

**Statewide Advisory Committee on
Eliminating Racial and Ethnic Disparities in Birth Outcomes
Evaluation Results – March 17, 2011 Meeting**

Ranking description: 4 – outstanding; 3 – good; 2 – needs improvement; 1 – poor

This meeting was effective in meeting its stated objectives.			Avg. 3.63	N=30
<p>Comments:</p> <ul style="list-style-type: none"> • There was not the data to support objective #3. Many of the programs presented were ongoing or newly completed, so it is not clear yet as to how they have affected the infant mortality rate, or disparities. • It was good at updating what's going on. • Many presenters. • The meeting was well organized and the presentations were well done. I enjoyed hearing about the different initiatives, and where they are in the area of implementation. It was nice to hear about the need for community collaboration/participation. • Objective #2 was limited. More written resources for more information on this data would have been helpful. • Glad to see the wide spectrum of topics, just hope they are not working in silos. This work requires strong partnership and collaboration. 				

Presentations were appropriate and relevant.			Avg. 3.73	N=30
<p>Comments:</p> <ul style="list-style-type: none"> • I especially liked learning about the life course initiatives. One question -- where are the public schools and the business communities. They should see themselves as part of the solution. The information presented by Kvale, Jones, Hashner and Gilmore also very informative. Especially ABC & Journey of a Lifetime Campaign. • Presentations from each of the HMOs ended up being a little redundant/long. • Excellent presentations/material. I was particularly impressed by Lifecourse Initiative. • Meeting was for a good cause. • Presentations were very informative, interesting. • Presentations were too quick. • Yes, key components of real factors for birth outcomes were discussed -- such as racism. In addition, real strategies to address this multi-factorial reason are addressed. • Excellent and focused. • Nice overview, but what was missing in a few presentations was the "how." Sounded good (almost scripted) but actions will demonstrate the true commitment. • With the four HMOs, is there a timeline per year when they should reach the 100 high risk pregnant members? Per evaluation, for the three year, have concern will not reach the 1,800 to the participants. • The update on the medical home report was not very specific in addressing the at risk population, nor could they articulate how outreach could happen to the high risk population. It did not fit with the rest of the populations. 				

The meeting format and environment were conducive to discussion.			Avg. 3.33	N=30
<p>Comments:</p> <ul style="list-style-type: none"> • I appreciated the discussion re: HMO Medical Home. I still don't understand how this is different from PNCC (prenatal care coordination). Sounds like a duplication of services. What about expanding PNCC. • I think the goal wasn't to have too much discussion. • Great setting. • Awkward seating. • Tight timelines. 				

**Statewide Advisory Committee on
Eliminating Racial and Ethnic Disparities in Birth Outcomes
Evaluation Results – March 17, 2011 Meeting**

- | |
|--|
| <ul style="list-style-type: none"> • Limited due to time constraints, but great for networking and resource sharing. • Very nice meeting space. • It was a little rushed for questions, but it is hard to balance allotted time with so much information. • Space was large and accommodating. |
|--|

I feel that my contributions were heard.			Avg. 3.16	N=18
---	--	--	----------------------	-------------

- | |
|---|
| <p>Comments:</p> <ul style="list-style-type: none"> • Slightly rushed in time available for questions. • Others felt comfortable asking the difficult question. • I was an active listener, but felt that some participants asked very valid questions that were not answered directly, or the respondent skated around the answer. • Agenda "too full." Not enough time for discussion/questions! Feel things were rushed! |
|---|

Overall, how would you rate this meeting?			Avg. 3.62	N=29
--	--	--	----------------------	-------------

- | |
|--|
| <p>Comments:</p> <ul style="list-style-type: none"> • Very good. • I liked that, for this meeting, there were no breaks and we just pushed through. A good use of time. • Excellent. Great topics and content. Wonderful community programs...glad I could attend. • Very good. • I also appreciate staying on time...thanks. • A little too compact. • Good networking opportunity; great resources. • Great starting point, but the community must be engaged and does not need to be tapped by each of these efforts independently. The efforts/programs/plan must collaborate now. |
|--|

Please share any suggestions for future topics, format of meetings, or any other additional comments:
--

- | |
|---|
| <ul style="list-style-type: none"> • Important to continue to have managed care leaders at the table. We have a responsibility to teach people where they are. This group could be powerfully helpful in reducing institutional racism by staying close to the MCOs and teaching them. • Excellent • One shared break (on the agenda) for networking would have been good. • Curious as to why there weren't more questions. • I would have liked to hear how recent legislative changes at federal and state levels (defunding of Planned Parenthood, proposed cuts to WIC and Head Start; cuts to BadgerCare and Medicaid here in Wisconsin) will affect these programs. • Good meeting. • Make more time for questions. |
|---|