



Healthier Together Oregon

PartnerSHIP Meeting Minutes (Draft)

July 12th, 1:00 – 3:00pm

Meeting Objectives

- Follow up from June meeting
- Review results from initial survey
- Identify next steps

OHA staff, facilitation and interpreters

Nhu To-Haynes, Christy Hudson, Heather Owens, Liz Gharst, Cara Biddlecom, Lisa Rau

PartnerSHIP members

Timur Holove, Ian Winbrock, Kimberly Lane, Stan Baker, Connie Dillinger, Esther Kim, Alisha Overstreet, Rachel Schutz, Jess Gasper, Toc Soneoulay-Gillespie, Jenny Pool Radway, Dalia Baadarani, Kalli Morales, Amy Thuren, Susan Blane,

Welcome

Nhu welcomed everyone and mentioned that in upcoming meetings, the PartnerSHIP will be using the consensus decision-making model. She reminded everyone that OHA staff are not voting members, so all decision-making power is in the hands of the committee.

Consensus modeling

Nhu introduced a consensus decision-making activity. A proposal is made by a committee member, and then the committee responds.

- Thumbs up (I agree)
- Thumbs sideway (I have a question, comment, or need more discussion)
- Thumbs down (I disagree)

If after three rounds of voting and discussion, consensus is not yet achieved (where all thumbs are up), the 80/20 rule will be enacted.

The PartnerSHIP practiced use of this method for charter considerations.

Follow up from June Meeting

Charter development:

The PartnerSHIP still needs to make decisions related to:

- Use of quorums – how many people need to be present to make a quorum?
- Consensus-based decision making?
- Inclusion of public in meetings?
- Member expectations?

Proposal:

The suggestion was made to form a small work group to sort through the charter questions and flush out details of the charter. The final draft would be brought to the full PartnerSHIP for approval. A question was asked about the time commitment involved and whether it would be a facilitated discussion. Nhu said she has time in her schedule to facilitate and suggested meeting a minimum of two hours before the next full PartnerSHIP meeting.

Members who volunteered to participate on the committee:

Stan Baker
Amy Thuren
Susan Blane
Timur Holove
Rachel Schutz

(Two other suggestions were Ian Winbrock and Alisha Overstreet)

Nhu explained that a Doodle poll would be sent out so this group could meet and then bring an update back to the PartnerSHIP for the August meeting.

Proposed funding and finance committee:

A small group met July 9th for initial conversations related to funding and finance. Christy asked Stan Baker to report out from Friday's discussion. He said the group came to the decision that it would be helpful to have a funding and finance subcommittee, to bring funding topics to the greater committee and to advise them. A concern about staffing the meetings was mentioned, as well as the importance of a diverse membership. There was agreement to hold on formation of this group until after the full charter was approved and group was farther along in prioritizing the strategies. Nhu reflected and normalized feelings of questioning and uncertainty as group is forming and norming, especially as OHA is approaching their role in this group in a very different way, one that is about shared leadership and co-development.

Office hours:

Christy explained that a series of four open office hours were held for members to drop in and comment or ask questions about the committee. A few folks turned up to the last meeting and they had a good discussion. She asked if the group wanted to continue scheduling these meetings with OHA staff.

The question was asked if these meetings would ever be held in person, and Christy responded that the PSOB will open to the public on September 1, but an in person meeting could be held anywhere in

the state. There was a proposal for the group to meet in person; perhaps a half-day meeting with time for socializing and small group committee meetings. Carpools were suggested for members who live far from Portland. Nhu suggested an October meeting in Portland and use of a survey monkey to identify preferred time and location of an in person meeting.

Review and interpret initial survey results

At the last meeting, the PartnerSHIP was asked to prioritize some of the strategies of the committee through a survey. Break outs were used for members to share with one another how they felt about this initial process of prioritizing strategies. Comments from the breakout rooms included:

- Some of the language in the survey was hard for members to understand.
- Concerns related to acceptability of survey if used with broader community.
- Some prioritized strategies that were more foundational to other strategies – and that could be built upon.
- Might be helpful to bundle related strategies together
- Difficulty to prioritize given interrelatedness of topic areas.
- Understanding nuance of some strategies is important to prioritization process (for example- importance of payment reform within healthcare delivery)
- Need for foundational information across the implementation areas and strategies.

To address barriers/challenges raised, Nhu suggested:

- Additional learning spaces for priorities and strategies
- Formation of a smaller steering meeting to help guide group and processes

Christy next presented slides with the survey results. Thirteen people responded to the survey.

Overall importance of implementation areas:

1. Equity and Justice
2. Housing and Food
3. Healthy Communities

As a comparison, the top priorities from the 2018-2019 Community Engagement process were Housing (#1) and Mental Health (#2).

Strategies that were identified as most important by four or more respondents:

- Improve integration between behavioral health and other types of care.
- Implement standards for workforce development that address bias and improve delivery of equitable, trauma informed, and culturally and linguistically responsive services.
- Build upon and create BIPOC-AI/AN led, community solutions for education, criminal justice, housing, social services, public health and health care to address systematic bias and inequities.
- Increase affordable housing that is co-located with active transportation options
- Build a resilient food system that provides access to healthy, affordable and culturally appropriate food for all communities.

- Ensure access to and resources for affordable, high quality, culturally and linguistically responsive childcare and caregiving.
- Provide culturally and linguistically responsive, trauma informed, multi-tiered behavioral health services and supports to all children and families.
- Expand use of telehealth especially in rural areas and for behavioral health.

Strategies that were identified as least important by four or more respondents:

- Continue to strengthen enforcement of the Mental Health Parity and Addictions Law.
- Require that all public facing agencies and contractors implement trauma informed policy and procedure.
- Maximize investments and collaboration for food related interventions.
- Increase patient health literacy
- Ensure all school districts are implementing K-12 comprehensive health education according to law.
- Increase affordable access to high speed internet in rural Oregon.
- Use electronic health records to promote delivery of preventive services.

Members offered following responses/comments:

- Stan voiced concerns about usefulness of the survey results given only half of PartnerSHIP members took this initial survey.

Discussion: Identify next steps for prioritization

Members then discussed how they would like to proceed with prioritization process and what they need to feel confident in their selection. Themes arose related to additional input from community and additional need for information about the priorities and strategies.

- Concern was raised concerns about usefulness of the survey results given only half of PartnerSHIP members took this initial survey. Results may not be an accurate reflection of the PartnerSHIP as a whole.
- Desire for disparity related data within the priority areas, and data related to the specific strategies.
- A suggestion was made to take the survey monthly as more information is gathered. This would refine the choices until the most important emerge.
- Another suggestion was that each member find five representatives of their community and have them take the survey in order to get more overall data from a larger sampling. Survey Monkey can be used for this, or some other survey method. Kirt mentioned accessibility concerns related to screen readers if using Survey Monkey.
- How to approach interrelatedness/intersectionality of the strategies – difficult to prioritize when they're all connected.
- Especially difficult to identify strategies that are least important.

- Lack of continuity from past PartnerSHIP to this one -and stories/understanding of how decisions were historically made.
- Need to build trust among group members before making these decisions together.
- Liz Gharst mentioned she shared a 30 minute video on Basecamp that further defines the strategies and provides high level summary of their intent.
- Suggestion to devote next month's meeting to training and education of members.
- Christy gave a brief overview of Basecamp and how to navigate the resources that have been shared there.

Wrap up and next steps

Next meeting:

Monday, August 2nd from 1 pm - 3 pm

Results:

- OHA will start sending out a weekly summary regarding important information about PartnerSHIP and information that has been shared in Basecamp.
- Nhu will schedule a work group to finalize the Charter and bring back to the full group.
- OHA will tee up additional learning about priority areas and strategies for the August meeting.
- OHA will start planning for an in person meeting to be held this fall.

Reminders:

- PartnerSHIP members are eligible for compensation – invoice template is posted in Basecamp.
- Next HTO in Action is tomorrow, July 13th, 10 – 11:30am. Focus on Behavioral Health strategies.
- Please submit Conflict of Interest form to heather.r.owens@state.or.us.
- Please reach out to Nhu or Christy with questions or comments.