PUBLIC HOSPITAL DISTRICT NO. 2 OF SNOHOMISH COUNTY, WASHINGTON **VERDANT HEALTH COMMISSION**

BOARD OF COMMISSIONERS

Special Meeting

Hybrid: In-Person at Verdant Community Wellness Center and via Zoom

August 25, 2022 5:00 p.m.-8:00 p.m.

Commissioners

Present

Jim Distelhorst, MD, President Deana Knutsen, Commissioner Carolyn Brennan, Commissioner

Karianna Wilson, Commissioner Bob Knowles, Commissioner

Staff Dr. Lisa Edwards, Superintendent

Riene Simpson, CPA, Director of Finance Maggie Konstanski, Grants Manager

Zoe Reese, MPA, Director of Community Impact & Grantmaking

Kaysi Kelly, Executive Assistant/Office Manager Sandra Huber, Community Engagement Manager

Nancy Budd, Community Social Worker Monika Star, Wellness Center Assistant

Kirk Mathis, Digital Communications & Marketing Manager

Guests Margot Helphand, Facilitator

Brad Berg Heidi Stauber Nancy Lay Kenzie

Lauren Larlingo Robert Williams

Mikka N. Allison Quinn Catalina Angel Cayden Alan Paula Marshall Elizabeth Lunsford

Call to Order The special meeting of the Board of Commissioners of Public

Hospital District No. 2, Snohomish County, was called to order

at 5:01 p.m. by President Distelhorst.

Goal of Meeting and Review of Values Ms. Helphand presented slides to walk Commissioners through the goals of today's meeting. She asked Commissioners to review the values and discuss any necessary changes

(E:81:22).

Values:

FRAMEWORK FOR PLANNING: VALUES

Values – To fulfill our mission and achieve our vision, these ideals direct us in our service to the community and interaction with each other

- Compassion We act with compassion and care for our whole community.
- Accountability We fulfill our responsibilities to our whole community and to each other with integrity and by investing in programs that demonstrate worthwhile results.
- Respect We are inclusive and treat all with dignity, honesty and fairness
- Excellence We are leaders in investing, convening and empowering individuals to achieve health and well-being.
- Stewardship We strive to use all resources wisely for the health improvement of our community.

Commissioner Knowles pointed out from Slide 4 the word "whole" in that we support the *entire* community, not just those in need but also to maintain the health of residents already in good health. Commissioner Brennan also agreed to focus on the word "whole."

Commissioner Wilson suggests changing the word "improvement" from the Stewardship bullet in Slide 5.

Commissioners reviewed each of the three priorities and discussed potential revisions to each Goal and Objective (E:82:22).

Priorities and Definitions

Goals & Objectives: Mental Health:

GOALS AND OBJECTIVES: MENTAL HEALTH

- Goal: All residents can access affordable and equitable mental health care.
- Definition: Clinical and non-clinical mental health and substance use disorder prevention and treatment that increases patient access to care.

OBJECTIVES:

- · Licensed mental health and substance use services are available
- Suicide prevention services are available
- Positive coping and overall mental well-being classes and support groups are available
- Programs and services are tailored to the cultural and native language needs of individuals.
- Embedded Social Worker and case management are supported

Commissioner Brennan pointed out that "affordable and equitable" in the Goal seems a bit too aspirational.

- Ms. Huber commented that nowhere in the Goal does it state that Verdant has to be the only provider of this

- service and urged Commissioners to consider that as they revise this Goal, and not to remove those words.
- Commissioner Knutsen agrees with Ms. Huber's comment. In the beginning, Verdant was aspirational. We were motivated to make big changes in our community.

Commissioner Wilson asked Commissioners and staff what "equitable mental health care" means to them.

- Ms. Reese, MPA, answered that to her, it means all residents in the whole community have access to services to meet their needs.
- Ms. Konstanski added that we want everyone in our community to have access to good mental healthcare.
 This could mean some people need different levels of support for their care, such as programs tailored to kids in schools who face a stigma from their parents, services available in evening hours after the 9am-5pm schedule, removing language barriers for minority groups.
- Commissioner Knowles responded to Ms. Konstanski that her definition relates to "access" and he doesn't think the word "equitable" is needed as it seems redundant. He would remove "equitable" and keep "affordable" only in the Goal.
- Ms. Huber pointed out that without the word "equitable," there is no access. For example, if you have a clinic available for access, someone still might not be able to access it if they can't drive, or they show up and nobody is there to speak their language.
- Commissioner Knutsen agrees with Ms. Huber and even though you might think "equitable" is a buzzword, it is important.
- Commissioner Distelhorst said equitable means we recognize that the system is setup in a way that creates barriers for some people and that we are working to remove those barriers.

Commissioner Wilson pointed out the word "tailored" in the Objectives section as this means "narrowed" to her and she does not want to narrow our programs.

Executive Session

President Distelhorst announced that executive session would begin at 5:29pm and go for one hour until 6:30pm. No action would be taken during this time.

1. To consider the legal risks of a proposed action of the district.

Executive session was extended 15 minutes, to 6:45pm. Executive session was extended 15 minutes, to 7:00pm. Executive session was extended 5 minutes, to 7:05pm.

Open Session

President Distelhorst re-opened the meeting for public session at 7:05pm. No action was taken during the Executive Session. Commissioner Knowles made a motion to have Q3 2022 and Q4 2022 funding requests evaluated by the whole board then transition back to a Program Committee review starting with 2023 grant requests. The Q3 grant requests will be under current priorities, the Q4 grant requests will be under the new priorities. Commissioner Wilson seconded. Motion passed. (E:83:22)

Dr. Edwards recommended to have staff run these numbers under the new scenario. Commissioner Knowles asked staff to please reach out to the Executive Committee if they need any clarifications about the scenario so as not to waste any time in moving this new grantmaking scenario forward.

Discussion of Priorities & Definitions continued...

Goals & Objectives: Access to Healthcare

GOALS AND OBJECTIVES: ACCESS TO HEALTHCARE

Goal: All residents can access affordable and equitable healthcare.

 Definition: Clinical services (medical and dental) including care coordination and supportive navigation of systems that reduce barriers to individuals accessing care.

OBJECTIVES:

- · Free or sliding scale healthcare services are offered
- Patient advocacy, healthcare navigation and care coordination are offered
- Healthcare services are tailored to the cultural and native language of residents
- Services and programming are delivered in non-clinical settings
- · A full array of lines of service are retained at our community hospital.

Ms. Helphand asked Commissioners to review and edit the Goals & Objectives of this priority.

Commissioners agreed to remove the word "equitable" from the Goal and use "affordable" only.

Commissioner Knutsen suggested adding a bullet in the Objectives about our response to public health needs/crisis (such as the COVID-19 pandemic).

Commissioner Wilson suggested to revise the third Objectives bullet from "are tailored to..." to "meet the..."

Commissioner Knutsen clarified that we do offer services and programs in "clinical" settings so this should be included in the fourth Objectives bullet.

Commissioner Wilson added "per our contract" to the end of the fifth Objectives bullet regarding the community hospital.

Goals & Objectives: Food Security

GOALS AND OBJECTIVES: FOOD SECURITY

- Goal: All residents have equitable access to nutritious food that supports their health needs.
- Definition: Affordable and nutritious food is available to meet the health needs of each resident on a regular basis.

OBJECTIVES:

- · Food banks and pantries meet the immediate needs of residents
- · Food Programs improve access to culturally relevant foods
- Dietary and nutritional classes help residents to make informed food choices

Commissioner Wilson asked if we needed to include "on a regular basis" in the definition since it is vague.

Commissioner Brennan asked to include "affordable" and exclude "equitable" within the Goal of the Food Security priority, so it is consistent across all priorities.

Ms. Helphand recommended the Commissioners have a fourth priority that reflects what they want for the *organization* as they reach for these goals. This priority would be named "Organizational Capacity" and it is often standard for organizations to include this within their strategic plan. Commissioners Knowles and Wilson agreed to have staff work on drafting a priority of "Organizational Capacity" to be presented to the Board at the next strategic planning meeting on September 10th.

Review of Communication and Transition Timeline

Mr. Mathis walked Commissioners through the draft of the Fall 2022 communication and transition timeline as Verdant is changing its priorities (E:84:22).

Commissioner Wilson requested to make sure in the November canopy mailing we highlight exactly how much money Verdant has contributed to the community since its inception.

Commissioner Knowles recommends having the Canopy reviewed at least by the Executive Committee Commissioners before it goes out since this is such a critical time for Verdant.

Commissioner Knutsen recommends highlighting a community partner who has benefitted from Verdant.

Ms. Helphand asked Commissioners what role they'd like to have in the three proposed community forums.

- President Distelhorst said that, yes, Commissioners would participate. He was under the impression there would be a maximum of two Commissioners present at the forums, so they do not trigger the public meeting rule.
- Commissioner Wilson clarified that she suggested Commissioners participate, but not *lead* the forum.
- Commissioner Brennan requests that we send a broad invite to the community and not just to our grant partners.

Mr. Mathis asked Commissioners to provide a bio of themselves to introduce them to the community in the November canopy mailing. He will be reaching out to gather their bios.

Commissioner Knutsen asked how we would be able to present this community forum in a different language.

- Ms. Konstanski answered that during the Community Health Needs Assessment we have already spoken to our community partners who provided translation services to come up with a plan for how to present this data. She added that this community forum is somewhat unique since it also includes the announcement of our new priority areas so she would need to check with our translation partners on how to navigate the forum translation.

Changes from 2022 and 2023 Operating Budgets

Ms. Simpson, CPA, presented a summary sheet of the 2023 budget proposed to meet the \$2 million into the Reserve (E:85:22). She anticipates interest income on our investment portfolio will go up. She has included a "Contingency" line item in the budget as a catch-all for surprise expenses we could not have been forecasted. A more thorough review of consultants, inflation, expected cost increases and expected cost decreases for the 2023 budget will be discussed at the September 10th meeting.

Review and update operating agreement

This agenda item will be discussed at the September 10th meeting.

Next steps in strategic planning:

This agenda item will be discussed at the September 10^{th} meeting.

Adjournment

The meeting was adjourned at 7:59 p.m. by President Distelhorst.

ATTEST BY:

Docusigned by:

JSDistelhorst

President

Docusigned by:

Lananna Wilson

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Secretary