

Statewide Healthcare Innovation Plan Region 1

- Benewah County
- Bonner County
- Boundary County
- Kootenai County
- Shoshone County

Region 1 SHIP Regional Collaborative

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RC/PCMH Meetings

Best Practices, QI & Medical Health Neighborhood Topics

- Best Practices in reducing hemoglobin A1C levels in patients with diabetes – Nancy Carpenter RD, CDE
- Opioid Prescribing Best Practices – Sharilyn Kidder & Renate Tomaselli, Marimn Health
- Fit and Fall Proof – Alicia Keller, PHD1
- Idaho Health Data Exchange & Data Analytics – Casey Moyer & Burke Jensen
- Community Health EMS – Mary Sheridan
- EMS Regional Information – Bill Holstein
- Kootenai Recovery Center – Katie Schmeer, Director
- Opioid Prescribing Best Practices – Dr. Whiting, Heritage Health
- Nutrition and Diabetes Resources – Natale Colla, RDN, LD
- Medical Health Neighborhood, Kootenai Integrated Network's Gap Analysis – Casey Meza
- Opioid Prescription Reduction Program– Kelsey McCall, PHD1
- Community Health Assessment – Tina Ghirarduzzi, PHD1
- Healthy Connections – Donna Colberg & Meg Hall, Medicaid
- Virtual PCMH/Telehealth – Madeline Russell, SHIP Project Manager
- Children's Mental Health Resources– Lynn Thompson, Hub Chief of Children's Mental Health IDHW
- Diabetes Education & DPP– Rick Stimpson, PHD1
- Florida Varnish Best Practices– Dr. Ukich
- CHEMS Program Best Practices – Mark Babson
- Integrating Community EMS into Medical Home– Jason Creamer
- Pediatric Medical Home Grant – Rick Stimpson, PHD1

CHEMS GRANT

<i>CHEMS Home Visits Referred by PCMH</i>				
Monthly / Qtrly	Number of Home Visits	Total Number of Patients on Caseload	Number of Patients on Caseload seen in ER	Number of patients on caseload with a readmission within 30 days of discharge from Hospital
May-17	5	3	0	0
Jun-17	4	1	0	0
Jul-17	1	2	0	0
Aug-17	0	0	0	0
Sep-17	1	1	0	0
Oct-17	1	1	0	0
Nov-17	2	1	0	0
Dec-17	0	0	0	0
Jan-18	0	0	0	0
May-July '17	10	6	0	0
Aug-Oct '17	2	2	0	0
Nov '17- January '18	2	1	0	0

Regional Collaborative 2



Chairs and Co-Chairs

- Dr. Glenn Jefferson, Valley Medical Center
- Dr. Kelly McGrath, Clearwater Valley Hospital and Clinics
- Carol Moehrle, District Director
Public Health – Idaho North Central District

Members

- Clearwater Valley Hospital and Clinics
 - Orofino Health Center
 - Kooskia Medical Clinic
 - Pioneer Medical Clinic
- St. Mary's Hospital and Clinics
 - Cottonwood Medical Clinic
 - Kamiah Medical Clinic
 - Grangeville Medical Clinic
- CHAS
 - Latah Community Health
 - Lewis & Clark Health Center
- Valley Medical Center
- Clearwater Medical Clinic
- Syringa Hospital and Clinics
 - Grangeville Primary Care Clinic

Regional Collaborative 2



- Accomplishments:
 - Link cohort 1 clinics with cohort 2 clinics to provide a mentoring partnership.
 - RC continues to be a safe space for clinics to share best practices without the competitive culture of healthcare.
- Unique about RC2:
 - Continue to support all cohort clinics and include them in best practice sharing.
- Value in Continuing RC:
 - Best practice sharing.
- Challenges & Barriers:
 - Can only use regional CHNA data so much.
 - Clinics had hoped to be able to watch the needle move as they implemented PCMH.
 - Lack of real time regional data for the clinics to measure progress.
- Sustainability:
 - Clinics/RC members are waiting for the outcome of the RCO's before deciding to commit time and continue with an additional group.



SOUTHWEST HEALTH

COLLABORATIVE

*Adams, Canyon, Gem, Owyhee, Payette
and Washington Counties*

Rachel Blanton

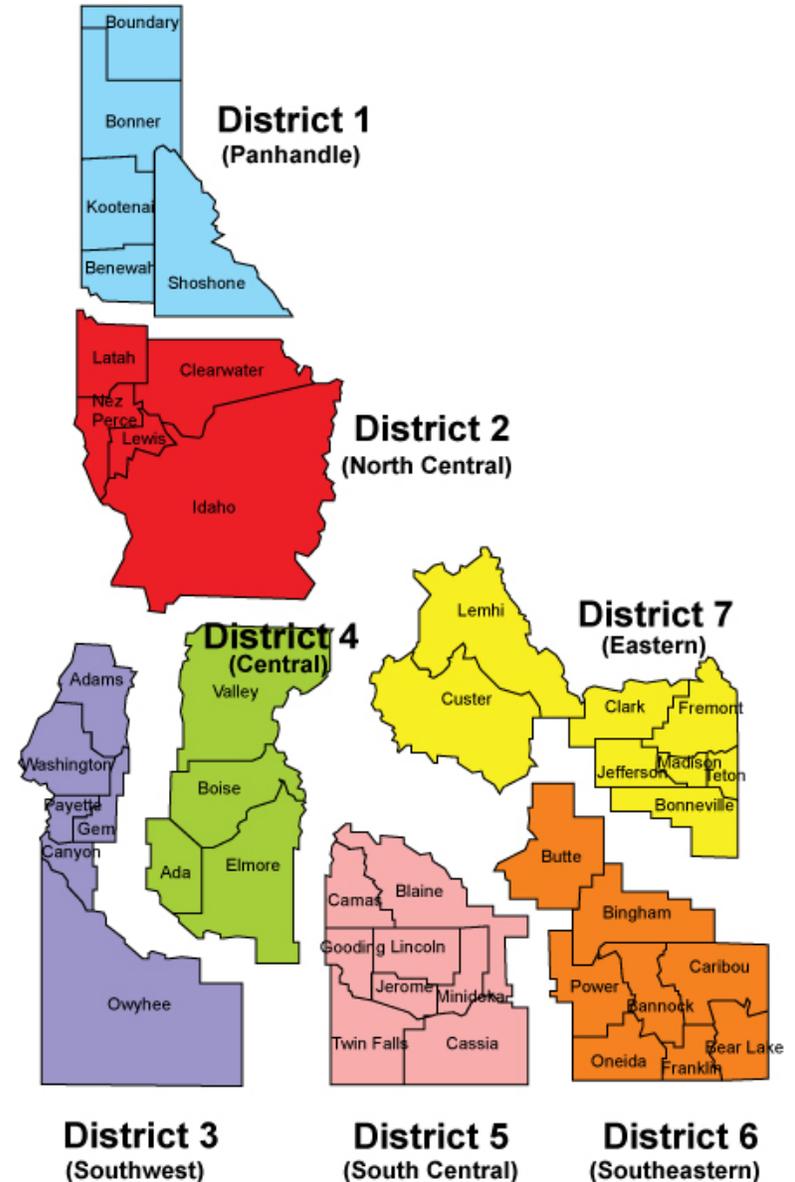
The Southwest Region and the Southwest Health Collaborative

The Southwest Region

- Adams, Washington, Gem, Payette, Canyon, and Owyhee Counties
- Mix of rural, frontier, and urban
- Some of the worst health indicators in the state (diabetes, obesity, poverty)

Southwest Health Collaborative

- Work closely with the Central Health Collaborative and Central District Health Department
- Organized into workgroups based on focus areas identified in CHA
- Each workgroup has a clinical and a prevention focus



Barriers

Aligning with
other
initiatives

Overreliance
on the PCPs as
drivers

Lack of data

Identifying
focus

Continued
engagement

Accomplishments

Data from dental pilot (approximately 40% of patients seen in pilot dental sites report not having primary care)

Embedding behavioral health in local schools as a demonstration (50 kids per week are getting specialty BH services)

Facilitating co-management agreements between primary care and behavioral health

CHEMS resource referral project

Diabetic eye exam partnership

Care coordinator directory

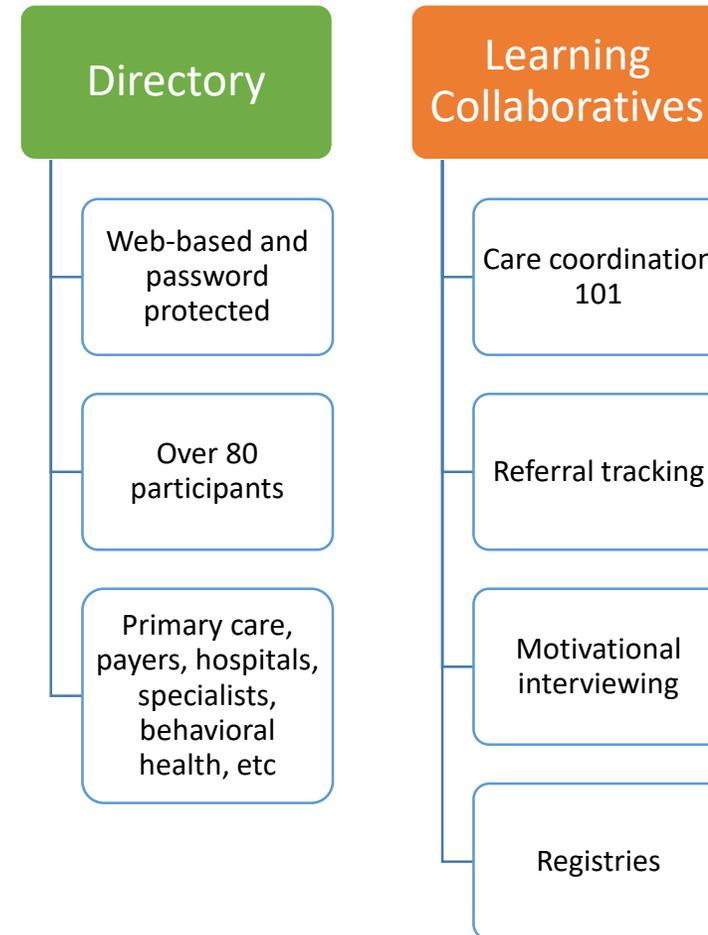
Community Health Assessment

Network development

RC Grant-Care coordination

Need:

- Professional development for care coordinators
 - What is care coordination?
 - What is the right level of staffing?
 - How do you design a program?
- Regional network for care coordinators to manage care transitions as patients move from one setting to another
 - Who is the quarterback?
 - Who do I call at SLHS Boise NICU? Adams County Health Center? Lifeways Fruitland?



Sustainability and post-SHIP



Forum for
MHN work

Workgroup
activities

QI
coaching



SHIP Updates Region 4

Melissa Dilley MHS, CHES
SHIP Manager

Region 4



Central Health Collaborative

Communicate

Educate

Innovate



**CENTRAL
HEALTH** *Collaborative*
Ada, Boise, Elmore & Valley Counties

Central Health Collaborative



PCMH Transformation Support



Medical Health Neighborhood



Communication & Advocacy



Population Health

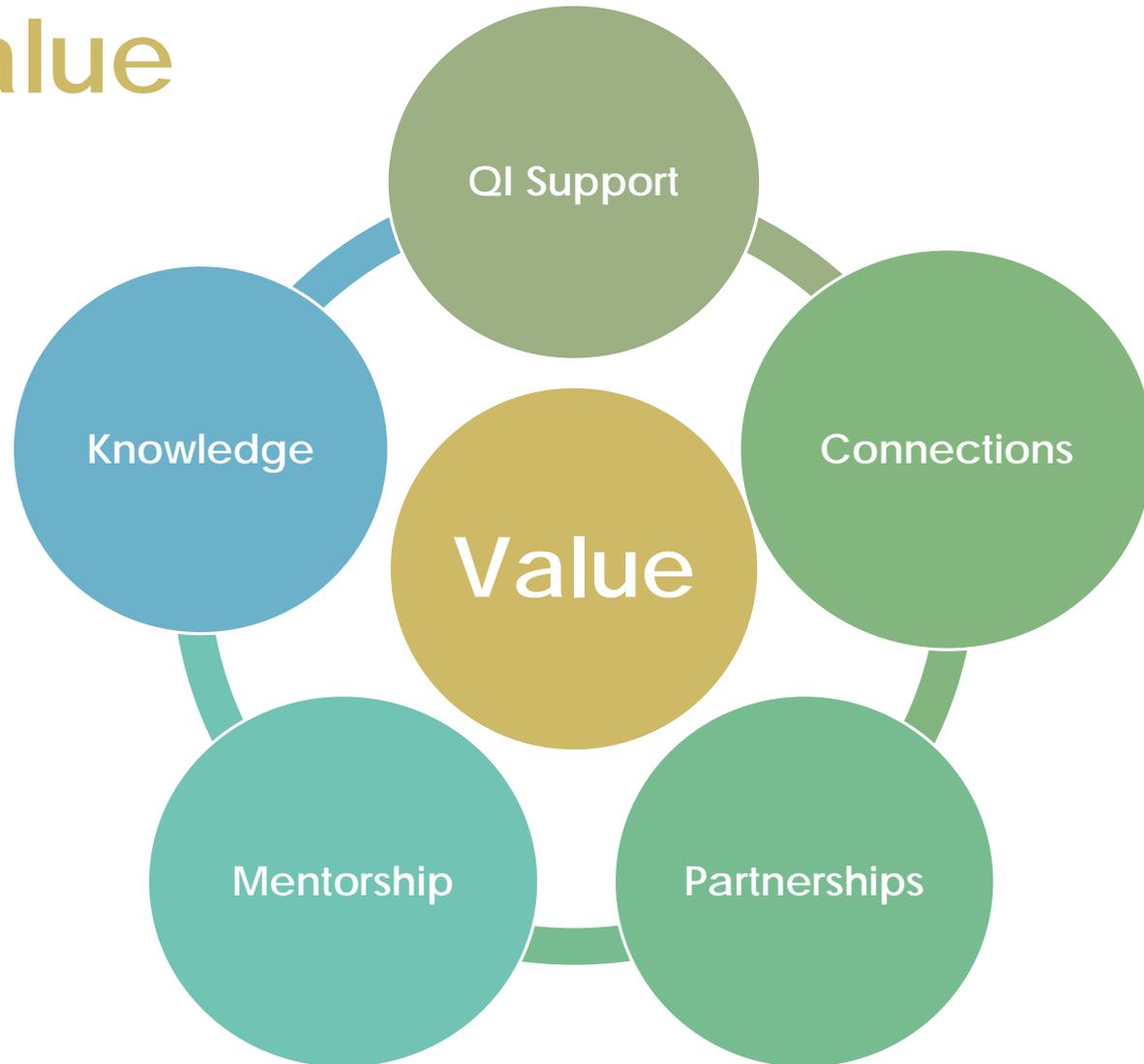


Sustainability

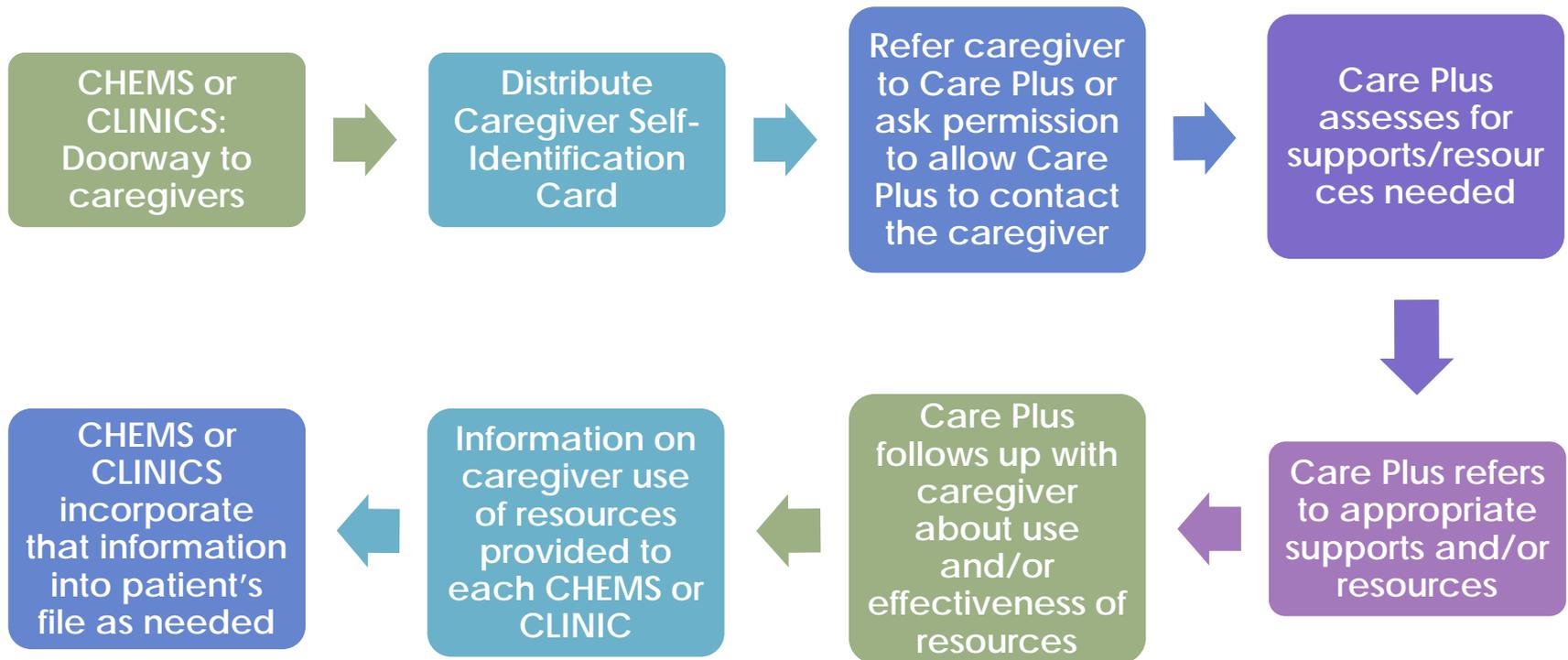


**CENTRAL
HEALTH** *Collaborative*
Ada, Boise, Elmore & Valley Counties

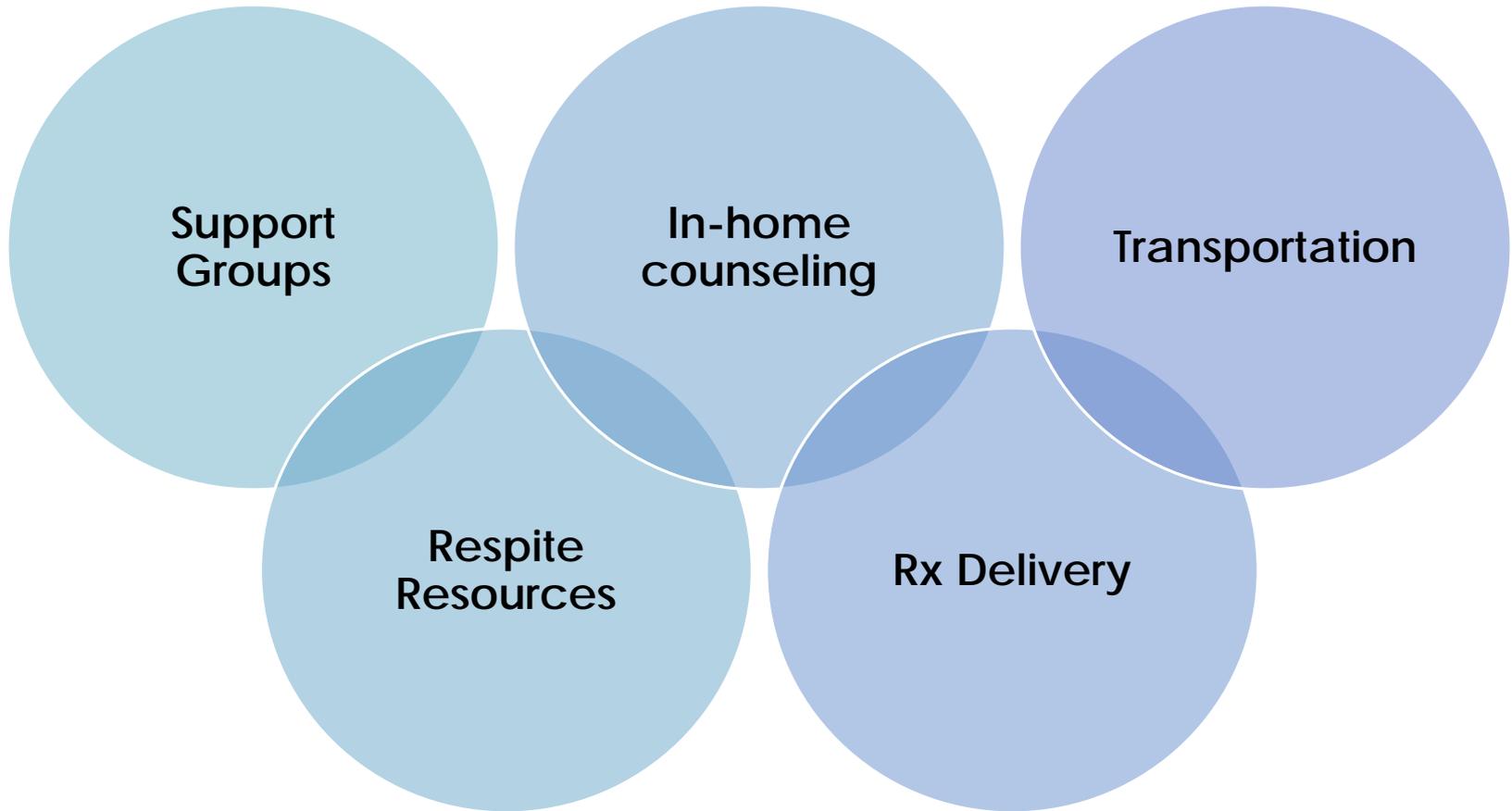
Value



RC Grant: Caregiver Integration Project



RC Grant: Caregiver Integration Project



SHIP Networking Event: Coordinating Resources Across the Lifespan

- Speed Networking & Resource Sharing
- Community Organizations – 34
- Registered Attendees – 65
- Connections Made – Over 400

“I made a lot of new and I believe important contacts. For my money it was well worth the time and investment and I hope that I can continue to participate with your team in future collaborations.”

– Mike Denny, Idaho Rx Card District Manager



Questions?



- Contact:

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<https://centralhealthcollaborative.com>



South Central Health Collaborative SCPHD

Executive Committee

Dr. Keith Davis, Shoshone Family Medical Center

Dr. Steven Kohtz, St. Luke's Magic Valley

Melody Bowyer, PHD 5 District Director



Public Health
Prevent. Promote. Protect.

Idaho Public Health Districts

Current Status

Success

1. Increased and ongoing collaboration
2. All cohort clinics contribute and provide feedback
3. Commitment towards PCMH has not changed
4. Supported the development of PHD 5 Community Resource Manual

Challenges

1. Consistency of attendance
2. Data
3. Sustainability when funding ends

Value and Moving Forward

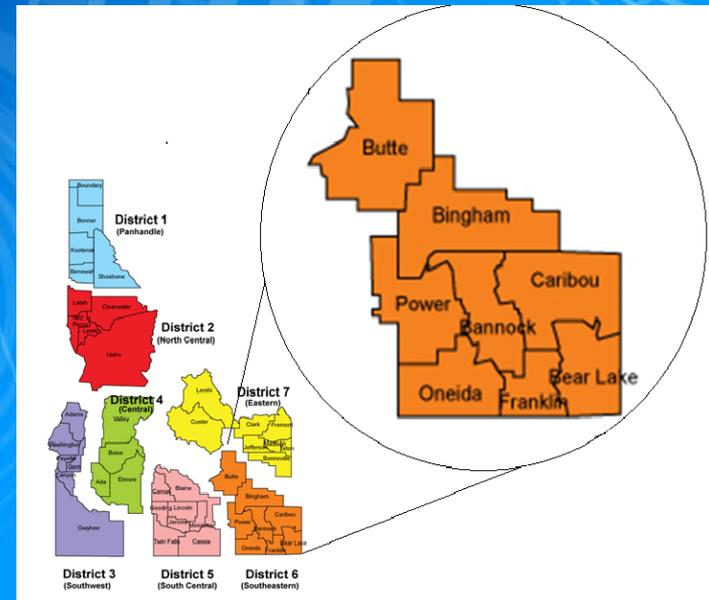
Appreciate having a neutral location to support collaboration and SHIP efforts

Convening to discuss PCMH transformation success & challenges

Knowing there's a mechanism to ask questions and gain feedback from peers across the state

SHIP Region 6 Updates

Rhonda D'Amico, SHIP Manager



Suicide Prevention Regional Collaborative Grant:

Regional Suicide Prevention Symposium on 9-14-17 at Idaho State University

- Columbia Suicide Severity Rating Scale (C-SSRS) **205 attended**
- WICHE Toolkit for Primary Care Practices **130 attended**
- Idaho's Suicide Prevention Program: *Suicide in Idaho: The Problem, The Solution, and You*
- Joint Mayoral Proclamation/Rock Your Role Campaign
Project ChildSafe

Who attended?

Healthcare

Alliance Hospice

Bingham Memorial Hospital (SHIP)

Bear Lake Memorial Hospital

Eastern Idaho Regional Medical Center

Health West, Inc. (SHIP) (9 FRP staff)

Heritage Health Services

Logan Regional Hospital

Physicians Immediate Care Center (SHIP)

Portneuf Medical Center

Portneuf Primary Care & Behavioral Health (SHIP)

Portneuf Quality Alliance

Behavioral Health

Behavioral Health Center at Eastern Idaho Regional Medical Center

Behavioral Health Crisis Center of East Idaho

Behavioral Treatment Center

Center For Wellness/ Mountain View Hospital

Counseling and Family Services-Shoshone Bannock Tribes

Hope and Recovery Resource Center

Lotus Counseling Services, LLC

Mental Wellness Center of Idaho

Physician's Mental Health Services/Mountain View Hospital

Portneuf Medical Center Behavioral Health

Priestley Mental Health

Rehabilitative Health Services

State Hospital South

The Psychology Center of Idaho Falls

Who attended?

Education

- American Falls School District #381
- Blackfoot School District #55
- Bonneville School District #93
- Pocatello/Chubbuck School District #25
- Snake River School District #52
- Idaho State University
- College of Eastern Idaho
- Gonzaga University

Community/Family Services

- Aspire Human Services
- Bannock Youth Foundation
- Community Partnerships of Idaho, Care Plus
- Idaho Lives Project
- Independent Living Specialists
- LDS Family Services
- Portneuf Valley Family Center
- Reach Beyond
- Suicide Prevention Action Network of Idaho (SPAN)

Who attended?

Governmental/Quasi-Governmental/Others

Area V Agency on Aging

Bannock County

Department of Health and Welfare

DHW Region 6 ACT Team

Glocom- Idaho Army National Guard

Human Development Center, H & W

Idaho Dept. of Corrections

National Guard Bureau

Optum

Qualis Health

Region 6 Regional Behavioral Health Board

Southeastern Idaho Public Health (66)

State of Idaho, Dept of Health & Welfare Medicaid Healthy Connections

Suicide Prevention Program-DHW

C-SSRS Evaluation

- 158 Survey Participants (205 attendees)
- 5 questions with agree/disagree response options.
- 1 open-ended question for feedback on the symposium

WICHE evaluations in process

C-SSRS Evaluation

- Because of this training, my understanding of suicide risk assessment has improved. (Knowledge) **97%**
- I am better prepared to address suicide risk because of this training. (Competence) **95%**
- I am more confident about my ability to help someone at risk for suicide because of this training. (Confidence) **91%**
- Because of this training, I am more willing to conduct a suicide risk assessment. (Willingness) **88%**
- I will be able to apply my new skills at work. (Applicability) **90%**

Question 6

- Please provide any other comments you would like to share about the Regional Suicide Prevention Symposium.
- Answered: 90 Skipped: 68
- “Glad there is evidence-based assessment risk tool for suicide that appears to be of practical, realistic use in a clinical setting.”
- “...it was shocking to me how high the suicide rates are here in Idaho and the city of Pocatello.”

Question 6

- “I believe Idaho should adopt the tools in this seminar across the state to help bring the suicide rate down.”
- “Loved all the resources provided and the video examples to see what the assessments and plans look like in practice.”
- “...I have quite a bit of experience in suicide assessment, but learned some new things. Would recommend.”
- “I appreciate this training as a tool for people I work with but also for my own social circle/family.”

WICHE Toolkit Training Evaluation

Results: Several significant findings support the usefulness of the Toolkit Training in changing healthcare provider attitudes about addressing and treating patients with suicidal thoughts. These findings are presented below:

At post-test, respondents *agreed* significantly more strongly with:

1. “I have sufficient training to assist patients who are contemplating suicide”
2. “I feel comfortable discussing suicide with my patients”
3. “Implementing a suicide prevention program in my clinic/setting would help reduce suicide in my community”

Respondents *disagreed* significantly more strongly with:

4. “If a patient experiencing thoughts of suicide does not acknowledge the problem, there is very little that I can do to help”



Southeastern
Idaho Public Health

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Eastern Health Collaborative

Executive Team

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Dr. George Groberg, The Pediatric Center

Geri Rackow, District Director-Eastern Idaho Public Health

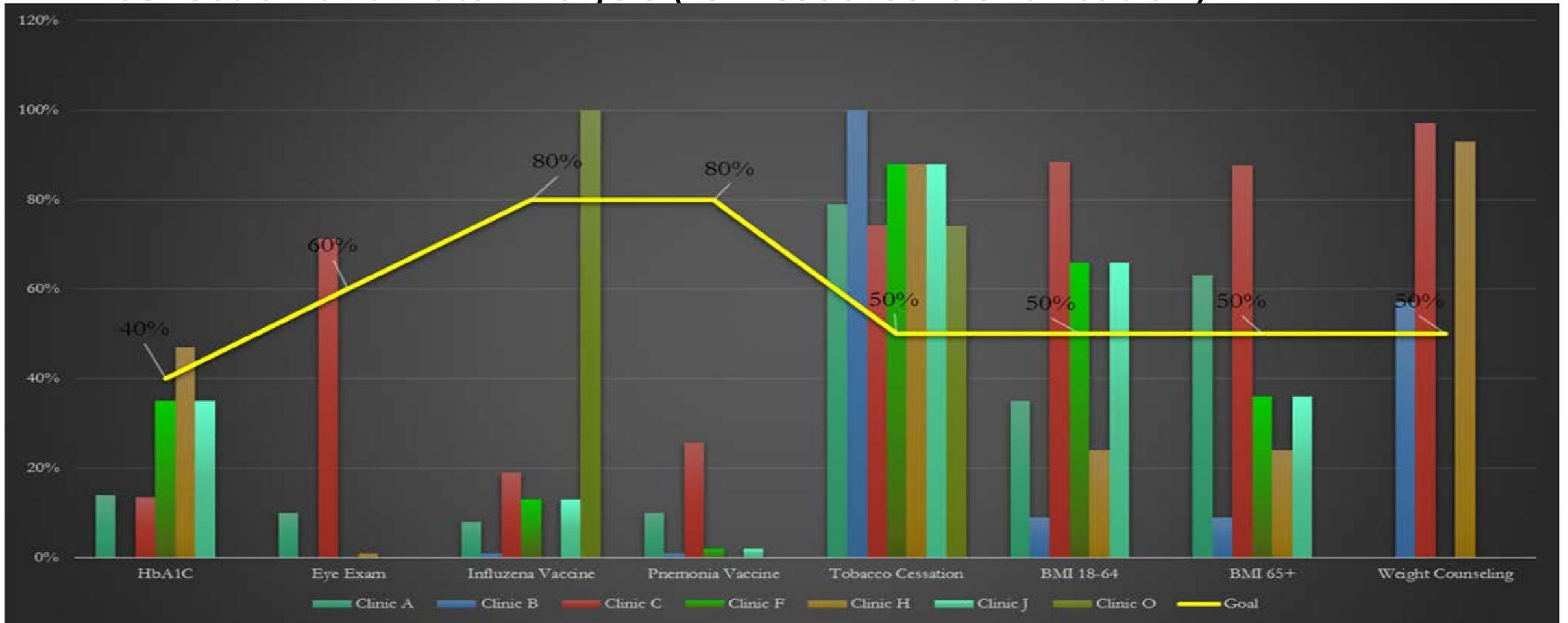
Focus

- Support Practice in PCMH Transformation
- Develop Medical-Health Neighborhood
- Improve Health Outcomes
- Communicate Regional Efforts
- Quadruple Aim



Accomplishments

- Clinic Collaboration and Resource Sharing
- Collection and Data Analysis (for resource identification)



Barriers and Challenges

- Data
- Initiative Fatigue
- Payment Models

Moving Forward

- Collaboration and networking between clinics
- Empowerment of clinics (care coordinators) to look outside of clinics for solutions