

Public Health System Improvement Task Force Minutes

September 30, 2020 via Zoom

Purpose

Introduce new members, discuss changes to the “State Health Department” structure, and provide an update/seek feedback on public health infrastructure needs related to the COVID-19 response.

Action items

1. Small subcommittee of associations meeting regularly and will develop a plan based on the needs assessment conducted by MPH I that will be shared with the PHSITF.
 - a. One item of interest is a public information campaign on recognizing public health workers.
2. MPH I and ORH will connect on similarities between resiliency training materials that can be shared with the public health workforce.
3. Anna will schedule a meeting in November or December to approve the block grant budget.
4. Upcoming October 28 meeting from 10 to 12 PM for the State Health Improvement Coalition.

Attendees

- Bradley, Anna
- Hanson, Hillary
- Harwell, Todd
- Hunthausen, Andy
- Juliar, Kris
- Leibrand, Lois
- Moyer, Melissa
- Pride, Kerry
- Ray, Terry
- Sullivan, Karen
- Weiler, Emily
- Wier, Lora

Notes

New members include:

- Chelsea Jerke, Custer County Health Department and “Small County” representative,
- Melissa Moyer, Teton County Health Department and Association of Montana Public Health Officials (AMPHO) representative,
- Johnathan Owens, CSKT Tribal Health Department and Tribal Health representative

Hillary Hanson is now representing the Montana Public Health Institute (MPHI) on the Task Force. Anna Bradley is stepping into the role of Task Force Coordinator.

New structure for the State Health Department:

- Need to prepare for sustained response to COVID-19 for the foreseeable future.

- New Division built from the Communicable Disease and Laboratory Services Bureaus with Jim Murphy as the Administrator.
- The Public Health and Safety Division will continue to work with the new Division on collaborating across public health programs, as well as with the Division formed last year under Jamie Palagi (Early Childhood and Family Services Division) which now houses related maternal and child health programs, including the Family and Community Health Bureau.
- The three Divisions will function as the “State Health Department” for the reaccreditation process.

Montana Public Health Institute:

- New nonprofit with startup funding from the Montana Health Care Foundation to build local and tribal public health department capacity.
- Lots of potential opportunities, including assisting with grant writing and administration, providing guidance and feedback, providing facilitation services, etc.
- Provide nonpartisan data analysis and research for policy decisions.
- Current projects include:
 - Supporting the Addictive and Mental Disorders Division (AMDD) with MT DPHHS on grant administration,
 - Working with other associations (MPHA, MEHA, AMPHO, MPHTC, and PHSIO) to ensure MPHI is not duplicating efforts and to identify gaps for supporting the public health system during the pandemic. Examples of what the group is working on include:
 - Conducting a needs assessment with local and tribal health departments related to the pandemic,
 - Working with contractors to support immediate needs in local and tribal public health departments (policies and procedures, job descriptions, etc.),
 - Emotional wellness support for public health workforce, and
 - Developing a coordinated strategic plan based on the needs assessment to address the gaps.

Discussion on similar resources developed through Office of Rural Health and the Montana Public Health Training Center on resiliency that could be useful for MPHI and others to connect on. There is interest in a coordinated public information campaign of some kind to express gratitude for the public health workforce and educate the public on what public health is. Todd requested a note be sent by the Governor’s office thanking public health workers as well.

Overview of COVID-19 Response:

First cases arrived in March 2020. Initial challenges included adequate testing availability. Saw a decrease in cases in June and a recent surge now. Currently have adequate testing supplies and capacity in state and with out of state partners. Main issues currently are around how to support local and tribal public health workers and the stressed public health system. The state immunization program is working on plans to coordinate vaccine rollout when a vaccine becomes available.

Questions:

- What are current testing times?

- When specimens are collected, most are able to be processed by the state public health lab with a two-day turnaround time, Around 1,300 tests are processed each day.
- Specimens that aren't processed by the state lab are either processed in Bozeman or a reference lab in North Carolina, with a two- to three-day turnaround time.
- More rapid testing supplies have been sent to long term care and assisted living facilities.
- What is the current prioritization for tests?
 - If testing became an issue, tests would be run first for symptomatic patients, particularly anyone hospitalized or at risk for bad outcomes, and health care workers, followed by asymptomatic individuals. However, there is current capacity to run every test.

Discussion on day to day challenges being experienced by local and tribal health departments, including challenges with county attorneys, local law enforcement, and commissioners and burnout of public health staff.