

Early Learning Hub of Linn, Benton & Lincoln Counties

Health Care Integration Work Group Meeting Minutes

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| MEETING COMMENCED | 1:30am, July 26, 2017 Western Title Building, Newport |
| MEETING CALLED BY | Lynn Hall |
| WORK GROUP MEMBERS PRESENT | Lynn Hall, Rich Waller, Shirley Blake, Cathy Corkery, Kelsey Brauca |
| VERSION | Final |
| RECORDED? | No |

Agenda topics

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| DISCUSSION ITEM | ASQ Training and Tracking Initiative Update (15 minutes) |
| <p>Kelsey Branca, Oregon Rural Practice Research Network (ORPRN), gave a PowerPoint presentation of preliminary survey findings from the 3 START trainings held in May and June. Roughly, half of the attendees completed the survey.</p> | |
| <p>Kelsey reported that 5 practices have signed up for technical assistance to be provided by ORPRN.</p> | |
| <p>Participants in the START training were a broad range of clinic staff including some physicians. Looking at the data, Kelsey concluded that that uniform ASQ knowledge is not known or understood by all clinic staff.</p> | |
| <p>Next Steps:</p> | |
| <ul style="list-style-type: none"> • We still need to identify how clinics prefer to receive ASQs from the Early Learning community. • If ASQs are available for physicians in RHIC, we will need an education campaign (so they know it is available and so they can find it) • Currently, the consensus seems to be that the whole ASQ should be available instead of only the summary page. This will give clinics the option to explore whichever information they need. | |
| <p>The group poses the problem of having to scan ASQs, and other logistical problems that come with presenting and storing this information.</p> | |
| <p>Most of the START training attendees believe developmental screenings are essential to understanding a child’s wellbeing, but also recognize that there are challenges to completing them in a clinical setting.</p> | |
| <p>The group asked for a definition of <i>Limited Specialists</i>. It could refer to the limited availability of medical specialists to refer children needing additional supports.</p> | |
| <p>With healthcare transformation, practices are feeling overwhelmed with all the details that need to be addressed.</p> | |
| <p>The state has moved “child immunizations” into a Challenge Pool for CCOs. IHN and Samaritan are interested in this.</p> | |
| <p>Importing ASQs from Pollywog to RHIC would help offices complete CCO priorities.</p> | |
| <p>The group asks what is the best way to spread awareness that ASQs will be in RHIC?</p> <ul style="list-style-type: none"> • The Samaritan clinics have access to RHIC, but are they actually viewing and using it? • Engaging clinics is difficult, but their feedback is necessary for building a system that they will engage in. • How do we incorporate their perspective or experience during this process? • Kelsey suggested working with a small group of clinics who are dedicated and active providers already interested in ASQ implementation. • Would these clinics help us pilot using the ASQ in RHIC? • Ask Miranda Miller, at Samaritan, if she can offer her perspective. | |

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| Julie Manning is sending two managers to participate in HCI meetings. They are potentially a good resource for our some of our questions. <ul style="list-style-type: none"> • Miranda Miller, director of primary care practices • Megan Van Vleet, oversees call centers, will be Miranda's back-up person |
| The CCO has new metrics including Childhood obesity from ages 2 – 17 The CCO also has a new Challenge Pool: Childhood Immunizations and Developmental Screenings. DHS has a new Challenge Pool: Assessment for children in foster care including physical, dental and mental health |
| o START Training Update: October 11, 2017. This training is for Samaritan Residents, only |
| o Planning Future START Trainings |
| We're exploring ways to raise interest in START trainings among clinics in Linn County. |
| Consider revising the flyer in order to reach Linn County providers. |
| Lynn, Rich and Michelle met last week to brainstorm how to reach Linn County clinics. |
| Next Steps: <ul style="list-style-type: none"> o Lynn will contact the Corvallis Clinic and make an offer for a START training at a time and place convenient for their staff. o Lynn will contact other clinics in Linn County. o Michelle will contact Samaritan Clinics in Linn County. o Kelsey might have contacts at the Lebanon Mid-Valley Clinic. o Kelsey's colleague Mark might be working with other Linn County practices who can help lead trainings. o Send contacts and training schedules to Rich. |
| Oregon Pediatrics Society needs two months prep time, so we have time to schedule another training before the grant runs out at the end of 2017. |
| • More outreach to Linn Co. providers |
| • Revise flyer to include picture of trainer and bio |
| • Other ideas? |
| • RHIC Update <ul style="list-style-type: none"> • What questions do we want to ask providers about ASQ referrals and information they would like from us? • Rich to see if RHIC/Pollywog/Health Integration can get some time on Clinic Manager agenda to share about RHIC and ASQs <ul style="list-style-type: none"> - Rich reached out to the project managers here on the coast without much interest. He will keep working on this. Please check back. |

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| DISCUSSION ITEM | Continue to Revise the Medical Decision Tree from Oregon Pediatric Improvement Partnership (OPIP) |
| We ran out of time to work on revising the Medical Decision Tree. | |
| Please make sure to read through the documents from OPIP (located on Basecamp) before our next meeting in order to be aware of what needs to be changed for our communities, including citing and referencing: Medical Decision Tree and Follow-up Screening: How Can We Support Your Child? | |
| Family Connections created an ASQ "Referral Pathways" model in the past. We should connect with them. | |
| The OPIP in Marion and Polk County's model is medical provider driven instead of community agency driven. <ul style="list-style-type: none"> • Do we need to clarify the title (provider v. community/family) for the Community Referral Decision Tree? • Consider creating three Decision Tree documents <ul style="list-style-type: none"> - Begin with the medical provider driven document | |
| Our three focuses: 1) Giving providers a process to connect families to the appropriate resources | |

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| 2) Developing a process that community agencies who do ASQs can get the ASQ results to the provider and also connect families to the appropriate resources. |
| 3) Making sure families are involved and aware of the process. |
| Decision Tree is a great first resource for beginning a campaign. This document can be a springboard for each decision tree document. |
| The group prioritized #1 as our initial focus. We would like to form a subcommittee to look at the Marion/Polk decision tree for adjustments to our community. The group agreed to start with a small group and include others. |
| Clinicians may also like a one-pager with a list of eligibility criteria for certain resources. |
| Next Steps: |
| <ul style="list-style-type: none"> • Lynn agrees to send out “possible” dates for a subgroup meeting between now and our August meeting. <ul style="list-style-type: none"> - Connect with Linette or other Family Connections staff who were a part of developing their Referral Pathways model. • Ask Marion and Polk Early Learning Hub to discuss their current thoughts on the referral document. |
| • Community ASQ Referral system vs Medical Decision Tree? |
| • Review Tools Disclosure document |

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| DISCUSSION ITEM | Pollywog/Mail Chimp Opportunity for Communicating Health Information to Families (Cathy Corkery) |
| Family Connections receives a notification when someone logs into Pollywog. | |
| They can help people register with several hospitals and initiate a service referral. | |
| They can also send personalized information about local resources (example: send a mail chimp form about the Live & Learn with your Baby Class to families with a baby due soon; information on summer activities). | |
| We received a great brochure from Old Mill, which can be included in a mail chimp correspondence. | |
| Can Pollywog provide families with milestone monthly development and age appropriate information? <ul style="list-style-type: none"> - Self-care and support groups for moms and dads. - Support groups for type 1 diabetes. | |
| Family Connections wants to use categories in order to specify information for parents and families. | |
| People can unsubscribe easily. | |
| Next Steps: | |
| <ul style="list-style-type: none"> • Add these to Pollywog: <ol style="list-style-type: none"> 1) My First Tooth is a resource that promotes dental screening at the development of their first tooth. 2) Text for Baby where families sign up to receive a text on developmental milestones. • MaiKia offers to look into further resources. • Contact the Samaritan newsletter about including a commercial of ours. | |

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| NEXT MEETING | Wednesday, August 23, 2007 |
| 1:30-3:00pm, Sunset Building, Benton County | |
| MEETING ADJOURNED | 3:05pm |