State Health Improvement Plan – 2017-2021
Choosing Priorities, Creating a Plan
Welcome! Who’s here?

What is the State Health Improvement Plan (SHIP)?
  - SHIP Vision Statement
  - SHIP Co-Launch Partners

Choosing Priorities
  - A five step process

Creating a Plan
  - Developing a plan of action
  - Collective Impact for Implementation

Next Steps
Collective Impact

- SHIP is a Collective Impact project to improve the health and well-being of all Nebraskans.

- Collective Impact (CI) is a structured process for cross-sector leaders to set a common agenda to address a specific social problem, deploying a disciplined approach.

- CI has 3 prerequisites: influential champions, resources and necessity of action.

- CI has 5 key elements:
  - Common agenda
  - Shared measurement
  - Mutually reinforcing activities
  - Continuous communication
  - Backbone organization support
Vision Statement

Working together to improve the health and quality of life for all individuals, families, and communities across Nebraska.
What is SHIP?

- The Nebraska State Health Improvement Plan (SHIP) is a collaborative, community driven project, with many statewide partners working together to improve the health and quality of life for all individuals, families and communities in Nebraska.

- The SHIP is developed to enhance the public health system to improve outcomes, promoting population health and well-being of all Nebraskans.

- The SHIP is a data-driven plan that outlines health system and health status priorities based upon findings from the State Health Assessment (SHA).
  - *The full Nebraska State Health Assessment 2016 report will soon be released.*

- The current 2013-2016 SHIP has 5 priorities, and approximately 82% of the activities are in progress or are have been achieved.

- The new 2017-2021 SHIP also has 5 priorities, although the action plans are yet to be developed. Implementation will begin in January 2017.
SHIP Co-Launch Leadership Partners
### Draft State Health Assessment (SHA) and State Health Improvement Plan (SHIP) - Planning Calendar

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<th>2015</th>
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<tr>
<td><strong>State Health Assessment (SHA)</strong></td>
<td><strong>DPI Strategic Plan—Review SPA and SHIP; set goals and objectives</strong></td>
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<td><strong>Jan-March</strong></td>
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<td>Forces of Change Assessment</td>
<td>Writing DPH Plan; Final Approval</td>
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<td>Community Themes &amp; Strengths</td>
<td>Finalizing of SHA Report and Publication</td>
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<td>Public Health System Assessment</td>
<td>Finalizing SHIP Report, Approval and Publication</td>
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<td>SHIP—Presenting and Prioritizing Goals and Objectives</td>
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### SHIP/DPH Strategic Plan Implementation

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<td><strong>Health People 2020</strong>&lt;br&gt;release</td>
<td><strong>Healthy People Goals &amp; Planning</strong>&lt;br&gt;SHA/SHIP Preparation &amp; Planning</td>
<td><strong>State Health Improvement Plan Implementation</strong></td>
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The Four MAPP Assessments

- **Community Themes and Strengths Assessment:** Provides an understanding of the issues residents feel are important.
- **Local Public Health System Assessment:** Focuses on all of the organizations and entities that contribute to the public’s health.
- **Community Health Status Assessment:** Identifies priority community health and quality of life issues.
- **Forces of Change Assessment:** Focuses on identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate.
Planning for Priorities with Population Accountability

- Quality of Life Results = Lead to SHIP priority areas
- Why is this important? = Basic facts: an explanation of why this condition is important to Nebraska communities.
- How are we doing? = Story and Performance: reviewing the most important indicators that tell the story of the current environment; can form baselines to measure progress from.
- What will it take to do better, and what’s our role? = Action: Include no-cost and low-cost ideas and the roles of system partners.
Choosing Priorities

*A five step process:

1. **Meeting #1**: Review the Nebraska State Health Assessment 2016 findings
2. **Meeting #2**: First round of priority choosing
3. Survey to rank potential priorities
4. **Meeting #3**: Choose final priorities
5. **Meeting #4**: Project desired results
Priority Setting Process & Criteria

**Step 1:** Review health assessment findings at Meeting #1, March 17th
- You may find it helpful to review this data again prior to attending Meeting #2 on April 28th

**Step 2:** Participate in the first round of priority choosing at Meeting #2, April 28th
- This meeting will serve as an initial filter of many potential health and system priorities down to a more reasonable amount to further review.
- You may find it helpful to consider the criteria that will be used to further evaluate potential priorities.

**Step 3:** Participate in the survey (May) to apply criteria against each of the potential health and system priorities identified at Meeting #2.
- **Potential Health Status Criteria:**
  - Seriousness on individual health
  - Social/economic impact
  - Capacity of the public health system to address
  - Readiness of policy makers and the general public to address
- **Potential Public Health System Criteria:**
  - Importance to improving the overall public health system
  - Readiness of public health system stakeholders
  - Changeability over the next five years
- DHHS will summarize this data along with supporting information (magnitude of the problem, national comparison, historical trends, overlap across 4 assessments, overlap to local efforts) for review at Meeting #3, June 14th

**Step 4:** Choose final priorities at Meeting #3, June 14th
- We should end with a few Health Status priorities and a few System priorities.

**Step 5:** Project desired results at Meeting #4, July 28th
- At this final meeting, we will conclude by ensuring we’ve defined our priorities and made recommendations for implementation.
Meeting #1: Review the State Health Assessment

- SHA and SHIP history, purpose
- Criteria selection process
- Health Status Assessment
- Public Health System Assessment
Meeting #2: First Round of Priority Choosing

- Reminder of criteria selection process
  - Health Status Criteria:
    - Seriousness on individual health
    - Social/economic impact
    - Capacity of the public health system to address
    - Readiness of policy makers and the general public to address
  - Health System Criteria:
    - Importance to improving overall public health
    - Readiness of public health system stakeholders
    - Changeability over the next five years
- Priority choosing group activities
After Meeting #2, there were 13 potential Health Status priorities, and 13 potential Health Systems priorities.

This survey allowed participants to rank potential priorities based upon the criteria below:

- **Health Status Criteria:**
  - Seriousness on individual health
  - Social/economic impact
  - Capacity of the public health system to address
  - Readiness of policy makers and the general public to address

- **Health System Criteria:**
  - Importance to improving overall public health
  - Readiness of public health system stakeholders
  - Changeability over the next five years

Survey results identified the top 10 total potential priorities for further discussion.
Meeting #3: Choose Final Priorities

- Based upon the survey results and top 10 potential priorities = narrow to no more than 6
- Systems Assessment: priority choosing group activities
- Health Status Assessment: priority choosing group activities
- Consensus around 6 priority topics
- One specific recommendation made for the development of a centralized data query system
Meeting #4: Project Desired Results

- Vote to keep or reduce # of priorities = group debated and eliminated 1 priority, leaving 5
- Round 1: Ends, Means, Partners brainstorm
- Round 2: Ends, Means, Partners brainstorm
- Round 3: Report out and gallery walk
- Round 4: Consensus
2017-2021 SHIP Priorities

- Obesity
- Health Equity
- Depression, Suicide and Stigma
- Health Systems Integration
- Healthcare Utilization and Access

*DISCLAIMER: These priority topics are final, but the implementation plans with specific strategies are yet to be determined. The following slides provide a high level overview of the intended focus and general direction for each priority as recommended by the SHIP Priority Choosing Community Group. As Implementation Teams form, actionable efforts will be defined and may vary depending on determined statewide need, changeability, stakeholder readiness to address and commitment of partners to lead initiatives.
Priority: Integration

DRAFT RESULT: *Nebraska has an integrated health system that includes public health.*

GENERAL OVERVIEW:
- Nebraska’s health system is changing with an increased focus on improving patient and population health outcomes. It is recommended that the public health system, the primary care system and other health systems to establish connections and interweave partnerships for a solid foundation of standards and practices for individual and population health.
- Efforts may focus around establishing a collaborative research agenda between public health and primary care; supporting a database that track initiatives and developed models; providing education to primary care about the role of public health and mechanisms to integrate; developing a statewide framework for integration and potential supporting policy; and supporting linkages for sharing health data and Nebraska Health Information Initiative (NeHII) efforts.

*DISCLAIMER: Actual activities are yet to be determined and may vary.*
Priority: Obesity

DRAFT RESULT: Nebraska children, adults and minority populations will have decreased rates of obesity.

GENERAL OVERVIEW:
- Nebraska seeks a measurable reduction in obesity among its citizens and a decrease of the associated chronic diseases and related healthcare costs. Developing a statewide coordinated approach for strategies at the program, systems, policy and environmental level that promote a healthy lifestyle is desired.
- Efforts may focus around environmental supports that increase access to and promote physical activity and nutrition; evidence-based strategies around obesity prevention; and breastfeeding initiatives.

*DISCLAIMER: Actual activities are yet to be determined and may vary.*
DRAFT RESULT: Nebraska’s underserved populations will experience increased utilization and access to available healthcare services.

GENERAL OVERVIEW:
- In the effort to reach improved health outcomes among targeted populations (low income, rural areas), addressing issues related to access and utilization of culturally responsive services is important. This priority is directed toward efforts that reduce in the inappropriate use of emergency care, increase utilization of preventive services, standardize data measures and coordinate with integration efforts particularly related to behavioral health.
- Efforts may focus around integration efforts; tracking barriers to care; workforce capacity and utilizing community health workers; home based services and patient centered medical homes; and enhanced provider and system partnerships.

*DISCLAIMER: Actual activities are yet to be determined and may vary.
Priority: Disparities/Equity

DRAFT RESULT: Nebraska will experience improved health equity and decreased health disparities.

GENERAL OVERVIEW:
- Nebraska experiences inequities among its population and seeks program, policy, systems and environmental changes to address these issues. Changing the frame from disparity to health equity and increasing the capacity of organizations to advance health equity is desired. The foundation of this work must include data collection, coordinated delivery models, diversified workforce and leadership.
- Efforts may focus around addressing social determinants of health, utilizing a universal medical record system as a data collection tool; studying health outcome data by population characteristics (e.g. rural, ethnicity, race, age, gender); and improving the cultural competency and health literacy of the workforce.

*DISCLAIMER: Actual activities are yet to be determined and may vary.
Priority: Depression/Suicide

DRAFT RESULT: *Nebraska will have coordinated systems of care to address depression, suicide and stigma.*

GENERAL OVERVIEW:
- Nebraska’s public health system recognizes the need for improved interface with the behavioral health system to support efforts that address depression and suicide through primary prevention, education and integration. Supporting the public health workforce, increasing protective factors among youth, and collaborating between service delivery systems may strengthen our response toward desired outcomes.
- Efforts may focus around universal screening practices; training for the public health and primary care workforce; environmental scan of the continuum of care; and advocacy for preventive approaches.

*DISCLAIMER: Actual activities are yet to be determined and may vary.*
Creating a Plan
7 Population Accountability Questions

- What are the quality of life conditions we want for the children, adults and families who live in our community?
- What would these conditions look like if we could see them?
- How can we measure these conditions?
- How are we doing on the most important of these measures?
- Who are the partners that have a role to play in doing better?
- What works to do better, including no-cost and low-cost ideas?
- What do we propose to do?
Developing plans for action

- Each Priority will begin by reviewing data, current environment, identifying partners and considering best practices.
- Each Priority may have several objectives or strategies and related work teams.
- Each Priority will craft action plans, outcomes and performance measures.
Collective Impact for Implementation

- **Common Agenda**: SHIP priorities

- **Backbone Organization Support**: The DHHS Division of Public Health, Office of Community Health and Performance Management serves this role.

- **Influential Champions**: Each Priority will have ‘co-initiative sponsors’ to drive the implementation.
  - Participation may vary depending on needed roles and responsibilities. Partners can determine the best way to contribute as the SHIP action plans develop.

- **Mutually Reinforcing Activities**: Partners may identify a variety of strategies to test to determine best use of resources for maximum impact.

- **Shared Measurement**: Stakeholders will determine relevant data collection and measures that ensure accountability and share successes.

- **Continuous Communication**: Building trust, establishing common language and sharing motivation is an important stakeholder contribution.
  - Sign up for participation and/or to receive updates about SHIP activities and progress.
Next Steps:
Sign up to participate!
Contribute to developing action plans and implement strategies.
Subscribe to informational updates.
Be a cheerleader!
Questions ?
Thank you!

Please contact us at: DHHS.SHIP@Nebraska.gov

Check out the SHIP Performance Dashboard at: dhhs.ne.gov/CommunityHealthPerformance

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