

Whole Person Care Collaborative Meeting

Monday, June 4, 2018

11:00 AM – 12:45 PM **Okanogan Behavioral Health Care**, 1007 Koala Dr, Omak WA 98841

<u>Proposed Agenda</u>	<u>Goals</u>	<u>Notes</u>
<p>1. Introduction Peter Morgan</p>	<ul style="list-style-type: none"> • Introductions and Roll Call • Approve Agenda and Minutes from May mtg • Follow up items from May meeting 	<p>Attendance: Kris Davis, Shirley Wilbur, Jim Novelli, Tawn Thomson, Clarice Nelson, Kate Haugen, Alan Fischer, Sherill Castrodale, Ryan Stillman, Blake Edwards, James Wallace, Barry Kling, Deb Miller, Pete Erickson, Linda Parlette, Karen Jacobson, Courtney Ward, John Schapman, Becky Corson, Traci Miller, Dawn Barton, Jillian Dailey, Tandy Gleason, John McReynolds, Jesus Hernandez, Molly Morris, Caroline Tillier, Julie Distael, David Olson</p> <p>Phone Attendance: Renita Cook, Amy Webb, Lisa Cordova, Laurel Lee, Sheila Chilson, David Kolde, Gwen Cox, Rachael Petro, Sara Barker, Ramona Hicks, Roger Chaufourmier, Connie Davis, Hayley Middleton, Richard Donaldson, Kris Neff, Lisa McDonald, Malcolm Butleri</p> <p style="text-align: center;">❖ Jim Novelli moved, Kris Davis seconded the motion to approve the May Minutes, Approved</p>
<p>3. WPCC Workgroup Activities Caroline Tillier Kathy Reims (CSI)</p>	<ul style="list-style-type: none"> • Provide updates from WPCC Workgroup meeting <ul style="list-style-type: none"> • Issues on the table • Future Workgroup plan Q&A and discussion with members 	<p>Workgroup updates:</p> <ul style="list-style-type: none"> • Template Measures: remove measures that are no longer required by HCA and that are hard to specify/measure. <ul style="list-style-type: none"> ○ Measures that were dropped, Asthma Action Plan, Monitoring blood pressure. Many are on chronic care and bidirectional integration. • Need to clarify expectations around change plan • Stage 2 Funding: no further recommendations on base+ framework, but change plan evaluation and impact on funding up for discussion on 6/14 <ul style="list-style-type: none"> ○ Framework is now set, the next step is to set the change plan evaluation standards. • Reminder/Clarification: WPCC is expected to address all six projects, with a focus on bi-directional integration and chronic disease management, while also integrating SDOH and Access <ul style="list-style-type: none"> ○ Outcomes in one area are not likely to change unless we work in all areas.

<p>3. WPCC Recent Activities Summary Caroline Tillier Peter Morgan</p>	<ul style="list-style-type: none"> • Status summary of Learning Community <ul style="list-style-type: none"> • Participation • Feedback • Opportunities to improve • Observations and takeaways (Staff & CCMI/CSI) • Discussion and next steps 	<p>Portal registration is at 72%, we continue to reach out to people personally. Have had four webinars to date on the change plan LAN. All calendar items and access to resources are on the portal.</p> <p>Feedback on LAN: Comments have been generally positive, participation has been up and down. Many have said that the change plan template was easier than they anticipated.</p> <p>Comments from WPCC members at meeting:</p> <ul style="list-style-type: none"> • David Olson at CVCH they feel that they know what they are doing and where they are going. • Jim Wallace has not participated in the webinars. They are going through a process to try to decide who should attend which webinar and the person that attends transmits the information to the team. • Jesus: Recommended that every webinar end with questions for the group to come back and answer at the next meeting to keep people engaged. • Recordings of webinar are up on the portal. <p>Next steps: Peter emailed all members to schedule a time for one-on-one sit downs to check-in on the process to date. Want the Change Plan Quarterback, Transformation Champion and Measurement Captain to attend.</p> <ul style="list-style-type: none"> • There is a survey link in the email. This is an opportunity to weigh in on what is important to your organization. • Teresa will be contacting everyone to schedule a time.
<p>4. Future LAN Offerings Peter Morgan Caroline Tillier</p>	<ul style="list-style-type: none"> • Revised schedule of future Learning Activities • Process for sign up • Questions and Answers 	<ul style="list-style-type: none"> • First couple of LANS are planned for a start in July. Detail of length of LANS and timing is in today's packet. • With Zoom, we can create virtual breakout rooms so that we can engage teams who are different stages and want more of a challenge within a LAN. We are going to go through a formal process to register people for the LANs. We will need commitments from organizations that want to participate on the LANs soon, so that we can plan for faculty. <ul style="list-style-type: none"> ➤ Sheila: Said that the offerings are exactly what they need to be. 4 opportunities going on in one month (August and September) is a lot. She thinks it is ok to incorporate webinars December and January. Timing and overlap will be a challenge. ➤ David Kolde would like a more detailed syllabus a for these offerings before he can commit team members.

		<ul style="list-style-type: none"> ○ Next step to get faculty and hone the syllabus/curriculum.
<p>5. Adjourn</p>		<p>Roundtable:</p> <ul style="list-style-type: none"> • CVCH in the process of finalizing their aims and entering that into the portal and will be meeting with other health centers to see where they can learn from each other. • Catholic Charities: met with Gwen and Rachael, and they are in the process of starting the integration clinic. • Mid Valley: Met with Gwen on getting plan ready. It is done, now they are working on going back and looking at it to make sure that they like what they put in there (including adjusting the timelines.) • OBHC: Met with Gwen multiple times and working on the change plan. Working with colleagues on the outside for integration. • Children's Home: Feel good about what they are planning. Has reached out to another Behavioral Health Clinic in another ACH for ideas. • FHC: Developing change plans. Deciding what to standardize from site to site. Excited about the collaboration with other organizations. They are focusing on the SDOH. BH is integrated within the clinic, have not figured out how to work with the MCOs. BH plan has been built upon a CHPW initiative - concerned about how to move forward and be sustainable with different MCOs. • Tawn: Change plan is not as hard as anticipated. Initial empanelment takes a lot of time. • Gwen: Empanelment and registry are huge pieces. This is the hardest part. • Coulee Medical Center: Agrees with Sheila on timing. Appreciates the email for the one on one meeting. • Grant Integrated: Completed initial change plan, reviewing aims and measures. • MLCHC: Working with Rachael, need to focus on aims and they have meeting scheduled next week to get things done. • Samaritan: Looking for ways to be sustainable, looking forward to working with MCOs and other payers. • Cascade Medical: Awaiting final PCMH status. Put together draft aims and will be meeting to further refine those. Making good progress. <p>Sustainability may be a topic for a future learning opportunity</p> <p>Meeting Adjourned at 12:33 PM</p>