



*Lane Community Health Council is the governing board of PacificSource Community Solutions - Lane

**Lane County Coordinated Care Organization Joint (CCO) Community Advisory Council (CAC)
Hybrid Meeting via Zoom**

May 28, 2024
12 p.m. – 2 p.m.

CAC Members: Isis Barone (PacificSource OHP Representative), Tara DaVee (Trillium OHP Representative), Tannya Devorak (PacificSource OHP Representative) Lana Gee-Gott (Lane Community Health Council Clinical Advisory Panel Liaison), Todd Hamilton (Springfield Public Schools), Chris Hanson (Trillium Clinical Advisory Panel Liaison), Caity Hatteras (Trillium OHP Representative), Silver Mogart (Trillium OHP Representative), Brian Johnson (Lane County Public Health), Carla Tazumal (Lane County DDS), Michelle Thurston (Trillium OHP Representative), Sheila Wegener (Oregon Department of Human Services), and Josephine Williams (PacificSource OHP Representative).

Attendees: Sadie Baratta (Lane County Public Health), Leilani Brewer (Lane County Health & Human Services), Denise Bunnell, (Community Member), Kellie DeVore (PacificSource Community Solutions), Samantha Duncan (Be Your Best Cottage Grove, Health Hub), Martha Edwards (Trillium Community Health Plan), Debi Farr (Trillium Community Health Plan), Stephanie Griffin (PacificSource), Nena Hayes (Lane County Public Health), Brian Johnson (Lane County Health & Human Services), Suzy Kropf (Lane Community Health Council), Ben Liley (TransPonder), Lauriene Madrigal (Lane Community Health Council), Hunter Nelms, (Restored Connections), Genevieve Schaack (Willamette Farm and Food Coalition), Tiffany Sopher (Douglas County), Brit Taft (Trillium Community Health Plan), Jocelyn Warren (Lane County Health & Human Services), Kayla Watford (Lane County Public Health), Dustin Zimmerman (Oregon Health Authority).

Facilitator: Tannya Devorak (CAC Member/Board Member) **Support Person:** Nena Hayes

I. Welcome & Introductions – 12:00 to 12:15 PM

- a. Tannya welcomed guests attending online and in-person and shared her appreciation for everyone. She also shared some housekeeping rules and encouraged online participants to turn on their camera.
- b. Tannya read the meeting agreements aloud.
- c. Kayla Watford helped lead the team through a breathing exercise.
- d. Nena Hayes shared she will serve as the support person and let everyone know she is available by text and email.
- e. Tannya shared the Window of Tolerance resource, and Kayla offered to hold space to practice using the resource as members are interested.
- f. No public comment was made.

II. Member Approvals– 12:15 to 12:30

- a. Prevention Funding Allocation Request: Phase II of the 2024 Community Health Assessment: Jocelyn Warren explained the Mobilizing for Action Through Planning and Partnerships (MAPP) 2.0 framework, and how it will have a comprehensive roadmap on how to engage community in a way that creates conditions people can effectively participate in, as it focuses on an upstream method. Jocelyn introduced a funding request to allocate \$61,925 from the Prevention budget to support the 2024 Community Health Assessment (CHA) community engagement process. The funding would be allocated from carry forward from previous years and would not take away from any existing programs.
 - i. Tannya shared she feels like it's a very good use of money and is excited.
 - ii. Michelle Thurston motioned to approve, and Tara DaVee seconded to approve. Brian Johnson abstained due to his employment with Lane County. The motion for the Prevention Funding Allocation Request passed.
- b. CAC Charter Revision: Kayla Watford provided a summary of Charter revisions for the CAC's review and approval (**see appendix**). The Charter edits were also provided using track changes.

- i. Added and reviewed a supplemental policy and procedures document which will be updated quarterly.
 - ii. Everyone has different situational circumstances, so the Policy and Procedures Document is built to support case-to-case scenarios.
 - iii. There was a question about how we can support members with immediate funds for gas to get to and from meetings/outreach activities. It was shared that receiving mileage reimbursement is a long process. Kayla responded that any individual struggling to get to a meeting or outreach event should contact her directly and work with their CCO to determine the best option. It was suggested this should be included in the orientation and policy so members can have a better understanding of what they're signing up for.
 - iv. There was a question if the charter includes a policy regarding the date that stipends are scheduled to be mailed. Kayla said the policy states that checks will be sent to members no later than the 15th of each month. CAC member mentioned they pay their bills with the stipend they receive, and recently, they didn't receive their check on time, and late fees accumulated because of that. That CAC member expressed their frustration because of this, stating they don't want to make a big deal of it, but it's people's lives here. There was a question if stipends can cover late fees that they may have caused. Debi Farr mentioned that there was an issue with the person who does the check processing, and that she's sorry the delay was not communicated in advance. A CAC member added that for them, it's a security issue, because they had a data breach with their routing numbers and such.
 - v. Michelle Thurston motioned to approve the Charter Revisions, and Sheila Wagner seconded.
- c. April Minutes
- i. Tara DaVee motioned to approve, and Michelle Thurston seconded. The April Minutes were passed.

III. Break – 12:50 to 1:00pm

IV. Overview & Discussion: Community Health Improvement Plan (CHP) Progress Report

- a. Leilani Brewer presented an overview of the 2024 CHP Progress Report. She shared that there may be some changes for the final review of the report which will be available in June or July.
- b. Group engaged in the following poll questions:
 - i. Would members like to continue to see a narrative report each year? A CHP progress report is submitted to the Oregon Health Authority annually by the CCOs.
 - ii. How would you like to be updated on the CHP?
 - iii. What reasons have you heard from community members who are interested in engaging in this work but can't?
 - iv. Is the current format of the report card accessible to you? How would you like to see this data represented?
- c. Due to time constraints, the group was not able to discuss all the questions. The questions will be shared by email for additional feedback.

V. Updates and Announcements – 1:00 to 1:40pm

- a. Community invitation to Our Journey: An Intertribal Quarterly Cultural Collective June 17, 12-3pm
 - i. Lane Community Health Council - Suzy Kropf
 - Suzy shared that there will be an intertribal event on June 17 in the Aster Building at 555 International Way to recognize our members who identify as American Indian/Alaskan Native. This is a quarterly opportunity hosted by PacificSource's Tribal Liaison, Buffy Hurtado.
- b. Assessment Design Team
 - i. Lane County Public Health – Olatorera Adeniji
 - Ola shared that the Community Health Assessment Design Team is hosting Community Visioning events. The next opportunity is on June 4th. There will be opportunities to participate through December 2024.
- c. CAC Outreach and Recruitment Workgroup – Kayla Watford
 - i. Updates and requests for help

- This year's recruitment period will prioritize outreach to systematically marginalized communities including but not limited to rural community members, parents/guardians with children 0-6, youth, young adults, advocates for youth, and individuals involved in the foster care system.
- Goal is to launch the CAC Application on Friday, May 31st, and roll until June 17th (timeline dependent on completion of cultural reviews for Spanish translations). The workgroup has some outreach activities lined up like tabling at the farmers markets. Eliza has offered to be our Spanish speaking liaison for CAC recruitment.
- New radio advertisement with McKenzie broadcasting and La Que Buena Spanish radio station. Communications plan includes website and social media content, and email communications to share far and wide. Please help us spread the word!
- There was a question about what will happen if we receive a lot of interested applicants. Kayla responded that the CAC Selection Committee will support that process and there are many opportunities to connect people with ways to get involved.

Meeting adjourned at 2:00 pm.

CAC Charter – Summary of Revisions (May 2024)

- **Purpose:** updated to reflect language from Oregon Health Authority
 - “Engage CCO Plan Members and the community to ensure the CCOs/Health Council are addressing the health care needs of consumers and the community.”
- **Roles & Responsibilities:**
 - Language edits for clarity regarding demographic report.
 - Added section on CCO/Health Council roles & responsibilities.
 - “The CCO and Health Council’s roles and responsibilities are to:
 - Collaborate with the CAC to identify policies, projects, and programs that improve community health;
 - Support meaningful CAC member engagement in community spending.”
- **Operating principles:**
 - Updated Attendance section and added supplemental policy.
 - Updated Conflict resolution section and added supplemental policy.
 - **Member Accountability:** added CAC staff accountability section.
 - “ Each CAC Staff Member is responsible for supporting the full and active participation of CAC members in order to achieve the goals as described in this Charter. CAC staff members will:
 - Honor and respect the lived experiences, identities and perspectives of CAC members
 - Support communicating member requests, feedback, and innovative ideas to the CCOs/Health Council, and provide follow-up to members on their communications;
 - Identify opportunities to collaborate with members to transform care
 - Provide opportunities to hear consumer voice within the CCO and healthcare systems
 - Actively work to remove/reduce barriers for CAC members to participate fully and equitably
 - Regularly request feedback from members on how staff can improve their support of CAC priorities
 - Engage in regular learning and training opportunities pertaining to health equity, cultural responsiveness, and trauma-informed care.”
- **CAC Membership:**
 - Updated membership # to 30
 - Additions to membership section from CAC and CAC Outreach Workgroup Reviews.

○ **Terms:**

- Updated term process.
 - “All CAC members will serve a two-year term. At the completion of their term, CAC members may agree to serve another two-year term (up to two consecutive terms). After two consecutive terms, members may reapply and interview for continued membership. Interview will be waived if no additional members apply. All members will be required to complete a new cohort orientation at the start of each new term.”
- Updated timeline to align with outreach & recruitment needs.
 - “The nominating and selection process takes place in June and July, with new member recommendations presented to the Governing Boards. New members effective start date is September 1.”
- Updated special circumstances section:
 - Time frame for replacing open seats: 90 to 120 days.
 - Added clarification: replacement needed only if 51% OHP membership will no longer be sustained.
 - Added note about member responsibility to communicate changes in OHP status.