

WINDSOR HSA COMMUNITY COLLABORATIVE
MINUTES
July 15, 2020

Attended by: Kimberly Aakre, Jenna Austin, Mary Boardman, Mark Boutwell, Heather Bollman, Thomasena Coates, Hilary Davis, Rudy Fedrizzi, Sarah Freeman, Jodi Frei, Sue Graff, Brenna Heighes, George Karabakakis, Alaina Legere, Ivan Levin, Jill Lord, Richard Marasa, Keely Marie, Codi Raymond, Christina Taft, Alice Stewart, Sue White

1. WELCOME AND INTRODUCTIONS

2. MINUTES OF APRIL 15, 2020- The minutes were approved as written.

3. COVID-19 INFORMATION SHARING – Jill stated that “COVID-19 fatigue” and over communication are becoming the reality, however, information sharing is crucial during this pandemic, as some of us are doing this important work daily.

Sue Graff, the AHS Field Service Director covers the Springfield/Brattleboro area. Sue shared that she is also covering and now the point person for the Hartford District in Paul Dragons absence. (Paul moved on to CVOEO). She will working collaboratively by establishing new relationships, or developing old ones. Sue reported there are various opportunities available for housing funding. Sue will send Jill the links to these opportunities. AHS are prioritizing homeless folks and those housed in motels/hotels, etc. For example, there are opportunities to build new housing, and assistance with mobile home lot rent through their rental assistance programs. The rental application can fund up to 6 months through the VT State Housing authority*. SEVCA of the Windham/Windsor area also has a Rapid Resolution Funding program, to help establish housing outside of hotels/motels. A summary document with a bulleted list of these programs will be created and shared.

***WebEx chat comments-**

Dr. Aakre shared that “we heard from our legal partner with our DULCE Program, that the housing authority rental arrears support has a limit on their funds and it is going fast. Encourage people to apply soon.”

“Yes, most of the resources are “first come, first serve” except for the mortgage assistance (need-based). There is \$20M in the rental stabilization program through VSHA and both landlords and tenants can apply.”

George Karabakis from HCRS shared that they are expanding and refining capacity for Telehealth and slowly reintegrating staff back into all the offices. On Monday the Hartford offices opened, and today the Windsor offices opened. Safety of clients and supporting staff is a priority. HCRS is starting to provide services in the community utilizing large tents to have outdoor activities safely, as well as Zoom meetings for clients. HCRS has applied for supported housing funding, through OEO and Dept. of Mental Health for clinic staff, clinicians, and peer support staff. George reported 392 (330 adults, 62 children) individuals who are currently homeless in motels. Warm Line is

still active, however staff for Warm Line need to get back to their regular jobs. Will need to figure out how to staff, or transition. May utilize 211.

Hilary Davis from VNH reports that operations are have fully resumed taking referrals and visiting homes. The previously held Community Wellness Programs for foot and blood pressure were suspended during the pandemic. They are evaluating how reopen those clinics safely with barriers to sanitization, and staffing.

Jill recognized Christina Taft of the VNH, as this will be her last meeting. She will helping with Davis House and Ascutney House. Christina has been a powerful force for care coordination in all of our regions. Sarah Freeman will be the interim for Christina. Sarah was warmly welcomed!

Dr. Aakre shared that the Pediatrics Dept. are seeing children and have full schedules. There is a push to get children fully vaccinated. Anxiety, stress, and mental health issues have increased in children with back to school and issues parents have to deal with. Children are coming in with fevers, and there is a lot of COVID testing. We are seeing kids with fevers and doing a lot of testing for COVID. The Pediatrics Dept. is gearing up to see children with for respiratory issues as they return to school. Dr. Aakre reported that she has attended the daily VDH meetings, which are now 3x a week with latest COVID updates, issues with testing, medical issues, return to school, and return to daycare, etc. This is a great resource and available on the VDH website.

Dr. Levin reflected on how the pandemic effected MAHHC's primary care patients, and quality improvement work. With some restrictions on meetings, the Diabetes project lapsed and our results got worse. Lessons learned included the importance of keeping any quality improvement work in the spotlight, even if virtual, keeping everyone informed of data, and of the health of our patients. This may also require a Root Cause Analysis to find out why results got worse. Dr. Levin will present data at next meeting. A positive outcome is that Liz Sheehan was able to keep track of one of the groups of patients with diabetes, their A1-C was regularly checked and stable.

Dr. Marasa from MAHHC ED shared they are doing their best dealing with COVID. The organization has created good systems that supports the additional work. He shared he is pleased with the care being provided despite constant stress. Dr. Marasa shared that opioid overdoses have worsened with folks presumably staying at home and isolated. We are not seeing as many people and he expects a surge of overdoses to come.

Sue White with AHEC shared how challenging it's been to remove barriers to get people into the workforce. There are several remote interns who will work collaboratively with and be helpful for prevention coalitions. One of the interns researched camps and recs and was able to get this info out to families. They are also working on peer to peer support for children in homes.

Rudy from VDH shared that Becky Thomas is not available today as she is in Londonderry dealing with a pop up cluster of cases. Rudy reported that only 4 people have been positive in the last 14 days. This is good news! Testing is being done weekly in

Springfield, and WRJ on Tuesday/Thursdays. VDH is making an appeal to health providers to increase testing capacity and availability. Their goal is to allow any provider to do testing if they want.* “TeleWIC” will continue at least through the fall and improving access to WIC services due to no transport needed. Their focus and priority is turning to schools/colleges re-opening, as virtual learning is more difficult. VDH is gearing up for Flu season and want to avoid both Flu and COVID in the fall. Flu will be a big push. Vermont has purchased vaccines for adults and children (everyone). Will be available to any provider who wishes to provide flu vaccinations. They are making every effort to hold community based clinics safely. Jill shared that our respiratory clinic will continue and we will do our part for flu vaccinations.

***WebEx chat comments-**

Rudy: “Pop-ups are all PCR tests- as of a July 3 statement the VT Department of Health still does not recommend antigen or antibody testing for individuals.”

Keely Marie: “We are here to assist!”

Mark Boutwell from Senior Solutions reported they are transitioning back into home visits with our partners and home visit kits are available with masks, thermometers and PPE They are having conversations with clients about their comfort with home visits. There is mutual agreement between clients for what’s best. Mark also shared that that Senior Solutions has a new CFO.

Keely Marie from the VT Elder Justice Project* shared that she is an Advocate for Elder abuse. The age range start with age 50 and above. They have recently learned there is a lot of financial exploitation. In the past two weeks with restrictions being lifted, referrals for families domestic abuse are coming in. Advice is given on how to deal with that and who they should speak with. NH/VT have different laws, so you will be directed to someone that can separate the two. As people are able to get out more, those who have been victimized are able to reach out. Whatever the need is, please reach out and she will help the best she can.

***WebEx chat comments:**

“Confidential- Toll Free 866-230-0249

DOJ Elder Justice Project

Community Outreach Advocate Coordinator

Elder abuse, neglect or financial exploitation advocacy

Alaina Legere from Bayada reported that things are business as usual, staff remains healthy. The Bayada and VNH teams have donated PPE to Upper Valley nursing community. As MD offices and hospitals return to business as usual, they are beginning elective surgeries again, and Bayada is able to take care of more patients.

Jodi Frei, Manager of Clinical Programs at OneCare VT reported that they have deployed a COVID-19 Application And Companion Script. They continue to receive feedback for HSA and practices and an increase in questions about self-management of chronic diseases. They are providing telehealth support. Jodi reported that information coming in from payers and sources is confusing and hard to keep track of. They are advocating for the the payers, support for patients who don’t have broadband to get audio/visual

capabilities. Social media messages are being relayed to encourage patients not delay seeking care. Advisements are also encouraging patients to take care of mental health and staying active. Messaging is reinforcing precautions (mask, hand sanitizing, social distancing). OneCare Care Coordination new Care Coordination Payment Model effective July 1. Will support flu vaccine initiative.

Codi Raymond from Windsor SASH (Services and Support at Home) was warmly welcomed as the new SASH Coordinator for the area.

There is mutual gratitude for all the work that's being done in light of the COVID pandemic, and how complimentary this work is to what is already being done in the community.

4. CHIP WORK GROUPS UPDATE – Jill shared that the workgroups have finished the planning phase, and are not in the implementation phase. A grant request has been submitted for funding all these implementation plans.

Jill reviewed the statuses of each group as follows:

- **Strengthening Families-**
 - Implement 5 playgroups with Strengthening Families Framework
 - Coordinate regional calendar and a series of 3 Circle of Security programs for parent education
- **Affordable Housing-**
 - Home sharing-creating new units within existing structures as well as training and support for landlords.
- **Senior Health-**
 - working with Upper Valley Nursing Project
 - Support Aging in Place groups
 - Disseminate regional resource directory
- **Alcohol and Substance Misuse-**
 - Communication campaign to decrease barriers to treatment
 - Increase recovery presence in community events

Jill shared that we have 97 partners for these workgroups. What an example of Collective Impact! Challenges have been overcome barriers for social distancing, learning new platforms, and technology. The pandemic highlighted our existing problems.

Next Steps include recruitment of new participants, apply for funding, transition of Vista and launch new activities.

5. QUARTERLY DASHBOARD REVIEW-(*please see attached dashboard*)

The COVID-19 Pandemic has impacted the volume of patients seen in the clinic.

- Hypertension and Diabetes Care
 - Liz Sheehan is reaching out to patients in care coordination and keeping that lifeline open during the pandemic
- In Substance Use Disorder-
 - There has been 9 opioid related fatalities in the first quarter this year.

- The Recovery Coach Program is active in the ED and we are reaching out to provide people with SUD treatment.
- Services include Rapid Access to Medication Therapy and Narcan distribution and education.
- For the 3rd year in a row, Windsor County has the lowest rate of opioid prescribers in the state. Our work with Hub and Spoke has been essential.
- RiseVT is working hard on awarding Amplify grants and distribution of school lunches

6. WINDSOR HSA COMMUNITY COLLABORATIVE MEETING

EVALUATION– Jill briefly shared the current Windsor HSA Community Collaborative Charter as well as the Windsor HSA Community Collaborative Evaluation results with the group. Jill then gave everyone 1 minute to share one thing about this meeting that could be improved upon.

1. Brenna- none
2. Heather- none
3. Codi- very new, none
4. Dr. Levin observed that we're not maximizing projects, He suggested working with the rest of the HSA partners on projects, supported brainstorming of ways that we could work together-working with VNH, SASH, and BAYADA on a diabetes project.
5. Samantha- 2nded Dr. Levin
6. Jodi felt the meetings were highly effective but suggests reviewing the Mission Statement at the beginning of each meeting.
7. Keely added to continue to do what we're doing, use as many resources as possible.
8. Dr. Aakre felt the meeting was great and well run. She suggested utilizing pediatric resources and reviewing the pediatric aspect of patient care and how this impacts the kids in our lives and communities.
9. Mark shared that he liked a past presentation from the Superintendent of Schools and suggests incorporating mindfulness and wellness in a classroom. Next step, move into how to we connect with that spotlight.
10. Dr. Marasa felt this was a great opportunity to work together as groups.
11. Rudy suggested a cross cutting project, that we all could be involved in and we could bind together, stir up interest, and/or donate space to be clinic site. A project where all of us would feel collective interest.

WebEx Chat Comments:

Mark added that "I really like Rudy's recommendation. It would be great to have a project that involved all of our collective agencies."

12. Sarah- none
13. Sue Graff thought it would be helpful to her to have a directory/resource guide with organizations to include geographic scope. This would be a tool for new members as well as existing, to familiarize themselves with who is on HSA team.

WebEx Chat Comments:

Mark shared that “I received a grant for work on a resource directory, so please loop me in on this conversation.”

14. Thomasena agreed with Sue that newcomers may not have those contacts. Thomasena asked for clarification on the scope HSA funding opportunities other than the Amplify Grants. She surmised that there must be other opportunities and/or funding available.
15. Alice shared the sentiment that if you “try to fix everything, then you don’t fix anything.” You become spread too thin. She suggested picking one item to work on and make better. She also asked the hypothetical question, “Does everyone in a community know there’s an HSA, or do they need to know?”
16. Jill recommended starting each meeting with the ACH graphic to review the Mission and Vision of the Windsor HSA Community Collaborative Committee.

Other WebEx Chat Comments:

Thomasena- “What GREAT ideas! Bravo, Windsor ACH!!!”

“I’m happy to help Jill with re-engagement of partners in 2020- Thanks for capturing the comments, Mary!”

Mark Boutwell- “Glad to know of this grant. We can talk with Jill about options. Thanks!”

Hilary Davis- “I need to jump off- great hearing from everyone. Jill if you need me to support anything in the Senior Health Community Group let me know.”

7. WINDSOR HSA COMMUNITY COLLABORATIVE MEETING

CHARTER – The group was in agreement that we should do a follow up Survey Monkey, regarding providing more opportunities for brainstorming and cross cutting multisector partnerships. Perhaps the Community Vision from the ACH Graphic should be included in the charter. Mary will create the Survey Monkey and Jill will disseminate the link.

Jill shared her gratitude with the team for all that you do!

8. NEXT MEETING – The next Windsor HSA Community Collaborative Meeting will be on Wednesday, October 21, 2020 at 8:00 AM via WebEx.

Respectfully Recorded,

Mary Boardman
Administrative Assistant