Healthy Sacramento Coalition Meeting  
June 25, 2014  
Meeting Summary

Meeting Outcomes:
- To provide an update to HSC members on pilot project awardees
- To gain consensus on approach to CDC funding opportunity

Welcome and Overview
Greg Hodge, Facilitator, Khepera Consulting, welcomed everyone and began the meeting by having everyone introduce themselves and share one thing each person does to stay healthy. He provided a brief overview of the meeting agenda.

Announcement of Pilot Project Awardees
Robert Phillips, Sierra Health Foundation Director of Health Programs, shared a brief update on the pilot project process. Although awardees have been selected, decisions will not be announced publicly until all organizations have been contacted. Coalition members will be informed of the awardees in the near future via the HSC E-Update Newsletter. One of the pilot projects will require discussion with the workgroup about the recommendation before a decision is made. We have reached the end of the pilot project process and there are a few outstanding items that are currently being finalized. For more information refer to presentation titled: Pilot Projects Implementation Update online at: http://www.sierrahealth.org/assets/HSC/HSC_Pilot_Projects_Applicant_Update.pdf

Discussion of CDC Funding Opportunity
Robert provided a brief summary on the content of the Partnerships to Improve Community Health (PICH) proposal and the timeline we are operating under. All of the grants will be implementation grants and the focus areas are similar in scope. Robert reviewed the outcomes of the PICH focus areas. There is an explicit requirement that applicants must address health disparities in specific populations with a focus on health equity. The Healthy Sacramento Coalition will apply under the large cities and urban counties (population of 5000,000 or more) as the geographic category. CDC must get the money out by this fiscal year, and this opportunity will start September 30, 2014. Robert reviewed the major milestones and the timeline that will lead up to the final proposal submission date of Friday, July 18, 2014. For more information refer to presentation titled: Partnerships to Improve Community Health (PICH) Proposal Development Process online at: http://www.sierrahealth.org/assets/HSC/PICH_Grant_Process_June_2014.pdf

Q: Are the workgroups scheduled to meet, so that we can meet the timeline of submission?
A: The Clinical and Community Health Integration workgroup is scheduled to meet on July 10. The other workgroups will need to schedule a meeting to discuss the PICH draft template if they so choose to do so.

Q: Based on the overall goals of the PICH how do those numbers or percentages translate into numbers to help us figure out what our baseline is?
A: As a reminder on the CTIP process, the 525,000 number is derived from the approximate number of people in the 15 zip codes we planned on targeting from the data found in the community needs assessment. This will meet the grant requirement. For CDC the goal is not to hit the three percent reduction, but to show directionally that we are moving the county towards this reduction. There is a clear distinction.

Q: When we are referring to people, are we always referring to 525,000, can we separate zip codes in the County?
A: Yes, but this will depend on the specific efforts we land on. If we pick a few zip codes then that will be the number as the baseline, if we select a certain population and they are concentrated in a few neighborhoods then that will be the baseline number. For example if we focus on the population target of youth ages 12-24 in eight zip codes, then this would be the baseline number.

C: I think we should think about theatres and movie theatres to partner with them because they are underutilized. We should get them to show some videos and programming for youth who are going to be the future buyers. We should do something with film; there are some videos we have seen over the course of the year that we should showcase with youth. This is what I have been most impacted by while attending the coalition meetings. This is a new strategy worth putting in.

As we think about the proposal in the breakouts later in the day, this topic should be brought up and incorporated in the existing focus areas and in one of the strategies in the CTIP.

Q: How does the work that has already been done in the workgroups show up?
A: This is the opportunity to merge what we have received from the workgroups and with what exists in the CTIP. To be clear, though, we are not changing our strategies. The things that we can change are the activities. If the content is not found in the draft documents, then this is the opportunity for the workgroups to bring this up during the workgroup breakout sessions. There is one caveat; it needs to match what we have already selected as priorities that are identified in the CTIP document.

Robert clarified that if anything new is suggested it will have to include all the components of the template with a fully flushed out strategy. If the workgroup comes up with a new idea they will have to put together a work plan for the respective idea. They will not need to put a budget together but will have to be consistent with the budget principles that we establish. Be mindful of the framework of what CDC is looking for when participating in the workgroup breakout sessions.

Two new items in the overarching goals is the incorporation of policy, systems, and environmental change (PSE) to environmental change and there is a theory of change framework in the Notice of Funding Availability (NOFA). Our strategies and approach need to align with this framework. The second item is that the strategies should have transferability to all parts of the county for a county-wide impact and to call out specific populations that will be addressed.

C: One challenge with the 15 zip codes is the fact that many of them do not have organized neighborhood associations. This poses a challenge for us, the groundwork has not been done to turn some communities into actual communities that provide and address diversity in age, ethnicity, and culture. This is a gaping hole in our communities.

One update in the PICH focus areas is that the Healthy Eating Active Living goals are now two separate goals. One will solely address Healthy Eating and another will address Active Living.

The Healthy Sacramento Coalition is made possible by funding from the Centers for Disease Control and Prevention and Sierra Health Foundation.
C: A friendly reminder is that this is not the only grant opportunity we have; there will be other opportunities that will arise that may have a different focus. There may be other projects or goals that we have that may not be addressed in this proposal but we can seek future opportunities to focus on.

Robert reviewed the technical requirements of the PICH which include: 50% of the resources must go out to the community, 10% of the resources must go towards evaluation, and 10% of the resources must go towards communications. The other requirement includes the demonstrated, active, and existing multi-sectoral coalition.

The workgroups participated in a break out session to review and discuss the approach to the PICH proposal.

**Next Meeting**
Please note, there is no meeting in July. The next meeting is scheduled for Wednesday, August 27, 2014, see website for more information. Registration is required. Visit the Healthy Sacramento Coalition web page at [www.sierrahealth.org/healthysacramento](http://www.sierrahealth.org/healthysacramento) and register today.