Strategic Directions and Examples of CDC-Recommended Evidence- and Practice-Based Strategies

<table>
<tr>
<td colspan="3" align="center">Strategic Direction 1: Tobacco Free Living
Goal: Prevent and Reduce Tobacco Use</td>
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<tr>
<td align="center">CDC Recommended Evidence- and Practice-Based Strategies</td>
<td align="center">Links to Guidance Documents</td>
<td align="center">Healthy People 2020 Health Outcome Targets*</td>
</tr>
<tr>
<td>• Implement evidence-based strategies to protect people from second-hand smoke.</td>
<td>CDC. Evaluation Toolkit for Smoke-Free Policies (2008). http://www.cdc.gov/tobacco/basic_information/secondhand_smoke/evaluation_toolkit/index.htm

Tobacco The Business of Quitting: An Employer's website for Tobacco Cessation
http://www.businessgrouphealth.org/tobacco/ developed by the National Business Group on Health and supported by the CDC provides tools and resources for workplaces to establish a culture of health, select tobacco cessation benefits, establish workplace policies, communicate with employees and evaluate the effectiveness of the programs, policies, and practices.

Tobacco-Free Workplace Campus Initiative
This toolkit provides guidance for assessing, planning, promoting, implementing, and evaluating a tobacco-free campus (TFC) initiative that includes a policy and comprehensive cessation services for employees.
http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/tobacco/index.htm

http://www.cdc.gov/healthyhomes/
Healthy_Homes_Manual_WEB.pdf
US. Department of Housing and Urban Development (HUD):

Optional Smoke-Free Housing Policy Implementation (Sept. 15, 2010)
http://portal.hud.gov/portal/page/portal/HUD/program_offices/administration/hudclips/notices/hsg/files/10-21hsgn.pdf</td>
<td>Tobacco Use
2: Increase the proportion of persons covered by indoor worksite policies that prohibit smoking.
20: Increase the proportion of smoke-free homes</td>
</tr>
</table>

	Housing Interventions and Health: A Review of the Evidence http://journals.lww.com/jphmp/toc/2010/09001#-1750774083	
Implement evidence-based strategies to prevent and reduce tobacco use among youth and adults.	http://www.thecommunityguide.org/tobacco/index.html http://www.cdc.gov/tobacco/	
Increase types of outdoor venues where tobacco use is prohibited. • Implement smoke-free parks. • Implement smoke-free schools and campuses.	**Tobacco-free sports** http://www.cdc.gov/tobacco/youth/sports/index.htm **CDC School Health Guidelines**	**Tobacco Use** **12**: Increase tobacco-free environments in schools.
Tobacco Free Living Innovative Proposals	**Recipient will provide**	Recipient will link to HP2020 objective
Strategic Direction 2: Active Living and Healthy Eating Goals: Prevent and Reduce Obesity, Increase Physical Activity; Improve Nutrition in Accordance with the Dietary Guidelines for Americans 2010		
Improve jurisdiction-wide nutrition, physical activity, and screen time policies and practices in early child care settings.	**Preventing Childhood Obesity in Early Care and Education Programs Selected Standards from Caring for our Children: National Health and Safety Performance Standards (Selected Standards Book, 2010).** This book provides is the new set of national standards describing evidence-based best practices in nutrition, physical activity, and screen time for early care and education programs. The standards are for ALL types of early care and education settings centers and family child care homes. The Third Edition (CFOC, 3rd Ed.) is projected to be released in 2011. http://nrckids.org/CFOC3/PREVENTING_OBESITY/index.htm **Farm to Preschool** Farm to Preschool programs connect child care providers and local food producers and processors, with the goal of serving healthy meals to children, providing agriculture, health and nutrition education opportunities, and supporting local and	**Nutrition and Weight Status** **19:** Increase the number of States with nutrition standards for foods and beverages provided to pre-school aged children in childcare.

	regional farmers. Food and garden-based education in preschools increases access to fresh fruits and vegetables. Resources include: National Farm to School Network http://www.farmtoschool.org	
Increase the number of designated Baby-friendly hospitals.	**The CDC Guide to Breastfeeding Interventions.** Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2005. http://www.cdc.gov/breastfeeding/pdf/ breastfeeding_interventions.pdf	**Maternal, Infant and Child Health** **28:** Increase the percentage of live births that occur in facilities that provide recommended care for lactating mothers and their babies.
Increase policies and practices to support breastfeeding in health care, community, workplaces, and learning and childcare settings.	**Ten Steps to Healthy Breastfeeding Friendly Child Care Centers Guide** http://www.dhs.wisconsin.gov/health/physicalactivity/pdf_files/ BreastfeedingFriendlyChildCareCenters.pdf This guide is designed to help child care centers improve existing breastfeeding policies and practices and their current compliance with the requirements for the Breastfeeding Friendly designation. **Purchaser's Guide to Clinical Preventive Services** provide summary plan description language that benefits managers can use to purchase recommended breastfeeding counseling coverage (USPSTF B Recommendation) http://www.businessgrouphealth.org/preventive/topics/breastfeeding.cfm **Investing in Workplace Breastfeeding Program and Policies: An Employer's Toolkit** This National Business Group on Health toolkit provides information for assessing, planning, promoting, implementing, and evaluating a worksite lactation support program. http://www.businessgrouphealth.org/benefitstopics/breastfeeding.cfm	**Maternal, Infant and Child Health** **12:** Increase the proportion of mothers who breastfeed their babies **26:** Increase the percentage of employers who have worksite lactation programs.

	The CDC Guide to Breastfeeding Interventions. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2005. Included in this guide are breastfeeding interventions that are practice and evidence based, with a focus on selecting community and other interventions that address disparities within specific population groups http://www.cdc.gov/breastfeeding/pdf/ breastfeeding_interventions.pdf	

Improve nutrition quality of foods and beverages served or available in schools consistent with the Institute of Medicine's Nutrition Standards for Foods in Schools. • Increase access to fruits and vegetables in schools. • Decrease amount of sodium in foods in schools. • Reduce access to competitive low nutrition foods and beverages. • Ensure availability of plain, cold drinking water throughout the day at no cost to students.	**Institute of Medicine Report: Nutrition Standards for Foods in Schools** http://www.iom.edu/Reports/2007/Nutrition-Standards-for-Foods-in-Schools-Leading-the-Way-toward-Healthier-Youth.aspx **Sodium Procurement Guide** http://www.cdc.gov/salt/pdfs/DHDSP_Procurement_Guide.pdf **NPLAN's Developing Healthy Vending Beverage Agreements** http://www.nplanonline.org/sites/phlpnet.org/files/nplan/HealthyVendngAgrmnt_FactSheet_FINAL_090311.pdf **CSPI's Sweet Deals—School Fundraising can be Healthy and Profitable** http://cspinet.org/new/pdf/schoolfundraising.pdf **NPLAN's Model Wellness Policy Language for Water Access in Schools** http://www.nplanonline.org/childhood-obesity/products/water-access **CDC Guide to Fruit and Vegetables Strategies to Increase Access, Availability and Consumption** http://www.cdph.ca.gov/SiteCollectionDocuments/StratstoIncreaseFruitVegConsumption.pdf **USDA's Be Salt Savvy—Cut Back on Sodium for Healthier School Meals Fact Sheet** http://smartsavor.com/Images/USDA%20Sodium%20Fact%20Sheet.pdf	**Nutrition and Weight Status** **6:** Increase the contribution of fruits to the diets of the population aged 2 years and older. **18**: Increase the number of States that have State-level policies that incentivize food retail outlets to provide foods that are encouraged by the Dietary Guidelines. **20:** Increase the percentage of schools that offer nutritious foods and beverages outside of school meals.
Improve the quality and amount of physical education and physical activity in schools. • Increase the amount of time students spend in moderate or	**The Community Guide Physical Activity chapter** www.thecommunityguide.org **CDC's Physical Education Curriculum Analysis Tool**	**Physical Activity and Fitness** **2:** Increase the proportion of schools that require daily

vigorous physical activity during physical education class. • Increase the total number of physical activity opportunities implemented at school facilities, including daily recess, intramurals/physical activity clubs, and walk or bicycle to and from school. • Increase number of public places (e.g. schools) accessible to the public for physical activity.	http://www.cdc.gov/healthyyouth/pecat **CDC's Strategies to Improve the Quality of Physical Education** http://www.cdc.gov/healthyyouth/physicalactivity/pdf/quality_pe.pdf **NASPE's National Standards for PE** http://www.aahperd.org/naspe/standards/nationalStandards/PEstandards.cfm **CDC's Youth Physical Activity Guidelines Toolkit** http://www.cdc.gov/HealthyYouth/physicalactivity/guidelines.htm#1 **NASPE's Position Statement on Comprehensive School PA Programs** http://www.aahperd.org/naspe/standards/upload/Comprehensive-School-Physical-Activity-Programs2-2008.pdf **NPLAN's Joint Use Agreement Resources** http://www.nplanonline.org/childhood-obesity/products/nplan-joint-use-agreements **KidsWalk-to-School: A Guide to Promote Walking to School** http://www.cdc.gov/nccdphp/dnpa/kidswalk/resources.htm#guide **National Center for Safe Routes to School Guide, Toolkit, and Other Resources** http://www.saferoutesinfo.org/resources/ **DHHS Physical Activity Guidelines** **http://www.health.gov/paguidelines/**	physical activity for all students. **3:** Increase daily school physical education. **4:** Increase the proportion of adolescents who spend at least 50 percent of school physical education class time being physically active. **7:** Increase the proportion of adolescents that meet current physical activity guidelines **10, 11:** Increase the proportion of trips made by walking and bicycling. **12:** Increase the proportion of States and school districts that require regularly scheduled elementary school recess. **13:** Increase the proportion of school districts that require or recommend elementary school recess for an appropriate time period.
Increase accessibility, availability, affordability and identification of healthy	**Equitable Development Toolkit: Healthy Food Retailing PolicyLink**	**Nutrition and Weight Status**

foods in communities, including provision of full service grocery stores, farmers markets, small store initiatives, mobile vending carts, and restaurant initiatives • Carry more low-sodium and no-sodium options • Promote healthy food and beverage availability and identification • Placement and promotion strategies • Incentivize new grocery store development • Menu labeling support and promotion for restaurants not covered by federal law.	An online tool that focuses on increasing access to retail outlets that sell nutritious, affordable food in underserved communities. http://www.policylink.org/site/c.lkIXLbMNJrE/b.5137405/k.6042/Healthy_Food_Retailing.htm **Strategic Alliance ENACT: Community Food Environment** An online tool that focuses on attracting grocery stores to underserved areas through financial and regulatory incentives. http://www.preventioninstitute.org/sa/enact/neighborhood/supermarkets_underserved.php **Healthy Corner Stores** Describes successes and challenges of early corner store interventions and identifies steps for developing sustainable models: healthycornerstores.org **Recommended Community Strategies and Measurements to Prevent Obesity in the United States** http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5807a1.htm	**10:** Reduce consumption of sodium in the population aged 2 years and older. **18:** Increase the number of policies that incentivize healthy food retail outlets. **Heart Disease and Stroke** **14:** Increase the proportion of adults with prehypertension who meet the recommended guidelines (sodium intake). **15:** Increase the proportion of adults with hypertension who meet the recommended guidelines (sodium intake).
Increase availability and affordability of healthful foods in institutional settings, workplaces, senior centers, and government facilities. • Farm to Institution strategies • Food procurement policies to increase access to low sodium options, decrease access to high sodium options. • Increase availability of fruits and vegetables to employees in their work places	**Vending Machine Food and Beverage Standards** (California Department of Public Health Worksite Program California Fit Business Kit! http://www.cdph.ca.gov/programs/cpns/Documents/Network-FV-WP-VendingMachineStandards.pdf **CDC's Lean Works!** offers interactive tools and evidence-based resources to design effective worksite obesity prevention and control programs. http://www.cdc.gov/leanworks/index.html **Sodium Procurement Guide** **http://www.cdc.gov/salt/pdfs/DHDSP_Procurement_Guide.pdf**	**Nutrition and Weight Status** **6:** Increase consumption of fruits. **7:** Increase consumption of vegetables **9:** Increase the proportion of persons who consume no more than 30 percent of calories from total fat. **15:** Prevent inappropriate weight gain in youth and adults. **17:** Reduce consumption of calories from solid fats and

	Organizational Health Eating Policy Template (North Carolina Eat Smart Move More Worksite Initiative) http://www.eatsmartmovemorenc.com/PhysicalActivityAndHealthyEatingPolicy/PhysicalActivityAndHealthyEatingPolicy.html **California Fit Business Kit** helps employers develop and implement a culture and environment at their workplaces that support healthy eating and physical activity among workers. http://www.cdph.ca.gov/programs/cpns/Pages/WorksiteFitBusinessKit.aspx	added sugars.
Promote purchase of fruits, vegetables, and other healthy foods through incentives associated with food assistance programs.	**Supplemental Nutrition Assistance Program (SNAP) at Farmers Markets: A How-To Handbook.** http://www.ams.usda.gov/AMSv1.0/getfile?dDocName=STELPRDC5085298&acct=wdmgeninfo **Changes in the WIC Food Packages: A Toolkit for Partnering with Neighborhood Stores** http://www.phlpnet.org/healthy-planning/products/changes-wic-food-packages-toolkit-partnering-neighborhood-stores **Wholesome Wave Double Value Coupon Program** http://wholesomewave.org/what-we-do/double-value-coupon-program/	**Nutrition and Weight Status** **6**: Increase consumption of fruits. **7**: Increase consumption of vegetables. **18**: Increase the number of policies that incentivize healthy food retail outlets.
Limit density of fast food outlets and other outlets featuring high calorie, high sodium, and low nutrition foods and encourage retail venues to provide access and availability to healthier foods. • Zoning: regulate the number of fast food restaurants in a given area. • Provide incentives to encourage existing stores or restaurants to provide healthier food options or to encourage the development of new	**The Center for Law and the Public's Health at Johns Hopkins and Georgetown Universities.** The use of zoning to restrict fast food outlets: a potential strategy to combat obesity. http://www.publichealthlaw.net/Zoning%20Fast%20Food%20Outlets.pdf **The City Planner's Guide to the Obesity Epidemic: Zoning and Fast Food** http://www.publichealthlaw.net/Zoning%20City%20Planners%20Guide.pdf **The Food Trust:**	**Nutrition and Weight Status** **18**: Increase policies that incentivize healthy food retail outlets. **22:** Increase the proportion of Americans who have access to a food retail outlet that sells a variety of foods that are encouraged by the

retail venues that offer healthier foods.	http://www.thefoodtrust.org/php/programs/corner.store.campaign.php	Dietary Guidelines for Americans
Increase opportunities for physical activity in communities and workplaces. • Community-wide campaigns • Access to facilities and places • Joint use agreements • Flextime • Stairwell modification • Incentives	**Utah Department of Health Exercise and Health Activity Time Policy** http://health.utah.gov/hearthighway/pdfs/Excercise_Release_Policy_worksites.pdf **Workplace Stairwell Modification and Promotion to Increase Daily Physical Activity** This toolkit provides information for implementing and promoting changes to workplace stairwells to encourage physical activity at work. http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/stairwell/index.htm **NPLAN's joint use agreement resources** http://www.nplanonline.org/childhood-obesity/products/nplan-joint-use-agreements **Discount Fitness Club Network** This toolkit provides guidance on identifying and establishing a relationship with a nationwide discount fitness club network (DFCN) for employees of multi-site organizations http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/fitnessclub/ **Strategic Alliance-ENACT, Community Activity Strategies** http://www.eatbettermovemore.org/sa/enact/members/strategiesshow.php?e=4&se=1&aff69eff45a2561fef61a7d71cab272e **Recommended Community Strategies and Measurements to Prevent Obesity in the United States** http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5807a1.htm	**Physical Activity and Fitness** **5**: Increase the schools that provide access to their physical activity spaces and facilities for all persons outside of normal school hours. **6**: Increase physical activity in adults. **9**: Increase access to and participation in employer-based exercise facilities and programs. **10**: Increase walking. **11**: Increase bicycling. **Disability and Secondary Conditions** **7:** Reduce reported barriers

Active Living and Healthy Eating Innovative Strategies.	**Recipient will provide**	Recipient will link to HP2020 objective
**Strategic Direction 3: Increased Use of High Impact Quality Clinical Preventive Services** Goals: **Increase control of high blood pressure and high cholesterol**; increase access to and demand for high impact quality preventive services.	
Provide training and technical assistance to health care institutions, providers and provider organizations to effectively implement systems to improve delivery of clinical preventive services, consistent with USPSTF recommendations. • **Implement strategies to translate known interventions into usual clinical care to increase control of high blood pressure and high cholesterol.** • Provide training and technical assistance to health care institutions, providers and provider organizations to effectively implement systems to increase delivery and use of treatment for tobacco use and dependence. • Provide training and technical assistance to health care institutions, providers and provider organizations to effectively implement systems to increase delivery and use brief intervention to reduce excessive alcohol use. • Provide training and technical assistance to health care institutions, providers and provider organizations to effectively implement systems to increase	Glynn LG, Murphy AW, Smith SM, Schroeder K, Fahey T. **Interventions used to improve control of blood pressure in patients with hypertension.** Cochrane Database of Systematic Reviews 2010, Issue 3. Art. No.: CD005182:: http://onlinelibrary.wiley.com/o/cochrane/clsysrev/articles/CD005182/frame.html **Purchaser's Guide to increase use of clinical preventive services among employees** http://www.cdc.gov/pcd/issues/2008/apr/07_0220.htm **Guide to Clinical Preventive Services**. The Community Guide: www.thecommunityguide.org **Guide to Clinical Prevention Services** (for screening); Health Affairs November 2010 issue: Designing Insurance To Improve Value In Health Care; Purchaser's Guide to Clinical Preventive Services http://www.businessgrouphealth.org/preventive/background.cfm **Get With the Guidelines: Outpatient** http://outpatient.heart.org/GWTG/ **WISEWOMAN** http://www.cdc.gov/wisewoman/ **Better Diabetes Care**	**Access to Health Services** **9:** Increase the persons who receive appropriate clinical preventive services. **Older Adults** **2:** Increase the older adults who are up to date on a core set of clinical preventive measures. **Heart Disease and Stroke** **4:** Increase adults with hypertension whose blood pressure is under control **5:** Increase adults who can state whether their blood pressure was normal or high **6:** Reduce the cholesterol levels among adults **7:** Reduce high total blood cholesterol levels in adults. **8:** Increase blood cholesterol testing. **13:** Reduce hypertension **18:** Increase adherence to prescribed blood pressure medication. **19:** Increase the proportion of adults with elevated LDL

delivery and use of cancer screening services.

- Provide training and technical assistance to health care institutions, providers and provider organizations to effectively implement systems to increase appropriate testing of HIV and STDs and linkages to care and prevention with positives.
- Provide training and technical assistance to health care institutions, providers and provider organizations to effectively implement systems to increase recognition and enhance secondary prevention of chronic Hepatitis B and Hepatitis C infection.

www.betterdiabetescare.nih.gov

http://www.cdc.gov/ncbddd/fasd/research-preventing.html
Project CHOICES is a brief motivational intervention for reducing alcohol-exposed pregnancies among women who are at high risk for such pregnancies.

Drinking and Reproductive Health: A Fetal Alcohol Spectrum Disorders Prevention Tool Kit
http://www.cdc.gov/ncbddd/fasd/acog_toolkit.html

How to Increase Colorectal Cancer Screening Rates in Practice: A Primary Care Clinician's* Evidence-Based Toolbox and Guide 2008:
http://www5.cancer.org/aspx/pcmanual/default.aspx;
http://www.cancer.org/acs/groups/content/documents/document/acspc-024588.pdf

Electronic Health Records: Office of the National Coordinator for Health Information Technology
http://healthit.hhs.gov/

Understanding Panel Management: A Comparative Study of an Emerging Approach to Population Care
http://xnet.kp.org/permanentejournal/SUM07/panel-management.html

NCI Patient Navigator Research Program
http://crchd.cancer.gov/pnp/pnrp-index.html

Patient Navigator Role of CHW can be found in Community Health Workers National Workforce Study. U. S. Department of Health and Human Services Resources and Services Administration Bureau of Health Professions. Community Health Worker National Workforce Study. 2007.
http://bhpr.hrsa.gov/healthworkforce/chw/

cholesterol who have been advised regarding cholesterol-lowering management

Diabetes
14: Increase population with diagnosed diabetes whose blood pressure is under control.
15: Improve lipid control among the population with diagnosed diabetes.

Cancer
9: Increase cancer screening counseling.
14: Increase number of women who receive a cervical cancer screening
15: Increase number of adults who receive a colorectal cancer screening
16: Increase number of women who receive breast cancer screening

Substance Abuse
21: Decrease the number of alcohol related deaths.

Maternal, Infant and Child Health
10: Increase abstinence from alcohol, cigarettes and illicit drugs among pregnant

	Community Health Workers' Sourcebook http://www.cdc.gov/dhdsp/library/chw_sourcebook/pdfs/sourcebook.pdf **NCQA Patient-Centered Medical Home** http://www.ncqa.org/tabid/631/default.aspx **CDC Case Management Guidelines** www.cdc.gov/nceh/lead/CaseManagement/caseManage_main.htm **Medicare Accountable Care Organizations** https://www.cms.gov/OfficeofLegislation/Downloads/AccountableCareOrganization.pdf **RWJ Accountable Care Organization** description http://www.rwjf.org/files/research/66449.pdf **CDC Recommendation for Routine HIV Testing for Persons Age 13-64** http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm National Chlamydia Coalition Testing Implementation Guidance. **Why Screen for Chlamydia: An Implementation Guide for Healthcare Providers.** Comprehensive guidance on Chlamydia testing and screening algorithms and assistance for clinical providers in dealing with test providers as well as discussing sexual health and testing with patients http://ncc.prevent.org/providers.html Centers for Disease Control and Prevention. **Recommendations for Identification and Public Health Management of Persons with Chronic Hepatitis B Virus Infection**. MMWR 2008; 57(No. RR- 8): 1-20 http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5708a1.htm	women. **Adolescent Health** **3:** Increase the percentage of adolescents tested for HIV. **HIV** **6:** Increase adults with TB who have been tested for HIV. **8:** Increase the new HIV infections diagnosed before progression to AIDS. **10:** Reduce the number of new cases of perinatally acquired HIV/AIDS and perinatally acquired AIDS. **12:** Increase HIV-infected persons who know they are infected. **14:** Increase HIV testing. **Immunization and Infectious Diseases** **1:** Reduce chronic hepatitis B virus in infants and young children. **26:** Increase persons aware they have a chronic hepatitis C infection. **27:** Increase hepatitis B testing in communities experiencing health disparities. **Sexually Transmitted**

	American Association for the Study of Liver Diseases. **Management, and Treatment of Hepatitis C: Practice Guidelines,** 2009 Update (pp 1335-1339, sections on Testing, Counseling, and Test Interpretation) http://www.aasld.org/practiceguidelines/Documents/Bookmarked %20Practice%20Guidelines/Diagnosis_of_HEP_C_Update.Aug %20_09pdf.pdf	**Diseases** **3:** Reduce Chlamydia trachomatis infections. **4:** Reduce gonorrhea rates. **5:** Reduce transmission of syphilis. **6:** Reduce genital herpes. **8, 9:** Increase screening for genital Chlamydia infections. **Disability and Secondary Conditions** **14:** Reduce reported delays in receiving primary care due to barriers. **15:** Increase transition planning from pediatric to adult health care.
Provide outreach, including paid and earned media, to increase use of clinical preventive services by the population or population subgroups.	**GYT (Get Yourself Tested):** http://www.itsyoursexlife.com/gyt/toolkit http://www.cahl.org/web/ , the National Chlamydia Coalition: http://ncc.prevent.org/ and Cicatelli Associates: http://www.cicatelli.org/AboutCAI/home.htm .	**HIV** **14**: Increase HIV testing. **Sexually Transmitted Diseases** **8, 9:** Increase screening for genital Chlamydia infections.
Increase coverage, availability and use of expedited partner therapy.	A description of **EPT principles and CDC's clinical guidance** (p34) can be found at http://www.cdc.gov/std/treatment/EPTFinalReport2006.pdf. Program recommendations are contained in **CDC's MMWR recommendations** at http://www.cdc.gov/nchhstp/partners/Partner-Services.html (See section on treatment for partners).	**Sexually Transmitted Diseases** 1: Reduce females who have ever required treatment for pelvic inflammatory disease. **3:** Reduce Chlamydia trachomatis infections. **4:** Reduce gonorrhea rates. **8, 9:** Increase screening for

		genital Chlamydia infections. **Access to Health Services** **9:** Increase the persons who receive appropriate clinical preventive services.
Prevent diabetes, especially in high risk populations. • Increase coverage, availability and use of the National Diabetes Prevention Program • Increase preventive services for pregnant women with gestational diabetes or a history of gestational diabetes.	**Diabetes Training and Technical Assistance Center** – **This site provides information on diabetes and in the future will house training, curriculum and recognition information on the National Diabetes Prevention Program. http://dttac.org/about/index.html Knowler WC, Barrett-Connor E, Fowler SE, et al. **Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin.** N Engl J Med 2002;346:393-403. **National Diabetes Prevention Program** http://www.cdc.gov/diabetes/projects/prevention_program.htm	**Diabetes** **16:** Increase the people with pre-diabetes or multiple diabetes risk factors that engage in prevention behaviors. **Access to Health Services** **9:** Increase the persons who receive appropriate clinical preventive services. **HIV** **14:** Increase HIV testing.
Increase access to and use of school-based dental sealant programs.	**Association of State and Territorial Dental Directors (ASTDD) Best Practice Approach Report:** School-based Sealant Programs http://www.astdd.org/school-based-dental-sealant-programs/	**Oral Health** **10:** Increase dental sealants on their molar teeth.
Improve arthritis, asthma, cardiovascular disease, and diabetes outcomes with chronic disease self management training programs.	**Stanford Chronic Disease Self-Management Program** http://patienteducation.stanford.edu/programs/cdsmp.html **Arthritis evidence-based self-management programs** http://www.cdc.gov/arthritis/interventions/self_manage.htm **Guidelines for the Diagnosis and Management of Asthma** www.nhlbi.nih.gov/guidelines/asthma/ **Asthma: A Business Case for Employers and Health Care**	**Arthritis, Osteoporosis, & Other Back Conditions** **7:** Increase provider counseling for arthritis. **8:** Increase education for adults with arthritis. **Respiratory Diseases** **1, 2:** Reduce hospitalizations and emergency visits for

	Purchasers http://asthmaregionalcouncil.org/uploads/Asthma%20Management/Asthma%20-%20%20A%20Business%20Case%20for%20Employers%20and%20Health%20Care%20Purchasers%20%202010.pdf **The Asheville Project** http://www.pharmacytimes.com/files/articlefiles/TheAshevilleProject.pdf **Diabetes Self-Management Education Action Guide** http://www.prevent.org/data/files/initiatives/diabetesprogram.pdf **AADE Guidelines for the Practice of Diabetes Self-Management Education and Training** http://www.diabeteseducator.org/DiabetesEducation/position/Practice_Guidelines.html	asthma **3:** Reduce activity limitations among persons with asthma **4:** Reduce activity limitation due to chronic lung/ breathing problems. Reduce asthma deaths **7:** Reduce number of school or work days missed among persons with asthma **8:** Increase the proportion of persons with asthma who receive formal patient education **9:** Increase appropriate asthma care. **Heart Disease and Stroke** **4:** Increase adults who can state whether their blood pressure was normal or high. **6:** Increase adults who have had cholesterol checked. **7:** Reduce high blood cholesterol levels **8:** Reduce the mean total cholesterol among adults **11:** Increase adherence to hypertensive prescriptions. **12:** Increase controlled hypertension. **13:** Increase cholesterol management. **Diabetes**

		1: Increase diabetes education. 4: Reduce lower extremity amputations. 13: Improve glycemic control. 14, 15: Increase population with diagnosed diabetes whose blood pressure and lipids are under control.
Implement Viral Hepatitis Action Plan	http://www.hhs.gov/ash/initiatives/hepatitis/	
Clinical Preventive Services Innovative Interventions.	**Recipient will provide**	Recipient will link to HP2020 objective
Strategic Direction 4: Social and Emotional Wellness Goals: Increase child and adolescent health and wellness, including social and emotional wellness.		
Promote effective parenting practices.	**Bright Futures** http://brightfutures.aap.org/ 3rd_Edition_Guidelines_and_Pocket_Guide.html http://www.cdc.gov/ace/index.htm **School Connectedness: Strategies for Increasing Protective Factors among Youth** http://www.cdc.gov/HealthyYouth/AdolescentHealth/pdf/connectedness.pdf http://www.cdc.gov/HealthyYouth/index.htm http://www.cdc.gov/ncbddd/disabilityandhealth/index.html	**Maternal, Infant and Child Health** **14:** Increase the proportion of children with special health care needs who receive their care in family-centered, comprehensive, coordinated systems. **30:** Increase screening, evaluation, and early intervention in young children with developmental delays. **Mental Health and Mental Disorders** **6:** Increase treatment for children with mental health problems

		Early and Middle Childhood **5:** Increase use of positive parenting. **Disability and Secondary Conditions** **20:** Increase intervention services in home or community-based settings for children with disabilities. **Adolescent Health** **8:** Increase the adolescents connected to a positive adult caregiver.
Implement effective positive youth development and risk reduction approaches to improve adolescent health.	**Communities that Care** http://www.sdrg.org/CTCInterventions.asp **Raising Healthy Children** http://www.sdrg.org/rhcsummary.asp **Review of studies with impressive outcomes**, Johns Hopkins School of Public Health http://www.jhsph.edu/bin/i/h/gbg.pdf	
Social and Emotional Wellness Innovative Interventions.	**Recipient will provide**	Recipient will link to HP2020 objective
Strategic Direction 5: Healthy and Safe Physical Environment Goals: Increase bicycling and walking; improve the community environment to support health.		
Increase adoption of comprehensive approaches to improve community design to enhance walking and bicycling and active transportation.	**CDC Recommendations for Improving Health through Transportation Policy** http://www.cdc.gov/transportation/recommendation.htm **Active Design Guidelines: Promoting Physical Activity and Health in Design**	**Environmental Health** **9:** Increase use of alternative modes of transportation. **Disability and Secondary**

Strategic Directions and Examples of CDC-Recommended Evidence- and Practice-Based Strategies

	www.nyc.gov/html/ddc/html/design/active_design.shtml **KidsWalk-to-School: A Guide to Promote Walking to School** http://www.cdc.gov/nccdphp/dnpa/kidswalk/resources.htm#guide **National Center for Safe Routes to School guide, toolkit, and other resources** http://www.saferoutesinfo.org/resources/ http://www.cdc.gov/InjuryViolenceSafety/ http://www.cdc.gov/aging/	**Conditions** **7:** Reduce reported barriers **Physical Activity and Fitness** **6, 7:** Increase physical activity in adults and adolescents. **10:** Increase walking. **11:** Increase bicycling. **Environmental Health** **9:** Increase use of alternative modes of transportation.
Establish community design standards to make streets safe for all users, including pedestrians, bicyclists and users of public transit.	**Increasing Physical Activity Through Community Design: A Guide for Public Health Practitioners** www.bikewalk.org/pdfs/IPA_full.pdf **How to Develop a Pedestrian Safety Action Plan** http://drusilla.hsrc.unc.edu/cms/downloads/howtoguide2006.pdf **Complete Streets: Best Policy and Implementation Practices** www.completestreets.org/webdocs/resources/cs-bestpractices-chapter5.pdf http://www.cdc.gov/InjuryViolenceSafety/	**Environmental Health** **9:** Increase use of alternative modes of transportation. **Physical Activity and Fitness** **10:** Increase walking. **11:** Increase bicycling **16:** Increase policies for the built environment that enhance access to and availability of physical activity opportunities.
Increase mixed use zoning and transit-oriented development.	**Creating Safe, Healthy and Active Living Communities: A Public Health Professional's Guide to Key Land Use and Transportation Planning Policies and Processes** www.safehealthycommunities.com/pdfs/tools_guides_factsheets/CreatingSafeHealthyCommunities.pdf **Creating Regulatory Blueprint for Healthy Community Design: A Local Government Guide to Reforming Zoning and Land Development Codes**	**Environmental Health** **9:** Increase use of alternative modes of transportation. **Physical Activity and Fitness** **10:** Increase walking. **11:** Increase bicycling

Strategic Directions and Examples of CDC-Recommended Evidence- and Practice-Based Strategies

	www.healthytransportation.net/Creating%20a%20Regulatory%20Blueprint%20for%20Healthy%20Community%20Design.pdf	
Establish community protocols to assess the impact of community changes on community health and wellbeing.	**A Health Impact Assessment Toolkit: A Handbook to Conducting HIA** www.humanimpact.org/component/jdownloads/finish/11/8 **Practice Standards for Health Impact Assessment (HIA)** http://www.humanimpact.org/doc-lib/finish/11/9 **Planning for Healthy Places with Health Impact Assessments** http://professional.captus.com/Planning/hia/default.aspx	**Physical Activity and Fitness** **6, 7:** Increase physical activity in adults and adolescents. **Disability and Secondary Conditions** **7:** Reduce reported barriers
Change building codes and other important policies to increase safe and healthy homes. • Promote community-level building codes to require all new construction to be radon-resistant • Promote community-level property maintenance and other codes to improve indoor home environments by improving requirements for smoke-, CO, and radon-detectors in homes. • Promote community-level property maintenance and other codes in home environments such as bathrooms and stairs to reduce injury risks. • Promote private and public health care policies to provide reimbursement for asthma education and environmental trigger reduction through home visits. • Integrate healthy homes principles into home visiting program protocols. • Implement community wide campaigns that promote safe and healthy homes.	• Healthy Homes Guidance Document (CDC document cleared; link to be posted soon) • Housing Interventions and Health: A Review of the Evidence (http://journals.lww.com/jphmp/toc/2010/09001#-1750774083) • Healthy Housing Reference Manual (www.cdc.gov/nceh/publications/books/housing/housing.htm) • Surgeon General's Call to Action to Promote Healthy Homes (www.surgeongeneral.gov/topics/healthyhomes/calltoactiontopromotehealthyhomes.pdf) • Trailer Document (CDC document not yet publicly available) • Asthma Community Guide (www.thecommunityguide.org/asthma/index.html) • HUD's Strategic Plan (www.hud.gov/offices/lead/library/hhi/hh_strategic_plan.pdf) and Notice of Funding Availability (www.hud.gov/library/bookshelf12/supernofa/) • www.cdc.gov/lead http://www.cdc.gov/Environmental/	**Environmental Health** **3:** Reduce pesticide exposures. **5:** Reduce physical problems in housing units. **13:** Reduce blood lead levels in children. **16:** Reduce indoor allergen levels. **17:** Increase the number of homes with an operating radon mitigation system. **18:** Increase number of homes constructed with radon-reducing features **24:** Reduce the number of U.S. homes with lead-based paint hazards. **Tobacco Use** **20:** Increase the proportion of smoke-free homes **Disability and Health** **21**: Increase homes and residential buildings with visitable features.

	Association of State and Territorial Dental Directors (ASTDD) Best Practice Approach Report: Use of Fluoride – Community Water Fluoridation http://www.astdd.org/use-of-fluoride-community-water-fluoridation/	**Oral Health** **2:** Increase the proportion of the U.S. population served by community water systems with optimally fluoridated water.
Reduce alcohol retail outlet density and reduce illegal beverage service.	**Community Guide** http://www.thecommunityguide.org/alcohol/outletdensity.html **Community Guide** http://www.thecommunityguide.org/alcohol/dramshop.html	**Substance Abuse** **8:** Reduce average annual alcohol consumption **16:** Reduce the proportion of adults who drank excessively **7:** Reduce the proportion of persons engaging in binge drinking of alcoholic beverages **20:** Decrease the number of deaths attributable to alcohol.
Healthy and Safe Physical Environment Innovative Interventions.	**Recipient will provide**	Recipient will link to HP2020 objective

*Complete Healthy People 2020 Objectives can be found at: http://www.healthypeople.gov/hp2020/Objectives/TopicAreas.aspx
Additional guidance is available at www.cdc.gov and at specific programmatic links at the CDC website.