| Group A | | Group B | | Group C | |
|---|---|--------------------------------------|---|---------------------------------------|---|
| Types of work Groups: | • | Meeting every other month is a long- | • | Workgroups focus on Accessible | • |
| Community adv board – needs | | time to go. | | Medical Care only | |
| to have teeth, needs support. | • | "Groups like this need to have a | • | One topic that all focus on different | |

- accountability board.
 People can join based on passion interest skillset
 local partners in this collaboration bring to the table what they doing.
- Coalition of Resources- we already are and Maria shares our calendar of events and resource flyers

Called comm advisory and

 Civic Action Network – seems like a non-funded echo chamber yelling into the void

Workgroups meet whenever they want in between big group meetings.

Success defined:

- Actionable goal measurable SMART/HOPE Goals
- Be comfortable with being uncomfortable with solutions.
 Try new things to reach goals.

ASKS:

Accessibility & transparency from KPHD

- Having notes from past notes accessible
- Show data from past interviews and surveys from HEC

- "Groups like this need to have a purpose." Not speakers but our local partners in this collaboration, bring to the table what they are doing.
- We did agree we did think the 3 topics are still relevant.
- "Make an ask" from the collaborative to larger community, find commonalities between groups/organization.

Success defined: June - June

- Small steps
- Where are the one pagers from last year?
- We have gotten started, so consultation and communication should be from KPHD to KPHD
- HEC identifies action based on community needs
- KPHD chooses from those recommendations
- Come up with LT plan of action Strengths:
- On off month have networking//community building meetings/ "Lunch meetings" relationship building and sharing

- One topic that all focus on different areas of, such as:
 - Aspects (define them)
 - Examine disparities, outcomes
 - Meet in smaller groups feedback from all groups frequently disseminated to all.
- Civic Action Network model
 - Like minded interests
 - Include rep (each group)
 blend of professions, skills
 and experience.
- Community advisory board (after all action items, timeline established, "wheels are in motion."
- There is a liaison monitoring process between Civic Action Network and Community advisory board.
- Funding???

Next steps:

 Large group – more efficient, likeminded goals > 1 rep per group to report to large group

Success defined:

· Targeted surveys data

Zoom Group All areas of priority overlap but we

- should have at least three
 workgroups based on the three
 identified priorities
- Workgroups meet in month between HEC meetings
- Patterns & Structures:
 - Regular scheduled dates and times for meetings
 - Groups do not meet on same date/time for flexibility for members to join multiple workgroups
 - Each workgroup has liaison(s) between the different groups – core group than can take their experience from one group to other groups. Visits by liaison(s) could be done at the end of each quarter or so.
 - Notes from workgroups are shared out like HEC notes to all HEC members and include a summary at the end of who is doing what and what has been followed through
 - Be aware of group sizes so that not any one group is too

KPHD: Tech

- Provide feedback, comment on past minutes and work product
- We don't know who's online. Could use an owl to display on screen participants (e.g.)

KPHD is currently a gatekeeper to info, like survey/interviews, minutes, work product, solution: Website? Share drive?

- Community building is super important
- KPHD is really making a very real effort to be a convener of community organizations
- "No Robert's Rules"
- Collaboration not competition Weakness:
- Confusion over HEC collaboration and other KPHD health collaborative meeting.
- Miss larger group networking

- Define the players
 - Data collection, dissemination
 - Accountability (all community
 - govt (city/state)
 - public, private, local healthcare
 - community resource agencies
- Timelines (STGs, LTGs)
 - Accountability
 - Individual community (polling data, progress reports)
- Measure time/duration
 - Personal data need to gather how much time did it take to get an appt, to treatment, to wellness, and lapse in time for specialists

- big or too small, but don't limit size. If people have a passion, they should be able to join. Consider the value of having a subject matter expert attend meetings as needed.
- Have the workgroups create their own organic processes.
- Big meeting should not be only a report back from workgroups session
- Workgroups provide only a cursory overview necessary to push agenda/ideas forward
- Collaborate between groups
- Small groups identify actions they want from big group
- Establish how accountability and responsibility will be measured to/from small group to big group

Weakness:

 Scheduling yet another mutually convenient time for several people to meet

Envelope B:

- Every other month have community building event
- Have horizontal accountability not top down
- KPHD should act on recommendations from HEC
- Truth reconciliation for healing
- Collaboration not competition

Zoom chat comments about what they liked from different groups:

Group A

• Accessibility & accountability

Group B

- Articulating purpose
- HEC gives recommendation to KPHD to act or create plan
- Collaboration not competition

Group C

- Focus on one topic
- Target surveys

Zoom group

- Flexibility
- Identify what to act on and having workgroup define success for each action