SAN FRANCISCO FOOD SECURITY TASK FORCE (FSTF)
STRATEGIC PLAN IMPLEMENTATION WORK GROUP MEETING

Wednesday, February 5, 2020 11:15 a.m. - 12:45 p.m.
25 Van Ness Avenue, Room 330A, San Francisco, CA 94102

**Members present:**
Anne Quaintance (Meals on Wheels of SF); Paula Jones (SFDPH); Chester Williams (Community Living Campaign); Priti Rane (SFDPH)

**Also present:** Lauren Small (Leah’s Pantry); Erin Franey (SFDPH – Food As Medicine Collaborative); Kathleen Reed; Emma Steinberg; Alex Mitra (St. Mary’s Medical Center); Tina Gonzales (SF Marin Food Bank); Gary Lau (SF Marin Food Bank); Kelly Batson (211/United Way); Emily Leys (independent consultant)

**Minutes - APPROVED**

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<tr>
<th>AGENDA ITEM</th>
<th>DISCUSSION</th>
<th>ACTION ITEM (AI)</th>
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<tbody>
<tr>
<td>1. Call to Order</td>
<td>Anne Quaintance called the meeting to order at 11:20 a.m..</td>
<td>None</td>
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<td>2. Welcome and introductions</td>
<td>Emily welcomed everyone and everyone introduced themselves.</td>
<td>None</td>
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<td>3. Approval of minutes from January 2020</td>
<td>Anne Quaintance made a motion to approve the January 2020 work group minutes, and the motion was seconded by Paula Jones. Formal approval was made, with a minor correction to the list of members present.</td>
<td>AI: Amend draft minutes, post to webpage (Paula Jones)</td>
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| 4. Work Group Project Charter | The purpose of the Project Charter is (1) to ensure that Work Group members are all on the same page, (2) to communicate what the Work Group is doing externally to the public, and (3) to assist in securing additional support. The goal for the Project Charter in this Work Group meeting is to solicit input so that we can finalize it at the March meeting. It will be a living document and can then be refined going forward. The following questions were posed:  
- What should our measurable objectives be for each priority?  
- Should we solicit point people for Priorities 1, 3, and 4?  
- Timeframe (charter go through Dec 2020 or Jan 2021?)  
- How formal should we be in terms of membership in the work group? | AI: Create the next version of the Project Charter (Kathleen Reed and Anne Quaintance) AI: Check in with Kaiser on opportunities for FSTF and/or SP Work Group to provide input into Kaiser’s Thrive-Local/Unite-Us I&R project. (Emma Stienberg) |
Most discussion was on what our measureable objectives should be for Priority 4: Information and Referrals. The following questions were raised and points where made:

- Could success on Priority 4: I&R be that one or two systems test bi-directional feedback?
- Question about whether we are going to try to come up with a system? Or, champion an existing system more broadly? What is the Task Force doing vs. what it is championing? Could an argument be made for creating a new system?
- The work group/Task Force needs to determine its role. Every system already has their own way. Is it our role to point this out and act as advisors to groups?
- Might we work in a public/private partnership model and engage stakeholders to improve I&R for food?
- Medi-Cal Healthier California for All (formerly CalAIM) is an opportunity to advocate for funding (governor has earmarked a lot of $$$)... Could the work group/Task Force have a specific ask for how the money is spent (i.e., on food)?
- Kaiser is rolling out an I&R system in 2020 that is supposed to be bi-directional and shared. Could we think of that as an opportunity to motivate and put pressure from a local entity? The people designing the Kaiser system are from Napa/Solano.
- The Task Force can play a role in providing support/backbone to have this conversation with Kaiser and other groups.
- The Governor allocated a large sum of money for CalAIM, but it’s not specific to food. The pot of money hopefully is where we’d get funding.

5. **Priority 4: Information and Referrals**

The Work Group was happy to welcome Kelly Batson, Senior Vice President of Community Impact at United Way. Kelly gave an overview of 211 in San Francisco.

- What is now 211 used to be Helplink – for the Bay Area. There was a plan to be federally funded but that did not pan out. There is no city/county funding. 211 serves 6 counties.
- The website can be difficult to use.
• There are not enough people calling into 211, as compared to the number of people who need services.
• Housing is highest need for people who call in. What’s great about 211 is that it offers other resources – benefit of a human – this leads to connecting into a bigger system – FSTF could make recommendations and inform the statewide process so it’s community driven.
• 211 does make follow-up calls and these are actually required by AIRS (Alliance of Information and Referral Systems) https://www.airs.org/i4a/pages/index.cfm?pageid=3310, which certifies referral agencies – they require certain follow-up calls, have standards related to training, how often data should be updated. Also, should note that 211 has to ask if they can do a follow-up call and many callers decline.
• 211 is often blamed when referrals don’t work out. Often there is confusion around eligibility or access/capacity of programs people are referred to is a problem.
• 211 has a category called “unmet needs” for people that there are no referrals for. This is an area that should be looked into.
• 211 has a lot of data. Kelly will try to pull all food-related data and share with the work group.
• “HealthLeads” is a national organization that works with health care providers on the social determinants of health. Really involved in San Diego. They were like an in-person 211. They were a navigator and decided to partner with orgs that have databases.
• Kelly has regular “breakfast” meetings with colleagues from other counties to talk about how to start a thing like San Diego but not county by county – Needs collaboration across county lines. United Way 211 is for 8 counties.
• HealthLeads applied and will hopefully get 100k to provide local input into Kaiser’s new initiative (Thrive Local/“Unite Us”). This work group could play a role providing input/recommendations (through focus groups, etc.) to inform the Kaiser project.
• San Diego – spent years creating a Salesforce system that has everything in it (bi-directional referral system) including providers. There is a meeting on March 18th in San Diego. The first meeting of this kind was “this is how we did it.” Now, this year, it’s a much bigger conversation.
• There is a lot happening with 211s across states

related calls and share with Work Group (hopefully at March meeting) (Kelly)
AI: Invite FSTF and Work Group to focus groups to inform Kaiser’s Thrive-Local tool design, when the time comes (Kelly)
AI: Check in with OCOF to find out what data they have on food-related I&R (i.e., what are people searching for) (Kelly)
AI: Check in with One Degree to find out what data they have on food-related I&R (i.e., what are people searching for) (Alex)
• Monterey County has an active referral network – “community information exchange” individual systems will look at do health outcomes.
• Kelly thinks the work group/FSTF could make recommendations now for the current systems.
• Kelly and Food Bank have been in discussions about how to learn more and improve. One idea is that after making a food referral, 211 could we call 50% of those people back and see what we can learn? Can we text a survey after making a referral by text?
• Another idea is a food text campaign – text “SF Food” to this number and get information?
• There are things that we can test and try. We can create a mini-feedback loop in advance of getting big system.
• Kelly is also, meeting with OneDegree – another I&R director – I Carol database is what a lot of 211 use. Other “211s” use other systems
• Tina and Gary are happy that 211 is at the work group table. We need recommended standards for I&R in SF
• Alex is clear that we don’t need to create another system
• Priti is concerned about systems that don’t talk to each other primarily due to privacy and confidentiality laws. Will be interested to hear/discuss how we can improve on this.
• Work group is interested to hear about the gaps or top 10 frustrations that 211 and other I&R groups face

All participants agreed that the discussion was a great start. Quite a few action items were taken (see right column). Kelly plans to participate in additional work group meetings to continue the conversation. For next meeting, the goal is to have data from 211, OCOF, and One Degree.

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<th>6. Public Comment</th>
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<tr>
<td>7. Adjournment</td>
<td>Meeting adjourned at 12:45 pm</td>
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