



# Foundational Public Health Responsibilities Grant Rollout

Kim Milbrath, DeeAnn Finley, Heather Myhre | Community Health Division  
February 2024

# Land Acknowledgement

The state of Minnesota is home to 11 federally recognized Indian tribes with elected tribal government officials. The State of Minnesota acknowledges and supports the unique status of the Minnesota tribal nations and their absolute right to existence, self-governance, and self-determination. The United States and the State of Minnesota have a unique relationship with federally recognized Indian tribes, formed by the Constitution of the United States, treaties, statutes, case law, and agreements. The State of Minnesota and the Minnesota Tribal governments significantly benefit from working together, learning from one another, and partnering where possible.

This partnership, through a government-to-government relationship, with the eleven tribal nations of Minnesota has the potential to effectively address inequities and build trust that will lead to better outcomes for all of Minnesota.

- Welcome & Introductions
- Overview of Foundational Public Health Responsibilities
- Overview of Foundational Public Health Responsibilities Funding
- Examples of Local Prioritization Approaches
- FPHR Grant REDCap Requirements
  - Activities and Budget Proposal
  - Invoicing & Reporting
  - Grant Timeline & Due Dates
- Foundational Public Health Responsibilities Grant Resources

- Please enter all questions into the chat
- This allows us to capture all questions and provide answers that will be posted online



Kim Milbrath  
Public Health Practice  
Section Manager



DeeAnn Finley  
Planning Director State



Maggie Rothstein  
Aitkin-Itasca-Koochiching  
CHB CHS Administrator



Nick Kelley  
City of Bloomington CHB  
CHS Administrator



Heather Myhre  
FPHR Grant Manager

*Welcome!*

\*This webinar will be recorded



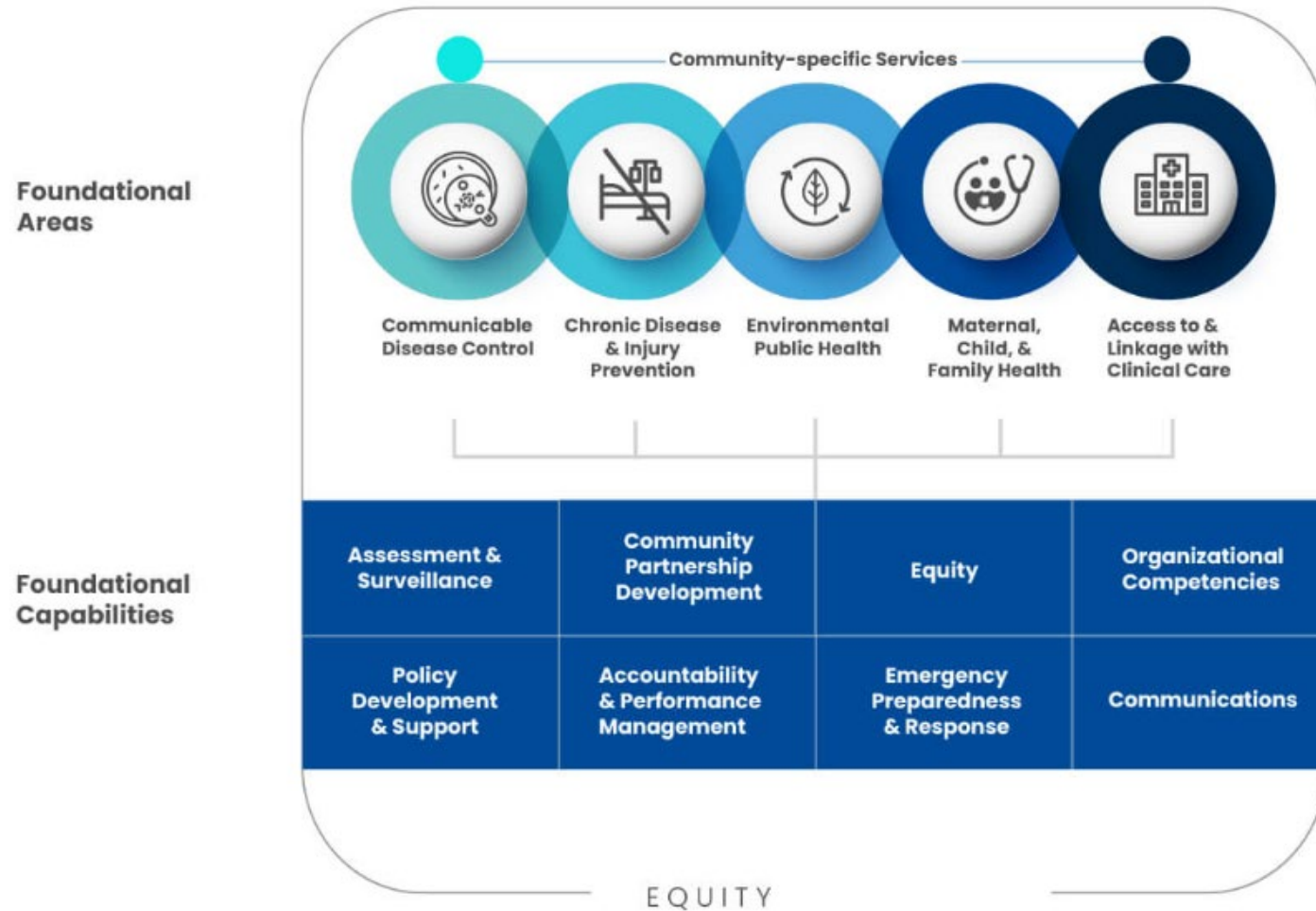
# Overview of Foundational Public Health Responsibilities

## Public Health System Transformation

### Foundational Public Health Responsibilities

#### Foundational Public Health Responsibilities Grant

# Overview of Foundational Public Health Responsibilities



**Foundational Public Health Responsibilities Framework**  
webinar: [FPHR Framework Webinar Recording](#)

# Overview of Foundational Public Health Responsibilities

Substantially Implemented  
 Partially Implemented  
 Minimally Implemented  
 Not Implemented  
 Data Missing



Table 8. Weighted Foundational Responsibility Averages by Agency

Foundational Responsibility	MDH	Greater Than 100,000 Persons Served	50,000-99,999 Persons Served	Less Than 25,000 Persons Served	25,000-49,999 Persons Served
A. Assessment and Planning	2.5	4.0 2.5 2.9 3.0 2.8 2.8 2.5 3.5 3.0 3.8 3.0 3.0 2.5	3.0 1.0 3.0 2.5 3.1 3.4 2.8 2.2 3.2	2.6 2.8 2.0 2.5 2.8 2.5 2.0 2.5 2.5 2.0 2.5 2.8 2.0 2.5 2.2 3.0 2.5 2.6 1.8 2.0 2.0 2.5 2.0 3.0 2.5 3.0	3.5 2.5 2.5 2.2 2.4 2.5 2.9 3.5 2.0 2.8 4.0 2.7 2.0 3.0 2.0 2.5 3.0 2.5 2.3 2.1 3.0 2.3 2.3 3.0 3.1
B. Communications	3.1	3.0 3.0 3.6 3.5 2.5 2.9 2.5 4.0 3.0 3.0 2.5 2.0 2.0	2.7 2.0 2.0 2.2 3.0 3.3 2.8 2.1 2.8	2.0 2.8 2.1 2.0 2.8 2.7 2.8 2.5 2.5 3.0 2.8 3.3 2.0 2.3 2.5 3.0 2.8 3.3 1.6 2.3 2.3 2.5 2.5 2.2 2.1 3.4	3.3 2.3 2.3 2.3 2.9 3.0 3.2 3.1 2.0 2.4 4.0 1.8 2.5 2.0 1.7 2.5 2.5 3.0 2.5 1.8 2.5 2.5 2.5 3.4 2.8
C. Community Partnerships	2.7	3.0 2.8 3.2 3.5 2.8 2.4 3.0 3.2 2.5 3.3 3.0 3.6 2.0	3.0 2.0 2.8 3.3 2.5 2.9 2.8 3.5 2.6	2.2 2.7 3.0 2.3 3.0 2.6 3.0 2.2 2.5 3.0 2.4 3.1 2.5 2.5 2.5 3.0 3.3 3.0 2.0 2.3 2.9 2.5 2.0 3.2 3.0 2.7	3.8 2.5 3.6 2.5 2.4 2.5 3.4 3.3 2.6 2.9 4.0 2.5 2.8 2.4 2.5 2.3 3.3 3.2 2.3 2.0 2.9 2.0 2.5 3.9 3.3
D. Data and Epidemiology	2.8	4.0 3.1 3.5 2.8 3.1 2.9 3.0 3.3 3.0 3.0 2.3 2.9 2.0	3.0 2.1 2.6 2.3 2.1 2.0 1.8 2.0 2.7	1.0 2.1 2.2 1.0 2.5 2.3 2.0 2.0 2.0 1.5 1.7 2.0 2.3 1.2 2.0 3.0 2.8 2.0 2.0 2.0 2.0 2.5 2.0 3.0 2.0 1.9	3.5 2.2 1.7 2.7 2.0 2.0 2.5 2.9 1.7 2.0 4.0 2.0 2.0 2.5 1.6 2.3 2.5 2.8 1.9 1.7 2.0 1.3 2.0 2.5 3.0
E. Health Equity	2.0	3.1 3.4 2.6 3.2 2.7 3.0 2.0 3.0 3.0 2.8 2.9 2.8 2.0	2.8 2.0 2.0 2.5 2.5 2.3 2.2 2.0 2.1	1.5 3.0 2.0 2.0 2.8 2.3 2.0 2.3 2.3 2.0 2.0 2.0 1.8 2.9 2.0 3.0 2.5 3.0 1.8 2.0 2.0 2.3 2.0 2.9 2.0 2.0	2.8 3.0 2.0 2.0 1.1 2.0 2.0 3.5 2.5 2.9 4.0 2.5 2.0 2.5 3.0 2.0 2.5 4.0 2.0 1.9 2.5 2.5 3.0 3.0 2.0
F. Leadership and Governance	2.5	3.1 2.5 3.5 3.5 3.0 2.7 2.1 4.0 3.0 2.8 2.5 3.5 2.0	3.0 2.0 3.0 3.5 3.0 2.0 2.8 2.9 3.0 4.0	2.0 3.0 2.8 2.2 2.5 3.1 3.0 3.0 2.1 2.0 2.5 3.3 1.8 2.3 2.2 3.0 3.3 3.5 2.0 2.0 2.8 2.4 2.0 3.3 2.8 3.0	3.5 2.6 2.3 2.5 3.7 2.5 2.3 3.5 3.0 2.5 4.0 3.0 3.0 2.0 3.0 2.5 3.2 3.5 2.5 1.9 2.7 2.5 2.5 3.6 3.0
G. Organizational Management	2.8	3.5 2.7 3.7 3.6 2.9 2.8 3.3 4.0 3.0 3.5 2.4 3.4 2.5	2.4 2.7 2.8 3.3 3.2 2.8 3.2 3.3 3.1	2.4 3.0 2.8 2.0 2.8 2.3 2.4 2.5 2.9 2.6 2.4 3.7 2.2 2.4 2.8 3.0 3.5 2.9 2.0 2.0 2.9 2.5 2.0 2.9 2.0 2.7	3.2 2.9 2.4 2.0 3.0 2.0 2.5 4.0 2.8 2.9 4.0 2.3 2.3 2.9 3.5 2.8 3.1 3.2 3.1 2.4 2.5 2.6 2.7 3.8 2.9
H. Policy Development	2.3	3.7 2.9 3.3 3.2 2.7 3.0 1.9 4.0 3.0 1.7 3.2 2.1 1.8	3.5 2.2 2.0 2.7 2.0 2.0 2.5 2.5 2.8	1.8 2.8 2.2 1.7 2.8 2.2 1.8 2.5 1.7 2.0 2.2 2.3 2.3 2.5 2.0 3.0 2.6 3.0 1.5 2.0 2.0 2.0 2.0 3.0 2.0 2.0	3.5 2.0 1.7 2.5 2.9 2.5 2.2 2.0 2.0 2.0 4.0 1.3 2.5 2.0 3.0 2.3 2.5 2.8 2.2 2.0 2.1 1.7 2.5 3.8 2.9
I. Preparedness and Response	3.6	3.5 3.4 4.0 2.9 3.1 3.4 3.3 4.0 3.0 4.0 2.5 2.9 2.9	3.4 2.2 3.0 3.5 3.0 3.2 3.2 3.0 3.3	2.0 3.0 2.8 2.5 3.0 2.5 3.0 2.2 2.0 3.0 2.8 2.9 2.5 3.0 3.0 3.4 3.0 1.7 2.0 3.0 2.4 2.0 2.7 2.0 2.0	3.5 2.7 2.5 2.7 4.0 3.0 2.7 4.0 2.9 3.0 4.0 2.0 2.5 2.7 3.1 2.4 3.0 3.0 3.0 2.5 2.4 2.9 2.6 3.0 2.7
J. Infectious Disease Prevention and Control	2.8	4.0 3.0 3.8 2.3 2.9 3.5 2.8 3.4 3.0 3.4 3.0 3.7 2.0	2.9 2.2 2.4 3.8 3.0 2.6 2.8 3.4 2.9 2.1	2.7 2.7 2.3 2.6 2.8 2.2 2.3 2.5 2.0 2.3 2.1 2.7 2.1 2.9 2.6 3.0 3.0 1.5 2.0 2.6 2.1 1.9 3.7 2.0 3.1	3.5 3.0 2.3 3.0 2.7 3.1 2.7 3.2 2.8 3.0 4.0 1.7 2.5 2.1 2.8 1.6 2.7 2.8 2.4 2.5 2.1 2.0 2.0 3.8 2.4
K. Environmental Health	2.3	3.3 3.5 2.4 3.5 3.2 3.0 2.0 3.7 3.0 3.8 1.9 3.0 2.0	4.0 2.8 3.3 2.9 2.0 1.9 3.5 3.8 2.5	2.1 2.0 2.3 1.9 1.6 2.0 1.8 2.9 1.0 1.5 1.0 2.2 1.3 1.6 2.5 2.4 2.9 2.0 1.6 2.0 1.8 1.6 2.0 2.1 2.0 3.0	3.1 2.8 1.0 2.0 3.3 2.5 2.8 1.8 2.0 2.0 4.0 1.0 2.0 2.2 2.8 2.5 3.9 2.1 1.5 1.0 1.6 2.3 1.5 3.4 2.5
L. Prevention and Population Health Improvement	2.9	3.3 2.3 3.6 3.2 2.9 2.7 1.8 3.6 3.0 1.3 3.0 3.1 2.0	3.0 2.2 3.0 2.6 3.0 3.2 3.3 2.7 2.3	2.5 2.9 3.0 2.0 2.5 2.1 2.4 1.6 1.3 1.6 2.9 2.7 1.8 2.5 2.0 3.0 3.0 2.5 1.9 2.3 2.6 2.0 1.2 3.1 2.5 2.4	3.5 2.5 2.8 2.9 3.0 2.0 2.5 3.9 2.0 2.5 4.0 2.0 2.5 2.8 2.9 2.7 4.0 3.0 2.1 2.7 2.8 2.0 2.2 3.5 2.9
M. Access to Health Services	3.4	3.9 2.8 3.3 2.8 2.5 3.0 2.0 3.0 3.0 3.0 3.3 2.0	2.3 1.8 2.0 3.2 2.9 2.0 2.7 2.9 2.0	1.1 2.6 1.8 1.4 3.0 2.0 1.0 2.0 1.0 1.9 2.0 2.4 1.8 1.2 2.0 3.0 2.1 1.6 1.2 2.1 2.3 2.4 2.0 2.7 1.0 2.1	2.8 2.1 3.0 2.5 1.8 3.0 2.0 3.1 2.6 2.0 3.5 2.0 2.0 2.0 2.8 1.9 1.5 2.2 2.5 2.8 2.0 1.0 2.0 3.1 2.6

Cost and Capacity Assessment: [Publications and Resource Documents - MN Dept. of Health \(state.mn.us\)](https://state.mn.us/publications-and-resource-documents)



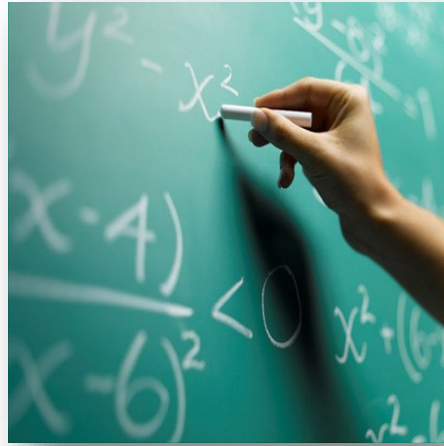


## Funding to Support Foundational Public Health Responsibilities

# Overview of FPHR Funding



Purpose of  
the funding



Funding  
formula



Grant duties



Funding  
distribution

# Purpose of FPHR funding

## MN Statute 145A.131 LOCAL PUBLIC HEALTH GRANT

Subdivision 1: (f) **Funding for foundational public health responsibilities** must be distributed **based on a formula** determined by the commissioner in consultation with the State Community Health Services Advisory Committee. These funds must be **used as described in subdivision 5**.

Subdivision 2: Local match (a) (a) A community health board that receives a local public health grant shall provide at least a 75 percent match for the state funds received through the local public health grant described in subdivision 1 and subject to paragraphs (b) to **(f)**.

Subdivision 5: (b) Except as otherwise provided in this paragraph, funding for foundational public health responsibilities as described in subdivision 1, paragraph (f), must be **used to fulfill foundational public health responsibilities** as defined by the commissioner in consultation with the state community health service advisory committee. If a community health board can demonstrate foundational public health responsibilities are fulfilled, the board may use funds for local priorities developed through the community health assessment and community health improvement planning process.

# Funding Formula

Commissioner of Health approved a funding formula recommended by SCHSAC:

- **Base** annual funding of \$115,000 to each community health board (59.6% of total funding)
- 60% of remaining funds based on **social vulnerability index (SVI)** (24.3% of total funding)
- 40% of remaining funds based on **capacity** (16.2% of total funding)



[SCHSAC FPHR Funding Workgroup Report](#)

[CHB FPHR Funding Awards](#)

# Grant Duties

This funding must be used to fulfill foundational public health responsibilities as defined by the commissioner in consultation with the State Community Health Service Advisory Committee. Based on the recommendation of SCHSAC, **Grantees cannot use these funds for non-FPHR activities at this time.**

## Duties:

- ✓ Grantee shall complete, and update as necessary, proposed activities and a workplan for MDH approval in REDCap. This workplan will assure compliance with funding requirements and make connections with other grantees. Any changes made to the original proposal must be reviewed and approved by MDH.
- ✓ Grantee shall complete a proposed budget in REDCap by the date provided to them by MDH. Any revisions made to the original budget must be made in REDCap and reviewed by MDH.
- ✓ Grantee shall implement activities to carry out foundational public health responsibilities in accordance with the definitions outlined on the [Funding for Foundational Public Health Responsibilities](#) website and [Foundational Public Health Responsibilities Grant Expenditure Guide](#).
- ✓ Grantee shall provide requested financial and programmatic reporting information by the dates provided to them by MDH to meet funding reporting and monitoring requirements.

# Funding Distribution

- CHS Administrators sent a 2024 Grant Award Cover Sheet and Duties
- Nothing to sign or return
- All FPHR Grant awards: [Funding for foundational public health responsibilities - MN Dept. of Health \(state.mn.us\)](#).
- Funding is legislatively a component of the Local Public Health Grant
- Separate set of duties and expectations
- Must be accounted for and managed as a separate funding source

**m DEPARTMENT OF HEALTH**

### Grant Award Cover Sheet

DATE: January 3, 2024

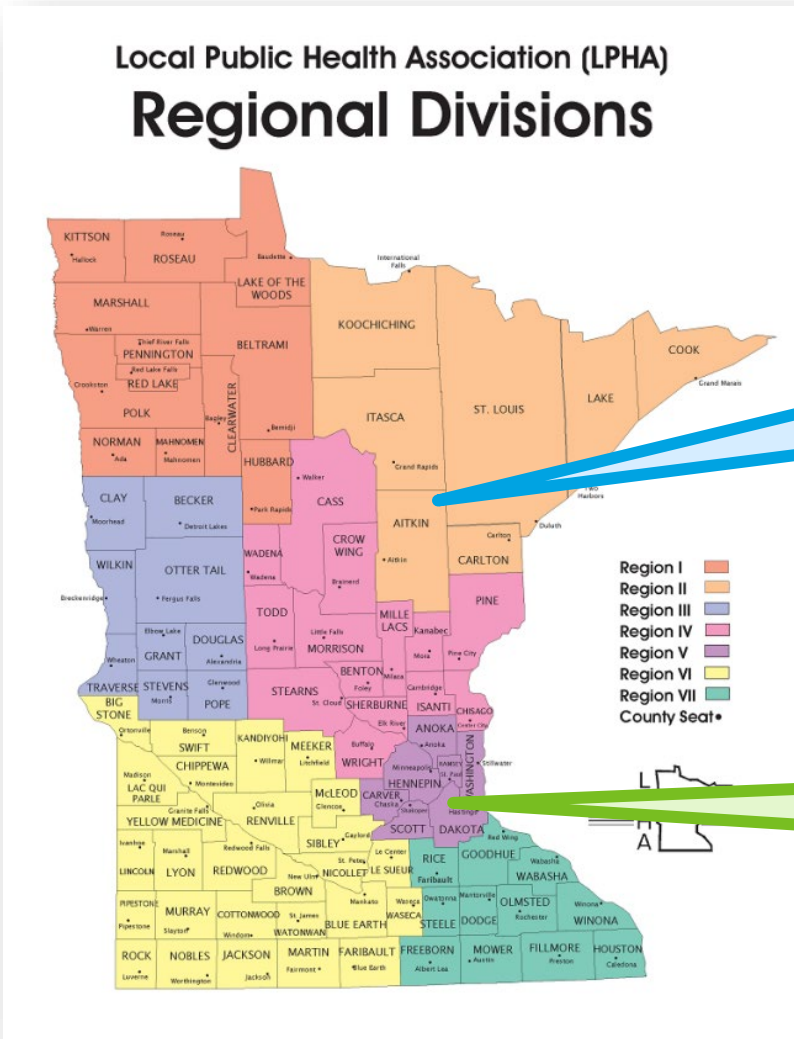
This is to notify you of your Community Health Board's Foundational Public Health Responsibilities Grant award for January 1, 2024 through December 31, 2024 (calendar year 2024). These funds can only be used for the activities outlined in Exhibit A. While connected to the Local Public Health Grant in [Minn. Stat. chapter 145A.131](#) this is a unique funding source and must be tracked separately from the LPH Grant.

CONTACT FOR CHB: «CHS\_Administrator», CHS Administrator  
«AGENCY\_NAMESUPPLIER»  
«Address2»  
«City3», MN «Zip2»

CONTACT FOR MDH: DeeAnn Finley, Community Health Division  
([deeann.finley@state.mn.us](mailto:deeann.finley@state.mn.us) or 651-201-4551)

Grantee SWIFT Information	Grant Agreement Information	Funding Information
Name of MDH Grantee: «AGENCY_NAMESUPPLIER»	Grant Project Agreement Number: NA	Total Grant Funds: \$«FPHR_Award».00
Address of Grantee: «ADDRESS» «CITY», «ST», «ZIP»		
Grantee SWIFT Vendor Number: «SWIFT_Vendor_»	Period of Performance Start Date: January 1, 2024	Total State Grant Funds: \$«FPHR_Award».00
SWIFT Vendor Location Code: «SWIFT_Vendor_»		Total Federal Grant Funds: \$0.00
SWIFT DBA/Fiscal Host: «SWIFT_Vendor_»	Period of Performance End Date: December 31, 2024*	

# Local Examples of Approaches to FPHR Prioritization



**Maggie Rothstein**

Aitkin-Itasca-  
Koochiching CHB  
*CHS Administrator*

**Nick Kelley**

City of Bloomington CHB  
*CHS Administrator*

# Overview of FPHR Grant Tools



Workplan &  
Budget

A circular inset showing a form titled "DEPARTMENT OF HEALTH Foundational Public Health Responsibility Grant Invoice". The form includes fields for "Date:", "CHB:", and "Address:", each followed by a yellow rectangular input box. At the bottom, there is a label "in completing form:" followed by another yellow input box.

Invoicing



Reporting



# REDCap – Conflict of Interest

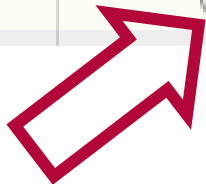
Record ID	Conflict Of Interest	FPHR Grant Proposed Activities/Workplan	Proposed Budget	MDH Approval of Proposals	Activities/Workplan Revision	Budget Revision	MDH Approval of Revisions	FPHR Quarterly Report 1
<u>1</u>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/> +	<input type="radio"/> +	<input checked="" type="radio"/> +	<input type="radio"/>

- We are required by policy to collect this form
- Refers to individual or organizational actual, potential, or perceived conflicts

*\*If you do not have access to the “FPHR Grant” project in REDCap or need a REDCap account, contact Heather Myhre, [heather.myhre@state.mn.us](mailto:heather.myhre@state.mn.us)*

# REDCap – Workplan

Record ID	Conflict Of Interest	FPHR Grant Proposed Activities/Workplan	Proposed Budget	MDH Approval of Proposals	Activities/Workplan Revision	Budget Revision	MDH Approval of Revisions	FPHR Quarterly Report 1
<a href="#">1</a>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/> +	<input type="radio"/> +	<input checked="" type="radio"/> +	<input type="radio"/>



Please read through all instructions

Check all responsibilities that apply to your proposed work

**FPHR Grant Proposed Activities/Workplan** Data Access Group: [No Assignment] ?

Editing existing Record ID 3.

**Record ID** 3

**Name of Person(s) Completing Proposal** (the individual(s) who should be contacted if there are questions about the proposed activities)  
\* must provide value

**Instructions:**

The purpose of this funding is to support the implementation of Foundational Public Health Responsibilities by community health boards (grantees). The Foundational Public Health Responsibilities are the unique responsibilities of governmental public health that define a minimum package of public health capabilities and programs that must be available in every community.

This funding must be used to fulfill foundational public health responsibilities as defined by the commissioner in consultation with the State Community Health Service Advisory Committee. Based on the recommendation of SCHSAC, Grantees cannot use these funds for non-FPHR activities at this time.

More details on the Foundational Public Health Responsibilities and examples of the work supported by these funds can be found on the MDH website: [Funding for Foundational Public Health Responsibilities](#).

Please identify the Foundational Capabilities and/or Foundational Areas you think your CHB will spend the FPHR Grant funds in the coming year, through December 31, 2024. You may list activities in any or all areas. It is recommended that you review your cost and capacity assessment for ideas on where to focus your activities. MDH staff may follow up with you to obtain more detail about these activities.

You will be able to update these proposed activities throughout the project period. You will also be asked to report on the progress of these activities in quarterly reports.

**1. Foundational Capabilities (FC)/Foundational Areas (FA)**  
(check all that apply)  
\* must provide value

- Assessment and Surveillance (FC)
- Community Partnership Development (FC)
- Equity (FC)
- Organizational Competencies (FC)
- Policy Development and Support (FC)
- Accountability and Performance Management (FC)
- Emergency Preparedness and Response (FC)
- Communication (FC)
- Communicable Disease Control (FA)
- Environmental Public Health (FA)
- Chronic Disease and Injury Prevention (FA)
- Maternal, Child, and Family Health (FA)
- Access to and Linkage to Care (FA)

For each and every foundational capability and area chosen, a corresponding text box will appear

\* must provide value

- Assessment and Surveillance (FC)
- Community Partnership Development (FC)
- Equity (FC)
- Organizational Competencies (FC)
- Policy Development and Support (FC)
- Accountability and Performance Management (FC)
- Emergency Preparedness and Response (FC)
- Communication (FC)
- Communicable Disease Control (FA)
- Environmental Public Health (FA)
- Chronic Disease and Injury Prevention (FA)
- Maternal, Child, and Family Health (FA)
- Access to and Linkage to Care (FA)

**Foundational Capability: Community Partnership Development.** Please describe your proposed activities in this FPHR. Be as specific as possible. Please provide enough detail to assure that proposed activities are foundational. Include details on how these activities will enhance your agencies capacity to achieve this FPHR. If known, include any partners you intend to work with to carry out these activities. Describe if the proposed activities are NEW or are EXPANDING on an existing FPHR already happening in your CHB.

\* must provide value

Expand

**What technical assistance or support might you need to carry out these activities?**

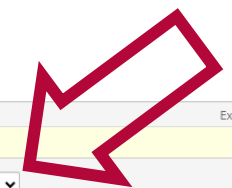
Expand

**Other comments**

Expand

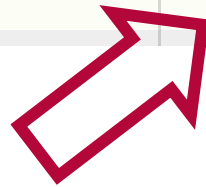
**Form Status**

Complete? U Incomplete U



# REDCap – Proposed Budget

Record ID	Conflict Of Interest	FPHR Grant Proposed Activities/Workplan	Proposed Budget	MDH Approval of Proposals	Activities/Workplan Revision	Budget Revision	MDH Approval of Revisions	FPHR Quarterly Report 1
<a href="#">1</a>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/> +	<input type="radio"/> +	<input checked="" type="radio"/> +	<input type="radio"/>



# Proposed Budget

For each budget category with an entered amount, a corresponding text box for budget narrative will appear

Editing existing Record ID 3.

Record ID 3

Name of Person(s) Completing Proposed Budget (the individual(s) who should be contacted if there are questions about the proposed budget)  
\* must provide value

Instructions:  
Please complete a budget for the 2024 calendar year. Refer to the MDH website: *Funding for Foundational Public Health Responsibilities* for your CHBs annual award amount. The amounts you enter below should add up to the total annual award for your CHB.  
MDH understands that this is a proposed budget, not all details may be known at this time, and that budget line-item amounts may change. You will be asked to update the proposed budget throughout the year when changes of 10% or more in any budget category are needed.  
Budget Narrative: Describe what expenses will be paid for in each budget category with as much detail as you can. Budget expenses should match your proposed activities.

Category	Amount
Salary and Fringe	65000
Contractual Services	
Travel	
Supplies and Equipment	
Other	

Salaries and Fringe Budget Narrative: Describe employee time anticipated to be supported by these funds.  
\* must provide value

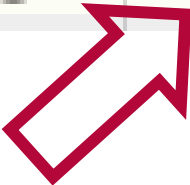
Subtotal 65000 View equation

Indirect Costs (10% or less)

Total 65000 View equation

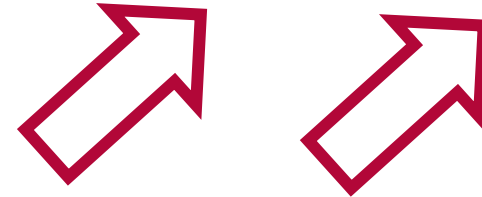
# REDCap – MDH Approval

Record ID	Conflict Of Interest	FPHR Grant Proposed Activities/Workplan	Proposed Budget	MDH Approval of Proposals	Activities/Workplan Revision	Budget Revision	MDH Approval of Revisions	FPHR Quarterly Report 1
<a href="#">1</a>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/> +	<input checked="" type="radio"/> +	<input checked="" type="radio"/> +	<input type="radio"/>



# REDCap – Workplan and Budget Revisions

Record ID	Conflict Of Interest	FPHR Grant Proposed Activities/Workplan	Proposed Budget	MDH Approval of Proposals	Activities/Workplan Revision	Budget Revision	MDH Approval of Revisions	FPHR Quarterly Report 1
<a href="#">1</a>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/> +	<input checked="" type="radio"/> +	<input checked="" type="radio"/> +	<input type="radio"/>





# REDCap – Workplan and Budget Revisions

- ✓ If workplan activities or budget need to change (more than 10%), submit a revision – any time
- ✓ Make sure to mark it “Complete”!
- ✓ Once revisions are submitted, MDH will review and approve

Activities/Workplan Revision (1)	
1	<input checked="" type="radio"/>

Budget Revision (1)	
1	<input checked="" type="radio"/>

MDH Approval of Revisions	<input type="radio"/>
---------------------------	-----------------------

- Invoice template available on website: [FPHR Invoice](#)
- Invoice quarterly
  - January 1 to March 31, 2024 (Q1) due April 30, 2024
  - April 1 to June 30, 2024 (Q2) due July 31, 2024
  - July 1 to September 30, 2024 (Q3) due October 31, 2024
  - October 1 to December 31, 2024 (Q4) due January 31, 2025
- Submit to inbox [Health.LPHAInvoiceSubmission@state.mn.us](mailto:Health.LPHAInvoiceSubmission@state.mn.us)

# REDCap – Quarterly Reporting

Record ID	Conflict Of Interest	FPHR Grant Proposed Activities/Workplan	Proposed Budget	MDH Approval of Proposals	Activities/Workplan Revision	Budget Revision	MDH Approval of Revisions	FPHR Quarterly Report 1
<u>1</u>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/> +	<input checked="" type="radio"/> +	<input checked="" type="radio"/> +	<input type="radio"/>



# Quarterly Reporting

## Foundational Public Health Responsibilities Grant

PID 2671

Actions:



Modify instrument



Download PDF of instrument(s) ▾



[Video: Basic data entry](#)



### FPHR Q1 Report (Jan-Mar 2024)

Data Access Group: [No Assignment] ?

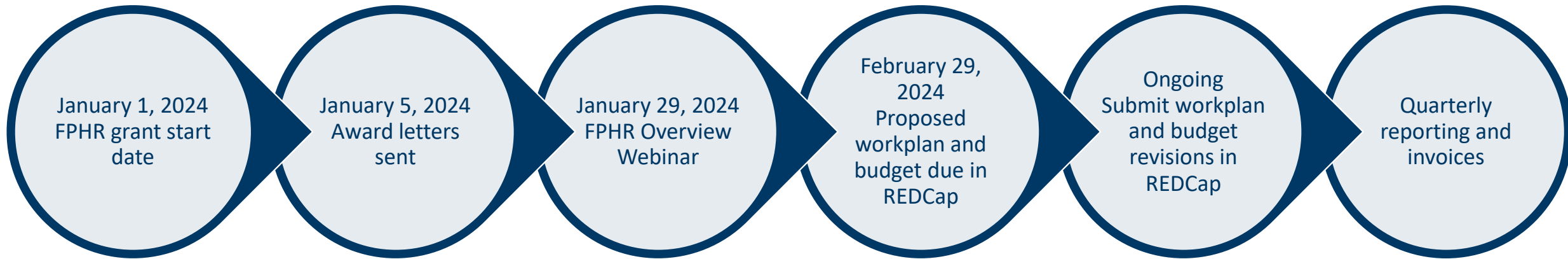


Editing existing Record ID 2.

Record ID

2

This report is meant to showcase the progress your Community Health Board has made around the implementation of Foundational Public Health Responsibilities. Please provide an update for each foundational capability/area in which your CHB has worked during the past quarter. If a foundational capability/area is a part of your workplan, but there is nothing to report for the quarter please enter: "Nothing to report this quarter" in the text box. Please enter: "NA" if a foundational capability/area is NOT a part of your workplan.



## Grant Timeline and Due Dates

# FPHR Resources

- FPHR landing page: [Foundational Public Health Responsibilities - MN Dept. of Health \(state.mn.us\)](https://state.mn.us)
  - FPHR summary document: [Foundational Public Health Responsibilities - National Headlines, Minnesota Activities \(PDF\)](#).
  - Foundational Public Health Responsibilities Framework webinar: [FPHR Webinar](#)
- FPHR Grant landing page: [Funding for foundational public health responsibilities - MN Dept. of Health \(state.mn.us\)](https://state.mn.us)
  - Expenditure guide: [FPHR Expenditure Guide | Updated Jan 9, 2024 \(state.mn.us\)](#)
  - Invoice template: [FPHR Grant invoice](#)
  - FAQs
- Cost and Capacity Assessment: [Publications and Resource Documents - MN Dept. of Health \(state.mn.us\)](https://state.mn.us)

Public Health System Transformation landing page: [Transforming the Public Health System in Minnesota - MN Dept. of Health \(state.mn.us\)](#)

State Innovation Projects: [Infrastructure Fund innovation projects - MN Dept. of Health \(state.mn.us\)](#)

# Questions?

- Submit questions to Heather Myhre: [heather.myhre@state.mn.us](mailto:heather.myhre@state.mn.us)
- REDCap FPHR Office Hours (REDCap questions)
  - February 8 – 9:00am-10:00am
  - February 13 – 3:00pm-4:00pm



# Thank You!

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