



Access to Care Work Group Meeting 2

May 2, 2024

Agenda



Prioritization Scoring



Work Plan Development



Alignment and Theory of Change



Next Steps



Prioritization Scoring



Prioritization Scoring

Prioritization Criteria Selection

- Exercise and response during Work Group Launch Meeting
- Response Form distributed to all Work Group members

Prioritization matrix

Nominal Group technique to identify prioritization criteria for objectives

Scoring:

- SHA and SHIP data
- No weighted items
- Criteria specific Likert scale 1-5, Highest score 25

BH and MH Prioritization Results

Prioritized Goal	Objective	Seriousness of the Problem	Importance to the Community	Size of the Problem	Intervention Availability	Availability Resources	Score
1-Improve the socio-economic condition of South Dakotans living in poverty	Decrease the percentage of the population living in poverty to 11.5% by 2029.	3	5	5	4	4	21
1-Improve the socio-economic condition of South Dakotans living in poverty	Decrease the percentage of children living in poverty by 2029, with an emphasis on the top ten counties with the highest percentages.	4	5	5	4	4	22
2- Improve health insurance coverage	Decrease the percentage of respondents who indicate their current primary source of health insurance is 'None' to 3% by 2029.	5	4	5	3	2	19



Workplan Development



Defining the Workplan Elements

- **Activities/Tactics** will be identified by reviewing improvement strategies and determining next steps. Multiple activities are expected, and each activity will be evaluated.
- **Person/Group Responsible** will reinforce commitment for implementing and reporting. Alignment with existing coalitions or collaborations will be emphasized.
- **Timeline** will vary for each activity and fit within the five-year SHIP. Some will be based on meeting the timeliness aspect of the objective.

Defining the Workplan Elements

- **Process indicators**

Measure the program's **activities and outputs** (direct products/deliverables of the activities).

- **Outcome indicators**

Measure whether the program is achieving the expected effects/changes in the short, intermediate, and long term.



Workplan Development

Goal 3: Improve the socio-economic condition of South Dakotans living in poverty.



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2- Improve health insurance coverage	Decrease the percentage of respondents who indicate their current primary source of health insurance is 'None' to 3% by 2029.	5	4	5	3	2	19

Improvement Strategies

- Assess utilization of state-based assistance programs.
- Support and promote utilization of social determinants of health screening tools in health care facilities.
- Integrate financial support applications into state assistance programs.
- Invest in the poorest counties by supporting microfinance and microenterprise.
- Index the minimum wage to inflation annually.
- Optimize community service programs to meet basic needs: food pantries, community gardens, housing projects, childcare.

Improvement Strategies

- Provide financial education for youth and adults.
- Expand and support community development programs.
- Support and promote job training and education opportunities: apprenticeships, school programs, scholarships.
- Facilitate digital device loaner programs to facilitate remote working opportunities.
- Explore and implement “Grow Your Own” workforce efforts.
- Expand free school lunch programs.
- Develop homeownership investment programs.

Determine the Improvement Strategy

Goal 3: Improve the socio-economic condition of South Dakotans living in poverty

Objective: Decrease the percentage of the population living in poverty to 11.5% by 2029.

Strategy:

ACTIVITIES/TACTICS	PERSON/GROUP RESPONSIBLE	TIMELINE	PROCESS INDICATORS	OUTCOME INDICATORS

Determine the Improvement Strategy

Goal 3: Improve the socio-economic condition of South Dakotans living in poverty

Objective: Decrease the percentage of children living in poverty by 2029, with an emphasis on the top ten counties with the highest percentages.

Strategy:

ACTIVITIES/TACTICS	PERSON/GROUP RESPONSIBLE	TIMELINE	PROCESS INDICATORS	OUTCOME INDICATORS

BH and MH Prioritization Results

Prioritized Goal	Objective	Seriousness of the Problem	Importance to the Community	Size of the Problem	Intervention Availability	Availability Resources	Score
2- Improve health insurance coverage	Decrease the percentage of respondents who indicate their current primary source of health insurance is 'None' to 3% by 2029.	5	4	5	3	2	19
2- Improve health insurance coverage	Decrease the percentage of the population aged 18-64 that have no health insurance coverage to 10%, with emphasis on the counties with the lowest coverage, by 2029.	5	4	5	3	2	19
2- Improve health insurance coverage	Decrease the percentage of children under age 19 without health insurance to 4%, with emphasis on lowest coverage counties, by 2029.	5	4	5	2	2	18

Improvement Strategies

- Establish a Health Care Coverage Coalition to address awareness and enrollment.
- Explore and implement health literacy interventions.
- Integrate patient navigators and community health workers in low-coverage counties.
- Enhance and integrate cross-agency Medicaid enrollment.
- Engage all employers in promoting health care coverage enrollment resources.

Determine the Improvement Strategy

Goal 3: Improve health insurance coverage

Objective: Decrease the percentage of respondents who indicate their current primary source of health insurance is 'None' to 3% by 2029.

Strategy:

ACTIVITIES/TACTICS	PERSON/GROUP RESPONSIBLE	TIMELINE	PROCESS INDICATORS	OUTCOME INDICATORS



Ongoing Workplan Development

- **Work Groups will complete the Work Plan details for each objective.**
- **Alignment with existing efforts will be emphasized.**
- **Work Group leaders and champions will be identified.**
- **Members are encouraged to bring forward additional strategies and partners.**

Additional Strategies

- SD DOH Community Conversations
- SD Problem Solving Courts



Alignment and Theory of Change

Aligning Systems: Health Care + Public Health + Social Services

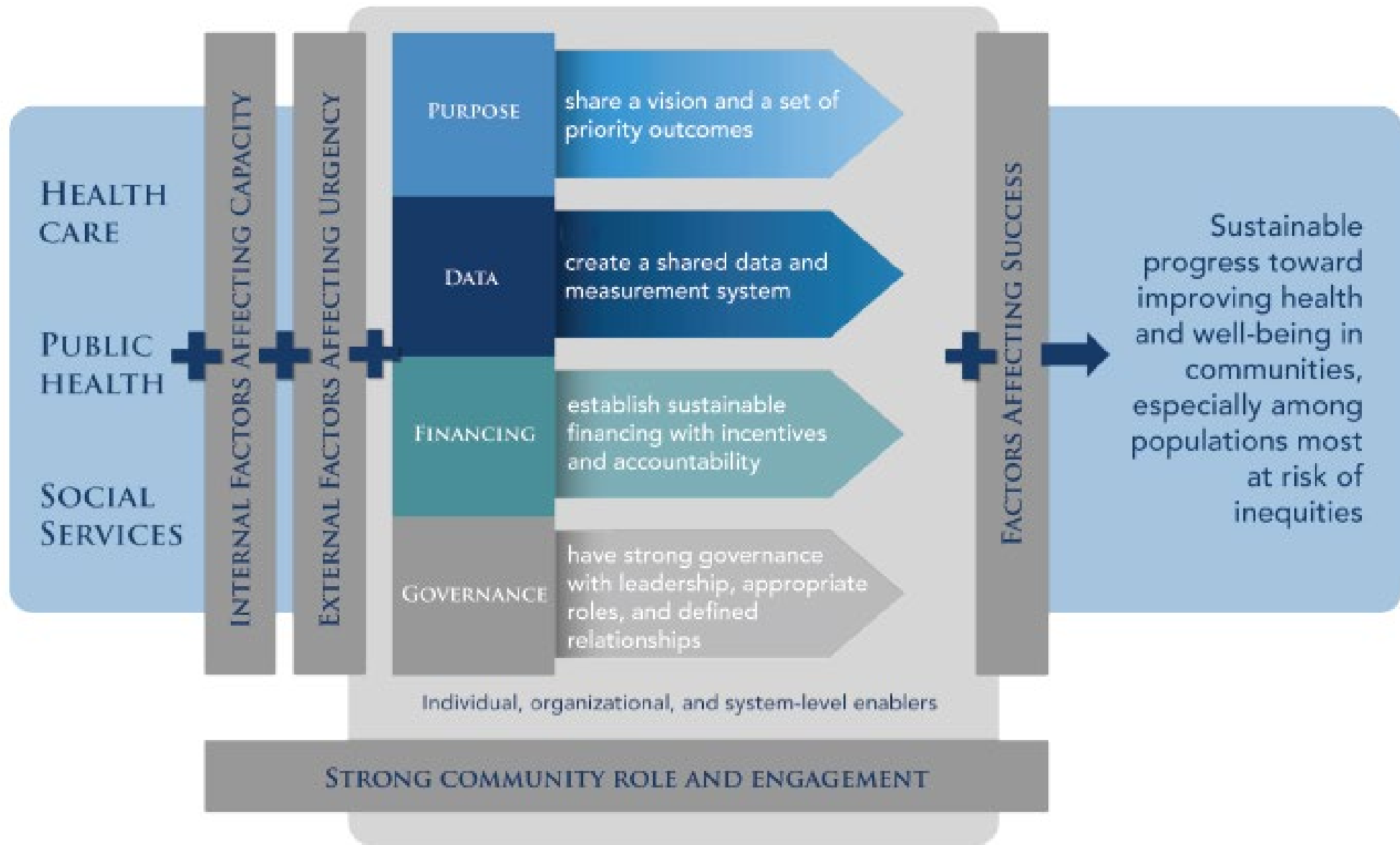
Multisector Systems Alignment Strategy

- The Alignment Strategy intends to foster stronger, sustainable connections among health care, public health, and social services to better meet the goals and needs of the people they serve.
- Work toward a set of shared priorities based on community/state goals and needs

Cross-Sector Alignment Theory of Change

- Share a purpose and set of priority outcomes
- Create a shared data and measurement system
- Establish sustainable financing with incentives and accountability
- Have strong governance infrastructure with leadership, appropriate roles, and defined relationships

Systems change and alignment should be driven by the voice and participation of community members.



HEALTH CARE

PUBLIC HEALTH

SOCIAL SERVICES

INTERNAL FACTORS AFFECTING CAPACITY

EXTERNAL FACTORS AFFECTING URGENCY

PURPOSE

share a vision and a set of priority outcomes

DATA

create a shared data and measurement system

FINANCING

establish sustainable financing with incentives and accountability

GOVERNANCE

have strong governance with leadership, appropriate roles, and defined relationships

Individual, organizational, and system-level enablers

STRONG COMMUNITY ROLE AND ENGAGEMENT

FACTORS AFFECTING SUCCESS

Sustainable progress toward improving health and well-being in communities, especially among populations most at risk of inequities



Next Steps



Plan, Implement, Report

Work Groups

- Work Plan Development
- Work Plan Implementation
- Strategy PDSA Cycles
- Progress Reporting

HIC Reporting

- Annual Meeting
June 17, 2024
- Mid-Year Meeting
December 2024



Behavioral Health and Mental Health Work Group Meeting 2

May 2, 2024

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