Environmental Health Continuous Improvement Board

Meeting Summary

Thursday, May 2, 2019

Meeting: 9:00 a.m. – 12:00 p.m. | Lunch Celebration: 12:00 p.m. – 2 p.m.

Meeting at Minnesota Counties Intergovernmental Trust, St. Paul, MN | Vidyo (remote option)

Lunch Celebration at Yarusso's Italian Restaurant

Members Present and Absent:

Name	Organization	Present	Absent
Dawn Beck (co-chair)	Olmsted County	Х	
Lisa Brodsky	Scott County		X
Amanda Buell	Hennepin County	X	
Ruth Greenslade	Goodhue County	Х	
Bill Groskreutz	Faribault County Commissioner	X (remote)	
Sarah Grosshuesch	Wright County	Х	
Tom Hogan (co-chair)	Minnesota Department of Health	Х	
Angel Korynta	Polk County	X (remote)	
Kristine Lee	Countryside Public Health	Х	
Jeff Luedeman	Minnesota Department of Agriculture		Х
John Weinand	City of Minnetonka	Х	

Other Meeting Participants:

Angie Cyr, Steven Diaz, Jim Kelly, Mary Navara, and Jim Topie, Minnesota Department of Health, Environmental Health Division; Jesse Harmon, Brown-Nicollet Counties; Caleb Johnson, Ramsey County; Dan Huff and Ryan Krick, City of Minneapolis; Kari Oldfield, Local Public Health Association (LPHA); Karen Swenson, former, retired EHCIB member; Sarah Reese, Polk County; Jeff Travis, Washington County

Facilitators/Staff:

Michelle Ambrose, Minnesota Department of Health, Environmental Health Division; Becky Buhler, Kim Gearin, Chelsie Huntley, and Megan Drake-Pereyra, Minnesota Department of Health, Center for Public Health Practice (PHP)

Welcome and Introductions

The Environmental Health Continuous Improvement Board's (EHCIB) co-chairs, Tom Hogan, MDH, and Dawn Beck, Olmsted County, welcomed everyone to the May meeting. They introduced the incoming EHCIB members: Lisa Brodsky, Scott County; Sarah Grosshuesch, Wright County; and Angel Korynta, Polk County. They also recognized and thanked the outgoing members: Dan Disrud, Anoka County; Sarah Reese, Polk County; and John Tracy, Stearns County.

Mr. Hogan reviewed the meeting agenda and objectives.

Meeting Objectives:

- 1. EPH Framework next steps
- 2. Determine future direction of the EHCIB.
- 3. Celebrate 5 years of accomplishments!

Mr. Hogan continued by acknowledging both EHCIB members and other meeting participants and invited everyone to fully participate in the meeting.

Strengthening Public Health in MN and the EPH Framework

Chelsie Huntley, MDH PHP, reminded meeting participants of the State Community Health Services Advisory Committee's (SCHSAC) efforts to Strengthen Public Health in Minnesota (https://www.health.state.mn.us/communities/practice/schsac/workgroups/strengtheninglph.html). Over the last 7 months, state and local leaders developed a forward-looking framework for governmental public health in MN. The EHCIB previously helped to identify foundational responsibilities within the environmental health area of the framework. The next step is to refine and define these foundational responsibilities and add the desired/necessary detail for environmental health. Ms. Huntley noted, and Mr. Hogan and Ms. Beck agreed, that while the EHCIB and Strengthening efforts started separately the guiding principles and goals of both efforts are consistent.

Ms. Huntley and other MDH PHP staff created a document merging the EPH framework inventories with the strengthening public health in MN EH foundational responsibilities. Ms. Huntley walked meeting participants through this document asking them to focus on the broader foundational responsibilities: what is correct and what areas can we improve. She also asked that they focus on work unique to EH.

Meeting participants engaged in good discussion and had several suggestions for changes. For example, they suggested adding other EH topic areas to make it broader and more encompassing of the EH work done in MN – add nuisance, climate and outdoor air, healthy homes (lead, radon, etc.), and housing. They also felt some of the foundational responsibilities needed rewording, but no consensus on the exact language was agreed upon at this meeting.

Ms. Huntley and Kim Gearin, MDH PHP, will review all the suggested changes and try to incorporate them into a new version of the merged document. Throughout the remainder of 2019, the EHCIB will continue this work and help define foundational public health responsibilities for the area of environmental health using what it has started with the EPH framework.

EHCIB - celebrating 5 years!

Meeting participants took time to celebrate the EHCIB's most recent milestone – 5 years! They partook in a game, which highlighted key milestones and accomplishments over the last five years (see timeline below). Then they had cake and mingled with current and former members and guests. A lunch celebration followed the meeting.

EHCIB five year timeline:

- 2013-2014
 - LPHA and MDH leadership recommend the formation of an interim group, whose recommendations become the basis for formation of the EHCIB
 - o EHCIB holds its first meeting
 - Approves its charter
- 2015
 - Develops FPLS program re-evaluation process
 - Develops and approves its first workplan
 - o Issues a statement of support of MN's state-local EH partnership
 - Begins working to improve the FPLS program evaluation process
- 2016
 - o FPLS program evaluation workgroup officially kicks off its first meeting
 - Creates its second workplan focusing on developing an EPH framework for MN
 - Updates its membership, adds two additional members additional SCHSAC and nonmetro CHB with locally run FPLS program
- 2017
 - Work begins on EPH framework
 - Becomes standing SCHSAC workgroup
 - Launches collection of FPLS statewide performance measures
- 2018
 - Forms a subgroup to evaluate possible short-term solutions to address changes in Rapid Inspection support and use by MDH
 - Restructures its membership to have more reps from non-delegated jurisdictions and other EH areas outside of FPLS
- 2019
 - Collects FPLS statewide performance measures for the 2nd time

- Celebrates 5 years
- Dawn Beck, John Weinand, and Bill Groskreutz officially become longest standing EHCIB members ☺ (here since beginning)

The EHCIB's future

After celebrating the EHCIB's first five years, the time was right to begin thinking about the EHCIB's next five years. To do this, meeting participants broke into small groups and completed a strengths, weaknesses, opportunities, and threats assessment (SWOT) of the EHCIB. After completing the SWOT, the small groups shared their top one to three in each area with the larger group. See Appendix A for the entire SWOT assessment.

The EHCIB will review this SWOT and continue to work towards developing a new work plan by early 2020.

Business Items

Member Updates

Mr. Hogan shared that MDH is very busy with the legislative session. They are tracking many different bills related to environmental health. More to come as the legislative session progresses.

Ruth Greenslade, Goodhue County, shared that they recently completed the National Profile of Local Health Departments, commonly known as the NACCHO Profile Study. It is a survey done every three years. The final deadline to complete this year's survey is soon. The environmental section may be difficult for some local public health agencies to complete. The EHCIB could consider it an opportunity in the future to help with it, so it more accurately represents what is actually happening.

Ms. Drake-Pereyra reminded EHCIB members that she will be out on maternity leave the remainder of 2019. Her colleague, Becky Buhler, will staff and facilitate the EHCIB in her absence.

Word on the Street

Meeting participants asked if there were any updates regarding the delegation agreement with MDA. John Weinand, City of Minnetonka, shared that no agreement on the new delegation has been reached. Currently, MDA is going to evaluate the seven locally delegated programs based on the current delegation agreement. The evaluation starts soon.

EHCIB Leadership Transition

Mr. Hogan thanked Ms. Beck for being the co-chair the last five years. He shared that they would like the EHCIB to consider having a "co-chair elect" to ease the transition for new co-chairs. Due to time, this will be discussed further at an upcoming EHCIB meeting.

FPLS Statewide Performance Measures update

Environmental Health Continuous Improvement Board Minnesota Department of Health Center for Public Health Practice P.O. Box 64975 St. Paul, MN 55164-0975 (651) 201-3880 Ms. Drake-Pereyra shared that FPLS statewide performance measure reporting officially closed and she and her colleagues are beginning to work on cleaning and analyzing the data. They intend to report it to the EHCIB at the July 2019 meeting. Due to time, Ms. Drake-Pereyra will email the EHCIB members the few questions she needs answered before completing analysis.

FPLS Program Evaluation Workgroup update

Due to time, no update was given.

Approve March 2019 Meeting Summary

Ms. Greenslade made a motion to approve the March 2019 meeting summary (https://www.health.state.mn.us/communities/environment/local/docs/ehcib/2019/marsummarv.pdf) and Ms. Beck seconded the motion. No changes were made.

Constituent Engagement

Due to time, this was not discussed.

Take-home Points, Action Items, and Adjournment

Meeting participants agreed on the following take-home points and action items.

Take-home points:

- 5 year celebration! The EHCIB celebrated five years of work advancing the state-local partnership in environmental public health in Minnesota. Current and former members (including retired former members), workgroup participants, and others celebrated with a game and cake at the meeting and joined the post-meeting lunch celebration. Thank you to all who were able to celebrate and who made the last five years great!
- The Environmental Health Continuous Improvement Board (EHCIB) began to look ahead at the next five years. Meeting participants completed a facilitated self-assessment process to look at the strengths and weakness of the EHCIB and what opportunities and challenges may come in the future. Over the next few meetings the EHCIB will build off of this and end with developing its next work plan.
- The Environmental Health Continuous Improvement Board (EHCIB) continues to make progress on its work to develop a framework for environmental public health in Minnesota (EPH framework). Meeting participants reviewed the current draft inventories of the EPH framework within the context of the State Community Health Services Advisory Committee's (SCHSAC) efforts to Strengthen Public Health in Minnesota

(https://www.health.state.mn.us/communities/practice/schsac/workgroups/strengtheninglph.

<u>html</u>). Throughout the remainder of 2019, the EHCIB will work to help define Foundational Public Health Responsibilities for the area of environmental health using what it has started with the EPH framework. More to come on this at the next few EHCIB meetings.

Action Items

- MDH PHP staff will do the following:
 - Update the Strengthening PH in MN and EPH Framework joint document according to recommended changes
 - o Analyze and report the FPLS statewide performance measures at the July EHCIB meeting
- EHCIB members will share the take-home points with constituents

The next EHCIB meeting is Thursday, July 11, 2019. Join in-person at MCIT in St. Paul (free parking available) or remotely using Vidyo. More details are available on the EHCIB website: https://www.health.state.mn.us/ehcib/#materials.

Appendix A: EHCIB SWOT Assessment

	Helpful	Harmful
Internal	<u>Strengths</u>	<u>Weaknesses</u>
	 Depth of knowledge (inspector <-> policy maker) 	 Non-"health" EH representation (PCA, public
	Robust networks	safety/housing)
	Focus on future/improvements/system	High level unawareness of value of EH
	Strong partnership exists	Time
	Progress over last 5 years	Wide variety of programs – EH
	Committed members	URL links reliability
	Willing to have difficult conversations	FPLS programs dominate EH
	Long-standing members and facilitation	Recruitment of new members
	History = impressive!	Take too long for changes
	Variety/expertise of membership	 Functional responsibilities not fully defined
	Development of written workplan	Funding
	Valued discussions	Resources
	Momentum	Non-delegated voice not equally represented
	Participation	Could have engagement from more vs. always the same
	Clear understanding of goals	people
	EPH frameworks developed	 Communications could be better (EHCIB work not valued?)
	Institutional knowledge	 Some regions not represented on LPHA map
	Engaged leadership	 Accomplish things too slowly (speed)
	Facilitated well	 Lack of knowledge of what EHCIB is and does outside of
	Engaged members	state-local FPLS
	Increased representation, increased diversity, and increased	Communication
	communication across MN (e.g. non-delegated voice)	Recruitment challenges for EHCIB with non-delegated LPH

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Helpful	Harmful
Strengths continued	Weaknesses continued Who is responsible? Local/MDH/MPCA/etc.? Lots of partners but who is actually responsible for topics within EHCIB? If small LPH department has a sanitarian, often there is no back-up options available (\$ for services/vulnerability) SCHSAC membership is 1 representative per CHB (vs. county), so there is less opportunity for SCHSAC rep on EHCIB

	Helpful	Harmful
External	Helpful Opportunities Lead on racial equity Transformation of EH Delegation agreement updates Criminal/social justice spotlight Branch out from just FPLS programs Leverage as standing SCHSAC workgroup New PH framework Improvement of EH practice statewide through EPH framework and FPLS program evaluation process Connecting with those not involved Opportunity to share more about other areas EH is public health discussion Build capacity within public health; EPH framework is support and justification/baseline EHCIB/SCHSAC decisions supported by MDH commissioner	Threats Politics Delegation agreement updates Criminal/social justice spotlight Public health funding Political climate against regulation/government Legislative/political policy development County government reorganization Staffing/workforce Data interpreted incorrectly More resources placed for response instead of prevention (i.e. human services vs. public health) Having time to devote to EHCIB (impacts participation) Diminishing interest about EHCIB Limited SCHSAC engagement Diminishing or lack of EH capacity across MN – small
	 Build capacity within public health; EPH framework is support and justification/baseline 	Diminishing interest about EHCIBLimited SCHSAC engagement

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Helpful	Harmful
 Opportunities continued Unify the field, reduce duplication, etc. (FR #6) Promote value of EH Opportunity to measure services not provided, tell story, establish EH as foundational Sometimes MDH does things and doesn't inform locals in advance/timely – opportunity to continue focus on EH-related communication Creative funding stream/where? 	