

CLHO Leadership Development Webinar

Innovative Practices in Local Public Health

May 3, 2019



THE
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FOUNDATION



**EMERGING LEADERS
IN PUBLIC HEALTH**

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Lane County Public Health
CLHO Leadership Development Webinar
May 3, 2019



- Developing innovative local **public health leadership teams**
- **Teams** = two people challenge and support one another, build skills and competencies together in leadership, business, planning, and public health systems development
- Up to \$125k to develop and implement **transformative concept**



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Team Development

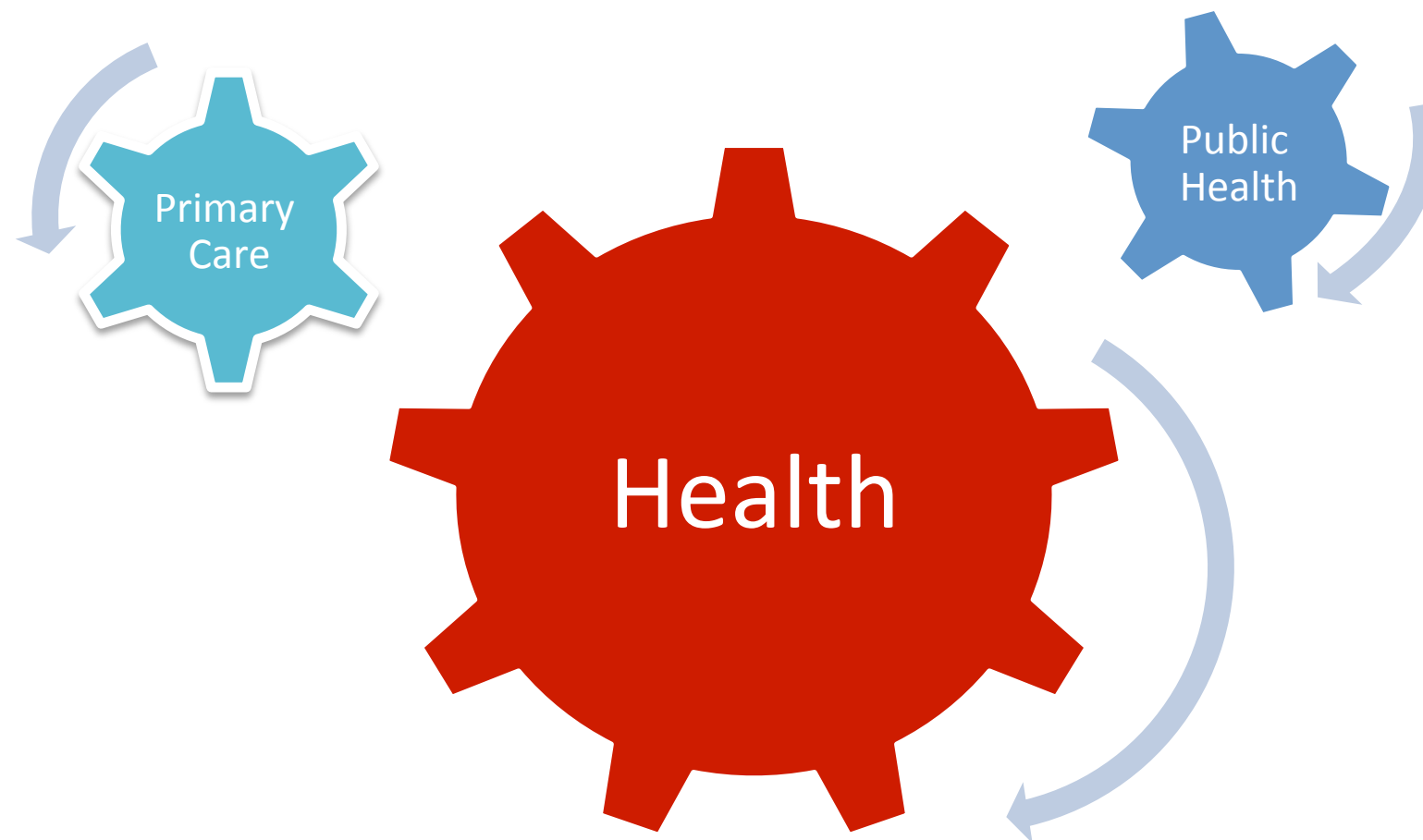


ORCAS Action Set

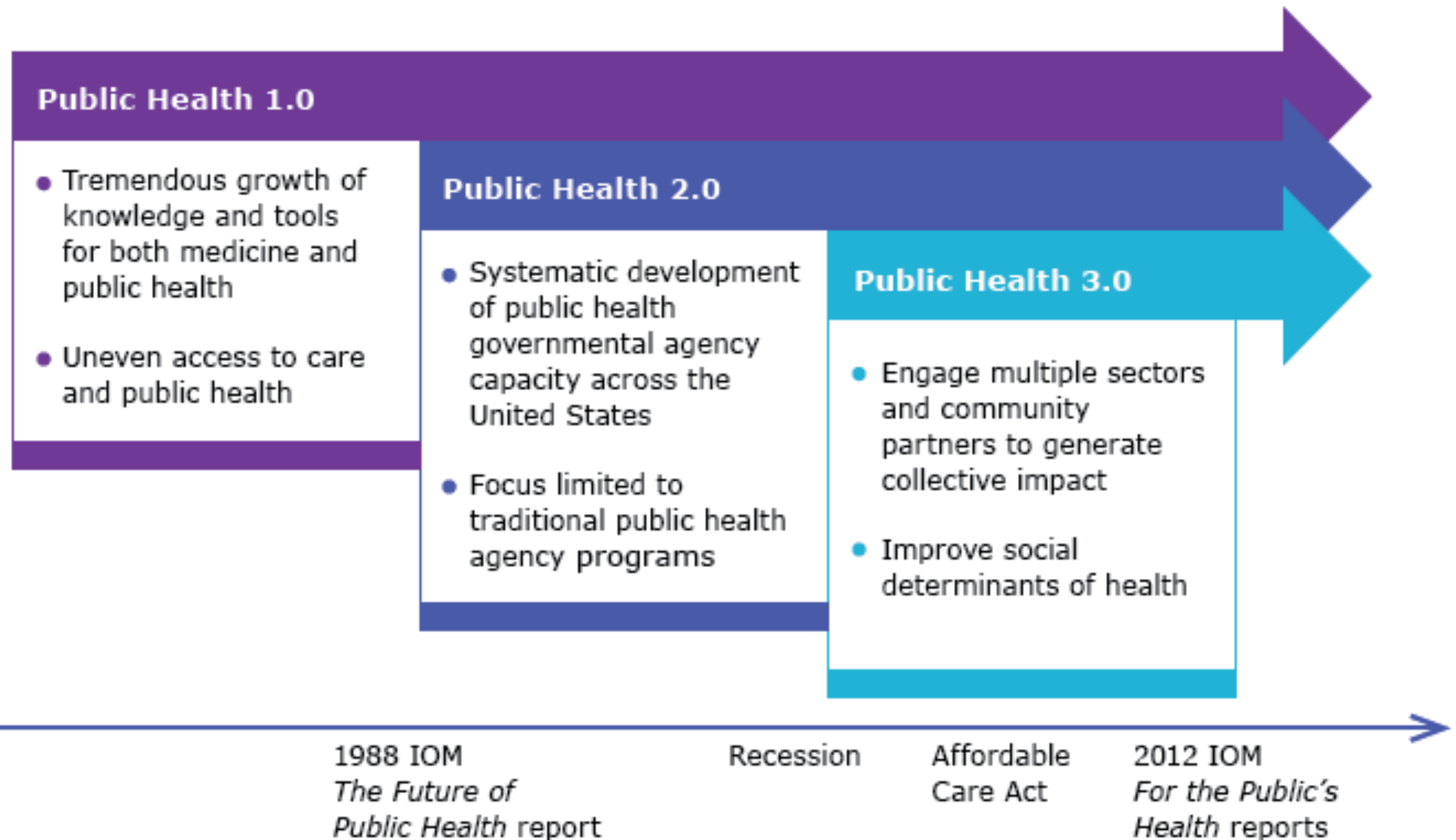


Transformative Concept

The Health Hub – developing systems and strategies to bridge public health and primary care to improve population health



Not a new idea...



Lane County -*where to start??*

- Public Health and the Community Health Centers of Lane County
 - Shared goal of population health improvement
 - Aligned leadership
 - Shared infrastructure
 - Collaborative use of data & analysis
- Public Health Roundtable



PUBLIC HEALTH
PREVENT. PROMOTE. PROTECT.

Washington County Public Health Equity and TIC Efforts

Erin Jolly, MPH
Senior Program Coordinator,
Health Equity, Planning and Policy
Washington County Public Health

*Healthy People, Thriving
Communities*



Public Health
Prevent. Promote. Protect.



Trauma-Informed Efforts

- Started with the SAMHSA model, incorporated the SFDPH model, and created a **“blended” trauma-informed model** that was less behavioral health focused and more applicable to public health and broader audiences.
- Work at the HHS level, the PH level, and PH Programs level— **integrated and collaborative efforts**.
- **Internal focus:** Work with PH staff—focus on work environments and workplace policies.
- **External focus:** Work with clients and community partners.
- **Appropriate framing** to make it applicable to all staff (e.g., “Trauma-informed approaches” vs. “Trauma-informed care”).
- Formation of a PH Division strategic workgroup, **“Advancing Trauma-Informed Approaches & Resilience,”** focused on implementation of trauma-informed practices across the PH Division and programs.

Safety & Stability

Appropriate signage
Predictable schedules
Safety plans for staff
Space for self-care
Transparency & predictability

Trust & Trauma Understanding

Involve consumer voice
Clear & available policies
Respectful communications
Involvement of staff in decision-making

Peer Support, Compassion & Dependability

Use of community health workers & other peer specialists
Use of individuals with lived experiences
Foster dependable relationships

Blended Principles: Examples from WCPH

Collaboration, Mutuality & Empowerment

TIC training across the PH Division
Defined avenues for staff and client collaboration in decision making
PH programs that empower clients & community

Resilience & Recovery

Efforts to ensure staff are empowered to do their work through adequate support
Training on resilience & recovery
Resources for clients & community

Cultural Relevance, Humility & Responsiveness

Access to information in multiple languages & formats
Promotion of healing value of traditional cultural connections
Cultural humility & equity

Examples of Internal Trauma-Informed Efforts

■ **Assessment:**

- Used TIO tool, SAMHSA and San Francisco Dept. of PH models

■ **Physical space changes:**

- Example: WIC Lobby Remodel

■ **Training:**

- Organizational trainings for community partners
- EH Training for Staff Safety
- Staff Trained on TIC Principles

■ **Policy:**

- Healthy Meetings Policy
- Telecommute / Alternate Work Schedule Policies

■ **Workgroup:**

- Incorporated into PH Strategic Work

Equity Work Across the Public Health Division

- HHS and PH Equity Workgroups
 - Professional development - all staff equity training
 - Training and use of equity lens across programs
 - Affinity Groups
- Data and community engagement efforts:
 - Data collection
 - Data visualization and storytelling
 - Community partnerships and partnering with people with lived experience

Adopted Statement on Structural Inequity

Washington County Health and Human Services Department acknowledges that generations-long social, racial, economic and environmental inequities result in adverse health outcomes. They affect communities differently and have a greater influence on health outcomes than either individual choices or one's ability to access health care. Reducing health disparities through policies, practices, and organizational systems will help improve opportunities for all who live, work and play in Washington County.

Equity and TIC in the CHIP

CHIP Leadership Team

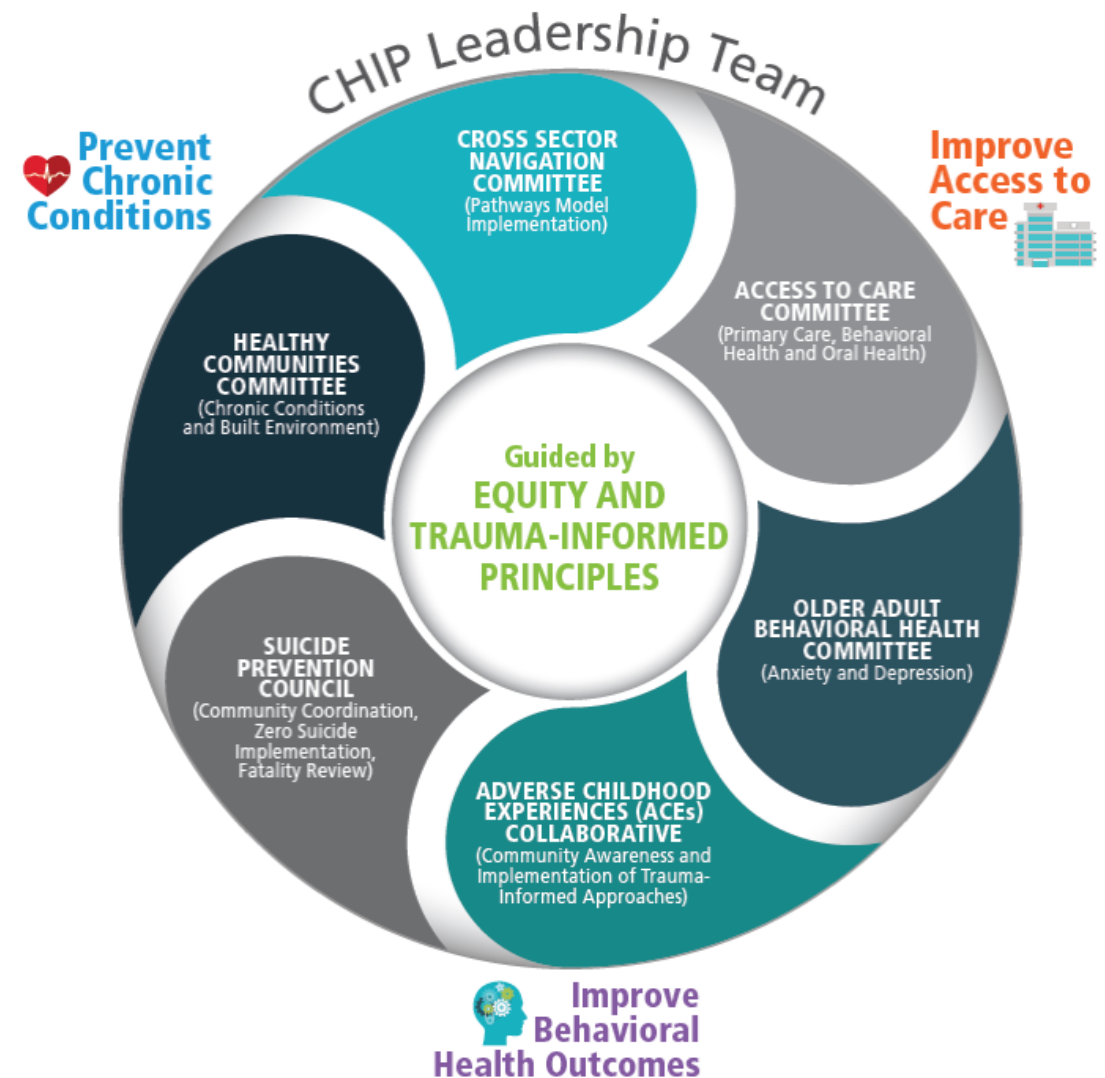
Three foundational goals

- Reduce health disparities
- Improve health equity
- Use a trauma-informed lens

Six CHIP Committees

Three priority areas

- Improve access to care
- Improve behavioral health outcomes



Equity and TIC in the CHIP

- **Equity and TIC toolkit** to support community partners in their TIC work
 - Equity/ TIC definitions
 - Adopted TIC principles
 - Meeting Guidelines
 - Operationalizing Equity Tool
 - Decision making models
 - Charter and work plan templates (with equity lens)
- **Equity and TIC mini-grants** to community partners to build organizational capacity in TIC and equity
 - Funding provided to 10 organizations



Innovative Practices

Cross Jurisdictional Efforts in
the Eastern Oregon
Modernization
Collaborative Region

Capacity

 Regional Epidemiologists add CD investigation capacity

 Regional Data

 Examples: Umatilla County

Wheeler County





North Central Public Health District

Training and Policy

-  Passport to Partner Services
-  One on One Training
-  Internet Partner Services Template

Expertise

BARHII Assessment

-  Expertise and capacity to implement the assessment
-  Written report with recommendations
-  Plans for sub-regional implementation
-  Shared Trainings within the region