



Island County Community Health Advisory Board (CHAB)

Friday, September 8th, 2023, 11:00am – 1:00pm

Commissioners Hearing Room Annex Building, Building B102

[Click here to join the meeting](#) or Call: 12532158782 ID: 945 2101 9995 Passcode: 087548

- 11:00 **Opening Ceremonies** Erin Lavery-Mullins, Chair
 Call to Order
 Roll Call & Determining of Quorum
 Agenda Review
- 11:05 **Review of Meeting Minutes** Erin Lavery-Mullins, Chair
 ***Action Requested:** Review and Approve*
- 11:10 **Public Comment**
- 11:15 **Regular Agenda**
1. CHA Contract Overview and Next Steps Taylor Lawson
Assessment Supervisor
- Attachment(s):*
 [Ascendant & Island County CHA 2023](#)
Action Items:
 CHAB Review and Provide Feedback by September 14th
- 11:45 2. COVID After Action Report Presentation Taylor Lawson
- Attachments(s):*
 [After Action Report](#)
Action Items: Discussion
- 12:10 **Break (5 minutes)**
- 12:15 3. CHAB Docket Review & Action Items: Taylor Lawson
- Attachment(s):*
 [CHAB Docket Ideas](#)
Action Items: Members Review & Discuss
- 12:30 4. BOH/CHAB Liaison Updates CHAB Steering Committee
- Action Items:*
- 12:40 5. CHA Updates Taylor Lawson
- Action Items:*
- 12:45 **Comments by Membership – Absent member next steps** CHAB Membership
 Attachment:
 [CHAB Roster 9.8.23](#)
- 12:50 **Staff Updates:**
 Public Health & Human Services
- 1:00 **Adjourn**

“The purpose of the Advisory Board is to promote public participation in and identification of public health needs, to develop public health policies and procedures by which Island County can address those needs, and to assist in assuring health needs are met for citizens of Island County.



Ascendant & Island County CHA Contract

Presented at CHAB

September 2023

Action Items

1. Review materials:

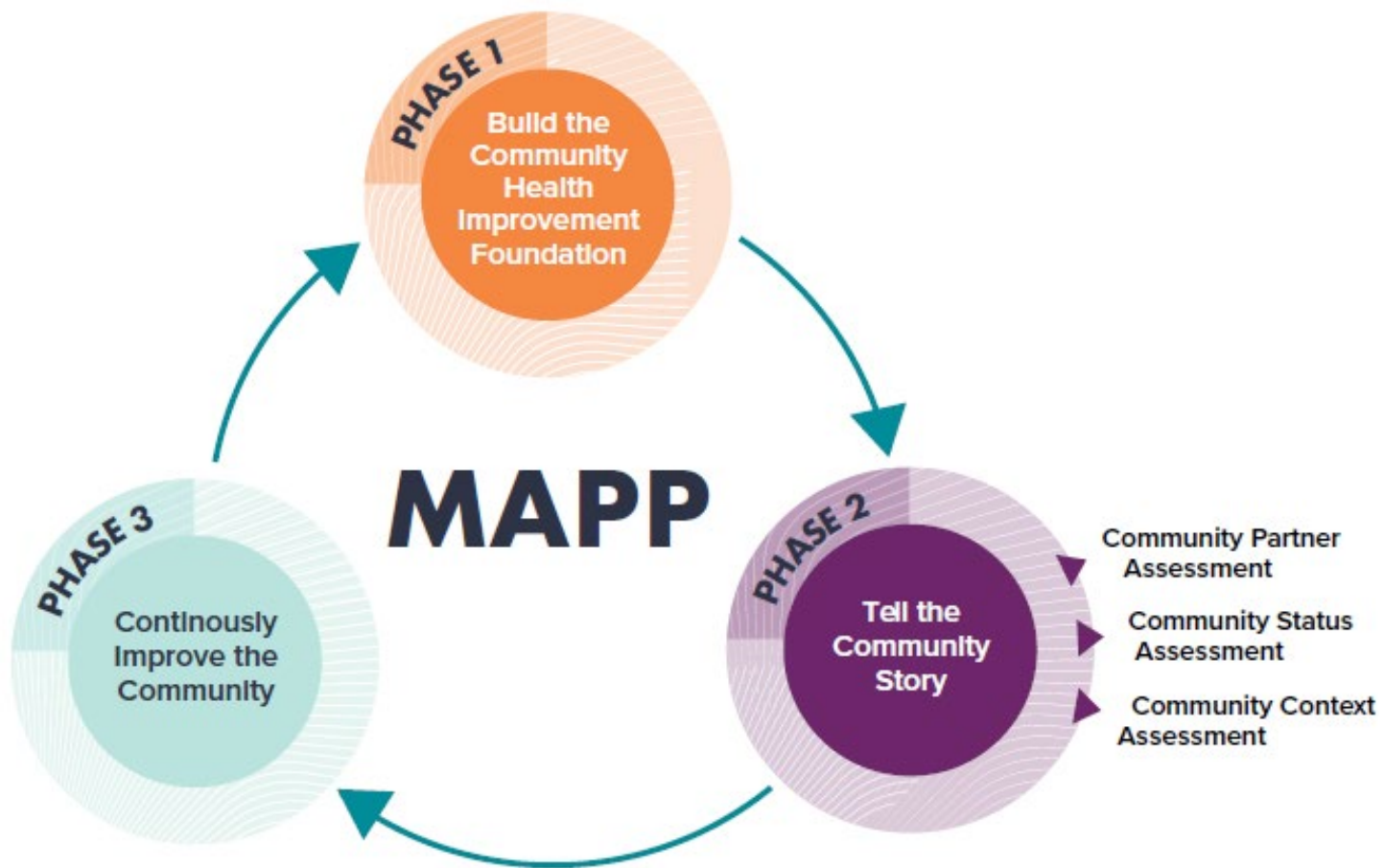
- Community Partner List
- Health Indicator List
- Community Health Survey

2. Come prepared to discuss the following questions:

- Who is missing from the Community Partner List?
- Who should we prioritize from the Community Partner List?
- What is missing from the Health Indicator List?
- What do you think about the Community Survey?

If you'd prefer, or are unable to attend the meeting, you may also share your feedback using the Padlet discussion board:

<https://padlet.com/tlawson52/community-health-assessment-tools-feedback-ggtidbcsv15yieai>



Phase 1: Build the MAPP Structure



- Establish and support the success of our Community Health Advisory Board (CHAB)
- Advertise, recruit, and host the Community Health Assessment Team (CHAT)
- Solicit support and participation from Island County Public Health leadership

We will often refer to CHAB & Island County Public Health Leadership as the “Core Team” or “MAPP Core Team.”

Phase 1: Build the CHIP Structure



- Currently 13 CHAB members
- Hosted two (2) CHAT meetings to orient participants to the MAPP framework, as well as future and past Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP).
- Regular updates to Public Health Leadership via email and meetings, ongoing participation in CHAB/CHAT meetings
- Alignment with Comprehensive Plan Updates

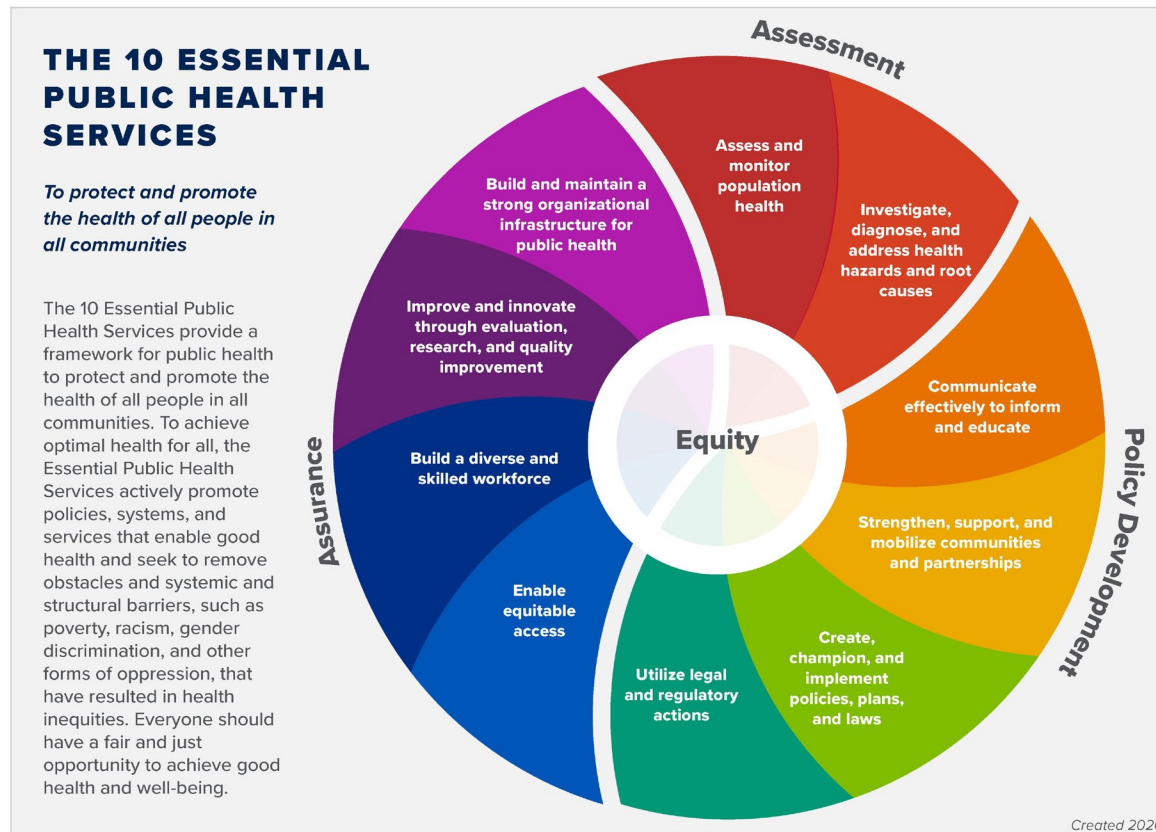
Phase 2: Tell the Community Story



- Ascendant Healthcare Partners to support the completion of each of the assessments to help us Tell the Community Story
- CHAB and Public Health Leadership will act as the decision makers every step of the way
- CHAT will provide feedback and supporting outreach activities to engage our community

Community Partner Assessment

Partners from the county's local public health system will participate in a survey on their involvement in community health. The partners will convene to discuss the survey results as they apply to the Model Standard Activities which serve as quality indicators aligned with the 10-essential public health service areas.



Community Partner Assessment Goals

1. Describe why community partnerships are critical to community health improvement (CHI) and how to build or strengthen relationships with community partners and organizations.
2. Name the specific roles of each community partner to support the local public health system (LPHS) and engage communities experiencing inequities produced by systems.
3. Assess each MAPP partner's capacities, skills, and strengths to improve community health, health equity, and advance MAPP goals.
4. Document the landscape of MAPP community partners, including grassroots and community power-building organizations, to summarize collective strengths and opportunities for improvement.
5. Identify whom else to involve in MAPP and ways to improve community partnerships, engagement, and power-building.

Community Partner Assessment Deliverables

Deliverable	Person/Team Responsible	Timeline
Provide one link to CPA Partner Survey	Ascendant	Within 30 days of project start date
Collect at least 10 surveys	Core Team	Within 45 days of project start date
Facilitate Partner meeting(s) to discuss the CPA purpose, the survey results, and prioritize findings	Ascendant	Within 60 days of project start date
Provide written analysis of survey and meeting results	Ascendant	Within 30 days of partner meeting(s)

Partner List Discussion

Who is Missing? Who Should We Prioritize?

Please note: We have points-of-contact for all the organizations listed.

Equity

Ensuring at least two (2) community/partner members or organizations that represent populations that are disproportionately affected by conditions that contribute to health risks or poorer health outcomes to participate in the survey and attend the meeting.

Partner List Discussion: Gaps

- Healthcare Partners
- South Whidbey Long Term Care
- Camano Childcare Partners
- Other Governmental Partners engage?
- Other Integrative Providers?
- Are there “sections” missing?

Equity

Ensuring at least two (2) community/partner members or organizations that represent populations that are disproportionately affected by conditions that contribute to health risks or poorer health outcomes to participate in the survey and attend the meeting.

Community Status Assessment

Informs MAPP and collects quantitative data on the status of your community such as demographics, health status, and health inequities. The CSA helps a community move “upstream” and identify inequities beyond health behaviors and outcomes, including their association with social determinants of health and systems of power, privilege, and oppression. The CSA is a community-driven assessment to help tell the community’s story.

Community Status Assessment Questions

1. What does the status of your community look like, including health, socioeconomic, environmental, and quality-of-life outcomes?
2. What populations experience inequities across health, socioeconomic, environmental, and quality-of-life outcomes?
3. How do systems influence outcomes?

Community Status Assessment Deliverables

Deliverable	Person/Team Responsible	Timeline
Identify a Health Equity Liaison	Core Team	At kickoff meeting
Provide a minimum of 50 indicators	Ascendant	
Provide a link to community-wide survey	Ascendant	
Distribute collect at least 150 surveys	Core Team & CHAT	Within 70 days of project start date
Present and facilitate results to MAPP Core Team	Ascendant	
Provide written analysis of CSA	Ascendant	Within 30 days of survey close date

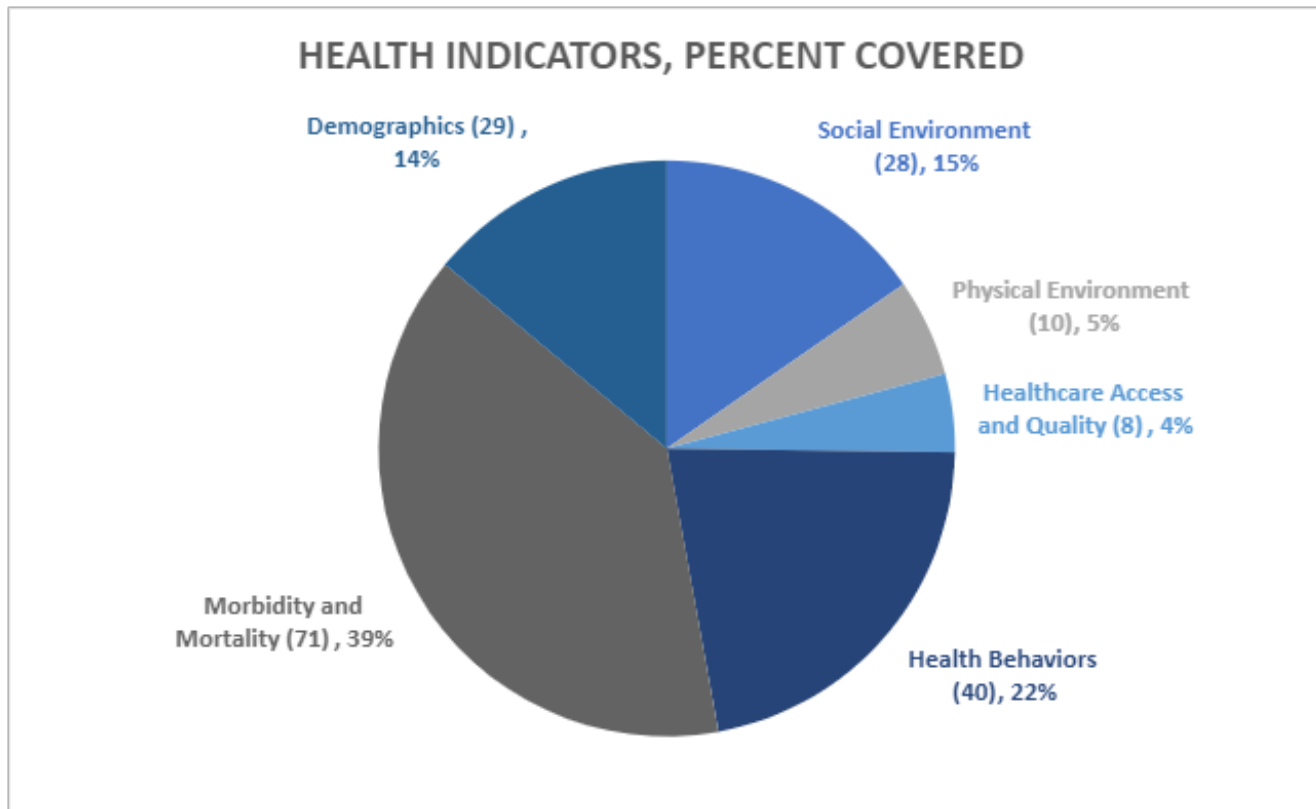
Health Indicator List: What is Missing?

Equity

Identify the vulnerable population(s) within the county: Under five years old, age 65 or over, disability, educational attainment (less than ninth grade), veteran population, immigrants, LGBTG+, African American, Hispanic, Asian, Native American.

Provide supporting documentation from Washington Public Health Information Warehouse that provides details on vulnerable populations as well as any other supporting documentation requested by AHP.

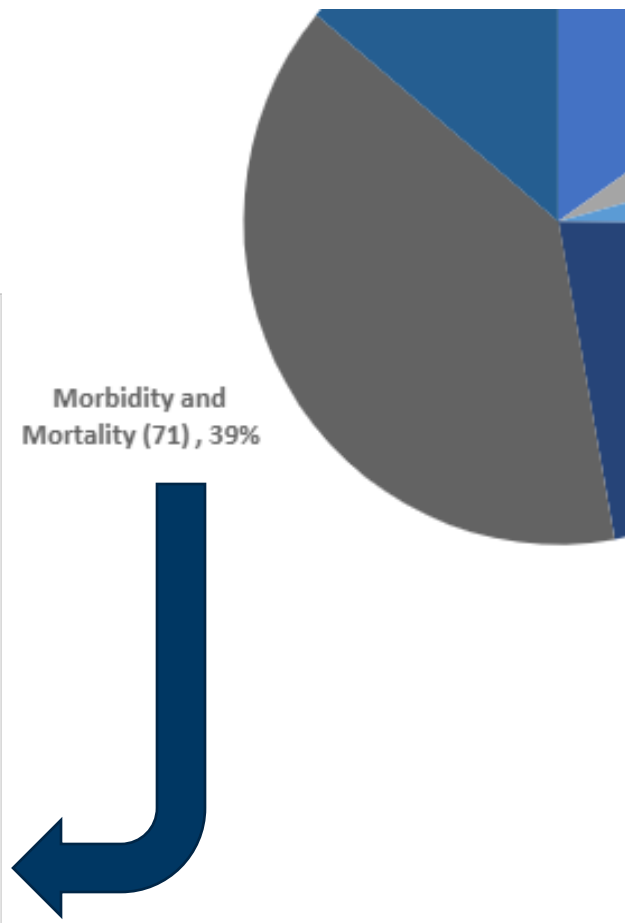
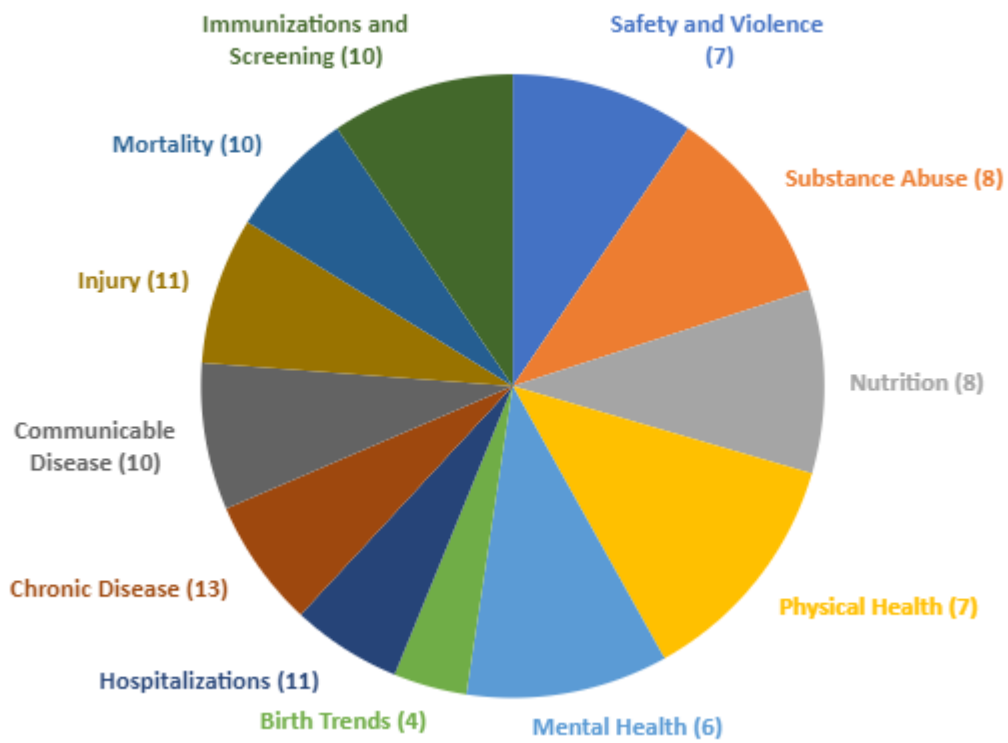
Health Indicator List: What is Missing?



Please note: The (#) represents the number of indicators in each section

Morbidity and Mortality as Indicators of Health Inequity

MORBIDITY AND MORTALITY, PERCENTS COVERED



What is missing?

**Disaggregate whenever possible

Community Survey: What is Missing?

Equity

Identify the vulnerable population(s) within the county: Under five years old, age 65 or over, disability, educational attainment (less than ninth grade), veteran population, immigrants, LGBTQ+, African American, Hispanic, Asian, Native American.

Once the vulnerable population is identified, the Health Equity Liaison is responsible for the distribution and collection of 50 completed surveys (all questions must be answered to be counted as a complete survey). The Liaison will scan all surveys to AHP.

Community Context Assessment

A qualitative tool to assess and collect data. It collects the insights, expertise, and views of people and communities affected by social systems to improve the functioning and impact of those systems. The CCA moves beyond interventions that rely on perceived community needs to understand a community's strengths, assets, and culture.

Community Context Assessment Questions

- What strengths and resources does the community have that support health and well-being?
- What current and historical forces of change locally, regionally, and globally shape political, economic, and social conditions for community members?
- What physical and cultural assets are in the built environment? How do those vary by neighborhood?
- What is the community doing to improve health outcomes? What solutions has the community identified to improve community health?

Community Context Assessment Deliverables

Deliverable	Person/Team Responsible	Timeline
Forces of Change Facilitated Group Discussion	Ascendant Core Team, CHAT, and community partners attend	
Present provide facilitation of results to Core Team	Ascendant	
Provide written analysis of assessment	Ascendant	Within 30 days of group discussion completion

Forces of Change Assessment Overview

How To Identify Forces of Change

Think about forces of change — outside of your control— that affect the local public health system and/or Island County.

1. What has occurred recently that may affect our local public health system or community?
2. What may occur in the future?
3. Are there any trends occurring that will have an impact? Describe the trends.
4. What forces are occurring locally? Regionally? Nationally? Globally?
5. What characteristics of our jurisdiction or state may pose an opportunity or threat?
6. What may occur or has occurred that may pose a barrier to achieving the shared vision?

Community Context Discussion

Given what we know about the Forces of Change Assessment, which community partners do we need to emphasize /highlight as essential participants?

- Social
- Economic
- Political
- Technological
- Environmental
- Scientific
- Legal
- Ethical

Equity

Ensuring at least two (2) community members or organizations that represent populations that are disproportionately affected by conditions that contribute to health risks or poorer health outcomes are in attendance.

Next Steps: Kickoff Meeting

September 21st from 12 PM – 1:30 PM

Virtual (meeting invitation will be sent out)

Agenda

- Presentation of the new MAPP 2.0 process
- Review your community indicators
- Finalize the community-wide survey

Requested Actions for CHAB

1. Participate in the Kickoff Meeting (if schedule allows)
2. Provide feedback on the community survey (due September 14th)
3. Sector representatives' network to solicit participation in CPA and CSA (hand out to be sent out)

**COVID-19 Initial Response
After Action Report**



Island County Public Health

Assessment Division



OVERVIEW

PURPOSE

The purpose of this COVID-19 After Action Report (AAR) presentation is to succinctly present the Board of Health (BOH) with the report findings, including strengths, weaknesses, lessons learned, areas for improvement and recommendations, in order to enhance future response to public health emergencies.

SCOPE OF REPORT

This report provides a comprehensive assessment and analysis of preparedness and response efforts related to the COVID-19 pandemic, covering various aspects such as preparedness measures, response effectiveness, resource management, communication and public awareness, vulnerable populations, collaboration, coordination, and recommendations for improvement.



OVERVIEW

HSEEP/AAR FRAMEWORK

The Homeland Security Exercise and Evaluation Program (HSEEP) framework, recommended by the Washington Department of Health (WADOH), was employed for the COVID-19 After Action Report (AAR). This framework provided a structured methodology for evaluating the pandemic response, identifying strengths and weaknesses, and making recommendations for future preparedness and coordination efforts.

BACKGROUND

Emergency response teams often face complex dynamics in their operations. The COVID-19 pandemic presented new and unprecedented challenges that had not been experienced in previous emergency responses in the United States. These challenges included prolonged response duration and an overwhelming demand for emergency services. As a result, the initial response had to rapidly expand (scale up), placing significant pressure on healthcare systems and revealing various shortcomings. Overcoming these challenges required the implementation of crucial strategies and the ability to adapt response efforts effectively.



OVERVIEW

KEY FINDINGS

During the COVID-19 response the following areas for improvement were identified:

- Communication
- Coordination
- Collaboration
- Cooperation
- Responder Health & Safety



KEY FINDING:

Communication

Communication is essential for effective emergency public health response as it impacts all aspects of the response effort. Clear and consistent communication ensures that the response team members understand their roles and responsibilities and are working together toward common goals.

Effective **Internal Communication (IC)** plays a crucial role in various aspects of crisis management. It helps prevent duplication of efforts, reduces the chance of important information being overlooked, and minimizes confusion and miscommunication.

Internal Communication (IC) was identified as a significant gap, including need to improve internal communication processes and collaboration among teams. Limited use of tools to facilitate communication among team members, resulting in difficulty in accessing, managing, and sharing important information



STRENGTH | External Communication (EC)

Strong relationships with external partners improved collaboration and communication. This improved understanding and engagement resulting in better information flow. The external communication enhanced public safety and heightened readiness while keeping external partners informed on the latest developments of relevant information specifically, among local schools, healthcare providers, and long-term care in Island County.



RECOMMENDATIONS

- **Increase** communication channels within the agency by establish new channels such as open office hours, all staff debrief emails, use of collaboration tools, and the development of an internal communication plan that outlines when and how messages will be disseminated
- **Improve** communication within teams and foster a culture of open communication. Team members should be encouraged to speak up and share information, and managers should seek to provide regular updates and feedback to ensure everyone remains informed
- **Streamline** the process for receiving and communicating critical information. Establishing clear protocols for receiving and relaying information may be necessary and involve assigning specific roles and responsibilities to individuals for establishing clear lines of communication, and using standardized methods for documentation and tracking
- **Develop** comprehensive internal communication strategies and crisis communication plan that include clear and consistent messaging for internal audiences. This may include developing key messages for identified internal target audiences and using appropriate channels to disseminate information
- **Leverage** technology to improve communication. Utilize tools to facilitate and improve communication collaboration capability among team members such as powerful tools such as instant messaging platforms to help ensure team members have access to important information in real-time, regardless of where they are located



KEY FINDING:

Coordination

Coordination

The Incident Command System (ICS) and the National Incident Management System (NIMS) are structured organization frameworks used for managing and coordinating emergency incidents. The Incident Command System (ICS) is designed to establish a clear chain of command and control at an incident scene. It defines the roles, responsibilities, and organizational structure for managing emergencies and focuses on clear command structure and effective communication.

National Incident Management System (NIMS) establishes a common language, protocols, and processes to facilitate seamless communication and collaboration by promoting a unified and coordinated response. While ICS is a component of NIMS, NIMS provides a standardized approach to incident management, while ICS provides the organizational structure and processes for incident response within the broader NIMS framework.

Coordination plays a crucial role in an effective response effort. The report has identified a breakdown in the ICS/NIMS during the COVID-19 pandemic response.



KEY FINDING:

Coordination

STRENGTH | Staff Flexibility & Adaptability

Staff flexibility and adaptability foster a culture of creativity and innovation. When team members are empowered, they are more likely to come up with creative solutions to complex problems. This important strength helped teams to pivot quickly in response to changing circumstances, remain calm and composed under high-stressed situations for Island County.



RECOMMENDATIONS

- **Review** and reinforcement of the National Incident Management System (NIMS)/Incident Command System (ICS) including clearly defining lines of authority and responsibility in the ICS. This will help avoid confusion about who is in charge and make it easier for teams to function effectively
- **Establish** clear communication protocols, develop feedback loops ensuring regular communication, coordination, and timely access to information between leadership, response teams, and internal county employees
- **Develop** clear chain of command within response teams. Establishing the authority structure can help clarify decision-making processes and approval procedures, reducing ambiguity and confusion among staff members
- **Credential** NIMS/ICS Leadership (Incident Commander, Section Chiefs, and Command staff). Provide training, support, and team scenario simulations for staff members to exercise their roles and responsibilities using ICS in a safe and controlled environment
- **Providing** regular updates and transparent **communication** to team members about the status of response effort and any changes to protocols and procedures including the development, disbursement, and training around all pivots in response strategy including all new emergency plans developed during incident response
- **Reassess** staff levels and adjusting workloads as needed to prevent team members from being overburdened as needed to prevent burn out



KEY FINDING:

Collaboration

Collaboration

Effective communication fosters collaboration during emergency response by facilitating open and transparent exchanges of idea, feedback, and knowledge in diverse subject matter expertise. It creates an environment where individuals feel comfortable sharing their perspectives and working together to solve problems, brainstorm ideas, and make informed decisions. Collaboration in emergency response enables leveraging diverse expertise and experiences, leading to innovative and creative solutions to complex problems. Improving departmental silos, establishing project cycles, and including clinical staff can inform future response efforts.



KEY FINDING:

Collaboration

STRENGTH | Common Operating Picture

Cross-department teams successfully operated Mass Testing and achieved the data goals sought. Logistics were effective and clear lines of communication aided in efficient information sharing, quick decision making and timely problem solving.



RECOMMENDATIONS

- **Facilitate** a neutral and respectful conversation or mediation session to address conflict directly
- **Encourage** team members to actively participate in brainstorming sessions and share ideas, fostering a collaborative environment
- **Promote** information sharing across teams and departments to ensure comprehension understanding of projects or issues
- **Provide** training and resources to support effective use of the communication hub and collaborative tools
- **Leverage** the valuable perspectives of clinical staff to improve response strategies and outcomes
- **Create** communication channel between clinical leadership/clinical staff and health officer during public health emergencies



KEY FINDING:

Cooperation

Cooperation is an essential aspect of emergency response and plays a crucial role in mitigating the impact of the pandemic. Cooperation builds partnerships, trust, and mutual support among all stakeholders. It involves pooling resources, sharing information, coordinating actions, and working together to achieve a collective impact. Cooperation ensures a unified response, effective resource utilization, and a comprehensive approach to emergency management. Communication barriers and leadership dynamics limited collaboration, as well as lack of rotation in team projects and work exhaustion.



KEY FINDING:

Cooperation

STRENGTH | Synergy & Collaboration

Cooperation promotes the exchange of information, best practices, and resources among all. The sharing of knowledge among the community ensured that the public could take well informed actionable decisions towards their health and access to vaccinations.



RECOMMENDATIONS

- **Foster** open and transparent communication channels to ensure information sharing and dialogue
- **Create** a supportive and non-judgmental environment where individuals feel comfortable expressing their thoughts and concerns among team
- **Establish** clear roles and responsibilities for communication within teams and across organization
- **Share** team accomplishments in multiple channels, encourage peer-to-peer recognition, and highlight collaborative team projects
- **Regularly evaluate and improve** communication processes, health and safety, and create a cycle of improvements utilize the strengths, weaknesses, opportunities, and threat (SWOT) analysis during responses lessons learned



KEY FINDING:

Responder H/S

Responder Health & Safety (H/S) It is essential to prioritize responder health and safety during public health emergencies to ensure emergency response efforts are effective. Burnout and exhaustion can negatively impact the ability of responders to do their job. Responders often work under extreme conditions, including long hours and accept delegation of additional tasks, roles and responsibilities during emergency response which can lead to physical and emotional exhaustion without adequate support for overall wellness.

Prioritizing responder health and safety is critical to ensuring sustained public health emergency preparedness and response efforts. Responder health and safety was identified as an area for future improvement. Responders worked for extended periods of time under stressful and challenging conditions, which impacted their physical and emotional well-being. Improvement in training, staffing levels, and resources can also improve future response efforts. Improved leadership direction can also improve morale of responders.



KEY FINDING:

Responder H/S

STRENGTH | Responder Leadership

Responders stepped into new roles and accepted responsibility without hesitation in the emergency response efforts. This was a valuable strength in the emergency and demonstrated responder leadership, adaptability, and willingness to take initiative. Responders who are comfortable stepping into new roles are often comfortable taking risks and making decisions under pressure, which benefited the COVID-19 emergency response in Island County.



RECOMMENDATIONS

- **Develop** a culture of wellness where rest and recovery time is valued and encouraged. Create responder feedback communication channels to support open communication with responder management
- **Develop** a comprehensive training program that includes scenarios for responding to emergencies in high-stress environments. Provide regular training on mental health, psychological first aid, and stress management
- **Establish** a system for tracking and addressing concerns raised by responders. Encourage individuals to report any issues they encounter, including concerns about workload, safety, and morale. Develop a process for addressing these concerns and providing feedback to responders
- **Improve communication** among leaders and responders. Provide regular updates and encourage open and honest communication including support to existing staff. Develop plan for staffing shortages that include cross-training staff to handle additional responsibilities while mandating breaks to ensure responders are not overworked
- **Prioritize** health and safety measures and communicate clear expectations to teams by fostering collaboration and communication to ensure responders feel supported, valued, and empowered to carry out duties safely and effectively

Apply an equity and climate lens, tracking recommendations to share back with BOH

CHAB Agenda Planning

Date	Topic	Presenter	Time (minutes)
Jul-23	Program Overview: Human Services Community Mental Health Services Overview	Kathryn Clancy	20
	Review Workplan/Docket for CHAB	Taylor Lawson & Shawn Morris	
	CHAB/BOH Liaison	Erin Lavery-Mullins	
Aug-23	DEI Toolkits	Kenesha & Erin	20
	CHAB Docket/Workplan Review	Taylor Lawson	
	CHA Updates		
Sep-23	CHA Contract Review & Discussion	Taylor	
	COVID AAR - Report & Presentation Discussion	Taylor Lawson	
	CHAB Docket Discussion	CHAB Steering Committee	
Oct-23	Public Health Strategic Plan & Workplan Discussion	Shawn & Taylor	
	Foundational Public Health Services Funding Discussion	Shawn & Taylor	
	CHAB Docket Discussion	CHAB Steering Committee	
	CHA Updates	Taylor	
Nov-23	Program Overview: Community Health	Megan Works	
	Comprehensive Plan Update - Community Health Elements Introduction	Taylor	
	CHA Updates		
Dec-23	Program Overview:		
	Comprehensive Plan Review: Specify Focus	Assigned CHAB Member	
	CHA Updates		
Jan-24			

