

Governing Board Meeting – May 5, 2022, 1:00pm – 4:00pm (Virtual)

MEETING GOALS

The objectives of today's meeting are to: (1) discuss updates to HealthierHere's (HH) equity definition and guidelines, (2) review the Governing Board's annual equity and anti-racism plan, (3) receive an update on HH's 501c3 finances, and (4) receive an update on the region's COVID response.

AGENDA

1:00 pm	1) Land Acknowledgement	<i>Kyle Schierbeck, Board Member</i>
1:05 pm	2) Welcome & Introductions <ul style="list-style-type: none">• Meeting Goals/Agenda	<i>Shelley Cooper-Ashford & Jeff Sakuma, Board Co-Chairs</i>
1:10 pm	3) Board Business <ul style="list-style-type: none">• Approval of April Meeting Minutes• CEO Report	<i>Shelley Cooper-Ashford & Jeff Sakuma, Board Co-Chairs</i> <i>Susan McLaughlin, HealthierHere</i>
1:25 pm	4) Centering Equity	<i>Board Members</i>
1:35 pm	5) HH's Equity Definition & Guidelines <ul style="list-style-type: none">• Overview• Small Group Discussions	<i>Marya Gingrey & Abriel Johnny, HealthierHere</i>
2:20 pm	6) Governing Board's Equity & Anti-Racism Plan	<i>Shelley Cooper-Ashford & Jeff Sakuma, Board Co-Chairs</i>
2:35 pm	Public Comment	
2:40 pm	Break	
2:45 pm	7) Finance <ul style="list-style-type: none">• Update on 501c3	<i>Thuy Hua-Ly, HealthierHere</i>
3:10 pm	8) Regional COVID-19 Update	<i>Marguerite Ro, Public Health Seattle & King County</i>
3:15 pm	Adjourn	

Next Meeting: June 2, 2022, 1:00 pm - 4:00 pm (virtual)
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Governing Board Meeting Summary

April 7, 2022, 1:00 p.m. – 3:15 p.m.

Video Conferencing

Members Present: Andrea Yip (delegate for Seattle/King County Aging & Disability Services), Amber Casey (delegate for Hepatitis Education Project), Betsy Lieberman (Betsy Lieberman Consulting), Daniel Malone (Downtown Emergency Service Center), Elizabeth Tail (Cowlitz Indian Tribe), Jeff Foti (Seattle Children's Hospital), Jeff Sakuma (City of Seattle), Kristin Conn (Kaiser Permanente of WA), Kyle Schierbeck (Unkítawa), Lisa Yohalem (HealthPoint), Marguerite Ro (Seattle-King County Public Health), Mario Paredes (Consejo Counseling and Referral Service), Roi-Martin Brown (Washington Community Action Network), Semra Riddle (Sound Cities Association), Shelley Cooper-Ashford (Center for Multicultural Health), Steve Daschle (Southwest Youth and Family Services), and Tricia Madden (Harborview Medical Center).

Members Not Present: Ceil Erickson (Seattle Foundation), Esther Lucero (Seattle Indian Health Board), Genevieve Caruncho-Simpson (United Healthcare Community Plan), Giselle Zapata-Garcia (Latinos Promoting Good Health), Leo Flor (King County Department of Community and Human Services), Nwando Anyaoku (Swedish), and Yusuf Bashir (Falis Community Services).

Staff: Abriel Johnny, Alexis Desrosiers, Christine Berch, Graeme Aegerter, Jaspreet Malhotra, Lisa Watanabe, Marya Gingrey, Michael McKee, Monica De Leon, Sara Standish, Susan McLaughlin, Tavish Donahue, Thuy Hua-Ly, and Christina Hulet (Consultant).

Guests: Barbara de Michele (delegate for Sound Cities Association, Eli Kern (PHSKC), Hali Willis (Sound Cities Association), Jocelyn Tzintzun (Consejo Counseling and Referral Service), Lois Bernstein (MultiCare), Michael Arnis (HCA), Siobhan Brown (CHPW), Sue Eastman (Eastman Strategies), and Travis Grady (Cowlitz).

Governing Board Meeting

The Governing Board meeting, including board members, delegates, and the public, was called to order at 1:06 pm.

Land Acknowledgment

The meeting began with a land acknowledgment from Semra Riddle.

Welcome & Introductions

Susan McLaughlin welcomed everyone, and Jeff Sakuma reviewed the agenda.

Board Business

Approval of the Minutes from March 3, 2021

The board reviewed and approved the March 3rd meeting minutes.



Abstentions from Shelly Cooper-Ashford.

Chief Executive Officer's Report

Susan McLaughlin reviewed the CEO report. See page 5 of the pre-read packet for details. Susan focused on the MTP renewal updates. Highlights included:

- Semi-annual report number eight (SAR 8) was approved; HealthierHere earned 100 percent of our P4R.
- We submitted our first P4R update report for the current waiver year 6 extension.
- Provided updates, including items approved by CMS, for the 6th year of the waiver.

Governance

Decision Memo: Governing Board Local Public Health Seat:

Shelly Cooper-Ashford referred to the decision memo on page 16 of the pre-read packet regarding the Governing Board's Local Public Health seat. This seat was vacated by previous board member Patty Hayes upon her retirement. The local public health seat is "reserved" to Public Health-Seattle & King County (PHSKC) to nominate its preferred candidate. The County recommended Marguerite Ro to serve on our board.

The board unanimously voted to approve Marguerite Ro to the Governing Board Local Public Health Seat.

Equity Moment

Daniel Malone led the Board's equity moment. Daniel talked about an opportunity that came to DESC. United Way of King County sponsored a live talk by author Clint Smith. Mr. Smith writes for the Atlantic and has a recent book focused on our current culture. DESC saw this as a great opportunity for staff and bought 100 tickets for staff from different departments within the organization to attend the event. During the event, a local participant, Dr. Ralina Joseph from the University of Washington, agreed to work with DESC on equity work and communications.

Renewal Waiver Update

Michael Arnis from the Health care Authority reviewed the MTP Project Renewal. Below are highlights:

- Reviewed key dates for the MTP renewal
- Reviewed and discussed the 3 goals of the MTP renewal:
 - Expanding coverage and access to care, ensuring people can get the care they need
 - Advancing whole person primary, preventive, and home and community-based care
 - Accelerating care delivery and payment innovation focused on health-related social needs
- Some services will likely require 1115 authority and funding; these distinctions will be finalized during negotiations with CMS



- Reviewed and discussed health-related services and ACH partnerships, and the role ACHs and Community Hubs will play

Michael concluded his presentation and answered questions from the group. Susan discussed next steps.

Public Comment

No comment.

Annual Review of Equity Metrics

Susan McLaughlin introduced Alexis Desrosiers from HealthierHere and Eli Kern from Public Health—Seattle King County (PHSKC). Alexis provided a background on the Equity Measures in the Pre-Read packet. The Governing Board set eight topic areas, with specific measures for each area. Alexis shared key themes that were not able to be included in the initial equity measures and the reasons behind that. Eli Kern reviewed the clinical data. Alexis also discussed the operational data.

Following the presentation, the group was divided into breakout rooms to discuss: 1) What do you notice about the changes (or lack thereof) among the measures? Any surprises? Any patterns/themes you notice? 2) How do these results impact your thoughts about HealthierHere’s 2022/2023 investments? Do they provide further support? Do they create any questions? and 3) What could/should we be doing collectively to improve upon the system level measures?

After the breakout sessions, Susan McLaughlin encouraged members to share their thoughts in chat. Susan discussed next steps. HealthierHere will take the information gathered from the breakout discussions and create a summary.

Regional COVID Update

Eli Kern provided an update on the region’s COVID-19 response:

- COVID -19 community level in King County is low
- 1.1 million over the counter tests have been distributed by PHSKC
- FDA approved a second booster dose for those aged 50 years and older
- Vaccination continues to protect against hospitalization and death

Shelly Cooper-Ashford and Jeff Sakuma thanked the presenters and concluded the meeting.

The meeting adjourned at 3:25 pm.

May 2022 Executive Report

Date: May 5, 2022

To: HealthierHere Governing Board

From: Susan McLaughlin

Dear Governing Board Members:

Welcome to the month of May! May is Mental Health Month to bring awareness to mental health issues and the impact they can have on individuals, families, and communities. Mental Health Month was established in 1949 to increase awareness of the importance of mental health and wellness in our lives, and to celebrate recovery. As we know, mental health is *essential* for a person's overall health and well-being. Prevention works, treatment is effective, and people can recover and live full and productive lives. Sharing stories of recovery and talking about the importance of mental health is critical in combating stigma and especially critical today as the extended impacts of COVID-19 continue to impact the mental health of millions of people. Our community is in crisis, and we need to continue to invest in treatment and a robust, well-resourced workforce so that anyone who needs support can access it in a timely way. For more information and resources, check out the NAMI website: [Mental Health Month | NAMI: National Alliance on Mental Illness](#)

As the Health Care Authority (HCA) continues to shape the framework for the 1115 Medicaid waiver renewal, HealthierHere has been facilitating convenings with our partners and committees to overview the waiver renewal and gather input and feedback on the different components. To date, we've had over 100 participants join us across 4 meetings and share their thoughts. In your Pre-Read packet, you will find a summary of the types of feedback collected so far, including some of the questions our community members and partners have as well as what they like about the components, and what concerns them the most. Across the board, partners are generally excited about the potential for continued funding and focus on health system transformation and equity. We will be submitting the feedback we've received directly to the HCA and look forward to the DRAFT application to come out on May 12th for public comment. As we continue to receive more information, we will be talking with the Governing Board about the implementation and implications for HealthierHere and our work.

In the meantime, enjoy reading about all the happenings at HealthierHere. This month we onboarded three new staff, built new partnerships to help advance health literacy, and have received recognition for some of the great work we have been doing to center equity and transform how we think about and deliver care.

I look forward to seeing you all on Thursday May 5th.

Susan

HealthierHere Welcomes Three New Staff to Our Team

HealthierHere is growing and we are pleased to welcome Heeju Suh, Bethlehem Kebret, and Maria Escalera Maldonado to the team.

Heeju Suh joins our team as a Data Strategy Manager. She will support the implementation of HealthierHere's data strategy portfolio – with a focus on strengthening the organization's data management operations and expanding the use of data to inform our work. Heeju has a background in data analysis and process redesign to make internal business processes easier while uplifting local communities. Her career experience includes Medicaid claims and eligibility data analysis and SQL programming at DESC, and finance, supply chain and security ERP technology consulting with PwC. She studied Mathematical Methods in the Social Sciences ("MMSS") at Northwestern University and enjoys learning human and programming languages. She resides in South Seattle where she stewards an epic garden and the happiest chickens on Earth.

Bethlehem Kebret joins our team as a Health Transformation Program Manager. She will support implementation of HealthierHere's health reform innovations funded by the City of Seattle, as well as several of the Community/Tribal innovations. Bethlehem has worked in community health helping community members enroll in Medicaid and Qualified Health Plans and navigate healthcare access while at HealthPoint through the AmeriCorps program. She has also served as a mental health case manager at DESC. She completed her bachelor's degree in medical Anthropology and Global Health at the University of Washington. Most recently, she comes to HealthierHere following the completion of an MPA in Health Policy and Management at NYU, as well as experience in healthcare operations at the Weill Cornell Medicine at New York Presbyterian where she applied her education, project management skills, and interests in continuous improvement. She brings a wealth of lived experience and expertise to HealthierHere and is committed to equity, social justice, and addressing health disparities. In her spare time, she enjoys reading, cooking/baking, exploring new places and doing yoga.

Maria Escalera Maldonado joins our team as a Health Transformation Program Manager. She will support implementation of HealthierHere's Health Literacy Project, a multi-year grant funded by Public Health – Seattle & King County. Maria comes to us with years specializing in working with diverse and multi-system organizations. Mostly recently, Maria was working at Sea Mar Community Health Center as a Behavioral Health Coordinator where she worked administratively to deliver high quality, integrated care for BIPOC and underserved communities. Prior to that, Maria spent years providing linguistic and educational support to LatinX agricultural workers, empowering them to navigate L&I claims, and pursue H2A agricultural visa programs. Maria brings incredible expertise and passion for centering equity, transforming systems, and improving health literacy across the region.

Please join us in welcoming these new team members to HealthierHere!

Washington's Integrated Care Assessment (WA-ICA) Launches

Last fall HealthierHere was contracted to provide backbone support for the implementation and rollout of the new [Washington Integrated Care Assessment \(WA-ICA\)](#) by HCA, the 5 MCOs, and the other 8 ACHs across the state. The WA-ICA developed from a [pilot effort](#) in 2020 and 2021 to coordinate integration efforts statewide and select an integration assessment to replace the MeHAF. The WA-ICA was selected in mid-2020. It is based on two continuum-based assessment tools developed in New York State by Dr. Henry Chung and colleagues, summarized in these reports: [Continuum-based Framework for Behavioral Health Integration into Primary Care](#) and [Continuum-based Framework for General Health Integration into Behavioral Health](#).

HealthierHere has been leading this effort in partnership with and on behalf of HCA, the ACHs, and the MCOs – supporting and facilitating stakeholder meetings, updating the tool itself, adding supplemental demographic and qualitative questions, developing a thorough implementation guide and FAQ, coordinating communication efforts and planning with the other ACHs, and creating a provider-facing [website](#) to host information and supporting materials and resources. We are excited to share that the WA-ICA was formally launched in late April, with an invitation going out to an initial cohort of 400 practice sites from all 9 ACH regions who have prior experience with the MeHAF assessment. These practice sites, which include outpatient primary care and behavioral health clinics, will be invited to complete the assessment this summer. Participation is voluntary but highly encouraged. We look forward to sharing more updates about the success of this effort in the future.

HealthierHere Working with 28 Partners to Advance Health Literacy in King County

After several months of outreach, engagement and a procurement process, HealthierHere selected 28 partners, including 26 community-based organizations and 2 federally qualified health centers, to advance health literacy in King County. Approximately 45 percent of the partners selected are new to HealthierHere, and we are thrilled to expand our network and reach. Over the next 14 months, partners will disseminate culturally responsive and health literate information about COVID-19 to communities disproportionately impacted by the pandemic. This project aims to improve the system of developing and disseminating COVID-19 health information and will do so by centering community voice to ensure those closest to the problem are closest to the solution. Partners will work closely with HealthierHere and Public Health – Seattle & King County (PHSKC) to co-design a Health Literacy Training curriculum, a Health Literacy and Sustainability Plan, participate in project evaluation activities, and co-facilitate health literacy training sessions in PHSKC and healthcare settings.

This effort is funded by the Advancing Health Literacy to Enhance Equitable Community Responses to COVID-19 project, which is resourced through the federal Office of the Assistant Secretary for Health and the Office of Minority Health. The Health Literacy Project is currently funded through July of 2023.

HealthierHere Receives Recognition for Our Support of Traditional Medicines

We are pleased to share that the *Last Real Indians* media chose to highlight and write an article about HealthierHere's Traditional Medicines Investments and decolonizing work. The *Last Real Indians* is a local Native news media that has covered large Native news events such as the "Idle No More" movement, the "NO DAPL", and the XL Keystone Pipeline roadblocks. The editors include well established Native Community leaders such as Matt Remle who was the author of Seattle's Indigenous People's Day resolution and was awarded Seattle's Individual Human Rights Leader Award in 2014, the National Indian Education Association Educator of the Year Award in 2017 and named one of Seattle's most Influential People. *Last Real Indians* chose to write about HealthierHere because of our authentic community engagement and centering Tribal values in the approach to defining "In good Health." *Last Real Indians* They hope to write a series of articles about HealthierHere's 2021-2022 Traditional Medicines Investments and highlight each of the Native-led Native Serving organizations partnering with HealthierHere and their Traditional Medicines projects. You can read the article here:

<https://lastrealindians.com/news/2022/3/22/di5250e2sz1us7n2ipaxifwlbv8g8f>

HealthierHere Invited to Present Connect2 Community Network at National Webinar Series

HealthierHere has been invited to be a part of a panel at an upcoming Social Determinants of Health Information Exchange Learning Forum hosted by the [Office of the National Coordination](#) (ONC). The forum brings together health care providers, community-based organizations, government, payers, health information exchange networks, IT platform developers, innovators, and other partners to share lessons learned, promising practices, and challenges related to exchanging SDOH data. The ONC is offering monthly webinars and smaller group sessions between March and July 2022 that will cover topics such as governance, technical structure, interoperability, financing, and policy considerations. HealthierHere will present on Friday, May 13, 10:30 am – 12 pm PT and will share its experience building a community-led governance structure with this national audience. Registration for the event can be found here:

<https://www.healthit.gov/news/events/oncs-social-determinants-health-information-exchange-learning-forum>

Free Continuing Education (CE) Opportunities for Behavioral Health Providers

The Washington legislature passed House Bill 1504 in 2021, including resources to support continuing education courses for licensed behavioral health providers working with children and adolescents, organizations employing behavioral health providers, and partners who work with these professionals anywhere in Washington state. The resources were contracted to the North Sound ACH, to develop the

trainings on behalf of all 9 ACHs. In June 2022, four live webcast trainings will be provided with free CEUs to eligible providers. The June 2022 trainings include:

- **Trauma & Attachment in Children and Families** | June 3, 8 a.m. to 4 p.m. [More information](#)
- **Treating Anxiety Disorders in Children & Adolescents** | June 9-10, 8 a.m. to 4 p.m. each day [More information](#)
- **Trauma-informed CBT for Children & Adolescents** | June 17, 8 a.m. to 4 p.m. [More information](#)
- **Dialectical Behavior Therapy (DBT)** | June 22-23, 8 a.m. to 4 p.m. each day [More information](#)

All trainings are board-accredited for the following licensed providers in Washington state: Counselors, Social Workers, Psychologists, Marriage & Family Therapists, Addiction Counselors, Physicians, and Psychiatrists.

[Register here](#) by **May 26** to secure your spot! Please pass this information broadly to interested and appropriate colleagues. Questions? Please email Team@NorthSoundACH.org.

Washington State Legislative Youth Advisory Council Looking for Members

The Washington State Legislative Youth Advisory Council (LYAC) is looking for members ages 14 to 18 years old to influence tangible legislative change at the state level. If you know or work with young people who are interested in making a difference, please share this opportunity. This year's **APPLICATION WINDOW CLOSES ON MAY 15th**.

Here's a note from Adar and Carissa from LYAC, along with the link to the application:

Hi, this is Adar and Carissa. We are seeking 14–18-year-old members from a wide variety of geographic, political, and socioeconomic backgrounds who are interested in applying to become members of the Washington State Legislative Youth Advisory Council (LYAC). LYAC members have the opportunity to influence tangible legislative change at the state level. We are looking for passionate young people who want to make change within the state. We need youth who are willing to step-up and take the reins to encouraging other young people to become more civically engaged. If you are going to be an 8th-10th grader in the 2022-2023 school year, please fill out the application form prior to MAY 15th!!! Thank you so much for your interest, and we look forward to seeing your application!! <https://www.walyac.org/student-application>

If you have questions about LYAC, please send a note to Ryan Jackson at the Office of Lt. Governor at ryan.jackson@ltgov.wa.gov. You can find other information about LYAC online. Here is the weblink from the Office of Lt. Governor: <https://www.ltgov.wa.gov/legislative-youth-advisory-council>

**HealthierHere Partners and Committees
1115 Medicaid waiver renewal
Summary of Feedback and Input**

Clinical, Community, Tribal partner meeting (Partner Meeting)
Indigenous Nations Committee (INC)
Finance Committee (FC)
Community and Consumer Voice Committee (CCV)

Community Members & Organizations Represented

AIMS Center; Atlantic Street Center; AZISWA; Center for Multicultural Health; CISC; City of Seattle – Aging & Disabilities Services; Community Health Plan of Washington; Congolese Integration Network; Consejo Counseling; Cowlitz Indian Tribe; DESC; El Centro de la Raza; El Comite; Evergreen Treatment Services; Falis Community Services; HEP; King County Behavioral Health and Recovery Division; Kin On; LCF; LCSNW; Living Well Kent; Mercy Housing Northwest; Mother Africa; MultiCare; Nakani Native Programs; Navos; Neighborcare Health; Neighborhood House; Peer WA; Port of Seattle; Project Access NW; Public Health – Seattle & King County; Seattle Children’s Care Network; Sea Mar; Seattle Housing Authority; SCORE Jail; Sisters in Common; Solid Ground; Sound; Sound Generations; Southwest Youth and Family Services; Tlingit Nation; Unkitawa; UPower; United Indians of All Tribes; UW Medicine/Valley Medical Center; Villa Comunitaria; Virginia Mason Franciscan Health; WaCAN; ZACUSA Community

What is one question you have about Washington’s 1115 Medicaid waiver renewal?

1. Most people were looking for a general overview of the renewal waiver and how it will be similar/different to the current waiver
2. There were several questions about how specific programs (i.e., FCS, duals) and/or populations (i.e., pediatrics, LatinX) might be impacted by the renewal waiver
3. Participants wanted to know how they or their organization can help the waiver be a success
4. Participants wanted to know how the waiver renewal aligns with other state transformation efforts (i.e., multi-payer primary care initiative)
5. Many had questions about the likelihood of approval and timing of various aspects of the waiver (i.e., public comment, approval)
6. Some wanted to know how the renewal waiver could be used to further fulfill the federal trust responsibility

The majority of participants feel good about the renewal waiver concepts as presented by the HCA

Zoom poll: “How well will the renewal waiver components improve people’s health and well-being?”

	Partner Group	Indigenous Nations Committee	Finance Committee	Community & Consumer Voice Committee
A Little	0%	0%	0%	0%
A Good Start – Needs some work	21%	73%	43%	27%
Sounds Pretty Good	63%	27%	57%	67%
Love it! Sign me up	17%	0%	0%	7%

Question 1 “What has worked well under the current waiver and should be preserved?”

- Whole-person integrated care and coordination
- Collaborations and partnerships
- Innovations
- Capacity building for CBOs and linking our efforts together to address SDOHs
- Flexible funding
- Focus on equity
- Providing a space for communities and Native/Indigenous people to guide the work and share in decision making

Question 2: “What excites you about waiver renewal”

- Continued LTSS Benefits
- Continuous Coverage options
- Community Based Care Coordination/ACHs as the HUB
- Increasing access to housing
- Continued focus on social determinants of health
- Integration of equity
- Continuation of the work/transformation, including additional funding
- Continuing the work with HealthierHere and urban Indians, tribes and other partners/partnerships

Question 3 “When you look at the renewal package, what concerns do you have about it?”

- Is this going to be another change, so things remain the same?
- What plans do you have if they don’t approve the renewal? Is there a plan B?
- Workforce capacity
- What is being done to sustain the current transformation
- Funding: will there be enough and how will it be allocated
- The need for more role clarity and decision making among HCA, ACHs, and MCOs
- How the community hubs will work, necessary workflows, and will there be support and training to advance care coordination efforts
- Mental health was not a priority for this renewal waiver
- Dental coverage for all not included
- How will it address racism as a public health crisis?
- How will communities, especially non-English speaking, Native/Indigenous people, and Tribes, be involved in shaping the work?
- What are the mechanisms for long-term sustainability?
- Data sovereignty

Question 4 “What else would you like Health Care Authority to know?”

- Include community voices, including Native/Indigenous people from the very beginning of this planning process
- How will you ensure that we can measure through story and non-clinical work such as with Traditional Medicine?
- The only way to properly address an issue is to fully understand it. Go in with the intention to learn, not fix
- Keep partners informed of the approval process
- Think about sustainability strategy after the waiver, both financial and new benefit structure
- Take responsibility for the racism, sexism, classism in the systems; recognize that white supremacy culture created the inequities in healthcare, housing, employment, incarceration, etc.
- Sounds like some great work has been put into this continuation and renewal waiver
- The dedication of the team spearheading the renewal effort shows me HCA has the best interest of all people in Washington
- Workforce gaps and capacity will continue to limit/impede transformation efforts: we need livable wages within the industry, especially behavioral health
- Funding mechanisms and resources available to address SDOH will continue to be needed to meet the need/demand
- It would be great to continue to support programs already initiated through the ACHs and sustain the gains beyond the five years
- The MTP work has made a difference in our communities!

Who	Purpose	Highlights	What's Next
Governing Board (GB, Board)	<ul style="list-style-type: none"> Steward the organization's overall mission and strategic plan Assume fiduciary responsibility/single point of accountability, including financial decision-making authority for demonstration projects and fund allocations Hire, fire and evaluate the Executive Director (ED) Maintain updated operating agreements and bylaws Monitor organizational and project performance Appoint Governing Board members Represent and communicate HH's work to the public Review and approve consumer/community engagement plan Ensure alignment with regional health needs and priorities 	<p>April 7 Agenda:</p> <ul style="list-style-type: none"> Approve appointment to the local public health seat Review and discuss the Health Care Authority's 1115 Medicaid waiver renewal concepts Review and discuss updated equity metrics and how the data informs our system transformation work Receive an update on the region's COVID response 	<p>May 5 Agenda:</p> <ul style="list-style-type: none"> Review and discuss updates to HealthierHere's equity definition and guidelines Review and discuss the Governing Board's annual equity and anti-racism plan Received an update on HealthierHere's 501c3 finances Receive an update on the region's COVID response <p>Next Meeting: June 2</p>
Executive Committee (EC)	<ul style="list-style-type: none"> Support the ED in achieving organizational goals Oversee ED selection, compensation, and evaluation Act on behalf of the Governing Board in cases of emergency or when urgent decisions are needed Approve expenditures/contracts between \$100-\$500K not included in the board-approved budget as needed Oversee board member recruitment and selection process 	<p>April 8 Agenda:</p> <ul style="list-style-type: none"> Follow up discussion and next steps for 501c3 governance planning and board evolution Review updated draft of HH Equity and Anti-Racism plan, modified based on board input Review topics and cadence for upcoming HH board meetings and connection to equity plan 	<p>Agenda:</p> <ul style="list-style-type: none"> Review final 2022/2023 Equity & Anti-Racism Plan based on board input and Decision Memo for board approval Review and discuss input from CCV, INC, and other partners for policy items

Who	Purpose	Highlights	What's Next
	<ul style="list-style-type: none"> Oversee board governance (e.g., committee structure, bylaws) Support HH's future sustainability and the development of key initiatives such as the Equity & Wellness Fund Approve state-required reports 	<ul style="list-style-type: none"> Review recommended next steps for updating HH Equity Definition and Guidelines, recommend changes, and confirm board guidance Review May board agenda 	<ul style="list-style-type: none"> Discuss Waiver public comment response, including board comment, as appropriate <p>Next Meeting: May 13</p>
Finance Committee (FC)	<ul style="list-style-type: none"> Oversee HH's budgeting, financial monitoring, internal control processes and financial policies and procedures Ensure adequate protection of HH's assets Oversee distribution of funds to partnering organizations and for investment priorities Ensure HH is meeting requirements for state, provider, and other contracts Oversee/coordinate with Funds Flow Workgroup Facilitate value-based payment 	<p>April 21 Agenda:</p> <ul style="list-style-type: none"> Receive the MTP 1115 Medicaid Waiver renewal presentation from HCA and provide input and feedback on the concepts 	<p>Agenda: TBD</p> <p>Next Meeting: May 19</p>
Community & Consumer Voice Committee (CCV)	<ul style="list-style-type: none"> Proactively engage communities and beneficiaries to co-design and embed equity in HH's work Engage and support community-based organization (CBO) partners and build CBO capacity Actively recruit and support community members serving on the Board/committees Provide input into and help design the community engagement plan Gather data/information on the experience of Medicaid members 	<p>April 25 Agenda:</p> <ul style="list-style-type: none"> Receive the MTP 1115 Medicaid Waiver renewal presentation from HCA and provide input and feedback on the concepts Receive an update on the Equity Response Teamwork 	<p>Agenda: TBD</p> <p>Next meeting: May 23</p>

Who	Purpose	Highlights	What's Next
Indigenous Nations Committee (INC)	<ul style="list-style-type: none"> Monitor results and ensure accountability/transparency with communities Proactively engage American Indian/Alaska Native/Indigenous (AI/AN/I) community and beneficiaries to co-design and embed equity in HH's work Engage and support AI/AN/I serving community-based organization (CBO) partners and build CBO capacity Actively recruit and support AI/AN/I community members serving on the Board/committees Provide input into and help design the tribal engagement plan Gather data/information on the experience of Medicaid members Monitor results and ensure accountability/transparency with community 	April 20 Agenda: <ul style="list-style-type: none"> Receive the MTP 1115 Medicaid Waiver renewal presentation from HCA and provide input and feedback on the concepts 	Agenda: <ul style="list-style-type: none"> Discuss HH's Equity Measures Next Meeting: May 18
Washington Care Coordination Collaborative	Supports statewide implementation and optimization of a care coordination information-sharing platform (e.g., Collective Platform) by bringing ACHs, providers, and Managed Care Organizations (MCOs) together to: <ul style="list-style-type: none"> Identify and/or develop effective information-sharing workflows, within and across care settings, for improved support of care coordination Support wider and enhanced use of the care coordination platform 	April 25 Agenda: <ul style="list-style-type: none"> The steering committee continues to meet biweekly through April to plan the details for reconvening the larger collaborative in May and scheduling learning opportunities through 2022. 	Agenda: <ul style="list-style-type: none"> The larger collaborative will reconvene in May to review the updated charter and hear about plans for learning opportunities related to Collective Medical in 2022. Next Meeting: May 23

Who	Purpose	Highlights	What's Next
	<ul style="list-style-type: none"> Support standard protocols for the collection and use of data within the platform Support standard protocols for data governance Identify/develop standard processes for coordination of care across providers and provider types Provide opportunities for shared learning across ACH regions Ensure related protocols, processes, and workflows are developed in HIPAA-compliant manner 		
Connect2 Community Network Workgroups	<p>Community Information Exchange (CIE) Collaborative:</p> <ul style="list-style-type: none"> Collaborative members will work together to establish a community-led governance structure and guide the development of a CIE <p>Network Partners Workgroup (NP):</p> <ul style="list-style-type: none"> Develop shared long-term CIE requirements and implementation plan in consultation with Legal Framework and Data & Technology Workgroups <p>Legal Framework and Data and Technology Workgroups (LDT):</p> <ul style="list-style-type: none"> Develop shared long-term CIE requirements and implementation plan in partnership with Network Partners Workgroup 	<p>April 26 Agenda:</p> <ul style="list-style-type: none"> Connect2 Community Network hosted the Unite WA Workgroup on April 26. Participants built relationships and learned about other providers in the network and engaged in peer learning on the topic of consent. 	<p>Agenda:</p> <ul style="list-style-type: none"> Joint learning session with HealthierHere's community partners. <p>Connect2 Community Network will be presenting at the VSHSL Summit on May 11 with community partners.</p> <p>Next Meetings:</p> <ul style="list-style-type: none"> C2C Network: May 6 Presenting at the VSHSL Summit: May 11

Who	Purpose	Highlights	What's Next
<p>Integration Assessment Workgroup</p>	<p>Supports statewide implementation of a standardized tool to assess level of integration for outpatient primary care and behavioral health agencies. Includes representatives from HCA, MCOs, & ACHs to:</p> <ul style="list-style-type: none"> • Identify a tool to be implemented statewide • Make recommendations to HCA on implementation and timeline • Make recommendations to HCA on data collection, analysis, reporting, and data sharing • Make recommendations to HCA on quality improvement structure and areas of focus including training, TA, practice coaching, etc. to help providers advance along the continuum of integrated care • Oversee launch of WA-ICA 	<p>April 4 and April 18 Agendas:</p> <ul style="list-style-type: none"> • Discussed training and TA needs for providers. Presentations provided by invited guests including Comagine Health, UW AIMS Center, and Dr. Henry Chung. • Updated workgroup on communications plan, including upcoming WA Portal website launch. • Continued discussion on Training and TA planning for the state. 	<p>Agenda: TBD</p> <p>Next Meetings: May 2 and May 16</p>

Committee & Workgroup Rosters

Community & Consumer Voice Committee (CCV)

Meets the 4th Monday of each month at 1:30pm-3:30pm

Roi-Martin Brown	Washington Consumer Action Network
Joe Chrasti	IAF Northwest/Health Equity
Gladis Clemente	Promotora Comunitaria South Park
Shelley Cooper-Ashford	Center for Multicultural Health
Shantel Davis	Peoples Harm Reduction Alliance
Michelle DiMiscio	Community Health Workers KC
Lisa Floyd	KC Department of Community and Human Services
Dorothy Gibson	Sound Alliance/AF
Riham Hashi	Living Well Kent
Shamso Issak	Living Well Kent
Elizabeth Kimball	Public Health Seattle/KC
Guo Liao	Asian Counseling & Referral Service
AJ McClure	Global to Local
Hani Mohamed	SKC Public Health
Sonia Morales	Molina Health Care
Cicily Nordness	Seattle Housing Authority
Janelle Okorogu	Center for Multicultural Health
Hallie Pritchett	Lake Washington Institute of Technology
Isabel Quijano	Promotora Comunitaria South Park
Jihan Rashid	Community Member
Marguerite Ro	SKC Public Health
Julie Romero	Neighborhood House
Nadine Shiroma	Hepatitis B Foundation
Christine Stalie	DOH & Washington Immigrant Network
Michael Ninburg	Hepatitis Education Project
Laura Titzer	Northwest Harvest
Janet Zamzow Bliss	Community Member
Giselle Zapata-Garcia	Latinos Promoting Good Health

Staff: Marya Gingrey, Myani Guetta

Executive Committee (EC)

Meets the 3rd Friday of every month at 8:30am-10:00am

Shelley Cooper-Ashford (co-chair)	Center for MultiCultural Health
Steve Daschle	Southwest Youth and Family Services
Ceil Erickson	Seattle Foundation
Betsy Lieberman (chair Emeritus)	Affordable and Public Housing Group
Mario Paredes	Consejo
Jeff Sakuma (co-chair)	City of Seattle, Human Services Dept.
Elizabeth Tail	Cowlitz Tribal Health

Staff: Christina Hulet, Susan McLaughlin

Finance Committee (FC)

Meets the 3rd Thursday of each month at 3:30 pm- 5 pm

Roi-Martin Brown	WA Consumer Action Network
Janine Childs	Neighborcare
Steve Daschle (co-chair)	Southwest Youth & Family Services
David DiGiuseppe	Community Health Plan of WA
Ceil Erickson	Seattle Foundation
Pam Gallagher	Swedish Hospital
Travis Grady	Cowlitz Tribal Health
Stacy Kessel	Community Health Plan of WA
Hiroshi Nakano (co-chair)	Valley Medical
Mario Paredes	Consejo Counseling & Referral Service
Karen Spoelman	King County DCHS - BHRD
Jenny Tripp	DESC

Staff: Thuy Hua-Ly

Committee & Workgroup Rosters

Washington Care Coordination Collaborative (WCCC)

Meets monthly, typically Tuesdays

Kathie Olson	Molina
Katie Dowd	Collective Medical
Amy Sharrett	Community Health Plan of WA
Eric McNair Scott	Southwest ACH
James Cook	Community Health Plan of WA
Jenna Moody	Collective Medical
Jennie Harvell	HCA
Angelique Cardon	United Health Care
Kim Lepin	Southwest ACH
Kimberly Bjorn	Elevate Health
Amber Stokes	Coordinated Care
Lindsay Knaus	North Sound ACH
Lou Schmitz	American Indian Health Commission
Matania Osborn	Anthem
Martin Sanchez	Greater Columbia ACH
Naveen Shetty	King County
Rebecca Carbajal	Molina
Rena Cleland	Molina
Sarah Bolling-Dorn	Better Health Together ACH
Tina Seery	WSHA
Sam Werdel	Greater Columbia ACH
David Roehn	North Sound ACH
Erika Anderson	Collective Medical
Terri Brazelton	Amerigroup
Laureen Tomich	Elevate Health
Celeste Schoenthaler	Olympic Community of Health ACH
Christopher Chen	HCA
Bre Holt	Comagine Health
Christopher Chen	Health Care Authority
Rachel Leiber	Collective Medical
Suzanne Swadener	HCA
Steve Clark	Choice Regional Health Network
Caroline Tillier	North Central ACH
Wendy Brzezny	North Central ACH
Jenn Neumann	Multicare
Rajdeep	North Sound ACH
Amanda Bieber-Mayberry	Anthem
Nikki Lewis	Anthem
Angela Castro	HCA
Shane Deleuw	United Health care
Kimberly Studzinski	Collective Medical

Laura Kaster	Collective Medical
Jane Hanneken	Collective Medical

Staff: Michael McKee

Connect2 Community Network Advisory Group

Meets monthly

Tashau Asefaw	Community Health Plan of WA
Modester Chatta (co-chair)	Association of Zambians in Seattle, WA
Barbara de Michele (co-chair)	Issaquah City Council
Joanne Donahue	Sound Generations
Jon Ehrenfeld	Seattle Fire Department
Allie Franklin	Harborview
Michelle Glatt	HealthPoint
Donald Lachman	Westcare WA/WA Serves
Joceyln Lui	Asian Counseling & Referral Service
Sara Mathews	Premera
AJ McClure	Global to Local
Susan McLaughlin	HealthierHere
Peter Muigai	Pamoja Christian Church
Michael Myint	MultiCare
Gary Renville	Project Access Northwest
Michelle McDaniel	Crisis Connections
Marguerite Ro	Public Health – Seattle & King County
Lina Stinson-Ali	WA State Coalition for African Community Leaders
Sally Sundar	YMCA of Greater Seattle
Cody West	Peer Seattle
Kim Wicklund	Kaiser Permanente
Andrea Yip	Aging & Disability Services

Staff: Sara Standish, Christina Hulet

Committee & Workgroup Rosters

Indigenous Nations Committee (INC)

Meets monthly

Colleen Chalmers	Chief Seattle Club
Craig Dee	Fred Hutchinson
Matt EchoHawk - Hayashi	Headwater People
Travis Grady	Cowlitz Tribal Health
Camie Goldhammer	UIATF - Doula program
Sacena Gurule	Cowlitz Tribal Health
Christian Hogan	Unkitawa
Leslie Jimenz	KC Public Health - Environmental Health
Jessica Juarez-Wagner	United Indians Of All Tribes Foundation
Ellany Kayce	Nakani Native Program
Esther Lucero	Seattle Indian Health Board
Sara Marie Ortiz	Highline Public Schools - Native Education
Kyle Schierbeck	Unkitawa
Ka'imi Sinclair	WSU – Native Partnerships
Jeff Smith	Nakani Native Program
Elizabeth Tail	Cowlitz Tribal Health
My-le Tang	Dept of Commerce - Tribal Homeless Youth
Raven Twofeathers	
Ixtli White Hawk	Unkitawa

Staff: Abriel Johnny

Integration Assessment Workgroup

Meets the 1st Monday of each month at 2:30pm- 4 pm

Liz Baxter	North Sound ACH
Dee Brown	United Health Care
Miranda Burger	Olympic Community Health
Jodi Castle	Elevate Health
Sylvia Gil	Community Health Plan of WA
Tory Gildred	Molina
Jennie Harvell	HCA
Susan McLaughlin	HealthierHere
Michael McKee	HealthierHere
Jessica Molberg	Coordinated Care
Nyka Osteen	North Sound ACH
Colette Rush	HCA
Caitlin Safford	Amerigroup
John Schapman	North Sound ACH
Audrey Silliman	Coordinated Care
Sharon Williams	United Health Care

Tri-Chairs: Tory Gildred, Susan McLaughlin, Colette Rush
Staff: Diana Bianco & Cathy Kaufman, Artemis Consulting

Equity: HealthierHere leads with equity. We work to intentionally eliminate disparities and build on strengths in health and well-being and address the current power dynamic and structural racism in our health care system that perpetuates inequities. We believe that every community member in King County should receive the type of care that they deserve - with respect and without stigma - to address their unique and individual needs. Consequently, HealthierHere only partners with Organizations that embrace equity, cultural responsiveness, and linguistically appropriate.

EQUITY GUIDELINES

We, the Governing Board of Healthier Here, Governing Board Committees and HealthierHere Staff, believe that transforming the health system to improve health and health equity in King County requires a collaborative effort that seeks to understand the causes of inequities in our current health system so that we may actively work to create a better future. Community members in King County are experiencing health inequities resulting from conscious and unconscious practices of underinvestment and disproportionate impact of communities arising from a legacy of institutional racism, implicit bias, discrimination, power and privilege operating within the United States and our health system. We acknowledge that the Institutions within the United States were built on practices of supporting white-supremacy, racism and colonialism which resulted in intended exclusion historical and culturally ongoing underinvestment and denial of community access and sharing of resources and overburdening within community.

Our efforts to eliminate health disparities are predicated on remembering that behind each data point is a person and the individual experience of that person must drive system transformation. We honor the collective wisdom of community and people working in community-based organizations and the health system who have a vested interest in transforming our current health system and have courageously committed to place equity at the forefront of the way that they work.

We acknowledge that equity is both a product (improving health outcomes) and a process (how we work together to improve health outcomes). Changing historical status quo methods needs to be replaced with the inclusion of relevant data and participation by community members and viewpoints not considered relevant in the past. Both are equally important and as we work to improve health outcomes, we must hold equity as a process and lens through which we evaluate our planning, decision-making, implementation and evaluation processes. Equity recognizes the different conditions, resources and capacity that people have and acknowledges

that people start at different places and have different needs. Consequently, equity is not a one-size-fits-all approach. It is individual, tailored and person centered.

We invite others to join in our effort to ensure that all community members in King County have an opportunity to live longer, healthier, more fulfilling lives.

HOW WE WORK TO ELIMINATE DISPARITIES IN HEALTH AND WELL-BEING BY ADDRESSING EQUITY

We believe that these principles must be present as we work together in solidarity with others to eliminate disparities in the health system.

Education and Training: We recognize that the organizations involved in system transformation are comprised of individuals who act according to the best information that they have available. Consequently, we believe that providing equity and cultural responsiveness education and training to individuals within the health system as well as community-based providers and community members is an important foundation to achieving health system transformation. This education will not only provide individuals with the skills to apply an equity lens to their work, but the practical tools to influence organizational change, individual behaviors, practice transformation and improved patient experience.

Inclusion: We include the voices of those most impacted by health disparities in HealthierHere's design, planning and decision-making processes. This is done by being open and willing to listen, learn and act on what we hear from community.

Transparency and Accountability: We recognize that our actions are accountable to our community thus, we regularly share information and progress with community. HealthierHere will revisit its past activity to keep the organization relevant and honest.

Strength-based: We acknowledge the inherent strengths and resilience within community that contribute to an individual's health and well-being.

Resource: We provide community with the information, resources, access and connections, that they need to live longer, healthier, fulfilled lives.

Culturally Responsive and Linguistically Appropriate Services: We promote the development, and maintenance, of a health system where an individual's culture, community traditional practices, language, identity, beliefs and notions of health and well-being are viewed as strengths and assets to achieving better health outcomes.

HOW WE INCORPORATE EQUITY PRINCIPLES TO ADDRESS THE CURRENT POWER DYNAMIC AND STRUCTURAL RACISM IN OUR HEALTH CARE SYSTEM THAT PERPETUATE INEQUITIES

We believe that the following paradigms of thinking and processes in the way that we deliver care must shift if we are to eliminate health disparities.

Unintended Consequences: We recognize that decisions have the potential to carry benefits and burdens. Consequently, we consciously examine the potential impacts of our decisions to weigh the potential benefits and burdens to community before making those decisions.

Community as Experts: We acknowledge the collective power and wisdom of community and center community voice in driving system transformation efforts. We believe that incorporating the voices of people with lived experience in transformation efforts is essential to identifying and implementing sustainable practices to improve health outcomes and address health disparities.

Community Practice: We value the need to elevate. Recognize and protect the voices of front-line care workers in the workplace and in system transformation efforts to make care more effective for those experiencing the greatest health disparities in King County. These front-line staff, including community health workers, health advocates, peer support specialists, etc. serve as trusted advisors within community. They often share the identities of those they are serving and, as such, they are often the most knowledgeable about strategies and practices that are effective within community.

Collective Co-responsibility: We inspire collective action to address health disparities by bringing people within the health system together not from a place of blame, shame or guilt, but from a place of co-responsibility believing that when we know better we are co-responsible for doing better. We recognize that there are certain barriers for everyone doing this work and everyone has a responsibility to do what they can, where they are, to come together and work to eliminate those barriers together.

Practice-Based Evidence: We acknowledge that most Evidence-Based Practices are not normed for all members of our community. Thus, we see the need for equitable recognition of practice-based evidence within our health system.



**HealthierHere Governing Board Equity and Anti-Racism Plan – Draft 05/05/22
2022**

The HealthierHere Governing Board recognizes that equity and anti-racism work happens at the individual, organizational, societal and system level – that it starts with the individual journey and that we are all in different places on that journey. We also recognize that equity is both a process and a product and we will hold both perspectives as we work together.

Activity	Frequency
<p>1. ADVANCE EQUITY IN OUR INVESTMENT STRATEGIES AND MEASURE RESULTS:</p> <p>A) Invest in organizations aligned with equity & anti-racism work and use incentives to move organizational change</p> <p>B) Review and refine equity dashboard metrics (what have we learned); discuss what is needed in our region to improve outcomes and how to leverage HH work to advance the metrics</p>	<p>Quarterly presentations on investment strategies and associated equity outcomes</p> <ul style="list-style-type: none"> • Q1: Clinical transformation/whole-person care (March) • Q2: Non-profit finance fund (June) • Q3: Care coordination/C2CN (July/August) • Q4: Workforce (October) <p><i>Ties to Activity #3 below regarding community voice (e.g., elevating partner stories)</i></p> <p>April: Annual review of equity metrics dashboard</p> <p>TBD: Review equity metrics dashboard when additional 2021 data is available</p> <p><i>The Board is committed to more frequent review/discussion of equity outcomes. In addition to the annual metrics review, the Board will review equity outcomes specific to HH’s investment strategies above. Our goal is to include equity metrics more deliberately into our existing work streams, such workforce capacity, the C2C Network, etc. This also includes using data/results from our community surveys to assess how HH is responding to issues raised by our communities.</i></p>

<p>2. ADVOCATE FOR POLICY & PAYMENT REFORM:</p> <p>A) Identify and advocate for specific initiatives for the 2023 legislative session (within the policy priorities approved by the board in Feb 2022)</p>	<p>May-August: Board, Executive Committee and community partner discussions (e.g., INC, CCV, C2CN Advisory Group) on specific policy items for 2023 legislative session</p> <p>September: Panel discussion with local legislators to discuss advancing equity next session (e.g., Cody, Keiser, Chopp, Macri)</p> <p>October: Executive Committee develops recommendation on specific policy item(s) for 2023 session; Board refresher on HH’s policy guidelines & board roles (possible training by Vic Colman)</p> <p>November: Board action on specific policy items for 2023 session</p> <p>Winter – Periodic updates to the Board on progress; individual board members/ organizations to assist with advocacy</p>
<p>3. ELEVATE COMMUNITY VOICE INTO OUR DECISIONS AND PRIORITIES:</p> <p>A) Update HH’s equity definition & guidelines based on CCV & INC recommendations</p> <p>B) Co-create/redesign with CCV, INC, C2CN and other partners ongoing mechanisms for the board to hear directly from and connect with community partners</p>	<p>May: Board discussion of CCV & INC recommendations on equity definitions & guidelines, including action steps</p> <p>September/October: Board review and approval of updated equity definitions & guidelines (following ongoing collaboration and feedback between the Executive, INC and CCV Committees throughout the summer)</p> <p>Spring/Summer – Executive Committee/staff to solicit feedback from CCV and INC on how to improve communication and partnership between committees and the Board (e.g., periodic updates, opportunities for more committee involvement in Board decisions, engaging committees in identifying specific policy priorities for 2023 legislative session)</p> <p>Ongoing – Elevate community voice and committees in the board’s discussions of its workstreams (e.g., workforce, C2CN)</p> <p><i>Also ties to Activity #1 above regarding investment strategies and metrics</i></p>

4. LEARN FROM AND BE ACCOUNTABLE TO ADVANCING EQUITY IN OUR OWN ORGANIZATIONS:

- A) Individual board members to present how they are embedding equity and anti-racism into their own organizations

April, July, November - Presentations by select board members on how they are advancing equity in their own organizations

May entail separate presentations or incorporated into the board's equity moment. Equity moments may also include updates on individual action plans.

HealthierHere Governing Board Meeting – February 3, 2022
Small Group Discussion: HealthierHere Equity and Anti-Racism Planning

SUMMARY / MAIN THEMES

Evaluate progress & measure results

- One of the most consistent themes was about our equity metrics, namely....
- That we review our equity measures and measure our progress more frequently
- Use data to identify health disparities and determine action steps
- Coupled with many questions about how we measure impact (e.g., When is the next equity metrics report? How do we measure the impact of our investments? etc.)

Policy & advocacy

- Overwhelming support for HealthierHere to prioritize policy & advocacy work
- Identify specific policy work that focuses on equity & anti-racism
- Suggestions on specific policy areas to focus on: universal healthcare, payment reform to address workforce challenges, payment reform to support non-western, non-traditional medicine, licensure of foreign-trained/credentialed providers, social determinants of health, and affirmative action

Continue to have equity conversations as a board

- “There is value in repetition; what has kept equity priority here at HH going for the long time is that we spend a lot of time on it and create space for it.”
- Some suggested we continue the individual learning plans, others asked if we should
- Have the CCV brought into the GB in a better way; the GB has not utilized this resource well

Drive equity into our investment strategies

- Invest in organizations that are aligned with this work (e.g., fund institutions that advance anti-racism, fund providers that train their staff in white supremacy and who are proactively reducing harm with patients)
- Make health equity a core component in every strategic initiative
- Look for fundraising dollars/matches to HH’s equity and workforce investments

Enhance HH’s internal operations for equity

- Increase diversity/representation on the Finance Committee
- Continue to diversify our board and staff
- Follow-through on next steps for HH’s equity definition and guidelines work
- Use the C2C Network and CCV as resources to connect to the community

Community voice & storytelling

- Ensure voices of the community are at the forefront for the board
- Elevate the stories of the people that are impacted; make sure that they are heard
- Communicate the need to address disparities and advance anti-racism in health care; there’s not a lot of awareness/understanding about this issue with the public at-large

Bring equity work back to our respective organizations

- Important to spread HH's work "within our own institutions"
- Use our multi-sector table to bring equity & anti-racism work to other government, private and non-profit organizations
- Consider reviewing partner policies that might negatively impact equity
- Provide training & professional development to providers (e.g., training doctors in anti-racism)

Additional feedback

- HH really models how to address equity from an organizational level
- Focus on the future growth of CBOs and their relationship to the larger healthcare system; CBO stability is critical
- Study best practices and learn from others (e.g., what are other states doing regarding racism, sustainable financing, healthcare gaps?)

Glossary of Terms

ACH	Accountable Community of Health
AI/AN	American Indian/Alaska Native
AIM	Analytics, Interoperability, and Measurement, part of the Health Care Authority
AIMS	Advancing Integrated Mental Health Solutions, part of University of Washington
AMDG	Agency Medical Directors' Group
BHO	Behavioral Health Organization
BMI	Body Mass Index
BRFSS	Behavioral Risk Factor Surveillance System
CMS	Centers for Medicare & Medicaid Services
CBO	Community-Based Organizations
CCM	Chronic Care Model
CCV	Community/Consumer Voice Committee
CDP	Chronic Disease Prevention and Control Project
CDR	Clinical Data Repository
CEO	chief executive officer
CHARS	Comprehensive Hospital Abstract Reporting System
CHW	Community Health Worker(s)
CLS	Community Learning Sessions
CMCH	Center for Multi-Cultural Health
CMS	Centers for Medicare & Medicaid Services
DAST	Drug Abuse Screening Test
DCHS	Department of Community and Human Services
DPC	Demonstration Project Committee
DPP	Diabetes Prevention Program
DSHS	Department of Social and Health Services
DSRIP	Delivery System Reform Incentive Payment
DT	Design Team
DY1	DSRIP Year 1
ED	Emergency Department
EHR	Electronic Health Record
FIMC	Fully Integrated Managed Care
FFS	Fee-For-Service
FPL	Federal Poverty Level
FQHC	Federally Qualified Health Centers
GAD	Generalized Anxiety Disorder
G2P	Guidelines to Practice
HCA	Health Care Authority
HCP LAN	Health Care Payment Learning & Action Network
HHSTP	Health and Human Services Transformation Plan
HIE	Health Information Exchange
HIT	Health Information Technology
HKCC	Healthy King County Coalition
HUD	U.S. Department of Housing and Urban Development
IDC	Integration Design Committee
IHCP	Indian Health Care Provider

ILC	Interim Leadership Council
IOM	Institute of Medicine
IPT	Investment Prioritization
IT	Information Technology
ITU	Indian Health Service, tribally operated, or urban Indian health program
JAMA	Journal of the American Medical Association
KCACH	King County Accountable Community of Health
LEAD	Law Enforcement Assisted Diversion
LGBT	Lesbian, Gay, Bisexual, and/or Transgender
LOI	Letter of Intent
MAT	Medication Assisted Treatment
MCO	Managed Care Organization
MeHAF	Maine Health Access Foundation
MHIP	Mental Health Integration Program
MIDD	Mental Illness and Drug Dependency
MOU	Memorandum of Understanding
MTP	Medicaid Transformation Project(s)
MVP	Medicaid Value-Based Purchasing
ODU	Opioid Use Disorder
P4P	Pay-for-Performance
P4R	Pay-for-Reporting
PAL	Partnership Access Line
PCORI	Patient-Centered Outcomes Research Institute
PCP	Primary Care Provider
PHSKC	Public Health – Seattle & King County
PIMH	Partnership for Innovation in Mental Health
PMD	Performance Measurement and Data
PMP	Prescription Monitoring Program
PRISM	Predictive Risk Intelligence System
PSH	Permanent Supportive Housing
QBS	Quality Benchmarking System
RHIP	Regional Health Improvement Plan
RHNI	Regional Health Needs Inventory
SAMHSA	Substance Abuse and Mental Health Services Administration
SBIRT	Screening, Brief Intervention, and Referral to Treatment
SCORE	South Correctional Entity
SIHB	Seattle Indian Health Board
SIM	State Innovation Model(s)
SUD	Substance Use Disorder
TA	Technical Assistance
TSP	Transition Support Program
UIHI	Urban Indian Health Institute
US	United States
VBP	Value-Based Payment
VOCAL-WA	Voices of Community Activists and Leaders, Washington State Chapter
WAC	Washington Administrative Code
WSHA	Washington State Hospital Association
WSMA	Washington State Medical Association



Board Meeting Evaluation Form (also available online at [HERE](#))

On a scale of 1 to 10, how would you rate the quality of today's meeting?

What would it take to make it a 10?

COMMENTS (optional)