

# 34<sup>th</sup> Annual Oregon Rural Health Conference

Wednesday, October 18

## Pre-conference Meetings and Workshops

7:30 am	Registration Table Opens	Great Hall Foyer
8 am – 2:30 pm	Critical Access Hospital Quality Officer Workshop <i>(separate registration required)</i>	Homestead II
8 am – 12 pm	Statewide Area Health Education Center (AHEC) Advisory Board <i>(invitation only)</i>	Homestead III
9 am – 3 pm	Rural Health Clinic (RHC) Workshop <i>(separate registration required)</i>	Homestead I
12 – 1:30 pm	OAHHS, AHEC, Quality & RHC Workshops Networking Buffet Lunch	Great Hall
1 – 3 pm	Oregon Association of Hospitals & Health Systems (OAHHS) Rural Health Reform Initiative (RHRI) Small and Rural Hospital Meeting <i>(invitation only)</i>	Fireside
1 – 3:15 pm	Statewide AHEC Directors Only Meeting	Homestead III

## Conference

3:15 – 3:30 pm	Welcome & Opening Remarks Scott Ekblad, Director, Oregon Office of Rural Health	Great Hall
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3:30 – 4:30 pm Session 1	<p><b>CONCURRENT SESSIONS</b></p> <p><b>Community Water Fluoridation: the Science, Citizen Beliefs and Politics</b></p> <p>Kurt Ferré, DDS, Board Member, Oregon Public Health Association;          Charles Haynie, MD, Rural Oregon Surgeon</p> <p>New and ongoing research continues to confirm that fluoridation prevents cavities, decreases dental bills, is important to the better health of all citizens of all ages and is safe. As Oregon continues to develop a CCO-based Medicaid system, these savings will become even more important to provider systems sharing the risk for cost of care. Despite the overwhelming professional and scientific consensus favoring fluoridation, citizen opposition in Oregon is well organized and politically effective. That fluoridation is the only population based public oral public health strategy in the Oregon State Health Improvement Plan underscores its practical importance. This presentation will inform attendees of the supporting science, the necessity of a commitment to long-term public education and practical strategies for local advocacy.</p>	Homestead I
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3:30 – 4:30 pm

**CONCURRENT SESSIONS (cont.)**

Session 2

**Obstetric Safety Bundle Implementation in a Rural CAH** *Homestead II*

Dale Robinson, MD, Chief of Obstetrics, Women’s Clinic, Grande Ronde Hospital  
 Dr. Robinson will present a summary of updated guidelines of several obstetric emergencies. He will focus on simulation protocols and training in a rural critical access hospital. Obstetric bundles have been developed to improve quality and safety and to prevent morbidity and mortality. Most national bundles were developed for large hospitals with resources that are unavailable in a rural setting, despite the large numbers of obstetric patients that deliver in resource-limited small hospitals. Dr. Robinson will share his experience of adapting recently updated guidelines and safety bundles to a small hospital environment in order to improve quality and safety at a critical access hospital, a process that will be useful for both obstetric and non-obstetric providers.

Session 3

**Mental Health Crisis Case Management in a Rural Emergency Department** *Homestead III*

Allison Whisenhunt, LCSW, Manager, Care Management, Providence Seaside Hospital  
 There are not enough psychiatric inpatient beds in the state of Oregon to meet the current need. Seaside Oregon, like many rural communities, has limited resources for mental health support, both in crisis and for ongoing support to prevent crisis. The closest hospital for psychiatric admission is in Portland. This session will describe the experience of implementing case management services in the Providence Seaside Hospital Emergency Department. This program provided more consistency for the patients and better communication with mental health staff at the county mental health agency and with psychiatric hospitals. The case management included adding processes for medication reconciliation, increased consults with tele-psychiatry, and more timely communication with the county mental health agency.

4:30 – 5:30 pm

**PLENARY SESSION** *Great Hall*

**Prepared Not Scared: Getting Ready for Disasters in Oregon**

Andrew Phelps, Director, Oregon Office of Emergency Management; Matthew Eschelbach, DO, Emergency Medicine Physician, St. Charles Health System  
 This presentation will provide an overview of Oregon’s hazard profile and how we work to prevent those hazards from becoming disasters. The speakers will cover operational continuity across public and private sectors, individual and community preparedness, and how we can leverage disaster survivors to help be a part of our response to catastrophes.

5:30 – 7 pm

**Conference Reception/View Exhibits** *Heritage/Landmark Galleries*  
 Featuring Bluegrass Music by Hardshell Harmony

7 – 8:30 pm

**Oregon Rural Health Association (ORHA) Board Meeting** *Fireside*

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<b>7 am</b>	<b>Registration Table Opens</b>	<i>Great Hall Foyer</i>
<b>7:30 – 8:30 am</b>	<b>Breakfast and Oregon Rural Health Association Annual Meeting</b>	<i>Great Hall</i>
<b>8:30 – 8:45 am</b>	<b>Announcements and Introduction</b> Scott Ekblad, Director, Oregon Office of Rural Health	<i>Great Hall</i>
<b>8:45 – 9:30 am</b>	<b>PLENARY SESSION</b> <b>Next Steps for Health Reform in Rural Oregon</b> John Saultz, MD, Emeritus Professor of Family Medicine, Oregon Health & Science University Oregon aggressively embraced the national health reform process, known as the Affordable Care Act or Obamacare. This allowed the expansion of Medicaid coverage to a large number of Oregonians and dramatically lowered the uninsured rate in the state. Rural communities were advantaged by this change to a greater extent than urban areas. With the coming repeal or substantial modification of the Affordable Care Act, rural communities are experiencing increased uncertainty about how their citizens will achieve affordable access to care in the future. This presentation will outline basic principles to evaluate new health reform proposals. It will also outline priorities to protect the financial health of rural hospitals and medical practices in this changing environment with a particular focus on new primary care models.	<i>Great Hall</i>
<b>9:30 – 10 am</b>	<b>Refreshment Break/View Exhibits</b>	<i>Heritage/Landmark Galleries</i>
<b>10 am – 12 pm</b>	<b>CONCURRENT SESSIONS</b>	
<b>Session 1a</b> 10 - 10:50	<b>OHP Back Pain Policy: Tools for Oregon Rural Health Care Providers to Manage Patients' Pain with an Integrative Approach</b> Catriona Buist, PsyD, Assistant Professor of Anesthesiology, Perioperative Medicine & Psychiatry, Oregon Health & Science University; Nora Stern, MS, PT, Program Manager, Persistent Pain Project, Providence Health & Services Oregon; Samantha Simmons, MPH, President, Oregon Collaborative for Integrative Medicine This interactive session will engage participants on the integration of non-pharmacologic therapies for back pain in the Oregon Health Plan and address implementation challenges unique to rural Oregon. The presentation will build on work being done by a group of stakeholder organizations to provide education, guidelines and resources to Oregon health care providers in order to showcase interventions of different clinical groups and how they can best treat for prevention, acute treatment and chronic pain care. It will also identify features of complex pain, which indicate a need to shift treatment focus, and discuss referral processes and patient communication.	<i>Homestead I</i>

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10 am – 12 pm

CONCURRENT SESSIONS (cont.)

Session 1b  
 11 - 11:50

**Oregon’s Opioid Crisis- Solutions for Low Resource Settings**

*Homestead I*

Andrew Suchocki, MD, MPH, Medical Director, Clackamas County Health Centers; Heather Whetstone, MD, Family Practice Physician, Oregon City, Oregon  
 There is no single solution to help Oregonians impacted by opioid use disorder (OUD). An increasingly recognized component in this multi-factorial solution is medication-assisted treatment (MAT). This presentation will cover basic information about DSM-V criteria for OUD and the role buprenorphine can play in the primary care setting. MAT can be offered in traditional addictions settings, via a hybrid 'hub and spoke' model, and in a primary care setting. This workshop will provide examples of each of these models, as well as practice, payer, and community factors which may facilitate each model. In addition, this workshop will facilitate conversation and ideas for how to best adapt these models to resource-challenged settings, particularly rural areas.

Session 2a  
 10 - 10:50

**Roadmap to Dementia Diagnosis and Management: The State Plan for Alzheimer’s Disease and Related Dementias in Oregon**

*Homestead II*

Sarah Goodlin, MD, Chief of Geriatrics, VA Portland Healthcare System; Patrick Gillette, MD, former Medical Director at the Integrative Health Center & previous Chief Medical Office, Rogue Community Health  
 Cognitive impairment and dementia negatively impact quality of life for the individual and family and significantly complicate management of medical illnesses. Cognitive impairment impacts older individuals, increasing with age such that after age 80, about one-half of patients are at risk. Rural health providers have few resources to evaluate and manage patients with cognitive impairment. This interactive session will review new resources developed by the State Plan for Alzheimer’s Disease in Oregon – Dementia Capable Licensed Health Care Workforce. The intent is to help the entire office staff build knowledge and skills to manage patients with cognitive impairment and dementia.

Session 2b  
 11 - 11:50

**Using Telehealth to Provide Caregiver Support**

Allison Lindauer, PhD, NP, Assistant Professor of Neurology, Oregon Health & Science University Layton Aging and Alzheimer’s Disease Center; Nicole Bouranis, MA, doctoral student, Oregon Health & Science University-Portland State University School of Public Health  
 Scientists and clinicians have turned to technology to improve the quality of and access to caregiver support. Telephone-based support groups, chat rooms, self-paced programs, and video-conferencing programs are options discussed in the literature. Oregon Health & Science University (OHSU) is increasing access to caregiver support through two programs: Tele-STAR and Tele-Savvy. This presentation will discuss the findings on the feasibility and efficacy of Tele-STAR and introduce Tele-Savvy, a nationwide program caregiver support program. Conference attendees will learn about the challenges faced, and the costs and benefits for these programs. Experiences working with rural caregivers will be specifically addressed.

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## CONCURRENT SESSIONS (cont.)

Session 3a  
 10 - 10:50

### **Funder Presentation 1—Cambia Health Foundation** *Homestead III* **Oregon-Washington Health Network (telehealth project)**

Steve Lesky, Senior Program Officer, Cambia Health Foundation; Dan Peterson, Manager, Oregon Washington Health Network

Mr. Peterson will share the implementation process for establishing telehealth services in rural communities including the planning process used for telemedicine, training of medical providers and IT staffs, contracting services, and equipment procurement. He will also discuss establishing internal procedures for using telemedicine, reporting and program evaluation, and collaboration when multiple agencies are involved. Mr. Lesky will speak to this project's strengths and why the approach was seen as innovative. He will also provide commentary and invite audience feedback and participation.

Session 3b  
 11 - 11:50

### **Funder presentation 2—The Oregon Community Foundation** **Protect the Teeth: Preventing Disease and Improving Lives in Rural Communities**

Melissa Freeman, MPH, Director of Strategic Projects, The Oregon Community Foundation; Trina McClure-Gwaltney, RN, Healthy Kids Outreach Program Manager, Mercy Foundation; Annette Leong, Dental Health Educator and Consultant, Oregon Community Foundation

A child's teeth are greatly impacted by his or her mother's prenatal care or lack of, genetics, nutrition, oral hygiene and dental care for both the child and caregivers. Baby teeth need proper care to ensure a child can eat, concentrate, and hold space in the mouth for permanent teeth. Children need access to care to protect their teeth long-term. Healthy teeth impact a person's ability to focus in school, get a job and live free of pain. For all of these reasons, several philanthropic organizations banded together to launch the Oregon Children's Dental Health Initiative in 2014, pooling over \$3M for the cause. Learn about some community-based strategies in place that are designed to efficiently and effectively improve oral health and access to care, largely in rural communities. Give your guidance as well!

12 – 1:15 pm

## **Awards Luncheon—Hero of the Year and Hospital Quality** *Great Hall*

1:15 – 1:30 pm

## **Break**

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1:30 – 2:30 pm

**PLENARY SESSION**

*Great Hall*

**Putting the Community in Community Benefit: Investment Strategies in Social Determinants**

Gustavo Morales, Executive Director, Euvalcree; Vanetta Abdellatif, Board Chair, Northwest Health Foundation and Executive Director of Integrated Clinical Services, Multnomah County Health Department; Sheri Ainsworth, Director, Mission Integration & Community Health & Well Being, St. Alphonsus Medical Center; Moderator: Jesse Beason, Vice President of Public Affairs, NW Health Foundation

The future of community benefit carries great promise and great uncertainty, all resting on legislative and congressional action. There is now clearer direction on how these actions could change community benefit in rural Oregon. Oregon’s commitment to upstream and preventative investments offers a worthy conversation for hospitals, CCOs, community benefit programs and nonprofit partners about how these strategies shift considering federal and state changes. This session will be a facilitated conversation among social determinant practitioners, rural nonprofit partners and policy makers followed by an open discussion with conference attendees.

2:30 – 3 pm

**Refreshment Break/View Exhibits**

*Heritage/Landmark Galleries*

3 – 5 pm

**CONCURRENT SESSIONS**

Session 1a  
 3:00 - 3:55

**Primary Care Transformation Across Rural Oregon**

*Homestead I*

Evan Saulino, MD, PhD, Family Physician, Oregon's Patient-Centered Primary Care Home Program; Chris Carerra, MPA, Program Manager, Oregon Health Authority, Oregon's Patient-Centered Primary Care Home Program

This presentation will include specific, real-world examples of how care teams in rural communities in Oregon are innovating in care delivery within the Patient Centered Primary Care Home (PCPCH) model. Also included are highlights of recent findings from a multi-year study (Sep 2016) conducted by Portland State University demonstrating the impact of implementation of the PCPCH model and an overview of multi-stakeholder efforts to support transformation in primary care (Primary Care Payment Reform Collaborative).

Session 1b  
 4:05 - 5:00

**Finding Success in Emergency Department Diversion through Team-Based Care and the Patient-Centered Medical Home in Prineville, Oregon**

Paul Gratton, DBA, Director of Adult and Graduate Business Programs, Montreat College  
 Teamwork is a necessary element of addressing the growing complexity of providing safe and cost-effective healthcare. This presentation shares insights on the patient-centered medical home (PCMH) model of team-based care from scholastic literature and relates them to the successful results of the Prineville, Oregon, Emergency Department Diversion program.

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3 – 5 pm

**CONCURRENT SESSIONS (cont.)**

Session 2a  
 3:00—3:55

**Supervision of Physician Assistants: Are You Missing an Opportunity?** *Homestead II*

Nicole Krishnaswami, JD, Operations and Policy Analyst, Oregon Medical Board;  
 Gary Plant, MD, Family Physician, Madras Medical Group  
 Physician Assistants are an important and growing part of our health care workforce. This presentation will break down physician assistant (PA) regulations in Oregon; specifically, clarifying the role of the supervising physician, the process for becoming a Board-approved supervisor, and the scope of practice for PAs. Attendees will learn the timelines for submitting, modifying, and ending practice agreements and the different levels of supervision.

Session 2b  
 4:05 - 5:00

**Recruiting and Retaining our Healthcare Workforce: An Update on Oregon's Incentive Programs**

Robert Duehmig, Deputy Director, Oregon Office of Rural Health; Bill Pfunder, Program Manager-Incentive Programs, Oregon Office of Rural Health  
 The 2015 Oregon Legislature required the review of all of Oregon's rural provider incentive programs. As a result of that review, the 2017 Oregon Legislature passed HB 3261, making changes to these programs. This session will review what those changes are, the process to implement those changes and how they will impact providers and practice sites.

Session 3a  
 3:00 - 3:55

**Funder presentation 3—Northwest Health Foundation** *Homestead III*

Gustavo Morales, Executive Director, Euvalcree; Jesse Beason, Vice President of Public Affairs, Northwest Health Foundation  
 A safe, healthy childhood sets the stage for lifelong health. And health begins in our communities—families, schools, and neighborhoods—and the opportunities they afford. Come learn more about how Northwest Health Foundation is investing in communities' efforts to advocate for their childrens' health and a stronger role in policy-making to make opportunity, and a healthy childhood a reality for all.

Session 3b  
 4:05 - 5:00

**A Conversation with Funders**

Steve Lesky, Program Officer, Cambia Health Foundation, Facilitator; Melissa Freeman, MPH, Director of Strategic Projects, The Oregon Community Foundation; Jesse Beason, Vice President of Public Affairs, Northwest Health Foundation  
 Join representatives of four Oregon foundations that have funded projects and initiatives in rural Oregon. They will talk about the history and missions of their organizations and discuss factors that influence how funding decisions are made. This is an interactive session, so come prepared with your questions about philanthropy in rural Oregon.

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Friday, October 20

**7:30 am**      **Registration Table Opens**      *Great Hall Foyer*

**8 – 9:15 am**      **PLENARY SESSION**

**Breakfast & Research Project: COMP-NW Students**      *Great Hall*  
**Address 30-day Readmission Rates at Lebanon Community Hospital**

Mary Herberger & Monica Thurston, second year medical students, Western University of Health Sciences-College of Osteopathic Medicine of the Pacific Northwest

The Center for Medicare and Medicaid Services (CMS) 30-day readmission measure is a risk-standard tool used to analyze the number of patients over 65 years-old who were discharged from a short stay acute-care hospital and subsequently readmitted within 30-days due to an unplanned condition. Within the Affordable Care Act (ACA), the Hospital Readmission Reduction Program (HRRP) financially penalizes hospitals with higher than expected 30-day readmission rates. Rural Health Track students from Western University of Health Sciences COMP-NW have the unique opportunity to follow at-risk patients for 30 days after they have been released from the Samaritan Lebanon Community Hospital. First and second-year medical students have been trained to identify barriers to health and implement changes that increase the quality of care while decreasing 30-day readmission rates.

**9:15 – 10:15 am**  
 Session 1

**CONCURRENT SESSIONS**  
**Access to Care for Rural Latinos: Challenges and Potential Solutions**      *Homestead I*

Leda Isabel Garside, RN, BSN, MBA, Clinical Services Manager for ¡Salud! Services, Tuality Healthcare Foundation; Daniel López-Cevallos, PhD, MPH, Assistant Professor of Ethnic Studies and Adjunct Professor of International Health, Oregon State University; Maria Elena Castro, M.Ed, MBA, Rural and Migrant Health Coordinator, Oregon Health Authority  
 Latinos living and working in rural areas of the state face a number of barriers to accessing health care services. Using a socio-ecological approach, this presentation will 1) explore barriers at the intersection of race/ethnicity, socioeconomic and immigration status, including issues such as medical mistrust and discrimination; and 2) describe the Salud Services approach to tackle these issues when providing health care services to rural Latino workers and their families.

Session 2

**How Good are Rural Ambulance Protocols for STEMI, Stroke and Cardiac Arrest?**      *Homestead II*

Paul Rostykus, MD, MPH, EMS Physician, Jackson County  
 Dr. Rostykus will summarize the findings of his recent study for the Oregon Office of Rural Health and Oregon Health Authority on the adequacy and variability of ambulance protocols in rural and non-rural Oregon for ST-Elevation Myocardial Infarction (STEMI), stroke and cardiac arrest. He will discuss the implications of this study for the provision of EMS care in rural Oregon followed by a facilitated interaction with the audience on what might benefit EMS in rural Oregon.

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9:15 – 10:15 am

CONCURRENT SESSIONS (cont.)

Session 3

**A Comparative Analysis of the Rural and Urban Nursing Workforce in Oregon**

*Homestead III*

Rick Allgeyer, Research Director, Oregon Center for Nursing

This session will describe the demographic characteristics of nurses working in rural and urban settings across Oregon, and how it compares to the nursing workforce in urban Oregon. In this analysis, the speakers will present the geographic distribution of nurses by license type (e.g., Licensed Practical Nurses, Registered Nurses, Nurse Practitioners, etc.), employment settings, and educational attainment. He will also examine the association between the nursing workforce and key health indicators.

10:15 – 10:30 am

Break

*Great Hall Foyer*

10:30 – 11:30 am

PLENARY SESSION

*Great Hall*

**The Latest from Washington DC and What it Means for Rural Oregon**

John Williams, JD, Attorney, Hall, Render, Killian, Heath & Lyman, PC

This session will examine the status of health care reform efforts in Washington and how it might impact rural health care providers.

11:30 – noon

Wrap-up, Prizes, & Adjourn

*Great Hall*