

ALPHA Board Retreat
28 Jan 2006

Brian Saylor
Alice Rarig
Chris Tofteberg
John Riley
Betty Buchanan
Nicole Mode
Brad Whistler
Rebecca Wells
Health Davis
Corky Olson
Sandy Burnham
Jayne Andreen
Delisa Culpepper
Sally Mead
Marie Lavigne

Important to get done today:

Executive Management Functions

Top Priorities

Go through list and make decisions on what issues for ALPHA to focus on.

Alaska Health Summit

Guide Book, How-to
Where and when for 2006

Business Agenda

ALPHA Representation to different organizations
Elect/Assign officers

Facilitator – Sally Mead

Brian – Mission – Advancement of the health of Alaskans

Vision – Alaskans have the knowledge and means to live free of preventable illness and injury.

What would we expect a ED to help us to do?

Alaska Health Summit

Alaska Public Health Institute (APHI)

Legislative and advocacy

Collaboration public health education activities

501c6 to 501c3 – 501c6 more for benefit of members vs for public % limit on lobbying, can't endorse candidates

Affiliate of APHA – APHA getting more supportive of affiliates

Currently 245 members – individual and organizational

9 new members on Summit registration vs about 50 last year – interesting change. Need to send out renewals and retain members. Most members join/renew at Summit.

But high membership for our population – compared to other affiliates. Delisa – and good compared to 5 years ago.

Haven't pushed to get non public health involved, public health advocates.

State members, tribal health big supporter, public health nursing, Anchorage Muni, a couple University, some MPH

Board Members – pretty representative of membership organizations

Keep administrative functions going

Budget

Most revenue and profits – Alaska Health Summit
 Reserve \$25,000 for Summit – goal
 CDSMP – not a big revenue maker, brought us some cash flow and good collaboration
 Membership dues – 5% or less of revenue
 YTD consistent with what we projected
 Expenses within the Summit
 \$25,000 as a line item – for Summit reserve
 Personnel – not large but hope to have \$15000 to carry over to a new contract
 Board travel – creative! Teleconferences save costs
 Membership costs – 4-6 mailings year and Health Policy member newsletter
 APHA dues – dual members, APHA affiliate travel (some funded by APHA)
 Office costs, phone, fax, small rent, etc...
 \$10-12,000 for members good goal

FY July 1 – June 30

Big accounts receivable from Summit costs
 Income consistent with budget
 Summit costs do not include staff time – Marie funded 10 hours a week past year thru Dec
 Venue costs depend on where, food, etc... - different venues have different requirements
 2005 – largest expenses are facility/catering costs and Summit coordination; sponsors
 and registration support all catering and all post summit meetings – we paid in full and
 then invoiced other orgs.
 Cheaper at Sheraton – but only one meal
 Much more done online this year

Net income as of Jan 30 – about \$9000 – operating for winter

Invite people back into the Summit?

Rural Health Conference has become large and these groups are not attending the Summit
 Who would be core partners?

Executive Management Functions

See Scope of Work, Brian review
 Services may be provided by subcontractors – but managed by ED

How to get organizations to leverage support – seems like APHI and Summit would great places
 APHI might continue without ALPHA – support from NWCPHP
 Struggles to get any fee charged. Lost money over time, lower priority for ALPHA

History – build up reserves for a staff member, becoming more than what Board can do – after
 about 4 years had enough to fund ¾ time ED, and this person bring in more funds to sustain
 position; Grants to support infrastructure of public health associations don't really exist. Other
 orgs have had to learn to charge indirect; Or be an educational focused organization

State – some offices over extended so would not be able to take on coordination of meetings –
 need discussions to encourage support of ALPHA and benefits of this. Why is this a good deal
 for them? Again, meetings broken off from Summit – Rural Health Conference – when \$\$ came
 in for telemedicine and community health centers

How to get people behind the Summit? Who are key people to convince?

Delisa – national APHA meeting – shared ED service in other states which worked for several
 small non-profits – maybe we could approach other orgs about this

Brian – did approach without much response

Marie – many new funds – disease specific, many affiliates have become education or legislative
 focused; APHA has increasing interest in helping affiliate infrastructure – APHA received funds
 from RWJ to get person on Board development. Many affiliates staffed by part time retirees.

Funds available for ED functions - \$9-\$12,000 operating plus \$25,000 Summit reserves

Vendor selection – Face to face negotiations with Exec Committee

A contractor to provide executive management functions

Board agrees on priorities in scope of work, don't have capacity to have all functions that Marie has been providing

Essential – clear distinction between other duties and ALPHA (accounting)

Working a meeting that has several purposes – have to be clear who they are working for
Summit Contractor – expand duties

Find a partner – share duties

2 contracts? Summit and one for accounting – probably won't find one that can do both
(Specific to legislative advocacy) ED able to serve as a spokesperson/ voice for ALPHA –
Brad - difficult to be a state employee and ALPHA Board and separate that, Delisa -
some Board members could do that, not all state employees; Brad – much of difficulty
comes when testifying before the legislature

Spokesperson that can testify and rest of Board can help provide information to this
person/committee; Brain – change of face of ALPHA from ED to Board – this function
would then move down in the scope of work

Review Scope of work –

Need to prioritize what Board should do vs a contractor and then prioritize within that

Emerging Issues and Opportunities

Additions to list on agenda

Increase public health workforce **and increase retention**

Green – definite

Blue – important

Yellow – less important

Red – not this year

1) Exec Dir and staffing needs and budget

2) Support Medicine and PH Initiative

- a. Realign medicine and PH community – have branched off with time, funded nationally through APHA with grant from RWJ Foundation, Dr. Carolyn Brown worked with ASMA to get similar initiative operating in Alaska
- b. ASMA – increase understanding of PH

Resource enhancement:

3) Membership

- a. Increase – attention to sustaining members

Cause specific giving

- b. Organizations willing to give but not to other orgs – but willing to give to causes
- c. Explore the value of targeting giving

4) Promote better use of website

- a. Post policy issues, keep up to date

Emerging Issues

Top PH Issues

- 1) Respond to Health Report Card

- a. Released at APHA meeting – ranks states in PH capacity and performance
 - i. Alice – methods of calculating using National denominators may not give accurate picture

**Work to reactivate statewide partners addressing mid decade update of leading health indicators; Identify top issues, trends for Alaska – **sponsor update at Summit for HA 2010 leading health indicators

- b. From ALPHA as a way to unify our members
 - i. Problem – may have arguments over what the top 10 issues are
- c. State not doing much to track HA 2010
- d. Encourage state to do update to HA 2010

2) Oral Health Care

- a. ALPHA resolution – dental health aide program
 - i. Keep it on the front burner
 - ii. Oral health issue been a problem in AK for a long time, highly polarized, fluoridation bill in legislation

3) Chronic Disease prevention and intervention

- a. Dr. Mandsager wants help on this, increment not in budget

Critical PH Issues

1) Include PH and BH in Alaska Health Insurance study – strong green!!

- a. Grant in Alice's office – results in time for Summit
- b. Avoiding BH carve outs
- c. No one else will do this
- d. Group insurance option for small businesses and uninsured – come up as part of the health insurance study

2) Recruit and retain PH workforce – **Host a forum to discuss PH Workforce issues

- a. If ALPHA hosts meeting people will probably come
- b. PH Nursing
- c. State has hired a nursing recruiter
- d. Increasing salaries
- e. Rural Health has track on Workforce at meeting

3) Monitoring State Budgets for Public Health

4) Monitor implementation of PH Law

- a. Regulations to implement PH Law came out about a month ago – inform ourselves and membership

Alaska Health Summit Recommendations

1. Focus!

Board Sets Theme and Tracks and identifies invited plenary speakers
 Concise conference
 3 days w/ALPHA annual meeting and coalition meetings/forums built in
 5-6 sessions maximum
 Strategic/Savvy with \$\$ resources – what does ALPHA want to buy??

2. Format

3 days, MTW preferred - either Nov 28-30, or Dec 4-6, 2006
 1-2 plenary speakers per day, open with best speaker
 90-120 min workshops and/or ½ day sessions
 Daily exhibits
 1 open lunch/networking
 1 award lunch

3. Success

Programmatic and Financial Success - Make it a win-win

For ALPHA	For Sponsors	For Participants
<ul style="list-style-type: none"> ▪ Enhance mission ▪ Visibility ▪ Attract/retain members ▪ Annual Meeting ▪ Education/ CME ▪ Public Forums ▪ Target audience concerned about public health ▪ Increased media attention for events at Summit ▪ Leverage resources ▪ Collaboration with new and existing partners ▪ Educate public about public health ▪ Generate financial resources to support Association 	<ul style="list-style-type: none"> ▪ Visibility ▪ Recognition ▪ New partnerships ▪ Networking ▪ Ads in Programs ▪ Exhibits ▪ Host meetings/ forums with target audience already attending Summit ▪ CME/CEUs ▪ 501(c)3 organization to support ▪ "Cause" driven support ▪ Conference sharing is a win-win for most sponsors ▪ Long time supporter ALPHA and Alaska Health Summit ▪ New supporters 	<ul style="list-style-type: none"> ▪ Largest annual conference of public health professionals ▪ Networking ▪ Excellent quality speakers: national, state and local ▪ Opportunity to present/exhibit ▪ Involvement in Summit planning ▪ CMEs/CEUs ▪ Awards luncheon ▪ Value added benefits, eg. breaks, morning coffee, meals, tote bags, etc are appreciated ▪ Opportunity to be with public health community ▪ Value mission

4. This is ALPHA's Summit

What do you want? Don't give it away

24th Annual Summit

Strategy and format may change but the 24th Summit will go forward with your leadership

It's OK to make changes – the Summit program evolves each year

You are the target audience - make it an event you want to register for, sponsor, support, plan for and attend.

5. For the Good of the Summit

Remember Some of the audience can't justify attendance unless there are little pieces of topic of focus each day, be broad and inclusive

Tracks/ sessions a little broader – learn something new

Only afford to pay for one lunch – Awards luncheon is priority

3 days, Dec 4-6, 2006 (can kick off week with Diabetes conference this year)

Look at DPHE model (Jayne helps planning Nat'l meeting)

Track/\$\$ come together

Board members interested in planning Summit:

John Riley, Alice Rarig, Jayne Andreen, Corky Olsen, Heather Davis – all welcome!

Summit Hotel

Summit RFP put out with all major hotels responding, John reviewed quotes

Sheraton was chosen for dates available and past experience with Summit

John will contact hotel to arrange contract

Summit Theme

The Value of the Public's Health 10 votes

Emerging Issues and Opportunities – prioritized list (Board members voted)

- a) Exec Dir/staffing needs and budget
- b) Sponsor activity on the top public health issues and trends
- c) Host a meeting and have a summit track to discuss how to promote and retain public health workforce
 - i) Part of Summit or need a separate meeting??
 - ii) Report – study on workforce needs within DHSS/DPH, focus on state employment, never officially released
 - iii) Venue – PHI and Public Health Week
- d) Support chronic disease prevention and intervention
 - i) Part of top public health issues?
- e) Public Health Insurance study
- f) Resource enhancement
- g) Monitor state budgets for public health
- h) Public Health Law implementation monitoring
- i) Support medicine and public health initiative

Exec Dir/Staffing and budget revisited

\$9-12,000 plus Summit reserve - \$34-37,000 total

Need cash on hand for Summit planning – half of Summit reserves – to start with

Only want to look at tapping into Summit reserves if same contractor is also doing the Summit planning

Within the state – funding for travel and trainings may get hit, could see reductions of people traveling in for Summit

No way to predict attendees

But costs should stay the same

Need to be very cautious to ensure \$25,000 cash reserve

Work hard to cut costs of Summit so we can put money back in reserves

What do we need to exist for next 12 months?

Interested contractors for Executive Contract

Information Insights (Ellen Ganley) among those who expressed interest at the Summit
Cheri Hemple and others also expressed interest (as individuals)

Showed interest at the Summit, but have not put out a RFP

Ellen Ganley and co. said would be willing, knowing that they may lose money

Could be a single vendor for our needs

Ready and willing

Won't be face of ALPHA or sit on boards

Board Meetings – 2nd Tues of month, 12-1:30pm

John – Move to give Exec Committee authority to negotiate with Information Insights to create a contract that will be voted on by the full Board

2nd - Nicole M/S/C

Monthly fee for corporate work? With as planned for Summit

2 parts to contract, fixed monthly and then fixed fee for Summit

Vote on motion – passed

Business Agenda

Election of Officers - nominees

Secretary – Rebecca Wells, Kate Landis

Treasurers – Chris Tofteberg (Anchorage) and Sandy Burnham (Fairbanks)
agreed to serve as co-treasurer– *pending negotiations with Information Insights –
where does it make more sense to have the treasurer located?*

APHA Rep. – Alice Rarig – continue, elected for three year term

Signature card authority – put both nominees for treasurer on signature card.

Brian will mail updated Board Schedule

Public Health Forum for Gubernatorial candidates

Legislative committee could explore this

Committee Assignments

Exec. Committee (Past President, President, President Elect, Secretary, Treasurer)

Finance

- includes co treasurers, President and Brad Whistler

Nominations and Awards

Nancy Davis, Corky Olsen, Jayne Andreen, Sandy Burnham

Brian will assist on Nat'l nominations committee

Other committees

Legislative

Nancy Davis willing to offer support testifying, other interested –
Delisa Culpepper, Brian Saylor, John Riley

Membership – needs to be established

Resolutions – will be established in the fall

Work the Work Plan at Board meetings

ALPHA Representation

Diabetes Steering Group – John Riley

Take Heart – Heather Davis (already on Take Heart Steering Committee)

State Insurance Study – Brian Saylor

MPH Advisory Board – Delisa Culpepper

AK Dental Health Access Coalition – Chris Tofteberg

Oral Health Workgroup – Jayne Andreen

Cancer Partnership – Alice Rarig

Vaccinate Alaska Coalition – Rebecca Wells

Alaska Contaminants – Betty

Others TBA

Request for contributions

Thank you for several members renewing and/or joining at the Sustaining level

Legislative Monitoring – contract with Caren Robinson signed

Who are champions for PH?

Right now:

Support Infectious disease and preparedness increment – Alice moved, Delisa Second

Thank you to Marie Lavigne who has been volunteering her services since December. The transition to the new contract will be wrapped up in February 2006.

Board retreat adjourned.