



State Health Improvement Planning
Health Systems Action Team Meeting

February 1, 2017
 Universal Healthcare Foundation
 290 Pratt Street, Meriden
 2:00pm – 4:00pm

Meeting Summary

Meeting Purpose: Discuss 2017 Health Systems Action Agenda and progress.

Attendees: Mario Garcia, DPH; Lisa Pellegrini, CCM, Carolyn Wysocki, ECHO/CALBOH; Lynne Ide, Universal Health Foundation; Augusta Mueller, Yale New Haven Health; Mark Abrahams, DataHaven; Kristin Sullivan, DPH, Sandy Gill, DPH, Rose Swensen, HRiA, Cmr. Pino, DPH.

Agenda Item	Discussion
1. Review of Meeting Purpose and Today's Charge	Co-Chairs and Rose Swensen provided an overview of today's meeting.
2. Integration of Local Health Departments	<p>L. Pellegrini and other members suggested a discussion on the DPH proposal for integration of LHDs. Members discussed key provisions with Cmr Pino including:</p> <ul style="list-style-type: none"> • Funding: Per capita payment tied to a community health needs assessment and plan that identifies health priorities in the region. • How integration would affect accreditation status of the 3 LHDs accredited or those that have an application in progress. • Board of health membership • Several task forces in the past to study and make recommendations about integration. Need to move to solutions/implementation vs. more study or task forces • Proposal will continue to be adjusted based on feedback and discussion with partners and other groups.
3. Discuss 2017 HS Action Agenda <ul style="list-style-type: none"> • Progress with existing objectives/strategies • What do we want to accomplish in 2017? • Identify new linkages and/or leads as needed 	<ul style="list-style-type: none"> • PCMH: mapping is being conducted via SIM/Pop health planning. DSS is the natural lead on this and the committee role is to ensure that • CLAS standards – The natural lead for this activity is the DPH Office of Health Equity. Changes in status include 2 staff retirements with refills in progress, and office relocation from Community and Family Health Section to Public Health Systems Improvement/Cmr's Office to reflect the cross cutting nature of health equity. DPH



CONNECTICUT HEALTH IMPROVEMENT COALITION

Partners Integrating Efforts and Improving Population Health

opportunities to address CLAS with CBOs/ACOs engaging in PSC demonstration model development. No progress incorporating CLAS into all state agency contracts.

- Transportation/Access – Shared Yale students initial draft research on how transportation impacts access to care and other state initiatives. Mario will invite Carl Amento, South Central Council of Governments to the next meeting to talk about his innovative transportation initiative. Suggestions made for students to call Generations in Eastern CT who has done a survey on clients related to transportation/access. It was also mentioned that hospital systems conducting patient satisfaction surveys are noticing when Medicaid patients experience challenges with the transportation contractor, they tend to rate their overall visit satisfaction lower.
- PCMH – DPH provided maps on level of participation of providers in PCMH program prepared for Population Health Council to facilitate discussion on Prevention Service Centers and model development, and specifically locations for model demonstration. DSS is advancing PCMH+ with a second round of selections later this year. HS Action Team role is to ensure CLAS and dental included. Opportunities exist for DPH to collaborate with DSS on the next round of PCMH+ initiative as it relates to PSC model development.
- Workforce: No update was available about the ability to conduct broader workforce initiatives. Absent this, the group identified that a leverage/focus could be community health worker initiative with the natural lead SIM/AHEC. The HS Action Team’s potential role was discussed and included collaborating and ensuring policy initiatives were accomplished.
- Regional CHAs/CHIP alignment – DPH provided analysis from the 2016 LH Annual survey related to LHD accreditation status and development of pre-requisites (CHA, CHIP, and Strategic Plan). Suggestion to look closer at data on LHDs completing a CHA/CHIP and those that are collaborating on a CHA/CHIP with a hospital. LHDs may have answered no to question about their organization completing a CHA/CHIP even if they participated in and was a partner in a regional assessment with a hospital. Also, LHD’s who INTEND to do a CHA-CHIP might respond “no” because they have not pushed the PHAB accreditation button yet (and/or there is a time lag). Additionally, there was some discussion about how this strategy would be impacted given the proposed consolidation/regionalization. Assessment and planning are essential to effectively move forward public health strategies. By moving forward with assessment and



CONNECTICUT HEALTH IMPROVEMENT COALITION

Partners Integrating Efforts and Improving Population Health

	<p>planning, LHDs would be well positioned for whatever changes may happen at the state or federal level in the coming years, however, it is not inexpensive.</p> <ul style="list-style-type: none">• Accreditation –Formal decision about DPH’s accreditation status expected March 14. 14 LHDs receiving federal block grant funds to assist with accreditation application development. Data noted above from the annual report was reviewed noting that two full time health departments and four health districts currently seeking accreditation.
4. Next Steps/Next Meeting Date/Adjourn	Quarterly meetings for the year will be scheduled and announced.