



## ISLAND COUNTY BOARD OF HEALTH

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### AGENDA

#### REGULAR SESSION

June 17<sup>th</sup>, 2025, 1:00 p.m.  
Commissioners Hearing Room B102  
Coupeville Annex Building

Meetings are available remotely. Those interested in attending the meetings by computer, tablet, or smartphone may use the following link: <https://tinyurl.com/IslandCountyBOH> or by telephone: 1-323-433-2396 Meeting ID 971 2319 5885 Pass code: 626749

***Call to Order:*** June 17<sup>th</sup>, 2025, Regular Session of the Island County Board of Health

***Additions or Changes to the Agenda:***

***Approval of the Minutes:***

- May 20<sup>th</sup>, 2025, *Minutes*

***Public Input/Comments:*** The Board values the public's input. This time is set aside to hear from the public on subjects of a health-related nature, not on the scheduled agenda. All information given is taken under advisement. Unless emergent in nature, no action is taken. To ensure proper recording of comments, state your name and address clearly into the microphone. Limit your comment to two minutes. The Board may entertain public comment on specific agenda items when discussed.

***Resolution:***

- Board of Health Representation Resolution, presented by Dr. Shawn Morris, Public Health Director. – 10 *minutes*

Review a resolution allowing for limited alternate representation by the Mayor of Oak Harbor and the WhidbeyHealth Hospital Commissioner – *Attachment*

*ACTION ITEM: Motion to approve Board of Health Representation Resolution HD-2025-01*

***Presentation:***

- Legislative Summary, presented by Representative Dave Paul, – 15 *Minutes*.

Discussion of priority updates for Island County following the conclusion of the legislative session.

***Presentation:***

Community Health Improvement Project Update, presented by Taylor Lawson, Deputy Director of Public Health, and Heidi Berthoud, Principal & Founder of Heidi Berthoud Consulting LLC – *45 Minutes.*

A presentation and discussion on the Community Health Improvement Project (CHIP) progress to date and request for next steps– *Attachment*

***Public Health Updates:***

- Public Health Department Update, presented by Dr. Shawn Morris, Director of Public Health. – *5 minutes*

***Board Announcements:***

***Adjourn:*** The next regular session of the Island County Board of Health will be held on July 15<sup>th</sup>, 2025, at 1:00 p.m. in the Commissioners Hearing Room (B102) in the Coupeville Annex Building.





# **ISLAND COUNTY BOARD OF**

## **HEALTH**

### **MINUTES**

#### **REGULAR SESSION**

May 20<sup>th</sup>, 2025

The Island County Board of Health met in Regular Session on May 20<sup>th</sup>, 2025, in the Board of County Commissioners Hearing Room (Room #102B), Annex Building, 1 N.E. 6<sup>th</sup> Street, Coupeville, Washington.

**Members present:**

Commissioner Janet St. Clair, Chair  
Commissioner Melanie Bacon  
Commissioner Jill Johnson  
Commissioner Ron Wallin  
Capt. Lund

**Member present by video:**

Mayor Ronnie Wright

**Members Excused:**

**Others present:**

|                              |                          |
|------------------------------|--------------------------|
| Taylor Lawson                | Shawn Morris             |
| Melissa Overbury-Howland     | Chris Kelley             |
| Kathryn Clancy               | Lynda Austin             |
| Dr. Howard Leibrand (Online) | Heather Kortuem (Online) |
| Eric Brooks (Online)         | James Golder, JD         |
| Megan Works                  | Keven Graves             |

**Call to order:**

Commissioner St. Clair called the meeting to order at 1:05 p.m.

**Approval of Agenda:**

A motion to approve the agenda was approved unanimously.

**Approval of Minutes:**

The March 18<sup>th</sup>, 2025, Regular Session Minutes were approved unanimously.

**Board member comment:**

Commissioner Ron Wallin introduced Commissioner James Golder, JD, Board President to the WhidbeyHealth Board of Commissioners, as a potential alternate, and honored the memory of Hospital Commissioner Kate Rose.

**Public Input or Comment:**

There was no public comment.

**Letter:**

Dr. Shawn Morris, Public Health Director, presented a draft letter from the National Association of Counties (NACo) to congressional leadership elevating the importance of Medicaid Financing.

MOTION: All members of the Board of Health, with the exception of Captain Lund, due to being a liaison, approved sending the letter to the Secretary of Health, following a number of small edits.



**ISLAND COUNTY BOARD OF**  
**HEALTH**  
**MINUTES**  
**REGULAR SESSION**  
May 20<sup>th</sup>, 2025

**Nominations:**

Taylor Lawson, Public Health Deputy Director, presented two Community Health Advisory Board nominees, Lauri Johnson-Grimm and Nic Wildeman.

MOTION: All members of the Board of Health approved welcoming the nominees to the Community Health Advisory Board.

**Presentation:**

Dr. Shawn Morris, Public Health Director, presented a Health in All Policies Update.

**Presentation:**

Dr. Chris Kelley Ph.D., LG, Hydrogeologist, presented an update on the Island County Coordinated Water Systems Plan (CWSP).

**Public Health Updates:**

Dr. Shawn Morris, Public Health Director, gave an update on the Public Health budget, Health Matters, staff training, and community health guidance.

**Board Member Comments and Announcements:**

The Board met outside the commissioner's hearing room for a ribbon-cutting ceremony, unveiling Island County's new mobile outreach van.

The Regular Session adjourned at 3:04 p.m.

The next *Regular Session* of the Island County Board of Health will be held on June 17<sup>th</sup>, 2025, at 1:00 p.m. in the Commissioners Hearing Room (B102) in the Coupeville Annex Building.

SUBMITTED BY:

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Shawn Morris, Director of Public Health

Approved this \_17<sup>th</sup>\_ day of \_June\_, 2025.

BOARD OF HEALTH  
ISLAND COUNTY, WASHINGTON

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Janet St. Clair, Chair







Heidi Berthoud  
Consulting

# CHIP Overview: Island County Board of Health





June 17, 2025

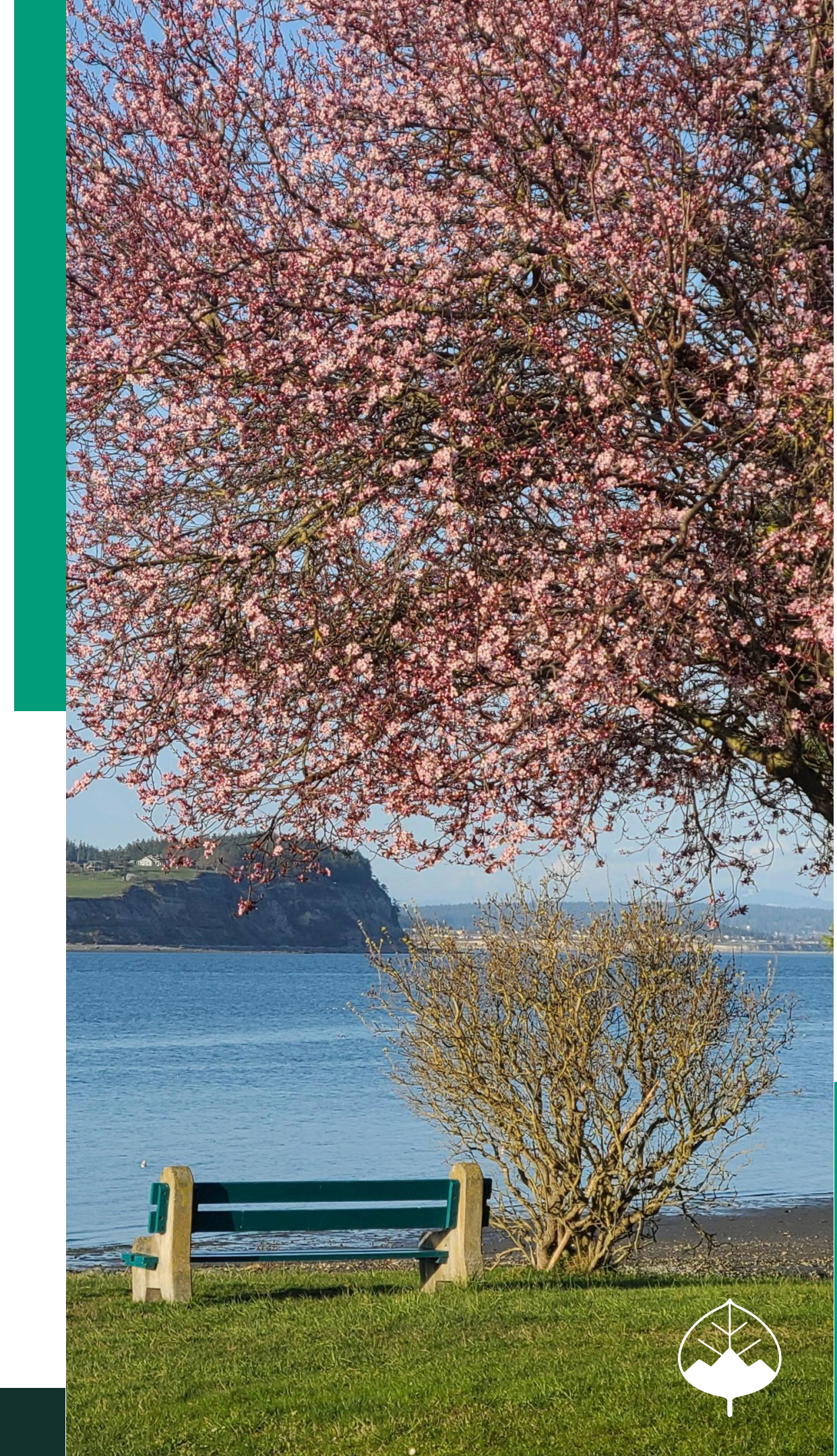
Island County Public Health





# Today's Agenda

-  **Welcome & Introductions**
-  **CHA & CHIP Process Overview**
-  **CHAB Conversation Overview**
-  **Next Steps**





# Heidi Berthoud, MPH

Founder, Owner, Principal  
Consultant



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Heidi is the founder of Heidi Berthoud Consulting and has worked in public health, research, and health care for more than 20 years.

Heidi works with public health departments and health and social service nonprofit organizations conducting community health assessments, program evaluations, and helping teams collect data they can use to improve health. All of HBC's work is focused in the Pacific Northwest.

She is passionate about community focused data collection, rural and remote health care, and making public health data accessible to everyone.



Pronouns: she/her/hers



Heidi Berthoud  
Consulting



The background of the slide is a photograph of a natural landscape. In the foreground, there is a pile of weathered, grey driftwood logs lying on a bed of green grass and some small plants. Behind the logs, a dense forest of evergreen trees stretches across the middle ground. The sky above is a clear, pale blue with a few wispy white clouds. A large, white rectangular box with a thick yellow border is centered on the slide, containing the title text.

# CHA & CHIP Overview







# What is a CHA?



A community health assessment (CHA) is a process of systematic data collection about a defined community to understand:

- Important health needs
- Uncover public health gaps
- Highlight existing strengths and community assets





# Social Drivers of Wellbeing





# Benefits of Conducting a CHA

Helps the health department or hospital system do the following:



**Understand what health issues need to be addressed**



**Engage with multiple, diverse communities**



**Design programs or form partnerships to address those needs**



**Improve health systems**





# How We Engage Community



We engage the community through:

- Community leader interviews
- Focus groups
- Direct outreach
- Ongoing relationship building
- Sharing the final report with the community

Benefits:

- Increased engagement with Public Health
- Inclusion of diverse voices that are often not represented





# Methods We Used

English and Spanish



Community  
Survey



Focus  
Groups



Interviews



Health  
Indicators





# What We Heard



## **Strong Community Assets**

Local nonprofits, healthcare systems, faith communities

## **Clear Connections**

Themes aligned with the social drivers of health and wellbeing





# What is a CHIP?



## **Purpose:**

A Community Health Improvement Plan is a process to improve community health by addressing the issues identified in the CHA and any other issues prioritized by ICPH and community partners.

A strategic roadmap for improving health outcomes and quality of life for all residents over the next 3-5 years.







# Benefits of a CHIP



## **Community-driven**

Based on local input and data

## **Action-oriented**

Builds upon your community health assessment

## **Collaborative**

Aims to foster partnerships across all sectors

## **Equity-focused**

Addresses gaps in health access and care





# CHIP Lifecycle



1

**Assess**  
**Community Health**  
**Needs** (Community  
Health Assessment,  
CHA)

2

**PRIORITIZE**  
our CHIP  
focus areas

3

**ENGAGE**  
community  
partners to  
align with and  
support our  
priorities

4

**SHARE**  
what we  
learned and  
what we plan  
to do using a  
data walk

5

**REPORT** our  
plan and  
highlight work  
in progress  
with a summary  
and annual  
community data  
snapshot

6

**RESPOND** and  
adjust as we  
review data and  
our progress

7

**PLAN** our next  
Community  
Health  
Assessment  
(CHA)





# Island County Public Health CHIP Timeline



**Summer:  
Board of  
Health  
Engagement**

- Board of Health workshop to review CHAB input
- Final prioritization decisions
- Resource allocation discussions
- Partnership commitment conversations

**Fall:  
Community  
Data Walks**

- Neighborhood-level engagement sessions
- "Data walks" in different community areas
- Spanish-language specific engagement
- Youth and senior-focused sessions
- Community organization partnership meetings

**Winter: Plan  
Development**

- Draft CHIP development based on all community input
- Strategy development with community partners
- Goal setting and outcome measurement planning
- Resource mapping and funding strategy

**Spring: Plan  
Finalization &  
Launch**

- Final community review of draft CHIP
- Board of Health adoption
- Implementation planning with community partners
- Public launch and commitment ceremonies

**CHIP Year 1:  
Foundation  
Building**

- Establish working groups for priority areas
- Develop partnerships and formal agreements
- Secure initial funding and resources
- Launch first initiatives and pilot programs

**Years 2-3:  
Implementation  
& Expansion**

- Full program implementation
- Regular monitoring and adjustment
- Expansion of successful strategies
- Continued community engagement and feedback

**Years 4-5:  
Evaluation &  
Planning**


- Comprehensive evaluation of outcomes
- Community impact assessment
- Planning for next CHIP cycle
- Celebration of achievements and learning from challenges





# Prioritization Process



| CHIP Prioritization Matrix |        |  |   |  |   |  |  |
|----------------------------|--------|--|---|--|---|--|--|
|                            |        |  |   |  |   |  |  |
| Health Need                | Source | What is the organizational capacity to support this need directly?                   | Is there existing infrastructure in place to support this need? | Are there established relationships or partners to support or address this need?     | Is there ongoing investment (\$ or otherwise) in place or available to support this need? | Was this previously a CHIP focus area (if applicable)? | Was this a priority from previous CHA? (if applicable) |
|                            |        | High, Medium, Low  | Yes or No   | Yes or No  | Yes or No   | Yes or No  | Yes or No  |
|                            |        |  |   |  |   |  |  |



# Seven CHIP Priorities



- 1. Housing Access & Affordability (CHA)**
- 2. Climate Health Adaptations**
- 3. Healthcare Access & Availability (CHA)**
- 4. Mental Healthcare Service Availability (CHA)**
- 5. Senior Health & Supports (CHA)**
- 6. Food Security**
- 7. Childcare Access**







Heidi Berthoud  
Consulting

# Questions?



# CHAB: Overview of the Facilitated Community Conversation



# CHAB'S Role

As Community Experts, Please:



- Share your expertise about community opportunities and needs.



- Provide a real world assessment of what's possible in your community.



- Identify partnership opportunities and areas of overlap and support.



- Give honest input and be ready to make decisions!

**Your advisory input will help shape recommendations to the Board of Health and inform our community engagement strategy.**



# Facilitated Community Conversation



**Objective**

**Reflective**

**Interpretive**

**Decisional**

**Why we chose ORID:**

- Ensures everyone's input matters
- Prevents rushed decisions
- Balances head and heart
- Creates shared ownership



# CHAB Decision- Making Process

## Objective

***What? Senses -  
see, hear, taste, feel,  
smell***

What are your gut reactions about the urgency and community readiness for each priority?

- Which priorities feel most urgent to you personally?
- Where do you sense the most community energy or concern?
- What feels overwhelming or challenging?
- Where do you see the most hope or momentum?
- What programs support or promote equity?

## Reflective

***Gut? Heart -  
emotions, memories,  
associations***

What are your gut reactions about the urgency and community readiness for each priority?

- Which priorities feel most urgent to you personally?
- Where do you sense the most community energy or concern?
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## Interpretive

***So what? Head -  
meaning, value,  
significance***

What do these patterns tell us about our community's capacity and priorities?

- Which priorities have the strongest existing foundation?
- Where do we see the most overlap or synergy opportunities?
- What partnerships would be game-changers?
- Which priorities face the biggest barriers right now?

## Decisional

***Now What? Action -  
resolution, next steps***

If we could focus intensive community effort on only 3 priorities over the next 3 years, which would you recommend?





# Large Group

## Decisional

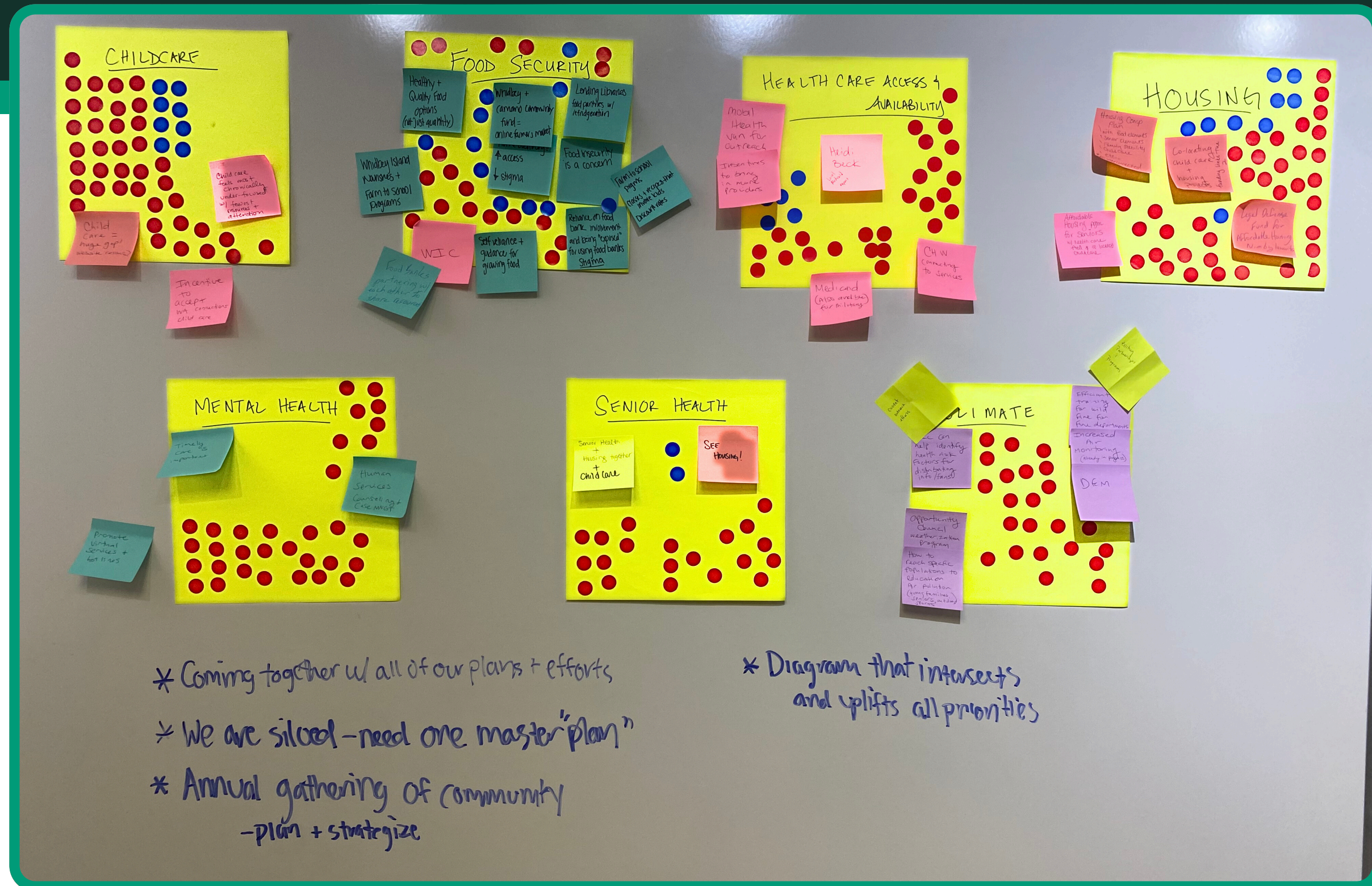
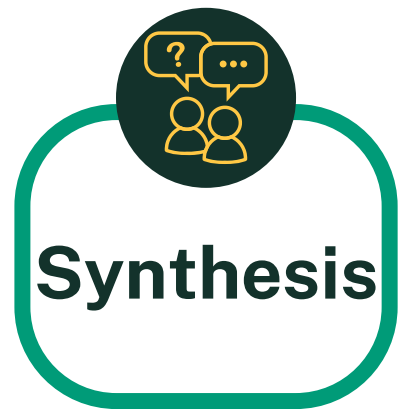
### ***Decision Criteria Reminder:***

- ***Urgency of need***
- ***Community readiness***
- ***Existing momentum***
- ***Partnership potential***
- ***Equity impact***



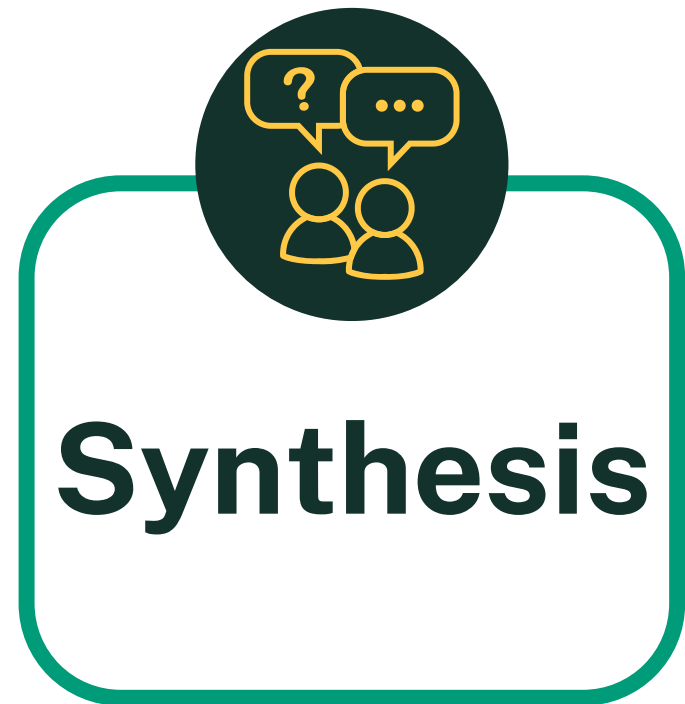


# Key Insights Summary





# Key Insights Summary



**What are the top three?**

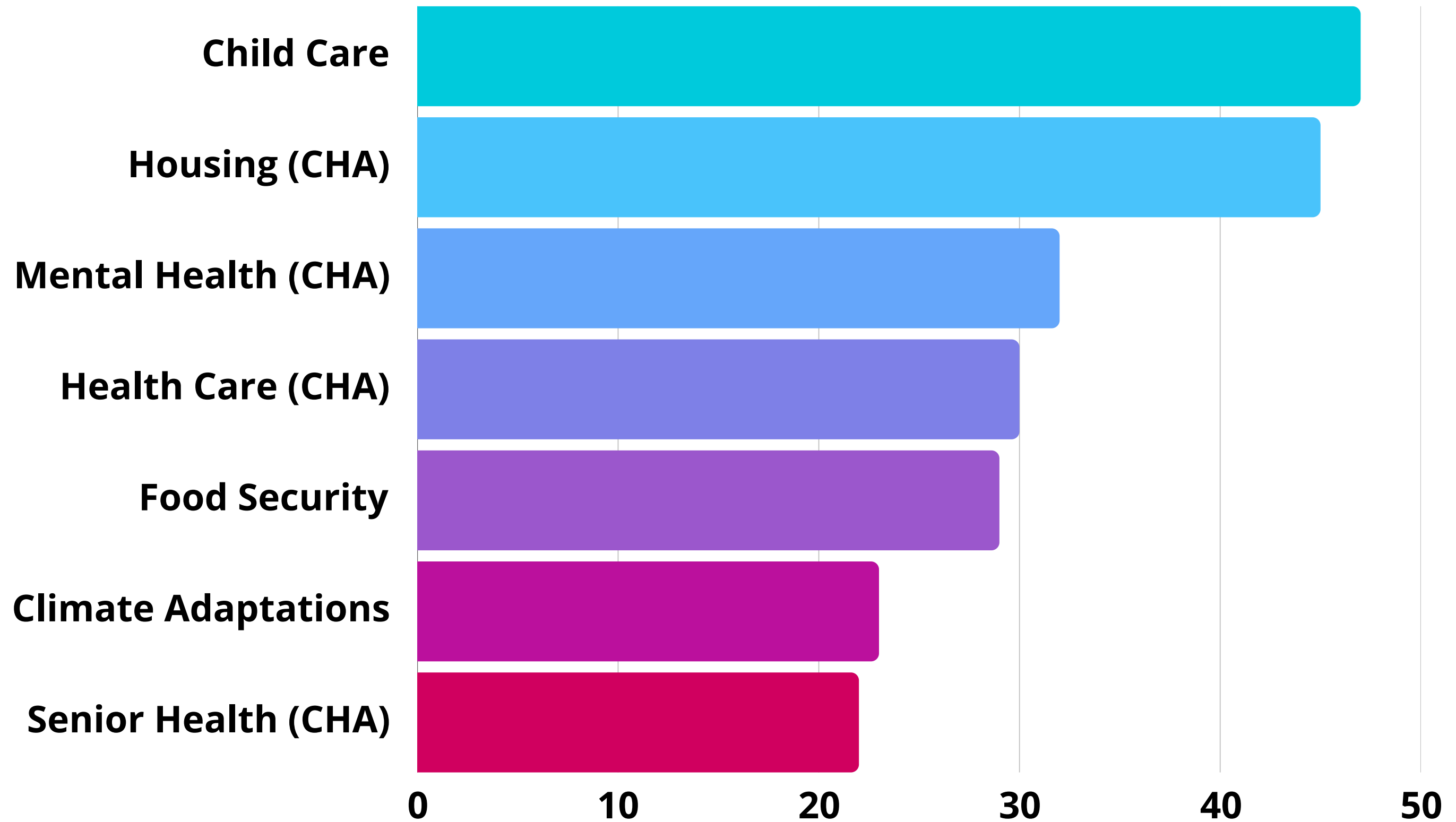
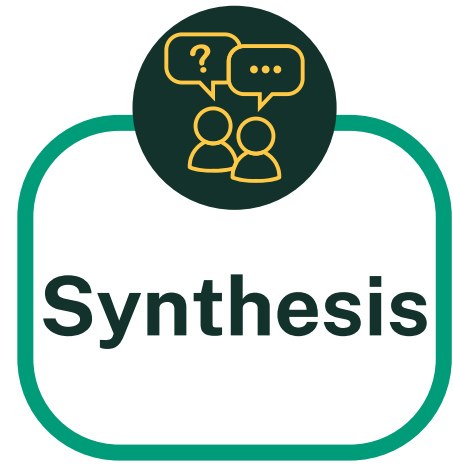
**What key themes emerged?**

**What gaps emerged?**

**Did we miss anything?**

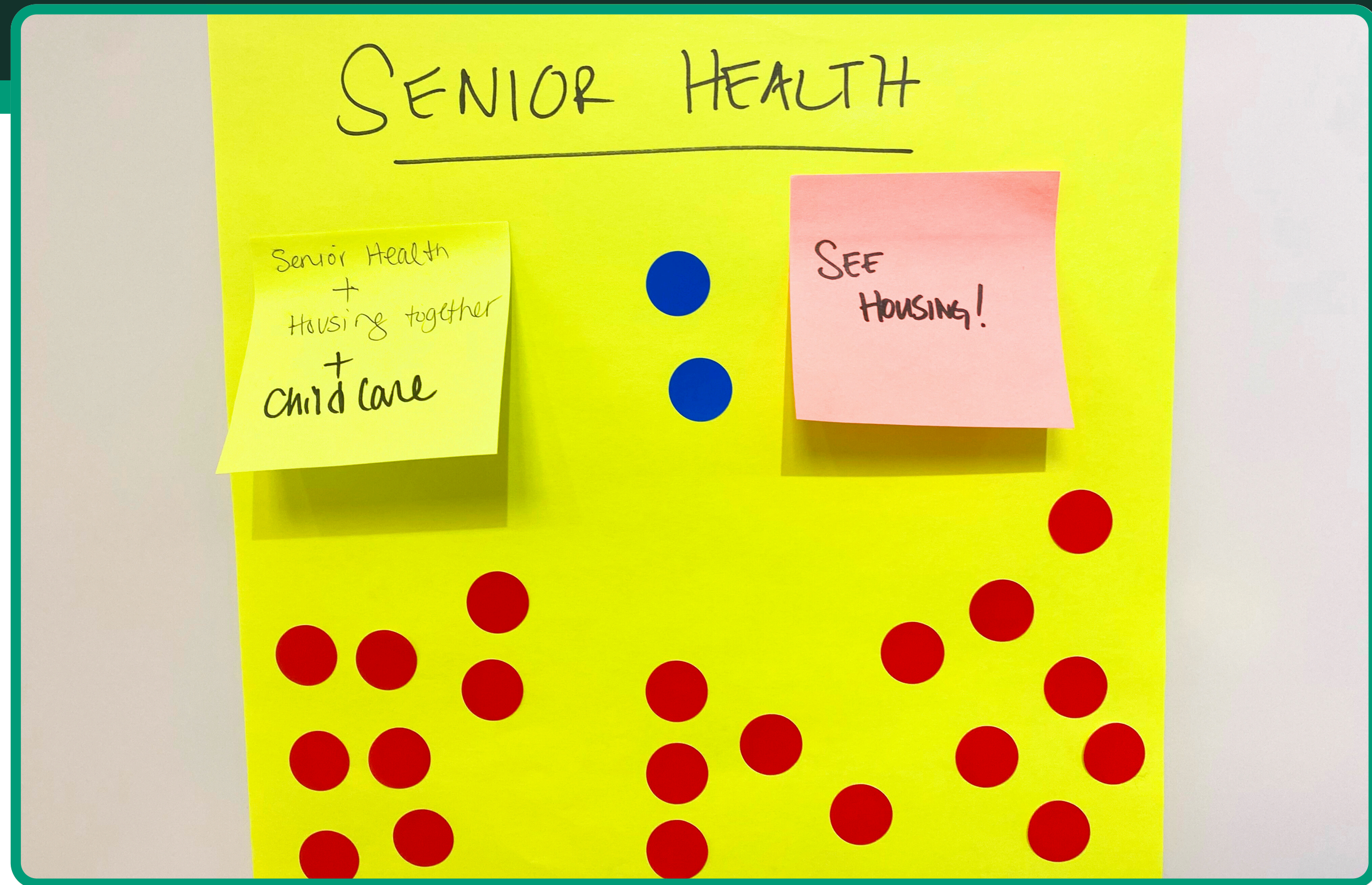
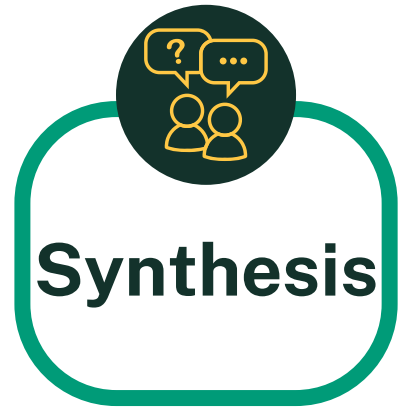


# CHAB Priorities



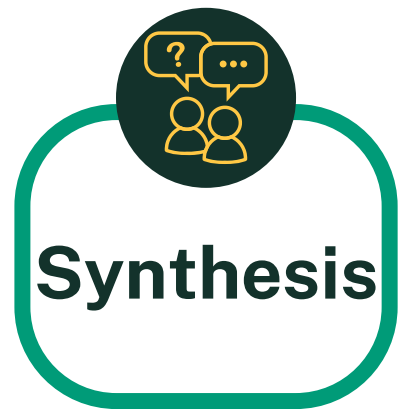


# CHAB Priorities





# CHAB Priorities



- \* Coming together w/ all of our plans + efforts
- \* We are siloed - need one master "plan"
- \* Annual gathering of community
  - plan + strategize





# How We'll Use What We Learned



- **Inform Board of Health recommendations**
- **Guide partnership outreach strategy**
- **Shape community engagement approaches for data walks**
- **Influence CHIP focus and resource allocation discussions**



# Next Steps in the Timeline



- **Board of Health presentation:**
  - **June 2025**
- **Community data walks:**
  - **September-November 2025**
- **Plan development and finalization:**
  - **December 2025-February 2026**







Heidi Berthoud  
Consulting

# Questions?



# THANK YOU



Heidi Berthoud  
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Founder, Principal  
Heidi Berthoud Consulting  
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# Island County Public Health CHIP Timeline



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# CHIP Prioritization Matrix



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|---|-----------|---|---|--|---|--|--|
|   |           | High, Medium, Low   | Yes or No   | Yes or No  | Yes or No   | Yes or No  | Yes or No  |
| Housing Access and Affordability        | CHA       | <b>High</b> for septic infrastructure support and <b>Medium</b> for housing assistance and affordable housing development for Human Services (HS).                        | Yes   | Yes  | Yes   | Yes  | Yes  |
| Climate Health Adaptation               | ICPH Team | <b>Medium</b> for emergency response and planning related to heat and wildfire smoke and CHW outreach.<br><b>High</b> capacity for supporting ongoing coastal adaptation. | Yes   | Yes  | Yes   | No   | No   |
| Health Care Access and Availability     | CHA       | <b>High</b> for PH and HS for care coordination and linkages.   | Yes   | Yes  | Yes   | Yes  | Yes  |
| Mental Health Care Service Availability | CHA       | <b>Low</b> for Public Health.<br>High for Human Services.   | Yes   | Yes  | Yes   | Yes  | Yes  |
| Senior Health and Supports              | CHA       | <b>Medium</b> for partner collaboration and resource sharing for senior health.   | Yes   | Yes  | Yes   | No   | No   |
| Food Security                           | ICPH Team | <b>Medium</b> for PH and HS to provide food assistance and support access to food security programs, and assess food security challenges.                                 | Yes   | Yes  | Yes   | No   | No   |
| Childcare Access                        | CHA       | <b>Low</b>  | No  | Yes  | Yes   | No   | No   |



# CHIP Prioritization Matrix



| Health Need                             | OBJECTIVE: What work is already happening? Programs, initiatives, services? Which organizations are involved? What resources are allocated? | REFLECTIVE: Which feels most urgent? Where is the community energy? Where is there optimism? What feels challenging? Where is equity? | INTERPRETIVE: What does this tell us about capacity and priorities? Where are opportunities for partnerships? What would be a game-changer? | DECISIONAL: If we could focus intensive community effort on only 3 priorities over the next 3 years, which would you recommend? |
|---|---|---|---|---|
| Housing Access and Affordability        |   |   |   |   |
| Climate Health Adaptation               |   |   |   |   |
| Health Care Access and Availability     |   |   |   |   |
| Mental Health Care Service Availability |   |   |   |   |
| Senior Health and Supports              |   |   |   |   |
| Food Security                           |   |   |   |   |
| Childcare Access                        |   |   |   |   |