



WHATCOM COUNTY PUBLIC HEALTH ADVISORY BOARD MEETING MINUTES

MARCH 4, 2021

Present: Jake Anderson, Steve Bennett, Sterling Chick (Chair), Dr. Amy Harley, Lindsey Karas, Les Seelye, Leah Wainman
Absent: Barry Buchanan
Excused:

TOPIC	DISCUSSION/OUTCOME
Call to order	Roll call of Public Health Advisory Board (PHAB) Members
Approve Minutes	Les moved that the minutes from the January meeting be approved as presented. Lindsey seconded the motion. The board voted and the motion passed. Ayes: 5, Abstain: 1, Nay: 0
Public Comment	None.
Recruitment – Tribal Community Member/Tribal Govt	<p>The bylaws of PHAB say the board should be broadly representative of the character of the County and as such, it is important that we continue efforts to recruit a tribal member to serve on the board. This has special urgency now given that <i>The Bellingham Herald</i> has reported that members of the Lummi Nation and Nooksack Tribe have experienced three times the rate of COVID infection as the rest of the County. Multiple recruitment attempts have been unsuccessful, but we need to keep reaching out, documenting our efforts, and making our meetings as culturally inviting as possible. Our recruitment efforts should be clear about what PHAB does and why inclusion is important to the work of the Board.</p> <p>Tribal sovereignty issues should be kept in mind during this process. Lummi Nation is developing its own public health structure that reports to the tribal council, while PHAB advises the county health board, creating jurisdictional issues.</p> <p>Suggestions for outreach efforts included reaching out to the tribal schools to identify community organizers, asking the Lummi representative from Whatcom Unified Command for assistance, asking past PHAB members that represented tribal communities for assistance, and direct government to government outreach.</p>
Resolution on Racism	<p>The Resolution on Racism Subgroup has met once to discuss the resolution. Their discussion focused on:</p> <ul style="list-style-type: none"> • interpreting and applying the Resolution on Racism to PHAB’s work and processes, • creating a board that looks more like the community we represent, • making meetings more accessible and community based, • and increasing our engagement in deconstructing and dismantling systemic racism in Whatcom County. <p>The Subgroup is in the process of going through resources available on the GARE (Government Alliance on Race and Equity) website. The subgroup will be meeting again in a couple weeks. We have now been officially listed on the American Public Health Associations map of counties that have passed a racism resolution</p>



	<p>One area to address is the Board's recruitment process which has been a closed process and needs to become a more culturally appropriate recruitment process. Many in the community don't know what PHAB does and we could do better at communicating that.</p> <p>Some barriers to inclusion on the committee may be related to having the time and resources to participate. The Child and Family Well-Being Taskforce have found lack of reimbursement and childcare to be significant barriers to participation. It is important to remember that the context of this conversation is racism and that we can't conflate socio-economic status with race, as they do not always align. While we are working on getting wider representation, it is important to continue to listen to the needs of everyone in the community and bring their experiences to the meetings. Despite any barriers to participate in a committee like this, there are groups in our area with lots of diversity, and we need to rise to the challenge of diversifying this group by being more active in recruitment efforts.</p>
Vaccine Update	<p>Amy Hockenberry, Health Information Assessment Supervisor for the Health Department (and co-leader of vaccination planning), presented some slides with a vaccine update.</p> <p>Amy outlined some changes in vaccine distribution. There are three ways that the vaccine is coming into Whatcom County directly from the CDC/federal government, two of which are new within the last couple of weeks. One new distribution channel is a direct supply of vaccine to federally qualified health centers (we have two in Whatcom County). The other new federal distribution channel is a retail pharmacy program that channels vaccines to the large corporate pharmacies via federal government contracts. The other federal distribution channel is directly to the two tribal clinics. The rest of the vaccine supply for Whatcom County is channeled from the federal government to the state Department of Health, then the state allocates vaccines to the counties. The state vaccine distribution channels are:</p> <ul style="list-style-type: none">• long term care/pharmacy partnership (the partnership with CVS and Walgreens to vaccinate those at long term care facilities and skilled nursing facilities)• enrolled pharmacies• enrolled medical providers, and• four state-run mass vaccination sites (the closest to us being in Snohomish). <p>Whatcom County has a total of 46 enrolled providers.</p> <p>Amy shared vaccine data and statistics, per the Whatcom County Health Department website.</p> <p>As for planning efforts with providers, we convene all enrolled providers on a weekly basis to discuss their vaccine capacity and plans. We support those enrolled providers by offering technical support, interpretation of the prioritization for vaccines, and help understanding the ordering process and reporting process. We are seeing good collaboration and relationship building amongst providers.</p> <p>Lots of time and planning have gone into the large-scale vaccination clinic, which we will run in partnership with large medical providers and BTC. There are some small pilots planned and then we should be ready to go live with a large-scale vaccination effort at that site when more vaccine becomes available. The walk through being run this weekend will focus on vaccinating 1A healthcare workers, mostly home healthcare workers that have been unable to get access to vaccine appointments before now.</p> <p>The other area where the Health Department is focusing their efforts is in reaching vulnerable populations and making sure there is an equitable access. One particular focus is on homebound older adults. Staff are working with our community partners to identify barriers that might prevent some vulnerable communities from accessing vaccinations and to leverage our existing relationships with community partners to help remove those barriers and provide access. The Health Department is operating a mobile clinic that we hope can serve some of these vulnerable populations.</p>

	<p>A concern was raised about the J&J vaccine having a lower effectiveness rate, but perhaps being the vaccine most likely to get distributed to vulnerable communities since it is one dose and easier to store. Dr. Greg Stern noted that it is hard to do a head to head study of efficacy between the three authorized vaccines. The J&J vaccine is safe and effective at preventing severe illness and death. Lower efficacy rates of the J&J vaccine may be because it was tested internationally and the efficacy rates were evaluated at different times with more transmissible strains circulating. There are ongoing efficacy studies. We would encourage people to get whatever vaccine is available. The single dose delivery gives it some advantages for those with access issues.</p>
<p>Community Health Improvement Plan Update</p>	<p>Amy Rydel, Health Planning Specialist at the Health Department, has a brief update on CHIP, but invited any new committee members who want more background on CHIP and PHAB's role in CHIP to contact her after the meeting. Amy reviewed a slide deck on our Community Health Improvement Process called Healthy Whatcom. This is the multi-year process where we bring community partners together to undergo a cycle of assessment and strategic planning around our top priorities. Activities since the last report to PHAB include:</p> <ul style="list-style-type: none"> • Developing a timeline for re-launching the <i>Getting to Results</i> workshop series • Recruiting "leads" for each priority • Focusing on racial equity and dismantling systems of oppression, and children and families • Working with students at WWU to gather qualitative data to better understand the impacts of COVID in our community and research solutions. <p>Amy reviewed a <i>Getting to Results</i> timeline that outlined the steps already taken, as well as plans for the coming years.</p> <p>The Child and Family Well-Being Taskforce is working on a parallel track with many of these issues and discussions are underway about how to best bring them into this process.</p>
<p>COVID Recovery</p>	<p>Declaring an end to the pandemic is something the CDC will dictate and the state is responsible for making decisions on reopening phases, but at the local level, how do we heal/recover and what is PHAB's role in that? As a start to this conversation, Astrid Newell presented a framework called Thriving Together. This framework is based on the principle that the old "normal" wasn't good for everyone and that rather than aiming to get back to "normal," we should use this crisis and the recovery as a chance to move toward something better for the health and well-being of our community members. The North Sound Accountable Community of Health have been using Thriving Together as an organizing framework for thinking about COVID recovery both in terms of data collection and priorities for recovery efforts. The Thriving Together framework was established by the CDC Foundation and the Well Being Trust to create a framework for thinking about how we move toward a new way of thinking about health and well-being. Astrid encouraged anyone who hasn't already done so to explore the resources available at https://thriving.us/.</p> <p>While most current datasets don't yet reflect the impact of COVID, we know that many things have gotten worse during this crisis. We can use some available community data like call volume, who is accessing services, and other changes that service providers have seen over the last year to guide our recovery efforts.</p> <p>Discussion on COVID recovery and the Thriving Together framework included:</p> <ul style="list-style-type: none"> • I like the word renewal better than recovery • This is a huge opportunity to change the paradigm of how community groups, the Health Department, and PHAB work together and can build shared ownership in the process

	<ul style="list-style-type: none"> • I appreciate the framework's positive spin, that it is focused on the opportunity to springboard to something better, the holistic nature of the framework, and the focus on community connectedness • While it is important to get new specific data about the impacts of the COVID crisis, we shouldn't wait for that data to act since it is likely that all the issues that were already on our radar were just exacerbated by this crisis • A suggested starting place for recovery is to look at the four strategic imperatives in the Thriving Together framework: 1) affirm human dignity by establishing racial justice and full inclusion for all people as a daily, living reality; 2) strengthen belonging and civic muscle by working across differences for the well-being of people and places, which in turn, unlocks abundant assets of people and places; 3) expand all of the interconnected vital conditions with local stewards taking the lead, beginning with people and places that are struggling and suffering; and 4) solidify new legacies for living together by renewing civic life; economic life; as well as social, emotional, and spiritual life. • The Employer Support Taskforce could be a good model to look to for recovery efforts in the way that they tap into relationships with community partners to build ownership in the process • Our focus should remain on the needs of families and children - food support, internet access, promoting education, attracting companies to Whatcom County to create jobs • Should we create a subgroup to get started on this? <p>Jake moved that PHAB form a COVID recovery subgroup (made up of Steve, Jake, Amy, and Sterling), Steve seconded the motion, and the motion passed. Ayes: 7, Abstain: 0, Nay: 0</p>
Meeting Evaluation	<ul style="list-style-type: none"> • There is a lot going on and we hope we can make a difference and get some things done • Appreciate the conversation, especially about PHAB recruitment and advancing equity • Excited to see new members and excited to be looking forward and moving ahead • Reminded of how much is going on - we could spend the whole meeting time on any one of these topics, appreciate the work of the board • Appreciated the facilitation from Sterling, making space for everyone to speak • Thanks for welcoming the new members to the group • Looking forward to helping the community and working with the other members of the board • Again, welcome to the new members and thanks to them for jumping right in and volunteering for extra work
Adjourn	8:31 am
Next Meeting	Next regular meeting May 6, 2021, 7:00 – 8:30 a.m. <u>VIRTUAL</u>