



Chief Executive Office
COUNTY OF LOS ANGELES

Prevention Services Task Force Meeting

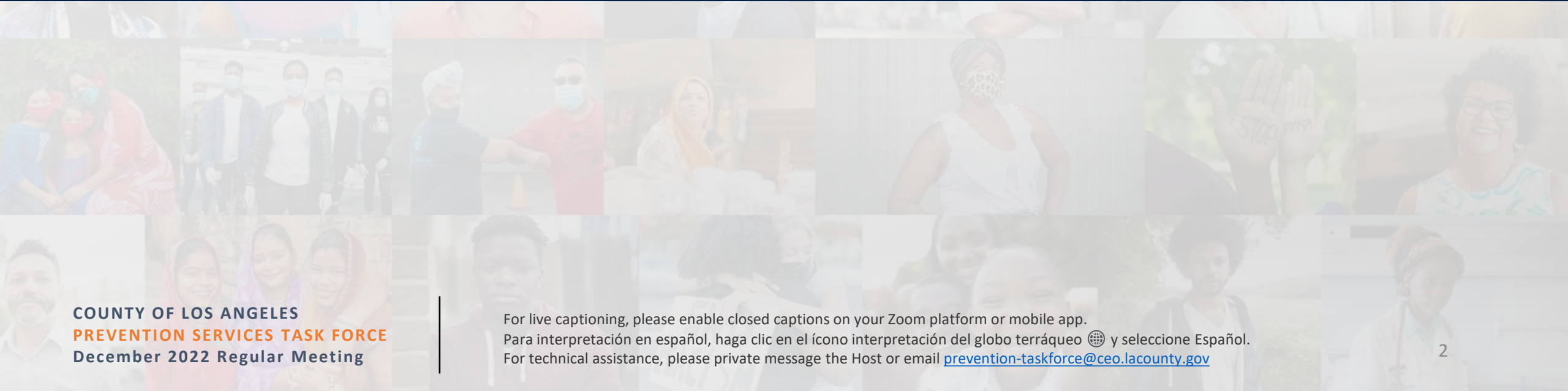
December 16, 2022





ITEM 2

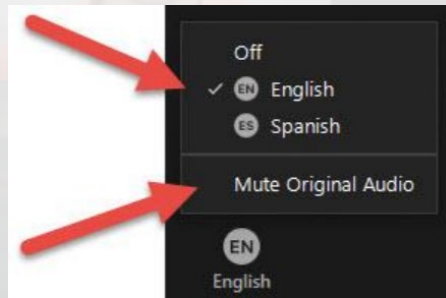
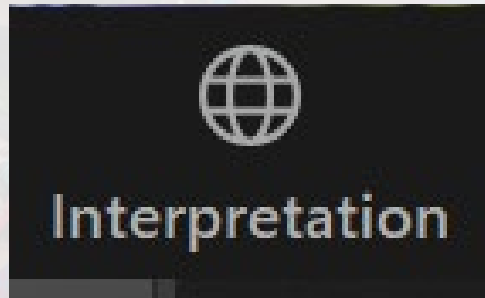
MEETING DISCLOSURES



INTERPRETACIÓN EN ESPAÑOL

Para interpretación en español, haga clic en el ícono interpretación del globo terráqueo y seleccione Español.

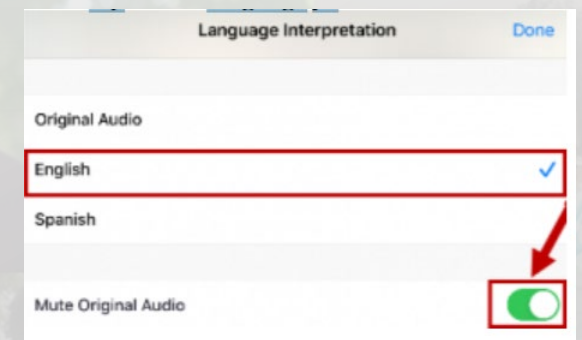
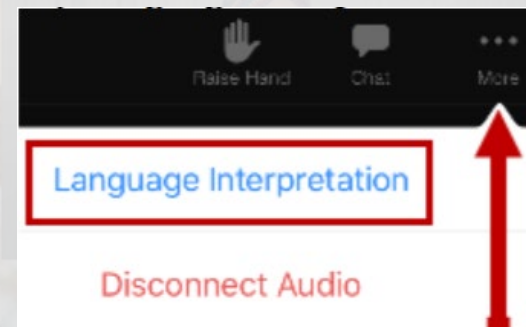
(For Spanish interpretation, please click on the globe (interpretation) icon and select Spanish.)



Teléfono inteligente:

Toque el botón "... " Más y seleccione Interpretación de idiomas. Luego toque el idioma "Español".


(Tap the "... " More button and select Language Interpretation. Then tap on the language "Spanish.")



LIVE CAPTIONS

Windows | macOS


View closed captioning or live transcription during a meeting or webinar

1. Sign in to the Zoom desktop client.
2. Join a meeting or webinar.
3. Click the **Show Captions** button .

Note: The provided subtitles can be clicked and dragged to move their position in the meeting window.

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View closed captioning or live transcription during a meeting or webinar

1. Join a meeting with Zoom mobile app.
2. In the meeting controls, tap the **More** ... option.
3. Tap the **Show Captions**  option.
Captions will appear above the meeting controls.

- **This meeting is being recorded:** for the purpose of meeting minutes and to make the recording available online. By remaining in this meeting, you consent to being recorded.
- **Chat is disabled:** This is a public meeting and subject to the Brown Act. Since conversations and statements on the chat are not visible to people on the telephone and who are unable to participate, the chat function is disabled; however, the host may send out broadcast messages in the chat when needed.
- For anyone experiencing online technical difficulties, telephone dial-in information will also be provided in the chat.

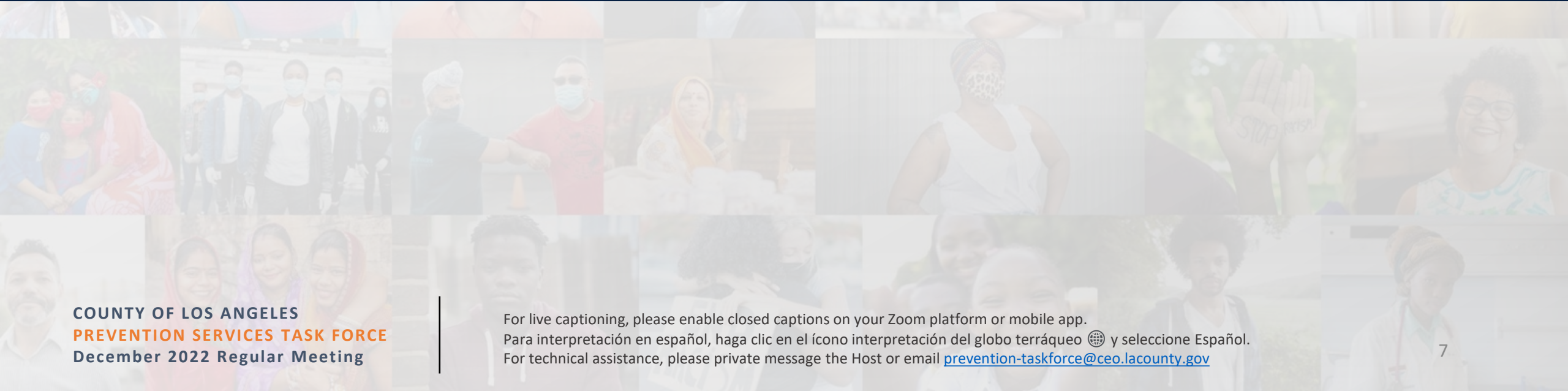


Land Acknowledgement



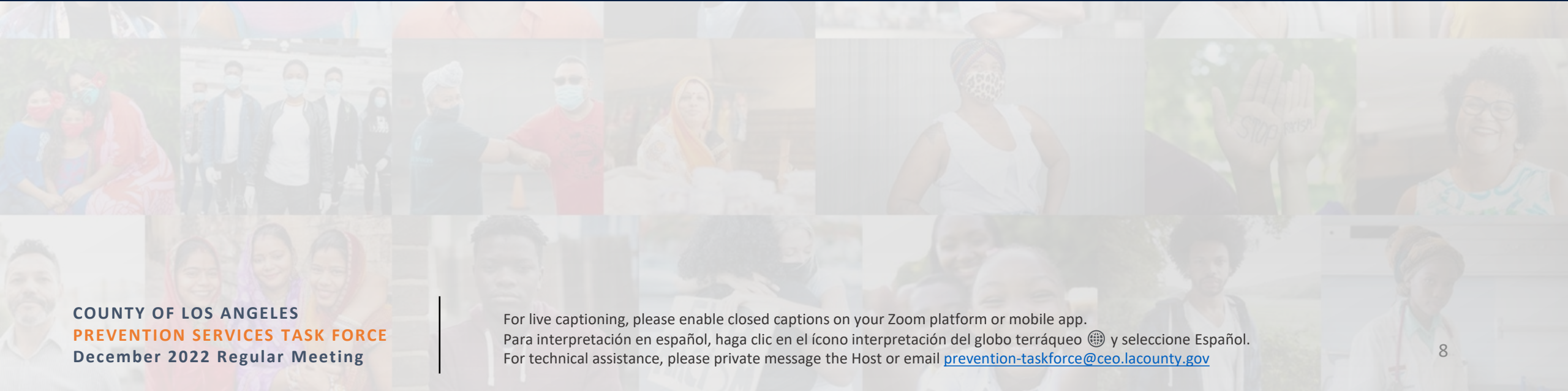
ITEM 3

WELCOME





ITEM 4 ROLL CALL



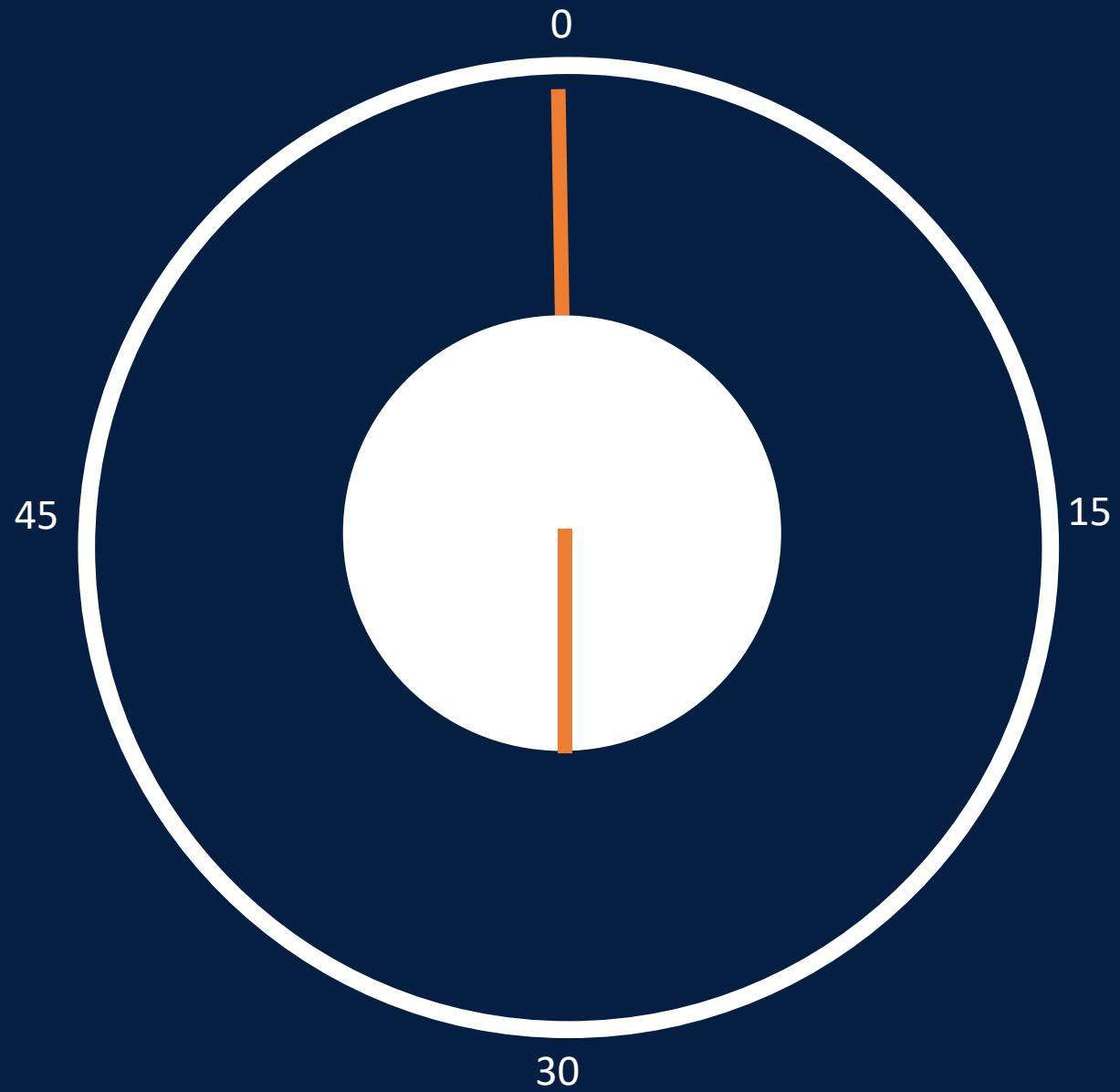


ITEM 5 **Public Comment**

To address the Task Force and provide public comment on **today's agenda items**, please use the *raise hand* feature on Zoom. Use the same feature to lower your hand after your comments.

If you are calling in by phone, dial *9 on the phone's dial pad to raise your hand. Dial *9 again to lower your hand. Dial *6 to unmute when told.

Each speaker is allowed up to 90 seconds. Public comment on other Task Force-related subject matters is scheduled for the end of the meeting.





ITEMS 6,7

Review and take appropriate action on the Minutes of the Prevention Services Task Force Meetings on October 28 and November 4



ITEM 8

Review, discussion, and consideration of necessary actions regarding Board recommendations and Task Force next steps.

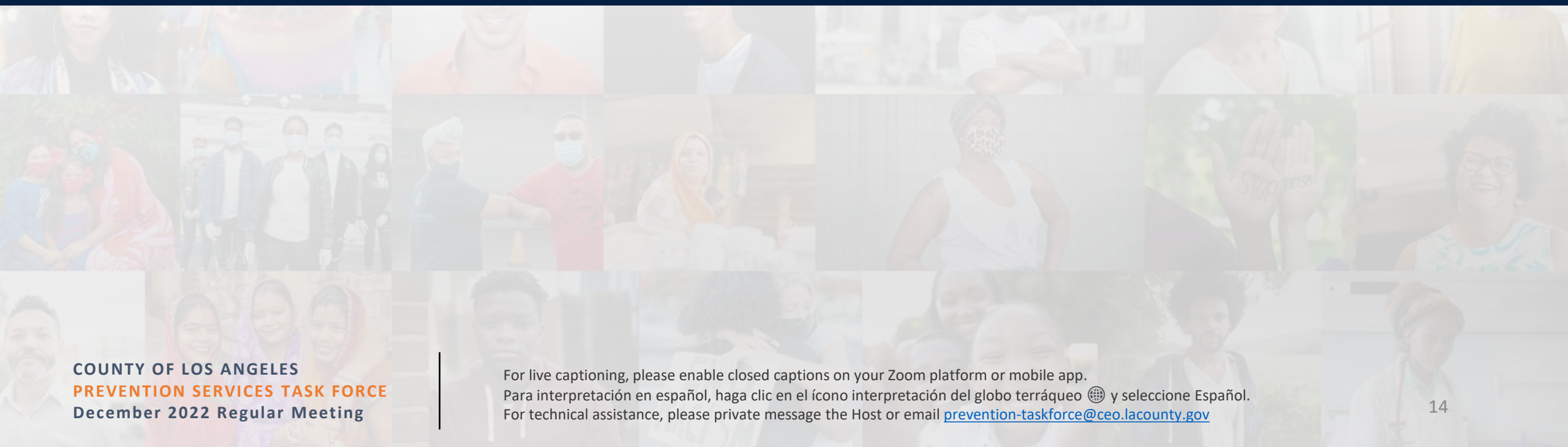


ITEM 8

Review, discussion, and consideration of necessary actions regarding Board recommendations and Task Force next steps.



TASK FORCE – YEAR IN REVIEW



BOARD DIRECTIVES

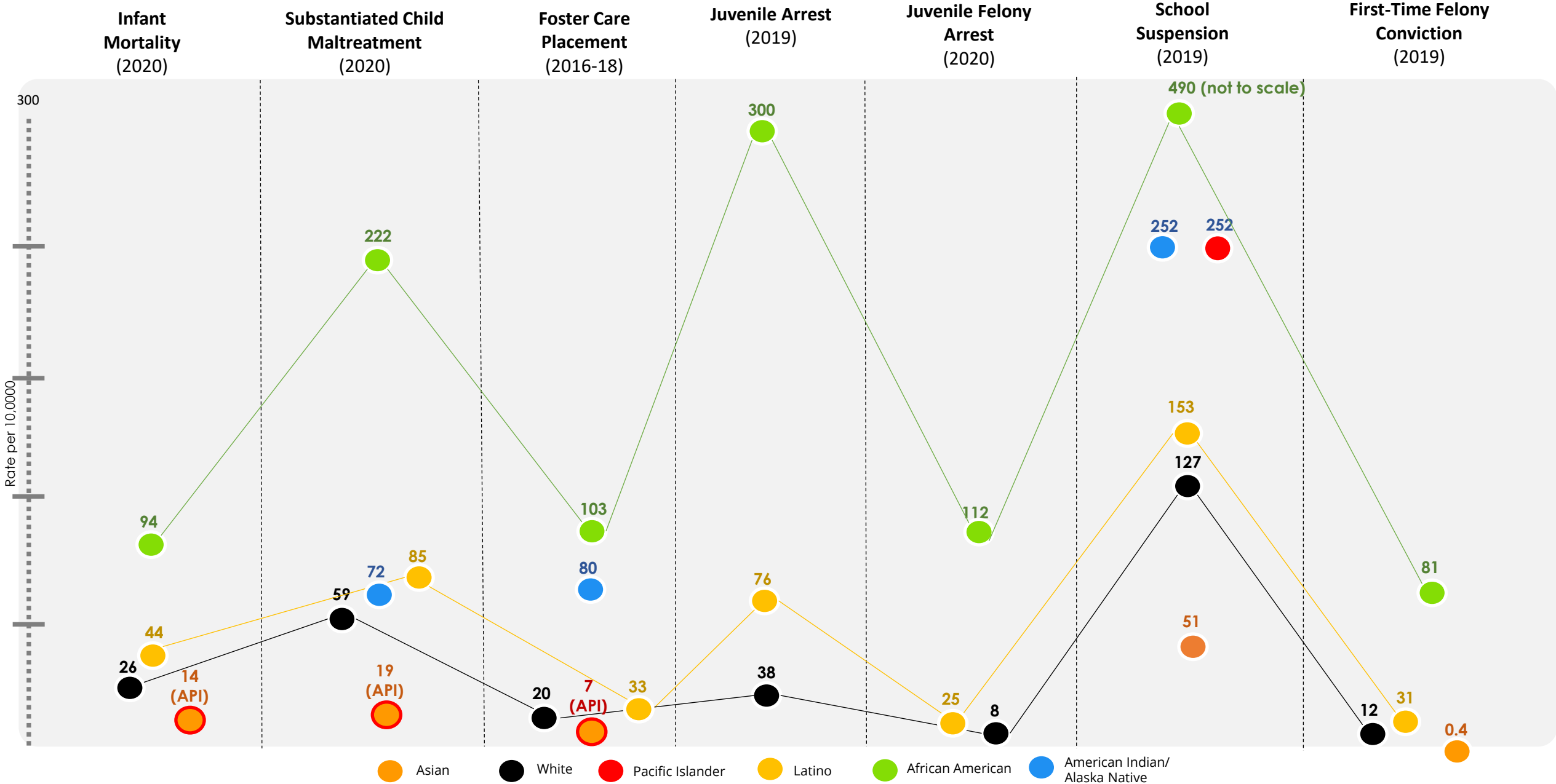
Governance
Structure and
Coordinated
Service Delivery

Funding Streams
Analysis

Community-Based
Service Delivery

Prevention Metrics
and Data
Integration

PREVENTION OUTCOMES



Prevention & Promotion in the County of Los Angeles Today

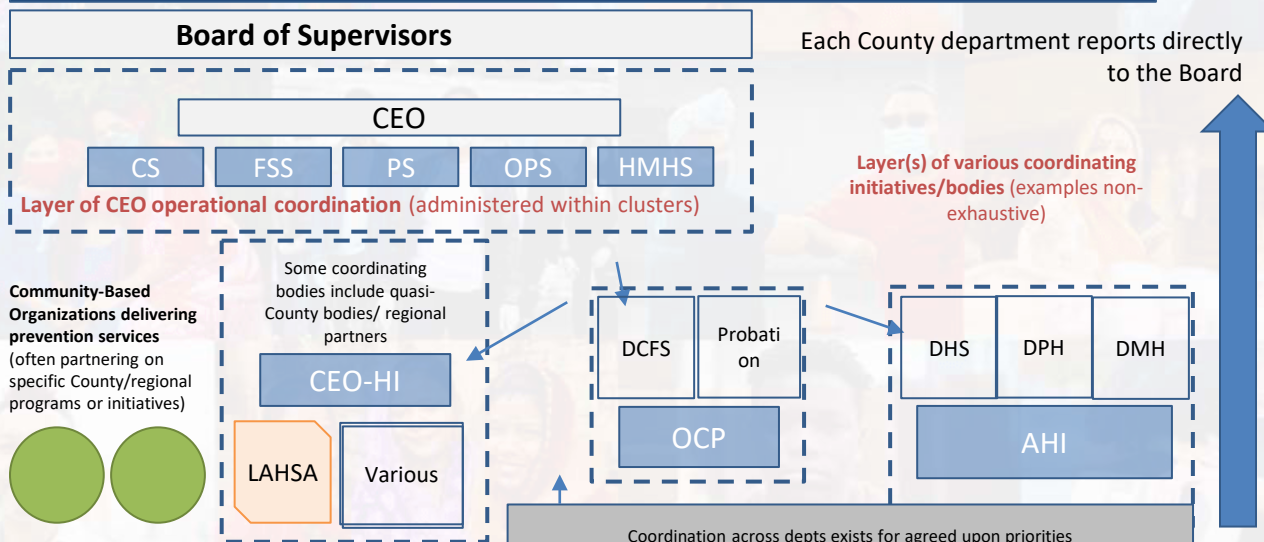
Problem Analysis: Challenges and Opportunities for Improvement

- **Structural barriers in existing systems** preventing a collaborative culture where there is shared accountability and coordination can be most effective (e.g., bureaucratic hurdles, lack of dedicated staff time and funding for coordination, ad hoc efforts not supported at scale)
- Lack of capacity across systems in **data sharing and integration** to better serve clients
- **User navigation barriers** hindering folks from accessing the array of services available to them
- **Racial disproportionality** and disparities across various population subgroups.
- The **lack of integration and coordination** across the many existing prevention efforts **hinders the County from addressing longstanding disparate outcomes** based on the social determinants of health
- **The County lacks certain tools and capabilities needed to improve coordination:** These include technological tools (e.g., improved budgeting platform, integrated data tools) and in-house staff resources (e.g., dedicated staff to analyze multi departmental funding opportunities and plan for strategic funding sustainability)

Current Strengths

- **Values and commitment:** Many departments agree we must deepen investment in upstream prevention and promotion with the support of increased community partnership, an anti-racist lens, and equitable decision making.
- **Collaborative action and strong working relationships within discrete service areas:** Existing bodies have significantly improved coordinated delivery for specific populations (e.g., OCP, AHI, justice impacted populations, homeless populations) through a variety of project-specific and relationship-oriented tools.
- **Community expertise, enthusiasm, and interest:** LA County’s residents, community-based organizations, and philanthropic partners hold a wealth of knowledge, resources, and capabilities that the County has yet to fully integrate into our efforts.

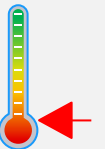
Current Org. Structure for Prevention & Promotion (not comprehensive)



Overall Characteristics

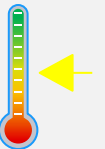
Clarity of roles, responsibility, and authority

- **Unclear, despite (and due to) various layers of reporting:** Some departments and coordinating initiatives have clear directives, but that leaves a number of “floating” and underaddressed concerns, especially across departments



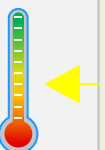
Ease of operational implementation

- **“Strong within but weak across”:** Individual departments may be able to implement their own initiatives, but multi-departmental may resources for coordination and collaboration



Community driven priority setting and service delivery

- **Inconsistency and underutilization:** Specific departments may have made inroads to partner with community but may face contracting and administrative barriers; CBOs & philanthropy have expertise and resources that the County could more fully leveraging.



This Task Force was convened to recommend **governance changes** that will lead to an improvement in the **livelihoods and wellbeing** of people in Los Angeles County:

A coordinated and comprehensive prevention and promotion system is grounded in community needs first

- ▶ **Governance** of this vision **needs to center the lived experiences** of those interacting with prevention systems and support a move towards promotion
- ▶ We should all be **challenging our current understanding of “what works”** across departmental silos



This need to look across siloes has been underscored by the Board and community members

From the 2021 CEO Report on Reimagining Safety Health and Human Services for the County’s Children and Families:

- ▶ The **lack of integration and coordination** across the many existing prevention efforts **hinders the County from addressing longstanding disparate outcomes** based on the social determinants of health

From the August Community Survey:

- ▶ Over 800 residents, employees, and service providers indicated that **stronger coordination across agencies is a top priority**
- ▶ Residents listed **holistic services** as a top priority in our community survey



There is an imperative to “do things differently”

- ▶ LA County’s current efforts operate in a distributed fashion
- ▶ More coordination will necessitate **clarified responsibilities and clear leadership on key functions** to enable coordination
- ▶ **We must find a way to learn from prior coordination efforts to meet the needs of our community**

OUR CHARGE

Recommendations to effectuate comprehensive community-based prevention services delivery system across relevant County departments and regional partners

Prevention Services Task Force:
Strengthening Prevention and Promotion
Across Los Angeles County

Connecting domains and service areas



Coordinating across County departments, initiatives, and regional partners

- Mental Health
- Public Social Services
- Public Health
- Office of Education
- Health Services
- Commission for Children and Families

- Economic Opportunity
- Development Authority
- Office of Child Protection
- Justice, Care, and Opportunities
- Poverty Alleviation Initiative
- Homeless Initiative
- Anti-Racism, Diversity, & Inclusion

- Initiative
- Homeless Services Authority
 - Youth Commission
 - Aging and Disabilities
 - First5LA

***In partnership with
community-based
organizations and
residents***

WHAT THIS WORK WILL ENABLE THE BOARD TO DO

- Predict and provide support and resources early enough to prevent long-term negative outcomes and promote positive outcomes
- Improve the measurement of outcomes utilizing a collaborative approach
- Predict and support our ability to achieve positive long-term outcomes through early support and resources
- Identify the drivers of racial gaps and target efforts to close them
- Identify those who are involved in multiple systems and compounded risk and provide them with elevated, multifaceted support and resources
- Evaluate the effectiveness of the supports and resources we provide

GOVERNANCE STRUCTURE & COORDINATED SERVICE DELIVERY

Developing a Shared Vision, Countywide Model, and Guiding Principles for Prevention and Promotion

Framework Table

Co-chairs: Meredith Berkson (LAHSA), Angela Parks-Pyles (DCFS)

LA County delivers an **equitable, community-driven, and holistic** prevention and promotion model to enable a safer, stronger, thriving, and more connected community.

Equitable: addressing root causes that lead to inequitable life outcomes

Community-driven: sharing decision-making and co-creating solutions in partnership with community members, with particular emphasis on lived expertise and marginalized communities

Holistic: breaking down silos to provide a continuum of support and ensure everyone thrives across every stage of life

LA County's Model for Prevention and Promotion

Social Conditions

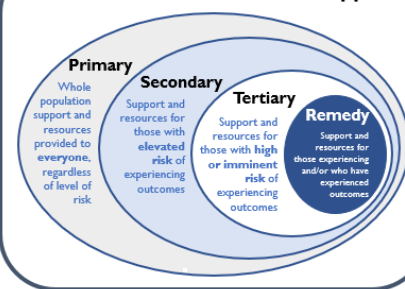
The intersecting structures and systems that shape our lives and influence our likelihood of experiencing positive and negative outcomes (i.e., level of risk).

These conditions are often created by and/or reinforced through government policy, resulting in both positive resources (e.g., public health, parks) and negative forms of harm and control (e.g., racism, ableism, concentrated poverty, environmental hazards, etc.).

Equitable Decision-Making & Community Agency

Policies and practices to ensure community voices (especially those with lived expertise) inform and shape how we deliver support and resources, especially to historically marginalized communities.

Levels of Risk & Prioritized Support



Prevention

Support and resources to stop the occurrence and/or worsening of negative population outcomes, harm, and suffering.

Promotion

Support and resources to strengthen the occurrence of positive population outcomes, well-being, and thriving.

Prevention and promotion can decrease individuals' level of risk, as can addressing and mitigating harmful social conditions through equitable decision-making and community agency. Together, this can cultivate healing, restoration, and justice.

GOVERNANCE STRUCTURE & COORDINATED SERVICE DELIVERY

Addressing Operational Barriers to Coordinated Delivery

Coordination Table
Co-chairs: Minsun Meeker (OCP), Laura Trejo (Aging)

Identifying Necessary Coordinating Functions to Inform Governance Structure Formation

Framework Table and
Coordination Table

Structural barriers in existing systems

User navigation barriers

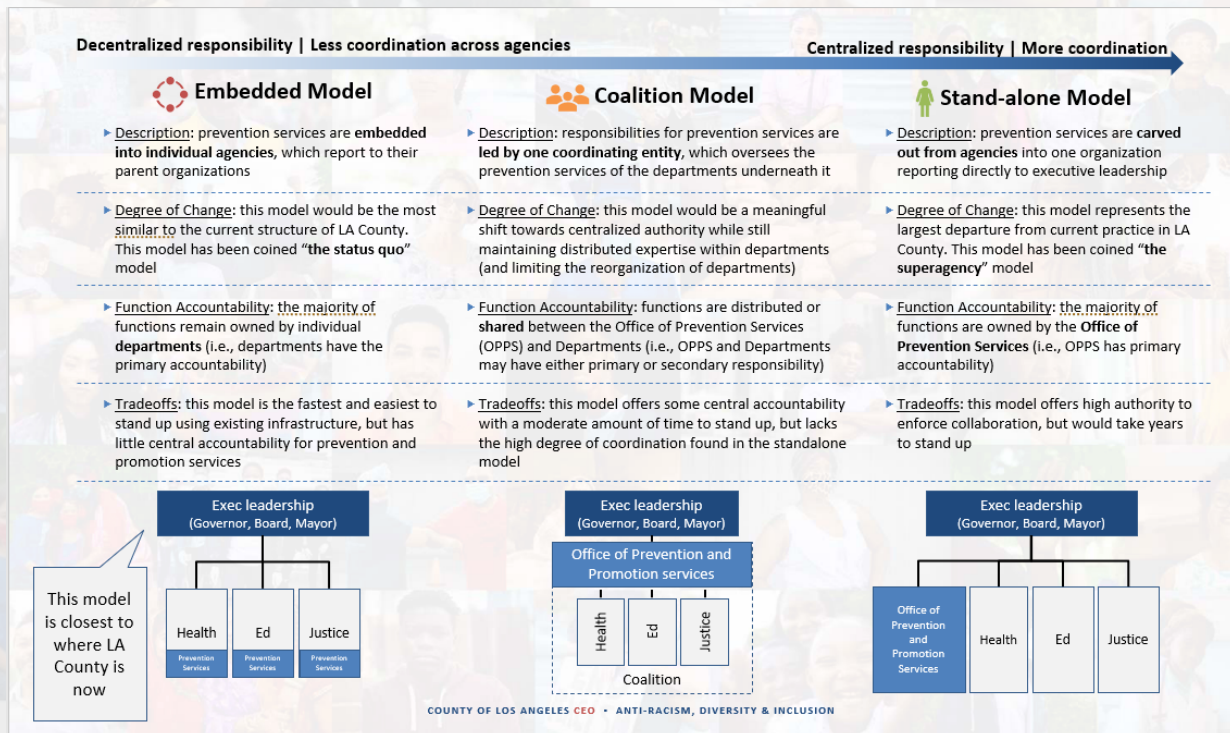
Data sharing and integration capacities

Coordination tools and capabilities

- Coordination, Collaboration & Communication
- Policy and Agenda Setting
- Programming Decisions
- Budgeting
- Funding Acquisition & Management
- Contracting
- Legal
- Staffing for Coordination
- Service Delivery
- Co-Creating Solutions with Community
- Partnering with Community Organizations
- Data Tracking/Metrics
- IT Systems

GOVERNANCE STRUCTURE & COORDINATED SERVICE DELIVERY

Conceptualizing a Coordination and Collaboration Strategy



Centralized goal with decentralized implementation

Function accountability

High-level prevention data sharing

Strategic budget and funding analyses

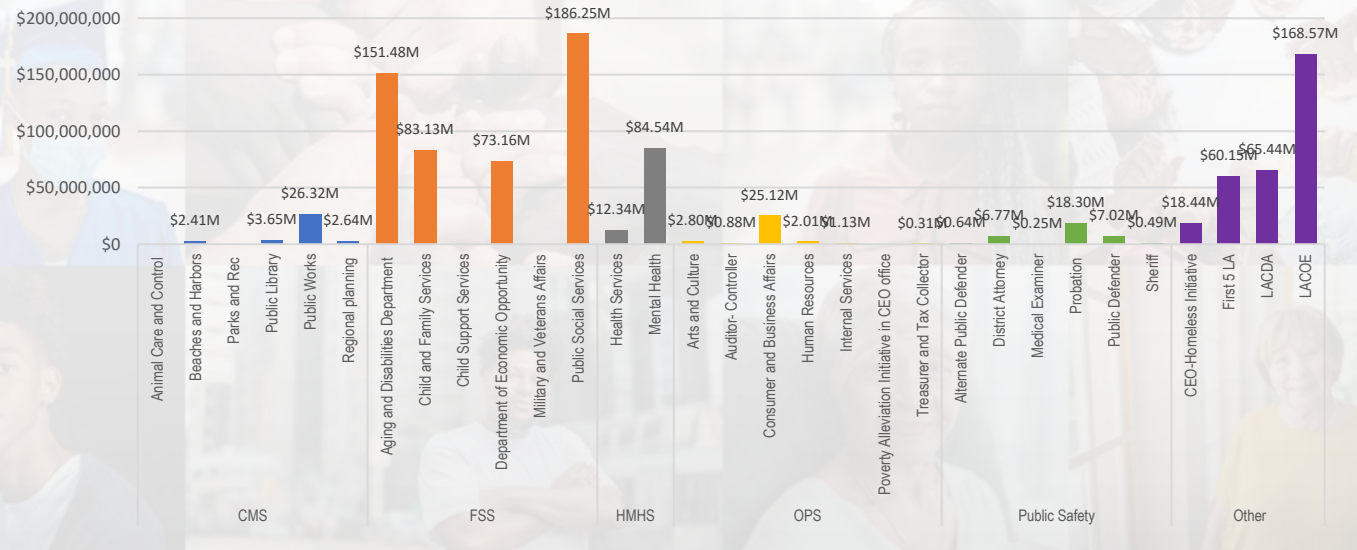
Ease of operational implementation

FUNDING STREAMS ANALYSIS

Compiling a Program Inventory and Reviewing Funding Streams

Identifying Barriers to Budget Coordination and Strategic Funding Sustainability

SELF-REPORTED PREVENTION BUDGET, FY 2022-23 FINAL CHANGES BUDGET BY ORGANIZATION
 DPH (\$1.36B) comprises 57% of reported County prevention funding and was removed for readability



Data and information limitations

Challenges with funding streams expertise

Contracting and other bureaucratic processes slow down collaboration

COMMUNITY-BASED SERVICE DELIVERY

Beginning a Community Engagement Process and User Journey Mapping

Participatory Decision Making and Power Sharing

- Community Member Positions on Subject Area Tables (with stipends for participation and power sharing practices)
- Community-Based Organizations on Subject Area Tables

Gathering Community-Defined Evidence with Priority Populations

- Focus Groups and User Journey Mapping with Priority Populations
- Community Member Panels and Guest Speakers
- Personal Stories, and Documented Testimonial

Inclusion, Access, and Communication

- Transparency, Digital Access, and Language Access
- Targeted Outreach and Communications

Community Consultation and Alignment

- Task Force Community Survey
- Sessions hosted by Task Force and partnered community-based organizations during key review periods

Addressing Operational Barriers to Community-Based Delivery

Coordination Table and Framework Table

User Navigation Barriers

Lack of Services Tailored to Client Needs

Distrust of and/or hesitancy to engage with government systems

Racial disproportionality

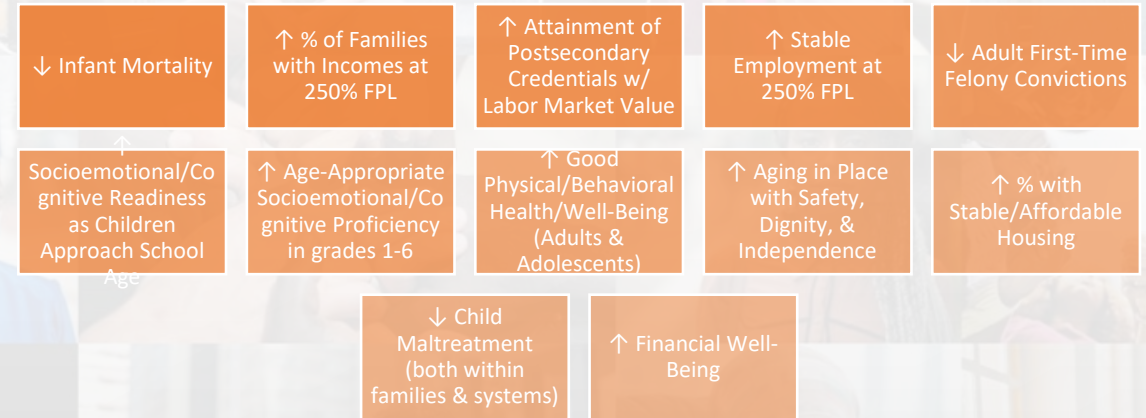
Lack of integration and coordination

Ad hoc approach to community partnerships

PREVENTION METRICS AND DATA INTEGRATION

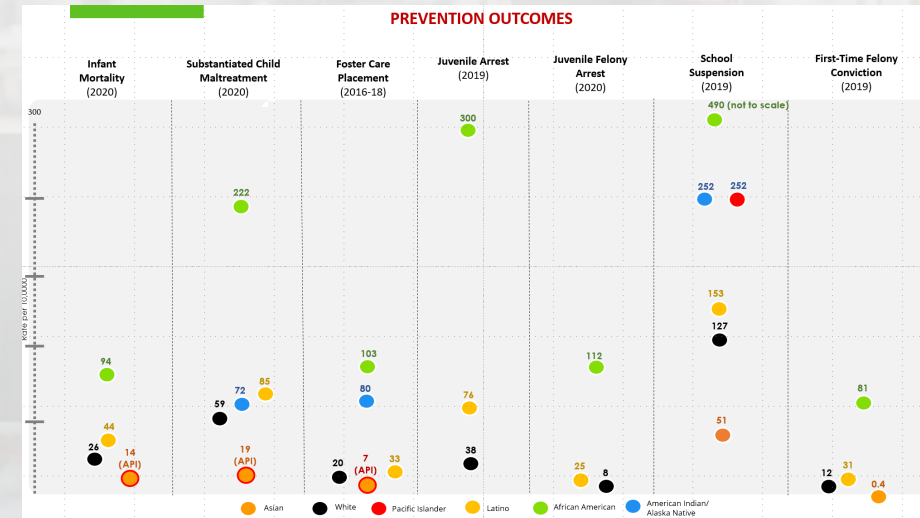
Developing Priority Life Course Outcomes and Guiding Prevention Metrics

Disproportionality Table
 Co-chairs: Tamara Hunter (CCF), Irene Vidyanti (CIO)



Examining and Addressing Racial Disproportionality in Our Systems

Exploring Data Systems and Integration





REVIEWING RECOMMENDATIONS

To review the text of the full recommendations, please see the [Updated Recommendations document](#) that includes current status and track changes from 11/4 meeting (will be pasted in chat)

PROCESS FOR REVIEWING RECOMMENDATIONS

There are three buckets of recommendations:

- **Low consensus (Completed)**
- **Moderate consensus**
- **Strong consensus**

We will review recommendations today in the order above and we will ask for your vote on those recommendations. All recommendations will be provided to the Board in the report back with the status decided upon before the report deadline.

Each of you have been provided each other's verbatim comments, so you can reference one another's feedback as you consider moving forward on these recommendations.

RECOMMENDATION FORMS

Task Force

- Received (15): Aging, CCF, CEO-HI, CEO-PAI, CM w/ LE (Bridges), DCFS, DEO, DHS, DMH, DPH, DPSS, First5LA, LACDA, OCP, LACOE
- Awaiting (4): CEO-ATI/JCOD, UCLA Pritzker Center, Youth Commission, LAHSA

Additional feedback was received from Table members.

To review the text of the full recommendations, please see the [Updated Recommendations document](#) that includes current status and track changes from 11/4 meeting (will be pasted in chat)

LEGEND/CODING FOR UPCOMING SLIDES

Support	<i>Corresponds to "Support"</i>
Support w/ Revisions	<i>Corresponds to "Support with suggested revisions"</i>
	<i>Did not provide response, Did not check a box, Abstain, etc.</i>

“Requires Additional Consideration” responses included comments ranging from requiring few revisions to requiring significant input

Types of Considerations Raised (non-exhaustive)

Requires Additional Consideration (RAC)	<ul style="list-style-type: none"> Member expressed support for the general idea of the recommendation with revisions or questions about specifics Member was supportive of the concept but wanted to evaluate the appropriate entity to lead on the specific recommendation Member requested additional clarifying information Member requested additional deliberation before moving forward Member described both the value of the recommendation as well as challenges within the same comments Member undecided about the recommendation Member requested reconsideration of the recommendation
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FORM A – TASK FORCE RESPONSES

		1	2	3	10	11	12	13	14	15	16	17	18	19
Name	DEPT	Vision	Model	GPs	CEP	UJM	InfoHub	CMLEs	Lang	CBO Str	CBO Shi	LCOs	Metrics	Datalnt
Aging & Disabilities	Aging	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support w/ Revisions	Support	Support
Children & Families Comm.	CCF	Support	Support w/ Revisions	Support	Support w/ Revisions	Support	Support	Support	Support	Support w/ Revisions	Support	RAC	RAC	Support
CEO-Homeless Initiative	CEO-HI	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support
CEO-Poverty Alleviation Initiative	CEO-PAI	Support	RAC	Support w/ Revisions	Support	Support	Support	RAC	RAC	RAC	RAC	RAC	Support	RAC
CM w/LE (Bridges)	CMLE	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support
Children & Family Services	DCFS	RAC	RAC	RAC	RAC	RAC	Support w/ Revisions	Support	Support	Support w/ Revisions	Support w/ Revisions	RAC	RAC	Support w/ Revisions
Economic Opportunity	DEO	Support	Support w/ Revisions	Support	Support	Support		Support w/ Revisions	Support	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	Support	Support
Health Services	DHS	RAC	RAC	RAC	RAC	RAC	Support w/ Revisions	Support w/ Revisions	RAC	RAC	RAC	RAC	RAC	RAC
Mental Health	DMH	Support	Support	Support	RAC	RAC	Support	RAC	RAC	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	RAC	Support w/ Revisions
Public Health	DPH	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC
Public Social Services	DPSS	Support	Support	Support	Support	Support	RAC	Support	Support	Support	Support	Support w/ Revisions	Support w/ Revisions	RAC
First5LA	First5LA	Support	Support	Support	Support	Support	Support	Support	Support	Support w/ Revisions	Support w/ Revisions	Support		
Development Authority	LACDA	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support	Support
Office of Education	LACOE	Support	Support	Support	Support	Support w/ Revisions	Support	Support	Support	Support	Support	Support	Support	Support
Office of Child Protection	OCP	RAC	RAC	RAC	RAC	RAC	Support w/ Revisions	Support w/ Revisions	Support	RAC	RAC	RAC		Support w/ Revisions
CONSENSUS CATEGORY		Strong consensus	Moderate consensus	Strong consensus	Removed - Already Have Existing Authority	Removed - Already Have Existing Authority	Strong consensus	Strong consensus	Removed - Already Have Existing Authority	Removed - Already Have Existing Authority	Strong consensus	Moderate consensus	Removed - Already Have Existing Authority	Strong consensus

FORM B – TASK FORCE RESPONSES

		4	4a	4b	4c	5	6	7	8	9
Name	DEPT	PPIT	Policy	Regs	Navig	SOCILT	BudCaps	Inven	Off-Cy	IFPilots
Aging & Disabilities	Aging	RAC	RAC	RAC	RAC	RAC	RAC	Support	Support	Support
Children & Families Comm.	CCF	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	Support	Support	Support	Support
CEO-Homeless Initiative	CEO-HI	Support	Support	Support	Support	RAC	Support	Support	RAC	Support
CEO-Poverty Alleviation Initiative	CEO-PAI	RAC	RAC	RAC	RAC	RAC	Support w/ Revisions	RAC	RAC	RAC
CM w/LE (Bridges)	CMLE	Support	Support	Support	Support	Support	Support	Support	Support	RAC
Children & Family Services	DCFS	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC
Economic Opportunity	DEO	RAC	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions	RAC	RAC	Support w/ Revisions	Support w/ Revisions
Health Services	DHS	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC
Mental Health	DMH	RAC	RAC	Support	RAC	RAC	RAC	RAC	RAC	RAC
Public Health	DPH	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC
Public Social Services	DPSS	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC
First5LA	First5LA									
Development Authority	LACDA	Support	Support	Support	Support	Support	Support	Support	Support	Support
Office of Education	LACOE	Support	Support	Support	Support	Support	Support	Support	Support	Support
Office of Child Protection	OCP	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC	RAC
CONSENSUS CATEGORY		Lower consensus	Lower consensus	Moderate consensus	Lower consensus	Lower consensus	Lower consensus	Removed - Already Have Existing Authority	Lower consensus	Lower consensus

RECS ACROSS CONSENSUS CATEGORIES

To review the text of the full recommendations, please see the [Updated Recommendations document](#) that includes current status and track changes from 11/4 meeting (will be pasted in chat)

MODERATE CONSENSUS

		2	17	4b
Name	DEPT	Model	LCOs	Regs
Aging & Disabilities	Aging	Support	Support w/ Revisions	RAC
Children & Families Comm.	CCF	Support w/ Revisions	RAC	Support w/ Revisions
CEO-Homeless Initiative	CEO-HI	Support	Support	Support
CEO-Poverty Alleviation Initiative	CEO-PAI	RAC	RAC	RAC
CM w/LE (Bridges)	CMLE	Support	Support	Support
Children & Family Services	DCFS	RAC	RAC	RAC
Economic Opportunity	DEO	Support w/ Revisions	Support w/ Revisions	Support w/ Revisions
Health Services	DHS	RAC	RAC	RAC
Mental Health	DMH	Support	Support w/ Revisions	Support
Public Health	DPH	RAC	RAC	RAC
Public Social Services	DPSS	Support	Support w/ Revisions	RAC
First5LA	First5LA	Support	Support	
Development Authority	LACDA	Support	Support	Support
Office of Education	LACOE	Support	Support	Support
Office of Child Protection	OCP	RAC	RAC	RAC
CONSENSUS CATEGORY		Moderate consensus	Moderate consensus	Moderate consensus

PPIT: An Implementation Team to Support Immediate Operational Needs

What is the Prevention and Promotion Implementation Team (PPIT)?

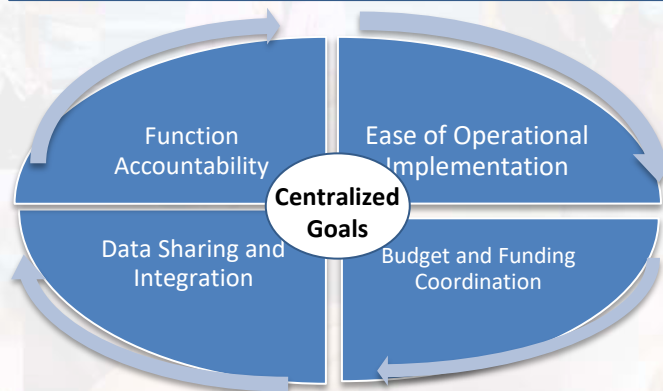
An action-oriented implementation team consisting of high-level leaders and subject matter experts (SMEs) with backbone support to **effectuate operational priorities of the Task Force**. The team will guide, support, and/or implement several of action-oriented recommendations listed in the report with an **initial focus on immediate operational needs** to support better coordination *across County systems including:*

- **Centralized goals with decentralized implementation:** The PPIT provides consistent goals, measures outcomes, and reports externally on prevention with a single voice
- **Function Accountability:** functions are distributed or **shared** between the PPIT and Departments (i.e., PPIT and Departments may have either primary or secondary responsibility)
- **High prevention data sharing:** Help support CIO and department's ability to share data and implement data agreements across other organizations. Identifying and monitoring key metrics that track progress made towards the successful outcomes for both prevention and promotion services
- **Strategic Budget and Funding Analyses:** Strengthen the County's capabilities to conduct multi-departmental budget coordination and strategy through **identification of investment gaps, increased prevention and promotion investment, and opportunities for funding sustainability**. Regular meetings are held to review data and determine funding and service planning.
- **Ease of Operational Implementation:** Liaise with existing Countywide initiative leads and elevate departmental best practices. Help identify urgent and emergent needs to better triage challenges so families can connect to services more effectively by increasing coordination with partners

Department of Public Health

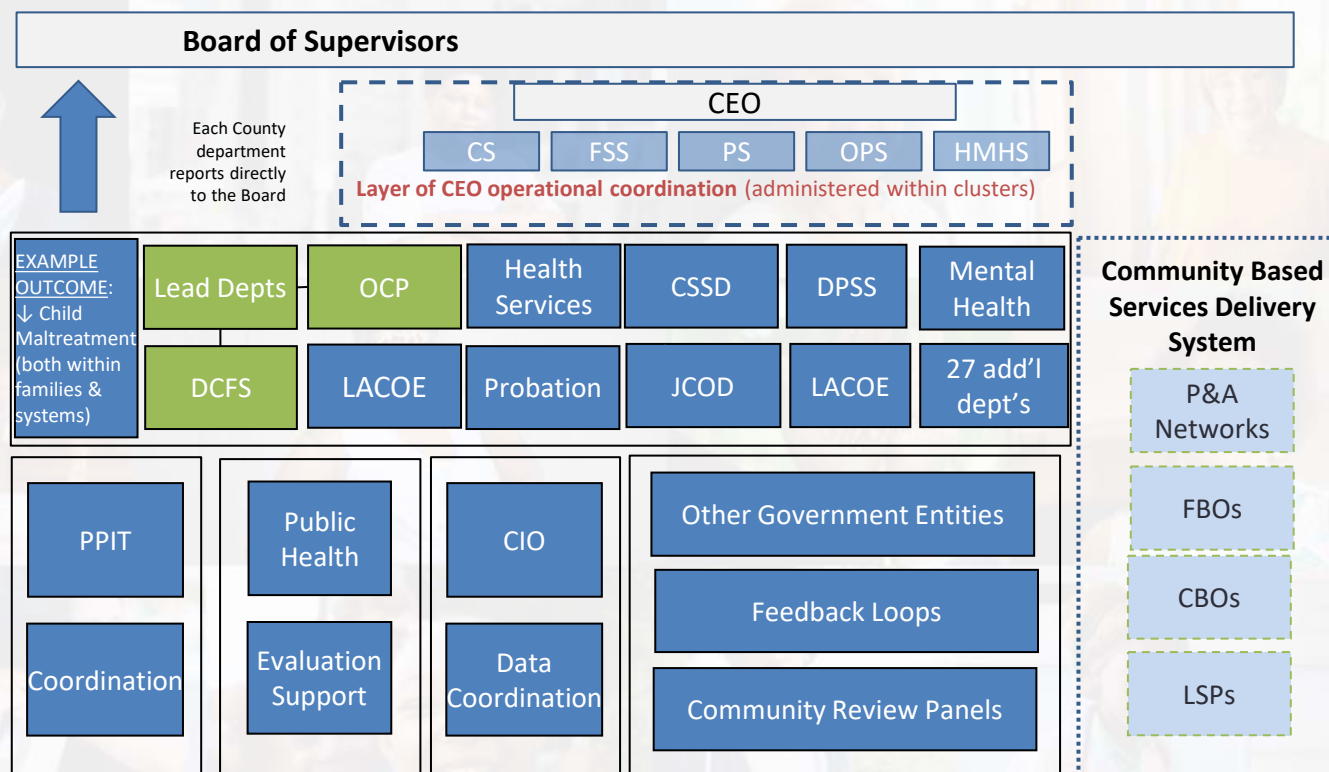
- **Assessment and Evaluation:** Refine and advance the guiding prevention metrics and outcome measures to align with Countywide governance, including additional community engagement and analyses to address disproportionality; consolidate, share, and help departments/initiatives implement best practices from their peers in other service areas.

What is the PPIT's organizational design?



Importantly, departments require dedicated staff and resources to work with PPIT staff and facilitate coordination with other departments

LA County's Org. Structure with PPIT



Prevention & Promotion in the County of Los Angeles with PPIT

Addressing the Challenges

- **Filling in service gaps and sharing best practices:** There is an opportunity for PPIT to compile, share, and help implement best practices currently occurring across many of our existing coordinating initiatives and apply them to other departments and service areas currently disconnected from the County's strongest prevention efforts.
- **Respond to under addressed needs of priority populations:** PPIT (and the Task Force/ARDI) can also lead User Journey Mapping to address the needs of priority populations that may currently be underserved because they do not cleanly fit under the purview of a specific department and/or because no coordinating initiative exists to address this population's holistic needs. (E.g., while DCFS and Aging may have conducted holistic needs assessments on children/families and older adults, respectively, many other populations may not be served with the same holistic analyses or user navigation assistance).
- **Track progress toward outcomes:** PPIT can help identify funding gaps to make recommendations to the board and assess progress toward achieving prevention goals and outcomes. This will support risk sharing, resource pooling, outcome monitoring, staff training, and collaboration implementation.
- **Ensure the County has the tools and capabilities needed to improve coordination:** PPIT can help shepherd implementation and roll out of key technological tools (e.g., improved budgeting platform, integrated data tools) and develop out in-house staff resources (e.g., dedicated staff to analyze multi-departmental funding opportunities and plan for long-term funding sustainability). This can lead to a system to bring together disconnected datasets for better provision of services.

Building on Strengths

- **Helps the County apply our values and commitment:** Equipped with the Board's vision and model for prevention and promotion, PPIT can help oversee the socialization and wide dissemination of a common language for prevention & promotion to contextualize our work
- **Builds on collaborative action and strong working relationships:** Assists in sharing out the best practices existing coordinating bodies have already developed, while also carrying forward initiatives that require dedicated staffing and clear responsibilities
- **Connecting community expertise, enthusiasm, and interest to our work:** Implementing immediate strategies and developing a longer-term plan to ensure that we are truly providing a community-based prevention and promotion delivery system.

Overall Characteristics

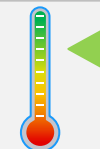
Clarity of roles, responsibility, and authority

- **Fills in the gaps and takes on unmet needs:** Addresses several "floating" and under addressed concerns, providing the necessary staffing (and additional capabilities) to do so.



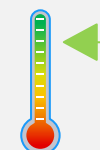
Ease of operational implementation

- **Taking on key operational needs:** As an action team, can focus on carrying forth a clear set of recommendations from the Task Force necessary for the County to better coordinate across all prevention and promotion departments



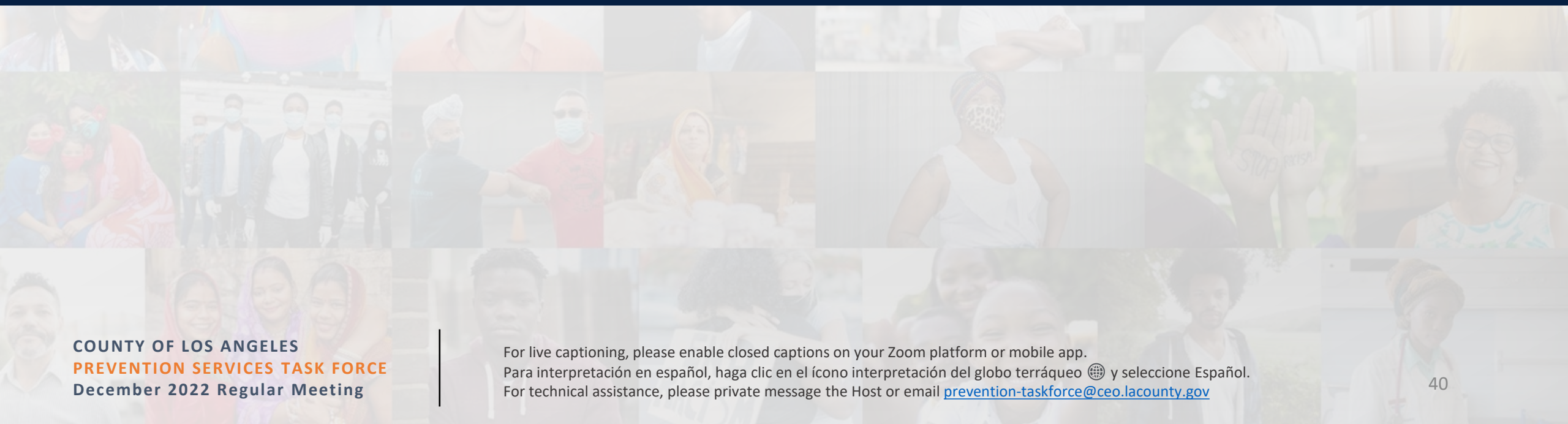
Spectrum of community partnership

- **Reaffirming the County's commitment:** PPIT will effectuate standardized practices, funding, and strategic development of several community-centric recommendations from the Task Force, helping ensure the County fully leverages the wealth of knowledge, expertise, and resources in our region to support prevention and promotion





DISCUSSION/Q&A



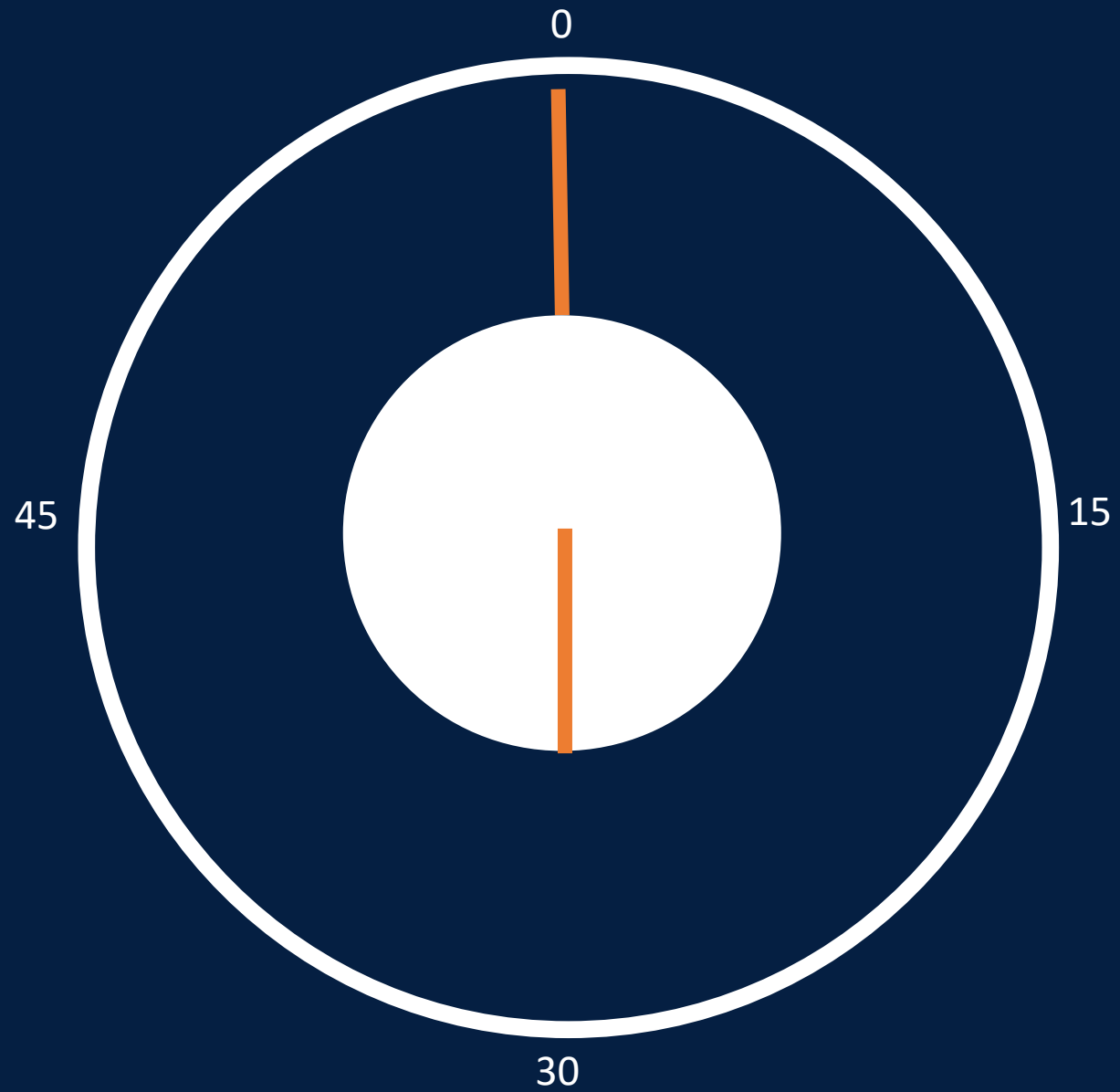


ITEM 8 **Public Comment**

To address the Task Force and provide public comment on **Task Force-related subject matters**, please use the *raise hand* feature. Use the same feature to lower your after your comments.

If you are calling in by phone, dial *9 on the phone's dial pad to raise your hand. Dial *9 again to lower your hand.

Each speaker is allowed up to 90 seconds.





ITEM 9 ADJOURNMENT

Upcoming meeting dates (all Fridays at 9am)

- January 27
- February 24
- March 31
- April 28
- June 2
- June 30