

Advisory Council on Health Disparity and Health Equity (ACHDHE)

April 14, 2015 Meeting Minutes

Virginia Department of Health (VDH) Central Office Madison Building

109 Governor Street, Richmond, VA 23219

Mezzanine Conference Room– 11:00 a.m. - 2:00 p.m.

Attended in Richmond: **State Health Commissioner: Marissa J. Levine, MD, MPH, FAAFP, Adrienne McFadden, MD, JD, FACEP, FAAEM, FCLM; Linda Redmond, PhD; Emmanuel Eugenio, MD, FAAP; Theresa Teekah, MA, RN, MPH-C; Patti Kiger, Med (PhD); Melody Armstrong, MPA, BSN; Keisha L. Smith, MPA; Karen Reed, MA, CDE; Augustine Doe, MS, MPA;**
Attended Via Polycom/Phone: **Gloria Addo-Ayensu, MD, MPH; Maia McCuiston Jackson, MD, FAAP;**
Did Not Attend: **Beth O'Connor, M. Ed, BA; Susan Alford, MBA, BS; J. Elisha Burke, M.Div., D.Min.; Jameika A. Sampson, MPH, MBA; Sheila Trimiew-Johnson, BA; Melissa Canaday; Elizabeth Locke, PhD, PT; Luisa F. Soaterna-Castaneda, BS, MPH; Cecily Rodriguez; Kate S. K. Lim, MT, (ASCP), FACHE, CPHQ, CPHRM;**

Welcome

The meeting was called to order by Dr. Linda Redmond, ACHDHE Chair. After the welcome, everyone introduced themselves.

Adoption of Agenda

The April meeting agenda was approved as submitted.

Approval of Minutes

The January 13, 2015 minutes were approved as submitted.

State Health Commissioner's Updates

Dr. Levine provided the following highlights:

1. Dr. Levine updated attendees on legislative issues impacting VDH activities as follows:
 - a. The General Assembly met and passed a budget that resulted in significant cuts to the agency. The year ahead will be tough, requiring changes, including some layoffs. Leadership will work to increase efficiency and focus on our mission. The agency will not have to respond to any specific legislative changes. There are a number of studies underway which could have an impact on the health of Virginia.
 - b. There is a bill pending signature which charges the Southwest Virginia Regional Health Authority to review and make recommendations when a health system wants to merge with another in the area. The applicant would need to demonstrate that the benefits likely to result from the cooperative agreement outweigh the disadvantages likely to result from a reduction in competition. Health improvement goals have to be assured.

2. Dr Levine commented that health equity remains a priority throughout the administration. The Governor and Secretary Hazel spoke to the VDH mission of becoming the healthiest state in the nation, and Dr. Levine said this will not happen until disparities are addressed. She then invited Dr. Lilian Peake to share the framework of Virginia's Population Health Plan. This is an outline that needs more detail. The ACHDHE is invited to provide their insight, feedback, perspective, and questions, and to make recommendations.

Presentation

“Creating a Population Health Plan for Virginia” - Presenter: Dr. Lilian Peake, Director, Office of Family Health Services, Virginia Department of Health (VDH).

Josh Czarda, Performance Improvement Manager, Virginia Department of Health.

Dr. Peake presented on Creating a Population Health Plan for Virginia. It included both a positive history of improved health nationally over the past century and a discouraging look at our high spending and comparatively poor outcomes today compared to other countries. Reviewing the analysis of mandatory spending in relation to healthcare costs, Dr. Peake said that we are on an unsustainable trajectory where tax revenues will not cover mandatory costs. The most costly diseases (in lives and dollars) are heart disease and cancer, which are affected by smoking and obesity. There are lessons to be learned from how TB was eradicated: a focus on wellness and clear identification of causes. Disease causality is heavily dependent on social and economic factors (40%) and behavior (30%) while genetic predisposition accounts for only 10%. We need to look at population data, the determinants of health, and return on investment. Dr. Peake shared a Well Being schematic based on a Healthy, Connected Community, enabling a strong start, and emphasizing prevention and quality health care.

Joshua Czarda discussed the challenge in deciding which health metrics to use to measure success. Our goal is to show a marked return on investment in terms of health, so a select group of metrics will be tracked. He stated that they will review the numbers quarterly and will seek input from the community partners regarding data. He cautioned that too many indicators may be overwhelming and that prioritizing metrics was necessary.

Discussion:

ACHDHE members asked about the high cost for medications and surgeries in the U.S. in comparison with other countries. Some reasons for the high cost include: lack of coordination, bureaucracy, multiple payers, recuperation of development expense, and restrictive patent laws. Other factors associated with high healthcare costs are: best practices are not used, less use of primary care, inappropriately short hospital stays, and reduction in public health investment.

The ACHDHE members suggested the inclusion of additional partners, such as: the Center for Health Innovation, Department of Education, local Planning District Commissions and children's health and advocacy groups. Another member suggested the inclusion of the Virginia Housing Development Authority, , transportation planners, the Department of Environmental Quality, Community Service Boards, and members of the General Assembly.

ACHDHE members also suggested that the Virginia Population Health Plan metrics include elements of the Health Opportunity Index, e.g. income, education, walk-ability. Recording the number of free and reduced lunches to capture information on poverty was also suggested. Another idea put forth was use of GIS technology, in use by Planning District Commissions, to analyze access and availability of housing, transportation, medical services, and other services for low income populations. Commissioner Levine noted that a standardized health assessment tool is in development in collaboration with other partners.

Commissioner Levine shared that in using the State Innovation Model (SIM), VDH is taking a broader view and working with a large array of partners to help Virginians achieve emotional as well as physical wellness. She emphasized that the education of leaders and policy makers is important. In order to achieve improved health, people need to understand the root causes of poor health. Virginians need to be persuaded that Healthy Connected Communities are a wise investment.

“Virginia’s Health Workforce Scholarship Programs” - Presenter: Olivette Burroughs– Health Workforce Specialist, Virginia Department of Health.

Ms. Burroughs commenced her presentation by introducing Virginia’s health workforce programs’ goals: increasing access to care through recruitment of qualified specialized physicians and other healthcare professionals to serve in Virginia’s Health Professional Shortage areas (HPSA). She discussed the types of workforce programs, their purposes, and eligibility guidelines. Ms. Burroughs also provided information about the application cycles for the individual programs as well as the award process. She presented a graph of the programs’ enrollment, which indicated an increase in the number of awards in the last few years.

Dr. McFadden shared information about a question Dr. Locke asked at a previous ACHDHE meeting about inclusion of physical therapists, as there is a need for these professionals in shortage areas as well. Dr. McFadden explained that the Health Resource and Service Administration (HRSA) makes the sole determination of the disciplines to be included in the State Loan Repayment program for all states. While the Virginia Department of Health makes recommendations to HRSA on needs in Virginia, ultimately the decision is up to HRSA.

In response to questions from Drs. Redmond and Eugenio regarding discretionary slots for Virginia’s Conrad 30 Visa Waiver program, Ms. Burroughs shared that the program received 30 slots; five of which were discretionary slots based on three prevailing needs: outcome, population, and geographic specific needs. Dr. McFadden further indicated if an organization applies for a discretionary slot, the request would compete on a first-come, first-serve basis.

Dr. McFadden asked the ACHDHE membership for suggestions for expanding Office of Minority Health and Health Equity (OMHHE) marketing efforts to recruit professionals to serve in Virginia HPSAs and not leave any money on the table. She shared that current recruitment initiatives include (OMHHE) participation at health fairs and advertisement in Hospital and Healthcare Association newsletter, posting of information on OMHHE/VDH websites, and partnering with primary care organizations.

ACHDHE members suggested working with community colleges, including ECPI University and South University. Dr. Eugenio suggested universities, colleges, high schools, churches and community organizations. The members further suggested working with high schools program tracks as well. There is a need for recruitment to include a dialogue on the duties and responsibilities of the nursing professions as well as mentorship for young adults. Another ACHDHE member proposed that a mini-video be developed with success stories for potential program participants. The OMHHE Director suggested a wrap-around model of marketing to include the suggestions.

NEW BUSINESS:

Procedure for ACHDHE Recommendations

Dr. Redmond recapped the ACHDHE enhanced recommendation process discussed at the last meeting and introduced the new ACHDHE recommendation procedure. The membership accepted the document with a minor clarification on point #2 of the document, as noted below.

- In view of the recommendations at the meeting as well as after the meeting, based upon consensus, the ACHDHE leadership will determine key recommendations that will be shared with the State Health Commissioner.

Announcements and Updates

OMHHE Updates:

Dr. McFadden informed the members that at a successful program commemorating the 2015 Minority Health Month observance. Governor Terry McAuliffe signed the Minority Health Month proclamation at the Tabernacle of Praise Ministries International in Richmond. She shared that the latest edition of the American Public Health Association's (APHA) "Better Health through Equity" report recognized OMHHE for making health equity a public health priority. Ms. Karen Reed, Director, Division of Multicultural Health and Community Engagement, OMHHE, VDH is quoted in the report.

Regarding Virginia's 100 Congregations for Million Hearts updates, Dr. McFadden shared that Virginia is tentatively leading nationally with 42 congregations, and Maryland was last reported to have 41 participating organizations. Further, she indicated the OMHHE will continue to pursue its goal of garnering the participation of 100 congregations in Virginia by the end of the calendar year.

Critical to strengthening the workforce program, Dr. McFadden shared that the OMHHE has entered into a formal partnership agreement with the Virginia Health Care Foundation (VHCF). This partnership provides an essential \$150,000 in matching funds to the workforce program, drawing down a dollar for dollar match. Dr. McFadden asked for assistance in identifying other organizations who might partner as well.

In closing her updates, Dr. McFadden announced the upcoming OMHHE training on April 24, Food Deserts: Virginia Challenges and Solutions. She encouraged the ACHDHE members' and other stakeholders' participation.

ACHDHE Member Updates:

Dr. Eugenio shared information about the Asian American Association's Central Virginia Community Health Fair on May 2, 2015. He indicated that the occasion will focus on food as part of the culture.

ACHDHE Action Items

- ACHDHE members will provide additional feedback on presentations following the meeting via the survey links by May 1, 2015. Survey links are below.
- Virginia Population Health Improvement Initiative Grant Update:
<http://kwiksurveys.com/s.asp?sid=0ynzt76n4kf61jd509543>
- Virginia Workforce Scholarship Programs:
<http://kwiksurveys.com/s.asp?sid=anu97cv8cx6canp496412>

Public Comments

- No public comments.

The meeting was adjourned at 1:48 pm.

Next ACHDHE MEETING: Tuesday, July 14, 2015,

Time: 11:00am – 2:00 pm

Location: Mezzanine Conference Room, VDH Central Office, 109 Governor Street, 23219 or via Polycom upon request.

Respectfully submitted by:

Augustine Doe, Health Equity Specialist

Minutes reviewed by: Dr. Linda Redmond, Chair