NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

STATE HEALTH IMPROVEMENT PLAN

Division of Public Health

Nebraska Health Status Priorities

In addition to public health system priorities, the SHIP includes adopting T/LHD CHIP priorities as Nebraska's health status priorities. This allows the Nebraska DHHS, DPH, and other public health partners to align with, and elevate, local community priorities and to provide technical assistance, capacity building support, and resources to T/LHDs. By adopting T/LHD CHIP priorities, Nebraska DHHS DPH is recognizing that there may be different issues and needs across the state. What is a need or challenge in urban areas of the state may differ from issues and challenges in more rural or remote areas of the state.

SHIP Development and Processes

A SHA/SHIP advisory group, comprised of data-minded stakeholders and community partners, will meet periodically, and provide state-wide Health Status Priority recommendations regarding processes and timelines for systematizing T/LHD CHIP priorities based on the SHA's quantitative data and DHHS health policy related priorities. Pre-meetings were held throughout 2023 to support the development of this plan, and the inaugural meeting for this group occurred in 2024. As the Division of Public Health strategically leads public health system advancement in Nebraska, a team of multi-disciplinary subject matter experts (SME) are performing assessments and providing recommendations on how to maximize positive health outcomes by elevating CHIP priorities in a logical manner based on the data from the SHA, findings from the SMEs, access to care assessment results, and health related policies being addressed by DHHS. This "plan-do-check-adjust" method allows DPH to be adaptive to the process while responsiveness to Nebraska's Health Status Priorities can be tailored, dynamic, and outcomes focused.

SHIP Implementation

Over the course of the five-year plan, the systems level priority advancement area workgroups will meet as frequently as deemed necessary by the workgroup members to implement and track progress. The workgroup leaders will meet quarterly with the SHA/SHIP manager to discuss advancement area strategies developments. Workgroup leaders will meet as a group twice annually to discuss progress. All workgroup members will meet annually to collaborate, ideate, and recommend revisions of the SHIP. Collective monitoring, reporting progress, and revising will ensure the plan remains relevant and effective.

Small group work during the 2024 SHIP Leads Annual Meeting

Nebraska Public Health Advancement/SHIP: Vision for a High Performing Health Department

Key visioning elements were established by State, Local, and Tribal Health Department representatives, along with partners from UNMC College of Public Health and the Nebraska Association of Local Health Directors, through SHIP development workshops. This vision serves as the foundation for Public Health Advancement in Nebraska.

Individual	Organizational	Community	Policy	System
Well-established, trained, and supported public health workforce that has completed core education appropriate to their role and has access to continuing education opportunities	High performing health departments (state, local, and tribal on a pathway to meeting national accreditation standards) Effective and responsive public health laboratories Effective governance (Boards of Health)	Generative partnerships (carefully curated networks) Good standing with our community members	Clear and effective public health policy and enforcement	Modern, high quality, connected and timely data and information systems Effective and unified communications Sustainable and flexible funding Consistent planning with active performance management and quality improvement Skilled administration, management, coordination of public health programs and activities Resourceful and knowledgeable leadership Credibility – having the trust and confidence of stakeholders and community members Intentional care and maintenance of the public health system

What is a State Health Improvement Plan?

The State Health Improvement Plan (SHIP) builds on the comprehensive State Health Assessment (SHA) completed in 2024. Serving as a blueprint for action, the Nebraska Division of Public Health uses the SHIP to advance public health priorities by addressing alignment and coordination efforts at a systems level. Using a collaborative planning approach, Nebraska's Division of Public Health systematically engages public health partners, including Tribal and Local Health Departments (T/LHD), to foster shared decision-making, ownership, and responsibility for the plan's implementation.

Over the course of five years, SHIP workgroups will carry out state-wide initiatives that are designed to impact the public health system. The SHIP is designed to be dynamic with workgroups adjusting courses as needed to create the desired outcomes. As implementation progresses, workgroups will review efforts and progress quarterly and will adjust the strategies and activities as needed.

SHIP Priority 1: Public Health System Infrastructure

A strong public health infrastructure enables optimal responses among public health system partners to prevent disease, promote health, and address emergency situations. Sustained, system level activities carried out collaboratively by State, Local, and Tribal health departments and public health partners will strengthen the quality and capacity of Nebraska's public health system to confront a range of issues. Leveraging synergistic strategies will improve the system term and the system's capacity to support wellbeing for all Nebraskans.

SHIP Priority 2: Public Health System Centered on Reducing Health Disparities

Public health plays a key role in addressing health disparities. The second public health system (or governmental systems level) priority focuses on leveraging synergistic strategies that address inequities and disparities that will help all Nebraskans have a fair opportunity to be as healthy as possible. A health disparity is a health difference that often affects people who faced social, economic, or environmental challenges.

Nebraska Public Health Advancement/SHIP Year 1 Strategic Areas of Advancement across the Public Health System to Meet Objectives

The menu of proposed strategies for year 1 in the SHIP advancement areas provides flexible options for workgroups as they explore various approaches to improve outcomes across the system.

Public Health Infrastructure	
Public Health System Infrastructure Advancement Areas	**Infrastructure Advancement Area Proposed Strategies for Year 1**
Public Health Infrastructure Metrics	• Define roles and responsibilities for the group • Have clear leadership roles • Develop clear objectives and goals • Identify funding sources • Develop partnerships • Create staff positions to work across the system to implement and advance PH infrastructure support work • Form statewide practice/systems advisory group
Communicating the Value of Public Health	• Develop PH communication training for local organizations • Hold community town halls/surveys/ listening sessions • Identify PH champions through Boards of Health • Develop questions about the PH reputation to be included in CHAs • Consider unique needs/voices of each tribal organization
Workforce Development Planning	• Implement assessment • List of recommended trainings • Update workforce development plan for reaccreditation • Explore ways to address workforce shortage challenge • Develop retention strategies • Create a basic template for PHAB accreditation • Explore Statewide bench building training
Comprehensive Access to Care Assessment	• Coalition identified

	• Scope of work refined • Assessment priorities identified • Partnerships identified • Explore the creation of a regional system to collect and track data • Identify the needs on a local level that can be addressed at a state level • Develop portion of assessment specific to rural health
Costing Assessment	• Garner support and commitment from T/LHDs • Collaborate with Tribal Health Partners • Identify timeline for sharing information on process progress • Engage with Ohio HD as SME • Develop a work plan • Identify key partnerships outside of Health Departments
Public Health System Centered on Reducing Health Disparities	
Public Health System Centered on Reducing Health Disparities Advancement Areas	**Reducing Health Disparities Advancement Area Proposed Strategies for Year 1**
Community Health Workers (CHW) are an essential part of our public health workforce	• Define roles and responsibilities • Identify best practices from other states • Integrate work already taking place within State and Local HDs • Perform an environmental scan • Pilot a statewide CHW network • Develop proof of concept for Medicaid state plan amendment • Align CHW training opportunities • Look into creating standardized CHW training • Explore the adoption of competencies as a state, ensure all trainings meet these
Data Modernization	• Identify source of truth datasets and begin layering • Utilize resources to train-up staff • Explore how to change regulations by getting on a Public Hearing schedule • Create storytelling templates to share data • Begin groundwork to get a MOU in place to receive tribal membership between DHHS & Tribes Great plains tribal epi center

	• Set up a system to implement and onboard hospitals into ECR
Vision for Reducing Health Disparities	• Identify partners, stakeholders, and resources • Develop and implement a survey in each tribal, state, and local department to assess the work environment and identify social challenges • Create and pilot a standardized tool based on survey results

Nebraska Public Health Advancement/SHIP Year 1 Preliminary Work Groups

Workgroups were formed during a Public Health Advancement/SHIP Planning retreat in November 2022. Retreat participants self-selected into eight SHIP advancement areas. During the workgroup leader kickoff meeting, leaders are encouraged to reach out and identify additional members for their year one work groups. Implementation of advancement areas is anticipated to begin by March 2023. Workgroups will determine year one objectives, activities, targets, and implementation steps for each public health advancement area. Workgroups will meet at least quarterly, workgroup leaders will meet as a group twice annually, and all workgroup leaders and group members will meet annually.

November 2022 Retreat

8 SHIP Advancement Areas or Workgroups

Comprehensive Access to Care Assessment

Coordinating Organizations:

- UNMC, Center for Health Policy
- DHHS DPH
- UNMC COPH

Coordinators: UNMC COPH

Overview: This work will focus on completing a comprehensive access to care assessment statewide and then will pilot a system to improve referral completions focused primarily on behavioral health.

Why? The Division of Public Health must identify the existing barriers that prevent individuals from having equal access to health care across Nebraska to begin productively addressing the health status priorities outlined in recent community health improvement plans (CHIPs).

Purpose: A study was conducted in 2023 by the UNMC College of Public Health (COPH) to identify the specific gaps and barriers that limit access to healthcare in Nebraska. One major barrier noted through the study was a lack of coordination between primary care clinics and behavioral health organizations. Referrals are being made, but there are challenges post referral that are preventing patients from securing behavioral health services.

Outcome: The data analysis from this study identified seven foundational areas as essential for good health outcomes, and although not all of these services should be available in each community, every individual should have access to these services. These seven areas of healthcare are (1) primary care, (2) behavioral health, (3) oral health, (4) reproductive and women's health, (5) emergency medical services, (6) hospital care, and (7) public health. To begin closing this access gap, up to 3 pilot projects will be funded to develop strategies for improved care coordination between primary care and behavioral health services.

21st Century Learning Community / Public Health Infrastructure Metrics **Coordinating Organizations:** • UNMC, Office of Public Health Practice • DHHS DPH • NALHD **Coordinator: UNMC, Office of Public Health Practice** **Overview:** This work includes general public health modernization and infrastructure development, creating infrastructure monitoring metrics, and continuing to prioritize building trust and collaboration within Nebraska's public health system.	**Why?** The foundation of public health infrastructure consists of the workforce, high performing health departments, strong funding, partnerships, policies, accessible data, and efficient communications systems. The COVID-19 pandemic pointed out areas of weakness nationwide within the public health system infrastructure that were hindering response efforts. Many of these issues were preventable had a stronger infrastructure been in place. **Purpose:** Creating an early warning system for the state that predicts and monitors potential health risks and hazards to Nebraska's citizens allows public health departments to be more responsive, instead of reactive, to these potential threats. Strengthening infrastructure also coordinates relevant partners such as public health directors, elected officials, and funders and creates positive conditions that result in improvements in overall population health. **Outcome:** The goal of a public health infrastructure early warning system is to provide public health leaders with as much notice as possible to allow time to consider and develop different possible response strategies. A strong infrastructure also better equips public health leaders to maintain reliable systems that lead to improved health, reduced health disparities, and increased life expectancy over time statewide.
Communicating the Value of Public Health **Coordinating Organizations:** • DHHS DPH • MPHTC Frameworks Learning Circle • NALHD **Coordinator: NALHD** **Overview:** This work will focus on exploring what the public health system wants to communicate universally, how we collectively might assess how communities are responding to public health generally, and what communication training might be provided statewide to public health professionals.	**Why?** The COVID-19 pandemic exposed a level of distrust of the public health system among some Nebraska residents that interfered with their acceptance of health measures that were proven to be effective, and in some cases, lifesaving. **Purpose:** To increase trust in state and local public health systems through promotion of the quality programs and services provided while also recruiting, training, and equipping public health employees to be positive spokespersons and advocates for public health programming. **Outcome:** Create an informative marketing campaign that demonstrates the myriad high quality health services provided by the state and local public health departments and portrays the passion driving public health employees and the individual stories of success that result from their work.

Workforce Development Planning **Coordinating Organizations:** • UNMC, Office of Public Health Practice • DHHS DPH • L/THDs (Accreditation coordinators) **Coordinator: UNMC COPH** **Overview:** This work will focus on workforce development, including planning tools and resources, recruitment and retention needs and approaches, and hiring strategies.	**Why?** Population data from Nebraska's 2022 State Health Assessment (SHA) reflects an aging demographic that will require future adjustments in the areas of healthcare, social services, and workforce planning. **Purpose:** To be proactive and anticipate changes to Nebraska's future workforce, development planning is in progress to prepare for this demographic shift within these industries. Two areas of focus include conducting assessments of Nebraska's workforce to determine specific needs for planning and training, and exploration of ways to address workforce challenges, including retention and hiring strategies. **Outcome:** The goal is to identify areas of improvement within the processes of recruitment, hiring, training, and retention. Then, over time, enhance infrastructure within our educational institutions, communities, and public health systems to offer support and technical assistance to build a continuous, competent workforce.
Costing Assessment (Foundational Public Health Services) **Coordinating Organizations:** • NALHD • DHHS DPH • L/THDs **Coordinator: NALHD** **Overview:** This work will focus on completing a cost assessment to determine what Nebraska's public health system needs financially in order to provide foundational public health services.	**Why?** The DHHS DPH is an accredited public health department that values providing high level Foundational Public Health Services (FPHS) established by PHAB. Completing a cost assessment is beneficial to this mission because the results provide a broader understanding of costs, expertise, and capacity towards the national FPHS framework. **Purpose:** Completing a cost assessment is a big undertaking that will provide DPH with information about how best to allocate resources, shift resources within an organization, identify opportunities for sharing resources, and provide a more stable platform to advocate for funding. **Outcome:** The completion of the cost assessment will inform the DPH where more resources are needed to transform Nebraska's Public Health System. It will provide directions on where to seek more funding and give insights into where resources could be better allocated and distributed.

Data Modernization **Coordinating Organizations:** • DHHS DPH Health Data **Coordinator:** DHHS DPH Health Data **Overview:** This work will focus on the data modernization efforts led by DHHS, Division of Public Health and will include comprehensive access and ethical use of community-level data.	**Why?** Accessing accurate data easily that reflects current population status is vital to inform productive public health programming that improves population health. **Purpose:** Modernizing the DPH data system will allow local and tribal health departments to more easily access current qualitative and quantitative data that drives their health priorities and gives them measurable feedback on their efforts for improved outcomes. **Outcome:** Provide comprehensive and ethical access to accurate, regional data to paint the picture of Nebraska's public health landscape, to focus on health literacy of the public, and to make data useful toward improving all of Nebraska's health outcomes.
Recognize the Expertise of Community Health Workers as an Essential Part of our Public Health Workforce **Coordinating Organizations:** • DHHS DPH • L/THDs **Coordinators: DHHS DPH** **Overview:** This work will focus on amplifying the continuing work of elevating the profession of community health workers including activities such as developing a statewide CHW network, adopting competencies, and standardizing CHW training.	**Why?** Community Health Workers (CHW) serve as liaisons between health systems and the actual communities these systems serve. Research shows the role of the CHW improves health outcomes while reducing overall health care costs. They help build trust between the health care systems and their surrounding communities and help resolve social determinants of health that prevent equal access to care. **Purpose:** The DHHS DPH is leading the effort with local and tribal health departments to achieve Medicaid reimbursement and establish certification standards to promote the expertise of the CHW as well as the important role they play in improving statewide health outcomes. **Outcome:** Achieving Medicaid reimbursement for CHWs in Nebraska creates opportunities for urban and rural health care providers to utilize their services as part of their standard care practices to increase access to care and reduce health disparities and social determinants of health that occur within their community settings.

Vision for Reducing Health Disparities
Coordinating Organizations:

- DHHS DPH
- L/THDs

Coordinator: DHHS DPH Office of Health Disparities (OHD)

Overview: This work will focus on implementing strategies to help meet the vision for reducing health disparities in Nebraska including the creation of a framework for organizations to use to make progress in this priority area.

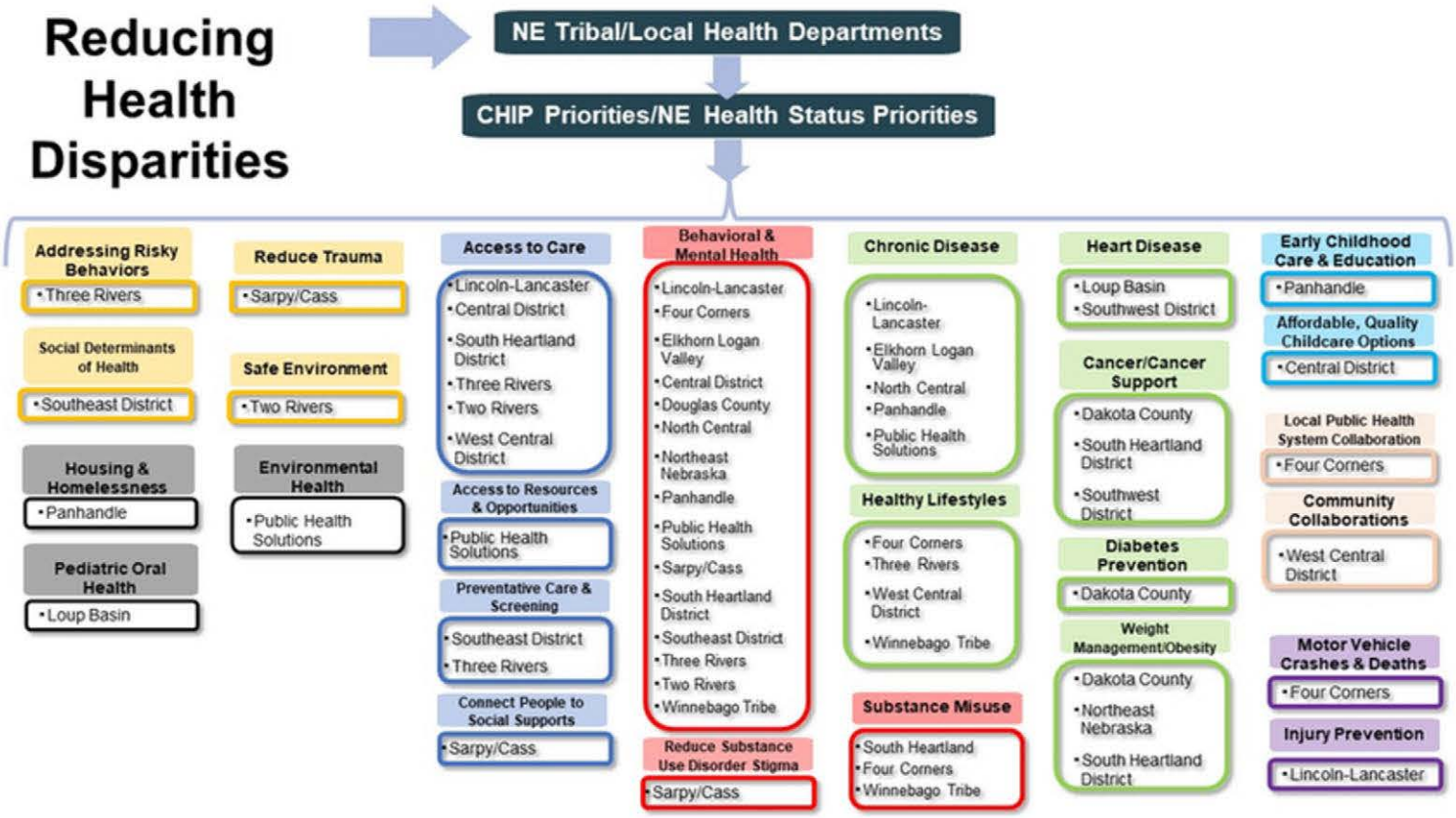
Why? As the COVID-19 pandemic emphasized the weaknesses of our nation's public health infrastructure, one issue that came to light was how health disparities and social determinants of health (SDOH) lead to unequal access to health care even in places where those services are abundantly available.

Purpose: All Nebraska residents should have access to the seven foundational services which include (1) primary care, (2) behavioral health, (3) oral health, (4) reproductive and women's health, (5) emergency medical services, (6) hospital care, and (7) public health.

Outcome: The DPH OHD is taking the lead to create a vision and design strategies to reduce health disparities and SDOH across the state. To begin, a workgroup was formed from public health representatives from state, local, and tribal entities. The initial focus is on creating a common definition of the term "health disparities" amongst all state organizations and health systems to prevent confusion or duplication of work. The next focus will be communicating and marketing this terminology to unify efforts and resources. Other strategies to be utilized going forward will include assessing that all SHIP work groups' efforts are centered on health disparities using surveys for specific feedback and guidance. PHAB's Foundational Public Health Services (FPHS) framework is another guiding resource that will be incorporated into this process to make sure that reducing health disparities stays at the center of Nebraska's State Health Improvement Plan.

T/LHD Most Current Community Health Improvement Plan (CHIP) Priorities*

In addition to public health system priorities, the SHIP includes adopting T/LHD CHIP priorities as Nebraska's health status priorities. This allows the Nebraska DHHS, DPH and other public health partners to align with, and elevate, local community priorities and to provide technical assistance, capacity building support, and resources to T/LHDs. The 26 CHIP priorities will be addressed systematically over the course of 5 years by way of data analysis in addition to other prioritization and clustering methods.



*Colors indicate preliminary clustering of similar priority categories.