### State Health Plan Quality Improvement Committee Policy Action Framework Effective Policies and Systems Aligned for Better Health October 5, 2012

### **Background / Detail**

#### **DHS Guiding Principles operationalized through Public Health Council actions:**

- Our healthcare costs are not sustainable at current levels. We need new models for care delivery, regulation development, prevention strategies, risk sharing and purchasing.
- We will continue to provide support systems to help vulnerable people lead fulfilling, self-directed, healthy lives that promote independence, while recognizing the value of and utilizing supports from families and the community.
- We will actively promote collaboration in pursuit of innovation, increased value and improved outcomes for the benefit of all our citizens.
- We will align resources to achieve positive outcomes and hold ourselves accountable for achieving results.

#### HW2020 Guiding Principles operationalized through Public Health Council actions:

- Shared Accountability
- Alignment
- Collaboration
- Evidence / science
- Infrastructure
- Leverage
- Performance Improvement
- Prevention
- Shared Leadership

#### **Relevant HW2020 Focus Area Objectives:**

#### HW2020 Focus Area: Adequate, Appropriate, and Safe Food and Nutrition

- 1. By 2020, people in Wisconsin will eat more nutritious foods and drink more nutritious beverages through increased access to fruits and vegetables, decreased access to sugar-sweetened beverages and other less nutritious foods, and supported sustained breastfeeding.
- 2. By 2020, all people in Wisconsin will have ready access to sufficient, nutritious, high0quality, affordable foods and beverages.
- 3. By 2020, Wisconsin will reduce disparities in obesity rates for populations of differing races, ethnicities, sexual identities and orientations, gender identities, and educational or economic status.

#### HW2020 Focus Area: Physical Activity

- 1. By 2020, increase physical activity for all through changes in facilities, community design, and policies.
- 2. By 2020, every Wisconsin community will provide safe, affordable and culturally appropriate environments to promote increased physical activity.

3. By 2020, every Wisconsin community will provide safe, affordable and culturally appropriate environments to promote increased physical activity for individuals among populations of differing races, ethnicities, sexual identities and orientations, gender identities, and educational or economic status.

#### HW2020 Focus Area: Chronic Disease Prevention and Management

- 1. By 2020, increase sustainable funding and capacity for chronic disease prevention and management programs that reduce morbidity and mortality.
- 2. By 2020, increase access to high-quality, culturally competent, individualized chronic disease management among disparately affected populations of differing races, ethnicities, sexual identities and orientations, gender identities, and educational or economic status.
- 3. By 2020, reduce the disparities in chronic disease experienced among populations of differing races, ethnicities, sexual identities and orientations, gender identities, and educational or economic status

#### HW2020 Outcomes Advanced through Public Health Council Actions:

- 1. Reduce disease, injury and adverse health conditions due to risky behaviors.
- 2. Reduce preventable illness and disability.
- 3. Reduce preventable death.
- 4. Align policies and systems for better health.
- 5. Eliminate disparities.
- 6. Achieve health equity.
- 7. Strengthen Wisconsin's public health system.

#### **Policy Defined:**

Policy generally refers to a course or method of action that expresses guiding principles and objectives which are formulated by an organization (PHC) to direct its actions in pursuit of goals (HW2020). Policies are embodied in legislation, guidelines, regulations, or customary practice. Public policy refers to policies made by governmental entities at all levels (Source: 2012, University of Wisconsin, Institute for Translational Research, Type 2 Translational Research Pilots, *adapted*).

#### **Disseminating Public Health Actions to Partners:**

Governor; DHS Secretary; Wisconsin State Legislature; Division of Public Health Administrator; State Health Officer; Director, Bureau of Community Health Promotion; Director, Office of Policy and Practice Alignment.

Governor's Council on Physical Fitness and Health; Governor's Early Childhood Advisory Council; Wisconsin Department of Public Instruction; Wisconsin Department of Children and Families; Wisconsin Department of Agriculture, Trade, and Consumer Protection; Farm-to-School Advisory Council; Wisconsin Association of Local Health Departments and Boards of Health; other partners from government, tribes, public, private, and nonprofit organizations identified in the HW2020 Partnership Model.

## **Category 1: Schools including Farm to School**

#### **Rationale:**

- Increase access to fresh fruits and vegetables for school-aged children and youth.
- Increase the nutritional quality of Wisconsin school meal programs.
- Increase the number of schools implementing environmental and policy changes to support healthy eating and physical activity including school wellness policies.
- Promote interagency coordination aligns policies and systems for better health through shared leadership and accountability, innovation, science, and partnerships.
- Increase efficiency, leverage resources, and eliminate unnecessary duplication.

Program Strategies	Public Health Council Action	SHPQI Committee Content Detail / Notes
The Wisconsin school health award program provides recognition for schools who are implementing a variety of policy and environmental changes related to school wellness policies, physical activity, and nutrition.	<ol> <li>Letter to the Wisconsin Department of Public Instruction offering co- sponsorship of School Health Awards Program (October 2012).</li> </ol>	Contact Emily Holder and Douglas White at DPI. Awards to be given in May 2013.
Transform Wisconsin grantees will be focusing on institutionalizing joint use and/or farm-to- school programs and schools through school wellness programs.	2. Letter pledging support to the Wisconsin Department of Agriculture, Trade & Consumer Protection and the Farm to School Advisory Committee (December 2012).	<ul> <li>Farm-to-School Advisory Committee authorized under Assembly Bill 746.</li> <li>For Farm-to-School to be effective, "supply side" issues must be considered. These issues include: farmer incentives, storage, and distribution.</li> <li>The importance of restoring state grant resources to expand the availability of farm-produced foods in Wisconsin schools so there is capacity to sustain this evidence- based approach</li> <li>Support and expand comprehensive Farm-to-School programs in Wisconsin K-12 schools. A comprehensive program includes three elements: procurement of farm-foods, nutrition education, and school gardens.</li> <li>A willingness by the Council to establish regular and ongoing relationship with the Farm-to- School Advisory Committee and</li> </ul>

Program Strategies	Public Health Council Action	SHPQI Committee Content Detail / Notes	
		advocacy groups that include but are not limited to: Health First Wisconsin, Wisconsin Heart Association, Wisconsin Cancer Society, Transform Wisconsin, and Agricultural Institutes.	
Schools participating in the USDA School Meal Program will be required to update their wellness policy in the 2012/2013 school year.	3. Letter to Wisconsin Association of Local Health Departments and Boards encouraging school-public health partnerships. As a first step, help schools update school wellness policies, required by the USDA, by May 2013 (October 2012).	There can be far-reaching system benefits and benefits to families and communities when schools and health departments work together for the health of school-age children and youth. For example: Health departments can be a vital local agency in assisting schools to develop required wellness policies that include comprehensive Farm- to-School elements (procurement of farm-foods, nutrition education, and school gardens). Public health nurses, health educators, and nutritionists in health departments can provide important support when they work collaboratively with their counterparts in the schools. Health officers benefit when they are in regular communication with school district administrators and principals. School – public health partnerships at the local level can reciprocally strengthen existing alignments between the Wisconsin Department of Public Instruction and the Wisconsin Department of Health Services; the Wisconsin Association of School Nurses and the Public Health Nursing Section of the Wisconsin Public Health Association. This would be new territory for some local health departments and capacity is needed. <b>Becommendations (2008):</b>	
Alignment with Former State Health Plan Committee Recommendations (2008):			

Alignment with Former State Health Plan Committee Recommendations (2008): Adopt school wellness policies; facilitate consistent messages; strengthen infrastructure to prevent and manage obesity and chronic disease; coordinate interventions and use evidence-based policies; Strengthen infrastructure to prevent and manage obesity and chronic disease; coordinate interventions and use evidence-based policies; and, state and local messaging.

## **Category 2: Active Early**

#### **Rationale:**

- Increase supportive nutrition and physical activity environments in early care for young children through state-level policy changes.
- Improve the nutritional quality of meals and snacks served in early care settings for young children.
- Promote and sustain breastfeeding of infants in early care settings.
- Promote interagency coordination aligns policies and systems for better health through shared leadership and accountability, innovation, science, and partnerships.
- Increase efficiency, leverage resources, and eliminate unnecessary duplication.

Program Strategies	Public Health Council Action	SHPQI Committee Content Detail / Notes
Strengthen and enhance licensing rules for regulated group and family centers to support improved nutrition, physical activity, and sustained breastfeeding among 0-5-year-olds. Require, through administrative rule revision, early care and education providers to be training in nutrition and physical activity. Provide ongoing support to the Wisconsin Department of Children and Families <i>YoungStar</i> criteria after licensing rules have been strengthened and enhanced. http://dcf.wisconsin.gov /youngstar/	<ol> <li>Letter pledging support to Governor's Early Childhood Advisory Council (October 2012).</li> <li>Letter to the Wisconsin Governor's Council on Physical Fitness and Health to foster alignment with related policy action recommendations from the Public Health Council and Healthiest Wisconsin 2020.</li> </ol>	This letter would also pledge support to developing interagency relationships through strengthening childhood licensing standards (e.g., giving water, increasing physical activity to 60 minutes per day) and otherwise supporting the Wisconsin Department of Children and Family Services' <i>Young Star Program</i> . Specific content of this letter would include: An offer to provide the lens of the Public Health Council in comparing current licensing standards to the CDC's suggested standards for obesity prevention. An offer to assist in policy efforts to strengthening the standards and support the Young Star Program as the "gold standard." An offer to review, and subsequently support, the recommendations of the Council's Obesity Project Team recommendations

# Alignment with Former State Health Plan Committee Recommendations (2008): Strengthen infrastructure to prevent and manage obesity and chronic disease; facilitate consistent messages; and, create healthy environments.