**Loneliness/Social Isolation Coalition Steering Committee**WCESIL Steering Committee Meeting – 3-07-22

**Present:** Katherine, Kris, Maggie, Angie, Janet, Ashley, and Jill

**Purpose:** The purpose of this group meeting was to discuss updates from each of the workgroups, review ACL Public Workforce grants, discuss the WCESIL website, and review tools and strategies for more partner outreach.

**Standing Goal:**The mission of the *Wisconsin* *Coalition to End Social Isolation and Loneliness* is to engage diverse partners in reimagining how we can combat the adverse consequences of social isolation and loneliness among older adults and people with disabilities in our state.

**Workgroup Updates**

o Policy (Janet) – Policy workgroup developing a white paper, and continuing to discuss advocacy opportunities and partners

o Awareness (Kris) –Website live on March 15. Send any and all content soon, including workgroup membership lists with contact information for the protected portion of the site. Login: MemberConnect Password: WCESIL@2022 for password protected sections of the new website. https://wihealthyaging.org/wisconsin-coalition-to-end-social-isolation-and-loneliness

o Access/Detection (Angie & Sara) – moving to once a week in April. What impact due high level EB programs have on SI/L? The ext. had been working on this and added two questions to the current evaluations (Strong Bodies and soon to Aging Mastery Program) evaluations to gather data on SI/L impacts for both in-person and virtual classes. Attending the session made me feel connected to more people…made me feel more confident in my skills connecting to people(?) 2022 UCLA SI/L screener – looking for a few ADRCs that might be interested in piloting this screen.

o Measurement (Dan)

**Updates and Group Discussions**

o Coordinating workgroup goals and objectives (Dan) – Need to discuss and define mutually supporting objectives between the workgroups. Kris suggested possibly holding an alignment meeting of workgroup reps (every six months or so) with the specific intention of reviewing the objectives.

o Equity/Inclusion Workgroup (Katherine) – pull together everyone to find a date to meet. Need to decide how best to spread information and get on the same page across the workgroups. This should be happening soon. Awareness group will send contact information for their liaison to Katherine.

o Website (Kris) – see notes above under workgroup update.

o State Health Improvement Plan (Maggie) – had to step away and did not return in time to give an update.

o Other - Ashley is available to assist workgroups in areas specific to Alzheimer’s and dementia. Angie suggested that Ashley could update the SI/L Guide found on the GWAAR website – specifically the Dementia Care Specialist section needs updating and a specific section could be added for Alzheimer’s and dementia resources – are there other resources to add?

**Closing and Action Items – meeting ended at 3:50 p.m.**

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Monday, February 21, 2022 | 3:00 pm – 4:00 pm

**Present:** Dan DeValve, Sally Flaschberger, Angie Sullivan, Tim Wellens, Katherine Cullinan, Ashley Kate DeLaurelle, Sara Richie, Dave Nelson, Janet Zander, Cory Steinmetz, Laura Plummer, Megan Timm, Maggie Northrop

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**Discussion Points & Considerations on 02/21/2022:**

* **Introductions**
	+ Megan Timm (SSM Health)
	+ Dave Nelson (WIHA)
* **Workgroup Updates**
	+ **Policy (Janet)** – Focusing on broadband access
		- Update on group meeting discussions – focus on broadband access, specifically
		- What this group really needs (to be posted to the website) is a white paper that highlights broadband access and the issues we’re concerned about
		- Identified several maps that show where public Wi-Fi or access to Wi-Fi can be obtained
		- Governor’s Task Force on Broadband Access (Public Service Commission). Does not have representation for older adults or people with disabilities. Major player in one of the Policy Workgroup’s goals and is identified as a group that the coalition needs to attend or be represented at.
	+ **Measurement (Dan)**
		- Invited Nate Roberts from NorthLakes to attend Measurement workgroup on March 24. Discussing the link between assessment and referral to Community-Based Organizations, use of Community Health Workers, challenges they’ve faced, and how they’ve used your data. Let Dan know if you’d like to sit in
		- Tracking key measures – it’s difficult to directly measure isolation, let alone loneliness, at a large scale
		- Always going to have trouble measuring change at a high level
			* “Risk” factors and “protective” factors for isolation and loneliness are easier to define – and have already been defined in research. Data does exist on these individual protective and risk factors at state and regional levels.
			* “Protective” factors are the key to track as it will relate closely to our definition of social connection
			* Currently working to create a comprehensive list of protective and risk factors, then work to find data on those indicators
* **ACL Public Health Workforce grants**
	+ ACL starting to award funds to expand aging and disability networks’ public health workforce
	+ Policy workgroup discussed and was wondering if there is a way to engage these entities (who are receiving funds) to have an isolation and loneliness focus
	+ ILCs, IL designated entities, DD Council, TBI programs, Tribes and Tribal organizations, and State Health Insurance Programs
		- These grants do not go through the Department; goes directly to the entities
		- Is there something we should be engaging with them to say “We know you got this additional funding around public health workforce. What recommendations do you have around access/detection or technology, etc?”
	+ Scope of grants is very open ended
	+ ARPA provided AT Act programs with $80,000 to be used by 2024
		- Personnel-based; COVID and social isolation focus
	+ Larger question – does this coalition have a role to play in the future in advocating for direction of grant funding? Not us *receiving* funds, just advocating for State/Fed $ to go to this issue.
		- Perhaps the best route forward for the coalition is through the policy group – develop a way to advocate for using funding when it does come in. Too late to impact this round of funding but start thinking about a model to advocate for isolation and loneliness programs going forward.
		- To-do item for the Policy workgroup
* **Reviewing website content and next steps (Dan and Kris)**
	+ Content to Kris by 3/1, website to go live by 3/15
	+ Workgroups have content for password-protected sections
	+ Workgroups (except Awareness) haven’t yet shared resources with Kris. Some options that can be posted for the public
		- Group goals and objectives (all workgroups)
		- One-pager (all workgroups)
			* Overview of the workgroup, goals, co-chair contacts, definitions, link to the WCESIL survey, and brief updates on conversations that are happening in that group
			* Draft looks great – Dan to fill out draft and share with workgroups
		- Wisconsin isolation and loneliness resource guide (access/detection group)
			* Trying to identify ‘updater’ in workgroup
	+ Workgroups to share content, updates, edits with Kris by 3/1
* **WCESIL Staff**
	+ Carleigh Olson will be starting on March 14!
* **Partner Outreach -**
	+ Review existing tools and resources
		- The current partner network is attached and includes people who are active in the coalition, individuals who want to be consulted or informed about the coalition’s work, and organizations or individuals who have been identified for outreach.
		- How can we best reach out to these people who have expressed interest and keep them involved?
			* Possibly using the kickoff of the WCESIL website to get them engaged and informed
		- How can we better use these connections we have?
			* Tell them to get back to us and tell us about an area where they can lend some assistance, provide information
		- How can we identify and reach new partners?
			* Ask current partners who else they think we can reach out to
		- Hosting SI/L webinar series where we’re highlighting some of our work.
			* Maybe the first webinar would be the website kickoff
		- Angie: We have quarterly health promotion webinars; next meeting is in May.
			* Angie has SI/L Coalition on the agenda – good way to pull in some ADRCs
			* Unit directors at resource centers and health promotion coordinators attend these
		- What tables should the WCESIL members be sitting around?
			* How can we intersect with groups that need to know what we’re learning?
			* What can we influence?
		- Reaching out to existing connections that we have is beneficial and usually an easier lift to get others involved with WCESIL
			* Ex: County coalitions are pretty common; doing community health needs. Reaching out to them is beneficial as there is a lot of social isolation discussions taking place at these county coalitions.
	+ We could publish set schedules for when workgroups are meeting – people better at communicating if we say ‘3rd Thursday of each month’. As we’re doing outreach what are the set times.
	+ As one-pagers get posted it will be easier for people to understand goals and objectives. That might engage people better.
	+ Broadband Access group example – has individuals who are providers, has education, workforce, and healthcare – nobody whose primary purpose is to lift up a target population. Thinking through this – do you ask to be around, how to keep involved.
* **Review Parking Lot items**
	+ Equity/Inclusion workgroup
		- Liaison identified from Measurement, Policy, and Access/Detection workgroups plus a few other individuals who have expressed interest in supporting
	+ Most workgroups have documented their goals and objectives
		- Making sure each workgroup has at least one goal/objective dedicated to equity and inclusion
		- Steering Committee then needs to look at these goals/objectives to see if there are any adjustments needed, or that can fit well with the other workgroups, including the equity/inclusion advisory group
	+ Access/Detection workgroup: Adding SI/L question to all satisfaction surveys for the Aging Mastery program, as well as Strong Bodies
		- Thinking about short, medium, and long-term goals
	+ Policy workgroup: Identified where policies were already being developed; workgroup came up with six policies to focus on
		- Decided to prioritize broadband access, since there is a lot of attention and focus in this area already
* **Conclusion and Action Items**
	+ Policy workgroup to consider how best to engage funding decision-makers prior to receiving federal funding – some are open to ideas, some have already identified priorities and plans
	+ Website content to Kris by 3/1
	+ Dan to draft one-pagers for each workgroup
	+ Workgroups (including Equity/Inclusion) to consider how to conduct partner engagement

**Discussion Points & Considerations on 02/07/2022:**

* **Introductions**
	+ Ashley Kate DeLaurelle (Student - UW School of Nursing)
	+ Katherine Cullinan (Health Equity Consultant in BADR; will be leading the Equity & Inclusion Advisory Workgroup)
	+ Megan Timm (Director of Pop Health @ SSM Health WI; not present today, but will be joining future meetings)
	+ Becky Wetter (ORCD Quality Team supervisor; not present today, but will be joining at times)
* **Workgroup Updates**
	+ **Policy (Janet)**
		- Narrowing down the group’s goals/objectives; from 6 down to 5
		- Currently focusing on broadband internet access goal
		- Looking at policy initiatives in WI on reducing broadband access disparities, especially in rural areas and other geographic areas
		- Looking at legislation; bulk of the legislation did not pass but still extremely useful as a reference.
		- Who else might we want/need to partner with on this topic?
		- Recognize that we do not want to replace in-person interactions with using technology
		- Janet has been getting lots of emails about training resources for older adults on using technology
		- Technology First workgroup to get involved with the Coalition
			* Policy Workgroup will reach out to TF
	+ **Awareness (Kris)**
		- Most recent mtg. on 2/1
		- Governor’s proclamation and Letter to the Editor completed in December
		- Reviewed WCESIL website; basic landing space for the Coalition
		- Planning for 2022 – strategically how to raise awareness as a coalition and grow our network. Network expansion will be key to push out all the work we’re doing.
			* Inviting more organizations to come aboard
			* Sign-on approach
			* Push notifications
			* Social media
			* Newsletter?
	+ **Access/Detection (Angie)**
		- Most recent mtg. on 2/1
		- New member, Emily Dieringer from Marshfield Clinic
		- Group discussion on goals/objectives (short/medium/long-term)
		- Decision made: use and recommend using the 3-question UCLA screening tool going forward
			* Acknowledge that it may not be the ideal tool for people with disabilities, minority populations, and those who are not first-language English speakers (unclear how the survey translates to other languages and cultural contexts).
		- **41%** of aging units in WI have SI/L listed as a goal in their 3-year Aging Plans
			* What aging units/agencies do we want to pilot with to utilize the screening tool?
			* Create a training template/script for them on how to administer the screening tool so that they are successful
	+ **Measurement (Dan)**
		- Shifted from focusing on research; now trying to focus on trying to measurements
			* Population-level prevalence of SI/L
		- Lots of overlap with the Access/Detection group so trying now to clarify different scopes of work
		- Dan and Julie (Measurement Co-Chair) talked today with someone from North Lakes, who has a project sponsored by AARP and OCHIN
			* Pilot project conducts an assessment using Epic software, assesses for loneliness, and then attempts to refer individuals to community services as needed. NorthLakes representative will be speaking to the Measurement group soon.
		- Measurement workgroup is collecting state and national research into isolation and loneliness – trying to identify work that has been done that will be effective in establishing a baseline
* **Equity/Advisory Workgroup – Structure and Next Steps (Amber/Katherine)**
	+ **Workgroup Objectives; Roles**
		- Development of workgroup action items and accountabilities
		- Organize community engagement opportunities and facilitate shared decision making
		- Provide consultation/liaison to various workgroups to establish targeted strategies
		- Provide narrative resources and support storytelling efforts
		- Analyze data sets and ensure shared meaning
	+ **Group Structure**
		- There will be a liaison to connect the steering committee/workgroups
		- Plan to bring in some people from DPH for their expertise in data/policy and equity more broadly
		- Idea is that everyone will feel supported as they are embedding equity into their strategies and objectives; feeling well-equipped
		- Infusing equity in a Collective Impact structure
		- Moving ideas into actions
	+ **Next Steps**
		- How to identify who will make up the E/I Advisory Group
		- Who from the workgroup co-chairs will serve in this group?
		- Utilizing staff & resources from DHS/DPH who work in equity already
			* Engage them and see if they have interest in joining the Coalition
		- Helpful for Katherine to attend workgroup meetings
			* How does each workgroup envision embedding equity, and who is interested in participation?
		- Workgroup Chairs to identify 1 individual to participate in the E/I Advisory Group
	+ **Feedback**
		- Continue to keep in mind the idea of having people with lived experience be part of the E/I Advisory Workgroup
* **WCESIL Website (Kris)**
	+ **Review Draft Site**
		- Front-page consumer information about WCESIL
		- Founding organizations
		- Built site to have four different spaces for the workgroups
			* Research, Data & Health Impact
			* Raising Awareness
			* Detecting & Responding
			* Policy Initiatives
		- Better to not overload people with too much information
		- Raising awareness: What can people do in their local community
			* Other tools and resources available to the public
		- How people can connect with us
		- Join The Coalition page
		- Place for WCESIL Members only
			* Steering Committee, Research/Evaluate, Public Policy, Public Awareness, Detect/Respond, Equity
			* Keep agendas, notes, member/contact information
			* Keep this section password-protected; universal password, intent would be to make it easy for coalition members to use site while preventing random people from accessing workgroup notes, tools, and incomplete deliverables
		- Creating a social media presence for the Coalition
	+ **Discussion on Changes/Additions Needed Before Launching Site**
		- Link to the State Health Plan pages?
		- Members Only section will be password protected
		- **Action**: WCESIL members to continue to send content to Kris so she can include on the website
		- Include the Social Isolation & Loneliness Guide
			* Need to assign workgroup member to keep this guide updated
		- Need a WCESIL email address
		- Looking at a widget for a calendar plugin to post dates/events/etc.
		- Goal is to have website launched by March 15
* **Other Items**
	+ **WCESIL Staffing Update**
		- An offer has been made. No other updates at this time.
* **Action Items/Next Steps**

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**Discussion Points & Considerations on 01/03/2022:**

* **Developing Community Engagement & Communications Network**
	+ This is a top priority, but will require more time to work through all the details
	+ Look at and work through strategies for communicating with a broad audience
* **Develop Equity/Inclusion Advisory Group**
	+ Lots of momentum regarding this group
	+ Who can work on getting this started?
		- DHS to convene and discuss kicking this off.
	+ Suggestion to reach out to Office of Health Equity (OHE) / Michelle Robinson
* **New DHS/WIHA Staff Onboarding**
	+ After onboarding new staff, have a larger group retreat, and include longer meeting time for this. Possibly have everyone meet in-person?
	+ Push this back until the new staff have been hired and onboarded
* **Reviewing Legislative and Local-level Budget Timelines; Identifying Budget Priorities**
	+ A lot of different associations will have power in advocating for certain things in the budget. Maybe just focus on what DHS is asking for and what other associations will ask for – not necessary to be aware of all local-level budget priorities.
	+ Agree, we don’t need to establish timelines for local level – do need state budget deadlines, SHIP timeline; state dementia plan (activities they have coming up – does it coincide with the work we’re doing); Aging unit three-yr-plans
		- **Action**: Dan will put together a high-level state budget timelines calendar
		- **Action**: Dan will ask Maggie for the SHIP timeline to add to the calendar
		- **Action**: Tim f/u with Cindy Ofstead or Carrie to get a better understanding of timeline for state Aging Plan deadlines, and also f/u with state Dementia Plan timeline.
		- **Action**: Angie to look at Aging Units to see which ones have information about goals and activities related to isolation and loneliness in 2022;
	+ Develop a **shared calendar** on the WCESIL website that spans the whole year
		- CESIL timelines, once established, should also go on the calendar
		- As we identify events or major activities they should go on the calendar too
		- Other things –local PH does have to do a public health needs assessment every five years; for-profit hospitals also have to do the same thing – good to know there are certain timelines.
			* Is there someone who tracks public health plans? Who do they report to? Entity that has an idea of what that cycle looks like? Hospital had to report to feds; counties – not sure? JCAHO certification fit into this somehow…website that tracked these plans; not sure if the timelines would be available.
	+ Criteria for what needs to be on our calendar?
		- A major activity taking place that’s going to have an impact on this coalition, or vice versa, an activity this coalition is organizing that needs to be publicized.
* **Resource Organization – how do we consistently make resources available to wide audience?**
	+ Seems like this will happen in coordination with the development of the WCESIL website
* **Alignment With Other Similar Coalitions and Groups In-state – Engagement Opportunities**
	+ Fox Valley, Regional groups, and Fiona/Peggy’s target populations
	+ Reach out to Office of Health Equity
	+ Angie: has been contacted by SSM Health and the Marshfield Clinic that may be interested in joining the coalition
		- Angie will be meeting with them to see how they would like to jump in, either with the steering committee or certain workgroups
	+ Other organizations in the state that are doing similar work to WCESIL and would be good for us to connect with
		- NAMI
		- Foundation for Black Women’s Wellness
		- CARE at the UW School of Nursing - Center for Aging Research and Education
	+ What is the best way to organize the information we have and that we will be collecting?
		- Categorize by group (internal use only)
			* Government, health care, long-term care, housing, transportation, employment, youth services, advocacy, etc.
			* Name of organization, individual’s name/phone/email
				+ Have a space to allow this person to explain the category of the group they are with/represent
		- List of who has already been contacted (so we don’t contact them again) and who is already involved
		- **Action:** Dan to create a template of required information, Sara/Angie to create a fillable form for entry of names/organizations and contact information
	+ Idea: have some type of Google Doc / Form that we all can add to
		- This will eventually be managed by one of the WCESIL staff
* **Consistent Use of Tools and Goals/Strategies Across All Workgroups**
* **Next Meeting: Monday Feb. 7 @ 3:00-4:00**
	+ Next mtg. would be Monday Jan. 17, but that is a federal holiday

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**Discussion Points & Considerations on 12/20/2021:**

* **Workgroup updates**
	+ Access/Detection Group (Angie & Sara)
		- Worked on putting action items and strategies into template. Putting things down on paper; had a really great discussion
		- Next Steps: Sara and Angie will go through and clean up and then resubmit it to the group.
			* **Strategy 1:** **Identify older adults and adults with disabilities that are suffering from the health effects of loneliness.**
			* **Strategy 2: Increase access to appropriate social isolation and loneliness resources for consumers and professionals.**
			* **Strategy 3: Research and pilot evidence-based health promotion workshops focused on reducing social isolation and loneliness.**
			* **Strategy 4: Health Equity**
		- Activities include piloting screening tools within aging units – also pilot with living well grant; also pilot at 3-5 ADRCs with older adults.
			* Done a lot of research on screening tools; no final decision made yet on which ones to use.
			* Explore piloting with a member population at Inclusa – possibly with Nursing students.
			* With all of these create a tool on how/why this is being administered.
			* After piloting, putting together training materials and conduct focus groups
		- Talked about breaking some things out to other strategies; don’t have a strong HC representation now, for example – would be helpful to have that.
			* We do know that most of population has a PC – even though we don’t have strong connections that is a good opportunity to engage with people
			* Another important strategy is to address “so what” after screening. It would be too much for our group to come up with resources, but we could create a template for communities to help them build out capacity and have resources.
		- Have WI isolation and resource guide developed by Dane County. Build off of that.
		- Submit content for website; collaborate with Awareness group; they’ve discussed doing a series of webinars
		- Evaluating existing high-level health promotion workshops to determine impact on isolation and loneliness.
		- Opportunities with existing programs; what effect does high-level evidence-based programming have. Most research so far hasn’t been on isolation and loneliness. How do we look ahead towards evidence. How does being a part of a group affect isolation?
			* Have access to Aging Mastery program in rural areas – could implement that quickly.
		- Last strategy we didn’t get to is health equity; having separate committee will be really helpful.
		- Amber: Would love to share these with council on blindness – ok to do that? They were reaching out to some programs in FL about what questions to ask; advocacy materials; doing a needs assessment in this space. This is all aligning really well with what that group is doing.
			* Angie does a health promotion quarterly webinar; a few months ago had ASL interpreter who discussed how to be more inclusive. Crucial to clear up some of those barriers.
		- Might be a good opportunity to talk through healthcare component with individuals at DHS too, at least until we have more access or participation from medical community.
			* Dr. Zapata might have a lot of evidence-based promotion activities
		- Janet – watched social health lab’s connection and healthcare webinar. Focused on social proscribing to direct people to some of the resources out there because people take referrals seriously. Some examples of doing that without the network already.
		- Maggie – maybe also target a bit deeper with healthcare providers and mental health providers; particularly those who serve lowest income and most marginalized. Who those are – intentionally seek them out. Maybe Federally Qualified Health Centers?
		- One thing that the group came up with was a focus on how to ask a question – really important.
* **Forming an Equity/Inclusion Advisory Group**
	+ Maggie/Amber to share thoughts from DHS on how this group will contribute to the Coalition
		- Including this in the existing space of centralized/decentralized work – allows us to be flexible; here’s what the coalition is doing, aims, other groups of marginalized folks; ebbs and flows.
		- Looking at resource articles and best practices – recommendation is to have a small advisory group as a driving force. Significant pieces of how we move coalition work out into the community. Target our approach this way
		- Happy to see this happening – how are we identifying other coalitions that are doing this? –
			* Subscribing to other coalitions.
		- Wanting to see all communities thrive;
		- Plan for next year is to organize this group – Nikke, Sally, Kris, DHS people
		- Having centralized work here might help us with decentralized work in workgroups and communities.
		- Sally – from perspective of someone who came in representing advocacy from disability community. Nothing is more frustrating than when stakeholder comes in and are bringing ideas that haven’t been considered. Hard for group as a whole to get behind it when they already have plans and a set approach. What does it look like – how can we be receptive to new ideas/people?
			* BPDD board is made up of diverse group; finding that people have different definitions and experiences – maybe we train people so they understand what this means? Set up ground rules that make it a safe space.
			* How can we be sure we’re not imposing our ideas and make it a safe space for everyone? Don’t necessarily have an answer, but it’s something we need to think about.
* **Finalize Definitions (Dan)**
	+ Haven’t finalized these yet but did make some edits and updates based on previous conversations – final thoughts on what we’re missing from these?
	+ Plain language needed
		- Send definition through Karen Kopetskie to define plain language. Here’s what it means, here’s how we would share it with others. Translation to other languages. Here’s some options when we’re talking about it and communicating. Not necessarily to share externally.
		- Maggie – tried to translate it just now. Good idea to work with Karen. Just think about the words.
		- Sally – happy to run it by aid self-advocates.
		- Even translating to ASL would be difficult. Not sure how to present it to the council.
	+ Decision:
		- Coalition adopts these working definitions
		- Create translatable/plain language definitions.
* **Updates (Tim & Kris)**
	+ DHS Staffing Position
		- Strong interest; second round of interviews to happen in January
	+ Website & file-sharing
		- Decision made to have public-facing website and coalition-only site all hosted by WIHA. Central location reduces confusion.
		- No SharePoint.
* **Looking ahead to 2022 (Dan)**
	+ Lots done in 2021! 2022 will focus more on action items; workgroups adopting objectives/strategies and getting to work;
	+ A few highlights we plan to focus on in 2022
		- Finalize Objectives/Strategies for all workgroups
		- Develop measurement plan
		- Develop community engagement & communications network
		- Project Management tools - timeline/action Plan
		- New DHS/WIHA staff support
	+ Things we’re missing that need to happen in 2022?
		- Legislative/Budget timeline *–*
			* DHS recommendations for budget go to Governor – as a coalition need to think about recommendations or things we can do that need to happen in the budget. Thinking about that timeline – whatever we decide we need to have it in the budget process – whenever DHS departments start giving recommendations. Need to be thinking about what other timelines are out there that we need to be cognizant of.
			* What other timelines are out there? Meeting certain benchmarks by certain times? Have some conversation about what plans are put into place. Which timelines are most important to the work we’re doing here?
		- Smaller budget asks
			* Thinking to balance the larger budget asks – opportunities – local resource dollars available too. Accessible via our website? Have a portion of the site that says ‘here’s language that might help get funding’ – how can we ensure smaller groups and communities do this. Not sure if this is within our scope but would love to be able to support that.
			* Totally agree – lots of good work this year. But need to find ways to help people. Most people who need help won’t/don’t ask for it. Connecting through medical providers, ADRCs, etc. is the way we’re going to tap in and reach people. Funnel $ down to these organizations? Provide education and activities? Really important to reach community level.
	+ Resource organization –
		- Important discussion about resources we’re gathering. What is for members only; what is for public. We’re going to be collecting rich data – can people find it or is it protected? We definitely have a role in supporting this at the local level. Where does it go; how do we make it accessible.
	+ Alignment with other groups –
		- Thinking through coalition’s niche; what benefits communities; identify more alignment – what are other groups and what are they doing? WI Spec Olympics are doing things in this space. Ally, get comfortable with other organizations in this space. Might be partner mapping or systems piece. Funnel information through. Speak to/amplify this. Partner and strategy mapping.
	+ More engagement opportunities
		- UW Pop Health Inst. – have been receiving requests from locals about measuring isolation and loneliness. Talked about different definitions of connectedness and belonging – different types of experiences. What could be driving models – individual vs. family vs. community level. Some populations might be experiencing it more at familial level; others more at the social level. Really interesting discussion – the way we define and measure – reiterative DE process. Who is left out; barriers; what is needed. Mapping this out could happen at state health plan level. Once that work happens we can bring it back to the coalition. Hopefully relieve some tension where definitions are constantly adjusted and changed.
		- Must be a lot happening in WI because lots of partners are constantly being contacted - mapping needs to be done so we’re not duplicating work.
		- Virtual community conversation to do mapping? Maybe a good way to hear more about all the things that are happening. Resources/community mapping.
		- Arts/Public Health – some crossover and things to keep on the agenda. Evidence-based practices for us to make that connection there too.

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**Discussion Points & Considerations on 12/6/2021:**

* **Member Updates and Introductions**
	+ Jean is retiring from her current role at WASC and will no longer be on the Coalition
		- Willie Mitchell will be joining Coalition to replace Jean. Willie is with the Milwaukee Recreation Dept.
	+ Shannon Myers is no longer be part of Coalition
	+ Julie Schmelzer has joined as a co-chair of the Research group
	+ Possibility of approaching NAMI to join the Coalition?
* **Workgroup Updates**
	+ **Policy** (Janet)
		- Identified several objectives they want to focus on
			* Focusing first on the technology solutions objective and access to technology; building policy around that
			* Strategies to approach access to technology; ensure it’s not seen as a one-size-fits-all
		- Ready to start talking about action items going into 2022
		- Summary of meeting is in the Status Update document
	+ **Access/Detection** (Angie & Sara)
		- Reviewed 3 tools at last meeting (UCLA, U-SIRS, and Social Connections Epic Screening Tool)
		- Difficult to have people change tool that they might already be using
		- Thinking about beyond the tools – now what?
		- Still working on coming up with an action plan, toolkit or guide book
		- ADRCs will have client tracking that includes identifying customers as lonely &/or isolated (starting in March 2022)
		- Identify what’s happening across the state, and communities can bring that back to their local areas
		- How to get more diverse voices at the table, including representation from tribal partners
		- Dan put together a timeline document together to help track our progress
	+ **Awareness** (Kris)
		- Talked about strategies of raising awareness and engaging local communities, and what we are going to deploy
		- Submitted a proclamation, and December 15 will be Loneliness and Social Isolation Awareness Day in Wisconsin!
		- Putting together a letter-to-the-editor, similarly to last year, which will be getting distributed to our provider network and local newspapers
			* Information to focus on older adults and people with disabilities
			* Looking for people who are willing to share their story
		- <https://wiha.wufoo.com/forms/re8f52g1gd5or3/> (online story form)
		- [Link to Cap Times story](https://captimes.com/news/government/alone-together-seniors-experienced-heightened-isolation-during-covid-19-pandemic/article_642b2224-5ec4-5f27-881e-7e0f70602874.html)
		- Ana let us know that the DHS website lead is Karen Kopetskie. Kris working with Karen to get content added to the website
		- Heard from Caitlin from BPDD – developed a disability resource toolkit
		- Working on discussion planning for 2022
	+ **Research** (Dan)
		- Shannon is no longer involved in Coalition
		- Ellen has stepped back as co-chair of the group
		- Julie Schmelzer and Cory Steinmetz are now the co-chairs of the group
		- Talking through overlap with the Access and Detection group
		- Finding research-based interventions that are proven to work that have been supported by academic research is a continuation of the access/detection group’s work. No longer sure if that falls to the Research workgroup.
		- Added value is to focus on population-level measures
		- Still a bit unclear about what exactly the group will focus on
			* It’s hard to get our minds around the idea of measuring isolation/loneliness, especially at a state level
* **Revisit Targeted Universalism discussion**
	+ Better translate how the general definition of Targeted Universalism applies to this coalition
		- Want to make sure we’re thinking broadly about what that means
		- This coalition is focusing on older adults and people with disabilities
		- How do we tap into the work as well that might be in service to other populations and applying it to the concept of intersectionality?
		- The work being done can be good for anybody; others can benefit
		- Developing some questions around the work we’re doing and how it can benefit groups beyond older adults and people w/ disabilities
* **Equity tool/training**
	+ As a reminder, Amber shared a draft of this tool here (<https://vimeo.com/641996631>) with an invitation to provide feedback.
		- We want to ensure we are also centering on equity, since we still have a long way to go in that regard
		- Accessible training to provide information on equity
	+ Add this to workgroup agendas to have them watch the video
	+ Find ways to embed and integrate this into all of the work we’re doing
	+ **Idea**: Possibly doing an advisory group of people with lived experiences in social isolation and loneliness from a diverse representation
		- Sally: has enough funding in their grant to be able to pay the participants to be involved in this.
		- Nikke and Kris also volunteer to be part of the group
* **‘Parking Lot’ Updates**
	+ DHS Project Management position (Tim)
		- Job posting closed on November 29.
		- Interviews to begin later this week/early next week
	+ WIHA grant application (Kris)
		- WIHA awarded a two-year $150,000 grant to support the work of the Coalition
		- Still needing to figure out how this position will work in collaboration with the Program Coordinator position within BADR
			* This will help to better figure out roles & responsibilities across the Coalition
	+ Website construction (Kris/Amber)
		- Kris working with Amber and Karen K. to develop the website that will be public facing
	+ SharePoint file-sharing site (Tim)
		- This is in progress of getting set up
		- All active Coalition members will have access to information, resources, documents that can be saved and accessed within SharePoint
* **Action items and next steps**
	+ [Review equity tool/training](https://vimeo.com/641996631) and provide comments to Amber
	+ Set up equity/inclusion advisory workgroup (Sally, Nikke, Kris, DHS person TBD)
		- Notify Dan/Tim if you’re interested in participating in this group
	+ Review resources
		- ‘[Anti-Racism in Collective Impact’](https://ssir.org/articles/entry/interview_bringing_an_anti_racist_approach_to_collective_impact?utm_source=newsletter&utm_medium=email&utm_content=interview&utm_campaign=CIF20211202AntiRacistApproachSSIR) interview
	+ Share [online story form](https://wiha.wufoo.com/forms/re8f52g1gd5or3/) developed by WIHA/Awareness WG
	+ Review [Targeted Universalism](https://nam02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fbelonging.berkeley.edu%2Fpodcast-targeted-universalism-john-powell&data=04%7C01%7Cjanet.zander%40gwaar.org%7C4fba615a431042432e3408d9aded44d5%7C8e087664409d4c4ca6b47aa01020d6ea%7C0%7C0%7C637732056835803141%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=cgjdQkqxgsj4k2r1N22gKHd%2BWtEjgPNwlzC3X60CGKQ%3D&reserved=0) discussion in UCLA podcast
	+ Parking Lot items – staffing, website, file-sharing all in process

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**Discussion Points & Considerations on 11/15/2021:**

* **Welcome/Introductions**
* **Workgroup Updates** (Kris, Angie, Janet)
	+ Attached is a brief Status Update document with an overview of discussions and current action items across our workgroups.
	+ When do we communicate with the members who want to provide feedback and/or be informed of the coalition’s work?
		- This could be a role for the HSPC staff, once hired
	+ Kris (Advocacy group): What is our process once we
* **Population of Focus discussion** (All)
	+ In this conversation we’ll discuss the coalition’s current focus on older adults and persons with disabilities and to what extent this focus can/should be expanded to other populations.
	+ The outcome of the conversation will hopefully be to add clarity to current and future discussions around the coalition’s scope.
* **Inclusion and Equity** (All)
	+ Current methods to expand the coalition are to 1) directly invite people to participate or 2) invite those who indicated they wanted to be actively involved when completing a survey. What other steps can we take to include groups that are not currently represented?
		- <https://uwphi.pophealth.wisc.edu/match/match-wisconsin-healthiest-state-initiative/racism-is-a-public-health-crisis-in-wisconsin/> (article on racism as a public health crisis)
		- <https://captimes.com/news/government/alone-together-seniors-experienced-heightened-isolation-during-covid-19-pandemic/article_642b2224-5ec4-5f27-881e-7e0f70602874.html> (Cap Times article)
* **Other updates**
	+ Media request and Governor’s Proclamation (Tim, Maggie and Kris)
	+ Maggie
		- Targeted Universalism – benefits all generations
			* Have a consistent definition of this term to use with all workgroups
		- Intersectionality vs. individual responsibility
		- <https://belonging.berkeley.edu/targeted-universalism> (Targeted Universalism)
		- <https://vimeo.com/641996631> (training put together by Katherine Cullinan)
* **Action items and next steps**

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**Discussion Points & Considerations on 11/1/2021:**

* **Introductions**
* **Workgroup Updates** (20 Min) – where are workgroups overlapping? Decisions being made by workgroups?
	+ Access/Detection – Angie & Sara
		- Met 2 weeks ago, and next mtg. is tomorrow 11/2/2021
		- Recently included a quality mgr. from Inclusa
		- Looked at some diff. screening tools being used across the country. A lot of the tools are very broad but don’t capture the disability community. Maybe needing to look at using a couple different tools to capture all populations.
			* UCLA tool
			* U-SIRS tool being used in MD
			* Campaign to End Loneliness Measurement tool
			* National indicators as well
		- Ideas for action steps to be prepared for tomorrow’s discussion
		- Multiple ways to detect prior to an intervention being done, then again after the intervention
	+ Policy – Janet
		- Very interested at looking at what policy we should be trying to promote and advance, especially to help people get connected
		- Make sure the steering committee meetings provide space to allow all workgroups to provide quick summaries at the beginning of the meetings
		- Looking at goals from Calif. Aging Mastery Plan, and what we would like to continue to do some work on.
			* Expand opportunities for older adults and people w/ disabilities to be both economically and socially engaged
		- Having a repository on our website to keep all of these pieces of information
		- Looking at the broad category of broadband that’s related to devices that keep people connected
		- Multi-generational volunteer opportunities
		- Looking at policies around prevention activities (abuse, neglect, exploitation, etc.)
		- Larger conversation around the coalition’s work that being done in leadership and how we can continue this work beyond the life of the workgroup
		- Recognizing overlaps between workgroups
		- Lisa Pugh is leaving her current job, and Sally is happy to join this workgroup
			* More collaborative meeting where there are opportunities for discussion revolving around the small groups
	+ Research – Dan
		- Looking out there to see what has already been done so far
		- Reviewed definitions again and received feedback in order to work towards final approval for the coalition
		- Finding successful interventions after access and detection is complete
			* How do you measure that?
			* How do you decide which interventions are the best?
		- Find out what the baseline is for SI&L and how to measure that currently, and then how to measure that, thus causing change
			* We talked about how to find our baseline indicators
				+ Several state surveys
* **Review and Approval of Definitions for SI&L and Social Connection** (Dan) (5 Min)
	+ Workgroups suggested minor edits to the definitions the Steering Committee adopted
		- Social Isolation: People experience social isolation when they have few or infrequent social connections.
		- Loneliness: The subjective and distressing feeling of social isolation, often defined as the difference between actual and desired level of social connection.
		- Social Connection (and connectedness): Refer to the ways that people can be physically, emotionally, and culturally connected to others.
	+ We don’t differentiate between positive and negative social connections
	+ Peggy helped with these definitions and has been involved with the State Health Assessment, has been a part of the language we’re using and knows how we got to that language
	+ Definitions need to be able to carry through all the work that’s being done
	+ Should we insert “objective” into definition of social isolation?
	+ Should we add “subjective” to definition of social connection, although this focuses on the positive aspect of connectedness?
* **Review of options and next steps for Shared Measurement** (Cory & Dan) (20 Min)
	+ Specifically this discussion will center on:
		- 1) A summary of how the coalition can have an impact, over time, on population-level measures of social isolation and loneliness, and…..
		- 2) Ways we can tailor this approach as priorities shift. I hope to come out of this with specific next steps
	+ Important to be able to adapt our measurement plan and be able to continue to change as circumstances change.
	+ How the coalition affects those really high level population-level measures.
	+ For Collective Impact model, it’s nice to show the impact we’re having, besides anecdotes and individual stories of people.
	+ What can we track, especially as it relates to specific policy issues?
	+ Is there some kind of document that we can use to include from each indiv. Workgroup?
		- Helpful to have it laid out this way
		- It’s a place we can keep revisiting, tweaking, and updating as needed
		- Something like a charter for each workgroup, then an overarching charter for the entire steering committee
	+ Some kind of same/shared language in place to help us advance our transformative narrative
	+ Public messaging is important, and having the same vision and metrics so we are unified as an approach
	+ Steering committee have an evaluation plan on how we are measuring success.
		- Funnel up to the broad goal of population level, fewer/lower percentage of people who feel lonely/isolated
	+ Do we have any baseline data at this point?
		- Right now, we’re trying to compile what that baseline data is and how we could use it broadly
	+ Do we have/use a survey to start with and push out?
		- Have a consistent baseline we can use across aging/disability/other populations
	+ How do we reach out to the population we are trying to get information from when they are not enrolled/engaged in a program?
		- It’s a disservice if we are not reaching out to everyone
	+ Next step:
* **Action Items and Next Steps** (5 Min)
	+ Dan will look at definitions and wordsmith them more.
	+ Workgroups work on establishing and writing down their objectives
		- Dan will send out Policy workgroup objectives as an example for everyone to look at
		- Then we can go from there regarding measurement
	+ Quick Update on Steering Committee Zoom meetings
		- The state is moving to Zoom for Government, so Tim will be ending the current meetings series and sending a new meeting series invite
		- You do not need to do anything on your end except accept the new meeting series invite

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**Discussion Points & Considerations on 10/18/2021:**

* **Welcome**
* **Workgroup Updates**
	+ **Raising Awareness (Kris)**
		- The Raising Awareness workgroup produced several resources and AARP conducted focus groups to collect feedback which can be accessed at the following links:
		- [https://app.feedbackloop.com/results/Xu2AzGfiaXVwInimKREB053Jx](https://nam02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fapp.feedbackloop.com%2Fresults%2FXu2AzGfiaXVwInimKREB053Jx&data=04%7C01%7Ckris.krasnowski%40wihealthyaging.org%7Cb028b0886a234204f29108d98f34bf00%7C8e087664409d4c4ca6b47aa01020d6ea%7C0%7C0%7C637698278990784819%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=UfIhcz%2FJOa2FZjNd6JRm%2B96PtzHEDcto%2F87CYlxDd9o%3D&reserved=0)
		- [https://app.feedbackloop.com/results/ZXsFWjU6Rj1nJpmGQBbGp3q4v](https://nam02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fapp.feedbackloop.com%2Fresults%2FZXsFWjU6Rj1nJpmGQBbGp3q4v&data=04%7C01%7Ckris.krasnowski%40wihealthyaging.org%7Cb028b0886a234204f29108d98f34bf00%7C8e087664409d4c4ca6b47aa01020d6ea%7C0%7C0%7C637698278990784819%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=n7xCoD2gDUA2uf08quzZujrxsCn9b1n2686f4C7tIyw%3D&reserved=0)
		- [https://app.feedbackloop.com/results/RieyU9VQ7b1F5x2QEbnVJ4byq](https://nam02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fapp.feedbackloop.com%2Fresults%2FRieyU9VQ7b1F5x2QEbnVJ4byq&data=04%7C01%7Ckris.krasnowski%40wihealthyaging.org%7Cb028b0886a234204f29108d98f34bf00%7C8e087664409d4c4ca6b47aa01020d6ea%7C0%7C0%7C637698278990794779%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=m5FqA%2FDcdIKBYWX3uJrBPYTT1s5XNuw6d6z2dR473Zg%3D&reserved=0)
		- Spent bulk of meeting going through market research products that AARP WI team provided
			* There were about 135 people who responded to the marketing ads put together by the Coalition.
			* Responses were grouped into positive, neutral, and negative
			* The responses were both indicative of understanding the ads themselves, along with the reactions to the ads
			* Overall, the responses were mostly positive
			* More work needs to be done in terms of how to disseminate the tools, which will include adding to the website
			* This time of year, people are looking to find things to do within their community, and these can be targeted towards people who are isolated/lonely
			* Planning to have subgroups to talk through more details regarding common themes of the comments so we can adapt the materials
			* Ability to adapt the ads to people’s local community needs
			* Sally: Has concerns about the ads due to lack of accessibility for people with disabilities.
				+ People with disabilities not represented in the ads. Some ads are not in plain language, and cartoon-like characters to represent people can be difficult.
				+ There seems to be a lack of representation of people of color = not racially equitable.
				+ Ads are geared at ages 45+
				+ **Suggestion**: slow down and take a deeper look at these ads before disseminating them out
	+ **Policy (Janet)**
		- Looked at definitions of social isolation and loneliness that were shared with the steering committee previously, and the definition shared by Peggy
			* Refers to how people talk about the social connection, but also needing to capture that sense of belonging
			* **Social Connection**: refers to the ways that people can physically, emotionally, and culturally connected to others. When people have a sense of belonging (they feel valued and included), their health and well-being are positively influenced.
		- **Action Item:** Dan will send out the definitions to the whole Coalition
		- **Action Item**: We’ll update the one-pager with this updated language
		- The workgroup looked at a goal from the California Master Plan
			* Inclusion and Equity; NOT Isolation
			* Two topics:
				+ 1) Looking at opportunities for inclusion and equity: volunteering, employment, digital access, etc.
				+ 2) Protection from abuse, neglect, exploitation
		- Looking at resources that fall into these two categories and continue to map these out, then sharing the resources with the group
		- Good balance of discussion of high level and aspirational and other ways were interesting to push this forward on the ground or small scale, things we could do quickly
		- Is this work going beyond older adults and people with disabilities?
			* Dan: There has been discussion, but no final decisions made
			* Fiona: We are hoping to integrate other populations separately, without efforts being duplicative.
			* **Action Item**: add this topic to next steering committee mtg. (Nov. 1) so we can have a consensus
		- Strong support in including policies from the Living Well grant regarding abuse/neglect
* **Review Definitions**
	+ Small adjustment recommended by workgroups **(see notes in other bullet points)**
* **Shared Measurement Next Steps**
	+ Setting up definitions is the first step in that process
	+ Need to talk through and figure out metrics and how to measure success of what the Coalition is doing well
	+ Cory Steinmetz/Research workgroup – done work w/ population metrics
	+ It would be helpful to have a consistent framework, just like we have a consistent definition
	+ Thoughts on shared measurement?
		- Janet: might be difficult to get another meeting for people between the steering committee and the subgroup meetings.
			* Do this as part of the larger steering committee; add to our agenda
		- Peggy: shared measures across varying social connections; collective impact
		- Fiona: I would encourage us to have measures for WHAT we are doing, HOW we want to do it, and WHAT IMPACT it is having
		- **Action Item:** Dan will send out a poll to see if people are available and who would be able to make the discussion meeting, to include Cory
			* Important to have people from each of the four workgroups
* **Other Updates**
	+ **Website**
		- DHS Healthy Wisconsin website is being built out by Karen Kopetskie
		- Please send any documents, content ideas/suggestions to Karen (Karen.kopetskie@dhs.wisconsin.gov) to help build this out cooperatively
		- As we develop our own website, it will be easy to transition the materials over
	+ **Equity Tool**
		- Amber/Maggie working on this
		- Worked on a recorded equity tool training with Katherine Culinan
	+ **DHS WCESIL Staff Position** (Tim)
		- Recruitment being combined with two other positions within the Bureau of Aging and Disability Resources
		- Job posting has been updated, along with interview questions, and given back to HR
			* Posting will be in English, Spanish, Hmong, and ASL
		- Hopeful that the posting will go out by next week
	+ **WIHA Grant**
		- It’s a two-year $150,000 grant. Wouldn’t necessarily fund an individual, but would have the ability to take on some additional kinds of admin work and potentially some of the backbone organization management.
		- WIHA should know by the end of November whether they are getting the funding
	+ **Coalition Presentation:** Kris and Angie will be doing a presentation in December on the efforts of the coalition and its effort to the WI Public Health Assn.
		- <https://farfromalone.com/resources/>
		- [www.endsocialisolation.org/policy-priorities](http://www.endsocialisolation.org/policy-priorities)
	+ **Update on Mobilizing Communities funding opportunity** (Maggie)
		- <https://www.dhs.wisconsin.gov/contracts/mobilizing-communities-just-response-grant.htm>
		- Applications don’t necessarily need to be polished proposals – hoping to support communities
		- Application deadline extended to Nov. 15
* **Action Items and Next Steps** (see action items highlighted in **bold** in the notes)

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**Discussion Points & Considerations on 10/4/2021:**

* **Welcome/Introductions**
* **Workgroup Updates (discuss feedback from the rest of the coalition; opportunities for overlap or mutual support)**
	+ **Raising Awareness (Dan)**
		- Got information reviewed by AARP
		- Next mtg. on Oct. 13
		- Two sub subgroups are ‘messaging’ and ‘dissemination’, and possibly another one for ‘developing tools’ (website, actual tools to disseminate, etc.)
	+ **Access & Detection (Angie)**
		- Some inconsistency on members joining/interest
		- Any new members, Angie will meet with them individually in order to get them up to speed
		- Reviewed definitions on social isolation and loneliness, wanted to tailor them more
		- Issue of transportation and access
			* Transportation piece might be switched over to the Policy subgroup
		- Christine See joined and provided insight regarding intake process of ADRCs
		- Looking at different screening tools (UCLA and U-SIRS)
		- Opportunity for the ADRC to add questions for screening
		- Brown County shared that they are measuring folks after they participate in their evidence based health promotion programs
			* Looking if we can coordinate something on the evaluations
			* Will be reporting out on tools at the end of Oct. at next meeting
			* 1. I feel less isolated after participating in this class (43%) 2. This class provided connection to others with similar situations as me (54%)
		- Amber: interesting that there is a call to help in Brown County area; a call for help
			* Angie: during next mtg., she will find out exactly what questions they were asking
	+ **Policy (Janet & Sam) (Dan provided update)**
		- Met last week Mon 9/27. Maggie Northrop gave presentation on the State Health Assessment (SHA) and Stat Health Improvement Plan (SHIP)
		- Ways that DHS is already approaching this, got her feedback, and talked about how Policy workgroup and Maggie’s team can work together going forward.
		- Discussing accessing the same information that Maggie has
		- Talked about definitions of social isolation and loneliness
		- Talked about the objectives and policy work the group can focus on
		- Participants start to think about best practices and things done at the local level
	+ **Research (Shannon & Ellen) (Dan provided update)**
		- Met last week Thur 9/30. Talked about definitions of social isolation and loneliness
			* With so many definitions out there, it was suggested to review all definitions and compile them together
		- Talked about how to measure success, and what it looks like in two years, ten years, etc.
		- Anne Bastings works with Timeslips in Milwaukee, and recommends everyone read report put out by Natl. Academy of Sciences
			* <https://www.nationalacademies.org/event/02-27-2020/report-release-webinar-the-health-and-medical-dimensions-of-social-isolation-and-loneliness-in-older-adult>
			* <https://www.nationalacademies.org/our-work/the-health-and-medical-dimensions-of-social-isolation-and-loneliness-in-older-adults>
* **Review definitions of social isolation and loneliness (All)**
	+ Reviewed definitions from Natl. Academy of Sciences; WCESIL; WI SHA; national CESIL
	+ Laura: Biggest takeaway is using the objective vs. subjective as the baseline of our definitions
		- A layer of connectedness plays in due to even being around lots of people, but feeling socially isolated within that group of people
	+ Sally: Perspective of people living in congregate settings. Even though they have social contacts, they not making the choices, and thus could still report being extreme social isolation
		- Not using ‘perception’ but rather using actual vs. desired for a person
	+ Angie: Definitions got lengthy because we were also thinking about ways to measure
	+ Kendra: Are these limitations captured within the definition of loneliness?
	+ Amber: appreciation of the SHA definition that’s framed by how it pulls one into another. Expressing the feelings around isolation and loneliness.
		- Framing of how we are going to move it forward; being mindful of the necessary alignment
		- Looking at IRIS and Family Care members re: social connection and measure; necessary component of supporting people with employment and transportation
		- I like the idea of defining well-being as being our shared values and aims....
	+ Janet: Likes the SHA definition. One piece that’s missing is the piece as it relates to loneliness, and that’s the quality piece. What does that mean to the person?
	+ Kendra: CDC definitions
		- Social isolation is the lack of social connections.
		- Loneliness is an emotion that comes from a lack of social connection
	+ Can we live with the SHA definitions? **YES**
* **Shared Measurement (Dan)**
	+ How do we make decisions on shared measurements? Defining what the coalition is doing, what our ultimate goal is re: the outcomes we want?
	+ Angie: give information in advance so people can prepare, and have action items so people are prepared to vote, or they have questions/thoughts in advance.
		- Google/Microsoft forms so people can access in advance, voting
	+ Amber: Likes idea of highlighting other organizations that are supporting the coalition with what their goal and objectives are; bringing everyone to the table
		- Being clear and deliberate
		- We can shift as we see measures shift
		- Maybe have a separate meeting or have folks survey related to assets
	+ Angie: Dr. Jane Mahoney is doing research on SI&L
	+ Sally: What if there was a template created that everyone can use so it will be easier to compile the information?
	+ Ana: having the ability to share thoughts beforehand and really think about them is helpful.
* **Updates on**
	+ **Website (Ana/Amber)**
		- Amber met with Karen Kopetskie from DPH, find a space on Healthy Wisconsin website to land social connectedness
		- Karen is helping with to put the Coalition’s work into this space on the website
		- It affords us more opportunity to flex/flow and push information out, but we can also easily move it to another organization/space if and when needed
		- This really serves in the spirit of the Collective Impact model
	+ **Equity tool/framework (Amber & Maggie)**
		- Recording a training on equity this Wednesday (Equity 101) with Katherine Cullinan (Health Equity Consultant in BADR),
		- Amber will then get that sent out so it can be shared with all subgroups
		- From there, we can move into questions/opportunities/asks
			* This will give baseline for the asset maps and help determine what our shared measures will be
	+ **DHS position (Tim)**
		- Everything has been submitted to HR, and we are now waiting for confirmation that the position has been posted.
		- Has been approved as a permanent state position
		- Tim will inform the group as soon as the position is posted
			* Please send the posting out to your respective distribution lists
* **Action Items and Next Steps**
	+ SHA definitions are what we are going with
		- We can make a footnote/bullets and expand on those ourselves so it’s specific to our work
	+ Asset map will be preliminary, setting our baseline and really figuring out where we’re at
	+ Work groups are full speed ahead; each group start thinking about the asset map; also think about building out shared measurement re: data collection

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**Discussion Points & Considerations on 9/20/2021:**

* **Updates from each workgroup (Updates from Kris, Janet, Angie, Shannon)**
	+ Steering committee feedback on workgroup updates. Are there opportunities yet for workgroups to support each other? Any questions, comments or ideas after hearing what other workgroups are doing?
		- Group icebreakers to help people get to know each other and be more comfortable
		- Reviewing operating agreement
		- Overlap within the four subgroups = a GOOD thing
		- Having a standardized form for capturing goals and measurements
		- All 3 subgroups relying on Awareness subgroup for disseminating information to the larger coalition network
	+ Public Awareness subgroup (Kris): met on Mon. 9/20: Next steps
		- send out Doodle Poll to set up next meetings
		- small survey to see interest in subgroups within the Public Awareness subgroup
		- Ana is working on the website
		- AARP doing market research with some of the materials we have
	+ Access and Detection Subgroup (Angie): next mtg. Tues 9/21
		- Went through definitions of social isolation and loneliness
		- Worked on workgroup goals – detect and identify adults who are socially isolated or lonely, thus at a greater risk of negative health and safety outcomes…..
			* Focus at a state and local level
		- Missing out on having a health care contact in the group
		- Angie meeting with SAGE (LGBTQ group) out of Milwaukee
			* This is identified as a group that is at highest risk of SI&L
		- AHEC as well
		- Inclusa as a possibility as well
	+ Research subgroup (Shannon/Ellen)
		- A few new members recently joined
			* From the survey and also from recruitment efforts from current members
			* Anne Bastings – founder of Timeslips. Digging into the metrics of how to measure loneliness and social isolation
		- Group goals
		- Being the foundation to help support the other subgroups
		- Discussed who is not represented in the subgroup
			* Member of healthcare - Metastar (Julie Schmelzer)
	+ Policy subgroup (Janet)
		- Introductions for new members to get to know each other
		- Policy looking to see how to get to connectedness phase
		- Looking at an assessment; to find out what is out there
		- Maggie N. attending next mtg. on 9/27 to discuss SHA and SHIP
		- Primary focus is on state and local level policies
		- Meetings scheduled twice monthly
		- Lisa Pugh moving from a consulted role to an active member
		- Need for representation from an ILC
		- Peggy to be connector between this group and with Linda Hall and her group
* **Review updated engagement survey (Dan)**
	+ Now two different ways for people to join the group
	+ New version of survey is much shorter; deleted all open-ended questions; added phone number field
	+ Survey will continue to be open and available for people to fill out
* **Other possibilities**
	+ Carrie: Arts and public health
		- We’re meeting with new partners this week
	+ Importance of calling out specific populations
	+ What’s good for one is good for all
	+ How do we align with everything that’s going on, without boiling the ocean?
	+ How do we stay in the space of “Yes, and…..” ?
	+ Keeping these in the “parking lot” space – making sure all the voices are being heard
* **Jean:** WASC having their fall conference
	+ Possibility of someone from this group doing a presentation on Oct. 8 at 12pm
		- About 10 minutes for the presentation
* **Janet**: Also a presentation the week before at the Triad conference

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**Discussion Points & Considerations on 8/30/2021:**

* **Updates from the four Workgroups**
	+ Update from Policy workgroup meeting on 8/20 (Janet)
		- Met on 8/20
		- Helpful initially to figure out who wanted to be involved and who had changed their mind
			* Got a couple of individuals who didn’t want to be involved – one no longer in the same position, one no longer interested
			* Group that was met with is very ambitious – group wants to meet twice a month so setting a standing date going forward for the remainder of the year.
			* Overall discussion revolved around introductions and initial goal-setting
			* Reached out to Hmong contact to ask for input (not necessarily input just on policy).
	+ Update from Research workgroup meeting on 8/24 (Dan)
		- Three new people attending:
			* Laverne Jaros (WIHA Board) – worked on a program and particularly interested in measurement of programs
			* Elaina Andreychak (DHS) – epidemiologist but has worked with older adults and is also interested in measurement of impact
			* Kathy Gale – Exec Director of Eras Snr Network, experience running programs with seniors, in the middle of a PhD on a similar subject.
		- Role for this group
			* Discussed finding effective approaches and resources to measuring impact
			* Source/inventory for tools that are out there
			* Measurement/program standards
			* One person (UW Prof) hasn’t participated in a meeting yet but seems interested in actively conducting research – involved with State Medical Society.
				+ Thinking on a large scale – convening primary care clinicians to talk about how to work with individuals who ‘score high’ on a test.
	+ Preview of Resources workgroup meeting on 8/31 (Angie)
		- Focus on what organizations or individuals are not represented, identification of screening tools/interventions for this group to explore, other thoughts on directions this workgroup should take
		- Data collection discussion – how to collect accurate up-to-date information
		- Meeting for 90 minutes
		- Meaningful engagement, volunteering within ADRC, strong representation from disability community
		- Sent out a google forms meeting – healthcare, faith community were strongly represented.
		- Will talk about group goals and strategies – need to be more inclusive of disability and other groups
		- Starting to go through some screening tools
	+ Discussion on direction and coordination of workgroup efforts now that things are moving in multiple places
		- Now that things are moving in multiple areas – are there crossovers or ways to support each other yet?
		- Perhaps crossover between Research and Resources?
			* Screening tools to identify loneliness is a definite area of crossover.
* Website updates and next steps (Ana and Kris)
	+ Has come up several times in meetings as a side question ‘where can we access more info’ or ‘is there a website’.
	+ Long-term location and purpose comes down to what funding looks like – maintenance and updating takes time. If hosted by DHS, it means only DHS can update it.
	+ For now should the priority be keeping resources for in-Coalition people? Kris and Ana met – upshot was that if we’re looking for public-facing website it’s one thing. If it’s a resource location it’s easier and we could do it on a SharePoint site or WIHA webpage. If it’s public then we want to spend time on it and put it in the right place.
	+ Talked briefly about hosting basic information and data under HealthyWI page – some research and evidence and about others who are working in this space.
	+ Seems like we have some not-quite-ideal options without more capacity but it’s also becoming pressing. Lots of interest but there is no public-facing page. We need to move on this. What are the best options?
		- Creating a unique page or building on one on the DHS site (BCC=boards, committees, ?).
		- Quick page on WIHA site
	+ DHS option is actually halfway-completed already. DHS option would be temporary and then link to whatever other website is created. Highlighting the importance of this on the SHIP page.
	+ Roll out public-facing page on the DHS site. Intended to be temporary until more capacity is available and a suitable location is identified.
* Survey Updates
	+ Have seen several hundred people open the survey but not click through to enter information. Possible turn-off to see so much text at the beginning. Also formatted as an application (built off a survey for a different coalition that *was* and application) which is not really what people are doing.
	+ Spread text out – not blocks of text at the beginning.
	+ Dan to cut the survey down to a minimum amount of text and basic questions.
* Connection with other statewide Isolation/Loneliness efforts
	+ How do we figure out how to use synergies in different groups (OCMH Coalition, for example). ‘What are we really trying to accomplish?’ is still an open question.
		- How do we know whether we’re achieving objectives? How are we measuring it? How do we frame what we’re trying to achieve?
		- Hone in on this – something we need to do as a steering committee. What are we really trying to get to at a granular level – are we reaching people where they are? Raising awareness? What’s the change we’re trying to accomplish? Where’s the community work falling in?
		- It would be helpful to map the landscape of response to SI&L in the state to identify areas of need.
		- Still need to get to a shared measurement space.
	+ Commit to Connect – how can our Coalition best use this?
		- Lots of information out there on what this is but we should sign up to be able to utilize information.
		- Probably not necessary for everyone to sign up, as long as some of us are looking around and can share with the rest of us for the benefit of the group. Follow up with Sam b/c of AARP connection.
		- Janet – got a message from national coalition in July. If any member of the team is interested, join at the Commit to Connect website. Link to an application form.
* Next Steps
	+ **Ana** to work with Kris to prioritize finishing DHS-housed link and initial website for the Coalition.
		- **All coalition members** to send Ana ideas for content and format ASAP.
	+ **Dan** to modify engagement survey for Coalition review
	+ **Workgroups** – as meetings happen continue to think through how to brief the Steering Committee on activities and coordinate with other workgroups.
	+ **Amber and Maggie** – continue developing draft equity tool for workgroups to use.

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**Discussion Points & Considerations on 8/16/2021:**

* **Welcome and Introductions for New Members**
	+ Sally Flaschberger, Christine See
* **Updates from the Four Workgroups**
	+ Research and Share (Shannon)
		- Who within the field to invite, since this is a very small group
		- Make sure these are truly the right individuals to have at the table
		- Digging into resources that are out there
			* Help other groups to be linked to toolkits, etc.
		- Doodle Poll has been sent for people to respond to
			* Meeting likely will be early September
	+ Advocacy and Public Policy (Janet)
		- Sent out email to 12 people that expressed interest
		- Meeting will be this Friday Aug. 20
			* meet & greet; and talk about which direction we want to see the group go
			* Janet and Sam delighted to have this group’s first gathering
	+ Access and Detection (Dan)
		- First meeting was last week
		- Intros/Meet & greets
		- Sharing motivations to participate
		- Projections on what will take place at upcoming meetings
		- Make sense of where we are within the scope of the group
		- Angie Sullivan has a poll out to get next meeting scheduled
	+ Public Awareness (Kris)
		- Getting messaging together that we can deploy this fall
		- Resources that will be available to them
		- Not sure what the timeline is yet. Working on analytics before fully moving forward.
		- Figuring out how to best engage the 35 people who are or want to be part of this group
			* Integrate them by putting together subgroups to the Public Awareness group.
			* Lay out a timeline on how to deploy messaging
			* Dissemination of information
			* Need a repository for all of this material
		- Equity issues as part of messaging?
			* Do we adapt the messaging first, then send through the Research group, or vise versa?
* **Update from DHS and WIHA on Backbone Support**
	+ Really dedicated to the Collective Impact Model, which includes having a backbone support
		- We have all been sharing responsibilities thus far because none of us have fully had the resources
	+ DHS received approved funds to provide a full-time project management role to support the Coalition
		- This position will help take over the responsibilities that Dan has been doing, although Dan will continue with the Coalition for the time being
	+ WIHA has submitted an grant application for $75,000/year for two years to provide support to the coalition
		- Help develop a website and other resources, etc.
		- WIHA will find out more in the next couple of months if grant is approved
* **Update from DHS on Other Social Isolation/Loneliness Efforts We’ve Seen Around the State**
	+ Recent meeting with a group from the Fox Valley that has been working on this topic
	+ State Health Assessment (SHA) and State Health Improvement Plan (SHIP)
		- SHA provides input that is used to develop the SHIP
			* Maggie Northrop is a lead on this
		- Reviewed every five years, looking at health issues that need to be addressed
	+ Discussion on ways to partner/connect with others on these efforts
	+ Recognize what tools ADRCs can utilize to help their customers with this issue
		- Training, recognition, awareness
	+ We need to treat this like a movement or campaign
	+ Is there anything happening around caregivers and caregiver support in this area?
		- We have opportunities to strategize to help support caregivers
	+ Commit to Connect – they are currently taking applications to join this initiative
* **Next Steps to Creating a Website and Making Resources Publicly Available**
	+ How do we learn from what’s happening around the state?
		- The Steering group will be taking a look at this further
	+ Repository/Clearinghouse – can we capture this on something like Google Drive?
	+ Is there a way to develop a Listserv?
	+ Update on website development (Ana)
		- Website has been approved, but not yet created
		- Didn’t want to do a Listserv for it until we have a website for people to go to
		- DHS does not want to have a GovD if the information is not directly coming from DHS
			* We have confirmed we don’t want the Coalition to be ‘owned’ by DHS
		- What is the possible workaround?
			* Example: utilize how WisTech uses GovD to share out information from the AT Council
			* WIHA could set up a website
		- Idea is to not overload people with a lot of ‘stuff’
		- The things we push out are meant for people to be able to take action on
		- Is there a committee within the Awareness group to help develop the website?
		- Is the website meant for the coalition members to have/gather information, or is it meant for the general public?
			* It is meant for both
		- On the DHS side, there is some more autonomy that can go along with the Coalition, with adding a disclaimer that the information is not necessarily supported by DHS
		- Ana can assist with maintaining the website, even if hosted by WIHA, if that’s needed
			* Ana and Kris will set up a time to meet to discuss further

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**Discussion Points & Considerations on 7/19/2021:**

**Present:** Dan DeValve, Kris Krasnowski, Angie Sullivan, Shannon Myers, Amber Mullett, Tim Wellens, Maggie Northrop, Laura Plummer, Peggy Helm-Quest, Fiona Weeks

* **Welcome**
	+ Peggy Helm-Quest
		- Children and youth special needs program
	+ Fiona Weeks
		- Maternal and child health unit supervisor
* **Discussion about expanding scope of targeted populations**
	+ From pregnancy to about age 45 (mid-life adults, and teens)
	+ Promoting inter-generational social connections, especially around isolated older adults
		- Using collective impact model and leveraging resources
	+ Families don’t live in a vacuum
		- Many parents who are in older ages have children with special needs and may need support and resources
	+ Curious to know what Ellen Rozek would have to say about this topic
		- What are the natural ways to marry this
		- Inter-generational programming
		- What could we do collaboratively?
	+ SDOH – social connections work within inclusive communities
		- How they are welcoming and belonging among all populations
		- They have a role and purpose in their communities
	+ Yes, it would be good to have the perspectives of Peggy and Fiona based on the populations they work with
		- Would be helpful if Peggy and Fiona can provide feedback on their interest in one of the subgroups as well.
	+ Should we further define ‘people with disabilities’ within our scope?
* **Discussion on expanding workgroups**
	+ Logistics (email to new people, meeting invites, etc.)
		- Very few engagement surveys completed in the last few weeks (total of two new surveys)
		- WIHA – links to engagement survey going out in their newsletter this week
		- Tim will discuss survey and provide link during ‘Thursdays with AARP’ this week
		- Any challenges in setting up workgroup meetings with the new members?
			* Kris: Difficulty finding a common date/time to schedule initial larger workgroup meeting
			* Ana will help out in Kris’ absence
		- AARP providing market research to Kris
	+ Useful tools as we expand workgroups
		- Dealing with difficult people
			* We’re a new coalition and some new members are already challenging our wording and mission re: populations
		- Workgroup toolkit (shared by Angie)
			* Provide written expectations to group members
			* Example = respectful to all others
		- Other best practices
			* Angie sending Doodle poll and will schedule meeting based on majority, plus record it for those who can’t make it
			* All of us coming together to ensure we all have a common goal
	+ Equity tools; Lessons learned and tools used during COVID Response Task Force
		- * Are we designing for equity and inclusivity, and populations who are underserved and/or underrepresented?
			* How do we think about putting together our agendas?
			* <https://depts.washington.edu/uwmedptn/wp-content/uploads/Equity-Impact-Review-Tool-Rev-5-Sept-2020.pdf>
			* <https://www.raceforward.org/sites/default/files/RacialJusticeImpactAssessment_v5.pdf>
				+ ‘Meaningfully involved and equally represented’
			* <https://uwmadison.app.box.com/s/tdfjuq7impbyo1zbkbrjmluxbn3g2534>
				+ Decision-making tool; ensuring all correct people are around the table; safety considerations
* RFF Grant Application – WIHA
	+ Funding for a position to help with backbone organization
	+ Letters of Support from our partners
		- AARP; ADPAW; WASC; DHS; GWAAR; BPDD; WI Public Health Assn; Hospital Assn; GLITC; UW Extensions; Governor appointed councils; former Aging and ADRC directors; WPHA (Angie)
		- Kris will provide sample letter to everyone next week

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**Discussion Points & Considerations on 7/7/2021:**

**Present:** Carrie Molke, Dan DeValve, Jean Horner, Kris Krasnowski, Angie Sullivan, Cody Michels, Janet Zander, Sam Wilson, Sara Richie, Shannon Myer, Amber Mullett, Tim Wellens, Maggie Northrop

* **Overview of PowerPoint for July 8 Orientation –**
	+ 65+ people expected to participate in orientation
	+ Kris/Dan may be able to make the PP look more cohesive, but if not, no big deal
* **Review PPT and Presentation Roles**
	+ Carrie will be emcee and welcome people, and Coalition will do quick introductions of each of the four subgroups
	+ Workgroup PP sections, Presentation Roles (public awareness, research & share, detect & respond, advocacy)
		- 1-9 overview
		- 10-17 engagement
		- 18+ tools and resources
		- Generate public awareness at the ground level is important to make an impact
			* Early “Letter to the Editor” that Kris created
			* Discuss the ads created for addl. awareness
		- Shannon first
		- Janet second
		- Angie third
		- Kris fourth
		- Sam fifth
		- Carrie last
* **Tech Support**
	+ Recording: Cody/Dustin
	+ Closed Captions: Laura Plummer
	+ Chat monitoring: Tim
	+ Mute/Unmute: Tim
	+ Taking/Answering Questions:
* **Post-Call**
	+ How do we leave it?
	+ You can expect to hear from the chair/co-chair of the group you expressed interest in

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**Discussion Points & Considerations on 6/21/2021:**

**Present:** Janet Zander, Tim Wellens, Carrie Molke, Dan DeValve, Laura Plummer, Angie Sullivan, Kris Krasnowski, Ana Hovde, Jean Horner, Sara Richie, Maggie Northrop, Ana Hovde, Shannon Myers, Peggy Helm-Quest; Shawn Meyer; Anne Odusanya; Fiona Weeks

* **Overview of Survey Results: Update**
	+ 137 total
	+ 47% of respondents want to be actively engaged
	+ Responses from people with racial diversity have been very limited at this point
		- How do we get more people from diverse backgrounds involved?
		- Info was sent to Minority Health Advisory Council, but did not get much of a response
* **New Member Orientation**
	+ Setting date/time
		- Thursday July 8 at 9:00
			* Make sure Ellen and Sam are available for this date/time – Tim f/u
			* Who will send invite?
	+ Format of presentation
		- Part presentation; part discussion
		- Ensure the recording has embedded captions – Laura will assist with this
	+ Materials: PowerPoint, anything else?
		- Sam is working on compiling the PowerPoints into one for the orientation and will send out soon
	+ Presenters and roles
		- Idea of everyone on core team having a role as presenter
		- Carrie, Amber, Maggie, Tim, Dan (core project mgmt. group)
		- A co-chair of each workgroup be presenter
			* Sam/Kris; Angie/Sara; Ellen/Shannon; Janet/Sam
		- Jean Horner
	+ Recording and process for future orientations
		- Send recording out to all who completed the survey
		- Where will recording be available going forward?
			* Possibly on YouTube (DHS or WisTech AT Council)
			* DHS Livestream/Vimeo
				+ Connect with Cody Michels/Dustin Mullett at DHS to get more clarification on this – Laura f/u
	+ Post-orientation steps
		- When people complete the engagement survey, it sends them an email with their survey info PLUS a link to the orientation recording
* **Workgroup Next Steps**
	+ Training of new members on how to actively participate and engage in their workgroup – Tim will send tools out to Coalition members
	+ Awareness group: working on getting feedback from messaging
* **Connections with Populations Beyond this Coalition**
	+ Should we expand targeted populations that this Coalition is working with, beyond people with disabilities and older adults?
		- Lifespan approach
		- Multi-generational approach
		- Inclusivity of all ages
	+ Connecting with other groups that are working on social connectedness, etc.
	+ More targeted outreach to faith-based groups
* **Next Coalition Mtg (for orientation presenters)**
	+ Tues July 6 10a-11a (or July 7 at 10a-11a) – Tim send Doodle Poll

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**Discussion Points & Considerations on 6/7/2021:**

**Present:** Janet Zander, Tim Wellens, Carrie Molke, Laura Plummer, Angie Sullivan, Kris Krasnowski, Ana Hovde, Jean Horner, Sara Richie, Sam Wilson, Maggie Northrop, Amber Mullett

* **Kris gave plug for work on social isolation during the Healthy Aging Summit.**
	+ People are really looking for resources.
* **Scheduling and Planning the New Participant Orientation Call**
	+ We are up to over 110 survey responses, and a number of those want to actively engage!
	+ Dan sent all survey respondents an email last week
	+ Decide date (late June)
	+ Decide on delivery method
		- Mostly pre-recorded with in-person option for those who can make it?
		- All pre-recorded using PPT we have from recent speaker sessions?
		- Messaging group will take the lead in combining the PPTs together
			* Carrie, Janet, Angie, and Kris will send their PPTs to Sam
			* Ana will review the completed PPT for accessibility
			* Bio of the coalition is important
				+ “We can’t end isolation in isolation”
			* The orientation will be 45-60 minutes, and will be recorded
		- The PPT and recording will go out to others later
	+ Logistics for recordings
		- Amber to consult with Dustin regarding the logistics of recording the orientation
	+ Who will be presenters?
		- Carrie
		- Have good representation of different ethnic & population groups
* **Potential grant/funding opportunities (Kris, Carrie)**
	+ Talking internally at WIHA, including w/ Dave Nelson (new Exec. Director)
		- COVID impacted so many in how we do business
	+ WIHA thinks they may be a good backbone for this work
		- What does it take to be sustainable and maintainable?
		- What would it mean for WIHA to be the backbone?
			* Supporting the work of the coalition
			* The work will remain collective impact
	+ Looking at writing to Retirement Research Foundation
		- Still need to look at funding sustainability for long path
	+ Feedback from Coalition members
		- WIHA does such great work, this is a great fit
		- Work is consistent with the mission of the coalition
		- This fits with them wanting to be part of collective impact model
		- DHS did not want to be backbone, and we appreciate the framing from WIHA
		- Backbone organization will need to have someone attend all of the small group meetings (like Dan is doing currently)
* **Data and Research Team**
	+ Jean asked if we could reach out to a corporate entity like Walgreens or Target for a fundraising opportunity
	+ Possible advocacy opportunity from COVID funding
		- Looking at ways to utilize that to target those who have been most impacted
	+ Volunteerism
		- Looking to engage volunteer organizations
		- They could engage those who are lonely and isolated
* **Continuing discussion on establishing a website**
	+ Regarding DHS giving this coalition space on the website, Ana has not heard anything back yet from Claire Yunker
		- Ana to draft another email, then Carrie will send it this time
	+ Ana is thinking her role with managing the website would change if WIHA becomes backbone organization
* **Strategic discussion on goals/objectives/direction of workgroups**
	+ For all workgroups and their new members, identify the strategies and tools (i.e. equity review tool) needed to be available after the big orientation meeting in late June
	+ Lots of overlap between Access and Detection group and Research group
		- Should these two be combined or kept separate?
		- What is the division of work between these two groups?
		- Could the Research group members be divided up to help support the research in each of the other groups?
		- Maybe we need to take a ‘both/and’ approach with this
	+ Comms
		- Kris: nothing new to report, and she will schedule a meeting
	+ Resources
	+ Research
	+ Policy
* **Strategic discussion on broader coalition environment and synergies with other ongoing efforts in the state**
	+ Lots of Public Health folks who are really interested and want to be part of coalition
	+ Look at what other health depts. are also interested in social connectedness
	+ How arts and health connects people within our communities
* **Parking Lot Item**
	+ We as a state really need to come together across all populations to end social isolation and loneliness
		- Does this coalition expand at some point to include all populations?

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**Discussion Points & Considerations on 5/17/2021:**

* **Workgroup Updates**
	+ **Kris**
		- Focus groups
			* Give us your conceptualized ideas, we’ll share those out and get feedback
		- Share some ideas/designs around messaging to help people find ways to get connected without using the terms ‘isolation’ and ‘loneliness’
			* “Feeling Disconnected?”
				+ Unplug from your screen and Plug into your community!
			* “What Fills Your Bucket?”
				+ Doing good makes you feel good!
			* The designs have same message, but different images in order to appeal to diverse groups of people
			* Images and messages are intergenerational
			* Outcome is meaningful connection
				+ Help recruit volunteers; healthy connections workshop; what fills your bucket?
			* Can we take these messages out and share with our communities of color?
				+ Ideas to reframe the message?
				+ Activities that we list are culturally sensitive
			* Share the feedback with AARP
* **Survey Results and Action Items for Follow Up**
	+ 74 surveys submitted so far
		- Of those, 27 people want to be actively involved
		- Dan created resumes for the 27 people who want to be actively involved, based on their priorities of which workgroup they listed
			* 10 Awareness; 5 Research; 8 Resources; 4 Policy
	+ Not great demographic diversity (69 of 74 identify as white)
		- We forgot to include Native American as a demographic option on the survey
		- Ana will add this to the survey
	+ Great geographic diversity!
	+ We know there are other people who want to engage in the Coalition, and the survey information was sent to them just last week.
		- We’re anticipating more survey responses in the near future
	+ Healthy Aging Summit – the survey will be mentioned during then, and will very likely draw more participants
	+ Targeted outreach is important in order to have more specific participants
	+ Folks interested in research may not fully understand what the research work actually is
	+ Dan: Suggestion to have each workgroup look over the list of resumes he put together
		- Put together a list in order to invite and/or approach those people
	+ Invite all active participant respondents to an upcoming Coalition meeting, as a kickoff meeting
		- Introductory letter to them first
		- Discuss expectations with them so everyone is on the same page
		- Have kickoff meeting after providing introductory letter. Then, as other new members come on board, each workgroup would meet with them, and could utilize a PowerPoint presentation for them
			* Kris, Angie, and Carrie have PowerPoint drafts in progress that can be used by the workgroups, and will compile them in the next few weeks/by end of June
		- We can record the Zoom meeting and provide that to new future participants
			* Send this to new participants
			* Include a follow-up survey that would flush out questions that they may have, and identify their level of excitement regarding engagement
			* Have the survey set to send to the respondent their responses via email after they submit it (so they recall their responses, including their preference of which workgroups they picked)
			* Request a GovD topic for the full Coalition; distribution lists
		- Dan will draft emails to send to the new participants
* **Sign-on Concept**
	+ Sign onto the mission, and joining the Coalition
	+ Those individuals would need something concrete to know what they are signing onto
* **Website Discussion**
	+ This is where the sign-on would be located
	+ Idea: Use the Healthy Wisconsin state website as a landing place
		- <https://www.dhs.wisconsin.gov/healthywi/index.htm>
		- We already have permission to use this website
		- It will make a connection to the State Health Plan
	+ We’ll need to discuss with the DPH Comms folks regarding decisions on branding, etc.

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**Discussion Points & Considerations on 4/19/2021:**

* **Workgroup Updates**
	+ Public Awareness group update
		- Brief on focus group options/services available to the Coalition at AARP. Initially envisioned to focus group some of the Public Awareness workgroup’s ideas but potential for other uses for the Coalition in the future. Use lightly – a few times a year.
		- Reviewed messaging ideas – the idea would be for partners statewide to take these ideas, tailor them, and use them to promote social engagement
			* Bet intentional about small “superficial” connections
				+ The idea would be to encourage people to take advantage of those small interactions throughout the day.
			* Rebuild/reengage your network
				+ Plug back in/dip your toe in
				+ Include a visual and a short message, and a space for a local partner to plug in their own information.
				+ Really important to be able to personalize these.
			* Challenges to reengage with people
				+ Multivitamin to reengage, brush up on social skills. Put in effort to interact again (not implying that they don’t know how).
			* Growing your community / Volunteer
				+ Gardening is effort so this would be a good visual to use.
				+ Emphasis on volunteering and the reciprocal nature of that.
				+ Find something you love and share it with the community.
				+ Not really mentioning loneliness at all; emphasis on positive impact of social engagement.
	+ Synergies/Overlap between workgroups
		- Start thinking about overlaps between workgroups. So far not a huge concern but start thinking about how workgroups can work together more.
* **Survey**
	+ Survey Distribution
		- Tim sent to Sara O’Donnell (owner of forum list)
			* Will go out to ADRC directors; aging units; tribal independent partners
		- Janet
			* BagerAgingList,
			* Inclusa,
			* Disability Services,
			* WAAN (will loop in SCs),
		- Carrie
			* Several individuals have requested the survey
		- Angie
			* WPHA,
			* Wisc Hospital Association,
			* UW-Madison Extension
		- DHS
			* Send to DCTS to send to mental health network
			* Curtis’ team
			* DQA
			* Gale (Tribal Affairs)
			* Health Equity Advisory Team
		- Maggie
			* Public Health
		- Jean
			* WASC
			* Senior Centers
		- Posting on DHS Website?
			* No.
		- Underserved groups
			* Paula Tran Inzeo – Mobilizing Action Towards Community Health
			* T.R. Williams (LG Office)
			* Tribal members can hear about it from several paths – that’s good!
			* Angie (CEO of free charitable clinic – maybe forward on to distribution list)
	+ Survey Evaluation
		- Key ideas:
			* Everybody is a ‘yes’. Workgroups given flexibility in determining *how* to plug people in, but we’re not turning people away.
		- Release and timeline
			* Release – it’s live now.
			* Send out to networks, make available to anyone.
			* Initial download of results in three weeks.
			* Won’t close the survey. We can continue to send links and incorporate new people as we go forward. Periodic monthly downloads to evaluate new responses.
		- Results and review process
			* May 10 – Results downloaded into a spreadsheet.
			* DHS team organizes raw results to delete material that isn’t needed and organize everything into a user-friendly format (including sorting by each responder’s priority workgroups).
			* Analysis of response volume, which helps us decide how much effort the workgroups will need to put in, whether we need to try to distribute participation more evenly, etc.
			* Coalition sends email response to those who don’t want to participate in meetings.
	+ Workgroup tasks
		- Workgroups review the results and discuss how and when to plug people in.
		- Workgroups conduct outreach to engage individuals who want to be directly involved.
* **Coalition strategy discussions**
	+ Funding
		- Potential options with ARPA funding or grants on related topics.
			* DHS is working on securing funding for this coalition to support our efforts. Discussions are currently within DHS – making the case for this work – and have not been written into a grant application yet.
			* Propose some infrastructure development (website) and project management costs.
			* 2-yr grant. Want to make sure we’re not starting major projects that drop off when grant funding runs out in two years.
		- Sustainability is crucial if we’re wanting partners to use us as a source of information and support.
	+ Infrastructure Development
		- Website/Sign-On idea
			* Free domains –
				+ May charge for hosting or is a free builder but then you’re paying for domain (DHS can’t do that)
				+ Ad revenue is sometimes a factor (DHS also can’t do that)
				+ If it’s a new ‘free’ website, someone else needs to own it.
			* Could host it on the existing DHS site – but would then be DHS-owned
			* Would it be possible to have it be something that lives outside DHS?
				+ Yes, but capacity is limited to start it and sustainability is harder than starting.
			* Where does this live and how do we build the infrastructure there to keep it going?
				+ Maybe not one natural home for it but we do want it identified with a host.
				+ Maybe we ask people – where would you want to look for something like this? Where would you want to put it?
				+ All consider where it makes sense to live. WIHA? But coalition is not just about healthy aging. AARP not an option for a third-party org – it would have to be AARP owned and branded.
				+ Separate domain doesn’t necessarily need to have direct connection to an organization if someone is going directly there. But it does dilute the message when it’s embedded with other stuff.
			* $50-$75K to set up a website?
				+ Basic website cost is much lower than $50K but communications, staffing, other support may reach that.
				+ Upkeep is cheaper than starting.
			* Wisconsincaregiver.org is a solid precedent/example for us. It was started with grant funding and transitioned to live with GWAAR.
			* Park this. Have a strategic conversation about ownership and wait to see if grant funding discussions result in $ to help establish a website.
	+ Workgroup strategy development
		- Metrics/Measurements
			* Coalition metrics and big aims that we’re all shooting for
				+ “Collective outcomes”
			* Need to standardize outline these measurements
			* Workgroups will also focus on their own strategies

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**Discussion Points & Considerations on 4/5/2021:**

* **Update from Public Awareness workgroup**
	+ Discussed role Public Awareness group plays in reaching policy makers. Reaching policy makers is important but is best left to policy workgroup, who can bring in Public Awareness workgroup as needed.
	+ Discussed theme ideas:
		- “The pandemic is easing. What will you do now?”
		- Mental health challenges
			* Ellen: “Your Personalized 30-Day Social Skill Challenge”
			* Kris: “Feeling Disconnected? Plug In!” (“Plug back into life!”)
			* Examples shared by Ellen and Kris are both visual and eye catching, they reach out to our target audience, and it gives partners something to do.
			* Combination of challenges, vs. teamwork
				+ Encompasses different approaches to appeal to different cultures, age groups, abilities.
				+ It would be great to come up with some type of metric across the state.

Ex: one day challenge to see how many calories each county burned, which equates to total number of pounds lost in each county

* + Discussed having AARP look into focus groups to try out some of these ideas
		- Sam did talk to AARP research team and is meeting with them tomorrow to discuss the possibility of doing some focus group/ directed listening events for the coalition.  Mostly gauging capacity in this first meeting so may need to bring others in for a follow-up on details.
* **Update from Research workgroup**
	+ We understand the problems of social isolation and loneliness but haven’t quite articulated in terms of ‘why are we here?’
		- It might seem obvious to us that isolation and loneliness are problems but it’s important to cite the public health issues associated with isolation and loneliness, emphasize how widespread this is, and point to what we’re doing in positive terms – improving social engagement and bringing together a variety of partners in the state. All supported by research.
		- Research workgroup starting to put together a narrative for the group to review.
	+ Along the lines of ‘why are we here’ we also touched on measurements and metrics, which are an important part of a collective impact approach.
		- We have a high-level mission to combat isolation and loneliness and four focus areas or aims, which are good, but what does it mean for the coalition to be successful? What outcomes are we seeking?
		- Measurements here refer to planned outcomes and measurable indicators to support the desired outcomes. Can be external and ambitious, like reducing loneliness among x population, or internal and somewhat easier to measure.
			* For example, a desired internal outcome might be to make sure we’re including in this group a diverse set of voices and perspectives.
			* Indicators to support this outcome could be that the target population helps shape our agenda, or that the core group and all workgroups include voices from all relevant sectors and constituencies.
			* The outcome of reducing loneliness is difficult (maybe impossible?) to measure. Would it be valuable to measure something that correlates with loneliness?
			* Uptick of organizations that are engaging in this work could be measurable
	+ Might be valuable to have broad metrics for Coalition and more specific metrics to gauge progress of each workgroup.
		- Indicators/metrics also help each workgroup to manage scope
	+ We can rely on national data, or at least examples of metrics used by other coalitions using a collective impact model.
	+ It’s fine to adjust as the coalition matures, but need to establish them and monitor progress on them.
	+ The aims are helpful and have allowed us to set up workgroups but setting desired outcomes helps the coalition and each workgroup to focus on goals and understand scope.
* **Survey Status and Timeline**
	+ Translating now; done with that process next week and should have a final version ready to send out shortly after that. Survey should be completed NLT April 16.
	+ ASL translation not embedded in the survey but the idea is to have a translator available on an as-needed basis for individuals who request it.
	+ Survey includes a question about any accommodations a person would need if/when being engaged with the coalition

* **Project Management Updates**
	+ Tim will be presenting about the Coalition during the Aging and Disability Network Forum on Wednesday 4/8
		- Including introduction about the Partner Engagement survey
		- Carrie and Janet will also say a few words about the coalition
	+ Coalition meetings will be scheduled for the 1st and 3rd Mondays of each month, 3p-4p
	+ Update re: grant opportunity from ACL
		- Research-based grant, 5 years @ $500,00 per year
		- Awarded to one prime organization
		- DHS still considering at the moment

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**Discussion Points & Considerations on 3/15/2021:**

* Review Workgroup Progress
	+ Public Awareness Workgroup
		- Review final 1-pager
		- Review Themes discussion
			* Theme ideas
			* Messaging ideas
			* Logistics
			* Timelines
	+ Partner Engagement
		- Update on email sent to individuals who reached out to Coalition
			* Jesi Wang (MetaStar)
		- Coordination with other initiatives/individuals in DHS
* Partner Engagement Survey Review
	+ Distribution
	+ Evaluation of results
		- Responsibility
		- Format
	+ Engagement structure
	+ Open questions
	+ Quick review of questions (#9 and #10)
	+ Timeline
* Next Steps

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**Discussion Points & Considerations on 3/1/2021:**

Partner Engagement Group: last meeting was 2/22/21 with Amber, Carrie, Dan, and Tim

1. TR and Paula Tran Inzeo had some great insight into what the group is really working to accomplish. People from an outsider view are asking what the coalition is trying to accomplish. What is the overall goal? What are we shooting for? What is the data landscape component?
2. Some folks have reached out to us and expressed interest. We have now reached out to them in order to get back to them.
3. It’s important to continue to expand the different groups that we have and keep the momentum going. A survey will be sent out to them, and have each respondent pick out the areas that are of most interest to them.
	1. After they complete the survey, they can engage in the small workgroups, or a group that we can consult from time-to-time, or they can be added to a group that is simply kept aware of progress.
4. Amber is meeting with Maggie Northrop on Tues. 3/2 (Maggie = DPH, State Health Assessment and 5 year state health improvement plan). Social cohesion, social determinants of health. Connection to community helps people determine how to live fulfilled lives. Statewide public health policy moving forward. From Maggie, there is a desire to participate = collective impact strategy.

Raising Awareness Group: last meeting was Ellen, Kris, and Dan

1. Looked at the one-pager that Kris drafted
	* Have a central person to collect all of the contact info?
	* Is the theory that someone gets in contact with one of the core team members, then they have been connected with the group?
	* “How do I join” section at the bottom – further discussion needed
		+ Leave blank until the survey is ready, and then we can add that info
	* Will this document indicate the level of engagement, or get them to the link of where they can complete the survey to indicate their level of engagement?
		+ Do we have loneliness data on people with disabilities?
		+ Ellen has a number of data points to share, and will add them to Box online for people to look at
		+ Founding Organizations vs. Steering Organizations
			- The group so far are founding organizations
			- We’ll add more organizations, and they can be steering organizations
		+ “UW-Extension” should state “UW-Madison Division of Extension”
		+ Is WASC wanting to be a founding organization?
		+ Ellen will follow up re: UW-La Crosse as a founding organization
		+ Laura ‘played around’ with the pdf, and it can be made accessible without difficulty before it going out
2. Continued talking about the themes idea. Kris brought up that it would be good to **do some market research** first, to know how different themes resonate with people. Do focus groups with people. Recognize how much a message resonates with people in the community. Market research = How to share some of the messaging and imagery we have developed, and what is their reaction to it, without them knowing that the target is social isolation.
3. Communication infrastructure. It’s great to have the Box site. We need to have a **website**/public landing space to be able to point people to. Laura is still working on getting that information pulled together for the large group, and can have for the group within a week or two.
	* Example website: <https://connect2affect.org/> - this is a group that Sam and Carrie joined recently
	* Example website: <https://www.endsocialisolation.org/> (Coalition to End Social Isolation & Loneliness)
	* We don’t want to reinvent what is already available

Review of Backbone Organization Structure:

* Description of the backbone organization in terms of what it needs to accomplish
	+ Everyone has some time to commit, but not enough to be the primary backbone entity
	+ Right now, we’re all taking pieces of four out of five structures
		- The remaining piece is funding
		- Funding is needed for backbone, but also for our ongoing support and work that we’re doing
		- We have all the facts that we need, but we need to focus more on the vision component
	+ Finding the deliberate backbone organization is jumping out within the document.
		- Really lean in and not have these opportunities land on the State. Good to call out the different perspectives. How do we keep building on what we have without that backbone support in place?
		- This document provides the understanding of what we really need for the backbone infrastructure. None of us within the Coalition have the time to dedicate to being the backbone.
		- Grant opportunities?
			* Sara – gets different emails with funding opportunities. She’ll take a look back in her emails.
			* Shannon – ACL and NCOA might have some opportunities, and she will look into these. Might have connections within CARN to look into as well.
				+ Also Carghill Foundation
			* Kris – maybe look into Bader Philanthropies.
				+ Betsy followed up with Helen already, and Bader has already funded a number of other initiatives.
			* Kris – look into
			* Carrie – Johnny Hartford?
			* Amber - <https://www.med.wisc.edu/wisconsin-partnership-program/community-grant-programs/#impact>
		- Amber – how can we use this time to pitch/sell/explain in order to address community resiliency for COVID recovery?
			* Epidemic of despair among certain population groups
		- Carrie – American Rescue Act – how to tie our work with this. Data pre-COVID vs. post-COVID
	+ Elevating the social isolation/loneliness issue within demographic groups is only going to benefit and raise more awareness
	+ Include data that is going to give us the ‘biggest bang for our buck’ when it comes to looking into funding sources
	+ From Amber: <https://www.i-p3.org/post/a-new-method-for-measuring-thriving-struggling-or-suffering?utm_source=IP3+Apps+Newsletter&utm_campaign=90b86e9617-EMAIL_CAMPAIGN_2019_10_01_05_35_COPY_01&utm_medium=email&utm_term=0_aa81ab188c-90b86e9617-274199769>
	+ From Janet: <https://wellbeingtrust.org/areas-of-focus/policy-and-advocacy/reports/projected-deaths-of-despair-during-covid-19/#:~:text=Alongside%20the%20thousands%20of%20deaths,Center%20for%20Policy%20Studies%20in>

Other

* Angie – are we missing anyone else from this list? Possibly within long-term care community?
	+ Carrie: Yes, please reach out to them. Maybe wait until the survey is ready.
	+ Sara: Can reach out to Diane Farsetta as well.
* Carrie: Survey is meant to be sent out far and wide, and will help identify where we have gaps.
* Amber: social isolation/loneliness within congregate settings.
* Kris: Healthy Aging Summit June 2-4
	+ Opportunity to get our message out there and impact this group!
	+ Panelists? Sam and/or Ellen?

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**Discussion Points & Considerations on 2/5/2021:**

1. **Recapped activity on the four working groups:**
	1. **Raising Awareness Workgroup:**
		1. Reviewed workgroup discussions on themes concept and timeline for that idea.
		2. A key part of the discussion is to source ideas and activities that are currently in use. What seems to be working already? Not necessarily evidence-based but at least a stopgap and would elevate action items currently being used to address this issue. Could even come up with a way to recognize communities or organizations doing something unique.
		3. Potential funding opportunity related to this effort from Christopher and Dana Reeve Foundation: <https://www.christopherreeve.org/get-support/grants-for-non-profits>
		4. **Action items;**
			1. **Begin to flesh out themes idea. Others from the coalition invited to join the Public Awareness workgroup meeting on 2/9.**
			2. **Discuss ways to bring new people up to speed on the coalition’s goals, mission, and activities to date. Could include a one-page, a powerpoint, or even a short video introduction.**
	2. **Policy Workgroup:**
		1. No meeting since the last coalition meeting. At this time we’ll plan to wait and see best ways this group can contribute to the overall goal.
		2. The open question is “what is the role of advocacy in all of this and how does it relate to decreasing loneliness?” This is also a question at the national level so focusing on some of our other priorities makes sense. Adding additional people/expertise to the group may also provide momentum, answer some of these questions.
		3. Janet pointed out that policy conversations are happening outside this group that address this issue, though most of those conversations don’t expressly focus on social isolation and loneliness. There is broad recognition in policy circles that social isolation and loneliness is a pressing need.
	3. **Research Workgroup:**
		1. Welcome to Shannon!
		2. Update on the Research workgroup meeting:
			1. Reviewed and revised the group’s overall mission
			2. Scaled the mission back somewhat to focus on creating a repository of information to supplement efforts by other working groups. Can answer specific questions from other groups, find research to support various initiatives, talking points, policies, or activities.
			3. No objections to adjusting the mission.
			4. Also discussed the need to establish a centralized location where we can all access documents, including meeting notes, resources, and research.
			5. The workgroup also discussed the need for support from the coalition on partner engagement efforts.
		3. **Action Items:**
			1. **Sara set up a Box account but there are access issues for DHS staff. Dan to check in with IT to see if DHS can have access; report out at next Research workgroup meeting.**
			2. **Public Awareness workgroup discussed the need to learn more about common barriers to reaching out for people who are isolated and lonely. Why don’t lonely people engage when there are engagement opportunities available?**
	4. **Resources Workgroup:**
		1. Sara shared resources from the UW Extension survey of partner organizations asking how communities have responded to social isolation and loneliness during the pandemic and what lessons can inform community efforts going forward. Survey link: <https://aging.extension.wisc.edu/articles/pandemic_programming_report/>
		2. Webinar by Kristin Litzelman (Assistant Prof and Extension State Specialist) on Addressing Social Isolation and Loneliness. If you haven’t had a chance to watch, this is a great overview of the partner survey. <http://www.ncran.org/webinars/archive/>
		3. State-by-state information on social isolation an loneliness for older populations: [https://www.americashealthrankings.org/explore/senior/measure/isolationrisk\_sr/state/WI](https://secure-web.cisco.com/1pUoizZpjOP1LEGa1-7kBmvXr4W_xsdRN5ZBBvFXeqsSPhcHcazyGNPCpvFP2QUOLgOuVJo62n7U0JoLsaHpaXSoCeDgQS3DCs13Yu-SESBZ5NH1fTJSpan2buLAStu4XkBqB0yinqPe6w8iS6neoeWzh3zYlGIdr6evsd6w-9FnztuAQjbilOrKNvtJROVJj_AUUBTpq9Vs7ei59pWScSjG-R2E4hOnt_bKLWJSPS3t90E2elRffU_rHzxufnuc83owDTOEzDrK3CnYi5gFrcn1kXFvrTIZSMdS30bY_5meG6FlP_cUA6_6OxPpLbDA7EEmxzHvgCQecwV5AlicWwqQbr_FiRJwx1ku8CSNKKMY/https%3A//www.americashealthrankings.org/explore/senior/measure/isolationrisk_sr/state/WI)
2. **Other Conversations**
	1. Carrie and Sam invited to join a conversation with the Administration for Community Living and other national-level organizations.
		1. Presented some of Wisconsin’s activities and ACL used some of our aims/goals as an example.
		2. The ACL effort is very early and the goal is to create a clearinghouse or repository for resources, research, and best practices.
	2. Amber discussing the group with Paula Tran Inzeo and Lieutenant Governor’s Office – advice conversation specifically on how to expand the reach.
	3. Amber also discussing a potential funding opportunity with AmFam Insurance.
3. **Partner Engagement**
	1. Recognized the need to get back to individuals/organizations who have expressed interest in joining the group over the past few months. Some of these deserve immediate attention. To keep momentum and include individuals we know fill major gaps, the group agreed to send out an email (from DHS) to this group outlining the coalition’s goals and workgroups, and asking individuals to clarify availability and areas of interest.
	2. A small group met to discuss partner engagement on the 27th. Reviewed a survey tool used by the Dementia Coalition to engage people in workgroups and expand the network.
	3. Survey was designed so that respondents could be evaluated and plugged in to a workgroup, retained as ‘consultants’, or retained as network partners who would receive information from the Coalition. Since the structure is already in place this seems like a great tool for us to follow.
	4. We can expand on the survey idea to include a sign-on where we ask for a commitment (time, network, best practices, or something else) from survey respondents and in that way build a more active and engaged network.
	5. Emphasis that clear and consistent communication is important in this process.