

Date: April 18, 2023

Start/End Time: 11:00AM – 2:00PM

Location: Hybrid

Facilitator Organization: Public Health Institute

In-person:

Sequoia Conference Center, Room A
901 Myrtle Avenue, Eureka, CA, 95501

Virtual

<https://pophealthinnovationlab-org.zoom.us/j/86030616615#success>

Total Number of Attendees: 30

High Level Agenda

No.	Topic	Key Questions
1.	Arrival & Welcome In	-
2.	Group Introductions	<ul style="list-style-type: none"> Name, Organization, County and What are your organization's strengths?
3.	CPI Framing & Updates	<ul style="list-style-type: none"> What is PHIL's role in CPI? What has the collaborative accomplished so far?
4.	Asset & System Mapping Overview & Activity (Part 1)	<ul style="list-style-type: none"> What is the purpose of the CPI Asset & System Mapping survey? What data was collected in the CPI Asset & System Mapping survey?
5.	Asset & System Mapping Activity (Part 2)	<ul style="list-style-type: none"> Who is doing what in the Medi-Cal delivery system? What do you consider an 'asset'? Which community assets do you value most?
6.	Update from Partnership HealthPlan of California	-
7.	Closing & Next Steps	-

**Meeting notes are included at the end of this document*



Notes/Meeting Summary

Key Takeaways & Discussion Themes by Agenda Topic

Topic	Discussion Themes/Key Takeaways	Actions Taken/Next Steps	Best Practices/Lessons Learned
Arrival & Welcome In	-	-	-
Group Introductions	<ul style="list-style-type: none"> • What are your organization's strengths? 	-	-
CPI Framing & Updates	<ul style="list-style-type: none"> • What is the role of CPI facilitators? • What accomplishments has PHIL made with the region so far? • Readiness Roadmap: Where are you on the Readiness Roadmap? 	<p>Participants in-person identified which step their organization is at on the Readiness Roadmap.</p> <p>Next Steps: Strategize methods of collecting the step all participants are at on the Readiness Roadmap</p>	PHIL will continue to have new participants. Framing and updates will need to be at the start of every meeting moving forward.
Asset & System Mapping Overview & Activity (Part 1)	<ul style="list-style-type: none"> • Reviewed high-level data collected through the CPI Planning & Asset Mapping Survey Results 	<p>Next Steps:</p> <ul style="list-style-type: none"> • A report of the initial findings is to be shared with the participants on the website. • The survey will be shared again to make the maps more robust. The next due date for the CPI Planning & Asset Mapping Survey Results will be in two weeks (5/15/23). • Participants will help to distribute the survey within their networks. 	Note: The network maps displayed that counties interact with one another share networks.
Asset & System Mapping Activity (Part 2)	<ul style="list-style-type: none"> • Increase awareness of what assets exist and who is engaged in the Medi-Cal delivery system. • Identify at least 2 takeaways or major themes to share. • Identify one asset available in the region to share. <p>Key Takeaways:</p> <ol style="list-style-type: none"> 1. NW region entities need more ways to communicate. 2. There are several entities missing from the asset maps. The current maps 	<p>Next Steps:</p> <ul style="list-style-type: none"> • Identify specific <i>capacity building</i> trainings (i.e., Collective Medical) • Develop <i>collaborative systems improvement</i> strategies (i.e., Identification of a central hub, data exchange conversations) • <i>Network and relationship building</i> with new members added to the asset maps. These include tribes and other minority groups, and existing 	<p>Data exchange is the weakest link:</p> <ul style="list-style-type: none"> • It would be helpful if NW region had an exchange network; numbers, fax numbers, etc. • "It is getting more complicated the more and more we try to simplify it." <p>Referrals:</p> <ul style="list-style-type: none"> • "There is a list that comes from PHC that goes to the ECM endpoints - they don't ask ahead of time so the CHWs are cold calling people who may or may not want the services."

	<p>do not represent the existing networks.</p> <p>3. It would be more helpful to have collective trainings across organizations, trans-regionally.</p> <p>4. In-person training around the use of Collective Medical would be beneficial.</p>	<p>data exchange networks (NCHIIN (North Coast Health Improvement and Information Network)).</p> <ul style="list-style-type: none"> • Create a concrete plan with what PHIL intends to do with the data collected. 	
Update from Partnership HealthPlan of California	<ul style="list-style-type: none"> • DHCS released updated ECM (Enhanced Care Management) and CS (Community Supports) reporting requirements on 04/12/23 • Partnership HealthPlan is currently reviewing the changes and plans to schedule upcoming meetings and webinars with ECM and CS providers to clearly outline and explain the updates. • Partnership will also be revising all applicable training materials and templates. 	<p>Next Steps:</p> <ul style="list-style-type: none"> • PHIL will invite PHC (Partnership HealthPlan of California) to participate in the next monthly meeting. • PHIL will follow up with PHC about sharing an updated list of contracted ECM and CS providers. <p>Note: PHC will share new guidance with providers once they have reviewed.</p>	Having a representative from PHC as a part of monthly meetings is beneficial.
Closing & Next Steps	<ul style="list-style-type: none"> • Asset mapping follow-up • Next regional meeting is virtual. 	<p>Next Steps:</p> <ul style="list-style-type: none"> • Send updated calendar invite for May meeting. • Share slides, notes, data resources 	PHIL team to send post-event survey to glean insight on the hybrid experience.

Identified Gaps/Challenges in CalAIM/ECM/Community Supports

Topic	Gaps/Challenges Identified	Actions Taken/Next Steps	Best Practices/Lessons Learned
Lack of a centralized communication system	<ul style="list-style-type: none"> • Not everyone is connected • There needs to be training on Collective Medical • Request for Release of Information (ROI) • Contact information is usually outdated for providers when conducting referrals 	PHIL will schedule meetings with local CIE (Community Information Exchange) to identify areas of opportunity to address this challenge.	<ul style="list-style-type: none"> • Through the CIE it could be a local network space where we can collectively see what is going on

	<ul style="list-style-type: none"> • Collective Medical has restrictions that do not allow cross-coordination 		
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Identified Successes Experienced by Participants

Topic	Successes Identified	Actions Taken/Next Steps	Best Practices/Lessons Learned
Rural vs. Local	Humboldt shared they are successful in accessibility for rural populations.	N/A	N/A

Summary of Complaints & Grievances

Topic	Summary of Complaint/Grievance	Actions Taken	Next Steps
Lack of state data infrastructure	<ul style="list-style-type: none"> • It is getting more complicated the more and more we try to simplify it. 	PHIL will have a more participative role in conversations surrounding the Data Exchange Network	Identify learning opportunities for PHIL staff and CPI participants regarding the Data Exchange Network

Specific comments, questions, or concerns regarding policy/implementation/change goals for TPA/DHCS

Topic	Comment/Concern/Question	Actions Taken	Next Steps

Shared Collaborative Resources

#	Resource	Category/Type	Link/Access Information
1.	CPI Asset and System Mapping Report	Report	https://ql.tc/AwNY9j
2.	Northwest Kumu Map	Interactive Network Map	https://kumu.io/irewole15/path-cpi-northwest-asset-map
3.	Southwest Kumu Map	Interactive Network Map	https://kumu.io/irewole15/path-cpi-southwest-asset-map
4.	PATH CPI resources	Website	https://pophealthinnovationlab.org/projects/path/
5.	Collaborative Planning & Asset Mapping Survey	Survey	https://corexms9fmhcw4nh6y8v.qualtrics.com/jfe/form/SV_2srv7iy5eqA5WXI

Individuals in Attendance

	Name	Organization	Position / Title	Email
1.	Alissa Smith*	Arcata House Partnership	Community Health Worker	asmith@arcatahouse.org
2.	Anita Michniuk	Home and Healthcare Management	Unknown	amichniuk@homeandhealthcaremgmt.com

3.	Barbara LaHaie*	Humboldt Senior Resource Center	Director	blahaie@humsenior.org
4.	Chantal King*	Care Network	Community Health Worker	chantal.king@providence.org
5.	Chris Davis*	NCHIIN	Unknown	cdavis@humboldtipa.org
6.	Connie Thomas	Open Door Community Health Centers	Supervising Case Manager	cthomas@opendoorhealth.com
7.	Dallas Segall*	Arcata House Partnership	Unknown	dsegall@arcatahouse.org
8.	Gabrielle Kelly*	Providence St. Joseph CARE Network	Unkown	gabrielle.kelly@providence.org
9.	Jessica Osborne-Stafnes*	NCHIIN	COO (Chief Operating Officer)	josborne@nchiin.org
10.	John Helvey	SacValley MedShare	Executive Director	john.helvey@sacvalleymys.org
11.	Jose Burgoa	Open Door Community Health Centers	Supervising Case Manager	jburgoanieto@opendoorhealth.com
12.	Kerry Landry	KLHCC	Consultant	kerry@klhcc.com
13.	Laurie Shwartz	Roots Food Group	Nutrition Specialist Educator	laurie@rfoodx.com
14.	Lorraine Kaiser	Roots Food Group	Director of Payor Strategy	ZumaPointe@gmail.com
15.	Meghan Hardin	Hospital Council - Northern & Central California	Regional Vice President	mhardin@hospitalcouncil.org
16.	Sandy Miliatti	Open Door Community Health Centers	Health Resources Manager	smiliotti@opendoorhealth.com
17.	Sharon Beery*	Providence	Community Health Worker	sharon.beery@providence.org
18.	Sharon Hunter*	Providence - St Joseph and Redwood	Sr. Advisor/Analyst	sharon.hunter@stjoe.org

		Memorial Hospitals		
19.	Tonya Rodriguez*	Arcata House Partnership	Lead CHW	trodriguez@arcatahouse.org
20.	Vicky Klakken*	Partnership HealthPlan	Regional Manager	vklakken@partnershiphp.org
21.	Becca Fink	PHIL	Communications Manager	bfink@phi.org
22.	Esmeralda Salas	PHIL	Research Associate II	esalas@phi.org
23.	Jessica Sanchez*	PHIL	Project Coordinator	jsanchez2@phi.org
24.	Kathryn Stewart*	PHIL	Director of Learning and Action	kastewart@phi.org
25.	Max Chavez*	PHIL	Research Assistant II	mchavez@phi.org
26.	Rachel McCullough-Sanden*	PHIL	Program Manager	rmcculloughsanden@phi.org
27.	Seun Aluko	PHIL	Research Scientist II	SAluko@phi.org
28.	Stefani Hartsfield	PHIL	Consultant	stefani@hartsfieldhealth.com
29.	Sue Grannell	PHIL	Director of PHIL	sgrinnell@phi.org
30.	Stephanie Bultema*	PHIL	Director of MERLIN	SBultema@phi.org

*Attended in-person

New Action Items (Identified this Meeting)

No.	Action Item	Owner	Created	Deadline	Status
1.	Strategize methods of collecting the stop all participants are at on the Readiness Roadmap	PHIL	04/21/23	05/05/23	Planning
2.	A report of the initial findings is to be shared with the participants on the website.	MERLIN	04/21/23	05/05/23	Collecting data
3.	Identify specific <i>capacity building</i> training.	Jessica	04/21/23	Continuous	Planning content and dates
4.	Develop <i>collaborative systems improvement</i> strategies	PHIL	04/21/23	05/15/23	Strategizing
5.	<i>Network and relationship building</i> with new members added to the asset maps.	PHIL	04/21/23	Continuous	Strategizing
6.	Create a concrete plan with what PHIL intends to do with the data collected.	PHIL + MERLIN	04/21/23	05/15/23	Strategizing

Action Items (Ongoing)

No.	Action Item	Owner	Created	Deadline	Status
7.	Recruitment of new CPI participants	PHIL and CPI Partners	Start of initiative	End of initiative	Continuous
8.	Incorporating Charter feedback	PHIL	February	Continuous	Continuous
9.					

Open Action Items

No.	Action Item	Owner	Created	Deadline	Status
1.	PATH CPI Collaborative Planning Survey	PHIL	January	May 15	Analyzing
2.	Identify existing coalitions, collaboratives and roundtables for ECM, Community supports	PHIL and CPI Partners	3/30	After April in-person meeting	Data synthesized by mapping project will help to identify these initiatives.
3.					

Closed Action Items

No.	Action Item	Owner	Created	Deadline	Status
1.	N/A				
2.					
3.					