Healthy ILLINOIS 2021

Planning Council Meeting
October 5, 2015

Presented by:
Illinois Department of Public Health
and University of Illinois at Chicago
School of Public Health

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
IDPH
PROTECTING HEALTH, IMPROVING LIVES

UIC MidAmerica Center for Public Health Practice

Logistics

- Sign In
- Take breaks and snacks as needed
- Approval of Minutes

Welcome and Agenda

Agenda Topic	Time Allotted
1. Welcome / Review - Minutes	1:00 – 1:15 PM
2. Discussion of Plan Framework - Definitions - Measures of Success - Public Health System Role	1:15 – 3:30 PM
3. Discussion and Voting on Priorities	3:30 – 4:10 PM
4. Next Steps	4:10 – 4:20 PM
6. Public Comment	4:20 – 4:30 PM
7. Adjourn	4:30 PM

Meeting Purpose

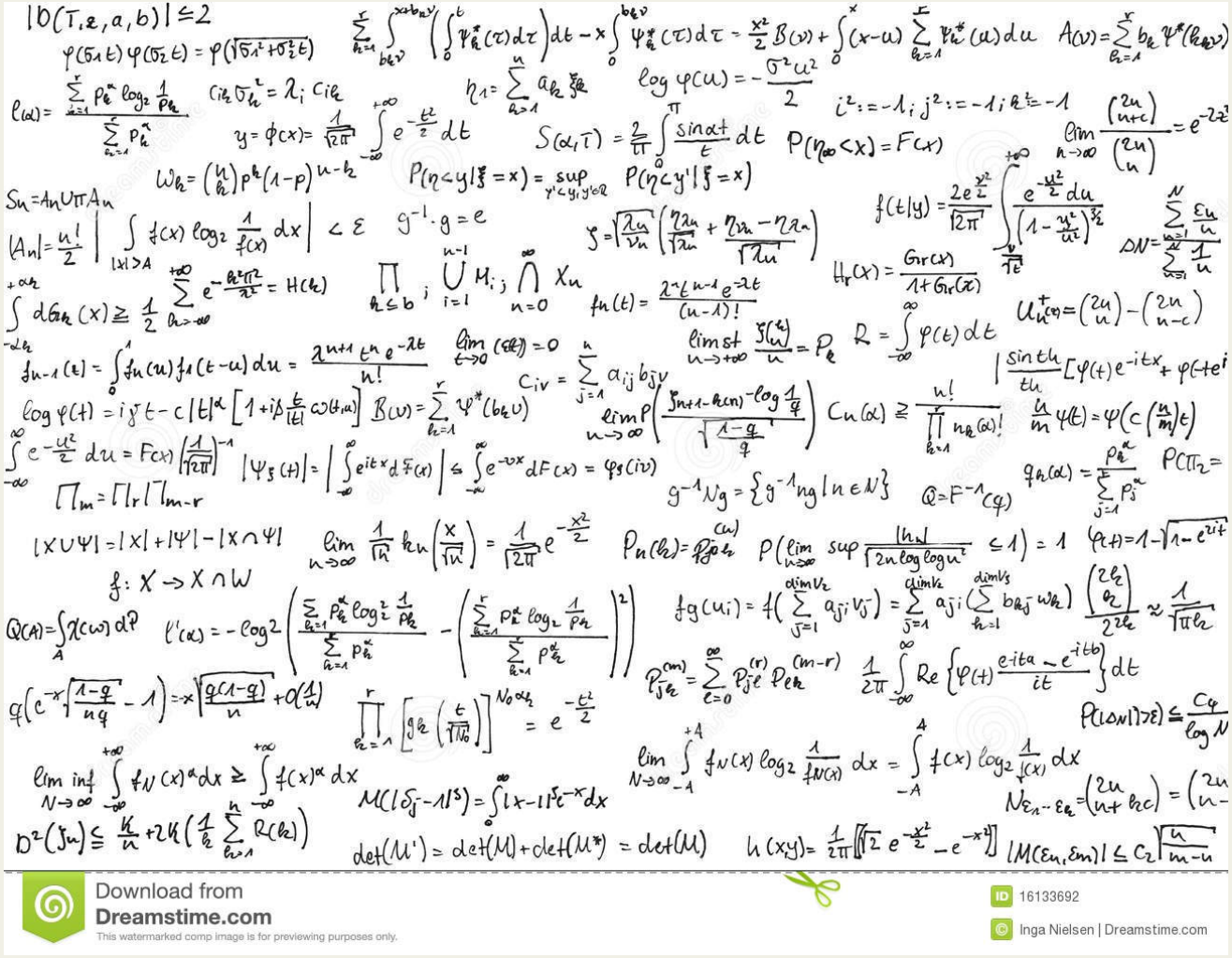
- Review summary of focus group data
- Review and discuss key criteria for recommending health priorities
- Conduct voting on priorities
- Discuss next steps

Philosophical

"The Principle of Priority states (a) you must know the difference between what is urgent and what is important, and (b) you must do what's important first."

- Steven Pressfield, *The War of Art: Break Through the Blocks & Win Your Inner Creative Battles*

Academic based



In-between approach

"…there is no agreed-upon definition for successful priority setting, so there is no way of knowing if an organization achieves it…Is extremely complex – choosing between competing ethical values makes priority setting fundamentally an ethical issue.

Different disciplines offer their own perspective on how it 'ought' to be done, defining 'good' (or successful) priority setting through values such as efficiency, equity, or justice.

Discipline-specific approaches and priority setting frameworks can help decision-makers with priority setting: health economics encourages a focus on efficiency, policy approaches focus on legitimacy, evidence-based medicine looks to effectiveness."

- Sibbald SL, Singer PA, Upshur R, Martin DK. Priority setting: what constitutes success? A conceptual framework for successful priority setting. BMC Health Services Research. 9:43, 2009.

Prioritization

RESULTS REVIEW

The basic planning process

- Where are we now? What is the situation?
- What are our strengths? What are our resources? What are our limitations?
- What are opportunities?
- What are threats?

- Select strategies based on best options
- Selection helps to focus the work based on resources and leverage points

- Where do we want to be?
- How will we know we're successful?
- What are our measures of success?
- How will we measure progress?

Where were we?

- June and July 2015:
  - Reviewed secondary data on the current state of health and well-being
  - Reviewed over 200 hospital and local health department needs assessments
  - Reviewed analysis of over 30 Illinois state agency reports and strategic plans
  - Planning Council provided feedback on early health priorities and strengths, opportunities and barriers to health improvement in Illinois

What did we do?

- Reviewed feedback from the Planning Council on health issues and statewide assets, opportunities and barriers
- Conducted focus groups for specific, detailed input from organizations across the state
- Offered informational sessions (via webinar and in-person presentations) and established a survey tool to gather input

What did we do?

Where are we now?

- Analysis:
  - Reviewed over 100 pages of transcripts and notes
  - Categorized and tallied themes
  - Reviewed and identified examples
  - Identified overarching themes

- Results
  - Health Issues
  - Strengths, opportunities, barriers

What did we hear?

- Participants in the focus groups and survey did not subtract from the given health issues
- Definition was the biggest issue with the early priorities
  - 13 of 38 topics mentioned fall under a broader category of mental health, access to quality care, chronic disease, social determinants of health, or maternal health
- Three health issues were raised as potential priorities
- Most themes were strategies or target populations

What else did we hear?

- Alignment around strengths
- Statewide barriers and opportunities slightly differ from local barriers and opportunities

State Health Assessment Analysis

Summarizing / analyzing data is part of an ongoing, iterative process of organizing and analyzing quantitative data, incorporating qualitative input from internal and external stakeholders, and applying epidemiologic expertise to reconsidering and synthesizing all of the data ***in a way that promotes action***.

Excerpts: SHA Data Template

Data Table 1 for SHA Example Indicator Overall and by Select Characteristics		
	Numerator	Denominator
Illinois Overall		
Gender (when relevant)		
Female		
Male		
Age (will vary by indicator)		
<20		
20-34		
35-44		
45-54		
55-64		
65-74		
75-84		
85 and older		
Race/Ethnicity		
Non-Hispanic Black		
Non-Hispanic White		
Hispanic		

Data Table 2 for SHA Example Indicator , by County		
	Numerator	Denominator
Adams		
…		
…		
Woodford		

Geography: Statewide Regions			
NorthWestern IL			
NorthEastern IL			
Western IL			
Central IL			
SouthWestern IL			
Southern IL			
Year			
2010			
2011			
2012			
2013			
2014			
Race/Ethnicity and Year			
Non-Hispanic Black	2010		
	2011		
	2012		
	2013		
	2014		
Non-Hispanic White	2010		
	2011		
	2012		
	2013		
	2014		
Hispanic	2010		
	2011		
	2012		
	2013		
	2014		
Other	2010		
	2011		
	2012		
	2013		
	2014		

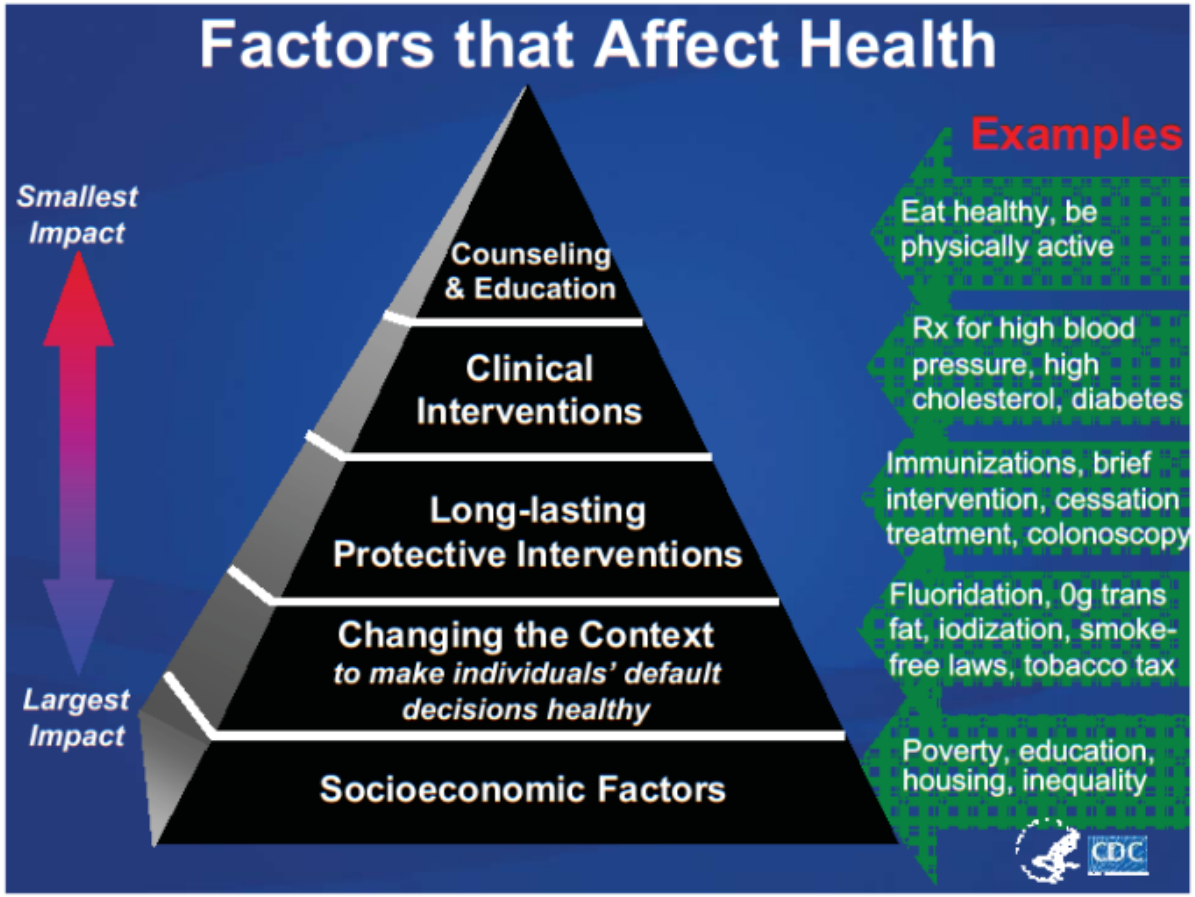
Status of SHA Indicators

- Of the approximately 40 core SHA indicators, we have complete data for almost half, partial data for another quarter, and will soon have data for the remaining indicators.

- The process has already proven useful:
  - Identifying data gaps, e.g. lack of trend data
  - Highlighting definitional issues—who's in the numerator and who's in the denominator
  - Formally connecting indicator data with national or other benchmarks
  - Having common categories and reporting strategies enabling meaningful comparisons
  - Having more consistently current data

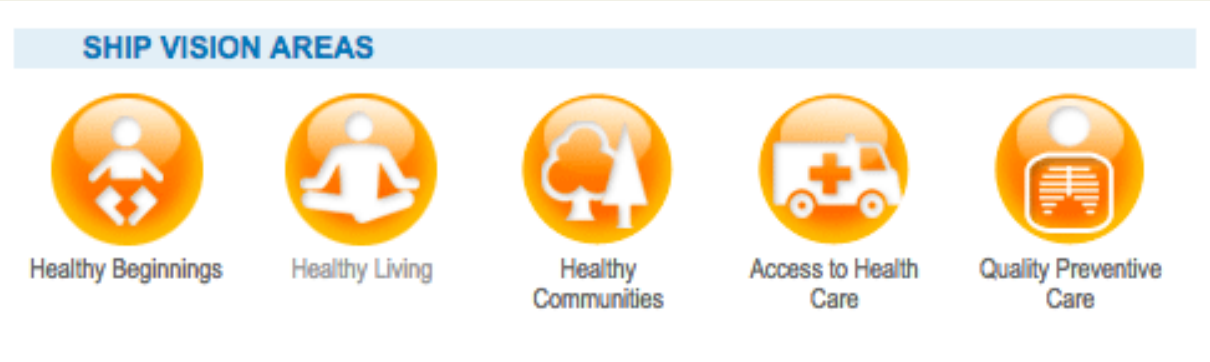
DISCUSSION OF PLAN FRAMEWORK: DEFINITIONS

Keep in Mind


Factors that Affect Health
Examples
Smallest Impact
Largest Impact
Counseling & Education
Clinical Interventions
Long-lasting Protective Interventions
Changing the Context
to make individuals' default decisions healthy
Socioeconomic Factors
Eat healthy, be physically active
Rx for high blood pressure, high cholesterol, diabetes
Immunizations, brief intervention, cessation treatment, colonoscopy
Fluoridation, 0g trans fat, iodization, smoke-free laws, tobacco tax
Poverty, education, housing, inequality
CDC

Keep in Mind

Maryland State Health Improvement Plan



Oklahoma State Health Improvement Plan

Health Issues

- Strong support for:
  - Mental Health
  - Access to Quality Care
  - Chronic Disease
  - Social Determinants of Health
  - Maternal Health
- Substantial support for:
  - Oral Health
- Additional mentions:
  - Respiratory Issues (as a result of environmental factors)
  - Infectious Disease

Health Issue Additions from Focus Group

- Oral health
  - "…We continually see patients who come in just for extractions when they're in pain, which contributes to a whole host of other health issues."
- Respiratory Issues
  - "If you look at the air quality in the metropolitan area that is another social determinant of health. What's one of the biggest problems triggered by our air quality? Asthma. And it's huge. It's one of the leading causes of absenteeism for schools, ER visits at the hospitals, and absence from work."
- Infectious Disease
  - "If we can invest in [infectious disease] prevention we can save a lot of money in treating those different things."

Health Issues Definition from Focus Groups

Mental Health	Access to Quality Care	Chronic Disease	Social Determinants of Health	Maternal Health
Substance Use and Addiction	Health care costs		Violence and safety	Maternal and child health
Behavioral health	Children's vision services		Environment and housing	
Mental health treatment	Access to health coverage			
Increased emphasis on ACES and child social-emotional wellness	Access to health services			
Anxiety/stress	Quality of care for people in poverty			

Definitions Discussion

- Individual reflection (5 min)
  - Use handout and look at all 8 health topics
  - Jot down elements of definition that are important to you

Definitions Discussion

- Small group discussion (20 min)
  - Break into 4 groups; each group will focus on 2 health topics
  - Select a recorder and reporter
  - **Start by discussing the individual lists with a neighbor. Look for alignment between your lists and agree on one element**.
  - Come together as a group and discuss the elements agreed on in teams
  - **Finalize 5-8 elements** between the group for each health topic
  - Write elements out on the paper provided, one element per page
  - Place elements on the Sticky Wall

Definitions Discussion – Report Back

- Review definitions individually first
- Discuss the following points:
  - Can any definitions be combined or included within each other?
  - Can any be presented in a different way than how they are here?

DISCUSSION OF PLAN FRAMEWORK: MEASURES OF SUCCESS

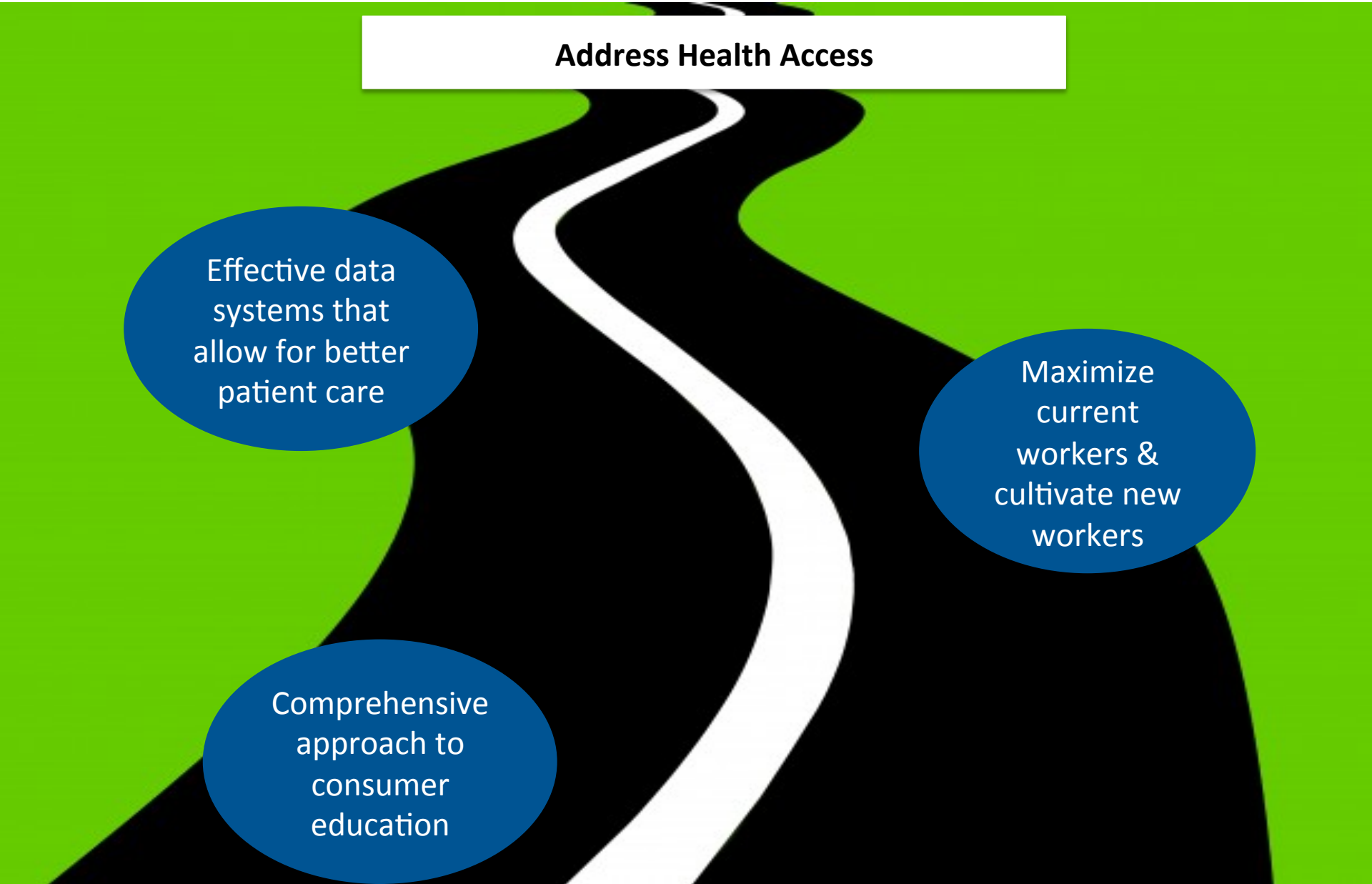
Measures of Success

- Aligned clinical and primary prevention that results in effective, efficient partnerships to drive health improvement.
- A holistic view of the patient that incorporates social determinants drivers of health serving as the foundation for models of clinical care and preventive strategies.
- Effective data systems that allow for better patient care by reducing redundancies and communicating measures and outcomes to providers and partners.
- Aligned quality measures that are based on evidence and supported by payment incentives.

Measures of Success

- Innovation fostered through the continual growth of evidence based strategies and best practices that result in improved health outcomes, increased patient and provider satisfaction, and stabilized costs.
- A comprehensive approach to consumer education that promotes health literacy, use of a medical home, and overall competency for navigating the health system.
- A workforce that maximizes the potential of current workers and cultivates new workers in order to address gaps and the needs of the health system.
- Decisions are made using a community oriented, asset-based approach to increasing prevention activities that address social determinants of health.

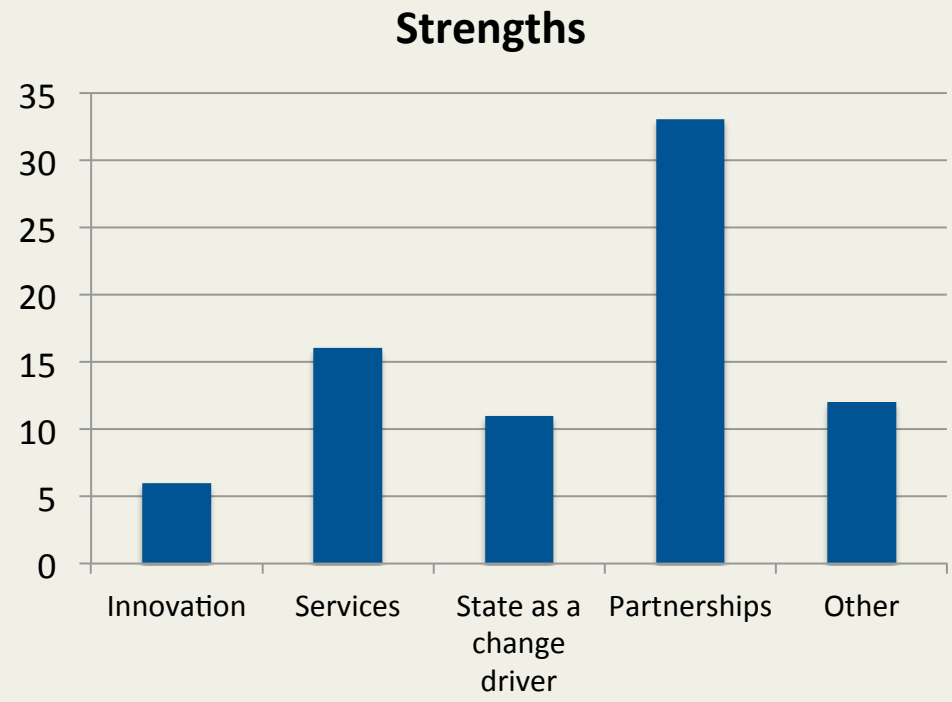
Measures of Success and Health Priorities

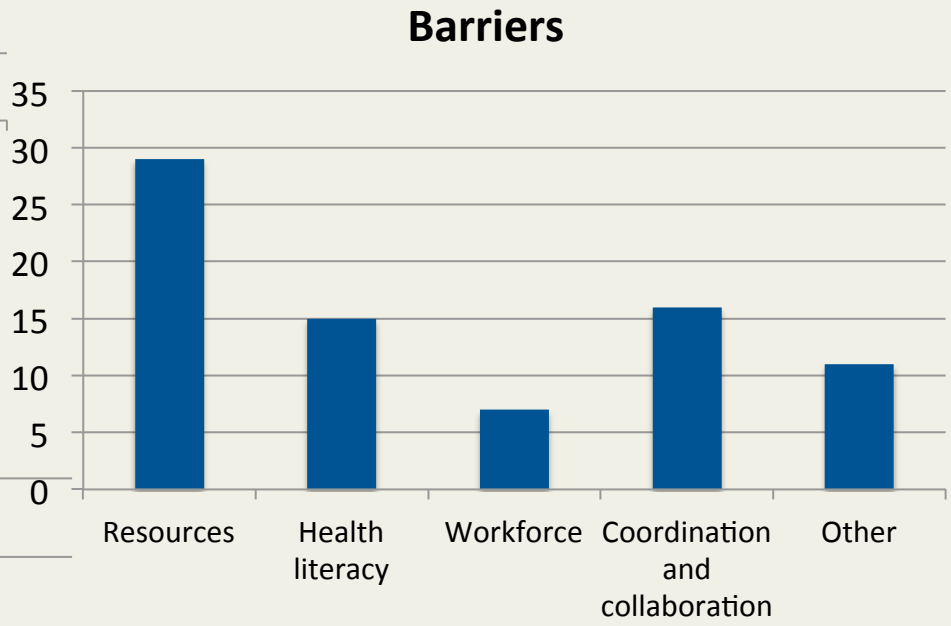


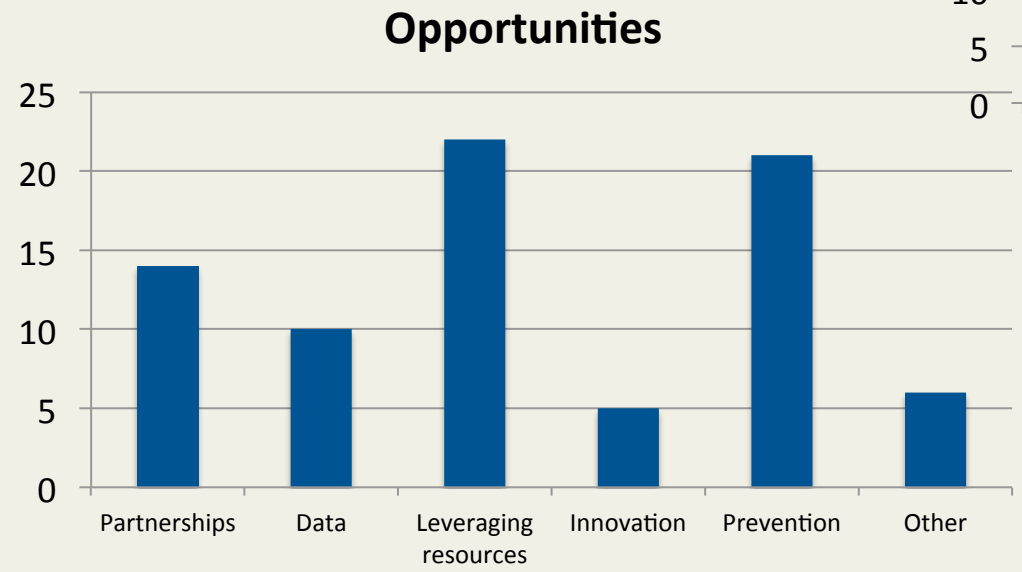
Advisory Group Feedback

- Mental health is overwhelmingly seen as something that requires much attention in Illinois
- The measures of success are visionary and should be more measureable
- Incorporate population perspective

Survey Results







Strengths: Focus Group

- Most organizations are also collaborating with other organizations on health improvement.
- Major themes:
  - Collaboration
  - Programs, Activities or Services
  - Technology
  - Community Engagement
  - Workforce
  - Policy

Barriers and Opportunities: Focus Groups

- Data
- Programming/services offered
- Provider-specific
- Engagement across sectors
- Funding
- Health literacy
- Mental health
- Knowledge of services

Public Health Systems Assessment

- The Public Health System Assessment suggested that the system is strongest in the following areas:
  - 1. Monitor Health
  - 2. Diagnose and Investigate
  - 3. Inform, Education and Empower
  - 6. Enforce Laws
  - 8. Assure a competent workforce
- And weakest in the following areas:
  - 4. Mobilize community partnerships
  - 5. Develop policies and plans
  - 7. Link to and provide care
  - 9. Evaluate
  - 10. Research

Measures of Success	Strengths	Barriers	Opportunities	Health System Strengths	Health System Weaknesses
Aligned clinical and primary prevention	Partnerships	Coordination among providers/ case managers			Link to and provide care
Holistic view of the patient			Cross-sector coordination and coalition building		
Effective data systems			Data infrastructure Data sharing Data quality		
Aligned quality measures					
Innovation through evidence based strategies & best practices	Innovation	Evidence based programming			
Consumer Education		Health Behaviors / Prevention		Inform, Education and Empower	
Maximize current workers & cultivated new worker		Workforce capacity		Assure a competent workforce	
Community-oriented, asset based decision making	Community alliances and coalitions		Health planning		Mobilize community partnerships Research

Small Group Discussion

- Break into 4 groups; each group will focus on two measures of success
- Select a reporter and recorder
- Add specificity to measures
- Discuss the measures of success and whether opportunities and strengths align with measures

- **When you think of one of the statements, what would be a tangible measures? How would you know this was accomplished?**
- **How do the shared strengths and opportunities align with the measure? Do the barriers overcome the measure as a focus?**

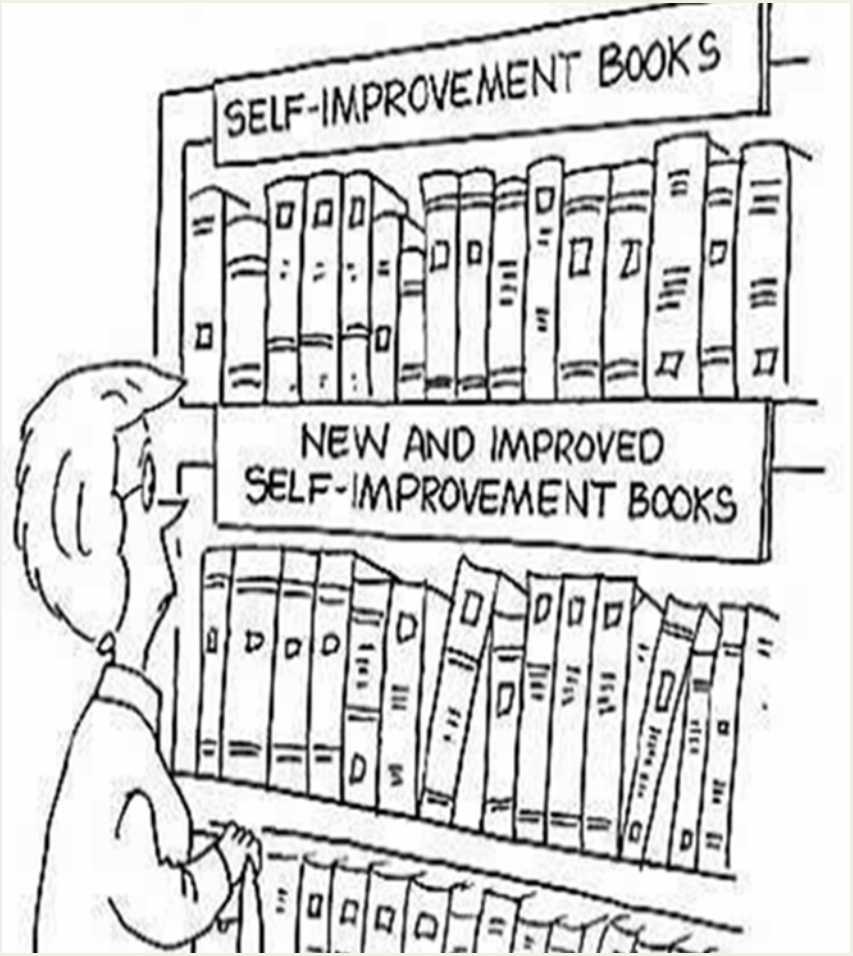
Consensus voting

- Choose 2 measures of success that you believe are the most important
- Place a dot next to the measure

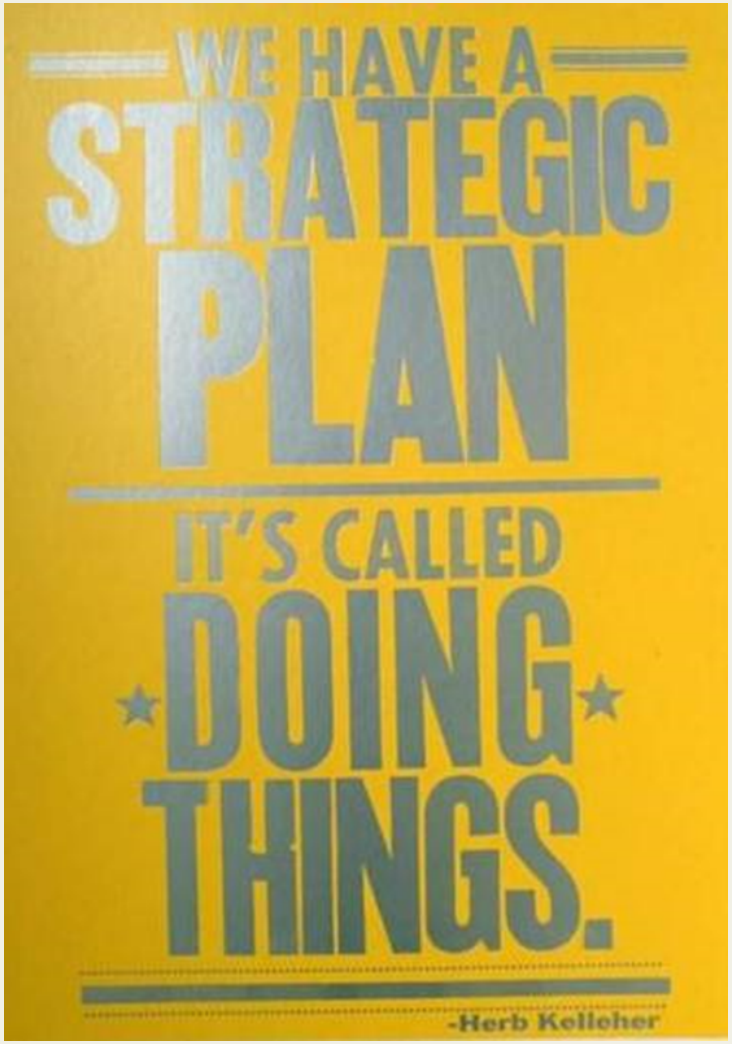
ROLES AND RESPONSIBILITIES IN ADDRESSING THE PRIORITIES

Reminder: 2015 Process Goals

- Facilitate introduction of new Administration
- Maximize existing assessment data
- Provide documentation to meet PHAB criteria related to SHA/SHIP
- Align state staff work (that of DPH, HFS, DHS, and other state agencies) with community and other stakeholders' work
- Design SHA/SHIP process to facilitate implementation and action
- Build from past experiences and expertise
- Promote measurement and reporting of system progress



Reminder: Implementation principles



- Information did not flow freely across organizational boundaries (e.g. no cross-sectional committees)
- No one had a good idea of the decisions and actions for which he or she was responsible (e.g. multiple decision makers; not decision tree; no benchmarks)
- Lack of strategy or unclear strategy (e.g. can you repeat the vision?)
- Lack of understanding of the role of org structure and design to execute (decision versus information and role of information)
- Inability to generate buy-in

~Neilson et al (Goodward Insurance)

~ Based on Wharton-Gartner Survey

Public Health System: Focus Groups

Data	Funding	Policy	Convene	Advocate	Education
Increasing access to and sharing of data	Funding stream for prevention/ health	State mental health analysis	Coordinate various needs assessments, i.e., hospital CHNA's, LHD's, etc.	Advocate that the federal government to put more incentives into the building of the mental health workforce	Public education campaign on health literacy
	Taxes on sugar-sweetened beverages to fund programs	Contracting between health plans and community based providers	Clarity on how social service agencies, that are losing state funding, can seek billing through MCOs or health plans.		
		Increase Medicaid providers and ensure they are supported	Leveraging private sector to commit to health improvement (i.e. food industry)		
		Requiring performance measurement linked to SHIP or HP2020			
		Require collaboration for grants			
		Standardizing definitions for the Illinois Youth Survey			

Advisory Group Feedback

- "Make it easy to do the right thing"
  - Health in All Policies framework
  - Policy, system and environmental change
- "Make it possible to move policy and planning towards implementation"
  - Plan for action

Group Discussion

- Given the information we've shared, what actions can we collectively take at the statewide level?
- Where do we have the most leverage?
- Thinking about the priorities, what actions do you think can be taken?

VOTING ON PRIORITIES

Review

- Definitions
- Measures of Success
- Role of the Public Health System

Health Issues

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Needs to Assets Based Approach

Needs	Assets
Focus on deficiencies	Focus on strengths
Result in fragmentation of responses to local deficiencies	Build relationships among people, groups, and organization
Make people consumers of services; build dependence on services	Identify ways that people and organizations give of their talents and resources
Give residents little voice in deciding how to address local concerns	Empower people to be an integral part of the solution to community problems and issues

Institute for Healthcare Improvement:
http://www.ihi.org/education/conferences/APACForum2012/Documents/I4_Presentation.pdf

Voting Criteria

- Is it feasible?
- Is it urgent?
- What's the magnitude?
- Are there disproportionate effects?

Voting Process

- Consider the criteria set during the meeting when voting
- Planning Council members will have three sticky dots to use to vote
- Vote for three topics, including mental health if desired
- Vote on flip charts

Next Steps

Action Teams

- Actions Teams will be based on priorities
- Will meet through February 2016
- November 9th Planning Council meeting will be an action planning meeting
  - More details to come

Public Comment

- State your first and last name, organization
- Limit comments/questions to 2 minutes

Adjourn

- Slides available at www.healthycommunities.illinois.gov
- Questions can be sent to HealthyCommunitiesIL@uic.edu

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