

Commission on Health Equity: Planning Retreat
Hispanic Health Council, 175 Main Street, Hartford, CT 06106
September 15, 2009: 8:15 – 3:30

Retreat Goals:

- Discuss findings captured in progress reports from work groups.
- Agree on key findings to include in the Commission’s annual report to the Governor and General Assembly.
- Agree on a plan for producing report, including:
 - What report needs to include
 - Who will be involved in drafting the report: a lead writer + small team
 - Whose feedback is needed before finalizing report
- Begin to define the Commission’s priorities and plan for 2010 -- to support achievement of its mission and guided by its job description

Agenda

Facilitator: *Jacqui Lindsay*, Innovation by Design

Gather, coffee and light breakfast	8:15
1. Welcome, Introductions, Why We Are Here: <i>Jim Rawlings</i>	8:30
2. Meeting Overview: <i>Jacqui Lindsay</i>	8:35
3. Progress Reports from Work Groups	8:40
<i>What’s been done, learned, and any questions or challenges coming up in work to date</i>	
▪ Data work group	<i>Presentation and discussion (30 minutes)</i>
▪ Policy work group	<i>Presentation and discussion (30 minutes)</i>
▪ Public Voice work group	<i>Presentation and discussion (30 minutes)</i>
BREAK	10:15
4. Findings to Report to Governor and GA	10:30
▪ Reflect on findings across work groups.	
▪ Agree on key findings to include in annual report to Governor and General Assembly.	
LUNCH	12:00
5. What Priorities and Plan the Commission Should Focus on in 2010	12:30
<i>To support achievement of its mission and guided by its job description</i>	
▪ Priorities	
▪ Plan	
▪ Resources needed to support achievement of priorities and plan for 2010	
BREAK	2:00

6. A Plan for Producing Commission's Annual Report to Governor and GA 2:15
Including discussion and decisions about the following:

- What the annual report needs to include: key components
- Who will be involved in drafting the report: a lead writer + small writing team
- When the writing team will complete its draft of the report to share with commissioners
- A plan for getting feedback on draft of report before it is sent to the Governor and GA: whose feedback is important to get, who will get it by when, and by when writing team will incorporate this feedback to produce a final report.

7. Next Steps and Meeting Evaluation 3:15

- Consultant drafts retreat summary -- notes and agreements -- and sends to Chair.
- Chair reviews meeting summary and sends to Commissioners to prepare for October retreat to agree on recommendations to include in Commission's annual report.
- Writing team meets to develop its plan for getting a draft of the report to Commissioners.
- Commissioners review September retreat summary.
- Commission meets in October 2009 to achieve the following goals:
 - Discuss and agree on recommendations for annual report.
 - Continue to discuss and further refine the Commission's plan for 2010.
- Agree on date for October planning retreat.
- Meeting evaluation

Close

3:30

Information Packet for Commissioners to Review before September 15 Retreat
(Materials to support retreat discussion)

1. Agenda for retreat
2. Progress reports from 3 work groups: data, policy, and public voice
3. Retreat summary from Commission's planning retreat on June 16, 2009
4. Commission's work plan for 2009 -- defined at its retreat on March 17, 2009
5. Commission's job description -- defined by the General Assembly

Connecticut Commission on Health Equity (CCHE)

MISSION of CONNECTICUT COMMISSION on HEALTH EQUITY *(Defined by the General Assembly of Connecticut)*

- Eliminate disparities in health status based on race, ethnicity, national origin, and linguistic ability.
- Improve the quality of health for all of the state's residents, with a special focus on racial and ethnic inequities.

Performance Requirements and Plan for 2010

Project Deliverables

1. An annual report and recommendations from the Commission to the Governor and General Assembly by January 2010
2. A plan to guide the Commission's work in 2010

Project Plan: Key Milestones and Timeline

- Hold retreat to define the Commission's first-term priorities and form work groups to recommend to the Commission what its strategic priorities should be. 3/17/09
(a half-day meeting)
- Discuss and agree on preliminary action plans from work groups. 6/16/09
(a half-day meeting)
- Discuss and agree on key findings to date from work groups to inform Commission's annual report to Governor and General Assembly. 9/15/09
(an all-day meeting)
- Work groups discuss and agree on recommendations for annual report. 10/09
(a half-day meeting)
- Draft report to Commissioners for their review and comment. Also get feedback from key allies, leaders in the legislature, and the Governor.* 11/09
- Send final draft of annual report to Commissioners for a vote. 12/09
- Submit annual report to Governor and General Assembly. 1/10

Commission on Health Equity Deliverables

Our Job Description: Ten Goals

(defined by General Assembly of Connecticut)

The commission shall:

- (1) Review and comment on any proposed state legislation and regulations that would affect the health of populations in the state experiencing racial, ethnic, cultural or linguistic disparities in health status.
- (2) Review and comment on the Department of Public Health's health disparities performance measures.
- (3) Advise and provide information to the Governor and the General Assembly on the state's policies concerning the health of populations in the state experiencing racial, ethnic, cultural or linguistic disparities in health status.
- (4) Work as a liaison between populations experiencing racial, ethnic, cultural or linguistic disparities in health status and state agencies in order to eliminate such health disparities.
- (5) Evaluate policies, procedures, activities and resource allocations to eliminate health status disparities among racial, ethnic and linguistic populations in the state and have the authority to convene the directors and commissioners of all state agencies whose purview is relevant to the elimination of health disparities, including but not limited to, the Departments of Public Health, Social Services, Children and Families, Developmental Services, Education, Mental and Addiction Services, Labor, Transportation, the Housing Finance Authority and the Office of Health Care Access for the purpose of advising on and directing the implementation of policies, procedures, activities and resource allocations to eliminate health status disparities among racial, ethnic and linguistic populations in the state.
- (6) Prepare and submit to the Governor and General Assembly an annual report, in accordance with section 11-4a of the general statutes, that provides both a retrospective and prospective view of health disparities and the state's efforts to ameliorate identifiable disparities among populations of the state experiencing racial, ethnic, cultural or linguistic disparities in health status.

- (7) Explore other successful programs in other sectors and states, and pilot and provide grants for new creative programs that may diminish or contribute to the elimination of health disparities in the state and culturally appropriate health education demonstration projects, for which the commission may apply for, accept and expand public and private funding.
- (8) Have the authority to collect and analyze government and other data regarding the health status of state inhabitants based on race, ethnicity, national origin and linguistic ability, including access, services and outcomes in private and public health care institutions within the state, including, but not limited to, the data collected by the Connecticut Health Information Network.
- (9) Have the authority to draft and recommend proposed legislation, regulations and other policies designed to address disparities in health status.
- (10) Have the authority to conduct hearings and interviews, and receive testimony regarding matters pertinent to its mission.

CHE Priorities for 2009 and Work Groups to Define and Achieve Them

1. ***Collect and analyze data relevant to the mission of the Commission -- including on metrics, best practice, and promising models/initiatives – to inform its arguments, recommendations, and call for action.***
 - Priority is related to following objectives of Commission’s job description: **2, 8, 7**
 - Work group formed at retreat to address this priority: *Nancy Berger, Paul Cleary, Elizabeth Krause, and Greg Stanton*
2. ***Monitor, review, analyze, and comment on the impact of current or proposed legislation and policies on the Commission’s mission: i.e., on eliminating health disparities and improving the quality of health for all of the state’s residents.***
 - Priority is related to following objectives of Commission’s job description: **1, 3, 5, 9**
 - Work group formed at retreat to address this priority: *Bruce Carlson, Jeanette DeJesus, Mary Eberly, Kelson Etienne, Jose Ortiz, Marie Spivey, Michael Williams*
3. ***Build public voice, public involvement, and public support for the Commission’s work: by connecting with and convening populations experiencing health disparities, as well as by holding convenings of the diverse general public -- to listen and learn from these residents of Connecticut, and to share and get feedback on the Commission’s work.***
 - Priority is related to following objectives of Commission’s job description: **4, 10**
 - Work group formed at retreat to address this priority: *Natasha Pierre, Jim Rawlings, Janet Williams, Tory Westbrook, + the man who joined the group late*