Follow-up from October 13, 2006 meeting

Review of minutes

Dr. Gary Gilmore made a motion to approve the minutes. Ms. JoAnn Weidmann seconded the motion, which passed unopposed.

Evaluation report

Dr. Samadani invited comments on the evaluations from the October 13 meeting. Dr. Samadani noted that the only negatives mentioned in the evaluation were problems with the telephone connection, and a request for more information and discussion on the subject of Health Literacy. The evaluation showed a 3.5 rating, which is an improvement.

Administration

2007 Election

Ms. Kim González reported briefly on contacts with the Nominating Committee members. Names of the members of the Nominating Committee will be sent to all Public Health Council members, along with the date for submitting nominations. Elections will take place at the next full Council meeting.

2006 Annual Status Report

Council members made a number of recommendations, which included putting the action items at the front of the report with more detail, adding the names of speakers who presented; recommendations, resolutions or discussions that were part of the Council deliberation prior to conclusion of the item; a one-line description for programs such as Medicare Part D. The heading language should show that more topics may be on the horizon in the coming year. Suggestions for additional forthcoming items are: increased funding for public health, and local data essential for setting public health priorities.
Resolution distribution update

The members reviewed changes to the Resolution Distribution form that were made at the Executive Committee meeting on November 17, 2006. The Executive Committee requested a revision to enable improved notice of resolutions in local newspapers and other media. Ms. Cathy Frey requested three things: first, that a process should be created to introduce a resolution at one meeting, with the goal to vote on it at the next meeting to give sufficient time for review and discussion. Second, to revisit resolutions to see what effect they have had. Third, she asked if the Department has the capacity to disseminate to all those on the list, in light of short staffing issues. Dr. Johnson said that the distribution could be carried out through the communications staff. Dr. Gilmore stated that Ms. Frey’s first point should be standard operating procedure, but consideration should be given to situations where urgent issues may emerge; in those cases, an acceleration of the process should take place if necessary. Ms. Willems Van Dijk pointed out that the Resolution Distribution form on page one, item 2 allows for both possibilities. Dr. Johnson added that it is a member’s right to abstain from a vote if he or she does not feel sufficiently informed to make a decision. Dr. Samadani stated that since the Council follows Robert’s Rules, further direction can be gleaned there rather than adding all possibilities to the Council’s Rules of Order. Ms. Weidmann asked if there is a way to hear in advance about emerging issues. Dr. Johnson offered to arrange a presentation by Ron Hermes, who is the Department’s Legislative Liaison, to brief the Council on the Department’s legislative agenda for the next year as part of the Council’s strategic planning process.

Open Forum

Mr. Herb Bostrom, retiring deputy administrator of the Wisconsin Division of Public Health, spoke about his 30+ years in State service. Dr. Samadani presented an award to Mr. Bostrom from the Council.

Executive Committee report

Dr. Samadani briefed the Council on the activities at the Executive Committee meeting on November 17, 2006.

Strategic Planning

Ms. Kristine Freundlich described strategic planning as a process by which people come together to engage in productive critical thinking, with the goal being to improve effectiveness and efficiency. She described the Public Health Council and its members as representing a connection to many systems and groups across the public health spectrum. Ms. Freundlich stated that since every organization’s needs are different, strategic planning is adaptable, and can be integrated into discussion of issues or processes. Ms. Freundlich referred to her handouts while describing the value of a Strategic Planning approach, and invited comments and feedback from the members. As an exercise, Ms. Freundlich asked each Council member to answer briefly the question, “What would it take to make this Council better?” Dr. Samadani answered that the mission of the Council must be action oriented. Mr. Richard Perry answered that improved structure of the Council was necessary to be sure that they could make action items happen and then to see the effect of their resolutions, and continuity would enable the Council to become a strong force. Dr. Gilmore answered that the Council needs to feel like a team, which requires that each member have complete involvement, and make a contribution to the Council. Ms. Willems Van Dijk answered that Council needs clarity as to whether the focus should be the outcomes to be achieved, the strategies by which outcomes are achieved, or the systems by which outcomes are achieved. She added that continuity between meetings needs to be achieved, from meeting to meeting. Ms. Frey answered that the Council needed to become more effective and efficient with its time, and develop a process to focus on high-priority topics that have a high likelihood of improvement. Ms. Terri Kramolis answered that she was concerned that opinions which were expressed and work that was done is never heard of again; she added that the time spent on topics must be used efficiently and effectively. Dr. Steve Kirkhorn answered that emphasis is needed on having adequate and organized resources and information, in order to allow the Council to formulate proposals that will lead to specific recommendations. Dr. Kirkhorn suggested that the meeting materials be sent to members earlier, to allow them time to prepare before the meeting. Ms. Weidmann answered that there is a need to communicate the results of a Council
meeting more quickly, but that not being able to send out draft minutes to the subcommittees was a problem. She hoped that a process could be put in place to facilitate this important communication. Mr. John Bartkowski answered that focus should be on a couple of issues at a time, investigate them thoroughly, and make specific recommendations for them. Mr. Christopher Fischer agreed with this and said that there should be clear short-term and long-range goals for those issues. Ms. Jayne Bielecki answered that she agreed with the statements given by the other members; communicate information, make sure that they are timely and do long-range planning. Mr. Bevan Baker answered that there is a need for a proactive stance, and a preamble of the Council’s goals. He stated that the power of leadership can be used to merge ideas with action, and he suggested that they could use Cambridge, Massachusetts as an example. Mr. Baker also said that members’ attendance at the meetings shows respect for others.

Ms. Freundlich said that follow-up on the topic of strategic planning would consist of a short questionnaire to be sent to the members within a few days of the December 8 meeting, and further discussion of the topic and inclusion of its principles during discussion of issues in the future.

**Emergency Preparedness Committee report**

Mr. Bevan Baker, Chair of the Emergency Preparedness Committee, reported on pandemic planning and the influenza vaccine distribution process, and sustainability of public health. More on sustainability will be discussed at the next meeting on December 12. Mr. Baker expected that discussion on the after-action report concerning the Falk Corporation explosion on December 6. The public health and emergency management response to this emergency was robust. He complimented the immediate air sampling work of the State Lab of Hygiene, which was a great comfort to the community and the workers. Mr. Baker also commended the retired nurses in Wisconsin who called to ask what they could do to help. Dr. Johnson responded that the system worked well during the Falk Corporation emergency. Dr. Johnson stated that the Division of Public Health has been communicating with the CDC about vaccine distribution, and along with the Council and the Emergency Preparedness Committee’s collective voice shows strong leadership, and is appreciated. Dr. Gilmore referred to cooperative agreements in light of fiscal cuts at the national level, and asked if there is continued support for the systems in the state. Mr. Baker responded that there is good communication with the Division of Public Health on the subject but no final decision yet. He stated that how the Division deals with the issue goes back to the question of public health sustainability; especially of concern is the way in which it affects special and vulnerable populations. Dr. Johnson said there is an on-going committee looking at funding changes at both the local and state perspective. She expects the process will help determine what products should come out of preparedness activities going into the future and what mechanisms will be used to achieve goals. Mr. Baker stated that having everyone involved understand how a cooperative agreement affects the state can be difficult, only the Division can decide what cuts they can really absorb. Dr. Johnson said that there had already been a series of first-round redistributions of funds. Ms. Willems Van Dijk said that Emergency Preparedness would be cut by 14% in this fiscal year and due to the lack of carryover the total cut would equal 30%.

Dr. Samadani asked if there was a volunteer list somewhere that retired nurses could sign up with. Mr. Baker mentioned the Citizen Corps which is a Federal registry, and the Wisconsin Emergency Assistance Volunteer Registry (WEAVR). Dr. Samadani said this emergency highlighted the usefulness of public health and should be used as an example of a timely response. This should be conveyed to the Emergency Preparedness Committee. Dr. Johnson asked for a motion to write a letter to the powers that be following release of the after-action report. Mr. Baker made a motion that the Council, pending receipt of the after-action information regarding the Falk Corporation, write a letter to Wisconsin leadership regarding the supreme effort of emergency public health preparedness during this disaster and the continued need to sustain their readiness for future disasters. The motion was seconded and passed without opposition. The Emergency Preparedness Committee’s report was accepted by the Council.

**State Health Plan Committee report**

Mr. Perry reported the State Health Plan Committee activities to the Council. He thanked Committee
members Julie Willems Van Dijk, Cathy Frey, and JoAnn Weidmann for their work in putting the State Health Plan Committee “on the road map.” He encouraged all in attendance to read the minutes from the Committee’s last meeting. The State Health Plan Committee’s report was accepted by the Council.

Health Literacy

Dr. Samadani asked the members what direction they would like to take with this subject, knowing how literacy can affect a person’s health. He mentioned the upcoming summit on Health Literacy scheduled for June 21, 2007. He reviewed suggestions that health-related documents should be written at fifth-grade level to reach a greater portion of the public, and suggested funding for adult education. Richard Perry asked if the recommendation process should be clarified to the group, including if Council recommendations should be in the form of a resolution, and how to get the information out to legislators, and to the public. Dr. Samadani asked if the Division communications staff could assist with disseminating the information.

Mr. Baker stated that primary grades through high school should be accountable for providing age-appropriate health literacy education. Ms. Weidmann stated that there are four regional coordinators to coordinate community-based literacy organizations, and said that the Council should be working with the people who are specialists in the field. Ms. Willems Van Dijk wondered if the Division has done work like this. Mr. Baker said the Council needs to help the Governor, the legislature and the Secretary to understand that there is a moral, a social and a clinical obligation to know what peoples’ health concerns are; and if public dollars are being put into organizations that don’t promote this ideal there have to be truth and consequences. Ms. Bielecki said that the reality in school is that the teachers are already overworked and underpaid and to ask them to put more content into programs that are already jam-packed may be unrealistic, but rather to tap into public television shows and suggest a fun format that educates children. Dr. Johnson suggested that the Council look into what the State Health Plan has in the section on “Social and Economic Determinants of Health” that relates to literacy; she suggested a conversation with Margaret Schmeltzer. Dr. Johnson asked the group if they have a definition of Health Literacy and recommended that deciding on that was a first step. Mr. Baker said that leadership in the area of Health Literacy should be primary. Ms. Willems Van Dijk stated that leadership and operations cannot be separated. All members agree on the importance of the issue, but each may have a different definition. Mr. Perry said that there is already a Literacy Council in Wisconsin, but the role of the Public Health Council is to support the functioning through the legislative body to expand the concerns of literacy. Mr. Baker said that data must be available in order to make a definition, but whatever research is used his primary consideration was to make Wisconsin the healthiest state but how to do it is something to talk about in the future. Ms. Weidmann stated that in order to be effective the Council must look at what the four regional coordinators are talking about and have a coordinated message. Ms. Willems Van Dijk stated that the policy is for using their expert power to take a position, to better define what Health Literacy is and to solidify recommendations. Mr. Baker asked if any other state had done this and how they did it. Ms. Bieleki asked if someone from another state that has done it could come and talk about how they did it. Dr. Johnson responded that travel from another state would be limited by budgetary constraints. Dr. Johnson said that preparation for further discussion would take some time for staff to put together. She saw the need to scan other states to see who has made health literacy a primary goal of the state health department and look at policy they adopted and see how health literacy drives health improvement. She said she would ask for input to define preparatory work. Ms. Frey stated that evidence-based practices that improve health among Medicaid recipients would be within the Department’s reach. Dr. Murray Katcher stated that at the last Bureau of Community Health Promotion meeting they received a presentation on this subject which included a working definition of health literacy. Exit interviews at doctor’s offices have shown patient comprehension is very low. In time there could be a quality improvement effort. Much of Wisconsin’s population is not doing too well in basic health literacy, whether reading information on a prescription bottle or labels on food. This all is related to a healthy lifestyle.

Dr. Samadani brought the discussion to a close due to time constraints but stated that this would be an agenda item for the next meeting, since everyone was interested in hearing more on the subject.
Sustainable Funding for Public Health

Mr. Perry stated social services and health care are always the programs to be cut, rather than for example the defense budget. What money is there to help show that the job is being done? Ms. Weidmann said data shows that when the funding is stopped the rates go up again, just as in California with smoking. Publicize what public health does to get the public to put pressure on legislators to do something. Mr. Perry agreed, and added that there are examples in Wisconsin of infant mortality; programs get cut and the problem increases. Ms. Weidmann suggested that someone from Rep. Judy Robson’s office should be on hand to hear the discussion. Mr. Perry mentioned he knew Judy Robson and would bring it up with her. Ms. Willems Van Dijk spoke about serving on a panel at the Community Benefits Conference for the Wisconsin Hospital Association. On that panel she spoke about how hospitals can work with local public health in terms of community benefits, and stated that there are great differences in funding among local public health agencies because they are driven by local tax levy. She highlighted the issue of the need for sustained funding as question number one for the Council to consider. Ms. Willems Van Dijk had met with local foundations as part of preparation to release the local community health assessment, and she had been asked how much money would be needed to address funding local health priorities. She said these two questions were what people want to know. Mr. Perry asked if it was realistic to ask the Council to come up with a figure that they could recommend to be put in the budget. Mr. Baker said health care economists would calculate per capita and come up with a ratio, and that data is available, and then the point could be discussed further.

Announcements

Mr. Baker gave an overview of the Board of Regents meeting; the Council had submitted a resolution to the Board regarding planning for and feasibility of a school of public health in U.W. Milwaukee. A lengthy planning report was submitted to them, and the Board passed the resolution unanimously. Mr. Baker said this will allow Wisconsin to lead in health policy and public health issues and to train the public health workforce. The information is available at the Board of Regents Website, as is a webcast of the event. The Council congratulated Mr. Baker and others on this accomplishment, pointing to all the hard work that went into it over the past months.

Dr. Johnson announced that the eHealth Board’s report to the Governor was available online and is a tremendous piece of work, and the link will be sent to Council members.

Dr. Samadani announced that Dr. Steven Hargarten, Medical College of Wisconsin, resigned from the Council.

Dr. Samadani announced three proposed health care reform plans for universal health care: Wisconsin Health Security Act (SB 388), Wisconsin Healthcare Partnership Plan (SB 698) and Wisconsin Health Plan (AB 1140). These three bills should be discussed by the Council in the future. Ms. Weidmann asked for information on the progress of these bills to be provided. Dr. Samadani said he would send out copies of the three bills.

Next Meeting: February 9, 2007

Suggestions for the next agenda included:

- An action item on the Emergency Preparedness Committee
- An action item on Health Literacy (and in future meetings)
- Sustainable funding for public health (to be studied over the course of the next year)
- Strategic planning discussion
Adjournment

Dr. Samadani adjourned the meeting at 1:59 p.m.

Prepared by Kim Gonzalez
Bureau of Health Information and Policy

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JoAnn Weidmann, Secretary            Date