

Domain 1: Epidemiology and Surveillance

Provide data and conduct research to inform, prioritize, deliver, and monitor programs and population health

Why is this important?

Ensure capacity to collect, analyze, and apply data and information to:

- Develop and deploy effective interventions
- Identify and address gaps in program delivery
- Monitor and evaluate progress in achieving program goals.
- Communicate risk, burden, and progress.

Who might share in this?

- Decision makers
- State government – ie Medicaid
- Communities
- Schools
- Insurers
- Funders
- Researchers
- Health program mangers
- Planners
- Voluntary organizations

Examples

- Conduct surveillance of behavioral risk factors and social determinants of health
- Map social determinants of health and/or co-morbidity prevalence for use in intervention planning.
- Link administrative, vital records, and hospital discharge data to conduct surveillance (ie – preterm deliveries, cardiovascular disease mortality, joint replacement, etc)

Examples

- Identify prevention needs of the workforce for use in Medicaid planning and worksite health promotion.
- Monitor environmental change policies related to healthful nutrition, physical activity, tobacco, community water fluoridation, and other areas.
- Develop risk factor-based issue briefs appropriate to multiple categorical areas.

Examples

- Develop and disseminate data reports describing multiple chronic disease conditions or cross-cutting risk factors to drive state and local public health action.
- Develop and disseminate ROI analysis for prevention activities.
- Create surveillance plan that includes data collection, analyses, and dissemination objectives.

Domain 2: Environmental Approaches

Make healthy behaviors easier and more convenient for more people

Why is this important?

- Improvements in social and physical environments make healthy behaviors easier and more convenient
- Broad reach
- Sustained health impact
- Best buys for public health

Who might share in this?

- Communities
- Schools
- Worksites
- Planners
- Healthcare purchasers

Examples

- Promoting increased physical activity
- Active transportation to reduce obesity
- Reducing tobacco use, preventing youth initiation, and eliminating exposure to secondhand smoke.
- Increasing the proportion of the U.S. population served by community water systems with optimally fluoridated water

Examples

- Nutrition standards for food and beverages offered in schools, child care and education facilities.
- Joint use agreements to increase the number of safe, accessible places for physical activity in communities;
- Comprehensive smoke-free air policies in workplaces and public places
- Smoke-free policies in multi-unit housing and outdoor areas.
- Expand access to and availability of healthy foods and beverages

How many environmental policies do you see in this picture?



Domain 3: Health Care Systems

Improve delivery and use of quality clinical services to prevent disease, detect diseases early, and manage risk factors

Why is this important?

- Improve delivery of preventive services.
- Early detection and effective management lead to better health outcomes.
- Quality improvement processes yield system-wide changes.
- Technology potential is more fully realized to improve coverage of prevention services.

Who might share in this?

- Health care providers
- Hospital associations
- Health care purchasers
- Medicaid
- Quality Improvement Organizations

Examples

- Electronic health records with registry function, decision support, and electronic reminders
- Team-based care
- Population care across panel of patients
- Implementation of the home health model

Examples

- Quality Diabetes Self-Management Education
- Delivery of smoking cessation services and treatments - including providing quitline coaching and cessation treatments as covered benefits.
- Delivery of high-quality screening for breast, cervical, and colorectal cancers that promotes high rates of appropriate use, including timely referral and follow-up.

Examples

- Quality improvement of clinical care for cancer screening and control of A1C, blood pressure, BMI, and cholesterol.
- Increase access to and use of clinical and preventive oral health services.
- Systems to ensure adequate follow-up of abnormal screening tests, and timely treatment

Domain 4: Community-Clinical Linkages

Ensure those with or at high risk for chronic diseases have access to quality community resources to best manage their conditions

Why is this important?

- Ensure that people with or at high risk of chronic diseases have access to community resources and support.
- Link communities members with effective interventions to prevent, delay or manage chronic conditions once they occur.

Who might share in this?

- Community-based organizations
- Community health workers
- Health care providers
- Advocacy organizations
- Schools
- Worksites
- Pharmacists

Examples

- Deliver chronic disease self-management education programs, including physical activity programs, to reach at risk populations in community settings.
- Use of healthcare extenders (nurses, dentists, etc.), community health workers, and/or patient navigators.

Examples

- Effective outreach to the population to increase use of clinical and other preventive services.
- Delivery of school-based dental sealant programs.
- Coverage/reimbursement for diabetes self-management education and chronic disease self-management support programs.

Examples

- Implement systems to increase provider referrals of people with prediabetes or multiple diabetes risk factors to sites offering the CDC-approved lifestyle change program.
- Chronic disease support groups in communities (e.g., cancer survivors)