

Board of Governors

Executive Community Advisory Committee

Meeting Minutes – November 8, 2017



L.A. Care
HEALTH PLAN

L.A. Care Health Plan, 1055 West 7th Street, Los Angeles, CA 90017

ECAC Members	RCAC Members/Public	L.A. Care Board of Governors/Staff
<p>María Adela Guadarrama, <i>RCAC 1 Chair</i> Ana Rodriguez, <i>RCAC 2 Chair</i> Cynthia Contreas-Wood, <i>RCAC 3 Chair, ECAC Vice-Chair *</i> Michael Shelton, <i>RCAC 4 Chair</i> Maria Sanchez, <i>RCAC 5 Chair</i> Andria McFerson, <i>RCAC 6 Chair</i> Fátima Vázquez, <i>RCAC 7 Chair</i> Maria Montes, <i>RCAC 8 Chair</i> Cristina Deh- Lee, <i>RCAC 9 Chair, ECAC Chair</i> Leticia Navarro, <i>RCAC 10 Chair *</i> Elsa Gervacio, <i>RCAC 10 Vice-Chair</i> Lluvia Salazar, <i>RCAC 11 Chair</i> Elda Sevilla, <i>At Large Member</i> Deaka McClain, <i>At Large Member</i> Demetria Saffore, <i>CCI Area 1 Chair</i> Wilma Ballew, <i>CCI Area 2 Chair</i> Brenda White, <i>CCI Area 3 Chair</i> Nesima Istrefi, <i>CCI Area 4 Chair</i></p>	<p>Maria L. Caballero, <i>RCAC 1</i> Estela Lara, <i>RCAC 2</i> Adán Fernandez, <i>RCAC 3</i> Hercilia Salvatierra, <i>RCAC 4</i> Ana Santiago, <i>RCAC 4</i> Romalda Meza, <i>RCAC 5</i> Olivia Avalos, <i>RCAC 6</i> Maria Manjarrez, <i>RCAC 7</i> Maria Isabel Tamayo, <i>RCAC 8</i> Bungly Buth, <i>RCAC 9</i> Engracia Lopez, <i>RCAC 10</i> Marcia Ramos, <i>CCI Area 1</i> Robert G. Harvey Dixon, <i>CCI Area 3</i> Jo Lyn Horton, <i>CCI Area 3</i> Stefanie Mangoue, <i>Shields</i></p> <p>Eduardo Kogan, <i>Interpreter</i> Paula Alvira, <i>Interpreter</i> Sina New, <i>Interpreter</i> Bo Uce, <i>Interpreter</i></p>	<p>Hilda Pérez, <i>Member, Board of Governors</i> Layla Delgado-Gonzalez, <i>Member Advocate, Board of Governors</i> Richard Seidman, MD, <i>Chief Medical Officer</i> Jennifer Carabali-Cunningham, <i>Committee Liaison, Board Services</i> Grace Crofton, <i>Director of HO&A Quality Performance Management</i> Idalia De La Torre, <i>Field Specialist Supervisor, CO&E</i> Kristina Chung, <i>Community Outreach Field Specialist, CO&E</i> Auleria Eakins, <i>Community Outreach Manager, CO&E</i> Felicia Gray, <i>Community Outreach Liaison, CO&E</i> Laura Garcia, <i>Health Promoter Liaison CO&E</i> Hilda Herrera, <i>Community Outreach Liaison CO&E</i> Judy Hsieh Bigman, <i>Senior Communication Specialist, Communication and Community Relations</i> Rudy Martinez, <i>Safety and Security Specialist, Facilities Services</i> Linda Merkens, <i>Manager, Board Services</i> Nancy Molina, <i>CCI Liaison</i> Courtney Nicholas, <i>Community Outreach Field Specialist, CO&E</i> Francisco Oaxaca, <i>Senior Director, Communication & Community Relations</i> Jose Ricardo Rivas, <i>Community Outreach Liaison CO&E</i> Victor Rodriguez, <i>Community Outreach Liaison CO&E</i> Aileen Sanchez, <i>Department Assistant, CO&E</i> Martin Vicente, <i>Community Outreach Field Specialist, CO&E</i> Mariah Walton, <i>CCI Field Specialist</i> David Wedemeyer, Sr. <i>Director of Quality Improvement & Health</i> Jesucita Zuniga, <i>Member Retention Unit, Member Services Department</i></p>
<p><i>* Excused Absent ** Absent</i> <i>*** Via teleconference</i></p>		

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	Cristina Deh-Lee, <i>ECAC Chairperson</i> , called the meeting to order at 10:05 a.m.	

	Chair Deh-Lee asked for a moment of silence for a RCAC 9 member, Samnieng Rous, who passed away.							
APPROVE MEETING AGENDA	<p>Andria McFerson, <i>RCAC 6 Chair</i>, asked for clarification of the meeting guidelines for storytelling. Auleria Eakins, <i>Community Outreach Manager, CO&E</i> responded that the guideline is intended to have speakers get quickly to the main point of their comment.</p> <p>Chair Deh-Lee reported that John Baackes, <i>Chief Executive Officer</i>, is not able to attend today's meeting.</p> <p>The Agenda for today's meeting was approved as amended.</p>	Approved. 15 AYES, (Ballew, Deh-Lee, Gervacio, Guadarrama, Istrefi, McClain, McFerson, Montes, Saffore, Salazar, Sanchez, Sevilla, Shelton, Vazquez and White).						
APPROVE MEETING MINUTES	<p>Deaka McClain, <i>At Large Member</i>, noted that on page six she is described as a Health Promoter, which she is not.</p> <p>The meeting minutes for October 11, 2017 were approved as amended.</p>	Approved. 15 AYES						
STANDING ITEMS								
ECAC CHAIR PERSON REPORT	<p>ECAC Chair Deh-Lee presented a motion to approve new member for CCI Council Area 4:</p> <p><u>Motion ECA 100.1117</u></p> <p>To approve the following candidate(s) as members of the Regional Community Advisory Committees (RCAC) and Coordinated Care Initiative Councils (CCI), as reviewed by the Executive Community Advisory Committee (ECAC) during the November 08, 2017 ECAC meetings.</p> <table border="1" data-bbox="562 954 1669 1071"> <thead> <tr> <th>Name</th> <th>RCAC/CCI #</th> <th>Type of Member (Agency, if applicable)</th> </tr> </thead> <tbody> <tr> <td>Tina Johnson</td> <td>CCI Area 4</td> <td>Consumer</td> </tr> </tbody> </table>	Name	RCAC/CCI #	Type of Member (Agency, if applicable)	Tina Johnson	CCI Area 4	Consumer	Approved unanimously. 15 AYES
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Tina Johnson	CCI Area 4	Consumer						
UPDATE FROM CHIEF MEDICAL OFFICER	<p>Richard Seidman, MD, MPH, <i>Chief Medical Officer</i>, introduced David Wedemeyer, <i>Senior Director, QI and Health Assessment, Quality Improvement</i> and Grace Crofton, <i>Director Health Outreach & Analysis, Quality Performance Management</i>, who made a presentation about the Importance of Measurement: Healthcare Effectiveness Data and Information Set (HEDIS).</p> <ul style="list-style-type: none"> • HEDIS is a set of standard metrics used by health plans and health care agencies to measure whether members are accessing and getting the right quality of care <ul style="list-style-type: none"> ○ HEDIS makes it easy for members to compare how health plans perform ○ Health plans use HEDIS results to see where they need to improve ○ HEDIS asks how much the members like the care they receive ○ HEDIS measures the quality that our members receive ○ HEDIS shows where L.A. Care ranks compared to other health plans 							

- Good HEDIS results allow more members to be part of LA Care if they have not signed up with another plan
- L.A. Care has identified some HEDIS measures as a first step to improving care
 - Managing diabetes
 - Women's health
- About 26 million people in the US have diabetes and many do not know they have it. It is the seventh leading cause of death in the US. Many problems such as blindness and kidney problems can be stopped if found in the early stages. Diabetic members is urged to visit their doctor regularly for:
 - Blood sugar test
 - Eye exam
 - Testing for kidney problem
 - Blood pressure check
- Healthy diet, vitamins, and regular visits to the doctor early during pregnancy is so important to keeping moms healthy. Regular visits to the doctor can prevent miscarriages, low birth weight babies, and other complications. All pregnant women are urged to:
 - Get care early in their pregnancy and continue to see their doctor regularly throughout the pregnancy
 - Shortly after giving birth, women should see a doctor to check for any problems
- Breast cancer is the second most common type of cancer found in American women. In 2013, more than three million women had breast cancer. It is most common among women ages 55-64
 - Early findings from an x-ray of the breast gives women a better chance to survive
 - Women who are 50 years and over need to get tested every two years
- Chlamydia trachomatis is the most common sexually transmitted disease in the U.S. About three million people are infected with chlamydia each year. Most women who have the condition do not know that they are infected. Sexually active women are urged to get a screening every year to prevent further damage to their reproductive health.
- The American Cancer Society recommends that women get cervical cancer screening starting at 21 years.
 - Cervical cancer can be found early by a Pap test. Women who are sexually active should get tested often, every one to three years
 - If found early, cervical cancer is one of more "treatable" cancers
 - Women can get the Pap test without a referral

Ms. Crofton noted that L.A. Care is planning to work with RCAC representatives starting first quarter 2018 to promote comprehensive diabetes management and preventive care screenings for women.

	<p>Demetria Saffore, <i>CCI Area 1 Chair</i>, asked why people with type two diabetes cannot check their blood sugar more than twice a day. Mr. Wedemeyer responded that the provider prescribes the testing frequency. Ms. Saffore noted that she was informed that L.A. Care only pays for once a day testing.</p> <p>Ms. McFerson shared that mental health has to be discussed. There are services that the community is not aware about. Mr. Wedemeyer noted that L.A. Care is tracking mental health.</p> <p>Elsa Gervacio, <i>RCAC 10 Vice Chair</i>, asked if the information will be part of a flyer in both Spanish and English. Idalia De La Torre, <i>Field Specialist Supervisor, CO&E</i>, responded, information will be part of the ECAC report. Also, Dr. Seidman will be attending the December 15 conference.</p> <p>Nesima Istrefi, <i>CCI Area 4 Chair</i>, expressed that she is concerned about patient education. Children need to be educated about good health decisions early on. Mr. Wedemeyer responded that education is vital.</p>	
<p>COMMUNICATION AND COMMUNITY RELATIONS UPDATE</p>	<p>Francisco Oaxaca, <i>Senior Director of Communications and Community Relations</i>, reported:</p> <ul style="list-style-type: none"> • Tanisia Johnson is the new Supervisor for the Health Promoters Program. She has over 10 years' experience in community health education in this country and she supervised a health promoters program for three years in Argentina. • There will be two full-time L.A. Care employee community worker positions, which will be filled within the next few months. • Health Promoters are being considered for participation in other types of efforts for different departments at L.A. Care. There is going to be a collaboration with members who have diabetes to learn to do a better job in managing their condition by tracking their progress. Health Promoters have been recruited to meet with members to explain about the new testing. After careful evaluation of the Health Promoter program staff recognizes that we need to increase diversity. Communities throughout Los Angeles County are very different as some speak different languages and have different cultures. We need to have Health Promoters that reflect the communities that we serve. The Health Promoter program will be restructured to include Health Promoters that are ready to take on the most sophisticated type of work that are being asked of them to get involved in, and new presentation topics and training will be offered to the community. • Beginning in January, the program will be paused for about three months, for Ms. Johnson and Mr. Oaxaca to go through a process of reviewing applications for any individual they would like to become participants the new program. Staff will actively recruit at the community level to find individuals who meet the requirements of the new program. Mr. Oaxaca thanked all the Heath Promoters for all the work that they have done and he hopes to continue working with those who are qualified for the next phase of the program. 	

	<ul style="list-style-type: none"> • A end of year stipend will be distributed in December and January to members in recognition of their hard work throughout the year. Mr. Oaxaca added that he personally appreciates all of the members' patience in navigating the changes this year. • Mr. Oaxaca shared a video with the Committee of the Adaptive Equipment Vendor Fair. <p>Ms. McFerson shared that Health Promoters is a great program, but it has not been available to the African American community in Inglewood. Family Resource Centers (FRCs) offer training that is not offered at the Inglewood FRC. Mr. Oaxaca responded that Health Promoters are not integrated at each FRC. L.A. Care is currently evaluating Health Promoters being integrated into programs at the Palmdale FRC, with a goal to have Health Promoters at each FRC. Ms. McFerson added that some Health Promoters are disabled but will still want to be able to participate.</p> <p>Wilma Ballew, <i>CCI Area 2 Chair</i>, asked if the requirements are changing for the services provided at the FRCs. Mr. Oaxaca responded that staff is looking at each community to determine what services will be provided at each FRC according to the needs of each community.</p>	
<p>GLOBAL MEMBER ISSUES</p>	<p>Ms. Saffore shared that there is a shortage of doctors at the Antelope Valley Community Clinic. The appointment wait time is more than 90 days. She asked that L.A. Care look into this problem.</p> <p>Layla Delgado-Gonzalez, <i>Member Advocate, Board of Governors</i>, asked if staff can provide a report on how many grievances have been filed about the lack of doctors and long appointment wait time at the Antelope Valley Community Clinic.</p> <p>Ms. Istrefi shared that members in her CCI are having problems with replacement of batteries for their medical equipment, and authorization for transportation is taking up to three months to get approved. Taxi drivers are arriving late to pick up, which in return causes members to arrive late to their appointments.</p> <p>Ms. McFerson noted that there is a long wait time for follow up appointments and other appointments in general. There is a need for availability.</p> <p><i>(Ana Rodriguez, RCAC 2 Chair joined the meeting)</i></p> <p>Ms. McClain shared that transportation approvals expire but members are not notified and they schedule doctor appointments. The member then does not have access to transportation.</p> <p>Ms. De La Torre responded she will work with staff to present information to members at a future ECAC meeting on the new transportation process. She advised chairs to go to their committees and ask members if they are having transportation issues.</p> <p>Ms. McFerson shared that case and social workers at hospitals need to be educated on L.A. Care services.</p>	

	<p>Marcia Ramos, <i>CCI 1 member</i>, shared that there are issues in the Antelope Valley Community Clinic urgent care. Patients who go to the urgent care are sent to the hospital as the clinic is short staffed and have wait times of four hours and longer. A child was waiting four hours with 104-degree fever. No mask or hand sanitizer are offered. They asked her five times to go to the emergency room. Follow up appointments take five months or longer. Her test results were given to her by staff not a provider. People who pay for services at the urgent care get seen first. The social workers at the Antelope Valley Community Clinic are taking weeks to contact high risk patients.</p> <p>Chair Deh-Lee shared she called L.A. Care's nurse hotline to find out which was the closest urgent care site. They sent her to Healthcare Partners who refused to serve her as they do not have a contract with L.A. Care. They referred her to another urgent care that was 20 miles away. Chair Deh-Lee requested a follow up on motion passed by ECAC about urgent care and their guidelines.</p> <p>Ms. McClain shared that during the CCI Council Area 4 meeting member services staff assisted her and even called her doctor to make sure her durable equipment issue was taken care of. The issue did not involve L.A. Care, but the member service staff still helped her solve the issue. Ms. McClain thanked all staff for all they do.</p>	
<p>NEW BUSINESS</p>		
<p>SECURITY AND EMERGENCY PREPAREDNESS PRESENTATION AND MOCK FIRE DRILL</p>	<p>Rudy Martinez, <i>Safety and Security Specialist</i> presented a PowerPoint about security and emergency preparedness.</p> <ul style="list-style-type: none"> • The City of Los Angeles High-rise building Evacuation Ordinance Title 19 – Sec. 57.33.19 requires high-rise buildings: <ul style="list-style-type: none"> ○ 14 days' occupant training ○ Floor Warden training certification ○ Mandatory Annual Evacuation Drills • L.A. Care has emergency response teams on each floor that consist of the following: <ul style="list-style-type: none"> ○ Floor Warden ○ Asst. Floor Warden ○ Group Leader ○ Stairwell Monitor ○ Elevator Monitor ○ Search Monitor ○ Special Asst. Monitor • If you hear or see an alarm you should: <ul style="list-style-type: none"> ○ Remain calm ○ Exit the room and head towards the nearest stairwell 	

- Follow the direction of the L.A. Care staff or the P.A. system
- Enter the stairwell and hold on to the inside hand rail.
- Walk down five floors and enter the 5th floor or exit to the safe refuge area as directed.
- If on the 2nd floor, you will exit the building and walk towards Ingram Street.
- Once at the 5th floor or Safe Refuge area, wait for direction from L.A. Care Staff / Building Personnel or L.A. Fire Department
- Emergency evacuation plan during an ECAC meeting:
 - Let the L.A. Care staff know you need assistance.
 - L.A. Care has assigned staff to assist all guests.
 - If you hear or see an alarm
 - Disabled individuals will be escorted to the nearest stairwell.
 - Upon arrival at the stairwell, wait for all occupants to exit
 - When all clear of exiting occupants, a disabled individual will be placed inside the stairwell corner until a trained Emergency Responder arrives.
 - One monitor will stay with you inside the stairwell; a second monitor will go to the Safe Refuge area and report the number of people still on the floor who will need assistance to evacuate.

Mr. Martinez encouraged members to collaborate with L.A. Care staff, and “if you see something, say something.” He reminded all visitors to wear the visitor name sticker.

Ms. McClain asked if there is an evacuation chair available. Mr. Martinez responded that procurement of an evacuation chair is under discussion.

Estela Lara, *RCAC 2*, asked how many floors the building has. Mr. Martinez responded 33 floors. L.A. Care occupy approximately 17 floors, 1st floor up to the 20th floor, excluding the 17th floor.

Hilda Pérez, Member, *Board of Governors*, shared that people with disabilities are at a disadvantage. She would like to see an evacuation plan prepared for the disabled members that participate in the meetings. This issue is important and the discussion has been held for too long. The preparation plan should be put into place quickly.

Ms. Istrefi asked if there could be a special elevator for individuals who use wheelchairs. Mr. Martinez responded that no elevators will be used for evacuation as they could malfunction.


	<p>María Adela Guadarrama, <i>RCAC 1 Chair</i>, asked about an evacuation plan for a bomb threat. Mr. Martinez responded the directions are to take shelter-in-place and wait directions from the Los Angeles Police Department.</p> <p>Ms. McClain asked if there could be a special elevator for people with disabilities for general use. Mr. Martinez responded that can be discussed. He noted that during a power outage one elevator will be working.</p> <p>Mr. Oaxaca noted that there will be transportation in case of an emergency or disaster to ensure that you safely get to wherever you need to go. If there is a delay in transportation because of a disaster and members are at L.A. Care offices, there are resources and supplies to shelter in place.</p> <p>All members and staff participated in an evacuation drill.</p>	
<p>FUTURE AGENDA ITEMS</p>	<p>Ms. Istrefi asked for more information for special needs resources as some members are unaware of available services.</p> <p>Board Member Delgado-Gonzalez asked if a presentation can be done on the requirements of the Americans with Disabilities Act for durable medical equipment.</p> <p>Ms. McFerson asked for a discussion about planning for transportation in case of an emergency, and a discussion on how L.A. Care can help Measure H.</p> <p>Chair Deh-Lee asked for more information about how to handle an emergency at home.</p> <p>Ms. McFerson asked for more information about the Khmer work group.</p> <p>Ms. McClain asked for an update on Cultural and Linguistic (C&L) Department materials. Ms. De la Torre responded that staff from the C&L Department will be attending the December ECAC meeting and will visit all RCAC Committee meetings.</p> <p>Ms. De La Torre reminded all that not all requests will be on next month's agenda. Mr. Oaxaca added that that requests will be prioritized for future meeting agendas.</p>	
<p>PUBLIC COMMENT</p>	<p>Ms. De La Torre reminded the Committee that the next ECAC leadership training will take place on November 15 at The Reef, and will cover Roberts Rules of Order and meeting etiquette.</p> <p>Member Perez requested that CCI councils be included in the membership graph. She expressed concern about membership in CCI council Area 2. She would like to see what recruitment efforts have been done in that area.</p> <p>Ms. Guadarrama thanked staff for providing members with Care Harbor flyers. She suggested that taxis transporting people from the Antelope Valley area should start their commute to L.A. Care as soon as the taxi is full.</p>	

	<p>Maria Montes, <i>RCAC 8 Chair</i>, thanked L.A. Care for helping her with a medical cost situation.</p> <p>Ms. Istrefi thanked all staff for their help. She suggested that meeting materials be printed in a larger font.</p> <p>Ms. McFerson encouraged more activities and events that include the African American community.</p> <p>Ms. McClain thanked staff for their help. She will visit all CCI Councils and to become more familiar with each community. She attended a CCI Council Area 2 meeting. She added that she is setting up a meeting with CCI Council stakeholders to ask for input on how to improve the councils.</p> <p>Chair Deh-Lee expressed how proud she is about this group's achievement in getting durable equipment for providers.</p> <p>Hercilia Salvatierra, <i>RCAC 4</i>, shared that the receptionist on the first floor was not able to locate her name in the system.</p>	
ADJOURNMENT	The meeting adjourned at 12:55 pm.	

RESPECTFULLY SUBMITTED BY:

Jennifer Carabali, *Committee Liaison, Board Services*
Linda Merkens, *Manager, Board Services*

APPROVED BY


Christina Deh-Lee, *ECAC Chair*
Date 12/13/17