

National Association of Chronic Disease Directors

Chronic Disease Program Integration: A Process, Not an Outcome

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Lorrie Graaf
NACDD Program Integration Consultant

Chronic Disease: An Urgent Problem

As of March 22, 2009, approximately
374,163 people have died from
chronic diseases this year.

Source: CDC

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Program Integration: A NACDD Priority

Strategic Plan Objective
Plan Strategies
Framework Element

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About Chronic Disease Program Integration

Chronic Disease Program Integration NACDD Definition

*“ the strategic alignment of chronic disease
categorical program resources to increase
the effectiveness and efficiency of each
program in a partnership, without
compromising the integrity of categorical
program objectives”*

(Salinsky E, Garsky EA)



Chronic Disease Program Integration Description

- **Focuses on health outcomes** by bringing categorical programs together to form a partnership.
- **Maximizes mutual benefits and opportunities** through strategic alignment of resources that programs bring to the partnership.

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Chronic Disease Program Integration Description (cont'd)

- **Helps increase the effectiveness and efficiency** of categorical programs.
- **Preserves the integrity** of each categorical program's objectives.

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PROGRAM INTEGRATION RECOMMENDATIONS for NACDD

Recommendations for NACDD Action

- Develop/disseminate integration tools
- Provide educational opportunities
- Provide outreach and recruit national partners
- Reach beyond chronic disease programs
- Advocate leadership support
- Assure continuity of integration activities

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CDC NCCDPHP Integration Initiative

Streamlined FOAs

All single program FOAs released in 2008

2009 Collaborative Performance Agreement
Diabetes, Tobacco, and BRFSS
(Pacific Islands)
(Released October, 2008)

Vision:
To nurture and sustain a culture for program integration across chronic disease and health promotion, and other related programs

2009 Collaborative FOAs
BRFSS, Tobacco, Diabetes, and DACH Healthy Communities
All 50 states, the District of Columbia, Puerto Rico, and Virgin Islands
(Released October, 2008)

Negotiated Agreement Demonstration Pilots

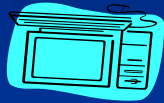
- Pilot states: Colorado, Massachusetts, North Carolina, Wisconsin
 - Heart Disease and Stroke + BRFSS + Tobacco + Diabetes + Comp Cancer + Nutrition, Physical Activity, and Obesity
- Negotiation Process: November-December, 2008
- Implementation start date: January 1, 2009

Program Integration: What Are States Saying? The Results of 3 Surveys

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What program integration issues are relevant to states/ territories?

- Best practices/lessons learned
- Infrastructure, leadership, buy-in
- Funding
- Integrated plans
- Strategies
- Definitions/descriptions
- Data & Evaluation
- Partnerships



Source: 2008 NACDD Survey

What do states/territories want to learn from each other?

- Processes
- Plans
- Tools
- Progress



Source: 2009 ASTHO Meeting

What information/resources do states/territories need from CDC?

- Defined expectations and outcomes
- Support and technical assistance
- Performance measured & bench marks
- Updates and progress report
- Samples of tools, plans, materials
- **Training opportunities and TA**
- **Consistent external messages**



Source: CDC Reports & Contacts

What communication venues could be used to share information?

- On-site Meetings
- Conference Calls
- Webinars/Videoconferencing
- Websites Postings/Interactive Sharing
- Print Media



Program Integration: What Are States Doing?

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Working to Improve Health Outcomes

- Building on common interests
- Finding points of linkage
- Leveraging resources

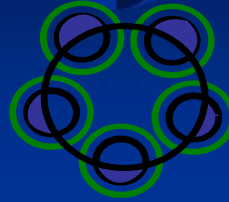
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State Examples

- Training Across Programs
- Forming Teams & Partnerships
- State Categorical Plans
- Joint Planning/Priority Setting
- Joint Project Implementation

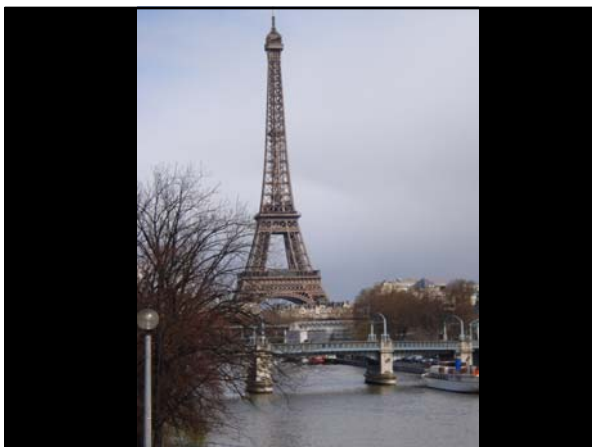
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Program Integration Learning Community ASTHO, CDC, NACDD



Learning Community Components

PROGRAM INTEGRATION
Webinars
Interactive Workspace (Internet)
Networking Calls



For Additional Information

🌐 2872 Woodcock Blvd. Suite 220
Atlanta, Georgia 30341

☎ (770) 458-7400

🌐 www.chronicdisease.org

✉ Igraaf@chronicdisease.org

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