This section builds on the goals and priority areas previously identified to select the activities and roles partners will play in implementing and achieving them.

**Research and Design Programs, Policies, and/or Activities**  
Once the partnership has identified goals and priority areas, it is useful to see what types of policies, programs, and other activities show evidence in addressing the priority area. This step helps partnerships use what is available and not waste time “reinventing the wheel.” Public health organizations are well versed in identifying evidence-based programs.

Often evidence-based programs and activities are burdensome for businesses to implement at full capacity from the start. Public health partners can provide support in how to break things down into more manageable steps. Note that this adds time to the process.

A policy analysis is also a useful tool to see what local, state, and federal policies may be contributing to the issue your partnership is addressing OR to see what local, state, and federal policies may not yet exist, but could positively impact the issue your partnership is addressing.

**Case Study: CIASP**  
CIASP focused on culture change within the industry. The alliance conducted a human resources policy audit which led to changing disciplinary policies in some companies to be more congruous with decreasing stigma around mental health issues by connecting workers to resources instead of firing them for drug and alcohol abuse use. This met goals for public health around increasing access to mental health and alcohol and drug use resources, in addition to decreasing stigma. However, it also met traditional business goals for retaining workers and reducing turnover rates. Of note, many collective bargaining agreements for labor unions have provisions for “last chance agreements” in relationship to alcohol and other drugs.

---

This is an excerpt from Safe States' “Strengthening Partnerships Between Business and Public Health: A Roadmap to Advancing Community Injury and Violence Prevention.” Access the full document here: https://www.safestates.org/StrengtheningPartnershipsRoadmap
Case Study: Ardmore

Clayton Lodes, President of First National Bank in Ardmore, OK, recognized the links between the mental health of his employees and the Adverse Childhood Experiences (ACEs) around which Mendy Spohn, Regional Director of Public Health, was building a community collaborative. However, the timing of the bank’s workday did not allow for all-day or multi-day trainings that are often found in public health. The bank opted to have shorter trainings over lunch breaks and implemented a chaplain resource that could be accessed by the employee when convenient. While it took more time, the bank’s focus on building recognition and supports for employees changed the culture of the bank to one that is recognized as being fully supportive of and invested in employees mental health and well-being.

Resources

- Several libraries of best practices and resources exist to further injury and violence prevention efforts including Safe States Injury Prevention Inventory, The Campbell Institute at the National Safety Council, the Suicide Prevention Resource Center, Safe Kids Worldwide, and the National Center for Injury and Violence Prevention at Centers for Disease Control.
- Several policy networks exist to address vital conditions and health outcomes including ReadyNation, Safe States Alliance, Trust for America's Health.
- The Network for Public Health Law has a number of resources on policy analysis including Evaluating Equity in Public Health Laws & Policies.

Assign Partnership Roles

Businesses may be implementing new programs and policies within their worksites, supporting larger community initiatives, managing the project, staffing the project, funding portions of the project, and/or contributing to metrics. Public health organizations may be playing many of the same roles, including evaluating the work. Clarifying what role each partner will play in the implementation of an activity is critical to maintain communication and expectations while not duplicating efforts or skipping critical steps in the work.

Equity Examination

It is important for the partnership to consider both the intended and unintended equity implications of their work prior to and during implementation. Evidence-based programs often are evidence-based in certain populations or are not tested in diverse populations. Critical questions to explore while reviewing evidence and developing the partnerships work in this area are:

1. Who are the intended beneficiaries of the work?
2. Who would not benefit from the work?
3. Does this work close equity gaps or create new gaps?
4. Under what conditions has this type of activity been successful?

Funder Considerations

Implementing activity is traditionally the space within which funders are most accustomed to working. Funders can ensure that expectations for impacts and outcomes they are prioritizing are realistically matched to timelines (i.e., long-term impacts have funding for longer time periods) and have the opportunity to promote equity.