

## ADDITIONAL FEEDBACK • HEALTH | AIMEE HARTER

- 1) This area (Health) is the foundation for the other goals, and yet it is the weakest in terms of depth. I think you have already identified the biggest reason for this: a health care provider needs to be added to the council.
- 2) Objective 1, about advocating for increased access to health providers, is very broad and could easily be split into smaller parts. Off the top of my head:
  - a. Advocating for health care professionals to be trained and retained in Nevada
  - b. Providing training to these health care workers to support the delivery of evidence-based care to families
  - c. Increasing access by supporting programs that insure children (CHIP, etc.) and advocating for Medicaid payments that will make it feasible for health providers to see more of these patients
  - d. Increasing access by addressing barriers such as transportation, copays, etc.

Much of the strategy discussed under this objective is focused on the first one, retention of providers, which in itself is a monumental task and is being aggressively pursued by other organizations. I actually wonder if ECAC needs to be involved in this, other than providing support at the policy level. Your expertise might be better leveraged on the other three tasks.

- 3) There were two ideas in line with the stated goals that I was surprised not to see any objectives addressing.
  - a. ECAC could foster communication between existing health care providers and community programs. From my perspective, families DO access the health care system. This may be the best place to raise awareness of all the high-quality programs, mobile health, health fairs, etc. Making health care providers aware of exactly when and how to refer to NEIS, HIPPY, or any number of other programs could make the process so much more seamless for these families.
  - b. Any program wanting to impact families with young children should pay attention to the importance of contraception and prenatal care. Maybe this is going too far "upstream" of ECAC's role, but if families are plugged in to these services, it is that much more likely that they will have a primary care provider for their newborn, and will stay connected with the health care system. In the spirit of "meeting families where they are" ECAC might support provision of these essential services in unconventional ways, such as through high school clinics, in health fairs, etc.