

## Healthier WA Plan for Improving Population Health External Advisory Group

January 20, 2016 Meeting Notes

### Attending:

Gary Goldbaum, Alison Carl White, Bill Rumpf, Tizzy Bennett, Glenn Puckett, Kat Latet, Marguerite Ro, Tracy Hilliard; by phone: Ian Corbridge, Molly Haynes  
Nora Coronado, Scott Daniels, Stan Ledington; DOH: Janna Bardi, Kathleen Clark, Marilyn Dold, Laura Blasko

Topic	Notes	Outcome/next steps
<b>Introductions, Overview</b>	<ul style="list-style-type: none"> <li>- Gary welcomed group, facilitated introductions and set tone for direction of meeting. Marilyn re-visited Purpose Statement, noting follow up actions taken based on requests in Dec 16 meeting notes. Kathleen provided high level overview of P4IPH in context of related work, noting Prevention Framework fits well with CDC identified “buckets” of Traditional Clinical Prevention, Innovative Clinical Prevention, and Total Population/Community-wide Prevention. There were questions as to how this work fits with other Healthier Washington work, and in particular regarding the 52 Common Measures. It was noted that other measures, including population health measures, are being worked on by leadership and the AIM team, focused on both process and health outcome measures. A report out on that work will be shared with the group by DOH State epidemiologist at the May External Advisory meeting.</li> </ul>	<ul style="list-style-type: none"> <li>-ACH representatives will serve as bi-directional liaison for their regions and <i>also</i> bring their personal/professional expertise to this group and the project</li> <li>-DOH will provide regular updates on measurement and an in-depth sharing when we convene in May</li> </ul>
<b>Communication and Web presence</b>	<ul style="list-style-type: none"> <li>- Laura shared the new P4IPH web presence on the Healthier Washington web page, which includes a link to the Prevention Framework, P4IPH Summary, and FAQ. The FAQ page will be updated regularly in response to emerging questions/issues as the work progresses. Members suggested that rosters/purpose statements of the internal/external advisory groups be posted, as well as meeting notes.</li> <li>- Many have requested a graphic/visual illustrating the different entities working on Health Transformation and how the different work groups relate. Laura shared a draft document that is in list form at this stage, noting it is a complex project being worked in collaboration with HCA and it will take time to produce a document that best serves the partners/stakeholders. Members asked if a matrix could be developed, so partners could see where there is overlap.</li> <li>- Laura shared that she is working with Communication leads from HCA and DSHS on a glossary of frequently used terms, many of which are defined differently by different agencies, to develop a set of common definitions.</li> </ul>	<ul style="list-style-type: none"> <li>-DOH will update website and send link to members.</li> <li>-DOH will provide communication materials as they are developed, beginning with a “starter graphic” of how this work relates to all of Healthier Washington</li> </ul>
<b>Strategy, structure</b>	<p><b>Reviewed P4IPH Requirements and Timeline:</b></p> <ul style="list-style-type: none"> <li>- Clarified that SIM requirements are non-negotiable but that categories of key considerations/questions about the process are negotiable; differentiated staff responsibilities from the contributions of this group, which center on Goals, Objectives, Strategies and Interventions.</li> <li>- Noted that regarding the requirement to identify current population health efforts, EAG members would email relevant background materials and resource information to DOH</li> <li>- Reviewed timeline illustrated in template, with specific milestones for each quarter of 2016, and</li> </ul>	<ul style="list-style-type: none"> <li>-</li> </ul>

January 27, 2016

	<p>noted those points most pertinent to work of this group.</p> <p><b>Reviewed Prevention Framework Objectives</b></p> <ul style="list-style-type: none"> <li>- Discussed use of Prevention Framework objectives and the key considerations under each as a structure (per template) for small work groups to identify next steps and recommendations</li> <li>- Facilitated work session of writing/sharing out: What works? What doesn't? What's missing? What changes are recommended to this approach? Much discussion of whether the Objectives, the Focus Areas, or the key considerations should serve to identify work groups</li> </ul>	
<b>Continued discussion of proposed workgroups</b>	<ul style="list-style-type: none"> <li>- Members agreed that small groups would be most productive, and would base them on the four Prevention Framework objectives, with understanding that there would be natural overlap</li> <li>- Agreed that small work groups could pull in additional members from the Interagency Advisory and/or local/state experts to contribute to the small group efforts</li> <li>- Small groups will meet 2-3 times between this meeting and the next External Advisory meeting, which will be held in late March or early April</li> <li>- Small groups will share out at the large group meeting</li> <li>- Additional large group meeting will be held in May, with the specific intent of including Cathy Wasserman, DOH (title?) and possible other AIM team members to discuss measurement</li> </ul>	
<b>Identification of key themes</b>	<ul style="list-style-type: none"> <li>- What is unique about this work: long term investment- need universal and targeted strategies</li> <li>- Focus on the community level, and how state can best support</li> <li>- Grant deliverables are the starting point, beginning with identification of current efforts and resources</li> <li>- The bigger purpose is to develop strategies that will make a difference and that will not be addressed by HCA's project list.</li> <li>- Measurement must include short-term outcomes, and process outcomes that chart progress</li> <li>- Need structure for communication among partners and out to communities</li> <li>- Reference the ACH priorities/projects and the Medicaid Waiver applications</li> <li>- All focus areas need to be mindful of upstream approach and health equity</li> </ul>	
<b>Next steps – meeting dates</b>	<ul style="list-style-type: none"> <li>- Members will identify resources, best/promising practices for DOH to compile</li> <li>- Members will identify preferences for small group work</li> <li>- DOH will coordinate small group connections and convening of larger External Advisory</li> <li>- Roster will be updated and, with permissions, posted on website</li> <li>- Meeting notes will be posted on website</li> </ul>	