

PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

JUNE 16, 2014 WEB SESSION

PARTICIPANTS

<i>Co-Chairs</i>	John Wiesman (DOH); Regina Delahunt (Whatcom)
<i>Staff</i>	Karen Jensen, Simana Dimitrova, Jane Lee, Marie Flake (DOH)
<i>Members Present</i>	Torney Smith (Spokane); Lydia Buchheit, Michael Baker (WSALPHO); Jan Olmstead (AIHC); Allene Mares, Dennis Worsham, Maryanne Guichard (DOH)
<i>Others Present</i>	Gary Goldbaum (Snohomish); Astrid Newell (Whatcom); Bruce Gray (NWRPCA); Sue Grinnell, Megan Davis, Pam Lovinger, Cyndy Cole (DOH)

MEETING NOTES

WELCOME

John Wiesman and Regina Delahunt, Co-Chairs

John and Regina welcomed members to the second Partnership meeting for 2014. After brief introductions by all, John kicked off the meeting by reviewing the agenda.

WORK SESSIONS

State Health Improvement Plan (SHIP)

Torney Smith and Jane Lee, Workgroup Co-Chairs

Torney shared that WSALPHO's reception of the State Health Improvement Plan (SHIP) scope was positive. Torney reminded the Partnership that the purpose of the SHIP is to support other work already in progress (not new work) and, as agreed upon during the last Partnership meeting, the focus will be on three priority areas statewide that our public health system can commit to and make measureable difference in the near future. The three focus areas are:

1. Invest in the health and well-being of our youngest children and families
2. Support development of healthy neighborhoods and communities
3. Broaden health care to promote health outside the medical system

Torney added that the SHIP workgroup is working on defining domains under each focus area and these domains will be shared with the Partnership soon.

Discussion:

Regina posed a question to the Partnership: Are the proposed priority areas the right level for the purpose of State Health Improvement Plan? Are they too broad? Torney responded that the desire is under each focus area to keep numerous opportunities in order to engage communities no matter how involved they are already in similar efforts. The SHIP workgroup is also in the process of adopting specific measures linking them to existing efforts already aligned with SHIP's focus areas.

Secretary Wiesman reiterated that his hope is to see out of this work 2 to 3 very specific things we, as a system, can work on, i.e., healthy weight. He clarified that the goal is to come up with specific measures and a menu of interventions jurisdictions and communities can pick from to address each priority area. Torney suggested that the SHIP should be a multi-purpose document outlining measures for public health improvement as well as community strategies. While public health is critical, a broader community engagement is needed.

Torney invited Partnership members who are not on the SHIP workgroup already to join if interested.

Public Health – Health Care Delivery System Partnership

Gary Goldbaum and Bruce Gray, Workgroup Co-Chairs

Sue Grinnell, DOH Lead

Dr. Goldbaum discussed the ‘slippery’ nature of dealing with health care transformation due to the fast pace changes and various moving parts. He reminded the Partnership that by July 2014, the workgroup will:

- Recommend community health and health care delivery improvement strategies that build healthy communities
- Advise EMAC—the guiding governing body for the State Health Care Innovation Plan—on opportunities to shape and align policies and actions that foster and support healthy communities
- Propose a companion guide to the *Public-Private Action Strategy* developed for the State Health Care Innovation Plan

Dr. Goldbaum reviewed all enhancement recommendations to the seven State Health Care Innovation Plan building blocks developed by the Public Health – Health Care Delivery System Partnership. He acknowledged the tremendous amount of work done by Sue Grinnell and Kat Latet, DOH and HCA leads, summarizing multitude of very disparate views and opinions into one cohesive whole from which the Prevention Framework was developed. Dr. Goldbaum also showcased the objectives and strategies developed by this group.

Foundational Public Health Services

Marie Flake, DOH (for Barry Kling and Jennifer Tebaldi, Workgroup Co-Chairs)

Marie walked the Partnership through the Foundational Public Health Services cost estimate, current spending estimate and estimated gap by program chart. Suggestion was made by the Partnership to adjust language in some areas for clarity. Marie shared that there is additional technical analysis in progress to cost more services out such as services provided by tribes and on-site septic systems. The Technical Workgroup is also surveying local health agencies about shared services anticipating possible question from the Policy Workgroup. Bruce Gray was interested if Adverse Childhood Experiences and trauma informed services would be considered for costing out. Marie responded that the Technical Workgroup needs to define these services first in order to do so.

John Wiesman provided an update on the Policy Workgroup efforts. He reminded that the goal of this work is to propose governance and financing solutions that ensure appropriate funding for Foundational Public Health Services statewide. To do so, the workgroup consisting of elective officials and leaders of state associations with vested interest is taking a look at the gap identified from the technical work, to identify not only how to fund the gap, but also if we have the correct

structures in place, how state and local funds can be shared more effectively and who has funding responsibility for what. These are all policy level decisions that must ring true outside of public health before they are elevated to legislative level. The work of the Policy Workgroup is slated to end by December 2014. Possibly by that time, enough will be accomplished that the legislature can address some of these asks during its next session. We must figure out and be very clear about it - is it just dollars that we need or system changes as well? We must seek opportunities for the long-term future.

UPDATES

- **2013 Public Health Activities and Services Inventory**
 - Jane Lee, on behalf of Barry Kling, gave a brief update on the 2013 Public Health Activities and Services Inventory process. She thanked everyone for participating in this year's inventory data collection, did encourage the Partnership to continue to communicate about and market the activities and services data and also spoke of upcoming changes to the annual inventory to address additional data needs in order to measure performance on Foundational Public Health Services (coming in 2015).
- **Foundational Performance Set**
 - Torney Smith talked about the completed first draft set of specific measures corresponding to items in the Foundational Public Health Services list. The group working on the draft set is proposing to test this set of Foundational measures in a few pilot local health agencies later in 2014.
- **Performance and Accountability**
 - Karen Jensen talked about status of the Performance and Accountability Workgroup that was proposed under the PHIP in 2013. A formal workgroup has not been fully established yet, given changes at the Department of Health and the work on the State Health Improvement Plan as a priority focus area for 2014. The goal is to bring an update and proposal back to the Partnership at the next meeting.
- **From the Partnership Co-Chairs**
 - Regina Delahunt gave a brief recap of Whatcom County Health Department's experience during the Public Health Accreditation Board (PHAB) visit in early June. The PHAB review approach was programmatic. She also mentioned that this spring, the National Association of County and City Health Officials (NACCHO) has recognized Whatcom County Health Department as 'The Mid-Size LHM of the Year' for their impact in the community.
 - Secretary Wiesman spoke briefly about the update to the [Department of Health's Strategic Plan](#)

NEXT STEPS

Next meeting will be held in person on September June 15th, from 1:30 to 4:30 pm at the DOH offices in Kent.