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**United Way of Metropolitan Dallas  
Final Report to the Blue Ribbon Commission**

March 5, 2010



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## **STRATEGIC PLANNING OVERVIEW**

United Way of Metropolitan Dallas (UWMD) is implementing a new, transformational Strategic Plan. Under the leadership of Strategic Planning Chair Deb Gibbins and guided with the help of other high-level volunteers and the assistance of Deloitte Consulting, the Strategic Plan reflects input from a wide range of UWMD stakeholders, insights gained from an external analysis of key trends in the nonprofit sector, and an internal assessment of UWMD organizational capabilities.

One of the key deliverables of the Strategic Plan is the creation of UWMD's Community Impact agenda for the coming decade: Goals for 2020. This agenda will focus community investment, public policy, advocacy and volunteer efforts on the impact areas of Education, Income and Health. The input and expertise of outstanding community content and thought leaders is being leveraged to define strategic goals around these three building blocks of a good life.

A driving force for UWMD's Strategic Plan is the determination to have a more enduring, systemic impact on the problems facing its 4-county service area: Dallas County, Collin County, Southern Denton County and Rockwall County. Based on the defined community goals chosen for Education, Income and Health, UWMD will seek to actively partner and collaborate with individuals and organizations across all sectors to catalyze and accelerate sustainable community changes that:

- Significantly improve education outcomes in our region.
- Reduce the number of working families who lack financial stability.
- Increase the percentage of healthy young people and adults.

## **THE BUILDING BLOCKS OF LIFE: EDUCATION, INCOME AND HEALTH**

UWMD's vision is of a strong and thriving community – one which provides opportunities for people to realize their potential by having the basic building blocks of a good life: a quality education that leads to a stable job, enough income to support a family through retirement and good health. And yet these basic ingredients are increasingly beyond reach for more and more hard-working families. This is why UWMD's community impact agenda is based on these three, inter-related areas of focus.

Education is essential to getting and keeping a job with a livable wage and health benefits. An income adequate to pay for today's necessities and save for the future provides some sense of financial stability. Access to quality health care and a commitment to healthy behaviors keep children on track in school and adults productive at work. Remove any one of these building blocks and the stability of the other two are jeopardized.

To effect long-term change in these focused areas, UWMD will utilize a four-pronged approach:

1. Identify and select social issues and their underlying root causes within Education, Income and Health that have the most addressable needs.
2. Encourage collaborative partnerships to significantly address the identified underlying root causes.
3. Create game-changing impact by finding working solutions that are sustainable, scalable and measurable.
4. Advocate for public policy changes or enhancements.

## **EDUCATION, INCOME AND HEALTH COLLABORATIVE TEAMS**

As input to the work of the Blue Ribbon Panel, and to provide an independent and transparent approach to defining its community impact agenda, UWMD solicited the guidance of community content experts in the three areas of Education, Income and Health. Under the leadership of Jennifer Sampson, Executive Vice President and Chief Operating Officer and Susan Hoff, Senior Vice President of Community Impact these experts were assembled into separate Collaborative Teams comprised of diverse agency and non-agency representatives. Recommendations for team members were solicited from UWMD board members, volunteers, community partners and staff. Each team has been meeting since June to provide analyses and recommendations for Blue Ribbon Panel review. Please see pages 13, 22 and 29 for a listing of the volunteers who served on each Collaborative Team and the makeup of organizations represented.

## **PROCESS REVIEW**

UWMD hired Helen Holman & Associates to provide consultation and facilitation services to the Collaborative Teams. The teams were supported by the UWMD Community Investment staff. Each team has met seven times, in three-hour meetings, from June to mid-September. Attachment 4 depicts the process roadmap the teams followed to accomplish their work, which included:

- identifying and prioritizing key needs and issues within each team's impact area
- reviewing and analyzing pertinent data across UWMD's 4-county service area: Dallas County; Collin County; Southern Denton County; and Rockwall County
- drafting one, ten-year community-wide goal for each team's impact area
- identifying systemic root causes related to each team's goal
- determining and prioritizing key strategies for reaching the team goal
- identifying metrics, baselines and long-term targets for each strategy

### **CRITERIA FOR GOALS, STRATEGIES AND METRICS**

The Collaborative Teams were charged with developing bold, broad, defined goals which will require multi-sector community collaboration to reach the goals across the UWMD 4-county service area. They were further charged with developing S.M.A.R.T. strategies --- strategies that are **S**pecific, **M**easurable, **A**chievable, **R**ealistic, with a ten-year **T**imeframe. Metrics were to be based on existing data already being collected by a reliable source, as UWMD doesn't want to incur additional expense or allocate community investment dollars to hire independent program evaluators. Progress will be evaluated at least annually; and UWMD will be nimble enough to "course correct" or re-balance metrics if new or changing community dynamics warrant the need to do so.

**EDUCATION IMPACT AREA**

***Education Data Overview***

The charts below depict 40-year population trend projections for the UWMD region.

<b>Year</b>	<b>Total</b>	<b>Anglo</b>	<b>Black</b>	<b>Hispanic</b>	<b>Other</b>
<b>2000</b>	3,186,630	1,746,776	506,333	770,629	162,892
<b>2005</b>	3,532,972	1,827,443	547,588	959,995	197,946
<b>2010</b>	3,894,777	1,898,053	589,815	1,171,833	235,076
<b>2015</b>	4,273,481	1,960,193	630,331	1,409,492	273,465
<b>2020</b>	4,675,592	2,016,268	666,419	1,678,346	314,559
<b>2025</b>	5,117,418	2,069,513	699,492	1,988,088	360,325
<b>2030</b>	5,593,451	2,115,992	727,537	2,339,147	410,775
<b>2035</b>	6,096,868	2,153,880	751,519	2,726,288	465,181
<b>2040</b>	6,621,320	2,182,523	770,929	3,147,054	520,814

<b>Year</b>	<b>Anglo</b>	<b>Black</b>	<b>Hispanic</b>	<b>Other</b>
<b>2000</b>	54.82%	15.89%	24.18%	5.11%
<b>2005</b>	51.73%	15.50%	27.17%	5.60%
<b>2010</b>	48.73%	15.14%	30.09%	6.04%
<b>2015</b>	45.87%	14.75%	32.98%	6.40%
<b>2020</b>	43.12%	14.25%	35.90%	6.73%
<b>2025</b>	40.44%	13.67%	38.85%	7.04%
<b>2030</b>	37.83%	13.01%	41.82%	7.34%
<b>2035</b>	35.33%	12.33%	44.72%	7.63%
<b>2040</b>	32.96%	11.64%	47.53%	7.87%

Source: Population Estimates and Projections Program, Texas State Data Center, Office of the State Demographer, Institute for Demographic and Socioeconomic Research, The University of Texas at San Antonio, October 2006

#### Regional Population Trends/Achievement Gap

- According to US Census data, current population in the UWMD region is 3,730,857. According to the State Demographer, by 2020 the population is projected to be 4,675,592 (a 25% increase)
- Increasing young Hispanic population. (UWMD Needs Assessment, State Demographer, Brookings Institute, Williams Institute)
- Increasing levels of children living in poverty, especially in last year. (UWMD Needs Assessment)
- Disparity in educational attainment. Large achievement gap between low income and minority students and higher SES Caucasian students (UWMD Needs Assessment, TEA, Williams Institute)

#### Early Learning/School Preparation

- Data from Dallas ISD indicates that approximately 40% of pre-k (entry level) students are below “grade” level, as measured by the Texas Primary Reading Index/Tejas LEE.
- Less than 10% of child care/early learning programs across the UWMD region meet national accreditation standards.
- Longitudinal research (Perry Preschool, Abecedarian, Chicago Parent Child Centers) show a strong link between high quality early learning programs, parent education and ongoing student success.

#### Out of School Time

- Multiple studies, including an analysis conducted by Policy Studies Associates (2007), indicate that elementary and middle school students benefit both academically and socially from regular participation in high quality, organized out of school programs.
- The Dallas Afterschool Network research regarding the capacity of afterschool and summer programs across Dallas County indicates that current programs have space for only 36% of students who need out of school care. (DASN, 2008)

Academic, College and Career Preparation

- TEA data shows that only 40% of graduating seniors across the UWMD region are college-ready.
- District and state data indicate that success and on-time progression at the 8th and 9th grade levels are critical to high school graduation. (TEA)
- Strong evidence that education or certification beyond high school graduation is necessary for individuals to earn a living wage.
- Data shows that low income and minority students are generally not well prepared for college success, many must take remedial reading, writing, and math courses before they can begin college level courses and the majority drop out before attaining a 2 or 4 year degree. (TEA)
- UWMD regional school district officials (Dallas ISD and Plano ISD) contend that simply passing the TAKS test does not indicate adequate student preparation for ongoing public school success or for college and career success. They strongly recommend that districts focus preparing students to meet Commended Level in all subject areas.

**% scored Commended level on TAKS – 2009**

<b>School District</b>	<b>3rd Grade Math</b>	<b>3rd Grade Reading</b>	<b>5th Grade Math</b>	<b>8th Grade Math</b>
Dallas	29	34	38	18
Garland	47	55	48	21
Plano	57	65	63	46
Mesquite	35	39	42	21
Richardson	51	51	62	36
Lewisville	51	65	56	45
Irving	31	36	37	19
McKinney	56	65	57	38
Allen	58	69	64	46

***Education Goals and Strategies***

Approved by the Strategic Planning Committee  
 December 17, 2009

<b>2020 Goal</b>	To increase the post secondary education success rate.
<b>Metric</b>	% College Ready Graduates – Scoring 2400 or Above on TAKS, Region 10 ESC
<b>Baseline</b>	40% of graduating 12 <sup>th</sup> graders (N = 40,094 graduating 12 graders)
<b>Source</b>	TEA, Class of 2007-2008
<b>Target</b>	60% of graduating 12 <sup>th</sup> graders by 2020
<b>Strategies</b>	<ol style="list-style-type: none"> <li>1. Students have support and encouragement for educational success from parents/ advocates, and mentors.</li> <li>2. Ensure that pre-school children across the UWMD region have access to high quality, early learning programs.</li> <li>3. Students have access to developmentally appropriate English Language Learning programs.</li> <li>4. Students have access to high quality, enriching out of school programs which are aligned with school day curriculum</li> <li>5. Students have access to age-appropriate math and science education.</li> <li>6. Students access age appropriate college and career preparation.</li> </ol>

**Proposed Education Metrics and Targets**

These will be finalized after analysis of new data sources

Strategy	Metric	Baseline	2020 Target
<b>Students have support and encouragement for educational success from parents/ advocates, and mentors.</b>	Parent engagement and mentoring programs aligned with goal and strategies	New measure	20,000 complete UWMD-supported programs aligned with goal and strategies
<b>Ensure that pre-school children across the UWMD region have access to high quality, early learning programs.</b>	# of children accredited programs.	6% of licensed programs (N= approx. 1300 licensed programs x .06 x 75 children) = 5,850 Source: NAEYC, 2009	20,280 children (20% increase in accredited programs)
	% of students scoring "commended level" on 3 <sup>rd</sup> grade Reading TAKS	See table on page 8	Minimum of 60% of students in largest 9 districts score "commended level" on 3 <sup>rd</sup> grade Reading TAKS
<b>Students have access to developmentally appropriate English Language Learning programs.</b>	% of students LEP	18% of Region 10 students LEP (N = 131,634)	Length of time students remain in LEP

Strategy	Metric	Baseline	2020 Target
<b>Students have access to high quality, enriching out of school programs which are aligned with school day curriculum</b>	# of out of school programs aligned with school day curriculum	New Measure	Programs align with school day curriculum
	% of students served	Programs available for 36% of Dallas County children who need out of school care (N= 145,828) Source: Dallas After School Network, 2008	Programs available for 50% of children who need out of school care
<b>Students have access to age-appropriate math and science education.</b>	% of students in 9 largest districts scoring “commended level” on Math TAKS	See table on page 8	60% of students in 9 largest districts scoring “commended level” on Math TAKS 3 <sup>rd</sup> , 5 <sup>th</sup> , and 8 <sup>th</sup> grades
<b>Students access age appropriate college and career preparation.</b>	% of “college ready” (as defined by TEA) graduates, Region 10.	40% of graduating 12 graders across region	60% of graduating 12 graders.

### ***Education Summary Notes***

- The team's original goal was "to increase college and career success." It was later revised for two reasons: (1) no available, effective measure for "career-success" could be found; and (2) to better reflect that the ultimate goal is not limited to graduating high school and getting to college; rather, it should be completing at least two years of college or, for those who can't go to college, completing a certification program.
- The strategies purposefully reflect the entire educational continuum from early childhood through post-secondary education.
- The definitions of "access" and "quality" encompass affordability, accessibility (location, transportation), capacity, and knowledge of resources.
- The first strategy was originally stated as "Parenting Education".

### ***Education Value Statements***

The following items are important values, principles or considerations that the Education Collaborative Team would like to share with the Blue Ribbon Panel:

- The proposed strategies reflect the entire educational continuum because the team feels strongly that there is no one "tipping point" on said continuum.
- It will be critical to address the needs of the growing Hispanic population, as trends show the biggest increase in this demographic; this group will enter the system with lower income and education levels; many will be undocumented and speak little or no English.
- Parent education, involvement, interaction, engagement and support throughout the educational continuum are critical. Parents must feel safe, comfortable and welcomed. It will be important to offer culturally sensitive, inviting programs which help parents learn how to navigate and trust the educational system. It will also be important to "build up" the family unit with adult education.
- To achieve these goals and strategies, UWMD will need to leverage community collaboration.
- Community awareness, ownership, advocacy, and investment are critically important; education must be a community priority. The community needs to understand what it really means/takes to be a successful student.
- The family unit should be seen as an education and advocacy hub.
- The vertical alignment of education programs and activities in schools - from elementary to middle to high school - is important.
- Some school districts are viewing the TAKS "Commended Level" versus "Recognized" or "Exemplary" status as the goal. It is important to note that under

current definitions and standards, it is possible for a school or district to achieve a state accountability rating of “Exemplary” but to have 0% of its graduating seniors scoring at the “College Ready” level on the TAKS test.

- TEA/District/School standards and assessments are continually changing. UWMD will need to keep this in mind as it reviews progress toward the stated targets.
- Education programs funded by UWMD should be as inclusive as possible.

### ***Education Public Policy Priorities***

The Education Collaborative Team recommends the following public policy priorities for UWMD:

- Children need to be the community’s priority and reflected as such in local and state budgets.
- We need a standard definition for both “school ready” and “college ready.” What is really needed to be a successful student and to get to college?
- Through effective immigration reform we need to find ways to effectively capture the valuable human resources illegal immigrants bring to our country.
- Rather than recognizing schools by today’s “Exemplary” standard they should be recognized for the % of “College-Ready” graduates.

**Blue Ribbon Commission and Collaborative Team Members: Education**

Blue Ribbon Commission		Collaborative Team	
<b>Al Black</b> On-Target Supplies & Logistics	<b>Dr. Marcus Martin</b> Education Is Freedom	<b>Judith Allen</b> Communities in Schools	<b>Keisha Page</b> Foundation for Community Empowerment
<b>Brent Christopher</b> Communities Foundation of Texas	<b>Gerald McElvy</b> ExxonMobil Foundation	<b>Cathey Brown</b> Rainbow Days	<b>Rosemary Perlmeter</b> Uplift Education Charter Schools
<b>Dr. David Daniel</b> UT Dallas	<b>Dr. Dawson Orr</b> Highland Park ISD	<b>Mary Brumbach</b> DCCCD	<b>Ann Pomykal</b> Texas Instruments
<b>Carolyn Bacon Dickson</b> O'Donnell Foundation	<b>Dr. Geoffrey Orsak</b> Southern Methodist University	<b>Terry Flowers</b> St. Philip's School and Community Center	<b>Gwendolyn Sneed</b> Good Street Baptist Child Development
<b>Dr. Linda Henrie</b> Mesquite ISD	<b>Dr. Doug Otto</b> Plano ISD	<b>Cathy Galloway</b> Plano ISD	<b>Martha Stowe</b> Vickery Meadow Youth Development Foundation
<b>Dr. Michael Hinojosa</b> Dallas ISD	<b>Laura Sanford</b> AT&T Foundation	<b>David Miller</b> Oak Hill School and Texas Association for Infant Mental Health	<b>Melody Timinsky</b> Big Thought and Plano ISD School Board
<b>Dr. Wright Lassiter</b> DCCCD	<b>Robert Seward</b> Texas Association of School Boards	<b>Ann Minnis</b> Head Start of Greater Dallas and Workforce Solutions Greater Dallas	<b>Florencia Velasco Fortner</b> The Concilio
<b>Tom Luce</b> National Math & Science Initiative	<b>Wanda Smith</b> Head Start of Greater Dallas	<b>Rachel Moon</b> Dallas ISD	<b>Liliana Valadez</b> Dallas ISD

**INCOME IMPACT AREA**

***Income Data Overview***

The chart below depicts the number of individuals living below the poverty level across the UWMD region.

<b>County</b>	<b>Total Population</b>	<b># of Individuals Below Poverty</b>	<b>% Below Poverty</b>
Collin	725,147	47,135	6.5%
Dallas	2,334,176	396,809	17.0%
Denton	598,961	43,125	7.2%
Rockwall	72,573	3,266	4.5%
<b>Total</b>	<b>3,730,857</b>	<b>490,335</b>	<b>13.1%</b>

Source: US Census, 2007.

**Regional Population Trends**

- Current population in the UWMD region, according to the US Census is 3,730,857. According to the State Demographer, by 2020 the population is projected to be 4,675,592 (a 25% increase).
- Increasing young Hispanic population. (UWMD Needs Assessment, Williams Institute, State Demographer, Brookings Institute)
- The Hispanic population generally has lower education and income levels.
- According to the 2007 US Census, single female headed households with children under the age of 18 comprise 9% of the total households across the region.
- The homeless population has remained fairly stable for the last 4 years (approximately 5,800 in Dallas and Collin Counties); however, the number appears to be increasing in 2009.

#### Income /Employment

- Because the “living wage” is not a national standard, there is variation as to what constitutes this number, depending on the data source. Therefore, it is difficult to determine what percentage of the population across the region is earning a “living wage”.
- Currently approximately 13% of individuals across the UWMD region live at or below the poverty level.
- Current unemployment rate for the region is approximately 7-9% (depending on county).
- There is a shortage of higher paying “blue collar”/technical jobs across the UWMD region.

#### Asset Building

- A small percentage of the number of individuals who are eligible for the earned income tax credit across the region actually filed for the credit in 2008. Low income workers can receive an average of \$2,500 in EITC each year.
- It is assumed that a high percentage of lower income families are “unbanked”, but there is no reliable data source to verify the exact percentage.
- It is assumed that lower income individuals have a low or nonexistent credit score, but there is no reliable data source to verify this. The overall credit score for the region is 670.
- Our region is way behind most of the nation in terms of savings programs.

***Income Goal and Strategies***

Approved by the Strategic Planning Committee  
December 17, 2009

<b>2020 Goal</b>	To move 250,000 more individuals out of poverty and keep them out.
<b>Metric</b>	Population across the UWMD region living at or below the poverty level.
<b>Baseline</b>	13% (N=490,333)
<b>Source</b>	2007 Census (2008 data will be released 9/22/09)
<b>Strategies</b>	<ol style="list-style-type: none"><li>1. Collaborate and leverage our relationships with employers, public sector organizations, and the broader business community to help provide low-income individuals access to jobs.</li><li>2. Ensure that individuals have the skills to be hired.</li><li>3. Ensure that low-to-moderate income individuals participate in financial education programs to achieve increased assets and decreased liabilities.</li></ol>

***Proposed Income Metrics and Targets***

These will be finalized after analysis of new data sources

Strategy	Metrics	Baseline	2020 Target
<b>Collaborate and leverage our relationships with employers, public sector organizations, and the broader business community to help provide low-income individuals access to jobs.</b>	# of non- profit collaborations that lead to job creation	New measure: % of UWMD funding to collaborations whose efforts lead to job creation and employee development	To be determined through funds allocation process
	# small businesses	96,212 Source: BLS, Dallas, Collin, Denton Counties	120,265
	“blue collar”/ technical jobs employment share earning wages comparable to national average	Healthcare Practitioners – 4.1% Region/5.1% US Healthcare Support – 1.8% Region/2.6% US Food Prep/Service – 7.9% Region/8.3% US Building Grounds/Maintenance – 2.7% Region/3.3% US Production 7.5% Region/7.7% US Source: US Bureau of Labor Statistics 2006	Meet or exceed national average by 2020

Strategy	Metrics	Baseline	2020 Target
<p><b>Ensure that individuals have the skills to be hired.</b></p>	<p># of individuals completing work training programs and maintaining employment for X period of time*</p>	<p>15,279:</p> <ul style="list-style-type: none"> <li>• 12,882 in UWMD funded programs 08</li> <li>• 696 youth in TWC funded programs 08-09</li> <li>• 1701 adults in TWC funded programs 08-09</li> </ul> <p>Sources: UWMD; WorkSource Solutions Greater Dallas</p> <p>*new measure</p>	<p>300,000 (cumulative)</p>
<p><b>Ensure that low-to-moderate income individuals participate in financial education programs to achieve increased assets and decreased liabilities.</b></p>	<p># of EITC-eligible individuals served through VITA sites</p>	<p>5880 served Source: IRS</p>	<p>400,000 served (cumulative)</p>
<p></p>	<p># of people served through IDAs and other organized savings programs</p>	<p>Less than 48 people (one program)</p>	<p>5,000 (cumulative)</p>
<p></p>	<p># of individuals completing financial education programs</p>	<p>3436 completed UWMD-funded programs Source:UWMD</p>	<p>200,000 (cumulative)</p>

### ***Income Summary Notes***

- The group feels it is very important to address both the poverty level and the living wage level within the goal. Both need to be part of the on-going local and national dialogue, especially given the gap between the two.
- There is not one consistent definition, metric or indicator for “living wage.” For purposes of this work, the group has elected to use the top end of EITC eligibility as the metric.
- Given current downward trending, the group feels that “maintaining” the current level of individuals earning a living wage is a positive goal; in fact, reversing the trend may be a stretch goal.
- Although there is no clear, reliable metric for “decreased liabilities,” the group feels strongly that it needs to be kept within the strategies in order to start an important dialogue.

### ***Income Value Statements***

The following items are important values, principles or considerations that the Income Collaborative Team would like to share with the Blue Ribbon Panel:

- It will be important to address the needs of the growing Hispanic population, as population trends show the biggest increase in this demographic; this group will enter the system with lower income and education levels; many will be undocumented and speak little or no English.
- We need to address the issues and challenges faced by “single female heads of households.” It will be important to move this segment of the population out of poverty.
- To move the needle we must utilize both advocacy and multi-sector community collaboration (neighborhoods; intra-agency; public-private partnerships; Better Business Bureau; etc.).
- To move the needle we must also focus on personal empowerment – i.e., transitioning individuals from services to self-sufficiency and personal accountability.
- Job re-entry training for ex-offenders is needed.
- The lack of blue collar jobs is a critical issue.
- There is a supply and demand imbalance.
- The middle class is disappearing.
- Immigration reform is necessary.
- Current economic trends will need to be continually evaluated.
- Income-related issues and job creation need more attention from city leaders (ex: business incentives for job creation).
- Despite the current economy, the future is expanding. We should generate hope and sell inspiration, not desperation.
- Let’s move away from a “blaming the victim” mentality.
- The community needs to be better educated on the economic issues facing individuals and families.

### ***Income Public Policy Priorities***

The Income Collaborative Team recommends the following public policy priorities for UWMD:

- City incentive programs for blue collar job creation
- Healthcare reform
- Personal empowerment; moving people from temporary assistance to personal accountability
- Immigration Reform
- Education Reform
- Redefining poverty and improving the living wage standard; closing the gap between poverty and living wage levels
- Raising the minimum wage
- Closing the gap between the poor and wealthy
- Predatory lending
- Streamlined EITC filing requirements
- Infrastructure needs such as transportation and child care assistance
- Supply and demand imbalance

***Blue Ribbon Commission and Collaborative Team Members: Income***

<b>Blue Ribbon Commission</b>		<b>Collaborative Team</b>	
<b>Phil Dyer</b> City of Plano	<b>Elise Longpre</b> Dallas Morning News	<b>Richard Bernstein</b> Community Volunteer	<b>Steve Lafredo</b> Citi
<b>Kent Eastman</b> Capital One Bank	<b>Kevin March</b> Texas Instruments	<b>Rose Broussard</b> Community Volunteer	<b>Scotty Landry</b> Salvation Army Metro Command
<b>Linda Evans</b> The Meadows Foundation	<b>Anne Motsenbocker</b> JPMorgan Chase	<b>Brian Burton</b> Wilkinson Center	<b>Robert Marx</b> Department of Assistive and Rehabilitative Services
<b>Richard Holt</b> Bank of America	<b>Amb. James Oberwetter</b> Dallas Regional Chamber	<b>Margareth Fanini</b> Comerica Bank	<b>Edna Pemberton</b> Friends of Redbird Airport
<b>Mary Jalonick</b> The Dallas Foundation	<b>Don Williams</b> Foundation for Community Empowerment	<b>Rod Ginther</b> Goodwill	<b>Lynn Sipiora</b> Samaritan Inn
<b>Laurie Larrea</b> Workforce Solutions Greater Dallas	<b>Scott Wilson</b> KPMG	<b>Valerie Hodges</b> North Texas Future Fund	<b>Jennifer Ware</b> YWCA
		<b>Larry James</b> Central Dallas Ministries	

## **HEALTH IMPACT AREA**

### ***Health Data Overview***

#### Population Trends

- According to US Census data, current population in the UWMD region is 3,730,857. According to the State Demographer, by 2020 the population is projected to be 4,675,592 (a 25% increase)
- Increasing young Hispanic population. (UWMD Needs Assessment, State Demographer, Brookings Institute, Williams Institute)
- Increasing levels of children living in poverty, especially in last year. (UWMD Needs Assessment)

#### National Health Care Debate

- The current health care debate and pending health care reform may significantly change the conversation in the coming months.

#### Access to Care

- Data indicates that almost 25% of individuals across the region have no regular health care provider, and many depend on the emergency room for primary care.
- Only 37% of emergency care visits across the region are for true emergencies; 33% are for non-emergency (primary care) reasons.
- Low income individuals are much more likely to depend on the emergency room for primary care and often do not have access to routine health screenings.
- Access to mental health services and treatment for alcohol and drug addiction are not adequate for the population, particularly for low income individuals.

#### Vulnerable Populations

- There are segments of the population, including low income seniors, the disabled, and victims of child abuse and domestic violence that are particularly at risk for not receiving adequate health care and related services.

#### Healthy Behaviors

- A significant portion of chronic illnesses and premature death are related to preventable behaviors.
- The obesity rate in both children and adults is increasing at alarming rates.
- According to the CDC the greatest risk factors for premature death in Dallas are:
  - Few fruits/vegetables – 76.2%
  - High blood pressure – 25.1%
  - Smoking – 20%
  - No exercise – 27.8%
  - Obesity – 22.5%
  - Diabetes – 6.6%

### ***Health Goal and Strategies***

Approved by the Strategic Planning Committee  
December 17, 2009

<b>2020 Goal</b>	To improve health and quality of life across the UWMD region.
<b>Strategies and Metrics</b>	<ol style="list-style-type: none"><li>1. Expand Access to Care<ul style="list-style-type: none"><li>• % of population without a “medical home”</li><li>• CHIP Enrollment</li></ul></li><li>2. Promote Healthy Lifestyles through Health Information, Education, and Programming<ul style="list-style-type: none"><li>• Overweight and Obesity Rate</li><li>• Illicit Drug use and Alcohol Abuse</li><li>• Incidents of Family Violence (child, partner, and elder abuse)</li></ul></li><li>3. Focus on Prevention and Early Intervention through Screening and Monitoring<ul style="list-style-type: none"><li>• % of Well-Child visits in 1st years of life</li><li>• Prenatal Care</li></ul></li></ol>

***Proposed Health Metrics and Targets***

These will be finalized after analysis of new data sources

<b>Strategy</b>	<b>Metric</b>	<b>Baseline, UWMD Region</b>	<b>2020 Target</b>
<b>Expand access to care</b>	% of the population without a medical home (no usual source of care)	22.9% reported "no usual source of care" CDC, BRFSS, 2007-2008 (Dallas, Collin and Rockwall counties)C	Align with Healthy People 2020 goal (TBD)
	CHIP Enrollment	66,043 or (15.5%) percent of the children 18 and under and below 200% Source: CHIP monthly enrollment report, Texas Health and Human Services Commission, Data as of Oct, 2009 and American Community Survey, U.S. Census Bureau, 2008 ratio of poverty by age	Enroll 100% of those who qualify

Strategy	Metric	Baseline, UWMD Region	2020 Target
<b>Promote healthy lifestyles through health information, education and programming</b>	Overweight and obesity Rate	<b>Youth:</b> 19.3% of Dallas ISD Students grades 9 through 12, who were >95% of weight (2007 YRBSS, CDC, students grades 9-12). <b>Adult:</b> 27.3% Respondents 18 years and older who had a BMI > 30 or greater (Source: CDC, BRFSS survey 2008)	Reduce by 20%
	Past month illicit drug use and alcohol use	7.0% of Region 3a persons 12 years and older. 2004-2006 (Source: SAMHSA, Substate Estimates from the 2004-2006 National Surveys on Drug Use and Health)	Align with Goals for 2020
	Incidents of family violence	718.76 incidents per 100,000 (includes spouse, child, and elder abuse) Source: UWMD Needs Assessment 2008	Reduce by 20%
<b>Focus on prevention and early intervention through screening and monitoring</b>	% of well-child visits in the 3rd, 4th, 5th and 6th years of life	64.4% of CHIP enrollees (2007)(source Annual Quality of care Report Texas CHIP Quality of Care Measures, 2009)	100% of CHIP enrollees
	Prenatal care	56.1% prenatal care in the 1st trimester Dallas, Collin & Rockwall Source: TDSHS query system	100% begin prenatal care in the 1st trimester

### ***Health Summary Notes***

- Unlike the other two impact areas, there is no specific metric for the goal, itself (only for the strategies). The group felt that a goal that could be measured would be much too narrow in scope.
- The Health Team encountered several unique challenges and questions, the first being the intrinsically broad definition of health. In the context of setting goals and strategies, should health and health care be viewed according to the traditional medical model (sick care) or according to the public health model (community health; social determinants of health; quality of life). Secondly, the continuum of care encompasses a wide range of health strategies, including preventive care, primary care, tertiary care, intervention, chronic care, disease management, and so on. Is there any one tipping point along this continuum? Thirdly, “health” impacts an individual’s entire lifespan, beginning with pre-natal care through end of life care. Finally, the current health care debate and pending health care reform may significantly change the conversation in the coming months.
- The team’s original goal and strategies focused on leading health indicators (LHI) as defined by the national Healthy People 2010 agenda and applied locally. Of the 10 national LHIs, the group narrowed its focus to: overweight and obesity; substance abuse/use; mental health; violence and injury; and access. They also added disabilities and chronic conditions. While a sound approach, the resulting strategies were far too numerous; therefore, the group changed the focus to the three recurring priority themes of access, behavior and prevention.
- Childhood obesity rates may not currently be available at the county level but the issue is an important area of focus.
- The definition of “a medical home” for purposes of this document and discussion is “a usual source of care.”
- DFW Hospital Council is currently working on a set of regional leading health indicators. Healthy People 2020 national leading health indicators are also being developed. It will be important for UWMD to track both initiatives and confirm alignment.
- In ranking healthy behaviors, the group used the following criteria: ability to move the needle; # people touched; greatest need/gap.

### ***Health Value Statements***

The following items are important values, principles or considerations that the Health Collaborative Team would like to share with the Blue Ribbon Panel:

- While the entire continuum of care is important, prevention is a key tipping point.
- Community collaboration is essential for achieving the goals and strategies.
- Community empowerment is essential for achieving the goals and strategies.
- Community education and awareness are essential for achieving the goals and strategies.
- Individuals and families should have access to a comprehensive array of core health services.
- Given current and projected population demographics, there must be an even stronger focus on culturally and linguistically sensitive care.
- Caring for people with disabilities and chronic conditions is crucial and needs to remain in the conversation. (Note: Disabilities as defined by ADA)

### ***Health Public Policy Priorities***

The Health Collaborative Team recommends the following public policy priorities for UWMD:

- Access, healthy behaviors and prevention
- The uninsured
- Medicaid/Medicare reimbursement rates
- Statewide smoking ordinance
- Increasing funding for child abuse services at the State level
- Increasing funding for mental health services at the State level
- Regional Health Services

**Blue Ribbon Commission and Collaborative Team Members: Health**

<b>Blue Ribbon Commission</b>		<b>Collaborative Team</b>	
<b>Joel Allison</b> Baylor Health Care System	<b>Ralph Holmes</b> Aetna	<b>Barbara Cambridge</b> UT Southwestern	<b>Margo Nielson</b> Rockwall County Helping Hands
<b>Rafael Anchia</b> Haynes and Boone	<b>Margaret Jordan</b> Dallas Medical Resource	<b>John Casteñeda</b> Turtle Creek Manor	<b>Walter Nguyen</b> Mosaic Family Services
<b>Dr. Ronald Anderson</b> Parkland Health and Hospital System	<b>Jan Langbein</b> Genesis Women's Shelter	<b>Maria Clark</b> American Cancer Society	<b>Margaret Patterson</b> Child Abuse Prevention Center
<b>Dr. Mark DeHaven</b> University of North Texas and UT Southwestern	<b>Stephen Love</b> Dallas-Fort Worth Hospital Council	<b>Lynn Davis</b> Dallas Children's Advocacy Center	<b>Lynette Payne</b> Galaxy Counseling Center
<b>Christopher Durovich</b> Children's Medical Center	<b>Ron Lutz</b> Genesis Physicians Group	<b>Gordie Echtenkamp</b> YMCA	<b>Dr. Keith Rawlings</b> AIDS Arms
<b>Ruben Esquivel</b> UT Southwestern	<b>Dr. Stephen Mansfield</b> Methodist Health System	<b>Susan Etheridge</b> CASA of Collin County	<b>Larry Robins</b> PediPlace
<b>Douglas Hawthorne</b> Texas Health Resources	<b>Dr. Daniel Podolsky</b> UT Southwestern	<b>Betsy Fuchs</b> Jenesis Group	<b>Paulette Standefer</b> Community Volunteer
		<b>Jeff Hayes</b> VHA	<b>Cheryl Sutterfield</b> American Red Cross
		<b>Ben Jacobs</b> Dallas-Fort Worth Hospital Council	<b>Joyce Tapley</b> Martin Luther King, Jr. Family Clinic
		<b>Bill Knudsen</b> UCP of North Texas	<b>Barbara Lord Watkins</b> Community Volunteer