|  |  |
| --- | --- |
| Purpose of Meeting  | What is the purpose of this Community Advisory Meeting?  |
| Meeting Objectives | * A
* B
* C
 |
| Date / Time | m/dd/yyyy\_\_\_ - \_\_\_am/pm MST | In person meeting location: |
| Link to join virtually: |
| Meeting Roles | Facilitator: Name, Organization | Timekeeper: Name, Organization |
| Notetaker/Recorder: Name, Organization |  |
| Attendees | * Name, Organization
* Name, Organization
* Name, Organization
* Name, Organization
 | * Name, Organization
* Name, Organization
* Name, Organization
* Name, Organization
 | * Name, Organization
* Name, Organization
* Name, Organization
* Name, Organization
 | * Name, Organization
* Name, Organization
* Name, Organization
* Name, Organization
 |
| [See IV. B. Community Advisory Meetings](https://hcpf.colorado.gov/sites/hcpf/files/Ongoing%20CHNE%20Requirements%20Mar%202022.pdf)(Regional Accountable Entity (RAE); existing advisory committees such as Regional Accountable Entity (RAE) Program Improvement Advisory Committees (PIACs); Local Public Health Agencies; Mental Health Centers; Community Health Centers, including Federally Qualified Health Centers and rural health centers; Primary Care Medical Providers; Regional Emergency Medical and Trauma Services Advisory Councils (RETACs); Long Term Service and Support (LTSS) providers; consumer advocates/advocacy organizations; health alliances; community organizations addressing social determinants of health; representatives of any stakeholder category that are impacted by, or relevant to, HTP initiatives) |
| Motivating Vision | What does the hopeful future look like for your community members when your community advisory team continues to work and grow together to accomplish shared purpose? |
| Meeting Norms | * A
* B
* C
 | * D
* E
* F
 |
| Resources used and/or referenced in meeting | * Website(s)
* News article(s)
* Document(s)
 |

| Topic | **Discussion Leader** | **Notes & Decisions Made** | **Action Items**Who will do What by When |
| --- | --- | --- | --- |
| **Introductions****\_ min** | Facilitator | * Consider to what extent attendees already know each other
* New attendee introductions
 |  |
| **Review Today’s Agenda & Roles****\_ min** | Facilitator | * Let attendees know who is fulfilling roles in the meeting (facilitator, notetaker, timekeeper, etc.)
* If this is not always the same person, ask for volunteer(s) for next meeting
* Anything to add to the agenda?
 |  |
| **Review/Reaffirm Motivating Vision:** **\_ min** | Facilitator | * What is the significance of the areas of focus in this meeting to the community?
* Paint the picture in terms of how lives are impacted, what the nightmare is if community-wide action is not taken, what the hopeful vision of the healthier future is, how quality of life could be affected, how inequities could be reduced, etc.
* Is there a success story to share? (Ensure confidentiality is maintained and details are de-identified when applicable!)
 |  |
| **Review Action Items from last meeting** | Facilitator | * See Action Item table below
 |  |
| **Interactive Discussion*** Topic A
 | Facilitator |  |  |
| **Interactive Discussion*** Topic B
 | Facilitator |  |  |
| **Interactive Discussion*** Topic C
 | Facilitator | *
 |  |
| **Next Steps****\_ min** | Facilitator | * Next meeting date
* List potential agenda items
 |  |
| **Action Item Review****\_ min** | Notetaker | * Review Action Items with WHO and WHEN
* Confirm feasibility and agreement
 |  |
| **Meeting Evaluation****\_ min** | Facilitator | * What did we do well together today and should continue to do?
* What could we do differently?
 |  |
| **Parking lot items** (revisit later/don’t lose these thoughts) |
|  |  |  | * When will we check back on this?
 |

**ACTION ITEMS & Follow-up:**

* Start every meeting by reviewing the status of these action items from previous meetings
* Add new items from action items column in notes above prior to sending notes out to the group
* Keep action items in this table until marked complete
* If item has been in the table for a long time, reprioritize, move to “Parking Lot”, or document that the item is no longer needed and remove from next agenda

| **Action Item Table** |
| --- |
| **WHAT** | **WHO** | **WHEN** | **Status** |
| * (Items carried over from past meetings)
 |  |  |  |
| * (Items from this meeting from right column in table above)
 |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

The [Hospital Transformation Program (HTP) Continued Community and Health Neighborhood Engagement (CHNE)](https://hcpf.colorado.gov/sites/hcpf/files/Ongoing%20CHNE%20Requirements%20Mar%202022.pdf) guide (<https://hcpf.colorado.gov/sites/hcpf/files/Ongoing%20CHNE%20Requirements%20Mar%202022.pdf>) was referred to in developing this template.

