

**MPHA Accountable Communities for Health (ACH) Conversation**  
**January 10, 2014**  
**Questions for Small Group Discussion**

**Community Engagement**

1. How can state and local public health ensure communities and a diverse group of non-traditional partners are engaged in ACH?
2. What are strategies to prepare communities to become Accountable Communities for Health and develop necessary partnerships with existing ACOs, local public health, and community initiatives?
3. What information would be useful to communities and public health as they are considering ACHs? What is the best mechanism to share information and learn from existing model communities, partnerships, and best practices? What existing initiatives, partnerships and best practices should we be aware of and be tracking? E.g. Community Care Teams, SHIP/CTG, Camden New Jersey Hot Spotters, Back Yard Initiative, New Ulm project, etc.

**Role of Public Health**

1. How could community leadership for health developed through SHIP, CTG and other public health efforts be engaged in ACH's?
2. How could Community Health Board's community health assessments and Public Health Advisory Committees be used to support ACH's?
3. How could public health services be coordinated with clinical care to reduce and prevent chronic disease through ACH model? Public health services such as:
  - Prevention and health promotion activities.
  - Counseling and educational services directed at personal risk behaviors, the management of particular health problems, and the use of health services.
  - Outreach services, such as home visits, that assure the delivery of needed care and that promote adherence to complex treatment programs.
4. What are the policy, systems and environmental change issues that an ACH might address to advance systemic changes and health equity?

**Role of MPHA**

1. How can MPHA members help articulate the role of public health and engage communities?
2. How can MPHA play a role in bridging clinical care with community health organizations?
3. How can MPHA facilitate ongoing conversation and involvement in ACH? How can MDH stay engaged with MPHA and LPHA on an ongoing basis? What are the ways we can continue to work together to keep connected to the work on the ground? Can MPHA and LPHA play a convening role?

(After today's meeting, please feel free to email additional input/suggestions you have to these questions to Diane Rydrych, Director, Division of Health Policy, MDH, at [diane.rydrych@state.mn.us](mailto:diane.rydrych@state.mn.us).)