The meeting of the Administration and Human Services Standing Committee was held on March 16, 2015, at 5:27 p.m., in the 5th Floor Conference Room of the Municipal Office Building. The following members were present: Commissioner Markley, Chairman; Commissioners Walker, Maddox, McKiernan and Philbrook. The following officials were also in attendance: Joe Connor, Interim Assistant County Administrator; Dr. Larry Franken, Public Health Director; Debbie Jonscher, Assistant Finance Director; Renee Ramirez, Director of Human Resources; and Henry Couchman, Senior Attorney.

**Chairman Markley** called the meeting to order. Roll call was taken and all members were present as shown above.

Approval of standing committee minutes from January 20, 2015. **On motion of Commissioner Philbrook, seconded by Commissioner Maddox, the minutes were approved.** Motion carried unanimously.

Committee Agenda:

**Item No. 1 – 150039…GRANT: COMPREHENSIVE FOOD SYSTEM ASSESSMENT**

**Synopsis:** Request to submit a grant application to the Greater Kansas City Healthcare Foundation in the amount of $177,115 to fund a comprehensive food system assessment, submitted by Dr. Larry Franken, Public Health Director. No cash match required; in-kind staffing in the amount of $72,307.

**Dr. Larry Franken, Public Health Director,** said the funds for that are going to be used for doing consulting from a group at KU Medical Center to help us get a comprehensive study to determine weaknesses in our food system.

This is tied in, we’ve already, I guess, add into that, we just recently were named one of eight communities across the nation to receive a Community of Opportunity Award from
Farmland Trust which will give us technical assistance in assessing our food system. As you guys probably are aware, we’re in great need of support with understanding how we can get fresh fruits and vegetables to our residents.

**Commissioner Walker** asked what would you expect this assessment for almost $200,000 to tell you. What do you hypothesize the results of this is going to be? **Dr. Franken** said the hope is they’ll give us ideas of one, where we have weaknesses, be it in transit systems to our groceries and to our corner markets. Also, maybe they may also give us ideas on policies that we could implement that may encourage more development with grocery stores and corner markets in the community.

**Commissioner Philbrook** said you may not know this but I just thought I’d ask you a question because it came across to me in my email. Do you know anything about the Fresh Food Financing Initiative? **Dr. Franken** said I’m not that familiar with it, no. **Commissioner Philbrook** said we’ll talk if you want to hang around later because it’s something that I came across.

**Commissioner Walker** said I’ve got to ask you, what are the employees doing right now in the amount of $72,307 that’s not going to be done while they’re doing this. **Dr. Franken** said what were they doing, what they’re doing as far as their jobs right now? **Commissioner Walker** said they’ve got to be doing something. **Dr. Franken** said they’re actually working on other initiatives which we’re going to talk about here soon, too, from trails to the FIMR stuff, the Fetal Infant Mortality stuff, to just education activities, health promotion activities in the community. **Commissioner Walker** asked what does this represent in terms of - **Dr. Franken** said percentage of salary? **Commissioner Walker** said well, actually percentage of job duties for these? I don’t know how many staff you’re going to have working on this, but is one full-time employee? **Dr. Franken** said it’ll basically be two employees working part of their job, it’ll include. **Commissioner Walker** said okay. **Dr. Franken** said actually, probably it’ll be a lot once we get into the process. It’ll probably be a lot more of their time. I’m guessing probably 30-50% of their time will be devoted toward it. **Commissioner Walker** said okay.

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Action: Commissioner Philbook made a motion, seconded by Commissioner Walker, to approve and forward the matter to the full commission. Roll call was taken and there were five “Ayes,” Philbook, McKiernan, Maddox, Walker, Markley.

Item No. 2 – 150047…GRANT: 20/20/20 CAMPAIGN

Synopsis: Request to submit a grant application to the Greater Kansas City Healthcare Foundation in the amount of $56,095 to fund the 20/20/20 Campaign (20 miles of high priority sidewalks, 20 miles of trails, and 20 miles of bike lanes by the year 2020), submitted by Dr. Larry Franken, Public Health Director. Cash match required which will be achieved with funds already secured through CDC REACH grant and Slide for Health funds. In-kind staffing will be met with a percentage of current Health Communities Wyandotte Program supervisor salary.

Dr. Franken said this grant is a campaign we’re about to start up here on 20 miles of trails, 20 miles of bike lanes, and 20 miles of sidewalks to the community applying this through the Healthcare Foundation Grant, Greater Kansas City.
Here’s a handout explaining some of the activities that we’re going to include with the grant funds which will include things like creation of a campaign logo, websites, brochures, videos to kind of show people what’s available in the community on these trails to encourage people to go out and use them, community events like a bike ride or 5K. Also, we’d like to develop like walking clubs around those communities to encourage more activity.

**Commissioner McKiernan** said the grant is really just for promotional materials here. It doesn’t include anything in the way of creating some of the 20/20/20 infrastructure. **Dr. Franken** said no. I guess this is one, we’re just kind of the part off part to get us kind of started on the campaign with getting people encouraged and excited about wanting to be active and being involved in physical activity in the community. Yeah, that’s kind of this part of that. We’ll talk about it more in the next grant.

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Commissioner Philbrook said as you said, it’s just for things that are already in place right now and to encourage people to use what we have. Dr. Franken said yeah, use what we have now.

Action: Commissioner Philbrook made a motion, seconded by Commissioner McKiernan, to approve and forward the matter to the full commission. Roll call was taken and there were five “Ayes,” Philbrook, McKiernan, Maddox, Walker, Markley.

Item No. 3 – 150048...ACCEPT FUNDS: SLIDE FOR HEALTH CONTEST
Synopsis: Request to accept funds in the amount of $9,468.32, which were charitable funds raised by the Slide for Health contest sponsored by Healthy Communities Wyandotte (HCW), submitted by Dr. Larry Franken, Public Health Director. The funds will promote physical activity by improving levee trails in the county or help build new recreational trails. Schlitterbahn offered HCW to sponsor the Verrückt opening in the summer of 2014.

Dr. Franken said this was a fundraiser. It was done last year at the opening of the new superslide there at Schlitterbahn, Verrückt. The money raised from that $9,468, is going to be used to help, we have a picture there in the handout I gave you, try to improve the surface for Armourdale Hike and Bike route. As you can see there, it’s pretty rough. These funds will be used to help resurface that and also add some signage too.

Action: Commissioner McKiernan made a motion, seconded by Commissioner Philbrook, to approve and forward the matter to the full commission. Roll call was taken and there were five “Ayes,” Philbrook, McKiernan, Maddox, Walker, Markley.

Item No. 4 – 150049...ACCEPT FUNDS FROM GM/UPDATE ON INFANT MORTALITY RATE
Synopsis: Request to accept charitable funds on behalf of Healthy Communities Wyandotte in the amount of $5,000 from General Motors Fairfax Assembly Plant, submitted by Dr. Larry

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Franken, Public Health Director. The funds will support the work of the Infant Mortality Action Team. No match required.

Update on the infant mortality rate.

Dr. Franken said we received $5,000 from General Motors and those funds are going to be used for an action team that’s looking into our Fetal Infant Mortality rate which is a major concern here in Wyandotte County. I’m going to have some of my colleagues here speak on that subject to you briefly.

Leslie Newton, Registered Nurse, Wyandotte County Health Department, said in January, 2013 three counties were given grants to start a Fetal and Infant Mortality Review Program. Those counties were Geary, Shawnee, and Wyandotte. Basically what we’re studying is the deaths of babies in utero, age 24 weeks or greater, and infants up to age one.

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Project HOPE
Helping Others, Providing Education
Wyandotte County FIMR (Fetal and Infant Mortality Review)

- In Kansas the Black, non-Hispanic five-year rate of fetal and infant mortality (2009-2013) is 1.7 times higher than the White, non-Hispanic rate (14.6 deaths per 1000 live births). The Hispanic five-year rate is 1.4 times higher than the White, non-Hispanic rate. Wyandotte County accounted for 104 deaths or 8.0% of the total.
- Healthy People 2020 Infant Mortality objective is 6 deaths per 1000 live births. Wyandotte County's rate in 2010 was 8.47 deaths per 1000 live births. There were 28 babies that died in 2010.
- Wyandotte County received a grant award in January 2013 from the Kansas Health Foundation, United Methodist Health Ministry Fund, and Kansas Action for Children.
- Four counties in Kansas currently have FIMR programs: Geary ( Junction City), Sedgwick (Wichita), Shawnee (Topeka), and Wyandotte (Kansas City).
- FIMR is an evidence-based perinatal systems initiative that is being implemented to understand and intervene to correct factors that may contribute to disparity in infant health outcomes.
- FIMR is an action-oriented community process that continually assesses, monitors, and works to improve service systems and community resources for women, infants, and families. A fetal or infant death is the event that begins the process.
Infant mortality is an important indicator of the health of a community or estate. It serves as one proxy indicator of population health since it reflects the potential association between the causes of infant mortality and other factors that are likely to influence health status of the whole population. Basically, the number of babies that we have die is a direct reflection of the overall health of our county. We are one of the highest counties in the nation for African American infant mortality.

Fetal and Infant Mortality review is an action oriented community process that continually assesses, monitors, and works to improve service systems and community resources for women, infants, and families. It’s not something we can solve overnight. It is an ongoing community initiative with recommendations that will be constantly changing and added on to based on the data and community needs.

Commissioner Walker said I recently, a month or so ago, maybe longer, had a meeting with a prominent leader in the Black community who has a daughter that works in this field back east, and made him aware of the infant mortality rate in the Black community in particular. Do
we have results over a number of years, or was this one year in particular, in which there was a spike? Has it consistently been the highest in the nation?

**Ms. Newton** said I don’t have results any newer than 2010 at this time, but we do continue to be one of the higher counties in the nation up into this point. The number of births in Kansas has declined, so our numbers kind of look like they’re going down. But, in reality, our numbers are continuing to go up as far as the death rates go.

**Terrie Garrison, Program Manager, Wyandotte County Health Department**, said the inequity has actually widened over the last few years between the Caucasian and African American. **Commissioner Walker** said I would like, I’m sure all the commissioners would like, as much hard data on this as you can develop. I’m not wanting you to go out and spend a lot of time doing this, but surely there must be data that’s somewhat readily available for more than a one year period of time. We don’t know what the 2012 infant mortality rate was? **Ms. Newton** said I can tell you how many babies died in Wyandotte County in 2013. **Commissioner Walker** said well, ten is a lot if you only have 100 births, but if you have 10,000 births it’s a different, I guess I have to know or have some quantifiable measure as to whether this health disaster is continuing on a year-by-year basis and what we need to do to make inroads into making that stop or decrease.

**Ms. Newton** said I believe on your handout that we gave you, the full sheet of paper. **Commissioner Walker** said I obviously hadn’t had time to read it. **Ms. Newton** said that’s fine. The first little bullet point it says, “In Kansas, the Black, non-Hispanic five year rate of fetal infant mortality,” so from 2009 to 2013 is 2.7 times higher than the white, non-Hispanic rate. The Black rate was 14.6 deaths per 1,000 live births. The Hispanic five year rate is 1.4 times higher than the White, non-Hispanic rate. Wyandotte County accounted for 104 deaths or 8% of the total. The 20/20 health initiative was six deaths per live births. The African American rate was 14.6, so pretty large discrepancy between the national average of six.

**Commissioner Walker** asked do they attribute these deaths to what cause. **Ms. Garrison** said that is the point of the FIMR program. The Fetal Infant Mortality Review program is for us to basically do a continuous quality improvement program for the community to see, to do case reviews, to do case abstractions and case reviews, of those infant and fetal deaths to see what kind of system gaps there were, what kind of resource gaps there were, what kind of issues came
up for that family, for that mom, for that death, that we can look at it as an entire system and as an entire community and find that there are -- what things we can put in place to make improvements and to decrease that rate. **Commissioner Walker** said 8% is totally unacceptable. **Ms. Garrison** said I would agree. **Commissioner Walker** said I would expect it to be maybe 1 or 2% and maybe not even that, but 8%.

**Commissioner Maddox** said I agree, Commissioner Walker. I would also like to see rough numbers and rough data that leads to it. I, too, myself, seen the Channel 5 segment where they deemed Wyandotte County the highest county in the nation for infant mortality rate. I couldn’t believe it so I started to google it, started to do research on it, and I don’t understand how if someone is saying where do the most babies die, they will pinpoint on a map Wyandotte County. We can speak about poverty and all those different things that may be a part of the equation, but my question is, there’s other counties and cities and other states or counties that are in much more poverty than Wyandotte County, but we still rank higher than them. I don’t know that it’s really a poverty issue, but it may be more of a resource issue.

My question is, with the Health Department being predominantly grant funded, does that become an issue if there’s not a grant there? If we don’t get a grant, do we not have the services needed? **Dr. Franken** said it helps. Obviously the grant funding, the resources we can put into it helps immensely.

I’ll say that at least there’s a plan in place now to address it, through kind of what they’re talking about and going on with the development of an action team to try to see if we can find ways to stop this. I guess to your point, there’s areas in rural Alabama and Mississippi that are much more poverty stricken than us that have lower infant mortality. Like I said, it is an issue, and it is one that we need to probably focus on.

**Commissioner Maddox** said my question with that, I wanted to know is it going to be a task force, is it going to be a team? How many people are on this team? **Ms. Newton** said there’s four steps, basically, to our FIMR process. We receive either the death or birth records from KDHE. The charts are then abstracted from hospitals or doctors offices or whatever other sources we may need. There’s a maternal interview process which our social worker, Jennifer, does, and she actually contacts the mothers of the babies that have died. Whoever is willing to
speak with her, she has an interview with them getting their side of the story, what they feel like
happened in their particular situation.

Jennifer Allen Codil, Social Worker, Wyandotte County Health Department, said I gave
you guys the folder, there’s one of these for you guys to pass around, but when we receive the
information from KDHE, the death certificate which Leslie gets, we send out this packet of
information and it explains what our program is. Because we had to go before an institutional
review board, we are not allowed to contact the families before three months to allow them to
have time to grieve. We do want to give them information and let them know that we are
available for them. We also give them information about where they can go in the community to
receive grief support, because a lot of times after something like this happens, families feel very
alone.

Almost every mother or father that I’ve talked to after an incident like this feels like they’re
alone and they have no one to talk to. So we try and bridge that gap and give them information
about where they can go. A lot of times, actually, what happens is they’ll call me directly and
say yeah, I want to do the interview. Then I go ahead and schedule the interview.

The interview process takes anywhere from an hour to three hours, sometimes I’ve had an
interview take four hours. It depends on what that mom wants to share with me. Now I do have
specific questions that I need to ask about, like her prenatal care, if she had any problems with
obtaining Medicaid or insurance or food. We also talk about things like drug use, cigarette use,
domestic violence, all of those things that happen. We also talk about the baby’s sleeping
environment if there was an accident.

So far all of the families and mothers that I’ve interviewed have been very open with me.
We’ve found some very interesting things that we’ve taken to our case review team and have
recommendations to give to the community action team. We have been very lucky. We’ve had
interviews from very diverse families, different groups, different religions. Actually, we are well
ahead of the rest of the FMIR teams in the State as far as interviews come. We have had no
barriers in getting the maternal interview.

Commissioner Maddox said I would like, if possible, for the evaluation process to include
environmental. It could be something that people are drinking. It could be something they’re
inhaling everyday. I know there’s other things that could be possibly looked at as to why that’s

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happening, located or centrally located in certain areas of our community. I don’t know what that takes, but I think, also, we can look at the environmental effects. I’ve also read through high school where there were environments that were toxic that people were inhaling daily and they started to die earlier. Different things happen, maybe that’s one process too.

Ms. Newton said once the maternal interview is completed we have a case review team that consists of neonatologists, OB/GYNs, pediatricians, clergy, EMS, coroner, nurses, SIDs, March of Dimes, we have a bereavement coordinator, Healthy Families. We’ve tried to cover as much as we could of the community, the health community, in our case review team.

What they do is they review the charts, the medical information, the maternal interview, and then they make recommendations on what they think maybe could happen to make this better in the community.

Those recommendations then go to a Community Action Team which is made up of a diverse group of community leaders. I believe there’s about 20 members on that team. They have not met yet, I don’t believe. I think they’re planning to meet soon for their first meeting. We’re planning to give recommendations to them in May from the case review team. It’s the Community Action Team’s job at that point to then put the recommendations into action.

Commissioner McKiernan said great work, needed work, well thought out, comprehensive. Let’s get back to this particular gift. Remind me again, how will this specific $5,000 be used to facilitate the attainment of all these objectives?

Ms. Newton said it’s going to go towards the Community Action Team, so it’s going toward the actions. It’s going to help us put these actions into play. Commissioner McKiernan asked it’s going to help with implementation or just support. Ms. Newton said I believe implementation.

Dr. Franken said some of the things we’re talking about doing, to get people to encourage them to go, have food for them to come, daycare to get the mothers, some of them to come there, so we can meet with them to try to implement some of these interventions. Part of it’s going to be to help get access to the community.

Commissioner Walker said at the risk of, zero would be the obvious goal, but what is considered normal or standard, or is there? I would think that under the best of all circumstances

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there is going to be an occasional infant death, if for no other reason than, perhaps, SIDS or some genetic defect or congenital heart condition. What is considered a normal goal, an attainable goal for a county? Do we have anything like that?

**Ms. Newton** said the Healthy People 20/20 health initiative is six deaths per 1,000 births. We would like to be below that. **Commissioner Walker** said below six. **Ms. Newton** said six or below, yes.

**Commissioner Maddox** said I would like a quick analysis. Since this has been going on probably three or four years where we’ve been ranking like dead number one, or somewhere in the top three across the nation, before this task force what have we, in research, what have we found in the last three years that may be a common cause, that may be something that’s a red flag. Where are we at in the process as of now? **Ms. Newton** said I can tell you that the coroner tells us that there’s a lot of sleep accidents. There’s a lot of parents rolling over on babies, alcohol involved. When you look at infant deaths, that’s the majority. We do know that that is, I will tell you that that’s the hardest maternal interview to get.

**Commissioner Maddox** said you said parents using alcohol. **Ms. Newton** said sleep accidents, so maybe they have had alcohol and then slept in the same bed as their baby that night. So you know, we’re looking at things like cribs for kids, finding and educating parents about safe places for their babies to sleep. I will tell you that that’s one of the higher ones.

**Ms. Garrison** said probably for the fetal losses, a lot of times it’s stress. It’s maternal stress. Maternal stress, and that can, I know, incorporate all kinds of things, but it causes inflammation. Then inflammation can cause pre-term labor, pre-term delivery, early babies. Then they’re in neonatal ICU and that can cause all kinds of problems, lungs immaturity and things like that.

**Commissioner Walker** said I would like, and Joe since you were formerly head of that Health Department for a number of years, we’re going to go into our budget session here soon. I would like to have as part of that budget presentation for the Health Department, I’d like to see a proposal, I mean $5,000 is nice and I’m sure we’ll take money gifted to us. What else can we be doing from a financial standpoint, more staff, more outreach, more private provider assistance? I would like to have a more comprehensive review of what we’re doing in infant mortality than,
and this was fine tonight, but it is disgraceful to think that we are the worst in African American infant mortality. If you’d have asked me cold blank, I probably would have said Detroit, just because of all the other issues in Detroit. This is not acceptable and $5,000 is nice, but we need more resources at this if we’re ever going to bring that down, I think. I’m not sure what those resources are, that’s why I’m asking for some kind of more comprehensive aspect at the budget session.

Mr. Connor said we can certainly provide that. This has been, we’re very good with grants as you’re well aware, but we can certainly provide the funding source for FIMR, how long it’s going to be in place which will be for just a few more years, and then what it’s going to take to continue it because it is a staff intensive, very laborious process to work through this. We can certainly provide that for you, what it would take, what are we spending on FIMR now, then how do we solidify that in the Health Department into the future.

Commissioner Walker said you can take the results that we’re getting as to what happens post-death and translate those into some kind of effective pre-death outreach program to pregnant women. It seems simple when you say it, but with this kind of number, it is very clear to me we need to be doing more than we’re doing and the sooner the better. Mr. Connor said I think that’s a great point. I think what’s going to happen through this process at the Health Department, we need to engage the community even further to help address these issues. The Health Department can’t be the be-all end-all for fetal infant mortality reductions in this community. What we’re going to be doing is raising the profile of these.

They’ve mentioned a couple of examples of what does happen or what could happen. We really need to wait until they get their interviews done and figure out what’s happening in our community. That’s the difference. We can generalize and take all the different scenarios, but we want to get real numbers from those interviews, including things like environment and the other factors that go into play. What they mentioned tonight is great, but we want to see what these families have actually experienced before we come back with recommendations.

**Action:** Commissioner Philbook made a motion, seconded by Commissioner Walker, to approve and forward the matter to the full commission. Roll call was taken and there were five “Ayes,” Philbrook, McKiernan, Maddox, Walker, Markley.

*March 16, 2015*
Item No. 5 – 150061…REQUEST: YMCA FUNDING

Synopsis: Recommend that $65,000 from the 2015 and $10,000 from the 2016 Hollywood Casino grant funding directed to UG Parks & Recreation be allocated to fund the 8th Street Family YMCA operations from April 2015 – April 2016, submitted by Gordon Criswell, Assistant County Administrator.

Mr. Connor said Gordon wasn’t feeling well this afternoon so he headed home.

This is a presentation by the YMCA staff, I’ll let them introduce themselves, about the funding that they have received from the Unified Government in the past, what’s been happening with that funding and the community impact that they’ve had at the 8th Street YMCA. With that I’ll turn it over to the Y staff and you guys can introduce yourself to the commission.

John Mikos, Executive Vice President and Chief Operating Officer, said to your right is Scott Clark. He’s our District Vice President. He oversees operations for all of our Ys in Wyandotte County. JoAnna Rogers to your left is the Membership Engagement Director for the 8th Street YMCA. Tonight who’s not here is David Byrd, our CEO. He’s actually traveling out of town with our board chair. They are being involved with a national YMCA event, including meeting our new national YMCA CEO, Kevin Washington. Simeon, who’s our Executive Director for the 8th Street YMCA also not able to be here this evening. He’s actually traveling as part of the Y-Achievers program, which is part of the 8th Street Y which is a college toward program for teens. You’ll hear a little bit more about that this evening. Again, thank you very much.

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We are very thrilled through the support that we have received from the Unified Government for the last couple of years.

**THANK YOU!**

Because of the support of the Unified Government, the 8th Street Family YMCA is able to remain open and provide the highest level of service to our community.

As a result of the Unified Government’s support of this operation, the Y is able to obtain additional funds through local fundraising and grants to provide needed programs and services to the community.

We have been able to be very intentional about using funds and operating our Y in our main areas of focus, around youth development, healthy living, and then social responsibility. We’ll talk specifically on what is it that we’re doing at the 8th Street Y, but wanted to give you some statistics here to kind of start off with.
Through our YMCA membership, and this is as of the end of 2014, December, 2014, the 8th Street Y is serving 3,589 children, teens, adults and seniors. This represents 631 households. Again, this is as of the end of 2014. As we checked our numbers today, that number is closer to 759. Very proud of the work that’s being done there.

These numbers represent data points that we’re able to capture. There may be some other folks that we’re serving whose names and addresses that we don’t have in our database if we happen to be offering a community event where we’re not capturing that type of information.

81% of these households and memberships are receiving some sort of financial assistance from the Y. This has increased dramatically over the last year or so. We’ve done very well in increasing the number of people that are utilizing the Y and services, but that’s 81% that are receiving some sort of financial assistance.

The median household of those individuals that we’re serving in the 8th Street area represents $18,401, which is significantly below the national median household.

Finally, the representation of these members that are at the 8th Street Y is a very good representation of the community, both African American and Hispanic. Just happen to know that 47% of those members are Hispanic.
We also wanted to give you a little idea of what’s happening at the 8th Street Y. Having heard a little bit about what we presented last year, wanted to really kind of focus some of the attention as to how is it that we’ve been leveraging the resources that we’ve been getting from the UG and what we’ve been able to do to be able to get some grant funding that really allows us to be able to do other things that you may typically think of us for as it relates to the building, itself.

In hearing the discussion just a moment ago regarding the fetal deaths that are in this area, we’re involved in a grant opportunity of around $81,000 which is our REACH program which is Racial and Ethnic Approaches to Community Health. Would love to have some additional conversations with what we just heard about and how the Y might be able to play a more significant role, whether it’s in educating or offering some programs and services at the Y to be able to move forward that effort. Would like to have a little further conversation about that.

We’re also doing the Young Achievers program and you can see what that looks like. JoAnna may spend a little bit more time talking about that. Also, our STEM program, Science, Technology, Engineering and Math; Early Learning Readiness; Salsa Sabor y Salud which is a healthy living program for those around nutrition and understanding diet and those types of programs; and finally, an American Century program where we’re receiving funding to provide a variety of programs at the 8th Street Y.

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If we look at our revenue sources, it’s dominated by membership. There’s no question about it. Nearly $400,000 of our revenue stream does come in the form of membership. The rest of it is through the UG funding that we receive, which represents 15%, followed by another 11% in grants. I think that’s the area, in the grant area, without your support we would not be able to leverage those resources to be able to do those types of programs and services.

We do impact the community tremendously. I’d like to turn it over to JoAnna that can put some faces to some of the numbers that I’ve just discussed with you.
JoAnna Rogers, Membership Engagement Director, 8th Street YMCA, said so what you’re seeing right here is our Back to School Bash that we had last summer. We were able to serve 350 children. Each child went home with a backpack full of school supplies.

We grilled out, had a healthy dinner for them all that night. Even in a torrential downpour we were still standing outside under the tents grilling. Each of those kids also received free haircuts to prepare them for their first day of school. As you can see face painting and a lot of other activities were involved in that event as well.

**COOKING CLASSES IN PARTNERSHIP WITH HARVESTERS**

Through Spanish Cooking and Kids’ Cooking classes youth and adults received healthy eating cooking instruction and weekly groceries.
We also have partnered with Harvesters and the Family Conservancy to be able to offer kids cooking classes as well as adult cooking classes where each week the families that participate in that go home with a bag groceries as well. The name of the class is actually Healthy Lifestyles on a Budget, so teaching them not only to eat healthy and be healthier in their cooking, but how to do it while maintaining a family-friendly budget.

**READY TO LEARN—EARLY LEARNING READINESS**

We are also offering our Ready to Learn-Early Learning Readiness program. This is one of my favorite programs that we offer. It’s free to the community, free to our members as well. A year-round program designed to improve school readiness for children ages 0-5 years old. It is a program that we offer with the children and parents so it’s teaching them not only getting the children prepared for school but also teaching the parents how to help prepare their kids for school. It’s a great educational program all the way around.
Also we’ve partnered with Girl Scouts. That’s some of our girls there. We host three troops, three age groups of troops at the 8th Street YMCA. That program is able to be offered for free, or the cost is free to the girls. With a combination of the subsidized that the Girl Scouts have received as well as us offering the space for them to use it for free, so that eliminates their facility cost that they would normally have to do. As you can see, they always have really good times. Our leaders for that program are bi-lingual so that we’re able to offer the services to everybody.

**NIGHT COURTS**

Night Courts provides a safe, positive environment for teens. In addition to basketball, activities include leadership courses.

Night Courts is a program that we offered free to the community as well. We offered that this summer for teenagers from 12-18 years old. Every Friday night they were able to come together,
work in leadership. They did have to participate in a leadership program before they were able to participate in the basketball program that came after that. In our summer session we served 50 youth. We also were able to offer that program again in the fall where we were able to offer that program to another 45 youths. That was a great outcome with those programs as well.

Along with that, as far as our teenagers, John mentioned earlier we also offer the Young Achievers which is a program to prepare kids for whatever comes after high school, whether that be college or whether that be straight into a career. We are preparing them for getting ready for whatever comes next. Part of that is the college tour where we have 80 youth right now touring various colleges in Nashville. I think they’re all around down South this year, but we change that up every year. We do that twice a year.

Also our STEM program, which stands for Science, Technology, Engineering and Math. That we offer a free kids camp every summer. We did a two week camp last summer. We plan to do the same this summer as well. With that, it’s engaging kids, getting them more interested in science, making it fun.

We also have the robotics team which is pictured there. That was the tournament that they went to. They did medal. They had a great time and that program is actually based out of Central Middle School. It is a Y-funded program that we offer in the local school.
This is some photos from the camp that we had this past summer. Those that they are holding right there, they built their own roller coaster using, I’m sorry that’s a pinball machine. They built a pinball machine, and they were all very proud of that, using marbles and straws and toilet paper rolls and all kinds of crazy things to build that. The kids all had a great time. That was completely free to them and that was free to the community, not just for members. Anybody could do that.

**SALSA, SABOR Y SALUD**

*Salsa, Sabor y Salud* helps Hispanic/Latino families make healthy choices, increase their activity and pursue healthier lifestyles.

Then our Salsa, Sabor & Salud program is offered to Hispanic/Latino families. The class is taught in Spanish. This just is an all-around overall health and well being program. They go over everything from symptoms and what to check for for breast cancer to label reading when

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you’re looking at the cereal box at the grocery store. They go over everything that has to do with health and really helps the families get better. We’ve served over 600 families in the Wyandotte County area in 2014 for that.

Scott Clark, District Vice President, YMCA, said with that is that, again serving the families is one part of it. One very much measurable is over 4,000 pounds was actually lost during that period of time. Again, it’s an eight week program. It’s really educating the entire family. Really, hopefully, helping families understand. Many in our country realize that we’re in an epidemic right now as pre-diabetic, and really helping them to understand and reduce. Weight loss is a big part of that in reducing that blood pressure. So, again, really realizing the importance of that and teaching it in a language that they feel comfortable with, being Spanish, and taught by our team that is a registered dietitian, which is spectacular.

COMMUNITY EVENTS

Ms. Rogers said also what we’re able to offer with your donor support is community events. Everything that’s listed up there is something that we offer to the community. Those photos are from our trunk or treat event where children are able to come have a safe environment where they can still celebrate, dress-up, get in costumes, have a good time, but do it in a healthy and safe environment so that they’re not just going to strangers houses or just pigging out on candy. We offer apples and other things, and toothbrushes, which they definitely didn’t care for the toothbrushes, but we were glad to give them to them. Then lots of good times.

Also with our family nights, we offer family nights once a month. We do movie nights, various health fairs, senior activities. We do senior potlucks as well. Just a variety of

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community events, whatever we can do to really increase the participation and increase the overall health of our community.

Mr. Mikos said these are the faces of those that you may not see every single day and maybe the other ones that you may think that we’re serving, which we do every single day, but these kids and families wouldn’t be getting these types of services without the support from the Unified Government. There is additional information in your packet that provides even financial statements on how the 8th Street Y operated.

We still understand that we, as a non-for-profit charitable organization, must be good stewards of those resources. Our funding request for this year is actually right around $11,000 less from a budget year perspective than what we received from the previous year, and around $17,000 less in capital expenditure related to the 8th Street Y.

I think we have been increasing the utilization of the services for the Y. Again, we can’t thank you enough for this wonderful partnership and opportunity to work with the Unified Government. We’re certainly open for your questions now.

Chairman Markley said Joe, this is probably a question for you rather than them, why are we considering this separate from the budget process? Mr. Connor said I think this was an opportunity to bring their presentation back. It was more of an update because the year is up in

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April from when the funding was authorized. So this is brought back as an informational item from the 12 month period.

Commissioner McKiernan said didn’t we, as a part of our last budget cycle, authorize money for 2015, April 2015? Mr. Connor said I’m filling in on this one so I’m going to plead a little bit of ignorance, but I believe the budget was good until April of this year. Commissioner McKiernan said okay. Mr. Connor said so that’s why we’re bringing it back.

Someone spoke but was inaudible.

Commissioner McKiernan said originally it did. We made a strategic decision then to stabilize it until we could have a long-term solution. The long-term solution is still kind of wrapped up in the plans and the progress of the Healthy Campus. Mr. Connor said it was renewed for that second, but at a lower amount. So this is the end of year two.

Commissioner Walker said isn’t the decision, then, to fund this in a way that gets them on cycle with all the other budget. I mean, I thought that was the commission’s decision rather than trying to fund items outside the budget process. Commissioner McKiernan said I certainly think that would make a tremendous amount of sense because otherwise are we authorized to make budget revisions to 2015? Is this money already encumbered somewhere or are we authorizing a budget revision to 2015? Commissioner Walker said the money appears to be coming from Parks and Recreation according to – Commissioner McKiernan said $10,000 of it. Commissioner Walker said is it just $10,000? Commissioner Philbrook said $65,000 from the 2015 budget and than an additional $10,000 from 2016 that would normally go to Parks and Recreation.

Debbie Jonscher, Assistant Finance Director, said what we currently had in the budget, they had budgeted for 2014. They committed $25,000 of the $100,000 that we’re receiving as the casino contribution from the Parks fund. Currently there’s $25,000 in 2015 that is encumbered through April for the YMCA.

Commissioner Maddox said my question is how much money have we taken from the Parks and Recreation budget over the last couple of years to give to the YMCA? Ms. Jonscher said in year one of the agreement it was $10,000 per month. I believe that agreement went from April
of 2013 through April of 2014. It was $10,000 per month. We also funded a Capital Maintenance Program at $2,500 per month.

When they renewed the agreement in 2014, the amount dropped to $6,250 per month, so we were funding $75,000 from April of 2014 through April of 2015. **Mr. Connor** said Debbie, was the funding source from that the first year of the Hollywood Casino’s $100,000 that went to Parks and Recreation? **Ms. Jonscher** said that’s correct and so is the second year. That’s where the second year also came from. **Mr. Connor** said these weren’t local General Fund monies. These were outside funding sources for that. **Ms. Jonscher** said however, it is budgeted in the Parks General Fund. **Mr. Connor** said it’s part of Parks’ budget, but it’s not local tax money.

**Commissioner Maddox** said thank you for that, but I’m still looking for the ballpark number. I understand $2,500 per month. I understand $1,500 per month or whatever it is, but just a ballpark estimate of how much was supposed to go to Parks and Recreation but went to the YMCA. **Ms. Jonscher** said in the first year it would have been the full $100,000, I believe was utilized in the first year, and $75,000 in the second year. However, I guess it overlapped years because the agreement was done in April. It overlapped years, but for the two years it would have been $175,000. **Mr. Connor** said we can verify that amount, but I believe that’s correct.

**Action:** **Commissioner McKiernan** said I would make a motion that we approve this funding provided that we can make the amendment to the 2015 budget and authorize it for April, 2015 based on the fact as I said earlier that we are effectively still waiting the ultimate resolution of this, which is the inclusion of this into the community center that’s planned as part of the Healthy Campus.

**Commissioner Philbrook** asked what does that mean exactly. **Chairman Markley** said that was sort of our sideline discussion. Joe, it might be a nice time for us to have a presentation on what is going on with that Healthy Campus at a full commission meeting so that we can see these two sort of linked together is what I’m thinking.

**Commissioner Walker** said I would have to tell you that when we started this process a few months after I first became a commissioner, and we agreed to the funding mechanism for the new YMCA, I was under the impression that by this point we would have already broken ground. This issue, oddly, either brings enthusiastic support from the constituents that approach

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me on it, or absolute objection to continuing to fund the YMCA. It doesn’t seem like there’s any middle ground.

Famous last words, I’m on record as saying I wouldn’t vote for it again, and again, I thought somewhere down the road we’re going to at least say we’ve got the new Y on the drawing board, or we have the plans and we’re ready to break ground. I mean, I don’t feel comfortable, I’ve had a conversation with the Mayor. I realize that this is a complex project that requires a lot of pieces to come together, but we cannot fund, I don’t believe we can justify continuing to take money from Parks and Recreation and other scarce resources to fund the Y with no visible due date on when that new Y is even going to start to be built. That, itself, may take, I don’t know how long, a year to build, a year and a half to build. I don’t even know if they have architectural, do you have architectural plans for it yet?

Mr. Mikos said one thing I am able to tell you is I do know both the Mayor and David Byrd, our CEO, have already been meeting on getting ready to go out and start looking at a capital campaign and start raising funds in order to make this happen. I think it’s part of the overall master plan for the Healthy Campus in order to build this structure. I think the next phase of looking and finding and trying to secure those resources is already underway.

Chairman Markley asked Joe, can we forward this to some kind of special session or full commission discussion without having to vote to approve or deny tonight? Can you just take that we think the full commission needs to hear what’s going on and how that links together. Mr. Connor said sure, absolutely. Commissioner Philbrook and can we roll that in with a report about the Healthy Campus? Mr. Connor said yes.

Commissioner Walker said I’m all for that and I think that we need to do that soon because obviously we’ve gotten ourselves into a situation where they are depending, I assume need the funding before the end of April. So that doesn’t give us a lot of time. I would urge you to urge the Mayor, and I’m urging him by my statement here on TV which maybe he’ll watch tonight, to set up a special session on this so we can make a determination if we can actually fund it outside the budget process and what it takes to get it back on a normal budget cycle because I know there was this general feeling by all the commissioners for different issues, that this sporadic funding of different things throughout the year comes due when we do the budget.

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Then either buyer’s remorse or whatever you want to characterize it at that we went ahead and funded that at that time instead of waiting until we saw it in the big framework.

At a minimum I would go along with funding it, and probably will, at least until the budget cycle makes a determination. But I think we should have a special session quickly and make a decision at that time as to what we can do.

Commissioner Maddox said I would like to say also that with the same passion and excitement that we move money for the YMCA, that when it comes to budget session, that we possibly look at moving money into Parks and Recreation where we can upgrade our facilities and do some of the things we need to our parks and all those kinds of things. If we’re speaking about constantly taking money away from Parks and Recreation facilities or something of the sort, but at the same time every budget session we continue to dwindle the money we give to the Parks and Recreation department. That, to me, doesn’t see-saw out evenly to me.

I love having more opportunities for young people and people to be healthy in this community, but I’d like to see it on both ends. As a Unified Government Commissioner, I’m responsible to the voters who use Parks and Recreation, freely, to enhance their health and things like that.

Commissioner Philbrook said I remember a lot of the conversation, but some of it was kind of fuzzy by the time we got through talking about how this was going to go, the Healthy Campus. I see the Y is definitely presented as an integral part of a healthy community. That I don’t have any problem with. I would like to see it part of it.

I guess my concern runs right along with Commissioner Maddox and some of the others. Be careful, now, Tarence, don’t faint. We do have, as we’ve talked before, the opportunity for folks who cannot afford to have those memberships that that is worked into the budget, the new budget, of what the Y would be about. I know you guys have talked at length about that, I am sure. I know that was probably part of the uh-oh, how are we going to do this. Mr. Mikos said as part of a committee, I know we’re meeting with in tandem with other folks in the community to ensure that we are able to make it – Commissioner Philbrook said provide that so it is really part of a healthy campus that our community can take use of. That’s all I wanted to say about.
that. Continue the hard work and looking forwarding to hearing integral commentary from all involved.

Chairman Markley asked Mr. Connor, is that clear enough direction. Mr. Connor said I get it.

**Action:** No action taken.

**Item No. 6 – 150059…PROPOSED CHANGES: HUMAN RESOURCES GUIDE**

**Synopsis:** Request proposed changes to the Human Resources Guide, submitted by Henry Couchman, Senior Attorney.

1.2 Definitions
2.1 Equal Opportunity in Employment
2.2 Harassment in the Workplace
5.6 Family and Medical Leave
7.1 Rules and Discipline
7.2 Grievance Procedure
7.5 Social Media

Henry Couchman, Senior Attorney, said you have before you proposed changes to seven Human Resources policies. The changes consist of kind of two groups of changes.

One change would include sexual orientation and gender identity among the different types of behavior that the Unified Government would be prohibited from engaging in with regard to applicants for employment or employees. Similarly, the Harassment in the Workplace policy would be amended to include gender identity and sexual orientation and prohibit harassment on the basis of either of those.

The Grievance Procedure and the Rules and Discipline Policy would likewise be amended in accord with the amendments to the EEO and Harrassment in the Workplace Policies.

Finally, the Social Media Policy would be amended to prohibit our employees from discriminating in their social media communications on the basis of sexual orientation and gender identity.

The other two changes are to the Definitions Policy and the Family and Medical Leave Act Policy. The Definitions Policy, there would be a new definition of spouse to make it clear that spouse includes same-sex spouses. That definition and the wording of that definition is taken

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from IRS and Department of Labor regulations. It basically defines a spouse or marriage according to the place of celebration. So if a marriage is entered into, and it’s legal where it was entered into, including a same-sex marriage, then we would recognize those partners as spouses for the purposes of our policies.

The FMLA definition comes directly out of the recent regulation adopted by the Department of Labor. It’s very similar to the definition of spouse in the Definition section, but it’s somewhat different. I went ahead and went with the IRS regulation for spouse in the Definition section because I think it’s a little easier to understand and apply, but we used the FMLA definition for the FLMA policy.

I’ll be happy to answer any questions that you have on any of these changes.

**Action:** Commissioner Walker made a motion, seconded by Commissioner Philbrook, to approve and forward the matter to the full commission. Roll call was taken and there were five “Ayes,” Philbrook, McKiernan, Maddox, Walker, Markley.

**Chairman Markley** adjourned the meeting at 6:24 p.m.