

MARION COUNTY HEALTH ADVISORY BOARD  
Meeting Minutes  
June 18, 2013  
5:30 P.M. to 7:30 P.M.

Present: Tim Murphy, Patrick Vance, Mike Mann, Sandra Echavarria, Renee Stewart, Katherine Fleury, Judy Scott

Absent: Sandy Stewart, Rod Calkins, Pam Heilman, Mary Beth Thompson

Staff: Scott Richards, Lisa Duerksen (Recorder)

Guests: Josh Sandeman, Alberto Moreno, John Lukenbaugh

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

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

Sandra asked when the actual accreditation site review will take place, Scott answered that the site review should be happening tentatively October/November and that Pam has to submit her documentation.

Mike Mann suggested future topics of Chronic Disease Prevention/Early Intervention.

**Announcements/Updates:**

**Organizational Structure – Scott Richards:**

At the end of June Sandy Stewart is retiring, Lisa will send the invitation for her retirement gathering to HAB members. Along with that the organizational structure will be changing. As you know, Cary Moller was promoted to a Division Director role and will now be filling a part of Sandy's responsibilities for Developmental Disabilities (DD) services program, Scott will be taking on two programs, Addictions and Children's Behavioral Health (CBH) services. Another change in structure is that Philip Blea who works with children and youth and has been working with Sandy, is now a Team Supervisor.

Patrick reported that Judy had delivered a letter to Patrick that included Mary Beth Thompson's HAB resignation, effective June 17, 2013. The Board voted and accepted her resignation.

**HOPE Coalition – Alberto Moreno, Executive Director, Oregon Latino Health Coalition:**

Alberto is here to represent the Healthy Oregon Partnership for Equity (HOPE) coalition which is a regional public/private partnership of diverse health equity partners that serve constituents facing health inequities in a four county region which includes Clackamas, Marion, Multnomah, and Washington counties. They received funding from the office of equity and inclusion to put together what they are referring to regional equity coalitions, they were lucky to be one of them. They want to focus on and partner with Marion County. They have a number of organizations that include Asian Pacific American Network of Oregon (APANO), Tobacco Free Coalition of Oregon (TFCO), Upstream Health, Oregon Latino Health Coalition and Oregon Action that make up the HOPE Coalition. For the first year funding they essentially talked to all of the partners in the four county region and tried to do an environmental assessment and asked what the challenges are around health equity for many of the communities in this four county region. Alberto spoke to Pam Heilman and some of her staff and were able to get some data and also asked what her primary needs were and what the data was telling her to make sure we could pull in that experience and instill priorities to move forward. The HOPE Coalition now constitutes over twenty

five community organizations, associations and service agencies, health departments and others who have been gracious enough to be in partnership with them. After polling all members, they were able to distill the following health priorities that had common ground across counties, improved data collection, cultural competency and workforce diversity, healthcare access, chronic disease prevention, mental health and substance abuse. While traveling they continue to find the number one and two unmet needs in Oregon are #1 oral health and #2 mental health, which they hope to change with the CCO reform. Since they collected the information, the HOPE coalition went about advocating systemic policy change around those health priorities. They now have successfully passed an improved data collection state bill, it is now law. Alberto reported that they presented Marion County Health Department's (MCHD) assessment and everyone was very impressed with it because MCHD is a smaller health department in the state and were still able to be creative about asking questions on how to take existing data and literature that is already out there and conduct a secondary literature review and draw conclusions from them, and find themes which were very helpful to the HOPE coalition. Everyone was so pleased and impressed they would like to use Marion County as a model. Alberto also reported that they have passed a bill with the state legislature that requires health care providers to receive additional cultural competency training as part of their licensing. The Oregon Latino Health Coalition has been pushing for universal prenatal care for undocumented women, not all women have access to prenatal care. Every year, five thousand women do not have access to prenatal care. Next week they will know if they were able to leverage prenatal care for women statewide. TFCO has been working on the tobacco settlement agreement pushing to make sure some of the money is used for tobacco prevention and cessation. They have not made any significant changes for mental health. The HOPE coalition sponsored HB3407 which they have a hearing on tomorrow. HB3407 is intended to establish a commission for community health workers.

Members discussed cultural competency and mental health. Patrick asked that a possible future topic be, "cultural competency."

#### **Health System/Health Access Assessment – Patrick Vance:**

Patrick presented the PowerPoint presentation on behalf of Pam.

- The Top five health concerns in Marion County – In 2008, lack of health insurance, cost of care/insurance, lack of providers taking OHP and access to mental health care, in 2011 the top five health concerns were cost of care/insurance, obesity, substance abuse, diabetes, and mental health. Responses showed increasing concern about health conditions such as obesity and access issues such as cost of health care and health insurance which continue to be a concern for Marion County residents.
- All ages in poverty – The percentage of the population living in poverty between 1995-2011, when the last numbers were available. The real issue is that Marion County sort of follows the nation and Oregon on the chart but it spikes in 2005-2011 and has a sharper rate of increase, while Polk County actually dipped. This was also discussed at a different meeting and the feeling at that time was it was because between 2005-2011 the recession hit and there was out migration in Polk County and that may account for why, when you ask the remaining population, there are fewer people in poverty because the people who were really poor had to leave the area at that time. The percent in population dropped but it is an artifact of migration, not an artifact of people getting high paying jobs. The US government sets poverty thresholds that consider family size and income and is adjusted annually for inflation using the Consumer Price Index. HRSA says living at 200% of poverty is a barrier to accessing care. People below the 200% federal poverty level between 2007-2011, in Marion County were 40.2% and Polk County was 31.6%.
- Persons with Health Insurance, 2011 estimates – People with health insurance with children hovers around 90% and adults with insurance 80% and in Marion County it is approximately 70% meaning there are 30% of adults who are without health insurance and approximately 9% of children without health insurance. We are consistent with Oregon for Children but with adults is another matter. Insured rates for children are similar to Oregon. Marion County adults are less

likely to be insured and this is partly related to larger migrant and low income populations compared with Oregon. The Healthy people 2020 target is for 100% of people to be insured.

A question was asked if this includes incarcerated persons. Patrick answered that if you take a census of all males which would include the male population in the prisons and jail that would be the base population, then you would take the number of males with insurance you would be overstating by the amount of incarcerated males.

- Adults who have someone that they consider as their Own Personal Doctor – There are three different charts of data, the most recent one being 2006-2009 but to note that Marion County is higher and Polk County is much higher which was not completely understood, the perception to have from this is that Polk County residents are more likely to have a personal doctor. The counties are significantly different in comparison to Oregon. Tim added that he would object to this kind of question because people with Kaiser insurance do not have a personal doctor and would like better clarity of this question.
- Can you see a health provider when you need to for: Eye, Medical, Prenatal Mental Health and Dental. Woodburn is an underserved mental health area but all others are similar. Persons living in Silverton report better access in every category, which may be tied to higher overall income and having health insurance. The Survey did not ask about alcohol and drug services.
- Children’s Satisfaction with Care and Timely Access – Measure: Two question composite for both received help/info. And care in a timely manner. Among those Medicaid, children are more likely than adults to receive timely care. The Oregon Health Authority’s most recent baseline data (5/16/2013) focuses on timeliness of care. Responses for adults and children are combined and averaged resulting in the following baseline. 10% of children only sometimes receive timely care.
- Adults Satisfaction with Care and Timely Access – Numbers are consistent. In May 2013, Developmental Disability providers described delays of 30+ days in accessing timely, non-emergent appointments for clients.
- On a scale of poor to excellent, how would you rate your community on “access to public transportation”? – North County service provides transport from home (20 mile radius) to Silverton Health medical appointments M-F. Local bus services in Salem M-F, Silverton M-Sat., Stayton, none, Woodburn M-F, Inter-City bus service – CARTS – Trip link offers non-emergent medical transport 24/7 by appointment. Patrick added if you live in Salem, it is not easy to get somewhere by bus and it is not convenient. Patrick asked if there were volunteers in Stayton running transportation. Renee answered that there is the Gates CARTS service that only goes to the state offices one time a day, it also stops at Safeway in Stayton and the grocery store in Mill City and then back to Gates at the end of the day.
- Health Literacy – The ability to read, understand and act on health information. 65% of American adults have intermediate to proficient health literacy skills. Low literacy skills cause increased risk of hospitalization. The estimated cost of U.S. health care system is \$106-\$238 billion dollars annually by people not being able to follow basic written instruction and basic access information. Risk factors for low health literacy include being elderly, low income, unemployed, did not finish high school, member of a minority or ethnic group, recent immigrant to the U.S. who do not speak English, and/or born in the U.S. but English is not their first language. This information comes from a study done in 2007 by B. Weiss. Signs that health literacy might be a problem include: patient registration forms that are incomplete.
- Children with Special Needs – A problem in Marion County is the recent closure of the Easter Seals program. Easter Seals was taking care of approximately 250 special needs children who have recently been sent to other community resources for services due to this

closure. Marion County was able to step in and find new services for all but one of those children. The loss of these resources adds another layer of complexity to the existing resource.

Tim added that there is an effort in the community to find a provider to pick up the services of post partum depression that Easter Seals was also providing. Three providers have said they are interested. They need to find someone to step in by June 27.

- Mothers Who Received Early Prenatal Care – The healthy people 2020 goal is to have 80% of mothers receive prenatal care. In 2006-2007 Polk County and the State of Oregon were close to that goal, Marion County was probably three points below that. When the economy sunk, everyone's percentage dropped. Early prenatal care means that care was started in the first three months of pregnancy. Many women who don't have access to early care are not eligible for OHP. An incentive measure for the CCO is the Marion-Polk Prenatal Project that provides care to uninsured women. Oregon Mothers Care provides referrals and assistance with OHP application so women can get into care as soon as possible. Salud also has some targeted programs to try and work with the high risk.
- Discussion – Strategies for the health care system: A question was asked, if access to transportation is improved would access to care be improved as well? Patrick responded that there has been discussion at the last CCO meeting. There are people who can not make it to their appointments because they do not have a ride. Tim added that when the city bus stopped transportation on Saturdays, BRS closed their doors on Saturdays because they were so greatly affected. Mike asked if there is a dollar amount of the impact it has made in Marion County by not having bus service on Saturdays. Patrick does not have a dollar amount but believes that number will be high. Scott asked if there are other questions we should be asking. Mike asked, is there an estimate for cost savings. Patrick added that the system is still holding on to fee for service.

#### **2009-2011 DD Biennial Carryover Report – Scott Richards:**

Currently DD does not have an advisory board so it is assumed under the HAB. The state reconciled the 2009-2011 biennium, the bottom line is that we ended up with a surplus of money that can be used as unrestricted reserves. The HAB needs to approve Patrick signing as the Chair of the advisory committee on the Carryover report. Patrick motioned that he sign on behalf of the board, members voted, motion carried, HAB members approved, Patrick signed the report.

#### **Other Business:**

Patrick asked Josh Sandeman if he would be interested in joining the HAB, Josh stated that he is still interested in being appointed as a HAB member. Patrick motioned to recommend that Josh be appointed to the HAB by the Board of Commissioners, members voted, motion carried and members approved.

Josh added the following comments, in terms of access to care, patients are telling him that they find it difficult to even get primary care providers because those providers do not want to treat people with chronic pain or mental health issues. Josh also has a friend who is a psychiatrist living in Los Angeles who has slowly developed a home visit program, where they visit mental health patients, they give them depo injections of their medications so they are stable for longer periods of time. This has really helped their population and Josh is interested in trying to get her to come to a HAB meeting in the future.

Tim reported that four years ago Marion County loaned money to BRS, earlier this month the loan was paid back in full at a presentation to the Commissioners. It was Rod who took the chance and deserves all the credit for that.

Patrick announced that we will not be meeting in July or August. The next meeting will be in September. At our September meeting Commissioner Carlson has asked to be a part of a presentation regarding health services for persons' re-entering after incarceration. Tim announced that tomorrow they will be talking about re-entry with the federal delegation and Commissioner Carlson. Marion County accepts 30-40 inmates per month.

Patrick added that HAB members should also think about recruiting with Mary Beth's resignation.

Tim added to check out the "Salem for All" website that Mike Mann has created, accessing the arts community to impoverished folks in the community.

The chair motioned to adjourn, members voted and approved.

**HAB Meeting Adjourned.**

**Recorder:** Lisa Duerksen  
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**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