



Healthy Connecticut 2020
State Health Improvement Plan

Health Systems ACTION Team Meeting AGENDA & NOTES

Date: November 23, 2015

Time: 2:00-4:00 pm

Location or Conference Call Number: Universal Health Care Foundation

Attendees (Please list all who participated): Anne Fountain, Stamford Health and Social Services Department (Co-Chair); Lisa Pellegrini, CT Conference of Municipalities, Stephanie Paulmeno, CT Nurses Association and CT Commission on Health Equity, Heather Cappabianca, CT Office of Rural Health, Carolyn Wysocki, CABOH, Pat Checko, Public Health Consultant; Lynne Ide, Universal Health Foundation, Kathy Yacavone, Southwest Community Health Center, Pat Baker, CT Health Foundation, Kathi Traugh, CT Public Health Association/Yale PH Training Center, Tracy Wodatch, CT Association of Healthcare at Home, Antonio Diaz-Carrera, Community Health Center Association of CT, Kristin Sullivan, CT DPH, Donna Burke, HRiA.

Meeting Goal: To identify and discuss data available that support objectives under Health Systems in order to assist with completing Step 1 in developing the Action Agenda.

Agenda Items	Time	Discussion	ACTION Items and person responsible
Welcome and Introductions	15	Participants on the phone and around the table introduced themselves	Co-Lead Conveners
Building Action Plan – identification of strategies and action steps (HS-13/11/8 – Quality and Performance of clinical and public health entities; and HS-13 - Clinical and Public Health Workforce)	90	The group discussed issues related to addressing clinical and public health workforce issues, accreditation of PCMH’s that include dental and public health agencies, and CLAS standards adoption by health and social service agencies. These areas are critical to quality of health services and foundational to advancing overall population health. See attached action plan drafts.	All
Next Steps	15	HRiA will write up information from the meeting into an Action Plan. Co-chairs will distribute the group for review and comment. Co-Chairs will present status at Next Advisory Council meeting in Dec.	Co-Lead Conveners

Focus Area 7: Health Systems			
Goal 7: Align efforts of health systems stakeholders to achieve sustainable, equitable, and optimal population health.			
Area of Concentration: Access to Health Services/Infrastructure			
SHIP Objective Combined HS-3, HS-8, and HS-11			
NEW Objective HS-3 (Developmental)			
Increase the quality and performance of clinical and public health entities as measured by:			
<ul style="list-style-type: none"> • Number of accredited PCMH that include dental • Number of Connecticut Health and social service agencies that have adopted CLAS • The number of voluntarily accredited public health departments 			
Dashboard Indicators:			
<ul style="list-style-type: none"> • Number of accredited PCMH that include dental • Number of Connecticut Health and social service agencies that have taken steps to implement CLAS in health and health care • Percentage of governmental public health jurisdictions that meet National Public Health Accreditation Board standards. 			
Strategies	Actions and Timeframes	Partners Responsible	Progress
1. Provide financial incentives to health jurisdictions for accreditation and to those who are accredited.	<ul style="list-style-type: none"> a. Identify funding sources and incentives b. Consider increase in per capita for those health departments/districts achieving accreditation. c. Communicate financial sources available d. Seek to increase funding available including but not limited to, ensuring grant funds can be used for accreditation activities. e. Ask health jurisdictions for input on what incentives would be most effective f. Provide education to raise awareness of accreditation and promote benefits (e.g., training already available, no cost webinars) 	<p>Leads: DPH, Yale PHTC, CT Association of Local Boards of Health (CALBOH); CADH</p>	
2. Align Community Health Improvement Plans with goals and strategies in Healthy Connecticut 2020.	<ul style="list-style-type: none"> a. Build a web-based central repository of existing CHIPS. b. Develop a crosswalk template/tool to make HCT2020 easy to understand and check off areas of alignment with local CHIPS. c. Distribute template to all depts/districts developing CHIPS from 2015 on. d. Determine baseline number of Health departments / districts working collaboratively with hospitals and health systems through health improvement coalitions e. Establish the number of 2016 CHIPS that align as a baseline 	<p>Leads: DPH, CHA (ask), CADH (ask)</p> <p>Web repository: DPH or CADH (ask)</p> <p>Tool: S. Paulmeno (Global Public Health Consultants, Inc.)</p> <p>Baseline: A. Mueller, DPH, CHA</p>	

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3. Establish a listing/registry of practices that are Patient-Centered Medical Home (PCMH) accredited.	<ul style="list-style-type: none"> a. Determine where the listing/registry will be housed/maintained. b. Determine where data on PCMH accredited practices can be found. c. Gather data from identified sources 	SIM (ask) Pat Checko	
4. Support establishment of training for health and social service providers	<ul style="list-style-type: none"> a. Create standard, web-based training b. Make available to and track training to DPH and contractors 	Leads: DPH with partners (e.g, Commission on Health Equity, Multicultural Health Partnership)	
5. Establish inclusion criteria and baseline. (CLAS)	<ul style="list-style-type: none"> a. Begin with small sample such as local and state agencies. <p>Year 2:</p> <ul style="list-style-type: none"> b. Develop criteria for what to count c. Assess who is currently using CLAS and how they are implementing CLAS d. Identify how to collect baseline data e. Ensure that all state contracts require CLAS 	<p>Leads: DPH, MCHP, Multicultural Health Partnership Commission on Health Equity</p> <p>(S.Paulmeno can assist with CLAS)</p>	
Resources Required (human, partnerships, financial, infrastructure or other)			
<ul style="list-style-type: none"> • Partnerships; human resources of lead person/agency; 			
Monitoring/Evaluation Approaches			
<ul style="list-style-type: none"> • Provide quarterly report outs 			

Focus Area 7: Health Systems			
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Area of Concentration: Public Health Infrastructure			
SHIP Objective HS-13 NEW (DEVELOPMENTAL) COMBINED HS-13 AND HS-14			
Increase the capacity of the current clinical and public health workforce (e.g., number, skills, diversity, geography) as measured by:			
<ul style="list-style-type: none"> • The total number of those employed in workforce categories • Graduation rates of those with public health related or clinical degrees • Racial/ethnic demographics of the workforce • The number of continuing professional development certificate/CEU's for those in established public health and clinical careers. • The number of clinical and public health workforce employees by geographic area. 			
Dashboard Indicator:			
<ul style="list-style-type: none"> • Identify and reduce professional health workforce shortages • Increase the diversity of the health workforce 			
Strategies	Actions and Timeframes	Partners Responsible	Progress
1. Monitor health and health care workforce data	<ul style="list-style-type: none"> a. Identify the resources needed for state level leadership to assess and plan for a workforce capacity development. b. Look at existing groups (e.g., Allied Health Workforce Policy Board and their data sources (assessment) c. Determine which state agencies have data on public health and clinical workforce. d. Gather data from identified sources 	No Lead Identified Yet	
	Year 2: <ul style="list-style-type: none"> • Analyze data (advocate for resource or look into graduate students/universities). • Have meeting with university and hospital HR heads to identify the shortages and why there are shortages 	Support/Implement: DPH/DOL MPH Students Reach out to CT Data Collaborative: S. Paulmeno DPH (public health workforce)	
Resources Required (human, partnerships, financial, infrastructure or other)			
<ul style="list-style-type: none"> • Partnerships and human resources needed for this objective and strategy 			
Monitoring/Evaluation Approaches			
<ul style="list-style-type: none"> • Provide quarterly report outs 			