

**Minutes**  
**Wisconsin Public Health Council**  
**State Health Plan Committee**  
**March 11, 2009 (Wednesday)**

**Location:** Wauwatosa City Hall, Wauwatosa, Wisconsin

**Attending:** Mary Jo Baisch, Kathryn Vedder, Carol Graham, Susan Garcia Franz, David Pate, Shannon Chavez-Korell, John Meurer, Catherine Frey, Marilyn Haynes-Brokopp, John Meurer, Mark Powless,

**Absent:** Judy Burrows, Gary Hollander, Pa Vang

**Staff:** Margaret Schmelzer, Pat Guhleman, Kristine Freundlich, Bernadette Thomsen

**Guests:** Chavalee Boonto (UWM Graduate Student)

<b>Agenda Item and Discussion</b>	<b>Decisions, Actions, Recommendations</b>
<p><b>Convene meeting, review agenda, approve January 2009 meeting notes:</b></p> <p>No change offered for the agenda. Minutes review and approved. Moved by Ms. Graham and Dr. Chavez Korell to approve. Minutes approved unanimously.</p>	<p>Meeting notes approved.</p>
<p><b>Report from the Chairs:</b></p> <ul style="list-style-type: none"> <li>• Dr. Baisch welcomed the newest member, Ms. Judy Burrows of the Marathon County Health Department</li> <li>• Reviewed membership to assure diverse representation across key sectors. Dr. Baisch will speak with Mr. Terry Brandenburg about an environmental health representative to the Committee.</li> <li>• Dr. Baisch recommended that the Committee develop a document for the Public Health Council that addresses the “lessons learned” from the progress report process led by the Committee for the 16 priorities of Healthiest Wisconsin 2010. Dr. Meurer reported that the Division of Public Health will be meeting with the Public/Community Health Council to discuss the role of the Medical College of Wisconsin in planning and implementing Healthiest Wisconsin 2020.</li> <li>• Dr. Julie Willems Van Dijk was elected as the Chair of the Council and Dr. Baisch was elected as the Secretary.</li> <li>• Dr. Baisch updated the Committee on the outcomes of the Mental Health and 2008 Annual Report to the Public Health Council. Additional recommendations will be added to the Mental Health Report concerning the Laotian/Hmong community. Ms. Schmelzer will send the report to all Committee members. Dr. Meurer wants to make sure that</li> </ul>	<p>Ms. Lynn Johnson has asked to resign from the Committee.</p> <p>Dr. Baisch will follow up with Mr. Brandenburg about an environmental health appointee to the Committee.</p>

Agenda Item and Discussion	Decisions, Actions, Recommendations
<p>the work of the Committee remains visible and is communicated to the Secretary and the Governor. Additional report recommendations will include Hmong data.</p> <p><b>Report from the Division of Public Health:</b>  Ms. Schmelzer’s comments were deferred to the later agenda item concerning Healthiest Wisconsin 2020. She highlighted that Healthiest Wisconsin 2020 is now one of five “enterprise-wide initiatives” in the Department with Dr. Seth Foldy as the Executive Sponsor.</p> <p>Lynn Johnson has asked to resign from the Committee because she is seldom able to join the meetings.</p>	
<p><b>Update: Access to Primary and Preventive Health Services Report</b></p> <ul style="list-style-type: none"> <li>• Considerable time was dedicated to assuring a comprehensive report and reaching agreement on the recommendations. The Committee recommended that the full array of recommendations be included.</li> <li>• Committee liked the introduction. Discussed health insurance data and reflects 2007 data and now with the downturn of the economy it doesn’t reflect the many people who lost jobs and may now be worse and reflect this as a footnote under health insurance.</li> <li>• Ms. Garcia Franz will give the presentation to the Public Health Council at its April 17, 2009, meeting.</li> </ul>	<p>Report approved. Ms. Garcia Franz to make the presentation to the Public Health Council.</p>
<p><b>Review Access to Primary and Preventive Health Services Report:</b>  Dr. Baisch asked for a postponement of the Committee’s progress report concerning access to primary and preventive health services due to a need for further analysis which will influence the currently proposed recommendations.</p>	<p>Committee agreed to postpone final review of the Committee’s state health plan report entitled: “Access to Primary and Preventive Health Services.”</p>
<p><b>Wisconsin Partnership Program Evaluation</b>  Ms. Catherine Frey, member of the Public Health Council and Assistant Director of the Wisconsin Partnership Program, provided an overview of the evaluation and next steps. The complete report is available at:  <a href="http://wphf.med.wisc.edu/evaluation.php">http://wphf.med.wisc.edu/evaluation.php</a> Ms Frey led a discussion concerning future opportunities before the medical schools to deal with specific issues concerning the Healthiest Wisconsin 2020 plan specifically as they pertain to</p>	

Agenda Item and Discussion	Decisions, Actions, Recommendations
<p>infrastructure, a future research agenda, and identifying clear roles for the medical schools.</p>	
<p><b>Healthiest Wisconsin 2020 Update:</b>  Ms. Guhleman led the discussion.</p> <ol style="list-style-type: none"> <li>1. Discussed the handouts to include “what done looks like,” models, and proposed organizational model for 2009.</li> <li>2. Convening small expert teams this summer that address the proposed profile for each of the 21 focus areas and link existing plans to avoid duplicating existing works and, identifying powerful objectives for each focus that drive Wisconsin toward the overarching goals to (1) improve quality of life, and (2) achieve health equity.</li> <li>3. Connect the strategic planning models to process. Flow needs to show dynamics and connectivity.</li> <li>4. The 19 focus areas are broad. We have moved away from the term “priority.”</li> <li>5. The overarching focus areas (social, economic, and educational factors that influence health; and health disparities) are synergistic and represent major drivers for the objectives in each focus area.</li> <li>6. A technical advisory team will be identified to guide the work of the focus areas, develop the parameters and criteria for their work, and assure that all identified objectives are measurable.</li> </ol> <p><b>Discussion:</b>  One member expressed concern that the focus areas have moved away from the determinants of health and now seem to follow federal funding categories – concerned the focus areas are categorical. State staff and members of the Committee provided more information to clarify this and described how the determinants, incidence, prevalence, and community input shaped the current set of focus areas. All agreed that the current approach builds upon Healthiest Wisconsin 2010. The landscape of focus areas provides the opportunity for everyone to see themselves in the future plan. Nonetheless, the Committee members cautioned about avoiding categorical approaches to the focus areas. They further recommended that the intermediate objectives measure prevention as well as disease, conditions, and injury.</p>	
<p><b>HW2020: Role of the State Health Plan Committee and Public Health Council</b></p>	<p>Carry this agenda item over to May 2009, and</p>

Agenda Item and Discussion	Decisions, Actions, Recommendations
<p>Dr. Baisch postponed a full discussion to a discussion of lessons learned. Dr. Baisch led the discussion on lessons learned.</p> <p>Three key issues:</p> <ol style="list-style-type: none"> <li>(1) Recommendations for data collection changes that need to be addressed in the state health plan.</li> <li>(2) How will our recommendations have an impact on 2020?</li> <li>(3) How will our role continue?</li> </ol> <p>Dr. Baisch invited responses from the Committee:</p> <ul style="list-style-type: none"> <li>• Ms. Graham stated that the Committee did excellent work but were frustrated (e.g., who was reviewing data for what purpose, and getting others involved). The priorities need to identify what data/measures we will have. The 2020 goals have to be part of the focus areas so they are evaluated from the beginning – data needs to be captured. When you evaluate the population you need to identify the SES and disparity issues for each focus area. If we don't have measures, then state it, and develop a system to capture the data.</li> <li>• Dr. Baisch noted that many times the objectives didn't measure the priority and were the best data to measure the indicators for the objectives. When we do collect the information, are we capturing information from the partners and are we getting information about the under-represented groups? A piece of this has to do with resources. We can't mandate it without some resources to get the data. Until we invest in it, it's not going to happen. How can electronic health data elements be built into measurement? The state should build it into the systems so it grows. Difficulty in accessing data – e.g., Medicaid. Not having access to the Medicaid data base is a big limitation.</li> <li>• Having 2020 as an enterprise status must drive coordination across the Divisions. The divisions need to be at the table when these issues are addressed.</li> <li>• Data are available and not being used – the hospital data gives good information for access, or even more collaboration about perinatal data. Identifying those sources of data that are not currently being used is important. It's not just about missing data it's also about not using what's available.</li> <li>• Ms. Guhleman asked: does measurement drive the objectives and when it does it drive us away from measuring the priority because there may not be a measure for the</li> </ul>	<p>make it the first agenda item at that meeting.</p>

Agenda Item and Discussion	Decisions, Actions, Recommendations
<p>priority? What do you think about asking the 19 focus groups about the major indicators that reflect the most important things?</p> <ul style="list-style-type: none"> <li>• Ms. Frey recommended establishing benchmarks.</li> <li>• Dr. Baisch recommended that the data recommendations she sent out came directly from the access committee.</li> <li>• Ms. Haynes-Brokopp recommended looking at the Committee processes. Are the reports too overwhelming for the Council? Would a one-page executive summary be needed? Many agreed that keeping this simple would help the Council know how to act. Ms. Haynes-Brokopp also reminded the Committee about the importance of monitoring action/progress on the recommendations sent to the Council.</li> </ul> <p><b>Role of the Committee:</b>  What is the role of the SHPC? What are the questions that need to be answered? Ms. Frey suggested that the role of the Committee is simple – that is, take a strong role in shaping Healthiest Wisconsin 2020. The four members of the Council on the Strategic Leadership Team should provide reports to the PHC and not expect the Department to do this for them. How should the Council monitor progress? How can the Committee provide recommendations to enable the Council to act and, like the Committee, serve as a policy champion for Healthiest Wisconsin 2020?</p> <ul style="list-style-type: none"> <li>• Ms. Garcia Franz suggested that the Council build in an extended break to discuss and otherwise suggest a plan of action after the reports are submitted. Ms. Guhleman will take this idea to the Executive Committee.</li> </ul>	
<p><b>Next steps and review assignments</b></p> <ul style="list-style-type: none"> <li>• Carry over the lessons learned to the May 2009 meeting to include a deeper discussion of the future role of the Committee now that nearly all Healthiest Wisconsin 2010 priorities have been evaluated.</li> <li>• Formal presentations from the Bureaus of Communicable Disease and Environmental/Occupational Health are scheduled for the May 2009 meeting. Dr. Baisch recommended the meeting to be held in Madison.</li> <li>• Review membership and identify potential members so the Committee reflects the diversity of public health system partners.</li> </ul>	

Agenda Item and Discussion	Decisions, Actions, Recommendations
<ul style="list-style-type: none"> <li>Ms. Schmelzer suggested that the Committee discuss how it wants to embark on the evaluation of the Healthiest Wisconsin 2010 priority concerning “social and economic factors that influence health.” So far, Dr. David Pate and Dr. Hollander have agreed to lead this evaluation on behalf of the Committee.</li> </ul>	
<p><b>Adjournment:</b> The meeting adjourned at 1:00 PM</p>	

Meeting notes taken by  
Margaret Schmelzer

C: Julie Willems VanDijk, Chair, Wisconsin Public Health Council  
Seth Foldy, State Health Officer and Administrator  
Patricia Guhleman, Director, Bureau of Health Information and Policy