



Minutes for January 4, 2016 HILN Clinical Engagement Accelerator Committee Call

Committee members present: Johnese Spisso, Sean Trafficante, Hiroshi Nakano, Sarah Koca, Jeanne Rupert, Bob Farrell, Lynn Kimball, Lori Cohen, Sharon Eloranta, Donna Poole, Eileen Cody, Phylis Cavens, Tony Butruille, Richard Bryan, John Espinola, Holly Greenwood, Charissa Fotinos, Chris Barton, James Kaech, Michael Maples, Bruce Smith, Laura Pennington, Committee Staff, Cezanne Garcia, Committee Staff

Apologies: Ingrid Gerbino, Dylan Dressler, (Invited)

After brief introductions an overview of the Health Innovation Leadership Network (HILN) and Clinical Engagement Accelerator Committee was shared:

HILN is a Governor-appointed public-private leadership group that is driving change by leveraging their collective and individual action to take as leaders, from multiple sectors. This Clinical Engagement accelerator committee is made up of HILN members as well as other leaders across the state – all multi-sector- who are focused on diverse but triple-aim focused cross-cutting elements. Accelerator committee structure is one of several catalyst mechanisms for Healthier Washington.

The Clinical Engagement Accelerator Committee stems from recognition that Healthier Washington cannot be successful and achieve the triple aim in WA without the engagement of clinicians and health system leadership – along with the broader practitioner community.

1. The Committee was asked to review Clinical Engagement Guiding Principles document:

Targeted Priorities for Committee Consideration¹:

- It was proposed that the committee begin with the development of a survey tool, a self-assessment that members would complete on behalf of their clinical and/or professional organization they are representing. This will clearly define where to best invest the committee's time so that the group focuses on where we can be most effective.
- Membership of this group spans a diverse and broad cohort of providers and clinical areas. The group proposes adding a goal to take the lead with to frame up how the group or HW efforts can be channeled to be a key informant and distributor of a timely communications strategy with succinct messages about what is coming up in transformation work in Washington state and nationally. This could eventually lead to a roadmap of sorts.
- Additional thoughts: Consider the overall Healthier Washington agenda, which is pretty aggressive, timeline-wise, including expected deliverables. Think of how we could frame up the diverse but related activities in the state that are applicable to HW initiative and how these do and could, tie together. We need to keep the priority focus on the purpose and try to select a few key things that we could impact.

¹ The Committee, once formed, will collectively define and finalize its priorities, objectives and action pathway.

2. The Committee discussed the structure of future meetings, using virtual and in-person options:

The group defined that, in general, this would be a monthly telephone meeting. Based on other accelerator committee experiences, the idea of a one-time in person, kick-off meeting was proposed, to serve as a planning session to define committee's action pathway. It was recognized that phone meetings are best used to address educational topics and for soliciting reactions to source documents that committee/staff will put together. Most important: HW wants this committee to be responsive to the membership's needs and desires.

3. Committee members were asked to share what is important to them and why they are interested in participating on this committee:

- Johnese Spisso - To meet the triple aim and to not support integration without having to reinvent the wheel. That would both give the committee's work momentum and ease the fatigue of health care providers.

Sharon Elorantra—Appreciates that this group's goals and targets are focusing on the people that provide health care service – not technology or regulation (which can be distractors to this work).

- Phylis Cavens –involved to ensure that HW transformation goals address the triple aim – and are inclusive of both adults and children. Plans to help the group focus on prevention and early intervention as we strive for value.
- Tony Butruille –The Committee needs to address head on what he called the quadruple aim: We also need to focus on provider satisfaction. Need to keep focus on actions that help clinicians take better care of patients and remove those barriers that inhibit their patient care efforts.
- Richard Bryan –wants to succeed at implementing 4-5 good simple, succinct, solid and sustainable steps toward achieving triple aim, and have an outcome that improves care.

Next steps/Action Items:

Consider gaps in membership and submit ideas for additional members by Friday, January 29.

- Convene small workgroup to develop survey.
- Workgroup to draft elements to be included in survey;
- Send drafts to whole committee for comments and finalization – and then will frame up survey for organizations to complete. *The following individuals responded and others were asked to reply to an email if interested in participating by Friday, January 29.*
 - o Sara Koca - CHAS Health
 - o Lynn Kimball – Aging and Long Term Care of Eastern WA
 - o Holly Greenwood – Rural Health Collaborative
 - o Lori Cohen - Community Health Plan of Washington
- Committee members complete brief bio and return by Friday, January 29.