

State Health Improvement Plan (SHIP) In-person Workshops on Cross-cutting Factors

Health Policy Institute of Ohio (HPIO)

Dates and location

- Maternal & Infant Health: Oct. 3, 1-4 pm
- Mental health & Addiction: Oct. 4, 1-4 pm
- Chronic Disease: Oct. 5, 1-4 pm
- Location: HPIO 3rd floor conference room (RSVP required)
- Registration from 12:45-1:00 pm

Objective

By the end of each workshop, we will have an initial prioritized list of outcomes with related strategies for each of the cross-cutting factors to address each of the priority topic outcomes. This list will be further revised by the HPIO/state team and Work Teams throughout October and November.

What we WILL be doing at these workshops

- Looking to credible sources of research evidence for what works to improve health
- Creating a “wish list” of what we think are the most powerful strategies to achieve our priority topic outcomes (including policies, system changes, programs and services)
- Identifying priority populations for each priority target outcome
- Making connections between priority topic outcomes, and between different cross-cutting factors

What we will NOT be doing at these workshops (but we will get to later in the SHIP process)

- Making final decisions about strategies to include in the SHIP
- Final wordsmithing of SMART objectives
- Setting specific targets (e.g., specific percentages or rates)
- Focusing on feasibility

Overall process for selecting cross-cutting factor objectives and strategies

What	Who/When
1. Identify priority topic outcome objectives	Work Team and state team/HPIO, by 9/27
2. Develop initial prioritized list of outcomes and strategies for each of the cross-cutting factors, <i>focusing on evidence of effectiveness</i>	Work Teams at topic-specific in-person workshops, Oct. 3-5
3. Review initial list of outcomes and strategies, <i>focusing on connections across priority topics, .) and state vs. local</i>	Advisory Committee Oct. 13 meeting
4. Finalize list of outcomes and strategies, <i>focusing on feasibility, fit, reach, balance (life course/urban/rural, etc.)</i>	Work Teams (via conference calls in Oct.-Nov.) and state team/HPIO
5. Additional SHIP detail: Asset and resource mapping, data sources and recommendations, implementation and funding plan, and evaluation plan	HPIO, HCNO and state team, with some input from Work Team members via email and conference calls (Oct.-Dec.)



Agenda

1. **Welcome and introductions** (Greg Moody)
2. **Priority topic outcomes** (Amy Bush Stevens and Reem Aly)
3. **Building upon existing plans**
 - a. Maternal and Infant Health workshop: Shancie Jenkins (ODH) and Dr. Mary Applegate (ODM)
 - b. Mental Health and Addiction workshop: Sandy Starr (OMHAS)
 - c. Chronic Disease workshop: Michele Shough (ODH)
4. **Individual work to identify strategies and outcomes**
5. **Small group discussions**
 - a. Equity (Equity group will meet briefly and then participants will join other groups)
 - b. Social determinants of health
 - c. Public health system, prevention and health behaviors
 - d. Healthcare system and access
6. **Large group check in and next steps** (Amy Rohling McGee and Greg Moody)

Pre-meeting homework

- Review outcome and evidence inventory packet posted on the [SHA/SHIP page](#)
- Decide which cross-cutting factor small group you would like to participate in during the workshop: Equity; Social determinants of health; Public health system, prevention and health behaviors; Healthcare system and access (Equity participants should also select one other group)
- Optional- Consider which strategies and outcomes you recommend be included in the SHIP (you will also have time to do this at the beginning of the workshop)
- Optional- Are there any measurable outcomes or evidence-based strategies not listed in the evidence inventory that you would like to recommend be included in the SHIP? (If so, bring evidence of effectiveness and available data source for measuring outcomes to the workshop to share with the group. We prefer to include evidence-based strategies in the SHIP. However, for areas where the evidence base is currently inadequate, we can consider evidence-informed or practice-based strategies.)