

State Health Improvement Plan Design Team Orientation

Ground Rules and Expectations

1. Extend flexibility and grace to all participants.
2. Respect, listen to, and support each other.
3. Don't be afraid to speak up and challenge ideas in respectful ways, ask a question, or make a comment.
4. Remember that we are all learning from each other.
5. Equal sharing/reporting by everyone—be mindful of the time and space we are sharing to take turns speaking.
 - a. Listen, listen, listen.
6. Assume positive intent, but also acknowledge the impact.
7. Acknowledge everyone's unique perspectives.

Katie's commitments:

I will not waste your time.

We will not wordsmith.

You will have opportunities for meaningful input.

We will be relentlessly committed to creating a plan that is useful and operational.

We share a responsibility to:

- Advance the health of all Montanans, regardless of life circumstances.
- Engage in conversation about where Montanans live, learn, work, play, worship, and age and how those places impact health.
- Ensure that Montanans have equal opportunity to make choices that lead to good health for them and their families.
- Provide information and services that all people can find, understand, and use to inform health-related decisions and actions for themselves and others.
- Liaise with the communities, organizations, and groups that we are representing to create dialogue.

Communication

SHIP Design Team members are asked to communicate back to the organizations and communities we are here representing. Ideas from the group for effective communications included:

- Virtually (Zoom, Teams)
- Face-to-face
- Emails
- Social media (Facebook)
- Conference calls
- One-on-one conversations
- Newsletters
- Monthly and weekly staff, leadership, tribal council, convening, committee, and coalition meetings
- Webinars
- Sharing notes from the design team to various groups
- Keep as an agenda item on standing meetings
- Grassroots communication via word of mouth

See the SHIP Design Team Membership List for a full list of sectors/organizations/groups represented.

The project coordinator will provide the following between meetings:

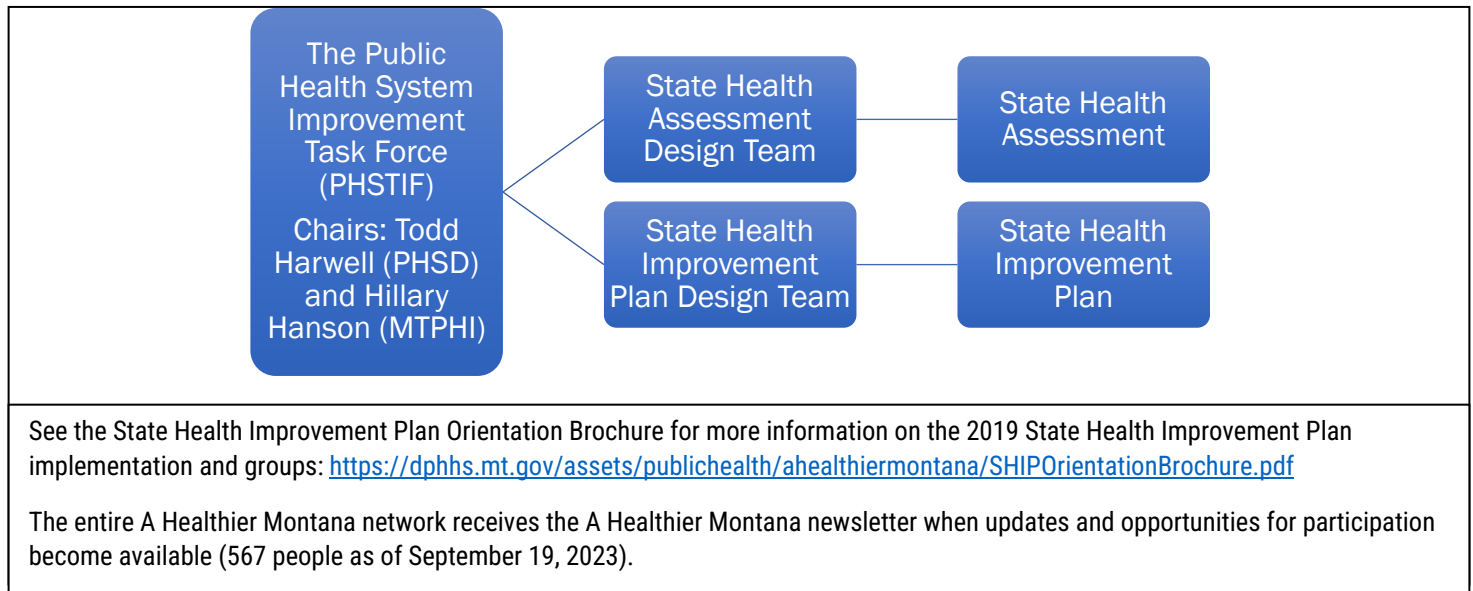
- Sending agenda and meeting information ahead of the meeting for participants to review.
- A meeting summary document for feedback from the participants. Participants can share the document with their networks as needed to collect feedback in between meetings.
- Reminders in between meetings for action items.
- Invitations to have one-on-one meetings with participants between meetings to support the project.
- Regularly checking in and providing summaries at the start of meetings to stay aligned with the timeline and project goals.

Project Reference

Terminology

- **A Healthier Montana:** The name of the Public Health and Safety Division program that houses the SHA and SHIP. Resources and more information about these processes are available at the A Healthier Montana website.
 - <https://dphhs.mt.gov/ahealthiermontana>
- **Community Health Assessment (CHA):** Like the State Health Assessment but conducted by local or Tribal health departments. Analyzes health concerns of a community.
- **Community Health Improvement Plan (CHIP):** Like the State Health Improvement Plan but conducted by local or Tribal health departments. Establishes health improvement priorities from the concerns identified in the CHA.
- **Community Health Needs Assessment (CHNA):** Like CHAs and the SHA but conducted by non-profit hospitals. Analyzes health concerns of a community.
- **Health Equity:** Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This is accomplished by removing obstacles to health that create unfair conditions and can be changed.
- **Implementation Plan (IP):** Like CHIPs and the SHIP but conducted by non-profit hospitals. Establishes health improvement priorities from the concerns identified in the CHNA.
- **Montana Public Health Data Resource Guide:** This guide is organized by public health program area and the type of data collected. Each of these programs describe the strengths and limitations of the data, the items collected, and the means to gain access to the data. Programs differ in the type of information collected and the manner in which they can release the data.
 - <https://dphhs.mt.gov/assets/publichealth/Epidemiology/MTResourceGuide.pdf>
- **Public Health Accreditation Board (PHAB):** The Public Health Accreditation Board is a national organization that maintains standards for the voluntary accreditation process for public health departments. The Public Health and Safety Division collaborates with the Early Childhood and Family Support Division in Montana DPHHS to maintain its status as an accredited public health department.
- **Public Health System Improvement Task Force (PHSITF):** The Public Health System Improvement Task Force is a group of public health and health care sector professionals working together to advance Montana's public health system and serves in an oversight capacity to the A Healthier Montana work, specifically the SHA and the SHIP.
- **SHIP Communities of Practice:** SHIP Communities of Practice meet quarterly and are open to anyone who would like to attend. There is one Community of Practice for each of the four main topics in the SHIP: Behavioral Health, Chronic Disease Prevention and Self-Management, Healthy Mothers, Babies, and Youth, and Motor Vehicle Crashes.
- **SHIP Working Groups:** SHIP Working Groups convene to collaborate on shared projects of interest. Groups are currently convening to work on Adverse Childhood Experiences (ACEs) and resiliency, alcohol-impaired driving prevention, and obesity prevention.
- **Social Determinants of Health:** Our life circumstances and experiences in places where we live, work, play, age, learn, and worship that influence our health and wellbeing.
- **State Health Assessment (SHA):** A broad overview of the current state of the health of Montanans to inform health improvement efforts. Analyzes health concerns statewide and uses data from CHAs, CHNAs, CHIPs, IPs, community engagement sessions, public health data systems, other state agency and national data, and other statewide assessments in its development.
- **State Health Assessment Design Team:** This group began convening in August 2022 and met monthly until January 2023 to support drafting the updated State Health Assessment. See the A Healthier Montana website, specifically the "Network" page available in the gray navigation bar on the left side, for past materials.
- **State Health Improvement Design Team:** Like the SHA Design Team, this team meets to guide development of the SHIP. Meeting materials will also be available on the A Healthier Montana website "Network" page.
- **State Health Improvement Plan (SHIP):** A system-wide "call to action" to address health priorities identified in collaboration with cross-sector partners and community members using the information in the SHA.

Figure 1: A Healthier Montana Network



PHAB Requirements for a State Health Improvement Plan

PHAB Measure 5.2.1: Adopt a community (state) health improvement plan.

“The health improvement plan provides guidance to the health department, its partners, and stakeholders for improving the health of the population within the health department’s jurisdiction. The plan reflects the results of a collaborative planning process that includes significant involvement by key sectors. Partners can use a health improvement plan to prioritize existing activities and set new priorities. The plan can serve as the basis for taking collective action and can facilitate collaborations.”

The final State Health Improvement Plan must include:

1. At least 2 health priorities,
2. Measurable objectives for each priority,
3. Improvement strategy(ies) or activity(ies) for each priority that has a timeframe and designated organizations or individuals that hold responsibility,
 - a) Note: At least 2 of the strategies must include a policy recommendation, and at least 1 of those must be aimed at alleviating causes of health inequities.
4. A list of assets and resources that will be used to address at least one of the priority areas, and
5. An outline of what the implementation process will look like.

PHAB Measure 5.2.2: Encourage and participate in collaborative implementation and revision of the community (state) health improvement plan.

“Any plan is useful only when it is implemented and provides guidance for activities and resource allocation. Effective community health improvement plans should not be stagnant, but dynamic to reflect the evolving needs of the population served. Health departments should continuously work with multi-sector partnerships to evaluate and improve the community health improvement plan.”

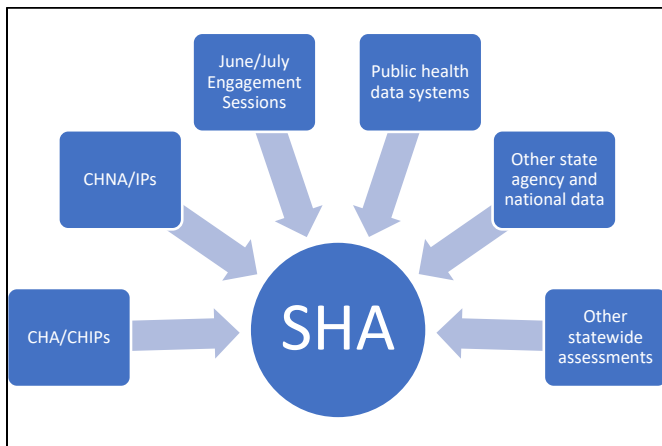
The SHIP must be a living document that continues to evolve after it is released.

1. Updates to the activities or strategies could be necessary because:
 - a. Activities or strategies have been completed,
 - b. There is an emerging health issue that must be addressed,
 - c. There has been a change in resources and assets.
2. Changes will be developed in collaboration with partners and stakeholders.

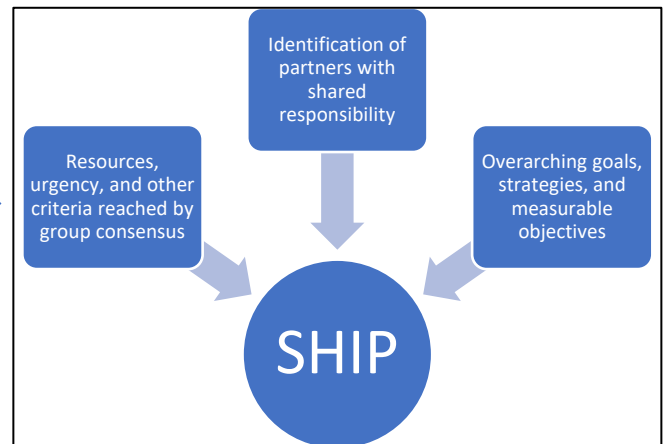
Updated March 6, 2024

Process

First, identify the health concerns in the SHA.



Then, identify the main priorities in the SHIP.



2019 SHIP Frameworks

Implementation: Collective Impact



Evaluation: Results-Based Accountability (RBA)

1. How much did we do?
2. How well did we do it?
3. Is anyone better off?

Timeline

- **October 12th**: Data overview-State SHA, locals CHAs, listening session findings
- **November 9th**: Selecting prioritization criteria + building a framework
- **December 14th**: First round of prioritization from among health concerns
- **January 11th**: Second round of prioritization
- **February 8th**: Review and give feedback on priorities, goals, strategies, and implementation

Contact Information for SHIP Design Team Support:

Katie Loveland, Facilitator and main point of contact: lovelandk@gmail.com

Rich Knecht, PHSD Accreditation Coordinator and PHSD point person: Richard.Knecht@mt.gov

Anna Bradley, PHSD State Health Improvement Plan Coordinator, out until January 2024: ABradley@mt.gov

Membership

Name	Organization	Email
Aklestad, Kristi	Public Health and Safety Division	Kristi.Aklestad@mt.gov
Baldry, Isaac	Disability Health and Transition Advisor	itbaldry@gmail.com
Bradley, Anna	Public Health and Safety Division	abradley@mt.gov
Branscum, Jean	Montana Medical Association	jean@mmaoffice.org
Burton, Emily	Pacific Source	Emily.burton@pacificsource.com
Campbell, Stacy	Public Health and Safety Division	stcampbell@mt.gov
Carlson-Thompson, Dan	Behavioral Health and Developmental Disabilities Division	dcarlson-thompson@mt.gov
Carter, Paula	Billings Area IHS	paula.carter@ihs.gov
Chipongian, Kayla	Confluence Public Health Alliance	kayla.chipongian@cphamt.org
Claiborne, Natalie	Office of Rural Health	natalie.claiborne@montana.edu
Coburn, Christopher	Planned Parenthood	christopher.coburn@ppmontana.org
Corbally, Sarah	Healthy Mothers, Healthy Babies	Cscmontana@gmail.com
Cozzie, Sheila	Montana Dept of Transportation	scozzie@mt.gov
Cuffney, Cari	Headwaters Foundation	caric@headwatersmt.org
Diederichs, Madison	Early Childhood and Family Support Division	madison.diederichs@mt.gov
Dobrinen, Erin	Early Childhood and Family Support Division	erin.dobrinen@mt.gov
Dominicis, Beth	Office of Public Instruction	beth.dominicis@mt.gov
Dusko, Kevin	Montana Dept of Transportation	kedusko@mt.gov
Eby, Amanda	Early Childhood and Family Support Division	amanda.eby@mt.gov
Garder, Michael	Missoula City County Health Department	mgarder@missoulacounty.us
Gibson, Debbie	Public Health and Safety Division	debgibson@mt.gov
Grinsell, Kayla	Northern Cheyenne Board of Health	director@nctribalhealth.org
Hanson, Hillary	Montana Public Health Institute	hillary.hanson@mtphi.org
Harrington, Stefanie	Carter County Public Health	sharrington@cartercounty.us
Hodges, Maggie	South Central MT AHEC	maggie.hodges@mtha.org
Houston, Kiely	Montana Health Care Foundation	kiely.houston@mthcf.org
Hubbs, Courtney	Office of Public Instruction	courtney.hubbs@mt.gov
Huck, Kira	Safe Kids Montana	kirah@fchwmt.org
Iron Shooter, Stephanie	Office of American Indian Health	stephanie.ironshooter@mt.gov
Isaly, Jacqueline	Early Childhood and Family Support Division	jacqueline.isaly@mt.gov
Jones, Mackenzie	Public Health and Safety Division	Mackenzie.jones@mt.gov
Kelley, Matt	Montana Public Health Institute	matt.kelley@mtphi.org
King, Jack	Montana Hospital Association	jack.king@mtha.org
Knecht, Rich	Public Health and Safety Division (facilitator)	Richard.knecht@mt.gov
Kolar, Meaghan	Behavioral Health and Developmental Disabilities Division	meaghan.kolar@mt.gov
Langve-Davis, Pam	Montana Dept of Transportation	plangvedavis@mt.gov
Lee, Lisa	Montana Partnership to End Child Hunger	lisa@mtpech.org
Levine, Katie	American Foundation for Suicide Prevention	klevine@afsp.org
Lindeman, Dani	Public Health and Safety Division	dlindeman@mt.gov
Loveland, Katie	Loveland Consulting (facilitator)	lovelandk@gmail.com
Maney, Peter	NADC-NABN	pmaney@nadc-nabn.org
McGinty, Skye	All Nations Health Center	smcginty@allnations.health
Minard, Kris	Office of Public Instruction	kminard@mt.gov
Morgan, Pharah	Rocky Mountain Tribal Epidemiology Center	pharah.morgan@rmtlc.org
Morris, Brent	Behavioral Health and Developmental Disabilities Division	brent.morris@mt.gov

Name	Organization	Email
Neumann, Cora	NADC-NABN	cneumann@nadc-nabn.org
NoRunner, Martin	Habitat for Humanity	director@greatfallshabitat.org
Paradis, Patrick	Early Childhood and Family Support Division	patrick.paradis@mt.gov
Pugmire, Tatianna	Behavioral Health and Developmental Disabilities Division	Tatianna.pugmire@mt.gov
Rassley, Tracy	American Foundation for Suicide Prevention	trassley@afsp.org
Riutta, Olivia	Montana Primary Care Association	oriutta@mtpca.org
Rogers, Amber	Mountain Pacific Quality Health	arogers@mpqhf.org
Thaker, Juthika	Behavioral Health and Developmental Disabilities Division	juthika.thaker@mt.gov
Tilton, Greg	Service Area Authority representative	igtilton@bresnan.net
Traci, Meg	Montana Disability and Health Program	meg.traci@mso.umt.edu
Ward, Maureen	Public Health and Safety Division	Maureen.ward@mt.gov
Ward, Tony	UM School of Public and Community Health Sciences	tony.ward@mso.umt.edu
Williams, Chloe	North Central MT AHEC	chloe.williams@mtha.org
Windecker, Mary	Behavioral Health Alliance of Montana	mwindecker@montanabehavioralhealth.org
Zimmerman, Heather	Public Health and Safety Division (facilitator)	hzimmerman@mt.gov