CAN Community Council Meeting Notes Monday, December 12, 2022 Zoom Video Conference

Present: Nancy Gilliam, Kelly Crook, Caroline Reynolds, Rachel Hampton, Donovon DePriest, Laura Parton, Nora Comstock, Jenzie Zane, Lydia Galvan

Staff Present: Jelina Tunstill, Raul Alvarez, Carlos Soto

Guests: Batool Abbasi, Ara Merjanian, Ricardo Garay

Call to Order and Announcements	Rachel called the meeting to order at 6:06 pm. A quorum was present.
Approval of October 17, 2022 and November 28, 2022 Minutes	The October 17, 2022 and November 28, 2022 minutes were unanimously approved on a motion by Nora and a second by Caroline.
CAN Community Council Chair's Report	Summary: Rachel encouraged members who were unable to attend the October meeting to watch the recording of the October meeting. We heard from the Asian, African American, and Latinx Behavioral Networks that were speaking about the unique needs and challenges for their respective communities. She gave a brief update on the CAN Board meeting where they heard from Sarah Eckhardt who talked about her legislative priorities and some CAN members did as well. She stated that the 2023 CAN Board Chair will be Vanessa Fuentes and Donovon will be the 2023 CAN Community Council Chair. She recognized CAN Community Council Member Lou Serna for participating in the CAN CC the past 3 years as he falls off the council.
Executive Director's Report	Summary: Raul stated that the last Board meeting was a legislative preview. We will turn it into a video so you can watch if you weren't able to attend. We had Senator Eckhardt, Brie Franco from the City, Julie Wheeler from the County, Edna Butts from AISD, and Dr. Tielle from DVISD present on their legislative issues of interest. He stated we are inviting people to participate in the Spanish Resource and Engagement Committee which is the mental health work for Spanish speaking communities. We had a Language Access Action Team meeting last week where we decided the other two languages based off partner language data. The languages will be Arabic and Vietnamese. This year we had 4 Expanding Opportunity Forums and have had discussions around ensuring an equitable economic recovery so next year we will have

an Expanding Opportunity Planning Team that will look at the takeaways from all these discussions, data, and presentations and determine if there is a role for CAN. Lastly, we will continue the Race Equity Principles in Practice training next year.

Q&A: What are the top 3 or 4 legislative priorities that were stated at the CAN Board meeting? Raul stated that a lot of information was shared from each presenter. We will share the slide deck and video.

Presentation on Peer Support, Community Health Workers, and Social Determinants of Health

Ricardo Garay Presentation Summary: Ricardo started off his presentation explaining how being a community health worker was important to him. He explained that he was born in Honduras and helped with medical brigades as a teenager. He had his first encounter with the US health care system in 2000 and was unimpressed with what he experienced. When he realized that the US healthcare system did not look like him or understand him and was disconnected from other healthcare networks, he began advocating for community health workers. People in communities have been natural helpers for centuries, but nationally, community health workers began trying to formalize the community health worker role in 1970 when 500 community health workers and their supporters joined together with the APHA to form the new professional special primary interest group. In 2000, the Community Health Worker policy statement was officially drafted and officially adopted in 2002. Texas was the first state to put in place statewide training and credentialing standards for CHWs. At the end of 2021, there were 4,208 certified CHWs in Texas, which is an increase of 11% compared to 3,776 certified CHWs at the end of 2020.

Community health workers build trust in the community and work to address social determinants of health instead of just medical diagnosis. Community health workers also work to identify health inequities and creating interventions upstream and downstream to prevent them. The state of Texas defines community health worker as a person who, with or without compensation, provides a liaison between health care providers and patients through activities such as assisting in case conferences, providing patient education, making referrals to health and social services, conducting needs assessments, distributing surveys to identify barriers to health care delivery, making home visits and providing bilingual language services. Ricardo then shared policies that are in place to help respect, partner with, and protect CHWs. Dell Medical School is tapping into local associations to discuss community health workers. They have weekly huddles where they listen to presenters

Adjournment	Rachel adjourned the meeting 7:50 pm.
Workplan Discussion	Donovon stated that when we breakout into our work groups, it is important that we focus on the key takeaways from the presentations that we heard this year and what we plan on recommending in our work group reports. The focus of the January meeting will be writing our reports.
	Is the Language Access Project for Mental Health and Wellness compatible with the model of CHWs that you have presented? Yes, we have an application for consultation on our website.
	What percentage of CHW's are paid versus unpaid and what is the preferred or typical compensation rate? It's difficult to identify the amount of unpaid or underpaid CHWs. Ricardo shared a link to the Bureau of Labor Statistics, which provides an average of how much CHWs receive in compensation on average.
	Who employs most of the CHWs In Austin? CHWs are hired everywhere. APH had a cohort last year and a new cohort will begin this year. Insurance companies have hired CHWs, community care, Central Health, Dell Medical school, each with a handful of CHWs.
	Q&A: What are some of the biggest gaps that you have seen with implementing CHWs? One of the biggest challenges is training CHWs, placing CHWs, language access, and coordinating across community-based organizations. Having a neutral place to train CHWs would be a way to offset some of those challenges.
	from other associations and have access to trainings such as trauma informed care or mental health first aid. Dell Medical School tries to think about sustainability of the profession.