



Healthy Mendocino Leadership Team

May 28, 2020 1PM-3PM Zoom Meeting

Minutes

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

Absent: Tammy Moss Chandler, Donna Schuler, Jill Damien, Patty Bruder, Carol Mordhorst, Johann Ramirez, Stacey Pollina-Millen.

Fundraising and Budget Update & Discussion

Patrice presented a realistic projection of what we will be receiving from funders. She pointed out the funding that is committed, and what we're still expecting but not confirmed. Roseanne is talking with Adventist about funding and trying to bring in the coastal hospital. ARCH is looking at their budget in June. Many organizations are not able to fund us at the same level as last year due to COVID. Tammy said the County can commit to \$50K—1/3rd of last year's funding. Our potential revenue is almost \$130K—a lot less than what we were hoping for at \$280k.

Budget illustrates many different scenarios: if fully staffed with 3 people then expenses come to \$280K; two staff with 40 hours each is still over \$200K. Molly will go down to 32 hours a week to save money. Reducing travel expenses will also help. With those cuts, we can get the expenses down to \$187K. Right now there's still \$70K in our account, and since we will not have any salary costs for May and June due to a PPP loan from NCO, we can carry over some of those funds into the next fiscal year. With a carryover of \$63K we can make it work, however this is still a bare-bones budget

Staff is applying for the FHL Bank AHEAD grant through Community First. This grant may be a long shot, but staff decided to go for it anyway. At the very least it will give staff experience writing grants. This grant was suggested to staff by Phoenix of Evolved Growth Strategies.

Website Update & Discussion

Staff presented the Google Analytics report for the Healthy Mendocino website from March 1st-May 19th. Beginning of each month we see a spike in visits because that's when our newsletter goes out. Low points are on Sundays. We've seen a spike in new users visiting the website. Homepage is the most clicked on page, followed by the indicators and the resource library.

Virtual Town Hall Webinars Update & Discussion

Staff presented the outline for the town hall sessions to be hosted by Healthy Mendocino on Wednesdays June 17th-July 1st. The LT felt each session should be extended to 1.5 hours—1 hour feels tight, especially with the number of speakers we are expecting. If one of the objectives is to facilitate cross conversation between participants, each webinar should be 1.5 hours.

Someone needs to be monitoring the Facebook stream and sharing comments with facilitators. Menaka suggested Bianca Nieto, with NCO.

Menaka suggested having visuals during the webinar and to receive any slides from speakers ahead of time.

Clinton suggested including an employment development insurance officer on the workforce development webinar, especially if the public will be involved.

2020 CHIP and Workforce Initiative Update & Discussion

2020 CHIP will no longer be a part of our scope of work for the next year. The County feels that it is not a priority for HM to be writing and implementing the CHIP at this time. Some of the CHIP work is already done so, some of those deliverables will be written into a report for the county.

The Workforce Initiative work has been scaled back due to our limited time and resources. We will capture information on WF in an asset map and distilling it into a tool that can be used by the community.

Scope of Work Update & Discussion

One Pager on Healthy Mendocino Mission, Vision, Values:

Miranda was confused about the inclusion of the Teen Smoking indicator on the second page of the Healthy Mendocino One-Pager. There needs to be some context around it otherwise it looks like we're attributing our work to this data. There's a lot of words so we need to be thinking about who it is intended for.

Menaka agreed about the indicator and thinks it should be reduced to one page. A sample indicator is not necessary. The reader can be directed to the website and look at whatever data they are interested in. The mini dashboard is a great thing that people don't realize is there, however it's distracting to include the image on this document.

Roseanne: Who is our audience? We need adjust the layout, can there be more visuals? How can we make it easier to read? How can we condense the section that explains what's coming next fiscal year? Perhaps include breakout text? Important to have something that references what can be found on the website, but the Teen Smoking indicator is confusing and out of context. In the "What We Do" section it declares that Healthy Mendocino is a website. Do we only want people to think of us as a website? What is our elevator speech? Are we a collaborative or just a website?

Scope of Work Document:

This is Healthy Mendocino's Internal document to keep track of what we do.

Victoria: There's already so many groups convening already and sharing their data, reviewing it, and talking about next steps. For instance, RQMC presents data at Behavioral Health Advisory Board every month. How does HM fit into that and engage with already-established groups?

Miranda: Lots of groups convening in the sectors that make sense to them. What is the capacity of your organization going forward with reduction in staffing? The first page of the SOW seems concrete and well within capacity of HM reduced staffing. If the focus is on the website and gathering data, and storytelling, this seems like a holistic and achievable body of work. But the second page adds too much work that may not be achievable.

Webinars in June & July make sense for the work HM is currently doing. Is there more groundwork to be laid before committing to the listening tours for next fiscal year? There is already a lot of difficulty getting attendance at community meetings. It will take a lot of trust and relationship building work to convene robust listening tours. Primary concern is the capacity as an organization.

Menaka: NCO does a Community Action Plan every 2 years based on the CHNA and conducts town hall listening tours. NCO relies on the work of the CHNA to gather that information to respond to needs and adjust to the needs of the community. Healthy Mendocino could be the arm that helps NCO accomplish gathering that data if HM is a program of NCO. The listening tour work takes time and must be done carefully and requires a lot more work behind the scenes.

Megan agreed with Miranda and Menaka— this scope of work is overly ambitious for two people. There is uncertainty with the county and Healthy Mendocino did listening tours last year, so they are not necessary. Also, it may be hard to convene people right now due to COVID. Megan suggested giving permission not to do LT this coming year unless it is in partnership with NCO.

Patrice: When we begin the next collaborative CHNA we will be doing some sort of forum. The Listening Tours can be done in combination with the next CHNA.

Roseanne disagrees. The value of HM is it is a data source and a bird's eye view of what all is happening with nonprofits in the county. Many nonprofits are working on the same issues but do not talk to each other. Healthy Mendocino has the contacts and the data. The next layer to that is to connect to the people. Healthy Mendocino could play this key role and obtain name recognition that HM is the source in the community for health data and is the organization that cares about the community opinion and feedback. She agreed that listening tours are a huge undertaking— 6 in a year is a lot. However, it is important to put into our scope of work that we're working towards building a relationship with the community. The forums scheduled in June-July will begin to open the door to that.

Miranda: If various organizations are struggling to get people to come to meetings, then there's a tremendous amount of work around relationship building, accountability, etc, to be done. One of the greatest strengths of HM is the website and the information we provide. If we want the average person to know what HM has to offer them, certainly the listening tours and forums are a part of achieving that goal. If that is the priority, we need to focus the scope of work around community engagement and go to where the people are, developing relationships even further. It is a different course of work to get us there.

Patrice: It would be helpful for staff to have input on what our scope of work could be.

Clinton: Because we don't know what this next year will bring, we should intentionally leave a block of time open to respond to crisis. A lot of professionals are doing work outside of their role and that stresses them so they fill their time with busy work.

Megan: The Community Foundation has a plan to do listening tours. Listening tours should be done when there is something specific you're seeking feedback on. It is going to be a hard year for individuals, nonprofits and business community. Still do not know what the webinars will be like—if that turns into a great thing and it may be something we want to do every month. Give more space and flexibility on the scope of work deliverables.

Menaka likes that flexibility. If you stay flexible, we can weave it in the way NCO needs it to happen and the way the state dictates us. If you keep it flexible you don't lose the integrity of why you want to do these tours.

Clinton: All school districts will have to hold local needs assessments. Sit in on these school district stakeholders' meetings and other meetings to gather information.

Healthy Mendocino Structure and Governance Updates & Discussion

Bylaws:

Roseanne: Duties of HM- do we want it to match what is listed on the MOU? Patrice will change the Leadership Team section: Break out the sections. AC group gives input on the work we're doing whereas the LT is the meat of this organization. Does the structure of the AC need to be as formal?

Article 3 meetings: send materials for meetings 7 days in advance.

Chairperson: Will be the supervisor of the program manager. We become a program there will be someone from NCO that will kind of be a supervisor. Match up with NCO protocols and provide feedback for evaluations.

Approve with caveat that Patrice makes the changes discussed.

Motion: Megan mad a motion to approve the HM Bylaws. Miranda second. Approved: Clinton, Roseanne, Miranda, Victoria, Megan, and Menaka

Funder MOU:

Miranda: expectations of funding partner not referred to in the fundraising letter. What is the process for reporting to potential funders? What's the process for informing them what they will committing to in the MOU?

Patrice: MOU going to the largest funders. Does this MOU go to everyone or do we ask everyone to be on the LT or the AC? Encourage the participation for all different sectors especially. Is there a threshold that this MOU applies to?

Roseanne: each funder should get an MOU, but the funding partner section should be negotiated with each funder. The larger funders will want to be at the table, and I imagine some partners will just want to give money.

Miranda: part of your conversations around funding can include the "menu of options."

Roseanne: list out amount they're giving in the document and the report of what their money paid for.

Program of NCO: LT members voted last meeting and it was approved. It will be taken to the NCO board meeting

Advisory Council meeting June 11 agenda items - update, bylaws, initiative, town halls, scope of work

Next Steps/Action Items

Make suggested changes to Bylaws - Patrice

Edit MOU-Patrice

Work on Advisory Council meeting-

Refine and rethink Scope of Work for FY 20/21-Patrice and Molly

Next meeting date: Thursday, June 26th at 1PM

Respectfully Submitted by Molly Rosenthal, Healthy Mendocino