



## Healthy Connecticut 2020 The Connecticut State Health Improvement Plan

### Agenda

**Focus Area: Mental Health, Alcohol and Substance Abuse**

**Meeting 2: Finalize Areas of Concentration & Develop Draft Goal Statement**

**Date: May 31, 2013**

**Time: 9:00 a.m. – 12:00 p.m.**

**Location: Saint Francis Center for Health Equity, 140 Woodland Street,  
Hartford, CT**

Time	Agenda Item	<i>min.</i>	Notes
9:00 a.m. – 9:15 a.m.	<b>Activity 1: Opening the Session</b> <ul style="list-style-type: none"> <li>• Welcome and introductions</li> <li>• Review agenda, schedule and logistics</li> <li>• Review last meeting's outcomes</li> <li>• Review today's objectives</li> </ul>	15	
9:15 a.m. – 10:15 a.m.	<b>Activity 2: Finalize Areas of Concentration</b> <ul style="list-style-type: none"> <li>• Review additional data</li> <li>• Rate each area against selection criteria</li> </ul>	60	
10:15 a.m. – 10:25 a.m.	<b>BREAK</b>	10	
10:25 a.m. – 11:10 a.m.	<b>Activity 3: Goal Setting</b> <ul style="list-style-type: none"> <li>• Develop a DRAFT goal statement for the focus area</li> <li>• Review goal definition and handout</li> <li>• Individual write and group dialogue</li> <li>• Statement and feedback</li> <li>• Finalize goal statement</li> </ul>	45	
11:10 a.m. – 11:55 a.m.	<b>Activity 4: Developing Draft Objectives</b> <ul style="list-style-type: none"> <li>• Develop DRAFT objectives (at least one per area) for the next 5 years.</li> <li>• Review definition/example of objectives and handout</li> </ul>	45	
11:55 a.m. – 12:00 p.m.	<b>Activity 5: Work Group Housekeeping</b> <ul style="list-style-type: none"> <li>• Evaluate the meeting</li> <li>• Review next steps</li> <li>• Confirm next meeting date/time</li> </ul>	5	

## Meeting Notes

### Activity 1: Opening the Session

- Marcus started meeting with introductions; Barbara Geller (other co-chair) joined us on the conference call line
- Amanda gave a review of the outcomes from the last meeting and objectives for today's meeting
- Joan gave a brief history of the plan; why. Plan for the public health system in CT, not a plan for the CT DPH. Purpose is not to recreate, but to address predominant public health issues. Systems approach; not individual or clinical.
- Steve – this is our equivalent of a Health People 2020 plan for CT that will include health delivery systems and

### Activity 2: Finalize Areas of Concentration

- Look at 7 areas of concentration; revisit whether there is data available and review selection criteria:
  - Relevance
  - Appropriateness
  - Impact: what will we get out of it?
  - Building on current work
  - Feasibility; can we do it?
- Two areas where there is question on available data:
  - Autism Spectrum Disorders:
    - Topic has bounced between this group and MICH
      - Assuring developmental screening has been included as an objective for MICH
    - National data, but question about State data in terms of prevalence or data that suggests this needs to be a priority
    - Screening generically
    - Amanda will check with HRiA on State-specific data
    - Step one could be the collection of data
  - Exposure to Trauma:
    - There are tools, but not state-wide data
    - Issue looked at when someone is treated for MHSA
    - May not be an area of concentration on its own, but may be more of a treatment issue or strategy we can look at when we talk about contributing factor
    - Trauma exposure may modify the type of treatment someone would get
    - Early intervention for trauma victims
    - SAMSHA definition of trauma and care – how can we break that out? Not as organic as the other areas; more of a tactical approach
- Cross-cutting themes/ Informed care: (Identification of appropriate strategies and programs)
  - Trauma
  - Recovery
  - Sustainability
  - Cultural Competence
  - Availability/use of screening
- Rating/Ranking is relevant in terms of order of implementation; not what is necessarily more important.
  - Compared to selection criteria
  - Areas of Concentration:
    - Mental Health and Mental Disorders
    - Dementias, including Alzheimer's Disease
    - Alcohol Abuse

- Substance Abuse
- Autism Spectrum Disorders
- Suicide/Self Harm

Slide 87: Dementia /Alzheimer's

- Increasing population
- There are some interventions that have success in terms of reducing severity of incidence and potential long term care needs
- Systems of care

**Activity 3: Goal Setting**

- Ideas/thoughts:
  - Issues of legality pertaining to alcohol and prescription drugs
  - Read HP2020 goals for SA and MH
  - Recovery
  - Prevention
  - Access
  - Screening
  - Early Intervention
  - Treatment (access)
  - Behavioral health includes addiction
  - Mental and emotional well-being
  - Primary Care and link to behavioral health (overall health); lots of data
- Draft Goals:
  1. Improve overall health through prevention and early intervention by assuring access to quality behavioral health (mental health and addiction) services.
  2. Improve overall health through screening, early intervention, and access to quality behavioral health (mental health/addiction) services.

Like: overall health  
Change: Mental health and substance abuse to overall health or mental and emotional well-being  
 Substance abuse means addiction  
Add: screening, integrated primary care and behavioral health
- Final Goal:
  - **Improve overall health through access to quality behavioral health services that include screening, early intervention, prevention and treatment.**

**Activity 4: Developing Draft Objectives**

- Review definition/example of objectives and handout
- Healthy People 2020 Mental Health Objectives

Area of Concentration:

1. Mental health and Mental Disorders (serious psychological distress, major depressive episodes)

Objective:

1. Increase depression screening by primary care providers from x to x. For adults over 18 and for youth 12-17 yrs. of age.
  - Establish a baseline for depression screening by primary care providers.
  - Marcus will connect with Brenda Shipley – connect with to characterization of all-payer data base in reference to this objective.
  - Identify depression screening tools that can be easily used
  - Survey primary care providers to establish a baseline
2. Increase the proportion of reciprocal referrals between mental health and primary care providers.

- Primary care facilities are required to have this service

3. Increase the proportion of homeless individuals with mental health problems who receive mental health services.
  - housing

### Activity 5: Work Group Housekeeping

- Next meeting 6/10 12-3
- Doodle meeting for one more meeting between 6/10 & 6/30
- Need someone with expertise in Alzheimer's; Barbara will reach out to someone; Joan will check with DPH
- Homework: written objectives that address areas of concentration already, please share
- Homework: evidence-based strategies that already exist that will address objectives?

Attended Meeting								
5/13/13	5/31/13				Last Name	First Name	Organization	Email
X	X				Ascheim	Joan	DPH	<a href="mailto:Joan.ascheim@ct.gov">Joan.ascheim@ct.gov</a>
X	X				Fraser	Nadine	CT Hospital Assoc.	<a href="mailto:fraser@chime.org">fraser@chime.org</a>
	X				Merz	Steve	Yale-New Haven Hospital	<a href="mailto:Stephen.Merz@ynhh.org">Stephen.Merz@ynhh.org</a>
X	X				Minervino	Alice	DMHAS	<a href="mailto:Alice.minervino@ct.gov">Alice.minervino@ct.gov</a>
	X				Ohrenberger	Karen		<a href="mailto:Karen.ohrenberger@ct.gov">Karen.ohrenberger@ct.gov</a>
	X				Seagull	Michelle	CT Dpt. Consumer Protection	<a href="mailto:Michelle.seagull@ct.gov">Michelle.seagull@ct.gov</a>
	X				Storey	Janet	DMHAS	<a href="mailto:Janet.storey@ct.gov">Janet.storey@ct.gov</a>
					Co-Chairs		Organization	Email
X	X				McKinney	Marcus	St. Francis Hospital Center for Health Equity	<a href="mailto:MMcKinne@stfranciscare.org">MMcKinne@stfranciscare.org</a>
X	X				Geller	Barbara	CT Dept. of Mental Health and Addiction Services	<a href="mailto:Barbara.geller@po.state.ct.us">Barbara.geller@po.state.ct.us</a>
					HRiA Support		Organization	Email
X	X				Ayers	Amanda	HRiA	<a href="mailto:aayers@hria.org">aayers@hria.org</a>