**North Central Design Grant Lead Group**

**Meeting Notes – May 21, 2015**

Members Present: Deb Miller, Cathry Meuret, Barry Kling, Ken Sterner, Carmen Switzer, Lauri Jones, Bethany Osgood, Ben Lindekugel, David Escame, Nancy Warner, Erin Hafer, Jeff Davis, Jorge Rivera

 Meeting called to order at 2:04 p.m.

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| **AGENDA ITEM** | **DISCUSSION/RECCOMMENDATIONS** | **ACTION-FOLLOW-UP** |
| Early Adopter Report/Update | Barry reminded the group of the CD RSN submittal to HCA of a non-binding LOI to be an Early Adopter. The next step is for HCA to accept LOI (has not happened yet) and then regions can submit binding LOI by proposed date of June 1 (or close to that date). SB 6312 may be an obstacle. Ben talked with Sen. Parlette and she is supportive but wants support from jurisdictions. Ben, Barry, and Jeff Davis met with the regional hospitals. Hospitals will write letters to their commissioners supporting the decision. Hospitals are asking Ben for talking points for the support letters. Ben will circulate these talking points with Lead Group when drafted. Lauri reiterates the need for help in explaining the benefit and what it means if the Early Adopter status doesn’t happen. | **Ben** will share talking point draft with Lead Group |
| 1. b. Hospitals (non-Confluence) | Ben brought member input in favor of adding an additional non-Confluence hospital seat to the Governing Board. In the NC ACH region there are 14 PHDs in the 4 counties (larger than any other in the state). Samaritan Hospital is not a CAH and therefore doesn’t deal with the same issues that CAH do and there is a need for CAH perspective in this work moving forwad. Public Hospital district is a broader group with rural health clinics and bring another element to the table. Being able to keep hospitals connected to primary care is critically important in the process moving forward. The hospital group (via Ben) proposes an additional non-Confluence Hospital board seat bringing the total to 2 (1-CAH and 1-PHD) Of those in attendance there was no opposition to this proposal. Ben will take this back to the group to get nominations for the 2 available seats.  Ben and Lauri praise Barry for his Leadership through this process. | **Ben** will report back names of proposed nominees or an update of process at the next Lead Group meeting |
| 1. Governing Board a. Seat Nominations | **Business Community**-No report today. Nancy had a brief discussion with EDD in Twisp and reports there is an opportunity to outreach to the group later in the summer. She suggests bringing a proposal to the EDD board separately. Barry will follow up with the group.  **Behavioral Health-**No report today. Gail will work on it next week and report back at next meeting.  **Confluence Health-Confluence**- Dr. Rutherford has asked Jeff Davis to represent Confluence for the CWH seat. No one has been decided for the primary care seat at this time. Jeff will bring a report to the next meeting.  **FQHC**-Barry reported that FQHC CEO’s have voted Patrick Bucknum to take the seat.  **Public Schools-**Cathy reports that Rich McBride is still working on decision for the public schools seat. She has recommended the seat title be changed from Public Schools to ESD.  **Public Health**-Lauri reported that she and Jeff talked and unanimously voted Barry to the Public Health Seat.  **Aging and Adult**-Ken reported that he and Bruce are proposing that Bruce be named to the seat with the understanding that Ken will stand-in as a non-voting alternate when needed (per the Governing Board Obligations and Norms item 5 of the proposed charter)  **Hispanic Community**-Deb reported Jesus’ progress in meeting with 3 potential nominees (of 5 potential). Jesus will report his recommendation at the next meeting.  **Health Plans**-Carmen has contacted area MCO’s. There has been discussion around the decision making process. The group plans to meet in early June (tentative date of June 8th) Carmen will report progress at next meeting.  **Tribal Representative**-Lauri had talked with Mel Tonasket and Sally Hutton and the two will be offering their suggestions on a nominee. Lauri will report progress at the next meeting. | **Barry** follow up with EDD  **Gail** report on Behavioral Health seat next meeting.  **Jeff** will report Confluence primary care seat at next meeting.  **Cathy** will report the ESD seat nominee at next meeting.  **Jesus** will report the Hispanic seat nominee at next meeting.  **Carmen** will report progress at next meeting.  **Lauri** will report progress at the next meeting. |
| 1. Stakeholder Backbone interest letter | Deferred to next meeting | **Barry** will have a report at the next meeting. |
| 1. Upcoming CHI meetings | Chelan-Douglas CHI (9:00 a.m.-11:00 a.m.)   * July 10 * Oct 2 * Dec 11   Grant CHI (9:30 a.m.-11:30 a.m.):   * July 15 * Oct 21 * Dec 16   Okanogan CHI (10:00 a.m.-12:00 a.m.)   * June 16 * Sept 15 * Dec 15 |  |
| 1. Revised Governance Plan | Deferred to next meeting. Barry reported that Jesus submitted a draft on board role description. | **Barry** will have a report at the next meeting. |
| 1. Feedback to Stakeholders/Communications Plan | Waiting for the final Governance Board Draft revision. Deferred to next meeting when the group will discuss communication plan to get information out to the stakeholder list. At previous meeting it was decided an overview letter would be drafted that explains the process/story for arriving at the decisions and will include all survey responses. |  |
| 1. Outreach Opportunities | It has been noted that there is still little knowledge about this regional work and even some stakeholders who have been participatory in the ongoing process haven’t grasped the breadth of the work. Barry agrees that outreach is an important piece in the process moving forward and suggests that now might be the time to begin planning strategies for a process of communicating the work. Deb reports starting a chart of potential networking meetings where outreach can be taken. Cathy feels the “messaging” is important and the need for presentations that meet the needs of the audiences will be key. Nancy reminded the group of earlier discussion of creating one-pagers with updates that can be shared at CHI meetings and can also be shared with a wider audience for engagement as well. Deb, Nancy, and Cathy have agreed to work on developing an outreach plan.. | **Deb**, **Cathy**, and **Nancy** will report on outreach plan. |
| 1. Upcoming HCA meetings/Learning Opportunities | HCA has a webinar scheduled on May 28th on the 1115 Medicaid waiver. There are 3 “seats” per ACH available. Peter will be attending virtually. Deb, Jesus and Barry are not available to attend on that date so there are 2 open seats if any Lead Group members want to attend. Deb will forward the email information out to the group. | **Deb** forward webinar information to group. |