

GOVERNOR'S PUBLIC HEALTH COMMISSION

Public Comments Summary

Number of Comments: 17 Timeframe: April 14, 2022-May 8, 2022

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No. of Comments	Торіс	Summary
4	Opposition to expansion of public health authority and mandates	There were 4 respondents who voiced opposition to the expansion of public health and its ability to create laws, policies, or mandates regarding the health of Indiana residents. These respondents suggested to decrease public funding, limit data collection and sharing of health information, and only allow public health departments to make recommendations on public health issues (e.g., water safety, restaurant sanitation, etc.)
3	Workforce	One respondent recommended that the licensure requirements for mental health professionals be reviewed and potentially amended to increase mental health workforce, such as considering testing alternatives to obtain clinical licensure for those who have been in the field but have never pursued clinical licensure.
		One respondent recommended further investing in the Vocational Rehabilitation workforce to ensure residents with disabilities are being serviced by highly qualified public health workers that are trained, certified, and licensed in their field of specialty.
		One respondent recommended: 1) offering state incentives or programs to help with physician recruitment in rural areas, 2) increasing funding for graduate medical education programs, 3) continuing to reduce barriers to nursing professional programs, and 4) continuing to increase reciprocity of licensure for medical professionals.
3	Adolescent/childhood health	One respondent recommended implementation of the following to improve the health of children in Indiana (highlights noted below; list is not exhaustive):
		 Community Health in all Policies (HIAP) Healthy food financing initiatives (HFFI) at the state or local levels Continue federally funded free school meals Require licensing of all childcare providers and integrate nutrition and physical activity best practices
		One respondent recommended focusing on mental health of children through: a) normalizing emotional changes through life transitions; b) educating and creating barriers to marijuana use;

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		c) increasing counselors in the school system; and d) providing parity of payment for mental health appointment.
		One respondent urged continued attention and focus on infant mortality and the interconnectivity of things such as breastfeeding that have long-term health outcomes (e.g., on obesity, diabetes, and cancer). They recommended utilizing assessments, collecting stakeholder input and data, utilizing iterative change methods to scale and sustain high impact efforts, and prioritizing appropriate funding to scale efforts
2	Public health funding	One respondent recommends that funding, infrastructure, and training be dedicated to addressing social determinants of health (SDOH) and their root causes; specifically working with community partners to address the underlying factors of SDOH using dedicated staff and resources.
		One respondent is opposed to using additional taxpayer funds to support public health.
2	Other	One respondent recommended development of a transparent implementation plan that clearly outlines next steps and planned outcomes of this Commission.
		One respondent recommended implementation of legislation to modernize Indiana's HIV and Viral Hepatitis Criminal and associated Public Health Codes in order to end the HIV/HCV epidemics in IN.
1	Emergency Preparedness	One respondent recommended ways to improve the trauma system, EMS, and emergency preparedness. Recommendations for the trauma system (including, but not limited to): 1) creating a level IV trauma center governed by the state; 2) increasing involvement and duplicating Trauma Regional Advisory Committees; and 3) ensuring hospitals report their trauma data.
		Recommendations on ways to improve EMS: 1) Expand scope of practice for EMS providers and paramedics; 2) find ways to improve the passing exam rate for paramedics; and 3) increase interoperability between EMS providers and other responding public agencies.
		Recommendations on ways to improve emergency preparedness: 1) Adopt national curriculum for emergency preparedness, response, and recovery; 2) create interoperable platform to communicate in the event of emergency; 3) conduct local or regional gap analysis; and 4) establish best practices for health regional coalitions.

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1	Governance/infrastructure	One respondent representing the Top 10 Coalition had the following recommendations for improving the public health system:
		 Implementing a Health in All Policies (HIAP) approach across state departments and entities Increasing and sustaining multi-year, community based public health funding Ensuring strategic collaboration across public, private and non-profit sectors Prioritizing upstream, policy, system, environment changes Supporting evidence-based policy changes around nutrition and food access and tobacco prevention and cessation
1	Data/Integration	One respondent recommended creating a defined data set that is standardized and normalized for all 92 counties, and recommended that CHIRP be expanded to include ALL vaccinations, not just childhood vaccinations