Advancing Prevention in the 21st Century: Commitment to Action 2014 (P21) Summary

June 27

2014

On February 13 and 14, 2014, the California Department of Public Health (CDPH) hosted a statewide chronic disease prevention meeting, titled Advancing Prevention in the 21st Century, Commitment to Action 2014 (P21) in Sacramento. This DRAFT Report details the P21 proceedings and summarizes the collectively determined results.

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Background

On February 13 and 14, 2014, the California Department of Public Health (CDPH) hosted a statewide chronic disease prevention meeting, titled Advancing Prevention in the 21st Century, Commitment to Action 2014 (P21) in Sacramento. The meeting was co-sponsored by the California Conference of Local Health Officers (CCLHO), the County Health Executives Association of California (CHEAC), and the CCLHO/CHEAC Chronic Disease Prevention Leadership Project.

P21 brought together statewide partners from public and private sector organizations to prioritize shared policy, health system, and health information strategies outlined in the 2014 California Wellness Plan (CWP). CWP is the result of the statewide process led by CDPH between 2011-2013 in which chronic disease prevention forums brought together thought leaders, experts and community partners from multiple organizations and sectors to solicit input and feedback on the Goals, Strategies and Objectives of the nine year CWP. The CWP is a roadmap for CDPH and partners to create communities in which people can be healthy, improve the quality of clinical and community care, increase access to usable health information and assure continued public health capacity to achieve health equity. The CWP is available online at http://www.cdph.ca.gov/programs/cdcb/Documents/CDPH-CAWellnessPlan2014%20(Agency%20Approved).FINAL.2-27-14(Protected).pdf.

The aim of P21 was to find common approaches to reduce the burden and impact of chronic disease in California. P21 planning was led by partners who determined Focus Areas and several priority Strategies for each CWP Goal. P21 resulted in one overarching Strategy per Goal, Sub-strategies for more specific guidance, Activities on which to collaborate and Organizational Commitments through 2016 – a short-term chronic disease prevention agenda. Implementing the CWP and the P21 short-term chronic disease prevention agenda will not be the sole responsibility of any one group, but will require the expertise, skill and talent of statewide partners and potential collaborators from other sectors. Each brings their own perspective, strengths and influence that will ultimately achieve success.

For more information, please go to the CDPH website at http://www.cdph.ca.gov/programs/cdcb/Pages/CAWellnessPlan.aspx .

The National Prevention Strategy Strategic Directions, Priorities and Actions, which guided the development of the CWP and P21 Strategies and Activities, provides additional resources for implementing the California two-year chronic disease prevention agenda, and is available online at http://www.surgeongeneral.gov/initiatives/prevention/strategy/report.pdf .

Results

P21 resulted in a statewide short-term chronic disease prevention agenda for 2014-2016. An overarching Strategy was identified for each CWP Goal, and can be found below in bold, with the associated Goal and Focus Area. This is followed by a summary for each CWP Goal that includes Sub-strategies and Activities and finishes with P21 Organizational Commitments. See appendices for the P21 agenda, general session summaries and detailed breakout session summaries.

California Wellness Plan Goals and P21 2014-2016 Focus Areas and Strategies

Overarching CWP Goal: Equity in Health and Wellness

Goal 1: **Healthy Communities** *Focus Area:* Create healthy, safe, built environments that promote active transport, regular daily physical activity, healthy eating and other healthy behaviors, such as by adoption of health considerations into General Plans

P21 Strategy: Implement formal mechanisms to engage all sectors and identify specific action for collective impact

Goal 2: Optimal Health Systems Linked with Community Prevention *Focus Area:* Build on strategic opportunities, current investments and innovations in the Patient Protection and Affordable Care Act, prevention, and expanded managed care, to create a systems approach to improving patient and community health

P21 Strategy: Determine financing mechanisms that consider return on investment (ROI) and incentivize partnerships for prevention

Goal 3: Accessible and Usable Health Information *Focus Area:* Expand access to comprehensive statewide data with flexible reporting capacity to meet state and local needs

P21 Strategy: Leverage health information exchanges (HIEs), electronic health records (EHRs), and Meaningful Use (MU)

Goal 4: Prevention Sustainability and Capacity *Focus Areas***:** Collaborate with health care systems, providers and payers to show the value of greater investment in community–based prevention approaches that address underlying determinants of poor health and chronic disease; Explore dedicated funding streams for community-based prevention; and, Align newly secured and existing public health and cross-sectoral funding sources to support broad community-based prevention

P21 Strategy: Create Wellness Trust(s) to dedicate streams of funding for community-based prevention at local, regional and state levels

Goal 1 Summary

GOAL 1: Healthy Communities

Focus Area: Create healthy, safe, built environments that promote active transport, regular daily physical activity, healthy eating and other healthy behaviors, such as by adoption of health considerations into General Plans

P21 Strategy: Implement formal mechanisms to engage all sectors and identify specific action for collective impact

Most Promising Sub-strategies

1. Share nationally-recognized evidence of the benefits of Health Impact Assessments.
2. Establish health impact as a required criterion in policies and funding opportunities outside of the health sector, including measurement of health equity, overall community health and the inclusion of disadvantaged communities as part of the Health Impact Assessment.
3. Recognize local leaders who support public health initiatives.
4. Engage in community planning, and advocate for the inclusion of public health elements in General Plans.
5. Include regional public health leadership teams in community planning.
6. Develop strategies and perform training to build community engagement capacity.
7. Develop a public health message that promotes the economic benefits of a healthy and well population.

Proposed Activities

Please refer to Organizational Commitments for Partners working or planning to work on specific activities.

Activity 1A:

Convene a statewide Work Group to identify, collect and develop a compendium of best practices, including the methods and resources used, to engage the community planning and development sectors.

- For example, San Luis Obispo County adapted Strategic Growth Council tactics and formed a review group which considers new development projects, best practices, and offers comments about the likely health impacts of the project

Partners: California Department of Public Health, ChangeLab Solutions, San Mateo County Health System, Public Health Institute

Activity 1B:
Assemble local and/or regional Coalitions of stakeholders from health and non-health sectors to create a shared vision of a healthy community, using a health lens and a Health in All Policies (HiAP) approach.
Partners: Public Health Alliance of Southern California, Ventura County Public Health Department, Alameda County Public Health Department, Monterey County Health Department

Activity 1C:
Convene, via meetings or webinars, local and/or regional public health agencies and community planning agencies to provide a forum for mutual learning and network development about the inclusion of health elements into local General Plans.
Partners: Governor's Office of Planning and Research, Public Health Institute

Goal 1 Sectors to Engage: Community development, economic development, transportation, housing, regional parks, water resources, environmental management

Goal 2 Summary

GOAL AREA 2: OPTIMAL HEALTH SYSTEMS LINKED WITH COMMUNITY PREVENTION

Focus Area: Build on strategic opportunities, current investments and innovations in the Patient Protection and Affordable Care Act, prevention and expanded managed care, to create a systems approach to improving patient and community health

P21 Strategy: Determine financing mechanisms that consider return on investment (ROI) and incentivize partnerships for prevention

Most Promising Sub-strategies

1. Communicate with other sectors – share the public health perspective; listen to other sector goals, measures of success, challenges and constraints, learn the "language" of other sectors; align public health incentives with other sectors incentives.
2. Form or continue local partnerships with other sectors.
3. Identify and educate legislative and other champions who support integration of health care and community prevention.
4. Engage in non-profit hospital community health needs assessments and community health improvement plans.
5. Create and strengthen clinical community linkages, including those between health care systems and workplaces or schools.
6. Use data to show that community prevention activities improve health outcomes, and when possible, demonstrate return on investment.
7. Market successful community prevention models to organizations with interest in, and capacity to, replicate, scale, and institutionalize them.
8. Request guidance from the Centers for Medicare and Medicaid Services (CMS) regarding the allowable reimbursement of non-licensed professionals who provide preventive health services in the community, and advocate for the adoption of allowable reimbursement.
9. Promote electronic HIE to benefit both individual and community health.
10. Pursue public health department accreditation.

Proposed Activities

Please refer to Organizational Commitments for Partners working or planning to work on specific activities.

Activity 2A:
Convene a statewide Work Group to develop a Work Plan to delineate the action steps that public health and the health care sector can take to better integrate, such as convening local or regional meetings between public health departments, health care systems, health care providers, health insurance plans, non-governmental organizations and community-based organizations
Partners: California Department of Public Health (Center for Chronic Disease Prevention and Health Promotion), California Primary Care Association, California Chronic Care Coalition, Health Services Advisory Group

Activity 2B:
Hire a health economist to lead the state effort to increase ROI analyses of public health interventions and oversee communication strategies, including storytelling, to showcase public health interventions with positive health outcomes and/or ROI.
Partners: California Department of Public Health

Goal 2 Sectors to Engage: local and state medical associations, public health associations, health care sector (health care systems, ancillary medical services such as pharmacies and laboratories, health care providers, health insurance plans, etc.), large employers, community-based organizations

Goal 3 Summary

GOAL THREE: ACCESSIBLE AND USEABLE HEALTH INFORMATION

Focus Area: Expand access to comprehensive statewide data with flexible reporting capacity to meet state and local needs

P21 Strategy: Leverage health information exchanges (HIEs), electronic health records (EHRs), and Meaningful Use (MU)

Most Promising Sub-strategies

1. Develop information technology infrastructure at local and state public health departments for the receipt and use of health data.
2. Implement HIEs with the capacity for instantaneous bi-directional communication between public health departments and the health care sector (health care systems, ancillary medical services such as pharmacies and laboratories, healthcare providers, health insurance plans, etc.).
3. Share opportunities for public comment on Meaningful Use Stage III and if possible, coordinate the public health response.

Proposed Activities

Please refer to Organizational Commitments for Partners working or planning to work on specific activities.

Activity 3A:
Create and distribute an online toolkit to guide local public health agency access to online population health data.
Partners: California Department of Public Health, California Chronic Care Coalition, Health Services Advisory Group

Activity 3B:
Develop a Strategic Plan to create and maintain a statewide system for reporting chronic disease health data to local and/or state public health departments, including the data analytics available and/or desired and resources for information technology infrastructure, data transmission and data usability.
Partners: California Department of Public Health, Health Officers Association of California, Public Health Institute, California Chronic Care Coalition, Monterey County Health Department, County of Riverside Department of Public Health

Activity 3C:
Submit public comment to the Office of the National Coordinator on Meaningful Use Stage III that recommends the inclusion of indicators which measure the social and environmental determinants of health.
Partners: California Chronic Care Coalition, Health Services Advisory Group

Goal 3 Sectors to Engage: local and state medical associations, public health associations, health care sector (health care systems, ancillary medical services such as pharmacies and laboratories, healthcare providers, health insurance plans, etc.), large employers, community-based organizations

Goal 4 Summary

GOAL AREA 4: PREVENTION SUSTAINABILITY AND CAPACITY

Focus Areas:

- **Collaborate with health care systems, providers and payers to show the value of greater investment in community-based prevention approaches that address underlying determinants of poor health and chronic disease**
- **Explore dedicated funding streams for community-based prevention**
- **Align newly secured and existing public health and cross-sectoral funding sources to support broad community-based prevention**

P21 Strategy: Create Wellness Trust(s) to dedicate streams of funding for community-based prevention at the local, regional and state levels

Most Promising Sub-strategies

1. Develop communication strategies regarding the benefits of Wellness Trust(s).
2. Educate policymakers (elected and appointed) and the community at the local, state and federal level about the need for community prevention.
3. If possible, merge or combine local needs assessments to increase efficiency and prioritize common prevention goals.
4. If possible, merge or combine grant funds that currently address specific chronic diseases or risk factors to address community-based chronic disease prevention.
5. Engage and collaborate with the health care sector to address community prevention.
6. Expand private-sector employee wellness programs.

Proposed Activities

Please refer to Organizational Commitments for Partners working or planning to work on specific activities.

Activity 4A:

Convene a Work Group of state and local representatives to establish a California Wellness Trust model.

Partners: Public Health Institute, Prevention Institute, The California Endowment, ChangeLab Solutions, American Lung Association in California,) Health Officers Association of California, California Chronic Care Coalition, SEIU-United Healthcare Workers

Sub-activities:

1. Review existing Wellness Trust models (Massachusetts, Colorado, North Carolina)
2. Articulate and communicate what a Wellness Trust is, who it benefits, who it finances, who oversees it, etc.
3. Review previous successful legislative initiatives (Mental Health Services Act – Department of Health Care Services, First 5 – California Children and Families Commission, Cap-and-Trade Program – Air Resources Board, etc.)
4. Identify and engage non-health sector Wellness Trust champions with "gravitas"
5. Identify potential financing mechanisms: non-profit hospital Community Benefit requirement; California Health and Human Services Agency (CHHS) Centers for Medicare and Medicaid Innovation (CMMI) implementation grant to pilot Accountable Care Communities, such as shared health care savings models; legislation (special fund for affordable housing, state tax on electronic cigarettes or other item, local tax, etc.)
6. Develop a Proposal for a state or local Wellness Trust, including financing mechanism(s), any needed legislation, role and financing of partners, criteria for decision-making and outcome evaluation
7. Develop a Summary of Recommendations for California

Goal 4 Sectors to Engage: health care (health care systems, healthcare providers, health insurance plans, local and state medical associations, etc.), business (large employers, chambers of commerce, etc.), banking, tax policy, philanthropy

Organizational Commitments

Action Steps	Organization	First Name	Last Name	Activities
PROVIDE RESOURCES				
Offer tons of resources on how to get the job done.	ChangeLab Solutions	Marice	Ashe	Existing
Share local resolutions, planning documents, and Built Environment/Active Transportation evidence resources with organizers; include cost effectiveness information where possible.	San Mateo County Health System	Cathleen	Baker	New
Provide web links to efforts taken on the Maternal, Child, and Adolescent Health website.	California Department of Public Health/Maternal, Child, and Adolescent Health	Suzanne	Haydu	New
DEVELOP/CONTINUE PARTNERSHIPS				
(1) Talk with Strategic Growth Council to share Wellness Plan; (2) Announce plan at state Metropolitan Planning organization; (3) Invite three new people to coffee to learn from a different sector; (4) Host co-learning series with Planning and Health sector with launch of General Plan; (5) Share Annual Planning Survey; (6) Share State Plan with Local Government Commission.	Governor's Office of Planning and Research	Elizabeth	Baca	Both: New/Existing
Develop a County Health Improvement Plan partnership in Fresno County.	Fresno County Department of Public Health	Sara	Bosse	Existing
Investigate getting a local health department "voice" on physical activity opportunities in communities.	Public Health Institute; California Department of Public Health	Mary	Coordt	
Share concepts with colleagues in nutrition and health promotion within the State and Southern California, (e.g., Public Health Alliance).	County of Riverside	Gayle	Hoxter	Existing

Action Steps	Organization	First Name	Last Name	Activities
Develop formal mechanisms to engage all sectors. Identify and bring additional partners to the table in community health needs assessment and community health improvement planning processes—especially finance sector.	San Joaquin County Public Health Services	Bill	Mitchell	Existing
(1) Identify existing coalitions and networks in Los Angeles County and collaborate across sectors on common health objectives. (2) Gain commitments on partnering on objectives. (3) Share with at least five partners information on the Wellness Plan.	Los Angeles County Department of Public Health	Michelle	Wood	Not Provided
Work with State to identify possible stakeholder groups that weren't at the meeting to participate in the process.				New
Develop an engagement agreement when working with stakeholders at contaminated sites. The agreement would recognize shared goals to develop a healthy community.	California Department of Public Health	Rick	Kreutzer	New
Bring back information from this meeting to our county's Obesity and Chronic Disease Prevention Task Force to help inform our process as we select our policy initiative (in the area of built environment / physical activity promotion) and develop our plan of action.	San Joaquin County Public Health Service	Marisela	Pineda	
Continue work at our local health jurisdiction to the extent that funding permits.	Yolo County Health Services, Maternal, Child, and Adolescent Health Action, CADPHN	Jan	Babb	Existing
Continue effective activities supported by Community Transformation Grant.	Los Angeles County Department of Public Health	Jonathan	Fielding	New
Translate these activities into dementia risk reduction.	Alzheimer's Association	Ruth	Gay	New

Action Steps	Organization	First Name	Last Name	Activities
Promote Sonoma County Health Action	Sonoma County Department of Health Services	Karen	Holbrook	Existing
Review best practices about community engagement.	San Mateo County	Brad	Jacobson	Not Provided
Continue working with remaining six cities to adopt Healthy Communities Program.	County of San Bernardino Department of Public Health	Vanessa	Long	Existing
Promote Sonoma County Health Action and related activities	Sonoma County Department of Health Services	Tammy	Moss Chandler	Existing
(1) Collaborate with faith-based organizations. (2) Educate them about work being done in their communities as it pertains to health-related issues. (3) See how they can get involved.	UC San Diego	Lakeysha	Sowunmi	New
Our coalition has been dedicated to building healthy communities, social determinants, walkable communities, engaging schools and children to engage schoolchildren's families.	California Chronic Care Coalition	Liz	Helms	Existing
Work with cities to develop and implement a Healthy Cities Resolution, encouraging healthy eating and active living.	County of Riverside Department of Public Health	Susan	Harrington	Existing
Transition Mobilizing for Action through Planning Partnerships Steering Committee into an ongoing multisectoral "health" committee.	Napa County Public Health	Heidi	Merchen	New
Try to connect with David Erikson to learn more about how his work with the Federal Reserve Bank can be used in the central San Joaquin Valley to turn around extreme poverty conditions.	Fresno County Department of Public Health	David	Luchini	New
CONVENE STAKEHOLDERS				

Action Steps	Organization	First Name	Last Name	Activities
(1) Host a HiAP training for member local health departments. (2) Launch new collaboration with Environmental Health Directors to bridge environmental health activity with chronic disease prevention.	Public Health Alliance of Southern California	Tracy	Delaney	New
Continue to support and promote California Convergence as a platform to bring community to the table; convene stakeholders and advance action.	California Convergence/Public Health Institute	Kristania	DeLeon	Existing
Convene health leaders and patients monthly to foster uptake of best practices to prevent myocardial infarction and stroke, and other areas where science and practice are at odds.	Right Care Initiative	Hattie	Hanley	Existing
(1) Join a work group to continue to refine the outcomes and strategies [New]. (2) Convene a group of physical activity stakeholders; develop actions statewide [Existing]	Public Health Institute	Jessica	Lime	Both: New/Existing
Bring together Public Health Institute programs involved in this goal area to identify evidence-based interventions, return on investment, and what it would take to scale these efforts.	Public Health Institute	Mary	Pittman	Existing
(1) Select depressed community in Sacramento; (2) Mobilize key community partners on issue resonating with them; (3) Work with local elected official(s) and other partners to convene a community forum to address issue.	California Department of Public Health	Shirley	Shelton	New
Convene multi-stakeholder group in my area.	Alameda County Public Health	Kimi	Watkins-Tartt	
DEVELOP POLICY				
Advance policies that support healthy communities through legislative and regulatory processes.	California Medical Association; Center for Medical and Regulatory Policy	Scott	Clark	Existing

Action Steps	Organization	First Name	Last Name	Activities
(1) Participate in a new objective raised in this meeting. (2) Implement workplace wellness policies.	California Department of Public Health/Comprehensive Cancer Control Program	Shauntay	Davis	Existing
Push public health as chief strategist for community/population health.	California Department of Public Health	Greg	Oliva	Both: New/Existing
Expand involvement in efforts to direct cap-and-trade funds to disadvantaged communities for community health improvement.	Los Angeles County Department of Public Health	Paul	Simon	Existing
(1) Seek state and federal funding to support advocacy and policy change efforts. (2) Prioritize health communities through partnerships with foundations and broad sectors.	Policy Link	Mildred	Thompson	Existing
INTEGRATE HEALTH AND COMMUNITY PLANNING				
Find out what is in our county's and city's general plans and when they have to be updated.	Yolo County Health Department	Constance	Caldwell	New
Create a set of "healthy living principles" and affiliated policies to be included in the general plan, in conjunction with Community Development Department–led activities conducted in partnership with the Department of Health and Human Services.	Long Beach Health and Human Services Department	Kelly	Colopy	New
Commit to working with the county Planning Departments to incorporate "health" into the general plan.	Nevada and Sierra Counties	Ken	Cutler	Existing
Finance Napa County's Community Health Improvement Plan. Get health element into general plan.	Napa County Public Health Division	Hannah	Euser	Both: New/Existing
Develop opportunities to enact/create Health in All Policies–related opportunities. For example, include health elements in general plans, and make sure they include community.	Monterey County Health Department	Krista	Hanni	Existing

Action Steps	Organization	First Name	Last Name	Activities
Incorporate health consideration into planning.	Tulare County	Karen	Haught	Existing
(1) Connect with Linda Wheaton to reestablish common ground and explore collaboration (done). (2) Connect with Gayle Hoxter and Ruben with San Bernardino County Health Department's Healthy Communities Program to deepen contacts with multisector efforts in Southern California.	California Convergence Coordinating Office; Public Health Institute	Lisa	Hershey	New
Promote health leadership and engagement in SCS process (regional land use/transportation planning). Support new tools to better evaluate health benefits of strong planning scenarios. Engage media to highlight health connection to planning. Recognize and reward elected official champions.	American Lung Association of California	Bonnie	Holmes-Gen	Existing
Provide better data to local elected officials on how poor planning has had an impact on the current poor health of the county. Utilize "Economic Burden of Disease Report" to stress the importance of healthy communities.	Fresno County Department of Public Health	David	Luchini	New
Develop Healthy Community Indicators and Integrated Transport Health Impact Model.	California Department of Public Health, Office of Health Equity	Neil	Maizlish	Existing
Add health component into the General Plan.	Tuolumne County Public Health Department	Melissa	Parrish	Existing
Follow up with Bernadette Austin and Caroline Peck on California Wellness Plan implementation in Active Design. Help other local governments add a health lens to their sector.	Sacramento County-Sustainability	Judy	Robinson	Both: New/Existing
(1) Meet with California Governor's Office of Planning and Research again (Elizabeth Baca) [Existing]. (2) Meet with developer re: healthy communities (Bernadette Austin/other) [New].	California Department of Public Health/Nutrition Education and Obesity Prevention Branch	Jeff	Rosenhall	Both: New/Existing

Action Steps	Organization	First Name	Last Name	Activities
Participate in city planning.	Alameda County Public Health and Diabetes Coalition of California	Brenda	Rueda-Yamashita	Existing
Continue to advocate for health in planning policy—Maternal, Child, and Adolescent Health and heart disease efforts through Mono County Health Task Force—Nutrition and Physical Task Force. Lead and support Community Health Alliance.	Mono County	Lyndee	Salcido	Both: New/Existing
(1) Public Health Institute continues work to promote chronic disease prevention across state through a variety of projects. (2) Online submission: Continue working for environmental change, including "healthy" general plans.	Public Health Institute	Lynn	Silver	Existing
Continue to collaborate with leadership to improve the built environment and participate in Design/Active Sacramento.	WALK Sacramento/Health Officers Association of California	Glennah	Trochet	Existing
Contribute guidance for inclusion of health-supporting policy/program examples for General Plan Guidelines update.	California Department of Housing and Community Development	Linda	Wheaton	New
Include health metrics in Regional Transportation Plan revision.				Both: New/Existing
Develop and implement plan around Health in all Policies advocacy.	Ventura County Public Health	Rigoberto	Vargas	New
Continue our Place Matters work.				Existing
Work with community clinics to integrate into affordable housing developments.	Domus Development	Bernadette	Austin	New
INTEGRATE HEALTH AND SCHOOLS				

Action Steps	Organization	First Name	Last Name	Activities
Continue providing (1) active transport, physical activity, and healthy nutrition via Safe Routes to School; (2) Group to Alleviate Smoking Pollution tobacco education with youth advocates. (3) Rethink your Drink in collaboration with schools farmers market.	Mendocino County Health and Human Services Agency/Public Health	Sharon	Convery	Existing
Continue efforts in Team California for Healthy Kids in California schools—promote school climate and emphasis on schools as their own communities.	California Department of Education	Tom	Herman	Existing
Explore as-yet-undeveloped Safe Routes to Schools possibilities.	Mono County Health Department	Richard	Johnson	New

Action Steps	Organization	First Name	Last Name	Activities
PROVIDE RESOURCES				
Develop a draft proposal to share with Board of Supervisors for Social Impact Bonds.	Los Angeles County Department of Public Health	Jonathan	Fielding	New
Promote prevention as key priority for federal, state, and local funding.	American Lung Association of California	Bonnie	Holmes-Gen	Existing
Review and integrate best practices for determining how to show return on investment.	San Mateo County	Brad	Jacobson	Not Provided
Develop issue briefs on making the business case for chronic disease prevention, and describe the economic burden of not taking action, in conjunction with San Joaquin Valley Public Health Services partners and universities in the region.	San Joaquin County Public Health Services	Bill	Mitchell	Existing
(1) Work with Community Transformation Grant communities to harvest data and progress stories to advocate for new funding. (2) Work with California State Innovation Model team to test local pilots that can be scaled with dedicated funding.	Public Health Institute	Mary	Pittman	Both: New/Existing
DEVELOP/CONTINUE PARTNERSHIPS				
Discuss suggestions with local funders and agencies and come up with one opportunity to champion around systems approach and Affordable Care Act	Monterey County Health Department	Krista	Hanni	New
(1) Develop a collective impact approach to draw community partners together in common focus to enhance partnership. (2) Seek additional funding sources.	Long Beach Health and Human Services Department	Kelly	Colopy	New
Work within public health framework to collaborate with stakeholders at the community level.	Right Care Initiative	Hattie	Hanley	Existing
Identify opportunities to increase connections to collaborate.	Tulare County	Karen	Haught	Both: New/Existing

Action Steps	Organization	First Name	Last Name	Activities
(1) Listen to communities to develop the right tools to engage them; (2) Continue University of Best Practices on the clinical side and add community of best practices. (3) Convening, including legislators.	California Chronic Care Coalition	Liz	Helms	Existing
Work with other organizations (e.g., Chronic Care Prevention) in+B36 action steps (convening and legislative approach).	Arthritis Foundation, Pacific Region	Krystin	Herr	New
Continue and expand public health work with health plans and organizations. Highlight public health programs as resources to medical community and health plans.	County of Riverside	Gayle	Hoxter	Existing
Be involved in a Mammoth Community Health Alliance.	Mono County Health Department	Richard	Johnson	Both: New/Existing
Participate in planning in this area.	UC Berkeley School of Public Health/California Program on Access to Care	Perfecto	Munoz	
(1) Support additional convening to move multi-sector partnerships forward. (2) Work on legislative efforts, identifying legislative champions, administrative advocacy, and defining designated funding streams to support this important work. (3) Support creating health system/community prevention pilots at the community or county level.	California Primary Care Association	Beth	Malinowski	New
Continue to build local partnerships to come to a holistic view of person through community.	Tuolumne County Public Health Department	Melissa	Parrish	Existing
Continue working with health systems on these issues, including the Sonoma County Committee for Healthcare Improvement and the Central Valley Activate project	Public Health Institute	Lynn	Silver	Existing
Participate in current partnerships with health care networks.	WALK Sacramento/Health Officers Association of California	Glennah	Trochet	Existing

Action Steps	Organization	First Name	Last Name	Activities
Evaluate opportunity to apply for pending cross-sector grant opportunities from the Centers for Disease Control and Prevention, involving community-development / affordable housing stakeholders.	California+C42 Department of Housing and Community Development	Linda	Wheaton	New
Discuss opportunities for involvement with stakeholders—invite to the table, communicate benefit of participation to include partners to drill down to identify who needs to be at the table. Address and identify groups working on equity issues and disparities.				New
Expand upon ongoing efforts work in this area as limited time permits.	Yolo County Health Services, Maternal, Child, and Adolescent Health Action; California Conference of Directors of Public Health Housing	Jan	Babb	Existing
(1) Continue working on systems-change interventions in relation to cancer screening. (2) Participate in new actions.	California Department of Public Health, Comprehensive Cancer Control Program	Shauntay	Davis	Existing
Promote and participate in Sonoma County Health Action (Community Transformation Grant funds).	Sonoma County Department of Health Services	Karen	Holbrook	Existing
Promote and participate in Sonoma County Health Action (Community Transformation Grants), Affordable Care Act training, Center for Medicare and Medicaid Innovation planning and related activities.	Sonoma County Department of Health Services	Tammy	Moss Chandler	Existing
Expand asthma program collaboration and partnership with county Medi-Cal insurer.				Existing
Connect with Beth Malinowski to discuss gaps in care for undocumented.	Fresno County Department of Public Health	David	Luchini	New

Action Steps	Organization	First Name	Last Name	Activities
DEVELOP POLICY				
(1) Look for sustainable funding sources and support efforts and policy to this end. (2) Participate in Accountable Care Organization recently joined by local hospital district.	Mono County	Lyndee	Salcido	Both: New/Existing
INTEGRATE HEALTH CARE AND PUBLIC HEALTH				
(1) Build on State's Cal Medi Connect program to enhance earlier detection and better management of dementia as a chronic disease. (2) Prevent institutionalization and unnecessary disability.	Alzheimer's Association	Debra	Cherry	Both: New/Existing
(1) Continue working with Partnership Health Plan and local hospital and clinics for chronic disease prevention/Stanford model. (2) Funnel funds to community partners to provide health/chronic disease prevention programs.	Mendocino County Health and Human Services Agency/Public Health	Sharon	Convery	Existing
Integrate this goal into existing tasks, especially in organizing communities of providers and patients to improve care coordination and improve population health.	Health Services Advisory Group	Mary	Fermazin	Existing
Work with the dual process to provide education to case managers on dementia care management.	Alzheimer's Association	Ruth	Gay	New
Learn more about accountable-care communities and improving population health.	County of Riverside Department of Public Health	Susan	Harrington	New
(1) Make home visits for asthma care reimbursable. (2) Define goal of home visits to address the broad definition of healthy home.	California Department of Public Health	Rick	Kreutzer	Existing
Continue commitment to establish Federally Qualified Health Centers.	County of San Bernardino Department of Public Health	Vanessa	Long	Existing
Partner for effective care delivery and advocate for dental disease prevention leadership and programs.	California Dental Association	Gayle	Mathe	Not Provided

Action Steps	Organization	First Name	Last Name	Activities
Attempt development of Accountable Care Community+B61.	Napa County Public Health	Heidi	Merchen	New
Adapt accountable care communities work to Ventura County.	Ventura County Public Health	Rigoberto	Vargas	New
(1) Promote opportunities in Affordable Care Act to benefit low-income communities and communities of color. (2) Seek ways to use community benefit funds to enhance quality systems that benefit communities.	Policy Link	Mildred	Thompson	New
Promote "Screening, Brief Intervention, Referral, and Treatment" for alcohol use in adults (U.S. Preventive Services Task Force recommendation) to local primary-care providers under Medi-Cal expansion.				Both: New/Existing
(1) Continue conversations with local health care organizations to provide chronic disease self-management programs and explore sustainable reimbursement strategies for unlicensed workers. (2) Be part of ongoing conversations to develop strategies/activities to bring Central Valley/rural perspective/realities.	Merced County Department of Public Health	Cindy	Valencia	Both: New/Existing

Action Steps	Organization	First Name	Last Name	Activities
PROVIDE RESOURCES				
Contribute our knowledge and expertise with Medicare data and electronic health record technology, and promote the development of health information exchanges.	Health Services Advisory Group	Mary	Fermazin	Existing
(1) Access and use health information. (2) Monitor activities in key countries. (3) Provide suggestions where gaps are detected.	California Chronic Care Coalition	Jerry	Jeffe	New
Share social determinants of health data that will be coming from this area/goal with community partners.	Ventura County Public Health	Rigoberto	Vargas	New
DEVELOP/CONTINUE PARTNERSHIPS				
Participate in a subcommittee that will give input to meaningful use.	Orange County Health Care Agency	Amy	Buch	Existing
Begin conversations with hospitals and community providers for shared data-elements system.	Long Beach Health and Human Services Department	Kelly	Colopy	New
Work with "non-health" partners on integrating data sets (e.g., body mass index data with walkability data or recreational data).	Nevada and Sierra Counties	Ken	Cutler	New
Continue working on this goal in relation to cancer and participate in new actions.	California Department of Public Health/Comprehensive Cancer Control Program	Shauntay	Davis	Existing
Participate in workgroup formed as a result of this meeting and inform local partners.	Monterey County Health Department	Krista	Hanni	New
(1) Continue to share health data with community; (2) Participate in local Health Information Exchange.	Tulare County	Karen	Haught	Existing

Action Steps	Organization	First Name	Last Name	Activities
Work with our Chronic Disease Control Branch to estimate of costs for chronic disease.	California Department of Public Health	Rick	Kreutzer	Not Provided
Continue to work with local health information exchange to include public health as a partner, and encourage them to provide chronic disease population data to the public health department.	San Joaquin County Public Health Services	Bill	Mitchell	Existing
(1) Participate in any follow-up work-group meetings. (2) Support data literacy and use of chronic disease and social determinant of health data.	Public Health Institute	Amy	Neuwelt	New
Contact Elizabeth Baca to understand data to be able to use it to advance policy implementation, get return on investment, and even develop data to advance healthy communities.	Sacramento County Planning and Environmental Review	Judy	Robinson	New
Participate on any workgroup formed as a result of outcomes from this session	Health Officers Association of California	Wilma	Wooten	Not Provided
Identify sources of data to develop a story to engage stakeholders/partners to identify their priorities and steps for collaboration.				New
Convene discussion re: Leverage health information exchange (state) with regard to the "other registries" component.	California Department of Public Health	Este	Geraghty	Existing
(1) Bring data sources and partners together and identify data gaps. (2) Look at assessment requests at regional and statewide levels.	County of Riverside Department of Public Health	Susan	Harrington	Existing
CONVENE STAKEHOLDERS				
Participate in convening and implementation of task teams/work groups that are promoting expanded data access, electronic exchange, and integration.	California Department of Public Health/Chronic Disease Control Branch	Janet	Bates	Existing

Action Steps	Organization	First Name	Last Name	Activities
COMMUNICATION				
Place searchable database of local data (from State) on website.				New
Make open-data platform meaningful, inclusive, and user friendly.	Sonoma County Department of Health Services	Tammy	Moss Chandler	Both: New/Existing
Continue support for epidemiologist to assemble and present health and socioeconomic data to Health Council and community based organizations.	Yolo County Health Department	Constance	Caldwell	Existing
Promote www.healthresearchforaction.org/right-care-initiative; www.RIGHTCARE.Berkeley.edu; www.Rightcare.DMHC.ca.gov.	Right Care Initiative	Hattie	Hanley	Existing
Build more open platform of data.	Sonoma County Department of Health Services	Karen	Holbrook	Existing
SURVEILLANCE/EPIDEMIOLOGY				
Enhance education re: the California Healthy Kids survey.	California Department of Education	Tom	Herman	New
Assess potential for including health-related data indicators in Statewide housing plan update.	California Department of Housing and Community Development	Linda	Wheaton	New
(1) Encourage Los Angeles County Department of Public Health to conduct surveillance of cognitive impairment and caregiving. (2) Work on Los Angeles County Older Adult Quality of Life Report Card.	Alzheimer's Association	Debra	Cherry	Existing
Expand work that has been done with Community Transformation Grant counties using CHNA.ORG tool and customize for reporting outcomes of Let's Get Healthy California and the chronic disease plan.	Public Health Institute	Mary	Pittman	Both: New/Existing

Action Steps	Organization	First Name	Last Name	Activities
MEANINGFUL USE				
Ensure that Health Equity and Social Determinants of Health considerations are part of meaningful use.	San Mateo County	Brad	Jacobson	Not Provided
HEALTH INFORMATION EXCHANGE				
Work to make progress and be effective in this area while protecting organizations' data.	Alameda County Public Health; Diabetes Coalition of California	Brenda	Rueda-Yamashita	New
Educate existing and prospective user base on how to access web-based data request center.	Office of Statewide Health Planning and Development	Jonathan	Teague	Both: New/Existing
Promote transparency of data in the public domain; connect all systems and give access to providers in real time.	California Chronic Care Coalition	Liz	Helms	Existing
(1) Participate in health information exchange being investigated by local partners. (2) Lend and use local health department data in new ways.	Mono County	Lyndee	Salcido	New
Integrate Geographic Information Systems; Nutrition Education and Obesity Prevention Branch; and Women, Infants, and Children data sources, plus additional data services.	County of Riverside	Gayle	Hoxter	Existing
Make progress towards integrated surveillance system.	Los Angeles County Department of Public Health	Jonathan	Fielding	Both: New/Existing
ELECTRONIC HEALTH RECORDS				
Solidify electronic health records exchange	County of San Bernardino Department of Public Health	Vanessa	Long	Existing

Action Steps	Organization	First Name	Last Name	Activities
DEVELOP/CONTINUE PARTNERSHIPS				
Determine capacity to work on this, based on next steps.	Yolo County Health Services; Maternal, Child, and Adolescent Health Action; California Conference of Directors of Public Health Nursing	Jan	Babb	New
(1) Expand the organizations and agencies involved beyond the state and local health departments; (2) partner with California Department of Public Health and Public Health Institute in post-P21 chronic disease prevention activities/ convenings.	Contra Costa Health Services	Wendel	Brunner	New
Participate in new actions.	California Department of Public Health/Comprehensive Cancer Control Program	Shauntay	Davis	New
Need to collaborate more closely with public health.	Right Care Initiative	Hattie	Hanley	New
Participate in statewide work groups.	Tulare County	Karen	Haught	New
Focus on prevention, and encourage county constituents do the same with regard to injury and prevention for children.	Emergency Medical Services Authority	Tonya	Thomas	New
(1) Work with regional partners to identify sustainable prevention funding sources. (2) Discuss the importance of this funding with health plans, hospital councils, federally qualified health centers, planning development partners, and others.	Fresno County Department of Public Health	David	Luchini	New
NON-TRADITIONAL PARTNERS				

Action Steps	Organization	First Name	Last Name	Activities
Explore as yet undetermined funding sources for a community-wide child care center.	Mono County Health Department	Richard	Johnson	Existing
Work with Debra Oto-Kent to advance park prescriptions in Sacramento County.	Sacramento County Planning and Environmental Review	Judy	Robinson	Both: New/Existing
(1) Identify broader partners based on new partners at this conference (e.g., banks, housing). (2) Include new partners in program activities.	County of San Diego	Lindsey	McDermid	New; Expanding on existing
Include non-traditional partners that can be valuable resources in moving the boulder up the hill.	California Chronic Care Coalition	Liz	Helms	Existing
Bring community into whatever "conversation" emerges around the development of this work. For example, the California Convergence Giving Practice could add technical expertise.	California Convergence Coordinating Office; Public Health Institute	Lisa	Hershey	Both: New/Existing
HEALTH CARE SYSTEMS				
Continue to work with community benefits managers of Sacramento hospital systems to fund activities.	WALK Sacramento; C35Health Officers Association of California	Glennah	Trochet	Both: New/Existing
Participate in collaborative discussions on investment in community-based prevention approaches.	California Medical Association; Center for Medical and Regulatory Policy	Scott	Clark	Existing
(1) Continue working with Partnership Health Plan and local hospital and clinics for chronic disease prevention/Stanford model. (2) Funnel funds to community partners to provide health/chronic disease prevention programs.	Mendocino County Health and Human Services Agency+C3	Sharon	Convery	Existing

Action Steps	Organization	First Name	Last Name	Activities
(1) Connect with county departments, businesses, and health-care-related community-based organizations to increase/improve work already started. (2) Coordinate with other community leaders. (3) Identify champions.	Tuolumne County Public Health Department	Melissa	Parrish	New
Collaborate with health care leaders, hospitals, and health organizations in California Health Professionals for Clean Air.	American Lung Association of California	Bonnie	Holmes-Gen	Existing
Create an easy-to-understand grid/tool with partners.	Public Health Institute	Mary	Pittman	New
(1) Continue working with San Francisco to integrate their plan for Alzheimer's into all aspects of managed care planning. (2) Participate in multi-organization work groups and share multi-sector responsibilities focused on disease management and risk reduction.	Alzheimer's Association	Ruth	Gay	
Expand asthma program collaboration and partnership with county Medi-Cal insurer.				Existing
SHOW COMMUNITY PREVENTION RETURN ON INVESTMENT				
Show health benefits to specific investors from other sectors.	Los Angeles County Department of Public Health	Jonathan	Fielding	Both: New/Existing
SURVEILLANCE/EPIDEMIOLOGY				
Continue Community Vital Signs strategic planning and implementation.	County of San Bernardino Department of Public Health	Vanessa	Long	Existing
Monitor the California Wellness Plan with special focus on P21 Policy Agenda and Action steps [partners: Amy Krause (Office of Public Affairs) and Leticia Alejandrez (The California Endowment)].	California Department of Public Health	Jessica	Nuñez de Ybarra	New

Action Steps	Organization	First Name	Last Name	Activities
(1) Show a 50-percent cost reduction for Medi-Cal managed care through asthma case management. (2) Continue diabetes program billing of Medicare this year. (3) Look at health impact.	Alameda County Public Health; Diabetes Coalition of California	Brenda	Rueda-Yamashita	Existing
DEVELOP POLICY				
Learn about the California Endowment asthma project in Fresno that is funded with social impact bonds, and promote this where appropriate.	California Department of Public Health	Rick	Kreutzer	Not Provided
Continue to advocate to the State for chronic disease infrastructure allocations to health departments (dedicated funding streams versus competitive grants).	San Joaquin County Public Health Services	Bill	Mitchell	Existing
INSTITUTE A WELLNESS TRUST				
(1) Support California Conference of Local Health Officers/County Health Executives Association of California leadership team to convene work group and seek financing for planning for a state trust/support. (2) Continue work on Central Valley model. (3) Help convene post-conference follow-up, including on wellness trust models. (4) Seek financing to support development of innovative funding flows, such as Pay for Success.	Public Health Institute	Lynn	Silver	New
Connect and collaborate with prevention agencies (Public Health Institute, Prevention Institute, American Heart Association, California Endowment, California Conference of Local Health Officers, etc.) to create, build, and maintain a wellness trust.	American Lung Association in California	Kimberly	Amazeen	Both: New/Existing

Action Steps	Organization	First Name	Last Name	Activities
(1) Draft model wellness trust document(s)/legislation [New]. (2) Participate in study/planning committee [New]. (3) Provide model policies that Wellness Trusts could help to implement [Existing].	ChangeLab Solutions	Marice	Ashe	Both: New/Existing
(1) Establish a sustainable prevention trust (such as Wellness Trust). (2) Report to Bay Area Regional Health Inequities Initiative membership re: Wellness Trust and other outcomes of the conference.	San Mateo County	Edith	Cabuslay	New
Review models of wellness trust to understand current movement and their possibilities.	Long Beach Health and Human Services Department	Kelly	Colopy	New
(1) Research and track state Center for Medicare and Medicaid Innovation application and statewide pilots to leverage/coordinate potential success models to make a case for statewide Wellness Trust [New]. (2) Convene funders/ investors through California Convergence (public health/community) to identify work intersections [Existing].	California Convergence/Public Health Institute	Kristania	DeLeon	Both: New/Existing
Commit to bringing the rural public health department perspective to a new Wellness Trust task force.	Shasta County Public Health	Terri	Fields-Hosler	Both: New/Existing
Support development of wellness trusts in California	California Endowment	George	Flores	Both: New/Existing
(1) Explore Wellness Trust as local funding for local work; (2) Review two current funders who are similar to Wellness Trust: Regional Access Project and Desert Health Care District.	County of Riverside	Gayle	Hoxter	New
Help design a wellness trust fund and suggest ways to fund it.	California Chronic Care Coalition	Jerry	Jeffe	New

Action Steps	Organization	First Name	Last Name	Activities
Build a coalition to establish a Wellness Trust that creates and redirects resources to communities that bear the greatest burden of health disparities.	Service Employees International Union–United Healthcare Workers	Kathy	Ochoa	Existing
Develop further the concept and structure for implementation of wellness trusts statewide.	Health Officers Association	Bruce	Pomer	New
Follow up with Prevention Institutes' Jeremy Cantor around Wellness Trust funds	California Department of Public Health/Nutrition Education and Obesity Prevention Branch	Jeff	Rosenhall	New
Support the creation of Wellness Trust at the state level.	WALK Sacramento/Health Officers Association of California	Glennah	Trochet, MD	Both: New/Existing
Engage partners to fully support local efforts toward creation of a statewide wellness trust.	Ventura County Public Health	Rigoberto	Vargas	New
FUNDING/RESOURCES				
Create a dedicated fund for county-wide community-based work.	Sonoma County Department of Health Services	Karen	Holbrook	New
Advocate through local trust-like institute in gestation.	Riverside County Department of Public Health	Cameron	Kaiser	New
Create dedicated funding (pot/pooled resources) specifically designated for community-based prevention at the county level.	Sonoma County Department of Health Services	Tammy	Moss Chandler	New

Action Steps	Organization	First Name	Last Name	Activities
(1) Continue to write grants for chronic disease prevention to bring money into California (Chronic Disease Control Branch staff and California Department of Public Health administration). (2) Respond to stakeholder stated needs of convening, providing data, technical assistance, and funding at the local level (California Conference of Local Health Officers/County Health Executives Association of California leadership, Public Health Institute, the California Endowment). (3) Engage health systems and show value (return on investment) of evidence-based public health activities (Desiree Backman, Neal Kohatsu).	California Department of Public Health	Caroline	Peck	Both: New/Existing
Seek creative funding to support strong systems and practices to sustain needed programs.	Policy Link	Mildred	Thompson	New
Pursue at the county level the model for inter-sectional Social Impact Bond.	Contra Costa Health Services	Bill	Walker	Both: New/Existing
Continue collaborative efforts to develop funding for permanent supportive housing, especially for chronic homeless populations (e.g., Section 811 Pilot, Mental Health Services Act, supportive housing).	California Department of Housing and Community Development	Linda	Wheaton	Both: New/Existing
Work with funders to discuss the possibility of joining the efforts that started with this meeting.				New
PARTICIPATE IN COMMUNITY HEALTH ASSESSMENT AND COMMUNITY HEALTH PLAN				
Support new Community Health Assessment and Improvement Plan with Community-based prevention approaches.				New

Appendix A: Agenda

Advancing Prevention in the 21st Century
Commitment to Action 2014
February 13 and 14, 2014
Sacramento, California

AGENDA

Thursday, February 13, 2014

9:00 **Welcome and Opening Remarks**

Diana Dooley, JD, Secretary, California Health and Human Services Agency
Ron Chapman, MD, MPH, Director & State Health Officer, California Department of Public Health

9:10 **Big Picture and Day 1 Purpose**

Wendel Brunner, PhD, MD, MPH, Public Health Director, Contra Costa Health Services

9:20 **California Wellness Plan Presentation/Update**

Ron Chapman, MD, MPH, Director & State Health Officer, California Department of Public Health

9:30 **Opening Keynote**

Jeffrey Levi, PhD, Executive Director, Trust for America's Health

10:30 **Break**

10:45 **Breakout Session One: Moderated Discussion**

Goal 1- Healthy Communities

Focus Area: Create healthy, safe, built environments that promote active transport, regular daily physical activity, healthy eating and other healthy behaviors, such as by adoption of health considerations into General Plans.

Moderator: *Elizabeth Baca, MD, MPA, Senior Health Advisor, Governor's Office of Planning and Research*

Vikrant Sood, Program Manager, Bay Area Regional Prosperity Project, Metropolitan Transportation Commission

Tracy Delaney, PhD, RD, Director, Public Health Alliance of Southern California, Public Health Institute

Aracely Rosas, BS, Community Leader

Goal 2- Optimal Health Systems Linked with Community Prevention

Focus Area: Build on strategic opportunities, current investments and innovations in the Patient Protection and Affordable Care Act, prevention, and expanded managed care, to create a systems approach to improving patient and community health.

Moderator: *Daniel Peddycord, RN, MPA/HA, Public Health Director, Santa Clara County*

Larry Cohen, MSW, *Founder and Executive Director, Prevention Institute*

Jeffrey Rideout, MD, FACP, Senior Medical Advisor, Covered California

Wells Shoemaker, MD, Consulting Medical Director, California Association of Physician Groups

Goal 3 - Accessible and Usable Health Information

Focus Area: Expand access to comprehensive statewide data with flexible reporting capacity to meet state and local needs.

Moderator: *Este Geraghty, MD, MS, MPH, FACP, GISP, Deputy Director, Center for Health Statistics and Informatics, California Department of Public Health*

Xavier Morales, PhD, Executive Director, Latino Coalition for a Healthy California

Harold S. Luft, PhD, MA, Director, Palo Alto Medical Foundation Research Institute

Linette Scott, MD, MPH, Chief Medical Information Officer, California Department of Health Care Services

Goal 4 - Prevention Sustainability and Capacity

Focus Areas:

I. Collaborate with health care systems, providers and payers to show the value of greater investment in community–based prevention approaches that address underlying determinants of poor health and chronic disease.

II. Create new, dedicated funding streams for community-based prevention.

III. Align newly secured and existing public health and cross-sectoral funding sources to support broad community-based prevention.

Moderator: *Marice Ashe, JD, MPH, Founder and Chief Executive Officer, ChangeLab Solutions*

Jeremy Cantor, MPH, Program Manager, Prevention Institute

Julia Caplan, MPP, MPH, Program Director, Health in all Policies (HiAP), Public Health Institute

Jeff Hobson, Masters ERG, Deputy Director, TransForm

12:00 **Poster Session**

12:30 **Lunch Presentation**

Wilma Wooten, MD, MPH, Health Officer, San Diego County

1:30 **Break/Transition**

1:45 **Breakout Session Two: Identify Top Strategies**

Goal 1- Healthy Communities

Goal 2- Optimal Health Systems Linked with Community Prevention

Goal 3 - Accessible and Usable Health Information

Goal 4 - Prevention Sustainability and Capacity

3:00 **Break/Poster Session**

3:30 **General Session: Review and Vote on Top Strategies**

Larry Cohen, MSW, *Founder and Executive Director, Prevention Institute*

5:00 – 6:30 **Reception**

Friday, February 14, 2014

8:00 **Welcome and Day 2 Purpose**

8:15 **Health Happens Here Video Presentation**

Leticia Alejandrez, Director of Communications, The California Endowment

8:30 **Keynote Presentation**

David J. Erickson, PhD, Director, Center for Community Development Investment, Federal Reserve Bank of San Francisco

9:15 **Break**

9:30 **Breakout Session Three: Identify Action Steps and Commitments**

Goal 1- Healthy Communities

Goal 2- Optimal Health Systems Linked with Community Prevention

Goal 3 - Accessible and Usable Health Information

Goal 4 - Prevention Sustainability and Capacity

10:30 **Break/Poster Session**

11:00 **General Session: Goal Area Presentations**

Wendel Brunner, PhD, MD, MPH, Public Health Director, Contra Costa Health Services

11:45 **Organizational Commitments to move action steps forward**

Jonathan E. Fielding, MD, MPH, MBA, MA, Director of Public Health and Health Officer, Los Angeles County

12:15 **Closing speaker**

Jonathan E. Fielding, MD, MPH, MBA, MA, Director of Public Health and Health Officer, Los Angeles County

12:45 **Next steps and wrap-up**

Ron Chapman, MD, MPH, Director & State Health Officer, California Department of Public Health

1:00 **Adjourn**