One Health Systems Mapping and Analysis Resource Toolkit (OH-SMART[™])

Supporting multi-sectoral health systems strengthening

Katey Pelican, DVM, PhD Co-Lead Sustainable Development Goal Initiative Co-Director Strategic Partnerships and Research Collaborative Department of Veterinary Population Medicine University of Minnesota



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Background: OH-SMARTTM

- Co-developed by USDA & University of Minnesota
- Adapted from business process improvement and political science methodologies
- Used to support multi-sectoral stakeholders in analyzing their own system of connections among & between sectors and facilitate health systems improvement
- Train local implementers and then support them to implement tool











- Identify stakeholders at regional, national, local level
- Analyze influence & funding in the health system
 (adapted from Policy Field Analysis, Dr. Jodi Sandfort)



Antimicrobial Resistance



	Production	Storage/ Distribution	Procurement	Use	Fate
Stakeholders					
Where are antibiotics?					



- Conduct 'key stakeholder' interviews
- Can be done one on one or as a focus group during workshop.
- Also use field notes
- Identify themes
- Focus on:
 - understanding knowledge, attitudes and practices for key agencies
 - What collaborations already exist and with whom
 - What is working/not working







- Choose a complex scenario to map (interaction)
- Multi-sectoral groups map the scenario using process mapping

COMPLED MAP: FIRST DETECTION TO ICS



HPAI Response – MN 2015



- Participants review and discuss the combined map
 - Identify discrepancies in responses or areas where steps are not known or unclear
 - Identify where interactions work & how they might be strengthened









- As a group decide on resolutions to each discrepancy identified:
 - Multi-agency consensus on what should occur during each discrepancy
 - Agree on how a discrepancy should be resolved
 - Also decide how best practices can be institutionalized







- Attendees develop actionable steps to achieve the resolutions and develop an implementation plan
 - Details the consensus reached on discrepancies and resolutions
 - Identifies specific action steps to address the needs and/or institutionalize the best practices.
 - Prioritize resources within an agency to achieve the ideal communication

Resolution*	Action Step identified*	Resources needed*	Responsible entity*	Time frame*	Point Person*
Develop communication and policy advocacy plan for	1- Hire consultant to draft comm. plan	Consultant fee	P&R	Q4 2017	Kinani
zoonotic diseases including brucellosis.	2- Workshop for discussion and validation of the comm. plan	Per diem, transport refund, Accommodation, conference facilities	P&R	Q4 2017	Kinani
	3- Dissemination of the comm. plan to different sectors for buy-in	Per diem, transport refund, Accommodation, conference facilities	P&R	Q 4 2017	Kinan
Communication mechanism between sector and reporting	1- Set up of cross- sectoral TWG on zoonoses including brucellosis	Workshop facilities	R-OHSC	Q1 2018	Chair ROHSC
as the information is available	2- Streamlined cross-sectoral reporting platforms	Workshop facilities	R-OHSC	Q1 2018	Chair ROHSC
Develop brucellosis guideline for prevention, surveillance,	1 Technical working groups develops guidelines including developing standard		R OHSC		

Applied in 30 US states and 18 countries

Planning:

- AMR National Action Planning (Govt-led with FAO) Cambodia, Laos
- One Health Implementation Planning (Govt-led with P&R, FAO) Ethiopia, Uzbekistan
- Zoonotic Disease planning (with USDA, CDC- ZDPT)- Pakistan, US
- Zoonotic Disease Workforce Planning (OHW: OHCEA-led, P&R, FAO) Rwanda, Uganda, Senegal, Cameroon, Tanzania, Ethiopia
- Petting zoo zoonotic disease risk (State gov't led, with USDA)-US
- Climate change- related emergency planning (with USDA, Arctic Council-led)- Circumpolar countries, Alaska
- Select agent planning (Govt-led, with DTRA, USDA)- Turkey
- Rabies National Action Plan development (INDOHUN-led on own) Indonesia
- Operationalizing OH at provincial level (INDOHUN-led) Indonesia
- Climate change disease risk (USDA-led) US
- Food-borne illness rapid response planning (State Gov't led, with USDA)- US
- Indiginous community-driven planning Alaska, Minnesota

Analysis:

• Al After Action Review (with USDA)- US

Just in time:

- Ebola response (State Govt-led on own), Texas, US
- Chronic Wasting Disease coordination and collaboration (State-led, with USDA) US

Applied at Different Levels of Government

Intergovernmental

• Climate change- related emergency planning (with USDA, Arctic Council-led)- Circumpolar countries, Alaska

National

- AMR National Action Planning (Govt-led with FAO) Cambodia, Laos
- National One Health Implementation Planning (Govt-led with P&R, FAO) Ethiopia, Uzbekistan
- Prioritized Zoonotic Disease planning (with USDA, CDC- ZDPT)- Pakistan, US
- National Zoonotic Disease Workforce Planning (OHW: OHCEA-led, P&R, FAO) Rwanda, Uganda, Senegal, Cameroon, Tanzania, Ethiopia
- Select agent planning (Govt-led, with DTRA, USDA)- Turkey
- Climate change disease risk (USDA-led) US
- Rabies National Action Plan development (INDOHUN-led on own) Indonesia, Finland

Sub-National

- Petting zoo zoonotic disease risk (State gov't led, with USDA)-US
- Operationalizing OH at provincial level (INDOHUN-led) Indonesia
- Food-borne illness rapid response planning (State Gov't led, with USDA)- US
- Al After Action Review at state and county level (with USDA)- US
- Ebola response (State Govt-led on own), Texas, US
- Chronic Wasting Disease coordination and collaboration (State-led, with USDA) US

Community

- University of Alaska Student Community engagement projects
- Tribal Food Sovereignty Action Planning

An example of Links and Synergies between One Health Tools

Conceptual model shows how tools and their outputs link together

Proposes sequence for use

Each tool informs and strengthens use of other tools



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For more information:

Dr. Katey Pelican University of Minnesota Head, EcoHealth Division pelicank@umn.edu Phone: 612-625-8561 Dr. Tracey Dutcher USDA-APHIS <u>tracey.v.dutcher@usda.gov</u> Phone: 970-217-2680