2020-2022 State Health Improvement Plan (SHIP)

SHIP Advisory Committee Meeting

Feb. 23, 2021

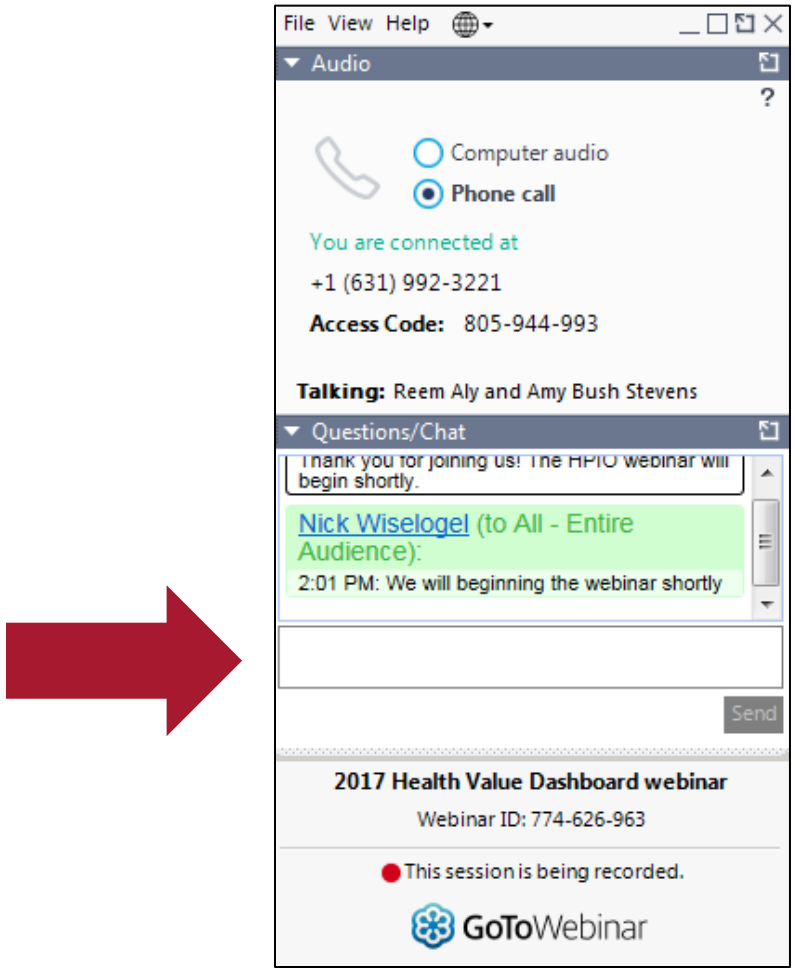
Ohio Department of Health

hpio health policy institute of ohio

Alana Clark-Kirk

Education and Communications Manager, HPIO

Please type questions or comments in the question box



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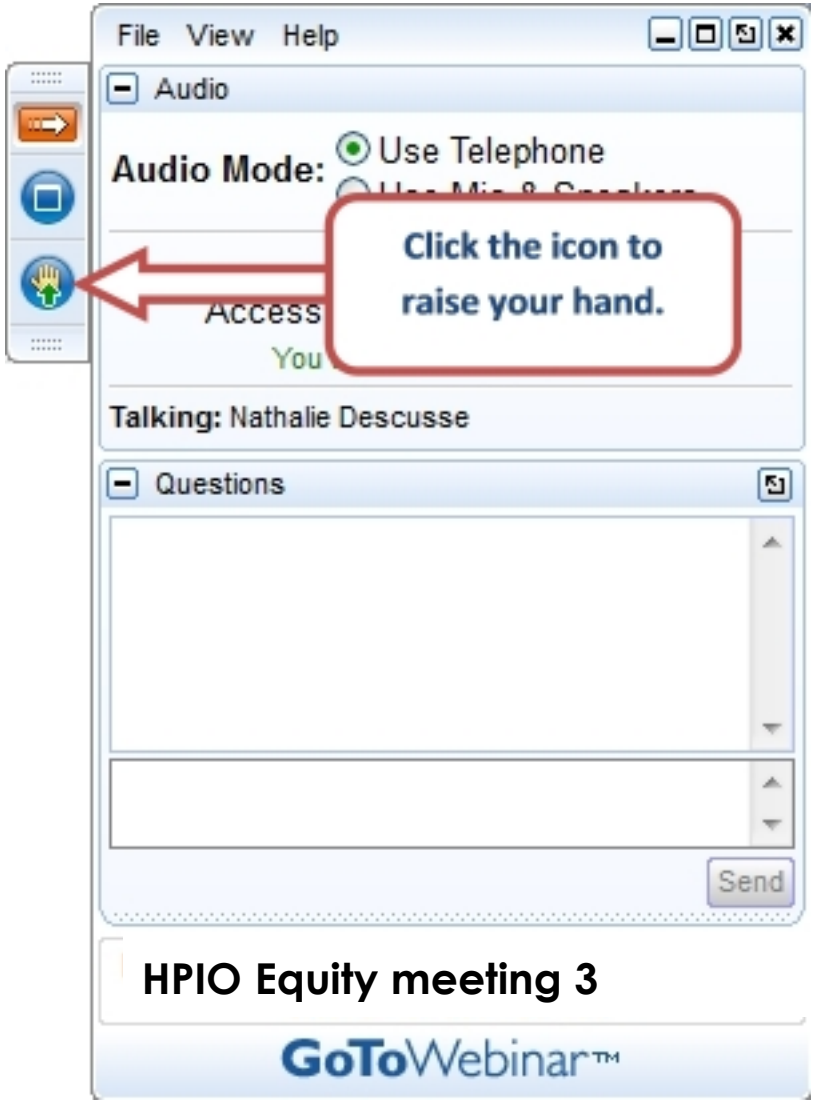
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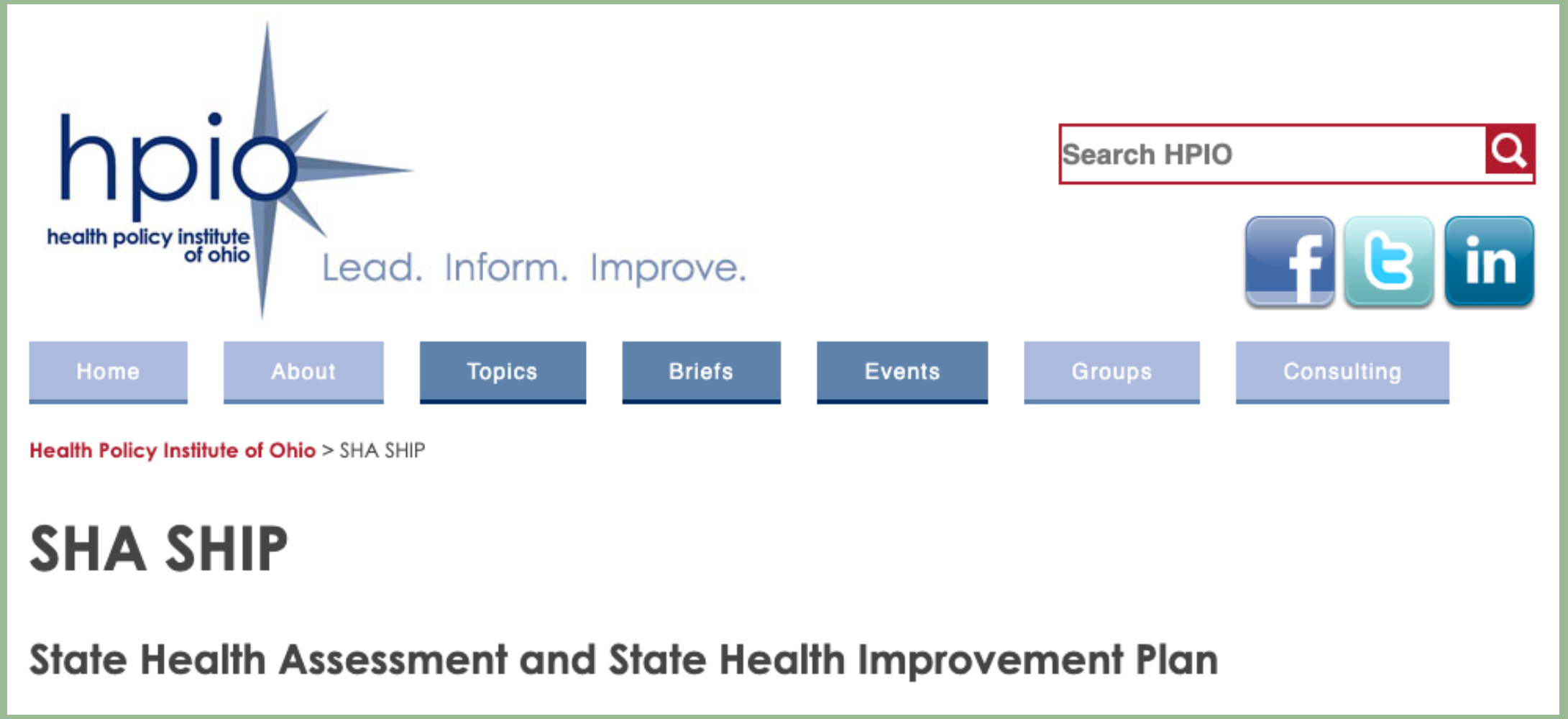
www.hpio.net/sha-ship



Poll question #1

Agenda

- SHIP materials
- SHIP framework and priorities
- Toolkit sections:
  - Overview
  - Advance equity
  - Strategies
  - Communicate
- Next steps

Laura Rooney, MPH

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Ohio | Department of Health

State Health Assessment and State Health Improvement Plan

Vision

Ohio is a model of health, well-being and economic vitality.

Mission

Improve the health of Ohioans by implementing a strategic set of evidence-based population health activities at the scale needed to measurably improve population health outcomes and achieve health equity.

Thank you, SHIP partners!

SHA/SHIP Steering Committee

- Ohio Department of Health
- Ohio Department of Medicaid
- Opportunities for Ohioans with Disabilities
- Ohio Department of Mental Health and Addiction Services
- Ohio Department of Developmental Disabilities
- Ohio Commission on Minority Health
- Ohio Housing Finance Agency
- Ohio Department of Job and Family Services
- Ohio Department of Transportation
- Ohio Department of Aging
- Ohio Department of Education
- RecoveryOhio
- Governor's Minority Affairs Liaison

SHA/SHIP Advisory Committee

SHIP work teams

- Mental health and addiction
- Chronic disease
- Maternal and infant health
- Community conditions
- Health behaviors
- Access to care

Jamie Carmichael

Chief Health Opportunity Advisor
Ohio Department of Health

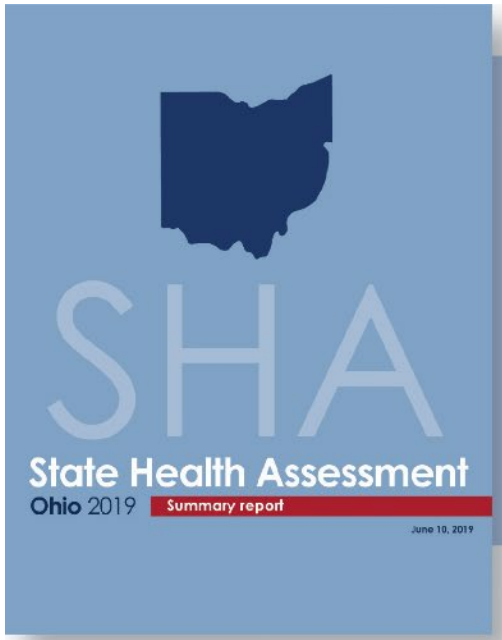
Ohio | Department of Health

Amy Bush Stevens

Vice President, HPIO

Overview of

SHIP materials



2019 State Health Assessment

- Focused on data
- Described current status
- Comprehensive

2020-2022 State Health Improvement Plan

- Focused on outcomes and strategies
- Action-oriented plan for the future
- Prioritized

SHIP

State Health Improvement Plan
Ohio 2020-2022

Executive summary

What is the SHIP?

The State Health Improvement Plan (SHIP) is a tool to strengthen state and local efforts to improve health, well-being and economic vitality in Ohio. The SHIP's main components are:

- Six priorities including three factors and three health outcomes (see page 2)
- Thirty-seven measurable objectives
- A menu of evidence-informed strategies
- An evaluation plan to track and report progress

With the long-term goal of ensuring all Ohioans achieve their full health potential, the SHIP takes a comprehensive approach to achieving equity and addressing the many factors that shape our health, including housing, poverty, education and trauma (see page 2).

How to get involved

- Visit the SHIP page on the ODH website and read the SHIP document
- If not already connected, reach out to the local health department(s), hospital(s), ADAMH board and/or community health improvement coalition in your area to find out how the SHIP is being implemented
- Identify SHIP priorities from page 2 that align with your organizational or constituent priorities
- Use the SHIP to identify evidence-informed strategies that can impact these priorities (see parts 3-8 of the SHIP)
- Partner with others to implement and evaluate SHIP strategies

Why is the SHIP important?

The SHIP is Ohio's roadmap to address the many challenges identified in the 2019 State Health Assessment (SHA), including a troubling drop in life expectancy from 2010 to 2017. Given the scope and complexity of Ohio's health challenges, the SHIP calls for cross-sector partnerships and alignment on a manageable set of measurable goals.

How was the SHIP developed?

Facilitated by the Health Policy Institute of Ohio (HPIO), under contract with the Ohio Department of Health (ODH), the SHIP was developed with input from hundreds of Ohioans through:

- Regional forums and an online survey completed in 2018 as part of the 2019 SHA (622 participants)
- Steering Committee made up of representatives from 13 state agencies, including sectors beyond health
- Advisory Committee with 176 participants, including subject matter experts from around the state who participated in work teams to set objectives and select strategies

How will the SHIP be implemented?

The SHIP is designed to be implemented by a wide range of public and private partners. The menu of objectives and strategies in the SHIP provides flexible options for rural, Appalachian, suburban and urban communities, as well as approaches to improve outcomes for Ohioans of all ages.

State and local partners

There are many partners at the state and local levels that contribute to achieving the vision of the SHIP, such as:

- State agencies and other statewide organizations
- Hospitals
- Local health departments
- Alcohol, Drug and Mental Health (ADAMH) boards
- Area Agencies on Aging
- Boards of developmental disabilities
- Community behavorial health providers
- Employers and workforce development organizations
- Housing organizations
- Medicaid managed care plans
- Philanthropy
- Schools
- Other local agencies and organizations

Public and private partners must row in the same direction to achieve the **SHIP vision: Ohio is a model of health, well-being and economic vitality**

1

Audience

Any potential partner, including public health, health care and sectors beyond health

Purpose

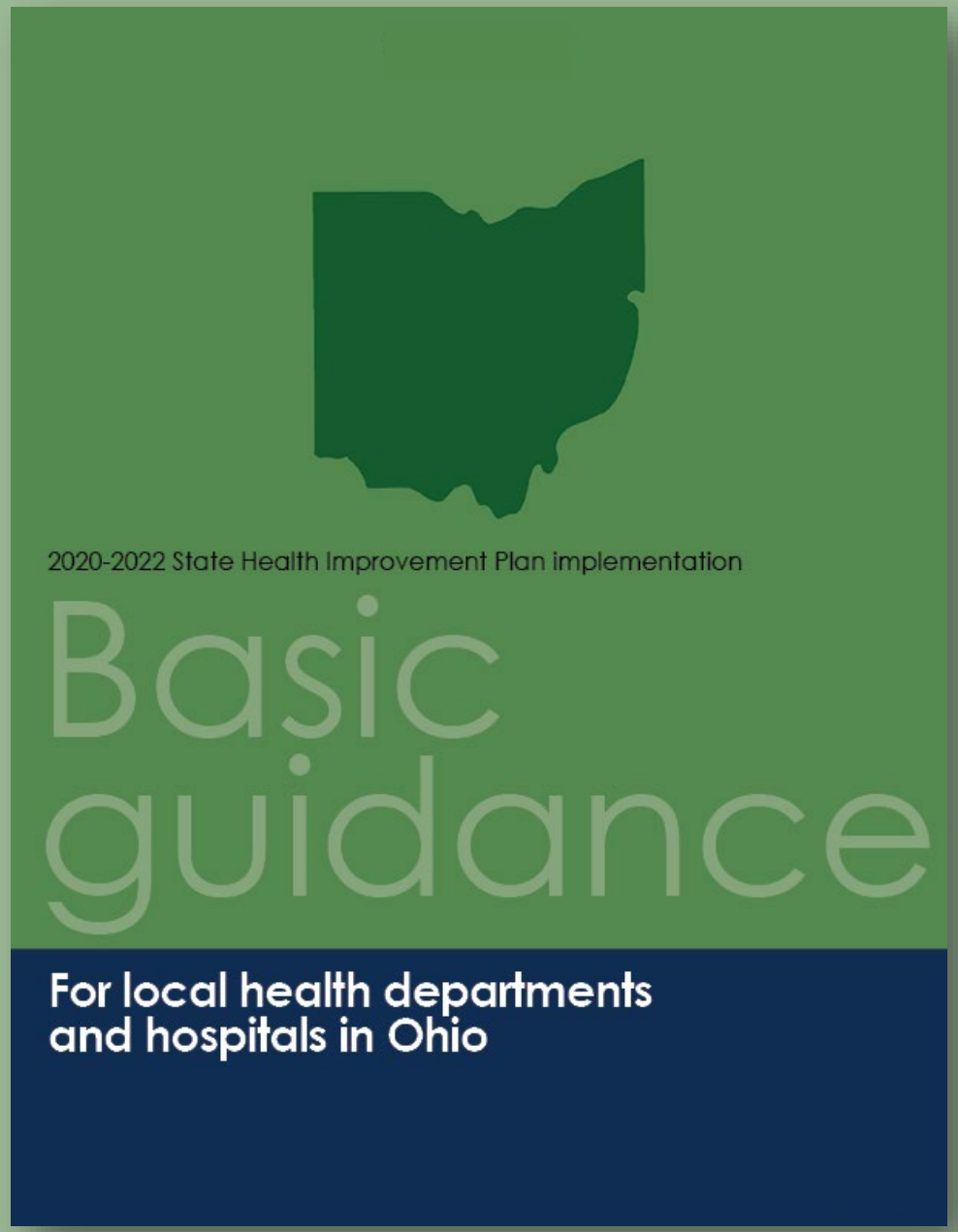
Motivate interest in learning more and getting involved

Audience

State agencies, local health departments, hospitals and any other organizations involved in local community improvement planning

Purpose

Guide statewide alignment on equity, priorities, evidence-informed strategies and outcome evaluation

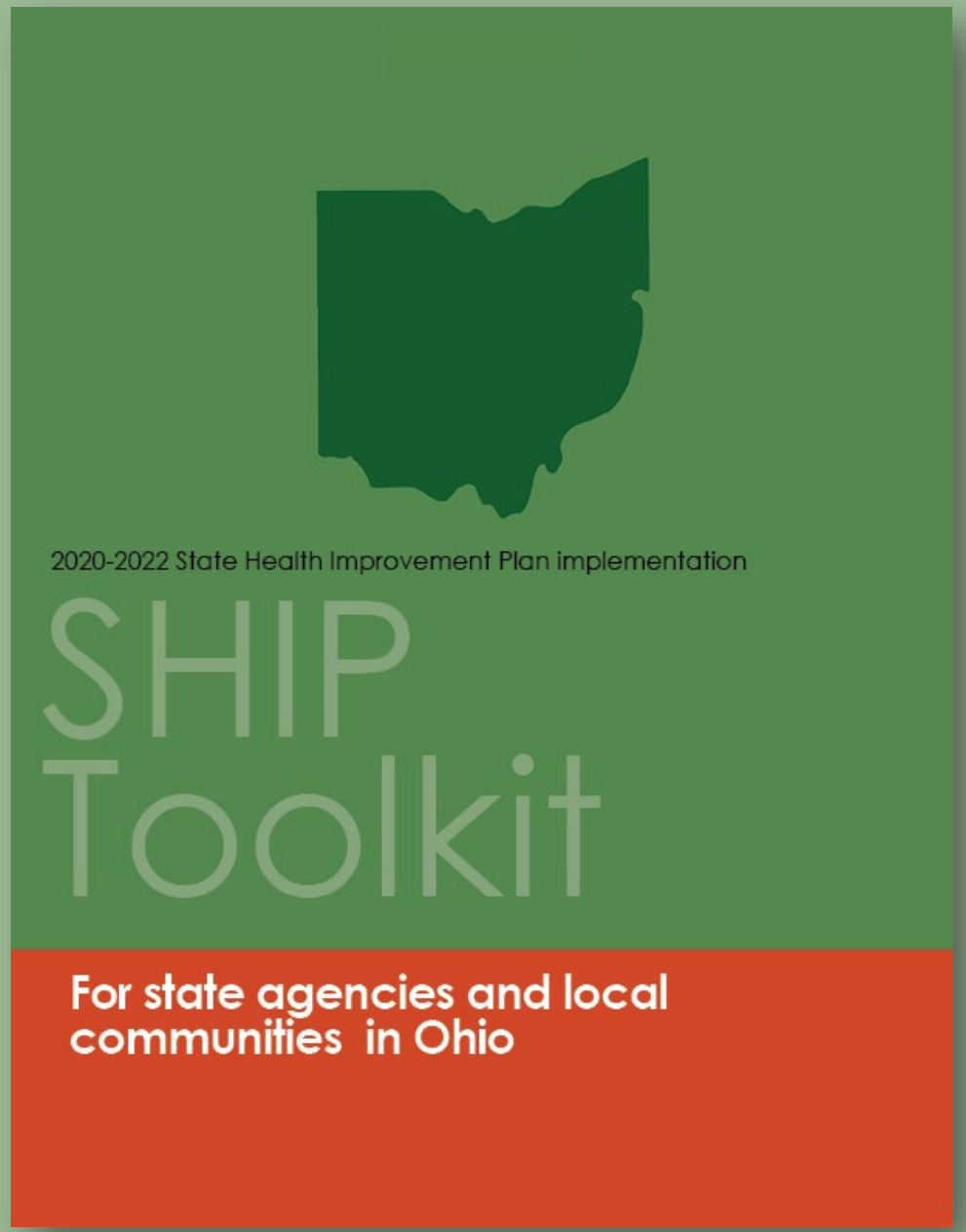


Audience

Local health departments and hospitals

Purpose

Awareness of ORC 3701.981 requirements and SHIP alignment expectations



Audience

State agencies, local health departments, hospitals and any other organizations involved in local community improvement planning

Purpose

Provide specific guidance on equity, priority alignment, development of SMART objectives, strategy selection, evaluation, communications and partnerships

Cross-sector promotional materials

Audience

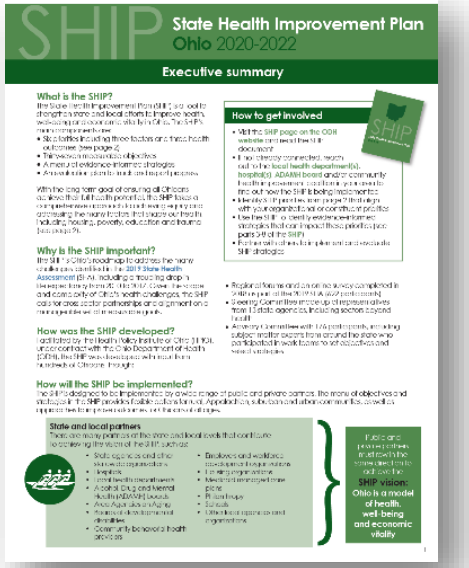
Other sectors, and health organizations reaching out to other sectors

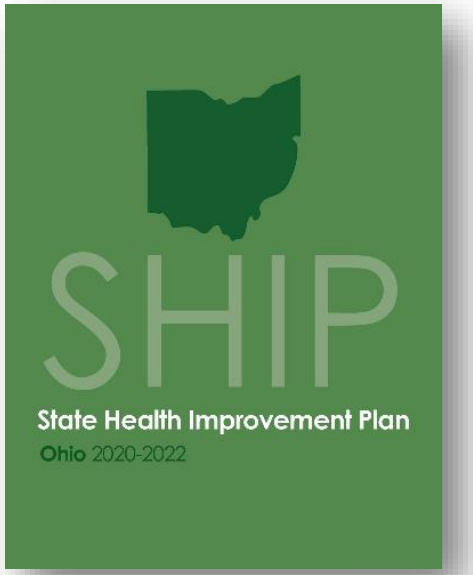
Purpose

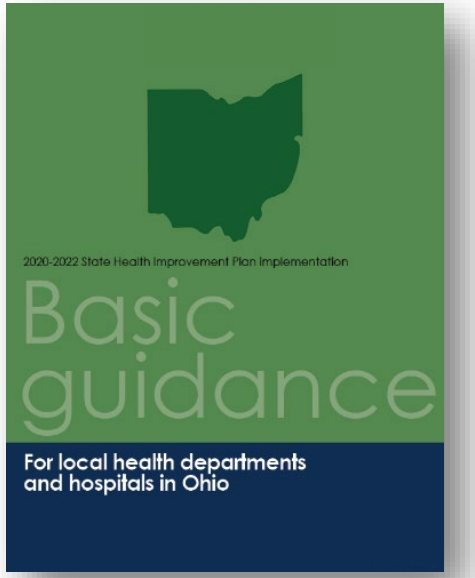
Motivate and support cross-sector partnerships to implement the SHIP

Posted

as of June 2020







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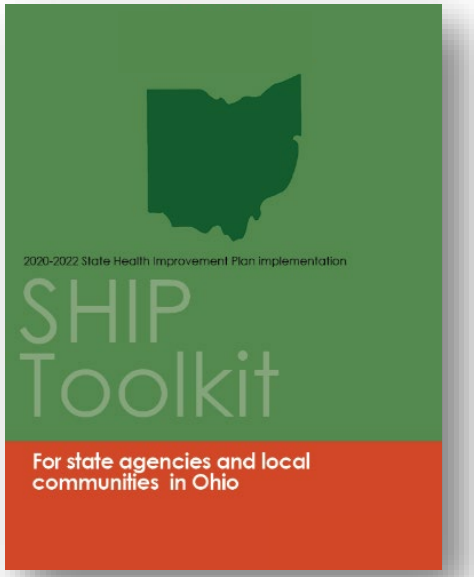

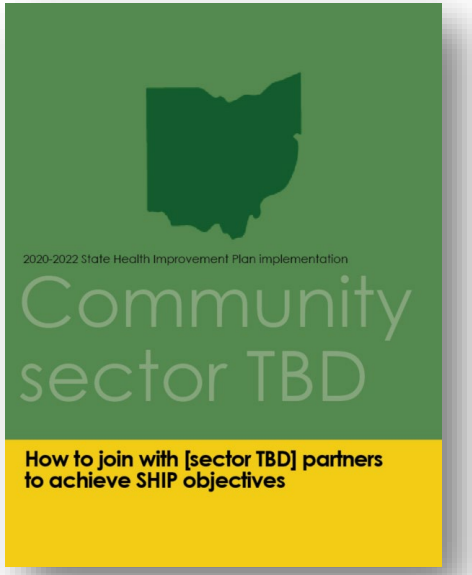

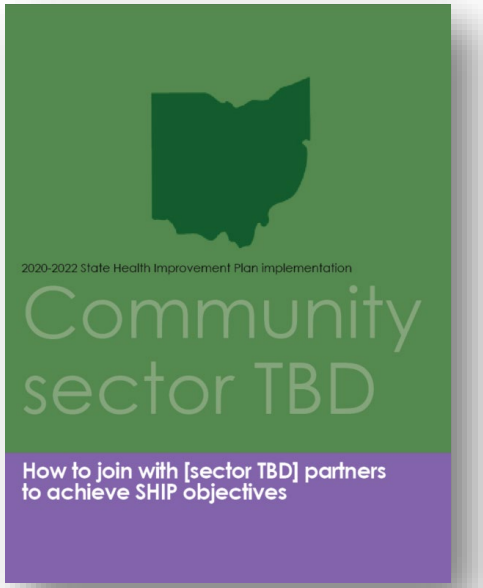

Who We Are

WELCOME

OFFICES, BUREAUS AND DEPARTMENTS

ODH LOCATIONS

EXECUTIVE BIOS

State Health Assessment and State Health Improvement Plan

September 12, 2019 | ODH

State Health Assessment | State Health Improvement Plan | Strategic Plan

The State Health Assessment (SHA) is a comprehensive and actionable picture of health and wellbeing in Ohio. The purpose of the SHA is to:

Get in touch

Ohio Department of Health

246 North High Street,

SHIP framework and priorities

Equity

Health equity is achieved when all people in a community have access to affordable, inclusive and quality infrastructure and services that, despite historical and contemporary injustices, allows them to reach their full health potential.

Priorities

The SHIP identifies three priority factors and three priority health outcomes that affect the overall health and well-being of children, families and adults of all ages.

What shapes our health and well-being?

Many factors, including these
3 SHIP priority factors*:

Community conditions
- Housing affordability and quality
- Poverty
- K-12 student success
- Adverse childhood experiences

Health behaviors
- Tobacco/nicotine use
- Nutrition
- Physical activity

Access to care
- Health insurance coverage
- Local access to healthcare providers
- Unmet need for mental health care

How will we know if health is improving in Ohio?

The SHIP is designed to track and improve these
3 SHIP priority health outcomes:

Mental health and addiction
- Depression
- Suicide
- Youth drug use
- Drug overdose deaths

Chronic disease
- Heart disease
- Diabetes
- Childhood conditions (asthma, lead)

Maternal and infant health
- Preterm births
- Infant mortality
- Maternal morbidity

All Ohioans achieve their full health potential
- Improved health status
- Reduced premature death

Vision
Ohio is a model of health, well-being and economic vitality

Strategies

The SHIP provides state and local partners with a menu of effective policies and programs to improve Ohio's performance on these priorities.

* These factors are sometimes referred to as the social determinants of health or the social drivers of health

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Health equity is achieved when all people in a community have access to affordable, inclusive and quality infrastructure and services that, despite historical and contemporary injustices, allows them to reach their full health potential.

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Priority factors*

1 Community conditions

- Housing affordability and quality
- Poverty
- K-12 student success
- Adverse childhood experiences

2 Health behaviors

- Tobacco/nicotine use
- Nutrition
- Physical activity

3 Access to care

- Health insurance coverage
- Local access to healthcare providers
- Unmet need for mental health care

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Priority health outcomes

1 Mental health and addiction

- Depression
- Suicide
- Youth drug use
- Drug overdose deaths

2 Chronic disease

- Heart disease
- Diabetes
- Childhood conditions (asthma, lead)

3 Maternal and infant health

- Preterm births
- Infant mortality
- Maternal morbidity

Priority factors*

- [ ] Community Conditions
- [ ] Health behaviors
- [ ] Access to care

Priority health outcomes

- [ ] Mental health and addiction
- [ ] Chronic disease
- [ ] Maternal and infant health

*These factors are sometimes referred to as the social determinants of health or the social drivers of health

Example

Priority factor
Community Conditions

Topic
K-12 student success

Indicator
Chronic absenteeism

CC4. Percent of students, grades K-12, who are chronically absent

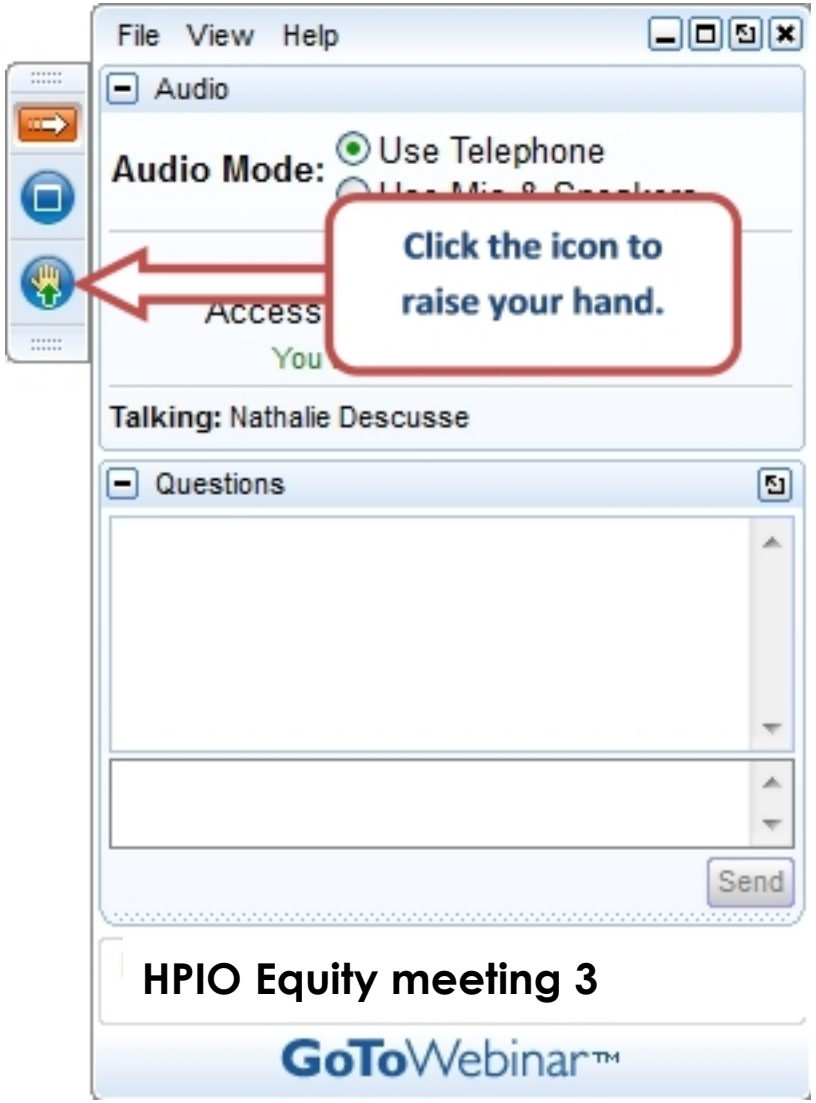
Example

Priority outcome
Mental health and addiction

Topic
Youth drug use

Indicator
Youth alcohol use
MHA5. Percent of high school students, who have used alcohol within the past 30 days

Questions?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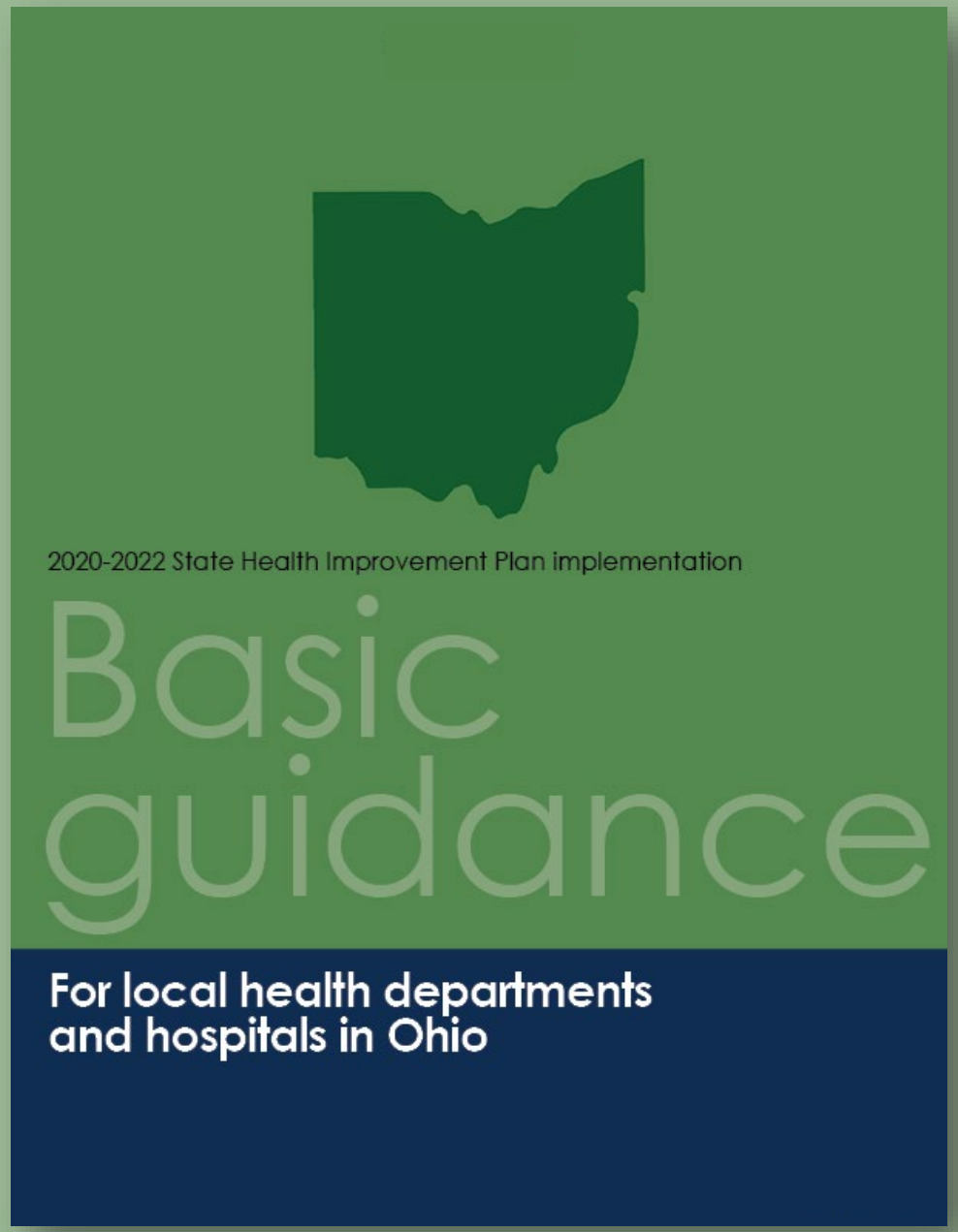
Basic guidance



Audience

Local health departments and hospitals

Purpose

Awareness of ORC 3701.981 requirements and SHIP alignment expectations

	SHIP component	Alignment
	Priorities	Identify at least one priority factor and at least one priority health outcome.
	Tracking progress with SMART objectives	Select at least one indicator for each identified priority factor and priority health outcome.
	Strategies	Select at least one strategy for each selected priority factor and priority health outcome.
	Equity	Identify priority populations and select strategies likely to reduce disparities and inequities

Alignment timing

Originally – October 2020

- Implementation Strategy (IS) or Community Health Improvement Plan (CHIP) documents submitted to ODH should align to current SHIP during development timeframe
- If 2020-2022 SHIP-aligned priorities, indicators and strategies not included in IS and CHIP, then provide opportunities for alignment

In light of COVID-19

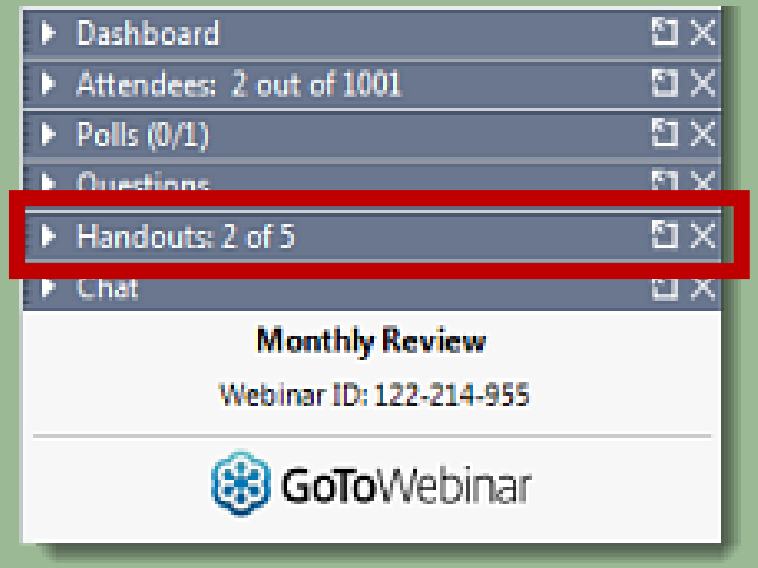
- ODH has been flexible while considering feasibility for content and date of submission
- CHIP and IS currently being collected
- Updates will be posted on SHIP webpage

Toolkit
Overview

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

See draft Toolkit Overview in webinar handouts



What is the purpose of this toolkit?

This toolkit is designed to support widespread implementation of the **2020-2022 SHIP**, with the goal of achieving improved health, well-being and economic vitality by:

- **Advancing equity** at the state and local level through an increased focus on reducing and eliminating disparities and inequities
- **Increasing collaboration** between local health departments, hospitals and other partners involved in community health improvement planning, including sectors beyond health
- **Increasing and coordinating investment** in SHIP-aligned strategies and priority population communities
- **Implementing a continuous approach to monitoring performance** on SHIP objectives and reducing or eliminating gaps in outcomes between groups eliminate disparities and inequities)

The purpose of this toolkit is to supplement the **2020-2022 SHIP document** with more specific information about how to successfully:

- Align with SHIP priority factors (community conditions, health behaviors, access to care)
- Align with SHIP priority health outcomes (mental health and addiction, chronic disease, maternal and infant health)
- Identify priority populations (i.e., communities most at-risk for poor outcomes)
- Develop measurable objectives with targets, including for priority populations
- Select evidence-informed strategies, including strategies to reduce or eliminate disparities and inequities
- Develop and implement an evaluation plan
- Identify and reach out to relevant partners
- Communicate effectively about their SHIP-aligned activities

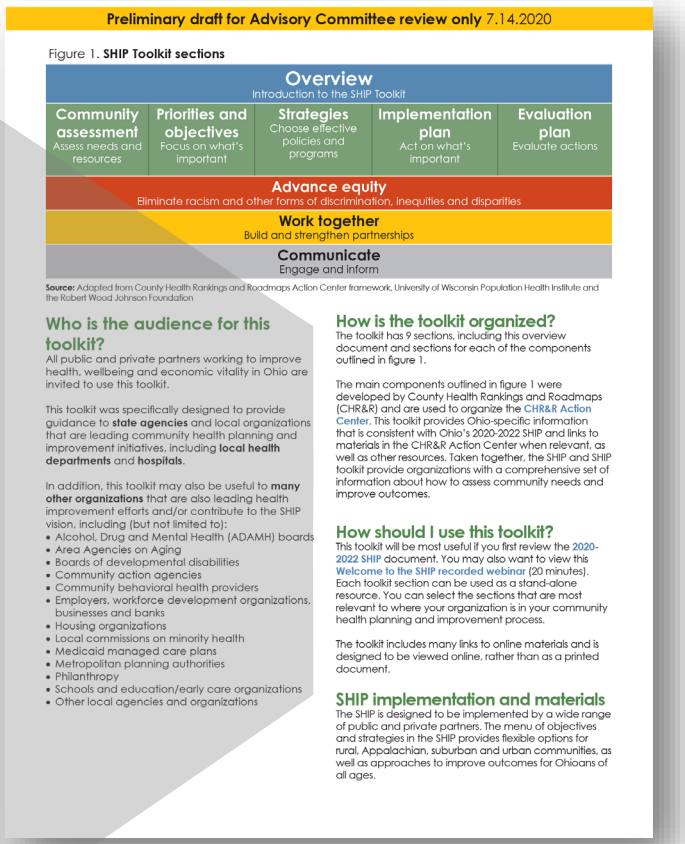
Who is the audience for this toolkit?

All public and private partners working to improve health, wellbeing and economic vitality in Ohio are invited to use this toolkit.

This toolkit was specifically designed to provide guidance to **state agencies** and local organizations that are leading community health planning and improvement initiatives, including **local health departments** and **hospitals**.

In addition, this toolkit may also be useful to **many other organizations** that are also leading health improvement efforts and/or contribute to the SHIP vision, including (but not limited to):

- Alcohol, Drug and Mental Health (ADAMH) boards
- Area Agencies on Aging
- Boards of developmental disabilities
- Community action agencies
- Community behavioral health providers
- Employers, workforce development organizations, businesses and banks
- Housing organizations
- Local commissions on minority health
- Medicaid managed care plans
- Metropolitan planning authorities
- Philanthropy
- Schools and education/early care organizations
- Other local agencies and organizations



Preliminary draft for Advisory Committee review only 7.14.2020

Figure 1. **SHIP Toolkit sections**

Overview
Introduction to the SHIP Toolkit

Community assessment	Priorities and objectives	Strategies	Implementation plan	Evaluation plan
Assess needs and resources	Focus on what's important	Choose effective policies and programs	Act on what's important	Evaluate actions

Advance equity
Eliminate racism and other forms of discrimination, inequities and disparities

Work together
Build and strengthen partnerships

Communicate
Engage and inform

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

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- Medicaid managed care plans
- Metropolitan planning authorities
- Philanthropy
- Schools and education/early care organizations
- Other local agencies and organizations

How is the toolkit organized?

The toolkit has 9 sections, including this overview document and sections for each of the components outlined in figure 1.

The main components outlined in figure 1 were developed by County Health Rankings and Roadmaps (CHR&R) and are used to organize the CHR&R Action Center. This toolkit provides Ohio-specific information that is consistent with Ohio's 2020-2022 SHIP and links to materials in the CHR&R Action Center when relevant, as well as other resources. Taken together, the SHIP and SHIP toolkit provide organizations with a comprehensive set of information about how to assess community needs and improve outcomes.

How should I use this toolkit?

This toolkit will be most useful if you first review the 2020-2022 SHIP document. You may also want to view this Welcome to the SHIP recorded webinar (20 minutes). Each toolkit section can be used as a stand-alone resource. You can select the sections that are most relevant to where your organization is in your community health planning and improvement process.

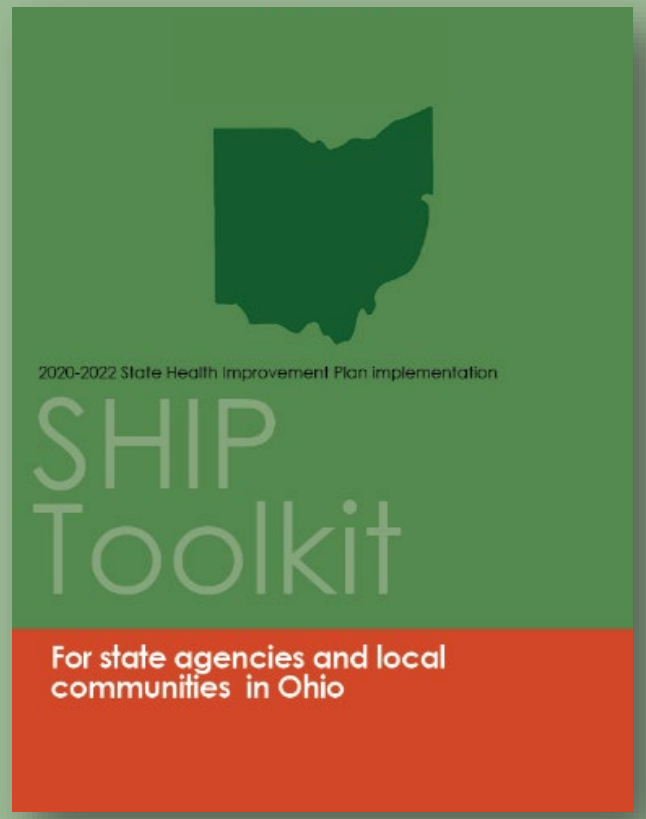
The toolkit includes many links to online materials and is designed to be viewed online, rather than as a printed document.

SHIP implementation and materials

The SHIP is designed to be implemented by a wide range of public and private partners. The menu of objectives and strategies in the SHIP provides flexible options for rural, Appalachian, suburban and urban communities, as well as approaches to improve outcomes for Ohioans of all ages.

Use sections most relevant to where your organization is in your community health planning and improvement process

- Community assessment
- Priorities and objectives
- Strategies
- Implementation plan
- Evaluation plan
- Advance equity
- Work together
- Communicate



Symbols in the toolkit

Equity

Inside the SHIP

Key terms

Worksheet

Relevant resources

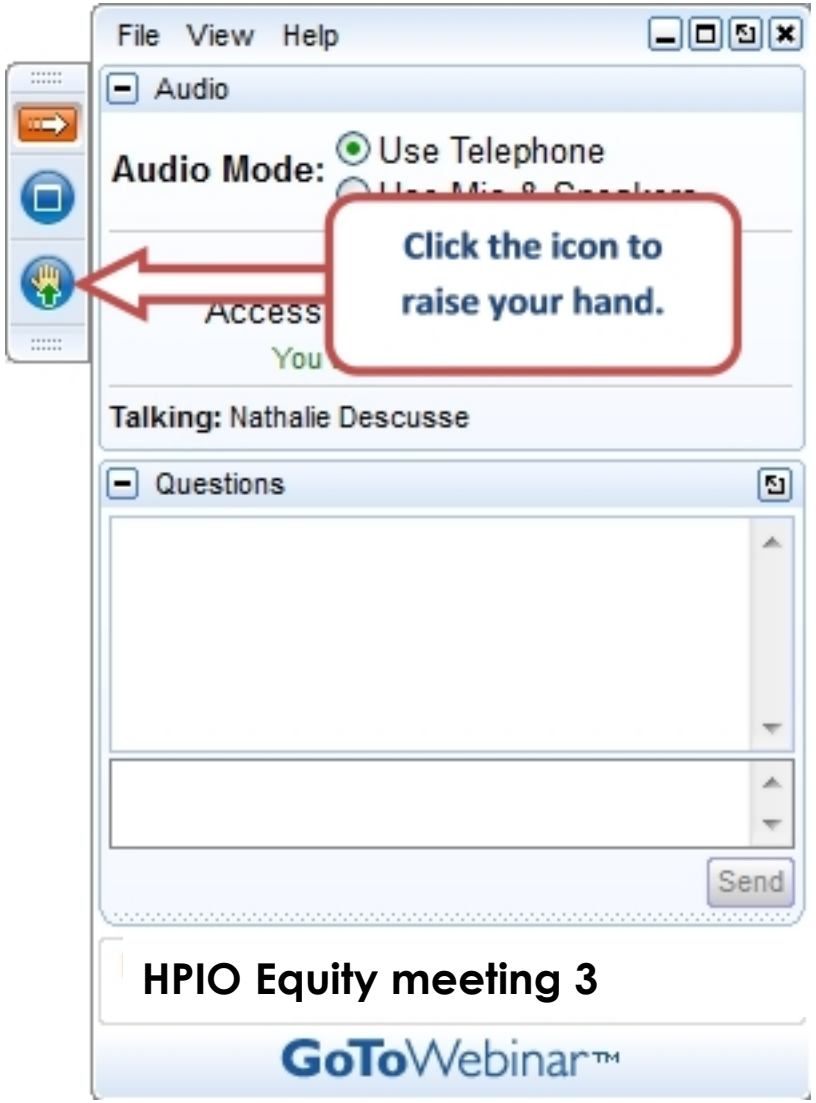
Spreadsheet link

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

Discussion

What suggestions do you have to improve the following aspects of the Toolkit Overview?

- Clarity, messaging and terms
- Formatting and organization
- Content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Toolkit

Advance equity

Reem Aly

Vice President, HPIO

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

Key terms
used in this section

Equity definition

Health equity is achieved when **all people** in a community have access to affordable, inclusive and quality infrastructure and services that, despite historical and contemporary injustices, allows them to reach their **full health potential**.

Source: "Health Equity and Mobility Justice: Frequently Asked Questions," ODH. Accessed Sept. 27, 2019.

Disparities definition

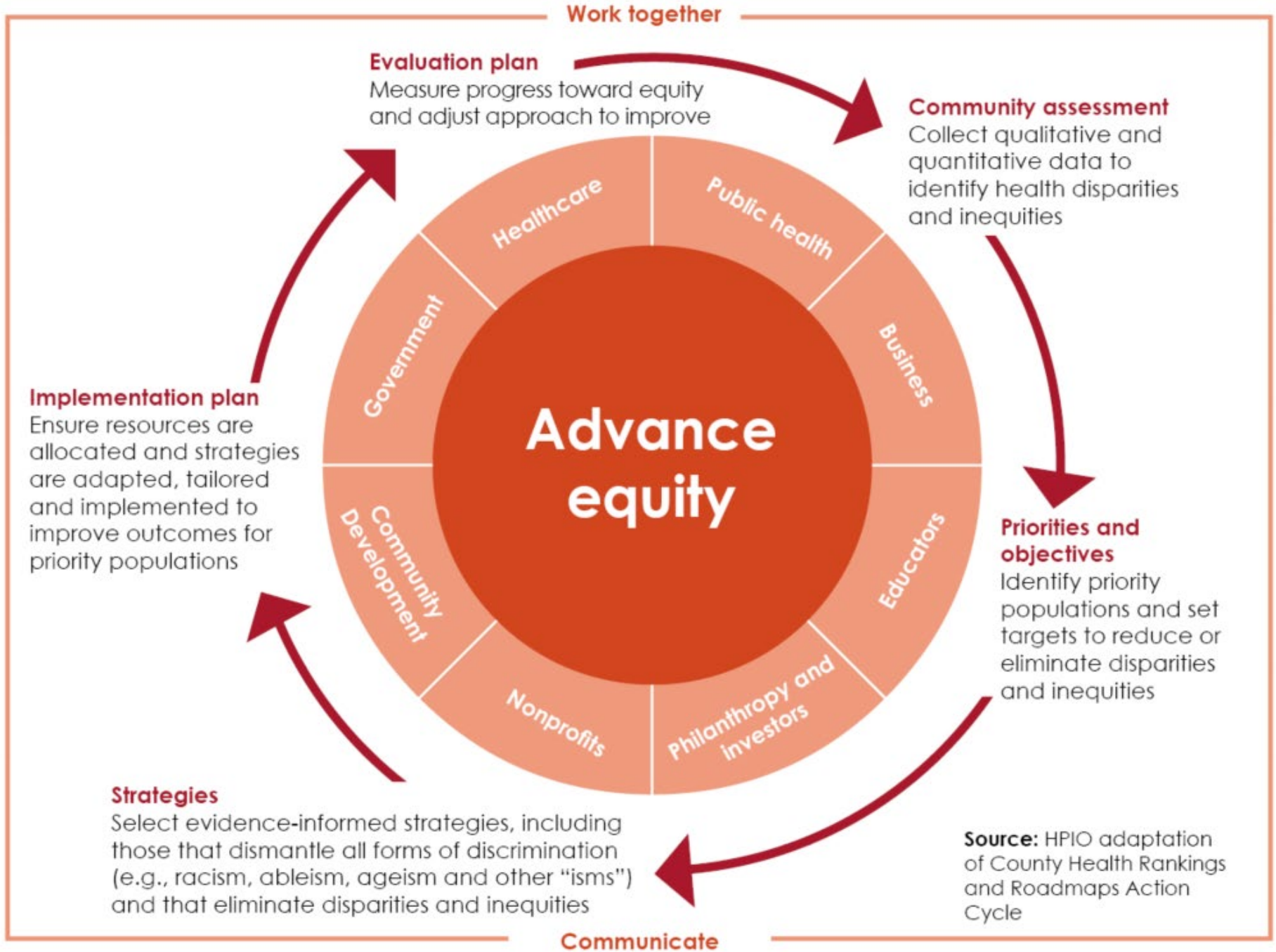
Disparities are **avoidable differences in health outcomes** (e.g., hypertension, infant mortality, life expectancy) that exist across population groups or communities

Inequities definition

Inequities are **differences in outcomes related to the distribution of or access to social, economic, environmental or healthcare resources**, such as healthcare insurance; healthy foods; a job that pays a self-sufficient income; adequate, stable housing; and quality education.

Equity in the SHIP

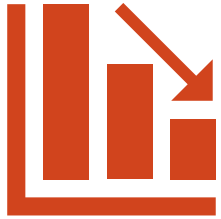
- **Priority populations**
- **Universal targets** to eliminate disparities and inequities
- **Strategy selection**
- **Strategy implementation**


Work together
Evaluation plan
Measure progress toward equity and adjust approach to improve
Community assessment
Collect qualitative and quantitative data to identify health disparities and inequities
Implementation plan
Ensure resources are allocated and strategies are adapted, tailored and implemented to improve outcomes for priority populations
Priorities and objectives
Identify priority populations and set targets to reduce or eliminate disparities and inequities
Strategies
Select evidence-informed strategies, including those that dismantle all forms of discrimination (e.g., racism, ableism, ageism and other "isms") and that eliminate disparities and inequities
Source: HPIO adaptation of County Health Rankings and Roadmaps Action Cycle
Communicate
Advance equity
Healthcare
Public health
Business
Educators
Philanthropy and investors
Nonprofits
Community Development
Government

Community assessment

Information on **how to identify community groups experiencing disparities and inequities** through the collection and compilation of data

Qualitative data



Quantitative data

Priorities and objectives

- Information on **how to select priority populations**, including prioritization criteria
- Information on **how to set universal targets for priority populations**

SMART objective example

Desired outcome	Indicator (source)	Baseline (2018)	Short-term target (2022)	Intermediate target (2025)	Long-term target (2028)
Reduce infant mortality	**MIH2. Infant mortality.** Number of deaths for infants under age 1, per 1,000 live births (ODH Vital Statistics/ODH)	6.9	6.5	6.3	6
	Priority populations				
	Black (non-Hispanic)	14	10.8	8.4	6

Target source: ODH

Groups with outcomes at least 10% worse than Ohio overall

Universal long-term target (equity goal)

Strategies

Steps to take to **identify evidence-informed strategies, including those that dismantle all forms of discrimination (e.g., racism, ableism, ageism and other "isms") and that eliminate disparities and inequities** from the SHIP strategy menu

- ✓ Priority population engaged in strategy selection
- ✓ Likely to decrease disparities
- ✓ Community fit

Implementation plan

- Steps to take to ensure **strategies are adapted, tailored and implemented to improve outcomes for priority populations**, including considerations for resource allocation
- Links to **resources for addressing racism and other forms of discrimination**, such as ableism, ageism and other "isms"

Evaluation plan

Considerations for **implementing an evaluation plan to track progress** on reducing or eliminating disparities and inequities, including continuous quality improvement

Work together

- Links to resources on **authentic community engagement**
- Considerations for **identifying and recruiting partners** to advance equity, including examples of partner organizations
- Information on **developing a set of equity objectives or values** for partners

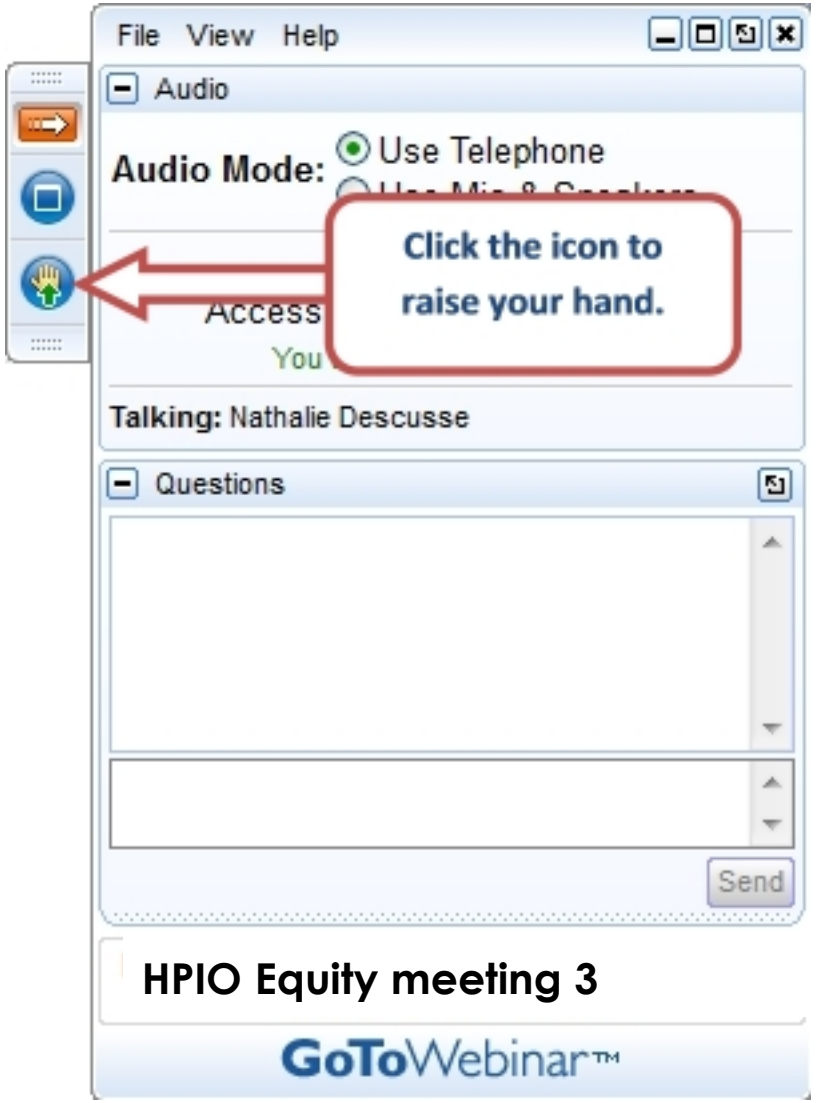
Communicate

- Resources and considerations for **communicating on equity-related issues** with community members and partner organizations

Adapted from Saskatoon Health Region's Public Health Observatory

Discussion

1. What suggestions do you have to improve the following aspects of the **advancing equity section**?:
   - Clarity, messaging and terms
   - Formatting and organization
   - Content
2. What other information or guidance would help you to **advance equity** in your community as you implement the SHIP?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Discussion

1. What suggestions do you have to improve the following aspects of the **advancing equity section**?:
   - Clarity, messaging and terms
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   - Content
2. What other information or guidance would help you to **advance equity** in your community as you implement the SHIP?

Toolkit

Strategies

Hailey Akah

Senior Health Policy Analyst, HPIO

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

Inside the SHIP

Priority factors
Community conditions
Topic
Housing affordability and quality
Poverty
K-12 student success
Adverse childhood experiences
Health behaviors
Topic
Tobacco/nicotine use
Nutrition
Physical activity
Access to care
Topic
Health insurance coverage
Local access to healthcare services
Unmet need for mental health care

Priority health outcomes
Mental health and addiction
Topic
Depression
Suicide deaths
Youth drug use
Drug overdose deaths
Chronic disease
Topic
Heart disease
Diabetes
Harmful childhood conditions
Maternal and infant health
Topic
Preterm births
Infant mortality
Maternal morbidity/mortality

How to use strategy menus in the SHIP

- Identify your **priorities** (factors/health outcomes)
- For each priority, identify a specific **topic and indicator**
- **Review the menu of strategies** in the SHIP for your identified topics
- **Click the links** to learn more
- **Work with others** to prioritize which strategies are the best fit

Example

Priority factor
Health behaviors

Topic
Physical activity

Indicator
Child physical activity

HB5. Percent of children, ages 6 through 11, who are physically active at least 60 minutes per day

Example

Strategies

If well-implemented and targeted to meet the needs of priority populations, the following evidence-informed strategies are likely to achieve the SHIP objectives for increasing physical activity in Ohio.

Featured strategies	Includes
School-based	
School-based programs to increase physical activity Hi-5	• Active recess • Physically active classrooms • School-based physical education enhancements
Safe Routes to School	• Safe Routes to School programs that promote biking and walking to school through education, incentives and pedestrian-friendly infrastructure changes Hi-5, CHC • Walking school buses
Community-based	
Transportation and land use policies (built environment changes and green space)	• Green spaces and parks CHC • Bike and pedestrian master plans (active transportation plans) CHC • Complete Streets and streetscape design initiatives CHC • Zoning regulations for land use policy CHC • Mixed-use development
Community fitness programs	• Community fitness programs • Social support for physical activity interventions in community settings (See also: WWFH) • Individually-adapted physical activity programs • Community-wide physical activity campaigns (See also: WWFH)
Healthcare system	
Exercise prescriptions	Exercise prescriptions from healthcare providers (an exercise plan with achievable goals and follow-up steps, which may include counseling, activity logs, reminder calls, etc.)

Additional strategies	Includes
Workplace physical activity programs and policies	• Worksite obesity prevention interventions Hi-5 • Multi-component workplace supports for active commuting CHC • Individual incentives for public transportation
Physical activity policies and programs	• Shared use agreements • Activity programs for older adults • Diabetes Prevention Program (and other combined diet and physical activity promotion programs to prevent type 2 diabetes)
Physical activity interventions in early childhood settings	Nutrition and physical activity interventions in preschool and child care, such as the Ohio Healthy Program

= Likely to reduce disparities, based on review by WWFH, or health equity strategy in CG; Hi-5 = Health Impact in 5 years (CDC); CHC = Creating Healthy Communities (ODH program)

Relevant resources

- Creating Healthy Communities, ODH program
- Physical Activity Guidelines for Americans, U.S. Department of Health and Human Services
- Youth Compendium of Physical Activities, National Collaborative on Childhood Obesity Research
- Active People, Healthy Nation, CDC
- Ohio Department of Transportation Statewide Pedestrian and Bicycle Plan
- Health Equity and Mobility Justice, ODH

Considerations for selecting strategies

Impact

Community fit

Feasibility

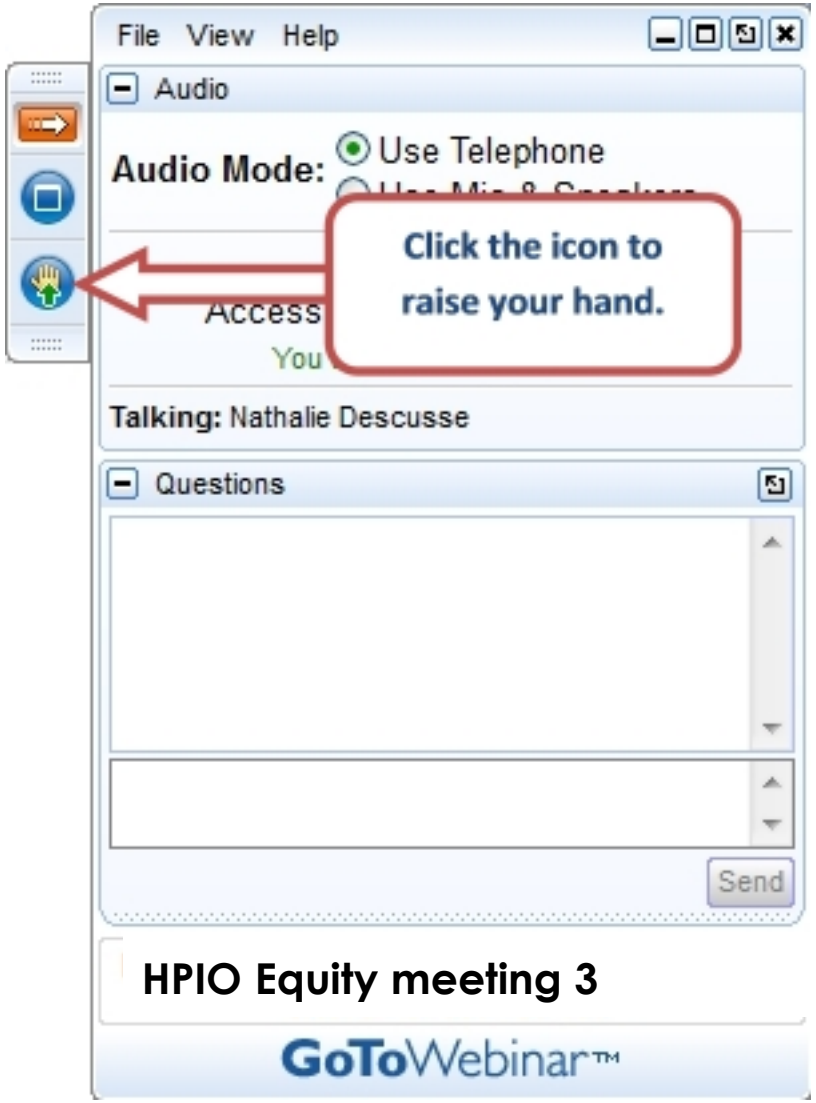
Strategy selection worksheet

Strategy					
Selection criteria					
Impact ***Refer to the SHIP and the priorities and indicators selected in the Priorities and Objectives section of this toolkit***	**Rating**				
Featured strategy (strength of evidence and alignment with priorities). Is this a "featured" or "additional" strategy in the SHIP?	Featured 5		Additional or Not applicable 2		
Likely to decrease disparities. Is the strategy likely to decrease disparities (=) based on review by WWFH and CG*)?	Likely to decrease 5		Unknown or no impact 2		
Co-benefits. Does this strategy address more than one of our priorities?	Yes 5		No 0		
Age group. Is the strategy directed toward the age group specified in our selected indicator? (For example, if the selected indicator is for adolescents, a school-based strategy would be a good fit.)	Yes 5		Possible 3	No 0	
Community fit ***Stakeholder discussion***	**Excellent**	**Good**	**Neutral/ Not sure**	**Fair**	**Poor**
Community type. The strategy is a good fit for the urban, suburban or rural nature of our community or other unique strengths or challenges.	5	4	3	2	1
Cultural appropriateness. The strategy is culturally appropriate and supported by the priority population(s).	5	4	3	2	1
Readiness and coordination. Some groundwork has been laid and the right stakeholders at the table to coordinate effective implementation.	5	4	3	2	1
Alignment and continuity. Aligns with other initiatives and/or maintains continuity with previous plan.	5	4	3	2	1
Feasibility ***Stakeholder discussion***	**Excellent**	**Good**	**Neutral/ Not sure**	**Fair**	**Poor**
Funding. We can identify potential funding sources for implementation, including specific allocation of resources for priority populations, and/or the strategy requires minimal funding.	5	4	3	2	1
Political will and timing. The timing is right within the current political context to implement this strategy.	5	4	3	2	1
Reach. It is logistically feasible to reach enough people to move the needle on the selected indicator(s).	5	4	3	2	1

Selecting strategies to promote equity

Discussion

1. What suggestions do you have to improve the following aspects of the **strategies section**?:
    - Clarity, messaging and terms
    - Formatting and organization
    - Content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Toolkit

Communicate

Alana Clark-Kirk

Education and Communications Manager, HPIO

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

Communicate

Communication information in this section can be used for:

- Recruiting partners
- Sharing strategies
- Providing updates on community progress

Identify your audience

Primary

Secondary

Messaging and design

- Clear
- Concise
- Engaging

Equity messaging

- Address all forms of discrimination
- Discuss the causes but focus on solutions

Equity messaging

- Inclusive language
- People-first language
- Non-stigmatizing language

Communication strategy

- Develop talking points
- Share examples of success with stakeholders through stories
- Create a dissemination plan

Dissemination plan

Dissemination plan worksheet	
Who will receive the document?	**List the groups in your target audience**: Ex. Primary and secondary audience
What will stakeholders receive? Will it be different for different audiences?	**List the various formats you plan to share your document:** Ex. Full report or executive summary
How will the message be delivered?	**List the ways you plan to disseminate your document:** Ex. Email, hard copies via traditional mail, posted online or a presentation
Where can your plan be found?	**How will you make sure that your document stands out on your website?**
When will stakeholders receive the message?	**Create a timeline for dissemination**
How will you evaluate your dissemination efforts?	**How will you track your dissemination efforts?** Ex. Number of email recipients; Number of mailings; Number of "opens"

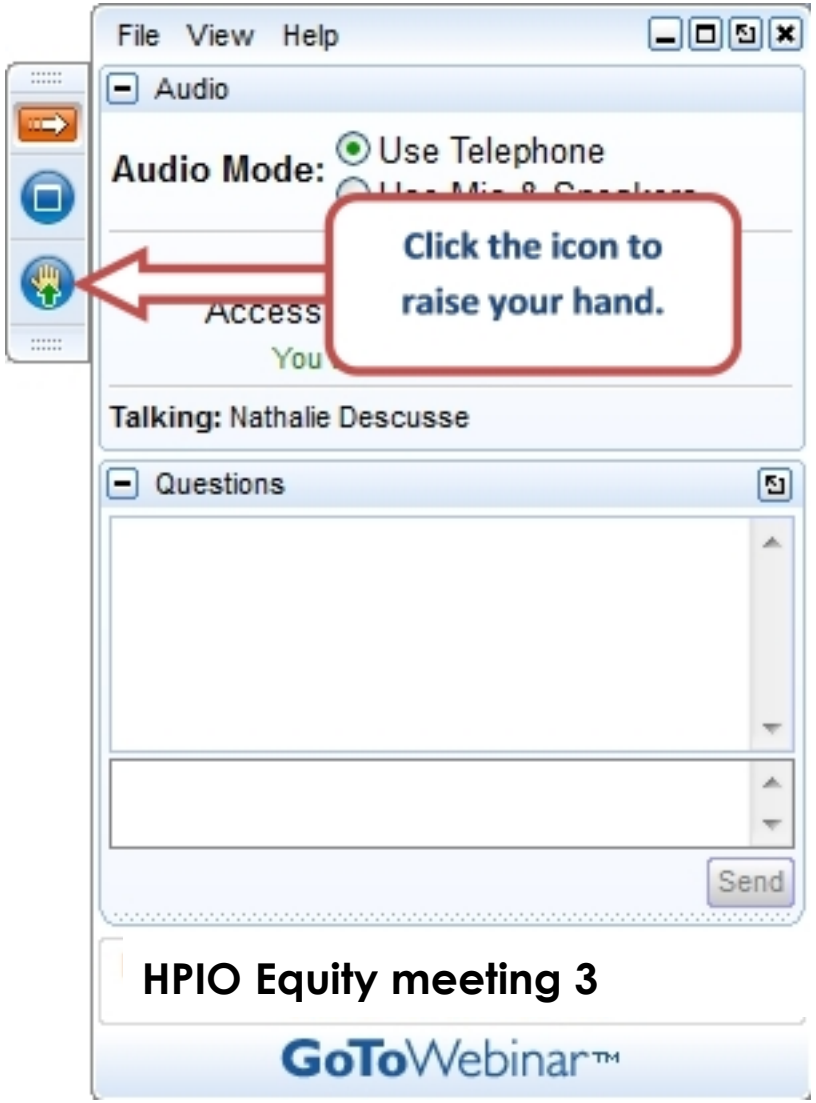
Discussion

1. Should the "communicate" section focus specifically on communicating about community health assessments and plans (such as CHAs, CHIPs and CHNAs developed by local health departments and hospitals), or should it be broader?

Discussion

2. What suggestions do you have to improve the following aspects of the **communicate section**?:

- Clarity, messaging and terms
- Formatting and organization
- Content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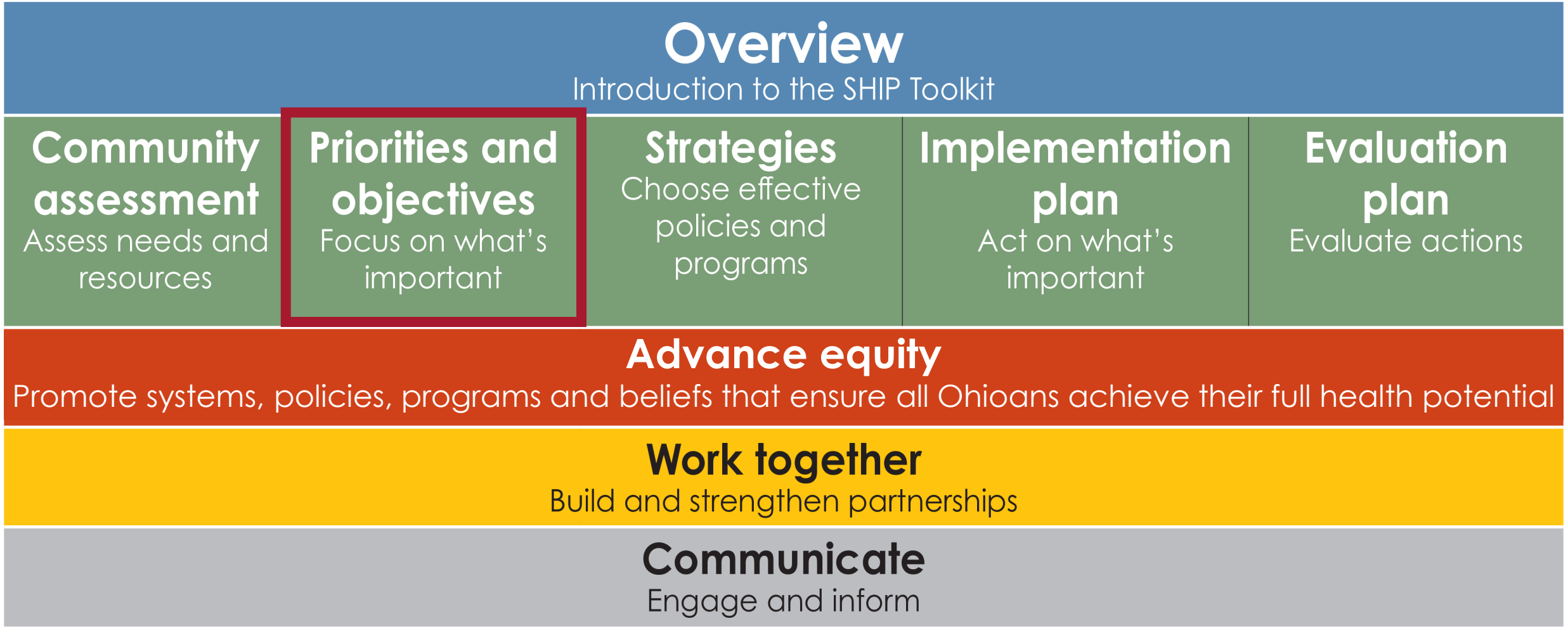
SMART objectives

(volunteers wanted!)

Zach Reat

Director, Data Management and Analysis, HPIO



Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

SMART objectives

- Specific
- Measurable
- Achievable
- Realistic
- Time-bound

Indicator and source

Target data value

Baseline and target years

Resources for aligning SMART objectives

DRAFT SHIP detailed indicator list: Overall health and equity

Updated July 7, 2020

Data for all indicators in the 2020-2022 SHIP can be accessed through the Ohio Department of Health's Online State Health Assessment. In some cases, more up-to-date data may be available from the sources listed below. To use the Online SHA, click the link below.

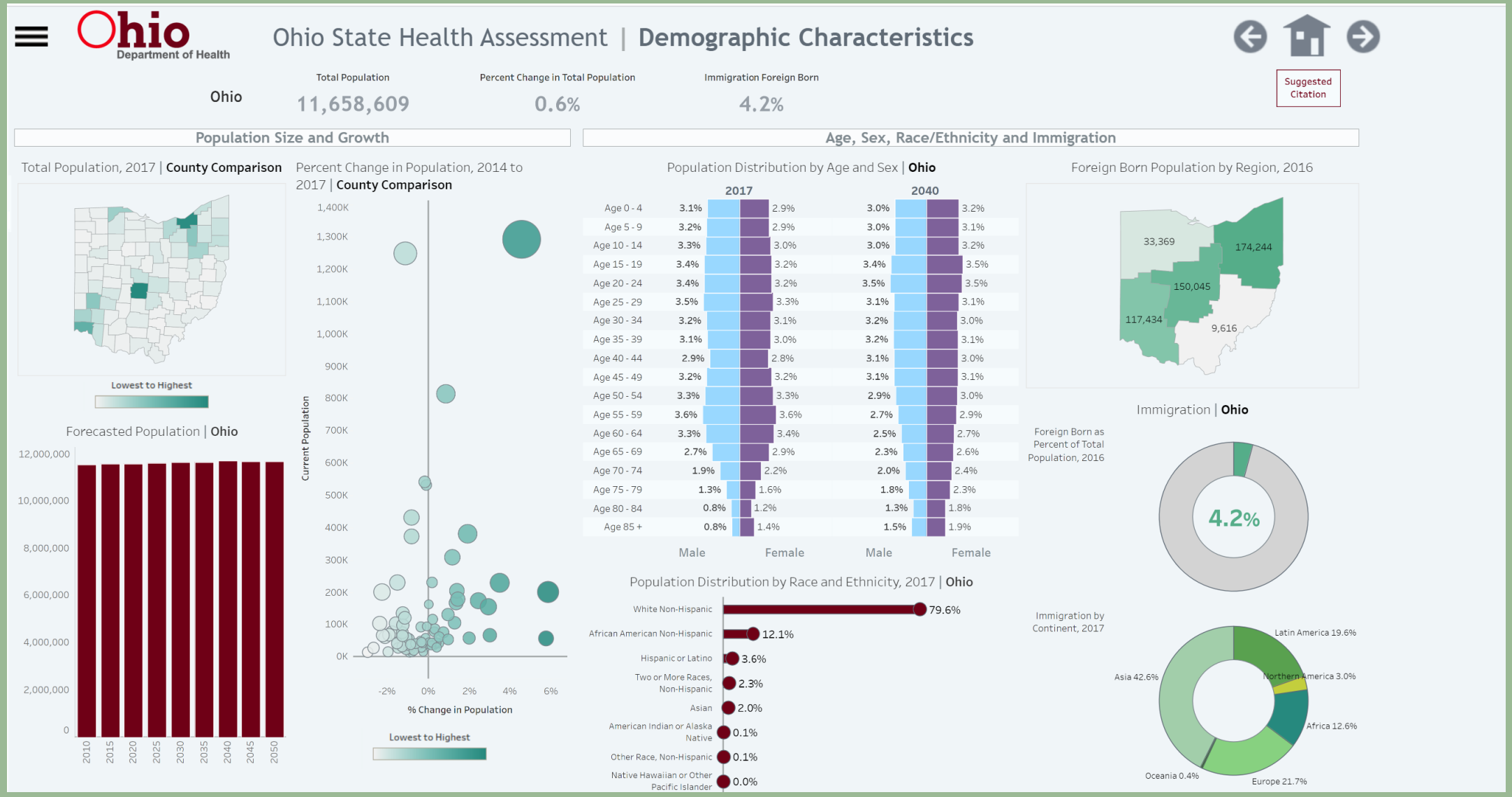
https://analytics.das.ohio.gov/t/ODHPIPUB/views/SHA_FINAL_LandingPage/LandingPage?:linktarget=_self&:isGuestRedirectFromVizportal=y&:embed=y

Indicator			Data availability				Other info	
#	**Name**	**Description**	**Primary source** *Click for link to access state-level data*	**Local data availability (Y/N)**	**Local data source(s)** *Click for link to access local-level data*	**Alternate indicators**	**Included in another state agency (Y/N)**	**Priority populations in the SHIP (Y/N)**
OH1	**Adult health status**	Percent of adults, ages 18 and older, with fair or poor health	Behavioral Risk Factor Surveillance System (BRFSS)	Yes - County and regional	Ohio Department of Health BRFSS annual reports County Health Rankings and Roadmaps	N/A	No	Yes
OH2	**Years of Potential Life Lost (YPLL) before age 75**	Years of potential life lost before age 75, per 100,000 population (age adjusted)	Ohio Department of Health, Vital Statistics	Yes - County	Ohio Department of Health Public Health Data Warehouse County Health Rankings and Roadmaps	N/A	No	Yes

Note: For more information about sources, including links to websites and tips for accessing local data, see the "Source information" tab.

2019 Online State Health Assessment

Demographic characteristics



Next steps

Source: Adapted from County Health Rankings and Roadmaps Action Center framework, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation

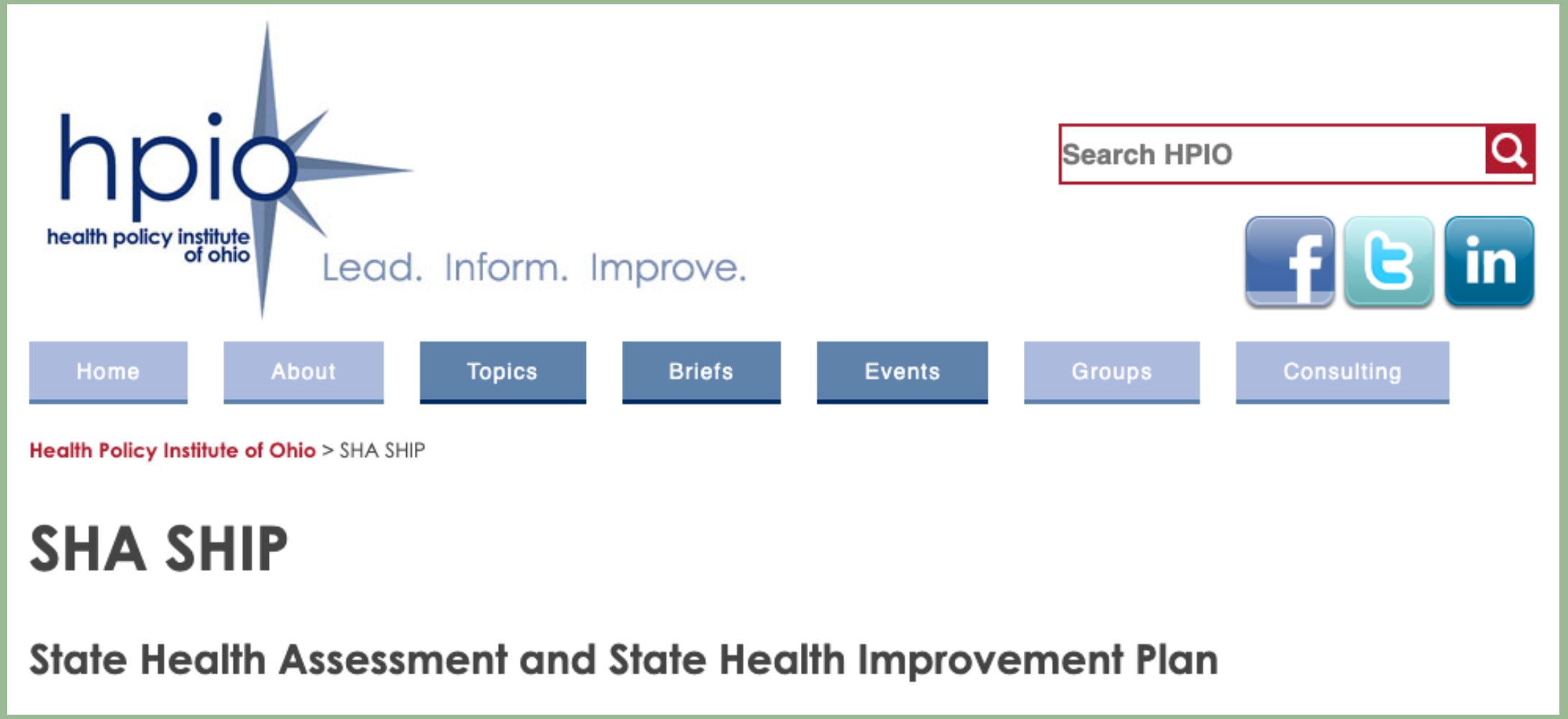
Additional feedback

Send additional feedback on the draft SHIP Toolkit to Amy Stevens, **astevens@healthpolicyohio.org** by **Tuesday, March 2**

Possible next meeting

- April (TBD)
- Virtual

www.hpio.net/sha-ship



Who We Are

WELCOME

OFFICES, BUREAUS AND DEPARTMENTS

ODH LOCATIONS

EXECUTIVE BIOS

State Health Assessment and State Health Improvement Plan

September 12, 2019 | ODH

State Health Assessment | State Health Improvement Plan | Strategic Plan

The State Health Assessment (SHA) is a comprehensive and actionable picture of health and wellbeing in Ohio. The purpose of the SHA is to:

Get in touch

Ohio Department of Health

246 North High Street,

Poll question #2

State Health Assessment and State Health Improvement Plan

Vision

Ohio is a model of health, well-being and economic vitality.

Mission

Improve the health of Ohioans by implementing a strategic set of evidence-based population health activities at the scale needed to measurably improve population health outcomes and achieve health equity.