



Ways to Partner around Chronic Conditions

Some Example How-To's:

- ✓ Collaborate with key state department of health personnel as appropriate based on their area of expertise (e.g., policy, communications, evaluation, etc.) to leverage internal resources and create synergy agency-wide around actions to achieve State Public Health Actions' (1305) strategies and performance measures.
- ✓ Develop and implement state-level Memorandum of Understanding/Memorandum of Agreement (MOUs/MOAs) between state departments of health and education to address school based strategies and contain required elements per 1305. Cultivate relationships by sharing decision-making, attending each other's meetings as appropriate, assessing professional development (PD) and technical assistance (TA) needs in the state, collaborating on the development of PD opportunities for local education agencies (LEAs), communicating new policies and procedures, etc.
- ✓ Develop and implement additional MOUs/MOAs or opportunities for collaboration with partners including national non-governmental organizations (NGOs) and their state affiliates/chapters, state organizations, community-based organizations addressing chronic conditions in schools, etc. as appropriate for scope of work.
- ✓ Engage in the development, implementation, and review and revision of relevant state-level policies and procedures with key policy makers and other stakeholders.
- ✓ Consider coordinating a small advisory group for implementation of 1305 comprised of state-level and local-level partners including representation of school nurses or seeking input on planned and proposed project work from an existing group involved in other related activities or projects.
- ✓ Identify a short list of LEAs to target with attention to data related to health and education (e.g., chronic absenteeism data, etc.) across state and within localities and community needs, competing educational priorities among LEAs, LEA policies and areas for improvement, LEA capacity related to 1305 strategies and performance measures, etc.
 - Review relevant state-level and local/community-level data including data from LEAs.
 - Connect with state education departments, local health departments, etc. as appropriate in collecting and reviewing data.
 - Collaborate with state education organizations (state education agencies, state administrator and school board associations, etc.) to assess competing educational priorities as related to those LEAs identified in a short list and help identify target LEAs with attention to administrator and board leadership and support.
 - Connect with national NGOs, state affiliates/chapters of NGOs, etc. as appropriate to learn which LEAs might be involved in their work and ways to leverage resources and services and avoid duplication of effort.
 - Connect with national NGOs and state organizations (e.g., state education department, etc.) to review relevant state-level and LEA policies and identify areas for improvement.



- Consider LEA capacity around school health, including involvement and achievements in prior school health-related projects implemented by state departments of health and/or education and actions related to strategies and performance measures.
- ✓ Personally approach LEAs (including school nurses at the beginning for buy-in, because they carry out much of the work related to chronic conditions) to seek their interest and commitment in order to confirm target LEAs: ask and be understanding about their needs and interests around chronic conditions, communicate what can be offered and how LEAs will benefit, determine how LEA needs and interests intersect with 1305, etc.
 - Identify “champions” within LEAs, one primary point of contact and at least one additional lead point of contact within each LEA (school district).
 - Engage LEA teams, include administrative and board leadership as appropriate and representation from existing school health advisory council or similar group. Key stakeholders include superintendent, school board members, principals and other administrators (e.g., health services director), school nurses, school health services personnel, etc.
 - Be familiar with and highlight key data in addition to findings from a review of relevant policies/procedures and resources as appropriate.
 - Data: Rates of chronic health conditions and obesity, data linking health and academic achievement (e.g., chronic absenteeism and relationship with health/chronic health conditions), rates of action plans to manage chronic conditions (e.g., asthma, food allergy), etc.
 - Review of policies and procedures: relevant state-level policies, model/sample policies, and LEA policies noting their dates of adoption and revisions and how they align with national recommendations, state requirements, and model policies.
 - Resources: CDC publications, tools, and resources, assessment tools, policy guidance resources, etc.
- ✓ Develop and implement MOUs/MOAs with confirmed target LEAs around the project and its timeframe, including how activities and outcomes related to 1305 strategies and performance measures will be tracked and reported.
- ✓ Assess and identify needs to develop and strengthen policies and procedures within LEAs. Encourage involving administrators (e.g., principals, etc.) as appropriate in this assessment process.
- ✓ Collaborate internally and externally with various partners to deliver coordinated PD and TA to LEAs. Examples include:
 - State education departments and other state educational organizations;
 - National NGOs addressing the management of chronic conditions in schools including CDC School Health Branch-funded NGO partners and additional NGOs;
 - State and local-level affiliates/chapters of NGOs;
 - State health care systems/medical centers, hospitals, and clinic affiliates;
 - Universities including personnel and students; and



- Community organizations, local health departments, and agencies assisting with Medicaid and State Children's Health Insurance Programs.
- ✓ Provide PD and TA to support partnerships/collaboration (including working directly with students with chronic conditions and their parents/families) around the following within LEAs:
 - Adoption and implementation of relevant policies and protocols to address the management of chronic conditions in schools and per the 1305 strategies and performance measures.
 - Development of written management plans for students with chronic conditions, including 504 Plans, Individualized Education Plans, Individualized Health Care Plans, or other health/education plans, as appropriate that could also include needs and adaptations relevant to nutrition and physical education and physical activity.
 - Assessment of PD needs and delivery of comprehensive PD in targeted LEAs for primary school health services staff and additional designated school staff.
 - Implementation of protocols to ensure students with a chronic condition that may require daily or emergency management are enrolled in private, state, or federally funded insurance programs if eligible.
 - Coordination with local resources that offer assistance for families to determine insurance eligibility and facilitate enrollment.
 - Assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and with weight-related chronic conditions, including establishing a referral system with external community-based medical providers and community-based nutrition and physical activity providers and services for students identified to have or be at risk for an activity, diet, or weight-related chronic condition.
 - Tracking and reporting of activities and outcomes related to 1305 strategies and performance measures by the primary point(s) of contact with involvement of the LEA team.
- ✓ Partner around ways to publicize the 1305 project and LEA achievements. Examples include:
 - CDC success stories;
 - NACDD What's Working in Chronic Disease Prevention and Control database (<http://www.chronicdisease.org/?databasebase2public>);
 - NGO webinars, case studies, conference sessions, etc.;
 - State departments of health and education websites and communications; and
 - Peer-reviewed journal articles in collaboration with evaluators and others.
- ✓ Explore ways to broaden reach of materials developed for target LEAs with other LEAs across the state and share resources with 1305 school health leads in other states. Examples include:
 - State departments of health and education websites and communications;
 - NACDD Community of Practice calls and resource lists; and
 - National NGO resource distribution lists.