



6. Special Initiatives

Determining the Status of Wisconsin School Health Services (2007-2008)

The current health indicators of Wisconsin's youth are troublesome and likely predictive of increased morbidity and mortality as these children reach adulthood. The school environment is an important mode not only for health service delivery but also health promotion and disease prevention programming. To positively impact the health status of Wisconsin's school aged children, a comprehensive analysis of the status of the infrastructure of school health services is a key first step.

The purpose of the 'Determining the Status of Wisconsin School Health Services' grant was to assess the strengths, weaknesses, opportunities and threats of the current health services infrastructure in Wisconsin public schools using collaborative leadership strategies. Completed activities include: convening an advisory committee for guidance and feedback; conducting multiple online surveys; conducting two focus groups; reviewing statutes and administrative rules; collecting compelling school health-related stories, and; completing and distributing the "Healthy Child - Healthy Learner - Academic Achievement Recommendations to Improve School Health Services in Wisconsin" document.

The "Healthy Child" document is a unique and crucial public health system product -- a comprehensive policy paper that delineates the results of the assessment, strategic and systemic policy recommendations, and next steps. The report serves as a comprehensive "call to action" to strengthen systemic linkages between the educational and public health sectors and Wisconsin stakeholders from government, the public, private, nonprofit, and voluntary sectors to a take collective action to protect the health and safety of school age children and youth and assure conditions in which children and youth can be healthy.

A number of activities beyond the specifics of the grant have occurred. First, one national and five state posters or presentations on this topic were given in 2008 and 2009. Second, two additional grants have been written, one to each of the Partnership Funds in Wisconsin. (Neither of these proposals was funded.) A number of state-level policy initiatives that reflect recommendations in the "Healthy Child" document have either been put in place or are being advanced in 2009.

Partners on the project included: Department of Public Instruction, Division of Public Health, Wisconsin Association of School Nurses, Medical College of Wisconsin, Wisconsin Association of Local Health Departments and Boards, and the Wisconsin Public Health Association. The project was funded in part by the Healthier Wisconsin Partnership Program, a component of the Advancing a Healthier Wisconsin endowment at the Medical College of Wisconsin. The project timeframe was July 1, 2007 – September 30, 2008, and the amount allocated was \$50,000. For a copy of the "Healthy Child" document or more information on this project, go to www.wpha.org/schoolhealth.htm or contact Sarah Beversdorf, Project Manager, at sarah@badgerbaymanagement.com.

Public Health Workforce Development: A Call to Action (2007-2008)

In order to assure that the health priorities are addressed, prevention is a key focus, population groups at risk are identified and prioritized, and the system is transformed, the public health workforce must be diverse, sufficient and competent. A diverse, sufficient and competent workforce is also essential to addressing health threats such as influenza, obesity and E-Coli. This project provides a firm grounding as well as a long term plan for successfully improving the public health workforce.

The purpose of the “Public Health Workforce Development: A Call to Action” grant was to “first to advance the Healthiest Wisconsin 2010 public health workforce system priority focused on diversity, sufficiency, and competency by developing and disseminating a Call to Action report, and second to develop a sustainable process that generates a commitment to action and strong partnerships between broad public health system partners.” Completed activities include: assessing and analyzing Wisconsin’s existing data on public health workforce diversity, sufficiency and competency; identifying best practices in public health workforce enumeration, recruitment, retention and development; conducting a statewide Public Health Workforce Summit; developing a comprehensive Call to Action report; holding a Commitment to Action kick-off; disseminating the Call to Action report to the broad public health workforce and system partners; developing processes to sustain public health system partners’ commitment to action and collaborative relationships.

A key product of the project, the “Call to Action” document, clarifies public health workforce issues, summarizes relevant data, consolidates best practices, and offers recommendations for addressing this issue in Wisconsin. The kick-off event for the report was held at the 2008 WPHA-WALHDAB conference, and the report has been widely disseminated since the inaugural distribution.

An essential part of the Call to Action process was and continues to be the ongoing efforts of three workgroups centered on sufficiency, diversity and competency. The workgroups developed plans and are now implementing those plans. In addition, the project developed a realistic and sustainable implementation strategy based on shared ownership and commitment among public health system partners to carry out these recommendations. Specifically, a Wisconsin Public Health Workforce Leadership Consortium was created with key statewide organizational leadership.

Partners on the project included: Division of Public Health, Medical College of Wisconsin, Wisconsin Association of Local Health Departments and Boards, Wisconsin Public Health Association, and the Wisconsin Area Health Education Center System. The project was funded in part by the Healthier Wisconsin Partnership Program, a component of the Advancing a Healthier Wisconsin endowment at the Medical College of Wisconsin. The project timeframe was July 1, 2007 – December 31, 2008, and the amount allocated was \$50,000. For a copy of the “Call to Action” document or more information on this project, go to www.wpha.org/workforce.htm or contact Sarah Beversdorf, Project Manager, at sarah@badgerbaymanagement.com.

WISCONSIN'S

PUBLIC HEALTH QUALITY INITIATIVE

September 2009

2008/9 Partners

Burnett
Dodge
Greenfield
Iowa
Jefferson
Lincoln
Marathon
Onida
Oshkosh
Pepin
Polk
Taylor
Waushara
Winnebago
Wood

2009 Partners

Appleton
Barron
Dunn
Jackson
Manitowoc
Monroe
Oak Creek
Richland
Rusk
Shawano
Wauwatosa



★ WDPH Regional & Central Offices

Leaders in Public Health Quality Improvement

Wisconsin is one of 16 states leading our nation's efforts to improve public health quality and prepare for national voluntary accreditation.

Wisconsin's Public Health Quality Initiative (WIQI) offers participating local health departments and the Wisconsin Division of Public Health an opportunity to:

- be part of shaping our nation's new public health accreditation standards
- prepare for voluntary state and local accreditation which will begin in 2011

- engage in self-assessment and quality improvement (QI) activities.

Together, WIQI partners are looking at their capacity in relation to emerging national standards, learning, making plans and taking action - all to better protect the people of Wisconsin.

WIQI is led by the Institute for Wisconsin's Health, in partnership with the Wisconsin Association of Local Health Departments and Boards and the Wisconsin Division of Public Health.

If you are interested in learning more about accreditation

preparation and QI, start by visiting:

- www.instituteforwihealth.org
- www.phaboard.org
- www.naccho.org
- www.rwjf.org

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