 3: Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Promote evidence-based care to manage chronic diseases. Promote culturally relevant chronic disease self-management education.	Promote the use of evidence-based interventions to prevent or manage chronic diseases.	Number and type of evidence-based self-management programs (also called evidence-based intervention, or EBIs) offered by partners Number of participants at EBIs offered by partners Percent of adults with one or more chronic diseases who have attended a self-management program Number of referrals to EBIs from health care professionals Number and percent of adults among population(s) of focus (e.g., communities of color, persons with disability, low-income neighborhoods) who have attended EBIs	NYS Prevention Agenda: Community Wide Systems to Deliver Evidence-Based Interventions to Address Chronic Diseases Prevention Agenda Fact Sheet: Promoting Evidence-Based Interventions to Prevent or Manage Chronic Diseases

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote a Healthy and Safe Environment
December 2015

Focus Area 1: Outdoor Air Quality			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce exposure to outdoor air pollutants.	Utilize the Environmental Protection Agency's Air Quality Flag Program to educate the public on potential health effects of air pollutants and actions individuals can take to reduce exposures.	Number of EPA's Air Quality Flag Programs at schools and other community organizations	EPA Air Quality Flag Program
	Educate the community on the Air Quality Index.	Number of initiatives started to raise awareness on air quality	Daily Air Quality Index Forecast for NYS

County Health Rankings and Roadmaps: Air pollution |
| | Partner with meteorologists and local health departments to raise awareness on air pollutants. | Number of meteorologists contacted to request partnership | |
| | Outreach to NY State of Health Navigators to encourage their promotion of primary care utilization for management of chronic conditions to prevent acute symptoms. | Number of navigators contacted to share information on access to primary care | NY State of Health Navigators |

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote a Healthy and Safe Environment
December 2015

	Focus Area 2: Water Quality		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Increase the percentage of State residents that receive fluoridated drinking water.	Provide communities interested in implementing fluoridation with outreach materials and resources to promote fluoridation as a significant health intervention (including awareness of additional funding sources).	Number of partners that have received fluoridation outreach resources	NYSDOH Water Fluoridation Resources
Reduce potential health risks associated with drinking water and recreational water.	Provide monitoring recommendations to private well owners.	Number of private well owners receiving monitoring recommendations	CDC's Community Water. Disinfection By-products and Your Health NYSDOH Fact Sheets on Protection of Water Wells: Recommended Residential Water Quality Testing (Fact Sheet #3) NYSDOH Fact Sheets on Protection of Water Wells: Susceptible Water Sources (Fact Sheet #5) NYSDOH Fact Sheet: Concerns about Surface Water as a Drinking Water Source

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote a Healthy and Safe Environment
December 2015

	Focus Area 3: Built Environment		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Improve the design and maintenance of built environments to promote healthy lifestyles, sustainability and adaptation to climate change.	Implement the Smart Growth Public Infrastructure Act, which requires consideration of Smart Growth principles when planning and funding investments, as well as the Complete Streets law, which requires focused consideration of bicycle and pedestrian elements within street design.	Number of municipalities where new or enhanced policies, plans and practices that promote Complete Streets are proposed	County Health Rankings and Roadmaps: Built Environment
	Implement strategies that support bicycling and walking, i.e. Complete streets policies.	Number of municipalities that adopt and implement policies, plans and practices that promote Complete Streets	U.S. Department of Transportation, Complete Streets Policies
		Number or percent of roads in a jurisdiction that become subject to Complete Streets policies, plans and practices	CDC Story from the Field: Example of complete streets initiative. Taking it to the (Complete) Streets
		Number of municipalities where new or enhanced policies, plans and practices that promote Complete Streets are proposed	U.S. Department of Transportation, Complete Streets Policies
	Implement carpool and rideshare programs to help commuters share transportation.	Number of municipalities having formal commuter assistance programs	
	Construct and maintain safe sidewalks, bike lanes, recreational facilities, parks and other amenities, especially in low-income communities.	Number of newly constructed infrastructure to support alternative transportation	
	Implement alternative fuels initiatives to support transition from traditional motor fuel sources (e.g., gasoline and diesel) to alternative sources.	Number of municipalities with alternative fuel initiatives	

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote a Healthy and Safe Environment
December 2015

	Focus Area 3: Built Environment		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
		Number of municipalities who have implemented strategies that support cycling and walking	
		Percentage of the population who commute using alternate modes of transportation (e.g., public transportation, carpool, bike/walk, telecommute)	
		Number of meetings with a transportation authority regarding better access to bus routes	
	Adopt the Climate Smart Communities pledge.	Percentage of the population that lives in a jurisdiction that adopted the Climate Smart Communities pledge	NYS DEC List of Climate Smart Communities
	Open new or expand cooling centers.	Number of existing cooling centers identified in the county	NYSDOH County Cooling Centers
	Redevelop a brownfield site.	Number of municipalities promoting or planning for brownfield redevelopment	
Improve the design and maintenance of home environments to promote health and reduce related illness.	Implement home-based interventions, including remediation of lead paint, IPM to control pests safely and mold prevention and treatment.	Number of municipalities who promote home-based interventions	

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote a Healthy and Safe Environment
December 2015

Focus Area 4: Injuries, Violence and Occupational Health			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce factors that increase the risk of falls, particularly among the elderly and young children.	Promote community-based programs for fall prevention, including home-based environmental risk assessments.	Number of CPT-codes submitted for falls risk assessment and/or plan of care	CDC's Prevention Falls: A Guide to Implementing Effective Community-Based Fall Prevention Programs
	Promote physical activity opportunities through active design promotion, particularly for older adults.	Number of evidence-based, community fall prevention programs offered	
		Number of practices educated about community fall prevention services/programs	
		Number of people participating in evidence-based, community fall prevention programs	
		Number of partnerships on fall prevention programs for older adults Number of home-based risk assessments conducted	
	Promote implementation of Tai Chi for Arthritis.	Number of agencies receiving Tai Chi for Arthritis information	Tai Chi for Arthritis
Reduce violence by supporting violence prevention programs.	Develop multisector violence prevention programs such as SNUG, Cure Violence, or CEASEFIRE in high-risk communities.	Number of violence prevention program being implemented within the community	CDC Violence Prevention Program Resources
Reduce occupational injury and illness.	Develop targeted occupational safety and health training programs for employers and workers in high-risk jobs.	Number of training programs available in the community to teach occupational safety and health	CDC's Talking Safety. Teaching Young Workers about Job Safety and Health
			State of California Heat Illness Prevention Campaign Report

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Healthy Women, Infants, and Children
December 2015

Focus Area 1: Maternal and Infant Health			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce premature birth. Increase the proportion of babies who are breastfed. Reduce the rate of maternal deaths.	Integrate pregnancy planning, contraception and preconception/interconception health services into routine primary care and care management for all women of reproductive age to reduce unintended pregnancies, including short inter-pregnancy interval pregnancies. Provide outreach and education to health care providers, through mechanisms such as public health detailing, to improve their knowledge, beliefs and skills related to improved use of evidence-based clinical and community-based interventions to reduce preterm birth and improve women's health across the lifespan. Ask all pregnant women about tobacco use and provide augmented, pregnancy-tailored counseling for those who smoke. Assess and develop strategies to address substance use among pregnant and parenting women and develop strategies to reduce use. Provide evidence-based home visiting and community health worker program models to provide enhanced support to assist women in getting health insurance, engaging in health care services, securing basic needs assistance, and practicing healthy behaviors. Develop and implement strategies to increase screening and follow-up for maternal depression.	Percent of women with a preventive medical visit in past year Percent of sexually active women of reproductive age not intending to become pregnant within the next year who are regularly using contraception Number and percent of targeted provider practices that received a detailing visit and indicated a change in knowledge based on a pre/post questionnaire Number and percent of women for whom tobacco counselling was provided as part of prenatal visit Number and percent of women who received evidence-based home visits Number and percent of women who received screening for maternal depression	The clinical content of preconception care: women with chronic medical conditions. - PubMed - NCBI The American Congress of Obstetricians and Gynecologists (ACOG): Literature and implementation tools for obstetricians to establish smoking cessation as part of prenatal care NYSDOH Maternal, Infant and Early Childhood Home Visiting Initiative Depression in Adults: Screening, December 2009 (U.S. Preventive Services Task Force) Free Text4baby App NYSDOH Medicaid Prenatal Care Standards

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Healthy Women, Infants, and Children
December 2015

	Focus Area 1: Maternal and Infant Health		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
	Develop and implement a public awareness campaign related to preconception and inter-conception health.	Number and percent of women in target population reached by educational campaign addressing the importance of receiving early prenatal care and attending prenatal visits	
	Develop and implement a public awareness campaign, including promotion of NYS' Text4Baby resource, related to prenatal and postpartum care, and importance of well-baby visits for infants.	Number and percent of total prenatal patients enrolled in program	
	Identify and promote educational messages and formats that have been demonstrated to improve knowledge, attitudes, skills and/or behavior related to prenatal care and preterm birth among target populations, including high-risk pregnant women, women of childbearing age and women with disabilities.		
	Provide timely, continuous and comprehensive prenatal care services to pregnant women in accordance with NYS Medicaid prenatal care standards and other professional guidelines.		
	SEE CHRONIC DISEASE		

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Healthy Women, Infants, and Children
December 2015

Focus Area 2: Child Health			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Increase the percentage of children who receive comprehensive well-child health services in accordance with AAP guidelines.	Provide evidence-based home visiting and community health worker program models to support families in practicing healthy behaviors and parenting skills to nurture their children's development.	Percent of children 10-71 months receiving developmental screening using a parent-completed screening tool Number and percent of children ages 1-17 who had a preventive dental visit in the past year	American Academy of Pediatrics Bright Futures Guidelines and Pocket Guide Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents/American Academy of Pediatrics; 3rd edition
	Promote the use of NYS Text4Baby resource to reinforce importance and schedule of well-baby visits.	Number of pregnant women who signed up for Text4Baby	IPA/Navigator Site Locations	New York State of Health
	Collaborate with AAP, WIC, child health providers and other community partners to develop and implement strategies to increase use of well-baby care and improve preventive care practice in accordance with *Bright Futures* standards.	Percent of children receiving annual visit in accordance with recommendations for preventive pediatric health care	American Academy of Pediatrics Bright Futures Tool and Resource Kit Materials are available for download for review and reference purposes only. For any other use, to make multiple copies of specific items, or to incorporate forms into an Electronic Medical Record System, contact aapsales@aap.org.
	Develop, disseminate, promote and utilize tools for providers to prompt or facilitate well-child visit components, including checklists, registries, data systems and electronic health records.	Percent of children who had five or more well-child visits with a primary care provider in their first 15 months of life. (QARR) and had all recommended immunizations Percent of children, ages 3 to 6 years, who had one or more well-child visits with a primary care provider during the measurement year (QARR) and had all recommended immunizations Percent of adolescents ages 12-17 with a preventive medical visit in the past year	CDC - Guidelines & Recommendations - Division of Oral Health

Focus Area 2: Child Health			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce prevalence of dental caries among children.	Work with schools and other community partners to support adult mentoring and supervision activities for youth in underserved communities. Link children and families to dental services. Support the delivery of oral health screening and preventive dental services through school-based clinics and programs, with a focus on evidence-based practices. Support maintenance and expansion of community water fluoridation.	Number and percent of active pediatric patients who received reminders about recommended well child visits Number of new and existing SBHCs in local communities Number of "Community Schools" with a before-or after-school, mentoring or summer program with a qualified adult Number of school based dental health sites Number of children screened who received preventive dental services through school-based dental health sites in the past year Number and percent of communities with fluoridated water	Association of State and Territorial Dental Directors (ASTDD) Best Practice Approaches CDC - Oral Health: My Water's Fluoride My Water's Fluoride provides information about the fluoride level in the community

Prevention Agenda Action Plan Re-Fresh Chart

Focus Area 3: Reproductive, Preconception and Inter-Conception Health			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce rates of teen and unplanned pregnancy.

Increase the use of preventative health care services by women ages 15-44. | Work with community partners to support the delivery of evidence-based sexual health education and confidential reproductive health care services for teens in both community and school-based clinical settings.

Integrate preconception and inter-conception care into routine primary care for women of reproductive age including screening and follow-up for risk factors, management of chronic diseases and contraception. | Number of community providers delivering evidence-based programming.

Number of adolescents who have received reproductive healthcare services

Number of primary care providers that are made aware of the Before, Between and Beyond Pregnancy web site including the national preconception curriculum, tool kit and resource guide for clinicians | ACT for Youth
Online source for positive youth development

Before, Between & Beyond Pregnancy
The national preconception curriculum and resources guide for clinicians |

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 1: Promote Mental, Emotional and Behavioral Well-Being		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
Promote mental, emotional, and behavioral well-being in communities.	Five evidence-based actions can promote well-being and foster supportive environments: 1) *Connect people through social inclusion and community cohesion.* World Health Organization. Health Evidence Network. What is the evidence on effectiveness of empowerment to improve health? Explains that participation alone is insufficient if strategies do not also build capacity of community organizations and individuals in decision-making and advocacy. Describes strategies for effective empowerment. Evidence-based kernels are the smallest unit of proven behavioral influence. Two examples include using a timer to complete a task and identifying meaningful roles, among others. Early Childhood Home Visitation. Home visitors convey information, offer support, and provide training to families. Positive Parenting Program (Triple P). Designed to prevent–as well as to treat – behavioral and emotional problems in children and teenagers Parent Corps. Designed by the National Council for Behavioral Health to foster healthy development and school success among young children (ages 3-6) living in disadvantaged neighborhoods.	Well-being is a relative and dynamic state where one maximizes his or her physical, mental and social functioning in the context of supportive environments to live a full, satisfying and productive life. It is measured objectively and subjectively, either separately or integrated within other measurement systems. **Examples of Objective Measures:** • The American Human Development Index includes educational measures, life expectancy, and median earnings. • The Opportunity Index includes measures related to the economy (e.g., poverty rate); education (e.g., percent on-time high school graduation); and community characteristics (e.g., percent young people not in school or at work). **Examples of Subjective Measures:** • Subjective well-being measures satisfaction with life, quality of functioning, connections with the community, and engagement. The process is explained in New Economics Foundation's Measuring Well-Being.	National Academy of Sciences. Preventing Mental, Emotional, and Behavioral (MEB) Disorders Among Young People: Progress and Possibilities is a seminal publication that makes a compelling case for MEB health promotion and disorder prevention. National Prevention Council. National Prevention Strategy. Mental and Emotional Well-being outlines the national strategy. Substance Abuse and Mental Health Services Administration. National Registry of Evidence-based Programs and Policies (NREPP) is a database of evidence-based practices. New Economics Foundation. Five ways to well-being: the evidence. Outlines a five-pronged strategy for promoting individual well-being using simple language. Kobau R, Seligman ME, Diner E, Zack MM, Chapman D, Thompson W. Mental health promotion in public health: perspectives and strategies from positive psychology. *Am J Public Health*. 2011 Aug;101(8):e1-9. doi: 10.2105/AJPH.2010.300083. Epub 2011 Jun 16. Outlines the benefits of positive psychology.

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

Focus Area 1: Promote Mental, Emotional and Behavioral Well-Being			
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Mental Health First Aid is an evidence-based public education program that teaches people how to respond to individuals who are experiencing one or more acute mental health crises (such as suicidal thoughts or behavior, an acute stress reaction, panic attacks or acute psychotic behavior) or are in the early stages of one or more chronic mental health problems (such as depressive, anxiety or psychotic disorders, which may occur with substance abuse). 2) *Promote physical activity that is both enjoyable and suitable to a person's level of mobility and fitness, as well as encourage healthy eating.* Increasing Physical Activity and Healthy Eating for a Healthy Weight describe evidence-based approaches from the Community Guide. Create environments that promote and support healthy food and beverage choices and physical activity has links to policy interventions that promote healthy eating and physical activity. 3) *Facilitate learning environments through the lifespan.* The Growth Mindset Toolkit for teachers, educators and parents has resources to assess and strengthen a "growth mindset" that facilitates learning.	• Barile JP, Reeve BB, Smith AQ, Zack MM, Mitchell SA, Kobau R, Cella DF, Luncheon C, Thompson WW. Monitoring population health for Healthy People 2020: evaluation of the NIH PROMIS Global Health, CDC Healthy Days and satisfaction with life instruments. *Qual Life Res*. 2013 Aug;22(6):1201-11. Identifies nine questions that were tested for monitoring well-being. • The Young Foundation. Taking the temperature of local communities: The Wellbeing and Resilience Measure (WARM). Tool combines familiar data such as jobs and health with new ways of thinking about how happy and resilient communities are.	Kobau R, Sniezek J, Zack MM, Measuring subjective well-being: an opportunity for National Statistical Offices? ISQOLS Conference: Measures and goals for the progress of societies. Satellite Meeting. 2009. Has a consensus definition of well-being and identifies opportunities. O'Donnell G, Deaton A, Durand M, Halpern D, Layard R. Wellbeing and Policy. Legatum Institute. 2014. Explains how well-being can guide policy.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 1: Promote Mental, Emotional and Behavioral Well-Being		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Good Behavior Game is a classroom-based behavior management strategy for elementary school that teachers can use along with a school's standard instructional curricula. The Penn Resilience Program is an evidence-based program from the University of Pennsylvania. Enabling Employee Wellness: What Do We Know About What Works? From the Altarum Institute, this resource describes cost-effective strategies Investing in worksite wellness: A case study of evidence-based approaches described in the Community Guide. . 4) *Integrate policies that promote consciously noticing and appreciating the present.* A Preliminary Study by Kuyken W, Weare K, Ukoumunne OC, Vicary R, Motton N, Burnett R, Cullen C, Hennelly S, Huppert F. on the Effectiveness of the Mindfulness in Schools Programme: non- randomised controlled feasibility study. The British Journal of Psychiatry Aug 013, 203 (2) 126-131; . In this study, the authors conclude "This feasibility study is the first step towards evaluating the curriculum and provides preliminary evidence of acceptability and efficacy.'		

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 1: Promote Mental, Emotional and Behavioral Well-Being		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Mindfulness-Based Cognitive Therapy. Instructors help participants to strengthen their mindfulness meditation through practice and to develop cognitive skills that assist them in disengaging from habitual ("automatic") and dysfunctional cognitive routines. Mindfulness-Based Stress Reduction. Structured, 10-session, manual-driven program includes 31 hours of instruction by professionally-trained teachers, who deliver the sessions in a group setting over 8 weeks. The program teaches people to manage their stress by adjusting their cognitive perspective and increasing their coping skills to build self-confidence in handling external, stressful situations. 5) *Facilitate policies that connect with community and greater good such as volunteerism, kindness, and advocacy.* Potential Best Practice for Enhancing Civic Engagement Outcomes by the Alliance for Children and Families and United Neighborhood Centers of America (UNCA) articulates 20 best practices that relate to four strategic clusters: Board of directors, organizational infrastructure, empowerment of community residents and tactical strategies. Gratitude Interventions. Explains several interventions such as creating gratitude lists, contemplating gratitude and addressing behavioral characteristics that have evidence of promoting short-term or long-term benefits.		

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
Prevent underage drinking, non-medical use of prescription pain relievers by youth, and excessive alcohol consumption by adults	**School-based programs:** Life Skills Training, Too Good for Drugs, Project towards No Drug Abuse, and Project Success target social and psychological factors that promote the initiation of substance use, and build student resiliency by teaching social competency, autonomous problem-solving, developing self-control and communication skills, improving decision-making strategies, and acquiring resources to resist drug use. **Screening** Project ASSERT is a screening, brief 15-minute intervention, and referral to treatment (SBIRT) model designed for use in health clinics or emergency departments. SBIRT is an approach to the delivery of early intervention and treatment to people with substance use disorders and those at risk of developing these disorders Teen Intervene is a brief, early intervention program for 12- to 19-year-olds who display the early stages of alcohol or drug involvement. **Environmental Approaches** Community Trials to Reduce High-Risk Drinking is a multi-component, community-based program designed to change alcohol use patterns of people of all ages. It has material related to alcohol access, responsible beverage services, risk of drinking and driving, underage alcohol access, and community mobilization.	**Examples of short-term outcome measures:** • Change in local laws and ordinances to reduce alcohol availability such as passage of Social Host liability laws, restrictions on hours and days of alcohol sales, happy hour and drink promotions, outlet density and alcohol advertising restrictions, prohibitions or controls on alcohol use at community events or in public areas (parks, beaches). • Percent of youth below age 21 who report drinking alcohol in the last 30 days • Percent of provider participating in prescription drug monitoring program. • Reported non-medical use of prescription pain relievers, alcohol use and binge drinking among youth • Rate of binge, heavy drinking among adults • Incidence of opioid overdose • Percent of alcohol related consequences: DWI arrest rates, alcohol-related motor vehicle accidents, poisonings and injuries	National Research Council and Institute of Medicine. Preventing Mental, Emotional and Behavioral Disorders Among Young People: Progress and Possibilities, 2009. Washington, DC: The National Academies Press. Seminal publication that makes a strong case for focusing on preventing mental, emotional and behavioral disorders among youth. Substance Abuse and Mental Health Services Administration. National Registry of Evidence-Based Programs and Practices is a database of evidence-based practices. University of Washington Alcohol & Drug Abuse Institute. Opioid Overdose Prevention Education has informative resources. Substance Abuse and Mental Health Services Administration. Opioid Overdose Prevention Toolkit features a resource packet. Responsible Opioid Prescribing: A Clinician's Guide has guidance for practitioners. OASAS Risk and Protective Factor Survey. Prevention Needs Assessment Survey has survey resources. Substance Abuse and Mental Health Services Administration. Center for the Application of Prevention Technologies. Heroin and Other Opioid-Related Outcomes: Key Indicators and National Sources has information on availability of state-specific data.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Overdose Prevention Project Lazarus is a public health model that asserts drug overdose deaths are preventable and communities are ultimately responsible for their own health. The model components include: 1) community activation and coalition building; 2) prescriber education and behavior; 3) supply reduction and diversion control; 4) pain patient services and drug safety; 5) drug treatment and demand reduction; 6) harm reduction including Naloxone training; 7) community-based prevention education; and 8) evaluation of project components. National Center for Addiction and Substance Abuse at Columbia University and OASAS. An SBIRT Implementation and Process Change Manual for Practitioners. Nov 2012 provides guidance on screening for substance abuse.	**Examples of process measures:** • Percent and/or number of providers participating in prescription opiate availability program • Percent participation in safe prescription opiate disposal programs, take-back events, drop boxes, safe storage education, and law enforcement diversion efforts • Percent and/or number of professionals participating in Naloxone trainings • Number of enforcement activities/efforts: responsible beverage/alcohol trainings; compliance checks of bars, restaurants and stores; increased enforcement at events, party patrols; impaired driving checkpoints • Number of public awareness, outreach, and educational efforts to change attitudes, beliefs, and norms towards underage and excessive adult alcohol use, prescription opiates. • Number of new coalitions; coalition members or community partners • Participation in coalition meetings	A Prevention Spectrum Approach to Opioid Use and Overdose Prevention Fact Sheet is a tip sheet that has the rationale, measures and practices. Substance Abuse and Mental Health Services Administration. Substance Abuse Prevention Media Campaign has examples of media campaigns developed by states, jurisdictions, and national organizations. New York State Office of Alcoholism and Substance Abuse Services. Talk2Prevent has communication toolkits for parents and for communicating with youth. New York State Office of Alcoholism and Substance Abuse Services. New York State Hopeline is a 24-hour hotline offering help, hope for alcoholism, drug abuse and problem gambling. New York State Office of Alcoholism and Substance Abuse Services. Combat Heroin and Prescription Drug Abuse has resources for parents, teachers, coaches, counselors, etc., for initiating conversations about heroin and opioid abuse.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders			
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
Prevent, reduce and address adverse childhood experiences (ACES)	**Governance and Leadership** Assess prevalence of adverse childhood experiences (ACEs) among children and/or adults in the community and efforts to support trauma-informed and trauma-sensitive approaches. Communicate through the agency's mission and/or written policies and procedures a commitment to a trauma-sensitive approach. Ensure policies and structures are in place to meaningfully engage participants, consumers, patients, persons who have trauma histories and other non-traditional participants. **Policy** Advocate for guaranteed, paid job-leave to all employed new parents. Increase access to high-quality child care and early childhood education, particularly for low-income families. Start schools for adolescents later in the day to help them get enough sleep. **Physical Environment** Develop community capacity for respite care for caregivers of a child with mental illness. Assess aspects of the physical environment that promote a sense of safety and calming. Assess and address mechanisms to ensure gender-related physical and emotional safety concerns.	**Examples of Short-term Outcome Measures** • Number and/or percent of adults and/or young people who have experienced caring relationships and have good mental health well-being. • Number and/or percentage of adults and/or young people impacted by policies that promote trauma-sensitive environments and resiliency. • Number and/or percent of adults and/or young people who experience increased opportunity to build resiliency. **Examples of Process Measures** • Number and/or percent of agencies that have communicated through the agency's mission and/or written policies and procedures a commitment to a trauma-sensitive approach and building resiliency. • Number and/or percent of agencies engaged in developing and/or promoting policies that promote trauma-sensitive environments and resiliency. • Number and/or percent of agencies that have assessed aspects of the physical environment that promotes a sense of safety and calming.	Substance Abuse and Mental Health Services Administration. Trauma-Informed Approaches and Trauma-Specific Interventions. Explains six key principles of a trauma-informed approach and trauma-specific interventions that address trauma's consequences and facilitate healing. Are the Children Well? A Model and Recommendations for Promoting the Mental Wellness of the Nation's Young People. Child Trends and Robert Wood Johnson Foundation. Policy Brief. July 2014. Offers an inclusive framework for understanding MEB wellness; describes multiple opportunities for improving children's well-being, consistent with this model; and makes concrete recommendations to policymakers for improving the mental wellness of children and youth. Community Resilience Cookbook. Highlights the process used by five cities and four states to address ACEs research in their communities. Trauma-Informed Community Initiative of Western New York has resources for professionals on trauma-informed care.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Engagement and Involvement Use media campaigns, both universal and those targeted for specific audiences, to reduce stigma associated with mental illness and treatment. Identify and support key principles of safety, trust, transparency, support, collaboration and empowerment in program mission, policies and structures. **Cross-sector Collaboration** Identify, engage and clarify roles of partners across sectors in supporting a trauma-sensitive environment. Identify and communicate mechanisms in place to promote cross-sector training to support trauma-sensitive environments. **Screening, Assessment and Treatment Services** Identify and remove structural and financial barriers that discourage clinicians from providing preventive care and MEB health screening. Promote coordination of mental health practitioners with other care providers through DSRIP Program and Performing Provider Systems. Include mental health consultations in all Child Protective Services' investigations to identify youth and families in need of care and support.	• Percent of agency screenings that incorporate questions related to trauma. • Percent of employees trained in trauma-informed approach. • Number of agencies that have assessed structural and financial barriers, and opportunities to integrate mental and physical health. **Long-Term Performance Measures** • Human Development Index • Opportunity Index • Well-Being Index • Prevalence of adverse childhood experiences (ACEs) among adults and/or youth in the community • Number of community members actively involved in decision-making, governance and advocacy on the promotion of well-being • Percent of adults and youth who report poor mental health	Building Trauma-Informed, Trauma-Sensitive and Resilient Communities Factsheet summarizes relevant research, and identifies measures and best practices. It was compiled by the New York State Department of Health, Office of Alcoholism and Substance Abuse Services, Council on Children and Families with the New York Academy of Medicine.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Training and Workforce Development Support training for "warm and firm" parenting though comprehensive parenting programs or other outreach. Support the provision of basic mental health "first aid" training for youth and adults. Support the implementation of whole-school tiered approaches to promote positive school climates and the mental wellness of all students. Support gatekeeper training for adults who work with youth and expand the scope of such training beyond suicide prevention to encompass a broader focus on wellness. Support training for pediatricians and other primary care physicians to strengthen their competence and comfort in discussing and referring for MEB health concerns. **Progress, Monitoring and Quality Assurance** Link community environmental improvement efforts with child mental health and wellbeing. **Financing** Identify, advocate and secure resources in MEB health in areas that balance a wellness and prevention focus with treatment and maintenance.		

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Evaluation Identify structures and processes that allow perspectives of people who have experienced trauma to inform program implementation and policies. Conduct a trauma-sensitive organizational assessment or have measures that show the level of the trauma-sensitive approaches being implemented.		
Prevent suicides among youth and adults.	**Identify Individuals at Risk** Share data on suicide, suicide attempts, and prevention efforts. Offer gatekeeper training. Screen for suicide risk in primary care or substance abuse programs. Include links/coordination with OMH Early Recognition and Screening (ERS). Reach out to groups that have a higher risk for suicide or suicide attempts than the general population including: men in midlife and older men; young American Indians and Alaska Natives; people bereaved by suicide; people in justice and child welfare settings; people who intentionally hurt themselves (non-suicidal self-injury); people who have previously attempted suicide; people with medical conditions; people with mental and/or substance use disorders; people who are lesbian, gay, bisexual, or transgender; and members of the military and veterans.	**Examples of Intermediate Outcome Measures** • Percent of people screened for suicide risk or mental health and substance abuse problems • Percent of people reporting supportive relationships • Number and/or percent of community members who restrict means such as guns stored at a gun club • Number and/or percent of organizations that partner on policies to restrict people from committing suicide	Suicide Prevention Resource Center. Suicide Prevention Basics. Describes components of a comprehensive approach to suicide prevention. Suicide Prevention Center of New York State http://www.preventsuicideny.org. Has educational and training resources. Rand Suicide Prevention Evaluation Toolkit. http://www.rand.org/pubs/tools/TL111.html Provides a comprehensive explanation for evaluating suicide prevention efforts. Implementing a Comprehensive Approach to Suicide Prevention Factsheet Summarizes research, and identifies measures and best practices. Compiled by the New York State Department of Health, Office of Alcoholism and Substance Abuse Services, and Council on Children and Families with the New York Academy of Medicine

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Increase help-seeking behavior Promote National Suicide Prevention Lifeline, 1-800-273-8255, through safe and effective public messages, systems navigation and enhanced accessibility. Use mobile applications, such as my3app, to promote services among specific populations and peer referrals. Utilize tele-mental health, rural outreach initiatives. Connect Suicide Postvention Training. Developed by NAMI New Hampshire to increase the capacity of a community or organization to respond effectively to a suicide death in order to prevent additional suicides and promote healing for survivors of suicide loss.	**Examples of Process Measures:** **Identifying Individuals at Risk** • Number and/or percent of agencies with which a data sharing agreement was established for individuals who have attempted suicide, died by suicide, or expressed suicidal ideation • Number and/or percent of specified individuals (school employees, community members, students, etc.) trained as gatekeepers using a specified program (e.g., ASIST, QPR, etc.) • Number and/or percent of specified professionals (primary care, substance use disorder treatment, social workers, school counselors trained in specific screening for suicide risk **Increasing Help-seeking behavior:** • Number and/or percent of calls/visits to the lifeline or other crisis service programs. • Number and/or percent of downloads of crisis service programs or information **Provide Effective Mental Health Services:** • Percent of screenings that result in a referral	Is Your Home Suicide Proof? Includes an interactive graphic on making your home safer ZEROSuicide has resources for preventing suicides in health and behavioral health care systems.

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
		• Percent of referrals that result in an appointment • Number and/or percent of specific providers trained to effectively treat a suicidal patient • Number of hospitals that install collapsible shower rails and reduce other points of ligature in psychiatric wards • Number of communities that introduce legislation to impact means restriction (e.g., guns, prescription drugs for non-medical use) **Follow Crisis Response Procedures:** • Number and/or percent of types of agencies that have a crisis response protocol • Number and/or percent of specified groups of individuals trained in crisis response protocols • Number and/or percent of deployments by crisis response teams	

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

Focus Area 2: Prevent Substance Abuse and Other Mental Emotional Behavioral Disorders			
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
Reduce tobacco use among adults who report poor mental health	Adopt tobacco-free regulations in all mental health facilities. Assess the feasibility of expanding the Medicaid benefit for smoking cessation services. Identify and support interventions to address disparities in smoking rates for those with poor mental health. Support and strengthen licensing requirement to include improved screening and treatment of tobacco dependence by mental health providers.	**Examples of Short-Term Performance Measures** • Tobacco use status after a period of time or at discharge **Examples of Process Measures** • Number or percent of community members screened for tobacco use • Number or percent of community members offered tobacco use treatment • Number or percent of community members who accessed and/or completed treatment **Examples of Long-Term Performance Measures** • Rate of tobacco use among people with poor mental health	**Intensive Tobacco Dependence Intervention for Persons Challenged by Mental Illness.** Developed by the University of Rochester School of Nursing for registered and advanced practice nurses to employ tobacco dependence interventions with their clients who smoke. **Center for Disease Control and Prevention**. Smoking Among Adults with Mental Illness has information and links to educational materials. Tobacco Free Toolkit: For Community Health Facilities, National Edition. Developed for public health care organizations and treatment facilities, particularly those serving people with mental illnesses and addictions. Tobacco Recovery Resource Exchange Implementation Toolkit. Resources for administrators and clinicians to facilitate integration of tobacco reduction education, treatment and policies in chemical dependence prevention and treatment.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

Focus Area 3: Strengthen Infrastructure			
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
Support integration of MEB health within chronic disease prevention strategies	Incorporate promotion of MEB health as part of efforts to prevent chronic disease by doing the following: • Identify a shared purpose integrating chronic disease prevention and behavioral health goals and interventions • Engage key stakeholders • Identify and adapt evidence-based interventions • Identify and track process and intermediate outcome measures • Continuously test and implement conditions for improvement such as workforce training and cultural sensitivity	Documentation of the inclusion of MEB health promotion in chronic disease interventions. Some relevant measures for this purpose are: **Shared Purpose measure examples** • Written purpose • Purpose identifies baseline and target values, audiences and sub-populations, methods for disseminating how effective practices can be spread to a larger community, and sustainability strategies. **Engagement measure examples** • Number of organizations collaborating, coordinating, or sharing resources with other organizations • Number of organizations making changes to practices (e.g., physical and behavioral health are integrated at point-of-care) **Outcome-focused measure examples** • Number of organizations or communities that demonstrate improved readiness to change their systems	Henry J. Kaiser Family Foundation. Integrating Physical and Behavioral Health Care: Promising Medicaid Models Centers for Disease Control and Prevention. Integrate Mental Health Promotion and Mental Illness Prevention with Chronic Disease Prevention, 2011-2015. Action plan includes eight strategies, each with specific actions that can be taken to achieve these strategies. Canadian Mental Health Association. Ontario. What Is the Fit Between Mental Health, Mental Illness and Ontario's Approach to Chronic Disease Prevention and Management? Explores the relationship between chronic disease, mental illness and mental health.

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

Focus Area 3: Strengthen Infrastructure			
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
		• Number of organizations that implemented evidence-based MEB health including substance abuse-related practices or activities **Evidence-based approach measure examples** • Number of individuals exposed to MEB health including substance abuse awareness messages • Number of individuals screened for MEB health including substance abuse or related interventions **Conditions for Improvement** • Number of organizations or communities implementing MEB health including substance abuse-related training programs • Number of individuals who have received training in prevention or MEB health promotion • Amount of pooled, blended, or braided funding used for MEB health including substance abuse-related practices that are consistent with the goals of the Prevention Agenda • Number of provider networks receiving assistance	

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 3: Strengthen Infrastructure		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
	Assist potential DSRIP performing provider networks to better understand the patterns of healthcare and health outcomes within each region of the state to assist with network formation.		Delivery System Reform Incentive Payment (DSRIP) Program for Providers and Professionals. Explains DSRIP, the main mechanism by which New York State is implementing the Medicaid Redesign Team Waiver Amendment. It will fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25% over 5 years.
	Initiate community conversations about the importance of promoting mental health and access to treatment and recovery services within local communities.	Number of discussions held Number of participants	Substance Abuse and Mental Health Services Administration. Community Conversations about Mental Health. Provides information on holding a community dialogue that builds awareness and support around mental health issues.
	Provide training and technical assistance related to MEB promotion and chronic disease interventions	Number of individuals who have received training in MEB prevention or health promotion Amount of pooled, blended, or braided funding used for MEB health including substance abuse-related practices/activities that are consistent with the goals of the Prevention Agenda	National Prevention Council. National Prevention Strategy. Mental and Emotional Well-being outlines the national strategy. Canadian Mental Health Association. Ontario. What Is the Fit Between Mental Health, Mental Illness and Ontario's Approach to Chronic Disease Prevention and Management? Discussion paper explores the relationship between chronic disease, mental illness and mental health.

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Promote Mental Health and Prevent Substance Abuse
December 2015

	Focus Area 3: Strengthen Infrastructure		
Goals	**Recommended Interventions for Local Action**	**Recommended Short-Term Process Measures**	**Resources**
Strengthen infrastructure for MEB health promotion and MEB disorder prevention.	Build and invest in infrastructure entails Building a Culture of Health through shared purpose, community engagement, outcome focus, evidence-based approaches and conditions. Two examples of the framework that can guide the process are: • Model for Improvement: Developed by Associates in Process Improvement to accelerate improvement • FSG Collective Impact: Provides a structure for cross-sector leaders to forge a common agenda for solving a specific social problem Work with partners to achieve goals. National League of Cities Center for Research & Innovation. Getting Things Done Together: A Workbook for Achieving Regional Goals includes questions, discussions and tables for interventions. Assess and address disparities in interventions. Prevention Institute's THRIVE. Community Tool for Health & Resilience In Vulnerable Environments has a tool that can be used by communities for interventions to improve health and safety and promote health equity. Community Conversations about Mental Health from Substance Abuse and Mental Health Services Administration provides information on holding a community dialogue that builds awareness and support around mental health issues.	**Examples of objective measures based on review of reports:** • Written purpose • Number of policy changes • Number of organizations collaborating on an initiative • Number of individuals screened • Number of providers trained **Subjective measures can include perceptions of coalition members about capacity related to each of the five components of infrastructure:** • Shared purpose • Engagement • Outcome focus • Evidence-based approaches • Conditions for improvement	National Prevention Council. National Prevention Strategy. Mental and Emotional Well-being outlines the national strategy. Evidence for Action. A program of the Robert Wood Johnson Foundation. What is a Culture of Health? Has the Culture of Health Action Framework Beeferman L, Wain A. Infrastructure – Defining Matter. Harvard University. Offers a rationale and definition of infrastructure Charter Assessment Tool, used by the Institute of Healthcare Improvement, is a self-assessment tool for evaluating shared purpose. Prevention Institute Collaboration Multiplier is an interactive framework and tool for analyzing collaborative efforts across fields. Partnership Self-assessment tool by the National Collaborating Center for Methods and Tools can be used by coalition members to optimize collaborative efforts. Sample indicators for Measuring Progress on Thrive Factors. From Prevention Institute's THRIVE: Community Tool for Health & Resilience In Vulnerable Environments, which has a list of equity measures.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

	Focus Area 1: Prevent HIV and STDs		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Decrease HIV morbidity.	Design all HIV interventions to address at least two co-factors that drive the virus, such as homelessness, substance use, history of incarceration and poor mental health. Include focus on men who have sex with men.	Number of cofactors addressed by each intervention	Holtgrave, D., Wolitski, R., Pals, S., et al. (2012 May). Cost Utility of the Housing and Health Intervention for Homeless and Unstably Housed Persons Living with HIV. *AIDS and Behavior.*
Increase early access to and retention in HIV care.	Introduce generic HIV drugs to the ADAP and Medicaid formularies as they come off patent between 2013 and 2017.	Status of ADAP and Medicaid formularies: number of new drugs added	Maxmen, A. (2012 Aug) Generic Drugs will Widen US Treatment Net. *Nature*, 488: 267.
Increase linkage and retention efforts to ensure persons diagnosed with HIV are connected to health care to maximize virus suppression so they remain healthy and prevent further transmission.	Ensure presumed HIV-positive individuals identified as out-of-care are located, interviewed, and linked to medical care and necessary supportive services. Promote referral of STD/HIV-infected persons to health department Partner Services programs. The requirement for the offering of HIV testing applies to persons receiving inpatient or emergency department services at hospitals, persons receiving primary care services through hospital outpatient clinics, diagnostic and treatment centers, and persons receiving primary care services from physicians, physician assistants, nurse practitioners and midwives regardless of setting. Work with these partners to implement the NYS HIV testing law.	Compliance with HIV testing law	Branson, B., Handsfield, H., Lampe, M., et al. (2006 Sep 22) Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings. *Morbidity and Mortality Weekly Report*, 55(RR):1-17. Kohler, P.K., Manhart, L.E., and Lafferty, W.E. (2008 April). Abstinence-only and Comprehensive Sex Education and the Initiation of Sexual Activity and Teen Pregnancy. *Journal of Adolescent Health*;42(4):344-51. Marietta, C. (2010) High Incidence of HPV in Minors Spotlights Need for State Legislators to Consider Amending Child 'Consent to Treatment' Laws. *Health Law Perspectives*, University of Houston.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

	Focus Area 1: Prevent HIV and STDs		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Facilitate access to Pre-Exposure Prophylaxis (PrEP) for persons engaged in high-risk behaviors to keep them negative.	Help public health professionals implement existing treatment guidelines by establishing systems such as computerized decision-making support or in-service on new intake.		Jones, C.A., Knaup, R.C., Hayes, M., and Stoner, B.P. (2000 Mar) Urine Screening for Gonococcal and Chlamydial Infections at Community-based Organizations in a High-morbidity Area. *Sexually Transmitted Diseases*, 27(3):146-51.
	Utilize HIV Care texting service.		Get HIV Care Resources in NYC
	Work with commercial health plans to reduce barriers to the delivery of recommended STD preventive services for minors.		Ghimire, L., Cairns, W., Smith, S., van Teijlingen, Dahal, R., and Luitel, N. (2011). Reasons for Non-use of Condoms and Self-efficacy among Female Sex Workers: A Qualitative Study in Nepal. *BMC Women's Health*, 11:42.
Decrease sexually transmitted diseases morbidity.	Ensure that all students attending public and charter schools in New York receive comprehensive, evidence-based, age-appropriate, medically accurate, unbiased sex education.		Morgan, M.M., Goodson J., and Barnett G.O. (1998). Long Term Changes in Compliance with Clinical Guidelines Through Computer Based Reminders. *Proceedings of AMIA Symposium*, 493-7.
	Promote safe sex messaging using new media and traditional media.		CDC: Pre-exposure Prophylaxis (PrEP) Pre-exposure prophylaxis, or PrEP, is a prevention option for people who are at high risk of getting HIV. It is meant to be used consistently, as a pill taken every day, and to be used with other prevention options such as condoms.
	Assure that consent issues for minors are not a barrier to treatment of HIV and STDs and administering HPV vaccination.		

Prevention Agenda Action Plan Re-Fresh Chart
Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

	Focus Area 1: Prevent HIV and STDs		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Decrease HIV and STD disparities.	Develop STD diagnosis and treatment capacity in settings beyond government clinics.		National Institute of Allergy and Infectious Disease, "Scientific Evidence on Condom Effectiveness for Sexually Transmitted Disease Prevention" Workshop Summary. 2001.
	Increase LHD capacity to bill for STD screening, treatment and care.		Centers for Disease Control and Prevention. Recommendations for Partner Services Programs for HIV Infection, Syphilis, Gonorrhea and Chlamydial Infections. MMWR Early Release 2008;57 October 2008:1-83.
	Help public health professionals implement existing treatment guidelines by establishing systems such as computerized decision-making support or in-service on new intake.		Workowski, K.A,, and Bolan, G.A. Sexually Transmitted Diseases Treatment Guidelines 2015. MMWR 2015:64(RR3):1-137
	Improve sharing of Care Coordination program data.		NYCDOHMH website: HIV Care Coordination
	Increase scope of condom access programs. Support and expand the implementation of Partner Services (PS).		Atherly, A. and Blake, S.C. "Efforts by commercial health plans to increase Chlamydia trachomatis screening among their members." Sex Transm Dis 40(1):55-60.
	Work with community-based agencies to build a relationship with PS staff, understand full comprehensive services offered, and educate and promote PS to HIV/STD-infected clients.		Centers for Disease Control and Prevention. (2009) Program Collaboration and Service Integration: An NCHHSTP White Paper
	Implement Expedited Partner Therapy (EPT) for the prevention of Chlamydia.		
	Conduct peer-led workshops, such as Positive Life Workshops		

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

Focus Area 1: Prevent HIV and STDs			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
			CDC's Effective Interventions: Data to Care Public health strategy that aims to use HIV surveillance data to identify HIV-diagnosed individuals not in care, link them to care, and support the HIV Care Continuum. Get HIV Care Resources in NYC CDC's Effective Interventions: Partner Services Partner services include a variety of related services that are offered to individuals infected with a HIV or an STD and their sexual or needle-sharing partners. Peers Reaching Out and Modeling Intervention Strategies (Community PROMISE) PROMISE is a community-level intervention capable of reaching any population to help people adopt safer sex or risk reduction practices. Workowski, K.A,, and Bolan, G.A. Sexually Transmitted Diseases Treatment Guidelines 2015. MMWR 2015:64(RR3); 1-137 CDC Stacks: Recommendations for HIV prevention with adults and adolescents with HIV in the United States CDC: Expedited Partner Therapy

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

Focus Area 1: Prevent HIV and STDs			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Increase and coordinate Hepatitis C virus (HCV) prevention and treatment capacity.	Expand HCV rapid testing, especially in HIV testing sites or where HIV testing is done routinely. Implement reflex testing for all positive screens. Remove age restrictions on the purchase of syringes without a prescription. Increase geographic coverage and participation in syringe exchange programs.		CDC's Project START This individual-level, multi-session intervention is for people being released from a correctional facility and returning to the community. CDC's Holistic Health Recovery Program The goals of this program, directed toward drug users, are health promotion and improved quality of life, abstinence from illicit drug use or from sexual risk behaviors, reduced drug use, reduced risk for HIV transmission, and improved medical, psychological, and social functioning CDC's Community PROMISE: Peers Reaching Out and Modeling Intervention Strategies PROMISE is a community-level intervention capable of reaching any population to help people adopt safer sex or risk reduction practices. New York State Hepatitis C Screening Program: The NYS Hepatitis C Screening Program providers free HCV rapid test kits and controls to programs serving clients at-risk for HCV and that also have the infrastructure to support HCV rapid testing.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

Focus Area 2: Prevent Vaccine Preventable Diseases			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Improve childhood, adolescent and adult vaccination rates.	Ensure and enforce strong immunization requirements for school entry. Investigate, research and work to eliminate disparities in vaccination rates. Disseminate and work to implement best practices in immunization to change practice context and ensure that immunizations are given at every opportunity. Offer immunizations in the birthing hospital to parents, caregivers and families of newborns. Investigate, research and work to eliminate disparities in vaccination rates by race, geography (rural, suburban, urban) and socioeconomic status.	Percent of 13 year-old children who have received the complete adolescent immunization series as indicated in NYSIIS Percent of children who have received the 4:3:1:3:3:1:4 immunization series between the ages of 19 to 35 months as indicated in NYSIIS	Too Many Vaccines? American Academy of Pediatrics addresses parental concern over number of vaccines given to children. CDC's Parents Guide to Immunizations Booklet teaches parents about the role vaccines play in keeping their children healthy. Childhood and Adolescent Immunizations, NYSDOH Site educates parents on the importance of vaccines and which diseases they prevent, immunization schedules, and links to resources on making vaccination less stressful. Common Vaccine Misperceptions and Concerns Explained To clear confusion surrounding vaccines, this NYSDOH site addresses common misperceptions and concerns about vaccination that have risen in recent years. Communicating with Parents About Vaccination: A Framework for Health Professionals Describes the importance of health professionals in maintaining public trust in vaccination; also identifies recommendations tailored to specific parental positions on vaccination.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

Focus Area 2: Prevent Vaccine Preventable Diseases			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Decrease the burden of pertussis disease, influenza disease and disease caused by human papillomavirus (HPV).	Provide immunizations for adolescents in schools. Reach out proactively to media outlets to educate them on immunization. Educate the public and providers on the importance of HPV vaccine. Make HPV vaccine available in family planning, STD treatment and other primary care settings.	Immunization rates for health care personnel in hospitals and long-term care facilities. Percent of adults who have been vaccinated against influenza in the past year.	Facts for Parents: Diseases & the Vaccines that Prevent Them CDC fact sheets include vaccination schedule, overview of vaccine production, reasons to vaccinate and information on vaccine ingredients, safety and risk. Give Your Child a Better Shot at Life - Vaccinate for HPV! Answers questions about human papillomavirus and the vaccine, provides fact sheets, and includes videos explaining the importance of HPV and why families chose to vaccinate. Influenza Immunization During Pregnancy, American College of Obstetricians and Gynecologists Information and toolkit on influenza vaccine during pregnancy. NYS Vaccines for Children Program The program helps provide eligible children in New York State with vaccines at no cost for the vaccine to the children or their parents or guardians. If You Choose Not to Vaccinate Your Child, Understand the Risks and Responsibilities CDC fact sheet outlines possible risks for parents who choose to delay or decline a vaccine; offers steps for parents to take to protect their child, family and others.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

Focus Area 3: Prevent Healthcare Associated Infections			
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce C. difficile infections.	Ensure that sinks and alcohol-based hand rub are readily available for patients, visitors and health care personnel. Where feasible, incorporate building design elements that may reduce transmission of CDIs, such as private rooms and private bathrooms.	Number of sinks and alcohol-based hand rubs available Percent of rooms with private bathrooms	Guide to the Elimination of *Clostridium difficile* in Health Care Settings Document reflects the evolving practices and discoveries in the prevention of *Clostridium difficile* transmission and infection. Clinical Practice Guidelines for *Clostridium difficile* Infection in Adults CDC guideline is designed to improve the diagnosis and management of *Clostridium difficile* infection in adult patients, as well as present recommendations for infection control methods and environmental management of the pathogen based on the best evidence and practices. Preventing Transmission of Infectious Agents in Healthcare Settings CDC document is intended for infection control staff, health care epidemiologists, health care administrators, nurses, other health care providers, and persons responsible for developing, implementing, and evaluating infection control programs for health care settings across the continuum of care. EPA's Registered Antimicrobial Products Effective Against *Clostridium difficile* Spores Lists antimicrobial cleaners and other products that are effective against *Clostridium difficile* spores.

Prevention Agenda Action Plan Re-Fresh Chart

Priority Area: Prevent HIV, STDs, Vaccine Preventable Diseases and Health-Care Associated Infections
December 2015

	Focus Area 3: Prevent Healthcare Associated Infections		
Goals	**Recommended Intervention for Local Action**	**Recommended Short Term Process Measures**	**Resources**
Reduce infections caused by multidrug resistant organisms.	Implement computer alerts to ensure colonized or MDRO-infected patients are identified rapidly. Institute antimicrobial stewardship programs that might decrease patients' exposure to antibiotics and reduce or slow the development of resistance.	Number of staff trained in antimicrobial stewardship Number of elements of antibiotic stewardship program implemented	CDC Environmental Checklist for Monitoring Terminal Cleaning Ensure proper cleaning of frequently touched surfaces and accountability by following this checklist of priority sites and equipment for each patient room. Guideline for Disinfection and Sterilization in Healthcare Facilities CDC's evidence-based recommendations on cleaning, disinfection and sterilization of patient-care medical devices and for cleaning and disinfecting the health care environment. CDC's Hand Hygiene in Healthcare Settings Includes educational resources geared toward health care personnel, training tools, and a measurement guide for adherence to hand hygiene protocols.