HNJ2030 ADVISORY COUNCIL

MEETING MINUTES          OCTOBER 8, 2019

ATTENDANCE

Alycia Bayne       Kwaku Gyekye       Victoria Brogan
Bageshree Cheulkar Marissa Davis       Maria Baron (HNJCC)
Diane Hagerman     Regina Riccioni     Loretta Kelly (HNJCC)
Jeanne Herb        Sherry Dolan
John Sarno         Tyree Ordein

Maria Baron (HNJCC) Loretta Kelly (HNJCC)

MEETING OUTCOMES

1. Agree on ground rules
2. Establish the set of topic areas for HNJ2030
3. Action Team assignments and recruitment
4. Meeting schedule

GROUND RULES

1. Decision-making process:
   a. All voices will be heard
   b. Majority vs. consensus: Go with the majority, but only if the others can "live with" the decision.
   c. Once decisions are made, that's the end.
2. Sharing information: Attachments to emails. There's no portal that all can use.
3. Consider ideas for improvement: Everything is on the table until DOH takes it off the table.
4. Reviewing work:
   a. All HNJAC members will review, as a collective, the work of the Council and the ACTs.
   b. Once HNJAC agrees, it goes to HNJCC and then up the ranks in NJDOH and beyond for approvals as appropriate.
5. Challenge prevailing thought:
   a. Provide a chart showing chain of command for approval of each step of HNJ2030 development
   b. Is it possible to change DOH’s organizational mission?
6. Prioritization:
   a. See “1. Decision-making process” above.
   b. For topics and objectives, follow HP2030 guidelines.
   c. Overarching strategies to be embedded in each Topic Area include: Demographics, Equity, Policy, and possibly Climate*
*This was not agreed on by the entire group but was discussed by four or five members before meeting departure. Needs further discussion with full Council.

7. Resolve conflict:
   a. Assume good intentions!
   b. Transparency at all times

BACKGROUND

1. HNJ2030 Framework and “Health & Well-Being”
2. Progress on HNJ2020 objectives
3. Summary of CHNA/CHIP priorities

DEFINE TOPIC AREAS

1. Old way: many topics, focused on end points (diseases, etc.)
2. New way: fewer topics, more upstream (prevention)
3. Examples of what can go into various topic areas

HNJAC TOPIC AREA SURVEY RESPONSES

1. Combined 50+ choices into 11 topics
2. Top 5 topics:
   a. Healthy Communities/Environments/Neighborhoods; Physical Environment Risk Factors
   b. Increase Access to and Availability of Affordable, Quality Clinical and Preventive Health Care
   c. Promote Healthy Beginnings/Childhoods; Maternal, Infant, Child, and Family Health
   d. Demographic and Socioeconomic Characteristics/Factors
   e. Support Healthy Behaviors/Living

TOPIC AREA SET SELECTION

1. Access to Quality Care
2. Healthy Communities
3. Healthy Families
4. Healthy Living
5. TBD via video conference call later this month

HNJAC ACTION TEAM ASSIGNMENTS

1. Based on your areas of expertise
2. e-mail forthcoming

ACTION TEAM RECRUITMENT
1. Aim for 6-10 members each
2. HNJCC to draft job description

**DETERMINE FUTURE HNJAC MEETING SCHEDULE**

1. Monthly
2. Intermediate call to be scheduled for mid-October to determine Topic Area #5.

*See meeting slides for details.*