

HEALTHY CONNECTICUT 2020 ADVISORY COUNCIL

Meeting Summary August 20, 2019 9:30 am - 11:30 am

Meeting Purpose and Outcome

Welcome new SHIP Advisory Council members; begin development of the 2020 SHIP Policy Agenda; gather member input on emerging issues to consider as we move into the development of SHIP 2.0.

Attendees

Deputy Comr. Heather Aaron, CT Dept. of Public Health; Patricia Baker, CT Health Foundation/Advisory Council Chair; Elizabeth Beaudin, Connecticut Hospital Association; Dr. Fred Browne, MD, Physician Representative; Comr. Beth Bye, CT Office of Early Childhood; Joseph Cassidy, CT Dept. of Administrative Services; Judy Dicine, Chief Sate's Attorney Office; Jordana Frost, March of Dimes; Terry Gerratana, Office of Health Strategy; Pareesa Charmchi Goodwin, Connecticut Oral Health Initiative; Brenetta Henry, Consumer Representative; Lynne Ide, Universal Health Foundation; George McDonald, Consumer Representative; Scott Sjoquist, Mohegan Tribal Health; Nancy Yedlin, Donaghue Foundation; Rob Zavoski; Dept. of Social Services; Rosa Biaggi, CT Dept. of Public Health; Kevin Borrup, CT Children's Hospital; Mario Garcia, CT Dept. of Public Health; Augusta Mueller, Yale New Haven Health; Cathy Sisco, Wheeler Clinic; Sandy Gill, CT Dept. of Public Health; Laurie Ann Wagner, CT Dept. of Public Health; Melissa Touma, CT Dept. of Public Health; Chantelle Archer, CT Dept. of Public Health; Orlando Velazco, CT Dept. of Public Health; Brie Wolf, CT Dept. of Public Health

Welcome and Introductions

The Advisory Council welcomed four new members – Dr. Fred Browne, MD; Beth Bye, Commissioner for the CT Office of Early Childhood; Terry Gerratana with the CT Office of Health Strategy, and Joseph Cassidy with the CT Dept. of Administrative Services.

DPH Deputy Commissioner's Remarks

Deputy Comr. Heather Aaron, who has a background in hospital and nursing administration, acknowledged the role that DPH has played in spearheading progress in diseases related to maternal, infant, and child health, and chronic diseases. She also acknowledged that we are in a new era of public health, one that includes addressing issues related to toxic stress, the opioid epidemic, and working together to achieve health equity. She challenged members to look at data differently, such as stratifying the data for different populations, and looking at root causes. She believes Connecticut needs to look at its resources to see if the state is equipping the health system with what it needs.

Comments:

- AC Member commented that we need to look at the data once a health issue reaches the urban neighborhoods, not just when a health issues affects other communities, specifically Caucasian communities. DC Aaron agreed but added that we need to look at the psychological impact of the data because we make assumptions that bad things happen to people because they are bad, which is not the case.
- March of Dimes, which is doing a maternity birth report card, is trying to frame the messaging to show how racism impacts motherhood.



SHIP Infrastructure

- The coalition is planning to create an Ad hoc communication subcommittee to help partners stay connected and find ways to increase the influence of organizations. It will also provide learning opportunities. A request to be involved with the subcommittee will be announced at the Summit in September, and an email will go out to the coalition.
- On August 14th, a SHIP Coalition Call was held to reconnect with the coalition and provide updates on coalition activities and 2019 Policy Agenda results as well as share preliminary findings from the Connecticut State Health Assessment (SHA). A total of 45 participated on the call.
- Comments/Questions:
 - Question: Are we prepared to give feedback around the priorities and focus on the data? Answer:
 Yes. We are getting participation from non-health partners. We also plan to look at the social
 determinants of health to develop a framework for the next phase of the SHIP.
 - o Comment: We need to make systematic changes to break down silos.
 - Comment: We need cross agency work to deal with public health matters that fall between the cracks. For example, do we have systems in place to address health issues such as lead poisoning?
 - Comment: The Office of Health Strategy is working on social determinants of health. They have data
 and are establishing a health information exchange. They are specifically looking at the data and
 using the data to develop information to address health concerns.

AC members were invited to send additional comments to HCT2020@ct.gov.

SHIP Policy Agenda Update

Brie Wolf (DPH) provided an update on the 2019 Legislative Session. Several items on the 2019 SHIP Policy Agenda passed, including: Tobacco 21 - which increases the age of sale as well as fines of tobacco products —It will go into effect on October 1, 2019. Paid Family Medical Leave - this is an employee funded system that will be available to most residents. It will allow employers to provide employees paid, job-protected leave (12 weeks) for health-related reasons. It also expands the definition of a family to include LGBTQ families. Several bills passed related to opioids including one that would increase the penalties for the sale of fentanyl. In 2017, a bill was signed that granted statutory authority to community health workers (CHWs). In 2019, a bill was passed that would require that a certification program be established for CHWs. Some of the policy agenda items that did not have legislation pass included: Seatbelts in all positions, Property Maintenance Code, and the Universal Motorcycle Helmet Law. Additional details on SHIP Policy Agenda issues which have become Public Acts can be found in the 2017-2019 ____SHIP Policy Agenda attachment to this meeting summary.

Question: Would the Paid Family Medical Leave Act cover bed rest before maternity leave. *Answer:* Yes, individuals would receive two additional weeks.

2020 Proposed Concepts Discussion

Legislative proposals for the 2020 Legislative Session are due to the Office of Policy and Management by November 4, 2019. State agencies are currently meeting with program staff for concepts. During third quarter Action team meetings members have been providing policy agenda ideas which will be shared at the November Advisory Council meeting. At that meeting proposed ideas will go through a prioritization and AC members will vote to identify topics to include on the 2020 Policy Agenda.

Topic Suggestion: Expanded coverage for the uninsured (e.g. Medicaid expansion eligibility)



Partner Engagement - Community Input to the SHA

On February 20, 2019, the *Connecticut Community Health Priority Survey* was disseminated to the entire SHIP Coalition with the goal of having as many Connecticut residents, including partners and community organizations, identify health issues that are priorities for their communities. In addition, 11 focus groups were conducted to learn more about the health issues affecting specific populations in the state. These populations included the recently incarcerated, the developmentally disabled, the LGBTQ community, African American Women, the Hispanic Community, Veterans and Families, Immigrants/Refugees and many more.

Overall, the survey received 1,388 responses, which have been incorporated into the State Health Assessment (SHA) along with the input received from the focus groups.

Emerging Issues Discussion

AC members were asked to share any emerging issues they believed needed to be included in the 2019 State Health Assessment and whether there were any existing data sources that could support the discussion of the emerging issue.

Members came up with the following emerging issues:

- Increase in trauma, behavioral health issues in childhood settings
- Vaccine issue and its relations to non-belief, science, evidence etc.
- The link between Adverse Childhood Experiences (ACEs) and adult chronic diseases
- Child and adolescent mental health
- Silos between medical and mental health
- Lack of emphasis on health issues for the incarcerated
- Barriers to access to care (less of an emerging issue, more of a continuing issue)
- Integration between medical care and dental care
- Access to care and quality of care with respect to communities of color (e.g. history of lack of trust of the health care system among this population)
- Hoarding, which affects 2-5% of the population
- Geriatric/end of life issues
- War on reproductive/sexual rights with respect to the LGBTQ community
- Cost drivers, state financing (How are we using limited resources to address priorities?)

SHIP 2.0 Planning – Next Steps

The State Health Assessment (SHA) will be released for public comment in the fall. Afterwards, we plan to host several community forums. To aid in our efforts to ensure that communities are fully represented at these forums, we plan to reach out to local health departments. We will use the feedback from the forums to create a survey that will be disseminated to partners. During the second quarter of 2020, we will host another convening of partners where we will develop objectives for SHIP 2.0. Then, individual groups will meet to define strategies for those objectives.

Question: How will other state agencies participate in the SHIP? *Answer:* We hope to first get other state agencies to participate as members of the Advisory Council, and then we plan to get them involved with other aspects of the SHIP.

Next Steps/Updates

SHIP Summit: The SHIP Coalition Summit will be held on September 20th at the Chrysalis Center in Hartford from 9:00 am to 2:00 pm. Additional findings from the SHA will be presented at the summit. Furthermore, we plan to



prioritize the framework for the next phase of the SHIP, looking at the social determinants of health and their impact on health outcomes.

Announcements:

- The Fifth Annual Conference on Hoarding will be held on September 6, 2019 at Central CT State University from 9am to 4pm.
- The Fifth Annual iCAN Conference will be held on September 26, 2019 at The Artists Collective in Hartford. It is a consumer driven conference and the Office of Health Strategy will be the opening speaker.
- The Connecticut Oral Health Initiative (COHI) will be hosting two meetings to develop an advocacy agenda for 2020. The meetings will be held on September 23rd and October 14th, 2-4 pm at the Hispanic Health Council. Contact person: Pareesa Charmchi Goodwin, COHI Executive Director, pareesa@ctoralhealth.org



Healthy Connecticut 2020 State Health Improvement Plan Advisory Council Meeting

Tuesday, August 20, 2019

9:30 AM - 11:30 AM

Agenda

| 9:30 | 20 | Welcome and Introductions | Pat Baker, AC Chair |
|-------|----|---|---|
| 9:50 | 5 | DPH Deputy Commissioner's Remarks | Heather Aaron, MPH, LNHA Deputy Commissioner |
| 9:55 | 15 | SHIP Infrastructure | Sandy Gill AC Members |
| 10:10 | 20 | SHIP Policy Agenda Update | DPH AC Members |
| 10:30 | 15 | Partner Engagement | Laurie Ann Wagner |
| 10:45 | 20 | Emerging Issues Discussion | Melissa Touma AC Members |
| 11:05 | 15 | SHIP 2.0 Planning – Next Steps | Sandy Gill AC Members |
| 11:20 | 10 | Next Steps/Updates SHA/SHIP Coalition Summit on September 20th Other Announcements from the Council | Pat Baker, AC Chair DPH |



Welcome and Introductions



Welcome New Members

- Dr. Fred Browne Physician Representative
- Dr. M Natalie Achong, MD, MHL Physician Representative
- Commissioner Beth Bye Office of Early Childhood
- Terry Gerratana CT Office of Health Strategy
- Joseph Cassidy CT Department of Administrative Services
- Lauren Siembab CT Department of Mental Health & Addiction Services



Heather Aaron, MPH, LNHA, Deputy Commissioner

DPH Deputy Commissioner Remarks



Sandy Gill

SHIP Infrastructure



Questions from May SHIP Advisory Council Meeting Force Field Analysis – SHIP Infrastructure

- What are the drivers of success with respect to the infrastructure of the SHIP? What are concrete mechanisms, structures, processes, etc. that have worked well and why?
- What are the barriers to success, or how does the SHIP infrastructure make implementation of the SHIP challenging?
- What would enhance SHIP implementation from an infrastructure perspective?



Assets

- Advisory Council membership is diverse; represents multiple sectors
- Consumer representation on Advisory Council
- Leadership
- Action Team participation
- Coalition
- Website portal to access information
- Data Dashboards
- DPH Support Staff (convener, facilitation, leadership)



Drivers of Success

- Committed Action Team members; diverse organizations; continue to meet
- Collaboration across subcommittees
- Collective legislative impact
- Diverse membership with many opinions
- Extent to which participants are able to pursue agency agenda or personal agenda (What's in it for me)
- DPH support as backbone of SHIP Coalition; dedicated DPH staff; continued support from DPH



Barriers to Success

- Would like other state agencies to play a stronger role collaborative stake in the game
- Too many priorities split focus and impact
- Coalition communication
 - need to evaluate effectiveness;
 - need to provide opportunity for partner feedback;
 - broader coalition not getting information;
 - Need more membership engagement of subject matter expertise in communication of strategic planning
 - Process needs to be more inclusive



Barriers to Success

(continued)

- Need funding for the things we work on; tired of getting job ready and then not having funding to do it justice
- Coalition vs Council need for defining/setting expectations
- Data if we are going to measure improvement, we need a data source and a baseline prior to starting
- Silos



Possibilities to Enhance Implementation

- Leveraging community and family consumers
 - Recruit consumers to participate in action teams
 - Be inclusive of communities experiencing the greatest impact
 - Consider needs based distribution of funding
- Unify and align state agencies
 - Suggested state agencies: DOH, DAS, OEC, OHS, Office on Aging
- Recruit membership at the local level having a stake in the SHIP
 - Other suggestions: State Fire Marshalls, Latino groups
- Invite Healthy Equity Officers from other state agencies to participate



Possibilities to Enhance Implementation

(continued)

- Utilize the ability of philanthropies to engage cross-cutting partners
- Improve website
- Provide webinars
- Create opportunities for focus groups to cross-collaborate
- Utilize the Schools of Public Health in the state to engage students in meaningful work/experience
- Recruit CCM perspective to be represented on Advisory Council
- Re-visit charter and member commitment to the Advisory Council



Possibilities to Enhance Implementation

(continued)

- Re-visit template for Action Team Work plan simplify
- Learn from success of other accredited states what they did well
- Recruit participation of existing data sharing groups
- Map local level data
- Communicate clear theory of change
- Host town halls
- Move from programs to systems change
- Move to health in all policies



SHIP Policy Agenda



2019 Policy Agenda Update

| | Policy Priorities | | | Most recent activity |
|------------|---|--|----------------|---|
| | | | | Green = passed <u>either</u> HOUSE or SENATE |
| | | | | Blue =passed both HOUSE <u>and</u> SENATE |
| | | | | Red= Public Act |
| <u> </u> | | | | Black = bill made it to the calendar |
| | TOBACCO – Reduce the use of tobacco and vaping products | Access | <u>HB 7200</u> | 06-18-2019 – <u>Public Act 19-13;</u> Signed by Governor |
| 1. | | Other | <u>SB 752</u> | 06-05-2019 — Bill Passed HOUSE Temporarily; Senate PASSED as amended |
| 2. | Community Health Worker Certification | | <u>HB 7424</u> | 06-26-2019 – Included in <u>Public Act 19-117;</u> Signed by Governor |
| 3. | Southalt use for all souting positions in automobiles — support the use of | alt use for all section positions in automobiles support the use of seathelts by | | 06-05-2019 – REMOVED SEATBELTS FROM BILL |
| J . | Seatbelt use for all seating positions in automobiles – support the use of seatbelts by rear seated passengers in automobiles | | | 05-10-2019 – Referred to (TRANSPORTATION)-no vote |
| | Motorcycle Helmet Law – support the universal use of adequate head protection for all operators and passengers of motorcycles | | HB 6161 | 05-16-2019 – House PASSED; Senate Calendar #513 |
| 4. | | | | (<21 years of age only) |
| 5. | Paid Family and Medical Leave – support the provision of Paid Family and Medical Leave | | <u>SB1</u> | 06-25-2019 - Public Act 19-25; Signed by Governor |
| 6. | Property Maintenance Code (PMC) – Connecticut adoption of International Property Maintenance Code (IPMC) | | | Proposed bill did not move forward |
| | | | | 06-21-2019 - Public Act 19-38; Signed by Governor |
| | | | | 07-08-2019 – Public Act 19-159; Signed by Governor |
| /. | 7. Opioids – support treatment and prevention efforts | | HB 7159 | 07-09-2019 – Public Act 19-191; Signed by Governor |
| | | | | 07-08-2019 – Public Act 19-169; Signed by Governor |
| 8. | 8. REL (Race, Ethnicity, and Language) Data Collection Standards | | | No identified bills this session |



Proposed Topics for 2020 SHIP Policy Agenda

- *Property Maintenance Code
- Dental Insurance Coverage for 19-26 year olds
- Reducing consumption of Sugar Sweetened Beverages
- *Continue to support policy to reduce access and use of tobacco and vaping products
 - Ban on flavored vaping products
- *Universal Motor Cycle Helmets
- *Seatbelts in all seating position in automobiles
- * on current year SHIP Policy Agenda



Proposed Topics for 2020 SHIP Policy Agenda

(continued)

- Mandate co-locate of naloxone where any AED is available
- Re-visit opioid bills not advanced
- School mandate for HPV vaccine
- Allow pharmacist to be able to provide vaccine to children
- Policy in support of suicide prevention
- *REL (Race, Ethnicity, and Language) Data Collection Standards

* - on current year SHIP Policy Agenda



Laurie Ann Wagner

Partner Engagement



Partner Engagement

- Community Health Priority Survey Results
- Coalition Call
- Local Health Department Call



Community Input to the SHA

- The Community Survey conducted earlier this year was promoted by the SHIP coalition; as a result the survey received 1,388 responses!
- UCONN students solicited participation in the survey from an additional 250 community members visiting DSS Service Centers and FQHCs
- Eleven focus groups were conducted with populations of focus including
- Recently Incarcerated
- Developmentally Disabled
- Alzheimer's PT Caregivers
- Veterans and Families

- Aging Adults
- **◦LGBTQ/Aging Adults**
- African American Women
- LGBTQ/Younger Adults

- Hispanic Community
- Parents of CSHCN
- •Immigrants/Refugees

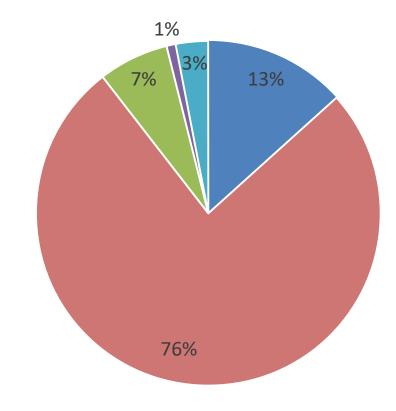


Community Survey Responses (N=924) by Race/Ethnicity

Survey Sample % Distribution



- NH White
- NH Black
- NH Asian
- Other NH respondents



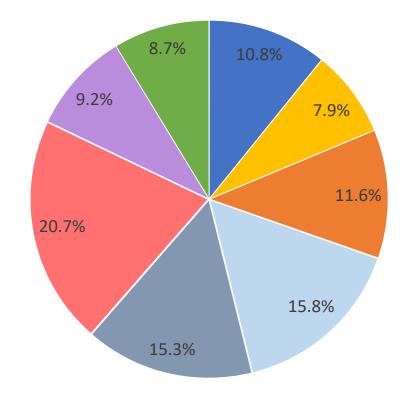
U.S. Census Population Estimates for CT

| Hispanic | 15% |
|-------------|-----|
| NH White | 68% |
| NH Black | 10% |
| NH Asian | 4% |
| Other NH | |
| respondents | 2% |



Percent of Community Survey Responses (N=850) by Income, Connecticut, 2019

- Less than \$25,000
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$150,999
- \$151,000 to \$199,999
- \$200,000 or more



- 2017 Census data:9.6% persons live in poverty
- Median household income was \$73,781



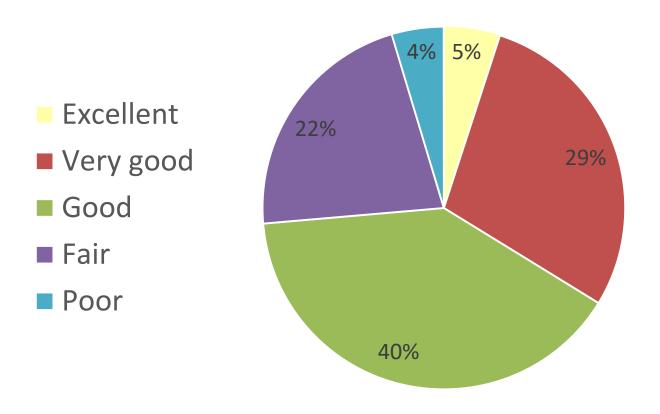
Towns with at Least One Person Participating in the Community Survey and Number of Responses (N=1040) by County, Connecticut, 2019

| | # of CT towns represented | % of all towns | # of responses | % of all responses | |
|-------------------|---------------------------|----------------|----------------|--------------------|--|
| Statewide | 144 | 85% | 1040 | - | |
| Fairfield County | 21 | 91% | 142 | 14% | |
| Hartford County | 27 | 93% | 259 | 25% | |
| Litchfield County | 16 | 62% | 62 | 6% | |
| Middlesex County | 13 | 87% | 118 | 11% | |
| New Haven County | 25 | 93% | 244 | 23% | |
| New London County | 17 | 81% | 107 | 10% | |
| Tolland County | 13 | 100% | 61 | 6% | |
| Windham County | 12 | 80% | 47 | 5% | |

- 18% of CT's population live in its five most populous cities
- 15% of survey responses were from people who live in these five cities



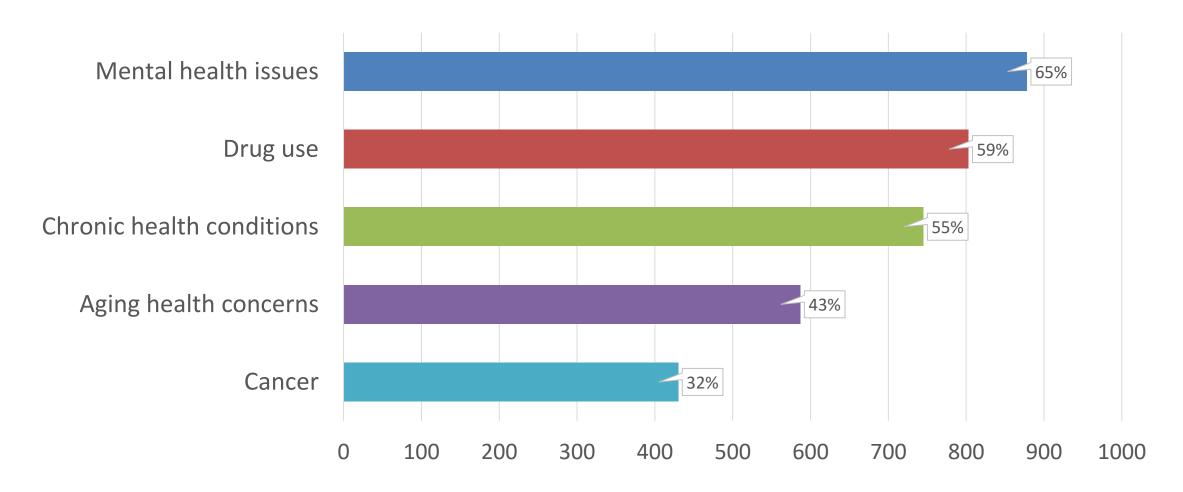
Community Survey: General Perceptions of the Overall Health of the Community in which They Live (N=1377)



Nearly 70% of all survey respondents thought the community in which they live to be "Very Good" or better.



Top Five Health Concerns Reported on the Community Survey (N=1361)





Melissa Touma

Emerging Issues in Public Health



Emerging Issues in Public Health

- What emerging issues should the 2019 State Health Assessment address?
- Are there data sources that could support the discussion of the emerging issue?
- What are the opportunities to address this emerging issues?
- What are the gaps?



Sandy Gill

SHIP 2.0 Planning



Proposed Process

- SHIP Summit
 - Begin to define framework
- SHA Public Comment Period
- Community Forums
 - (8) forums one per county
 - Recruit community resident participation
- Community Survey
 - Based on Summit and Community Forum feedback
 - Reach out to existing networks



Coalition Engagement

Coalition Planning Event

- Learn about the feedback of the previous steps
- Define the objectives of the plan
- Identify data indicators needed to measure progress
- Full day event
- Recruit municipality participation
 - Non-health sector partners
 - Elected officials

Priority Area Convening

- Individual priority area meetings
- Define strategies for respective sections



Review Process

- DPH review
- Priority Area Planning Session/Action Team Participant Review
- SHIP Advisory Council Members and Subject Matter Experts
- Final Revisions

Launch September 2020!



Next Steps/Updates

- SHA/SHIP Coalition Summit on September 20th
- Other Announcements from the Council members



Thank You!



| | SHIP Policy Agendas | 2017 | 2018 | 2019 |
|-----|--|----------|--------------|----------|
| • | TOBACCO – | | | |
| | a. Raise the age to purchase tobacco and electronic nicotine delivery system (ENDS) products from 18 years of age to 21 years of age. i. Public Act 19-13 – Signed by Governor 06-18-2019 – Raises age to purchase tobacco and vaping products to 21 years. b. Tax parity for other tobacco products and Electronic Nicotine Delivery Systems (ENDS) to match the current cigarette tax | √ | √ | √ |
| | i. Public Act 18-109 – Signed by the Governor 06-07-2018 Sale of ENDS treated like other tobacco products – must be kept behind the counter c. (Upgrade Clean Indoor Air Laws to meet national recommendations for comprehensive law. Remove pre-emption clauses that hinder local tobacco control authority. – 2017 & 2018) d. Tobacco Trust Fund Allocations – advocate for appropriate and sustainable Tobacco Trust Fund allocations for education, prevention, and cessation | | | |
| 1. | a. Public Act 17-74 - Signed by Governor 06-30-2017 to define Community Health Worker Bubblic Act 40-447 Signed by Governor 06-30-2010 actablish Community | √ | | √ |
| 2 | b. Public Act 19-117 – Signed by Governor 06-26-2019 establish Community Health Worker Certification | | | |
| 2. | Seatbelt use for all seating positions in automobiles — update current law to include rear seated passengers in automobiles | √ | ✓ | ✓ |
| 3. | Motorcycle Helmet Use by Operators and Passengers –adequate head protection | ✓ | \checkmark | ✓ |
| 4. | Paid Family and Medical Leave – require employers to provide paid Family and Medical Leave a. Public Act 19-25 – Signed by Governor 06-25-2019 Establish Paid Family Medical Leave Fund for eligible employees | √ | √ | √ |
| 5. | Property Maintenance Code (PMC) – Connecticut adoption of 2015 International Property Maintenance Code (IPMC) | ✓ | ✓ | ✓ |
| 6. | Opioids – support evidence based treatment and prevention efforts a. Public Act 19-38 – Signed by Governor 06-21-2019 penalties for the sale of fentanyl b. Public Act 19-159 – Signed by Governor 07-08-2019 mental health and substance use disorder benefits c. Public Act 19-191 – Signed by Governor 07-09-2019 addressing opioid use d. Public Act 19-169 – Signed by Governor 07-08-2019 extends good Samaritan | | √ | √ |
| 7. | protections when Narcan stored in cabinet with AED REL (Race, Ethnicity, and Language) Data Collection Standards — improve standardization of demographic data collection | | | ✓ |
| 8. | Cancer Prevention: Human Papilloma Virus (HPV) Vaccine a. Public Act 17-2 – Signed by Governor 10-31-2017 – included funding for education and Universal HPV vaccine (two-dose series) for children ages 11 and 12. | ✓ | | |
| 9. | Safe Drinking Water a. Public Act 18-168 – Signed by Governor 06-13-2018 - requires public drinking water systems to review the age and condition of the water system's infrastructure | | √ | |
| 10. | <i>Immunizations</i> – allow the release of aggregate immunization data for each school in Connecticut | | ✓ | |
| 11. | Lead Paint Assessment Fee – create sustainable funding source to fund lead paint abatement projects for low income family housing. | | √ | |

| SHIP Policy Agendas | 2017 | 2018 | 2019 |
|---|----------|----------|------|
| a. Public Act 18-160 – Signed by Governor 06-13-2018 - surcharge added to certain insurance policies and establishing the Healthy Homes Fund – 15% of surcharge funds collected to be used for lead abatement | | | |
| Medicare Shared Savings Program & Medicaid Eligibility/Cuts – restore funding cuts that affect income and access to health care for 113,000 Connecticut residents. a. Funds Restored end of 2018 session | | √ | |
| 13. Funding for public health agencies — advocate for funding for state and local public health agencies to support prevention and health improvement. | | ✓ | |
| 14. <i>Integration of Local Health Districts</i> – integration into larger health districts to improve health equity for all Connecticut residents and to better facilitate leveraging of resources. | √ | | |