Enhanced State Logic Model For State Public Health Actions (FOA-1305): Georgia (Year 3)

**Inputs**
- Funding
  - 1305 funding
  - Leverage other funding
- Partnership engagement
  - Health Districts
  - Local Health Departments
  - State-level partners (government & non-government)
  - LEAs/ECEs
  - Academic Institutions
  - Health Care Organizations
  - Quality Improvement Organizations
- Guidance and technical support
- Workforce development
- Strategic communication
- Staff time
- Epidemiology and Surveillance
- Evaluation

**Enhanced Strategies**
- DNPAO strategy selected for evaluation
  - **Strategy 2: Implement food service guidelines/nutrition standards where foods and beverages are available**
    - Activity: Implement food service guidelines in ECEs
- School Health strategy selected for evaluation
  - **Strategy 3: Create supportive nutrition environments in schools**
    - Activity: Implement policies and practices that create a supportive nutrition environment, including establishing standards for all competitive foods; prohibiting advertising of unhealthy foods; and promoting healthy foods in schools, including those sold and served within school meal programs and other venues
- DHDSP strategy selected for evaluation
  - **Strategy 1: Increase implementation of quality improvement processes in health systems**
    - Activity 1: Increase EHR adoption and the use of HIT to improve performance
    - Activity 2: Increase the institutionalization and monitoring of aggregated/standardized quality measures at the provider and systems level
- DDT strategy selected for evaluation
  - **Strategy 1: Increase use of diabetes self-management programs in community settings**
    - Activity 1: Increase access, referrals, and reimbursement for AАDE-accredited, ADA-recognized, State-accredited/certified, or Stanford-licensed DSME programs

**Outputs**
- Delivery of (#) professional development and (#) TA to (#) ECEs to implement food service guidelines
  - (#) ECEs reached and the percentage of those reached that are meeting or making progress in meeting best practices in nutrition
- Delivery of (#) professional development and (#) TA opportunities to (#) LEAs to adopt policies and/or practices that create a supportive nutrition environment in schools
  - # of LEAs reached and percentage of those reached that adopted policies and/or practices to create a supportive nutrition environment in schools
- Delivery of (#) training sessions and (#) TA to (#) health care settings to increase implementation of quality improvement processes in health systems
  - Number of partners involved in the Georgia QI and Reporting Capacity Building Collaborative
  - Number of provider practices participating in the EHR/HIT Improvement Project
- Delivery of (#) professional development opportunities, (#) TA, and ($ amount) of funding supports to (#) health care systems/provider practice to become accredited DSME programs
  - (#) newly accredited DSME programs
  - (#) new DSME satellite sites of existing or newly accredited DSME programs in underserved areas
  - (#) counties with accredited DSME programs and (#) percentage of counties with newly accredited DSME programs

**Short-term Outcomes**
- Increased state, community, worksites, schools, and ECE environments that promote and reinforce healthful behaviors and practices across the lifespan related to diabetes, cardiovascular health, student health, physical activity and healthful foods and beverages, obesity, and breast feeding
- Improved quality, effective delivery and use of clinical and other preventive services to address prevention and management of hypertension and diabetes
- Increased community clinical linkages to support prevention, self-management and control of diabetes, hypertension & obesity
- Increased consumption of nutritious food and beverages and increased physical activity across the life span
- Improved medication adherence for adults with high blood pressure and adults with diabetes
- Increased self-monitoring of high blood pressure tied to clinical support
- Increased use of diabetes self-management and primary prevention programs

**Intermediate Outcomes**
- Increased consumption of nutritious food and beverages and increased physical activity across the life span
- Improved medication adherence for adults with high blood pressure and adults with diabetes
- Increased self-monitoring of high blood pressure tied to clinical support
- Increased use of diabetes self-management and primary prevention programs

**Long-term Outcomes**