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EVENT: ARDI
LOCATION: REMOTE
05/20/2022
Part 1
R. Farrell

Before I will ask everyone including those English speakers, please select a language on the platform if you select English the interpreters are able to communicate on the call and if we have Spanish public comment, they are able to translate in realtime. I will pass back to you.

>> Thank you so much Mark. Next, I would like to open up the meeting with a land acknowledgement and we do them because they are proper ways of showing respect and connecting stories and practice that erased indigenous people's history and culture and also invite us to honor the truth and offer recognition and respect. I recognize and acknowledge the first people of this -- (land acknowledgment) --

>> I would like to welcome everyone and I hope you are doing well this week and I want to thank you for meeting with the team and as well as myself to discuss recommendations for members of the sub t areas tables and I want to thank you for the feedback on b ways to assure these tables are most effective and you will be hearing from the cochairs today who are going to go over the table of responsibilities and as well as action items for the, working tab l and we will open up and provide an opportunity for us to discuss those action items as well as any feedback or suggestions that you may

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have for the additional bodies of work that may need to be taken on. We will now conduct the roll call. At this time, I will turn over the two Mark.

>> Thank you we will do the roll call and to expedite the process we ask all task force members to un-mute the audio before your name is called. If you are unable the two un-mute yourself raise your hand in the zoom platform. If you are calling in on your phone you can un-mute yourself by pressing star six. Raise your hand with star nine and we will begin the roll call with last name alphabetically.

(Roll call).

>> All right this meeting has reach a quorum and we will open public comment period for specific agenda items to be covered for those online who would like to provide public comment on a specific agenda item use the zoom raise hand feature now and we will call on you in the order that you raise your hand when you are called upon state your full name and which agenda item you will comment on and I will lower your hand once you complete public comment for those on the telephone press star nine to raise your hand and we will call on you when it is your turn and dial star six to un-mute yourself and I will hold for a couple of seconds to see if there is anybody who would like to make public comment? And this concludes the public comment period for specific agenda items as reminder in advance of next meeting if you want to submit public comment send an e-mail 24 hours before the meeting and we are working on community engagement process to ensure folks with lived experience and community service organizations are aware and able to access the meetings and those will be coming soon. Ly pass it to Dr. Scorza.

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>> Thank you so much. At this time, we are going to take appropriate action on the meeting minutes from the prevention services task force from the regular meeting of April 22nd, 2022. Before we vote are there any corrections to the meeting minutes?

>> Okay. Hearing none can we get a motion to approve the meeting minutes?

>> Moved Laura --

>> Thank you. Moves. Is there a second?

>> Second tam ra hunter.

>> Thank you, Dr. Hunter, fantastic and we will now call for the vote. Mark?

>> We will conduct a vote for the motion and use a similar process as roll call and ask all task members to un-mute audio before your name is called to do it quickly, I will call on your name and indicate your vote of yes, no, or abstain.

(Roll call).

>> The motion passes.

>> Thank you so much Mark. So, um, we are going to move onto the next agenda item and that is to take appropriate action on proposed dates and times for the monthly task force meetings and wanted to get the administrative items out of the way and we will now move to discuss this item. Our staff has taken the time to review task force member calendars and based on the conversations in the March meeting we recommended the prioritization of Friday mornings at the same time.

At this time if you would not mind letting us know that there are four dates on the slide we are proposing for the rest of the year. Note we are aware that November 18th

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and December 16th dates may be in conflict with other activities that may be happening however due to the holidays we are trying to navigate through the particular dates and we want to make sure there are no major conflicts that exist. Or that anyone would like to flag for the remaining task force meetings dates? We will give you all a second, I believe we did take some time. I had a meeting to try and arrange these and we want to make sure you are all okay with these dates and times.

>> Those look fine for me.

>> Okay. Hearing no feedback if not can we get a motion to approve these dates.

No additional feedback. Can we get a motion to approve the dates for the remaining calendar year?

>> Moved Meredith.

>> Thank you so much. Do we have a second?

>> Second.

>> Okay great. We will now call for the vote. Mark?

>> Thank you.

(Voting).

>> The motion passes thank you.

>> Thank you so much Mark. Okay we will move onto next item in agenda on subject table formations and this is third meeting and we are excited to move towards the work and get to a discussion on the efforts that will take place within each of the subject area tables and at this time we are going to move to nominate and elect the remaining

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cochairs for disproportionality and prevention tables of the task force and so as you may recall we elected cochairs for all working tables and still had openings on disproportionality and framework tables and I want to thank the task force members we had great conversations with and your willingness to step into the leadership roles and based on the conversations I would like to nominate Dr. Irene (Indistinct) who serves as counties chief information officer an lit center of excellence to join Dr. Hunter as cochair for addressing the disproportionality table and while Irene is traveling and unable the to join today and did provide written confirmation to the team if she was nominated she would accept the position by an official vote. At this time before we move onto a vote are there any additional nominations for the disproportionality table? Okay. Great.

Hearing none can we get a motion to approve the nomination of and the election of Dr. Irene (Indistinct) as cochair for the disproportionality table?

>> Moved.

>> I second.

>> Thank you. We will now call for the vote.

>> Thank you and when I call on your name indicate your vote of yes, no, or abstain.

(Voting).

>> The motion passes.

>> Thank you so much Mark we are still looking for nominations for the framework table and at this time we will now turn to the task force to offer nominations for the

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framework table and discussions of potential candidates and I will open up for general discussion if there are any nominations or recommendations for a framework table cochair.

>> Hearing none our team will continue to work to identify candidates and please feel free to let us know if you have suggested individuals for the position and we are excited and have a few in mind so we will keep the task force posted on the possibilities and appreciate you all and your willingness to provide support in this area.

Next let's move onto item nine and we will have two, we will have a few final administrative items to address before we get into the focus of the meeting today first again as we develop membership list for the working tables and realize approved charter states will be comprised of 5 to 10 working members and including two cochairs and you will see from the rosters there is a lot of interests in serving on these subject area tables and our recommendations to this task force is that we allow the, the subject area tables to expand. So that we can incorporate a breadth of experience and E per tease in the tables and we want to ensure we allow for folk with lived experience to be able to participate. And we want to make sure we address the issue by amending the r charter to replace the 5 to 10 working members to an appropriate number allows to proceed with greater flexibility. You know. One of the things we are going to talk b about later on today is, again, delegating our authority. Delegating authority to the cochairing to approve table membership.

>> At this time charter that and all subject area and task force, subject area tables or working tables must bring membership request back to the task force and we

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recommend we delegate that authority to the task force table chairs who will also have then responsibility of setting membership size as well.

>> Let me pause for a second and those are two separate but interrelated issues and we want to make sure we provide space for the task force to have a discussion first on table area size and secondly on the delegation of authority to the subject area working tables. To the cochairs and address membership and select their members as needed and had I will open it up for dialog. Any initial thoughts or considerations for those two issues.

>> Hi just wanted to say I think it is important to have representation from all of the departments. At least one representative. But I understand not making it too big. So maybe we stay 15 below or 20 below. So, it doesn't and get too big and work is productive?

>> Understood. So, your recommendation would be we stay between a range of 15 to 20.

>> Correct.

>> Or 20 and below.

>> Yeah.

>> Maybe not take more than 20?

>> Yeah.

>> Okay. Other thoughts? Any of the table cochairs like to weigh in on potential membership size.

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>> This is min I have a clarifying question I think the size of 18 to 20 makes sense and I was curious are their members that are voting members and can the table also include other participants to just provide feedback?

>> Yes. Such as standing guests and I see Meredith you have your hand raised and I am going to turn the question over to the council. Can you respond to the question?

>> Yes of course. Good morning, everyone. For the ad hoc committee to not be subject to (Indistinct). It only has it be to composed of members of the bigger committee and less than a quarter of the bigger committee. If it has members from (Indistinct) who are members and then it becomes more of a standing committee and thus becomes subject to the brown act. But an ad hoc committee can have guests. Can have speakers. Can consult with people from the outside without subjecting to the Brown act.

>> I wanted to chime in here and to clarify. I think we have discussed that these all three of the tables will be Brown act covered because we are doing a mix of task force members and table members.

>> Right. I guess than it is not an issue anymore. Yeah.

>> Brown act and you can have members from the outside.

>> Back to Dr. Hunters question your question was whether or not we can have standing guests, correct? Whether or not we can have guests at the table.

>> That was Min's question but it is a good question.

>> You are in the middle of my screen and I was looking at your reaction sorry Min. I think the question is can we have standing guests or guests participate in the task force meetings in addition to the membership.

>> In the task force meetings?

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>> Subject table area meetings.

>> Sure, there is nothing preventing it.

>> Okay great. The membership size, the membership does not preclude from having guests they cannot vote is that correct?

>> They won't be members unless you want them to be members.

>> Does that resolve a concern of yours or respond to that.

>> Nope thank you.

>> Meredith, I see your hand up as well?

>> I agree on the voting member size and keeping to a manageable and engaged group makes sense and I will say I know for the framework table I have been thinking about how we can potentially do focus groups or listening sessions to center people with lived expertise and not as voting members but informing, just informing the framework table and I believe that is Brown act fine to have those, may be standing members where people participate at multiple listening sessions and it may be people at each one and confirming that is also acceptable.

>> Can you ask the question one more time I am not sure I understood it.

>> Sure. I am asking I know for the framework table we want to center people with lived expertise and ensure we can hear from a variety of stakeholders and I talked briefly with the ARDI staff about listening sessions that may include standing members and members participating in multiple listening and also may be different folks but wouldn't be members of the task force or voting members f of the task force just be informing the task force members' work.

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>> From what you are saying it sounds fine. Before we do any of that stuff, I would love to take a look and see if there is anything we can modify to make sure we don't violate. Based on what you are saying it sounds fine.

>> Thank you.

>> What I think I understand and want to make sure we capture and any potential changes what I hear you saying is yes keep the membership navigable. Do you agree not to exceed 20 members okay? In that regard you are saying we should have space to include members with lived experience and also in the listening sessions as well, correct?

>> Yes, that is correct.

>> Great. I think we can talk to council b about it I see no reason why we cannot host listening sessions for people with lived experience using whatever we need to be compliant with the brown act and I think that is an important K and the motion calls for us to send the voice of people with lived experience and we will ensure that is carried you out as well. Other thoughts or considerations?

With regard it is to delegating the r authority to the task force table cochairs to select and approve membership. Again, those bodies will be covered by the brown act. Are there any recommendations or suggestions with regards to that practice? From the group or from the body? Just a little context I think what we are try to go avoid doing is every time a member is appointed having to bring back to the task force reappoint and remove them and go back and forth and just allow the task force table cochairs to make those decisions is okay. Any concerns about that or any agreement with that approach?

>> I think that sounds fine. They can delegate authority.

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>> I see a thumbs up. Okay great. Dr. Gally I saw you nodding as well is that accurate?

>> I think it makes sense thank you.

>> Awesome. Fantastic. Okay great. I think what we would like to do is then change the language in the task force to read, I am sorry in the charter to read each of the three subject area tables. Mark, can you pull up at this time. Each of the three subject area tables are comprised of no more than 20 members including the two cochairs.

>> Okay. Fantastic and then the second one is delegate authority to the subject area table working table cochairs. You can you go to the section and responsibility? You can put will have the authority to approve. To adjust and approve subject area membership as needed. Okay. Any recommended language changes to those two additions or alterations? Hearing none can we get a motion to approve the task force charter as amended?

>> Moved this is Christina gally.

>> Thank you is there a second?

>> Second.

>> Thank you, Kelly. We will now call for a vote.

>> Thank you all. And when I call on your name indicate your vote of yes no or abstain and we will start.

(Voting).

>> The motion passes.

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>> Thank you so much Mark. Okay with that being said I am excited to move onto the meet of the meeting today and one of the things we are excited to talk about is provide an overview of the project plan in order to meet the boards deliverables as you are all aware this task force was created with the intention to help us think strategically about how we move a prevention systems framework forward throughout the entire county with the goal of providing a set of recommendations about a governing structure funding streams as well as locating our work in a community based service delivery system.

So, we are all aware now that the prevention services task force has three subject area tables and those are where we will locate a significant amount of the work and I think it is important for you to know what the work is. We have asked the subject area cochairs to present on the body of work in each of those subject area tables and at least the initiation of the body of work and at this time I would like the o with the subject area cochairs to walk through the efforts.

The framework, the prevention framework tables have all essentially been made into shorthand here. These are respective cochair ins agreeing to serve on the, as the sort of leads for these subject area tables have work today make arrangements to ensure this work is adequately supported through receiving support from the ARDI team and also county council and staff and external partners including consultants (Indistinct).

I want to thank each of the cochairs for their incredible leadership and agreeing to step forward to help facilitate this work and at this time I will hand off to task force member Meredith who is one of the two cochairs the framework table and will talk about the vision and structure for the prevention alignment table and I will note while we are still working to fill the other cochair role we will work closely with Meredith to make sure she has the

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support she needs and if you have additional suggestion on a cochair we welcome you to contact the staff as well. With that said I will turn over to Meredith WHO will lead on the following set of slides.

>> Thank you so much. And thank you all members of the task force for bestowing the honor on me and I am excited to lead the framework table and obviously we are look for a cochair and hope these piques our interest in participating in that capacity. This is the tentative roster. With the cochair and I should introduce myself. Meredith director of systems and planning at (Indistinct) and pronouns are she and her. I am very passionate about prevention work and I have spent my career in homelessness and housing and have really seen the manifestation of if failing primary secondary prevention efforts in the homeless population. Excited to be helping to lead this work.

As you can see, we have diverse member of stakeholders and know in the last meeting we had a discussion b about the framework and slides that are presented and happy to see that Debra Alan will be representing department of public health who obviously has significant passion and knowledge in this area. But also, with health services. Family, department of child family services and group of esteemed colleagues on this panel. Next slide please.

In terms of what we are tasked to do and thank you so much Mark and heather for meeting with me to go over this and I was able the to take a deeper look at the actual motion. The core tasks of this group are to conduct background and research and alignment with the consultants and the center that C. Scorsa mentioned and to set an equity vision here and as you can see shared definitions are important and we talked

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ability its last time and obviously there is a lot of strong opinions and passion on the full task force around shared definitions.

We are looking at governance and accountability structures and really guiding principles and target outcomes and we don't want the group to be entirely abstract or academic and really actionable and engaged.

Obviously, a promotion orientates and had looking at primary prevention and how we can get people thriving and striving for a community where all ang Lee knows can thrive. We are centering antiracism and codifying then county wide definitions and lastly we are receiving feedback from and providing guidance to disproportionality and coordination tables to advance their b objectives last time it was raised framework comes first and we think the framework table will be engaged heavily until the next couple of months trying to set the shared definitions and one of the concerns I raised as a cochair is this work obviously is the definition and how we frame out the, how we build this framework will impact the work of the disproportionality and r coordination tables and know the task force beyond the membership of the individual table is passionate about this and I want to open up and get any input about how people would like this framework table to be thinking about shared definitions.

I will say from my background as I said I am passionate about engagement with people with lived expertise and had excited that the board motion calls that out and getting to hear from people who have experienced both positive and not so positive prevention and promotion efforts in our county is o we can inform the framework from the lens of people who have experienced, have experienced sort of our failing or thriving efforts.

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I want to make sure that the framework we have is actionable and accountability oriented. So that we can ensure we are not being abstract and thinking about definitions are important. But action is what we are striving towards here. And lastly obviously centering um, sort of all of the factors that can contribute to people's life course outcome that are less than ideal and pushing for promotion as a primary driver to this work.

You want to pause there and see if folks have other suggestions or task force members have other suggestions about how we should be I thinking about this and this won't be the last opportunity but I wanted to open it up.

>> Thank you. That was laid out. More of a comment. I appreciate you highlighting and lifting up the nature of making sure the framework has an actionable sort of anchor to it. We see lot offense other efforts that have been more pie in the sky and not on the ground and I appreciate that and the focus looking at the life course outcomes and glad we have Arnold. My one question have we thought about what metrics might be use and had indicators if moving the needle. I like the actionable part tied to it is making sure we have targeted goals and over some particular timeline of how we will determine and evaluate if we are seeing some success?

>> That will be core to the framework table and I have given some thought in my experience working in LA county and obviously so many different sorts of parallel efforts happening in all of the county p departments. Looking at how to set measures so each department is oriented towards success of this. Rather than having a collective pie in the sky number like you said. T thinking of the actual deliverables looking at the department of social services or department of child and family services to help us and we know we are doing a better job of providing services in the county. I am curious and I see Dr. Ferrer

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hand. Curious to hear from other task force members or Dr. Howard if you have suggestions on the metrics we should be considering.

>> Thank you. We can talk offline I think there are some ways we should think about avoiding the one size fits all approach in terms of what the metrics look like. They are going to vary within each context if you will ask and being with clear how we are looking ask and trying to be mindful of issues around social determine nans for health and where people are starting from and not assuming we set the oftentimes unattainable metrics given the circumstances we know can make it difficult and we will talk in more detail and I will refer to Dr. (Indistinct) more of an expert than I am.

>> Thanks. I am not really an expert at all and I was going to echo what you were talking about. I think we have to be super careful on metrics and it might be more important to set out principle. Most of the work that we do and we do a lot of it. It is funded through grants that come with deliverables and expectations. I know that sometime ss super hard for us to live within the constraints. But very little funding we have for the work particularly primary prevention comes from the county.

Again, where you have the flexibility. For most of us we are told by the funding source what it is they are expecting us to accomplish. I think what would be helpful is to layer how we do that. To layer the focus on how we do that work to actually honor sort of the set of principles that I think will really anchor this framework. So that as you are trying to work within the confines of whatever funding sources we have. We are being mindful that the process by which we engage with our community partners and residents and our workers, it is something we have a lot of flexibility and I think it is particularly important around (Indistinct) work to use that to our advantage to advance an anti-racist

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agenda in the county that is rooted in respecting the people where we are providing services to by allowing them to be front and center with the work.

Some of this I think will come out in this framework that we are, you know, coming together to develop and I want to obviously thank you so much for sharing this. Really important table.

I think again, this will help p all of us do a better job with the funding that we already have and then I think it allows us to seek both from the county and other funders. Opportunities where we can really extend the work so it is more meaningful and impactful and allow us to and get closer to the set of goals that I think will guide our overall county agenda. I don't know if that makes senses and that is how I am thinking of it. T I know the way our money comes we already have so many metrics we are measured against and we have to deliver on. So.

>> Right. I definitely hear that point and maybe before I see Dr. Gally and member (Indistinct). Also with hands up and we will come to you in a second and p I wanted to say I think I have sat on a couple of other task forces and in response to board motions where there is a focus on principles and the challenge with that is principles and how you operationalize principles and I think part of what we are tasked to do also is look at a contracting structure that will support this kind of prevention work and I think there are ways we can build p principles. For example, into request for interest or RFP's or county contracts. But also, that we do need to think about how are we and going to hold ourselves accountable and think outside of contracted dollars or program asks and really how can we build the county in a more robust and connected safety net and some of the thoughts I am having and definitely hear the point on principles and appreciate that.

I am not sure if I should be calling on my task force members and I will go to Dr. Gally.

>> Thank you and I echo the thanks for sharing the committee. I like the focus on accountability. And I like the o focus object principles and I understand the point that you just made about what we need to be careful about if we just focus on principles. I think part of the challenge the group will have to grapple with is right now how broad prevention is defined and had it is exceedingly broad. I would argue with the current definition and every piece of the counties \$38 billion budget would fall within prevention in some way it is geared towards preventing harm, or preventing further harm for individuals who have already experienced harm along the lines of more (Indistinct) prevention activities.

As with anything when you cast the net so wide that everything is included it becomes very difficult to accomplish anything specific and to make any concrete progress and my worry when literally all \$38 billion of the budget. Sheriff p's department. Probation department. Library. Everything is included that you actually talk about nothing and I wouldn't want that to happen with this group and I think if we try to be intentional about narrowing where we have impact that is where we will see results. Of this work.

I you also think in a similar lens. I believe we should be aspirational about what we want to achieve and we also have to be grounded in the reality of where we have the authority to achieve it. And times I see the county ask and as well as other institutions set metrics and milestones in areas in which they have no authority and I don't think that is helpful to anybody and certainly there could be advocacy and policy in the areas where the county doesn't have direct authority. To commit to achieving a certain degree of improvement on a certain ebb metric for which there is no authority or jurisdiction to

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improve in the area I think it is setting us up for failure and we have to be careful where we have the authority as a county to intervene and what Dr. Ferer is describing there is also it is authority of the funding fungibility. Some are tie today specific grant opportunities and not an ability to move the funds around to other prevention activities because the county would like the to prioritize them and I think we have to hone in on the aspects of funding that are fungible and though on setting up principles for how the money is allocated or reallocated I would argue over time and will a set of concrete action steps if tr accountability of aligning the funding where it is the most benefit and apart from that I think there could be where there is funding that is tie to existing programs that can't necessarily be changed there it may be appropriate to say let's shine a light. There is a lot of power and transparency and a lot of power and data and let's shine a light on how we are doing the funding we know we receive for doing a certain set of activities and can't change how it is allocated in the short term and let's see how we are doing and be transparent about the impact and results and activities that are done and we can advise whether or not there are other activities that have more impact knowing there is not the flexibility or authority to definitively change what exactly is being done because of the nature of how the funds are drawn down. Thank you.

>> Thank you so much I heard make sure we are not trying to go bo ill the motion and take a targeted and narrowed approach that is realistic and within our scope of authority and we might want to think about as a framework these are the tangible metrics and things we are striving for. What we would love to see over the next 5 or 10-year and I want to highlight that the funding. The funding alignment or funding structure is going to be something that is discussed at the large group. And just because it touches

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framework and touches disproportionality and coordination. That we are going to have the opportunity across the board to be discussing ask and engaging in the funding work.

I want to go to member (Indistinct) I see you lowered your hand.

>> I did. You said my name and.

>> Getting people on the same page as common language and seeing people as whole even though we have a giant octopus of bureaucracy of different ways they may individually do that and I am hopeful and I don't know if it is too aspirational the idea is common language around people thriving and we have a finite amount of time and resources and are those geared towards prevention across all of the different sectors I am thinking do we have an inventory of all of that and getting the departments on the same page of what prevention and how you say. What you are trying to prevent and because it was interconnected, we are talking about people and I am curious b about that. How do we tell the story about people being whole when the government systems are not always whole?

>> Such a great point and I was thinking the same thing and I was going to ask the ARDI team in terms of inventory to look at what Dr. Gally is mentioning. There are programs targeted to do primary prevention or different prevention work and there are sort of the mentality and how we get the county to orient more toward as whole person and the life outcomes and what programs are we thinking about or using right now. Or dollars we are using now targeting one specific thing and could be more meaningfully if it were more coordinated or meaningfully impactful in someone's life.

>> And showing interconnected and I think about school for example. The things are interconnected and what happens to prepare a child to be school ready and in school

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and it affects other outcomes and other systems are aiming to prevent and I appreciate being part of the conversation. Thank you.

>> -- I would love to have you there. I am there with you. I don't want to ask the ARDI team is there in terms of what the sort of consultant team is oriented towards. I know I sent a couple of landscape analysis we did when we did the mainstream prevention motion and the child welfare transitioning youth prevention motion is there an inventory of programs taken by the supportive staff?

>> That is a great question. To date both ARDI and the budget team and CEO have done a preliminary inventory we are going to present on.

>> I think you will see a sampling of that. One thing we asked earnest young to help do is help support the analysis more deeply. EY is pulling together the documents that were sent over and if you have other documents, I think there is the substance abuse. Previous plan. There is a host of prevention plans we ask EY to take a look at and as well as begin exploring that data in alignment within a support of you all's task force and I think we will defer to the task force leadership on where you all would like to go with the data and I think the consideration is robust and we will have the opportunity to explore and incorporate the approaches to the data as well as figure out where there may be gaps and I appreciate Dr. Gally and ferer's comments to not be so overly broad and to narrow what we are focusing on and also make sure we have metrics aligned with what the expectations are around the funding sources.

>> They are going to talk about that. Obviously, they need data. This table will have support from earnest young and as well as Arnold chandler to lift up and examine

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the metric us are putting forward and I will say this table will have the opportunity to further explore where there may be data as needed as well and I wanted to share that with you.

>> Thank you so much Dr. Scorza and I have a time check there to we have a robust discussion and have two other groups to hear from too. Dr. Ferer I see your hand.

>> Thanks. I was wondering as folks were talking whether or not there is an opportunity to do this work a little bit differently and narrow the scope now as part of developing the framework.

So, are there three areas in particular we want to focus our efforts on better supporting prevention-oriented work? And digging in in those three areas and I think Christina obviously was appropriately concerned about this large scope. And then even sort of a task that would go out and have us all looking at everything that we are doing. That is, you know, could be labeled or is labeled as prevention oriented. Christina is right that would involve everyone and certainly at the department of public health it would involve almost everything we do and it would be a mammoth undertaking and there is no staff for that. Many of us on the health side we are still in the midst of a horribly devastating pandemic that is tying up a lot of the work force.

So, I want to be realistic what we are hoping to accomplish is to really improve some outcomes for residents and workers in LA county. Then maybe we start by defining which of those outcomes we want to focus on for the short run. For the next five years and set some goals there and really aim the to focus the prevention efforts or have them coalesce around meeting those particular goals.

I think otherwise there is this opportunity for us to be spending a lot of time collecting a lot of information that is then really hard for us to figure out how it is going to

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be useful in charting a path forward. I think at the end of the day most of us I think who are working the departments would like this to be value added very quickly to the work that we are doing.

>> That is a good point Dr. Ferer and thank you for the consideration and I think we can certainly take that into the framework table discussions that is a good point. Dr. Hunter?

>> I would like to add I am supportive of us defining our parameters and scope from the beginning. I viewed that as a top priority for the disproportionality you table and we are going to have to find a way to narrow and determine which areas we are focusing on and it makes it most sense to do in collaboration and for all three tables to have the same parameters.

>> That is a good point thank you Dr. Hunter and I think that is probably, Meredith unless there is anything further or additional comments on this particular table that is a good opportunity to segue way into your table as well Dr. Hunter. So, Meredith any final thought or comments on this.

>> I feel there wasn't a motion but there is definitely now one person raising and a second person saying that there are interests and this is sort of and this was my reservation I raised to ARDI staff. I think the danger in having the discussions and level setting and vision setting in a small group is that we bring that back to the big group and relitigated because people are passionate about and it everybody has a lot to add in this area and I am open to setting and I like Dr. Ferer's idea of narrowing the framework and picking a few you focus areas within our scope. Realistic and targeted and where we can see action and impact immediately.

I know we have an if full agenda today and not sure if this is a special meeting or what do you, what are you thinking Dr. Scorza?

>> I think we can obviously for the sake of time. I think we can initiate in the task force sort of what the expected outcomes are. Because we, in some regards. You know? There are a set of directives and deliverables we are expected to achieve and I think we can do that analysis and bring back to the task force table for a broader task force discussion as your work gets under way and I don't think there is a lack of room to do that work and have the conversation and I recommend that we bring to a broader task force table discussion if everyone agrees with that?

Awesome. Dr. Gally?

>> Can you hear me? I like Dr. Ferer's suggestion of trying to go be intentional about narrowing it. I think that will really help us focus on where we think we can have impact and increase greatly the likelihood that we will really be able the to achieve tangible results in some specific areas. I would personally prefer to that have conversation here at this group. I don't mind at all your suggestion Dr. Scorza if the framework table wants to take a first crack at it and then come back here for discussion. That is fine.

I think partly because of what Dr. Hunter described it affects all of the tables and it affects all of the work and it is a core piece f of what the task force is doing and I think that discussion would be best had here.

>> Understood. And I totally agree with you. Awesome.

>> I think maybe what we can do is try the to convene and I can work with Mark and heather. Try to convene the task force sooner than later so we can provide an early r report out ideally at the September meeting if not sooner. So that we can get the groups,

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the full task forces input. I will say you have given a lot for the framework group to think about and it is helpful in thinking about scope for our group and I appreciate all of the great comments and suggestions and I think I will with that turn it back for our next.

>> Thank you so much. And I will add as well that the task force members are welcome to join at the table and I want to make sure you know that there is not limit on the ability to participate in your table as well. I like the idea Dr. Gally of letting them take the first crack at it ask and bringing back to the group as early as possible so before they get too far down the road and pay attention to the interdependency between the tables and provide a different direction this conversation will be elevated at the tasking force level thank you for the observation. Thank you for that.

>> With that said let's turn over to, now I think at this time actually tam ra I think I had you out of order and we will turn over to Dr. (Indistinct) and Min who are cochairs for the coordination table. At this timely turn over to you to, to take through the body of work.

>> As you can see, we are in the midst of the development. Next slide please.

>> Thank you. Yeah, we had a chance to connect with the ARDI team with the subject area table and we are both excited to coleader the work with partnership with task force members and other members will be joining the team. I think the primary work of the coordination table will be to coordinate urgent and emerging opportunity so we build on and leverage the opportunities as we develop a coordinated prevention system and focus on integrating and improving services and care coordination for LA county residents. To echo what member (Indistinct) said and I am excited about engaging those with lived expertise on how they experienced accessing our services so we as a system can figure out how we best coordinate and integrate our work to really improve the quote,

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unquote user experience for our kids, families, adults in LA county who are accessing our services.

I am going to highlight some of the example tasks that the subject table will take on and hand over to Dr. (Indistinct) to share the examples. And I will share in the bullets in the slides we have now are focused on prior to initiatives that are child centered and excited to work with and connect with other task force members to learn about other initiatives in the county that fit under this discussion and I also think just building on the framework tables prior discussion. I think some of the priority initiatives could also help perhaps define the scope of work or parameters that is we are talking about in pursuing or figuring out prevention priorities.

One of the key tasks we take on is acting on and aligning on cross departmental priority initiatives and first one is family first services act implementation and for background for those that don't know it is legislation that passed federally a few years ago that California is in the process and LA county implement that allows title four E funds to be drawn down for primarily secondary services. Prevention services for those at risk in involvement in the child welfare system or those already involved.

I think we as a group while DCFS and the partners have a ton of work groups working on (Indistinct) implementation I think our coordination table can bring partners to the table to identify both additional evidence based practices that we can advocate for inclusion in the state of PFSA plan and also work with others the to identify critical supports and services for families served through what is called the community path ways which are voluntary services that are available for families and youth who are at risk of imminent involvement in the child welfare system and experiencing mental health,

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parenting and substance use challenges. As part of the family first prevention services program the state is also requiring that counties create a comprehensive prevention plan and that means that in addition to the FFPSA funded secondary (Indistinct) prevention services available to the eligible children, families and youth. Counties are supposed to work across county department, systems, community based organizations and those with lived expertise to develop the comprehensive prevention plan that outlines a broad continuum of secondary (Indistinct) prevention services for children youth and families and the comprehensive prevention plan is due to the state to the state department of social service by January of 2023 and I think it is an opportunity again, while DCFS and the partners through the FSPSA work are take on elements of the CPP I think there is a lot of opportunity to bring the element discussions into our preventions services task force because it is part of the plan to engage other critical system partners in defining what our continuum of prevention services look like.

The state is also provided ago state block grant and DCFS partners and Kyle feel free to jump in if I have the number wrong, I believe in LA county the plan is about \$43.01 time funds we can use to fund the continuum of prevention services including non PFSA eligible services that are more culturally response and I've community base and had a great opportunity to discuss as a group how we as a county want to spend the state block grant funds for the prevention services.

We also here in LA county have established under 802083 a system of care MOU that brings together departments that are serving children and families so we can better align and integrate programs to address the needs of kids and families through a trauma informed system of care and the MOU was signed I believe a couple of years ago and

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departments and partners have been meeting regularly and I think the system of care model that the state is really promoting that counties use is another great opportunity for us to leverage as we discuss our prevention coordinated prevention system.

The other couple initiatives that I will highlight is linkage program that exists between BTSS and DCFS so support families we serve in those departments and CFIO info hub which links county clients records across agencies to enable service coordination and empower informed decision making.

So, again, this is just a few and it is not inclusive. A few priority initiatives we feel are urgent and emerging that the body can look at and leverage as we have conversations about the scope of work for the prevention services task force and next slide and I will turn over to Dr. (Indistinct).

>> While we are very excited as said to be on the committee. Particularly because there is such activity in the county right now that we believe is very consistent with the cork of this task force and as you can see, we are also identifying a few examples and they are not exhausted. They are just like, for place holders for the discussion and looking how we are learning from existing pilots and other initiatives going on and if you have particular initiatives you want to make us aware of send us an e-mail through Mark and we can make sure we review those as well.

Here you see three pilots and initiatives that are currently going on that we believe that provides some important information for us to consider. We will be looking at the broad scope of what work is going on and we are also looking at what kind of information and feedback we can provide the to the other tables example. The framework table. The disproportionality table and one of the things that we had in your pre-meet discussion was

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how we would actively identify for example potential task force members or workers to be identified for the different groups so we can make sure the issues of coordination and prevention are included in the different discussions. That was one of the things we talked about. The importance of having across the tables experience and expertise in the different areas that are critical to the success of the overall task force.

In conclusion we are looking forward to really exploring the breadth of opportunities that the diverse level of program the county allows and looking at what ways we can influence those services, programs, and resources in order to improve prevention outcomes in Los Angeles County. With that I will wrap it up for our table. I know we need to get to the other one and thank you for the opportunity, Dr. Scorza.

>> Thank you as well. And would you like to field questions from the task force members?

>> We would be happy to.

>>

>> Thank you for the great presentation. Wondering if there are any thoughts around as county systems, we are still in a lot of ways function in silos and there isn't a coordinated system to bring us all together and I wonder if this table would kind of tackle that. Bring a system together that helps each department that may serve the same client from beginning to end.

>> Yeah. I will jump in and Dr. (Indistinct) will feel free to jump in as well. You know, I think that part of that as I see it in talking with the ARDI team I think some of the coordination and governance structure will be discussed in our group. Particularly thinking again about the existing initiatives and opportunities. So, for the children and

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family side I would refer back to the system of care MOU that already exists. The state. Department of health care services and the California department of social services through 802083 has put into place the system of care partnerships they want to sign onto and LA county has elevated system of care MOU that many departments

OFFICE OF PREVENTION SERVICES TASK FORCE

5/20/2022

10:15AM

It covers many things we talked about before. This would be a great chance to talk about the system of care. We would need to coordinate around that table. Other opportunities to build a different structure that aligns prevention services across the county.

It would need to be a joint discussion across all three.

>>: One of the main reasons I wanted to be part of this table is coordination across systems. Such an important factor. Especially for the population I represent. On the other end, I see the cumulative effect. They had been the most disadvantaged.

That was one of the things that excited me about this opportunity. If there was something we could do to assist, and how we coordinate our approach and identify priorities in the past presentation, we move the needle in positive ways on behalf of families.

Definitely. I think there is a chance in this table one for the dialogue. Also, to look at opportunities for best practices to recommend. The direction we want to county to go in.

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I think some really important discussions that we will need to have with the table and with framework of how we coordinate efforts.

They are all decision points in the county to draw grants, direct programming, and outcomes.

And to prioritize our investments. To me, that is the important part of coordination. It can actually be a very important aspect of how we position the work we do.

Thank you for bringing that up. I think it is critical.

>>: One thing I am hearing across all the tables and I think is a key priority for these tables is centering the voices.

I am thinking of existing groups around that. Sometimes assembling groups can take time to build that.

One group I was thinking about was the thriving families. Same for the children work group. I know some people are plugged into it.

It started as a national technical assistance grant. It evolved to be driven and designed by experts. I am sure there are plenty of examples of existing groups incorporating those that we can start to bring in a little bit more intentionally.

Just wanted to share that piece.

>>: I would encourage all the task force members, as you think of groups to connect us with, to let the staff know. In

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the course of our work, I am taking notes and coming up with ideas. We want to ask all the members that are here to send an e-mail.

This group may be important for us to keep on the list. Don't assume we will know they are there.

This is a big county. Many of us are connected to it but not all are aware. That is part of the important task. We can put that information on the table to look at.

That would be something I would ask all of us to consider as we are looking in our environment. How we could be of service and support to the various working tables. Thank you.

>>: Dr. Howard.

>>: I will add to the course and say thank you for the work on the table. I want to lift up the point. It gets in the way with any real sustainable evidence-based collaboration. I wonder if there are two things we would consider.

How do we think about incentivizing collaboration? One of the things we have done, we have done C grants and made it is a real requirement that entities have to show how they are breaking out of systems.

When there is money involved, people tend to fall in line. I don't want to operate as if there is not some collaboration not happening. We may want to lift those examples to see how they have been able to build and sustain themselves over time.

I spent some time at LAKEO. In some ways, it lends itself to do that work collaboratively. It forces them out of the silos. It is good to lift them up and see what we can do to replicate them.

>>: Thank you. I agree with you. I think one of the other things I would like our table to identify is I think Dr. Dr. Ferer or Dr. Gally mentioned this, what leads to the siloing of our work is there are state and federal restrictions around funding streaming, data and legal implications around sharing information around clients.

Identifying funding requirements that we can advocate to the state and federal government around giving us more flexibility to work better together to serve our common clients.

In addition to lifting up where there are collaborations already. Also, highlighting barriers from doing this work better. I think I saw your hand up, Dr. Hunter,

>>: I did. I had a question about funding. Since you called on me, I will ask. Does your work involve an analysis of existing and emerge gent funding streams?

>>: That is a great question. It does call for a funding streams analysis. We will get to that conversation today. We will share some of the early feedback we have received as well. I would recommend that we bring up those questions at that item.

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We are in collaboration with county council and partnership with EY. They will be conducting the analysis. That will be part of the conversation with the recognition of what was said earlier. There are many restrictions on those funding sources.

Many requirements, limitations. We really want to understand the barriers. One of the primary reasons it is hard to coordinate and collaborate.

>>: That is a great question. Are there additional questions? Thank you for a robust discussion. Now Dr. Hunter will take us through her three slides as well. Please take it away.

>>: Thank you. I am the executive director of the commission on children and families. I am pleased to be coleading with Irene. I have not met her but I have heard wonderful things.

This table is so incredibly important. Addressing the disproportionality. We should add the disparity that negatively impacts the lives of so many residents. It is central to the success of our efforts to further develop and bolster infrastructure that prevents negative outcomes and helps our residents thrive.

The discussion that has taken place has been incredibly helpful and very instructive. I want to stress that the work of

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this table involve building on and leveraging the work and other considerations lifted up.

That are under way in the county. The membership of the disproportionality table is under development. We have identified several members. If others are interested in joining, we are certainly open to having you on board. We envision this table to be a working body.

We won't be advising on the work that is being led by the consulting teams. We plan to roll up our sleeves and do the work. Our work has to be done in close collaboration with the other two tables.

It will be reenforcing the findings and recommendations that come from the table will inform the framework and coordination tables. Throughout out the process, learning among the three tables. As I move through the slides, I invite the team to chime in as they feel necessary.

They have been this for some time and have a greater familiarity with the vision of the table than I do at the moment.

Our core deliverables include first deepening our understanding of the manifest stations across the life span that exists. Deepening our understanding of the drivers. Including those that are fueled by our own county policies and practices.

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One of the primary methods will be conducting some type of cause analysis. We will talk more about that in the next slide. We will be responsible for drafting recommendations for targeted strategies to address what we learned.

There was discussion on implementing targets to address the issues. These recommendations will include those four funding strategies. Lastly, this table is tasked with developing recommendations for prevention and promotion metrics.

There was a robust discussion about metrics earlier. That is why the discussion has been so very valuable. It will be on going. I want to stress that we envision this work really involving and leveraging and building on what exists.

This includes indicators, metrics, existing analyses. That which is required for the various funding streams as Dr. Dr. Ferer lifted up. In addition to building on and leveraging what exists, we plan to identify and make recommendations to address data gaps. I know assets are few and far between. This is an area in which I would love to see some improvement. Slide. This lists some sample tasks we will undertake to deliver to meet our core deliverables.

The first bullet speaks to the use of data to identify disproportionality, immigration, age, statuses. The second bullet provides examples of how the analysis may inform the work of the framework and coordination tables.

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The final bullet speaks to drafting of recommendations for those targeted strategies to address disproportionality. I will add disparity. I hope that is something we can include in this table.

That is the other critically important D when looking at these issues. These will be related to funding and metrics. Slide. Final slide lists sample tasks that are associated with the development of prevention and promotion metrics. Inventory existing metrics and data points captured by county departments.

A question for the team is if this inventory would be able to include metrics and data points that are being captured by some of our community partners.

We would highlight key data and opportunities to integrate. Another task would be cure rating background research and best practices on metrics for prevention and outcome measures. The final task involved provision of recommendations for the prevention that will be developed by this table.

Those are my slides. I will open it up for any questions the task force may have. I invite Dr. Scorza and the team to weigh in.

>>: Thank you for that. I want to acknowledge that you are probably seeing and picking up on a lot of the interdependencies. We will go into a slide to talk about that. How we intend to lift up the efforts to coordinate.

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That is a conversation we will go into next. I will turn it over to Dr. Hunter for any questions you may have.

>>:

>>: I want to echo the sentiments around disparity treatment. We talk about promotion metrics, if you don't take a look at the retrieval before, after, and during, it will be difficult to move the meter on this and to really start to affect change. I want to make sure we raise that and make that change. Seeing is believing. Optics is everything.

I would say we probably want to see that attached to the table as well as the name and our comments moving forward

>>: Is that a possibility?

>>: Absolutely. I think the table, that is the point. Focus on disparity. Absolutely. Including language around it.

>>: Great. Other thoughts? Questions?

>>: I think this dove tails nicely with the other conversation. Highlighting areas we would like to focus. It can be powerful to highlight some areas. Specific populations or settings. We have to think about how we define that.

We know there is disproportionately. We can look at individuals with previous history of incarceration. We can look at different populations. Honing on the disproportionately within those cohorts. I think my fear is we are looking at the

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population at large. We will miss an opportunity to make a difference on some areas we know have deeply embedded issues.

Thank you. I don't know the Dr. Scorza, if targeted universalism is a framework to use as a guide. That speaks to what was just raised and discussed. Target our efforts for universal impact.

>>: The table has the ability to explore both constructs. To have that informed. Narrowing focus. Looking at work across the task force, the idea is to really think about what a county wide prevention system framework and governing structure ought to look like.

How we are taking advantage of opportunities with a focus on getting things done to targeting areas where we see the greatest disproportionality and disparities.

The conversations we have had, those three efforts while aligned were so large that it made sense to create spaces for those efforts. They have informed each other. We are not losing the opportunity to work on things with immediate deadlines.

You are seeing an effort to try and make space for those types of things. Bringing in a focus on targeted universalism. Our families experiencing domestic violence have immediate need right now.

We don't want to wait while thinking about what the system needs to do to change.

>>: Absolutely. The last thing I will add before I return, sorry.

>>: I want to pick up on something that was said. I have been reflected on it through each presentation. I am a believer that all behavior with enough information makes sense. That concept is less about the people I have not heard as much as that in each of the groups. I am sitting with a little bit of a worry.

We keep trying to provide more services. I heard that other element. I wanted to ask a question about the tables themselves. This is my first meeting as a member. How I can get involved. How I can get my colleagues involved. Just wanted to ask that question.

>>: Thank you for that. It is a pleasure to meet you virtually. To briefly respond, you are right, previous the need to center the role systems and policies play in shaping people's outcomes. Behavior is centered in material conditions. It is not about just the behavior.

It is about the ways opportunities are shared by those conditions and constructs and limitations. That is part of the framework table.

In terms of identifying additional folk, we will have our team reach out to. We will set up some time to make sure we get your feedback and thoughts on who could potentially serve in

each space and inform the work being done. We look forward to working with you on that.

>>: Thank you.

>>: Thank you. Dr. Ferer.

>>: Thanks a million. This is a great opportunity. I appreciate you taking on this leadership role and all the work you did to pull together a framework for this table.

I wanted to lift up what was just noted. On disproportionality, it is about inequities. Less about disparities on this table. That would drive us to look at systems that don't work.

I think the challenge will be that the systems that don't work are big. They are big and they are really driven by racism, marginalization, disinvestment. Huge areas for the county to grapple with.

I think that is a lot of the work you have been trying to do. I was just going to note that I hope there is a link here. I think to address the issues related to what we may find about our prevention aspirations couldn't be divorced from this need to acknowledge the racism, marginalization, disinvestments.

Both past and current. That make it impossible for everyone. I really agreed with what was said. Because what we do best as service providers is offer services.

We spend a lot of time looking at challenges and coming up with more services. Trying to rescue the drowning people as opposed to being in a situation where they won't do well.

I feel like this is some to have both important work. I want to thank you for stepping into the leadership role. It is challenging. It raises the biggest issues that we have not done well on addressing.

>>: I hope this work will involve examination of the way in which county policies and practices are drivers as well.

>>: I think going back to the task about gathering the inventory of existing metrics and data points, that are currently tracking, I wanted to lift up, oftentimes our county department and systems are focused on processed indicators and metrics they have to track. Specific state and federal die guidance. The impact felt by those accessing our services. I am glad I RENE is cochairing this subject area table with you.

Part of the work can also be identified in the community. That work is already happening. I think partnering with CIO and county departments to build the infrastructure to capture that.

Right now through our data systems and staffing resources doesn't exist to capture it directly from community members. I wanted to highlight that is also important. Hearing about how they would define well-being for themselves.

Ensuring we have a structure in place to capture that.

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>>: I agree. I hope we can partner with some organizations in community and doing a lot of work around data metrics.

>>: Good point. I appreciate that. I know that OCP has done some incredible work in this area. We want to incorporate that work in the examination.

>>: Hi, everyone. Thanks for this discussion. One of the things I am thinking about as each of the table talks is we don't want to boil the ocean. You could argue that every department contributes to prevention and promotion. We are talking about gathering day that reflects disproportionality.

One of the tests the table needs to be how will we engage in departments. Helping to gather that information so it is useful for us. I think if we just blast and say give us your data, we will never get something back useful

>>: Thank you for that. I am mindful about workload impart to departments as well.

>>: I want to thank you all so much for this robust discussion. We appreciate it. We have under 45 minutes left. I want to share with you some of the activities we have identified. It is great. I feel like you lifted some of these things up. I am happy there is a lot of alignment on this. We recognize there will be a need to your point to talk about data sharing and integration work.

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Some of the work our team will bring to think about how we get the information we need in an accurate way. I want to acknowledge first five leadership. This idea of centering. We heard a few people say this.

Centering the family and their experience. From a family's perspective, as someone who grew up using county services, going to get support from one county department unit doesn't look different than UCLA harbor. It is the county.

Figuring out what the journey looks like is important. We are working on an RSQ to bring in community consultant. We want you to know that those listening sessions you need, we are working to bring a park partner on board.

Task for table operations, backbone support. We will be doing work planning across the tables. As issues arise, we keep tables informed. We are taking on funding streams analysis. We have started that work.

Initiated at the passing of the motion. We brought on some support and partnered to do some analyses. Not all funding can be used for what we think it ought to be used for.

We want to make sure we manage expectations around this work. We don't put forward an expectation that funding is broadly available for this work. We are clear about what it is and cannot be used for.

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One of the reasons this feels like we are boiling the ocean is because we have yet to find what prevention is. Fully defined what it is. When we say prevention as opposed to the other ideas out there, when we align the common definition, it will help us further narrow what we are doing.

Anything that is not currently represented?

Any feedback on these tasks? Any recommendations?

>>: We have spoken about lived experience. I am wondering if we need a visual to help represent the experiences of those and how this fits together. It looks like a lot.

>>: Can you further clarify what a visual means?

>>: We have this user journey mapping. It is like a road map. What are the systems that individuals, families, community encounter or may encounter over the life span? What are those levers of change?

I am thinking about how we digest that and tell a story.

>>: We will invite our colleague to provide that information as well. They will be assisting on that mapping. We will bring it back to this group. Thank you.

>>: I was going to ask and thank you for the comment, I think Dr. Trejo was mentioning and gathering different tables on using existing tables to have listening sessions. I think there may be some ability to collaborate across that.

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Maybe we could put those recommendations that task force members e-mail to the team and map out, this is a group great for disproportionality. Maybe we need to go together to have a joint conversation. There is a lot of cross over and groups that would be great to be able to coordinate with to get unput.

>>: I saw another hand. Good point. Thank you.

>>: I think a lot of groups have been tapped into. I wonder if there is a way to collect information so we don't keep asking what they told us. We need to take action on the feedback we have gotten.

As we step into these spaces say, this is what you shared. Is there anything to add to this work? I wanted to share that.

>>: Good point.

>>: We would love to get your thoughts. Someone made that call earlier.

>>: The ongoing community engagement is important. I believe I think others would love to see those with lived expertise as voting members along with the subject area tables. It is critical to make a space to power share and bring those into these conversations and make sure they can vote on some of these.

>>: Thank you. We invite your recommendations with those groups. If you have recommendations, share them, please. That

may be an important conversation to have as a task force we want people to serve as a task force base.

>>: Very much agree with the points. Quick question. I may have missed this. The key conceptualizing for what this office of prevention services will look like. Will that be mostly by the framework table? Where do you see that mostly being led?

>>: Mostly centered in the framework table. Informed by the other tables. Elevated to task force. Does that help answer the question?

>>: Yes. Thank you. Let us move onto the next slide. Thank you. I want to echo the appreciation for the leadership of the chairs who have offered to serve in those roles.

I want to acknowledge how essential it is to have your leadership. We have excited about the momentum we will leave this space with. There has been some preliminary work done. We have had these conversations about prevention.

We did some work around funding streams analysis. There is an expectation around the timing of this work. We want to prepare to share this information with all of you and get your feedback and direction on how to best capture this information so we can meet the boards deliverables.

One of the major components is funding streams analysis. We will start with an update on the progress towards achieving the

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directives. I make sure to leave time for discussion. Give you some background.

A few months ago we put out a request to provide us a preliminary list on the ongoing prevention programs. It is important to note that we did provide a set of initial definitions. Departments were able to rely on the prevention. We tried to categorize the data you will see data.

We recognize there is additional refinement needed. I want to make sure we are clear that the data today has a number of caveats. This is based on a preliminary use of prevention tiers.

It will be subject to additional review and further refinement. This is intended for the task force to get a sense of the information being provided. We can provide feedback on how U to better strengthen the utilization.

Leading a qualitative analysis of the program data. How to leverage untapped funding streams and county providing legal analysis. The goal is to find the gaps.

That will help inform the task force's ability to draft accommodations for funding alignment once we completed our draft frame work.

A lot of this work will be happening in parallel. We want to make sure the task force is fully aware of this work as well. I will move into sharing some preliminary data. There was a reported 287 plus programs aligned with this early set of

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definitions associated. Primary being universal services.

2021-2022, \$2.14 billion. The county preliminarily is spending around 2 billion or so in areas we have defined as prevention.

Once the table framework takes on these definitions, we will be able to refine this data. It may change given how you all would like to define prevention. Next slide.

We have displayed the budget amount across departments. We removed the department of public health. 1.48 billion. I want to acknowledge that this incorporates much of the data for most departments. It is not shown on this slide at time.

We will provide that data to all of you as well. Many departments see themselves aligned with prevention work in some shape or fashion. This is not entirely comprehensive.

We will need to do another round of this once we have better alignment. This is intended to give you a sense of what the data shows. None of the data includes the American rescue plan. You see the number of prevention programs by department. Here it is across levels.

We recognize that we are working on clarifying those definitions and what can be considered primary and so on. When we do secondary analysis, these may change as we consider framework as well.

You can get a sense to have number of programs being run by the departments most county departments have some program they

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consider themselves delivering on. Prevention oriented. This is what the ocean or lake looks like.

More to come. I want to keep lifting these caveats so we are all clear that we will be doing additional work. This last chart shows budget spending by prevention level. The county made major budget increases over the past fiscal year.

It will be important to understand how much is sustainable how much is locally generated. That analysis will be forthcoming. To the questions about coordination, if there are opportunities to better leverage and align programmatic services in support of the outcomes we are trying to achieve, we want to think about how we can support while there is still a lot to do with this data, I want to acknowledge that there is an incredible amount of work taking place the county has been committed to delivering.

Through the dedication of these funding sources, there is work that is taking place. We don't want to just ignore the fact that we are doing work. Things are happening. We want to think about how we can improve the accuracy of this inventory and strengthen the alignment of this work with the outcomes we are trying to achieve.

I want to thank all the departments for their feedback. We will be reaching out to obtain your assistance in improving the data. We wanted to this be available so you knew what the

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assignment is and where our teams from EY and others will be reaching out to work with you all.

Let me open it for discussion and see if there is any feedback.

>>: I think this is a question for the team. I don't see school districts. I am wondering if those particular groups. There is so much money that flows directly to school districts. They are providing community based services. I am wondering if those three entities can be included in this.

>>: I think.

>>: Full agreement.

>>: I can confirm that this is focused on county resources and county programming.

>>: The initial ask was of our departments. We would look to think comprehensively about this. It would be important. It is intended to be.

>>: I am guessing there may be some overlap in terms of where these investments are situated. Some of the services being offered in school. Part is more related to that. Who is the target audience? I am curious how the number and type of programs translate to who is served and how many.

I am sure that will be part of the conversation in terms of who is the audience for those dollars and investments. I agree. Incorporating education makes sense to me.

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>>: Thanks for that. A few years ago there was a stream analysis done. I think we can use that and build upon that work. I know LASA shared with us the homeless funding stream analysis done.

What we didn't want to do is reinvent the wheel. If you are aware of other analyses done that we can incorporate, that would be helpful. It doesn't make sense to start all over.

So many directives to conduct analysis and look at leverage funding have been requested by the board or conducted by the department.

We want to present this to you to think about where the gaps are. When EY does the analysis, they can incorporate all the areas that may be missing as well.

>>: I wasn't sure if the homeless initiative funding was included in there.

>>: I don't think it was in the entirety. There are a number there. We can take that into advisement and explore that. Any other thoughts or suggestions about this?

>>: I thought the summary was great. Wondering, when we look at a universal secondary, was there request to ask for the regulations around funding that drives the universal portion of programming? Was that given to you for analysis?

>>: It was not. We have requested support from county council to provide assistance. They are currently working on that effort.

>>: Great. Thank you.

>>: I am wondering about whether we captured some of the potential. Partnership.

>>: I think this was existing. We ought to consider what potential funding could look like. We will take that back as well. EY mentioned over funding streams we may not be aware of we are trying to see what may be available to tap into to better support prevention aligned work.

This will be grounded in how we define prevention. So we can make sure that whatever sources we are looking into align with how we want to approach it here. That is a good point. Something we can share with the team. Other thoughts or considerations? There are still some additional information gather.

LACDA's work. We know there is still a need for doing a deeper analysis. You are welcome to send us a note. We will look to all of you for your feedback and thoughts. We hope to receive your input on that as well. With that being said, let us go ahead. I will go ahead and turn it back over. We will now, any final thoughts before we prepare to wrap up the meeting today?

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At this time, I will turn it back over. We will open up the general public comment period. I will wait for the team to share the slide. Our team wants to invite members to this task force meeting.

Others that are deeply concerned with the work being done in the county. I do anticipate we will have greater public participation moving forward. I invite you to share details about the prevention task force.

We will turn it over to

>>: We will open the general public comment period. For those online, use the Zoom raised hand feature now. We will call on you in the order you raised your hand. Unmute yourself and state your full name. I will lower your hand after your public comment.

On the phone, dial star nine. We will call out the last digits when it is your turn. We will now start public comment. This concludes public comment. If you would like to submit one for a future meeting, e-mail prevention up to 24 hours prior to the meeting.

Please include the meeting date and any agenda items you are commenting on. Thank you. This concludes today's meeting. The next will be on June 17. I want to thank you for joining us today. I wish you a happy Memorial Day. Thank you all so much next thank you.

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