

7/22/24 CPAG Meeting 1 Notes

Attendees:

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CPAG	Noha Aboelata (Roots)	 Matthew Maddaus (BH
Members	 Keith Carson (BOS District 5, Co- 	Collaborative)
	Chair)	 Andie Martinez Patterson (CHCN)
	Aneeka Chaudhry (Alameda	 Ana Rasquiza (RCD)
	County Health)	 Cristi Ritschel (SAHA)
	Colleen Chawla (Alameda County Health, Co-Chair)	 Jonathan Russell (Alameda County Health)
	Dr. Kathleen Clanon (Alameda	Lisa Ryan (CalPEP)
	County Health)	Dr. Chika Ugbaja (Great
	Narges Dillon (Crisis Support	Expectations)
	Services)	Kimi Watkins-Tartt (Alameda
	Donald Frazier (BOSS)	County Health)
	Noah Gallo (Delegate for Dr. Karyn	 Matt Woodruff (Alameda Alliance)
	Tribble, Alameda County Health)	Kathy Young (TriValley NonProfit
	James Jackson (AHS)	Alliance)
	Aiyana Knowles (Delegate for)	,,
	Aaron Ortiz, La Familia)	
Other	Michael Arnold (Facilitator)	Julia Liou (Asian Health Services)
Participants	Tejasi Bilgi (La Familia)	Kimia Pakdaman (Alameda County
	Evette Brandon (Alameda County	Health)
	Health)	 Amy Shrago (BOS District 5)
	Brian Godwin (Alameda County Health)	 Elizabeth Taing (Alameda County Health)
	Melissa Hernandez (BOS District 1)	 Suzanne Warner (Alameda County
	Kerry Landry (Facilitator)	Health)

Summary Notes

Agenda Item	Themes and Highlights	
Opening Remarks	 Supervisor Keith Carson and Colleen Chawla (Alameda County Health Director) Agencies and organizations working in Alameda County implementing or supporting many cross-cutting initiatives to serve similar populations. In order to best serve our community, we need to continually collaborate as we go forward. We are all being asked to do more with less. During this meeting series, we are looking to gain a shared understanding of the system strengths, pain points, and priorities to guide our work as the safety net evolves. 	
Presentation	Colleen Chawla and Aneeka Chaudhry presented slides on the high-level landscape of Alameda County safety net, and key concepts and initiative overlaps that will be covered during CPAG meetings. • Landscape: Data slides show:	



Agenda Item Themes and Highlights

- Increased Medi-Cal enrollment, increased homelessness, and decreased HealthPAC enrollment over the past decade
- Most residents served by Medi-Cal and HealthPAC are people of color, with Medi-Cal having significant Black and Latinx enrollees and HealthPAC being majority Latinx.
- Director Chawla shared information about AC Health's agencywide priorities and mission and discussed why the CPAG is important:
 - Alameda County's network of community-based provider is critical for offering care and support that respects cultural diversity and meets residents where they are.
 - More state and federal policies are requiring us to connect the dots across organizations and sectors (Prop 1, CalAIM, etc.)
 - Long-standing health disparities persist in Alameda County and promoting health equity may mean different or new approaches.
 - To implement effective local strategies and required statewide mandates, we need collaboration across County departments and well as community partners.
 - CPAG is an opportunity to collectively think of solutions that will also consider ongoing health disparities and best support the community we all serve.
- Key concepts: Aneeka Chaudhry presented high-level overview of several concepts that will be visited in more detail in later CPAG meetings:
 - Community Health: HealthPAC, Community Health Improvement Plan (CHIP), and Medi-Cal Population Health Management
 - Behavioral Health: Behavioral Health Department Strategic Plan
 - Behavioral Health and Justice Involvement: Care First Jails Last
 - Behavioral Health and Homelessness: Behavioral Health Transformation/Prop 1
 - Housing & Homelessness: Home Together 2026 Community Plan
 - CalAIM
 - Data Exchange: Social Health Information Exchange (SHIE) and Data Exchange Framework (DxF)
- On slide 28, Aneeka highlighted cross-cutting priorities identified across the
 various initiatives. These priorities are the basis for our collaboration as a
 group. We want to brainstorm together how to achieve these goals as a
 system.
 - Ensure equitable access to care and services.
 - Address physical, behavioral, and social health care needs.
 Prevent and reduce homelessness.
 - Prevent and reduce justice involvement.
 - Ensure service delivery is integrated across sectors.
 - Support resilient communities.
 - Enhance cross -system coordination and data infrastructure.



Agenda Item

Themes and Highlights

Breakout Groups

Groups were asked the following two questions to guide their discussion, and to add sticky notes with ideas and questions into buckets of Community Health, Behavioral Health, Homelessness, and Cross-Cutting:

- What questions emerge from what was shared?
- What considerations or issues are most important to address in these topics?

A large majority of the stickies from each group were in the Cross-Cutting category.

Themes from Large Group Report Outs and Debrief Challenges

- Lack of infrastructure & data capabilities for coordinated care-- how do systems talk to each other and who is in charge of it?
- Different sectors have different languages-- need common understanding to work together (not just language, but conception behind it)
- Challenges navigating federal political and administration changes
- Recruiting, training, and retaining workforce
- How to evaluate impact of systems and policy changes?
- Lack of adequate resources to support the community (e.g. housing)
- Need for advocacy and more inclusion of provider-facing and on the ground staff in developing and providing feedback on new policies
- Current funding landscape doesn't support collaboration. Categorical funding and different funding streams have different goals and policies.
- Not everyone is hearing the same information at the same time, community organizations sometimes unclear on where/when they can provide feedback and input

Opportunities

- Identify opportunities to share infrastructure/services (e.g. to manage compliance reporting, Medi-Cal, invoicing, etc.)
- Develop shared logic/decision making/framework to integrate and prioritize all the changes and initiatives
- Coordinating communication and information sharing across the system (e.g. transparency around implementation of state initiatives and housing production planning)
- Higher level policy/rules coordination (ex. Re: housing policy at city, county, shelter, bed)
- More collaboration and coordination to maximize funding
- Data sharing: How to share results? What worked? What hasn't?
- Broader education efforts to support understanding of complex systems change for organizations on the ground

Public Comment

No public comments.



Closing Remarks & Next Steps The group closed out with key takeaways, and themes included: hopefulness, collaboration, coordination, clarity, gratitude, excitement, renewed focus, and commitment to working together. Supervisor Carson and Director Chawla thanked everyone for their time and candor. The Backbone and Facilitation team will review themes from the sticky note exercise to plan next meeting and share notes with the group.