CJS call 03/19/18

Jodie, Meghan, Mark Miller, Nicole Robinson, Dana DeBruyn, Kevin B., Tracy Wood, Kevin G, Nancy Bramer, Laura de la Rambelje, Tammy Movsas

Materials distributed

Mark: I did some research per request for free training resources; that's included in the materials. For supervision training, I found a link with 9 sources for that type of training. Also, a Harvard free program seemed to be pretty good link. I also did the training needs analysis and mentoring model proposal. Pros and cons of mentoring models were also sent out.

No corrections to the minutes.

Mentorship discussion

There were reactions to the model written up by Mark. It would be good to take advantage of existing regions. Mark sent a map that Meghan had that shows regions that are in existence. Northern MI PH Alliance is possible pilot target, and Jane Sundmacher (of the NMPHA) said one item to be discussed at a recent strategic planning meeting was a mentorship program. Mark has not reached out to other regions, but has reached out to forums about the mentoring program.

Tracy-Kevin H. and Jane did bring up the idea to the health alliance meeting (NMPHA). The group is made up of health officers, technology, communications, and EH workgroups.

Dana- Questioned whether the Southwest group was actually a sub region of the Michigan Environmental Health Association.

Meghan- Not a formally organized group; typically just health officers. All are more loose groups.

Nicole-*UP local health leaders* also is a group, and there is a group made up of coordinators of programs.

No other known groups.

Mark -My preference- Northern Michigan health alliance group, to target for first trial.

Kevin G- MEHA also has group that could be beneficial.

Mark Asked whether the group is comfortable with Mark working with MALPH to detail out more, and discuss with a couple regions, to look at pilot later this summer.

Kevin G- Worried about the cost. Have to start somewhere and figure out if feasible with funding.

MARK — Is it better to have a one-size fits all, for instance when a mentee makes arrangements with mentor and set up for the whole year? Or is a group better? MALPH to be go-to to get people connected.

Tammy- Should be a more long term arrangement, because of the infrequency of certain situations, such as a TB outbreak.

Kevin B-In the Quality of Life Model, everyone is encouraged to have an on-going relationship with a mentor, even though there is no longer a formal relationship.

Kevin G- MALPH would basically be a clearinghouse? Assisting with logistics?

Nancy- What about counties that don't belong to a region? What happens in that scenario? Meghan's recommendation would be to pair up with neighboring counties, and set up regions for monthly phone calls. Meghan's goal is to take the map, find regions for everyone and encourage them to reach out and speak together at least every other month, relying on each other especially if something is going to be ongoing.

Bottom-line

Mark will discuss further with Jodie and Meghan, as well as the NMPHA folks, and come up with a plan for a pilot mentoring program.

Training Survey

Mark

Themes seem to be finance, PH 101, budget, contracts, grants, leadership, supervision, working with elected officials, active shooter, and media interactions. Regarding "Active Shooter", Marcus previously talked about having resources available for LHDs to take advantage of, and also address the PH legal responsibilities for safety of employees. Annette Mercatante recommended a PH101 (back in October) on how things work, with state, budget, DEQ, MDARD, etc. relationships. Who are the people to take care of these relationships?

Kevin- If MDARD knew of new people coming in, they could easily set up meetings for orientation.

Meghan- is it possible to formulate that into a PowerPoint or toolkit? Kevin to work to put together.

Dana- Could put together timeline for orientation of new hires, and resources as well. Staff does currently reach out to someone new.

Mark- Should we do a high-level presentation by MDARD, MDEQ and MDHHS and the resources that are available?

Laura- Would this be in-person as well as the PowerPoint? Both in-person and resources after the trainings should be available.

Mark-For the Public Health Code and legalities in PH, what are the thoughts?

Laura- We are continuing to fund those efforts across the state (the trainings on the PHC).

Meghan- We have been talking about PH Law 2.0. Further down the line PH law1.0 will be revisited. We can guide where to go for information on PH law.

Mark- On general supervision and contracts, what should approach be?

Kevin B -Maybe a panel of some of better leaders? To answer questions and work through issues. Draw locally, for the panel, from the HO when we are in that area. Could write up some scenarios and what their responses would be.

Mark-Sounds like a consensus on two items for curriculum: PH101 and panel for leadership. Other subjects? Finance and funding streams (part of PH101 or on its own separate section of day?)

Laura- probably should be given its own time. **Kevin** to try to put some of this in their presentation. How to use finance to deal with local government.

Crucial conversations and community engagement? Is this an important topic that should be part of training?

Dana- Not sure that would rise up to be and agenda item, but maybe compile resources for the mentorship program. Maybe spend a short time on it and direct to resources.

Bottom-line

Mark to discuss further with Jodie and Meghan and send out a draft curriculum.

Michigan Manual

After a meeting with Meghan and Jodie, Mark to send proposal out to the group on how manual should work. Send back comments to him.

Next call April 30th. Materials will be out by April 20th

Meeting adjourned at 11:00am.