



## Healthy Connecticut 2020 State Health Improvement Plan

### Chronic Disease ACTION Team Meeting AGENDA & NOTES

**Date:** 03-12-2019

**Time:** 9:00am – 11:00am

**Location:** CT Hospital Association, 110 Barnes Rd, Wallingford, CT

Agenda Items	Discussion
<b>Welcome &amp; Introductions</b> <i>Liz &amp; Mehul</i>	<i>Liz Beaudin, Mehul Dalal, Charles Brown, Donna Heins, Lynn Faria, Pareesa Charmchi-Goodwin, Jonathan Lillpopp, Sally Mancini, Meg Grant, Orlando Velazco, Chantelle Archer, Sandy Gill</i>
<b>What to Expect in 2019</b> <i>Sandy</i>	We are currently updating the State Health Assessment (SHA) and are midway through conducting the Key Informant Interviews. In June there will be a SHIP Coalition Summit where preliminary findings from the SHA will be shared. These findings will assist in establishing priorities for the next version of the State Health Improvement Plan (SHIP).
<b>Sub-Committee Updates</b> <i>Sub-Committee Chairs</i>	<ul style="list-style-type: none"> <li>• <i>Tobacco</i> <ul style="list-style-type: none"> <li>○ SHIP Objective CD-29 was revised to be inclusive of all tobacco forms. SHIP Objective CD-30 was revised to only track grades 9 through 12. It previously tracked grades 6-8 as well.</li> <li>○ There has been a lot of momentum around the proposed Tobacco 21 bill. It has received support from the Connecticut Oral Health Initiative (COHI).</li> <li>○ COHI also supports bills related to taxing flavored and vaping products.</li> <li>○ Proposed bills related to vaping products have also been introduced.</li> </ul> </li>   <li>• <i>Asthma</i> <ul style="list-style-type: none"> <li>○ <i>This objective does not currently have a subcommittee working on strategies; however, DPH and CHA both have statewide strategies moving forward.</i> <ul style="list-style-type: none"> <li>▪ SIM Prevention Services Initiative is testing a model of asthma home visits. Two health departments in Milford and Stratford are partnering with healthcare systems and both have received technical assistance to set up contractual agreements to have services paid for without having to rely on grant dollars.</li> </ul> </li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>▪ Green and Healthy Homes Initiative has awarded a technical assistance grant to address asthma in Middlesex. The statewide initiative is currently working on a Medicaid data analysis to calculate the return on investment in addressing asthma and home fall prevention. The initiative is also working on raising funds for pilot design and implementation.</li> <li>▪ Office of Early Childhood just received a Pre-School Development Grant to address asthma in pre-schools</li> </ul> <ul style="list-style-type: none"> <li>• <i>Oral Health</i> <ul style="list-style-type: none"> <li>○ The Connecticut Dental Health Partnership (CTDHP) has advocated for more school-based health centers for dental services. Cost has been a barrier s include covering salaries and the required equipment. COHI had applied for a grant to help pay for equipment.</li> <li>○ CTDHP has been working with the Bridgeport Access to Care Coalition to increase the number of people who have a medical home.</li> <li>○ DPH received a grant from the CDC to fund six school-based health centers. Proposal also includes standardization of data collection.</li> <li>○ No proposed cuts to Medicaid in Governors proposed budget bill; however there has been a 2% reduction in reimbursement rates for children’s dental</li> <li>○ COHI supports sugary drink tax</li> </ul> </li> <li>• <i>Healthy Lifestyles (Obesity)</i> <ul style="list-style-type: none"> <li>○ Subcommittee now includes multi-sector collaboration between the Dept. of Education, Food Share, local health directors, SNAP-Ed, and UCONN.</li> <li>○ The healthy food donation list will continue to be made available but tracking the list has been problematic. For example, it has been distributed outside of Connecticut to states such as Indiana.</li> <li>○ Physical activity guidelines have expanded to include younger children and seniors.</li> <li>○ The subcommittee would like to raise the awareness of breastfeeding as a way to prevent obesity.</li> <li>○ NEXT STEPS: for the subcommittee includes focusing attention on communication needs to ask other groups to distribute information (i.e. United Way, Parks &amp; Recreations, Chambers of Commerce, Bike Walk CT, Community Action Groups, hospital systems, faith-based communities etc.)</li> <li>○ Subcommittee is also looking at Food Procurement policies</li> </ul> </li> </ul>
<p><b>Communication &amp; Cross Collaboration</b> Lynn</p>	<p><i>Group Discussion</i></p> <ul style="list-style-type: none"> <li>• The team highlighted the importance of consistent message among groups since there are so many layers to an initiative and many partners are working on similar activities. Develop consistent messaging that all members could adopt – for example counteracting food industry messaging related to sugary drinks</li> <li>• When we push forward issues in an ala cart way it limits having impact on any of it; if we all unify behind a limited number of topics, we could have a greater impact across the state and reach further into our communities</li> </ul>

	<ul style="list-style-type: none"> <li>• Would like to see DPH set a stronger communications plan and utilize the resources that they have to push information out <ul style="list-style-type: none"> <li>○ One suggestion would be to include communication as a topic of discussion on the monthly local health department calls.</li> <li>○ There needs to be strong communication/leadership about where the state is going with health improvement.</li> <li>○ Need to be able to say this is where we stand as a state on specific health issues and have everyone get behind it – spread the word more efficiently and effectively</li> <li>○ Members advocated for the use of social media and ads.</li> </ul> </li> <li>• Ad Hoc committee needs to be inclusive across SHIP – not just two action teams. <ul style="list-style-type: none"> <li>○ Develop a joint communication strategy - Criteria needs to be developed for sharing information between the Action Teams; what gets shared with whom.</li> <li>○ There needs to be broader education opportunities shared with the coalition. For example: If there is a lack of understanding on how social determinants of health impact health outcomes, coordinate webinar with subject matter experts</li> <li>○ Find ways to regularly share data that is relevant to multiple communities, such as share data maps developed by Data Haven related to food insecurity and obesity rates by town</li> <li>○ Coordinated strategy would allow more effective advocacy and awareness</li> </ul> </li> </ul>
<p><b>2019 SHIP Chronic Disease Action Agenda</b></p>	<p><i>How will we focus our efforts in 2019?</i>  <i>Are there any strategies that should be removed?</i></p> <ul style="list-style-type: none"> <li>• It was proposed that the Clean Indoor Air strategy be removed from the Action Agenda for this year.</li> <li>• Rudd Center would like to see more attention on sugar sweetened beverages <ul style="list-style-type: none"> <li>○ Currently included in Governors proposed budget as a sales tax; effective strategy in other states has included raising the shelf price as an excise tax ( see Rudd Center website for tax revenue generator based on excise tax policy)</li> <li>○ Other states have seen revenues below projections; however, they are seeing reduction in consumption which was the ultimate the tax</li> <li>○ Also a concern about new products on the market in the name of better health which are not healthy</li> </ul> </li> </ul>
<p><b>Next Steps</b></p>	<ul style="list-style-type: none"> <li>• <i>2019 Chronic Disease Action Team Meeting Dates</i> <ul style="list-style-type: none"> <li>○ <i>May 7<sup>th</sup>, 2019 10am-11am Conference call</i></li> </ul> </li> </ul>