

Review Team ACH Readiness Determination and Comments: Cascade Pacific Action Alliance ACH Designation

Purpose: The intent of the ACH Readiness Proposal (to be submitted by each emerging ACH) is to assess (through minimum requirements and outputs) the initial development of a functional ACH that exhibits a strong foundation for regional health improvement efforts and collaborative partnership with the State. This assessment is based on ACH readiness for the next phase of development and activity, highlighting initial considerations and infrastructure surrounding governance, engagement, and sustainability frameworks.

Process: The review team consists of the HCA, DOH and DSHS “ACH Project Team,” along with Group Health Research Institute (GHRI) partners. In reviewing the submitted portfolio, the review team considered the examples associated with each category to assess if the ACH applying is ready for designation and the next phase of activity.

Designation decisions must be based on if the ACH has met or surpassed the minimum threshold by submitting materials in-line with the examples and if those materials correspond with the previously identified requirements for each category. While not anticipated prior to designation, a gap between the documentation provided and the minimum requirement will result in a request for more information to clarify the intent or work completed to-date.

Critical feedback will accompany the designation decision to allow for additional discussion and continued improvement. Feedback will be outlined in three sections: Promising Practices, Opportunities, and Questions for Follow Up.

A. Applicant: Cascade Pacific Action Alliance

B. PDF Contains Required Material (check as fulfilled):

- Required: Introductory cover letter (including summary of content and contact information)
- Required: Table of contents (including the list of supporting documents organized by category)
- Required: Narrative for each category and supporting documentation meet the category requirements (total: 6; including description of how each document matches category requirements)

C. Categorical Requirements

Categories 1-3

- .

Category 1: Operational Governance Structure

Based on the materials supplied for Governance Structure, the emerging ACH should be designated and continue to build on this foundation.

X Agree (although more information may be required)

More information required prior to designating

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team's Determination:

The governance structure meets the requirements outlined in category 1, as evidenced by the Charter, Governance Structure Visual, Roles & Responsibilities document, Decision Making Process, Conflict of Interest Policy, Governance Structure Review Policy, Council Meeting Summaries, and Support Team Meeting Summaries. Additional comments from the review team are outlined below:

- **Strengths:**
 - **Charter is clearly structured and easy to identify the major points regarding purpose, approach, functions, principles and structure.**
 - **Roles and responsibilities matrix very clearly describes CPAA functions and demonstrates accountability on a number of fronts. This is a great document and can be an example for other sites.**
 - **Appreciate the acknowledgement of when/how testing occurred to inform the processes.**
 - **Clear portrayal of the intent to build on momentum and structure that already exists within the communities, including the action to use existing local forums in the Counties (to the extent possible).**
 - **Clear policy regarding annual assessment of the Governance structure but recognition of the need to adjust on a more consistent basis as needed (i.e., for the inclusion of Tribes).**
 - **Conflict of interest policy is well outlined and provides members with clear expectations. It will be beneficial to compare this approach to others that do not define the conflict of interest as narrowly and/or require all conflicts. Appreciated**

how the policy touched on the broader issues of conflicts of interest outside of just funding gains.

- **Opportunities:**
 - Likely, just an issue resulting from the conversion to a single PDF but the charter has several formatting errors. By no means is this an indication of an issue with the requirements of this category.
 - Bylaws are not necessarily called out, but the compilation of these documents may be the chosen representation of bylaws; was that the intent?

- **Questions:**
 - Just to be certain, personal conflict of interest is not tied to organizational benefit/gain if there is not a connection to personal gain, correct?
 - To re-open a past decision do you need consensus to re-visit or just a quorum? Has this come up in the past?
 - Has the Support Team fulfilled any decision-making functions on behalf of CPAA other than setting agendas and informing action to be taken by CPAA?
 - How will changes in governance personnel be addressed to ensure equitable representation over time? For example, if someone on the governing board moves, who is “voted in” – is there a wait list?

Category 2: Balanced Multi-Sector Membership

Based on the materials supplied for Governing Body Membership, the emerging ACH should be designated and continue to build on this foundation.

X Agree (although more information may be required)

More information required prior to designating

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team's Determination:

The governing body membership meets the minimum requirements outlined in category two, as evidenced by the Council Composition documentation and Annual Governance Structure Review Policy. Additional comments from the review team are outlined below:

- **Strengths:**
 - **Clear structure for how each County is represented and how it corresponds with the different sector categories. This allows all partners to feel equal in what they bring and how weighted their role is.**
 - **Between public health, social services and other key stakeholders (social determinants) only 17 of the 44 members are from the broadly defined "medical" sector.**

- **Opportunities:**
 - **It is identified in Category 3 as a priority, but I want to note here that Tribal representation is also a priority for the State as we identify the appropriate strategies and provide the support to facilitate Tribal participation, beyond engagement. Note that this strategy will occur in partnership with the State and Tribes moving forward.**

- **Questions:**
 - **Have you considered a caucus/rotational approach (i.e., having one MCO vote with all included)? What would be the pros and cons?**
 - **What might be the benefits and challenges resulting from a more nimble structure with fewer representatives? Has CPAA discussed an approach to still appropriately engage Counties while having a more representative based model? As time goes on**

how will the size of the group be evaluated to determine if it is functioning as intended?

- **Behavioral health says there are five representatives on the council, yet one mental health provider, one chemical dependency provider and two RSN's are called out, which adds to four.**
- **Was it intentional not to include a list of members? This may be useful in the future to see overlap of who is on what work group.**

Category 3: Community Engagement

Based on the materials supplied for Community Engagement, the emerging ACH should be designated and continue to build on this foundation.

X Agree (although more information may be required)

More information required prior to designating

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team's Determination:

The community engagement activities meet the minimum requirements outlined in category three, as evidenced by the Communications Framework, Local Engagement in setting Health Priorities, Overview Presentation to Tribes, and Tribal Engagement Strategy. Additional comments from the review team are outlined below:

- **Strengths:**
 - **Very robust and thoughtful strategy to engage Tribes based on discussions with Tribal representatives and feedback from HCA's Tribal liaison, Jessie Dean.**
 - **Building on existing community forums to incorporate a linkage to CPAA. Appreciate this being called out in several places of the application.**
 - **Initial engagement activities underway regarding transparency, use of the website and social media, and newsletters. In addition, the Communications Framework provides a clear linkage between the CPAA and community forums, in addition to an annual regional public forum.**
 - **The presentation dated June 4 serves as a good foundation for State contracting role with Seib PPA potentially.**
 - **Good to see that there is an evaluation of communication strategies (continuous improvement)**

- **Opportunities:**
 - **I think additional discussion regarding the distinction between engagement of sectors and engagement of the community/public at large. The two do overlap some but it seems most of the community engagement activities described pertain to engagement of community sectors/organizations as opposed to the general public, underserved populations, populations with the greatest health disparities, etc.**

- **Unsure of how public the forums are – would like to see that “engagement” reaches those community members otherwise not engaged in any ACH activity.**
- **Presentation dated June 4 has the same behavioral health council representation membership number discrepancy as listed in Category 3 comments (five listed, four called out).**

- **Questions:**
 - **Have you considered a more active role for the public as opposed to it being an outreach activity, i.e., inviting members of the public to CPAA meetings? What would be the benefits or challenges of open public meetings?**
 - **Was there or should there be an assessment of each of the existing County forums to identify if these are adequate community engagement strategies? It makes sense to build from existing efforts but it is important to understand what is already working well and what might need improvement. This may be a potential opportunity for TA?**
 - **How often are the interviews with community leaders in the seven counties occurring; what is the process for the identification/selection of interviewees; how are questions decided upon; who is the interviewer; are the interviewees on the Council?**
 - **Was the concept of collective impact shared and discussed with ACH partners?**

Category 4: Backbone functions/roles identified and documented, whether fulfilled by one or multiple organizations. This documentation should also include a process for the governing board to select and/or reaffirm the backbone organization(s), allowing for adjustments as necessary.

Category 4: Backbone Functions Established

Based on the materials supplied for Governing Body Membership, the emerging ACH should be designated and continue to build on this foundation.

- X Agree (although more information may be required)
- More information required prior to designating

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team’s Determination:

The backbone structure meets the minimum requirements outlined in category 4, as evidenced by the Council and Backbone Support Roles & Responsibilities, Annual Governance Structure Review Policy, and Backbone Performance Review Summary. Additional comments from the review team are outlined below:

- **Strengths:**
 - **Clear demonstration of CHOICE’s ability to perform the administrative functions for CPAA, including additional resource acquisition to support the Council.**
 - **Implementation of an annual review policy, including the testing of the policy in June. Clear demonstration of accountability to CPAA. Potentially a model to recommend in other regions.**
 - **The performance review survey results are impressive, especially considering the task and the timeline. Good work. Really appreciated that this was done – should serve as a strong suggestion for other ACHs to follow.**
 - **Per the comment above – the annual process for the vote of confidence is a nice model and should be implemented across all the ACHs**

- **Opportunities:**
 - **No specific opportunities identified at this time.**

- **Questions:**

- **Has CHOICE considered a call-in option as one of the comments suggests? What are the pros and cons of implementing a call-in option for members traveling from a distance? Interesting to note that this was only mentioned once in the response questions; I wonder how isolated the individual would feel on the phone, and how voting would be impacted.**

Category 5

- Draft or final inventory developed and highlights initial priority areas (i.e. explanation of what services/resource gaps and assets exist across the region, such as transportation, housing, education, insurance, health care access, etc.)
- Work plan in place to reflect the iterative development of the inventory and future or ongoing development for the Regional Health Improvement Plan (including potential support from ACH TA team) with goals, deliverables, a timeline, and roles and responsibilities

Category 5: Initial Priority Areas and Strengths Identified

Based on the materials supplied for Governing Body Membership, the emerging ACH should be designated and continue to build on this foundation.

X Agree (although more information may be required)

More information required prior to designating

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team's Determination:

The Regional Health Needs Inventory meets the minimum requirements outlined in category 5, as evidenced by the Health Priorities Matrix, Health Needs Assessment, Regional Indicators and Assets inventory, Health Priority Problem and Vision Statements, Health Improvement Plan Objectives, and Health Improvement Plan Work Plan. Additional comments from the review team are outlined below:

- **Strengths:**
 - **Clear momentum on a regional health improvement plan supported by recognition of shared priority identification. It is clear that there is already progress on the identification of objectives and corresponding actionable strategies.**
 - **Use of existing data to inform and confirm the selected priorities. The synthesis of the information into an accessible presentation was well done.**
 - **Understanding that the inventory represents more than just health needs. Assets and gaps are also identified.**
 - **Ability to compile existing assessments/priorities, including MCO priorities, community priorities and state priorities.**

- **Indicator Development Summary Report was extremely comprehensive and well outlined; supported and justified the application and plan well.**

- **Opportunities:**
 - **A clearer distinction regarding regional needs and corresponding actionable strategies. It may be appropriate to use the current shared priorities identified in the matrix. A confirmation process was noted but the crosswalk from regional data/trends to the identified priorities does not appear to be documented. Something to consider as CPAA participates in ACH TA activities around priority selection, etc. As CPAA noted, this is an iterative process.**

- **Questions:**
 - **What was the process to review the regional needs assessment/data to confirm the identified priorities? The priorities appear to be strategies so an understanding of the crosswalk from identified needs to appropriate strategies is important.**
 - **Does CPAA plan to monitor all of the indicators listed (assuming a source is available)? If so, how will this potentially crosswalk to a core / streamlined set of ACH measures for the region?**
 - **How often will the priorities matrix be updated, and has it been an issue to have only one county in most of the areas identified?**
 - **Will Wahkiakum have metrics in the future that were not available (ex: poverty estimate, median household income, income, etc.)**
 - **How does the RHIP work group plan to work across counties to coordinate a regional approach? How directive and flexible is the workgroup on this, and where is the capacity for coordination coming from?**

Category 6: Pathway for sustainability planning developed, including considerations around financial and social capital (i.e. considerations regarding potential savings characterization, additional grant sources, community matching funds, social impact bonds, membership dues, etc.)

Category 6: Initial Pathway to Sustainability

Based on the materials supplied for Governing Body Membership, the emerging ACH should be designated and continue to build on this foundation.

X Agree (although more information may be required)

More information required prior to designating

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team's Determination:

The initial pathway for sustainability meets the minimum requirements outlined in category 6, as evidenced by the Operating Budget and identified Sustainability Pathways. Additional comments from the review team are outlined below:

- **Strengths:**
 - **Clearly outlined budget for the remainder of 2015.**
 - **Regarding pathways, the three dimensions highlighted reflect the understanding of ongoing funding that is tied to proof of concept/outcomes, leveraging the multi-sector approach. Good opportunity to share with others.**
 - **The three phases outlined reflect the early framing of a sustainability plan and there is some alignment with the State's recent discussions around Pay for Success models and the ACH's ability to demonstrate value to its partners over time.**
 - **Appreciate that sustainability is called out as more than financial!**
 - **Good recommendation for using this sustainability plan as a foundational element for other ACHs and TA to utilize.**

- **Opportunities:**
 - No specific opportunities identified at this time.

- **Questions:**

- **Is the entire Cambia grant going to match ACH funding or what is the purpose?**
- **What considerations have been made regarding potential real or perceived conflict of interest regarding financial investment from partner organizations, specifically MCOs, in light of potential roles of the ACH?**

Category 7 (Optional): The emerging ACH has likely completed other activities that the above outline does not reflect (i.e. public commentary provided to HCA, participation in regional and national health improvement initiatives, investment in regional health improvement projects, regionally developed measurement systems, etc.). It is appropriate, although not required, for this portfolio to reflect the various activities and investments by the emerging ACH.

Category 7: Additional Activities

Based on the materials supplied for Optional Activities, the emerging ACH should be designated and continue to build on this foundation.

Please take the time to provide critical feedback on particular strengths and opportunities for growth in this area.

Review Team's Determination:

This category includes supporting documentation and evidence of additional regional activity and progress, specifically regarding the Pilot Project, development of CPAA's future work plan and CPAA's role in providing feedback to the State on key policy issues. This category does not represent a designation requirement but allows the region to highlight recent efforts that go beyond the minimum requirements for designation. Additional comments from the review team are included below:

- **Strengths:**
 - **The CPAA work plan reflects the intention of Phase I scope of work appropriately and allows for flexibility and remained focus on the RHIP and other identified priorities.**

D. Overall Designation Status:

- Designated (although more information may be required)
- More information required prior to designating

Please use any extra paper to describe the decision and provide any additional critical feedback on particular strengths and areas of growth for this emerging ACH.

The review team is pleased to recommend the designation of the Cascade Pacific Action Alliance as an official designated ACH with clearly demonstrated ACH readiness based on the designation requirements. As a follow up to this designation, the review team will request an opportunity for written responses and/or discussion regarding the opportunities and questions outlined in this document.

The review team is really impressed with the clarity, context, and formatting of the application. It not only demonstrates the attention to detail with which CPAA operates, but exemplifies the commitment and vision we share in the development of successful, sustainable ACHs state-wide. Congratulations on a job extremely well done.

Many of the opportunities and questions identified may be resolved by additional discussion regarding the identified promising practices, and others may be addressed through future development. We understand this document is limited in its ability to facilitate back-and-forth dialogue and look forward to additional discussion regarding the review team's comments. This intent aligns with the ongoing partnership between the State and the ACH, including the iterative nature of this initiative.