

"We Are Listening"

Community Engagement: Assessing External Perceptions to Build Internal Capacity

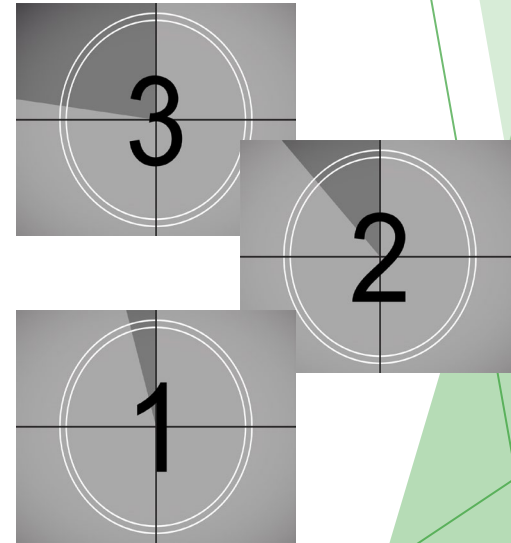
Presenters:

Daniel R. Thorell, Health Officer

Holly Campbell, Deputy Health Officer

Janenne Irene Pung, Community Health Director

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Michigan Health Endowment Fund



COVID-19: What Now?

April 2022 - Adapting, A New Plan

- ▶ Fear & anger created volatile work/life environment for staff & our 109,000 residents
- ▶ Lines are drawn. Blame is being cast
- ▶ Board of Health meetings are contentious, unproductive, 4-hours long





COVID-19: What Now?

**April 2022 - Adapting,
A New Plan**

- ▶ Hostile environment for staff, personal attacks
- ▶ Negative public perception fuels staff burnout
- ▶ Public comments call for the LHD to act separate from Michigan Public Health Code

An illustration of a city skyline viewed through a pair of black-rimmed glasses. The city is rendered in a sketchy, line-art style with various shades of gray, green, and red. The sky is filled with white, fluffy clouds. The glasses are positioned in the foreground, framing the cityscape. The background of the slide features a green vertical bar on the left and a blue and green geometric pattern on the right.

Importance of Assessing Perception

"Perception acts as a lens through which we view reality. Our perceptions influence how we focus on, process, remember, interpret, understand, synthesize, decide about, and act on reality."

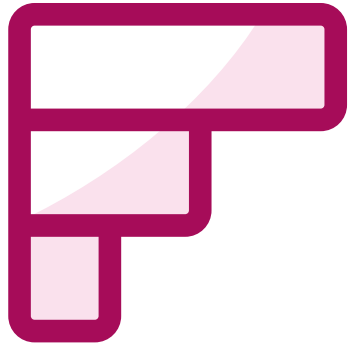
Suzanne Combs-Brown, Global Senior People & Organizational Developer

A New Plan

- ▶ If a communications person - without a public health background - asked you to endorse Community Listening Sessions while exhausted from a global pandemic, **WOULD YOU?**
- ▶ Get out your phone for an interactive poll on the next slide!



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Scan QR code to participate
in poll

① Start presenting to display the poll results on this slide.



HDNW Chooses Bold & Brave

- ▶ **Bold enough to listen**
- ▶ **Brave enough to act**
- ▶ HDNW takes the lead
- ▶ Why?

Respond vs. React

- Assess public perception
- Rebuild trust
- Re-educate on importance of public health
- Heal wounds in community, staff
- How? 2-year grant from the MHEF:
Assessing External Perceptions to Build Internal Capacity
- Goal: Deeper, contextualized feedback to guide strategic plan & improve communications



Effective & Culturally Sensitive Creating the Community Engagement Strategy

- ▶ Set achievable goals
- ▶ Design for qualitative approach to produce data and informative decision-making
- ▶ Secure funding
- ▶ Hire a third-party expert
- ▶ Establish intentions, expectations
- ▶ Supply community contact information
- ▶ Relinquish control

Community Listening Sessions

- ▶ Partner with Kari Krantz, PhD., KSK Consultancy
- ▶ Third-party, non-biased expert to plan, market, facilitate, and summarize
 - ▶ Coordinated through then PIO, Janenne Irene Pung
 - ▶ Some LHD marketing, press releases, Board of Health informed
 - ▶ Little administrative oversight, hands-off approach
 - ▶ Public participation confidential

Campaign

“We Are Listening”

- ▶ Dr. Krantz attended local events to introduce plan & purpose
- ▶ Scheduled 2 per county: 1 in-person, 1 virtual (inclusive)
- ▶ 9th added later for Liberty Rising
- ▶ **Preregistration required**
 - ▶ Maintain integrity, nonduplicates
 - ▶ Plan facilitators



COMMUNITY LISTENING SESSIONS

ANTRIM
CHARLEVOIX
EMMET
OTSEGO

The Health Department of Northwest Michigan wants to **listen to you!**

Round 1 Listening Sessions will be in-person from **6:00-7:30 p.m.** at the following locations:

- May 2 Petoskey Public Library
- May 3 Charlevoix Public Library
- May 17 Bellaire Senior Community Center
- May 18 Gaylord United Way Building

Round 2 Listening Sessions will be VIRTUAL from **12:00-1:30 p.m.**

- May 17 Emmet County Residents
- May 18 Charlevoix County Residents
- May 24 Antrim County Residents
- May 25 Otsego County Residents

Pre-registration required:
[Registration Link](#)

Please join the Listening Sessions in your county!



The Sessions

Ground Rules

- ▶ Listen & give full attention
- ▶ No rebuttals, dialogue or debate
- ▶ No time limits
- ▶ No recording, i.e. cell phones, personal notes
- ▶ No nonverbal communication (frowning brows, head nods)
- ▶ Facilitator takes notes by hand to minimize intimidation, retain anonymity
- ▶ Participants “sign off” to captured themes

HELLO
my name is

Debbie



**CAN WE GET
3 OR 4
VOLUNTEERS
UP FRONT
PLEASE?**



VOLUNTEER



The Process

Questions

1. Talk about your experiences, thoughts, and feelings related to the Health Department of Northwest Michigan.
2. What has been the hardest thing for you? Your biggest concern?
3. What would you like to see moving forward?

The Process

Integrity & Analysis

- ▶ Through registration & quality control, found that 5 people attended 2 sessions
 - ▶ Responses were merged into a singular voice
- ▶ Qualitative Data
 - ▶ Keep in mind, the results are:
 - ▶ Personal opinions
 - ▶ Viewpoints and perception of community members
 - ▶ May or may not represent facts

The Process

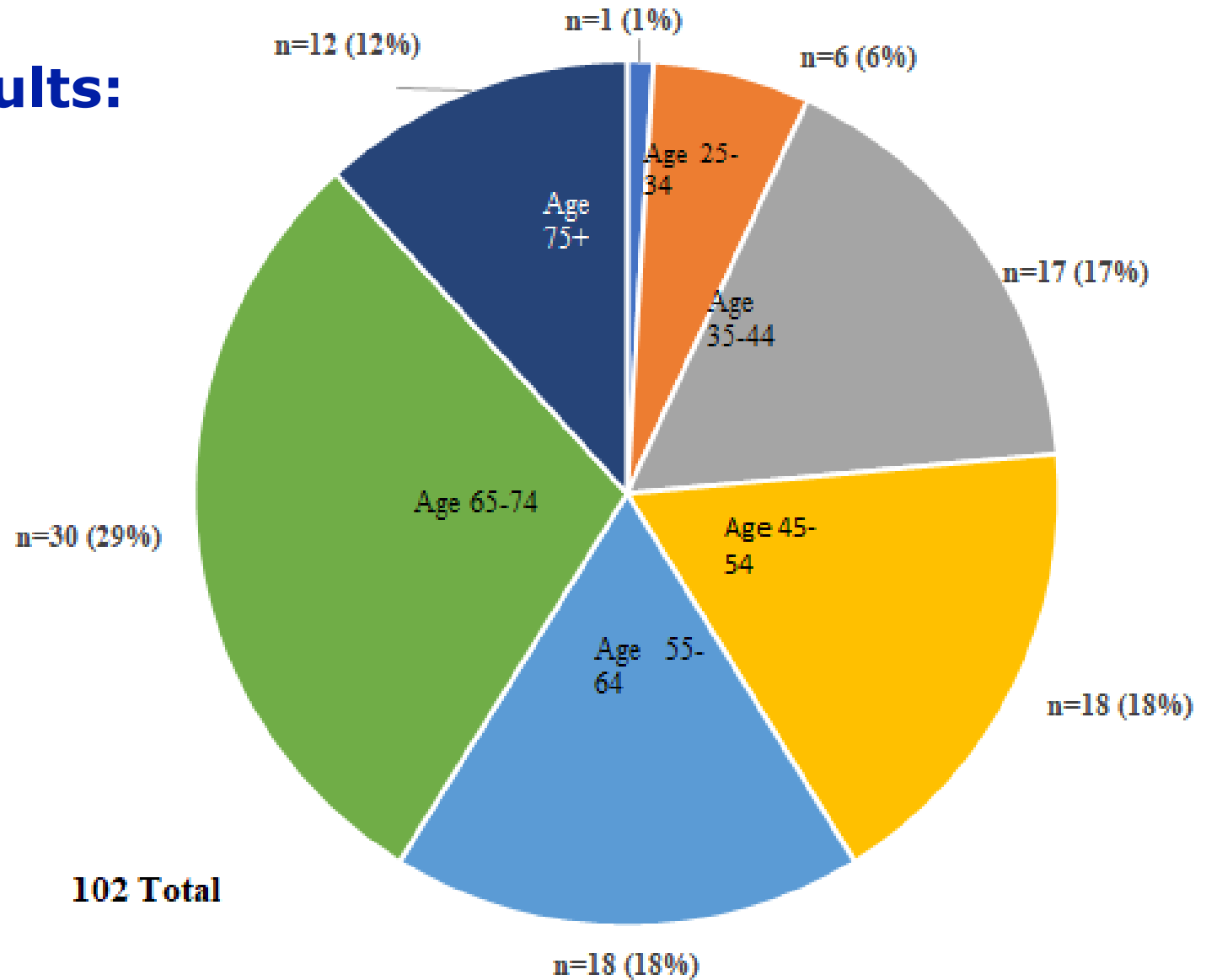
Challenges

- ▶ Many people showed up without registering
- ▶ Some who preregistered didn't attend
- ▶ Everyone who showed up within 30 minutes of the start was welcomed
- ▶ Some were reluctant to sign-in – still welcomed



Results

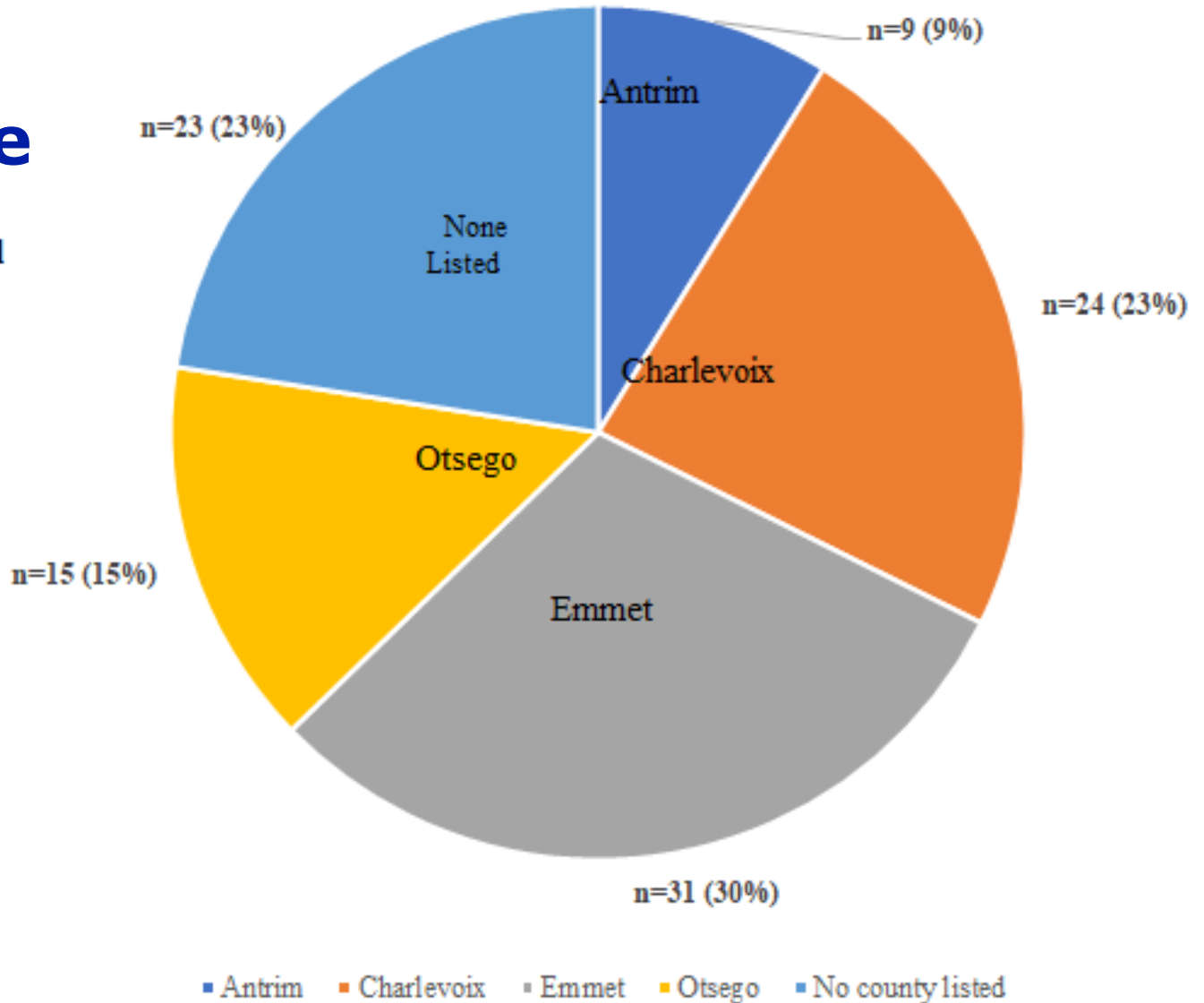
Preregistration Results: Age Groups



Results

Preregistration Results: County of Residence

102 Total





Strong Concerns & Opinions

- ▶ 20+ hours of listening
- ▶ Participants reflected strong views and concerns
- ▶ Few participants were neutral or moderately concerned
- ▶ Most session extended beyond 90-minute expectation, 1 beyond 3 hours
- ▶ Potential for big impact

The Process

Organize & Analyze

Group 1 & Group 2

- ▶ Group 1 - 20.9%
 - ▶ Distrust
 - ▶ Question medical advice
- ▶ Group 2 - 79.1%
 - ▶ Appreciation for HDNW
 - ▶ Trusts agency professionals



Organize & Analyze

Common Themes

Group 1

- ▶ Too much oversight & emergency response power by HDNW during the pandemic (Greatest consensus)
- ▶ Competing medical information countering HDNW
- ▶ Local agencies shouldn't take orders from higher ups (CDC, WHO), which aren't concerned with best interests of locals
- ▶ Needs of the communities should drive grants rather than special interest groups that may not align with values and beliefs

Group 1 Raw Data

- ▶ “I was not aware of the Health Department until COVID. When COVID happened, I tried to discern - very **confusing**, but, looking at legal aspect, [I] felt that it was Governor’s last effort to **control** us. The Health Department has **powerful emergency powers - is it legitimate?** Health Department here - making us all involved in the World Health Organization. I hope for more input for executing emergency [powers] in the future.”
- ▶ “I have **concerns** about the Health Department. There are many good people, but I'm concerned that **good intention is being politicized**. I worry. ...”

Group 1 Raw Data

- ▶ “From the caregiver’s perspective, I couldn't stand to work there anymore - at the medical care facility. I watched all this end - kids, dogs, pets, visiting. All this stopped as a result of the pandemic. COVID got in the facility. 43 out of 45 people in dementia unit got COVID. I want to know why sick patients were sent to nursing homes. We lost so many caregivers because of mandates. I got vaccinated and I will never take another vaccine from the government. My trust is a little busted. Just because people have different opinions, doesn't make us divisive. ... If you only read the newspaper, you only get one side of the story. ... Obviously, we need to look back and admit there were mistakes made.”

Organize & Analyze

Common Themes

Group 2

- ▶ Criticism targeting HDNW caused negative repercussions for staff
- ▶ Newly appointed BOH commissioners don't align with most residents' views
- ▶ Leadership & staff are trained experts; should be respected
- ▶ HDNW offers broad range of services that help the community many people, including the BOH commissioners, aren't aware of
- ▶ Grants should be supported based on community needs rather than rejected due to personal viewpoints from the BOH

Group 2 Raw Data

- ▶ “I know the **quality** of the Health Department and the services they provide. The Board of Health **used to respond responsively** (e.g., received and read reports). Now the employees ... receive death **threats** because of the **political atmosphere**. ...”
- ▶ “On a personal level, I work closely with **addiction and recovery**. I see the positive effects of syringe services and Narcan programs. A lot of people are still alive because of these programs, and **it hurts me to see the backward progress with decisions**. Many people lack information and need more information on addiction.”

Group 2 Raw Data

- ▶ “I thought if a grant came forward, a Board would study it... (e.g., **Mindfulness**). The Board seemed to think that it came from an **Eastern religion**. Oh my. ... On another Zoom meeting I learned that fresh foods were coming into schools. I thought this was wonderful. I see this Board doesn't do their research. I was **appalled by this Board**.
- ▶ As a medical provider - I use the Health Department every week - community connections for my clients, radon, utilities, transportation, connections to other organizations - not being viewed as professional. **I feel sadness** – it’s very hard. **Initially, Health Department was our hero** in our community. Now they can **barely function**. I'm grateful [for the Health Department].

Group 1: Action Items

- ▶ A review of the COVID-19 pandemic response
 - ▶ Were implemented protocols effective?
 - ▶ What went well & what didn't?
 - ▶ Report of findings
 - ▶ Revise crisis plan based on the findings
- ▶ An avenue for medical expertise outside of CDC to be included in HDNW decisions

Group 1: Action Items

- ▶ Halt HDNW's promotion of the COVID-19 vaccine
- ▶ Grants pursued based only on demonstrated needs of the community and the degree to which the associated program/services fall within HDNW's responsibilities, aligns with the mission
- ▶ Exhibit respect for the county commissioners serving on the Board of Health

Group 2: Action Items

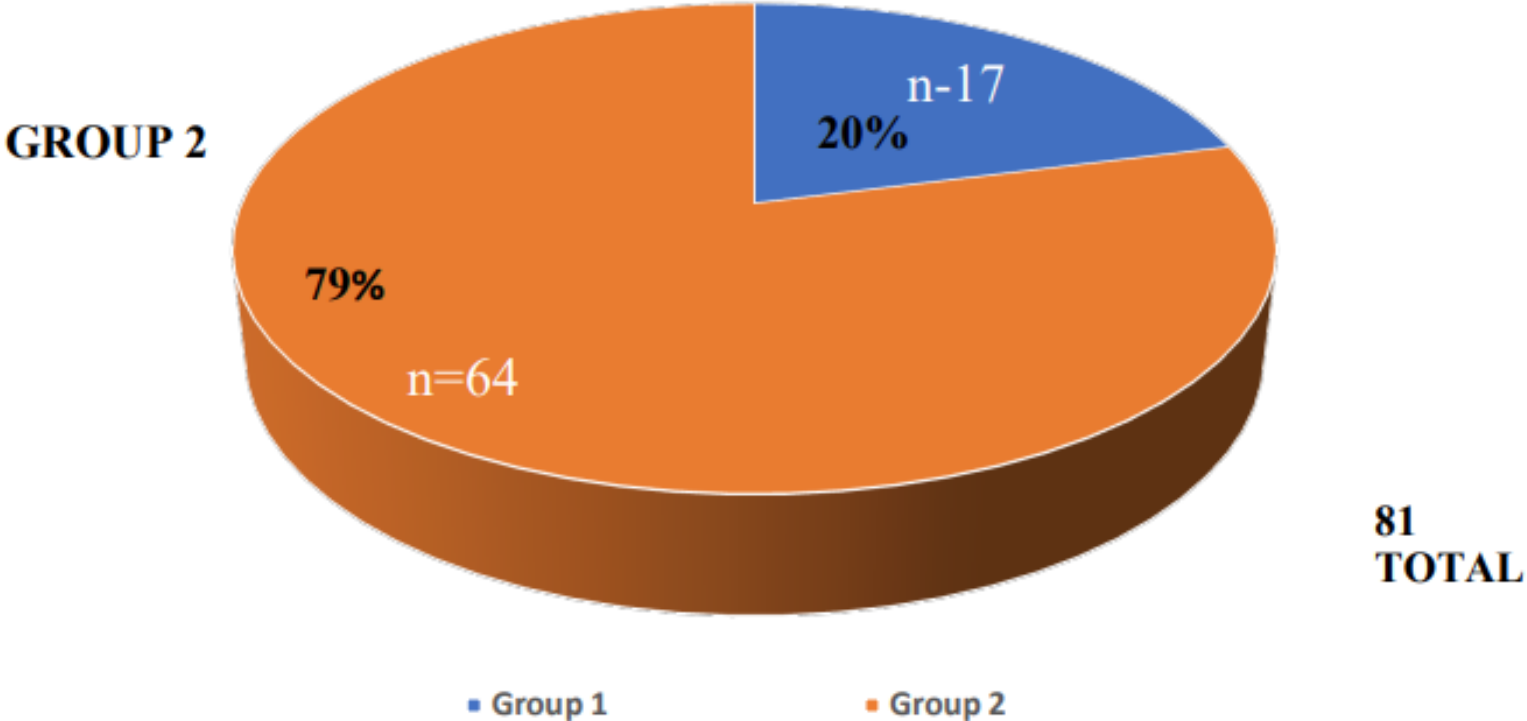
- ▶ Support demonstrated for HDNW employees
- ▶ A halt to unwarranted negative criticism
- ▶ Stop obstructions to the general operations of HDNW (BOH initiated)
- ▶ Increase community-wide knowledge of programs and services
- ▶ Form a “Friends of the Health Department” group

Group 2: Action Items

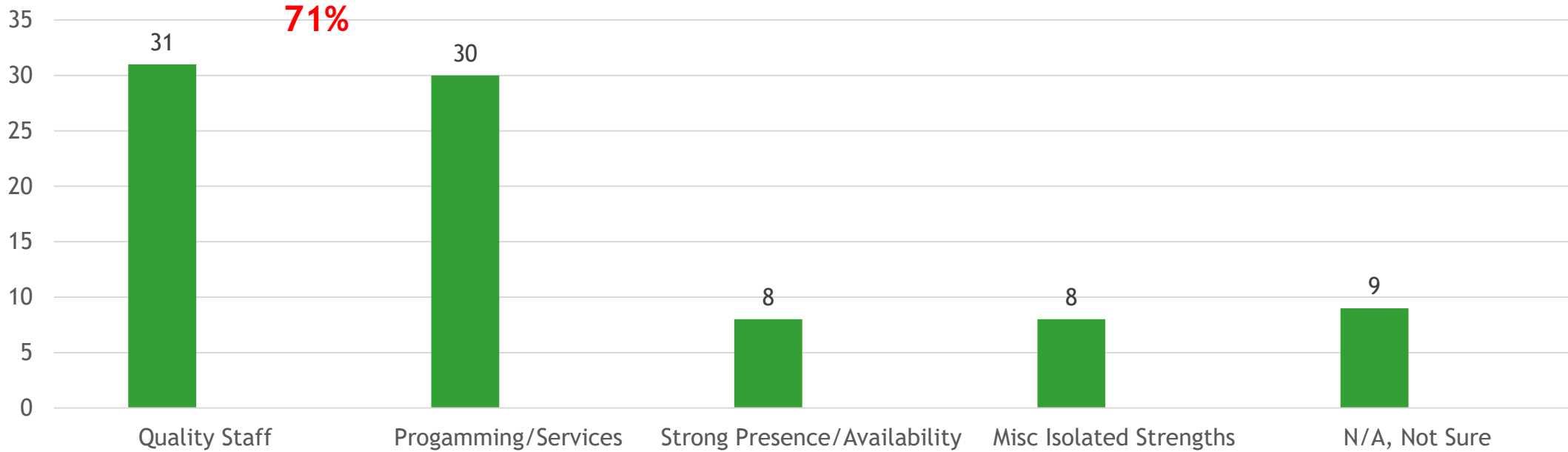
- ▶ Support to improve HDNW programs & services through grants and other supplemental funds
- ▶ Formal training for commissioners serving on the Board of Health
- ▶ Increase understanding of Board's roles & responsibilities

Group 2

Voices Represented by Themes

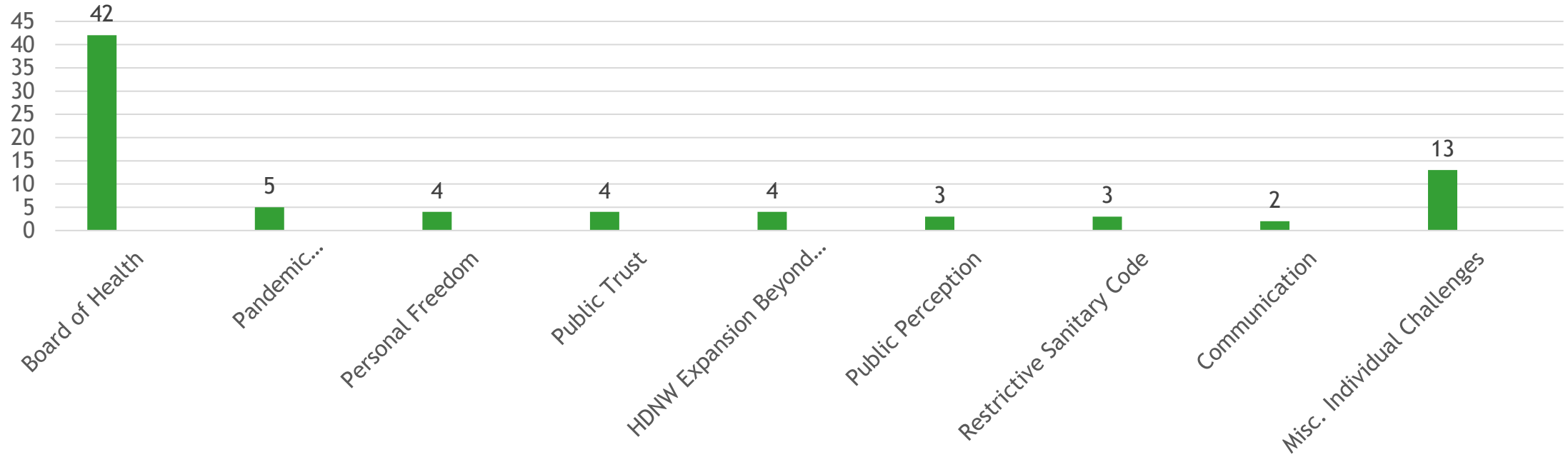


HDNW STRENGTHS



HDNW CHALLENGES & CONCERNS

52.5%



Takeaways

Ensuring Follow-up

Adapt Internal Strategic Direction

“Catalyzing Community Engagement and Collaboration in promoting public health through transparency, outreach, and education.”

- Nurture relationships
 - Join Chambers
 - Personalize social media
 - Launch *HDNW Happenings* using the COVID-19 subscriber list
 - Initiate community outreach events for volunteer staff, based on home office

Takeaways

More Action

- ▶ Foster media relationships – Be available
- ▶ Launch Wellness Wednesdays with 9&10 News
- ▶ Utilize Citizen Advisory Committee as trusted focus group
- ▶ Community session led to Employee Listening Sessions
 - ▶ Identify need for leadership reorganization based on changes & succession planning



Takeaways: Lessons Learned

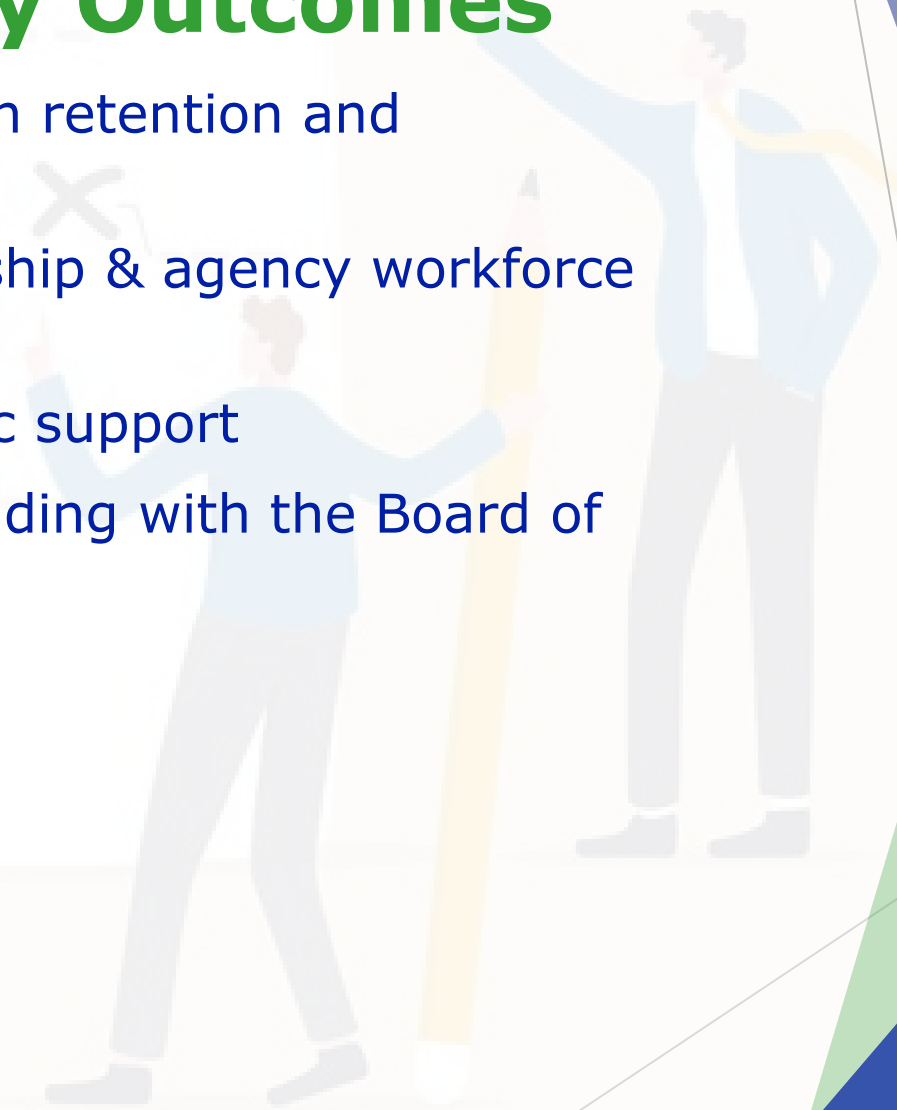
- ▶ It's challenging to live the mission & vision when facing hatred & accusations
- ▶ We can only compassionately educate
- ▶ Internal & external capacity building requires layered & constant plan
- ▶ Community Listening Sessions led to Employee Listening Sessions – invaluable
- ▶ Qualitative is valuable, reinforced by more recent quantitative findings
 - ▶ Friends survey by professional firm



LESSONS LEARNED

Community Outcomes

- ▶ Improvements in retention and recruitment
- ▶ Planning leadership & agency workforce development
- ▶ Improving public support
- ▶ Relationship building with the Board of Health



Reflecting

- ▶ If a communications person - without a public health background - asked you to endorse Community Listening Sessions while exhausted from a global pandemic, **WOULD YOU?**
- ▶ Get out your phone for an interactive poll on the next slide!



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Please download and install the Slido app on all computers you use



Would you do this?

① Start presenting to display the poll results on this slide.



QUESTIONS?

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The full report can be found here:

To receive our monthly *HDNW Happenings*, please share your card or sign-up on our website.



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The End

