Welcome to the Healthy Kansans 2010 Workgroup

Reducing/Eliminating Health and Disease Disparities

Housekeeping

- **Future meetings**

  Video conferencing?

- **Website**

  http://www.envisageconsulting.org/hk2010

- **Contacts**

- **Workgroup Guiding Principles**

Contacts

- **General Healthy Kansans 2010 Information, Meeting Information, Workgroup Issues**

  Karry Moore

  kmoore@kdhe.state.ks.us

  (785) 296-6801

- **Website problems**

  David Ray (or Connie Satzler)

  david@envisageconsulting.org

  (785) 587-0151

For Successful Inclusion of Phone Participants

- **Those in the room…**
  - Speak into a microphone
  - Avoid cross-talk
  - Reference documents, page numbers
- **Those on the phone…**
  - Mute phone when not speaking
  - Let us know if you cannot hear (use web discussion board or speak up on phone)
  - Follow along on website
  - Share on phone and/or post comments on website discussion board related to content

Workgroup Guiding Principles

1. Each participant is a valuable partner and should be comfortable contributing to the discussion.

2. Every effort will be made to inform, include, and engage participants, whether they are participating in person or through remote means.

3. The Grants Program Manager, Karry Moore, will coordinate meetings and teleconferences.

4. Participants are responsible for accessing information before the meetings from the Healthy Kansans resources website (http://www.envisageconsulting.org/hk2010/).

5. It is desirable, though not required, for remote participants to have internet access during the conference call.

Workgroup Guiding Principles

6. Participants not able to attend a meeting or conference call will be provided with an update by the Grants Program Manager or the Workgroup Facilitators.

7. Discussion stays in the room, only consensus is issued, and the workgroup will speak with one voice.

8. Participation in workgroup meetings is by invitation. Each workgroup should be inclusive and may invite new participants if beneficial.

9. Members will stay focused on the stated tasks. Limit the sidebar issues.

10. Workgroups should be prepared to report final results to the Steering Committee by August 10th, 2005.

Part 1: Overview of Healthy Kansans 2010 Process

Workgroup Meeting #1

Overview

- **Healthy Kansans 2010 Process**
- **HK2010 Participants**
- **Healthy People 2010 Process**
  - **Review of Healthy People 2010**
  - **Leading Health Indicators**
- **Workgroup Charge**
- **Recommendations**

HK2010 Vision

Health priorities and priority indicators are identified and adopted by the Kansas leaders and organizations addressing the comprehensive health continuum. These priorities are monitored and feedback is incorporated on a regular basis to improve the health status of all Kansans.

HK2010 Mission

- **Facilitate a coordinated statewide planning process to**
  - **Define health priorities and priority indicators addressing the comprehensive health continuum and**
  - **Develop an ongoing monitoring and review process**

HK2010 Strategy

Draft and disseminate a report that identifies health priorities and indicators for Healthy Kansans 2010 and describes an ongoing monitoring and review process.

HK2010 Participants

- **Process Management Committee**

- **Steering Committee**

- **Workgroups**
  - **Disparities**
  - **Social Determinants**
  - **Early Disease Prevention/Interventions**

Process Management Committee Role

- Determine the parameters of HK2010 in terms of how and how much impact the HK2010 process will have
- Developing the guidance for how the outcome of the process can become a statewide agenda
- Review the priority issues selected by the Steering Committee to ensure that nothing of utmost importance is overlooked
- Identify and authorize participation of appropriate staff
- Identify data sources within and outside of KDHE
- Recommend members for the HK2010 Steering Committee and Work Groups

Process Management Committee

- **KDHE Secretary, Rod Bremby**
- **Director of Health, Howard Rodenberg**
- **Deputy Director, Division of Health, Richard Morrissey**
- **Director, Office of Health Promotion, Paula Marmet**
- **Director, Bureau of Children, Youth and Families, Linda Kenney**
- **Director, Bureau of Epidemiology and Disease Control, Sharon Patnode**
- **Director, Office of Local and Rural Health, Chris Tilden**
- **Director, Center for Health and Environmental Statistics, Lorne Phillips**
- **Director of Health Care Information, Dr. Lou Saadi**
- **Program Director, Bureau of Consumer Health, Mary Glassburner**
- **Kansas Health Institute, Gianfranco Pezzino**
- **Director, Kansas Association of Local Health Departments, Edie Snethen**
- **Kansas Health Foundation, Carolyn Williams**
- **Sunflower Foundation, Billie Hall**
- **United Methodist Health Ministry Fund, Kim Moore**
- **Governor's Office Representative, Jennifer Crow**

Steering Committee Role

- **Review priorities identified by state plans**

- **Identify cross-cutting issues**

- **Create an agenda for improving health status of Kansans**

- **Provide leadership to support and promote the state health agenda**

Steering Committee Members

- **Knowledgeable of health issues**
- **Have a role in shaping the health of the state**
- **Will provide active leadership before, during and after development of the state health agenda**

Steering Committee Members Represent…

- **State Public Health**
- **Governor's Office**
- **Non Governmental**
- **Government**
- **Academia**
- **Private Providers**
- **Legislative Leadership**
- **Minority Groups**
- **Local Public Health**
- **Business and Industry**

See website for list of members

Workgroups

- **Reducing/Eliminating Health and Disease Disparities**

- **System Interventions to Address Social Determinants of Health**

- **Early Disease Prevention, Risk Identification and Intervention for Women, Children and Adolescents**

HK2010 Process

Process Management Committee: General Process Oversight

Goal: Markedly Improve HP2010 10 Leading Health Indicators

↓

…through consideration of HP2010 categorical health focus areas

↓

Steering Committee listens to experts in each of 23 focus areas

↓

Steering Committee identifies themes to impact across multiple Leading Health Indicators
- Topical
- Infrastructure

↓

Steering Committee selects limited number (2-4) of workgroups around themes

↓

Workgroups recommend specific strategies to make major impact on Leading Health Indicators
- Short-term strategies
- Longer-term strategies

↓

Steering Committee endorses, adopts, and implements strategies

↓

Steering Committee sets short-term policy agenda to markedly improve 10 Leading Health Indicators

Review of Healthy People 2010 Terms

- Goals: **Provide general focus and direction for improving health**
    1. **Increase Quality and Years of Healthy Life**
    2. **Eliminate Health Disparities**
- Objectives: **Specific indicators to measure progress within a specified amount of time**
- Focus Areas: **Topical collections of objectives**
- 10 Leading Health Indicators: **"Snapshot" of health status**

20

HK2010 Focus Areas (Roughly Correspond to HP2010 Focus Areas)

- Maternal, Infant and Child Health
- Oral Health
- Hearing
- HIV and STDs
- Family Planning
- Arthritis
- Immunization
- Disability
- Environmental Health
- Overweight/Obesity, Nutrition and Physical Activity
- Respiratory Diseases

- Occupational Safety and Health
- Vision
- Heart Disease and Stroke
- Diabetes
- Mental Health
- Substance Abuse
- Injury and Violence
- Cancer
- Tobacco
- Chronic Kidney Disease
- Public Health Infrastructure
- Access to Care

21

10 Leading Health Indicators: Healthy People 2010

- **Chosen through Healthy People 2010 process based on the following criteria**
  - Ability to motivate action
  - Availability to data to measure progress
  - Relevance as broad public health issues
- **One to three Healthy People objectives chosen for each Leading Health Indicator**
- **Small set of measures to provide a snapshot of the health of the nation towards overall HP2010 goals**

22

10 Leading Health Indicators: Healthy Kansans 2010

- **Common framework for viewing focus areas (topical) and identifying cross-cutting issues**

- **Small set of measures by which to monitor change in the health of Kansans as strategies are implemented**

- **Central to Healthy Kansans process: goal is to markedly improve 10 leading health indicators**

10 Leading Health Indicators

- Physical activity
- Overweight and obesity
- Tobacco use
- Substance abuse
- Responsible sexual behavior

- Mental health
- Injury and violence
- Environmental quality
- Immunization
- Access to health care

24

Workgroups

- **Reducing/Eliminating Health and Disease Disparities**

- **System Interventions to Address Social Determinants of Health**

- **Early Disease Prevention, Risk Identification and Intervention for Women, Children and Adolescents**

Disparities Workgroup Charge

Develop recommendations for major policy and system changes...

- Can be implemented by public, private and/or non-profit sectors

- Will lead to substantial reductions in or elimination of health/disease disparities among Kansans

- Will impact two or more of the ten HP2010 Leading Health Indicators

Disparities – Specific Charge

At a minimum, consider these issues/needs:

- Racial and ethnic disparities
- Economic related disparities including disparities related to income and insurance/health benefit coverage
- Geographic disparities including disparities affecting rural populations, service and provider shortages and misdistribution, and current policies and programs that negatively impact on rural populations
- Age-related disparities including system biases that inhibit the participation of older adults in health/disease care and personal biases that inhibit older adults from seeking out health/disease services

27

Social Determinants Workgroup Charge

Develop recommendations for major policy and system changes...

- Can be implemented by public, private and/or non-profit sectors

- Will lead to substantial changes in the social determinants of health (e.g., low education and poverty) among Kansans

- Will impact two or more of the ten HP2010 Leading Health Indicators

Social Determinants Specific Charge

At a minimum, consider these issues/needs:

- **Quality housing**

- **Poverty**

- **Employment**

- **Transportation**

- **Cultural influences**

- **The influence of advertising**

- **Individual responsibility for health choices**

- **Educational status**

- **Literacy including issues of English/non-English literacy, health literacy, and the impact of literacy on access to resources and services**

Early Intervention/Prevention Workgroup Charge

Develop recommendations for major policy and system changes that..

- Can be implemented by public, private and/or non-profit sectors
- Will lead to improvements in early disease prevention, identification and intervention among women, children and adolescents in Kansas
- Will impact two or more of the ten HP2010 Leading Health Indicators

Early Intervention/Prevention Specific Charge

- Interventions with pregnant women
- Interventions for pre-conceptional health
- Screening programs
- Substance abuse during and immediately following pregnancy
- Early childhood interventions (0-5 years)
- School-based initiatives (6-21 years)
- After-school programs (6-21 years)
- Chronic disease risk factors including tobacco use, physical inactivity and poor nutrition
- Disease prevention and management for asthma, cancer, diabetes, cardiovascular, etc.
- Immunization programs
- Injury – intentional and unintentional
- Oral health

31

Recommendations/Cross-Cutting Themes

- **Overall recommendations for change**
- **Recommendations that address improved integration and/or better interface of existing initiatives**
- **Recommendations for public communications**
- **Recommendations for improving surveillance and meeting data needs**
- **Recommendations for enhancing the current workforce**
- **Recommendations that are highly targeted towards a specific populations and/or which address multiple populations in a blanket approach**

Workgroup Outcomes

- Meeting #1
  - Introduction to Process, Background Information
  - Select Potential Recommendations, Draft Priority List of Recommendations
- Meeting #2
  - Finalize Top 3 Recommendations
  - Draft and Prioritize Strategies/Actions for Each Recommendation
- Meeting #3
  - Fill in Action Plan Details for Each Strategy (timeline, partners, measurement)
- Via Email
  - Wrap-Up
  - Review Final Report to Submit to Steering Committee

Remainder of Meeting #1

- Workgroup Topic: Introduction and Context

- Summarize relevant information from Steering Committee Presentations

- List Potential Recommendations

- Prioritize Recommendations (Top 3-5)

- Determine Participant Assignments for Meeting #2

Recommendation Criteria

1. **Consistent with Charge to Workgroup**
2. **Impacts multiple Healthy People 2010 leading health indicators**
3. **Incorporates cross-cutting theme, where possible.**
   - Points of interface/integration between specific health/disease issues and interventions
   - Public communications
   - Identifying surveillance and data needs
   - Workforce issues/development
   - Highly targeted vs. blanket approaches
4. **Able to make significant progress in the next year or so *and* continue to have long-term influence**
5. **Unlikely for a single organization or agency to successfully implement independently; requires overarching, collaborative, statewide effort**
6. **Impacts maximum number of Kansans**
7. **Severity of Kansas problem/issue addressed**
8. **Feasible to implement; limited barriers**
9. **Capitalizes on existing Kansas assets, resources, activities, and momentum**
10. **Able to measure, track, and effectively communicate progress**

Final Outcome

- **Top 3 Recommendations**
- **Action Plan for each recommendation**

Part 2: Review Steering Committee Presentations

Reducing/Eliminating Health and Disease Disparities

Pull These Documents

- **Summary of Steering Committee Presentations**
- **Recommendations Related to Cross-Cutting Themes**
- **Criteria for Selecting Recommendations**
- **Potential Recommendations Worksheet**

Small Group/Individual Task

- **Review assigned focus areas or leading health indicators in documents**

- **You may use other reference material (e.g., Steering Committee presentations, staff)**

- **Be prepared to suggest no more than 5 potential recommendations that best meet recommendation criteria**

Reviewing the material, you may glean potential recommendations from…

- Data or statistics

- Populations most at-risk, risk factors

- Current activities

- Best practices

- Barriers

- Recommendations

- Your Expertise

Example #1

- **African American low birthweight, infant mortality, and teen pregnancy rates about twice that of Whites**

- **Breastfeeding rates lower for African American women**

- **African American women among those with highest risk for obesity**

- *Implement community-based health promotion campaigns targeting African American women*

Example #2

- **Barriers for Hispanic worker safety includes cultural, language, distrust of government, widespread lack of safety and health knowledge, and low/varied levels of educational attainment**

- **Nationally, STD rates higher among Hispanics**

- **Nationally, Hispanics generally less physically active than Whites**

- **Hispanic women less likely than others to have had mammogram or Pap smear within last 2 years**

- *Develop materials and approaches (e.g., targeted advertising) targeting Latinos in non-health settings, promoting health prevention and wellness activities*

Example #3

- **Access to specialty services a problem for rural areas, especially children with special health care needs**
- **Shortage/distribution of dentists**
- **Lack of audiologists with experience treating infants**
- **Limited number of rheumatologists**
- **Geographic distribution of population a barrier for those with end stage renal disease**
- **Mental health system difficult to navigate, especially for those in rural areas**
- *Remove barriers to access to care in rural areas for all services, including specialty care, mental health, and oral health.*

Topical Assignments

Focus Area

1. Maternal, Infant and Child Health
2. Oral Health
3. Hearing
4. HIV and STDs
5. Family Planning
6. Arthritis
7. Immunization
8. Disability
9. Environmental Health
10. Overweight/Obesity, Nutrition and Physical Activity
11. Respiratory Diseases
12. Occupational Safety and Health
13. Vision
14. Heart Disease and Stroke
15. Diabetes
16. Mental Health
17. Substance Abuse
18. Injury and Violence
19. Cancer
20. Tobacco
21. Chronic Kidney Disease
22. Public Health Infrastructure
23. Access to Care

Leading Health Indicators

1. Physical activity
2. Overweight and obesity
3. Tobacco use
4. Substance abuse
5. Responsible sexual behavior
6. Mental health
7. Injury and violence
8. Environmental quality
9. Immunization
10. Access to health care

44