

Tillamook County
Community Health Council
Meeting Minutes
April 19, 2023

Present via Telephone: Sharon Kaszycki, Donna Parks, Carmen Rost, Harry Coffman, Bill Baertlein, John Sandusky, Erin Skaar, Kimber Lundy, Carol Fitzgerald
Excused:, Tim Borman, Kim Smith-Borman,
Absent/Unexcused: Donna Gigoux
Staff Present: Irene Fitzgerald, Maia VanSpeybrock, Marlene Putman
Guests: Eric Brinkert with Solid Ground

1. Call to Order: Harry Coffman called the meeting to order at 12:36 pm.

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

A. Community/Patient Concerns

1. Phone tree issues still happening when calling into the clinic. Option 6 loops when pressed, resulting in not being able to get a hold of someone. Irene and IT is working on ongoing issues, along with new issues arising. IT is working on implementing a new phone system that is scheduled to go live in spring 2023.

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 March 22 Meeting minutes

Action: Sharon moved to approve as written; Kimber seconded. Motion carried.

4. Board Development:

A. Member Recruitment

1. Harry spoke with Erin the new Health Occupations teacher at the high school. She will speak with her juniors to recruit someone to start this summer or fall as a senior.
2. Tillamook Bay CC – Health Administrative degree students. Jay Bankhead is new head of overseeing student program. Harry to reach out.

B. Health Council Member Contact & Areas of Expertise:

1. Annual forms to be sent out via mail.
2. Conflict of Interest, Member Attestation, Release Form
3. Please fill out and return to admin office

C. Common goals – shared resources between agencies:

1. No report

D. Underrepresented & Youth Member

1. No report

E. TCCHC Committee/Workgroup/Opportunities

1. Marlene to review committee list and share next council for opportunities

F. Health Council Acronyms

1. See Attached

5. Administrator's Report: General Update and Report – Marlene

A. Community Update

1. Community Update Reports – Continue weekly updates on Tuesdays radio/livestream.

- a. **TBCC – resource fair – 04/18/23**
- b. **Homeless Connect – being planned for June 2023(either June 1 or 3) - Nehalem Bay Methodist Church from 11-3**

2. COVID-19 Updates: We are continuing to provide weekly community updates but we are expanding beyond COVID19 to provide other updates and encourage people to get back to providers for annual exams, check-ups, appointments, screening, etc.

A. Vaccines –

- a. **OHA has advised to pull all Mono (1 strain COVID19) Valent & Bi-Valent (2 strains) vaccines**
- b. **OHA will provided updated Immunization Guidelines**
- c. **New booster likely coming and likely to be Bi-Valent Booster**
 - i. We do not know manufacturer
 - ii. We do not know dosing and frequency yet
 - iii. We do not know cost and insurance coverage
- d. **likely will be a COVID19 vaccine booster available and recommended in the late summer and fall. We do not have any specific information about availability, cost**

B. Vaccination Requirements for Health Care providers: still in place through November 2024. National Public Health Emergency will be lifted May 11, 2023 which may impact the requirement. Will wait and see.

C. Masking Update: Effective April 3, masks will no longer be required in medical facilities. We have modified our policy and advised all staff via email, In the Loop and all staff virtual meeting.

D. For COVID symptoms, prevention, and testing: We are advising:

If you are feeling ill with flu-like symptoms, stay home and contact your healthcare to see about potential testing options. At home testing kits are still available at no cost at all county library branches as well as at our clinic front desk.

If you do test positive for COVID-19, follow OHA isolation guidelines:

- isolate (stay home from work and away from others) for at least 5 days from the start of symptoms or positive test result if without symptoms.
- Seek treatment as early as possible if you are at high risk of severe COVID-19 illness.
- Continue frequent handwashing and disinfecting of high touched surfaces.

3. Facilities & Space Planning – Contracts in place!!!

- a. **McKinstry & OH Planning + Design- space planning –**
 - i. OH Planning + Design background and experience
 - ii. Review understanding of need and scope of services
 - iii. Agree on deliverables, schedules and fees
 - iv. Additional concerns/questions
- b. **Facilities planning -repairs,etc – w/ other county departments**
- c. **Safety Planning – with other county departments**

4. Clinical Manager and Supervisor (No HRSA key position vacancies)

- a. Tabatha Noffsinger – Clinic Manager – OS2s and day-to-day for MA
- b. Office Supervisor – recent vacancy but not a HRSA required position – posted
- c. Clinical Manager duties – supervision of MA & Nurse – Dr. Steffey

5. Mobile Services:

- a. Mobile Clinic Driver Hired and in training!!!
- b. Submitted grant application for Mobile Unit/Van to increase access to care
 - i. Focus on: immies; STI; WIC; Harm Reduction; screening and referral.
- c. **Question HC Member:** Mobile Crisis Response – does CHC provide?
 - i. No – 811 call.
 - ii. Law enforcement will respond and consult with TFCC
 - iii. Can call in TFCC staff to respond
 - iv. If limited issues, then call TFCC for crisis counselor response.
 - v. Staffing with mobile crisis is challenging

6. Medical Updates – (No HRSA key position vacancies)

- a. **Providers:**
 - i. *Dr. Steffey – out for 6 weeks – starting May 5*
 - 1. *Coverage and staff assignments begin developed*
- b. **Nurses – 1 clinical Nurse in training and 1 PH Nurse position offered**
 - i. Clinical Nurse scheduled established and visits are being scheduled!
 - ii. Reminder - New Nurse started on February 1, 2023 !
 - iii. In training with training schedule created by Dr. Steffey and team.
 - iv. **Nurse practitioner as supervisor – TBD – still in process.**
- c. Updating Policy – Clinical Photography
- d. Student Clinical Rotations and Students Shadowing – usually 5 per year

7. Behavioral Health (No HRSA key position vacancies)

- a. **BHC Manager – Out of the office for 4 weeks – daughter had a new baby**
 - i. Assist. Mgr – lead for questions, etc.
 - ii. Training OS2 staff for call while BHC Lead MA is also out.
- b. Contracting with In-Site Medical Group PC more commonly known as Array Behavioral Health Service – which will provide an assigned staff person to work with our patients. Services will be provided via telehealth with this remote provider but the provider will work with our staff, enter information on our system, and we will bill for the services provided.
 - i. The contract provides for 24 hours week of the LSCSW time.
 - ii. We will determine if more hours are needed as services progress.
 - iii. Still seeking an LCSW that will be a good fit for our team
- c. **BHC 3 Staffing/Position Vacancies impacting patient access:**
 - i. Continuing to seek BHC 2-3 employees – **Interviewed and made an offer!**
 - 1. Reminder: BHC 2, Karen Sheeler – **seeking another clinician for patient care - LCSW**
 - 2. County will post on other sites and working on more promotion
 - 3. Continue working w/ CPCCO for recruitment and “interest views”
 - ii. **Public Health Program Representatives** – multiple vacancies in clinic with medical, behavioral, and public health
 - iii. **We continue to work with BrightPsych for referral and support**

1. Don't provide services to Medicare patients
2. Don't provide services to all insurance types
3. Will volunteer pro-bono for a certain amount of Medicare

8. Dental

- a. **Delayed - Expanding to North and South County – Was scheduled to start January but target moved because we do not have staff to deliver services**
 - i. **Challenges – mobile clinic driver, dentist, hygienist**
 1. No dentist available yet
 2. Discussing part-time dental hygienist – expanded practice!
 3. Mobile clinic driver hired – started 04/15/23
 4. Alternative Delivery Model for Dental – under development
 - a. Possible later afternoon and/or weekend services
 - b. Using existing staff and paying overtime
 - c. Using dental school volunteers or assistants
- b. **North County – Nehalem Bay Health Center & Pharmacy proposed new building (subject voter approved levy) has space for dental**
 - i. Meeting with CEO to discuss how they plan to staff – offered to partner
- c. **Patient Satisfaction Survey – will be administered in the next month for dental**
 - i. Working on detail of the survey
 - ii. Administration and oversight for data collection - tbd

9. Public Health – Services are operational and expanding again!

- a. Home Visiting – New Nurse hired!!!!
 - i. Will be expanding services for families – maternal/child visits
- b. WIC –
 - i. Required Nutritionist – Current Contract for Nutritionist
 - ii. Lateral Transfer of the PHPR to WIC Program Coordinator – Anadelia Aguilar with .3 - .4 FTE WIC
 - iii. Ana will continue .4FTE as lead Care Coordinator for clinical team
- c. **TPEP – (See notes for BOCC TPEP Intergovernmental Agreement 01/18/23)**
 - i. Current staff Coordinator – leaving in August 2023
 1. Hope to begin recruitment
 - ii. Work Plan due May 5

10. Office Equipment, Supplies & Facilities

- a. New Phone system install moved from February to Spring 2023- Target April
 - i. Request for phone system “map” for calls, voicemail, afterhours, etc.
 - ii. In process of updating phone tree and messaging
 - iii. Received wifi system upgrade to improve connectivity for staff and public
- b. **Facilities update – 8th Street Annex - Hooley Building**
 - i. **Reminder/Overview:** Contract with Cove Built Construction
 - ii. **Background:**
 1. Prepared an RFP and went out for bid 3 times
 2. Accepted lowest bid (\$1.23 million) and issued notice of intent to award (09/21/22) to Cove Built of Arch Cape which has completed several projects in county

3. Have had two meetings with Cove Built about plan and logistics
4. Parking arrangements with St. John's church and Pete Anderson realty within easy walking distance to main clinic.
- iii. Construction started on building January 2023. Fences up, around building and 8th Street lot. Drive by to check it out!
- iv. Mentioned in March – Reminder: Will be adding a generator to the building from Public Health funds that need to be expended by June 30, 2023.
 1. Have included the upgrade in the change orders and items is being purchased.
 2. Approximate cost: \$80,000
11. **County Budget Due & Presented (04/13/23)**– reviewed by Health Council last month
 - a. As mentioned last month, materials are included with the monthly finance presentation for Health Council for review and approval
 - b. Process/Next Steps for County Budget Presentation – Commissioner Skaar
12. **Strategic Planning Timeline – revisit/reminder**
 - a. As was discussed during our previous meetings, we are involved in an update to our strategic plan and gathering information for a comprehensive strategic planning session for a 5 year plan.
 - b. Work with consultants: Solid Ground – Marc Smiley & Eric Brinkert (new affiliation for Eric Brinkert, who assisted us with planning previously)
 - c. Executive Committee members participated in a group interview – 02/14/23
 - d. Timeline –(See timeline create by Marlene & Maia) Feb – April - Interviews with key partners (5), health council, and managers; April – May planning sessions with leadership; May – June- update draft to current plan; May – June - identify issues for comprehensive strategic planning to occur in 2024-25.
 - e. Interviews completed and DRAFT summary report attached w/ presentation today by Erik Brinkert consultant, Solid Ground.
13. **Compliance and Site Visits - Reminder**
 - a. Completed PCPCH – state reporting – thank you Irene
 - b. Submitting PCPCH application – Due this month.
 - c. Next Compliance visit - HRSA Site Visit – Approx. August 2023 – No report
14. **Access to Abortion Services.**
 - a. OPCA is pursuing funding and legislation during legislative session. Minimum will seek to expand reproductive health services if cannot provide abortion services with FQHC can enhance other services
 - b. **Reminder:** This was discussed as a “training item” in August, and mentioned in September that we would discuss more in future meetings. Consistent with your goal in mind of getting more information and determining what expanded role, if any, we can play.
 - d. **Reminder: FQHC's not allowed to perform medication abortion or procedures under current federal law pertaining to Health Centers.**
 - e. Working with OPCA and OHA about options to improve access and services.
 - f. **Note:** no abortion services available in our county or contingent counties.
 - g. **Proposal in legislature** – to fund expanded reproductive health service in 2 sites in Oregon.

15. **Legislative Advocacy** – reminder that you can advocate for legislative issues: testify and/or write letters. Can provide more information about role, if HC would like. Staff cannot take a position as government employees.

Action: Sharon moved to approve the Administrative Report; Bill seconded. Motion carried.

6. Finance Report

- A. **Page 1:** February's month end cash balance was \$3,578,208.66 ending with \$166,166.34 more in expense than revenue.

1. **Page 6: Revenue:** Irene reported that we received HRSA drawdowns totaling \$313,851.16. We did not receive a Medicaid Wrap payment, Irene is following up with OHA – over \$1 million prior pending that was received in March. All other revenue is within normal range.
2. **Page 6: Expense:** Reserve build up is nice to have for Public Health building expenses. Overtime amounts due to loss of staff which results in more work for current staff. All other expenses were within normal range.
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 \$313,851.16 for February and expense was \$524,071.97. Irene added carryover amounts which will start seeing drawdowns soon. All other revenue/expense was within normal range. HRSA grant money normal.
5. **Page 13: Encounters:** Total encounters for February was 1,858. Tillamook clinic had 1,141 encounters; dental had 675 encounters; and Rockaway had 30. Average Provider Encounters per FTE were 11.90. Provider FTE was 3.94.
6. **Page 16: Monthly Posted Encounters per Provider:** Encounters for all providers with the highest at 13.75 and the lowest at 9.47. There were some snow closures that affected appointments.
7. **Page 16: Monthly Generated Revenue:**
Provider revenue in February was a total of \$155,193.78. The number of days open in was 19, giving the average revenue for the workday at \$8,168.
8. **Page 17 - 19: Accounts Receivable:**

Total Accounts Receivable was \$539,620.05. The majority in the 0-30 bucket at 48.13%. The average for our 0-30-day bucket is 29.50 days; and gross charges were \$555,226.25. Payer mix shows Self Pay at 43%; and the percentage for Medicaid is 26%. Privately insured is at 18% and Medicare is at 12%. Oregon Contraceptive Care A/R is at 2%.
9. **OCHIN Top 10:** We were number 78 in the top 50 out of 166 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 54. 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)

Action: Kimber moved to approve the Financial Report; John seconded. Motion Carried.

7. **Report of Committees:**

A. **Quality Assurance Committee (QA)**

1. Approve February Minutes
2. March/April Report
3. Dr Borman not present for report

Action: No action. Postponed until next month.

8. **Old Business:**

A. **Grants:**

- a) BHRN grant still underway. Program representative job posted to assist with referral coordination.

9. **New Business:**

- A. **Grants:** Grants: Approval received at Executive for applying to the OHA Mobile Health Unit Pilot Program (applied 4/12; results 4/21)

Action: John moved to approve applying to OHA grant; Bill and Kimber seconded. Motion carried.

B. Policy & Procedure:

- a) Revising HIPAA Policy with Assessment
 - Working with the CCO and legal
- b) Updating Mask Policy for healthcare setting – OHA guidelines expired April 3
- c) Clinic Photo policy updated

C. Credentialing & Privileging: None

Action: no action

10. **Training:**

Strategic Planning Process and Update with Eric Brinkert – Solid Ground. Eric provided a draft Community Health Council Meeting Minutes (4/19/2023)

summary of their findings after interviewing key stakeholders. Upcoming meetings: May 4th and May 24th. Health Council invited to May 24th meeting via Zoom which will be a review of the drafted new plan.

11. **Upcoming Events:**

- 4/18/23 Community Conversations, The focus/host will be Tides of Change as we recognize Sexual Assault Awareness month in April and Tides of Change 40 years of service to the community @ Tillamook Bay CC
- 4/22/23 DEA Drug Take-Back Day @ TCCHC clinic

12. **Unscheduled:**

13: **Adjourn:** The meeting was adjourned at 2:09 PM