



WVCH Community Advisory Council Meeting Minutes

Date: May 24, 2018

Time: 11:30 AM to 1:30 PM

CAC Members:

Teri Alexander- <i>Chair</i>	X	Levi Herrera-Lopez- Mano a Mano		Staff	
Batisse Wilson- <i>Consumer-Co-Chair</i>		Tonya Johnson- OSU Extension	X	Carla Bennett- WVCH	X
Nekole Baurer- YMCA		Kristin Kuenz Barber- NWHS	X	Stuart Bradley- WVP	
		Caroline Larsen- Consumer	X	Patricia Godsey- WVCH	X
Jamie Brasington- Consumer	X	Victor Reppeto- Consumer	X	Rob Johnson- WVCH CEO	
Rebecca Chávez- Polk County	X	Angie Torres- PhTech	X	Kathryn McFarland- WVCH	
Donna Davis- Consumer	X				
Dawn Lehman- Marion County					

Guests:

Melody Foster- PH Tech	X	Barb McDowell- Project Able	X	Dustin Zimmerman- OHA	X
Melissa Lindley- Willamette Valley Hospice/ Consumer Representative	X	Kelsey Milholland	X		
Bill McDougall- Biogen	X	Clay Peterson- BCN	X		

Agenda Topics

Call to Order	The meeting was called to order at 11:30am.
Public Comment	There was no public comment.
Review of Agenda & Approval of Minutes	Introductions were done around the room. The April Community Advisory Council (CAC) meeting minutes were reviewed and approved.
Group Guidelines and Purpose Statement	The CAC guidelines and purpose statement were read aloud.
TraQ Report- 2017 Incentive Metrics	<p>Willamette Valley Community Health (WVCH) partners with the Oregon Health Authority's (OHA) Office of Equity and Inclusion (OEI) in various ways including data and information sharing. OEI produces Coordinated Care Organization (CCO) level data on demographics. Carla Bennett shared an update on what WVCH membership looks like from OEI data. The data from OEI looked at household languages within race and ethnicity categories. The most common language in Marion and Polk counties is English. The second most common language is Spanish. WVCH serves notable Russian and Somali populations as well. The largest minority population is the Hispanic and Latino population.</p> <p>CAC members voiced interest in seeing a breakdown of the age distribution in Marion and Polk counties.</p> <p>One member also shared that since the data comes from applications, the data might be skewed. Not all members fill out applications, i.e. foster kids and adopted kids.</p> <p>OHA is looking into changing their member portal so that members can update their demographic information.</p>

	<p>Ms. Bennett also reminded the CAC that one of the committee’s requirements is to look at health equity and identify disparities. WVCH is the third partner in a health modernization grant with Marion and Polk counties to target health equity around sexually transmitted infections (STIs). A health equity coalition has already been created and an additional coalition is being created to continue efforts targeting prevalent STIs and HPV vaccinations in the community.</p>
<p>CHIP, CHA, and RAC Updates</p>	<p>Patricia Godsey provided the CAC with an update on the Community Health Assessment (CHA). The data portion of the CHA has been mostly completed. Approximately 10 top areas of health needs were found in the data. The data was examined further to identify which communities were experiencing the most disparities in those top 10 areas. The communities with the most disparities identified were the Medicaid population, Alaskan/Native American Indian, and Black/African American.</p> <p>The Community Themes and Strengths portion of the MAPP process is also underway. Two community forums have taken place and two more community forums have been scheduled. There is also a survey that is currently open to residents of Marion and Polk counties. The survey will be open through the end of June and Ms. Godsey encouraged everyone to share the survey and help people to respond to it. Some people do not have access to computers or cannot read the questions, so Ms. Godsey asked that people help those who may need assistance in completing the survey. The information gathered from the forums and the survey will get compiled and added to the data along with the other assessments in the MAPP process.</p> <p>WVCH has a Community Health Improvement Plan (CHIP) report due to the state at the end of June. It will ask questions about who WVCH’s partners are, what those relationships like are, and about the engagement from those partners on the CHIP. Ms. Godsey will have a draft of that report at the June CAC meeting.</p> <p>The RAC meetings are going well. There have been two RAC meetings in Dallas and one meeting in Stayton. During the meeting in Stayton there was a lot of discussion about how to get more people to come to the meetings. Ms. Godsey has started to look at flyer templates that were provided by OHA and received permission to edit those templates. Ms. Godsey asked for the CAC’s approval to use the OHA flyers and have them edited to meet our local needs. The CAC gave its approval. It was also suggested that a photo of CAC go on the flyer. The CAC was in favor of this idea so long as people can opt out of the photo if they would like to.</p> <p>The first Woodburn RAC meeting will be held at the Woodburn Health Center in June. From now on there will be a RAC the second Thursday of every month and a CAC the fourth Thursday of every month.</p> <p>WVCH is working to design and implement a care coordination model to help streamline the care of WVCH members from the start of their membership to continuing with their preventative chronic disease care, etc. Feedback that the CAC has provided will be used to help create the new onboarding process. If anyone has ideas that would be helpful they are encouraged to please send those ideas to Ms. Godsey or Ms. Bennett. The RACs will also be an important part of this new structure because WVCH would like to have a central hub and regional hubs in this new care coordination model.</p>

	<p>At the next CAC meeting Ms. Godsey will bring some materials that are being created for members right now to help members understand how to use NEMT services. The CAC will be asked to provide feedback on these materials.</p>
CCO 2.0	<p>Oregon Health Authority (OHA) innovator agents were all asked by OHA leadership to present a PowerPoint presentation about CCO 2.0 to the CACs throughout the state to collect feedback from the CAC's and make them aware of what CCO 2.0 is. Dustin Zimmerman presented this presentation to the CAC. Below are the questions that Mr. Zimmerman asked the CAC, along with the CAC's feedback.</p> <p>Should CCOs annually review member data and align with CAC representation, and report on it?</p> <ul style="list-style-type: none"> • This doesn't seem like a big problem, but it would be helpful to have more information to know for sure. Additional information that would be helpful would include how close they are aligned now and if there have been any complaints. • How would the CAC be broken up to represent the community? What demographics would be looked at? • It would be ideal that the committee is representative of the community. • It's a good idea, but will race, ethnicity, and gender really get to those issues of social determinants of health? • If OHA is going to have requirements like this, 10% requirements would be easier to meet than 50%. These requirements would be good incentive to reach out to the community and help get more diversity on the CAC. • It's worth pursuing to make sure that the CAC is representing the community responsibly. <p>What do you think about requiring CCOs to share with OHA a clear organizational structure that shows how the CAC connects to the CCO?</p> <ul style="list-style-type: none"> • This is a good idea. <p>What do you think about requiring CCOs to spend money on Social Determinants of Health and health disparities with a connection to the CHIP?</p> <ul style="list-style-type: none"> • There were concerns about whether that would require the CHIP to focus on Social Determinants of Health or not. If the CHA has areas of focus that are not Social Determinants of Health, it would not be positive to neglect those areas to focus on unrelated Social Determinants of Health. • There would need to be some discussion on what social determinants of health are. <p>What do you think about requiring CCOs to develop shared CHAs with local public health authorities and non-profit hospitals; also encouraging shared CHIPS to the extent feasible?</p> <ul style="list-style-type: none"> • It would be efficient. • Everyone should work more and more together so that everyone is on the same page. <p>Do you think that OHA should require that CCO CHIPS align with 1-2 State Health Improvement Plan (SHIP) priorities, i.e. tobacco cessation, chronic disease control?</p>

	<ul style="list-style-type: none"> • The state is looking at the entire state, but if the top 5 issues in the state are not the same as the top 5 issues in Marion and Polk counties, it doesn't seem like a good idea to put resources towards the state priorities, especially since so many people would be doing the same thing. • It would not be crazy for the state to require that some local spending goes towards the SHIP as long as the bulk of it goes towards the CHIP because otherwise there is no point in developing the CHIP. <p>Are we missing any important strategies to reach our policy goals? Do you have any general feedback on any of those kinds of strategies about moving forward in developing CACs?</p> <ul style="list-style-type: none"> • Having flexibility to reconsider any of these issues in real time would be helpful. For example, in order to consider the SHIP and it would be good to have flexibility if the CAC had a good reason to digress or diverge from the SHIP. • If we're moving towards value based payments, there needs to be lots of oversight for it. There are concerns, especially in behavioral health that it leads to people being double diagnosed because it is a way to increase payment for it. <p>If you have any additional comments or concerns please let Mr. Zimmerman know.</p> <p>Mr. Zimmerman also handed out OHP Member Engagement surveys for additional feedback. The surveys are due June 15th.</p>
<p>Word on the Street</p>	<p>Board development training by YMCA June 12th 6-7pm, CAC members encouraged to attend.</p> <p>Just Walk Salem Keizer is having a walk May 27th on water safety. It is going to meet at Wallace Marine Park.</p> <p>A Thursday Market is coming to West Salem on Edgewater street in July. They do accept SNAP, WIC, and EBT.</p> <p>Willamette Valley Hospice is having a 1 day summer camp on August 4th for families and their kids who have suffered the death of a loved one. Scholarships are available.</p> <p>Youth Era has a new drop in center for youth in downtown Salem. It is open to ages 14 through 21.</p> <p>The Empowerment Center has a Spring Into Summer event on May 25th at 3:15pm to bring people in the community together. It is a community based drop in center that is on state hospital grounds. It's open to the general public between 3-5pm.</p> <p>There is an autism support group at the Recovery Outreach Community Center (ROCC) on Mondays from 10am-11am.</p> <p>The Marion Polk Food Share has a Senior Grocery Program through the USDA. Seniors need to fill out an application and qualify. The food boxes need to be picked up at Center 50+ in Salem. There is currently a waiting list for this service.</p>



Closing/ Next Meeting	The meeting was adjourned at 1:35pm. The next meeting is scheduled for 11:30am on June 28 th at Fresh Start Market.
-----------------------	--