

Behavioral Health Integration Sub-Committee

Minutes

February 10, 2015

9:00 am -12:00 pm

450 W. State 3A

Time	Topic	Presenter	Notes
9:00-9:30	Welcome and Introductions	Ross Edmunds/Dr. Baron	-Introduction of members in attendance: Co-Chairs: Ross Edmunds and Dr. Andrew Baron. Denise Chuckovich, Greg Dickerson, Dr. Charles Novak, Sarah Woodley, Matt Wimmer, Heidi Traylor, Mary Sheridan, Claudia Miewald, Bruce Krosch, Dr. Winslow Gerrish, Yvonne Ketchum, Russ Duke, Becky diVittorio, Dr. Mark Bondeson, Dr. Jeralyn Jones, Gina Westcott. -Not in Attendance: Bobbi Matkin -Ross, in his opening remarks stressed the importance of Behavioral Health/Primary Health Integration due to the poor health and mortality outcomes of individuals with chronic mental health issues. Dr. Baron shared that Terry Reilly Health Services is currently engaged in BH/PH Integration. -Other opening remarks from other members: Claudia stressed the importance of the committee needing to look at the downstream effects of lack of integration and that her community has been having conversations about this issue. Becky reported that her focus is on helping people live healthier lives and is excited about where Idaho is going with BH Integration. Bruce reported that in District 3 their vision in PH is for BH/PC integration. Tami shared that her clinic is looking for ways they can integrate Primary Health into their practice or partner with another organization.
9:30-10:30	Introduction to SHIP	Dr. Ted Epperly and Denise Chuckovich	-Ross introduced Dr. Epperly, he and Denise Chuckovich Co-Chair the Idaho Healthcare Coalition. -Dr. Epperly provided the committee with an overview of the SHIP, explaining its origins; the 7 Goals of SHIP and the 3 Aims (see attached The Idaho State Healthcare Innovation Plan).
10:30-11:00	Regional Collaborative	Mary Sheridan	-Mary provided the committee with a Regional Collaborative Overview (please see attached document).
11:00-11:30	BH Integration Sub-Committee Charter	Gina Westcott	-Gina reviewed the Draft Charter (see attached) with the committee, request that the members review the document and propose any changes or additions via email. -Gina also posed the following questions to the committee with respect to our committee's charge. 1. How do we integrate Behavioral Health and Primary Health? 2. How can we assess current practices in PCMHs? 3. Where are we at in Idaho with Behavioral Health/Primary Health Integration? 4. How do we measure it? 5. How can we support PCMHs in achieving Behavioral Health Integration? How can we support culture, communication, training, models? 6. What are the barriers to integration? Gaps? 7. What recommendations would we make to IHC with respect to measures of success, incentives? 8. Who can we learn from here in Idaho and from other states?
11:30-11:45	Introduction to Levels of Behavioral Health	Gina Westcott Dr. Andrew Baron	-Gina provided a brief overview of the 6 Levels of Collaboration/Integration (see attached document). Dr. Baron spoke to the use of the IPAT (see attached) in the TRHS Clinic. Heidi reported that she liked using it due to its simplicity.

	Integration		
11:45-12:00	Tasks/Next Steps	Ross Edmunds	<p>-Ross proposed that the committee meet monthly over the next several months. The committee concurred.</p> <p>-Dr. Baron stressed the importance of using each meeting wisely and to develop concrete action steps. He invited the members to provide ongoing feedback as to the meeting's effectiveness and use of time.</p> <p>Action Items:</p> <p>-Ross and Dr. Baron will review the options for the next meeting date, on or about one month from now.</p> <p>-The committee will work with other subcommittees to develop a process for ongoing collaboration, ensuring consistency and uniformity in planning and recommendations. Gina will review the current membership committee lists of the 6 other IHC sub-committees and look for cross membership gaps. Additionally, the Co-Chairs work with other subcommittees to develop a process for ongoing collaboration, ensuring consistency and uniformity in planning and recommendations.</p> <p>-Committee members will provide feedback regarding the Draft Charter 5 days prior to the next meeting.</p> <p>-Gina will speak with TRHS, FMRI and the VA about providing the committee with a brief presentation on their Behavioral Health Integration indicatives/models.</p> <p>-Gina will send out meeting minutes within 7 business days of the end of the meeting.</p> <p>-Gina will make corrections to the membership list and add any additional contacts for distribution at the next meeting.</p>