

## **SWACH Board of Trustees Meeting Minutes**

August 25, 2022 9:00 am - 11:00 am Meeting held via Zoom

We bring partners together to create equitable, sustainable systems change that reduces cost and improves whole-person wellness for all.

**Members Present:** Dawn Tolotti (President), Robb Kimmes (Vice-President), Kevin Witte (Treasurer), Andy Tucker (Secretary), Karyn Kameroff, Matania Osborn, Dr. Adriana Linares, Quinton Harold, Tamara Cissell, Worku Negussie,

Staff Present: Eric McNair Scott, Nichole Peppers, Janet Sanchez, Ryan Carrillo, Eddie Gallagher, Ami Hanna, Michelle Ahmed

Guests: Sydney Doherty, Daniel Smith, Laurel Lee, Donna Allison, Sam Pike

Members Absent: Susan Stearns, Andrea Pruett

Minutes Formatted by: Janet Sanchez

TOPIC	<b>DISCUSSION</b> (HIGHLIGHTS)	MOTION / ACTION
Call to Order  - Land     Acknowledgement - Consent to Agenda - Minute Approval     (June 2022 Minutes) - Board Application     review for Jackie Esperance	<ul> <li>This meeting was called to order by Dawn Tolotti at 9:02 am.</li> <li>SWACH's Land Acknowledgement read by Dawn Tolotti</li> <li>No discussion on consenting agenda</li> <li>June 2022 minutes were approved.</li> <li>Dawn Tolotti introduces Jackie Esperance's BOT application.</li> <li>New Board Member Appointment</li> <li>Jackie Esperance, as the new Health System representative for a three-year term.</li> <li>Dawn Tolotti asked for a motion to move forward with Jackie Esperance as a Board Member.</li> </ul>	Robb Kimmes moved; Kevin Witte seconded motion to approve the minutes from the June 2022 Board of Trustees meeting; motion passed unanimously.  Kevin Witte moved; Tamra Cissell seconded motion to approve Jackie Esperance as a Board of Trustee member; motion approved unanimously



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TOPIC	<b>DISCUSSION</b> (HIGHLIGHTS)		MOTION / ACTION
Washington Integrated Care Assessment (WA-ICA) Presentation		ect Hub Operations Manager, as well as I Care Assessment (WA-ICA) work within	
	Background on the WA-ICA		
	When the program first started, many Access Foundation (The MeHAF) Asse requested the same assessment within	ssment" for SWACH and other ACHs	
	The MeHAF was developed to assess levels of behavioral/physical health integration. The assessment looked at two sections:  • Integrated services and patient/family services  • Practice/organization		
	Each section had characteristics that at the level of integration achieved). Mel- into four stages and eight change con-		
	Stages	Concepts	
	Reducing Barriers to Care	Care Coordination Enhanced Access	
	Changing Care Delivery	Patient Centered Interactions Organized Evidence-Based Care	
	Building Relationships	Continuous and Team Based Healing Relationships Empanelment	
	Laying the Foundation	Quality Improvement Strategy Leadership	
	Partners reported at the organization I	clinical and community-serving ed at the site/clinic level and Community evel. The baseline data collection included cate required opioid prescribing questions	



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Washington Integrated Care Assessment (WA-ICA) Presentation (Cont.)	ACHs to look at the WA-ICA. The assess Chung, and it comprised two tools, one other tailored for behavioral health sett measure, and advance progress across	eight domains. WA-ICA was identified as a integration. The current work is being led	
	Domains listed below  Screening, referral to care, and follow up Ongoing care management Information exchange among providers A multi-disciplinary team Self-management support adapted to patient Systematic quality improvement Linkages to community and social services Sustainability  2022 WA-ICA Activities Timeline		
	Months	Activities	
	January-April	Determine Cohort 1 providers based on providers who completed the MeHAF in 2019 Create messaging strategy and timeline and begin sending communications to Cohort 1 providers Participate in Data Sub-Workgroup to create set of supplementary demographic questions with the ICA	
	June	Training available to providers to support completing the ICA Washington Portal open to provide support to providers	



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TOPIC	<b>DISCUSSION</b> (HIGHLIGHTS)		MOTION / ACTION
Washington Integrated Care Assessment (WA-ICA) Presentation (Cont.)	2022 WA-ICA Activities Timeline (Cont	.)	
` ,	Months	Activities	]
	September	Review Cohort 1 experience and feedback SWACH to plan for WA-ICA completion incentive	
	October-December	Begin Cohort 2	
	Child & Adolescent Clinic Children's Center Children's Home Society of Washington Columbia River Mental Health Services	Legacy Health Systems Lifeline Connections Lutheran Community Services Northwest Mid-Columbia Family Physicians, P.S.	
	Comprehensive Healthcare	Providence Medical Group	
	Cowlitz Indian Tribe	Public Hospital District No 2 of Klickitat County (Skyline)	
	Family Solutions Inc	Rose Medical Groups, P.C.	
	Kaiser Foundation Health Plan of the Northwest	Sea-Mar Community Health Centers	
	Klickitat Valley Health	Skamania County	
	had no ongoing work with Partners duwork and the WA-ICA would fit. Since tabout incentivizing the WA-ICA and fu Currently there has been little engager	etermined but will start in October.  ed in 2021, when WA-ICA opened SWACH e to an unsure future of how Integrated Care here has been more guidance from HCA nding integrated care technical assistance. ment from Providers; however, SWACH will ut to partners more intensively to improve	



DISCUSSION (HICHICHTS)	MOTION / ACTION
<b>DISCUSSION</b> (HIGHLIGHTS)	MOTION / ACTION
WA-ICA has been a collaboration between the HCA, MCOs, and all nine ACHs to provide a cohesive practice around the new integrated care assessment. This has been a multi-layer approach and with HealthierHere leading this approach it has allowed the opportunity to work through different indicators and the ability to leverage partnerships and continuing to help support the integration and having an overall collective.	
Eddie Gallagher; SWACH Director of Finance, provided an update on the financials.	
2021 Audit Update	
Management Received Draft documents have been received and will be reviewed by both Eddie Gallagher and Nichole Peppers. The Board can expect a Management letter recommending updated policy and procedures on bank reconciliation and Payroll Registers P&P. Additionally, there were only a few adjusting entries for 2021. Adjusting entries were recognition of \$96k In-kind Revenue and Expense for CCS CHR Database due to over released \$9,700 of Restricted Revenue, which had to be corrected. Overall, it was a \$0 Impact on 2021 Change in Net Assets.	
CareConnect Washington (CCWA)	
As of July 1 <sup>st,</sup> 2022, SWACH is under a renewal contract with CCWA for a 12-month period for \$3.346 M. \$640,000 will be subcontracted out to five Community Partners and \$2 M will be allocated to Direct Services to support SWACH referrals impacted by COVID-19. Finally, \$560,000 will go to SWACH to support HealthConnect operating costs.	
	WA-ICA has been a collaboration between the HCA, MCOs, and all nine ACHs to provide a cohesive practice around the new integrated care assessment. This has been a multi-layer approach and with HealthierHere leading this approach it has allowed the opportunity to work through different indicators and the ability to leverage partnerships and continuing to help support the integration and having an overall collective.  Eddie Gallagher; SWACH Director of Finance, provided an update on the financials.  2021 Audit Update  Management Received Draft documents have been received and will be reviewed by both Eddie Gallagher and Nichole Peppers. The Board can expect a Management letter recommending updated policy and procedures on bank reconciliation and Payroll Registers P&P. Additionally, there were only a few adjusting entries for 2021. Adjusting entries were recognition of \$96k In-kind Revenue and Expense for CCS CHR Database due to over released \$9,700 of Restricted Revenue, which had to be corrected. Overall, it was a \$0 Impact on 2021 Change in Net Assets.  CareConnect Washington (CCWA)  As of July 1st 2022, SWACH is under a renewal contract with CCWA for a 12-month period for \$3.346 M. \$640,000 will be subcontracted out to five Community Partners and \$2 M will be allocated to Direct Services to support SWACH referrals impacted by COVID-19. Finally, \$560,000 will go to SWACH to support





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Executive Director Summary	Nichole Peppers; SWACH's Executive Director, presented on SWACH's milestones, successes, summary of current program focus areas/funding, and HCA Waiver 2.0 update.	
	Went over SWACH's Mission and Vision statement -	
	Mission We bring partners together to create equitable, sustainable systems change that reduces cost and improves whole-person wellness for all.	
	- Whole person wellness is the cornerstone of the mission and something on the daily practice Staff consider and walkthrough as a connection point with Partners.	
	Vision People, organizations, and systems working in coordination/collaboration to ensure all communities in SW WA have equitable access to what they need for physical, behavioral, economic, and social well-being	
	Throughout 2022 SWACH focused on the following Major Goals:	
	<ol> <li>MORE ALIGNED COMMUNITIES: An integrated ecosystem that optimizes resource use delivers less fragmented services.</li> <li>IMPROVED HEALTH &amp; EQUITY: Better, more equitable health outcomes for all.</li> <li>STRONGER PARTNERSHIPS FOR CHANGE: Greater ability to address shared complex challenges &amp; invest upstream together.</li> </ol>	
	There are 5 key performance indicators that programs have been working through. These indicators are used as a guide as SWACH contentious to develop their work, achievements, and priorities for 2023.	



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TOPIC	<b>DISCUSSION</b> (HIGHLIGHTS)	MOTION / ACTION
Executive Director Summary		
(Cont.)	5 key performance indicators	
	➤ COMMUNITY ENGAGEMENT & POWER BUILDING	
	<ul> <li>Comm voice &amp; shared decision making</li> </ul>	
	<ul> <li>Collaborative leadership across sectors</li> </ul>	
	<ul> <li>Representative of community composition</li> </ul>	
	> COORDINATED SERVICE MODEL	
	<ul> <li>Shared community health record</li> </ul>	
	<ul> <li>Standards for assessment &amp; documentation</li> </ul>	
	<ul> <li>Integrated quality improvement data/tools</li> </ul>	
	▶ DATA & PROGRAM INFRASTRUCTURE	
	<ul> <li>Access to services across continuum</li> </ul>	
	<ul> <li>Coordinated efforts across all partners</li> </ul>	
	<ul> <li>De-duplication for optimal resource use</li> </ul>	
	COMMUNITY BASED WORKFORCE	
	<ul> <li>Activate &amp; sustain comm based workforce</li> </ul>	
	<ul> <li>Training &amp; supports for workforce</li> </ul>	
	<ul> <li>A workforce that represents community</li> </ul>	
	➤ COMMUNITY INVESTMENT & SUSTAINABILITY	
	<ul> <li>Align &amp; optimize resources of all types</li> </ul>	
	<ul> <li>Value-based payment architecture</li> </ul>	
	<ul> <li>Blend funding to sustain &amp; grow work</li> </ul>	
	Nichole Peppers took a deep dive on each of SWACH's goals and broke them	
	down into how they apply within Community Engagement to Power Building and a	
	Coordinated Service Model to Community Based Workforce.	
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Executive Director Summary (Cont.)	MORE ALIGNED COMMUNITIES: An integrated ecosystem that optimizes resource use delivers less fragmented services.	
	COMMUNITY ENGAGEMENT & POWER BUILDING Cross ACH efforts Combined, collective efforts to uplift all ACHs in sustained efforts. Holding health equity at its center, critically assess and participate in activities that deliver on system transformation	
	<ul> <li>Efforts</li> <li>MTP Waiver 2.0</li> <li>DOH CareConnect WA Community Hubs</li> <li>DOH Health Equity Zones</li> <li>House Bill 1504</li> </ul>	
	COORDINATED SERVICE MODEL Realize community collaborative efforts to support and sustain partner and community efforts. Promote sustainability of support. Transparent communication about SWACH work into community.	
	<ul> <li>Efforts</li> <li>Clark County Opioid Taskforce</li> <li>Trueblood Collaborative</li> <li>Cross ACH Mobile Health Integration Project</li> <li>Common Principles and Practices training to CBW</li> </ul>	
	2) IMPROVED HEALTH & EQUITY: Better, more equitable health outcomes for all.	
	COMMUNITY BASED WORKFORCE Partnering with agencies and community with a deep focus of providing tools, opportunities, and funding to center diverse community-based workforce.	



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TOPIC	<b>DISCUSSION</b> (HIGHLIGHTS)	MOTION / ACTION
Executive Director Summary (Cont.)	<ul> <li>Efforts</li> <li>HealthConnect Hub Expansion</li> <li>CHAPS</li> <li>Mobilizing Culturally Appropriate Workforce for Covid-19 Vaccine (MCAW)</li> <li>HealthConnect Advisory Council</li> <li>DATA &amp; PROGRAM INFRASTRUCTURE</li> <li>Centering Social Determinants of Health (SDOH) in approach, use tools to coordinate efforts and help partners achieve full access to resources.</li> </ul>	
	<ul> <li>Efforts <ul> <li>HealthConnect Pathways CQI Measurements</li> <li>WA-ICA Collaborative</li> <li>CORE Community Connections report &amp; Hub Evaluation</li> <li>SWACH Opioid Dashboard</li> </ul> </li> <li>3) STRONGER PARTNERSHIPS FOR CHANGE: Greater ability to address shared complex challenges &amp; invest upstream together.</li> <li>COMMUNITY INVESTMENT &amp; SUSTAINABILITY Deeply analyzing our sphere of impact and aligning it with mission and values, incorporating community in decision making and working with partners to amplify impact of resources to work to community resiliency achievements.</li> <li>Efforts <ul> <li>Community Investment Strategy</li> <li>Community Impact Grants</li> <li>HealthConnect Hub Outcome Based Payment Structure</li> <li>Community Foundation Social Justice Resiliency Fund.</li> </ul> </li> </ul>	



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Regional Health Improvement Plan (RHIP) Council Update	Andy Tucker; SWACH Board of Trustees Secretary and co-chair of RHIP, brought forward a recommendation on behave of RHIP concerning the future of the council.	
	Andy further presented on the past, present, and future work for the RHIP council.	
	RHIP Leadership requested input on retooling the RHIP schedule. Meeting twice a year was proposed until more information is available for RHIP's role under the new MTP Waiver implementation. The next scheduled meeting would occur during Quarter 1 2023.	
	The proposed plan for 2023 is to revamp RHIP to increase community impact by rechartering RHIP based on the DEI learning/MTP Waiver implementation, recruit RHIP members to other SWACH Board committees, and include more project focus work. The RHIP council members showed a lot of interest in this new direction with a stronger emphasis on project focus work.	
	Andy Tucker's recommendation on behave of the RHIP Council to change the meeting cadence to twice a year with the ability to increase meeting frequency once RHIP's role within the new MTP waiver has been established was discussed and agreed upon.	



TOPIC		MOTION / ACTION
Board Retreat Discussion	Dawn Tolotti open discussion on planning for SWACH's Board of Trustees Retreat. Requested for Board Member prefers on hosting either an in-person retreat or virtual via Zoom. Majority voted for an in-person retreat with a mindfulness towards Covid cases and numbers within the community. The retreat will be taking place on Thursday October 27th, 2022 from 9am to 4pm.  Further planning will be made with Nichole Peppers, Dawn Tolotti, and Janet Sanchez on venues that will allow the number of Board members and keeping in mind the need to ensure physical distance due to Covid.  If there is a concern on increasing Covid cases, Retreat can be moved to Zoom.  Dawn further requested agenda topics for the retreat. Many members voiced having team building activities to allow time to get to know one another and celebrate SWACH's accomplishments and review challenges together.  An additional agenda topic was setting aside time for a Strategic planning session on the new the MTP Waiver.	
Open Topic Discussions	There were no additional topics for this discussion. Moved to Public Comments.	
Public Comments	There were no questions or comments from the public.	
Adjourn	Dawn Tolotti adjourned the public meeting and reminded the Board that the Executive Session has been cancelled.	