

## **COUNCIL ON HEALTH PROMOTION AND DISEASE PREVENTION**

February 7, 2012, Meeting  
DRAFT Minutes  
Eden Hill Medical Center  
200 Banning Street, 3<sup>rd</sup> Floor Conference Room  
Dover, DE 19904

### **Attendees**

Sandy Hassink  
Michael Barbieri  
Jeanne Chiquoine  
Patricia Hoge  
John Hollis  
Paul Kaplan  
Jonathan Kirch  
Emily Knearl  
Faith Kuehn  
Rita Landgraf  
Kathleen Matt  
Rachael Mears  
Linda Payne  
Brian Rahmer  
Michael Ramone  
Karyl Rattay  
Faith Rentz  
Matt Ritter  
Michael Rosenthal  
Paul Silverman  
Eileen Sparling  
Linda Wolfe  
Fred Breukelman (staff)  
Fred Gatto (staff)  
Mike Cordrey (consultant)  
Katie Borrás (grad student)  
Rosemary Doughten (staff)

Sandy Hassink called the meeting to order at 9:30 am. She informed the Council that the recommendation report was presented to Governor Markell on January 10, 2012. His initial response was that he liked it. The group further discussed the burden and asset reports with him. The Governor then requested model programs from the recommendations and endorsed the continuation of the Council.

In further explanation of the meeting with the Governor, Dr. Hassink said that he requested one or more model programs to demonstrate effectiveness. Dr. Hassink asked the group what kind of models they would like – e.g. geographic model, defined-population model, condition-specific model, or learning collaborative model. Paul Kaplan offered that there are different speed models, some with quick hits and some that take two to three years to complete. Discussion took place regarding the learning

collaborative model as a model of community- based change, working with schools and governments to bring stakeholders together to achieve a common goal.

Dr. Rattay informed the group that she had worked with Nemours a few years ago using a combination of models that included a learning collaborative model, care model and chronic care model. She said that prevention is better integrated in primary care and could work under this Council. She used an example of the YMCA and the United Way sharing linkage. Dr. Hassink suggested using an early, robust model that would be operational within the year and be able to get measurable results. Secretary Landgraf added that outcomes are necessary with pre- and post analysis, so that it is evident that there has been improvement. Patricia Hoge added that it will be necessary to show or prove to the legislature that they need to make an investment in the Council. Dr. Rattay added that it is nearly impossible to demonstrate outcomes in the short term; and that the Council will need to apply some intensive efforts with very few resources to accomplish the task.

There was discussion regarding “quick hits,” where an issue is identified and the Council implements a program that makes a difference in the short term. Cost drivers are adult chronic illness and those might be early quick hits. One suggestion was to focus on education about the Metabolic Syndrome. Campaigns for individuals to “know their numbers” could be implemented. People are more likely to make changes when they know and understand how the changes will impact them. Dr. Rattay reminded the group to keep their eyes upstream and to continue looking at the determinants of health. Dr. Hassink added that it is necessary to close the gap between prevention and illness. She continued that the Council needs to build on assets already in place. One program being implemented in Sussex County was explained by John Hollis. It is called Sussex Outdoors and it creates an environment involving many stakeholders where people live and work that is walkable and bikeable. The Stockley Project blends in youth development organizations as well as DNREC, Department of Agriculture, Department of Education and others. They are working on getting more trails and walkways and concentrating on getting families to use them as well as to eat healthier. The programs are being marketed to try and create a shift so people will use the trails and facilities regularly. Mr. Hollis added that the Indian River School District is excited to utilize the Stockley Property and also that some physicians are writing prescriptions for a free pass to the state parks so individuals can walk at least 30 minutes/day.

Further discussion took place regarding the Council delivering outcomes for the governor. It was suggested that a model be developed around policy; however, Dr. Hassink advised that Governor Markell used the word “policy” negatively. She said he specifically said that he didn’t want policy, that he wanted a model. He also conveyed a sense of urgency for the Council. It was suggested that the Council use health literacy as a model so individuals could become familiar with their metabolic measures. Sandy Hassink asked the group to consider asking Sussex employers to see if they would want to join a collaborative and to focus on Sussex as the geographic area. The idea is to focus on the employers because they purchase healthcare and also want to attract and keep people in Delaware.

Dr. Hassink asked the Council if they would want to use metabolic health literacy as the message and Sussex County as the model project target area. She continued by asking how each committee could make these ideas work in their respective settings. Secretary Landgraf added that we must work with the insurance industry.

The group was provided copies of the by-laws and membership agreement from the Delaware Cancer Consortium to use as a possible model for the Council on Health Promotion and Disease Prevention in the future.

Fred Breukelman reported on the progress of the Burden of Chronic Disease Report, which is in the final stages of editing. It will be used in support of the goals and projects of the Council. It is a very large report and will be provided only as an online document. Dr. Hassink added that it gives vital background information for grant applications. She said that she would like to move on to an asset documentation in order to focus on the recommendations. She charged the group to think about what asset listings they would like to move forward on and how the group could potentially ask the University of Delaware and state to capture data.

A meeting schedule was presented, with the suggestion that the Council meet April 10, June 12, August 14, October 9, and December 11, at Eden Hill Medical Center in Dover. It was suggested that the committee meetings be held on the 2<sup>nd</sup> Tuesday of every other month to stay with the same schedule as the Council. Committee meeting venues and times will be determined by the chairs/co-chairs. This meeting schedule was approved.

Meeting was adjourned at 11:30 am.

Next meeting:

Tuesday, April 10, 2012 from 9:30 am to 12 p.m. at Eden Hill Medical Center, 200 Banning Street, 3<sup>rd</sup> Floor Conference Room, Dover, DE 19904