

Date: 06/08/18		Time: 9:30 to 11:30	Location: Call 913-748-0123 part #260678	
TIME	TOPIC	DISCUSSION	PLAN OF ACTION	RESPONSIBLE
9:30 a.m.	Call to order	Roll call, check-in and review agenda for the day. <b>Intro to new board members!</b>	Review and approve	Marilou
	Minutes of last mtg	Review financials to date	Review and approve.	Marilou
	Financials		Review and approve	Jacob or Mike/Larissa
9:50	Annual meeting/conference	Complaint	Address any unanswered concerns and determine if further action needed	All
		Summary of conference evals	Review....	Brian
10:10	Sepsis Initiative		Update	Doris
10:15	Legislative	Meeting with Sue Birch....	Devise plan: who is attending...what do we want to convey or ask?	Leslie
		Initiative 1358 Stakeholder process for reimbursement for EMT's	Who to attend June 10 meeting to represent HCAW	Leslie
10:30	Management transition	Update on process; incorporation of aspects of Doris role into Catchpoint ED role and review parts of Doris role that may need additional Board support or supplemental staffing as integration of the role occurs.	Discuss	Marilou
11:30	Adjourn			

[Please use your Company/Organization Letterhead]

June 1, 2018

Marc Bennett, MA  
President and Chief Executive Officer  
Qualis|HealthInsight  
P.O. Box 33400  
Seattle, WA 98133

RE: Letter of Support for Qualis|HealthInsight for the CMS Network of Quality Improvement and Innovation Contractors

Dear Mr. Bennett:

The Home Care Association of Washington (HCAW) is pleased to submit this letter of support for Qualis|HealthInsight in its bid to become a Network of Quality Improvement and Innovation Contractors (NQIIC) awardee with the Centers for Medicare & Medicaid Services (CMS).

HCAW is the most diverse in-home services association in Washington State, representing Home Health, Home Care, and Hospice providers. Our members also include affiliated healthcare professionals, providers, consultants, and vendors. In this era of health reform, partnerships within the healthcare community are essential. HCAW actively promotes partnership development within our membership and with external providers. HCAW provides advocacy, education, and support to members as we work together to achieve the triple aim of healthcare: improved quality, reduced cost, and improved health.

We have a long and successful relationship with Qualis Health, successfully collaborating with our organization and member agencies to implement quality improvement and population health management efforts, engage with the national Home Health Quality Improvement (HHQI) National Campaign, participate in Medicare's Home Health Value-Based Purchasing model, and support clinical targets areas such as immunizations and cardiovascular care management.

Together, our two organizations confer regularly to identify activities that support and enhance quality initiatives throughout the state, meeting regularly and providing a visible presence at our annual conference. Examples of Qualis Health's expert technical assistance include helping our members implement the HHQI Best Practice Intervention Packages (BPIPs), successfully participate in the HHQI Cardiovascular Data Registry, and implement use of health literacy and educational tools to provide beneficiary education appropriate for all racial and ethnic beneficiaries served by the agencies.

HCAW is prepared to collaborate with Qualis|HealthInsight in support of CMS' NQIIC goals, including: behavioral health, with a focus on reducing opioid use; patient safety and harm reduction; care coordination; nursing home/long-term care; chronic disease self-management; clinical practice redesign and transition to alternative payment models; provider burden reduction; addressing public health improvement issues such as obesity, cardiac health, smoking, diabetes, and kidney health; and coordinating efforts to respond to emergency issues such as outbreaks of infectious disease.

We appreciate Qualis|HealthInsight's demonstrated commitment to its mission, and the collaborative approach used planning and implementing effective quality improvement strategies with providers and stakeholders. In our experience, Qualis|HealthInsight has demonstrated the capability to successfully and effectively generate results and value for us and for our communities. The knowledge, skills, and resources provided by Qualis|HealthInsight represent a valuable resource for our state.

We encourage CMS to select Qualis|HealthInsight as an NQIIC awardee, and look forward to partnering with you in promoting and achieving transformational change to the healthcare system throughout Washington.

Sincerely,

Doris Visaya, RN, BSN  
Executive Director  
Home Care Association of Washington

June 6, 2018

## **HCAW June 2018 Legislative Report**

Prepared by Leslie Emerick, Governmental Consultant

### **Legislative Overview**

Calls are coming in for campaign donations from across the state! The election season has started, and our little PAC is in high demand! Not much new to report on the legislative front yet... There have been a few resignations of legislators that has surprised me. One is Senator Jan Angel from Kitsap County. She has been the strongest advocate for the bill that would require a physician to offer one more conversation for possible cures prior to using the Death with Dignity. According to the Tacoma News Tribune, "In a last-minute surprise, Republican state Sen. Jan Angel withdrew from her re-election bid shortly before a Friday deadline for candidates to get on the 2018 primary ballot." Another surprise was Democratic Senate Majority Leader Sharon Nelson who announced that she is retiring and won't seek re-election this year. Its going to be an interesting election year!

During the interim between legislative sessions, state agencies being the process of putting together their budget packages for the next year. HCAW is meeting with the new Director of the Health Care Authority, Susan Birch, to discuss a potential budget request for increased Medicaid Home Health Reimbursements on June 18<sup>th</sup> in Olympia.

### **Department of Health Issues**

#### **CoN Hospice rules update (Kathy Hoffman)**

A notification was sent out by DOH that they will be filing a supplemental rule proposal under the CR102 process consistent with RCW 34.05.340, limited only to reversion of the ADC to 35. A public hearing is to be scheduled in mid-July 2018, with a public hearing to follow about seven weeks later. Stakeholders will be notified by GovDelivery and through the [Certificate of Need rule making website](#).

#### **The WA State Nurses Association (WSNA) will be working on an Advisory Opinion to Clarify the Scope of Nurses Practice Using the Death with Dignity Act.**

I spoke with the Governmental Affairs Director for WSNA, Joelle Fathi, about why WSNA is requesting this. She said there are no complaints driving this issue, they only want clarification. I asked to be part of her stakeholder group when they start working on this issue.

#### **Palliative Care-Rural Health Integration Advisory Team (PC-RHIAT)**

I participated via conference call for the June 6 first cohort gathering in Spokane. Home health agencies are very involved in this effort and discussions surround how to increase access to home health care in rural areas. In the community planning committee that I sit on, there was discussion about the Portal for Palliative Care that is being developed as a resource for practitioners and the public. There is grant funding to take over the site from the Healthier WA Portal that lost funding.

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The Palliative Care-Rural Health Integration Advisory Team (PC-RHIAT) is the group planning the WA Rural Palliative Care Initiative. The Cohort refers to the clinical teams and community members from our first seven communities; Port Townsend, Dayton, Pullman, Colfax, Newport, Twisp/Okanogan Valley/Methow and Ephrata.

The first cohort meeting is for the teams from the seven communities to share their action plans, exchange practical lessons and build their peer relationships. People outside the seven communities can observe but the conversation is for them. It is primarily but not exclusively the health care organization team members rather than the full community teams from the Cohort teams who participate in PC-RHIAT and June 6th the first full Cohort One meeting.

The third group are the full community teams in each of the seven communities. Home health and hospice are at all those tables and has been a partner in all action plans to date. Five of the seven have held their first community team meetings to do an asset and gap analysis and action plan.

### **Opioid Related Issues**

HCAW has been participating in the DOH Opioid Prescribing rulemaking process required by: [ESHB 1427 Implementation \(Opioid Prescribing & Monitoring Project\) Stakeholder Meetings](#). The draft rule document has now gone to the individual commissions and boards who prescribe opioids in our state to be approved. **The language that was requested of the Nursing Care Quality Assurance Commission (NCQAC) for Hospice was rejected in their rules definitions.** They stated at their May meeting that although it was a lovely definition, it was unnecessary to change because hospice and palliative care are already exempted in the document. They were not sure why the drafting team had changed it to a shorter definition in the final draft rules that went out to the boards and commissions. It would be very difficult at this point to get them all to changes the definition for hospice.

### **Health Care Authority Issues**

**Home Health Report:** HCA is still gathering data for the report that is supposed to be submitted to the legislature by December 2018. The problem is that this will be too late for an Agency Decision Package for the Governor's Budget. We will advocate in our meeting with the new HCA Director Susan Birch, for a potential budget request for increased Medicaid Home Health Reimbursements at the June 18th in Olympia. Depending on the outcome of this meeting, we may want to consider a letter writing campaign to the Governor and HCA to advocate for funding in the Governor's budget. If we are not successful, we will start calling on legislators over the interim to put a budget proviso into the House and Senate budget for home health reimbursements.

**The Dr. Robert Bree Collaborative (Bree):** I attended the [Bree Collaborative](#) meeting in Seattle on May 23 where they were going to determine topics for next year. I requested on that they include Palliative Care as a topic for their 2019 reviews. The members voted to initially consider

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adding Palliative Care to the topics that they are reviewing in 2019. There was verbal support from a number of members of the Collaborative. I have sent the staff information from the Department of Health (DOH) on the Washington State Rural Palliative Care Initiative (WSRPCI). I believe that WSRPCI could be a valuable resource for the Bree Collaborative End-of-Life/Palliative Care workgroup.

At the meeting on May 23 in Seattle, Leah Hole Marshall, A & I Medical Administrator, mentioned that they would need to find subject matter experts on these issue in the workgroups. Palliative care as an “End-of-Life” issue requires much different expertise than Advanced Directives and POLST. I asked how I can get some clinical palliative care experts on the workgroup and said that I was happy to suggest a few names of people who could provide expertise on palliative care.

**Implementation of HB 1358 – An act relating to reimbursement for services provided pursuant to community assistance referral and education programs.** I will continue to participate as a stakeholder by the Health Care Authority (HCA) who is the lead agency on implementing HB 1358. June 11<sup>th</sup> is the next meeting in Olympia. The requirements of HB 1358 include:

1. HCA create a mechanism for reimbursement – HCA shall adopt standards for the reimbursement of health care services provided to eligible clients by fire departments pursuant to a community assistance referral and education services program. The standards must allow payment for covered health care services provided to individuals whose medical needs do not require ambulance transport to an emergency department.
2. DOH create any credentialing / licensure needed – DOH must review the professional certification and training of health professionals participating in a community assistance referral and education program, review the certification and training requirements in other states with similar programs, and coordinate with HCA to link the certification requirements with the covered health care services.
3. JLARC shall conduct a cost-effectiveness review – JLARC must conduct a cost-effectiveness review to consider savings to Medicaid as a result of fire departments providing health care services. The review committee will make recommendations based on the findings to improve cost-effectiveness or repeal the coverage by fire departments by December 1, 2021.

**Palliative Care Rulemaking:** According to Nancy Hite at HCA, the CR 101 for palliative care does not have a timeline yet. It is going to take at least until October before they can get things complete. She will let us know when we will have a stakeholder meeting.

### **DSHS Issues**

I attended the first meeting on the Consumer Directed Employer Webinar. This is the new agency that sets up the Individual Provider Employment Administrator model shifts administrative support of Individual Providers (IPs) from the state to a private vendor, allowing the department to

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keep its central focus on client well-being. Beginning July 2020, the vendor would provide Financial Management Services and co-employer functions to clients receiving in-home personal care from an IP. This will centralize management of the IP workforce, including controls of IP overtime, and allow DSHS and Area Agency on Aging case management staff to focus on the clinical aspects of case management.

### **Revise Hospice Guidelines at Community Residential Facilities**

I met with Candice Goering at DSHS on June 4, 2018 to address residential facilities aging patients who should have access to hospice services. The department will begin a process to establish guidelines for hospice in residential facilities. There are guidelines currently under review within the department that will help clarify the process of how to address hospice and end of life care issues for Residential Communities and other entities such as Adult Family Homes and Nursing homes that the department has oversight of. More to come as we are allowed to review the new guidelines and if they will meet the needs of these patients.

### **Labor and Industries**

HCAW has been meeting with L & I to address reimbursement issues for home health. We have not heard back from the department since April on this issue and have requested an update on where we stand. The department has a deadline for updating fee schedules by July 1, so this issue will need to be resolved by then. L&I is supposed to be working on a draft procedure and authorization document to share.

Our last meeting update was on 4/17/18 stating that “Staff have updated our payment policy chapter to more clearly delineate short term home health services and long-term home health services/attendant care. We're still wrestling with the most appropriate mechanism to ensure adequate compensation for aide services in short-duration appointments. I asked Emily to see if she can get a bit more information on that before we send you the updates for comment. I appreciate your patience as we work to identify the most appropriate resolution to the concerns that you have raised. Here are the HCAW concerns:

1. Reimbursement rates: L&I prepared two documents summarizing research to date. One contains basic information on billings and utilization and another compared Medicare, Medicaid and L&I rates.
2. Units of service limits: L&I authorization occurs through the nurses (ONCs). L&I shared its reference document that the nurses use in authorizing home health RN units are not capped by a process or rule. Research on 60 claims only showed two where the L&I nurse authorized 4 units.

### **Updates on Policy Issues**

**Washington State Hospital Association: Readmissions Reduction Steering Committee Charter**

June 6, 2018

I was successful in getting palliative care added to the list of topics the committee will review in 2018-2019. The WSHA Steering Committee will convene a small group to work on applying palliative care as a readmission reduction strategy. I have volunteered to participate in the Palliative Care workgroup.

**WA State Dementia Coalition:** The subcommittee meeting for the Dementia Coalition was. I was unable to attend the last DAC subcommittee meeting on May 11, 2018 but have requested to get palliative care on the agenda of this workgroup as an agenda item at the next meeting. I informed them that the Health Care Authority is starting Palliative Care rulemaking and has filed a CR 101. The stakeholder work on that will begin this fall. Hopefully it will assist in developing a funding mechanism for this type of care. It seems like Palliative Care would be a great model for taking care of Dementia patients. Here is a website from the Center to Advance Palliative Care:

[Dementia and Palliative Care](#)

### **Potential Issues in the 2019 Legislative Session**

#### ***Decision Package or Budget Proviso for increasing Medicaid Home Health Reimbursements!***

**DOH Licensing System Replacement:** DOH regulates 430,000 healthcare practitioners in 86 professions. They have an antiquated computer system in place for licensure of professions. The department is proposing a \$10 fee increase for 4 years for all professions to pay for the licensing system upgrade.

**Background:** Currently professions pay a licensure fee that covers the cost of the regulation of the profession at DOH. Fees go up and down depending on the number of investigations or disciplinary actions during a set period of time.

## Constant Contact Survey Results

**Survey Name:** 2018 HCAW Annual Conference Evaluation

**Response Status:** Partial & Completed

**Filter:** None

May 22, 2018 3:05:35 PM

### 1. Pre-Conference Please rate the Pre-Conference Sessions you attended according to the scale provided

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	Not informative or engaging	Not very informative
Active Engagement of Dementia Patients to Improve Quality of Life- Mary Beth Quinn	0 0%	0 0%
Sepsis: Importance of Home Health Role- Sue Bergmann	0 0%	0 0%
Conditions of Participation: Lessons Learned From Surveyors- J'non Griffin	1 6%	0 0%
Value Based Purchasing Update- Nick Seabrook & Brent Korte	0 0%	0 0%

7 Comment(s)

### 2. Keynote Presentation: DJ Wilson, Create the Future

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	Not informative or engaging	Not very informative
	0 0%	4 15%

3 Comment(s)

### 3. Keynote Presentation: Margaret Shepherd, Honor the Past

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	Not informative or engaging	Not very informative
	0	6

0%

24%

4 Comment(s)

**4. Please rate the Breakout Sessions you attended:**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	<b>Not informative or engaging</b>	<b>Not very informative</b>
Breakout Session #1: Elder Abuse: Red Flags & How You Can Help- Karin Taifor	0 0%	0 0%
Breakout Session #2: Technology & The Future of Our Industry- Ginny Kenyon	0 0%	1 11%
Breakout Session #3: Home Health Regulatory Update- Laurie Domingo	0 0%	0 0%

5 Comment(s)

**5. Please rate the Breakout Sessions you attended:**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	<b>Not informative or engaging</b>	<b>Not very informative</b>
Breakout Session #1: Implementing CDC Urinary Catheter Guidelines in Home Health- Kama Ferryman	0 0%	0 0%
Breakout Session #2: Very Few Leaders Know Their Number. Do You?- John Marshall	0 0%	1 13%
Breakout Session #3: Home Care in The Trump Era: A Practical Guide to Building	0 0%	0 0%

4 Comment(s)

**6. Please rate the Breakout Sessions you attended:**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	<b>Not informative or engaging</b>	<b>Not very informative</b>
Breakout Session #1: The 7th Vital Sign: Elder Nutrition For Vitality & Chronic Disease Management- Beth Scholer	0 0%	0 0%
Breakout Session #2: LEAN management in HealthCare- Using Technology & Telehealth to	0	0

Healthcare- Using Technology & Telehealth to Maximize Efficiency & Improve Patient	0%	0%
Breakout Session #3: So You Thought You Knew The Rules! Revised In-Home Services Rules- Nancy James	0	2
	0%	18%
5 Comment(s)		

### 7. Please rate the Breakout Sessions you attended:

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.	Not informative or engaging	Not very informative
Breakout Session #1: Evidence Based VS Evidence Informed Practices: How to Get Started, Implement & Maintain In Your Agency-	0	0
Breakout Session #2: Critical Success Factors For Private In-Home Services Agencies to Succeed at Scaling Up In Their Home &	0%	0%
Breakout Session #3: Using Big Data to Improve Outcomes, Patient Satisfaction &	0	0
	0%	0%
3 Comment(s)		

### 8. HCAW Annual Business Meeting: Treasurer's report Nominating Committee Report Recognition of President & Leadership: Reflect on what we have accomplished in the past year.

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.	Not informative or engaging	Not very informative
	0	0
	0%	0%
3 Comment(s)		

### 9. Keynote Presentation: National Home Health & Hospice Industry Update -Bill Dombi, NAHC

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.	Not informative or engaging	Not informative
	0	0
	0%	0%
7 Comment(s)		

**10. Washington State Update:Legislative Report- Leslie EmerickState Survey Team Report- John Hill**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	<b>Not informative or engaging</b>	<b>Not informative</b>
	1	0
	4%	0%

5 Comment(s)

**11. Please Rate the Breakout Session you attended**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	<b>Not informative or engaging</b>	<b>Not informative</b>
Breakout Session 1: Health Home Services- Rena Cleland & Carolyn Bonner	0	0
	0%	0%
Breakout Session 2: Rural Palliative Care Integration- Pat Justis	0	0
	0%	0%

2 Comment(s)

**12. Please provide your feedback on the following Conference Events**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	<b>Was okay but not great</b>	<b>Great networking and a fun time</b>
Exhibitor's Showcase	2	6
	9%	26%
Wednesday Evening PAC Support Reception (Wine Raffle and Silent Auction)	1	4
	4%	17%
Awards Luncheon	0	4
	0%	17%

5 Comment(s)

**13. Please provide your feedback on the following logistical items**

Top number is the count of respondents selecting the option. Bottom % is percent of the total respondents selecting the option.

	Totally unacceptable	Not Good
Online Registration	0 0%	5 19%
Conference location	0 0%	0 0%
Hotel Accommodations	0 0%	1 5%
Conference meals	0 0%	1 4%
5 Comment(s)		

#### 14. Now tell us where you would like to meet for the 2019 HCAW Annual Conference

27 Response(s)

Outside of Seattle.

I liked the location for this conference.

Will likely not attend. I did not feel like I received a good education for the cost of the event. I felt there w  
Bellevue or Seattle

Another hotel close to the airport as that is most convenient for those flying or driving.

Seattle area

on the West side of the state is my preference

Seattle

Same place or at least some place near the airport.

I thought this venue was great and would do it again

Doubletree or Hilton off International Blvd in SeaTac, it's so much easier around the airport for travelers.

same area. it is very convenient for most people

Some where in Tacoma.

It is easy to meet in the same area it has been for the past two years around the seatac airport. I'm locate  
same place!

Same place would be fine

I think Bellevue would be great but I enjoy the Renton area as well.

This location was easy to access and makes the most sense based on the distribution of HCAW attendees

The location we were at this year was great.

Do we ever meet in Spokane, or is it too far away?

Not sure.

I liked the same area; centrally located close to the airport.

maybe Tacoma would encourage more of our southern members. Is an easier commute to go from N to S

Be more aware of your actions and choices. Was embarrassed to there and associated with this theme.

EAST SIDE OF STATE

s

Anywhere in Seattle area is great

provided.

<b>Informative &amp; somewhat engaging</b>	<b>Informative &amp; engaging</b>	<b>Very Informative &amp; engaging</b>
0	5	8
0%	38%	62%
2	5	6
15%	38%	46%
4	6	5
25%	38%	31%
2	9	4
13%	60%	27%

<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
3	10	9
12%	38%	35%

<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
10	5	4

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40%

20%

16%

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<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
0	4	3
0%	57%	43%
1	6	1
11%	67%	11%
1	7	4
8%	58%	33%

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<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
2	6	5
15%	46%	38%
3	3	1
38%	38%	13%
1	0	4
20%	0%	80%

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<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
1	1	4
17%	17%	67%
4	2	5

36%	18%	45%
2	4	3
18%	36%	27%

<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
4	4	4
33%	33%	33%
0	1	0
0%	100%	0%
3	5	7
20%	33%	47%

**new Board members and retiring Board members;Board**

<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
5	10	4
26%	53%	21%

<b>Informative and somewhat engaging</b>	<b>Informative and engaging</b>	<b>Very informative and engaging</b>
2	2	21
8%	8%	84%

ger & Jane Hawk

Informative and somewhat engaging	Informative and engaging	Very informative and engaging
7	12	5
28%	48%	20%

Informative and somewhat engaging	Informative and engaging	Very informative and engaging
5	9	3
29%	53%	18%
1	2	2
20%	40%	40%

Great time had by all	Did not attend	Comments
14	1	loved the HCAW son
61%	4%	Wednesday's entert
12	6	Thank you for all you
52%	26%	Costumes were inap
15	5	I work for Providenc
63%	21%	

	<b>Satisfactory</b>	<b>Very Good</b>	<b>Outstanding</b>
	11	7	4
	41%	26%	15%
	5	14	8
	19%	52%	30%
	3	10	5
	16%	53%	26%
	6	11	8
	23%	42%	31%



was a large political presence at this conference. I was expecting mu

ed north about 30 miles and this works out well.

and membership demographics. I would like to see an eastern Wa

after Seattle then the other way. Not sure what to do to engage o



#### Comments

I did not attend the preconference.

J'non Girffin made a comment about not liking therapists. I don't think that was appropriate. Some were offende

I did not attend the pre-conference

would have liked to have more time with COP and Value based presentation.

Very good information and presenter was "easy to get along with".

VBP: Power point presentation was not well put together....too small to see.

Not much new info from her presentation last year in the J'non Griffin presentation but she is a great speaker. G

#### Comments

Great information regarding what is happening in Washington.

Question the comment about Sue Birch.

I didn't think the keynote was the platform to address the political climate as he did. I was very disturbed when

#### Comments

Went a little longer than necessary, would have been great with power point.

enjoyed the historical background

Went on way too long and was far too reminiscent for many of us in the room. Too many references to people f  
Just read notes. NoVisuals. ShouldHave been prepared

Comments

Great information regarding elder abuse.

I did not attend the elder abuse session but it wouldn't let me uncheck the box

did not attend the others

Always appreciate having NGS at the conference.

presenter was very enthusiastic and passionate about the subject matter, which was infectious. Interesting topi

Comments

Great perspective on this issue.

Speaker was able to provide experiences from her use and the model that she used to promote better patient c

I wish John M would have shared some strategies and some background with his presentation

presenter was very engaging and gave a very good presentation overall; helpful information, but not as impactfu

Comments

Love this information.

mismarked.... attended session #1 not session #3

It was interesting to look at what new items are coming and how they can be used in our current setting.

I missed the intro and first couple of minutes, so likely not fair to give a full review. Information was good  
Nancy could not answer most of the questions asked of her. Her standard response was, "wait until you have a :

#### Comments

It was much of a versus talk, but more about how to engage differently with the patients. It was not what I expected  
Loved it

Lance is good communicator; however, he needs to move away from his power point and not just read to us. G

came in late - but for the part I was there for it was informative and engaging  
Need to work harder at getting more members to attend.  
Always seems the Eastsiders are always forgotten or not noticed.

Comments: Great to have Bill in person.

I do not come to these events for political information. I was disappointed by the political flavor inserted into this  
always great!  
Always great to listen too with real items that are coming and how things will likely be impacting us in the near future  
Value&appreciate perspective on legislative and regulatory updates  
Great presentation and excellent information  
Fantastic that he was present!

## Comments

Need to have more balance, Leslie took to long.

Timing just didn't work out would really have wanted to hear more from John and Jane

Time ran out.

Time was running short, and they cut off Leslie which was the most important/interesting aspect of these 3 speakers  
this felt rushed and did not feel we had enough time to spend with the presenters

## Comments

Informative & passionate speaker Rena did a great job; the information only pertains to Medicaid pts which most  
It was great to see how there are programs being created all around us for the betterment of patient care in a sr

g routine!

entertainment by the Board Members was very entertaining, creative and funny. Bad wigs but a good time. thanks.

ir wonderful work!

propriate and ignorant and appeared racists. Leaders were told they were prior to reception and they did it anyway  
e HH and do not recall getting the opportunity to nominate any of our field clinicians. Next year we would appreciate

## Comments

My hotel room smelled like rubber cement glue due to roofing issues and there was mold and dirty towels in the room. Did not appreciate the racial wigs.

Great food, snacks, etc. Hotel was 'ok' but preferred SeaTac hotel location last time to avoid Bellevue, etc. traffic. Never works for me always have to call for a better location this year

Need more education for the money. I am disappointed.

Washington event, but fear attendance would be lower. Overall, the venue was good

for our Eastern members. Maybe having parts of it be video conference that they could attend virtually??



he looked around the room and commented on the audience being primarily white and having power

rom the past that many of us in the audience had no idea who they are/were. This would have been l

survey and ask them." It's too late to get the answers to the questions when the surveyors are in the

akers. John is always really dry, so it's hard to sit thru such dry material. Wanted more Leslie!! :)

vays. Embarrassing that peopleStil feel they can do this for the sake of entertainment. White people

c. Conference/session layout at SeaTac hotel was better, and rooms were nicer & more affordable. Th



r. This is clearly a liberal political agenda that had no business being used in the keynote address. I m:





shouldn't be wearing Afro wigs period. Emailed apology was didn't help either. Con

is hotel cleaned my room while I was in conference & didn't realize I hadn't checked out yet- so I was



ay be white; however, I have worked and continue to work extremely hard every day. I don't need a p







scrambling to find my items,the manager wasn't very accommodating- a very young & inexperienced



political operative trying to make me feel guilty about my race or my position.









## Constant Contact Survey Results

**Survey Name:** 2018 HCAW Annual Conference Evaluation

**Response Status:** Partial & Completed

**Filter:** None

May 22, 2018 3:05:35 PM

### 1. Pre-Conference Please rate the Pre-Conference Sessions you attended according to the scale

Answer	Respondent
--------	------------

I did not attend the preconfer	amy.swanson@providence.or
J'non Girffin made a commen	goodwndr@aol.com
I did not attend the pre-confer	nathaniel.daniek@providence
would have liked to have mor	hvirani@careagehealth.com
Very good information and pre	jasond@shfi.com
VBP: Power point presentatio	lwillts@peacehealth.org
Not much new info from her	praymer.l@ghc.org

### 2. Keynote Presentation: DJ Wilson, Create the Future - Comments

Answer	Respondent
--------	------------

Great information regarding w	bcgreenlee@evergreenhealth
Question the comment about	goodwndr@aol.com
I didn't think the keynote was	lwillts@peacehealth.org

### 3. Keynote Presentation: Margaret Shepherd, Honor the Past - Comments

Answer	Respondent
--------	------------

Went a little longer than nece:	bcgreenlee@evergreenhealth
enjoyed the historical backgrc	hvirani@careagehealth.com
Went on way too long and wa	lwillts@peacehealth.org
Just read notes. No	Visuals. S heather.lauer@providence.org

### 4. Please rate the Breakout Sessions you attended: - Comments

Answer	Respondent
--------	------------

Great information regarding e	bcgreenlee@evergreenhealth
I did not attend the elder abus	dkaldahl@jeffersonhealthcare
did not attend the others	margaret.posey@gentiva.com
Always appreciate having NG	hvirani@careagehealth.com
presenter was very enthusias	jasond@shfi.com

### 5. Please rate the Breakout Sessions you attended: - Comments

Answer	Respondent
--------	------------

Great perspective on this issu	bcgreenlee@evergreenhealth
Speaker was able to provide €	nathaniel.daniek@providence
I wish John M would have sh€	hvirani@careagehealth.com
presenter was very engaging	jasond@shfi.com

### 6. Please rate the Breakout Sessions you attended: - Comments

Answer	Respondent
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Love this information.	bcgreenlee@evergreenhealth
mismarked.... attended sessic	denise.pascal@gentiva.com
It was interesting to look at w	nathaniel.daniek@providence
I missed the intro and first co	jasond@shfi.com
Nancy could not answer most	lwillts@peacehealth.org

### 7. Please rate the Breakout Sessions you attended: - Comments

Answer	Respondent
--------	------------

It was much of a versus talk,	nathaniel.daniek@providence
Loved it	jasond@shfi.com

Lance is good communicator; lwillts@peacehealth.org

**8. HCAW Annual Business Meeting: Treasurer's report Nominating Committee Report Recognition of**

**Answer Respondent**

came in late - but for the part dkaldahl@jeffersonhealthcare  
Need to work harder at getting goodwndr@aol.com  
Always seems the Eastsiders sheri.ashmore@providence.org

**9. Keynote Presentation: National Home Health & Hospice Industry Update -Bill Dombi, NAHC -**

**Answer Respondent**

Great to have Bill in person. bcgreenlee@evergreenhealth  
I do not come to these events rpatty@careagehealthpierce.c  
always great! margaret.posey@gentiva.com  
Always great to listen too with nathaniel.daniek@providence  
Value&appreciate perspective hvirani@careagehealth.com  
Great presentation and excell jasond@shfi.com  
Fantastic that he was present raymer.l@ghc.org

**10. Washington State Update: Legislative Report- Leslie Emerick State Survey Team Report- John**

**Answer Respondent**

Need to have more balance, I bcgreenlee@evergreenhealth  
Timing just didn't work out wo dkaldahl@jeffersonhealthcare  
Time ran out. goodwndr@aol.com  
Time was running short, and t wendy.stouder@gentiva.com  
this felt rushed and did not feel hvirani@careagehealth.com

**11. Please Rate the Breakout Session you attended - Comments**

**Answer Respondent**

Informative & passionate spe: wendy.stouder@gentiva.com  
It was great to see how there nathaniel.daniek@providence

**12. Please provide your feedback on the following Conference Events - Comments**

**Answer Respondent**

loved the HCAW song routine dkaldahl@jeffersonhealthcare  
Wednesday's entertainment b goodwndr@aol.com  
Thank you for all your wonder hvirani@careagehealth.com  
Costumes were inappropriate heather.lauer@providence.org  
I work for Providence HH and kristen.rose@providence.org

**13. Please provide your feedback on the following logistical items - Comments**

**Answer Respondent**

My hotel room smelled like rul rpatty@careagehealthpierce.c  
Did not appreciate the racial v amy.swanson@providence.or  
Great food, snacks, etc. Hotel wendy.stouder@gentiva.com  
Never works for me always h: margaret.posey@gentiva.com  
better location this year raymer.l@ghc.org

**14. Now tell us where you would like to meet for the 2019 HCAW Annual Conference - Responses**

**Answer Respondent**

Outside of Seattle. bcgreenlee@evergreenhealth  
I liked the location for this con sirena.strout@providence.org  
Will likely not attend. I did not rpatty@careagehealthpierce.c  
Bellevue or Seattle wgange@careagehealth.com  
Another hotel close to the airp cbonner@highlinemedical.org  
Seattle area amy.swanson@providence.or  
on the West side of the state dkaldahl@jeffersonhealthcare  
Seattle lcotton@cornerstonehhh.com  
Same place or at least some goodwndr@aol.com  
I thought this venue was grea fordice.k@ghc.org

Doubletree or Hilton off Intern wendy.stouder@gentiva.com  
same area. it is very convenient denise.pascal@gentiva.com  
Some where in Tacoma. margaret.posey@gentiva.com  
It is easy to meet in the same nathaniel.daniek@providence  
same place! gretchena@shfi.com  
Same place would be fine hvirani@careagehealth.com  
I think Bellevue would be great amberhahnkeenan@yvmh.org  
This location was easy to access jasond@shfi.com  
The location we were at this year melissa.nickel@gentiva.com  
Do we ever meet in Spokane, lwilts@peacehealth.org  
Not sure. frans2580@gmail.com  
I liked the same area; central rachel.manchester@providence.org  
maybe Tacoma would encourage raymer.l@ghc.org  
Be more aware of your action heather.lauer@providence.org  
EAST SIDE OF STATE sheri.ashmore@providence.org  
s caw2@touchmark.com  
Anywhere in Seattle area is great kristen.rose@providence.org

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Date: 06/08/18		Time: 9:30 to 11:30	Location: Call 913-748-0123 part #260678	
TIME	TOPIC	DISCUSSION	PLAN OF ACTION	RESPONSIBLE
9:30 a.m.	Call to order	Roll call, check-in and review agenda for the day. <b>Marilou Church, Donna Goodwin, Rachel Manchester, Greg Pang, , Kyle Long, , Larissa Jording, Gretchen Anderson, Brent Korte</b> <b>Not attending: Sam Miller, Amber Hahn Keenan, Rob Krause, Brian Greenlee</b> <b>Intro to new board members!</b> <b>Kelly Pajinag, Nate, Melinda</b>  <b>John McDonagh, Melissa, Christine &amp; Jennifer, Mike McMorine</b>	Review and approve	Marilou
	Minutes of last mtg	No minutes to approve as no regular meeting in April	Review and approve.	Marilou
	Financials	Review financials to date Mike reviewed April Financials. Better than the prior year. Increased revenue due to annual meeting and compared to last year the conference preliminary results are stronger than last year. Net income considerably higher due to lower conf costs and revenue from the trade show. Association is strong position through April. Still have a couple of renewals that everyone is aware of and working on collecting. Preliminary May results show a decrease in YTD loss due to revenue received in May. Question: Workshop expenses for Oasis in June? YES.  Motion for approval: Rachel Seconded: Gretchen Passed unanimously.	Review and approve	Jacob or Mike/Larissa
9:50	Annual meeting/conference	Complaint No additional feedback from initial. Consensus is to leave it as	Address any unanswered concerns and determine if further action needed	All

		<p>Summary of conference evals  Indication of difficulty getting a Keynote that appeals for everyone. Although it shows over 70% in the two highest evaluation categories.  Total survey returns not very high</p> <p>Trend overall: strong support for breakout sessions. Consider sharing feedback with speakers whether or not they request them.</p> <p>Difficult to understand the criticism of the political nature of some of the speaker comments given the current state and federal situation.</p> <p>Consider separating State Leg report from John Hilger's report in order to give each appropriate time.</p> <p>Consider evaluations available at the conference to fill in prior to leaving the conference rather than waiting for the online completion only.  Volunteer to assist the conference committee with the executing on that – Rachel made this recommendation.</p> <p>Venue: good to work with, very accommodating.</p> <p>Discussion about location reiterated the better results when located on the west side and especially in the Seattle area.  The point was raised that the Hospice group regularly meets in Chelan and it would be nice to have a destination that the group could look forward to.  Suggested that Suncadia is right in the middle of the state or possibly Leavenworth.  With the departure of Brian and Doris there is only Marla remaining from this year's committee.  Larissa, Rachel and Gretchen volunteered to be on the Annual Conference committee.  Rachel and Gretchen agreed to Co-Chair the committee.  Meeting to be set by Brian to have a hand over onto the committee in the next week or so.</p>	Review....	Brian
10:10	Sepsis Initiative	<b>Tabled for this morning's meeting.</b>	Update	Doris

10:15	Legislative	<p>Meeting with Sue Birch...HCA June 18 for a decision package in the Gov's budget. State agencies working on their budgets now so will learn if any are planning to include increase for Home Health rates.</p> <p>Planning to attend meeting: Donna Goodwin, via phone, Larissa Jording, Brent K, Greg Pang.</p> <p>Plan is to compare what the various programs, state pay relative to HH rates. Greg willing to provide average rates by programs for CHHH. Any other Board members who are willing to provide total <u>costs per visit</u>, Greg will include in the averages to present on the 18<sup>th</sup>. Currently, the raise from the state of Washington over the past 17 years has been 3%.</p> <p>Data coming to Greg will need to be to him by mid-week the week of the 11<sup>th</sup>.</p> <p>If Governor budget isn't a possibility Leslie has a meeting tentatively set for she and Greg to meet with Sen Cleveland in the 49<sup>th</sup> Dist. Greg to email the Senator for a meeting on June 22 in the late afternoon.</p> <p>Brent: data collection for the report. Providence is contributing, Evergreen, Overlook and UW Hospital, all going to be contributing. Specific direction all that is required at this point. Evergreen CEO working with WISHA boards to get participation.</p> <p>June 7 a letter form L&amp;I stating policy changes. Working with L&amp;I for the last 6 or 7 months on the needs of Home Healthcare.</p> <p>Home Health Aide visits received a \$42.02 rate/15 minute unit included. Also, PT &amp; OT will no longer be capped both for evaluation and implementing.</p> <p>Notification unclear. Greg to provide Leslie the question so she can seek clarification. IT would appear that an evaluation visit could be now eligible for up to a reimbursement of over \$500.</p> <p>Greg will send the results to the board.</p> <p>June 11 meeting 2:00 – 4:00, not June 10.</p>	<p>Devise plan: who is attending...what do we want to convey or ask?</p> <p>Who to attend June 10 meeting to represent HCAW</p>	<p>Leslie</p> <p>Leslie</p>

		<p><b>Legislative report doc filed on the website.</b></p> <p>Initiative 1358 Stakeholder process for reimbursement for EMT's</p> <p>Error in email form L&amp;I referring to 2825. In L&amp;I email it says 2875, should be 2825.</p>		
10:30	Management transition	<p>Update on process; incorporation of aspects of Doris role into Catchpoint ED role and review parts of Doris role that may need additional Board support or supplemental staffing as integration of the role occurs.</p> <p>The following were nominated to be check signers:  Christine Opiela, Exec Director  Marilou Church, President  Larissa Jording, Treasurer.  President-Elect, Donna Goodwin  Moved by Greg Pang, Seconded by Melinda  Motion approved unanimously.</p> <p>Signing limit for the ED would be \$3000. Over that amount would require two signatures.  All A/P will be approved by the Pres and Treasurer so a cap isn't really necessary though it can be in place.</p> <p>The Policy side of Doris' role is what is needed to clarify going forward.</p> <p>Thoughts from the Board and Leslie on how to proceed: Doris and Leslie work hand in hand for Washington state but the Board member with the most experience is Donna Goodwin. Someone with Donna's experience and expertise is very important to Leslie. Amount of time required is variable through the year and based on what initiatives are in play.</p> <p>Concern/question – if time commitment could be quantified and responsibilities are defined it would be helpful. If there are a lot of meetings on the westside to be attended in person it would preclude Donna from taking on the role. Much of the work Donna has been</p>	Discuss	Marilou

		<p>able to accomplish as the Chair of Public Policy for HCAW</p> <p>Need is most in the area of Federal advocacy and organizing the annual March on Washington.</p> <p>Brent willing to take on a larger role with the Federal but some of the detail on coordinating and communication would need to fall to others, possibly Christine.</p> <p>Proposal, could it be handled on a per diem basis.</p> <p>Looking for a Director of Public Affairs. Previously reported to the ED of the management company. Doris coordinated with the management company but really didn't have a reporting relationship.</p> <p>Christine could handle the organizing role on this. It appears we're going back to having a Director of Public Affairs.</p> <p>Need a plan for the summer with a commitment for a longer term solution.</p> <p>Going forward should look at approaching this very differently than we have in the past. How can we engage members of our individual agencies to become involved?</p> <p>There is a great deal happening on all fronts Marilou feels need to visit with Doris about specific activities and responsibilities.</p> <p>Proposal, contract with Donna for 10 or 12 hours a week, which would require her to resign from the board, and another person to fill the President Elect role.</p> <p>Proposal that the Board put an interim period timeline together that would allow for a recruitment period.</p> <p>Proposal for Leslie to take on a larger role in the interim.</p>		
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		<p>Marilou to categorize the various responsibilities and distribute to the Board. Discuss at a meeting during July.</p> <p>Does Doris have a spreadsheet on her projects and status for sharing with the Board? What has been shared to date isn't as sophisticated as a spreadsheet.</p> <p>July Board meeting currently set for the 13<sup>th</sup>. 2 members out on the 13<sup>th</sup>. August 10 would be Board meeting for August.</p> <p>Board retreat: Looking for date in September. Day long (9:00 – 2:00) Board meeting would be Friday the 14<sup>th</sup>. If that day works it would be extended to full retreat timing. Suggestions for Retreat location: Woodinville, Leavenworth to scope out for annual conf. Marilou to forward ideas for retreat locations looking to gain decision from the Board at the July meeting.</p>		
11:30	Adjourn			