# Minutes of California Health Corps Meeting Feb 6, 2014

Location: IBM office - 4400 North 1st San Jose, CA 95134

Attendees

 Bill Daul
 Brien Shamp
 Brian Donohue
 Cindy mason
 Dan Esbensen
 Dan Desmond
 Denet Lewis
 Heidi Dulay
 Ilene Serlin
 Jack Park
 Jacqueline Chan
 Jack Chin TD
 Kennan Salinero
 Laleh Shahidi
 Majid Salehizadeh
 Mei Lin Fung

 Michelle Brown

 Morgan Newman
 Robert Stephenson
 Sina Nader
 Tammy Chan
 Valerie Landau

**Agenda**

5:00 pm - Welcome and Introductions - Jack C

5:20 pm - Setting up the 501(c) 3 for CHC

5:30pm - CHC logo and trademark, name discussion

5:40pm - Update from Committees RBT, FIT, ZZZ, FIN, LRN, WE, MND, MRC - with discussion after each report

6:20 pm - Committee Goals and Objectives - Clinic, Sleep, IT, Resilience Training committees

6:30 pm - Grant proposal

6:40pm - Define and Measure Outcomes for Committees

6:50 pm - Vote for new members - Morgan Newman and Michelle Brown nominated by Laleh

6:55 pm - Break

7:05 pm - Review / Approval of Jan 4 Meeting Minutes - Mei Lin

7:15 pm - Pilot Areas with Community Partners

7:25 pm - Calendar for next 3 months

7:35 pm - Any Other Business - Verify Credentials / References – Advisory Board

7:50 pm - Set up date and location of next meeting - proposed Saturday March 15th in Palo Alto

8:00 pm - Close of meeting

**Minutes**

## Introductions

Jack – Watson foundations group – master data management and data governance – smarter care – RFP team – citizens and patients for social and lifestyle - everywhere Africa, Asia, Europe

Kennan – Thanks to Jack – had meeting from 4-5 pm Yamana Science and Technology – slightly over 50% of science R&D is life sciences – issue – grappling with how impact is obtained

Cindy – UC Berkeley – institute for soft computing, co-chair for philosophy and computing– AI and medicine – create online resources for culture that is underserved – shifted things for affluent patients and put them online – computer science aspects of emotions

Dan – Mister Dan – technical – 1968 doing programming, teaching grad programming - special interest in medical diagnostic systems – Johns Hopkins project – medical trial calendaring system

Sina – the sleep guy – sleep nerd – consult for employees to get better sleep

Majid – regional director of Hult Prize – one global challenge per year – business case challenge – Healthcare this year – partner with Clinton Global Initiative – best idea will get $1M as seed funding to be implemented – regional SF is March 8 – 6 regions – team from each region will go to incubator program in Boston – and present at CGI in NYC in front of President Clinton

50 teams coming to SF – started having workshop March 9th – social enterprise Sunday – on how to go on with their idea

Bill – connect people doing socially relevant stuff

Laleh – interdisciplinary studies, medical informatics – knowledge and collaboration space– software environment, consulting with startups to F500

Mei Lin Fung - Socio-Technical Lead for the Health Futures initiative

Rob – recovering academic, perpetual student. Carrying forward the work of Doug

Valerie – director assessment of educational effectiveness at SMU – software apps that support innovative approaches to assessment – WASC – K – higher education – assess other schools – Engelbart hypothesis

Jack – social gadfly – 2007 global HR forum – DKR’s – Ted Kahn said dynamic knowledge garden

Morgan – operate East west Kungfu schools – since 1967 – focus on traditional principles of Chinese martial arts – mind body emotion – 3.5 to 80 years old

Michelle – fitness prof – Gumsaba – bring people into outdoors engage in community of fitness - corporate boot camps for muscle milk – cyber sport - black belt, yoga

Denet – High Five show

Brian – lawyer for 33 years, UC Berkeley for 15 years – now retired and involved in nonprofit orgs – would like to help CHC in legal matters

Dan – Desmond – it – BEACH – nonprofits, private sector to apply IT for better decisions in health – clinical and population health

Brian – 2 page on trademarks – difference between service mark – share this with all members – Share 3 page primer

Heidi – a nutritionist – in Berkeley – teach at JFK – love the tech arm – practice has been online and on the phone – tech is going to play an important part – clients and students care that I survived being a fat kid, survived cancer for 30 years – want to share what I have learned

Brien – run group boot camp projects – working on FIT committee

Tammy – IT consultant – travel to different places – build financial reports and training – ERP, CRM, build systems from ground up

Jacqueline – Human rights and community advocacy – public health, community development – working as investigator for San Mateo county- Haiti

## Conversation with Brian about setting up the 501©3 for CHC - Logo and trademark, name discussion

Brian – 501 c3 – Public Health Enterprise group – investigate how this will work

Mister Dan – state trademark is $25 and federal is $800

Dan – Public Health Foundation Enterprise – domestic and international 501 c3 has agreed to have CHC as an incubation project within 501c3 with purpose of CHC growing up and leaving the nest to allow us to receive funding and apply for grants, and participate in co-op agreements – they will do the back office –this is a fiscal sponsorship (vs fiscal intermediary or back office) CHC can grow up and clearly define what to do, and can help us

Multi step process

To do something under PHS – Fed govt has only approved the MRC – under region 9 – the goal is create a new instance CHC as an operating entity, the Public Health Foundation Enterprise – they would lead a program called the MRC – and CHC is the innovative model for a type of MRC that works for the 364 days when there is not a medical emergency to focus on community wellness and resilience

Once we prove the model works, they can authorize us to do stuff –

Tammy – how much control do they have over us?

Dan D – they do not have programmatic oversight – their only oversight is that they hold the money – we have PI and programmatic oversight – that is the difference between the fiscal sponsor and fiscal intermediary

Kennan - the Tides Foundation is another example

Dan D. the way we set this up under BEACH umbrella – we are not limited to do PHS projects, we can work on other projects and receive funding from other sources – so it’s a portfolio approach

## Update from committees with discussion after each report

Reboot - serve as a catalyst to unlock human potential to reimagine health mid-month update. Bees and Butterflies – cross pollinating amongst the groups merging and new groups

IT group Jack has finished first draft of collaboration.

Bill has Facebook for putting reference – HATS, and Linked in group which is closed

Bill – HATS Facebook page – put in things of general use to the public

TV shows – Sina, Jill – film permissions

MIND group – created Humans without borders – created a linked to One Health – disability, visibility.

Resilience – Laleh has been working with Ilene and east west planning for resilience training content and activities

Michelle – there is a setting on fb

**Reports**

**FIT-** Research on schools – Brien – talked to teachers, parents and became aware of another issue – lack of movement with kids – on average kids are getting 2x 30 minutes a week

120 minutes every 10 days is the mandate from California – no mandate in private schools

No one is holding people accountable – some schools are running boot camps in schools – teachers are running boot camps – 15 minutes twice a week – teachers are doing their own thing

Contacted K teacher about implementing a study there – broken into 5 minute increments

Denet – we spoke with a private company offering PE services as an outside business – looking for best practices and things that might be duplicated

Cindy – were they collecting data?

Brien- they didn’t have resources to do anything with it, pre and post

Denet – produced a couple of TV shows – Brien’s boot camp did well on You Tube

Brien – health fair – Sina attended that

Wrote blogs and featured Sina – working on San Carlos Wellness fair – working on the wellness coaching –

**ZZZ Committee** – TV show – boot camp produced blog articles – have a web resource – Tool for assessing sleep – charge for access with back end analytics – for education and not for profits – sleep tool for no cost – designed by Stanford docs – delivered via web- takes less than 5 minutes

FIN – support existing committees – in order to do that we have to have measures in place and introduce short term goals and get input – for resources and needs – what order we allocate and distribute our resources

**LRN** – are offering a platform for assessment – about to launch 2.0 of the platform and offering it to CHC to be the pilot project – will need input from us about how to align our outcomes – it’s a way to visually put your data to music, correlating many to many with a visual interface – will get input from group – define top level goals –

Jacqueline- will be adding with program evaluation – using logic model tracking development of CHC and how we can use quantitative measures – sketched up framework structure – org learning, committee learning, individual learning –

Valerie – been working with John Fury – who has a tool called mind time – helps identify your thinking and learning style – helps puts teams together – past , present and future thinker –

Kennan – talking with Brian Donohue – spoke with Linda Neuhauser – saw synergy with WE –

Mei Lin – participatory design

Cindy – worked with Fred Moss on Media Lab – would have liked to known about the Linda Neuhauser meeting – there is a lot of information

Mei Lin – IT group – let them experiment

Robert – publish and subscribe – list of important topics – eg participatory design – if interested in topic – identify themselves

**WE** – partnership – we are a connector, between CHC and outside world – strong believers in participatory design, main task is what are external groups doing in health industry and identify potential partnerships – be a conduit - how to connect to other groups, help propagate it – within CHC identify strengths and help connect – be a resource – this is our task – a conduit for flow of information

Kennan – met Feb 1 at Laleh-s – there is a partnership template, Jacqueline has a template online

Cindy – break out tech support as a separate group – vs vision and strategies that will not be defined quickly – have immediacy about tools –

Mister Dan – I will take on Tech Support

**MIND –** Resilience Training is a spin off group – Health without borders

Get update from Cindy – emotional oriented programming, One Health – scripss institute Alan Seblane – robotics and health and environment, momentum around creating funding for monitoring for contents of ocean

**MRC** – summarized goals and objectives have been submitted with application – governance – light structure – with few rules – there are couple of rules – participatory model – this group is like the program of future based on Doug’s vision, exchange ideas, especially among committees – then it’s up to the committee chairs to see how practical it is, and apply or implement

Rule – Roberts rules of order for running the meetings – Denet is our expert on this.

## Committee Goals and Objectives - Clinic, Sleep, IT, Resilience, Training

**CLINIC –** in working with diverse efforts for reboot of health – Clinic project based on Asian Health Center and CHC’s – a community center which is a gathering place not a clinic – a concept map is to basically a blank sheet to define the clinic of the future and transform existing clinics – working with innovative and pop health across country – what we are doing – being presented for funding – create a clinic as a non-branded entity, not an FQHC, not a safety net – this is a clinic that we can use to define new prospective workflows thru participatory design – might need more sleep, a better diet – to adapt to meet needs of individual patient – want to start project in March – announced in State health officers – starting in Solano, …. CHC will be one of the teams

IP – Mister Dan – if you are a 501c3, does any IP become public including database –

Dan – very good thing to be astute for – right now CHC is a collective of individuals – IP as individuals we contribute- is jointly owned as individuals

That’s phase 1

Once 501 c3 is in place – Journal – create a journal – what you do that is compensated under work for 501c3; Unless you have an agreement

If Fed gov funds work effort – it can be made publicly available. If you write it well, the derivative work can be

Kennan – if we are about participatory design – I am not comfortable about going down an IP track – I am on an open source track

Rob – we as CHC are a prototype for similar organizations that might be spawned – it would be useful if we make most of what we develop available through other groups

Dan – if we are going to reboot health – we have to make this available to community – we have to protect the IP that we distribute to make sure the IP stays in the community collective – if you just distribute it and make it freely available, it is not going to be freely available

Denet – there is potential for creative works

Jack – side point – we have creative common licenses – FYI SRI is a 501c3 – they act like a stock for Profit Corporation and they are the home of SIRI

**Sleep –** big picture – SLEEP is the foundation of health – it underpins everything – if you don’t sleep well it will come back to bite you – the role of sleep is the foundation and it relates from emotional to psychological health –

Foundation of health – a resource – I would like to get information out to people – 70 million have a sleep disorder – 80-90% have not been diagnosed

Cindy – I was overnight in labs – people are different every night – that’s where wellness comes in

**IT** – Dan and Jack have started experiments to use email clients in higher signal to noise approach –

**Resilience –** Laleh focus on helping people build physical resilience and mental strength -3 issues – collaboration, wellness and resilience are risk factors in the nation

Ilene Serlin, Michelle and Morgan = we can help people manage emotions – and help calm - build resilience through movement therapy – Ilene helps cancer patients with dance therapy and different arts

Tai Chi and Qigong are helpful for physical and mental health –

Will offer programs on mindfulness in schools – already has a model used in couple of schools – model exists- will talk with Marin county schools to get it going

Planning for a Digital version of Whole Person Healthcare

Ilene – I am fascinated by the possibility of getting it online and make it more interactive – we can look at steps along the way – Marty Waskin – integrative physician who heads program at Marin General – looking at places to create more online access – acupuncturist – Mt Sinai – guided imagery

Cindy – I am tangentially part of this – we are a volunteer group – all of us have certain backgrounds about stress, learning, it would be awesome to benefit from that…. A pot of resources – lets share something each meeting

Laleh – we will continue to work with East West and Morgan to plan for implementing Tai Chi and Qigong courses and BukFuDo movements – not training in self-defense – a progressive movement – from basic to more complicated. The Grandmaster of the system has written books about building resilience – to do these moves – especially appropriate for youth

## Grant Proposals

Will cover it in detail in future meetings.

Cindy likes to have more info.

Dan Desmond – talk with Cindy

## Define and Measure Outcome for Committees

Kennan – we should use a scrummy story board – WE committee

Laleh – define and measure outcomes by committees – how will we measure? Valerie and I will work with Ilene to see how to use Valerie’s tool for measuring outcomes

Cindy – MIND group has a different measure, something that overlaps with disabilities – Tai Chi – how many are connecting across website and how many emails – simple outreach measures – viewers, talks, how much of an increase after we gave talks – increase in number

Valerie – an outcome is what you want to see – set that as a goal – its not restrictive – CMI is a quantitative and qualitative tools

Each group can have wildly different outcomes – it’s a way to track and view the data – it is a platform, not a metric system

Majid – we need to have a timeline – as well as the numbers – working with Social Venture Group – working with nonprofits – measuring impact of nonprofits in monetary terms – how much value in terms of money are they creating, or saving for that community – numbers are tools for measuring impact

Money, time, numbers- quantifying

Mei Lin – money is not the only thing we want to measure – personal benefit, social benefit

Kennan – it’s worth the process of coming up with the umbrella outcomes – our manifesto about what is important – I propose we create some process for defining it for the instrument

It’s valuable to do it at the front end

Valerie – it’s a vision statement in 6 words

Jacqueline – action item – to come back with a proposal for CHC to learn about how to define process

 Laleh – Valerie said she’d workshop the outcomes for each committee

## Nominations for Members of CHC

Morgan Newman nominated by Laleh

Michelle Brown nominated by Laleh

Laleh - Morgan – 3 times world champion in kung fu and Michelle – world champion

In the context of resilience training, we have models and books, Michelle and Morgan are doing it every day, training people to be resilient through boot camps and movements and follow through – have been doing it for years

Since Morgan joined East West – as VP – we have 2 more new schools – great leadership skills; and Michelle started her own business in 2010 outdoor boot camp and now has 4 –

Michelle – interested in networking – likeminded in preventive care – I see more potential in people than they see in themselves – it is an honor to work with people working at their potential – watch people blossom and grow – we experience it every day - I feel connected with what you are talking about – preventive care is what I live

Morgan – Laleh’s passion about this project is inspiring – my focus on a day to day basis is teaching people how to become better people through martial arts, or connecting mind body spirit – from 3.5 years to 70-80 year old – traditional philosophies and bringing it into the modern world

Jack Chin – what kind of communities? I work with elderly poor, and kids from single parent or very poor – the mindset in where we live, its no problem – in Stockton we hit it – I don’t know if this group can imagine the poor kids

Clean up things for the elderly – if you work with a community, what kind of community? For me that is a major issue

Cindy – shadow lands – healer – I worked on the Oakland Berkeley border

Morgan – our martial arts schools are in Lafayette, Ramon, Danville – we do self-defense and women who have been raped – those situations are everywhere – we do lots of programs in other communities – we want to reach out to other communities – very interested in bringing it out to communities that don’t have those resources

Laleh – the grandmaster grew up in the projects in Pennsylvania – I wanted Morgan and Michelle to use his writings to reach out to the less privilege

Jacqueline has been working with foster children – we’ll talk to work out how to apply it

Denet – Geico commercial – guy – now looking how to help people

Tammy – my project matches under-privileged to mentors

Michelle – I have camps in Moraga, Walnut Creek and 2 spots in Danville – we do a monthly charity event – there are boot campers who participate on sliding scale – 2 battered women who don’t pay – I would love to provide programs for people who need it

Jack – I discussed with my mentees – mom says you have to eat it, the kids know they should not eat processed food – it’s a problem – we need to think about how to solve that as a community

Heidi – it’s a big problem in nutrition

Denet – have to ask you to leave the room

Denet Lewis called for a vote

Denet move, Valerie seconded

Mister Dan – moved, Bill – seconded

Approved

## Minutes from Jan 4, 2014

Minutes Approved

## Pilot Areas for Community Pilot

Will cover in future meetings. Each committee will decide on the pilot areas.

##  Calendar for the Next 3 Months

 Will discuss next time

##  Other Business: Final Thoughts: Verify Credentials / References -- Advisory Board

Jacqueline – Grand Challenge – structured in a challenge format – a learning and collaboration idea – focused on topic learning – we each have our expertise in one part of the spectrum – we lack perspective of the whole spectrum – to achieve our goals, we have to learn to be comfortable with the complexity

Every 2 months – we would propose a topic – this can be a pilot for actual challenges that come from our partners

A topic would have to specific, so we can dig down and stretch it out; e.g. obesity in elementary school kids in Palo Alto

Propose, say 3 committees – who are ready to take this on – explore the issues and at the next meeting, come back and tell us what they found – it will be structured for key questions – roots of problem, who is being impacted, who are the players

Jack – you are posing an epic quest – think World of Warcraft – you form guilds – it’s the equivalent of guilds – there is a game play and a game move – in WOW its called a Raid – as a result of the internal dynamics of the guild – I like it – it’s a mechanism by which everyone does learn to collaborate and do scholarly research and learn logic and philosophy to make a game move – we can learn, learning, leadership and collaboration – guild craft

Heidi – does anyone live in Berkeley? Do things locally –

Cindy seconds

Heidi – let’s share what we know – to benefit the whole group = eg Sina sleep

Cindy – 5 minute slot for rotating slot + 5 minute Seconds Heidi

Jennifer willing to help – Mister Dan

Ilene – helped to post keynotes she is speaking at – aware of research

Jacqueline – being aware?

Laleh – mindfulness

Jack – HIMMS

**Advisory Board – Ahmed**

Cindy’s – MD’s being part of our advisory board

DVD’s require MD’s on board for fitness video

Kennan – OSHA center at UCSF – alternative medicine at UCSF

Laleh – want MD’s who believe in holistic approach

Denet – want meeting for FIT group

Brien – Jack’s passion for certain communities – we all have a passion – wealthy people pay the bills – the wealthy people are not very knowledgeable – just because they have money doesn’t mean they are healthy – all this money and so unhappy and your helath is so bad – our purpose of our group – everyone needs to be fixed –

Jack – good

Jacqueline – one of the hardest things is learning to work thru the mud – we all jumped in because of all the mud – this is the hard part- we have to wade thru the mud – just as a group – this is going to be the hard part – how we will get thru it – have patience, we are moving in a direction – it will be on our terms – we have that luxury and we have each other and our network

Sina – very well said, couldn’t agree more – avoided politics my whole life – realizing it’s not going away – got involved- hosting a fund raiser for Mike Honda on March 15 – see elected officials have chance to interact – Iranian community

Mister Dan – here as a service – will get db table set up – learn who the members are. Immediate band aid is one kind of band aid – so we only have 1 or 2 sets of data to use

Cindy – send one line updates – when events happen - Will send reminder

Kennan – rubber band on idea that we are ourselves – we can bring our expertise to ourselves – very much behind it

Heidi - our expertise is divided into content and process….and others doing partnerships and Clinic – from content I would like to get some consensus on what nutrition issues – principles, strategies and research

Denet – you have to be open on that – it changes – even micro nutrients

Jack – liability issues if we become prescriptive – we are educational, not prescriptive – as long as we keep the open mind and teach the ability to do the scholarly work, so that people come to the conclusion for themselves – we can be choir directors to get people to look – people have to own their health –

Michelle – thank you for accepting my membership – the importance of the environment around us and how it plays a huge role in our health – that could be something for the future

Morgan - Laleh has been positive and excited – so much collective information – a lot to process

Bill – I love the diversity – gender and age - great group – as we refine our message – I’d like to video tape and create these capsules and integrate them into the big picture message

Laleh – when we walked out of the Asian Health Services – I thought I wish I could take my parents – they look at you as a whole person – it was amazing – other institutions – our lives are dealt with as commodities – something has going wrong – we are compromising our wellbeing with lack of sleep and nutrition – it is the time for a reset – I think this group can play a role – with our knowledge and accomplishments and the network and the enthusiasm

Tammy – where do you use us in this broken system? How do you see us? Are we outside patching the system – physicians themselves?

Jack – appreciative inquiry – the system is a platform -

## Next Meeting

Sat 3/15 2- 5 pm -- Location: 1010 Emerson St, Palo Alto, CA 94301

Meeting Closed