Aurora Health Access (AHA)
2015 Kids Convening Phase II Meeting
Wednesday July 15, 2015 9:00 to 11:30
Aurora Strong Resilience Center 1298 Peoria, Aurora, CO

MEETING NOTES

*Participant list attached on last page.

Overview

Ellen Steiner, Children's Hospital Colorado, and Mariana Ledezma, Aurora Health Access, (Co-Chairs of the AHA Pediatric Access Work Group), provided an overview of the 2015 Kids Convening that occurred in May. They also described the process used to identify seven potential areas of focus that might be used to improve children's health in Aurora. The areas of focus identified were:

- Medical Homes
- Integration of Physical and Behavioral Health
- Preconception, Prenatal, Post-Partum Care
- Expansion/Coordination of Community Health Workers/Navigators
- Refugee/Immigrant Access Issues
- Expanding Health Literacy
- Social Determinants of Health

Setting Priorities

Denise Denton, AHA Executive Director, led the participants through a series of discussions and exercises to narrow down the potential areas of focus. She asked the group to identify areas where the AHA Work Group participants could make a measurable difference in children's health in Aurora within two years. Given that task, the participants identified these parameters:

- Be "*big enough to matter and small enough to be achievable;"*
- Be relatable and relevant to the partners currently at the table, who would take a lead in making this difference;
- Build on current/ongoing efforts, not re-invent the wheel;
- Must be able to show improvement ("movement of the needle") within a two-year time frame (the next Kids Convening, when we report on our progress/accomplishment, will be May 2017); and
- Should be measurable, so we know if we really made a difference.

Given these parameters, the participants agreed:

- The integration of behavioral and physical health is crucial, but probably not doable within two years; is getting a great deal of attention through the State Innovation Model (SIM) grant; and could probably be incorporated in other priorities.
- Preconception, prenatal, post-partum care are crucial, and getting attention through the Colorado Opportunity Project, which is being managed by several state agency partners.

- There was a great deal of interest during the Convening on the need for Community Health Workers and Navigators in Aurora to be able to coordinate with one another, and to share their lessons/best practices with one another and with the Aurora healthcare community. The participants agreed this is an area to which AHA might consider devoting attention and perhaps play a convening role.

There was agreement that health literacy might be an over-arching priority, but the group defined the term this way:

- Our healthcare "system" is complex/complicated/confusing for everyone – not just those with low literacy.
- The problem isn't just that clients don't understand the "system," but that the "system" does not understand the clients. There is work to be done on both sides.
- Examples were used such as understanding the value of a medical home; overuse of the emergency room, etc.
- For Aurora's refugee and immigrant populations, understanding the "system" can be even more challenging because of linguistic or cultural differences.
- We not only want to better understand the "system," but make the "system" work better for everyone.

After agreeing that health literacy would be the overall objective, the group identified three areas of focus for addressing this objective.

Goal: Improve Children's Health in Aurora by May 2017

Objective: Enhance Health Literacy in Aurora – Among Providers and Community Members

Area of Focus 1: Medical Homes

Area of Focus 2: Refugee and Immigrant Populations

Area of Focus 3: Social Determinants of Health

The participants then broke into three groups, each assigned one of these areas of focus, and were given the tasks of identifying a potential two-year objective, strategies for achieving that objective, potential partners, and sources of data. Each group was assigned a facilitator/recorder, who then reported on their discussions.

Area of Focus 1: Medical Homes

Facilitator: Danielle Gonzalez, Metro Community Provider Network (MCPN)

Participants: Danielle Gonzalez, Metro Community Provider Network; Steve Poole, Children's Hospital; Lynn Bakken, Metro Community Provider Network; Molly Markert, Colorado Access; Redonda DeLoach, Colorado Access; Joannie Muzzulin, Children's Hospital; Lida Galindo, Servicios de la Raza; Lauren Barocas, Colorado Access.

Two-Year Objectives:

- Decrease in rates of inappropriate ER usage
- Increase in knowledge and engagement with medical homes
- Increase in Well-Child Check Rates

Strategies:

- Surveys and Focus Groups in the community
    - Surveying to be done at places in communities where families are likely to be: libraries, grocery stores, schools, Aurora Fest, at clinics, etc…
- Developing consistent and competent language to use regarding medical homes
- Making sure kids with Medicaid are getting connected with Health Communities
- Develop literature to disseminate based on results of surveying

Partners:

- Medical homes in the community (MCPN)
- Children's Hospital
- CO Access
- Tri County
- Medical Students and School of Public Health
- Aurora Public Schools
- Aurora Mental Health
- Healthy Communities

Data:

- Using a survey to assess baseline levels of understanding in community, to be periodically re-measured after distribution of literacy
- Comparing frequency of inappropriate ER usage after distribution of literacy as compared with current frequency
- Comparing percentage of community affiliated with medical homes before and after distribution of literacy

Possible Areas of Focus for Survey

- General questions about understanding of medical homes and ER uses
    - What does a "medical home" mean to you?
    - Do you have a medical home?
    - In your opinion, what are things to visit the ER for?
    - Would you visit your primary care doctor for those same things?
    - Would you call your doctor before going to the ER?
    - Do you visit your doctor for preventative care and well child checks?
        - If not what gets in the way?
    - In your opinion, when should you visit your primary care doctor?
    - What are examples of things that get in the way of you visiting your primary care doctor more frequently?
- Assessing Trust
    - If you could call and talk with an RN before going to the ER, would you trust their advice?
    - Do you trust your primary care doctor?

- Perceptions around behavioral health
    - Do you access mental health services in your community?
    - What is your perception of mental health?
    - If there was a mental health professional in your primary care clinic, would you use them?
- Community Supports
    - Who do you seek out in your community for advice?
    - Do you have a community leader that you trust and respect?
- Capacity
    - This question is more directed towards partnering providers: what is the capacity of medical homes to take in new kids looking for medical homes?

Area of Focus 2: Refugee and Immigrant Populations

Facilitator: Amara Frumkin, Rocky Mountain Youth Clinics

Participants: Ivan Sosa, Aurora Community Connection; Kelly Nelson, Gary Community Investments; Rich McLean, Aurora Health Access/Together Colorado; Jiden Kai, Global Bhutanese Community Colorado; Ellen Steiner, Children's Hospital Colorado; Julie Gibbs, Children's Hospital Colorado;

Area of Focus:

This group is focused on increasing health literacy (health clarity?) among immigrant and refugee families in Aurora, Colorado, with a particular focus on health understanding regarding children's health. This group seeks to identify and address the main concerns that Aurora's immigrant and refugee families have pertaining to access to healthcare and health-related services for their children.

Two-Year Objectives:

- The initial objective is to collect data and stories in order to better understand the primary concerns of Aurora's immigrant and refugee families.
- The longer-term objectives will be formulated based on the concerns identified.
- It is likely that there will be a component of increased insurance enrollment, increased community understanding of resources available (as reported by community representatives), and increased involvement in healthcare activities (like AHA!).

Partners/Stakeholders: (Still need to contact these and get consent/gauge interest)

- Resident Leadership Council
- Asian Pacific Development Center
- African Community Center
- Eritrean Community in Colorado
- Catholic Charities
- AfrikMall
- Aurora Community Connection
- Local Restaurants/Shops

- Piton Foundation
- Rocky Mountain Youth Clinics
- MCPN
- Dawn Clinic
- Colorado Providers for Integration Network
- Children's Hospital Colorado
- Aurora International Welcome Center
- Ecumenical Refugee and Immigration Services
- Colorado Alliance for Immigration Reform
- Colorado Community Health Network/Covering Kids and Families
- Aurora City Immigrant and Refugee Task Force/Program Services
- University of Colorado Refugee Center
- Tri-County Health Department of Refugee Services
- Colorado Refugee Wellness Center/Aurora Mental Health Center
- Colorado Department of Public Health and Environment/Refugee Health Program

Data:

- Need data about numbers and origins of immigrants and refugees in Aurora (demographics, etc.)
- Need to classify immigrant/refugee – define terms
- Need to identify concerns/needs of communities through informational interviews
- Look at CRSP, Office of Refugee Resettlement, Enroll America, Piton Foundation, CDPHE, etc.

Plan/Timeline:

- July/August 2015 = data collection from identified sources
- August 2015= Immigrant/Refugee small group meeting. Identify and reach out to potential key informants, design interview questions to determine baseline health literacy. Global Fest in Aurora?
- September/October 2015 = Key informant interviews to obtain baseline health literacy information
- October 2015 = Meetings with Representatives from communities/Resident Leadership Council to gain insight into primary community concerns

Area of Focus 3: Social Determinants of Health

Facilitator: Callie Preheim, Tri-County Health Department

Participants: Lauren Barocas, Colorado Access; Deanna Chavez, Colorado School of Public Health; Shawnette Gillespie, Colorado Access; Betsy Holman, DentaQuest; Jennifer Newcomer, Gary Community Investments/Piton Foundation ; Callie Preheim, Tri-County Health Department; Justin Tarr, Colorado Children's Immunization Coalition

Two-Year Objectives:

- Inventory community groups and projects in Aurora with whom AHA could partner
- Create and distribute income/job-assistance brochure in collaboration with Colorado Community Partnership
- Support the creation of a virtual, interactive Health Landscape "map" through which different health resources could be queried.

Strategies:

Strategy	Sub-Strategy
Increase income	Support employment; Work with job-assistance organizations
	Work with Piton to expand knowledge of/participation in the Earned Income Tax Credit (EITC) program
Increase knowledge of support services: nutrition	Create/distribute food resource information (where can a person utilizing SNAP shop, where are healthy stores in the neighborhood, etc.)
	Partner with/support school nutrition programs
Partner with/support existing community-driven initiatives	Inventory community groups and initiatives
Increase community literacy around social determinants of health	There is a general misunderstanding around health and its root causes – the roles that political, economic, and social structures play. Materials generated by AHA and these work groups have the opportunity to provide clear language that clarifies this misunderstanding.

Partners/Stakeholders:

- Aurora Health Access
- Colorado Access
- Colorado Children's Immunization Coalition
- Colorado Health Institute (CHI) [to be recruited]
- Colorado School of Public Health
- Community Campus Partnership [to be recruited]
- DentaQuest
- Piton Foundation
- Tri-County Health Department

Data:

- Inventory community-based initiatives, programs, groups
- Inventory local stores (within to-be-defined geographic area) that accept SNAP
- Zip-code specific
    - Look at CHI's database

    - Piton's Longitudinal Employment Household Dynamics data
    - Look at who is using Piton's EITC services in specific zip codes, who eligible to use, plan who to target and how
- Other, to be determined

Next Steps

The members of the AHA Pediatric Work Group will take the information generated and develop a more detailed work plan and communications strategy that considers:

- How AHA can support the efforts of each group, and encourage their commitment and progress.
- How often the groups should meet individually, and as a whole.
- How to have accountability to one another – so we know progress is being made toward our two-year objective, while respecting the fact that participation is voluntary and most participants are already very busy.
- Leadership for each small group. Are facilitators willing to serve as leads for now?

Adjourn

Ellen closed the meeting, thanking everyone, and reminding them that if they want to join the AHA Pediatric Work itself, they can sign up through the AHA website. The next meeting of the Work Group will be Monday August 3rd. Small group facilitators will be in touch with their respective groups after the 8/3 meeting regarding proposed next steps.

Kids Convening – Phase II Meeting Participants

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