## Agenda

<table>
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<tr>
<th>Proposed Agenda</th>
<th>Goals</th>
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| **1. Welcome & Introductions**  
Eric Skansgaard | Review of last meeting minutes  
Update on Goals of Meeting |
| **2. Small Group Updates**  
Subgroup Members | Transitional Care Group & ED Diversion small groups have been meeting and have come up with an approach.  
John went over the selected approaches summary. This will be in a formal report to the state. |
| a. Transitional Care Model (25 min) | TCM - Review process and funding associated with TCM (Determine next steps to approve process – Approve if ready to proceed forward)  
ED Diversion - Review current plan (Goal is to have defined process by July meeting)  
Paramedicine – Update of current work occurring with NCECC  
Will include updating group on discussions with Law Enforcement Diversion |
| b. ED Diversion (20 min) | |
| c. Paramedicine (5 min) | |

### Attendance:
Eric Skaansgard, Dina Goodman, Linda Parlette, Kelly Allen, Deb Miller, Edgar Reinfield, Misty Viebrock, Christal Eshelman, Alisha Kramar

### Phone Attendance:
Vicki Polamus, Laina Mitchell, Tracy Miller, Shannon Mack, Rick Hourigan, Lauri Bergman, Molly Morris, Misty Kuntsman, Julie Rickard

Minutes: Review of minutes - approved
### Project Update – TCM & ED Diversion

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<thead>
<tr>
<th>Transitional Care Management:</th>
<th>Emergency Department Diversion:</th>
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<tbody>
<tr>
<td>• Approved Approach</td>
<td>• Selected initial approaches</td>
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<tr>
<td>• Developed draft budget proposal</td>
<td>• Draft application for engagement</td>
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<tr>
<td>• Creating toolkit for region to utilize</td>
<td>• Draft budget including incentive funds for partners engaged</td>
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<tr>
<td>• Finalizing Engagement Documents</td>
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### Next Steps:

1. Finalize an engagement document for regional providers
2. Finalize recommended funding mechanism to support implementation partners
3. Outline timeline for partners to engage in work

### Applications for engagement

**TCM & ED Diversion:** 10 eligible organizations:

1. Cascade Medical Center
2. Columbia Basin Hospital
3. Confluence Health (Central Hospital)
4. Coulee Medical Center
5. Mid-Valley Hospital
6. North Valley Hospital
7. Quincy Valley Medical Center
8. Samaritan Healthcare
9. Three Rivers Hospital
10. Lake Chelan Community Hospital

Application Process: These are two different applications (see meeting packet for samples). OHSU is helping us with this process. They are recommending that we
combine the two applications so that there is just one application per organization. The idea is to keep the application fairly simple.

*Group decided to combine the applications.*

**Additional Communications**
- add a box for other community partners involved
- Just keep last 2 sentences about WPCC (Shorten the paragraph)

Next steps: The subgroup meeting the 12th will fine tune the applications. John will send out to the workgroup for an online vote.

**Funding Distribution (Partner Distribution Recap):**

- Subgroups define a common list of goals/barriers to help implement projects within the region.
- NCACH develops a plan to address barriers and implement changes including:
  - Training needs
  - Direct Organizational investments (i.e. funding to offset staff cost to train)
  - Enhancements in workforce training and health information exchange (i.e. help with the implementation of EDIE/Pre-Managed across region)

- Group decided that they did not need to see detailed budget spreadsheets. It can be discussed at the small group level.

- EDIE Training, John does not have cost of using. Discussion: EDIE does not charge as they want people to use their system. May need some dollars to train organizations on how to imbed it in their workflow.

- Suggestion of investing to have EDIE talk to the EMR of organizations.

- Return on investment - standard ER visit $1500. We need to be looking at ROI's.
**Bonus Payments:** Incentivizing to collaborate across project or geographical regions? For larger orgs may not need to incentivize but smaller facilities may need incentives to complete the work.

- John will connect with Deb and Kelly to work this out.

Deb wants to keep “Where to CBO's fit into all of this?” on the radar

**Law Enforcement Diversion Group:** Meeting regularly to come up with a system for entering Parkside. Captain Reinfeld went over the roadmap to entering Parkside. This will be given to all PD's in the area. The goal is to get the local people into these Parkside beds.

**EMS Update:** Signed an MOU with Cindy Button to develop a plan for a process to diverting people from the ED. They will be submitting a plan before August 31st. Cindy will be giving an update to the Governing Board on July 9th.

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<th>3. <strong>NCACH Workgroup Updates</strong></th>
<th>Discuss alignment between projects/workgroups</th>
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<tr>
<td>a. Pathways Hub Workgroup (10 min)</td>
<td>Christal Eshelman gave an update on the Pathways Community HUB. The starting target population is 3 or more ED Visits in the past 12 months in Grant County specifically the 98837 in Moses lake. The geographical area will expand over time. Starting in Grant County October 2018, Chelan Douglas in mid 2019, then Okanogan late 2019. Target launch date is October 1st, 2018. Working on developing the CCA network and the referral process.</td>
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<tr>
<th>4. <strong>Roundtable/Adjournment</strong></th>
<th>Meeting format for July/August/September Roundtable of workgroup members in room and on phone</th>
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<tr>
<td>Eric Skansgaard</td>
<td>Skip July meeting - reconvene in August. John will email application to group with an electronic vote so that he can present to the Board for approval.</td>
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