



# Skagit County Board of Health Population Health Trust

*Kenneth A. Dahlstedt, Chair*

*Lisa Janicki, Commissioner*

*Ron Wesen, Commissioner*

*"Always working for a safer and  
healthier Skagit County"*

PHT Minutes

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**Date / time** 2/5/2015 9:00 to 12:00 AM

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**Present:** David Jefferson, Jennifer Johnson, Lisa Janicki, Ron Wesen, Tim, Holloran, Bev Keyes, Bill Henkel, Brian Burch, Carol Hawk, Charlie Wend, Connie Davis, Debra Lancaster, Diane Smith, Duncan West, Jenna Strand, Jennifer Sass-Walton, John Miller, Kari Ranten, Katie Stanford, Liz McNett-Crowl, Margaret Rojas, Mark Raaka, Randy Elde, Stephanie Morgareidge, Terry Belcoe, Tina Willett, Corinne Story, Howard Leibrand, Sandi Paciotti, Rebecca Clark, Bob Hicks

Regrets: Andrea Doll, Jim Barnhart, Vince Oliver

1. Commissioner Welcome

Ron Wesen: Thank you's/very supportive/ community needs Health Support

Lisa Janicki: Powerful/productive group, great start, continuing steps from Terry's original group "One Community, One Voice."

2. Review Agenda

3. Clarify Goals of PHT

**Margaret Rojas:** Any reps from the Regional Board?

4. Membership Introductions, service area knowledge

**Jennifer Johnson:** Public Health and Community Services is excited about the planning work from a Public Health and Behavioral Health perspective. The Health landscape is changing rapidly, and locally public health will shift from direct health services to assessment, outreach, education and training. Prevention is the foundation of Population Health, which is underfunded, so having a community plan will help leverage local resources. Specific to my domain of work, PHT will provide a community wide health plan that Public Health can align goals and strategies with to achieve desired health outcomes.

**Howard Leibrand:** Between the various entities that I work through and with i.e PHCS, SVH, Upper Skagit etc., I see a lot of people that will benefit from the people and organizations we (PHT) work with. It's magical that all of the sudden we have the help.

**Debra Lancaster:** The landscapes changing, because we're changing it. Helping our community with positive health, finding out how we can align sickness and healthcare, and how we can integrate PHT in.

**Bev Keyes:** This conversation of goals brings to mind that we put the employees in the community to educate via SVC. We are able to have the undivided attention to educate medical students.

**Liz McNett-Crowl:** This brings much more energy to the cause. But we have not made great gains in the US. Outreach is the arm of Skagit Valley Hospital, and we have made an impact in Skagit County via trails, exercise, but we need to work farther upstream. Our working together with the Board of Health will make changes possible.

**Bill Henkel:** We can equip, but if the community is not ready, they'll come back and repeat. How can we be hopeful at a community level? This kind of work will make a difference in the social determinants of health.

**Carol Hawk:** At United General, we have seen a lot of transitions. Our Community Health Outreach programs are grant funded and therefore, we had to show the need, capacity, change. It's nice to see everyone come together under one plan, looking at improving health for the community through resources. I'm impressed with David's hard work.

**Randy Elde:** The heartbreak I've had over the years has been for patients not being able to pay for their medications. Part of the health communities program, as a pharmacist/diabetic educator, I would really like to see meds and education pushed i.e nutrition and increased physical activity.

**Connie Davis:** Being in Health Care, you think you're the solution, but the community is the solution. The Skagit Regional Health has hired 2 new psychiatrists. I would like to see the dental and homeless needs met. Once we start looking, what do we need to do?

**Tina Willett:** This committee will enrich our collaboration with our affiliates. My organization works closely with Public Health and Community Services for immunization, as well as MINNS for education.

**Brian Burch:** This exciting work which aligns with the work that Group Health has done to improve health care. Also, as health care providers, PHT dovetails with group Health's mission and work we started 5 years ago. Our mission to close the care gaps, as well as shared reports with partners to highlight those care gaps.

**Terry Belcoe:** We would like to do our part in building a stronger community via financial stability. We had addressed this in the past like "Wouldn't it be cool if we got a big table..." Now, here we are.

**Tim Holloran:** I am impressed with the caliber in this room. We've been talking for a long time and we're ready to put it to work. Measles, Ebola, we don't know what's coming. In regards to holistic health care, we need to start at the root of the problem.

**Lisa Janicki:** I have passion behind this. My background is in the private sector (Economic Development Association of Skagit County, Janicki Industries) and vying for community health through small businesses and financial stability, in turn, creates life stability.

**Ron Wesen:** Background in Dairy Farming/agriculture and all that stems from that.

**David Jefferson:** I have worked with counties to streamline health care processes, but rarely to the final outcome because the projects are short lived. This is the chance to bring a variety of skills and interests to the table. YOU drive the passion.

**Katie Stanford:** Advocate for Developmental Disabilities/Mental Health.

**Duncan West:** My family and I treasure Skagit County. Appreciate the committing of the 3 Public Hospitals for better care. We want to work in the upstream, but want to see that the core is taken care of. Skagit Valley Hospital represents the hub of medical care.

**Charlie Wend:** We have populations that are high utilizers of community care. There is a tremendous gap that needs coordinated planning for transition.

**Corinne Story:** Environmental Health is the arm of Public Health. We handle all outside influences that affect public health. Our mantra is that the cheapest Healthcare is not getting sick in the first place. 90% of what we do is education. When you teach people why and what to do, you see the light come on. We would like to see education from the beginning, starting with nutrition. Poverty interaction is a big factor within our scope of work.

**Jenna Strand:** Representative of the Samish Tribal Council Member with an understanding of legal and compliance issues.

**Diane Smith:** WSU Extension provides nutrition education. Partnering with others is a big way to align our efforts. A vital sign for the community is nutritious goods, which are what our entity would like to focus on.

**Sandi Paciotti:** Thank you for coming together for a completed plan. We want a collaborative community for education.

**Jennifer Sass-Walton:** Appreciates the community togetherness and promotes education.

**Margaret Rojas:** Upcoming changes include bringing on chemical dependency in 2016, boarding at the hospital, and children's programs. We can work together in many ways because Behavioral Health/Mental Health impact Skagit County in a big way.

**John Miller:** We look forward to developing a county plan. We currently only have about 400 patients, and would like to see more. We will do our best to work with this group to do so.

**Mark Raaka:** Our goals are to help design the best EMS response, but more importantly reduce the number of calls to 911 in the first place. We've become really good at response, but prevention has lacked. Our goal is to collect data, and do our part in prevention. We work in a unique setting, actually going into people's homes. We want to have good care when needed, but not be needed as much.

**Stephanie Morgareidge:** I see within our resource center, the need for outside resources for the concrete community. Strengthening the community is a huge importance, because of a rough economic climate.

**Kari Ranten:** Skagit Regional Health is behind this project 110%. We would like to "row" in the same direction, it's the ultimate in teamwork. Equally important is balance, and in turn, trust.

**John Miller:** John Stephens sends his regards, is unable to attend. Swinomish Tribal Community is thankful for the invite and we look forward to participating.

**Bob Hicks:** I will be gathering data for usage with the cause.

**Rebecca Clark:** Works with Behavioral Health/Developmental Disabilities and Senior Nutrition, and considers this (PHT) will be an integral part of her work.

5. Break

6. Logistics

- a. Do we have the team, or is somebody missing?

**Tim Holloran:** What about the School Districts? How can we bring young people to the table? As well as, a VA representative, we should reach out to the VA clinic.

**Sandi Paciotti:** What about the Latino Community? We should reach out to Sea Mar.

**Margaret Rojas:** Also, Early Learning/Headstart.

**Sandi Paciotti:** Dental? The need is there.

**Duncan West:** We should have some city representation also

**David Jefferson:** We are going to put together a subcommittee that can consider other areas such as medical /dental needs, and how can we weave the subsectors i.e. Geographic's, medications. We can seek a wide view and then decide.

- b. How will this impact your service sector? (logistics/Demographics of members)

Membership agrees on receiving and reviewing updated information electronically.

Membership agrees on 3 pieces for website: Pictures, Services Sector, and email address.

- c. Video: [A Holistic Approach to Community Development in Minneapolis-St. Paul](#)

7. Develop Vision and Values Statement (groups of 4-5)

- a. Vision for the effort

Ideas:

**Debra Lancaster group:** "Skagit County is where healthy living happens."

**Sandi Paciotti group:** "Skagit County, making wellness infectious.

"Skagit County, a place to work well, play well, live well."

"Skagit County, Healthy people in Healthy Communities."

**Kari Ranten group:** "Skagit County, transforming lives for a healthy community."

**Liz McNett-Crowl group:** "Skagit County, a leader in growing healthy communities."

"Skagit County, a leader in growing a healthy community."

**Brian Burch group:** "Skagit County, Skagit Cares."

"Skagit County, a healthy community together."

"Skagit County, a healthy community transforming lives."

**Corinne Story group:** "Skagit County, community commitment to healthy families."

"Skagit County, building a healthy community of Skagit together."

- b. Values Ideas:

**Charlie Wend group:** Working together-community partnership

Diversity, respect/trust, participation/inclusivity

**Carol Hawk group:** strategic, diverse relationships, informed, committed, inclusive, action-oriented, fun, uplifting

**Brian Burch group:** foster patient engagement, focus on outcomes, and coordinate access to care

**Kari Ranten Group:** engaging diversity, committed to relation, inclusion, equally seeking

**Sandi Paciotti group:** Inclusive, equitable access, innovative upstream, creating opportunities through synergistic relationships

**Debra Lancaster group:** trust, experience ethics, respect other perspectives, commitment, willingness, flexibility

**“If you think you could’ve done it on your own, why didn’t you”**

David Jefferson committed to compile the lists and email members for a vote on Vision and Values for PHT.

**Lisa Janicki:** ground rules should be established, as well as a commitment to each other and the community.

David Jefferson committed to sending a 3-4 question survey to members for process input.

A steering committee will be established, participants are as follows:

David Jefferson, Jennifer Johnson, Kari Ranten, Bill Henkel, Mark Raaka, Carol Hawk, Bev Keyes, Debra Lancaster, Connie Davis, Lisa Janicki

Meeting days agreed on are 3<sup>rd</sup> Wednesday of the month.

The first meeting will commence on Wednesday February 18<sup>th</sup>, 2015 from 1:00-2:30 pm.

8. Name the Effort

- “Name” options will be submitted electronically
- Prize for selected name!

9. Closing Remarks

- Next meeting at NWCT on Thursday March, 5, 2015
- Will determine Proxy or No Proxy at next meeting
- A process survey will come via email for feedback

a. Closing comments

**Margaret Rojas:** Good job.

**Randy Elde:** It’s important to remember that change takes time, don’t get discouraged.

**Howard Leibrand:** This group has more potential for impact than any I’ve seen in 26 years.

**Kari Ranten:** It will be important to share with our contacts, and encourage them to join the listserve.

**Terry Belcoe:** How visible/transparent do we want this to be? How do we make people aware? Or monitor the progress?

**Liz McNett-Crowl:** The Department of Health kept asking do we have the right table. This is upstream, exactly what we needed to do. What we’ve been working towards for years.

**Debra Lancaster:** We should be asking people to join in on the “name” project, involve the community.

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