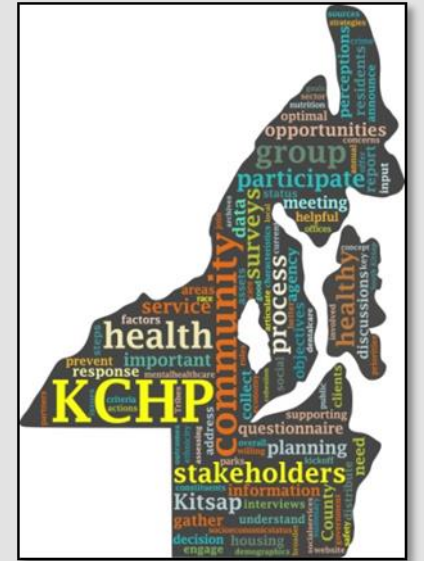# Kitsap Community Health Priorities Convening:
Community Health Improvement Planning

February 8, 2024

Norm Dicks Government Center, Bremerton

WELCOME

LAND ACKNOWLEDGEMENT

We gather on lands where Coast Salish peoples have long resiliently resisted the ongoing harms of colonialism. Let us continually ask how we are respecting the Tribes' sovereignties, rights to self-determination, and sacred connections to this place. In solidarity, we work with intention toward truth-telling reconciliation. Please center yourself in this context ...and in the following words from the Port Gamble S'Klallam and Suquamish Tribes.

nəxʷqíyt nəxʷsʔáyəmʼ
PORT GAMBLE S'KLALLAM TRIBE

from the Preamble to the Point No Point Treaty Council Constitution

...the Port Gamble S'Klallam and the Jamestown S'Klallam Tribes, of the Point No Point Treaty Area, recognize the responsibility and need to protect and advance the treaty reserved hunting, fishing and gathering rights of [their] Tribes.

[The Port Gamble S'Klallam and the Jamestown S'Klallam Tribes] further recognize that [their] inherent traditional and cultural rights constitute vital and irreplaceable resources for [their] future. These resources are essential for the social, cultural and economic self-sufficiency and well-being of [their] Tribal communities.

[The Port Gamble S'Klallam and Jamestown S'Klallam Tribes] believe that in unity and mutual respect [they] can best accomplish [their] community goals, not only for the benefit of Indian people, but for all people.

dxʷsəqʷəb
PLACE OF THE CLEAR SALT WATER

LAND ACKNOWLEDGEMENT STATEMENT

"Every part of this soil is sacred in the estimation of my people. Every hillside, every valley, every plain and grove, has been hallowed by some sad or happy event in days long vanished."
Chief Seattle 1854

We would like to begin by acknowledging that the land on which we gather is within the aboriginal territory of the suq̓ʷabš "People of Clear Salt Water" (Suquamish People). Expert fisherman, canoe builders and basket weavers, the suq̓ʷabš live in harmony with the lands and waterways along Washington's Central Salish Sea as they have for thousands of years. Here, the suq̓ʷabš live and protect the land and waters of their ancestors for future generations as promised by the Point Elliot Treaty of 1855.

SUQUAMISH TRIBE

Photo by Jon Anderson

ATTENDANCE

Community Based Organizations	Housing	Social Services	Healthcare
Government	Navy	Schools	Early Childhood
Public Health	Tribes	Philanthropy	Transit
Business	Civic Organizations	And More…

GOALS FOR TODAY

- Brief review of community health assessment and prioritization process

- Narrow in on priority wording

- Begin initial planning to address our 3 priorities in a 5-year Community Health Improvement Plan

- Discuss next steps

TODAY'S AGENDA

9:00 – 9:20	**Welcome + Introductions + Convening Overview**
9:20 – 9:35	**Data to Priorities: Review the Process**

- Community Health Assessment and Inputs
- Priority Selection

9:35 - 9:50	**Community Health Improvement Planning and Instructions**
9:50 – 10:50	**Rotations 1-3:**

- Existing/planned activities and resources
- Gaps/concerns
- Priority wording

10:50 – 11:10	**Break**
11:10 - 11:40	**Rotations 4-6:**

- Review and additional input.

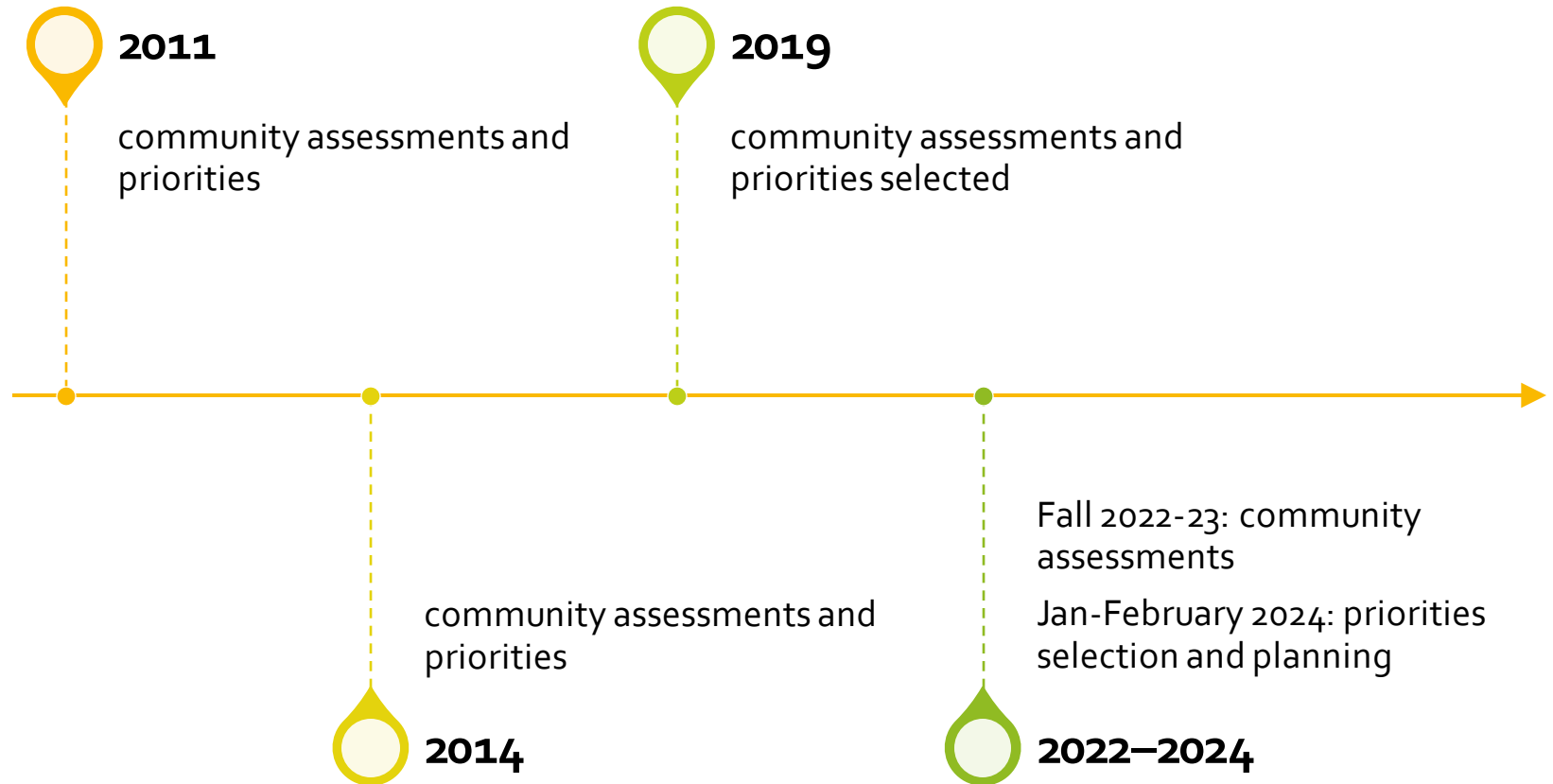|	
11:40 – 11:45	**Reveal Priority Wording**
11:45 – 12:00	**Evaluation and Next Steps**

Data to Priorities: Review the Process

KCHP HISTORICAL TIMELINE

2011

community assessments and priorities

2019

community assessments and priorities selected

2014

community assessments and priorities

Fall 2022-23: community assessments

Jan-February 2024: priorities selection and planning

2022–2024

COMMUNITY HEALTH ASSESSMENT (CHA)

- A report that identifies health trends, health disparities, and areas of concern based on publicly available data and community conversations

- KCHP CHA builds on other assessments by Kitsap Community Resources and St. Michael Medical Center

- There are many other assessments and planning documents developed by community and governmental organizations in Kitsap County

- The CHA leads to community health priorities that are tracked in a collaborative *Community Health Improvement Plan*

CHA DEVELOPMENT

4,205 community survey responses

120+ quantitative indicators

16 key informant interviews

10 focus groups

CHA TOPICS

Presented as chapters of the report and as 2-3 page fact sheets:

- Community Demographics & Social Determinants of Health
- Environmental Health
- Access to Healthcare
- Pregnancy & Births
- Mental Health & Wellbeing
- Health Behaviors
- Communicable Diseases
- Chronic Diseases
- Injuries, Hospitalizations & Deaths

Data summit & Open houses → key themes

DATA SUMMIT and OPEN HOUSES

Presentation of key findings from the CHA

Data Summit: September 26th

Data Open Houses: October/early November
Bremerton, Pt Orchard, Poulsbo, Silverdale, NDGC lobby, virtual

Request for written input to identify top issues

All written responses were compiled into high level themes

17 POTENTIAL PRIORITIES

1. Improve strategies and systems to ensure **basic needs** are met.

2. Improve opportunities for **education**.

3. Ensure **affordable and safe housing**.

4. Address and prevent **homelessness**.

5. Expand strategies to increase and improve options for **healthy eating**.

6. Expand strategies for community design to increase and improve options for **active living and transportation**.

7. Prepare for and minimize the impacts of **climate change**.

8. Address gaps in **healthcare access**.

9. Implement strategies to recruit and retain **healthcare workforce**.

10. Train healthcare workforce to provide **culturally relevant and inclusive services**.

11. Expand number of OB providers and options for **prenatal, perinatal, and postnatal care**.

12. Expand care options for **mental health and substance use disorders**.

13. Address and prevent **suicide and depression**, especially for populations disproportionately impacted.

14. Expand care options and prevention strategies for **communicable diseases, especially sexually transmitted infections**.

15. Increase awareness of **chronic disease prevention** strategies especially for populations disproportionately impacted.

16. Increase awareness of **injury prevention** strategies especially for populations disproportionately impacted.

17. Increase awareness of **accidental poisoning (drug overdose)** strategies especially for populations disproportionately impacted.
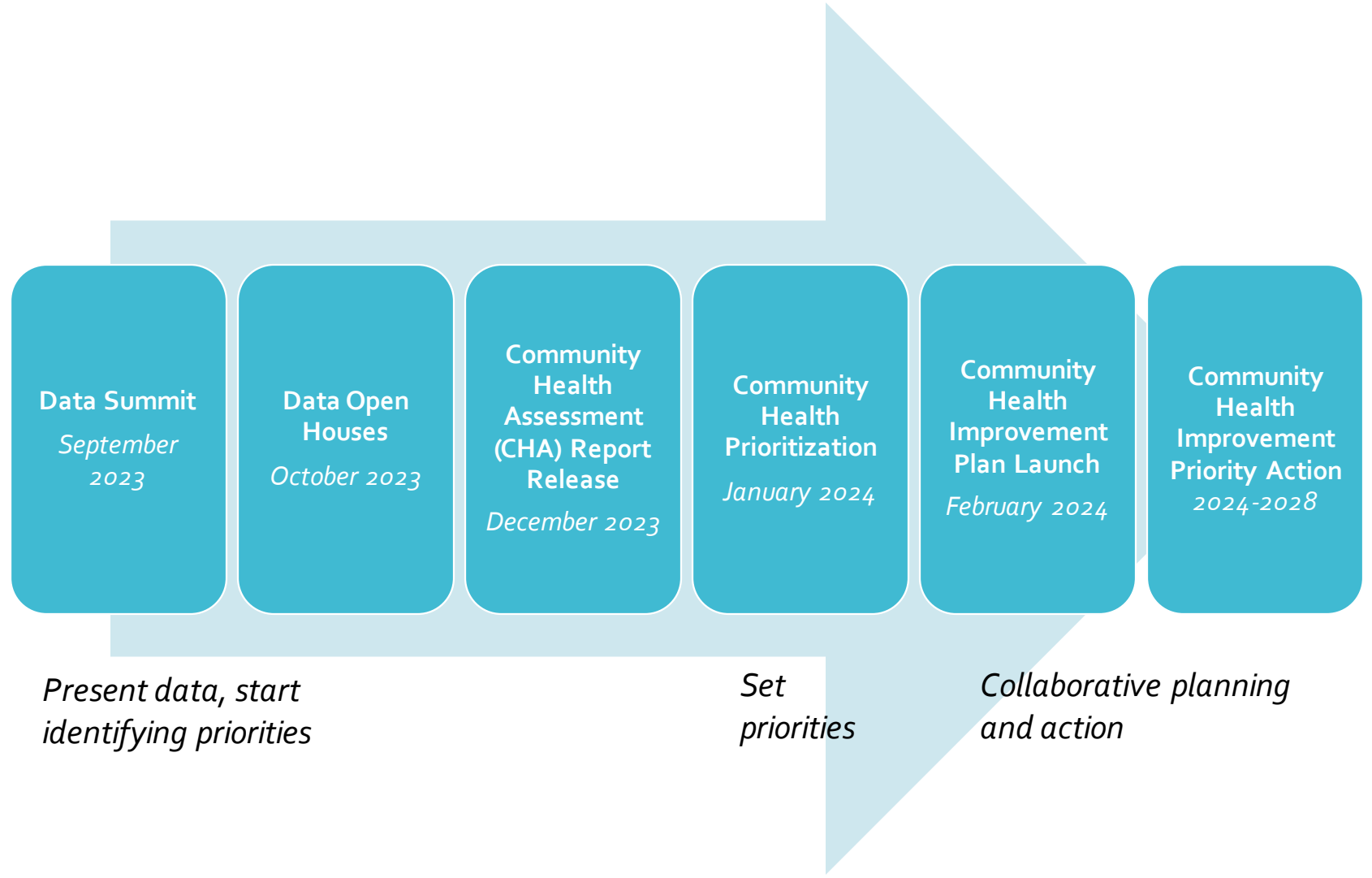
2024-28
Priorities

Emergent priorities from a 2-round voting process at the January 11th convening:
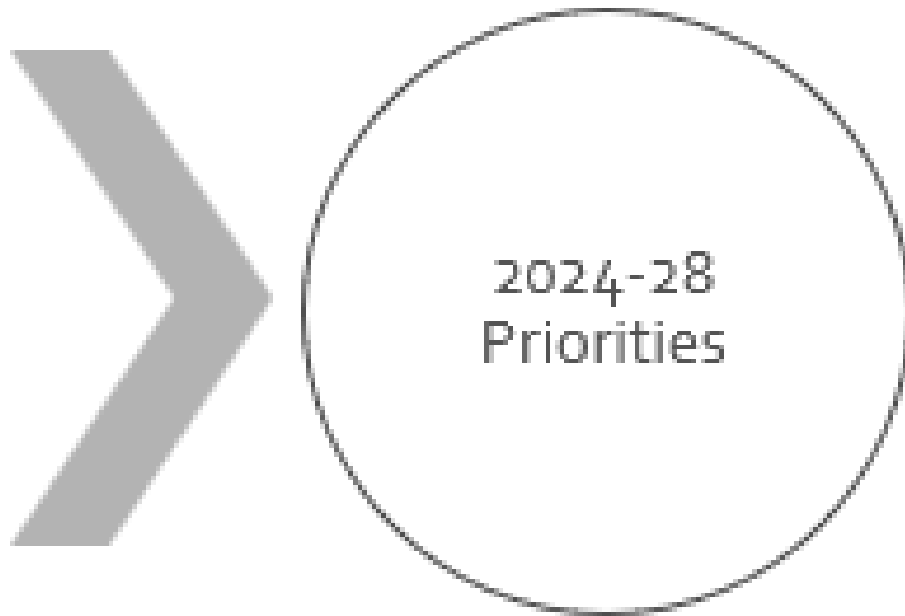
2024-2028 KITSAP COMMUNITY HEALTH PRIORITIES*

HEALTHCARE
- Address gaps in **healthcare access**
- Implement strategies to recruit and retain **healthcare workforce**

MENTAL & BEHAVIORAL HEALTH
- Expand care options for **mental health** and **substance use disorders**

HOUSING & HOMELESSNESS
- Ensure **affordable and safe housing**
- Address and prevent **homelessness**

NOTES ON LIMITATIONS

- Some topics don't have good sources

- Most data are several years old - more recent data are not available or preliminary and subject to change

- We can't always provide data for all subgroups for different reasons – small numbers, participation in data collection

- Differences and trends are identified with statistical methods

- Community conversations represent those who participated not representative of all people in Kitsap

FOCUS ON DETERMINANTS OF HEALTH

- A community health assessment must align with the reality that many things influence our health:

SOCIAL DETERMINANTS OF HEALTH

Economic stability

Neighborhood and environment

Education

Food

Community, safety, and social context

Healthcare system

Health and wellbeing

Source: Kaiser Family Foundation

- Social factors are things that we don't usually think are related to health but actually influence our health in significant ways!

- Improving social factors contributes to better health outcomes

- CHA has a Social Determinants of Health chapter and presents health indicators throughout the chapters by sub-groups

BASIC NEEDS AND EQUITY

Maslow's Hierarchy of Needs
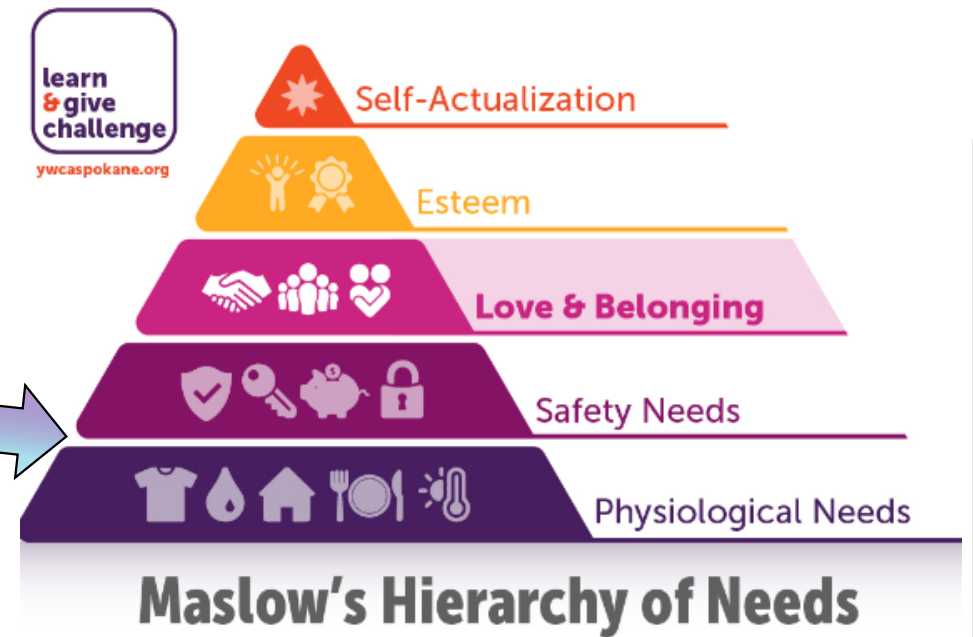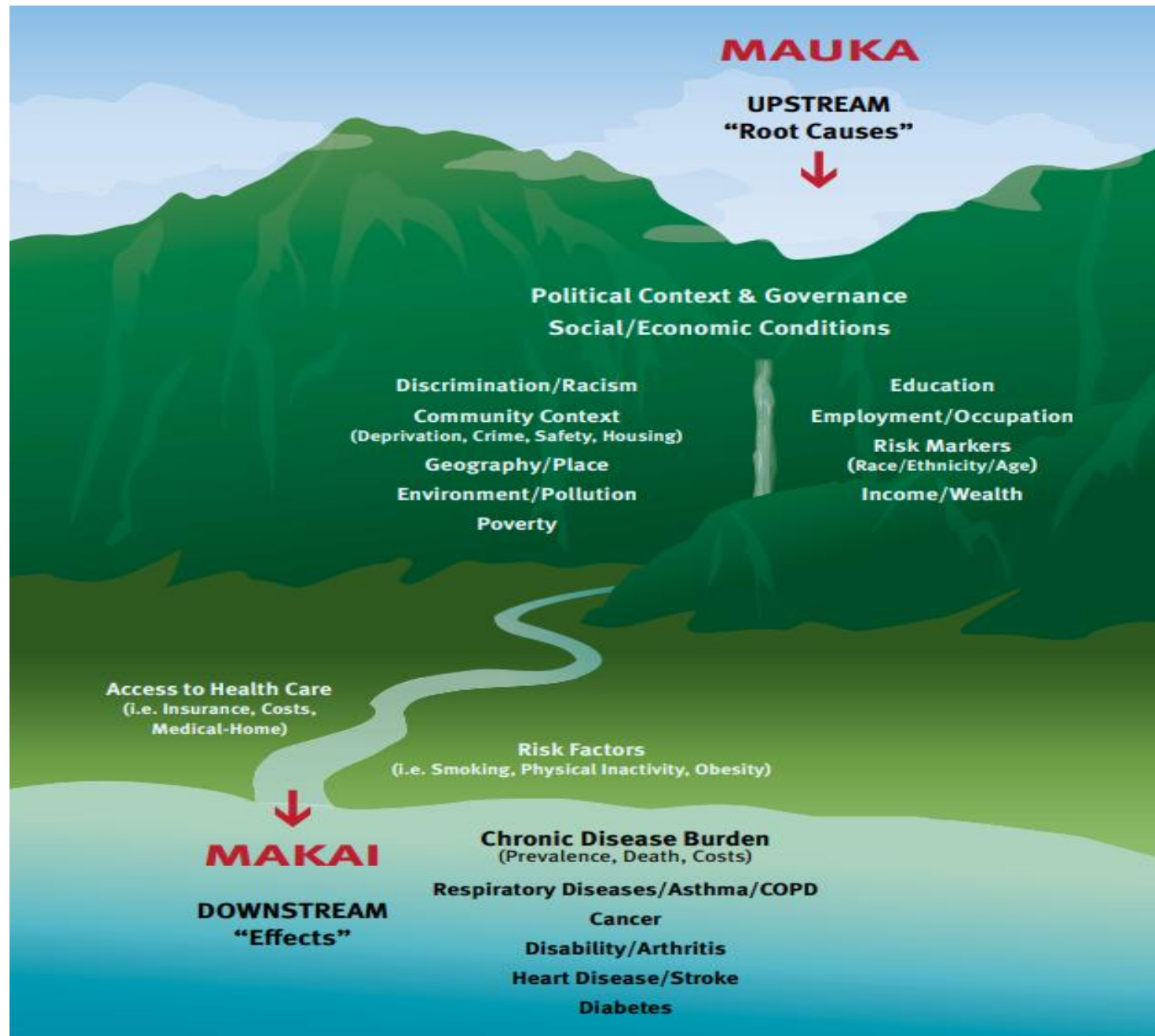
"**experiences such as food insecurity, inadequate housing, or being overworked disadvantage us in our quest to live well.** They present barriers that must be overcome, challenges that must be faced, and equate us with worry for the possibility of our most basic needs not being met, jeopardizing our first desire, to live."

"**People of color, including Native Americans, Black Americans, and Hispanic Americans are disproportionately affected by poverty.** Furthermore, racial wealth and income gaps … are present even when measures such as educational level are controlled for. This means that people of color, families of color, and communities of color, **as compared to their white counterparts, are more likely to experience barriers to their ability to live well.**

Focus on the entire stream

MAUKA

UPSTREAM
"Root Causes"

Political Context & Governance
Social/Economic Conditions

Discrimination/Racism
Community Context
(Deprivation, Crime, Safety, Housing)
Geography/Place
Environment/Pollution
Poverty

Education
Employment/Occupation
Risk Markers
(Race/Ethnicity/Age)
Income/Wealth

Access to Health Care
(i.e. Insurance, Costs, Medical-Home)

Risk Factors
(i.e. Smoking, Physical Inactivity, Obesity)

MAKAI

DOWNSTREAM
"Effects"

Chronic Disease Burden
(Prevalence, Death, Costs)
Respiratory Diseases/Asthma/COPD
Cancer
Disability/Arthritis
Heart Disease/Stroke
Diabetes

https://health.hawaii.gov/chronic-disease/files/2013/12/CD_BurdenReport_FINAL.pdf

Community Health Improvement Plan (CHIP)

Overview

WHAT IS A CHIP?

- A multi-year plan that identifies community-wide priorities set by participants in a community health assessment process

- Identifies strategies to address priority issues

- Describes community partner roles in collaborating to address the priorities

- CHIP is one plan – there are many community priority issues and efforts to address them

WHY DO A CHIP?

- Improve organizational and community collaboration and coordination
- Increase knowledge about community health data
- Increase understanding about the interconnectedness of activities
- Strengthen partnerships
- Align efforts on priority issues
- Develop and track benchmarks for community health improvements
- Monitor progress and share successes

PAST CHIP PRIORITY PROJECTS

2011:

- 5-2-1-0 Kitsap
- Project Access Northwest
- ACEs Partnership
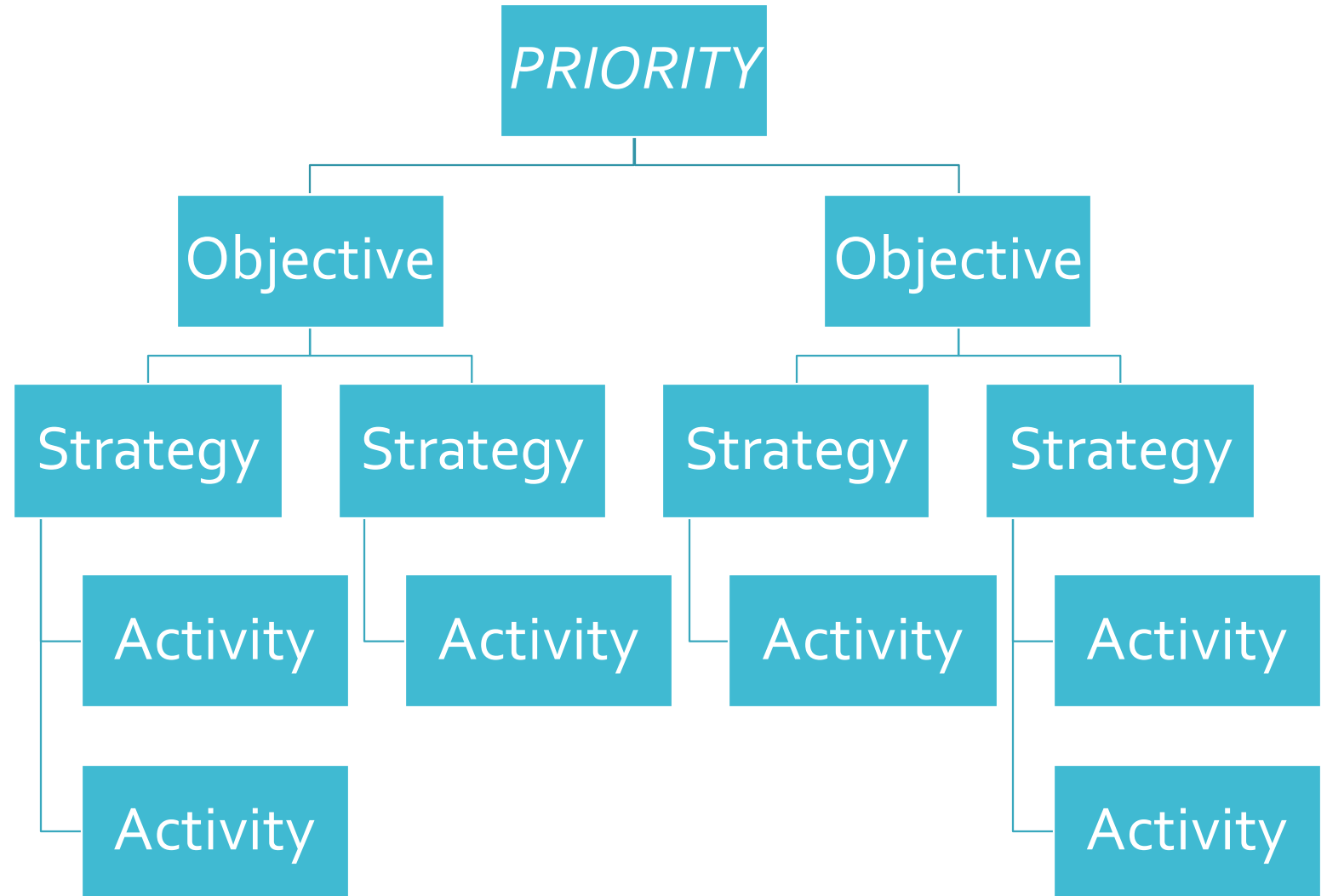- Ready! for Kindergarten
- Breastfeeding Support

2014:

- Healthy Eating Active Living (HEAL) Coalition
- Kitsap Strong
- Kitsap Connect
- Explore respite care options
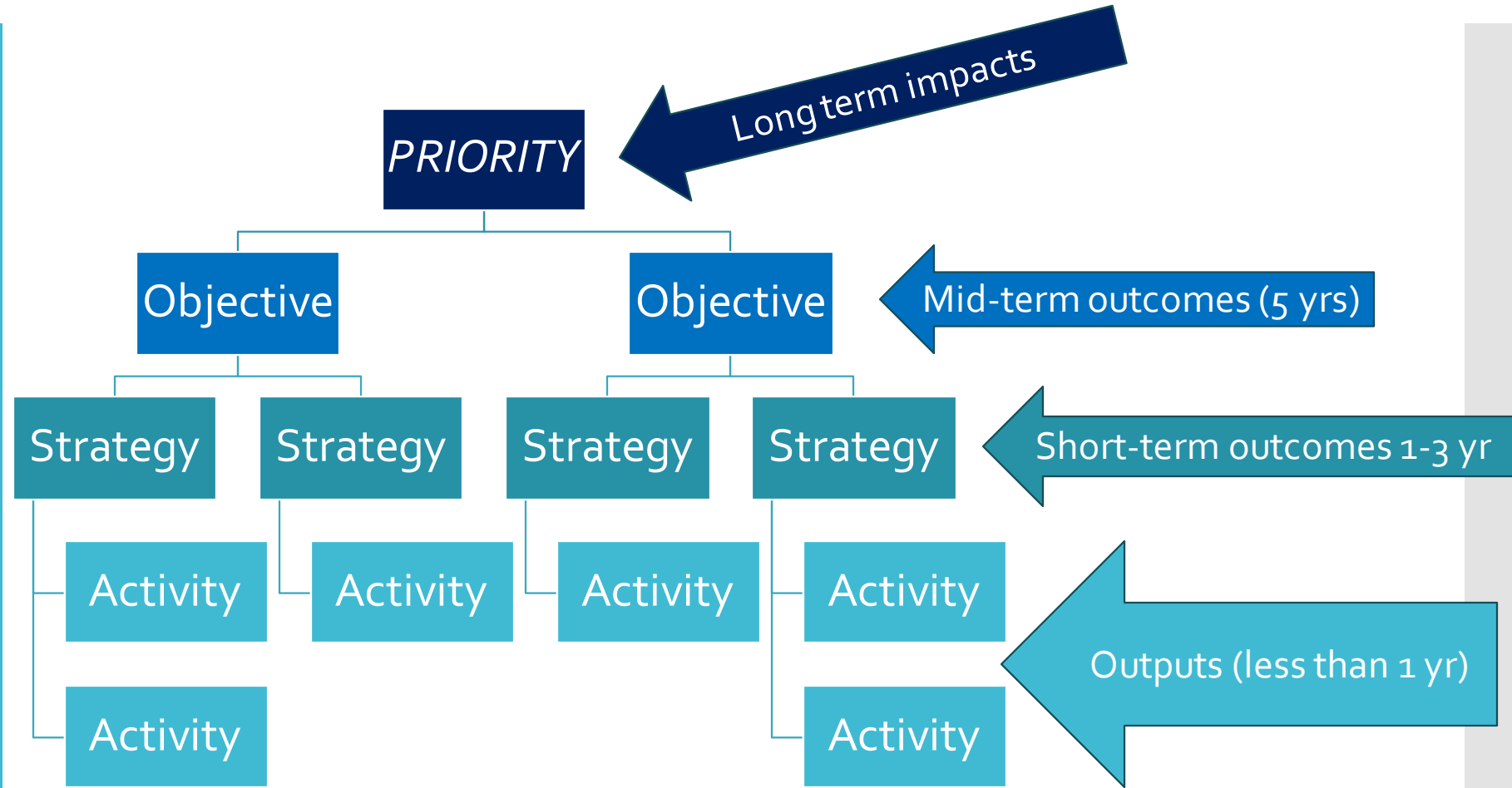
2019:

- *COVID disruption to project development*

CHIP STRUCTURE
HIGHLY SIMPLIFIED

PRIORITY

Objective — Objective

Strategy — Strategy — Strategy — Strategy

Activity — Activity — Activity — Activity

Activity — Activity

CHIP STRUCTURE WITH TIMEFRAMES
HIGHLY SIMPLIFIED

PRIORITY

Long term impacts

Objective — Mid-term outcomes (5 yrs)

Strategy — Short-term outcomes 1-3 yr

Activity — Outputs (less than 1 yr)

Develop evaluation metrics across levels to monitor implementation

FRONT OF MIND

- Understand your priority at all levels in the context of the determinants of health and inequities

- There are many, many priorities in our community and we are a strong, vibrant web of partners addressing many things in many ways already

- Focus on synergies, alignment, and partnership

- Peel back the layers, learn more, gather more data

- Start small

CHIP TIMELINE LOOKING FORWARD

Today
- Priority wording
- Current work, resources
- Concerns, gaps

March-October
- Priority group meetings
  - Build/strengthen partnerships
  - Develop a work plan with evaluation metrics
  - Initiate activities

November 2024 Convening
- Celebrate progress

2025-2028
- Priority action
- Annual convenings to celebrate progress

AT THE END OF 5 YEARS, WE WILL HAVE…

- Increased and strengthened partnerships and collaborations
- Access to a set of updated health indicators
- A completed work plan with evaluation results
- Activities that have resulted in measurable change

Plan for today

Priority wording and topics	• What is the best wording of the priority issue? • What sub-topics "buckets" can be identified within the priority?
Existing activities and resources	• What are existing or planned activities that align with the priority? • Does the priority show up in your strategic plan or organization priorities? • What resources does your organization have to address the priority?
Gaps and concerns	• What gaps exist in the community to address the priority? • What concerns you about being able to address the priority? • What data or stories are missing? Who is missing from today's convening?

THREE ACTIVITIES IN ROTATION

AT YOUR TABLES

- Sticky notes *<include your org name>*
- Poster paper
- Agenda/handout
- 17 potential priorities
- 9 topic fact sheets

- Table guides!

READY, SET, GO!

- Are you at a table? Is it the right table?

- If you need to be at a different priority table, please take a moment to reseat yourself

- If you need to be at more than one table, pick one for today
  - You can review and add to other priority posters at the break
  - You can mark more than one priority next to your name on the sign-in sheet by the door to be on more than one mailing list

Rotations 1-3

20 minutes each

Write on sticky notes; add to the poster; talk with your table; start to group similar sticky notes

BREAK – 20 minutes

Rotations 4-6

10 minutes each

Review what's on the poster; add more sticky notes; discuss with your table

Priority Wording Reveal…

Next Steps

MOVING FORWARD, WHAT TO EXPECT FROM KPHD

- Convene partners at least annually to celebrate progress
- Provide frameworks and tools to support CHIP priority work groups
- Participate in workgroups and the implementation of actions from the CHIP
- Document and evaluate CHIP process
- Maintain a KCHP website
- Update community health indicators; complete a Community Health Assessment in 2028

KPHD FOLLOW-UP FROM TODAY

- Send out a summary of today's Convening
- Post materials to the KCHP website
- Review evaluations and implement improvements
- Support the launch of priority work groups

EVALUATION

- Find the ½ sheet on your table and provide us with quick feedback on today's convening

KCHP Implementation Convening – February 8, 2024 – Feedback Survey

Please rate your level of satisfaction with the following:

	very satisfied	satisfied	neutral	dissatisfied	very dissatisfied
Overall convening					
Location					
Length					
Table activities					

What could we improve?

Please rate the opportunities in this process:

	strongly agree	agree	neutral	disagree	strongly disagree
I have access to updated community health data					
I have increased and strengthened partnerships and collaborations					

Share any other feedback you have about the Implementation Convening or the Kitsap Community Health Priorities process.

PRIORITY WORK GROUP NEXT STEPS

Let's move these priorities forward!

You will hear from us again soon with next steps for meeting within priority work groups – stay tuned!

Celebrate progress in November!

Please attend!

KCHP Progress Convening:

SAVE THE DATE

Thursday, November 14, 2024, 9 a.m. – noon

Location TBD

Any comments or questions can be sent to :

kchp@kitsappublichealth.org

Thank you for your contributions to the health of our community!

https://kitsappublichealth.org/information/KCHP.php