

MEEKER-McLEOD-SIBLEY COMMUNITY HEALTH BOARD

McLeod County North Complex Large Conference Room
2391 Hennepin Avenue North
Glencoe, MN 55336

January 14th, 2016 9:00-10:30 Agenda

- 1. Meeting called to order
- 2. Welcome and Introductions
- 3. Additions to the Agenda
- 4. Approval of October 15th 2015 meeting minutes
- 5. CHB Packets Electronic versions
- 6. Election of Officers
 - a. Current 2015 Officers
 - Chair -Ron Shimanski (McLeod)
 - Vice Chair Beth Oberg (Meeker)
 - Secretary Bobbie Harder (Sibley)
- 7. Fiscal Officers Report-Colleen Robeck
- 8. Appoint Fiscal Officer for 2016
- Approval of State Auditor Engagement Letter
- 10. State Community Health Services Advisory Committee (SCHSAC) Report
- 11. Appoint SCHSAC Representative and Alternate
- 12. Appoint CHB Representative to the Healthy Community leadership Team (HCLT)
- 13. Appoint Legal Representative for MMS CHB
- 14. Conflict of Interest Policy to be completed and signed (enclosed)
- 15. Request of approval of Authorized Agent, CHS Director, Deputy Director
- 16. Review and Discuss Performance Management progress reports
- 17. Accreditation Update PowerPoint Kerry Ward MMS CHS Accreditation Coordinator
- 18. Authorities, Duties, and Responsibilities of a Community Health Service Dee Finley-MDH

- 19. Recommendation from the Integration Subcommittee Meeting meeting minutes attached
 - a. Approval for consultant
- 20. Review and Approval of the CHS Budget
- 21. Administrative Items
 - a) Approval of contracts
 - a. Approval of contract with Rhonda Buerkle from 1-1-16 to 12-31-16 at a rate of \$42/hour for various hours for Community Health Assessment and Community Health Improvement Plan. Approximately 10hrs/wk. Mileage will be reimbursed at the federal mileage rate.

10:30 to 12:30: Presentation (open to County Staff) by Janet Yeats, Director of Program, The Hoarding Project Chair, MN Hoarding Task Force

Adjourn

Attachments:

- October 2015 Meeting minutes
- Conflict of Interest Statement
- Authorized Agent Resolution
- Performance Management Update
- Authorities, Duties, and Responsibilities Handout
- Integration Subcommittee Meeting Minutes
- CHS Budget for 2016

2016 Meeting Dates

January 14th 9-11 at North

Complex Glencoe

April 14th 9-11:

April 14th 9-11: July 14th 9-11

October 13th 9-11 Large Conference Room

McLeod Solid Waste Bldg



Meeker-McLeod-Sibley Community Health Services

1805 Ford Avenue, Suite 200 Glencoe, Minnesota 55336 Direct Line (507) 766-3531 Fax Number (320) 864-1484

MEEKER-McLEOD-SIBLEY COMMUNITY HEALTH BOARD Meeting Minutes Thursday, October 15th, 2015 McLeod County Household Hazardous Waste Building, Hutchinson

Board Members

Beth Obergpresent Bryan Larsonpresent Mike Hubertypresent Dale Fenrichabsent Mike Housmanpresent	Ron Shimanskipresent Joe Nagelpresent Sheldon Niesabsent Paul Wrightabsent Doug Kruegerpresent	Jim Swansonabsent Bill Pinskepresent Gary Kruggelpresent Joy Cohrspresent Bobbie Harderabsent
Staff Present Diane Winterpresent Vicki Stockpresent	Jennifer Hauserpresent Rachel Fruhwirthpresent	Allie Freidrichspresent Colleen Robeckabsent

Guests Sue Abderholden, MPH, Executive Director of NAMI

Meeting called to order by Ron Shimanski, McLeod County Commissioner.

1. Welcome and Introductions- A big WELCOME to Jennifer Hauser the new McLeod County Public Health Director!

Additions to the Agenda- additional contracts to discuss during agenda item #11. Motion by Bill Pinske, seconded by Mike Huberty and carried.

- 2. Approval of July 9th, 2015 meeting minutes Motion by Beth Oberg, seconded by Mike Huberty and carried
- Fiscal Officers Report-Colleen Robeck Allie reviewed CHS 2015 Statement of receipts and disbursements as of September 30, 2015. Motioned to approved Bill Penske, seconded by Doug Krueger and carried.
- 4. Discussion on Draft Budget Draft 2016 CHS budget and LPHA, TANF and MCH allocation budget reviewed. Errors were identified. Will work with McLeod County Auditor staff Colleen Robeck to address errors. Discussed various funding formulas for grants and differences in allocation based on grant specifics.
- 5. Update on CHS Integration A brief recap of the meeting with Sandy Tubbs and Sharon Braten from Horizion was provided. Sandy and Sharon provided a lot answers and insight based on their integration process. Based on this discussion MMS CHS can consider revising timeline of integration. Discussed having each county pass a resolution stating support of exploration of full integration. Template of resolution was provided by Sandy and Sharon. Resolution approval will be put on upcoming board meetings.

6. Updates

Allie reviewed handout Community Health Board Updates October 15, 2015. (See attachment).



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- Community Health Assessment Process- Hospitals are due in 2016.
- Community Opinion Survey- Commented on paper copy option and the need for staff to disseminate.
- Customer Satisfaction Survey
- Healthy Communities
- Performance Management- staff continue to work toward objectives, tweaking as necessary
- Strategic Plan- will be revising strategic plan in 2016

7. Data Sharing

Allie reviewed MMS Data book highlighting some interesting points of data. This workbook showcase results from the community health behavior survey that was disseminated in October of 2014. The Hutchinson Leader wrote an editorial on Binge Drinking based on the results of this survey. Will continue to use this data to guide policy decision and implementation of best practices in public health. This data book is on the CHS website.

Also reviewed the 2014 PPMRS report. MMS CHS fell slightly in ranking for the national standards. This was because the questions were based on the 1.5 Version of the national standards and MMS CHS is still working on 1.0 version. Highlighted achievement: increase in QI maturity score. Also highlighted area of improvement needed: immunization rates.

8. Update on Accreditation Next Steps

Kerry Ward, Accreditation Coordinator provided information on next steps for accreditation. Site visit is scheduled for January 26 and 27th. There is a required meeting with the Community Health Board. All board members are invited to attend. Staff will be reaching out for personal invites to assure we have attendance at this meeting. A

9. Administrative Items

a) Approval of contracts:

- i. Joanne Moze Missing information on hourly rate. Motion made by Mike Housman to approve contract once hourly rate was added seconded by Beth Oberg, carried.
- ii. Follow Along Program
- iii. Heb B and IPI visits- amendment
- iv. Women, Infants and Children (WIC) Peer Breastfeeding Grant
- v. Statewide Health Improvement Program (SHIP)
- vi. Child and Teen Checkup –amendment
- vii. Temporary Assistance for Needy Families (TANF)

Items ii- vii were approved together. Motion by Bill Pinske, seconded by Bryan Larson and carried.



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Presentation Sue Abderholden, MPH, Executive Director of NAMI Minnesota presented information about mental health and stigma. Followed by additional information on the work of the local mental health subcommittee.

Adjourn

Attachments:

- **Draft Budget**
- July 2015 Meeting minutes
- **Updates Document**
- Performance Management Report
- MMS Data Book Introduction Document
- PPMRS Report
- Joanne's contract

Adjourn- Motioned by Joy Cohrs Motion Carried. Bobbie Harder, Secretary

> 2015 Meeting Dates January 14th 9-11:40 April 9th 9-11:30 July 9th 9-11 October 15th 9-11(new date)

Conflict of Interest Policy Meeker-McLeod-Sibley Community Health Services

An official shall not engage in any official duties, private enterprise, participate in any professional activity or perform any act or service during or outside their official duties with the Community Health Services, which would affect the officials ability to perform the normal duties and responsibilities of their position, or which is adverse to the interests of Meeker-McLeod-Sibley Community Health Services. In determining whether such outside official duties or activities for private gain constitute a conflict of interest with public duties, or are inconsistent or incompatible with the public official duties, the following shall be considered;

- 1. The performance of an act in other than the capacity as an official which may later act directly to the control, inspection, review, audit or enforcement by said official for the Community Health Services is prohibited
- 2. The use of Community Health Services time, facilities, equipment and supplies or the badge, uniform, prestige or influence of Community Health Services official duties for private gain.
- 3. Receipt or acceptance by the official of any money or other consideration from anyone other than the Community Health Services for the performance of an act which the official would be required or expected to perform in the regular course of the official's official duties, or as part of their duties as an official.
- 4. Officials participating in compensated or non-compensated activities/volunteer work are encouraged to continue in such participation. If an official is participating in any compensated or non-compensated activity that may cause a conflict, the official should discuss the potential conflict with the Community Health Board, whose decision shall be final.
- 5. Failure to follow this policy by the Community Health Services Coordinator or Fiscal Officer may result in termination of the contract between the Community Health Board and the Coordinator or Fiscal Officer.
- 6. The Meeker-McLeod-Sibley Community Health Services Conflict of Interest Policy shall be reviewed yearly by the Elected Officials of the Community Health Board, the Community Health Services Coordinator and Fiscal Officer. The Original Statement of Conflict of Interest shall be signed yearly by the Elected Officials of the Community Health Board, the Community Health Services Coordinator and Fiscal Officer.

Original Statement of Conflict of Interest

Local Official for Meeker-McLeod-Sibley Community Health Services

Instructions

- This statement must be completed by each local official and it must be signed and dated. The signature indicates that the official understands and agrees to the Meeker-McLeod-Sibley Community Health Services Conflict of Interest Policy.
- This signed statement must be submitted to the Community Health Services Director within 80 days of the commencement of official duties.
- This statement may not be filed electronically.
- All information on this statement is public information.
- It is unlawful to use this information for commercial purposes.
- Questions regarding the content and/or purpose of this statement should be addressed to the Meeker-McLeod-Sibley Community Health Services Coordinator.

	Local O	fficial	
Name			Title of office held
Government Unit			Daytime phone
Street/PO Box			
City, State, ZIP			
Occupation	Princi	pal place of busir	ness
	Period Co	overed	
	, 20	to	, 20
	Certific	ation	
I,	ommunity Hea t with my curr	lth Services Conj ent official posit	flict of Interest Policy, and I am ion. I agree to inform the Meeker-
Signature of Local Official			Date

Any person who signs and certifies a statement to be true, but knows the statement contains false information, or who knowingly omits required information, is guilty of a gross misdemeanor.

RESOLUTION Meeker-McLeod-Sibley Community Health Board

The Meeker-McLeod-Sibley Community Health Board by virtue of its authority under Minnesota Statutes 145A, in accordance with the Board's Operating Procedures, and by this Resolution of the Board adopted at a scheduled meeting on January 9,2014, hereby appoints and authorizes the following persons to act on the Board's behalf and bind the board for the following purposes(s):

- A. To serve as the Board's authorized agent according to MN Statutes 145A, in communicating with the Commissioner of Health between Board meetings, including receiving information from the Commissioner and disseminating that information to the Board, as well as providing information to the Commissioner on the Board's behalf.
- B. To sign and execute, on behalf of the Board, contracts for funding and other administrative items under the following grant contracts administered by the Commissioner of Health or other granting agencies:
 - Local Public Health Grant
 - Maternal and Child Health Formula Special Project Grant (MCH) (MDH)
 - TANF Home Visiting (MDH)
 - Special Supplemental Food Program for Women, Infants, and Children (WIC) (MDH)
 - Family Planning Special Project Grant (FPSPG) (MDH)
 - Child and Teen Check-ups Administrative Services, (DHS)
 - Public Health Emergency Preparedness Grant (MDH)
 - Project Harmony-DHS
 - Immunization Grant MDH
 - Health Disparities Grant MDH
 - Newborn Hearing Screening MDH
 - <u>Statewide Health Improvement Grant MDH</u>
 - Healthy Homes

Telephone:

• Other grants/contracts and budgets

Name: Allie Freidrichs, Director

Address: Meeker-McLeod-Sibley Community Health Services

1805 Ford Ave SW Suite 200

Glencoe, MN 55336 (W): (507) 766-3531

Name: Diane Winter, Deputy Director

Address: Meeker-McLeod-Sibley Community Health Services

Meeker County Public Health 114 N. Holcombe Ave

Litchfield, MN 55355

Telephone: (W): (320) 693-5370

This resolution authorize	es the above-re	ferenced appo	ointees to ac	et on behal	f of, a	nd bind, 1	the Board	to the
extent, and for the purpos	ses, indicated in	this Resolution	on.					

Signed:	<u>01-14-2016</u>
Chairperson, Community Health Board	Date



Minnesota Local Public Health Act Summary of 145A

This document summarizes the Minnesota Local Public Health Act (MS 145A). This document is not a comprehensive summary of all public health mandates or authorities. The statute language can be found on the Web site of the MN Office of the Revisor of Statutes: https://www.revisor.mn.gov/statutes/?id=145A. This document is not a substitute for the advice of your jurisdiction's legal counsel.

contiguous counties, or an existing city CHB may establish a joint CHB with one or more contiguous existing city CHBs in the same county in which it is located. The CHB must have at least 5 members and must elect a chair and vice-chair and must hold at least 2 meetings per year. CHBs meeting these requirements are eligible for the local public health grant. Resources: Chapter 402. Human Services Boards: https://www.revisor.mn.gov/statutes/?id=402 Subd. 1: Develop and maintain a system of community health services. Enforce laws, regulations and ordinances pertaining to its powers and duties within the jurisdiction. Must identify local public health priorities and implement activities to address the priorities in the areas of public health responsibility. Must complete an assessment of community health needs and develop a community health improvement plan; seek community input on health issues and priorities; establish priorities based on community needs. Must implement a performance management process in order to achieve desired outcomes. Must annually report to the commissioner on a set of performance measures and be prepared to provide documentation of ability to meet the performance measures.	St	tatute Section	Summary
City Commissioner Community health board Community health services Community health services Community health services administrator Community health services administrator Community health service area County board County board County board County board County must take on the responsibility of a CHB or join a CHB. Must include 30,000+ within its jurisdiction or be composed of 3 or more counties. CHB or 402 Board may assign the powers and duties to a human services board. A county may establish a joint community health board by agreement with one or more contiguous existing city CHBs in the same county in which it is located. The CHB must have at least 5 members and must elect a chair and vice-chair and must hold at least 2 meetings per year. CHBs meeting these requirements are eligible for the local public health grant. Resources: Chapter 402. Human Services Boards: https://www.revisor.mn.gov/statutes/?id=402 Subd. 1: Develop and maintain a system of community health services. Enforce laws, regulations and ordinances pertaining to its powers and duties within the jurisdiction. Must identify local public health priorities and implement activities to address the priorities in the areas of public health responsibility. Must complete an assessment of community health needs and develop a community health improvement plan; seek community input on health issues and priorities; establish priorities based on community needs. Must annually report to the commissioner on a set of performance measures and be prepared to provide documentation of ability to meet the performance measures.	145A.01	CITATION	May be sited as the "Local Public Health Act"
County must take on the responsibility of a CHB or join a CHB. Must include 30,000+ within its jurisdiction or be composed of 3 or more counties. CHB or 402 Board may assign the powers and duties to a human services board. A county may establish a joint community health board by agreement with one or more contiguous counties, or an existing city CHB may establish a joint CHB with one or more contiguous existing city CHBs in the same county in which it is located. The CHB must have at least 5 members and must elect a chair and vice-chair and mushold at least 2 meetings per year. CHBs meeting these requirements are eligible for the local public health grant. Resources: Chapter 402. Human Services Boards: https://www.revisor.mn.gov/statutes/?id=402 Subd. 1: Develop and maintain a system of community health services. Enforce laws, regulations and ordinances pertaining to its powers and duties within the jurisdiction. Must identify local public health priorities and implement activities to address the priorities in the areas of public health responsibility. Must complete an assessment of community health needs and develop a community health improvement plan; seek community input on health issues and priorities; establish priorities based on community needs. Must implement a performance management process in order to achieve desired outcomes. Must annually report to the commissioner on a set of performance measures and be prepared to provide documentation of ability to meet the performance measures.	145A.02	DEFINITIONS	 ◆ City ◆ Commissioner ◆ Community health board ◆ Community health services ◆ Community health services administrator ◆ Community health service area ◆ Public health nuisance ◆ Public health nurse
POWERS AND DUTIES OF COMMUNITY HEALTH BOARD Develop and maintain a system of community health services. Enforce laws, regulations and ordinances pertaining to its powers and duties within the jurisdiction. Must identify local public health priorities and implement activities to address the priorities in the areas of public health responsibility. Must complete an assessment of community health needs and develop a community health improvement plan; seek community input on health issues and priorities; establish priorities based on community needs. Must implement a performance management process in order to achieve desired outcomes. Must annually report to the commissioner on a set of performance measures and be prepared to provide documentation of ability to meet the performance measures.	145A.03		 County must take on the responsibility of a CHB or join a CHB. Must include 30,000+ within its jurisdiction or be composed of 3 or more counties. CHB or 402 Board may assign the powers and duties to a human services board. A county may establish a joint community health board by agreement with one or more contiguous counties, or an existing city CHB may establish a joint CHB with one or more contiguous existing city CHBs in the same county in which it is located. The CHB must have at least 5 members and must elect a chair and vice-chair and must hold at least 2 meetings per year. CHBs meeting these requirements are eligible for the local public health grant.
 OF COMMUNITY HEALTH BOARD Develop and maintain a system of community health services. Enforce laws, regulations and ordinances pertaining to its powers and duties within the jurisdiction. Must identify local public health priorities and implement activities to address the priorities in the areas of public health responsibility. Must complete an assessment of community health needs and develop a community health improvement plan; seek community input on health issues and priorities; establish priorities based on community needs. Must implement a performance management process in order to achieve desired outcomes. Must annually report to the commissioner on a set of performance measures and be prepared to provide documentation of ability to meet the performance measures. 			·
 Must appoint, employ or contract with a CHS administrator to act on its behalf. This individual must meet personnel requirements established for CHS Administrator. Must appoint, employ or contract with a medical consultant to ensure appropriate medical advice and direction for the CHB. Subd. 3: May employ personnel. 	145A.04	OF COMMUNITY	 Develop and maintain a system of community health services. Enforce laws, regulations and ordinances pertaining to its powers and duties within the jurisdiction. Must identify local public health priorities and implement activities to address the priorities in the areas of public health responsibility. Must complete an assessment of community health needs and develop a community health improvement plan; seek community input on health issues and priorities; establish priorities based on community needs. Must implement a performance management process in order to achieve desired outcomes. Must annually report to the commissioner on a set of performance measures and be prepared to provide documentation of ability to meet the performance measures. Subd. 2: Must appoint, employ or contract with a CHS administrator to act on its behalf. This individual must meet personnel requirements established for CHS Administrator. Must appoint, employ or contract with a medical consultant to ensure appropriate medical advice and direction for the CHB.

1		
		Subd 6:
		◆ Must make investigations and reports and obey instructions of the Commissioner of
		Health to control communicable diseases.
		◆ Must participate in planning for emergency use of volunteer health professionals
		through the Medical Reserve Corps (MRC).
		Subd. 7: May enter a building for inspection.
		Subd. 8: Must remove or abate public health nuisances.
		Subd. 9: May seek an injunction to enjoin the violation of statute, rule or ordinance.
		Subd 10: Prohibited to hinder CHB, county or city from entering building where
		enforcement is necessary.
		Subd 11: Cannot neglect to enforce.
		Subd 12: Does not limit powers outlined in other laws.
		Subd 13: May recommend legislation.
		Subd 14:
		◆ Must ensure equal access to services.
		♦ Must not deny services because of inability to pay.
		Subd. 15: May appoint a member to SCHSAC.
		Resources:
		Community Health Assessment: http://www.health.state.mn.us/divs/opi/pm/lphap/
		Performance Management: http://www.health.state.mn.us/divs/opi/qi/ CUS Administrator Unadhooks http://www.health.state.mn.us/divs/opi/qi/
		CHS Administrator Handbook: http://www.health.state.mn.us/divs/opi/gov/chsadmin/ Medical Consultant: http://www.health.state.mn.us/divs/opi/gov/medconsultants/
1454.05	LOCAL OPPINANCES	
145A.05	LOCAL ORDINANCES	A county board may adopt ordinances related to:
		 Regulate actual or potential threats to the public health. Animal control.
		Regulation of waste.Regulation of water.
		 Regulation of offensive trades. Control of public health nuisances.
		Establishing a curfew.
		 Administer or enforce duties delegated by the commissioner of health.
		◆ Cities and towns may adopt ordinances relating to public health, but they must not
		conflict with or be less restrictive than those adopted by the county board.
145A.06	COMMISSIONER;	This section outlines the powers and duties of the commissioner of health. This is in addition
145A.00	POWERS AND DUTIES	to the duties outlined in other laws. This includes:
	POWERS AND DOTIES	
		Supervision of local enforcement Assistance to accompany to be able to accompany
		Assistance to community health boards
		Personnel standards
		Assistance to boards of health
		Deadly infectious diseases
		System-level performance management
		♦ Health volunteer program
		◆ Commissioner requests for health volunteers
		♦ Volunteer health practitioners licensed in other states
145A.61	CRIMINAL	This section outlines the commissioner of health's authority to conduct criminal background
	BACKGROUND	studies on MRC volunteers.
4454.05	STUDIES	
145A.07	DELEGATION OF	◆ The commissioner of health may enter into delegation agreements with the CHB to
	POWERS AND DUTIES	perform certain licensing, inspection, reporting and enforcement duties.
		◆ A CHB may authorize a city or county within in jurisdiction to carry out the activities of a
4470.00	4.00F0014F11F 0F	CHB. This agreement must be approved by the commissioner of health.
145A.08	ASSESSMENT OF	◆ May assess and recover costs for care to control disease or enforcement actions.
	COSTS; TAX LEVY	◆ A city council or county board that has formed or is a member of a CHB may levy taxes to
1	AUTHORIZED	pay the cost of performing its duties.

145A.10	STATE AND LOCAL	◆ A State Community Health Advisory Committee is established.
	ADVISORY	◆ The city councils or county boards that have established or are members of a community
	COMMITTEES	health board may appoint a community health advisory committee
145A.11	POWERS AND DUTIES	◆ A city council or county board that has formed or is a member of a CHB has the following
	OF CITY AND COUNTY	duties:
		Must consider the income and expenditures required to meet local public health
		priorities and statewide outcomes in levying taxes.
		May by ordinance adopt and enforce minimum standards for services provided
145A.131	LOCAL PUBLIC HEALTH	♦ Formula based on level of funding from 2003.
	GRANT	 Must provide at least a 75 percent match for the State funds received through the local public health act grant. Eligible match funds include local property taxes, third party reimbursements, fees, other local funds, donations and non-federal grants. Must meet all the requirements and preform all the duties in subd 3 and subd 4. Must comply with accountability requirements outlined each year. If CHB does not accept LPH grant, the commissioner may retain the funds. May use their local public health grant funds to address the areas of public health responsibility and local priorities developed through the community health assessment and community health improvement planning process.
		Resources:
		LPH Act/Grant: http://www.health.state.mn.us/divs/opi/gov/lphact/
145A.14	SPECIAL GRANTS	This section addresses the requirements of migrant health grants, Indian health grants, and
143M.14	JI LUML UNANIS	funding to tribal governments.
145A.17	FAMILY HOME	This section establishes a program to fund family home visiting program.
	VISITING PROGRAMS	

Meeker-McLeod-Sibley Community Health Services Integration Subcommittee Meeting Agenda

Date: <u>November 9, 2015</u> Time: <u>9:00</u>

Location: Southwest Initiative Foundation Glencoe PH office

Present: Meeker: Diane W. Paul V., Beth O, McLeod: Jennifer H. Ron S., Sibley: Vicki S., Bill P., CHS: Allie F

Guests:

Objective: Identify additional information

Discussion for need of consultant

Topic	Discussion/Plan	Action/Do	Follow up/Responsible Person/Deadline
Review previous meeting summary	Reviewed summary of meeting minutes		
Business Plan review Ideas presented	MT met with directors from Horizon to discuss and ask questions about how the integration process went in Horizon. A few take home points were shared 1) We are further along than Horizon when they started because of our work is already integrated, purchase of PH.Doc and our basic team structure. 2) Horizon's org chart is always evolving with staffing changes	The subcommittee recognized the need to hire a consultant to provide assistance during this research process of integration. Possible names of consultants were discussed- MT will f/u.	Subcommittee- will make a recommendation to hire a consultant at the Jan 2016 CHB MT- solicit proposals to present at CHB.

	3) Horizon transferred staff from county employment to Horizon CHB staff- numerous legal issues to address. Horizon also had unions. 4) Horizon hired two consultants a labor attorney and Springsted for policies and pay scale. Strongly recommended an attorney for a consultant. Other discussion items: • The organizational chart and office location ideas were presented as potential ideas of what integration could look like in 5-7 years, pie in sky. A lot of questions and concerns were discussed with these ideas. Discussion revealed there is not a common vision of what integration looks like. • A very simple integrated budget was shared, demonstrating revenues and expenses. There are challenges in creating an integrated budget- not knowing 3rd party reimbursements, determining county contributions, and additional administrative costs. Discussion revealed different assumptions regarding tax levy contribution.
Next steps	Recommendation will be made to the CHB in Jan 2016.
Next meetings	To be determined after the Jan 2015.
Respectfully Submitted:	Allie Freidrichs

Account Number	ACCOUNT DESCRIPTION	2014 Budget	2014 Actual	2015 Budget	2015 Actual	2016 Budget
82-849-000-0000-5426	Immunization Grant 93.268	(3,000.00)	(4,250.00)	(3,000.00)	(500.00)	(1,500.0
32-849-000-0000-6850	Collections For Other Agencies	3,000.00	4,250.00	3,000.00	0.00	1,500.0
Revenues		(3,000.00)	(4,250.00)	(3,000.00)	(500.00)	(1,500.0
Expenditures		3,000.00	4,250.00	3,000.00	0.00	1,500.0
Net	Immunization Grant	0.00	0.00	0.00	(500.00)	0.0
82-851-000-0000-5426	Phep Ebola 93.069	0.00	0.00	0.00	0.00	(3,000.0
82-851-000-0000-5420	Collections For Other Agencies	0.00	0.00	0.00	0.00	3,000.0
Revenues	Collections I of Other Agencies	0.00	0.00	0.00	0.00	(3,000.0
Expenditures		0.00	0.00	0.00	0.00	3,000.0
Net	Immunization Grant	0.00	0.00	0.00	0.00	0.0
82-852-000-0000-5301	Project Harmony Mofas	(160,000.00)	* * * * * * * * * * * * * * * * * * * *	(160,000.00)	* * *	* *
82-852-000-0000-6110	SALARIES AND WAGES-PART TIME	0.00	7,347.75	0.00	9,179.90	12,500.0
82-852-000-0000-6121	Personnel Wages	0.00	5,641.77	0.00	0.00	0.0
82-852-000-0000-6163	PERA-COUNTY SHARE	0.00	533.20	0.00	688.49	940.0
82-852-000-0000-6175	FICA-COUNTY SHARE	0.00	576.73 575.07	0.00	727.15 475.09	960.0 500.0
82-852-000-0000-6203	Communications	0.00		0.00 0.00	0.00	0.0
82-852-000-0000-6241	Printing And Publishing	0.00	58.49 16.301.32			20.000.0
82-852-000-0000-6265	Professional Services	0.00	-,	0.00	6,248.00	-,
82-852-000-0000-6335	Mileage Expense	0.00	1,093.42	0.00	3,598.52	4,000.0
82-852-000-0000-6336	Meals, Lodging, Parking & Miscellaneous	0.00	29.00	0.00	165.33	170.0
82-852-000-0000-6350	Other Services & Charges	0.00	1,006.44	0.00	452.78	0.0
82-852-000-0000-6353	Meeting Expense	0.00	296.83	0.00	0.00	0.0
82-852-000-0000-6360	Training Office Supplies	0.00	925.50	0.00	0.00	0.0
82-852-000-0000-6402	Office Supplies Collections For Other Agencies	0.00	159.20 132,976.04	0.00	23.47	40.030.0
82-852-000-0000-6850	Collections For Other Agencies	160,000.00		160,000.00	30,649.37	40,930.0
Revenues Expanditures		(160,000.00) 160,000.00	(120,667.00) 167,520.76	(160,000.00) 160,000.00	(76,448.00) 52,208.10	The second secon
Expenditures Net	Project Harmony	0.00	46,853.76	0.00	(24,239.90)	80,000.0
			.0,000.70	0.00	(2.,200.00)	0.0
82-853-000-0000-5280	Collections From Other Agencies	(2,213.00)	(3,861.00)	(2,213.00)	(1,883.00)	(1,883.0
82-853-000-0000-5336	Local Public Health Grant	(282,645.00)	(282,645.00)	(282,514.00)	(282,514.00)	(311,346.0
82-853-000-0000-5348	Home Visiting Tanf	(95,011.00)	(110,734.90)	(95,011.00)	(33,511.89)	(95,011.0
82-853-000-0000-5414	Mch Grant 93.994	(80,967.00)	(70,224.00)	(88,552.00)	(41,656.50)	(88,552.0
82-853-000-0000-5428	FOLLOW ALONG PROGRAM	0.00	(6,865.20)	(9,154.00)	(4,576.80)	(5,799.0
82-853-000-0000-5501	FEES FOR SERVICES	0.00	(40.00)	0.00	0.00	0.0
82-853-000-0000-5990	Refunds & Reimbursements	0.00	(146,647.74)	0.00	(100.00)	0.0
82-853-000-0000-6105	SALARIES AND WAGES-FULL TIME	0.00	44,222.11	0.00	51,730.56	82,100.0
82-853-000-0000-6121	Personnel Wages	0.00	42,930.47	0.00	0.00	30,000.0
82-853-000-0000-6153	HEALTH & LIFE INSURANCE-COUNTY SH	HAR 0.00	6,384.74	0.00	7,600.00	11,880.0
82-853-000-0000-6163	PERA-COUNTY SHARE	0.00	3,213.58	0.00	3,879.79	6,158.0
82-853-000-0000-6175	FICA-COUNTY SHARE	0.00	2,787.09	0.00	3,498.54	6,281.0
82-853-000-0000-6203	Communications	0.00	1,104.33	0.00	645.07	1,200.0
82-853-000-0000-6205	Postage And Postal Box Rental	0.00	19.60	0.00	69.41	0.0
82-853-000-0000-6245	Dues And Registration Fees	0.00	824.00	0.00	845.00	850.0
82-853-000-0000-6265	Professional Services	0.00	118,501.98	0.00	28,482.22	46,000.0
82-853-000-0000-6335	Mileage Expense	0.00	6,310.00	0.00	4,893.27	7,000.0
82-853-000-0000-6336	Meals, Lodging, Parking & Miscellaneous	0.00	3,448.10	0.00	3,454.96	3,500.0
82-853-000-0000-6350	Other Services & Charges	0.00	74,200.00	0.00	5,194.78	15,180.0
82-853-000-0000-6353	Meeting Expense	0.00	830.37	0.00	408.24	500.0
82-853-000-0000-6360	Training	0.00	65.00	0.00	3,178.56	4,883.0
82-853-000-0000-6402	Office Supplies	0.00	170.57	0.00	5.73	100.0
82-853-000-0000-6850	Collections For Other Agencies	2,213.00	0.00	2,213.00	0.00	0.0
82-853-000-0000-6855	Chs	282,645.00	227,028.65	282,514.00	49,507.74	143,152.0
82-853-000-0000-6859	Mch	80,967.00	56,760.20	88,552.00	15,471.09	67,834.0
82-853-000-0000-6860	Follow Along Program	0.00	6,293.50	9,154.00	1,525.60	5,799.0
82-853-000-0000-6871	Tanf	95,011.00	76,847.53	95,011.00	17,543.49	70,174.0
Revenues		(460,836.00)	* * * * * * * * * * * * * * * * * * * *	(477,444.00)		
Expenditures		460,836.00	671,941.82	477,444.00	197,934.05	502,591.0
Net	Local Public Health Grant	0.00	50,923.98	0.00	(166,308.14)	0.0
82-854-000-0000-5413	Wic Grant 10.557	(312,444.00)	(480,910.00)	(312,444.00)	(167,196.00)	(312,444.0
82-854-000-0000-5413	Wic Grant 10.557	312,444.00	604,872.77	312,444.00	161,196.00	312,444.0
Revenues	WIO .	(312,444.00)		(312,444.00		
Revenues Expenditures		312,444.00	604,872.77	312,444.00	161,196.00	312,444.0
Expenditures Net	Wic Grant 10.557	0.00	123,962.77	0.00	(6,000.00)	312,444.0
		3.00	. = 0,00=.11	2.00	(0,000.00)	0.0
82-856-000-0000-5338	Fpsp Grant	(49,300.00)	(96,921.45)	(79,837.00)	(13,058.74)	(110,202.0
82-856-000-0000-5990	Refunds & Reimbursements	0.00	0.00	0.00	(60.68)	
82-856-000-0000-6241	Printing And Publishing	0.00	1,603.64	0.00	0.00	1,000.0
32-856-000-0000-6260	Std Testing	0.00	2,320.00	0.00	1,080.00	2,400.
32-856-000-0000-6261	Physical Examinations	0.00	6,075.60	0.00	11,732.77	10,306.
32-856-000-0000-6265	Professional Services	0.00	1,500.00	0.00	0.00	0.
32-856-000-0000-6350	Other Services & Charges	0.00	0.00	0.00	810.00	0.
32-856-000-0000-6439	Prescriptions	0.00	16,723.70	0.00	3,772.56	16,727.
32-856-000-0000-6858	Fpsp	49,300.00	73,275.25	79,837.00	10,438.81	79,769.
Revenues	· r=r	(49,300.00)		(79,837.00		
		49,300.00	101,498.19	79,837.00	27,834.14	110,202.
Expenditures				, 0,001.00	<u> </u>	

Account Number	ACCOUNT DESCRIPTION	2014 Budget	2014 Actual	2015 Budget	2015 Actual	2016 Budget
82-857-000-0000-5301	HEALTHY HOMES	0.00	0.00	(40,000.00)	(12,068.12)	(40,000.00)
82-857-000-0000-6850	Collections For Other Agencies	0.00	0.00	40,000.00	12,068.12	40,000.00
Revenues		0.00 0.00	0.00	(40,000.00)	(12,068.12)	(40,000.00)
Expenditures Net	Healthy Homes	0.00	0.00	40,000.00	12,068.12	40,000.00
1101	ricularly ricinics	0.00	0.00	0.00	0.00	0.00
82-858-000-0000-5404	Early Hearing Detection & Intervention	(3,000.00)	(5,950.00	(3,000.00)	(350.00)	(3,000.00)
82-858-000-0000-6850	Collections For Other Agencies	3,000.00	6,100.00	3,000.00	350.00	3,000.00
Revenues		(3,000.00)	(5,950.00)		(350.00)	(3,000.00)
Expenditures	Forty Housing Detection & Intervention	3,000.00	6,100.00		350.00 0.00	3,000.00
Net	Early Hearing Detection & Intervention	0.00	150.00	0.00	0.00	0.00
82-859-000-0000-5280	Collections From Other Agencies	(6,000.00)	(6,000.00)	(6,000.00)	(6,000.00)	(6,000.00)
82-859-000-0000-6241	Printing And Publishing	0.00	478.00	0.00	0.00	0.00
82-859-000-0000-6265	Professional Services	0.00	1,495.00	0.00	0.00	0.00
82-859-000-0000-6350	Other Services & Charges	6,000.00	1,243.44	6,000.00	245.00	6,000.00
82-859-000-0000-6402	Office Supplies	0.00	4,983.14	0.00	0.00	0.00
Revenues Expenditures		(6,000.00) 6,000.00	(6,000.00) 8,199.58		(6,000.00) 245.00	(6,000.00) 6,000.00
Net	Healthy Communities	0.00	2,199.58	0.00	(5,755.00)	0.00
	,		,		(2)	
82-862-000-0000-5301	State Health Improvement Program (Ship)	(136,594.00)	(269,618.24)	(265,593.00)	(103,519.27)	(220,794.00)
82-862-000-0000-6121	Personnel Wages	0.00	60,125.25		37,374.00	11,760.00
82-862-000-0000-6203	Communications	0.00	517.38		367.79	0.00
82-862-000-0000-6245 82-862-000-0000-6265	DUES AND REGISTRATION FEES Professional Services	0.00 0.00	50.00 30,907.90	0.00 0.00	0.00 7,563.70	0.00 30,000.00
82-862-000-0000-6335	Mileage Expense	0.00	593.93		465.40	500.00
82-862-000-0000-6336	Meals, Lodging, Parking & Miscellaneous	0.00	0.00	0.00	34.45	0.00
82-862-000-0000-6350	Other Services & Charges	0.00	21.00	0.00	171.80	0.00
82-862-000-0000-6353	Meeting Expense	0.00	937.82		120.00	200.00
82-862-000-0000-6360	TRAINING	0.00	0.00	0.00	100.00	200.00
82-862-000-0000-6402 82-862-000-0000-6850	Office Supplies Collections For Other Agencies	0.00 136,594.00	598.79 188,910.37	0.00 265,593.00	61.09 53,921.95	0.00 178,134.00
Revenues	Collections I of Other Agencies	(136,594.00)	(269,618.24		(103,519.27)	(220,794.00)
Expenditures		136,594.00	282,662.44		100,180.18	220,794.00
Net	SHIP Grant	0.00	13,044.20	0.00	(3,339.09)	0.00
82-863-000-0000-5280	Collections From Other Agencies MOFAS	0.00	0.00	0.00	0.00	0.00
82-863-000-0000-5301 82-863-000-0000-6241	Printing And Publishing	0.00 0.00	0.00 0.00	0.00 0.00	(1,929.01) 56.82	0.00 0.00
82-863-000-0000-6336	MEALS, LODGING, PARKING & MISCELLANE		0.00	0.00	295.00	0.00
82-863-000-0000-6350	Other Services & Charges	0.00	0.00	0.00	295.00	0.00
82-863-000-0000-6353	MEETING EXPENSE	0.00	0.00	0.00	282.19	0.00
82-863-000-0000-6850	Collections For Other Agencies	0.00	0.00	0.00	1,000.00	0.00
Revenues Expenditures		0.00 0.00	0.00 0.00	0.00 0.00	(1,929.01) 1,929.01	0.00 0.00
Net	MOFAS	0.00	0.00	0.00	0.00	0.00
			****		****	
82-866-000-0000-5454	Bioterrorism Ep Grant 93.283	(59,202.00)	(60,813.96)	(84,000.00)	(44,730.36)	(81,773.00)
82-866-000-0000-6850	Collections For Other Agencies	59,202.00	66,831.50		19,047.75	81,773.00
Revenues		(59,202.00)	* * *		(44,730.36)	(81,773.00)
Expenditures Net	Emergency Preparedness	59,202.00	66,831.50 6,017.54		19,047.75 (25,682.61)	81,773.00 0.00
NGL	Linergency i repareuness	0.00	0,017.54	0.00	(20,002.01)	0.00
82-872-000-0000-5345	C&Tc State	(88,510.00)	(82,648.95	(88,510.00)	(41,377.27)	(101,707.00)
82-872-000-0000-5422	Child & Teen Checkups Grant (C&Tc)93.778	(88,510.00)	(82,649.03		(41,377.31)	(101,707.00)
82-872-000-0000-6350	Other Services & Charges	0.00	0.00		22.95	5,000.00
82-872-000-0000-6850	Collections For Other Agencies	177,020.00	181,920.74		82,731.63	198,414.00
Revenues Expenditures		(177,020.00) 177,020.00	(165,297.98) 181,920.74		(82,754.58) 82,754.58	(203,414.00) 203,414.00
Net	C&TC Outreach	0.00	161,920.74		0.00	0.00
e=		3.00	. 0,022.70	2.00	2.00	5.50
CHS Total Revenue		(1,367,396.00)	(1,831,446.47)		(870,927.94)	(1,564,718.00)
CHS Total Expenditures		1,367,396.00	2,095,797.80		655,746.93	1,564,718.00
CHS Total Net		0.00	264,351.33	0.00	(215,181.01)	0.00

	20	016 CHS Total Bu	dget			
	Pending Receipts	Ermanditung				
	Keceipis	Expenditures Meeker	McLeod	Sibley	CHS/Vendors	Total
Local Public Health Grant						
State Funds	311,346.00	46,036.00	62,460.00	34,656.00	168,194.00	311,346.00
TANF	95,011.00	25,047.00	25,600.00	19,527.00	24,837.00	95,011.00
МСН	88,552.00	21,816.00	31,624.00	14,394.00	20,718.00	88,552.00
Follow Along	5,799.00	1,933.00	1,933.00	1,933.00		5,799.00
Health Disparities	1,883.00	-	-	-	1,883.00	1,883.00
Healthy Homes	40,000.00	13,333.00	13,334.00	13,333.00		40,000.00
Immunization Grant	1,500.00	500.00	500.00	500.00		1,500.00
WIC	312,444.00	103,107.00	137,475.00	71,862.00	-	312,444.00
Family Planning	110,202.00	26,590.00	26,590.00	26,590.00	30,432.00	110,202.00
C&TC Outreach	203,414.00	68,811.00	89,603.00	40,000.00	5,000.00	203,414.00
Newborn Hearing Screening Program	3,000.00	1,000.00	1,000.00	1,000.00	-	3,000.00
Emergency Preparedness PHEP	81,773.00	27,258.00	27,257.00	27,258.00		81,773.00
Ebola	3,000.00	1,000.00	1,000.00	1,000.00		3,000.00
FASD Project Harmony	80,000.00	13,643.00	13,643.00	13,643.00	39,071.00	80,000.00
Healthy Communities	6,000.00	-	-	-	6,000.00	6,000.00
SHIP	220,794.00	66,567.00	45,000.00	66,567.00	42,660.00	220,794.00
Total	1,564,718.00	416,641.00	477,019.00	332,263.00	338,795.00	1,564,718.00

	<u> </u>	
Community Health Board	Date	

Local Public Health Grant Allocation

2016 Local Public Health Grant Allocation	TANF	2016	MCH		State		Total
	%	\$ Allocated	%	\$ Allocated	%	\$ Allocated	Allocation
Meeker	35.69%	\$ 25,047.38	32.16%	\$ 21,815.47	32.16%	\$ 46,036.35	\$ 92,899.20
McLeod	36.48%	\$ 25,599.64	46.62%	\$ 31,624.28	43.63%	\$ 62,460.21	\$ 119,684.13
Sibley	27.83%	\$ 19,526.51	21.22%	\$ 14,394.41	24.21%	\$ 34,655.74	\$ 68,576.66
Subtotal	100.00%	\$ 70,173.53	100.00%	\$ 67,834.16	100.00%	\$ 143,152.30	\$ 281,159.99

2016		TAN	NF	MC	Н	Sta	te	To	tal
	Total Allocation	\$	95,011.00	\$	88,552.00	\$	311,346.00	\$	494,909.00
	CHS Adm	\$	24,837.47	\$	20,717.84	\$	168,193.69	\$	213,749.00
	County Allocation	\$	70,173.53	\$	67,834.16	\$	143,152.31	\$	281,160.00
	% of total		19.20%		17.89%		62.91%		100.00%

Local Public Health Grant Administration Budget (1-1-16 to 12-31-16)

CHS Staff	Publi	c Health G	rant
Wages & Benefits	\$	106,419	
Contracted Services	\$	30,000	
Consultant fees	\$	30,000	
Mileage, Meals, Lodging, Parking & Misc	\$	10,500	
Training	\$	4,883	
Dues & Registration-NAACHO, LPHA	\$	850	
Office Supplies/miscellaneous	\$	100	
Communications	\$	1,200	
Professional Services			
WebsiteMaintenance	\$	1,000	
PH Doc	\$	24,000	
Audit Fees	\$	6,000	
Fiscal Officer (McLeod Auditor)	\$	10,000	
Other Services & Charges			
Work Comp & Liability Insurance	\$	10,000	
Accreditation Fee's	\$	5,180	
Meeting Expenses	\$	500	
	\$	240,632	
Other Grants	\$	26,883	CHS Allocation
Total Local Public Health Grant CHS Admin	\$	213,749	\$ 213,749
	\$	_	



Meeker McLeod Sibley Community Health Services

January 2016

Performance Management Update

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Performance Management Applications in Public Health

Minnesota Public Health System







Minnesota's Performance Management Framework uses data for decision-making, by setting objectives, measuring and reporting progress toward those objectives, and engaging in quality improvement activities when desired progress toward those objectives is not being made.

About Minnesota's Performance Management Framework

Minnesota's framework builds on the Turning Point Performance Management Framework and relates to the national standards for state, local, and tribal health departments. State and local public health leaders in Minnesota have elevated this framework to the system level, and are moving toward an integrated cycle of performance management that engages all community health boards around the state. Ideally, each component of the framework will build on and lead into the others.

A statewide committee has focused initial attention on developing new Local Public Act performance measures that align with the national standards. These performance measures will be embedded within this performance management framework, and will be used for the purposes of improvement, accountability, communications, and practice-based research.

For more information: Chelsie Huntley | chelsie.huntley@state.mn.us | 651.201.3882 Kim Gearin | kim.gearin@state.mn.us | 651.201.3884

Program Reports

Healthy Homes Report

Team Leader: Ilene Nelsen

Staff: Jennifer Smith, Bertha Woehler, Brittany Becker, Amy Eustis, Renee Kotlarz

Goal/Purpose: The goal of Healthy Homes Grant is to protect and promote safe, healthy homes

for residents of

Meeker, McLeod, and Sibley.

Performance Measure: (using RBA)

The measure will be the number of hazards mitigated.

The second measure will be the number of hazards referred.

Objective:

Will mitigate 75% of hazards and/or refer and follow-up to appropriate resources

The strangestory of the same and a stage to the same strangestory and						
Indicator:	Status:	Dashboard Picture:				
	1. Mcleod is transferring Jennifer S. to a					
% number of hazards	different program. Brittany B. remains on					
mitigated	the healthy homes team.					
% number of hazards	Amy Eustis has joined team along with					
referred	Bertha from Sibley County.					
	2. The assessment form has been adapted					
	to identify mitigations, referrals or					
	unresolved issues. An excel worksheet is					
	being developed to assist with the					
	percentage of mitigations.					
	3. The number of referrals for healthy					
	homes assessment continues to be low.					

Narrative (significant activities, highlights (tell the story), challenges, potential QI project):

Healthy Homes staff continues to meet monthly to develop strategies for each activity. Activities:

Primary prevention: We continue distribute radon tests.

Community Engagement:

Outreach activity continues.

Outreach material has been available at Senior Expo events.

Outreach material was given at Meeker's hazardous waste cleanup

day.

Handouts have gone out to local schools to be distributed at fall

conferences

Staff has been strategizing to contact local clinics to disseminate

material.

Daycare presentation: Staff met to formalize the basics of a class for daycare providers.

Staff has gathered information to have a PowerPoint presentation.

Brittany is developing the PowerPoint for the daycare class. Curriculum

will be based off the material from the training for staff and MDH.

Staff contacted Ridgewater College to offer a ~1 hour class on healthy homes for daycare providers. The spokesperson from Ridgewater is willing to advertise and post the class. Ridgewater will allow the use of a classroom for this event

Daycare providers would receive continuing education credit for the class. Have set the date of the class for Feb 23, 2016.

Healthy homes assessments.

Approximately 7 healthy homes assessment s for homeowners or

tenants have

been completed this quarter with a total of 21 since Jan. 2015.

Family Planning Report (December 2015)

Team Leader: Pam Miller, PHN

Staff: Patty Buerkle, PHN; Jennifer Smith, PHN, Jenny Lange, PHN

Goal/Purpose: The Family Planning Special Projects Grant provides reproductive health services, contraceptive methods, STD screening, and education to residents of Meeker-

McLeod-Sibley Counties meeting grant eligibility criteria.

Performance Measure: (using RBA) Increase access to service (increase locations of condom dispensers and educational outreach). Objective: Increase access to condoms by one location in each county by December 31st, 2015. Dashboard Picture: Indicator: Status: Number of new condom Each county is continuing to assess potential locations to dispensers and educational materials placed within expand condom dispensers Meeker-McLeod-Sibley and educational materials Counties. within their county.

Narrative (significant activities, highlights (tell the story), challenges, potential QI project): Letters have been sent out by the three counties to various locations to inquire regarding interest to collaborate in the installation of a condom dispenser or basket distribution of condoms. Sibley has had one positive response, and is working with the business to get the dispenser installed. McLeod has not yet had a response to their initial round of letters, and Meeker has sent out an initial set of letters, and a second set of letters to different locations, yet seeking interest.

An application for additional grant funding through the Family Planning Special Projects grant was submitted in November 2015. The additional requested dollars, if funded, will be utilized to expand services available at Ridgewater College.

Services for reproductive health exams and a method of contraception remain available at three sub-contracted clinics within the three counties.

Staffing continues at the Ridgewater College this academic year. FPSP staff are at the college two times per month for two hours to answer questions regarding reproductive health, complete Chlamydia and pregnancy testing, enroll students in the FPSP grants and inform students of the availability of the state Family Planning program, and assist with enrollment in the state program as needed.

Funding for the Family Planning Special Projects grant is targeted to individuals at "High Risk" for Unintended Pregnancy. A High Risk person means "an individual whose age, health, prior pregnancy outcome, or socioeconomic status increases her chances of experiencing an unplanned pregnancy or problems during pregnancy." Funding is also targeted to individuals who otherwise would have difficulty accessing services because of various barriers.

RBA Progress Report

Statewide Health Improvement Program (SHIP)

January, 2016

Team Leader: Mary Bachman

Staff: Pam Bagley, Jean Johnson

Goal/Purpose: SHIP helps to create good health where Minnesotans live, work, learn and play.

Performance Measure: (using RBA)

Short-term: Increased access to healthy food, physical activity, tobacco free environments and tobacco cessation services.

Intermediate: Changes in health behaviors – increased healthy eating, increased physical activity, decreased tobacco use, decreased tobacco exposure

Long term: Improved health outcomes – decreased obesity rate, decreased rates of chronic diseases caused by poor nutrition, lack of physical activity, and use and exposure to tobacco.

Objective:

Draft indicators have been developed for each SHIP strategy and objectives will be personalized for each SHIP site to fit the specific SHIP policy, systems and environmental changes that they work on.

Indicator:	Status:	Dashboard Picture:
Strategy specific	In process of recruiting new SHIP sites.	

Narrative (significant activities, highlights (tell the story), challenges, potential QI project):

SHIP 4 started Nov. 1, 2015. MMS CHS's year 1 budget is \$222,794. We are in the process of recruiting and planning with SHIP 4 implementation sites. Our required strategies are School Healthy Eating and Physical Activity, Worksite Wellness, Health Care Community-Clinical Linages for Prevention, and Community Tobacco (Smoke-free housing or point of sale). We are also implementing the optional strategies of Community Healthy Food and Community Active Living. Each partnering site will be required to participate in site-specific evaluation that answers the question, "How do we know anyone is better off?" The objectives and indicators are being developed by MMS SHIP staff in partnership with our local SHIP evaluator, Joanne Moze. Joanne will also help us create tools and methods to conduct the evaluation in a way that fits the needs of the specific SHIP sites.