

Infrastructure Fund Ad Hoc Advisory Group Charge and Membership

Minnesota's nationally recognized state-local public health partnership has served Minnesotans well since being established in 1976. Since then, Minnesota has changed, health inequities persist, and the issues facing communities across the state have become more complex. To meet these challenges, our public health system must evolve. The past decade has seen a growing effort across the nation to strengthen public health systems.

In Minnesota, state, local, and tribal health leaders have met to set a path forward toward a public health system transformed for the 21st century. These efforts have included the Strengthening Public Health in Minnesota Workgroup (2017-2018), the Strengthening Public Health in Minnesota Technical Workgroup (2018-2019), and the 21st Century Public Health Leadership Council (2019-2020). This past work has produced a new framework for governmental public health in Minnesota¹ that outlines a set of foundational public health responsibilities that must be in place across Minnesota and set a path forward that included exploring new models for carrying out essential public health responsibilities. Minnesota is also engaged in peer learning group with other states working to modernize their public health systems.

Opportunity

In its 2021 session, the Minnesota Legislature recognized the important work that public health has been doing during the COVID-19 pandemic and the challenges that the system faced in addressing this unprecedented event. The legislature provided a \$15 million annual increase to support the Minnesota's public health system² that includes:

- Increase to the Local Public Health Grant (\$7 million)
- Increase to Tribal Health Grants (\$500,000)
- New public health infrastructure funds (\$6 million)
- New Minnesota Department of Health (MDH) funding for public health system assessment and oversight (\$1.5 million)

The new public health infrastructure funds (\$6 million/year) are new funds for community health boards and tribal governments to build foundational capabilities, test new approaches and meet national public health standards.³ The legislation requires that MDH work with the State Community Health Services Advisory Committee (SCHSAC) to determine the process for distributing these funds.

Charge

This group will develop guidance and a process for distributing the public health infrastructure funds for consideration by the SCHSAC Executive Committee. The group will address:

¹ See: [A new framework for governmental public health in Minnesota \(PDF\)](https://www.health.state.mn.us/communities/practice/schsac/workgroups/docs/201906StrengtheningANewFramework.pdf)
(<https://www.health.state.mn.us/communities/practice/schsac/workgroups/docs/201906StrengtheningANewFramework.pdf>)

² See lines 159.1 to 159.26 and lines 450.28 to 450.34 in: [A21-0249 \(PDF\)](https://www.house.leg.state.mn.us/comm/docs/BG9aR5AAG0We5jgzQ4-Bbg.pdf)
(<https://www.house.leg.state.mn.us/comm/docs/BG9aR5AAG0We5jgzQ4-Bbg.pdf>)

³ For more information on foundational capabilities, see: [A new framework for governmental public health in Minnesota \(PDF\)](https://www.health.state.mn.us/communities/practice/schsac/workgroups/docs/201906StrengtheningANewFramework.pdf)
(<https://www.health.state.mn.us/communities/practice/schsac/workgroups/docs/201906StrengtheningANewFramework.pdf>)

- Funding guiding principles
- Project funding guideposts based on the foundational public health areas and capabilities as outlined in [A new framework for governmental public health in Minnesota \(PDF\)](https://www.health.state.mn.us/communities/practice/schsac/workgroups/docs/201906StrengtheningANewFramework.pdf) (<https://www.health.state.mn.us/communities/practice/schsac/workgroups/docs/201906StrengtheningANewFramework.pdf>)
- The process for identification and selection of projects
- Ongoing funding process review and process improvements

A subgroup will make recommendations to SCHSAC’s Executive Committee; this subgroup consists of members of the SCHSAC Executive Committee, and local health directors and administrators representing each of LPHA’s regions and a various sizes and structures of local health departments. The group will meet two to four times between August and December 2021 and will present recommendations to the Executive Committee.

This group will meet virtually until MDH determines staff can hold in-person meetings. MDH will staff and facilitate the group.

Membership

- **Nina Arneson**, Director, Goodhue County Health and Human Services
- **Liz Auch**, CHS Administrator, Countryside Public Health
- **Tarryl Clark**, Commissioner, Stearns County; Chair-Elect, SCHSAC
- **Grace Grinager**, Public Health Director, Cook County
- **Sarah Grosshuesch**, Public Health Director and CHS Administrator, Wright County; Chair-Elect, Local Public Health Association of Minnesota
- **Chelsie Huntley**, Director, MDH Community Health Division
- **Sheila Kiscaden**, Commissioner, Olmsted County; Chair, SCHSAC
- **Joan Lee**, Commissioner, Polk County
- **David Lieser**, Commissioner, Chippewa County
- **Samantha (Sam) Lo**, CHS Administrator, Pine County
- **De Malterer**, Commissioner, Waseca County
- **Jim McDonough**, Commissioner, Ramsey County
- **Gretchen Musicant**, Director of Public Health and CHS Administrator, City of Minneapolis (former member, now retired)
- **Susan Palchick**, Public Health Director and CHS Administrator, Hennepin County
- **Sarah Reese**, Public Health Director, Polk County; CHS Administrator, Polk-Norman-Mahnomen Community Health Board; Chair, Local Public Health Association of Minnesota
- **Chera Sevcik**, Executive Director and CHS Administrator, Human Services of Faribault & Martin Counties
- **Ann Stehn**, Director and CHS Administrator, Horizon Public Health

Staff to workgroup: Phyllis Brashler, Kim Milbrath, MDH Center for Public Health Practice

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