

Tillamook County
Community Health Council
Meeting Minutes
October 18, 2017

Present: Jennifer Arreola, Dr. Tim Borman, Carol Fitzgerald, Jessica Galicia, Donna Parks, Carmen Rost, John Sandusky,
Excused: Harry Coffman, Amy Griggs, Clayton Rees, Bill Baertlein (BOCC Liaison)
Absent/Unexcused:
Staff: Marlene Putman, Irene Fitzgerald, Donna Gigoux, Debra Jacob
Guests:

1. Call to Order: Chair Harry Coffman called the meeting to order at 12:20 pm.

2. Consumer/Community Needs, Concerns, Issues:

- a) **Community/Patient Concerns:** No report.
- b) **Ambassador/Advocate encounters with Community:** No report.
- c) **Community Partners (boards, agencies) Encounters/Projects:** Carol reported that she attended her annual HOA meeting and there is a property that the HOA has filed a complaint with the county. Marlene said she should contact Marie Heimburg of Conflict Solutions if the HOA would like to pursue mediation.

3. Consent Calendar:

- a) **Approval of September 20, 2017 Meeting minutes:** No changes.

Action: Carmen moved to approve the minutes as amended; Carol seconded. Motion carried.

4. Board Development:

- a) **Potential New Members –** No report.
- b) **Health Council Member Contact & Areas of Expertise –** No report.
- c) **Common goals – shared resources between agencies:** No update.
- d) **Underrepresented & Youth potential members:** No update.

5. Administrator's Report:

General Update and Report:

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

Action Planning in Priority Areas -

- a) **Behavioral Health Integration:** Job descriptions were submitted to HR for the BH Clinician II & III. We are holding off on the BH manager until we get the two other positions hired. Interviews have been held; we need to get the pay scale approved by BOCC before we can hire. There are an

additional four other candidates to be interviewed in a second round. Tim asked if there were any issues with prescribing medications; Marlene stated that the system is a little clunky since TFCC does not share the same electronic medical record system. The goal is to work with a consulting pharmacist in order to prescribe medications for the BH patients. TFCC has still maintained that they can provide a specialty mental health person on site at the clinic. Communication has been an issue between agencies, but hopefully both will come up with some solutions. Face to face meetings with TFCC staff would be optimal, possibly in the morning huddle with the providers so information can be shared for patients and their needs for prescriptions depending on their diagnosis. We will need to make sure we have a current HIPAA Business Associate Agreement in place as well.

- **Dental Health:**

- **School Based Dental** – Staff is working on the 17/18 school year activities.
- **Dental Providers** – working with Sue Long to see if we can come up with an agreement with Dr. Long to provide services for our patients. He is willing to provide services four days per month. Our care coordinators can assist in interpreting for patients in Spanish.
- **ODS** – is giving incentives for pregnant women to get dental services, as well as families to get sealants and preventative care. Tillamook County has a lot of dental issues.

- **School Based Health Center:** No update.

- **Safety Net Grant (I'm Healthy/Soy Sano):** – Program ends December 31st. Staff is working on getting patients signed up for CAWEM (Children and Women Emergency Medical). In January, those who are signed up will automatically switch over to Medicaid under the Cover All Kids program that Oregon legislation approved.

- **Patient Access & Support:** No report.

- **Sexual Health and Adolescent Health Services:** No update.

- **Maternal and Child Health** – No update.

- **Home Visiting Coordination** – No update.

- **Developmental Screening Pilot Project** – No update.

- **Well Child and Adolescent Health Exams** – no update.

- **Women's Resource Center** – No update.

- **The Early Learning Hub** – No update.

- **South County Services** – (See Item B)

- **Staff** – See Below, Item B.

- **Prenatal Care** – No update.

- **Year of Wellness Project** – No update.

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

a) An overview of the changes that are being implemented to increase revenue and productivity was provided to the Council members. (See also Financial Report – Schedule Dashboard below, (6.D).

1. South County clinic is still closed. Marlene met with Misty Wharton of NVSD to discuss moving WIC services into TBCC. Misty checked with the new president of TBCC, and he is good with it. Marlene, Robin, and Donna G. will meet on November 9th to discuss with the new president.
2. Rockaway Beach clinic is open one day per week. The provider is now seeing a full schedule on one day instead of half schedule in two.

- C. *Goal: Improve Financial Practices and Systems in order to Improve Efficiency and Effectiveness*
 a) See Goal B.
- D. *Goal: Increasing Revenues for Other Sources and/or Operational Changes and Improvements*
 a) No report.
- E. *Goal: Implement Policy & Procedure that support our Mission and Improve Quality of Service*
 a) **Health Resiliency Workers** – (See 5.A. above)
 b) **School Resource Behavioral Health Provider** – (See 5.A. above)
- c) **Emergency Preparation** – No report.
- d) F. *Goal: Increase Partnerships with Health & Human Service Organizations in Order to Leverage Resources, develop shared resources and strengthen relationships for future collaborations*
 a) (See 6.A.a above.)

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

6. Finance Report:

A. August's month end cash balance was \$1,250,181.13 ending with \$37,169.08 more in revenue than expenses..

- **Revenue:** There was a \$35K delay from May through July AR, with \$21K Medicaid Managed Care received on September 1st. There were two state grant payments received in August of \$82K.
- **Expense:** Worker's Comp annual expense of \$16 K (line item 5955); Flu and DHS quarterly vaccines of \$24K; and 340B prescriptions of \$4K. March – July 2017 for item 7601 Office Equipment of \$3K is for new and replaced equipment, averaging \$450 per month expense. Item 7605 for \$2K was for scale calibration for the public health nurses.
- **HRSA Budget Revenue and Expense:** (See Revenue above) All revenue and expenditures are within normal ranges.
- **Encounters** Encounters were higher this month, from 1,390 to 1,654, due to Adolescent Health and Well Child exams; monthly average medical Provider FTE increased slightly to 3.67 out of 4.5 FTE for the month. Average daily encounters per provider FTE decreased from 11.4 in July to 10.6 in August. 13 per daily average is the goal per provider.
- **Schedule Dashboard:** August clinic overview shows increases in most providers' schedules, with one provider showing less (Medical Director). The dashboard shows an average of 57.5% in August, up from 56.4% in July of available appointments remain unscheduled, lower than June (60.4%).
- **Accounts Receivable:** Total Accounts Receivable was \$468,346.32. The majority in the 0-30 bucket at 60.75%, up from 57.79% in July. Errors have been fixed and we should see normal

percentages in September. Payer Mix shows Medicaid/Managed Care still our biggest payer at 61%%, with Private Insurance at 14%; Uninsured at 16%; Medicare at 8%,and Oregon Contraceptive Care at 1%.

Action: Tim moved to approve the Financial Report; Carol seconded. Motion carried.

B. HRSA SAC Patient Target Adjustment Approval – Debra presented the following:

- Provider Productivity at 3.15 FTE, average visits per patient per year comparison – showing the breakeven point given our current provider productivity and projected breakeven point needed with and without reductions;
- Breakeven analysis to support patient target adjustments – showing various scenarios ranging from 8 to 16 patient encounters per provider per day average with the loss of a provider and with a loss of a provider and additional staff; and
- A breakdown of HRSA’s formula for award reductions based on percent of patient target.
 - Discussion surrounded the current number of patients to meet HRSA targets without suffering a reduction of federal funding. This is in anticipation of our SAC application and associated budget.
 - REQUEST: Current patient base is 4,631, with a project patient base by end of calendar year 2018 of 5,607. The request for approval is to adjust our projected patient base to 5,050 to be a more realistic figure for the projected SAC budget. This will result in a reduction of our base grant of \$32,477, or \$2,132,672 total.

Action: Carol moved to approve the patient target adjustment; Carol seconded. Motion carried.

7. Reports of Committees:

A. Quality Assurance/Quality Improvement Committee - August 2017 minutes:

Action: Donna P. moved to approve the QA/QI minutes as written; Carmen seconded. Motion carried.

8. Old Business:

A. GRANTS & Resource Development –

- a) OHA I’m Healthy/Soy Sano Grant – (See Administrative Report)
- b) OCF Tillamook Education Foundation School Based Dental – (See Administrative Report)
- c) New Building – Tillamook – The low voltage wiring is nearing completion. Still waiting for a bid from IT for the computer/phone/internet needs.
- d) HRSA Access Increases in Mental Health and Substance Abuse Services (AIMS) Grant – See Administrative Report)
- e) CPCCO Diabetes Management Grant – We were granted an extension to submit the full application. Staff is working with community partners to develop the parameters of the grant.
- f) CPCCO CAC Community Health Worker – No report.
- g) FTCA (See Training)

9. New Business:

- A. HRSA Service Area Competition (SAC) Grant Application –** the application is in two phases. The first phase is application through Grants.gov. The members were presented with the application as it stands for review and approval to submit. The financial portion is still needing updated; accounting staff is working on it along with our consultants. The full application is due to HRSA November 28th. It is our

goal to present the draft application for review at our November 15th Health Council meeting for review and approval to submit. We will also need to get approval from BOCC.

Action: Tim moved to approve submission of the application; Carol seconded. Motion carried.

B. Public Health Modernization Grant – OHA – a Regional opportunity has arisen for a regional Communicable Disease grant to include Clatsop, Columbia and Tillamook Counties. This grant focuses on Communicable Disease (HPV, STD and HIV) in the tri-county region. Columbia county is writing the grant; Clatsop will act as fiscal agent. The due date is October 27th.

Action: Tim moved to approve submission of the application; Carol seconded. Motion carried.

C. Gift Card Policy – Public Funds Purchasing - Gift Card Incentives – Public Funds Purchasing – BOCC voted last week to not allow gift card purchases with public funds at the suggestion from the Treasurer’s Office. Marlene was not notified that it was on the agenda. TCHD does not use public funding to purchase gift cards; all purchases are from patient revenue. Our FQHC uses gift cards as incentives for our outreach and to improve our goals and measurements (i.e., Well Child Exams). Marlene attended the meeting, and explained this to the Commissioners; only one commissioner voted no, with two voting yes. The Executive Committee all agreed that we should be allowed to continue the process and request the BOCC to reconsider their vote. Marlene sent information to Bill Baertlein to ask for reconsideration. The issue will be discussed at the November 8th BOCC Staff Meeting at 8:30 AM. All council members who are interested are invited to attend.

Action: Donna P. moved for the CHC to continue to use funds that are not public funds to purchase gift cards as incentives, and to support the request that the BOCC reconsider; Tim seconded. Motion carried.

D. Policy & Procedure: Credentialing & Privileging for:

- Dr. Lisa Steffey
- Patricia Dannen
- Chris Craft
- Dr. Timothy Borman (Volunteer)

Action: Carol moved to approve Dr. Steffey, Patricia Dannen, Chris Craft, and Dr. Borman’s credentialing and privileging; Jessica seconded. Motion carried.

10. Training – Time permitting

a) FTCA Deeming Findings – Donna G. presented in the packet a letter from our July FTCA application findings that we need to answer in 30 days in order to preserve our malpractice insurance. She and other staff have been working on the Patient Safety and Risk Management Plan that the Health Council approved back in July prior to our application being submitted. Additions were made as follows:

- Addition of a Medical Records Retention Policy developed by Ronda, our Site Specialist outlining our process for records retention, showing that we retain any records indefinitely if there is a potential claim;
- Added in Section 7 of the Plan the process when a potential claim is received based on the FTCA Health Center Policy Manual;
- Assigned roles and persons responsible for the Risk Management process, which outlines individual responsibilities for each of our three Risk Managers or Designees and corresponding job descriptions; and

- Added eleven corresponding policies already in place as attachments to the plan.

A Risk Management Committee will be established and they will meet monthly. Donna G. reported that we haven't heard if our submission has been accepted yet.

12. Unscheduled:

- Marlene stated that her daughter, Kara, will be at Fred Meyer from 2 to 5 to receive donations for her Tooth Fairy project, to make up kits to distribute to children and youth in Tillamook County.
- John said the City will be doing the tree lighting December 3rd at 3 PM. Santa will be in attendance.

13. Adjourn - The meeting was adjourned at 2:19 PM.