



Steering Committee
February 25, 2015
Meeting Summary Notes

Meeting Attendees: Stephanie Landrum, Gina Warren, Connie Chan Robison, James Palmieri, Monica Hernandez, Dominique Ritley, Ramona Mosley, Megan Sheffield, and Yvonne Rodriguez

Excused: Marcella Gonsalves, Richard Dana, Rachel Rios, Kim Williams, Robert Phillips

Staff Attendees: Leslie Cooksy and Fatima Malik

I. Welcome/ Introductions

Robison welcomed Steering Committee members to the meeting and reviewed the agenda.

II. Meeting Summary Notes Review

The January 14, 2015 meeting summary notes were reviewed and approved MSC: Ritley/Rodriguez.

III. Strategic Planning – Overall Discussion

Robison led the group discussion by starting the conversation with a list of initial assumptions. The group then discussed thinking about the work in two phases.

What we know/have

- No one telling us what to do (not bound by grant requirements); we (the coalition) are creating what we want (the communities should be telling us what to do)
- We are volunteer-based; no direct funding to support the work moving forward (in-kind resources)
- What HSC is good at: convening, collecting information, and mobilizing resources
- We have information on prioritized neighborhoods that can be beneficial to share with the community members (data, resources, and needs) and this can help the community write a proposal for themselves.
- HSC's work could be: services/programs, capacity building/organizing, and policy/systems change

Phase I Activities

- Narrow down the number of communities (focus)
- Develop action teams: comprised of a North Sacramento Action Team and South Sacramento Action Team (includes HSC Steering Committee members as volunteers and well defined roles)
- Presentation: prepare stock template that speaks to: who are we, what motivates us, what we think we know
- Engage communities through forums, community listening sessions, key informant interviews, youth activities, asking: what is really happening, what is important or needed?

- Develop plan: with residents, youth, partners
- Indicators of success for phase 1:
 - Leaders embrace action
 - Residents have more information (in neighborhoods, figure out where to go)
 - Ready to go with next steps; develop plan/materials/questions

Phase II Activities (tabled for future conversations)

- Capacity Building
- Services and Programs
- Policy, systems, and environmental change
- Indicators of success for phase 2 (examples)
 - Tangible accomplishments of any kind
 - Policy input to Board of Supervisors or other entities

IV. Strategic Planning for First Phase of Proposed Zip Codes

Palmieri mentioned the Community Health Worker LOI that was submitted a few months ago as an important consideration because if the proposal moves forward this may influence the direction of the coalition.

Cooksy provided an update on the BUILD HEALTH Challenge proposal process. In response to the LOI that was submitted in January, we are invited to submit a full proposal which is due the first week of April. More information will be provided to the Steering Committee as it is received.

The Steering Committee discussed the implications for the coalition's direction and the LOI for the BUILD HEALTH Challenge proposal. Questions were raised regarding how do the goals and objectives of the coalition align or fit within this opportunity. The Steering Committee acknowledged the need to be careful when pursuing future opportunities. The BUILD Health Challenge was recognized as a great opportunity and upon review of the parameters of the proposal, the Steering Committee will determine the extent of alignment. The committee members stated that funding opportunities should be pursued only when it is in alignment with the goals and objectives of the coalition.

The choice to pursue the BUILD Health Challenge proposal will be a thoughtful process. Palmieri stated that the proposal does fit with the coalition and perhaps it can be used as a launching point for outlining future coalition efforts. In essence, the CHW model would be great to establish, as CHWs can serve in a multitude of roles and capacities. Establishing the CHW model may provide a variety of benefits for the coalition. There may be a great deal of alignment and the members would like to take a further look the proposal.

The Steering Committee engaged in a robust dialogue on tangible next steps that would activate the coalition to host meetings in the neighborhoods (by way of presentations and other venues).

The Steering Committee suggested the idea to organize the coalition by region, north and south Sacramento into action teams. The priority zip codes in Phase I would be labeled as north or south, with downtown being a part of the north Sacramento action team.

Each action team would be responsible for doing a deep dive into the community that is focused and would provide input to establish a relevant action plan. Using standardized data collection methods

The Healthy Sacramento Coalition is made possible by funding from the Sierra Health Foundation.

across both action teams the Steering Committee seeks to gather additional data (community listening sessions) to engage residents and community members and identify (tangible) opportunities to improve health. Coalition members would be encouraged to participate in either or both action teams. Members of the Steering Committee would be asked to help facilitate and provide support to each of the action teams.

One member stated that it may be premature to break into action teams and suggested an alternative approach. The recommendation is to identify what community needs/wants are first and then develop workgroups around the information gathered. Existing information (on community health needs) could be delivered to neighborhoods followed by the development of workgroups as needed. The coalition has data; which should be packaged and reported out (to the community). We should also gather data (assessment) from the community to inform the coalition's plan of action.

The Steering Committee agrees that having an action team can help share data with the community (social determinants of health) and also engage in a dialogue on what resources the coalition has available. This approach would help engage the coalition in smaller group setting conversations with the community to understand the heart of the matter, to find out what the community needs are from their perspective, and to host listening sessions. This may be something that the action teams are allowed to figure out.

The group agreed to continue their dialogue during the next Steering Committee meeting. They will prepare a presentation to share with the coalition during the March 25 general coalition meeting.

V. Discuss March 25, 2015 HSC Meeting

The Steering Committee confirmed that the coalition will meet on March 25. During the next Steering Committee agenda will be drafted.

VI. HEAL Workgroup Vice-Chair Vacancy Update

This agenda item was tabled for discussion at a later time.

VII. Determine Steering Committee Meeting Date for November 2015

This agenda item was tabled for discussion in September when the newly seated Steering Committee members are appointed.

Next Steering Committee meeting date: Wednesday, March 11, 2015 11:45 a.m. – 1:30 p.m.

Next HSC general meeting date: Wednesday, March 25, 2015 10:30 a.m. – 12 p.m.