

State of Florida Department of Health
Bureau of Family and Community Health
Healthy Start Redesign Process
January 6, 2012
Subject Matter Expert Committee Meeting Minutes

Subject Matter Expert Committee Members Attending

Kris-Tena Albers
Director, Infant, Maternal and Reproductive Health Unit
Florida Department of Health, Division of Family Health Services

Carol Brady
Executive Director
Northeast Florida Healthy Start Coalition, Inc.

Karen Coon
Healthy Start Program Coordinator
Florida Department of Health, Division of Family Health Services

Arianna Nesbit
Chief Executive Officer
Florida Keys Healthy Start Coalition, Inc.

Sharon Owens
Executive Director
Bay, Franklin, Gulf Healthy Start Coalition

Mary Jo Plews
Executive Director
Healthy Start Coalition of Hardee, Highlands, and Polk

Susan Potts, LCSW
Human Services Program Consultant III
Florida Department of Health

Debbie Strausser
Director of Nurses
Marion County Health Department

Cathy Timuta
Executive Director
Healthy Start Coalition of Southwest Florida, Inc.

Linda Young
Senior Community Health Nursing Supervisor
Indian River County Health Department

Consultant/Facilitator: Shelley Robertson

Judi Vittuci and Jane Murphy participated as a representative from the Redesign (Steering) Committee. Cathy Price and Carol Scoggins also participated from the Florida Department of Health. Dixie Morgese, Executive Director of the Flagler & Volusia Healthy Start Coalition participated as a member of the public.

Minutes

Topic: Welcome

Members were welcomed and roll was taken. The facilitator, Shelley Robertson, reminded participants that this is a public meeting and is being taped. She announced that the meeting would use the “raised hand” tool in WebEx but that she would also ask for comments for those participating only by phone. Public comment will be solicited throughout the call to allow for greater input.

Topic: Recap of Work to Date

The Facilitator provided a recap of the work completed to date by the Subject Matter Expert Committee including the following:

- ✓ Identifying the evidence-based standard
- ✓ Clarification of Healthy Start components and services
- ✓ Review of the Research Review and Summary
- ✓ Approval of methodology to review current Healthy Start
- ✓ Review of the Healthy Start Standards Documentation and Evaluation
- ✓ Development of the framework for redesign, including goals, target population, and services

Shelley Robertson noted that most of this work had been done since the end of September and thanked the members for their generosity in committing that amount of time.

Topic: Discussion of Key Questions

The facilitator then noted that only half of the Subject Matter Expert completed homework assignment #3, likely because it occurred over the holidays. From the existing responses, however, three issues were raised for discussion. Open-ended comments made throughout the survey suggest the following:

- The Subject Matter Expert Committee members should consider which of the curriculum best meets program outcomes such as reduced infant mortality, reduced low birth weight, reduced pre-term birth, and reduced maternal morbidity and mortality.
- Perceived challenges may be due to cost or staffing considerations.
- As any combining of curricula would impact fidelity, it is more likely that one of two curricula will be offered based on the specific situation (i.e. prenatal vs. interconception) and evidence-based risk appropriate care would be an additional service.

Comments from Subject Matter Expert Committee members and the public were as follows:

- The homework didn't ask for a review as to which program or curricula would best meet the desired program outcomes.
- Some of the items on the list are programs and some are curricula. The evidence-base is typically associated with a program that has a defined curricula as well as standards regarding staffing, duration, intensity, etc. Curricula can't be taken out of an evidence-based program and implemented as a stand-alone.
- Several people needed both more time and more information about the programs and the curricula to be able to assess them.
- Comments suggested that respondents began to think about cost and staffing (implementation) rather than the best model. This may have been due to the way feedback questions were written as they emphasized implementation and not goals.
- Dixie Morgese, a member of the public, suggested a more thorough review of the programs with pros and cons regarding retention, outcomes, implementation, etc.
- Programs should be reviewed as if money is not an issue in order to identify the best possible program, but a plan B may be included in the implementation plan.
- While the FSU curriculum "Partners for a Healthy Baby" was suggested, the currently available evidence does not meet the standard set by the Subject Matter Expert

Committee. This does not mean it is not effective, but that the currently available evidence is not at the required standard.

- It is important to “suspend reality” about implementation and also realize that most evidence-based programs serve fewer people, but more intensely, to get to their outcomes.
- There may be overlap between core programs addressing various time periods (interconceptual and prenatal), but also risk-appropriate care such as smoking cessation or depression in addition to the core program for either time period.
- The core program will likely focus on education.

The group noted that more information was needed to review the possible core programs.

Topic: Next Steps

The January 16th meeting will be cancelled while task forces work to gather more information. In addition, Robertson Consulting will work to document in more detail what the redesigned Healthy Start model will look like.

Public Comment

None.

Adjourn

The meeting was adjourned.