

Minutes
Public Health Council
State Health Plan Committee
 August 9, 2006; 9:00 AM - 2:00 PM
 United Community Center

Committee Members in Attendance: Richard Perry (chair), JoAnn Weidmann (vice chair), Mary Jo Baisch, Carol Graham, Hector Torres, Catherine Frey, Peggy Hintzman, Pa Vang, Kim Cowan (representing Black Health Coalition), Julie Willems Van Dijk (by phone), Patrick Remington (by phone)

Absent Committee Members: Leah Arndt, Gary Hollander, Mark Huber, Stanlie Murray-Kelly, Christopher Okunseri, Rachel Morgan

State Staff: Margaret Schmelzer, Kelli Jones

Guests: Patti Herrick, Vicki Stauffer, James Malone, Susan Uttech

Agenda Item	Discussion	Follow-up Action
Welcome and introduction	Meeting was called to order by Richard Perry.	
Review agenda and approve June 2006 minutes	Move to approve minutes by Peggy Hintzman, seconded by Mary Jo Baisch. Motion carried.	
Overview of Evaluation Process for Two Priorities (Tobacco and Nutrition)	<p>Mr. Perry reviewed the evaluation and evaluation process models developed by the committee to guide its review and propose recommendations.</p> <p>Mr. Perry then introduced Mr. Malone and Ms. Stauffer from the Wisconsin Tobacco Control Program in the Division of Public Health's Bureau of Community Health Promotion.</p> <p>Mr. Perry sought two SHPC sponsors for the tobacco and nutrition priorities. These sponsors will be responsible for preparing the evaluation report and recommendations to the Public Health Council.</p> <p>Tobacco: Ms. Hintzman and Dr. Remington Nutrition: Ms. Weidmann, Ms. Baisch, Ms. Jones</p>	Send handouts to members attending by phone
Part I: Evaluating Healthiest Wisconsin 2010 Health Priority: Tobacco Use and Exposure <ul style="list-style-type: none"> • Formal presentation 	<p>Presentation by James Malone and Vicki Stauffer, Division of Public Health (DPH). Refer to PowerPoint presentation and handouts.</p> <p>Tobacco burden in Wisconsin is significant. Tobacco settlement funds were bonded off.</p>	

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<p>using the SHPC evaluation model and its four elements</p>	<p>\$3.5 billion (\$2 million-\$300 million/year) was lost. Some states other than Wisconsin had master settlement agreements.</p> <p>No evidence of decline in tobacco-related deaths. Death certificate change: now documents tobacco use as a contributing cause, providing additional evidence of smoking as a cause of death.</p> <p>The question was raised whether activity that is not grant-funded (i.e., work of public health <i>system</i>, not just the work of local health departments) is documented.</p> <p>Cooperative partnership to monitor compliance, to retain General Purpose Revenue (GPR) funds: Synar/WI Wins. A change of 33% noncompliance (retail outlets selling to minors) to 7.8% has been documented in 71/72 counties.</p> <p>Disparities include ethnic minorities and people who live in poverty. Competitive Request for Proposals (RFP) pilot to create a strategic plan. Wisconsin is considered a leader in this category. By 2005, met and exceeded 5 of 9 goals.</p> <p>U.S. lags behind in local and state smoke-free policies, e.g., compared to Ireland. The Surgeon General's report emphasizes need to prioritize this issue. Need statewide leverage.</p> <p>Bottom line is rising health costs. There are some significant businesses requesting help.</p> <p>Need to stabilize funding and to change laws on taxes. On 8/10/06, Dr. Patrick Remington expects to release to the press a new article on tobacco. Wisconsin is one of the 4 out of 5 states that have not seen decline in tobacco sales in past 2 years. Have not been able to over-sample minority populations. Disturbing silo of data collection in state. Resources are needed to obtain, clean and post data. Issue of sustainability of funding. Integration needed, e.g., effort with Department of Public Instruction to integrate Youth Risk Behavior Survey (YRBS) with Youth Tobacco</p>	

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<p>Part I: Evaluating Healthiest Wisconsin 2010 Health Priority: Tobacco Use and Exposure</p> <ul style="list-style-type: none"> • SPHC discussion using the process model • Next steps 	<p>Survey.</p> <p>Process Model Discussion:</p> <p>Observations – use of word “prevention” with the networks is key. The Ethnic Networks seem to have less equity as far as the number of organizations that are represented per group (the Tobacco Program is willing to discuss this with the Minority Health Program). Quit Line funded at half of need. Wisconsin failed at sustainability of tax increase for cigarettes. Wisconsin is 29th lowest (from top) in cigarette excise tax.</p> <p>Feeling - Interpretations</p> <p>Actions/Decisions Recommendations for Public Health Council and Governor. Networking to bring program up to Centers for Disease Control and Prevention’s (CDC) \$31 million. Draft proposed spending plan for difference between \$10 million and \$31 million. Consider focus on media. Need legislative, business, bipartisan effort.</p>	<p>Ms. Hintzman and Dr. Remington to develop a draft set of recommendations for review at the next meeting.</p>
<p>Part II: Evaluating Healthiest Wisconsin 2010 Health Priority: Adequate and Appropriate Nutrition</p> <ul style="list-style-type: none"> • Formal presentation using the SHPC evaluation model and its four elements 	<p>Mr. Perry introduced Ms. Patti Herrick, State WIC Director and Nutrition and Physical Activity Section Chief, in the Division of Public Health’s Bureau of Community Health Promotion.</p> <p>Presentation by Patty Herrick (refer to handout): Healthy eating will prevent many health problems. WIC high-risk population receiving focused nutrition education due to risk. Ms. Herrick reviewed some of the key initiatives, which include: school environments (e.g., fresh fruits/vegetables in 25 schools, 1 snack for each child every day); “Got Dirt?,” a gardening promotion; and healthy eating.</p> <p>Not meeting goal of 5 fruits/vegetables per day, and it will be difficult to achieve the new target of 9 fruits/vegetables per day.</p> <p>Safe food (nutrition preparedness) is a new initiative. Increase eligible participation in programs. Wisconsin rates last in nation for school breakfast participation. In-classroom breakfast for all (Grab ‘n’ Go) pilot by Hunger Task Force most successful.</p>	

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	<p>Plan to apply for partnership grant to improve food and nutrition security including hiring a nutritionist for public health preparedness.</p> <p>Large food stores have moved out of Milwaukee, concern of corner stores. Data are limited in terms of response from minorities.</p>	
<p>Part II: Evaluating Healthiest Wisconsin 2010 Health Priority: Adequate and Appropriate Nutrition</p> <ul style="list-style-type: none"> • SPHC discussion using the process model • Next steps 	<p>Observations: Food security should be prioritized along with school breakfast. Need funding for coalitions and food security. Campaign for healthy eating is probably not an effective strategy, rather funnel into statewide nutrition and physical activity plan. Governor makes children a high priority (“KidsFirst”). DHFS directed application for funding which was awarded. Recommend smarter, broader use of what’s available through <u>system</u>.</p> <p>Feeling: Themes of <i>integrated data</i> and <i>financing</i> are shared by all the priorities reviewed to date.</p> <p>Actions/Decisions: Recommendations will most likely focus on food security, data integration, data collection, financing, and infrastructure in general. Recommendations should support base funding for local health departments and address specific investments with quantitative outcomes. Issue of a legislative council study rose as an option. Consider seeking Robert Wood Johnson grant for special topics solicitation of proposal to integrate PH system.</p>	<p>Ms. Weidmann, Dr. Baisch, and Ms Jones to develop a draft set of recommendations for review at the next meeting.</p>
<p>Update from the Chair/Vice-Chair</p>	<ul style="list-style-type: none"> • Mr. Perry read a letter from Dr. Sheri Johnson recommitting DPH support to the Committee. • The issue of stem cell research will be discussed at the next meeting of the Public Health Council. • Discussions are underway concerning the potential for accrediting local health departments. Some locals are considering voluntary accreditation. State will carry out a statewide public health system capacity assessment in September 2006. • Following through on Council resolutions is a concern and will document the process in writing. 	<p>Executive Committee and PHC minutes will be sent to all committee members.</p>

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	<ul style="list-style-type: none"> • Minutes of the Council are posted. • Continuing concern in decreasing capacity due to reductions in resources and staff. 	Margaret to provide copies of the most recent Council minutes.
<ul style="list-style-type: none"> • Approve recommendations to PHC concerning the <i>Healthiest Wisconsin 2010</i> Health Priority: Obesity, Overweight, and Lack of Physical Activity • Confirm next steps and expected date to be discussed by the PHC 	<p>Ms. Frey presented revisions to the five recommendations for the Obesity, Overweight, and Lack of Physical Activity priority. Agreed that the handouts from the presenters along with budget information will be part of the final report recommendations to the Council.</p> <p>Ms. Schmelzer will draft a format to report basic revenue and expenditures to support the priority. The Committee believes budget information is important and responds to the infrastructure priority on public health financing.</p>	<p>Finalize Nutrition/ Physical Activity to one page by September.</p> <p>Margaret will propose a brief budget form to be completed by the DPH staff presenting on the four health priorities. Will confer with Ms. Graham, Ms. Frey, Ms. Hintzman, and Dr. Torres.</p>
Evaluation – Delta+	Richard commented that the meeting went well, and participation was good.	
<ul style="list-style-type: none"> • Confirm Next Meeting • Adjourn 	Next meeting is scheduled at the United Community Center. The meeting adjourned at 2:15 P.M.	

Respectfully submitted by:

Deborah Pasha, RN, Regional Public Health Nursing Consultant, DPH
Margaret Schmelzer, Chief Staff to the State Health Plan Committee, DPH

C: Dr. Sheri Johnson, Administrator and State Health Officer
Dr. Ayaz Samadani, Chair, Public Health Council
Margaret Kristan, Director, Bureau of Health Information and Policy
Patricia Guhleman, Chief, Policy Section, Bureau of Health Information and Policy