Title of Design Lab:
Engaging with Federal Partners on Health in All Policies

Topic Champion(s):
- Jimmy Dills, Georgia Health Policy Center (GHPC)
- Holly Calhoun, Public Health Institute (CA)

Short Summary of session
GHPC & PHI walked through an exercise to see what PHIs and national partners are doing in terms of working with Federal agencies, Health in All Policies (HiAP) work, and work that involve Health in All Policies and multiple federal agencies. Types of collaboration with federal partners included supporting policy reform at the federal level, funneling federal funding into local communities, contractors of specific regulation, advocacy and implementation work. Type of HiAP work include safety and surveillance in communities, health impact assessment, and transportation planning. (See attached document for photos of Venn diagram of work related to HiAP and Federal Agencies)

After walking through the exercise of the different project and initiatives related in HiAP and collaboration with Federal agencies, discussion turned to how NNPHI and public health institutes can support and collaborate with one another to support advocacy and implementation work. Assistance and resources suggested including support in the spectrum of educating around HiAP (education versus non-partisan education), leveraging of different skills amongst the public health institutes and sharing resources, and building content knowledge amongst public health institutes and national partners (i.e. planning, fracking, safety, agriculture, etc.).

Key Takeaway points:
1. Public health institutes and national partners that participated in the discussion already partners with several federal agencies, including CDC, EPA, HUD, DOT, FDA, USDA, HHS, SAMSHA, and CMMS.
2. Public health institutes and national partners had a good understanding of HiAP. Major challenges they faced was surrounding the spectrum of education of HiAP to policymakers (education v. non-partisan education) and fostering a common language for different partners to collaborate with one another.
3. Several of the national partners already have existing HiAP training toolkits, including ASTHO, NACCHO, and TFAH.
4. In addition to leveraging skills and sharing resources, participants agreed that sharing and building content expertise on a variety of different HiAP work is useful for public health institutes entering new areas of work in HiAP (i.e. agriculture, safety, fracking, etc).
5. Getting funding, developing relationships, and building rapport with other sectors are crucial key steps to starting HiAP with federal partners.

Action Steps:
NNPHI could assist with the sharing of resources from national organizations and NNPHI members. Resources could include guidance/policies, toolkits, success stories, and modeling around working with different sectors.