

MARION COUNTY HEALTH ADVISORY BOARD
Meeting Minutes
February 19, 2013
5:30 P.M. to 7:30 P.M.

Present: Renee Stewart, Mary Beth Thompson, Katherine Fleury, Judy Scott, Mike Mann, Sandra Echavarria,

Absent: Hanten Day, Tim Murphy, Melinda Veliz, Mark Caillier (LADPC Presenter)

Staff: Rod Calkins, Pam Heilman, Scott Richards, Sandy Stewart, Lisa Duerksen (Recorder)

Guests: Jamila Freightman, Jeanne Antonucci, Laynie Smith, (Parmariessa) Marie O’Neal, Jon Lukenbaugh

Call to Order/Introductions/Approval of Minutes – Patrick Vance

Patrick called the meeting to order, introductions followed then Patrick entertained a motion to approve last months minutes, members voted, motion carried, minutes were approved.

Announcements/Updates:

CCO – Rod:

Nothing new to report. Had a Work Session 2/12/13 with the Board of Commissioners, it went well. There was a reporter there from the Statesman Journal. The editorial board talked about how Salem health wanted transparency so all the contracts guiding principles were discussed with the board in front of a reporter. There are ninety one people identified as using the highest amount of medical services especially through emergency department. Twenty one of those are enrolled in mental health or chemical dependency agencies. One person had over 80 visits with one of our agencies and their primary care and still went to the emergency department forty one times over the course of a year. There are people that have gone to the emergency room more than once a week on their list. They are investigating why these folks are visiting the E.R. so many times and who they are. Some people are going for legitimate reasons and others are going that could be given better alternatives. Scott reported that they will be part advocate, and lobby for people in order to receive sufficient care.

Jackie Winters had a forum; it was attended by a number of business folks and leaders from this community. They called the boards of Salem Health and the CCO together to tell them that it’s not really in anybody’s interest to have this playing out in court. It demonstrated that here you are supposed to be transforming healthcare and you are suing each other. They do not have continuing involvement. Rod will find out next Tuesday if there is an update on the lawsuit.

Silver Tsunami - Rod

Rod re-announced the Silver Tsunami “The hidden Epidemic of Older Adults/Boomers with Addiction Disorders” will be held at the Keizer Community Center Friday April 5th from 8:15 a.m.-4:30 p.m. There will be a way to pre-register.

Drxug Safe – Rod Calkins:

Event will take place 6:00 p.m.-8:30 p.m. April 23rd at Keizer Community Center and is another effort going on in our community that is trying to address the issue of Opiates. CFC and Public Safety committee have championed within the family to make sure people know that teens are getting prescription drugs from their parent/grandparents medicine cabinets. The Drug Take Back is April 27.

Another feature at this event is prescribers and medical folks getting together to figure out a way for more responsible way of prescribing. Physicians are trying to create a community guideline around prescribing. In effect what that does is if anyone goes beyond the guidelines they are exposing themselves to liability. Dentists will also be coming together but are not sure how many are signed on.

STI Update – Jamila Freightman, Public Health Associate from CDC:

Jamila is from Atlanta Georgia, majored in Sociology and minored in pre-med., she came to Oregon with the Americorps- VISTA program.

Jamila began her presentation talking about the STI rates in Marion County. Two important rates to note are the Chlamydia rates which are much higher in the County then the State. The Gonorrhea and syphilis rates are also much higher from 2011 to 2012. The data is from Oregon Public Health Epidemiologist User System (ORPHEUS) which is used to monitor and report disease cases. One major issue right now is Gonorrhea resistance to antibiotics, about 30% of cases were being mistreated in Marion County through private practices until new guidelines came out then it was reduced to 20%. According to the Morbidity and Mortality Rate (MMR) the resistance is due to natural mutation and in her opinion could become incurable in the future.

Jamila reported that a part of her job as a CDC associate is to use local surveillance data through ORPHEUS to analyze and report the healthcare system and treatment of STI's and identifying potential barriers to care. Information on her report came out as recent as last week. Jamila discussed the following partner treatment programs; Expedited Partner Therapy (EPT) and Concurrent Patient-Partner Therapy (CPPT). There is a law in Oregon for that allows providers to treat the partners of patients that test positive for an STI without seeing their partner, they can write a prescription for that person to give to their partner. This is primarily for EPT and pregnant women. These two partner treatment therapies have been very effective in preventing re-infection. All of the people that were not being treated correctly were from private practices. Jamila discussed through graphs where all of the STI's are happening. Most Chlamydia and Gonorrhea is in North Salem and Keizer. If they are not being treated and tested frequently it can be spread. A question was asked if this data had been compared to the data the police department has for prostitution and if there is any correlation with those rates. Jamila reported that she has not but will look into it. Marion County residents who are high risk are Men who sleep with men (MSM), people under the age of 25 and drug users. With all of this information Jamila developed a provider survey to find out more information on what is going on. Jamila received 82 survey responses, 73 via fax and 9 via internet survey.

The following Provider Survey questions were asked:

1. Are you aware of the new CDC treatment guidelines for Gonorrhea from August 2012?
 - Approximately 30% were not aware
2. How did you find out about the new CDC treatment guidelines for Gonorrhea?
 - Most from CDC, 14 % from Health Department, 13% from State
3. What kind of partner treatment method do you use?
 - Most prevalent is to give patient independence and notifying their primary care physician to let them know they tested positive.
4. Do you retest patients after treatment for STI's?
 - 41% do not retest for infection. CDC recommends retesting.

Jeanne Antonucci reported that as part of the law there is an information hand out that must be given to the partner that is not being seen. Often in the community because of the way systems are set up, if a client is positive or their partner wants to come back in, they're expected to pay, if they don't have the money they will not be seen. Even though the medicine is offered for free, the visit is not. This is a reason people come to the Marion County Health Department. With the cards that we pass out they say if nothing else, have

- your partners come here to the health department because with the ORPHEUS system we can find out if they are a contact case and will automatically treat and test at the same time.
5. How much time after treatment do you perform a retest/test of cure?
 - Most providers try to retest within three weeks after treatment.
 6. Are you aware of Oregon's law on Expedited Partner Therapy?
 - Approximately 42% of providers are unaware.
 7. Have you used Expedited Partner Therapy (EPT) in your practice to treat partners?
 8. What is the best way for the Health Department to communicate with you?
 - Email to Administrative Staff to business account was most preferred.

Jamila will be following up the survey with provider outreach and education including office visits, meetings, presentations, and quick reference posters.

A question was asked if there are multiple partners, are they all treated. Jeanne reported that it depends on if they divulge that information or not but yes, they would treat them. Pam reported that the CDC has a Disease Investigation Specialist (DIS) who is assigned to our county who is bilingual and bicultural to work primarily with the Latino community, but does also go to other counties as well. His focus is on getting information from the community regarding Gonorrhea and Syphilis. The DIS also has access to the ORPHEUS database and contacts the providers. Jeanne reported that there is also an infertility prevention project from the federal government which allows for women who come into contact with a prenatal or family planning clinics to get tested.

A question was asked if providers are open to education, Jamila responded that some providers indicated they found out about the new guidelines from the survey so there is an indication that providers are open to it. A suggestion was made to suggest to providers to do a CDC update, they should get free CME for doing it.

Jamila reported that Gonorrhea is becoming more resistant to treatment and according to the Morbidity and Mortality Rate (MMR) the resistance is due to natural mutation and could become incurable in the future.

Biennial Implementation Plan (BIP) – Scott Richards:

Scott began his presentation by stating that two months ago HAB had a break out on the BIP and focused on the needs assessment. There has been a change on AMH. The new format asks for an actual plan and to identify areas of need or improvement in the needs assessment. Scott handed out the systems overview to HAB members and asked them to review and send any comments they have to Lisa by the end of next week since this piece is due at the end of this month.

There are five major areas to the BIP:

1. System Overview
 - A description of the total Marion County mental health and addictions treatment system
 - Links to areas such as promotion, prevention, early intervention etc.

Change -With integration with CCO now due in July, however with federal block grant there are requirements that are due in the spring.
2. Community Needs Assessment
 - Strengths and areas for improvement
 - Should be integrated effort with health and mental health
3. Transformation Measures – Is new from the State and not something we currently measure
 - Individuals reporting same or better housing
 - Individuals reporting same or better employment status
 - Individuals reporting same or better school performance status

4. Major Components

- System Overview
- Community Needs Assessment
- Strengths and Areas for Improvement
- Performance Measures-Accountability Measures and Transformational Measures
- Budget Information

5. Accountability Measures

- Access-number of people served
- Treatment Service Initiation
- Treatment Service engagement
- Readmission rates
- ITRS-reunited with child in DHS custody

Scott let HAB members know they will be receiving a third BIP report in June.

HAB Member Manuals – Pam Heilman

Pam went through the updated manual with members to see if there are any questions or points of discussion. Pam noted that the briefing paper that one of our county council members created from statutes describing roles and responsibilities was added to the manual. Conflict of Interest training will need to be completed by all members serving on the HAB, instructions are included in the manual.

The chair motioned to adjourn, members voted and approved.

HAB Meeting Adjourned.

Recorder: Lisa Duerksen,
Department Specialist
Marion County Health Department
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Fax: 503-364-6552

2013 Meeting Schedule:

January 15, 2013	June 18, 2013
February 19, 2013	September 17, 2013
March 19, 2013	October 15, 2013
April 16, 2013	November 19, 2013
May 21, 2013	December 17, 2013