Practice Transformation Task Force:

Webinar Community Consensus Standards

November 5, 2015

Context of SIM

Connecticut will establish a whole-person centered healthcare system that will…

- Improve Population Health
- Promote Consumer Engagement
- Reduce Health Inequities
- Improve access, quality and patient experience
- Improve affordability by lowering costs

Connecticut will achieve this through seven strategic initiatives:

Pop Health Mgmt.

Value Based Insurance Design

MQISSP

Quality Alignment

AMH Glide Path

CCIP

Consumer Engagement

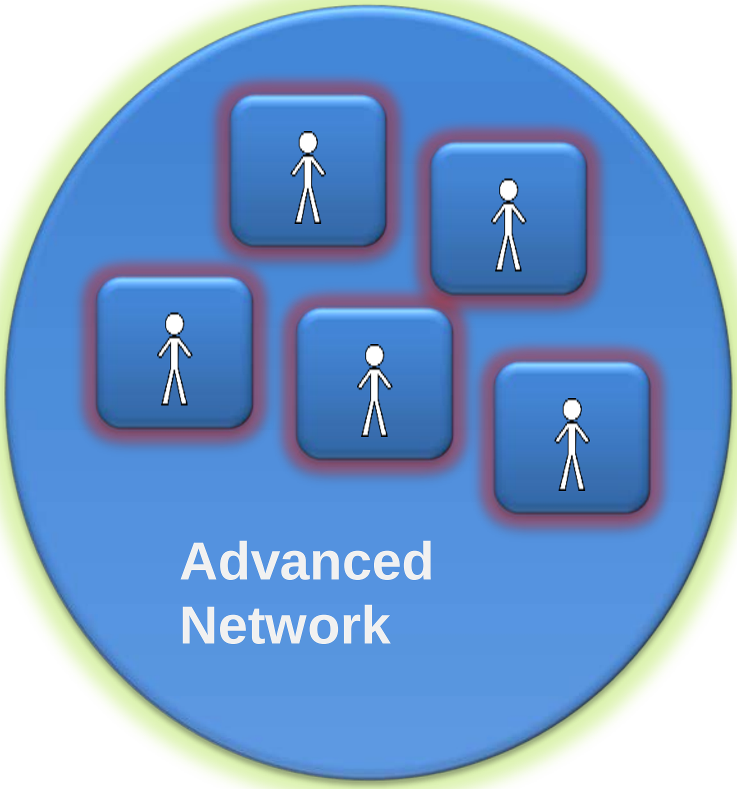
Payment reform to value based payments to promote/incentivize higher quality

Delivery system reform to support higher quality through care transformation at the practices and network levels

Improving capabilities of Advanced Networks

Community & Clinical Integration Program

Awards & technical assistance to support Advanced Networks in enhancing their capabilities in the following areas:



Supporting Individuals with Complex Needs

Comprehensive care team,
Community Health Worker , Community linkages

Reducing Health Equity Gaps

Analyze gaps & implement custom intervention ✚ **CHW & culturally tuned materials**

Integrating Behavioral Health

Network wide screening, assessment, treatment/referral, coordination, & follow-up

Community Health Collaboratives

Comprehensive Medication Management

E-Consults

Oral health

Community Health Collaboratives

Establish consensus protocols to better standardize the linkage to and provision of socio-economic services related to the health needs of patients and care transition coordination among community participants. This system of shared decision-making helps further the integration of community services with healthcare services and may prepare communities for the next stage of shared accountability under population health related SIM initiatives. The community consensus guidelines will impact patients with complex conditions and health equity gaps, who are disproportionately in need of better coordination with community resources.

Design Programs: Community Consensus & Linkages

Shared Governance Objective

Development of Advanced Network and FQHC linkages to community resources is a key component of the CCIP. Because many of the needed community resource providers are resource, capacity, and geographically constrained the PTTF is recommending convening community stakeholders to establish local Community Health Collaboratives to better integrate social services. The structure will be developed by the technical assistance vendor in the service areas where there are Advanced Networks and/or FQHCs participating in CCIP with the involvement of the CCIP participants and other key healthcare stakeholders to be transitioned to local oversight. Efforts are already underway to coordinate these activities with DPH and other public health efforts.

Intervention Highlights

- The **Community Health Collaboratives** will be the primary vehicle of community consensus.
- To establish the Community Health Collaboartives the technical assistance vendor will convene healthcare stakeholders from **across the healthcare continuum** and **relevant community stakeholders**
- The stakeholders convened will be representative of the community being served and has to include **consumer representation**
- The community collaborative will be responsible for establishing protocols and processes for **network linkages to shared resources in the community** and can serve as a resource for determining additional community needs (e.g.; transitions from hospitals to home)
- **Prioritization of the linkages** established will be informed by an **assessment of the communities needs and resources conducted by the community collaborative**

Community Consensus & Linkages

Standards

1. Transformation vendor expectations -

The transformation vendor develops a planning strategy that ensures the Community Health Collaborative process is unbiased, inclusive of relevant stakeholders, and person-centered in its vision and goals. Strategy includes the following:

- Conflict of interest policies
- Plans and timelines for regular meetings including for the transfer of convening responsibilities to a local board
- Goals and objectives

Community Consensus & Linkages

Standards

2. Identify and convene stakeholders impacted by Community Health Collaborative model in defined service area(s)

- The vendor convenes healthcare and community stakeholders who are representative of the designated service area. At a minimum include:
  - Social services providers reflective of needs of the patient populations being served, informed by the root cause analyses conducted for health care disparities and complex patients
  - Local government agencies with health focused missions (e.g.; local health department, municipal leadership)
  - Healthcare providers from across the continuum of care (i.e., hospitals, LTSS, primary care practices, VNA/home health, FQHCs, specialists, behavioral health and dental providers, pharmacists, etc.)
  - United Way (2-1-1)
  - Consumers representative
- Will also work with state health government stakeholders
- The vendor establishes a schedule for meetings that are open to the public

Relevant socio-economic domains include, but are not limited to housing, nutrition, employment/vocational assistance, education, transportation, and legal assistance

United Way representation will be required to participate due to the central role they play statewide to catalogue social service resources and access to data

Community Consensus & Linkages

Standards

3. Develop standardized protocols and processes for network linkages to shared services

- The Community Health Collaborative defines shared services and community linkages according to the local needs of the networks and takes into consideration state population health needs, goals and strategies.
- The Community Health Collaborative identifies operational areas appropriate for standardization working with networks to identify local needs
- The Community Health Collaborative develops protocols and processes that reflect the needs, resources, and capabilities of the local community in delivering integrated, person-centered care as follows:
  - Solicits input from patients and consumers
  - Considers the capacity and capabilities of the healthcare and social service providers in the community
  - Builds upon existing community health initiatives, partnerships and resources.
- The Community Health Collaborative develops an implementation plan and process for proposed standardized processes and protocols across the networks and community partners

Community Consensus & Linkages

Standards

4. Implement long-term assessment and improvement process -

- The Community Health Collaborative transitions convening responsibilities to a board of local stakeholders pursuant to agreed-upon plan
- The transition plan and goals & objectives take into consideration, to the extent practicable, the SIM Population Health Plan including recommendations Health Enhancement Communities and Prevention Service Centers.
- The Community Health Collaborative holds regular meetings and forums to collect concerns and feedback on potential improvements
- Within available resources, the Community Health Collaborative incorporates a data collection and analytics function to determine the impact of these new protocols
  - Analytics will compare health outcomes and utilization compared to a relevant baseline or comparison group in coordination with the SIM PMO
- The Community Health Collaborative will update and modify these protocols over time given the results of the analytics and the feedback from collaborative participants.

Comment 1

- It is important to mention the inclusion of the Local Mental Health Authorities (LMHA)to address the linkage with the adult mental health system. I think they should be named and not just be part of the large group of all community agencies. They are an organized system of care for adults with serious mental illness.
- I continue to be concerned about overly complicated administrative structures without the financial support for the providers asked to participate in them. I believe this needs to be addressed if you are expecting providers to devote significant time to an effort.
- I fully support the inclusion of community based providers to address a wide range of issues and improve outcomes

Questions & Discussion