

PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

SEPTEMBER 23, 2011 HEALTHY COMMUNITIES AND ENVIRONMENTS SUBGROUP

PARTICIPANTS

<i>Co-Chairs</i>	Dennis Worsham (PHSKC); Allene Mares (DOH)
<i>Staff</i>	Daisye Orr, Simana Dimitrova, Jane Lee, Marie Flake (DOH)
<i>Members</i>	Ben Bakkenta (Puget Sound Regional Council), Jeff Ketchel (Grant County Health District), Lucy Culp (American Heart Association), Martin Mueller (Office of Superintendent of Public Instruction), Maxine Hayes (Washington State Department of Health), Ron Oldham (Pacific NW Regional Council of NAHRO), Sue Grinnell (Washington State Department of Health)
<i>Participants</i>	Greg Williamson (Office of Superintendent of Public Instruction)

MEETING NOTES

WELCOME AND INTRODUCTIONS

Dennis Worsham and Allene Mares

Dennis and Allene welcomed the group and participants introduced themselves.

AGENDA FOR CHANGE ORIENTATION

Gregg Grunenfelder, Agenda for Change Workgroup Co-Chair

Gregg provided a brief overview of the Reshaping Public Health's effort which led to the creation of the *Agenda for Change* in 2010. The *Agenda* focuses on the changing environment of public health and outlines a shared set of principles and decision considerations for policy, program and funding decisions.

To move the *Agenda* from a broad description of what the governmental public health system should focus on in the future, a new workgroup of the PHIP was appointed. The scope of the work is to build on the Reshaping Public Health efforts over the next 2 to 5 years. The workgroup will guide the process, continually scan the environment, oversee and review the output of the subgroups, identify themes, key issues and gaps and integrate all these elements into an action plan for Washington's governmental public health system.

The three newly created subgroups under the *Agenda for Change* Workgroup will focus on each area outlined in the *Agenda for Change*. Subgroup participants will contribute content expertise, consider topics broadly rather than based on funding streams and consider how to use existing resources more effectively.

The Agenda for Change workgroup will publish two reports in the next 18 months – an Interim Action Plan in mid 2012 and the 2012 Public Health Improvement Plan.

REVIEW SUBGROUP CHARGE AND PROCESS

Allene Mares

The purpose of the subgroup is to ‘focus on policy and system efforts to foster communities and environments that promote healthy starts and ongoing wellness, prevent illness and injury, and better provide all of us the opportunity for long, healthy lives.’

Allene also provided additional context for the work of this subgroup. There is a need to:

- Develop and execute an action agenda that seeks to align all of the different efforts that exist in Washington related to developing healthy communities and environments.
- Keep in mind how governmental public health can support the community and how the community can support governmental public health. Remember that neither can be successful without the other.
- Keep our action agenda to a manageable size, try to support and maintain existing efforts, and think about the actions we can take right now.

REVIEW AND DISCUSS STRATEGY DOCUMENT

Dennis Worsham

Subgroup members received a draft strategy document with four proposed strategies common to the Community Transformation Grant applications from Department of Health, Tacoma-Pierce County Health Department, Public Health – Seattle & King County, and Snohomish County Health District. www.doh.wa.gov/PHIP/doc/rph/env/actions.pdf

Dennis led the group in a discussion on proposed action items using the strategy document as a starting point. The discussion included additional strategies to consider, ways to expand the current proposed strategy, and questions for further discussion.

Tobacco-Free Living: Increase the number of public housing properties with smoke-free policies

Discussion points:

- Over half of the housing authorities in Washington have adopted smoke-free policies or are in the process of doing so. What is needed to make this successful is: tighter coordination, better partnerships to help them with implementation and compliance, and more cross-pollination between public health and housing.
- Policy to change who gets the revenue from tobacco taxes; it currently goes to the state general fund, but it should support public health tobacco prevention efforts.
- Smoke-free policies for places where the public congregates that are not covered by 901 such as fairgrounds, stadiums, and parks.
- Funding for the state Tobacco Quitline.
- Address tobacco marketing.

- Address smoking in cars with kids.
- Need to preserve current 901 and help local public health with enforcement.
- Support development of tobacco-free campuses at other state agencies.

Healthy Eating: Support healthy procurement policies in institutional settings and government agencies

Discussion points:

- Include health indicators on school report cards to hold public schools accountable for tracking health outcomes.
- Policy addressing healthy breakfast challenge.
- Broaden the definition of institutional settings.

Healthy Eating: Increase access to healthy foods in communities, including grocery stores and small stores

Discussion points:

- Support regional food policy councils and promote involvement of local public health.
- Policy change to specify that protection of agricultural land in comprehensive plans is to increase access to healthy food.
- How can public housing also support healthy eating?
- Address affordability as well as access to healthy food.
- Consider the issue of getting access, but also implementing access (for example: it is not enough to get fresh produce to food banks if the food bank doesn't have safe and appropriate storage for fresh produce).

Healthy and Safe Physical Environments: Increase adoption of comprehensive approaches to improve community design to enhance walking and bicycling and active transportation

Discussion points:

- Support changes to the Growth Management Act to include health issues.
- Include human development issues in local comprehensive plans.
- Include health criteria in regional transportation planning requirements.
- Require health impact assessments as part of local transportation projects.
- Develop better metrics to evaluation transportation impacts on health, such as water quality, air quality, pollution, access to food, physical activity, etc.
- Some larger housing authorities have HOPE VI Revitalization grants that have provided the opportunity to pay attention to healthy living (for example: High Point's easy breathing designation).
- Address safety as a public health issue that can be a barrier to physical activity.



ACTION ITEMS

Daisye agreed to do the following:

- Meet with Maxine Hayes regarding proposed strategies to address healthy starts.
- Draft an expanded strategy list for the next meeting to include items from today's meeting, items from pending discussion with Maxine, and additional items brought forth by committee members. Consider a tiered approach as some are long term, some short term, some statewide, and some community level.
- Draft a glossary of terms.
- Email participants any time a new item is posted on the webpage.

For questions or comments about the activities of the subgroup, please email Daisye Orr directly at daisye.orr@doh.wa.gov

NEXT STEPS

The next meeting will be an in-person meeting at the Department of Health offices in Kent with a call-in option. It was originally scheduled at the end of October, but due to some participants needing to attend the American Public Health Association meeting, it will be rescheduled. You will receive an email regarding the new meeting date.