

BETTER HEALTH WORK GROUP

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GOALS:

- **ENCOURAGE HEALTHIER LIFESTYLES**
- **IMPROVE MATERNAL AND NEWBORN HEALTH**
- **MANAGE CHRONIC CONDITIONS**
- **INCREASE ACCESS TO BEHAVIORAL HEALTH**
- **PROMOTE HEALTH CARE DECISION PLANNING**

Participants-Better Health

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DICK WITTBERG

SARAH WOODRUM

JESSICA WRIGHT

CHRIS ZINN

MAIN FOCUS:

- **WOMEN' S MATERNAL / INFANT HEALTH**
- **HEALTH AND NUTRITION EDUCATION**
- **PUBLIC HEALTH**
- **DISEASE PREVENTION / MANAGEMENT**

POPULATION FOCUS



Maternal &
Infant
Health (0-
4 years)



Child &
Adolescent
Health (5-
17 years)

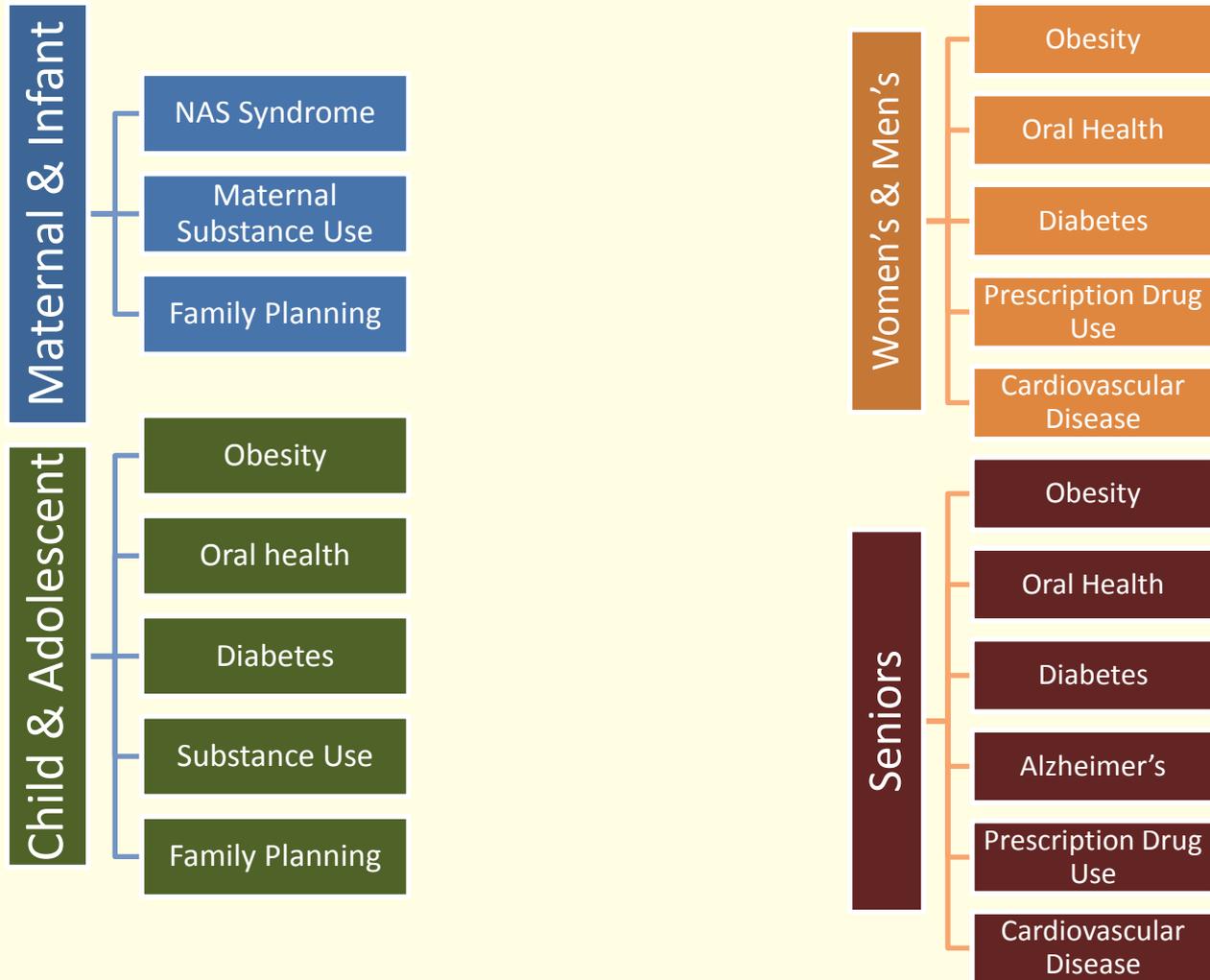


Women's
& Men's
Health (18-
61 years)



Senior
Health
(62 years &
older)

SPECIFIC OUTCOMES BY POPULATION



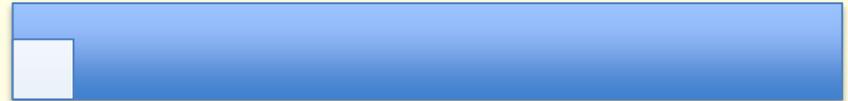
OBJECTIVES

Identify risks and contributing factors of targeted health outcomes with ongoing assessments



- Review existing data systems to identify evidence-based practices, collaborations, communications.
- Review existing programming & data sources to identify strengths & gaps across offerings
- Establish outcomes-based culture by increasing access to this evidence
- Establish infrastructure for reviewing data collected & identify next steps
- Establish infrastructure for coordinating communication about the results of this process to all stakeholders

Increase evidence based knowledge and emphasize prevention model culture shift



- Provide guidance, where appropriate, in order to influence and improve behavior.
- Identify follow-up care opportunities and methods.
- Advocate for insurance support for evidence based prevention.

Presentations To Date

- *Drug Free Moms and Babies – Janine Breyel*
- *WV Birth Scores Project – Candice Hamilton*
- *Medical Home – Chris Koller*
- *WV DHHR Bureau for Public Health – Public Health Assessment – Amanda McCarty*
- *Childhood Obesity Prevention Program – Michael Adelman*
- *WV Oral Health Program – Jason Roush and Shaylee Mehta*
- *WV Healthy Kids & Families Coalition (Try This Initiative) – Stephen Small & Kate Long*
- *WV State Health Improvement Plan (SHIP) – Amanda McCarty*
- *HealthyKids Project – Jamie Jeffrey*
- *Regional Wellness Specialist Network – Cybele Boehm & Teresa Mace*
- *School Health Services & Community Schools – Rebecca King & Paula Fields*

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Project A – identifying evidence-based programming

Project Purpose:

- Review the national literature and current logs in the Collaborative Inventory noting evidence of evaluation and effectiveness for each program.
- Review existing health utilization data to identify most effective programming in the target areas.

Project Charge:

- Develop criteria and parameters for review, conduct review, work closely with Jeremiah Staples to add information to the Collaborative Inventory when finalized
- Develop short document with recommendations for moving forward and summary points for evidence-based programming.

*Subcommittee Size:*5-7 members minimum

Project B – Recommendations for modifying existing programs for specific populations

Project Purpose:

- Review national, regional, and local literatures and databases to identify programs that are either evidence-based OR
- practice-based (programs that have been sustained and known to be effective for our population but may not have literature/publications supporting them)

Project Charge:

- Develop criteria for the review, conduct review, and work closely with Jeremiah Staples to add information to the Collaborative Inventory when finalized.

Subcommittee Size: 5-7 members minimum

Project C – recommendations for disseminating research findings to practitioners, policy makers, and community members

Project Purpose:

- Review multiple sources of information to identify best ways to share the latest local, regional, and national research
- Focus on targeted health issues and the following audiences: policy makers, health providers, payers, and community members.

Project Charge:

- Review literature for current guidelines, note needs and requests of all partners in terms of what information is needed, the best way to communicate that information, etc.
- Develop a final guideline/manual for all partners to use to increase communication and share work across areas.

Subcommittee Size: 5-7 members minimum

Project D – identifying a process and needs for identifying shared quality measures

Project Purpose:

- Collect data and other information needed to identify shared quality measures for the state

Project Charge:

- Identify top five diagnoses, procedures, drugs (based on existing data) based on total annual cost, # of distinct individuals incurring those costs, etc.
- Review funded, evidence-based programming within the state (product of other project) and outcomes of those programs

Subcommittee Size: Better Care/Better Health Collaborative Project

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- **CONTINUE TO REVIEW EXISTING PROGRAMMING VIA PRESENTATIONS**

- **PROJECTS A-D**
 - Finalize composition
 - Outline approach
 - Collect data and other information
 - Complete charge
 - Disseminate findings

- **IDENTIFY BEST PRACTICES FOR REQUESTING, COLLECTING, ANALYZING, AND DISSEMINATING STATE DATA FOR RELATED PROJECTS**

- **BEGIN TO FOCUS ON DIRECT INFORMATION TO PATIENTS/COMMUNITY ABOUT PREVENTION AND EVIDENCE-BASED PRACTICES**

QUESTIONS?