

Special Olympics Healthy Communities Criteria as of November 3, 2016

The vision of the Special Olympics Health program is to create a world where people with intellectual disabilities have the same opportunities to be as healthy as people without intellectual disabilities. To address the barriers - such as lack of access to quality health care, education, resources, and lack of capacity of existing systems of care, in 2012, Special Olympics in partnership with the Golisano Foundation, created Healthy Communities. Healthy Communities infuses health across all aspects of Special Olympics programming while working to improve year-round access to quality health care, prevention and wellness programming for people with intellectual disabilities. From 2012 to 2015, Healthy Communities had pilots in 14 SO Programs around the globe. Through learnings from 2012 to 2015 and in collaboration with SO Programs who were part of the Healthy Communities pilot, a set of criteria was developed for SO Programs to use as a framework that would help them transform their communities and improve the health status of athletes and others with intellectual disabilities. These criteria are meant to serve as a framework for SO Programs to be able to adapt to and address locally relevant health issues, enable SO Programs to leverage their existing strengths, seek innovative opportunities and work toward standardized benchmarks to track progress and contribute to the Special Olympics strategic goal of 100 SO Programs becoming Healthy Communities by 2020.

Healthy Community - Criteria for Recognition

To achieve Healthy Community recognition, all the criteria listed below must be met and reported on annually. Criteria 1 and 2 are to be achieved Program-wide. Criteria 3, 4, 5 and 6 are to be achieved within the selected geographic area(s). To maintain Healthy Community Recognition status, SO Programs will need to report on these criteria annually (15 April or 15 October).

SO Programs are encouraged to focus their work in geographic area(s) within their SO Program and then apply learnings and successes to additional geographic areas. The minimum requirement for a SO Program to receive Healthy Communities Recognition is one geographic area. As the Healthy Communities work within an SO Program grows into new geographic areas, SO Programs will be required to include those areas in their Healthy Community reports.

| | Criteria | Details |
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| 1 | All health grant requirements met. | This includes former and ongoing Fitness, Family Health Forum, Healthy Athletes, and Healthy Communities grants. For Healthy Athlete events that received grant funding, all Healthy Athletes screening forms need to be entered into HAS within 30 days of the event date. <i>Note: This is also part of the eligibility to apply for a Healthy Communities Grant.</i> |
| 2 | SO Program locally funds at least 50% of Healthy Athletes event costs across all Healthy Athletes® events within the SO Program. | To meet the criteria, no more than 50% of the costs of running SO Program-wide Healthy Athletes events can be supported by Special Olympics International grants. At least 50% of SO Program-wide <i>Healthy Athletes event</i> costs need to be covered by local grants/sponsorship or value-in-kind (VIK) donations of goods and services such as rental space, equipment, giveaways, supplies and |

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| | | materials (not including VIK of volunteer time or SO Program staff time). |
| 3 | SO Program offers at least three Healthy Athletes® disciplines per year within the selected Healthy Community geographic area(s) | Requires at least 3 different disciplines to be implemented at least once per calendar year resulting in a minimum of 150 athlete examinations within the geographic area(s) that the Healthy Community project is focusing to qualify for Healthy Communities. |
| 4 | 70% of athletes who receive referrals at Healthy Athletes® within the selected Healthy Community geographic area(s) have a place to go for follow-up care following a Healthy Athletes examination. | <p>Criteria must be met for at least two disciplines per calendar year. For athletes that are given a referral (as indicated on the HAS form), they either indicate they already have an existing doctor/dentist that they will book an appointment with or the SO Program connects the athlete to a specific health care provider, partner, or place to go to receive the care they need.</p> <p>Note: Special Olympics wants to ensure as many athletes receive care as possible. SO Programs are to establish partnerships to ensure that their athletes have a place to go to receive care for their referrals.</p> |
| 5 | SO Program offers health, wellness or fitness programming outside of Healthy Athletes events for athletes involving partners, coaches and/or families as appropriate with a minimum of 20% of athletes in the SO Program’s selected geographic focus area enrolled in an ongoing wellness program. | <p>Health, wellness or fitness programming is defined as reoccurring health education and/or engagement to improve health or prevent illness. To qualify, athletes must participate in 6 sessions minimum. For example, this could be nutrition lessons at 6 practices, 6 HIV awareness classes or a 6 week weight management program.</p> <p>Note: The health, wellness or fitness programming may occur as part of a sports practice, but it must be an ongoing health activity that is beyond just sports training or sports skills development. These can be organized by the SO Program or through a partner. <u><i>The ultimate goal is that one day all athletes are engaged in ongoing wellness opportunities and healthy activities!</i></u></p> |
| 6 | Sufficient sustainable resources to achieve the above criteria and deliver the project. | <p>Available staff and resources (including partners) necessary to achieve the criteria going forward.</p> <p>Note: If an SO Program is receiving a Healthy Communities grant, they need to be able to indicate how their work will be sustainable after the funding from SOI concludes.</p> |