



VIRGINIA'S **Plan For Well-Being**

2021 Update

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INTRODUCTION

Virginia’s State Health Improvement Plan (SHIP), known as the Plan for Well-Being outlined a path for improving the health and well-being of Virginians by 2020 through four aims, 13 goals, and 29 measures. Virginia’s Plan for Well-Being laid out the foundation for giving everyone a chance to live healthy life by: (1) Factoring health into policy decisions related to education, employment, housing, transportation, land use, economic development, and public safety; (2) Investing in the health, education, and development of Virginia’s children; (3) Promoting a culture of health through preventive actions; and (4) Creating a connected system of healthcare. The measure of success is that the percent of adults in Virginia who report positive well-being increases. The previously submitted 2020 Annual Report provided the updated figure for each measure in the Plan for Well-Being.

In Virginia, as in many states, the State Health Assessment (SHA) and SHIP are linked and part of one continuous process. With the expiration of the Plan for Well-Being, Virginia has embarked on conducting a new SHA. This annual report summarizes information regarding the progress of the Virginia Department of Health (VDH) towards the 2021 SHA which will serve as the foundation for the new Plan for Well-Being, Virginia’s SHIP.

STATE HEALTH ASSESSMENT

The Public Health Accreditation Board defines a SHA as “...a collaborative process of collecting and analyzing data and information for use in educating and mobilizing communities, developing priorities, garnering resources and planning actions to improve the population’s health.” A comprehensive SHA supports a state’s ability to identify the status of certain health outcomes and understand where there is need for improvement. This is one of the 10 essential public health services-- to assess health status of populations (Figure 1).



Figure 1.

Note. From The Public Health National Center for Innovations

VDH determined that the SHA would be conducted utilizing the Mobilizing for Action through Planning and Partnerships (MAPP) framework from the National Association of County and City Health Officials (NACCHO). The MAPP framework (Figure 2) is a community-driven strategic planning tool that utilizes six phases to better understand a given community. The process is directed by a steering committee comprised of public and private sector partners.

VDH convened a diverse group of stakeholders and communities to gain a better understanding of the strengths and needs of Virginians and to identify strategies that lead to high impact and equitable health outcomes with the lowest sustainable efforts. VDH began the preliminary work of conducting the SHA in November 2019 with the inaugural meeting of the SHA/SHIP Advisory Council.

The Advisory Council (see Appendix A) was charged to develop recommendations on public health priorities, goals, objectives, and strategies to improve the health of all Virginians and to make Virginia the healthiest state in the nation. The Advisory Council identified the following principles to guide the development of the SHA:

- Partnership focused
- Diverse and inclusive
- Transparent
- Innovative
- Data driven
- Equitable and just

While a SHA describes the health of the state community, it is also important to be able to draw out the health concerns of communities by age, race/ethnicity, socioeconomic status, disease status, gender, and geographic region from within the larger state community.¹ This analysis aids in identifying health disparities and the inequities which result in disparate health outcomes. The Advisory Council determined that the SHA would be guided by health equity as a foundation.



Figure 2

Note. From The National Association of County and City Health Officials

¹ Association of State and Territorial Health Officials. (2018). *State Health Assessment Guidance and Resources*. Arlington: Association of State and Territorial Health Officials.

The Advisory Council reviewed and responded to a list of indicators proposed by VDH based on a review of other state SHAs. VDH began the process of finalizing the indicators to be used in the SHA based on input from the Advisory Council and consideration of the following criteria:

- Magnitude/seriousness of health issue
- Ability to affect change
- Health equity - can we measure disproportionate effect between subpopulations?
- Root cause/social determinants of health (SDOH) - measure SDOH that impact multiple health outcomes
- Quality of the data
- Trend data available?
- Comparison data available?

VDH began planning for a presentation of agreed upon indicator data for the Advisory Council. This interactive meeting would provide an opportunity for the Advisory Council to discuss the data with subject matter experts and data stewards to support a better understanding of the data and identified trends. The meeting, set to occur in March 2020, was cancelled as a result of the COVID-19 pandemic.



Figure 3
Note: From VDH

VDH efforts related to coordinating the SHA remained on hold until April 2021 when the VDH SHA/SHIP Manager position was filled. VDH resumed the coordination of conducting a SHA per the process identified below (Figure 3).

As the COVID-19 pandemic significantly stressed public health systems in Virginia and throughout the country, gaps in health care for underserved and vulnerable populations were exposed. This combined with the disproportionate impact of COVID-19 on communities of color significantly raised the awareness of the impact of systemic racism on health. As a result of these lessons learned, VDH re-examined the work initiated on the SHA pre-pandemic to ensure the SHA would best reflect the Virginia of today.

The membership of the Advisory Council has been expanded to include more diverse representation and geographic variety. The Advisory Council represents an array of perspectives from multiple agencies within state government, and groups and organizations from outside state government including, but not limited to, hospitals and health care providers, academic institutions, statewide non-profits, and organizations engaged in addressing health and equity in their communities.

VDH has also integrated work supported by the local health districts, the VDH strategic plan, the Office of Health Equity and the 2019 5-year Maternal and Child Health Needs Assessment into the planning process for the SHA. The results of the assessment will:

- Reflect and address the priorities of Virginians
- Be supported by community members and residents
- Include meaningful strategies and areas of focus
- Define clear and measurable outcomes
- Help inform strategic funding and resource allocation
- Demonstrate an intentional and thoughtful health equity approach

As part of the focus on equity and engaging underserved and underrepresented populations, the SHA will engage key populations of focus. These populations include lesbian, gay, bisexual, transgender, queer, intersex, and asexual (LGBTQIA) individuals, the immigrant population, disabled individuals, elderly, youth, and veterans.

DATA MEASURES AND INDICATORS

QUANTITATIVE DATA

Data analysts and epidemiologists at VDH have adjusted the data indicators that will comprise the SHA based on lessons learned during COVID-19 and continued feedback from the Advisory

Council. Where available, data will be stratified by race, gender, income, or education level. Data indicator categories include:

- Demographics
- Leading causes of death
- SDOH
- Access to care
- Chronic diseases and behavioral risk factors
- Mental health
- Alcohol and substance use
- Injury and violence
- Maternal and child health
- Environmental health
- Communicable diseases
- COVID-19

QUALITATIVE DATA

The qualitative data collection of the SHA will provide a deeper understanding of issues the residents of Virginia feel are important to the state and their respective communities. The qualitative data collection will address the following key areas of focus through a statewide survey, focus groups and key informant interviews:

- What is important to our State?
- How is quality of life perceived in our state?
- What assets do we have that can be used to improve community health?

A statewide survey was developed with input from the Advisory Council. The initial list of questions was compiled based on questions from the Advisory Council, questions from other state health assessments and questions from NACCHO's MAPP toolkit. This initial list of questions was sent to the advisory committee for input and guidance. A shared document was created to enable the Advisory Council members to view comments and engage in discussions for a period of two weeks. A final list of questions for the statewide survey has been created.

To assist in eliciting responses, a marketing campaign will promote the online survey to communities and organizations statewide as well as targeting the populations of focus. The survey will remain open for one month to collect responses.

STATE HEALTH ASSESSMENT TIMELINE

January 2022 Data Presentations, discussion, and prioritization

February 2022 Qualitative assessments complete

March 2022 Publish SHA, improvement strategy prioritization, and selection

STATE HEALTH IMPROVEMENT PLAN

A SHIP builds on the SHA’s identified issues to further optimize and prioritize work that is both responsive to the needs of the state’s populations and will make the greatest impact on health promotion and disease prevention.²

The SHIP will be used to set direction for the next five years for budgets, policies, and programs across VDH and by partners from the variety of sectors that contribute to health and equity. The SHIP is the strategic plan for partners to align efforts to address the selected high priorities for reducing inequities; it does not represent the totality of the work for improving each of the health outcomes for all Virginians.

The health improvement goals/outcomes will be broadly stated to include the whole population and indicators will be selected to measure progress on reducing disparities/inequities rather than changing the curve for the whole population. Individuals affected by inequity will be engaged in developing the strategies for improvement by reviewing the potential strategies, offering suggestions based on local knowledge, and identifying options for mobilizing partners.

The Advisory Council will continue to meet on a regular basis to provide overall direction to the development of Virginia’s new SHIP. The Advisory Council will ensure that both the process and product meet the goals of developing a plan for the state to improve population health and advance health equity, based on the best available data on population health trends combined with input from residents of Virginia.

The goal is to publish and implement the SHIP in May 2022.

² Association of State and Territorial Health Officials. (2019). *Developing a State Health Improvement Plan: Guidance and Resources*. Arlington: Association of State and Territorial Health Officials

APPENDIX A

SHA/SHIP Advisory Council Members

First Name	Last Name	Organization
Rochelle	Altholz	Department of Conservation and Resources
Sue	Armstrong	Virginia Housing Development Association
Chethan	Bachireddy	Department of Medical Assistance Services
Eric	Bendfeldt	Virginia Tech
Ruth	Bernheim	University of Virginia
David	Blount	Virginia Association of Planning District Commissioners
Catherine	Brisland	Sentara
Sandy	Chung	Pediatrician/Inova
Mark	Cole	Department of Transportation
Sean	Connaughton	Virginia Hospital and Healthcare Association (VHHA)
Christy	Connolly	Path Foundation
Patrick	Crute	Virginia YMCAs
Deborah	Davis	Virginia Commonwealth University Health
Heather	Fritz	EMS of Virginia
Sheryl	Garland	Virginia Commonwealth University Health
Kathy	Glazer	Virginia Early Childhood Foundation
Andrea	Gregg (on behalf of Duke Storen/PHV)	Department of Social Services
Nia	Harrison	Virginia Board for People with Disabilities
Sam	Hollins	Department of Education
Hamilton	Holloway	Families Forward Virginia
Reese	Jackson	Chesapeake Regional Medical Center
Emily	Keenum	Virginia Early Childhood Foundation
Marty	Kilgore	Virginia Foundation for Healthy Youth
Susie	Lee	Potomac Health Foundation

First Name	Last Name	Organization
Rachel	Lynch	Inova Health
Octavia	Marsh	Hanover Cares
Rufus	Phillips	Virginia Free Clinics
Erik	Rison	Virginia Chamber of Commerce
Travis	Staton	United Way of Southwest Virginia
Jeff	Stover	Department of Health
Rex	Taylor	Virginia State Police
Michelle	Taylor	Virginia Free Clinics
Audrey	Trussell	United Way
Bill	Harrison	Diversity Richmond
John	Maxwell	Virginia Department of Veterans Affairs
Jarene	Fleming	Breast Feeding Advisory Committee
Felica	Baez	Hanover County
Kelly	Cannon	VHHA