# Board of Governors
## Executive Community Advisory Committee
### Meeting Minutes – December 8, 2021

1055 W. 7th Street, Los Angeles, CA 90017

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<th>ECAC Members</th>
<th>RCAC Members/Public</th>
<th>L.A. Care Board of Governors/Senior Staff</th>
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<tr>
<td>Russell Mahler, RCAC 1 Chair ***</td>
<td>Pablo De La Puente, Interpreter ***</td>
<td>Hilda Pérez, Member, Board of Governors ***</td>
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<td>Estela Lara, RCAC 2 Chair ***</td>
<td>Isaac Ibarlucea, Interpreter ***</td>
<td>Layla Gonzalez, Advocate, Board of Governors ***</td>
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<td>Cynthia Conteas-wood, RCAC 3 Chair, ECAC Vice-Chair ***</td>
<td>Eduardo Kogan, Interpreter ***</td>
<td>John Baackes, Chief Executive Office, L.A. Care ***</td>
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<td>Silvia Poz, RCAC 4 Chair ***</td>
<td>Alex Mendez, Interpreter ***</td>
<td>James Kyle, MD, M.Div., Director of Quality, L.A. Care ***</td>
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<td>Maria Sanchez, RCAC 5 Chair ***</td>
<td>Ruth Nuno, Interpreter ***</td>
<td>Richard Seidman, M.D, Chief Medical Officer, L.A. Care ***</td>
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<td>Andria McFerson, RCAC 6 Chair ***</td>
<td>Stephanie Webb, Interpreter ***</td>
<td>Miriam Admasu, Department Assistant, CO&amp;E ***</td>
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<td>Fátima Vázquez, RCAC 7 Chair, ECAC Chair ***</td>
<td>Ana Rodriguez, RCAC 2, Public ***</td>
<td>Kristina Chung, Community Outreach Field Specialist, CO&amp;E ***</td>
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<td>Ana Romo, RCAC 8 Chair ***</td>
<td>Cleo Ray, RCAC 5, Public ***</td>
<td>Cherie Compartore, Senior Director, Government Affairs ***</td>
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<td>Tonya Byrd, RCAC 9 Chair ***</td>
<td>Maria Montes, RCAC 8, Public ***</td>
<td>Idalia De La Torre, Field Specialist Supervisor, CO&amp;E ***</td>
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<td>Damares O Hernández de Cordero, RCAC 10 Chair **</td>
<td>Richard Hernandez, RCAC 9, Public ***</td>
<td>Auleria Eakins, Manager, CO&amp;E ***</td>
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<td>Maria Angel Refugio, RCAC 11 Chair ***</td>
<td>Nereyda Ibarra, RCAC 10, Public ***</td>
<td>Joseph Gonzales, Unified Communication Mobility Engineer I, IT Operations &amp; Infrastructure***</td>
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<td>Lluvia Salazar, At-Large Member ***</td>
<td>Johnny Chu, RCAC 11, Public</td>
<td>Hilda Herrera, Community Outreach Field Specialist, CO&amp;E ***</td>
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<td>Deaka McClain, At Large Member ***</td>
<td>Ray Shell Chambers, Public ***</td>
<td>Linda Merkens, Senior Manager, Board Services</td>
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<td>* Excused Absent ** Absent</td>
<td>Sal Lua, Public ***</td>
<td>Frank Meza, Community Outreach Field Specialist, CO&amp;E ***</td>
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<tr>
<td>*** Via teleconference</td>
<td>Mrs. Sanchez, Public ***</td>
<td>Nicole Moussa, Manager, Technical Information, Pharmacy &amp; Formulary ***</td>
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<tr>
<td>**** Via teleconference (with technical issues)</td>
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<td>Candace Nafissi, Manager, Community Resource Center Wilmington ***</td>
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## AGENDA
**ITEM/PRESENTER**

**CALL TO ORDER**

Fatima Vazquez, **ECAC Chair**, read the instructions for today’s meeting agenda.

She advised the public to please recheck these directions for updates prior to the start of the meeting. This meeting will be conducted in accordance with the provisions of the Ralph M. Brown Act, allowing members of the Executive Community Advisory Committee, members of the public and staff to participate via teleconference, because State and Local officials are
recommending measures to promote social distancing. Accordingly, members of the public should join this meeting via teleconference as follows:
https://zoom.us/j/91504850159?pwd=VHNuU0pPUUtGa2NkUEVjZjdHR1pnQT09

Teleconference Call – In information/Site
Call-in number: 1-415-655-0002 Participants Access Code: 2487 914 5443 (English)
Call-in number: 1-415-655-0002 Participants Access Code: 2481 082 5922 (Spanish)

Members of the Executive Community Advisory Committee or staff may also participate in this meeting via teleconference. The public is encouraged to submit public comments or comments on Agenda items in writing by email to COEpubliccomments@lacare.org or by sending a text or voicemail to (213) 798-0148.

Attendees who log on using the URL above will be able to use “chat” during the meeting for public comment. Attendees must be logged into Zoom to use the “chat” feature. The log in information is at the top of the meeting Agenda. This is a new function during the meeting so public comments can be made live and direct.

1. The “chat” will be available during the public comment periods before each item.
2. To use the “chat” during public comment periods, look at the bottom of the screen for the icon that has the word, “chat” on it.
3. Click on the chat icon. It will open a window.
5. Type the public comment in the box.
6. After hitting the enter key, the message is sent and everyone can see it.
7. The chat message, text, voicemail, or email must indicate if the submitter wishes to be identified or remain anonymous, and must also include the name of the item to which the comment relates.
8. L.A. Care staff will read the chat messages for up to three minutes during public comment so people who are on the phone can hear the comment.

Your comments can also be sent by text, voicemail, or email. If we receive your comments by 10:00 a.m. on December 8, 2021, it will be provided to the members of the Executive Community Advisory Committee at the beginning of the meeting. The chat message, text, voicemail, or email must indicate if you wish to be identified or remain anonymous, and must also include the name of the item to which your comment relates. If you do not indicate an Agenda item for your comment, your comment(s) will be read for up to 3 minutes at item VIII Public Comments on the Agenda.

Once the meeting has started public comments should be submitted prior to the time the Chair announces public comments for each agenda item and staff will read those comments for up to three minutes. Chat messages submitted during the public comment period for
each agenda item will be read for up to three minutes. If your public comment agenda is not related to any of the agenda item topics, your public comment will be read for up to 3 minutes at item VIII Public Comments on the agenda.

These are extraordinary circumstances, and the process for public comment is evolving and may change at future meetings. We thank you for your patience.

Please note that there may be delay in the digital transmittal of emails, texts and voicemail. The Chair will announce when public comment period is over for each item. If your public comments are not received on time for the specific agenda item you want to address, your public comments will be read at the public comment section of the agenda.

The purpose of public comment is that it is an opportunity for members of the public to inform the governing body about their views. The Executive Community Advisory Committee appreciates hearing the input as it considers the business on the Agenda.

All votes in a teleconferenced meeting shall be conducted by roll call.

If you are an individual with a disability and need a reasonable modification or accommodation pursuant to the Americans with Disabilities Act please contact the Community Outreach & Engagement staff prior to the meeting for assistance by text (213) 798-0148 or by email to COEpubliccomments@lacare.org.

Ms. De La Torre called roll.

Chairperson Vazquez called the meeting to order at 10:15 a.m.

**APPROVE MEETING AGENDA**

Andria McFerson, RCAC 6 Chair, stated that she needs the presenters to break down their presentations into laymen terms so the presentations are quicker and members can have more time to speak. Presenters must respect that.

Member McFerson stated that she has a doctor visit. She asked the committee to move agenda item 6B before agenda item 4. She would like to be part of that discussion.

Cynthia Conteas-Wood, RCAC 6 Chair, questioned whether or not John Baackes, Chief Executive Officer, and Richard Seidman, MD, MPH, Chief Medical Officer, would still be able to give their reports due to changes to the agenda.

Idalia De La Torre, Field Specialist Supervisor, responded that the meeting is on a tight schedule and asked that those items are placed on the agenda first.

Member McFerson stated that our voices are important and she asked that the presenters present faster and condense their reports so members have more time to speak. She would like to be part of the motion that she made.

Approved by roll call.
9 AYES (Byrd, Hernandez De Cordero, Mahler, McClain, McFerson, Poz, Romo, Salazar, Sanchez)

3 Abstentions (Conteas-Wood, Refugio, Vazquez)
The Agenda for today’s meeting was approved with requested changes.

| APPROVE MEETING MINUTES | Member McFerson stated that she is referred to as a “member” in the minutes. She is not being identified as a chair. She asked that it be changed.  
Member McClain stated that she needs more time to unmute her microphone, and she noted that her name does not have “Member At-Large” next to it.  
Linda Merkens, Senior Manager, Board Services, submitted a response via chat that “ECAC Member name and title is used the first time they are referenced in the minutes. Thereafter, the title "Member" (meaning a voting member of the committee) is used. This is how it has always been done, and how it is done for Board meeting minutes as well.”  
The November 10, 2021 meeting minutes were approved as submitted. |
| Approved by roll call. 11 AYES (Byrd, Conteas-Wood, Hernandez De Cordero, Mahler, McClain, McFerson, Poz, Refugio, Romo, Salazar, Sanchez and Vazquez) |

| STANDING ITEMS | Richard Seidman, MD, MPH, Chief Medical Officer, gave the following report:  
Worldwide the number of cases reported most recently plateaued, and may have flattened. There is not a significant increase worldwide, but in the United States the increase in cases over the last two weeks is about 30%, and is over 100,000 new cases per day. That upward trend started even before the omicron variant was identified. In terms of what is known about the virus, there are more questions than answers. There is some evidence beginning to come in that certainly makes the variant seem more contagious and easier to spread. It spread very quickly around the world, first into Canada, then the United States here in California. Three cases have been reported so far.  
Dr. Seidman gave a presentation on COVID-19 Vaccination Progress (a copy of the presentation can be obtained from CO&E.).  
Current Status – age 12+ with at least one shot  
Data as of November 29, 2021  
- L.A. Care – 63%  
- L.A. County – 85%  
- California – 83%  
Vaccinated Members by RCAC |
Key Findings – Geographic

- RCAC Regions 1 (Antelope Valley) and 6 (South Los Angeles) have the lowest vaccination rates in the County
- RCAC Regions 3 (San Gabriel Valley) and 10 (East Los Angeles) have the highest vaccination rates in the County

Vaccinated Members by Race/Ethnicity
Key Findings – Race/Ethnicity
- Lowest vaccination rates -- Black/African Americans, Native American/Alaska Natives, Hawaiian/Other Pacific Islands
- Highest Rates -- Asian, Hispanic/Latinx

Vaccine Response Plan
Collaborative Efforts and Highlights
Member Vaccine Incentive Program
L.A. Care is offering eligible Medi-Cal and Cal MediConnect (CMC) members who get a COVID-19 vaccine a $50 gift card, while supplies last.

Member Qualifications
- Medi-Cal and CMC members must have active eligibility with L.A. Care at the time of vaccination
- Must be 12 years or older
- Must be directly enrolled with L.A. Care
- Must have received a first or second COVID-19 vaccination on or after November 1, 2021

Program Overview
- Members must be identified in the California State's vaccine registry as having received at least one dose of a COVID-19 vaccine on or after November 1, 2021
- One $50 incentive per person
- Booster shots are not eligible for the incentive

Visit lacare.org/vaccine for complete program guidelines.

Provider Incentives and Collaboration
- Public Health Departments
  - Sponsorships
- Grants
- Messaging/Canvassing

**FQHCs**
- ~$2 Million in grant support provided
- Learning collaborative
- Unvaccinated member lists and vaccine incentive program (phase 2)

**Pharmacy**
- Phase 1 - 10 retail pharmacies (target ~25K unvaccinated members)

**LA County Department of Health Services**
- Collaborative efforts in discussion

**Private Providers**
- High volume practices
- Unvaccinated member lists and vaccine incentive program (phase 2)

**PUBLIC COMMENT**

Submitted by Elizabeth Cooper, **RCAC 2 member**, via phone call:

*Dr. Seidman, I would like to wish you and your medical staff a happy holiday season, also to thank you for your advice you have given to the members of LA Care regarding the COVID 19 updates. It has been very beneficial to me and my son Jonathan. Please continue to keep us informed.*

Chairperson Vazquez thanked Dr. Seidman for his presentation. She noted that the information is very important and should be shared with the community. She asked if people should get a booster shot after 6 months or wait a longer period. Dr. Seidman responded that people should get booster shots as soon as they are eligible.

Member McFerson asked Dr. Seidman where he received data on vaccination progress. She did some research and the African Community is the least likely to get the vaccine. They are more likely to be infected with COVID-19. She noted that her RCAC region has a high population of African Americans. She noted that reaching out to the low income community person-to-person is the most effective way to encourage them to get vaccinated. She said that having meetings virtually, getting positive information out, raffles, gifts, different things like that to the public not just the RCAC members would be awesome. Dr. Seidman responded that the data comes from the L.A. Care member vaccination rates and the State. He gathered the data on all L.A. Care members. The Los Angeles County and California rates are from the Los Angeles County Department of Public Health website and the California rates come from the California Department of Public Health website. The African American members have the lowest vaccination coverage amongst L.A. Care
members based on race and ethnicity. In terms of outreach, the outreach has been focused in South L.A. and in the Antelope Valley, and other parts of the county since last winter and includes 100 or more community based organizations. There has been a very significant effort to engage the community in this outreach to do the education, try to meet people where they are, understand their hesitancy, and try to convince them to get vaccinated. L.A. Care members that are vaccinated with their first or second shot after November 1, are eligible for a $50 gift card.

UPDATE FROM CHIEF EXECUTIVE OFFICER

John Baackes, Chief Executive Officer, gave the following report:

The pandemic is still evolving as Dr. Seidman made clear. L.A. Care has always known about disparities. The pandemic has shown that they are life and death matters. In his opinion the inequality in income has been starkly revealing in the pandemic. People in the lower end of the economic scale who have not had the opportunity to work remotely had to go out to community and work. They were infected, hospitalized and died more often. Since the disparities, equity and inclusion committee was formed out of this pandemic period and the increased interest in addressing institutional racism he has discussed this more. James Kyle, MD Chief of Equity & Quality Medical Director Quality Improvement, is using vast data so that L.A. Care can begin to illustrate the disparities at various disease levels. This phase is documentation. The next phase will be taking that documentation to our providers and saying, collectively “what can we do to address and eliminate this disparity?”

On January 1, many changes will be taking place in Medi-Cal. The prescription drug carve out will be taking place. Members with other prescription plans will not be affected. So far there have been few calls regarding the issue which means members don’t know or have not seen the information that was mailed. The other change will be to the Enhanced Care Management program. It replaces the Whole Person Care program and complex care management. It will take about six months to transition members into the new program. On May 1, Medi-Cal will extend coverage to undocumented residents ages 27 to 49. There are approximately 400,000 people that may qualify.

PUBLIC COMMENT

Submitted by Elizabeth Cooper, RCAC 2 member, via phone call:

Hello Mr. Baackes, I just want to thank you and the members of the Board of Governors for your leadership. Happy Holidays.

Hilda Perez, Member Representative, Board of Governors, asked if L.A. Care can use its social media platforms to make people aware of the prescription drug carve out. It can be more interactive than mailings. Mr. Baackes responded that the State does not allow this type of communication.
| Deaka McClain, *At Large Member* stated that she is concerned about seniors and people with disabilities regarding the prescription drug carve out. She is concerned how members that have Medicare will be affected. She asked if L.A. Care can make robo calls to members with Medicare as primary insurance. Mr. Baackes responded that robo calls will not work because it can take the State up to two years to approve them.  
Russell Mahler, *RCAC 1 Chair*, asked why is L.A. Care still creating barriers to access care. He stated that he has gotten the run around trying to obtain a CPAP machine for someone. Mr. Baackes responded that he will ask the Care Management team to reach out and assist him.  
Member McFerson stated that she has given many suggestions like a resource guide, task force, empathy training, undocumented insurance, and they have been implemented. She thanked him for that. She noted that many resources are less available to the Black community. One reason is that the decision makers don’t have a way of communicating with them. She noted that providers also underdiagnose and misdiagnose the Black community and they must diagnose themselves. This causes them to be reluctant to provide input. She asked Mr. Baackes to open the Family Resource Center in South L.A. so they can hold food banks, because there are people starving in the area. She asked that L.A. Care allow RCAC members to properly publicize these events. Mr. Baackes thanked Member McFerson for her activism. He stated that the resource centers would be open if not for supply chain dilemmas. There is equipment that is needed that is being held up offshore due to the container ship backlog. He stated that he agrees that the issue at hand around why there are not enough resources for communities of color, particularly African-Americans and Latinos, is that Medicaid, or Medi-Cal as we call it in California, is the poorest funded health program in the United States. It is well below the reimbursement for Medicare. He thanked her for her comments. |
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<td><strong>UPDATE: L.A. CARE’S EQUITY STEERING COMMITTEE</strong></td>
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<td>James Kyle, <em>MD, M.Div</em></td>
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| Dr. Kyle, gave an update on L.A. Care’s Equity Steering Committee (*A copy of the report can be obtained from CO&E.*).  
- Focus on disparities efforts mostly taking place in Health Services, specifically  
  - Quality Improvement (QI)Initiatives  
  - Health Education  
  - Pharmacy  
  - Care Management  
- Specific goals in Health Services/Population Health Management  
  - Disparities focus is captured in Member Equity Council goals – with a focus on COVID |
• Presented health outcomes data to board members on these disparities for their input and feedback.

Diabetes Disparities Projects
• Focus on disparities efforts mostly taking place in Health Services, specifically
  - QI Initiatives
  - Health Education
  - Pharmacy
  - Care Management
• Specific goals in Health Services/Population Health Management
  - Disparities focus is capture in Member Equity Council goals – with covid focus
• Presented health outcomes data to board members on these disparities for their input and feedback.

Prenatal Care Disparities Projects
• L.A. Care’s Prenatal Care Interventions focusing on disparities faced by BAA members
  - Promotion of L.A. County DPH African American Infant and Maternal Mortality Doula Program
  - Participation in the national Disparities Leadership Program
    • Leverage Comprehensive Perinatal Services Program, a Medi-Cal benefit for all prenatal Medi-Cal members to be connected to health education and SDOH resources based on pregnancy risk status.
  - P-CORI project: Maternal Mortality/Morbidity in Medi-Cal
    • Work with other Medi-Cal stakeholders, including members, to generate a research agenda on Maternal Mortality/Morbidity
  - IMI State Midwifery Learning Collaborative
    • 3-year learning collaborative that will provide support, resources, and guidance for state-based teams looking to develop sustainable initiatives to advance midwifery-led models of care for the Medicaid population in their communities to ultimately address disparities
    - Analysis of Provider Network Adequacy
    - Additional BAA targeted perinatal interventions for this fiscal year

Breast Cancer, Cervical Cancer & Colorectal Cancer Screenings
• Current Efforts
  • Data disparities analysis
    - Broken down by race/ethnicity; spoken language; geographically by RCAC and SPA
    - Changes in populations with lowest rates from year to year by race/ethnicity
- Calculating statistical significance in rate changes, between highest and lowest rates and increasing/decreasing gap

- Social media campaign with American Cancer Society
  - Breast cancer screening video set for October 2021.

- For all 3 measures: robo calls (no targeting); mailers/letters (target SPA/RCACs with lower rates); social media campaign (target 20 zip codes with lower rates)

Future Direction

Interventions driven by disparities

- Goal is to have this data analysis direct future interventions

- Colorectal video features an African American cancer survivor as we see our highest disparities in screenings amongst this population.

- Breast cancer video for October will feature a Latina cancer survivor.

- General cancer screening video will feature one of our L.A. Care physicians promoting general screenings.

- Future direction feedback from group? Ideas on how to better streamline efforts?

Other Efforts

- Lots of equity efforts
  - COVID-19 vaccination efforts
  - Community Resource Centers and video programming i.e. physical activity and healthy cooking
  - Community Health Workers
  - Provider Network
    - Expanding network
    - Long-term concordance efforts

PUBLIC COMMENT

Submitted by Elizabeth Cooper, RCAC 2 member, via phone call:

Dr. Kyle, I hope that the steering committee will be more transparent and open to all the members of LA Care regarding decisions, representation, and meetings etc. Also, I hope you can bring more people of color to do presentations (i.e., mental health professionals, psychiatrists, psychologists and other health experts etc.) Thank you and Happy Holidays.

Member McFerson stated that the Black community deals with a whole lot of disparities. All races are going through it right now with the pandemic. She noted that many people are
engulfed in disparities and she thanked Dr. Kyle for efforts in addressing those disparities. She said that ECAC is an advisory committee so they will make sure that his efforts are backed up and made solid and they will help him create solutions to these issues. She stated that L.A. Care grew into the biggest public health plan because of RCAC members like her. Dr. Kyle stated that he will definitely keep members involved in terms of activities. He can have staff report to ECAC and also gain ideas and share information.

Layla Gonzalez, Member Advocate, Board of Governors, thanked Dr. Kyle for his presentation and for addressing issues regarding new mothers. She noted that it is incredible how many young women are dying trying to give birth, trying to give life to another. These issues are not being addressed or being paid attention to. She hopes the committee will be able to shed light on health care providers that are missing signs and will help save a life and possibly help providers identify other problems. Dr. Kyle responded that through the CMD program, L.A. Care’s physician provider network is trying to bring speakers in who can educate doctors on some of these very same issues. It is looking at different ways to communicate to providers around how they can better serve minority populations which is the primary life representative of people we care for here at L.A. Care. Part of it has to go back to training at residency level and medical school level.

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<th>BOARD MEMBER REPORT</th>
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<td>Hilda Perez</td>
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Board Members Perez and Gonzalez gave the following Board report (a copy of the report can be obtained from CO&E):

Board Member Perez thanked everyone for attending ECAC. She noted that the past two years have been extremely difficult for her personally. She asked members that are having any issues to please call their Field Specialists.

Board Member Gonzalez gave the following report:

The Board of Governors met virtually on December 2. Meeting materials are available on L.A. Care’s website and a list of Board approved motions can be obtained from CO&E. The next Board meeting is scheduled on February 3, 2022. She thanked all of the RCAC members that joined the December Board meeting, and all ECAC and BOG meetings for the last year and a half. She gave her condolences to all that have lost someone due to COVID-19. She urged everyone to continue wearing masks and washing their hands. She hopes that people will not only get vaccinated, but also get their booster shot. The committee was presented information about the Vaccine Incentive Program by Ms. Ahn, Dr. Li, and Ms. De Lamare. L.A. Care has been hard at work to vaccinate eligible members since the beginning of 2021. Those efforts have been augmented following DHCS’ call to action for all Med-Cal health plans to close the vaccination rate gap between Medi-Cal members and the community at large.
Ms. Compartore summarized the motion to approve L.A. Care’s proposed 2022 State and Federal Policy Agenda. Government Affairs staff brings a policy agenda every year for the Board’s consideration. Ms. Compartore noted that some of the policy proposals related to COVID are continued. Many of the other prior policy principles could apply to COVID situations.

PUBLIC COMMENT
Submitted by Elizabeth Cooper, RCAC 2 member, via phone call:
Hi, Hilda Perez and Layla Gonzalez I would like to thank you for your leadership on the Board of Governors. I look forward to whoever is elected to those positions - I hope they will be culturally and as well as linguistic considerate of the people they represent. Also I would like the Board members to give more information of the upcoming elections for your two positions. I would hope that the chair of the ECAC and ECAC members put this as an item on the agenda as soon as possible. Thank you.

Estela Lara, RCAC 2 Chair, thanked Board Members Perez and Gonzalez for their years of understanding ECAC members. They both have done an excellent job and are great leaders. Board Member Perez responded that true leaders create leaders. She thanked members for bringing all the resources they have shared at ECAC meetings.

Member McFerson thanked Board Members Perez and Gonzalez for attending ECAC. She thanked them for representing the public. She really appreciates that. She noted that members need more diverse support during the pandemic.

COMMUNICATION AND COMMUNITY RELATIONS DEPARTMENT UPDATE
Auleria Eakins, Ed.D.

Auleria Eakins, Ed.D., MPA, Manager, CO&E, gave a Communications and Community Relations update (a copy of the report can be obtained from CO&E.):

CRC Updates
Francisco Oaxaca will join ECAC during the January meeting to provide ECAC with a comprehensive update on the status and programs at Community Resource Centers. Meanwhile all of its centers continue to offer fitness, health education and healthy cooking and nutrition classes for both Adults and Children.

Reminders
There have been recent changes with COVID-19. Members are invited to participate in the COVID-19 talk with Dr. Seidman on December 14 from 2-3 pm.

ECAC Meeting Survey
Members will soon be receiving a ECAC meeting survey to assist Community Outreach & Engagement with understanding their thoughts about their current meeting experience and
where there may be opportunities to improve. Please take the time to participate as it will greatly assist with future engagement efforts.

RCAC Reconvening
CO&E will be working to reconvene the RCACs during the first quarter of 2022. The plan is to roll out next steps during the January 2022 meeting.

Black History Update
Staff will be reaching out to the Black History ad-hoc committee to schedule a project update. During this meeting staff will share with the committee progress made towards the February 2022 activities and get any feedback as needed.

November and December Stipends and Holiday Bonus
By now members should have begun receiving a stipend and bonus payment. Some members have reached out because they have not received their stipends. Depending on their RCAC meeting cycle they should have received a stipend in November.

Response to forming Ad-Hoc Committees
She reminded the committee that ad hocs are formed at the will of the ECAC on an as needed basis. Any additional request or recommendations for specific programs or projects can be emailed directly to the staff responsible for the subject matter area. They may also work with their Field Specialist for assistance to make those contacts.

Submitted by Elizabeth Cooper, RCAC 2 member, via phone call:
Dr. Eakins, as a member of the RCACs, I would like to see in the coming year of 2022 more involvement from the RCAC members in community decisions, decisions that affect the RCACs (i.e., in person or virtually etc.) Finally, while there have been many challenges in our lives, to you I would like to say than you than you thank you to your staff for the encouragement and support to me and I’m sure to other RCAC members. I feel like they are members of my family feud (smile :>) - Have a happy holiday!

Board Member Gonzalez asked Ms. De La Torre when members can expect to receive their tax forms from L.A. Care. Ms. De La Torre responded that she will confirm the date they will be distributed with the Finance department and report back to ECAC at the next meeting.

MEMBER ISSUES
Submitted by Carolyn Rogers Navarro, via text:
Stop using weirdo doctors and contractors to “service” members and then you retaliate if members or their guardian complain, stop intentionally making it difficult to locate meetings on your webpage! I’m delayed attending this meeting
because of your confusing info on your meetings pg. This does not clearly show how to attend meeting, I do not care where else it’s listed, this is confusing to anyone looking up your meetings **Image is attached** The aforementioned screenshot shows the wrong phone number to comment. I’m listening to verify my comment is read without personal attacks from moderator pursuant to Brown Act.

No member issues were discussed.

NEW BUSINESS

MOTION TO ECAC

Submitted by Elizabeth Cooper, RCAC 2 member, via phone call:
Madam Chair and members of the ECAC, I do not disagree with the motions submitted for ECACs consideration and vote, but I am concerned that RCAC participation might not be included. I am concerned how motions are presented without RCAC member input. I would respectfully request that you and the members of the committee have the LA Care field specialists communicate with their respective members on items on the agenda etc.

Submitted by Rayshell Chambers, via phone call:
As a black community leader and resident of LA County. I agree that we need an ad hoc committee relative to health and mental health disparities that allows for public input.

Member McClain presented the following motion to ECAC:

To create an ad-hoc committee to make recommendations to ECAC on an event(s) or education program that focus on disability awareness for the community during Disability Awareness month held October 2022.

Member McClain stated that this is a topic that she is very passionate about. She noted that in the past there were two events regarding this topic. She would like this to be done on an annual basis and would like to begin working on it early.

Member Lara asked how can this be done on an annual basis if it’s being discussed by an ad hoc. Ms. De La Torre recommended creating the ad hoc and present the recommendations to ECAC for a decision.

(Member McFerson, Member Sanchez, Member Cynthia Conteas-Wood, and Board Member Perez left the meeting.)
Submitted by Elizabeth Cooper, *RCAC 2 member*, via phone call:

*Madam Chair and members of the ECAC, I do not disagree with the motions submitted for ECACs consideration and vote, but I am concerned that RCAC participation might not be included. I am concerned how motions are presented without RCAC member input. I would respectfully request that you and the members of the committee have the LA Care field specialists communicate with their respective members on items on the agenda etc.***

Member McClain presented the following motion to ECAC:

*Motion: To create an ad-hoc committee formed solely to make recommendations on African American Health Disparities to be shared with L.A. Care’s Equity Steering Committee staff.*

Member McFerson thanked the committee for listening to her and placing the motion on the agenda and Member McClain for presenting the motion. She asked that staff give the committee prior knowledge of what will be presented so members can come up with meeting dates. She said they will need to discuss how many members will participate and what the budget will be. They will also need to select the guest speakers for the task force. She noted they may also discuss erasing the stigma associated with COVID-19 and African Americans. They may also need to involve the public virtually as well.

Member McClain stated that she believed the ad hoc was strictly to make recommendations to the Equity Steering Committee staff with regard to disparities affecting African Americans.

Board Member Gonzalez stated that from her understanding ad hoc committees do not include members of the public. It's only for select committee members to discuss a side topic regarding the committee and plans that they have.

Chairperson Vazquez stated that these ECAC committees are committed here during ECAC for meetings amongst members and discuss the recommendations with ECAC.

Member McFerson stated they need to know the dates and who is going to participate in the ad hoc. They can then discuss the topic monthly and give the Board some ideas.

**Ad hoc committee’s members:**
- Tonya Byrd, *RCAC 9 Chair*
- Deaka McClain, *Member At-Large*
- Russel Mahler, *RCAC 1 Chair*
- Andria McFerson, *RCAC 6 Chair*
- Ana Romo, *RCAC 8 Chair*

**Approved by roll call.**
12 AYES (Byrd, Conteas-Wood, Hernandez De Cordero, Mahler, McClain, McFerson, Refugio, Romo, Salazar, Sanchez and Vazquez)

(Member Silvia Poz, *RCAC 4 chair*, did not vote due to technical difficulties.)
Submitted by Elizabeth Cooper, *RCAC 2 member*, via phone call:

*Good morning Madam Chair and members of the ECAC (read out), and staff, and public. I would like to first wish each of you a happy holiday season for the month of December 2021. Although there are many issues, I would like you to please take notice of my public comment. I feel my point of authority comes from the ENABLING LEGISLATION of April the 2nd 1999 from the CA dept. of health services. The reason why mention the enabling legislation is to show the importance of public participation in LA Care meetings. I would like to address the issue of the public comment at the end of the meeting. The LA Care Board of Governors and some organizations have public comments at the beginning of the meeting where it is so important. I object to having public comments at the end of the meeting. I feel it is most important the public comments be at the beginning of the meeting. Madam Chair, I would strongly recommend that you and the members of the ECAC reconsider that public comments be at the beginning of the meeting to get the most value from public participation.*

Submitted by Nakeya Fields, *LCSW, Licensed Clinical Social Worker*, via email:

*Chair, Black Mental Health Task Force*

*Hello Committee,*

*Thank you for allowing public comment on the important matter of access to healthcare. The Black Mental Health Task Force has built a coalition of organizational partners and community stakeholders to lead the strategic planning and oversight efforts to address barriers nonprofit 501c3 organizations experience with billing for Medi-Cal services to improve the physical and mental well-being of Black and brown mothers and children statewide. If many in our community are in impacted my healthcare, policies such as how medical is billing is accessed and utilized, we want partners such as La CARE TO WORK WITH US AND NOT AGAINST US. We also aim everyday to empower happy and healthy joyous births and family connection. We, the Black Mental Health Task Force, a Task Force created from a motion passed at the Department of Mental Health Black & African Heritage UsCC Stakeholder Meetings, invite LA Care to actively be a part of the change that is needed. If the Inglewood center is closed*
until may 2022 what are the alternatives for care for the primarily black community that reside in those areas. Can we step in to be of service? Please contact us at hello@blackmentalhealth.net or visit us at www.blackmentalhealthtaskforce.net to learn more about how we can support you. We can do outreach events and we have partners that can support us to reach more of us. Let's support each other and work together to make a difference in wellness for our most vulnerable and underserved. The data shows the need it there and now you have a group of us willing to put in the work. We look forward to working with you.

With good energy,
Nakeya Fields, LCSW
Chair, Black Mental Health Task Force
Co-Lead/Steering Team, LACDPH San Gabriel Valley African American Infant & Maternal Mortality Community Action Team
President, Therapeutic Play Foundation
www.blackmentalhealthtaskforce.net

Submitted by Carolyn Rogers Navarro, via text:
General comment, why aren’t you talking about abuses against special needs people, we were never surveyed once about the weirdo Synermed “doctors” and workers!? ^for 12-8 meeting

RESPECTFULLY SUBMITTED BY:
Victor Rodriguez, Board Specialist II, Board Services
Malou Balones, Board Specialist III, Board Services
Linda Merkens, Senior Manager, Board Services

APPROVED BY
Fatima Vasquez (due to public health orders the document will be signed when it is possible)
Fatima Vasquez, ECAC Chair ________________

Date ________________ 1/12/2022 ________________

ADJOURNMENT
The meeting was adjourned at 1:35 p.m.