### What is policy, systems, and environmental change?

Policy, systems, and environmental change (PSE change) refers to public health interventions that modify environments to provide healthy options and make healthy choices easy for everyone. PSE changes maximize public health cancer control resources by extending the impact of interventions to reach populations instead of individuals. PSE change is applicable to all stages of the cancer control continuum, and to various settings including communities, neighborhoods, schools, workplaces, and healthcare settings.

### What’s the difference between policies, systems, and environments?

There are some distinctions between policy, systems, and environmental change, but there is also a great deal of overlap. Designating a single PSE category for an intervention isn’t necessary because all three categories reach a larger population, which is the key advantage of using a PSE approach.

<table>
<thead>
<tr>
<th>Policy</th>
<th>Systems</th>
<th>Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definition</td>
<td>Changing laws, regulations, resolutions, ordinances, or rules</td>
<td>Changing processes or rules of an organization, institution, or system</td>
</tr>
<tr>
<td>Settings</td>
<td>Legislatures (national, state, local), government administrations, healthcare settings, schools, worksites, community organizations</td>
<td>Healthcare delivery and insurance systems, schools, worksites, communities, parks</td>
</tr>
<tr>
<td>Examples</td>
<td>Increasing tobacco taxes, passage of the federal Affordable Care Act</td>
<td>Revising organizational procedures to increase cancer screening rates among patient population</td>
</tr>
</tbody>
</table>

#### Examples of Overlap
- Smoke-free policies
- Healthy vending machine policies
- Adding night/weekend healthcare provider/clinic office hours
- Zoning restrictions/limitations on fast food establishments
- Farm-to-school programs

### What’s the difference between a program and a PSE change?

<table>
<thead>
<tr>
<th>Setting</th>
<th>Program/Event</th>
<th>PSE Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>School</td>
<td>Celebrate national nutrition month</td>
<td>Add fruits and vegetables to cafeteria lunch options</td>
</tr>
<tr>
<td>Worksit</td>
<td>Hold a health fair for staff, offering blood pressure and skin cancer screening</td>
<td>Implement a healthy vending machine policy that offers healthy, affordable snacks</td>
</tr>
<tr>
<td>Radiology Facility</td>
<td>Hold a low-cost community mammography event</td>
<td>Change appointment hours to include nights and weekends</td>
</tr>
<tr>
<td>Hospital</td>
<td>Hold free breastfeeding courses for new moms</td>
<td>Implement WHO 10 Steps to Successful Breastfeeding</td>
</tr>
</tbody>
</table>

### What can my organization do?

The Maryland Comprehensive Cancer Control Plan includes many strategies that involve PSE change. Please consider using the examples on page 2 to guide the work that you do, and to inspire new PSE projects within your organization, community, and healthcare settings!

Finally, don’t forget to tell us about your projects and successes – send us an Implementation Reporting Tool, which is available online under Features at www.marylandcancerplan.org.
Policy, Systems, and Environmental Change Examples from the Maryland Comprehensive Cancer Control Plan

Primary Prevention

- Adopt state and local policies that restrict the sale, advertising, and promotion of tobacco products by (a) prohibiting the sale of menthol and any other flavored tobacco products; (b) require sale of non-premium cigars in packages of at least five cigars; and (c) adopt additional restrictions on the time, manner, and place of tobacco sales consistent with the First Amendment.
- Adopt policies in Maryland hospitals to provide inpatient counseling and treatment for patients that use tobacco.
- Adopt state and local policies that prohibit the smoking of tobacco products inside multi-unit housing, and inside of any daycare facility (including private homes licensed as such) at all times.
- Establish state-level policies and supports to promote healthy eating and physical activity for state employees.
- Implement programs to promote access to healthy foods for high-risk communities (i.e. virtual supermarkets, healthy corner stores, use of Electronic Benefits Transfer for WIC, SNAP participants at farmers’ markets).
- Develop models and guidelines for built environment policies that promote nutrition and physical activity through PlanMaryland, the state’s comprehensive plan for growth and development.
- Support workplace initiatives to encourage continued breastfeeding after return to work.
- Promote/integrate the use of sun safety educational curricula in elementary and middle schools.
- Encourage funding for the building of covered structures and implementing signage at public beaches and parks reminding people to wear sunscreen.

Early Detection

- Increase the proportion of primary care providers and specialists who utilize evidence-based approaches such as physician recommendation for screening, client reminders, and chart review to identify patients appropriate for screening (recalling patients for screening and surveillance testing to increase screening in practices).
- Utilize nontraditional methods such as navigators, community health workers, and lay health advisors to educate target populations.
- Incorporate system changes in healthcare provider settings that automatically order recommended cancer screenings for target populations.
- Support policies that allow work-time release to obtain cancer-screening services.
- Encourage state-funded or other healthcare systems to monitor adherence to cancer screening guidelines via electronic medical records systems.

Treatment and Survivorship

- Encourage more specialists or oncologists to practice in rural and underserved areas.
- Utilize patient navigators, community health workers, and case managers to increase access to treatment.
- Collaborate with pharmacies to ensure that pain medication is adequately stocked in all communities and explore legislation that would require pharmacies to stock pain medication.
- Ensure clinical support through hiring a skilled and certified team of interdisciplinary palliative care professionals and associated support staff in order to implement a palliative care consult service or other delivery model.
- Explore legislative options for expanding access to and payment for palliative and hospice care.

Visit the Maryland Comprehensive Cancer Control Plan website to view more!
www.marylandcancerplan.org