



Executive Committee Meeting

Thursday, January 20, 2011

UROC

2001 Plymouth Avenue North Minneapolis, MN 55411

12:00 p.m. – 2:00 p.m.

Mission

To reduce infant mortality rates among the Minneapolis and St. Paul African American and American Indian communities.

Agenda

11:45 a.m.	Lunch Served & Networking Opportunity	Committee
12:00 p.m.	Welcome/Introductions	Committee
	Approval of Agenda/Minutes	Brian Thomas May
12:05	American Indian Consultant RFP	Angela Watts
12:15	HRSA Report/2011-2012 Budget	Angela Watts
12:35	Central Staff Restructuring <ul style="list-style-type: none"> • Welcome to Stacye! 	Angela Watts
12:45	Site Monitoring <ul style="list-style-type: none"> • Chart Audits Coming in March for Program Sites • Training in February 	Angela Watts, Stacye Ballard and Grace Anderson
1:00	Progress Reports Due	Angela Watts
1:10	Day 366 Campaign	Brian Thomas May
	Upcoming TCHS Meetings <ul style="list-style-type: none"> • Program Site Meeting February 10 1:00 – 2:00 p.m. Location: UROC • TCHS Advisory Committee Meeting Thursday, February 17 5:00 – 7:30 p.m. Location: Family YMCA Midway • Program Site Case Manager Retreat Thursday, February 24 9:00 – 4:00 p.m. Location: UROC 	
	Next Executive Committee Meeting Thursday, March 17, 2011 Time: 11:45 a.m. – 2 p.m. Location: TBD	
2:00	Adjourn	

Last Name	First Name	Organization	Executive Committee 01/2011	RSVP (Initial)
Anderson	Grace	TCHS Central Staff	R	
Ballard	Stacye	TCHS Central Staff	R	
Bence	Kenneth	Medica	E	
Brown	Cleora	community member	R	CB
Chippendale	Mary Jo	Minnesota Department of Health	E	
Coleman	Jacqueline	NorthPoint Health & Wellness Center	E	
Fernbach	Kathleen	Minnesota SID Center	R	KG
Fern-Gaston	Jessica	TCHS Advisory Committee Liaison	E	
Fogarty	Cheryl	Minnesota Department of Health		
Fountain	Theresa	Resources for Child Caring		
Giammar	Dr. Lauren	Broadway Family Medicine	R	LG
Graham	Patty	Metropolitan Health Plan	R	WJ
Guerra de Patino	Janeth	East Side Family Clinic	R	JOP
Haag	Phyllis	Ramsey County Department of Health	R	PH
Harrison	Pat	TCHS Central Staff	E	
Jones	Clarence	Southside Community Health Clinic	R	ry
Keuhn	Marianne	March of Dimes	E	
Lafloe	Janice	American Indian Family Center	A	JL
Lindo	Jeanetta	Hennepin County Child Teen Checkup	R	JL
Lucas	Carla	NorthPoint Health & Wellness Center	R	COL
May	Brian	TCHS Central Staff	R	
McPherson	Lori	Broadway Family Medicine	E	
Morgan	Dr. Tamiko	HCMC Hennepin County Medical Center	R	TM
Mullen	Briana	TCHS Advisory Committee Liaison	R	BM
Roberts	Linda	Indian Health Board of Minneapolis	R	LR
Robinson	Ronel	Way to Grow	R	RR
Shabaiash	Lesley	TCHS Advisory Committee Liaison	E	
Stand	Laura	TCHS Advisory Committee Liaison	R	LSD (child)
Watts	Angela	TCHS Central Staff	R	



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Members Present: Grace Anderson, Stacye Ballard, Cleora Brown, Kathleen Fernbach, Lauren Giammar, Patty Graham, Janeth Guerra de Patino, Phyllis Haag, Clarence Jones, Janice LaFloe, Jeanetta Lindo, Carla Lucas, Brian Thomas May, Dr. Tamiko Morgan, Briana Mullen, Linda Roberts, Ronel Robinson, Laura Stand, Angela Watts

Item	Discussion	Outcome
Welcome/Introductions	<ul style="list-style-type: none"> • Members introduced themselves • Apology for last-minute location change based on schedule conflict at UROC. Thanks to everyone for being flexible. 	
Approval of Minutes/Agenda		<ul style="list-style-type: none"> • Linda Roberts moved to accept the 11/18/10 minutes and agenda for 1/20/11 meeting. • Laura Stand seconded motion • Motion carried.
American Indian Consultant RFP	<ul style="list-style-type: none"> • Request for 2-3 volunteers to read proposals. • Scope of Work is complete and was reviewed by City staff and Cheryl Fogarty. • Consultant would add value to work at AIFC and Indian Health Board. Both organizations are welcome to either submit RFP or help review proposals. 	<ul style="list-style-type: none"> • Phyllis Haag, Linda Roberts, Janeth Guerra do Patino and Ronel Robinson volunteered to read proposals.
HRSA Report/2011-2012 Budget	<ul style="list-style-type: none"> • HRSA requested the progress report early this year. Normally it is to be completed in March. TCHS was notified in early December that it was due in mid-January. • Thanks to TCHS staff – especially Grace Anderson – for assistance in getting everything complete over holidays. • HRSA requires some type of screening and case management system from all of its program sites. There was a lot of missing data in our system, which hurt our score. If data isn't in the system, then encounters and referrals didn't happen in HRSA's eyes. 	



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	<ul style="list-style-type: none"> • Going forward, all data must be completed by the sits – no excuses. • A Local Systems Action Plan needed to be completed for the continuation plan. The plan is to begin looking for outside funding beyond the federal HRSA grant. • Due to budget constraints, City of Minneapolis and MDHFS requested that indirect and administration costs be taken out of grant budget. This equates to about \$60,000. 	
<p>Central Staff Restructuring</p>	<ul style="list-style-type: none"> • In the past we had two Site Coordinators who split up the program sites. Messages were often not clear due to having separate coordinators. • New structure: 1 Program and Public Engagement Coordinator (Grace Anderson) who will work with all 6 sites and 1 Project and Contract Coordinator (Stacye Ballard) who will work on the billing and contracts with the sites. • Stacye introduced herself and explained role. She will ensure the invoices from the sites reflect work and data completed in the Screening and Case Management System (SCMS). • Grace will focus on making sure the scope of service and program requirements are being carried out. Will oversee data completion in the SCMS ensuring we have a full picture of progress in participants all the way through their babies' 2nd birthday. • We need to transition to a results-based program. The Central Staff needs to partner with each site and give them customized support as each site has unique needs. 	<ul style="list-style-type: none"> • Advisory Committee Liaisons suggest we ask the consumers about their experiences in order to further better the program.
<p>Site Monitoring/Chart Audits</p>	<ul style="list-style-type: none"> • Beginning in March, Central Staff will be conducting chart audits from the SCMS. Each site will choose three charts 	<ul style="list-style-type: none"> •



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	<p>they believe to be complete for review. Central Staff will also randomly pick three charts from each site to review. Case Managers will receive a refresher training in February at the Case Manager Retreat.</p> <ul style="list-style-type: none"> • Program Site progress reports will be due in March. 	
Day 366 Campaign	<ul style="list-style-type: none"> • NHSA has created the Day 366: Celebrating • TCHS will be using the Day 366 idea throughout its publications, new Facebook page and Web site. The focus is celebrating the first year of a child's life. Statistics show if a baby makes it to its first birthday, their chances of surviving exponentially increase. • A survey will be sent out to Executive Committee Members for their input on a graphic for the campaign. 	
Announcements and Updates	<ul style="list-style-type: none"> • MHP will soon be offering free 1-year YMCA memberships for at-risk women during pregnancy. Some private plans already do this or discount the membership. MHP will be the first public provider to offer this benefit. MHP also has a new Facebook Fan Page. • St. Paul/Ramsey Public Health will be conducting a training for clinical professionals on February 24. It is called "Black Women's Weight. Why it Matters: Preconception Health." It will be at Wilder and it will be free. 	•
Next Meeting Details	<p>Thursday, March 17, 2011 UROC 12:00-2:00 p.m.</p>	•

Minutes submitted by: Brian Thomas May

**Family Support Specialist II
Healthy Start Project and Public Engagement Coordinator
Position Description**

Position Purpose

The Healthy Start Project and Public Engagement Coordinator is a grant-funded position that provides programmatic support for the federally funded Twin Cities Healthy Start (TCHS) project. Healthy Start aims to reduce infant mortality and improve birth outcomes among African Americans and American Indians in Minneapolis and Saint Paul. On behalf of the Department and a consortium of organizations, stakeholders, community members and partners, this position is responsible for ensuring that TCHS sites meet program requirements as outlined in the scope of services including the provision of health care coordination, case management/ and follow up support for pregnant women and new mothers. Position responsibilities include community engagement strategies that facilitate early entry into prenatal care, and provision of oversight and technical assistance at contract sites. In addition, this position is responsible for assisting the Project Director in monitoring day-to-day project activities, producing reports, and developing and managing contracts related to the project.

This position is dependent upon continued grant funding. The current funding cycle runs through May 31, 2009. The department will apply for another grant for the period from June 2009 through May 2014.

Reporting Relationships

This position reports to the Healthy Start Project Director

Major Areas of Responsibility/Accountability

The position works with program sites, community stakeholders, organizations and groups to develop and implement strategies and tactics that lead to a coordinated system of care and support for pregnant women and new mothers resulting in improved birth outcomes for African American and American Indian women in the Twin Cities.

Program site monitoring, quality assurance and technical assistance

- Provides training and monitoring to TCHS contract staff on program guidelines, protocol requirements, and documentation and data collection requirements.
- Monitors program services at participating clinics and social service agencies in the areas of screening, case management, health education and care coordination.
- Ensures that contract agencies have developed and implemented TCHS care protocols
- Schedules and holds regular chart reviews to ensure that TCHS clients are receiving quality care.
- Participates in the multidisciplinary care coordination meetings at contract sites.
- Ensures that program files are up to date with required documents and reports.
- Works with the project evaluator to transmit quality assurance information to direct service providers and improve performance as needed.
- Contributes to the Interconception Care Learning Collaborative under the direction of the Project Director.
- Works with the Project and Contractor Coordinator to ensure that reports and other program deliverables are received as outlined in the contract scope of services.

Community engagement and community education

- Meets with community based agencies to inform them of TCHS, and explore potential partnerships or linkages.
- Meets with identified community members and key community stakeholders to identify innovative strategies to reach high-risk pregnant women in need of prenatal care and support.

- Develops a community engagement plan with consortium members, program sites, key agencies, organizations and community groups to engage and educate the community on education topics including safe sleep practices, preconception care, interconception care, prenatal care and infant health by engaging subject matter expert, community organizations and resources.
- Assists the Project Director in working with residents, community based agencies, health plans/clinics, local businesses, and faith based organizations to promote quality and effective health care for pregnant and parenting women and their families.

Other department duties

- Works with TCHS contract staff and TCHS director as needed
- Collaborates and promotes other public health programs and initiatives as required.
- Participates in Public Health Emergency Preparedness planning, training and response as needed and assigned by the department.

Knowledge and Skills

- Demonstrated cultural competency in working with the project's target population.
- Knowledge and familiarity with diverse cultures, beliefs and lifestyles
- Demonstrated ability to work with low-income people and special needs populations
- Experience in planning, developing, and coordinating programs for women and children
- Ability to work in a collaborative environment; with multiple agencies, providers, and levels of government.
- Experience in working in clinic or social service environments
- Ability to present information and ideas accurately, effectively, and concisely
- Excellent written and verbal communication skills, and experience in public speaking
- Skilled in Microsoft Word and Excel

Relations and Contacts

On an ongoing basis, position works with Healthy Start consortium members, City, County and State employees, clinic and social service agency staff and administrators.

Impact of Decisions and Actions

Responsible for ensuring the needs of project sites and community partners are effectively met on a timely basis. Sound judgment is needed to work on sensitive community issues. Position is responsible for establishing and maintaining positive working relationship with and between contractors, and with the community. Ineffective contract management can result in non-compliance with project requirements and City contracting requirements.

Supervision:

None

Qualifications

Bachelor's degree in social work, nursing, community health, or public health, and **two** years experience in community or public health setting; or Master's degree in social work, nursing, community health, or public health with one year of experience. An equivalent combination of related education and experience may be considered

Valid driver's license and access to reliable automobile is required. Must be able to attend required federal grantee meetings out of state (typically twice annually) and to work some weekend and evening events.

3/08

Updated 3/09

11/5/2010

12/7/2010

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Position Purpose

The Healthy Start Project and Contract Coordinator is a grant-funded position that provides support for the federally funded Twin Cities Healthy Start (TCHS) project. Healthy Start aims to reduce infant mortality and improve birth outcomes among African Americans and American Indians in Minneapolis and Saint Paul. On behalf of the Department and a consortium of organizations, stakeholders, community members and partners, this position is responsible for ensuring that TCHS sites meet contract requirements as outlined in the scope of services including the provision of health care coordination, case management/ and follow up support for pregnant women and new mothers. Position responsibilities include project oversight of all TCHS contracts and technical assistance at contract sites. In addition, this position is responsible for assisting the Project Director in monitoring day-to-day project activities, producing reports, and developing and managing contracts related to the project.

This position is dependent upon continued grant funding. The current funding cycle runs through May 31, 2009. The department will apply for another grant for the period from June 2009 through May 2014.

Reporting Relationships

This position reports to the Healthy Start Project Director

Major Areas of Responsibility/Accountability

The position works with program sites, TCHS staff to respond to request for proposals, negotiate contracts and other project delivers as outlined in the contract scope of services.

Project management and general contract assistance

- Works with Project Director to get bi-annual reports and other contract information from TCHS program sites on an annual basis.
- Negotiates site contracts as required, develops and manages contract scope.
- Provides orientation to new site consortium members about TCHS, service contract guidelines, scope of services and documentation.
- Monitors related deliverables, timelines, budgets and expenditures related to the project.
- Reviews and processes program invoices and expenditures on a monthly and/or quarterly basis.
- Provides updates and corrective action on potential contract issues or opportunities for performance improvement.
- Contributes to the Interconception Care Learning Collaborative under the direction of the Project Director.
- Works with the Program and Public Engagement Coordinator and the Project Evaluator to ensure that reports and other program deliverables are received as outlined in the contract scope of services.

Partnership Agreements and Community Linkages

- Assists the Project Director in working with residents, community based agencies, health plans/clinics, local businesses, and faith based organizations to promote quality and effective health care for pregnant and parenting women and their families.
- Meets with community members and stakeholders to identify innovative strategies to provide resources and support for TCHS program participants.
- Develops formal memorandum of understanding or agreements with potential TCHS partners and program sites.

Public Engagement and Community Education

- Coordinates with TCHS internal and external staff, stakeholders and organizations to identify 3-4 year round community engagement, forums and/or awareness opportunities within our targeted communities.
- Works with the TCHS program aid to develop social media strategies and other non-traditional communication strategies designed to engage the TCHS community.

Other Duties as Assigned

- Performs other TCHS duties as required.
- Participates in Public Health Emergency Preparedness planning, training and response as needed and assigned by the department.

Knowledge and Skills

- Demonstrated cultural competency in working with the project's target population.
- Knowledge and familiarity with diverse cultures, beliefs and lifestyles
- Demonstrated ability to work with low-income people and special needs populations
- Experience in planning, developing, and coordinating programs for women and children
- Ability to manage contracts and track expenditures
- Ability to work in a collaborative environment; with multiple agencies, providers, and levels of government.
- Experience in working in clinic or social service environments
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