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<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. | • Continue to distribute monthly newsletters.  
• HLC has completed strategic planning process and plan was approved by SWACH Board.  
• July HLC Quarterly meeting: Policy and advocacy training completed by Vic Colman. Breakout session highlighting exciting work in our region: SWACH, Cascade Pacific Action Alliance (CPAA), Voter registration, and regional opioid crisis response.  
• HLC is working on updating the website.  
• HLC had a successful launch to a series of equity and social justice and implicit bias training taught by Maria Lisa Johnson. Thank you, United Way and Northwest Health Foundation for making this opportunity possible. Over 200 people in our region have participated in these trainings. | Improved communication, alignment, and action among HLC partners and community members to improve health equity. |
| **Funders group** meets twice annually to receive progress report on shared investments and supports a shared vision. | • October 4 HLC funders group will meet and receive important updates on HLC, SWACH, and CHW transitions. The funders group will also provide feedback on the future collaborative funding for SWACH.  
• HLC presented at recent Grantmakers of Oregon and Southwest Washington conference. The presentation focused on building power through leadership and focused on the work of the CHWs, policy and decision-making structures. Thank you, Kaiser Permanente, Clark County Public Health, and Community Health Workers for joining the presentation/conversation. And big shout out to Cambia for making this opportunity possible.  
• **HLC was selected to provide feedback to the “Lessons Learned from Engaging with Communities” with the Group Health Foundation. More than 80 agencies provided insight. Find the full report at:** [https://grouphealthfoundation.org/insights/lessons-learned-engaging-with-communities/](https://grouphealthfoundation.org/insights/lessons-learned-engaging-with-communities/) | 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. | SW CHAPS is a growing grassroots network of community-based community health advocates and certified peers, serving the communities across the Southwest WA region, who come together to learn, support one another, and share ideas and best practices. Here are some recent achievements.  
• Joined with Monthly Peer Lunch Group  
• Presence at Clark County’s Recovery (Peer) Forum  
• Continue to convene network meetings every other month. Recent topics included: Hearing Voices Network, and Youth & Electronics  
• Network meetings more accessible remotely via call in platform - Zoom  
• Upcoming Meeting -- will look at preparing for the Legislative Session  
• Represented/helped in workshop presentation at the statewide Resident Action Project | 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 | • CORE has reached an agreement with Vancouver Public Schools (VPS) on the data elements they are willing to share. VPS operations team is currently reviewing the draft data sharing agreements. | HLC has actionable cross-sector information to drive... |
**Evaluation** of HLC and CHW program is completed annually.

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<th>IMPACT AREA: Elevation of community voice and engagement</th>
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<tr>
<td><strong>STRATEGY</strong></td>
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<td>Community Health Worker teams meet regularly to learn, plan, and act together on community priority issues.</td>
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- CORE is in the process of signing the confidentiality agreement with HealthCare Authority (HCA) – this is the final step before Washington State Institutional Review Board approval and the ability to pull the Medicaid data.
- CORE has done work internally to prep for pulling the Medicaid data and the first steps will be to match the Medicaid and the Vancouver Housing Authority data.
- CORE has spent significant time analyzing the Vancouver Housing Authority data, including looking at how people are moving through the application/waitlist processes, how long it takes, and where there is variation. A meeting will be scheduled in Fall to review the data. Year 3 Evaluation is well underway. The three areas of focus include:
  - **PARTNER Survey.** CORE designed and implemented the Year 3 PARTNER survey in partnership with the HLC. CORE has fielded the survey to key contacts at partner organizations as identified by HLC leadership, and will analyze results in comparison to past year. Analysis will be completed for HLC as a whole, by partner, by membership status, and by county.
  - **CHW Activity Tracker.** CORE is using participatory design methods to create an activity tracker for Community Health Workers. The tracker will incorporate Common Indicators measures and roles and responsibilities and will enable ease of reporting for supervisors and funders.
  - **CHW/CHA Structured Interviews.** CORE will conduct up to 20 surveys or structured interviews with Community Health Workers to assess capacity building, empowerment, and the HLC’s new leadership development model. The design of data collection methods will be completed in partnership with the HLC team. CORE will write a report to summarize findings.
  - **Tracking HLC Policy and Systems Efforts.** This component of the evaluation will look at the overall outcomes from the four-year 1422-year grant from the Department of Health. CORE will also highlight local and state policy wins over this same time period.

- Developing a prototype data system that aggregates data from different sectors and uses them to build comprehensive, contextually informed approaches to community health.
followed by in person interviews with CHW/CHA leads, HLC staff and leadership. CHW/CHAs were involved throughout the decision-making process. Wahkiakum Health and Human Services (HHS) will be incorporating the Wahkiakum Youth CHA team under their organization. Youth and Family Link will be taking on our South Kelso CHA team. Wahkiakum HHS has provided coaching for the Youth CHW team since forming the team. An open process for this team was not initiated as it was a natural fit for them to join the HHS family. Youth and Family Link is currently supporting two other CHW programs, which creates an exciting opportunity for growth for the S. Kelso Team. The Rose Village Team is also close to making a decision, and we hope to make an announcement next month. HLC will continue to work very closely with the teams through the transitions and beyond.

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<th>Rose Village Community Health Worker (CHW) Team</th>
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<td>• Brandi Williams and Dominque Horn moved into team co-lead roles.</td>
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<td>• Events that the Rose Village team has been involved with are: Juneteenth, Neighborhood Night Out, Go-Ready with Vancouver Public Schools, Fourth Plain Multicultural Festival</td>
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<td>• Trainings/conferences Rose Village CHW’s have attended: Peer Pathways conference, CERT, Implicit Bias training</td>
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<td>• Other events CHW attended: Black is Beautiful, Block bash, back to school bash, rally response</td>
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<td>• Individual team member activities: Assisted at Laundry Love free laundry night, assisted with Community Gardens, connected Veterans to resources, supported project to build tiny homes for women Veterans who are un-housed, distributed water to people who are un-housed, connected individual to resources to become a foster parent, connected individual to clothing resources for their family, gathered clothing, blankets, shoes, stuffed animals and school supplies for children in foster care, assisting a family in getting their child’s hair cut for the first day of school, assisted a family for resources in an emergency situation, attending Spanish Language group, created display with historical information for Juneteenth, supported social activities with seniors, assisted an individual in crisis with available resources, attended Behavioral Health Advisory Board meetings, spoke with possible sponsors for youth soccer program at local elementary school, put up flyers for community events, connected families to back to school events, worked with Moms on Mental illness, assisted Spanish speaking families, translated at school event, went with community members to doctors’ appointments and searched for housing and food banks.</td>
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<tr>
<td>South Kelso Community Health Advocate (CHA) Team</td>
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<td>• Two CHAs Dana McKee and Michelle Rodriguez-Bighaus started as co-leads to support the team during transition with new host organizations.</td>
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<td>• Attended Juneteenth event at Clark College with team. Networked with community organizations.</td>
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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.
- Attended Cowlitz and CHAPS peer/CHW network meetings
- S. Kelso CHA’s connected with Ridgefield Resource Share
- Brought personal stories to transportation needs to provide insight on the issue
- On-boarded two new team members
- Volunteered with Food Life Line and the Highlands Neighborhood Association, Longview
- HealthyGen met with team to support visioning and planning
- CHA team members helped with S. Kelso street clean up
- Participated in National Night Out in Kelso, at Tam O’ Shanter Park. Connected with community members and local organizations.
- Attended and volunteered at Youth and Family Link’s Back to School Event
- Volunteered at Ridgefield Church of the Nazarene Back to School Event.
- Provided support at Kelso Resource Center

**Wahkiakum County Youth Community Health Advocates (CHAs)**

- Working to recruit younger teams members, 5 current CHAs will be graduating in June 2019.
- The youth team is well connected to school administration and has already presented their work to local government leadership.
- The youth team is focused on empowering, strength-based peer support, particularly around the issues of trauma-informed peer support and sexual and reproductive health issues.
- This summer, a team of youth CHAs took part in an innovative training on the connections between Adverse Childhood Experiences ("ACEs") and youth sexual and emotional health. The training, led by Delena Meyer, was held in late June and early July, and involved interactive learning through activities, and tools for application.
- Providing education around vaping.

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

- HLC continues to stay engaged with the SW WA Equity Committee. The committee has completed training with the Center for Equity Inclusion (CEI) and is now working toward implementation planning with continued support from CEI.
- HLC continues to trial using an equity lens tool within the HLC leadership committees (HLC Committee, Policy Committee). Policy Committee has created a subcommittee to work on simplifying the current tool to better meet the needs of our broader partner base.
- HLC staff have worked closely with SWACH to bring an equity, anti-stigma, and trauma informed framework to the Medicaid transformation efforts. This includes SWACH creating an Equity and Inclusion Manager position that will support both internal and external equity work, which we are currently in the process of recruiting for. SWACH will work with clinical and community partners to support implementation of an equity assessment and plan. SWACH will also complete an assessment and plan in 2019. A shared learning cohort will be developed to support partners embarking on equity assessments and plans.
- HLC continues to offer the 8-hour Leading for Social Justice and Equity training for HLC and SWACH partners. Trainings have been offered for three years now and to date more than 200 people have participated in these trainings. These trainings will also be brought to Klickitat county in the coming months.
• A 4-hour advanced course, also taught by Maria Lisa Johnson on implicit bias, was also offered. We hope to continue to offer educational opportunities for our partners to do personal exploration and think about how their own organizations may be unintentionally perpetuating inequities.

### IMPACT AREA: Policy change at the local, state, and federal levels

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<td><strong>Policy Committee prioritizes policy issues</strong> in partnership with collaborative and community members.</td>
<td>Expanded our Policy Committee to 16 members. New members include: Annie Herbert (Kaiser Permanente), Caleb Luther (Emergency Support Shelter), Dave Fine (community member interested in Active Transportation), Liz Cattin (PeaceHealth), and René Hilderbrand (Cascade Pacific Action Alliance/CHOICE). Policy Committee is working hard to emerge potential local and state policy issues for our 2019 agenda. HLC Policy Committee members will be gathering information from state and local groups and in November HLC partners will work to prioritize the policy agenda at the quarterly meetings. Policy Committee is deeply committed to using an equity lens as we set our 2019 policy agenda. A subcommittee is currently working to simplify our current equity lens tool, so it is usable for our partners at the quarterly meeting.</td>
<td>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 2018.</td>
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**State Policy Agenda:**

Worked closely with Washington Chapter of American Academy of Pediatrics (the Chapter) to discuss pediatric reimbursement rate for the Medicaid Community. HLC was able to bring partners from health, education, and culturally specific organizations along with CHWs to discuss this complex issue impacting our region with two local legislators and leadership from the Chapter. The Chapter captured stories to use during the legislative session to support a long-term solution for the pediatric reimbursement rate for the Medicaid community. We look forward to continuing to work with the Chapter this upcoming legislative session.

Kachina continues to sit on statewide Prevention Alliance and their steering committee. The Prevention Alliance (PA) is a broad cross-section of groups and organizations from across the state of Washington interested in advancing population health with a focus on prevention. The Prevention Alliance is a meta-coalition that acts as an incubator for the early formative stages of policy, systems and environmental (PSE) strategy development related to healthy communities. The PA will meet at the end of October to review all potential policy areas of focus for 2019 session.

**Local Policy Agenda:**
- Support Safe Routes to School - aims to create safe, convenient, and fun opportunities for children to bicycle and walk to and from schools. The goal is to reverse the decline in children walking and bicycling to schools, increase kids' safety and reverse the alarming nationwide trend toward childhood obesity and inactivity. School Policy change to support Safe Routes to School efforts. **No advocacy this year on SRTS but watching closely with Policy Member with Safe Routes to School Partnership.**

- Support the adoption of complete streets ordinances meeting the needs of all users – Counties and Cities – A County wide complete streets ordinance passed the Clark County Planning Commission in mid-May. HLC and HLC partners advocated for this. The ordinance will go before the County Councilors in December and HLC plans to advocate for this.

- Support each county, city, parks and board of health efforts to enact an ordinance that prohibits the use of vaping devices in any place where smoking is prohibited. **No advocacy to date this year.**

- Supported City of Vancouver in the development of a new day shelter in Central Vancouver. HLC provided a letter of support and CHWs attended community meetings. HLC provided an additional letter in response to the neighborhoods agreements, which encouraged a more trauma informed approach and strong considerations for those being served.

- Human Services Facility Siting Ordinance: City of Vancouver has an ordinance that regulates the placement of certain human services facilities including requiring minimum separation from other human services facilities. City staff have identified concerns which may discriminate against a sector of the community because of their economic status. City is seeking alternative approaches. **Human Service Ordinance is being repealed and new zoning changes are being considered.** HLC provided a letter highlighting some issues with the new potential zoning changes and continues to follow closely.

- Watching housing and homeless related issues:
- City of Longview development regulation: Intended to encourage development of new housing but need to watch for unintended consequences around poor design, construction and planning

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**IMPACT AREA: Improved health outcomes through organizational and community engagement and partnerships**

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| **Healthcare Delivery:** Work with partners to increase engagement of non-physicians in hypertension and diabetes prevention and management. | - CHW Coordinator and CHAPS Coordinating Committee members maintained involvement with Healthy Gen’s Integration Pilot and with SeaMar until the last shared learning collaborative in late June.  
- Free Clinic of Southwest Washington (Free Clinic) is re-evaluating the role of a part time CHW for the Diabetic Program. The evaluation includes combining position with part time position in Project Access program. This has potential to recruit applicants. Job applications for part time position have been limited. Staffing turnover in Free Clinic leadership team has delayed hiring of CHW position. Some CHW functions have been integrated into clinic coordinator position.  
- Integrated quality monitoring was included in the Free Clinic 3-Year Strategic Plan. | Increase in knowledge of and use of CHWs and pharmacists being engaged in diabetes and hypertension prevention and management. |
| Healthy Environments: Work with partners to implement worksite wellness, healthy local foods, and safe walkable communities. | • Free Clinic is supporting three free clinics in completing an evaluation of quality data tracking.  
  • The Free Clinic provided instruction for Free Clinic managers on process to determine quality indicators, create a data tracking system and initiate quarterly chart reviews by volunteer physicians and dentists.  
  • Initial chart reviews completed in Free Clinic dental advisory committee. | Increased environmental support for people to make healthier lifestyle choices. |
|---|---|---|
| **Workforce Development, Equity, and Policy and Systems Change: Work with partners to implement a pilot project with Education Community Health Advocates (ECHAs) addressing policy and systems barriers to school attendance at McLoughlin Middle School. ECHAs are housed at the Free Clinic but work closely with the McLoughlin Middle School and Vancouver Housing Authority.** | • Clark County Public Health (CCPH) continues to build on Stairwell Campaign. Staff have distributed the stairwell decals and posters to partners at the VHA and Legacy Hospital. In addition, stairwell “workout” posters were developed in partnership with the Clark County Living Well Committee. Hoping to make those posters available to partners as well.  
  • CCPH has completed the Small Business Worksite Wellness Toolkit. Staff have been connecting with local chamber groups to discuss distribution of the toolkit.  
  • Clark County Public Health continues to support Complete Streets Enhancements. Purchased 24 bike racks that will be installed on city, non-profit, and local businesses properties to encourage active transportation. This compliments the City of Vancouver’s Complete Street policy. They are being installed in locations where health disparities exist. | All children are supported to academically achieve. |
| **Lifestyle Change Programs: Work with partners to expand Diabetes Prevention Program; train CHWs in hypertension,** | • Lifestyle coaches and training was identified as a need for the statewide Diabetes Network Leadership Team. Amy Cooley with WSU Extension was accepted into, attended and graduated from the Master Training Program for the Diabetes Prevention Program at Emory. | Sustainable lifestyle change programs and supports are available, accessible, and widely known. |
| diabetes; and home blood pressure monitoring; and ensure our referral systems are robust. | • 211Info continues to do outreach to ensure that lifestyle change supports are listed in their database. They continue to offer site-based training on their services and support a number of community efforts.  
• HLC is providing funds through 1422 to support community care coordination efforts at Southwest Washington Accountable Community of Health and Cascade Pacific Action Alliance. These funds have supported the launch of two Pathways programs. CPAA has selected 14 Care Coordination Agencies and has set training dates. |