



*Georgia Department of Public Health*

# **Board of Public Health Meeting**

Tuesday, October 14, 2014



*We Protect Lives.*

# Commissioner's Update

Brenda Fitzgerald, MD  
Commissioner, DPH

# **ASTHO Million Hearts Funding and Georgia Tobacco Use Prevention Program Update**

Jean O'Connor, JD, DrPH  
Chronic Disease Prevention Director

Kenneth Ray, MPH,  
Chronic Disease Deputy Director

# Georgia Million Hearts Funding

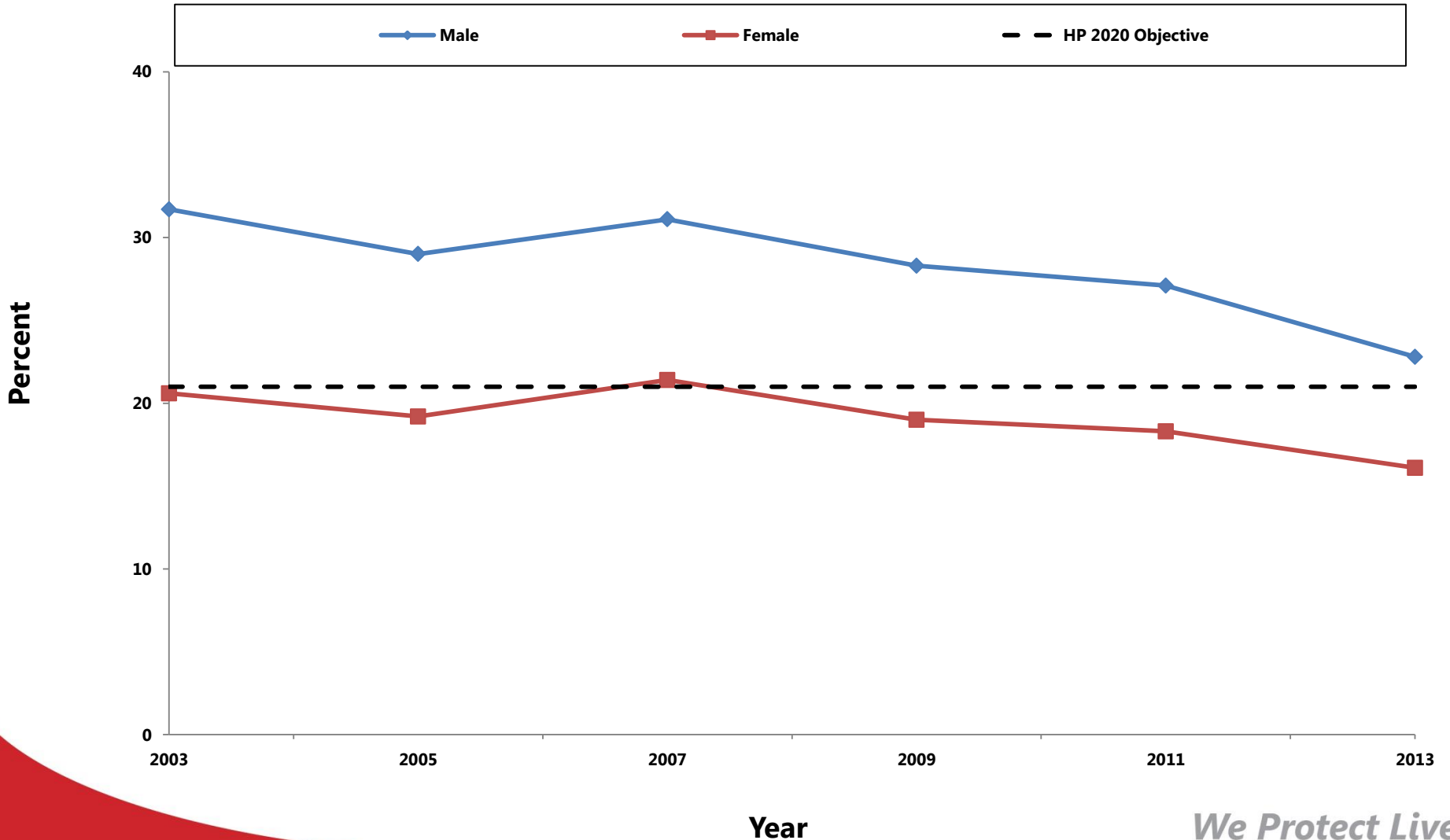
- Million Hearts® launched by the Department of Health and Human Services in September 2011.
- Goal is to prevent 1 million heart attacks and strokes by 2017.
- Georgia one of 6 states awarded funding by ASTHO in 2<sup>nd</sup> round.
- Funding to partner across sectors using a quality improvement process to identify, control, and improve blood pressure.
- Project kicks off in Georgia Oct 22.



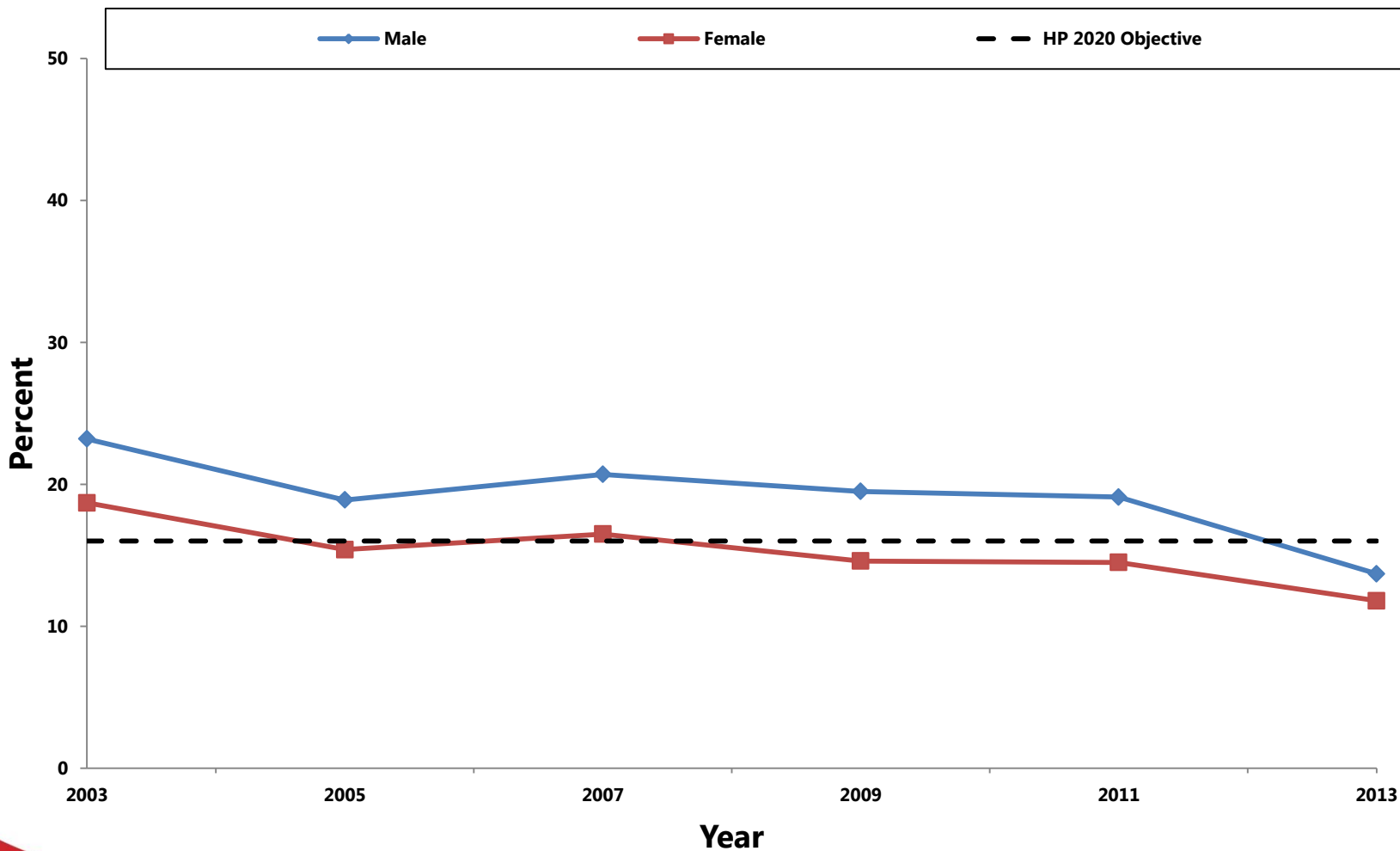
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# **CURRENT SMOKING PREVALENCE**

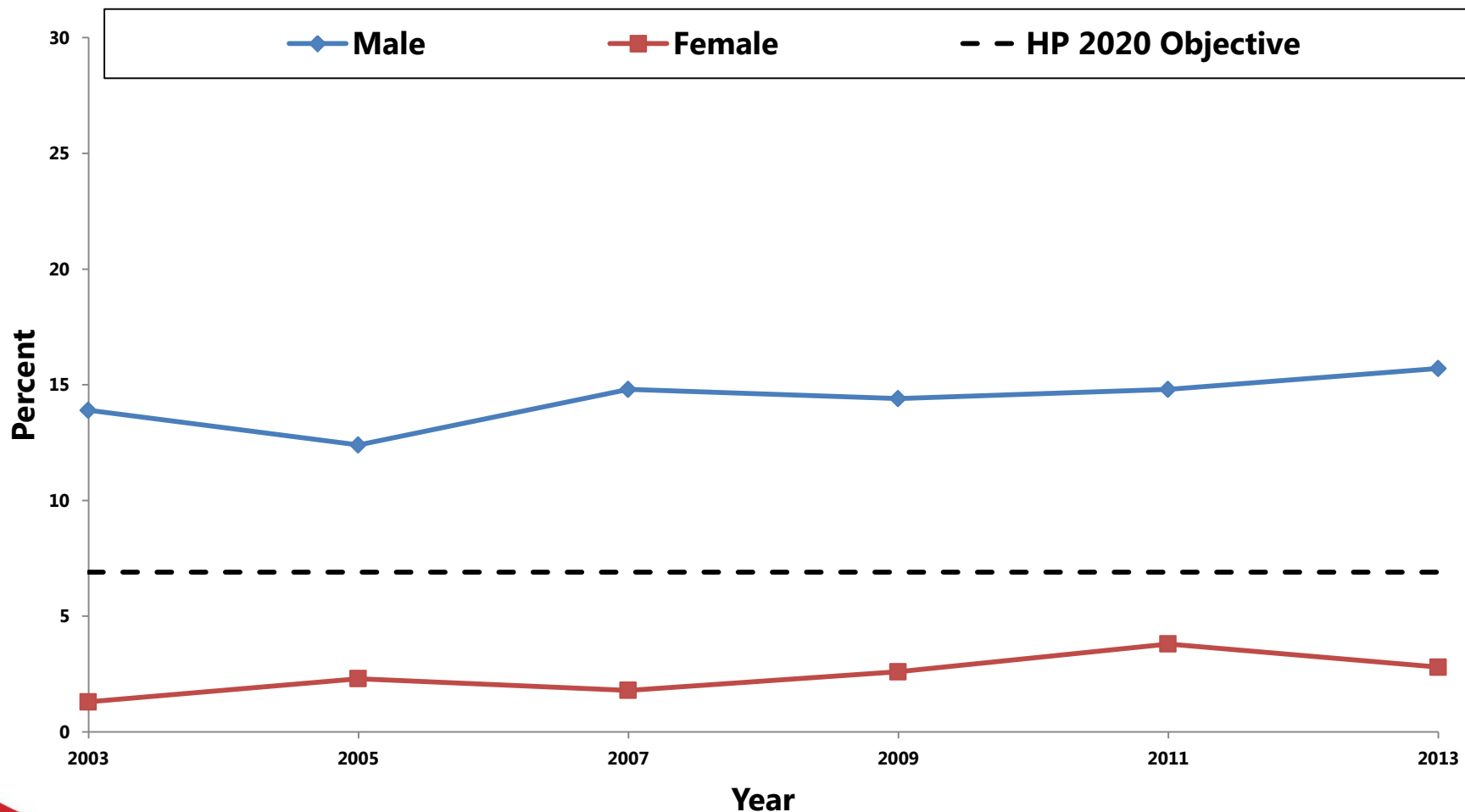
# Percent of High School Students Who Used Any Tobacco Product, by Sex



# Percent of High School Students who Smoked Cigarettes, by Sex

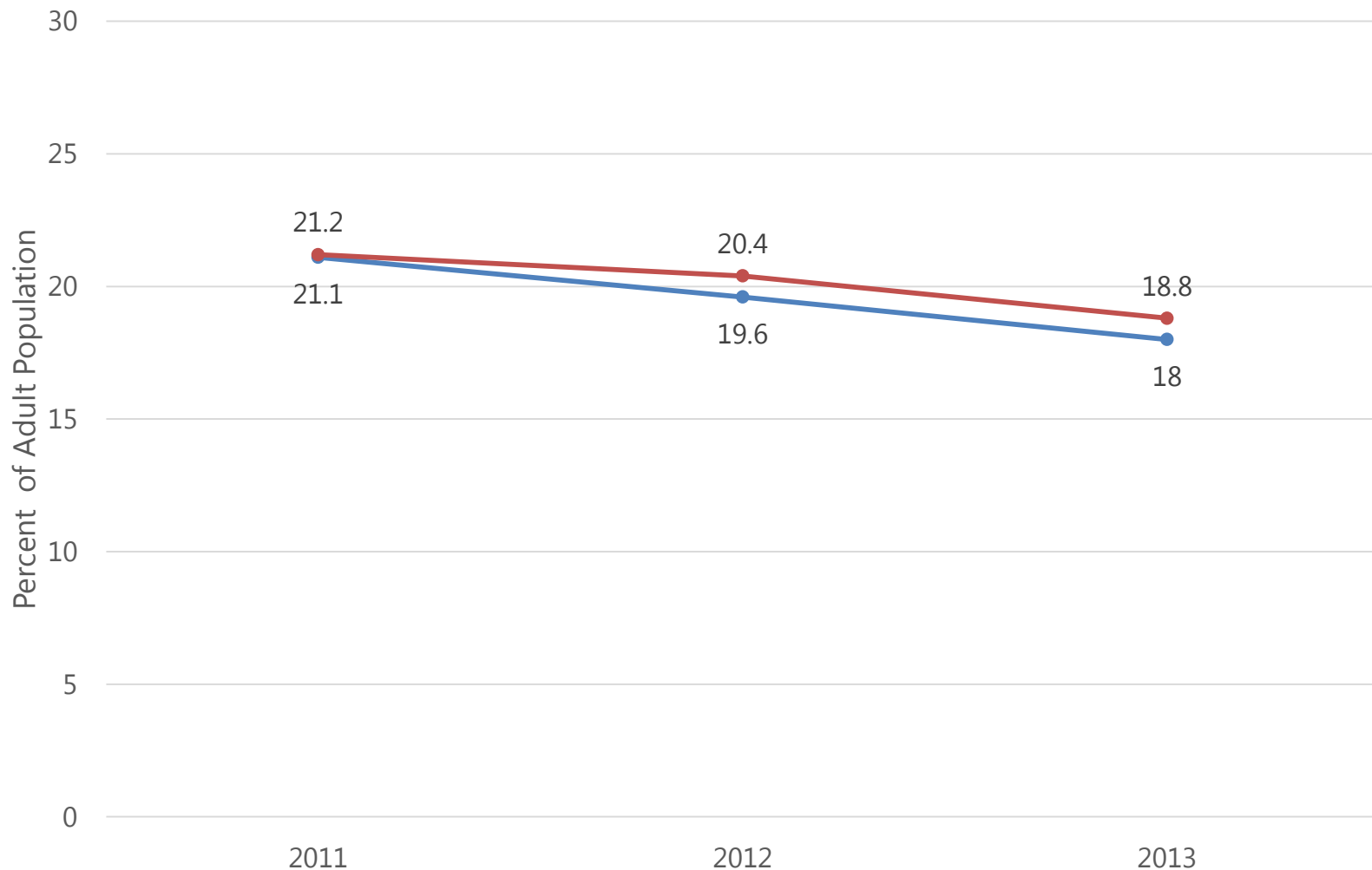


# Percent of High School Students Who Used Smokeless Tobacco, by Sex





# Current Adult Smoking Prevalence



\*Note: 2013 US smoking prevalence is based on the Early Release of Selected Estimated from the National Health Interview Survey

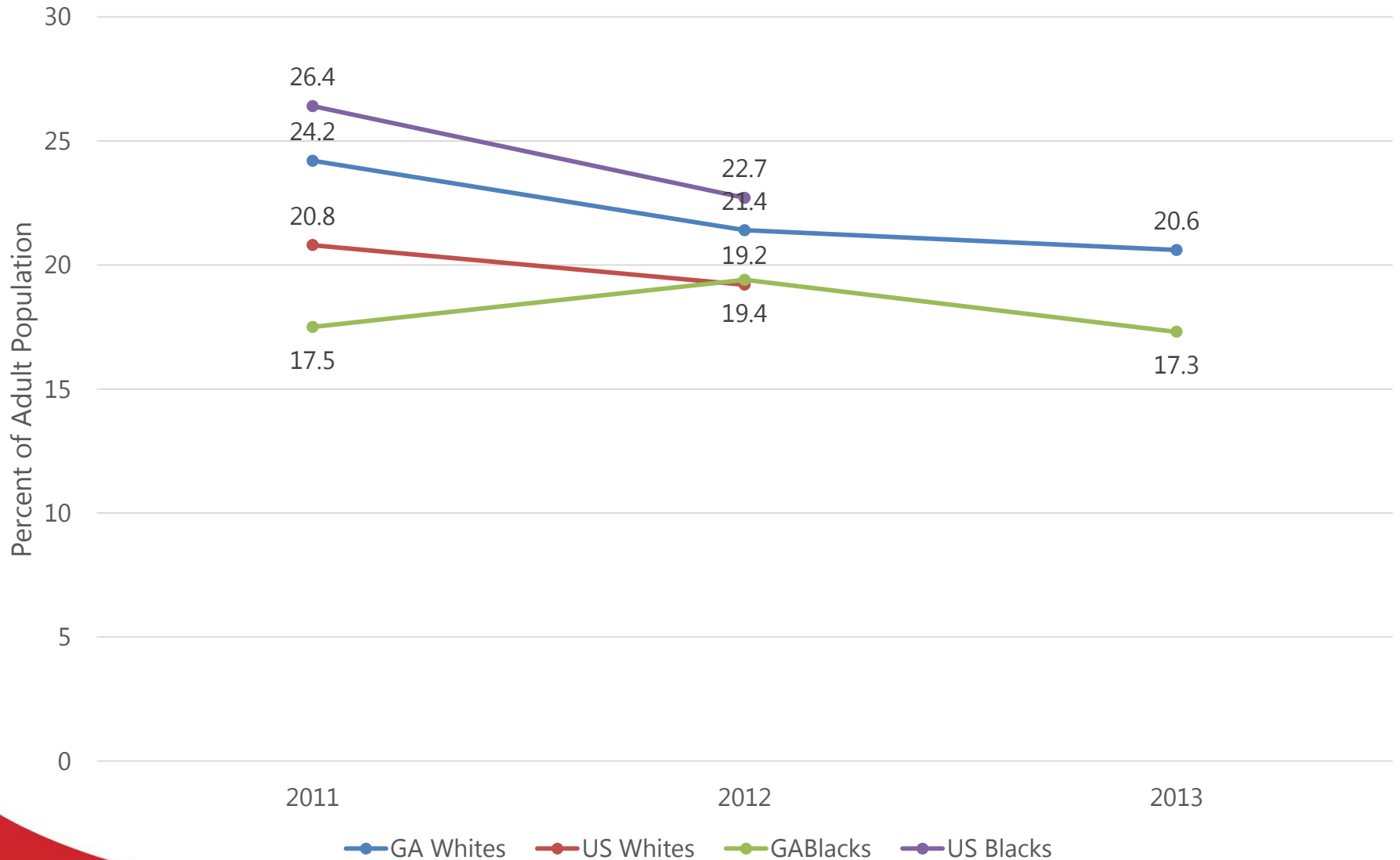
—●— U.S. —●— Georgia

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# Current Adult Smoking Prevalence, by Sex



# Current Adult Smoking, by Race

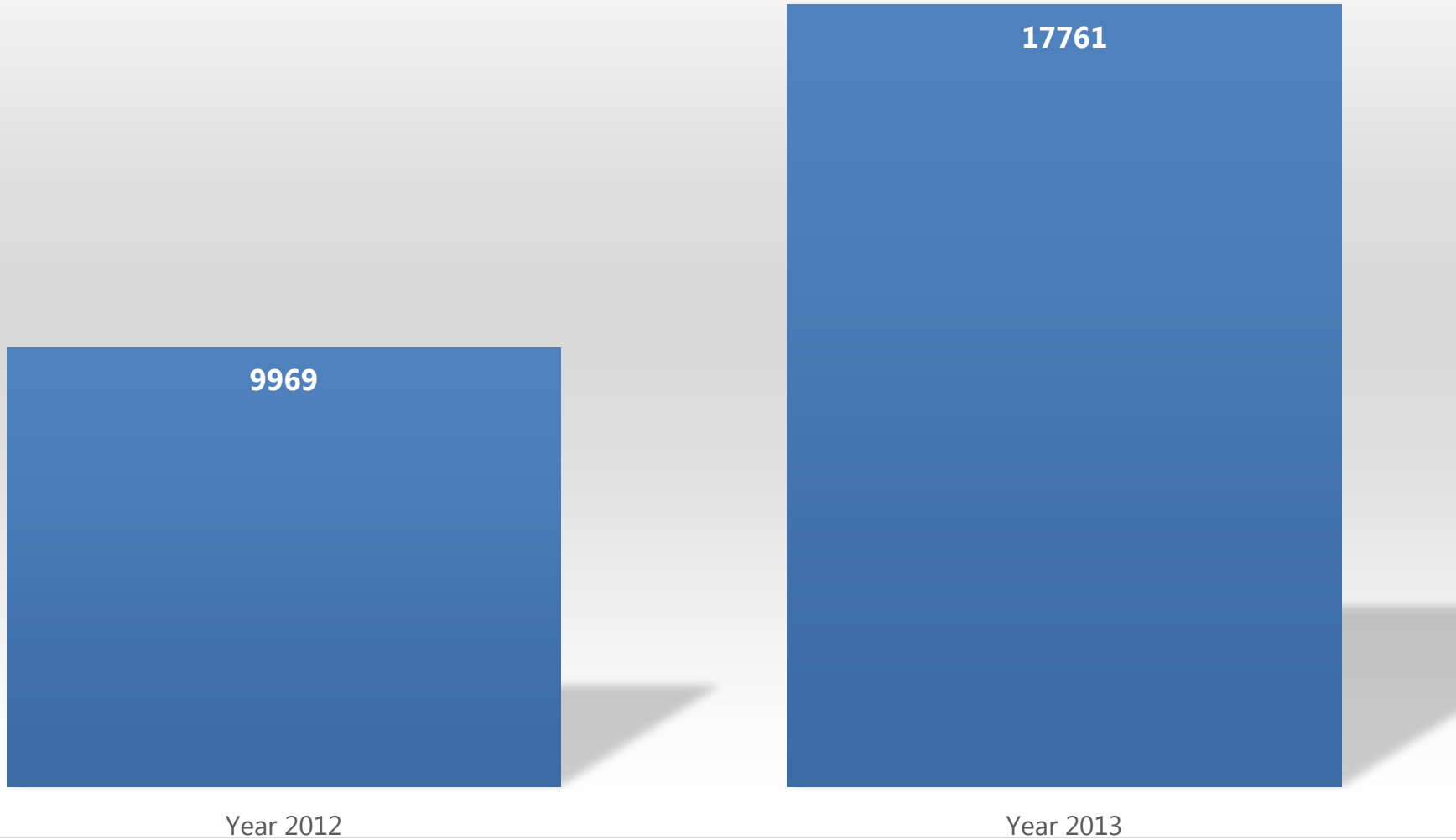


# GTUPP UPDATES

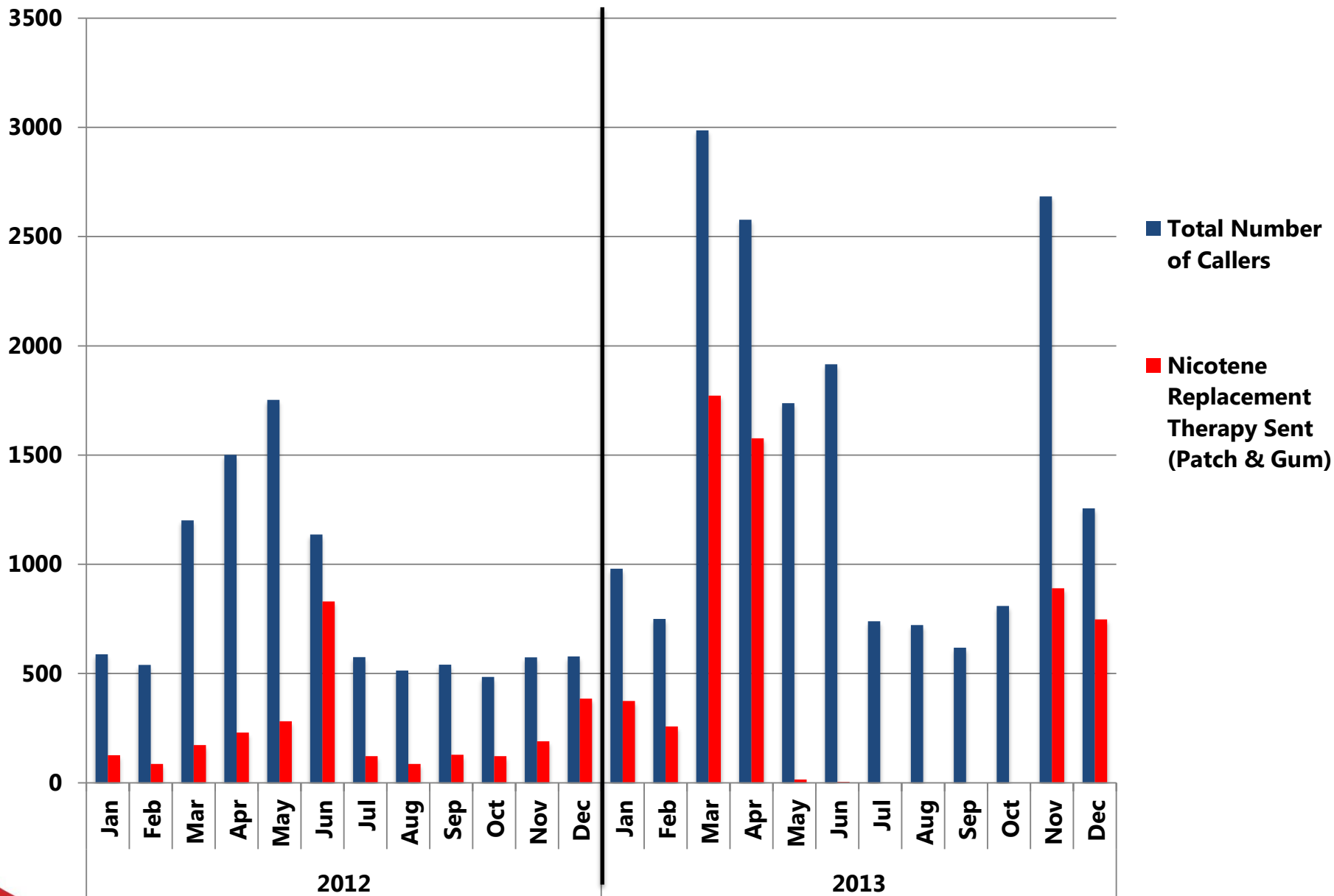
# **DPH-DCH Medicaid Match Memorandum of Agreement**

- **Signed both agencies Summer 2014**
- **Estimated to generate \$170k in match in Year 1**
- **Georgia Department of Public Health (DPH)**
  - GTQL will continue to deliver evidence-based tobacco cessation services and nicotine replacement therapies to all Medicaid enrollees
- **Georgia Department of Community Health (DCH)**
  - Reimburse the Georgia Department of Public Health for Medicaid allowable costs associated with the operation of the Georgia Tobacco Quit Line services provided to Medicaid enrollees

# TOTAL QUIT LINE CALLERS BY YEAR



# TOTAL QUIT LINE CALLERS AND NRTS SENT BY MONTH



# Healthcare Provider Training

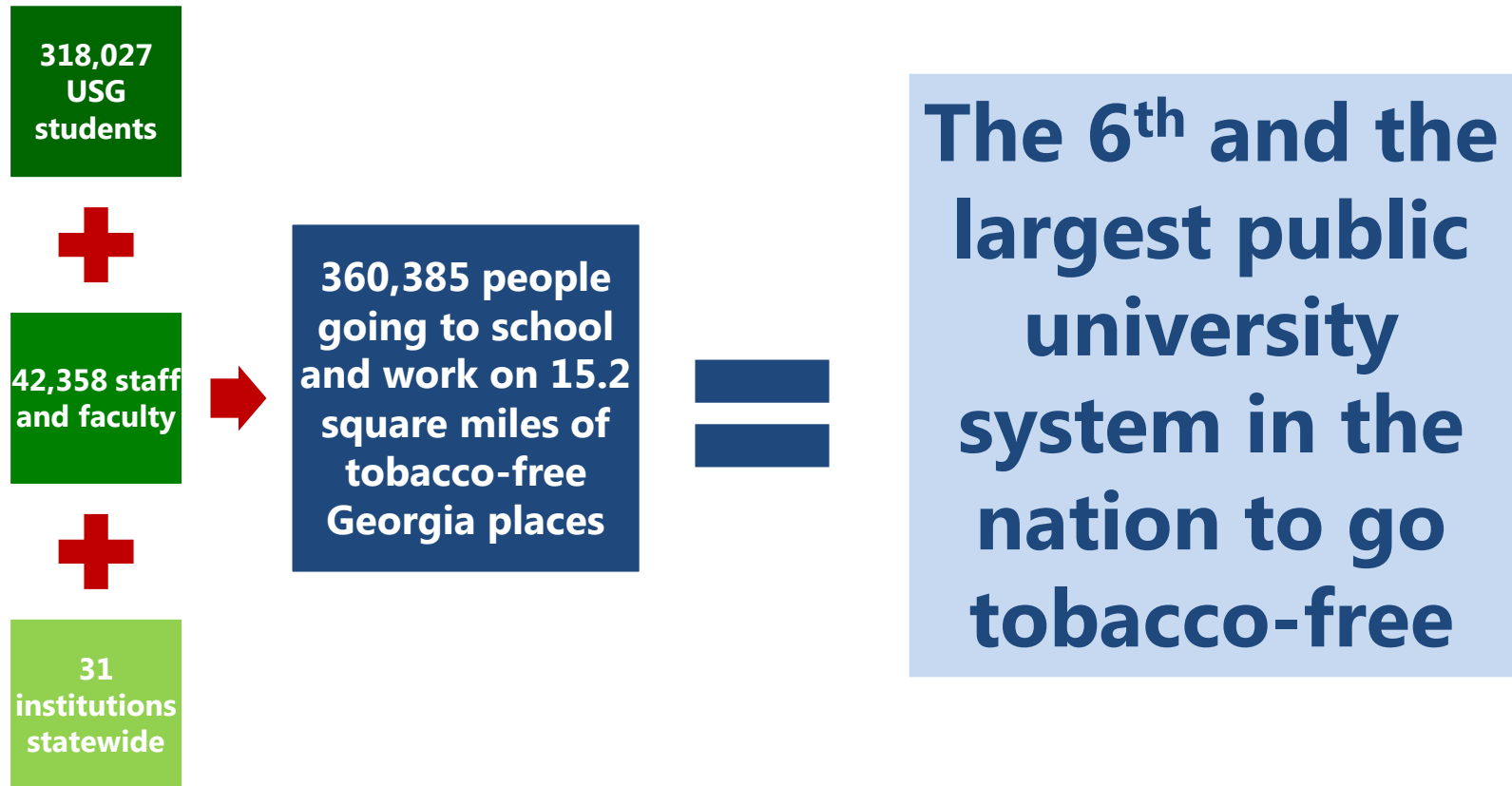
## Georgia cAARds Webinar Series

- **Webinar 8:** Online Healthcare Provider Training
  - Georgia Department of Public Health Website
  - Designed to support healthcare and public health professions in address tobacco use in various patient populations groups (e.g. pregnant women), including Medicaid patients
- **Webinar geared to assist professionals in treating tobacco use among their patients such as:**
  - Doctors and nurses
  - Clinical support professionals
  - Registered pharmacists
  - Certified Diabetes Educators



**LET'S DO THIS, GEORGIA!**

## **USG Tobacco-Free Campus Policy**



LET'S DO THIS, GEORGIA!

## Tobacco-Free Colleges & Universities

- University System of Georgia's tobacco-free campus policy effective date - October 1<sup>st</sup>
- 46 of 128 colleges and universities have now adopted the 100% tobacco-free campus policy
- 1<sup>st</sup> ever Tobacco-Free Colleges and Universities Summit
  - **DETAILS:** September 19<sup>th</sup> at UGA, School of Public Health
  - **PURPOSE:** To provide Georgia public and private colleges and universities the tools needed to establish and support a tobacco-free campus and present a step-by-step approach to tobacco-free campus policy adoption, implementation and enforcement.
  - **RESULTS:** Approximately 140 attendees from 32 colleges and universities along with staff from several PHDs and other partnering organizations were trained



## 2014 Healthy Youth Summit

- **PURPOSE:**
  - To educate and motivate youth on advocating for healthy change within their schools and communities focused on tobacco prevention, nutrition and physical activity.
  - Train adult leaders on motivating, empowering and supporting youth as advocates
- **DATE:** Friday, October 24<sup>th</sup> – Sunday, October 26<sup>th</sup>
- **LOCATION:** Callaway Gardens, Mountain Creek Inn
- **ATTENDEES:**
  - youth groups throughout Georgia and their adult leaders
  - DPH state and district staff
- **PARTNERS:** Georgia Tobacco Use Prevention Program, Georgia SHAPE, and Healthy Georgia Initiative

# **FEDERAL FUNDING APPLICATION**

# Application for Continuing Funding

- **Five year Cooperative Agreement – March 2015 to March 2020**
- **Annual funding = \$1,623,876 or a total of \$8,119,380 over five years**
- **Evidence-based strategies must encompass population based policy, system and environmental changes to—**
  - Reduce tobacco use
  - Eliminate secondhand smoke exposure
  - Reduce tobacco-related disparities and associated disease, disability, and death
- **Must plan, implement and evaluate evidence-based strategies statewide across four goal areas—**
  - 1. Prevent initiation among youth and young adults**
  - 2. Promote quitting among adults and youth**
  - 3. Eliminate exposure to secondhand smoke**
  - 4. Identify and eliminate tobacco-related disparities**

# GTUPP is a Comprehensive Tobacco Control Program

1. **State and community interventions**
2. **Mass-reach health communication interventions**
3. **Cessation interventions**
4. **Surveillance and evaluation plans**
5. **Infrastructure, administration and management**



# Target Populations and Most Affected by Tobacco Use in Georgia

- **Males**
- **Uninsured**
- **High school diploma or less**
- **Earn \$30,000 or less**
- **Age 18-24 years of age**
- **Pregnant/post-partum women**
- **Live in rural areas of the state**
- **Especially in the Waycross, Rome and Valdosta Health Districts**
- **Persons who identify as LGBT**



# Measurable Objectives—Next Five Years

- 1. Increase the # of youth advisory councils from 0 to 1 by March 2020.**
- 2. Increase from 0 to 5 an annual mass media campaign by March 2020.**
- 3. Decrease the percentage of young people who use tobacco from 13 to 9 by March 2020.**
- 4. Increase the legal age to purchase tobacco products in Georgia from 18 to 21 by March 2020.**
- 5. Increase the number of health plans that offer cessation coverage from 2 to 5 by March 2020.**
- 6. Increase the number of annual adult quit attempts from approximately 17,000 to 20,000 by March 2020.**
- 7. Increase the percent of adults GTQL callers referred by a healthcare professional from 17 to 19 by March 2020.**
- 8. Decrease the percentage of the population reporting exposure to secondhand smoke in the workplace from 24 to 22 by March of 2020.**
- 9. Increase the percentage of individuals who report living in a smoke-free home or those living in smoke-free housing from (TBD) to (TBD) by March 2020.**



# **Impact of Panel Expansion: The Universal Newborn Hearing Screening and Intervention Program**

Johanna Pringle, MPH  
Interim Director, Child Health Screening



# Have You Heard?

**Early Detection**



**Early Intervention**



**Improved Outcome**

**Be sure to have your newborn baby's hearing checked before leaving the hospital.**

# Universal Newborn Hearing Screening

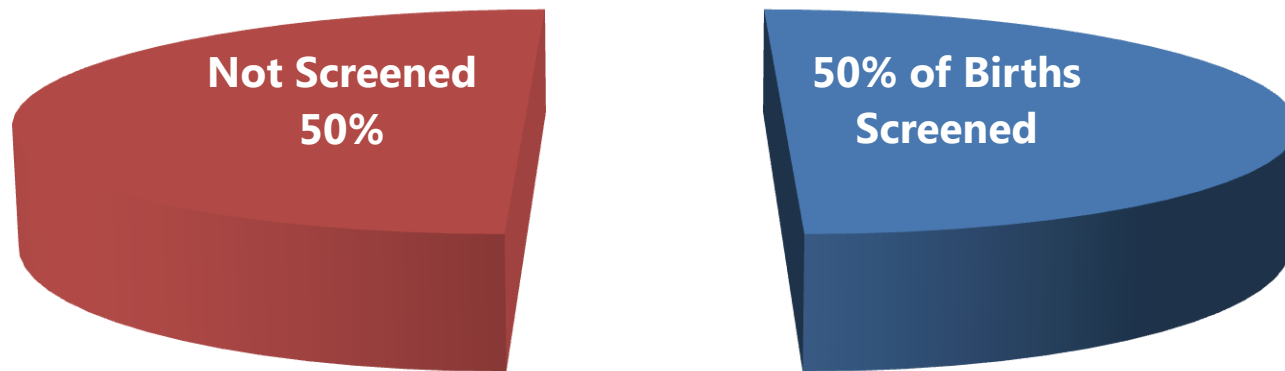
## OCGA 31-1-3.2

- Universal screening is beneficial
- Recommends universal screening
- Aims to screen 95% of Georgia's newborns before hospital discharge
- Mandates aggregate reporting

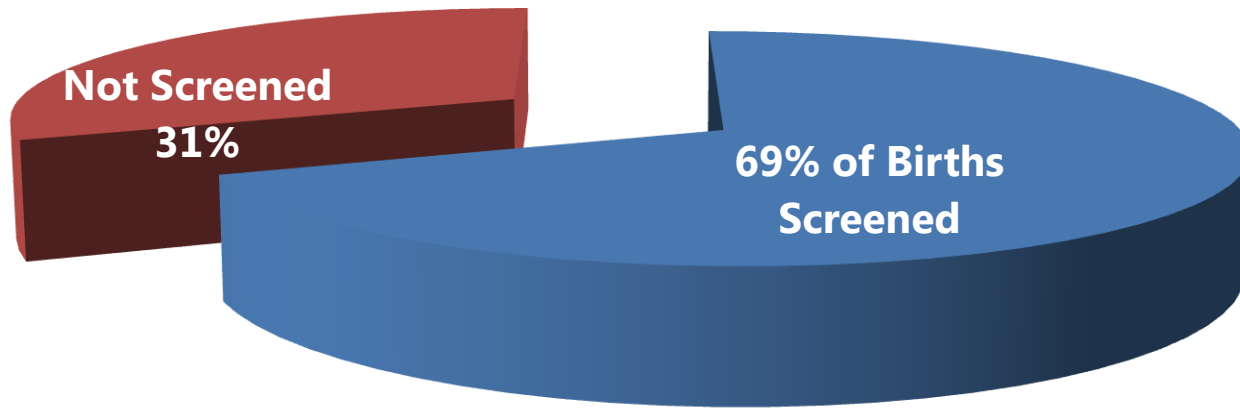
# Universal Newborn Hearing Screening and Intervention (UNHSI)

- UNHSI became an official public health program in 2001
- Newborn screening system includes:
  - Point-of-Care screening
  - Local public health follow-up and diagnosis
  - Specialized coordination to intervention services

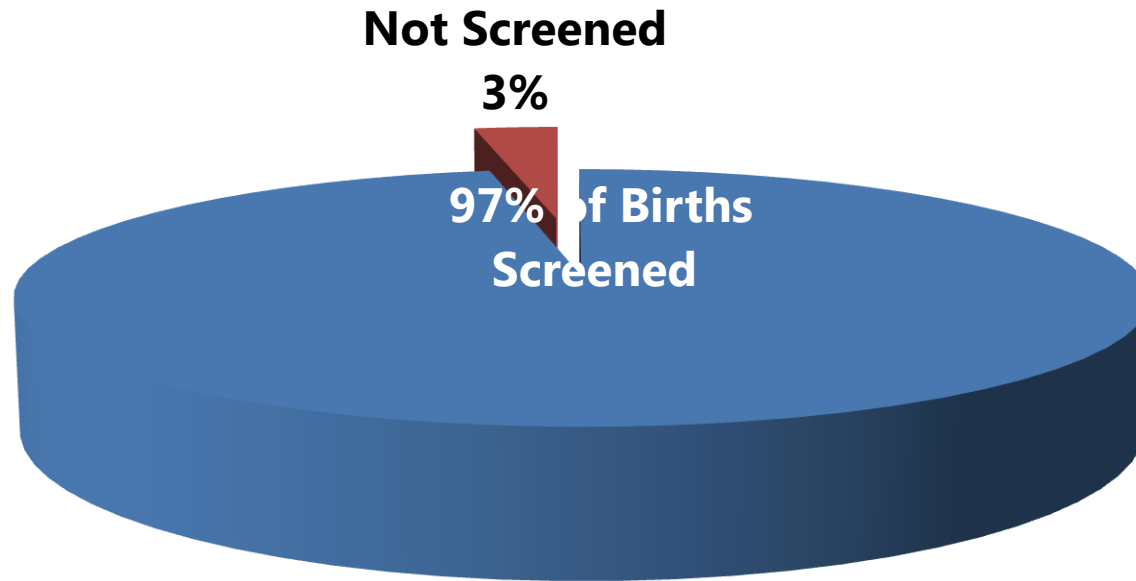
# Building a Screening System: 2000



# Building a Screening System: 2010



# Building a Screening System: 2012



# 2013 Hearing Loss Diagnoses





# Immediate Impact of Rule Change

## Before

Screening Recommended

Target goal is **95%**

Aggregate Reporting  
Mandatory

## After

Screening Required

Target goal is **100%**

Individual Reporting  
Mandatory

# Potential Impact

100% of  
Newborns

100%  
Patient  
Tracking

0 Missed  
Cases



# Recent Changes

- Individual reporting on the newborn screening card and the electronic birth certificate
- Electronic reporting for diagnosed cases
- Long-term Follow-up: 100 Babies Project

# Questions?



# Healthcare Transition Planning for Youth with Special Health Care Needs (YSHCN)

Donna M. Johnson  
Director, Child Health Projects

# Purpose

- What is Health Care Transition Planning?
- Why is Health Care Transition Planning important?
- What is the downside of not having a plan?
- What is involved in creating a plan?
- How is DPH supporting stakeholders?
- Who are our partners?

# What is Health Care Transition Planning?



**Systematically Preparing to Move  
from  
Pediatric to Adult Health Care**

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# Why is a Health Care Transition Plan Important?

- Approximately 750, 000 YSHCN (18 -21 year olds) in the United States transition from pediatric to adult health care annually <sup>AAP</sup>
- Optimize health and assist in reaching full potential
- Promotes continuity of developmental and age-appropriate care
- Longer life expectancy for YSHCN
- YSHCN, families, and physicians need guidance and support



# What is the Downside of Not Planning?

- Affects long-term health
- Increases the risk of developing secondary conditions
- Limits appropriate screenings for adult risk factors, including reproductive health
- Increases use of hospital Emergency Rooms (ER) for care
- Increases hospitalization rates

# What is Involved in Creating a Plan?

## Planning

- Pediatric Physician
- YSHCN
- Family

## Explaining

- Pediatric Physician
- YSHCN
- Family

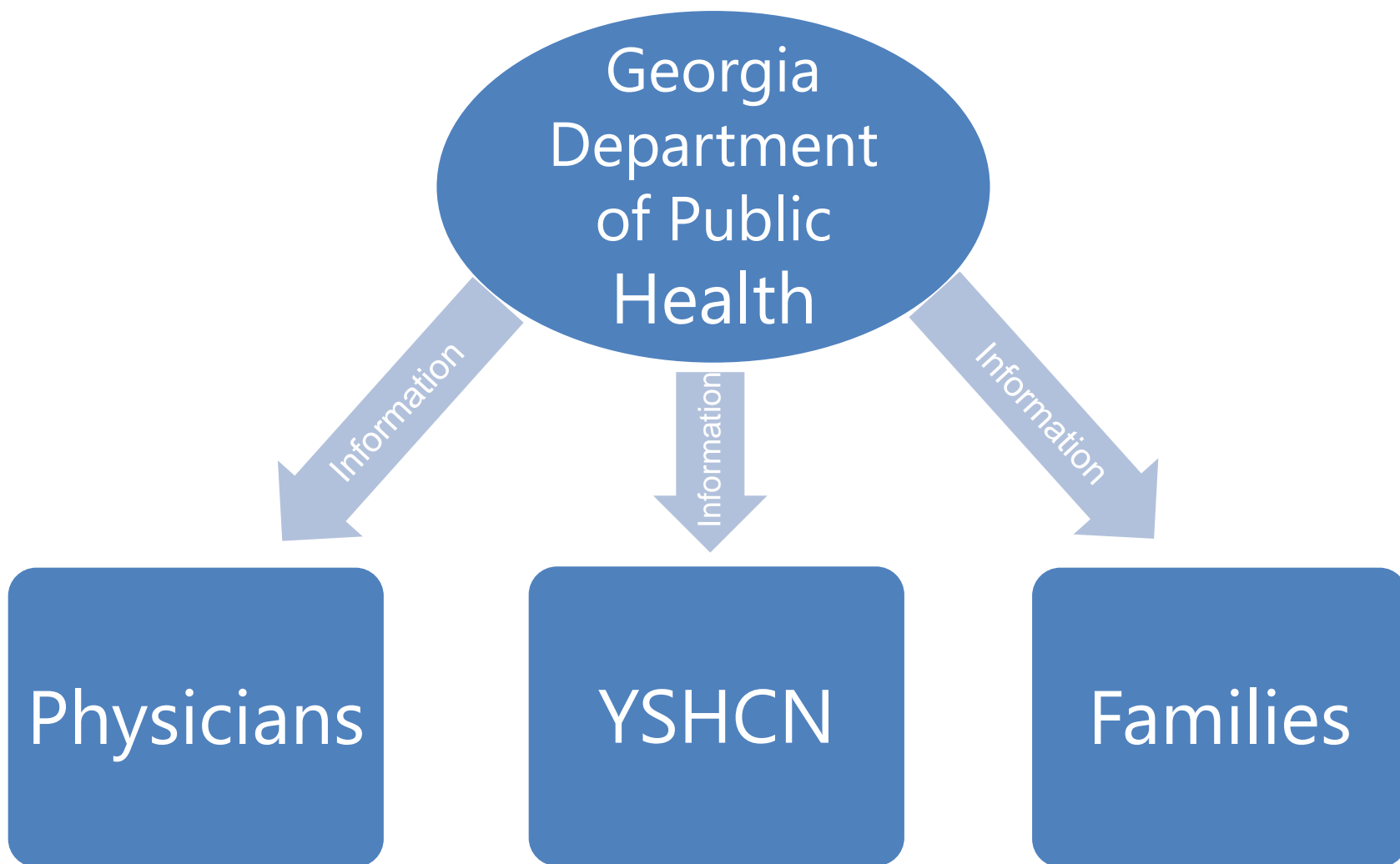
## Helping

- Pediatric Physician
- YSHCN
- Family

## Moving

- YSHCN
- Family

# How is DPH Supporting Stakeholders?



# DPH Supports Physicians

## Model of Care

- Replication of the Sickle Cell Transition Clinic at Children's Healthcare of Atlanta at Georgia Regents University

## Publications

- *"Physician's Guide to Support Health Care Transition"*
- *"Guide for Developing a Health Care Transition Program"*

## Trainings

- Physician's Guide
- Sickle Cell Anemia
- Autism
- Diabetes
- ADHD
- Developmental Disabilities

## Outreach

- Pediatric & Family Practice Physician Stakeholder's Meeting
- Transition Taskforce

# DPH Supports

## Youth with Special Health Care Needs

<b>Videos</b>	<b>Publications</b>	<b>Children's Medical Services</b>	<b>Outreach</b>
<ul style="list-style-type: none"><li>• Spina Bifida</li><li>• Down Syndrome</li><li>• Asthma</li><li>• Epilepsy</li><li>• Diabetes</li><li>• Cerebral Palsy</li><li>• Autism</li></ul>	<ul style="list-style-type: none"><li>• Transition Guide &amp; Workbook</li><li>• Booklet – <i>“Taking Charge of My Health Care”</i></li></ul>	<ul style="list-style-type: none"><li>• Transition Plans for 90% of (1,298) youth 16-21 years of age in CMS</li><li>• Training Peer Mentors</li><li>• Transition Peer-to-Peer meetings</li></ul>	<ul style="list-style-type: none"><li>• Transition &amp; Leadership Summit</li><li>• Transition Facebook page for YSHCN</li><li>• Transition web page on DPH website</li></ul>

# DPH Supports Families

## Webinars

- Imbedding Health Goals in the IEP
- What is Healthcare Transition?
- Transition for specific conditions

## Publications

- *“Guide for Parents Transitioning YSHCN from Pediatric to Adult Care”*

## Children’s Medical Services

- Parent & Caregiver Peer Support Meetings

## Outreach

- Youth & Family Stakeholder’s Meeting
- Transition Facebook page for parents
- Georgia DOE Transition Guide

# Partners



American Academy of Pediatrics  
DEDICATED TO THE HEALTH OF ALL CHILDREN  
Georgia Chapter



**Sickle Cell Foundation of Georgia**



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# Health Care Transition Planning



Donna M. Johnson  
Director  
Child Health Projects



# Vital Records Transformation

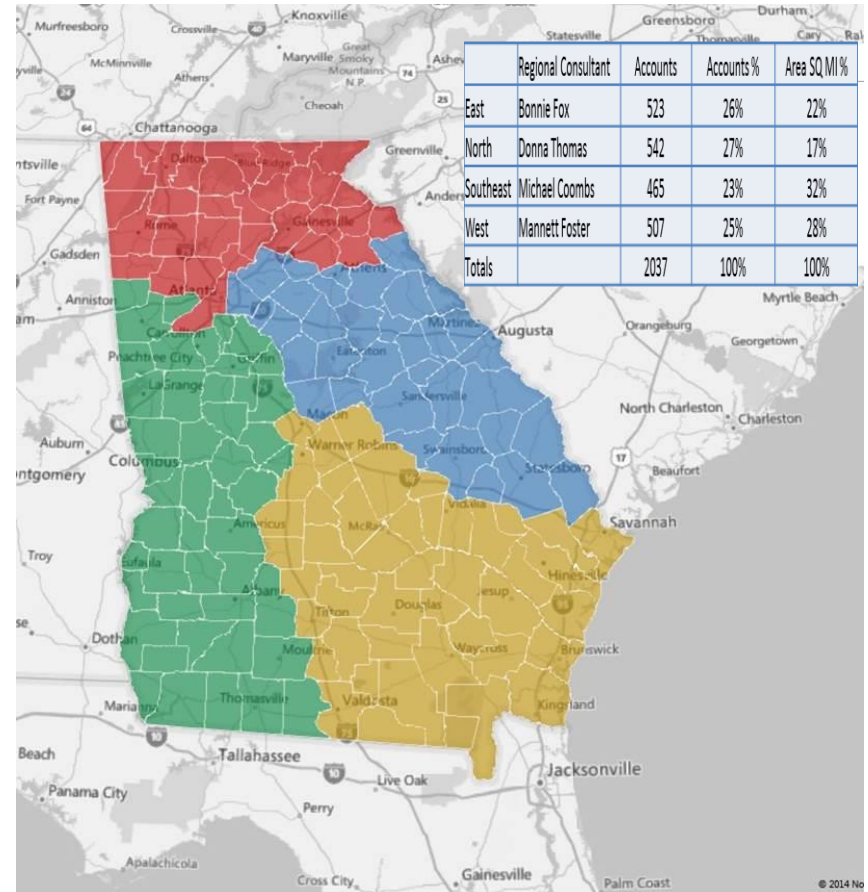
Donna Moore  
State Registrar, Vital Records Director

# Transformation through People

- New Leaders Since August: Director, 3 Deputy Directors, Call Center Supervisor, 2 Regional Consultants
- Organizational Transformation underway; from the top down, leaders at every level involved as we roll out and staff the new organization
- Remembering our mission: serve as the data foundation for health programming and serve as the source for issuance of vital event certificates
- Vital Records was the number one priority as voted by the District Health Directors and DPH Leadership in their August strategy session in Macon

# Data Integrity Strategy

- “Integrity” defined as completeness and accuracy via how data is **created**, modified, reported, & retained
- 4 Regional Consultants in territories working with **stakeholders who create data**
  - County Registrars, Birth Centers & Hospitals, Hospice Facilities, Nursing Homes, Funeral Homes, Coroners
  - Standards, policies, procedures, guidelines
  - Training curriculum & delivery, best practices
  - Implementation of plans, objectives, measures of success



# Transformation through Processes

- Refreshing existing processes for efficiencies and effectiveness
  - Reducing backlogs of work
  - Eliminating non-value added and duplicative activities
  - Using technology as an enabler to move from paper to electronic processing
- Fee & Issuance module – a Game Changer
  - Planning phase
  - System will take us from fragmented, hidden process to a fully automated, connected, transparent order fulfillment process
  - From request for a record to automated payment collection to tracking of certificates issued statewide
  - Keys to success include working with our County Registrars for design input, feedback, implementation of governance and standards, user training for launch in Summer 2015

# Transformation via Electronic and Physical Space

- Co-location of all Vital Records
  - Digitization Project
    - Let RFP by November 1, Selection of vendor in early 2015
  - Negotiations with State Archives for vault space
  - Sell Skyland property; and find a new home for Vital Records organization

**CAPUS**  
**(Care and Prevention in the United States)**  
**Resource Hub Demonstration**

Kate Musgrove, PhD  
CAPUS Resource Hub and Community  
Mobilization Coordinator

# Georgia CAPUS Demonstration Project

- CAPUS (Care and Prevention in the United States) Demonstration Project
  - <https://dph.georgia.gov/CAPUSProject>
  - Multi-agency federal partnership:
    - CDC lead federal agency
  - Georgia awarded \$2.5 million per year for 3 years
    - Funded 9/20/12 – 9/29/15
  - GA one of 8 states to receive award
    - LA, MS, NC, TN, VA, IL, MO
  - Reduce HIV/AIDS-related morbidity / mortality among racial and ethnic minorities



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# Georgia CAPUS Goal

- Create more efficient and more effective systems to improve:
  - HIV testing
  - Linkage to and retention in care
  - ART adherence
- Specifically targeting highest risk minority populations



# Georgia CAPUS Project Components

- Metro Atlanta Testing and Linkage Consortium (MATLC)
  - Meetings
  - Trainings
- Anti-Stigma Initiative
  - Funding for community based organizations (CBOs) through RFPs
  - Anti-Stigma Group
  - Safe Space
  - MSM Symposium
  - Kaiser Speak Out Campaign
- Grant in Aid (GIA)
- Corrections testing / linkage
  - Corrections Linkage Coordinator GA DOC
  - Testing / linkage DeKalb County Jail
- Re-establish Antiretroviral Treatment Access Study (ARTAS) at Grady Infectious Disease Program (IDP)
- Healthy Steps App
- Resource Hub

# Resource Hub Overview

- Georgia CAPUS Care Portal
  - [www.gacapus.com](http://www.gacapus.com)
- Purpose –statewide online resource
  - Primary resource in Georgia for assisting statewide testing, prevention and care for HIV/AIDS, and related psychosocial and social determinants of health
- Collaborative development
  - Department of Public Health
  - Health districts
  - Fulton/DeKalb
  - HIV agencies / Community Based Organizations (CBOs)
    - AID Atlanta Hotline



# Resource Hub Overview (cont.)

- Overarching goals:
  - Improve HIV results, particularly among racial and ethnic minorities
  - Empowerment
  - Connected / intact system of HIV care across state
  - Decreased stigma
- Four main components:
  - Eligibility Portal
  - Mapping and Testing
  - Resource Directory
  - Medical Information



# Live Demo

[www.gacapus.com](http://www.gacapus.com)

# Closing Comments

Kathryn Cheek, MD, FAAP  
Chair

The next Board of Public Health meeting  
is currently scheduled on  
Tuesday, December 9, 2014 @ 1:00 PM.

To get added to the notification list for upcoming meetings, send  
an e-mail to [huriyyah.lewis@dph.ga.gov](mailto:huriyyah.lewis@dph.ga.gov)