



Special Meeting of the PHPDA Governing Council

Thursday, April 23, 2020 10:00 AM – 11:00 PM

Meeting: <https://zoom.us> Meeting ID 826 2282 6779

<https://us02web.zoom.us/j/82622826779?pwd=dGNWVWtnbjNDMDRoc0tQYzBGS21Udz09>

Phone Option: 1-253-215-8782

Password: PACTOWER (Numeric Password for Phone: 528423)

| MEMBERS PRESENT | | NOT PRESENT | ALSO PRESENT | |
|-----------------|---------------|-------------|--------------|---------------------------------------|
| Sue Taoka | Ellie Menzies | Nancy Sugg | John Kim | Christina Bernard |
| Doris Koo | Mike Heinisch | Bob Cook | Gene Yoon | Mallory Fitzgerald (arrived 10:15) |
| Gloria Burton | Susan Crane | | | |

Sue Taoka called the meeting to order at 10:06 AM. A quorum was present. There was no public comment.

The Executive Director began by describing the purpose of the meeting. Initial conversations at the Governing Council’s April 14th meeting resulted in several Council members who have expressed their interest in continued discussions on PHPDA’s Response to Health Inequities Revealed by the COVID-19 Health Crisis. The Council was asked to discuss three questions:

Question 1: *As a community leader, what are the most troubling and most urgent health equity issues you are seeing during the COVID-19 pandemic and its responses?*

The Council discussed underserved populations with urgent health equity issues:

- Council members observed increases in immigrant populations requesting access to care, food, and testing. Front-line organizations and clinics are struggling to address urgent needs such as food distribution, language barriers, and transportation.
 - Even under normal circumstances, immigrant access to health care and testing is limited. This population is often undocumented or underinsured.
- Persons of color are likely to be underserved. Initially, the City did not report on demographic data, particularly on race. They are currently working on disaggregating data.
- People are very isolated, and some community members such as those who experience housing instability, or those who live in rural areas, have already been isolated even under normal circumstances.
 - Increases in mental health issues, fears, and stigmas.
- Injustices are being revealed and this pandemic is shedding light to broken parts in the system.
- All communities need to understand how to social distance and everyone should be participating. Public health affects us all.
 - Many have language and cultural barriers. There needs to be more focus on education.
 - Some communities, both residential and in their work environment, are not given information in their language to clearly define social distance, quarantine, and isolation. There are nuances and details that need to be shared and addressed in all communities.

Question 2: *In the current pandemic and future emergency situations, how can PHPDA use its influence as a grantor to best advance health equity?*

The Council discussed the flexibilities in PHPDA’s grant processes:

- Public funds are in high demand and scrutiny. PHPDA’s grantmaking process requires more lead time to generate funds. The PHPDA is not situated for emergency grantmaking.
- Currently, Nimble Grants are limited to \$30,000 per project:



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- The Council discussed potentially increasing the amount of funds awarded for upcoming Nimble Grant cycles or changing the timing to address urgent funding needs.
- The Council explored adding another Cycle to next year's Nimble Grants.
- The Council discussed connecting grantees with other funders and with each other, and considered funding such connections.
- The Governor's orders were made under a public health emergency, which may imply that the PHPDA should flex its grantmaking process in order to address the emergency. This might be a legal matter that should be raised with PDA legal counsel.

Question 3: *In the current pandemic and in future emergency situations, how can PHPDA use its influence as an advocate to best advance health equity?*

The Council preliminarily discussed the PHPDA's advocacy approach:

- The Executive Director discussed collecting and analyzing data from PHPDA grantmaking activities to advocate on health equity. The Council agreed that the PDA could be a community leader advocating for those underserved. With data collection and analysis, the PHPDA can bring up concerns and achievements with local representatives. The PDA can report to local representatives with what is being observed.
 - The Council explored how the PHPDA can work with the City, County, and local philanthropies
- The Council discussed the PHPDA's potential ability to connect grantees to address specific legislative issues together.

Wrap up and Scheduling

- The Council agreed to continue discussing grantmaking flexibility without jeopardizing the PHPDA's integrity.
- Other PDAs are currently exploring their flexibility and limitations during this crisis. The PHPDA should have a similar conversation internally and with other PDAs.
- At the next meeting, discussions will continue on the PHPDA's approach to advocacy.

Adjournment

The meeting was adjourned at 11:01 AM.

Minutes approved  _____

May 12, 2020
(Date)