



Office of the Deputy Mayor for Health and Human Services

**MAYOR'S THRIVE BY FIVE COORDINATING COUNCIL**

November 20, 2019

1350 Pennsylvania Avenue NW, Room G9

3:00 pm – 5:00 pm

**Coordinating Council Members**

**DC Agency Representatives**

<b>Name</b>	<b>Affiliation/Designation</b>	<b>Attendance</b>	<b>Designee</b>	<b>Attendance</b>
Dr. Faith Gibson Hubbard	Thrive by Five Coordinating Council	present		
Richard Reyes-Gavilan	District of Columbia Public Library	not present	Ellen Riordan	present
Deputy Mayor Wayne Turnage	Office of the Deputy Mayor for Health and Human Services	present		
Deputy Mayor Paul Kihn	Office of the Deputy Mayor for Education	present		
Dr. LaQuandra Nesbitt	DC Health	not present	Dr. Erica McClaskey	present
Scott Pearson	Public Charter School Board	not present		
Chancellor Lewis Ferebee	DC Public Schools	not present	Dr. Cheryl Ohlson	present
Brenda Donald	Child and Family Services Agency	not present	Rachel Joseph	present
Dr. Barbara Bazron	Department of Behavioral Health	not present		
Laura Green Zeilinger	Department of Human Services	not present	Theresa Early	present
Dr. Unique Morris-Hughes	Department of Employment Services	not present	Leslie Green	present
Superintendent Hanseul Kang	Office of the State Superintendent of Education	not present		



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### Public Members

Name	Affiliation/Designation	Attendance
Yael Meirovich	Community Member Ward 1	present
Michelle Parrish	Community Member Ward 5	present
Ramin Taheri	Community Member Ward 6	present
LaJoy Johnson-Law	Community Member Ward 8	present
Elizabeth Groginsky	State Early Childhood Development Coordinating Council	not present
Brenda Rhodes Miller	DC Campaign to Prevent Teen Pregnancy	present
Kimberly Perry	DC Action for Children	not present
Ruqiyyah Abu-Anbar	Home Visiting Council	present
Dominique Spencer	Jubilee Jumpstart	present
Dr. Marla Dean	Bright Beginnings	present
Dr. Lenore Jarvis	DC Chapter of American Academy of Pediatrics	present
(unfilled)	DC Academy of Family Physicians	
(unfilled)	American College of Obstetrics and Gynecology	
(unfilled)	Community Member Ward 2	
(unfilled)	Community Member Ward 3	
(unfilled)	Community Member Ward 4	
(unfilled)	Community Member Ward 7	

**Other Attendees:** Samantha Brew (DC Health), Michelle Price (OSSE), and Tiffany Wilson (Thrive by Five DC)



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## Agenda

1. **Welcome** **Council Chair**
  - Chair Dr. Faith Gibson Hubbard (Chair) called the meeting to order at 3:06 pm.
  - Chair shared the agenda for the meeting.
  
2. **Discussion of Coordinating Council Purpose** **Council Chair**
  - Chair provided the Coordinating Council's purpose to the members. While stressing the importance of this body, the Chair also stated the importance of partnering with families in meaningful ways.
  - Chair reviewed the Coordinating Council's four main tasks: track and report; provide programmatic and policy recommendations; coordinate and streamline what works well and what does not; and identify gaps and opportunities for improvement.
  
3. **Remarks** **Deputy Mayor Wayne Turnage**
  - Deputy Mayor for Health and Human Services Wayne Turnage (DMHHS) provided remarks. DMHHS thanked members for agreeing to serve on the council.
  - DMMHS shared that we are often provided data on the nature and impact of problems on maternal and infant health outcomes. DMHHS stressed that recommendations coming from this group are vital in order for the administration to take proactive measures.
  
4. **Remarks** **Deputy Mayor Paul Kihn**
  - Deputy Mayor for Education Paul Kihn (DME) provided remarks. DME thanked members for being here and stressed the need for balance between health and education.
  - DME recognized that this group will provide framing for the kind of systems and infrastructure that we want to see in the next 5, 10, and 20+ years. DME also stated that he took pride in the investments being made in systems across the District, with examples being investments in early childhood education and our schools, out-of-school time programming, and workforce development.
  
5. **Member Introductions** **Council Members**
  - All members present shared their names, roles and organizations, and their individual reasons for being interested in this work.



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- Members shared details about their work in their professional capacities, but also their personal ones.
- Some members saw their presence on the council being an opportunity to help other parents avoid similar experiences and preventable outcomes.
- Other members had specific areas of interest that they are looking to improve, like special education, maternal health, intergenerational approaches to homelessness, and the creation of more family-centered policies.
- Chair asked members two questions: “What comes to mind when you hear ‘thrive by five’?” and “What expectations do you have of this phrase?”
- Members shared that the phrase implies: a need for a holistic approach to care and education; a two-generational approach because those 0-5 are unable to care for themselves; a need to correct the systems that make it harder for children to thrive instead of trying to fix families and their children; and “thrive” is a relative term.
- Members shared that their expectations for this phrase include a focus on making connections between silos and making sure that “thrive” and what it takes to thrive is clearly defined.
- DME added that the work of the council must be accelerative of what is currently happening and that if the body does not have an outcome in mind by which individual contributions are being measured, that conversations will become cyclical in nature.
- Chair added that there is value in connecting to work already happening and measures that are already established.

## 6. Landscape & Context Setting

**Council Chair**

- Chair provided an overview of Thrive by Five.
  - Chair detailed Thrive by Five’s history, from growing from its initial iteration as a resource website, its expansion to include an office with an Executive Director and Coordinating Council, and its present vision.
  - Chair stated that the office is situated between two sectors—education and health and human services, and two frameworks: DC’s Perinatal Health Framework and DC’s Early Childhood System Approach to Child Health, Development, Education, and Well-being.
  - Chair shared the five main facets of Thrive by Five DC’s work, including: the Coordinating Council; early development and learning; coordinating of District programs; resource website for families and providers; and Mayor Bowser’s Maternal and Infant Health Initiative.
- Chair provided data to members to help contextualize the 42% of children age 0-5 in the District, which account for 7% of the District’s population. The members reviewed the following graphs and data points:



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- Child Population by Age Group
  - Child Population by Race
  - Child Population by Race and Age Group
  - Median Family Income with Children by Ward
  - Unemployment by Ward
  - Child Poverty by Ward
  - Early Intervention Enrollment
  - Public Preschool and Pre-K Enrollment
  - Subsidized Child Care Enrollment by Ward
  - Additional data points for public assistance and housing
  - Total Births
  - Preterm Births
  - Low Birth Weight Live Births
  - Infant Mortality
- Chair opened for discussion with the following questions: “What are your thoughts?”, “What does the data say?”, and “What stands out?”
  - Members shared that some of the data provided for children beyond age 5 could speak to other barriers and access to information for certain services provided from 0-5, like early intervention services.
  - Members also expressed a desire to see more data focused on outcomes by ward, as well as GIS data on access to care.
  - Some members noted that conversations about certain services are often discussed in terms of availability instead of quality of services or potential barriers to entry.
  - Chair remarked that the data presented also needs to be paired with narratives in order to glean additional insight and context than what is available in raw numbers.
  - Members added that DC is unique in that formal education begins earlier due to universal pre-K and that school movement can happen more frequently due to school choice and the school lottery.
  - Other members noted that the wealth of data upon first look makes the work seem overwhelming and that there is a need for more longitudinal data as the demographics of the District change.
  - Members shared that developing focus areas would better help determine what data we would need to see related to performance on various metrics.

## 7. Discussion of Member Priorities and Goals

**Council Chair**

- Chair FGH opened the conversation for members to discuss their priorities and goals with the following questions: ““What are your priorities or priority areas? What do



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you believe should be the mission or goal of this work? What strategic priorities should we focus on?"

- *Dr. Cheryl Ohlson*- What access to different types of resources look like throughout the District, particularly in communities that have experienced a lot of changes
- *LaJoy Johnson Law*- Information on the universe of services
- *Michelle Parrish*- What choices families have (should not presume that families are actively not choosing when it could be that they are unaware of choices available to them or have even been told that certain choices that should be available to them are not); a comprehensive list of services already available
- *Dr. Marla Dean*- What questions District government are working to answer and how our positioning can help identify barriers to getting answers; Those questions will help us develop goals, indicators, and desired outcomes
- *Dr. Erica McClaskey*- How to give residents tools to navigate the number of services available to them
- *Ramin Taheri*- A clear understanding of what we are trying to make sure that we provide in the future; moving beyond a discussion of symptoms to one identifying causes that helps us better serve families
- *Ruqiyyah Abu-Anbar*- Using existing performance indicators and outcomes, like the Early Childhood Systems Approach to answer questions about District priorities
- Chair desires to have information to present at the 2020 National Maternal and Infant Health Summit.
- Chair gave a brief overview of the outreach and engagement that the office has undertaken since May 2019, impacting over 5600 people.
- Chair provided details on the Thrive by Five Working Group, including organizational members and strategic items that were identified in partnership with that group.

## 8. Next Steps

**Council Chair**

- Chair presented the following subcommittees for member consideration:
  - Strategic Planning and Initiatives
  - Perinatal Health
  - Child Health & Development
  - Early Learning & Care
  - Community Engagement
- Dr. Jarvis suggested considering subcommittees split by stages: prenatal, infants, toddler, and children.
- Subcommittees to be voted on via survey at a later date.



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- Chair presented future Coordinating Council meeting dates: January 22, March 25, May 27, July 29, and September 9, 2020.

9. **Adjournment**

**Council Chair**

Meeting adjourned at 5:01pm.

Any comments regarding these meeting minutes may be sent to Tiffany Wilson at [tiffany.wilson@dc.gov](mailto:tiffany.wilson@dc.gov).

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