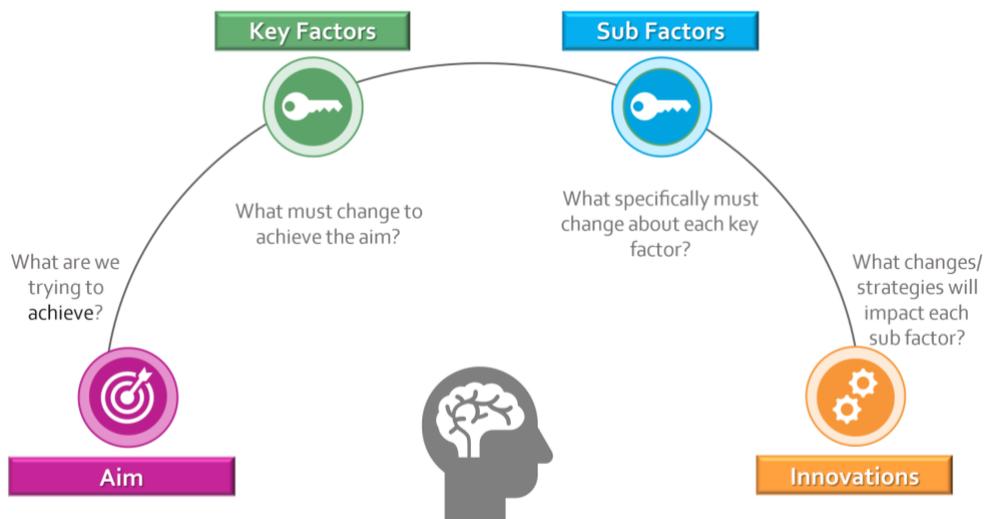


# Day 2: Finding Your Path Forward

## Key Driver Diagram

Visual summary of the overall strategy to address your challenge that:

- Shows all the possible pathways of change
- Helps identify scope and areas of influence
- Prioritizes areas of focus
- Communicates the big picture strategy



## Key Driver Diagram Tool

Use the diagram to help your team capture your possible options for change. Follow the prompts below to create your diagram.

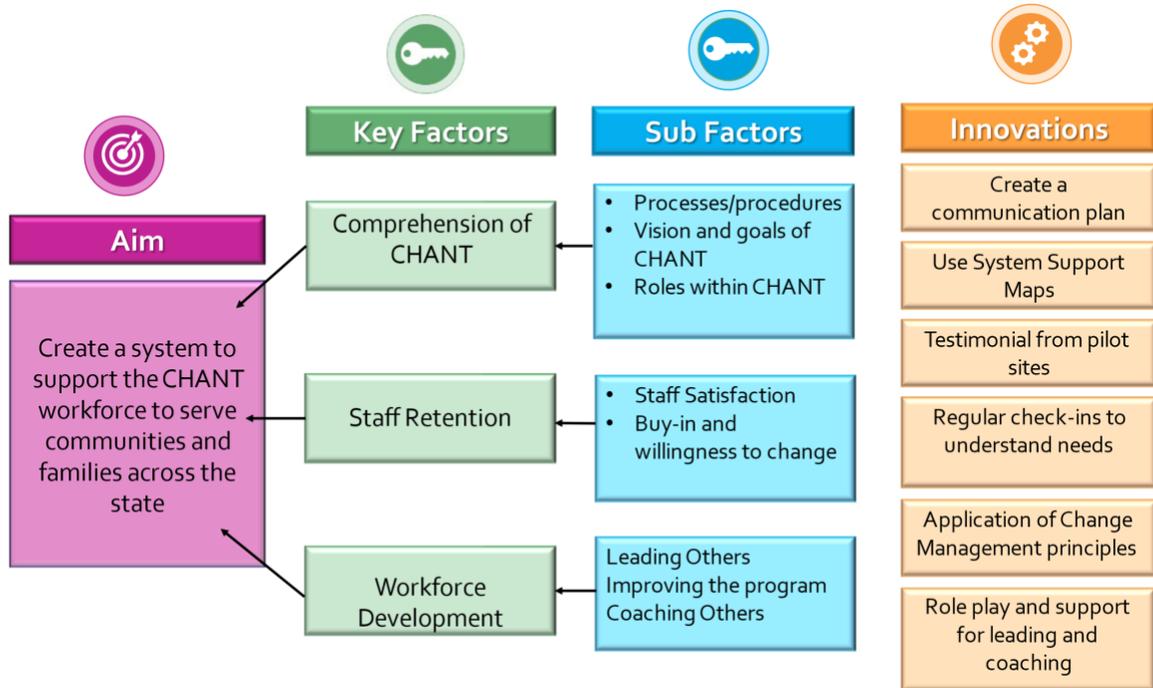
| 1. What are we trying to achieve?   | 2. What must we change in order to achieve the aim?   | 3. What specifically must change about each key factor?   | 4. What changes/strategies will impact each sub factor?   |
|---|---|---|---|
| <br><b>Aim</b> | <br><b>Key Factors</b> | <br><b>Sub Factors</b> | <br><b>Innovations</b> |
| We aim to improve...  | Key Factor #1   |   |   |
|   | Key Factor #2   |   |   |
|   | Key Factor #3   |   |   |
|   | Key Factor #4   |   |   |
|   | Key Factor #5   |   |   |

Click [here](#) to access a blank full-size version of this tool.

# Key Driver Diagram Example

## Background

The Tennessee Department of Health created, Community Health Access and Navigation in Tennessee (CHANT), which merged best practices of three existing programs: Children’s Special Services (CSS) – Tennessee’ Title V CSHCN, Help Us Grow Successfully (HUGS), and TennCare Kids Outreach. These programs are administered / coordinated at the state level, but services are provided at the local level and are delivered by local health department staff. The aim of CHANT is to (ENGAGE) specific individuals within communities who are most likely to have poor health outcomes and address (NAVIGATE) their specific needs (medical and/or social) and measure the results of this care coordination (IMPACT). For their Workforce Development project, the Tennessee team, aimed to build a system of support for the workforce as they carried out the CHANT program. The team took key variables from their Causal Loop Diagram and built the below Key Driver Diagram:



Click [here](#) to access another example.

## Document Your Key Driver Diagram Aha Moments!

# Day 4: Mutual Learning Opportunity – Identifying What Works

## Discover What's Out There

- AMCHP-<http://www.amchp.org/Pages/default.aspx>
  - Innovation Hub- <https://www.amchpinnovation.org/>
- The Public Health Foundation-  
<http://www.phf.org/resourcestools/Pages/default.aspx>
- de Beaumont Foundation-<https://www.debeaumont.org/>
- National Network of Public Health Institutes-<https://nnphi.org/>
- MCH Digital Library-<https://www.mchevidence.org/library/>
- MCH Navigator-<https://www.mchnavigator.org/>
- MCH Evidence Center-<https://www.mchevidence.org/>
- What Works for Health-<https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health>
- NACCHO's Model Practices Database-<https://www.naccho.org/membership/awards/model-practices>
- California Evidence-Based Clearinghouse for Child Welfare-<https://www.cebc4cw.org/>
- Family Engagement Inventory-<https://www.childwelfare.gov/FEI/>
- The What Works Clearinghouse (WWC)-<https://ies.ed.gov/ncee/wwc/>
- Evidence-Based Practices Resource Center-SAMHSA-<https://www.samhsa.gov/ebp-resource-center>
- CDC: The Community Guide-<https://www.thecommunityguide.org/>



### Don't Forget to:

- Engage folks with lived experience related to your challenge or who will be impacted by your project
- Take a look at your individualized evidence report from the MCH Evidence Center
- Connect with other teams in this cohort working on similar challenges
- Identify reach out to organizations or people working on similar challenges within MCH or other sectors

# Synthesizing the Evidence Tool

**Instructions**

- 1) List the **key factor** and **sub-factors** you intend to address.
- 2) List **innovations** to address the sub-factors.
- 3) Summarize key evidence for each innovation in the columns to the right.
- 4) Identify areas where additional evidence/information is needed and determine a plan for collecting the information.

  
Key Factor

  
Sub Factors

  
Innovations

| Evidence   | Core Components  | Fit   | Equity Insights   |
|--|--|---|---|
| <ul style="list-style-type: none"> <li>What does <i>documented evidence/information</i> say about this innovation?</li> <li>Is this innovation aligned with the evidence that has been defined/ articulated by the community/key population?</li> <li>What do community practitioners say about the innovation?</li> </ul> | <ul style="list-style-type: none"> <li>What are the innovation's key ingredients?</li> <li>How does the innovation link to a theory/ framework?</li> <li>What resources (time, people, materials, etc.) are needed to implement the innovation?</li> <li>What supports are needed to implement the innovation (e.g. staff skills, organizational policies/processes, and leadership)?</li> </ul> | <ul style="list-style-type: none"> <li>How is the innovation aligned to the community's/key population's needs, values, and preferences?</li> <li>How does the innovation fit within existing environmental, political, and organizational contexts?</li> </ul> | <ul style="list-style-type: none"> <li>Where did this innovation come from and for whom was it developed?</li> <li>What are potential unintended consequences of pursuing this?</li> <li>How might it negatively impact certain communities or benefit some more than others?</li> <li>How does it address a root cause(s) of health inequity?</li> </ul> |
|  |  |   |   |
|  |  |   |   |
|  |  |   |   |

Click [here](#) to access a blank full-size version of this tool.

## Additional Resources and Materials

### Evidence Resources

Note: This list of resources is not exhaustive and is instead meant to guide your thinking in framing your health challenge in terms of race and equity and to help identify potential equitable innovations.

#### Identifying Evidence

- Community-Defined Evidence/Community-Defined Practice
  - <https://www.cibhs.org/post/building-evidence-summit-community-defined-practices>
  - <https://www.cibhs.org/post/community-defined-practices-capacity-building-project>
  - [https://nned.net/docs-general/CDEP\\_Final\\_Report\\_10-7-09.pdf](https://nned.net/docs-general/CDEP_Final_Report_10-7-09.pdf)
- [Research Justice](#): Addresses structural inequities in knowledge development and access to information.
  - [Research Justice Facilitator's Guide](#)
  - [Introduction to Research Justice Webinar](#)
  - [Decolonizing Research Community Guide](#)



## Assessing and Selecting an Innovation

- [Racial Equity Impact Assessment](#): This tool systematically examines how different racial and ethnic groups may be affected by a potential action or decision.
- [Hexagon Tool](#): This tool uses data systematically to make informed choices about which evidence-based innovation will fit within a given context. This tool can also be used to determine the fit of a strategy once key components have been identified/developed.
- [Health Equity Impact Assessment](#): This assessment tool can be used to identify unintended potential health impacts (both positive and negative) of a policy, program, or initiative on vulnerable/marginalized groups within the general population.
  - Example: [North Carolina Health Equity Impact Assessment](#)

## **Evidence and Equity Reflection Questions**

- 1) Reflect on the data and information you've collected/refined in the 5Rs Handout, Defining the Challenge Handout, Aim Statement, and Causal Loop Diagram:
  - What stands out?
  - How do you plan to use the data/info to address your challenge?
  - What biases may impact how you analyze or use these data?
  - What information is missing? What data may be missing that would reveal health inequities? How can you obtain those data?
- 2) In thinking about evidence:
  - Where can you find more information about "what works"?
  - What sources of evidence have you used before?
  - What resources do you have to help you identify potential innovations?
  - What might prevent you from identifying potential innovations?
- 3) In thinking about potential innovations and filling any gaps in your understanding of what could work"
  - How can you engage the community to identify what they are already doing to address your challenge?
  - How can you ensure you identify something that works across multiple levels of the system you are working within?
  - How can you ensure "what works" is addressing a root cause of health inequity?
  - How can you ensure this will prioritize the history and context of different racial and cultural groups so that institutional and structural inequities are explicitly addressed?
- 4) What organizations, communities, or individuals can you partner with to help you address your challenge? Refer to your Systems Support Maps and the "Engaging with People who have Lived Experience" session.
  - Consider organizations/communities that are already doing the work.
  - How can you support them to sustain this work/scale it up?

5) How might you support the organizations/individuals/communities you identified above to ensure their perspectives and experiences are respected and valued? How can you ensure these folks are supported to be active decision makers throughout implementation/project/program activities? Consider how you can:

- Create leadership opportunities for community representatives
- Hold meetings at times and locations that are convenient for everyone
- Prepare people for meetings and as well as follow up after meetings
- Co-create agendas with community input
- Meet the needs of all cultures and languages represented
- Compensate people for their time and expertise using a method that works best for them
- Establish a culture that embraces diverse insights and ensures they are shared and incorporated into the decision-making process
- Create space for people to connect, raise concerns, build power and act in their own interests
- Support community representatives to generate their own ideas