

**STATE OF CONNECTICUT**  
**State Innovation Model**  
***Consumer Advisory Board***

**Meeting Summary**  
**Tuesday, April 7, 2015**

**Location:** Capitol, 210 Capitol Avenue, Room 310, Hartford

**Members Present:** Patricia Checko (Co-Chair); Arlene Murphy (Co-Chair); Jeffrey G. Beadle; Alice Ferguson; Michaela Fissel; Rev. Bonita Grubbs; Bryte Johnson; Stephen Karp; Robert Krzys; Theanvy Kuoch; Sharon Langer via conference line; Fernando Morales; Richard Porth

**Members Absent:** Kevin Galvin; Cheryl Harris Forbes; Nanfi Lubogo; Alicia Woodsby

**Other Participants:** Meredith Ferraro; Bruce Gould; Richard Kehoe; Janice Perkins; Milagrosa Seguinot; Mark Schaefer

Meeting was called to order at 1:05 p.m.

**Introductions**

Dr. Checko chaired the meeting. Members and participants introduced themselves.

**1. Public Comment**

There was no public comment.

**2. Presentation and Discussion of Workforce Initiatives by Dr. Bruce Gould, Meredith Ferraro, CT AHEC**

Who Are CHWs? CHWs are known by a variety of names, including community health worker, community health advisor, outreach worker, community health representative (CHR), promotora/ promotores de salud (health promoter/promoters), patient navigator, navigator promotoras (navegadores para pacientes), peer counselor, lay health advisor, peer health advisor, and peer leader. As expressed by the Community Health Workers section of the American Public Health Association: CHWs are frontline public health workers who are trusted members of and/or have an unusually close understanding of the community served. This trusting relationship enables CHWs to serve as a liaison, link, or intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. CHWs also build individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support, and advocacy. (Community Health Workers Section, American Public Health Association. Available at: [www.apha.org/membergroups/primary/aphaspigwebsites/chw](http://www.apha.org/membergroups/primary/aphaspigwebsites/chw))

The CAB invited Dr. Bruce Gould and his AHEC associates to make a presentation to the CAB regarding the UConn CHW initiative that is being implemented through the SIM grant. Dr. Gould, professor and associate dean for primary care at the UConn School of Medicine, has earned a reputation as an advocate for public health, primary care and preventative medicine. He also serves as director of the Connecticut Area Health Education Center (AHEC) Program, medical director of Hartford's Department of Health and Human Services, and medical director of the Burgdorf Health Center, a community clinic serving the underserved population in Hartford's north end. Dr. Gould thanked everyone for inviting him and AHEC to participate in the process. He gave an overview of his background and the work he has been doing. He said he has been practicing in the north end of Hartford for the last twenty-seven years. He also runs a homeless shelter program for UConn. Dr. Gould noted he works with community health workers (CHWs) but is not a community health worker. He said he is a medical director for the Hartford Health Department and the Health Department employs community health workers.

He reviewed some key questions, such as, who are they and why are they important. He noted that CHWs live in the community. They use their familiarity to get people educated and pull people from the community into the health system. CHWs help to make care more available and appropriate. He mentioned CHWs are needed to make the health system more effective. Dr. Gould said the charge of the CHW initiative is primarily educational, including the development of career ladders and courses of study for CHWs. The CT AHEC has a program office at UConn and four centers located in Waterbury, Hartford, Shelton, and Willimantic. Dr. Gould mentioned they cover the entire state and are also working with the community colleges. They have been developing trainings for CHW. He noted one of the community colleges offers four credits for the CHW as part of a career ladder. They are looking to recruit people in the neighborhood and people that would have never thought they would end up in college. Dr. Gould said they would like to develop a profession of CHW so that people will make it their life's work.

Ms. Langer questioned where CHWs are employed in the state when not employed by the Federally-qualified Community Health Center (FQHC). Dr. Gould said they are all over the place and in a lot of different organizations and settings. They may be hosted by others (e.g. community-based organizations) and have been recognized as having an important role in the SIM community integration planning and implementation. Members talked about and expressed concerns about the barriers and push-backs faced by CHWs and agencies as they try to build up the workforce.

Ms. Fissel questioned whether there have been conversations with Peer Run organizations like Connecticut Community for Addiction Recovery (CCAR) and Advocacy Unlimited that currently offer training for recovery coaches and recovery support specialist. She noted other states have demonstrated the ability to gain Medicaid reimbursement for recovery support specialist and peer specialist. She expressed the concern of CHWs having reimbursement abilities but not recovery support specialist. Dr. Gould mentioned they are really CHWs by definition. He noted mental health has always been an issue with some of the payers and that's going to be a discussion that has to be had. He mentioned that payers are often for profit. A for profit board has a different charge and incentive than a non for profit. Mr. Porth questioned what CHWs actually do and whether they are available for crisis and other various situations. Dr. Gould said it would depend on the job description and the company that is paying them. He said a grant or payer may determine what they will and won't allow.

Millie Seguinot president of The Community Health Worker Association of Connecticut spoke about her role and what she does as a CHW. She said people in her community know who she is, what she does, and how to contact her if in need. They know she is available and call her around the clock including weekends or twelve midnight. She mentioned CHWs do a lot of work without getting paid a lot or recognized.

Ms. Seguinot asked whether there were any questions related to the CHW Association of Connecticut. Dr. Checko inquired about the association and how to get in touch with them. Ms. Seguinot said they have a pro bono attorney. They are housed at Southwestern AHEC and they have connections across the state. She said they try to meet every month or through a conference call. They have no funding and use their own funds. Funds are needed to fund the association properly. She said they have the trust of the community for the association but unfortunately they need to reach the key stakeholders and policy makers. She said if there are any questions please do not hesitate to call at any time. Ms. Seguinot gave her phone number and thanked everyone for giving her the opportunity to talk to them.

Mr. Beadle questioned what exactly is being funded with the SIM dollars when looking at UConn in terms of CHW. Dr. Gould said some of it is going to each of the AHEC locations to fund and deliver CHW training. He said some of it is needed for market materials to develop the curriculum and career ladders because it needs to be part of the larger push forward to transform. Mr. Morales questioned how many CHWs are in the system throughout the state. Ms. Ferraro said it is one of the things they are charged to do because they really don't know. She mentioned one agency Department of Mental Health and Addiction Services (DMHAS) has more than seven hundred counselors. The board thanked Dr. Gould for the presentation.

### **3. Update on SIM Work Groups**

Each of the CAB liaisons provided updates on the work group activities ([found here](#)).

Dr. Checko mentioned there were questions after a discussion on Practice Transformation Taskforce (PTTF) regarding the council or composition on the task force. She said PTTF may be coming to the Consumer

Advisory Board (CAB) for to request nominations for consumer members. They will keep the CAB members posted as to the kinds of people they are looking for and the timeframe.

#### **4. Update on CAB Workforce Issues Questions**

Mr. Krzys talked about the questions raised by the CAB in the last couple of meetings. He said the need and importance of workforce is obvious but how would they fill in the gap. He said one way to fill in the gap is to try to look at understanding that it is the workforce that delivers the healthcare. He noted that the CAB had a lengthy discussion at the last meeting to consider forming a CAB Design Group and it was Mark advised the CAB that there is nothing to preclude them from having one. He said this will give a snapshot of the current workforce in Connecticut. It will describe the supply and demand of the workforce and strategies to make sure the workforce is sustainable in the future. Mr. Krzys said the CAB should consider proposing and forming a workforce design group and to take on the CHW initiative as our first priority.

***Motion: to create a CAB Design workgroup to deal with workforce issues including CHWs – Robert Krzys; seconded by Stephen Karp.***

Dr. Checko said the design groups are different and a little less formal than work groups. It's really getting all the people together that need to be part of the process to come up with a product.

***Vote: all in favor.***

Mr. Karp mentioned a mental health services bill that includes a workforce component of grants to assist in paying educational costs for certain providers who work in underserved areas. He questioned how to get health care providers into the bill. He will send the information regarding the bill via email.

Ms. Fissel questioned whether they can make recommendations of people within the community that might be of value to the design group. Dr. Checko said they are looking to include not only CAB members but others also. They will help to identify the appropriate people to sit on the design group. It was suggested that Mr. Krzys to be the chair of the design group. The CAB members agreed to this.

***Motion: to appoint Robert Krzys as chairperson of the Design Group for Workforce – Michaela Fissel; seconded by Stephen Karp.***

There was no discussion.

***Vote: all in favor.***

Ms. Murphy asked could they approve the meeting summaries. Dr. Checko noted the minutes were sent out with the meeting materials.

***Motion: to accept the minutes of the February 3<sup>rd</sup> Consumer Advisory Board Meeting – Jeffrey Beadle; seconded by Alice Ferguson.***

There was no discussion.

***Vote: all in favor.***

***Motion: to accept the minutes of the March 10<sup>th</sup> Consumer Advisory Board Meeting – Stephen Karp; seconded by Robert Krzys.***

There was no discussion.

***Vote: all in favor.***

#### **5. Update on CAB Questions Regarding Conflict of Interest Policies**

Ms. Murphy said she will forward the responses to the CAB questions regarding Conflict of Interest Policies to the secretary to send out via email. Dr. Schaefer noted the responses include the conflict of interest protocol as presented to the Steering Committee ([see conflict of interest protocol here](#)). He also included a sample confidentiality form that all procurement participants are required to sign ([confidentiality statement here](#)). There will be additional information coming. Ms. Murphy mentioned they can put it back on the agenda.

Dr. Checko noted that Rich Kehoe, from Senator Blumenthal's office, was sitting in the meeting.

#### **6. Update on CAB Application process for CAB, Equity & Access, and HIT**

Ms. Murphy said they have extended the deadline to April 13<sup>th</sup> for anyone applying for CAB, Equity & Access, and HIT. Dr. Checko said if you know of anyone who may be appropriate, please recommend and encourage them. Ms. Murphy said this go round will be a lot easier than the first go round. She said the process is simple and fair. Dr. Checko said they will have the ability to score. The information is confidential. The PTF is looking for consumer representation but they are not sure whether for housing or other. They will send an email after they hear the recommendation from PTF.

#### **7. Next Steps and CAB Meeting Schedule**

Dr. Checko said the next meeting is May 12<sup>th</sup>. The legislature will be in session. She noted there was an opportunity to meet in Rocky Hill but members felt it needed to be more accessible. The meeting can be at another place but will need to be in a central location and accessible for people. Dr. Gould said he knows of a space located at the Congregational Church on Asylum Avenue. Mr. Beadle said the Connecticut Association of Nonprofits is in a central location with good parking.

***Motion to adjourned Robert Krzys; seconded by Dr. Bruce Gould.***

There was no discussion.

***Vote: all in favor.***

Meeting adjourned at 2:58 p.m.