

Montana AHEC/Office of Rural Health Advisory Board

MINUTES

OCTOBER 10, 2016

10:00 AM TO NOON

GREAT NORTHERN, HELENA

TYPE OF MEETING	In-Person Advisory Board, Montana AHEC/ORH
ATTENDEES	Edith Clark, Melanie Reynolds, Jim DeTienne, Jean Branscum, Victoria Cech, Sheila Nielsen, Diane Duin, Renee Erlandsen, Kristin Juliar, Shani Rich, Christine Williams, Cindra Stahl

Agenda topics

WELCOME/ INTRODUCTIONS	Edith Clark and Kristin Juliar
CHAIR REPORT	Edith Clark
DIRECTOR REPORT	Kristin Juliar
<p>Kris reports on these items...</p> <ol style="list-style-type: none"> 1. MHA Fall Conference: Great educational opportunities. AHECs were involved in presenting two sessions which were well attended. Also helped with the Meet and Greet for Residents (special thanks to NC, SC, and E AHECs). MHA is supporting a population health initiative (MHA Montana Health Improvement Initiative--MMHII)—with the goal of a healthier MT by 2020, and the vision of making MT a “top 10 healthy state.” There are four focus areas for the initiative—increase access to health care; increase immunization rates; decrease premature deaths; and decrease prevalence of obesity. The MMHII can dovetail with many existing programs in public health, Governor’s Office, DPHHS opioid efforts, community issues, and AHEC programs. 2. CHW Grant from Montana Healthcare Foundation: The AHEC/ORH just received this 2-year grant. There are 2 main focus areas: curriculum development and delivery, and policy and reimbursement. The larger insurance companies in the state are beginning to step-up and commit to a model of healthcare delivery that includes CHWs. We will likely ask for interested parties to develop a work-group related to policy issues. Heidi Blossom and Teresa Hicks will be working with us to further the training opportunities. 3. New Skills for Youth Grant Application: OPI received this planning grant from JP Morgan Chase. Currently writing the application for the development phase of the project. 25 states received planning grants, but just 10 state will receive development funding. The final presentation will be October 26 in Washington, DC. A chart was developed which reviews the braided funding streams including DOLI, OPI, OCHE, Tribal entities, AHECs, and others. Tribal entities were also specifically written into the final proposal. If the Montana proposal is successful, the grant would be an obvious tie-in and continuation of some of the HealthCARE MT efforts. 4. Dr. Padilla (HRSA) call: John Cech (as a member of NCNEP) will be speaking with Dr. Luis Padilla on Friday to discuss the numerous partnerships across our state, specifically AHECs. This is an exciting opportunity to present the work of Montana and how we may align with healthcare transformation efforts. 	
DISCUSSION	Survey Responses, Kris Juliar
<p>Responses from the August Advisory Board survey are not surprising and are consistent with previous surveys. The topics and issues related to rural health that are most important are mental health and substance abuse, primary care workforce, pipeline programs for youth, wellness and prevention and transformation of healthcare. Many respondents added insightful comments and suggestions. Complete survey results on file at the AHEC office.</p>	
DISCUSSION	AHEC Redesign and 2017 FOA, Kris Juliar
<p>The Bureau of Health Workforce at HRSA is looking to better align their various project areas, including the AHECs. As a result, the upcoming competitive grant application for the AHECs will address somewhat new and different areas of focus. The three areas include: preparing a diverse workforce, improving workforce distribution, and transforming healthcare delivery. This will be a five year timeframe. (Dr. Padilla’s PowerPoint presentation from the NAO meeting in June is on file at the AHEC office.)</p> <p>Kris gave a brief history of how the Montana AHECs developed and how the funding flows. AHEC funding goes to the program office (Kris at MSU). Program offices are aligned with academic health centers (i.e. medical schools or Colleges of Nursing). The program office subawards to the regional offices (75% of funds). Regionals are independent and do not operate under the academic center. The MT AHECs have always been collaborative, but still independent based on their own regional needs.</p> <p>In anticipation of the FOA, the AHEC Directors met in October to begin to prepare for the next grant application. See handout for listing of AHEC existing programs by proposed focus area. (On file at the AHEC office.) Additional suggestions included adding rural and frontier student programs to the diverse column, and adding CPC+ and pharmacist-led healthcare teams to the transformation column.</p>	

Group discussion followed specific to the three focus areas:

DIVERSE workforce—Heads Up Behavioral Health Camp, how can we get students to come back to MT to work (after they've done the urban experiential time), who has the expertise to "recapture" the students—get them engaged and keep them engaged, MHA mentorships, pre-med and pre-nursing clubs, building a relationship component helps in transitions and building a structure to support, what are that attributes of rural personalities that may be lacking in urban personalities? How do we work with tribal communities? How do we foster confidence to participate in health science programs?

DISTRIBUTION of the workforce—traditional AHEC areas of work. Consider working with mobile SIM. Consider rural based scenarios for practice. How much training do students need to participate EMS? How can work based learning play a part?

TRANSFORMING healthcare delivery—very broad topic. How do we develop new professions required in transformation? Is the current workforce trained in cultural competency and appropriate responses? How can we work more effectively with senior populations? Do we train in interprofessional and interdisciplinary care? How does the CPC+ model work in MT? Care coordination—who does it, what is it called, how is it reimbursed?

The current and planned AHEC programs appear to fit well within the new framework. We should be well equipped for the grant proposal.

ACTION ITEMS		PERSON RESPONSIBLE	DATE
AHEC Directors will participate in full-day planning retreat after release of FOA		AHEC Directors	12-13-2016 (scheduled)
DISCUSSION	Member Updates—Group		
AHEC Directors gave program updates. Natascha submitted a written update (in packet).			
DISCUSSION	Kris Juliar		
Does this meeting format (Two hours, followed by lunch, followed by Workforce Advisory Committee) work for Board members? Hearing no dissent, we'll use the same format for next meeting. Date to be determined, but likely during the legislative session in Helena, 2017.			
ADJOURN	12:07 PM		