

# PHSA Collective Impact Network (CIN) Meeting Minutes

December 10th, 2020

1 – 4 pm

## ATTENDEES

PHSA/ BCCDC/ consultant	Heather Pedersen
BC Women's Hospital and Health Centre	<i>tba</i>
FNHA	Sara Pyke
Pacific AIDS Network	Evin Jones, Simon Goff, Monte Strong, Alfiya Battalova, Marc Seguin
Central Interior Native Health Society	-
CBRC for Gay Men's Health	Darren Ho, Jody Jollimore
Options for Sexual Health	Michelle Fortin, Anisha Abdulla
Pacific Hepatitis C Network	Deb Schmitz
Pivot Legal Society	Drew Dennis, TJ Felix
YouthCO	Sarah Chown

## AGENDA (DRAFT)

ITEM	TIME	DESCRIPTION
1.	1:00	<p>Intro</p> <ul style="list-style-type: none"> <li>Welcome and Regrets from Phyllis Sauve, Daryl Luster, Ivan Leonce, Jennifer Hoy. Thanks to Monte for note-taking for us. We will be recording today for any details we miss.</li> <li>Territorial acknowledgment: "We would like to acknowledge that PAN, and many at the CIN table, as provincial organizations, gratefully and respectfully work and partner with Indigenous Peoples in what is often referred to as British Columbia."</li> </ul>
2.	1:10	<p>Check-In</p> <ul style="list-style-type: none"> <li>Introduction from Heather P. – Online Sexual Health Services Manager at BCCDC presently stepping in for Lauren, doing some work with COVID response with BCCDC, passions around programs and services that reduce barriers for access for sexual health services and addressing inequities, participated in Making Space project for improving cultural services within the BCCDC services.</li> </ul>
3.	1:20	<p><b>CIN Business</b></p> <ul style="list-style-type: none"> <li>Ratify September 2020 minutes – no changes of minutes, ratified.</li> <li>Approve December 2020 agenda                             <ul style="list-style-type: none"> <li>Michelle – can we add a promo item?</li> <li>Evin - can we add a quick share of vaccine information?</li> <li>Marc – participation of PWLE in CIN and where does it fit in with current projects? Simon – One of our priorities, we will want to see how are projects are engaging PWLE.</li> </ul> </li> <li>Discuss/ approve amendment of Terms of Reference (see attachment) – Simon modified in light of people currently at the table;</li> </ul>

		<ul style="list-style-type: none"> <li>○ Sarah – update reference to in-person and online meetings.</li> <li>● Change frequency of meetings to quarterly (2 in-person and 2 virtual)? <ul style="list-style-type: none"> <li>○ Drew – Is travel covered for people coming in from outside Vancouver area</li> <li>○ Simon - some funding available for travel.</li> </ul> </li> <li>● <b>ACTION – Simon will bring back next draft</b></li> <li>● Annual CIN surveys status (Alfiya) – collecting responses up to early Dec and we are now collating data, presenting results at next meeting and focus on some key areas of the findings.</li> </ul>
4.	1:30	<p><b>PHSA updates</b></p> <ul style="list-style-type: none"> <li>● Agency Contracts (Heather) – Lauren has finished putting together the contracts and they have been sent off to Bobbi for approval. They should be ready to send back to CIN in next few weeks, might be early New Year.</li> <li>● Re: carrying over funding from 2020-21, reach out to Heather ASAP. If anyone has questions; after contracts are sent back there will be opportunity to discuss with Heather.</li> <li>● Jody – is Innovation Fund coming back in 2021?</li> <li>● Evin - in talking with Lauren the intention is historical Poz Living funds would go back out, with call for proposals, and a smaller pot, the \$100K would be reinstated. This would be going to leadership to decide.</li> <li>● Heather- if there are thoughts or preferences from the group in terms of needs then send them to Heather/PHSA.</li> <li>● Simon - typical release of Innovation Fun has been in April/May.</li> <li>● COVID-19 Relief Funding (Phyliss, Evin) – two rounds of relief funds, \$700,000. First round focused on PPE, food security and safe smoking supplies. Most recent relief fund there was desire to focus on Indigenous service, total of 85 applications, 18 applications were funded at a total of \$150K. Lauren will communicate funding decisions by December 11, 2020; three grants awarded within each health region.</li> </ul>
5.		<p><b>Community Updates/questions</b></p> <p><b>Michelle – Sexual health event week 8-14<sup>th</sup> Feb</b> with youth theme. Maybe have an optional conversation in January with CIN members about how youth are welcomed in our spaces?</p> <p><b>Evin – what do people know about the COVID vaccine in terms of focus populations and rollout alongside long-term care residences and health workers? Where do marginalized people fit in?</b></p> <ul style="list-style-type: none"> <li>● Michelle – presentation tomorrow by Minister Dix and Bonnie Henry regarding the rollout.</li> <li>● Heather – first long-term care workers and then the residences, then healthcare and support staff (<b>ACTION Heather will gather some info and report back</b>).</li> <li>● Simon - <a href="https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support/vaccines">https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support/vaccines</a></li> <li>● Sara - FNHA has an immunization team, really advocating for First Nations communities, particularly more remote, rural, remote communities. Lot of challenges, like the Pfizer vaccine, for example, has to be kept out very cold temperatures. FNHA is really trying to advocate and get into every conversation.</li> <li>● Michelle – Talked to Cheryl Davies at BC Women's about deploying our nurses who are immunization certified. They are identifying nurses in the system that either were certified or could certify, and deploying them to community based spaces. Because</li> </ul>

		<p>once the other vaccines are available that do not require –70C, like the Moderna vaccine, they will want to get as many people on the ground that can deliver it.</p> <ul style="list-style-type: none"> <li>TJ – VCH will be coordinating with VANDU regarding rollout.</li> </ul> <p><b>Jody - closure of Bute Street clinic</b> is unfortunate since there is already demand for testing services; hoping other organizations will advocate to BCCDC for maintaining testing services; no shortage of clients needing STI testing.</p> <p>Also, attention needed on addressing no mention of Two Spirit (minimal mention of LGBTQ+) inclusivity re: <i>In Plain Sight</i> report. Would other orgs on CIN be interested in signing?</p> <p><b>ACTION – Members expressed interest in advocating for both at multiple tables, CBRC to share letters, and PAN to disperse.</b></p> <p>Heather – expressed that she concurs with not wanting Bute Street clinic to close.</p>
6.	1:40	<p><b>Commitment to Truth and Reconciliation</b> – facilitated session including agency-assessment and prioritizing next steps for CIN.</p> <p><b>It quickly became apparent that this conversation was uncomfortable and upsetting, and it was halted.</b></p> <p><b>ACTION: PAN and PHSA committed to follow up with all members (by phone for those most affected), asking for feedback, and then to share it with the CIN.</b></p>
7.	2:40	Break
8.	2:50	<p><b>CIN Work Teams – Update and requests</b></p> <p>Including new plans and timelines, (any) progress on implementation, challenges that have arisen, and ways the CIN can help. All the following to present.</p> <ol style="list-style-type: none"> <li>1) CBRC and YouthCO - Community of Practice for Indigenous staff members – currently identifying an elder to work with this group. Once an elder would like to participate then a call-out to Indigenous paid staff members of CIN member orgs to participate. We want to start off with people in paid roles and also not wanting to start with too big of a group.</li> <li>2) CINHS - Safe Space in Healthcare and Advocacy – no report (due to injury).</li> <li>3) OPTIONS - Knowledge Exchange and Translation work – specific to particular communities of HIV &amp; hep C that identify as women; first step was to develop project plan and break it down into actual activities; involvement of a peer was essential so we researched good practices to develop the job posting; attended webinars on HIV toolkit for women that was recently developed; have been looking at practices around anti-racist and decolonizing practices to bring that into sexual health education. Asked to come in to provide an HIV one-on-one workshop to provide an example of what that would look like for grade 10 class. Our Safer Spaces Saturday clinic specific to people who are trans-women, cis-women, or intersex at birth is aiming to meet community testing needs, and hopes to start in January.</li> </ol> <p><b>ACTION: Sarah C offered comments around making clinic settings a safe space, and languaging and offered to connect with Anisha offline about this.</b></p>

		<p>4) PHCN - HCV Elimination Blueprint Implementation – Community Pre-Summit Project – Officially operating as BCHN; Forum based on the Blueprint was to be happening in Feb; purpose of project is to bring together as many diverse stakeholders within hep C community and take a look at the Blueprint sections and what the community role should be; how community will support other disciplines’ work within hep C; identifying and clearly articulating what a good relationship between a CBO and lived experience with other discipline; aiming to gather as much input as possible for the design of the project process; currently back to a planning stage and project being pushed back to fall of 2021.</p> <p>5) PIVOT – Community education and outreach – Looking to feedback to communities and peers with the results from Project Inclusion. Wondering if other organizations have found ways to do meaningful consultation beyond just online, but in person? What are some of the ways that people have been able to do them to do so safely? Thinking about peer led groups in those in various communities and kind of work in partnership with them and be able to compensate them for their third time in their resource support, to help be on the ground facilitators for us.</p> <p><b>ACTION: Anisha mentioned if PIVOT wanted to connect with youth, BIPOC or LGBTQ2S+ then perhaps approaching the Foundry (esp. rural), ANKORS and Positive Living North. Drew may connect further, especially around PLN – where there are no existing connections.</b></p> <p>6) PAN – Organizational stigma assessment tool for CBOs, Health Authorities - pulling together a team to review stigma assessment and come up with some actions. In a related project, working with Community Action Initiative (CAI) and the Stigma Working Group, we have developed a Personal Experiences of Stigma survey and the goal right now is to find two organizations that are interested in piloting the tool. The aim is that it is a way of capturing intersectional experiences of stigma.</p>
9.	3:40	Check Out
10.	3:55	Next Meeting – March 4 <sup>th</sup> 1-4pm (changed to April 15 <sup>th</sup> 1-4pm)
11.	4:00	Adjourn