



Present: Morgan Linder, Susan Leathers, Ruben Peralta, Wes Luckey, Noah Leavitt, Don Sims, Wendy Cheng, Peggy Needham, Luis Rosales, Renee Rooker, Liz McDevitt, Craig Richards, Meghan DeBolt, Mary Cleveland, Libby Thompson, Michael Ensor, Curtis Phillips, Catherine Veninga, Kathy Covey, Cheryl Hansen, Ruben Hernandez, Matt Bobbitt, Tom Glover

Welcome

- Meghan started the meeting at 2:05pm

GCACH Practice Transformation Update

- Ruben gave a general introduction of the [GCACH](#)
- Wes presented on GCACH's efforts involving Care Transformation/ Patient-Centered Medical Homes
 - GCACH aims to pay for things that traditional healthcare has not
 - They are not a service delivery organization
 - GCACH conducted a Current State Assessment in May 2018 and results used to identify gaps, barriers, and assets in existing services
 - Conclusions from CSA
 - Clinical Care management for high risk populations is essential
 - The top 5% of utilizers use 50% of services and the top 10% use 75%.
 - Utilizers are have diverse backgrounds, demographics, conditions.
 - Primary care practices can't do all of this on their own, so formal collaborations (MOU, contract, etc.) are needed to support care and ensure efforts continue over time.
 - Healthcare workforce capabilities must reflect needs of the PCMH
 - Career pathways (long term solution)
 - Training (short term solution)
 - Patient-Centered Medical Home (PCMH) is the right strategy to be successful under the transformation project and to achieve the Triple Aim.
 - Changing State of Health: Healthcare is shifting to a chronic care model due to changes in leading causes of death and care utilization.
 - The PCMH is an evolution of Chronic Care model.
 - GCACH is transitioning from a program management approach to change management approach.
 - Providence St. Mary is the clinic selected for transformation in Walla Walla County.
 - Wes was asked if this addresses the retention of physicians
 - Yes, this addresses that. Electronic Health Records one of biggest reasons for physician burnout.
- Meghan mentioned that GCACH's goal is to address health outcomes, which is similar to the goal of the CHNA, which also addresses Social Determinants of health and other factors

Community Health Needs Assessment Review

- Morgan gave a general overview of the CHNA draft, the 2014 CHNA, most recent CHIP, and the indicators process leading up to the CHNA. She reviewed the introduction section and education



sections. To account for time, she will send out a document that can be edited. BMRCHP members are asked to track changes or email Morgan suggestions to improve the current 2018 CHNA draft.

Community Health Improvement Plan Update

- Morgan gave an update on the anticipated Community Health Improvement Plan timeline. She will schedule a long (~4 hours) working session for late September/early October to determine priorities based on the results of the CHNA. Smaller group meetings will occur throughout October and November to determine strategies around the selected priorities. The larger group will then reconvene to produce a final Community Health Improvement Plan before the end of the year.

Announcements

- Ruben: Upcoming training opportunity: Washington Statewide ACEs and Resilience Community of Practice Convening, October 10, 2018 8:30a-3:00p, Red Lion Hotel Pasco
- Meghan: [Blue Zones](#) Community Leadership meeting, October 4, 3-6pm, Reid Campus Center Ballroom
 - Tony Buettner will give a presentation about what Blue Zones are and how it would look for Walla Walla to incorporate the model
- Luis: Fun Fest and [Run for Recovery](#) 5k, September 15, 9am, Mill Creek Sports Complex
- Luis: Guest Speaker Dr. Kevin McCauley at [Trilogy Educates](#) (“A story of recovery and a presentation on drugs in our community by local law enforcement”), September 10, 6:30pm, Maxey Hall at Whitman

Adjournment: The meeting was adjourned at 3:05 pm

Next Meeting –
Tuesday, September 18th, 2018, 2-3pm
Walla Walla County Training Room
314 W. Main, Second Floor
Walla Walla, WA 99362