Moving From Research to Action

Policy Scans to Promote Community Health

ChangeLab Solutions

DOUGLAS COUNTY
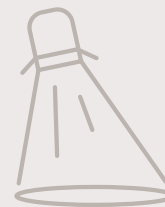Health Department

Contents

Summary & Introduction

Health departments are responsible for protecting and advancing the health of residents in their jurisdictions. Improving the conditions and systems in which people live – also known as social determinants of health (SDOH) – is fundamental to this work. To effectively address SDOH, health departments must work with diverse partners to understand shared goals for community conditions and to identify and assess legal and policy levers that can drive change to ensure everyone has a fair and just opportunity to be healthy.

This resource begins by explaining why it is important for governmental public health practitioners of all positions and levels of responsibility to engage in policy change efforts. It then explores how policy scans – a research method for identifying, assessing, and prioritizing policy options to address community health needs – can serve as a useful tool in this work. This resource is informed by ChangeLab Solutions' experience conducting policy scans in collaboration with national organizations and government partners, particularly our work with the Douglas County Health Department (DCHD) in Nebraska.

The following is an overview of the information offered in this resource:

- **Law, Policy, & Public Health.** Understanding the relationship between law, policy, and public health is foundational to conducting policy scans. This section defines types of laws and policies that can be included in a policy scan and describes their direct and indirect impacts on public health outcomes. It also explains how engaging with law and policy through policy scans and other avenues can help governmental public health practitioners carry out essential services and meet national accreditation standards.

- **Overview of the Policy Process & the Role of Policy Scans.** Also foundational is understanding how policy scans fit into the broader policy change process. This section provides a high-level overview of the policy process and explains how policy scans support one part it – specifically, identifying, assessing, and prioritizing policy options. This section also charts the various roles that governmental public health practitioners can play in conducting policy scans, no matter their position or level of experience.

- **Policy Scans in Practice.** Building on the foundation established in the previous sections, this section unpacks the "how" of policy scans. It outlines ChangeLab Solutions' approach to conducting policy scans, including practical guidance and tips for scaling the methods based on available time and resources. It also highlights examples and lessons learned from our project with DCHD to illuminate the realities and nuances of each step of the policy scan process.

- **Sharing & Using Policy Scan Results.** The goal of a policy scan is to find policies with the greatest potential to help communities and make positive change in real people's lives. This section explores opportunities for governmental public health practitioners to move from research to action by disseminating policy scan findings, building on their research, and collaborating with decision-makers to develop and adopt policies.

We hope that this resource and the stories from Douglas County will help governmental public health practitioners understand how they can leverage policy scans as a tool to promote community health.
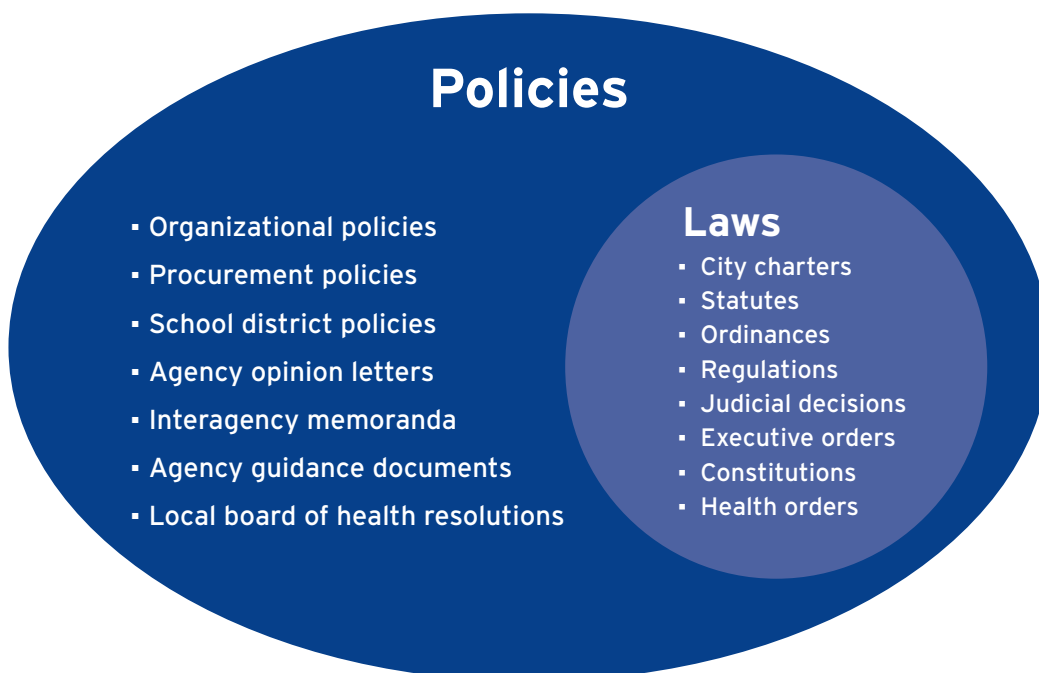
Law, Policy, & Public Health

Understanding the relationship between law, policy, and public health is essential for conducting policy scans and underpins why governmental public health practitioners and their partners engage in policy research. This section introduces information to help practitioners achieve the following:

☑ Recognize different types of laws and policies that can be included in a policy scan.

☑ Understand the various ways that laws and policies shape public health outcomes.

☑ Make the case for researching and leveraging laws and policies to support essential public health services.

What are law & policy?

When people hear the word *policy*, they often think of legislation – and that thinking is correct! Laws enacted by legislative bodies are all examples of policy. However, policies encompass much more than that, and legislatures aren't the only entities that create them. Both public and private organizations, including hospitals, clinics, and local health departments, create and use laws and policies. In this resource, *law* refers specifically to policies enacted by a government and systematically recorded in an official government code, such as a municipal code of ordinances, a federal or state statutory code, or a code of regulations. *Policy* refers to a written statement by a public agency or organization that expresses a position, decision, or course of action, which may not be formally enacted or recorded in an official government code. It may be helpful to keep in mind that all laws are policies, but not all policies are laws.[2,3]

Figure 1: Laws & Policies

Policies

- Organizational policies
- Procurement policies
- School district policies
- Agency opinion letters
- Interagency memoranda
- Agency guidance documents
- Local board of health resolutions

Laws
- City charters
- Statutes
- Ordinances
- Regulations
- Judicial decisions
- Executive orders
- Constitutions
- Health orders

While there isn't space in this resource to explore all the types of laws and policies in Figure 1, we do want to provide greater detail on two types of laws that governmental public health practitioners commonly encounter when conducting policy research or engaging in policy development:

- **Legislation.** Any law drafted and adopted by a legislative body, like the U.S. Congress, state legislatures, or city councils, is considered legislation. Terminology for adopted legislation differs depending on the level of government. At the federal and state levels, legislation that has been enacted and codified is called a statute; at the local level, it is called an ordinance.

- **Regulations.** Regulations are laws developed by administrative agencies, like the U.S. Food and Drug Administration or U.S. Environmental Protection Agency at the federal level or state and local health departments. Regulations can fill in the details of broad legislation, such as by specifying how laws will be enforced or clarifying ambiguities. Health departments and other administrative agencies can only issue regulations when a piece of legislation gives them the power to do so, and at the local level, this authority varies widely by state.

There are many other types of policies that governmental public health practitioners may wish to research or leverage to promote community health. For example, they may be interested in exploring a range of "little p" policies, like resolutions, contracts, agreements, and internal guidelines for employees. Governmental public health practitioners, especially those working at the local level, typically have broader flexibility to create and use policies like these in their day-to-day work.

What is the relationship between law, policy, & public health?

Law and policy are key determinants of health and are essential tools for ensuring that everyone has a fair and just opportunity to be healthy.[4,5,6] They establish the foundation and organization of our public health system,[7] delineate what health departments can work on and how – also known as *legal authority*[8] – and can directly influence health at the population level (e.g., helmet laws, tobacco taxes). Law and policy can also create community conditions that either promote or worsen public health outcomes.[9,10]

Everyone's health is shaped by the conditions of the places where they are born, grow, live, learn, play, work, and age.[11,12] Research shows that these conditions – known as SDOH – have a more significant impact on health than clinical factors.[13] Conditions in our environment include income, wealth, education, employment, workplace climate, housing, food security, community cohesion, neighborhood safety, transportation, health care, and air and water quality.[14,15]

Laws and policies are both shaped by and affect the distribution of SDOH.[16] They influence answers to questions such as the following:

- Is my water safe to drink?

- What's the minimum wage I'm entitled to earn at my job?

- How close do I live to my job, grocery store, school, doctor's office, and public park?

- What highways and industries are near my home?

- What types of government officials and other professionals will respond to me when I'm having a mental health crisis?

When there are unfair differences in opportunities to access health-promoting resources or to benefit from health-promoting conditions, more people suffer.[17,18] For example, health-promoting laws, like those requiring children to use safety seats when riding in a motor vehicle, create measurable gains in community health.[19] At the same time, harmful policies, like exclusionary approaches to school discipline (e.g., suspensions, expulsions), can drive avoidable differences in health outcomes between population groups.[20] Law and policy are tools that can improve or harm health, depending on how they are used.[21]

It's also important to remember that written law and policy — what is "on the books" — are only part of the equation when it comes to their impact on health. How law and policy are created, understood, implemented, and enforced can be just as significant as what is put into writing.[22] For example, if bicyclists are unaware of, lack knowledge about, or ignore helmet laws, then looking only at the law's text would provide an inaccurate impression of what occurs in practice. Similarly, when the government only enforces housing codes and other laws in response to complaints, people who face barriers to navigating the complaint process — such as language barriers or fear of immigration-related consequences — may be excluded from protections.[23] A full understanding of the relationship between law, policy, and public health requires consideration of which laws and policies are (or are not) in place, as well as how enacted laws and policies are implemented and function in practice.[24]

DIRECT AND INDIRECT IMPACTS OF PUBLIC HEALTH LAWS & POLICIES

Laws and policies can serve a variety of functions and can impact health either directly or indirectly. When thinking about which laws or policies governmental public health practitioners can explore to promote public health and address SDOH, the following categories can be helpful:

- **Infrastructural public health laws and policies** establish "the powers, duties, and institutions of public health."[25] These can include, for example, state legislation addressing public health emergency authority[26] or state laws establishing either centralized or decentralized local health departments.[27]

- **Interventional public health laws and policies** are designed to "influence health outcomes or mediators directly."[28] Examples include sugary drink and tobacco taxes, laws restricting alcohol outlet density, and bicycle helmet and seatbelt laws intended to reduce the risk of injury while biking or driving.

- **Incidental public health laws and policies** have unintended effects on health. For example, zoning may determine differences in air quality between neighborhoods, and immigration policy influences whether undocumented immigrants can access public health insurance programs like Medicaid.[29]

Laws and policies that fall into any of these categories can be included in a policy scan, a process that is described later in this resource.

Why is it important for governmental public health practitioners to understand & use law & policy?

Governmental public health practitioners can help ensure the health and safety of their communities by researching and leveraging law and policy to support core public health functions and improve SDOH for all residents, especially those who face the greatest barriers to healthy living. This is why national organizations and public health leaders have identified policy research and analysis as important skills for members of the public health workforce.[30,31,32,33] Interest in these skills corresponds with the most recent iteration of the Centers for Disease Control and Prevention's (CDC) **10 Essential Public Health Services**, which emphasizes policy development as a key strategy for protecting and promoting the health of all people in all communities.[34]

In addition, the **Public Health Accreditation Board** (PHAB) — which accredits health departments and aligns with the 10 Essential Public Health Services and the **Foundational Public Health Services** — recognizes the importance of using law and policy to address SDOH.[35] One domain of PHAB's assessment focuses specifically on whether a health department is implementing policies, plans, and laws that affect health by working across sectors to "correct historical injustices and provide fair and just opportunities for all to achieve optimal health."[36]

This may feel abstract or overwhelming, especially for governmental public health practitioners who don't frequently interact with formal policymaking processes. However, recalling our broad definition of policy and considering how laws and policies are implemented in practice can reveal how practitioners across a range of positions and levels of responsibility have a part to play. From researching, adopting, or implementing changes to guidelines for restaurant inspectors to ensure sensitivity to cultural food handling practices,[37] to including questions related to SDOH in community health needs assessments,[38] to ensuring the collection and analysis of data disaggregated by sociodemographic factors to identify pattens and trends in disease distribution,[39,40] there are many opportunities for governmental public health practitioners to leverage law and policy in their day-to-day work.

# Overview of the Policy Process & the Role of Policy Scans

We've discussed what law and policy are and why it's important that governmental public health practitioners leverage them to support core public health functions and address SDOH. Now, let's provide some broader context on how practitioners can *change* laws and policies, and how policy scans fit into this process. This section includes information to help practitioners meet the following objectives:

☑ Understand the broader context of using laws and policies in public health practice.

☑ Recognize when policy scans and other research methods are useful for advancing policy change.

☑ Identify opportunities to get involved in policy scans.

What is the process of policy change?

When we refer to the *policy process*, we mean the approach that changemakers (e.g., government officials, policymakers, advocates, community members) use to identify, assess, develop, enact, implement, evaluate, and revise legal and policy solutions that support community needs and aspirations. Although the specific details of the policy process may vary by policy type (e.g., health orders to protect the public during disease outbreaks, ordinances enacted by city councils outlining a health officer's authority to conduct various types of inspections) and the level at which the policy is being implemented (e.g., institution, agency, city, state), it generally follows the steps outlined in Figure 2. Note that "Engage Community Members & Other Key Partners" is at the center because it should be integrated across all parts of the process, not treated as a single step.

Figure 2: The Policy Process
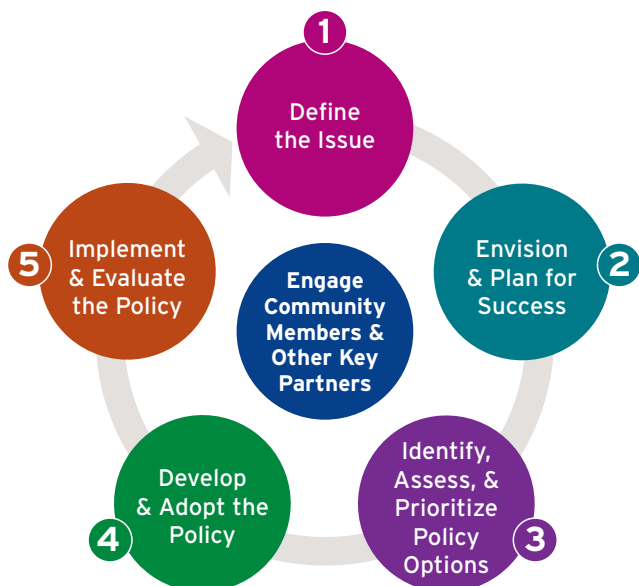
Although this resource focuses on how policy scans can support step 3 of the process, the following brief descriptions of each step are provided to offer context and frame the discussion:

1 **Define the Issue.** Gather information from community members and key partners about shared goals for community conditions and the most urgent health-related issues or opportunities for change. Consider questions such as: What factors are contributing to the issue? Who is affected and how?

2 **Envision & Plan for Success.** Imagine how your community would benefit if the key issue were addressed and create a plan to make that vision a reality. Consider questions such as: What is the desired outcome? Who needs to be at the table to achieve it? What community strengths and assets can be leveraged to realize the community's vision for success?

3 **Identify, Assess, & Prioritize Policy Options.** Work with community members and subject matter experts to identify, assess, and prioritize policy options to address the issue. Consider questions such as: What have other communities done? What were their successes and challenges when using a particular approach? Which policies are most effective and feasible considering cost, politics, legal constraints, and other factors?

4 **Develop & Adopt the Policy.** Write, edit, and review the policy and participate in or facilitate its adoption. Consider questions such as: What type of policy is most appropriate (e.g., legislation, regulation, internal agency policy)? How can I draft the policy to maximize efficacy and minimize legal risks? Who has the authority to adopt the policy, and what are the required steps?

5 **Implement & Evaluate the Policy.** Put the policy into action, then assess its effectiveness and identify areas for improvement. Consider questions such as: Who will put the policy into practice? Do they have the resources they need to achieve the desired outcome? How will success be measured?

What are policy scans & how can they support the policy process?

A policy scan is a research approach for identifying, assessing, and prioritizing policy options to address community health needs. ChangeLab Solutions' approach to policy scans includes three phases, described in Figure 3.

Figure 3: Phases of a Policy Scan

SCOPING

Engage partners and conduct desktop research to identify relevant policy options and important criteria for assessment.

ASSESSMENT

Analyze the feasibility and potential impact of the various policy options on community interests and begin to refine the list.

GROUND TRUTHING

Summarize and share the assessment results with partners to identify blind spots and gather feedback on which options to prioritize.

Policy scans primarily support step 3 of the policy process. However, they can also help refine changemakers' understanding of community aspirations and key issues (step 1). The information gathered throughout the policy scan can also inform policy drafting (step 4) and best practices for implementation (step 5).

Figure 4: The Policy Process & the Role of Policy Scans

1. Define the Issue
2. Envision & Plan for Success
3. Identify, Assess, & Prioritize Policy Options
4. Develop & Adopt the Policy
5. Implement & Evaluate the Policy

Engage Community Members & Other Key Partners

Policy scans can help to identify, assess, and prioritize different policy options
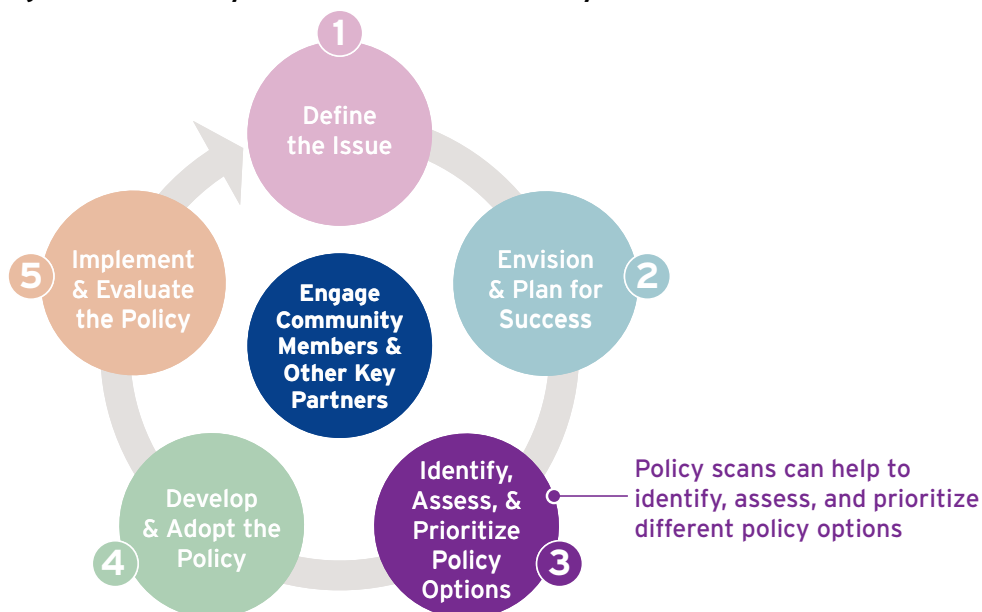
It's important to note that there are many different approaches to policy scans, and there is no single, widely accepted methodology for conducting them. The policy scan process outlined in Figure 3 is one that ChangeLab Solutions has developed and applied through projects with national organizations and government partners. It is based on Health Impact Assessment[41,42] methodology and emphasizes integrating the perspectives of community members, people with relevant lived experience, subject matter experts, and decision-makers alongside other forms of scientific evidence in the research process. One reason for this engagement is to build support among changemakers for the policy priorities identified through the research to increase the chances that policy changes will be successful. One drawback of this policy scan approach is that it is time-consuming. Ways to scale the process depending on available resources are offered in the Policy Scans in Practice section beginning on page 14.

Another thing to keep in mind is that policy scans are only one of many policy research tools. Other tools include policy evaluation;[43] scientific legal mapping techniques, such as policy surveillance and legal assessment;[44] legal epidemiology;[45] health impact assessment;[46,47] and economic evaluation methods like cost-benefit analysis.[48,49] Table 1 defines several approaches to policy research and when governmental public health practitioners and others might consider using them. These approaches are not mutually exclusive; one or more of them can be applied within a single policy process. For example, practitioners can use a policy scan to select a policy approach to pursue, then use policy evaluation after the policy is enacted and implemented to understand the policy outcomes in their jurisdiction. Alternatively, individuals conducting a policy scan may consult published legal epidemiology studies to assess the efficacy of policy options and help them compare and prioritize them.

Table 1. Comparing Policy Research Tools

Policy Research Tool	When to Use	Strengths	Learn More
A **policy scan** often involves identifying policy options that can address a health-related issue and then comparing them to assess which are most feasible and likely to be effective given changemakers' goals and local context.	Before a policy has been selected, to identify multiple policy options and compare them based on criteria of interest to the community and to inform decisions about which option(s) to prioritize	■ Prioritizes a range of criteria and community interests in policy selection ■ Facilitates collaboration and often builds support among changemakers for policy priorities	■ CDC's **Policy Analytical Framework** and **Policy Analysis webpage**
The World Health Organization defines a **health impact assessment** as "a combination of procedures, methods, and tools by which a policy, program [a series of projects over time], or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within that population."[50]	Before a policy has been selected, to predict and compare the health consequences of multiple options and to inform decisions about which option(s) to prioritize	■ Prioritizes public health in policy selection ■ Facilitates collaboration and often builds support among changemakers for policy priorities	■ **Chapter 2, Section 11** of the Community Toolbox, a resource from the Center for Community Health and Development at the University of Kansas ■ North American Health Impact Assessment Practice Standards Working Group's *Minimum Elements and Practice Standards for Health Impact Assessment*

Policy Research Tool	When to Use	Strengths	Learn More
CDC defines **policy evaluation** as "the systematic collection and analysis of information to make judgments about contexts, activities, characteristics, or outcomes of one or more domain(s) of the policy process."[51]	After a policy has been enacted and implemented in a single jurisdiction, to determine whether the policy process went as planned or whether specific outcomes can be attributed to the policy	■ Builds the evidence base for policy interventions ■ Generates information that can inform policy revisions	■ **CDC Office of Policy, Performance, and Evaluation website**
Scientific legal mapping refers to a set of techniques used to capture important features of laws and policies and identify how they vary across jurisdictions or institutions (legal assessments) or over time (policy surveillance). Transparent scientific methods are employed to create rigorous quantitative data.[52]	After a single policy has been chosen or identified as an area of interest (e.g., pharmacist vaccination laws, tobacco retailer licensing laws), to understand how key features of that policy differ across jurisdictions and, often, over time	■ Creates rigorous, quantitative legal data for evaluations and empirical research (e.g., legal epidemiology research) ■ Generates information that can inform policy design	■ **Center for Public Health Law Research** at Temple University and **LawAtlas**, their legal data library
Legal epidemiology "is the scientific study and deployment of law as a factor in the cause, distribution, and prevention of disease and injury in a population."[53] Put simply, it seeks to understand how laws and policies impact health.[54]	After a single policy has been chosen or identified as an area of interest (e.g., pharmacist vaccination laws, tobacco retailer licensing laws), to create scientific evidence of how laws and policies work, and whether they are having the health effects intended	■ Builds the evidence base for policy interventions ■ Serves as a natural experiment by incorporating an element of both time and interjurisdictional comparison to create a clearer picture of the relationship between law and health	■ **Center for Public Health Law Research** at Temple University ■ Public Health Law Academy's **Legal Epidemiology training series**

How can governmental public health practitioners get involved in policy scans?

Policy scans offer a practical path into the policy process, using flexible research methods to explore policies that address community health needs. Many governmental public health practitioners have skills in community engagement, coalition building, and qualitative research that they can leverage for policy scans. Table 2 highlights how individuals in a variety of roles can support policy scans, from initiating and leading a scan to contributing resources, expertise, data, evidence, or information to inform a scan led by other agencies or cross-sector partners (e.g., health care institutions, academics, community-based organizations).

Table 2. Policy Scans: Opportunities for Governmental Public Health Practitioners

Entity or Individual	Ways to Contribute	Examples
Health department leadership (e.g., local boards of health, health officers, department directors, division heads)	■ Allocate funding for policy scans. ■ Authorize the use of staff time and other resources for policy scans. ■ Provide guidance and feedback on the goals of a policy scan. ■ Leverage policy scans to support quality improvement activities. ■ Share policy scan results with policymakers, community members, and others.	■ A local board of health adopts a resolution creating a new policy office within the health department responsible for leveraging policy to address community health needs. ■ A health department director recommends policy scans as one tool to achieve goals set forth in a community health improvement plan. ■ A health department director identifies opportunities to allocate federal and state funding to conduct policy scans. ■ Board of health members and health department leaders participate in an advisory group to help prioritize policy options identified through a policy scan. ■ A health department director shares the policy priorities identified through a policy scan with the mayor and other local elected officials.
Early and mid-career health department practitioners (e.g., health educators, health planners, policy analysts, public health nurses, environmental health inspectors, epidemiologists)	■ Lead or participate in a team conducting a policy scan. ■ Provide data or information to inform a policy scan. ■ Collaborate with cross-sector and interagency partners on a policy scan (e.g., organize and host meetings, join advisory groups). ■ Share policy scan results with policymakers, community members, and others. ■ Help take action on the policy scan by engaging in education and advocacy to advance policy priorities.	■ A staff member of a health department's policy office leads a policy scan to identify policies that address priority issues from a recent community health needs assessment. ■ A behavioral health worker provides data and information to inform a policy scan led by a local mental health nonprofit. ■ A health department's communications lead drafts a press release sharing high-level takeaways about a policy scan. ■ A local environmental health inspector shares recommendations from a policy scan related to food safety with their state health department partners to inform potential updates to state regulations.

MAKING THE CASE FOR POLICY SCANS

Decades of underinvestment in public health means that health department staffing and resources are often stretched thin.[55,56] This can make it challenging for health departments to undertake policy scans, which can be time- and labor-intensive. However, there is a strong case to be made for leadership to invest resources in policy scans. When engaging leadership, consider emphasizing the following points:

■ Policy scans can build workforce capacity and inform policy development, in alignment with CDC's **10 Essential Public Health Services**.

■ Policy scans can potentially help to satisfy PHAB's quality improvement and accreditation standards, especially those related to creating, championing, and implementing policies, plans, and laws that impact health (**Standards & Measures for Reaccreditation, Version 2022, Domain 5**).[57]

When needed, health departments can expand their resources by partnering with philanthropic organizations, national technical assistance providers like ChangeLab Solutions, policy organizations, academic research centers, students, and others to help lead a policy scan process.

Policy Scans in Practice

So, how do researchers – including governmental public health practitioners and other changemakers – conduct policy scans? This section includes guidance, tools, tips, and examples to support the following goals:

☑ Plan for and get started on a policy scan.

☑ Execute each phase of the policy scan process, including:

- ▫ Scoping;
- ▫ Assessment; and
- ▫ Ground truthing.

Within each subsection, you'll find the following elements:

Summary of suggested tasks. At the beginning of each subsection, we offer a quick-reference summary of suggested tasks for the research phase.

Practice tips. These tips describe ways to scale policy scan methods depending on available resources and how to navigate common challenges.

Conversation starters. These questions can help researchers align with one another, as well as with organizational leaders, decision-makers, community members, and other partners, about how to design and conduct their research.

Douglas County spotlights. Each subsection concludes with examples and lessons learned from a policy scan with DCHD.

GENERAL NOTES

CONDUCTING POLICY SCANS

Often, the best path forward for policy research does not come from a toolkit – it comes from partners taking time to figure things out together. Though we offer suggested tasks and tips for conducting policy scans, these are general guidelines, not hard-and-fast requirements. The policy scan process can be tailored to the preferences of those involved, as well as available time, resources, and other context-specific considerations.

Lean into the process, even when it's messy. Policy scans are flexible, and there are no right or wrong answers to the conversation starters offered in this section. By engaging in open-ended discussion, researchers and their partners can start to identify areas of alignment, and points of disagreement. If team members have different points of view on how to conduct the research or overall goals, it's important to bring this to light. Progress happens when teams recognize these differences, consider if and how they might affect the research, and identify ways to bridge them. Coming together to share and listen to others' points of view and experiences can strengthen relationships and foster a sense of collective ownership of the research process and outcomes.

There is no standard timeline. The amount of time needed to complete a policy scan can vary widely depending on factors like the complexity of the research topic, the amount of community engagement in the process, and policymaking or funding timelines. A policy scan could be completed in a few months, or it could take longer – there is no standard measure for success.

ENGAGING PARTNERS

ChangeLab Solutions' approach to policy scans emphasizes centering the perspectives of various partners throughout the research process. This can help ensure that the policy options and priorities identified through the research are feasible and reflect community goals. It also helps to increase familiarity with the policy priorities and to build political support for proposed policy changes.

Consider various options for engagement. Researchers can use various methods to engage key partners in the scoping and ground truthing phases, including key informant interviews, focus groups, roundtables, town halls, and surveys. Any qualitative research method will have advantages and disadvantages, which are beyond the scope of this resource. However, when timelines and resources are tight, methods like focus groups and roundtables – where researchers can gain multiple perspectives in a single meeting – may be the most efficient course of action.

Use processes that are respectful, fair, and inclusive. Whatever the approach, the organization that leads the engagements should use processes that intentionally address potential barriers to participation. When possible, this can include fairly compensating community members and other partners for their time and providing services and amenities that may help a diverse set of community members participate in the project (e.g., interpretation and translation services, disability accommodations, food, childcare, transportation stipends). Strategies like these can be especially important when soliciting feedback from communities or populations that are experiencing a disproportionately high burden of unjust health disparities or who have diminished trust in government institutions, potentially because of negative experiences with research.

Include a range of partners. Consider the following partners to support issue identification, scoping, and ground truthing:

- People with lived experience
- Representatives from government agencies responsible for addressing the issue
- Representatives from nonprofits, community-based organizations, neighborhood associations, advocacy groups, and businesses whose work touches on the issue
- Local and national subject matter experts, such as academics, researchers, or representatives from policy organizations and think tanks

Different partners may have different levels of engagement – and that's OK. For example, though decision-makers may be highly engaged in project planning and ground truthing to identify policy priorities, they may be less engaged in detailed scoping and assessment phases. Similarly, while some community partners may express interest in certain topics as a part of project planning or scoping, they may have limited capacity to provide continued input on subsequent phases of research. Keeping key players informed about the research process and results along the way can help establish or rebuild trust and sustain momentum for the recommendations that emerge from the policy scan.

Learn more

- ChangeLab Solutions' resource, *Supporting Equitable Community Engagement: A Resource for State Health Departments*, highlights best practices for partner engagement, which are equally applicable at both state and local levels.
- The Community Toolbox also includes a chapter on **Assessing Community Needs and Resources**, with sections on **Conducting Focus Groups**, **Conducting Interviews**, and **Conducting Surveys**.

Planning a policy scan

SUMMARY: SUGGESTED TASKS

- Meet with leadership – or whoever is directing, commissioning, or overseeing the policy scan – to align on the health-related issue that will be the focus of the research.
- As needed, engage partners or consult existing data and literature (e.g., community health needs assessments, environmental scans, U.S. Census data) to define the issue with as much specificity as possible. For example, use "lack of access to quality mental health services for youth of color," instead of simply "youth mental health."
- Meet with research team members, organizational leaders, decision-makers, and other key partners to establish goals and parameters for the policy scan. Consider questions such as: What is our research question? How will we use our findings? Who is our audience? What are the basic parameters for including or excluding policy options (e.g., policy type, jurisdictional level)?
- Request and tentatively schedule meetings to share information at the conclusion of each research phase and to revisit and adjust answers to questions about goals and parameters as needed.

Define a health-related issue to be the focus of the policy scan

Recall that policy scans typically support step 3 of the policy process: identifying, assessing, and prioritizing policy options to address a specific community health need. This means that, before beginning a policy scan, researchers should meet with their leadership – or whoever is directing, commissioning, or overseeing the policy scan – to confirm that earlier phases of the policy process have been completed, including step 1: defining a health-related issue or opportunity for change to be the focus of the research. Members of the research team may be directly involved in issue identification, or they may be instructed to focus on a topic based on an issue identification process completed by others.

Practice tip: Policy scans are most successful and efficient when the issue of focus is defined as specifically as possible. For example, "lack of access to quality mental health services for youth of color" is clearer than "youth mental health," and "chronic absenteeism among students experiencing housing insecurity or juvenile justice involvement" will produce more relevant results than simply "education."

If researchers are beginning with a broad topic, they may need to gather more information, ideally by engaging partners to accurately refine and frame the core issue. See the general notes on page 15 for guidance on possible partners and engagement methods. Alternatively, when resources or time are limited, researchers can leverage existing data and literature on community needs and issues (e.g., community health needs assessments, environmental scans, U.S. Census data). Researchers with fewer resources can also supplement existing data with information gathered through informal conversations with community partners and government officials.

Establish goals & parameters for the policy scan

In addition to defining a topic with specificity, researchers should seek agreement among members of their team, organizational leadership, and key decision-makers about the overall goals and parameters for the policy scan. Planning at the outset of a policy scan is critical to its success.
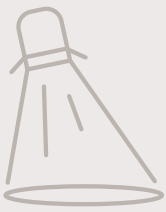
Practice tip: Researchers' understanding of their topic will evolve over time. For this reason, it's important to prioritize ongoing communication with organizational leaders, decision-makers, and other partners throughout the research process. Creating space for dialogue early in the collaboration can set an important tone by inviting and normalizing conversations about the purpose of the policy scan. As part of project planning, researchers can request and tentatively schedule meetings with organizational leaders and decision-makers to take place at the conclusion of each research phase. During these meetings, they can share updates and revisit and adjust project goals and parameters as needed.

Conversation starters: Researchers can use the following questions to guide initial conversations among partners about goals and parameters for the policy scan. These questions can be revisited over the course of the policy scan to ensure the goals and parameters continue to fit as the project evolves.

- **What is our research question?** Articulate a clear, concrete research question that can be answered through the policy scan. For example, "What policies are feasible and have high potential to [address the key issue/ promote specific community goals]?" Note that the research question may be refined as researchers learn more about the topic.

- **How will we use our findings?** Will the findings and information from the policy scan help establish internal priorities or strategic approaches within the health department? Will they inform an upcoming event, activity, or policy change process led by the department, other agencies, or community partners (e.g., strategic planning, health improvement planning, regulatory updates, legislative updates)?

- **Who is our audience?** In other words, who will use this information? The team may choose to make the research public, share it only with specific community groups, government agencies, researchers, policymakers, or other decision-makers, or keep the information internal. Identifying an audience helps ensure the team collects information that meets the needs of the people who will be using it.

- **What are the parameters for our research?** What policies should be included in or excluded from the identified options? This can include setting parameters related to policy type (e.g., legislation, regulation, little "p" policies), jurisdictional level (e.g., federal, state, local), and status (e.g., adopted, introduced, ideated only). Depending on goals, the team may also decide to prioritize including policies that have been implemented in jurisdictions that share certain geographic, demographic, or political characteristics.

DOUGLAS COUNTY SPOTLIGHT: PLANNING

As mentioned, DCHD's policy scan was intended to implement some aspects of a **Declaration of Racism as a Public Health Crisis** that the local board of health adopted in 2020. This resolution called upon the health department to "[p]roactively identify and address existing policy gaps" and to "[a]dvocate for relevant policies that improve health in communities of color."[58] DCHD decided to contract ChangeLab Solutions to complete the policy scan and help expand the agency's capacity and knowledge of the process. The ChangeLab Solutions team consisted of two attorneys and two policy analysts. A community health planner from DCHD helped coordinate the project, including facilitating communications with the Division Chief for Public Health Strategy, Innovation, and Planning; the health department director; and local board of health members.

Identifying an issue

DCHD had initially selected education and housing as the policy scan topics, based on local board of health feedback and anecdotal information from community members. However, when ChangeLab Solutions' preliminary research revealed that several local organizations had recently completed comprehensive research on the local housing policy landscape,[59] DCHD decided to pivot to avoid duplicating efforts. They led a series of rapid focus groups with community partners, in which participants considered a list of possible topics and provided input on which topics would be most salient, especially given the project's goals of addressing unjust health disparities and implementing the Declaration of

Racism as a Public Health Crisis. Based on this feedback, DCHD finalized the two topics for the policy scan: education and youth mental health. These topics were refined during the scoping phase, as described in the next section.

Project planning

Through discussions and brainstorming with ChangeLab Solutions, DCHD finalized two research questions:

1. What state and local-level policies are feasible and have potential to promote educational equity in Douglas County, particularly for students of color?

2. What state and local-level policies are feasible and have potential to promote positive youth mental health in Douglas County, particularly for youth of color?

DCHD also worked with ChangeLab Solutions to establish research parameters related to jurisdictional level (including state and local-level policies) and policy type (including public policies adopted by government entities as well as relevant policies adopted by private institutions). DCHD determined that including state-level policies was important because they foresaw opportunities to share policy ideas and information with state partners, and because many aspects of education and youth mental health are influenced by state approaches. They also chose to prioritize the inclusion of policy options that have been demonstrated in jurisdictions that are politically similar to Nebraska (for state-level policies) and the Omaha metro area (for local-level

policies) to increase the likelihood that the recommendations from the policy scan would be feasible.

Although DCHD, ChangeLab Solutions, and local board of health members had ongoing dialogue about the intended audiences and uses for the policy scan results, it proved challenging to settle these questions definitively at the outset of the project. One point of agreement was that engaging in the policy scan was an opportunity for DCHD to learn policy research skills that could be replicated in future projects, and this became one of the goals of the work.

Takeaways & lessons learned

Issue identification can take time, especially when it's informed by community input. It's important to stay flexible and pivot as needed based on what is learned through preliminary research and community engagement.

The goals and audiences for a policy scan can evolve over time as researchers learn more about their topic. It's important to start conversations between the individuals overseeing the project and the core research team early and to schedule periodic check-ins where researchers can share learnings and make strategic adjustments to ensure the research meets shared goals and expectations.

Conducting a policy scan

ChangeLab Solutions' policy scan approach includes three phases, as outlined in Figure 3 and detailed below.

Phase 1: Scoping

SUMMARY: SUGGESTED TASKS

- Engage partners to learn about possible policy options and key considerations for assessment.
- Review notes and generate an initial list of policy options surfaced through the engagements. Consider developing a spreadsheet that includes the options and any examples, additional resources, or notes that partners shared (see Table 3).
- Expand the list and add to the spreadsheet by reviewing published information on the research topic (e.g., journal articles, reports, popular media).

The first phase of conducting a policy scan is scoping, where researchers identify potential policy options that can address the research topic and considerations that are important to decision-makers and residents and should be factored into the assessment of the various options.

Engage partners

Scoping typically begins by engaging partners to learn about possible policy options and key considerations. See the general notes on page 15 for guidance on possible partners and engagement methods.

Conversation starters: The following are sample scoping questions that researchers can use when engaging partners:

- How do you define [topic or issue]?
- What factors contribute to [topic or issue]?
- What would it look like if [topic or issue] were addressed?
- What kinds of laws and policies shape the opportunity to achieve [project goals]?
- What are some examples of these laws and policies from other jurisdictions?
- What were the successes or challenges of these policy changes?
- What existing policies in our jurisdiction pose a barrier to achieving [project goals]?
- What resources have been published on [topic or issue] that may be helpful for us to review?

Practice tip: Researchers should take notes during partner engagements. They may also ask participants for permission to record and transcribe the conversations, and offer to share the transcripts with participants.

Review notes & generate an initial list of policy options

Next, researchers should review their notes and generate an initial list of policy options that were surfaced through the engagements. The policy options can be organized in a spreadsheet, including the policy name, a brief description, and other factors that relate to the research parameters, such as policy type or jurisdictional level. Researchers can also include any examples, additional resources, or notes that partners shared. See Table 3 for a sample spreadsheet, which can be adjusted depending on the project.

Practice tip: Researchers may not be able to add all the scoping information included in Table 3 based on partner engagements. It's OK to leave some cells blank and fill them in later after reviewing existing literature.

Table 3. Sample Scoping Spreadsheet

Topic: Workforce Development Policies to Promote Positive Youth Mental Health					
Policy Name	**Policy Description**	**Policy Type**	**Policy Level**	**Additional Resources**	**Scoping Notes**
List the name most commonly used to refer to the policy.	*Add a brief description explaining what the policy does, using action-oriented language if possible.* *For example, does the policy…* ■ *Create a new program and/or funding stream?* ■ *Establish a new standard?* ■ *Incentivize, authorize, or require a behavior change?* ■ *Discourage or prohibit certain behaviors?*	*Select one from dropdown:* *Public (i.e., legislation, regulations, resolutions, executive orders, budgets, and other policies adopted by government agencies)* *Private (i.e., internal policies of private institutions, businesses, and organizations)*	*Select one from dropdown (state, local, or multiple).* *Only use this column for public policies. For private policies, leave this column blank.*	*Include a link to any additional resources shared by partners.*	*Add any notes that partners flagged about policy design, implementation, state or local context, or other considerations.*
Reduce financial barriers to mental health education and licensing	States can reduce financial barriers to education and licensing by establishing and funding loan repayment programs, scholarships, paid internships, and licensing fee waivers.	Public	State	National Alliance on Mental Illness, Workforce: Scholarship and Loan Repayment Programs: **https://www.nami.org/advocacy/policy-priorities/improving-health/workforce-scholarship-and-loan-repayment-programs**	In 2023, Nebraska enacted a student loan repayment program for some mental health professionals serving rural areas, but there may be opportunities to expand the program.

Review existing literature to expand the list of policy options

Finally, researchers can expand the list of policy options and add to the spreadsheet by reviewing what's been published on their topic.

Practice tip: Consider the following sources:

- Social science research and academic articles
- Reports from government agencies, policy organizations, nonprofits, or community-based organizations
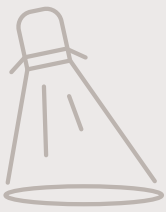- News and magazine articles

It may also be helpful to reference compendiums of promising policy options, such as the following:

- CityHealth has curated a **package of evidence-based public policies** that help cities improve community health.

- County Health Rankings & Roadmaps has a **searchable database** of evidence-informed strategies to create communities where everyone can thrive.

- **Healing Through Policy: Creating Pathways to Racial Justice** (de Beaumont) and *A Blueprint for Changemakers: Achieving Health Equity Through Law & Policy* (ChangeLab Solutions) highlight policies and practices that can be implemented at the local level to promote racial healing and address social inequities.

- The **Big Cities Health Coalition website** shares policy priorities and advocacy resources geared toward large metropolitan health departments.

Practice tip: The list of policy options does not need to be exhaustive at this stage; researchers can identify blind spots later, in the ground truthing phase. If resources or capacity are limited, researchers can agree to limit the amount of time spent researching a particular issue or subdomain (e.g., 8 hours per subdomain). They can then note this limitation when reporting the results of the policy scan.

DOUGLAS COUNTY SPOTLIGHT: SCOPING

Engage partners

After DCHD selected education and youth mental health as the topics for their policy scan, they worked with ChangeLab Solutions to conduct focus groups with local subject matter experts, including people with lived experience. The goal was to gain a deeper understanding of relevant contextual factors and identify policies that could advance community aspirations, while keeping the overarching goal of addressing unjust health and racial disparities in mind. Because ChangeLab Solutions is not located in Douglas County, organizing the focus groups required mindful coordination with DCHD.

Ultimately, ChangeLab Solutions led two virtual focus groups for each topic via Zoom. Each group had three to five participants. The education focus groups included public school administrators and employees, student and family advocates, nonprofit representatives, and education advocates. The youth mental health focus groups included leaders of local nonprofits that provide social, behavioral, and mental health services, mental health practitioners that work with youth, and program managers for essential community services. Each focus group was recorded and transcribed.

While these focus groups generated invaluable information thanks to active engagement from participants, ChangeLab Solutions and DCHD recognized the inherent challenges in ensuring broad inclusion and representation of diverse perspectives given a tight timeline and budget considerations that did not allow for stipends or other amenities that might have enabled more people to participate.

Review notes & generate an initial list of policy options

Recognizing that education and youth mental health are broad topics, ChangeLab Solutions reviewed the focus group feedback and worked with DCHD to define key themes and identify the policy subdomains that related to these themes. For example, in the education focus group, themes raised by participants included staff shortages, lack of diversity among providers, inadequate compensation, lack of clinical training opportunities, barriers to entering the mental health profession, and staff burnout. Based on these themes, the research team identified workforce development as a key policy subdomain within the broader topic of education. The research team identified additional education policy subdomains including family engagement and school discipline.

For youth mental health, the research team identified the following relevant policy subdomains based on themes raised by focus group participants: workforce development, family support and care coordination, and reimbursement models. ChangeLab Solutions then created a spreadsheet with a separate tab for each policy subdomain and added policy options that focus group participants mentioned.

Review existing literature to expand the list of policy options

Next, ChangeLab Solutions reviewed existing literature, including journal articles, reports, and popular media, to identify additional policy options that directly responded to the themes that focus group participants raised. At the end of the scoping phase, the team had a list of 33 education policies and 30 youth mental health policies for assessment.

Takeaways & lessons learned

Defining the policy issue with as much specificity as possible can increase research efficiency and help ensure that the policy scan results respond to real community goals and challenges. If this doesn't happen during the issue identification phase, it can be built into the scoping phase.

Partner engagements to inform a policy scan should ideally be led by a health department or other government entity or organization in the community. Although external partners can support partner engagements, local partners are most familiar with the local context. These engagements are also an opportunity for local government staff to establish or rebuild trusting relationships with individuals who can help to take action on the policy scan findings.

When conducting outreach to partners, public health practitioners can improve response rates and willingness to participate by leveraging existing relationships or connecting with local leaders who can invite their networks directly.

Navigating partner availability and willingness to participate in policy scan engagements can be challenging. Although obtaining a broad, representative sample of perspectives is ideal, sometimes it's necessary to keep the work moving forward with limited participation. Researchers can always note limitations related to partner engagement when sharing their results and vet recommendations with partners later, once they have a shortlist of priorities.

Phase 2: Assessment

SUMMARY: SUGGESTED TASKS

- Meet with leadership, decision-makers, or other individuals who are overseeing or commissioning the policy scan to share takeaways from scoping and to discuss potential feasibility and impact criteria against which each policy option will be assessed.
- Review scoping notes for insights on feasibility and impact criteria that may be of interest to the community.
- Based on this information, select and define the final list of feasibility and impact criteria that will be used for assessment.
- Apply the final criteria to each policy option under consideration. Researchers can adapt the Sample Scoping & Assessment Spreadsheet (see Table 5) to manage the information they gather.

The second phase of conducting a policy scan is assessment, where researchers investigate the feasibility and potential impact of the various policy options. This requires clearly defining feasibility and impact criteria of interest to decision-makers and community partners and then independently assessing each policy option against the criteria.

Select & define feasibility & impact criteria

Assessment typically begins by selecting and defining feasibility and impact criteria. It's prudent for the research team to consult with their leadership, decision-makers, or other individuals overseeing or commissioning the policy scan about which criteria will be most valuable. If the research team has already established periodic check-ins with these individuals, they can use that space to have this conversation. Researchers should also review notes from the partner engagements conducted during the scoping phase for insights about criteria of interest to the community.

Conversation starters: The following are common assessment criteria that researchers and their partners can consider.

FEASIBILITY

- **Practicability:** Have other jurisdictions adopted the policy?
- **Cost:** Will the policy likely require new investment by the jurisdiction responsible for implementation? Or is the policy cost-neutral or revenue-generating?
- **Ease of Implementation:** Is the jurisdiction likely to have the resources, technical skills, and capacity needed to implement the policy?

IMPACT

- **Strength of Evidence:** How strong is the evidence that the policy promotes [project goals]? Is there evidence (including non-academic sources) that the policy is supported by the people closest to the issues?
- **Magnitude of Impact:** To what extent will the policy's effects reach the priority population(s) for this project?

Practice tip: For simplicity, or when resources are limited, researchers can use fewer assessment criteria, focusing only on the key criteria identified by partners (e.g., one to two feasibility criteria and one to two impact criteria).

LEARN MORE

For additional examples of assessment criteria that can be used in a policy scan, refer to the **Key Policy Analysis Questions** on POLARIS, CDC's portal for navigating policy-relevant tools, trainings, and resources.

ChangeLab Solutions' *State & Local Policies with Potential to Advance Racial Equity & Rural Prosperity* resource (see page 2) and *Identifying Policies That Advance Racial & Economic Justice in Rural Places* blog post may also be useful.

After selecting the criteria to be used for assessment, researchers and their partners will need to clearly define how they will answer or evaluate the criteria. The criteria definitions should reflect the project goals and parameters. For example, if researchers and their partners decide to focus on policy options that have been demonstrated in jurisdictions that share certain similarities or characteristics, they can adjust and define the practicability criteria in line with that decision (see Table 4).

Table 4. Sample Practicability Criterion with Definition

Practicability: Has the policy been demonstrated in at least one [state and/or local] jurisdiction that is similar to [jurisdiction conducting the policy scan] in terms of [geography, politics, population, etc.]?	
No, ideated only	The policy has not been introduced or adopted in any jurisdiction.
Yes, introduced	The policy has been introduced or proposed in at least one similar jurisdiction but has not yet been adopted.
Yes, adopted	The policy has been adopted by at least one similar jurisdiction.

Apply feasibility & impact criteria

Next, researchers can apply the feasibility and impact criteria they have selected to each policy option under consideration. They can add additional columns to their policy scoping spreadsheet to answer the assessment questions and organize the information they gather, as demonstrated in Table 5.

Practice tip: To answer the assessment questions, researchers can draw from a range of sources, such as peer-reviewed journal articles, legal epidemiology studies and other scientific research, published policy evaluations, reports from policy organizations, and case studies. They can also search legal codes of other jurisdictions to answer the practicability criterion (e.g., municipal codes of ordinances, state statutory codes).
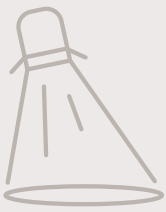
Practice tip: To increase efficiency, researchers can use "cut-points" to limit how many assessment questions they need to answer. For example, if partners express a strong interest in prioritizing policies that have been adopted in similar jurisdictions, researchers can apply the practicability criterion first. If the answer to the question is "No" or "Yes, Introduced," they can refrain from applying the remaining criteria to that option and exclude that option from the list of policies to consider during the ground truthing phase. There may be more than one cut-point.

Table 5. Sample Scoping & Assessment Spreadsheet

Topic: Workforce Development Policies to Promote Positive Youth Mental Health						
Policy Name	**. . .**	**Strength of Evidence**	**Strength of Evidence – SUPPORT**	**Practicability**	**Practicability – SUPPORT**	**Assessment Notes**
List the name most commonly used to refer to the policy.	*Columns from scoping can be retained here.*	*Select one from dropdown (strong, intermediate, or weak).*	*Include a link to at least one study or resource that supports the response to the strength of evidence criterion.*	*Select one from dropdown (ideated, introduced, or adopted).*	*If the response to the practicability criterion was "ideated," leave this cell blank.* *For any other response, add the jurisdiction(s) or institution(s) where the policy has been introduced or adopted and a link to the policy text or a government website describing the policy.*	*Add any relevant notes (e.g., ways the policy can be designed to increase efficacy, factors needed for successful implementation).*
Reduce financial barriers to mental health education and licensing		Strong	**https://www.jabfm.org/content/jabfp/35/5/1015.full.pdf** **https://scholarworks.indianapolis.iu.edu/server/api/core/bitstreams/6d93d032-4c04-4332-a865-e98761dcc429/content**	Adopted	Texas Higher Education Coordinating Board, Mental Health Professionals Loan Repayment Program: https://www.mytexasfuture.org/adult-college/loan-repayment-programs/loan-repayment-program-for-mental-health-professionals/	Financial incentives can be enhanced for providers who commit to working in public service or to serving priority populations.

DOUGLAS COUNTY SPOTLIGHT: ASSESSMENT

During the assessment phase, ChangeLab Solutions assessed the policy options identified through scoping using impact and feasibility criteria. The impact criteria were designed with the overall project goals of promoting health and racial equity in mind. The feasibility criteria were designed to reflect DCHD's desire to learn from examples of local-level policies that had been demonstrated in jurisdictions that are politically similar to the Omaha metro region, and from examples of state-level policies that had been demonstrated in jurisdictions that are politically similar to Nebraska.

First, the research team asked, "How strong is the evidence demonstrating that the policy promotes [educational equity/ positive mental health] for youth of color?" Possible responses were strong, intermediate, emerging, and weak. In answering the question, the research team considered whether the perspectives of people of color were reflected in the evidence. For purposes of the research, the team defined "educational equity" as the state when "every child receives what they need to develop their full academic and social potential."[60] They used this as a cut-point; if the response to the question was "weak," then they did not proceed to apply the remaining criteria.

Second, the research team asked, "Has the policy been demonstrated in at least one other state or local jurisdiction, agency, or institution?" For state-level policies, researchers prioritized examples from jurisdictions that are politically similar to Nebraska; for local-level policies, researchers prioritized examples from jurisdictions that are politically similar to the Omaha metro region. The team developed a short list of these jurisdictions based on conversations with DCHD.

Third, the research team asked, "What is the likely cost of implementation?" Possible responses were requires new investment, cost-neutral, or revenue-generating. In answering the question, the team consulted literature on cost if available or made an informed judgement based on the nature of the policy.

After assessing all the options, the research team decided to apply an additional cut-point to screen out policies that had been previously adopted in Nebraska or Douglas County in some form. This required additional legal research, including keyword searches of **Nebraska Revised Statutes**, the **Omaha Municipal Code**, and the **Board Policies** for Omaha Public Schools, among other sources. Following the screening, 16 education policies and 12 youth mental health policies proceeded to the ground truthing phase.

Takeaways & lessons learned

When resources are limited, it is prudent to use as few assessment criteria as possible while still honoring the goals of the project.

Assessment can be time consuming and can sometimes require basic familiarity navigating legal codes. Where feasible, and to maximize efficiencies, researchers can delegate assessment tasks to partners with subject matter expertise and experience with policy and legal research and analysis (e.g., individuals from other agencies or organizations, national technical assistance providers, agency attorneys).

Phase 3: Ground Truthing

SUMMARY: SUGGESTED TASKS

- Meet with leadership, decision-makers, or other individuals overseeing or commissioning the policy scan to share assessment results, agree on key questions to ask partners to help ground-truth the findings, develop a list of partners to engage, and plan for outreach.
- Conduct outreach to partners and plan a group engagement (e.g., focus group, roundtable).
- Share assessment results with partners during the group engagement to identify blind spots (e.g., promising policies that are missing from the list, harmful policies that should be excluded) and to gather feedback about which options to prioritize.
- Update and finalize the list of policy options based on partner feedback.
- Depending on the project goals, researchers may support community partners and decision-makers in identifying a shortlist of priorities from among the list of policy options, for example by administering a survey allowing respondents to rank the options or by hosting or facilitating meetings where partners use tools like prioritization matrices.

The third phase of conducting a policy scan is ground truthing, where researchers summarize and share the assessment results with partners to identify blind spots and gather feedback on which options to prioritize.

Share assessment results with partners & adjust findings as needed

Partners are typically engaged during ground truthing to identify blind spots, such as promising policy options that are missing from the list or policies that are harmful in practice and should be excluded. Partners can also provide feedback on which options to prioritize based on fit for the community, experiences in other jurisdictions, deep knowledge of the evidence base, and other factors. To ensure alignment and buy-in on the process, researchers should meet with leadership, decision-makers, and other individuals overseeing or commissioning the policy scan first to agree on ground-truthing questions to ask partners, and develop an outreach plan. After engaging partners, researchers should review their notes and adjust the answers to assessment criteria, eliminate potentially harmful or ineffective options, or assess any new policy options as needed.

Practice tip: During this phase, researchers often use group engagement methods, like focus groups, advisory committees, or roundtables. As with scoping engagements, researchers should take notes or obtain permission to record and transcribe these conversations. Participants may include the same individuals who engaged in scoping or different partners, such as the following:

- Subject matter experts who can provide feedback and help identify blind spots
- Decision-makers who can provide insights on political feasibility and windows of opportunity for policy changes
- People with lived experience who can share their views on which policy options would be the best fit for the community

Practice tip: Partner engagements are often most productive when researchers share a streamlined list of the prioritized policy options with participants before the group discussion. The list can include information such as a brief description of each policy, its potential impact on outcomes of interest, and links to examples of the policy in practice. Researchers should also be prepared to provide context at the start of the discussion by summarizing the policy scan process and results.

Conversation starters: The following are sample ground-truthing questions that researchers can use when engaging partners:

- What, if anything, about this list of policies resonates with you?
- Which of these policies are the most politically feasible in the next two to four years?
- Which policies would you recommend for advancing [project goals] in [project context]?
- Which polices would be the most beneficial for your community or constituents?
- Which policies may be challenging to implement and why?
- What policies would you recommend adding to this list?
- Are there any policies that you feel could cause harm or should be excluded from the final outputs of this process? If so, which and why?
- What kinds of resources would best support state and local leaders and decision-makers in acting on the outcomes of this policy scan?

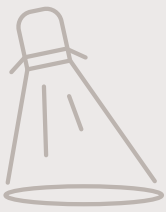# Finalize a list of policy options & identify near-term priorities

Depending on the goals of the policy scan, a final step is often prioritizing the remaining policy options based on the information gathered during the ground-truthing engagements. This task is best completed by people who live in the community and who can take action on the policy scan findings. When a policy scan is completed by researchers from outside the community, it is best for them to share the final list of policy options with local partners along with any other findings, such as the answers to key assessment criteria and notes about which options resonated most with ground-truthing participants. Local partners can use the policy scan results as a springboard for comparing options and identifying their near-term priorities.

It's important to remember that any policy will inevitably involve trade-offs. A policy option may be highly feasible but have low potential to address unjust health disparities, or have high potential to address unjust health disparities but require significant investment to implement and administer. When it comes to prioritizing, it's important to put people at the center. This is why ground truthing is so important: it can provide invaluable information about community goals and aspirations that should be emphasized when weighing trade-offs and prioritizing policy options.

Practice tip: The following are some possible approaches for prioritizing policy options. Depending on the project, the research team may support local partners with a prioritization process. For example, they may help to create and administer a survey to be completed by local partners. Or, they may organize and facilitate meetings where local partners can use tools like prioritization matrices to help weigh and compare options.

- **Survey.** The individuals leading this step can can conduct an online survey asking engaged partners, leaders, or decision-makers to rank and prioritize the policy options. There are many survey builder tools that researchers can use (e.g., Microsoft Forms, Google Forms, SurveyMonkey), and many have ranking functionality. In a survey, respondents will weigh pros and cons of each option independently, based on their prior knowledge and experience and the assessment results shared by the research team. Each respondent may place different weight on the various assessment criteria – and that's OK. (This approach shares some similarities with the Delphi method for decision-making, which is briefly described in the **Developing and Using Processes to Set Priorities** section of the Community Toolbox. For a deeper dive, refer to **this article**.)

- **Prioritization matrix.** Alternatively, local partners and decision-makers can use a prioritization matrix. Compared to a survey, a prioritization matrix places less weight on the feedback of a diverse range of partners because it is logistically difficult to complete the matrix with a large group. For more information, refer to the following resources:

  □ The Public Health Informatics Institute **Prioritization Criteria webpage** and downloadable *Project Prioritization Matrix* worksheet

  □ The Minnesota Department of Health's **Prioritization Matrix webpage** and downloadable template

  □ The **Guide to Prioritization Techniques** from the National Association of County and City Health Officials (see section beginning on page 10)

DOUGLAS COUNTY SPOTLIGHT: GROUND TRUTHING

Following assessment, DCHD and ChangeLab Solutions convened separate advisory group meetings focused on education and youth mental health. Each meeting was 90 minutes long and was conducted virtually via Zoom. Participants included some of the same individuals who engaged in scoping, as well as additional local and national subject matter experts and board of health members. Participants received discussion questions approximately one week before the meeting along with a streamlined table with policy options for consideration (16 education policies, 12 youth mental health policies). The policy options were organized based on the subdomains identified during scoping: workforce development, family engagement, and school discipline for education, and workforce development, family support and care coordination, and reimbursement models for youth mental health.

Following the meetings, participants received a survey asking them to rank the policy options within each subdomain and to provide written feedback about political feasibility and potential implementation challenges related to the various options, among other things. Based on the feedback received via the group discussion and survey, ChangeLab Solutions further prioritized the options to include the top six policies (two per subdomain) for each topic.

As a final step, DCHD and ChangeLab Solutions presented the policy priorities to the local board of health, with a member facilitating the discussion as a trusted partner. Members then completed a one-question survey to rank the policies within each topic to identify their top near-term priorities for education and youth mental health.

In addition to documenting the priorities that emerged from the policy scan, ChangeLab Solutions also documented feedback gathered during the ground truthing phase that could inform policy development and implementation. This included examples of differences in policy design across jurisdictions and implications for efficacy, as well as resources and conditions needed to facilitate smooth implementation. All results were reported in a final memo, and DCHD committed to sharing about lessons learned from their process in various ways, including through this toolkit.

Takeaways & lessons learned

Deciding how many policies to share with partners in the ground truthing phase requires a fine balance. On one hand, researchers may be hesitant to cut too many policies from the list before receiving feedback from partners. On the other, partners with limited time may appreciate a more streamlined list of options to consider. Researchers should make decisions based on their unique context, goals, and understanding of their partners' needs.

Including a mix of both local and national partners can be helpful in the ground truthing phase. While local partners have deep insights about community priorities, national partners can offer insight about the realities of implementing certain policies or additional information about feasibility that may not be reflected in published literature.

Sharing & Using Policy Scan Results

Policy scans aren't just research for research's sake — they're about finding the most promising policies for a community to make positive change in real people's lives. This section includes information to help governmental public health practitioners complete the next steps of the policy process:

☑ Disseminate policy scan findings.

☑ Dive deeper into a set of policy priorities identified through the research.

☑ Work with key partners to develop and adopt policy priorities.

Disseminate findings

Best practices recommend that the people most affected by policy scans and other types of research should have access to and be able to fully use the results and information for their own purposes.[61]

At a minimum, governmental public health practitioners should consider the following strategies for disseminating the findings and recommendations from a policy scan:

- Make the results publicly available in some form. This could include publishing a fact sheet or project summary on the agency's website, hosting a webinar, issuing a press release, publishing a journal article, speaking at conferences, or presenting to local workgroups, coalitions, or community forums.

- Be transparent about the methods and processes used to complete the policy scan, including acknowledging the contributions of community partners.

- Share the findings in ways that both community members and technical experts can understand and use to advance their own efforts and goals. This may require tailoring information to different audiences, such as the general public, public health practitioners, and policymakers and other elected officials. Whereas policymakers and elected officials may benefit from technical briefs describing policy priorities identified through the scan, community partners may benefit from fact sheets, informal presentations or facilitated discussions at community meetings, or other types of communications. Governmental public health practitioners should ask decision-makers and community partners directly about the types of resources and information they would find most helpful.

Dive deeper into policy priorities

Sometimes, policy scans can be a springboard for additional research that explores policy priorities in greater depth and informs subsequent steps in the policy process. The following are some examples of research that can build on a policy scan:

- In-depth case studies or interviews to learn more about peer jurisdictions' experience with the policy priorities, what it took to enact them, and how they function in practice

- A legal epidemiology project to learn about how one type of law or policy that was identified as a priority is designed across jurisdictions and how differences influence policy efficacy

- Detailed economic analyses of policy priorities, such as cost-benefit or cost-effectiveness analyses, to assess whether the estimated social benefits of a proposed policy justify the projected costs: (1) to government for administering the policy, and (2) to existing businesses for complying with it[62]

Work with key partners to develop & adopt policies

Governmental public health practitioners can also work with partners to develop and adopt policy priorities (step 4 of the policy process). Policy development involves writing and editing proposed language to ensure the the final policy is legal and will achieve its intended goals. Depending on the type of policy (e.g., legislation, regulation, or little "p" policy), these steps may be led by lawyers (e.g., city, county, or agency counsel), policymakers and their staff (e.g., city council members), or agency or organizational leadership. Regardless of who leads, practitioners can share pertinent information from the policy scan to support this task. This could include examples of the policy text from peer jurisdictions, information shared by subject matter experts about key design features, or community wishes for the policy's contents.

Once the policy is drafted, governmental public health practitioners can work with community partners to advocate for the policy's adoption. Ideally, practitioners will have established a strong coalition to support these efforts through the engagements conducted during the policy scan.

THE DIFFERENCE BETWEEN ADVOCACY & LOBBYING

Although governmental public health practitioners often face restrictions when it comes to grassroots and direct lobbying, there is a wide range of advocacy-oriented activities that are not considered lobbying, which can help move policy proposals forward. ChangeLab Solutions' **Public Health Advocacy: The Basics webinar** distinguishes between lobbying and advocacy and provides important guidance for agencies and organizations considering policy change. In brief, the following activities are generally not considered lobbying, though it is always a good idea to consult with an attorney licensed to practice in your jurisdiction to confirm what rules apply:[63,64]

- Coalition building
- Educational campaigns
- Best practice and success story sharing
- Nonpartisan analysis, study, or research
- Broad dissemination of evidence-based policy approaches
- Presentation or testimony in response to direct requests
- Sometimes, regulatory or administrative advocacy[65]

Further, communication between government officials within the same jurisdiction and level of government about the development of administrative regulations and other non-legislative policies is typically not considered lobbying; it's just government business.[66] For example, a local health department could collaborate with the local planning department to develop a general plan to guide community development in a way that promotes health and well-being.

For additional advocacy tips and information, consult the resources available from the American Public Health Association's **Speak for Health initiative**, as well as the Global Health Advocacy Incubator's **Research for Advocacy Action Guide**.

Conclusion

As readers take the next steps in using policy to support core public health functions and address SDOH in their communities, we hope that this toolkit offers valuable guidance for research and action. In particular, we hope that readers will have an increased understanding of how to leverage policy scans to support the identification, assessment, and prioritization of policy options in collaboration with community partners.

Policy change can be a long process. At the end of step 3, changemakers will have already spent significant time assessing community needs, hosting meetings and other engagements, researching possible policy solutions, and gathering feedback from community members and decision-makers. It's important to note that while the process is long and can be slow at times, it can lead to healthier communities in the future.

Acknowledgments

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