

Essential Local Public Health Activities Framework – Part 1 of 6

Area of Public Health Responsibility:

Assure an Adequate Local Public Health Infrastructure

Organizational capacity refers to the infrastructure upon which public health activities are built. In order to carry out public health responsibilities, Community Health Boards (CHBs) must have a governance structure and trained culturally competent and culturally sensitive staff. They must have the capacity to monitor the health of the community and identify community health problems (assessment), develop policies and plans to address important health issues (policy development), and make sure that critical public health activities/services are available to community members-- whether or not they actually carry out the activity (assurance). CHBs must meet legal requirements set forth in Minnesota Statute 145A, which is the statute that establishes Minnesota's system of local public health. Finally, participation in this local public health infrastructure must consider tribal government input and collaboration.



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IN1. Maintain a local governance structure for public health, consistent with state statutes.		MS 145A.03 subd.1, Establishment and organization (must) MS 144.05, General duties of Commissioner (must)	<ul style="list-style-type: none"> - With SCHSAC and/or other advisory groups, develop statewide guidelines, standards, rules and/or proposed legislative language, as needed to support an effective local public health system. - Provide the administrative and program support required to implement governance responsibilities, guidelines, standards and rules. - Provide consultation and technical assistance on issues related to local governance and system development and maintenance. - Routinely update the Community Health Services Administration Handbook. - Provide or assure leadership and/or training in community participation to develop a constituency for maintaining a local governance structure. - Provide training and support to MDH staff and programs on the Area of Public Health Responsibility and the Essential 	<ul style="list-style-type: none"> - Implement a Joint Powers agreement between counties in multi-county agencies. - Maintain a Community Health Board and proper organizational structure. - Develop systems within the public health system, e.g., Maternal and Child Health services, Women, Infants and Children services, and services for Children with Special Health Needs.

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			Local Activities. <ul style="list-style-type: none"> - Convene gatherings of local public health, American Indians and populations of color to facilitate the increased understanding of governance issues related to public health. 	
IN2. Assess and monitor community health needs and assets on an ongoing basis for each of the 6 areas of public health responsibility in this framework.	#1 Monitor health status to identify community health problems. #2 Diagnose and investigate health problems and health hazards in the community.	MS 145A.10 subd.1 , Powers and duties of Community Health Boards (must) MS 144.05 , General duties of Commissioner (must) MS 145.881 , Maternal and Child Health Advisory Task Force (may) MS 145.8821 , Maternal and Child Health Block Grant accountability (must) MS 145A.17, subd.3 , Family Home Visiting Program (must) MS 145.925 , Family Planning Grants (must if grantee) MS 145.882, subd.7 , Maternal and Child Health Block Grant distribution (must)	<ul style="list-style-type: none"> - With SCHSAC and/or other advisory groups, develop and update guidelines for local assessments, action plans and evaluation measures. - Provide county, statewide and/or national health data to support the local assessment process. - Collect, analyze, and distribute data on maternal and child health, and on injury and violence, including county and regional breakdowns. - Share data collected on teen pregnancy rates, immunization, infant mortality, preterm and low birth weight infants. - Serve as a resource for existing MDH data sets. - Provide guidance on evaluating, analyzing and interpreting data. 	<ul style="list-style-type: none"> - Conduct on-going community assessments. - Track and analyze health data on an on-going basis. - Develop and conduct surveys with the community. - Participate in assessment activities, both at local and regional levels. - Review the most current editions of the Minnesota Populations of Color Health Status Report to identify health disparity areas affecting the populations of color and American Indians in the community. - Assess the health status of populations of color and American Indians in the area. - In consultation with the MDH Office of Minority and

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			<ul style="list-style-type: none"> - Monitor trends and needs and produce user-friendly reports. - Synthesize and disseminate results of local assessments, priorities and action plans to guide the development of statewide goals and outcomes. - Link local agencies to state, federal, tribal and/or international health, environmental, economic and/or agricultural agencies and data. - Identify and address specific data issues and prevention needs relative to American Indians, populations of color, immigrants and/or refugees. - Work with local public health, American Indians, communities of color, immigrants and/or refugees to assure their perspectives can be reflected in the resulting plans and actions. - Work with local public health departments and community groups to identify community assets as part of the community assessment process. - Staff the Maternal and Child 	<p>Multicultural Health community-specific health coordinators, as needed, develop relationships with racial and ethnic community and tribal leaders. Engage leaders in developing health assessment strategies that are relevant to the community or tribe, and will result in information they want and need.</p> <ul style="list-style-type: none"> - Develop and maintain agency website that includes health data. - Include data and information about complimentary medicine in assessments. - Include jail health, e.g., prisoners as vulnerable populations, in assessments. - Obtain injury and violence data from local health care programs and from MDH, interview local providers of health care and victim service organizations to determine needs.

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			Health Advisory Task Force to support meeting their statutory obligation to review and report on MCH related issues and services.	<ul style="list-style-type: none"> - Obtain data from local schools, community agencies, and human service agencies. - Work collaboratively with area hospitals, clinics, health plans and behavioral health providers. - Work with law enforcement, justice, courts. - Partner with other needs assessments and program planning done by social services, health, education, and other community organizations.
IN3. Identify community health and prevention priorities every five years with input from community members and key partners, including communities of color, tribal representatives and special populations, ensuring that community wisdom and cultural diversity are used to understand and interpret qualitative and quantitative information.	#4 Mobilize community partnerships to identify and solve health problems. #5 Develop policies and plans that support individual and community health efforts.	MS 145A.10 subd.5a , Powers and duties of Community Health Boards (must) MS 144.05 , General duties of Commissioner (must) MS 145.881 , Maternal and Child Health Advisory Task Force (may) MS 145.8821 , Maternal and Child Health Block Grant accountability (must)	<ul style="list-style-type: none"> - Disseminate templates, worksheets and/or other tools for prioritization and community input. - Assist local health departments with prioritization processes. - Provide consultation, technical assistance and support to local public health, as needed, to assure input is solicited from American Indians, communities of color, immigrants and refugees and that their input and wisdom are reflected in resulting actions. 	<ul style="list-style-type: none"> - Identify long term, 5-year priorities for the years 05-09 Utilize the CHS Advisory Committee to gain community input and to identify health problems and suggested strategies to address problems. - Work with community groups and coalitions to facilitate community input (including communities of color) into the assessment and prioritization process.

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			<ul style="list-style-type: none"> - Work with local public health, American Indians, communities of color, immigrants and/or refugees to provide information, mentoring, consultation, support, etc. to racial and ethnic community members to insure this process happens and the wisdom is authentically reflected. - Together with an advisory committee including local public health and racial, ethnic, and tribal representatives, convene local area health forums focusing on the cultures, traditions, practices, and assets of these partners in the area. - Engage local public health and other partners in the mandatory 5-year Title V (MCH and MCSHN) needs assessment to determine state MCH priorities. 	<ul style="list-style-type: none"> - In consultation with the MDH Office of Minority and Multicultural Health community-specific health coordinators, as needed, develop relationships with racial and ethnic community and tribal leaders. Together determine how state and local public health can mentor and support participation in these processes so they are relevant and useful in addressing racial and ethnic health disparities. - Participate in community forums sponsored by MDH Office of Minority and Multicultural Health to bring together state and local public health and representatives of communities of color and American Indians for mutual learning, understanding, and relationship building. - Maintain relationships with racial and ethnic community and tribal leaders, so that these leaders and their

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				<p>community members know about public health affecting their communities.</p> <ul style="list-style-type: none"> - Engage and join together with communities of color and American Indians in the community to gain input, identify problems and priorities, and determine strategies to work toward improvement, building on community assets. - Incorporate reviews and discussions of Culturally and Linguistically Appropriate Services (CLAS) Standards in this work.
<p>IN4. Every five years, develop an action plan with evaluation measures and recommended policy options to address essential local activities and local priorities.¹</p>	<p>#4 Mobilize community partnerships to identify and solve health problems. #5 Develop policies and plans that support individual and community health efforts.</p>	<p>MS 145A.10 subd.5a, Powers and duties of Community Health Boards (must) MS 145.8821, Maternal and Child Health Block Grant accountability (must)</p>	<ul style="list-style-type: none"> - Collect and disseminate information on best practices and proven interventions specific to various communities (e.g. Strategies for Public Health, Public Health Intervention Wheel, lessons learned from the Eliminating Health Disparities Initiative grantees). - When possible, offer funding opportunities through local 	<ul style="list-style-type: none"> - Identify the activities and strategies that correspond to local priorities and statewide outcomes for the local public health grant. - Develop community/agency action plan. - Identify measurable outcomes. - Develop measures with input from racial and ethnic

¹ Although planning is an ongoing activity, a five-year cycle has been established to provide statewide consistency.

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			grants. <ul style="list-style-type: none"> - Act on statewide problems identified in local community assessments and prioritization processes. - Provide technical assistance and support to local public health, as needed, to assure that input and involvement are solicited from American Indians, communities of color, immigrants and/or refugees and that their involvement is reflected in resulting actions. - Develop and/or provide guidelines and tools to develop action plans and meaningful evaluation. 	community and tribal leaders. <ul style="list-style-type: none"> - Develop a process involving racial and ethnic communities and tribes for collecting and reporting data regarding the evaluation measures. - Develop a process, involving racial and ethnic community and tribal leaders for reviewing the action plan and reporting on results. - Share results of program evaluations to contribute to the evidence base of public health.
IN5. Convene community members and key community partners, including communities of color, tribal representatives and people with special needs to build community collaborations, determine roles, identify and leverage community assets/resources and participate in research that benefits the	#4 Mobilize community partnerships to identify and solve health problems.	MS 145A.10 subd.5a , Powers and duties of Community Health Boards (must) MS 145.8821 , Maternal and Child Health Block Grant accountability (may) MS 145.925 , Family Planning Grants (must if grantee) MS 145.56 , Suicide Prevention (must if grantee)	<ul style="list-style-type: none"> - Provide consultation and technical assistance to assure that input and involvement are solicited from American Indians, communities of color, immigrants and/or refugees and that their involvement is reflected in resulting actions. Develop strategies to offer mentoring and support, as needed. - Assure there is a forum or 	<ul style="list-style-type: none"> - Convene community partners and stakeholders to collaboratively determine roles, responsibilities and resources - Gather input to be included in the action plan - Include communities of color, American Indians and other special populations - Provide data and expertise

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<p>community as resources allow.</p>			<p>mechanism that does not compromise sovereignty and that allows the input and/or participation of tribal governments.</p> <ul style="list-style-type: none"> - Work with local public health to develop and maintain good working relationships with state and local partners such as the other units of tribal, state and local government, professional organizations (e.g., MMA, MNA, AAP, ACOG), advocacy and community-based organizations (e.g., March of Dimes, ACS, AHA), service agencies, etc. - Provide information, training and support to local public health to implement activities directed towards the priority issues identified through the Title V needs assessment. 	<p>to support research that benefits the community.</p> <ul style="list-style-type: none"> - Provide communications and materials in all languages read and spoken by communities of color and tribes in the area. - Develop and maintain relationships with racial and ethnic community and tribal leaders so that these leaders and their community/tribal members know about public health affecting their communities.
<p>IN6. Advocate for policy changes needed to improve the health of populations and individuals.</p>	<p>#5 Develop policies and plans that support individual and community health efforts.</p>	<p>MS 144.05, General duties of Commissioner (may) MS 125A.30, Interagency Early Intervention Committees (must) MS 145.56, Suicide Prevention (may) MS 145.882, subd.7, Maternal</p>	<ul style="list-style-type: none"> - Partner with local health departments and community members, identify those with the power to change policy, and work together to include them in these discussions. - Evaluate impact of state and 	<ul style="list-style-type: none"> - Participate in community groups and organizations. - Bring potential policy actions to health board for consideration - Include policy development in action plans.

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		and Child Health Block Grant distribution (may)	community policies. - Identify with American Indians, populations of color, immigrants and/or refugees the strategies to initiate needed changes in policies and other factors affecting racial and ethnic health disparities in Minnesota.	- Include racial and ethnic community and tribal leaders in all policy-related decisions so that barriers to eliminating racial and ethnic health disparities can be identified. Create opportunities for school readiness. - Participate in the local area Interagency efforts e.g. Early Intervention Committee (IEIC), Family Services Collaborative, Mental Health Collaboratives, etc.
IN7. Lead or participate in efforts to foster healthy physical, economic, and social environments (e.g., participate in community improvement and development decisions).	#5 Develop policies and plans that support individual and community health efforts.	MS 145.928, subd.2, Eliminating Health Disparities (may) MS 144.05, General duties of Commissioner (may)	- Disseminate and/or assist in incorporating research findings, best practices and/or issue briefs. - Promote the utilization of community development methods, such as asset-based processes, so that communities will collaboratively identify and work from their assets. - Serve as facilitators, trainers, and mentors in community development methods. - Convene community-specific health committees to identify and	- Participate in community conversations that discuss physical, economic or social environments, e.g., in ordinance development. - Participate in/facilitate presentations and discussions with communities of color and American Indians in the area about social determinants of health and the role they play in eliminating racial and ethnic health disparities.

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			<p>discuss health priorities and health agendas.</p>	<ul style="list-style-type: none"> - Participate in community forums sponsored by the MDH Office of Minority and Multicultural Health to bring together state and local public health and representatives of communities of color and American Indians for mutual learning, understanding, and relationship building. - Offer best practices and explain public health's role and social determinants of health.
<p>IN8. Provide annual information to MDH to evaluate progress toward statewide outcomes and, local priorities, and to meet federal reporting requirements.</p>		<p>MS 145A.10 subd.5a, Powers and duties of Community Health Boards (must) MS 144.05, General duties of Commissioner (must) MS 145.881, Maternal and Child health Advisory Task Force (may) MS 145.8821, Maternal and Child Health Block Grant accountability (must)</p>	<ul style="list-style-type: none"> - With SCHSAC and/or other advisory groups, develop and maintain reporting system that reflects the outcomes achieved by the local public health system and/or key organizational processes implemented. - Regularly conduct statewide analysis of reporting data which includes a feedback loop to Community Health Boards and tribal governments. - Through SCHSAC and/or other advisory groups, convene state and local public health 	<ul style="list-style-type: none"> - Submit annual reports to MDH to meet requirements. - Review the most recent Populations of Color Health Status Report to assess statewide progress in eliminating racial and ethnic health disparities. - With communities of color and tribes develop measures toward the outcomes they recommend as progress toward improving the health status of their populations and tribes in the community.

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			representatives to address issues identified through assessments, priorities, and annual reporting. - Convene an advisory committee of American Indians, people of color, immigrants and/or refugees to establish progress and outcome measures they feel reflect conditions toward eliminating racial and ethnic health disparities. Consider examples from Eliminate Health Disparities Initiative grantees. - Work together to develop measures and tools to evaluate progress. - With the Maternal and Child Health Advisory Task Force, develop and implement a meaningful mechanism to communicate progress on the federal and state Title V performance measures. - Collect and disseminate statewide data on the health status of mothers and children.	
IN9. Meet personnel requirements for the CHS Administrator and the Medical		MS 145A.04 subd.3 , Powers and duties of Board of Health (must)	- Hold agencies/Community Health Boards accountable for meeting requirements.	- Make sure that the Community Health Services Administrator and Medical

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Consultant.		MS 145A.10 subd.3 , Powers and duties of Community Health Boards (must)	<ul style="list-style-type: none"> - Provide information and training to local agencies regarding personnel requirements and hiring of the administrator and medical consultant. - Provide ongoing, scheduled opportunities for professional development via individual and regional meetings. - Offer, participate in and/or support training and/or academic preparation for American Indians, people of color, immigrants and/or refugees in these requirements so that the local public health workforce becomes more diverse. 	Consultant meet the requirements in MS 145A.
IN10. Designate , recruit, train and retain local public health staff so that every local agency has appropriate expertise in each of the 6 areas of public health responsibility.	#8 Assure a competent public health and personal health care workforce.	MS 144.05 , General duties of Commissioner (must) MS148.191 , Public health occupations - Officers; staff; power (must) MS 148.211 , Licensing (must) MS 148.231 , Registration, failure to register, re-registration, verification (must) MR 6316.0100 , Requirements	<ul style="list-style-type: none"> - Provide ongoing leadership training and/or other opportunities for public health workforce development in Minnesota, in particular for American Indians, people of color, immigrants and/or refugees, so that the local public health workforce becomes more diverse. - Provide “Core Essentials of Public Health” modules training 	<ul style="list-style-type: none"> - Make sure (by working with others to leverage training and resources if necessary) that local public health staff have training and skills in the core competencies of public health, e.g., assessment, community involvement, program design, multi-level interventions, communication, evaluation.

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		for registration as a public health nurse (must) MS214.13 subds.1,3 , Human services occupations (must) MR4695.2600 , Definitions (must)	by request. - Provide ongoing orientation, training, competency development, mentorship, leadership development, and/or access to current public health practice tools and research to local and tribal public health. - With SCHSAC and/or other advisory groups, develop or adapt and implement a training module on cultural competency. - Encourage educational institutions to incorporate cultural competency training into curricula and to recruit diverse populations into health and public health professions. - Provide information, training and relevant materials on effective public health strategies. - Assist local health departments in assuring that the programs and services they deliver are culturally appropriate. - Provide designated staff (e.g. infectious disease, environmental health, health promotion) with information, training and	- Partner with educational institutions on training and educational opportunities. Work with nearby academic training institutions and community partners to create opportunities for people from different cultures and ethnicities to enter the public health workforce. - Identify staff to address eliminating health disparities, include this in their job descriptions, and establish contact between them and the MDH Office of Minority and Multicultural Health and other MDH staff for this purpose. - Implement Limited English Plans (LEP).

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IN11. Recruit local public health staff that reflect the cultural and ethnic communities served.		MS 144.05 , General duties of Commissioner (may) MS 145A.17 subd.3 , Family Home Visiting Program (may)	minimum expectations. - Encourage educational institutions to incorporate cultural competency training into curricula and to recruit diverse populations into health and public health professions. - Provide information, resources, and brief training on Health Literacy to local public health staff, including discussion of how these skills relate to working with populations of color, American Indians, non-English speaking populations, and others with low literacy. - Assist local agencies in recruiting and hiring processes so that local staff reflect the cultures and ethnicities of the communities they serve. - Promote , develop and/or participate in Community Health Worker curricula and programs.	- Work with nearby academic training institutions and community partners to create opportunities for people from different cultures and ethnicities to enter the public health workforce. - Review the recommendations of the Immigrant Health Task Force at: http://www.health.state.mn.us/divs/idepc/refugee/immigrant/divhelp.html - Determine which of these to pursue in your community and/or with MDH and other entities. - Assure that the Community Health Services Administrator has the skills and abilities to develop relationships with racial and ethnic communities and American Indian tribes, and/or to support these among Community Health Board staff, leading to the hiring of

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				<p>culturally competent staff and work force diversity.</p> <ul style="list-style-type: none"> - Assure the Medical Consultant has the ability and commitment to learn, accept, and value the traditional health and healing beliefs of racial, ethnic, and American Indian people in the area. - Work with communities of color and American Indians in the area to engage community members in Community Health Worker training currently being piloted in Minnesota.