

Whatcom Alliance for Health Advancement

North Sound ACH Formation Discussion

April 21, 2014

8:30am – 10:00am

WAHA Office in Bellingham:
800 E. Chestnut St., LL Conference Room

ATTENDANCE

Present

1. Cynthia Eichner, SCAHA
2. Joe Valentine, NSMHA
3. Federico Cruz-Uribe, SeaMar
4. Scott Forslund, Sno Co Ldrshp Coalition, Premera
5. Elise Cutter, Island Hospital
6. Dan Murphy, NWRC
7. Jennifer Kingsley, Skagit Co PH and Communications
8. Kari Ranten, Skagit Regional Health

Apologies

1. Ken Stark
2. Regina Delahunt

Staff

Larry Thompson, Elya Moore, Liz Jones

MINUTES

Agenda Topic	Conclusions
<p>1. Welcome and Review Meeting Agenda</p> <ul style="list-style-type: none">• All present introduced themselves• Larry gave an overview of the evolution of ACHs, SHCIP, Behavioral Health Integration Bill (6312) and Health Care Purchasing Bill (2572)• Other key collaboration groups around the state are in King County, Spokane (Better Health Together), and Southwest WA• Dan suggested that an additional piece of our work should be to develop and set Values for our region• Joe shared the background of the informal health alliance between Whatcom, Skagit, and Snohomish and efforts to decrease psychiatric boarding in community hospitals. This demonstrated the value in collaboration across systems and the importance of system's leaders across systems working together• Larry asked if there is an interest in talking together about a regional entity? Is this worth doing? All present said yes• Scott asked if there has been discussion around the collective goal or substance of the group? Only minimal to date. Joe developed a paper with a few goals regarding behavioral health	

<p>2. Governance</p> <ul style="list-style-type: none"> • Federico stated that while groups at a local level more readily and necessarily collaborate, it is more challenging to do across counties • Scott stated that he would like to start with common goals rather than structures • Larry is starting with the assumption that the statute will require structure, and while the legislation is quite vague on the “what does an ACH do” it has a comparative amount of specificity around the “how is an ACH structured” • Cynthia stated that there needs to be a common goal and purpose and it needs to be packaged to share with others who could potentially be involved in this group • Dan suggested three steps- develop an Inventory of existing efforts, use Outcomes to give us a common ground, and lead with the Outcome as the vision- we want to have outcomes A, B, C, and bring strategies X, Y, and Z to our region, and we want to convene the minimum necessary cross-boundary panel that could move resources to accomplish these goals • It is a fine line between governance and goals • One suggestion offered was that we need a preamble document- what is the overall vision regardless of function or structure, some sort of guiding principles. Some suggestions included: <ul style="list-style-type: none"> ○ By work together we can accomplish more than we can separately ○ There is value in building these relationships across the region (across interest groups and communities) ○ Regional collective impact model that articulates 2-5 year goals. There are many categories, and we won't address each from the start, and there are many pieces that will contribute to the whole • Dan asked whether we should use a collective impact model? The idea behind that is- bring your structures towards this objective. Secondly, what are the outcomes we will work towards? • What are some of the outcomes we are looking for? <ul style="list-style-type: none"> ○ Cross walk outcomes in SHCIP and outcomes from recent webinar ○ What will turn down the cost curve? Reduce ED visits, reducing IP visits, behavioral health services, long term care, public health outcomes • Has every county done a Community Health Assessment? Hospitals are required to do them. One way to bring everyone together would be to see that we are all struggling with the same issues • At least in Whatcom, the CHIP has public health outcomes, which is not the same as health systems improvement, so we cannot view them as synonymous 	<p>WAHA will develop a draft of a Vision statement</p>
<p>3. Regional Projects</p> <ul style="list-style-type: none"> • Dan shared about a webinar he attended on Friday where a report shared 17 health outcomes, and he proposed that we use this as a basis for our work. This may help us get beyond turf issues and give us specific outcomes to work towards 	<p>WAHA will develop an inventory of existing efforts in the region</p>

<ul style="list-style-type: none"> ○ A few of the discussion meetings have included conversations around this topic and trying to determine initiatives that are common across region or could be expanded across region ○ These include Care Transitions and Intensive Case Management, End of Life work, and prevention ○ The state is looking for matching funds, and to the extent that there are projects in existence to display such funds, that will be helpful ○ What could be useful is an inventory of existing efforts and elements of population health, where there are gaps (e.g., dentists who take Medicaid) and overlaps- how do we improve the health of people living in our communities? ● Would it be useful to gather an inventory? Yes <ul style="list-style-type: none"> ○ Categorize by themes ○ Cross reference it with the outcomes Dan shared ● Scott shared that it is appealing to start with a vision of “where do we want to go” and then honor the efforts that are currently underway to build something bigger. His greatest hope is that two years down the road there is an innovative approach, strong relationships, and a trusting environment ● Group discussed the importance of the community voice and have dynamic input through listening to the community 	
<p>4. Next Steps</p> <ul style="list-style-type: none"> ● This group should meet again in a month ● To develop- inventory of common efforts (start with existing documents and public health improvement plans) ● Is there additional representation in this group that we need to consider? More from Snohomish, meet more centrally in Mt. Vernon, and bring a community voice to the table 	<p>Schedule another meeting in one month</p> <p>WAHA will send overview/background materials to group</p>
<p>5. Adjourn</p>	