WRIGHT COUNTY PUBLIC HEALTH

Minutes

Public Health Task Force

February 10, 2025 | 9:00 a.m. | GC 3101/Zoom

Attendees:

Members (marked box indicates Present):

☐ Ann Bajari (Excused)
☒ Ann Gonderinger (Remote)
☒ Bonita Bryant (Vice Chair)(Remote)
☒ Emmanuel Ngabire (Remote)
☐ Jacquelyn Bergo
☒ Jamie Stang (Remote)
☒ Jeanne Holland
☒ Dr. Kim Tjaden (Remote)
☒ Linda Carlson
☒ Marlene Kittock (Remote)
☒ Melissa Pribyl
☒ Mona Volden
☒ Toni Seroshek (Chair)

HHS Staff Attendees:

Abby Wacker
Joel Torkelson
Kelsey Collier
Patty Malecek
Sarah Grosshuesch

Guests/Other:

Ada Harris
Keturena Omtvedt
Savanah Jones

1. Call to Order—The meeting was called to order at 9:02 a.m. by Chair, Toni Seroshek
2. Introductions were made.
3. Approval of the Agenda and the January minutes
   a. Motion to approve Agenda and January minutes by Mona Volden, second by Melissa Pribyl.
   b. Vote-All members approve of Agenda and January minutes.
4. Presentation and Discussion Items
   a. Family Planning—*Abby Wacker*
      - With community and agency feedback, changed the name from Wright County Family Planning to Connected Spaces. The grant that we receive changed names from Family Planning Special Projects to Sexual and Reproductive Health Services.
      - We had 295 meetings with youth and that is our 1:1 educational opportunities within schools. Through that program we served 89 youth.
      - Restarted the Safe Harbor Protocol Team to provide legislative updates and support County-wide initiatives in preventing and responding to human trafficking.
      - We transitioned group education at the Wright County Jail to CentraCare's Community Health Team.
      - Expanded contracts with local clinics to include Allina Health and are collaborating to create a workflow.
      - We made 111 connections made to other supports like Rivers of Hope, Central MN Sexual Assault Center, food resources, housing resources, medical services, etc.

- 1598 people attended group education at school (affirmative consent) day programs/group homes, or an outpatient substance use program.
- Transportation continued to impact access to medical care. Clients expressed that they could not get to appointments, delayed medical care and experienced exploitation because of transportation.

b. Strategic Planning Process Overview-*Joel Torkelson*

- Since October 2024
  (a) Finalized out Mission, Vision and Values. Each staff person received a laminated copy of this to have in their cube/office.
- In December 2024 we had a three-hour facilitated session. We had conversations about what our superpowers are and brainstorming and discussion around four strategic priorities, about our current activities, new activities, and possible outcomes.
- Our four strategic priorities:
  (a) Strengthen Workplace Culture
  (b) Share Power with Community
  (c) Integrate Health Equity Principles
  (d) Forecast, Plan, Innovate
- Completing the Process
  (a) Utilize Team meetings later in February to gather staff feedback on our action plans (goals, objectives, action steps, and timelines).
  (b) March 24th – our finish line (strategic plan will be completed and presented to staff).
  (c) Steering Committee that has been meeting ongoing – 11 Public Health staff.
    ♦ Supported by: MDH and Human Impact Partners.
- Priority Health Areas Chosen for 2026-2028
  (a) How does this relate to our Strategic Plan?
    ♦ Timing.
    ♦ Plans are different but inform each other.
    ♦ Roadmaps for us internally and externally.
- One of the priorities is Access to Care
  (a) Increase access to health care providers.
  (b) Promote person-centered, trauma-informed.
  (c) Culturally appropriate approaches to care.
  (d) Focus on upstream drivers to barriers to care.
- Another priority is Economic Stability
  (a) Increase access to affordable housing.
  (b) Minimize stigma and narrative around cost of living from individual to community level.
  (c) Advance educational and economic opportunities for all.
  (d) Address health related social needs.
- Third priority is Social Connectedness

(a) Advocate for nurturing environments that enhance mental well-being across the lifespan.

(b) Find ways to provide support and engagement at the neighborhood levels, connect people in a culturally relevant way.

(c) Strengthen and support populations facing social barriers while fostering community partnerships.

5. New Business
   a. Yearly agenda is being updated and will be emailed out.
6. Old Business
   a. None.
7. Other
   a. Sarah and Commissioner Holland went the SCHAC (State Community Health Advisory Committee) meeting last Thursday. It was an all-day event. Good discussion. Commissioner Holland is now the alternate to the executive committee for the region.
8. Agenda Items for the next meeting, March 10, 2025
   a. Family Home Visiting
   b. Injury Prevention Update
   c. Survey Overview
9. Adjourn
   a. Motion to adjourn by Jeanne Holland, second by Melissa Pribyl.
   b. Adjourned at 9:46 a.m.

pl/sg