



CONNECTICUT
HEALTH IMPROVEMENT COALITION
Partners Integrating Efforts and Improving Population Health

Healthy Connecticut 2020
 State Health Improvement Plan

Agenda Items	Discussion	ACTION Items
2017 Policy Agenda	<p>HPV – Add HPV vaccine to the mandated vaccines for school.</p> <ul style="list-style-type: none"> There was not a bill proposed to mandate the HPV vaccine for schools; however, funding for the vaccine (\$9.5 million) was included in the Governor’s Biennium budget bill (proposed HB 7027) to cover the HPV vaccine for 11-12 year-olds. <p>-Cathy mentioned that there is a change in the HPV vaccine schedule. Instead of having 3 doses of the vaccine, only 2 doses are needed for children <15 years at the time of 1st dose. This will have a favorable impact on the budget, as well as uptake among younger children.</p>	
2017 Action Agenda -Objective ID 1: Increase by 5% the vaccination coverage levels for (ACIP) recommended vaccines among children and adults.	<p><u>Strategy: Enhance CT Immunization Registry & Tracking Systems (CIRTS) to accept electronic reporting and implement comprehensive reminder/recall systems.</u></p> <p><i>Action (a): Meet DPH interoperability grant deliverables</i></p> <p>-This item is currently on hold; is dependent upon the grant. Kathy reported that a gap analysis requested by CDC is currently underway to determine if the vendor is sufficient to meet current/future needs.</p>	
-Objective ID-5: Increase by 5% the percentage of adults who are vaccinated annually against seasonal influenza.	<p><u>Strategy: Develop new and diverse venues for influenza vaccine administration and culturally appropriate outreach to ensure access to all population groups.</u></p> <ul style="list-style-type: none"> Carol Steinke shared the results of the <i>Flu Vaccination Survey</i> that was sent out by the Hartford Health Department to 72 health departments in the state through survey monkey. Only 12 health departments completed the survey. The survey is being revised and the next step is to reach out to CADH president 	<p>-Carol will share the PDF version of the <i>Flu Vaccination Survey</i> with members and work on revising the survey and disseminating with input from DSS and CADH.</p> <p>-Kris will reach out to VNAs.</p>

	<p>to see if they can assist with disseminating and promoting a second push of the survey.</p> <ul style="list-style-type: none"> • The group talked about engaging additional partners in the next round to try to get a better picture of existing venues in communities. Suggested partners include: <ul style="list-style-type: none"> ○ CADH – Cathy Wiley ○ DSS – Carol to follow up with Dr Zavoski regarding reimbursement issues that have been raised & to get input on the survey design ○ DPH Local Health Survey – Kathy Kudish may have more information on this – Cathy Wiley will follow up (<i>this survey is already lengthy and may not be feasible to add additional questions. Survey goes out 7/1/17, so timeline may not align well with SHIP.</i>) 	<p>-Cathy will reach out to the president of CADH about the rationale for the survey and need for their input.</p> <p>-Cathy will follow-up with Kathy Kudish on the local health annual survey. (<i>Cathy contacted Kathy K who feels in retrospect that the annual survey does not include the kind of detail the committee is seeking.</i>)</p>
<p>-Objective ID-7: Increase by 20% HPV vaccination rates for male and female adolescents 13 to 17 years of age to meet CDC guidelines.</p>	<p><u>Strategy: Educate providers about vaccine availability, delivery, cost and practice guidelines.</u></p> <p>- \$100,000 has been proposed in the budget for the HPV Awareness media campaign.</p> <p>- March 24, 2017 is the deadline for everyone to do outreach.</p> <p><i>Action (c): Partner with Capitol Community College and Hartford Public Schools on a pilot to promote HPV vaccination.</i></p> <p>- This is on hold until a lead partner can be identified</p> <p>- Southern Connecticut State University is also involved with this.</p>	
	<p><u>Strategy: Develop plan for a mandate for HPV vaccination for youth in CT.</u></p> <p>- More education has been done, especially on the provider side (i.e. webinars etc.)</p> <p>- Cathy shared an article published in <i>Connecticut Medicine</i>. The article titled, ‘If There Were a Vaccine Against Cancer’ was written by Commissioner Raul Pino (and drafted by Kathy Kudish). The journal reaches 15,000 to 20,000 physicians in Connecticut. The committee will check into any copyright issues regarding distributing the article more broadly or possibly re-posting in additional publications</p> <p>- the group also discussed identifying additional networks to distribute awareness information:</p>	<p>- Kathy K. agreed to explore copyright issues regarding CT Medicine article.</p> <p>- Cathy will share the link to the <i>Connecticut Medicine</i> article (http://conmed.csms.org/i/768261-january-2017)</p> <p>- Kris will approach the <i>CT Nurses Assoc.</i> and <i>SBHCs.</i></p> <p>- Carol will approach the <i>CT Assoc. of PH Nurses.</i></p>

	<ul style="list-style-type: none"> • CT Nurses • CT Association of Public Health Nurses • American Academy of Pediatrics • School Based Health Centers 	<p>-Cathy will approach the Am. Academy of Pediatrics. -Sandy will contact SBHC</p>
<p>-Objective: Reduce by 5% the number of diagnosed cases of HIV overall, among men who have sex with men (MSM) and among black females.</p>	<p><u>Strategy: Implement routine screening progs. to increase early detection of HIV.</u> -HIV Prevention staff will be working with five sites to discuss routine screening initiatives with Dulce. An update will be provided at the next meeting. -CIRA staff are implementing a survey of Yale emergency providers to see what the barriers are to implementing routine screening. Laretta Grau is working on this.</p> <p><u>Strategy: Develop coordinated HIV surveillance, prevention and care data systems to monitor Connecticut trends in the HIV continuum and effectively target resources/ interventions.</u></p> <p><i>Action (a): Coordinate data collection, identify data needs, and evaluate approaches for identifying people who are unaware of their status and link them to care.</i></p> <p>-This is being coordinated through <i>Data to Care</i>. The HIV Programs received technical assistance from GEARS (funded by the CDC). -1st Quarter: Will have <i>Data to Care</i> plan developed (March 31st) -2nd Quarter: (End of June)</p> <ul style="list-style-type: none"> • DIS staff will be hired • Progress will be made on data linkages • <i>Data to Care</i> plan will be implemented <p><i>Action (c): Provide training for local EIS staff</i></p> <ul style="list-style-type: none"> • This action item was taken off. <p><u>Strategy: Increase referrals to partner services.</u></p> <p><i>Action: Establish partner referral services throughout the state at healthcare facilities.</i></p>	<p>Heidi will send an update to Sandy. This was completed.</p>

	<p>-Review data on models of partner notification from all NE states to identify possible enhancements to CT partner referral program working with NE State Health Dept. STI Consortium.</p> <p>-Heidi has all of the models; A paper was published on results of NE partner referral programs in March 2017. Report will be disseminated.</p> <p><u>Strategy: Expand use of pre-exposure prophylaxis (PrEP) as preventive measure for persons engaging in high-risk behaviors.</u></p> <p><i>Action (a): Expand and evaluate the use of PrEP navigators in CT.</i></p> <ul style="list-style-type: none"> • There are five Connecticut entities. • DPH is supporting PrEP navigation pilots to be implemented in 2017 and CIRA is providing support with evaluation of the pilots. <p><i>Action (b): Complete and report on findings of four CIRA PrEP implementation studies each in a different population.</i></p> <ul style="list-style-type: none"> • 1st Quarter: <ul style="list-style-type: none"> ○ Four CIRA funded pilot studies on PrEP, all based in CT and other parts of the New England region, are underway focused on: 1) Integrating PrEP in reproductive health services at Planned Parenthood; 2) Initiating PrEP Use among women experiencing intimate partner violence; 3) Implementing PrEP services for substance using men who have sex with men in Providence, RI and New Haven, CT; 4) Cost effectiveness of combining PrEP with syringe exchange and overdose prevention services in CT. ○ Studies are in different stages of completion. Study # 4 is complete. Findings for other studies are anticipated by the end of 2017. Briefs on all studies will be prepared and disseminated. • 2nd Quarter: Report on results of one study will be available. 	<p>-Heidi will give an update at the next meeting.</p> <p>Elaine will disseminate CIRA research briefs with the study findings when available.</p>
<p>Next Steps</p>	<p>Next Action Team Meeting – TBD</p>	