

Tillamook County  
Community Health Council  
Meeting Minutes  
July 16, 2014

<p><b>Present:</b> Harry Coffman, Carol Fitzgerald, Amy Griggs, Donna Parks, Rex Parsons, Carmen Rost, Clayton Rees, John Sandusky, Tim Josi <b>Excused:</b> Susie Johnson, <b>Absent:</b> <b>Staff:</b> Marlene Putman, Donna Gigoux, Irene Fitzgerald <b>Guests:</b> Bob Maxwell</p>
--

**1. Call to Order:** Chair Harry Coffman called the meeting to order at 12:17 PM. Introductions were made to the group.

**2. Consumer/Community Needs, Concerns, Issues:**

- None

**3. Consent Calendar:**

**A. Approval of June 18, 2014 Meeting minutes:** John moved to approve the minutes as written; Donna seconded. Motion carried.

**4. Board Development:**

- A.** Rex Parsons' term expired June 30, 2014. Carol moved to approve Rex to serve another term on the Health Council; Clayton seconded. Motion carried.
- B.** Marlene and Donna talked with our HRSA Project Officer Erica Caesar regarding Susie Johnson's membership on the Health Council and if there was a possible conflict of interest since Susie accepted a temporary position as a Case Manager for Outreach and Enrollment services. Erica stated that there would be no conflict of interest as Susie is an employee of the Employment Agency. Susie would have to recuse herself if there is a vote or discussion surrounding Outreach and Enrollment issues.
- C.** John stated that he has spoken with a student at TBCC that is interested in becoming a member of the Health Council. She will be submitting her application today.

**5. Training:** Bob Maxwell, OPCA – Mock HRSA Site Visit – “Max” provided an overview of the HRSA site visit based on his participation with attending them in Oregon at other FQHC's. He stated that OPCA will conduct a “Mock” site visit August 8<sup>th</sup>. Donna G. will send Harry a copy of HRSA's 19 requirements. Max suggested that the HRSA representatives should meet for a luncheon or a dinner prior to August's Health Council meeting.

**6. Administrator's Report:**

**General Update and Report:** Marlene reported on the following:

**A. *Implement Well Planned Actions/Methods to Improve Productivity and Positive Outcomes for our Clients, Our CHC and the Community:***

- We are expecting another Americorp Vista to start in September. Housing is set up and the Vista will work on the community planning for Public Health internal

documentation and Quality Improvement. She will also provide additional support with food insecurity, Alcohol and Drug training and SBIRT.

- Erin, our Domestic Violence representative, is being cross trained as a Case Manager to provide sexual assault resources.

**B. *Increasing Productivity of Providers and Staff to Increase Revenue:***

- Recruitment is ongoing; Merritt Hawkins is still in the process of finding applicants. Their agreement with us ends June 30<sup>th</sup>. Donna G. will contact them to renew their agreement and work with Marlene to design the next outreach mailing.
- Care Oregon is providing TCHD with technical assistance in clinical operations structure, best use of staff, data and document accountability, change of hours of operation to 5-10 hour days for providers and support staff.
- Marlene reported that weekly Leadership Team meetings are ongoing to discuss issues with operations, upcoming issues, etc.

**C. *Improve Financial Practices and Systems in order to Improve Efficiency and Effectiveness:***

- Continuing to contract with Community Link Consulting to assist with various reporting required for Federal and State funding;
- OCHIN Billing Services and 340B is ongoing;

**D. *Increasing Revenues for Other Sources in Order to Offset Uncompensated Costs for Public Health Services and/or Operational Changes and Improvements:***

- (See Old Business)

**E. *Implement Policy & Procedure that support our Mission and Improve Quality of Service:***

- Community Health Assessment and the Community Health Improvement Plan is in final draft stage which will be sent to the CCO;
- Annual Strategic Planning is slated for the second Wednesday in October. Health Council will have a special meeting on September 17<sup>th</sup> to come up with an Action Plan based on their Strategic Planning goals.

**F. *Increase Partnerships with Health & Human Service Organizations in Order to Leverage Resources, develop shared resources and strengthen relationships for future collaborations:***

- A. Marlene will meet with Connie Green of Tillamook Bay Community College to discuss having a monthly health clinic for students of the college and High School students to access. The Superintendent of Tillamook School District thought that would be a good way for teens to get services.
- B. Based on movement in Washington D.C.; if a bill passes for Veteran's to access FQHC's for their health care, we may see an increase in Veteran clients.
- C. Oregon Food Bank has a grant opportunity they would like for TCHD to partner with.

**Action:** Donna P. moved to approve the administrative report. Carol seconded. Motion carried.

## **6. Financial Report:**

### **Financial Report:**

Financial Report was provided and Irene outlined the following:

- A. Total revenue for MAY (July report) was \$381,356; total expenditures were \$415,673, with a month end cash balance of \$131,522 Month-end cash balance (treasurer) is \$131,522.39
- B. Total Monthly Encounters slightly down, 1193 compared to April 2014 of 1422; average daily encounters per provider was 8.90 with monthly average encounters per provider for the year at 10.2;
- C. Accounts Receivable was \$234,082.

**Action:** Carmen moved to approve the financial report; Carol seconded. Motion carried.

## **7. Old Business:**

- A. EPA Brownfields Grant – Final application is still undergoing some changes and will be sent to the EPA grants specialist when finished. RFP's will then be developed with them being out to the public by October 31<sup>st</sup>. Several agencies have already contacted us that are interested in applying.
- B. HRSA 2014 Expanded Services Grant – should hear by September 1<sup>st</sup> if this grant is awarded.
- C. 2014 Aetna Foundation Grant – this grant would have partnered us with Oregon Food Bank to work on food insecurity. After looking at the opportunity, it was determined that this grant funder does not target Oregon.
- D. NWHF Health Beginnings & Healthy Communities Initiative – This grant opportunity comes out in August and will partner with Early Learning Hub and Home Visiting program. Other partners would be Rinehart Clinic and the hospital.
- E. CPCCO Telemedicine Grant Partnership – A letter of support needs to be written and signed by BOCC to move forward. This grant will provide access to telemedicine at Cloverdale and Rockaway Beach, where providers can talk to specialists, meetings can be conducted remotely, and patients could access specialists remotely.

## **8. New Business:**

- A. **TBCC** – (see Administrator's Report)
- B. **Veteran's Services** – Marlene asked the council if they would like for her to move forward in contacting the Portland VA and to hold a community meeting to discuss protocol. Tillamook County does not have any money, not providers no beds and no facility for mental health services. By consensus, the council agreed that Marlene should pursue the information needed.
- C. **Jail – HB 4110 and Health Care Services** – HB 4110 passed by the Oregon Legislature would prevent insurance companies from canceling insurance to non- adjudicated inmates. This is effective January, 2015. It is unclear if this would also include inmates on OHP. More information will follow as it becomes known.

**D. Dental** – Due to the increasing numbers of dental patients, it has been discussed that TCHD might do well in hiring our own dental hygienist to provide services on site. By consensus, the Council thought looking into the caseload and possibilities would be good for the department.

**E. POLICY & PROCEDURE** –

- **Retention & Recruitment Policy** – this is a new policy that eventually will be mandatory for us to use with our partners like TFCC for Behavioral Health, Tillamook Bay Dental, and CARE for Home Visiting. We are modifying our current contracts to include these policies.

*Action:* Donna P. moved to approve this policy; Amy seconded. Motion carried.

- **Cultural & Linguistic Policy** – This is another policy that will eventually be used with our partners who provide care for our clients. We are modifying our current contracts to include these policies.

*Action:* Carmen moved to approve this policy; Clayton seconded. Motion carried.

- **Access to Service** – This policy is currently in place and this is an annual review by Health Council.

*Action:* Donna P. moved to approve this policy; Carmen seconded. Motion carried.

- **Credentialing & Privileging for Dr. Opdahl** – This policy is currently in place and this is an annual review by Health Council.

*Action:* John moved to approve this policy; Clayton seconded. Motion carried.

- **Organization of the Health Department** – This policy is currently in place and this is an annual review by Health Council.

*Action:* Carol moved to approve this policy; Carmen seconded. Motion carried.

- **Review and Use of Compliance Reports and Documents** – This policy is currently in place and this is an annual review by Health Council.

*Action:* John moved to approve this policy; Donna P. seconded. Motion carried.

- **Mission Statement** – This policy is currently in place and this is an annual review by Health Council. The name of the department was changed to Tillamook County Health Department and Family Health Centers, as opposed to Tillamook County Health Department.

*Action:* Rex moved to approve this policy; Carmen seconded. Donna P. opposed. Motion carried.

- **Control of Policies and Procedures** – This policy is currently in place and this is an annual review by Health Council.

*Action:* Amy moved to approve this policy; Carmen seconded. Motion carried.

**9. Reports of Committees:**

A. The Health Council members reviewed and discussed the May QA/QI minutes. Below is a summary of the reviewed measures:

Summary for QA/QI	Compliance	Clinical Measurement Goal	Meet Goal?
<b>A: Public Health Family Planning</b>	<b>May 2014</b>		
Chlamydia	44.0%	75.0%	No
Mammogram Screen	35.1%	50.0%	No
Method of Birth Control Selection	90.0%	100.0%	Almost
STD Prevention Education	60.8%	75.0%	No
Clinical Breast Exam	89.0%	90.0%	Almost
Document Dispensing Birth Control	88.0%	75.0%	Exceeds
Plan B Dispensed	60.0%	75.0%	No
Consent for Birth Control	88.0%	90.0%	Almost

B: Clinical	Compliance	Clinical Measurement Goal	Meet Goal?
Oral Health - Child Oral Exam	100.0%	100.0%	Yes
Ischemic Vascular Disease - Aspirin Therapy	77.9%	90.0%	Almost
Diabetic - A1C Testing	87.1%	86.0%	Exceeds
Diabetic - A1C less than 8.0	66.4%	47.0%	Exceeds
Diabetic Depression Screen	75.4%	75.0%	Yes
Diabetic Patients <=9% A1C	76.3%	85.0%	Almost
Controlling High Blood Pressure	56.8%	61.0%	Almost
Lipid Lowering Therapy	71.4%	50.0%	Exceeds
Childhood Immunizations	73.7%	89.0%	Almost
Child Health Depression Screen	72.6%	20.0%	Exceeds
Tobacco Assessment	98.7%	77.0%	Exceeds
Tobacco Cessation Intervention	65.2%	77.0%	No

*Action:* Donna P. moved to approve the May minutes; Carol seconded. Motion carried.

**11. Unscheduled:**

A. Provider Recruitment & Retention Plan – Presented plan for review by Council.

*Action:* Clayton moved to approve the plan; Donna P. seconded. Motion carried.

The meeting was adjourned at 3:00 PM.