
**Report to
The Governor**

HEALTH IN ALL POLICIES

2017

**In Accordance with Executive Order 07-15 (2015),
*Health in All Policies Task Force***

Submitted to: Governor Phil Scott

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Report Date: January 15, 2017



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HEALTH IN ALL POLICIES

2017

Introduction

As Vermonters, we take great pride in our quality of life, strong communities, natural places and commitment to healthy living. We share a common goal: to ensure that our state continues to be one of the healthiest and best places in the U.S. for all of us to live, work and play. Complex problems cannot be solved by one agency or discipline alone – we need to be working together across agencies to maximize collective impact. Working in this way is the best form of efficiency because we can leverage our resources more effectively through cross-sector collaboration.

Why Health in All Policies is Needed

Health outcomes are determined less by our access to quality health care services and more by the combination of health behaviors and the social and economic circumstances into which we are born and live.

What is Health in All Policies?

Health in All Policies is a collaborative approach to improving the health of all people by incorporating health considerations into decision making across sectors and policy areas. A Health in All Policies approach identifies the ways in which decisions in multiple sectors affect health and how better health can support the goals of multiple sectors. The goal is to create health, wellness and economically vibrant communities. To do this we must ensure that decision-makers consider the health consequences of various policy options during the decision-making process.

Purpose and Function of the Task Force

The Health in All Policies Task Force was established by Executive Order, October 2015, by Governor Peter Shumlin. The Task Force identifies programs, policies, and strategies to improve the health of Vermonters, especially vulnerable populations, while advancing our shared goals. These shared goals include protecting natural resources and agricultural lands, increasing the availability of affordable housing, improving air and water quality, improving infrastructure systems, promoting public health and active lifestyles, planning sustainable communities, increasing educational attainment and meeting the state's climate change goals.

Members

Membership includes representatives from the agencies, departments and offices whose input may be necessary to achieve the Task Force's goals. Designated representatives are:

- Familiar with the breadth of their department/agency's activities
- Connected to others in their department/agency who can provide more in-depth expertise on various topics
- Empowered to speak on behalf of their agency/department in meetings
- Able to engage agency/departmental leadership in discussions of the Task Force recommendations

Meetings and Decision-making

The full Task Force meets quarterly to discuss opportunities for action and implementation of work plans. Task Force members meet in smaller work groups on an as-needed basis. The Health Department provides necessary support for and between meetings. Decisions are made based on consensus to ensure they have sufficient commitment and address concerns of Task Force members.

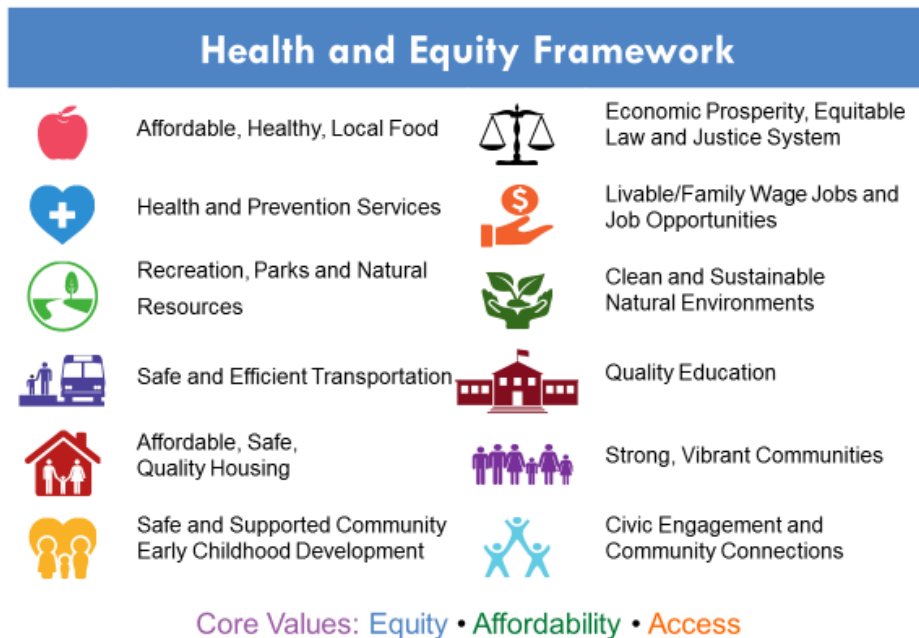
Resources and Staffing

Member agencies contribute staff time to this effort. The Vermont Department of Health serves as the facilitating department of the Task Force, provides administrative, technical, and legal assistance and will seek additional support (financial, technical and logistical) as needed to support the Task Force. A list of members can be found in Attachment B.

Vermont's HiAP Priorities and Accomplishments

The Task Force began with developing a shared vision and framework to describe the ultimate goals in using Health in All Policies approaches. The vision and *Vermont's Health and Equity Framework* build upon the shared values of equity, access and affordability in creating economically and socially vibrant communities. The framework will provide the basis for future work to identify potential areas of impact and for measuring successes. Below find a graphical representation of the framework (see Attachment A for a narrative explanation of the graphic).

The framework was developed by members of the Task Force as a way of conveying to others the mutual benefits of our work and how health and equity are at the core of much of what we do. Now is the opportunity to make that more explicit and systematic. The framework is a communication tool, identifies the sectors and investments where collaborations are possible, and it is the potential basis for a future dashboard to track impact and progress.



The following provides an overview of the accomplishments of the Health in All Policies Task Force in 2016 related to the three core areas of the Task Force’s mandate.

Opportunities to include health criteria in regulatory, programmatic and budgetary decisions

Regulatory – Guidelines and Tools

In regulatory decisions, it is important to ensure that health criteria are systematically and appropriately considered using the best available evidence. One nationally recognized tool for evaluating effects on public health is a Health Impact Assessment. Another potential tool would be a Public Health Test. The Task Force identified these two tools as potentially useful – they are explored further below.

Health Impact Assessments

Health Impact Assessments (HIA) are data-driven examinations of proposed projects and policies that shape our communities. The HIA process outlines potential public health impacts and considerations, providing policy makers and stakeholders with a valuable tool to inform their planning decisions.

Based on the data collected in the HIA process, recommendations can be offered for practical strategies to enhance positive health outcomes – and minimize negative ones – in a broad array of policies and projects that fall outside of the traditional public health arena, including transportation, land use, housing, and economic development. VDH has collaborated in the conduct of a variety of HIAs in recent years to assess both policy and project options (see: [VT Health Impact Assessments](#)).

Public Health Test

As a next step, Task Force staff will draft a potential “Public Health Test.” One option would be to adapt the *Quechee Test* (see Attachment C). An adaptation of the *Quechee Test* has been suggested for use in front of the Public Service Board or Act 250 Commissions.

Programmatic – Inventory of Current Activities and Best Practices

Members of the Task Force are required to create an inventory of existing efforts and opportunities to include health in departmental programmatic decisions. In addition, they are required to report these efforts annually and to consider promising practices to identify future opportunities for innovation and coordination across sectors.

To jump start this inventory, the Vermont Department of Health, in collaboration with the Culture of Health Team, developed lists of Best and Innovative Practices by sector through a review of the literature, search of actions in other states and localities, and discussions with leaders engaged in promoting HiAP approaches. Inventories have been developed for the following sectors to date: agriculture, housing, natural resources, and transportation. Additional inventories in process include: education, energy, corrections, and human resources. . See Attachment D for examples.

Budget – Expenditure Analysis

Through funding from a grant with the Robert Wood Johnson Foundation (RWJF), the Culture of Health Team has created a tool to analyze where we spend health dollars and how money is spent on health in non-health agencies at the state level. The latter connects to the mandate of the HiAP Task Force to consider how budgetary decisions of non-health agencies impact health. The Culture of Health staff is piloting this project with VTrans to evaluate spending. The goal is to paint a picture of how the agency budget contributes to health. The challenge is to figure out what percent of program money contributes to health. In discussion, Task Force members also pointed out that it will be important to identify tensions between agencies, in particular related to policy directives, federal requirements, permitting limitations, adopted standards, and funding constraints. The Agency of Agriculture and the Agency of Commerce and Community Development are next in line for analytic support.

Promising practices in other jurisdictions to identify opportunities for innovation and coordination across sectors that include consideration of potential positive and negative health impacts of decisions

As noted above, the Best Practices Inventory contains both current programs and activities in Vermont as well as opportunities for future innovation based on best practices in other jurisdictions. Members of the HiAP Task Force will be utilizing their professional networks to continually scan for promising practices in their sectors to incorporate consideration of health impacts.

Evidence-based actions and policies to improve the wellness of state employees across state government, including healthy food procurement policies

There are two primary levers in government to affect positive change for health. One is as an employer the other is as a purchaser.

LiveWell Vermont

The State of Vermont is one of the largest employers in Vermont. As such, policies and programs to support employee wellness can have a tremendous impact. The State of Vermont operates an [LiveWell Vermont](#), an employee wellness program. Individual departments can assist in adopting and promoting the practices offered through the program. For example, the Department of Health has identified “Wellness Ambassadors” committed to creating healthy and supportive worksites.

General Worksite Wellness

In addition, the Vermont Department of Health has developed a toolkit to support worksite wellness programs for use by other agencies and departments. The purpose of the [Vermont Worksite Wellness Resource --Creating a Healthier Worksite](#) is to guide worksites through the steps to design and sustain a wellness program that fits the scale and culture of the organization. The focus here is on promoting physical and mental health, reducing the major risk factors that lead to chronic disease — poor nutrition, physical inactivity, tobacco use and substance abuse — and on supporting immunizations and breastfeeding. It includes guidance for:

- recruiting a wellness team, assessing the organization, surveying employee interest, determining goals and objectives (Chapter 1)
- creating a supportive environment (Chapter 2)
- engaging, motivating and communicating with employees (Chapter 3)
- choosing and implementing programs and strategies (Chapter 4)
- evaluating your efforts (Chapter 5)
- tools and resources to support your work (Toolkit)

Healthy Food Procurement Tool Kit

The state also has the “power of the purse” to promote the purchase, and offering, of healthy local foods. Vermont has developed standards to be used whenever food is offered at cafes and cafeterias on state property or at state funded meetings, conferences, and events that are paid for with state or federal dollars (in accordance with the Department of Finance and Management Policy 4.0 Department Provided Food and Refreshments).

The following resources are available to assist state agencies in developing guidelines in complying with the new requirements of 29 V.S.A. § 160c.

The [Healthy Food Standards for State Government](#) provides a basic description of standards developed to comply with 29 V.S.A. § 160c.

The [Healthy Food Standards Implementation Guide](#) offers suggestions regarding the various options for implementation and some tips from the field. For example, the key message is that the new standards outline how we, as governmental entities, spend our state dollars; not how people should live.

The [Healthy Eating Guidelines for Worksites](#) offers suggestions for food options at workplace gatherings that can promote healthier food choices by following the recommendations put forth by the Dietary Guidelines for Americans.

Conclusion

In 2016, the Task Force took stock of the many existing actions throughout government to integrate health in a variety of sectors. The Task Force established a strong foundation for amplifying the innovations already in place. In 2017, the Task Force will continue to identify opportunities for cross-sector collaboration to improve health and create economically and socially vibrant communities. Additionally, the Task Force will consider which additional tools of government can be used to strategically create a culture of health and wellness (see Attachment E).

Attachment A: Vermont Health and Equity Framework

We take great pride in our quality of life, strong communities, natural places and commitment to healthy living. We share common goals to ensure that: our state continues to be one of the healthiest and best places in the U.S. for all of us to live, work and play; and our local communities continue to serve as the center of our connections and economic vitality. We are committed to ensuring that all Vermonters, regardless of the circumstances into which they are born, have the opportunity for a healthy life.

The health and well-being of all people is critical for a prosperous and sustainable Vermont. In order to achieve this we are committed to working across sectors to ensure that all Vermonters across their lifespan live in communities that are:

Meets basic needs

- Economic prosperity with living wages, safe and healthy job opportunities for all
- Affordable, accessible, and nutritious foods
- Affordable, high quality, socially integrated housing
- Opportunities for high quality and accessible education
- Regular and open access to affordable and high quality health care and preventive services
- Safe and efficient transportation options
- Mental health and substance abuse prevention and treatment

Vibrant and livable

- Vibrant community centers with opportunities across all ages, economics, and community types (urban, rural, etc.)
- Healthy local food, and local services to meet daily needs
- Walkable with places for physical activity
- Outside places to play and socialize
- Access to recreation

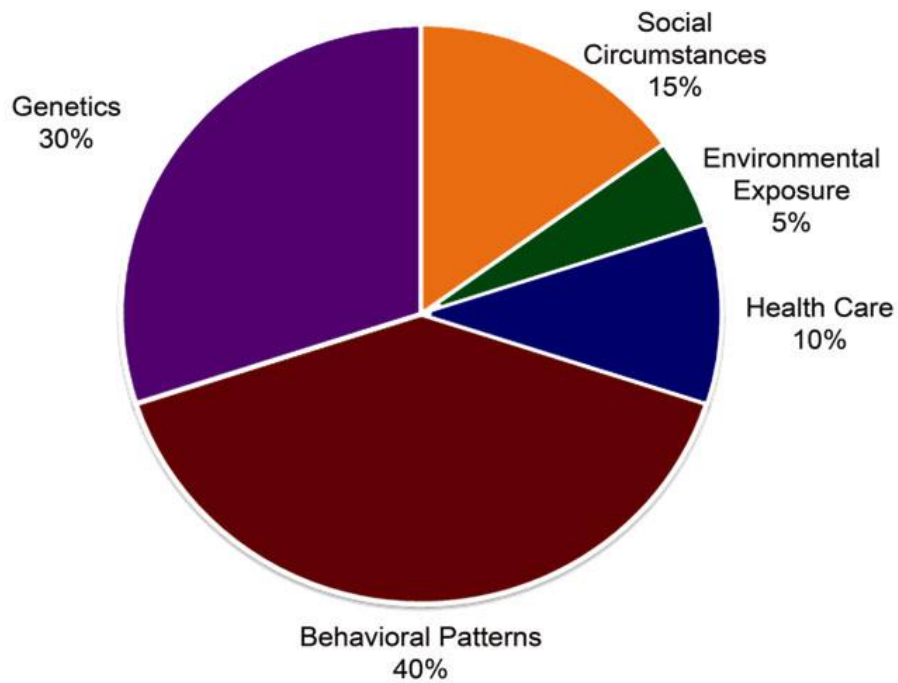
Safe and supportive

- Free of crime and violence
- Robust civic engagement
- Community connectedness and social capital
- Resilient

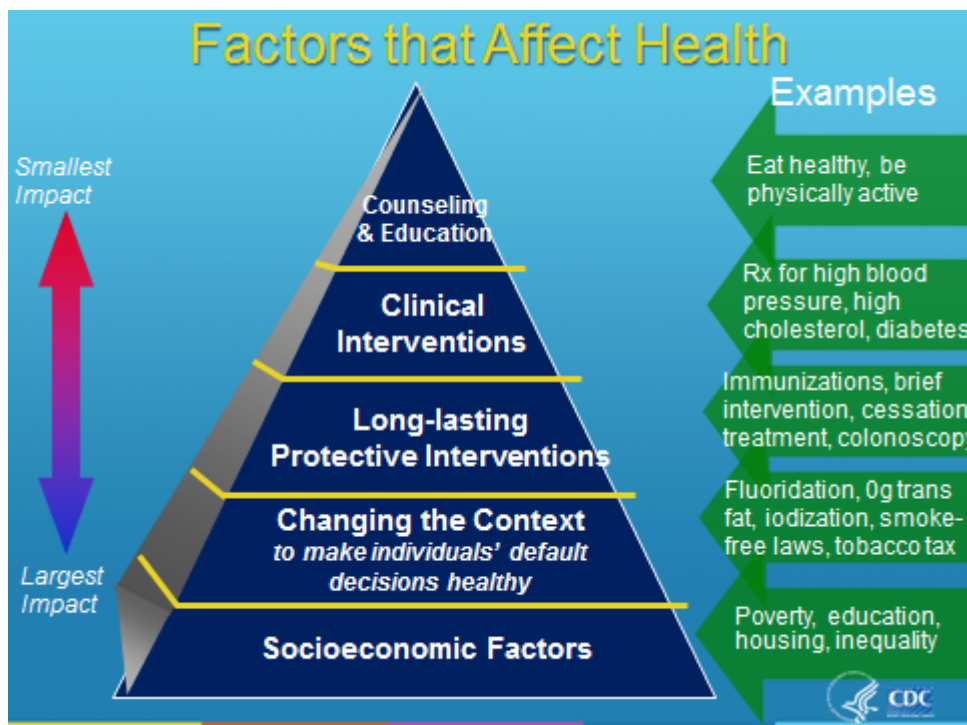
Clean and sustainable natural environment

- Clean air, soil, and water
- Protection of natural resources and agricultural lands
- Affordable and sustainable energy use
- Actions to limit unsustainable climate changes

Factors that Contribute to Health Outcomes



Source: N Engl J Med 2007;357:1221-8.



Attachment B: Members and Staff

Participating Agencies and Departments

Agency of Administration, Diane Bothfeld and Trey Martin

Agency of Agriculture, Jolinda LeClair and Abbey Willard

Agency of Commerce and Community Development, Pat Moulton, Lucy Leriche, Alex Ibey

Agency of Education, Rebecca Holcombe

Agency of Human Services, Hal Cohen and Paul Dragon

Agency of Natural Resources, Deb Markowitz and Trey Martin

Agency of Transportation, Michele Boomhower

Public Service Board, James Volz

Public Service Department, Chris Recchia

Natural Resources Board, Dianne Snelling, Kimberly Lashua

Vermont Department of Health, Dr. Harry Chen and Tracy Dolan

Vermont Housing Finance Agency, Sarah Carpenter

Vermont Housing Conservation Board, Karen Freeman and Gus Seelig

Staffing

David Englander, Department of Health

Heidi Klein, Department of Health

Adrienne Gil, Vermont Public Health Institute

Attachment C: The “Quechee Test” for Health

See PDF attachment.

Attachment D: Example of Best Practices: Transportation

The following Health in All Policies (HiAP) best and innovative practices is a summary of information that has been collected from a variety of State and National resources.

The goal of this document is:

1. To allow your agency to identify best practices and innovative approaches that are;
 - a. currently occurring and are being implemented
 - b. find inspirational approaches that could be included in future planning
2. This document is meant to be a *guide* and is NOT intended to represent all the agencies practices, policies and programs related to health in all policies

Why this matters:

To begin the dialogue and open discussions on how to identify agencies best and innovative practices that include health in the policies. This is a starting point and this conversation will continue over the upcoming years as we all work in a collaborative manner to integrate meaningful and impactful health measures into all policies.

Overview of document:

The following agencies were identified in the State of Vermont Executive Order No. 07-15 to participate in the HiAP Task Force

1. Agency of Administration
2. Agency of Agriculture
3. Agency of Commerce and community Development
4. Agency of Education
5. Agency of Natural Resources
6. Agency of Transportation
7. Public Service Department
8. Department of Health

Each Agency will receive a document that is divided into three sections: **Budget, Policy and Program**. Under each section is a list of suggested HiAP best and innovative practices.

Please review this document with your staff to determine the following:

1. Is your agency currently implementing any of the HiAP best and innovative practices listed?
2. What HiAP best and innovative practices is your agency implementing that is *NOT listed*?
3. Please provide feedback to the HiAP staff member, Adrienne Gil adrienne@vtphi.org on suggested edits, formatting or additional questions that would make this document meaningful to your agency.
4. How can the HiAP help your agency/department better integrate equity into your everyday work?

Sector

Transportation

VTrans Mission: Provide for the safe and efficient movement of people and goods.

VTrans Vision: A safe, reliable and multimodal transportation system that promotes Vermont's quality of life and economic wellbeing.

VTrans Strategic Goals:

1. Provide a safe and resilient transportation system that supports the Vermont economy.
2. Preserve, maintain, and operate the transportation system in a cost effective and environmentally responsible manner.
3. Provide Vermonters energy efficient travel options.
4. Cultivate and continually pursue innovation, excellence, and quality customer service.
5. Develop a workforce to meet the strategic needs of the Agency.

Budget

Physical Activity

- VTrans uses the prioritized bicycle network map from the On Road Bike Facility Plan for making planning, design and operations decisions. Investments are prioritized within grant programs such as the Transportation Alternatives Program and the Bike/Ped Program to prioritize bike and pedestrian infrastructure investments that make walking and biking safer and more convenient.
- Vermont statutory language clarifies that highway funds may be used for bicycle and pedestrian facilities; by flexing funds, increased investments in public transportation and bicycle-pedestrian improvements support active transportation.
- Continue to target infrastructure investments that support biking and walking in designated downtowns and village centers while also using the On Road Bike Facility Plan to prioritize investments to improve road shoulders.

Air Quality

- VTrans encourages funding and policy decisions that strengthen public transportation, congestion relief, air quality improvements, and non-motorized and rail travel through the Agency budget and other Agency actions.
- Consider support for the development of cleaner bus and truck fleets and invest in freight rail infrastructure to reduce greenhouse gas emissions, improve local air quality, promote health, and foster energy independence.
- Consider providing incentives for motor vehicle drivers to purchase vehicles with technologies designed to control pollution and reduce emissions.

Equitable Access

- Implement criteria in grant evaluation processes to prioritize transportation investments in distressed regions, low-income neighborhoods, communities with high unemployment and poverty rates, and communities of color to stimulate economic growth and provide access to jobs.
- Emphasize projects that will revitalize the economy of struggling communities, lower health disparities, and connect vulnerable populations to jobs, business opportunities, healthy food outlets, medical services, and other necessities.
- Emphasize accessibility, instead of simply mobility, in transportation policies and programs.
- Ensure transparency, accountability, and meaningful participation by residents, advocates with diverse interests, and experts from different fields. Engage new partners in decision making and provide the training, data and resources to allow full informed participation by the people affected most by decisions and investments.
- Encourage and appropriately fund equitable transit oriented development by considering the creation of incentives for integrated land use and transportation planning.
- Explore means of providing low-income rural communities greater access to public transportation funds from federal transportation funding sources in order to increase access to employment and educational opportunities.

Safety

- VTrans develops and implements design guidance to provide safe facilities for all transportation users. All grant recipient of funding from VTrans must follow the design guidance standards, the Agency also provides technical assistance both internal and external to the Agency in support of advancing these standards. VTrans offers trainings on bike/ped design and the Americans with Disabilities Act standards and design applications.
- VTrans is committed to ensuring safety investments continue and occupant protection strategies, as well as roadway and community design modifications, promote the protection and safety of pedestrians, bicyclists, drivers, and passengers.

Policy

Physical Activity

- VTrans works closely with the VT Department of Health and Agency of Commerce and Community Development on land use and active transportation issues. Through our relationship with the Regional Planning Commissions, as defined by the Transportation Planning Initiative work program each year, VTrans works on land use and transportation policies at the local and regional level that encourage transit oriented developments and other mixed-use developments, and increase connectivity among neighborhoods and communities for all transportation modes.
- Through the Transportation Planning Initiative and participation in the State Comprehensive Energy Plan, VTrans supports policies that reduce vehicle miles traveled per capita, including land use policies that reduce vehicular travel, increase public transportation

service, increase the number of park and ride facilities statewide and increase active transportation infrastructure.

- Consider the evaluation of policies that increase motor vehicle driver responsibility for accidents involving child pedestrians and child bicyclists in residential neighborhoods and school zones.

Air Quality

- Consider measures to enable state, regional and local planners to protect residents from local air and noise pollution from high-volume roadways and airports by discouraging new development, including public facilities investments, near these air and noise pollution sources. Consider constructing barriers to reduce nearby residents' exposure to noise pollution, paying particular attention to low income communities and communities of color.
- Consider policies that reduce environmental pollution caused by transportation by migrating to renewable transportation energy sources.

Equitable Access

- Consider creating incentives and accountability measures to ensure that state, regional and local transportation plans account for impacts on health, safety, and equity of all community members, including people with disabilities, individuals with limited English proficiency, low income communities, and communities of color.
- Consider giving state, regional, and local governments more flexibility to move transportation program investments among funding categories to target spending to local transportation needs which address equitable access to transportation services.

Safety

- Consider policies to continue to expand the use of ignition interlock systems for offenders convicted of driving under the influence, as well as a requirement for mandatory alcohol and drug assessment and treatment for impaired offenders.
- Consider lowering the permissible blood alcohol content level and enhance enforcement of laws prohibiting alcohol sales to minors.
- Consider strengthening and enhancing enforcement of motorcycle and bicycle helmet laws.
- Consider strengthening and enhancing enforcement of distracted driving laws, including texting while driving.

Program

Physical Activity

- Consider investments which create dense networks of connected streets that serve the needs of all transportation modes using “complete streets” design guidelines.

- Design streets considering the context of the road and incorporate appropriate levels of biking and walking infrastructure to reduce motor vehicle speeds and minimize pedestrian and bicycle injuries throughout towns and cities.
- Consider implementing multimodal level of service indicators as performance measures for roadways that include measurements of pedestrian bicyclists, car-shares, and public transportation operability.

Air Quality

- VTrans provides incentives via the Capital Commuters and the Go Vermont program that reduce vehicle miles traveled per capita and implement active living environments that promote walking and bicycling, using public transit, and reducing air pollution.
- Consider providing bicycle storage at public transportation stations, bus stops, city car share point-of-departure locations, and all state office buildings.
- Consider retrofitting existing diesel vehicles with current pollution control measures to reduce emissions.
- Consider requiring inspection and maintenance programs for medium and heavy duty vehicles to assure air emissions requirements are met.
- Consider promoting bike-share programs statewide in areas where density indicates a likelihood of program success and promote the implementation of protected bike lanes in high density travel areas in accordance with design and contextual standards.

Equitable Access

- Strive to concentrate greenways, bikeways, and sidewalks in areas with high rates of health disparities and chronic disease, especially in low-income communities and communities of color.
- Continue to support transportation services for areas with low population densities using a mix of publicly funded, private enterprise and volunteer based demand response and scheduled transportation services to meet basic needs and support local work forces.
- Ensure that communications regarding transportation plans, projects and programs are available to all Vermonters through translation, written and verbal messaging, and braille and ensure that VTrans staff receives training in communicating with people with disabilities and Limited English Proficiency.

Safety

- Through the VT Highway Safety Alliance and implementation of the Strategic Highway Safety Plan VTrans has developed and implemented a curriculum at the VT Police Academy to reinforce knowledge of existing laws around how motorists interact with bicyclists and pedestrians. Other safety initiatives to consider include strengthening and enforcing traffic policies that will lead to reduced injury and death of motor vehicle drivers, passengers, bicyclists, and pedestrians.

- VTrans continues to support the Safe Routes to School program via a web site and through educational programs implemented by Local Motion. Safe Routes to School infrastructure projects continue to be supported via the Transportation Alternatives and Bike/Ped grant programs.
- Continue to implement and publicize systematic sobriety checkpoints.
- Continue to enhance seat belt enforcement programs.
- Continue to utilize context sensitive design standards which include bicycling and walking infrastructure while mitigating potential adverse effects of motor vehicles utilizing a “Complete Streets” design philosophy.
- Reduce barriers to receiving subsidized car seats and bicycle helmet distribution and education, such as eliminating rule that those receiving car seats must have a car.

Attachment E: Health in All Policies Government Mechanisms as Opportunities for Change

See PDF attachment.

Rudolph, L., Caplan J., Ben -Moshe, K. & Dillon L. (2013). Health in All Policies: Guide for State and Local Government. Washington, DC and Oakland, CA: American Public Health Association and Public Health Institute.

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TO: Vermont Public Service Board
FROM: David C. Englander, Senior Policy and Legal Advisor
DATE: October 10, 2014
SUBJECT: Public Service Board Dockets and the Public Health Criterion

Introduction

30 V.S.A. § (b)(5) states that before issuing a Certificate of Public Good, the Board must find that a proposal “will not have an undue adverse effect on esthetics, historic sites, air and water purity, the natural environment, the use of natural resources, and the public health and safety...” Today, while petitioners and parties examine public health and safety in some dockets, not every petitioner undertakes an analysis of whether or not a project has an adverse effect on public health. In part, this is due to either unknown or uncertain health effects but also because there is not an accepted analytic framework to determine if there is an adverse public health effect and whether that effect is undue.

The Department of Health recommends the Board adopt a framework such as the one proposed below. The proposal mirrors the *Quechee* Test used to examine the aesthetics criterion,¹ utilizes relevant criteria found in the existing definition for “public health hazard” pursuant to 18 V.S.A. § 2 (9), and was developed with Department scientists and medical personnel.

The Public Health Test

Is there an adverse health effect?

What is the weight of medical and scientific evidence?

If so, does it affect public health?

What is the number of people at risk?

Are there populations that are particularly vulnerable?

What is the characteristic or condition of the agent of harm?

Are there potential public health benefits that outweigh the public health risk?

¹ Previously adopted by the Board. *See, e.g.,* Docket 7156, *Order* of 8/8/07; In Re: Northern Loop Project, Docket 6792, *Order* of 7/17/03.



Is the adverse public health effect undue?

What is the degree of potential harm?

What is the cost, availability, and efficacy of treatment?

Has the Applicant taken generally available mitigating steps to reduce or avoid potential risk?

The Health Test Briefly Explained

Is there an adverse health effect?

The criterion asks whether a project poses a risk of having an adverse health effect. That is, is there any effect at all in a way that can be predicted? The Board could determine what the weight of credible medical and scientific literature and research suggests. If the answer is that the weight of the evidence supports the existence of an adverse health effect, then one proceeds to the next prong.

If so, does it affect public health?

Not all adverse health effects are public in nature. In determining whether a health effect is public, one can look to 18 V.S.A. § 2 (9), which provides the definition for public health hazard. The first sub-question is “What is the number of people at risk?” The second, related sub-question is “Are there populations that are particularly vulnerable?” That is, are there people (e.g. children or the aged) within the affected area that might be particularly impacted by a proposed project.

The third sub-question is “What is the characteristic of the condition or agent that is the source of potential harm?” Is the agent or condition particularized or something that could spread? Is it something that causes a rash or is it a carcinogen?

A fourth sub-question is “Are there potential public health benefits that outweigh the public health risk?” This gives parties an opportunity to articulate, or the Board to determine, that while there may be adverse health effect(s), the public health benefits may outweigh them. In effect, it asks what is the net health effect?

Is the health effect undue?

If it has been determined that there is a public health effect, then one should ask: “What is the degree of potential harm?” What are the long and short-term health effects? Second, “What is the cost, availability and efficacy of treatment?” What does the scientific literature indicate?



Lastly, akin to *Quechee*, the question is: “Has the Applicant taken generally available mitigating steps to reduce or avoid potential risk?” What could be done to eliminate or reduce the impact to human health? What are the barriers to implementation and what are the costs?

Resources

It is critical to note that the Vermont Department of Health is currently working with the Department of Public Service to explore ways to devote resources to reviewing potential health effects of proposals subject to Section 248. These resources would serve to provide technical assistance to the Board and parties in implement this proposed framework but the Departments lacks those resources today.

Conclusion

While this particular approach is novel, it is consistent with the Board’s recent practice of setting health- based conditions on certain projects.² The Department supports this direction and is prepared to draft additional guidance to provide the Board, the state, and the public with additional detail how these criteria may be examined.

It should be noted that this proposal is not intended to disturb the current examination of noise under the aesthetics criterion. Sound might be examined under 248 V.S.A. § 248(b)(5) as “noise,” “public health” or “air pollution” in the same way that the visual impact of a project might be examined under aesthetics and impact to public investment. We also note that this proposal is intended to apply to human, public health and is not suggesting that impacts to wildlife be examined in the same manner.

Lastly, this proposal is not intended to be the test in its final form. In addition to comments made by parties to this docket, and refinements by the Board, it will, if adopted, be shaped by the decisions of the Board as a framework becomes practice.

² See, *inter alia*, Docket No. 7508 Order of 6/11/2010; Docket No. 7628 Order of 5/31/2011.



GOVERNMENT MECHANISMS AS OPPORTUNITIES FOR CHANGE

Government agencies continuously engage in processes that offer opportunities to incorporate a health lens, foster new intersectional relationships, make recommendations for intersectoral action, or embark on a more structured Health in All Policies approach. For example, agencies develop reports, sponsor conferences and educational events, develop grant programs, write proposals to obtain new funding, engage in strategic planning and accreditation processes, respond to natural disasters, and in some cases develop and propose regulations and legislation. The table below describes government functions^{88,89} and provides examples of how each of these may offer “windows of opportunity” for embarking on new partnerships to support specific healthy policies or programs, or for launching a Health in All Policies initiative.

GOVERNMENT MECHANISM	OPPORTUNITY	POSSIBLE ACTION
DATA	Government agencies collect, standardize, and disseminate information and data. Sharing data or standardizing data elements across agencies can ensure more effective collaboration.	<ul style="list-style-type: none"> • Improve data sharing and collaborate on data collection between schools and social service agencies to improve access to nutrition assistance programs. • Include indicators related to the social determinants of health (e.g., income and employment, housing, and transportation) in health department reports.
DIRECT SERVICE PROVISION	States, counties, and cities provide direct services to communities and individuals. Departments can expand or create new services, better customize services, link services, and reduce barriers to access.	<ul style="list-style-type: none"> • Include healthy homes assessments in weatherization programs. • Incorporate health screening into intake processes at youth detention facilities.
EDUCATION AND INFORMATION	Agencies educate and inform the population on topics relevant to individuals, organizations, communities, and businesses.	<ul style="list-style-type: none"> • Incorporate messages around the importance of physical activity in promotional materials for a park. • Require that nutrition information be either posted or appear on the food labels of all food sold on school grounds or at school-sponsored events.
EMPLOYER	Governments employ staff in offices, parks, schools, and throughout cities, counties, and states. Employee policies can encourage healthy behaviors and also set a positive example for private businesses.	<ul style="list-style-type: none"> • Provide transit subsidies to encourage employees to use public transportation. • Provide lactation accommodations, including specially designated rooms and refrigerators, to support breastfeeding.
FUNDING	Grants provide funds to support specific projects or activities. Subsidies are assistance (monetary or otherwise) that reduces the need for monetary expenditures. Grants and subsidies can be used to encourage health-promoting actions. This includes payment for health-promoting services (e.g., Medicaid or Medicare).	<ul style="list-style-type: none"> • Offer childcare subsidies to support workers with children. • Incorporate health and health equity criteria into requests for proposals from agencies outside the public health field.

GUIDANCE AND BEST PRACTICES	Guidelines can be used to encourage communities to implement best practices or proven methodologies.	<ul style="list-style-type: none"> • Incorporate strategies that promote community health into comprehensive land use and transportation plans or community climate action plans. • Share evidence to inform the adoption of evidence-based and evidence-informed strategies to address crime prevention.
PERMITTING AND LICENSING	Permits and licenses provided by government bodies authorize particular types of activities or development. ⁹⁰ Zoning, for example, is used to divide land into areas for allowable uses.	<ul style="list-style-type: none"> • Streamline permitting processes for farmers' markets to provide healthy food in underserved residential neighborhoods. • In the housing element of a comprehensive plan, outline a method for encouraging housing development near public transit hubs.
PURCHASING: PROCUREMENT AND CONTRACTS	Agencies spend significant money purchasing goods like food, supplies, and equipment, and contracting for services like construction and janitorial services. Procurement and contracting policies can promote other desired outcomes such as economic resiliency, and are a way to model behavior for other agencies or private businesses.	<ul style="list-style-type: none"> • Establish procurement policies that require vending machines on agency property to provide a minimum number of healthy options. • Establish policies supporting contracting with veteran-, minority-, or women-owned businesses.
REGULATION	Agencies can add, abolish, or change regulations, close or open loopholes, improve enforcement, or change complaint mechanisms for the public. Regulation is often useful in situations where consumers lack essential information.	<ul style="list-style-type: none"> • Improve enforcement of smoking bans in multi-unit housing structures. • Develop a regulation to apply a health analysis to budgetary and legislative decisions.
RESEARCH AND EVALUATION	Agencies may initiate research, or partner on projects with universities, research institutions, and communities. Evaluation can promote best practices and support model programs.	<ul style="list-style-type: none"> • Conduct economic research on the expected return on investment in terms of health outcomes from specific policies or types of policies. • Research new fuel technologies to identify strategies to improve air quality.
LEGISLATION AND ORDINANCES	State legislation and local ordinances provide funding or authorize new programs, regulations, or restrictions. Government agencies vary in their legal ability to support the passage of legislation and ordinances.	<ul style="list-style-type: none"> • Amend a local ordinance to allow mobile produce vending in a residential area. • Pass legislation to support access to safe, clean, and affordable water.
TAXES AND FEES	Governments can add new taxes, change or abolish existing taxes, or change the tax base to finance needed services.	<ul style="list-style-type: none"> • Increase vehicle licensing fees to raise revenue for supporting transit projects. • Raise cigarette taxes and use the revenue to pay for health care services and discourage tobacco use.
TRAINING AND TECHNICAL ASSISTANCE	Agencies provide training and technical assistance to support local programs in working toward ongoing goals, and as programs and policies change. Both interagency and intra-agency training are essential to support collaboration.	<ul style="list-style-type: none"> • Educate non-health staff on how their work relates to health outcomes. • Provide technical assistance to regional transportation agencies on how to incorporate health considerations and outcomes into transportation modeling.