

Leadership Strategy Session

May 28, 2008

Mark Twain St. Joseph's Hospital

MEETING SUMMARY

ATTENDEES:

John Brophy, Calaveras County Office of Education
Jeanne Boyce, Calaveras County Health Services Department
Rita Downs, Calaveras County Behavioral Health Services
Karen Glaze, Mother Lode Job Training
Kelly Graesch, Human Resources Council, Inc.
Tim Johnson, Community Covenant Church
Michael Krietich, Calaveras County Probation Department
Karen Pekarcik, First 5 Calaveras
Mary Sawicki, Calaveras Works & Human Services
Tyler Summersett, Calaveras Council of Governments
Nancy Tiffany, Human Resources Council, Head Start-State Preschool
Billie Westernoff, Human Resources Council, Food Bank

WELCOME

M. Krietich shared a brief history of Our Children, Our Community (OCOC) activities since its inception in 2003. The latest effort of participants in OCOC has been to develop language that supports children's needs and can be incorporated into the Calaveras County General Plan revision. This focus resulted from input from over 100 people who attended the Children's Summit in 2006. A draft Children's Element is nearly completed, and should be available for review soon.

M. Krietich also noted that OCOC appears to have evolved to being a mission to implement the *Ten Year Master Plan for Calaveras County Children and Youth*. The goal of today's Leadership Strategy Summit is intended to bring decision-makers together to reflect on where progress has been made in the strategic focus areas within the Master Plan. We will also identify challenges, opportunities service integration, and strategies for meeting local needs resulting from the state's current fiscal crisis.

MASTER PLAN FOR CHILDREN GOALS AND GENERAL PLAN CHILDREN'S ELEMENT UPDATE

Noteworthy outcomes of OCOC activities and the *Master Plan* include:

- OCOC has gotten people to think systemically,
- OCOC's vision of the future was on target, and has been validated through other focus group vision statements following development of the *Master Plan*.
- A Park & Recreation Commission has been established
- Community Plans and General Plan efforts increasingly include child related issues and topics for consideration. An example is the development of Child Care Facilities as a topic for inclusion in General Plan elements

- Emerging Economic Development conversations are demonstrating inclusion of social capital and child related concerns
- People know currently what areas aren't working well, and how they want things to work. We can get their ideas and can help them get the language they need to make work. (Example: COG uses input to support design of the circulation element)

A consultant is drafting a Children's Element. Once the element language is available, the group will likely re-convene and consider next steps for introducing the element to a wider audience for input and development of implementation language. The Children's Element concept will be shared with groups and organizations that are involved with children. We may have success taking the concept to individuals and groups where they are—through outstations, at events, in meetings, etc.

ECONOMIC IMPACTS & PLANNING

The fiscal crisis impacts to our community, children and families, and are already being felt. They could become quite challenging. Using the analogy of how each of us “see the elephant” from different perspectives and influences, the group began sharing how they see impacts of fiscal crisis affecting the families they serve, and together brainstormed ideas for support.

Consensus was that priorities for next couple of years should be:

- Food
- Shelter
- Medical Care /Care
- Love (attachment)

Concerns reflected the view that hard times are here, and are going to get worse, probably harder than recessions and down times that we've seen before. Experience shows that when people don't have the basics, they'll do negative things to get their needs met. We should learn from past experiences; several participants recalled previous recession cycles of boom-bust-adapt.

Specific concerns/brainstorming noted:

- We see people now who are already downtrodden. We're facing people who have never had to use these resources, and face the stigma of having to ask for help. How do we reach out to them and get them the resources they need?
 - Outstations appear to already be a great resource/connection. People are in their own neighborhood and do not seem to feel the stigma of going to “government” for help.
 - Outstations are a great example of small cost-big benefit (\$7000/year so far); people are using them and they're turning out to be quite cost effective.
- Food Bank has seen a 64% increase in past year. This does not include people going to mobile or church pantries which also are seeing more people.
- Food bank – seeing more people; emotional impact to new families as they seek help;
- Increase in food need; decrease in donations; new face of hunger
 - New food bank was anticipated – as it's built, we'll be able to accept different types/more donations (cash and food); we can get friends/neighbors ready to support the need

- We can get families to tell the community what they need/what works so that we can design access and services to meet new needs, for instance, one family that rode the bus to the food bank noted how critical public transportation was:
 - Mom: Thank goodness the bus goes to Copper
 - Daughter: Because it goes to Copper, I can stay in school
- People who come in for food, don't just need food
 - Reach Program – PG&E bill payment support may be available prior to crisis and total loss of income
- School population issues – enrollment is down, resulting in revenue losses
- We're also dealing now with families losing homes and health insurance. Realtors are now calling services asking for resources to support these families.
- Loss of employer insurance; or cannot afford to pay co-pays, deductibles are being experienced by higher income families
 - Low cost prescription support for county residents is available; contact CalWorks
 - Families losing employer insurance, or unable to pay premiums may qualify for Medi-Cal assistance and should not assume they don't; apply through CalWorks
- Church youth programs depend on donations, donations are down
- Some expressed concern that experience has shown that increased stress could lead to increased difficult child behaviors, illness, abuse.
- In the past, job support services noted that in families that have lost jobs and seek supports often show increased substance abuse, abuse, and negative behaviors that interfere with obtaining new employment.
- Staff have their own issues and concerns and could need the same supports as the families they serve
- Private childcare experiences the same issues. It was noted that recently several people were thinking about opening private childcare in homes to supplement family incomes as spouse isn't working (construction). Problems arise when the private childcare isn't successful due to:
 - Community not seeing a rise in enrollments due to job losses
 - Costs for care/licensing increase beyond families ability to pay
 - Costs increasing as parent fees increase/subsidies decline, resulting in enrollment declines
 - Licensing staff are dropping from 30% to 15% site visits. This means most childcare providers may not see licensing staff for several years; isolation increases and impacts quality
- HS family barbecue – second time, last year 350, this year 250 because they couldn't afford gas to get to Angels Camp; even though they were going to get free food.
- Hard times highlight lifestyles – Habits that aren't effective may rise to view (personal autos v public transportation; cable tv v food; luxuries v wants)

PROBLEM SOLVING STRATEGIES

If we expand this discussion over the next few months, schools and other services may be able to help with facilities and resources.

- Could they be approached for use of unused classroom space to provide local neighborhood service sites or food distribution? Could school busses making

- return trips and empty of riders move food to local schools? Some counties have distributed food using school busses, some on public transportation
- “Backpack for Kids” is a food distribution through America’s Second Harvest providing weekly kid-friendly food-filled backpacks delivered at school;
 - An example was shared of a person on chemotherapy who couldn’t get to food bank; could other resources be used to distribute food? For example, the county has a large number of employees who drive by homes that need food. Could their drive home incorporate giving resources?
 - We should review the delivery of food through churches, childcare centers
- Does it make any sense to try to raise public awareness of what’s happening in the county? Statistics @ food bank, foreclosures?
 - Increase newspaper coverage of local realities
 - Note examples of our county coming together in positive response
 - Ministerial Association – Do they still meet? Could churches choose a Sunday to talk about poverty and food insecurity/need right here at home?
 - Businesses are getting hit hard with requests for donations from everyone. Is there a way to streamline this or guide requests?
 - We want to avoid getting into a situation of people not wanting to know what’s really happening.
 - Sometimes people get into a situation out of their control
 - News and coverage should help to dispel the stigma of seeking help
 - Poverty affects everyone who’s working or not working – impacts to the community could be matched with creative solutions from areas already having experienced this (Detroit? Others?)
 - Can we make the issues and seeking help real by using anonymous examples?
 - Case studies – how did you start in life, and how did you get here? What could have made a difference?
 - People don’t always know their community. An example shared: *A Forest Meadows retiree routinely plays golf late in the morning. One day he’s up early and notices the large number of kids waiting for the school bus. He’s overheard asking his golf buddies, “Do you know how many kids we have waiting for the bus? Do you know how many kids we have here? I had no idea!”*
 - Continue to promote a focus on and prioritizing children. Promote dedication of resources for kids.
 - Consider developing a County Board of Supervisors’ vision/mission statement addressing the people of the county (ref: San Diego BOS Mission/Vision for the quality of life/people, not just development).
 - Ask more specifically what is important to individuals? Is it the school as center of community? Is it use of public transportation? Bike Paths? Walking Paths?
 - Converse with families rather than interrogate them. Update scripts for outreach/enrollment.

- Remember that families need some way to forget what they are feeling bad about (spend \$ on cable tv vs food); help them make meaningful choices
- Behavioral/Mental Health Service challenges:
 - More visible to the community due to outreach
 - Medi-Cal funding allows serving poorest of the poor
 - People in need, with insurances cannot get access to county resources
 - As we become more visible, we get more requests for assistance
 - Often offering Band-aids for big problems
 - Continue to promote MTSJ Hospital's recruitment of a psychiatrist/child psychiatrist.
 - Individuals can often be set-up for failure.
 - Example: It's going to get harder to get services, some will call and won't get services. This may lead to crisis care hospitalization for which the county will pay because they weren't covered by Medi-Cal which was why they didn't get services in the first place.
 - Mental Health Services Act (MHSA) funds allow for new staff; this may help a few people a lot, but isn't enough to increase core services to most people. We have dilemma of perception; how people see us:
 - In need, call but don't get services
 - In crisis, but won't call because don't see resource as available
- Very mentally ill have very little resources – live in areas inaccessible to public transportation. As resources diminish and costs increase will impact ability to support these individuals.
- What is the performance criteria before sending driver?
 - Some case management is provided, but cost:benefit is that even with driver costs, hospital costs are so much greater.
 - Mobile Therapy (like book-mobile, tooth-mobile)
BIODIESEL
 - Reviewing shared clinical space in Mark Twain clinics
- Another looming issue for many agencies: Staff drive personal vehicles and at some point (particularly with lower paid staff), they're not going to be able to afford to drive, and will quit.
 - www.foothillrideshare.com; rideshare opportunities
 - Could the CAO/BOS coordinate some type of countywide or employee how-to fair for using public transportation/rideshare?
 - How do we get people to change habits *before* they get into distress and need assistance (use bus, rideshare, play vs cable)
 - Ask Bob Lawton – Could Tyler Summersett have 5-10 minutes at Dept Head Mtg to introduce concepts?
 - BOS/CAO – take the bus one day a week, designate a week to start or one month to promote rideshare
 - Phone/web conference meetings

- *Network of Care* should be more useful
 - It can be accessed from a link on the county website
 - Here is the link to the Calaveras County Network of Care site: <http://calaveras.networkofcare.org/mh/home/index.cfm>
 - It's easy to post information.
 - If anyone wants to post some info, permanent or temporary, they can e-mail Rita Downs or Stacey Meily at: smeily@co.calaveras.ca.us
 - Or, they can login to post their own information or even make a website by clicking on providers at the bottom of the page (the webmaster contacts me for permission)
 - Here is the San Diego site which is an excellent example of how much can be done with the site: <http://sandiego.networkofcare.org/aging/home/>

- MLJT is Federally funded, not directly affected by county budget
 - Good news – Workforce development is forward funded; current budget designed last year, and youth services funding was increased
 - Adult and Dislocated Worker programs are in place
 - Two grants for CDBG have been submitted. They're optimistic that MLJT will get two year grants to provide training, support services, transportation, clothes, shoes, etc.
 - Income level for qualifying is significantly higher than poverty level; they're able to serve many people
 - www.motherlodejobconnection.org – Can be accessed for online career assessments, resume development, job search

WHAT'S NEXT

If we're going to try to affect the GP/BOS resource allocations, we need data. Look at negative and positive data, stories. Send details to K Pekarck to compile. K Pekarck will email a summary of data/details for review in early July.

Remember, this is all about the kids; continue to raise awareness.

Meet again, July 23, 2008, 3:00-5 pm, MTSJ Hospital Classroom 2 to review compiled data.