

COMMUNITY ALLIANCE OF SARASOTA COUNTY
Planning and Outcomes Committee

April 16, 2010 Meeting Summary

Present: Ken Alexander, Sarasota Memorial Hospital/Bayside
Janice Baxter, Healthy Start Coalition
Elmer Berkel, Human Services Advisory Council
Nancy DeLoach, Sarasota County Health and Human Services
Patricia Egan, Sarasota County Health Department
Kari Ellingstad, Sarasota County Health Department
Linda Glover, Sarasota County Health Department
Janet Kahn, Early Learning Coalition
Jamie Mahadeo, Sarasota County Health and Human Services
Janice Merritt, Sarasota County Health Department
Shelley Rence, Sarasota County Health Department
Pauline Tracy, Sarasota County Health and Human Services

Janet Kahn welcomed the members. Self-introductions were made. The March 19, 2010 meeting summary was reviewed and approved without changes.

Review of Health Care Outcome Targets

Janet Kahn explained why the POC has asked the Health Department, CHIP, and Healthy Start to attend this meeting. The POC is seeking to update its existing database of outcome targets to better develop meaningful and measurable outcomes that the community can track to evaluate the success of existing programs and the need for new programs.

Discussion ensued regarding how the targets were initially established and where the data is currently gathered. Ken Alexander added that the POC is seeking data that is collected annually and will not be abruptly ended or only gathered for a short period of time. He stressed that the POC is looking for additional targets as well. If there is anything that they feel is missing from the current list of outcome targets, it can be added. It was noted that these targets are used by nonprofit agencies to apply for grants.

Janet mentioned the dilemma that the POC is faced with each year – the level at which to set targets. The committee struggles each year to decide what levels would be realistic.

It was suggested that the POC may want to look at the following areas for additional targets:

- Access to health care
- Obesity, nutrition, BMI (students) (collected by the Health Dept)
- Health care quality
- Hypertension
- Diabetes

COMMUNITY ALLIANCE OF SARASOTA COUNTY
Planning and Outcomes Committee

April 16, 2010 Meeting Summary

- Asthma, allergies
- Cardiac issues
- Smoking, tobacco use
- Dental care, particularly for pre-school children

The consensus of the group was that BMI would be an excellent addition to the outcome targets. Also, dental care for pre-school children is a real problem particularly because everyone drinks bottled water. The lack of fluoride can seriously impact children's teeth. Public education in this area is particularly needed. For example, when the parent shares an eating utensil with a child, they are also spreading any dental problems they may have to their children.

Each target was reviewed individually:

The infant mortality rate will not exceed 4.0 per 1,000 live births expressed as a three year rolling average.

Janice Baxter explained that Healthy Start is part of a committee that reviews infant deaths. They report back to the community on whether there are trends being seen that can be impacted by new or enhanced programs. For example, the bassinet program was a result of an increasing trend in infant deaths a few years ago.

The Health Department staff said that they would like to see the infant mortality rate not to exceed 3.8%. Nancy noted that the current data shows a rate of 3.7%. The statistics are gradually declining each year. Janice agreed that 3.8% is a good target. That is where the Coalition has set their target.

The percentage of low birth weight births will not exceed 6.5%.

The Health Department reports on this number, but the state does not set an outcome target. The data is used for tracking purposes and to observe trends. Healthy Start has kept their target at 6.5%.

91.0% of all pregnant women will enter prenatal care during the first trimester of pregnancy. 80% of teen mothers will enter prenatal care during the first trimester of pregnancy.

Janice Baxter mentioned that the prenatal care targets are high. The target for teen mothers is particularly high. Ken Alexander added that the POC likes to develop targets that make the agencies stretch, but they don't want to make them unachievable. It was noted that teens often don't recognize pregnancy symptoms and are in denial about it for many

COMMUNITY ALLIANCE OF SARASOTA COUNTY
Planning and Outcomes Committee

April 16, 2010 Meeting Summary

months significantly delaying prenatal care. The consensus was that 75% may be a more realistic target for teen mothers. Healthy Start has left their target at 80% but that is not a target they really utilize, nor do they feel it is achievable.

With regard to adult prenatal care, in Sarasota County, the issue is with undocumented women who refuse to come in for care because of their immigration status. This will probably not change until the immigration laws change.

The birth rate for mothers aged 10-14 will not exceed 1.0 expressed as a three-year rolling average. The birth rate for mothers aged 15-17 will not exceed 14.0 expressed as a three-year rolling average.

Teens often don't understand how pregnancy happens which affects the birth rate as well as the prenatal care rate.

The repeat teen birth percentage will not exceed 12.0% expressed as a three-year rolling average

There is a Cysis Program at North Port High that has been very successful in integrating these girls back into the general population rather than segregating them from other students which is typical of Cysis Programs. It was the general consensus of the guests that integrating girls in classes with other students will have a positive impact on both. Riverview High School is developing a Cysis Program based on this hybrid model. They believe that girls with children will be less likely to have a repeat birth and the others will be able to observe and decide that they don't want to follow in their footsteps.

This programmatic change may impact the repeat birth statistics in a couple of years.

97.5% of all children will be fully immunized at kindergarten entry.

It was noted by the Health Department staff that another level of scrutiny regarding immunizations is at 7th grade. Also, it was felt that 97.5% as a target for kindergarten may be too high. Sarasota actually achieved 95.2% this year. This result is a compilation of the results from both public and private schools. The private schools typically don't reach the same level of immunization as public schools because they are reluctant to expel paying students. This year, the public schools achieved 95.6% while the private schools achieved 90.4%.

COMMUNITY ALLIANCE OF SARASOTA COUNTY
Planning and Outcomes Committee

April 16, 2010 Meeting Summary

The Health Department staff was able to explain that some of the years when the statistics dipped were caused by a lack of availability of the vaccine. They also noted that these numbers do not include those who voluntarily submit religious exemptions. This number goes up each year. It is particularly high in Sarasota County compared to other Florida counties. This does not necessarily mean that their religion prohibits immunization; it could also mean that the parents don't believe in immunizations.

The rate of reported new AIDS cases will not exceed 12.0 per 100,000 persons. The rate of reported HIV cases will not exceed 10 per 100,000 persons.

No one was at the meeting who deals specifically with AIDS/HIV cases. The POC needs to talk with Joan or Virginia McGowan at the Health Department.

The annual report for School Health is on the Health Department website. It may have some data the POC would be interested in.

Presentation to the BCC Update

Everyone in attendance at this POC meeting was also in attendance at the BCC meeting. No update was provided. Discussion ensued regarding the success of the presentation and the change to a systems approach for the policy framework which may eventually change the way the outcome targets are developed.

Next Meeting

Nancy DeLoach mentioned that it would be nice if one of the people who came today for the meeting could attend regularly. Janet Kahn asked that committee membership be added to the agenda for next month. It was suggested that Kari Ellingstad be invited as a regular member of the committee.

The next meeting of the Planning and Outcomes Committee is scheduled for May 21, 2010 at 11:00 a.m. at the Health and Human Services Building, 2200 Ringling Boulevard in the Auditorium.