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Bemidji Community Health Center Planning Grant

Planning Team Meeting

March 22, 2012

1:00 p.m. until 2:30 p.m.

PrimeWest Large Conference Room

Meeting Notes

Attendance: Linda Yourczek, Diane Boben, Wendy Potraz, Susan Dobbelstein, Becky Secore, Dwight Fultz, Jeanne Edevold Larson, Torry Swedberg, Jes Conrad, Ruth Sherman, Colleen Falk, Lindsay Linde, Lorie Richarson, Monica McConkey, Marsha Kaehne and Gordy Hagen.

Project Consultant/Facilitator: Ashli Bowen

- The meeting opened with brief introductions.
- A recap of the planning team meeting with Craig Baarson, Reimbursement Analyst, MN Dept of Health, Office of Rural Health, was given. Wendy Potraz, Ashli Bowen, Jeanne Edevold Larson and Becky Secore shared what they learned from the visit to Scenic Rivers Community Health Center in Big Fork, MN.



[March 8 Planning Team Meeting Notes](#) – Craig Baarson



[Notes from the visit to Scenic Rivers CHC in Big Fork](#)

- The next steps in the work plan (May and June) were reviewed with the planning team.



[Detailed work plan](#)

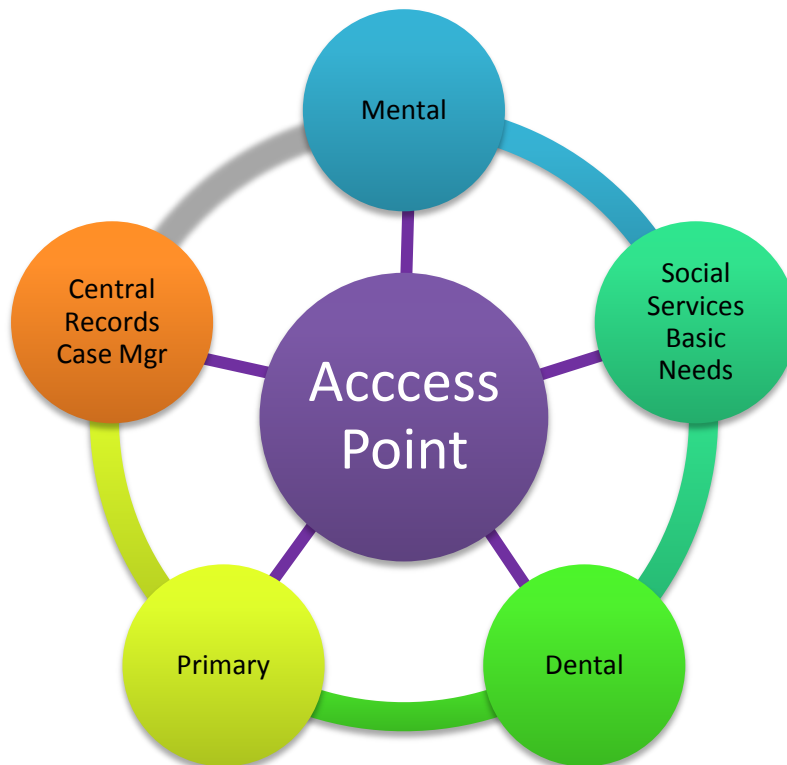
- A brainstorming session was held with the planning team to determine a possible vision for Phase I. The team members reviewed the December 2 community forum participant visioning notes as well as notes from the planning team meeting where the phased approach was discussed. Team members were asked to individually write down how they envisioned Phase I working. The following questions were posed for planning members to consider.
 - Review and address the concerns from the phased approach planning team meeting discussion.
 - Who would be at the table?
 - Would there be a first access point? If so, where/what organization?
 - What important elements would exist?
 - How would we address care coordination?

- If you could choose two or three services that would be most important, what would they be?
- Is there something missing from Phase I that you feel is extremely important we include?

Then the planning team members were divided into three teams. Individuals shared their ideas with the other team members and then the team members agreed on a possible shared vision for Phase I. The information the teams came up with will be used along with the needs assessment to help develop Phase I.

TEAM 1

- Educate the community on what the phase approach is
- Need to collaborate with Sanford, Northern Dental, Stellher, Beltrami County HHS, UMMHC, Independent Providers
- Make it simple! – streamline access
- Consistent Case Manager/Coordinator/Navigator
- Provide primary care (minute clinic – triage), critical mental health assessments, and dental



TEAM 2

- Continue communication with community
- Health care vocabulary needs to be user friendly
- Need a live interaction – personable approach – patient advocates – key placement at each facility – care coordinators – health communication specialist
- Northern Dental – primary access/first access point
- Have a organization(s) and provider(s) willing to serve CHC patients for mental and primary health (prenatal, well child, emergency...) needs as referred by the CHC
- A designated staff member at CHC will assist with enabling services (transportation to referred services)
- Care Coordinator – job description – refer, advocate, reduce barriers – big question is how to fund this position
- Navigation and Coordination – possible voucher system
- Information and contacts for local providers
- Emerging board to keep dream in touch with community – continue community forums – hold monthly meetings with CHC site coordinator, staff, advisory team, partners and CHC clients
- Collaboration – physicians, mental health providers, public health, access resources (CRC), tribal and county
- Integrated health care – complementary medicine (mind/body)
- Executive summary used with pre launch and strategy to engage public
- How to get the target population to look at dental clinic in a broader sense?
- Business plan with sound budget – possibly reach out to SBA, BSU/NW Tech
- Screening for basic health and mental health
- If services are not in one location then transportation should be provided to referral services

TEAM 3

- Public Awareness, Outreach and Education (homeless shelter, women’s shelter, churches united, other organizations that have clients who could benefit from CHC; media rep at the table; press releases, chatabout..., marketing materials throughout community to build awareness)
- Involve the client in the planning to ensure the “model” is welcoming and easy to navigate (signage is easy to read and understand, reduces stigma)
- Location should be central for easy access
- Electronic Medical Records
- Case Coordinator – trouble shooter (title of this position needs sound more inviting and friendly)
- Use nursing/social work/public health... students from BSU and NW Tech

- Jeanne Edevold Larson reported on the current status of Northern Dental Access Center. The planning work plan notes that the dental clinic is recognized as a logical first step for an FQHC-type facility—it has in place basic children health services through Beltrami County Public Health, mental health screenings and referrals through Beltrami Area Service Collaboration, and a variety of ‘enabling’ services such as insurance counseling, patient advocacy, transportation, child supervision, nutrition education and more. There is modest space available to enhance primary care services, but the larger question about taking on the full responsibility of an FQHC remains to be answered. Some of the federal requirements of an FQHC may infringe on the current business model for Northern Dental and as a relatively new agency (3 years) there is caution in taking on the full model without knowing the impact on the bottom line for the dental services.

Northern Dental Access is also exploring a possible expansion to the Kelliher Community Center and there is wonder about that location being a more manageable place to take the first steps toward FQHC.

- Bowen reminded the team members that the needs assessment will be presented at the April 5 planning team meeting.
- The next NACHC webinar is scheduled for Wednesday, April 4
Utilize Collaborations to Maximize Your Potential within Community
Time: 1:00 – 2:30 p.m. **Location:** Prime West Health, 3124 Hannah Ave NW
- The Bridges Out of Poverty workshop is April 30. Registration and more information is available on the CHC website – www.bemidjichc.com
- **IMPORTANT:** The next meeting will be held on Thursday, April 5 from 1:00 – 2:30 p.m. in Prime West Health’s conference room, 3124 Hannah Ave NW.

END OF PLANNING TEAM MEETING NOTES – March 22, 2012