

Okanogan Coalition of Health Improvement

MEETING NOTES

2:00PM-4:00PM, April 24, 2018

1)-Introductions-

Attendance-SEE SIGN IN SHEETS

2)-NCACH Updates- Sahara Suval

-2018 Annual Summit-

-Opinions-

- -Great information and potential projects.
- -There was a lot of energy and happy with the amount of people involved.
- -There is support around the initiatives and goals/projects. The work seems doable and achievable.
- -It was a great opportunity to bring together all 4 counties.
- -There will be a NCACH Summit next year. If you have any feedback please provide it to the [NCACH](#).
- -All the Call-in information, meeting minutes and workgroups are accessible on the [NCACH website](#).

3)-Questions about ACH 101-Sahara Suval

-Any questions, you can email [Sahara](#)

4)-Transitional Care and Diversion Interventions Updates-John Schapman

-Workgroup Transitions- The focus will be on medical hospital and jails.

-Currently looking at implementation partners across the region and EMS facilities.

-Diversion- Keeping people out of EMS (unless needed) and jail settings.

-Transitional care model- Smaller part of the implementation plan.

-EMS protocols to keep people out of the Emergency Department (unless needed)

-20 partners, 10 from Hospital/Emergency Departments, 10 from Emergency Medical Services Agencies

-Supporting partners will be involved

- Meetings are Thursdays 10:00AM-11:30AM

-Implementation partners can talk to [John](#)

-Questions-

-What social support are you considering with transitioning people back into the community?

- -Health homes, which is part of the workgroup.
- -Since it is more medical focused, the goal is to achieve those milestones. With evidence base information, then the Diversion and Transitional Care can move on to other sectors.

What would you say is our challenge?

- -The information needs to be evidence based. So the information will come more from the medical field.
- -Making sure that the region works together could be another challenge.

5)-FIMC- **Christal Eshelman**

Okanogan County-

- In 2015, there were 3 different pathways for money to be accessed for Medicaid patients.
- Fully Integrated Medicaid Contracting- Integrated Physical Health, Mental Health and Chemical Dependency through the consumers' MCO.
- There are 3 MCO's in the region. The 3 are Coordinated Care, Molina and Amerigroup.
- There is 1 insurance company for the consumer. This insurance company gives the consumer coverage of Medical and Behavioral Health Services.
- This creates more coordinated care for the consumer.
- A benefit is the consumer is able to receive Behavioral Health Services.
- 10 out of 19 regions in the Southwest of Washington had significant improvement with FIMC.
- Contracting Advisory Committee-Adapt and use FIMC in Okanogan County
- There will be communication for stakeholders to report back to the ACH
- Proposing on using CHI broad stakeholder input and consumer engagement to make requests.
- Kickoff for FIMC in Okanogan County is April and the plan is to utilize the CHI.
- January 2019, FIMC will be implemented in Okanogan County.
- January 1st the early warning system will go live
- Proposed that the Health Care Authority comes to the next CHI meeting.
 - Concerns-
- Health Care Authority does not understand the consumer and how our counties work.
- The HCA was not going to translate the post cards into Spanish, Russian and Ukraine.
- HCA wants to be willing to help, it is our job to let them know how.
 - Proposals-
- At next CHI meeting, all MCO's can come together and speak about what they do specifically.
- Proposed that June meeting there will be more information about FIMC.

6)-Opioid Rapid Applications –**Christal Eshelman**

- There is \$100,000 dollars for all funding.
- Each funding opportunity is \$2,500 to \$10,000.
- The funds will be narrowed down by priority and the needs in the region.
- Application is open to anyone, but needs to be from a lead organization.
- The application is meant to be simple and the scoring will be based on sustainable projects. The projects will need to be tracked on how and what the organization is doing.
- Application is due May 11, 2018

Ideas for Applications-

-Drug Take Back Leverage-

- There are currently places for the drug take back leverage in Okanogan County. These places are Oroville at the Police Department, Omak and Twisp
 - Possibly add some drug take back spots at the hospitals in the county.
 - Add one in Okanogan and Tonasket

-Transitioning Users Back to the Community

- How to get addicts on Suboxone.
- There needs to be treatment resources (MAT).

-Protocol available at Chelan Regional Jail/CVCH.

-What are we doing for people that get out of jail?

- -There needs to be more recovery information.
- -Get them out of the same situation because of possible relapse.
- -What is the barrier to the addicts suboxone in the jail?

-What about use a liaison?

- Community Health Worker-How many are trained that are not in other jobs?

-A resource could be Washington Recovery Alliance- trained 600 in recovery

-Okanogan County the strongest recovery

-In Methow, no CDP's available. Having a group in the Methow Valley and different approaches

-Education at jails and out in the community

-Transitional housing- Oxford Housing

-Mobile Syringe Exchange-

-The Okanogan Public Health District is willing to staff for a Mobile Syringe Exchange.

- Narcan is available without prescription at a Mobile Syringe Exchange.

-Does Law Enforcement track where the needles are?

- Maybe that's where the Mobile Syringe Exchange would go.

-WSDOT is going to fund vehicles for transportation

-Proposals due in July

-Media-

\$450 dollar a month for a billboard.

What would we advertise?

7) Meeting Adjourned

Next Okanogan CHI meeting is June 26th, 2018, 2:00PM to 4:00PM Location TBD