

ACCEPTANCE OF SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM-EDUCATION (SNAP-ED) NUTRITION EDUCATION AND OBESITY PREVENTION (NEOP) FUNDS

Thomas R. Coleman, M.D., M.S.

Health Services Advisory Board Meeting

September 4, 2018







WE KNOW...



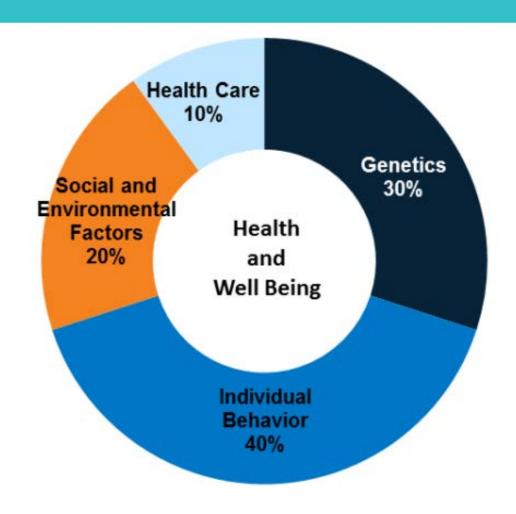
THAT THREE NUMBERS AFFECT US ALL:



1 World Health Organization (WHO). "The Global Strategy on Diet, Physical Activity and Health." http://www.who.int/dietphysicalactivity/media/en/gsfs_general.pdf (Accessed September 22, 2011). 2 3Four50, www.3four50.com (Accessed September 22, 2011).

IMPACT OF DIFFERENT FACTORS ON RISK OF PREMATURE DEATH





THE SNAP-ED NEOP PROGRAM



BACKGROUND



- Core and sustained source of funding for addressing obesity and chronic disease prevention
 - Started in 2012; currently in 3rd cycle of program
- Funding: United States Department of Agriculture (USDA) via the California
 Department of Public Health.
 - Average award: \$4 million annually
- Goal: Improve the likelihood that individuals eligible for SNAP will make healthy food choices within a limited budget, and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans.

PROGRAM GROWTH

community, retail,

worksite, faith-

settings

based and school

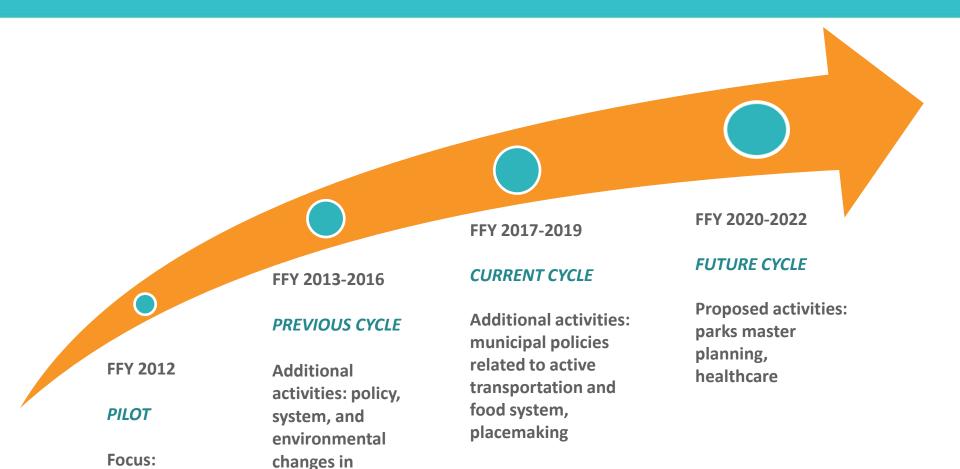
nutrition

education and

community

engagement





IMPROVING HEALTH EQUITY COUNTYWIDE



TARGET AUDIENCE

- Interventions occur throughout the county and across the lifespan
- Low-income individuals who qualify for SNAP benefits or other federal assistance programs
 - Census tract where more than 50% of the households earn
 below 185% of the Federal Poverty Level
 - Employees that make below \$17.79/hour
 - Students that qualify for Free and Reduced Price Meals

STATE OBJECTIVES



BEHAVIOR CHANGES

- Increase consumption of healthy foods
- 2. Improve food resource management
- 3. Increase physical activity

POLICY, SYSTEM, AND ENVIRONMENTAL CHANGES

- 4. Increase access to healthy dietary choices
- 5. Increase access to physical activity opportunities



County of San
Diego's SNAP-Ed
Program is Making
Healthy Choices
Easier Where
People...

LIVE

LEARN

WORK

SHOP

Place Matters

The NEOP program is going beyond educating individuals and families on how to eat healthy and be physically active; we are also shaping neighborhood settings to foster health by multi-layering a combination of individual, environmental, and community level interventions.



BARRIERS AND SOLUTIONS



Barriers	Solutions
Meeting demand for services	Focus on improving health equity; outreaching to diverse communities
Funding decreasing	Implement sustainable changes
Keeping community engaged	Healthy Cities, Healthy Residents project

SUCCESS STORY: LIVE WELL COMMUNITY MARKET PROGRAM



EL CAJON: REMA HALAL FOODS









SUCCESS STORY: WELLNESS CHAMPIONS



CHULA VISTA: LITTLE ANGELS CENTER





HEALTHY CITIES, HEALTHY RESIDENTS PROJECT





Objectives

- Build CBO capacity to engage residents and work with cities on policy change
- Advance policies in active transportation and food systems
- Implement neighborhood environmental changes



HCHR TIMELINE 2017-2019





1. Capacity Building



Build the capacity of CBOs, HCHR coalitions, and low-income residents on PSE, advocacy, and leadership.

Phase 1

March 2017- September 2017

3. Healthy City Planning



Conduct active transportation planning; develop food policy language; identify environmental change.

2. Prioritize Goals



Expand coalition; conduct policy scans and environmental assessments, prioritize policy targets; and build alliances.

Phase 2 October 2017-December 2017

4. Adoption, Implementation



Policy adoption and environmental change implementation.

METRICS



IN FFY 2017 AND FFY 2018...

- Operational metrics
 - 42 partnerships formed
- Programmatic metrics
 - 18 child care providers designated Health and Wellness Champions
 - 10 food retailers enrolled in the Live Well Community Market Program
 - 20,000 people received nutrition education
 - 55 sites made policy, system, and/or environmental changes

OUTCOMES



Deliverable	Annual Reach FFY 2017	Estimated Reach FFY 2013 - FFY 2017
Direct Education	9,139 individuals	55,500 individuals
Indirect Education	27,811 individuals	166,000 individuals
PSE Locations (e.g., community, school, worksite, retailer, faith-based sites)	55 sites	140 sites
Success Stories	7 stories	26 stories

FFY 2013-2016 BUDGET



Federal Fiscal Year	Budget
FFY 2013	\$1,522,778
FFY 2014	\$4,288,692
FFY 2015	\$4,288,692
FFY 2016	\$4,818,488

NEOP BUDGET FFY 2017-2019



Federal Fiscal Year	Original Projected Budget	Actual Budget
FFY 2017	\$3,870,545	\$4,600,545
FFY 2018	\$3,880,063	\$4,462,072
FFY 2019	\$3,880,063	\$3,891,119
Total	\$11,630,671	\$12,953,736

The cumulative FFY 2017-2019 actual budget is \$1,323,066 more than the original projected amount.

NEW GRANT CYCLE = NEW OPPORTUNITIES



THREE MORE YEARS OF NEOP FUNDING OCTOBER 1, 2019 – SEPTEMBER 30, 2022

Annual projection:

\$3,704,059 + 15% additional = approximately \$4,259,668

Total over three years:

\$12,779,004



REQUEST FOR HSAB SUPPORT



REQUEST



BOARD LETTER – Vote to support the following actions:

- Accept SNAP-Ed NEOP grant funds from the California Department of Public Health in an amount not to exceed \$1,323,066 for the period of October 1, 2018 through September 30, 2019.
- Accept SNAP-Ed NEOP grant funds from the California Department of Public Health in the amount of approximately \$12,779,004, for the period of October 1, 2019 through September 30, 2022.
- 3. Authorize the Director, Department of Purchasing and Contracting, to issue Competitive Solicitations for NEOP programs and services, and upon successful negotiations and determination of a fair and reasonable price, award contracts for a term of up to one year, with two option years, and up to an additional six months if needed, and to amend the contracts as needed, to reflect changes to services and funding.
- 4. Authorize the Agency Director, HHSA, to pursue future funding opportunities related to the support of chronic disease prevention efforts.

DISCUSSION



QUESTIONS?

Thomas R. Coleman, M.D., M.S.

Chief, Maternal, Child, and Family Health Services (619) 692-8819







On May 17, 2016, the County of San Diego Health and Human Services Agency Department of Public Health Services received accreditation from the Public Health Accreditation Board.

BOARD OF SUPERVISORS



COUNTY OF SAN DIEGO

AGENDA ITEM

AND OF SOI ERVISOR

GREG COX

DIANNE JACOB Second District

KRISTIN GASPAR Third District

RON ROBERTS Fourth District

> BILL HORN Fifth District

DATE: October 9, 2018

XX

TO: Board of Supervisors

SUBJECT: ACCEPT SNAP-ED NUTRITION EDUCATION AND OBESITY PREVENTION GRANT FUNDS (DISTRICTS: ALL)

OVERVIEW

On October 4, 2016 (03), the Board of Supervisors approved acceptance of the Supplemental Nutrition Assistance Program-Education (SNAP-Ed) Nutrition Education and Obesity Prevention (NEOP) grant from the California Department of Public Health (CDPH). NEOP funding originates from the United States Department of Agriculture (USDA). The current three-year grant cycle with the CDPH began on October 1, 2016 and ends on September 30, 2019. The original projected amount for the three-year term was \$11,630,671. CDPH increased the County's budget by \$1,323,066 for a revised grant amount of \$12,953,737.

The next three-year grant cycle begins on October 1, 2019 and ends on September 30, 2022. The projected amount for the new three-year term is \$11,112,177 with approximate additional funds of \$1,666,827, for a total projected amount of approximately \$12,779,004. The County of San Diego's NEOP program supports the *Live Well San Diego* vision by providing nutrition education and implementing policy, systems, and environmental changes to prevent or reduce diet-related chronic disease and obesity among low-income residents and promoting a healthy, safe, and thriving community.

Today's action requests Board authority to accept the increased NEOP grant funds from the State of California for the current grant cycle of October 1, 2016 through September 30, 2019, and for the next three-year grant cycle of October 1, 2019 through September 30, 2022, and to authorize the Director, Health and Human Services Agency (HHSA), to execute the new FFY 2020-2022 NEOP grant agreement.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

1. Authorize the acceptance of additional Nutrition Education and Obesity Prevention (NEOP) grant funds from the California Department of Public Health (CDPH) in an amount not to exceed \$1,323,066 for the period of October 1, 2018 through September 30, 2019. Authorize the Director, Health and Human Services Agency (HHSA), to execute all required grant documents, including any annual extensions, amendments

SUBJECT: ACCEPT SNAP-ED NUTRITION EDUCATION AND OBESITY PREVENTION GRANT FUNDS (DISTRICTS: ALL)

and/or revisions thereto that do not materially impact or alter the services or funding level.

- 2. Authorize the acceptance of NEOP grant funds from CDPH in the amount of \$11,112,177, with approximate additional funds of \$1,666,827, for a total projected amount of approximately \$12,779,004, for the period of October 1, 2019 through September 30, 2022. Authorize the Director, HHSA, to execute all required grant documents, including any annual extensions, amendments and/or revisions thereto that do not materially impact or alter the services or funding level.
- 3. In accordance with Section 401, Article XXIII of the County Administrative Code, authorize the Director, Department of Purchasing and Contracting, to issue Competitive Solicitations for NEOP programs and services, and upon successful negotiations and determination of a fair and reasonable price, award contracts for a term of up to one year, with two option years, and up to an additional six months if needed, and to amend the contracts as needed, to reflect changes to services and funding.
- 4. Authorize the Director, HHSA, to pursue future funding opportunities related to the support of chronic disease prevention efforts.

FISCAL IMPACT

Funds for this request are included in the Fiscal Year 2018-20 Operational Plan in Health & Human Services Agency. If approved, this request will result in costs and revenue of approximately \$4,033,857 in Fiscal Year 2018-19 and costs and revenue of approximately \$4,689,104 in Fiscal Year 2019-20. The funding source is Nutrition Education and Obesity Prevention grant funds from the California Department of Public Health. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

The Health Services Advisory Board will vote to approve or reject this action at its meeting on September 4, 2018.

SUBJECT: ACCEPT SNAP-ED NUTRITION EDUCATION AND OBESITY PREVENTION GRANT FUNDS (DISTRICTS: ALL)

BACKGROUND

The United States Department of Agriculture Supplemental Nutrition Assistance Program (SNAP) plays a vital role in helping to improve nutrition in the United States, particularly among low-income children and adults. SNAP-Ed is a component of SNAP, and the program is known in California as the Nutrition Education and Obesity Prevention (NEOP) program. The primary goal of NEOP is to improve the likelihood that low-income individuals will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans. NEOP provides nutrition education and advances policy, systems, and environmental changes where low-income residents live, work, learn, and shop. This includes working with school districts, after-school programs, faith-based organizations, businesses and worksites, small retailers, local jurisdictions, child care centers, and directly with residents and communities to create environments that support access to healthy food and active living opportunities.

The Health and Human Services Agency's "3-4-50" chronic disease concept holds that three behaviors (poor diet, physical inactivity, and tobacco use) contribute to four chronic diseases (cancer, heart disease and stroke, type 2 diabetes, and pulmonary diseases) that cause over 50 percent of all deaths worldwide. Deaths from these chronic diseases accounted for 53 percent of all deaths in San Diego County in 2015. The NEOP program addresses the "3-4-50" concept by improving access to healthy food and physical activity. These efforts help to reduce risk factors associated with the leading causes of death and disability in the County.

The NEOP program achieved the following outcomes in FFY 2017 and FFY 2018:

- Operational outcomes:
 - 42 partnerships formed to implement NEOP related policy, system, and/or environmental changes
- Programmatic outcomes:
 - 18 child care providers designated Health and Wellness Champions
 - 10 food retailers enrolled in the *Live Well Community Market Program*
 - 20,000 people received nutrition education
 - 55 sites made NEOP related policy, system, and/or environmental changes

On October 4, 2016 (03), the Board of Supervisors authorized the acceptance of SNAP-Ed grant funds for the current grant period of October 1, 2016 through September 30, 2019. Each year, the California Department of Public Health (CDPH) reallocates additional funding to select Local Health Departments based on statewide unspent money from the previous fiscal year, which averages approximately 15% of their annual budget. Consequently, CDPH has awarded the County of San Diego approximately \$1,323,066 in additional funding for the current grant period.

SUBJECT: ACCEPT SNAP-ED NUTRITION EDUCATION AND OBESITY PREVENTION GRANT FUNDS (DISTRICTS: ALL)

On May 23, 2018, CDPH announced the County of San Diego will receive base funding and additional funding for the new three-year NEOP grant period of October 1, 2019 through September 30, 2022. Accordingly, Board action is requested to accept the NEOP grant funds and to authorize the Director, Health and Human Services Agency, to execute the new NEOP grant agreement and any required grant documents, amendments, and extensions during this grant period.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Building Better Health Initiative of the County of San Diego's 2018-2023 Strategic Plan, as well as the *Live Well San Diego* vision, by providing services to establish supportive food and physical activity environments to make healthy behavior choices more readily accessible to San Diego County residents who are SNAP participants and to those eligible at or below 185 percent of the Federal Poverty Level. Additionally, the proposed actions support the Building Better Health and Living Safely initiatives in the County of San Diego's 2018-2023 Strategic Plan as well as the *Live Well San Diego* indicators of life expectancy, quality of life, physical environment, built environment, and community involvement by pursuing policy changes for a healthy environment to make it easier for residents to make healthy choices.

Respectfully submitted,

USE "INSERT PICTURE" FUNCTION TO INSERT SIGNATURE

HELEN N. ROBBINS-MEYER Chief Administrative Officer

ATTACHMENT(S) N/A

SUBJECT: ACCEPT SNAP-ED NUTRITION EDUCATION AND OBESITY

PREVENTION GRANT FUNDS (DISTRICTS: ALL)

AGENDA ITEM INFORMATION SHEET

REQUIRES FOUR VOTES: \Box Yes	⊠ No		
WRITTEN DISCLOSURE PER COUNTY CH ☐ Yes ⊠ No	ARTER SECTION 1000.1 REQUIRED		
PREVIOUS RELEVANT BOARD ACTIONS: October 4, 2016 (03), authorized the acceptance of the Supplemental Nutrition Assistance Program-Education (SNAP-Ed) Nutrition Education and Obesity Prevention grant; October 9, 2012 (09), approved the acceptance of the NEOP grant and the appropriation of NEOP grant funds; October 25, 2011 (8), authorized the acceptance of United States Department of Agriculture funds for the CalFresh Community Nutrition Project and SNAP Participation Grant; July 13, 2010 (10), received and approved the County's Health Strategy Agenda: Building Better Health, authorized Count staff to seek and apply for grants that would further the County's Health Strategy Agenda: Building Better Health, and directed the Chief Administrative Officer to develop individual plans for <i>Safe and Thriving</i> communities.			
BOARD POLICIES APPLICABLE: Board Policy A-87 - Competitive Procurement			
BOARD POLICY STATEMENTS: N/A			
MANDATORY COMPLIANCE: N/A			
ORACLE AWARD NUMBER(S) AND CONTRACT AND/OR REQUISITION NUMBER(S): Current contracts: 554660, 554695, 555349, 555350, 555351, 555515, 556000, 556878, 557265, 558248			
ORIGINATING DEPARTMENT: Health and Human Services Agency			
OTHER CONCURRENCE(S): Department of Purchasing and Contracting			
CONTACT PERSON(S):			
Wilma J. Wooten, M.D., M.P.H.	Thomas R. Coleman, M.D., M.S.		
Name (619) 542-4177	Name (619) 692-8819		
Phone	Phone		
Wilma.wooten@sdcounty.ca.gov	Thomas.coleman@sdcounty.ca.gov F-mail		
P=111211	С=111ИП		







The Wellness Champion Program: Nurturing Healthy Habits in Early Childhood

Intervention Summary

Despite declining rates in recent years, childhood obesity continues to be a public health concern in San Diego County. According to the 2016 State of Childhood Obesity in San Diego County report, obesity rates for Hispanic children and children of low-income families are twice as high as that of White students and children who do not come from low-income families. Addressing obesity prevention in the preschool years when eating behaviors and physical activity habits are formed is crucial.

The YMCA of San Diego County Childcare Resource Service's Wellness Champion Program helps childcare providers improve the nutrition and physical activity environments in childcare settings and provides support for providers who meet program criteria. The Wellness Champion Program is a project of *Live Well San Diego*: Healthy Works Nutrition Education and Obesity Prevention Program and is implemented by the YMCA of San Diego County Childcare Resource Service. This project supports Live Well San Diego, the County's vision of a region that is building better health, living safely, and thriving.

Wellness Champion providers are licensed childcare providers who agree to receive training and uphold best practices in physical activity and nutrition.² With the help of the Wellness Champion Program, the Little Angels Center in the City of Chula Vista made huge strides in improving its wellness practices.

The Little Angels Center serves approximately 30 children from mostly Hispanic and lowincome families. Owner and director, Evelyn Huitron, enrolled her preschool site in the

¹ State of Childhood Obesity in San Diego County, Childhood Obesity Initiative, 2016. https://issuu.com/coisandiego/docs/coi-stateofchildhoodobesity-2016?e=23370355/49349469

² Best practices in physical activity and nutrition includes compliance with the Child and Adult Care Food Program nutrition guidelines.

Wellness Champion program with the hopes of improving its wellness practices and the overall quality of care for the children. With hands-on support and on-site technical assistance visits from YMCA health educators, the site achieved the following successes over the course of three months:

- Implemented family-style meals;
- Replaced sugary treats with healthy snacks and non-food activities during celebrations;
- Implemented a site-wide wellness policy that addresses nutrition, physical activity, and beverages;
- Incorporated training in nutrition and physical activity during staff meetings:
- Built and installed a garden in the outdoor space; and
- Enhanced the outdoor play areas with playground stencils.



As a result of the program, Ms. Huitron and her staff gained knowledge and skills to improve the nutrition environment at her center. Because the children have the opportunity to grow vegetables in the garden on-site, they are more willing to try healthy foods. Ms. Huitron expressed appreciation for the hands-on nature of the program and explained some of the ways in which the center has benefit from the experience:

"After attending the Wellness Champion workshop, we started implementing family-style meals. With some practice, meal times have gotten much better, and we've noticed less wasted food. Meals have been more relaxed and enjoyable because the teachers are taking the time to sit with the kids and talk about the food they are eating. We've even been able to serve the vegetables we grew in the garden. The kids really got excited to eat the carrots and cucumber they grew themselves!"









Description of Barriers Encountered and Identified or Proposed Solutions

Implementing family-style meals was a challenge for the preschool staff. Figuring out an efficient system for preparing and serving the food took some planning. Meal times also took longer and required more patience from staff as they assisted the children in serving themselves. Many spills occurred during the first few weeks, but with practice and consistency, the children became more independent and required less assistance.

To better facilitate family-style meals, program supplies such as child-sized plates, pitchers, utensils, and serving dishes will be provided to the site. Smaller plates and utensils will make it easier for children to serve themselves with little assistance from staff. Spill-proof pitchers will also help prevent messes during meals.

Future Directions/Sustainable Success

The short-term goals include:

 Designate one staff member to be a "physical activity champion" to plan special weekly structured activities using a physical activity curriculum and supplies provided by the Wellness Champion Program.

- Receive technical assistance from University of California, San Diego Center for Community Health to become a designated breastfeeding- friendly childcare site.
- After one year, renew status as a Wellness Champion by completing an assessment.

The long-term goals include:

- Engage families in wellness activities.
- Sustain and expand the garden while coordinating seasonal harvest events.

Contact Information about this Narrative

Local Health Department Grant Name: County of San Diego

Author's Name: Josh Bariuan

LHD Contact: Lindsay Riedel

Phone: 619-692-8255

Email: Lindsay.Riedel@sdcounty.ca.gov

This material was produced by the California Department of Public Health's Nutrition Education and Obesity Prevention Branch with funding from USDA SNAP-Ed, known in California as CalFresh. These institutions are equal opportunity providers and employers. CalFresh provides assistance to low-income households and can help buy nutritious food for better health. For CalFresh information, call 1-877-847-3663. For important nutrition information, visit www.CaChampionsForChange.net.



Changes to HSAB Ordinance and Bylaws

Health Services Advisory Board (HSAB)
September 4, 2018
Health and Human Services Agency







Amendments to HSAB Ordinance & Bylaws in 2016



- Replaced the Alcohol & Drug Abuse Advisory Board and Mental Health Advisory Board with Behavioral Health Services Advisory Board.
- Reduced the membership size from eighteen (18) to seventeen (17).
- Changed the name of the Council of Community Clinics to Health Center Partners of Southern California.

Proposed Amendments to HSAB Ordinance and Bylaws



- Update Term Limits
 - Create a contingency plan for vacancies and reappointments when new Board of Supervisors are appointed to reflect County Policy A-74
- Approve Changes to Ordinance and Bylaws
- Seek Approval from Board of Supervisors in December 2018

Discussion and Approval of Changes









On May 17, 2016, the County of San Diego Health and Human Services Agency Department of Public Health Services received accreditation from the Public Health Accreditation Board.

Print

San Diego County Code of Administrative Ordinances

ARTICLE LV SAN DIEGO COUNTY HEALTH SERVICES ADVISORY BOARD*

*Note -- Article LV, San Diego County Health Services Advisory Board, consisting of §§ 861-861.11, added by Ord. No. 8123 (N.S.), adopted 8-4-92, effective 9-3-92.

Cross reference(s) -- Definitions, § 20 et seq.; general rules, § 50 et seq.; powers and duties of officers, boards, and commissions, § 51; appointment and removal, § 52.

SEC. 861. SAN DIEGO COUNTY HEALTH SERVICES ADVISORY BOARD.

There is hereby created and established the San Diego County Health Services Advisory Board. The Health Services Advisory Board shall constitute a citizens advisory board on public health as required by Section 710 of the County Charter. This Board is established to advise the Board of Supervisors, and the Health and Human Services Agency regarding programs, issues and budget items pertaining to the Health and Human Services Agency as defined in Section 861.8 of this County Administrative Code.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.1. MEMBERSHIP AND SELECTION.

The Board shall consist of seventeen (17) members. All members shall represent the entire area and population of the County in the performance of duties. Persons appointed to the Board shall have demonstrated interest and experience in the needs of the Health and Human Services Agency. The members shall serve during their terms at the pleasure of the Board of Supervisors and any member may be removed at any time by a majority vote of the Board of Supervisors or by the member's failure to meet the regularly scheduled meeting attendance requirements. All members shall be voting members of the Board, provided, however, that each member may designate an alternate in writing, and the alternate shall be entitled to vote on Board matters in the absence of the member.

Each member of the Board of Supervisors shall nominate and recommend for appointment by the Board of Supervisors two (2) members to the Board from the following categories:

Physicians representing traditional health care providers serving low income and indigent populations, each physician to be affiliated with one or more minority health care provider organizations in San Diego County;

Representatives of academic institutions active in the training and education of health professionals in San Diego County;

Representatives of business, recommended by the San Diego Regional Chamber of Commerce and other Chambers of Commerce located in San Diego County or by the San Diego County Taxpayers Association;

Representative of organized-labor groups active in the health care industry of San Diego County;

Representative of rural health organizations recommended by the Director of the Health and Human Services Agency and the Chief Administrative Officer to achieve geographic and ethnic balance;

Representatives of minority health organizations recommended by the Director of the Health and Human Services Agency and the Chief Administrative Officer to achieve geographic and ethnic balance;

Representatives of legal services organizations representing indigent populations; and

Others who are residents of San Diego County, consumers, or professional advocates.

In addition, the following seven (7) persons shall be members of the Board or shall designate representatives from their organizations who shall be members:

Chief Executive Officer of the San Diego County Medical Society,

President and Chief Executive Officer of the Hospital Association of San Diego and Imperial Counties,

Chief Executive Officer of the Health Center Partners of Southern California,

Chief Executive Officer of the Consumer Center for Health Education and Advocacy,

Chair of the San Diego County Behavioral Health Advisory Board,

Chair of the Healthy San Diego Professional Advisory Board, and

Chair of the Healthy San Diego Consumer Advisory Board.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 8910 (N.S.), effective 6-18-98; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15; amended by Ord. No. 10438 (N.S.), effective 10-13-16)

Cross reference(s) -- Board of supervisors, § 500 et seq.

SEC. 861.2. EXCLUSIONS.

(1) An employee of the County shall not serve as a voting member on the Board.

- (2) No person shall be appointed to the Board if by reason of such employment a conflict of interest could arise. Appointment by the court of an attorney to represent an individual shall not be considered a conflict of interest.
- (3) Members of County citizen advisory committees shall disclose to the Clerk of the Board of Supervisors in writing any outside employment or activity engaged in for compensation which relates to their County duties or to the functions and responsibilities of the County department or agency which they serve or which may be subject to approval by any County officer or employee.

No member of an advisory committee shall make, participate in making or in any way attempt to use his or her position as a member of an advisory committee to influence a decision in which he knows or has reason to know that he has a financial interest, except in those cases where the member is appointed to represent an entity or group having a financial interest in a matter coming within the citizen committee's area of responsibility.

No person shall be appointed to or serve on, an advisory committee which participates in the making of County contracts in which such person is financially interested within the terms of Government Code section 1090 et seq. This prohibition is not applicable to persons with "remote interests" as defined in subdivision (b) of Government Code Section 1091, provided that the person discloses the interest in accordance with subdivision (a) of Government Code Section 1091 and the person does not influence or attempt to influence other advisory committee members to act favorably in respect to the contract in which the person has a remote interest.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.3. TERM OF OFFICE.

Members nominated by a Supervisor shall serve a term of office concurrent with the term of office of their nominating Supervisor. The terms shall expire on the date of expiration of the term of the nominating member of the Board of Supervisors or at such time as said member of the Board of Supervisors ceases to hold office, whichever first occurs. The reelection of a member of the Board of Supervisors for a succeeding term shall not automatically extend the term of any board member.

The persons, if any, who are members of the Health Services Advisory Board because they hold one of the following positions or are designated by such person to represent their organization shall serve on the Board until a successor has been chosen for the position, at which time the successor shall become a member of the Board:

Chief Executive Officer of the San Diego County Medical Society;

President and Chief Executive Officer of the Hospital Association of San Diego and Imperial Counties;

Chief Executive Officer of the Health Center Partners of Southern California;

Chief Executive Officer of the Consumer Center for Health Education and Advocacy;

Chair of the San Diego County Behavioral Health Advisory Board;

Chair of the Healthy San Diego Professional Advisory Board; and

Chair of the Healthy San Diego Consumer Advisory Board.

Any member whose term has expired hereunder shall continue to discharge the duties as a member until a qualified successor has been appointed.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8910 (N.S.), effective 6-18-98; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15; amended by Ord. No. 10438 (N.S.), effective 10-13-16)

SEC. 861.4. VACANCIES.

A vacancy shall occur as a result of any of the following events before the expiration of the term:

- (1) The death of the incumbent.
- (2) The resignation of the incumbent.
- (3) Unexcused absences from more than one-third of the regularly scheduled meetings in any 12-month period or three consecutive regularly scheduled meetings.
 - (4) Or for any reason specified in Government Code Section 1770.

When a vacancy occurs as the result of missing one-third of the regularly scheduled meetings in one 12-month period or three consecutive regularly scheduled meetings, both the member, the nominating Supervisor, if any, the Chief Administrative Officer and the Director of the Health and Human Services Agency shall be notified by the Board Chair. Vacancies shall be filled by nomination as set forth in Section 861.1. (Exception: Board of Supervisors' appointees may not be removed without the approval of the appointing authority.)

If a vacancy occurs, a new appointee shall serve for the unexpired term of the member being replaced.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.5. ORGANIZATION.

- (a) Officers. The Board shall select from its membership a Chair and a Chair-Elect to serve for a two-year term. The maximum length of a given office shall be two consecutive terms.
- (b) Rules. The Board shall prepare and adopt the necessary rules and regulations for the conduct of its business.

- (c) Quorum. A majority of members currently appointed to the Board shall constitute a quorum. A majority of members in attendance shall be required to take action.
- (d) <u>Minutes.</u> The Board shall keep written minutes of its meetings, a copy of which shall be filed with the Clerk of the Board of Supervisors and posted on the HSAB webpage.
- (e) <u>Meetings</u>. The Board shall establish a regular meeting schedule and shall give public notice of the time and place of meetings in compliance with the requirements of the Brown Act. All meetings of the Board shall be open and public and all persons shall be permitted to attend any meetings of the Board.
- (f) Staff Requests. County citizen committees are charged with advising the Board of Supervisors on the policies the Board establishes to guide the various functions of the County, and on the established procedures by which such functions are performed. Unless specifically designated in their establishing authority, the advisory committees are not charged with advising the Chief Administrative Officer regarding his or her function and responsibility to carry out the Board's policy decisions. Recognizing that this delineation of administrative authority has been established in County Charter section 501.9-Non-interference, Board Policy A-98, and Board Policy A-72, requests from advisory committees which will involve response from County management staff should informally be in writing and signed by the Chair of the advisory committee. Staff response requiring less than four (4) hours to research, prepare and submit an answer to specific requests readily obtainable should be responded to in an expeditious manner by the office or department to which addressed or assigned. More involved requests shall be discussed by the Chief Administrative Officer with the Chair of the Board of Supervisors and if necessary the requestor, and docketed with the Board for its direction. If the Board directs the Chief Administrative Officer to respond to the request, the Chief Administrative Officer will assign the matter to the appropriate staff within the County organization and monitor its progress to assure complete, coordinated and timely response.
- (g) <u>Government Code section 1098:</u> County Citizen Committees shall be subject to the provisions of Government Code section 1098 Confidential information; use or disclosure for pecuniary gain.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.6. ESTABLISHMENT OF SUB-COMMITTEES.

- (a) <u>Standing Sub-committees</u>. The Board will appoint Standing Sub-committees in accordance with its by-laws. Any committee that functions regularly and whose membership is appointed annually shall be a Standing Sub-committee.
- (b) <u>Ad Hoc Sub-Committees</u>. The Board may appoint sub-committees for the purpose of carrying out the functions and duties of the Board. Any sub-committee appointed shall consist of not fewer than three members, including at least one voting Board member. The actions and recommendations of sub-committees shall not be deemed the action of the Board or its members.
- (c) <u>Volunteer and Consultant Services</u>. The Board shall engage the services of volunteer workers and consultants without salary as it may find necessary from time to time. Service of an

individual as a volunteer worker or as a consultant shall not be considered as service for or employment by the County.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8910 (N.S.), effective 6-18-98; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.7. COMPENSATION AND EXPENSES.

Members of the Board shall serve without compensation. Board members shall be reimbursed for expenses incurred in performing their duties under this article, including mileage reimbursement in accordance with applicable County Administrative Code provisions.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.8. DUTIES AND RESPONSIBILITIES.

The Board shall have the following duties and responsibilities:

- 1) To review and make recommendations on new policies and programs within the Health and Human Services Agency. Any policy or program advice by the Committee which impacts the administration of the County will be referred to the Chief Administrative Officer for his or her review and comment.
- 2) To review the Health and Human Services Agency's annual budget and provide written comments and recommendations to the Board of Supervisors and the Director of the Health and Human Services Agency.
- 3) To examine the variables which impact access to health care and to develop an integrated set of recommendations aimed at an improved health care delivery system. Develop recommendations which enhance coordination of the local health care system.
- 4) To review current and proposed health-related legislation and recommend support, opposition or propose change to the Board of Supervisors, and the Director of the Health and Human Services Agency to pursue further action through appropriate legislative channels.
- 5) To solicit and provide a forum for public input, advice, and proposed solutions and alternatives on critical health issues and problems in the community and faced by the County government.
- 6) To serve as the designated nominating authority for membership on designated advisory committees and forward these nominations to the Board of Supervisors for appointment.
- 7) To assist the Director of the Health and Human Services Agency in assessing those community issues which could result in a fiscal impact on the County government, and making recommendations regarding such impacts.
 - 8) To perform such other duties as may be assigned by the Board of Supervisors.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

Cross reference(s) -- Powers and duties of officers, boards, and commissions, § 51.

SEC. 861.9. REPORTS.

The Board shall make available to the Board of Supervisors, the Chief Administrative Officer and the Health and Human Services Agency its findings and recommendations on issues presented to them, and submit an annual written report of its activities to the Board of Supervisors and the Director of the Health and Human Services Agency.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.10. STAFF ASSISTANCE.

The Director of the Health and Human Services Agency shall ensure the provision of the necessary staff assistance to the Health Services Advisory Board.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

Cross reference(s) -- Chief Administrative Officer, § 120 et seq.

SEC. 861.11. SUNSET.

This Article shall be reviewed as a part of the regularly scheduled sunset review process.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

HEALTH SERVICES ADVISORY BOARD OF SAN DIEGO COUNTY BYLAWS

Section 1 NAME

There is hereby created and established the San Diego County Health Services Advisory Board. The Health Services Advisory Board shall constitute a citizens advisory board on public health as required by Section 710 of the County Charter and Section 861 of the San Diego County Code of Administrative Ordinance.

Section 2 POWERS AND DUTIES

This board is established to advise the Board of Supervisors, and the Health and Human Services Agency regarding programs, issues and budget items pertaining to the Health and Human Services Agency as defined in Section 861.8. This board is not empowered by ordinance, establishing authority or policy to render a decision of any kind on behalf of the County of San Diego or its appointed or elected officials.

Section 3 MEMBERSHIP

Membership is set forth in Section 710 of the County Charter and ordinance Section 861.1. The advisory board shall consist of seventeen (17) accordance with Section 861.1, with the exclusions as specified in Section 861.2 of the ordinance, which are included in these bylaws as Appendix A. All advisory board members may designate an alternate to serve in their absence.

Section 4 VACANCIES

The method of filling vacancies on the advisory board shall be set forth in Section 861.4, which is included in these bylaws as Appendix A.

Section 5 QUORUM

A quorum shall be defined as one person more than one half of the members. The definition of members excludes unfilled positions and those vacated by resignation or removal.

Section 6 ATTENDANCE

A member with unexcused absences from more than one-third of the regularly scheduled meetings in any 12-month period or three consecutive regularly scheduled meetings shall be subject to removal. (Exception: Board of Supervisors' appointees may not be removed without the approval of the appointing authority.)

Section 7 MEETINGS

- A. This organization shall be subject to the provisions of Chapter 9 (Commencing with Section 54940) of Part I, Division 2, Title 5 of the government code, relating to meetings of local agencies (Ralph M. Brown Act).
- B. The board shall meet monthly on the third Thursday of each month, from 4:00 p.m. 6:00 p.m. at the County Administration Center, 1600 Pacific Highway, San Diego, CA or on a duly noticed date, time and at a location designated by the Chair.
- C. Special meetings may be called at a time and place designated by the Chair. Notices of regular and special meetings shall be given by the Health Services Advisory Board staff pursuant to government code, relating to meetings of local agencies in accordance with the Ralph M. Brown Act.

Section 8 OFFICERS

- A. The elected officers are Chair and Chair-Elect.
- B. Slate of officers shall be presented by the nominating committee. The Health Services Advisory Board shall select a slate of officers no later than October and vote no later than December every two years. If unable to meet in December the vote should occur at the next scheduled meeting. Officers take office on January 1 and serve a two-year term.
- C. The maximum length of a given office shall be two consecutive terms.

Section 9 RESPONSIBILITIES OF THE OFFICERS

A. The Chair shall be the principal executive officer and the official spokesperson of this organization. The Chair shall preside at all meetings of the board, carry out the policies of this organization, its committees and its general body. The Chair shall make all committee appointments subject to the approval of the board. The Chair shall be an ex-officio member of all committees (except the Nominating Committee), voting only in the case of a tie. The Chair shall have the general powers and duties of management usually vested in the office of the Chair and having the powers and duties as may be prescribed in these bylaws. The Chair of the Health Services Advisory Board shall maintain consultation with the Director of Health and Human Services Agency.

B. The Chair-Elect shall do everything necessary to assist the Chair in the performance of the Chair's duties. The Chair-Elect shall exercise the powers of the Chair when and if the Chair is absent.

Section 10 COMMITTEES

A. Definition of Committees

- 1) Standing Committees: Any committee that functions regularly and whose membership is appointed on an annual basis. Standing Committee shall have such names, powers, duties and composition as is determined by the board. Such Committees will include but shall not be limited to the following:
 - a) Executive Committee: The Executive Committee shall consist of the Chair, Chair-Elect, two committee Chairs or two Board of Supervisors' representatives.
 - 1. It shall be the duty and responsibility of the Executive Committee to make recommendations to board members on matters discussed by the Executive Committee relating to or affecting the activities of the board and to report any action taken.
 - 2. A quorum of the Executive Committee shall consist of three (3) members of the Executive Committee.
- 2) Nominating Committee: The Nominating Committee shall consist of three (3) members of the board and shall be established no later than September every two years.
 - a) Executive Committee members shall not sit as members of the Nominating Committee.
- 3) Special Committees, Task Forces, and Subcommittees: Special committees, task forces and subcommittees, generally temporary in nature, shall be established, as necessary for special purposes. The Chair shall be a Health Services Advisory Board member.
 - a) Committee Reports: All committees shall report at each regular meeting. This report may be oral or written, unless specified by the board.

Section 11 RULES OF ORDER

A. Meetings of this organization shall be governed by the authority of Robert's Rules of Order modified to allow open participation of the Chair.

B. The rules contained in the Robert's Rules of Order shall govern the organization in all cases to which they are applicable and in which they are not inconsistent with the bylaws of the organization.

ARTICLE II

Section 1 AMENDMENTS

These bylaws may be amended at any regular business meeting by a vote of the majority of the existing membership. The amendment must be submitted in writing at the previous regular meeting.

Section 2 STANDING RULES

Standing Rules may be adopted by a majority of the quorum at any regular meeting. After they have been adopted, they cannot be modified at the same session except by a reconsideration. At any future session, they can be suspended, modified, or rescinded by a majority vote.

Section 3 EFFECTIVE DATE

These bylaws shall become effective upon adoption by the Health Services Advisory Board and approval by the Board of Supervisors.