Tillamook County Community Health Council Meeting Minutes September 18, 2013

Present: Harry Coffman, Carol Fitzgerald, Amy Griggs, Donna Parks, Clayton

Rees, John Sandusky, David Waud, Tim Josi

Excused: Martha Beckum, Rex Parsons, Cynthia Putt, Carmen Rost, Dave Walker

Absent:

Staff: Marlene Putman, Donna Gigoux, Irene Fitzgerald

Guests:

1. Call to Order: Harry called the meeting to order at 12:22 PM.

2. Consumer/Community Needs, Concerns, Issues:

a) None reported.

3. Consent Calendar:

a) Approval of August 21, 2013 Meeting minutes: John Sandusky moved to approve the minutes as written; Donna P. seconded. Motion carried.

4. Training & Presentations:

a) Health Department & CCO Measurements –The Council will receive training to review 1-2 measures per meeting by the Site Specialist, Ronda Wagner. Because Ronda is not available until the meeting after the Strategic Planning meeting in October, Marlene provided an overview of what Mindy Poetsch, our contractor, of North Coast Community Development (NCCD) is working on for Cover Oregon efforts.

5. Administrator's Report:

- a) 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:
 - (Strategic Planning in October)
- **B.** *Increasing Productivity of Providers and Staff to Increase Revenue:*
 - PCPCH Incentive Payments paperwork has been sent in for our PCPCH Tier 3 payments for all of our clients who have a primary care provider with our clinics. We are awaiting the results of the submission.
 - Marlene met with the Hospital staff regarding ER usage issues. Further efforts will involve meeting with more providers in other agencies as well as our own. A joint training is being developed for MA's and clinical support staff on care coordination with trainers from other clinics.
- C. Improve Financial Practices and Systems in order to Improve Efficiency and Effectiveness:

- Continuing to contract with Community Link Consulting to find ways that the financial consultant can be utilized for federal reporting and ongoing financial work practices with the Treasurer's Office.
- **D.** Increasing Revenues for Other Sources in Order to Offset Uncompensated Costs for Public Health Services and/or Operational Changes and Improvements:
 - Continue to pursue opportunities for dental services and Public Health funding. New grants are being made available through our CCO for Community Prevention programs, which should be made available soon.
 - Coordinated Home Visiting is ongoing with the consultants and visiting nursing. There is a potential for additional funding through federal grants. We continue to find new sources of funding for this program for sustainability.
 - **E.** Implement Policy & Procedure that support our Mission and Improve Quality of Service:
 - Strategic Planning Marlene reported that at the Executive Committee, it was decided that the planning for Health Council and clinic staff will be separate due to the shortage of providers, which is affecting our revenue. Marlene will conduct planning with leadership staff and Health Council will conduct their planning in October with an extended meeting. Donna P. noted that she looks forward to this each year to connect with the clinic staff. She suggested that the Council host a breakfast at the next all-staff meeting on October 9th. She will organize the food and will work with clinic staff to host the breakfast.
 - **F.** Increase Partnerships with Health & Human Service Organization in Order to Leverage Resources, develop shared resources and strengthen relationships for future collaborations:
 - The Early Learning Hub (ELC) development is ongoing with the RFP due early October. NWRESD will be our local hub and will involve working with our CCO.

Action: John moved to approve the administrative report. Donna seconded. Motion carried. (Clayton Rees stated that he felt that actions should be taken separately for the Administrator's report and the Financial report. Council members concurred and meeting agendas moving forward will reflect separate actions for each item).

Financial Report: September 2013

Financial Report was provided and Irene outlined the following:

- Total revenue for JULY (September report) was \$257,098; total expenditures were \$412,245, with a month end cash balance of \$-155,147. Actual cash balance according to the Treasurer's office was \$-29,840. Irene indicated that there is a Public Health report that is late and funds haven't been received for that month.
- Total Monthly Encounters remain down, 1,097, mainly due to shortage of providers and loss of patients from our Adult Nurse Practitioner moving on to TCGH.

Average daily encounters per provider was 17.1 with monthly average encounters for the year at 1545 and average daily encounters per provider at 12.3;

• Accounts Receivable was \$249,423.

<u>Action</u>: Donna moved to approve the administrative and financial reports. Amy seconded. Motion carried.

6. Old Business:

- a) Public Health Accreditation –The Community Health Improvement Plan (CHIP) and Community Health Assessment (CHA) will be done working with the Community Advisory Committee (CAC). A community survey has been developed and is currently being distributed. David Waud is taking the survey to be distributed throughout the high school. The process expects to receive at least 1500 responses.
- **d**) Cover Oregon & HRSA Outreach and Enrollment Grants Marlene indicated that if council members would like to volunteer to be Assisters, ongoing training opportunities will be available.
- e) Strategic Planning October 16, 2013 12:15 4PM at NWRESD.

7. New Business:

- a) **Provider Recruitment** Marlene reported that Dr. Zimmerman will be leaving October 4th and a farewell event has been planned. Our clinic is down approximately 1.8 FTE with the providers leaving or already left. Recruitment is underway and there has been interested providers responding. It should take between 6-12 months to get new providers on board. Discussion is ongoing surrounding the issues of provider salary limits and county policies in place, where there is little room to be competitive to attract qualified providers. Marlene reported that about 500 patients could follow our Adult Nurse Practitioner when she moved to another facility, causing a big hit in encounters and loss of revenue.
- **b) Telephone Issues** Marlene discussed the new phone system. The phone tree is simply too complicated for patients and many patients are simply giving up and going elsewhere for services. Currently she is looking at having a dedicated person direct all incoming calls to the clinic.

8. Committee Reports:

a) Quality Assurance: Marlene talked about having someone else on the Council attend the QA/QI meetings that can assist in helping the council members understand the measurements. Minutes were provided and read.

Action: Donna P. moved to approve the minutes; Amy seconded. Motion carried.

9. Adjourn: The meeting was adjourned at 2:14 PM.