

Friday, February 5, 2016 1:30– 4:00 PM

<u>`Present:</u> Juana Ballesteros, Elissa Bassler, Vincent Bufalino, Bill Dart, Emily Hendel, Jennifer Herd, Cheri Hoots, Tom Hornshaw, Kathy Lahr, Terry Mason, CJ Metcalf, Cheryl Metheny, Joanie Padilla, Mark Pesyakhovich, Tiffanie Pressley, Karen Shoup, Shoeb Sitafalwalla, Patti Solano, Staci Wilson, Poonam Mahajan, Gail DeVito, Kenneth Campbell

<u>UIC MidAmerica Center for Public Health Practice (MCPHP) Staff:</u> Christina Welter, Guddi Kapadia, JenniferMcGowan, Geneva Porter

Agenda Item	Discussion/Updates	Action Items/Decisions Made	Responsibility / Deadline
Welcome/ Logistics	 Meeting took place in person at the IDPH offices in Springfield and Chicago via video conference call as well as conference call line. 		
Purpose	 Bufalino: Provided an introduction and a reminder that chronic disease is a huge problem and that we are still in our infancy in coming to a resolution. The work that this group is doing is important in making an impact in improving chronic disease across the state. Welter: There are three components for this plan. First the group will provide recommendations around the system and how the work can be executed; second, what are the recommendations for addressing SDOH and third focusing on one of the health priorities and to improve the outcome and health equity through interventions that address chronic disease. 12 members completed the survey and selected healthy eating, active living and tobacco as the goals to focus on. The group was broken out into four groups. Four presenters – Dr. Terry Mason, Elissa Bassler, Mark Pesyakhovich, and Dr. Rajesh Parikh & Manasi Jayaprakash shared strategies in the goal areas. Members were asked to identify strategies that they thought were important. These would then be discussed with their small groups and then the large group as a whole. 		
Discussion #1:	Dr. Terry Mason, NIPHC and CCDPH presented to each of the four groups		



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Roundtable	around food security and CCDPH's food policy.
Discussion	Elissa Bassler, IAPO & IPHI presented various statewide strategies around the work of IAPO focusing on healthy eating and active living.
	Mark Peysakhovich, AHA & ICAT, shared the efforts and strategies for statewide initiatives focusing on tobacco cessation and prevention.
	 Dr. Rajesh Parikh and Manasi Jayaprakash, IPHCA, presented local and statewide strategies that focus on these goals engaging both clinical and communities.
Discussion # 2: Strategy Selection	Each of the four groups had a few minutes to independently think of the strategies they found to be important to them, their organizations and the state.
	As a collective small group, 2-3 strategies were selected to be the focus for
	the goal areas. Below is what each group brought to the full group: Group 1
	• Active Living
	o Promote transportation and land use policies that promote mixed
	compact community development and physical activity
	transportation options
	Ex. Complete Streets
	o Reform transportation and land use funding program requirements
	 Safe Routes to School Enhanced PE
	• Tobacco
	o Increase taxes on tobacco products
	E-cigarette products
	o Fully funding Quitline and cessation products
	 If money is needed, use increase taxes to fund
	o Tobacco 21
	Healthy Eating



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- Sugar-sweetened beverage tax
- Incentives for stores, supermarkets, and farmers for underserved neighborhoods
- o Reduce SSBs
 - Healthy vending
 - HC
 - Data
 - Stakeholders
- o Standard guidelines to be mandatory
- Students and families approach eating healthier by improving food choices in schools
 - Cafeteria/vending
 - Education

Group 2

- Active Living
 - Environmental Health and policy approaches to increase physical activity
 - o Protect Illinois elementary and secondary daily PE requirement
 - Increase quality
- Tobacco
 - o Tobacco 21
 - o Comprehensive tobacco control programs
 - Cessation
- *Healthy Eating*
 - o HEAL
 - o SNAP
 - Increase access to affordable food



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Group 3

- Active Living
 - o Protect daily PE requirement
 - o Worksite wellness programs
 - o Environmental and policy approaches to increase PE
- Tobacco
 - o Tobacco 21
 - Increase cost of tobacco
 - o Sustain funding for enforcement and cessation
 - Funding for LHDs and Quitline
- Healthy Eating
 - o SSB tax
 - o Double value SNAP program
 - o Food insecurity screening
 - Decrease or eliminate SSB/unhealthy vending in schools/hospitals/public buildings

Group 4

- Active Living
 - o Protect IL's elementary and secondary school daily physical education requirement
 - Protect and promote higher quality PE
 - o Enhanced access to places for physical activity combined with information outreach activities
 - Include Safe Routes to School
 - o Worksite programs
- Tobacco
 - o Tobacco 21



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	Reducing tobacco use and secondhand smoke exposure	
	• Quitline interventions with enhancements	
	Healthy Eating	
	o Implement organizational and programmatic nutrition standards and	
	policies	
	 State buildings first 	
	 Increase access to healthy and affordable foods in communities 	
	 Creating communities around food 	
	• Faith-based, comprehensive	
	o SSB tax increase	
Discussion # 3: Group discussion	 The full group then discussed the identified strategies and identified those that were similar and those that should remain as priority strategies to be included in the plan. 	
	• Active Living –	
	 Karen Shoup shared that there is a Complete Streets policy in Illinois that has been adopted and has a comprehensive agenda that is included in plans within the metropolitan areas and the state. The FAST ACT also has brought \$300 billion dollars to the state for transportation alternatives like Safe Routes and Complete Streets. Hana Kite from Active Transportation Alliance agrees that there is a statewide plan but there are still a lot of barriers in many municipalities to move forward with these types of changes. Leticia Reyes Nash: if there is already movement in Illinois, does not mean that we should not include this in the SHIP, but that there is more reason to keep it and how can the SHIP support this work at 	
	the state level.	
	 Sewell: It is about taking things to scale and no matching the risk 	
	factor	
	 Kite: We should keep it and use it as a larger strategy with the other options as tactics. 	



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- Three strategies for Active Living:
 - o EH & Policy approaches to increase physical activity
 - Promote transportation and land use policies that promote mixed, compact community development and PH transportation options (ex: Complete Streets)
 - Reform transportation and land use funding program requirements (ex: Safe Routes to School)
 - o Protect IL elementary and secondary daily PE requirement (increase quality)
 - o Worksite wellness programs
- Three strategies for Tobacco:
 - o Comprehensive tobacco control programs
 - o Tobacco 21
 - o Funding (creating by increasing taxes and utilization for programs and cessation)
- Healthy eating
 - Mark: SSB Tax HEAL Act should be called that but we would support the policy
 - o Healthy Vending Access to food
 - o Reduce SSB in state buildings and hospital Same as decrease access to unhealthy food
 - SNAP
 - Sitafawalla: Creating education should be translated to all partners, purposeful approach that allows the interventions to be translated to the user experience; creating a common language that all stakeholders use (public health, clinical, business, etc.);
 - o Welter: Within each strategy include an awareness component



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	Strategies to focus on for Healthy eating:		
	o SSB/HEAL Act		
	 Increase access to affordable healthy food 		
	 SNAP program changes 		
	 Incentives for stores, supermarkets, farmers 		
	 Decrease access to unhealthy food 		
	 Eliminate unhealthy vending in schools, state buildings, hospitals 		
	 Improve food choices in cafeteria and provide education to families 		
	 Standard guidelines – common language? 		
Action planning process	 Next steps: Each member should select a goal for action planning UIC will email out templates with the agreed upon strategies for each goal to the working groups to fill out Also to think about the vision of the group and what happens after the SHIP is submitted, how will this group come back together and what will be done to keep the work moving forward, to think about including infrastructure recommendations. Herd: There is a tobacco plan for the state, should we try to integrate it the best we can? Welter/Reyes-Nash: Hopefully these will refer to each other and align where possible and that there will be representatives sitting on both planning groups. 	 UIC will email out templates with the agreed upon strategies for each goal to the working groups to fill out Complete templates 	 UIC by Wedn esday, Febru ary 10 All - By Wednesd ay, February 17
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