

## Minnesota Department of Health (MDH) and Minnesota Immunization Networking Initiative

MDH's vision includes health equity and one of our value statements is about collaboration. Within the immunization program, we value partnerships greatly and our work is strengthened by collaborations. Successful partnerships are based on trust and respect. We have 10 years now of MDH (with Immunization and the Office of Minority and Multicultural Health) and MINI working together, with these values always center stage. Promoting health equity is a monumental task and one that requires partnerships.

The mission of the Minnesota Immunization Networking Initiative (MINI) is to reduce barriers to accessing influenza immunizations for adults and children. We do this by holding MINI clinics in trusted, community based settings and by providing the vaccinations at no charge, serving uninsured, minority populations primarily within the greater Twin Cities metro area. MINI is a collaboration of community partners which organize and host the clinics at a time when people are in a facility for another reason such as a worship service.



### Model Practice in Action

### Partnerships to Promote Health Equity

We know that not all people in Minnesota have the same opportunities to be healthy. Stark inequalities persist in some parts of our society, and these inequalities have resulted in some groups having better health outcomes than others — even after factoring in individual choices. Minnesota ranks, on average, among the healthiest states in the nation. But the averages do not tell the whole story.

Too many people in Minnesota are not as healthy as they could and should be. Minnesota has these disparities in health outcomes because the opportunity to be healthy is not equally available everywhere or for everyone in the state. Working with and through the MINI collaborative, being based in the communities, brings an already higher level of trust to interactions than we (MDH) could ever achieve ourselves—or at least it would take a great deal of time to get there. Since 2006, MINI has provided over 64,000 free flu shots to those beyond the reach of MDH – those with language, trust, culture, income, transportation, and legal status challenges.



### What Does it Take?

**The following describes the beginning of the MDH and MINI partnership relationship and how it has grown over time.**

- Pat Peterson from Fairview Health Services reached out to MDH staff as the MINI collaborative was just beginning to form. She found an “open culture” in the health department. MDH helped connect Pat to networks of public/private immunization contacts and resources within the state (Minnesota Coalition for Adult Immunization, two statewide immunization conferences, local health departments). Denise was aware of Pat’s work and her wonderful reputation from previous PH emergency preparedness projects they had worked on.
- The MINI partners had the connections to the communities, including the faith connections, and a level of trust among community members/leaders that MDH lacked. MDH brought data on health disparities, expertise on immunizations (best practices, IIS support), connections to public health and immunization networks within the state, support for MINI’s grant writing (letters of support, etc.), grant funds (MDH’s Eliminating Health Disparities Initiative), vaccine for the uninsured (through Vaccines for Children [VFC] and Uninsured & Underinsured Adult Vaccine [UUAV] programs), vaccine educational resources, a vaccine clinic look-up feature, and evaluation support.
- From MDH, we started with only 1-2 staff members (flu immunization staff) involved. As the partnership grew, staff became involved from the larger VPD section or even the department: VFC program, UUAV program, Immunization Information System (IIS) staff, preparedness staff, Center for Health Equity staff, Refugee & International Health staff, etc.
- We have progressively improved the partnership over the 10-year span.
- In terms of resources, for MDH it takes staff time and VFC/UUAV vaccine.

## Environment Context and Barriers to Success

Securing sustainable funding for this work has been a challenge, as well as adapting to the changing landscape of the healthcare environment. Grant funders often alter their focus from year to year and there is an increasing focus currently on the importance of addressing social determinants of health, as opposed to funding direct services.

If we (MDH) were to take on the lead role of nurturing and coordinating these partnerships, it would be very time-intensive for us. Which is not to say that we shouldn't keep working on the relationships—it is important for us to do that—but because overcoming trust concerns takes time, the resources necessary to do this would be great. Much better use of all of our resources to work together.

Additionally, the Affordable Care Act has had a profoundly positive impact in MN, with the numbers of uninsured decreasing dramatically. MDH has assisted MINI in understanding the impact of some of these changes and brainstorming adaptations to fit this new reality.

## Key Results or Implications of Success

In 2014-2015, MINI held 125 multi-cultural clinic sites (96 additional sites from 2006-2007) in the greater metro area of Minneapolis and St. Paul. Data collected from MINI consent forms indicate the program provided 7,605 free flu immunizations, up from 3,492 in 2006-2007. MDH is committed to continuing the successful and mutually beneficial partnership we have developed with the MINI collaborative and working to continue to look for new opportunities and adapt to any barriers we discover along the way.

## Program Impact

The establishment of the MINI collaborative for seasonal flu vaccinations has also had an impact on outreach to the communities involved during public health emergencies. Minnesota has one of the largest Liberian communities in the United States, and the relationships that MINI established provided an avenue for public health and the community to connect. When Ebola started to become a concern for the Minnesota Liberian community, MINI was able to help the state health department connect with community leaders to provide reliable information and reassurance to community members when tensions and worry over Ebola was at its height.

## Lessons Learned

MDH is committed to health equity in Minnesota, where all communities are thriving and all people have what they need to be healthy. We can't do this alone. Developing partnerships with faith-based and community-based organizations that share this vision and are trusted partners in the communities has worked well for all of us.

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