

Health Share of Oregon
Public Meeting Transcription
DECEMBER 12, 2018

Speaker: I think we are going to go ahead, get started, and just honor peoples' times if that's okay with folks. So grab food and coffee. So that hello. I am Michael Anderson-Nathe. I know all of you know we have a guest with us. Helps support the council so this is our December quarterly public meeting and as you know we have been working over the last year to restructure our council to be a bit more accessible and we're going to try things out a little differently so a note about set up for folks.

We're trying to expand the table and invite community members to join us at the table and increase the engagement that we have with our that community and so while we still have a very specific public comment time which is more for the formality we're asking and inviting and trying out having community members come to speak for part of meeting to sit at the table with us have food with us engage in the presentations and conversations so there's a little less distance and more welcoming.

So this is the first time doing that. One of the things we're working on over the next year is finding ways to increase community attendance hoping to create a more open accessible environment will encourage that and folks want to come engage with us so hopefully over time we'll see more attendance. So if we -- if you have any suggestions, ways we can change our practice, let us know.

Okay. So in terms of the meeting the first hour is open to the public and what we're doing is going through some things from health share I will give a brief update what's going on generally and dive into talking about our altogether event we held yesterday give you an update. And then also showcasing the new website that health share launched and Erin and

Marie are going to work with us on our chip so we're working hard and developing our community health improvement project and I think want to lead us through some values, exercises, and to get some community input from you and anyone else who is here and then we will have public comment if anyone want to give a formal comment and then move into a working closed session of the meeting. Sound good?

So since we have a guest we'll go around the room and say who you are and your connection to the council.

I'm Michael Anderson-Nathe. I have been with the council a little over four years and part of the council since then.

Speaker: Maria health equity status part of the engagement team and I support my colleague and supporting the council through my work.

Speaker: I'm Erin jolly. I work at Washington county public health. She her, hers.

Speaker: Maria Tafolla. Community program editor on the advisory council. She her and her.

Speaker: Phillip mason he his. I am representing Clackamas county.

Speaker: Natasha.

Speaker: West Livaudais. He him his. Pronouns i use and I work at Oregon health -- Oregon of disability.

Speaker: LaKeesha Dumas. Mental health action services.

Speaker: community member and Northwest by Northeast clinic.

Speaker: I cover health care and I have been covering health care.

Speaker: community manager at health share.

Michael: thank you. So does the agenda sound good? Any one of want to change, add anything?

Feel free to let us know. I will move us into the next session updates what's going on with health share and our new website. So as you all know health share is still in transition between our executive lead pleated. Jan Meyer left and our chief medical officer is serving and doing a great job leading while we're in transition. The board is still having active conversations around qualifications and what kind of CEO we need to take health share to the next level especially with 2.0 coming up so we're waiting to see what 2.0 brings.

I will say the board has expressed interest in getting feedback and input from staff at health share and the council and so we should kind of put this on one of our agendas at some meeting to talk about what we think health share needs in terms of next CEO and make sure that gets to the board. And we're going to do a search and gather input from staff and the council and the council helps to get feedback from the community around that process as well. So that's the update there.

Is the other big update around what's going on. We have been focused on the altogether event which we held yesterday so we're literally hours from making it happen and that's what Stephanie is going to talk about and several of you were there to feel free to give your impressions. Turn it over to you.

Stephanie: my car is still packed full of boxes. So I'm going to pass these

around if you want to take one and if you were there and already have a packet you don't have to but altogether that happened yesterday. Over all it is a pretty awesome day. I think it was really packed full of good information probably more than we needed to be. Over all theme was obviously altogether. Just referencing our partnership with our founding partnerships we work with on our various initiatives.

Our representation of the event was our poster session. We had 16 posters representing various initiatives that health share partners work on as well as staff. So it is kind of like a flavor a taste of what the day was all about and how much work we are doing with our partners in the community. I think over all the posters were -- it was a great session probably a little too much information I know because I have presenting one of the posters and talking to two hours straight isn't fun but otherwise the panels were really engaging.

The breakouts, I heard positive feedback but it would be interested to here from the folks that were there what you guys thought. And how it went and if there was any feedback you had. I know west was there and Erin.

Too much? Too little?

Speaker: I really liked the format of the information sharing and sharing a lot of really cool projects. Probably it was -- it was a lot. The posters by number 7 or something -- yeah. But all really interesting and good breakout sessions. I really enjoyed it.

Speaker: I enjoyed the panel. The first one I thought was interesting how we had the audience and when it comes to this and maybe for the moderator to make sure to infusion that in all of the panels. And the poster session I didn't participate in them. I was a networking. I got to meet a lot of people I didn't know and I felt like there wasn't a lot of time to network

with folks in the room and so I used that time to really network and met health share staff I didn't know worked for health share. I thought that was a great opportunity.

But I think for other folks, you did have the same information in your books that some people didn't realize what was in the books were also on the posters, too but I did like the different ways to review the information. Yeah.

Speaker: my experience was a day and expecting fire hose effect there was so much information. I also liked the posters the way they were set up. The format. Networking was a priority for people and perspectives in the room. So yeah. I think I ended up doing that during the last break on it sessions and the panels were really rich.

So it is a lot of output getting information to people and not -- you don't really get -- to extract feedback from the people at the moment. I saw the survey that came out today so I think a lot of people responded.

Speaker: and one thing I wanted to add I felt the panelist didn't have enough time. It was so quick and I think we wanted to hear more. Especially Erin. I think that one was so interesting and they only had so much time and people really wanted to hear more.

Michael: I shared I think it is -- to me -- you guys were much more involved in the planning. To me a big part of why we do those is to make sure people have a chance to share what is working well for them and network and troubleshoot and challenges they face so we try to jam a lot in there and I think I noticed that as well. There wasn't as much time -- maybe we need to add more time, stretch it out over more than one day or shorten the content so there's more opportunities. There were several folks had so many good networking conversations but I like that because people got to

choose what happen the for them. Some wanted posters and some wanted networking time.

I think there was a lot of great conversations started. Which gives me hope. Having panels send a clear message that those interest big priorities for us and so I wish we had more time.

Speaker: I think it is funny. We were a little starry eyed with all the information we thought we could jam pack. So over all I think it was a really good day.

West: was the event to showcase health share?

Speaker: I think it was to showcase our partnerships and I hope that came across because all of the information wanted to present. I think it was a good opportunity to show how health share is in our community.

Michael: and making sure we were including folks. Like talking about the work they are doing and all the panelist. So really I think that's the power that we average talk about the power -- the power of togetherness and to learn from each other.

Speaker: and the overarching them was altogether and we wanted to highlight our plan which is why we had the breakout sessions and started on start strong and health share initiatives and how those are actually being tackled in reality through specific initiatives so kind of interesting how we wanted to kind of combine everything but yeah.

Speaker: I think that there could have been more context around the showcasing partnerships. The presentations people asked how are you connected to health share so I think just more around like how -- what health share's role is with all those partners.

Speaker: I echo what everybody said I thought it was a great day. The creativity that you have the posters in the packet for everybody. I have never seen that before. You have sessions but to actually go home with all of them is pretty cool.

Speaker: we did that the first time last year and got good feedback which is why we did two this year. Let's do more of that so we got a little ambitious so i'm glad that was well received.

Speaker: I appreciated we got organize Clinton and I think clarifying for folks. We're directly advising on the opportunities that we do want to put into these things but what could that look like. Not so much the conference but as a council I think. There's opportunities we could talk about maybe in the space.

Michael: I think part of what -- so folks contacts for our guests Maria is a couple months into her positions and one of the things we did when we relaunched the council we wanted to have community engagement and look for opportunities so we can look at how to use more council involvement.

Speaker: how well do you feel you knew about the projects or initiatives that were going on?

Speaker: you learn the a lot.

Speaker: I didn't know about a lot of them. Oh, my goodness. Health share is doing all of this so it was very new to me a lot of them. And I would say really love the marketing. I got to meet the young lady that you consulted with and I was like I really loved the way all of that was put together. So explain how we do our work so I appreciated all of that work

the thought that was put into the way everything was together.

Michael: we should probably move on.

Speaker: Erin -- could we steal your community? While she is setting that up. Over the past year we have been updating our website to be more member friendly more provider friendly. Really the information there is the same but I hope it is organized and consolidated better, information is easier to find. It is way more mobile friendly or old website was a little clunky so we wanted to really enhance that feature. We also have it in Spanish to ensure that folks aren't just get the website so that's a great feature to have and we enhanced our search function called a positive search function where when you search a topic or whatever it is you are searching it brings it up by audience so it will say members, three hits on your search or your provider and it will bring up the same search.

There is a few new features. We have new branded we wanted to incorporate to modernize it a little bit. Technology improves significantly over the years. So our original website was built in 2012. It was time for something a little more up to date. And we're getting our Wi-Fi to work.

Have any of you been on the website recently? Did you like it?

Speaker: it is like it is much easier to use. Okay.

Speaker: hopefully it is. So we did user testing. Not extensively as we would like. Obviously it would have been great if we involved you guys earlier. It is one of those things where we rapid fired, organized information.

Speaker: I haven't tried it on my mobile yet.

Speaker: it was six months of programming.

Speaker: I realize we're behind on the agenda which is okay. But we'll try to wrap this session up in about 5 minutes of or so. And the chip values.

Speaker: we can also pull out our phone.

Speaker: hopefully it is mobile friendly.

Speaker: someone suggested that earlier.

Speaker: will there be another opportunity provide feedback.

Speaker: yes we are scheduling internal -- so we are scheduling internal things with various departments within health share. Compliance. Contracting. And then we would love to do -- if there's an opportunity to do feedback.

Yeah. Here it is. This little lady her name is -- she is -- amazingly cute. I would watch it all day long. She's pretty cute.

Speaker: in the mobile she doesn't move.

Speaker: but -- so that yeah so obviously there's just like a new look and feel to the website. Can you scroll down -- I don't know how to use the computer. When you scroll down it is more simple or compact information. We have our member welcome video right up front that kind of shows how to navigate health share and our services and benefits and we have just our audience -- by audience information for providers for members and a section about our initiative so its has information about strategic initiatives and it has information about our matrix that we're held accountable to by the state and a section on health equity.

I will get into -- this is all color coded which is nice and about us which is like it has you guys on there and our staff and our board and a little bit more history about health share and that kind of things. Our partner organizations so that's just the home page but the community health section you will see metrics and investment health. Health for all which is the part about health equity and how you we bring health equity to health share and our report we just put our and I believe the agenda is on there as well.

Speaker: do you know -- Natasha was just saying it is not on the mobile --

Speaker: we probably do have to update that. We're slowly gathers -- we just launched this a week or two weeks ago.

Mike cam: they want to set up time at one of our future meetings to get head shots of you all so look forward to that.

Speaker: photo shoot. Here is our annual report. Yeah and we had research and results so five year transformation result. Foster care study that we did out of providence. We're going to put up project nurture report through and our agenda isn't on here so it must be on the health for all page.

Speaker: the community advisory council meetings?

Speaker: under us there is news and event session so we put all of our up coming event and community meetings under there.

Michael: it would be helpful if it was more pronounced and how we can do that. Part of what we want, we want more community members. So let's do whatever we can.

Speaker: you only have a link to previous and it goes through 2018 -- and we're starting 2019 maybe update it for 2019 meetings. Here it has everything. It has --

Michael. We post all the stuff after the fact whether they are public meetings or closed and we promote the meetings ahead of time and at least a minimum quarterly.

Speaker: so this is our help for all page. With health equity it has a very old chip on there. We have some of our videos we did. And then kind of just going into the standard --

Speaker: what was that under? Help for all?

Speaker: help for all.

Speaker: which part -- i'm sorry -- the title.

Speaker: there is another-- is there another page within our website that has a similar like engagement in terms of putting other community event or putting meeting information, something similar to that?

Speaker: so the news and event page -- actually -- I wonder what they did with that.

Michael: while she is pulling up that page it is almost 11:40 which is okay. Do we need to spend more time on the website or go onto the agenda and have more time to get into this later. What's the preference of the group.

Speaker: i'm fine with moving on.

Michael: and maybe inviting Stephanie back?

Speaker: I would love to do a deeper feedback on this that would be great.

Michael: in the future. So just for the sake of keep on time we really need to engage around values is important so less try to transition into that and we'll just know to invite Stephanie back.

Speaker: In the meantime, look at the website and write design your thoughts so when I come back we can have a cool conversation

Speaker: and we were looking for you all to get head shots in the January meeting. So -- if the question is if you are okay with that with having your picture posted we would love to have a head shots then in our January meeting. So come picture ready.

Speaker: can you send an email reminding us?

Speaker: yes.

Michael: transition into the next section. We do have public comment on our agenda. We only have one member that's not a council member. Do you want to make a public comment or are you just here to observe. I just want to make sure you get a chance to

Speaker: i'm just here to observe.

Speaker: so we could use the rest of the time to get into the next agenda item but if folks come in we want to make sure we wrap up in time for public comment.

Speaker: so I think we are hoping to review the guiding principles we came up with at the last meeting. They are not final at all. We just started drafting them and there was a few people missing from the last meeting so i'm going to read through them so we're familiar with what we have so far and Maria will talk about what we're hoping to get input for today.

Guiding principles our CHP will be guided by the following principles. And these were how that will look so the first one CHP will be aligned double down across the region are working on so strategies the county CHP's are working on and focus on the council. It will be adaptive and emergent. Designed in response to what is known about strengths strategies and populations and also respond to new information from community during the duration of the plan so support dating the CHP regularly when we're learning new things and have new data.

It will be strength based built on the strengths of the communities. It will up stream and downstream including some strategies that are more like social determinants and some things more clinical impact or downstream and it will being accountable. Describe what health share should do and be accountable in terms of the plan. Those are the guiding principles we came up with.

Speaker: So I wanted to -- ask just what they felt billion our guiding principles and making sure we're centered and looking for us to be able to produce in our CHP and we're going to be later on working with us with that activity Erin mentioned just as we want to make sure we're synthesizing a little bit our CHP goals with our guiding valuation and principles. Questions? Comments? Concerns?

Speaker: Yesterday at the conference we does get a lot of folks from other organizations in Portland that really talked about asking if we were

going to be partnering what this CHP is going to look like and creating a bunch of separate but what are we doing to make sure that we're also communicating with others maybe.

Michael: Abigail we have been in board meetings so one of the things is aligning with the counties and the one that -- we do a CHP and we can add to it and align it with other areas and system CHP's so that's a good value you put down for us.

Speaker: Another point that we brought up when we were doing the poster was from a former health share employee who wanted to encourage the council to sort of once this process is over to take a establish back and evaluate and see what the impact has been as a result of your CHP process. And see if there's been any improvement or where the impact within the community is noticeable the feedback from community members from partners around the work that's being done.

What is the real impact of that within the communities and is this iteration working and how the council can play a role in guiding that for the council and also health share to consider there are different ways. The impact is not what you all feel is doing that. Like take as moment and appreciate the work and seeing is it actually doing what I want it to or does there need to be a change.

Speaker: The other things in the poster session if you have it, there is -- this presented information around what it highlight inside one of the poster that's was created. And just a little I think what was it. I think Natasha said it would be good to do a remembered what we found as we're talking about our CHP. We were focusing on the counties and bringing up the county information. Do come up to the go over some of the key or main themes?

Speaker: sure. So the main teams that were highlighted in the community health needs assessment. The first was safe affordable housing so that might connect to if we want to focus on the social determinant up stream approach.

Second was access to inclusive and access age physical and behavioral oral health care.

Right. Third which is one of the places where all three counties align in our strategy so that might connect well. The third was access to healthy and affordable and culturally affordable food.

Fourth access to high quality identity affirming trauma informed education.

Fifth safe neighborhoods. The last one was social connection and social cohesion. And I will say in the new community health assessment we just finished the listening session and this is what we dealt saying social isolation and connection and cohesion is still resonating in the assessment something we should address in our CHP.

Speaker: I think it was listed as one of the strengths as -- we're addressing from the needs in the communities we're serving and I think we need to be able to speak more on that, what are the strengths of the community as we're building this CHP and moving forward how that works a lot of focusing on conditions or often we have seen in the past just gets us to a certain place, but building off the strengths of the community, and this continues to be brought up and is a good reminder for us.

Speaker: And it is coming up in the main strength area but there needs to be more. We're asking what is working around social connection and community.

Speaker: Especially around the different population that's we were kind ever looking at or were brought up in the retreat and then in the meet underpinning you all had. Some of the specific population. I did two listening session for the Spanish speaking community out in Washington county and Multnomah county and building community within their neighborhoods within the apartment complex they are living was brought up as well. Questions? Comments.

Speaker: I was writing down the areas and the majority of areas are areas of health so that's one of our guiding principles. So how we're addressing the strategies could be -- I don't know if we want to have embedded throughout or just a section addressing. I know at the county we have one and it is all around health, education, jobs. I think housing is separate because it is so much related around that. So think of ways like overlap this with the gaps that were identified and narrow down where we focus in the CHP.

Speaker: any other comments?

Michael: I would ask if I can -- you know the list of values that you all have come up with are great and really that what you just did right there is what we want because we value this then we should do this. That's an idea world that's what happened creating values and we say because of these values this is how we're going to do our work that's what I saw. Exactly what we want and we also want to make sure or CHP is really based on community and we know that coming to council meeting is not the only way but ideally we would have had community folks here engaging.

So between now and that the next meeting if there are anyways you as council members can go back to communities or networks you are in and shop some of these values around and get peoples' reactions is there something that's missing?

Speaker: on our principles?

Michael: Yes all of you really wanted to engage more than the folks in this room so this that may not be the venue so can you take some of these out or think about the other tables you sit at and say there are valuation you think would be good for us to include here just as a final check before we move onto values.

Speaker: and if there's other things you have in mind -- the budget for community engagement and I know our time line is short but if there is something you think either that we can come in to a meeting you know of and provide is space to check some of these things and strategies that we're talking about please let us know and let's be creative so how can we engage with those that are already engaged in these spaces and asking for permission to allow us to present some of this information to get that feedback as well.

Speaker: I know we usually -- it is like every other -- some sort of topic like health or voting or community health -- and thing we can share.

Speaker: I was thinking of a couple of places but about how long do you think he need on the agenda?

Speaker: I think it depends on how far we go today and what we want to that present so that could be another conversation as well what are we hoping to present? Just presenting on our values? On our guiding principles do we want to get to building strategies or focuses if we want to check that with community. I think it is up to you in term it is of what do we want the community input in.

And it could be as short as like 15 minute here's what we have. Tell us

what you think in an interactive type of setting. I think whatever they allow us to.

Speaker: I'm going to go against the grain here. It is an alignment we have done in Clackamas. I think just in terms of not duplicating it meet that's expectations. I think what partner that is really want to know is -- here are the priorities. Okay what are you going to do and how is this going to be implemented and how can I be involved. For us to have a sense of those questions -- I missed last month's meeting.

But until I'm really clear on how is this plan going to be implemented and how is it different from some of the other work that is already happening and how can folks get involved or why should they want to be involved. I think these are key things.

Michael: you are suggesting holding on until we get further on and here are the values right now stuff?

Speaker: yeah -- last year I just feel like we have done so much assess settlement opposed to action.

Speaker: one of the things I was going to bring this back to -- not so much broad but our teams and different organization I think it would be great for them to look at the values because they my want input on where we're going on with our work as we create it because they help create at the counties. I don't know if you and Erin have leadership teams that might be a gate place to bring it and not so much in the community but those groups of folks may have more of an interest in where our interest and values are and starting there would help us guide creating our CHP.

Speaker: it would be helpful for me team to see these and the direction we're going with, CHP to provide feedback

Speaker: last from the county point of view not taking it too far into the community but having folks at that table from the organizations.

Michael: we have a couple of different options. It doesn't have to be either or. It could be a combination whatever you decide we got to figure out that sweet spot how to engage but also have action which is a real thing for communities. Stop asking us and start doing something. That's a real thing.

Speaker: being informed and hands on and a lot of those health share members themselves so they really want direction and just being transparent. Like questions come up. We're going to come back. Just let them know their voice is important.

Speaker: I think that's a great place to start. To be able to engage with folks who are interested in the leadership team but I also feel like for our other council members to touch the communities. Here's what we would like to see and the council can say we'll take this back and this is what the community members said and we go back we heard you this is what we want to try. Is this okay. They could be like no. We're going to try it. If it fails, we told you we are going to try.

So there's a track record of accountability what is happening so there is action and movement. I would like to see there's an opportunity for us to observe -- we have to try and so I feel like there is a sweet spot to work with folks in decision makes and also to give ownership to the community so say okay we are heard what you said so come back so we're accountable to the community so there's a sweet spot there.

Michael: so I think I was asked to be a timekeeper. I'm doing poorly today I didn't ask to be timekeeper. It is 12:05. We have one person joining us but

we do typically close our public meeting portion and the rest of the hour is for you to dig in a little bit more how we develop the CHP this conversation I think should continue. So as was summarized there is different needs there and ways to meet both so that would be great to explore. I know you are looking at council applications because we are recruiting and trying to get folks so we should start moving into that if that's okay. So thank you all for coming. Unless anyone does have public comment we're going to close the public portion of the meeting and dig into our other agenda items.

End of meeting.