

**COUNCIL OF THE DISTRICT OF COLUMBIA
COMMITTEE OF THE WHOLE
COMMITTEE REPORT**

1350 Pennsylvania Avenue, NW, Washington, DC 20004

DRAFT

TO: All Councilmembers

FROM: Chairman Phil Mendelson
Committee of the Whole

DATE: December 7, 2021

SUBJECT: Report on PR 24-427, “Commission on Health Equity Alicia Wilson Reappointment Resolution of 2021”

The Committee of the Whole, to which PR 24-427, the “Commission on Health Equity Alicia Wilson Reappointment Resolution of 2021” was referred, reports favorably thereon, and recommends approval by the Council.

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I. BACKGROUND AND NEED

On October 18, 2021, PR 24-427, the “Commission on Health Equity Alicia Wilson Reappointment Resolution of 2021” was introduced by Chairman Mendelson. The purpose of PR 24-427 is to reappoint Alicia Wilson as a voting member of the Commission on Health Equity for a term to end July 7, 2023.

Currently, Ms. Wilson leads a consulting firm focused on social justice, health equity, immigrant rights, and racial equity. Prior to that, she was the Executive Director at La Clinica del Pueblo ("La Clinica"). As Executive Director, Ms. Wilson worked to ensure that La Clinica provides "basic health services from a culturally competent perspective." In addition to her work at La Clinica, Ms. Wilson serves as Treasurer for the Institute for Public Health Innovation and Vice-President for the DC Primary Care Association.

The Commission on Health Equity is the successor to the Commission on Health

Disparities established pursuant to the Commission on Health Disparities Establishment Act of 2014, effective March 10, 2015 (D.C. Law 20-192; D.C. Official Code § 7-755.01 et seq.). The Commission on Health Disparities was tasked with looking at ways to prevent chronic diseases, which "account for the huge disparities in health among residents in the city."^ The Committee on Health noted that chronic diseases account for 6 out of 10 deaths in the city, and that African Americans and residents of Ward 5, 7, and 8 are most likely to be impacted by chronic diseases. The report on the bill indicated that even though chronic diseases are common they are preventable through proper health care." The Commission on Health Disparities was to look at ways to improve the health outcomes of all residents of the District.^ Unfortunately, no one was ever appointed to the Commission on Health Disparities.

In 2016, the Council approved a subtitle in the Fiscal Year 2017 Budget Support Act that abolished the Commission on Health Disparities and re-established it as the Commission on Health Equity. The purpose of the re-established Commission is to examine health equity issues in the District and to advise the Department of Health, the Council, and the Mayor on solutions to address health inequities that exist in the District. The Commission is required to meet at least once a quarter to share findings regarding health disparities that exist in each ward of the District.

The Commission consists of 17 members, 9 of whom are voting members. Six of the voting members are appointed by the Mayor, and three voting and three non-voting members are appointed by the Council of the District of Columbia. The three non-voting members appointed by the Council must be community advisory members, one each from Wards 5, 7, and 8. The other non-voting advisory members of the Commission are: the Chairperson of the Council committee with jurisdiction over the Department of Health; one patient organization representative; the presidents or chief executive officers of two District hospitals, or their designees; and a representative from an insurance company, or his or her designee. The Mayor is responsible for appointing the Chairperson of the Commission from among the voting members.

Appointed members of the Commission "shall have expertise in at least one of the following areas: (A) Health equity, social determinants, and health disparities; (B) Social and human services and vulnerable populations; (C) Early learning and education; (D) Minority communities and population health outcomes and improvement; (E) Economic and community development; and (F) Ecology and the natural and built environment."

Table 1: Membership of the Commission on Health Equity

Resolution	Position	Appointee	Term Expiring
PR 24-414	Proposed Council Appointee	Delia L. Houseal	3 years after resolution date
PR 24-427	Proposed Council Appointee	Alicia Wilson	July 7, 2023
PR 24-430	Proposed Council Appointee	Dr. Christopher King	July 7, 2024
	Council Appointee (Nonvoting Advisory Member, Ward 5)	M. Jermaine Bond	June 1, 2023

	Council Appointee (Nonvoting Advisory Member, Ward 8)	Dr. Maranda Ward	January 2, 2023
PR 24-447	<i>Proposed Council Appointee</i> (Nonvoting Advisory Member, Ward 7)	<i>Sherice Muhammad</i>	
	Mayoral Appointee	Autumn Saxton-Ross	February 1, 2023
	Mayoral Appointee	Ambrose Lane	February 1, 2022
	Mayoral Appointee	Lori Kaplan	February 1, 2022
	Mayoral Appointee	Laila Finucane	February 1, 2022
	Mayoral Appointee	Linda Elam	February 1, 2023
	Mayoral Appointee	Vacant	
	Nonvoting Advisory Member (Chairperson of Committee on Health)	Councilmember Vincent C. Gray	N/A
	Nonvoting Advisory Member (Patient Organization Representative)	Vacant	
	Nonvoting Advisory Member (President/CEO of a District-based Hospital, or designee)	Laura Sander	June 1, 2022
	Nonvoting Advisory Member (Insurance Company Representative, or designee)	Vacant	

During the Committee’s public hearing on PR 24-427, Ms. Wilson testified that she felt strongly that the Commission was positioned to accomplish a great deal more than it had in the past. She noted that the Commission was preparing to hold a conference to consider health equity issues in the District, and she looked forward to collaborating with relevant community and professional stakeholders to develop a program that will promote effective solutions.

Pursuant to Council Rule 277, all Council appointees must be District residents or shall become District residents within 180 days after the effective date of the appointment. Further, Council Rule 277 provides that the appointees must reside in the District for the duration of their appointment. Ms. Wilson is not a District resident, as she resides in Hyattsville, Maryland. The Committee Print waives Council Rule 277 to appoint Ms. Wilson to the Commission. The Committee believes the expertise Ms. Wilson brings to the Commission necessitates that Council Rule 277 be waived. The Committee recommends waiving the Rule and recommends adoption of PR 24-427.

II. LEGISLATIVE CHRONOLOGY

October 18, 2021	PR 24-427, the “Commission on Health Equity Alicia Wilson Reappointment Resolution of 2021” is introduced by Chairman Mendelson.
October 19, 2021	PR 24-427 is “read” at Regular Legislative Meeting and the referral to the Committee of the Whole is official.
October 21, 2021	Notice of a Public Roundtable on PR 24-427 is filed in the Office of the Secretary.
October 22, 2021	Notice of Intent to Act on PR 24-427 is published in the <i>District of Columbia Register</i> .
October 27, 2021	The Committee of the Whole holds a public roundtable on PR 24-427.
December 7, 2021	The Committee of the Whole marks-up PR 24-427.

III. POSITION OF THE EXECUTIVE

Ms. Wilson is a Council appointee to the Commission on Health Equity. The Executive did not submit comments with respect to the appointee.

IV. COMMENTS OF ADVISORY NEIGHBORHOOD COMMISSIONS

The Committee received no testimony or comments from any Advisory Neighborhood Commission on PR 24-427.

V. SUMMARY OF TESTIMONY

The Committee of the Whole held a public hearing on PR 24-427 on Wednesday, October 27, 2021. Copies of the testimony regarding PR 24-427 are attached to this report.

Alicia Wilson, Appointee, testified and answered questions from Chairman Mendelson regarding her background and experience as it pertains to the Commission on Health Equity and her interest in continuing to serve on the Commission.

The Committee received no testimony or comments in opposition to Ms. Wilson’s reappointment.

VI. IMPACT ON EXISTING LAW

Voting Members of the Commission on Health Equity appointed by the Council are appointed pursuant to section 5043(b)(2) of the Commission on Health Equity Amendment Act of 2016, effective October 8, 2016 (D.C. Law 21-160; D.C. Official Code § 7-756.01(b)(2)).

VII. FISCAL IMPACT

PR 24-427 will have no fiscal impact on the District of Columbia budget or financial plan. Members of the Commission on Health Equity are not entitled to compensation.

VIII. SECTION-BY-SECTION ANALYSIS

- Section 1 States the short title of PR 24-427.
- Section 2 Confirms the appointment of Alicia Wilson as a member of the Commission on Health Equity to serve a term to end on July 7, 2023.
- Section 3 Requires that a copy of the resolution, upon adoption, be transmitted to the appointee, the chairperson of the Commission, and to the Office of the Mayor.
- Section 4 Provides that PR 24-427 shall take effect immediately upon the first date of publication in the District of Columbia Register.

IX. COMMITTEE ACTION

X. ATTACHMENTS

1. PR 24-427 as introduced.
2. Nominee's response to Committee questions.
3. Written testimony and comments.
4. Legal sufficiency determination.
5. Committee Print for PR 24-427.


Chairman Phil Mendelson

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8 A PROPOSED RESOLUTION
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11 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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16 To reappoint Ms. Alicia Wilson to the Commission on Health Equity.
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18 RESOLVED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this
19 resolution may be cited as the “Commission on Health Equity Alicia Wilson Reappointment
20 Resolution of 2021”.

21 Sec. 2. Notwithstanding Council Rule 277, the Council of the District of Columbia
22 reappoints:

23 Alicia Wilson
24 Carrollton Terrace
25 Hyattsville, Maryland 20781
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27 as a voting member of the Commission on Health Equity, established by section 5043 of the
28 Commission on Health Equity Amendment Act of 2016, effective October 8, 2016 (D.C. Law
29 21-160; D.C. Official Code § 7-756.01), to serve a 3-year term to end July 7, 2023.

30 Sec. 3. The Council of the District of Columbia shall transmit a copy of this resolution,
31 upon its adoption, to the appointee, the chairperson of the Commission, and to the Office of the
32 Mayor.

33 Sec. 4. This resolution shall take effect immediately upon the first date of publication in
34 the District of Columbia Register.

Alicia Wilson

Carrollton Terrace
Hyattsville, MD 20781

Senior Level Non-Profit Executive and Social Justice Leader with over 20 years of experience advancing healthcare services and rights for marginalized communities. Highly skilled at facilitating strong coalitions, mediating diverse groups, and building inclusive, collaborative teams. Brings government relations experience at the local, state, and federal level. A bilingual leader with strong cross-cultural communication skills who is known for being an effective driver of transformational change for intractable social issues. Has a successful track record of growing revenue and leading multi-site operations. Known for being an active listener, innovative problem-solver, and savvy strategic thinker who brings strong ethical leadership and a sense of humor.

- Nonprofit Healthcare
- Immigrant Health Equity
- Progressive Policy-making and Implementation
- English and Spanish-language Media Relations and Communications
- Coalition Building
- Government Relations
- Public Speaking
- Health Systems Transformation
- Fundraising, Grant Writing
- Community Relations
- Group Facilitation and Mediation

PROFESSIONAL EXPERIENCE

ALICIA WILSON STRATEGIES, Hyattsville, MD

2019 - present

Founder and Principal. Strategic partner for progressive organizations building power in their communities. Supports nonprofits through ongoing and project-based engagements that help build their capacity to make a greater impact. Engagements include national and local advocacy organizations. Services include:

- Facilitating coalitions
- Publishing white papers
- Campaign development and action planning
- Crafting advocacy and community engagement tools
- Researching best practices and providing program development analysis and recommendations
- Network building
- Organizational development strategic evaluation
- Diversity, Equity, and Inclusion strategic guidance
- Cross-cultural communications support
- Leadership and management support

Executive Director (Jan 2009 – December 2018) Oversaw all functions and managed 135 person staff of community based, Federally Qualified Health Center, with responsibility for advancing its mission and goals. Ensured provision of culturally appropriate health care services, maintenance of clinic's strong reputation, and building of effective relationships with clients, community, funders, and government officials. Acted as a public spokesperson and advocate representing La Clínica and the needs of the DC metro area Latino community. Responsible for effectively raising funds from both foundations and individual major donors. Built the strength and engagement of the board of directors. Represented La Clínica in various boards, committees and panels to further the organization's mission.

- Grew organization from \$7 million to \$12.5 million, and from 3,000 patients to over 80,000 served annually throughout the community
- Expanded infrastructure to support robust organization
- Grew organization from 1 site to 6 locations
- Defined and executed successful strategy to increase organizational impact and grow influence in region, more effectively representing the health needs of the local Latino immigrant community
- Adapted organizational strategy to changing healthcare environment, navigating through ACA passage and toward value-based payment systems
- Strengthened, supported, and coordinated patient-majority board of directors
- Built advocacy strategy for organization, leading coalitions that helped write and pass successful legislation to increase healthcare access for immigrants
- Developed strong network of loyal financial supporters, leveraging key relationships to build organizational sustainability. Obtained \$800,000 grant for organizational support, multiple multi-year, Federal contracts.
- Led organization through restructuring and transitions
- Won highest health center quality award from DHHS, 2016

Director of Grants and Contracts Administration (Oct 2001 – Dec 2008) Senior role in oversight of clinic, represented organization externally in many settings. Oversaw public relations, media relations, and external presentation of clinic. Initiated and led organizational development activities such as organizational assessment, strategic planning, staff restructuring process, facility renovation, development of Mission, Vision, and Values statement. Oversaw grant writing, project management, and fundraising efforts for then \$7 million annual budget, of which 75% was grants and contracts. Cultivated individual donors. Established relationships with funding organizations, both public and private.

- Won Federally Qualified Health Center status through competitive application process
- Completed emergency fundraising campaign, raising over \$600,000 in under three months
- Successfully closed out \$3.4 million capital campaign

- Grew budget from \$3 million to \$7 million
- Successfully developed new website and managed expansion of fundraising into new media

Development Associate (Apr 2001 – Oct 2001) Prepared applications for grants and contracts and related reports to funding organizations in compliance with guidelines and deadlines.

Case Manager, HIV Services (Jun 2000 – Apr 2001) Performed needs assessment for 50 HIV-positive patients and develop individualized care plan for each. Identified appropriate sources of care and resources for social stability of patients.

NEW HOPE HOUSING, Alexandria, VA. Jan 1999 – Jun 2000

Case Manager

Provided intensive case management for eight families in homeless shelter setting. Supervised client transition from homelessness to stable housing.

BREAD FOR THE CITY, Washington, DC. Sept 1996 – Dec1 998

Case Manager

Provided social work case management for thirty clients. Acted as representative payee for four disabled clients. Advocated for clients through expertise in local and federal welfare system regulations.

EDUCATION

Swarthmore College, Swarthmore, PA. Bachelor of Arts, June, 1996. Double major in Religion and Sociology / Anthropology. Graduated with Distinction in Sociology / Anthropology.

Nonprofit Roundtable of Greater Washington, Future Executive Directors Fellowship, 2008-2009.

Harvard Business School, Strategic Perspectives in Nonprofit Management, Certificate, July, 2013 Executive Education, Social Enterprise Initiative

The Advisory Board Company, Fellowship, 2016 – 2017. Intensive healthcare administration fellowship.

COMMUNITY INVOLVEMENT

- Member, Co-facilitator, DC Initiative on Racial Equity and Local Government (2015 to present)
- Appointed Member, DC Health Equity Commission (2017 to present)
- Board of Trustees Vice-Chair, Luminis Health Doctors Community Medical Center.

Vice-chair, strategic planning committee, Co-chair, Health Equity and Anti-Racism Task Force (2019 to present)

- Board member, Vice President, DC Primary Care Association. (2011 to 2018)
- Board member, Treasurer, Institute for Public Health Innovation (2013 to 2018)
- Member, National Steering Committee, DHHS Office of Minority Health, *Promotores de Salud* Initiative (2011 - 2016)
- Member, Latino Congressional Advisory Committee, Del. Eleanor Holmes-Norton (2009 to 2018)
- Co-chair, Hyattsville Bicycle and Pedestrian Safety Committee (2006 – 2008)

PERSONAL

Fluent in Spanish and English. Avid gardener, cook, and sports enthusiast. Named “Disruptive Woman to Watch in 2015,” by Disruptive Women in Health Care

October 25, 2021

Chairman Phil Mendelson
Council of the District of Columbia
1350 Pennsylvania Ave. NW
Washington, DC 20004

Re: Health Equity Commission Re-appointment

Dear Councilmembers,

It is an honor to be considered for re-appointment on the Health Equity Commission. The following letter responds to the disclosure questions required of all appointees.

Question 2: I have no financial interest in any entity transacting business with the DC Government.

Question 3: My family and I have not received any income from any business entity transacting business with the DC Government.

Question 4: My family and I do not hold any offices or serve as agents with any business entity transacting business with the DC Government.

Question 5: My family and I do not have any loans from entities that are not federally regulated financial institutions.

Question 6: I do not have any financial interest in real property within the District of Columbia.

Question 7: I do not hold any professional licenses.

Question 8: I am not a member of any professional organizations.

Question 9: I have served as a DC Health Equity Commissioner since 2017.

Question 10: I currently serve as the Vice Chair of the Luminis Health Doctors Community Medical Center Board of Trustees.

Question 11: I do not have any outstanding liability for unpaid taxes or fees.

Question 12: My family and I do not have any conflicts of interest with my service on the Health Equity Commission.

Question 13: In 2020 I provided a contribution to the campaign of Ed Lazere.

Question 14: I am not registered to lobby any governments.

Question 15: I have agreed to serve another term because I feel that the Health Equity Commission is just now starting to play a role that contributes to the function of the Office of Health Equity and supports the Director of Health Equity. The first years of the existence of the office laid some foundation for a baseline understanding of the state of inequities in the District and the drivers of health disparities; now the work of the Commission is to recommend interventions to reverse the structures the drive health disparities and begin to mark improvements in health equity in DC.

Question 16: The Commission was slow to start its work, developing a set of bylaws to govern its practices before diving into any substantive health equity work. The pandemic definitely slowed efforts as well. In addition, there has been significant turnover among commissioners, leading to little consistency in effort to advance a health equity agenda. In this next term, I anticipate that the Commission will bet better able to discuss recommendations and push for changes in city practice to improve health equity in DC.

Thank you for considering my reappointment to the Health Equity Commission.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Alicia Wilson', with a stylized flourish at the end.

Alicia Wilson

Roundtable on Commission Appointments
Health Equity Commission
Wednesday, October 27, 2021

Good afternoon, Chairman Mendelson and other members of the Council. I'm grateful for the opportunity to be here and discuss a re-appointment to the Health Equity Commission. My name is Alicia Wilson, and I have been part of DC's Health Equity Commission since it was founded in 2017. It has been an honor to serve as part of the commission. I was previously appointed while I was the Executive Director of La Clínica del Pueblo; I stepped down from that position at the end of 2018, and I now run a consulting business that focuses on social justice, health equity, immigrant rights, and racial equity. I enjoy continuing to work with and for DC-based nonprofits and community members.

While the commission was a little slow to get up and running, building its bylaws and determining its processes, I am proud of the work of the Health Equity Office. The baseline report they produced on the key drivers of inequity was truly groundbreaking. It provides extraordinary information for the DC government to use in policymaking, in allocating resources, and in planning. I look forward to continuing to push data-driven approaches to health equity, and to seeing the report stand as a living metric of health equity in the city.

The District's response to COVID-19 was a key opportunity to look at health equity in very bold relief. I think that it is clear that long-standing, structural inequities and structural racism have driven the disparate impacts of the virus. I hope that the commission will continue to evaluate the city's actions as a way to examine how the levers of government can better advance health equity outside of a pandemic, as well.

I am looking forward to the continued work of the Office of Health Equity, and I am excited to know that the Office is partnering with the newly-formed Office of Racial Equity to convene a summit in December. This summit and our ongoing work will help the commission develop recommendations for the city and for the Council to push for positive changes that will reduce disparities and improve outcomes for every resident of DC.



OFFICE OF THE GENERAL COUNSEL

Council of the District of Columbia
1350 Pennsylvania Avenue NW, Suite 4
Washington, DC 20004
(202) 724-8026

MEMORANDUM

TO: Chairman Phil Mendelson

FROM: Nicole L. Streeter, General Counsel *NLS*

DATE: December 7, 2021

**RE: Legal sufficiency determination for PR24-427,
Commission on Health Equity Alicia Wilson
Reappointment Resolution of 2021**

The measure is legally and technically sufficient for Council consideration.

The proposed resolution would confirm the reappointment of Alicia Wilson to the Commission on Health Equity, pursuant to section 5043 of the Commission on Health Equity Amendment Act of 2016, effective October 8, 2016 (D.C. Law 21-160; D.C. Official Code § 7-756.01).

I am available if you have any questions.

9 A PROPOSED RESOLUTION

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12 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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17 To reappoint Ms. Alicia Wilson to the Commission on Health Equity.

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29 Commission on Health Equity Amendment Act of 2016, effective October 8, 2016 (D.C. Law
30 21-160; D.C. Official Code § 7-756.01), to serve a 3-year term to end July 7, 2023.

31 Sec. 3. The Council of the District of Columbia shall transmit a copy of this resolution,
32 upon its adoption, to the appointee, the chairperson of the Commission, and to the Office of the
33 Mayor.

34 Sec. 4. This resolution shall take effect immediately upon the first date of publication in
35 the District of Columbia Register.