
Dr. Robert Bree Collaborative Meeting Minutes
September 28th, 2022 | 1:00-3:00
Held Virtually

Members Present

Hugh Straley, MD, Bree Collaborative (Chair)	Kimberly Moore, MD, Franciscan Health System
Norifumi Kamo, MD, MPP, Virginia Mason Franciscan Medical Center	Judy Zerzan, MD, MPH, Washington State Health Care Authority
Sharon Eloranta, MD, WHA	Carl Olden, MD, Pacific Crest Family Medicine
Mark Haugen, MD, Physician, Walla Walla Clinic	Greg Marchand, The Boeing Company
DC Dugdale, MD, MS, University of Washington	Susane Quistgaard, MD Premera Blue Cross
Mary Kay O'Neill, MD, MBA, Mercer	Colleen Daly, PhD, Microsoft
Stuart Freed, MD, Confluence Health	Angie Sparks, MD, UnitedHealthcare
Susie Dade, MS, Patient Representative	Colin Fields, MD, Kaiser Permanente

Members Absent

Darcy Jaffe, MN, ARNP, FACHE, Washington State Hospital Association	Gary Franklin, MD, Washington State Department of Labor and Industries
Kevin Pieper, MD, MHA, Kadlec Regional Medical	

Staff and Members of the Public

Ginny Weir, MPH, FHCQ	Summer D.
Nicholas Locke, MPH, FHCQ	Leah Hole-Marshall, JD, WA-HBE
Aviva Horowitz	Amelina Kassa, FHCQ
Barb Jones, OIC	Azadeh Farokhi, L&I
Emily Robson, RN, DNP, FHCQ	Ji Young Nam
Kristin Villas, WAHBE	John Stockton
Karie Nicholas, M.A., G.C., FHCQ	Maij
Audrey Joyce	Nicole Saint Claire
Jason Fodeman	
Emily Transue, MD, HCA	

All meeting materials are posted on the Bree Collaborative's website, [here](#), under previous meetings.

WELCOME AND INTRODUCTIONS: COVID-19

Hugh Straley, MD, Bree Collaborative Chair opens the meeting by asking the Bree's new staff members, Karie Nicholas and Emily Robson, to introduce themselves to the group. He also asked Bree members to provide updates on the impact that COVID-19 at their organizations. DC Dugdale, UW, noted that the census for COVID continues to hover around the 20-30 range, which includes people in isolation or maybe others who have come out of isolation. Norris Kamo, VMMC, added that they have difficulty discharging patients from post-acute facilities, but more booster vaccines are being administered.

Motion: Approve the July 27, Meeting Minutes

Outcome: Passed with unanimous support

FINAL ADOPTION: INFECTION CONTROL

Mark Haugen, MD, Physician, Walla Walla Clinic gave an overview of public comments on the Outpatient Infection Control draft. The workgroup received comments from providers and public health representatives that covered clarifying language, defining audiences, changes to the “minimize exposure” section, and addressing equity. In response to public comments on clarifying language, the workgroup adopted the standard term “infection prevention and control (IPC),” decided to encourage vaccines “as a preventative measure or to reduce the severity of acute or chronic illness,” and added language to the background section to clarify that the guidelines are not meant to add regulatory burden. The workgroup responded to comments about splitting audiences by splitting recommendations for “outpatient delivery systems” into recommendations for “administration” and “providers/staff.” The workgroup also added clarifying language to the employer section to define how employers can facilitate outpatient infection control. The workgroup also simplified the suggested workflow for “minimizing exposure.” Finally, the workgroup incorporated edits related to equity as requested by the Bree Collaborative during the July meeting. The workgroup added information about equity to the background, to recommendations about vaccine distribution, and to recommendations about health plan coverage for preventative services.

Motion: Motion to approve the final adoption

Outcome: Passed with unanimous support

DISSEMINATION FOR PUBLIC COMMENT: HEPATITIS C

Jon Stockton, MHA, Washington State Department of Health, presented on the HCV workgroup’s draft recommendations for public comment. Mr. Stockton’s presentation covered the workgroup’s focus areas (and alignment with Hep-C Free Washington and the DHHS Viral Hepatitis Elimination Plan). Focus areas include metrics, care coordination and expanding access, embedding HCV access at community sites, utilizing non-traditional models, and engaging providers. Mr. Stockton shared some of the report’s recommendations for health delivery systems, providers, health plans, and public health agencies. Finally, Mr. Stockton explained the role of each audience to drive HCV elimination in Washington state.

Motion: Motion to approve dissemination for public comment

Outcome: Passed with unanimous support

NEW TOPIC SELECTION

Nick Locke, MPH, Foundation for Health Care Quality, led the Bree Collaborative through a discussion to choose 2023 topics, with the goal of choosing 3 to 4 new topics for the upcoming year. Mr. Locke began by recapping the conversation from July, which ending with 8 potential topics, and shared the criteria for choosing new topics. To begin the conversation, Bree members conducted a preliminary vote and shared their thoughts about potential topics. Bree members wanted to ensure the 2023 topics could lead to changes in clinical practice, measurable improvements in outcome, and contribute to value across the entire healthcare ecosystem.

Following the initial vote and conversation, selected group members presented more in-depth on specific topics. The workgroup ran through brief presentations on the eight preliminary topics: weight-inclusive health, bariatric surgery, perinatal/maternal mental health, long cancer prevention/tobacco use, diabetes, climate change, hospital readmission, and difficult to discharge/capacity. After all the presentations, Bree members reconvened to share their impressions based on the presentations. Bree members chose to combine weight-inclusive health with bariatric surgery for voting purposes, leaving seven potential topics. Finally, Mr. Locke led Bree Collaborative members through a final vote on 2023 topics. The three topics that received the most votes and will be adopted as 2023 topics include difficulty to discharge patients, perinatal/maternal mental health, and

diabetes. Mr. Locke concluded the new topic conversation by encouraging members to volunteer as a workgroup chair or member for one of the new topics.

Motion: Vote on 2023 Topics

Outcome: Chose three topics for 2023: Diabetes, Maternal Mental Health, and Difficulty to Discharge

NEXT STEPS AND CLOSING COMMENTS

Dr. Hugh Straley thanked those who presented and closed the meeting.

Next Bree Collaborative Meeting: November 16, 2022 | 1:00 – 3:00 | Zoom