

## Colorado Community CONNECT Call Transcript

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00:00:00.570 --> 00:00:04.980

Meredith Koob: And then we have the topic of conversation today is.

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00:00:06.000 --> 00:00:11.880

Meredith Koob: going to be immunization rates and we're going to spend a little bit of time doing a root cause analysis together.

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00:00:12.570 --> 00:00:25.710

Meredith Koob: In order to get to know each other, a little bit more personally, we thought it might be fun to continue to include just a little personal facts about ourselves, and for me.

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00:00:26.730 --> 00:00:36.480

Meredith Koob: Today Courtney, and I are going to share where we were born and raised so for me I grew up in a real small town in Northwest rural Nebraska.

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00:00:36.990 --> 00:00:55.860

Meredith Koob: That at that time had a population of about 1200 people by with guests that it's probably smaller than that, today, but just really grateful for my rural routes that has given me a huge appreciation for the work that we do with all of our girl folks so.

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00:00:58.020 --> 00:01:07.920

Meredith Koob: As I mentioned we're going to talk a little bit about immunization rates and some of the data related to imminent vacations and then to take a deep dive.

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00:01:08.640 --> 00:01:17.700

Meredith Koob: And to some of the challenges you're seeing in your communities so I'm pleased to be with you here today and Courtney I'll turn it over to you.

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00:01:19.260 --> 00:01:22.800

Courtney Ryan: Thanks Meredith hey everybody welcome happy to stay.

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00:01:24.090 --> 00:01:37.800

Courtney Ryan: My name is Courtney Ryan I'm here quality improvement facilitator here in Colorado I'm actually I was born here in Colorado so I'm a native I was born up in Greeley, Colorado and lived in Eaton also a small rural town.

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00:01:38.460 --> 00:01:47.220

Courtney Ryan: just north of Greeley for probably the first 13 years of my life and then traveled a little bit through Arizona and Texas.

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00:01:47.910 --> 00:02:02.580

Courtney Ryan: On the rodeo circuit actually doing barrel racing and then move back to Colorado about 10 years ago with my family and hope that we're here forever I love Colorado and very grateful and thankful to live in this beautiful state, and thanks for having me here today, Mary.

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00:02:04.800 --> 00:02:10.200

Meredith Koob: Absolutely thanks so much Courtney, and I also have a great team of support today.

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00:02:10.710 --> 00:02:20.010

Meredith Koob: And that includes Nicki resellers she'll be scraping for us when we do the root cause analysis activity, you heard Michael greeting you all, as you joined.

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00:02:20.670 --> 00:02:32.070

Meredith Koob: Mary is also available for any tech issues that may arise so speaking of tech issues, we know that there are few risk associated with using the zoom platform.

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00:02:32.490 --> 00:02:41.340

Meredith Koob: And we have taken all possible precautions, but are unable to take responsibility for those risks that come along with using a third party.

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00:02:44.400 --> 00:02:54.630

Meredith Koob: So to kick it off the first question we just thought we do a quick icebreaker question here, so I am going to open up a poll.

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00:02:56.190 --> 00:02:59.010

Meredith Koob: And can you take the best guess.

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00:03:00.810 --> 00:03:05.820

Meredith Koob: Of the percent of the Colorado population that is fully vaccinated for.

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00:03:07.530 --> 00:03:08.400

Meredith Koob: In Colorado.

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00:03:11.400 --> 00:03:13.860

Meredith Koob: That way, to check in with you all.

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00:03:18.780 --> 00:03:20.340

Meredith Koob: give it a few more seconds.

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00:03:25.020 --> 00:03:28.020

Meredith Koob: Thank you all are getting some good response rates.

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00:03:30.240 --> 00:03:53.100

Meredith Koob: All right, so I will say that the most recent data that we had available was actually from February's second or February 7 I'm sorry at that time it was actually 3.4% and again that's fully vaccinated about 9.2% of Coloradans at that time.

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00:03:54.480 --> 00:03:57.300

Meredith Koob: have had at least the first dose administered.

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00:03:58.380 --> 00:04:00.210

Meredith Koob: So thanks for playing along there.

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00:04:10.500 --> 00:04:21.300

Meredith Koob: All right, let's look at what we're going to be up to together today we're going to review some data specific to influence the pneumonia and co but 19.

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00:04:21.960 --> 00:04:31.770

Meredith Koob: And then we're going to go through an interactive root cause analysis activity together related to your local experiences with vaccine administration and barriers.

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00:04:33.780 --> 00:04:44.820

Meredith Koob: So and that's for both patients residents and staff Community members you'll see that we're also going to utilize polling questions for.

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00:04:45.360 --> 00:04:53.070

Meredith Koob: Sharing from all of you on a few things, and then we also have a lot of resources that we're going to share today.

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00:04:53.490 --> 00:05:04.260

Meredith Koob: That will be coming to you, be a document so if you don't catch something by chat the are hoping to utilize just know that we have brought all of those into a resource document.

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00:05:04.770 --> 00:05:10.980

Meredith Koob: That you'll be receiving after our call today, so the time together every month.

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00:05:11.670 --> 00:05:20.580

Meredith Koob: Highly informs the tools that TV developed the events we put together and ideas for how to best support you in these challenging times.

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00:05:21.450 --> 00:05:38.670

Meredith Koob: at the highest level, though, we hope you find this time to be a support with others in our Colorado communities were all really stretch them right now, who are stressed out and really together is the only way that we're going to get through this pandemic.

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00:05:41.820 --> 00:06:01.680

Meredith Koob: not going to spend a lot of time here, other than just to say we were very intentional in thinking about what connect means to us, and so this is what we hope to pass along to you all through any of the partnership activities that we do with all of our Community partners like you.

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00:06:04.680 --> 00:06:11.640

Meredith Koob: All right, if you've been with us, before you know that we like to physically see where all of you are located so.

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00:06:12.330 --> 00:06:20.790

Meredith Koob: If you would mind up on the top of the screen, you should have the ability to view options in your zoom the screen.

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00:06:21.750 --> 00:06:39.780

Meredith Koob: Once you do that you'll see annotate if you left click on annotate and then find your star awesome thing for you, those of you that are already doing that once you select the star just left click on the county where you're located.

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00:06:42.480 --> 00:06:52.350

Meredith Koob: And if you're on phone only feel free to unmute yourself and share your name organization and where you're joining from.

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00:07:00.090 --> 00:07:09.540

Meredith Koob: If you see any other names on the call today people that you recognize from outside of intelligence feel free to chat in a quick Hello.

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00:07:12.390 --> 00:07:33.870

Meredith Koob: Very good, this is exactly what we like to see we've got some representation out West, we have some down in the far southeast corner of Colorado we've got some folks in El paso Kiowa tallamy Morgan county some urban folks joining us here from the metro area.

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00:07:35.340 --> 00:07:40.320

Meredith Koob: And that's exactly what we like to see on these calls.

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00:07:45.600 --> 00:07:48.450

Meredith Koob: All right, let me see if I can go ahead and.

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00:07:50.370 --> 00:07:51.540

Meredith Koob: The annotation.

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00:08:09.600 --> 00:08:15.270

Meredith Koob: In our past calls we've spent a few minutes talking about norms and these are some ideas that.

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00:08:16.230 --> 00:08:24.510

Meredith Koob: The attendees from past month, have brought together so take a look at what's on the slide here, and if you see anything that is not represented.

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00:08:25.230 --> 00:08:32.760

Meredith Koob: feel free to add that into chat and we'll get that added in our time moving forward, I just want to.

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00:08:33.300 --> 00:08:45.150

Meredith Koob: call out an example you see here, create opportunities to chat in smaller groups or breakout rooms, this is something that internally as a team were.

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00:08:45.810 --> 00:09:03.060

Meredith Koob: Talking about Danielle I think it with you that had this suggestion to connect more personally so moving forward we're absolutely thinking about how we might be able to utilize that opportunity, but this is essentially how we want to be together if you can't be on camera We certainly.

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00:09:04.110 --> 00:09:05.040

Meredith Koob: understand that.

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00:09:13.710 --> 00:09:14.250

Meredith Koob: Okay.

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00:09:15.600 --> 00:09:18.210

Meredith Koob: So diving into the topic at hand.

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00:09:19.290 --> 00:09:26.460

Meredith Koob: We know that focusing on immunizations not only provides an opportunity for your organization's quality improvement.

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00:09:26.940 --> 00:09:42.180

Meredith Koob: program in the areas of chronic disease management, reducing readmissions, patient safety and infection prevention, but it can also improve the health and wellness of your residents patients and Community members.

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00:09:43.380 --> 00:09:49.830

Meredith Koob: So we know that that's the nation's protect individuals and the public from life threatening and preventable diseases.

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00:09:50.820 --> 00:10:00.750

Meredith Koob: This is beneficial to healthy individuals as well as our most vulnerable populations, it helps minimize the spread of disease and.

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00:10:01.710 --> 00:10:24.240

Meredith Koob: immunizations are proven successful and also our cost effective health interventions, they also help us prevent millions of deaths every year, so really from infants to seniors, we know that immunizations protect against diseases such as pneumonia influenza, and more recently.

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00:10:30.840 --> 00:10:35.940

Meredith Koob: So we're all adults vaccinations have proven to prevent severe illnesses and death.

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00:10:36.990 --> 00:10:37.560

Meredith Koob: coming.

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00:10:38.850 --> 00:10:48.480

Meredith Koob: Related to that the risk first severe illness with koba 19 has significantly increased with age older adults being at highest risk.

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00:10:49.320 --> 00:11:00.000

Meredith Koob: We also know that certain medical conditions can also increase the risk for severe illness, especially those with chronic kidney disease cardiovascular conditions.

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00:11:00.510 --> 00:11:21.660

Meredith Koob: and diabetes, just to name a few so based on what we know about vaccinating or other diseases and early data from clinical trials experts also believe that getting the coven 19 vaccine may help keep individuals from getting seriously sick, even if a person doesn't get home at night.

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00:11:23.610 --> 00:11:35.070

Meredith Koob: So we just wanted to note that severe illness associated with is defined as hospitalization and mission to the icu intubation or mechanical ventilation or death.

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00:11:36.090 --> 00:11:44.220

Meredith Koob: And then related to flu and pneumonia these vaccines are particularly important for patients above 65 years.

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00:11:45.090 --> 00:11:54.810

Meredith Koob: or for patients who suffer from heart disease or diabetes these groups are at higher risk for developing serious complications from influenza.

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00:11:55.530 --> 00:12:06.900

Meredith Koob: And ammonia that can result in hospitalization and even death and research also shows that influence us isn't associated with an increase in heart attacks and strokes.

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00:12:08.370 --> 00:12:21.180

Meredith Koob: So Type one and type two diabetes, even if they're well managed can decrease the ability of the immune system and fighting infections, making influenza all that that more dangerous.

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00:12:22.050 --> 00:12:31.380

Meredith Koob: So an illness like influence that can make it more difficult to control, blood sugars and can result in complications, such as pneumonia and bronchitis.

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00:12:32.670 --> 00:12:49.170

Meredith Koob: The influenza and pneumonia vaccines are the best way to protect your residents and patients against these complications and keep them healthy so that's why we really want to dive into this topic 10 some of the data, a little bit more today.

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00:12:51.840 --> 00:13:01.080

Meredith Koob: So the data that you see on the screen and be patient with us we'll get through this data and then we're going to actually have some interactive time together and the root cause analysis.

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00:13:02.130 --> 00:13:08.640

Meredith Koob: What you see here is what the vaccine rates look like for flu in the.

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00:13:11.070 --> 00:13:11.820

Meredith Koob: flu season.

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00:13:13.470 --> 00:13:24.390

Meredith Koob: Both statewide and nationally over on the right, so you can see each of the parts halogen states and specifically Colorado in relation to the US so.

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00:13:25.860 --> 00:13:52.680

Meredith Koob: it'll be interesting to see, then, with the current flu season what those rates end up looking like considering the timing of the coven 19 pandemic So if you want to share in chat I'm curious, do you think our flu vaccine grades are going to increase for 2020 and 2021 lots of there.

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00:13:54.210 --> 00:14:01.140

Meredith Koob: or will they decrease in comparison to what we see in this data from the prior flu season.

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00:14:03.420 --> 00:14:12.210

Meredith Koob: So you can see, if you look at the United States rate of 51.8% yes 58.1%.

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00:14:13.260 --> 00:14:30.600

Meredith Koob: it's important to note there on the bottom chart on the right hand side that you see particular races are lower so something to really reflect on as a state and how we can increase these rates for vulnerable and underserved population.

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00:14:36.090 --> 00:14:45.930

Meredith Koob: In the next slide, this is an example of some of the intelligence produced data that we bring to our partners, based on medicare claims data.

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00:14:46.620 --> 00:15:09.930

Meredith Koob: So you can see here what we're looking at is related to pneumonia that's typically and this shows us number of admissions on the blue turn line versus the percent of this charges readmitted within 30 days, so our timeline is from July 29.



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00:15:11.010 --> 00:15:22.830

Meredith Koob: Through June 2020 over on the left, you see the scale of admissions is from about little lower than 300.

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00:15:23.970 --> 00:15:44.100

Meredith Koob: up around probably 600 and then over on the right, our range of readmission percentages again, these are discharging readmitted within 30 days for Medicare fee for service beneficiaries is anywhere from 14 to 20%.

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00:15:45.780 --> 00:15:50.970

Meredith Koob: So it's too early to tell and we don't have a lot of detail about.

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00:15:52.320 --> 00:16:09.420

Meredith Koob: What this is telling us, but this is something that we're keeping our eye on so it's It is interesting if you consider the timing of the pandemic really hit around here that we're seeing some drastic increases and drop.

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00:16:10.590 --> 00:16:19.590

Meredith Koob: So data like this is an example of data that we continue to bring to you in our intelligence portal and that will make available.

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00:16:20.490 --> 00:16:29.280

Meredith Koob: And also, we consider data that's important to you, so if wherever talking about some of our data and you're curious about anything specific.

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00:16:29.820 --> 00:16:40.890

Meredith Koob: You can always ask if that's data that we can produce for you can't make any promises but we'll certainly listen to what you're interested in related to data.

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00:16:43.890 --> 00:16:46.500

Meredith Koob: Already this next one, then.

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00:16:47.970 --> 00:16:58.530

Meredith Koob: Is COVID-19 data so just a look on the left at total COPA 19 teasers and just a few things that we thought were important to highlight.

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00:16:59.610 --> 00:17:06.300

Meredith Koob: Related to outcomes in Colorado is looking at.

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00:17:07.530 --> 00:17:20.910

Meredith Koob: Data daily cases hospitalizations death, but also really importantly again here are the deaths by race and ethnicity, so you can get a sense for.

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00:17:21.660 --> 00:17:30.570

Meredith Koob: Where all of our Colorado populations are falling within that, and you can always take a deeper dive in any of this data.

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00:17:31.530 --> 00:17:49.440

Meredith Koob: By using the link on the slide which again will come to you via our resource document after the call it's important to note that these rates were pulled on February 14 so they do change pretty often and frequently, as you well know.

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00:17:51.450 --> 00:18:17.160

Meredith Koob: This one takes even a deeper dive into our races and ethnicities and I found it particularly interesting that you see here the top category four deaths per 100,000 people, according to the tova data says that native Hawaiian and Pacific islanders are being most heavily affected.

93

00:18:18.210 --> 00:18:37.530

Meredith Koob: Yet if you look at that prior slide this population wasn't called out specifically so really just something to think about in your communities that you're serving these populations that they really can use some added resources around these students in backseat.

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00:18:41.790 --> 00:19:00.630

Meredith Koob: Okay, so our monthly Community connect meetings bring together organizations to work together to form effective ecosystems and collaborate across sectors, so this Community connect structure involves various Community providers and several areas of focus.

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00:19:01.770 --> 00:19:11.100

Meredith Koob: The use of data and quality improvement tools such as root cause analysis will help to determine the areas of focus for our communities.

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00:19:12.120 --> 00:19:29.370

Meredith Koob: So as part of these meetings will always begin by reviewing data that's relevant to the discussion like we just did and during today's Community connect calls we focus on me innovation data which is blue pneumonia and co with my team.

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00:19:30.570 --> 00:19:39.060

Meredith Koob: And what the data is telling us the impact to residents patients and communities is that it's clear there's room.

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00:19:41.340 --> 00:19:48.690

Meredith Koob: for improving vaccines, not only for Covid-19 but also for flu and pneumonia.

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00:19:55.230 --> 00:20:05.340

Meredith Koob: So That being said, that's why we're going to focus today on a quality improvement tool that we use quite often, which is the root cause analysis.

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00:20:06.540 --> 00:20:13.530

Meredith Koob: it's really important that we set our teams up for success, and when we say teams that could be our internal intelligent team.

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00:20:14.160 --> 00:20:25.560

Meredith Koob: It could be the team of us here at intelligent working with you as the Community or it could be you taking these tools into your own organizations and communities to us.

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00:20:27.390 --> 00:20:39.510

Meredith Koob: So we'll always attempt to bring these tools to you and the first timer to through the practice it, it takes some practice to get used to this and end up okay.

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00:20:40.140 --> 00:20:45.960

Meredith Koob: One thing to note about the root cause analysis is you really want to be sure that you're focusing.

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00:20:46.650 --> 00:20:56.910

Meredith Koob: On challenges that are within your control, so we know a lot of times there are circumstances that we can't necessarily control.

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00:20:57.510 --> 00:21:16.200

Meredith Koob: When you get into challenges and barriers that can sometimes be easy to blame other you know circumstances organizations that that's not what we can necessarily have control over so that's just an important detail keep in mind as we go through this exercise.

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00:21:19.980 --> 00:21:22.740

Meredith Koob: Really, the basics about root cause analysis.

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00:21:25.740 --> 00:21:33.240

Meredith Koob: Is we just highlighted here in the bullet points so again, we want to explore the cause and effect relationship.

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00:21:33.930 --> 00:21:53.430

Meredith Koob: Underlying the problem, so today, our problem is going to be defined as low immunization rates for coordinate team pneumonia and or flu and you always want to start with data so that you're focusing on facts versus opinions.

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00:21:54.690 --> 00:21:59.250

Meredith Koob: This just helps us keep from fixing the wrong things or.

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00:22:00.540 --> 00:22:17.340

Meredith Koob: Focusing on maybe subjective information that you've heard from a few people versus seeing what the actual data tells us it also helps keep us from jumping directly to a solution without really deeply understanding the problem.

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00:22:18.390 --> 00:22:34.860

Meredith Koob: And then, it helps us find a right solution for us with where we're at a particular time, rather than a global one size fits all solution, it also really engages your team and allows everyone to have feedback into the problem.

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00:22:40.170 --> 00:22:52.140

Meredith Koob: So don't worry about seeing the details on the slide I'm actually going to stop sharing and Nikki is going to share, but this is an example of a tool that we make available to our partners.

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00:22:55.950 --> 00:22:56.580

Meredith Koob: See here.

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00:22:58.710 --> 00:23:00.150

Meredith Koob: Maybe I'm cheering.

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00:23:07.980 --> 00:23:18.870

Meredith Koob: Okay Nikki now let you share the PDF, so this is, this is the form that we're going to actively use together today and, as you all are providing input.

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00:23:19.530 --> 00:23:36.420

Meredith Koob: we're going to scribe directly onto the screen, so this is a syllable what we call the fish bone diagram that TV created and that's really simple to use So you can see, at the top that we've identified low vaccine rates for.

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00:23:37.470 --> 00:23:46.620

Meredith Koob: flu or pneumonia among patients and staff so where you see that head or the arrow is the problem.

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00:23:47.790 --> 00:23:59.760

Meredith Koob: And then the other four areas are problem areas or categories of problems that will add your feedback into so I just want to say that.

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00:24:00.630 --> 00:24:08.580

Meredith Koob: Through our work, we typically find that these four areas are pretty popular for barriers and challenges.

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00:24:09.120 --> 00:24:18.510

Meredith Koob: That being said, if you have a barrier or challenge that you feel like really fits in one of those four categories they'll feel free to add it.

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00:24:19.140 --> 00:24:31.650

Meredith Koob: Will capture it and then take a look at what you know what type of category that that works into in the future so don't get stuck on that language of the four c's.

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00:24:37.260 --> 00:24:48.720

Meredith Koob: let's see here okay so Nikki's ready to facilitate so it looks like we're starting we're starting to get some feedback in chat.

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00:24:49.380 --> 00:25:09.270

Meredith Koob: Let me open my chat screen back up Courtney, do you want to, let us know again any barriers or challenges you're seeing in your community that may be impacting low immunization rates for any of these three immunizations.

124

00:25:15.300 --> 00:25:20.640

Courtney Ryan: We do have a comment in here Meredith bad information about the safety of the vaccine.

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00:25:23.460 --> 00:25:24.270

Courtney Ryan: Thanks Kimberly.

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00:25:25.830 --> 00:25:27.000

Meredith Koob: That information.

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00:25:32.460 --> 00:25:43.710

Meredith Koob: And Nikki I give you full permission to we're not going to judge where these are place will go bad when we have some time to really focus on that and get that back.

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00:25:44.190 --> 00:25:55.920

Meredith Koob: out to participants, just as long as we are capturing everything that we're hearing and you can also feel free to take yourself off of mute and speak up we love to hear voices other than our own.

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00:25:58.080 --> 00:26:05.010

Courtney Ryan: And we do have some other comments this is so exciting Thank you guys for participating on this lack of availability.

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00:26:08.010 --> 00:26:12.570

Courtney Ryan: We have from Maggie definitely don't trust the vaccine.

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00:26:17.580 --> 00:26:20.910

Meredith Koob: And Nikki you just verbally to us if you need.

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00:26:23.070 --> 00:26:24.360

Meredith Koob: me the second to catch up.

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00:26:28.800 --> 00:26:34.470

Courtney Ryan: Access to appointment scheduling is a big challenge for Danielle's unity.

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00:26:40.080 --> 00:26:42.240

Courtney Ryan: See, yes, fear of the unknown.

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00:26:44.550 --> 00:26:54.150

Courtney Ryan: Another one around difficulty making an appointment do too confusing sites and no slots available not able to use the computer, so another access.

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00:26:56.670 --> 00:27:02.490

Courtney Ryan: news media constant talk about rush to make them at the vaccine, thank you, we really.

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00:27:09.690 --> 00:27:11.370

Courtney Ryan: don't know the long term effects.

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00:27:15.420 --> 00:27:21.360

Courtney Ryan: The fear of side effects and listed effects that worry employees, thank you Nancy.

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00:27:22.890 --> 00:27:25.650

Meredith Koob: What will pause for just a second here.

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00:27:26.610 --> 00:27:27.480

Courtney Ryan: Thanks Courtney.

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00:27:27.570 --> 00:27:30.510

Meredith Koob: And thank you all for your input via chat.

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00:27:31.380 --> 00:27:32.370

Courtney Ryan: yeah This is great.

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00:27:36.150 --> 00:27:46.980

Meredith Koob: So as Nikki catches up here again we use this constantly with our own internal TV team, but also really encourage you to.

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00:27:48.450 --> 00:27:50.250

Meredith Koob: If you're not already many of you.

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00:27:51.420 --> 00:28:00.930

Meredith Koob: are already using this well, we know from working with our nursing home team, but if you're not, this is a really good tool to use with your teams.

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00:28:02.880 --> 00:28:03.990

Meredith Koob: And then Nikki you just.

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00:28:06.990 --> 00:28:09.300

Meredith Koob: Let me know when you're ready to go again.

148

00:28:22.560 --> 00:28:23.760

Meredith Koob: Sorry, trying to get off mute I.

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00:28:23.760 --> 00:28:24.840

Nikki Racelis: think we can keep going.

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00:28:26.190 --> 00:28:26.490

Nikki Racelis: Okay.

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00:28:27.270 --> 00:28:27.630

Meredith Koob: Very good.

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00:28:29.040 --> 00:28:29.730

Courtney Ryan: Another.

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00:28:31.350 --> 00:28:32.700

Courtney Ryan: One here on infertility.

154

00:28:42.690 --> 00:28:46.830

Courtney Ryan: And then another comment about social media.

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00:28:48.270 --> 00:28:56.790

Courtney Ryan: You know, information versus reliable sources regarding the vaccine so definitely some multiple comments around that one.

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00:28:58.590 --> 00:29:02.880

Courtney Ryan: Another one from Maggie moving forward, how will you get the vaccines.

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00:29:03.990 --> 00:29:06.270

Courtney Ryan: They mentioned that one already I can't remember.

158

00:29:10.950 --> 00:29:16.890

Meredith Koob: In hearing Maggie's name Maggie I just want to address your comment higher up in chat.

159

00:29:18.420 --> 00:29:35.670



Meredith Koob: You were mentioning that you like to save the chat but you can't do that is there, something we can do to allow that to happen, will, in our debrief for this meeting today will certainly talk about that as a team and see if we can share the chat documents.

160

00:29:36.690 --> 00:29:39.990

Meredith Koob: That go to you thanks for the question.

161

00:29:46.560 --> 00:29:52.770

Courtney Ryan: not seeing any others in the chat yet, but please feel free to unmute yourself and shout out.

162

00:29:56.970 --> 00:30:09.840

Meredith Koob: One specific area of interest we have or curiosity, is that the long term care pharmacy partnership that was bringing vaccine clinics to nursing home.

163

00:30:10.470 --> 00:30:19.620

Meredith Koob: hasn't ended so there's a gap right now for figuring out how nursing home residents that didn't get vaccinated as part of that partnership.

164

00:30:20.280 --> 00:30:33.150

Meredith Koob: Specifically, new admissions to home will get the vaccine, so it will be helpful for us to know if discharging hospitals are vaccinating patients prior to discharge.

165

00:30:33.930 --> 00:30:52.980

Meredith Koob: And if so, how are they coordinating with the skilled nursing facility to ensure that the patient will get the stuff the second vaccine at the appropriate time Is there anyone that can unmute themselves and provide any feedback on what you're seeing to that end.

166

00:31:07.140 --> 00:31:14.490

Courtney Ryan: So Meredith, one that has commented that in our rural area our public health has a different brand than our pharmacy.

167

00:31:17.250 --> 00:31:19.680

Courtney Ryan: you're down in the San Luis valley limit.

168

00:31:25.230 --> 00:31:32.460

Meredith Koob: For that and Kimberly now that they're waiting to see what CBS has to say about this.

169

00:31:38.220 --> 00:31:43.110

Meredith Koob: Do we have any hospital partners on the line today but.

170

00:31:44.130 --> 00:31:47.850

Meredith Koob: Has this hit your radar have you discussed it as a team.

171

00:31:48.870 --> 00:31:52.890

Meredith Koob: Have you worked with any skilled nursing facilities in your area to.

172

00:31:54.360 --> 00:31:55.140

Meredith Koob: Talk about this.

173

00:32:07.980 --> 00:32:26.820

Meredith Koob: And if you recall, on our norms slide I specifically added that silence is okay, sometimes it's uncomfortable but you'll notice that, as a facilitator, I know that some of these take thought so just pausing to see if anyone has any anything else to contribute to that end.

174

00:32:30.300 --> 00:32:38.220

Meredith Koob: And Gina Jones at Kimberly can you elaborate on waiting to see what CBS says.

175

00:32:39.810 --> 00:32:42.210

Meredith Koob: specifically about what thanks.

176

00:32:43.680 --> 00:32:53.580

Kimberly Bryant: So um I think it's easier if I just unmute so at their last vaccine clinic they said they were trying to figure out what to do to help us.

177

00:32:54.000 --> 00:33:04.260

Kimberly Bryant: with people who are getting their first dose that our last clinic, which is the 27th or new residence, and so I just sent my contact and email once So what do we do when.

178

00:33:05.790 --> 00:33:11.790

Kimberly Bryant: So that's kind of what I mean I'm waiting for them to tell me what they can do to help us as we move forward and.

179

00:33:12.240 --> 00:33:22.680

Kimberly Bryant: I mean if you're in a county where the county has mader and the pharmacy has Pfizer What do you do because you're not supposed to mix the vaccines so it's a little frustrating.

180

00:33:28.980 --> 00:33:31.110

Meredith Koob: Thanks so much Kimberly appreciate that.

181

00:33:38.190 --> 00:33:44.790

Meredith Koob: So another part of the root cause analysis another tool that we often use is the five Wise.

182

00:33:45.480 --> 00:33:55.890

Meredith Koob: So, even beyond the primary challenges that are brought forth a lot of times you can dig into one of the challenges represented here.

183

00:33:56.490 --> 00:34:13.680

Meredith Koob: and continue to ask why about that, to see if he can really dig into the challenges and barriers, more specifically, in order to be able to identify and intervention that be to that challenge or barrier.

184

00:34:14.700 --> 00:34:25.950

Meredith Koob: So if we think about that method and asking why it's kind of like your toddler tiled right why, how come why.

185

00:34:27.120 --> 00:34:45.630

Meredith Koob: Because that's what this is like So if you see any on the screen that you think we could dive a little bit deeper into regarding why it's a particular challenge again feel free to unmute yourself or add in chat.

186

00:34:51.870 --> 00:34:53.580

Kimberly Bryant: Okay I'll chat again so.

187

00:34:55.320 --> 00:35:01.980

Kimberly Bryant: You know we've done education we've provided them with the data we provided them with the ingredients list we.

188

00:35:02.400 --> 00:35:11.970

Kimberly Bryant: talked about that you know seatbelts are only 40% effective and we still all wear seatbelts but the code vaccine is 95% effective and so.

189

00:35:12.510 --> 00:35:19.110

Kimberly Bryant: um people just I mean, I think, just because it came out so fast people don't understand that we threw all the money on the world at it.

190

00:35:19.560 --> 00:35:32.250

Kimberly Bryant: And all the best scientists and they still don't trust it, so I don't know how we overcome that I think a lot of people are still waiting to see what's going to happen to the rest of us, I was kind of hoping to grow taller but it didn't work so.

191

00:35:35.700 --> 00:35:38.130

Meredith Koob: If you find that magic Kimberly let me know.

192

00:35:39.090 --> 00:35:39.660

Kimberly Bryant: Roger that.

193

00:35:39.990 --> 00:35:40.530

Meredith Koob: You have.

194

00:35:41.520 --> 00:35:54.060

Meredith Koob: Kimberly do you have any instances of either staff or residents that were initially hesitant that somehow overcame that barrier and what what that was for them.

195

00:35:54.750 --> 00:36:00.570

Kimberly Bryant: um I had a couple of staff members that waited through the first vaccine clinic to see how the rest of us did.

196

00:36:01.050 --> 00:36:16.230

Kimberly Bryant: And then, since nobody died had reactions, whatever they went ahead and signed up but I'm still only about a 30% vaccine rate for my staff were an all dementia care facility so I actually only had one family member refused to have their.

197

00:36:17.310 --> 00:36:21.150

Kimberly Bryant: loved one vaccinated, so I think I'm.

198

00:36:22.770 --> 00:36:27.690

Kimberly Bryant: When we did our last clinic that I had 54 residents and 50 were vaccinated that day.

199

00:36:29.850 --> 00:36:34.500

Kimberly Bryant: So the family seem to get it it's the staff that just are just resistant.

200

00:36:36.990 --> 00:36:53.040

Meredith Koob: Who is there anyone on the line, any of our partners that have had a really high success rate with staff uptake of the vaccine and, if so, would you be willing to share what you've used as a team with Kimberly.

201

00:36:57.090 --> 00:37:02.940

Kerry MacFarlane: This is Carrie from Fort Collins Good Samaritan and we have 85% staff participation in the.

202

00:37:03.600 --> 00:37:15.690

Kerry MacFarlane: shot and, most of it was just continuous conversations answering questions asking you know the question why are you concerned, what is it that you know you've heard.

203

00:37:16.020 --> 00:37:30.690

Kerry MacFarlane: What can I do to help you get past that there's some that just they're not going to get it that's just you know how it is until it's mandatory but for us it was just a continual conversation of answering questions and encouraging people.

204

00:37:33.600 --> 00:37:38.910

Meredith Koob: Thanks so much carry and do you all use staff meetings.

205

00:37:40.680 --> 00:37:46.980

Meredith Koob: To have group conversations, or do you really focus on one on one conversations with the staff or.

206

00:37:47.160 --> 00:37:56.280

Kerry MacFarlane: About we don't have we don't have staff meetings, yet, because of the six foot rule, but most of my conversations happened, while doing covert testing.

207

00:37:58.530 --> 00:38:13.620

Kimberly Bryant: The and we did that, as well, but then our medical director also had zoom calls that we invited the staff to attend in a common area so that they could ask specific questions and hear data.

208

00:38:14.970 --> 00:38:17.250

Kimberly Bryant: yeah I don't even know so.

209

00:38:20.760 --> 00:38:22.650

Meredith Koob: Well, thank you for sharing that.

210

00:38:24.120 --> 00:38:24.600

Meredith Koob: We do have.

211

00:38:24.690 --> 00:38:35.580

Courtney Ryan: A couple other comments that came in to chat so Maggie noted that we have 15 out of 16 vaccinated we have discussions and answering questions, thank you Maggie.

212

00:38:36.090 --> 00:38:44.580

Courtney Ryan: and brandy noted that one of our clinics had a town hall present true data by a provider and answer questions and help minimize false information.

213

00:38:46.500 --> 00:38:50.220

Broomfield Skilled Nursing & Center: So this is Leroy from greenfield skilled and I wanted to add that.

214

00:38:51.120 --> 00:38:56.730

Broomfield Skilled Nursing & Center: Our medical director, you know a lot of people don't want to ask questions in a group, even on a zoom call.

215

00:38:57.120 --> 00:39:09.000

Broomfield Skilled Nursing & Center: So we provided his personal cell phone number, and they were able to call him and ask questions, one on one with him without other people being around.

216

00:39:09.510 --> 00:39:25.290

Broomfield Skilled Nursing & Center: And when we initially signed up we had about 40% of our staff that signed up for the vaccine, but on day on the first day we were at 80% and now we're at 88% compliance.

217

00:39:27.270 --> 00:39:32.730

Courtney Ryan: that's so awesome I was about to call on you leave right, you must have sensed something so.

218

00:39:36.420 --> 00:39:39.810

Meredith Koob: yeah thanks for I appreciate that information.

219

00:39:40.860 --> 00:39:46.110

Meredith Koob: And then Maggie I see also added conference calls with Dr.

220

00:39:47.400 --> 00:39:52.320

Meredith Koob: As a gram or Dr gone from Colorado health care association.

221

00:39:53.580 --> 00:40:02.010

Meredith Koob: So we've heard a lot of that with our homes is relying heavily on the medical directors for those one on one conversations.

222

00:40:03.120 --> 00:40:04.230

Meredith Koob: And Maggie added.

223

00:40:05.490 --> 00:40:09.990

Meredith Koob: That you've been at 100% for residents congratulations.

224

00:40:12.150 --> 00:40:13.650

Meredith Koob: All right, very good.

225

00:40:16.770 --> 00:40:18.660

Meredith Koob: Well we're continue to add.

226

00:40:19.890 --> 00:40:30.090

Meredith Koob: input for challenges or barriers and to tad if you have more to identify because, again, our team is going to use this internally to really.

227

00:40:30.660 --> 00:40:41.670

Meredith Koob: hone in on what kind of resources, we can focus more heavily on to bring to you all with these challenges and in everything we do because were.

228

00:40:42.540 --> 00:40:55.350

Meredith Koob: funded by Medicare to do this work that's really where this information lands in the laps of Medicare so that they can understand locally in all of our communities, what you all are up against so.

229

00:40:57.000 --> 00:40:59.430

Meredith Koob: Great sharing and Nikki if you want to.

230

00:41:01.110 --> 00:41:04.470

Meredith Koob: Stop sharing all the slides up here.

231

00:41:16.800 --> 00:41:25.890

Meredith Koob: Okay, so this is one of the tools that the team put together that really is a roadmap for utilizing root cause analysis.

232

00:41:26.340 --> 00:41:34.980

Meredith Koob: And this is a really good tool for understanding your path and doing the root cause analysis and it also will help support your team.

233

00:41:35.670 --> 00:41:58.470

Meredith Koob: So today we've essentially traveled this roadmap from the problem and identifying the problems here in the beginning of the travel, we are going to consider ourselves that Community team here on the CONNECT call were meeting today we identified the problem statement of low.

234

00:41:59.790 --> 00:42:07.020

Meredith Koob: access and utilization of vaccinations for all three conditions so here is a stop sign.

235

00:42:07.710 --> 00:42:15.420

Meredith Koob: identify is the problem minor and isolated net so you can use the five White tool and that will be coming to you.

236

00:42:15.870 --> 00:42:27.120

Meredith Koob: Again, but instead we feel like this is a pretty widespread problem, and so we chose to use this this phone analysis and tool that you just saw on the screen.

237

00:42:27.750 --> 00:42:35.940

Meredith Koob: And so now internally as a team again intelligent will take that feedback and consider what we can bring to you.

238

00:42:36.480 --> 00:42:43.080

Meredith Koob: In order to select interventions that could help target these challenges, but we also encourage you.

239

00:42:43.770 --> 00:42:50.880

Meredith Koob: To take this and build on it with your own internal team, so there are things that we can do on a statewide level.

240

00:42:51.330 --> 00:42:57.510



Meredith Koob: But there are also things that each of you can do individually within your community and your organization.

241

00:42:58.470 --> 00:43:12.540

Meredith Koob: And then don't want to neglect that once we try something else, we want to end by studying it so looking at the data, looking at the indicators to say Okay, we give we give it our best shot.

242

00:43:13.080 --> 00:43:19.110

Meredith Koob: That at work or not PDSA for those that are not familiar is plan do study act.

243

00:43:19.890 --> 00:43:29.340

Meredith Koob: And so data, the study piece and asked is essentially where you make revisions they might be big revisions they might be very minor.

244

00:43:29.910 --> 00:43:42.660

Meredith Koob: And then you can continue to travel that path so we're happy to share all these tools with you again they'll be added in that resource document that you'll receive after the call.

245

00:43:44.250 --> 00:43:59.550

Meredith Koob: And we are actually actively doing root cause analysis training on that process itself, right now, so you'll find on our events calendar, that you can register for those you can register your team.

246

00:44:00.840 --> 00:44:15.300

Meredith Koob: Or you can attend individually, and those are happening right now every Tuesday and then the plan do study act training does also something.

247

00:44:15.870 --> 00:44:24.990

Meredith Koob: PDSA that I mentioned on the previous slide and we have those happening every other Wednesday if that's something that you're interested in learning more about.

248

00:44:26.400 --> 00:44:35.340

Meredith Koob: not going to go through all these resources again they'll be on the resource document, but we just pulled out some of the resources specific to those.

249

00:44:36.390 --> 00:44:46.290

Meredith Koob: categories for the vaccines related to confidence complacency calculation or judgment and convenience.

250

00:44:47.460 --> 00:44:48.780

Meredith Koob: Be on the lookout for those.

251

00:44:50.580 --> 00:44:52.650

Meredith Koob: And another polling questions.

252

00:45:00.120 --> 00:45:01.530

Meredith Koob: find my cursor here.

253

00:45:06.600 --> 00:45:23.730

Meredith Koob: Okay, so we're curious to hear from you, will you collect and analyze Community influenza and pneumonia rates at least weekly no judgment no right or wrong answer we're just curious to see where you're at.

254

00:45:26.340 --> 00:45:29.280

Meredith Koob: yourself and with your organizations in your community.

255

00:45:31.200 --> 00:45:33.480

Meredith Koob: Give that just a few more seconds.

256

00:45:52.350 --> 00:45:55.290

Meredith Koob: Some responses come in, thank you.

257

00:46:04.080 --> 00:46:07.800

Meredith Koob: Okay, and then the next thing we're curious about.

258

00:46:18.450 --> 00:46:28.140

Meredith Koob: doing my best to multitask here thanks for being patient is if, after participating in the root cause activity.

259

00:46:28.920 --> 00:46:41.760

Meredith Koob: If you can see yourself completing the root cause analysis whenever your facilities vaccine data is below federal expectations and if you're already using that tool that's great.

260

00:47:00.720 --> 00:47:03.570

Meredith Koob: Thank you everyone still have a few more coming in.

261

00:47:09.660 --> 00:47:15.120

Meredith Koob: Very good, so a majority of the responses are strongly agree and agree.

262

00:47:16.140 --> 00:47:19.740

Meredith Koob: Again, no judgment, but just know that we're here to help you.

263

00:47:22.440 --> 00:47:37.830

Meredith Koob: All right, and then in our time together today is there anything that came to mind, for you, for other things that you might do either yourself or with your team.

264

00:47:45.780 --> 00:47:47.550

Meredith Koob: So are there needs that you have.

265

00:47:50.610 --> 00:47:56.700

Meredith Koob: Maybe it's vaccine education tools for your residence patients that family members, your community.

266

00:47:59.220 --> 00:48:11.280

Meredith Koob: Maybe you would like to attend the root cause analysis or pdfs a training, if you have other ideas that have been spark today feel free to add that in chat.

267

00:48:11.880 --> 00:48:23.940

Meredith Koob: And while we're getting responses here Courtney I'll pause and see if we have any other chat feedback doesn't have to be related to this polling question but anything that we haven't called out.

268

00:48:25.860 --> 00:48:44.400

Courtney Ryan: We do actually pat mentioned great job so glad to see this back into the norms and I'm sure she's referring to the root cause analysis process covert cleanup is one area, but we have a lot to do when normal QA or Q amp T was shelved last year in Japan, I.

269

00:48:50.730 --> 00:49:05.310

Meredith Koob: will share this one, since we have a variation and responses, so you can see that that's been educational tools for staff and attending the root cause analysis and pdfs a training came out on top.

270

00:49:06.690 --> 00:49:14.100

Meredith Koob: But also that's the educational tool for resonance patients and families and more training about does that feed.

271

00:49:23.430 --> 00:49:34.800

Meredith Koob: Okay, so another thing that we do on these calls, we want to be very intentional about finding something some success to celebrate in our state.

272

00:49:35.490 --> 00:49:59.520

Meredith Koob: And there's so much focus on the challenges and the barriers and the stresses, and at the same time, there is a lot of amazing work and connection and health improvement still happening so what we're celebrating this month is that in the US news healthiest counties in the US, making.

273

00:50:00.600 --> 00:50:09.750

Meredith Koob: We pulled the top 10 performing counties in the nation, and you can see, this six of those 10 counties are right here in Colorado.

274

00:50:11.040 --> 00:50:18.300

Meredith Koob: And that that is outstanding and absolutely something to be celebrated.

275

00:50:19.140 --> 00:50:26.910

Meredith Koob: You can see on the right hand side, all of the categories that are used for that ranking, and that includes the equity which we've talked about today.

276

00:50:27.540 --> 00:50:39.600

Meredith Koob: It also includes population health down there at number eight but all of those are weighted differently essentially and determining.

277

00:50:40.170 --> 00:50:56.070

Meredith Koob: How our counties rate in the state so population health and equity are the most heavily weighted categories, based on the assessments of more than a dozen leading experts on what matters most to a community's health.

278

00:50:57.210 --> 00:51:14.280

Meredith Koob: So I'm curious whether you're in one of these six Colorado counties or outside of that which of these 10 domains is the one you are most pleased with in your Community feel free to take yourself off mute or add into chat.

279

00:51:16.050 --> 00:51:21.300

Meredith Koob: And Courtney, I see I see check out enough water wonderful chatting him.

280

00:51:23.040 --> 00:51:31.710

Courtney Ryan: On he had mentioned that, although we have our third clinic tomorrow, we still need to continue to encourage vaccination for those who haven't gotten it yet.

281

00:51:32.580 --> 00:51:43.920

Courtney Ryan: And then some kudos to Colorado for having six of our communities here in this data and then Kimberly has to go she's actually got a coffee meeting, she has to go to thanks Kim for joining.

282

00:51:46.920 --> 00:51:50.640

Courtney Ryan: And Leroy commented Broomfield county Community support.

283

00:51:52.530 --> 00:51:55.350

Meredith Koob: Community support awesome yes.

284

00:51:55.890 --> 00:51:57.780

Meredith Koob: Lori's right there and.

285

00:51:58.440 --> 00:52:00.510

Meredith Koob: Number four and Broomfield county.

286

00:52:02.370 --> 00:52:03.450

Meredith Koob: great work out there.

287

00:52:11.400 --> 00:52:22.470

Meredith Koob: Alright, so I've mentioned a few times that resources, not only that you've seen on the slides are related to the data or the tools that we've used and shared.

288

00:52:24.030 --> 00:52:30.600

Meredith Koob: we've aggregated those all into a document so you can simply pull that document up.

289

00:52:31.200 --> 00:52:40.890

Meredith Koob: And access it for anything that's important to you and meeting you where you're at in your organization and community, but I also want to pause here.

290

00:52:41.460 --> 00:52:52.830

Meredith Koob: and ask of all of our partners on the call, are there any resources related to today's discussion that you would like to bring forward or share with the state.

291

00:52:55.950 --> 00:53:00.330

Meredith Koob: And again feel free to add that in chat or take yourself off mute.

292

00:53:13.620 --> 00:53:23.970

Meredith Koob: Okay, if you think of anything you'd like to share feel free to email myself or Courtney, and will include that on follow up doing a call.

293

00:53:24.840 --> 00:53:37.560

Meredith Koob: Specific attention to a few vaccine equity specific events, you can see the details here on the screen that this first one, the Colorado vaccine equity Task Force.

294

00:53:38.160 --> 00:53:52.830

Meredith Koob: On the 24th has a free virtual panel discussion with vaccine experts and public health, educators, so you can see here those panelists include CD pH D.

295

00:53:53.400 --> 00:54:09.750

Meredith Koob: And also stephanie is with this vaccine equity Task Force series hunt the Colorado School of Public Health so we've included the registration link here, and it will be on the resource document.

296

00:54:13.200 --> 00:54:23.730

Meredith Koob: The next thing specific to vaccine equity is through the government office and Colorado department of public health, so they're really seeking to reach communities of color.

297

00:54:24.210 --> 00:54:35.610

Meredith Koob: and other marginalized groups that have been disproportionately affected through the pandemic, and so they have an open application for Community based organizations.

298

00:54:36.390 --> 00:54:51.600

Meredith Koob: To apply for a vaccination event in partnership with the State Department of public health and organization that application this link here and we'll also be on the resource documents.

299

00:54:52.380 --> 00:55:03.180

Meredith Koob: And in chat so we encourage you, not only at this applies to you in your community, but if you can think of others that might be interested.

300

00:55:03.780 --> 00:55:21.120

Meredith Koob: to please pass this information along to them, because, as we saw in the data that we looked at earlier there's certainly opportunity to have a pretty targeted and specific focus related to underserved and vulnerable populations.

301

00:55:24.180 --> 00:55:26.010

Meredith Koob: We are excited.

302

00:55:29.580 --> 00:55:35.940

Meredith Koob: Let me just do a sound check I just got a note that my connection is unstable Courtney, can you still hear me okay.

303

00:55:36.930 --> 00:55:37.770

Courtney Ryan: Yes, I can hear you.

304

00:55:40.140 --> 00:55:40.530

Courtney Ryan: Okay.

305

00:55:40.770 --> 00:55:53.580

Meredith Koob: Very good we're excited to bring to you a learning collaborative series, so this is a series of events related to chronic disease self management pain management.

306

00:55:54.180 --> 00:56:09.330

Meredith Koob: and care transitions amongst the Kobe 19 pandemics, so this kicks off on February 24 by registering for this event, you will be registered for the entire series.

307

00:56:10.470 --> 00:56:13.020

Meredith Koob: The 24th focuses on.

308

00:56:14.130 --> 00:56:27.390

Meredith Koob: chronic disease and we'll be joined by the American heart association on march 10 the topic of discussion will be pain management and CDC will be our experts presenting there.

309

00:56:28.110 --> 00:56:41.250

Meredith Koob: We have Dr Daniel fixin presenting on march 24 around the role of pharmacy and Karen transitions and then we'll do the outcomes Congress for this series in April.

310

00:56:45.900 --> 00:56:54.960

Meredith Koob: let's bring these opportunities to you, we want to hear from medicare patients families and caregivers, and that is.

311

00:56:55.620 --> 00:57:10.530

Meredith Koob: done through our Community Ambassador program so if that's something that you know of anyone in your community that might be interested can contact risa I was call out that if you think about your.

312

00:57:11.700 --> 00:57:19.290

Meredith Koob: Family residence Councils in long term care those types of individuals are the exact.

313

00:57:20.550 --> 00:57:31.140

Meredith Koob: type of individuals, that would be great for Community Ambassador work, so if any of them might be looking for additional opportunities, this is a great way to plug in.

314

00:57:32.220 --> 00:57:44.730

Meredith Koob: And then mastermind we're really considering that a powerhouse intelligence advisory team to keep up with our local priorities, and we want to hear from all of you, as we.

315

00:57:45.210 --> 00:58:02.850

Meredith Koob: Design our future work together so there's a link to the mastermind interest form, and then we also invite you to join, for your Community peers and networks to join intelligent ui connect if you're finding these in full.

316

00:58:04.170 --> 00:58:10.470

Meredith Koob: And in regards to the mastermind team were curious me open up the pole.

317

00:58:11.970 --> 00:58:13.470

Meredith Koob: If this is something.

318

00:58:15.810 --> 00:58:19.890

Meredith Koob: That you are interested in yourself.

319

00:58:24.510 --> 00:58:44.190

Meredith Koob: If you know that feel free to indicate, yes, no I'm not interested, at this time or I'm not sure, please send me some more information and we are keeping track of all of you that have already indicated, interest and really appreciate that we really see this as our regional.



320

00:58:45.450 --> 00:58:47.340

Courtney Ryan: interdependent leadership team.

321

00:58:48.150 --> 00:59:04.830

Meredith Koob: To imagine co create and develop our future work together and it's certainly don't expect it from any everyone, in fact, our goal is to get at least one person from each of our Colorado communities.

322

00:59:06.540 --> 00:59:13.020

Meredith Koob: and will continue to send more information about that, so thank you for taking that one question.

323

00:59:18.900 --> 00:59:38.490

Meredith Koob: And the last area we're curious to hear from you how is this time working out for you, so our first three calls we've done at 11 o'clock mountain standard time, but we want to know if maybe there's a time that would work better, for you, so if you wouldn't mind indicating that here.

324

00:59:57.360 --> 00:59:57.870

Meredith Koob: Very good.

325

01:00:03.420 --> 01:00:13.530

Meredith Koob: here's Courtney, and I his contact information, whether it's related to this topic, or anything else if you'd like to connect feel free to email or call us we're here for you, at any time.

326

01:00:14.640 --> 01:00:25.890

Meredith Koob: And lastly, we always need to know how we're doing or are these events or sessions meeting our needs, do you have ideas for improvement, let us know.

327

01:00:26.520 --> 01:00:34.920

Meredith Koob: So we can continue to meet you where you're at, and we really hope that each of you are able to join us again next month, and also.

328

01:00:35.370 --> 01:00:51.330

Meredith Koob: Invite your friends and peers that might be interested, the more people we have connecting the better for our communities, so thank you so much for your time today, and thank you, intelligent team for your support and we look forward to talking to you all soon.