PHPDA is pleased to present our 2022-2026 Strategic Framework, inspired by the imperative to *Build Momentum for Change.*

Looking forward as our 2019-2021 Strategic Plan ended, we focused on how we can: 1) increase our impact on health equity and 2) engage in creating a new normal rather than returning to a normal that failed to deliver equitable access to the resources needed to lead healthy lives.

Building on public resource stewardship and community-focused grantmaking, we believe that:

- PHPDA must take a **systemic and partnership approach** to address inequities that are built into health and social systems.
- Our greatest strength lies in the **relationships** we’ve built with others on the frontlines in service to those marginalized. We need to strengthen those existing relationships and build new ones.
- PHPDA must **share the learnings** from community-designed programs addressing inequitable access to health resources into policy-making and systemic change discussions.

Recognizing that our work ahead can only **proceed at the speed of trust** between us and the communities we serve, we opted to create a framework that emphasizes long-range goals and strategies rather than a more traditional plan that emphasizes achievement of deliverables strictly within established timeframes.
Our Process

PHPDA launched our strategic planning process in August of 2021 with the creation of the **Strategic Plan Work Group**, comprised of Governing Council members, Strategic Advisors, and Staff. Bob Cook graciously agreed to chair and Marc Provence stepped up to facilitate.

In a process that relied on the **collective** experience and wisdom of the Work Group, Governing Council, Staff, and consultants, we:

- Refreshed Vision, Mission, and Values Statements
- Imagined our future desired state
- Analyzed gaps between current work and future desired state
- Brainstormed goals and strategies to bridge the gaps
- Consulted with experts to reality-check and craft pathways

Through this rigorous process, we learned what we do well, what could use improvement, and what we weren’t doing. Our leadership wants PHPDA to increase our impact in addressing health inequity because the problems we are facing continue to grow. Returning to the pre-pandemic norm is not an option and neither is only continuing to do the same things that we have been doing.

How do you eat an elephant?

**Traditional:**

“One bite at a time.”

**PHPDA:**

“Invite your friends to come with an appetite.”

---

**Strategic Plan Work Group**

- Bob Cook
- Paul Feldman
- Doris Koo
- Ellie Menzies
- Marc Provence
- Virgil Wade

**Staff**

- John Kim
  Executive Director
- Christina Bernard
  Associate Director
- Mallory Fitzgerald
  Grants Manager
- Gene Yoon
  Communications Manager
- Whitney Regan
  Office Coordinator

**Governing Council**

- Sue Taoka, Chair
  Community Member
- Nancy Sugg, Vice-Chair
  Harborview Pioneer Square
  UW Department of Medicine
- Doris Koo, Treasurer
  Crescent Collaborative
- Ellie Menzies, Secretary
  Community Member
- AyeNay Abye
  Tubman Center for Freedom and Health
- Gloria Burton
  Catholic Housing Services
- Bob Cook
  Washington State Housing Finance Commission
- Susan Crane
  Community Member
- Virgil Wade
  Chief Seattle Club

**Strategic Advisors**

- Paul Feldman
  Retired Finance and Policy Consultant
- Douglass Jackson
  UW Department of Pediatric Dentistry
- Michael Leong
  SeaMar Community Health Centers
- Marc Provence
  Department of Health Systems and Population Health, UW School of Public Health
Vision/Mission/Values

VISION
We envision a world with equity in health for all.

MISSION
We champion equity in health through exemplary stewardship of PHPDA’s public resources.

VALUES
We value:
- Each person’s worth
- Each community’s unique strength, resilience, and knowledge
- System change addressing racism and other oppression
- Innovation, collaboration, and shared knowledge
- Transparency and accountability

Theory of Change
PHPDA achieves positive impact by taking systemic and partnership approaches to problem-solving, and marshalling resources to spur innovation to scale.

Strategies:
- Grants to support innovative community programs that can inform efforts to improve health equity.
- Build community and organizational capacity.
- Develop partnerships with groups and communities to leverage learnings.
- Use partnerships and evidence to impact health and social justice policies.

Intermediate Results:
- Equitable and diverse health programming.
- Communities and organizations share learnings and advocate.
- Range of partnering with PHPDA addressing service and system.
- More equitable government health policies influenced by PHPDA and partners.

Impact: Equity In Health
A Fitting Metaphor

“Alone, we can do so little; Together, we can do so much.” - Helen Keller

Community members arrived from far and wide to help construct our 40th Anniversary mosaic. The goal was to role model our desire to work in concert with our community, championing health equity in the battle for social justice.

Strategic Roles

What do we mean when we say we’re “Championing Health Equity?” We believe that to champion health equity, we must support those facing health disparities, elevate their voices and their solutions - and fight right along side them. And we need to combine our strengths with communities we seek to serve.

As we deliberated on how to champion health equity, we arrived at four specific roles for PHPDA to take. Each role has its own goals and strategies. Taken collectively, these roles form our pathway forward:

- **Resource**: Steward the Pacific Tower Campus and assets to maximize their contribution to health equity, and provide resources through funding, information, and expertise to grantees.
- **Ally**: Be an ally to grantees and communities working to achieve health equity through systemic change.
- **Convener**: Gather and connect diverse voices to work toward health equity.
- **Change Agent**: Prioritize actions that address root causes of health inequity and catalyze change.
**Resource**

**Goal 1**
Net operating revenue is sustained and increased by 20% or more in the next 5 years to support mission.

**Goal 2**
The Health Equity Fund continues improving to meet the evolving needs of organizations offering community-led programs addressing disparities in health outcomes.

**Goal 3**
Grantees view PHPDA as a trusted source of training and resource that help build their capacity to achieve and sustain their missions, and to operate with greater effectiveness.

**Strategies**
- Fully lease all buildings and make strategic use of Campus to generate increased revenue.
- Create more avenues for grantee and applicant input on grant process and broaden the scope of annual continuous quality improvements.
- Deliver valuable capacity-building trainings and technical assistance to current and past grantees.

**Convener**

**Goal 1**
The campus community is welcoming and inclusive, and allied on addressing the harms of inequity.

**Goal 2**
A chorus of voices from health equity advocates comes together, becoming more impactful at the health systems level.

**Goal 3**
Funders work together so that grantees spend less time on duplicative, inefficient funder requirements.

**Strategies**
- Strengthen relationships with lessees and subtenants on Campus, North Lot partners, and the local neighborhood to ensure harmonious integration of diverse and inviting uses.
- Host and staff cohorts of leaders and emerging leaders to build stronger alliances among current and former grantees working towards health equity.
- Convene like-minded funders to engage in more coordinated or collaborative funding efforts, and lower the burden on grantees to apply for, manage, and report on grants.

**Ally**

**Goal 1**
Communities regard us as a trusted partner in health equity and social justice movements.

**Goal 2**
Grantmaking is implemented in a way that begins to dismantle systemic racism and other systems of oppression confronted by grantees and the communities they serve.

**Goal 3**
Increase PHPDA’s focus on funding innovation and programs with potential to scale.

**Strategies**
- Participate in and support community events and other efforts to call for social justice and healthcare for all.
- Contribute knowledge, skill, and experience through participation in associations, work groups, committees, boards, and other groups working on health equity.
- Implement power-sharing models, structures, and models in our grantmaking; change the conversation so we are allies and not merely funders.

**Change Agent**

**Goal 1**
PHPDA’s grantmaking and other activities contribute to systemic changes promoting and supporting health equity.

**Goal 2**
Decision makers seek out PHPDA for authentic community perspectives and input on health equity issues.

**Goal 3**
Contribute knowledge, skill, and experience in interactions with decision makers in meetings and at conferences.

**Strategies**
- Convene like-minded funders to engage in more coordinated or collaborative funding efforts, and lower the burden on grantees to apply for, manage, and report on grants.
“This Strategic Plan is a meaningful and important statement PHPDA is making together.”
- Sue Taoka

“This is an anchor on our continued commitment to champion health equity.”
- AyeNay Abye

“A blueprint for success. This is about our partners.”
- Paul Feldman

PHPDA partners with community organizations to improve access to health care services in King County.

In 1981, the City of Seattle chartered PHPDA to steward the historic landmark Pacific Hospital Campus. PHPDA works to advance health equity for residents of Seattle and King County through the Health Equity Fund community grant program, selective Campus programming, and upstream systemic change.