**Agenda**

1. **Welcome and Introductions
(9:30 – 9:40 a.m.)**
* Attendees:
	+ Bell County Public Health District – Renee Stewart
	+ Bluebonnet Trails Community Services – Vicky Hall & Beth McClary
	+ Center for Life Resources – Joey Smith & Tyson Hunt
	+ Lone Star Circle of Care – Lindsey Ripley
	+ Scott and White Hospital Llano - Kim Schroeder
	+ Seton Highland Lakes – Crissy Calvert
	+ RHP 8 Anchor Team – Jennifer LoGalbo
	+ RHP 8 Anchor Team – Gina Lawson
	+ Williamson County Emergency Medical Services – Pauline VanMeurs
1. **Goals and Purpose of Cohort
(9:40 – 9:50 a.m.)**
* Group actively brainstormed ideas about how to direct this cohort moving forward. Team decided this first meeting would be about tossing out ideas and later deciding on the structure at a workshop in August. Some of the ideas about areas the group could focus efforts on exploring included:
* Above all the group wants to narrow down the goals to continuously improve the projects they are implementing.
* The group also decided to look other Provider projects in the region and how to navigate patients to these resources – create RHP 8 community resource guide (list by county and/or service).
1. **Group Activity: Tabletop Discussion
(9:50 – 10:30 a.m.)**
* Group spent time discussion common barriers they encounter:
	+ Provider with community medicine project explained 48-hour hospital discharge care plan where patient has medications prescription but no means of purchasing it, and/or nor means of picking it up is a big problem in this region. Medication is too expensive and the time it takes to get approved for Medicaid or other patient assistance program is too long (10 days).
	+ Patient needs primary care or behavioral health services but falls is “gap” because doesn’t meet eligibility requirements. What are these patients supposed to do? How can we help them? Possibly do house visits in more urban areas with more staff.
	+ Telemedicine – WIFI/slow connectivity issues, encrypting services – Providers find that patient satisfaction declines when patients are using bad connections and/or hinders Provider from efficiently sharing data.
	+ Lack of support groups in rural areas. Many online support groups, but older population not as technologically savvy. Churches are a resource for support groups (grief, divorce, AA).
* Other:
	+ Invite experts/speakers to give presentations to the group
	+ E.g., CARTS – Transportation service
	+ Other RHP tool for identifying aims/goals – 4 quadrant example from Jennifer
	+ High/low impact
	+ Easy/Hard implementation
1. **Cohort Development**

**(10:30 – 10:45 a.m.)**

1. Identify other potential group participants
2. Review sample cohort charters
3. **Next Steps/Adjourn Meeting
(10:45 – 11:00 a.m.)**
4. Determine meeting frequency and type (e.g., conference call, in-person meetings, etc.)
5. Decide on next cohort meeting date to focus on development of group charter, goals, and aims
6. Select “spokesperson” for cohort update for RHP 8 bi-weekly conference call scheduled August 5; 9:00 - 10:00 a.m.
* August 14, 1 – 4pm, Seton Highland Lakes conference room address: Seton Highland Lakes Hospital 3201 South Water Street Burnet, TX 78611
	+ Group will meet every 2-3 weeks in-person at different cohort member locations in the beginning, and then host conference calls as needed.
	+ Cohort charter development – define process improvement area - review cohort packet and meeting materials before the next meeting.
	+ Identify goals, aims, common themes, resource gaps in the region – submit ideas to Joey before the meeting for him to compile. Joey.smith@cflr.us
* Crissy Calvert will present a summary of the meeting on August 5 at the RHP 8 Bi-weekly conference call.
	+ Someone from the group will present a meeting summary on the bi-weekly conference call that follows each meeting.
* Sign-up for Google groups to post questions, ideas, community resource guides! <http://www.tamhsc.edu/1115-waiver/rhp8/lc/forum.html>