

Clinical Advisory Panel (CAP) Meeting Sign In Sheet

Date: March 7, 2019

Location: [] MCMC [X] Providence

	Mar 7	Feb 7	Jan 10	Dec 13	Nov 1	Oct 4	Sep 6	Jul 12	Jun 7	May 3
VOTING MEMBERS										
Al Barton, Licensed Professional Counselor	X		X	X	*	X	X	X		X
Alison Little, MD, MPH	^	^			*^	X		^	X	X
Andrew Roof, MPT, Physical Therapy	X	^	X	X		X	X		X	
Ashley Danielson, RDH, Advantage Dental		X	X	X		X	^			
Elizabeth Aughney, DDS, Dental	X	^	X	^		X	X	X	X	X
Elizabeth Foster, MD, Family Medicine	X	X		X		X	X	X	X	X
Jodi Ready, MD, Internal Medicine, Providence	X	X	X			X	X	X	X	X
Judy Richardson, MD, Family Medicine, Medical Director	^	X		X			X		X	X
Mimi McDonell, MD, NCPHD	X	X	X	X	*	X	X	X	X	^
Nathan Ullrich, MD, Urology, Surgical Specialists						X				
Nicole Pashek, MSN, ARNP, Nurse Practitioners	^	X	X	X	*	X	X	X	X	X
Robin Henson, MD						X	X			X
Samantha Carolla, DO	X	X	X							
Susan Jepson-Deresta, LCSW, HR School District	X	^	X		*		X	X		
Trish Elliott, BSN, Public Health Nursing	X	X	X	X		X	X	X	X	X
LIAISONS										
PacificSource, Kristen Dillon, MD	^P	X	P		*	X	X	X	X	^P
OHA, Dustin Zimmerman, Innovator Agent	X	X	X	X	*	X		X	X	
Susan Lowe, CAC Liaison	X	X	x	X		X	X	X	X	X
EXTENDED MEMBERS										
Advantage, Molly Johnson								^	^P	
CGHC, Coco Yackley	X	^	X	X	*	X	X	X	X	X
CGHC, Suzanne Cross	X	X		X	*	X	X		X	P
CGHC, Katy Williams								X		X
COIPA, Kim Bangerter	X				*		X	X		X
MCMC, Amy Sugg	^P	X	X			X	X		X	
Northwest Pediatrics & Adolescent Medicine, Rich Martin, MD			X				X			
One Community Health, Lisa Sponhauer						X				X
One Community Health, Brooke Nicholls	X	X	P	^	*	^	X		X	X
PacificSource, Elke Towey	X		X	X	*		X	X	X	X
PacificSource, Ralph Summers			X		*		X		X	X
PacificSource, Trudy Townsend			X	^	*		X	X	X	X

Reliance eHealth Collaborative, Dan O'Donoghue	X		X				X	X	X	X
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X –in the room; ^ - on the phone; P – partial attendance

*Nov 2018 meeting cancelled due to not enough voting members present for a quorum.

Clinical Advisory Panel (CAP) Meeting Agenda

Date: March 7, 2019

Time: 6pm – 8pm

Location: [] MCMC [X] Providence

Agenda Item	Duration, Presenter, and CAP Action Required
Welcome & Introductions	<p>The group introduced themselves and welcomed Jacob Taylor, the new PacificSource Practice Coach.</p> <p>Other guests: Shellie Campbell and Kirah Doerr – North Central Public Health District (NCPHD), Dr. Glen Patrizio- Mid-Columbia Center For Living (MCCFL)</p>
Announcements	<p>AI introduced Dr. Glen Patrizio and his new role at MCCFL along with Dr. Doug Lyon working to provide primary care at their clinic.</p> <p>Jodi shared that the Motivational Interviewing Training was well received and attended last week despite the weather. Another training will be on May 9-10th and all who couldn't make the training due to snow were able to reschedule for May.</p> <p>Shellie shared that the poverty simulation is taking place and they are still looking for participants in Hood River next Friday and in the Dalles April 5th.</p> <p>Elke shared that Terri Vann has finalized the enrollment form for Home Visiting Connections.</p> <p>Dan shared that Reliance went live with the new Community Health Record 2.0. Access to filled medications is a new component.</p> <p>AI shared an upcoming training on Sequential Intercept Model being held Wednesday 8:30-5pm at GOBHI in The Dalles.</p> <p>AI shared that the CAC lost an original member with the death of Karen Polehn. The group discussed the long-term impact that Karen had on the community particularly around mental health.</p>
Additions and Deletions Conflicts of Interest Non-Agenda items	<p>Andy asked for a follow up on the expanded therapy services for children that was discussed months ago at the Clinical Advisory Panel (CAP). Alison said she anticipated that PacificSource would not be changing their policy but that the discussion would happen in May or June.</p> <p>Beth asked Dustin for an update on Oregon Health Authority (OHA) enrollments and commended OHA for improvements. Dustin shared that particular areas of focused improvements are around re-enrollments. The group asked Dustin to advocate for the term date being more visible to the community. Beth asked if Dustin could have a brief agenda item around re-enrollment for a future meeting.</p>
I. Consent Agenda a. Feb CAP Meeting Minutes b. CAC Meeting Agenda c. 2018 QIM Performance	<p>Susan Lowe made a motion to approve, Sue Jepson seconded. The Consent Agenda was unanimously approved. Note: February CAC cancelled due to weather and AI had shared about the devastating loss of Karen Polehn and the legacy that she will leave behind.</p>
II. CAP Priority area update QIM/Clinical focus area – Tobacco Cessation	<p>Kirah Doerr referred to the materials that had been sent to the CAP ahead of time. As a tobacco cessation counselor, she has received 84 referrals from multiple locations throughout the Gorge. The majority of her referrals come from Reliance. She sees her clients in Hood River and The Dalles. She shared some data on how many people have quit. Average time in the program before quitting is 56 days. Over 70% of clients are PacificSource clients. She has many that quit for a month but only 4 who quit for 3 months and none yet who have quit for 6 months.</p>

	Kirah is working on starting up a support group in both Hood River and The Dalles.
III. PacificSource Updates a. CCO 2.0 Update b. QIM Updates	Elke did a review of the 2018 chart audits and the Gorge CCO exceeded targets for prenatal, postpartum and colorectal cancer screening. Jacob Taylor reviewed the Screening, Brief Intervention and Referral for Treatment (SBIRT) upcoming Quality Incentive Measure (QIM) measure. Elke reminded clinics to call CCO members who are on the redetermination lists.
IV. CGHC Board Agenda Review	Al shared the notes that he had taken from the previous Board meeting- that the CAP and the CAC will have a standing agenda item on the Board. He also shared that Paul and Bruce gave an update on the work around the decision tool work that the Board is reviewing on how to spend money. Beth feels that the Board is being really strategic with how the funds get spent as we may not have shared savings in the future. She feels the Board is working on two things: what is the organizational structure of the health council, and how should the Health Council be thinking about grant making. Al and Beth asked for feedback on what the group thinks about sharing responsibility with the United Way for funding and also other ideas. Mimi feels that using the United Way to give out funds would be abdicating responsibility. Susan L. voiced the importance of the CAC having say in how money is spent. She feels that has made a large impact on the community and that it shouldn't go away. Al also shared that the Board unanimously approved Dr. Carolla's application.
V. CAP membership and attendance	Al mentioned that the Board is considering attendance requirements and rolling down those requirements to the CAP as well. The group discussed adding additional members on and suggested specific job types that might be important to have. There was a recommendation to have people at least let staff know when they are unable to make a meeting and they also recommended having a minimum attendance requirement, although not vote was made.
VI. 2018 QIM Regional Quality Pool allocation	Coco reviewed the current model of QIM sharing and allocation and added the new metrics to the model the CAP had been using previously. She suggested the CAP make decisions about these spending options at the next CAP meeting.
VII. Other funded projects a. 2016 QIM projects b. Community Grant projects	Coco was not able to pull together the materials to present this agenda item.
Next Meeting	April 4, 2019 @ MCMC, 6-8 pm

Acronyms

A1C. Specific test for monitoring diabetes	HTN. Hypertension
ACA. Affordable Care Act	HVC. Home Visiting Connections
ACE. Adverse Childhood Experience	IIS. Immunization Information System
ADHD. Attention Deficit Hyperactivity Disorder	IMMS. Immunizations
AGA, Aging in the Gorge Alliance	LARC. Long-acting Reversible Contraceptive
AOC. Association of Oregon Counties	LUBA. Land Use Board of Appeals
APD. Adults & Peoples with Disabilities	MA. Medical Assistant
AWCV. Adolescent Well Child Visit	MARC. Mobilizing Action for Resilient Communities

BMI. Body Mass Index	MCCFL. Mid-Columbia Center For Living
CAHPS. Consumer Assessment of Healthcare Providers and Systems	MCCOG. Mid-Columbia Council of Governments
CAT. Columbia Area Transit.	MCEDD. Mid-Columbia Economic Development District
CAWEM, Citizen Alien Waived Emergent Medical	MCHA. Mid-Columbia Housing Authority
CCO. Coordinated Care Organization	MLR. Medical Loss Ratio
CGFM. Columbia Gorge Family Medicine	NCPHD. North Central Public Health District
CGHC. Columbia Gorge Health Council	NEMT. Non-Emergency Medical Transportation
CGOHC. Columbia Gorge Oral Health Coalition	NICH. Novel Interventions in Children’s Healthcare
CHA. Community Health Assessment	OCADSV. Oregon Coalition Against Domestic & Sexual Violence
CHARA. Community Health Advocacy & Research Alliance	OCDC. Oregon Child Development Coalition
CHIP. Children’s Health Insurance Programs	OCF. Oregon Community Foundation
CHIP. Community Health Improvement Plan	OCH. One Community Health
CLAS. Culturally & Linguistically Appropriate Services	OCHIN. Oregon Community Health Information Network
CME. Continuing Medical Education	OHA. Oregon Health Authority
CMS. Center of Medicaid Services	OHP. Oregon Health Plan
COIPA. Central Oregon Independent Practice Assoc.	OHPB. Oregon Health Policy Board
CRAFFT. (Adolescent Screening Technique) Car, Relax, Alone, Forget, Friends, Trouble	OHSU. Oregon Health and Science University
CRC. Colorectal Cancer	OKQ. One Key Question
DCO. Dental Care Organization	ONE. Oregon Eligibility
DDA. Dual Diagnosis Anonymous	ORPRN. Oregon Rural Practice-Based Research Network
DEI. Diversity, Equity & Inclusion	OSAA. Oregon School Activities Association
DHS. Department of Human Services	PCP. Primary Care Provider
DNR. Do Not Resuscitate	PCPCH. Patient-Centered Primary Care Home
DSN. Delivery System Network	PDMP. Prescription Drug Monitoring Program
DTAP. Vaccine for Diphtheria, Tetanus and Pertussis	PHQ. Patient Health Questionnaire
eCQM. Electronic Clinical Quality Measure	PHRMH. Providence Hood River Memorial Hospital
ECHO. Extension for Community Healthcare Outcomes	POLST. Physician Orders for Life-Sustaining Treatment
ECU. Effective Contraceptive Use	POTA. Pain and Opiate Treatment Advisory
ED. Emergency Department	PS. PacificSource
EHR. Electronic Health Record	QHOC. Quality & Health Outcome Committee
EMR. Electronic Medical Record	QIM. Quality Incentive Measure
EOB. Explanation of Benefits	RFP. Request for Proposal
FIT. Fecal Immunochemical Test	ROI. Return on Investment
GGFN. Gorge Grown Food Network	RWJF. Robert Wood Johnson Foundation
GOBHI. Greater Oregon Behavioral Health Inc.	SBHC. School-based Health Center
GRACE. Geriatric Resources for Assessment & Care of Elders	SBIRT. Screening, Brief Intervention and Referral for Treatment
HERC. Health Evidence Review Committee	SBST. STarT Back Screening Tool
HIE. Health Information Exchange	SIT. Systems Integration Team
HIT. Health Information Technology	SNAP. Supplemental Nutrition Assistance Program
HRCHD. Hood River County Health Department	SPMI. Serious and Persistent Mental Illness
HRCPD. Hood River County Prevention Department	SUD. Substance Abuse Disorder
	TANF. Temporary Assistance for Needy Families
	TQS. Transformation and Quality Strategy
	WIC. Women, Infants & Children