

Tillamook County
Community Health Council
Meeting Minutes
December 18, 2019

Present: Tim Borman, Harry Coffman, Amy Griggs, Sharon Kaszycki, Donna Parks, Clayton Rees, Carmen Rost, John Sandusky, Bill Baertlein

Excused: Carol Fitzgerald

Absent/Unexcused:

Staff: Marlene Putman, Donna Gigoux, Irene Fitzgerald

Guests:

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

2. Consumer/Community/Partner's Needs, Concerns, Issues (based on Health Council Strategic Plan Goal 2 & 3):

- A. Community/Patient Concerns – no report.
- B. Ambassador/Advocate encounters with Community Members – no report.
- C. Community Partners – partner dialogues, invitations to meetings, etc. – no report.

3. Consent Calendar:

- A. **Approval of November 20, 2019 Meeting minutes:**
 1. No changes.

Action: Donna P. moved to approve the minutes as written; Sharon seconded. Motion carried.

4. Board Development:

A. Health Council Member Contact & Areas of Expertise:

1. (See Attached List)
2. No report.

B. Common goals – shared resources between agencies:

1. No report.

C. Underrepresented & Youth potential members:

1. Harry hasn't had any luck in getting a youth member from the High School; John suggested we try TBCC. He will spread the word with the health-related students.

5. Administrator's Report:

General Update and Report provided by Marlene Putman, Administrator –

A. HR Issues & Decentralization Request:

1. Marlene discussed HR issues and the need to decentralize some of the duties in order to more proactively hire staff for the department.
2. She stated that the HR Director position is open until filled and interviews are ongoing.
3. We have several staff openings and have had several failed recruitments due to the time it takes for HR to contact potential staff for interviews and even to notify them they have been selected.
4. Marlene will request a workshop with BOCC and HR interim staff to discuss how the process would work. She will also invite all other interested departments as well.

B. Behavioral Health Integration Update:

1. Medication Assisted Therapy – we have 40 patients who are accessing these services.
2. The new PA, Dove Rainbow, is pursuing her X-Waiver
3. We are pursuing a psychiatrist to begin late summer or early fall. It's possible he may begin sooner with his last rotation with OHSU.
4. Looking to hire a Behavioral Health Manager; need to contact legal & HR before moving forward.
5. An MA also needs to be hired in order to fulfill grant requirements by April 30th.
6. We have a report due to HRSA that will provide an update to our services. This is partly due to clinical data reporting and delay in hiring of staff.
7. We are in partnership with Adventist Health and others county wide on opioid reduction.

C. Dental Services:

1. Looking at options for hiring a hygienist in partnership with contracted dentists.
2. The dental team is increasing outreach and engaging those not using benefits – approximately 100 additional dental patients have scheduled appointments.
3. We are working the CPCCO dental director to get information on metrics and targets for 2020.
4. Dental Manager is connecting with schools to discuss needs and schedule on-site.

D. Mobile Clinic:

1. Mobile Clinic is currently in Tualatin having a dental chair installed. Additional equipment and supplies have been ordered.
2. The Coordinator is currently developing the schedule to begin services in January with kick-off events like Homeless Connect and a vision screening with the Lion's Club in Rockaway.
3. A driver has been identified and will be hired through Barret Temporary services. Training will be provided for drivers, primary care staff, and dental volunteers.

E. Strategic Planning:

1. Marlene is once again working with Eric Brinkert for the upcoming planning event in the spring.

F. Discussion:

1. A member asked about the Clinic Operations Officer position and if it had been filled. Marlene said unfortunately it took too long to contact the selected candidate and that candidate took another position. (See item A)

Action: Carmen moved to approve the Administrative Report. Clayton seconded. Motion carried.

6. Finance Report

- A. October's month end cash balance was \$2,112,300.94 ending with \$104,943.43 more in revenue than expenses. Irene explained that the goal is to have a 6-month prudent reserve of two million.
 1. **Revenue:** We received a state grant for the SRCH project of \$148,099.49 and first quarter and May/June payment from OYA for \$11,520. All other revenue was within normal range.
 2. **Expense:** Refund checks that were not cashed were voided in the amount of \$129. The annual insurance premium was \$25,116.46. All other expenses are all within normal range.
 3. **HRSA Budget Revenue and Expense:** Revenue and expenses within normal range. Expenses were more than revenue in October.

4. **Encounters:** Total encounters went from 1,325 in September to 1,793 in October. This is due to flu shots. Average Provider Encounters per FTE went from 11 in September to 9.20 in October. Provider FTE was 3.35 in September to 3.25 in October.
5. **Monthly Generated Revenue:**
Provider revenue in October was a total of \$96,059.11. Productivity is down quite a bit, the lowest since July. The number of days open in October was 23, giving the average revenue for the workday at \$4,176.
6. **Encounters/Workday By Provider:** Average percentages for October was 51.4% of available vs. completed; down from September for most providers; warm handoffs were up for Behavioral Health staff. Encounters were slightly up for the RN. One provider is cutting hours but with the number of providers this should not affect productivity.
7. **Accounts Receivable:** Total Accounts Receivable was \$328,112.77. The majority in the 0-30 bucket at 66.85%, slightly higher than the prior month at 63.94%. The average for our 0-30-day bucket is 29.90 days; and gross charges were \$383,203. Payer mix shows Self Pay at 29%; and the percentage for Medicaid is 35%. Privately insured is at 21% and Medicare is at 12%. The issues with Oregon Contraceptive Care AR are resolving, now down to 3%. Usually, it is less than 1%.
8. **OCHIN Top 10:** We were number 16 in the top 10 out of 111 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 70. Once the COO begins work, this would be in their purview. Prior month we were at #11 with a ranking score of 75. Metrics are used to determine the success of an entity based on the following:
 - a) Days in Accounts Receivable (average length of time that an account balance is active)
 - b) Days Undistributed (refers to payments and adjustments that have been posted to the system but have not been distributed)
 - c) Percentage of AR over 90 days (the percentage of the total AR that is over 90 days old)
 - d) Charge Lag (average length of time between the date of service and the date that the charge for that services is posted to the AR)
 - e) Claim Acceptance Rate (percentage of claims that when submitted to clearinghouse make it successfully to the insurance payor)
 - f) Days of Open Encounters (patient encounters that have yet to be “closed”)
 - g) Charge Review and Claim Edit Days (two work queues within EPIC that hold charges and claims that contain errors)

Action: Donna P. moved to approve the Financial Report as written; Sharon seconded. Motion carried.

7. Reports of Committees:

A. Quality Assurance/Quality Improvement Committee -

1. November minutes
 - a) John, a member of the QA/QI committee, went over the recap of the minutes.

- b) The CAHPS survey was conducted for both adults and children. One member commented that the results for children has been going down; Donna G. stated that the number of children surveyed was low which affects the results.
- c) Tobacco use screening and cessation showed 82.8% compliance with a benchmark of 86%;
- d) Depression had 72.1% compliance with a benchmark of 62%;
- e) Ischemic Vascular Disease – Aspirin therapy shows 76.7% compliance with a benchmark of 68.5%;
- f) Emergency Room high utilizers is an audit we do each quarter with no clinical benchmark assigned. (results can be found in the minutes).

G. Quality Dashboard –

- 1. Council reviewed the dashboard to see the HRSA goals.

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

8. Old Business:

A. GRANTS/Other

1. Staffing

- a) Chief Operations Officer – due to the length of time it took for HR to contact the candidate with an offer, the candidate accepted another position. We will need to repost.
- b) Behavioral Health Manager – held up in HR and has not been posted.
- c) Behavioral Health MA – will be reposted, held up in HR.
- d) Registered Nurse 1,2 or 3 - Position will be posted until filled.
- e) WIC Assistant – Need to post position.
- f) OSI & OSII – have been short staffed at the front desk. Has been posted and interviews will take place.
- g) Building & Grounds – held up in HR.

9. New Business:

A. Grants/Other:

- 1. 2020 Health Council Meeting Schedule
 - a) Donna G. presented the schedule and the Executive Committee will meet on the 2nd Tuesday and Health Council will meet the 3rd Wednesday with the following exceptions: January, April and July.

Action: John moved to approve moving forward with the service; Clayton seconded. Motion carried.

B. Policies/Procedures:

- 1. None.

10. Training

A. TPEP – Tobacco Retail Licensure – Tara Stevens

- 1. Tara provided a presentation regarding Tobacco Prevention & Education Program (TPEP)
- 2. The purpose of the program is to increase the price of tobacco, promote smoke-free environments, reduce access to tobacco products, protect youth from exposure to tobacco industry marketing and decrease tobacco-related disparities.
- 3. Vaping and e-cigarettes are the most common product for tobacco use among teens.

4. County is initiating efforts for establish Tobacco Retail Licensing (TRL), which requires all business to purchase an annual license to sell tobacco products.
5. The reason focus is on the retail environment is because the tobacco industry spends over \$100 million dollars per year in Oregon alone to advertise their products.
6. It is extremely easy for teens to procure the products in our county. Of 9 inspections in November 2018, 22% illegally sold to youth; in July 2018, 6 inspections, 17% and in August 2017, 6 inspections, 67%.
7. Discussion:
 - a) One member suggested that County raises the price of a pack of cigarettes by \$5; Bill Baertlein stated that County could not raise the prices.
 - b) Another member who works with low income families stated that if a person smokes, they would continue to purchase cigarettes by returning bottles and other means other than quit.
 - c) A third member said that nicotine is a highly addictive substance and any way to curtail youth from getting addicted is welcome.

Action: John moved to support Bill Baertlein and BOCC in moving forward with the TRL; Sharon seconded. Motion carried.

11. Upcoming Events:

- A. Transportation Health Fair – January 9, 2020
- B. Homeless Connect – January 29, 2020 2-5PM

12. Unscheduled:

13. Adjourn - The meeting was adjourned at 1:55 PM.