

Location	Attendees
<p>Virtual</p>	<p>Governing Board Members Present: Molly Morris, Carlene Anders, Cathy Meuret, Christal Eshelman, Deb Murphy, Dell Anderson, Doug Wilson, Jesus Hernandez, Kaitlin Quirk, Ken Sterner, Nancy Nash Mendez, Ramona Hicks, Patti Paris, Rebecca Davenport, Rosalinda Kibby, Tory Gildred (Late)</p> <p>Governing Board Members Absent: Senator Warnick, Lisa Apple, Ray Eickmeyer</p> <p>NCACH Staff: Linda Parlette, John Schapman, Caroline Tillier, Wendy Brzezny, Sahara Suval, Mariah Brown, Joey Hunter, Teresa Davis – Minutes</p>
Agenda Item	Minutes
<ul style="list-style-type: none"> Review of Agenda & Declaration of Conflicts Public Comment 	<ul style="list-style-type: none"> Meeting called to order at 1:00 PM by Molly Morris. Molly started the meeting with a land acknowledgment. Honoring the open meetings act, all conversations need to be public. You can chat with staff member that is monitoring the chat and they can relay your message if you are having trouble speaking. Declarations of conflicts: None Public Comment: None ❖ <i>Nancy Nash Mendez moved, Deb Murphy seconded the motion to approve the consent agenda, motion passed.</i> <p>Change to the agenda: Code of Conduct will not be brought forward for approval today.</p>
<ul style="list-style-type: none"> Executive Directors Report 	<ul style="list-style-type: none"> Linda Parlette welcomed new Board member Patti Paris Linda explained the new format for the ED update, asked the Board members let her know if there are things that they would like to see. MTP 6th Year extension approved in the House and Senate, now in the Governor's budget. Basically the 6th year extension will be considered a bridge year to continue with current projects. Future waiver ideas will be discussed with HCA on April 13th during a 4 ½ hour Zoom call with the ACH EDs, Artemis Consultants and HCA. CHART Model: Community Health Access and Rural Transformation Model – goal is to drive modernization of rural health delivery systems by providing communities upfront funding and predictable finances through a capitated Payment Amount (CPA) and operational flexibilities through benefit enhancements and beneficiary incentives. I have been asked to co-chair the grant advisory council along with Dr. Judy Zerhan. Have volunteers - 3 Rivers, Mid Valley, North Valley, and Confluence. HB 1378 re: medical assistant reimbursement for telemedicine work - sponsored by Representative Alex Ybarra and Representative Eileen Cody passed. Southwest Washington ACH (SWACH) – Executive Director resigned, no details were given.

	<p><u>Community Based Care Coordination – aka CBCC</u></p> <ul style="list-style-type: none"> • Foundational Community Supports Demystified event will be held this week. • Linda and Caroline have met with Community Action Agencies from our region • Mapping connection between the recovery coach network and recovery CBCC model • Caroline is also coordinating meetings with other regional partners who manage care coordination to try to get the big picture of what is happening in the region around CBCC. <p><u>Telehealth</u></p> <ul style="list-style-type: none"> • Telehealth Assessment work has begun • Goal: Increase access to telehealth for organization’s patients • 3 CAH/RHCs, 1 CAH/Urgent Care, 2 FQHCs and 1 BH Org expressed interest • Colville Tribes will be meeting with Christian (Ingenium Consulting Group) on 4/13 • Presenting to Regional Hospital Meeting in May <p><u>Regional Healthcare meeting April 16th</u></p> <p>We will be discussing the continuum of care since we no longer have RSNs or BHOs. We will have updates from Parkside, Grant Integrated/Crisis Solutions, OBHC, Beacon and others.</p> <p><u>Organizational Updates</u></p> <ul style="list-style-type: none"> • Reminder that we had Mid-Month Staff updates by email on 2/28/2021 and 3/15/2021 • MTP SAR 6.0 Question & Conversation with HCA - Focused on understanding how NCACH is budgeting unexpended MTP funds <p>Many ACHs have put aside money from the Financial Executor Portal for future use, calling it wellness or resiliency fund. NCACH has chosen not to do this and has kept all of the funds in the portal. This is what Meyers and Stauffer has asked about. According to the Financial Executor portal activity report attached to the SAR, as of December 31, NCACH still has around 50% of funds available. While NCACH responded in the Scale and Sustain section that P4P funds have not been budgeted or obligated, current funds received to date are based on P4R. Please provide some context on how the remaining available funds (\$17M) are budgeted and obligated. Looking to understand how we are expending funds. John responded to the question by explaining that we have a \$9.4 million budget in 2021 with no expectation of revenue. This morning we received a notice that our answer was accepted.</p> <ul style="list-style-type: none"> • WRAP (Wellness Recovery Action Plan) – Staff participated in this workshop via Zoom and found it beneficial. • AmeriCorps host site (2021 – 2022 year) - NCACH submitted application due March 31st. Looking at how we can utilize AmeriCorps to support some work in future.
<ul style="list-style-type: none"> • Cambia Funding 	<ul style="list-style-type: none"> • NCACH received \$245,000 from Cambia Health Solutions to address urgent behavioral health needs intensified by COVID-19 in rural communities. • The funding opportunity was shared with the Behavioral Health Provider Alliance on January 25, 2021. The group, comprised of behavioral health providers from across the region, discussed potential issues that could be addressed, and the area that received the highest priority ranking was youth mental health and substance use,

	<p>with an emphasis on suicide prevention. During the discussion, Dr. Julie Rickard offered her assistance to NCACH, as she leads the Suicide Prevention Coalition of North Central Washington and Moment by Moment Suicide Prevention. Dr. Rickard presented the peer based program “Hope Squad” at the March 2021 Governing Board meeting and suggested that we adopt it as a regional approach. Mariah followed up by emailing a draft budget to the Board and offering to answer any additional questions from Board members. The final budget is being presented today with two options of a two year and four year option.</p> <p>❖ <i>Kaitlyn Quirk moved, Jesus Hernandez seconded the motion to approve Option 1 below and utilize the Cambia Health Solutions investment to adopt the Hope Squad model that provides a regional, peer-to-peer, school-based curriculum focused on wellness and resiliency to address inclusion, mental health, bullying, and substance use. The Hope Squad model will be offered to all middle and high schools in the region that are interested in participating. The budget also includes a coordinator from Together for Youth that will provide support and assistance with implementing curriculum.</i></p> <ul style="list-style-type: none"> • <i>Option 1: Approve funding for Hope Squad training and curriculum and 4 year coordinator position in the amount of \$456,736. Motion Passed</i> • <i>Option 2: Approve funding for Hope Squad training and curriculum and 2 year coordinator position in the amount of \$363,880.</i> <p>Discussion:</p> <ul style="list-style-type: none"> • Christal – Is there a staff recommendation? Staff recommends option 1 for 4 years / Hosting Fee? It will be paid for out of the FE Portal, so there will not be a fee. • Hiring of the coordinator? Together for youth will be organization contracted for the coordinator. In addition to the coordinator they have also been approved for an intern for the year. • Hourly wage for the position. It is a contracted wage handled by Together for Youth. • Funding allocation for each school district covers the curriculum for each school. • Jesus is cautious about districts being able to allocate staffing to this work. Maybe this is something that we could help with. Julie’s response – the hope is that we will create pods to help schools with barriers. Jesus feels that there are partnerships that can be leveraged with BH providers. • Dell – Sustainability? That is why we want to do a 4 year model. We will hard wire it into the environment. After the 4 years, the curriculum is \$500 for a school to keep up • Is one Coordinator enough? Hope Squad is providing us with some training staff in phases. There are also some other volunteers that will help as well. • Ken – How will we be able to measure success? Referral numbers and suicide/self-harm numbers in our area. • Is there a preliminary buy in? She has a lot of interest in Chelan/Douglas and talks have started in Grant County.
<ul style="list-style-type: none"> • Code of Conduct Policy 	<p>John Schapman explained that at the suggestion of Ken Sterner, we sent the Code of Conduct policy to our attorney for review. The policy does not speak to enforcement of the policy. John will send the updated version to the Board and</p>

	invite questions and comments. The policy will be brought back for approval at the May meeting.
<ul style="list-style-type: none"> Strategy Workgroup Update 	<p>Chris Kelleher gave an update on the strategy workgroup.</p> <p>John went over the 2022 Current State Priorities compared to staff priorities.</p> <p>NCACH/Staff priorities (building on current work)</p> <ul style="list-style-type: none"> Whole Person Care Collaborative Implementation of Telehealth Assessment Plan Recovery Support (including Recovery Coach) Expansion of Community Based Care Coordination Plan Support for Coalitions for Health Improvement (including capacity funding) <p>HCA priorities (MTP Year 6) under consideration – not final</p> <ul style="list-style-type: none"> COVID-19 response and recovery Community resiliency – improving community health and population health Social determinants of health and health equity <p>Staff has been struggling with 2022 as the strategy workgroup is planning for beyond 2022. John presented the following 2022 assumption for Board comment and feedback.</p> <ul style="list-style-type: none"> In 2022, NCACH staff will guide how to build on or ramp down current initiatives, including any expectations from the 6th year MTP extension. Staff will stay aligned with Strategy Workgroup to phase in a post Medicaid Transformation future. <p>❖ <i>Board consensus was that staff can plan to continue with the current work and budget into 2022.</i></p>
<ul style="list-style-type: none"> 2019 CHI Community Initiatives Partner Updates 	<p>The following funded partners gave presentations on their projects:</p> <ul style="list-style-type: none"> Chelan-Douglas Community Action Council Alan Walker and Britany Meiklen Oxford House Transportation Solutions Committee Kelly Rimbey, Kelsey Gust, Brooklyn Holton and Kaitlin Quirk Okanogan County Community Action Council Jennifer Short <p>See presentations in the Board packet: http://www.mydocvault.us/uploads/7/5/8/6/7586208/04.05.21_gb_packet.pdf</p>
<ul style="list-style-type: none"> Announcements & Adjournment 	<ul style="list-style-type: none"> Christal has accepted a position at Community Health Plan of Washington and this will be her last Board meeting. Nancy Nash Mendez – had ground breaking ceremony for a 16 unit senior housing building in Okanogan County. Per Linda Seattle Times interviewed Ray about his trip to Stehekin. Meeting adjourned at 3:31 PM by Molly Morris