

**Meeting Minutes**  
**Statewide Health Care Transition Services Task Force**  
**For Youth and Young Adults with Disabilities**

**Teleconference Call**  
**July 15, 2009**

**ATTENDEES:**

Joseph J. Chiaro, M.D., FAAP, Children's Medical Services, FDOH; Task Force Chair  
David Wood, MD, MPH, UF Department of Pediatrics; Subcommittee Chair  
John Reiss, Ph.D., Subcommittee Chair, Institute for Child Health Policy at UF  
Janet Hess, MPH, Project Facilitator, USF  
Eleanor Cofer, RN, Children's Medical Services  
Kristi Chapman, Florida Independent Living Council, Inc.  
Martha Kronk, Shriners Hospitals for Children/USF

**CALL TO ORDER:**

The meeting was called to order at 8:00 am.

**DISCUSSION**

- Regarding, the proposed HP2020 HCT objectives, Dr. Jordan submitted the revised objective to Dr. Marie Mann. Dr. Mann was expecting the MCH transition group to have made a final decision by this time, so Ms. Hess will contact Dr. Jordan for an update.
- In addition to HP2020 national data, Ms. Hess presented a research opportunity that might help strengthen **state-level** health care transition data:
  - The Florida Office on Disability and Health (FODH) has funding to add disability-related questions to the BFRSS, a statewide telephone survey conducted annually among adults 18+. FODH expressed interest in exploring the issue of medical homes among adults with disabilities. We would be able to compare data for people with and without disabilities across multiple age groups. However, we may be not be able to include those questions until next year, as disability awareness/perception was the topic chosen as this years' survey topic.
  - In the meantime, we can pilot a set of questions through the UF Survey Research Center. The Center administers telephone surveys to about 200 FL households each month, so it would be a good way to conduct cognitive testing and refine the questions for the BRFSS next year. FODH has asked us to come up with a set of questions about medical homes. We weren't given a limit on the number of questions, so Ms. Hess will follow-up on that as well as the availability of county-level BRFSS data.  
  
*\* Follow-up is that we can pilot up to 10 questions through the Research Center, but are limited to 6-7 questions on the BRFSS. County-level BRFSS data are collected approximately every 4 years, though county-level sample size for young adults is likely too small to be useable. DOH BRFSS representatives will confirm.*
  - While we ideally would want to compare this data to other states, there currently is no standard set of adult survey questions about medical homes. Ms. Hess will continue to explore existing surveys; please contact her with suggestions on how best to structure a consolidated set of BRFSS questions.
  - Dr. Wood suggested we consider conducting our own survey to fill in information gaps from existing state and local data sets.

- The group discussed plans for the 2 local coalition pilot sites:
  - Consensus is that the MAPP planning process itself should take no longer than 6 months, plus 2-3 months additional preparation time.
  - Ms. Hess stressed the importance of choosing the pilot sites quickly, as that will determine which local planning council(s) are contracted to facilitate coalition planning.
  - Dr. Reiss asked Dr. Repetto at UF whether she had suggestions on rural communities and will follow-up with the group. Urban communities were suggested thus far are Hillsborough County and Duval County.
  - Dr. Wood commented that rural community coalitions will need to partner with an urban center for specialist referrals. Since Gainesville provides an urban hub for many rural areas, it was suggested as a potential site. The group ultimately decided that CMS should determine the pilot sites, based on location of CMS area offices and their knowledge about community need and capacity. Ms. Cofer will discuss with Dr. Sloyer and get back to the group with a recommendation.
- Ms. Hess followed up with Dr. Chiaro about partnering with local health departments in the coalition planning process. Deputy Secretary Kline, who oversees that DOH division, is leaving her position. Ms. Hess suggested we revisit a linkage when a new deputy secretary is on board, probably in about a month.
- Ms. Hess also asked Dr. Chiaro about the best approach to secure the FL Surgeon General, Dr. Viamonte Ros, as a program spokesperson for health care professionals. He thought she likely would be interested, but that we first need permission from the Governor's office. The process of getting her as a spokesperson will be tedious but can be done.
  - Dr. Chiaro will speak to her and suggested we send material to him as soon as it's available.
  - The first product will be a HCT training module for professionals developed by Dr. Reiss; Dr. Viamonte Ros could potentially tape an introduction to the module. As soon as we have a draft (after Labor Day), Ms. Hess will forward it to Dr. Chiaro for review.
- The group discussed development of the coalition planning guide, which will be based on MAPP and adapted to address HCT issues.
  - Dr. Wood suggested we schedule a face-to-face workshop/brainstorming session rather than try to walk thru the MAPP guide in teleconference calls. Ms. Hess confirmed there are resources to support a Task Force meeting.
  - Ms. Hess suggested we identify the pilot sites first so the local health planning council(s) that will be involved can attend the meeting. She will coordinate setting up a meeting date and location.
  - Dr. Reiss offered to help set up webinar capability for those who cannot attend in person.
- The next scheduled meeting is August 19 at 8A, though it might be cancelled or rescheduled based on a possible face to face meeting.

### **Adjournment**

Meeting was adjourned at 9:00 am.