Ohio 2017-2019 STATE HEALTH IMPROVEMENT PLAN

Snapshot

February 2017

The 2016 state health assessment (SHA) described the current status of health and wellbeing in Ohio and highlighted the state's many opportunities to improve health outcomes, reduce disparities and control healthcare spending. The 2017-2019 state health improvement plan (SHIP) seizes upon those opportunities by laying out specific steps to achieve measurable improvements on key priorities.

What is the state health improvement plan?

Ohio's 2017-2019 SHIP is a strategic menu of **priorities**, **outcome objectives** and **evidence-based strategies** designed to address three of Ohio's greatest health challenges:

- Mental health and addiction
- Chronic disease
- Maternal and infant health

Taking a comprehensive approach, the plan highlights powerful underlying drivers of wellbeing, such as student success, housing affordability and tobacco prevention (see diagram on page 2).

How will the plan be implemented?

SHIP priorities will inform resource allocation, including the Governor's proposed 2018-19 budget (see related white papers from the Governor's Office of Health Transformation), and state agencies will implement selected strategies. In addition, the plan includes a set of tools designed to help local

partners select and evaluate options from a strategy menu. Local health departments and hospitals will take a leadership role in implementing these strategies, in partnership with a wide variety of community partners, such as:

- Alcohol, Drug and Mental Health (ADAMH) boards
- Philanthropy
- Community-based organizations and local coalitions
- Education, housing, employers/ business, regional planning, transportation, criminal justice, etc.

The state will track and report progress on the SHIP's outcome objectives on an annual basis.

How was the plan developed?

Led by the Governor's Office of Health Transformation in partnership with the Ohio Department of Health and other state agencies, the state health assessment and improvement plan were developed with input from hundreds of Ohioans:

- Priorities were informed by five regional forums and a review of local assessments and plans
- Multi-stakeholder groups reviewed the evidence on what works to improve health and recommended strategies to include in the plan

The state contracted with the Health Policy Institute of Ohio (HPIO) to prepare the SHA and develop the SHIP.

What makes this SHIP different?

The 2017-2019 SHIP builds upon past plans, adding several new components:

- Leadership from the Governor's Office of Health Transformation in partnership with the Ohio Department of Health and strong participation from other health-related state agencies
- Comprehensive review of community priorities informed the selection of SHIP priorities
- Specific and measurable outcome objectives for the state and an evaluation plan to monitor progress on an annual basis
- Toolkits that provide a menu of SHIP-aligned outcome indicators and evidence-based strategies for local partners to include in their community-level plans
- Stronger focus on health equity and the social determinants of health

The 2016 state health assessment and full 2017-2019 SHIP is available at

www.odh.ohio.gov/sha-ship



Ohio 2017-2019 state health improvement plan (SHIP)

Overall health outcomes

- ◆Health status
- ♣Premature death

| 3 priority topics | | | |
|---|---|--|--|
| Mental health and addiction | Chronic disease | Maternal and infant health | |
| 10 priority outcomes | | | |
| Depression Suicide Drug dependency/ abuse Drug overdose deaths | Heart diseaseDiabetesChild asthma | Preterm birthsLow birth weightInfant mortality | |

Equity: Priority populations for each outcome above

Cross-cutting outcomes and strategies
The SHIP addresses the 10 priority outcomes through cross-cutting factors that impact all 3 priority topics

| Cross-cutting factors | Strategies to promote: |
|-------------------------------|--|
| Social determinants of health | Student success |
| | S Economic vitality |
| | Housing affordability and quality |
| Public health system, | Tobacco prevention and cessation |
| prevention and health | Active living |
| behaviors | Healthy eating |
| | Violence-free communities |
| | Population health infrastructure |
| Healthcare system and access | Access to quality health care |
| | Comprehensive primary care |
| Equity | Strategies likely to decrease disparities for priority populations |