

Agenda

9:30 - 9:40 am	Welcome and Roll Call - Senator Sherman and TBD
9:40 - 9:50 am	Approval of Minutes - Senator Sherman and TBD
9:50 - 10:20 am	Health Officer Readiness to Respond to Public Health Threats - Representative Marsh
10:20 - 10:30 am	Community Engagement Update - Katie Robert
10:30 - 10:50 am	SHIP Language Examples - Alia Hayes
10:50 - 11:20 am	Subcommittees and Workgroups - Ben Hillyard and Senator Sherman
11:20 - 11:30 am	Public Comment - Senator Sherman

SHIP Language Examples



NH DIVISION OF
Public Health Services
Department of Health and Human Services



Why we're here

- ▶ We are here to ensure that equity is front and center
- ▶ That ALL people in NH can lead a healthy life
- ▶ That no one is less than or other than what they want to be
- ▶ Opportunity, Community, Health, and Connectedness
- ▶ Ensuring that the end product is usable and engaging

To accomplish that we need...

Goal – What do we ultimately want to happen?

Objective – How will we know we are reaching the goal?

Strategy – What is one way to move toward the objective?

Activity – What is actually being done and who will support and lead?

Indicators and Metrics –
What will be measured to
show progress and direction
of movement?

Performance
Measures – What will
be measured?

OUTCOME

The SHA Process

- ☐ Establish a planning process or select model.
- ☒ Identify and engage stakeholders in planning and implementation.
- ☒ Engage in visioning and systems thinking.
- ☒ Collect or analyze data.
 - Health status.
 - Environmental scan and asset mapping.
 - Themes and strengths.
 - Forces of change.
 - SWOT.
 - System capacity.
- ☒ Summarize and present findings from the assessment.
- ☐ Communicate/vet priorities.
- ☐ Establish priorities and identify issues through priority setting.
- ☐ Develop objectives, strategies, and measures.
- ☐ Develop and implement workplan.
- ☐ Monitor, evaluate, and update the SHIP.

SHA Deliverables

- ✓ Partnership, coalition, or committee engaged to lead the process.
- ✓ Profile or report on health status data for the state.
- ✓ Findings related to health disparities and inequities.
- ✓ Analysis of community and stakeholder input about important health outcomes and determinants.
- ✓ Identified resources to effectively address important health issues.
- ✓ Plan for disseminating and seeking public and stakeholder input on key findings.

The SHIP Process

- ☒ Communicate and vet priorities.
 - ☒ Establish priorities and identify issues through priority setting.
 - ☒ Develop objectives, strategies, and measures.
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- ☒ Develop and implement workplan.

SHIP Deliverables

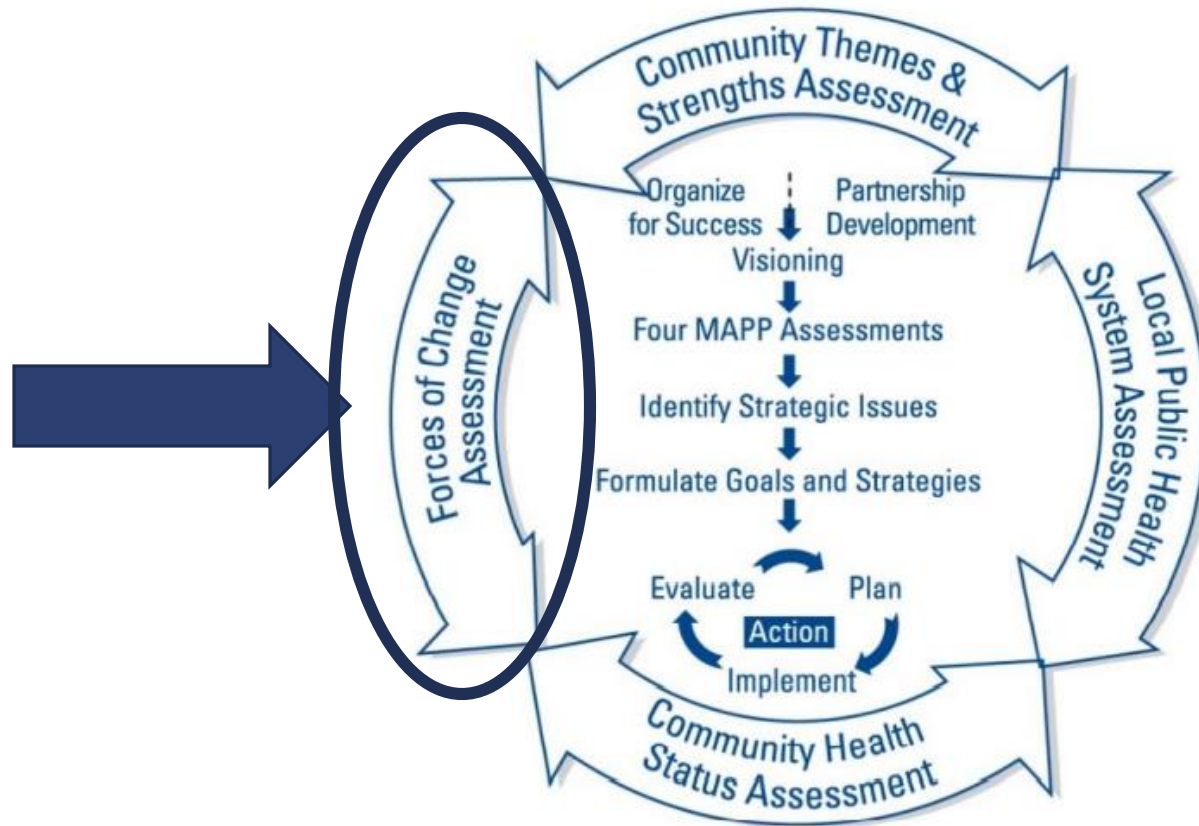
- ✓ Partnership, coalition, or committee engaged to lead the process.
- ✓ Plan for communicating priorities to stakeholders.
- ✓ Set of priority issues.
- ✓ Implementation plans for each priority issue.

SMART Goals

- ▶ S - pecific
- ▶ M - easurable
- ▶ A - ctionable/Achievable
- ▶ R - ealistic
- ▶ T - ime-bound

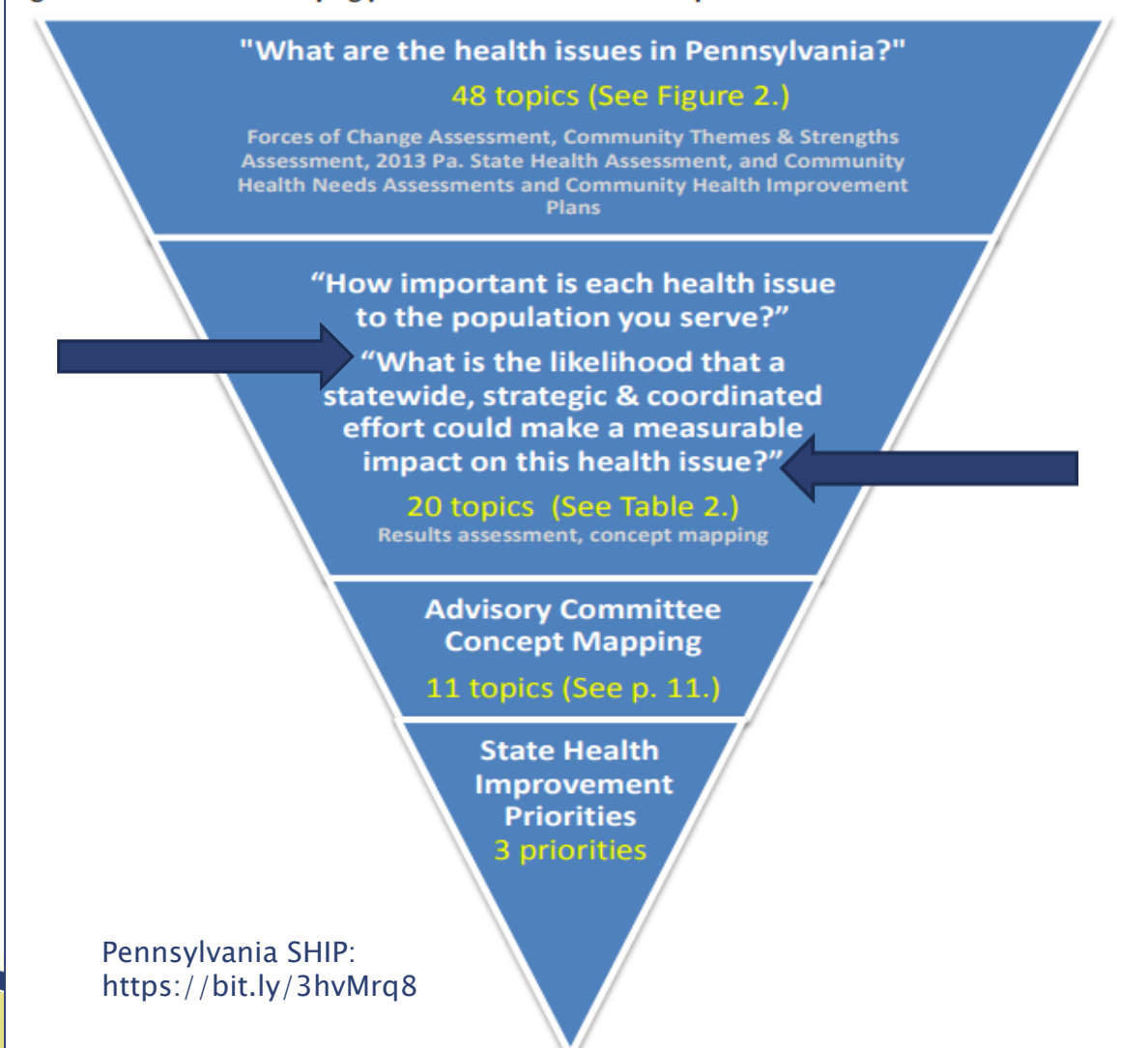
One model:

Figure 1: MAPP model¹



Multiple feedback points:

Figure 3: Process of identifying priorities for State Health Improvement Plan



Choosing focal points: example



► Criteria from Maine:

- Data
- Accountability
- Maximize impact of limited resources
- Best addressed at state level (vs. local level)
- Gaps in prevention exist
- Focus on ***prevention***
- Involves multiple sectors
- Stakeholder support
- Address health disparities

Tracking goals: example

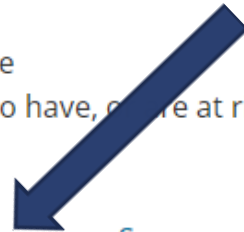
✓ State Health Improvement Plan 2013-2018

State Health Improvement Goals, Scorecard and Documents

Goal 1: Reduce the prevalence of chronic disease

Goal 2: Reduce the prevalence of individuals who have, or are at risk for, substance abuse or mental illness

Goal 3: Improve childhood immunization rates





[State Health Improvement Plan 2013-2018 Performance Scorecard](#) ➤

[State Health Improvement Plan 2013-2018](#) - This plan focuses on conditions that are preventable and can be addressed by the public health system: chronic diseases, substance abuse and mental illness, and childhood immunization rates.

[Appendix A: Vermont Recommended Evidence-Based Strategies](#) - Vermont recommended evidence-based strategies for tobacco cessation, physical activity and healthy eating, substance abuse prevention/intervention, mental health, and childhood immunization.

[Appendix B: Summary of State Health Improvement Plan Interventions](#) - Interventions to reduce the prevalence of chronic disease, reduce the prevalence of individuals who have, or are at risk for, substance abuse or mental illness, and to improve childhood immunization rates.

Tracking goals: example

- O SHIP Reduce the prevalence of chronic disease 		Time Period	Current Actual Value	Current Target Value	Current Trend
+ I Obesity	% of adolescents in grades 9-12 meeting physical activity guidelines	2017	25%	30%	↗ 1
+ I HPDP	% of adults meeting physical activity guidelines	2017	60%	65%	↗ 1
+ I	% of adults who smoke cigarettes	2019	16%	12%	↗ 1
+ I Tobacco	% of adolescents in grades 9-12 who smoke cigarettes	2019	7%	10%	↘ 5
+ I Obesity	% of adolescents in grades 9-12 eating vegetables 3 or more times daily	2017	18%	20%	→ 1
+ I Obesity	% of adults eating vegetables 3 or more times daily	2017	22%	35%	↗ 2
+ I Obesity	% of adolescents in grades 9-12 eating fruit 2 or more times daily	2017	33%	40%	↘ 1
+ I Obesity	% of adults eating fruit 2 or more times daily	2017	40%	45%	↗ 1
- P Obesity Nutrition and Physical Activity Strategies 		Time Period	Current Actual Value	Current Target Value	Current Trend
+ PM HPDP	# of strategies completed to increase access to healthy food in state facilities	Q1 2020	36	25	→ 2

Language Dos:



- ▶ Goal with *supporting components*
 - Objective
 - Strategy(ies)
 - Activities
 - Performance Measures
 - Assets
 - Lead Agency/Organization
 - Potential partners

Example 1: Do!

- ▶ Goal: Prevent and reduce smoking and other tobacco products
 - Objective 1: Reduce adult smoking rate from 17.3% in 2014 to 16.3% in 2020 (BRFS).
 - Strategy 1: Increase utilization of evidence-based tobacco cessation services, focusing outreach toward at-risk populations, Medicaid recipients, and pregnant and postpartum women and their families.
 - Strategy 2: Integrate tobacco cessation into behavioral health care treatment and services and educate tobacco users with behavioral health concerns about the benefits of quitting smoking.
 - Strategy 3: ...etc

Example 2: Do!

- ▶ Goal: Pennsylvania residents will have access to the best practices in screening, support, assessment, and treatment for mental health and substance use disorders in order to achieve and maintain optimal health outcomes.
 - Objective 1.1: Increase access to quality mental health and substance use services for all Pennsylvania residents by increasing the percent of adults 18 or older with any mental health illness who received treatment or counseling from 46.7 percent in 2009-2013 to 51 percent by December 2020.
 - Strategy 1.1.1: Develop appropriate partnerships to activate and leverage existing resources.

Example 2: Do! (cont)

- ▶ Suggested activities
 - Identify potential partners to implement strategies.
 - Survey partners to assess needs and map assets.
- ▶ Performance measures
 - Number of partners
- ▶ Assets
 - Existing mailing and distribution lists and networks

Example 2: Do! (cont)

- ▶ Lead Agency/Organization
 - Geisinger Health System; DOH, Innovation Center
- ▶ Potential partners:
 - Department of Drug and Alcohol Programs; DHS' Single County Authorities on Drugs and Alcohol, Drug and Alcohol Service Providers Organization...etc

Example 3: Do!

Priority: Cancer			
Goals	Objectives	Strategies	Partners
1. Reduce overall cancer risk in Maine due to selected modifiable risk factors (behaviors)	1.1. Increase by 5% the percentage of teens ages 13-18 who complete the recommended Human papillomavirus (HPV) vaccination series by 2020. <i>(Baseline: July 2017: 58% for females, 48% for males)</i>	1.1.A. Provide assessment and feedback information to health care providers by emphasizing HPV vaccinations at regular "AFIX" visits.	Maine CDC Immunization Program, health care providers
		1.1.B. Educate health care providers on the importance of keeping patient immunization history information up-to-date.	Maine CDC Immunization Program, health care providers
		1.1.C. Provide quarterly assessment reports to health care providers.	Maine CDC Immunization Program, health care providers
		1.1.D. Disseminate best practice information to health care providers on HPV vaccinations via distributions of HPV toolkits, information in the MIP Provider Reference Manual, presentations at regional trainings and outreach to dental offices.	Maine Immunization Coalition Maine CDC Immunization Program, health care providers, dental care providers

Do: Link to other plans and work

- ▶ RPHN CHIPs
- ▶ CHNAs
- ▶ Healthy People 2030

Example: Don't

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Domain Themes

- ▶ Social isolation is an important issue, especially for sub-populations.

- ▶ Questions that pop up:
 - Which sub-populations?
 - By how much?
 - Significantly different?
 - Is it different enough to be a priority?

Progression

- ▶ Social isolation disproportionately affects residents of NH who are:
 - older than 70 years of age
 - live in rural settings, and are
 - home-based
 - with reduced access to transportation.
- ▶ RFP recently released from BEAS

Any Questions?

