

**Wisconsin Public Health Council  
State Health Plan Quality Improvement Committee  
December 9, 2011 (Updated 1/19/12)**

**Topic: Adequate, Appropriate, and Safe Food and Nutrition  
Topic: Physical Activity**

Example: Background and Recommended Criteria to Guide  
Public Health Council Progress Review

CRITERIA	RECOMMENDED CRITERIA FOR ISSUE SELECTION BY THE COUNCIL
High impact issue	<p>Twenty-six percent (26%) of Wisconsin adults are obese and 64 percent are overweight or obese. Overweight and obesity increase the risk for developing many different diseases, including type 2 diabetes. There are nearly 480,000 people in Wisconsin with diabetes. This disease costs Wisconsin over \$6 billion annually.</p> <p>Limited physical activity is closely linked to obesity (a major risk factor for cardiovascular disease, certain types of cancer, type 2 diabetes and other chronic diseases). Obesity is defined by the Centers for Disease Control and Prevention as “a body mass index (BMI) of 30 or greater. BMI is calculated from a person's weight and height and provides a reasonable indicator of body fatness and weight categories that may lead to health problems.” U.S. and Wisconsin rates of obesity have risen steadily over the past 20 years, with a leveling off in recent years. Behavioral Risk Factor Surveillance System results for 2008 indicate that 26.7 percent of the U.S. population and 26.1 percent of the Wisconsin population were obese (Wisconsin Behavioral Risk Factor Surveillance System, [BRFSS], 2008).</p>
Alignment with DHS Guiding Principles	<ul style="list-style-type: none"> <li>• We serve the citizens who have entrusted us with important responsibilities and funds they earned.</li> <li>• Our healthcare costs are not sustainable at current levels. We need new models for care delivery, regulation development, prevention strategies, risk sharing and purchasing.</li> <li>• In this transformation, we must enhance the role of our citizens as primary stakeholders in managing their health and associated costs.</li> <li>• Competition, choice, and transparency are critical elements to these emerging models if we are to increase the value of healthcare to our citizens.</li> <li>• Public programs shall complement rather than compete against the private market. We will work to eliminate cost shifting to the private sector and among different systems (acute, mental</li> </ul>

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	<p>health, long-term care).</p> <ul style="list-style-type: none"> <li>• We will continue to provide support systems to help vulnerable people lead fulfilling, self-directed, healthy lives that promote independence, while recognizing the value of and utilizing supports from families and the community.</li> <li>• We will actively promote collaboration in pursuit of innovation, increased value and improved outcomes for the benefit of all our citizens.</li> <li>• We will align resources to achieve positive outcomes and hold ourselves accountable for achieving results.</li> </ul>
<p>Prevention strategies and evidence-based practices with good potential are available to improve overall health, quality of life, and positive societal impact.</p>	<p>Evidence-based practices</p> <ul style="list-style-type: none"> <li>• What Works</li> <li>• Informed Caring</li> <li>• Wisconsin Nutrition and Physical Activity Program</li> <li>• US Preventive Health Services Guidelines</li> <li>• Community Guide</li> <li>• Healthy People 2020</li> <li>• National Prevention Strategy</li> <li>• Recommendations for physical activity as established by the U.S. Department of Health and Human Services (2008)</li> </ul>
<p>Alignment with other health, infrastructure, and overarching focus area in Healthiest Wisconsin 2020.</p>	<p>Physical activity (H)  Mental health (H)  Environmental and occupational health (H)  Access to high-quality health services (I)  Health literacy (I)  Social, economic and educational factors that influence health (O)  Health disparities (O)</p>
<p>Focus area objectives of the topic including related objectives link to HW2020 goals.</p>	<p><b>Objective:</b> Increase access to health foods and support breastfeeding (Links to Goal 1)  <b>Objective:</b> Make healthy foods available for all (Links to Goal 2)  <b>Objective:</b> Target obesity efforts to address health disparities (Links to Goal 2)  <b>Other Focus Area Objectives</b></p> <ul style="list-style-type: none"> <li>• Physical Activity Focus Area: Design communities to encourage physical activity (Links to Goal 1); and, Provide opportunities to become physically active (Links to Goal 2).</li> <li>• Mental Health Focus Area: Reduce smoking and obesity among people with mental disorders (Links to Goal 1).</li> <li>• Environmental and Occupational Health Focus Areas: Improve the quality and safety of the food supply and natural, built, and work environments (Links to Goal 1).</li> <li>• Access to High-Quality Health Services Focus Area:</li> </ul>

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	<p>Assure access to high-quality health services (Links to Goal 1); and, Assure patient-centered health services for all (Links to Goal 2).</p> <ul style="list-style-type: none"> <li>• Health Literacy Focus Area: Strengthen communication for effective health action (Links to Goal 2).</li> <li>• Social, Economic, Educational Focus Area: Support and develop policies to reduce poverty (Links to Goal 2); and, Support and develop policies to improve education (Links to Goal 2).</li> <li>• Health Disparities Focus Areas: Align resources to eliminate health disparities (Links to Goal 2).</li> </ul>
National leading health indicators that link to the topic (US Institute of Medicine).	<ul style="list-style-type: none"> <li>• Access to care</li> <li>• Healthy behaviors</li> <li>• Chronic disease</li> <li>• Environmental determinants</li> <li>• Social determinants</li> <li>• Mental health</li> <li>• Quality of care</li> </ul>
National Prevention Strategy priorities that link to the topic (US Surgeon General).	<ul style="list-style-type: none"> <li>• Healthy eating</li> <li>• Active living</li> <li>• Mental and emotional well-being</li> </ul>

CRITERIA	RECOMMENDED CRITERIA TO BE USED BY THE COMMITTEE TO FRAME PUBLIC HEALTH COUNCIL DELIBERATIONS
Links to HW2020 outcomes.	<ul style="list-style-type: none"> <li>• Reduce disease injury and adverse health conditions due to risky behaviors.</li> <li>• Reduce preventable illness and disability.</li> <li>• Reduce preventable death.</li> <li>• Align policies and systems for better health</li> <li>• Eliminate disparities.</li> <li>• Achieve health equity.</li> <li>• Balance policies and actions based on the drivers of health.</li> </ul>
Links to HW2020 actual and potential partners who share leadership and accountability for the topic.	<p>State and local health departments  Tribes  Health care and hospitals  Community-based and advocacy organizations  Faith communities  Human services</p>

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	Business, labor, finance and commerce Housing and building safety State and local elected officials Agriculture, food and veterinary Transportation, energy, and built environment Education
Policies and systems aligned for better health.	Would we need to know from the sectors below (and beyond) how well the policies and systems work (synergistic, conflicted, absent)? How would we amass this information across the 18 partnership sectors / systems identified in the Healthiest Wisconsin 2020 Partnership Model?
Community capacity and will to take action.	How would we document capacity and will to take actions that contribute to the HW2020 outcomes? The partners work at many levels (e.g., statewide, regionally, locally, neighborhood).
Infrastructure Issues Leading to Overarching Deliberations	Added by the PHC 12/9/11
Crosscutting Focus Areas (Health Disparities; Social, Economic, and Educational Factors that Influence Health)	Added by Committee Staff given the interdependent nature of the infrastructure and the crosscutting focus areas discussed during the December 12, 2011 Public Health Council meeting.