State Health Improvement Plan (SHIP) Team Meeting Summary Thursday, November 17, 2011 11:00am – 3:00pm

Illinois Public Act 96-1153 created the State Health Improvement Plan Implementation Coordination Council. This law requires that the Governor appoint an implementation council for the State Health Improvement Plan comprised of the directors of the Illinois Department of Public Health, Human Services, Healthcare and Family Services, Aging, Agriculture, Insurance, Transportation, Commerce and Economic Opportunity, Financial and Professional Regulation, and the Illinois State Board of Education, Environmental Protection Agency, and Violence Prevention Authority, and the Chair of the State Board of Health. The Council also includes local health departments and private sector public health stakeholders including non-profit public interest groups, health issue groups, faith community groups, health care providers, business and employers, academic institutions and community based organizations. The Council is charged to coordinate stakeholders to implement the SHIP, including providing a forum for a collaborative action, coordinating existing and new initiatives, developing detailed implementation steps with mechanisms for action, identifying public and private funding sources, promoting public awareness, advocating for implementation of the SHIP, and developing an annual report.

ICC Members Attending: Michael Gelder, SHIP Co-Chair; Joseph Antolin, Heartland Human Care Services, Illinois Latino Family Commission; Colleen Burns, Illinois Department of Insurance; Michele L. Bromberg, Illinois Department of Professional Regulation; Matthew Bryant, Illinois Department of Transportation; Antonio Baxton, Illinois Department of Commerce and Economic Opportunity; Patricia Canessa, Salud Latina/Latino Health; Jenifer Cartland, Children's Memorial Hospital; Greg Chance, Illinois Association of Public Health Administrators, Peoria City/County Public Health Department; Edwin Chandrasekar, Asian Health Coalition; Dr. Craig Conover, Illinois Department of Public Health; Betsy Creamer, Illinois Department on Aging; Elmo Dowd, Illinois Environment Protection Agency; Margaret Gadon, IFMC-IL; Caronina Grimble, Illinois Department of Human Services; Elizabeth Hanselman, Illinois State Board of Education; Kevin Hutchinson, St. Clair County Health Department, Illinois State Board of Health; Ahlam Jbara, Council of Islamic Organizations of Greater Chicago; Michael Jones, Illinois Department of Healthcare and Family Services; Robert Kieckhefer, Retired - Health Care Services Corp, Illinois Public Health Institute; Janine Lewis, Illinois Maternal and Child Health Coalition; Hong Liu, Midwest Asian Health Coalition; David McCurdy, Advocate Health Care & Illinois State Board of Health; Maureen McHugh, Northern Illinois Public Health Consortium, DuPage County Health Department; James Nelson, Illinois Public Health Association; Dr. Javette Orgain, National Medical Association, Illinois State Board of Health; Sharon Post, SEIU; Jose Sanchez, Norwegian American Hospital; Clarita Santos, Blue Cross Blue Shield of Illinois; Patricia Schou, Illinois Critical Access Hospital Network; Terry Solomon, Illinois African American Family Commission; Janna Stansell, Health and Medicine Policy Research Group; Christina Welter, Cook County Department of Public Health

Illinois Department of Public Health Staff: David Carvalho, Deputy Director; Dr. Teresa Garate, Assistant Director; Chinyere Alu; Mary Driscoll; Daryl Jackson; Shannon Lightner; Jerome Richardson, D'Ana Tijerina, David Miller

Governor's Office: Amy Sagen

Guests/Other: Linda B. Roberts, Illinois Department of Professional Regulation; Shaan K. Trotter, Northwestern Memorial Hospital; Quan Williams, Illinois African American Family Commission, Bridget McCarte, Illinois Hospital Association (representing Cathy Grossi)

SHIP ICC Process Staff Team:

- UIC School of Public Health: Joy Getzenberg, Richard Sewell, Charon Smith, Jessica Szafron
- Illinois Public Health Institute: Elissa Bassler, Katie Infusino
- McAlpine Consulting for Growth: Laura McAlpine

Welcome & Introductions:

Meeting was called to order at 11:09am. Dr. Teresa Garate introduced Illinois Department of Public Health Staff in attendance. This was followed by introductions of all other participants in attendance.

Michael Gelder (Co-Chair) welcomed the group and introduced Pat Schou (Illinois Critical Access Hospital Network), who has been appointed as Co-Chair. She presented the overarching themes of the meeting.

Richard Sewell of the U UIC School of Public Health discussed proposed guidelines for how the group would operate over the next few months. Sewell outlined meeting objectives.

Dr. Conover of IDPH discussed the Community Transformation Grant (CTG) and its relationship with SHIP priorities.

Overview of "We Choose Health" Community Transformation Grant (CTG):

Dr. Garate (IDPH) explained what the CTG is and its role in helping implement the SHIP. The U.S. Centers for Disease Control and Prevention (CDC) CTG initiative funding opportunity aligned with six of the SHIP Priorities, (Obesity, Nutrition and Physical Activity, Tobacco, Natural & Built Environment, Mental Health, Workforce and Social Determinants of Health). IDPH proposed a number of evidence-based strategies in these areas in the proposal. The CTG is funded at about \$4.7 million/year for five years, and will provide resources for the implementation of these priorities in counties that have a population of 500,000 or less. The CTG will also inform statewide policy initiatives that impact all counties in the state. CTG will be governed by a Leadership Team and a larger We Choose Health Coalition. Dr. Garate said that one of the this meeting's purposes was to look at how the CTG and SHIP align, how to include other SHIP priorities and what people are currently working on in regard to the priorities that can be viewed as part of SHIP with implementation. Dr. Garate invited SHIP ICC members to participate in the CTG We Choose Health Coalition working on the specific interventions in the CTG.

CTG and SHIP Alignment:

Sewell explained that the CTG has ten intervention areas. The proposal is that the six SHIP priorities included in the CTG l be the first addressed by the SHIP ICC because there are resources for them now made available through the CTG. The second phase of the SHIP ICC work will be developing and implementing the remaining priorities. Identifying the alignment between the CTG interventions and SHIP long term and intermediate outcomes is a way that subcommittees can be formed to help develop action plans for implementation.

Jenifer Cartland (Children's Memorial Hospital) asked how this will affect the timeline for development of other SHIP priorities. Sewell indicated that the first phase of activity is being planned to end May 2012 and how to proceed after will be discussed and determined by the ICC.

There was further discussion on the remaining SHIP priorities not included in the CTG. Gelder explained that the CTG provides an opportunity to combine efforts, but that the CTG does not supersede SHIP. It was then emphasized that in May 2012 the ICC will decide next steps beyond the first stage of action planning on the SHIP/CTG aligned priorities. Bassler (IPHI) emphasized that the SHIP is driving the CTG and that the first stage is focused on developing a package of interventions that complement the CTG in the areas of alignment between the CTG and the SHIP.

ICC By-laws: Review and Approval:

Carvalho (IDPH) reviewed the by-laws. It was discussed that the bylaws allow for meetings to be held through telephone/video conferencing (e.g. subcommittees).

Robert Kieckhefer made a motion to approve the by-laws which was seconded by Joseph Antolin. All present voting members were in favor; none were opposed.

ICC Minutes, September 22, 2011: Review and Approval:

Gelder asked for additions or corrections to the September 22, 2011 Minutes. None were made.

Terry Solomon made a motion to approve the minutes which was seconded by Janna Stansell. All were in favor; none opposed.

Public Comment:

Gelder opened the floor for public comments; no comments were made. It was said this portion of the meeting will be moved to the beginning of the agenda in the future.

ICC Survey Results:

Survey results were presented by Joy Getzenberg (UIC), Jessica Szafron (UIC) and Charon Smith (UIC).

SHIP ICC Members were surveyed to gather information on their current activities related to the SHIP priority areas. The analysis focused on the six areas where SHIP and CTG align. Results showed that 18 member organizations are working with obesity, physical activity & tobacco, 17 with mental health, 13 with social determinants of health, 10 with workforce and 7 member organizations are working with natural and built environment.

Information on the type of work being done was also collected. Coalition activity, reported by 24% of respondents, was the most common form of work. Training and education (23%) and policy work and services/treatment (each represented 18%) were the next most common activities reported.

Thirty-six organizations (85% response rate) responded to the survey.

Subcommittees Assigned and Breakouts:

McAlpine explained how the remainder of the meeting would run and assigned the subcommittees for the breakout groups. The five groups assigned were: Workforce, Social Determinants, Obesity/Nutrition/Physical Activity, Natural/Built Environment and Tobacco, and Mental Health.

After the groups met, each reported out during the wrap-up session and reviewed how their respective groups saw the alignment between the SHIP and CTG and potential areas of work (notes below)

Closing Remarks:

Gelder closed the meeting by expressing satisfaction with the progress made.

Meeting adjourned at 3:00pm.

Breakout Notes:

Groups were asked to discuss where SHIP and CTG aligned and other opportunities for alignment.

Workforce

Current alignment- Community Health Workers

Other areas for alignment - STEM initiative, career clusters, AHEC

Social Determinants

Current Alignment- Intervention on Hypertension and Cholesterol

Other areas for alignment- Tobacco intervention (indirect)

Obesity/Nutrition/Physical Activity

<u>Current alignment</u>- Reduce childhood/adult overweight/obesity, breastfeeding initiatives, Coordinated school health alignment, worksite wellness

Other areas for alignment- oral health, violence prevention (breastfeeding)

Environment and Tobacco

<u>Current alignment</u>- Complete streets and safe routes to school, smoke free multi-unit housing <u>Other areas for alignment</u>- violence prevention

Mental Health

<u>Current alignment:</u> "Increase prevention and early identification of mental health issues and those at risk for mental health issues" aligns with CTG Coordinated School Health approach

<u>Other areas for alignment</u>: Children's Mental Health Initiative, Illinois Children's Mental Health Partnership, Illinois Coalition for School Health Centers, Mental Health Summit, various community collaboration initiatives.