

Community Feedback from Vail Health Community Feedback Meeting

This document includes feedback from both meetings (English and Spanish) on Monday, August 5th and the feedback from the 30 day period.

2023 STRATEGY:

Information and Feedback based on [Vail Health Implementation Plan Update](#)

2022-2024 CHNA Implementation Tactics

1	Engage, Enroll, and Connect People to Services that Improve Whole Person Health \$5,900,000	5	Address Healthcare Staffing Shortages with a Focus on Increased Diversity \$914,000
2	Bring Care to the People \$9,700,000	6	Increase Early Childhood and Family Supports \$630,000
3	Focus Prevention and Early Intervention on Our Greatest Health Opportunities \$340,200	7	Improve System Interoperability and Integration \$1,600,000
4	Increase Utilization of Healthy Foods \$375,000	8	Advance Internal & External Policy & Incentives to Improve Population Health \$670,000

Source for \$: 2023 990 Schedule H and other, additional relevant inputs



FEEDBACK:

Engage, Enroll, and Connect People to Services that Improve Whole Person Health

Positive Feedback on this Strategy:

- Behavioral Health
 - Mental health investment. Building inpatient BH facilities.
 - Made big strides in all areas of BH. Access is better than it was 3-5 years ago. Good representation of an ideal partnership. He can always count on having a colleague or two participating with any initiative they have going on.
 - Historical challenging relationship from LEO and suicide prevention perspective prior to VHBH, appreciates building the resources in our county and VH and EVBH leadership to focus on creating a comprehensive BH safety net in our community so people can seek care they need in their community to promote wellness.
 - Whole person health = tackling mental health is huge and it's so much more than just one thing (physical health).

- BH has added a lot of providers. Used to be that finding a doctor was difficult, and now it's easier.
- Regarding the high suicide rate in our mountain community, question is it a specific population? There is no one socio-economic, age and we're trying to get upstream.
- VVCF more recently partnered with VH, started during COVID. VH has been a great partner, if someone has a medical crisis their bills are an issue plus they are out of work so they can't keep food on the table, roof over their heads. Echo the partnerships. The fact that we work together (lots of various partnerships).
- Investment in mental health and new inpatient facilities.
- West Springs no longer serves adolescence. We will be 1 of 2 in the state. So when it opens it's going to be full.
- Partnerships:
 - CareerWise apprenticeships (7/years in the system). Getting career learning and then coming back to our community.
 - CMC thanks VH for allowing CMC to help us with clinical placements with help of Sara D. and Jen L and have strong partnership to allow CMC to build programs. VH can help find radiologists to launch radiology program. Meet often to determine needs when considering new programs. Seeing students at CMC when visiting CMM. They like the pipeline of "growing our own."
 - The Home Health services evaporated. VH and ECPS have stepped up and have been pushing hard to resolve a major healthcare gap. Being agile, stepping up to the plate has been a huge pro.
 - What is Home Health? There is no information on this service if it is available. If it is available, it needs to be communicated more..
 - One thing that has changed from the "olden" days at Vail Health, there wasn't focus on community. Now partnerships with county, CMC, etc. Leadership is recognizing roles in community. Changing focus to population health. There are a lot of conditions that we live with and 15% of our population is food insecure. This is SCARY. How do you serve those people? Vail has been good about thinking about policy and how we can work together.
 - CMC partnerships - develop programs that help the community - symbiotic relationship.
 - VH started to tie all the various organizations together. Community events, a large entity pulling all the pieces together is helpful
 - Providing community conversation and feedback. Bringing multiple disciplines into the conversation, meeting others as resources, consistently meeting.
 - Meeting in different locations
 - Engaging with library to use the space for community discussions

- Creating opportunities for collaboration of for profits and nonprofits to be in conversation for shared solutions. Improve upon specialty care services is a huge need to keep people in our community and county and prevent the long drive to those care modalities
- Feels blessed to be in the community. Lots of resources but sometimes having a hard time getting people to those.
- Collaboration of community is a strength. Keep this kind of engagement going.
- Shaw Cancer Center - oncology support.
- Same-day appointments have been great.

Vail Health Opportunities on this Strategy:

- Behavioral Health
 - Mental health facilities
 - Rehab facilities are Denver based
 - Talking to youth, younger generations to help encourage prevention. Mitigate the sick care we currently have, plant the seeds to bring them up.
 - LatinX & Queer communities don't always have that sense of community/feel welcomed.
 - Behavioral health is obviously a focus. You can't go anywhere without seeing BH messaging. But has that gone too far. Are you missing other critical messaging because there is too much focus on the (great) BH resources.
 - Still hard to get a mental health provider. 9 weeks out. Someone might not survive. Still need more health providers and addiction treatment specialists.
 - Addiction treatment is necessary. Elyse mentioned someone who can't get coverage for APN because he's been sober for 30 days.
 - Husband has a client that needs inpatient care but can't get into inpatient... he's been sober for 30 days and insurance won't send him. His client is stuck. To get someone into addiction treatment is really expensive, insurance doesn't always cover it.
- Partnerships:
 - Build connectivity with partners so everyone has an "ambassador" to learn and understand health care offerings.
 - Volunteerism- want to help in our community to support our community in prevention
 - Miss 9 News Health Fair-need another health fair to support community
 - Do we leverage partnerships with Glenwood Springs? Where can we fill gaps and leverage partnerships for care? So many of us in the Valley come from urban areas and have a higher expectation for care and access. Expectations need to be better set.

- What are the outreach plans of getting the messages out there? All the programs are informative and helpful. Potentially different outlets. Message through primary care doctors and other organizations.
- Where is telehealth best suited in the healthcare system? At what point can you best utilize telehealth and communicate that process to the public.
- More resources/gatherings to learn more about resources in the community (i.e. community meetings like today) and learning from each other.
- Library offerings with health topics for the community would be good.
 - Could have education events at the local library for the community.
 - Spanish on VH website - since it's not in Spanish it's difficult for the Hispanic population to learn about health.
- Mira bus, healthcare broker, helps hispanic community get insurance. Worked w/ us to help get people on health insurance. What she's finding more with their clients now is they are asking about BH support. Are the health insurance companies actually covering EMDR / ECT (nobody is quite sure what this treatment is but it sounds like it may/may not be covered) BH services. She's having to do a lot of work with insurance companies to get coverage for her clients. She's wondering if we are seeing issues with getting claims paid. Carrie talking about how Medicaid is paying for coverage.
- Health Fair in the community (Lions Club) - may need resourcing. Re Engage this organization
- Substance abuse is front and center as a huge need. Child trauma from parent SUD affecting many youth in our area. Plus housing issues. Continuing to get people set up with health insurance and financial answers to healthcare especially for the undocumented population will continue to need resources. Continue to focus on NOT serving alcohol at events. Clinical detox did open in Glenwood, but we need more services in our county.
- Some challenges are not just Vail Health owned, they are community and county related. FQHC are slightly less available in Eagle county versus others. Prenatal and postpartum care is a huge need for timeliness (how can we partner w/ others to help with this need?). County Health Needs Assessment found that specialty care and access to language complimenting care is a challenge from the Eagle County Public Health findings. We need a huge host of partners in collaboration. Sustainability of Castle Peak Senior Center as an ongoing concern is a challenge in our community. Caring for the older adults and aging population is a key priority of the County Public Health Department. Home health is a big thing to be addressed. ECPS and VH have been working on some solutions that could be coming out in the near(ish) future.

- Transportation
 - Location and logistics issues affect access for our community
 - The cancer center is centrally located. No bus stop up there so people who need to use public transportation can't get up there.
 - Medical transportation in the valley is limited
 - Reliable shuttle services to get you to your medical appointments
 - Medical care delivery system - logistics and resources for the lack of system integration - if the system isn't really a system, what is the point? Lack of integration and working together so the patient moves from one to the next easily. (mayo, cleveland clinic)

Considered Action from Feedback on this Strategy:

- The majority of this feedback aligns with current interventions outlined in the implementation plan. This information provides feedback for the prioritization and consideration of other potential actions. Based on this feedback Vail Health will continue and prioritize our efforts related to
 - Youth support and prevention efforts, ie Your Hope Center in school services, My Future Pathways.
 - Partnering with regional rehab and addiction programs and facilities to ensure the needs of our community are met.
 - Offering and building on outpatient addiction services.
- Additionally Vail Health is also focusing on the following:
 - Partner with our current transportation services to better meet the transportation needs in our community.
 - Partner with Castle Peak Senior Life and Rehabilitation to lend support in sustainment and meeting community demand.
 - Engage in Age Friendly Health System quality improvement efforts.

Bring Care to the People

Positive Feedback on this Strategy:

- Your Hope Center launched a community stabilization program in 2021. No services for people transitioning from crisis to seeing a provider. VH funded and now helping staff the program. With VH we've doubled our staff.
- New Hospital is top of the line
- Remodeling efforts creating better experiences
- Edwards Community Health Campus is a huge hope in our community and needs to continue down that path
- Helicopter pad and physical facilities are phenomenal and top notch, especially in a 5 year time frame. Vail Mountain takes Vail Health as example of physical structure capacities
- Accessibility - Mira Bus as an example of accessibility - it's a team effort. Take non-profit, charitable org and private and public coming together -

- Emphasis on “Population Health” - how we all come together to prioritize community health.
- Encouraging to see progress, but bigger systemic issues.

Community Paramedic Program & Home Health Care

- EMS, ER - most expensive services, how do we prevent ever having to use these services for preventable conditions?
 - Home Health - services at home, connect to resources before needing to go to ER.
 - Discharge support once they get home, helping to cover those needs too.

Prevention investment is significantly lower - should be biggest spend

- Bring care to the people - largest investment - transparency for what this investment covers, provides, etc.
- CMC partnership is highly valued by both organizations
- Vail Health has partnered with MF, supported MF. Eagle County had highest incident of suicide, Vail Health addressed that need. Oncology. Collaboration is very supportive. Supports MF to offer consults at a lower rate, lower rent. We really appreciate Vail Health. They've done an enormous job of supporting our patients. Started when there were two little rooms and now Mountain Family supports all different practices. Huge growth since 1996 and Vail Health has been there since day 1. Bringing care to all people. Even this meeting is trying to figure out what we don't have.
- Grew up in the valley, friend was pregnant and didn't want to have her baby at VVMC and went to Glenwood. But now customer service is better, walk in the door and the way people make you feel. A dramatic change since I was younger. You don't need to go anywhere else in the state to get the care you need.
- What is the next step, will there be disparities based on social economic status, race, etc.
- Working w/ the hispanic community and undocumented. Made us feel more welcome and cared for. They are opening up more and they are not so scared to go and take care of themselves.

Vail Health Opportunities on this Strategy:

- No neurologist is frustrating. Also “optometry” (ophthalmology).
- No neurologist, and it is VERY frustrating. She would love to have someone. And she wants optometry. (note - Dr. Godin did not have enough patients to warrant a full-time position)
- Been to the hospital on numerous occasions. When husband suffered a mini stroke, had to do a telehealth visit. They transported him to Denver, would like to see a neurologist here. Broken leg on the mountain. Attention to detail is incredible. The coordination from mountain to hospital was amazing.

- Specialty care is not available, such as arthritis care, have to go outside the valley for care. Telehealth is a viable option for these speciality. Gap in Geriatric care. Burn treatment was not available at the Vail Health and was shipped to Denver and cost 25K.
- Son w/ broken clavicle. No pediatric orthopedic specialty care. It's understandably a specialty service that doesn't quite make sense from a business perspective. Drove 4.5hrs for a 10 min appointment. Through this process, they learned that they can do imaging locally at CMM and then Telehealth with other specialty care elsewhere instead of traveling. VH could better provide guidance and info for how to "navigate" specialty care and telehealth and how VH services can support this process.
- Geriatric care - partnerships with more front range doctors and have them come up to Vail Health once or twice a month.
- No mental health care during the weekend when needed.
- Need more providers that speak Spanish. Olivia's fund is awesome but having people available to teach Spanish speakers how to drive - adult women tend to need this the most. Couples counseling in Spanish would be very beneficial.
- Breast Cancer service gap that we didn't have one and now do. It was a good solution.
- Specialist availability - Heart issue - immediately sent to Denver.
 - Maybe heart related specialists are not as available or plentiful for the needs of the community. (Cath Lab open M-F)

Considered Action from Feedback on this Strategy:

- The feedback aligns with current interventions outlined in the implementation plan. This feedback provides for prioritization and consideration of other potential actions. Based on this feedback Vail Health will continue and prioritize efforts related to
 - Continuing to assess the need for additional specialty care services inclusive of where partnerships and telehealth might be most appropriate.
 - Hiring bilingual providers and staff in order to meet the needs of the community.
- Additionally Vail Health is also focusing on:
 - Improving upon social determinants of health screenings throughout the Vail Health system.
 - Considering expanding Vail Health's Functional Medicine offerings.

Focus Prevention & Early Intervention on Our Greatest Health Opportunities

Positive Feedback on this Strategy:

- All the community outreach is so much more extensive than anywhere else. Education programs are awesome.

- Over the last 25 years, the change has been remarkable in healthcare, how people make you feel and the quality of the healthcare. You don't need to go anywhere else in the state to get the quality of healthcare.

Vail Health Opportunities on this Strategy:

- Our culture is focused on fast food and taking pills. Need to balance what is promoted on TV and what we “really” need (prevention)
- Prevention - retreats, focused on making community better and healthier, need community support from all partnerships - starting here and letting things grow. Be a model for the nation.
- Acute care is the focus, but the problem isn't going to be solved at this point. It happens way sooner (upstream opportunities) - social connections to help thrive and mitigate the acute care needs.
 - Putting \$\$ in acute care is the wrong strategy.
- Need more funding /support in prevention
- Basic social needs for community need to be met in order to elevate prevention and healthier lifestyle
 - Housing, food, clothing
- Integrate functional medicine into traditional medicine
 - Lifestyle, nutrition, exercise, sleep, relationships, sunlight
 - Educating and changing the lifestyle that will prevent the need for medical care downstream.
 - Core of the problem is costs, non-reimbursable
- Opportunities to help support populations needing basic needs met and education on healthier lifestyles.
 - I.e. bike path
- More prevention investment
- Need arm of VH to focus on preventive care and approach-adding nonprofit to focus on this. MIRA bus doing good job to support preventive care
- In the future I would like to see us building more to focus on prevention, retreats to focus on a more healthy community. Happy with VH focus and we can continue to grow in this area
- Do not pour money into acute care, need to focus on prevention
- Need to highlight that we are building a healthcare system vs medical system
 - Functional medicine integrated with traditional medicine
- Try to group in communities to support prevention.
- Health and prevention focus has opportunity - experience with family who “didn't qualify” for the services.
 - Preventative opportunities
- Only paid for what we can deliver. Cannot get paid for prevention.
 - How do we as a community tackle this - incentive for preventive measures is not there?

- Cohort of patients willing to pay a premium for certain services - “Robin Hood effect” those that afford it, can pay costs for all. Non-profit arm to support the effort.

Considered Action from Feedback on this Strategy:

- The majority of this feedback aligns with current interventions outlined in the implementation plan. This feedback provides for the prioritization and consideration of other potential actions. Based on this feedback Vail Health will continue and prioritize our efforts related to
 - Continuing free community wellness educational events with a focus on nutrition per the feedback.
 - Improving health screenings timeliness for Colorado Mountain Medical patients.
 - Working with MIRA on wellness and educational events.

Increase Utilization of Healthy Foods

Vail Health Opportunities on this Strategy:

- Healthy lifestyle, healthy food. Where do you hear about how to eat right? Fight obesity and offer preventive health
- Hospitals can do a better job of reaching out to the community. How do we create awareness and offerings for those with food allergies like Celiac disease. How can we be most inclusive of all sorts of people that have more generalized health conditions and cater towards many diets as food is key for health. Vail Health has health in the name, what is healthy and how are we promoting that better?

Considered Action from Feedback on this Strategy:

For this strategy, no action is needed. We will continue current interventions as outlined in this strategy.

Address Healthcare Staffing Shortages with a Focus on Increased Diversity

Positive Feedback on this Strategy:

- One of the biggest changes seen at Vail Health is TRUST at a direct level as a patient or from a community perspective. Even if there’s an issue, they care about the issues rather than be defensive. Believe that’s attributed to a change in leadership. Way better!
- Vail Health led the way in the model of “we can all work together.” Personally, staffing at Avon CMM skews young. Battle Mountain and Eagle Valley graduates—interesting uptick in growing our own. She thinks the staffing at CMM

specific to blood draw, notes that a lot of staff are local at CMM and thinks that's cool. Likes that it's local. As our population continues to grow and providers begin to retire. Worry that we won't be able to fill those positions with the same type of providers that will stay. Sharri - they've added a primary care and an internal provider from CMM. They are trying to get out there early to recruit and they have a new OB joining next month, September, to replace Dr. Samuels.

- Attentive staff for patients

Housing

- Eagle County Schools have stepped up to provide housing and support to staff to make living here easier. What is Vail Health doing to support staffing and housing initiatives? - Nico discussed the Fox Hollow employee housing initiative and additional Eagle/Summit County housing initiatives.

Vail Health Opportunities on this Strategy:

- Staff fulfillment and provider empowerment to care for patients in all the ways they need to be cared for.
- Volunteerism - are we taking advantage of this opportunity?
- High turnover of doctors at CMM and needing to change doctors frequently.
- Depending on where you go, different levels of service. Do we have an ethic on service? Consistent care across the system.
- Different levels of quality of service across the system. It's not the same at all facilities across all providers, etc. Patients are aware that there are goals so they may not get the same quality of care across the board.
- Feedback included general philosophy related to DEIB efforts and importance of ensuring correct hiring processes within healthcare organizations.

Considered Action from Feedback on this Strategy:

- The majority of this feedback aligns with current interventions outlined in the implementation plan. This feedback provides for the prioritization and consideration of other potential actions. Based on this feedback Vail Health will continue and prioritize our efforts related to
 - Vail Health Volunteer Corps and how they are incorporated within Vail Health.
- Additionally Vail Health is also focusing on:
 - Employee/Provider wellness, retainment and engagement.
 - Provider quality performance and alignment with goals.

Increase Early Childhood and Family Supports

Vail Health Opportunities on this Strategy:

- Early childhood where we are starting to make some good grounds. Cost of living is challenging, so connections to resources so you can feel supported when you bring that child home. Tax money is starting to go towards early childhood (\$2M). Wishes that more people could hear those stories

Considered Action from Feedback on this Strategy:

For this strategy, no action is needed. We will continue current interventions as outlined in this strategy.

Improve System Interoperability and Integration

Vail Health Opportunities on this Strategy:

- Need ONE Electronic Health Record to share between all providers, facilities, etc.
- Website is not fully in spanish
- Financial/billing and insurance are all third parties and it's hard to get ahold of the right person to solve the issue.
- It takes 4 years to understand the healthcare system. We need more navigation partnerships/resources so that patients can get to the right department or person.
- Not able to get a hold of people
- How do all entities work together so we're all hitting the mark
 - One individual can access these entities in a multitude of ways, how do we have cohesion in care, support, resourcing
 - Supporting our partners where our populations feel comfortable
 - Health ambassador program
- Transparency in Billing / Payer Mix / Insurance / Medicare and medicaid reimbursements
 - Services and care facilities can offer so much, but they are cost prohibitive.
 - Community wanting more transparency on why some services are not provided
 - Economics and optics on how much the health system is earning in revenue - transparency in the split and payer mix, etc.
 - Everyone's trying to get the most split
 - Understanding facility costs - why different when provider is the same
 - Better integration
 - Price transparency - still need work in this area to allow community to understand prices

- System Integration
 - Not all of our systems are integrated and not always “talking” to each other, we need to strive to make improvements.
- Navigating the healthcare insurance industry = EDUCATION IS AN OPPORTUNITY. Especially for the Spanish speaking population. It’s important to have financial navigators.
- Language barrier for access.
- I love Vail Health. 16 surgeries and said that we do a really good job but the only complaint is insurance issues. Went on line to look at bills and it said that there is nothing due but balance was sent to collections. Amy will get back to William about billing issues.
- More funding to go to greater efficiencies, such as electronic medical systems that talk to each other. It is frustrating when you have to fill out the same form/information for multiple organizations, CMM, Shaw, etc.
- Staffing challenges are effecting how quickly, or the ability to access care. For example, scans were available at Shaw twice a week and now is only available once a week. Critical procedure areas should be a focus of staffing availability.
- When you check in the hospital and workers comp and was entered incorrectly and has had issues with billing ever since. Input information correctly the first time. Other individuals have had other experiences with incorrect information in there med records.
- Boots on the ground navigation support has a great dashboard to share. Housing is first need, medical is second need. He spends a lot of time taking people to resources. Could be barriers. The resource might exist, but how do you get people there.
- Transparency with the billing system and statements - showing amount to pay and no description of the services rendered.
- Billing system difficult to understand
- Get a statement and has nothing about what you are treated for and just a bill
- Interoperability, integration of patient records -
 - Trouble communicating, sharing medical information.
 - Different EMRs, weak interoperability.
 - Forced to turn over records to multiple doctors when they were leaving.
- Since COVID, as a provider, sharing medical records is a big issue. Trying to look at records prior to appointment. Hugely problematic when I don't have any records. How can sharing of records be assisted? If an ED doc can send the record or discharge summary to Mountain Family, that would create the needed connection. Labs, meds, etc.
- Patient education to teach people how to use portals to be involved in their own healthcare. If not given instruction, it makes it harder for providers to communicate.

Considered Action from Feedback on this Strategy:

- The majority of this feedback aligns with current interventions outlined in the implementation plan. This feedback provides for the prioritization and consideration of other potential actions. Based on this feedback Vail Health will continue and prioritize our efforts related to
 - Creating one EMR for all service lines of the Vail Health system. Funds have been set aside for this upgrade and Vail Health will continue to work toward this integration.
- Additionally Vail Health is also focusing on:
 - Improving overall navigation of care and the processes necessary to ensure efficacy and effectiveness.

Advance Internal and External Policy and Incentives to Improve Population Health

Vail Health Opportunities on this Strategy:

- Communication from the health system becomes distrustful due to the politics and game of government funding, reimbursements. Big opportunity for plain language, transparency
- Medical system vs. healthcare - building a community that is promoting health.
 - System errors, mitigating these so healthcare is prevalent.
 - Healthcare system in our community vs. medical system. What does this look like?

Considered Action from Feedback on this Strategy:

For this strategy, no action is needed. We will continue current advocacy as outlined in this strategy.

Miscellaneous Feedback:

Need for Community Space

- Mobile homes that don't have potable water. Environmental waste from excessive water bottles in that community as well.
- How do we build community when there is nowhere to meet for free. Can't create community without that.
- Used to have the teen center up in Lionshead. They had counselors that would help with homework/etc. During the week it was open until 9. Gave people a place to go.
- MFPs has a place but we could use a community center that is a space for people to take a break/hang out/gather.

- You need a place that isn't so regimented. Just a hangout place
- Community assessment at county level they heard there needs to be a gathering space for all age groups and some separation of ages desired from some but not in total agreement.
- Trauma is being experienced at home as well and finding a community space for building community is challenging.
- Vail Resorts does outreach alongside with SOS to help some demographics of youth to enjoy the outdoors and find community. Sonia feels that it is selective and not fully inclusive to all people in our county easily

Considered Action from Feedback on this Strategy:

This feedback will be considered with our upcoming CHNA efforts.