



Impacting Population Health 2014: *Connecting Local Health Priorities with Healthy Kansans 2020*

Southeast Regional Meeting Summary Chanute, Kansas

I. Attendance Summary

Key stakeholders from across the state were invited to participate in a series of regional public health meetings to discuss connecting local community health assessments and improvement plans with Healthy Kansans 2020 (HK 2020), the state health assessment and improvement plan. Attendance from a cross-section of community agencies and organizations with involvement in leading/participating in community health assessment and improvement planning efforts was highly encouraged. The attendance summary from the Southeast Regional Meeting held in Chanute, Kansas, on April 24 is provided below.

20 attendees

- Local Health Departments:
 Allen, Bourbon, Chautauqua, Crawford, Elk, Neosho, SEK Multi-County, Wilson
- Community Health Center of Southeast Kansas
- University of Kansas Medical Center
- Kansas Public Health Institute Consultant
- Neosho Memorial Regional Medical Center
- SEK Education Service Center
- United Health Care Plan KS
- Neosho County Commissioner
- Kansas Department of Health and Environment

II. Local Objectives/Strategies

Meeting attendees were asked to identify and briefly describe at least one local objective/strategy that their community is currently working to develop and/or implement. For each objective/strategy attendees were asked to complete a series of questions, answers are summarized below. Attendees at the Southeast Regional Meeting shared a total of 42 objectives/strategies.

Does this local Objective/Strategy align with a HK2020 Strategy?	
<i>HK2020 Priority Strategies</i>	
Healthy Living-1	16
Healthy Living-2	3
Healthy Communities-1	9
Access to Services-1	0
Access to Services-2	8
<i>HK2020 Other Strategies</i>	

Healthy Living-3	0
Healthy Living-4	0
Healthy Communities-2	0
Healthy Communities-3	0
Access to Services-3	0
Does not fit in any of the identified statewide strategies	5
Is this Objective/Strategy identified in CHA/CHIP?	
We have not completed a CHA/CHIP	12
Yes, it was identified in the CHA/CHIP	10
This need was identified in another process	14
No. CHA completed, but this strategy was not identified as a priority	5
Work on this Objective/Strategy is:	
In planning stages of development	12
In the first 0-6 months of implementation	7
>6 months of implementation	22

III. Round Table/Report Out Discussion

Attendees participated in a series of round table exercises to discuss the successes (What is working?) and challenges (What barriers have you encountered?) to addressing each of the shared objectives/strategies. A summary of the round table discussions is provided below. (Numbers show the frequency that an item was mentioned; no number indicates the item was mentioned once.)

What is working?	
Strong partnerships (7)	Healthy desire for family/community to enjoy physical activity together
Community buy-in (6)	Clear action plan/made tangible
Momentum (4)	Incentives
Successful community gardens (4)	Working with smokers through clinics, WIC, and hospitals
National champion (3)	CPOE implementation
EBT at farmers markets being used (3)	Changed menu options in hospital cafeteria
Active providers (3)	Increased classes in fitness center
New community trails (3)	Wrapping around the family
Collaboration of organizations (3)	School nurse active in student immunizations
Education to providers (2)	First rural partner in Wesley's telehealth stroke neurology network
1:1 wrap around (2)	Able to keep patient in local hospital & decrease unnecessary transfers
Met Meaningful Use Stage One (2)	Able to link Emergency Department provider, patient and neurologist through use of stroke robot/computer
City resources made available	Working with school employees
Fundraisers	Fresh food in available in cafeteria at all times
Clean indoor air	Added exercise room in hospital
Clinic/staff engagement	Increased free education available for citizens on exercise/nutrition
Now have a small farmers market	New system integration

What barriers are you encountering in getting started or making progress?	
Funding (14)	Identifying resources

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Community buy-in/ownership (11)	Partnering with schools
Language barriers (6)	Time
Building/maintaining partnerships (6)	Keeping focus
Limited media options/communication (5)	Cost of implementation and maintenance for HER
Creating consistent message (3)	Ease of use
Cultural competencies (3)	Making healthy choices- change
Inconsistent/cancelled meetings (3)	People not willing to stop smoking
Lack of education (3)	Not much use of KHI exchange yet
New to the county (2)	Identifying roles/responsibilities
Different systems among providers (2)	Some don't want to spend money
Volunteer help (2)	Misinformed parents
Transportation (2)	Reimbursement (tele-stroke)
Teen apathy (2)	Probable waste
Staffing (2)	Trail upkeep
Health literacy	Long process with many steps (PCMH)

IV. Local Issues Not Addressed by HK2020

Attendees were asked to identify public health issues not included in the state plan which are of interest at the local level. A summary of issues is provided below.

Which areas are not being addressed?	
Dental care	Reducing poverty – (generational) difficult to define actions
Telemed, etc. - not well known locally	Health literacy – not a well-defined intervention, delivery
Alternative reimbursement models (outside KanCare) for care coordination etc.	EHRs limited in public health due to cost, inability to connect hospital, large providers but not public health, pharmacy, small providers
Teen pregnancy prevention program	Oral health prevention-fluoride
Youth alcohol task force	Friends 4 Life – cancer support
Partner treatments	Hand hygiene for schools
Church based nutrition education linked to job readiness skills	Spiritual counseling and support
Food pantries	Notifiable disease education
Bicycle safety	Breastfeeding