

State Health Improvement Planning Maternal and Child Health Coalition

June 25, 2020 ZOOM Meeting 9:00 am- 11:00 am

Meeting Summary

Attendees: Kathleen Callahan, Caitlin Collins, Linh Ung, Maura Coyne, Marijane Carey, Angie Matthis, Samantha Lew, Leigh-Lynn Vitukinas, Judith Decine, Kristin Whittaker, Jenn Morin, Selma Alves, Christine Velasquez, Pareesa Charmchi Goodwin, Daileann Hemmings, Emily Frankel, Erica Garcia-Young, Christine Bracken, Donna Maselli, Connie Heye, Linda Ferraro, Kareena DuPlessis, Faith Vos Winkel, Marc Camardo, Cheryl Burack, Lisa Budris, Johanna Davis, Amy Romano, Melissa Touma, Annie Scully, Karen Siegel, Eva Haldane, Marty Milkovic, Joann Petrini, Enna Garcia, Maggie Adair, Carrie Hastings, Delores Edwards, Nikita Joslyn, Rebecca Lemanski, Lorrice Grant, Doreen Picagli, Bethanne Vergean, Jordana Frost, Jill Isenberg

Agenda Item	Discussion	ACTION Items and person responsible
Welcome and Introductions	Marijane Carey opened the meeting. Attendees were asked to enter their name and organization in the chat box.	
2. Update on the DPH's MCH Block Grant Process – Marc Camardo 3. Health Equity Solutions' COVID-19 Outreach efforts – Samantha Lew	 The Goals, Objectives, and Strategies for the next five years have all been chosen. DPH will complete and finalize the Needs Assessment and the Five Year Action Plan shortly and will submit the application to HRSA in September. The federal review of the Needs Assessment and application will happen in October. The pandemic is amplifying economic, health, and social disparities now and down the road. COVID-19 & Health Equity Community Assessment Survey – experience related to 	
	the pandemic; solutions or suggestions for addressing immediate needs & reaching underserved communities (survey has not ended); individual or organizational unmet needs; and health care workers tools to better reach your clients, patients, or community Survey was done through Health Equity Solutions's ListServ, Social Media, and by asking partners to share with the community.	





Partners Integrating Efforts and Improving Population Health				
	 Results: Concerns – Basic Needs; Mental health; Access to technology; Lack of general & medical transportation services; Access to health care; and Social learning. Offered in 3 different languages Policy Priorities – Race & ethnicity data, Coverage & services, Inclusion, Addressing barriers to health Declaring Racism a Public Health Crisis 			
4. Waterbury's consideration of using the Mahmee app – Caitlin Collins	 Mahmee is an app focused on improving the health of women and babies most at risk. Maternal health in Waterbury – significantly less likely to receive adequate prenatal care compared to the rest of the state; implementation of postpartum depression survey is not consistent in the City of Waterbury; infant and fetal mortality is high in Waterbury and the data shows racial disparities Post-Partum Depression Screening Practices in Waterbury WIC: Women screening prenatally and postpartum several times; medium and high risk are referred to programs; women in crisis are coordinated with 211 and other interventions Waterbury Hospital: New protocols implemented 6 months ago having all women screened prenatally and prior to discharge. Patients are referred to services and those at high risk referred to OBs for 2 week follow up Saint Mary's Hospital: Plan in development How can Mahmee help – HIPAA secure care management platform; physicians and specialists can share care plans and stay on the same page about mom and baby's care; provides education resources, access to support groups, and communication with providers Free virtual support group "Mommy Meet-Up", offering additional education resources around COVID-19, option to send to provider Greater Waterbury Health Partnership recently engaged Mahmee founder Melissa Hann in a webinar discussion about using the app to coordinate maternal health care in Waterbury Key Outcomes and metrics for health clinics and medical groups: Cost savings on jaundiced infants via home phototherapy service program; 60% reduction in NICU readmissions; 100% of patients in-home health program utilizing Mahmee received personalized latch-on breastfeeding quidance (virtual or in person); increased 			



	 patient engagement and new parent confidence; 90% Net Promoter Score for Medicaid patients receiving care management and community-based home health services Features/Functions – Collaborate on patient records; automatically send evidence-based screening or surveys to patients; easily digitize your provider network and CBO partners to track and send referrals; HIPAA-secure direct messaging with both patients and other providers on patient's care team; Mom and baby tracking tools – weight, mental health Challenges – Need support and implementation; Pricing (\$10,000 per month) for a health system to implement. 	
5. Announcements	 Melissa Touma – State Health Improvement Plan. DPH and the SHIP Coalition are currently working on Healthy CT 2025, which is based on updated to the 2019 State Health Assessment (now available on the website). There are 5 priorities – Health and Health Care; Economic stability including poverty and employment; Healthy Eating; Housing including quality and stability; Community Strength and Resilience including Crime and Violence and Emergency Preparedness. The issue DPH is currently working on is how to highlight structural racism and how to measure it. Planning sessions to develop strategies for each priority will be held during the summer of 2020. The SHIP will be drafted in the fall and released in February or March of 2021. 	
5. Adjournment	Next meeting will be in September.	M. Carey to set up and email the group with the next date.

