



CONNECTICUT
HEALTH IMPROVEMENT COALITION
Partners Integrating Efforts and Improving Population Health

State Health Improvement Planning
Maternal and Child Health Coalition

October 18, 2018
 CT Women’s Consortium
 2321 Whitney Avenue, Hamden
 9:00 am– 11:00 am

Meeting Summary

Attendees: Melissa Touma, Kristin Sullivan, Jennifer Morin, Selma Alves, Christine Velasquez, Galit Sharma, Jordana Frost, Kristin Duffy, Gina Burrows, Faith Vos Winkel, Leigh-Lynn Vitukinas, Sandy Gill, Mary Moran Boudreau, Shelly Nolan, Toni Leers, Carole Greenberg, Linda Franciscovich, Pat Cronin, Erica Garcia, Pareesa Charmichi Goodwin, Cameron Bell, Daileann Hemmings, Esther Santana, Carmen Ortiz, Martie Boyer, Ricka Wolman, Deborah Buxton Morris, Salina Hargrove, Marijane Carey, Kareena DuPlessis

Agenda Item	Discussion	ACTION Items and person responsible
1. Welcome and Introductions	<ul style="list-style-type: none"> Marijane Carey opened the meeting. Due to time limitations, introductions around the room were not made. 	
2. Announcements and Information Sharing	<ul style="list-style-type: none"> The Connecticut Public Health Association annual conference is on November 8 in Rocky Hill. The theme for the conference is “Epidemics.” 	Marijane Carey will email attendance.
3. Update on the State Health Improvement Plan: SHIP2.0	<ul style="list-style-type: none"> Kristin Sullivan discussed the update on the State Health Improvement Plan and the State Health Assessment. These are required to be updated every 5 years. The Department of Public Health is engaging partners to determine if we are making a difference. DPH has an almost final list of indicators. The scopes are more narrow and focused. There are now 130 indicators, down from over 200. DPH will start collecting data, get feedback from consumers and partners, and do asset mapping. The goal is to be done with the SHA by September 30, 2019. The number of priorities on the SHIP will be decreased. There was great response from the Coalition on the survey, selecting the top 5 most impactful social determinants of health - Poverty, Health literacy, Access to primary care, Access to healthy foods, and Adverse Childhood Experiences (ACEs). Results will be shared with Advisory council next week. Results are preliminary and not weighted. 	





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<p>4. Introduction to the film – Resilience: The Biology of Stress and the Science of Hope</p>	<ul style="list-style-type: none"> • This is a powerful film that makes toxic stress easier to understand. It allows for new thinking and ways to address it. The most consistent comment after someone has seen it the first time is that people need to see it again. • We want children to grow safe, secure and confident. We are not there yet. We live and work in a country facing increasing individual trauma and societal stress. Toxic stress can trigger hormones that effect body and mind and put individuals at greater risk for disease (mental and physical), homelessness, incarceration, early death. • Normal stress is part of everyday life. Tolerable stress is time limited and buffered by a caring adult. Toxic stress happens when there is strong, frequent, prolong adversity that is unaddressed. 	<p>Marijane Carey will send the powerpoint and contact information</p>
<p>5. Follow up discussion</p>	<ul style="list-style-type: none"> • The statistics are staggering. • The legislatures need to be informed. • There is a lack of knowledge in peditricians and other providers working directly with families. There needs to be significant training on ACEs and ongoing support for those using this tool and other tools in conjunction. • Connecticut has a lot of resources, but not enough money is allocated to prevention. • There is a need to bring in other partners to address ACEs and toxic stress, such as the business community. • Addressing this can help stop the school to prison pipeline. • SIM has included ACEs as a priority are for children • The website is resiliencemovie.com 	
<p>6. Review and wrap up</p>	<p>December 4, 2018 Connecticut Women’s Consortium</p>	

