Meeting Highlights and Action Plan

Topic	Key Points	Action Items *Including Responsible Party/Timeline if applicable*
Task Force Members	Sydnee Gilliam, Lisa Saunders, Kadie Maloney, Kim Bishop Grace, Gloria Smith, Connie Kendall, Debi Henderson, Laurel Kerr, Suzie Carey, Andy Dill, Pilar Gonzalez-Mock, Marianne Potina, Amanda Hobbs, Ron Mayse, Lindsey Hardacre, Joy Rogers, Natalie Huber-Raiff, Holly Langhurst, Paul Weber, Christina Conover, Charles Patterson	
Healthy Community Overview	• Task force team had a brief discussion on what a healthy community looks like. Some of the main points that were discussed by the task force team are stated below. Ex: Tobacco free, Improved access to care (not enough professionals so coaching is needed), Active/Fit community, Funding for substance abuse, Youth involvement-various ages, Maintenance of chronic conditions, Access to education (prioritize in budgets), Health literacy, Manage chronic pain	
Data Overview	• Discussed what data was surprising to the task force team. - High School data - the percentage of students who did not see a doctor or nurse for a check-up or physical exam when he or she was not sick or injured during the past 12 months (high percentage of individuals that do not show up for appointments at RHC). - One challenge that the task force team came up with is what if the screening finds a problem then what will the cost be? - The percentage of grandparents who have taken care of their grandchildren (some individuals in the room disagree with this). - The lack of consistent messaging from healthcare providers - Percent of respondents who have been told they have prediabetes (some are not aware of the risk or told about the risk). • Team members discussed what data might be missing. - Sleep data - Health literacy (how are they understanding the questions you are asking) - Alzheimer's (Alzheimer's Association to help with data) - Self Harm (cutting....etc.) - Geography (GIS system to identify locations) - Vitamin Deficiency - Adequate pain management - Access to technology (Fitbit) - People who are actively care giving - has this affected your health? - Medication that you can afford - Cross reference of the number of people who have health coverage and seeking care	

	• 3. Team talked about the data points we would like to focus on the most. - Asthma/COPD (challenge: living environment) -Tobacco Use (impact to smoker, poverty) -Prevention (increase exercise, nutrition, sleep) ***Note: Patients who went to the hospital and were admitted due to diabetes and did not have a primary care physician when discharged were given the opportunity for the hospital to call RHC to set up an appointment before discharged. Per Dr. Teegala, RHC saw 90-100 new patients due to making an appointment before discharged and with that 90-100 people, nobody has been back to the hospital since having a primary care physician.	
Next Meeting: Monday February 8, 2016 8:00AM Rocking Horse Center Board Room		