**1. Purpose**: The Community Health Council (CHC) exists to serve as a formal advisory body to Del Puerto Health Care District (DPHCD). Its primary role is to provide community-informed input, offer feedback on healthcare improvement initiatives, and serve as a liaison between the District and the community it serves. The CHC ensures community voices are represented in strategic decision-making to improve local health outcomes.

**2. Mission**: To build trust, foster collaboration, and amplify the voice of the West Side community in shaping the future of health and wellness through inclusive, informed, and consistent dialogue with the Del Puerto Health Care District.

**3. Scope and Responsibilities:** The Community Health Council will Serve as a bridge between the District and community stakeholders. Provide feedback on strategic priorities, plans, and programs, including telehealth, urgent care, behavioral health, and chronic disease management initiatives. Help disseminate information about District initiatives to the broader community. Recommend outreach strategies to engage underserved populations. Review and advise on results from the Community Health Needs Assessment (CHNA) and Town Hall meetings. Participate in the review of new programs, services, and partnerships related to community health improvement.

**4. Membership**

**Composition:** The CHC shall consist of **9 to 15 members**, representing a diverse cross-section of the community, including but not limited to: Residents from each geographic area served by the District; Representatives from education, business, faith, and nonprofit sectors; Youth and senior representatives; Representatives of underserved and underrepresented populations; Local healthcare providers and public health professionals.

**Eligibility** Members must live, work, or serve the community within the District’s sphere of influence.

**Selection Process:** Members will be recruited through a transparent process led by the CHC Formation Task Force and DPHCD staff. Final appointments will be made by the CEO or a designated selection committee.

**Term Length:** Members will serve two-year terms, with the option for renewal. Initial appointments may be staggered to ensure continuity.

**5. Leadership Structure:** The CHC will elect the following officers annually

* **Chair** – Facilitates meetings, coordinates with District staff, and serves as the Council’s primary spokesperson.
* **Vice-Chair** – Assists the Chair and assumes duties in their absence.
* **Secretary** – Maintains records of attendance and meeting notes.

**6. Meetings:** The CHC will meet **quarterly**, with additional meetings scheduled as needed. All meetings will be conducted in a hybrid format (in-person with virtual options) to ensure accessibility. Agendas will be published in advance, and meeting summaries will be made available to the public.

**7. Decision-Making:** The CHC operates as an **advisory** council. Decisions and recommendations will be made by consensus or majority vote and submitted to the DPHCD CEO or designee.

**8. Communication and Transparency**

* A secure online platform will be established for Council communications.
* Meeting summaries, updates, and recommendations will be reported to the Board of Directors quarterly.
* Council members are expected to maintain regular communication with the constituencies they represent.

**9. Code of Conduct:** CHC members will Treat all participants with respect and professionalism; Commit to attending scheduled meetings and actively participating; Represent the interests of the entire community, not only specific groups; Maintain confidentiality when appropriate.

**10. Evaluation and Continuous Improvement:** The Council’s activities and effectiveness will be reviewed annually. Feedback will be collected from Council members and DPHCD leadership to assess engagement, community impact, and areas for improvement.

Submit you interest at dphealth.org