



MAY 2019 BOARD MEETING MINUTES

Members Present: Leslie Dozono, Debbie Peterson, Bobbe Bridge, Tanya Kim, Jessica Werner, Ed Marcuse, Brian Saelens, Helena Stephens, Meeka Ghebrai, Sophie Theriault, Karen Howe, Beth Larsen, Nathan Buck, Suzette Espinoza-Cruz, Abigail Echo Hawk, Nancy Woodland, Rochelle Clayton-Strunk, Trise Moore, Nebiyu Yassin, Bridget O'Connor, Mackenzie Chase, Ben Danielson. **Attended by Phone:** Janet Levinger, Hikma Sherka, Thomas Bales and Ed Marcuse.

Members Not Present: Lois Martin^E, Debbie Carlson^E, Elaine Cook

Guest(s): Lydia Assefa-Dawson (SCA nominee for the CYAB); Public Health--Patty Hayes (Director), TJ Cosgrove (Division Director CHS), Sheryl Davis, and Derrick Wheeler-Smith (ZYD Director); Christa Valles (SCA)

Staff Present: Sheila Capestany, Charlene Jose, Marcy Miller, and Kerry Wade

6:00 PM, TUESDAY, MAY 14, ROOM 105, KING COUNTY DCHS YOUTHSOUCE/WORKSOURCE, TUKWILA

Meeting called to order: Meeting was called to order at 6:15 p.m.

Welcome & Introductions: Nancy Woodland and Brian Saelens

- (See above for list of guests present)

Public Comment: None was submitted

Approval of March meeting minutes: M/S/P; Bobbe Bridge/Debbie Peterson– Passed unanimously; Ed Marcuse abstained.

ADVISORY AND OVERSIGHT: Public Health Zero Youth Detention (ZYD) & Juvenile Justice – Patty Hayes, Director of Public Health Seattle-King County. Patty introduced the new director for ZYD, Derick Wheeler-Smith and presented a PowerPoint with more details ZYD and CYAB's involvement.

- The ZYD Road Map has 5 objectives:
 1. **Lead** with racial equity
 2. **Prevent** youth from entering the juvenile legal system by focusing upstream and on systems to have the greatest impact
 3. **Divert** youth from further law enforcement, formal legal processes, and secure detention into community-based options
 4. **Support** youth and families to reduce recurrence of legal system involvement and increase healthy outcomes
 5. **Align and optimize** connections between systems to increase effectiveness
- ZYD Go-First Strategies:
 - Family engagement focus groups
 - Upstream access to family support services

- Expanding electronic monitoring
 - Opened video visitation for youth in public detention
 - Exploring the option of peer support navigators
- There are direct links to data, tier boards, metrics available on the ZYD king county website. ***Patty invites the board to review the metrics and would appreciate feedback.*** The Council approved funding for a 0.5 FTE Epidemiologist to help with this work.
- The Public Health approach to Juvenile Detention:
 - MOU between Public Health and Department of Adult and Juvenile Detention (DAJD) is currently in place
 - Public Health oversight of JD programming:
 - Incorporating restorative justice and developmental approach to transform disciplinary system to trauma-informed, health & skill promoting system
 - Staff trainings on trauma-informed approaches and adolescent development
 - Clinic oversight at the detention center:
 - Transformation into a more health & wellness focus instead of just ancillary. Transition from all paper records to electronic using EPIC.
- Collaboration and oversight:
 - Uniting For Youth: consortium of state and local youth-serving agencies; repurpose as forum for system and community partners to guide ZYD and cross-system efforts
 - Juvenile Justice Equity Steering Committee: community committee convened to address root causes of racial disparities in juvenile legal system
 - Leadership Circle: leadership from Executive Office, Courts, Police, Prosecuting Attorney's Office, Public Defenders, BSK, and more
- ***ACTION: Patty would like to know how CYAB would like to remain engaged in ZYD.***
 - To move ZYD forward, they need the broadest reach especially with CYAB involvement. With the more attention this is given, the more visible it will be which can help to grow funding initiatives.
 - Suggestions:
 - Receive updates
 - Reviewer of metrics and progress on strategies
 - Input to leadership
 - Seat on UFY advisory group
- Comments:
 - Public Health and ZYD needs to make sure the immigrant population is represented especially in the translation of information into different languages.
 - List of partners did not feel very Public Health driven and it is important that they be integrated in all areas.
 - Question about funding initiatives and school suspension across the districts.
 - There are no updates on these topics, but Patty will be sure to send any new info to CYAB.
 - Struggling in regards to the Latinx representation. It's important to consider how to engage with grassroots level organizations and think about how other factors like the Becca Bill and how they impact the community.
 - ZYD plan aligns with a lot of CYAB action plan goals. Where is the "teeth" of your position as a collaborator to get people to go along this roadmap? What do you anticipate the challenges you foresee with partners who are "in" right now, but what happens when you get to those road blocks?

- Patty - PH is use to not having "teeth" authority. She doesn't think that the commitment by elected officials, prosecutors, etc. will pose problems, most are on board.
 - CYAB must think about the two asks, and what we intend to do. The Board must take time to define CYAB involvement/what our advisory role will be. CYAB *can* be the "teeth" spoken about. This is our opportunity to use our privilege of being advisory board of King County for Children and Youth.

ADVISORY AND OVERSIGHT: Public Health Redesign – TJ Cosgrove, Public Health Community Health Services (CHS) Division Director and team. TJ and team presented on the KC Public Health CHS Redesign.

- Parent Child Health (PCH) is Public Health's largest line of business (63%). It includes First Steps and WIC programs which also include:
 - Healthy pregnancies
 - Healthy births
 - Healthy infants and young children
- The current issue with PCH is declining visits which has seen a 35% drop since 2015. In order to dive deeper into this issue, the following steps were taken:
 - Created 15 focus groups representing different cultures (Somali, Latino/a, etc.)
 - Analyzed policy landscape & engaged policy leaders
 - Engaged current staff
 - Held interviews with key informants in the community
- Guiding Principles:
 - Race and place matter
 - Flexible in a changing landscape
 - Responsive & Collaborative
 - Fiscally responsible
- The Process:
 - Collaborative analysis and problem-solving:
 - Analyzed data regarding our clinics, our clients, our eligible populations
 - Analyzed policy landscape & engaged policy leaders
 - Engaged staff in multiple rounds of problem-solving
 - Talked to community & clients (focus groups and survey)
 - Interviews with key informants in the community
 - Launch pilots to test new hypotheses
 - Statistics:
 - In 1990, most Medicaid-eligible moms were under 24 and white
 - In 2016, most Medicaid-eligible moms were over 25 and women of color
- New Model – becoming more responsive
 - Public Health Center Bases Services:
 - Maintain public health centers (some are part-time)
 - Clinic and field – all providers
 - Mobile Teams
 - Better access for clients
 - 4 Mobile Teams
 - Will work out of partnered/community sites (food banks, library, community centers) with fixed locations on a rotating but predictable schedule

- Community Support Programs
 - This is a brand-new care management model (not part of First Steps or WIC) that addresses the Social Determinants of Health. This will be an opportunity to do a better job at program evaluation starting from the beginning to show effectiveness of this work.
 - This will be staffed by 12 social workers and health care providers.
- Public Health will be reducing to 53 positions. To assist with the cuts, open positions have been held in lieu of this as well as creating new roles. Retraining will be offered as an option for staff to move into a new role/career. There will also be an option for those nearing retirement to receive a cash settlement.
- **ACTION: TJ asked the CYAB for support with the community support program.**
 - Going to enter the implementation plan process over the next 6-7 months; would like assistance in ways of deciding when and how to engage, what decisions can community help Public Health make
 - **Will seek CYAB input for guidance from time to time /asking to come back at critical junctions in their planning to seek guidance and input**
 - Partners with public health provide material items to children and are concerned about a cut in the ability to deliver these items.
 - What is the integration plan with Early learning home visiting?
 - No decision has been made yet with these kinds of partnerships
 - As further work in the planning process is done it should be addressed
 - How can this go beyond the scope of your work and towards reducing racism and making it a priority to find ways in which you reduce racism
 - PH recognizes this issue as well and acknowledges that there is a lot of work to be done. This is the first time in 30 years that this program is going through a thorough (broadly and within specific communities) evaluation and by doing so he would also like to address the issue of racism and be mindful going into it
 - The problem is when we come up with solutions they only solve issues in the white community. That the approach is structurally racist. The system often creates problems by addressing white people's needs. Because of the way these programs are designed, they fail for people of color.
 - The state has consistently cut the program back on funding for the outreach piece and their focus and accountability was to go to what they termed "high risk". They didn't allow for visits that would enable trust building with folks within the community to partner with the program and give their feedback.
 - **ASK: PH would like the board to help amplify this issue with the state.**
 - 9 counties in Washington no longer have First Steps because it is such a failing system. **PH wants to reinvent this program with CYAB's support so that we can go back to the state or try to recreate it at a local level.**
 - For communities of color, services are not provided well and don't get fixed until something drastic happens. When the white community has issues with service, their complaints are heard and can advocate for themselves while being respected, whereas if you are black or brown, you have to wait for a process to be horrible for people to come out and to do community-based focus groups. Would like to see happen is for Public Health to consider embedding in the process/structure, an opportunity for monthly or quarterly check-ins with the community/the people that you are serving and allow them to play a part in the decision making.

- New staff will be hired under the community support program. PH will make sure they are fully integrated into the rest of the team and not separated into their own group.

BOARD BUSINESS: Elections – Kerry Wade

- Kerry gave the reminder that today, May 14 is the last day to send her recommendations for Board Chair.
- There are 2 nominees currently.
- Nancy will be stepping down as co-chair but will continue to serve on the board. She has nominated Brian to remain in his role for another term.

BOARD BUSINESS: Special Interest Subcommittee Breakout – Better Together, Youth Leaders, Juvenile Justice and PSTAA Workgroup

- Board members broke out into their subcommittees to discuss items specific to their groups.

MEETING ADJOURNED: 8:30 p.m.

NEXT MEETING: Tuesday, July 9, 2019 at Bellevue City Hall (450 110th Ave NE, Bellevue, WA 98004).