**Columbia County Community Healthcare Consortium, Inc.**

**Executive Committee**

**Notes from the meeting of July 11, 2018**

**Attending Committee Members:** Robin Andrews (via phone), Art Proper, Beth Schuster, Jack Mabb, Linda Tripp

**Staff Members:** Claire Parde, Lisa Thomas, Ashling Kelly

**CALL TO ORDER**

Meeting was called to order at 9:02

Executive Director’s Report

Claire reviewed her Executive Director’s report (see attached).

**Program Updates**

Claire updated the members on funding from the Rural Health Network Development Program (RHNDP) On June 8th the Consortium was notified that we will receive an additional $41,832 in funding through December 31st, 2018. This required another budget revision, budget justification, and work plan, all of which were submitted on July 9th. Claire noted that the Consortium’s size makes such unexpected adjustments easier to address than if we were a smaller organization.

The application for RHNDP was submitted on June 26th for the full funding amount of $240,000. The application was more challenging to write than in previous years because it could not include programs that are otherwise funded. The submitted work plan included Prescription Access and Referral; Transportation; an “Enhanced Navigator Program” that would rely on a community health worker to provide patient engagement services; a multi-media Addiction Education Campaign; and, the Network Resources Development Program. We hope to receive a response to the application in six to eight weeks.

The Navigator Request for Proposals was issued on June 29th. Lisa Thomas is actively working on it; we’re applying for the maximum funding of $330,000. There may be a competitor in the region, as Dutchess County Community Action Agency has expressed interest in submitting an application as well.

Claire shared good news regarding funding from NYSOFA to the Columbia County Office for the Aging for NY Connects. As a result of our request to NYSOFA, Columbia County will now be receiving increased funding. We are hopeful that we can execute the contract with OFA soon, which would allow the County to reimburse the Healthcare Consortium for the expenses currently being incurred.

St. Peter’s Hospital was awarded the Cancer Services Program (CSP) contract, which is good news; we know that Darcy Connor, as Program Coordinator, will ensure Columbia and Greene County residents will continue to be served. We’ve received detailed instructions for closing out CSP at the Consortium; the office and storage will be cleared out by the end of September. We need to keep some documents for seven years and will take advantage of document storage provided here in the building.

We received a draft of the transportation study prepared by the VEIC report and found it disappointing and incomplete. On July 5th we had a phone meeting with them, emphasizing the Consortium’s interests and expectations. We are hopeful that the final report will be more useful to us.

Claire completed and submitted a number of deliverables to Better Health for Northeastern New York (BHNNY) by the deadline, which should generate some modest revenue. She will be meeting with Meg Wallingford, BHNNY’s Chief Operating Officer, again on July 12th to discuss possible contract work. In addition, we are close to finalizing the contract with Circulation, a company contracted by BHNNY to provide a web-based platform to dispatch non-medical transportation to Medicaid enrollees and eligibles.

**New Business**

Claire shared the news that the SUNY Women’s Health Project secured funding from Dyson to help the Project move to a permanent non-profit home, and the Consortium will be that home. It will take on a broader scope, with a community health worker who will work to expand our patient engagement services. The Rural Health Network funding could allow for even more community health workers moving forward. Claire explained that community health workers who are typically paraprofessionals who reflect the community they serve and whose roles encompass education and system navigation; they have been utilized by Federally Qualified Health Centers (FQHCs) for many years, but have not been prevalent elsewhere, as there has not traditionally been a source of reimbursement for the functions they perform. DSRIP, and value-based payment systems generally, will change that, and Claire expects that community health workers will become much more central to health service delivery to high-need populations in the future.

**Committee Discussion**

Robin shared the news that Tam Mustapha has resigned from the Board because he is relocating out of the area. His resignation leaves a vacant Chair position in the Corporate Compliance Committee; Art Proper volunteered to join that Committee as its new chair, while leaving the Personnel Committee. Linda Tripp has agreed to become the new chair of the Governance Committee, replacing Robin Andrews, who will remain as a Committee member. Linda will leave the Corporate Compliance Committee.

Art’s move from the Personnel Committee to Corporate Compliance, along with Personnel’s infrequent and limited need to meet, led to the decision to retire the Personnel Committee. Moving forward, the Executive Committee will absorb the functions of Personnel, handling issues or needed policy changes as they arise.  Robin will reach out to those members who have been participating in the Personnel Committee, and ask them to join another Committee.

**Personnel Update**

The contract with BHNNY and Circulation will require that background checks be run on all drivers, in addition to the DMV abstract and monitoring already in place. Claire suggested that we speak with Laurie Scott for suggestions on how to conduct ourselves appropriately in conversations with applicants about background check results.

**Strategic Planning**

At the June 6th Board of Directors Meeting it was decided that an ad hoc Strategic Planning committee should be formed; at that time, PJ Keeler, Scott Thomas, and Tina Sharpe volunteered. The Executive Committee decided that Robin would send an email to the entire Board inviting other interested members to join the Strategic Planning committee. Volunteers and the Executive Committee members will meet in two hour blocks, with the first meeting taking place between August 13th and August 22nd. Claire will send out a Doodle poll to determine the best time for most members. Robin and Claire will consult prior to the first meeting about its facilitation and framework. The Committee members and first meeting date will be reported at the August 1st Board of Directors Meeting. The focus of the Strategic Planning Committee be on the large system forces and trends operating on the agency and how that may influence its future structure and business. The committee should consider the question: “who should we be” versus the prior strategic planning focus of “how to be the best version of ourselves.” One question to consider should be whether the Consortium can serve an entire region.

**ADJOURNMENT**

The meeting was adjourned at 10:00 am.

The next Executive Committee meeting is scheduled for **September 5, 2018**

*Notes respectfully prepared and submitted by Ashling Kelly on July 16th, 2018*

**Columbia County Community Healthcare Consortium, Inc.**

**Executive Director’s Report to the Executive Committee on July 11, 2018**

**Program Updates**

Rural Health Network Program Update

Following the restoration of funds to the RHN Program at the 2017-2018 funding levels, we submitted a new budget in the amount of $142,037, with justification and a revised work plan for the 9-month extension period of April 1st through December 31, 2018. Then, on June 8th, we were advised that we would receive an *additional* $41,832, bringing our current year budget to $183,868. On June 22nd, we submitted a revised budget, budget justification and work plan for this amount, which was approved on July 9th. We are currently amending the contract and hope to be able to voucher for first quarter expenses by the end of August.

Meanwhile, the RHN RFP was issued on May 11th. We submitted our application for a funding amount of $240,000 on June 26th.

Navigator Program Update

We have submitted a budget and work plan for the 7-month contract that begins on October 1, 2018 and ends on April 30, 2019. Approval is pending. We were also advised that our contract manager is changing (again).

Meanwhile, on June 29th, the NYSDOH issued the RFP for the Navigator Program. Happily, nothing in the requirements precludes us from applying. We submitted the Letter of Intent to apply and are already drafting the application, which must be submitted by August 10th. We will apply for the maximum funding amount of $330,000 to serve Columbia and Greene Counties.

NYConnects Program Update

As noted in my last report, NYSOFA issued an allocation table for the NYConnects Program which allotted $99,928 to Columbia County for the 12-month period starting April 1, 2018. We prepared a draft budget for this amount to submit to NYSOFA when requested. In the meantime, we pursued contracting with the County for this amount so that expenses, which we are incurring, can be reimbursed timely. Since we were advised this is not possible, we asked our very helpful partners at CCOFA to prod NYSOFA for some written assurance that funding is forthcoming.

Meanwhile, Lisa Thomas initiated a conversation with our contract manager about the minimal funding amount Columbia County receives, particularly in comparison with neighboring Greene County. We were asked to submit a request for additional funding, which we did on June 15th.

On July 3rd, Kevin McDonald received a letter from NYSOFA assuring him that funding in excess of $140,000 would be coming to Columbia. Ask and ye shall receive!!!

Cancer Services Program Update

Good news! St. Peter’s Health Partners received the award for the next round of Cancer Services Program funding, which means the project will be directed by Darcy Connor. We are both happy for her and happy for residents in Columbia and Greene Counties, because we know Darcy will ensure they continue to be served. Also, we received detailed instructions from NYSDOH for transitioning the program, now underway.

Transportation Program Update

The Transportation Program continues its work with the Vermont Energy Investment Corporation, or VEIC, to conduct an evaluation and strategic planning study of the program, funded by the Foundation for Community Health. We received a draft report from VEIC in mid-June, which was disappointing, and last week we had a call to redirect and focus their efforts in more productive ways. We are hopeful the final report will be useful to us.

DSRIP

On April 30th, we executed a Phase III contract with BHNNY and on Monday, May 14th, met with Meg Wallingford, the new COO, to discuss possible contract work. I’ll be meeting with her again later this week to continue exploring some ideas.

Meanwhile, we are getting dangerously close to finalizing the contract with Circulation, the web-based platform that is being utilized by the two Albany-area DSRIP Performing Provider Systems (PPS’s), the Alliance for Better Health (“the Alliance”) and Better Healthcare for Northeastern NY (BHNNY).

Apparently, Circulation launched in the Albany area on 6/7 with trips scheduled by care coordinators at BHNNY Cares (that PPS’s own care management organization); at the moment, it is relying entirely on Lyft.  Circulation advises us that we are the farthest along of the CBO’s in contracting.   Also, they tell us the planned launch at Columbia Memorial Health will be in September 2018.  It’s our internal goal to be fully contracted and ready to go live by that time.

**New Developments**

The SUNY Women’s Health Project

Dr. Annis Golden, the Director of the SUNY Women’s Health Project, and I met on July 2nd to discuss the future of the project. Annis has funding from the Dyson Foundation through February 2019 to help transition the project to a permanent non-profit home. I have agreed that the Consortium will be this home. Funding from Dyson will support a modest subcontract, including the wages and fringe for a .2FTE Field Coordinator and a small administrative fee. Thereafter, I am confident it will be possible to secure additional funding to support the work of a coordinator and the three community health workers, who currently work a combined total of 15 hours/week. This is a very low-risk, no-cost way of starting a community health worker program, which I continue to believe will be a key component of healthcare delivery to high-risk populations in the future.

**Board and Community Relations**

Since I last reported at the Board meeting in June…

* On Tuesday, June 19th, I attended the Greenport Gardens Ribbon Cutting Ceremony
* On Monday, June 25th, I attended a luncheon of the Twin County Recovery Services Board of Directors and staff at Creekside in Catskill, where I was voted onto the BOD
* On Wednesday, June 27th, I attended the PHIP Advisory Committee Meeting at St. Mary’s in Troy

**Upcoming Events**

* Please note that I will be out of the office from Friday, July 20th until Monday, July 30th