

Consumer Advisory Board Meeting Minutes April 9, 2019

Meeting Date	Meeting Time	Location
April 9, 2019	1:00 – 3:00 p.m.	CT Behavioral Health Partnership, 500 Enterprise Drive, Suite 3D, Litchfield Room, Rocky Hill

Participant Name and Attendance

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Jeffrey G. Beadle		Robert Krzys	X	Christiane Pimentel	Ph
Alan Coker	X	Theanvy Kuoch		Jason Prignoli	Ph
Alice Ferguson	X	Nanfi Lubogo		Kelly Ray	X
Kevin Galvin	X	Velandy Manohar, MD	X	Ann R. Smith	Ph
Rev. Bonita Grubbs	X	Arlene Murphy	X	Denise O. Smith	Ph
Linda Guzzo		Terry Nowakowski		Stephen Wanczyk-Karp	
Others Present					
Laura Morris (OHS)		Claudine Fox (HES)		Steve Lazarus (OHS)	
Leslie Greer (OHS)					
Quyen Truong (NCRMHB)					

Meeting Information is located at: <https://portal.ct.gov/OHS/SIM-Work-Groups/Consumer-Advisory-Board>

	Agenda	Responsible Person(s)
1.	Welcome	Arlene Murphy
	<p>Call to Order The regularly scheduled meeting of the Consumer Advisory Board (CAB) was held on Tuesday, April 9, 2019 at The CT Behavioral Health Partnership, 500 Enterprise Drive, Suite 3D, Litchfield Room, Rocky Hill. The meeting convened at 1:02 p.m. Arlene Murphy chaired the meeting. Members and other participants introduced themselves.</p>	
2.	Public Comment	Arlene Murphy
	<p>There was no public comment.</p> <p>Alan Coker asked whether CAB members can request people to come in to offer public comments. For example, club houses or Local Mental Health Agencies have individuals (consumers) who can speak to behavioral health issues.</p>	
3.	Approve March 12, 2019 Meeting Summary	Arlene Murphy
	<ul style="list-style-type: none"> The motion was made by Velandy Manohar and seconded by Alice Ferguson to approve the minutes of the Consumer Advisory Board meeting of March 12, 2019. Motion carried with one vote to abstain. 	
4.	Proposal to Establish a Governance Sub-Committee to draft CAB Operating Policies	Laura Morris
	<ul style="list-style-type: none"> Laura Morris explained that we had the discussion about ideas and discussion on governance structure and thought the best way to tackle this is to have a separate workgroup to work on governance. The one-pager gives a timeframe, length of meetings, number of volunteers 	

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needed, and what would be discussed in workgroup, including requirements for leadership, members, etc.

- Kevin Galvin asked CAB members as you look at this to consider what needs to be added or subtracted.
- Bonita Grubbs noted one thing she did not see is specific expertise that should be included that would help CAB to be most to be most effective.
- Kevin Galvin: in the past, we usually put out a call for volunteers for the committee.
- Christiane Pimentel stated she did not quite understand what's being asked.
- Laura Morris explained that OHS put together a one-page bulleted list of discussion items for a work group to talk about governance structure. It will be CAB-driven and CAB-led and include all previous discussions as a starting point. Is there anything on that list that's missing that should be included.
- Bob Krzys: we have to keep in mind that whatever the Board structure is moving forward – the transition of the existing CAB is important. We have all been here for varying terms so there should be considering of slotting in and slotting ~~out~~ off.
- Velandy Manohar: need expertise on the CAB and interest in each member people who have expertise in doing this work in the subject matter
- Alice Ferguson: need a listing of who is currently on the board and the activities we have done.
- Alan Coker: We need expertise and we need to make sure we are consumer-driven (direct patient experience)
- Theanvy Kuoch: Need to have a diverse Consumer Advisory Board. Shared that Native Americans have high suicide rate. We need a CAB member who is Native American. We need to open the communication with Mohegan Sun and Foxwoods and health department.
- Alice Ferguson: When we did the Listening Sessions – we asked those involved and that should be considered.
- Arlene Murphy: Do you think the CAB member application and selection process should be included as part of our policies or no?
- Alice Ferguson: We've already revamped the application process, but that shouldn't be the focus right now.
- Ann Smith: I'm not sure if my comment is showing up on zoom. I would encourage us to think carefully about the importance of maintaining the unique features of the CAB that I believe should be retained. As I listen to Alice's comments about the application process. We went through an extensive process to develop them and they were done with the goal to make participation by consumers as diverse and as easy as we can make it. I would be concerned as we think about subsuming CAB under OHS which is a more formal and evolving process, that we don't lose those unique characteristics that are critical to the CAB's foundation. As CAB started, grew, and has listened to feedback from community meetings, we want to be sure that we can still ensure diversity of representation and voice from consumers
- Arlene Murphy: Do you think there's anything that we can do as part of this Workgroup process that can help assure this?
- Ann Smith: Asked what the group thinks.

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- Alice Ferguson: Just thinking that if we are assigned one person – current CAB members need to identify what other representation is needed for committee members to consider.
- Alan Coker: Consider expertise of our contractor – Quyen Truong and the North Central Regional Mental Health Board which has conducted a lot of reviews and knows a lot about consumers. Should ask them about what’s going on. Also commented on Theanvy Kuoch’s suggestion of outreach to Native Americans at Mohegan Sun.
- Alan Coker: the newsletter is excellent.
- Kevin Galvin: we should look at how the newsletter is distributed and consider having hard copies of newsletters in certain places.
- Kevin Galvin: As we begin to have a structure and begin to have a transition – should consider offering ex-officio membership. It’s important that the essence of CAB isn’t lost in the transition.
- Laura Morris: Agreed. I would hate to lose all this experience that CAB has.
- Arlene Murphy: Any other questions? This is a draft recommendation that OHS provided. List is not exhaustive so we can always add to it. Anyone want to make the motion?
- Alan Coker made a motion to form a workgroup organized to design the governance structure for the CAB. Velandy seconded. Motion approved.
- Arlene Murphy: Does anyone want to serve on this workgroup?
- Volunteers: Alan Coker, Nanfi Lubogo, Jason Prignoli, Velandy Manohar, Bob Krzys, Ann Smith
- Arlene Murphy: We will send a follow up email to ask for volunteers

5. Millenials and the Future of Healthcare Event Review

Kelly Ray and Jason Prignoli

- Kelly Ray presented on what occurred during the event.
- Arlene Murphy acknowledged and thanked the CAB members who were present at the event.
- Bob Krzys: Kelly Ray wrote up a good summary. The event announcement confused people a little bit. There was a disconnect between scope of digital health and what was discussed. But points discussed in the report were good. Event raised a lot of good discussion. This report captures a lot, including healthcare literacy, the convenience of healthcare, the scheduling, convenience and cost of health care.
- Alan Coker: Asked about pre-surveys and when they were disbursed.
- Kelly Ray: Surveys were given out during the event.
- Kevin Galvin: Something to consider in the future – several people walked into the event because they saw the posters and information about the event posted. As we look at some outreach events, we should look at public space.
- Kelly Ray: Jason and I were part of two focus groups – which focused on different conversations. My group focused on what the caregiver aspect is like and flaws in the healthcare system and scheduling.
- Jason Prignoli: We as a group focused on equity and access and an understanding of what was offered. They felt like using technology wouldn’t solve the problems in their community. They may be affordability.
- Kevin Galvin: From your experience with doing this event, do you think there are opportunities of young adults to do more.

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- Jason Prignoli: From my focus group alone – there were leaders who were involved. Looking forward to reengaging people and getting them more involved by sharing the report.
- Kelly Ray: I agree. After the event a lot of people came up and asked whether the event will happen again. The young adults are a great resource.
- Bob Krzys: I was struck by the connection between this event and the Manchester Community College (MCC) event. The MCC event is populated by the community college students. This event had more walk-ins.
- Alice Ferguson: can you cross-reference Manchester summary with this one? Also, after events, there's no mechanism to reengage people with the CAB who are interested. Maybe the membership can do some focus on how we can engage. Same thing with Theanvy's event. There were people there who were talking about the potluck. We don't have anything strategic for follow-up.
- Kevin Galvin: We do struggle with follow-up so I would encourage the CAB to come up with a quick response to keep people in the loop, and create a model to engage people.
- Bonita Grubbs: it is always good to have an event and engage people. To what extent does this event inform the SIM process so this can be a systemic addition to the SIM committee? Having sat in on SIM meeting, there's not the experiential elements from these events.
- Kevin Galvin: SIM has its challenges – we have talked to hundreds of people – and what are we doing with it?
- Arlene Murphy: I want to follow up with Bonita's point – that it's experiential. Just want to make sure we are getting that.
- Alice Ferguson: With every listening event – there's been a SIM component. Mark has always done an overview on SIM.
- Kevin Galvin: this event wasn't geared around SIM. Kelly and Jason crafted the subject matter.
- Denise Smith: one of our staff members attended the event. We had a robust conversation. Congratulations. It was well-attended and engaging. I look forward to the next event. We can use these initial conversations as an overlay to SIM. I'll throw out a couple things. Patient portals that are used for healthcare portals and healthcare systems. One that's mobile that gives people access to their data and control over their data. Over time, there can be more conversation about how tech is being used. Also, technology will play a role in communities and clinical integration, especially for community health workers. It's important that technology is used by Community Health Workers in the field. For a lot of people. We can't always link people to outcomes. We can bring technology to help with community and clinical integration. SIM can have workshops so people can have access to this technology. Some people don't know that tech exists. We need to eliminate the upstream barriers to social determinants of health.
- Alan Coker: Control of the medical – part of our education of consumers is to help people realize that they have control of what medical information is accessed.
- Kevin Galvin: Dr. Pearlstone discussed privacy – we are worried about our medical privacy but give out our bank accounts quite willingly.
- Velandy Manohar: Someone needs to have control over and have supervisory authority.

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	<ul style="list-style-type: none"> • Alice Ferguson: We need to be careful of how far the SIM committee can reach. I mean these are absolutely valid points, but as a CAB how deep into any one – we’re only so many people - we have to decide which battle we’re going to fight • Kevin Galvin: To your point, we’re under OHS now, so the potential menu of what the CAB can tackle is growing. How CAB uses it’s time, which subject do we choose, and what do we want as real deliverables, political or consumer based? OHS is completely supportive of being consumer supported and based. So to Alice’s point we have to test what we’re talking about to ensure that the deliverables are where they need to be • Arlene Murphy: What we have is a draft report. Kelly, Jason and Quyen will be developing a report for CAB to send to the participants. My question is: we’ve seen the report, are we in favor of Kelly and Jason moving forward with these draft report and questions with the understanding that these will be reported back to the participants of this event. • Motion to move forward with sharing the report and questions made by Christiane Pimentel. Second by Alan Coker. • Arlene Murphy: Any discussion? • Velandy Manohar: I think an electronic method to share the report is important. I want people to be able to put something in it – to share and comment on the report. • Theanvy Kuoch: I agree with Velandy completely. • Motion passes unanimously without discussion. • Next Steps: Report to be completed by Kelly Ray, Jason Prignoli, and Quyen Truong to distribute. 	
<p>6.</p>	<p>Office of Health Strategy Certificate of Need Program Presentation and Discussion on Consumer Engagement</p>	<p>Laura Morris</p>
	<ul style="list-style-type: none"> • Steve Lazarus presented on OHS Certificate of Need Program • Bob Krzys: can you give us an example of a community benefit that has been presented by one of your applicants? • Steve Lazarus: Discussed price caps and communication efforts with the community based on review of community benefits programs within hospitals. • Laura Morris: Can you give a little information about the hearings and what they’re about? • Steve Lazarus: Today’s hearing is being held because Hebrew Home in West Hartford came and had a meeting with us and said they are financially struggling. We looked at their application and came up with a plan to survive – focusing on their outpatient piece and get a license as an outpatient hospital to serve geriatric patients. These are providers that have never done a CON application before. • Arlene Murphy: May I ask a question – in the case of this situation, how do you do outreach to get people to the hearing tonight? • Steve Lazarus: We work with the applicant. Typically, we hold them at conference centers but we’re holding it at the town hall meeting to reach more people. We worked with the applicant to do the outreach. • Arlene Murphy: So do you anticipate that you’ll get a good turn out for this hearing? 	

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- Steve Lazarus: I don't know, we won't know until we get there. I can tell you for the next hearing on April 30th, we'll get a good turnout because it is concerning the acquisition of the hospital.
- Velandy Manohar: 1/3 of applicants will get a hearing and out of those hearings how many get a flat out no or yes?
- Steve Lazarus: We only get applications that are really needed at this point, so people that are coming typically have a need. With well thought out projects. There typically has to be an extreme reason for an application to be turned down, and even then we'll work with the applicant around our conditions.
- Kevin: Thank you Steve I think you can tell that there is great interest from the CAB on this topic.

7. Updates and Next Steps

Denise Smith

- Health Disparities Institute Report
 - Arlene Murphy: Denise can you provide updates about this project since your presentation?
 - Denise Smith: If any of you missed the presentation on 3/25 we recorded a live webinar that is now available on the HDI website. A phone call was convened on 3/22 with co-chairs and Dr. Wisdom Powell to discuss the presentation. The CAB chairs submitted our score card. We thank them because this is an important framework to recognize that intersections that may be missing. HDI was informed that a few CAB members that were there for our presentation on 2/5 that wanted to be involved and collaborate on our work. HDI has convened a multi-sector alliance on health equity and boys and men of color and invite CAB members to participate so please reach out to me. In June we're hosting a report card data walk around the report card and have already been requested to do this state wide. Please email me if you're interested in participating and please share with partners across sectors. Finally, HDI has been asked to present the report card at the Better Health Conference on 6/6 on the Health Equity Track. We're open to working with OHS if needed for listening session.
 - Kevin Galvin: Can you talk a little bit about the data walk?
 - Denise Smith: at a very high level, we took great care to create impressionable graphics to evoke an emotional and intellectual response to connect with the data presented. What the data walk does is take the graphics and makes them really big – on large poster boards across a room. People will come into the space and walk through the data. As people move from one indicator to another they'll have a chance to speak with others next to them, use post-its to ask questions on the posters in real time. Then we'll do one of two things: take all participants together to have a town hall style conversation or group people by indicator for individual deeper-dive discussions to highlight how people are looking to use the data, how they're moved by the data. It is a very interactive experience.
 - Arlene Murphy: We'll follow up with you to make sure we have the information to go in to the action items for this meeting
 - Kevin Galvin: Can you send the link for the June data walk to share?
 - Denise Smith: I definitely can.

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	<ul style="list-style-type: none"> ○ Kevin Galvin: I learned a lot between Steve and Denise’s presentations today. ● UConn Center for Aging Caregiver Presentation <ul style="list-style-type: none"> ○ Arlene Muprhy: we had follow up with the UConn Health Center for aging team. They appreciate us for sharing their reports. They are interested in continuing to work with CAB on their projects and aren’t looking for any additional engagement events at this time. ● Community Health Worker Legislation (SB 859) <ul style="list-style-type: none"> ○ Update and information shared on Community Health Worker Legislation ○ Bob Krzys reported that this legislation came roaring out of committee and seems to have support from both houses. Unless it gets caught up in anything during the final weeks, it looks good. The final language is still being worked on. ○ Christiane Pimentel: I just want to say I’m very excited about this! One of my duties here at Wheeler is to coordinate the CHW program and I work with about 8 CHWs here. Christiane Pimentel offered to share information and insights on Community Health Workers. ○ Alice Ferguson: I just remember Tekisha sent out a document about the legislation. I don’t know who else this went out to, but I can send that to you. ○ Arlene Murphy: We can include that in the follow up meeting materials for this group. 	
8.	Other Business	Arlene Murphy
	<ul style="list-style-type: none"> ● Bob Krzys: Do we have a meeting with Community Catalyst on June 11? ● Arlene Murphy: Yes we do! ● Kevin Galvin: We have a planning call to determine: what the meeting will look like, putting together a survey to engage all CAB members. We have a commitment to talk to them every other week as we approach the event. ● Arlene Murphy: Lunch will be served and it’s at the Lyceum. I think we need to follow up on meeting locations moving forward. Something for consideration is moving the meetings back to the Lyceum or the LOB, but we did hear feedback from others about having trouble getting to Rocky Hill. ● Alice Ferguson: Do we have other options besides for the Lyceum? That space is really tight. ● Kevin Galvin: The Lyceum has other locations. I am going to the Hartford Historical Society that has a good location but the sound is shaky. It’s not only about the location but the technology with the location. 	
9.	Adjourn	Meeting adjourned at 2:52 p.m.
	Alan Coker motioned to adjourn and Alice Ferguson seconded. Motion carried.	