

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
September 12, 2023
5:00 p.m.-8:00 p.m.**

**Commissioners
Present**

Jim Distelhorst, MD, President
Karianna Wilson, Secretary
Deana Knutsen, Commissioner
Carolyn Brennan, Commissioner
Bob Knowles, Commissioner

Staff

Dr. Lisa Edwards, Superintendent
Riene Simpson, CPA, Director of Finance
Leslie Silverman, Interim Director of Community Impact &
Grantmaking
Ceil Erickson, Director of Community Impact
Kaysi Caballero, Executive Assistant/Office Manager

Guests

None.

Call to Order

The special meeting of the Board of Commissioners of Public Hospital District No. 2, Snohomish County, was called to order at 5:00 p.m. by President Distelhorst.

**Land and
Enslaved People's
Acknowledgement**

President Distelhorst read the acknowledgement.

**Status of Where
We Are and How
we do Things**

Commissioner Brennan requested to talk more about the organizational means with which Verdant propels its mission

- Managing and maintaining medical services for the residents of SSC
- Grant Making
- Capacity Building
- Direct Services
- Capital Projects
- Convening

President Distelhorst pointed out that when it comes to Verdant's grantmaking, Commissioners seem to prefer to support direct services. The need to support direct services is so important because there are so many crisis points in our community.

Commissioner Knutsen commented that Capital Projects really has become internal with all of the property projects underway

for District assets, and not so much for external partner's capital projects. It may be worth creating a think tank inviting different people in our community to come together and find solutions to these problems that we are consistently funding. From this think tank we can find the holes and work to fill that gap directly for our residents.

Commissioners discussed what they think Verdant aspires to be in the future? Do we want to be a grantmaker and fund other organizations? Do we want to fund capital projects directly for organizations? Whatever it is, it must be sustainable for Verdant in the long run.

Commissioner Knowles asked, if Verdant completely went away and the community didn't receive our funding and support, what hole would that leave in the community? Where do we have the biggest impact? What is our legacy?

- President Distelhorst provided one example, if Verdant went away, residents would be delivering their babies at Providence Everett. Commissioners fought to keep those OBGYN services here at Swedish Edmonds.

Dr. Edwards clarified with Commissioners that 2024 will be an information gathering year and we will use this information at our 2024 annual retreat to plan for the next strategic plan cycle starting in 2025. For example, Verdant will invite more people to our roundtables, host panel discussions for Commissioners to learn, figuring out where Verdant can help solve the issue of lack of providers for our hospitals and healthcare services. Commissioners are also interested in offsite visits to our partner organizations to see their operations and learn about their hardships and successes.

**Discussion on
Strategic
Priorities –
Affirm, Review,
Revise Objectives,
Metrics for
Success**

Dr. Edwards presented a slideshow of the 2023-2024 strategic priorities, summarizing the goals, objectives, strategic outcomes, and possible metrics to measure success for each strategic priority (E:60:23).

There have only been two funding cycles for these new strategic priorities. The first 6-month reports will not be provided until October 2023. The first full year report for these strategic priorities will not be available until May 2024.

1. Mental Health

GOAL: No changes.

DEFINITION: No changes.

OBJECTIVES: Commissioners agreed there are gaps in capacity/workforce issues for having providers available for the community. Commissioners feel they can support staffing and capacity building in their 2024 funding cycle decisions.

STRATEGY: No changes.

2. Healthcare Access

GOAL: No changes.

DEFINITION: No changes.

OBJECTIVES: Commissioners would like to move bullet #3 in Objectives "patient advocacy..." to a strategy. Commissioners would bring the last bullet in Objectives "a full array of lines..." up to bullet #1 in Objectives.

STRATEGY: Commissioner Wilson feels strongly that this priority has to include *direct services*. Commissioner Brennan wouldn't put the expansion of school-based health centers as a metric of success. Commissioner Wilson suggested to remove the "school-based health centers" and have the strategy item read "expansion of clinic-sites..." This change will also revise the metric related to school-based health centers.

3. Food Security

GOAL: No changes.

DEFINITION: No changes.

OBJECTIVES:

STRATEGY: Dr. Edwards suggested we could let an RFP to find a partner who can provide these services to our community and that Verdant wants to fund it, since we aren't getting this level of service with our current grantmaking cycle. Commissioners discussed potential opportunities for supporting school meals in the School district.

Commissioner Brennan is unsure how increasing the use of the Verdant teaching kitchen fits in with "food security" for our community.

- One way Verdant could do this is expanding teaching kitchen classes to educate individuals in the BIPOC community.
- Commissioner Knutsen suggested we could invite some of the immigrant grocery store owners to come teach a cooking demo at the Verdant teaching kitchen.

4. Organizational Capacity

GOAL: No changes.

DEFINITION: No changes.

OBJECTIVES: No changes.

STRATEGY: Commissioner Knowles suggested to edit bullet #6 to remove the word "policy" and change it to "guideline" or a similar word since there is not an actual policy. Commissioner Knowles recommends adding a bullet "ensure operational readiness to meet the ever-changing needs of our community" which would include the work Commissioners will make to transition their priorities as needs arise.

Identify next steps

Evolutions & Transition Questions for 2025 and onward:

- Where are the bottlenecks in having an adequate workforce? Can we host a study session with community

partners to see what issues they are facing to increase and retain workforce?

Superintendent’s Discretionary Fund:

Commissioner Wilson recommends expanding the fund starting in 2024. The recommendation was \$250,000 for 2024 with a cap on each organization of \$50,000.

- Commissioner Knowles asked:
 - (1) does the request have to align with our priorities at all? Commissioners agreed no, as long as the request aligns with our *mission and values* then it can go through the discretionary fund.
 - (2) is there a maximum award per organization who received discretionary funding? Commissioners agreed to max each organization’s funding at \$50,000.
 - (3) that requests still need to be presented to Program Committee and the Board as they are considered for funding.

Health Equity:

Commissioners agreed that health equity is addressed in our “Healthcare Access” Goal being “All residents can access affordable healthcare.”

Adjournment

The meeting was adjourned at 7:50 p.m. by President Distelhorst.

ATTEST BY:

DocuSigned by:
JSDistelhorst
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President

DocuSigned by:
Karianna Wilson
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Secretary