Accreditation Learning Community

August 23, 2017 1:00-2:00pm

Dial-In Number: 1 877 916 8051

Access Code: 539-9866



Agenda

1:00 - 1:15	Welcome and Introductions ASTHO Accreditation Library Documentation Review Dropbox Call for CHIP Success Stories	Melissa Touma DPH Accreditation Coordinator
1:15 – 1:35	Open Discussion -Engaging the Governing Entity -Measure 2.3.2	ALC Participants
1:35 – 2:00	Incorporating Health Equity in Programmatic Work	

Next Call: Wednesday September 27, 2017 – Workforce Development and Domain 8



ASTHO Accreditation Library

http://www.astho.org/Accreditation-Library/

CT DPH provided documentation for the following measures:

2.4.4 3.2.4 5.3.3 5.4.2 5.4.2 6.3.1 6.3.2

6.3.3 7.1.1 7.1.3 7.2.1 9.1.3 10.2.4 12.3.3



Documentation Review

Dropbox Link:

https://www.dropbox.com/sh/nq0fb4j5zinxmle/ AACSDborjhh8xiW8ENBfq8Bla?dl=0

- Upload documentation that you need external help with.
- Include a cover sheet with Measure/RD info, Document Title, Document Date, Short Document Description

Share Your CHIP Success Stories!

Tell us about a successful initiative, strategy, or activity that your Local Health Department and/or partners have implemented from your community's Health Improvement Plan!

For example, collaboration with:

- school districts
- local businesses
- community partners
- faith-based community organization
- Senior Center/Parks and Rec

Can be used for accreditation as examples of providing information on public health to the public and engaging partners

<u>GOAL</u>

Share model strategies with constituents, community partners, other local health departments, and elected officials.

CDC Example from Connecticut: Fairfield Rolls Out First Bike Route



Engaging the Governing Entity

How is your health department engaging your governing entity?

Are they involved in CHA/CHIP development and CHIP implementation?

Challenges? Successes?



Measure 2.3.2

 What has your department done to demonstrate conformity to Measure 2.3.2 RD2?

MEASURE 2.3.2 A, continued

- 2. Policies and procedures ensuring 24/7 coverage
- 2. The health department must provide policies and procedures that assure 24/7 laboratory coverage. These resources may be within the department, or the department can have agreements with other agencies, individual contractors, or a combination in order to be responsive 24/7. These policies and procedures may be contained in the All Hazards Emergency Operations Plan or may be separate policies and procedures.

Documentation could be contracts, MOAs/MOUs, or mutual assistance agreements that the department has with other public and private laboratories to provide support services.

1 set of policies and procedures or policies and procedures, MOUs, or agreements 5 years



Championing a Culture of Health Equity Across Policies, Planning, and Programming





Health Equity Efforts and How They Supported Accreditation

Domain 3

3.1.3 RD1 Ex1: Office of Health Equity Press Release/Respite and Extended Services RFP 2015

3.1.3 RD1 Ex2: CT DPH CLAS Baseline Report 2014

3.2.6 RD1 Ex1: CT Demographic data and languages spoken

3.2.6 RD2 Ex1: Interpretation and Translation Services Contracts May 2015

3.2.6 RD3 Ex1: Telecommunication Services for bearing impaired

for hearing impaired

Domain 4

4.2.1 RD1 Ex2: I Speak Cards from CLAS Initiatives

Domain 7

7.2.3 RD1 Ex1: I Speak Initiative

7.2.3 RD1 Ex2: CLAS Contract and Health

Literacy Initiatives

Domain 9

9.1.4 RD1 Ex1: Multicultural Partnership Report

9.1.4 RD2 Ex1: Health Equity Actions

Domain 11

11.1.4 RD1: Health Equity Policy and Language

Access Policy

11.1.4 RD2 Ex2: Linguistically Appropriate

Guides to Emergency Preparedness

11.1.4 RD3: CLAS Assessment

11.1.4 RD4: CLAS 101 Webinar Training

DPH) Connectical Department of Public Health

FIGURE 1

HEALTH EQUITY JOURNEY

Connecticut

Multicultural Health

Partnership

+ Culture of Health Equity Vision: One Connecticut where all people enjoy shared resources, optimal health, well-being and a sense of dignity.

Connecticut General Statutes

binatural Health. (a) There is established, within the De palaced feath. The responsibility of the office is to appeed rivering differences in disease, disability and death us have

year apply for, accept and expend outh fields as may be a realized exter byte contracts to carry out the **reason to t**

DPH Office of Multicultural Health established by state statute CGA 19a-4i

June 2006

The Connecticut Health Disparities Project (2006 – 2008) established to improve the statewide infrastructure for documenting, reporting, and addressing health disparities through a grant from the Connecticut Health Foundation

July 2008

CT Multicultural Health Partnership, established to draw together expertise, resources, and programming to eliminate health disparities in Connecticut

DPH Health Equity Policy
Statement approved and signed
by DPH Commissioner Jewel
Mullen on May 11, 2012



September 2013

The DPH CLAS
Standards
Initiative (20132015) established
to promote
National Standards
for Culturally and
Linguistically
Appropriate
Services in Health
and Health Care
through a grant
from US DHHS



March 2014

Connecticut State Health Assessment and State Health Improvement (SHIP) Plan published with health equity and the social determinants of health as cross-cutting priorities

June 2014

DPH Office of Multicultural Health renamed "Office of Health Equity;" name and revised mission statement adopted and signed into law by CT Governor Malloy on June 13, 2014

October 2014

- DPH Office of Health Equity established on October 1, 2014
- DPH Strategic Map updated; Champion a Culture of Health Equity is the revised cross-cutting priority within CTDPH's Agency Strategic Plan (2013-2018)

1998 1999 2006 2007 2008 2009 2012 2013 2014 201

June 1999

The first Connecticut DPH health disparities report, Multicultural Health: The Health Status of Minority Groups in Connecticut, published



October 2007

First Statewide Meeting on Health Disparities -Monitoring Health Disparities: Concepts and Challenges in State Health Data Collection held at the CT Legislative Office Building, Hartford on October 19, 2007

January 2009

The 2009 Connecticut Health Disparities Report published



August 2012

Connecticut Department of Public Health's five year strategic plan for 2013-2018 finalized and published, which identified "champion of health equity" as one of six agencygoals

September 2012

DPH Staff Health Equity
Workgroups formed as
part of the DPH Strategic
Planning Initiative in the
areas of: Definitions, Data
and Surveillance, CLAS
Standards, Staff Training
Needs, and Partnerships

May 2015

DPH Culture of Health Equity definition and vision created

June 2015

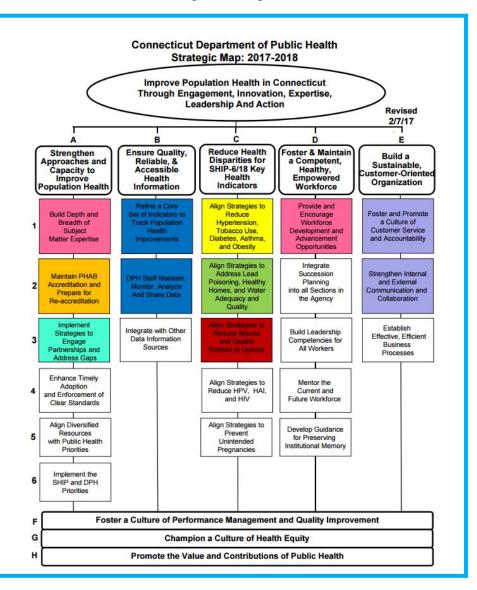
DPH Health Equity Strategic Plan draft completed

October 2015

DPH Health Equity Strategic Plan launched

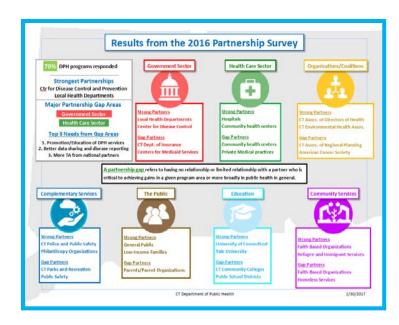
Develop and Align Agency Strategic Plans to Support Health Equity

- Organizational Strategic Plan that includes health equity in the mission, values and as a strategic objective for the agency.
- State Health Improvement Plan (SHIP) with a specific focus on disadvantaged and vulnerable populations toward eliminating disparities.
- State Innovation Model Population
 Health Plan to address access,
 patient care experience, and cost
 of clinical preventive services for
 hypertension, diabetes, asthma,
 and depression targeting regional
 disparities.



Develop and Align Agency Strategic Plans to Support Health Equity

- Quality Plan that outlines a performance management framework and supports strategic objectives and SHIP targets.
- Workforce Development Plan that identifies training for all staff to support health equity.
- Health Equity Strategic Plan that outlines strategic goals and objectives to champion a culture of health equity.
- Language Access Plan to ensure meaningful access of all LEP persons to DPH programs and services.

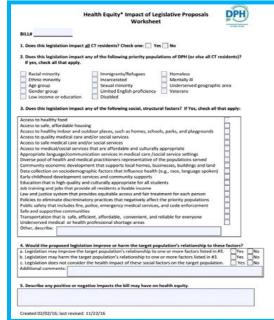


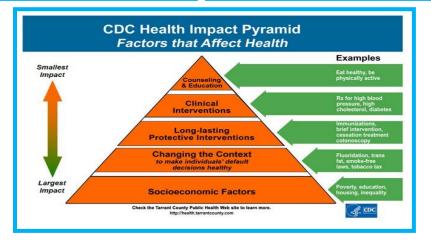


Build a "Healthy Equity in All Policies" Approach

- 2017 SHIP Priorities and Policy Agenda that focuses on socioeconomic policies and system changes that have the greatest impact on health.
- Health Equity Impact of Legislation to assist staff in analyzing the impact of legislative proposals from health equity perspective. [Measure 6.1.1]
- Health Equity Criteria for Internal Policy Review
- **Health Equity Policy Statement** to support DPH's mission of health equity.
- Sociodemographic Data Collection Policy to enhance quality of ethnicity, race, and other key sociodemographic data.
- Language Access Policy for implementation of the language access plan.







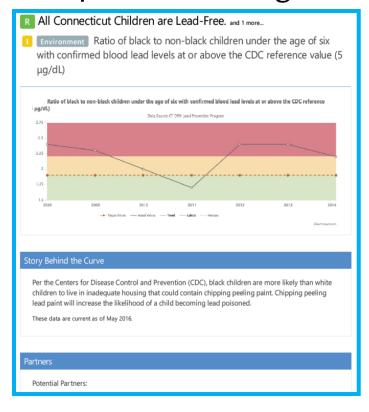
Develop Health Equity Tools and Training to Support Employee Practice

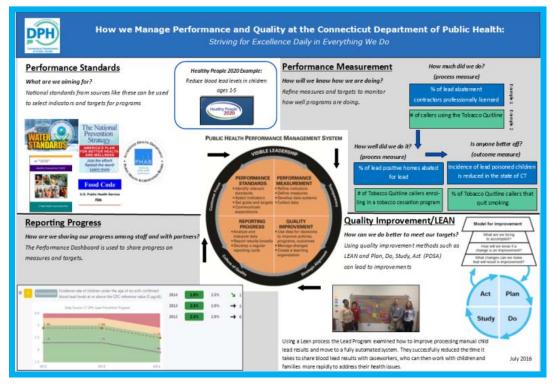
- Health Equity Toolkit to support staff incorporating health equity into daily work.
- Grant Application Checklist to ensure consideration of social determinants, use of evidence base, vulnerable populations, and disparities.
- **Health Equity Glossary** to standardize use of health equity terms.
- Talking Points on Health Equity & CLAS Standards
- New Employee Orientation that includes a Health Equity Module and CLAS 101.
- Leadership Development Training to support transformation toward Public Health 3.0.
- Health Equity Champion Award to provide incentives for staff to incorporate health equity into daily work.



Measure and Report Progress on Improving Disparities

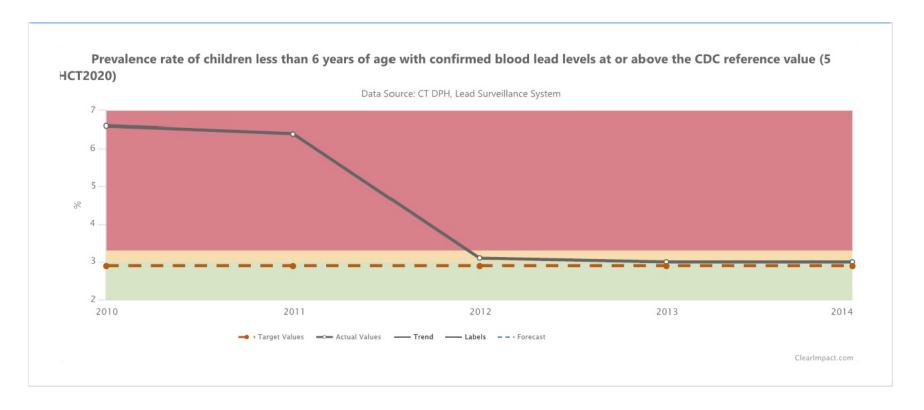
- Health Disparity Dashboards used for SHIP priority setting and tracking
- Performance and Quality Framework applied to meeting health improvement targets





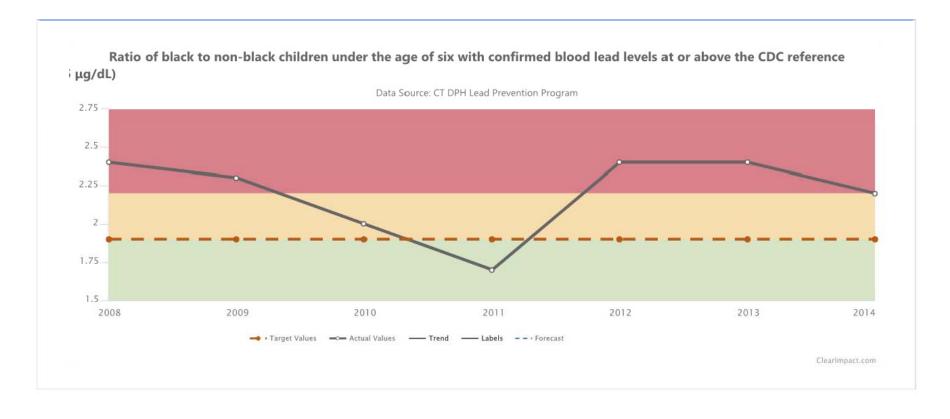
Health Equity and Performance Management

- R All Connecticut Children are Lead-Free. and 1 more...
- I Environment Prevalence rate of children less than 6 years of age with confirmed blood lead levels at or above the CDC reference value (5 μg/dL). (HCT2020)



Health Equity and Performance Management

- R All Connecticut Children are Lead-Free. and 1 more...
- I Environment Ratio of black to non-black children under the age of six with confirmed blood lead levels at or above the CDC reference value (5 μg/dL)



Health Equity Toolkit for Local Health Departments and Other Partners

Office of Health Equity

Health Equity Toolkit

for Local Health Departments and Other Partners



The Health Equity Toolkit is a collection of resources and practical tools designed to help Local Health Departments in Connecticut and other DPH Partners understand the components of health equity, and include health equity in your work.

What's included:

- <u>DPH Health Equity Glossary</u> A listing of definitions used to communicate key concepts of equity, social determinants, and related, commonly used terms. This is a living document, which is reviewed and updated annually by DPH Staff.
- <u>Culturally and Linquistically Appropriate Services (CLAS) Standards</u> Resources for understanding and implementing the National CLAS Standards
- Frequently Asked Questions about the CLAS Standards
- DPH Language Identification Chart "I Speak" chart in 56 languages for posting.
- Translated DPH Documents (non-English languages)
 - Key DPH documents translated into non-English languages. Each row of the attached listing shows
 the document title, what language it was translated into, and the person to contact for a copy of
 the translated document. This project was supported by the U.S. Health and Human Services
 Office of Minority Health State Partnership Grant to Improve Minority Health, 2013-2015.
- <u>Publications and Resources</u> A listing of currently available resources to assist practitioners in implementing components of health equity in your work.
- <u>Social Determinants of Health</u> Concepts and considerations in incorporating an SDOH framework into everyday public health practice.
- · Social Justice Discussion of a social justice perspective in public health with a listing of resources.

We would like to hear from you!

Please send us your comments on this Health Equity Toolkit via e-mail: dphhealthequity@ct.qov