

MONDAY, JANUARY 22, 2018

OFFICE OF HEALTH EQUITY (OHE) ADVISORY COMMITTEE (AC) SUSTAINABILITY SUB-COMMITTEE MEETING

DRAFT STAFF NOTES

MONDAY, JANUARY 22, 2018

Members of the OHE Advisory Committee

will be calling in to this sub-committee meeting from the following locations.

Members of the public are also encouraged to call in to this meeting.

Conference Line Call in number: 866-434-5269 PIN: 3249261

Alternately, members of the public may participate from the following locations

(if applicable, check-in with security at the front desk upon arrival):

Health Services Complex, Library Room, 3851 Rosecrans Street, San Diego

Temecula Public Library, Community Room, 30600 Paula Road, Temecula

PolicyLink, 1438 Webster St #303, Oakland

3:00 p.m. – 3:15 p.m.

Convene Meeting and Welcome | Roll Call | Agenda Review | Chair Selection

Tamu Nolfo, PhD, OHE Sr. Project Manager

- **Welcome and Roll Call**

San Diego: AC Member Jo-Ann Julien

Oakland: AC Members Manel Kappagoda, Sarah de Guia, and Dalila Butler

Temecula: AC Member Guillermo Gonzales

Member of the Public: Carol McGruder (on phone)

OHE Staff: Peter Oh, Tamu Nolfo, Noralee Cole, William Porter, Marina Augusto, Solange Gould

- **Sub-Committee Purpose:** At the 12/14/17 Advisory Committee (AC) meeting, there were presentations from OHE looking back at the accomplishments of the office, and also the goals in its future. The office will have limits to what it can accomplish in the future if its infrastructure is not well sustained. The 12/14/17 presentations were very well received, helping the AC members to gain a fuller understanding of the breadth and depth of OHE's work. It also made them want to better understand the sustainability issues and what they could do to put the office on solid footing. Along with that, they recognized it's impossible for OHE or the AC to take on everything, so they wanted to be intentional in setting the AC's goals for the upcoming year. The sub-committee was established to make recommendations to the larger AC group.
- **Sub-Committee Chair Nominations:** Manel nominated Sarah. Sarah accepted. Ayes: Jo-Ann, Guillermo, Manel, Dalila. Sarah was elected as the chair of the meeting.
Background on Bagley-Keene rules re: communications as a sub-committee: Not allowable to have more than two people meeting outside of the regular AC meetings to plan the AC meeting agendas or make decisions impacting the AC. "Daisy-chain" is not an acceptable alternative (talk to one person, then they talk to another, etc.). All AC members can talk to Tamu because she's staff.
- **Public Comment:** Carol agrees with what has been stated thus far.

3:15 p.m. – 3:30 p.m.

Learnings from the December 14, 2017 Advisory Committee Meeting

Tamu: What stands out that made an impression on you? What inspired you to want to join this sub-committee?

- Dalila: How clearly and masterfully OHE set out their accomplishments over the last year and are a great model for the AC. The work aligns with ourselves and our partners. Excited to think about AC priorities,

including how we'll track our recommendations and see them through. We need to showcase their importance, create a high standard for health equity.

- Manel: Agrees with Dalila—impressed by all the work and vision; need to step back into the purpose and goals of the AC and what needs to happen going forward. Does the impressive work tie into the original goals of Portrait of Promise? Concerned about budget issues, about funding key staff, and ongoing sustainability. Feels strongly that OHE is extremely important for CA and the nation.
- Guillermo: Important that OHE speaks to the issues happening in the world and remains part of the health care conversation. "You're either at the table or you're on the menu."
- JoAnn: There's still so much work to be done. Much to do re: sustainability. How do we leverage our position to ensure sustainability? There is no shortage of work on the equity front.
- Sarah: The presentations opened my eyes. It was a comprehensive perspective of the five-year journey. What do we want to see over the next five years? How can we be leaders and role models for the rest of the country, a beacon of light? Budget is of concern because our great work does not seem to attract the appropriate funding. We need to look at the statute and how it's impeding funding from other departments. Shouldn't we have resources coming in our direction? Can we be the touchstone for what's happening in the community, and also an advocacy arm (the individual members, not necessarily the body)? How can we be helpful in messaging or visioning how OHE can go forward strongly for the next five years?
- Dalila: Wanted to be engaged to get the thinking started. The AC wanted us to bring recommendations to them and it is hard to get from raw data to specific recommendations in the full group. I'm anxious for us to come up with suggestions to share with the rest of the AC.
- Sarah: The AC could be of more help regarding sustainability if brought into the conversation earlier.
- Tamu: Possibly not brought in earlier so as not to tarnish the good work we are doing. Hopefully we can continue to talk about it in the future.

OHE Staff:

- William: Excited to hear the interest-level of the committee to pay attention to future needs of the office. AC can be essential to bring future needs and goals into focus and connect us with the right people to accomplish the goals.
- Marina: Eager and excited to work more closely with the AC. Many of the member have supported us in being the arm and ambassadors to the work. We all came into this work with our plates already full with no budget and a required set of work to do. Not a lot of dollars connected with the legislation. Good that we've been able to leverage to this point but if we want to do deeper work in policy and systems change, we will need more. It's wonderful to have the AC as an arm or extension – ambassador – to our activities.
- Tamu: Daunted by the amount of work we are asked to do and could be doing if we had the time and money. We have to say no sometimes or get burned out. The office has much passion but is unable to do all that we want to do because of lack of dollars.

Public Comment:

- Carol: Not directly involved but a cheerleader from the side-lines. Not sure what the funding issues are but the California Tobacco Control Program may have some resources to intersect to support health equity issues. Prop 56 is generating hundreds of millions in new dollars.

Tamu—Talked about seeing the funding coming into the office in about five different ways:

1. Legislative, Budget Change Proposal (BCP)—not successful so far.

2. Funded interagency agreements—none so far. There seems to be an odd interpretation of the founding OHE statute that says one of the things we do is to build capacity in other agencies to build health equity. It has been interpreted that it should be free up to this point. It makes more work for OHE without any funds for staff or training.
 3. Private sector, and philanthropies.
 4. External actors: AC and legislators. Programs inside of CDPH and the California Health and Human Services Agency (CHHSA). We could reach out to other programs and departments. OHE was essentially created to serve the Department of Health Care Services (DHCS) as well as CDPH. No dollars currently connected between OHE and DHCS, but there could be. There are four goals in Portrait of Promise that directly relate to the health field, and their implementation could be supported through funding from DHCS. We could also, for example, see about getting funding from the Air Resources Board.
 5. Currently getting dollars for California Reducing Disparities Project (CRDP) from the “millionaires tax.” Is there an opportunity to go back to the Mental Health Services Oversight Committee (MHSOAC) to get more money?
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- Manel: Can we look at funding from interagency agreements going forward? This is the language in the statute: “Provide technical assistance to state and local agencies and departments with regard to building organizational capacity, staff training, and facilitating communication to facilitate strategies to reduce health and mental health disparities.”
 - Tamu: The interpretation was originally made within CDPH that since we’re called out to do this in our statute, we can’t charge other state departments for our services. Dr. Smith is pondering why it was interpreted that way and how we might move forward toward this funding opportunity.
 - Sarah: I’m hoping to fulfill Portrait of Promise goals and open up funding for them. We could go to funders with a vision of the goals we want to achieve over the next few years. Structure shouldn’t dictate work outcomes -- don’t let the current structure define what the work should be.
 - Marina: We might look at the structure of OHE and the impact on the diverse populations in CA regarding health equity. CDPH has been a good place for OHE, but we could ask the question if it should remain there. Should we be in CHHSA to be able to influence many other departments? How would it look if all other departments had to imbed these health equity issues into their policies? (Tribal consultation policy as an example of cross-agency work that OHE is doing.) With dwindling resources in the most diverse state, where is the best place for this office to remain? We want to create momentum and impact.
 - Tamu: It could affect impact and sustainability to be drawing resources from a larger pot.
 - Sarah: A great idea to think of. Consider the intersection of health and poverty. The Department of Social Services is in CHHSA.
 - Manel: Can you share with us OHE’s funding sources?
 - Tamu: Currently OHE is funded through AB 32 – Air Pollution Funds, Obesity Funding, Prop 99 Tobacco Tax Funding, Mental Health Services Act, General Fund, Distributed Costs, Prevention Block Grant, and BRACE (Building Resilience Against Climate Effects – CDC) funding, for about \$5.1 million in 2017-18.

3:30 p.m. – 3:45 p.m.

Criteria for Recommending Priorities to the Advisory Committee

Purpose: Discuss the criteria by which this sub-committee will decide on the priorities to recommend to the larger body.

Jo-Ann Julien, MEd, OHE Advisory Committee Member:

Over the holidays, Jo-Ann got excited and thought about what “bold” meant in “bold and audacious” goals. Criteria for bold and audacious. Being a beacon. Important to do what we do in such an important time.

Wanted to see us be consistent with Portrait of Promise. Wanted to understand why people voted against the creation of the sub-committee, when the intent was to align with Portrait of Promise. Want to be part of something that shows that we are leaders and elevate CA, and we can be proud of, something that can show the country what can be done.

(Jo-Ann reviewed highlights from *Sample Criteria for Identifying Bold Goals* document, which she created for this meeting.) When we talk about issues, make sure the talk is discrete, clear, and understandable. Discrete meaning: tangible and concrete in nature (for example, funding opportunity #4 from above). Great if it could unite the state and all the different departments; alignment being key. Could we do something in this area? Focus on human rights or social justice: items that rise above politics and that most people would agree with. There are lots of good descriptions in the criteria document. Is there anything we can add?

- Dalila: Do we want all of the criteria to be met for each priority, or would it be okay to have just some of them met depending on the priority? We could look at the feasibility and what might be done in increments, not necessarily fitting all criteria at once.
- Jo-Ann: Consider this to be guidance, rather than criteria.
- Manel: This is helpful. Portrait of Promise has concrete goals. We could revisit and prioritize what we will work on, with this guidance in mind. Which goals have been met and which are done or being done (p 87 assessment to monitor goals)? Concrete goals that ambassadors can get out to the public.
- Sarah: We should look at goals to see if we can reach them within the next three years. Look in Portrait of Promise for a big goal that we can take on. What has been achieved, what’s changed, what can we work on moving forward? Stage II was supposed to start in 2018.
- Tamu: Yes, in mid-2018.
- Dalila: I thought that in this sub-committee we were supposed to see what the AC could do to narrow down priorities to help OHE.
- Sarah: We should be looking at the OHE goals to determine what the AC could support them in accomplishing. What are the goals for the next five years? They’re doing good work but there are challenges. Funding is going away. Can the AC guide future funding?
- Jo-Ann: There are plenty of good issues already. Thinking about how we could align and support.
- Carol (public comment): Not wanting to change anything right now. Listening to the conversation.
- William: Plenty of goals to keep OHE busy. Room for innovation. CRDP is limited. Perhaps a way to be more successful to grassroots efforts is to be a State Agency rather than a program. Currently we’re in a structure that limits our efforts.
- Guillermo: Look at more specific areas where we can dovetail efforts with other state agencies that work on compatible issues. Good point of focus. Concentrate on the interpretation of the statute (prohibiting accepting funds for helping them with capacity building).
- Manel: Might need to rewrite or **reinterpret** the statute to enable more funds.
- Guillermo: Might need to connect with lawmakers to rewrite or reinterpret.

Action: Tamu will connect with Dr. Smith to get more clarity around the interpretation of the statute.

- Sarah—Is there similar enabling language in other departments?
- Marina—Maybe other programs could help us answer those questions.

Action: Marina will work with the Office of Legal Services to find out how to charge other departments. Are there other offices with similar language in their statutes? What is the legal authority?

Action: Tamu also raised the issue that we have trouble accepting private/foundation dollars because there is a very long process to receive legislative authorization to accept and spend any money. Will look into “mentorship” or something in how to do this.

3:45 – 4:45 p.m.

Propose Ideas for 2018 Priorities

- Sarah: Are we happy to use the previously mentioned criteria to guide us in developing recommendations?
- Jo-Ann: Suggests that it be considered guidance vs criteria because criteria suggests a “must”.
- Dalila agrees
- Sarah: Are these goals for the sub-committee or goals for the AC at large?
- Jo-Ann: Thought it was to be for working group (sub-committee) at the present time. Would bring to the AC a menu of items.
- Guillermo: What do we mean by guidance? The purpose of this workgroup is to consider sustainability of OHE. How do we get in front of potential new California government administration to present us as an important issue? How do we get at the table?
- Sarah: We are using this guidance in analyzing future topics and to give ideas to the AC.
- Marina: It is important to plant those seeds early on. We can possibly to reach out to Office of Legislative and Governmental Affairs (LGA).
- Solange: Monica Wagoner (from LGA) says that legislative briefings and hearings are not the best way to communicate. Suggests that a one-page written briefing is more effective and can be widely disseminated. Best if external partners promote the ideas.
- Marina: There are many mechanisms we can use. It is good to understand in advance how to use them. One mechanism is hearings. We’re usually called annually to present at hearing, which are arranged the legislative staff.
- Sarah: What are we asking the state to sustain? Are we talking about priorities for OHE to focus on? How can the AC support?
- Dalila: Process question: Is it legal according to Bagley-Keene to do a Survey Monkey to pull in the AC prior to the February AC meeting.
- Tamu: Yes, we can put together a survey and send it to all of the AC. We can ask them to pull out their priority Portrait of Promise goals.
- Solange: Health Equity Policy and Planning (HEPP) Unit policy planning for 2018 is constrained by staffing and funding. Priority areas are income inequality, criminal justice, education and housing. We will be having an OHE strategic planning retreat soon to look at our goals.
- William: Because the CRDP is funded by MHSA our efforts must be focused on mental health. The Community Development and Engagement Unit is setting goals for future work and we don’t want to plan in isolation. We are conscious of the fact that the success of any undertaking will need the support of partners, AC, and legislation.
- Tamu: We have multiple plans that we’re operating with: Portrait of Promise, the CRDP Strategic Plan, and individual goals within the three units.
- Sarah: When will the OHE strategic planning retreat be? Can the AC help inform the strategic planning?
- Tamu: We are planning it for after the hiring of the new Assistant Deputy Director, so aiming for late March or early April.

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- Sarah and Dalila: Let's come up with recommendations before the next AC meeting. Can we ask the AC for authority (for this sub-committee) to work outside of the big meeting?
- Tamu: Keep in mind that recommendations are cross-cutting and funding streams are not. Many Portrait of Promise goals are aspirational. Stage II is set to begin the middle of this year. It would make sense for the AC to see where we stand in the implementation of the goals completed so far. It's a lengthy process to get updates from all of the units on all 31 goals into spreadsheets, and we've done it periodically, but not recently. If this was something you wanted, we could probably do it in the next few weeks.
- Sarah: What goals would we like to see in the OHE strategic plan? Send a widely spread survey to find intersections. Suggests that the sub-committee meets again after the February AC meeting to focus on the top suggestions. Send a survey before the AC meeting and discuss some aspects at the February meeting. Are you going to poll on all goals in Portrait of Promise?
- Tamu: The Portrait of Promise needs to be changed/updated every two years and we're looking to submit changes in the spring. Because of the lengthy approval process, if we want it to be released by July 1, 2018, we will need to have our updates to CHSA by early March.
- Solange: LGA says that HEPP Unit has a briefing along with a legislative report due soon, too.

Action: Tamu to create a Survey Monkey to get AC goal priorities from Portrait of Promise and the December 2017 Monthly Activity Report and lay out in such a way that the AC members can comment and come back with ideas.

- Manel: Any timelines we need to be aware of? It seems that the budget for '18-'19 has already been set.
- William: Yes, it has. Budget Change Proposal (BCP) guidance comes in April, concepts are due in May, forwarded to agency in June. Finalized in July/August. So that happened for the '18-'19 budget last year, and we'll start up the process shortly for '19-'20 budget.
- Sarah: Regarding Tamu's contract, is it possible for some partners to talk to budget people to suggest they prioritize this?
- Tamu: Let's think about the best way to incorporate this idea. I'll bounce ideas off these five members.
- Sarah: Think of activities rather than goals.
- Dalila: What will we put on the agenda? Would love to have the input of the sub-committee to create it.
- Sarah: Include a report back from the sub-committee. Use the Portrait of Promise as a backdrop, to guide future discussions of sustainability. The timeline is short so we must make decisions quickly.
- Tamu: We can use Dr. Smith to vet some of these ideas. She will be at the meeting for about 2 ½ hours.
- Dalila: How much time should we allow at the AC?
- Group suggested at least an hour. Ninety minutes if we have it.

Action: Tamu to update the draft agenda for the 2/13/18 AC meeting to have at least 90 minutes for sub-committee to report back and engage the AC in discussion, using the Portrait of Promise as a backdrop to guide the sustainability activities moving forward. There will be an opportunity to hear the survey results, debrief, and provide feedback.

No Public Comment.

Meeting adjourned at 5:04 p.m.