The Community Guide – Public Health Accreditation Board Crosswalk:
A Tool to Support Accreditation and
Increase Use of Evidence-Based Approaches

Table 1:
Matching Evidence-Based Interventions from The Community Guide
to PHAB Standards and Measures

Developed collaboratively by the National Association of County and City Health Officials and Centers for Disease Control and Prevention (Community Guide Branch, Division of Epidemiology, Analysis, and Library Services, Center for Surveillance, Epidemiology, and Laboratory Services; and the Division of Public Health Performance Improvement, Office for State, Tribal, Local, and Territorial Support) under funding announcement CDC-RFA-HM08-805301SUPP10.
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Overview

The Community Guide – Public Health Accreditation Board Crosswalk

Overview

Public Health Accreditation and The Community Guide

Public health department accreditation aims to improve the quality of practice and performance of public health departments. The Public Health Accreditation Board (PHAB; www.phaboard.org) has been established as a national voluntary accreditation program for state, tribal, local, and territorial health departments.

The PHAB Standards and Measures document serves as the official standards, measures, required documentation, and guidance blueprint for national public health department accreditation. The document encourages, and sometimes requires, the use of evidence-based approaches in public health, given their importance in helping health departments achieve their public health goals. Approaches are considered to be evidence-based if the existing data about them—from research studies, program evaluation, or both—shows that they are effective in achieving their intended outcomes. Systematic reviews are among the strongest types of evidence. One evidence-based resource cited in the PHAB guidance is The Guide to Community Preventive Services (The Community Guide; www.thecommunityguide.org). The Community Guide provides evidence-based recommendations about public health programs, services, and policies (interventions) that improve health. These recommendations are based on rigorous systematic reviews of all available evidence.

Purpose and Structure of the Community Guide – PHAB Crosswalk

The purpose of the Community Guide – PHAB Crosswalk is to help health departments identify evidence-based interventions from The Community Guide whose implementation could help document conformity with PHAB standards and measures. The Crosswalk consists of two tables that show how PHAB domains, standards, and measures relate to evidence-based recommendations in The Community Guide, and vice versa.

- The first table cross-references PHAB domains, standards, and measures with related interventions from The Community Guide that could help provide documentation for accreditation.

- The second table may help accreditation preparation staff to engage with program staff that may be unfamiliar with PHAB. The table is searchable by Community Guide topic area, identifying the PHAB measures that relate to each of the evidence-based interventions within the Community Guide topic.
Overview

Using the Crosswalk

It is important to read the instructions to ensure that you use the tables in ways that can provide adequate documentation for PHAB. The instructions are set up as answers to a list of questions:

- What is national public health department accreditation?
- What is The Community Guide?
- What are the types of recommendations and other findings in The Community Guide?
- How can you use The Community Guide?
- How can the Crosswalk be helpful in preparing for accreditation?
- What does the Crosswalk provide?
- What other information from The Community Guide might assist you with accreditation and continuous improvement?
- How can you contribute to building the evidence base for public health?

The Crosswalk will be updated on a regular basis to ensure that it reflects new and updated evidence-based recommendations provided in The Community Guide as well as modifications to PHAB domains, standards, and measures. Please visit The Community Guide (www.thecommunityguide.org/uses/phimprovement) to access the most recent version.
Instructions for Use

What is national public health department accreditation?

National public health department accreditation consists of adoption of a set of standards, a process to measure health department performance against those standards, and recognition for those departments that meet the standards. PHAB’s accreditation program aims to protect and improve Americans’ health by helping public health departments assess their current capacity and continuously improve the quality of their services.

As described in the PHAB Standards and Measures document, PHAB requires health departments applying for accreditation to submit documentation as evidence of their activities within 12 domains.

- The domains address the 10 Essential Public Health Services, plus management and administration, and governance.
- Each domain is associated with a number of standards.
- Each standard, in turn, is associated with a number of measures that provide a way to evaluate whether the standard is met.
- For each measure, information is provided about the documentation required to demonstrate that a health department conforms to the measure.
- Although most measures are the same for all (A) health departments, some are specific to state (S), local (L), or Tribal (T) health departments.

A complete overview and details about public health accreditation and the standards and measures for each domain can be accessed at www.phaboard.org.

What is The Community Guide?

The Community Guide (www.thecommunityguide.org) is an essential resource for people who want to know what works in public health. The Community Guide provides evidence-based recommendations about community-based programs, services, and policies (interventions) that are effective in improving health. These recommendations are made by the Community Preventive Services Task Force (Task Force), an independent, nonfederal, uncompensated panel of public health and prevention experts appointed by the Director of the Centers for Disease Control and Prevention (CDC). The Task Force was established in 1996 and is mandated by Congress to provide recommendations for a wide range of U.S. decision makers.

The Task Force makes its recommendations based on systematic reviews of all pre-existing, relevant evidence (both research-tested and practice-based).
Instructions for Use

- Each systematic review is conducted under the oversight of the Task Force by a coordination team consisting of Task Force members; CDC, other federal and non-federal scientists; practitioners (e.g., health department staff, educators, city planners); policy makers; and other stakeholders such as businesses, voluntary health organizations, and professional organizations.

- To provide users with information that will help them determine if the program, service, or policy being reviewed fits their needs and situations, each systematic review evaluates the effectiveness of the intervention, and assesses whether effectiveness changes in different settings, with different populations, or when delivered in different ways.

- For all interventions the Task Force finds to be effective, a systematic review of the economic evidence is also undertaken to assess the intervention’s costs, cost-effectiveness, and return on investment.

In all aspects of its work, the Task Force obtains input from its official Liaison agencies and organizations (including the Association of State and Territorial Health Officials, National Association of County and City Health Officials, and National Association of Local Boards of Health). A full list of Liaisons to the Task Force can be found at www.thecommunityguide.org. CDC is mandated to provide ongoing administrative, research, and technical support for all Task Force operations.

The Community Guide contains hundreds of Task Force recommendations and findings, along with the systematic reviews on which they are based. Up-to-date information on all Task Force findings and recommendations can be found at www.thecommunityguide.org.

What are the types of recommendations and other findings in The Community Guide?

The Task Force places each intervention that it evaluates into one of three categories:

- **Recommended** - Adequate evidence (Strong or Sufficient) exists to show that the intervention is effective.

- **Recommended against** - Adequate evidence (Strong or Sufficient) exists to show that the intervention is harmful or not effective.

- **Insufficient evidence** – Too little evidence exists to determine whether or not the intervention is effective. A finding of “insufficient evidence” does not mean the intervention does not work. It means that not enough studies are available, or the results of available studies are too inconsistent to make a firm conclusion about the intervention’s effectiveness.
How can you use The Community Guide?

The Community Guide provides you with menus of options for meeting your public health goals. Each Community Guide systematic review team identifies the range of preventive programs, services, and policies that can be used to address a health issue or other topic (topics include risk factors; diseases, conditions, and injuries; age groups; and settings).

- The Task Force approves a priority work order, and the interventions on the list are evaluated in turn.

- The result is a “menu” of evidence-based programs, services, and policies. From this menu, you can select one or more options that are best suited to your population, setting, preferences, and available resources.

Since the Task Force is Congressionally mandated to develop recommendations that are useful to a wide range of U.S. decision makers, it must consider variations in the way public health interventions are developed and delivered. As a result, the Task Force evaluates types of interventions (e.g., mass media strategies) rather than specific interventions (e.g., one specific media campaign). When the Task Force recommends a type of intervention, it is saying that the intervention is effective even if executed in slightly different ways.

Information on the intervention’s typical components, settings, and target audiences is provided in a) the definition of the intervention and b) the Task Force Finding and Rationale Statement. The Task Force Finding and Rationale Statement also notes where evidence is lacking. It is therefore absolutely critical that you read not only the title of the intervention, but also the intervention definition and the Task Force Finding and Rationale Statement. This is the only way you can ensure that any program, service, or policy you are using or plan to develop is similar enough to what was recommended by the Task Force that you can

- Expect to see similar results.
- Claim that you are using an evidence-based approach recommended by the Task Force.

The Crosswalk provides a link to this information for all Community Guide interventions that are listed.

How can the Crosswalk be helpful in preparing for accreditation?

The Crosswalk shows the connections between Community Guide evidence-based interventions and PHAB measures that could result in documentation required to help demonstrate conformity with those PHAB measures.

1. It identifies the two PHAB measures that require the use of evidence-based or promising practices and that specifically cite The Community Guide as a resource:
5.2.2 S,L (Domain 5, Standard 2, Measure 2 for state and local health departments): ‘Produce a (state/community) health improvement plan as a result of the health improvement planning process.’

10.1.1 A (Domain 10, Standard 1, Measure 1 for all health departments): ‘Identify and use applicable evidence-based and/or promising practices when implementing new or revised processes, programs and/or interventions.’

2. It shows the large number of other connections between Community Guide evidence-based interventions and PHAB measures. Connections exist within most of the PHAB domains.

**It is important** to keep the following in mind as you consider how the Crosswalk can help you prepare for accreditation:

- You will not necessarily ensure conformity with a PHAB measure simply by selecting one or two Community Guide interventions from the Crosswalk with the sole focus of meeting the required PHAB documentation. Instead
  
  - Preparing for accreditation should involve identifying the documentation that
    
    a) Best reflects what your health department is actually doing—its capacities, processes, programs, and policies to implement the 10 Essential Public Health Services, and

    b) Best demonstrates conformity with the PHAB standards and measures.

- Many of the PHAB measures are meant to be considered on a departmental level, looking at whether there are processes, protocols, and policies in place across your department that will meet the intent of the measure.

Pay close attention to the guidance provided in the PHAB Standards and Measures document to make sure you select the most appropriate examples for each measure.

- The Community Preventive Services Task Force is charged with evaluating the effectiveness of the full range of community-based prevention programs, services, and policies that can affect public health outcomes. This includes interventions within the jurisdiction of health departments as well as interventions in areas such as mental health, substance abuse, human services, and social services in which some health departments may participate, but that are typically within the scope of other agencies, organizations, or government departments.

Although this Crosswalk includes interventions from these areas for completeness, PHAB’s scope of accreditation authority does not extend to these areas, and documentation from these areas will not generally be accepted for accreditation purposes. Think carefully, therefore, about which of your activities provide the best examples of public health programs according to PHAB’s current guidance (p. 6).
Instructions for Use

What does the Crosswalk provide?

The Crosswalk provides two tables that match PHAB measures and required documentation with evidence-based interventions from The Community Guide. Both tables provide online links for all included Community Guide interventions.

- Table 1 cross-references individual PHAB domains, standards, and measures with related interventions from The Community Guide that could help provide documentation of conformity with PHAB measures.
- Table 2 is searchable by Community Guide topic area, identifying the PHAB measures that relate to each of the Community Guide interventions within that topic.

Table 1: Matching Evidence-based Interventions from The Community Guide to PHAB Domains, Standards and Measures

This table identifies evidence-based interventions from The Community Guide that can help demonstrate conformity with PHAB measures. The PHAB domain, standard, and measure appear at the top of each page. Below them, the left-hand column lists the documentation that PHAB requires for the measure. Community Guide interventions relevant to the required documentation are listed in the right-hand column.

There are three types of connections through which Community Guide interventions could be relevant to the required documentation for a PHAB measure: (1) direct; (2) indirect; and (3) broad. Table 1 includes all three types.

1. **Direct:**

   A direct relationship occurs when

   a) The intent of the intervention, its components, and its related Task Force recommendation align with the intent of the PHAB domain, standard, and measure; and

   b) The aims or main components of the intervention are mentioned in the purpose and guidance for the PHAB measure.

   Required documentation for PHAB will be obtained because either

   c) It is a typical part of carrying out that intervention, or

   d) It provides one illustration of a broader series of required processes or practices being in place at the health department.

   For example, the Community Guide intervention ‘Community mobilization with additional interventions to restrict minors’ access to tobacco products’ relates directly to PHAB Measure 4.2.1 A: ‘Engage the community about policies and strategies that will promote the public’s
This is because the Community Guide intervention requires the community engagement that is the subject of PHAB 4.2.1 A.

All direct connections are listed in Table 1.

2. **Indirect:**

An indirect relationship occurs when a Community Guide intervention is not fully aligned with a PHAB measure’s purpose, but the intent of the PHAB measure may be addressed as part of carrying out the intervention. If this is the case in the way your health department delivers the intervention, then implementing that intervention could help you obtain the required PHAB documentation.

For example, in addition to having a direct connection with a number of Community Guide interventions (as described above), PHAB measure 4.2.1 A is also indirectly related to a number of Community Guide interventions. These include the Community Guide intervention ‘Smoke-free policies to reduce tobacco use and secondhand smoke exposure,’ as well as all of the other Community Guide interventions listed in the Crosswalk alongside PHAB 5.1.3 A: ‘Inform governing entities, elected officials, and/or the public of potential health impacts, both intended and unintended, from current and/or proposed policies.’ This is because although community engagement—the intent of 4.2.1 A—is not a specific aim or main component of the Community Guide interventions listed for 5.1.3 A, the community would likely be engaged to gain support for the Community Guide interventions listed for 5.1.3 A.

To avoid incorrect assumptions, the Crosswalk only includes indirect connections likely to occur in most health departments. These indirect connections appear in the table after direct connections.

You might identify other indirect relationships where the intent of a PHAB measure is met in the particular way that you have implemented a Community Guide intervention. If you decide to use any of these indirect connections in your PHAB documentation, be sure that the connections with the PHAB measures are clear and meaningful.

3. **Broad:**

There are four PHAB measures for which it is recommended that you look broadly at all Community Guide evidence-based interventions. Implementing any Community Guide recommendations may help you obtain the required PHAB documentation.

1) PHAB measure 10.1.1 A: ‘Identify and use applicable evidence-based and/or promising practices when implementing new or revised processes, programs, and/or interventions’ specifically cites The Community Guide as a source for illustrating that the health department is using evidence-based practices.

2) PHAB measure 5.2.2 S, L: ‘Produce a (state/community) health improvement plan as a result of the health improvement planning process’ requires improvement strategies in the health improvement
Instructions for Use

plan to be evidence-based or promising practices and specifically cites The Community Guide as a resource.²

3) For PHAB measure 9.1.3 A: ‘Use a process to determine and report on achievement of goals, objectives, and measures set by the performance management system,’ outputs from Community Guide reviews can help you set performance goals, objectives, and measures, and evaluate whether you are meeting your goals. These outputs are available for all Community Guide evidence-based interventions and include

   a) Logic models showing how multiple reviews address a health issue.

   b) Analytic frameworks that show how an intervention relate to outcomes.

   c) Estimation of the amount of impact (i.e., the size of the effect) you can expect if you implement a Task Force-recommended intervention.

4) For PHAB measure 9.2.1 A: ‘Establish a quality improvement program based on organizational policies and direction,’ consulting all of the findings in The Community Guide can help you to assess whether your current practices are evidence-based, and to prioritize and select improvement strategies. Outputs from Community Guide reviews can also help you to set goals, objectives, and measures, and to monitor your progress. (See list of outputs above for 9.1.3 A.)

Table 2: Matching PHAB Domains, Standards and Measures to Community Guide Topics and Evidence-based Interventions

This table lets you search by Community Guide topic area and identify the PHAB measures that relate to each of the Community Guide interventions within that topic. The Community Guide topic area appears at the top of the page. Immediately below the topic, the topic-relevant PHAB domains and standards are listed. Below that, in the left-hand column of the table, the evidence-based interventions related to that Community Guide topic are listed. The PHAB measures appear in the right-hand column, along with details about the required documentation for the measures.

Because this table is structured according to public health issues, it may help accreditation preparation staff (e.g., Accreditation Coordinator, Accreditation Team)⁶ to engage with program staff that might not be as familiar with PHAB domains, standards, and measures.

Table 2 can also be particularly helpful in showing how evidence-based interventions you may already be doing may help you meet specific PHAB measures.

For example, if your health department is already using the Task Force-recommended intervention of ‘Increasing Cancer Screening: Small media’ (small media include videos and printed materials such as letters, brochures, and newsletters) to increase breast, cervical, or colorectal cancer screening, you may be able to use existing documentation you obtained through planning or using the small media to help meet PHAB measures 3.1.1 A and 3.1.2 A.
What other information from The Community Guide might assist you with accreditation and continuous improvement?

Given the considerable length of the Crosswalk, and since its focus is on identifying evidence-based interventions, the tables in the Crosswalk only include interventions recommended by the Task Force. Health departments may also benefit from looking at interventions that the Task Force recommended against, and interventions for which there was insufficient evidence for the Task Force to recommend for or against.

- **Interventions the Task Force Recommended Against:**
  
  Knowing about interventions the Task Force has recommended against (because they were not effective or they caused harms), can help you in at least two ways:

  - If your health department is using, or thinking about using one of these interventions, you might consider implementing another intervention instead for which there is evidence (in The Community Guide or elsewhere) of effectiveness.
  
  - Knowing about these interventions can also help you not to inadvertently include documentation about ineffective or harmful interventions as support for PHAB measures that require use of evidence-based approaches.

- **Interventions for Which the Task Force Found Insufficient Evidence to Recommend For or Against:**

  Remember that an insufficient evidence finding does not mean that an intervention does not work. Instead, it means that insufficient evidence is currently available to determine whether or not the intervention works. Information on why the Task Force came to this conclusion is always provided in the Task Force Finding and Rationale Statement for each review. You might use information about an insufficient evidence finding in a number of ways:

  - If you see that an intervention you are using or thinking about using has an insufficient evidence finding, and the intervention is expensive, resource-intensive, or does not fit well with your other interventions, you might try replacing it with another intervention that has documented evidence of effectiveness. You might also choose to select a different example for your PHAB documentation.

  - If you see that an intervention you are using or thinking about using has an insufficient evidence finding, and if there are no Task Force-recommended intervention options that fit your needs and resources, then you might choose to implement this intervention. You might also decide to feature this example in your PHAB documentation. In all such cases, it will be very important for you to conduct a careful evaluation of whether the intervention is working as you intended.
Instructions for Use

Information on all the interventions that the Task Force recommended against, and all interventions with an insufficient evidence finding is available on the Community Guide website (www.thecommunityguide.org). The website also includes a complete list of all Task Force recommendations and other findings.

How can you contribute to building the evidence base for public health?

Sometimes there is not enough consistent, high quality evidence to make a solid recommendation for a particular intervention, but there might be some evidence suggesting that the intervention appears to be effective in at least some situations. Such interventions are sometimes referred to as “promising practices.” This may be the case for

- Some interventions with insufficient evidence findings from the Task Force, where the available studies showed some positive effects, but there were too few studies to determine if the positive effects would be seen consistently across settings and populations. Information on why the Task Force came up with an insufficient evidence finding is always included in the Task Force Finding and Rationale Statement for the intervention.

- Some interventions that have published findings but whose effectiveness has not yet been evaluated by the Task Force or others.

- Some common interventions or new innovations whose findings may not yet be published or otherwise available.

PHAB encourages the use of promising practices in the Standards and Measures documentation guidance. A promising practice is, by definition, “promising.” It may or may not be effective in different situations. If you choose to use a promising practice, it is important that you evaluate it carefully—to determine if it is having its intended effect in your jurisdiction.

Community Guide reviews include both research studies and practice-based evidence (e.g., evaluations of existing programs). The Task Force is particularly interested in knowing which interventions work for different populations and in different settings. If you publish the results of your evaluation in the peer-reviewed literature or in another format that can be used by the Task Force, your evaluation could be included in future Community Guide reviews. In this way, not only will you evaluate the effectiveness of the intervention in your jurisdiction, but your evaluation may contribute to building the overall evidence base for public health.
References


Table 1: Matching Evidence-Based Interventions from The Community Guide to PHAB Standards and Measures
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

Domain 1:
Conduct and disseminate assessments focused on population health status and public health issues facing the community

*Standard 1.2:*
Collect and maintain reliable, comparable, and valid data that provide information on conditions of public health importance and on the health status of the population

*Measure 1.2.1 A:*
Maintain a surveillance system for receiving reports 24/7 in order to identify health problems, public health threats, and environmental public health hazards

<table>
<thead>
<tr>
<th>1.2.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
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<tbody>
<tr>
<td>1. Processes and/or protocols to maintain the comprehensive collection, review, and analysis of data on multiple health conditions from multiple sources</td>
<td>Vaccines:</td>
</tr>
<tr>
<td>2. Processes and/or protocols to assure data are maintained in a secure and confidential manner</td>
<td>• Immunization information systems</td>
</tr>
<tr>
<td>3. Current 24/7 contact information</td>
<td></td>
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<tr>
<td>4. Reports of testing 24/7 contact systems</td>
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</tr>
</tbody>
</table>
**Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures**

**Standard 1.3:**

*Analyze public health data to identify trends in health problems, environmental public health hazards, and social and economic factors that affect the public’s health*

**Measure 1.3.1 A:**

*Analyze and draw conclusions from public health data*

<table>
<thead>
<tr>
<th>1.3.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
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<tbody>
<tr>
<td>1. Reports containing analysis of data collected and conclusions from review of the data with the following characteristics:</td>
<td>Vaccines:</td>
</tr>
<tr>
<td>a) Reports are within defined timelines based on policy guidelines and/or evidence-based practice</td>
<td>• <em>Immunization information systems</em></td>
</tr>
<tr>
<td>b) Reports compare data to other agencies and/or state or nation, and/or other Tribes, and/or similar data over time to provide trend analysis</td>
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</tr>
<tr>
<td>2. Documentation of meetings to review and discuss selected data reports</td>
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[www.thecommunityguide.org/uses/phimprovement](http://www.thecommunityguide.org/uses/phimprovement)
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

**Standard 1.4:**
Provide and use the results of health data analysis to develop recommendations regarding public health policy, processes, programs or interventions

**Measure 1.4.1 A:**
Use data to recommend and inform public health policy, processes, programs, and/or interventions

<table>
<thead>
<tr>
<th>1.4.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Data used to inform public health policy, processes, programs and/or interventions</td>
<td>Vaccines:</td>
</tr>
<tr>
<td></td>
<td>• Immunization information systems</td>
</tr>
</tbody>
</table>
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

| Domain 2: Investigate health problems and environmental public health hazards to protect the community |
| Standard 2.2: Contain/mitigate health problems and environmental public health hazards |
| Measure 2.2.1 A: Maintain protocols for containment/mitigation of public health problems and environmental public health hazards |

<table>
<thead>
<tr>
<th>2.2.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Current written protocol that address containment/mitigation of public health hazards | **Emergency Preparedness:**  
  - [School Dismissals to Reduce Transmission of Pandemic Influenza](#) |
### Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

#### Standard 2.2: 
**Contain/mitigate health problems and environmental public health hazards**

#### Measure 2.2.2 A: 
Demonstrate a process for determining when the All Hazards Emergency Operations Plan (EOP) will be implemented

<table>
<thead>
<tr>
<th>2.2.2 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Infectious disease outbreak protocols describing processes for the review of specific situations and for determining the activation of the All Hazards Emergency Operations Plan</td>
<td>Emergency Preparedness:</td>
</tr>
<tr>
<td></td>
<td>• <strong>School Dismissals to Reduce Transmission of Pandemic Influenza</strong></td>
</tr>
<tr>
<td>2. Environmental public health protocols describing processes for the review of specific situations and for determining the initiation of the All Hazards Emergency Operations Plan</td>
<td></td>
</tr>
<tr>
<td>3. Cluster evaluation protocols describing processes for the review of specific situations and for determining initiation of the All Hazards Emergency Operations Plan</td>
<td></td>
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</tbody>
</table>
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

### Domain 3:
Inform and educate about public health issues and functions

### Standard 3.1
Provide health education and health promotion policies, programs, processes, and interventions to support prevention and wellness

### Measure 3.1.1 A:
Provide information to the public on protecting their health

<table>
<thead>
<tr>
<th>3.1.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Documentation of the provision of information on health risks, health behaviors, prevention, or wellness | **Adolescent Health:**  
- Person-to-person interventions to improve caregivers’ parenting skills  
- Prevention of HIV/AIDS, other STIs and Pregnancy: Group-based comprehensive risk reduction interventions for adolescents  
- Youth Development Behavioral Interventions: Interventions coordinated with community service to reduce sexual risk behaviors in adolescents  |
| 2. Documentation that indicates how information was gathered from the target group during the development of the educational material/message | **Alcohol:**  
- Electronic screening and brief interventions (e-SBI)  |
| 3. Documentation of steps taken with Tribal, state, and/or local health departments; and/or community partners to promote coordinated health education messages | **Asthma:**  
- Home-based multi-trigger, multicomponent environmental interventions for children and adolescents  |

### Birth Defects:
- Community-wide campaigns to promote the use of folic acid supplements

### Cancer:
- Client-Oriented Screening Interventions: Group education  
- Client-Oriented Screening Interventions: One-on-one education  
- Client-Oriented Screening Interventions: Small media  
- Preventing Skin Cancer: Education and policy approaches in outdoor recreation settings  
- Preventing Skin Cancer: Education and policy approaches in primary and middle school settings  
- Preventing Skin Cancer: Multicomponent community-wide interventions

### Diabetes:
- Self-Management Education: In community gathering places – adults with Type 2 Diabetes  
- Self-Management Education: In the home – children and adolescents with Type 1 Diabetes

### Health Communications and Marketing:
- Health communication campaigns that include mass media and health-related product distribution

### HIV/AIDS, STIs, Pregnancy:
- Interventions for Adolescents: Group-based comprehensive risk reduction interventions for adolescents  
- Interventions for Adolescents: Youth development behavioral interventions
<table>
<thead>
<tr>
<th>3.1.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>coordinated with community service to reduce sexual risk behaviors in adolescents</td>
</tr>
<tr>
<td></td>
<td>• <strong>Interventions for Men Who Have Sex with Men: Community-level behavioral interventions</strong></td>
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<tr>
<td></td>
<td>• <strong>Interventions for Men Who Have Sex with Men: Group-level behavioral interventions</strong></td>
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<td></td>
<td>• <strong>Interventions for Men Who Have Sex with Men: Individual-level interventions</strong></td>
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<td><strong>Motor Vehicle:</strong></td>
<td><strong>Interventions for Men Who Have Sex with Men: Community-level behavioral interventions</strong></td>
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<td></td>
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<td></td>
<td><strong>Interventions for Men Who Have Sex with Men: Individual-level interventions</strong></td>
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<td></td>
<td><strong>Reducing Alcohol-Impaired Driving: Mass media campaigns</strong></td>
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<td></td>
<td><strong>Reducing Alcohol-Impaired Driving: Multicomponent interventions with community mobilization</strong></td>
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<td></td>
<td><strong>Reducing Alcohol-Impaired Driving: School-based instructional programs</strong></td>
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<tr>
<td></td>
<td><strong>Use of Child Safety Seats: Community-wide information and enhanced enforcement campaigns</strong></td>
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<tr>
<td></td>
<td><strong>Use of Child Safety Seats: Distribution and education programs</strong></td>
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<tr>
<td></td>
<td><strong>Use of Child Safety Seats: Incentive and education programs</strong></td>
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<tr>
<td><strong>Obesity:</strong></td>
<td><strong>Interventions in Community Settings: Behavioral interventions to reduce screen time</strong></td>
</tr>
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<td></td>
<td><strong>Interventions in Community Settings: Technology-supported multi-component coaching or counseling interventions to reduce weight and maintain weight loss</strong></td>
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<td></td>
<td><strong>Interventions in Community Settings: Worksite programs</strong></td>
</tr>
<tr>
<td><strong>Physical Activity:</strong></td>
<td><strong>Behavioral and Social Approaches: Enhanced school-based physical education</strong></td>
</tr>
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<td></td>
<td><strong>Campaigns and Informational Approaches: Community-wide campaigns</strong></td>
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<tr>
<td><strong>Tobacco:</strong></td>
<td><strong>Community mobilization with additional interventions to restrict minors’ access to tobacco products</strong></td>
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<td></td>
<td><strong>Mass-reach health communication interventions</strong></td>
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<td></td>
<td><strong>Mobile phone-based cessation interventions</strong></td>
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<td></td>
<td><strong>Provider reminders with provider education</strong></td>
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<td></td>
<td><strong>Quitline interventions</strong></td>
</tr>
<tr>
<td><strong>Vaccines:</strong></td>
<td><strong>Community-based interventions implemented in combination</strong></td>
</tr>
<tr>
<td><strong>Violence:</strong></td>
<td><strong>Early childhood home visitation to prevent child maltreatment</strong></td>
</tr>
<tr>
<td></td>
<td><strong>School-based programs to prevent violence</strong></td>
</tr>
</tbody>
</table>
### Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

**Standard 3.1:**

Provide health education and health promotion policies, programs, processes, and interventions to support prevention and wellness

**Measure 3.1.2 A:**

Implement health promotion strategies to protect the population from preventable health conditions

PHAB specifically requires the use of strategies and interventions that are evidence-based, rooted in strong theory, practice-based evidence, and/or promising practice when demonstrating this measure.

<table>
<thead>
<tr>
<th>3.1.2 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Documentation of implemented health promotion strategies | Adolescent Health:  
- Prevention of HIV/AIDS, other STIs and Pregnancy: Group-based comprehensive risk reduction interventions for adolescents  
- Youth Development Behavioral Interventions: Interventions coordinated with community service to reduce sexual risk behaviors in adolescents |
| 2. Documentation that indicates how input and/or feedback was gathered from the target audience during the development of the health promotion strategy | Alcohol:  
- Electronic screening and brief interventions (e-SBI) |
| 3. Documentation that strategies have been implemented in collaboration with stakeholders and/or partners | Asthma:  
- Home-based multi-trigger, multicomponent interventions for children and adolescents |
| | Birth Defects:  
- Community-wide campaigns to promote the use of folic acid supplements |
| | Cancer:  
- Client-Oriented Screening Interventions: Small Media  
- Client-Oriented Screening Interventions: Group education  
- Client-Oriented Screening Interventions: One-on-one education  
- Preventing Skin Cancer: Education and policy approaches in outdoor recreation settings  
- Preventing Skin Cancer: Education and policy approaches in primary and middle school settings  
- Preventing Skin Cancer: Multicomponent community-wide interventions |
| | Diabetes:  
- Self-Management Education: In community gathering places – adults with Type 2 Diabetes  
- Self-Management Education: In the home – children and adolescents with Type 1 Diabetes |
| | Health Communication & Social Marketing  
- Health communication campaigns that include mass media and health-related product distribution |
| | HIV/AIDS, STIs, Pregnancy:  
- Interventions for Adolescents: Group-based comprehensive risk reduction interventions for adolescents  
- Interventions for Adolescents: Interventions coordinated with community service to reduce sexual risk behaviors in adolescents  
- Interventions for Men Who Have Sex with Men: Community-level behavioral |
<table>
<thead>
<tr>
<th>3.1.2 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
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<tbody>
<tr>
<td></td>
<td><strong>Interventions</strong></td>
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<tr>
<td></td>
<td>• Interventions for Men Who Have Sex with Men: Group-level behavioral interventions</td>
</tr>
<tr>
<td><strong>Motor Vehicle:</strong></td>
<td>• Reducing Alcohol-Impaired Driving: Mass media campaigns</td>
</tr>
<tr>
<td></td>
<td>• Use of Child Safety Seats: Community-wide information and enhanced enforcement campaigns</td>
</tr>
<tr>
<td></td>
<td>• Use of Child Safety Seats: Distribution and education programs</td>
</tr>
<tr>
<td></td>
<td>• Use of Child Safety Seats: Incentive and education programs</td>
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<tr>
<td><strong>Obesity:</strong></td>
<td>• Interventions in Community Settings: Behavioral interventions to reduce screen time</td>
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<tr>
<td></td>
<td>• Interventions in Community Settings: Technology-supported multi-component coaching or counseling interventions to reduce weight and maintain weight loss</td>
</tr>
<tr>
<td><strong>Physical Activity:</strong></td>
<td>• Campaigns and Informational Approaches: Community-wide campaigns</td>
</tr>
<tr>
<td></td>
<td>• Environmental and Policy Approaches: Point-of-decision prompts to encourage use of stairs</td>
</tr>
<tr>
<td><strong>Tobacco:</strong></td>
<td>• Mass-reach health communication interventions</td>
</tr>
<tr>
<td></td>
<td>• Mobile phone-based cessation interventions</td>
</tr>
<tr>
<td></td>
<td>• Provider reminders with provider education</td>
</tr>
<tr>
<td></td>
<td>• Quitline interventions</td>
</tr>
<tr>
<td><strong>Vaccines:</strong></td>
<td>• Community-based interventions implemented in combination</td>
</tr>
</tbody>
</table>
Domain 4:
Engage with the community to identify and address health problems

Standard 4.2:
*Promote the community’s understanding of and support for policies and strategies that will improve the public’s health*

Measure 4.2.1 A:
*Engage the community about policies and strategies that will promote the public’s health*

<table>
<thead>
<tr>
<th>4.2.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Engagement with members of the community that will be affected by a policy and/or strategy to promote the public’s health | HIV/AIDS, STIs, Pregnancy:  
- [Interventions for Men Who Have Sex with Men: Community-level behavioral interventions](#)  
Motor Vehicle:  
- [Reducing Alcohol-Impaired Driving: Multicomponent interventions with community mobilization](#)  
Tobacco:  
- [Community mobilization with additional interventions to restrict minors’ access to tobacco products](#) |

It may also be helpful to look at the interventions listed alongside measure 5.1.3 A: Inform governing entities, elected officials and/or the public of potential public health impacts, both intended and unintended, from current and/or proposed policies. Although community engagement—the intent of 4.2.1 A—is not a specific aim or main component of the Community Guide interventions listed for 5.1.3 A, the community would likely be engaged to gain support for them. If that is the case in your jurisdiction for one or more of the interventions listed for 5.1.3 A, then they may help you obtain the required documentation for this measure.
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

**Standard 4.2:**

*Promote the community’s understanding of and support for policies and strategies that will improve the public’s health*

**Measure 4.2.2 A:**
Engage with governing entities, advisory boards, and elected officials about policies and/or strategies that will promote the public’s health

<table>
<thead>
<tr>
<th>4.2.2 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Engagement of the governing entity, advisory boards, and/or elected officials about policies and/or strategies that will promote the public’s health | **Motor Vehicle:**  
- Reducing Alcohol-Impaired Driving: Multicomponent interventions with community mobilization  
**Tobacco:**  
- Community mobilization with additional interventions to restrict minors’ access to tobacco products |

It may also be helpful to look at the interventions listed alongside measure 5.1.3 A: Inform governing entities, elected officials and/or the public of potential public health impacts, both intended and unintended, from current and/or proposed policies. Although engaging with the governing entity, advisory boards, and/or elected officials—the intent of 4.2.2 A—is not a specific aim or main component of the Community Guide interventions listed for 5.1.3 A, such engagement would likely occur as part of gaining support for most of them. If that is the case in your jurisdiction for one or more of the interventions listed for 5.1.3 A, then they may help you obtain the required documentation for this measure.
### Domain 5:
Develop public health policies and plans

**Standard 5.1:**
Serve as a primary and expert resource for establishing and maintaining public health policies, practices, and capacity

**Measure 5.1.3 A:**
Inform governing entities, elected officials and/or the public of potential public health impacts, both intended and unintended, from current and/or proposed policies

*PHAB specifically requires the use of evidence-based practices when demonstrating this measure.*

<table>
<thead>
<tr>
<th>5.1.3 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Documentation of the health department informing policy makers and/or the public about potential public health impacts of policies that are being considered or are in place | **Alcohol:**  
- Dram shop liability  
- Increasing alcohol taxes  
- Maintaining limits on days of sale  
- Maintaining limits on hours of sale  
- Regulation of alcohol outlet density  

**Cancer:**  
- Preventing Skin Cancer: Education and policy approaches in outdoor recreation settings  
- Preventing Skin Cancer: Education and policy approaches in primary and middle school settings  

**Emergency Preparedness:**  
- School Dismissals to Reduce Transmission of Pandemic Influenza  

**Health Equity:**  
- Education Programs and Policies: Comprehensive, center-based programs for children of low-income families  
- Education Programs and Policies: Full-day kindergarten  

**Mental Health and Mental Illness:**  
- Mental Health Benefits Legislation  

**Motor Vehicle:**  
- Reducing Alcohol-Impaired Driving: .08% Blood alcohol concentration laws  
- Reducing Alcohol-Impaired Driving: Ignition interlocks  
- Reducing Alcohol-Impaired Driving: Lower BAC laws for young or inexperienced drivers  
- Reducing Alcohol-Impaired Driving: Maintaining current legal minimum drinking age  
- Reducing Alcohol-Impaired Driving: Publicized sobriety checkpoints programs  
- Use of Child Safety Seats: Laws mandating use  
- Use of Safety Belts: Laws mandating use  
- Use of Safety Belts: Primary (vs. secondary) enforcement laws  

**Oral Health:**
**Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures**

<table>
<thead>
<tr>
<th>5.1.3 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Physical Activity:</td>
<td>• Preventing Dental Caries: Community Water Fluoridation</td>
</tr>
<tr>
<td></td>
<td>• Behavioral and Social Approaches: Enhanced school-based physical education</td>
</tr>
<tr>
<td></td>
<td>• Environmental and Policy Approaches: Community-scale urban design and land use policies</td>
</tr>
<tr>
<td></td>
<td>• Environmental and Policy Approaches: Creation of or enhanced access to places for physical activity combined with informational outreach activities</td>
</tr>
<tr>
<td></td>
<td>• Environmental and Policy Approaches: Street-scale urban design and land use policies</td>
</tr>
<tr>
<td>Tobacco:</td>
<td>• Increasing the unit price of tobacco products</td>
</tr>
<tr>
<td></td>
<td>• Smoke-free policies</td>
</tr>
<tr>
<td>Vaccines:</td>
<td>• Vaccination requirements for child care, school, and college attendance</td>
</tr>
</tbody>
</table>
### Standard 5.2:
**Conduct a comprehensive planning process resulting in a Tribal/state/community health improvement plan**

**Measure 5.2.2 T, S, L:**
Produce a community health improvement plan as a result of a community health improvement process

PHAB specifically requires the use of evidence-based or promising practices when demonstrating this measure and specifically cites The Community Guide as a resource.

<table>
<thead>
<tr>
<th>5.2.2 T, S, L Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Community health improvement plan dated within the last five years that includes:</td>
<td>Once you have identified your community health priorities as part of your improvement plan, considering all of the recommendations and other findings in The Community Guide that relate to your priorities can assist you in prioritizing and selecting your improvement strategies. A complete list of the Task Force findings is available on The Community Guide website (<a href="http://www.thecommunityguide.org">www.thecommunityguide.org</a>).</td>
</tr>
<tr>
<td>a) Community health priorities, measurable objectives, improvement strategies and performance measures with measurable and time-framed targets</td>
<td></td>
</tr>
<tr>
<td>b) Policy changes needed to accomplish health objectives</td>
<td></td>
</tr>
<tr>
<td>c) Individuals and organizations that have accepted responsibility for implementing strategies</td>
<td></td>
</tr>
<tr>
<td>d) Measurable health outcomes or</td>
<td></td>
</tr>
<tr>
<td>5.2.2 T, S, L Required Documentation</td>
<td>Interventions Recommended in The Community Guide</td>
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<tr>
<td>indicators to monitor progress</td>
<td></td>
</tr>
<tr>
<td>e) Alignment between the community health improvement plan and the state and national priorities</td>
<td></td>
</tr>
</tbody>
</table>
### Domain 6:
**Enforce public health laws**

### Standard 6.1:
*Review existing laws and work with governing entities and elected/appointed officials to update as needed*

#### Measure 6.1.1 A:
**Review laws to determine the need for revisions**

*PHAB specifically requires the use of evidence-based practices, promising practices, or practice-based evidence when demonstrating this measure.*

<table>
<thead>
<tr>
<th>6.1.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Reviews of public health laws or laws with public health implications within last three years that include the following: | **Alcohol:**
- Dram Shop Liability
- Increasing alcohol taxes
- Maintaining limits on days of sale
- Maintaining limits on hours of sale
- Regulation of alcohol outlet density  
**Mental Health and Mental Illness:**
- Mental Health Benefits Legislation  
**Motor Vehicle:**
- Reducing Alcohol-Impaired Driving: .08% Blood alcohol concentration (BAC) laws
- Reducing Alcohol-Impaired Driving: Lower BAC Laws for Young or Inexperienced Drivers
- Reducing Alcohol-Impaired Driving: Maintaining current legal minimum drinking age
- Use of Child Safety Seats: Laws mandating use
- Use of Safety Belt: Laws mandating use
- Use of Safety Belt: Primary (vs. secondary) enforcement laws  
**Physical Activity:**
- Environmental and Policy Approaches: Community-scale urban design and land use policies
- Environmental and Policy Approaches: Street-scale urban design and land use policies  
**Tobacco:**
- Increasing the unit price of tobacco products
- Smoke-free policies  
**Vaccines:**
- Vaccination requirements for child care, school, and college attendance |
<p>| a) Evaluations of laws for consistency with public health evidence-based and/or promising practices |<br />
| b) Documented use of model public health laws, checklists, templates and/or exercises in reviewing laws |<br />
| c) Documentation of input solicited from key stakeholders on |</p>
<table>
<thead>
<tr>
<th>6.1.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>proposed and/or reviewed laws</td>
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</tbody>
</table>
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

**Standard 6.1:**
Review existing laws and work with governing entities and elected/appointed officials to update as needed

**Measure 6.1.2 A:**
Inform governing entity and/or elected/appointed officials of needed updates/amendments to current laws and/or proposed new laws

<table>
<thead>
<tr>
<th>6.1.2 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Documentation of distribution of two written recommendations to governing entity and/or elected/appointed officials concerning amendments or updates to current laws and/or proposed new laws</td>
<td>Although there are no Community Guide interventions that are directly related to this PHAB measure, it may be helpful to look at the interventions listed alongside measure 6.1.1 A: Review laws to determine the need for revisions. Although distributing recommendations to governing entity and/or elected/appointed officials concerning amendments or updates to current laws and or proposed new laws—the intent of 6.1.2 A—is not a specific aim or main component of the Community Guide interventions listed for 6.1.1 A, such distribution would likely occur after laws have been reviewed. If that is the case in your jurisdiction for one or more of the interventions listed for 6.1.1 A, then they may help you obtain the required documentation for this measure.</td>
</tr>
</tbody>
</table>
### Standard 6.2:
**Educate individuals and organizations on the meaning, purpose, and benefit of public health laws and how to comply**

**Measure 6.2.3 A:**
Provide information or education to regulated entities regarding their responsibilities and methods to achieve full compliance with public health related laws

<table>
<thead>
<tr>
<th>6.2.3 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Written record of the provision of information or education to regulated entities concerning their responsibilities for compliance with public health laws | **Alcohol:**  
- Enhanced enforcement of laws prohibiting sales to minors  
**Motor Vehicle:**  
- Use of Child Safety Seats: Community-wide information and enhanced enforcement campaigns |
Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

Domain 7: Promote strategies to improve access to healthcare services

*Standard 7.2: Identify and implement strategies to improve access to healthcare services*

*Measure 7.2.2 A: Collaborate to implement strategies to increase access to healthcare services*

<table>
<thead>
<tr>
<th>7.2.2 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. Documentation of collaborative implementation of mechanisms or strategies to assist the public in obtaining access to health care services | **Asthma:**  
- Home-based multi-trigger, multicomponent interventions for children and adolescents  
**Cancer:**  
- Client-Oriented Screening Interventions: Reducing out-of-pocket costs  
- Client-Oriented Screening Interventions: Reducing structural barriers  
**Cardiovascular Disease:**  
- Reducing out-of-pocket costs for cardiovascular disease preventive services for patients with high blood pressure and high cholesterol  
- Team-based care to improve blood pressure control  
**Diabetes:**  
- Case management interventions to improve glycemic control  
- Disease management programs  
**Mental Health:**  
- Collaborative care for the management of depressive disorders  
- Home-based depression care management among older adults  
**Oral Health:**  
- Preventing Dental Caries: School-based dental sealant delivery programs  
**Tobacco:**  
- Mobile phone-based interventions  
- Quitline interventions  
- Reducing out-of-pocket costs for evidence-based cessation treatments  
**Vaccines:**  
- Health care system-based interventions implemented in combination  
- Home visits to increase vaccination rates  
- Reducing client out-of-pocket costs  
- Vaccination programs in schools and organized child care centers  
- Vaccination programs in WIC settings  
**Worksite:**  
- Flu Vaccines: Interventions with on-site, free, actively promoted seasonal influenza vaccinations among healthcare workers  
- Flu Vaccines: Interventions with on-site, free, actively promoted seasonal influenza vaccinations among non-healthcare workers |
### Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures

<table>
<thead>
<tr>
<th>Domain 9: Evaluate and continuously improve health department processes, programs, and interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard 9.1: Use a performance management system to monitor achievement of organizational objectives</td>
</tr>
</tbody>
</table>

#### Measure 9.1.3 A:
Use a process to determine and report on achievement of goals, objectives, and measures set by the performance management system

<table>
<thead>
<tr>
<th>9.1.3 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Written goals and objectives which include time frames for measurement</td>
<td>Outputs from Community Guide reviews can help you set performance goals, objectives, and measures, and evaluate whether you are meeting your goals. These outputs are available for all Community Guide interventions. A complete list of the Task Force findings is available on The Community Guide website (<a href="http://www.thecommunityguide.org">www.thecommunityguide.org</a>).</td>
</tr>
</tbody>
</table>
| 2. Demonstration of a process for monitoring of performance of goals and objectives | If you use some or all of these outputs in setting goals and objectives, and developing a process for monitoring and evaluating performance, then this can become part of your documentation in support of this PHAB measure. Outputs from Community Guide reviews include:  
  • Analytic frameworks that show how the intervention relates to outcomes.  
  • Logic models that show how multiple interventions address a health issue.  
  • Estimation of the amount of impact (i.e., the size of the effect) you can expect if you implement a Task Force-recommended intervention.  
    o The Community Guide pulls together all available studies of the effectiveness of an intervention. It looks at whether effectiveness varies across different settings, situations, and populations and can therefore identify what size of an effect you can expect to see if you implement the intervention. Information on the size of the effect is reported alongside the Task Force finding on The Community Guide website (www.thecommunityguide.org). The effect is usually reported as a median—which is the middle effect size seen across all of the research and evaluation studies the Task Force included in their systematic review of the existing evidence. Here is an example:  
      When implementing the Community Guide intervention [Campaigns and Informational Approaches to Increase Physical Activity: Community-wide campaigns](https://www.thecommunityguide.org/), you can expect to see a median increase of 4.2% in the number of people who report being physically active and a median increase of 16.3% in participants’ energy expenditure. |

It is very important to read not just the title of the Community Guide intervention, but also the full definition of the intervention that is found on The Community Guide website, as well as the statement of what exactly the Task Force is recommending. This is the only way you can be sure that the intervention you put into place is similar enough to what was recommended by the Task Force that you can expect to achieve similar results.
**Table 1: Matching evidence-based interventions from The Community Guide to PHAB Standards and Measures**

**Standard 9.2:**
*Develop and implement quality improvement processes integrated into organizational practice, programs, processes, and interventions*

**Measure 9.2.1 A:**
*Establish a quality improvement program based on organizational policies and direction*

<table>
<thead>
<tr>
<th>9.2.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
</table>
| 1. A written quality improvement plan | Consulting all of the findings included in The Community Guide can inform your quality improvement plan by helping you to assess whether your current practices are evidence-based and to prioritize and select improvement strategies. A [complete list of the Task Force findings](http://www.thecommunityguide.org) is available on The Community Guide website (www.thecomunityguide.org). Outputs from Community Guide reviews can also help you to set goals, objectives, and measures, and to monitor your progress. Outputs are available for all Community Guide interventions and include:  
  - Analytic frameworks that show how the intervention relates to outcomes.  
  - Logic models that show how multiple interventions address a health issue.  
  - Estimation of the amount of impact (i.e., the size of the effect) you can expect if you implement a Task Force-recommended intervention.  
    - The Community Guide pulls together all available studies of the effectiveness of an intervention. It looks at whether effectiveness varies across different settings, situations, and populations and can therefore identify what size of an effect you can expect to see if you implement the intervention. Information on the size of the effect is reported alongside the Task Force finding on The Community Guide website ([www.thecomunityguide.org](http://www.thecomunityguide.org)). The effect is usually reported as a median—which is the middle effect size seen across all of the research and evaluation studies the Task Force included in their systematic review of the existing evidence. Here is an example:  
      - When implementing the Community Guide intervention *Campaigns and Informational Approaches to Increase Physical Activity: Community-wide campaigns*, you can expect to see a median increase of 4.2% in the number of people who report being physically active and a median increase of 16.3% in participants’ energy expenditure. |

It is very important to read not just the title of the Community Guide intervention, but also the full definition of the intervention that is found on The Community Guide website, as well as the statement of what exactly the Task Force is recommending. This is the only way you can be sure that the intervention you put into place is similar enough to what was recommended by the Task Force that you can expect to achieve similar results.
**Domain 10:**
Contribute to and apply the evidence base of public health

**Standard 10.1:**
*Identify and use the best available evidence for making informed public health practice decisions*

**Measure 10.1.1 A:**
Identify and use applicable evidence-based and/or promising practices when implementing new or revised processes, programs and/or interventions

PHAB requires the use of evidence-based or promising practices when demonstrating this measure and specifically cites The Community Guide as a resource.

<table>
<thead>
<tr>
<th>10.1.1 A Required Documentation</th>
<th>Interventions Recommended in The Community Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Two examples from within the past three years of evidence-based or promising practices including:</td>
<td>It is useful to consult all of the findings included in The Community Guide to assist you in assessing whether your current practices are evidence-based as well as in prioritizing and selecting new interventions. A complete list of the Task Force findings is available on The Community Guide website (<a href="http://www.thecommunityguide.org">www.thecommunityguide.org</a>).</td>
</tr>
<tr>
<td>a) Source of evidence-based or promising practice</td>
<td></td>
</tr>
<tr>
<td>b) Description of how evidence-based or promising practice was implemented in agency processes, programs and/or interventions</td>
<td></td>
</tr>
</tbody>
</table>