# Tillamook County Community Health Council Meeting Minutes January 17, 2018

Present: Tim Borman, Harry Coffman, Carol Fitzgerald, Donna Parks, Clayton

Rees, John Sandusky

Excused: Bill Baertlein (BOCC Liaison), Carmen Rost, Amy Griggs

Absent/Unexcused: Jennifer Arreola, Jessica Galicia,

Staff: Marlene Putman, Debra Jacob

**Guests**:

**1. Call to Order:** Chair Harry Coffman called the meeting to order at 12:17 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: No report

#### 3. Consent Calendar:

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

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

#### 4. Board Development:

- a) **Potential New Members** Health Council is in need of 1 new member. Council members recommended the recruitment of consumer members, through asking staff to identify and reach out to current patients. Other suggestions for avenues of recruitment were placing a newspaper advertisement through the BOC and reaching out to the appropriate personnel at TBCC, either the president or Academic Advisers to identify and reach out to students especially those with healthcare or business/public administration interests. Carol Fitzgerald will check on South County contacts with various South County based groups. Donna G./Marlene will follow up with staff in-reaching to patients and with a TBCC contact about recruitment through their organization. In discussing recruitment, it was asked what the requirements of the board and its board members basic requirements were: 9-15 members, not more than two members working in the healthcare industry, council members cannot be a County employee or relative of a County employee and youth members are voting members. The only youth incentives for participation was through incorporation of involvement with Senior Projects. Council members were directed to refer any interested parties to Donna Gigoux for follow up.
- b) Health Council Member Contact & Areas of Expertise: No update.
- 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: There is another Behavioral Health Integration planning meeting scheduled. Behavioral Health positions are still in the works with the County, the next deadline is February 1<sup>st</sup>, with the end of February as an optimistic target for getting the BH positions through. For now, in order to fulfill grant requirements, we have a BH provider working through a temp. agency providing services.

#### • Dental Health:

- **School Based Dental** Program is looking at different ways to engage families with the sealant program.
- **Dental Providers** Continuing to work with Dr. Long's office to for contracted dental services.
  - Dr. Borman brought up a pilot study being done to prevent the progression of early stages of tooth decay for children. The study was shown on PBS and used non-invasive methods (silver nitrate and sealants) to stop the progression of caries that had not gone through the first level of enamel on primary teeth. Not having to use drills and sedation makes for a much less frightening experience at the dentist's office for young pediatric patients and their parents. Could see if there was some local interest in trying the technique. Marlene will follow up with Alyssa Franzen, Dental Director for the CCO and possibly Dr. Javadi and report back.
- School Based Health Center: No Update.
- Safety Net Grant (I'm Healthy/Soy Sano): No update.
- 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 A report was given at the BOC meeting, 1/17, that included progress to date information, valuations of contributions and reappointment of YOW members.

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

1. Current clinic focus is to ensure Erin Oldenkamp's patients are being seen by another one of our providers in-house. So far, 20 families have chosen to go with Erin, most have chosen to stay. In general Spanish speaking patients are choosing to stay with the availability of translators in our clinics. TCHD is hopeful in continuing to work with Erin as she is going to be working on the Oregon Pediatric Improvement Project and will continue to refer patients to WIC and Home Visiting services. Another focus is to ensure there is not a gap in services with the continued integration of behavioral health services,

- dental services and pediatrics and looking out three years to see what TCHD will need to have in place.
- 2. South County clinic is still closed. Marlene, Robin, and Donna G. will meet to discuss use of a room at the South County TBCC building with the new TBCC president sometime in November.
- 3. Rockaway Beach clinic is open one day per week. Encounter numbers and productivity continue to improve with the restricted satellite clinics' hours.
- 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 Improvementsa) 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 Some staff are currently attending an ICS 300 training as part of the Emergency Preparedness program requirements. TCHD staff continue to work on meeting these training requirements.
- 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. Dr. Borman seconded. Motion carried.

#### **6. Finance Report:**

- **A.** November's month end cash balance was \$1,478,022.70 ending with \$1,830.70, more in expenses than revenue.
  - **Revenue:** \$8,750 in school nursing contracts was received, a quarterly payment from Neah-Kah-Nie school district. \$1,279.75 in refunds and reimbursements relating to a CPR training provided to Neah-Kah-Nie School District was also received.
  - Expense: Professional/Technical Salaries (5300) increased by \$12k in November, \$6k in a second half of a sign-on bonus and \$6k in 4 staff members' annual step increases. \$16,762.13 in Drugs & Vaccines (6110) was related to \$3,327 in flu vaccines purchased and \$13k due to State billable vaccines invoices from for two months. \$1,857 in Public Relations (7022) was related to a Brownfields closeout handout for the closeout presentation done in October. \$1,050 in Professional Services (7101) was related to the financial SAC/Medicare Cost Report consultant fees. \$710.72 in R&M Vehicles was for new tires for the Environmental Health Vehicle. There was no Babies First Match payment made in November, should be posted in December to Misc. Materials & Services (7899).
  - **HRSA Budget Revenue and Expense:** All revenue and expenditures are within normal ranges.

- Encounters Overall productivity was up in November, total encounters up to 2,051 from 1,648 in October. Average Provider Encounters per FTE up to 11.4 from 10.9 in October, 8.6 in November, 2016.
- **Schedule Dashboard:** Overall schedule dashboards improved in November compared to October with the overall percent of appointments completed over available increasing 5%, from 57.9% in October to 61.3% in November.
- Accounts Receivable: Total Accounts Receivable was \$392,969.18. The majority in the 0-30 bucket at 71.01%, up from 66.89% in October. Payer mix does show the increase in Self Pay AR balances as a result of OCHIN collection process issues, specifically the working of 31-120+ day claims. OCHIN's AR manager is actively working with staff to correct their Self Pay processes and we hope to see a steady decrease in Self Pay AR balances, including an increase in Self Pay balances on payment plans. Medicare Behavioral Health Self Pay balances are being worked internally to offer sliding fee discounts and/or special circumstances for remaining balances after Medicare denials.

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

# 7. Reports of Committees:

# A. Quality Assurance/Quality Improvement Committee - November 2017 minutes:

• John reported on the December QA/QI committee meeting, summarizing the metrics reviewed and identifying potential problems with metric results. Confusion surrounding the reasons for the results of the Mammogram metric were discussed including the need of orders for mammogram testing with Adventist Health, the mixed messaging and education in media regarding the need for mammograms and lack of test result receipt from referrals given.

Action: Dr. Borman moved to approve the QA/QI minutes as written; Clayton seconded. Motion carried.

#### 8. Old Business:

# A. GRANTS & Resource Development -

- a) OCF Tillamook Education Foundation School Based Dental (See Administrative Report)
- b) New Building Tillamook The low voltage wiring is nearing completion. EC Electric Contract was extended part-way through January; wiring should be completed by the end of January.
- c) HRSA Access Increases in Mental Health and Substance Abuse Services (AIMS) Grant See Administrative Report)
- d) CPCCO Diabetes Management Grant Marlene is working with Mimi at the CCO on finalizing the grant application.
- e) OHA Regional Public Health Modernization Grant –Clatsop, as the grant applicant, received the \$100,000 Planning Grant agreement from OHA, TCHD will either receive a contract or letter of agreement.
- f) Revised Health Council Meeting Schedule The revised 2018 meeting schedule was reviewed and noted that the September-November Full Health Councils will be held at an alternate location from the Herald Center.

<u>Action</u>: Donna P. moved to approve Revised Health Council Meeting Schedule for 2018; John seconded. Motion carried.

# 9. New Business:

- **A.** HRSA UDS Report Admin staff will be working on the Annual UDS report for Calendar Year 2017 beginning the week of 1/22 and submission due mid-February.
- **B.** Staff Confidentiality Agreement Annual Staff Confidentiality Agreement forms were given to Health Council members for signature.

### 10. Training – Time permitting

a) None.

## 11. Upcoming Events:

Homeless connect event at the Catholic Church gym, 1/31, 12pm-5pm.

Tooth Fairy Project event 1/27 at Fred Meyer, will be collecting cash and donations, a portion of which will be given to the Homeless Connect event.

# 12. Unscheduled:

**13.** Adjourn - The meeting was adjourned at 1:25 PM.