Agenda

Delivery System Transformation Committee

March 18, 2021 4:30 – 6:00 pm

Online Click Here: Join Microsoft Teams Meeting

Phone: +1 971-254-1254 Conference ID: 826 171 835#

| 1. | Welcome and Introductions | | Beck Johnson, Olalla Center | 4:30 |
|----|---|-----------------------------------|---|------|
| 2. | Transformation Update | | Charissa Young-White, IHN-CCO | 4:45 |
| 3. | Pilot Updates | | Andrea Myhre, Corvallis Housing First | 4:55 |
| | | | Stacey Bartholomew, Creating Housing Coalition | |
| 4. | Health Equity Workgroup Recommendations for Request for Proposal | p. 7 | Beck Johnson, Olalla Center | 5:05 |
| 5. | Strategic Planning: Request for Proposal | Strategic Planning Document | Beck Johnson, Olalla Center | 5:15 |
| 6. | Wrap UpAnnouncementsNext Meeting: April 1, 2021 | | Beck Johnson, Olalla Center | 5:55 |

| A | Magning |
|---------|---|
| Acronym | Meaning |
| ACEs | Adverse Childhood Experiences |
| APM | Alternative Payment Methodology |
| CAC | Community Advisory Council |
| CCO | Coordinated Care Organization |
| CE0 | Chief Executive Officer |
| CHIP | Community Health Improvement Plan |
| CHW | Community Health Worker |
| C00 | Chief Operations Officer |
| CRC | Colorectal Cancer |
| DST | Delivery System Transformation Committee |
| ED | Emergency Department |
| EHR | Electronic Health Records |
| ER | Emergency Room |
| HE | Health Equity |
| HN | Health Navigator |
| HRS | Health Related Services |
| IHN-CCO | InterCommunity Health Network Coordinated Care Organization |
| LCSW | Licensed Clinical Social Worker |
| MOU | Memorandum of Understanding |
| ОНА | Oregon Health Authority |
| PCP | Primary Care Physician |
| PCPCH | Patient-Centered Primary Care Home |
| РМРМ | Per Member Per Month |
| PSS | Peer Support Specialist |
| PWS | Peer Wellness Specialist |
| RFP | Request for Proposal |
| RHIC | Regional Health Information Collaborative |
| RPC | Regional Planning Council |
| SDoH | Social Determinants of Health |
| SHP | Samaritan Health Plans |
| SHS | Samaritan Health Services |
| SOW | Statement of Work |
| TI | Trauma Informed |
| THW | Traditional Health Worker |
| TQS | Transformation and Quality Strategy |
| UCC | Universal Care Coordination |
| VbP | Value Based Payments |
| WG | Workgroup |
| | |

Delivery System Transformation (DST) Pilots and Workgroups

| Acronym | Project | Sites | Counties | Start | End |
|---------|---|--|--------------------------|----------|-----------|
| BRAVE | Bravery Center | Olalla Center | Lincoln | 1/1/20 | 6/30/21 |
| ССР | CommCard Program | The Arc of Benton County | Benton | 1/1/21 | 12/31/21 |
| CDP | Community Doula Program | Heart of the Valley Birth & Beyond | Benton, Lincoln, Linn | 1/1/21 | 12/31/21 |
| CSUP | Culture of Supports | North End Senior Solutions | Lincoln | 1/1/21 | 12/31/21 |
| DEC | Disability Equity Center | Disability Equity Center | Benton, Lincoln, Linn | 1/1/21 | 12/31/21 |
| ENLACES | ENLACES | Casa Latinos Unidos | Benton, Linn | 1/1/21 | 12/31/21 |
| HEWG | Health Equity Workgroup | InterCommunity Health Network CCO | Benton; Lincoln; Linn | 5/1/15 | present |
| ннт | Healthy Homes Together | Albany Partnership for Housing, Family Tree Relief Nursery | Linn | 1/1/21 | 12/31/21 |
| HUBV | Hub City Village | Creating Housing Coalition | Linn | 1/1/20 | 12/31/21 |
| HVOST | Hepatitis C Virus Outreach Screening & Treatment | Lincoln County Health and Human Services, Confederated Tribes of the Siletz Indians | Lincoln | 1/1/21 | 12/31/21 |
| IFCW | Integrated Foster Child Wellbeing | Samaritan Health Services | Benton; Lincoln; Linn | 1/1/19 | 12/31/21 |
| LCCOR | Linn County Crisis Outreach Response | Family Assistance and Resource Center Group | Linn | 1/1/21 | 12/31/21 |
| мннс | Mental Health Home Clinic | Samaritan Health Services, Linn County Mental Health, C.H.A.N.C.E. | Linn | 1/1/21 | 12/31/21 |
| NPSH | Navigation to Permanent Supportive Housing | Lincoln County Sheriff's Office | Lincoln | 1/1/20 | 12/31/21 |
| РОН | Partnership for Oral Health | Capitol Dental Care | Linn | 1/1/21 | 12/31/21 |
| RDUC | Reduce and Improve | Capitol Dental Care, Lebanon Community Hospital | Linn | 1/1/19 | 12/31/21 |
| SDoHWG | Social Determinants of Health Workgroup | InterCommunity Health Network CCO | Benton; Lincoln; Linn | 11/16/17 | present |
| SKIL | Skills and Connections to Support Housing | Corvallis Housing First | Benton | 1/1/20 | 12/31/21 |
| THWWG | Traditional Health Workers Workgroup | InterCommunity Health Network CCO | Benton; Lincoln; Linn | 5/21/13 | present |
| UCCWG | Universal Care Coordination Workgroup | InterCommunity Health Network CCO | Benton; Lincoln; Linn | 6/26/17 | On Hiatus |
| WINS | Wellness in Neighborhood Stores | OSU Center for Health Innovation, Linn County Public Health | Linn | 1/1/20 | 12/31/21 |
| WtoS | Wellness to Smiles | Advantage Dental from DentaQuest | Lincoln | 1/1/20 | 12/31/21 |
| | | | | | |

Delivery System Transformation Committee (DST) 2021 Calendar

| January | 7 | Strategic Planning: Overview and Charter | | | | |
|----------|----|---|--|--|--|--|
| Janı | 21 | Strategic Planning: Charter, Workgroups, Engagement | | | | |
| February | 4 | НЅРО | PWST | Strategic Planning: UCC & Health Equity | | |
| Febr | 18 | DOUL | RDUC | Strategic Planning: UCC Workgroup | | |
| March | 4 | Strategic Planning: Pilots/RFP | | | | |
| Ma | 18 | Pilot Updates | Strategic Planning: Request for Proposal (RFP) | | | |
| | 1 | RFP Decisions | | | | |
| April | 15 | | Finalizing RFP | | | |
| | 29 | Workgrou | ip Updates | | | |
| May | 13 | | | | | |
| M | 27 | | | | | |

KEY

| Tentative closeout | Booked closeout |
|------------------------------|---------------------------|
| Tentative RFP | Booked RFP |
| Tentative strategic planning | Booked strategic planning |
| Tentative miscellaneous | Booked miscellaneous |
| Tentative training | Booked training |
| Tentative update | Booked update |
| Tentative workgroup | Booked workgroup |

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|--|----|---|---------------|--|--|--|--|
| June | 10 | LOI Decisions | | | | | |
| lu[| 24 | | | | | | |
| July | 8 | | Pilot Updates | | | | |
| | 22 | | | | | | |
| | 5 | | Pilot Updates | | | | |
| August | 12 | Proposal Presentations | | | | | |
| | 19 | Proposal Presentations | | | | | |
| ır | 2 | Proposal Presentations | | | | | |
| September | 16 | Proposal Decisions | | | | | |
| Se | 30 | Workgrou | ıp Updates | | | | |
| October 7: Regional Planning Council for Pilot Final Approva | | | | | | | |
| ber | 14 | Trauma Informed Care Facilitated Discussion | | | | | |
| October | 28 | | | | | | |
| Nov | 11 | Safe and Inclusive Spaces Training | | | | | |
| Dec | 9 | | | | | | |

Minutes

Delivery System Transformation Committee (DST)

March 4, 2021 4:30-6:00 pm Microsoft Teams (Online)

| Present | | | |
|-----------------------|----------------------|--------------------|---------------------------|
| Chair: Beck Johnson | Charissa Young-White | Kevin Ewanchyna | Christian Moller-Anderson |
| Linda Mann | Chris Folden | Gabriel Parra | Alicia Bublitz |
| Jenny Glass | Britny Chandler | Annie McDonald | Abby Mulcahy |
| Rebekah Fowler | Paulina Kaiser | Danny Magana | Andrea Myhre |
| Stacey Bartholomew | Rich Blum | Christine Mosbaugh | Dawn Donato |
| Jan Molnar-Fitzgerald | Marci Howard | Crystal Rowell | Jeff Blackford |
| Shannon Rose | Joell Archibald | Allison Myers | Priya Prakash |
| Linda Lang | Seynabou Niang | Sheree Cronan | Elizabeth Hazlewood |
| Dick Knowles | Tony Howell | Renee Smith | Deb Fell-Carlson |
| Isabelle Cisco | Bettina Schempf | Sharna Prasad | |

Transformation Update: Charissa Young-White

- Please follow the links below and provide input on the recently closed pilots.
 - Helping High School Students to Understand Pain, Opioid Addiction, and Healthy Self-care: https://www.surveymonkey.com/r/ HSPO
 - o Peer Wellness Specialist Training: https://www.surveymonkey.com/r/PWST
 - o Community Doula: https://www.surveymonkey.com/r/_DOUL
 - o Reduce & Improve: https://www.surveymonkey.com/r/RDUC
- Universal Care Coordination Workgroup:
 - o Scope of Work sent to the listsery with feedback due early March 2021.
 - o Need chairs including a system and community representative.

Strategic Planning: Pilots

- See the March 2021 Strategic Plan pages 8-9.
- Discussion on current pilots:
 - o Final reports:
 - Ask pilots to state what is most relevant to the transformation process.
 - What is the biggest key finding?
 - o Future pilots:
 - Once they are funded ask what is the plan to communicate to colleagues about your pilot experience? About the DST in general?
 - How can this help us communicate how we are doing?
 - Education/awareness?
 - o More of a primer on what the system looks like.
 - How does the system fit together?
 - o Guidance to pilots on developing the health equity plan up front and for current pilots how to advance health equity.
- Focus areas: Where do we want to go?
 - o Need to understand our population before we create our interventions to achieve health equity.
 - IHN-CCO will provide a report from the Oregon Health Authority (OHA) to the DST.
 - Request for IHN-CCO to do their own analysis of COVID-19 visits.
 - o Balance need/requirements for data and the reality of the community-based organizations capacity for collecting data or the burden on the member.
 - o Idea to fund smaller grants with more simple straightforward application process for lower amounts.

Minutes

Delivery System Transformation Committee (DST)

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- Thorough but not arduous process.
- Support especially for organizations that serve communities of color.
- o Provide a mentorship channel for past pilot champions to mentor through the process.
- o The meeting is a great place for connections (bring a friend to the DST!) but requires commitment to understand what the DST is all about.
 - Encourage community members to attend and 'lurk'.
- o Sustainability:
 - What does it mean and what are we looking for in the proposal?
 - Most complicated and most variable piece of the scorecard.
 - Required component but how to define has been a weak spot for the DST.
 - Suggestion to turn this into a yes/no component instead of scoring.
- Focus areas brought up include:
 - Trauma.
 - Increasing and improving access to behavioral health care in light of COVID.
 - Housing.
 - Language access.
 - Developing a bilingual and bicultural workforce.
 - Pay equity through building and sustaining the workforce.
 - Improving access to behavioral health services in non-traditional ways.

IHN-CCO Health Equity Workgroup Recommendations to the Delivery System Transformation Committee for Consideration for 2021 the Request for Proposal

Background and Context:

Utilize the **Quadruple Aim** as a **framework** for data collection.

Collecting **quantitative data** and analyzing pilots on this level is important. (reduced costs, improved health outcomes, increased access)

However, **qualitative data** and storytelling are an important piece in system change and the evaluation of system change. (reduced costs, improved health outcomes, increased access, improved provider and staff satisfaction) Pilots are infrastructure building with the primary goal of systems change, not individual/behavior only change. Some takeaways specific to pilots:

- Systems change takes time.
- Building/gaining the trust of the community is difficult and long but is a key component to pilot and system change success.
- Bridging the gaps between medical & community organizations take breaking down silos through relationship building, technology, and so much more.

Bring an **equity lens** into the data collection and evaluation process.

How can the DST help projects capture their data (stories, trainings, events, activities) in a meaningful way?

- Centralization/aggregation of pilots to show the big picture.
- Enable pilots to collect data that is meaningful to their project/organization and work with data they are already collecting.
 - o Provide tools or resources to support such as data analysis and how to collect stories and data.
- Showing impact through the smaller, community-based grassroots organizations that truly affect health equity communities of color, LGBTQIA2S+, and disabled people are prime examples of communities that generally have smaller organizations supporting them.
- Mandate budget line item for health equity to show accountability to supporting communities experiencing inequities including components such as training staff, investments in bias training, and research and development of equity practices.

IHN-CCO Health Equity Workgroup Recommendations to the Delivery System Transformation Committee for Consideration for 2021 the Request for Proposal

- Focus on creating recommendations that encourage the quantitative aspect but also consider and support the qualitative data collections that innovative and small pilot organizations have access.
 - o Some pilots are incredibly important from a health equity perspective and they will never be the type of programs that collect insurance cards. This could present a serious barrier for these communities we want to reach.

Process Recommendations:

- Support the application process by creating language that is more accessible and remove barriers by providing materials in different languages and with universal design standards.
- Measure number of partners brought to the table as a definition of success.
- Approve pilots for two years with the understanding that funding will be provided only during the first year. The first year could be focused on infrastructure building while the second year would be focused on data collection and/or evaluation.
- Remove barriers to the application process:
 - Many organizations or individuals feel intimidated by the application process including the length and components required.
 - The application is not particularly approachable for individuals and/or organizations with little or no grant writing experience.
 - May be missing out on some great community partners with innovative ideas.

DISCLAIMER: Our members (community or IHN-CCO) are not responsible to provide more information. We are not proposing a new process to collect data from our members (no surveys, no REALD additions), but to support creating a framework and standardization of the stories and data we already have collected through pilots, enrollment data, claims data, encounter data, and more.