

# Framework for the Accountable Community of Health Readiness Proposal (6.15.2015)

# A. Purpose

The intent of the ACH Readiness Proposal is to assess (through minimum requirements and outputs) whether the emerging structure is developing into a functional ACH with a strong foundation for collaboration on regional health improvement efforts in partnership with the State. This portfolio should reflect ACH readiness for the next phase of development and activity within the region.

### **B.** Submission

Demonstration of readiness should take the form of a portfolio, containing documentation and supporting narrative. The categories for designation align with the ACH Pilot/Design contract and are as follows:

- 1. Demonstration of operational governance structure, interim or otherwise, includes a plan for testing/adjustment.
- 2. Governing body membership reflects balanced, multi-sector engagement. At a minimum, balanced engagement refers to the participation of key community partners that represent systems that influence health; public health, the health care system, and systems that influence the Social Determinants of Health (SDOH), with the recognition that this includes different spheres of influence. The governance model should also include a process for adjusting as the environment changes.
- 3. Community engagement activities are underway and additional community engagement activities are planned in addition to engagement that occurs through the governance structure (e.g., ACH governing body and committee meetings).
- 4. Established backbone functions to perform financial and administrative functions. These functions can be performed by one or more organizations, interim or otherwise, and must demonstrate accountability to the ACH. There must be a process for ongoing evaluation and confirmation of the backbone organization(s).
- 5. Initial priority areas (service gaps and/or health priorities) and strengths identified as part of ongoing regional needs inventory and assessment development. Initial regional health improvement project(s) or plan identified with a plan in place to continue this development in alignment with forthcoming ACH technical assistance opportunities (i.e., framework for regional initiatives inventory and priority identification).
- 6. Initial operating budget established. Initial sustainability planning strategy documented and includes, but is not limited to, initial considerations for enhancing revenue base. This strategy could include a summary that outlines early efforts to consider Federal, State, local and private philanthropic resources to sustain the ACH.

### C. Instructions

Between August 1 and November 30, 2015, please send the required documentation as outlined below to the HCA Community Transformation email:

communitytransformation@hca.wa.gov. Applications will be accepted on a rolling basis between August 1 and November 30, 2015 in recognition of the Design contract reporting date and statewide ACH designation goal. If a region anticipated a challenge with readiness by November 30, the ACH lead should contact the State and appropriate partners. Phase One funding will follow a successful application for designation pending CMMI approval timing.

In the email, please attach <u>one</u> PDF document that contains the following:

- An introductory cover letter that explicates the intent of the proposal and appropriate contact information should follow-up questions or discussions be necessary;
- Table of contents for all required documents that are to be included, broken down by Categories 1-6;
- Narrative for each Category (1-6) that introduces the required document. Each introductory narrative must clearly convey how the included document supports the corresponding category requirements;
- For the inclusion of documents that show additional ACH activities (see "Additional Activities" on next page), please include a cover letter that explains key context and values (to both the HCA and ACH), followed by the applicable documents.

Overall, this portfolio should demonstrate development and progress in alignment with ACH activities and deliverables. The cover letters and documents should clearly justify the application for designation in a format that is concise yet reflective of the applicable ACH activities to date.

### D. Evaluation

The submitted designation portfolio will be reviewed and evaluated by a multi-agency state team based on:

- o Comprehensive cover letter that outlines the region's intent to pursue ACH designation
- Table of contents with each document listed by Category
- Narrative to introduce each category (1-6) and the required supporting documentation to reflect the criteria and outputs

- If applicable, narrative to introduce additional activities with supporting documentation
- Summative narrative with reflection of process, with specific mention to Section 4b of ACH Design Contract objectives.

### E. Feedback & Approval

Contingent upon the timeline of CMMI approval, Design regions will know designation status up to 30 days post Readiness Proposal submission. Design regions should anticipate funding approval and processing on a similar timeframe and should be prepared to coordinate with HCA regarding the submission of a budget for the next phase of work.

# F. Category Outputs

Outputs for each category should include, but are not limited to the following:

## Categories 1 through 3

- Bylaws, charter(s) or other documentation that addresses:
  - Governance (i.e. chosen organizational structure, composition of boards and advisors, policies and procedures for distributing resources);
  - Engagement strategies (i.e. cascading engagement, how traditional and nontraditional partners have had an opportunity to learn about the ACH initiative and provide input and how unengaged partners and populations might be included in the future);
  - Membership/participation (i.e. who is currently involved and who is not and at what levels), roles and responsibilities (i.e. a description of each member's tasks and who those tasks relate to)
- A decision making process developed, documented and approved by the governing board, including:
  - Description of how disagreements will be handled; and
  - Conflict of interest (COI) process or decision documented addressing the ACH's policy on COI
- Process established and documented to allow for adjustments to the ACH structure as issues/gaps emerge over time (i.e. the iterative nature and process is acknowledged and reflected in the governance and engagement strategies)

## 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 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 RHIP (including potential support from ACH TA team) with goals, deliverables, a timeline, and roles and responsibilities

## 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.)

# **Additional Activities**

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.

# **G. Summative Narrative**

Each ACH will turn in two items as part of Design contract: 1) an objective portfolio documenting the work to date, and 2) more subjective reflection paper on the process to date. It is the intent of this descriptive piece to include reflection and more subjective expansion on the context described in the ACH Readiness Proposal cover letters that introduce each deliverable category.

In formatting this summative narrative, a helpful way to think about each category of work is in the "What? So What? Now What?" structure. This follows three questions: What happened?

Why do we care? And what did we learn from what happened that will inform what we do now? This is an opportunity to highlight successes and lessons learned as the specific ACH has developed a strong foundation for regional health improvement efforts in partnership with the State. Additional instructions provided below.

# **Required Content:**

The summative narrative should leverage the cover letter narrative provided within the Readiness portfolio. It should be considered an opportunity, to take time to perform an honest reflection on how the initiative is going to date. As such ACHs may choose to submit a separate document as there could be more sensitive information contained within this summative piece than within the ACH Readiness Proposal. If that is the case, the ACH will need to notify the State that this will be a separate document, but must be turned in on the same date as the rest of the Readiness Proposal.

Additional objectives not identified as independent categories within the Readiness Proposal, although potentially included and highlighted there in, should be included within this narrative.