SC Telehealth Alliance Advisory Council
Meeting Minutes

Date:	Thursday, January 11, 2017
Time:	1:00PM – 3:00PM
Location:	SC Department of Mental Health
Present:	Amelia Bischoff (Palmetto Health), Robert Bank (SCDMH), Stewart Cooner (SCDMH), Katie Cristaldi (MUSC), Rick Foster (SCHA), Don Godish (SCETV), Adrian Grimes (MUSC), Sam Head (SCDHHS), Lisa Hines (GHS), Ryan Kruis (SCTA), John Magill (SCDMH), Webb Mccall (McLeod), Jimmy McElligott (MUSC), Christianna Novakovic (GHS), Blix Rice (GHS), Kathy Schwarting (PCC), Ashley Springs (McLeod), Amanda Williams (SCDHHS)
Facilitated by:	Jimmy McElligott
Recorded by:	Ryan Kruis
Next meeting:	Thursday, February 15, 2018 from 1-2PM via phone
	Conference line: 843-876-8703 | Passcode: 728282

1. **Welcome and Introductions**

2. **SCTA Procedural and Operational Items**
    a. **Council membership**
        - *At-large membership:* The co-chairs proposed adding three at-large SCTA advisory council positions, which would be filled by individuals based on their expertise and/or the organizations they represent. Adding these seats to the charter would align the policies and procedures to the current council make-up and clarify some confusion of roles. In addition to adding three at-large members, the co-chairs proposed dropping the number of rural providers from two to one. No one voiced opposition to the proposed changes. Below is the proposed council make-up, including the name of the person currently filling each role:

Seat	Person
MUSC Health (co-chair)	Jimmy McElligott
Palmetto Care Connections (co-chair)	Kathy Schwarting
General Assembly #1	Rep. Murrell Smith
General Assembly #2	Sen. Thomas Alexander
Department of Mental Health	John Magill
ETV	Don Godish

DHHS	Amanda Williams
McLeod Health	Matt Reich
Palmetto Health	Amelia Bischoff
Greenville Health System	Lisa Hines / Blix Rice
At-Large #1	Meera Narasimhan (representing USC-SM and SCTA outcomes work)
At-Large #2	Rick Foster (representing SC Health Alliance, SCHA)
Rural Health Provider	*Danette McAlhaney – to be replaced*
Community Hospital	*Vacant*
At-Large #3	*Vacant*

- *Filling vacancies:* The nominating committee (Kathy Schwarting, Rick Foster) is in the process of finalizing names of individuals to present to the council to fill the current vacancies (Rural Health Provider, Community Hospital, and At-Large Seat). They plan to present their recommendations to the council at the upcoming interim call on 2/15/18.
- *Organizations not represented on the council:* The co-chairs are also exploring avenues to involve other stakeholder organizations not already at the advisory council table (e.g. Children's Telehealth Collaborative, Spartanburg Regional, other hospital systems, etc.). This is included as a milestone for the Strategy 6 of the 2018 strategic plan. As a first step, council members are encouraged to send Ryan Kruis the names of organizations which they think should be included in this engagement effort.

b. **Policy and procedures/charter review**
- Kruis reviewed the proposed changes to the operating procedures for the council. The main changes include:
  - Updating the membership to include at-large members.
  - Specifying DMH's role as a specialty hub.
  - Cleaning up some language for the sake of clarity.
- The group voiced no opposition to the proposed changes; the SCTA will seek to have these proposed changes approved legislatively.

c. **Budget overview**
- Dr. McElligott provided an overview of the proposed SCTA budget, projected out 6 years. In doing so, he highlighted the following:
  - Last year the legislature increased the SCTA's recurring budget from $8M to $10M and provided one-time proviso funding in the amount of $9M to catalyze service development.
  - With these funds in place, the SCTA is poised to provide heightened funding for service development—both to statewide programs and to the hubs—for the next 5 years.

- Based on this budget, the SCTA is projected to be operating solely on its $10M recurring dollar budget in FY23.
  - The group discussed the importance of planning ahead given the projected drop to recurring dollars in FY23. In particular, the group noted wanting to develop a clear message about this reduction in funding to external parties, making evident that this drop merely signals the end of the service development phase and not a reduction in the quality or volume of services provided. Additionally, the group noted value in the hubs developing sustainability plans—this can be incorporated into future strategic planning sessions.

d. **Contracts**
  - *SC Department of Mental Health*: The SCTA's contract with SC DMH for their work as a specialty hub and leader of Strategy 4 has been drafted and is in review. The contract totals up to $3M over 2 years.
  - *Spartanburg Regional Healthcare System:* This contract with SRHS has been executed and amounts to $450,000 spread over two years. The funds go toward (a) a clinical telehealth leadership position to assist with implementing school-based and other telehealth services and (b) a home health initiative focused on telehealth remote monitoring. Kathy Schwarting, Dr. McElligott, and Dr. Foster will be making a site visit to SRHS on 1/29 to discuss their plans in more detail.
    - Council members noted that SRHC may have received Duke Endowment funds for telehealth, and encouraged those conducting the site visit to learn more the use of these funds and how they might be leveraged alongside SCTA dollars.

3. **General SCTA Updates**
   a. **2018 Strategic Plan: SC DMH Strategy 4 Update**
      - SC DMH has been charged as a specialty hub to lead Strategy 4, which is focused on the use of telehealth to address mental health and addictive disease. They are in the last stages of finalizing their strategy based on feedback from their planning members and will be sharing the final version with the council once complete.
   b. **2018 SCTA Implementation and Evaluation Grants**
      - The SCTA Implementation and Evaluation Grants are live. The RFA is available on the SCTA website, and the deadline for applications is 2/26/18.
      - Council members are encouraged to spread the word about this funding opportunity.
   c. **Reporting update**
      - Kruis reminded council members that he is collecting data for the 2017 SCTA Annual report as well as the CY17 Quarter 4 report. Deadline for data is 1/26/18.
      - Additionally, SCETV is working with hubs to take photos to add to our stock photo collection available for the production of reports.
   d. **SCTA website**

- Kruis reminded the council that the new SCTA website is live (http://www.sctelehealth.org/) and encouraged them to continue to send feedback about edits that can be made to the product.
- One of the new features on the website is the Program Request Form. This will be a form that organizations can complete to receive equipment and/or consultation from the SCTA. Council members are encouraged to refer interested entities to this resource.

e. **Salesforce**
- Adrian Grimes reminded the group on the upcoming Salesforce training on 1/16.
- The SCTA is planning to use Salesforce to track engagement with sites across the SCTA network, with hopes that it fosters increased coordination and collaboration.

f. **APRN legislation update**
- The advanced practice legislation that the SCTA assisted the SCHA in drafting was filed on Tuesday 1/9/18 and was referred to the House Medical, Military, Public and Municipal Affairs Committee.
- The bill number is H.4529, and can be found online here.

4. **Next SCTA Meeting:**
   Interim Call
   Thursday, February 15, 2018 at 1PM
   Conference line: 843-876-8703
   Passcode: 728282