

Clatsop County
Community Advisory Council Minutes Summary

Tuesday, January 3rd, 2017

5:00-7:00 pm

The October minutes were approved by the CAC with one amendment. There were not any changes or additions to the January agenda.

A discussion regarding interested applicants in applying to be CAC members.

Joell Archibald and Nancy Knopf lead a discussion regarding the regional tobacco workgroup and the CCO tobacco metric/PIP: A regional tobacco workgroup focusing on supporting the reduction of tobacco initiatives was formed. It was comprised of public health prevention specialists, state and CCO staff. Last year the group worked on finding a baseline for where clinics are out regarding asking patients about tobacco use and making referrals to supports or prescribing nicotine replacement medications. Columbia County is participating in a grant-funded program addressing a closed loop referral process between clinics and the tobacco quit line.

Each time the person wants to quit there is process they can access through their primary care provider or through the tobacco quite line. (Referral, medications, and counseling sessions)

The CAC discussed options and gave feedback regarding tobacco cessation work. Is there inpatient treatment for treatment of tobacco addiction? What is being done about care providers who use tobacco? Chantix and Wellbutrin have caused people problems and doctors should be careful prescribing it. What is preventing the clinical side to be more aggressive about talking with patients about tobacco use? (providers do not have many resources to refer people to, integrated care is not robust, difficult conversations to have and they have not had role-play experience in medical school). CAC member reported that his doc is asking about smoking at the doc's office. Not all clinics have buy-in at all levels to work on this health issue. Could be targeting messages specific to certain populations. Drive people to log onto the CCO's Facebook page and other avenues specific to young people. Dental training with young people includes tobacco prevention. Social norm campaigns to prevent kids starting the use of tobacco. Give people interesting information that makes them curious about reducing. They state needs to understand how acculturated this health issue is and find ways to present information that is combating generations of people who use tobacco and in a way that respects peoples readiness. Be aware of causing harm when marketing/ promoting tobacco cessation.

Nancy will bring CPCCO specific tobacco cessation materials to CAC members at next meeting.

Nancy Knopf led a discussion regarding the CCO's developing strategy of reducing alcohol abuse by members in the CCO region. They are proposing a regional alcohol strategy that incorporates the goals of the community health improvement plan, Clinical Advisory Panel high-risk task force goals, and the CCO performance improvement plan and incentive metrics.

The CAC gave feedback on the proposed model of care:

- It aligns nicely the goals of the Drug Free Community Grant
- Addictions treatment opportunities should include drug treatment courts, Clatsop Behavior Health and increasing awareness of health plan benefits.
- Community efforts should include CHOICES and DUI state court referrals, and the OLCCC (Clatsop County, Marc Warren)
- Consider providing – creating age appropriate materials to present to health classes
- Work on getting away from the social norms of allowing teenagers to drink. Get link to healthy teen's survey to understand better why kids are using alcohol.
- Share narratives focusing on underage drinking rules/educate retail providers about laws. Look at who owns the business and send a letter so they are aware of the campaign.
- The CAC would like be involved with the campaign by: Giving input, supporting marketing campaigns, giving advice on creating awareness supports for clinics and patients, working on the Oregon mORE Campaign, supporting overcoming the problem with brochures, marketing, and creating measurable targets that are shared with the community.

Updates:

Advisory Council Education sub-committee is on hold.

Advisory Council Incentive Funds, have CPCCO staff return to give information support development of projects. Nancy will arrange.

The November Board summary was given to advisory council members.

The Innovator Agent update was given out to council members.

The Regional CAC activities were discussed.

A story was shared of CCO supporting a member of the Restoration House. Worked with pharmacy, CBH, primary care to get meds, and this literally saved the person's life. Worked out OHP insurance issue to open the door to services. The advisory council discussed discharge-planning services when coming out of the hospital or the emergency room. Organizations can look up a person in the system. Any provider can do this. It was great that the system worked.

Another story shared about the increased rates of obesity, diabetes and depression in Oregon. Oregon is 21st. There is a lot of good work going on that supports improvement of these health issues, that CCO's support. For example, HPV, which is a cancer prevention strategy and could eliminate the majority of cervical cancers.

Discussion of early learning hub presentation next month

Annual meeting, CHIP update, CWIF update, was council agenda ideas for next 6 months.