

HNJAC/HNJCC Meeting

February 19, 2020

10 a.m. – 1 p.m.

NJDOH H&A Building

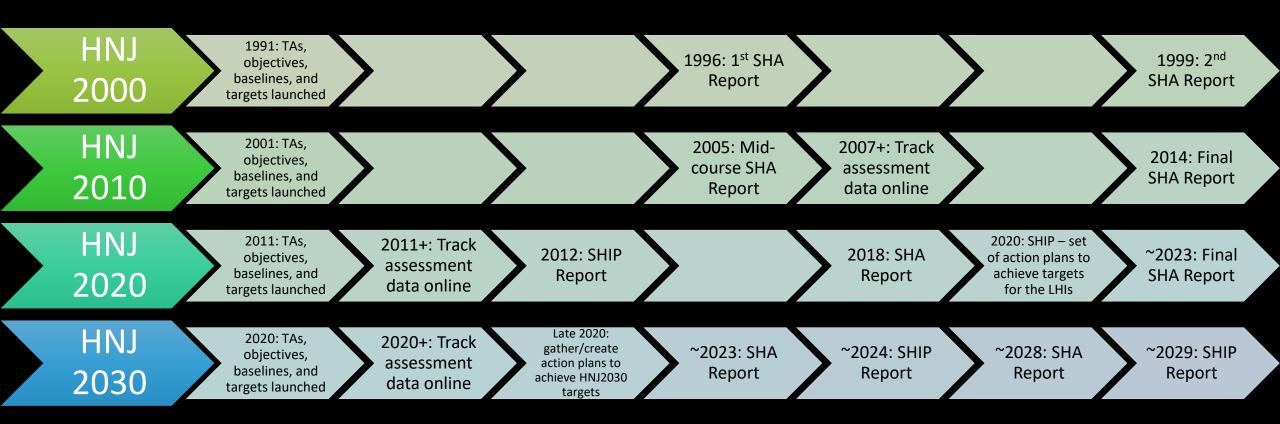
Board Room

Agenda

- 1. Overall game plan/timeline
- 2. Focus issue selection guidance
- 3. ACT structure
- 4. ACT meeting logistics
- 5. ACT next steps
- 6. Healthy Equity Community Conversations
- 7. Council member updates
- 8. DOH updates
- 9. Wrap up



HNJ Big Picture





ACT tasks for 2020

Narrow down Topic Areas
into focus issues

March—April

Select objectives to measure the focus issues

Find data sources and baseline data values

June

Gather action plans that are working toward achieving these targets, identify gaps, and brainstorm additional plans

Sept-December

April-May

Review guidance on:

- SMART objectives
- HP2030 objective types
- Objective selection
- Target setting

August

Set target values

Meanwhile...

Health Equity Community
Conversations (HECC) to gather
community health needs
information for each focus issue

April-May

Final objectives and targets published online

September

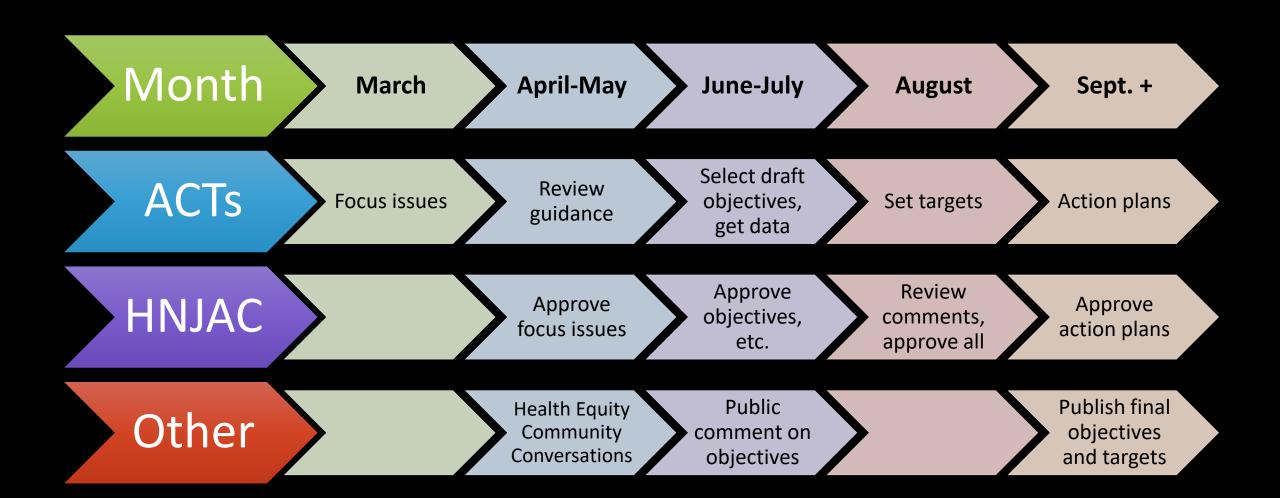
July

Public comment period for proposed objectives?

November

Population Health Summit/Culture of Health Conference to include HNJ2030 content and results of HECCs

Combined timeline for next 6 months



Focus Issue Selection Guidance

Refine the Topic Areas such that they reflect the "most important" aspects of health based on:



Reducing deaths



Reducing morbidity



Reducing disability



Reducing health disparity/increasing health equity



Increasing well-being

Source: Top of page 19 on

https://www.healthypeople.gov/sites/default/files/Advisory Committee Objectives for HP2030 Report.pdf

ACT Structure

HNJAC & HNJCC

- 3 HNJAC members (co-chairs)
 - 1-2 HNJCC members

DOH "sponsors"

DOH asst commissioners, executive directors, and directors of divisions/program related to that particular TA

Invited members

~ 20 external partners we specifically emailed and invited to be on an ACT

Applicants

External partners who apply online during February

DOH staff

To be assigned by senior staff after focus issues are solidified

ACT Meeting Logistics



You decide!



In-person,
webinar/video
chat, or phone
only call



NJDOH has no budget for HNJ so we can't host a large off-site gathering



NJDOH can provide conference rooms and, at most, the H&A auditorium



Each ACT can have different logistics

ACT Next steps

Now through Feb. 28

Select additional team members from applications

Now through March

Begin talking with team members!

- Discuss your Topic Area
- •Share the ideas the HNJAC brainstormed (i.e., what's online)
- •Brainstorm what may have been missed
- Decide which ideas stay and which ones go → your "focus issues"

March +

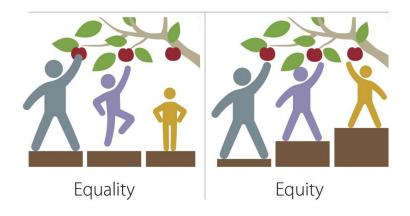
Keep adding qualified applicants to your team

June

Use HECC results to help select objectives

July +

Data, baselines, targets, action plans, implementation



Health Equity Community Conversations

Amanda Medina-Forrester

- Executive Director, NJDOH Office of Minority and Multicultural Health
- HNJ Coordinating Committee member

Background

Past conferences:

- Focused on racial/ethnic disparities and diseases/conditions
- Mostly one-way delivery of information (i.e., presentations)
- Mandated by legislation

This year:

- Allow marginalized communities to have the opportunity to provide input on health priorities (e.g., determinants of health)
- Conversations will help shape HNJ2030 goals/objectives
- Collaborative process with HNJAC guiding the HECCs

-rom HNJAC:

Suggested Priority Populations

INJAC:

- Sexual/gender minorities
- Senior population
- Immigrants
- Limited English Proficiency
- Former incarcerated individuals
- Veterans
- Homeless
- Racial/Ethnic
- People with disabilities

- Children with special needs
- Aging
- Opioid victims and/or caregivers
- LGBTQ+ Communities
 - Transgender population
- Youth racial/ethnic
- African American males (50 & up)
- Chinese leadership community
- Opioid affected communities
- Community Health Workers
- Geographic:
 - Southern Jersey
 - Rural communities
 - Northern Rural NJ no transportation & healthcare
 - Isolated communities (e.g., West Milford)

Facilitators and Community Leaders

Co-facilitators

- 1 HNJAC member
- 1 NJDOH staff
- Training will be provided

Community Leader

- Representative of the priority population at that HECC
- Act as "gatekeeper"
- Help facilitate conversations

HECC Next Steps



Now:

 Identify groups or subpopulations that are not well represented in public health priorities



April – May:

• Co-facilitate HECCs



On-going:

 Network with community stakeholders re: health equity and act as a HNJ2030/HECC "ambassador"

