



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY
HEADQUARTERS, CARL R. DARNALL ARMY MEDICAL CENTER
36000 DARNALL LOOP
FORT HOOD, TEXAS 76544-4752

MCXI-CO

5 September 2014

SUBJECT: Minutes of the Health Care Advisory Council

1. The Health Care Advisory Council (HCAC) was held on Wednesday, 27 August 2014, at the Community Events Center. COL Darnauer called the meeting to order and provided opening comments.

a. Attendees from the Medical Center were present:

COL Darnauer, Patricia	Hospital Commander
LTC Moralez, Gerardo	Acting, Chief of Staff
LTC Courtines, Michel	Acting, Deputy Cmdr of Clinical Services
COL Kondrat, Brian	Deputy Cmdr for Nursing & Patient Services
LTC Yang, Tou	Chief, Pharmacy
CSM McFrazier, Melissa	Acting, Hospital CSM
1LT Matthews, Sarah	Robertson Blood Center
MAJ Cahill, Brian	Chief, Patient Services (Outgoing)
Williamson, Leslie	Chief, Patient Services (Incoming)
Dr. Lucas, Glynda	Chief, EFMP
Lauer, Charles	Business Operations Division
Francis, Sonja	Humana
Wall, George	WHC, Admin Officer
Cade, Mikaela	CRDAMC, PAO

b. Others present:

Cox, AnnaMarie	III Corps
Kourrari, Gwen	Division West, G1
Griffith, April	WTB FRSA
Dover-Stanonik, Cleopatra	69 th ADA BDE FRSA
Bills, Megan	1 st CD
Woodall, Paulette	WTU
Luong, Kimberly	1 st CD

2. OLD BUSINESS:

a. Patient Services – MAJ Cahill introduced Mrs. Leslie Williamson who is hired as the new incoming Chief of Patient Services. He reported the Army Provider Level Satisfaction Survey (APLSS) score for the month of July was 92.2% which is the highest

MCXI-CO

SUBJECT: Health Care Advisory Council Minutes

it has been in a while. He stated that the response rate to surveys has also increased. The Interactive Customer Evaluation (ICE) Survey satisfaction level was 85% with 1107 submissions. Committee members were reminded to please continue encouraging units and FRGs about completing all hospital surveys since some of these can generate additional funding to the hospital as well as help identify areas of improvement.

b. Women's Health Experience – Mr. Wall and COL Darnauer

(1) Mr. Wall stated the Baby Expo is Saturday, 25 October 2014 from 10:00 a.m. – 2:00 p.m. and will start in the Darnall main entrance front lobby area. There are multiple educational tables and vendors scheduled to provide services during this event; to include Community Health Nursing, Breastfeeding, and Physical Therapy for pregnancy (mommy and baby yoga), as well as some AAFES vendors. Tours of the Labor & Delivery and the Mother Baby wards will be given. COL Kondrat stated that this is our 3rd Baby Expo and we had over 500 participants attend last year.

(2) COL Darnauer stated that the Mother Baby Product line accounts for approximately 60% of our inpatient care on the Tricare Inpatient Satisfaction Survey (TRISS). This is also our biggest challenge on the TRISS survey. We are continuing to monitor and focus on improvement initiatives to ensure that the areas of improvement are addressed and changes are implemented. Dr. Christine Laky, a Maternal Fetal Medicine Specialist, is heading the improvement initiatives from the beginning of pregnancy to postpartum. Some other changes include the patient's care team conducts huddles twice per day. There are boards posted in each room that list the names of your care team. This ensures patients know who is taking care of them during admission. Breastfeeding is being promoted and we have hired an additional lactation consultant. The head nurse on the Mother Baby Unit conducts discharge surveys before patients are discharged. Mr. Wall stated that the Pregnancy Centering Program is good for single moms and moms that do not have family support. Your OB care is mapped out 9 months in advance. You have a group appointment and a single appointment with the provider after the group meets. This is designed to promote a support group by bonding with other moms. You must have a normal routine pregnancy to participate in this program. Also, when the new hospital opens each mom will have their own private room.

c. Business Operations Division – Mr. Lauer and LTC Courtines, Acting DCCS

(1) Mr. Lauer stated that they are conducting a TRICARE analysis to see who is enrolled in TRICARE Prime. They have found there are a lot of Active Duty Family Members not enrolled in TRICARE Prime versus Standard. They are trying to see if there is a disconnect, since the local TRICARE Service Center is no longer on

MCXI-CO

SUBJECT: Health Care Advisory Council Minutes

campus, are patients assuming they cannot enroll in TRICARE Prime, or are the online enrollment instructions unclear. They are going to be reaching out to the beneficiaries in the near future to contact patients making them aware of the benefits of TRICARE Prime. He asked for committee members with FRGs to inform Family Members that they are going to be offering TRICARE briefings. To schedule a briefing go to the CRDAMC Webpage and click TRICARE, click schedule a TRICARE briefing, complete the request, and then submit your request. Once this request is submitted he receives it through email and he will contact the requestor to schedule a date, time, and location. They will brief on the benefits of TRICARE Prime, and also provide education on how TRICARE Prime can save money because, the patient is not charged a deductible.

(2) LTC Courtines stated due to the summer PCS season we have lost some access to care in some of the subspecialty clinics. For example, in the Gastroenterology clinic that performs colonoscopy procedures, patients may experience longer wait times for appointments. This should start to resolve around September timeframe. However, please be patient because, the providers still have to in-process and be credentialed by the hospital before appointments are available for incoming providers.

d. Pharmacy – LTC Yang and COL Darnauer

(1) LTC Yang introduced himself and stated that he is replacing COL Roberts and he is arriving from Tripler in Hawaii. He responded to a question in the last minutes about transfer prescriptions to and from civilian and/or other MTFs pharmacies. The outgoing pharmacist must speak directly with the gaining pharmacist. Prescription transfers cannot be conducted by a pharmacy technician, nurse or physician. CRDAMC pharmacy can receive transfer prescriptions if that medication is here on formulary. If the medication is not on formulary, then that particular prescription cannot be transferred to be filled at CRDAMC. However, if you are already here and seen by your provider, you may ask the provider to complete a special purchase request or a non-formulary request to see if it can be approved to be filled at CRDAMC. The pharmacy has to review and go through the approval process to see if medications are allowed to be processed at CRDAMC. Due to state, federal, and Army laws and regulations the process is not automatic. Because of the laws and regulations as well as time zones, the process will not likely happen the same day. Due to the amount of information and to eliminate confusion to the patient population, COL Darnauer asked LTC Yang to prepare an informational paper for the CRDAMC webpage.

(2) COL Darnauer stated that when the new PX opens next summer. It will be a full functioning pharmacy to include filling new handwritten prescriptions as well as refills. MEDCOM has already approved funding and everything is going as planned.

MCXI-CO

SUBJECT: Health Care Advisory Council Minutes

e. EFMP – Dr. Lucas stated the Department of Defense updated and released the medical form for the Exceptional Family Member Program DD 2792 dated Aug 2014. The old form will not be accepted after 30 September 2014. If you go to GOOGLE, the new form will be the first to populate on the page. She asked committee members to please pass this information to their units and FRGs; so if anyone has an old form already completed, please submit it before 30 September 2014. In order to eliminate mistakes by providing patients outdated forms, she has alerted all clinics and departments to destroy old forms. And, the CRDAMC Webpage already reflects the change on the EFMP FAQ sheet. Please continue starting the EFMP process within 6 months, before PCSing. This helps ensure the Command Sponsorship is not denied or delayed due to not enough time to complete the process or a delay in unidentified medical conditions that cannot be supported at an overseas location.

f. Robertson Blood Center – 1LT Matthews stated that Robertson Blood Center is a collection facility and they collect, process, and ship blood products. They support both local demands on Fort Hood as well as overseas contingency operations. Please continue to encourage donors to stop by. The hours of operation are Monday – Friday from 0730 to 1530. COL Darnauer stated during the recent months she has noticed signs that list specific blood types that are requested during some of the blood drives. Robertson Blood Center has received a funding approval for a bloodmobile. COL Darnauer is not sure how long the process will take but it should be coming in the future. She stated they also provide education sessions and if you want to bring your FRG to gain education and donate blood, please contact the Robertson Blood Center at (254) 285-5808.

g. Red Cross – COL Darnauer thanked our Red Cross volunteers and asked to please continue to encourage active participant in this program. Our Red Cross volunteers continue to make a great impact in services they provide. New volunteers can sign up in the hospital Red Cross office located on the 2nd floor or contact them at (254)288-8144.

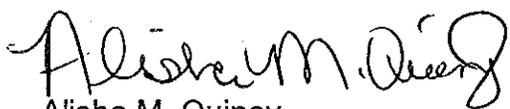
3. NEW BUSINESS AND PANEL COMMENTS AND UPDATES:

Evening Hour Clinic - COL Kondrat stated that we are looking at the possibility of opening an Evening Hour Clinic. Soldiers and Family Members stressed and interest in an urgent care clinic that would accommodate their schedules. Funding and staffing requirements to support an evening clinic are being reviewed and processed for submission and approval. COL Kondrat stated since his arrival 2 ½ years ago, he has noticed a decrease in ER visits from approximately 240 or 220 to 180 or 160. What this indicates to him is that our access to care to primary clinics has improved.

MCXI-CO
SUBJECT: Health Care Advisory Council Minutes

He believes by implementing changes to include our providers seeing 20 patients daily, enrollment and usage of the Secure Messaging System, usage of the Nurse Advice Line, and TRICARE Online has had a positive effect on decreasing ER visits and increasing access to care to primary care providers that directs proper utilization of required appointments.

4. The next HCAC meeting will be 24 September 2014, at 1030 hours at the Community Events Center. Please send agenda items before the 17 September 2014 to Ms. Quiney or Mrs. Williamson at alisha.m.quiney.civ@mail.mil or leslie.m.williamson.civ@mail.mil.



Alisha M. Quiney
Recorder
Patient Services Division



PATRICIA DARNAUER
COL, MS
Commanding