

# Healthy California 2020 Initiative: Consensus Building on Top Priority Areas for CDPH

Public Health Advisory Committee

April 30, 2010



# Introducing the CDPH Decision Framework

- Responding to public health needs in the 21<sup>st</sup> century
- Unified messaging throughout CDPH
- Shared prioritization
- Focus on core business functions for improved efficiencies



# CDPH Public Health Decision Framework

(Comprised of Three Facets )

## 1. Determinants of Health

*(BARHII Model – Moving Upstream)*

## 2. Criteria for prioritization

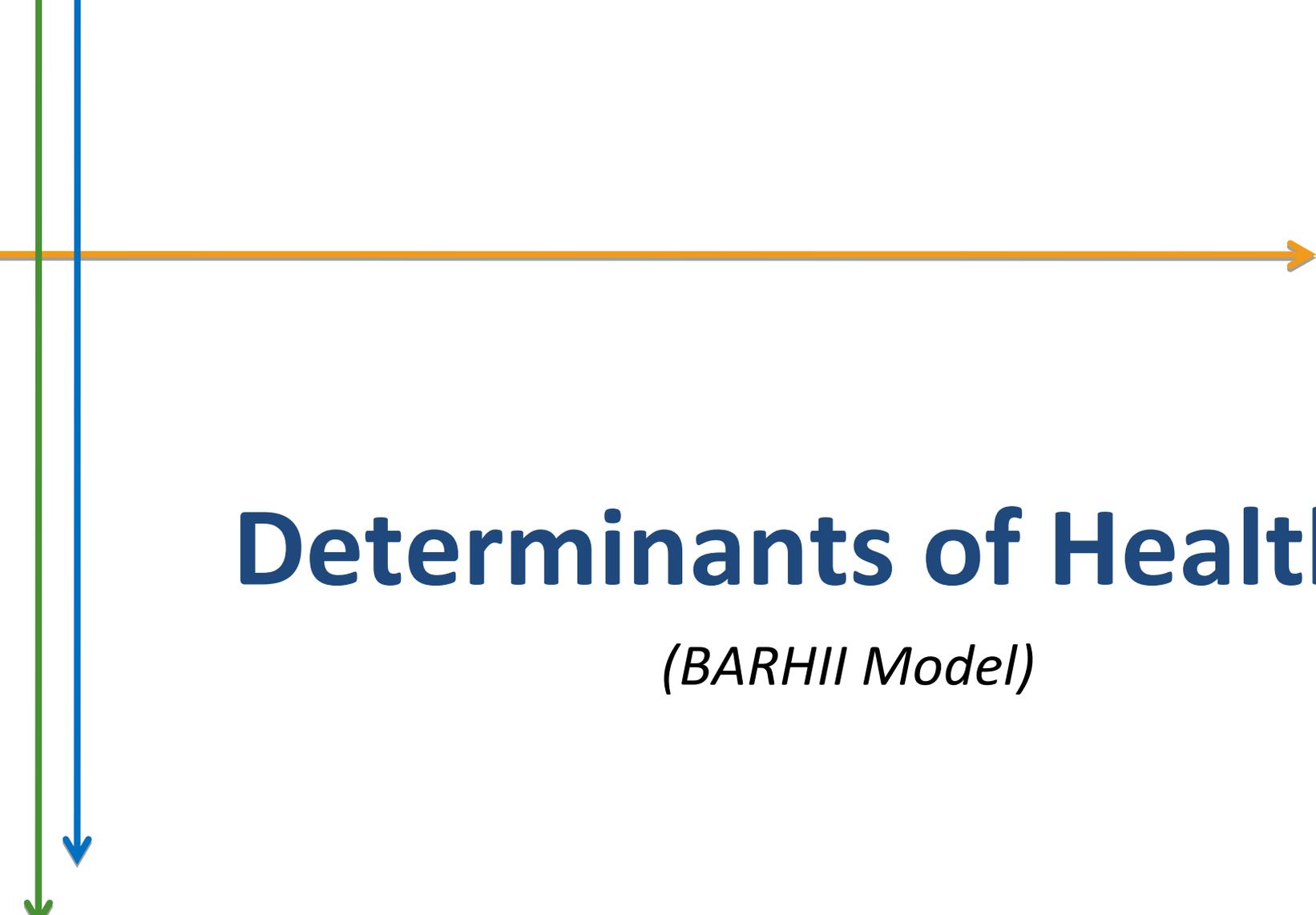
*(CDPH prioritization of Healthy People 2020 Advisory Committee Criteria)*

## 3. Core Functions and

## 10 Essential Public Health Services

*(Institute of Medicine, 1988; Public Health Functions Steering Committee, 1994;*

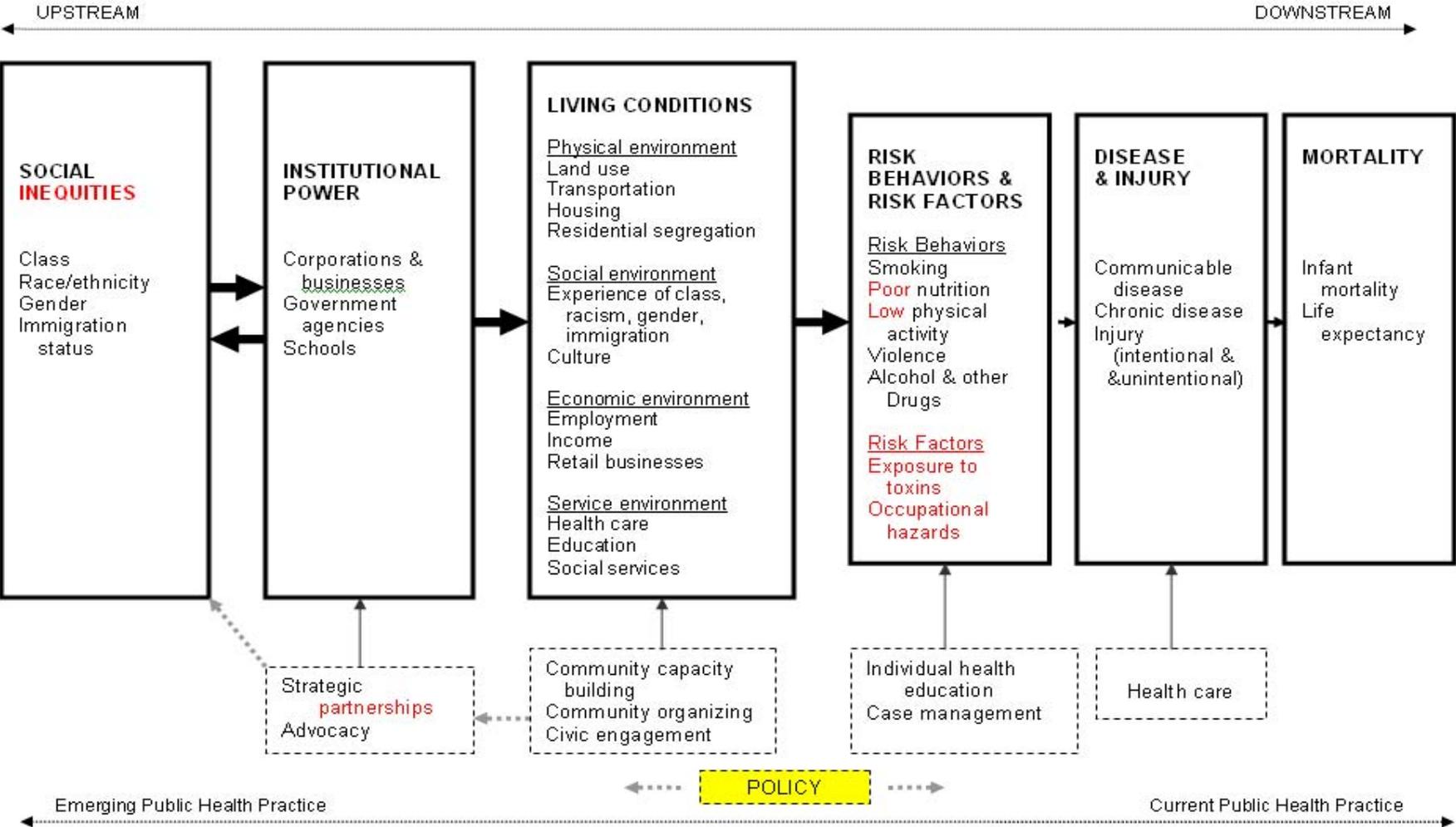
*<http://www.phf.org/infrastructure/resources/Turnock.ppt> )*

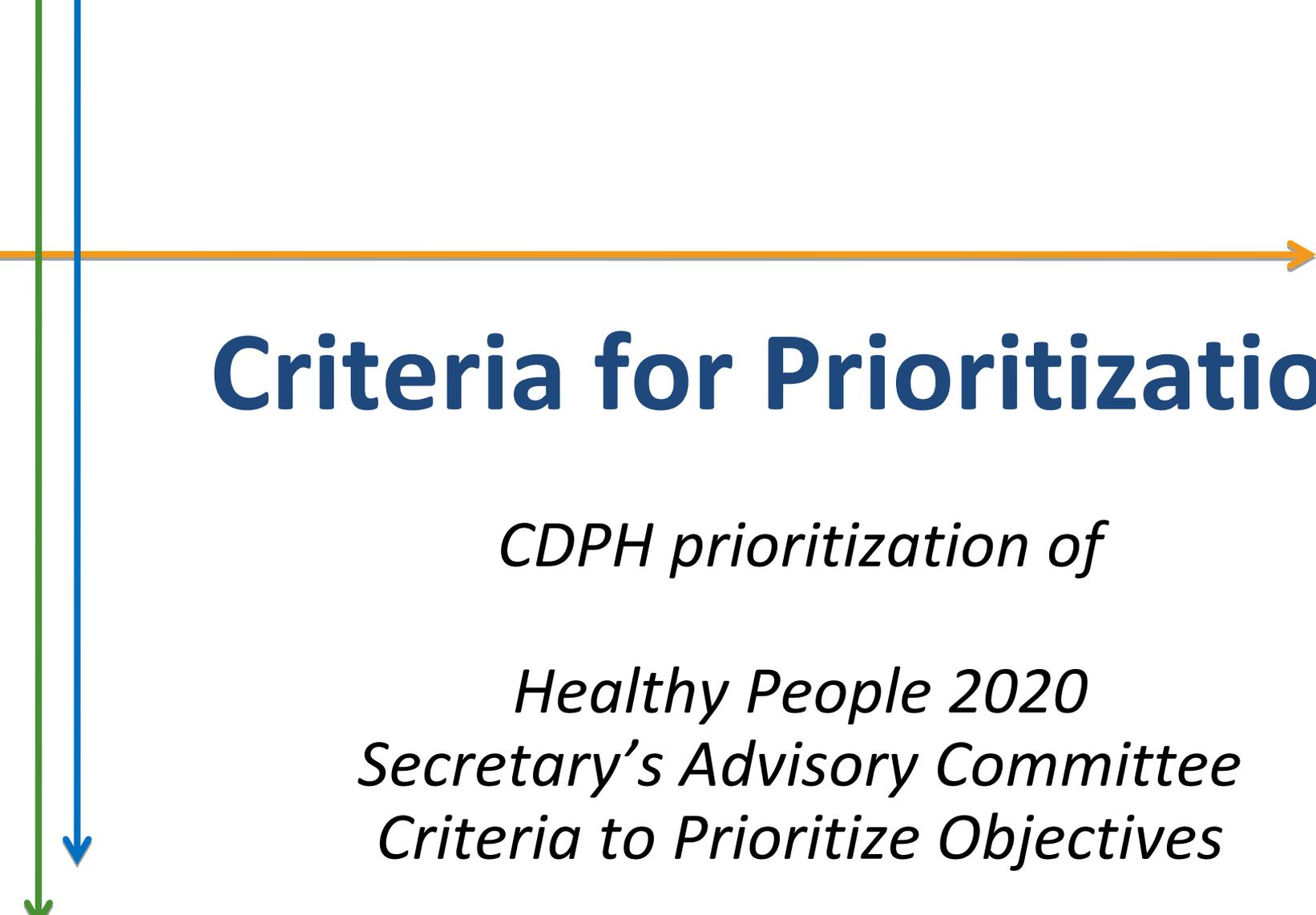


# Determinants of Health

*(BARHII Model)*

## A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE





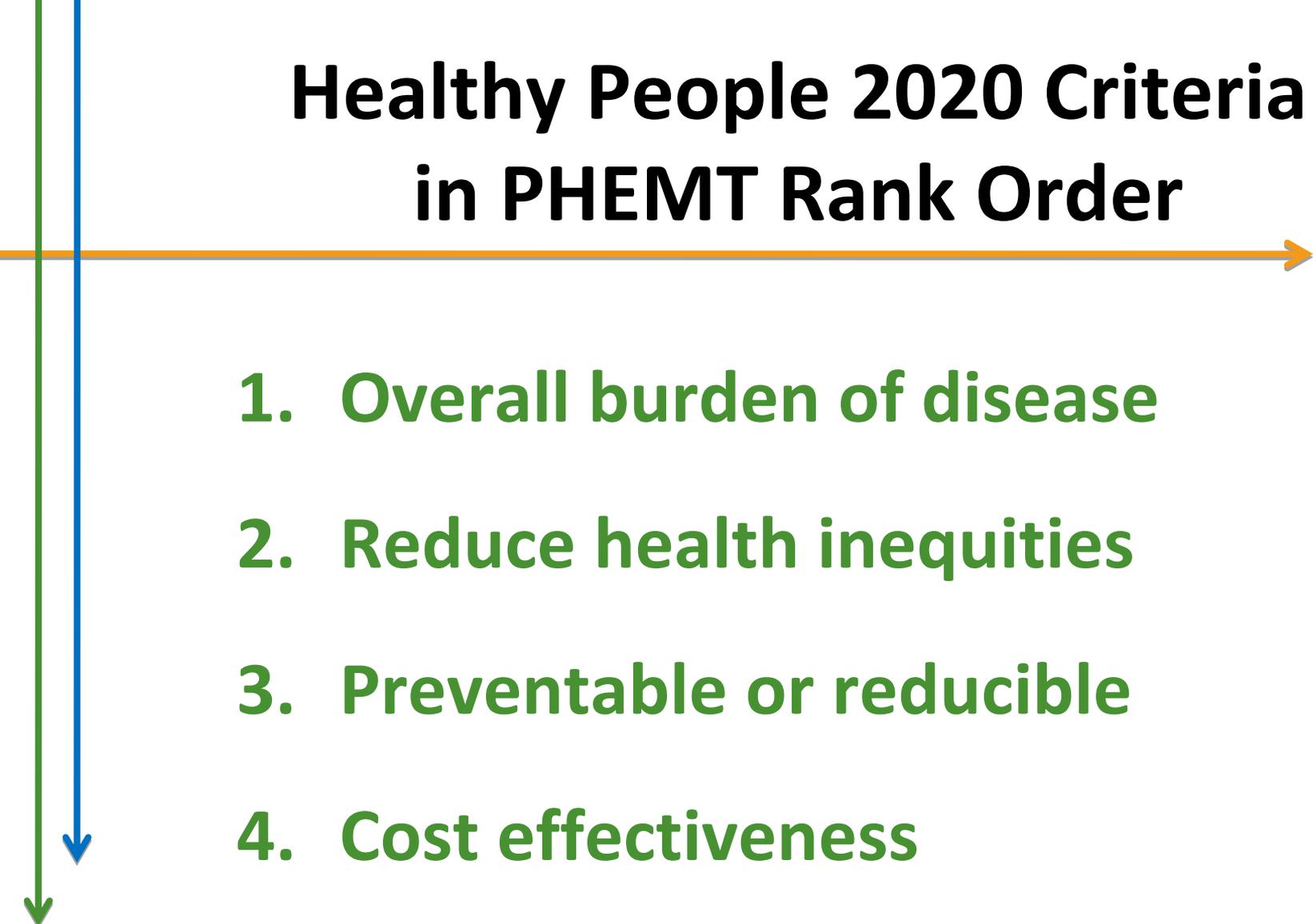
# Criteria for Prioritization

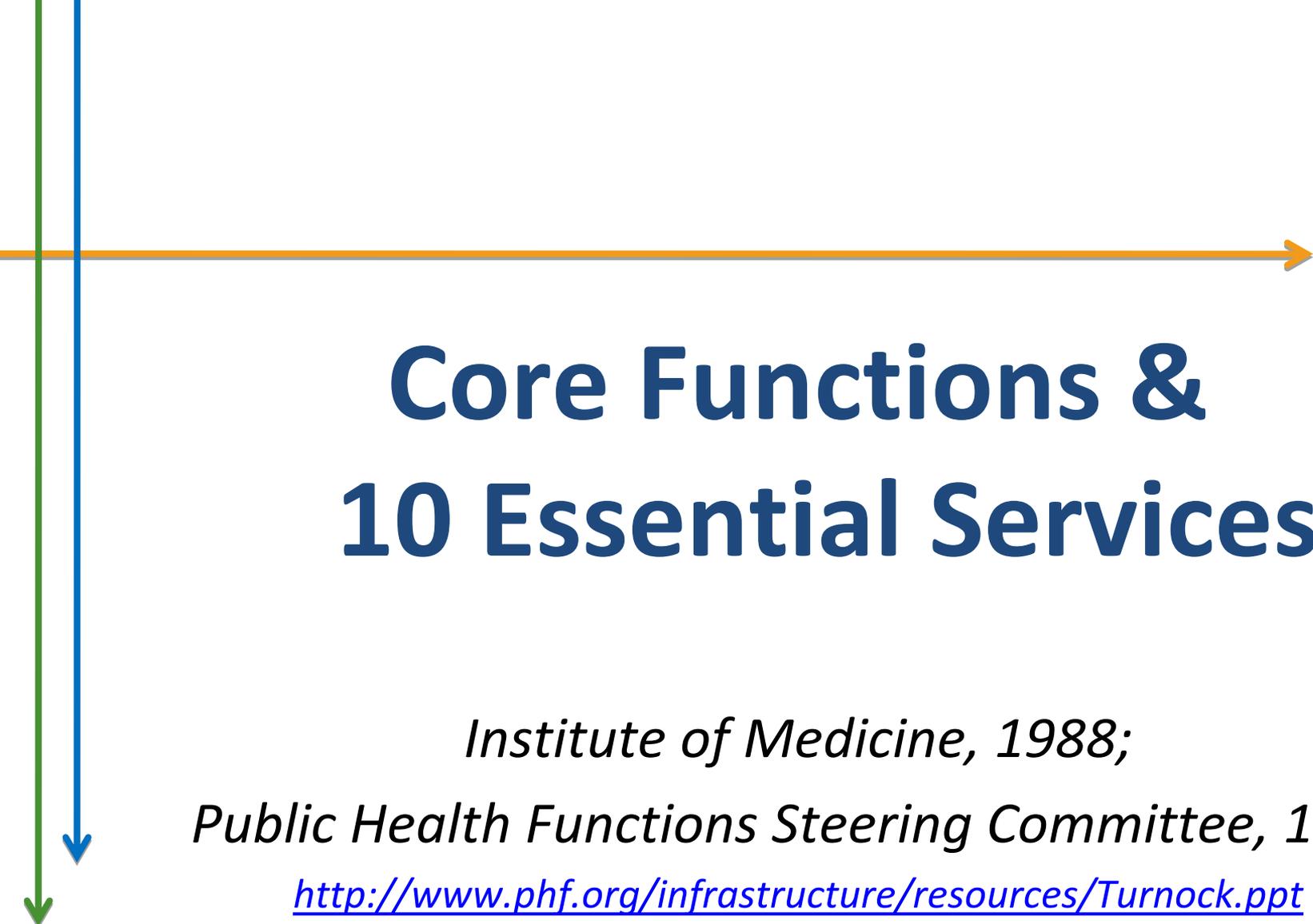
*CDPH prioritization of  
Healthy People 2020  
Secretary's Advisory Committee  
Criteria to Prioritize Objectives*

<http://www.healthypeople.gov/HP2020/advisory/default.asp>



# Healthy People 2020 Criteria in PHEMT Rank Order

- 
1. Overall burden of disease
  2. Reduce health inequities
  3. Preventable or reducible
  4. Cost effectiveness



# Core Functions & 10 Essential Services

*Institute of Medicine, 1988;*

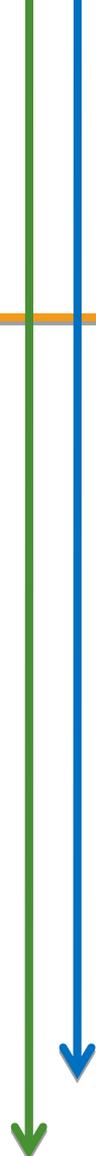
*Public Health Functions Steering Committee, 1994*

<http://www.phf.org/infrastructure/resources/Turnock.ppt>

<http://www.cdph.ca.gov/Pages/CoreActivities.aspx>



# Public Health Core Functions & Essential Services



<b>Assessment</b>	<b>Policy Development</b>	<b>Assurance</b>
<ol style="list-style-type: none"><li>1. Monitor health status to identify and solve community health problems.</li><li>2. Diagnose and investigate health problems and health hazard.</li></ol>	<ol style="list-style-type: none"><li>3. Give people information they need to make healthy choices.</li><li>4. Engage the community to identify and solve health problems.</li><li>5. Develop public health policies and plans that support individual and community health efforts.</li></ol>	<ol style="list-style-type: none"><li>6. Enforce laws and regulations that protect health and ensure safety</li><li>7. Link people to needed personal health services and ensure the provisions of health care when otherwise unavailable.</li><li>8. Assure competent public and personal health care workforce.</li><li>9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.</li><li>10. Research for new insights and innovate solutions to health problems.</li></ol>

# Healthy People 2020

## Vision

A society in which all people live long, healthy lives

## Mission

To improve health through strengthening policy and practice, Healthy People will:

- Identify nationwide health improvement priorities
- Increase public awareness and understanding of the determinants of health, disease, and disability and the opportunities for progress
- Provide measurable objectives and goals that can be used at the national, state, and local levels
- Engage multiple sectors to take actions that are driven by the best available evidence and knowledge
- Identify critical research and data collection needs



# Healthy People 2020 Overarching Goals

- **Eliminate preventable** disease, disability, injury, and premature death
- **Achieve health equity, eliminate disparities**, and improve the health of all groups
- Create **social and physical environments** that promote good health for all
- Promote healthy development and healthy behaviors across every **stage of life**



# Health Equity

- A desirable goal/standard that entails special efforts to improve the health of those who have experienced social or economic disadvantage.
- Health equity is oriented toward achieving the **highest level of health possible for all groups.**
- Requires:
  1. continuous efforts focused on elimination of health disparities, including disparities in health care and in the living and working conditions that influence health, and
  2. continuous efforts to maintain a desired state of equity after particular health disparities are eliminated.

# Health Disparities

- A particular type of health difference that is closely linked with social or economic disadvantage.
- Adversely affect **groups of people who have systematically experienced greater social or economic obstacles** to health based on their racial or ethnic group, religion, socioeconomic status, gender, mental health, cognitive, sensory, or physical disability, sexual orientation, geographic location, or other characteristics historically linked to discrimination or exclusion.

# Healthy People 2020 Update

- Anticipate December 2010 release of objectives
- Social Determinants of Health objectives won't be ready by the national launch
- 1,315 objectives in 40 Topic Areas
- Topic Areas added after the Public Comments: Preparedness and Dementias

# Healthy People 2020 Topic Areas

1. Access to Health Services
2. **Adolescent Health**
3. **Alzheimer's Disease and Other Dementias**
4. Arthritis, Osteoporosis, and Chronic Back Conditions
5. **Blood Disorders and Blood Safety**
6. Cancer
7. Chronic Kidney Diseases
8. Diabetes
9. Disability and Secondary Conditions
10. **Early and Middle Childhood**
11. Educational and Community-Based Programs
12. **Emergency Preparedness**
13. Environmental Health
14. Family Planning
15. Food Safety
16. **Genomics**
17. **Global Health**
18. Health Communication **and Health IT**
19. **Healthcare-Associated Infections**
20. **Hearing and Other Sensory or Communication Disorders**
21. Heart Disease and Stroke
22. HIV
23. Immunization and Infectious Diseases
24. Injury and Violence Prevention
25. Maternal, Infant and Child Health
26. Medical Product Safety
27. Mental Health and Mental Disorders
28. Nutrition and Weight Status
29. Occupational Safety and Health
30. **Older Adults**
31. Oral Health
32. Physical Activity and Fitness
33. Public Health Infrastructure
34. **Quality of Life and Well-Being**
35. Respiratory Diseases
36. Sexually Transmitted Diseases
37. **Social Determinants of Health**
38. Substance Abuse
39. Tobacco Use
40. Vision

# Healthy California 2020

Given the encyclopedic nature of HP 2020:

- What are the priorities in tracking HP2020 Topic Areas?
- What are the priorities in tracking HP2020 Objectives

Request:

- Advice from PHAC with respect to scope of HP2020 Topic Areas and Objectives that would be the best focus of scarce resources for CDPH to target in the context of Healthy California 2020.

# PHAC Priority Criteria for HP2020 Objectives

1. **Overall burden** – is it big enough to have a significant impact on population?
2. Will it significantly impact **inequities** – improving health of the disadvantaged
3. **Synergy** – multi-component interventions that are most effective
4. **Feasibility** – includes cost effectiveness, timeframe, accountability, absolute cost, and political will

# PHAC Priority Criteria for HP2020 Objectives (cont'd)

5. **Net health benefits** – comparative effectiveness of different interventions to improve the disadvantaged
6. **Cross-sectoral collaboration** – co-benefits
7. Creative and innovative – does it address **upstream determinants?**
8. Does it build on **existing capacities** – impact community resilience?

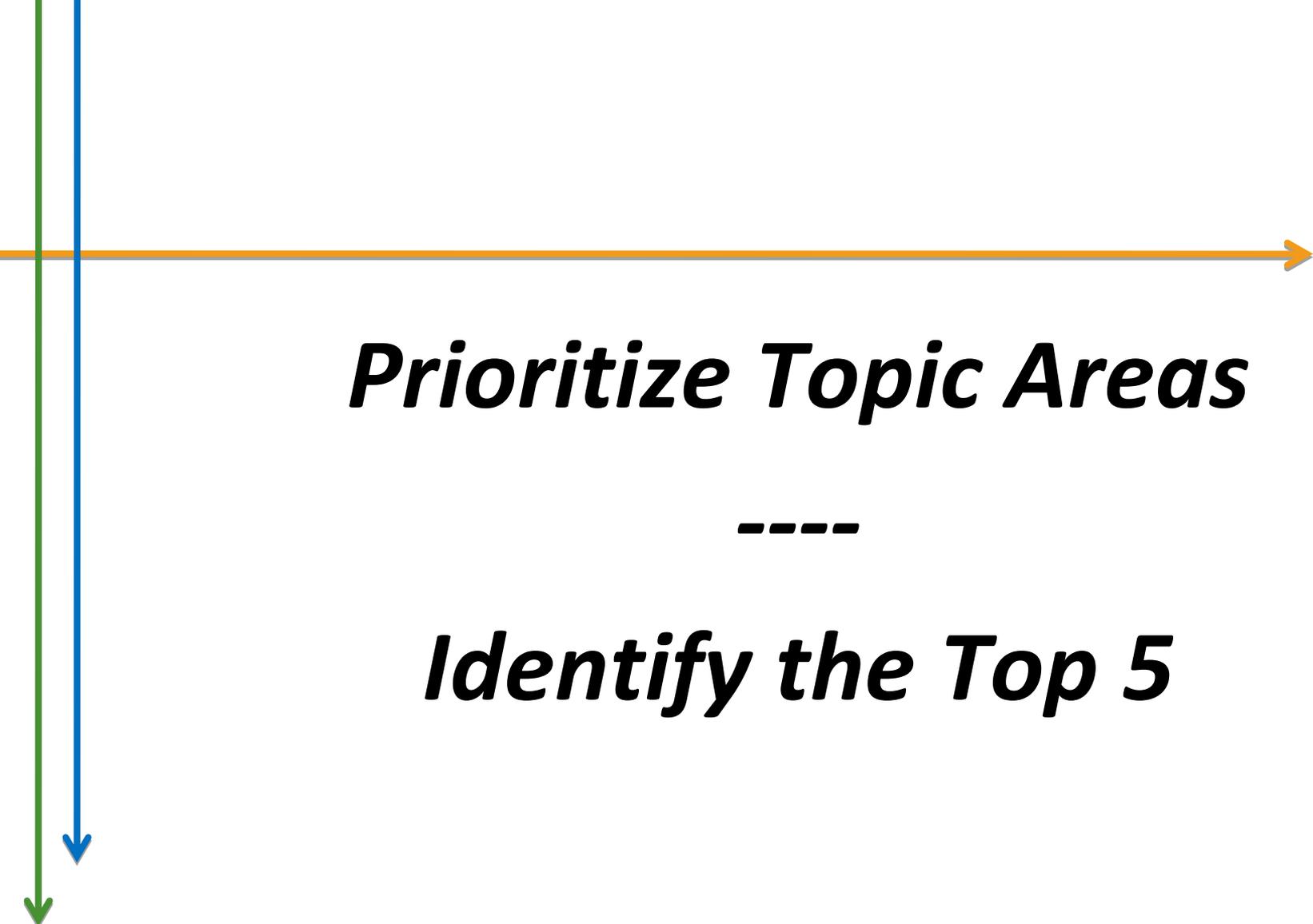
# Summary of Criteria

## PHAC Criteria

1. Overall burden
2. Impact on inequities
3. Synergy
4. Feasibility
5. Net health benefits
6. Cross-sectoral collaboration
7. Creative and innovative
8. Build on existing capacities

## CDPH Criteria

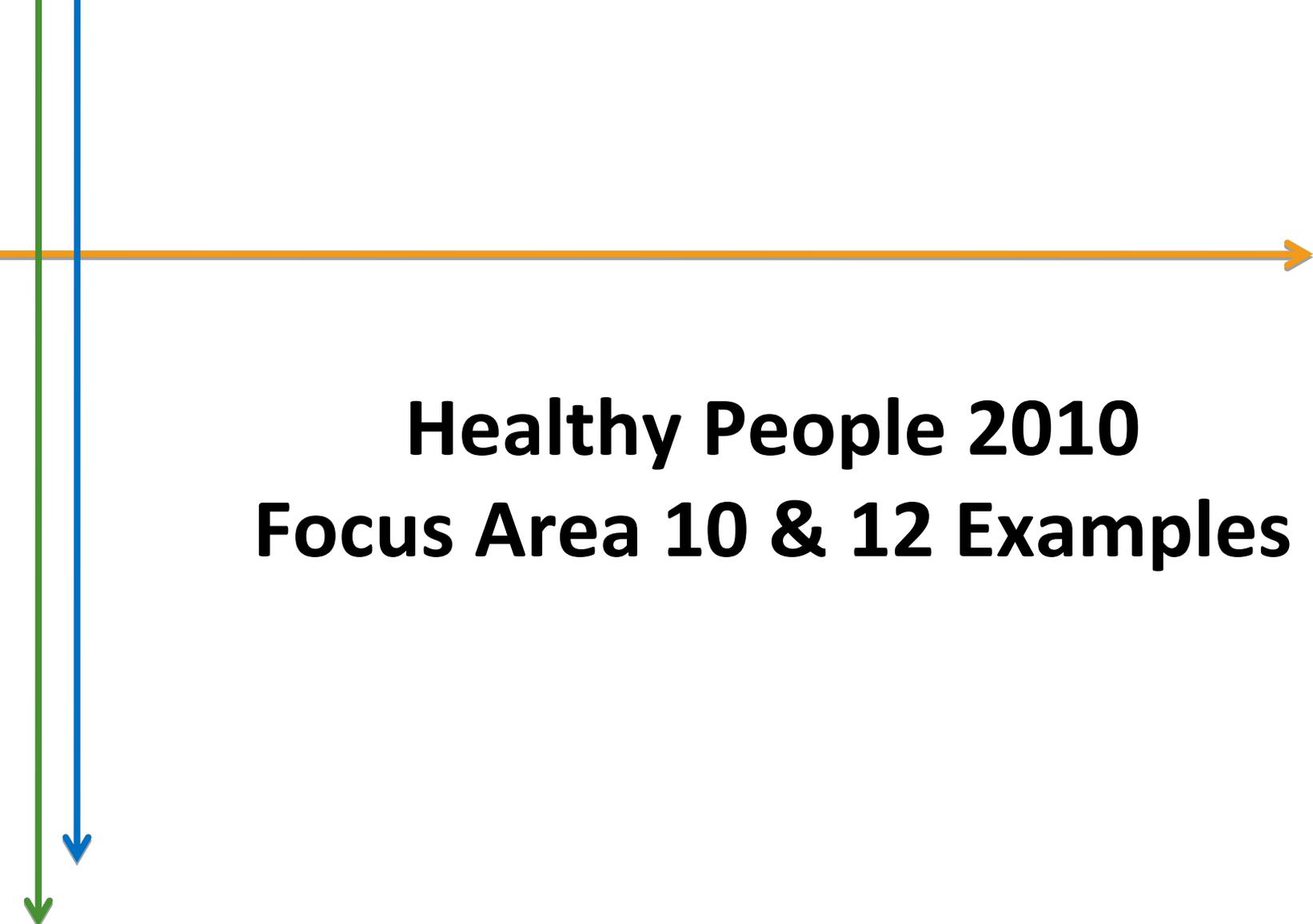
1. Overall burden of disease
2. Reduce health inequities
3. Preventable or reducible
4. Cost effectiveness



***Prioritize Topic Areas***

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***Identify the Top 5***



# Healthy People 2010 Focus Area 10 & 12 Examples



# Focus Area 12: Heart Disease and Stroke

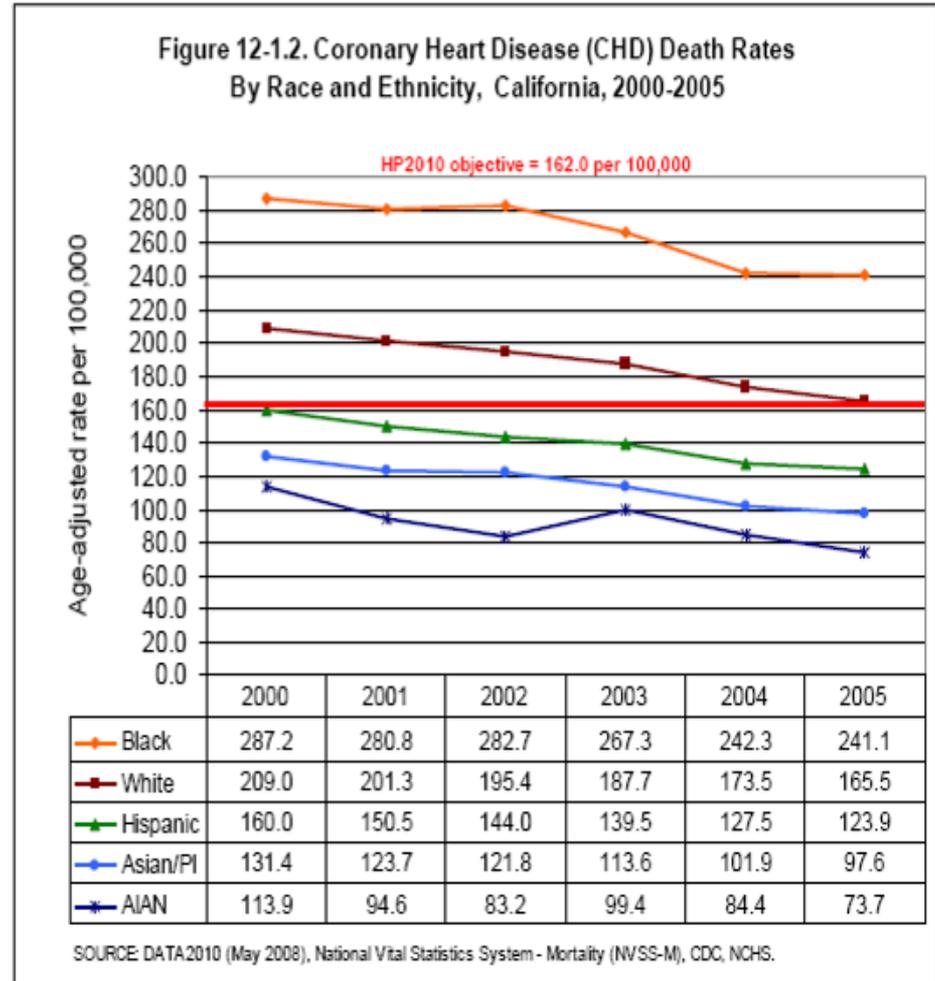
*(heart disease, heart failure, and stroke)*

## Burden of Disease

- Leading cause of death in California, accounting for more than 73,000 deaths (about one-third of the total) in 2004
- Annually, there are:
  - about 575,000 heart disease-related hospital discharges (a measure of morbidity),
  - about 200,000 stroke-related hospital discharges, and
  - about 350,000 heart failure-related hospital discharges
- Annual cost to California exceeded \$48 billion in 2006

# Landscape

- 16 Objectives
- CDPH Tracked Four Objectives



# Focus Area 12 Objectives, cont'd (1 of 4)

- Objective 12-1. Reduce coronary heart disease deaths  
**Tracked – towards/achieving target**
- Objective 12-2. Increase the proportion of adults aged 20 years and older who are aware of the early warning symptoms and signs of a heart attack and the importance of accessing rapid emergency care by calling 911  
**No state data source**
- Objective 12-3. Increase the proportion of eligible patients with heart attacks who receive timely artery-opening therapy from symptom onset **No state data source**
- Objective 12-4. Increase the proportion of persons trained in cardiopulmonary resuscitation (CPR) in the past year  
**No state data source**

# Focus Area 12 Objectives, cont'd (2 of 4)

- Objective 12-5. Increase the proportion of eligible persons with witnessed out-of-hospital cardiac arrest who receive their first therapeutic electrical shock within 6 minutes after collapse recognition **No state data source**
- Objective 12-6. Reduce hospitalizations of older adults with congestive heart failure as the principal diagnosis **Tracked – towards/achieving target**
- Objective 12-7. Reduce stroke deaths **Tracked – towards/achieving target**
- Objective 12-8. Increase the proportion of adults who are aware of the early warning symptoms and signs of a stroke and the importance of accessing rapid emergency care by calling 911 **No state data source**

# Focus Area 12 Objectives, cont'd (3 of 4)

- Objective 12-9.Reduce the proportion of adults with high blood pressure **No state data source**
- Objective 12-10.Increase the proportion of adults with high blood pressure whose blood pressure is under control **No state data source**
- Objective 12-11.Increase the proportion of adults with high blood pressure who are taking action (for example, losing weight, increasing physical activity, or reducing sodium intake) to help control their blood pressure **No state data source**
- Objective 12-12. Increase the proportion of adults who have had their blood pressure measured within the preceding 2 years and can state whether their blood pressure was normal or high **No state data source**

# Focus Area 12 Objectives, cont'd (4 of 4)

- Objective 12-13. Reduce the mean total blood cholesterol levels among adults **No state data source**
- Objective 12-14. Reduce the proportion of adults with high total blood cholesterol levels **No state data source**
- Objective 12-15. Increase the proportion of adults who have had their blood cholesterol checked within the preceding 5 years **Tracked – no trend**
- Objective 12-16. Increase the proportion of persons with coronary heart disease who have their LDL-cholesterol level treated to a goal of less than 100 mg/dL  
**No state data source**

# Objectives Previously Tracked in CA

12-1: Coronary Heart Disease Deaths

12-6a: Congestive Heart Failure Hospitalizations, Ages 65-74

12-6b: Congestive Heart Failure Hospitalizations, Ages 75-84

12-6c: Congestive Heart Failure Hospitalizations, Ages 85 & Older

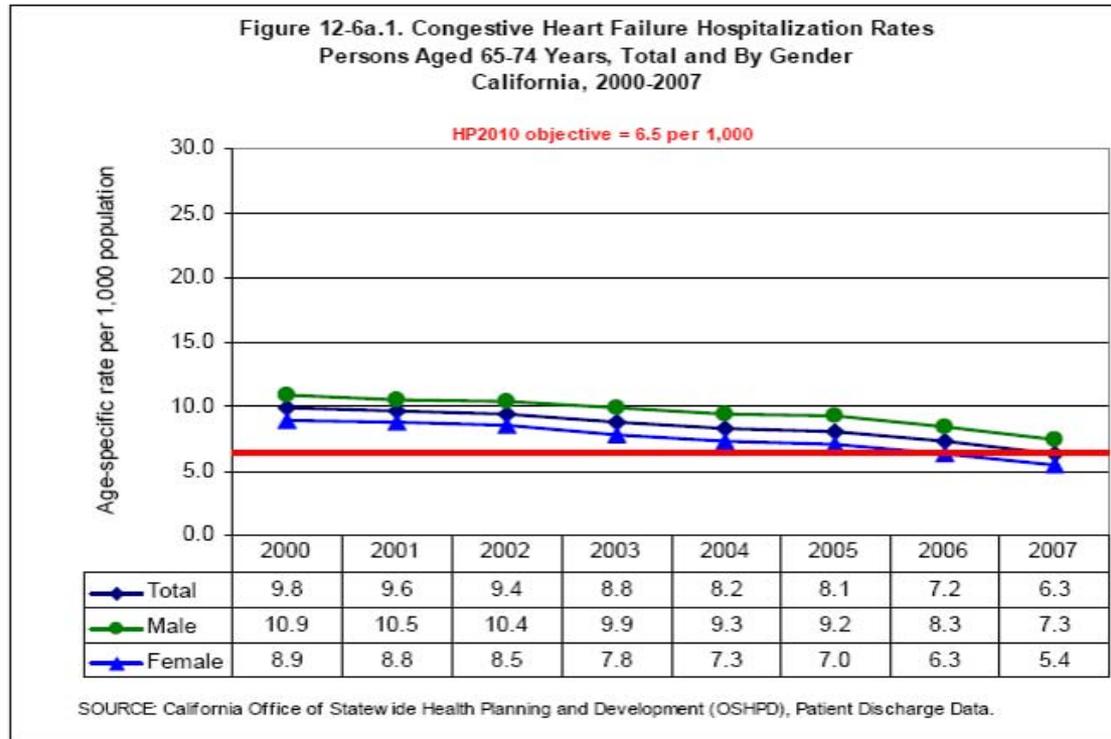
12-7: Stroke Deaths

12-15: Blood Cholesterol Checked Within Past Five Years

## Focus Area 12: Heart Disease and Stroke

**Objective 12-6a. Reduce the hospitalization rate for congestive heart failure. Target = 6.5 per 1,000 population aged 65 to 74 years [State Data Source: California Office of Statewide Health Planning and Development (OSHPD), Patient Discharge Data]**

Hospital discharge data indicate a statistically significant decline in congestive heart failure hospitalization rates among persons aged 65-74 from 9.8 per 1,000 population in 2000 to 6.3 per 1,000 in 2007 (Figure 12-6a.1, Table 12-6a). This objective has been achieved for all Californians aged 65-74 years as of 2007.



# State Data Sources for Focus Area 12

- OSPHD Patient Discharge Data (for hospitalizations)
- Death Certificate Data (for deaths)
- BRFSS (cholesterol checks)



# HP2020 Proposed Objectives

## Objectives Retained But Modified From Healthy People 2010

- HDS HP2020–9: Increase the proportion of adults aged 20 years and older who are aware of and respond to early warning symptoms and signs of a stroke.
- HDS HP2020–10: (Developmental) Increase the proportion of out-of-hospital cardiac arrests in which appropriate bystander and emergency medical services (EMS) were administered.
- HDS HP2020–11: (Developmental) Reduce hospitalizations of older adults with heart failure as the principal diagnosis.
- HDS HP2020–12: Increase the proportion of adults aged 20 years and older who are aware of, and respond to, early warning symptoms and signs of a heart attack.
- HDS HP2020–13: Reduce the proportion of persons in the population with hypertension.
- HDS HP2020–14: Increase the proportion of adults with prehypertension who meet the recommended guidelines for:
- HDS HP2020–15: Increase the proportion of adults with hypertension who meet the recommended guidelines for:
- HDS HP2020–16: Increase the proportion of persons with coronary heart disease who have their low-density lipoprotein (LDL) cholesterol level at or below recommended levels.

# HP2020 Proposed Objectives

## Objectives Retained As Is From Healthy People 2010

- HDS HP2020–1: Reduce coronary heart disease deaths.
- HDS HP2020–2: Increase the proportion of eligible patients with heart attacks who receive timely artery-opening therapy from symptom onset.
- HDS HP2020–3: Reduce stroke deaths.
- HDS HP2020–4: Increase the proportion of adults with high blood pressure whose blood pressure is under control.
- HDS HP2020–5: Increase the proportion of adults who have had their blood pressure measured within the preceding 2 years and can state whether their blood pressure was normal or high.
- HDS HP2020–6: Reduce the mean total blood cholesterol levels among adults.
- HDS HP2020–7: Reduce the proportion of adults with high total blood cholesterol levels.
- HDS HP2020–8: Increase the proportion of adults who have had their blood cholesterol checked within the preceding 5 years.

# HP2020 Proposed Objectives

## Objectives New to Healthy People 2020

- HDS HP2020–17: (Developmental) Increase overall cardiovascular health in the U.S. population.
- HDS HP2020–18: (Developmental) Increase the proportion of adults with hypertension who are taking the recommended medications to lower their blood pressure.
- HDS HP2020–19: (Developmental) Increase the proportion of adults with elevated LDL cholesterol who have been advised by a health care provider to:
- HDS HP2020–20: (Developmental) Increase the proportion of adults with elevated LDL cholesterol who meet the recommended guidelines for:
- HDS HP2020–21: (Developmental) Reduce incidence rates for heart disease and stroke.
- HDS HP2020–22: Increase 30-day survival rates following first occurrence of heart disease and stroke.
- HDS HP2020–23: (Developmental) Reduce the recurrence rates among survivors of heart disease and stroke.

## Objectives Archived From Healthy People 2010

- HP2010 12-5: (Developmental) Increase the proportion of eligible persons with witnessed out-of-hospital cardiac arrest who receive their first therapeutic electrical shock within 6 minutes after collapse recognition.



# Focus Area 10: Food Safety



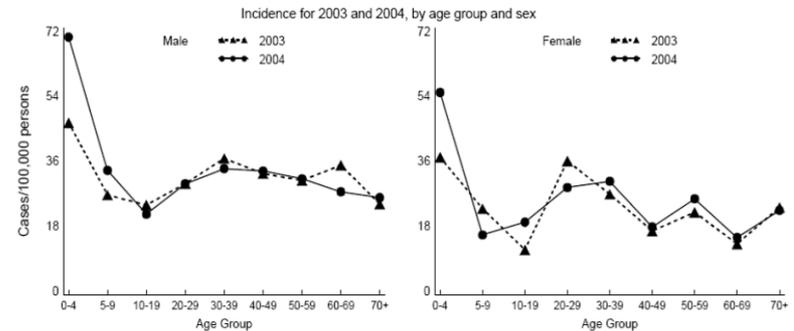
## Burden of Disease

- Estimated 76 million illnesses, 325,000 hospitalizations, and 5,000 deaths each year may be associated with microorganisms in food when unreported cases accounted for
  - Estimated cost of over \$3 billion each year for hospitalizations due to foodborne illnesses
- 

# Landscape

- 5 Objectives
- CDPH Tracked Three Objectives

Figure 10-1a. *Campylobacter* Case Rates, California



SOURCE: FoodNet Surveillance Report for 2004, CDC, Emerging Infections Program (EIP).

California Department of Public Health  
Last update: 02/19/08

Healthy California 2010

# Focus Area 10 Objectives

- 10-1. Reduce infections caused by key foodborne pathogens. **Tracked – mixed trend**
- 10-2. Reduce outbreaks of infections caused by key foodborne bacteria. **Tracked – mixed trend**
- 10-3. Prevent an increase in the proportion of isolates of Salmonella species from humans and from animals at slaughter that are resistant to antimicrobial drugs. **Dropped from HP2010**

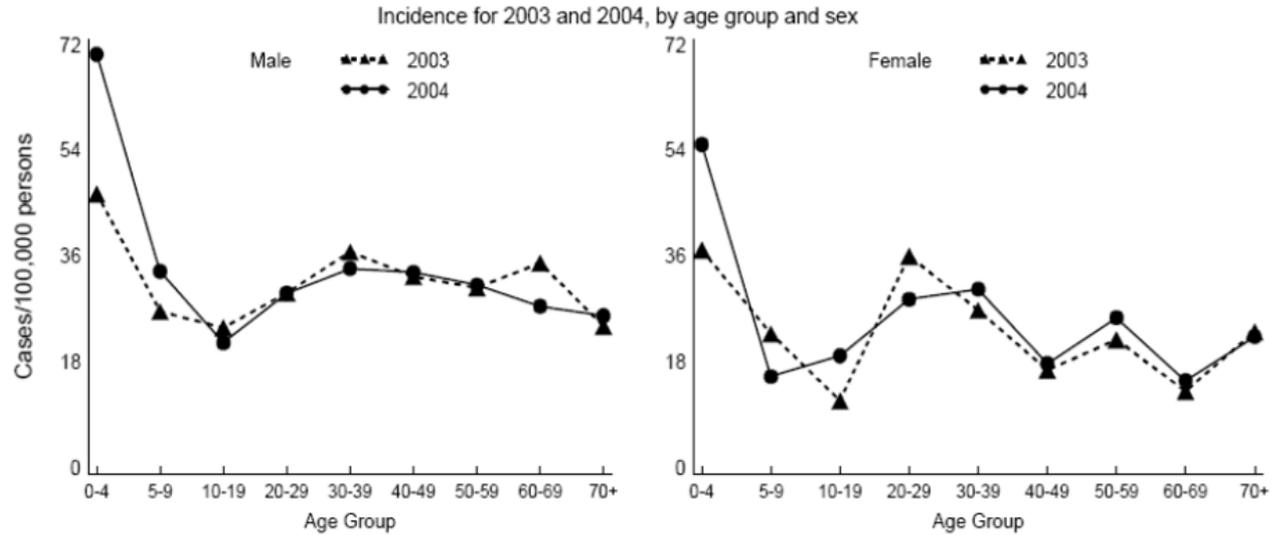
# Focus Area 10 Objectives, cont'd

- 10-4. Reduce deaths from anaphylaxis caused by food allergies. **Tracked – no target specified by HP2010**
- 10-5. Increase the proportion of consumers who follow key food safety practices. **No state data source**
- 10-6. Improve food employee behaviors and food preparation practices that directly relate to foodborne illnesses in retail food establishments. **No state data source**
- 10-7. Reduce human exposure to organophosphate pesticides from food. **Dropped from HP2010**

# Objectives Previously Tracked in CA

- 
- 10-1. Reduce infections caused by key foodborne pathogens: Campylobacter species, E. Coli O157:H7, Listeria monocytogenes, Salmonella species
  - 10-2. Reduce outbreaks of infections caused by key foodborne bacteria: E. Coli O157:H7, Salmonella serotype Enteritidis
  - 10-4. Reduce deaths from anaphylaxis caused by food allergies.

Figure 10-1a. *Campylobacter* Case Rates, California



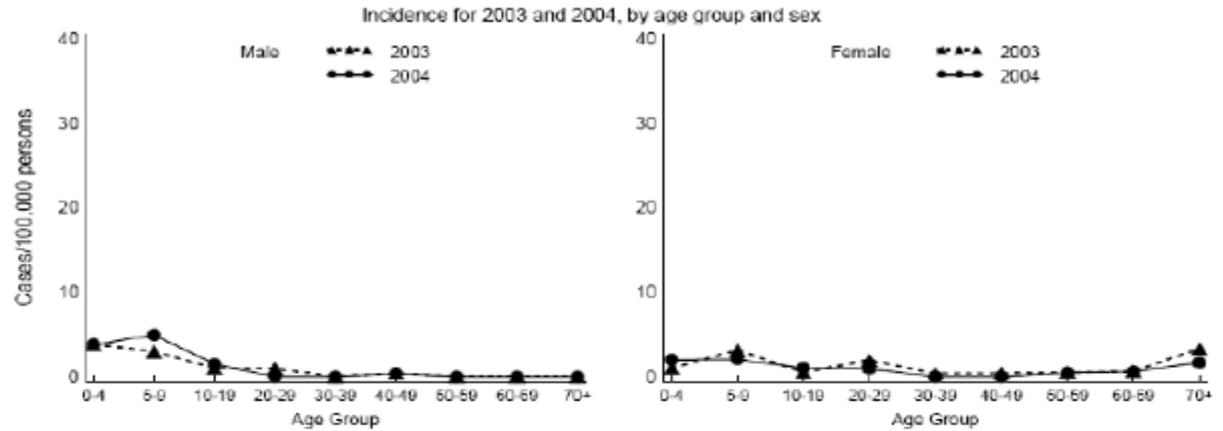
SOURCE: FoodNet Surveillance Report for 2004, CDC, Emerging Infections Program (EIP).

California Department of Public Health  
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Healthy California 2010

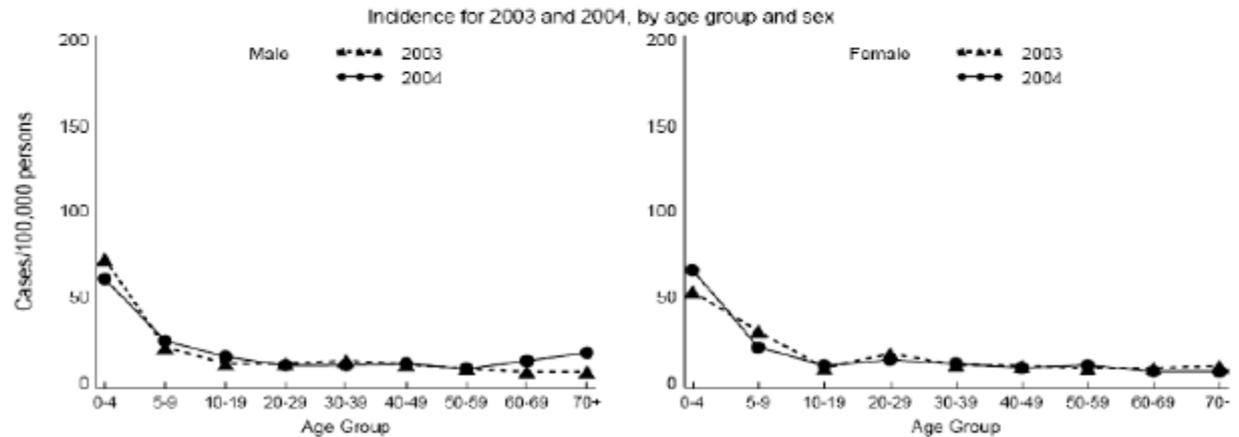


**Figure 10-1b. Shiga Toxin-Producing *Escherichia coli* (STEC O157) Case Rates, California**



SOURCE: FoodNet Surveillance Report for 2004, CDC, Emerging Infections Program (EIP).

**Figure 10-1d. *Salmonella* Species Case Rates, California**



SOURCE: FoodNet Surveillance Report for 2004, CDC, Emerging Infections Program (EIP).

# Data Sources for Focus Areas

- FoodNet Surveillance Report (from Emerging Infections Program)
- Confidential Morbidity Reports
- Death Certificate Data (includes deaths from food allergies)

# HP2020 Proposed Objectives

## Objectives Retained As Is From Healthy People 2010

- FS HP2020–1: Reduce severe allergic reactions to food among adults with a food allergy diagnosis.
- FS HP2020–2: (Developmental) Improve food-employee food preparation practices that directly relate to foodborne illnesses in retail food establishments.

## Objectives Retained But Modified From Healthy People 2010

- FS HP2020–3: Reduce infections caused by key pathogens commonly transmitted through food.
- FS HP2020–4: Reduce infections associated with foodborne outbreaks due to pathogens commonly transmitted through food.
- FS HP2020–5: Prevent an increase in the proportion of nontyphoidal *Salmonella* and *Campylobacter jejuni* isolates from humans that are resistant to antimicrobial drugs.
- FS HP2020–6: Increase the proportion of consumers who follow key food safety practices.

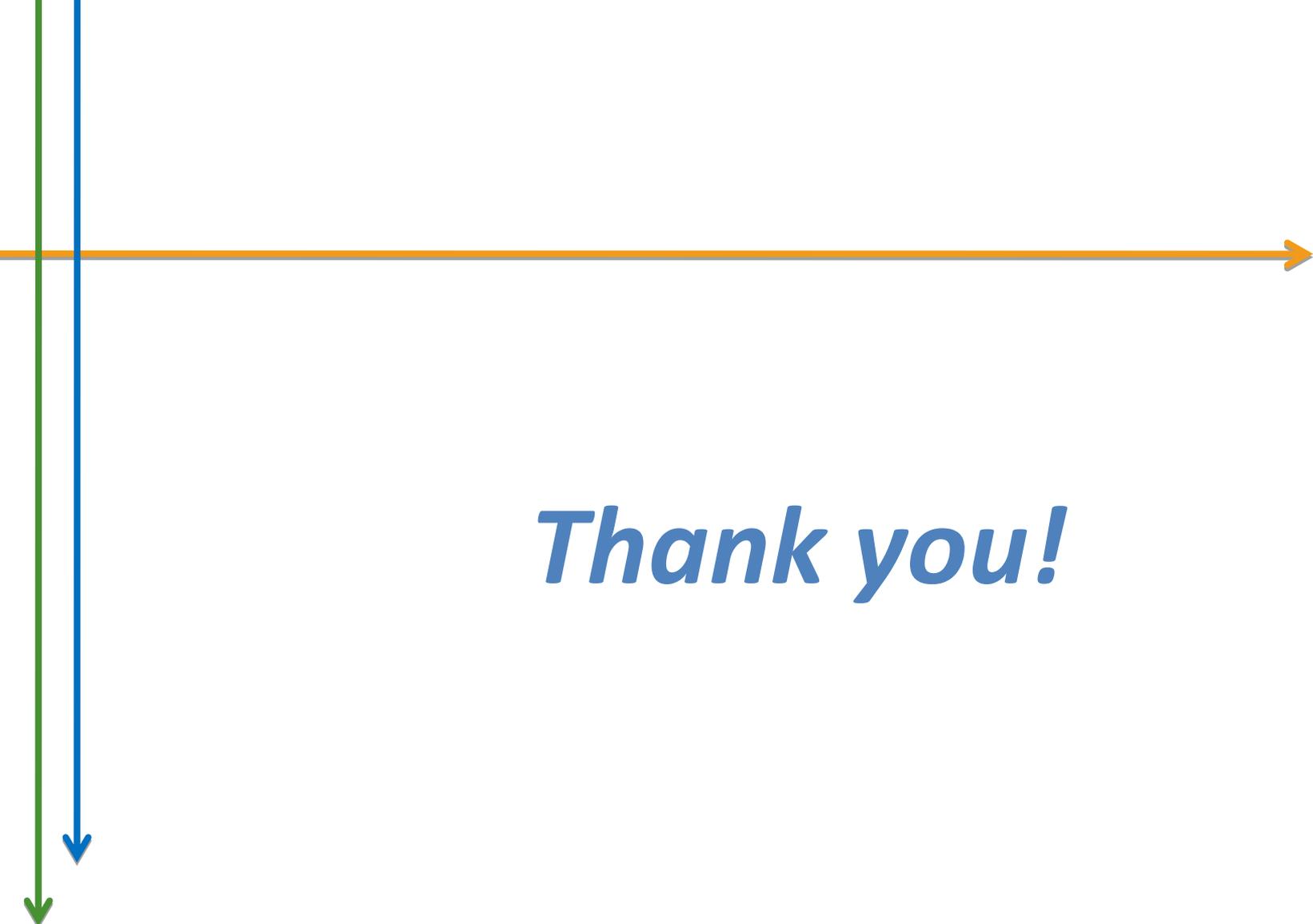
# HP2020 Proposed Objectives

## Objectives New to Healthy People 2020

- FS HP2020–7: Reduce the number of outbreak-associated infections caused by food commodity group:
- FS HP2020–8: Reduce contamination of meat and poultry products by foodborne pathogens:
- FS HP2020–9: (Developmental) Increase the number of States that have prohibited sale or distribution of unpasteurized dairy products. (as defined by FDA, unpasteurized liquid milk and cheeses aged < 60 days).

## Objectives Archived From Healthy People 2010

- HP2010 10-4a: Reduce deaths from severe food allergies.



*Thank you!*

