

Spirit of Community Health

RWJF Public Health Services & Systems Research (PHSSR) Study

Tribal Public Health Services and Systems Research: Learnings and tools for performance improvement

National Indian Health Board

Tribal Public Health Summit

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Acknowledgement

The preliminary results presented herein are one component of a study titled: *“Investigating characteristics of tribal public health system organization and performance”*

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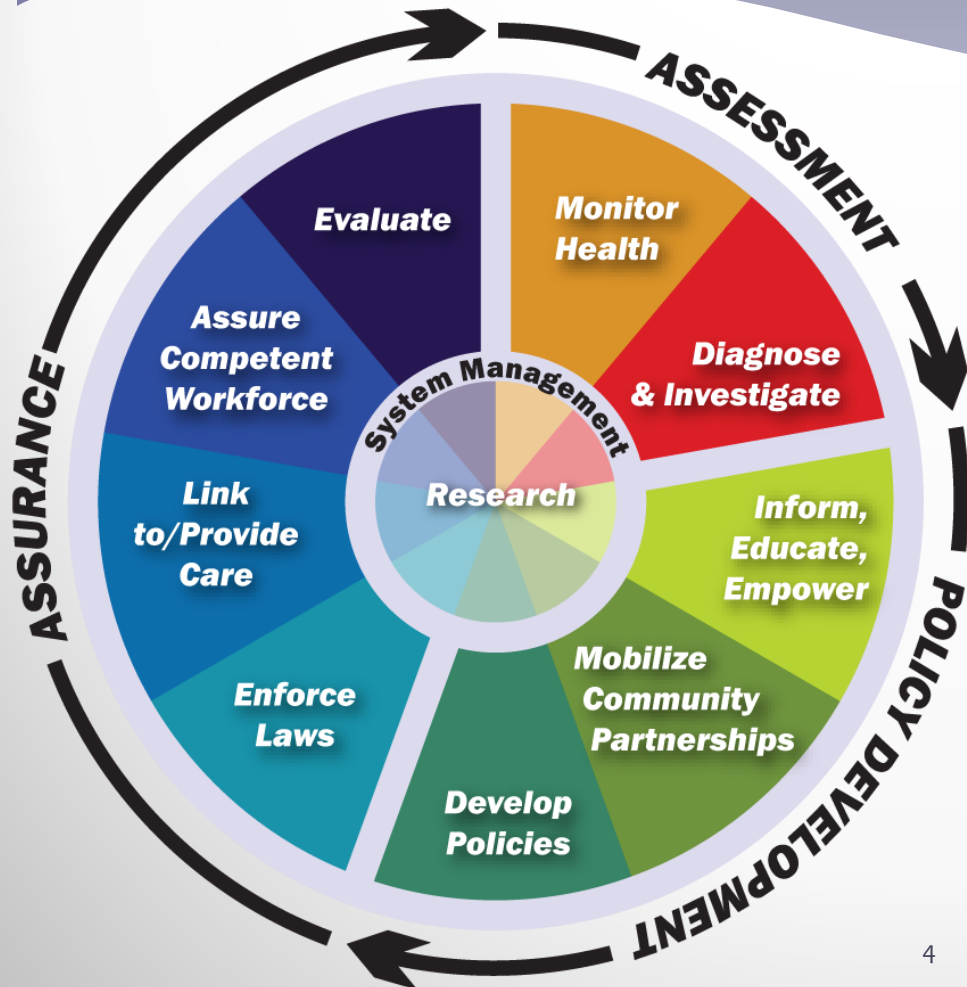
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Participants will...

- * Understand what Public Health Services and Systems Research is and how this study is designed to provide evidence to practitioners, policy-makers, and partners seeking to make sound decisions about strategies to improve tribal population health.
- * Identify at least three new tools or opportunities that tribal public health agencies could use for improving their public health systems based upon findings from this study.
- * Describe implications of the findings for tribal public health practitioners and PHAB accreditation standards.

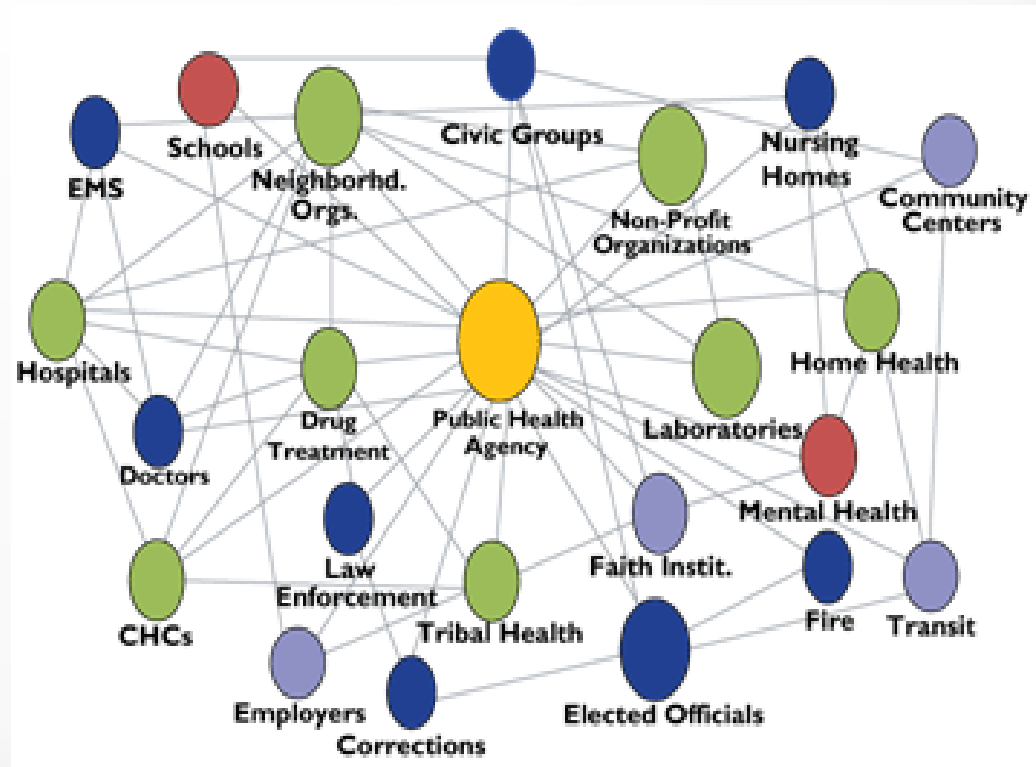
Public Health



“The set of activities that society undertakes to monitor and improve the health of its collective membership.”

Public Health Systems

- * **Public health systems** include all entities that work together to deliver **essential public health services** within a jurisdiction



Public Health Standards



- * National accreditation standards “set the bar” for judging the overall **quality, strength, and performance of public health systems.**

- * The Public Health Accreditation Board (PHAB) grants accredited status to public health agencies that meet the standards & measures.
- * National PH standards are based largely on the **Ten Essential Services.**

What about *Tribal* Public Health?

We hear about how public health in tribal communities is different than in other communities, stories describe how:

- * Health care and public health services often share a home – the systems are more integrated than isolated
- * Funding for public health services are inadequate, unstable, and competitive
- * Tribal systems have additional layers of complexity related to governance, law, jurisdictional service area, and resource capacity that affect partnerships .

Public Health Services & Systems Research (PHSSR)

- * Examines the organization, financing, delivery, and quality of public health services within communities
- * Studies the impact of services on the health of the public
- * Robert Wood Johnson Foundation (RWJF) funds PHSSR studies with an ultimate goal of improving the performance and efficiency of the public health system
- * PHSSR prioritizes turn them into results by providing policy-makers and practitioners with information they need to make decisions

This study aims to...

- * Explore the partnerships within a tribal public health system that are working to protect and promote health.
- * Examine how and through what relationships a tribal public health system delivers the Ten Essential Public Health Services.
- * Assess the key characteristics of a tribal public health system that address health disparities.

Community Research Partner: Sault Tribe Health Division



- * Benefits to Sault Tribe
- * Research partnership
- * Roles and responsibilities

By the end of the study, we plan to...

- * Identify promising practices for organizing & strengthening tribal public health systems around the Ten Essential Services;
- * Document learning that may be used by others to strengthen partnerships between tribal and non-tribal agencies;
- * Suggest areas for further research that will support tribes & PHAB to improve national accreditation standards and processes.
- * Share our tools and methods openly for use by Tribes & partners

Study Design & Methods

Case Study Design

- * An in-depth look at one community system
- * Exploratory and descriptive, rather than testing a theory

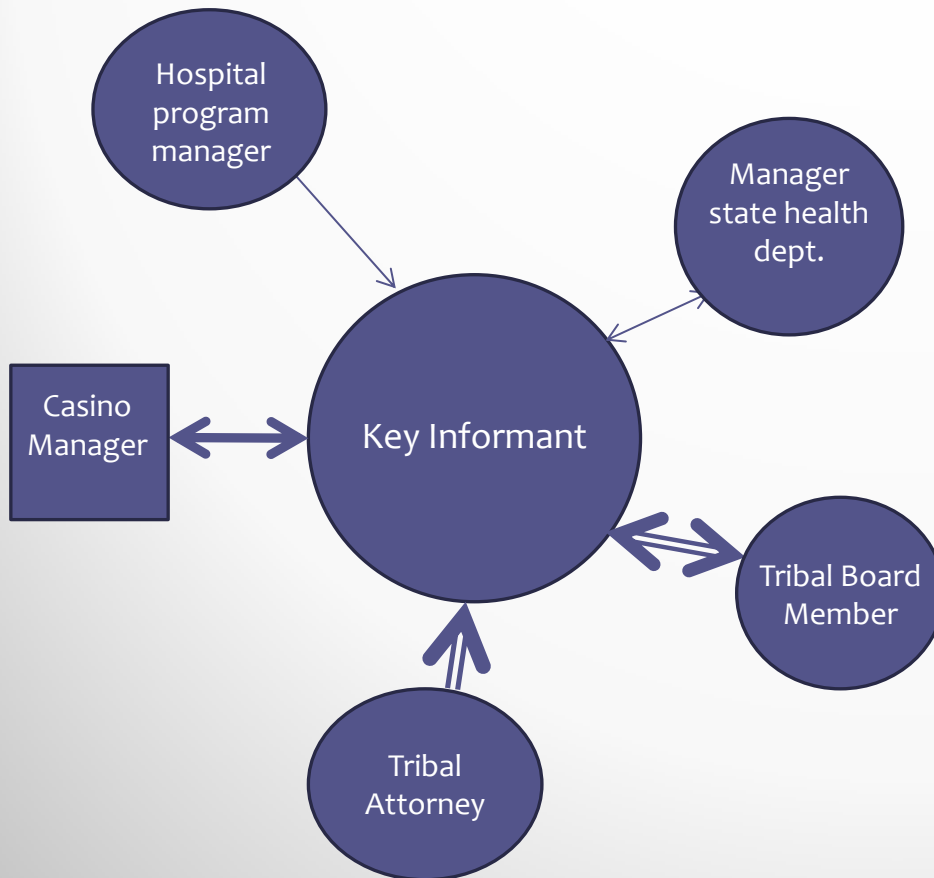
Methods

- * Interviews and ecomaps with key informants
- * Focus groups w/community members and priority groups
- * Review existing data and documents
- * Organizational survey and social network analysis

Key Informant Interviews

- * Data collected November 2014 – March 2015
- * Started by identifying key informants who work with Community Health staff
- * Snowball sampling to identify additional key informants
- * Interview questions and ecomaps developed around the definition and purpose of public health & the Ten Essential Services
- * 51 people interviewed
- * 38 ecomaps completed*

Eco-Mapping



Eco-mapping

- * Created with key informants at the end of their interview
- * Identified individuals they interact with on the 10 Essential Services
- * Described key characteristics of their interactions with each individual

Analysis & Interpretation

Social Network Analysis:

Create graphs of the network that exists

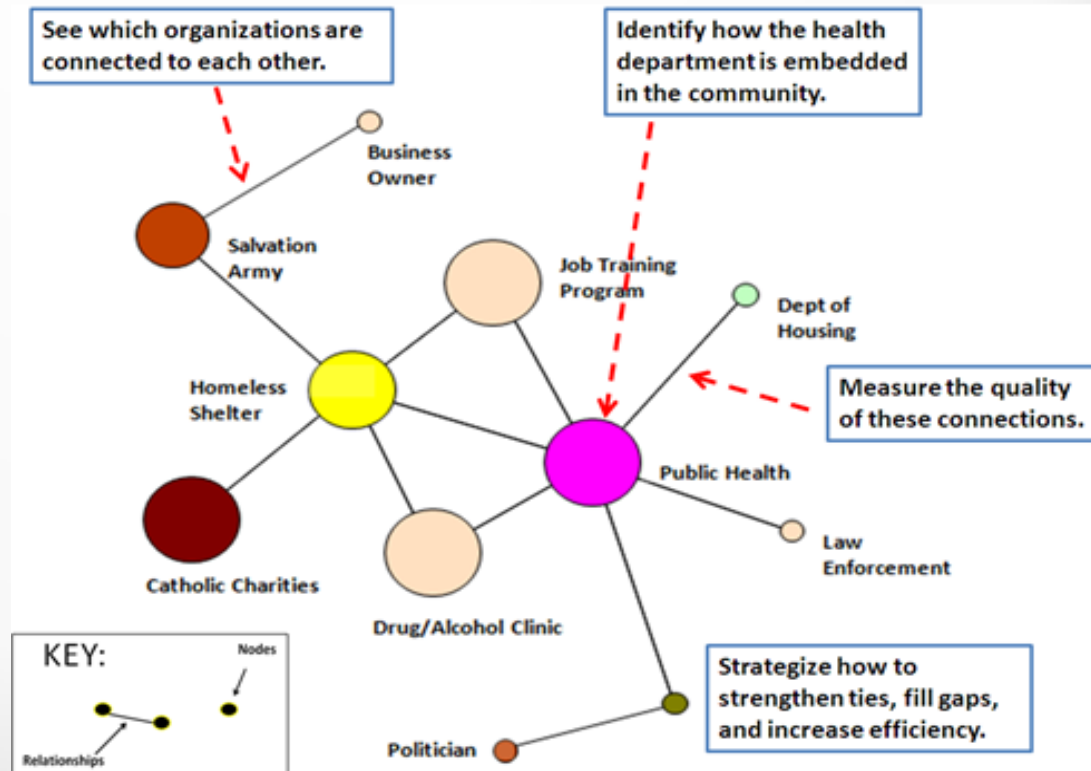
- * Connectivity
- * Strength of relationship
- * Exchange of resources

Qualitative analysis

Coding narrative and identifying themes

Member Checking

Sharing preliminary information and getting insight into the meaning



Preliminary Results

- * **Review & Discuss Network Graphs**
 - * Tribal Public Health System (overall)
 - * All agencies
 - * Tribal agencies only
- * **Review and discuss key themes from the interviews**

Think and talk about...

1. What stands out to you?
2. What questions does this raise for you?
3. How do your experiences relate to what we see and hear?
4. What does this tell us about the tribal public health system?

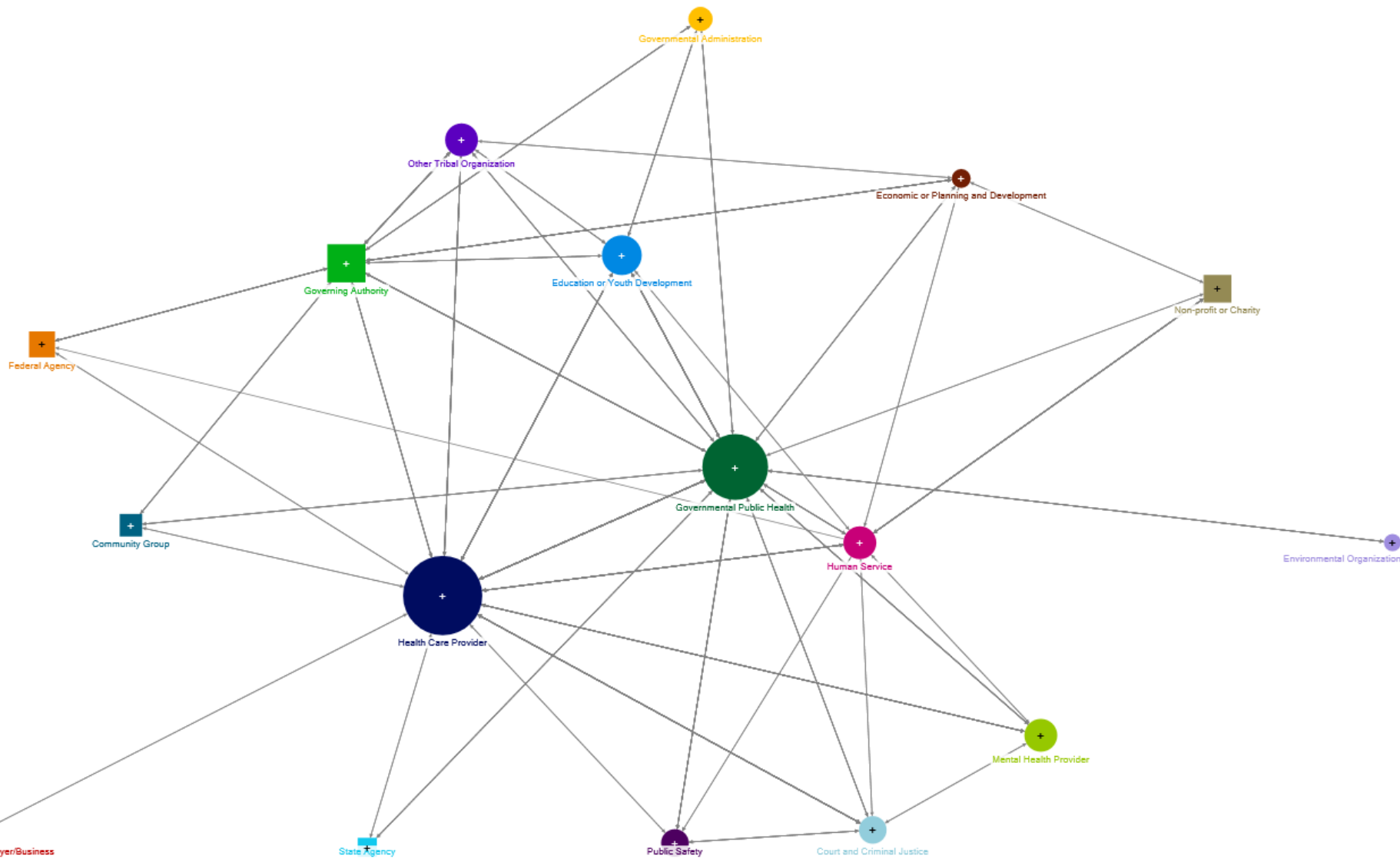
The Sault Tribe Public Health System

Social Network Graphs

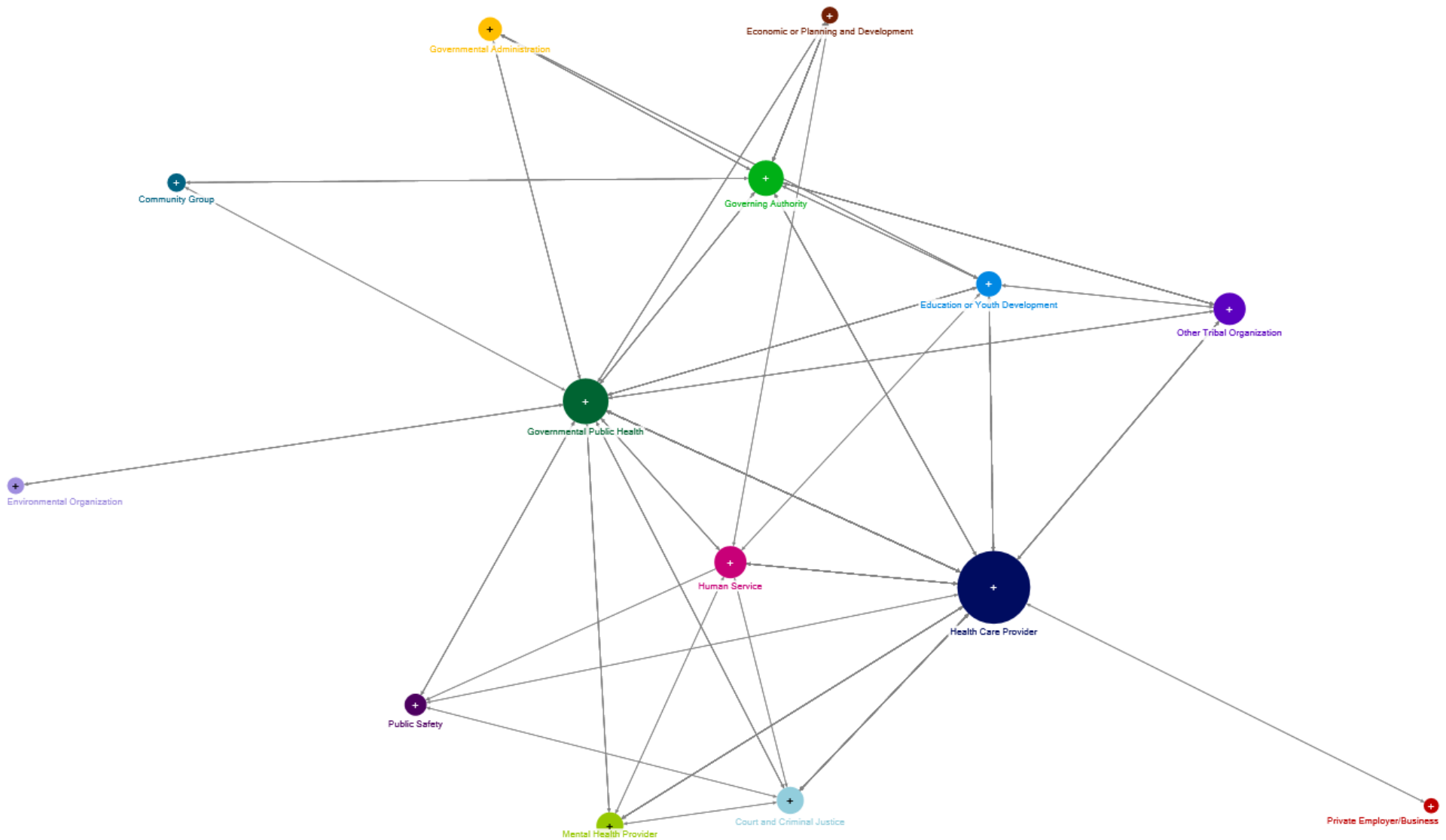
- * Nodes are the circles & squares on the graphs
 - * On this graph, nodes represent individuals
 - * The complete network graph includes 321 individuals based on people interviewed
 - * The network graph with only tribal agency representatives includes 183 individuals
- * Nodes are labeled according to their type of agency (sector)
- * Lines (or edges) represent existing connections between nodes

Essential Service 1

Monitor health status to identify community health problems

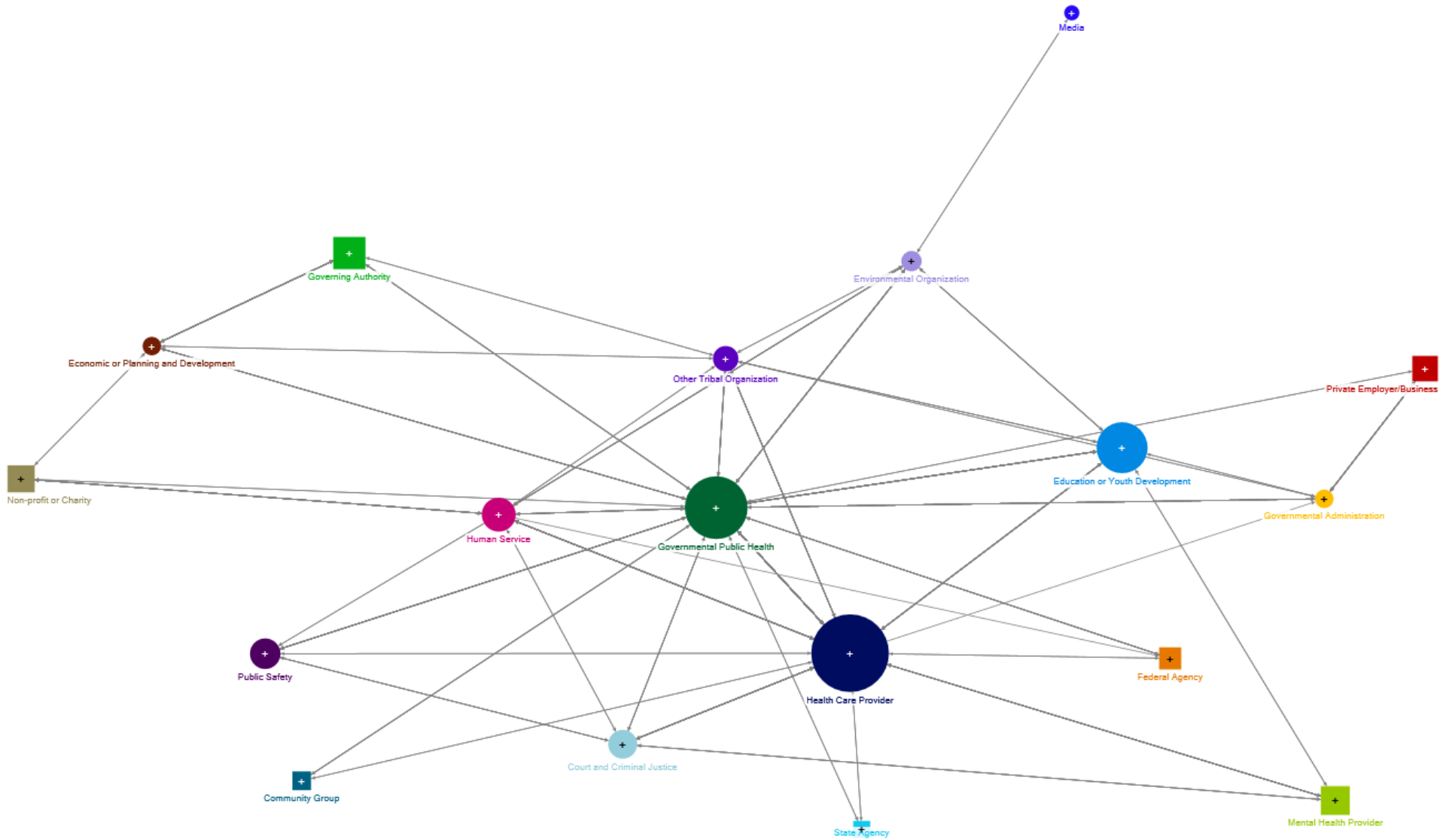


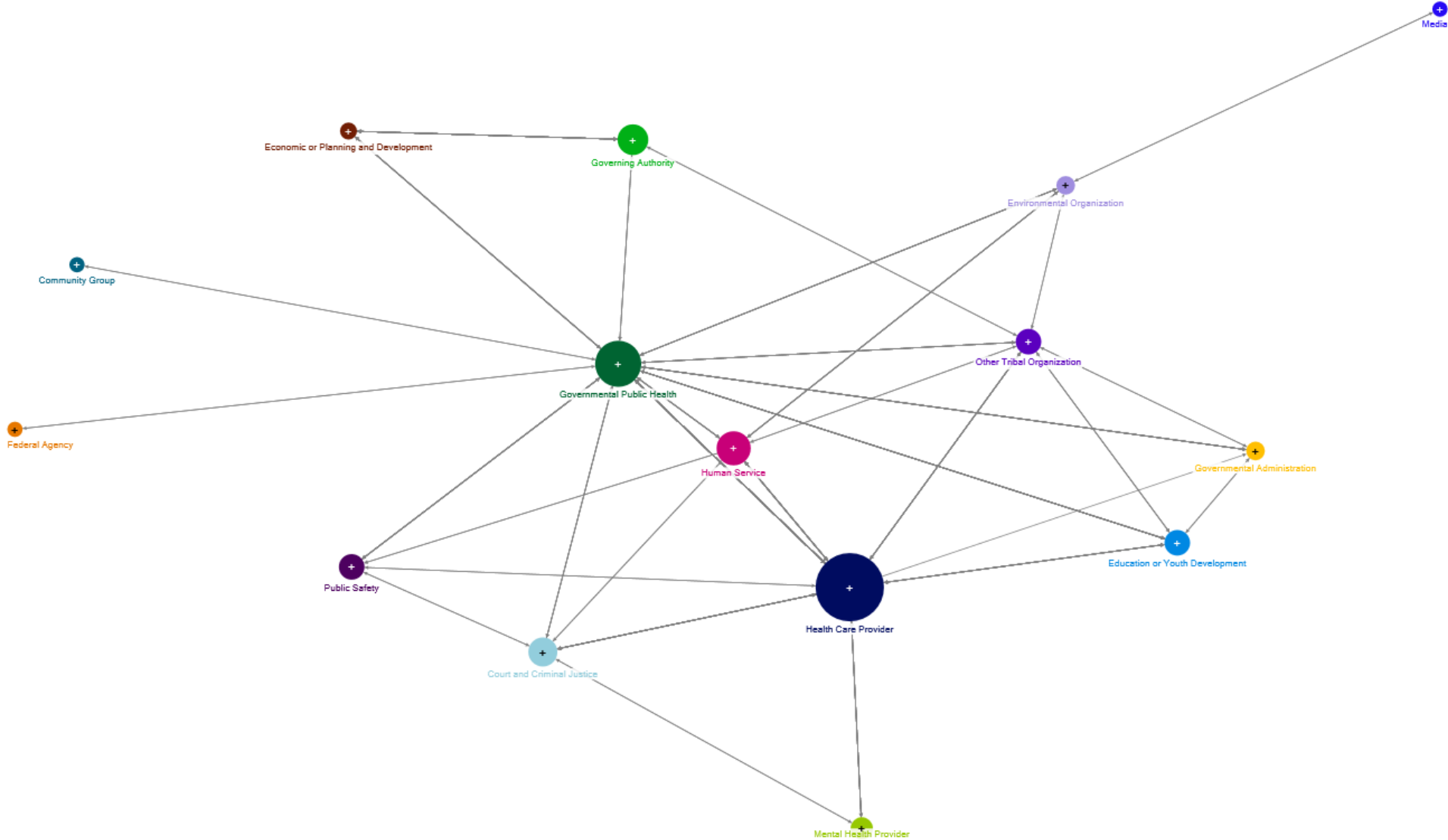
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Essential Service 2

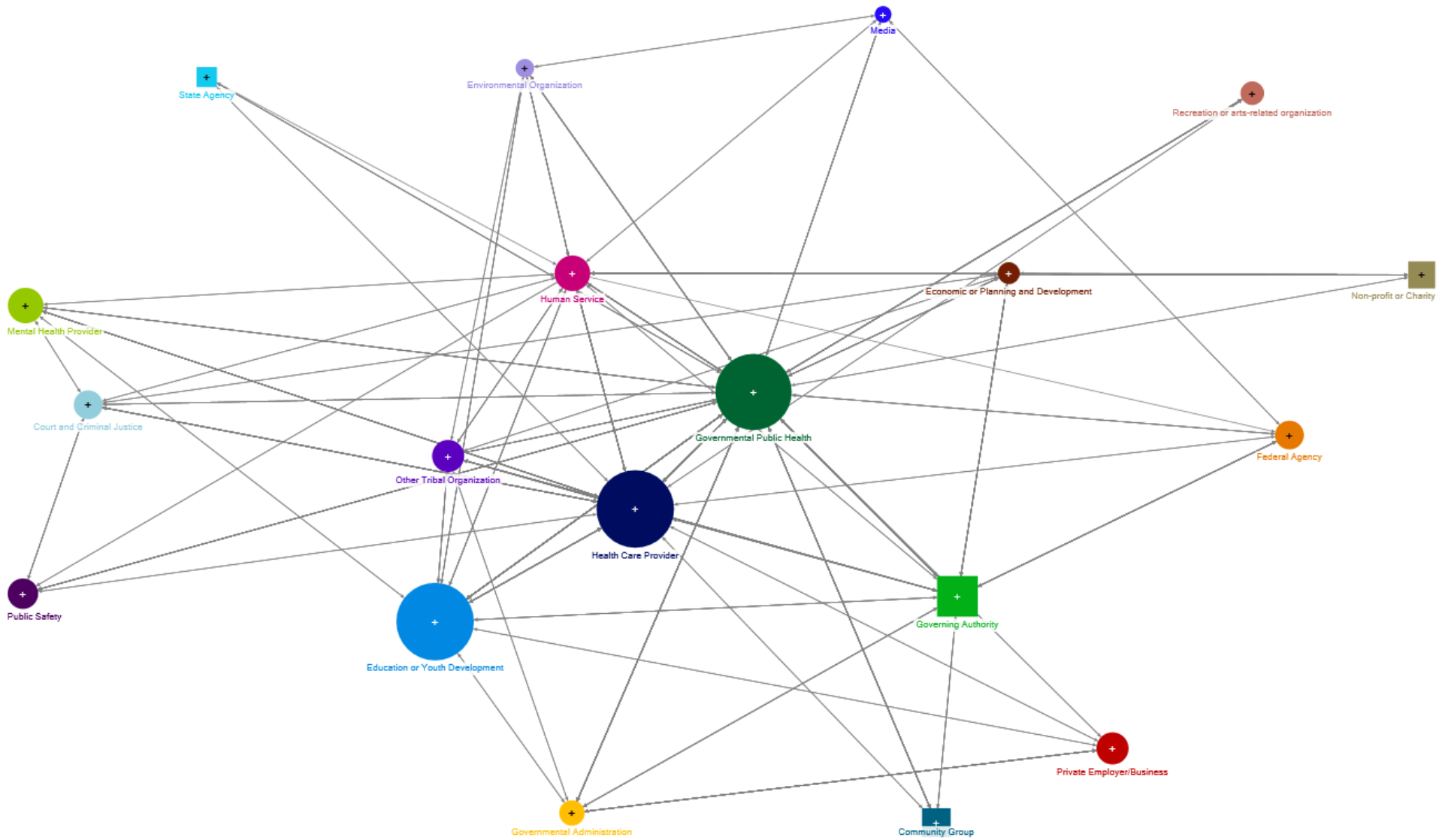
Diagnose and investigate health problems and health hazards in the community.



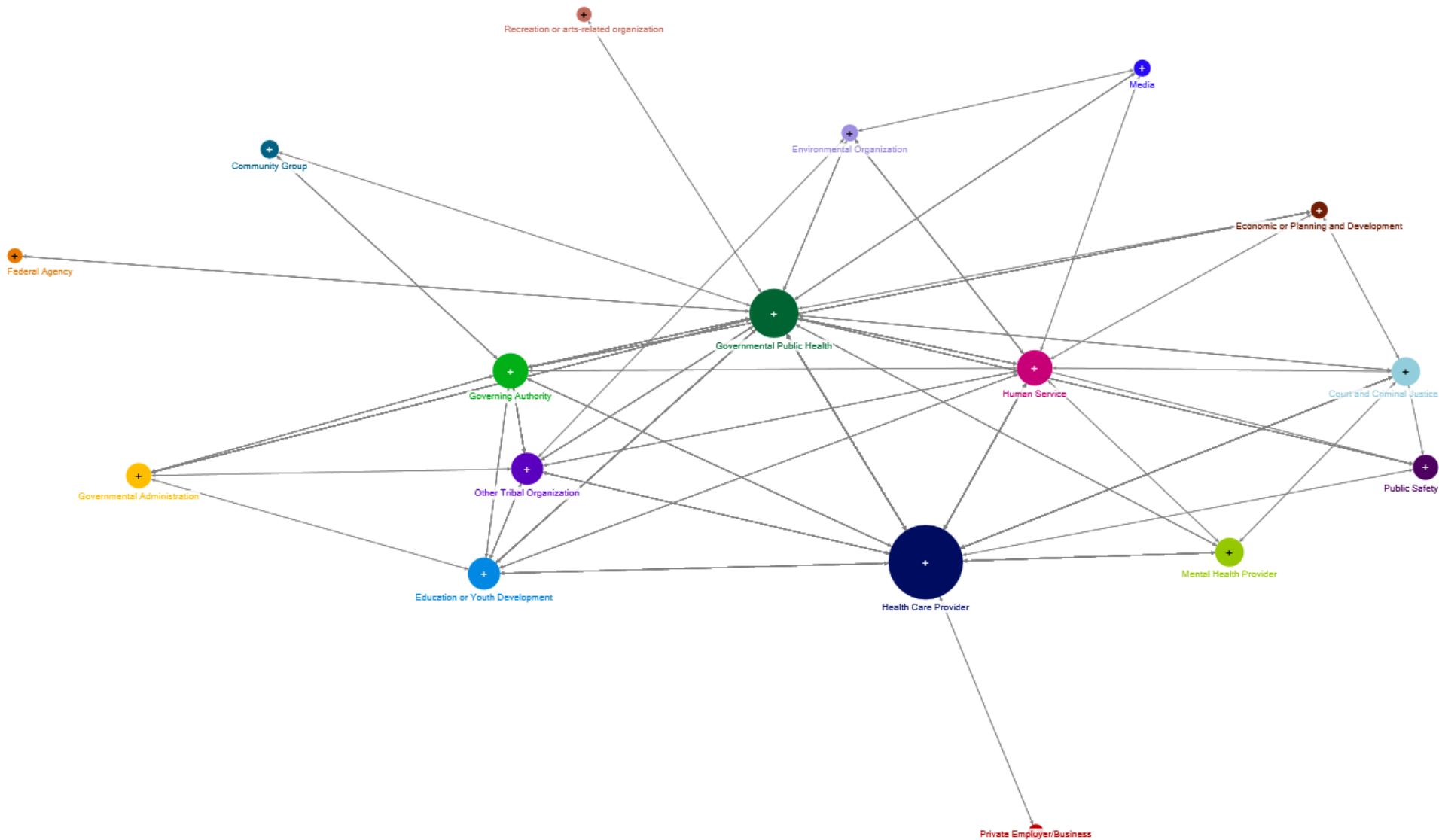


Essential Service 3

Inform, educate, and empower people about health issues.

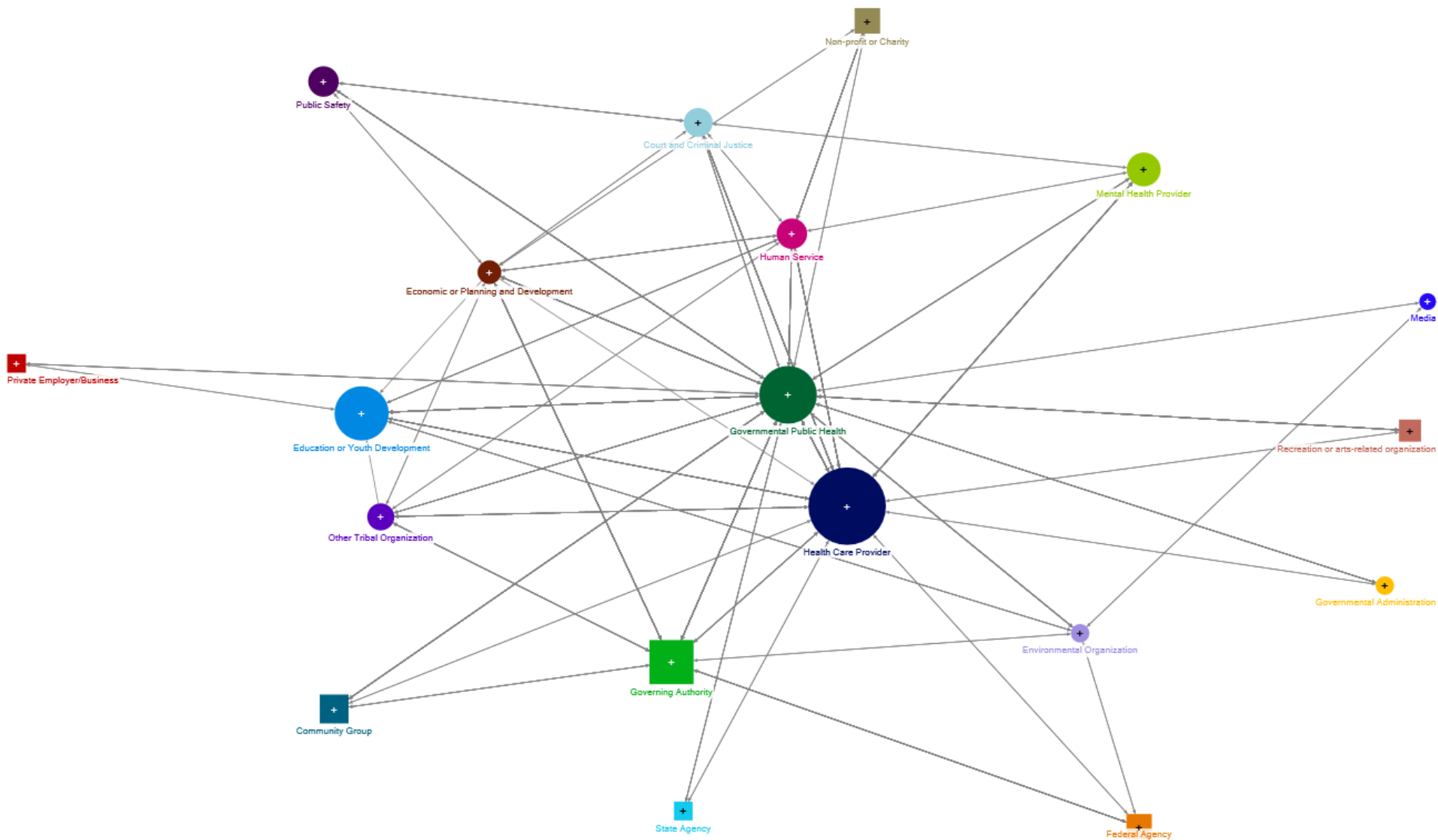


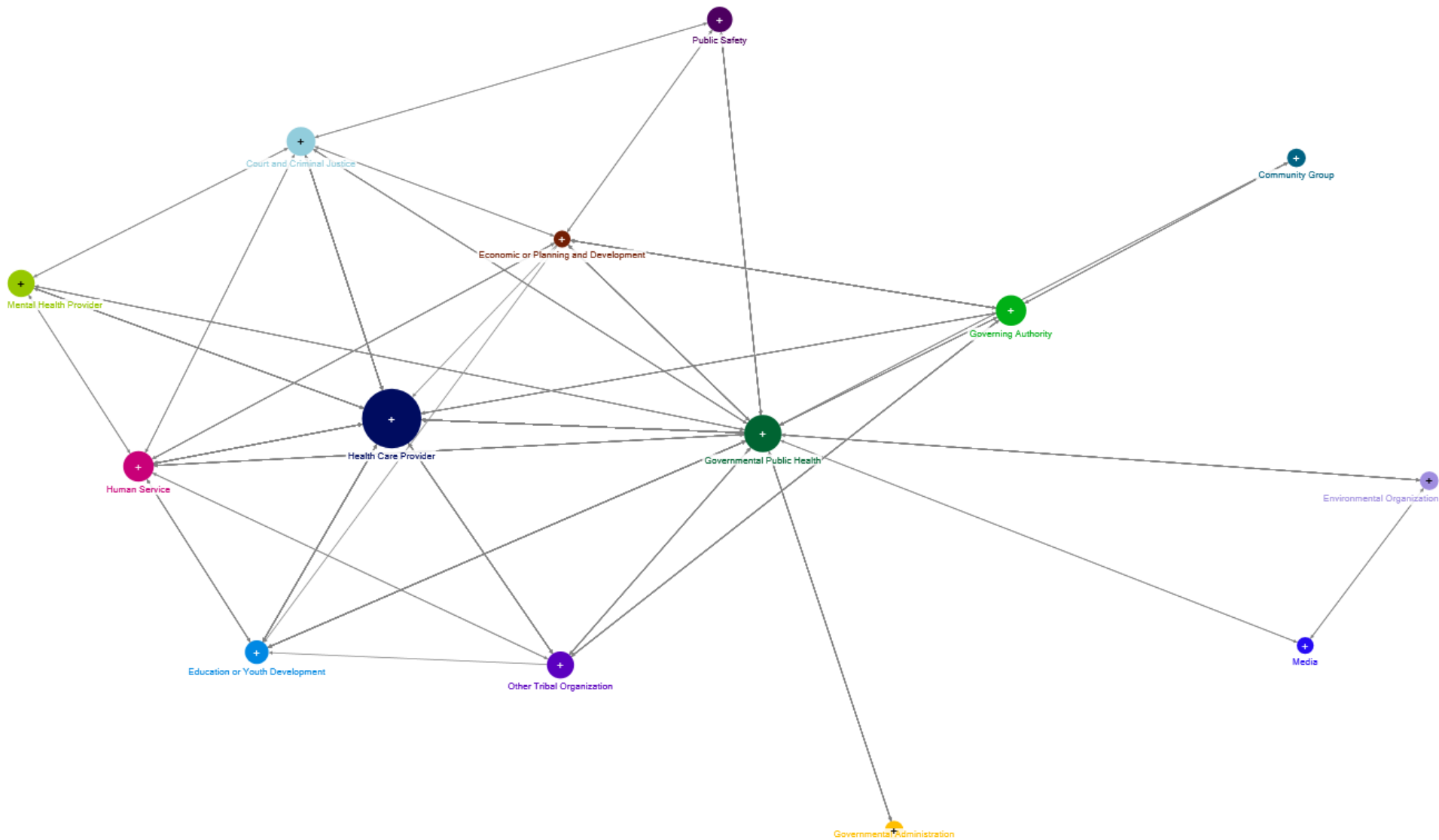
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Essential Service 4

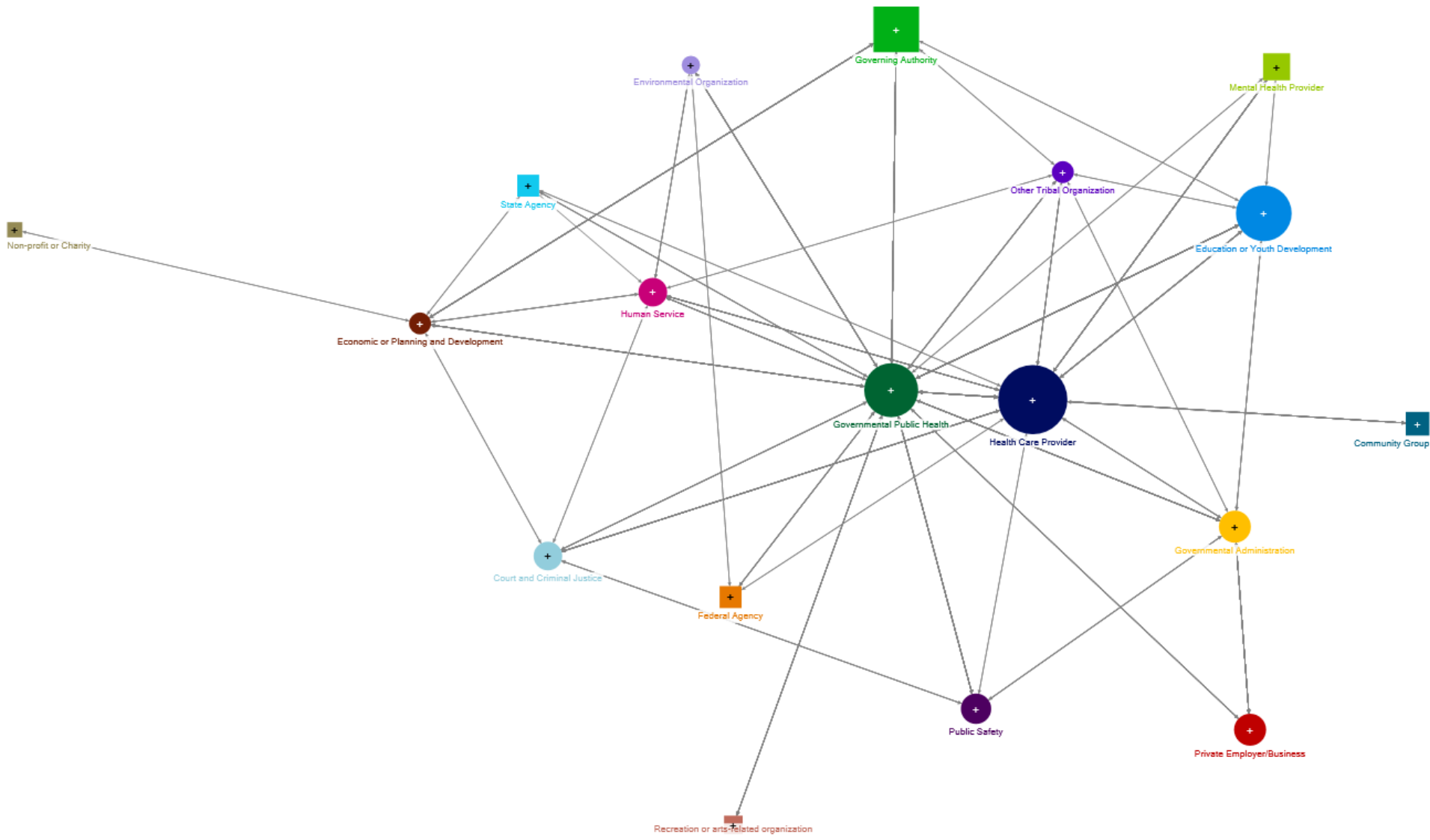
Mobilize community partnerships to identify and solve health problems.

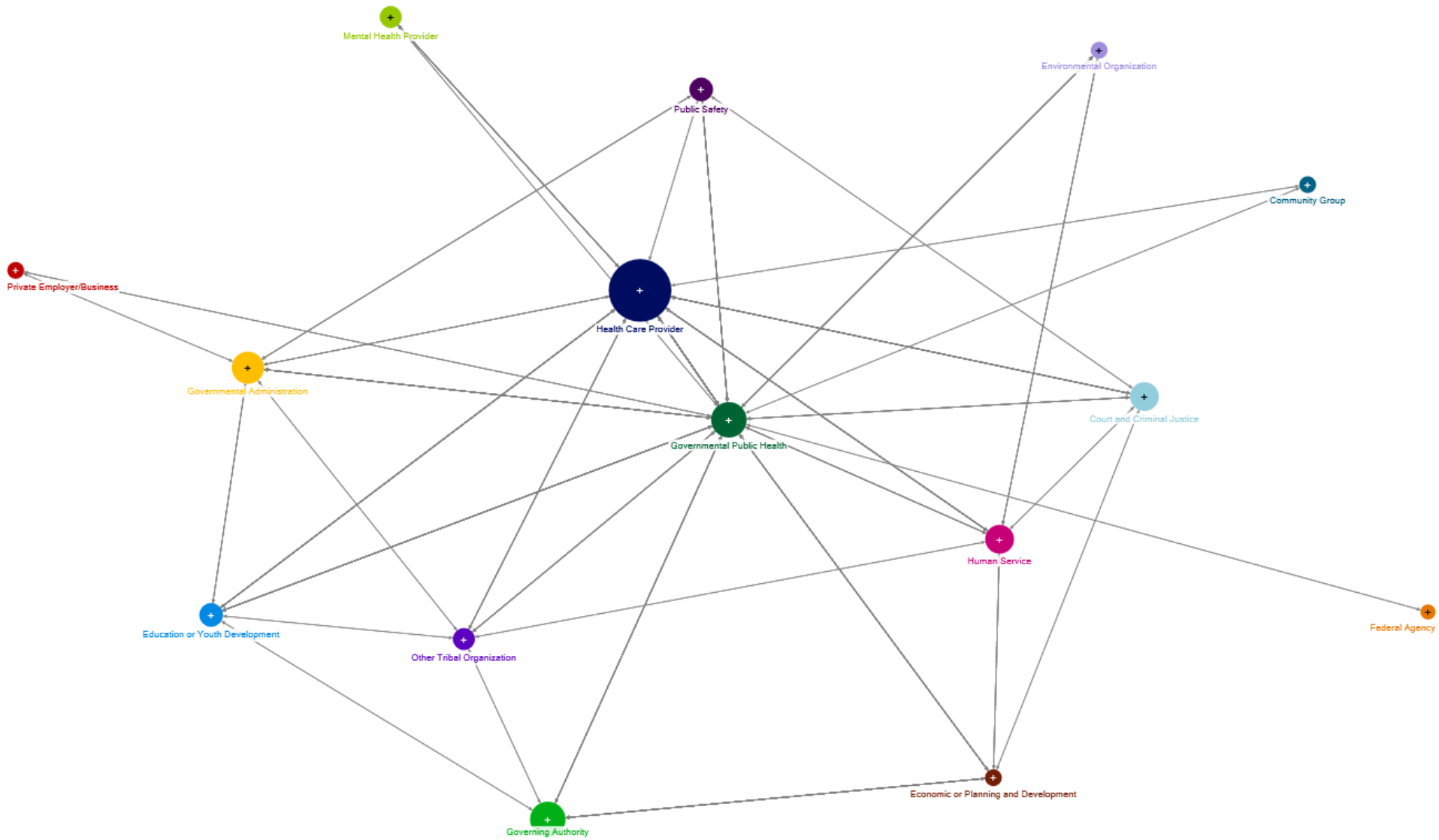




Essential Service 5

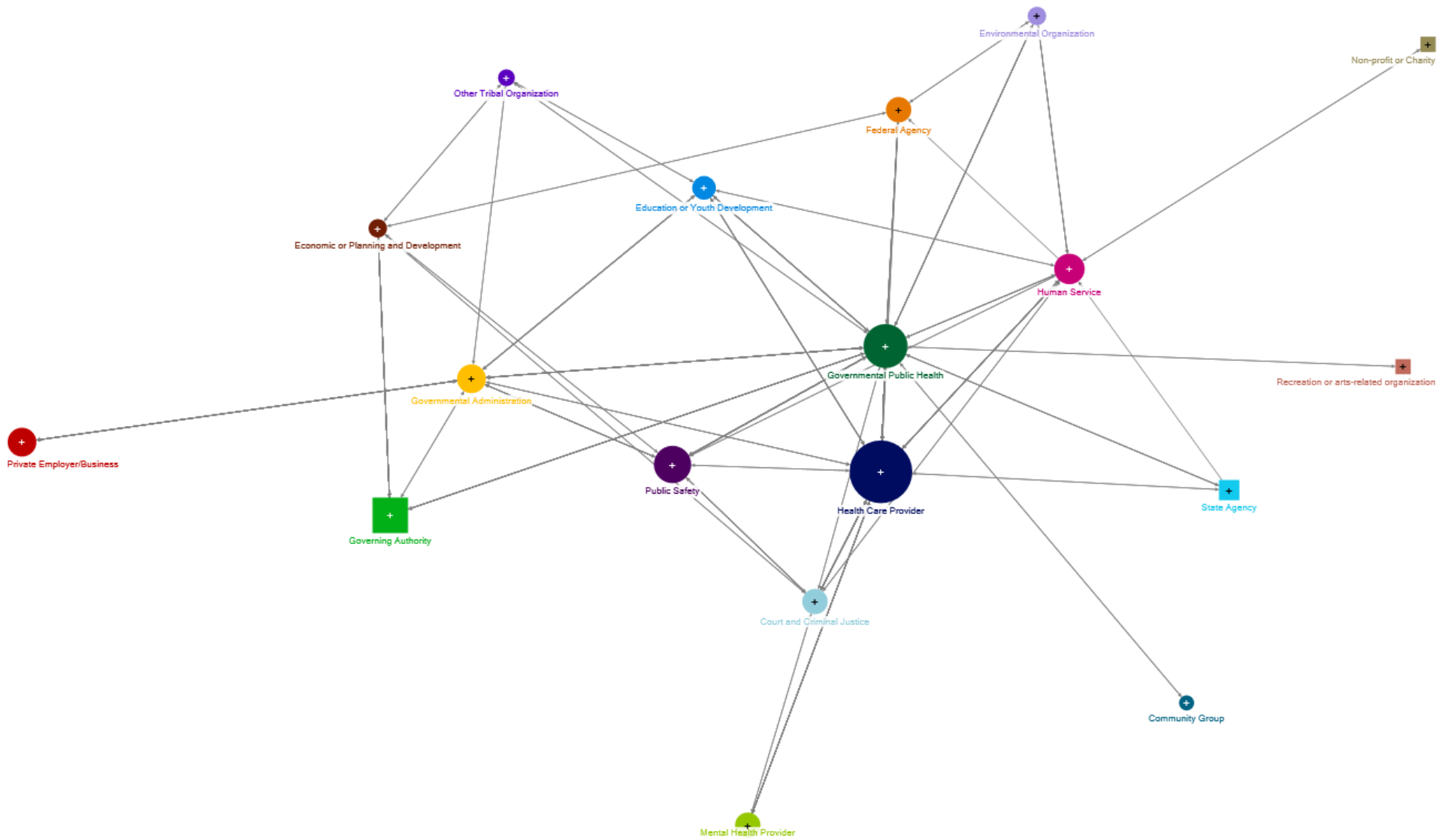
Develop policies and plans that support individual and community health efforts.

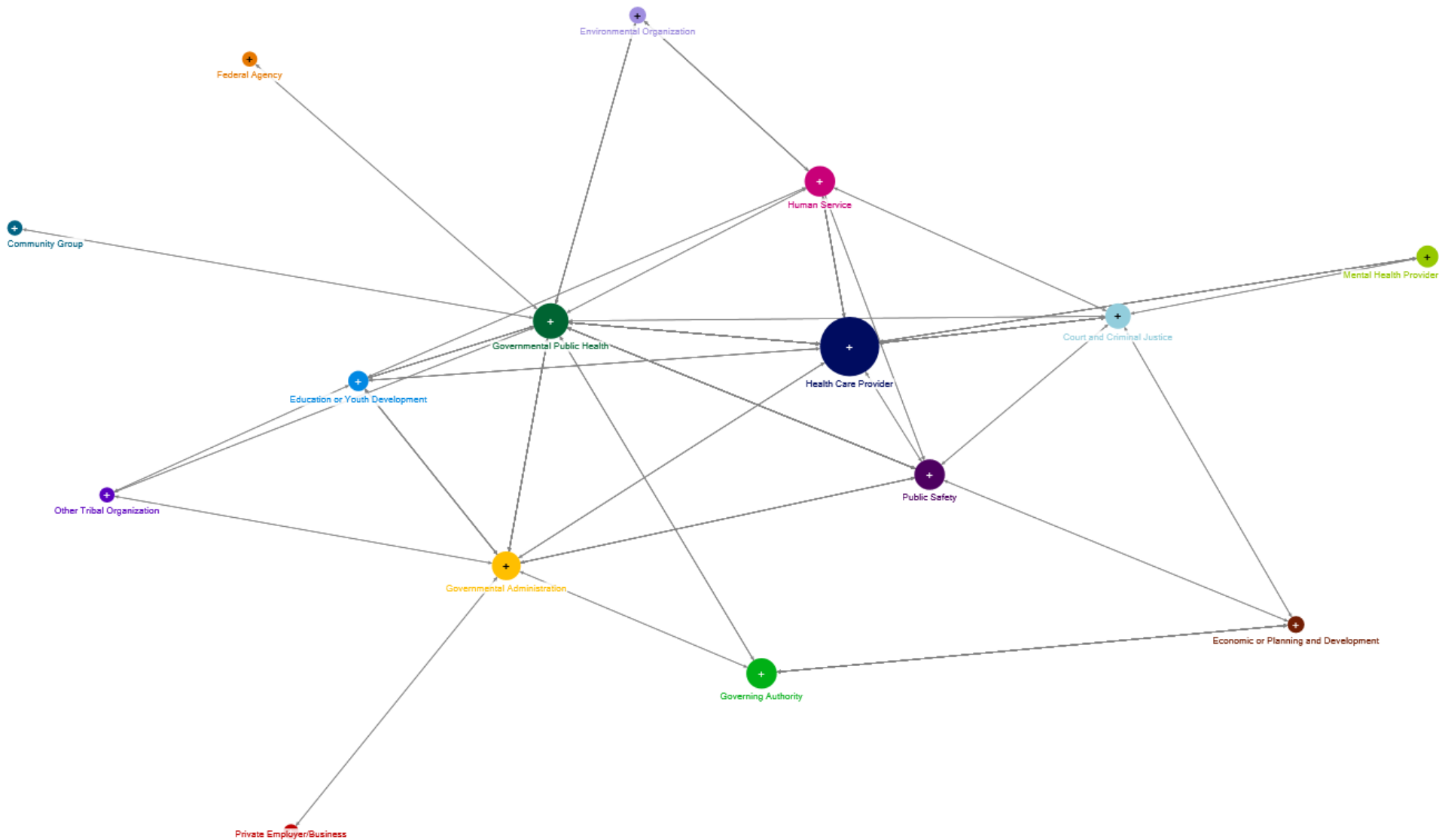




Essential Service 6

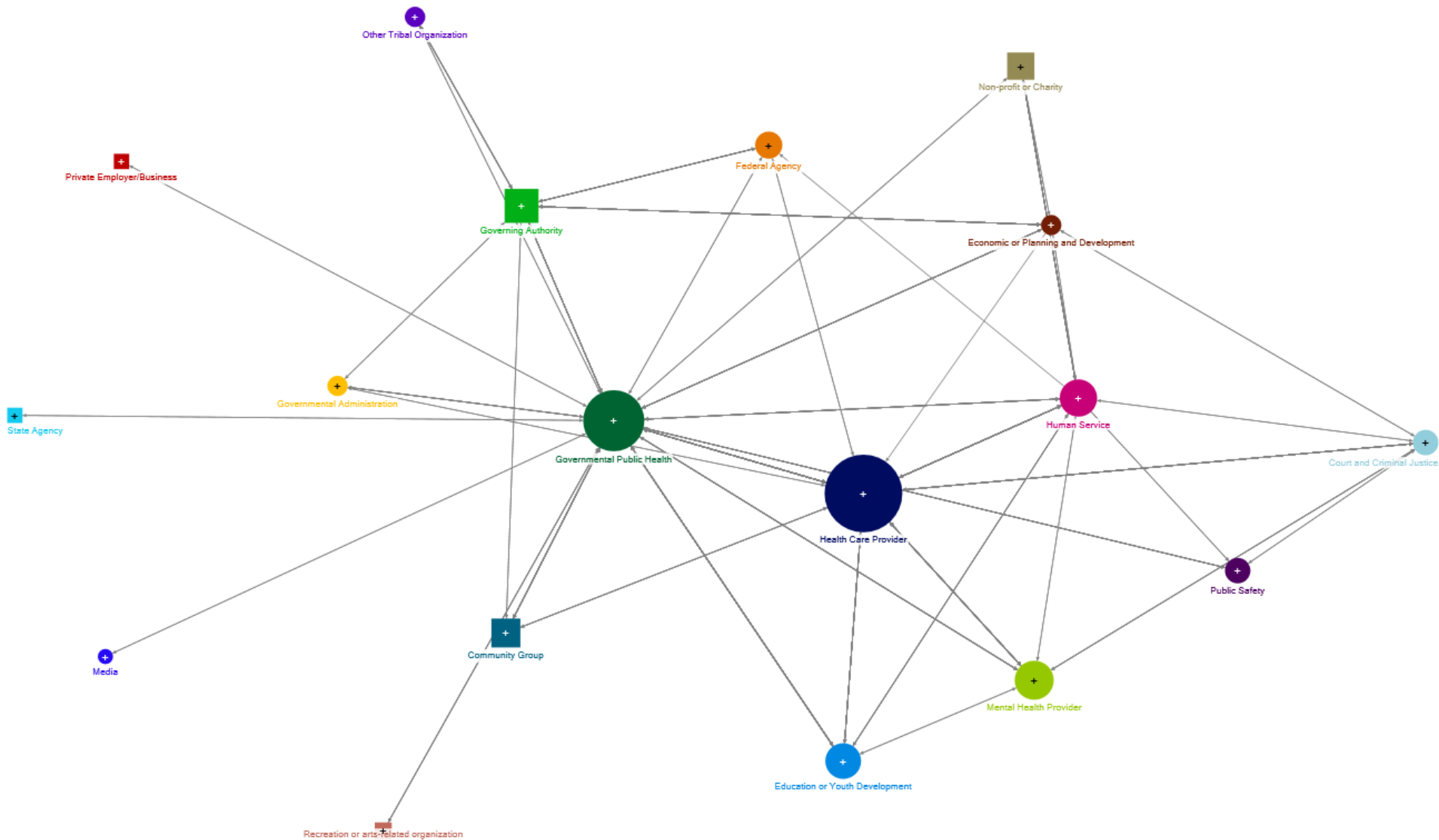
Enforce laws and regulations that protect health and ensure safety.

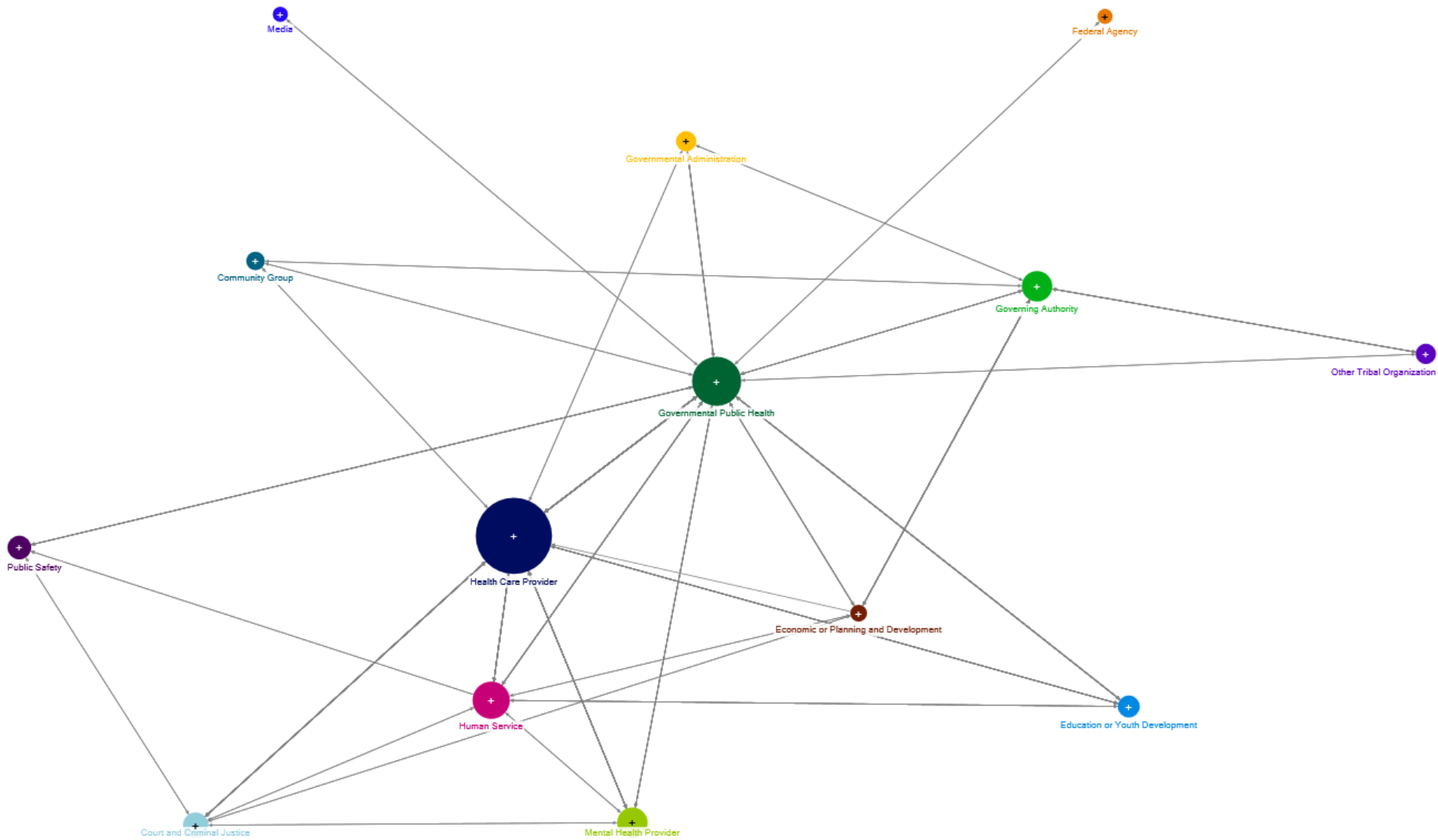




Essential Service 7

Link people to needed personal health services and assure the provision of health care when otherwise unavailable.

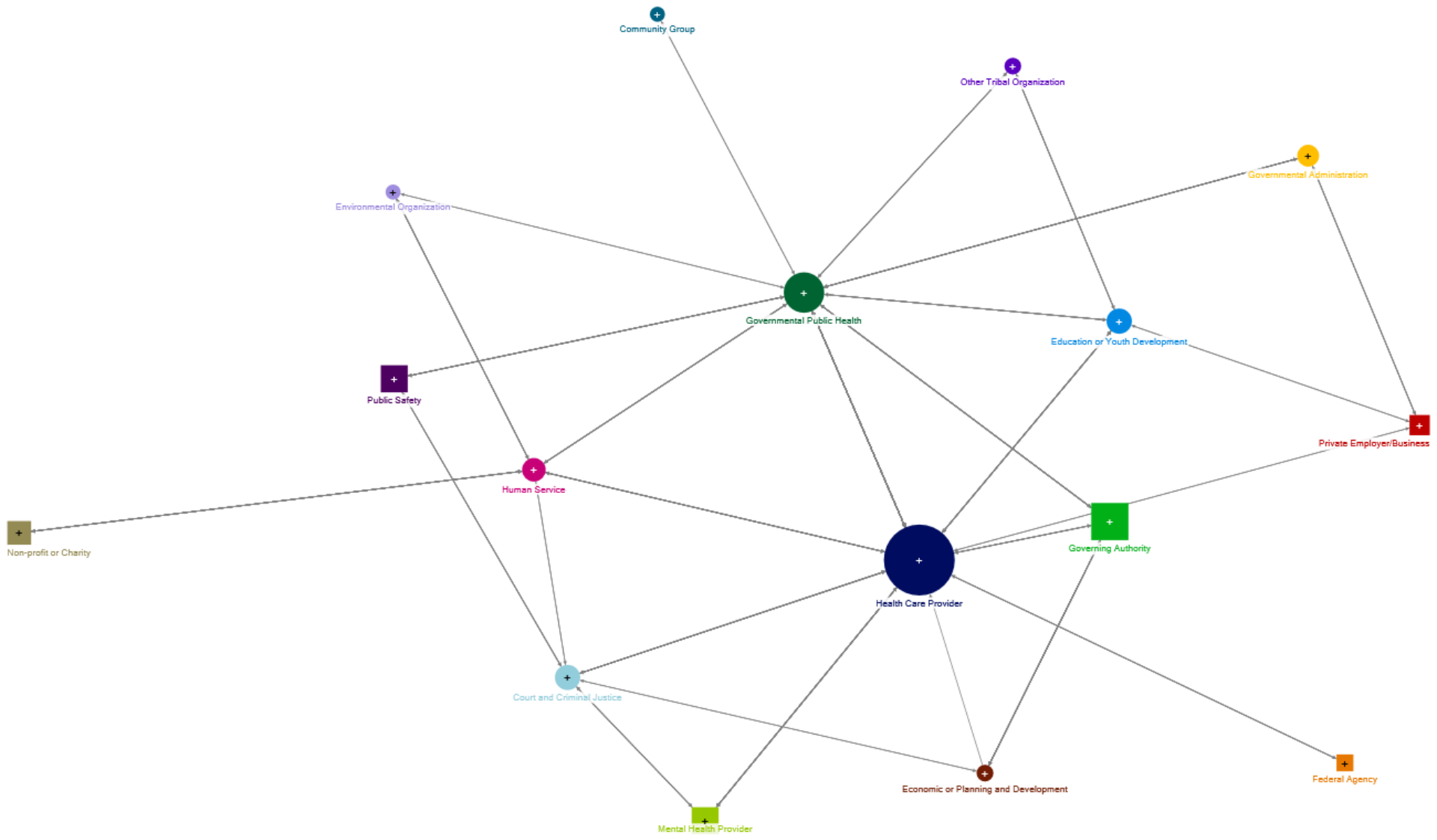


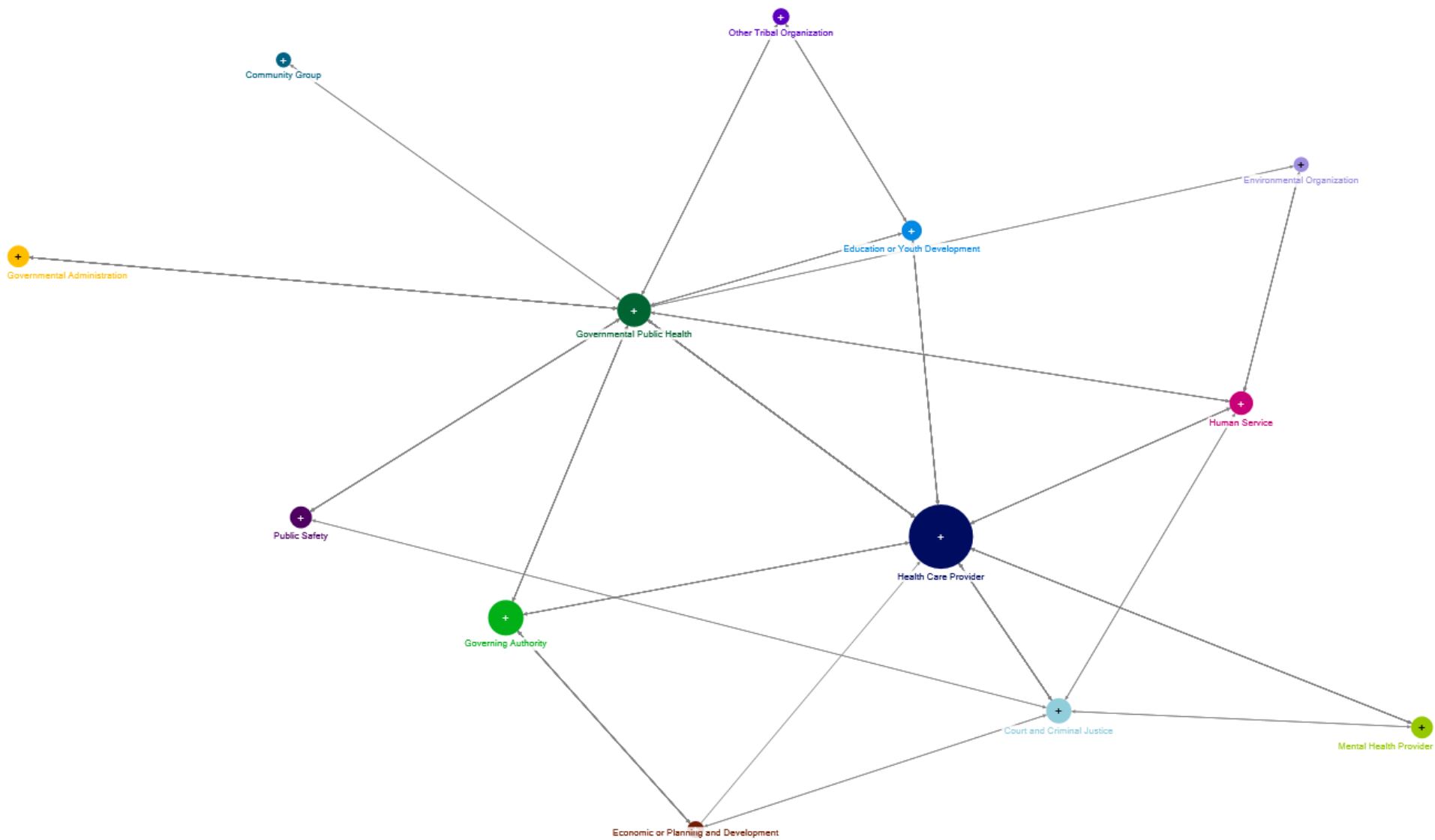


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Essential Service 8

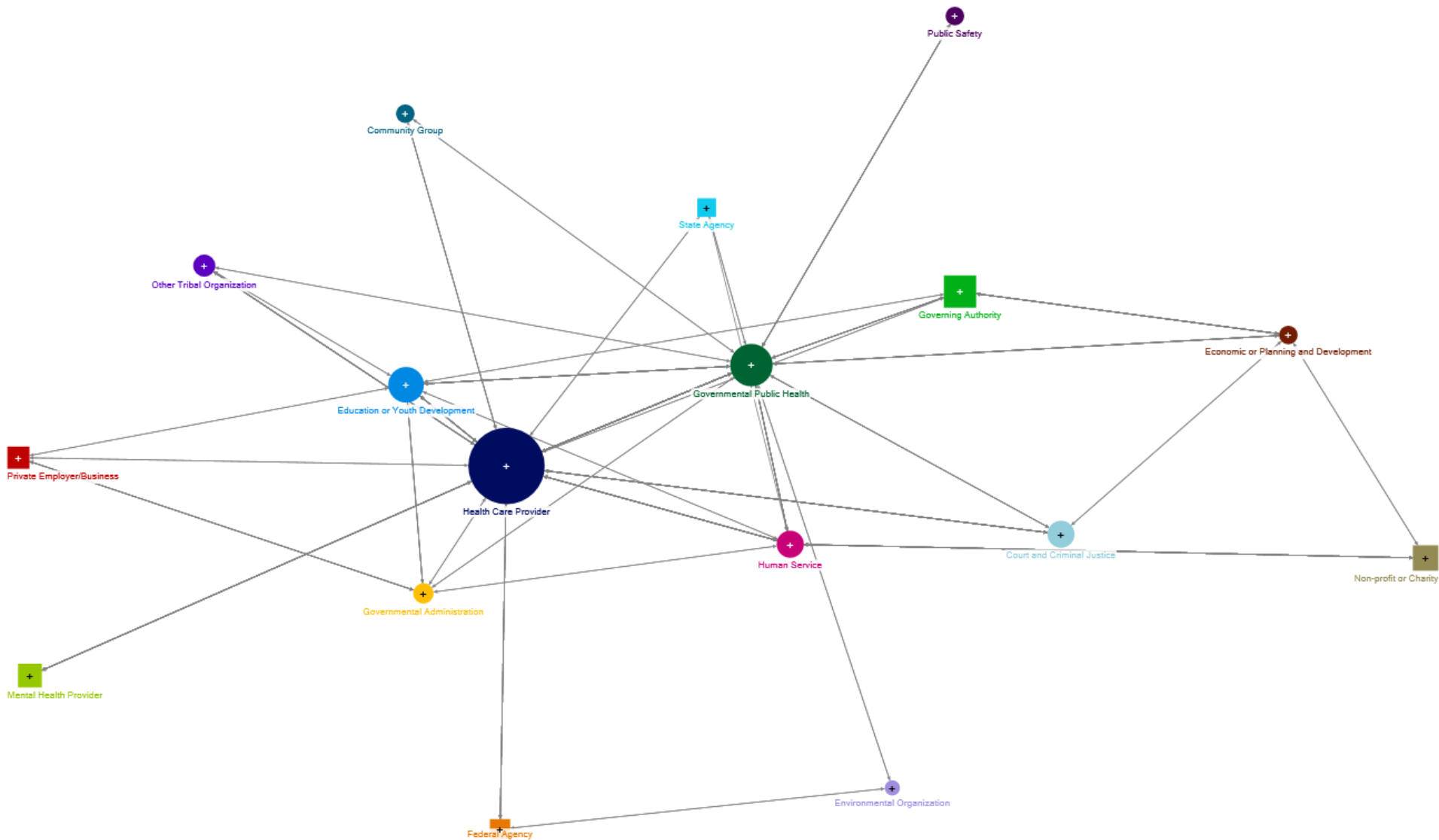
Assure a competent public health and personal healthcare workforce.



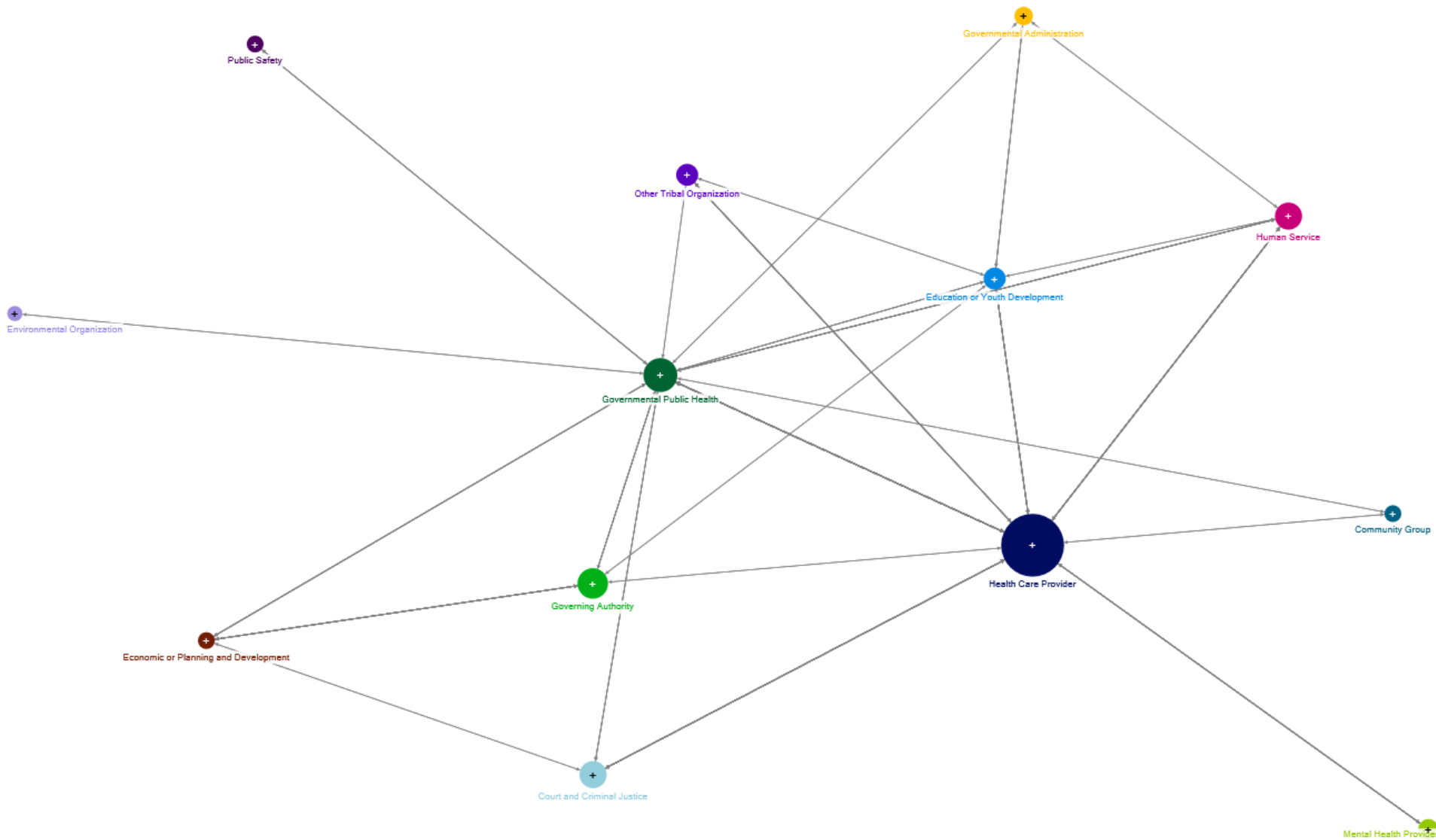


Essential Service 9

Evaluate effectiveness, accessibility, and quality of personal and population-based health services.

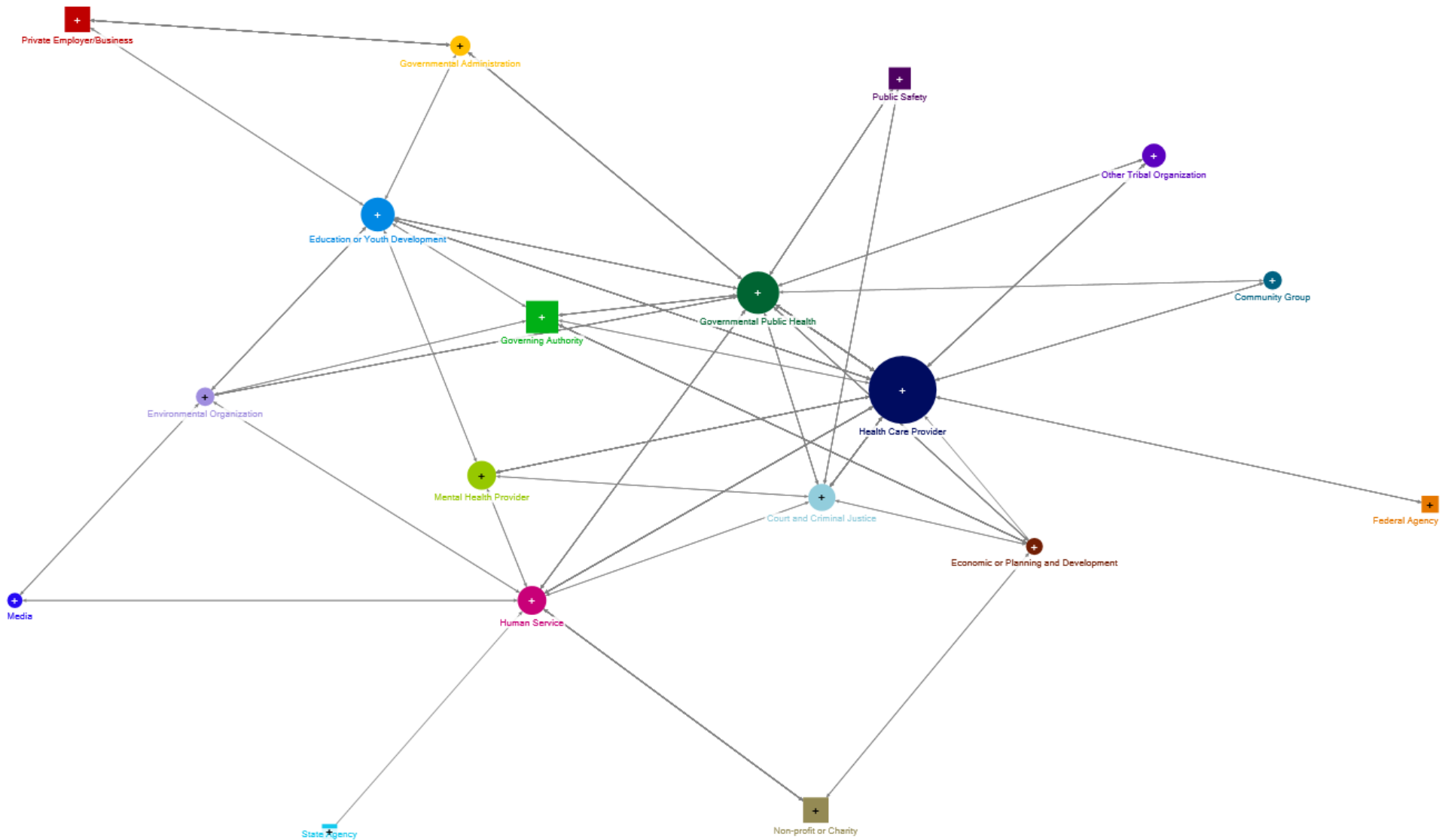


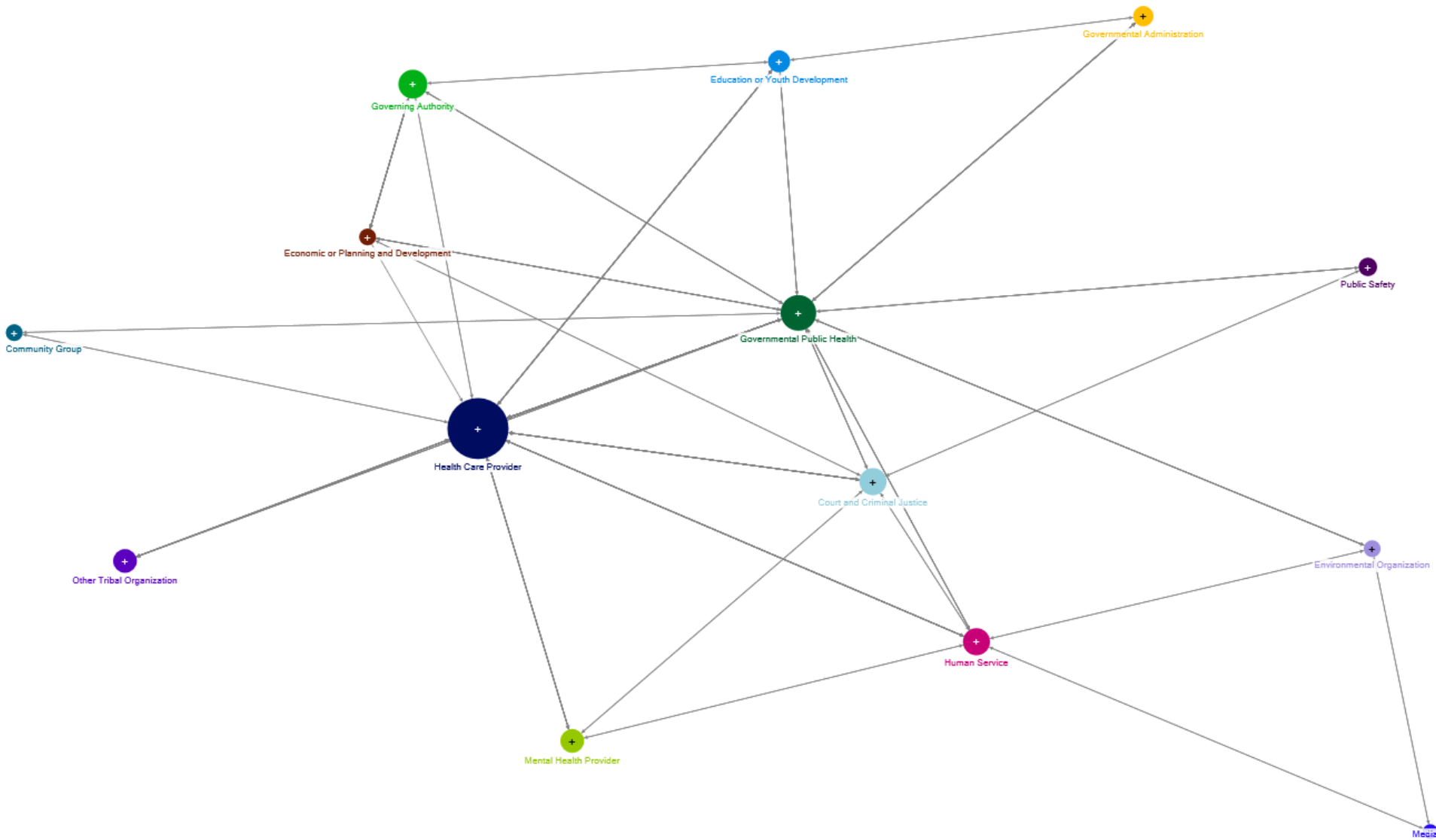
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Essential Service 10

Research for new insights and innovative solutions to health problems.





Partners- Key Actors

- * Tribal Health - Sault Tribe Health Center
- * Community Health Program
- * Tribal Housing
- * Tribal Head Start
- * Anishinaabek Community and Family Services
- * Tribal Extension Program
- * Tribal (Drug) Court
- * Advocacy Resource Center
- * Local health departments
- * Local government
- * Health care –Local hospital
- * MSU Extension
- * Local schools
- * Indian Health Service
- * People: Health educators

Partnership- Partners

The Tribal Public Health System...

- * Has partners from all the key sectors involved in delivering public health services.
- * Includes more than 60 committees and coalitions.
- * Has relationships with tribal and non-tribal partners.
- * Has partnerships built around coalitions or around specific projects.
- * Partners are identified to fill unmet needs or to deliver a service that wouldn't otherwise be feasible.
- * Community Health plays a key role in engaging partners across sectors, throughout the service area.
- * Some partnerships are based on individual relationships, and activities end when people leave.
- * Tribal medical and community health did not tend to identify one another as "partners."

Partnership- Context

Facilitating factors

- * Small community can be good- easy to reach critical mass of people invested in an issue.
- * Collaboration happens often because one single entity does not have the funds to serve everyone alone.
- * Cities are supportive of initiatives the Tribe wants to do, and see it as good for the whole community.
- * Programs often lack money- The Tribe is viewed as partner that helps with funding.
- * Funding for collaborative efforts comes from grants the Tribe is awarded.

Partnership- Context

Inhibiting factors

- * The differences among communities in the tribal service area can be a challenge to collaboration.
- * The Upper Peninsula completely lacks many resources, but agencies make the most with what they have.
- * There is a need for more involvement from parents, religious groups, and business.
- * Having more staff would be beneficial, and could allow some programs to grow/expand their reach.
- * Individuals play multiple roles in their agencies, there is a lot of work to go around and not enough people to do it.

Partnership- Characteristics

Formation

- * Sometimes the Tribe connects with existing partnerships (groups), sometimes the Tribe creates new partner groups.
- * Grant requirements for partnership or formal agreements with partners (MOA), was often a motivator to get started with coalitions and committees.
- * Having a key person who is dynamic and good at outreach and networking is helpful to getting partnerships going.
- * Some non-tribal agencies say partnering with the Tribe is a “given”.

Partnership- Characteristics

- * Partnerships help shape perceptions around a particular issue.
- * Partnerships facilitate connecting people with needed services.
- * Focusing on cultural practices and services are priorities for tribal agencies.
- * Parents, families, and youth are sometimes mentioned as partners.
- * Community decision makers and leaders see their roles as providing support for community health efforts and health policies.

Partnership- Formal Relationships

Formal relationships are...

- * Formalized through contracts, interagency agreements, MOAs, aid agreements, collaborative plans.
- * Built on the individual relationships between key people.
- * Formed to deliver or expand access to medical care, create referral networks, assure emergency preparedness, water safety, infection control, share medical records.
- * Driven by grant requirements, responses to crises/incidents, and identification of gaps/needs in the system of care.

Partnership- Formal Relationships

- * Formal relationships with non-tribal agencies gives tribal members access to services they might not otherwise be able to access.
- * The Tribe has large, competent staff and organizational capacity which benefits the broader community.
- * The Tribe lacks some specialized services/personnel.
- * Without a formal agreements, agencies are unsure about their roles, and the proper steps or decisions to serve/protect tribal members.
- * Jurisdictional issues are explored and resolved through the process of making agreements⁵⁷.

Partnership- Needs or Gaps

Some partners noted there are gaps in...

- * Data about the tribal community
- * Staffing
- * Relationships with:
 - * Certain health care providers
 - * Local public health programs
 - * The State
 - * Law enforcement and the certain courts
 - * Behavioral health and community mental health agencies
 - * County human services agencies
 - * Certain hospitals
 - * Higher education institutions

Partnership- Needs or Gaps

- * Partnerships achieve more in terms of delivering programs and services than without partnering.
- * Partnering to share services and resources in a rural environment is about maximizing what is available.
- * Partners describe gaps in communication within the tribal health center, and a lack of strategic planning.
- * It is difficult for tribal staff to commit the time necessary to participate in coalitions and meetings.
- * Staffing limitations make partnership more difficult.
- * Specific gaps depend largely on the health issue and partners involved.

Partnership- Strengths

- * *“The partnerships probably within our own tribal agencies seem to be most effective because we know the resource that we each have and we’re working kind of for the common goal. A lot of the funding we have we have to service a certain group of people.”*
- * *“Our tribal community is very supportive of our programs, and we work a lot with in the Tribe, we use tribal resources before we... for anything we can before we go out into the general community”*

Partnership- Strengths

- * Tribal agency staff believe the relationships they have with staff of the tribal health center makes their agencies more effective.
- * The relationship between Sault Tribe medical and Community Health Program has been strengthened over the last few years (but it could be stronger).

Partnership- Strengths

- * The most “effective” relationships are those with the tribal health center, schools, social services, Tribal courts, MSU Extension, hospitals.
- * Factors that contribute to strong relationships may be shared goals & benefits, and financially neutral relationships.
- * Open communication networks with state and local public health agencies facilitate sharing of information about emergent threats to health.
- * Strong relationships between individual people helped facilitate smoke-free air efforts in the broader community.
- * Tribal to non-tribal relationships are strong around emergency preparedness and wellness initiatives across the service area.

Partnership- Strengths

- * Non-tribal agency partners see Sault Tribe as an important and sometimes progressive partner that moves the work ahead in the region:

“I would go with the Tribe, just because they are very visible and they’re very proactive and they’re very up-to-date and they keep me on track. The people that I work with in the Tribe, I think they’re very forward. I mean they I think without them, I don’t know how many initiatives would actually be occurring at the rate that they are occurring.”

Partnership- Positive Outcomes

Working together with partners has led to tangible improvements.

- * Working with local agencies and coalitions to develop and get passed tobacco free policies for campuses, restaurants, and parks/rec. areas.
- * Plans and collaboration across tribal departments has increased walkability on tribal lands and led to improvements in the built environment.
- * The Tribe is seen as a significant contributor to successes, such as farmers markets, community gardens, yellow bike programs, summer breakfast program, and improvements in schools (e.g. wellness policies).

Partnership- Positive Outcomes

Working together with partners has changed the way agencies “do business”, and for the better.

- * Collaboration between tribal health and youth programs on grants has improved quality of youth programs.
- * Partnership between tribal medical and hospital to have patient access to care at a community clinic has filled a gap in services that the Tribe doesn't currently provide.
- * There is frequent collaboration on successful community events (walks, health activity days) which address many areas of health.
- * The partnership approach and policy/systems kind of work may take longer but can have a big impact.

Partnership- Positive Outcomes

- * There has been positive media coverage of successes.
- * Collaboration between tribal agencies and schools has leveraged more funds for the school (e.g. summer lunch program, SRTS).
- * The sharing of financial resources brought in through grants awarded to the Tribe and distributed to schools, and other agencies is recognized as a major contributor to success:

“Well, that’s why I must admit the Tribe is very, very good because their grants focus on that and they are the agency that tends to bring all of us together. So that is something they have done fantastically because they seem to find large pockets of money. They have grant writers.”

Discussion

- Based on the preliminary results, what information and tools would be useful for practitioners working to strengthen partnerships to improve tribal population health?

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