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NATIONAL Leadership ACADEMY FOR THE PUBLIC'S HEALTH

THE *BIG PICTURE*©

Team Name: MINI

Location: Minneapolis/St. Paul, MN

Project Impact Statement: Decrease health disparity by providing access to preventive health services in a trusted setting.

Socio-Economic, Political and Cultural Context

Immigrant and refugee populations in Minnesota may not be able to navigate the unfamiliar and cumbersome process of signing up foe health insurance and finding a medical home.

The existing relationships that MINI has built will facilitate progress on the goal of integrating other preventative health services. Partner organization/faith communities have expressed an interest in preventive health services.

The mistrust of government in some communities and the 'uninsurability' of some community members may impede progress.

Rationale

By engaging our minority populations as partners in improving their health and the health of their communities, we engender the trust that is necessary to overcome the identified barriers to health equity.

Stakeholders

Fairview
St. Mary's Health Clinics
Minnesota Department of Health
Community partners/community representatives
Free and community clinics
Site contacts
Academic institutions

Pathway to Change/ Key Activities

Needs assessment and interviews in the communities MINI serves to determine the type of need for preventative services

Engagement of core partners to plan MINI's next steps.

Document MINI's current process on paper, as a way to communicate the program's infrastructure and how it could be used.

Leadership Learning Priorities

1) Utilize data in the context of health reform to effectively inform major stakeholders of potential for return on investment by leveraging the community networks and infrastructure that MINI has developed.

2) Utilize community based leadership skills to encourage the community partners to align and maximize resources to improve health outcomes and access to health care.

3) Initiate/build relationships with influential/key persons within organizations to explore options in order to increase engagement of existing organizations and incorporate new partners in MINI's efforts to improve access to preventative services.

Outcomes and Indicators

Project year (By December 2014):

Outcome A: Identify possible future approaches with SWOT analysis.

Indicators: By August 2014 SWOT analysis of MINI and it's service partners will be complete.

Outcome B: A draft model has been crafted with the input of stakeholders.

Indicators: Model developed and distributed.

Outcome C: Collaboration is developed to support expansion to new preventative services.

Indicators: The number or types of new partners demonstrating investment in MINI's model.

Long term: (By 2017 Date):

Outcome A: New organizations engaged in health disparity.

Indicators: MINI is incorporated into these organization's plans moving forward.

Outcome B: Framework for Community-Based Prevention Partnership.

Indicators:

Outcome C: MINI's main processes and procedures documented

Indicators: