

HAP Oversight Committee Meeting  
Tuesday, April 14, 2009  
1:30 pm - 3:00 pm  
**Minutes**

Committee Members and Staff Present: Graham Bailey, Claudia Blackburn, Renee Hanrahan, Rod Harris, Anne Nelson, Tim Norton, Beth Oaks, Brian Rose, Jon Rosell, Donisha Ross, and Tim Witsman

Committee Members and Staff Absent: Pamaline King-Burns, Dave Sanford, Charlene Stevens, Hugh Tappan, Michael Vinson, and Ron Whiting

I. Welcome – Rod Harris

II. Review of Progress Reports

A. Progress Report – Enhance publicity & capacity of 211 system – Beth Oaks

- Beth reviewed the advertising schedule for 211
  1. Reach 80% of the target audience, Adults 25-64, a total of 4 times during each week.
  2. Weeks of January 5, January 12, January 19, March 9, March 16, March 23, May 4, May 11, and May 18.
- Beth shared with the group a break down of call-types that were received by 211 in the past year. (For a copy of the handout, please contact Donisha Ross)
  1. Claudia Blackburn – *What is the difference between health care count and health clinic stations' count?*
    - Beth explained that health clinic stations are when someone is asking to see a doctor and the referral is made to one of the health clinics. Health care count is inquiries for more generalized questions. Not specific to any main category or type. (e.g.- I am looking for insurance. Where do I go to see a specialist?)
  2. Commissioner Norton expressed that he was surprised that there was such a large number of anger management calls that the line receives.
- Beth Oaks – *The call volume has increased and with the current economic times, it is constantly increasing. The most frequent types of calls that we receive pertain to getting assistance with paying rent and utilities.*
  1. Jon Rosell – *Would you attribute the increase in the number of calls to the increase in the amount of awareness and advertisement of 211?*
    - Beth Oaks – *We definitely get more calls during the times that we advertise on TV and radio.*
  2. Claudia found it interesting that the number of calls regarding dental information is almost as high as those regarding medical information.

- Beth agreed to produce a Call Type List, quarterly, to share with the group.
- Beth shared with the group that the staff at 211 have specific procedures for suicide calls. These procedures include the ability to transfer the call to the Suicide Crisis Line.
  1. Anne Nelson – *Can you transfer calls to 911 as well?*
    - Beth Oaks – *We have the capability of doing so, but 911 suggests that we advise the caller to hang up with us and call them.*
  2. Jon Rosell – *Do 911 dispatchers defer non-emergency calls to 211?*
    - Beth Oaks – *We currently do not have a system that can track whether they do or not.*
    - Commissioner Norton – *We are trying to develop a 311 call system which would handle all of the non-emergency calls.*
- Commissioner Norton – *How do we create a platform to market 211? I think that this could be very beneficial to the community. Is it a matter of receiving more money for advertisement?*
  1. Beth Oaks – *A lot of it is about money. The health fairs are the least effective ways of advertisement, while TV and radio are the most effective and the most expensive.*
  2. Graham Bailey – *What about PSAs? Have we gotten any information from the transportation system regarding opportunities to post ads on buses?*
    - Beth Oaks – *We have attempted to get PSAs, but they are very difficult to obtain. I am going to follow-up with the transportation system. At one point they were possibly willing to market 211 on the inside, at little or no cost.*

B. Progress Report – HAP Outreach/Cover the Uninsured Week – Rod Harris

- Rod reviewed the activities of Cover the Uninsured Week
  1. Center for Health Equity (CHE) launched the Community Health Navigators (CHN) Project.
  2. Two information sessions were held during the week. 18 people attended, 12 participants signed up to be CHNs, and 4 signed up to be Friends of HAP.
  3. Pamaline also presented the CHN information session to the staff at SCHD Healthy Babies. Some expressed interest in becoming a part of the program.
    - Anne Nelson – *Do you have a training curriculum for those people who would like to be Navigators for specific diseases?*
      - a. Rod Harris – *We do not have a curriculum in place at the moment. We plan to work closely with*

*organizations such as the American Heart Association to help create such curricula.*

- Rod informed the group that he and Pamaline presented the first episode of the *Unnatural Causes* film series at the Kansas Department of Health & Environment's Health Disparities Conference on April 7<sup>th</sup>.
- Rod also shared with the group upcoming events for CHE.
  1. Pamaline will be doing a CHN overview at the Heartland Region (Illinois, Kansas, Missouri, Nebraska) Cancer Information Service of the National Cancer Institute in Kansas City, KS on April 17<sup>th</sup>.
  2. Pamaline has been invited to present at the Wichita United Methodist Health Conference that will take place this summer.
  3. The Center for Health Equity will be hosting a health and wellness pavilion at the Annual Kansas BBQ Master Championship in June.

C. Progress Report – Community Health Coverage Plan – Anne Nelson

- Anne informed the group that the committee is currently in the middle of the planning process.
- The committee has contracted with Jeanne Ripley, Consultant, to help design a work plan for the year.
- Ann shared with the group that rather than having focus groups regarding a community health coverage plan, the committee has decided to do a game process called CHAT (Choosing Health plans All Together). Amy Chester with the KU School of Medicine and Betsy Bloxham (a community volunteer) will help to facilitate this process. The plan is to start the process in late April and go through mid May. There will be 6-8 meetings and uninsured individuals will be invited to share what they believe is needed most from the current health resources in the community.
- Anne also informed the group that the Advisory Council has held three meetings and that the mission and goals for a community health coverage plan are currently being established.

D. Progress Report – Build relationship with KHPA – Claudia Blackburn/Jon Rosell

- Jon shared information from the Kansas HITECH (Health Information Technology for Economic and Clinical Health) stakeholder meeting that took place on March 19<sup>th</sup>.
  1. *Reviewed stimulus money available for states to create health information technology.*
  2. *Discussed how Kansas can obtain support from the federal government to create an HIE.*
    - Graham Bailey – *Governor Sebelius spoke about many pilot programs for Kansas and that HIE was high on the list. This may be a great chance to obtain funding ( by taking part in one of these programs).*
    - Commissioner Norton – *What do we need to do to be a part of these pilot programs?*

- a. Graham Bailey – *Wichita has no representation. We need to gather a group of individuals who would be willing to represent Wichita. Maybe KHPA can help identify some people.*
- b. Jon Rosell – *We have tried to communicate with key leaders of this effort but have not gotten much response. We are looking for support letters from people in the community who believes that they will receive better care as a result of a HIE.*
- o Commissioner Norton – *Are there data that I could use to help make the public aware of HIEs?*
  - a. Jon will send Commissioner Norton the information.
- o Graham expressed the concern that many people may fear HIE due to them not wanting their private information so readily available to so many people.

E. Progress Report – Review research data on emergency room use by the uninsured – Renee Hanrahan

- Renee informed the group that she has collected & analyzed data on the top zip codes for VC-St Joseph ER users. She will provide an updated report of ER data at May meeting.
- Renee also shared with the group that, on the Channel 3 News, she saw a doctor explaining how to appropriately use the ER.
  1. Graham explained that it is difficult for the insurance companies to explain appropriate ER usage to customers because their definition of appropriate ER usage is “anything that is an emergency in the mind of the person seeking care”.
- Anne offered to give Renee information about the research on emergency vs. non emergency visits.

F. Progress Report - Study the feasibility of a shared health information system for the safety net clinics – Jon Rosell

- Jon informed the group that the stimulus has \$44 million available for physicians to make meaningful use of the EMR/health information system development. He also expressed how it is important for silos to communicate with each other to exchange information. There is up to \$13 million dollars available for hospitals who participation in EMR.
- Jon also shared that the Medical Society has been working with a HIE committee to look at how we can move closer to an HIE in this community.
- Jon informed the group that they have talked to three different people at the federal level to help gain information about the HIE systems. He has also spoken with various states around the county who use HIEs and obtained data from them. Jon shared that the number one issue with an HIE system is the consumers trusting that their information is safe.

- Jon expressed that what the committee is currently trying to do is make sure that everyone is educated and informed about HIEs and make residents aware that the committee is trying to set one up in the community.
- Jon also informed the group that in late June/early July, the committee will be meeting with Axoloti to brainstorm ways to get an HIE system running in Sedgwick County.

G. Progress Report – Further develop strategy for extending clinic hours of operation – Rod Harris

- Rod shared with the group that there are currently no updates for extending clinic hours and that the clinics are currently focusing on their individual budgets for the year.

H. Progress Report – Explore 24/7 nurse call line – Rod Harris

- Rod reminded the group that the Nurse Call Line recommendation has been tabled and that it will be looked at again once more research has been found.

I. Progress Report - Develop and implement multiple strategies to enable efficient/effective transportation to area clinics – Rod Harris

- Rod informed the group that there are no current updates for transportation. He also told the group that Pamaline will be possibly sharing information soon on transportation efforts for assisting dialysis patients in the county.

III. Updates – Beth Oaks

- Beth informed the group of updates about the Laid-Off Workers Center.
  1. The center will probably open in early June.
  2. Via Christi has donated space and utilities.
  3. The Center will take reservations/appointments so that the materials can be prepared prior to the visit.
  4. Westar Energy, KG&E, and the City of Wichita Water Dept. will be present to set up payment plans for those in need.
  5. Childcare will be provided and everyone with an appointment will leave with a box of food from the Kansas Food Bank.
  6. Education and counseling will be available as well as local and state resources (Healthwave, SRS, etc.)
  7. The length of time that the center will stay open will depend on the number of calls received.

IV. Adjourned

- A. Next Meeting Scheduled for Tuesday, May 9<sup>th</sup>, 1:30pm - 3:00pm, United Way