

MT Public Health System Improvement Task Force Meeting Notes Wednesday August 21, 2019

Task Force Members Present: Cindia Ellis – Small County Member, Andy Hunthausen – MACo, Kari Smith – DEQ, Karen Sullivan – Large County Member, Lois Leibrand – Frontier County Member.

Task Force Members Absent: Rosemary Cree Medicine – Tribal Health Department Member, Hillary Hanson – AMPHO, Todd Harwell – MT DPHHS, Kristin Juliar – MORH/AHEC, Jennifer McCully – Medium County Member, Dustin Schreiner – MEHA, Lora Wier – MPHA, Tony Ward – UM.

Other attendees: Michele Henson – MHCF, Natalie Claiborne – MORH/AHEC, Kerry Pride – Local and Tribal Support Program PHSIO, Alexis Wolf – MT Workforce Development Group Coordinator, Terry Ray – PHSITF Coordinator, Anna Bradley – State Health Improvement Plan Coordinator.

State Health Improvement Plan Implementation Update – Anna Bradley

- 113 individuals representing 89 unique groups participating across the four workgroups
- Quarterly 90-minute meetings
 - First round of meetings held in May/June
 - Motor Vehicle Crashes, May 21, 14/25 attendees
 - Chronic Disease Prevention and Self-Management, May 31, 12/26 attendees
 - Healthy Mothers, Babies, and Youth/ACEs, June 7, 21/45 attendees
 - Behavioral Health, June 11, 23/43 attendees
 - Next round of meetings being held in September
 - Chronic Disease Prevention and Self-Management, Sept 6, 10 to 11:30 AM
 - Motor Vehicle Crashes, Sept 10, 2 to 3:30 PM
 - Behavioral Health, Sept 13, 2 to 3:30 PM
 - Healthy Mothers, Babies, and Youth/ACEs, Sept 24, 1:30 to 3 PM
- Standing agenda items:
 - Data presentation—new in-depth analysis of existing data or newly available data
 - Recent developments in the field—newly available resources, changing priorities, updates, etc.
 - ACEs—the cross-cutting strategy will have a spot on the agenda for any relevant updates to be shared with each group, but the bulk of the discussion will take place in the Healthy Mothers, Babies, and Youth workgroup
 - Focused strategy discussion—pick one or two strategies that are most relevant to the workgroup members to focus the conversation on
- Workplans developed—show a snapshot of who in the group is working on what strategies
 - Don't yet indicate "ownership" of a strategy or specific action items...
- Annual update process
 - Objectives are out to the various epidemiologists in our Division to be updated by the end of September, in time for the October State Health Improvement Coalition meeting
- Communication plan
 - Develop annual reports to be placed on the website and shared with the listserv

- Will promote at upcoming MHA and MPHA events, have presented to the SAAs and MHOAC, and to the Eat Right Montana Coalition. Would like to do more of in the coming year.
- Evaluation plan
 - Results-based accountability framework
 - How much have we done, how well have we done it, and is anyone better off?
- State Health Improvement Coalition meeting, Oct 23
 - Present updates to the plan (data and updated wording)
 - Feedback on the implementation process so far—many Coalition members are also on one or more workgroups.
 - Are members working on public health topics with other agencies?
 - How are partners addressing social determinants of health, if at all?
 - How can the SHIP better include social determinants of health?
 - Discussion of how do we measure “is anyone better off?”
 - Task Force members were asked to review the agenda for the Oct. 23 Coalition meeting and provide feedback.
 - If Task Force members have any feedback on how the SHIP workgroups are going so far, please let Anna know.
- Natalie Claiborne from MORH/AHEC discussed their Healthy Communities Conference and wondered if the conference would be a good place to showcase the State Health Improvement Plan. Anna agreed and is currently working with the conference organizer.
- The group discussed Social Determinants of Health at the State-wide level and how the SDoH are being address by local health departments and programs through cross sector collaborations.
- Karen mentioned the collaboration with the Public School District in Butte.
- Natalie- collecting data with the hospitals to include more questions related to the SDoH. MORH/AHEC can share some of the data they have collected. Karen mentioned Butte is undergoing 2020 community health needs assessments. SDoH questions are being added.

Montana Workforce Development Group Update – Alexis Wolf

- Discussion focused on reviewing progress on the Workgroup established in 2016 and the plan that started in January 2019.
- Social Determinants of Health and Behavioral Health were added as priority focus areas for workforce development since the plan was created.
- Alexis described the activities over the past year and the successes created through collaboration between many of the group members. The following events were discussed:
 - Montana Public Health Workforce Assessment – PHSD, MHCF, U of M
 - Montana Public Health 101 Online Orientation – MHCF, MPHA, PHSD, RM-PHTC, U of M
 - 2019 MEHA/MPHA Conference – MEHA, MPHA, PHSD
 - 2019 Managing Montana Conference – MEHA, MPHA, PHSD
 - Public Health Certificate Programs – PHSD, U of M
 - Public Health Management Certificate (July-June) – PHSD, U of W
 - Leading Across Boundaries Program – AMPHO, CCL, PHSD
 - Certified Public Manager Program (February to December) – PHSD, ASU

- Systems & Strategic Thinking: Social Determinants of Health (April/May) – PHSD, U of M
- Mental Health & Substance Abuse in Montana: the Role of PH (May) – PHSD, U of M, MHCF, AMDD, EMS
- Public Health Improvement Training – PHSD, MPHA
- Program Planning & Program Evaluation for Public Health (July) – PHSD, U of M
- The Public Health Workforce assessment is still under way for just a couple more weeks. The PHSD was awarded a grant by the Healthcare Foundation and University of Montana and University of Montana partnered with us on this to develop and distribute a Statewide Workforce assessment. As of this morning there a 67% completion rate.
- The Montana Public Health 101 online orientation project is a large two-year project funded by the MHCF and implemented by the MPHA. The PHSIO, RMPHTC, and UM are working with MPHA on this project.
- Terry mentioned the MTPHWFDG could distribute information directly to health department staff as updates or a list-serve.
- Karen mentioned a combination of both communicating with the Lead Local but also sending information directly to PH workers across the state. The Health in the 406 model seems to be working well. Facebook seems to be working well also.
- Natalie- MORH/AHEC noted the postings on their newsletter. Maybe there is a way to link newsletters/Health in the 406/list serve.
- Interest in training and last-minute cancellation/no-shows are current issues and Alexis is open to feedback if anyone had ideas to address.

Montana Public Health System Improvement Plan objectives review- Terry Ray

Objective 1.1 : Increase the number of local and tribal health departments that collaborate with local hospital/federally qualified Health Clinics (FQHC) and behavioral health partners to develop community health assessments (CHA) and community health improvement plans (CHIP).

- Significant activity over the past year and improvements over the past 5 due to investments by the MHCF and use of the CDC Block Grant resources.
- Focus is on the three sectors mentioned but communities are moving beyond to work with other sectors.
 - Education of health care community on population health and focusing more on prevention activities, especially as part of Community Benefit activities.
 - Inviting health care providers and hospitals to CHA/CHIP development and review convenings helps improve collaboration and synchronization of activities- as reflected in CHNAs, CHAs, CHIPS.
 - Grant to expand CTC model and assistance from AMDD to support the education of PH officials in mental health and substance abuse.
 - MHCF grant to support the education of health professionals in population health. -UM
 - Presentation and table at the MHA conference focused on population health and the SHIP. - PHSIO
 - Request from MPCA to participate in their October Population Health Summit meeting - PHSIO

- Public Health participation in the 2019 Integrated Behavioral Health Summit – MHCF supported
- Mental Health and Substance Abuse education for PH Officials – Great Falls and Miles City
- MHCF grant to support education of health care professionals in population health is a supporting effort. – UM
- Tuition reimbursement for various trainings related to behavioral health in a healthcare setting – MORH/AHEC
- MORH/AHEC is involved in an RCORP (rural communities opioid response program- HRSA grant) focused on coordinating behavioral/SUD services/resources.
- Natalie pointed out that they are pushing for collaboration between Hospitals and Public Health. Cost sharing, staff sharing, etc. will create efficiencies and produce a better product. Kerry discussed some of the topic areas from the National Association of Local Boards of Health (NALBOH) conference and some points from the Conference. Timing of the assessments- Some jurisdictions have gone on a 6 year cycle and the three year is a review but not a complete re-do of the CHNA/CHA. Working on CHA/CHIP together but each entity has their own plan (document) that meets their requirements. Platforms are used to communicate with the public on the work that is being done.
- Natalie pointed out that there is a HD and Hospital that produced a combined Strategic Plan. There may be other examples across Montana that the group is not aware of.

Objective 2.1 : Determine baseline and increase the opportunities and awareness for epidemiological assistance.

- Supporting a 6 county collaboration in North Central Montana – PHSIO . Through a grant from MHCF, the PHSIO is supporting a planning and performance management collaborative effort between Tool, Liberty, Chouteau, Glacier, Pondera, Teton.
- Supporting PH officials to work towards a Graduate Certificate in Public Health Epidemiology
- Objective being review by Office of Epidemiology and Scientific Support, PHSD
- No concentrated efforts to improve the capability and capacity at local health department level in this area. Support is provided as requested and needed, but most work is day-to-day business.
- There are training events completed and scheduled to help build skills in using data. Incorporated into the Graduate Certificate program at UM also.

Objective 2.2 : Research and analyze the possible roles of the joint-advocacy committee and partners currently involved.

- AMPHO, MPHA, MEHA, and PHSD are working on this. More work will be completed through support from the MHCF.
- This is in the organizational strategic plans of the organizations working on this objective.
- PHSIO work with Boards of Health is connected to this objective.

Objective 3.1 : Increase the number of health departments that have developed CHAs, CHIPs, and Strategic Plans from 44, 35, and 26 to 52, 50, and 54 respectively.

- Objective is being addressed through funding and TA by the PHSIO with grants from CDC and MHCF (\$150k)

- Identifying ways to engage smaller health departments that have not conducted this community convening and planning.
- Some education events are contributing such as the AMPHO PH leadership program, and the Certificate in Public Health.
- Current Numbers:
 - CHA- 45
 - CHIP- 37
 - Strategic Plan- 30
- 2019-2020 Grants and TA awarded
- CHA (Riverstone renewal)
- CHIP (Jefferson and Broadwater Counties)
- Strat Plan Flathead County (renewal); Strat Plan Technical Assistance – Valley County
- Systems Thinking class in Helena, April 2019 – PHSIO
- As a supporting effort, MHCF grant to support education of health care professionals in population health is. – UM
- Kerry noted that all HDs that requested funding to complete plans has received some funding. This year non-monetary TA support was added as an opportunity.
- Terry noted UM received a grant to support educating the health care community in population health and SDoH.

Objective 3.2: Increase the number of health departments that have quality improvement (QI) plans or have adopted QI methods into their agency guidelines/standards.

- Current Number of Counties that report they have a QI plan/program = 14 current within 5 years and 7 are currently working on one
- Missoula City-County (a renewal) and Rocky Boys awarded a grant for QI plan development.
- Annual 2-day Quality Improvement training event in Helena sponsored by the PHSIO. 10 local or tribal participants registered.
- The PHSIO has a Performance Management specialist and a Quality Improvement specialist that can provide technical assistance to local and tribal health departments.
- The QI specialist coordinates an Accreditation Coordinators Work Group which is heavily focused on Quality delivery of PH Services.
- Kerry Pride mentioned some changes to Accreditation processes. Kate Bender was at the NALBOH conference last week and she had a session focused on giving updates on PHAB 2.0 standards that will be released sometime in 2020. There's probably going to be a lot more focus on health equity and social determinants of health-related standards.

Objective 4.1: Determine baseline and increase the percent of public health managers that agree or strongly agree that they can effectively lead community health improvement planning processes and are viewed as the community health strategist for their community to 80%

- This question will need to be added to the PHSIO Lead Local Survey in 2020.
- AMPHO year-long PH leadership program supports this objective.

- PHSIO health improvement planning grants/TA and training events support this objective
- Terry mentioned that the question should reflect the Health Department as the Community Health Strategist, not the lead local. Health departments may hire individuals to carry out policy and planning functions. It does not need to be the Lead Local with all the skills. The competencies can be reflected across the health department.

Objective 4.2: Increase the percent of health departments that have workforce development plans.

- Update on lead local survey results. 13 current within 5 years, 9 currently working on one- PHSIO
- New grants to support workforce development planning- Cascade (renewal), Richland (renewal), and Lincoln County
- Workforce Survey participation will support this objective. - PHSIO
- Terry and Karen explained how the current state-wide survey will help many health departments with creating a workforce development plan.

Objective 5.1: Increase the number of boards of health (BOH) that meet all MCA statutory requirements.

Kerry Pride reviewed these activities:

- Lead Local Survey Results 2019
 - 46 out of 58 responded – Less than 60% meeting all MCA requirements
- Offering and completing in-person BOH trainings
- Online adult quick learn available and being utilized
- Former NALBOH president presenting at MPHA
- Offered lead local and a board member teams to attend the NALBOH meeting in August 2019- only one lead local and board member team applied
- Board of health meeting dates required on task orders for PHEP- PHSD is trying to figure out how to attend at least one BOH meeting a year. Someone from the State Health Department.
- Provided a table at the Winter MACo conference describing the role of BOH in community health improvement efforts
- PHSD will see if there is an opportunity to present at the Summer MACo Conference- HHS Committee.
- Kerry described how some other states are regulating who is on the local boards of health through either law or rules. Some state require multi-sector participation on the Boards of Health to support the cross-sector focus on health and integration. Some states do not allow elected officials on boards of health. Andy mentioned that participation of commissioners is required under Montana law.

Objective 6.1: Increase training to public health workforce to improve their knowledge, skills, and abilities on 1. how to target interventions to address social determinants of health and 2. what are the interventions available to health departments to address social determinants of health.

- Offered a systems thinking class in April – PHSIO
- PH leadership program- Community Chief Health Strategist- AMPHO
- Exploring ways Summer Institute can be used to build knowledge and skills related to addressing social determinants of health.
- Terry mentioned the PHSIO is having a difficult time finding experts in SDoH and incorporating SDoH into strategic planning. We are looking for experts that have examples of practices that are addressing SDoH. Many of the national organizations are funding grants focused on SDoH and building a base of knowledge, including best practices.
- Terry mentioned the Healthy Communities conference is the venue to pull together individuals at the state-wide level.
- Terry mentioned that the Wednesday session at Summer Institute will be focused on PH 3.0, Cross Sector Collaboration, and SDoH.

Member Organizations Announcements

- MACo Andy – Conference is coming up and it is an opportunity to discuss some of these issues with them.
- Terry mentioned the trip to Kansas and how their Health Department association is under their local government organization, like our MACo.
- Andy mentioned a planning grant awarded to Lewis and Clark County related to opioid abuse. Improve connection between FQHC, HD, jail system, pre-release center to help with the reintegration. The planning grant is looking at it from a public health perspective. One of 16 communities across the United States.
- Office of Rural Health- Natalie – Healthy Communities Conference information provided. Data is available through the Office- see the website. Tuition reimbursement grant for Behavioral Health Trainings. Seven different options for this reimbursement. Recently received an Opioid HRSA grant, more information will follow.
- Terry explained the capability at the University of Montana Law School to conduct policy analysis and evaluation. The Department of Public Administration and Policy is the lead.

Next meeting is October 23rd, 2-4 pm, Helena MT. In-person meeting. Meeting will follow the MT Health Improvement Coalition Meeting (10am-2pm).