



# Vermont Department of Health



## Vision

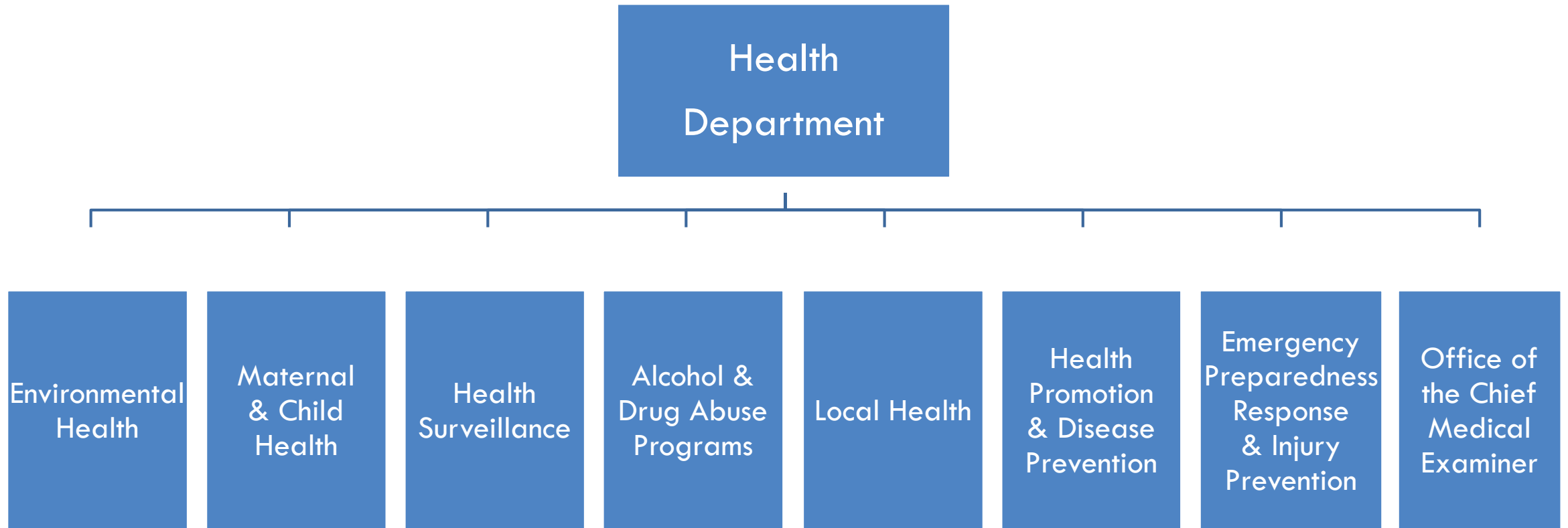
Healthy Vermonters living in healthy communities

## Mission

Protect and promote the best health for all Vermonters

- 1 Effective and integrated public health programs
- 2 Communities with the capacity to respond to public health needs
- 3 Internal systems that provide consistent and responsive support
- 4 A competent and valued workforce that is supported in promoting and protecting the public's health
- 5 A public health system that is understood and valued by Vermonters
- 6 Health equity for all Vermonters

# Health Department Organizational Structure



# Public health keeps kids healthy and communities strong

## Public health and prevention programs in your community:



**We all benefit**

# Population Health Principles



## **Focus on broader population and health outcomes**

Consider the health outcomes of a group of individuals, ***including the distribution of such outcomes within the group***, in order to develop priorities and target action.

## **Focus on prevention and wellness by patient, physician and system**

Focus on actions taken to maintain wellness rather than solely on identifying and treating disease and illness.

# Population Health Principles, Continued

## **Focus upstream to include risk and protective factors**

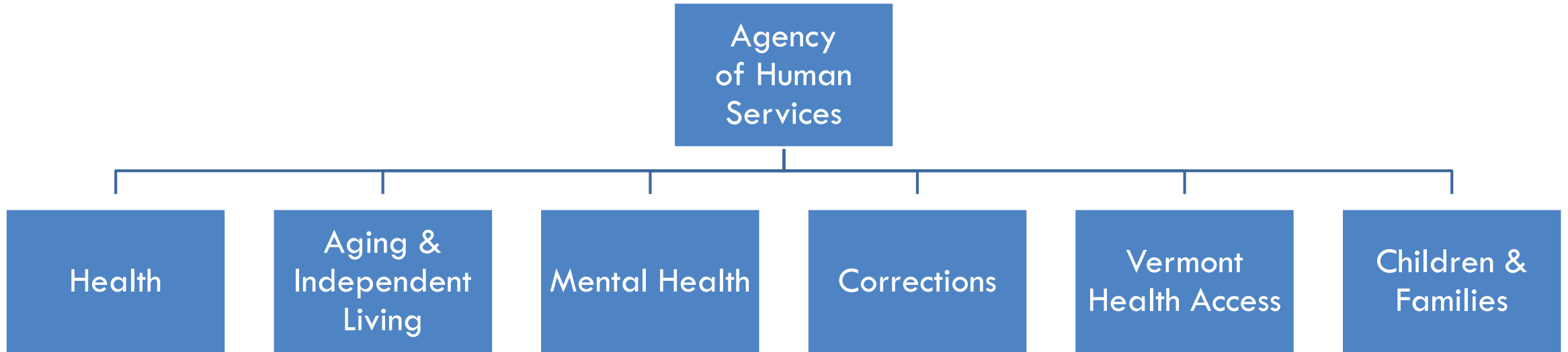
**Risk factors:** Lower likelihood of positive outcomes and a higher likelihood of negative or socially undesirable outcomes.

**Protective factors:** Enhance the likelihood of positive outcomes and lessen the likelihood of negative consequences from exposure to risk.

## **Link to social determinants and environmental factors**

The circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.

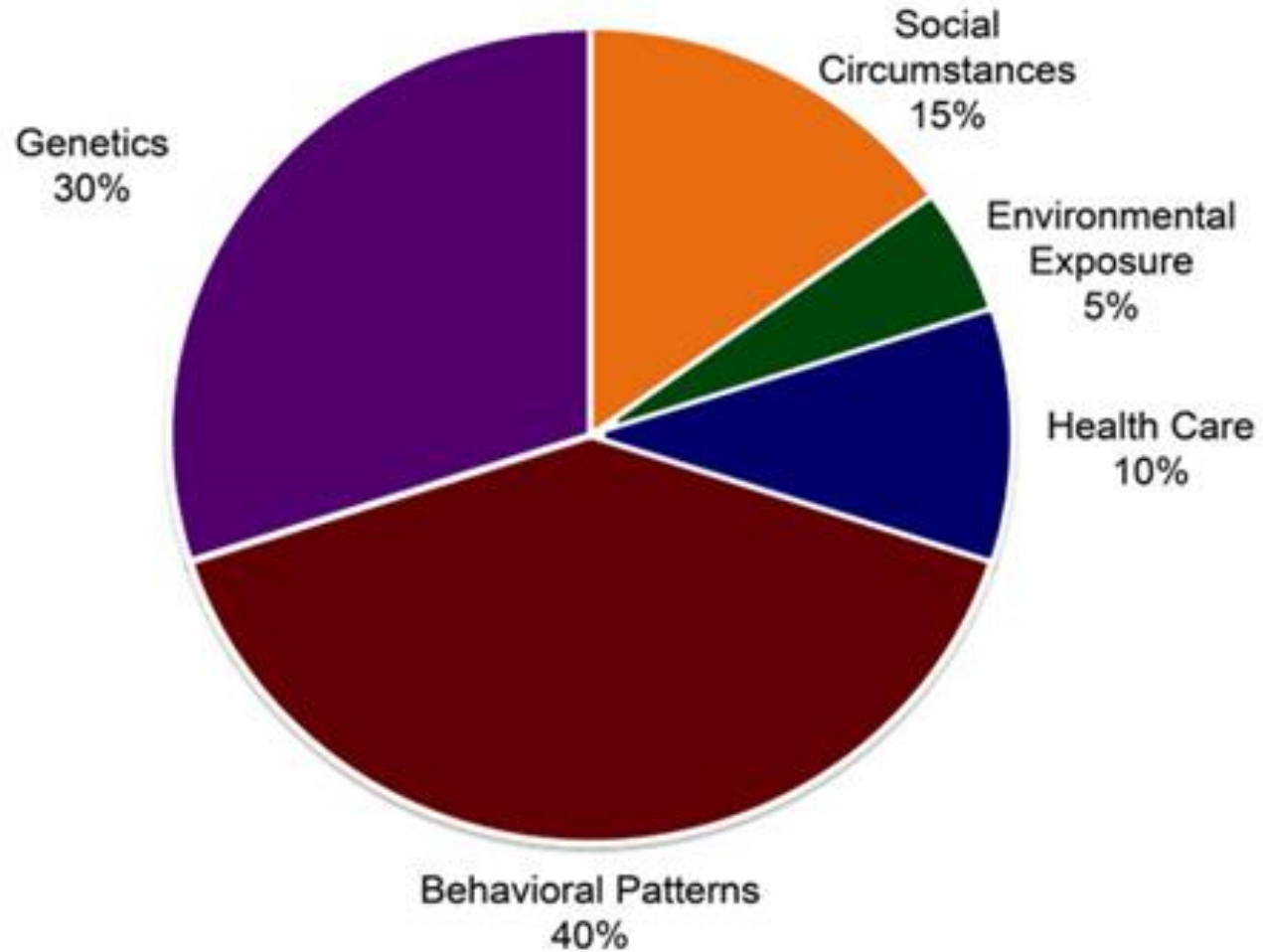
# Health works in concert with all other AHS departments.



## EXAMPLES:

- **DAIL** – falls and dementia
- **Mental Health** – suicide prevention, zero suicide, and mental health-substance use crisis
- **Corrections** – Medication-Assisted Treatment (MAT) and hepatitis C
- **DVHA** – prescription drugs, Blueprint prevention and chronic disease management efforts
- **DCF** – home visiting, impact of opioid crisis on families

# Multiple Determinants of Health





# Factors that Affect Health

*Smallest  
Impact*



*Largest  
Impact*



## Examples

Condoms, eat healthy  
be physically active

Rx for high blood  
pressure, high  
cholesterol

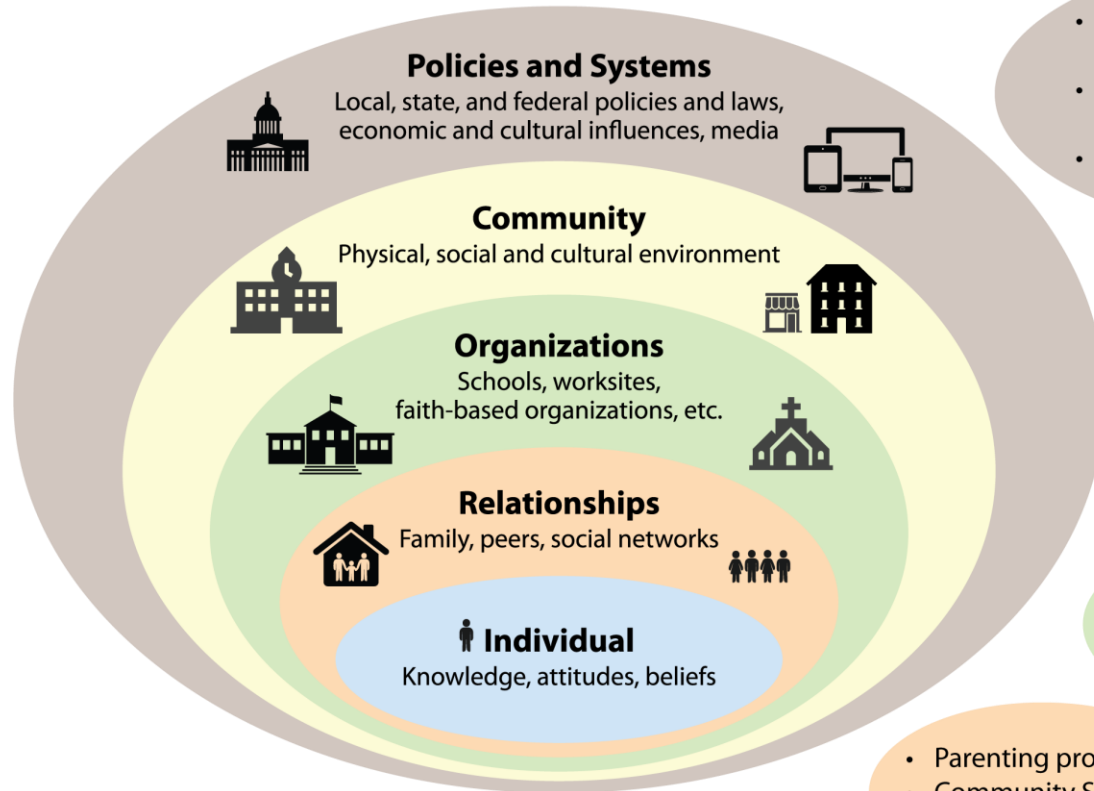
Immunizations, brief  
intervention, cessation  
treatment, colonoscopy

Fluoridation, 0g trans  
fat, iodization, smoke-  
free laws, tobacco tax

Poverty, education,  
housing, inequality

# Prevention model applied

## Substance Misuse Prevention Model



### What the Health Department and partners are doing in our communities

- Laws and ordinances to reduce access and density of substances
- Taxes to reduce youth and young adult consumption
- Media and educational campaigns

- Rental housing rules and recommendations
- Retail sales limits
- Town planning guidance
- Substance-free events

- School and worksite wellness
- School and worksite substance use policies and recommendations

- Parenting programs
- Community Services
- Volunteering

- Youth empowerment
- Mentoring
- Education

# State Health Improvement Outcomes & Strategies



## VISION

All people in Vermont have a fair and just opportunity to be healthy and to live in healthy communities

## Health Outcomes

Children achieve their optimal development  
 Communities support healthy living and healthy aging  
 Vermonters have lifelong opportunities for oral health  
 Vermonters demonstrate resilience and mental wellness  
 Vermont creates the social conditions that promote health

## State Health Improvement Strategies

### Invest in policies and infrastructure that create healthy communities - page 6.

Implement policies and promote norms that encourage physical activity and healthy eating, and discourage tobacco, alcohol, drug use/misuse.

Use health care reform and regulatory levers to support access to food, housing, transportation.

Expand housing and weatherization programs.

Form partnerships and shared investments to expand transportation services.

Expand community water fluoridation.

### Invest in programs that promote resilience, connection and belonging - page 8.

Expand access to home visiting programs.

Promote the *Strengthening Families* system.

Expand opportunities such as mentoring, peer support and after-school programs for youth.

Implement strong school health and wellness plans, policies and programs.

Create community supports for people in recovery.

Implement *Zero Suicide* in health care systems.

### Expand access to integrated person-centered care - page 10.

Integrate oral health, mental health, substance use disorder prevention into primary care.

Create a universal system for developmental screening and referrals for children and families.

Implement SBINS\* for health behaviors, housing, transportation, food and economic security.

Integrate oral health into health care practice and other settings (nursing homes, schools, etc.).

Promote practice improvements and professional development for early care and learning providers.

\* Screening, Brief Intervention & Navigation to Services

### Adopt organizational and institutional practices that advance equity - page 12.

Meaningful community engagement • Equitable programs, policies and budgets • Respectful care and services • Informed actions and decisions

## EQUALITY VERSUS EQUITY



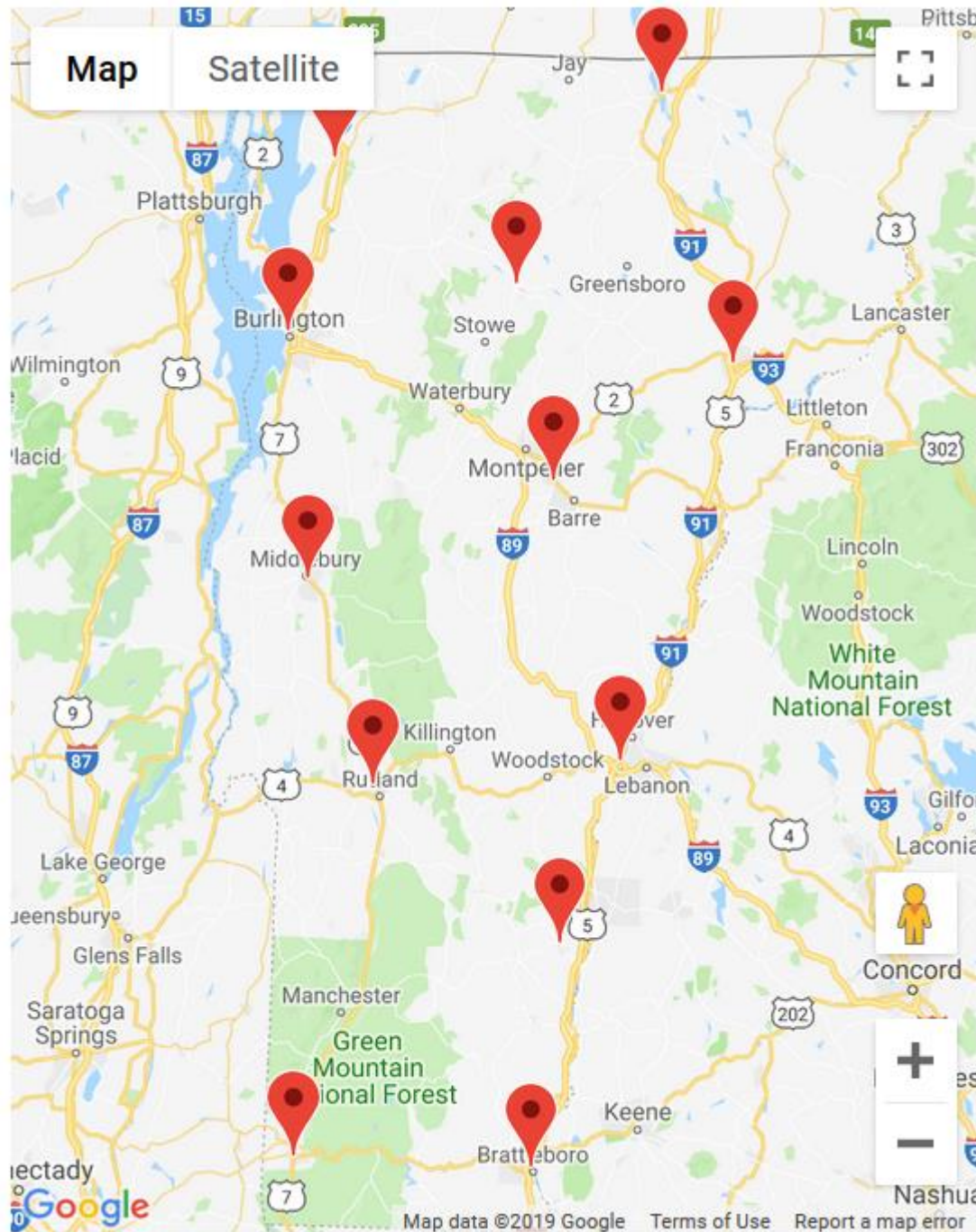
In the first image, it is assumed that everyone will benefit from the same supports. They are being treated equally.



In the second image, individuals are given different supports to make it possible for them to have equal access to the game. They are being treated equitably.



In the third image, all three can see the game without any supports or accommodations because the cause of the inequity was addressed. The systemic barrier has been removed.



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**White River Junction:** 888-253-8799 / 802-295-8820 / [Email](#) / [Link](#)

# For More Information

- [2018 State Health Assessment](#)

- <http://www.healthvermont.gov/about/reports/sha>

- [Scorecard for State Health Improvement Plan 2013-2017](#)

- <http://www.healthvermont.gov/about/performance/ship>

- [Community Health Needs Assessment by HAS](#)

- <http://www.healthvermont.gov/ia/CHNA/District/atlas.html>