# State Health Improvement Plan: Chronic Disease Workgroup

Meeting Minutes: Thursday, February 27, 2020, 1:30-3:00 PM, via GoToMeeting

**Workgroup Lead:**

Stacy Campbell, Chronic Disease Prevention and Health Promotion Bureau Chief, MT DPHHS

**Workgroup Facilitator:**

Anna Bradley, DPHHS PHSIO Plans Coordinator

**Workgroup Members Present:**

- Biskupiak, BJ
- Campbell, Nikki
- Carter, Paula
- Ellis, Cindia
- Fernandes, Jessie
- Hughes, Kara
- Hyzer, Matt
- Jones, Mackenzie
- Merchant, Leah
- Richidt, Lisa
- Silverstein, Robin
- Sullivan, Karen
- VanHoose, Hannah
- Welch, Heather
- White, Jody
- Zanto, Mandi

## Welcome and Introductions

1:30 to 1:45 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 key 'cross-sector' partner do you need to engage for your work to succeed?"

Responses included:

- Housing
- Primary care providers
- County commissioners
- Government (legislature and administrative)
- Centers for Independent Living
- Healthcare sector
- Housing and food banks
- Law enforcement

- Primary care providers office staff
- School districts and OPI
- Department of Commerce
- Department of Justice/Corrections
- Policymakers

## General Updates

1:45 to 1:56 PM

- Anna Bradley, abradley@mt.gov
    - Updates about the SHIP include a newsletter that will be coming out in March based on the survey sent out in February. We'll do our best to repeat that process every other month this year. Also, a collective impact trainer has been hired to help us refine our implementation processes and will be offering a collective impact training to workgroup members as well in the coming months.
- Leah Merchant, LMerchant@mt.gov
    - The DPHHS Cancer Control Program has received funding for a pilot project related to cancer survivorship in rural areas. This involves telementoring and the ECHO (Extension for Community Healthcare Outcomes) system.
- Mackenzie Jones, Mackenzie.Jones@mt.gov
    - DPHHS Disability & Health Program is partnering with Montana Youth Transitions and University of Montana are organizing a webinar on ABLE accounts on March 24 at 1 PM, which let individuals with disabilities save money for accessibility needs. Register at http://bit.ly/ABLERegister.
- Jody White, jbwhite@mtpca.org
    - PCA is continuing to work on navigator concept. Having patient navigators work with primary care clinics on screening information being correctly entered in EHRs and patient follow-up. Looking at ways to supplement staffing and support providers in chronic disease work. They are working with AHEC and other organizations to identify other means and other professions to help support workforce shortages.
- Nikki Campbell, NCampbell@mt.gov
    - The Montana Cancer Coalition has six implementation teams working on objectives outlined in the five-year strategic plan. Two of these teams have recently published two interactive resource maps for Montana showing a lot of great information, such as screening, treatment, and survivorship services and resources. They include the direct contact in each area.
        - One map: Screening and treatment, includes cancer screening programs, community health centers, family planning clinics, and Native American health services
        - Second map: Quality of life and survivorship, including emotional services, virtual

support services, and physical services

- https://mtcancercoalition.org/quality-of-life-services-map/

- Jessie Fernandes, jfernandes@mt.gov
    - There are a couple of conferences coming up: Big Sky Pulmonary Conference (March 5-7 at Fairmont), Rocky Mountain Stroke Conference (May 8 in Missoula). There will also be funding opportunities for hospitals, pharmacies, etc. coming up in the next few months related to cardiovascular health, diabetes, and asthma.

## Data Presentation

1:56 to 2:20 PM

Robin Silverstein (Robin.Silverstein@mt.gov) presented on updated obesity data. (The slides are provided on the A Healthier Montana website: https://dphhs.mt.gov/ahealthiermontana/chronicdisease)

There are 5 objectives related to obesity – 27% of Montanans are obese, including 41% of Native Americans. Medicaid data weren't capturing the full story, so the decision was made to look at BRFSS (Behavioral Risk Factor Surveillance System) data.

Obesity percentages were calculated with poverty rates to determine how obesity affects households with different incomes differently.

**Further discussion on obesity:**

There is an effort going on to implement more community gardens in the Tribal communities. There are also some communities working with their tribal councils to develop a strategic plan to bring back more traditional food. The PAK (Physical Activity Kit) program is another initiative to help with obesity issues in the Tribal community. The Missoula Urban Indian clinic started garden boxes outside of the clinic a few years ago with great success. Food insecurity is an extremely salient problem within the Native American community. Several people volunteered to participate in a subgroup to align work in a more strategic way around the obesity conversation:

- Campbell, Nikki
- Carter, Paula
- Conway, Katelin
- Fernandes, Jessie
- Jones, Mackenzie
- Silverstein, Robin
- White, Jody
    - Jody recommends reaching out to Susan Higgins from MSU CAIRHE and INBRE

There are some chronic disease prevention activities being offered remotely through telehealth to address diabetes in rural areas, like the Diabetes Prevention Program and Diabetes Self-Management Education through the Montana Diabetes Program. Holy Rosary Healthcare is offering a 12-month healthy lifestyle program (https://www.sclhealth.org/locations/holy-rosary-healthcare/services/healthy-lifestyles/).

## Focused strategy conversation

2:20 to 2:40 PM

*Strategy HE 2: Increase access to evidence-based programs for chronic disease prevention and self-management for vulnerable populations.*

CONNECT is a bi-directional, closed loop referral system where providers and programs can refer a patient to another provider or program. Food banks, transportation, and all kinds of services can be listed in the system. Currently in 11 of 13 health regions. Take a look at the CONNECT (connectmontana.org) site and consider becoming a part of the network. The provider receives client information and can reach out to the client directly, instead of the client having to reach out.

Examples of resources could include:

- Public health
- Social services
- Food banks
- Housing programs
- Disability services

Reach out to Kara and Matt at Connect@mt.gov

There are a variety of telehealth options for chronic disease prevention, including diabetes education and prevention and stroke. There is a long-standing telestroke program which enables 24/7 access to a neurologist for rural victims. Diabetes Self-management Education and Support via telehealth currently has 2 programs running and will have 3 more shortly for a total of 5, and the Diabetes Prevention Program has 14 active sites across the state. (jfernandes@mt.gov)

Partnership with the University of Montana's School of Pharmacy provides screening for chronic diseases and referrals for rural Montanans. (jfernandes@mt.gov)

Disability and Health Program working to improve inclusivity of chronic disease programs (Mackenzie.Jones@mt.gov)

## Action Steps & Wrap-Up

2:40 to 2:45 PM

Anna reminded the group to continue to be using two-way communication, taking the information from this call back to your various organizations and programs, and don't be afraid to reach out to each other between calls. Watch out for the SHIP newsletter coming up in the next few weeks, reach out to Anna if you have information you would like to see included.