A COMPREHENSIVE PLAN TO IMPROVE THE HEALTH OF ALL OKLAHOMANS · 2010-2014

OKLAHOMA HEALTH IMPROVEMENT PLAN
Since 1992, our infant mortality rate is consistently higher than the national average.

We lead the nation for deaths due to heart disease.

Two-thirds of Oklahomans are overweight or obese, with Oklahoma ranked as the 6th worst state in adult obesity.

Oklahoma’s prevalence for smoking in 2008 was 24.7 percent ranking us 36th in the nation.

*If Oklahoma “matched” the national average in health status indicators, 5,320 lives would be saved each year.*
### Background

#### Key Health Indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>OK</th>
<th>U.S.</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease Deaths (per 100k)</td>
<td>261.7</td>
<td>211.4</td>
<td>D</td>
</tr>
<tr>
<td>Cancer Deaths (per 100k)</td>
<td>196.7</td>
<td>183.9</td>
<td>D</td>
</tr>
<tr>
<td>Cerebrovascular Deaths (per 100k)</td>
<td>58.2</td>
<td>46.6</td>
<td>C</td>
</tr>
<tr>
<td>Chronic Lower Respiratory Deaths (per 100k)</td>
<td>62.5</td>
<td>43.3</td>
<td>F</td>
</tr>
<tr>
<td>Diabetes Deaths (per 100k)</td>
<td>30.3</td>
<td>24.6</td>
<td>D</td>
</tr>
<tr>
<td>Infant Mortality (per 1k)</td>
<td>8.2</td>
<td>6.9</td>
<td>D</td>
</tr>
<tr>
<td>Total Mortality (per 100k)</td>
<td>953.9</td>
<td>799.4</td>
<td>F</td>
</tr>
<tr>
<td>Fruit &amp; Vegetable Consumption</td>
<td>16.3%</td>
<td>24.4%</td>
<td>F</td>
</tr>
<tr>
<td>No Physical Activity</td>
<td>29.6%</td>
<td>22.6%</td>
<td>F</td>
</tr>
<tr>
<td>Current Smoking</td>
<td>25.8%</td>
<td>19.8%</td>
<td>F</td>
</tr>
</tbody>
</table>
## Background

### Key Health Indicators

<table>
<thead>
<tr>
<th>Indicator</th>
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</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>28.8%</td>
<td>26.3%</td>
<td>D</td>
</tr>
<tr>
<td>Immunizations &lt; 3 years</td>
<td>80.1%</td>
<td>80.1%</td>
<td>C</td>
</tr>
<tr>
<td>Limited Activity Days (average)</td>
<td>5.9</td>
<td>4.9</td>
<td>D</td>
</tr>
<tr>
<td>Poor Mental Health Days (average)</td>
<td>3.9</td>
<td>3.3</td>
<td>D</td>
</tr>
<tr>
<td>Poor Physical Health Days (average)</td>
<td>4.9</td>
<td>4.3</td>
<td>D</td>
</tr>
<tr>
<td>Teen Fertility Rate (per 1k)</td>
<td>27.8</td>
<td>21.4</td>
<td>D</td>
</tr>
<tr>
<td>First Trimester Prenatal Care</td>
<td>77.3%</td>
<td>83.9%</td>
<td>D</td>
</tr>
<tr>
<td>Low Birth Weight Infants</td>
<td>8.3%</td>
<td>8.3%</td>
<td>C</td>
</tr>
<tr>
<td>Uninsured Adults</td>
<td>20.1%</td>
<td>14.2%</td>
<td>D</td>
</tr>
<tr>
<td>Poverty</td>
<td>14.0%</td>
<td>12.2%</td>
<td>D</td>
</tr>
</tbody>
</table>

*Oklahoma Ranks 49th in national health rankings.*
In 2008, the Oklahoma Legislature required through SJR-41 that the State Board of Health develop a comprehensive health improvement plan for the “general improvement of the physical, social and mental well being of all people in Oklahoma through a high-functioning public health system.”

“The first wealth is health.” Ralph Waldo Emerson

Oklahoma Health Improvement Plan
The Board of Health convened a broadly based group called the Oklahoma Health Improvement Planning (OHIP) team. Members included:

- health leaders
- state legislators
- business
- labor
- tribes
- academia
- non-profits
- state & local governments
- private citizens
- professional organizations

The team developed strategic planning processes to complete and implement the plan.

*OHIP Mission: Working together to lead a process to improve and sustain the physical, social, and mental well being of all people in Oklahoma.*
The team organized a statewide effort to learn what Oklahomans believe are their crucial health needs.

Session Themes
- School Health
- Access to Health Services
- Workforce
- Prevention
- Tobacco Use Prevention
- Poverty
- Educational Achievement

[STRATEGIC PLANNING]
LISTENING SESSIONS

OKLAHOMA HEALTH IMPROVEMENT PLAN
[STRATEGIC PLANNING]

FLAGSHIP GOALS

Tobacco Use Prevention
Obesity Reduction
Children’s Health

INFRASTRUCTURE GOALS

Public Health Finance
Workforce Development
Access to Care
Health Systems Effectiveness

SOCIETAL & POLICY INTEGRATION

Policies and Legislation
Social Determinants of Health & Health Equity

OKLAHOMA HEALTH IMPROVEMENT PLAN
[FLAGSHIP GOAL]

TOBACCO USE PREVENTION

Prevent initiation of tobacco use by youth and young adults.

Increase the percentage of Oklahoma adults and youth who successfully quit tobacco use.

Protect all Oklahomans from secondhand smoke.

Fully implement the recommendations from the Oklahoma State Plan for Tobacco Use Prevention and Cessation.

[FLAGSHIP GOAL]

OBESITY REDUCTION

Implement strategies and public policies in the Get Fit Eat Smart Oklahoma Physical Activity and Nutrition Plan.

Implement evidence-based programs that address obesity issues.

Integrate and coordinate nutrition and obesity programs across the state.

Propose public policy changes needed to improve Oklahoma’s health and fitness.

To download PDF of the Get Fit Eat Smart Oklahoma Physical Activity and Nutrition Plan, visit <www.ok.gov/strongandhealthy>.
Improve perinatal health outcomes:
- Increase the number of women receiving preconception care.
- Improve identification and early treatment of maternal infections.
- Increase the number of women receiving prenatal care.

Improve infant health outcomes:
- Reduce sleep-related deaths.
- Reduce unintended pregnancies.

Develop a comprehensive child health plan to improve health outcomes for children age 1 to 18 years.
Analyze and evaluate the current public health finance system.

Conduct a comprehensive review of resource allocation.

Identify and/or develop benchmarks, such as public health accreditation standards, to measure improvement.

"The health of the people is really the foundation upon which their happiness and all their powers as a state depend." Benjamin Disraeli
Ensure the distribution of health care resources and practitioners to meet the health needs of both urban and rural populations.

Increase primary and preventive health services.

Reduce bottlenecks and faculty shortages.

Develop better, more accurate data on the status of our health and public health care workforce.

Increase number of health care professionals who practice in rural areas.

Bridge public and private health care systems.
Adopt strategies identified in Oklahoma’s State Coverage Initiative:
- Expand Insure Oklahoma and Sooner Care.
- Create affordable commercial health plans.
- Generate revenue through a dedicated insurance fee.
- Encourage Oklahomans to obtain insurance coverage.
- Pursue complementary initiatives.

For more information on Oklahoma’s State Coverage Initiative, visit <www.statecoverage.org/node/1847>.

“In health, there is freedom.” Henri Frederic Amiel
Identify gaps in our current health systems operations.

Define methodologies and processes to reduce duplication of efforts.

Utilize the Health Information Technology (HIT) and Health Information Exchange (HIE) Systems in accomplishing health systems effectiveness.

Identify key and responsible parties to champion these efforts and encourage replication throughout the state.

“True enjoyment comes from activity of the mind and exercise of the body; the two are ever intertwined.” Humboldt
**DEVELOP AND INITIATE APPROPRIATE POLICIES AND LEGISLATION TO MAXIMIZE OPPORTUNITIES FOR ALL OKLAHOMANS TO LEAD HEALTHY LIVES.**

**SOCIAL DETERMINANTS OF HEALTH & HEALTH EQUITY**

Address the foundational causes of health status and health disparities, such as: income and poverty, education, access to health services, housing, and transportation.

"Wisdom is to the mind what health is to the body." Rocheffoucauld
SOCIAL DETERMINANTS OF HEALTH

[SOCIETAL & POLICY INTEGRATION]

GENERAL SOCIOECONOMIC, CULTURAL & ENVIRONMENTAL CONDITIONS

LIVING & WORKING CONDITIONS

education
work environment
unemployment
water & sanitation
health care services

SOCIAL & COMMUNITY NETWORKS

agriculture & food production

INDIVIDUAL LIFESTYLE FACTORS

AGE, GENDER & GENETIC FACTORS

housing

Adapted from the Dahlgren-Whitehead Model

OKLAHOMA HEALTH IMPROVEMENT PLAN
The OHIP is a ‘living’ plan. As such, the OHIP team will develop a scorecard to measure goals and objectives in the plan, continuously seek feedback from community stakeholders about current efforts, and identify new initiatives.

The flagship work groups will:
- Present periodic progress reports in regard to tobacco, obesity, and children’s health goals.
- Develop a comprehensive plan to cover children ages 1-18.
- Monitor strategies to reduce infant mortality.
The Infrastructure work groups will:
- Assess findings of the State Coverage Initiative Report.
- Provide recommendations for public health care financing.
- Recognize public/private partnerships that further health improvements.
- Identify strategies to strengthen the health care workforce.

“Health, the greatest of all, we count as blessings.” Ariphron
Every Oklahoman has a stake and role in improving our state’s health outcomes. No single individual, organization, or governmental agency can do it alone. We must work together to assure the health and maximize the opportunity for all Oklahomans to lead long, healthy lives — both for this generation and generations to come.

Small steps everyone can take:
- Take the stairs instead of the elevator.
- Park further away to add extra steps.
- Choose healthier snacks.
- Add more fruits & vegetables to your diet.

_Eat Better, Move More, and Be Tobacco-Free_
OHIP PARTNERS

Oklahoma State Board of Health
Tulsa City-County Board of Health
Oklahoma City-County Board of Health
Oklahoma State Department of Health
Tulsa Health Department
Oklahoma City-County Health Department
Oklahoma Health Care Authority
Oklahoma Department of Mental Health & Substance Abuse Services
Oklahoma Insurance Department
Oklahoma Tobacco Settlement Endowment Trust
Oklahoma Legislature
Oklahoma State Department of Education
Oklahoma Hospital Association
Oklahoma Osteopathic Association
Oklahoma State Medical Association
The State Chamber of Oklahoma
Cherokee Nation Health Services
Oklahoma Turning Point Council
Oklahoma Institute for Child Advocacy
Oklahoma Tobacco Research Center
American Lung Association
American Heart Association
American Cancer Society
Inter-Tribal Health Board
Cheyenne-Arapaho Tribe
Muscogee Creek Nation
OKC Area Indian Health Service
Indian Health Care Resource Center of Tulsa

OKLAHOMA HEALTH IMPROVEMENT PLAN
O H I P  P A R T N E R S

Oklahoma Association of Health, Physical Education, Recreation and Dance
YMCA of Tulsa
Cimarron Alliance
Leadership Oklahoma
Schools for Healthy Lifestyles
Regional Food Bank of Oklahoma
Integris Health
George Kaiser Family Foundation
Oklahoma Office of State Finance
Oklahoma Policy Institute
Chickasaw Nation
Physician’s Manpower Training Center
Oklahoma Healthcare Workforce Center

Oklahoma Employment Security Commission
Oklahoma Primary Care Association
Oklahoma University Health Sciences Center
Oklahoma State University Center for Health Sciences
AARP Oklahoma
Oklahoma Developmental Disability Council
Community Service Council of Greater Tulsa
Blue Cross Blue Shield
Oklahoma Nurses Association
Children’s Hospital of Oklahoma/American Academy of Pediatrics
Citizens at Large

O K L A H O M A  H E A L T H  I M P R O V E M E N T  P L A N