Meeting Called to Order.
President Thomas called the meeting to order at 5:30 p.m. and asked all participants to identify themselves for the record (see above). He declared that a quorum was present, that notice of this meeting was posted on the Board of Health website, and that the call-in information was included to allow for public participation. This meeting was held in hybrid-fashion with members of the board and staff meeting in-person and members of the public attending online.

ITEM 1. Public Comments (on unscheduled agenda items).
Three members of the public expressed concerns related to BCPH’s response to COVID-19, including returning to normal activities amid the pandemic and vaccine safety.
ITEM 2. Approval of Meeting Minutes.
Board Member Fagan made a motion, which was seconded by Board Member Harrison, to approve the January 9, 2023, Regular Board of Health minutes. With all Board Members present in favor of the motion, President Thomas declared the motion unanimously carried.

ITEM 3. Strategic Planning Progress and Priorities.
Lexi Nolen introduced Kelli Hintch, Elise Waln, and David LaRocca to present the update on the agency’s 2023 – 2027 Public Health Improvement Plan and 2024 – 2028 Strategic Plan, and the plans’ alignment to the Boulder County Behavioral Health Roadmap.

Based on a community engagement process led by the county in 2022, mental and behavioral health was identified to be a priority for the community. BCPH determined to use this priority as the focus of the 2023 – 2027 Public Health Improvement Plan (PHIP). BCPH contracted with a consulting firm, OMNI Institute, in September 2022 to help in the development of the PHIP.

- Board Member Harrison asked what OMNI’s specialty is.
  - Elise noted OMNI supports a variety of strategic planning and evaluation efforts, including working with Colorado LPHA’s and CDPHE on PHIP development, general planning in Colorado and nationally.

Part of the PHIP is the completion of the Community Health Assessment (CHA). The purpose of the CHA is to collect and analyze quantitative and qualitative data to determine current health priorities for the community and the capacity of the public health system to address those priorities. The purpose of the PHIP is to utilize the information from the CHA to prioritize focus areas to develop a roadmap for community and regional partners to make improvements to the public health system and ultimately the populations’ health. Both the CHA and PHIP are mandated by the state of Colorado and will involve a high-level of community engagement.

The Health Planning & Evaluation (HPE) Program Manager was hired in August 2022, and the HPE Health Planner was hired in November 2022. Since January 2023, the Health Planning and Evaluation Team in partnership with OMNI and a CHA/PHIP Workgroup have analyzed and synthesized secondary data, selected priority populations to engage in the development of the CHA and PHIP, developed a community outreach package, and developed data collection tools. Upcoming activities to complete the CHA/PHIP will include community engagement, identifying recommended priorities to include for BCPH in the Boulder County Behavioral Health Roadmap, and the finalization of the CHA and PHIP, including development of action plans by June 2023.

- Board Member Harrison asked if the dates for the CHA/PHIP completion are mandated by the state.
  - Elise confirmed that the CHA/PHIP report is to be submitted to the state by the end of the year. The reason we are submitting in Summer 2023 is due to the
contract end--date with OMNI. There is room to be flexible on the submission date, but the Health Planning and Evaluation Team wants to utilize OMNI to its fullest before the contract ends.

The 2024-2028 Strategic Plan will outline what our organization plans to achieve within the next five years, how we will achieve it, and how we will know it has been achieved. The strategic plan will provide a guide for making decisions, allocating resources, and on taking action to pursue strategies and priorities. While the strategic plan is not mandated by the state, it is considered a Colorado Core Public Health Capability within the revised Colorado Public Health Act of 2018. The strategic plan will include priorities set forth in the previous strategic plan (2018-2022), that include: Climate Action; Health and Racial Equity; Sustainability, Transparency, and Stewardship; Mental and Behavioral Health (this will be aligned with the CHA/PHIP and the county’s Mental and Behavioral Health Roadmap); and additional priorities such as Community Engagement, Policy, and Emergency Management.

Since November 2022, the Health Planning and Evaluation Team has worked with the BCPH Management Team to finalize the selection of strategic priorities and developed a strategic planning project charter, that includes the scope of the project; key stakeholders; activities and milestones; resources; and planning considerations. Upcoming activities for the strategic planning process include the finalization of the charter; review of the 2018-2022 Strategic Plan; identifying and reviewing relevant data; forming strategic priority workgroups; clarifying staff and community input processes; identifying goals and objectives; the development of the evaluation approach; and the plan will be finalized by December 2023.

David LaRocca provided more information regarding the Boulder County Behavioral Health Roadmap. This project was initiated by the Boulder County Community Services Department and is anticipated to be a shared, county-wide, comprehensive roadmap aiming to “ensure access to the right care at the right time”. BCPH’s role in the spectrum of mental and behavioral health interventions lies in the Promotion, Prevention, and Identification and Referral to Treatment spaces. Once the CHA/PHIP is completed, BCPH can make sure the agency is integrated into the county’s roadmap appropriately.

BCPH developed a Mental and Behavioral Health Framework that lists strategies for the agency in this space, which includes guiding BCPH’s work via shared goals and coordinated objectives and strategies; aligning current efforts; identifying gaps; and prioritizing and coordinating funding.

- Vice President McMillan asked if the Health Planning and Evaluation Team plans to conduct community engagement efforts with the entire list of identified priority populations for the PHIP.
Elise noted that the CHA/PHIP Workgroup reviewed disaggregated, secondary data compiled by OMNI in order to identify priority populations for whom (1) there were identifiable disparities in mental and behavioral health indicators and with whom we would like to gain additional community insight, or (2) we lacked sufficient secondary data to know if disparities exist. The intent is to conduct community engagement for the CHA with all priority populations (in alignment with other BCPH and County partners, and as capacity allows). Vice President McMillan asked if the priority population list will be narrowed down throughout the process.

- Elise confirmed - based on staffing capacity and community engagement efforts the list of priority populations engaged in the development of the PHIP in anticipated to be narrowed down.
- Vice President McMillan asked if OMNI will be interacting first-hand with the priority populations or will they be relying on the relationships of community partners.
  - Elise noted that due to capacity, OMNI will be relying on BCPH colleagues and community partners to connect with certain priority populations. In the instances where BCPH or community partners do not have existing relationships with identified priority populations, OMNI will be assisting the Health Planning and Evaluation Team in making those connections.

Board Member Harrison asked why the long-term treatment and aftercare of mental and behavioral health is not included within public health’s scope, and if there is a partnering organization that will be completing this work.

- Lexi confirmed that the treatment and recovery activities are more closely aligned with the responsibilities of Housing and Human Services, Community Service, Mental Health Partners, and other community-based organizations.
- Board Member Harrison asked how often BCPH is engaging with these partners.
  - Elise noted that there is a large overlap in relation to the PHIP work and Boulder County’s Behavioral Health Roadmap, since the PHIP focuses on mental and behavioral health. The team meets regularly with representatives from Community Health and the Boulder Area Agency on Aging.
  - Lexi provided she meets regularly with the Executive Directors of Housing and Human Services and Community Services, and with the Executive Advisory Board for the county’s Behavioral Health Roadmap.
- Board Member Harrison asked if the City of Boulder and the City of Longmont are included in these discussions.
Lexi confirmed that representatives have been included in Behavioral Health Roadmap meetings and planning processes, and will be on the Executive Advisory Board.

- Board Member Hinman asked if BCPH is planning to set quantitative goals for each strategic priority from the start or if there will be qualitative goals that will then have quantitative metrics associated, or a mix.
  - Kelli noted that the Health Planning and Evaluation Team is still developing the types of metrics will be associated with each priority and are focused on building a strong monitoring, evaluation, and learning plan. The intent will be for metrics included within the Strategic Plan to be quantifiable.

- Board Member Hinman asked if the board would be able to view the data that informs the PHIP and strategic plan.
  - Elise noted that OMNI is working to create data briefs to use within the community engagement efforts, and these briefs can be shared with the board.
  - Kelli also noted that it is a goal for the team to develop and launch a community-facing dashboard that provides data on key public health indicators.

ITEM 4. **Staffing Announcement – Health and Racial Equity Manager**

Lexi introduced Kevalyn Maw, who will be serving as the Health and Racial Equity Manager for Boulder County Public Health.

ITEM 5. **Director’s Report.**

- Board Member Harrison asked for further information on COVID-19 data and lessons learned from the pandemic.
  - Lexi noted that BCPH has completed multiple after-action reviews, and the vision of how to situate the agency for a future pandemic is a large focus for the agency.
  - Indira noted that the Communicable Disease and Emergency Management Division is creating an endemicity plan that will provide guidance for the agency as it moves out of the pandemic.

- President Thomas asked how much progress was completed with the 2018-2022 strategic plan.
  - Lexi noted that staff were pulled from their regular responsibilities into COVID-19 response in 2019, which affected the agency’s ability to move specific priorities forward. Kelli noted that there are achievements within the strategic plan that the agency was not necessarily measuring, such as Health and Racial Equity and Youth Mental Health. Other spaces like Climate Action and Sustainability, Transparency, and Stewardship did not make significant progress. Staff plans to provide a final report on progress of the previous strategic plan later in the year.
ITEM 6. Old and New Business.
None.

ITEM 7. Adjournment into Executive Session.
There being nothing further to discuss, President Thomas declared the meeting adjourned into Executive Session at 6:50 p.m. pursuant to Colorado Revised Statute § 24-6-402(4)(f) to discuss the Boulder County Public Health Interim-Executive Director’s performance review, and pursuant to Colorado Revised Statute § 24-6-402(4)(b) for the purpose of legal advice related to the Executive Director hiring process.

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Gregg Thomas,                                        Alexandra (Lexi) Nolen,
President                                               Interim-Executive Director