



Consumer Advisory Committee

Meeting Summary, March 13, 2018

Support and Backbone Staff: Jennifer Brackeen- *CHOICE*, Megan Moore- *CHOICE*

In Attendance: Kevin Haughton – *Thurston County*, Samuel Silvestro – *Thurston County*, Erin Oly – *Thurston County*, Michelle Richburg – *Thurston County*, Heather Ristow – *Thurston County*, Gary Paul Sweet – *Thurston County*, Doug Levitt – *Pacific County*, Mindy Bergen – *Thurston County*, Freddy Lessenger – *Pierce County*, Bonnie West – *Pierce County*

I. Welcome and Introductions

Jennifer Brackeen welcomed committee members and facilitated introductions. She then reviewed the desired meeting outcomes:

- Welcome and Introductions
- Update on Name Tags
- Discuss Stipend/Check Process
- Review the Swag Bags and Give Feedback
- Provide Outcome of the CPAA Council and Board Meetings
- Review CCE Survey and Results

Jennifer also informed the committee that a candidate has been selected for the Tribal and Community Engagement Liaison position. If the position is accepted, the new candidate will start in early April.

II. Name Tags

Megan gave a brief update that she is collecting the preferred pronoun of each group member, and she will have name tags ready for the meeting in April.

III. Consumer Stipends and Checks

Unfortunately, there was an unexpected check shortage, which caused the checks to be two weeks late. After clarification from the Operations Manager, the checks will be sent out on the 20th of each month and the shortage will not happen again.

The group voiced that an email should have been sent out to keep everyone informed. Some consumers have limited incomes or other financial stresses, so they count on their stipend as a source for basic living needs. The mistake was a process error, and it felt like those stressful factors were not considered.

CHOICE staff acknowledged the feedback, and will not overlook the stress that was caused by the mistake. CHOICE staff will make sure to stay aware and prevent an event like this from happening again.



IV. Article Review

Erin shared an article with the group that highlighted that Lyft in Pennsylvania offered free rides to people who had medical appointments but still did not change the rate of missed medical appointments. The article can be found [here](#).

Erin brought the article to consider ideas for projects that CPAA is considering. Some projects that work, some which may not work, and reasons why. Erin was wondering what CPAA has done to revitalize ideas that had previously failed in other areas.

Group Feedback:

- This is an ongoing effort and CPAA continues to gather data and brainstorm ideas
- CPAA is developing trauma informed care for the bus system to help reduce stigma
- From the article, one group member pointed out that some people did not take free rides because free things are undervalued
- Rural areas could take advantages of Lyft/Uber
- Look at studies nationwide to measure success
- Keep resources within the community instead of outsourcing to bigger corporations
- Some people do not know about the resources offered
- Article does not mention other variables/factors
- Transportation can be intersected into care coordination to make sure the client has transportation
- Incorporate mobile facilities in place for rural communities
- Mobile syringe exchange was very successful while in operation
 - Thurston, Mason, Lewis, Grays Harbor, Steamboat
 - Could be treated as a point of entry to reach underserved populations
 - Much more than a syringe exchange
- Mobile clinics as an option for Maternal and Child Health
 - There is a nurse family partner for newborns; can they incorporate other siblings?
 - Factors for moms to miss their appointments: Not easy to have small children on public transportation, siblings sick, mom stressed
 - Can there be mobile care provided instead?
- Can CPAA look at failure statistics in other states and programs that we are now trying to implement here?

What is the Role of Consumers within CPAA?

The Medicaid Transformation Waiver has 6 programs decided by the council with evidence based strategies, but the programs are still being developed. There is opportunity for consumers to give feedback on the implementation of these projects and help shape them for the Medicaid Transformation.

Michelle attended the council meeting and shared that one of the directors discussed some ideas with the council that the consumers gave, but did not acknowledge/recognize them. She emphasized the importance of trying to build relationships with a group that is commonly underrepresented. Not being



acknowledged is a distrust. Jennifer acknowledged the mistake and emphasized that CPAA greatly values the input from the Consumer Group. Jennifer will work to correct the issue so it does not happen in the future.

V. Provide a Critique of the Swag Bags

Jennifer brought Swag Bags from the WA Health Exchange. The bags are normally handed out to consumers, so Jennifer requested feedback from the group on the items in the bags and where CPAA can improve them.

Feedback:

- Like the idea of healthy items such as a pedometer
 - Would like one that is better quality
- The bags themselves are convenient
 - Would like a bigger bag or waterproof
- Suggest including a wireless battery charger
- Suggest including a double walled reusable coffee cup
- The group really liked the ice pack
- Some like the umbrella/some didn't
- The bracelet links to a smart phone and not everyone has a smart phone
- Include a pen with a stylus
- No stress balls
- Would like to see information on what each health plan covers in a printed form
- Recruitment flyer for consumer meeting
 - Trying to get people from other counties involved

VI. CPAA/Board Meeting

Michelle gave a brief update on the CPAA Council and Board meeting. She was very happy to have oral health acknowledged as the shared learning. Dr. David Meyers is the Dental Director at Cowlitz Family Health Center. He created a presentation on integrating Oral Health with Medical and Behavioral Health. His presentation can be found [here](#).

Jennifer also shared that she has a sheet that identifies medical providers that bill the most for dental on Medicaid patients

- Billing can deny patients for things like anesthesia
- Some providers will not take Medicaid, some billing is denied
- Some have to pay cash out of pocket
- The Consumer Advisory Committee requested that CPAA invite Dr. Meyers to the next meeting

VII. Review CCHE Survey Results

The Center for Community Health and Evaluation (CCHE) hosted a survey that revealed CPAA's strengths, challenges, and guidance for continuous improvement in the new year. Carly Levitz and Lisa



Schaffer presented the data results from the survey that was distributed in December. Those results can be found [here](#).

Feedback:

- Really appreciate the recognition of consumer feedback in the survey
- The survey highlights the importance of reaching out to consumers, but what has CPAA done to make progress?
 - CPAA has created newsletters, attended community forums, created a consumer advisory committee, tribal engagement, all meetings are open to the public, and summaries of all meetings are posted on the CPAA website
- How does this data work for you?
 - Suggestion to create a broader survey to go to more people
 - Create reminders to complete the survey
 - Incentives
- How do we engage more people?
 - The meetings for the advisory committee are during the day; working people cannot be here
 - Go to consumers at food banks, colleges, community services centers, Seamar, etc.
 - Personal engagement and face-to-face interaction
- Organizational Function has a strong correlation to the other categories
 - When it was higher, the other categories are higher
 - If CPAA can improve organizational function, then the other categories will follow
- Need to diversify
 - Noticed that the board and council lack diversity
 - There needs to be an effort to be more inclusive
 - Reach out to the YWCA and other organizations and coalitions that are trying to end racism

Jennifer asked the group what success would look like:

- The new Liaison should survey their demographic
- Engage in organizations that are already in place
 - Nonprofits, schools, support groups, etc.
 - Be involved in the community
 - Multicultural group
 - City Gates
- Set up booths at different events with interactive engagement
 - Booth could have dentist spreadsheet or other resources
 - Children's behavioral health resources
 - Could have a provider at the booth doing a free screening, immunization, etc.
 - Help connect folks to different services
 - Survey community health needs
- Build trust over time, authenticity
- Make sure the employer has a realistic understanding of the time it takes to build trust within the community
 - Direct engagement, but also organizational engagement as well
- Visit different longhouses



What perspective is missing from this group?

- Youth
- People of color
- Physical disability
- Under 25 and over 65

VIII. Next Steps & Closing

- Next meeting is April 10, 2018
- Megan will have nametags and will change the font on the recruitment flyer
- CPAA will send an invitation to Dr. David Meyers for the next meeting

Jennifer asked the group to end with one good thing from this meeting:

- Dr. Haughton wants to start a mobile clinic
- Liked sharing all ideas including levels that consumers are not always a part of
- Appreciative of Dr. Haughton attending, being heard on concerns, appreciate all the feedback and becoming a group that is comfortable to share
- Being heard, feeling acknowledged
- Bigger meeting with more input
- Hearing the great ideas
- Learning about the percentages of performance, data trends on CPAA performance (better than predicted)
- Appreciate CPAA having a third party audit and evaluate and being transparent with those results
- Influence change due to feedback