



CONNECTICUT
HEALTH IMPROVEMENT COALITION
Partners Integrating Efforts and Improving Population Health

State Health Improvement Planning
Maternal and Child Health Coalition

January 7, 2020
 CT Women’s Consortium
 2321 Whitney Avenue, Hamden
 9:00 am– 11:00 am

Meeting Summary

Attendees: Jennifer Morin, Kate Quigley, Jeanette Baker, Marc Camardo, Marty Milkovic, Christine Velasquez, Bethanne Vergean, Selma Alves, Kareena DuPlessis, Ann Gionet, Jessica Johnson, Daileann Hemmings, Colette Anderson, Shannon Bazelais, Doreen Picagli, Annie Stackton Sabrowski, Ashley Star Frechette, Judith Decine, Connie Heye, Jordana Frost, Melanie Vitelli, Leigh-Lynn Vitukinas, Marijane Carey

Agenda Item	Discussion	Action Items & person responsible
1. Welcome & introductions	<ul style="list-style-type: none"> Marijane Carey opened the meeting. Introductions were made around the room. 	
2. MCH Block Grant update	<p>Marc Camardo provided an update on the Department of Public Health’s MCH Block Grant</p> <ul style="list-style-type: none"> Connecticut receives \$4.6 million from the HRSA to address health services needs for mothers, infant and children, including CYSHCN and their families Application Process: Year 1 – 2020 Application year <ul style="list-style-type: none"> Conduct Statewide Needs Assessment (every 5 years) Identify MCH priorities, MCH Needs Assessment Reports, 5 year Action plan Needs Assessment – utilize existing data in the State Health Assessment (SHA), identify addition data needed, incorporate feedback from MCH Coalition and other sources MCH Data Overview from the SHA – Preconception and Pregnancy Next Steps – Develop Needs Assessment Report, Facilitate a prioritization process to identify priorities (March MCH Coalition meeting), Facilitate Planning session to develop 5 year action plan and summary table for grant application 	





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<p>3. CT Coalition Against Domestic Violence</p>	<p>Ashley Starr Frechette & Annie Stockton Sabrowski- Connecticut Coalition Against Domestic Violence (CCADV)</p> <p>Ashley Starr Frechette – Director of Health Professional Outreach</p> <ul style="list-style-type: none"> • CCADV consolidated all hotlines to one statewide hotline through Safe Connect. Can email, call, text www.ctsafeconnect.org • Program is free, confidential, not attached to DCF, law enforcement, or Immigration • Services: Counseling, Support Groups, Emergency shelter/safe house, Court advocacy, Safety planning, Lethality Assessment, Information & referrals, Education & trainings, 24/7 Advocates & Live Chat • CT is now a dominant aggressor state instead of a dual arrest state • CT19 Numbers – 37,773 victims; 33,711 calls received on hotline; 1 in 4 women have experienced severe physical violence by an intimate partner at some point in their life; 1 in 7 men • CT averaged 13 Intimate partner homicides every year for the past 10 years; • Intimate Partner Violence (IPV) Advocate: Answer questions, provide office resources, serve as expert on IPV • IPV can impact an individual’s health and even has health consequences for children who witness abuse <p>Annie Stockton Sabrowski - Director of Housing Advocacy</p> <ul style="list-style-type: none"> • Rapid Rehousing – a person does not have to be in a shelter first to be eligible for this new program. There are 45 families currently enrolled since Oct 1. The goal is to have 81 families in this program. • Some people cannot be in a shelter due to disability, need, or illness. • New funding stream. This is in the pilot stage. • Referral must come from one of the 18 CCADV member sites; must be a family – adults 18 and over with minor children; • Program pays for security deposit and first month’s rent; each month it slowly decreases assistance to the family. • There are no income guidelines to be accepted into this program. • Relationship with DCF – works to help DCF use CCADV as a resource early on; want referrals from DCF for the DV shelters. • Judy Decine – There is already a provision in state statute since 2010, revised in 2013: if someone is a victim of violence/sexual assault, they can get out of lease agreement without financial penalty. https://www.cga.ct.gov/current/pub/chap_830.htm#sec_47a-11e 	
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	<ul style="list-style-type: none"> • Rapid rehousing in place – family can stay where they are and get services/assistance • CCADV put in an application to double the program. 	
4. Updates and announcements	<p>J. Frost – January 30th there will be the Racial Disparities in Maternal Morbidity and Mortality Annual Conference at UCONN Health</p> <p>L.Vitukinas – CT Dental Health Partnership responded to the state’s RFP and was awarded the contract to continue work with the state of Connecticut.</p> <p>J. Decine – Property Maintenance Code Effort – The proposal was presented to the criminal justice policy division with support from DPH; housing condition affects health in the state; We are hoping to have a high-level support this year to get code passed.</p>	
5. 2-1-1 overview and demonstration	<p>Kate Quigley –</p> <ul style="list-style-type: none"> • What is 2-1-1? Free, confidential information and referral service that connects people to essential health and human services 24 hours a day, 7 days a week online and over the phone. • Central intake point for housing and shelter, EMPS • Clinical-community integration programs • Screening tools; resource directories; referral making and tracking; data sharing and communication; identify/address resource gaps • Healthy lives Navigator, 2-1-1 Navigator; Connecticut Hospital Association Unite Us Platform; • https://www.211ct.org/ 	
6. Next Meeting	March 4, 2020 Connecticut Women’s Consortium	

