



RHIP Substance Use & Chronic Pain Workgroup
PacificSource – Room #210 (2nd Floor)
2965 NE Conners Ave, Bend

Agenda: November 15, 2017 from 4pm-5:00pm

Goals

Clinical Goal(s): Create a bi-directional integration approach for people with severe substance use disorders.

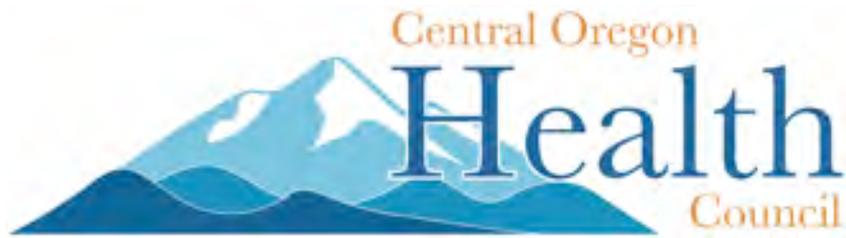
Prevention Goal(s): Implement a community standard for appropriate and responsible prescribing of Opioids and Benzodiazepines.

Health Indicators by 2019

1. Reduce the 3-year rate of overdose hospitalizations due to any drug in Central Oregon to 35 per 100,000 population (2012-2014 rate: 40.27 per 100,000 population)
2. Identify costs saved in Central Oregon due to properly assessing, treating, and referring individuals with moderate-to-severe SUDs.
3. Reduce the percentage of adults who had 4 (women) 5 (men) drinks of alcohol on one occasion in the past 30 days from 15.3% to 13% (non-age adjusted 2012-2015 Central Oregon rate from BRFSS data).
4. Reduce the percentage of 8th and 11th graders who binge drank alcohol one or more time in the past 30 days from 7.9% and 24.6% to 5% and 20% respectively. (2014 Central Oregon rate from Student Wellness Survey)
5. Reduce the percentage of 8th and 11th graders who have used any marijuana in the past 30 days from 10.2% and 25.1% to 7% and 20% respectively. (2014 Central Oregon rate from Student Wellness Survey)
6. Decrease the percent of patients on prescription opioid doses ≥ 90 mg MED/day for more than 30 consecutive days or more from 15.2% to 5%. (Baseline: 2014 data)
7. Increase the number of completed referrals and feedback loop from medical settings to alternative pain management programs from 0 to 100 referrals yearly. (2014: Zero pain management programs in Central Oregon. Zero is baseline.)

1. **4:00-4:05** **Introductions—All**
2. **4:05-4:45** **Finalize Hospital SUD Survey—All**
3. **4:45-5:00** **Complete Box 4 of A3: Gap Analysis—All**
 Aim: All Central Oregonians with an SUD that enter the hospital setting, including the ED, will receive engagement, treatment, or harm reduction services.
4. **5:00** **Updates & Action Items—All**

Next Meeting: December 20, 2017 from 4-5pm (**Deschutes County Health Services, 2577 NE Courtney Dr**)



BH Substance Use & Chronic Pain (22)	Organization
Steve Baker, LPC, MAC	Mosaic Medical
McKenzie Dean, MD	St. Charles Health System
Mike Franz, MD	PacificSource
Erica Fuller, MA, LPC, CADCI	Rimrock Trails Adolescent Treatment Services
Laurie Hubbard, RN, BA, SANE	Deschutes County Health Services
Larry Kogovsek	CAC Consumer Representative
Leslie Neugebauer, OTR/L, MPH	PacificSource
Matt Owen, JD	Bend Treatment Center
Laura Pennavaria, MD	St. Charles Health System
Sally Pfeifer, BA, CADCI	Pfeifer & Associates
Christine Pierson, MD	Mosaic Medical
Elizabeth Schmitt, MS	CAC Consumer Representative
Scott Safford, PhD	St. Charles Family Care
Bob Snyder, BA, CADCI II, NCAC I	BestCare Treatment Services
Julie Spackman, CPS	Deschutes County Health Services
Barbara Stoen	LifeRAFT Family Support
Ralph Summers, MSW	PacificSource
Kim Swanson, PhD	Mosaic Medical
Karen Tamminga, LCSW	Deschutes County Behavioral Health
Rick Treleaven, LCSW	BestCare Treatment Services
Bill Ward, CADCI	Serenity Lane
Molly Wells Darling, LCSW	St. Charles Health System

RHIP Workgroup Updates: October 2017

Behavioral Health: Identification & Awareness (Support: Rebeckah Berry & Nikki Lemmon)

- This group meets the fourth Tuesday of every month from 8:15-9:15am and currently has 17 members.
- In October, the group continued their A3 process with the aim of identifying and engaging 100% of individuals in Central Oregon that have a behavioral health need, and ensuring an effective and timely response. The group is working to finalize their baseline survey which will be sent out to primary care, women's health, school based health centers, and Indian Health Services, and is intended to help prioritize their experiments.

Behavioral Health: Substance Use and Chronic Pain (Support: Rebeckah Berry & Rick Treleaven)

- This group meets the third Wednesday of every month from 4-5pm and currently has 22 members.
- In October, the group continued their A3 process with the aim of all Central Oregonians with a substance use disorder that enter the hospital setting, including the ED, will receive engagement, treatment, or harm reductions services. The group began the process of designing a survey to gather baseline data as a starting measurement to help prioritize their experiments.

Cardiovascular Disease—Clinical (Support: Rebeckah Berry & Shiela Stewart)

- This group meets the fourth Tuesday of every month from 4-5pm and currently has 11 members.
- In October, this group continued their work on their first A3 around asking, engaging, and providing services/support to decrease youth tobacco use in Central Oregon. The group is very close to selecting their experiment and finalizing their A3.

Diabetes—Clinical (Support: Rebeckah Berry & Shiela Stewart)

- This group meets the second Thursday of every month from 9-10:30am and currently has 12 members.
- In October, this workgroup completed their A3 which they presented to Operations Council on October 20th. The workgroup also submitted a QIM proposal to pilot Point of Care testing machines in just over a dozen clinics of various sizes throughout the region. In November, the group will begin the development of their second algorithm that will focus on supporting primary care in the management of patients with A1Cs >9.

CVD & Diabetes: Prevention (Support: MaCayla Arsenault, Sarah Worthington, & Steve Strang)

- This group meets the fourth Tuesday of every month from 3:30-5pm and currently has 13 members.
- In October, the workgroup presented their A3 to Ops. They are launching a pilot to prescribe and connect children to organized physical activities. They have now turned their focus to promoting active modes of transportation and are currently brainstorming strategies. They will use a PICK chart to gauge these activities in November and select a strategy.

RHIP Workgroup Updates: October 2017

Oral Health (Support: Donna Mills & Mary Ann Wren)

- This group meets the third Tuesday of every month from 11-12pm and currently has 24 members.
- In October, the workgroup discussed the future focus of their efforts. They concluded that they would like to work on gathering enough data on geriatric dental care for it to be included in the next RHIP. They discussed their opportunities to partner with another workgroup and decided Diabetes Clinical could have a strong connection. They will be reaching out to that workgroup through a shared member.

Reproductive Health/Maternal Child Health (Support: Donna Mills & Muriel DeLaVergne-Brown)

- This group meets the second Tuesday of every month from 4-5pm and currently has 22 members.
- In October, the workgroup met and spent their time reviewing the latest reports from the State regarding Unintended Pregnancies/Teenage Pregnancies and the report published by OHA that provided a case study of the Central Oregon Perinatal Care Continuum program, funded by the Central Oregon Health Council. A subcommittee has been established to work on the gap analysis for Unintended Pregnancies and coordinate with the RHIP Oral Health Workgroup.

Social Determinants of Health

- This group meets the third Friday of every month from 10:30-11:30am and currently has 27 members in Kindergarten Readiness and 24 members in Housing.

Health & Education (Support: Donna Mills & Desiree Margo)

- In October, the workgroup met and chose to evaluate a name change to better reflect their vision versus a metric. The group heard a proposal from the TRACeS subgroup in the amount of \$18k. An electronic vote will be taken regarding approval. Kim Hatfield with Friends of the Children gave an update on the efforts around standing up their program.

Housing (Support: Bruce Abernethy, Elaine Knobbs-Seasholtz & MaCayla Arsenault)

- In October, the Housing workgroup discussed proposals for their Box 6 experiments intending to help meet the aims of their data & chronic homelessness stabilization A3s.