

**COO Peer Group Meeting**

May 13th, 2021

Zoom Meeting

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| **Peer Group Members Present** | Tina Andersen- WayneKellie Morrow- Mountainlands Kelly Robinson- UPFH, Monica Adams-Family HealthcareJennifer Thomas-CHC Inc.  |
| **AUCH Staff Present** | Natalie Stubbs-T/TA Program ManagerBrooke Pyper- Special Project CoordinatorShlisa Hughes-Immunization Care Coordinator  |
| **Welcome and Introductions** | **AUCH Updates:** * + Dialectical Behavioral Therapy training scheduled for June 1st
	+ Hypertension Learning Collaborative: June 17th and July 15th.
		- <https://auch.org/training-events/training-and-event-calendar/clinical/900-hypertension-learning-collaborative>
	+ SDOH training series kicks off June 24th:
		- <https://auch.org/training-events/training-and-event-calendar/clinical/950-social-determinants-of-health-training-series>
	+ AUCH will present the workforce recruitment campaign at the AUCH BOD meeting scheduled for May 21st.
	+ AUCH was awarded $277,000 from HRSA through the American Rescue Act Funding. A needs assessment will be sent to members on June 2nd to gauge interest in T/TA activities. Initial ideas include:
		- Burnout Training
		- Policies and Procedures (managing and organizing, best practices, etc.)
	+ AUCH will be awarding one scholarship per organization for CareerStep MA training program.
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| **Chair / Goals / Vision** |  |
| **Top Issues / Best Practice Sharing (Roundtable)** | ***Immunization Updates:*** * CDC and FDA approved Pfizer covid vaccines for adolescents 12+.
* Pfizer is making “pony packs”- CHCs will be able to order 450 doses.
* Local health dept. will help ship out smaller doses.
* Pfizer can be stored in freezer for 14 days, and 5 days in fridge= 19 days total.
* Pending emergency use to store in fridge for 30 days.
* Moderna: 140 doses, 14 dose vials.
* Indian health services in vernal has 600 extra doses of Pfizer that expire in July, if health centers would like to receive those. These doses can be used for adolescents and would be sent in two shipments (first dose and second dose).
* The Immunization workgroup is working on vaccine hesitancy campaigns and trainings.
* COVID-19 weekly email updates will continue to be sent out every Friday. Previous emails can be found here: <https://auch.org/covid-19-health-centers>.

***Roundtable Discussion:*****Mountainlands (Kellie):*** Working with their legal team on mandating covid vaccine for patient facing positions. For staff who are not getting the vaccine and can work remotely, they can be exempt from receiving the vaccine. If staff that work with patients refuse the vaccine, they are required to wear a mask indefinitely, unless they are in a room by themselves.
* FTLF has a training on YouTube regarding mandating COVID-19 vaccine.
* American Rescue Act Funding:
	+ Purchasing some equipment, potentially opening un-funded site.
	+ Training: Each manager will receive a dollar amount to send their staff to training.
	+ Hiring MAs, front desk staff, data analyst, PT RN.
	+ HRSA has notified health centers that the budget can be flexible by 20% in each category.

**CHC Inc. (Jennifer):*** Currently mandating the vaccine for all staff. If staff refuse, they have to provide reasoning behind why they are refusing the vaccine. This has placed additional burden on management to ensure compliance among staff.
* American Rescue Act Funding:
	+ Hiring 5 FTE providers.
	+ Looking at hiring floating MAs that will rotate between clinics that are short staffed. A lead position would also be hired to help facilitate the scheduling of these MAs.
	+ Looking at using the funding for infrastructure upgrades like carpet, etc. One facility was robbed so looking at making that more secure.
	+ Purchasing new equipment.
* Hired a staff member that has no clinical experience, but they are paying for a phlebotomy class to build their skillset.
* Utilize Healow Check in that ask’s pre-visit questions to patients. Initially this was done at a kiosk but now is being completed through iPads. These are automatically loaded into the chart, so the provider has that information during the encounter.

**Wayne Community Health Center (Tina):*** Currently not mandating the vaccine for staff. They have only had two employees refuse the vaccine, one of which is a remote billing staff. All staff currently wear masks during flu season.
* Not utilizing Relias for policies and procedures but have separated them out so policies don’t have to be re-written if procedures change.
* American Rescue Act Funding:
	+ Putting the funding toward equipment that has the potential to earn them income in the future (i.e. xray machines, preparing a room for more in depth procedures through telehealth with a specialist, etc.).
	+ The need for vaccines is dropping as they have a small community.

**Utah Partners for Health (Kelly)**: * Currently have an 85% compliance rate with staff receiving the COVID-19 vaccine. One board member is concerned about mandating the vaccine for staff so they are not currently mandating.
* American Rescue Act Funding:
	+ Hiring more consultants to focus on things like Bridge IT and ECW.
	+ Looking to improve overall patient experience.
	+ Currently in need of LCSWs, so will continue efforts to hire for that position.
	+ Hired a pharmacist and looking at hiring a staff person for optical.

**Family Healthcare (Monica):** * New to Family Healthcare.
* Not sure what the policy will be regarding mandating staff vaccination or what supplemental funding will be used for. Staff is looking at possibilities for funding.

**Meaningful Use (Roundtable):** * CHC Inc. is still participating in meaningful use. ECW has a HEDIS dashboard that helps identify which patients are due for different screenings. Providers receive monthly data to see how they have been improving month to month. HEDIS has 250 measures so they select the ones that align with UDS measures.
* Mountainlands participated up until this year. The audits were burdensome and took up a lot of staff time.
* UPFH has not been participating but looking at potentially re-engaging.
* Shared saving plans are requesting HEDIS data and most UDS measures align with HEDIS.
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| **Topics for Future Meetings** |  |