

Location	Attendees
<p>Virtual Meeting</p>	<p>Governing Board Members Present: Blake Edwards, Rick Hourigan, Doug Wilson, Cathy Meuret, Molly Morris, Brooklyn Holton, Ray Eickmeyer, Senator Warnick (until 2:09 PM), Carlene Anders, Rosalinda Kibby, Nancy Nash Mendez, Ramona Hicks, Ken Sterner, Deb Murphy, Christal Eshelman, Lisa Apple</p> <p>Governing Board Members Absent: Jorge Rivera</p> <p>NCACH Staff: Linda Parlette, John Schapman, Caroline Tillier, Wendy Brzezny, Tanya Gleason, Sahara Suval, Mariah Brown, Joey Hunter, and Teresa Davis – Minutes</p>
Agenda Item	Minutes
<ul style="list-style-type: none"> • Declaration of Conflicts • Approval of Consent Agenda • Public Comment 	<ul style="list-style-type: none"> • Meeting called to order at 1:00 PM by Blake Edwards • Declaration of Conflicts: Christal Eshelman will abstain from the FQHC Board seat vote <ul style="list-style-type: none"> ❖ Rosalinda Kibby moved, Brooklyn Holton seconded the motion to approve the consent agenda, motion passed. • Public Comment: None
<ul style="list-style-type: none"> • Executive Director Report 	<ul style="list-style-type: none"> • Acknowledged all of the work that first responders and fire fighters have been doing in the area. • Newsletter provided a summary of where NCACH is with all of the projects • Introduced Joey Hunter a new employee that NCACH hired as the Recovery Coach Network Coordinator.
<ul style="list-style-type: none"> • NCACH Finance Update 	<p>2020 YTD Financial Summary: Brooklyn presented a summary of where the NCACH 2020 budget sits for both accounts (see page 12 of the packet). In the Financial Executor Portal account we are 20% under budget because of the project pause due to COVID-19. As workgroups and meetings start back up, we will start to see some spending catch up. We will bring another update when we bring the 2021 draft budget in November. John Schapman noted that we also had a significant amount budgeted to the Pathways HUB and we discontinued that project.</p> <p>Monthly Financial Report: Page 13-16 Brooklyn shared where we are at right now in the CDHD and FE account. Currently, we have just over \$17 million in FE Portal and just about \$3 Million in the CDHD account. We should have more than \$10 million left at the end of next year if we stay on budget.</p> <p>Linda noted that HCA has been talking to the Executive Director’s because they are asking the legislature and CMS to extend the project for another year due to COVID. We will not know the answer on extending or if there will be additional funding for the extra year until after the legislative session ends.</p> <p>2021 Budget Planning Timeline: Page 17, John went through our expected timeline for the 2021 budget. Initial draft budget will be presented to the Board in November and final budget for approval at the December meeting.</p>

	<p>Questions to the Board:</p> <ol style="list-style-type: none"> Should we create a committee of about 4 Board members to help with budgeting? Committee may have a retreat to help develop at budget. Rick noted that we need to be paying attention to the pay for performance measures – especially this year. We may not want to count on any pay for value money coming in. Brooklyn noted that we did not budget with the intention of receiving any of those funds. John noted that HCA can't take back any money that is currently in our account. <ul style="list-style-type: none"> ➤ Consensus was to create this committee. John or Brooklyn will send a follow up email to get volunteers for this committee. Is a refresher needed on the different projects? Refresher is needed. Will present this in October or November. A one page summary with results for each project would be helpful, include how COVID effected the project. Should we be budgeting any money toward COVID-19? Ken suggested looking into supporting vaccinations. Doug agreed that many organizations are trying to plan. Some vaccines are going to require a -80 degree freezer and there are very few in our area, this may be something that NCACH can help support.
<ul style="list-style-type: none"> Board Nomination 	<p>Dr. Hourigan facilitated the discussion. The FQHC sector is nominating Jesus Hernandez for the FQHC Seat. The nominating committee is bringing the nomination forward without recommendation. The vote is being held via Survey Monkey with John Schapman being the only person that will see the results.</p> <p>❖ <i>Nancy Nash moved, Ramona Hicks seconded the motion to approve the nomination of Jesus Hernandez to the FQHC sector seat on the NCACH Governing Board for the term that goes till December 31st, 2022, survey results showed a majority vote for Jesus to be on the NCACH Governing Board, motion passed (Christal Eshelman and Blake Edwards abstained).</i></p>
<ul style="list-style-type: none"> Strategic Planning 	<p>Proposed Mission Statement: <i>Advance whole-person care and health equity in North Central Washington by unifying stakeholders, supporting collaboration, and catalyzing systemic change, with particular attention to the social determinants of health.</i></p> <p>Poll will be sent out with the following questions for Board and Staff with the following questions and space for additional input:</p> <ol style="list-style-type: none"> Should the initial phrase be replaced with the more layman-friendly phrase, “Help the residents of North Central Washington achieve their full health potential by . . .” Should we omit the social determinants of health from the end of the mission statement? Should we replace “collaboration” with “collaborative efforts”? Should we replace “catalyzing” with “driving”? Should we delete “in North Central Washington”?

Discussion:

- Many in favor of using a layman friendly phrase.
- Rick suggested facilitate instead of help.
- Brooklyn is more in favor of keeping the language that is in the original statement.
- Molly noted that those are key phrases that are searched for. Also strongly supports SDOH staying in the statement as that is where we are heading.
- Ramona agrees with the statement as written, many organizations have bought into WPC.
- Jesus - Health Equity and WPC are very with the times. The health care sector alone can't achieve this goal we need to engage other sectors.
- Christal - Whole Person Care should be changed to Whole Person Health, SDOH is included in Health Equity and WPC.
- Brooklyn said as we are trying to bring in other sectors that may not connect with Health Equity, in a non-clinical world they need to see SDOH.

Strategy Workgroup

Chris Kelleher presented the charter to create a workgroup that will focus on the development of NCACH strategies and business models of the NCACH.

Charge of Workgroup:

- The Strategy Workgroup is charged with developing NCACH's post-MTP strategies and producing a well-integrated business plan. The Workgroup will identify new activities that will be necessary for fulfilling the organization's post-MTP goals and will also identify current activities that might be carried forward. This will lead to the development of clearly articulated strategies that are subjected to rigorous testing for business viability. The Workgroup will obtain input from community stakeholders, staff, partners, and prospective customers.
- This workgroup will meet outside of board meetings to ensure strategic planning and strategy development moves forward in a timely manner, and will provide regular updates and gather input from the full board throughout its process. The workgroup will be made up of the following:
 - Board Chair
 - 2 NCACH Staff Members
 - 4 NCACH Board Members (apart from the chair) that do not sit on the Executive Committee

Difference between governance committee and this committee: Governance is focused on current policies and this committee will focus on post Medicaid Transformation Project. There will be some level of crossover in the future.

	<p>❖ Carlene Anders moved, Brooklyn Holton seconded the motion for approval of the NCACH Strategy Workgroup and guidelines for the committee as outlined in the charter.</p> <p>*Discussion: Will there be an additional approval for the consultant time to move this group forward. It is already in the budget for 2020, we will need to budget for a consultant next year. Motion passed.</p> <ul style="list-style-type: none"> • <i>Link for poll questions will be sent out from Chris Kelleher, Board Members and staff are asked to answer within 3 days.</i>
<ul style="list-style-type: none"> • Tribal Engagement Updates 	<p>Molly Morris gave an update on Tribal Engagement</p> <p>She shared the Tribal Tribune which is the news outlet for the Colville Confederated Tribe.</p> <ul style="list-style-type: none"> • Reservation is closed to outside visitors through December. • 8 tribe members with COVID currently • Received over \$28M in Cares Funding. They are offering \$700 relief per tribe member and a one time \$1000 grant for housing assistance. • Currently 5 fires on the reservation. Paper Mill burned down. • Process for donating – Reach out to Billie Nicholson CFO at the Colville Tribe, not through an employee. • There are Facebook sites that are accepting donations of items as well. • Indian Health Services has granted moving forward with the Omak Clinic. • Internet is a huge issue on the reservation. <p>How do they communicate in an emergency? The fastest way is through Facebook. There is also the Tribal Broadcast that is done through email. Carlene noted that the communication between the tribe and the county has been really good since 2015.</p>
<ul style="list-style-type: none"> • NCACH Staff Updates 	<p><u>Social Media Proposal – Sahara Suval</u></p> <p>Sahara shared the reasons why NCACH should consider adopting a social media presence which include:</p> <ul style="list-style-type: none"> ➤ Increased regional community engagement ➤ Data collection and impact sharing ➤ Increased health literacy ➤ Advances health equity ➤ In addition: During COVID 19 – NCACH developed many public facing strategies that relied on third-party support for sharing on partner social media channels. <p>NCACH Is planning to contract with Digital Media Northwest (DMNW) with a contract of up to \$9,000 per year.</p> <p>Discussion:</p> <ul style="list-style-type: none"> • Brooklyn suggested bringing DMNW into the reporting section. • Jesus thinks communication is essential and supports this. • Many strongly support it – keep the Hispanic community informed. • Be looking at how to continue the work past a year whether it be contracting or bringing the work in house. • Price tag is very reasonable and we can re-evaluate after the year.

- Need to make sure that DMNW are capable of reaching the Spanish speaking population
- ❖ ***Nancy Nash Mendez moved, Deb Murphy seconded the motion to adopt a social media presence and approve \$9,000 to contract with an outside organization for content development and platform support for one year. *Motion is contingent on DMNW being able to provide the content in Spanish. No further discussion, motion passed.***

Telehealth Discussion – Wendy Brzezny

In previous meetings, the Board identified 4 buckets to focus on:

- Education
- Broadband
- Patient access
- Providers infrastructure

What do we know about Telehealth?

- Increases access
- Decreases no show
- National Movement
- Addresses SDoH
- Access the way the patient wants
- Minimizes time a patient takes out of their day

Proposal is to approve one of three telehealth investment options, that would be made available to clinical providers in the North Central Region:

Option 1: Motion to approve a telehealth capital investment fund up to: \$500,000 (up to \$25,000/organization).

Option 2: Motion to approve a telehealth capital investment fund up to:\$1,000,000 (up to \$50,000/organization)

Option 3: Motion to approve a telehealth capital investment fund up to: \$1,500,000 (up to 75,000/organization)

The small capital investment fund would not require additional policy and procedures to be adopted whereas the medium and large capital investment would necessitate adoption of policy and procedures demonstrating processes and workflow designed to improve access to care outlined in the RFP.

Discussion:

- Rick – loves the idea and we need to do something. Would also like to do something around education, we can encourage and make patients feel safe using it. Would like to unlink the total amount from the per organization allocation.
- Doug – Would like to see an organization that could coordinate this throughout the entire area. Would like to encourage organizations to work together.
- Jesus - This is a great opportunity to partner with K-12 and link to online learning. Schools can become WiFi community centers. Transportation may be an issue.

	<ul style="list-style-type: none"> • Brooklyn – Where would it fall in the budget? John responded A good part of it will be covered under the original WPCC unspent funds. • Cathy – concerned that it could become fragmented, we need to really look long-term and broadly about what could be done and support other things that could benefit the community. <p>Rick moved Ray seconded the motion to approve Option 3: Motion to approve a telehealth capital investment fund up to: \$1,500,000 in the region. *without an allocated amount per organization.</p> <p>Discussion:</p> <ul style="list-style-type: none"> • Jesus – remove the requirement of a healthcare provider – make available to any partner clinical or not. • Entire Board agreed to wait to make a decision at next meeting after more discussion, Rick withdrew his motion. We want to support Telehealth, we just want more of a discussion. *Clarification that we are looking to support telehealth not tele education. <p>Additional information needed for next meeting:</p> <ul style="list-style-type: none"> • K12 partner input • Put it at the top of the agenda with more time
<ul style="list-style-type: none"> • Adjournment 	<ul style="list-style-type: none"> • Linda announced that Liz Baxter from North Sound ACH is delivering up to 400,000 masks to emergency management in Okanogan County tomorrow for fire victims. • Meeting adjourned at 3:34 PM by Blake Edwards