



**Public Health Advisory Board –
Nurse-Family Partnership® Subcommittee
Agenda - Regular Meeting**

Date: November 5th, 2021
Time: 10:30 am – 12:00 pm
Location: Virtual via GoToMeeting
<https://global.gotomeeting.com/join/603352269>
You can also dial in using your phone.
United States: +1 (872) 240-3412
Access Code: 603-352-269

1. **Call to Order:** Amy Pendergast
2. **Welcome/Introductions** (5 minutes)
3. **Public Comment Period** (5 minutes)

To address the Board during Public Comment Time: The speaker should approach the table and, after receiving recognition from the Chair, give their name and affiliation prior to comments or questions. Sixteen (16) copies of any written material used in the presentation must be provided to the clerk. There is a three-minute limit to an individual's comments, and the speaker may defer comments to a specific agenda item. Pursuant to the Brown Act, action or Board discussion cannot be taken on open time matters other than to receive comments.

4. **Action: Approve minutes from February 2019, April 2019, September 2019, October 2019, February 2020** (5 minutes)
5. **Review purpose of PHAB NFP Subcommittee:** Denise Hobbs (20 minutes)
6. **NFP Updates:** Denise Hobbs (20 minutes)
7. **CalWORKs Home Visiting Initiative/Program:** Christopher Buhler (10 minutes)
8. **Vote on new members:** Amy Pendergast (10 minutes)
9. **Updates from members:** (20 minutes)
10. **Confirm Next Meeting Date:** February 4th, 2022 at 10:30am – 12:00pm
11. **Adjourn**

Public Health Advisory Board
Nurse-Family Partnership® Subcommittee

Minutes – Regular Meeting

DRAFT

Date: Friday, February 1, 2019
Time: 10:30 am – 12:00 pm
Location: Shasta County Health and Human Services Agency (HHSA) – Public Health Branch
2660 Breslauer Way, Redding, CA 96001
Community Conference Room

Item 1: Call to Order

Nicole Bonkrude called the meeting to order.

Members in attendance (four): Liz Poole (First 5 Shasta), Chelsey Chappelle (Shasta County Probation), Linda Heick Kilzer, RN (PHAB Community Member), Sue Morehouse (Interfaith Forum)

Members not in attendance (two): Toni Donovan (Planned Parenthood), Traci Neal (Shasta County Probation)

Facilitator: Nicole Bonkrude (Shasta County HHSA)

Note Taker: Brec Barnes (Shasta County HHSA)

HHSA Staff Present: Denise Hobbs, Jonathan Chacko, Danielle Lazarus, Dr. Karen Ramstrom, Christopher Buhler

Guests: None

Item 2: Welcome/Introductions

Everyone present introduced themselves.

Item 3: Public Comment Period

No Public Comment was given.

Item 4: Action: Approve minutes from October 2018

Proposed to make correction to item #4 – Christopher Buhler can be in attendance as representative but not as member because he is a current Agency employee. Action was proposed to approve minutes as is, but correct error in new minutes. A quorum was present and the October 2018 minutes were approved.

Item 5: Action: Update on Nurse Family Partnership®/California Home Visiting Program New Branding Video (Denise Hobbs)

Denise shared that NFP received feedback about branding materials and that they have a new video they are starting to share with the community. They are hoping to reach more of the community this way. The video is also on the HHSA Facebook page. She also shared that Mercy Maternity Center is now called Shasta Community Maternity Center, but the location and phone number is the same. Denise showed the new NFP video to the subcommittee members and stated she would bring new

branding materials to the meeting in April. Denise added that NFP has applied for and received funding from Cal Works Home Visiting Initiative from the State in the amount of \$169, 350 for the first 6 months, which allows NFP to keep nurses with clients and serve between 119-122 families.

Item 6: Presentation and Discussion on Shasta County Maternal, Child and Adolescent Health Needs Assessment (Nicole Bonkrude)

Nicole shared that she would like to use quality improvement (QI) tools to get discussion and input for the MCAH Needs Assessment. MCAH is looking at the population, not a specific problem, which gives them flexibility to choose where they should be investing and partnering based on our local needs. The populations MCAH focuses on are pregnant women, women of reproductive age, mothers, infants, children and youth with special health care needs and adolescents. Nicole stated that we are focusing on the needs of children and youth with special healthcare needs at the local and state level. The state is calling this “The Year of Learning”. Nicole added that through June we will look at data and prioritize our problems, then in July we will be working on action plans. Nicole led a discussion about MCAH Needs Assessment data and plans to continue discussion at the next meeting.

Item 7: Adjourn

The meeting was adjourned. The next meeting is April 5, 2019

Public Health Advisory Board
Nurse-Family Partnership® Subcommittee

Minutes – Regular Meeting

DRAFT

Date: Friday, April 5th, 2019
Time: 10:30 am – 12:00 pm
Location: Shasta County Health and Human Services Agency (HHSA) – Public Health Branch
2660 Breslauer Way, Redding, CA 96001
Community Conference Room

Item 1: Call to Order

Nicole Bonkrude called the meeting to order.

Members in attendance (one): Sue Morehouse (Interfaith Forum)

Members not in attendance (five): Toni Donovan (Planned Parenthood), Traci Neal (Shasta County Probation), Liz Poole (First 5 Shasta), Linda Heick Kilzer, RN (PHAB Community Member), Chelsey Chappelle (Shasta County Probation),

Facilitator: Nicole Bonkrude (Shasta County HHSA)

Note Taker: Brec Barnes (Shasta County HHSA)

HHSA Staff Present: Denise Hobbs, Kathey Kakiuchi

Guests: Kristen Shearer (Shasta County HHSA)

Item 2: Welcome/Introductions

Everyone present introduced themselves.

Item 3: Public Comment Period

No Public Comment was given.

Item 4: Action: Approve minutes from February 2019

A quorum was not present and the February 2019 minutes were not approved.

Item 5: Sharing Nurse Family Partnership®/California Home Visiting Program New Branding Materials (Denise Hobbs)

Denise presented new branding material, new folders with NFP brochures and contact info. They also have new bags with a 1-800 number to be connected to the closest NFP location. She added that they changed their language on materials based off feedback from clients.

Item 6: Introduction of CalWORKs Home Visiting Initiative (Denise Hobbs)

California Department of social services awarded funding to Shasta County. The funding is an allocation, it is not a grant. This will include NFP clients in Shasta County.. Until June 30th, the funding will provide \$169,350.

Item 7: Presentation and Discussion on Shasta County Maternal, Child and Adolescent Health Needs Assessment (Nicole Bonkrude)

Kristen and Nicole provided a summary of what we discussed at the last meeting, which included that MCAH is focusing on the needs of children and youth with special healthcare needs. MCAH will be looking at data and prioritizing the main problems, followed by creating an action plan to address the problems. She included MCAH strengths based off OPE Data. She led a discussion and presented the question to the group “what do we do well and what should we enhance or sustain?”. The group discussed MCAH strengths and weaknesses, opportunities and threats. MCAH priority areas of concern were also discussed. This year is considered “The Year of Learning”, which will be followed by exploring the best practice strategies, then identifying objectives, interventions and outcome measures.

Item 8: Adjourn

The meeting was adjourned. The next meeting will be August 2nd, 2019.

Public Health Advisory Board
Nurse-Family Partnership® Subcommittee

Minutes – Regular Meeting

DRAFT

Date: Friday, September 13th, 2019
Time: 10:30 am – 12:00 pm
Location: Shasta County Health and Human Services Agency (HHSA) – Public Health Branch
2660 Breslauer Way, Redding, CA 96001
Elizabeth Murane Conference Room

Item 1: Call to Order

Elizabeth Ketterer called the meeting to order.

Members in attendance (2): Liz Poole (First 5 Shasta), Chelsey Chappelle (Shasta County Probation).

Members not in attendance (2): Linda Heick Kilzer (PHAB Representative), Sue Morehouse (Member).

Facilitator: Elizabeth Ketterer (Shasta County HHSA)

Note Taker: Julianna Gilson (Shasta County HHSA)

HHSA Staff Present: Denise Hobbs, Kathey Kakiuchi, Elizabeth Ketterer, Nayan Patel, Christopher Buhler, Kristen Shearer, Cory Brown, Jeff VanAusdall.

Item 2: Welcome/Introductions

Everyone present introduced themselves.

Item 3: Public Comment Period

No Public Comment was given.

Item 4: Action: Approve minutes from February 2019 and April 2019

There was no quorum to approve minutes.

Item 5: Nurse Family Partnership®/ California Home Visiting Program Updates (Denise Hobbs)

An NFP nurse position has recently opened. More funding has allowed for expansion of the program as staffing can be enhanced. A full time Community Mental Health Worker (CMHW) and an additional nurse will be hired. The program is expanding services to 144 clients. CalWORKs is now able to support 44 clients,.

Goal Mama is a new app that was recently created for mothers to manage their goals and schedules. It is linked to a variety of resources available to mothers, including their public health nurse. Activity from the app directly notifies NFP nurses who can then interact positively with the mothers, encouraging positive habits.

Item 6: New CalWORKs Home Visiting Initiative/Program (Chris Buhler):

Expansion of home visiting: the program received quadruple funding at \$660k. The funding is expanding the NFP program. In addition, it will also screen for all mothers that fit the home visiting. CalWORKs is collaborating with other evidence based programs to serve a wider range of women needing services. Policies and procedures are currently being ironed out.

More staffing positions will be filled, including a data analyst and Referral Coordinator.

Item 7: Data and Prevention Presentations on Opioid Use in Shasta County (Cory Brown and Jeff VanAusdall)

Jeff VanAusdall (jvanausdall@co.shasta.ca.us) presented on substance abuse regarding women of reproduction age as it pertains to neonatal abstinence syndrome.

Cory Brown (cbrown@co.shasta.ca.us) presented on prescription abuse and the NoRx coalition objectives and accomplishments.

Discussion post-presentation: suggestions were made regarding potential new members of the committee. Anyone with suggestions should contact Denise Hobbs (dhobbs@co.shasta.ca.us) or Elizabeth Ketterer (eketterer@co.shasta.ca.us).

Item 7: Adjourn

Public Health Advisory Board
Nurse-Family Partnership® Subcommittee

Minutes – Regular Meeting

DRAFT

Date: Friday, October 4th, 2019
Time: 10:30 am – 12:00 pm
Location: Shasta County Health and Human Services Agency (HHSA) – Public Health Branch
2660 Breslauer Way, Redding, CA 96001
Community Conference Room

Item 1: Call to Order

Elizabeth Ketterer called the meeting to order.

Members in attendance (2): Linda Heick Kilzer (PHAB Representative), Sue Morehouse (Member).

Members not in attendance (2): Liz Poole (First 5 Shasta), Chelsey Chappelle (Shasta County Probation).

Guests (3): Amanda Keefer, Toni Panetta, Regina Vittore

Facilitator: Elizabeth Ketterer (Shasta County HHSA)

Note Taker: Julianna Gilson (Shasta County HHSA)

HHSA Staff Present: Denise Hobbs, Kathy Kakiuchi, Elizabeth Ketterer, Nayan Patel, Christopher Buhler.

Item 2: Welcome/Introductions

Everyone present introduced themselves.

Item 3: Public Comment Period

No Public Comment was given.

Item 4: Action: Approve minutes from February 2019 and April 2019

There was no quorum to approve minutes.

Item 5: Guest Speakers from Nurse Family Partnership National Service Office: Regina Vittore (Nurse Consultant) and Toni Panetta (Government Affairs Manager, Southwest):

- NFP Updates: Some new Nurse Family Partnership (NFP) tools (innovations) have recently been implemented:
 - Goal Mama: an app that allows clients to connect directly with nurses. Goal Mama focuses on the setting and completion of client goals while increasing connection and engagement.
- Guest Speakers: Toni's office secures funding to support NFP programs to increase quality and capacity.

Item 6: New CalWORKs Home Visiting Initiative/Program (Chris Buhler):

Additional funding allows CalWORKs to serve an expanded population. In order to reach the expanded population, CalWORKs is bringing on new positions including a nurse, an analyst, and a referral coordinator. CalWORKs is also reaching out to other home visiting programs. Approvals are going before the board this month.

Item 7: Needs Assessment Follow Up Presentation and Discussion (Elizabeth Ketterer and Kathey Kakiuchi):

MCAH has gathered input from community partners and identified six, distinct issues.

#1: Mental Health

- 1) Increase public and medical provider understanding of the issue, symptoms, consequences of not treating, and how to get help.
- 2) De-stigmatize help-seeking by letting women and their families know that it's not the woman's fault and that treatment is necessary and effective.
- 3) Increase awareness of low/no cost services available.
- 4) Identify partners who are active in this type of work.

#2: Prenatal Care

- 1) Increase public knowledge of coverage and service options
 - HopeVan refers women to prenatal care. But women are lost to follow up. The disconnect should be identified.
 - Mothers are afraid of CPS taking their children away if drug tests are positive. This fear deters women from seeking care.
 - Children are not always taken away from mothers, sometimes a safety plan for the child is implemented. Misinformation and fear circulates about this procedure.
 - Care needs to be made safe: de-stigmatize.
 - Perinatal care services are limited
 - Cultural value for medical care needs to be reinstated
 - Eligible for CalWORKs services in second trimester.
 - Many women don't know about presumptive eligibility
- 2) Increase public knowledge of the importance of maternal health to infant outcomes
- 3) Public promotion of reproductive life planning and appropriate contraception use
- 4) Engage women not receiving early prenatal care, to understand barriers/challenges, and design effective solutions
- 5) Identify partners who are active in this type of work

Item 7: Adjourn

Public Health Advisory Board
Nurse-Family Partnership® Subcommittee

Minutes – Regular Meeting

DRAFT

Date: Friday, February 7, 2020
Time: 10:30 am – 12:00 pm
Location: Shasta County Health and Human Services Agency (HHSA) – Public Health Branch
2660 Breslauer Way, Redding, CA 96001
Community Conference Room

Item 1: Call to Order

Elizabeth Ketterer called the meeting to order.

Members in attendance (3): Sue Morehouse, Chelsey Chappelle, Katie Taylor.

Members not in attendance (2): Liz Poole (First 5 Shasta), Linda Heick Kilzer.

Guests (3): Amanda Keefer, Toni Panetta, Regina Vittore, Celia Snell, Cindy Vogt, Karen Gryszan, Michael Burke.

Facilitator: Elizabeth Ketterer (Shasta County HHSA)

Note Taker: Julianna Gilson (Shasta County HHSA)

HHSA Staff Present: Denise Hobbs, Kathey Kakiuchi, Elizabeth Ketterer, Nayan Patel, Christopher Buhler, Julianna Gilson.

Item 2: Welcome/Introductions

Everyone present introduced themselves.

Item 3: Public Comment Period

No Public Comment was given.

Item 4: Action: Approve minutes from February 2019 and April 2019

There was not a quorum to approve minutes.

Item 5: Guest Speakers from Nurse Family Partnership National Service Office: Regina Vittore (Nurse Consultant) and Toni Panetta (Government Affairs Manager, Southwest):

- NFP Updates:
 - CalWORKs provided funding through their budget to NFP. Expanded by 1.75 nurses.
- Guest Speaker (Regina Vittore):
 - Group Discussion/Activity
 - What part of NFP excites you the most?
 - What are you passionate about?
 - What do you want to gain from participation?
 - Presentation: overview of Nurse Family Partnership model, mission, evidence of success, and funding streams.
- Guest Speaker (Toni Panetta)
 - CAB members are advocating for keeping NFP as a priority for funding streams state wide.
 - National goal: serve 100,00 families. Right now: 30,000 families.

Item 6: New CalWORKs Home Visiting Initiative/Program (Chris Buhler/Denise Hobbs):

- Board approved new positions, which have not been filled.
- Case load is at four with one case pending.
- Goal is to serve 45 families.
- Meeting with San Francisco on home visiting methods and success of program.
- A referral coordinator position is open, which will connect clients to other programs for care.
 - ✓ NFP refers patients to other community-based home visiting programs when mothers do not qualify for NFP. Relationships between community programs helps to effectively connect patients to resources.

Item 7: Questions from Guests about NFP and being a Member of the CAB (Denise Hobbs).

- Denise shared success stories from CHYBA.
- Idea for CAB activity: organize the NFP graduation

Item 8: Confirm Next Meeting Date: April 3, 2020.

- Action for Next Meeting: Discuss compilation of today's post-it note activity

Item 8: Adjourn

Shasta County

Purpose of Public Health Advisory Board (PHAB)- Nurse-Family Partnership (NFP) Sub-Committee Meeting

The overall purpose of the PHAB NFP Sub-Committee meeting is to support Shasta County Health and Human Services in an advisory capacity to ensure that the needs of low-income first time mothers are met as the program is implemented and expanded. This can be accomplished through a variety of tasks and functions including

- Build and maintain the **community partnerships** that support implementation and provide resources
- **Conduit for community input** and information sharing
- Generating unidentified **referral sources**
- Serve as **creative sounding board** moral support for decision making
- Serving as **community ambassadors**
- **Leverage human, material and financial resources** to contribute to program sustainability
- Generating and **driving in-kind resources** from the community
- **Review CQI measures** and help create strategies to strengthen program's ability to serve first time mothers
- **Review system of triage for referrals**
- **Advocacy**

Outcomes of a strong Community Advisory Board include

- **Improvements in coordination** of home visiting programs in Shasta County
- **Heightened community awareness** of program benefits and outcome
- **Sustainability** of program
- **Transfer of Commitment** – “A 2008 study by Larson, Hicks et.al., ‘The Influence of Collaboration on Program Outcomes: The Colorado Nurse-Family Partnership’ concluded that there was a ... consistent relationship between process quality and outcomes related to **client retention**. The researchers called this link a “transfer of commitment.” This means when the community supports the program, this commitment can become operationalized.

**Shasta County Health & Human Services Agency
Public Health Advisory Board
Nurse-Family Partnership® Subcommittee
Charter**

Article I – Name

The name of this committee shall be the Shasta County Public Health Advisory Board Nurse-Family Partnership® Subcommittee (“Subcommittee”).

Article II – Purpose and Responsibility

This charter governs the functions and duties, as well as the conduct of all meetings of the Subcommittee.

The purpose of the Subcommittee is to support Shasta County Health and Human Services in an advisory capacity to ensure that the needs of low-income first time mothers are met as the Nurse-Family Partnership® program is implemented and expanded.

The responsibilities of the Nurse-Family Partnership® Subcommittee shall include:

1. Building and maintaining community partnerships that support implementation and provide resources
2. Acting as a conduit for community input and information-sharing
3. Generating unidentified referral sources
4. Serving as a creative sounding board and providing moral support for decision making
5. Serving as community ambassadors
6. Leveraging human, material and financial resources to contribute to program sustainability
7. Generating and driving in-kind resources from the community
8. Reviewing Continuous Quality Improvement measures and helping to create strategies to strengthen the program’s ability to serve first time mothers
9. Reviewing the system of triage for referrals
10. Advocacy

Article III – Members

Section 1 – Number. The Subcommittee shall consist of at least 5 and no more than 10 representatives from the following categories:

- Health, mental health
- Education, schools, child care
- Criminal justice, judicial system, law enforcement
- Youth
- Business
- Social services
- Faith-based leaders

- Other prominent community organization leaders
- Major employers
- Minority advocacy groups
- Referral sources
- Home visiting programs
- Community organizers or community development experts
- Press
- Local legislators or other elected officials
- Program graduates
- Public Health Advisory Board members

Attempts shall be made to appoint Subcommittee members from several of the above categories. No current Agency employee may serve on the Subcommittee. A vacancy shall not prevent the Subcommittee from conducting business.

Section 2 – Appointment.

- a. Members shall be appointed by the Directors of the Public Health and Regional Services branches of the Health and Human Services Agency.
- b. Vacancies shall be filled by recommendation from the Directors of Public Health and Regional Services and from existing Subcommittee members.
- c. Potential members shall complete an application, which shall be reviewed by the Directors of Public Health and Regional Services to determine the most appropriate candidate(s). They shall then forward the name(s) to the entire Subcommittee, who shall vote on whether to approve the name(s) as members.

Section 3 – Term. Members of the Subcommittee shall serve for a term of two years that shall begin on April 1 and end on March 31. New members replacing a member who has not completed his or her term will serve for the remainder of that term, and then may be reappointed to a new two year term by the Subcommittee.

Section 4 – Orientation. Each member of the Subcommittee shall participate in a Nurse-Family Partnership orientation to give them understanding of the program.

Section 5 – Attendance. The facilitator shall contact any member who has had two consecutive absences from Subcommittee meetings. If no response is received in thirty days or if the member states that he/she does not wish to remain a member, the Public Health or Regional Services Director or Subcommittee members shall recommend a replacement to the Subcommittee. If the member states that he/she wishes to remain on the Subcommittee, he/she shall be considered a member in good standing, provided the member does not miss the third consecutive Subcommittee meeting.

Section 6 – Removal. Members of the Subcommittee may be removed by a two-thirds (2/3) vote of the Subcommittee.

Section 7 – Compensation. All members of the Subcommittee shall serve without compensation.

Section 8 – Voting. Each member shall be entitled to one vote on each matter submitted to a vote of the Subcommittee. Fifty percent plus one (50% + 1) of the active members shall constitute a quorum. Actionable items are decided by majority vote. A majority is defined as 50% + 1 of the members present and voting.

Article IV – Meetings

Section 1 – Brown Act. All meetings of the Subcommittee shall be scheduled, called, noticed, and conducted in accordance with the provisions of the Ralph M. Brown Act (Brown Act) (commencing with Section 54950 of the Government Code). Except as may otherwise be provided in the Brown Act or this charter, meetings of the Subcommittee shall be governed by the latest edition of Robert’s Rules of order.

Section 2 – Regular Meetings. The Subcommittee shall develop a schedule of regular meetings that shall be held at least quarterly.

Section 3 – Agenda. An agenda stating the date and hour of each meeting shall be delivered, mailed, or emailed to each Advisory Board member not less than five days before each meeting.

Article V – Facilitator

The Maternal, Child & Adolescent Health Coordinator (MCAH Coordinator) shall preside at all meetings of the Subcommittee. In the absence of the MCAH Coordinator, the Nurse-Family Partnership® Supervising Public Health Nurse (Supervising PHN) shall preside. In the absence of both the MCAH Coordinator and the Supervising PHN, the Healthy & Safe Families Program Manager shall preside.

Article VI – Records

Clerical duties shall be performed by Health & Human Services Agency staff as designated by the Directors of the Regional Services and Public Health branches. All records of the Subcommittee shall be kept at the Health & Human Services Agency. Disclosure of records maintained by the Subcommittee is governed by the California Public Records Act (commencing with Section 6250 of the Government Code). All records shall be maintained in a manner consistent with Shasta County Administrative Manual Policy 1-500.

Article VII – Amendments

The Subcommittee may approve amendments to this charter by a two-thirds vote of members present at any regular or special meeting of the Subcommittee where this topic is agendized.

Article VIII – Spokesperson for Committee

Unless designated otherwise by a majority vote of the Subcommittee, no one member will be an official spokesperson representing the Subcommittee to the Board of Supervisors, media, other interested parties, or the general public.

Article IX – Conflict of Interest

The Subcommittee and its members shall abide by the conflict of interest laws of the State of California.

(Letterhead)

Date

*Denise Hobbs, Supervising Public Health Nurse
Shasta County Nurse-Family Partnership®
1670 Market St, Suite 300
Redding, CA 96001*

Dear Shasta County Nurse-Family Partnership®,

[Name of outside agency] is pleased to support Nurse-Family Partnership® which is designed to help expectant and new parents get their children off to a healthy start. **[Name of outside agency]** agrees to participate in a climate of collegial support with Shasta County Nurse-Family Partnership® to help meet the health, social, and emotional needs of eligible families in the target service areas. In addition, **[Name of outside agency]** acknowledges the intent of Shasta County Nurse-Family Partnership® to help create a seamless network for the purpose of identifying and referring families to the program and service which best meet the needs of the families.

[Name of outside agency] staff are knowledgeable about the services offered by Shasta County Nurse-Family Partnership® and are supportive of the program's purpose and goals. **[Name of outside agency]** will continue to inform the Shasta County Nurse-Family Partnership® staff of significant changes to any of its programs that may affect how families are referred for services. **[Name of outside agency]** staff are available to discuss potential services and assist in the client referral process.

Thank you for this opportunity to express our support for the Shasta County Nurse-Family Partnership®. We look forward to assisting Shasta County Nurse-Family Partnership® in achieving its programmatic goals knowing this will further the health and well-being of Shasta County's most precious resource, our children.

Sincerely,

[Name of staff member]
[Name of outside agency]