

Okanogan Coalition for Health Improvement  
Meeting Notes  
June 27, 2019, 12:00 PM to 2:00 PM

**Introduction-All**

Attendance- SEE SIGN IN SHEET

**2019 CHNA Focus Group Activity-Paige Bartholomew**

- Every 3 years a CHNA (Community Health Needs Assessment) is conducted to identify the needs and direction to improve the health and wellness of the community. Those conducting the CHNA decided to use the CHI meeting and have the members participate in the focus groups. Today, the strengths, weaknesses, opportunities and threats of Okanogan County will be discussed. The sign in sheet will help identify agencies and zip codes. After the CHNA Focus Group we will dive down into a discussion about the hospitals.

**2019 CHNA Focus Group Activity Recap and Report Out- Facilitated by Paige Bartholomew**

- Did anything stand out or surprise you?
  - Common themes that fit into the different categories, such as access to healthcare, transportation and aging population.
  - The strengths were the most fun to dig deep into. That category would be fun to go over more.
- Additional thoughts?
  - A great conversation around weaknesses, but was apprehensive because no one wanted to throw people under the bus. Our region needs to think critically, strategically and see the opportunities.
  - Okanogan County is diverse but tends to be segmented into cultural areas that do not overlap very much. The county has a lot going on, but needs to bridge gaps better. Diverse attitudes and ideology of different areas makes it hard to bridge gaps.
  - This coalition is showing up as a group and battling the weaknesses together. This has increased our work. We as a CHI are going to work on this instead of thinking someone else will do it.
  - Common themes will be included in the priority report. The report will be done in the fall. There will be access to the data in raw form. This information will be given to the Okanogan County CHI Leadership Council.
    - Do you qualitative data?
      - Health indicators and the CHNA community voice survey. There was over 5,000 responses for the region.

**Discussion Around Community Health Needs and Concerns: Facilitated by Sahara Suval**

- We will continue the discussion around the needs of the community of Okanogan County. A request came from the hospital to have a conversation. We recognize that all sectors are not here. The hope is that we can build off of the CHNA Focus Group themes. This could be a multi-day conversation. For those who are partners in this community, we hope that this will be

directed to those who will be affected. There possibly will be a town hall in August provided by the Okanogan CHI. This is an open conversation.

- Do you want us to identify if we are on the leadership of one of the hospitals?
  - If it is a direct experience, please use your discretion.
- In March, the Okanogan CHI hosted a reproductive health panel. Today, the members will be continuing in a discussion.
  - Three Rivers and North Valley Hospitals do not have as many specialty units. These hospitals are going well. There is no OB at North Valley Hospital. The OB Unit in Three Rivers Hospital is going well.
- Where do folks go for specialty? What buckets are the fundings?
  - It is a fee for service model. Medicare, commercial and Medicaid insurances are used. There are those who are uninsured and some bills are written off. It is a small percentage though. 4% of operating budget is through taxes. Defining cost is hard to determine from Medicaid or Medicare appropriately.  $\frac{1}{3}$  of patients are Medicaid or Medicare. At North Valley Hospital, patients are 75% Medicaid and Medicare beneficiaries. 12-15% are self payers.

What is at stake if things continue this way?

- Primary care is what drives the health of a hospital.
  - What is at stake is that the hospitals can be here or not. Do you want the hospitals or not? There is strategic planning happening in Brewster and Twisp. We want the hospitals to exist. In what form? We want OB, specialty and access for patients. Those things could end up going away. If Medicare, Medicaid and commercial insurances pull out then there would be very limited funding. Taxes help with charity care. There is a need to bridge gaps to continue to have and provide services. The hospitals do not get reimbursed in dollar amount, there is only a fraction of what is charged from the hospitals. Currently, making ends meet is difficult. If there is no growth the hospitals could potentially not make it. The model is fee for care bases and it cannot cover the cost and stay in business.
- There are 3 hospitals in the valley and the average is 5 patients a day. 17 patients are in-patient. There are more outpatient daily than inpatient. Last year, 110 rural hospitals closed. Providing services are too high. We get reimbursed 48 cents per dollar for services.
- There is a point that is lingering and that is everyone wants hospitals. The question is if that is realistic and viable. There is a concern that we are going down a road that will cause services to dissolve. Running a hospital is costly for equipment, the building, staff and recruitment. Recruiting Doctors is a hard task. Does the public get to have a say in things without understanding the costs? Some of the equipment in the hospitals are not highly utilized and pay the staff to be there in case something happens. There is an opportunity to be creative, design something together and have a successful future. Can we keep going or do we need to be proactive? Is this viable? Can we continue like this?
  - We need to look at our approach differently. We lose 7000 dollars for OB.
- One of the local hospitals is stronger now, compared to 10 years ago. There are challenges and the national trends are negative. We cannot go to the community and say the hospital is not

viable. The hospitals are public entities. From an administration point of view, we can agree on logic. We have roles as advocates. We can hear from the public.

- Three Rivers and North Valley Hospitals are in better shape than in the past. The census has doubled and there is an increased utilization. We need to stay positive and keep working together. We will not see 25 people in the hospital at one time.
- Regarding regionalizing the hospitals. We do not ask schools to regionalize. We have schools and Fire Stations in different parts of the county and region. It does not work geologically. There is more than enough opportunity for economic development. If we can stay focus on modernizing and standardizing, then we would be more successful.
  - Recruitment and retaining is the big issue. We are to the point where it is difficult to recruit and keep Doctors. We have seen loses in all 3 counties (Okanogan, Chelan and Douglas). We are in a crisis. There is a decrease in births as well. How do we create a system to retain the Doctors? No physician is going to stay with low amount of patients.
- There is a demand for the services. The county is at 200 births per year, but it needs to be 400 births to be sustainable.
- What else can shift? We can increase consumer base. In the Summer, people come and visit. So the county is constantly in a waxing and weaning state. People come by chose to visit but how do we get people to want to move here? There is opportunity to keep the visiting population here.
- Economic Development: A way is if we have more jobs and use the land more beneficial.
- There is a lack of collaboration with Economic Alliance, chambers and organizations. There is a major silo in economics, so it leaves the hospitals to have to figure out the solution. There is nothing specific that gets people to move here. An issue is no youth centers or YMCA. We cannot expect the families of Doctors to move here.
- Chambers are busy and trying to keep things going financially for the area.
- The Methow Area is strongly trying to get people there with advertisement. There is even a commercial on TV. The Leadership on economic development are taking action.
- Transportation issues make care a challenge. Relying on public transportation and it can turn into a whole day to get to Wenatchee and back.
- How much care do we have going out of the county?
- None of our hospitals have all the care that individuals need. A major of patients go to Wenatchee.
- The hospitals in this county can complement each other, instead of compete. Part of what we see as a solution is centralizing OB. Hospitals are an ecosystem. If you shut down a department the hospital may not make it. For example, if a hospital has an emergency room there needs to be other systems within it. People like having access to care. That is why we need to look strongly at what the community needs. Hospitals are publicly owned and need to look at what the community wants.
- There needs to be a fine balance for what the public needs and what hospitals can actually do. Telemedicine is a prospect for rural areas.
- Any update from the Hospital Summit? There is no decision. Legislation Day is coming up soon and there will be more discussion. Our goal is to be inclusive to find ways to utilize resources. Discussions are happening.

- The Hospital Boards are elected from the public. We are aware of this and thinking strategically. There is communication with other hospital boards. Our hospitals are in better shape.
- Legislation Day Discussion: The Legislation will be asking tough questions. The Legislation will want answers. Where are the providers? We have to be aware of medical providers. We need to hear from providers and then potential solutions. We do not want to step on toes, but have difficult conversations within the county. If we cannot have it locally for instance at the CHI level, then we will not be able to at the Legislative level.
- What is one of the hard questions Legislation may ask?
- Why the local hospitals are not able to recruit with a good packet for potential Doctors?
- As a provider for mental health, one of the big problems is burn out and being the only person in town. Social Services Providers is in fruition.
- There is a wall of strength from this county. Okanogan County has culture, community that is committed, resiliency, partnerships and collaboration between organizations. The county has been through fires and floods, but still shows resilience. As a county there is progress and continue to come together. This county has strengths.

Meeting Adjourned