



## **Community Advisory Council Minutes**

October 20, 2015 at Noon

FamilyCare Offices

Multnomah County

**Members Present:** Jessica Coshatt, Jan Tesch, Nicholas Ocon, Chom Sou, Leticia Sainz, Martha Spiers, Royal Harris

**Members Absent:** Jasmine Hernandez

**Staff Present:** Brett Hamilton, Meg Pitman, Josie Silverman, Matt Morscheck

**Guests/Other:** Dustin Zimmerman, Oregon Health Authority (OHA); Marsia Gunter, Carnahan Smith & Gunter; Celia Higuera, Oregon Community Health Worker Association; Sarah Keefe, Oregon Coalition Against Domestic & Sexual Violence; Rowan Everard, Basic Rights Oregon

**Welcome/ Introduction:** Chair Jan Tesch welcomed the Council members and guests. Called the meeting to order at 12:00pm.

### **Approval of minutes:**

Motion to approve minutes from September 15, 2015 by Jessica Coshatt, seconded by Chom Sou.

ABSTAIN: Martha Spiers

### **Motion carried.**

**Leadership Development:** Jan Tesch expressed her appreciation for Council members' efforts and shared how she was impressed with them as individuals. Tesch said she had been thinking about how FamilyCare could show its gratitude in a meaningful way.

Tesch continued that she saw each Council member as a leader in their community. Therefore she explained she spoke with FamilyCare President/ CEO, Jeff Heatherington, about offering Council members the opportunity for leadership development training to continue their leadership development. Heatherington agreed to offer the same training provided to FamilyCare Health executives and managers through a company called Carnahan Smith & Gunter.

Then Tesch introduced Marsia Gunter to the Council. Tesch explained that Marsia's company, CSG, has been providing FamilyCare executives and managers leadership development, called Continuous Breakthroughs Leadership for many years. Gunter told the Council the Breakthrough Training is designed to take people to next level of leadership.

Gunter said that CSG would offer an array of opportunities to Council members to get the training such as after a regular CAC meeting, a separately scheduled meeting, or with FamilyCare staff.

Tesch encouraged Council members to take advantage of this opportunity for professional leadership training. She said, "I want to uniquely compensate Council members. This is one way FamilyCare can reward participation, give a vote of confidence, and have Council members leaving the Council as stronger leaders.

Gunter said if you are interested in the training call Bobbi Humphries at (503) 244-6701 by November 1.

**Community Health Improvement Plan Update:** Meg Pitman provided the Council with an update of the implementation of the Community Health Improvement Plan (CHIP).

Pitman reported that she rewrote the CHIP strategies to make it clearer. She expanded the outcomes for more of a population health approach and moved away from tying everything to the CCO metrics, which are largely based upon claims data.

Pitman distributed the amended CHIP and requested that the Council review the latest draft of the CHIP and provide feedback. In particular she asked that the Council focus on the strategies as well as the retention of the CHIP's original spirit and intent. Pitman asked for feedback by Friday, October 30th.

**Introducing Health Equity Coordinator:** Brett Hamilton introduced Josie Silverman to the Council as a new employee. Hamilton explained that Josie was hired as the Health Equity Coordinator and that it was a new position for FamilyCare.

Silverman told the group that before coming to FamilyCare that she worked at the Oregon Health Authority as a Regional Outreach Coordinator. The position gave her the opportunity to build a lot of relationships in the Tri-County.

Silver explained that her job had two main prongs. The first prong is to analysis FamilyCare's data and identify health disparities and/or other patterns of health inequities. The second prong is to work with community gatekeepers to identify barriers to being healthy and access to healthcare.

**Cultural Agility:** Hamilton invited Matt Morscheck, FamilyCare's Talent Development Program Coordinator, to the Council meeting to inform the Council of cultural agility training FamilyCare had offered its staff over the past year. Hamilton said this was important since the CHIP specifically identified training as one of the intended outcomes.

Matt Morscheck told the Council that every employee in 2014 went through an introduction to cultural agility training. The training was provided by an outside company, Figure Eight.

Morscheck continued that in 2015 FamilyCare held several internal sessions including:

- Micro-aggressions
- Work place discrimination
- Adverse Childhood Experience
- Introduction to poverty
- Cultural Agility
  - Provided by Asian Health and Family Services

- Domestic and Sexual Violence Training
- New Transgender benefit training

Morscheck also told the Council that the human resources department had recently conducted an internal survey to assess what cultural agility staff felt they needed to know to perform their jobs. Morscheck explained that three main themes emerged: age, transgender, and poverty.

Royal Harris said that how an organization defines cultural agility is important, especially for a business. He explained that cultural agility will get the most traction when it is put into context of improving the bottom line. He said, "For today's global organizations cultural agility is the new competitive edge."

Harris suggest FamilyCare consider offering the following definition of cultural agility:

*Cultural agility- is the ability to understand multiple local contexts and work within them to obtain consistent business results.*

Leticia Sainz suggested that a cultural agility business enables people to receive referrals from people who look like them and this is a part of member services.

Harris agreed and said that member services need to learn how to ask questions of its customers to build connections and steer them to the appropriate services.

Sainz agreed saying, "It is an ongoing process to develop member services."

Tesch said that it is a real challenge for the provider network to have enough appropriate providers to meet the needs of FamilyCare diverse membership.

Nick Ocon said that the challenge has been exasperated because there is often cultural differences even within a certain family. Latino families can have difference cultures within a family. "Now providers have to navigate generations of cultural."

Harris said that the term cultural competency is arrogant. He suggested that an approach of being aware that someone is different and acknowledging that person can only be the expert of their own experience. Harris said that is why he appreciates popular education. Popular education is based on the idea that, whether we are farmworkers, doctors, waitresses or lawyers, we all know a lot as a result of our life experience. Therefore, educators and organizers should always start with what people already know and build on it.

**Next Meeting: November 16<sup>th</sup>**, next council meeting at FamilyCare Noon to 2pm.

**Meeting Adjourned at 2:05pm**