

Public Health Infrastructure Grant Year 2 in Review

The CDC (Centers for Disease Control and Prevention) awarded the Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems Grant (PHI Grant) to the Division of Public Health (DPH) in late 2022. This resource details both the accomplishments of PHI Grant implementation to date and foreshadows what's coming next—all thanks to staff from across DPH who serve as subject matter experts and strategic advisors for the broad range of work supported by this funding.

Grant vision

Wisconsin's governmental public health funding has ranked among the lowest of all states for many years,¹ which contributes to gaps in our system's infrastructure. DPH's vision for the PHI Grant since initially awarded was to identify, quantify, and implement strategies to address those infrastructure gaps. With data collection from the baseline assessment completed early in Year 2 (more on page 2), DPH has since been working with governmental public health partners to analyze, synthesize, and strategize with these critical data sources. In the less than three years remaining of the PHI Grant, DPH will continue The road to robust and sustainable public health infrastructure in Wisconsin.

to lean into its partnerships to find ways to build on the progress made thus far and seek sustainable infrastructure-strengthening solutions to persist beyond the PHI Grant itself.

> Read about accomplishments in pursuit of DPH's vision for the PHI Grant on pages 2-6.

Year 3 forecast

- ✓ DPH will continue to seek ways of making data more readily accessible to and actionable for local and Tribal health departments (LTHDs) such as by creating online dashboards.
- Through the data modernization strategy areas of the PHI Grant, the DPH Office of Health Informatics (OHI) expects to move into procurement and contracting steps for the Immunization Information System Modernization, Data Request Tracking System, and Metadata projects. OHI will also wrap up LTHD site visits for and issue a report of findings from the Statewide Data Infrastructure Assessment.
- ✓ DPH will implement a collaborative process to allocate a subset of PHI Grant funding to support strategic, innovative efforts to strengthen infrastructure based in part on evidence from the baseline assessment.

¹ America's Health Rankings, "Public Health Funding by State." <u>https://www.americashealthrankings.org/explore/measures/PH_funding</u>

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Accomplishments: Identifying and quantifying needs

The following are highlights of work across DPH in support of the first two components of the grant vision above—identifying and quantifying areas of opportunity for strengthening public health infrastructure.

Baseline assessment

The public health Workforce and Costing and Capacity Assessments were integral to the overall vision for the PHI Grant. Early in Year 2, data collection for each was completed. As of today, the Data-to-Action Executive team—a collaborative group including leadership from DPH, local health departments, and the Wisconsin Association of Local Health Departments and Boards (WALHDAB)—is reviewing this data and identifying strategic ways it can be collectively actioned to further statewide public health system transformation.

The **Workforce Assessment** was the first Wisconsin-specific statewide assessment of local and state governmental public health workforce and yielded more than 1,700 responses. The results from this assessment were analyzed, visualized, and shared with local health department (LHD) leadership and DPH staff to facilitate data-driven workforce development planning.

The **Costing and Capacity Assessment (CCA)**, completed by 77 LHDs and by DPH, assessed our statewide capacity to provide the Foundational Public Health Services (FPHS),² current spending on FPHS, and needed resources to facilitate full implementation of FPHS.

Strengthening all partnerships, especially those with Tribal agencies, is a foundational priority in our efforts. DPH hired a Tribal Public Health Navigator to support this partnership building, however this position was not filled until after these assessments were conducted. DPH engaged Tribal public health partners prior to launching each assessment above; one Tribal Nation did choose to complete the CCA, but none participated in the workforce assessment. Thus, DPH is continuing to discuss with leaders of Tribal public health agencies the best ways to assess and capture their needs as we consider statewide public health system transformation.

Additional data-related efforts

While the baseline assessment is the main way in which we are fulfilling this first component of the vision for the PHI Grant, the following are yet more examples of how the PHI Grant is supporting critical efforts to better understand and therefore more effectively target areas of opportunity across our system.

The Public Health Data Infrastructure

Assessment conducted by OHI began in Year 2 and as the project wraps up now in Year 3, will transition into joint strategic planning with local and Tribal public health partners. OHI intends to have data infrastructure improvement projects moving forward across the state later this year. The **State Health Plan** team began conducting a pre-assessment landscape analysis; engaging with more than 50 partners in Wisconsin to understand their health and well-being concerns and priorities; and collecting quantitative data on a wide range of public health topics to develop the 2025 State Health Assessment. The team has already stood up teams for each of the six priority areas: economic well-being, healthy housing, mental health, safety, social connectedness and belonging, health care. Health equity strategists in the Office of Policy and Practice Alignment (OPPA) completed **comprehensive interviews of both OPPA colleagues and local health departments**—**to identify health equity strengths**, inform professional development priorities and technical assistance needs, and enhance collective capacity for

health equity work.

² Public Health Accreditation Board, "The Foundational Public Health Services." <u>https://phaboard.org/center-for-innovation/public-health-frameworks/the-foundational-public-health-services/</u>

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Accomplishments: Strengthening infrastructure

The following are highlights of efforts within DPH, efforts among LTHDs, and collaborative efforts between DPH and LTHDs. Many of these activities stem directly from data collection efforts detailed above. All of these activities demonstrate strategies for strengthening infrastructure, such as through performance management and quality improvement, workforce development to grow capacity and expertise, and more.

One of the simplest ways to quantify the impact of the PHI Grant on our infrastructure is to look at the funding directly supporting members of our governmental public health workforce—to date, Wisconsin's PHI Grant has supported some portion of the work accomplished by more than 200 members of our workforce!

Thirty-three DPH staff across all eight bureaus and offices were paid through the PHI Grant for at least a portion of Year 2. More than 170 staff at local and Tribal health departments received at least a portion of their wages from their agencies' PHI Grant passthrough allocations in Year 2.

In addition to the directly funded members of our workforce, the PHI Grant supports the work of two key partners who bolster and complement the work of DPH and LTHDs.

- The University of Wisconsin Population Health Institute (UWPHI) provides training and technical assistance to LTHDs through both data-driven programming of virtual events open to all governmental public health staff and targeted virtual and in-person support from individual LTHD requests.
- WALHDAB is our state association for county and city health officials. WALHDAB leverages PHI Grant funds to expand its efforts to provide both health departments and boards of health with resources, guidance, and opportunities for peer learning and networking. WALHDAB is also partnering with DPH to strengthen our public health system overall through the Data-to-Action Executive Team.

Within local and Tribal public health

Passthrough funding from the PHI Grant enables essential efforts among LTHDs to strengthen infrastructure. According to the work plans developed by each LTHD subrecipient of DPH PHI Grant funds, the most common objectives are to retain staff (selected by more than 75% of LTHDs) and to train staff (selected by more than 50% of LTHDs). The following are only a few of the great examples of how the PHI Grant is directly impacting these agencies and the communities they serve.

Manitowoc County Health Department

"Funds supported work on organizational competencies, and we were able to train additional staff in accounting-related processes to improve efficiency and accuracy in financial areas of our department."

Buffalo County Health & Human Services

"We partnered and created a memorandum of understanding with two of our surrounding county partners to provide job shadowing and training to new staff who share the same job duties and programs for easier training and knowledge uptake, as well as establishing networking and good working relationships."

Marquette County Health Department

"Turnover in our department has been at an all-time low. This team is collaborative, motivated, and dedicated to public health!"

Rusk County Health & Human Services

"Being able to have three of our county health and human services board members join us for our strategic planning kick off and to have almost all our staff present was very nice. Not only does this help with the strategic planning, it also strengthens our ties with each other and our board. Being able to hear from each other what we are working on and what we are hopeful for in the future was really encouraging."

Through collaboration with and support of LTHDs

PHI Grant-funded staff and DPH partners, UWPHI and WALHDAB, provide direct support to LTHDs. These examples of PHI Grant-funded support are only a portion of the support our organizations provide—and have provided long before the PHI Grant. However, these staff help demonstrate the impact the PHI Grant continues to have on our overall capacity to provide a greater breadth and depth of support.

Highlights of support provided by PHI Grant-funded staff within DPH

- Public Health 101 is a system-wide orientation for state, local, and Tribal health department staff. During Year 2, an interdisciplinary team of DPH staff hosted six new public health employee orientations, with a total of 280 participants representing 78 different organizations. Participants were 37% more confident in relevant knowledge and abilities after attending orientation!
- In partnership with local and Tribal health department staff, OPPA health equity strategists co-developed a narrative curriculum and have delivered trainings to LTHDs across the state. The OPPA health equity strategists are also training DPH and LTHD staff to facilitate narrative trainings within their own communities. This helps to improve sustainability and growth of public health narrative in Wisconsin.

Spotlight: DPH's new Tribal Public Health Navigator

One of the PHI Grant-funded DPH positions is the new Tribal Public Health Navigator (TPHN). The TPHN works within the DPH Administrator's Office and serves as a conduit for DPH staff working with Tribal partners and the DHS Tribal Affairs Office (TAO). This position helps streamline communications and strengthen relationships across the Division with Tribal Nations in Wisconsin and the TAO. The TPHN was onboarded halfway through Year 2 and is already providing critical insight and support to colleagues. For example, the TPHN is supporting the Public Health Data Infrastructure Assessment by reviewing content and facilitating connections with Tribal partners.

- The OPPA local systems data strategist provided individualized technical support to at least 14 LTHDs, including conducting a Microsoft Excel workshop for one LTHD. The local systems data strategist is now working to develop an accessible Excel training for LTHD staff.
- The OPPA communications strategist provided individualized technical support to LTHDs such as by creating and presenting on accessible communications to the Generalists Networking Group of LTHD staff across the northern, southern, and western regions. The OPPA communications strategist also continued to support the statewide Wisconsin Public Health Communications and Public Information Officer Network of local and Tribal public health staff.
- The DPH performance excellence coordinator provided individualized technical support to LTHDs and launched the Results-Based Accountability (RBA) Partnership Cohort 2 to provide three local health departments and their community-based organization partners with RBA Certifications and two years of coaching and technical assistance. The expertise provided is beneficial to alignment and reinforcement of requirements associated with public health accreditation and DHS 140 reviews.

Highlights of support provided by WALHDAB

- WALHDAB delivered a public health law training series for health department personnel on health officer powers and duties in the prevention, suppression, and control of communicable disease. The three sessions had a combined 430 health officers, legal counsels, administrators, and board members.
- Based on data and suggestions from its members, WALHDAB also facilitated and coordinated workshops and presentations, such as Public Health Law 101, Deliberative Dialogue, and Foundations of Data Equity.

Highlights of support provided by UWPHI

- UWPHI provided an Introduction to Belonging presentation and workshop to Southwest Suburban Health Department, a newly merged agency of the West Allis and Greenfield Health Departments. This training supported efforts to bring together the agency's new staff to foster collaboration.
- UWPHI facilitated an in-person training focused on skills to strengthen community partnerships for staff from Green County Public Health and the Crawford County Health Department. Participants examined why community partnerships are essential for an effective and powerful health department; engaged in collaborative map of current partnerships; and used the maps to identify areas of potential growth.
- UWPHI hosted five virtual Immersions, where local and Tribal public health staff had opportunities to learn about topics like public health narrative and multisectoral community partnerships. Attendance averaged more than 100 for each.
- UWPHI facilitated six virtual Wisconsin Discusses sessions on topics like public health system transformation; the sessions averaged nearly 50 attendees each.

Through state- and system-level initiatives and improvements

These state-level initiatives are a sampling of those of DPH staff and the PHI Grant program intended to implement the Foundational Capabilities more efficiently and effectively. Note that not all Foundational Capabilities are represented, and these are select examples of some of the work being done within DPH.

Foundational Capability: Assessment and surveillance

- OHI's Statewide Public Health Data Infrastructure Assessment moved from data collection to onsite and virtual site visits with individual health departments through the end of Year 2 Tribal health partner outreach was initiated late in the year.
- The Data Interoperability project team completed Proofs of Concept with three cloud platform vendors to support cloud migration for public health data in Year 3 and beyond.
- The Wisconsin State Lab of Hygiene moved all labs into the contemporary Laboratory Information Management System, realizing greater capabilities to address growing data and functional requirements.

Foundational Capability: Communications

- PHI Grant funding supported the development of a new software-enabled process for the routing, review, and approval of external DPH communications. This new system will provide a more user-friendly experience to staff when submitting materials and ensure more timely approvals.
- Both OPPA and DPH communications strategists continuously support colleagues with developing new communications deliverables by providing plain language reviews; ensuring alignment with the DPH style guide to bring consistency to all DPH communications; and checking for accessibility of all materials.

Foundational Capability: Organizational competencies

Workforce development and human resources

- An interdisciplinary team of DPH staff in OPPA and the Bureau of Operations hosted five DPH 101 employee orientations for 84 new staff members—32% of whom were more confident in relevant knowledge and abilities after attending orientation.
- OPPA workforce development staff updated DPH's public-facing workforce development webpage for increased usability.
- DPH workforce development staff launched a division-wide shared leadership infrastructure to support workforce efforts including action teams and a quarterly workforce development collaboration and coordination space.
- The "First Forward" professional development space opened to all DPH staff. It was designed by DPH workforce development section to support the needs of employees identifying as first-generation professionals.

Foundational Capability: Health equity

- DPH health equity strategists partnered with colleagues to develop the DPH Health Equity Resource Library, which offers readily available information to support programs in implementing health equity principles across their work.
- DPH health equity strategists acquired and enhanced skills to provide support for DPH and external partners on developing the best practices in employee recruitment, grant application development and monitoring, development of public-facing publications, and more.
- DPH health equity strategists developed several resources and trainings to build the capacity of our public health workforce—notably, one health equity strategist developed the Health Equity 101 training, now an integral part of the system-wide Public Health 101 training detailed above.

Foundational Capability: Organizational competencies

Financial management, contract, and procurement services, including facilities and operations

- DPH identified a software vendor and system to replace the existing Grants and Contracting system with one that is more user-friendly and effective in streamlining fiscal relationships between DPH and LTHDs.
- The DPH open records specialists completed 234 open record requests in an average of 19 business days, ensuring that DPH remains compliant and fosters transparency.
- DPH onboarded a new travel and meeting expense coordinator to assist colleagues with travel and meeting expense requests and approvals and bring efficiency to processes so that staff can reach and convene partners across the state.

Foundational Capability: Accountability and performance management

- The PHI Grant management team finalized its approach to providing Public Health Accreditation Board (PHAB) funding support to LTHDs. With input form a focus group of local health officers in mid-2024, the PHI Grant management team requested and received a sole source waiver to contract directly with PHAB to both cover fees on behalf of LTHDs and for PHAB staff to provide targeted to technical assistance to LTHDs working toward achieving or maintaining accreditation status.
- The performance excellence coordinator supported DPH colleagues by hosting monthly Performance Excellence Office Hours and facilitating a Results-Based Accountability Community of Practice.
- The PHI Grant allowed DPH to hire a performance excellence intern through the State of Wisconsin Summer Diversity Internship Program. The intern provided valuable fresh eye reviews and completed several deliverables for the DPH performance excellence committee, which works to advance performance excellence across all eight bureaus and offices.