Meeting of the PHPDA Governing Council  
Tuesday, August 10, 2021 5:30 - 7:00 PM

Meeting: https://zoom.us Meeting ID 842 0019 8703  
https://us02web.zoom.us/j/84200198703?pwd=UGxOaFZLL01qKzNZbVZMbFhlckpTdz09  
Phone Option: 1-253-215-8782  
Password: WISDOM (Numeric Password for Phone: 226818)

<table>
<thead>
<tr>
<th>MEMBERS PRESENT</th>
<th>NOT PRESENT</th>
<th>ALSO PRESENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sue Taoka</td>
<td>Bob Cook</td>
<td>Nancy Sugg</td>
</tr>
<tr>
<td>Doris Koo</td>
<td>Virgil Wade</td>
<td>Ellie Menzies</td>
</tr>
<tr>
<td>AyeNay Abye</td>
<td>Susan Crane (arrived 5:49 PM, until 6:12 PM)</td>
<td>Gloria Burton</td>
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</tbody>
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Sue Taoka called the meeting to order at 5:36 PM. A quorum was present. There was no public comment. The Council Chair welcomed Marc Provence and Paul Feldman to the Council meeting.

**Consent Calendar Minutes**

The Governing Council approved the amended minutes for the July 13, 2021 Governing Council meeting (Moved/2nded by Bob Cook/Doris Koo, 5 of 5 in favor)

The Governing Council accepted as information:

- The Finance & Audit Committee minutes from July 7, 2021
- The Program Committee minutes from July 7, 2021

**Staff Report**

The Executive Director updated the Governing Council on the Staff Report.

- Potentially providing more value to grantees.
- Worked on Strategic Plan.
- Posted the Office Coordinator position and began reviewing applicants.
- Met with Central District PDA.

**Financial Stewardship**

**Q2 2021 Financial Statements**

The Associate Director reported on the Q2 2021 Financial Statements.

- She discussed some Nimble Grants with unexpended funds as negative expense.
- PacMed’s late payment for elevator maintenance.

The Governing Council voted to accept the Q2 2021 Financial Statements (Moved/2nded by Virgil Wade/Doris Koo, 6 of 6 in favor)

**Property and Real Estate**

**North Lot Project Updates**

The Executive Director updated the Council on the North Lot Project.
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Update on Master Plan

The Executive Director reported on Master Plan and continued work with Makers.
- Stakeholder surveys are out in various languages.
- The Advisory Group will meet for the third time in September.

Update on Quarters Leasing

The Executive Director provided updates on Quarters Leasing.

PacMed Clinic Lease

The Executive Director reported on PacMed Clinic Lease activities.

Strategic Planning

Process and preliminary work for Strategic Plan

Bob Cook and Marc Provence of the Strategic Plan Subcommittee led Strategic Planning discussions.
- The Governing Council will continue to discuss Strategic Planning with homework assignments between meetings.
- The Subcommittee will meet once a month between Governing Council meetings.
- The Council noted the Strategic Plan Subcommittee led by Bob Cook. Members include: Doris Koo, Ellie Menzies, Virgil Wade, Paul Feldman, and Marc Provence.
- Anticipating a February in-person retreat to finalize the Strategic Plan.
- The Council considered an accessible dashboard for Council members while planning.

The Council discussed general Strategic Plan topics:
- A Strategic Plan should be measurable over time.
  - The PHPDA is moving from “current state” to “future desired state.”
  - Metrics should be usable, but broad and strong enough to last for more than 5 years.
- The Strategic Plan will review identity, current state of Health Equity and PHPDA’s Health Equity Fund program, system change, advocacy and legislative activities.
- The planning process will create an opportunity to sharpen our mission, vision, and values.
- Internal review of anti-racism. Staff development and use of organization’s finances.

What are PHPDA’s Objectives? What do we want the PHPDA to be?
- PHPDA as a successful Champion for the concept of Health Equity; personifying through our actions what Health Equity means and looks like.
  - We are on a path with the ability to demonstrate and test different approaches.
  - As a publically chartered PDA, what happens if we weren’t here? Would the public or community fill this void if we were somehow disbanded?
  - What do we want to do vs what are we expected to do? We measure ourselves on our surroundings, not what’s expected of us but the difference we’re making.
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- Work toward equal access to health care, equity, and outcomes.
- Do we want to push our grantees towards Health Equity?

- Stewards of Landmarks & Historic Campus
- Using the victories of the last Strategic Plan
  - Who we say we are and how we want to behave have matched. Staff work has been clear that PHPDA operationalizes our systems and grantmaking as a part of a larger health equity ecosystem.
  - Mindfulness of PDA history is important to understanding objectives.
- Elevating and advocating for Grantees:
  - Grantee cohorts. PHPDA as facilitator and advocate. We can’t provide direct services but we can gather together and support those who are.
  - We can be an intermediary by connecting those in power to organizations who have just got off the ground to work with grantees for their rightful place in decision-making.
  - Commitment to provide resources to grantees.
  - Partnerships with grantees and being a role-model to other Grant Makers.

- Systems change:
  - How are organizations, culture, and institutional behaviors aligning with healthy systems? How do we become a model of healthy systems and healthy governments? How can we assess change and other models to do better?
  - Our grantees need more money to do this work. How can we bring them more funds?
  - How we can imagine but also remain compliant.

What is Health Equity? There are many dimensions of Equity: systemic equity, inequitable access, outcomes equity, power equity, etc.
- No barriers to care. Equally accessible and affordable for all.
- Addresses systemic root causes
- Healthcare is not the goal, living well is the goal.
- Acknowledge the inequities of systems today of historic inequities and distrust.
- How to balance our response to marginalized communities: e.g. racism, trans youth, etc.
- Access and ability to choose, freedom of choice, and exercising autonomy.
- Services and care needs to be respectful of every individual and community
- We need to make good on the bare minimum and go beyond. Even now, Indigenous Communities are owed Health Equity by law, but do not experience it.

Adjournment
The meeting was adjourned at 7:02 PM.

Minutes approved ___________ 9/14/2021
(Date)