

DRAFT Meeting Notes

Public Health Advisory Council of Snohomish County

Sept. 26, 2018 | 7:45-9:15 a.m. | Snohomish Health District | Conf. Room 309
3020 Rucker Ave., Everett, WA 98201

Members present:

Jason Biermann, Snoh. County DEM
Jenna Bowman, Tulalip Health System
Jiho Bryson, The Everett Clinic
Amy Beth Cook, Lake Stevens School District
Lisa George, PRMCE
Brent Hackney, Brent Hackney Designs
Martha Peppones, Homage Senior Services
Mark Richardson, Snoh. Regional Drug & Gang Task Force
Sid Roberts, The Roberts Group (Chair)
Tové Skaftun, Community Health Centers
Jim Welsh, ChildStrive

Staff Present:

Jeff Ketchel
Heather Thomas
Nicole Thomsen
Carrie McLachlan
Linda Carl

Members not present: Jeff Clarke, Alderwood Water and Wastewater District; Tony Mace, Paine Field Fire Dept.; Korey MacKenzie, Diamond Knot Alehouse (Vice Chair); Kevin O'Brien, Lakes Stevens Fire Dept.

Guest: Lt. Robert Goetz, Snohomish Regional Drug Task Force

Recording Secretary: Linda Carl, Executive Assistant

The meeting was called to order at 7:48 a.m.

Mark Richardson introduced Robert Goetz who is also a member of the Snohomish Regional Drug Task Force. Lt. Richardson is stepping off the PHAC after eight years; he recommends Lt. Goetz as his replacement as the law enforcement sector representative. Staff will request the Board Chair to appoint Lt. Goetz and for the Board to confirm the appointment at their October meeting.

Approval of meeting notes

It was moved by Sid Roberts and seconded by Jim Welsh to approve the minutes from the July 25, 2018 meeting. The motion passed unanimously.

Governance

The discussion began with Chair Roberts posing the question, "What's our 'book of business'?" He followed that by asking what value the PHAC brings and what are its core values.

Nicole Thomsen reviewed member survey results from March 2017 and May 2018. The general consensus from these surveys is a lack of clarity of direction and our "value-add." She reviewed the agency comparison chart, including the purpose and work plans of comparable committees in counties in Washington, Oregon, and one in New Hampshire. She noted that some are advisory boards, some advocate in their communities and with their legislature, and some may have deliverables or are engaged in the budget process. She has a meeting scheduled with Island County next week and phones calls with several others. She will continue to gather information and will bring it to a future meeting.

Ms. Thomsen suggested we move forward on a charter and bylaws, as well as continue discussion on the purpose, how often to meet, etc.

Mr. Richardson said that in the past, the PHAC was used as a tool for the health officer and provided input on the CHA, CHIP, budget, etc. The health officer's agenda became the PHAC's agenda. The PHAC's purpose was both active and proactive.

Ms. Skaftun added that the health officer brought pressing issues to the PHAC, but it often felt like a "hodge podge."

Ms. Cook asked what's needed of the PHAC and if we're an advisory council to staff or the Board.

Mr. Biermann asked what's allowed of the PHAC. Previously there was interaction with the health officer but not so much the Board. Can we chart our own course?

Mr. Welsh noted that Snohomish County is "collaborative in clusters," and that organizations work in isolation. He added that the PHAC has a different feel without Dr. Goldbaum. He asked what links there are in the community; should we have a proactive agenda across systems that could impact the community? How can we support other initiatives, organizations, and agencies? If we identify a problem, we can help set the agenda.

Mr. Hackney said the Dr. Goldbaum used to get questions from the Board and looked to the PHAC for answers representative of the community. Mr. Hackney would like to see the PHAC's scope narrowed down again to the issues the Board (or staff) have questions about. He prefers that the PHAC provide answers as opposed to discussing broad issues and not feeling accomplished.

Mr. Ketchel said the District hired a strategic planning consultant to help facilitate the five-year plan. The consultant will also help plan the 2019 PHAC/Board retreat. Mr. Ketchel would like to move forward with the PHAC strategic plan; he committed to using the PHAC members' areas of expertise more frequently.

Mr. Goetz stated that establishing a mission and vision will help the PHAC see where it's going as a team and how to get there. Having a mission/vision is key to moving forward. The purpose currently feels circular, and he wonders where the Board, the Administrator, and staff loop in. The PHAC has a great opportunity to provide input to the Board, which would move us away from a "rubber stamp" process.

Mr. Ketchel noted that the Board is diverse politically. It's helpful when they hear from others in the community, not just staff. Ms. Thomsen added that the PHAC has the opportunity to advocate to the Board about what it would like to be.

Ms. George concurred that the PHAC has to develop a mission. It doesn't have to be singular; it can be multi-faceted. What is our role, and do we reflect values of the community? Community expertise provides "cover" for the Board and for staff. The PHAC needs a voice in decision-making.

Ms. Peppones stated that being on the PHAC is a two-way street: she brings information back to her network and to the community. She reminded everyone not to forget older adults, and that the population of older adults in the county will double in 20 years.

In response to a question about the makeup of the Board, Mr. Ketchel explained that our Board of Health is the largest in the state with 15 members. All five County councilmembers sit on the Board. The other 10 seats are held by electeds (mayors and councilmembers) of local cities within the five County council districts. There have been discussions amongst the Board members regarding the size of the Board, and it will be a topic in the strategic planning process. A joint PHAC/Board retreat is tentatively scheduled for January.

Ms. Thomsen allowed that it's difficult to talk about governance when the PHAC meets only every other month. Therefore, she, Chair Roberts, and Vice Chair MacKenzie have agreed to meet more often. All PHAC members are welcome to attend as well. Mr. Welsh and Ms. George expressed interest in attending. Ms. Thomsen will develop a draft charter and/or by-laws and will bring it to the November meeting.

Briefing & Updates

Community Health Assessment (CHA)

Carrie McLachlan updated the PHAC on the 2018 CHA. She noted that the county is doing well in maternal-child health, youth substance use, youth health, adult health, and mortality. Indicators prioritized for phase three (qualitative work) are: youth mental health, adult suicide, children's dental health, opioid misuse, primary care provider, vacancy/homelessness, American Indian/Native American disparities, and youth obesity. Phase three will include a "data walk" around the county: a larger event in Everett and two smaller events in East and South County. The timeframe is late October or early November and will seek community input on priority issues. Ms. McLachlan will send invitations to the PHAC for the data walks and training sessions. The CHA task force would also like any feedback from the PHAC.

Announcements

Opioid Resource Guide

The District developed a guide in collaboration with the County, the Sheriff's Office, and the MAC. It's available in a hard copy version as well as an electronic version on the overdose prevention website (<http://snohomishoverdoseprevention.com/>).

Strategic Planning

Mr. Ketchel is finalizing the agreement with the consultant and will send the consultant's proposal to the PHAC for their information. The grant we received from the Kresge Foundation for Mr. Ketchel's and Ms. Thomsen's participate will help pay for the consultant's contract.

Foundational Public Health Services

Mr. Ketchel stated that the state's public health agencies lack a sustainable funding source. We received money from the legislature through the middle of 2019 (\$12M statewide). This biennium, public health has a gap of \$296M in communicable disease, assessment, and environmental health non-fee services. The legislative "ask" will likely be around \$100M. March 6 is Legislative Day, and everyone is welcome to join staff and Board members in Olympia to talk to our legislators. Mr. Ketchel requests that PHAC members consider including foundational public health services in their agency budgets. Staff will bring forward a resolution to the Board in October that calls on the legislature to support FPHS with sustainable funding.

NovusAgenda

Ms. Thomsen showed the electronic version of today's agenda in NovusAgenda. A link will be emailed to PHAC members to connect in NovusAgenda and set their passwords. Future agendas and packets will be available to the PHAC as well as to the public on the District's website. The goal is to reduce paper copies at the meetings, except for those attachments that may be odd-sized or hard to read in an electronic version.

Networking time

The District's doors will be open at 7:30 a.m. prior to each PHAC meeting to allow for networking.

Adjournment

The meeting adjourned at 9:15 a.m.