Instructions for Rating and Ranking of Health Issues

Step 1: Rate each health issue based on how well it meets each of the criteria provided.

Ratings: 1=low, 2=medium, 3=high, 4=very high

<table>
<thead>
<tr>
<th>MAGNITUDE OF ISSUE</th>
<th>IMPACT ON INEQUITY</th>
<th>ECONOMIC + SOCIAL COST</th>
<th>FEASIBILITY FOR CHANGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what degree is it a significant public health issue?</td>
<td>To what degree is it a significant health equity(^1) issue?</td>
<td>To what degree does it create economic and social challenges?</td>
<td>To what degree are we able to act and make change?</td>
</tr>
<tr>
<td>• Percent of population at risk and/or number of individuals affected</td>
<td>• A health inequity(^2) exists for the issue</td>
<td>• Direct economic and social impacts to people’s lives</td>
<td>• Additional collective action is possible and will make a difference</td>
</tr>
<tr>
<td>• Severity of health consequences</td>
<td>• Specific populations are disproportionately affected</td>
<td>• Impacts the State and health system through the cost of care, services, etc.</td>
<td>• Knowledge and technical capacity needed are available</td>
</tr>
<tr>
<td>• Years of potential life lost (impacts youth and younger Vermonters)</td>
<td>• Demonstrated disparity between various groups; especially among populations that have experienced historic injustice</td>
<td></td>
<td>• Resources needed are available</td>
</tr>
<tr>
<td>• Impacts on quality of life</td>
<td></td>
<td></td>
<td>• Action is within the control of engaged stakeholders to implement</td>
</tr>
<tr>
<td>• Vermont is worse than the other states; the trend is going in the wrong direction</td>
<td></td>
<td></td>
<td>• Political opportunity and will to make change</td>
</tr>
</tbody>
</table>

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\(^1\) Health equity exists when all people have a fair and just opportunity to be healthy, especially those who have experienced socioeconomic disadvantage, historical injustice and other avoidable systemic inequalities that are often associated with social categories of race, gender, class, ethnicity, social position, sexual orientation, and disability

\(^2\) Health inequity exists when these avoidable inequalities lead to an uneven distribution of the resources and opportunities for health.
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Step 2: Rank order each of the health issues
The rank order each of the health issues will be automatically tabulated based on your rating of the individual issues. The health issue with the highest total score, will automatically be assigned “1”, the second highest total score, assigned “2” etc. In the case of identical totals, use your best judgment to assign a unique rank number to each health priority to break the tie. When you are through, you will have used each ranking number ONLY ONCE. You may stop the numerical ranking when you reach “30”.

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Once the health issues are rated and ranked, the next steps will be selecting priorities and developing strategies for health improvement

Step 3: Select Priorities
The ratings and rankings from all participants will be shared with the Steering Committee which will use this information to make the final determination regarding the top priorities for collective focus in the State Health Improvement Plan. Other issues that have been identified will addressed through additional programmatic action.

Step 4: Develop strategies for health improvement
Work groups will be convened to developing strategies for action related to the priorities in the State Health Improvement Plan. These work groups will include health department staff, community advisors, and others with knowledge and passion to make change. Strategies selected will include consideration of:

- Early investments and opportunities for life long health and wellness
- Focus on prevention
- Proven strategies to address multiple wins
- Effectiveness – actions will have an impact that can move the needle and demonstrate measureable outcomes
- Evidence-based interventions and successful application.
- Extent to which interventions will mitigate root causes.
- Opportunity to increase health or social equity.