



Skagit County Board of Health Population Health Trust

Lisa Janicki, Chair

Kenneth Dahlstedt, Commissioner

Ron Wesen, Commissioner

PHT Steering “Special Planning” Committee Meeting

Thursday August 4th, 2015 9:00 to 12:00 pm

EDASC Building

Members: David Jefferson, Bill Henkel, Liz McNett Crowl, Carol Hawk, Debra Lancaster, Connie Davis, Kristen Ekstran and Kevin Murphy (Staff Mel Pedrosa)

Send Regrets: Mark Raaka, Andrea Doll, Kari Ranten, Jennifer Johnson

- **Meeting commenced at 9:15am**
- **Introductions:** All members did Introductions. Kristen Ekstran was introduced as the new Community Health Planner for Skagit County
- Members reviewed the agenda items, and Connie Davis suggested adding an agenda item on how to get David Jefferson on the ACH Board
- **Plan Review:** David reviewed the original Population Health Trust plan with all members that included:
 - Why the group got together originally
 - Other community health models that were used as guidance
 - A review of the RWJ data Indicators and their “Working Together” model
 - A review of the National Association of County & Cities Health Organization models, and how we use those in our planning
 - We reviewed and original assessment where we asked members what was important, and people indicated:
 - ✓ Improved practices
 - ✓ Identifying goals
 - ✓ Inventorying resources

- We reviewed the original goals of the PHT, which were:
 - ❖ Evaluate Skagit County Community Health and write an Improvement plan
 - ❖ Regularly report findings to the Board of Health
 - ❖ Identify Action items that will elevate the health of our neighbors and community members
 - Members emphasized the goal of PHT was to find strategies to improve health for all people in Skagit County
- We talked about the accomplishments in 2015 and our pending items, which includes setting goals and actions steps for 2016
- We reviewed our original commitment to Collective Impact and the different models of collaborating. Members were open to the idea of reviewing our level of collaboration, in lieu of our desire to collaborate with each other at a Collective Impact level or a Strategic Alliance level. This will be discussed further at upcoming PHT meetings in the next few months
- Members were asked to discuss what they think so far of the model we started out with and their thoughts about Collective Impact
- Members discussed the original plan of doing an assessment, identifying priorities, and developing strategic maps. Concern was shared that we may not have paid enough attention to the vision and mission of the Trust, which was to focus on improving health for everyone
- People discussed the natural tension that that exist between developing strategy maps, which requires an amount of effort by Trust members and community partners, as well as a focus on global goals and global outcomes that have an impact on a larger portion of the population
- People identified there's a natural tension between a global perspective and a micro perspective, which requires attention to both

directions. There's a delicate balance and we want to assure all parts get ample consideration

- The group took time to review where we are today which includes:
 - ✓ Transitioning to planning
 - ✓ Started an Opioid Strategic Planning workgroup
 - ✓ We have other strategic Priorities pending
 - ✓ Need to review and decide on a framework for the PHT in the years to come
- David reviewed our current priority items which can be seen as potentially 5 different focus areas. He then showed the group how this could be seen as 3 focus areas, in addition to having the opioid workgroup, those areas are:
 - ❖ Promote Healthy Active Living (youth & adults)
 - ❖ Enhance Child & Family Well-being
 - ❖ Ensure Access to Essential Health Care

- **Introduction and Discussion of the Robert Wood Johnson Culture of Health action Framework (Online document)**

Members were introduced to the Action Framework that includes 4 sections (see handouts):

- ❖ Making Health a Shared value
 - ❖ Fostering Cross-sector Collaboration to Improve Well-being
 - ❖ Creating Healthier, more Equitable Communities
 - ❖ Strengthening Integration of Health Services and Systems
- Members had a robust discussion about the 4 action areas and how these encompass the global work that the PHT can possibly do. People were excited and interested in this model, and it was unanimous that this should be a model that we should introduce to the PHT and encourage the members to use as a framework going forward with our work.
 - David presented a slide and several worksheets to the group to illustrate how our current indicator and priority areas map or link to the four importance areas of the new model. Members could see how

our indicators could fit into this larger picture, but were slightly concerned that this level of complexity would be difficult for the PHT membership to understand all at once.

- **Discussion**

Several questions were posed to the group about using this framework

1) Does the framework provide clear guidance for our planning?

- Members indicated that it provided good guidance, but clarity may take some time because it will be important for our community to see how we play a role in impacting these areas
- Members thought the global perspective of “Making health a shared value” would offer ample opportunities for members to communicate a shared vision about health and to message health concerns to the greater community

2) Can you see how our work could sync with this model?

- Most members thought our current work and the new framework matched up well. The group noted that it could take some time for people to understand how these items sync. It was also noted that visuals and clear messaging will be very important for people to understand how items are related to each other

3) What part of this framework seems most useful?

- Everyone on the Trust would have a role to play and that it would help to provide a strong working blueprint on how we carry our work forward. People indicated that it was “inspiring” and “motivational” and would help all of us get back to the original mission of the PHT
- Were there concerns?
 - People noted that the complexity may be a concern to people. Members thought the model may not be action-oriented enough for everyone, and we need to make sure that all members have a valuable role to play on the committee

4) *Do you think the Trust will understand this model?*

- People believed that if the model was explained simply that people would be able to understand it. They also noted that it would have to be visited many times for members to internalize the meaning and value

- **Discussion of Strategic Mapping**

We discussed the traditional strategic mapping steps, which includes a multistep process:

- ✓ Forming a workgroup
- ✓ Mapping resources
- ✓ Exploring gaps and opportunities
- ✓ Reviewing best and evidenced practices
- ✓ Identifying goals, action steps, and outcomes
- ✓ Mapping practices to goals and write plan
- ✓ Communicating widely every step of the way

Members noted that the strategic mapping is an important part of what PHT does, but we need to strike a balance between doing the micro work and the macro work

- **Discussion of Strategic Mapping and RWJ Framework**

Members discussed if the group likes this framework and if it should be introduced to the trust. Members unanimously stated they believe the model would be very effective for PHT, and we should proceed with introducing the model at the next PHT meeting on September 1

- **Suggestions to increase Trust uptake and participation**

- ✓ Members suggested that we include 3 of the Robert Wood Johnson pages from the Framework:

1. What is the model
 2. What is the purpose
 3. What are the 4 areas and the drivers
- It was noted that we need a good explanation of the purpose of the framework and be very clear on why the PHT would use a framework like this
 - Be prepared to explore roles PHT members play in this new framework
 - People suggested several visuals would be very helpful.
 - It was suggested that we refine this presentation on at the upcoming Steering Committee meeting on August 22
 - One suggested model of presenting would be to have all Steering Committee members present this framework to the larger membership in order to carry the message of what this means and how it would work for the PHT
- **Final Items**
 - ✓ David will prepare planning documents for the next Steering meeting that include a Skagit County adaptation of the RWJ Framework
 - ✓ Connie Davis will talk with Lee Che Leon from the North Sound Accountable Community of Health and process to get a seat on the board for the Trust lead (David Jefferson)
 - ✓ Steering Committee Meeting on August 22, 2016 located at Commissioner's Building
 - ✓ PHT Membership Meeting on September 1, 2016 located at Skagit EMS