

Tillamook County
Community Health Council
Meeting Minutes
January 18, 2023

Present via Telephone: Tim Borman, Kim Smith-Borman, Carol Fitzgerald, Sharon Kaszycki, Donna Parks, Carmen Rost, Harry Coffman, Kimber Lundy, Bill Baertlein

Excused: Mary King, John Sandusky, Erin Skaar

Absent/Unexcused:

Staff Present: Marlene Putman, Donna Gigoux, Irene Fitzgerald, Maia VanSpeybrock

Guests:

1. Call to Order: Harry Coffman called the meeting to order at 12:44 pm.

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

A. Community/Patient Concerns

1. Carmen brought up the issue of Fred Meyer's buying out Safeway, the only other main grocery store in the county. Fred Meyer's/Kroger does not work with veterans (Department of Defense) on prescription services. Questions arise regarding if veterans will have the same issues with Safeway as they have with Fred Meyer's.
2. Marlene thanked Kimber for calling and letting us know the clinic phones were not working. Kimber had tried calling the clinic and Adventist, and no phones were seeming to answer. The issue is with Spectrum and is being resolved.

B. Ambassador/Advocate encounters with Community Members

1. No report

C. Community Partners – partner dialogues, invitations to meetings, etc.

1. No report.

3. Consent Calendar:

A. Approval of December 21 Meeting minutes:

Action: Bill moved to approve as written with correction of one word misspelled; Carmen and Kimber seconded. Motion carried.

4. Board Development:

A. Member Recruitment

1. No report

B. Health Council Member Contact & Areas of Expertise:

1. Member renewals need to be updated.

C. Common goals – shared resources between agencies:

1. Donna Parks just got approval to have a trial run of a Safe Park, a safe place for people to park in her parking lot at the Herald Center. She is hoping to start in the next 2 weeks. Utilities included will only be a porta-potty.

D. Underrepresented & Youth Member

1. TBCC – possibly ask John S
 2. High school – Harry C to assist
- E. TCCHC Committee/Workgroup/Opportunities**
1. No Report
- F. Health Council Acronyms**
1. See Attached

5. Administrator's Report:

General Update and Report – Marlene

A. Community Update

1. There hasn't been a full community report the past few weeks due to staffing, but have sent short reports that the commissioners have shared.
2. Dove Rainbow: voted best provider in Tillamook! Continuing to do telemedicine visits with Dove. Working on standard operating procedures regarding telehealth with behavioral health assistant manager, Anya. Also continuing to meet weekly discussing process and equipment needed. Considering working with community health workers for patients in person needs.
3. Volunteer dermatologist will be helping during the summer months, while he is residing in Netarts. We are working on credentialing for him. Dr Borman says that getting all the paperwork completed is a bit complicated, but he is here to assist and provide input on his experiences.
4. Medical Assistants: Carol Miller is lead MA now. Marlene needs to reestablish connection with TBCC with medical assistant department.
5. February: new nurse will be starting!
6. Behavioral Health: haven't been able to fill Karen Sheelar's position, but hired assistant manager, Anya. Working with HR and CPCCO on recruitment. Still have a few care coordinator and public health program representative open positions.
7. Dental: target in January for dental expansion. Difficulties with staffing, all the applicants offered positions, have declined. Continuing to recruit, assistant with local dentist.
8. Public Health: WIC and home visiting during pandemic were curtailed. Starting up WIC visits again. Contracted with a nutritionist. Current staff will be part time WIC leader.
9. Harm Reduction: every Wednesday out in community still. Rachel Koljesky is still conducting Narcan training. Demand is there, just not funding. (Grant under new business for harm reduction funding). Carmen asked whether we have training in schools: Marlene says not yet due to politics. Carmen is wondering if students need parental permission to receive it: Marlene will check on it. Dr Borman says you could get it without a prescription. Kim says she can get one a year for \$4 with insurance.
10. Tobacco Prevention: collaborating on initiative with Clatsop and Columbia County to prevent youth smoking and provide education. This project will have a more rural message, headed by Amy McVeety for Tillamook County.
11. Tillamook County Wellness: addressing community health needs, presented an activity on Access to Care, which will be shown later in this meeting.
12. Facilities: Commissioners just signed contract with Cove Built. Construction to finally begin on public health building. Parking will be short for staff for the next year.
13. Oregon Primary Care is going to be pursuing funding and legislation for expanded reproductive health services during legislation session. We can provide factual information about our community, but cannot testify. As a FQHC, we cannot perform abortion services. So we aim to

expand services to assist with family planning. Kim asked where you can get Plan B: Marlene says she's been told at Tillamook Pharmacy and Fred Meyers. Rockie says all pharmacies should have the morning after pill.

14. Community events: child/baby dental day on February 11th. Mobile clinic and dentist will be there to assist with sealant and informational things. Also the tooth fairy will be there giving out goodies!

15. COVID Information:

- a. Dr Paulissen recommends the use of masks when in crowded and indoor places
- b. Boosters are available for 5 years and up
- c. Moderna Bivalent booster for adults is available
- d. Boosters are available throughout the county at pharmacies and health care settings.
- e. The boosters protect against the Omicron BA4/BA5 variants and original strain that cause COVID 19.
- f. Get a booster if it has been over 2 months since your last booster if you're over 12 years of age.
- g. Local hospitals report they have capacity, rise of RSV, Flu and Covid is better than it was
- h. Community vaccine data: 78% have initiated covid vaccination; 72% have completed primary series.

B. Staffing (*Old business kept for information*)

1. Vacancies: Multiple

a) Clinical

- i. Nurses – working with CCO for recruitment; considering an FNP as clinical manager; building partnership with community college nursing program

b) Behavioral Health

- i. Assistant Behavioral Manager – Anya – started 11/16/22 – working on implementing CHW in the coordinated care
- ii. Working with CPCCO to recruit in person
- iii. Still working on getting patients connected with psychiatrists – room set up in clinic for virtual visits for patients

c) Psychiatrist

- i. Contract with Bright Psych for patients that needed continued support
- ii. Working with CCO to recruit for in-person, virtual, or hybrid visits

d) Managers

- i. Administrative Manager – postponed until we start another admin specialist
- ii. Communication & Wellbeing Manager – position still open

C. Medical

1. Virtual Visits Program Update

a) Testing out virtual visits with MA in the room and providers elsewhere

- i. Testing out process with MA on site and provider off site
- ii. Adding new high resolution tools to supplement visits
- iii. Will be looking to add a Community Health Worker (CHW) in the field with e-tools to assist with visits

2. MA training and support

a) Carol Miller, MA, has been assigned as Lead

b) Dr. Brown has agreed to provide Lunch and Learn events for MA's

3. Nurses – new nurse starting in February!

D. Other

1. New HR Director – working with each division on specific staffing needs. First year that Marlene heard from HR that Public Health and safety is a priority and that it's necessary to be fully staffed to meet health needs. Maia and Marlene working on updating organization chart by division. HR assured us that they will be posting on all sites to reach larger audience.
2. TCW: in process of CHNA (Community Health Needs Assessment) and working on CHIP (Community Health Improvement Plan); 3 main points: access to care, housing resources, financial stability. Added Access to Care committee – opportunity to participate

Action: Kimber moved to approve the Administrative Report; Carol seconded. Motion carried.

6. Finance Report

- A. **Page 1:** November's month end cash balance was \$3,564,099.16 ending with \$131,212.67 more in revenue than expense.
1. **Page 6: Revenue:** Irene reported that we received HRSA drawdowns totaling \$232,717.46. We also received \$5,224.40 in Care Oregon Quality Pool/COVID19 funds for OHA annual adjustment. Received 2 Medicaid Wrap payments in November for \$509,021.97. Irene reaching out to Treasurer's office regarding not receiving any interest payments, to which they responded with they suspect we will see payment in the next month. All other revenue is within normal range.
 2. **Page 6: Expense:** Drugs and Vaccines line is higher than usual due to buying a lot of flu vaccines for patients. All other expenses were within normal range. Reserve build up is nice to have for Hooley building expenses.
 3. **Page 7: Materials & Services:** All expenses were within normal range for materials and services.
 4. **Pages 9-12: HRSA Budget Revenue and Expense:** Revenue was \$232,717.46 for November and expense was \$356,071.22. All other revenue/expense was within normal range. HRSA grant money normal. Did just receive notice of award for covid expansion funds for \$107k to be used in 6 months starting 2023. Funds can be used to testing, vaccination, outreach. Will need to submit budget to HRSA in January – presented in Appendix A.
 5. **Page 13: Encounters:** Total encounters for November was 3,264. Tillamook clinic had 2,823 encounters; dental had 410 encounters; and Rockaway had 19. Average Provider Encounters per FTE were 15.70. Provider FTE was 4.21.
 - Lots of staff outages and open charts from October that carried over into November, which is making November seem overstated.

6. **Page 16: Monthly Posted Encounters per Provider:** Encounters for all providers with the highest at 26.72 and the lowest at 12.85.
 - Lots of staff outages and open charts from October that carried over into November, which is making November seem overstated.
7. **Page 17: Monthly Generated Revenue:**

Provider revenue in November was a total of \$200,779.62. The number of days open in was 19, giving the average revenue for the workday at \$10,567.

 - Dr Redmond had \$38k that was stuck in the system for October, might get paid for some but other claims might get denied for timely filing.
8. **Page 18: Accounts Receivable:**

Total Accounts Receivable was \$713,066.37. The majority in the 0-30 bucket at 61.96%. The average for our 0-30-day bucket is 37.90 days; and gross charges were \$668,024.87. Payer mix shows Self Pay at 31%; and the percentage for Medicaid is 25%. Privately insured is at 25% and Medicare is at 18%. Oregon Contraceptive Care A/R is at 0%. Dr Redmond's claims might affect future months AR.
9. **OCHIN Top 10:** We were number 78 in the top 50 out of 145 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 52. There are multiple issues concerning OCHIN and we have been assigned and working with a new team. 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 service 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)
10. **Other:** HRSA ECV Grant (Appendix A)
 - Awarded money from HRSA for expanding capacity for vaccinations (ECV). \$107k.
 - Requested budget due 1/6/23 – Irene and Maia submitted the requested forms and budget template.
 - Cannot use money for any assets (over \$5k)

- Decided to fund: mobile clinic driver and medical assistant, both 6 months, including fringe benefits, and the rest to supplies. The vision is to coordinate vaccine events throughout the county and in schools.

Action: Donna moved to approve the Financial Report; Carol seconded. Motion Carried. Bill moved to approve the HRSA ECV grant; Carmen seconded. Motion carried.

7. Report of Committees:

- A. Quality Assurance Committee (QA)
 - 1. Work in progress due to revamping and organizing efforts.
 - 2. Agenda and sharing went well, but more work to be done.
 - 3. Working on presentations for easier viewing of reports.
 - 4. Updated reports, attempting to copy the format previously used.
 - 5. Meeting again in February. Should be back to the way it used to be done.

Action: Donna moved to approve the report; Bill seconded. Motion carried.

8. Old Business:

A. Grants:

- 1. OHA Behavioral Health Resource Networks (BHRN) Grant
 - a) Still working with OHA on definition & scope with extension on project deadline
 - b) Would like state consistency on language and expectations, screening tools, definitions on types of MAT services
 - c) Continuing to service MAT patients, same day appointments
 - d) Working with Adventist health for patients who want to be seen within 24 hours
 - e) Working on a couple open positions that will be funded by this grant
- 2. HRSA Rural Health Network Planning Grant (Due Jan 6 2023)
 - a. Grant submitted and waiting for results
 - b. Funds would begin in June 2023

Other:

- 1. None.

9. New Business:

A. Grants:

- 1. NASTAD Harm Reduction Syringe Services Grant
 - i. Public Health Harm Reduction team not fully funded to work full time on services
 - ii. Seeking to get funds to allow more time spent on harm reduction services, expand services, outreach and training
 - iii. Proposing to use the funds for a full time public health program rep and .3 FTE community health worker, fringe benefits, and supplies for staff and to give to clients. Funds are for 1 year. Could be renewed for another couple years.
- 2. HRSA Expanding Covid Vaccine Grant (See Appendix A of Finance Report)

Action: Carmen moved to approve applying to the NASTAD Harm Reduction grant; Carol seconded. Motion carried. HRSA ECV grant approved under Financial Report.

B. Other:

1. None

C. Policy & Procedure:

1. Patient Safety and Risk Management Program

D. Credentialing & Privileging:

1. Dr. Lee Long, DMD
2. Dove Rainbow, PA

Action: Bill moved to approved the Patient Safety and Risk Management Policy; Kim B seconded. Motion carried. Carmen moved to approve credentialing of Dr. Lee Long and Dove Rainbow; Bill seconded. Motion carried.

10. Training:

1. Access to Care Interactive Discussion – Presentation with Amy McVeety and Maria Bateman, Public Health Representatives
 - a. Slides will be attached.

11. Upcoming Events:

1. Baby Teeth on 2/11 – by dental clinic, mobile clinic will be there, along with the Tooth Fairy giving out gifts to kiddos!

12. Unscheduled:

1. None

13: Adjourn: The meeting was adjourned at 2:33 PM