



Regional Health Authorities Board Conference Day 2: Population Health

To activate a call for change or action...How can we raise awareness of population health issues throughout the province?

- We have to be on the same page with language of what population means.
- The key is through municipalities - they need to be more engaged and aware. They are grassroots and know best the strengths, weakness, and needs to start change.
- We need to engage different stakeholders in the community such as Rotary and others not involved in health care - everyone has a part to play.
- Schools, municipalities, government - need collaboration among all groups as the government makes decisions.
- Offer healthy town's awards with various criteria that supports increased population health. Offer recognition award, prestige, and encourage rural areas to participate. Receive a sign to place in community and some incentives.
- Clarify and define what public health/population is; create a common language and understanding of what it is we are talking about, especially from the public's perspective, how does it affect us personally.
- Discuss population health at the level of education that our people will understand.
- Publish data and tangible information on what is happening.
- RHAs engage with the stakeholders who make some of this happen (re the things outside of their direct control).
- Every board identifies a town to work towards improving population health.
- Raise awareness and publish the stories of local groups - more impactful if stories are local.
- Not just a top down approach.
- How do we engage youth - this is their environment and health. They have a strong voice and power especially in rural areas. Look what is happening nationally with global movement.
- Can happen at many levels - community, regional and provincial.
- Should prioritize being broad - call for all party approach for discussions and policy change.

- Need to call on our partners in the communities to begin advocating in an effort to drive political focus.
- We need to sell our product with a different strategy - perhaps the drivers and voice should be the CACs.
- Commit as a group to promote the concept of health versus healthcare - and start with the school system - core curriculum.
- Parents influence the behaviour of the children so we need that partnership - however children also drive behaviour of the parents - joint strategy.
- Engage stakeholders in the community.
- Work with local communities.
- Have to have a catch, incentive to engage, cultural shift.
- Do people in communities know what determines health?
- Youth can advocate for opportunities for well-being - biking trails, etc.
- Teaching people life skills and coping at a young age.
- Create a united voice of the RHAs and other sectors including Education, Municipalities & CACs and others.
- Recognize long term planning and results as well as short term initiatives.
- Try new things by focusing on comprehensive school health.
- Communicating the return on investment in ways that the general public understand and support.
- Structural mismatch to address population health.
- Communication strategy to attract public attention - media, communities etc. Do not be afraid to tell the story of current population health status.
- Sharing knowledge of population health and relative statistics with the community. E.g. community assessments/consultations.
- Start from the top. Government focus and knowledge on population health.
- Community events (health care corporations for example) promoting healthy behaviours and embedding into planning and activities.
- Information coming from a community level (compare data of different communities).
- Upstream, making cultural shift from the end of health care delivery to the beginning of healthy living.
- Partnering with Education department, programs that connect into K-12 schools, a way to shift culture and change.
- Methods of engagement have not been working; we need a framework, shared indicators and engagement with local community.
- Politicians and political leaders need to have a focus on population health to make them realize this would benefit them and their party, but also bring awareness to the importance of population health and what it entails.

- Start at the top. Development of priority focus at the top with respect to funding and other resources, and clarify terminology at the top. Cannot only be at Health.
- Go into communities and understand individual needs to improve population health.
- Improve collaboration/communication with municipalities.
- Awareness strategy/campaign (emotional focus): facilitate discussions with communities, offer speaking opportunities at events, media outreach, videos, and social media.
- Our approach to feeding children in schools 10 years ago compared to now is so much better.
- Breakfast programs should be more fruit and grains oriented.
- Engage the private sector (social impact bonds) to galvanize support.
- CACs need to increase their presence in more regions and communities; more activity.
- Engaging editorial groups and media around the issues of population health/communication to the general population.
- Make the issues of population health real for people.
- Engage with communities; enable them to be part of the solutions.
- We need to ensure people know what we are talking about when we say population health.
- Good facilitation is required regarding population health issues to ensure the conversation stays focused.
- Get agreement at a high level; then determine how to operationalize it.
- Expect it to take a long time.
- Engage leaders; find champions.
- Better partnerships to better communicate common key messages.
- Use stories as much as possible; data has a role, but how do we make it real?
- Be strategic with partnerships.
- Use language that everyone understands - what does population health mean? Make sure communications are clear.
- Focus on equity; meaningful support for vulnerable and marginalized people; focus on early childhood support.
- Billboards, monitors, education, hospitals need to be filled with population health messages in the hope of partnership development and awareness.
- RHAs should consider agreeing on one population health focus in their respective strategic plan to leverage collective influence on political and community action.
- Acted too long in silos, should be at municipal level also, develop partnerships, e.g. municipalities are great partners.

- Strengthen partnerships across government, non government and community.
- Attend council meetings to create awareness.
- Need to look at changes globally regarding marketing of food, it is cheaper to buy unhealthy food than healthy food; people have to choose between eating healthy and heating their homes.
- Refer to the New Zealand Model - take it out of Health and adopt multiple agency focus. Government needs to have driving force behind population health and funding for population health. People who can make decisions need to be together.
- More videos.
- More personal; more faces; more real stories.
- Leverage existing community groups.
- Regular health status reports and monitoring - tell the story!
- We want simple solutions to complex problems. We need behavioural change. We must work together to identify evidence based education, and to determine where we should focus on what partnerships.
- Leverage community capacity-this may not cost a great deal.
- Educate and support CACs to apply for grants to establish programs focused on improving the delivery of healthy initiatives in communities.
- Develop curriculum for junior high school students.
- One consistent message with all partnerships.
- Ensure our policies in different sectors are not working in conflict with one another.
- Encourage community involvement; volunteer opportunities; roles for volunteers and community leaders.
- There are lots of population health initiatives but little awareness. Enhanced communications would be helpful. Sharing resources would be good, celebrate successes.
- We need a consistent approach across sectors to measure/establish baseline data to determine what we are trying to change.
- It is a cultural shift and we need to approach things from a more global perspective.
- Supporting CACs by giving them the info and supporting their initiatives.
- There has to be an awareness piece regarding self-management and self-advocacy.
- Consistent collective message from all RHAs.
- Videos like Western Health are deploying. Relying on various social media platforms to promote the conversation more broadly on population health will be helpful.

- Develop a community based scorecard on population health indicators and share specific data with community to raise awareness.
- We need visual cues to support behavioural change.
- Grocery stores could distribute print communications/brochures in grocery bags to explain what population health is about.
- It would be beneficial to weigh in on different campaigns, e.g. fresh fruit, eliminate the use of plastics, etc. This messaging can go a long way.
- Adopt a global perspective, focus on the big picture; act as a team sharing the same message and work together across all dimensions.
- Engage Municipalities NL (MNL) as a visible and viable partner.
- Frontline people play an important role in providing information and awareness to people, regardless of their position.
- Develop an accountability framework for responding to the community needs assessment that is consistent and shared with all partners and each other.
- Keep things simple.
- Be creative in how to reach people.
- Education is key and the adoption of a partner - approach needs to be comprehensive.
- Strengthening primary health care through increased understanding of population health issues at local level.
- Ownership is huge.
- Engage the highest levels of government (the decision-makers); the Premier and Cabinet.
- Empowering people to get involved directly in the issues - identification, promotion, actions, evaluation - enabling!
- Can we learn from where we have had success (e.g. increasing breastfeeding rates) and share best practices?
- Important to clarify collaboration and involve/inform leadership across sectors.
- Community engagement - education directly to town councils, local organizations, and the public.
- Promote public conversation and engage community leaders.
- Allowing local stories to be shared to increase understanding of the issues.
- Asking for a commitment from the media/industry/corporations to engage and have a social responsibility within their communities.
- There is a case to be made for business to promote healthy lifestyle within the workplace.
- Promote greater understanding of EAP plans-where they exist. Employers that have drug plans that support health.

- Community engagement - coffee discussions, to discuss community/population health.
- Collaboration and co - design with community engagement. Advisory committees.
- Come together in small groups within the communities.
- Lunch and learns, promote the positive work that we do by engaging media. Utilize social media and develop provincial campaigns. There may be a variety of ways we target different audiences. Find champions and good stories to reach the various audiences.
- Promoting existing resources that are currently available will assist in awareness building.
- Media strategy. Community leaders need to be part of this.
- Grass root is where this needs to happen - they need the tools and supports provided to help properly educate others.
- Use the seniors clubs to talk about healthy aging and local community issues.
- Partnerships with municipalities (liaison similar to school health liaison).
- Move from where we have been. We have only taken pieces of it. Raise it to an all party level - as that keeps going. Identify who is responsible. Create awareness of what determines health. We need the right people sitting at the right table. We are all working very differently. Still so many sectors within sectors. Create a dialogue amongst the right players. Often we are just putting out the fires and it is so hard to step back without resources and requirements to deal with urgencies. If we could create a better awareness it could make understanding easier. How to reach the hard to reach people - those vulnerable groups. Provide opportunities like this to students. Students need to learn more about population health. Focus on youth!
- Various strategies and ongoing efforts to communicate awareness regarding the importance of investments/connecting the dots on population health. E.g. stressing importance of early childhood development/child care and supporting it as part of promoting good health/determinants of health.
- Good examples of population health focus and sectors working together. E.g. Mobile crisis units - various agencies working to address issues in a different way.

What can be done collectively to support individuals (youth/middle age/seniors) to change their knowledge and behaviours for better health and wellness?

Communities/Community Organizations:

- Youth-offer activities within the school system such as leadership groups, workshops, talking circles, exploring issues that occur outside of school.
- Involve communities, identify issues, plan and action.

- Reinforce the messaging; there are many different ways to communicate.
- Municipalities must be more proactive to support healthy living. Municipalities can lead with built environment and planning.
- Talk with people, not to people, have discussions with the community to improve their knowledge and behaviours.
- Create awareness of the resources that are available to assist in this process, bring service groups and community members together and have discussions.
- Develop age friendly parks; offer accessible environments.
- Conduct a needs assessment to capture the needs of young people - one provincial assessment.
- Place youth on advisory committees.
- Understand how youth communicate; the medium; how to engage – utilize more technology.
- Youth can inform us how best to communicate with them.
- Use schools for after hours program; how can school be better utilized as programming space.
- Offer parenting support groups-to help support the youth who are not engaged.
- Enhanced role of municipalities; community grants, awareness of same.
- Family resources centre-support parents.
- Community health assessment survey is key, getting the information to the people.
- Promote community organization events to bring people together for socialization. Role modelling good practices. E.g., provide designated drivers at community concerts. Incorporate healthy eating into community celebrations.
- Access to physical activity (physical and natural opportunities) for youth.
- Further utilize schools for fitness programs, cooking programs, etc., - this is an affordable way to offer such programs.
- A better understanding of community needs is required - funnel funding to areas in need - not just hockey, etc., but activities for aging. Complete a community assessment.
- Free access to programming for physical activity and social wellbeing for everyone.
- Once they know that the resources are available to them, they need assistance on how to avail of the funding, and how to write the proposal to secure funding.
- Community meetings to educate people on how on an individual level they could improve their health.
- Education on how to leverage different resources in the community for transportation to local programs, e.g., LTC bus and after hours, utilization of school buses.
- Not shaming people when they make bad decisions, accepting and helping people move forward, e.g., smoking in public places.

- We need to talk about population health again and its definition in simple terminology and language.
- Food access (community gardens and making sure it's available to those who want it).
- Recreation focus on all ages.
- Engaging community stakeholders that provide services and identify gaps in their programming.
- Use community assets to promote solutions, i.e., use school gyms as a space for children to play afterschool; a space for seniors to walk inside, etc.
- Organizations like big brother big sister.
- Alternative programs/groups for students.
- Promote activities that exist in community (senior's lunch for social connection); promote across partnerships.
- Focus on digital literacy and safety for all ages.
- More guidance services at schools.
- Offer enhance programming; subsidized programming; utilize community facilities; grants for disadvantaged persons, community groups (i.e., walking, skiing). Senior clubs and activities.
- Schools-support for smaller rural schools through alternatives like technology.
- Creative methods of engaging - build on community pieces - The Dory Story.
- Schools-control use of technology.
- Community gardens.
- Community groups for seniors like knitting groups, book clubs, and intergenerational projects.
- Spin off of community gardens -sheds for the male population to congregate – although this is a generalization, a discussion about how this may work is warranted.
- School spirit (i.e., Friday activities)-support youth.
- Build on positive pieces already happening - don't reinvent the wheel.
- Schools-positive reinforcement (recognition of good behaviour).
- Important to provide the data/information and present the information in a way the community can relate to it.
- School-peer support.
- School-peer teaching.
- Meet families where they already are - church groups; dart leagues.

Health Authorities and Boards:

- Utilize counsellors for students who are disengaged and have behavioural issues.
- Communication (social media).
- Parenting support.

- Sharing and partnerships - information, resources, etc.
- Self-esteem help for students.
- Promote and utilize wellness coalition money. Grants are available, boards support these initiatives and should advocate for more money and invest into projects and ideas that support different groups.
- Health support for schools for disengaged youth.
- Be leaders and advocates to stimulate these conversations.
- Walk the walk - inappropriate messaging around population health issues - Tim Hortons Cookie funds, Minister of Health promoting a burger company, Senior team working at McDonalds on McHappy day - funds go to health but the messaging is contradictory.
- Strengthen CACs - needs assessments; create champions in the community; support the champions.
- Provide Fitbits for seniors as motivator.
- Challenge people to leverage resources in community.
- Look at sustainable projects in partnership with industry to support infrastructure and longer terms to affect change.
- Support community facilitation to have further conversations.
- Four RHAs and chairs to work closer together, collectively, share priorities and make population health a priority.
- Facilitate sharing of good ideas and have open conversations between communities and stakeholders.
- Commitment to bring people together to promote and encourage awareness.
- Primary Health Care Collaborative Community Engagement.
- Boards to bring findings of this conference and recommendations to the department of health to partner on recommendations.
- Local meetings followed by regional meetings.
- Finding a way to meet community members and further engage them to ensure good representation of people with varied lived experience.
- Board should challenge health authorities to channel more resources and supports into population health initiatives and resources.
- Promote awareness of social determinants of health and educate on health literacy.
- Speak the language that people understand.
- Partnership with Schools (SHPLC), PHN in schools.
- Increase awareness around grants and opportunities for funding.
- Partner with community agencies and towns to better communicate resources and supports to certain populations (e.g., seniors).
- Translating indicators in a way that is meaningful for communities, government, etc.
- Boards collectively prioritize population health, to make it mean something to them, what does the future look like for their grandchildren?

- Show the evidence, make connections for people, and return on investment.
- Provide digital access to health information; people want that information to inform their health and wellbeing.
- It takes time to build relationships with partners to effect change at this level. Need resources to support people who can do this difficult work, not off the side of their desk.
- Supports in place, need workers in the community to support the program.
- Simplify access to information, e.g., 311 # in SJ; churches in rural communities; 50+ clubs, there are multiple vehicles for information sharing.

Governments:

- Change curriculum to reflect wellness behaviours - cooking, activity levels.
- Stronger primary health care/nursing/other health promotion presence in schools; and increased counselling/supports available to students.
- Restrict marketing to youth; better regulate marketing to this cohort.
- More community policing support and programs for schools.
- Make it easier for people to make healthier choices; price incentives/disincentives.
- Better use of taxes as disincentives.
- Better utilize taxation dollars and direct to population health.
- Access facilities that are available for multiple purposes (schools, services, etc.) and work with community.
- Walk the walk - as per comment regarding RHAs for support of unhealthy messaging (Cookies) to get funds.
- Make the language make sense.
- Have a collective group of health authorities, power in this room to get together with other groups and work with government to make changes that need to happen.
- Look at the economy from a community perspective. What can be done to increase employment?
- Late busing option- offered by schools - to encourage more participation in after school activities - this may be more important with further regionalization - not a big cost, and could make a big difference.
- Having a vision for the future and commit to change/ideas.
- Financial assistance or programming.
- Economic development through employment opportunities-skill development.
- Support after school/extra curricular activities - give kids a system to be involved within, a reason to interact with other students, build relationships, etc.
- General Comment: Do we have an awareness program or do we have a caring problem? Is it that people don't know they are unhealthy, or that they don't care

to do anything about it? Easier to take the pill, then change the lifestyle - how do we make them care?

- Improve affordability of healthy food (subsidies).
- Consider late starts for high school students - late starts are linked to better educational outcomes - RHAs may be able to initiate the discussions.
- Develop policies to technological access to the whole province (cell coverage, bandwidth).
- More health in all policies engaging these partners effectively. At the local government level as well.
- There needs to be a movement and strategy focusing on population health; to have long term commitments across parties so the work and focus on population health are not lost with government changes.
- Agencies need to collaborate on issues such as housing, education and justice.
- Look at regionalizing some communities; as a collective they could receive the most efficient health care.
- Create a plan for healthy living with clear and measurable indicators across all government departments and hold them accountable for outcomes. We need more and better data to track outcomes.
- Supporting seniors groups, e.g., 50+ clubs.
- Need to shift resources from acute care to the community.
- Realign responsibilities for healthy living and wellness from CSSD to the DOH.
- Implement a living wage.
- Private industry is starting to fill the gaps as well; private nursing homes.
- We need a stronger focus on early childhood and poverty reduction.
- Integrated child service in settings where they need them.
- Policy integration for population.
- Budget allocations.
- Long term vision for population health.
- Health in all policies for all organization.
- Provincial government should look at all spending through population health lens.
- Continue to work with and engage community partners, e.g., seniors groups, family resource groups and persons with lived experience.
- Make government publicly accountable for its decisions.
- Stronger focus on public health framework and standards.

As leaders, how do we work together to develop and implement strategies to improve health and wellness of our population?

- Partner with groups within the community to support all.
- Utilization of the collective impact model.

- The next steps would be to put in place a steering committee of CEOs and CAC chairs to represent the group and be able to report back.
- Chief Medical Officer of Health should initiate process to develop Provincial Population Health report.
- Collaborate and put a strategic plan on paper; highlight recommendations with targets; update as successes occur.
- Population Health Report to include regional data breakdown.
- Get the momentum going that was generated in these meetings and make them count for something.
- Accountability to include population health.
- Strategic plan that is tangible, measurable; determination of who is responsible for various pieces; timelines.
- All party committee needed- identify who would be involved or who needs to be involved.
- We need a sustainable plan; bring in key people to link to the process.
- Regular collaboration activities like this with all stakeholders.
- Four RHA Boards to advocate for all party committee to address Population Health.
- Regional public health directors collaborate with the RHAs to help formulate the plan; we need congruency.
- Provincially driven plan - RHAs working together to form the plan with elements that are measurable, specific, attainable.
- Better universal programs for young children/youth and young families through income, health and education, to support good health practices (e.g., nutritious food, parenting programs).
- Increased collaboration between RHAs.
- Educate the population on the significance and importance of population health. Government must make this a higher priority, and in so doing, we will have more success to move resources and supports to influence a greater impact. We are currently doing good work and having some success, but not at the scale that we need.
- Demonstrate leadership and establish direction.
- Be consistent about the messages, [belittling statement regarding politicians removed].
- Consider investment in prevention.
- What is the ROI on initiatives?
- Do more economic assessments of initiatives - including cost of QALY.
- Quantify the value of initiatives.
- Health and Community Services needs to convene sessions like this.

- We need congruency across the province, similar messaging to groups and from the groups.
- Applying HiAP within their board reports.
- Develop a position document that RHAs will adopt jointly so we are advocating together about what our priorities are. Collectively we can have more impact.
- Include population health in the public health status reports.
- Address confusion around terminology - PHC, Public Health, Population health, Health, primary care.
- We require further board collaboration to divide and conquer strategies to see how they work.
- RHA boards need to meet regularly with government.
- Understand the limitations that comes with lack of capacity.
- Find quick wins to prove that we can have positive impact.
- Better and more consistent communication with stakeholders.
- More focus on Community Care.
- Municipalities to work together (municipalities need to work together to bring more supports to surrounding communities on a bigger level instead of small communities doing small initiatives)-this could reach a bigger audience. We need to bring the communities together on the big issues.
- Tie these types of days and conversations to a structure that will give it life that can continue beyond the day.
- Again extra funding to re-shift money to the community, and health promotion.
- Too many programs underfunded.
- Define the action; what can everyone collectively get behind; what should each RHA get behind?
- Communities to come together within a geographical area to make a difference for everyone! Working together on big initiatives. Same mandates, same goals, same vision.
- Living wage.
- Who is responsible for population health?
- Strengthening the public health capacity both provincially and regionally.
- Strategic investments.
- Continue to build on the positive changes occurring in communities and support the initiatives long term.
- Seek out roles and responsibilities of stakeholders and who can help play what roles.
- Improve capacity within public health to have resources to support the grassroots work that needs to happen at community level.
- Reflect on community values and have achievable outcomes.

- Conversation around public health capacity investment (target priorities incrementally).
- Build on opportunities that we already have, e.g., health and school districts.
- Create an inventory of what we are doing well and build on it.
- Communicate the message on ROI and make sure people understand what the investment is for.
- Establish a strong governance structure and who leads the network.
- Work on engagement and common purpose of the community/initiatives.
- CACs to bring all community stakeholders together to brainstorm ideas to make a healthier community.
- We need to know more about health in all policies across all sectors (RHAs, municipalities etc.) and we need to know more about what it means for us.
- Ensure good communication across all levels, including from CAC to Board.
- We need to know where to find information to help us understand the impact of new policies.
- There is much talk about resettlement and looking at vulnerable populations and how we are investing in small communities.
- Converse with other countries (i.e., New Zealand) on how they have developed a healthy, active lifestyle. Was it a subsidy for housing, food, activity....less worry?
- Face to face RHAs/community groups meetings to discuss and mobilize population health initiatives/messages.
- Do a better job of mobilizing communities to better utilize facilities they have available.