

San Diego Accountable Community For Health
Collective Action Workgroup Meeting Summary

August 2, 2018

2:00-4:00 pm

211 San Diego (3860 Calle Fortunada, San Diego, CA 92123)

Accountable
Communities for
Health

Members Present:

Jim Dudl, Kaiser Permanente
Adama Dyoniziak, Champions for Health
Katie Judd, HHS
Alana Kalinowski, 211
Kim McDougal, YMCA

Jessica Newmeyer, American Heart Association
Arnold Noriega, CDPH
Nancy Gannon Hornberger, SAY San Diego
Dan Fesperman, CHIP
Jeff Dziedzic, Aetna Better Health

Staff & Consultants Present:

Christy Rosenberg, BTSD
Victoria Harris, BTSD
Elizabeth Bustos, BTSD
Cheryl Moder, Consultant
Alaina Dall, Consultant

Welcome and Introductions

Cheryl welcomed the group and went over the agenda for today's meeting. Introductions were made around the room. Susana López-Adolph from CHIP was introduced as a guest.

Review Agenda and previous meeting summary

Cheryl reviewed the meeting summary from the last in-person meeting where we discussed the draft survey. Jeff made one edit, that Jill Webber was filling in for him last month, but will not be a regular member of the group. The meeting summary was then approved to be posted to the website.

Updates: ACH Workgroups

- Data & Metrics Workgroup continues to meet monthly looking at the priority indicators and secondary indicators for each of the protective factors. The group started with nutrition indicators and have identified 10-15 secondary indicators. The next area of focus is wellbeing, followed by physical activity.
- Community Resident Engagement Workgroup has landed on a standing monthly meeting, the 2nd Thursday of each month, and every member of any workgroup has an open invitation to attend. A draft charter has been developed to include activities related to an action plan to support community residents in the efforts of the SD ACH.
- Sustainability and Wellness Fund last met in July. The Wellness Fund is continuing to be the topic of discussion and they are looking forward to seeing the POI survey results.
- Stewardship Group is meeting on 8/14 to approve the CREW charter. They will also receive the same presentation on the initial POI survey results that Cheryl is giving today.
- Southeast San Diego: Elizabeth gave an update from the past few meetings. There was representation from organizations that had completed the original POI survey and some that did not complete the survey, but conduct work in SESD around heart health and family strengthening. There is a need to arrive at a shared definition of what it means to be a part of the POI. There was a lot of discussion around data and the challenges. A shared data agreement is possible, but more homework and research need to be conducted. Other items discussed: a data collection clearinghouse to address unique requests, a community dashboard so that stakeholders can see progress, and referral pathways for clinical-community linkages across organizations.

Presentation: SD ACH survey results

Cheryl reviewed the framework & context of the portfolio of interventions.

- Survey was fielded between 7/2 and 7/30.
- 59 organizations reported on 85 programs. There was a handout of the full list of respondents.
- Majority of the programs were non-profit, community based, and social services.
- Protective factors addressed: 69 of the respondents checked one or more of the wellbeing categories. The majority of respondents chose healthy behavior factors and not clinical factors.
- SD ACH domains: 4 of the programs checked none of the above, and we need to follow up and confirm that they do not qualify.
- Cheryl presented a cross tabulation of the Domains vs Protective Factors. This showed some gaps and areas where further outreach might be needed to assure robust participation and/or areas where additional programmatic work might be warranted.
- Most programs address either all age groups or adults. Very few children. Some programs may focus on families not necessarily only children.
- Geographic regions: there was some disparity among East, North Central, and North Coastal regions.
- Focused populations: low socioeconomic status was the most frequent answer.
- Funding sources: County and federal government were the top funding sources.
- Evidence-based factors: only 2 programs chose "None."
- Outcomes: types of data captured were categorized in the following categories: operational, survey/evaluation, policy/environmental, healthcare, clinical, health behavior, and wellbeing; 51% stated that outcomes data were somewhat or very easy to collect.
- There was a desire by many to align with other programs both within and outside their sectors.

Discussion: Next Steps in developing the POI

The group discussed the need to conduct additional outreach to assure robust survey participation.

Workgroup members volunteered to reach out to partners from the following organizations:

- Early childhood partners
- Rady Children's Hospital
- School districts
- Neighborhood Healthcare
- Family Health Centers
- Borrego Health
- Mountain health
- Southern American Indian Health
- Molina
- Alvarado Hospital
- Tri-City Medical Center
- SD Black Nurses Association
- Hispanic Nurses Association
- American Lung Association
- American Diabetes Association
- American Cancer Society
- National Kidney Foundation
- La Maestra
- Smoking cessation providers
- Universities
- Other free clinics
- Circulate SD
- Environmental Health Coalition
- Live Well San Diego partner list
- Olivewood Gardens
- Project New Village
- Northgate Markets
- Chambers of Commerce

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The group discussed what additional analysis should be performed to further inform efforts to create a balanced POI. Recommendations included:

- Further analysis on protective factors based on geographic regions.
- Identify what we feel would demonstrate impact and focus on programs that achieve those outcomes.
- Determine which programs are focused on prevention vs intervention and which have short-term vs. long-term impact.
- Determine which programs collect process vs. outcomes data.
- Identify gaps in evidence-based factors and consider those programs for an “innovation track.”
- Identify opportunities for mentoring, capacity building, and technical assistance.
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Next Steps

Workgroup members will send invitations to participate in round 2 of the survey to identified organizations. Cheryl will send out the list of organizations with a new deadline for survey completion.

Next Meeting

The next meeting will be on September 6, 2:00-4:00 p.m.