



Healthy Mendocino Leadership Team

September 24, 2020 1PM-3PM Zoom Meeting

Minutes

Present on Call: Roseanne Ibarra, Patrice Mascolo, Molly Rosenthal, Clinton Maxwell, Miranda Ramos, Menaka Olson, Stacey Pollina-Millen, Megan Barber Allende, Victoria Kelly

Absent: Johann Ramirez, Tammy Moss Chandler, Donna Schuler

Meeting Commence 1:04PM

Financials

End of FY 2019/2020 Finances

- HM did not spend as much on salaries in FY 2019/2020 because we lost a staff member, nor on travel since all travel halted in March.
- Overspent on program supplies due to a grant awarded for a series of Action Team seminars on the coast.
- Total expenses exceeded the budget by ~\$6,000. The carry-over from previous fiscal years is more than \$65,000. Total net assets at end of Fiscal Year 19/20 are \$61,092.33.
- Total expenses exceed the budget by ~\$20,000. The carry-over from previous fiscal years is \$61,092.33 which will take care of the shortfall.

Updated FY 2020/2021 Budget

- Updated the budget to include NCO contributions for salaries from the PPP Loan and a Mask Awareness Grant
- New line items were added to the budget for remote work stipends, cell phone usage, and Insurance costs.
- Revenue is currently at approximately \$166,000. Total expenses are at approximately \$188,000, which puts us over ~\$22,000. However, we have the carry-over of ~\$61,000

Fundraising Update

- Adventist has committed to funding HM at \$30,000. ARCH has committed to \$10,000. Additionally, The County HHSA contract has been signed for \$50,000.
- Patrice is still waiting to hear from MCOE and Community Foundation and she will be following up with them soon since she was asked to reconnect with them in the Fall regarding funding. MCOE's funding for HM has slowly increased throughout the years. Patrice is hopeful for \$4,000 this year.
- Clinton offered to help with communication with Michelle Hutchins at MCOE if she is providing difficult to get ahold of. Clinton could potentially advocate that the LT group is a CTE function

and work to allocate funds from that program. He offered to help brainstorm whether the MCOE HM funds may be able to come from a different program.

- MCHC is not contributing this year because they are a member of ARCH, they usually contribute up to 2K. Jill Damian said they are still getting their new executive director up to speed
- In total, HM has \$117,150 committed for FY 20/21. The goal is to reach \$123,150.

Healthy Mendocino Updates

Google Analytics Report:

- For August 2020, the home page, demographics data, and health indicators were among the pages with the top views. Overall page views were down in August from July.
- Views on the Age-Adjusted Rate for Death by Suicide indicator was high in views. This could be since individuals may unfortunately be using this data to argue against shelter-in-place orders, citing incidence of death by suicide as evidence that the economy should be reopened. September is Suicide Prevention Awareness month. The increase views on this indicator could also be attributed to that national health observance.
- Analytics for the first half of September indicate a high number of clicks on the press release announcing HM as a program of NCO. Additionally, our resource page on UVA garnered a lot of traffic, which was interesting to see since that page was not promoted recently on social media or newsletters. UVA is now fiscally sponsored by NCO.
- We are working with HCI to exclude staff IP addresses from the analytics reports.

Mask Awareness Campaign:

- Molly took LT feedback from August meeting back to the Mask Awareness committee. Committee is working on a succinct Spanish translation for #MaskUpMendo and has come up with 3 contenders. NCO will poll its social media followers on which Spanish slogan is the best.
- The committee currently has 13 grantees spread throughout the county (Ukiah, Willits, Fort Bragg, Point Arena) and with funding from EPIC we are able to offer 3 additional grants. We are conducting outreach for this portion of the grant cycle to North County (Covelo and Laytonville) and South County (Hopland).
- Committee is now pivoting to direct education and working with County to come up and promote COVID-safe holiday guidelines.
- The NCO Mask Awareness contract with the County ends December 31, 2020 but will potentially extend 6 months into 2021. It is hard to say what the Mask Awareness work will look like 6 months from now, as many COVID response efforts are created on month-by-month basis to adjust for changing information.
- Menaka shared that at the NCO Board meeting recently, Supervisor John McCowan stated he saw Healthy Mendocino as a good fit to be working on the health equity issue long term. NCO's role going forward will always be to work with recommendations and suggestions from CDC and Public Health, whether in a contract with the County or not.
- Clinton shared that admin services projected Mendocino County would come out of purple tier sometime in October. Clinton stated that it is hard to imagine schools opening right before Thanksgiving and he imagines this will get more complicated and intense especially as we approach the election.

Website Update:

- New “Priorities” page: Community Engagement (listening tours reports, webinar recordings)
- Community Health dashboards have been changed and updated
- New “Local Projects” pages—Collaboratives: Mask awareness, Mendocino Healthcare Foundation, MOVE 2030, Oral Health and Housing and Childhood Trauma teams
- New “About Us” pages updated— About Us, Contribute Content guidelines, Governance, and a page for the annual reports
- Molly is starting to overhaul the Community Calendar. Once it is in a presentable place, she will promote it to partners and encourage them to submit their own events. Our hope is this calendar will be a central place for organizations to access all health and wellness related trainings and events in the County.

Governance

Recruitment for Advisory Council and Leadership Team

- Both the AC and LT should have space for community members. Patrice presented a list of potential Leadership Team members for recruitment.
- Miranda suggested we make space for individuals that are emerging leaders at their organizations as opposed to traditional leaders. It would be so valuable to have a medical assistant versus a medical doctor on the team(s), for example. We could ask people on the AC who their mid managers or emerging leaders are. Figure out how to make spaces that are welcoming. If we want to double down on equity, we should be figuring out how to make space for these people.
- Clinton: Including emerging leaders on the governance teams could help break down the false story that home-grown talent is hard to find. We could potentially ask Leadership Mendocino recent graduates looking for a community project.
- Victoria agreed that including individuals more involved in the work would be a good idea. When talking about initiatives, the mid-level professionals are key people. They have very different perspectives than agency heads and EDs.
- The role of the LT versus the AC was discussed. Currently, the frameworks states that the AC is comprised of stakeholder organizations that give general advise and feedback and share out what their organizations are doing. The LT is generally appointees of AC organizations that provide specific guidance and strategy support. There is some cross-over between the AC and LT. Some AT members do not have the time to attend both meetings.
- Some members felt the LT should act as a body of “program directors” that make decisions for how Patrice and Molly coordinate the work. It would be very challenging for Patrice and Molly to do this work without representation. The semantics of the titles Leadership Team and Advisory Council could be confusing.
- Some members felt the LT should be made up of mostly funders or a percentage of funders plus community members and/or emerging leaders. Staff will have to have to think on this and include it in the bylaws.
- A community member does not have to be representative of a specific agency.

- Does the role of the LT shift with HM becoming a program of NCO? Menaka says not for the HM program which has always had its own governance. The NCO BOD would not have a say in its operations.
- The LT name works because it acts as the Director of the HM program guiding and leading how to do the work from the members perspective.
- Patrice shared she believes the Leadership Team is more like the role of the past Steering Committee which historically did a lot of the decision making. But HM management has been asked to take on more of the decisions and leadership of HM. The LT would have the final say and approve Bylaws, budget, finances etc. However, what happens when the AC does not like the direction the LT is going?
- Some team members felt they do not understand their role as part of the LT and that the team often has philosophical conversations but does not currently direct the work. Once the framework has been established, perhaps the LT will be more engaged in what HM is doing.
- If staff is looking for more direction from the LT, perhaps they should use pointed questions in their presentations such as—“Are there other directions we should go with spending?” OR “ Is this the direction you want us to go?”
- Patrice mentioned she was asked to be more of an ED or Program Director from Patty
- Some team members reacted strongly to the statement that the LT provides specific direction to the staff. Is the expectation more of a Board or a body of directors guiding the work? It appears the expectations among the staff and team members are not aligned.
- Perhaps we could have the AC and LT meet every few months with program staff present to make key strategy decisions.
- Set up the LT membership so it has at least 50% funders represented.
- Patrice asked for approval of changes to the Bylaws to take out wording about AC and including adding in community members at large for membership in both committees. This was approved.
- Staff asked how we define Community Partners. They want clarity on who they would help with a webpage, articles to promote and share their work, etc. Funders would be considered as partners as would most organizations working on SDOH and CHNA priority areas. Questions to ask would be: “What value would the information bring to the community and our funding partners?” Staff can make these decisions based on what is appropriate to HM’s mission and Strategic Plan.

Strategic Plan

- Staff gave an update on the Strategic Plan. The outline was reviewed, and the main goals presented. There is still work to be done to refine the goals, strategies and outcomes.
- The planning session with Megan was very helpful. Staff will present a Strategic Plan Dashboard at the October meeting.

Succession Plan for Chair

Nominations for Chair Elect

- Miranda has accepted the nomination for chair elect.
- The team decided the chair elect position should last 3-6 months, and Chair for 1 year. This would require Roseanne Ibarra to stay on as Chair for another 3-6 months. Within the 1-year Chair position, a new chair-elect would be identified. The past chair would stay on the LT for at least another 3 months.
- All team members present voted Miranda Ramos as chair elect. Her position as chair elect will begin October 1st.

Meeting Adjourned 3:00PM

Next Steps/Action Items

LT/Chair Tasks:

Staff Tasks:

Further define the roles and governance structure of AC and LT

Identify and contact potential new recruits

Continue work on strategic plan dashboard to present at October meeting.

Next meeting date: Thursday, October 23, 2020

Respectfully Submitted by Molly Rosenthal, Healthy Mendocino