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| Executive Committee              |  |
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| 6.14.2017                        | 12:30pm  |
| Southeastern Idaho Public Health |  |
| Meeting called by                | Executive Committee  |
| Facilitator                      | Rhonda D'Amico   |
| Note taker                       | Laurie Brenchley   |
| Attendees                        | Mark Horrocks, Maggie Mann, Tracy McCulloch, Cynthia York, Bill Woodhouse, Chris Heatherton, Allison Palmer, Madeline Russell, Rhonda D'Amico, Laurie Brenchley  |
| Consent Agenda                   |  |
|                                  | Rhonda D'Amico   |
| Discussion                       | <ul style="list-style-type: none"> <li>Welcome Dr. Mark Horrocks as the new RC Chair. Welcome Dr. Chris Heatherton as co-chair. Dr. Heatherton is a new Idaho resident. He came to Idaho to become the physician champion for Bingham as they work towards PCMH. We would also like to thank Dr. Bill Woodhouse for serving as our chair, and wish him well in his new endeavors as the president-elect of the Idaho Medical</li> </ul>  |
|                                  | <ul style="list-style-type: none"> <li>Discussion of the Clinic Committee Minutes for May and the Executive Committee Minutes for May. Maggie Mann moved to approve the minutes as drafted. Tracy McCulloch seconded the motion. Consent Agenda was approved unanimously.</li> </ul>   |
| SHIP/IDHW Partner Visit          |  |
|                                  | Cynthia York   |
| Discussion                       | <ul style="list-style-type: none"> <li>Cynthia wanted to turn the time to the Executive Committee to discuss the successes and challenges that have been experienced so far. She also wanted to ask how SHIP can help.</li> <li>Rhonda talked about how the relationships being built across our region are a huge success for us. Many people are coming together that didn't know each other before. She also feels that the structure of our collaborative has been a positive. She is proud that it is different because she feels that the differences are how we learn. The progress that the clinics have made has been incredible. The RC Grant is also a big win because we are able to bring suicide awareness and prevention to our region. Our partnership with ISU and PCMH workforce development has also been a big success. The latest charter that came out on the IHC call talked about workforce development and we will continue to have a huge role in that working with ISU. Cynthia feels that we need to highlight the work that we are doing with ISU and see how we can replicate it in other areas, because students will have a level of familiarity with PCMH that will help them with their opportunities. Dr. Woodhouse discussed that there is currently no entity that evaluates workforce needs and tries to match that up within the state. Cynthia talked about how that may be an opportunity with Health Quality Plan.</li> <li>Dr. Horrocks felt that there has been huge success in getting medical practices to work together, rather than be in silent competition with each other. He feels that SHIP has provided a way to bring everyone together to improve the care in the community. People are realizing this is important and are anxious to get on board. He is seeing that people are concerned with community health and that their outlook is changing. Much of this is due to Allison's diligent work with all the clinics in the cohorts.</li> <li>One challenge is finding out what practices need to fill the hole in the health care system. PCMH is predicated on the needs of primary practice based on where they are and what their abilities are.</li> <li>This is possibly raising the profile of public health, and it is good that public health is part of the SHIP program. Tapping into Health West's expertise has been critical in making this successful.</li> <li>Another challenge is the Brillgent advisors. Dr. Horrocks feels that the suggestions they make are not appropriate for a rural area. He feels that Allison's advice and suggestions fit better.</li> <li>Dr. Heatherton discussed how his experience has been different. He was guiding the program by himself, but he is grateful for the guidance of SHIP. They now have an understanding of what NCQA is. Karen Hill, the HMA coach, has really helped staff with PDSA cycles and other areas. They weren't doing any of the steps, like huddles, but are doing them now because of Allison. The COO and nurse managers have come on board because of the SHIP managers.</li> </ul> |
| Old Business                     |  |
|                                  | Rhonda D'Amico   |
| Discussion                       | <ul style="list-style-type: none"> <li>Updates to RC Grant: the agenda for the Suicide Prevention Symposium has been finalized. In the morning the Columbia Suicide Severity Rating Scale will be presented by Adam Lesser. This is a training that will be provided to anyone interested. Kim Kaine is the director of the Idaho Office of Suicide Prevention and will be speaking in the afternoon. The last presentation will be Dr. Liza Tupa presenting the WICHE Suicide Prevention Toolkit for Rural Primary Care Practices. This training will be targeted towards primary care providers. We will have registration set up by next week on the Southeastern Idaho Public Health SHIP page. The Symposium will be held at the ISU Ballroom. We</li> </ul>  |

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| <ul style="list-style-type: none"> <li>Please start thinking about the next grant cycle opportunities. We have the opportunity for another RC grant, but we need a well-developed plan. Some opportunities include, continuing with the suicide prevention efforts of the state of Idaho and bringing the Zero Suicide training to this region. We could do something with referral tracking. Dave Doran, the director of SICOG, wanted to work with patient transportation. Dr. Woodhouse discussed the need to address instability of access to healthcare for the uninsured and how it impacts people locally. Access is everything right now, and people are walking away and dying because of lack of access.</li> </ul> |  |                 |
| <ul style="list-style-type: none"> <li>Allison talked about the partnership between SHIP and Healthy Connections. Kim Huff has been involved in site visits and has been taking on more of a quality improvement role and learning NCQA. Allison and Kim have been working together with their shared clinics, but have decided to partner in Bear Lake Community Health Center. She has been going with Allison towards helping that clinic become PCMH. They are working to see how this works and the possible partnership between SHIP and Healthy Connections.</li> </ul>  |  |                 |
| <ul style="list-style-type: none"> <li>Rhonda decided that even though we discussed sending out a survey to the Medical Health Neighborhood, we did not want to overload them with surveys. We will, instead, be administering one survey to them at the Medical Health Neighborhood meeting on the 22<sup>nd</sup>.</li> </ul>   |  |                 |
| <ul style="list-style-type: none"> <li>Please make sure that you are finalizing your travel plans for the RC summit in Boise. Dr. Horrocks registered yesterday.</li> </ul>   |  |                 |
| <b>Old Business</b>   |  |                 |
|   | Rhonda D'Amico   |                 |
| Discussion  | <ul style="list-style-type: none"> <li>We need to start thinking about Cohort 3 recruitment. We still have some systems within Bingham and Health West. We are also going to make contact with primary care clinics that have not done interest applications in the past. We will also be following up with clinics that submitted interest applications but were not selected.</li> </ul>   |                 |
|   | <ul style="list-style-type: none"> <li>SHIP Mentorship Workgroup: Some providers involved are just putting together a framework for mentorship across the state. There is discussion of developing a directory of expertise, allowing providers the ability to look up the correct referral with the right expertise.</li> </ul>   |                 |
|   | <ul style="list-style-type: none"> <li>Rhonda discussed a meeting with Dr. Karen Neill from ISU's Doctorate of Nursing Program. They discussed the possibility of having a student to research and support work that clinics are doing. There is real interest from Bear Lake to bring someone down for this purpose. She views this as a better opportunity to do research projects, support clinics, and support the education of students.</li> </ul> |                 |
|   | <ul style="list-style-type: none"> <li>Laurie is working to gather the Community Health Needs Assessments from the hospitals in our region. We think that this will provide an opportunity to see what is important to figuring out what is important in each community.</li> </ul>  |                 |
|   | <ul style="list-style-type: none"> <li>The Regional Behavioral Health Board for Region 6 has been developing a gaps and needs analysis for this community. This is something that we can access when finalized. There is real value in having Laurie be a part of the RBHB. She is able to keep SHIP apprised of important developments in the community.</li> </ul>   |                 |
|   | <ul style="list-style-type: none"> <li>Thursdays do not work for Dr. Heatherton for meetings, so we will need to discuss by email a new date for the December meeting. Please look at the Medical Health Neighborhood agenda and let Laurie know if there is anything you feel needs to be added or changed.</li> </ul>  |                 |
| <b>Action Items</b>   | <b>Person Responsible</b>  | <b>Deadline</b> |
| Reschedule December Medical Health Neighborhood meeting   | EC Members   | 10.31.2017      |
| Review Medical Health Neighborhood Agenda for 06.22.2017 meeting  | EC Members   | 06.16.2017      |