North Central ACH ACH Participant Survey

Selected 2017 Results for Strategic Learning April 2nd, 2018



Center for Community Health and Evaluation www.cche.org

Survey purpose is to support learning

As part of the ACH evaluation, CCHE conducts an annual survey of regional stakeholders engaged in each of the ACHs.

CCHE worked with your ACH's staff to send the survey to ACH participants that are engaged in activities

The survey is intended to support ACH strategic learning and to spark conversations about continuous improvement.

- Snapshot of ACH participants' opinions and perspectives highlights areas of strength and growth
- One data source to inform your conversations

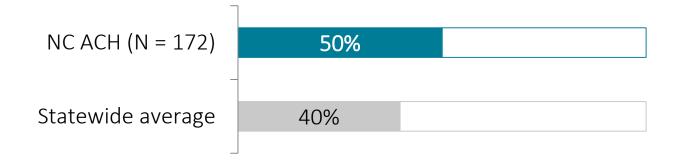
Understanding who responded to North Central ACH's participant survey





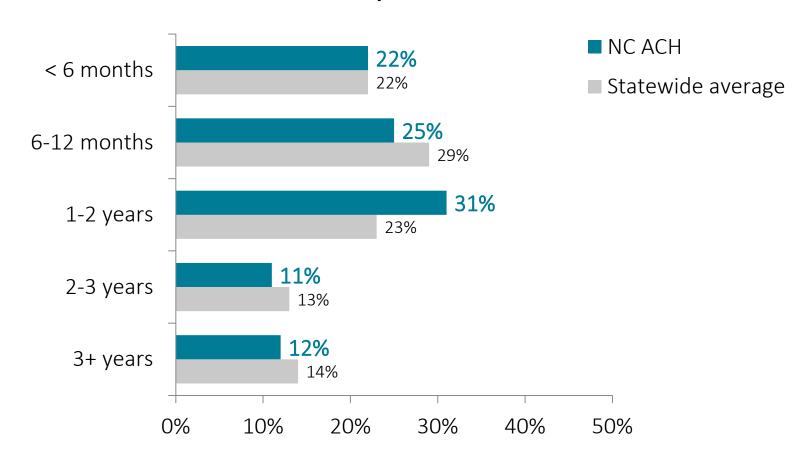
NC ACH survey respondents

- NC ACH participant list: Governing Board, Whole Person Care
 Collaborative, CHIs, FIMC workgroup, Opioid workgroup, & Transitional
 Care and Diversion Intervention workgroup
- Response rate: 86 people from your ACH responded to the survey, for an overall response rate that was higher than the state average.





Compared to the statewide average, NC ACH had a larger proportion of ACH participants who have been involved for between 1 and 2 years.





Most respondents identified their sector as hospital/ health system or behavioral health provider/organization.

The top 5 most common sectors in order of frequency were:

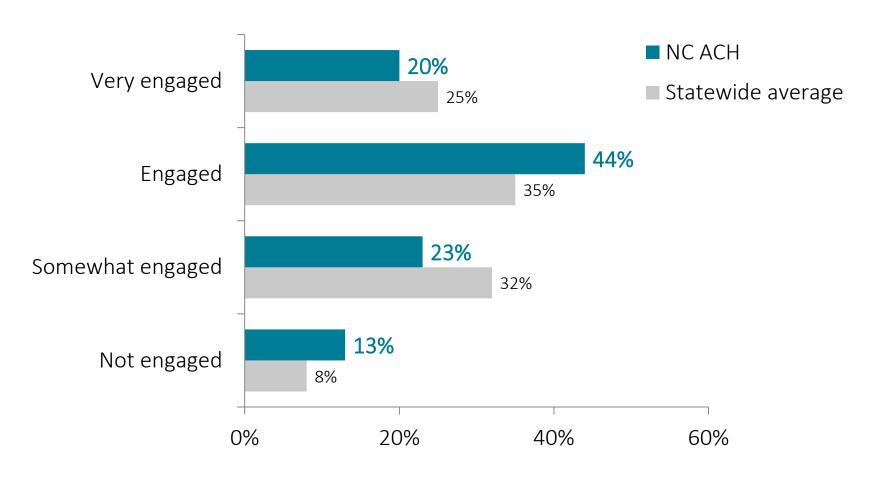
- 1. Primary care (including community health centers)
- Tied 2. Hospital/health system
 2. Behavioral health provider or organization
- -3. Community-based organizations (i.e. transportation, housing, employment services, financial assistance, childcare, veteran services, community supports, legal assistance, etc.)

 3. Medicaid Managed Care Organizations

Respondents self-selected which sector(s) they represent. 77% of respondents chose only one sector.



64% of survey respondents reported they were very engaged or engaged in the ACH's work.

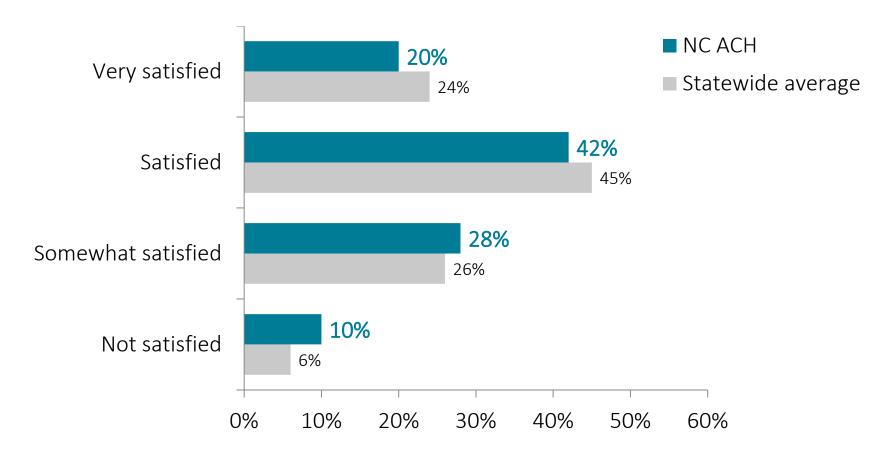


ACH Functioning & Impact:

How can North Central ACH build on strengths and understand opportunities for improvement?



More than 60% of survey respondents reported being satisfied or very satisfied with ACH progress this year, which was similar to the state average.





Respondents rated 23 components in 6 domains of ACH coalition functioning

Rating scale: Outstanding=4 Good=3 Adequate=2 Needs improvement=1

Don't know = missing value

Member participation

- Active engagement from key stakeholders from multiple sectors
- Clearly defined roles and responsibilities for ACH members
- Trust among members
- Members operating in the shared interest of the ACH versus their own personal/organization interest

ACH governance

- Involves all members in the decision-making process
- Has an effective governance structure to make decisions and plan activities
- Communicates information clearly among members to help achieve ACH goals (via meetings, emails, calls, etc.)
- Has a board that effectively governs the ACH

Community engagement

- Has support from key community leaders for the ACH's mission and activities.
- Communicates effectively with the broader community about the ACH mission and activities.
- Engages the broader community with opportunities for public comment or participation.
- Engages ethnically and racially diverse communities in ACH activities.

Mission & goals

- A shared vision and mission
- Agreed on health priorities based on identified regional health needs
- Agreement on how to continue regional collaboration beyond the period of the Medicaid Transformation.

ACH organizational functioning

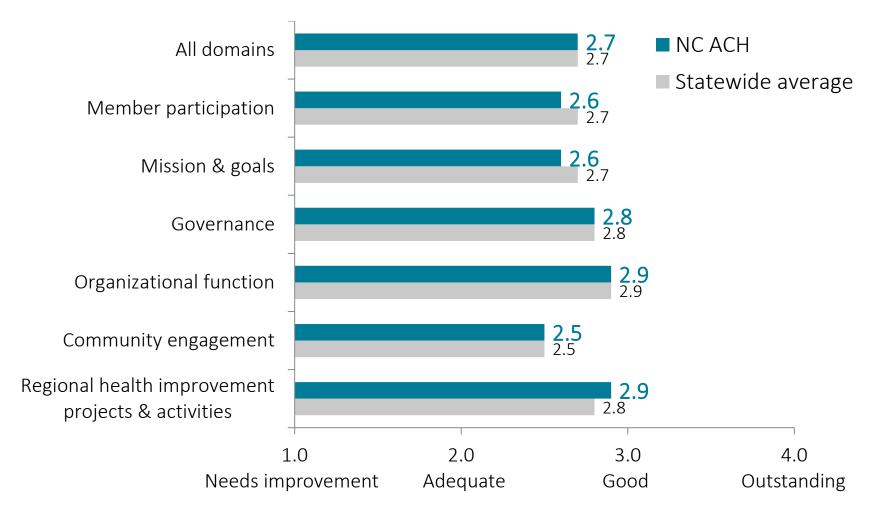
- Effectively provides support for collaboration among ACH member organizations.
- Provides the organization and administrative support needed to maintain ACH operations and activities.
- Has leaders who bring the skills and resources that the ACH most needs.
- Has leadership and staff that work to further the agenda of the collective ACH.

Regional health improvement projects & activities

- Uses a transparent and collaborative process to design regional projects, including the Medicaid Transformation projects.
- Selected the Medicaid Transformation projects that will address your region's health needs.
- Focuses on regional projects or activities that will achieve the vision and goals of the ΔCH
- Provides adequate support to coordinate the implementation of projects, including the Medicaid Transformation projects.



Looking across domains: strengths and opportunities



NC ACH 2017 domain scores were similar to statewide average scores.



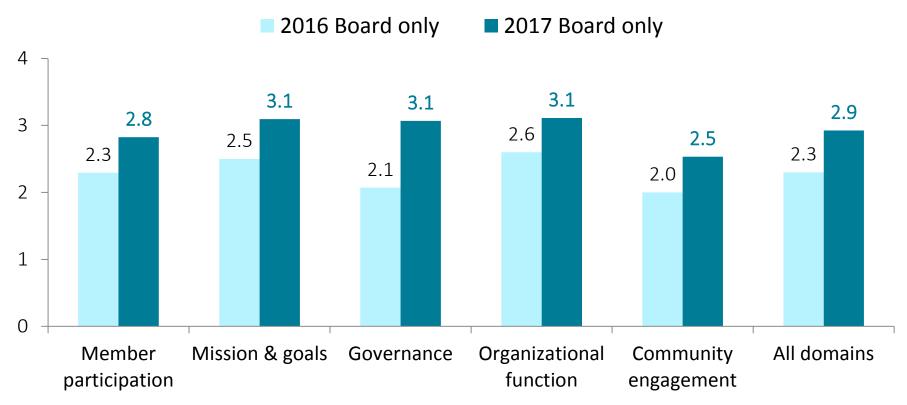
ACHs across the state have similar trends across functional domains, though there is some variation.





When only looking at indicators that were in both years' surveys -

Board members responding in 2017 rated each domain higher than Board members in 2016.



Note: Responses of Board members were compared 2016 to 2017, by domain, but only included survey questions that remained the same year-to-year. The regional health improvement project domain is not included - it was new in 2017.

Rating scale: 1 = Needs improvement; 2 = Adequate; 3 = Good; 4 = Outstanding



Survey respondents thought highly of the ACH's regional impact and perceived that there's work to be done in reducing duplication.



My ACH is supporting health system transformation in our region.

My ACH is making a positive contribution to health improvement in our region.

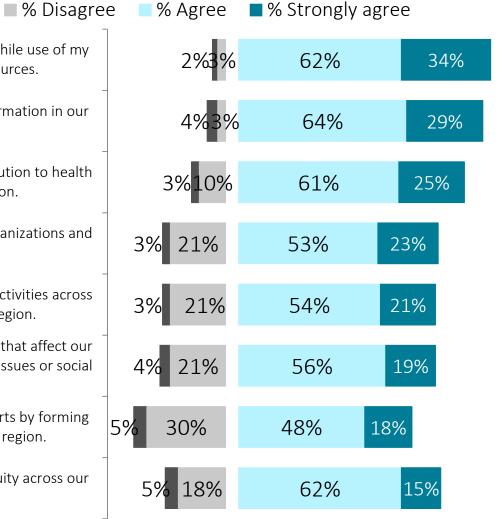
My ACH has increased collaboration across organizations and sectors in our region.

My ACH is helping to align resources and activities across organizations and sectors in our region.

My ACH is addressing the broader issues that affect our region's health needs, such as upstream issues or social determinants of health.

My ACH is helping reduce duplication of efforts by forming linkages between organizations in our region.

My ACH is effectively promoting health equity across our region.



Feedback on successes

ACH participants were asked to write about this year's successes and highlighted a range of positive developments. Examples of key themes and quotes include:

Successfully meeting the Transformation requirements

"Complying with the HCA's requirements, changing timelines, changing guidance and submitting the demonstration project plans."

"Identifying key projects and beginning the progress towards achieving those goals."

Organizational development that supports ACH functioning (staffing/leadership & governance/decision making), including the WPCC

"Developing the structure to move forward the process."

"Developed the WPCC as a mechanism to pull stakeholders together."

"Hiring highly competent support staff."

Engaging stakeholders from a range sectors to work collaboratively together

"Coordinating diverse players in healthcare in our region and developing constructive goals for the region to reach."

"Convening major health care stakeholders in the regions, developing a plan for transformation in a participatory way."



Suggestions for improvement

ACH participants were asked to write about their suggestions for improvement. Examples of key themes and quotes include:

Continue to develop communication and transparency

"Get more information out to practices about your role. So many do not understand what the ACH is supposed to do. Be more transparent. For example, most ACHs posted their project plans on their web site the day they submitted."

"There needs to be consistent, transparent information being set out to the ENTIRE ACH community, not just selective organizations."

"Clarity [of process and changes] needs to be emerging swiftly among key participants and condensed into concrete action steps and statements that can be easily communicated to agency boards, community stakeholders, and, perhaps in some cases, those we serve."

Continue to reach out and engage key sectors and use their input

"Include other sectors besides health care. 99% of the CHI meetings are health care employees and the meetings are not set up to allow folks from other sectors to actively participate."

"Repetitive, coordinated outreach to community and organizations to promotes innovative relationships and projects that could not be achieved alone."



Hopes for next year's accomplishments

ACH participants were asked to write about what they hoped their ACH would accomplish in their region in the next year. Examples of key themes and quotes include:

Implementing the Medicaid Transformation projects – moving to action

"Continued work to support and track execution on plan collectively and with individual providers to help them succeed through accountability."

"Have a clearer sense of the what the sequential steps are going forward. There is a good sense of the broader vision but the nuts and bolts are still really being figured out."

"Implementation of the Pathways Hub."

Continuing to develop collaboration, community engagement and transparency

"More community level conversation about the work. Empowerment of organizations/staff that are doing great work, and find ways to bring them too the planning table."

"Enhanced collaboration and discussions between health care, behavioral health providers and community-based organizations on regional best practices and how to actually work together toward improved health."

"Better trust and being on the same page."

Highlighting challenges in the upcoming year

ACH participants were asked to write about the challenges they thought the ACH may address in the upcoming year. Examples of key themes and quotes include:

 Implementation challenges, including the amount/distribution of funding, project complexity, and compressed timelines

"Too many things to accomplish, not enough time to get people engaged and onboard."

"Finances are always a challenge. The competition and fight for patients in the region may lead to difficulties in getting organizations to work together."

"Inadequate support both for small organizations who need help planning, and large organizations who need encouragement to bend the curve and share innovations."

"The vast geography of this region will continue to be a challenge."

Challenges related to maintaining and strengthening collaboration and partner participation

"Focusing too much on the medical healthcare and not the collaboration with the community based social services"

"Drop in interest and meaningful participation because of lack of confidence in the integrity of the governance."

"Communication becoming insular and not transparent."

Clarifying questions?



Pair discussion questions

- 1. What rises to top for you with this data?
- 2. What surprises you?
- 3. Given the work we have ahead in 2018 how can we build on our strengths and address opportunities for improvement?



Full Board Discussion

Given the work we have ahead in 2018 - how can we build on our strengths and address opportunities for improvement?





ACH Evaluation Team

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