DEPARTMENT OF HEALTH

At-Risk Population Planning Discussion Guide - Intro

PURPOSE: The intent of this discussion guide is to drive conversations between healthcare coalition members, local public health, and other local partners, to support planning for at-risk populations with access and functional needs.

SCOPE: This discussion is intended to take place at the coalition level and include coalition members, the regional public health preparedness consultant (PHPC), and other local public health representatives as appropriate. The document is structured as a facilitated discussion, with a designated facilitator to guide participants through the discussion.

RESOURCES: Several tools exist to help coalitions conduct this discussion:

- 1. *Introductory PowerPoint Presentation*. This presentation outlines the purpose of the discussion, defines key terms and concepts, and clarifies expected outcomes of the discussion. Notes are included in the notes section of each slide and will help the meeting facilitator to present the information in the slides. This presentation should take about 15 minutes.
- 2. *Facilitator's Guide*. This guide includes prompts, follow-up questions, and resources to assist the meeting facilitator in guiding participants through the discussion and generating conversation among those present. The guide is made up of three parts:
 - a. Part I: Includes discussion questions that are directly related to the HPP and PHEP capabilities. These are the required discussion questions in order to meet the HPP and PHEP BP5 grant duty.
 - b. Part II: Includes additional discussion questions that may be used but are not required in order to meet the HPP and PHEP BP5 grant duty.
 - c. Appendix A: Lists at-risk population planning resources.
- 3. *Participant's Guide*. This guide lists discussion questions for the group to work through plus space for note-taking.
- 4. *Report-Out Form*. This template provides a place to record the results of the discussion including a brief summary of the discussion, identified strengths, identified gaps, and next step action items. **This form will be submitted to MDH by the coalitions as a way to fulfill the aligned grant duty.**

INSTRUCTIONS:

- 1. Gather coalition members, including your regional PHPC, for a facilitated discussion.
 - a. Other partners to consider including in the discussion include local public health, EMS, emergency managers, human services representatives, and local social services agencies that serve populations with access and functional needs.
- 2. Identify a facilitator and note-taker(s).

- a. The facilitator will lead the group through the discussion, keep the group on track, and use the additional questions and prompts in the facilitator guide to keep the conversation moving forward.
- b. The note-taker is responsible for recording pertinent parts of the conversation including best practices, identified strengths, identified gaps, and next step action items. These notes will form the base of what will be included in the report out form.
- 3. The facilitator presents the introductory PowerPoint (optional).
 - a. Notes are available in the "Notes" section of each slide to assist the facilitator with presenting
- 4. The facilitator leads the group through the discussion questions in Part I (required).
 - a. These are the required discussion questions in order to meet the HPP and PHEP BP5 grant duty.
 - b. As the group works through the discussion questions the facilitator may use the prompts and additional questions in the facilitator's guide to keep the conversation moving along.
- 5. The questions in Part II may be used in addition to the main questions if the group so chooses, however, these questions are not required.
- 6. Post-discussion, the RHPC and PHPC should partner together to document the results of the discussion following the prompts in the report-out form template.
 - a. Both RHPC and PHPC signature is required on the report-out form.
- 7. Submit a copy of the completed report-out form to MDH via the HPP inbox (<u>Health.HPP@state.mn.us</u>) by the end of BP5: June 30, 2017
 - a. Submission of this form will fulfill the BP5 HPP/PHEP grant duty.
 - b. In addition, the information in these forms will help to guide future coalition-level and state-level at-risk population planning.

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