What does a healthy Fairfax Community look like?	
Access to Comprehensive Health Care	• All residents have access to adequate and timely: - Primary health care - Mental health services - Dental care - Inpatient care • Residents of Fairfax County have a medical home and have access to health care and know how to use it • Readily available alcohol and drug treatment, remediation and diversion programs • All residents have a good medical home regardless of income and insurance status • All residents would have access to any needed mental health services • Better regulation of health insurers to provide better preventable medical care
Basic Needs	• Healthy school lunches • All residents would be employed if they wanted to • All communities in Fairfax have access to services, including basic needs (food, shelter, medical care, adequate housing) • All residents would have a home • Housing for all income levels • Access to affordable healthy food • All residents would have enough to eat • Tougher laws on job layoffs when it isn't economically necessary for the company
Healthy Lifestyle	• A bikeable, walkable community with bike paths that actually go someplace useful • Adequate, appropriate evening and weekend activities for teens and young adults (to avoid unhealthy activities) • An active community with diverse options for exercise/leisure • Residents, including children, are knowledgeable regarding healthy lifestyle choices • Prevention, nutrition, and exercise
Public Safety	• No cell phone related accidents • Safe public parks • Safe public schools
Strong Community	• An open community where neighbors know each other and are aware of each other's situation • Exposure to diverse cultures and different ways of living • Enrichment and a sense of community • Older adults live healthy and productive lives; older adults age in place • No overweight residents • Less traffic congestion • Infant mortality is below national level • All children immunized • Residents practice healthy behaviors

What would a successful Public Health System look like in five years?	
Community Involvement	• Collaboration of all groups to assist each other in important community outreach efforts to maximize community awareness and minimize duplication of effort • Community would be engaged (on community boards, lay health workers, etc.) • Community-wide involvement in prevention of selected chronic diseases - public health report cards on our progress as Fairfax Community
Innovative Services	• It [system] would continue and improve services to all residents • It [system] would continue to innovate and carry out state-of-the-art services
Cooperation and Communication	• Organizations that would communicate with each other effectively • Information sharing among agencies to identify related problems in families and in communities • Working with faith-based organizations to provide health-related services • The public health considered during the development approval process
Prevention/Education	• Education to families on how to access health services – participation of all family members • All residents know how to use these resources appropriately • Preventative care is supported and encouraged • Residents know importance of preventative care • Provide education on preventative care at communities in conjunction with other community events • Incentives for people to adopt healthy lifestyles
Coordinated Delivery	• Ability to access other issues and provide those services on site or nearby when providing health services • Many doors to access services rather than having to apply to each agency for services • Shared data collection system • Data collected is meaningful in real time
Access to Service	• Everyone would use/appreciate/understand the services – not just those with limited income resources • There would be more health centers/clinics to offer services/programs to help families with all needs • Equal access to care for all residents • A system that quickly disseminates information to diverse ethnic populations • Clear and attainable goals that are shared by the entire system • No delays in accessing necessary care • It [system] would continue to have dedicated and knowledgeable staff

What does a healthy Fairfax Community look like?	
Positive Health Indicators	• Number of household members who have access to County fitness centers increasing yearly • Low incidence of behaviorally-related illness (preventable disease) • Significance proportion of children and adults who are not overweight or obese • Having a large population of healthy senior citizens with age greater than 80 years old – number increasing yearly • Active TB cases are reduced substantially • Number of people with diabetes, hypertension, and cancer are really treated • Infant mortality rate is reduced overall and especially among African American community (disproportionate) • Percentage of depression treated compared to the number of total population of Fairfax
Affordable Housing	• Homelessness is eliminated
Access to Care	• Where all our neighbors have fair access to quality health care • All residents have access to affordable, accessible health care • Preventative health care is available for everyone • Everyone has access to quality, timely health care
Development of Communities	• Multiethnic conflict resolution • Cross community communication and awareness • All households prepared for emergencies • Safe neighborhoods so children can play outside • After-school activities and affordable care for elementary and middle school children (* needs to be oriented toward older kids)
Environment	• Clean air and water • Healthy streams • Sustainability • Non-polluting energy sources • More trees, less concrete • Good stewards of environment • Everyone and every organization recycles paper/plastic/etc.
Built Environment	• No traffic congestion • Walkable living spaces, for example sidewalks, bikepaths, pedestrian overpasses • More connectable trails • Abundant recreational activities for all income levels • Comprehensive, integrated, accessible trail network • No 10,000 square feet houses on 5,000 square feet lots • Outdoor recreation and activities are available for all
Attitude	• Work/life balance for all • Every person has a fair chance to succeed in life • Number of days of vacation of workers – how do we measure happy population • Every person is fulfilling his/her potential

	• A smile on every person's face every day • More gatherings in communities for fun • High numbers of parties in households and communities • No stress for everyone
Food	• Every person has access to healthy food • Access to quality locally grown fresh food at a reasonable price • Everyone can afford healthy, fresh, unprocessed food • Healthy food • Policies in place where only healthy food is served at school, etc.
Engaged Citizenry	• Educate public on health issues • Citizenry is informed and engaged
Schools	• Every person has access to quality education
Adequate Resources to Support Basic Public Health Services	• Prevent outbreak of health issues

What would a successful Public Health System look like in five years?	
Appropriate Resources	• Money, people, knowledge • Sufficient to treat adverse health outcomes • Identify public health needs • Monitor public health trends • Respond to public health needs • Sufficient professional resources and infrastructure to meet demands • No or minimal duplication of services • Resources available to address public health needs • Have adequate resources available to address health education and prevention
Health Insurance Coverage	• Health insurance for all • No lack of health insurance in low income families or non-working people • Less fear of lack of medical coverage or health insurance
Access	• Access to drugs and treatment when needed • Allow equal access regardless of race, age, and citizenship • Equal access to transportation infrastructure info • Everyone has access to quality health care • Increase in access to all health services • Provide access to tests for all • Have access to medication and drugs to treat all
Education/Health Information	• Citizenry is engaged and informed on all public health issues • Better public understanding of public health and public health system • Review and revise health curriculum in public schools • Every person knows where to go for public health services • Everyone has access to public health resources and knows where to go to enroll or knows how to access those health resources • Incentives for healthy behaviors • Have a health education program • Community understands value of public health • Greater public health partner, for example BMI on every child • Health education in public schools for all ages
Integration and Monitoring and Assessing and Implementing Strategies	• Integration of MDs and Nurses and prevention and treatment of diabetes, hypertension, breast cancer, prostrate cancer for low incomes and minorities and environmental health and other professional disciplines • Fully integrated primary and behavioral health system • Have trained staff to properly evaluate mental and physical health • Environmental health threats have been identified along with strategies to address them • System develops and implements measures to address health inequities • Identify and assign regulatory authority to control/ban environmentally unhealthy building practices
Significant Prevention	• Define meaningful public health incentives for healthy behaviors

Focus	• Have preventative care in place • Decrease preventable disease • Free prevention screening for diabetes, hypertension, mammograms…
Collaboration and Partnership	• Every entity knows its area of expertise/skill/role • Various service delivery providers collaborate • All the entities, not just the obvious few, actually work together and plan together
Advocacy	• Develop grass roots organizations to define community goals for physical activity and nutrition • Eliminate junk food from the public schools

What does a healthy Fairfax Community look like?	
Good Community Design/Built Environment/Urban Planning/Architecture/Infrastructure	• Mixed generational communities – for all the mutual influences that could be created – healthy families, healthy elders, etc. • All meals taxed to bring in more revenue to support health promotion and wellness activities • Water and fruit vendors everywhere • Mind/body integration messages are rampant and well understood • Healthy food choices and nutritional information are available and promoted in all communities • Fairfax County will be a walkable community – new subdivisions and commercial development will enhance the built environment to optimize walking and safety • Smokefree • Food supply will be safe • Next flu pandemic will not happen • Farmers markets in every neighborhood – may be subsidized for lower income people • A community with a clean environment without smoke, drugs, pollution • We look more like Seattle and Portland (we are active/weight loss) • Walking and biking trails everywhere • Calorie, fat, sodium, etc. information on all restaurant menus including fast food • The workday is shortened by half hour by Fairfax County and other major employers to allow for employee exercise onsite • Have a low cost exercise venue (gyms) in every neighborhood • Access to resources that promote positive health outcomes – particularly among vulnerable populations: walkable communities, access to healthy foods, access to fitness applications • Equity of access to service across the board • Services provided in community to cover one hundred percent of need
Education from Childhood in Regard to Prevention Awareness and Access	• A community that is better educated about how to live a healthier life • A community with a children who receive information/education about healthy choices • Children who value the importance of having healthy bodies and minds
Health Challenges are Interrelated, Impact on Any Health Challenge Affects Others	• Positive healthy ripple effects: decrease diabetes and heart disease, decrease dementia, decrease depression, decrease substance abuse and obesity • A healthier Fairfax will produce: greater economic security and prosperity, greater social integration, greater civic engagement, greater tax revenue with lower tax burden, increased population with fewer social ills • Violence will be recognized as a health/community issue and will be reduced • Public/private systems overlap and collaborate throughout the County
Improved Health Indicators/Outcomes and Healthy Behaviors	• Improve health outcomes for vulnerable populations • Fairfax County will have significant declines in unhealthy behaviors, for example smoking, poor diet, and alcohol and others • A shift from processed food to the Mediterranean diet – easily found fish, veggies, whole grain, etc. • A community that spends 30% less time in cars • All Fairfax County health status indicators will be better than Healthy People 2010 or 2020 Goals

	• A community with low rates of preventable disease • Reduction in indicators of poor health – low birth weight/infant mortality, obesity in youth, and diabetes in youth, etc. Medical errors will be significantly reduced • Comprehensive database to provide optimal services for clients • In any crowd/public transportation/schools/townhall meetings/religious worship/workplaces/especially certain workplaces such as hospital – only 1-10 people are obese

What would a successful Public Health System look like in five years?	
Accessibility to health care to services for everyone	• Health insurance, including access to medications, would be available and affordable to all • All individuals in Fairfax County have access to primary health care services • No child born in Fairfax County is classified as a low birth weight baby • No waiting list; no wrong doors—an ability to access services at the entity that is linked to other needs-smooth transitions • Accessible in the matter of services provided (transportation, hours of operation, language, cultural competencies) • Any person needing health care could enter the health care system 24-7 for treatment • All people in need are aware and can access services • Primary care practices with ancillary services on site (e.g. lab, mental health, substance abuse treatment) • Transportation to health care sites
Care and services that Address Need	• Comprehensive home based services to those who need them; outcomes of home care not driven by third party payors but true rehab outcomes • All children regardless of family's income have access to well child medical and dental care as well as sick care and specialty care as needed • Many points of entry for people in need • Very coordinated, seamless entry points that communicate to meet a person's needs
Systems Approach	• Fairfax County has a functioning health improvement plan • Health care information technology • Key leaders in Fairfax County can actually describe the basics (the ptt system) and articulate what is important about it • Open to changes in its membership over time, not stagnant, responsive to community emerging needs • There is an active ongoing health planning process in Fairfax County (e.g. health improvement, health care, safety net, health systems)
Closing gap – Vulnerable populations & Underserved	• Frail elderly in Fairfax have a safe environment in which to live • Premised on equity and value proposition that no group or type of people deserve health challenges or should endure those challenges
Proactive, preventative care (not just about medical care)	• Preventable and not currently preventable health challenges are equally relevant • Will disseminate health promotion and wellness opportunities (single message coordination, e.g. childhood obesity, Type II diabetes) • Strong prevention and awareness across the public health system entities
Coordinated community systems (local, national, global)	• More integrated and better communication between all services to the community • All of the local public health system entities will be linked electronically • Communication, collaboration, coordination among key entities in the public health system

	• Elements of the public health system-public and private have an active working council • Public private collaboration with commitment with sustained and substantial services • Organizations that make up the broader public health system would know and embrace their role in the system • Use of universities to drive research-based practice within the system • Resource available to the community to obtain information and awareness of health issues
Sense of community; social compact and community assets	• A Public health system that taps into the strengths and assets of the community to promote health and address barriers to health • Working toward commonly held/understood public health outcomes
Aggressive goals with commensurate resources	• 20% fewer Fairfax residents smoke than is the case today • 100% of children attending FCPS are fully immunized • Babies born in the counties are planned, welcomed and cared for and linked to a medical home until age 18 by an electronic medical record

What does a healthy Fairfax Community look like?	
Infrastructure to support universal access to quality health care including physical, mental and dental health care	• Various public health coverage for people who have no insurance • More primary care access points • Hospital system competition • Good health coverage countywide • Community where older adults have appropriate in home support for health needs • People not currently eligible for services due to income restrictions but who don't have health insurance are able to access health services • Improve access/decreased barriers for undocumented aliens • County will build good communication channel to reach out to various communities • Decrease premature births • Infant mortality rate, preventable disease, and death rates lower than national average • Easy access to public health resource • Equal health coverage to all communities • More access to health services covered by insurance benefits • Public knows where to find various county health services • Access points throughout county especially in traditionally neglected neighborhoods • Healthy smiles, good access to dental care for everyone • No early childhood caries • Mental health services are considered to be part of "health" • Support and resources for parents and children with autism
Universal access and use of public spaces	• Diverse community members using public spaces regularly • A community with easily accessible parks and green spaces for all citizens • More sidewalks • Active, visible, interactive and diverse community members (age, mobility, disability) • Environmental stewardship visibly exercised • Town centers in neighborhoods to stores to encourage walking
Healthy lifestyle and habits	• Healthy dietary habits • A community with wide/equal access to healthy food choices • Reduced obesity • Walking • End HIV infections • Ownership/responsibility taken by individual to improve health status • Walkable bikeable community • Bicycling • Spiritually balanced • Physically fit community • A community with limited if any illegal use of drugs

	• Tobacco free community • Decrease in drug and alcohol abuse
Public health education for children	• Schools teach health information starting in kindergarten • All public school children have daily access to a registered nurse • PE everyday in school

What would a successful Public Health System look like in five years?	
Coordination for emergency response	• Turn key disaster response to pandemic and manmade • Coordinate emergency response with medical reserve corp and private/public relief agencies, like Red Cross
Continuous workforce development	• Quality/well trained professionals to deliver services
Partnership among public, private and community entities-collaboration and commitment and goals, services and policies	• Public, private collaborations to promote, implement, and sustain the desired health policy • Coordination between agencies • Effective integration of communication among stakeholders and organizations • Support an active involvement of all partners • More partnerships; less duplication • No duplication of efforts/resources • Easy access and willingness to work together among partners • Delivering care without delay • Partnership with various agencies such as with schools, urban plan, religious/churches, etc. • Frequent and open communication among groups • Public/community is educated about what the public health department does (and what it doesn't do) • Community and business and government planning public health strategies together
Access from any point in the system	• Residents can easily access services from any point of the system • One stop shop for citizens • Every member of the community knows how to access public health services • One stop point of access to needed services and support across public and private sectors • Citizens are aware of the resources available to them
Built in system/process for quality improvement and feedback	• Public health system holds routine meetings (quarterly?) of all stakeholders to discuss issues/progress/policies, etc. • A system that is flexible and adapts to changing needs, priorities, and accepts input from the community • A planning and implementation system that can be inclusive of all population groups, racially, language, culture, and religion • Survey citizens to determine what the needs are • A system driven by evidence-based decision making