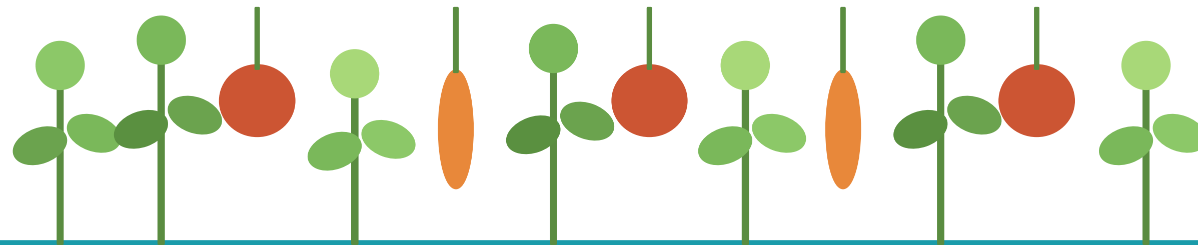
UTHealth Houston School of Public Health | Michael & Susan Dell Center for Healthy Living | Ascension Seton

Central Texas *Food is Medicine*

Spring Mini-Summit

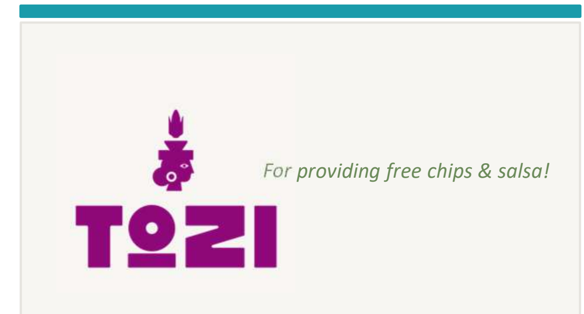


DATE	TIME	LOCATION
Friday, May 8, 2026	**8:30 – 11:00 AM** Check-in begins at 8:30	**TAO Building** 1345 Philomena St parking · Auditorium, 1st floor left

Check in · Sign in · Enjoy breakfast tacos, coffee & chips/salsa courtesy of Tozi!

THANK YOU TO OUR HOSTS & PARTNERS

Thank You!



For providing free chips & salsa!

PROGRAM

Today's Agenda

Time	Session
8:30 AM	Check-in, Breakfast & Coffee
9:00 AM	Welcome & Opening Remarks
9:10 AM	**Miriam Ovalle & Blair Dudley — People's Community Clinic**
9:25 AM	Q&A
9:35 AM	**Megan Cermak — Central Health**
9:50 AM	Q&A
10:00 AM	**Networking Activity — Ask & Connect**
10:45 AM	Closing Reflections & Next Steps
11:00 AM	Summit Ends

FEATURED SPEAKERS · PEOPLE'S COMMUNITY CLINIC

People's Community Clinic

Miriam Ovalle

Social Needs & Partnerships Program Manager

Miriam Ovalle is the Social Needs and Partnerships Program Manager at People's Community Clinic in Austin, Texas. She leads innovative programs that connect healthcare with essential resources like food access and technology, helping patients overcome real-life barriers to better health. Through strategic partnerships and community-driven initiatives, Miriam works to ensure that care goes beyond the exam room—supporting patients with the tools they need to truly thrive.

Blair Dudley, MPH

Director of Population Health

Blair is the Director of Population Health at People's Community Clinic, where she designs and oversees strategies to improve health outcomes, reduce disparities, and lower costs. She has over 15 years of experience developing care models for quality improvement, managing value based care programs, and leading cross-functional projects spanning clinical, analytical, technical, and business teams. With a deep understanding of the perspectives of providers, healthcare professionals, payers, and patients, Blair is committed to advancing patient-centered solutions. She develops holistic strategies that enhance quality, reduce costs, improve the patient experience, increase provider satisfaction, and promote health equity. Blair lives in Austin and enjoys spending time with her family.

May 8, 2026

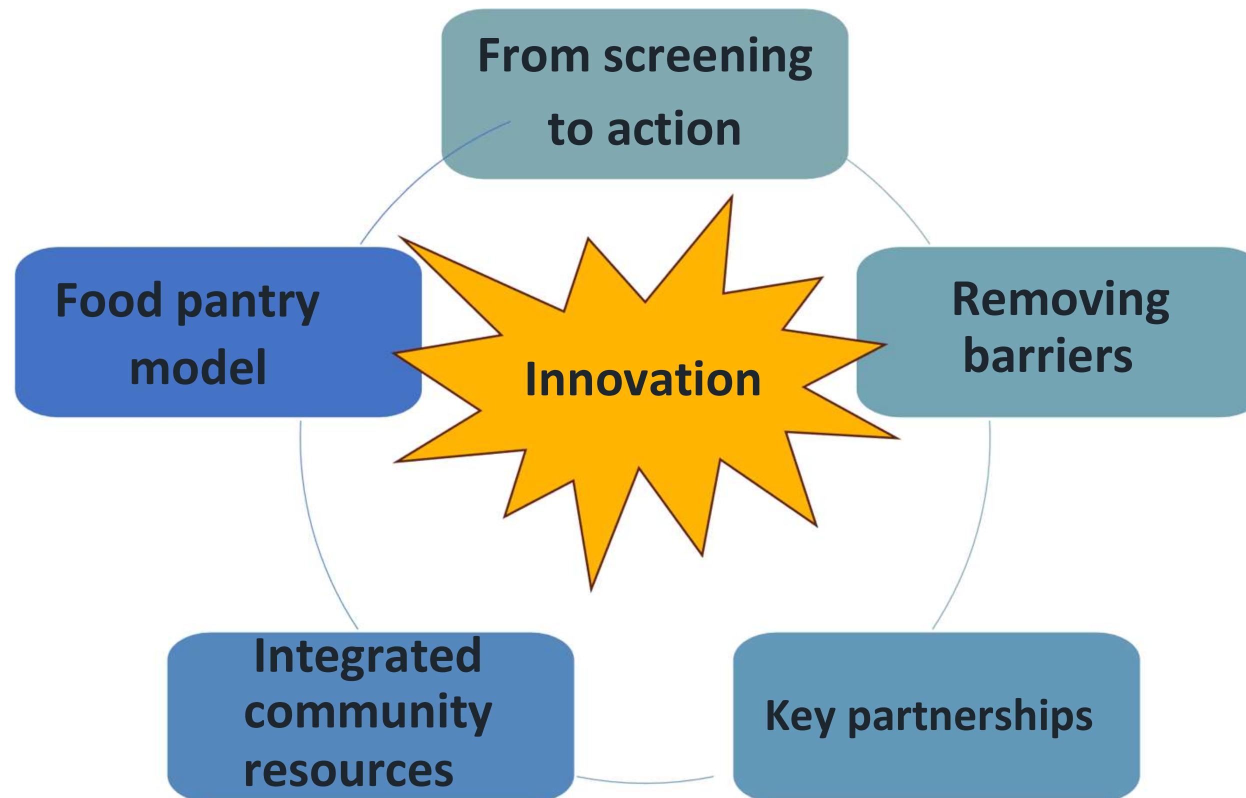
From the Exam Room to the Dinner Table

Food Is Medicine Summit

People’s Community Clinic

- Founded in 1970
- Serving over 21,000 patients annually
- Providing adolescent, adult, pediatric, and women’s health services
- Federally Qualified Health Center since 2012
- Patient-Centered Medical Home designation since 2014

People's Community Advocacy and Resources



People's Mobile FARMacy: Design & Workflow

- The Mobile FARMacy concept
- Early challenges
- Patient workflow
- Improving the process

People's Mobile FARMacy: Patient Engagement & Scaling the Model

Total individuals served a cross all 6 events: 364

	# Patients					
Event Outcomes	30-Sep	4-Nov	2-Dec	6-Jan	3-Feb	3-Mar
# Patients Served on Event Day	56	50	54	74	83	72
# Non-PCC Patients Served	3	6	1	3	2	1
# Care Gaps Closed	94	41	96	61	80	70
# BCBS Patients Served	13	14	31	31	27	19
# BCBS Care Gaps Closed	33	19	87	25	32	31
# PRAPARE Screeners Completed on Event Day	3	26	18	20	24	20
# PRAPARE Screeners Previously Completed	18	13	27	42	38	37
# Patients Who Need to Complete PRAPARE Screener	31	8	10	12	21	14

People's Epic chart-reviewed data as of 3.25.2026

People's Mobile FARMacy: Clinical Outcomes

People's org-wide vs MF cohort quality outcomes over time: Sept 2025 vs March 2026

Measure	People's Org-Wide Rate Sept 2025	People's Org-Wide Rate March 2026	People's Org-wide % Improv 't	MF Cohort Rate Sept 2025	MF Cohort Rate March 2026	MF Cohort % Improv't
Childhood Immunization Status	48.4%	48.8%	0.4%	36.4%	40.0%	3.6%
Child Weight Assessment / Counseling for Nutrition / Physical Activity	86.0%	86.5%	0.5%	92.6%	93.9%	1.3%
BMI Screening and Follow-Up 18+ Years	84.1%	87.1%	3.0%	91.7%	95.5%	3.8%
Hypertension Controlling High Blood Pressure	75.4%	72.6%	(2.8%)	75.7%	85.0%	9.3%
Diabetes A1c or GMI > 9 or Untested	27.1%	29.2%	2.9%	35.5%	21.9%	(13.6%)
Depression screening	74.0%	77.4%	3.4%	82.3%	82.8%	0.5%
Colorectal cancer screening	55.1%	55.3%	0.2%	71.9%	72.4%	0.5%
Cervical cancer screening	78.5%	79.7%	1.2%	87.6%	91.4%	3.8%

People's Azara data as of 4.8.2026

People's Mobile FARMacy: Patient Stories

- A mother of 2 BCBS children came back to clinic for another Mobile FARMacy event, and now her children are up to date on their well-child visits
- A 4-year-old boy standing in line outside the Mobile FARMacy with his mother kept pointing energetically at the pictures of fruit on the van, saying things like "let's get some apples!"
- A 41-year-old woman, a returning Mobile FARMacy attendee, said she was excited to see us again

People’s Mobile FARMacy: Key Takeaways

- The Mobile FARMacy event **increases patient engagement**, which when combined with the People’s relationship-based practice improves health outcomes and patient satisfaction

- The Mobile FARMacy event **increases SDOH/NMDOH screening and provides real-time food assistance** to those in need

A Note of Thanks and Recognition

The People's Community Clinic is grateful for the partnership and collaboration of Blue Cross Blue Shield of Texas and the Central Texas Food Bank. Through the Mobile FARMacy program, our patients gained access to nutritious food while engaging more fully in their medical care – creating meaningful, health-promoting experiences for our community.

Q & A

FEATURED SPEAKER ·

Central Health

Megan Cermak, MS

Senior Director of Public Health Strategy

Megan Cermak is the Senior Director of Public Health Strategy at Central Health in Austin, Texas, where she leads public health strategy, policy, and community health initiatives for Travis County's safety-net healthcare system. She has more than 20 years of experience in public health policy, disaster response, and program implementation at the local and state levels. Her work has included managing large-scale public health initiatives, leading policy and ordinance campaigns, and supporting the development of state and federal grant-funded programs. She played a key leadership role in the Travis County Healthcare District's COVID-19 response and has helped secure significant public health funding to support community health initiatives. She is the recipient of the American Public Health Association's Vision in Health Policy Award.

Central Health Equity Policy Council

2026

The Central Health Equity Policy Council

Established in 2015

Mission and Vision of the Council

- **Mission: To champion the cause of health equity through the implementation of transformative local policies.**

- **Vision: To align with the overarching mission of Central Health, striving to enhance the well-being of the community by prioritizing care for those most in need.**

About our Members

Our members come from many backgrounds and experiences, but share a common goal: improving our health system and advancing health equity in our community. Some members bring policy and healthcare expertise, while others bring lived experience, community knowledge, and a passion for advocacy. Together, this mix of perspectives allows the Council to approach issues with both technical knowledge and grassroots insight.

Member Expectations

- Commit to the vision and mission of the Council and Central Health
- Bring evidence-based, best practice information back to the Council for planning and decision-making
- Serve as an effective liaison between your agency and key stakeholders and the Council
- Commit to work in the public interest using your expertise to create health equity for all residents of Travis County
- Expected time commitment: ~2 hours per month per committee

Achievements

Advancing LGBTQIA+ Health Equity

Worked with two major local healthcare systems—together operating more than 70 clinics—to improve care for LGBTQIA+ patients by strengthening inclusive policies, staff training, and patient protections.

Championing Child Health

Partnered with four school districts to implement policies guaranteeing daily recess and unstructured physical activity, supporting student health, focus, and overall well-being.

Protecting Our Youth

Oversaw enforcement of a local law that prohibits the sale of e-cigarettes and vape products to people under 21, helping reduce youth access to harmful products and improve compliance among retailers.

Expanding Access to HIV Testing

Worked with three safety-net clinic systems and one emergency response unit to adopt routine HIV testing as part of standard care, helping detect infections earlier and connect patients to treatment sooner.

Promoting Safer Communities

Helped update the city's Smoking in Public Places Ordinance to include vaping, ensuring that vaping is prohibited in all public indoor spaces and improving air quality in shared spaces.

Strengthening Disaster Response Planning

Advised local leaders on how to incorporate equity into disaster planning and response so that future emergency plans better serve vulnerable communities during disasters and recovery efforts.

Current Campaign: Food Is Medicine

Progress and Milestones

2025–2026 Policy Campaign: Food is Medicine

- In early 2025, at the Policy Campaign Selection Meeting, the Council voted to adopt Food is Medicine as its 2025–2026 policy campaign.
- The campaign focuses on integrating food access into healthcare delivery, recognizing nutritious food as a foundational component of health and chronic disease management.
- This work builds on both national momentum and local needs, with the goal of advancing health equity for MAP members and underserved communities across Travis County.

Research + Strategic Planning = Policy Development

- The campaign's Strategic Planning Committee—made up of local food systems, food policy, and healthcare experts—developed a proposed policy for participating health systems.

- The proposed policy creates a framework to integrate the Food Is Medicine approach into routine healthcare delivery, making the identification of and response to food insecurity a standard part of patient-centered, whole-person care.

- This policy framework is intended to help healthcare systems more consistently identify food insecurity and connect patients to nutrition resources and services.

Food is Medicine (FIM): Policy Language Overview

Purpose and Overview

- This policy establishes a system-level framework for integrating the Food Is Medicine (FIM) approach into routine healthcare delivery, making the identification and response to food insecurity a standard component of patient-centered, whole-person care across participating healthcare and hospital systems.
- The policy sets minimum expectations rather than prescriptive workflows, preserving organizational autonomy while ensuring food insecurity screening and response are meaningfully embedded in clinical practice, quality improvement, and population health strategies.

Key elements include:

- **Routine Screening:** Use of validated or aligned screening tools at appropriate intervals, with documentation that supports care coordination and learning.
- **Meaningful Response:** Timely, context-appropriate responses that move beyond generic referrals and may include coordinated referral pathways, closed-loop referrals where feasible, or integration into care management workflows.
- **Connection to Health Outcomes:** Identification of at least one measurable health or well-being outcome influenced by food insecurity interventions.
- **Patient Experience and Trust:** Recognition of food insecurity response as both a clinical and relational intervention that supports dignity, compassion, and community confidence.
- **Flexibility and Autonomy:** No mandated vendors, technologies, program models, or reporting structures; systems retain full control over implementation.
- **Continuous Improvement:** Ongoing refinement through existing quality improvement and population health processes.

Overall, adoption of this policy positions food insecurity as a core health issue—integrated into care delivery, aligned with accreditation and payer expectations, and responsive to local context—while maintaining flexibility and operational independence.

Campaign Update – May 2026

- As of March 2026, five local safety-net healthcare systems have joined the Food Is Medicine campaign. Together, these partners will form our first Clinical Cohort, working jointly to implement the Food Is Medicine framework and embed food insecurity screening and response into routine healthcare delivery.
- This collaborative effort represents an important step toward institutionalizing Food Is Medicine across the regional healthcare system. We are also in conversations with hospital systems and hope to expand participation in the near future.

Campaign Spotlight: The HIV Opt-Out Campaign - 5 Years On

MAP and MAP Basic Members were screened for HIV at rates over 64% higher than the Texas average and more than 84% higher than the national average in 2023.

CENTRAL HEALTH
TRAVIS COUNTY HOSPITAL DISTRICT

Questions?

Thank You!

megan.cermak@centralhealth.net

NETWORKING ACTIVITY

Ask & Connect

Building connections across sectors in Central Texas Food is Medicine

1 Find Your Table

Your table number is on your name tag.

2 Fill Out Your Card

Top: what you can offer.
Bottom: what you're looking for.
2 minutes.

3 Share & Introduce

Go around and share your card with the table.
About 1 minute each.

4 Connect & Discuss

Find overlaps, spark ideas, or use the prompts on your table card.

45 minutes · Your table number is printed on your name tag

STEP 2 · ASK & CONNECT

Fill Out Your Card

Take 2 minutes. This helps you connect with others at your table.

Top · What I Can Offer

Skills, programs, connections, resources, or experiences I bring:

e.g. "I can offer connections to patients through a clinic-based program"
"I can offer evaluation and research support"
"I can offer insight into Medicaid or policy pathways"

Bottom · What I'm Looking For

A partner, resource, connection, or knowledge I'm seeking:

e.g. "I'm looking for partners in healthcare to pilot FIM"
"I'm looking for community organizations to partner with"
"I'm new to this space — here to learn where I fit"

STEPS 3–5 · ASK & CONNECT

At Your Table

3

Share & Introduce Yourself

Go around the table. Share your name, organization, and what's on your card — your offer and your ask.
About 1 minute each.

4

Connect & Discuss

Look for overlaps and spark ideas. Use the discussion prompts on your table card, or follow where the conversation goes.
Your table decides!

5

Exchange Contact Info

Use the contact sheets on your table to capture connections you want to follow up with. Take it home with you!

LARGE GROUP · ASK & CONNECT

Share Back

Each table shares briefly with the full group.

1. One thing someone offered that surprised you or sparked your interest
2. One need or gap your table identified in the Central Texas FIM landscape

Thank You

for being part of this community

Sandra, Elizabeth, Victoria, Aida, Chris & Alexis

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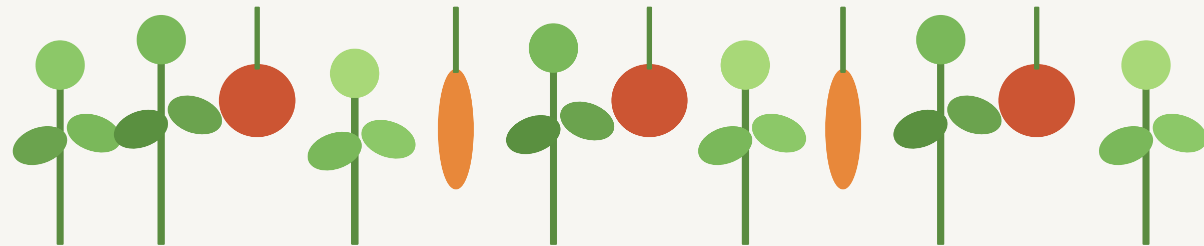
Stay connected — use your table card to exchange contact info!



We hope to see you at the next summit!