### IMPACT AREA: SHARED LEARNING INFRASTRUCTURE

<table>
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<tr>
<th>STRATEGY DESCRIPTION</th>
<th>PROGRESS REPORT</th>
<th>DESIRED OUTCOMES</th>
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| **HLC partners** meet quarterly to discuss shared vision, learnings, challenges, and opportunities. | • Over 50 partners actively engage in quarterly meetings.  
• In October we collectively prioritized our 2017 Local and State Policy Agenda.  
• Distribute monthly newsletter and additional policy updates.  
• We have an updated website. Please check it out.  
• Increased Communication efforts are underway, several new one pagers (HLC, Policy (local and state), CHW) have been developed. All can be found on the website.  
• April HLC Quarterly meeting will be cohosted with Cascade Pacific Action Alliance and SW Accountable Community of Health. The Health Care Authority will provide a Medicaid Transformation Project Demonstration 101 to HLC partners. | Improved communication, alignment, and action among HLC partners and community members to improve health equity. |
| **HLC staff** regularly communicate with all partners. | | |
| **Funders group** meets annually to receive progress report on shared investments and supports a shared vision. | • Funders group met in November.  
• Funders continue to commit supporting the work of the HLC.  
• New Funding includes: Department of Health and Molina | A robust pool of supportive funding that supports a long-term process of social change without identifying any particular solution in advance. |
| **Community Health Advocates and Peer Supports (CHAPS) Network** promotes professional development opportunities, advocates for workforce development related to the peer skill set; and raises awareness among local systems of care about the value that local Peer activities add to these systems. | • CHAPS leadership team continues to meet regularly. They have recruited two more leadership members.  
• CHAPS coordinated committee completed a retreat where they drafted a charter, updated their work plan, and developed their meeting plan schedule for the next 6 months. | Increased community capacity of neighborhood-based and professional level peers to build community engagement, link community resources, and improve health outcomes. |
| **Community Connections workgroup** is developing a prototype data system that aggregates data from different sectors and uses them to build comprehensive, contextually informed approaches to community health. | • Data sharing agreement were signed with Vancouver Housing Authority and Evergreen Public Schools. Established transfer protocol and successfully received test data submission. Continued working with other partners on data elements and data sharing agreements. Institutional Review Board in progress. Completed site visit with AcademyHealth, including convening of partners. Continued internal development of pre-analytics plan to ensure team is ready when data sharing agreements are executed. Increased coordination with SW Accountable Community of Health (ACH) to plan for Data & Learning Team, which will guide ACH data needs as well as data sharing and design of community cross-sector data system. Potential Data & Learning Team members | HLC has actionable cross-sector information to drive learning, action, and evaluation with the appropriate community and data filters. |
**Evaluation** of HLC and CHW program is completed annually.

- CHWs and HLC staff will be presenting at the Washington State CHW conference and the HOPE Conference during the month of April.
  
  - The CHA team continues to work closely with Kelso High School to develop a youth CHA team. Youth will begin their work by identifying youth needs and helping with marijuana prevention efforts. We are in the process of finding additional local training resources for the youth.
  
  - CHAs are planning a youth marijuana prevention promotional event in April that will be based on the state media campaign Know Your Selfie, which promotes a strengths-based prevention effort focused on healthy alternatives to marijuana.
  
  - Many of the new CHAs and one existing CHA participated in a storytelling training through the Lightbox Collaborative sponsored by one of our funders, Northwest Health Foundation. The group found this information very useful in their current advocacy work and ongoing professional development.
  
  - CHAs are getting more involved in various outreach events locally to identify local resources and opportunities for engagement. One CHA is planning a hair show event for this summer.
  
  - CHAs are supporting the local immigrant community and their needs for safety and social support by providing education and support through local community partners and regional partners such as the League of United Latin American Citizens (LULAC).

**Rose Village CHW Team**

- One CHW has completed training in partnership with Washington State University’s Extension Services on the Plan, Shop, Cook, and Save curriculum which teaches participants how to budget, shop and cook healthy foods on a budget. She will begin coteaching the class for parents at Harney Elementary this spring.

**Increased capacity of systems to weave health, housing, social services, education, employment, economic development, and civic participation into the fabric of three identified neighborhoods.**

**Increased neighborhood opportunities in the areas of chronic disease prevention, substance-free living, safety, and social connections as determined by the community in three distinct neighborhoods.**
• Our CHW who is in the neighborhood association is working on completing her Community Emergency Response Team training, to better serve the community in emergency preparedness and response efforts.
• One CHW presented at the Clark County Youth in Nature Symposium and is organizing a spring event at Washington elementary promoting summer activities and exercise.
• We have at least 2 natural helpers who are very active in the community and wanting to onboard soon and we are looking for others who are willing to get more involved and onboard when our coach returns from maternity leave.
• Two Rose Village CHWs are active coordinating committee members of the Community Health Advocate and Peers Support (CHAPS) network of Southwest Washington and recently participated in a planning retreat and are actively engaging peers in the community.
• Three Rose Village CHWs have been active in the HLC’s policy committee, and two Rose Village CHWs were able to meet with elected officials during the legislative session to speak to the HLC’s policy priorities.

Wahkiakum County CHW Teams
• Wahkiakum youth CHAs continue to provide peer support and advocacy at Wahkiakum High School
• The youth are currently preparing to teach their FLASH peer-to-peer reproductive health curriculum
• Youth are also helping to organize a flu clinic at the high school and one of the youth CHAs is working to bring a youth mental health first aid training to all high school staff
• HLC staff are working to rebuild the adult CHW team in Wahkiakum by assessing community needs and outreaching with partners and community leaders.

**Health equity** is being integrated into all of our collective work.

• HLC Policy and Steering Committee completed a strategic planning work session and developed a specific plan to carry out their goals which include: build capacity to develop informed change agents with equity awareness; increase the diversity of community representation at all levels of our organization; develop a shared analysis, common language and foundational documents to drive our equity work; provide meaningful opportunities for diverse communities to be included in dialogue and decision-making; and share successes and best practice with our partners.
• HLC has hosted two Cowlitz specific equity conversations with HLC leadership members. The group plans to meet again but bring in additional partners and community members.
• Two additional equity and social justice trainings have been scheduled for April 14th and June 9th, 2017.

Increase the adoption of a health equity lens and community feedback process into HLC partner policies and systems by end of 2017.
### IMPACT AREA: HEALTH IN ALL POLICIES & SYSTEMS

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| **Policy Committee prioritizes policy issues** in partnership with collaborative and community members. | • 2017 Policy Agenda completed.  
• Senator Rivers has hosted HLC partners and local legislators once a month for the first four month of session. The fourth meeting is on April 11. The meetings have been a big success.  
• HLC Policy Committee has been actively supporting our statewide policy agenda through letter writing, testimony, monthly legislative meetings in Olympia and one on one communication with legislators.  
• HLC responded to two urgent needs in Longview: 1) Opposing code change that would dramatically limit where shelters could be located – still in progress; and 2) Opposing a restriction of severe weather shelters under emergency authority - Passed unanimously  
• Kachina joined steering committee of statewide Prevention Alliance. | Improve the health of all people by incorporating health considerations into decision-making across sectors and policy areas that prevent and mitigate chronic disease and poverty.  
Increase the adoption of a health equity lens and community feedback process into HLC partner policies and systems by end of 2017. |

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### IMPACT AREA: BRIDGE BETWEEN DIVERSE ORGANIZATIONS & COMMUNITIES

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<td><strong>Strengthening Community Engagement</strong> through supporting the CHAPS Network and the Community Advisory – Behavioral Health Advisory Board for the Regional Health Alliance.</td>
<td>• HLC has recruited, selected, and developed the Behavioral Health Advisory Board (BHAB) for the Regional Health Alliance. The Board has met four times, completed a retreat, developed a governance structure, elected a chair, co chair, member at large, and is developing recommendations for the Substance Abuse and Mental Health Block grant plan.</td>
<td>Developed systems to authentically engage with communities and facilitate community-led decision making.</td>
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<td><strong>Healthcare Delivery:</strong> Work with partners to increase engagement of non-physicians in hypertension and diabetes prevention and management.</td>
<td>• PeaceHealth presented to 1422 Coordinators across the state about their ambulatory pharmacy project.</td>
<td>Increase in knowledge of and use of CHWs and pharmacists being engaged in diabetes and hypertension prevention and management.</td>
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| **Healthy Environments:** Work with partners to implement worksite wellness, healthy local foods, and safe walkable communities. | • Clark County Public Health is working with the Greater Vancouver Chamber of Commerce to provide monthly worksite wellness workshops aimed at meeting the needs and capacities of small business owners.  
• Cowlitz County Health and Human Services is working on a social supports for seniors | Increased environmental support for people to make healthier lifestyle choices. |
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<th>Economic &amp; Social Development: Work with partners to implement an education-focused CHW at McLoughlin Middle School.</th>
<th>• HLC was awarded funding through the Northwest Health Foundation Kaiser Community Fund to implement an education-focused CHW at McLoughlin Middle School to work with Vancouver Housing Authority and other families to support their children attending school. Interviews are underway to hire the Education focused CHW.</th>
<th>All children are supported to academically achieve.</th>
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<td>Lifestyle Change Programs: Work with partners to expand Diabetes Prevention Program; train CHWS in hypertension, diabetes; and home blood pressure monitoring; and ensure our referral systems are robust.</td>
<td>• WSU Extension continues to work with employers to promote the Diabetes Prevention Program (DPP) and host WSU Extension-led DPPs at worksite locations. WSU Extension held outreach events at Vancouver Housing Authority and will hold more to recruit participants in DPP. • WSU Extension staff attended national meeting of DPP providers. • 211Info continues to do outreach to ensure that lifestyle change supports are listed in their database.</td>
<td>Sustainable lifestyle change programs and supports are available, accessible, and widely known.</td>
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