

Partnership Purpose

The Partnership to Align Community Care (Partnership or P2ACC) is a national learning and action network that unites partners across healthcare, community-based organizations, and government to advance sustainable and aligned health and community care systems. The Partnership achieves this work through cross-sector collaboration and co-designed solutions leveraging community care hubs (CCHs) to promote whole-person health.

Mission: To advance sustainable community care hubs (CCHs) as an effective, efficient, community-based care infrastructure to address upstream drivers and achieve whole-person health.

Vision: A fully integrated health care and community ecosystem in which CCHs enable full participation from Community Based Organizations (CBOs) and serve as a critical component of the community care delivery system achieving whole-person health.

Steering Committee Purpose

The P2ACC is creating a new Steering Committee to establish P2ACC strategy, set annual goals, establish work groups and other committees, and advise Partnership staff. The Steering Committee is an evolution of the prior Strategic Advisory Committee. It has a formal structure and greater governance and leadership of the work of the Partnership.

Scope and Authority of Steering Committee Officers, Members and Staff: The Steering Committee of P2ACC guides and sets the strategy and annual goals for the Partnership and identifies the methods/strategies (workgroups, etc.) that are deployed to attain Partnership goals.

The Steering Committee will identify two Co-Chairs responsible for coordinating the Partnership leadership and staff. The Steering Committee will also include a representative from Partners in Care Foundation, which serves as the fiscal sponsor of the Partnership.

Contracting: The Co-Chairs, acting jointly, have the authority to contract on behalf of P2ACC (with notice to the Steering Committee members for any amount above \$50,000), including the hiring of consultants and staff and setting compensation. Contracting and staffing arrangements shall be subject to the normal expectations and requirements of the Fiscal Sponsor .

Conflict of Interest: The Steering Committee shall follow best practices around managing conflicts of interest. Steering Committee members shall disclose any conflict of interest and shall recuse themselves from consideration of and voting on any matter on which they have a conflict of interest. The Steering committee shall approve any contract involving a Steering Committee member.

Staff: Partnership shall have broad discretion to manage day-to-day operations and implement P2ACC's strategy. Staff shall regularly consult with and take direction from the Co-Chairs and Steering Committee Members. Such authorities shall include, but not be limited to, contracting/purchasing (under \$10,000), public communications (newsletter, website, etc.), representing P2ACC in meetings and conversations with outside parties.

Steering Committee Composition: The Steering Committee shall have up to seventeen members (including the Co-Chairs) and shall include a balanced and diverse representation across participating sectors.

The Steering Committee members shall include key stakeholders and thought leaders in healthcare, government, and community care organizations.

The Steering Committee shall include at least one representative of each of standing Partnership committees, workgroups, and alliances.

Steering Committee Membership Selection and Operation

The Partnership shall establish an open application process by which individuals may nominate themselves for service on the Steering Committee. The initial Steering Committee members shall be chosen by the current Co-Chairs, with advice from current members of the Strategic Advisory Committee.

Selection of Steering Committee members shall occur annually beginning in the fourth quarter of 2027. The Steering Committee shall establish an open nomination and selection process, with 50 percent of seats being up for election each year.

Term: Each SC member shall serve a renewable two-year term. When established in 2026, one-half of SC members shall be designated for an initial term of XX months (ending on December 31, 2027), with the other half having an initial term of XX months (ending on December 31, 2028) This rotation will ensure that no more than half of the Steering Committee is up for appointment each year. This shall be determined at random. Re-appointment and appointment of new and continuing SC members shall occur in January of each year thereafter starting in January 2028.

Member responsibilities (see responsibilities document for full list of expectations): Each SC member shall meaningfully participate in the governance of the Partnership by

- Preparing for monthly meetings by reviewing minutes, agenda, and other materials.
- Regularly attending meetings. More than four unexcused absences shall be cause for removal from the steering committee.
- Comply with the Partnership's conflict of interest policy by identifying and notifying leadership (Co-Chairs and executive director) of any real or perceived conflicts of interest.

If a SC member can no longer fulfill their duties, they shall resign their position or be discharged by a majority vote of the steering committee. The Steering Committee shall endeavor to fill any vacancy with a representative of the same stakeholder type. A replacement

may be approved by a majority of the SC members at any time and shall serve out the remainder of the open term.

Steering Committee Co-Chair Criteria: As the Partnership to Align Community Care (Partnership) continues to grow and evolve, the leadership structure will transition from founding Co-Chairs to a more formalized selection process aligned with the organization's long-term governance model. This transition is intended to support transparency, balanced sector representation, leadership sustainability, and continued alignment with the Partnership's strategic goals.

The Partnership should continue to operate with two Co-Chairs to ensure broad stakeholder representation, leadership continuity, balance of workload, and modeling of consensus-driven practice. Co-Chairs should demonstrate collaborative leadership, national credibility, commitment to the Partnership's mission and goals, and the ability to effectively convene diverse stakeholders across sectors. The transition from founding Co-Chairs to a formal selection process will occur thoughtfully to preserve continuity, honor the contributions of current leadership, and support long-term sustainability of the Partnership.

Co-Chair Qualities: Co-Chairs should collectively reflect

- Leadership and strategic capacity
- Cross-sector credibility
- Ability to convene partners and build consensus
- Commitment to the mission and advancement of whole-person care
- Geographic and community representation
- Ensure respect and inclusion of those with lived experience and community voice
- Demonstrated ability to collaborate and build partnerships and coalitions
- Neutrality, fairness, and trusted leadership
- Substantial experience in fundraising, policy, and/or systems change
- Ability to effectively represent the Partnership in a wide range of public settings
- Sufficient time and capacity to fulfill leadership responsibilities

Co-Chair Selection: Co-Chair selection via the Steering Committee will prioritize by the representation from an Advanced Community Care Hub (CCH), healthcare sector, or government sector to ensure the Partnership is guided by leaders who reflect the principal components of the ecosystem necessary to advance whole-person care and cross-sector alignment at scale. The term will be two years, with staggered renewal dates to ensure continuity and preserve institutional knowledge.

- Representation from an Advanced CCH brings operational expertise, community-centered perspective, and lived experience implementing coordinated care models on the ground.
- Healthcare representatives (health system, health plan, ACO, healthcare association, healthcare-focused organization, or subject matter expert and recognized leader within the health care sector) provide clinical system alignment, care transformation expertise, scalability of community care models, sustainability and insight into value-based payment and delivery models.
- Government sector leadership (federal, state, or association) supports alignment with public policy, funding opportunities, and broader systems transformation efforts.

Having Co-Chairs who represent multiple perspectives create balanced leadership that can bridge community-based services, healthcare systems, financing, and public policy. This cross-sector co-design approach helps ensure the Partnership remains practical, sustainable, community-informed, and grounded in implementation realities while advancing national alignment and whole-person care transformation.

Meetings and voting: The steering committee shall meet monthly throughout 2026 and shall determine the frequency of its meetings in 2027 and beyond. Staff shall provide an agenda and other materials at least 48 hours prior to the meeting and shall share the recording and minutes of the meeting within five business days to all steering committee members.

The steering committee shall endeavor to operate on a consensus basis. However, where consensus is not possible, the steering committee shall make decisions on a simple majority basis, provided that at least 60% of the members are present at a meeting.

- The Co-Chairs may elect to take an email vote, in which case the decision is passed if it receives more than 50 percent of all votes cast.
- Decisions on strategy documents and annual goals shall be made by resolution.

Goals: The Steering Committee shall identify not more than ten annual goals for the Partnership. The goals shall be approved by the Steering Committee on or before January. The goals shall be reported to the membership, along with quarterly progress reports.

The Steering Committee may constitute standing or ad hoc committees to help achieve the annual goals. Each committee shall have at least two Co-Chairs, of which at least one shall be a SC member. The Co-Chairs shall regularly report progress to the SC.

Amendments: The Steering Committee may update this Charter by vote of the SC members. Any such amendments shall be documented in the charter.

June Simmons, Chair/Fiscal Sponsor

Tim McNeill, Co-Chair