Committee members present: Councilmembers Karen Hiller (Chair), Brett Kell, Hannah Naeger

City staff present: Kalea Pauole (City Grants Administrator), City Manager Stephen Wade, Chief of Staff Bill Cochran, Housing Services Division Director Corrie Wright, Carrie Higgins; United Way vendor staff: Brett Martin, Jessica Lehnherr, Joyce Katzer, Juliet McDiffet

1) Call to Order
Chairwoman Hiller called the meeting to order at 1:00pm. Committee members, City Staff, and United Way staff introduced themselves.

2) Approval of July 22, 2022 Minutes
Committee member Naeger made a motion to approve meeting minutes. Committee member Kell seconded the motion. Motion approved 3-0-0.

3) Presentation: United Way
Chairwoman Hiller reviewed that this meeting was a special meeting that had been scheduled to occur between the time when the City passes the budget, and when the Committee begins the process of working on the SSG items for the upcoming year. The purpose of this special meeting is to focus on a particular topic to provide some background and context to some of the work that the City is doing in making choices to entertain proposals and make some social service grants.

Brett Martin with United Way reviewed a presentation that centered around the process that United Way recently conducted to examine what the current community needs are in Topeka. Mr. Martin shared data that was collected at a community needs meeting that was held a few months ago. [This presentation can be found online at https://www.topeka.org/citycouncil/social-service-grants].
Highlights

- This data is a snapshot of data collected from the community at two points within the past 12 months, the community health assessment and a series of community stakeholder meetings. The responses are based on a prescribed set of questions and prompts. It serves as an opportunity to learn from the community and as a conversation starter.

- This data is not a complete picture of the community and its perceptions of assets and needs. It is not a scientific study. It is not a series of recommendations for action.

- Mr. Martin presented the Community Health Needs Assessment (CHNA) to the City’s Governing Body and to the Shawnee County Commissioners. This assessment is carried out every three years by the Heartland Health Neighborhoods, Stormont Vail Health, and Shawnee County Health Department and functions as the implementation arm of the “Community Health Improvement Plan” (CHIP). These assessment allows the community to use this plan as a way to leverage dollars for grant asks and for prioritizing investment across the community.

- The purpose of the CHNA is to:
  o Understand and document the current and future community health needs
  o Determine social, economic and environmental challenges to reaching optimal community health
  o Meet regulatory standards for a non-profit health system and accreditation for Shawnee County Health Dept. Our community is fortunate that there is a good working relationship between the Health Department and the hospitals.
  o Informed development of the Community Health Improvement Plan to assist in justifying the allocation of resources to best meet the identified needs.

- Primary Feedback: More than 2,500 people responded to the Community Perception Survey, with nearly 150 people attending 15 targeted roundtables, and 95 attendees (45 organizations) in a virtual town hall community conversation.

- The survey participation showed a fairly even distribution across ages, however there was an increase in participation by non-Caucasian groups, but
there is still a great deal of work to do within the Hispanic populations, African American populations, and mixed race populations. Although there is more work to do to accurate represent the demographic breakdowns in Shawnee County/Topeka, United Way was happy to see progress but it is not good enough.

- The community conversation took place in 2021, so front and center was COVID, and what COVID unmasked in our community. “The real vaccine” was discussed, and how prevention and being able to invest in opportunities for folks in the community to be able to improve conditions to provide better health outcomes.

- Mr. Martin recounted attending a conference the week prior that spoke to communities spending lots of health care dollars on people once they go to the doctor and once they leave the doctor, however there is not a lot of investment of dollars going toward helping people not need to go to the doctor in the first place. Prevention is key. This may look like:
  - Access to housing
  - Being focused on diversity, equity and inclusion
  - Having strong partnerships
  - Having strong employment
  - Access to education
  - Food security
  - Substance abuse
  - Healthy eating
  - Health equity
  - Mental health

- Primary data from the 2018 CHIP assessment listed priority areas, and a health improvement plan was put into place that centered on those areas. The priority area were:
  - Mental/Behavioral Health
  - Safe access to food
  - Substance use
  - Health equity - this is an umbrella term that has to do with access, and the different strategies will be explained further in the presentation.

- The 2021 CHIP assessment primary data identified two sets of data, the biggest opportunity and the concern for our community. The results showed that there were areas of emphasis for us that are still areas of emphasis for us.
The number one emphasis is affordable health care insurance. The State has not passed Medicaid expansion, and as a result, that is a huge issue that is faced by families and something the community continues to work on. Mr. Martin noted that many of the agencies continue to work on this issue collectively, at the State and Federal levels. It is not something that is controlled on the Social Services Grants Committee level, or City Council or County Commissioner levels, but it is something that is effecting us in a significant way.

Mental Health, Poverty, and Obesity related to access to healthy food and opportunities to be able to exercise.

Drug/substance use also made the list.

Mr. Martin explained that it was not surprising to find that many of the same issues identified in 2018 were still present in 2021. If it took decades and generations to get to an unhealthy state, it may take that amount of time to pull ourselves out again.

Now, what we have prioritized are:
- Mental health
- Healthy eating and obesity
- Substance abuse
- Equitable access

In January 2022, United Way of Greater Topeka held a number of stakeholder meetings with a slightly different purpose from the CHIP, which was to listen to the community and prioritize areas for investment and use community data to develop next evolution of UWGT.

United Way did this through the COVID-19 Response and Coordination group
- Topeka Housing Authority Residents, to also include Section 8 properties
- Community at Large
- Spanish speaking residents, hosted by El Centro.

Themes that arose from these meetings:
- Emphasis on basic needs such as:
  - Food security
  - Housing supports
  - Healthcare/Rx assistance
  - Safety
o Health
  - Mental health services
  - Addiction/substance use
  - All ages were identified as being in need
  - Health insurance

o Education
  - Early education and school readiness
  - K-12 supports
  - Education needs for adults which would include things such as workforce development, skills development, GED

o Other themes, that were not minor but continue to show up:
  - Language barriers, and a need for more services and information in Spanish. This also included having a greater understanding of cultural differences and cultural competency of folks across the community. Providing a flier to an event in Spanish, but then not having any Spanish-speakers at the event is not really providing access.
  - Safety, particularly safety in neighborhoods. Some of these are related to the larger themes such as mental health and substance use.
  - Community development. This was related to things such as neighborhoods and neighborhood engagement; but also things such as opportunities for youth that were highly localized within neighborhoods. Opportunities for youth to engage in positive activities within the neighborhoods and within areas where transportation access is a barrier.
  - There was a real concern about the aging population, particularly the increasing numbers of unsheltered older individuals.

- Across the stakeholder meetings and the CHIP, shared themes and issues were identified.
  - Mental health (all ages) – Based on conversations with the community and the partners in the schools, that there is a great/growing need for mental health services among children. Issues were identified such as capacity within organizations. There is ongoing work to do related to seniors across the community. And, seeing cultural differences and cultural competencies across the board in the community.
- Addiction/substance use - There is a need for opportunities for prevention but also for resiliency and recovery services.

- Health (access to health care and affordable healthcare) - Is related to all of this. When we talk about “affordable healthcare”, things such as Medicaid is obviously something that is outside of our control in terms of expansion, but conversations also discussed the rising insurance premiums, even on places like Marketplace.

Access to healthcare can look like a lot of different things. It can look like geography. It can look like transportation and not having the ability to get to appointments, especially for seniors needing medical transport. But it can also look language barriers, cultural barriers, other systems barriers that folks run into when trying to access healthcare for themselves and their families.

- Equitable access to services (language, transportation, poverty, etc). - This is an area that touches everything.

Mr. Martin stated that prior to the meeting, he pulled up the 2023 SSG awardees to see where they fit within this particular area. There are some things to note:

- At least four programs focus on equitable access to services, especially for seniors.
- Four programs are related to supports and equitable access, in terms of education, for families and school-age education equity.
- One program focuses on language access.
- Three programs focus on mental and behavioral health.
- Three programs focus on health and access to health care.
- Three programs are connected to equitable access, in terms of housing and housing supports.
- One program is a wrap-around service, which would also fall into the equitable access to services category as well.

- When we take a look at where we are going, in terms of investment of dollars through the Social Services Grants for the upcoming year, they very much align with what the community has identified as the needs, where the Community Health Improvement Plan will be focused over the next three years, and where our current Community Health Improvement Plan has been focused for the last couple of years.
Questions/Comments:

- Committee member Naeger stated she was encouraged to see that all of the organizations are on the same page for addressing the needs of the community, and that these are the same types of issues that are coming to organizations such as the Greater Topeka Partnership, and the City Council members individually. She felt it was nice to know they are all getting the same information back and are all in alignment on the needs of the community. She noted that these are also being reflected in the American Rescue Plan Act (ARPA) grant process, and that we are all working to solve these issues in the community.

- Chairwoman Hiller thanked Mr. Martin for the presentation, and stated she felt it was affirming. She noted that there were not any new or emerging needs or emerging movements to address the needs in the presentation, and asked Mr. Martin if there were such topics discussed in the meetings? Mr. Martin stated that in the conversations that he is participating in at local, state, and national levels, show that the particular areas are not changing but that ways we are talking about them, and the nuance within them, is different. Mr. Martin stated that where he felt the conversations were emerging were related to language and cultural barriers. Conversations there, that he had not yet seen during this six-seven years with United Way, before in the way that they are happening now. They are related to equity and justice in many of the circumstances. The way in which some communities are attacking that problem are exemplary. He stated he felt there was some real opportunity to learn from some of our peer communities across the United States about how this works. He gave an example of a hospital system in the Northeast US, where more than 75% of the population is Spanish-speaking. What they have done, in health care in particular, has been to be very intentional about a paid internship program for high school students who are able to come into the hospital, partner with folks, and shadow to learn more about health care within their community. They are seeing that some of the interns are going back to school, however many are coming directly back to the hospital when they graduate. The beautiful thing about how they have put the program together is, if a student begins the internship in September and interns for an entire year, and then in June starts work with the hospital full-time, their start date is retroactive to the previous September to already give them almost a year within this healthcare system. As Mr. Martin listened to the presentation, and the way they built equity into it, he was very interested to see what the face of that hospital system looks like in
ten or fifteen years, due to the intentional approach to internships. He guessed that he would be seeing an exponentially higher number of providers and staff that reflect the community that they serve. He stated he felt that was significant, and from what research and data tells us, is that health disparities will narrow and health outcomes will increase. That folks will be connecting with their primary care physicians more and being able to get the access services that they need. He noted that three, four, or five years ago when conversations began about health equity, there were not those kinds of bold moves in communities to be able to do that. The program also has supports all along the way for the interns to create a robust program.

Mr. Martin stated that the other area he felt this was related to was race. There are a lot of community conversations about racial and ethnic disparities and health outcomes. What he is noticing in those conversations is a greater sense of urgency. So, not just talking about the issues or identifying them this way, and not just disaggregating the data related to race and ethnicity, but actually talking about the importance of culturally competent services across our community and also beginning to identify and recognize things like systemic and institutional racism and implicit bias, and how it is that just talking about it and identifying it is not enough. But that actually looking at it from a systems-level, institutional-level and at a personal level on how it is that we can begin to understand what those barriers (micro-aggressions) look like for people of color in particular, is a different conversation now than what was happening before.

4) Other Items
Chairwoman Hiller introduced the new City Manager, Stephen Wade, and mentioned that he was also looking to begin a new program that might be in the same realm as what Mr. Martin described. City Manager Wade stated that he has assigned Chief of Staff Bill Cochran to begin working on creating a very similar type of internship program, and that staff was deep in conversations to where the City would be able to expand that program throughout the organization. He felt this would provide some wonderful opportunities to some young adults, to where when they do get out of high school, we have ready-made employment opportunities available to them.

Chairwoman Hiller tied the conversation back to social services and the subject-at-hand, stating that in ways, the process does not always start right in the lane,
so if various groups of us are doing those kinds of bold and needed moves in City government or whatever, we can all contribute to that goal of a new normal for communities.

Committee member Naeger reflected on her experience as someone in the healthcare field, and could speak toward agreeing that we need to make these shifts, as a community, and that all of us need to be challenging how we see the world now, challenging those implicit biases and realizing that, right now they are holding us back but that they do not need to any longer. She also felt that looking at internships, like the one described, ties in nicely with empowering our youth in the community to build a better tomorrow, which is integral to the purposes of the Momentum 2022 and Momentum 2027 work that is being done by Greater Topeka Partnership, and so seeing that this is being enacted in multiple areas such as city government, the private sector, and especially in the healthcare community, is appreciated. She voiced hope for the healthcare community, in particular, where work needs to continue to address small micro-aggressions that then blow up into full-blown racial and socio-economical disparities, and to continue bringing those issues to the forefront of conversations. She thanked Chief of Staff Cochran for the work he is doing on this new program, and City Manager Wade for pushing forward on these issues that we all need to be focused on. She encouraged the community to work together on this, as a team, to begin making it less of an issue in our community.

5) Adjourn
Chairwoman Hiller requested that the Committee keep this information in mind as the Committee begins reviewing the list of priorities for what will be funded with the City’s SSG dollars, and when making that they will be reviewing and making recommendations to the Governing Body for the next funding cycle, in the coming months. She thanked Mr. Martin for the information and stated it was very valuable. She stated she felt pride in two things about choosing to live and stay in this Topeka; which is how well this community shares a common vision and goal and how well they work together to accomplish these.

Mr. Martin reviewed that the contracts for the 2023 year should be coming out in mid-October, after the 15th, but that all of the contracts are scheduled to go out on October 17th and that they are General Fund contracts. The third-quarter reports are scheduled to go out October 1st. He stated that, as a way to give a sense of how much progress that United Way has made in their relationship with the City, the contracts went out in April the first year. Being able to send those contracts out six months earlier this year is a month earlier than last year, and is showing
progress in the process, communication and support from City staff. He thanked Corrie Wright and Carrie Higgins for their assistance as the City staff for the help they have provided to United Way.

Chairwoman Hiller reminded everyone that United Way is the City’s contracted vendor, to handle the application and grant administration process for the City’s Social Service Grants. Their contract is a three-year contract.

Chairwoman Hiller adjourned the meeting at 1:41pm.

Meeting video can be viewed at: https://youtu.be/1m6g6jcAdxU