

## APPLICATION FOR COUNTY OF EL DORADO BOARD OF SUPERVISORS BOARD, COMMISSION, OR COMMITTEE

Clerk of the Board of Supervisors 330 Fair Lane, Placerville, CA 95667 (530) 621-5390 | edc.cob@edcgov.us

Board or Commission Applying For Youth and Families Commission	Vacant Position or Title Commissioner	
First Name <b>Terri</b>	Last Name Stratton	
	Residential City	Residential ZIP Code
Daytime Telephone	Shingle Springs           Mobile Telephone	95682
Occupation/Title Retired - Healthcare and Public Health Administrator.	Employer Retired. Formerly the Executive Director of El Dorado Community Health Center (9 years).	
List all County boards, commissions or committees to which you are/were Youth and Families Commission. Appointed to the Cor present with consideration for re-appointment. Short to health concerns of the county, opioid issue, treatment	nmission during the inaugura erm advisory groups focused	al launch, serving until d on health, including,
Summary of qualifications Prior Executive Director of the El Dorado Community Health Center, retiring in 1/2023. Served in this capacity for 9 years primarily serving the health, behavioral health, dental and now vision needs of approximately 20,000 residents. Many of these are on Medi-Cal, low income, foster youth, Medicare and some without insurance with high needs. Have brought this experience prior to the Commission, serving as a commissioner since its formation. Have strong knowledge of the health-related issues of youth and families in EDC. Have very well-established collaborative relationships with EDC HHSA and other Depts, Marshall Hospital, EDCOE, Shingle Springs Tribal Wellness, county leaders and non-profit and religious organizations in the county. Also served in leadership capacity with State Health Dept and EDC Dept of Public Health. As Executive Director of EDCHC, navigated the pandemic providing guidance and leadership to staff, patients, and community along with partners and I am well aware of the lingering effects from a health, behavioral health, education and related impact on our youth and families. Have a Master's in Public Health and have lived in EDC for 15 years.		
Affiliations with professional and/or community groups El Corado County Opioid Coalition; Marshall Hospital Community Planning Advisory Group; EDC ACELL with key community leadership partners. Now that I have retired, I am considering other community involvement and engagement to continue to tap my experience and skills to continue to serve my community.		
Why do you seek appointment? Very engaged and committed to the health and well-bei purpose of the Youth and Families Commission and ha appointment in 2019. I would like to continue to serve i continue to gain traction after the prior identification of in EDC. I value providing a shared vision with Commis gain clarity and direction.	ng of my community (EDC). ve been an active participant n this capacity as the Comm our greatest needs and cond	I believe in the mission and commissioner, since my ission efforts really cerns of these populations
Additional Information I value and believe in strong community collaboration t	o identify, and problem solve	e issues in our county.
If known, indicate the member of the Board of Supervisors who will receive (no value entered)	e a copy of this application	
File Attachments Terri Stratton Bio 2023.pdf		
Signature of Applicant*	Date 08/14/2023	
* You consent and agree that you are signing this document electronically. You further agre 08/14/2023 10:41:13, ID: 376, URL: https://www.edcgov.us/Government/BC	e that your electronic signature is as valid as if pS/CommissionsAndCommittees/Pages	you manually signed the document in writing. s/Application Form aspx 23-1593 D T of 1