

National Council of Chief Executive Officers

Monthly Tele-Conference Meeting
 Toll Free #: 866-754-5692
 Participant Code: 2136254

DATE: November 2, 2010
 TIME: 12:00 pm EST; 11:00 am CST; 10:00 am MST; 9:00 am PST

Meeting Minutes

I. ROLL CALL

<u>NCCEO Officers:</u>	<u>P</u>	<u>A</u>	<u>Area Representatives</u>	<u>P</u>	<u>A</u>
Bryce Redgrave, Chair	x		Bill Pourier, ABR	x	
Vacant, V-Chair			Michael Christensen, AK	x	
Alan Barlow, Secretary	x		Dorlynn Simmons, ALB		x
Yvonne Misiaszek, P-Chair		x	Gary Wabaunsee, BEM	x	
			Laura Herbison, BIL		x
Chris Buchanan-NBOC		x	Molin Malicay, CAL		x
Carol Prevost-NBOC		x	Tonya Cornwell, NAS	x	
Gary Wabaunsee-CHSO	x		Bennie Yazzie, NAV	x	
			Chris Buchanan, OKC		x
<u>IHS HQ Staff:</u>			De Alva Honahnie, PHX		x
Elmer Brewster-ORAP	x		Shirley Alvarez, POR	x	
Jennifer Hovencamp-HR		x	Patti Whitethorne, TUC		x
Liz Fowler-UFMS	x		<u>General Members/Attendees</u>		
Kenneth Cannon		x	Maria Rickert, ALB	x	
Charles Gepford	x		John Ouellette, NAS	x	
Donna Fuller		x			
John Rael	x				
Dr. Charlene Avery	x				

II. APPROVAL OF AGENDA

There was consensus to approve the agenda as presented, with the notation that Dr. Avery will be providing the update for the Quality Meeting report.

III. REVIEW/APPROVAL OF PREVIOUS MEETING MINUTES

August 3, 2010 Meeting Minutes

Motion #1(Shirley Alvarez/Gary Wabaunsee): To approve the August 3, 2010 meeting minutes as submitted. No objections; approval by consensus.

There is no teleconference meeting minutes for September 2010 because our council met face-to-face in Denver at the NCCEO Summit. Our meeting for October 2010 was cancelled.

IV. OLD BUSINESS

1) NCCEO White Paper Development

Bryce Redgrave expressed his appreciation for the input and work that went into the development of our NCCEO position paper to the IHS Director. The draft copy was shared with Area Representatives and elicited several affirmations to move forward.

The final version of the paper was sent on 11/01/2001 to the IHS Director by Bryce Redgrave, and we very much look forward to her response and direction. Michael Christensen commented on the excellent effort put forth to summarize the large volume of content and discussion in a few completed pages.

2) NCCEO Website Updates

Regarding our website updates, Bryce Redgrave explained that significant progress has been made. The logo is now on the front page, our meeting minutes are available, and there us much more to come. In general, when information is submitted, HQ IT staff is helping us post on the website within 24-28 hours. In some cases, information takes longer to cycle to ensure 508 compliance, but it looks like we have a foundation for an effective communication venue.

Bryce Redgrave suggested that we look review websites for dental, clinical, nursing, and other IHS functions. In his opinion, the website for dental is the standard we should be aiming for, with their utilization of flash media, videos, and other marketing information. In addition, our CEO contact list was updated as of 10/25/10, and we've added a hit counter to monitor website traffic.

Bryce Redgrave is also working with Cliff Wiggins to explore set up for a SharePoint repository for us to work with. Shirley Alvarez queried if we had been reaching out to the other Councils for use of the SharePoint tool. Bryce Redgrave explained that while this may be an option in the future, the intention was to develop this tool primarily for NCCEO usage.

3) NCCEO Charter Revisions

As many of us received via email, notification for Public Comment was sent for our Charter on October 22, 2010. 11 comments were made and responded to by Bryce Redgrave and Alan Barlow. The Charter is now being forwarded through the approval process, which can take up to 21 weeks according to the flow sheet. We are hoping it will continue through the process without difficulty until it reaches Dr. Roubideaux for final signature (preferably around February 18, 2011, which would allow us to work under it at our next Combined Councils meeting.

Shirley Alvarez inquired about the nature of the comments provided. Bryce Redgrave explained that the comments were supportive, useful, and asking for clarification. Alan Barlow affirmed this as his assessment of the comments as well.

V. NEW BUSINESS

1) CEO Long-Term Training Program - Progress Report

Bryce Redgrave had sent out an email about the progress of this task thus far. He explained that the group had been working with the Clinical Support Center (CSC) to align identified training needs (48 were identified as critical for new CEOs) with existing resources to meet those needs (including the Executive Leadership Development Program and the Western Management Development Center). Michael Christensen affirmed the progress made so far and noted that the group was also trying to integrate alignment with the IHS Director's 4 Priorities. Defining and refining the scope of the program and measurements to assess its effectiveness will be the topic of future meetings through December 2010.

Shirley Alvarez queried if what has been developed thus far will be communicated at the Area Director's meeting in December 2010, or will there be additional fine-tuning? Bryce Redgrave explained that there is still plenty of fine-tuning to complete. There are redundancy, cost, and scheduling considerations to solidify, with current programs providing about 50% of what is needed. The question remains--where will we get the resources for the rest of the program? We want to grab as much as we can from existing resources to minimize costs.

2) Quality Meeting Update

Dr. Charlene Avery provided an update on the discussion of a Quality of Care conference convened by the IHS Director on September 29 and 30, 2010. The purpose of this conference was to review the 3rd priority to improve the quality of and access to healthcare, and the *ad hoc* nature of the assignment did not provide enough time to coordination of significant Urban or Tribal program involvement.

The charge for those in attendance was to come up with innovate ideas to improve the quality of and access to healthcare in IHS. They were instructed not to rely heavily on the IPC program to address the issue; nevertheless, IPC success stories and ideas came up numerous times. Topics from breakout discussion sessions yielded familiar themes for better alignment and integration of health systems, communication and coordination of all efforts (case management to nation initiatives, agency priorities, etc.), IT, workforce development, definition and guidelines on case management, community partnerships, learning networks, and leadership.

Findings, talking points, and recommendations are being compiled into a report for the IHS Director. From here, the effort will probably engage dialogue with patients and tribes to identify quality from their perspectives. There are no specifics yet, but such direction will likely be forthcoming in the next 6 months. Alan Barlow queried and Dr. Avery confirmed the compilation for the IHS Director will be made available for local implementation. Michael Christensen noted specific interest from a tribal perspective to see that summary. Shirley Alvarez asked Dr. Avery to share her opinion of the most exciting innovation proposed, which suggested the formation of a dedicated Office of Innovation and Quality within IHS.

3) HQ Reports

a) ORAP:

John Rael reminded the Council that the ORAP Online Internal Controls Policy tool is due on November 5th. He will not be available to reset passwords and deal with access problems at the last minute (user manuals should be the first resource used to answer password and access questions), so it is critical to complete our responses as soon as possible. IHS is currently standing at a 68% completion rate (an 80% completion and compliance standard is expected)

Elmer Brewster note that this is the 3rd time we are using this tool for reporting and issuing Red Flag notices, but we don't have yet have specific plans of action for reoccurring issues. John Rael explained that we will look more closely perpetual Red Flags in this review, and also noted that some corrective action plans set timelines for resolution up through the calendar year, so this may also lead to reoccurring issues.

John Rael explained that new CEOs requesting access to the tool will need to reassign people to complete sections are their facilities. When this is set up, CEOs will get notifications when specific sections are completed.

Bryce Redgrave explained that the process of finding the gateway to the online tool is complicated if a specific link is not provided. Even then, the link leads to another link, and so on and so forth. John Rael explained that access simplification is probably doable, although the need for multiple links extends from firewall regulations and the connections maintained by the Business Office function.

Bryce Redgrave also re-introduced concerns about CEOs receiving Red Flag and corrective action notification from the Area Office in a timely manner when a 30-day response window is required. His concern is heightened after recent experience as the Executive Officer for Bemidji---information does not seem to flow to CEOs as well as it should. John Rael explained that this information is provided to Area Business Office Coordinators and queried Elmer Brewster on whether it can be provided to CEOs. Elmer Brewster affirmed that the process can potentially include CEOs. He will provide instruction to have the next reports sent to Bryce Redgrave or Alan Barlow for quicker dissemination through the NCCEO. Tonya Cornwell queried and John Rael confirmed that the Finance section of the ORAP tool is down due to rewriting and realignment with policy.

John Rael reported that last month, Web-Ex training occurred for process revisions for Part B: Credible Coverage notice. ORAP has approval from CMS to change credible coverage letters, and there is a new process and posters can be provided for facilities. If process changes are not happening, notify John Rael by email and we will look to include in training over the next few weeks.

Elmer Brewster will compile and send out a findings summary from our August 2010 ORAP training sessions, and we will review them on our next conference call.

John Rael ended his report by explaining that there are still 2008-2009 AR balances on the book. The GAO will ask questions, and CEOs need to do all they can to ensure they have no balances for these years.

b) HR:

No report.

c) UFMS:

Liz Fowler reported that Finance has developed a training calendar to cover 6 months in advance. New users will be able to see in advance what training is available and plan ahead. Finance will also come out with a guide for new users, hopefully by the end of the month. Bryce Redgrave queried and Liz Fowler affirmed that this information will be emailed as well as available on the internet.

Liz Fowler also reminded the group that the proper set-up of approval hierarchies is critical in UFMS. This is where employees are impacted the most when they need approvals and can't accomplish what they need to.

Executive Officers are working with Contracting Officers for performance metrics in operational areas where problems have been identified. Currently, there is a set of 7 metrics developed ranging from reports on requisition delays, Govtrip errors report, etc. These are available as Discover reports and we can get this information from finance. Bryce Redgrave inquired if anyone has put this together information in a quick-to-access fact sheet. Liz Fowler explained that there is a document for guidance and a set of slides that describes the reports. She will send this information to Bryce Redgrave.

There were no IT updates to report. Shirley Alvarez queried if there is an IT awards nomination process for the next IT conference, and Charles Gepford explained that currently, there is not.

VI. NCCEO Committee Reports

1) IHSL:

Alan Barlow noted that he attended the IHSL conference call chaired by Dr. Annette. However, he did not have the minutes available for a report on the conference call.

2) NBOC:

No report

3) CHSO:

Gary Wabaunsee explained that the next CHSO meeting will be today at 12:30 pm. From the last meeting, HQ reported on the # of CHEF cases for IHS, totaling \$48 million in distributed funds and additional cases still out there--\$10 million in open cases remain.

Gary Wabaunsee explained that Letters regarding patient liability when services are covered by CHS (as articulated in the IHCIA) were related to CHSOs. This information will be released to CEOs as well.

VII. OTHER AGENDA ITEMS (TIME PERMITTING)

1) IHS Partnerships: Flinders University (Australia)

Bennie Yazzie explained that the Flinders University (FU) came to Gallup to try and develop a partnership with the facility. FU has established an accelerated medical school program wherein AI/AN students can go and complete the program courses that will allow them to work with the aboriginal people in Australia. However, after more research, it was discovered that IHS would not be able to provide resources for students to attend this program because their funding resources are limited to national programs. Consequently, funding issues remains.

Bennie Yazzie would like to schedule the group to come and give us a presentation on their program. Shirley Alvarez inquired about the costs of the program and Bennie Yazzie replied that tuition, room and board, and other related costs would be required. He does not have a specific figure regarding how much per year would be required---FU is still trying to sell the program. Bryce Redgrave noted that if you look at the educational costs for medical schools, hospitals and clinics, it seems much cheaper over seas. Michael Christensen noted that rural dental programs have been utilized in Alaska, and there seems to be a direct parallel with what is being suggested here.

There was discussion regarding whether to invite FU to the upcoming Combined Councils meeting. Shirley Alvarez suggested that "more homework" needs to be done before we take this step to inquire about whether this is something HQ would even entertain. Adoption of this suggestion was implied, and we will revisit this topic later.

VIII. ADJOURNMENT

The meeting adjourned at 1:09 PM, EST.