

Gilliam County LCAC Meeting Minutes

DATE: FEBRUARY 7, 19

LOCATION: GILLIAM COUNTY
COURTHOUSE, COURTROOM

MEETING CALLED BY	Jennifer Bold
CALLED TO ORDER	12:10
ADJOURNED	1:30
NOTE TAKER	Teddy Fennern
ATTENDEES	Teddy Fennern, Jennifer Bold, Amy Nation, Chanel Kelly, Paul McGinnis, Elizabeth Farrar, Teri Thalofer, Kevin Campbell, EOCCO CEO/GOBHI CEO; Sean Jessup VP Medicaid Programs MODA; John Adams, EOHLA Director; Christa Rude 4 Rivers Early Learning HUB, OPEC Parenting HUB; Neil Freidrick, DHS Eileen Flory, GOBHI;
ADDITIONS OR CORRECTIONS	EOHLA – John Adams Raising Up Oregon – Teri T
PRESENTATION	Christa Rude – Health Assessment Columbia Gorge Health Council Community Health Assessment. Two Years ago, we were included in the assessment, to help the 4 Rivers ELHUB get better information. We were never able to get the Data back out to everyone. Now Christa was going to share her information and then ask if we can participate this time around with the assurances that we will get back information. It was not just Medicaid Clients it was everyone. There was about 1600 respondents overall. About 45 respondents overall for Sherman, Gilliam and Wheeler Counties that answered questions. This represented about 3.3% of the surveys sent out. The HUB has approved some funding to help support this survey. We are also going to be able to include some questions on parenting support as well, which will help the HUB. There was a suggestion that the EOCCO may want to be a partner in the assessment, and that could help drill down some data for them as well. Sherman County has voted to be a part of the assessment as well. Kevin Campbell stated that he did received a request from Paul, and he is in favor of being a partner. Teri T stated that she feels much better about the process this year, and it should be appropriate for NCPHD as well. It is scheduled to go out some time in March, around Spring Break. Kevin Campbell stated that he would like to see the EOCCO Logo on the survey or the Results or Report for Gilliam, Sherman and Wheeler Counties. The LCAC was in consensus of including Gilliam County in the Survey.
JOHN ADAMS PRESENTATION EOHLA	Be Healthy, Be Happy Eastern Oregon – EOHLA, Regional Health Priorities including Oral Health, Mental Health, Chronic Disease and Early Childhood Health. Oral health, 21% higher than the state average cavity rate. Have helped to improve the rate in the South East region. Teri stated that she wants CCO’s to become involved in policies. She feels that their policy support would go a long way with legislators. Strategy rate is with Advantage Dental in the schools. Mental Health

First Aide Trainings. 43 MHFA or YMHA trainings including 684 teachers, law enforcement, and other public and social service employees. 96% certified in training, 81% increased confidence in their abilities and 42 referrals and 18 connections to care as a result of the training. Colorectal Cancer Screening – only 50% of Medicaid members report being up-to-date on colorectal cancer screenings than the general adult population of 66% The result of this lack of screening is higher colorectal cancer mortality rates for the Eastern Oregon population compared to Oregon statewide. The kits that were returned. Sherman – 58 Moro County – 49 and Gilliam County – 20 kits returned. We knew we would have lower numbers in Gilliam as we were only partnering with one clinic. We did not meet the incentive metric in these three counties, But we indicated that we would either meet or increase the metric by 5%. We did meet the 5% in Gilliam and Moro counties. In Sherman we did not meet the metric, although we got the most kits returned, it did not translate to EOCCO membership so the metric was not met. We will develop a full report, but just wanted to get preliminary numbers out to us.

Another area of focus in Obesity and looking at the high obesity rates in Eastern Oregon and 40.8% is the second highest in all of the 15 CCOs. There are several counties in Eastern Oregon that are experiencing increases in their rate annually this has an impact on individual health, community health. Looking at healthy eating and active living, organizing focus groups with Latino mom's in Moro, Umatilla and Malheur Counties to identify best practices to increase fruit and vegetable consumption with Latino Families. For Active Living are organizing community hiking groups targeted to low income moms with kids up to 48 months. Didn't get a big grant we went after, but are currently in two counties, Centered around the Hike it Baby program. Early Childhood Health, we have a really high maternal depression rate, the 2017 data shows that the number climbed to 47.6%. We know that maternal depression doesn't only impact the health of the mom, but it also impacts health development of the child as well. Our strategy is integrated nurse home visiting program, integrating mental health therapy through public based nurse home visiting program. Piloting in 4 counties. Developed a learning collaborative to help. Part of the reason for EOHLA to develop a non-profit organization was to help serve the total population and not just OHP clients, since 2016 we have raised over \$630,000.00 to help do the work in Eastern Oregon. So what is our vision of a Happy Healthy Eastern Oregon:

- School aged children have adequate access to oral health prevention programs, so they can learn, play and thrive
- Mental First Aide is as common as CPR
- A culture of health where opportunities for health (preventative screenings) begin long before one needs health care.

	<ul style="list-style-type: none"> Families have the knowledge and available resources to change their behaviors and prevent chronic disease Moms have maternal depression resources and support and babies and toddlers have a strong, healthy start. <p>Teri stated that they received a grant to develop a pathway to help children who are obese to navigate them to physical activity and Pacific Source is paying for swim pass or baseball or whatever. Once Dr. McDonald gets it built she wants to be able to move it into Gilliam and Sherman Counties, so we will have to be looking for funding. So far, families have loved it.</p>
MINUTES	Tabled to the next meeting
Old Business: <i>Frontier Veggie Rx Program</i>	
DISCUSSION	Paul reported that Marci was out today and that the application went in on time for all four counties, Wheeler was joining in on the program. Everyone was happy that Wheeler was coming on board and Teddy reported that she had been in contact with the Wheeler Coordinator and another board member and helped them with information and will be sending all of our info to them.
New Business:	
EOCCO PROGRESS REPORT	Gilliam County report for December 2018. The rate for AWC visits is 46.8% and the target is 40.6%, so we are meeting. We are at 100% in the Childhood Immunization rate, and the target is 79.1% so we are meeting. We are at 38.7% in our colorectal cancer screening and the target rate is 46.8%, we are not meeting. We are at 25.8% on dental sealants and the target is 22.9%, we are meeting. We are at 66.7% in Developmental Screening, and the target rate is 65.6%, we are meeting. We are at a 27.5% in effective contraceptive use and the target rate is 49.6%, we are not meeting. We are at a 26.1 for ED utilization and the rate is 51.8 and ED utilization rate for individuals experiencing mental illness is 52.7 and the target rate is 119.5 so we are meeting these rates. Alcohol and Drug misuse screening rate is 11.4% overall and the target is 12% so we are not meeting. Overall the EOCCO is just on the edge of getting 100% of the metrics. Every Metric, every person counts in our small counties. Paul stated that the Gilliam Report has never been greener, so we are doing great over time. Last year there was only one CCO that didn't hit 100%.
New Business: Boundary of the CCO Discussion	
DISCUSSION	Letters of intent have been submitted the Columbia Gorge CCO and the EOCCO have both potentially claimed the territory of Gilliam, Sherman and Wheeler. There have been a lot of meetings and discussions. Kevin Campbell and Shaun Jessup were here. So for the first time the state has decided to reevaluate the CCOs. The state sent out a Request for Application, means it is open to anyone who meet certain criteria can apply. Every county was covered in at least one application this year. LOI's were submitted the EOCCO submitted for the same 12 counties that we had. It will come down to what the Oregon Health Authority will do. It will end up being a hard decision for them, as this is happening in a lot of areas. Shawn stated that all 12 counties are important to them want to keep the continuity of all 12 counties and continue to build upon what we have already done and continue to make reinvestments back into the community. Have to meet requirements of CCO 2.0 in four focus

areas value based payments, continue to help the state meet the global budget target, and the EOCCO has done that, address Social Determinants of Health, and efforts to improve and integrate behavioral health into the health care system. We have a good foundation to base our five year plan off of. Applications will go in April 22, state will make decisions and will get an intent to contract with in May and June will get the final decisions, and July 1 should have a good idea of the decision of where the contracts will go starting 1, 1, 2020. Teddy asked if it will help if the LCAC would say if we are happy with our CCO and don't want to go with another CCO and create all new partnerships. A letter to Shawn or Kevin wouldn't hurt and also just having in the minutes will be a way that the OHA can see what our wishes are. Kevin Campbell wanted to just share with us a summary of EOCCO and GOBHI Distributions to Sherman Gilliam and Wheeler County Projects. The left side represents checks that were written by EOCCO and the right side represents checks written by GOBHI. Here in Gilliam County the bulk of that money when to school based mental health services. The dividend in that case was basically the Juvenile Case load basically dropped to Zero. The reason that GOBHI is in these counties is because we have lives in these counties. Should we end up losing we will continue to stand by our commitments, such as a shared employee with the HUB and NCPHD and Eileen Flory is also an employee in this county. We are invested in the county. There are 900 lives in the three little counties that are EOCCO members. Kevin stated that they don't want to lose momentum on anything that we are doing.

New Business: Community Health Assessment

DISCUSSION We had talked about this previously, and looked at data. We have to have a plan submitted to the state by June 30. We have to pick one to two priority areas in the CHP matching the Oregon State Health Improvement Plan. Paul Stated that due to time constraints for today that we will come back to this conversation at the next meeting.

RAISE UP OREGON Terri stated that this is a statewide Early Learning System Plan, it is in the Governor's Budget and has great legislative support. It was cross-walked with other plans at the state and is an multi sector solution to investing in Oregon's young children, with the objective of Children arriving at kindergarten ready to learn, Children are raised in Healthy, stable and attached families, and the Early Learning system is aligned, coordinated and family centered.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
<ul style="list-style-type: none"> Minutes 	tabled	
<ul style="list-style-type: none"> Community Health Assessment Priority Areas 	tabled	
<ul style="list-style-type: none"> 		