HNJ2030 ADVISORY COUNCIL

MEETING MINUTES  AUGUST 12, 2020

ATTENDANCE

Alycia Bayne  Kwaku Gyekye  Victoria Brogan
Alysia Mastrangelo  Marissa Davis  Julia Wieczorek
Bageshree Cheulkar  Regina Riccioni  Loretta Kelly
Diane Hagerman  Sherry Dolan  Maria Baron
Jeanne Herb  Tyree Oredein  Yannai Kranzler

ACTION TEAM UPDATES

1. Healthy Living (HL)
   • Subcommittees are meeting biweekly. Issues identified.
   • Now working on goals: 4 self-care, 6 physical activity/nutrition, and 1 mental health with 4 objectives – ACT members are to rank them now to choose the top goals by next week

2. Healthy Families (HF)
   • First meeting held. Reviewed focus areas. Gave ACT members homework.
   • Next meeting is August 20.

3. Healthy Communities (HC)
   • World has changed since HNJAC decided on initial focus areas, so started over with overarching definition of a healthy community with 11 defining elements.
   • Three sentences for each of the 11 elements are being refined by ACT members.
   • Want to put out a call to contacts for what they’re already working on related to these elements. Have DOH ask other state agencies for the same.

4. Access to Quality Care (AQC)
   • Reorganized focus issues: Access, Quality & Safety, Health Care Integration, and Technology. Still need to discuss last two.
   • Expanded team by adding a few new ACT members last month. Still orienting them.

TOPIC AREA OVERLAPS AND GAPS

- HF will cover:
  - Maternal and infant mortality
  - Nutrition and physical activity among children/teens
- Immunizations:
  - HL wants to cover adult immunizations as part of clinical preventive services.
  - HF is planning to do child and adolescent immunizations.
  - AQC has discussed the delivery of immunizations (provider/insurer side)
- Mental health and SUD among children/teens:
- HF will cover
- Make sure tobacco/nicotine/vaping is covered.
- AQC also has it (tentatively) under Health Care Integration in terms of health care delivery.
- Share members across ACTs if needed depending on expertise.
- Walkability and places for physical activity:
  - HC hasn’t gotten that far yet.
- Traffic safety, esp. pedestrians and bicyclists:
  - HL looking at it from injury perspective.
  - DOT rep on HC ACT but maybe move/share her to HL ACT. Wait until after HL members vote on goals.
- CHWs, doulas, first responders, behavioral health social support network, child and elder care services:
  - HF is doing child/elder care, doulas, end of life care.
  - HC isn’t planning to cover any of those.
- Language, translation services
- Food access:
  - HL is covering fruits and vegetables but not access

**GENERAL UPDATES**

- **Community Conversations**: Finalizing informational documents to clarify the parameters of the project. Initial outreach phase with NJ Partnership for Healthy Families. Pilot test of the questions -- positive feedback. Next pilot will be at one Y location next week to gather best practices and lessons learned. Will develop a webinar for interviewers. Rand Institute – scope of work for theme analysis. NJHI has a lot of South Jersey grantee communities that could be interviewed.
- **Culture of Health Conference/Population Health Summit**: Virtual teaser event in December. Keynote speaker invitations have been sent. In-person conference in April – hope to feature the work of the ACTs then.
- **Member updates:**
  - NORC with CDC launched “How Right Now” social media campaign ([howrightnow.org](http://howrightnow.org)). NORC partnered with Morehouse School of Medicine re: mitigating the impact of COVID in racial/ethnic minority communities – 3-year project.
  - Virtua is reactivating more of its services, alleviating fears about coming into facilities. Food pantry program gearing up to return to brick and mortar but also ramping up mobile program.
  - NJHI has 10 new grantee communities. Most have never been grantees before. Wanted to get funding out in case there’s another wave of COVID. Additional funding went to existing grantees for food access, housing, etc. Looking toward COVID recovery now, rather than COVID relief. Racism and implicit bias initiative – longer term, will reach out for input.
o RWJ Barnabas: Virtual teaching of medical students. Telehealth, telemedicine, etc. – need was already there but COVID forced the issue. Now need to look at it more broadly – 10-year plan.
o Saint Elizabeth U: Closing up the semester. Fully online through 9/5. Probably won’t return to in-person in the fall except lab and clinical courses (sciences, medicine, and arts).
o COVID testing is not standardized across counties. One county – get tested easily and results back in 24 hours. Other counties – nowhere to get tested other than CVS. When go to ER for test, told if symptomatic, you’re presumed positive and not given a test and told to quarantine.
o Coordination between counties. Public health infrastructure. Medical reserve corps.
o Increased need in food access, particularly in areas that are not traditionally high need. USDA COVID relief boxes will now contain protein and dairy. A lot of people still haven’t received unemployment payments, hence increased need for food, utilities, housing $$.
o Y Alliance is struggling with childcare plans for the fall because each school district has a different plan.
o Social isolation, esp. among seniors. Anxiety issues amplified by COVID.
o RU-SPH population health cohort study advisory council – feedback from HNJAC wanted.

**NEXT STEPS**

1. Deep dive on Equity, Policy, and Resilience at next meeting
2. Review HC’s definitions before we send it out publicly for comment
   a. Set up drive to share HC document for editing by HNJAC members
   b. Feedback deadline August 31
3. Marissa/Julia to send out community conversations document for review.
4. Marissa to send out document about equity
5. HP2030 Launch webinar: August 18 at 1:00 pm
6. Next HNJAC meeting: September 9 at 10:00 a.m.

*There were no slides for today’s meeting.*