



**Department
of Health**

Moving Forward with the Prevention Agenda 2019-2024

**Presentation to Ad Hoc Committee to Lead the
Prevention Agenda**

Wednesday, September 26, 2018

October 12, 2018

Agenda

1. Updates on NYS Health Across all Policies and Healthy Aging Initiative
2. Review final drafts of Priority Specific Plans
3. Discuss Community Health Improvement efforts at local level and how to strengthen process
4. Preview the Population Health Summit 2019

Traveling Together...



NYAM



AARP

NYS PREVENTION AGENDA 2019-2024

Statewide Implementation Efforts

- **Healthy Aging (HA)**

Age-friendly/livable communities certification community planning grant program

- **Health Across All Policies (HAAP)**

Executive Order to promote attention to Health Across all Policies and Healthy Aging into state agency procurements and initiatives

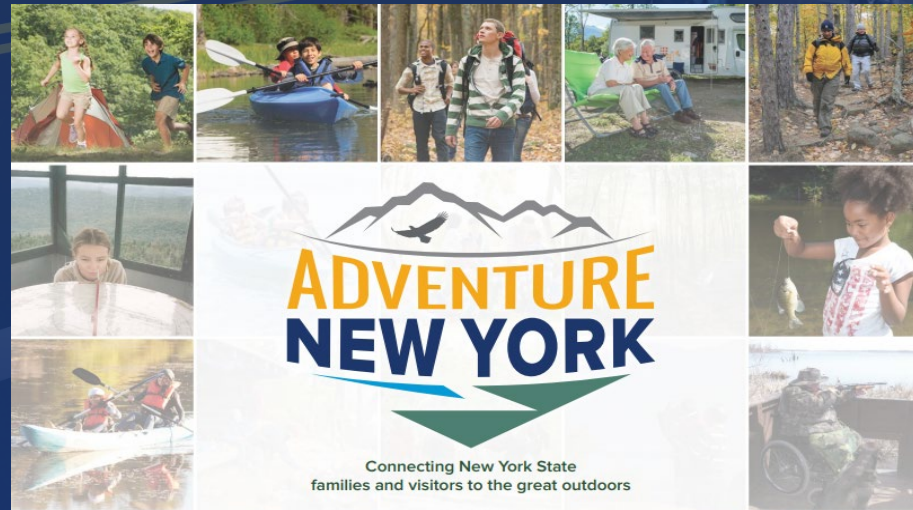
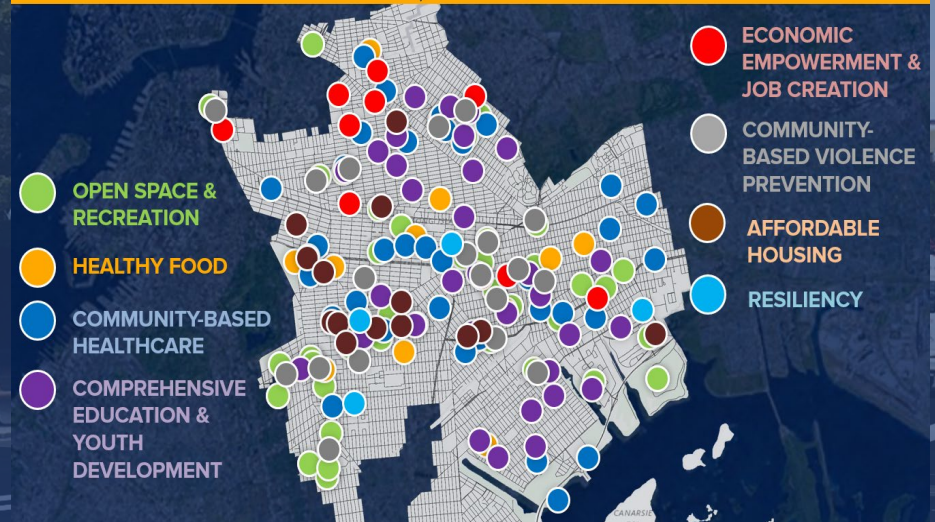
Inter-Agency Projects for HAAP-HA



New York Healthy Homes Pilot Project Design Phase

Pilot Project Design

- Based upon feasibility research findings and recommendations, develop New York State specific green and healthy homes project model that integrates energy efficiency interventions with health interventions
- Project design for how Medicaid funded healthy homes housing resident educations, assessments and interventions (to reduce asthma episodes, lead poisoning, household injuries, etc.) would be integrated with state funded weatherization and energy efficiency interventions and other housing intervention
- Design would produce comprehensive assessment/energy audit and housing interventions where home-based environmental health hazards are remediated and energy loss is addressed



Timeline for Updating the Prevention Agenda for 2019-2024

February – April, 2018

- Assessed health status, demographic changes, progress on Prevention Agenda objectives, and proposed updated priorities and focus areas
- Ad Hoc Committee members hosted 20 + meetings to obtain feedback
- 200 + individuals and organizations completed survey to provide feedback
- State agencies provided feedback to support integration of HAAP into Prevention Agenda

May – September, 2018

- Ad Hoc Committee met to finalize focus areas and goals based on feedback
- Priority specific committees now meeting to develop priority specific action plans
 - 150+ people involved
- Using already established committees where possible
- *State agencies integrated into effort thus far:*
 - *OMH, OASAS, Ag and Markets, Aging, DEC, NYSERDA, Dept. of State, NYSED*

September– December, 2018

- Ad Hoc Committee will review and approve at September 26 meeting
- Prevention Agenda 2019-2024 will be finalized and reviewed with the PHHPC and approved
- NYS will use updated Prevention Agenda to launch next cycle of local planning

Prevention Agenda 2019-24 Vision:

**New York is the Healthiest State
for People of all Ages**

Cross-Cutting Principles

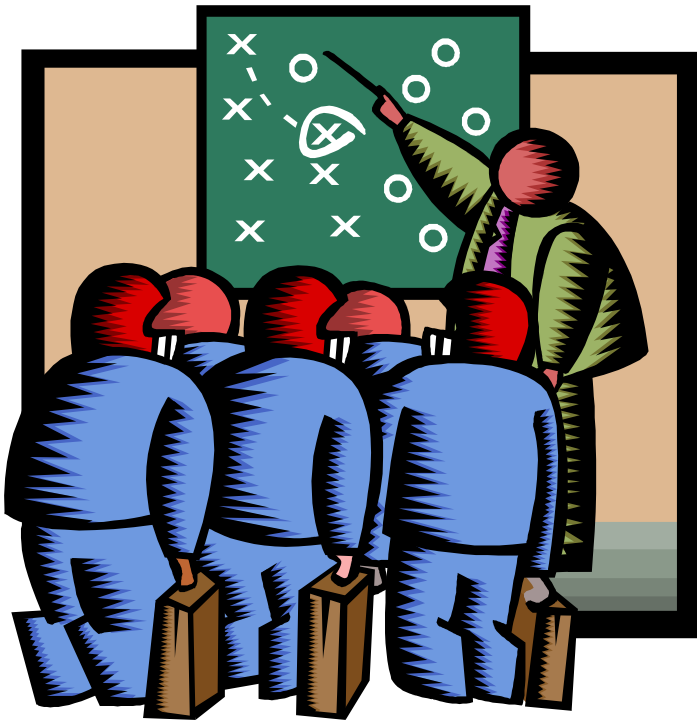
To improve health outcomes, enable well-being and promote equity across the lifespan the Prevention Agenda will:

- Focus on social determinants of health and health disparities,
- Incorporate a health in all policies approach,
- Emphasize healthy aging across the lifespan,
- Support inclusive community engagement and collaboration across sectors in the development and implementation of local plans,
- Maximize impact with evidence based interventions for state and local action,
- Advocate for increased investments in prevention from all sources,
- Concentrate on primary and secondary prevention, not on health care design or reimbursement.

Prevention Agenda Priorities 2019-2024

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

Five Draft Priority Specific Action Plans



- Focus Areas and Goals
 - Measurable Objective(s) including those that measure disparities
 - 2-5 Evidence Based Interventions for state and local action
 - Include resources for implementation
- For each evidence based intervention, plan:
 - Identifies specific age groups that will be reached, with special attention to older adults
 - Identifies social determinants and health disparities being addressed
 - Identifies roles different organizations and agencies can play
 - Identifies intermediate level measures to track progress

Questions to Consider

1. Is there adequate attention to:
 - Racial, ethnic and socio-economic health disparities?
 - Healthy aging?
 - Health across all policies to address social determinants of health?
2. How do we format effectively for public distribution and ease of use by state and local partners and local coalitions?

Chronic Disease Focus Areas and Goals

Focus Area	Goals
Healthy Eating and Food Security	<p>Overarching Goal: Reduce obesity and the risk of chronic diseases</p> <ol style="list-style-type: none">1. Increase access to healthy and affordable foods and beverages2. Increase skills and knowledge to support healthy food and beverage choices3. Increase food security
Physical Activity	<p>Overarching Goal: Reduce obesity and the risk of chronic diseases</p> <ol style="list-style-type: none">1. Improve community environments that support active transportation and recreational physical activity for people of all ages and abilities2. Promote school, child care, and worksite environments that support physical activity for people of all ages and abilities3. Increase access, for people of all ages and abilities, to safe indoor and/or outdoor places for physical activity
Tobacco Prevention	<ol style="list-style-type: none">1. Prevent initiation of tobacco use, including combustible tobacco and electronic vaping products (electronic cigarettes and similar devices) by youth and young adults2. Promote tobacco use cessation, especially among populations disproportionately affected by tobacco use including: low SES; frequent mental distress/substance use disorder; LGBT; and disability3. Eliminate exposure to secondhand smoke and exposure to secondhand aerosol/emissions from electronic vapor products
Preventive Care and Management	<ol style="list-style-type: none">1. Increase cancer screening rates for breast, cervical, and colorectal cancer2. Increase early detection of cardiovascular disease, diabetes, prediabetes and obesity3. Promote the use of evidence-based care to manage chronic diseases4. Improve self-management skills for individuals with chronic conditions

Process for Development and Review of Chronic Disease Action Plan

- DOH Divisions of Chronic Disease Prevention and Nutrition created four workgroups, one for each focus area
- Over 100 stakeholders participated
- Wide range of organizations
 - (e.g., LHDs, Ag & Mkts, OTDA, CBOs, hospital and provider associations, NGOs, local aging, HIEs, hospitals and providers, independent living center)
- Subject matter experts and stakeholders drafted plans for each focus area
- Strengths
 - Strong body of research and well-established evidence-based interventions
 - Engaged workgroup members provided valuable feedback
- Challenges
 - Development of intermediate measures
 - Need for implementation resources at the local level

Promote a Healthy and Safe Environment

Focus Area: 1 Injuries, Violence and Occupational Health

Goal 1.1 Reduce falls among vulnerable populations

Goal 1.2 Reduce violence by targeting prevention programs particularly to highest risk populations

Goal 1.3 Reduce occupational injuries and illness

Goal 1.4 Reduce traffic related injuries for pedestrians and bicyclists

Focus Area: 2 Outdoor Air Quality

Goal 2.1 Reduce exposure to outdoor air pollutants

Promote a Healthy and Safe Environment

Focus Area: 3 Built and Indoor Environments

Goal 3.1 Improve design and maintenance of the built environment to promote healthy lifestyles, sustainability, and adaptation to climate change

Goal 3.2 Promote healthy home and school environments

Focus Area: 4 Water Quality

Goal 4.1 Protect water sources and ensure quality drinking water

Goal 4.2 Protect vulnerable waterbodies to reduce potential public health risks associated with exposure to recreational water

Focus Area: 5 Food and Consumer Products

Goal 5.1 Raise awareness of the potential presence of chemical contaminants and promote strategies to reduce exposure

Goal 5.2 Improve food safety management

Process for Plan Development and Review

NYSDOH Center for Environmental Health (CEH) subject matter experts drafted the objectives and interventions and engaged stakeholders in a variety of ways to amend and refine the Plan.

- Attended NYSDOH Hosted Stakeholder Meetings (CGHS Steering Committee, ICIG, etc)
- Shared Focus Area Specific Draft Plans for review and comment
 - Key non-governmental Partners
 - Partner Agencies (Federal and State)
 - Other Centers/Offices in the Department
 - Subject Matter Experts
 - Volunteers
- Calls and Conference Calls

Provided the Plan to
70+ stakeholders

Strengths: Interested participants, thoughtful feedback, diverse group of volunteers

Challenges/Opportunities: Lack of data and evidence based interventions, limited time for review and development

We anticipate and welcome more feedback!

Priority: Healthy Women, Infants, and Children

Focus Area 1: Maternal & Women's Health

- Goal 1.1: Increase use of primary and preventive health care services by women of all ages, with a focus on women of reproductive age
- Goal 1.2: Reduce maternal mortality and morbidity

Focus Area 2: Perinatal & Infant Health

- Goal 2.1: Reduce infant mortality and morbidity
- Goal 2.2: Increase breastfeeding

Focus Area 3: Child & Adolescent Health

- Goal 3.1: Support and enhance children and adolescents' social-emotional development and relationships
- Goal 3.2: Increase supports for children and youth with special health care needs
- Goal 3.3: Reduce dental caries among children

Focus Area 4: Cross Cutting Healthy Women, Infants, & Children

- Goal 4.1: Reduce racial, ethnic, economic, and geographic disparities in maternal and child health outcomes and promote health equity for maternal and child health populations

Healthy Women, Infants, and Children Action Plan: Process for Development & Review

- Led by NYSDOH Division of Family Health/ NYS Title V Program
- Intentionally aligned with NY's Maternal & Child Health Block Grant (Title V) state action plan
- Workgroup of 30+ individuals representing 20+ organizations
- Two webinars + worksheet (mirroring action plan template) to solicit workgroup member contributions + calls with individual members
- Drafted plans based on workgroup submissions, Title V plan, and extensive review of implementation resources
- Parallel work with data staff to extend data targets to 2024 (done) and program staff to identify intermediate-level measures (in process)

Promote Well-Being and Prevent Mental and Substance Use Disorders Priority

Focus Area 1: Promote Well-Being

Goal 1.1 Strengthen opportunities to build well-being and resilience across the lifespan

Goal 1.2 Facilitate supportive environments that promote respect and dignity for people of all ages

Focus Area 2: Prevent Mental and Substance Use Disorders

Goal 2.1 Prevent Underage drinking and excessive alcohol consumption by adults.

Goal 2.2 Prevent opioid and other substance misuse and deaths

Goal 2.3 Prevent and address adverse childhood experiences (ACEs)

Goal 2.4 Reduce the prevalence of major depressive disorders

Goal 2.5 Prevent suicides

Goal 2.6 Reduce the mortality gap between those living with serious mental illness and the general population

Process for Development and Review of Well-Being and Mental and Substance Use Disorder Prevention Action Plan

- **Co-chairs:** Michael Compton, MD, MPH, OMH and Andrew Heck, MPA, OASAS
- Worked as single workgroup; Draft prepared with input from OASAS, OMH and DOH staff, and content updated previous version of action plan, and modified based on discussions from workgroup
- Emails sent to 90 members, and about 25 participated in the two meetings held (WebEx conference call and one hybrid in-person/WebEx meeting)
- Among workgroup: State Education Department, OASAS, OMH, Youth Power, Friends of Recovery, staff with DOH drug user health program, local health departments, hospitals, advocacy organizations, mental health association, academia, community-based organizations, researchers focused on MH and aging issues.
- **Strengths:** Active participation, diverse group, identifying additional data from NSDUH and Opportunity Index
- **Challenges/Opportunity:** Crafting the ACEs goal, lack of data (e.g. subjective well-being or resilience, stigma/prejudice)

Prevent Communicable Diseases

2019-2024 Focus Areas

2019-2024 Goals

1. Vaccine-Preventable Diseases	1.1 Improve vaccination rates
	1.2 Reduce vaccination coverage disparities
2. Human Immunodeficiency Virus (HIV)	2.1 Decrease HIV morbidity (new HIV diagnoses)
	2.2 Increase viral suppression
3. Sexually Transmitted Infections (STIs)	3.1 Reduce the annual rate of growth for STIs
4. Hepatitis C Virus (HCV)	4.1 Increase the number of persons treated for HCV
	4.2 Reduce the number of new HCV cases among people who inject drugs
5. Antibiotic Resistance and Healthcare-Associated Infections	5.1 Improve infection control in healthcare facilities
	5.2 Reduce infections caused by multidrug resistant organisms and C. difficile
	5.3 Reduce inappropriate antibiotic use

Process for Development of Vaccine-Preventable Disease Action Plan

- **Program Lead:** Elizabeth Rausch-Phung, MD, MPH, NYSDOH Bureau of Immunization
- Initial planning began with a review of trends in immunization coverage across age, gender, racial/ethnic and socio-economic status groups from all available data sources (NYSIIS, CIR, National Immunization Survey, NIS-Teen, Behavioral Risk Factor Surveillance System)
- Initial findings and draft goals and objectives were presented to the NYS Immunization Advisory Council
- Follow-up calls held with an ad-hoc sub-committee of the Immunization Advisory Council and with the NYC DOHMH
- **Strengths:** SMART objectives; align with Healthy People 2020 Immunization objectives; expanded previous HPV and influenza vaccine objectives to include larger populations
- **Challenges/Opportunity:** Late change in national early childhood immunization assessment methodology necessitated change in Prevention Agenda methodology; new methodology will better align to HEDIS standards and use NYSIIS and CIR data to better approximate true NYS childhood immunization coverage

Process for Development of STI Action Plan

- Process included a review of STI surveillance data with epidemiologists and program staff to identify SMART objectives
- Community engagement process with the HIV Advisory Body was used to help select interventions that are evidence based and have a high likelihood of impacting goals.
- Used interventions in the NYS Ending the Epidemic plan as well as recommendations from workgroup of AIDS Advisory Council ETE Subcommittee
- **Strengths:** close alignment between ETE and Prevention Agenda goals and interventions; useful feedback from community members
- **Challenges/Opportunity:** With STI rates increasing every year, developing SMART goals required careful data analysis and projection; selecting interventions designed to have maximal impact at population level, while working within confines of existing resources, can be difficult.

Questions to Consider

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 - Healthy aging?
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Local Community Health Improvement

Phases of Community Health Improvement Planning in NYS

Pre-Prevention Agenda

- Local health departments completed community health assessments (CHAs) and municipal public health service plans as per Article 6 of PH Law.
- Non profit hospitals completed community service plans (CSPs) as per Article 28 of PH Law. Plans were retrospective descriptions of actions taken to support community health.

Prevention Agenda 2008 - 2012

- LHDs asked to conduct a CHA and to collaborate with hospitals to identify shared local priorities aligned with Prevention Agenda for action to be described in hospital CSPs.
- CSPs became prospective plans.
- Development and implementation of community health improvement efforts challenging.

Phases of Community Health Improvement Planning in NYS

Guidance for 2013-2016

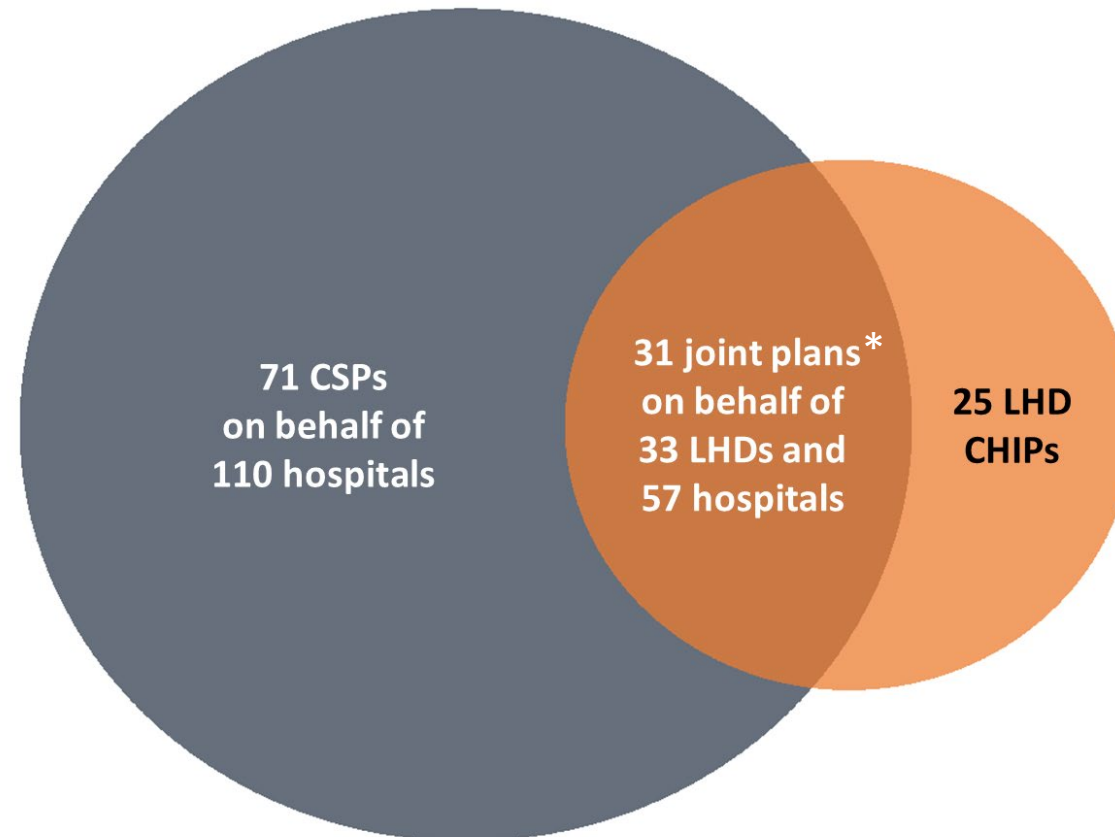
- LHDs strongly encouraged to collaborate with hospitals and other partners on development of CHA and CHIPs.
- Hospitals asked to reflect collaborative CHA/CHP efforts in their CSP.
- NYSDOH provided feedback and required annual updates
- Hospitals asked to report community benefit spending and to link community benefit spending with implementation of Prevention Agenda interventions.

Guidance for 2016-2018

- Work with partners to identify common public health priorities.
- Strongly encouraged to develop single plan that serves as both the LHD's community health improvement plan and the hospital's community service plan.
- Describe community engagement to identify and select at least two "collaborative" health priorities aligned with Prevention Agenda
- Outline how LHDs and hospitals are working with partners to address shared priorities, ensuring that at least one priority addresses a disparity.
- Report community benefit spending.

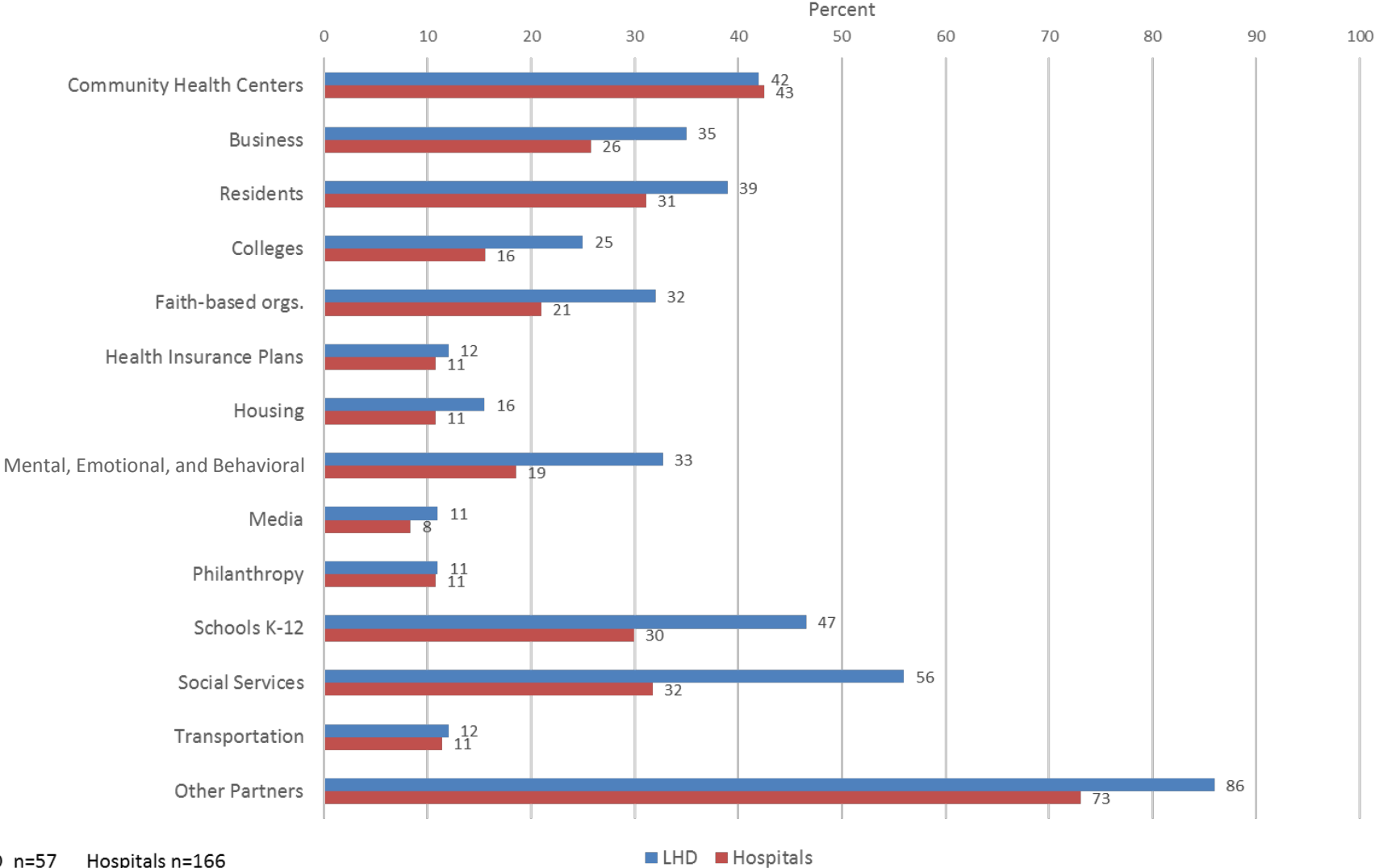
2016-2018 Community Health Improvement Plans Received

127 plans by 58 LHDs and 167 Hospitals



* Joint planning took place outside of New York City.

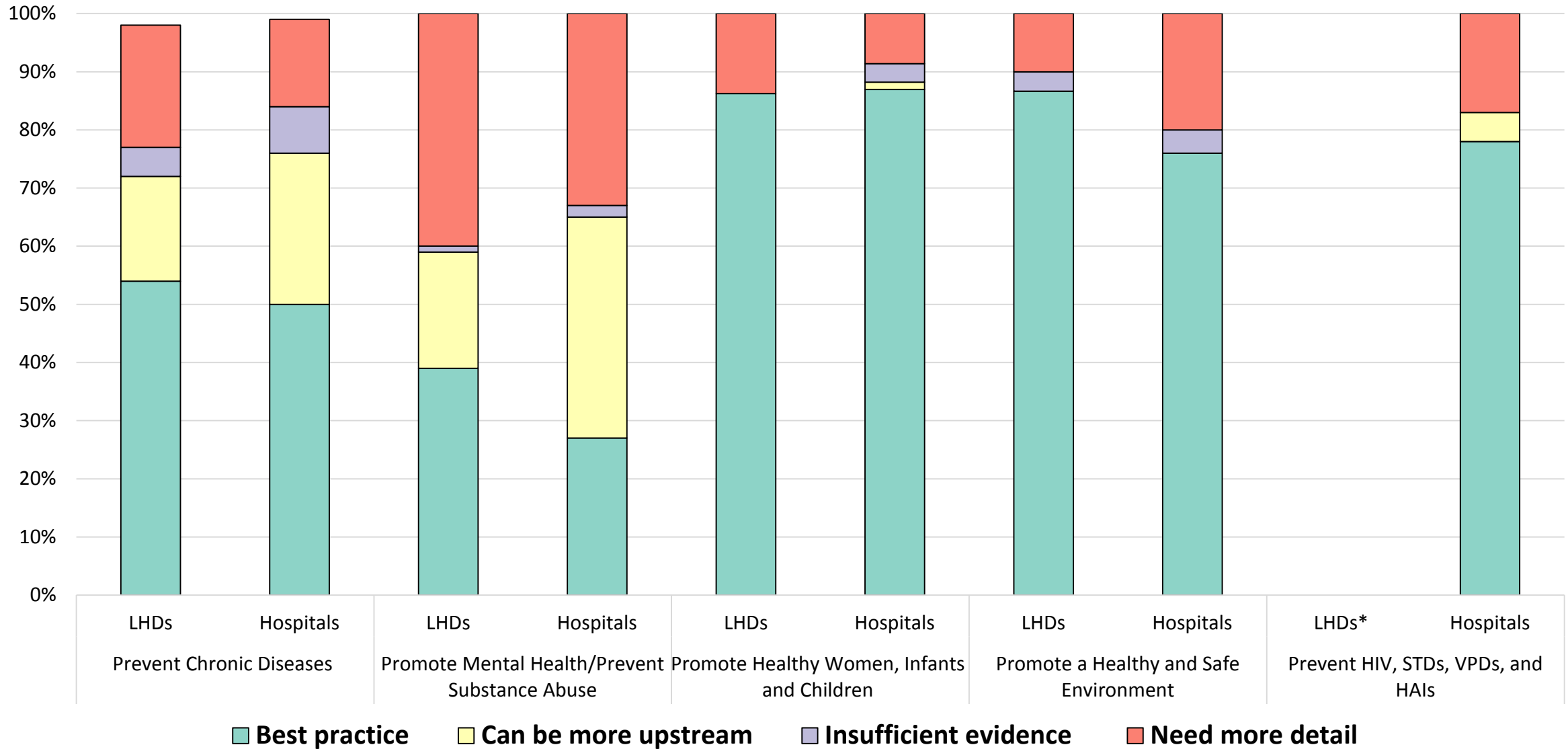
Prevent Chronic Diseases: Partners Engaged, December 2016



TOTALS: LHD n=57 Hospitals n=166

NOTE: Organizations often indicated working in more than one priority area

Assessments of 2016-2018 Local CHIPs and CSPs



Source: 2016-2018 Workplans

* Local health departments conduct many interventions in this area, but are not counting them as collaborative Prevention Agenda interventions.



Services

News

Government

Local

PROGRAMS

Downtown Revitalization Initiative



REGIONAL ECONOMIC DEVELOPMENT COUNCILS

REGIONS

NEWS

FAQS

MAP

MATERIALS

CONSOLIDATED FUNDING APPLICATION

Regional Councils



<https://www.ny.gov/programs/downtown-revitalization-initiative>

https://regionalcouncils.ny.gov/sites/default/files/DRI_Booklet_Final.pdf

<https://regionalcouncils.ny.gov/>

Designated Clean Energy Communities Map

The communities highlighted on this map are demonstrating their commitment to clean energy by participating in the Clean Energy Communities Program. A community must complete at least four High Impact Actions to earn the Clean Energy Communities designation.

454

Participating Communities

209

Designated Communities

1,255

Actions Completed

Filter by High Impact Action

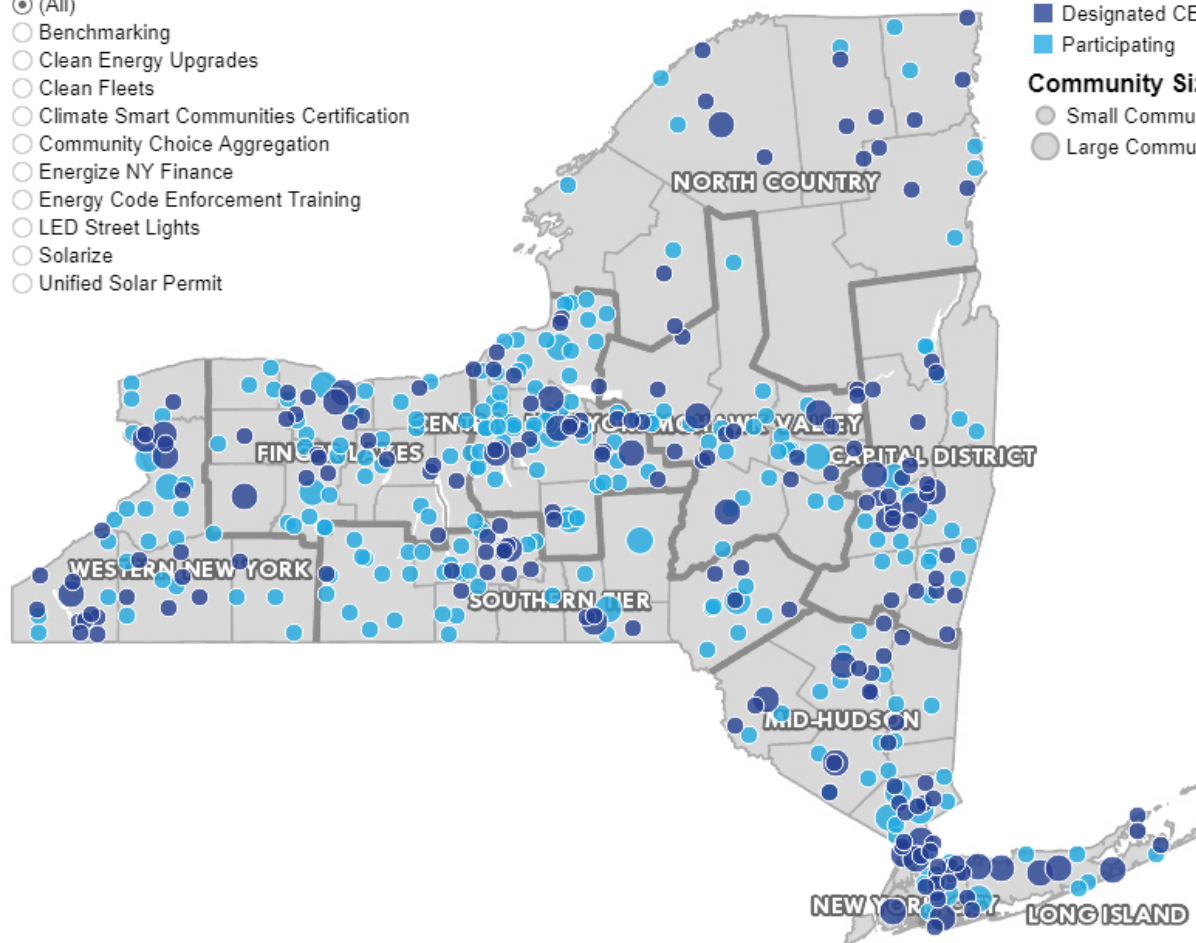
- (All)
- Benchmarking
- Clean Energy Upgrades
- Clean Fleets
- Climate Smart Communities Certification
- Community Choice Aggregation
- Energize NY Finance
- Energy Code Enforcement Training
- LED Street Lights
- Solarize
- Unified Solar Permit

Designation Status

- Designated CEC
- Participating

Community Size

- Small Community
- Large Community



Key Next Steps for Discussion:

- Expanding partnerships to include business, academia, media and health plans
- Connecting agencies/initiatives/infrastructure to local Prevention agenda efforts
- Providing racial, ethnic, SES data to local partnerships so they can take action on addressing health disparities
- Encouraging additional attention to evidence base and promising practices

Coming Soon: 2019 Population Health Summit!

- **Tentative Date: February 28, 2019 (Albany)**
- Celebrate progress and updated Prevention Agenda, highlighting Health Across all Policies and Healthy Aging efforts
- Connect communities working on common Prevention Agenda priorities to advance collaborations between public health, hospitals, and other sectors
- Sponsors (in formation):
 - NY Academy of Medicine
 - Institute for Family Health
 - NYU Langone Medical Center
 - United Hospital Fund
 - Primary Care Development Corporation
 - HRI/NYSDOH
 - IPRO
 - NYS Health Foundation
 - Health Foundation of Western and Central NY
 - HANYS
 - NYSACHO