

Prevention and Wellness Trust

Ch. 224 of the Acts of 2012

**Prevention and Wellness Advisory Board**

DPH Public Health Council Room

March 12, 2015

**Meeting Minutes**

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**Board Members present:**

Lori Cavanaugh

Robert Bruce Cedar

Catherine Hartman

MaryLynn Ostrowski

Sen. John Keenan

David Hemenway

Stephanie Lemon

Rep. Jeff Sanchez

Ashlie Brown

Heidi Porter

Keith Durham

Susan Servais

Sen. Jason Lewis

Rep. Kate Hogan

Aron Boros

Rebekah Gewirtz

**Board Members not present:**

Paula Johnson Peter Holden

Sen. James Welch Karen Regan

Rep. Jen Bensen

**DPH and EOHHS staff presenting:**

Monica Bharel, DPH Commissioner

Claire Santarelli

Jenna Roberts

Tom Land

Carlene Pavlos

Laura Coe

Ashlie Brown

Laura Nasuti

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**Introductions and Meeting Overview**

* Commissioner Bharel introduced herself as the new commissioner and Advisory Board Chair: PWTF/PWAB is a cornerstone of effecting change in healthcare system with emphasis on health disparities, with a reputation as an impressive program.
* Board member introductions.
* *Lynn Ostrowski - M*otion to accept December meeting minutes, *Stephanie Lemon* - seconded. UNANIMOUS
* *Carlene Pavlos* provided overview of meeting objectives and content.

**Evaluation Contract Update**

* *Jenna Roberts* provided evaluation contract update, discussing the process for selecting an external evaluator.
  + Competitive bid process through online CommBuys.
  + Three organizations submitted applications, meeting minimum qualifications.
  + Many members of DPH, as well as Ashlie Brown and Lynn Ostrowski from PWAB and a representative from each grantee partnership, attended the review session.
  + Harvard Catalyst was highest scoring and awarded the contract.
* Contracts will be signed between Harvard and the grantees; DPH is facilitating an MOU between all parties, including DPH.
* DPH will refine project plan with Harvard, kicking off this spring.
* Looking to establish evaluation advisory workgroup with PWAB participation.
* *Stephanie Lemon* – volunteered to be involved in the workgroup.
* *Tom Land* – Asked if there were any questions about the proposal submitted to help PWAB members understand how to integrate with it.
  + Tom transitioning to consulting role for PWTF; Laura Nasuti overseeing day-to-day evaluation.
  + Strength of selected application:
    - Some commonalities across applications, but Harvard Catalyst had a focus on clinical attributes. A lot of MDs and statisticians, but also a team focused on making data accessible to do the evaluation. With others, we were not sure we could get an answer within three years. Harvard will use MDPHnet to pull in data from across the state, which gives us great confidence that the interventions funded by PWTF will show progress. Most importantly, for the legislature it can demonstrate that the program can deliver on what it set out to do.
* Discussion regarding the evaluation, creation of an evaluation committee and what information the PWAB would like to see in the final report.
* *Lynn Ostrowski* volunteered to participate
* DPH to send out an email request for membership to evaluation committee.

**Worksite Wellness Update**

* *Claire Santarelli* – Overview of Worksite Wellness: DPH is looking for vendors who can demonstrate experience building capacity within organizations. Research indicates it can take 3-5 years for worksite wellness to take hold within an organization, but this money should help speed that up.
  + Looking to help organizations evaluate and manage their own data.
  + Selecting a vendor from the MSA for the evaluation piece; received 43 questions to date.
  + Will score for experience in collaboration to achieve common goal. This is unique in its requirement that DPH be heavily involved. Also want to see applicants who could recruit businesses across the state, including those that are hard to reach.
  + Also need the capacity to handle hundreds of contracts simultaneously, as well as subject matter expertise, and a history of working to develop infrastructure around worksite wellness.
  + Decision to be made in the next few weeks.
  + Question has been raised around ACA incentives. Businesses’ incentives can be tied to insurance premiums, and it is up to the discretion of the employer if they offer a reward or penalty for their employees.
  + Will continue to discuss this topic at future PWAB meetings.
* Discussion of the roll out:
  + Part of the selection process and part of the roll out is around health equity impact.
* Who are hard to reach businesses?
  + Small businesses, which is no more than 200 employees. We are also talking about the low wage workforce, which traditional worksite wellness does not reach.
* DPH will be gleaming literature and will provide a small degree of reading to provide background on this subject.
* What is the current tax incentive?
  + The program is still in place. We’re trying to ensure some of those businesses that go through the worksite wellness program and will be able to be a part of that tax incentive program. They can get both, provided there is a separate investment.
* DPH has been engaged in workplace wellness initiatives with pilot companies. Will we see any of that data and how are you taking that into account?
  + Working on Wellness started in 2008, and we are absolutely taking that into consideration.

**Intervention Successes**

* *Carlene Pavlos* – overview of the nine partnerships:
  + They are all implementing programs.
  + There are four primary health conditions; all partnerships address at least two of these, and a number of them are addressing more than that.
  + Whatever priority condition they are addressing, they must do interventions in all three domains of clinical, community, and linkages. We are also requiring grantees to do at least one bidirectional e-Referral.
  + We took a tiered approach to interventions through a substantive process based on likelihood to provide return on investment.
* *Laura Coe* – Innovation:
  + Metrowest is already talking about sustainability with their own advisory board. They also have four municipalities that are sharing resources such as CHWs, a tobacco treatment specialist, and a community calendar
  + Small group PCP practices are not generally doing a lot of CHW work, so thrilled to see engagement here – Berkshire, Quincy/Weymouth, Holyoke, and Metrowest are doing this. Watching closely to see how this works.
  + Central hub for coordinating all referrals – many partnerships came up with this model and are implementing it to ensure linkages are happening.
* Engaging with patients/clients and providers
  + In Quincy/Weymouth and Berkshire, they are talking about a reverse referral process. Most referrals are initiated in the clinical site, but they want to address what happens when they find someone in the community that needs clinical help.
  + Quincy/Weymouth and Lynn – targeting vulnerable populations with public housing and finding harder to reach populations and engaging them.
  + Offering programs in multiple languages – Quincy/Weymouth has multiple Chinese dialects and has just engaged with a new partner to help deliver these.
  + Also delivering interventions in new locations – offering interventions outside of just the CBO site; we are seeing this in Barnstable and Berkshire, where geographic range is large.
* Integration
  + In Lynn, there is a LISCW who sits in the CHC and works with patients, addressing any barriers.
  + In Worcester, there is integration of CHWs on clinical floor at CHC. They are in patient rooms with provider and a lot of room for meeting needs of patients.
  + Integrated workflows are a key piece. Seen some exciting examples, such as in the New Bedford partnership, where CHC staff, health department, and a home care organization collaborate.
* Pediatric Asthma
  + Looking to better integrate and share data with schools. Asthma has a learning collaborative that Mass Health participates in, as well as CDC grants.
  + The Worcester partnership has a legal organization to support tenant rights, which is also a different approach for this condition.

**Learning Session Update**

* *Laura Coe* – This March was our 4th learning session with 166 attendees; peer to peer learning and facilitated networking were the goals.
* There were condition-specific breakouts, as well as coordinating partner all day session.
* Use feedback from attendees to inform the agenda, as well as work with a planning committee comprised of grantees and DPH staff

**Sustainability and Board Member Engagement**

* *Jenna Roberts* – Coordinating Partners are very interested in engaging around sustainability, and DPH will establish a working group around this. In fact, this was a recommendation from the Coordinating Partners, as well as from the PWAB at our last meeting.
* *Carlene Pavlos* – Grantees are really looking for guidance on this. And at the last PWAB meeting, there was a lot of energy from this group on this topic.
  + Highlighting grantee work will be keep on the PWAB agenda moving forward
  + Sustainability proposal: PWAB workgroup with participation from grantees; ideal is one or two meetings before our June quarterly meeting.
  + The goal is to develop plans and recommendations for how the PWAB can advise on sustainability moving forward and how the PWAB would participate in that plan.
  + At the last PWAB meeting, board members discussed about the need to start conversations now with the legislature, with payors, and that it must be broader that just DPH engaging, but also the PWAB to help define the action and interaction.
* *QUESTIONS:*
  + *C*an members of the PWAB send a designee to represent them on the workgroup?
    - *Carlene* *Pavlos*: Yes, you can have designees, but those work groups are still subject to open meeting law and quorum, so once established, people need to attend.
  + *Rebekah Gerwitz* volunteered to participate
  + *Sen. Jason Lewis* volunteered to participate
  + *Lynn Ostrowski* interested in participating if the evaluation and sustainability workgroups are conducted in tandem for efficiency
* *Commissioner Bharel* – Request for motion to establish a sustainability workgroup.
  + *Susan Servais* - Moved. *Rebekah Gerwitz* – Seconded. UNANIMOUS
* *Commissioner Bharel* – Request for a motion to create an evaluation working group
  + *Lynn Ostrowski* – Moved*. Stephanie Lemon* – Seconded. UNANIMOUS
* *Carlene Pavlos*: Stephanie and Lynn agreed to volunteer for the evaluation committee. Request that other interested parties contact DPH PWTF staff as early as possible.
* *Jenna Roberts* – DPH will work to be strategic in terms of meeting dates / times.
* *Susan Servais* – Request to send PowerPoint slides from PWAB meeting.
  + *Carlene Pavlos* – DPH will send and provide print outs for future meetings.
* *Commissioner Bharel* – Any other feedback is welcome. Next meeting is June 18th, please note longer time.
* *Sen. Lewis* – Question about insurer / payor engagement.
  + *Carlene Pavlos* – Fallon is part of the Worcester partnership, but none have been involved on a sustainability level.
* *Sen. Lewis* – Noted that when PWTF was initially discussed in the legislature, the vision was that it would move away from public funding, which is in line with chapter 244, and in line with outcome-based global payments.
* *Commissioner Bharel* – Followed up this point by remarking it is also interesting in thinking about proof of concept for evaluation purposes.
* *Rebekah Gerwitz* – Motion to adjourn. *Stephanie Lemon* - Seconded UNANIMOUS
  + The meeting adjourned at 2:25 p.m.

Respectfully submitted,

Susan Svencer