Meeting notes: Foundational Public Health Responsibility Workgroup

DATE: 10.1.25

ATTENDANCE

Members present:
Joanne Erspamer (NE), Rod Peterson (SCHSAC), Sarah Reese (NW), Liz Auch (SW), Jeff Brown (Metro), Jodi Lien (WC), Mary Navara (MDH), Kiza Olson (SC), Jody Lien (West Central), Sagar Chowdhury (SE), Odi Akosionu-DeSouza (MDH), Rod Peterson (SCHSAC), David Kurtzon (MDH), and Ann Zukoski (MDH).

Participants present:
Kim Milbrath (MDH), Heather Myhre (MDH), Richard Scott (Metro)

Workgroup staff:
Ann March
Linda Kopecky

Purpose

Work on standards

Decisions made

No formal decisions made

Action items for members

- LPH workgroup members should be sharing talking points and the regional slides with regions to bring them up to speed on the FPHR workgroup, our charge and process. Ann and Linda are available to support and assist you if you'd like.
- Reviews materials to be emailed out and prepare to discuss at the meeting later this month (date and time yet to be determined)
- Next regular meeting: November 5, 8:30-10:00 a.m.

Talking points

- **Reviewing and Refining Standards**: The workgroup is reviewing both capability and area-specific standards to ensure they are clear, streamlined, and relevant. Members are exploring how to reduce redundancy between standards while maintaining important distinctions.

- **Demonstrating Fulfillment of Standards:** The group supports a mixed-method approach for demonstrating fulfillment, including some attestation, documentation, examples, and qualitative descriptions. The goal is to balance accountability with feasibility of reporting and the necessary oversight.
- **Accredited Agencies:** The workgroup discussed how accreditation aligns with foundational public health responsibilities. There is broad agreement that accredited agencies have already demonstrated many of the same standards and could be recognized as meeting fulfillment requirements through their accreditation process, particularly for the capabilities. A closer look is needed to confirm specifics around any possible standards that might be outliers of accreditation.
- **Recommendations:** Several broad recommendations have been formulated and reviewed by the workgroup. Details for each recommendation are under development, but there will likely be recommendations related to the following:
    - FPHR grant first and foremost should be used for foundational responsibilities, as the funding was intended.
    - Standards for demonstrating fulfillment of foundational responsibilities
    - Input into process for demonstrating fulfillment of standards for CHBs who want to use the FPHR grant on community-specific priorities.
    - Foundational definitions for each area and capability, along with definitions for key terms
    - Periodic review of standards, process, and definitions
    - Outstanding needs, such as clarifying roles and responsibilities, should be addressed through existing workgroups or new workgroups that are or may be under SCHSAC

Meeting notes

Reviewing Standards

The workgroup continued discussion from the previous meeting, focusing on reviewing the prioritized standards across capabilities and areas. It was discussed whether area-specific standards (e.g., infectious disease communication plans) should remain distinct or be folded under broader capability standards (e.g., communications capability standard for communication planning). Participants weighed the potential to reduce redundancy while being cautious not to lose necessary specificity.

Next steps: the workgroup will review standards for areas and related capabilities to determined where there are redundancies and where a standard should remain distinct for an area. A meeting later this month will be scheduled.

Needed discussion/review: Ensuring standards sufficiently include equity.

Demonstrating Fulfillment of Standards

The workgroup discussed options for how CHBs could demonstrate fulfillment of standards and provided additional input for possible inclusion into the recommendation.

Draft recommendations for input on process for demonstrating fulfillment of standards:

- MDH should balance the need for accountability with minimizing administrative burden on community health boards, ensuring that boards can demonstrate fulfillment while MDH can effectively review submissions.
- MDH should develop and utilize a mixed-method approach for CHBs to demonstrate meeting standards (attestation, documentation, examples, or qualitative descriptions to capture how standards are met).
- MDH should ensure turnaround time for approval of using FPHR grant for community-specific work is reasonable and factored into MDH's expectations for demonstrating fulfillment of standards.
- MDH and CHBs should collaborate to address gaps in submissions for fulfillment (ie. gaps or insufficient information do not result in automatic denial of request).

Accredited Community Health Boards

The group discussed if accredited community health boards should automatically be able to use the FPHR grant for community-specific priorities since many of the prioritized standards align with national measures from public health accreditation board. It was suggested that accreditation already requires rigorous documentation and review, and therefore, accredited agencies should be considered as having demonstrated fulfillment of standards based on their existing accreditation evidence. It was noted that accreditation involves extensive preparation, system maintenance, and verification through external review. Others highlighted that accredited agencies have already proven their capabilities. There was broad support for recognizing accreditation as largely equivalent to demonstrating fulfillment, with interest in confirming specifics (identifying if there are any prioritized standards that might be outliers to accreditation) before finalizing this approach.

Potential Recommendations

The workgroup continues to finetune recommendations. A compilation of broad potential recommendation based FPHR workgroup discussions was reviewed. It was suggested to include language encouraging the whole public health system to use standards as a guide and means to self-assess progress towards building a strong foundation, regardless of interest in pursuing use of the FPHR grant for community-specific priorities. This was added to recommendation 2 below.

Recommendation 1: Prioritize Building a Strong Foundation
FPHR grant funds should be used first and foremost to strengthen foundational public health capacity, consistent with the intent of the funding and findings from the 2022 assessment. Community priorities are important but cannot come at the expense of core foundational work.

Recommendation 2: Standards for Fulfillment of FPHR
To spend the FPHR grant on community priorities, a CHB that wishes to do so must meet standards (thresholds) for each foundational responsibility (areas and capabilities)

Regardless of pursuit of use of FPHR grant for community priorities, the standards can be used as a means to self-assess progress towards building a strong foundation for all health departments.

Recommendation 3: Assessment Process
The workgroup has recommendations for what MDH should consider for the process by which CHBs demonstrate fulfillment of standards (thresholds)

Recommendation 4: Shared Definitions and Criteria
The workgroup recommends adoption of common definitions for each responsibility, key terms, and criteria for what is considered foundational.

Recommendation 5: Ongoing Review
Given the evolving nature of public health, definitions and standards should be reviewed periodically to ensure they remain relevant. Frequency and body responsible for review are yet to be determined.

Recommendation 6: Future Work
Outstanding needs, such as clarifying roles and responsibilities, should be addressed through existing workgroups or new workgroups that are or may be under SCHSAC. Some areas (e.g., chronic disease and injury prevention, maternal and child health, access to and linkage with clinical care) may require dedicated ad hoc groups of MDH and local public health reps. Discussion about roles and responsibilities are already underway for a couple of the areas within existing workgroups.