

## **Continuity of Care Committee (Transition of Care Committee) Minutes**

Zoom Meeting 9/18/19

Attending: Amber Ziring, Annette Marcus, Galli Murray, Gary McConahay, Jerry Gabay, Jonathan Rochelle, Julie Magers, René Smith Sumpter, Tanya Pritt.

Absent: Julie Scholz, Kristi Nix, Stephanie Willard

### **Accomplished Actions:**

- All members confirmed review of revised committee description. All members expressed support for this revised description.
- Reviewed Actionable Projects identified on Meeting Agenda.
- Julie requested Committee Members share their interests and/or how they are connected to the 4 Actionable Projects or describe what they are doing to further this work. She noted the importance of the Committee being group-minded.
- Julie motioned that the Jonathan introduce the Committee to a tool that could help the Committee to prioritize the 4 Actionable Projects.
- Jonathan described the Fishbone diagram and how it can be used to
- Jonathan emailed the Committee the Fishbone Diagram Template and the Directions on how to use the Fishbone Diagram for Root Cause Anyalsis. (see attached).
- Jerry suggested that the Committee consider/discuss increasing the length of the monthly meetings.

### **Future Actions:**

- Galli will forward revised committee description to the Executive Committee.
- Galli will post revised committee description following approval by Executive Committee.
- Danielle Myers with the Oregon Association of Hospitals will be invited to attend future Committee meeting.

- Committee Members will identify if they have contacts at any of the hospitals that may aid in the committee efforts.
- Jerry proposed that the Committee consider how the Alliance may be able to motivate the hospitals and possibly OHA to meet the requirement of making hospital discharge procedures/policies publicly available.
- Jerry identified the need to obtain an update on the current status of the brochure which makes those hospital requirements available.
- Committee will discuss the possibility of lengthening the monthly meetings from 1 hour to 90 minutes-2 hours.
- Galli will host next Committee monthly meeting in Oregon City on 10/16/19 (Gary & Jerry will be unable to attend).
- Jonathan will meet with the Committee in person at the October meeting and lead the members through using the Fishbone Diagram.

**Committee members related interests/work:**

Amber works with the Oregon Pediatric Group. She previously worked at Youth Villages where they saw youth in ERs, tried to make connections to assist youth in safely transitioning to care. Experienced difficulty with people calling back. Interested in supporting Pediatricians in this work.

René works at Moda Health in the Behavioral Health department which has a focus on ensuring youth who have been psychiatrically hospitalized have a follow-up appointment with a Mental Health Outpatient Provider within 7 days of discharge. Experiences how this isn't always successful and that frequently individuals face the barrier of there not being access to providers due to full practices.

Jerry noted legislation calls for post-hospitalization appointments within 7 days of discharge or the hospitals are required to document the reason for failure to do so. He is working on project for hospital systems, public school districts, and colleges to establish formal means to communicate and what resources they can bring to that effort. Stressed the importance of this communication. Shared example of how a decade ago the University of Oregon had two licensed therapists who could provide college students with follow-up appointments within 2 days of discharge. However, the hospitals weren't aware of this and mistakenly thought they couldn't get an appointment until a month out.

Tanya manages chemical dependency treatment programs and has hired mental health supports within these treatment settings. They are able to tap into aftercare resources. They are on hand for local hospitals who encounter individuals with active substance abuse issues.

Galli noted there are multiple transitions of care happening in Clackamas County. They are working with Providence Willamette Falls ER to provide youth with connections to urgent mental health clinics or outpatient providers. They are making referrals to wraparound teams. They are working on how to identify when someone is at risk and develop a suicide taper plan pathway. They have trained the staff at least 2 schools and 1 law enforcement group. They have a lot of opportunity to influence the current system of care.

Gary noted that with suicide prevention even small contacts and follow-ups mean a lot. He noted that Columbia Care has had the opportunity to provide care across OR the state. They have developed an 18-24 year old young adult transition program.

Jonathan noted his interest in the implementation of program interventions and protocols that can be used to measure high variance in outcomes; how entities may share the same goals but have very different outcomes; and how to assess and ensure fidelity of actions.

Annette identified her efforts in linking together the efforts of the Alliance's various Committees. She noted that the Schools Committee seems to be the most explicitly committed to working on transitions of care – specifically in relation to implementation of SB52.

Julie identified her work to develop the CATS program which would provide a warm and safe transition for youth that are in ER and are basically being boarded there if there is no mental health residential treatment program for them to go to or other treatment option available. The CATS program would offer supports to the youth and family while they are waiting for treatment. She also noted her work with the Adolescent Acute Care Line and how it and the CATS program are both collecting important data that is specific to safe transitions.