

# 2021 Prevention Agenda & CHA/CHIP Update

For PHHPC Joint Committee Meeting

March 1, 2022

Office of Public Health Practice

Loretta Santilli, MPH Director

Priti Irani, MSPH Research Scientist

# NYS Prevention Agenda New York State's Health Improvement Plan

Goal is to <u>improve the health and well-being</u> of all New Yorkers and <u>promote health equity</u> across populations who experience disparities.

Increased emphasis on <u>primary and secondary prevention</u> and the <u>social determinants</u> <u>of health</u> rather than health care design or reimbursement Call to action for a broad range of stakeholders to:

- collaborate at the community level to assess local health status and needs;
- identify local health priorities;
- plan, implement and evaluate strategies for local health improvement.



# Prevention Partners

Led by the Ad Hoc Committee appointed by the NYS Public Health and Health Planning Council (PHHPC).





#### **NYS PREVENTION AGENDA 2019-2024**

**Cross Cutting Principles** 



https://www.health.ny.gov/prevention/prevention\_agenda/2019-2024/



# Prevention Agenda 2019-2024 Priority Areas

- 1. Prevent Chronic Diseases
- 2. Promote a Healthy and Safe Environment
- 3. Promote Healthy Women, Infants and Children
- 4. Promote Well-Being and Prevent Mental and Substance Use Disorders
- 5. Prevent Communicable Diseases



### **Important Timeline**

- 2019-2021 Prevention Agenda Workplans were submitted 12/31/2019
- Updates were due 12/31/2021
- What happened in between was unprecedented.

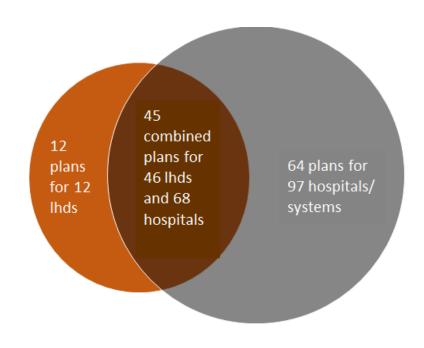
### **Summary and Key Points**

- Context for local health department/hospital submissions
- Findings
- Next Steps
- Questions



### 2019-2021 Prevention Agenda Plans Guidance and Submission

- Executive Summary
- CH(N)A\*: demographics, assets, gaps, collaboration
- Community Health Improvement/Service Plan
  - At least two common priorities (lhd\*\*-hospital)
  - At one priority address a disparity
- Dissemination & Continued engagement
- County plans combined lhd-hospital, hospital system or individual organization
- Submitted December 31, 2019



121 plans by 58 LHDs and 165 Hospitals

<sup>\*</sup>CH(N)A: Community Health (Needs) Assessment

<sup>\*\*</sup>Ihd: local health department

# Workplans report on equity

- Most plans report an intent to address disparities
- Equity issues identified: socioeconomic status, race/ethnicity, health care access, geography, disabilities (e.g., social emotional behavioral), age, and gender
- Urban counties more likely to identify race/ethnicity
- Rural/suburban more likely to identify socioeconomic status as a disparity
- Most plans not clear on how to measure impact on equity



### What priorities mean



#### Prevent Chronic Diseases Action Plan

Focus Area 1 - Healthy Eating and Food Security

Focus Area 2 - Physical Activity

Focus Area 3 - Tobacco Prevention

Focus Area 4 - Chronic Disease Preventive Care and Management



#### Promote a Healthy and Safe Environment Action Plan

Focus Area 1 - Injuries, Violence and Occupational Health

Focus Area 2 - Outdoor Air Quality

Focus Area 3 - Built and Indoor Environments

Focus Area 4 - Water Quality

Focus Area 5 - Food and Consumer Products



#### Promote Healthy Women, Infants and Children Action Plan

Focus Area 1 - Maternal and Women's Health

Focus Area 2 - Perinatal and Infant Health

Focus Area 3 - Child and Adolescent Health

Focus Area 4 - Cross Cutting Healthy Women, Infants, and Children



Promote Well-Being and Prevent Mental and Substance Use Disorders Action Plan

Focus Area 1 - Well-Being

Focus Area 2 - Mental and Substance Use Disorders Prevention



#### Prevent Communicable Diseases Action Plan

Focus Area 1 - Vaccine Preventable Diseases

Focus Area 2 - Human Immunodeficiency Virus (HIV)

France Area 2 Powerlly Transmitted Infantions (ETIs)

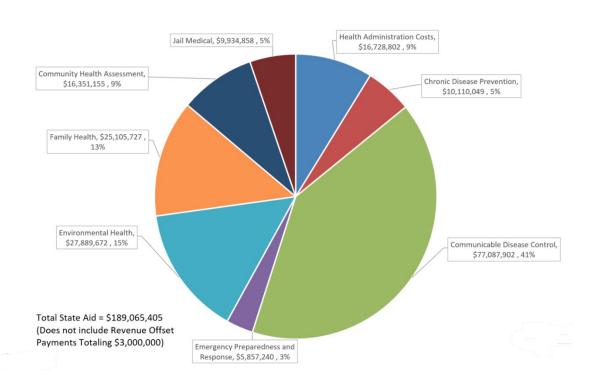
Focus Area 4 - Hepatitis C Virus (HCV)

Focus Area 5 - Antibiotic Resistance and Healthcare-Associated Infections

- Priorities = consensus Prevention
   Agenda priorities or focus areas
- Consensus among LHDs, hospitals & community partners in the county
- Acknowledge LHDs and hospitals have working on more issues, not only those identified as priorities
- Priorities change
- Workplans are prospective

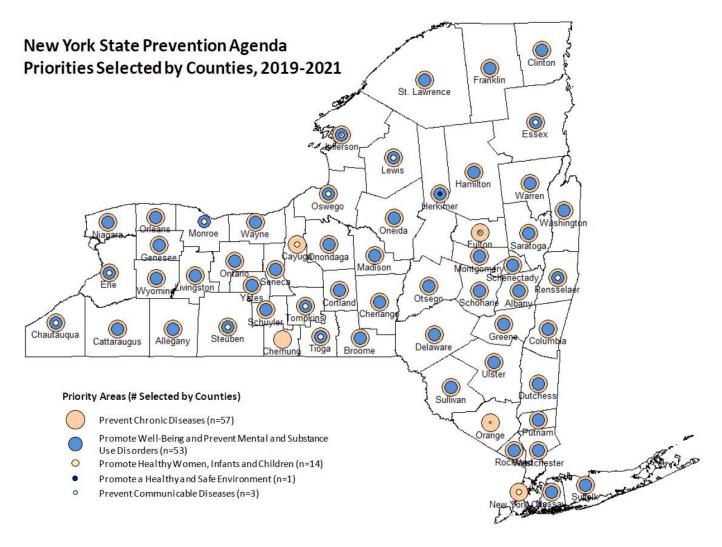


### 2018 Article 6 State Aid Payments by Program Area

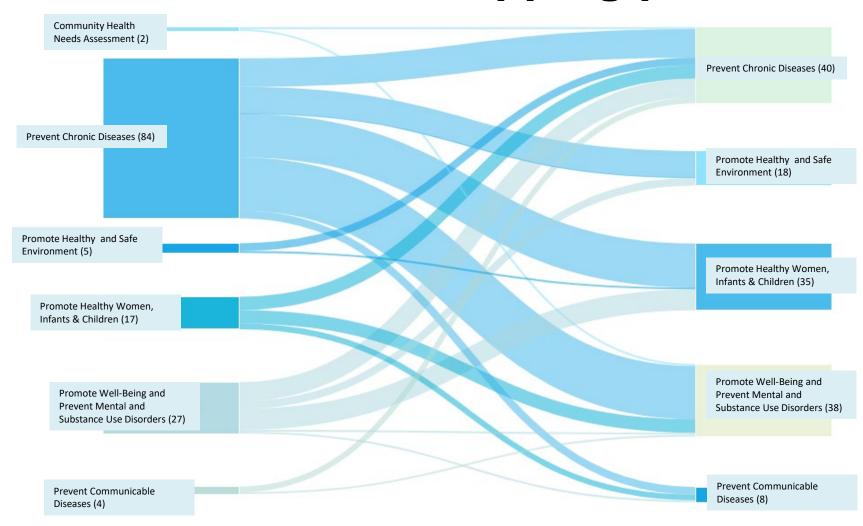


- Priorities identified by community consensus
- LHDs and hospitals are working on other core functions as well
- Priorities change
- Workplans are prospective

### **Five Statewide Priorities**



### Plans described overlapping priorities, 2019-2021



Based on 38 plans from 36 LHDs and 105 hospitals
See interactive Sankey diagram at <a href="https://observablehq.com/@pritii26/sankey-example">https://observablehq.com/@pritii26/sankey-example</a>;
Credit example by Chris Viau <a href="https://observablehq.com/@biovisualize/sankey-example">https://observablehq.com/@biovisualize/sankey-example</a>



### **Strengths Observed**

- Community Health (Needs) Assessment
- Collaborated across sectors
- Described and identified disparate populations
- Submitted a complete information in workplan
- Identified best practice or evidence-based interventions

## **Challenges Observed**

- Tracking progress with intermediate measures
- Articulating how equity/social determinants of health are being addressed
- Collaborating with marginalized communities to strengthen self-determination, leadership and ownership

# **Findings**

#### New York is the Healthiest State for People of All Ages

Contributions to Physical Health, Well-Being & Resilience

Prevent Chronic Diseases (PCD)

Promote Healthy & Safe Environment (PHSE)

Promote Healthy Promote Well-Being WIC (HWIC) MSUD (WB)

Prevent Communicable Diseases (PCOMM)

- Increased physical activity in improved space
- · Increase access to healthy food

· Evidence-based self-care management

School programs

- Increased resources
- Improved space
- Improved livelihood
- Increased skills
- Improved nutrition

More complete streets

· Update systems for evaluation

- · Increase access to supportive services
- · Increased quality employment

### **Intermediate Changes**

Changes in intermediate outcomes

**Outcomes & Impacts** 



#### Processes

Input and Outputs

Adapting Evidence-Based and Best Practices

Assets

Base for capacity

- **Policy**Social determinants of health screening and advocacy
- · Outreach to marginalized communities for screening

Programs

#### Capacity building

Infrastructure

- Trauma-responsive training for staff
- · Training and outreach to address vaccine hesistancy



NATURAL

Green space, water, soil,

INFRASTRUCTURE/\$\$ Funding, technology infrastructure

#### **Cross-Cutting Principles**





**Health Across All Policies** 

**Promote Equity** 

Enable Well-Being Healthy Aging

#### HUMAN

Staff education/skills, community leaders

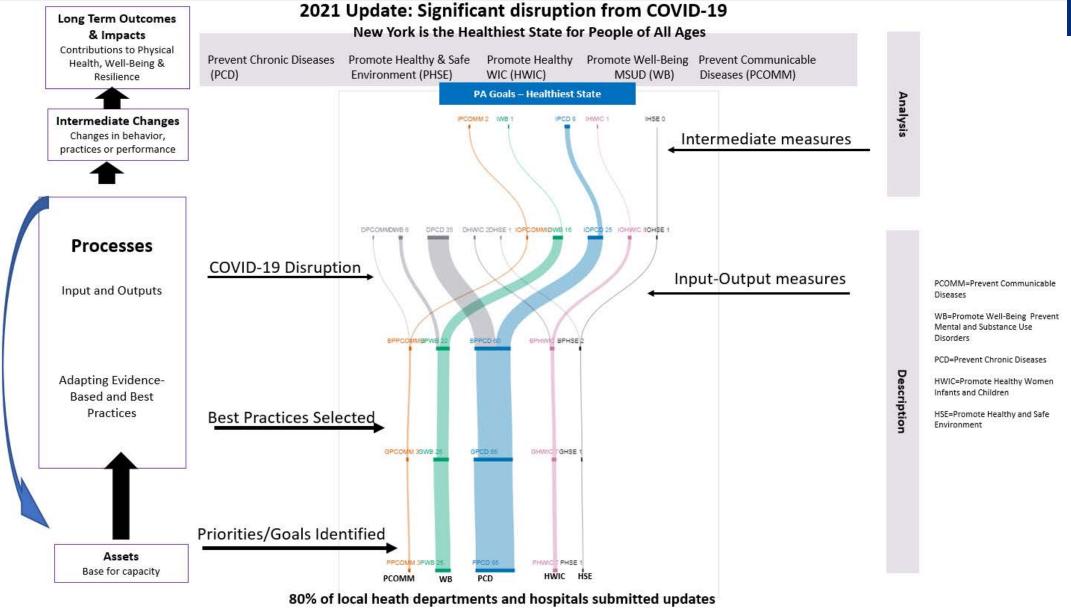
SOCIAL Community networks, trust

### Working toward the **Prevention Agenda Vision**

Description









## 2021 Update since submitting Workplans in 2019

#### **Similar**

- All five priorities were selected
- LHDs and hospitals collaborating
- Patterns of selected priorities
- Measuring impact, a challenge
- Collaborating is an asset
- Infrastructure & Training/Communications are catalysts

#### **Variations**

- 80% LHDs/Hospitals submitted updates
- Significant disruption from COVID-19
- Clinical interventions had fewer disruptions
- Only a handful added a COVID-19 goal

# **Next Steps**

	Comprehensive Plan	Update	New PA Cycle
2021		December 31, 2021	
2022	2022-2024 Plan due December 31, 2022		
2023		December 31, 2023	
2024		December 31, 2024	By Dec 2024, 2025-2030 PA Plan released by DOH
2025	2025-2027 Plan due December 31, 2025		
2026		December 31, 2026	
2027		December 31, 2027	

For more information, email <a href="mailto:prevention@health.ny.gov">prevention@health.ny.gov</a>

### **Questions and Information**

Office of Public Health Practice
Prevention Agenda Team
<a href="mailto:prevention@health.ny.gov">prevention@health.ny.gov</a>

