

# State Health Improvement Plan: Chronic Disease Prevention and Self-Management Workgroup

Meeting Minutes: Wednesday, January 8, 2020, 1-2:30 PM, via GoToMeeting

## **Workgroup Lead:**

Maureen Ward, Injury Prevention Coordinator, MT DPHHS

## **Workgroup Facilitator:**

Anna Bradley, DPHHS PHSIO Plans Coordinator

## **Workgroup Members Present:**

- Alyssa Johnson
- Erin Root
- Janet Kenney
- Kevin Dusco
- Mark Keeffe
- Shelia Cozzie
- Giselle Babiarz
- Hannah Yang
- Jennifer McCully
- Lora Wier
- Stephanie Morton
- Steve Schmidt
- Tara Ferriter-Smith
- Wendy Olson Hansen
- Kira Huck

## Welcome and introductions

1:00 to 1:15 PM

Anna Bradley reviewed the agenda for today's call, and then asked attendees to state their name, their organization, and answer the question: "What is a key 'cross-sector' partnership you need to engage for your work to succeed?"

Responses included:

- People who are involved with housing in their communities and the housing crisis.
- Partnering with law enforcement and coroners to make them aware of what is going on with the public health and the SHIP.
- Traffic Safety messaging and getting it out across sectors.
- Healthcare is an extremely important cross-sector partnership along with law enforcement.
- "On the ground" people collecting data: medical coders, EMT's paramedics, etc.
- Local elected officials.
- Professional organizations or representative organizations to get a message out to the community (i.e. partnering with Brewer's Association to get a message out to the public about impaired driving).

- Behavioral health workers.
- Social media partnerships with businesses and individuals in the community to highlight existing good behaviors that promote public health in the community.
- Community itself is a good thing to consider as a partner, since word of mouth between people is a very strong tool for positive messaging.
- Primary care and family practice physicians who communicate with families on best practices (i.e. similar to a vaccine schedule, families could have a child safety seat check schedule).

## General Updates

1:13 to 1:18 PM

- Many grant opportunities are available through FY 2020 from MDT in occupant protection, impaired driving enforcement, and non-enforcement impaired driving.
  - <https://www.mdt.mt.gov/visionzero/grants/>
- County Health Rankings and Roadmap organization recently awarded this workgroup \$4,900 to engage more local health departments in the SHIP conversation—see notes later in meeting minutes about this item.
- Activities upcoming in 2020:
  - Starting to work with a trainer on the Collective Impact Framework, which is the implementation framework for the SHIP, who will help us continue to think of how to best structure the workgroups.
  - An orientation packet on the SHA/SHIP for new members of the workgroup or for people who are stepping in for current members.
  - Quarterly newsletter – this will summarize the workgroup calls, convey action items and generally share information.
  - Continuing to investigate what kind of trainings are available to workgroup members that would help them in continuing to implement the SHIP.

## Focused strategy conversation

1:18 to 1:43 PM

Prevention and Health Promotion (PHP) Strategy 3: Increase awareness of high-risk driving behaviors. Stephanie Morton from Healthy Mothers Healthy Babies discussed car seat safety.

- Healthy Mothers Healthy Babies Overview:
  - Statewide nonprofit with a focus on prenatal to age three with some funding support from MT DPHHS.
  - Some recent work is focusing on perinatal or maternal mental health, workforce development, and public awareness raising on maternal mental health, PURPLE period crying, safe sleep, and car seat safety. Distribute car seats and safe sleep kits statewide.
  - Car seat distribution program.
    - Work broadly with PH departments and other family support personnel such as home visitors, early childhood specialists, nurses/doctors, shelters.
    - Example: PH nurse in Cascade County identifies a family she is working with needs a car seat. Either the car seat they have is not the correct size, or there is not one at all. She downloads a release form protecting her organization as well as HMHB from any liability, and also fills out a generic form with basic questions about where the car seat is going. The

- forms are filled out and e-mailed to HMHB, who orders a car seat from Wal-Mart. This seat is sent to the PH worker and installed by a certified child passenger safety technician.
    - Effort is made to keep the process as simple as possible to not unduly burden the people they are working with.
    - Last year distributed 321 car seats. Also, more than 850 Safe Sleep kits or cribs. Numbers have been increasing over the last two years.
- What is the law currently regarding children being safely restrained while riding in a car?
  - The current Montana state law is 6 and 60 (under 6 years of age and weighing less than 60 pounds). Law states that you must use it according to manufacturer's recommendations based on height and weight. However, many child passenger safety technicians do not believe this is safe enough.
- Among the people on the call, who else has similar car seat distribution programs? HMHB would like to know to get a better picture of who is doing what in the state of Montana, and whether any important bases are not being covered.
  - Safe Kids Missoula does some fundraising and grant writing for purchasing car seats. There are other programs doing this work locally, and they try to support these programs and fill in the gaps.
  - MDT does have a program which distributes over 500 seats throughout the state using NTSA funding. These seats are distributed to inspection stations throughout the state (41 stations) and also to counties without an inspection station but with an active technician group.
    - Seats from MDT are distributed once a year in August/September?
      - Process starts earlier in the summer; actual distribution is done by sometime in August or September so they can be passed out by Child Passenger Safety Week, which is in September.
  - Are the distribution sites Safe Kids works with getting seats from the MDT program?
    - Yes, many do, but some get them from other places.
  - Kalispell gets car seats from MDT, along with some grant funding, and home visiting program has reached out to HMHB and gotten car seats. Also, they work with Kalispell, Whitefish, and Colombia Falls fire departments and their car seat services. They support Lincoln and Lake Counties as well.
- Do the experts on this call believe that the current 6 to 60 law is currently being enforced?
  - In Missoula, they find the Highway Patrol does a great job with this.
  - Child seat safety laws in Montana are a primary offense, unlike adult seat belt laws, so there is an indication that it is taken pretty seriously by law enforcement.
  - As a former police officer, Steve Schmidt believes it is definitely a priority for law enforcement, however he also knows that often law enforcement will use their discretion on whether it is more helpful to educate, rather than penalize the family. Washington has just recently updated their child safety laws, which may have an impact in western Montana for people preparing to cross state lines.
- Is there any interest in continuing this car seat conversation in a smaller ad hoc workgroup at a later time?
  - Anna Bradley, Maureen Ward, Kira Huck, Steve Schmidt, Erin Root, Lora Wier, and Wendy (Kalispell) were all interested in being a part of that group.

## New Funding Opportunity

1:43 to 2:16 PM

Anna explained to the group what [County Health Rankings and Roadmaps](#) is: a system created by a

Public Health Institute from a different state which contains some ranking data by county for many counties in Montana. There are a couple different motor vehicle health objectives which fit into these rankings.

They've awarded our group \$4,900 to engage local public health departments in the conversation about motor vehicle crash prevention. An opportunity to work on pulling in additional public health partners and making them as educated and supportive of the work as possible.

- The application said that funds would be used to:
  - Logistics to facilitate an in-person meeting and to hire a facilitator to help
  - Travel sponsorships for local and tribal public health partners to attend
  - Identify ways to drive improvement in their communities, provide training on the collective impact framework, share existing resources they could be using.

Maureen Ward introduced the Safe States Resource Guide (2019), which is a comprehensive resource to educate public health partners on the “multi-level and systematic influences that contribute to the incidence and prevalence of injuries related to risky driving behaviors.”

- [Access to the full resource document](#)
- The guide contains a great deal of data and metrics which would be useful to the SHIP workgroup and local health jurisdictions to work on preventing vehicle crashes.
- A literature review was done to assess risky behaviors and strategies to ideally address more than one risky behavior at a time.
- A webinar is available – about 45 minutes in length – which further explains and gives specific recommendations. There is also a “boots on the ground” toolkit.
  - [The live recording](#)
  - [Access to the web-based tool supporting the full resource document](#)

Maureen is also the contact person for a new funding opportunity: the Driver Behavior Change Seed Grant, which will fund up to four projects at \$35,000 each. A team has been put together to get some of this funding to implement some of the strategies in this guide, including representatives from the following organizations:

- OPI
- MDT
- DPHHS

Regarding the \$4,900 in funding the workgroup has received and how to move forward:

- Are we aware of any places where similar programs have taken place, and could we take any ideas from them?
  - Montana is somewhat unique in that it has a large SHIP, which has many priority areas that have to be implemented by workgroups. Two possible starting points:
    - Low ranking counties (in terms of health rankings); how to pull them together?
    - What education is necessary? Evidence-based strategies? Existing resources or programs?
- Is there cross-over with the AMDD prevention specialists, Communities That Care, and local needs assessments?
  - Some, not all, local or tribal health departments conduct what are called Community Health Assessments, which are different from an assessment hospitals conduct called the Community Health Needs Assessment (CHNA). The Systems Improvement Office promotes coordination and technical assistance in conducting those assessments, and prevention specialists do engage with those efforts as well.
  - The System Improvement Office at PHSD has a liaison with AMDD specifically for

- bringing in prevention specialists and working on the Communities That Care initiative, and she will be involved in this effort as well.
  - Local CHAs, CHNAs, and health improvement plans (CHIPs or IPs) factored into the development of the SHIP overall.
- Is it a good idea to go into a county prior to trying to do outreach and investigate what the specific issues are within that county? Should we be engaging personnel from other departments to find out if that information is known already?
  - Some of this information is already in the existing CHA's and CHIP's. From the ones we have access to, there does not seem to be a big prioritization of injury prevention. However, there are a lot of ways to contact the local health departments, many of which are currently happening at PHSD, so that could be a tool used to find out some of these answers.
- Some potential resources to tap into:
  - AMDD personnel that oversee the Partnership for Success & Communities that Care grants, because they are in touch with community coalitions that might have ideas about this.
  - Youth Connections focuses a lot on risky behaviors and alcohol and drug use.
  - County DUI task forces would be another good potential resource. MDT can provide a list of contact information.
- Consider tapping into the previously discussed ad hoc workgroup on car seat safety as another topic for local health departments to discuss.
- Ad hoc subgroup to work on this project: Steve Schmidt, Kalu Onwucheka, Tara Ferriter-Smith, Anna Bradley, Maureen Ward.

Wrapping Up:

2:16 to 2:20 PM

Remember that communication is key to the workgroup's success, there is no need to wait for a meeting, reach out directly to each other if there is an idea or project discussed today that interests you.

There is interest about the policy strategy in the SHIP related to the primary seat belt law. The PHSD administrator, Todd Harwell, expressed interest in coming to the next workgroup meeting and discussing the policy dynamics ahead of the next legislative session.

Anna will send out Doodle polls for the people interested in the ad hoc subgroup meetings to take next steps on the action items identified.