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# Draft Strategic Plan

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**Office of Minority Health and Health Disparities**

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## EXECUTIVE SUMMARY

The goal of the Vermont Office of Minority Health and Health Disparities is to improve the health status of underserved, uninsured, rural and minority populations of Vermont. The Office of Minority Health and Health Disparities is committed to working proactively to build the Vermont Department of Health's capacity to provide integrated, efficient and effective public health services to improve the health and well being of minority and health disparate populations in Vermont. The Vermont Department of Health utilizes the Federal Office of Management and Budget's Directive 15 definition of Minority Health which includes: Black or African American; Asian; American Indian or Alaska Native; White including Hispanic or Latino; Native Hawaiian or Pacific Islander.

In addition to using the Federal Office of Management and Budget's Directive 15 definition of Minority Health to measure the wellness of racial and ethnic minority persons, Vermont focuses on health disparities due to socioeconomic status, geographic area, gender, language, immigrant status, customs, other cultural factors, sexual orientation, disability or special health need.

In Vermont, minorities comprise nearly 4% of the state's total population of 623, 050 people (U.S. Census, 2005)<sup>1</sup>. Minorities include the following racial and ethnic group populations: Black or African-American (3, 738), American Indian or Alaskan Native (2,492), Asian (6,231), Hawaiian or Other Pacific Islander (141) and Hispanic or Latino (6,231). There are 88, 472 Vermonters with disabilities. The number of Vermonters that were of two or more races is 6, 854 and approximately 23,599 Vermonters are foreign born. Additionally, 5.6% of Vermont families live below the poverty level and 9% of all Vermonters live below poverty. Finally, demographers have shown that Vermont has the highest concentration of lesbian, gay, bisexual, transgendered households in the United States (Gates and Ost, 2004)<sup>2</sup>.

There is evidence that illustrates a disproportionate health impact of disease burdens experienced by minorities in Vermont. It is important to note that this aggregate minority health data often does not reveal the level of severity in health status and outcomes that particular minority groups experience. As such, a good deal is known about why minorities are hardest hit with some conditions, like HIV/AIDS, but less is known about how to reduce the burden of these illnesses.

It is still unclear why minorities are disproportionately affected with other conditions, such as certain cancers. The Vermont Office of Minority Health and Health Disparities supports targeting efforts to educate and promote community level disease prevention activities which will lead to better health for minorities, and all Vermonters.

Acknowledging health disparities and eliminating the disproportionate burden of death and disability among minority Vermonters will also benefit the state economically. More

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<sup>1</sup> US Census Bureau, 2004.

<sup>2</sup> Gates and Ost (2004) Gay and Lesbian Atlas. Washington, D.C.: Urban Institute Press.

people will be healthy, available to work, gain economic independence and contribute to the health and well being of Vermont.

The Vermont Office of Minority Health and Health Disparities' strategic plan addresses the following set of priorities:

- Reduce health disparities within the underserved, uninsured, rural and minority populations;
- Support better inclusion of preventive health care services in the minority community;
- Encourage the expansion of health care providers and quality practice management in the underserved, uninsured, rural and minority populated areas;
- Advocate for state and national health policies that support the underserved, uninsured, rural and minority initiatives that correspond to Vermont Department of Health priorities.

These priorities focus on four components:

1. Increasing Access to Health Care;
2. Promoting Cultural Competency;
3. Advocating for reduction and ultimately the elimination of health disparities in Vermont; and,
4. Assessing and Addressing Minority Priority Health Issues (such as Cancer, Cardiovascular Disease, Diabetes, HIV/AIDS, Substance Abuse, and Mental Health).

This plan identifies formalized goals, objectives, action steps and strategies needed to accomplish the Vermont Office of Minority Health and Health Disparities' mission. This strategic plan is a compilation of the planning efforts of the Vermont Department of Health (VDH), The Office of Minority Health and Health Disparities (OMHHD) and the various Minority Health Advisory Committees. The primary charge of the Minority Health and Health Disparities Strategic Plan is to advise and provide recommendations to the Commissioner and the Vermont Department of Health (VDH) on how best to improve the health of minority and health disparate populations in Vermont.

## INTRODUCTION

The Vermont Office of Minority Health and Health Disparities Strategic Plan defines its leadership role in raising levels of awareness, engaging stakeholders, and identifying new and best practices to break the cycle of inequalities in access to health care and health disparities in Vermont. To address the problem of equal and adequate access to health care and quality of life for Vermonters, the strategic plan will be used in coordination with the *Healthy Vermonters 2010* and other statewide public health initiatives, such as the *Vermont Blueprint for Health*<sup>3</sup>, to improve the overall health status of minorities and ultimately eliminate health disparities in Vermont's populations.

In 2004, the Vermont Office of Minority Health and Health Disparities (OMHHD) convened a series of committees comprised of members from minority groups to develop, implement, and evaluate this strategic plan to improve access to health care services in Vermont's minority communities. Nationally, economic poverty continues to rise and is especially prevalent in low-income, minority and other communities that experience health disparities. These communities are at higher risk for such serious diseases as obesity, stroke, diabetes, cancer, youth pregnancy, heart disease and HIV/STDs, as well as with depression and other mental health conditions and alcohol and drug dependency. These medical and mental health conditions disproportionately affect racial and ethnic minority populations, and those of lower socioeconomic status. These communities require better access to healthcare and self management, yet they are the most likely to be medically underserved.

The OMHHD recognizes that it cannot, by itself, solve these public health challenges. A partnership with community, academia, health professionals, business organizations and continued support within the Vermont Department of Health (VDH) is the key. The OMHHD accepts its leadership role in improving public health services for minorities in Vermont. The OMHHD is committed to attaining the highest level of prevention for minority Vermonters. The OMHHD must meet the challenge to ultimately eliminate health disparities in Vermont by seeking to capitalize on what we already know through data and information. It strives to meet the challenges to understanding the forces contributing to health disparities (such as racism, classism, sexism and homophobia) and implement strategies toward parity of public health systems throughout Vermont while also forging and establishing partnerships to achieve better health outcomes.

The increase in health disparities in the United States over the past two decades has been fueled by a complex interplay of lack of access to healthcare, environmental, social, economic, and behavioral factors, acting on a history of cultural, income and institutional inequalities. The OMHHD seeks to provide leadership in fostering unprecedented healthcare opportunities and work towards equity in public health for all. Left unabated, the escalating rates of chronic diseases in the minority and other health disparate populations will place a severe burden on the public health system of Vermont.

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<sup>3</sup> See: <<http://healthvermont.gov/blueprint.aspx>>, Accessed June 27, 2006.

The OMHHD recognizes that addressing adequate access to health care and health disparities in the minority, immigrant and low-income communities is a formidable challenge. The strategic plan will encourage the involvement of top decision makers in government, the health care industry, academia and diverse community leaders, including faith based groups, community organizations, and civil rights groups. Improving access to minority health is a problem that Vermont can solve and can be attainable with determined political will and the strategic placement of resources. Broad based coalitions and partnerships are needed to make significant progress in implementing this strategic plan. Improved access to health care for all minorities and other health disparity communities will one day be a reality in Vermont. The OMHHD welcome the challenge to improve access to care so as to reduce and ultimately eliminate health disparities in Vermont.

## **BACKGROUND**

In the mid-1980's the United States Department of Health and Human Services identified seven causes of death as priority areas for minority health.<sup>4</sup> These were cancer, asthma, heart disease and stroke, alcohol and drug dependency, diabetes, intentional and unintentional injuries and infant mortality. They also discerned that minorities experience significantly poorer health outcomes when compared to their white counterparts. Overall, while the health status for Americans overall is improving, the health status for minorities is declining. Because of these disparities, the U.S. Secretary created the federal Office of Minority Health to continually monitor minority health issues and to recommend ways to improve the health status and outcomes for minorities.

In 1992, the Vermont Department of Health created the Office of Minority Health in response to community requests to address persistent gaps in health status and access to care among minorities in Vermont. The VDH Office of Minority Health was established in order to improve the health status of underserved populations, including racial and ethnic minorities. Aligned with the VDH mission as well as the Federal *Healthy People 2010*, the VDH Office of Minority Health and Health Disparities is organized to achieve two overarching goals: 1) Increase quality and years of healthy life; and, 2) Eliminate health disparities. In Vermont, the Office of Minority Health and Health Disparities is responsible for engaging in initiatives to eliminate health disparities among Vermonters which includes differences that occur by gender, race or ethnicity, education or income, disability, geographic location, age, sexual orientation or refugee/immigrant status.

The Office of Minority Health and Health Disparities advises the Commissioner and the VDH on issues related to the priorities and strategies for reducing disease, disability, and death among minorities in Vermont. The purpose of OMHHD is to focus its efforts on the development and implementation of a strategic plan to identify, coordinate and determine the extent to which policies, programs, and services of Vermont can be improved to better address the needs of Vermont's minority populations.

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<sup>4</sup> See the CDC MMRW February 28, 1986 / 35(8);109-12. Located at: <<http://www.cdc.gov/mmwr/preview/mmwrhtml/00000688.htm>>, Accessed June 27, 2006.

## MISSION

The mission of The Vermont Office of Minority Health and Health Disparities is to enhance the health status of minorities in Vermont through leadership, advocacy, education and outreach to improve public health and ultimately eliminate health disparities in Vermont.

## VISION

The vision of The Vermont Office of Minority Health and Health Disparities is to be recognized as the premier entity for minority health.

## VALUES

The activities in the OMHHD are based on the following values:

### ***1. Access to Public Health Services***

***Services are expected to be universally acceptable, non-discriminatory, cover problems faced by the minority and health disparate community and comparable to any public health services available in the private sector.***

The OMHHD will facilitate the exchange of best practices for addressing access to health care and health disparities among organizations, providers, community groups and agencies. The OMHHD will partner with multidisciplinary teams to coordinate and reinforce approaches to public health, and widely disseminate information regarding disparity issues and effective solutions.

### ***2. Culturally appropriate Teamwork***

***Teamwork is expected in public health toward cultural competency based on the premise of respect for diverse communities and cultural differences, and implementation of trust-promoting methods of public health inquiry. Our approach entails the exchange of promising practices and the integrated use of all the disciplines of the health department to integrate principles of cultural competency in VDH activities.***

The OMHHD will forge and reinforce collaborative efforts to build partnerships within VHD toward cultural competency. The OMHHD will coordinate and recommend learning opportunities that support cultural competence across a broad scope of health issues and institute these communications/lessons throughout VDH.

### ***3. Inclusive Decision-Making***

***Inclusive decision-making from our collaborative partners is essential to achieving equitable public health to minorities and health disparate populations in Vermont.***

The OMHHD will involve and work with communities more effectively by strongly encouraging the inclusion for minorities where significant minority input may be missing and needed. Stakeholders' involvement will be encouraged and appointments made, as appropriate.

#### ***4. Integration***

***Integration is essential and expected to ensure access to, and provision of, quality public health care for minorities. OMHHD must apply cost effective management in accomplishing its mission and find opportunities to connect work to ongoing and/or larger initiatives at VDH.***

OMHDD will seek opportunities to ensure the appropriate integration of minority and health disparity issues into VDH statewide initiatives such as the *Vermont Blueprint for Health*.

#### ***5. Integrity and Ethics***

***Integrity and strong ethics are expected from all stakeholders. Transparency within the decision-making process to increase awareness, trustworthiness, and honesty is especially true in our efforts in serving minority and health disparate communities.***

The OMHHD is committed to increasing awareness of disparities in health status in Vermont. OMHHD encourages and fosters support for the development and implementation of VDH awareness to: 1) raise levels of information and awareness about minority and health disparity problems and inequality in public health services; and 2) encourage and promote culturally based and culturally competent health care practices and interventions by VDH.

#### ***6. Respecting, Understanding and Recognizing Differences***

***Understanding our differences, recognizing the unique contributions from our diverse backgrounds and respecting each other is expected from all stakeholders. Public health promotes mutual respect, attention to people's diversity and a commitment to working toward understanding each other.***

The OMHHD believes that fostering respect for each other, understanding of where each of us comes from and recognizing our differences (as well as our similarities) is important toward meaningful and effective public health planning and programming.

## **STRATEGIC PLAN GOALS**

The Strategic Plan is focused on four major goals that provide the framework for the results OMHHD wants to achieve in accomplishing its mission. These strategic goals were selected to broaden the reach of public health services, to make health care more effective, and improve access to quality public health for minorities, the underserved and uninsured/underinsured residents of Vermont. OMHHD is dedicated to bridging the gap between the healthcare providers, health services, decision makers, the business community and the minority and health disparate population. Honoring our mission and adhering to our strategic goals, OMHHD commits to creating an environment that facilitates the enhancement of public health, while reducing health disparities for Vermont's populations.

### **STRATEGIC GOAL 1:**

**IMPROVE ACCESS TO PUBLIC HEALTH AND HEALTH CARE SERVICES FOR MINORITY AND HEALTH DISPARATE POPULATIONS IN VERMONT**

### **STRATEGIC GOAL 2:**

**PROMOTE CULTURAL COMPETENCY AT VERMONT DEPARTMENT OF HEALTH (VDH) AND VDH HEALTH PROGRAMS**

### **STRATEGIC GOAL 3:**

**ADVOCATE FOR REDUCTION AND UTLTIMATELY THE ELIMINATION OF HEALTH DISPARITIES IN VERMONT**

### **STRATEGIC GOAL 4:**

**ASSESS AND ADDRESS PRIORITY DISPARITIES AMONG MINORITY POPULATIONS IN VERMONT**

## THE STRATEGIC PLAN OBJECTIVES

The strategic planning effort is designed to establish a system to meet and implement these important objectives.

### **STRATEGIC GOAL 1:**

IMPROVE ACCESS TO PUBLIC HEALTH AND HEALTH CARE FOR  
MINORITY AND HEALTH DISPARATE POPULATIONS IN VERMONT

#### **Objective 1.1 Advocate for access to high quality and appropriate health care.**

Continue local, regional, state and national advocacy efforts that focus on improving access to health care services for minorities and health disparate populations by partnering with appropriate organizations. Serve on boards, task forces, committees and other formal groups to advocate for the health of minority and health disparate populations in Vermont.

#### **Objective 1.2 Collaborate with existing partners and identify new partners.**

Seek new ways to collaborate with existing Vermont partners and inform minority community leaders and opinion leaders<sup>5</sup> about ongoing minority health initiatives being offered through the Office of Minority Health and Health Disparities (i.e. Governor, FAHC, etc.) for effective advocacy: identify new collaborations with VDH agencies and other state agencies identified within the *Healthy Vermonters 2010* document as well as other VDH initiatives. Ensure that efforts are consistent with appropriate institution, state and national guidelines.

#### **Objective 1.3 Guide Vermont Department of Health and Agency of Human Services in program planning and implementation.**

Identify new and emerging areas for improving minority health and health disparate populations access to health care, cost and quality within the VDH and the Agency of Human Services through consultation, technical assistance and recommendations. Address these issues through continuous assessment with program managers, coordinators and workers that focus on issues impacting Vermont's public health care delivery for minority and health disparate populations. Inform policy development where appropriate.

#### **Objective 1.4 Advise and collaborate with the Governor's Workforce Equity and Diversity Council (No. 09-02)**

Explore health workforce issues in Vermont with the Governor's Workforce Equity and Diversity Council. Examine how the formal statewide Workforce Planning process capitalizes on the benefits of diversity and promotes a talented and skilled public health workforce.

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<sup>5</sup> Individuals who have a close connection with the community and who can effectively communicate the needs of that community.

## **STRATEGIC GOAL 2:**

### **PROMOTE CULTURAL COMPETENCY AT VERMONT DEPARTMENT OF HEALTH (VDH) AND VDH HEALTH PROGRAMS**

#### **Objective 2.1 Continue to explore new methods for culturally competent program training and instruction delivery.**

Coordinate and expand the accessibility of cultural competency utilizing existing methods of instruction, such as on-site training and computer assisted and computer based methods to increase awareness of the importance of cultural competency as an important step in eliminating health and service disparities. Identify sources of funding to help support educational activities.

#### **Objective 2.2 Enable appropriate translation for public health services.**

Collaborate with the State Refugee Coordinator and VDH Refugee Health Coordinator to ensure appropriate translation and interpretation services at public health and medical encounters. Ensure that emergency response planning addresses non-English speakers.

#### **Objective 2.3 Support cultural competency efforts through technical assistance.**

Where appropriate, OMHHD plays a supportive role in cultural competency efforts with sister departments within the Agency of Human Services and other state agencies.

## **STRATEGIC GOAL 3:**

### **ADVOCATE FOR REDUCTION AND UTLTIMATELY THE ELIMINATION OF HEALTH DISPARITIES IN VERMONT**

#### **Objective 3.1 Seek new avenues to educate the public on minority health issues.**

Seek new areas for health care programming designed to meet the needs of new and/or expanded audiences and disseminate information regarding minority health issues to enhance OMHHD's effectiveness with existing and new partners.

#### **Objective 3.2 Integrate efforts with other minority health activities and identify and utilize resources available at universities and through other partners.**

Seek opportunities for integrating applied research efforts into VDH activities. Promote, develop and enhance access to care in an effort to eliminate health status disparity. Seek collaborations at Vermont universities and colleges to expand research information. Make the OMHHD a leading participant in emerging collaborative efforts to reduce and ultimately eliminate health status gaps with other Vermont State agencies.

#### **Objective 3.3 Through partnerships and collaborations take a leadership role in expanding Vermont's focus on special projects to address priority issues in health disparities.**

Seek avenues for initiating special projects at the university, state, and federal levels focused on minority health and disparity. Identify sources of funding to help support activities.

#### **STRATEGIC GOAL 4:**

##### **ASSESS AND ADDRESS PRIORITY DISPARITIES IN HEALTH AMONG MINORITY POPULATIONS IN VERMONT**

#### **Objective 4.1 Expand the Vermont Department of Health knowledge base on minority health issues, communicate current information to relevant audiences and identify and advocate for public policies that aid in closing the health status gap.**

Identify a research agenda that investigates current and emerging minority health issues. Develop venues for disseminating applied minority health findings to state and national partners through publications and presentations. Monitor sponsored programs and projects for accountability towards the elimination of health disparities.

#### **Objective 4.2 Support VDH programs that seek to address priority issues in minority health and health disparities.**

There are a number of VDH led health initiatives focusing on chronic diseases (i.e. Blueprint for Health), alcohol and drug issues, mental health and more that can more effectively address minority health and health disparities issues. Identify best practices that assist VDH programs that focus on minority and health disparate populations in Vermont. Seek and increase opportunities to educate minority and health disparate populations regarding existing or new VDH programs.

#### **Objective 4.3 Encourage minority participation in developing the health of their community with Vermont Department of Health.**

Support awareness at Vermont Department of Health regarding community organizing and health efforts. Recommend strategies within VDH to more effectively work with minority and health disparate populations.

#### **Objective 4.4 Improve data quality and enhance data collection on minority health.**

Conduct appropriate health assessments of minority populations and support efforts to improve health surveillance and minority health data collection.

## EVALUATION and OUTCOME MEASURES

### *Outcome Statement*

Minority health and health disparity initiatives must be operational in the programs, local health districts and larger institution of the Vermont Department of Health. These initiatives, where appropriate, must be in partnership with local governmental and nongovernmental agencies and organizations. Consistent and ongoing interaction and communication between VDH, other state agencies, federal, state and local officials, and nongovernmental agencies and organizations (i.e., community-based organizations, and philanthropic groups, etc.) should be institutionalized. The following are some of the measurable outcomes expected to meet and implement the important objectives and strategies of this strategic plan. ***By the end of 5 years, the following measurable outcomes should be achieved and evaluated:***

### **Measurable Outcome A**

*Improve access to public health and health care services for minority and health disparate populations in Vermont.*

1. The OMHHD Director will meet with the Office of Rural Health, each VDH District Director and AHS Field Service Director to ascertain and assess access to public health and health care for minorities in Vermont. The Director will evaluate plans and programs and make recommendations to the Commissioner of Health.
2. The OMHHD Director with the Division of Health Surveillance will review and find opportunities to use health data generated from health data systems to better understand race and ethnicity information for personal health services and provide the public with appropriate information regarding minorities in Vermont.
3. The OMHHD Director will enhance the quality and quantity of the VDH OMHHD web page and provide appropriate minority health and health disparities links on VDH/OMHHD web page.
4. The OMHHD will produce a Minority Health and Health Disparities Report. The OMHHD, the Division of Health Surveillance and in consultation with the Office of Rural Health will review and enhance the design of the document. OMHHD will also consult with community groups and academics in Vermont in developing this report.

### **Measurable Outcome B**

*Promote cultural competency at Vermont Department of Health and VDH Health Programs.*

1. The OMHHD will implement standards and guidelines for participation and use of web based cultural competency training with the VDH Workforce and Workplace Development staff to promote cultural competency within each Division of the VDH.
2. The OMHHD will establish guidelines and standards for a cultural competency training component to VDH grantees and VDH providers to promote cultural competency.
3. The OMHHD will establish a baseline for VDH Minority Health activities. OMHHD will complete an assessment of Minority Health activities at the VDH. This assessment will be the baseline measure for minority health initiatives in the department and will include, at a minimum, the number and type of existing programs specifically targeting

minority groups, the number of full time equivalents specifically dedicated to minority health, and the amount of financial resources directed to minority health initiatives.

4. The OMHHD will develop guidelines and principles regarding strategies for reaching minority communities by providing technical assistance to VDH program planners and health professionals. These guidelines and principles will be published and made available to all VDH Divisions and health programs.

### **Measurable Outcome C**

*Advocate for the reduction and ultimate elimination of health disparities in Vermont.*

1. The OMHHD will enhance the VDH web site to support the continuum of local and statewide minority health initiatives.
2. The OMHHD will create a web based catalogue of Minority Health programs, projects and initiatives in Vermont as well as establish a web based clearing house and resource for Vermont minority health activities and best practices for eliminating health disparities.
3. The OMHHD will coordinate the establishment of Vermont Minority Health Month that focuses on the reduction and ultimate elimination of health disparities in Vermont.
4. The OMHHD will explore ways to create a statewide minority health coalition that is lead by community members with technical assistance from OMHHD.

### **Measurable Outcome D**

*Assess and address priority disparities in health among minority populations in Vermont.*

1. The OMHHD will assess and provide recommendations to VDH regarding priorities in health disparities work by examining current VDH health initiatives such as the Blueprint for Health.
2. The OMHHD will support VDH divisions and programs through health planning activities to ensure that priority disparities in health among minority populations in Vermont are addressed at each VDH Division (i.e. Division of Community Public Health) and within each VDH initiative (i.e. Blueprint for Health).
3. The OMHHD will encourage health programming by community based organizations by providing technical assistance and guidance for planning and programming.
4. The OMHHD, when possible, will work to target and allocate resources in future budgets to enhance the infrastructure and effectiveness of community based agencies and organizations that provide and/or promote public health services and access to health care for minorities.
5. The OMHHD will examine health surveillance and health surveillance issues, concerns and data collection.

## **PARTNERS**

The OMHHD's partners include professionals and consumers whose actions and interests impact Vermont's public health system. This includes, but is not limited to, local, state, and national minority health advocates, educators, state agencies, health care associations, health care providers, insurers, community and economic development specialists, businesses, academia and state and federal legislators and others. It includes minority consumers of VDH health programs.

## **SUMMARY**

The Vermont Department of Health is committed in ensuring that our expertise and resources attend to the health and well being of all Vermonters. Understanding that certain parts of the Vermont population experience disproportionately the burden of disease and illness, the primary outcome of this Strategic Plan is to address the serious issues and challenges associated with eliminating health disparities in Vermont.

Many people in Vermont have worked hard to forge an agenda that recognizes the roles that public health care providers, elected officials, government and community leaders can assume in changing the face of disparities. While VDH has a role in implementing all the recommended strategies, other state agencies, health care providers and community groups are expected to join in partnership with VDH in making this strategic plan a reality and actualizing the work laid out in this plan.

Achieving quality health for all Vermonters is both an ethical imperative and a matter of fiscal responsibility. The cost of poor health is far greater than the cost of preventing it. Illness and injury is not only a concern for doctors and patients; it has far reaching implications for the well being, productivity, and the quality of life for everyone. The health of Vermonters depends, literally, on the health of all its residents. We can all work together to support the vision of having the nation's premier system of public health, enabling Vermonters to lead healthy lives in healthy communities.

**Table 1. Table of Strategic Goals, Objectives, Activities, Accountability Measures and Target Dates**

<b>Strategic Goal 1: Improve access to public health and health care for minority and health disparate populations in Vermont</b>		
<b>Objectives</b>	<b>Activities</b>	<b>Accountability Measures and Target Date</b>
Objective 1.1 Advocate for access to high quality and appropriate public health services	<ol style="list-style-type: none"> <li>1. Ascertain and assess access to public health services for minorities in Vermont</li> <li>2. Evaluate current health plans and programs regarding public health services for minorities in Vermont</li> <li>3. Conduct health planning to make recommendations to Health Commissioner regarding access to public health services to minority Vermonters</li> </ol>	<ul style="list-style-type: none"> <li>• Report on Minority Health Services at the Vermont Department of Health (integrated report from Office of Rural Health, Bi-State, OVHA, BISCHA, etc.)</li> <li>• Recommendations from report brought to Health Commissioner, AHS Secretary and Legislature</li> <li>• <b>Date Due: Draft November 2007 and Final December 2007 (To be completed every FY)</b></li> </ul>
Objective 1.2 Collaborate with existing partners and identify new partners to build communication network for minority Vermonters about health education information	<ol style="list-style-type: none"> <li>1. Increase awareness in minority communities by providing comprehensive information about health insurance availability (i.e. how to access it, how to choose the right services, etc.)</li> <li>2. Develop and disseminate health education and health communication</li> </ol>	<ul style="list-style-type: none"> <li>• VDH web resource that provides appropriate minority health and health disparities links and health education information</li> <li>• Resource binder of all public health services and programs available to minority communities</li> <li>• Quarterly health education sessions with minority communities on minority health resources and prevention services</li> </ul>

	<p>materials to minority communities about the importance of healthy lifestyles and inform them about public health prevention service guidelines and how to access prevention services</p>	<p>available</p> <ul style="list-style-type: none"> <li>• <b>Date Due: Website and resource binder completion December 2007 (ongoing maintenance and update every FY) and quarterly sessions every FY</b></li> </ul>
<p>Objective 1.3 Guide VDH and AHS in program planning and implementation</p>	<ol style="list-style-type: none"> <li>1. Create a Health Commissioner and Governor appointed committee that will include members from minority communities who will service in an advisory capacity to support the Office of Minority Health</li> <li>2. Chief of the Office of Minority Health identifies new and emerging areas for improving minority health through evidence based policy development, health planning and integrated implementation</li> </ol>	<ul style="list-style-type: none"> <li>• Appointed OMH Advisory Committee with representation from all minority communities in Vermont (no one minority will have majority on the committee)</li> <li>• Comprehensive Minority Health Integration Plan that includes evidence policies and program implementation</li> <li>• <b>Date Due: First OMH Advisory Committee November 2007 and Comprehensive Minority Health Integration Plan December 2007 (Updated every FY)</b></li> </ul>
<p>Objective 1.4 Advise and collaborate with the Governor's Workforce Equity and Diversity Council (No. 09-02)</p>	<ol style="list-style-type: none"> <li>1. Explore and examine health workforce issues in Vermont with the Governor's Workforce Equity and Diversity Council</li> </ol>	<ul style="list-style-type: none"> <li>• Number of meetings Chief of OMH attends with the Governor's Workforce Equity and Diversity Council</li> <li>• Incorporate pertinent minority workforce issues in public health into the annual Governor's Workforce</li> </ul>

		<p>Equity and Diversity Council Report</p> <ul style="list-style-type: none"> <li>• <b>Date Due: End of FY 2007 (ongoing every FY)</b></li> </ul>
<p><b>Strategic Goal 1: Improve access to public health and health care for minority and health disparate populations in Vermont</b></p>		
Objectives	Activities	Accountability Measures and Target Date
Objective 1.1 Advocate for access to high quality and appropriate public health services	<ol style="list-style-type: none"> <li>4. Ascertain and assess access to public health services for minorities in Vermont</li> <li>5. Evaluate current health plans and programs regarding public health services for minorities in Vermont</li> <li>6. Conduct health planning to make recommendations to Health Commissioner regarding access to public health services to minority Vermonters</li> </ol>	<ul style="list-style-type: none"> <li>• Report on Minority Health Services at the Vermont Department of Health (integrated report from Office of Rural Health, Bi-State, OVHA, BISCHA, etc.)</li> <li>• Recommendations from report brought to Health Commissioner, AHS Secretary and Legislature</li> <li>• <b>Date Due: Draft November 2007 and Final December 2007 (To be completed every FY)</b></li> </ul>
Objective 1.2 Collaborate with existing partners and identify new partners to build communication network for minority Vermonters about health education information	<ol style="list-style-type: none"> <li>3. Increase awareness in minority communities by providing comprehensive information about health insurance availability (i.e. how to access it, how to choose the right services, etc.)</li> <li>4. Develop and disseminate health education and</li> </ol>	<ul style="list-style-type: none"> <li>• VDH web resource that provides appropriate minority health and health disparities links and health education information</li> <li>• Resource binder of all public health services and programs available to minority communities</li> <li>• Quarterly health education sessions with minority communities on minority health</li> </ul>

	<p>health communication materials to minority communities about the importance of healthy lifestyles and inform them about public health prevention service guidelines and how to access prevention services</p>	<p>resources and prevention services available</p> <ul style="list-style-type: none"> <li>• <b>Date Due: Website and resource binder completion December 2007 (ongoing maintenance and update every FY) and quarterly sessions every FY</b></li> </ul>
<p>Objective 1.3 Guide VDH and AHS in program planning and implementation</p>	<p>3. Create a Health Commissioner and Governor appointed committed that will include members from minority communities who will service in an advisory capacity to support the Office of Minority Health</p> <p>4. Chief of the Office of Minority Health identifies new and emerging areas for improving minority health through evidence based policy development, health planning and integrated implementation</p>	<ul style="list-style-type: none"> <li>• Appointed OMH Advisory Committee with representation from all minority communities in Vermont (no one minority will have majority on the committee)</li> <li>• Comprehensive Minority Health Integration Plan that includes evidence policies and program implementation</li> <li>• <b>Date Due: First OMH Advisory Committee November 2007 and Comprehensive Minority Health Integration Plan December 2007 (Updated every FY)</b></li> </ul>
<p>Objective 1.4 Advise and collaborate with the Governor's Workforce Equity and Diversity Council (No. 09-02)</p>	<p>2. Explore and examine health workforce issues in Vermont with the Governor's Workforce Equity and Diversity Council</p>	<ul style="list-style-type: none"> <li>• Number of meetings Chief of OMH attends with the Governor's Workforce Equity and Diversity Council</li> <li>• Incorporate pertinent minority workforce issues in public health</li> </ul>

		<p>into the annual Governor's Workforce Equity and Diversity Council Report</p> <ul style="list-style-type: none"><li>• <b>Date Due: End of FY 2007 (ongoing every FY)</b></li></ul>
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**Strategic Goal 2: Promote cultural competency at Vermont Department of Health and VDH Health Programs**

Objectives	Activities	Accountability Measures and Target Date
Objective 2.1 Continue to explore new methods for culturally competent program training and instruction delivery	<ol style="list-style-type: none"> <li>1. Coordinate and expand the accessibility of cultural competency utilizing existing methods of instruction as an important step in eliminating public health service disparities</li> <li>2. Incorporate cultural competency standards into all VDH grants and appropriate program activities</li> </ol>	<ul style="list-style-type: none"> <li>• Standards and guidelines for participation and use of cultural competency training within VDH</li> <li>• Standards and guidelines for cultural competency training for VDH grantees and VDH providers</li> <li>• Technical Assistance to VDH program planners for cultural competency</li> <li>• <b>Date Due: Standards and guidelines written and established by November 2007 with updates and renewal every FY</b></li> </ul>
Objective 2.2 Enable appropriate translation for public health services	<ol style="list-style-type: none"> <li>1. Collaborate with Vermont State Refugee Coordinator and VDH Refugee Health Coordinator to ensure appropriate translation and interpretation services at public health encounters</li> <li>2. Ensure emergency response planning addresses non-English speakers and minority populations</li> </ol>	<ul style="list-style-type: none"> <li>• Participation in the AHS LEP meetings</li> <li>• OMH Chief as Health Advisor to VDH Emergency Planning for special populations</li> <li>• <b>Date Due: Ongoing</b></li> </ul>
Objective 2.3 Support cultural competency efforts through technical	<ol style="list-style-type: none"> <li>1. Educate stakeholders with regard to culturally competent</li> </ol>	<ul style="list-style-type: none"> <li>• Quarterly update sessions with stakeholders on</li> </ul>

<p>assistance</p>	<p>training in collaboration with State Refugee Coordinator and VDH</p> <p>2. Support cultural competency efforts with sister departments within the Agency of Human Services and other state agencies</p>	<p>cultural competency training at VDH</p> <ul style="list-style-type: none"> <li>• Culturally competent needs assessment of VDH Divisions</li> <li>• Work with AHS partners to support cultural competency assessment of AHS</li> <li>• <b>Date Due: Quarterly sessions every FY and initial VDH assessment due August 2007 and updated every FY and AHS support ongoing</b></li> </ul>
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<b>Strategic Goal 3: Advocate for reduction and ultimately the elimination of health disparities in Vermont</b>		
Objectives	Activities	Accountability Measures and Target Date
Objective 3.1 Seek new avenues to educate the public on minority health issues	<ol style="list-style-type: none"> <li>1. Sustain OMH resource development and health education information (related to Obj. 1.2)</li> <li>2. Create strategic management of community partnerships</li> <li>3. Promote minority initiatives in social, faith-based, community and voluntary organizations and agencies in minority communities of Vermont</li> </ol>	<ul style="list-style-type: none"> <li>• Developed internal and external communications channels for information dissemination and health education (see Obj. 1.2)</li> <li>• Facilitate OMH Advisory Committee to oversee and coordinate implementation of OMH Strategic Plan</li> <li>• Newsletter or event based calendar of minority health activities by month</li> <li>• <b>Date Due: An end of FY report evaluating internal and external communications, See Objective 1.2 for info dissemination and Objective 1.3 for OMH Advisory Com., Newsletter or event based calendar published monthly</b></li> </ul>
Objective 3.2 Integrate efforts with other minority health activities and identify and utilize resources available at universities and through other partners	<ol style="list-style-type: none"> <li>1. Assess and examine VDH program efforts around minority health activities</li> <li>2. Determine existing resources for funding minority health activities</li> </ol>	<ul style="list-style-type: none"> <li>• As part of the Minority Health Services Report a section on VDH Division program efforts</li> <li>• Resource assessment review and report with recommendations as part of the Minority</li> </ul>

		<p>Health Services Report</p> <ul style="list-style-type: none"> <li>• <b>Date Due: Draft November 2007 and Final December 2007 (To be completed every FY)</b></li> </ul>
<p>Objective 3.3 OMH take leadership role in expanding Vermont's focus on projects to address priority issues in health disparities and assist in building leadership capacity in Vermont minority communities</p>	<ol style="list-style-type: none"> <li>1. Provide technical assistance to VDH programs regarding health disparities among minority Vermonters and seek avenues for initiating special projects at the university, state, federal levels focused on minority health and disparity</li> <li>2. Promote self-determination, respect and recognition of diversity throughout VDH and Vermont</li> <li>3. Support opportunities in minority communities for individuals and groups to participate and be part of the solution</li> <li>4. Encourage members of minority populations to participate in design and implementation of programs that are designed to meet local needs</li> </ol>	<ul style="list-style-type: none"> <li>• Number and quality of relationships built between OMH Chief and minority community monitored by the OMH Advisory Committee and Commissioner's Office</li> <li>• Technical assistance provided by the Chief of OMH to minority communities in Vermont Dept of Health</li> <li>• Establishing connections between VDH program managers and coordinators and minority community members to participate in public health program design and implementation</li> <li>• <b>Date Due: Ongoing and evaluated quarterly</b></li> </ul>

<b>Strategic Goal 4: Assess and address priority disparities in health among minority populations in Vermont</b>		
Objectives	Activities	Accountability Measures and Target Date
Objective 4.1 Expand the VDH knowledge based on minority health issues, communicate current information to relevant audiences and identify and advocate for public policies that aid in closing the health status gap in Vermont	1. Assess and provide recommendations to VDH regarding priorities in health disparities work by examining current and proposed VDH health initiatives	<ul style="list-style-type: none"> <li>• Number and quality of recommendations to VDH regarding minority health priorities</li> <li>• <b>Date due: ongoing but reviewed quarterly with end of year report</b></li> </ul>
Objective 4.2 Support VDH programs that see to address priority issues in minority health and health disparities	1. Support VDH Divisions and programs health planning activities to ensure that priority disparities in minority populations are addressed	<ul style="list-style-type: none"> <li>• Number of health planning initiatives that integrate VDH public health work that addresses minority populations</li> <li>• <b>Date due: ongoing but reviewed quarterly with end of year report</b></li> </ul>
Objective 4.3 Encourage minority participation in developing the health of their community with VDH	1. Provide technical assistance to minority community organizations in the assessment of their health needs and priorities for their community	<ul style="list-style-type: none"> <li>• Number and quality of technical assistance encounters</li> <li>• <b>Date due: ongoing but reviewed quarterly with end of year report</b></li> </ul>
Objective 4.4 Improve data quality and enhance data collection on minority health and conduct appropriate health assessments of minority populations	<ul style="list-style-type: none"> <li>• Examine health surveillance and health data issues, concerns and collection in terms of both qualitative and quantitative data assessment</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment report of current state of minority health data and recommendations</li> <li>• <b>Date due: Draft due November 2007 with final by December 2007 and updated every FY</b></li> </ul>