



CENTRAL HEALTH

Our Vision

Central Texas is a model healthy community.

Our Mission

By caring for those who need it most, Central Health improves the health of our community.

Our Values

Central Health will achieve excellence through:

Stewardship - We maintain public trust through fiscal discipline and open and transparent communication.

Innovation - We create solutions to improve healthcare access.

Right by All - By being open, anti-racist, equity-minded, and respectful in discourse, we honor those around us and do right by all people.

Collaboration - We partner with others to improve the health of our community.

STRATEGIC PLANNING COMMITTEE MEETING

Wednesday, January 18, 2023, 1:00 p.m.

Videoconference meeting¹

A quorum of the Committee and the presiding officer will be present at:

Central Health Administrative Offices
1111 E. Cesar Chavez St.
Austin, Texas 78702
Board Room

Members of the public may attend the meeting at the address above, or observe and participate in the meeting by using the Ring Central meeting link below (copy and paste into your web browser):

<https://meetings.ringcentral.com/j/1499340112?pwd=bDdEY2U1ZEVYQ3RTODI2NWYrQlVqQT09>

Password: 730821

Or to participate by telephone only:

Dial: (888) 501-0031

Meeting ID: 149 934 0112

The Committee will meet via videoconference with a quorum present in person and allow public participation via videoconference and telephone as allowed under the Open Meetings Act. Although a quorum of the Committee will be physically present at the location posted in this meeting notice, we strongly encourage all members of the public to observe the meeting virtually and participate in public comment, if desired, through the virtual meeting link or telephone number listed on this meeting notice.

Members of the public who attend in person should conduct a self-assessment before coming to the building to ensure they do not have a high temperature or any symptoms of COVID-19. Anyone who is symptomatic and/or has a fever should contact their healthcare provider for

further instructions. Symptomatic members of the public can still participate, if desired, through the virtual meeting link or telephone number listed on this meeting notice. Resources related to COVID-19 can be found at the following link:

<https://www.centralhealth.net/covid-info/>.

A member of the public who wishes to make comments virtually during the Public Communication portion of the meeting must properly register with Central Health **no later than 11:30 a.m. on January 18, 2023**. Registration can be completed in one of three ways:

- Complete the virtual sign-in form at <https://www.centralhealth.net/meeting-sign-up/>;
- Call 512-978-9190 and leave a voice message with your full name, your request to comment via telephone, videoconference, or in-person at the meeting; or
- Sign-in at the front desk on the day of the meeting, prior to the start of the meeting.

Individuals who register to speak on the website or by telephone will receive a confirmation email and/or phone call by staff with instructions on how to join the meeting and participate in public communication.

PUBLIC COMMUNICATION

Public Communication rules for Central Health Committee meetings include setting a fixed amount of time for a person to speak and limiting Committee responses to public inquiries, if any, to statements of specific factual information or existing policy.

COMMITTEE AGENDA²

1. Review and approve the minutes of the November 9, 2022 meeting of the Strategic Planning Committee. (*Action Item*)
2. Receive an update on Central Health's ongoing Equity-Based Systems Planning work and Operational and Financial Sustainability Planning (OFSP), which will include developing plans to implement the Board-adopted Healthcare Equity Plan. (*Informational Item*)
3. Receive and discuss a presentation on the Central Health Demographics Report. (*Informational Item*)
4. Receive a year-end update on communications, community engagement, and community outreach. (*Informational Item*)
5. Review the tentative reporting schedules for Fiscal Year 2023 activities and programs pursuant to the strategic directions established in the Fiscal Year 2023 budget resolution adopted by the Board of Managers. (*Informational Item*)
6. Confirm the next Strategic Planning Committee meeting date, time, and location. (*Informational Item*)

- ¹ This meeting may include one or more members of the Strategic Planning Committee participating by videoconference. It is the intent of the presiding officer to be physically present and preside over the meeting at Central Health Headquarters, 1111 Cesar Chavez, Austin, Texas 78702. This meeting location will be open to the public during the open portions of the meeting, and any member participating by videoconference shall be visible and audible to the public members in attendance whenever the member is speaking. **Members of the public are strongly encouraged to participate remotely through the toll-free videoconference link or telephone number provided.**
- ² The Strategic Planning Committee may take items in an order that differs from the posted order and may consider any item posted on the agenda in a closed session if the item involves issues that require consideration in a closed session and the Committee announces that the item will be considered during a closed session. A quorum of Central Health's Board of Managers may convene or participate via videoconference to discuss matters on the Committee agenda. However, Board members who are not Committee members will not vote on any Committee agenda items, nor will any full Board action be taken.

Any individual with a disability who plans to attend or view this meeting and requires auxiliary aids or services should notify Central Health as far in advance of the meeting day as possible, but no less than two days in advance, so that appropriate arrangements can be made. Notice should be given to the Board Governance Manager by telephone at (512) 978-8049.

Cualquier persona con una discapacidad que planea asistir o ver esta reunión y requiera ayudas o servicios auxiliares debe notificar a Central Health con la mayor anticipación posible de la reunión, pero no menos de dos días de anticipación, para que se puedan hacer los arreglos apropiados. Se debe notificar al Gerente de Gobierno de la Junta por teléfono al (512) 978-8049.

Central Health Board of Managers Shared Commitments **Agreed adopted on June 30, 2021**

Whereas, the Board of Managers of Central Health has come together as a governing body to ensure the Vision of Central Health: Central Texas is a model health Community;

Whereas, the Board of Managers of Central Health bring this vision into reality by enacting the mission of caring for those who need it most and thereby improving the health of our community;

Whereas, the Board of Managers of Central Health achieves excellence toward this vision and mission through the stated values of Stewardship, Innovation, Respect, and Collaboration;

Whereas, the Board of Managers of Central Health further known as we in this document understand that systemic racism is the root of health inequities that emerge from a history of racism in Texas including Travis County that contributes to the social determinants of health that play a primary role in producing inequitable health outcomes;

Whereas, as an organization, Central Health is anti-racist and committed to a diverse and inclusive culture that seeks equity and social justice in the pursuit of its mission:

1. We Commit to informing all of our actions as Board Managers with the understanding that we are accountable to recognizing and to interrupting systems of oppression. This includes understanding the power structure in the United States, and Texas, and Travis County, that advantages certain community members and has historically disadvantaged other community members based on the color of their skin, race, ethnicity, language, and/or other characteristics. We further understand that to disrupt this power structure and the health inequities it produces, we must collaborate to collectively respond to the lived realities of all ethnicities, races, and identities disadvantaged within this system and all historically oppressed identities and communities disadvantaged within this system. We Commit to understanding that when disadvantaged communities compete against each other, we all lose in this system, and the only way forward is to work together for the benefit of all oppressed communities collectively.
2. We Commit to a model of Generative Leadership which requires us to understand and practice collaboration and accountability demonstrated by following our agreed upon meeting procedures and ensuring all members have the opportunity for comparable speaking time. We further Commit to intentionality prior to speaking including: considering: what is the goal of what I

want to share; is this the right time to share it; and is this in keeping with our collective goal for this particular moment within this particular meeting?

3. We Commit to Generative Conflict which includes engaging in disagreements and differences in perspective in a way that deepens relationships and trust by expanding knowledge and understanding of each other, including expecting our ideas to be expanded and enriched by learning and engaging with other Board Manager ideas, choosing curiosity over competition of ideas, and anchoring our conversations in our common purpose.
4. We Commit to practicing emotional intelligence as leaders which includes being aware of our own emotions and reactions and managing them, as well as being aware of our impact on others and managing this impact for the collective good when we are in our role as Board Managers.
5. We Commit to being aware of our own privileges and advantages in the sociopolitical and economic structure of the United States, Texas, and Travis County to use these for the benefit of interrupting inequities across historically disadvantaged identities.
6. We Commit to preventing the commission of microaggressions through the awareness of the history and oppression of diverse identities and communities. To this end, we Commit to strive to learn the historical context informing the lived realities of all historically oppressed identities and communities, and to use this to prevent use of language and commission of actions that can be harmful given these histories.
7. If we inadvertently commit a microaggression, we strive to immediately become aware on our own of the harm we have caused. If another Board Manager generously helps us become aware of a microaggression we have committed we welcome the support in our learning and growing process as a leader and immediately express appreciation for having made us aware, own the mistake we have made, acknowledge the impact of the harm we have caused, and engage repair through apology and the articulation of what we will do to avoid the repetition of such harm in the future.
8. If we observe one of our fellow Board Managers commit a microaggression, we Commit to calling them in by letting them know in a respectful and kind manner of the mistake that has been made.
9. We understand that many of us, as survivors of historically oppressed identities and communities, carry internalized narratives of oppression, and we can inadvertently express these oppressions against others in ways that cause harm and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.
10. We understand that even without the history of oppression potentiating the weight of harm, expressions of prejudice and rudeness can also cause harm to our shared aims, and we Commit to the same process identified in 7 and 8 to engage repair and return to generative collaborative processes.

11. We Commit to using our Racial and Social Justice Framework (next page) for decision-making as we work together for the collective good of our communities as we eradicate health inequities and create a model healthy community.
12. We understand that we are entrusted with a vital responsibility for our communities and are accountable stewards for the time and resources available to our Board of Managers. We understand that these commitments are entered into to ensure responsible stewardship of this time and resources through generative collaborative processes to reach our vision and mission and we agree that if we do not follow any one of these commitments we welcome our Board Manager colleagues to bring this to our attention through the agreed upon process reflected here and when this occurs, we commit to immediately acknowledging the mistake and engaging in a repair and correction process as indicated in these commitments so that our work to dismantle systemic racism and resulting barriers and achieve health equity can move forward.

Be it adopted that the above agreements will be honored and acted upon by each Board Manager as of 6/30/2021 and henceforth forward as indicated by signature below.

Board Manager Signature

Date

Board Manager Printed Name

Calling In and Repairing Harm

Calling In after Harm in Groups with Shared Values and Aims Stance

Hey, this thing you said/did hurt some folks or could hurt some folks.

A) Here's why that can be hurtful or,

B) Please do some research to learn the history of why that's hurtful.

Implied message: I know you are good and are on this journey with us and we are all going to make mistakes as we unlearn things.

Calling In after Harm in Groups with Shared Values and Aims Sample Language

- I know it wasn't your intention, but what you just said minimizes the horror of _____ e.g. the history of racism, enslavement, the holocaust, etc.
- I know it wasn't your intention but what you just said has the impact of implying that _____ are not competent or as intelligent as others.
- What you just said suggests that _____ people don't belong.
- That phrase has been identified as being disrespectful and painful to _____ people and it's important that we not use it.
- Oh, I have also used that term, but I have now learned that when we use it we are leaving out people who _____ or we are implying that _____ and the word people are learning to use now is _____.
- The term used now by people living with that identity is _____.

Repairing Harm after Microaggressions, Mistakes, and expressions of Prejudice

- Own / Name it
- Recognize the Impact
- Apologize (Do not share context or explanations)
- Make any amends that are possible
- State what you are going to do to learn and do better in the future.

Sample Language: Thank you so much for letting me know. You are right, I used this term or said that phrase and realize that it has the impact of minimizing the experience of _____ or implying that _____. I am deeply sorry and will practice learning the correct language and will research and learn more about this to ensure that I do not make this mistake and cause this harm in the future.

RACIAL and SOCIAL JUSTICE FRAMEWORK

Values and Anti-Racism/Anti-Oppression

- Is this consistent with our values?
- Are we taking steps so we cannot predict outcomes by race and other systemically disadvantaged characteristics?

Intentional and Accountable Storytelling

- What data are we using and has it been disaggregated by race? What is the source of the data? Who is it making visible and invisible? Whose experience is being centralized and whose is being marginalized in the data? Does the way we are using the data reflect the complexity of the issues and reflect the issues accurately?
- What are the stories and narratives we are telling? What is the purpose? Who is interpreting the meaning? Who's it meant for? Who's impacted and how?
- Are we refusing to be ahistorical? Are we fully considering history and the impacts of the historical context?

Power Analysis

- What are the power dynamics in this situation? What are the intersecting spheres of oppression at work in this situation?
- What are the cultural norms of white supremacy at work in this situation?
- Who would benefit and who would be harmed by this action/decision?
- Does this interrupt/disrupt or collude with/reinforce oppressive systems/power structures?
- If this is attempting a solution, where are we locating the problem?
- Does the solution/strategy we are proposing change the system or the individual?
- Who are we asking to change and why?

Relationships

- Who is in the room and who isn't and why? Who is sharing and who is not and why?
- Whose perspective is represented/who is left out? And who is doing the representing? Who do we believe, who do we find credible? Why? Why not?
- Whose experience is being centralized and whose experience is being marginalized? Who is gazing and who is being gazed upon?
- Are we boldly leading toward our racial justice aim by building a broad coalition of support?
- Are we operating from a similar/shared understanding of anti-racism work? Do we have a shared anti-racist understanding of where the problem is located and a shared anti-racist theory of change to generate a solution? Have we agreed upon a shared goal?



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

January 18, 2023

AGENDA ITEM 1

Review and approve the minutes of the November 9, 2022 meeting of the Strategic Planning Committee. (*Action Item*)

MINUTES OF MEETING – NOVEMBER 9, 2022
CENTRAL HEALTH
STRATEGIC PLANNING COMMITTEE

On Wednesday, November 9, 2022, a meeting of the Central Health Strategic Planning Committee convened in open session at 1:01 p.m. in person at the Central Health Administrative Offices and remotely by toll-free videoconference. Clerk for the meeting was Briana Yanes.

Committee members present in person: Chair Brinson, Manager Jones, Manager Museitif, and Manager Valadez (arrived at 1:18 p.m.)

Board members present via audio and video or in person: Manager Bell

Absent: Manager Greenberg

PUBLIC COMMUNICATION

Clerk’s Notes: Public Communication began at 1:02 p.m. Yesenia Ramos introduced one speaker for Public Communication. The speaker was not present at the time they were called. The Board returned to public communication at 2:53 p.m. when the speaker was present.

Members of the Board heard from: Manager Cynthia Valadez

COMMITTEE AGENDA

- 1. Review and approve the minutes of the October 12, 2022 meeting of the Strategic Planning Committee.**

Clerk’s Notes: Discussion on this item began at 1:02 p.m.

Manager Bell moved that the Committee approve the minutes of the October 12, 2022 meeting of the Strategic Planning Committee.

Manager Museitif seconded the motion.

Chairperson Brinson	For
Manager Greenberg	Absent
Manager Jones	For
Manager Museitif	For
Manager Valadez	Absent

- 2. Receive and discuss a presentation previewing the Central Health Demographics Report.**

Clerk’s Notes: Discussion on this item began at 1:03 p.m. Ms. Monica Crowley, VP, Chief Strategy and Planning Officer & Senior Counsel; Ms. Sarita Clark-Leach, Director of Analytics and Reporting; and Mr. JP Eichmiller, Senior Director of Strategy and Information Design, presented on the Central Health 2022 demographics report preliminary findings. They highlighted the key takeaways listed below during their presentation:

Affordability is becoming a regional issue affecting suburban, exurban, and bedroom communities beyond Austin and Travis County. These outlying communities lack the resources and/or tax base to support the needed subsidized affordable housing options. As a result, Austin is the only city in the five-county metropolitan statistical area (MSA) with plans and funding in place to support substantial development of affordable housing for low-income residents.

Despite the high cost of living there are more than 300,000 low-income (below 200% of the federal poverty line) residents in Travis County. This population includes the following: residents receiving health coverage through Medicaid, Medicare, and ACA plans; an estimated 28,500 young adults (aged 18-24) enrolled in post-secondary school; and MAP and MAP Basic enrollees.

As a result of 1) new single-family home communities absorbing undeveloped land, 2) significant increases in home values, 3) and the influx of large manufacturing facilities, communities of high poverty are becoming more concentrated in two settings: urban areas with low-income multifamily apartments and preexisting manufactured housing communities in unincorporated areas of the County. As a result, Austin suburbs such as Pflugerville, Manor, and Hornsby Bend are not projected to house high- or moderately high concentrations of poverty in the future.

Significant health inequities were observed in two areas: 1) The East Central Austin focus area and 2) among Central Health's Black patient population.

Lastly, the utilization rates of enrollees are consistent throughout the County, regardless of proximity to a clinic or hospital, indicating prioritization to improving access to care should focus on areas with the greatest volume of need.

3. Confirm the next Strategic Planning Committee meeting date, time, and location.

Manager Valadez moved that the Committee adjourn.

Manager Jones seconded the motion.

Chairperson Brinson	For
Manager Greenberg	Absent
Manager Jones	For
Manager Museitif	For
Manager Valadez	For

The meeting was adjourned at 2:55 p.m.

Cynthia Brinson, Chairperson
Central Health Strategic Planning Committee

ATTESTED TO BY:

Cynthia Valadez, Secretary
Central Health Board of Managers



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

January 18, 2023

AGENDA ITEM 2

Receive an update on Central Health's ongoing Equity-Based Systems Planning work and Operational and Financial Sustainability Planning (OFSP), which will include developing plans to implement the Board-adopted Healthcare Equity Plan. (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	<u>1/18/2023</u>
Who will present the agenda item? (Name, Title)	<u>Monica Crowley, CSO & Sr. Counsel; Dr. Abhi Sharma (Partner, Guidehouse); Danielle Sreenivasan (Director, Guidehouse); and Julia Clark (Director, Guidehouse)</u>
General Item Description	<u>Progress update on CH ongoing Equity Based Systems Planning work</u>
Is this an informational or action item?	<u>Informational</u>
Fiscal Impact	<u>Not applicable</u>
Recommended Motion (if needed – action item)	<u>Not applicable</u>

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- Continuing the work started with the Healthcare Equity Plan, Central Health and Guidehouse are beginning the process of identifying initiatives.
- These initiatives will build on the list of Travis County safety-net health needs presented to the Central Health Board of Managers in December.
- This presentation provides an overview of the data-driven process that will be used to draft and refine initiatives.

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	<u>PowerPoint presentation</u>
Estimated time needed for presentation & questions?	<u>45 minutes, inclusive of time for Q&A</u>
Is closed session recommended? (Consult with attorneys.)	<u>No</u>
Form Prepared By/Date Submitted:	<u>Monica Crowley, 1/11/2023</u>



CENTRAL HEALTH

CommUnityCare | Sendero

Central Health Operational and Financial Sustainability Planning (OFSP)

Strategic Planning Committee (SPC)
Presentation

January 18, 2023

DRAFT – For discussion purposes only

Agenda

- 1. Introductions**
- 2. Overview of Engagement Progress and Achievements**
- 3. Review of Illustrative Template Outlining Prioritized Needs and Initiatives Based on Identified Community Needs**
- 4. Questions and Next Steps**



Engagement Progress and Achievements



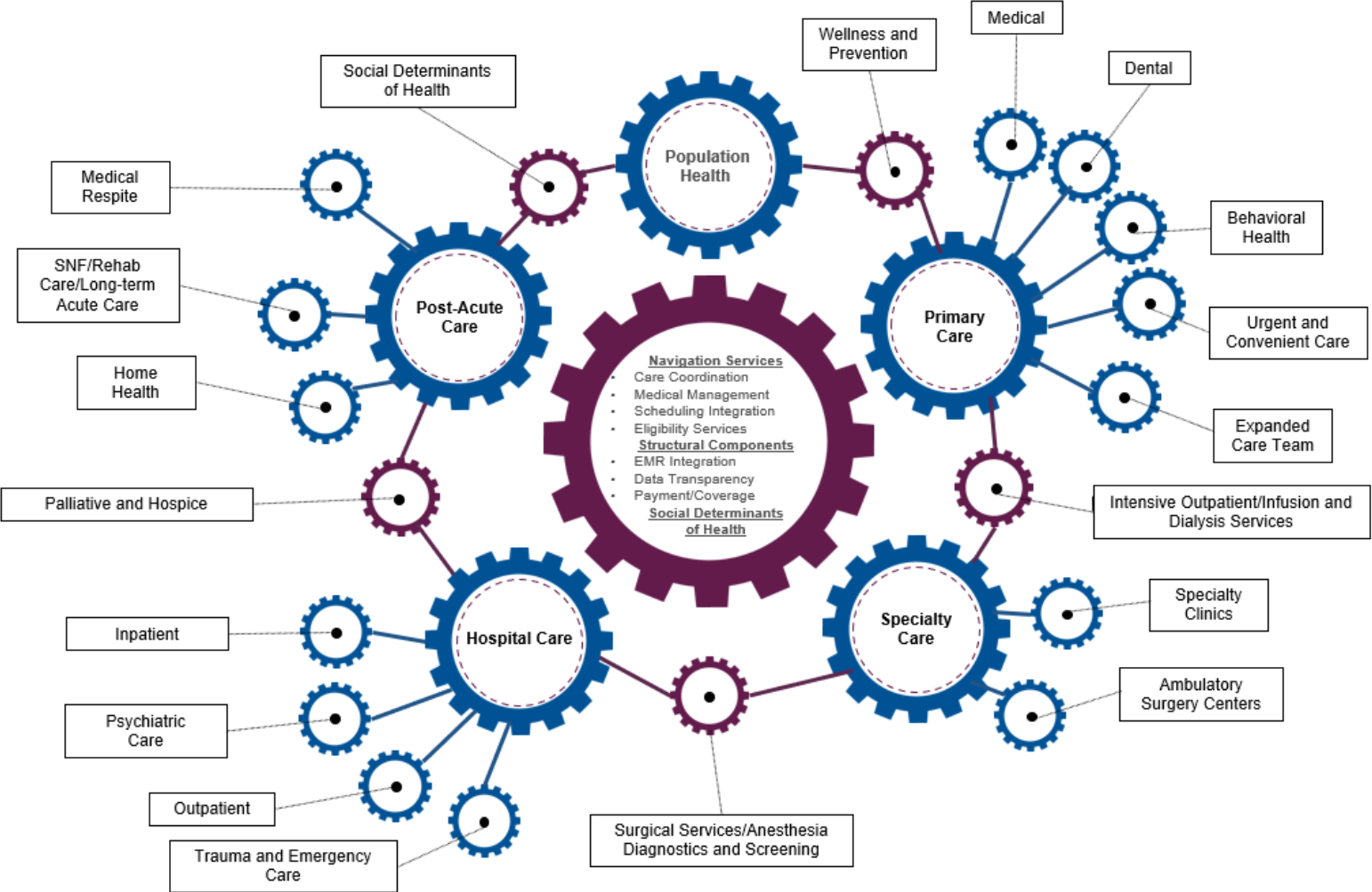
OFSP tasks completed to date:

1. Weekly working sessions and update meetings with leadership.
2. Developed list of Central Health's **community needs and draft priority levels**, which will inform Central Health's strategic initiatives.
3. Conducted In-Person **Strategic Visioning Sessions with the Central Health leadership, Central Health SMEs, and CommUnityCare** to discuss community needs and identify opportunities to jointly prioritize initiatives with partners.
4. Presented OFSP engagement overview to the Central Health **Board of Managers** on December 14th and facilitated an interactive session to solicit feedback and validate work to date.
5. Reviewed draft **list of prioritized needs, initiatives, and initiative parameters** including size, scale, and scope to address Central Health's unmet community needs.

DRAFT – For discussion purposes only

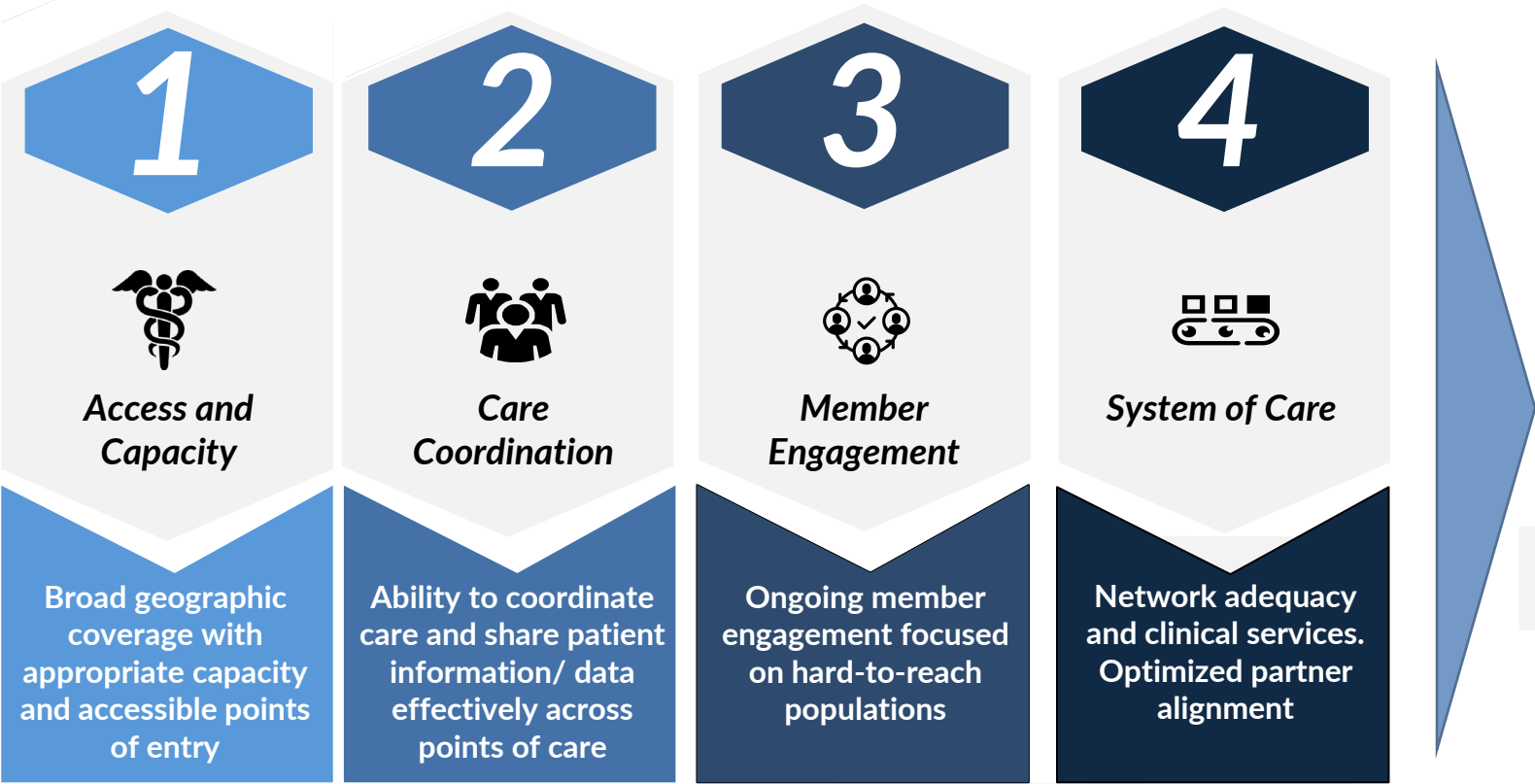


Planning Ahead: Addressing the Gaps in Our Existing System to Strategically Position Ourselves to Meet the Safety-Net's Future Health Care Needs



To Close These Gaps, Central Health Adopted its Healthcare Equity Plan to Achieve Identified System-Based Strategic Imperatives

Goal: To develop an equitable system of care that is comprehensive and accountable, while optimizing the collective use of capabilities and resources to serve residents with low incomes



- Critical Elements that Extend Across All Strategic Imperatives**
- 1. Clinical Staff
 - 2. Administrative Staff
 - 3. IT and systems capabilities
 - 4. Data Management Capabilities
 - 5. Contracts and Agreements
 - 6. Fiscal Capacity
 - 7. Infrastructure



Building Upon the Healthcare Equity Plan, Central Health Identified and Prioritized Critical Health Needs for the Safety-Net

Primary Care

- 3. Health Care for the Homeless
- 8. Expanded Access to Same-Day Care and Extended Hours, Including Virtual Options
- 9. Expanded Access to Primary Care, including CUC HIV/AIDS Program

Specialty Care / Behavioral / Dental

- 1. Expanded Access to Specialty Care
- 4. Substance Use Disorder and Addiction Medicine Services, Including MAT and Alcohol Addiction
- 7. Access to Mental Health Services
- 10. Expanded Access to Dental Care

Hospital-Based Care / Post-Acute Care

- 2. Robust Post-Acute Care, Including Respite and Extensivists
- 5. Expanded Access to Surgical Care
- 6. Expanded Access to Hospital Care

Cross-Cutting Services

Care Coordination
Physician and Clinical Workforce Supply, Including Demographically-Diverse Workforce*
 Comprehensive Multi-Disciplinary Care
 Health Systems Interoperability and Technology
 Eligibility and Enrollment Services

Additional Access Points and Infrastructure (e.g., Facilities, Technology, etc.)*
 Management of Chronic Conditions
 Expanded Access to General Prevention and Wellness
 Pharmacy

Coverage Programs, Benefits, and Structures

- Extended Enrollment Period for MAP
- Increased Enrollment of Eligible Populations
 - People experiencing homelessness, justice involved individuals, and communities where English and Spanish are not the primary language
- Restructure copays to remove patient barriers
- Additional coverage services and benefits
- Patient education (benefits, how and where to use MAP, copays)
 - Language access

Social Determinants of Health

- Improved Community Transitions for Justice-Involved Individuals
- Culturally Competent Materials and Communications
- Affordable Housing
- Access to Transportation
- Access to Healthy Foods
- Technology and Internet Access
- Stable and Consistent Employment Opportunities
- Educational Support Programs

* Denotes Workforce Planning and Organizational Infrastructure Resources **DRAFT – For discussion purposes only**

Central Health is Developing Initiatives to Close the Gap of the Most Critical Unmet Health Needs for the Safety-Net

Primary Care/ Wellness

① Primary Care



- Timely service access
- Access to social services
- Quality care

Significant Gaps Moderate Gaps Minimal Gaps

② Wellness and Prevention



- Patient communication and education
- Prevention and screening
- Diet, nutrition & exercise

Significant Gaps Moderate Gaps Minimal Gaps

③ Urgent & Convenient Care



- Virtual options
- Same day and convenient access

Significant Gaps Moderate Gaps Minimal Gaps

Specialty Care/ Behavioral/ Dental

④ Specialty Care



Select services* include Cardiology, GI, Hem/Onc, Nephrology, Neurology, Ortho, Gyn Surgery, ENT, Ophthalmology, Psych, Radiology

Significant Gaps Moderate Gaps Minimal Gaps

⑤ Behavioral Health



Substance use disorders, serious mental illness, anxiety, depression, also includes psych hospitals

Significant Gaps Moderate Gaps Minimal Gaps

⑥ Dental



Primary and specialty dental access

Significant Gaps Moderate Gaps Minimal Gaps

Hospital Based/ Post Acute

⑦ Hospital



Surgical Services, ASC Access, Hospital transitions, hospital-based specialty care, diagnostics, infusions, ED Services

Significant Gaps Moderate Gaps Minimal Gaps

⑧ Post Acute



Respite care, home health care, custodial care

Significant Gaps Moderate Gaps Minimal Gaps

*Select services include but are not limited to these.

Legend

Significant Gaps
Less than 50% of community needs are being met

Moderate Gaps
Between 50-70% of community needs are being met

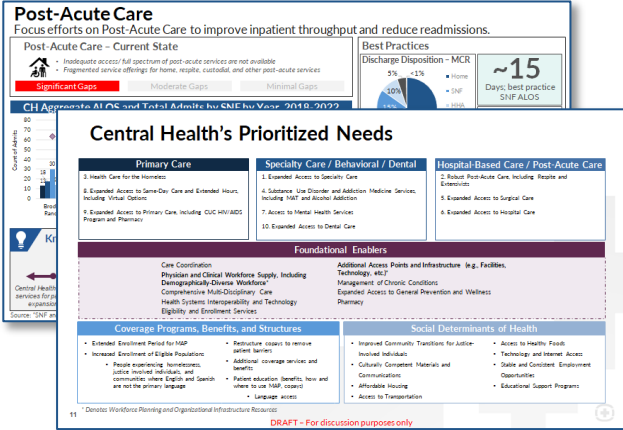
Minimal Gaps
More than 70% of community needs are being met



Guidehouse and Central Health Continue to Advance Towards Identifying Initiatives to Address Key Healthcare Gaps in the Community

Central Health and Guidehouse:

- ✓ Validated and agreed on a list of community needs, building on the Healthcare Equity Plan.
- ✓ Continue robust work group sessions to break down and overlay community needs with data.
- ✓ Continue to engage Central Health subject matter experts (SMEs), CUC SMEs, stakeholders in critical domains, and the Central Health analytics team to pressure test data and results.



Draft Initiatives



Primary Care



Specialty / Behavioral / Dental



Hospital-Based / Post-Acute Care



Foundational Enablers



Other

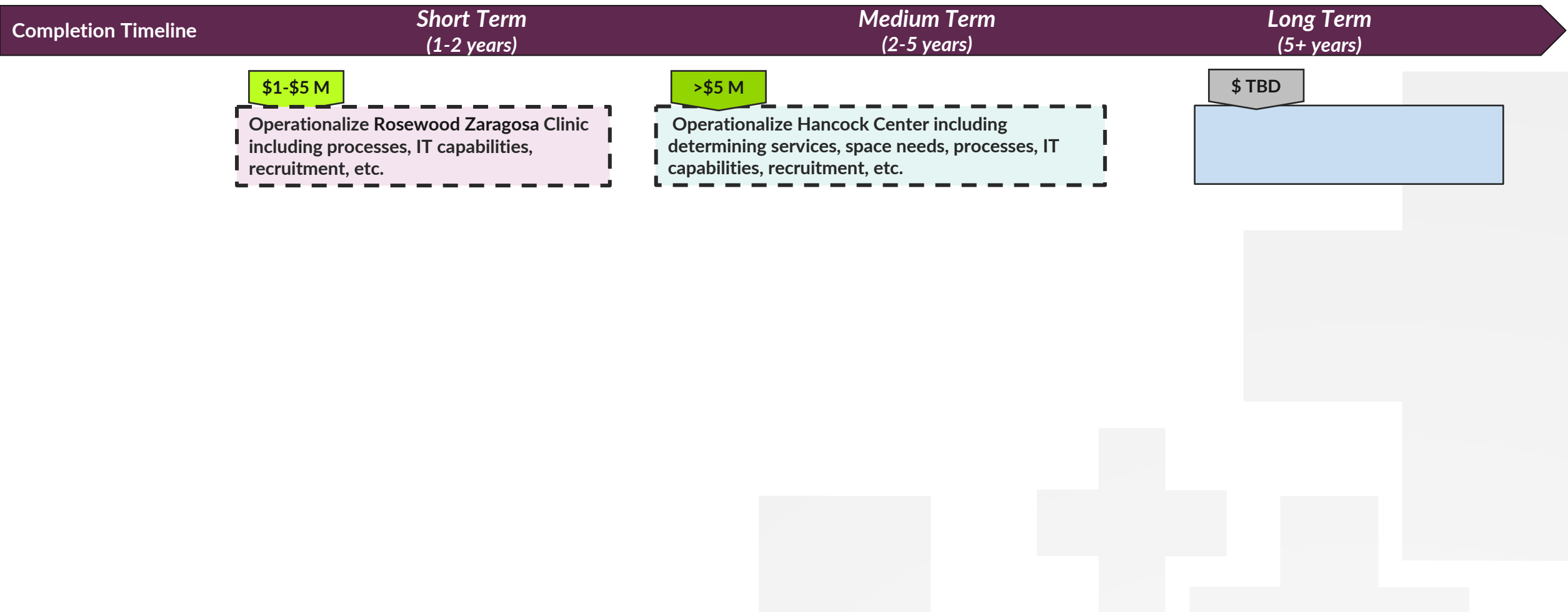
These outputs informed the development of prioritized needs and initiatives to address and advance the needs of Central Health's population.



Specialty / Behavioral / Dental

1. Expanded Access to Specialty Care

This illustrative graphic provides an example of the critical initiatives that are under development to successfully address the unmet needs of Specialty Care, Behavioral Health, and Dental over the short, medium and long terms.

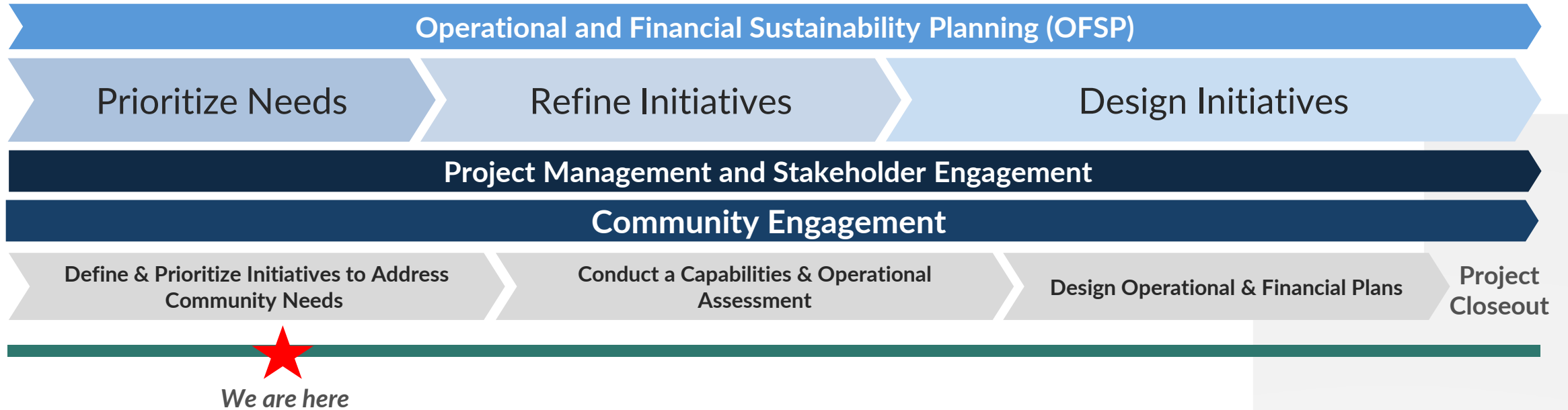


1. Financial investment estimates are based on national trend information and will be validated for Central Health in Phase 2 of this engagement
2. Prioritized need labeling coincides with ranking of community needs

	Investment Estimates ¹	Completion Status
Coincides with Existing CH Initiative	<\$1 M	Short Term (1-2 yrs.)
	\$1 - \$5 M	Medium Term (2-5 yrs.)
	>\$5 M	Long Term (5+ yrs.)



Next Steps



Immediate Next Steps

- Refine and draft prioritization of impactful initiatives to meet the health needs of Travis County's safety net population
- Begin conducting a capabilities and operational analysis across key IT, operational, financial, and clinical capabilities within Central Health for the strategic initiatives
- Present update to Board of Managers meeting in February





CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

January 18, 2023

AGENDA ITEM 3

Receive and discuss a presentation on the Central Health Demographics Report. (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	<u>1/18/2023</u>
Who will present the agenda item? (Name, Title)	<u>Sarita Clark-Leach, Director of Analytics and Reporting; JP Eichmiller, Senior Director of Strategy and Information Design Ashley Levulett, Geospatial Data Scientist Matt Richardson, Senior Data Strategy Analyst Jessie Patton-Levine, Analytics Quality Manager</u>
General Item Description	<u>Central Health 2022 Demographic Report Key Findings</u>
Is this an informational or action item?	<u>Informational</u>
Fiscal Impact	<u>NA</u>
Recommended Motion (if needed – action item)	<u></u>

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- A high cost of living has made affordability a regional issue that extends beyond the limits of Austin and Travis County. As rising housing costs and salaries have spread to the communities surrounding Travis County, Austin is becoming the regional hub for access to safety-net services including health care, affordable housing and public transportation.
- Families in poverty are becoming more concentrated along the I-35 corridor. Urban areas with low-income multifamily apartments and preexisting manufactured housing communities in unincorporated areas of the county are where the vast majority of low-income residents reside. As a result, Austin suburbs such as Pflugerville, Manor and Hornsby Bend are not projected to house high or moderately high concentrations of poverty in the future.
- Chronic disease management is a significant challenge facing Central Health and its patient population. Forty percent of patients are diagnosed with at least one chronic condition, with an average of 2.5 per patient.
- Central Health’s unhoused patient population faces unique challenges such as high emergency department encounter rates and disease prevalence rates that are 1.5 to 2 times higher than the overall patient population.
- Health equity issues present most significantly in East Central Austin and among the Black patient population.



What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)

Presentation

Estimated time needed for presentation & questions?

One hour and 30 minutes

Is closed session recommended? (Consult with attorneys.)

No

Form Prepared By/Date Submitted:

JP Eichmiller, 1/11/2023



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

January 18, 2023

AGENDA ITEM 4

Receive a year-end update on communications, community engagement, and community outreach. (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date	<u>January 18, 2023</u>
Who will present the agenda item? (Name, Title)	<u>Ted Burton, VP of Communications; Ivan Davila, Dir. of Communications and Community Engagement; Isela Guerra, Outreach Manager; Anastassia Sims-Mitchell, Multimedia Communications Supervisor</u>
General Item Description	<u>Year-end Report for Communications, Community Engagement and Community Outreach</u>
Is this an informational or action item?	<u>Informational</u>
Fiscal Impact	<u>N/A</u>
Recommended Motion (if needed – action item)	<u>N/A</u>

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- 1) Recap of 2022 Community Engagement Activities
- 2) Recap of 2022 Community Outreach Activities
- 3) Recap of 2022 Communications Activities

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.)	<u>PPT</u>
Estimated time needed for presentation & questions?	<u>15 minutes</u>
Is closed session recommended? (Consult with attorneys.)	<u>No</u>
Form Prepared By/Date Submitted:	<u>Ted Burton, 1/10/23</u>

FY 2022 COMMUNICATIONS REPORT

- Ted Burton, VP of Communications
- Iván Dávila, Dir. of Communications and Community Engagement
- Anastassia Mitchell, Multimedia Communications Supervisor
- Isela Guerra, Community Outreach Manager



CENTRAL HEALTH

THE #DREAMTEAM



CENTRAL HEALTH





[https://www.youtube.com/watch?v=TrhUmdl
mBmA&t=3s](https://www.youtube.com/watch?v=TrhUmdl
mBmA&t=3s)



CENTRAL HEALTH

COMMUNICATIONS GOAL & OBJECTIVES



CENTRAL HEALTH

GOAL

Increase awareness of Central Health, its programs and services, and the value the organization brings to the community

OBJECTIVES

1. Help Travis County residents with limited incomes get and stay connected to care and coverage.
2. Get Travis County residents involved in the work of the organization.



STRATEGIES, TACTICS & RESULTS

GOAL: Increase awareness of Central Health, its programs and services, and the value the organization brings to the community.



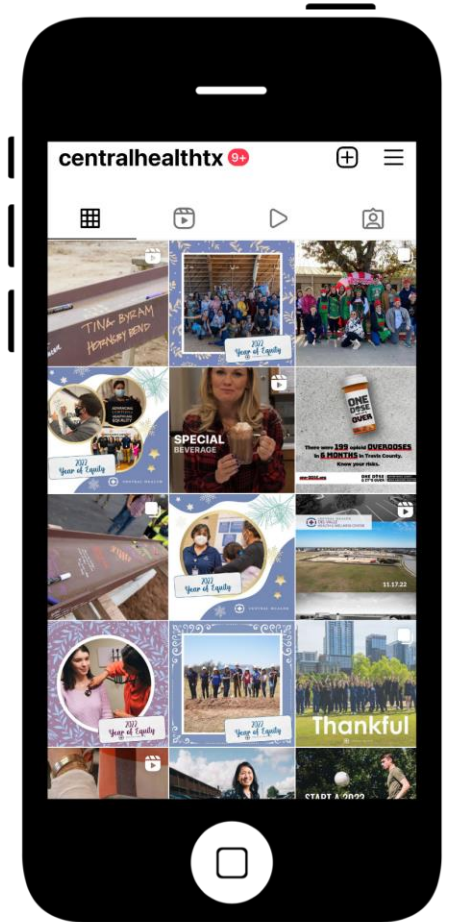
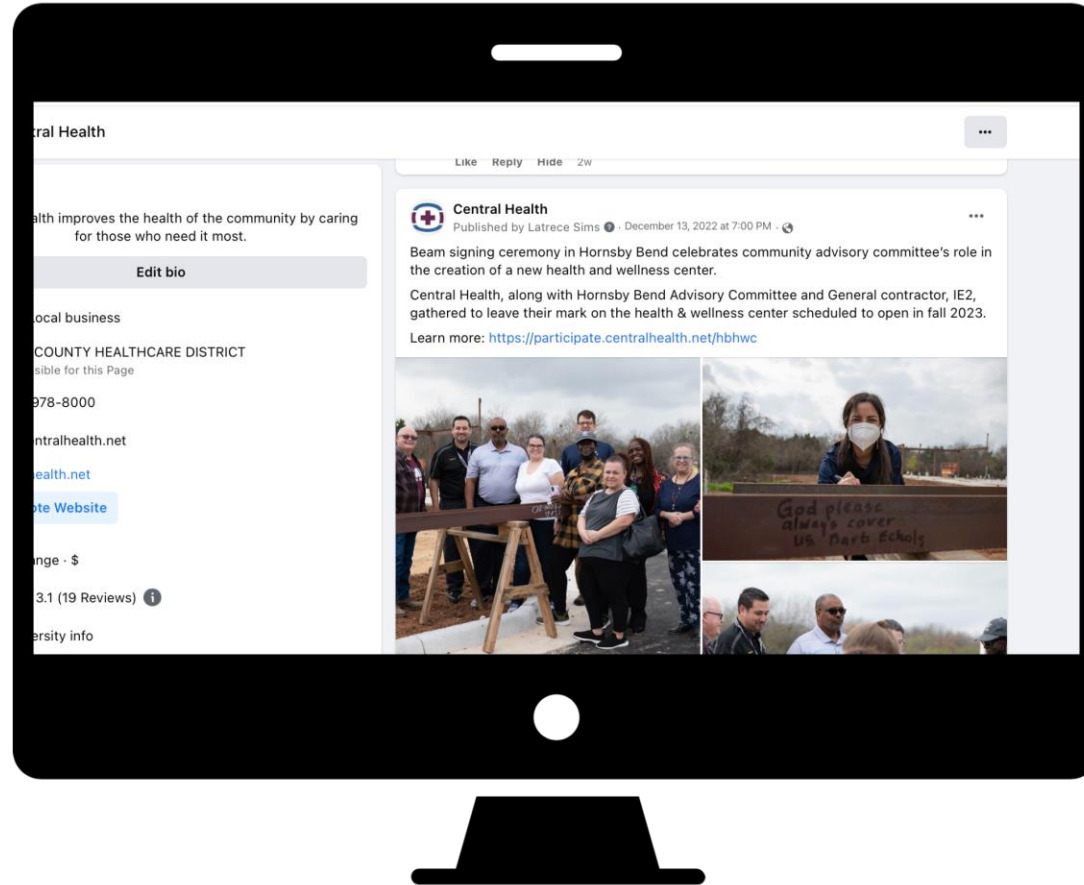
CENTRAL HEALTH

ORGANIC SOCIAL MEDIA

- Impressions: 2.1 million
- Engagement: 86,400



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EARNED MEDIA



CENTRAL HEALTH

Austin American-Statesman + Follow View Profile

For first time, Central Health budget proposal has direct care for Travis County residents

Story by Nicole Villalpando, Austin American-State...

React Comments 1

The proposed 2023 fiscal year [budget for Central Health](#) looks different in two big ways from its previous budgets – and those changes are in areas of the budget that have drawn the most criticism from community groups, including a 2017 lawsuit.

Austin American-Statesman

New multispecialty clinic in East Austin being built for low-income Travis County residents

The renovated Rosewood-Zaragosa Clinic will help fill gaps in specialty care for Medical Access Program members.

KXAN – NBC Austin

New health and wellness centers coming to East Travis County

According to Central Health, the new centers will help address long-standing health equity issues.

CommunityImpact

	2022
Mentions	667
Impressions	903.6 million
Advertising Value Equivalency	\$22.4 million

VIDEO PRODUCTION



CENTRAL HEALTH



<https://youtu.be/Sz2QS0Qbt44>

STRATEGIES, TACTICS & RESULTS

OBJECTIVE: Help Travis County residents with limited incomes get and stay connected to care and coverage.



CENTRAL HEALTH

GRASSROOTS OUTREACH



CENTRAL HEALTH



	FY 2022
Number of activities	260
Number of people reached	15,517
Number of leads generated	1,478
Number of people connected to MAP and other resources	429

PAID MEDIA

AFFORDABLE CARE ACT AND MAP/MAP BASIC



CENTRAL HEALTH

Tactics

- Streaming/online video – English & Spanish
- Radio – Spanish only
- Streaming audio – English & Spanish
- Digital display
- Paid social
- Print – El Mundo and The Villager

Results

- 24.1 million impressions
- 51,165 engagements
- 21,492 landing page views

* ACA campaign continuing through Jan. 8, 2023

**¿Sin seguro médico?
MAP le puede ayudar.**

MAP es el camino hacia atención médica de calidad para aquellos sin seguro médico y de bajos ingresos. Llame o visite en línea para ver si MAP es apropiado para usted.

Aplique a MAP hoy.
512.978.8130 | inscribeteamap.net

CENTRAL HEALTH | MAP

**PRE-EXISTING CONDITIONS
ARE COVERED.**

CENTRAL HEALTH

CRISIS COMMUNICATIONS: MPOX



Moderator:

- Ted Burton, Central Health VP of Communications

Panelists:

- Dr. Desmar Walkes, M.D., Medical Director/Health Authority, Austin Public Health
- Dr. Michael Stefanowicz, Asst. Professor Population Health, Dell Med; Assoc. Dir. of Sexual Health Programs, CommUnityCare
- Dr. Guadalupe Zamora, M.D. Central Health Board of Managers
- Dr. Aliza Norwood, M.D., FACP, Asst. Professor, Dept. of Internal Medicine and Dept. of Population Health, Dell Med
- Adrienne Stirrup, Dir. of Austin Public Health

Monkeypox Virtual Roundtable Discussion

Friday, August 5th, 2022
12:00 to 1:00 PM
on Facebook Live

Spanish, Chinese, Vietnamese, and Arabic interpretation will be available.



CENTRAL HEALTH



CommUnityCare HEALTH CENTERS

viventhealth

CRISIS COMMUNICATIONS: OPIOID AWARENESS



CENTRAL HEALTH

ONE DOSE & IT'S OVER



AUSTIN-TRAVIS COUNTY OPIOID AWARENESS COALITION

Partners:

- Central Health
- Austin Public Health
- Travis Co.
- Travis Co. District Attorney
- Integral Care

STRATEGIES, TACTICS & RESULTS

OBJECTIVE: Get Travis County residents involved in the work of the organization.



CENTRAL HEALTH

COMMUNITY HEALTH CHAMPIONS



CENTRAL HEALTH



COMMUNITY ENGAGEMENT



CENTRAL HEALTH



COMMUNITY CONVERSATIONS



COMMUNITY ADVISORY COMMITTEES



PUBLIC COMMUNICATION

	FY 2021	FY 2022
Number of activities	20	55
Number of participants	884	662

PAID MEDIA: FY 2023 STRATEGIC OBJECTIVES & BUDGET



Results

- 1.7 million impressions
- 11,065 engagements
- 4,248 landing page views
- .59% click-through rate

2022: THE YEAR OF EQUITY

Holiday Campaign



CENTRAL HEALTH



2022: Year of Equity

In 2022, Central Health laid the foundation for addressing healthcare inequities in Travis County for years to come.

Healthcare Closer to Home. Central Health broke ground on two new health centers in Del Valle and Hornsby Bend.

Healthcare is Our (New) Specialty. Central Health is hiring physicians to provide direct care to MAP and MAP Basic patients at the renovated Rosewood-Zaragosa Clinic (opening 2023).

Equity for All. Central Health launched its new Healthcare Equity Plan to build a better healthcare system for Travis County residents with low income.

Breaking Barriers to Care for LGBTQIA+ Patients. Launched by the Central Health Equity Policy Council, Austin health centers will be first in the country to work together to ensure all patients receive equitable and welcoming healthcare.

Building a Diverse Workforce. Central Health is investing in workforce training to create a diverse and inclusive workplace, launching a Diversity, Equity & Inclusion Council focused on embracing all cultures and voices within our community - and our organization.

Bilingual Health Champion Workshops. Central Health is providing training in English and Spanish to our next class of community healthcare ambassadors.

Distinguished Doctors. Central Health's Dr. Audrey Kuang is Travis County Medical Society Humanitarian of the Year.

Happy & Healthy Holidays  CENTRAL HEALTH

THANK YOU



CENTRAL HEALTH



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

January 18, 2023

AGENDA ITEM 5

Review the tentative reporting schedules for Fiscal Year 2023 activities and programs pursuant to the strategic directions established in the Fiscal Year 2023 budget resolution adopted by the Board of Managers. (*Informational Item*)



AGENDA ITEM SUBMISSION FORM

This form is to provide a general overview of the agenda item in advance of posting for the Board meeting. Proposed motion language is a recommendation only and not final until the meeting and may be changed by the Board Manager making the motion. All information in this form is subject to the Public Information Act.

Agenda Item Meeting Date January 18, 2023

Who will present the agenda item? (Name, Title) No presentation

General Item Description Review the tentative reporting schedules for Fiscal Year 2023.

Is this an informational or action item? Informational Item

Fiscal Impact N/A

Recommended Motion (if needed – action item) N/A

Key takeaways about agenda item, and/or feedback sought from the Board of Managers:

- Review the tentative reporting schedules for Fiscal Year 2023 activities and programs pursuant to the strategic directions established in the Fiscal Year 2023 budget resolution adopted by the
- 1) Board of Managers.
- 2) _____

What backup will be provided, or will this be a verbal update? (Backup is due one week before the meeting.) Report out schedule

Estimated time needed for presentation & questions? No presentation

Is closed session recommended? (Consult with attorneys.) No

Form Prepared By/Date Submitted: Briana Yanes/January 11, 2023

FY23 Central Health Adopted Budget Resolution

Strategic Objectives	Report Out Month(s)
Increase Access and Capacity	
Continue site expansions with new health centers in Hornsby Bend, Del Valle and Colony Park areas	March/May, as needed
Expansion of Specialty Care services, both contracted and direct	February
Develop multispecialty clinic at Rosewood-Zaragosa site	April/May
Enhance Behavioral Health & Substance Use Treatment with Methadone Services	February
Continue implementation of Direct Practice of Medicine	February
Increase healthcare services purchased through contracted services as appropriate	April/May
Strategic Objectives	Report Out Month(s)
Enhance Care Coordination with a Focus on Transitions of Care and Enabling Meaningful Information Sharing	
Implement Epic electronic health record for Central Health	May
Expand transitions of care program within Central Health’s practice of medicine	February
Strategic Objectives	Report Out Month(s)
Enhance Member Enrollment and Engagement	
Implement MyChart patient portal	May
Focus enhanced engagement in high-need planning and assessment regions and improve effectuation of care in the primary care setting.	April/May
Within the CommUnityCare agreement for services, allocate \$290,000 for personnel costs to conduct outreach and patient engagement among men of color, and any concurrent opportunities for at-risk persons of affinity or proximity, who are low-income or residing in assessment regions with the highest social vulnerability scores as outlined in the Healthcare Equity Plan. Further, the funding of personnel costs will be concurrent with agreements between CommUnityCare and the Black Mens’ Clinic as detailed in a prospective engagement plan presented to the Central Health Board of Managers by CommUnityCare by the end of the First Quarter of Fiscal Year 2023, if not sooner.	December (Complete) July/August

Strategic Objectives	Report Out Month(s)
Continue to Develop System of Care Infrastructure	
Complete development and adoption of service delivery operational implementation and financial sustainability plans, alignment, and accountability.	Monthly
Continue to develop and implement a hospital care and services funding model that is transparent and structured such that any funding commitments and assumptions of risk ensure optimum use of local tax dollars and other public funds to improve health of population to be served.	At least quarterly but up to monthly
Continue development of direct clinical practice infrastructure	April/May
Include cancer screening, diagnosis, and treatment services as service lines are developed for staging of priorities within the Healthcare Equity Plan, and further provide a descriptive summary of the landscape for cancer prevention and care in Travis County.	July/August
<p>Central Health staff will present to the Central Health Board of Managers a defined reporting matrix, in collaboration with UT-Austin and the Dell Medical School and consistent with all terms of the Affiliation Agreement, that will include details on the clear reporting of the expenditures from the Permitted Investment Payment (\$35,000,000 per year) related to each of the six categories of Permitted Investments and other obligations within the Affiliation Agreement.</p> <ol style="list-style-type: none"> 1. The reporting matrix shall include, but is not limited to, the information requested by the Central Health Board of Managers in advance of the July 27, 2022 Board Meeting, and to the extent possible any subsequent requests. 2. This matrix shall be developed by December 1, 2022 and presented at the following Board of Managers meeting. 3. The reporting information shall be provided to the Central Health Board of Managers on a schedule beginning January 31, 2023 and continuing through January 31, 2024, with specific reporting elements and intervals in accordance with the agendas for the Board of Managers' meetings. 4. Concurrently, the Board and CEO, and other staff as designated, shall continue to optimize all the provisions, including the enforcement remedies, in the affiliation agreement for the benefit of the patients served by or eligible for the Medical Access Program. 	January

Strategic Objectives	Report Out Month(s)
Support Operations	
Increase support for active and future facilities construction and maintenance	<ul style="list-style-type: none"> ▪Part of FY 2024 budget development and any new business cases. ▪Memo with update August 2023
Expand human resources department to support growing organization and new practice of medicine	Quarterly, reflecting the most current month of information.
Evaluate and implement CLAS (Culturally and linguistically appropriate services) standards	Preliminary findings by May; Report August
Centralize and develop a visible and robust risk management program	July/August
Enhance records management program	March
Expand resources to support new eastern Travis County Health and Wellness operations	July/August
Expand joint technology to support additional technology and security systems	April/August
Utilize health system resources to leverage healthcare infrastructure	TBD
Develop HUB policy recommendations and finalize planning to implement program	<p>Reported overview of new program in November to Board; Proceeding with implementation.</p> <p>Report out schedule:</p> <ul style="list-style-type: none"> -February: FY22 HUB report presentation and verbal update on HUB implementation -July/August: Written update on HUB program implementation progress -September: Written update on HUB program implementation progress
Staff will procure services necessary to conduct the five-year performance review. Further, as part of the performance review, staff will present information on the major past events, conditions, and circumstances that have influenced the strategic direction of the Travis County Health Care District. This information will also be shared for the benefit of developing the Healthcare Equity - Operational and Financial Sustainability Plan pursuant to Section B.	TBD



CENTRAL HEALTH

CENTRAL HEALTH BOARD OF MANAGERS
STRATEGIC PLANNING COMMITTEE

January 18, 2023

AGENDA ITEM 6

Confirm the next Strategic Planning Committee meeting date, time, and location. (*Informational Item*)