

GOING FAR TOGETHER: LEVERAGING COMMUNITY COLLECTIVE IMPACT INITIATIVES IN THE DEVELOPMENT OF CIE

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Humboldt Community Health Trust



TODAY

- Background
- Collective Impact Efforts as a Driver for QIE
- Community Discovery and Co-Design
- Shared Governance Practice
- Lessons Learned
- Q&A

*“If you want to go fast, go alone,
if you want to go far, go
together...”*



TEMPERATURE CHECK

How motivated are you to embark on complex system change work in a large group setting?



1: Yes! Let's
Do This!



2: Cautiously
Optimistic



3: Unsure,
but
listening.



4: Other
priorities..

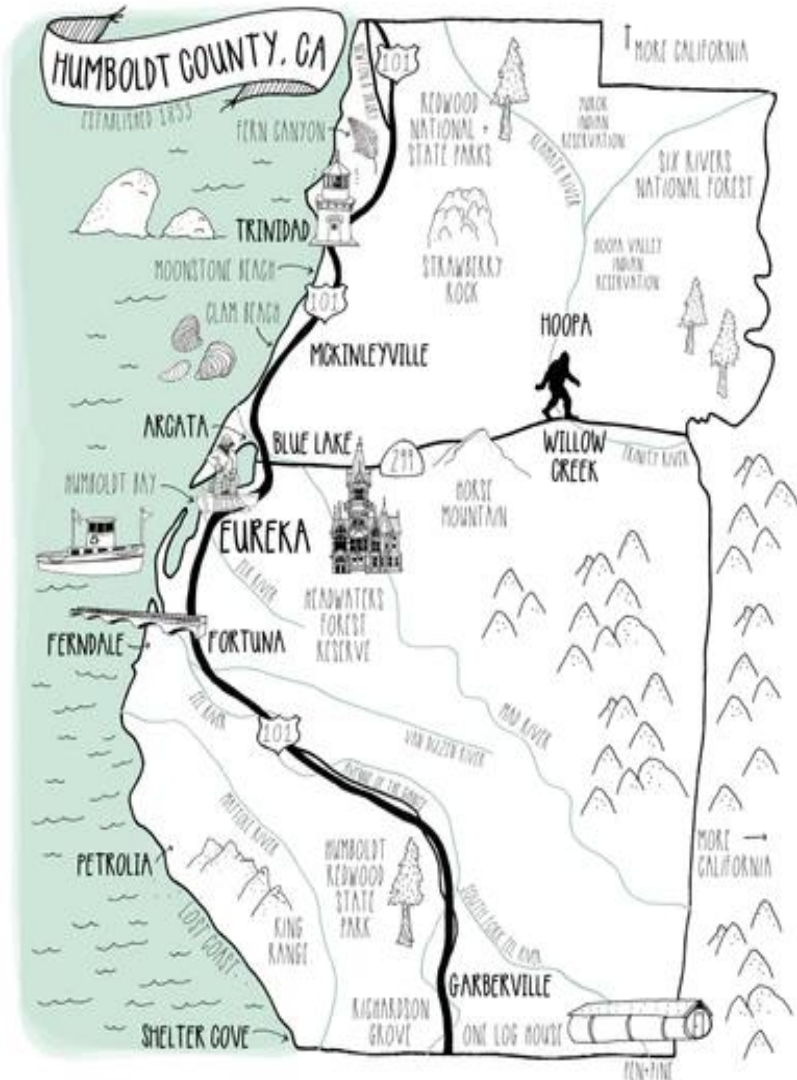


5: Nope!



HUMBOLDT COUNTY, CA

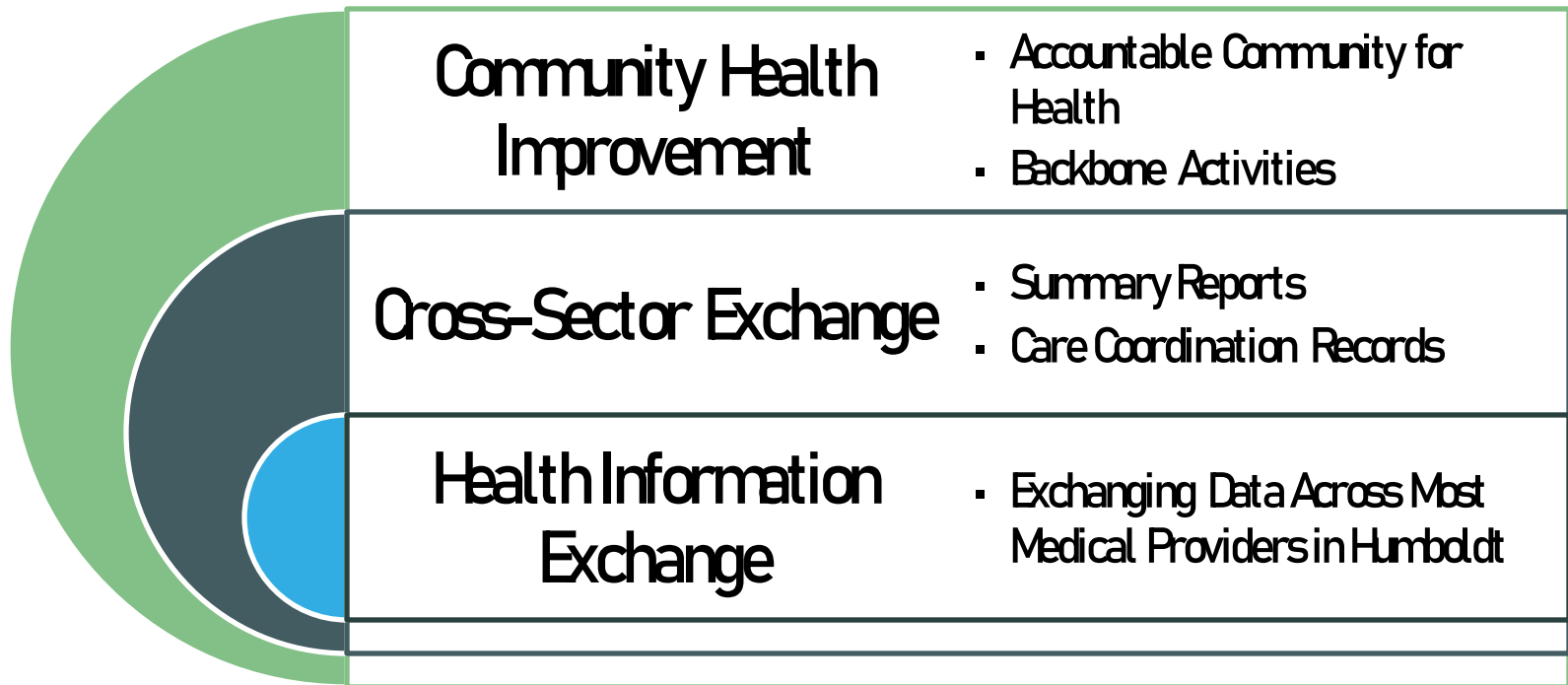
- On the unceded territory and ancestral homeland of indigenous nations which include:
 - Tolowa
 - Hupa
 - Karuk
 - Mattole
 - Wailaki
 - Wyot
 - Yurok
- Small Population, Large Geographic Foot Print
- Health and Social Care System Landscape
- Health and Health Equity Issues
- “Coopertition”



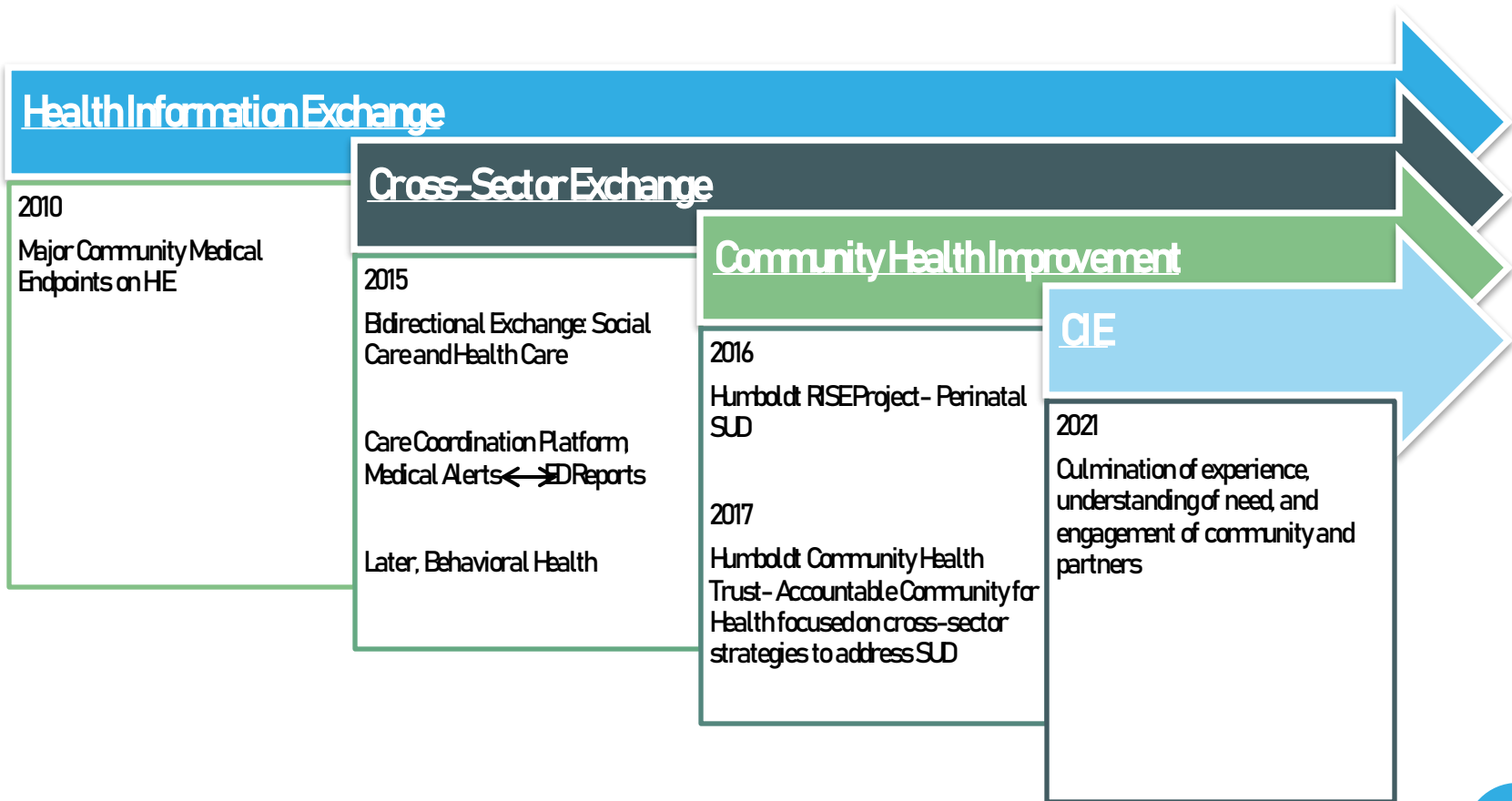
Humboldt County Map by Jenna Castos of Pen and Pine

BACKGROUND AND EVOLUTION: NCHIN

- North Coast Health Improvement and Information Network

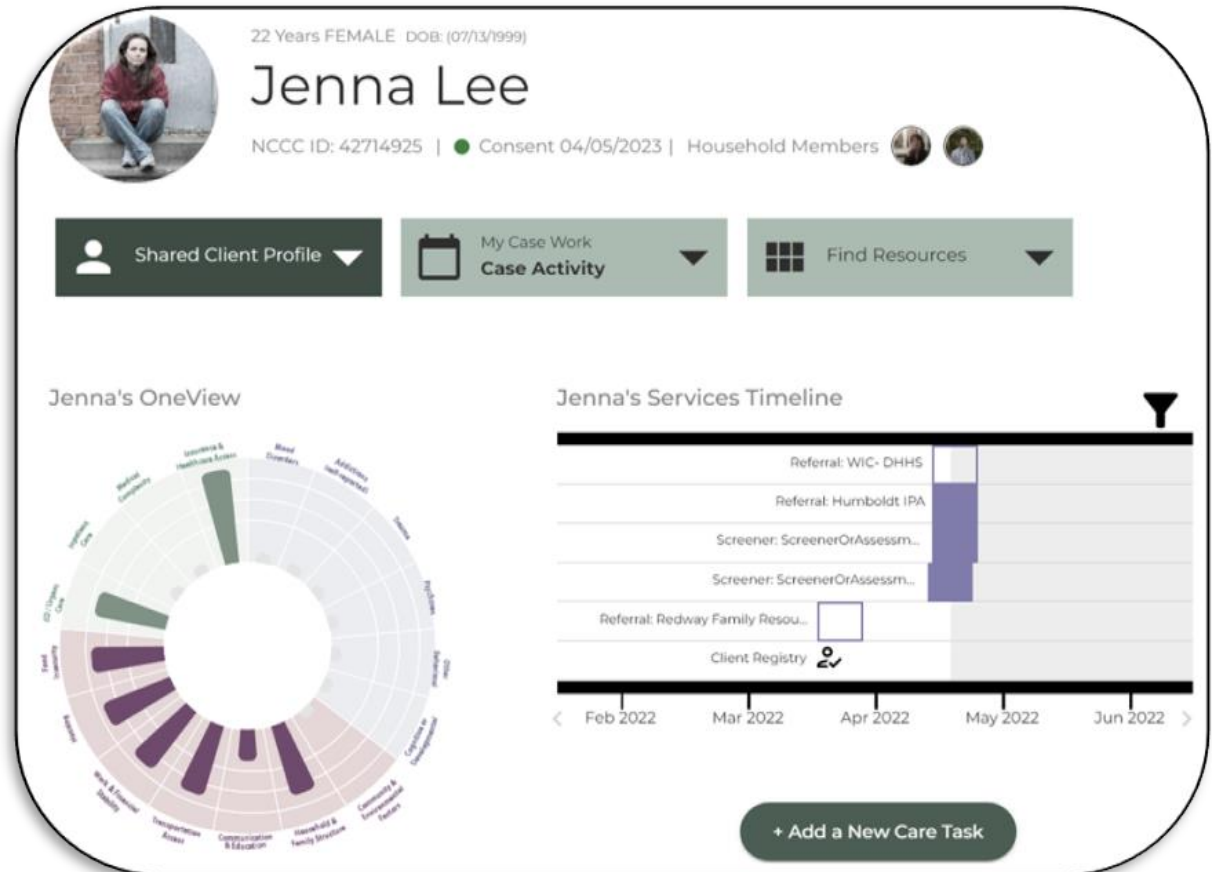


EVOLUTION TOWARDS CIE SERVICES



BACKGROUND ON NCHIN's CIE

- “North Coast Care Connect”
- Tool: “9Patch” by QSSolutions
- Live: Spring 2022
- Phase: Onboarding Partners



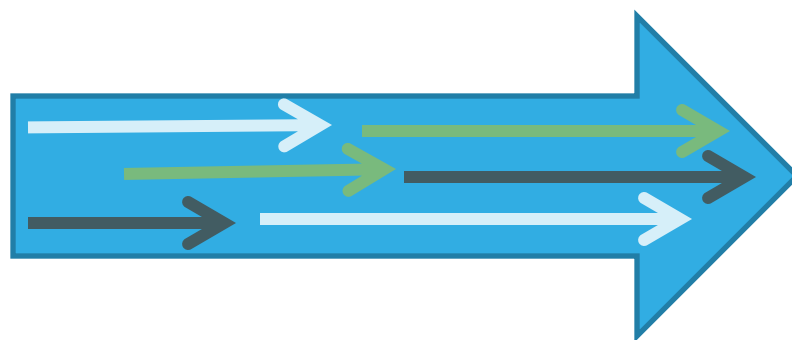
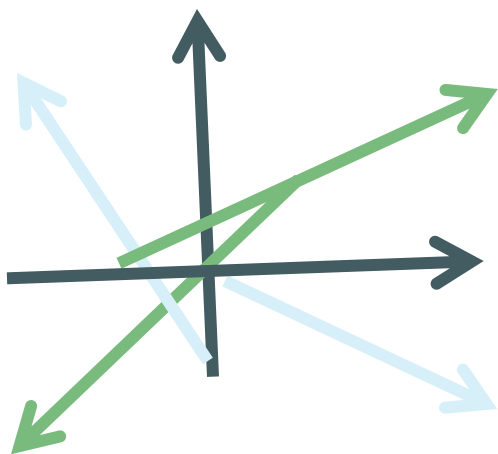
Screen Shot from NCC Training Site. Tool: “9Patch” by QSSystems

WHAT IS COLLECTIVE IMPACT?

Collective impact is..

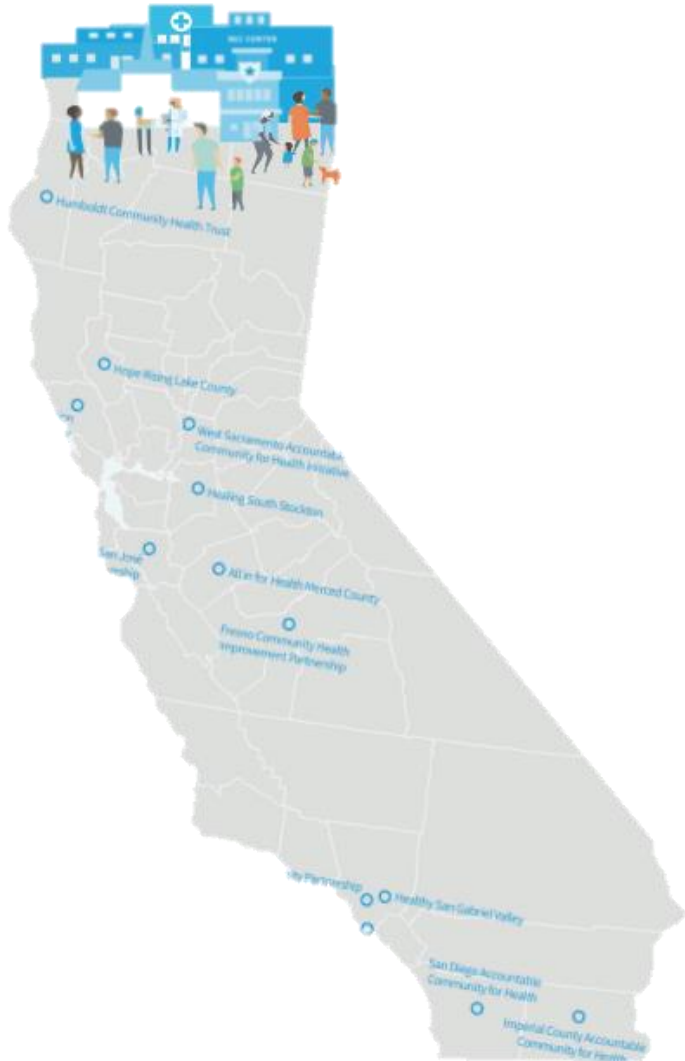
a network of **community members**, **organizations**, and **institutions** who advance equity by learning together, aligning, and integrating their actions to achieve population and systems level change.

(Collective Impact Forum 2022)



HUMBOLDT COMMUNITY HEALTH TRUST: AN ACH

- Accountable Community For Health
- Collective Impact Initiative
Supported by the California
Accountable Communities for Health
Initiative (CACHI)



ABOUT THE HUMBOLDT COMMUNITY HEALTH TRUST

Work to date:

- Focused on holistically addressing Substance Use Disorder in Humboldt County along the prevention to recovery spectrum

Goal 1:

- Reduce substance/alcohol injury and overdose

Goal 2:

- Increase access to prevention and early intervention

Goal 3:

- Improve policies to better address social determinant of health needs

Goal 4:

- Enhance system access, integration, and coordination

ABOUT THE HUMBOLDT COMMUNITY HEALTH TRUST



NCHH is the Backbone Organization to the Humboldt Community Health Trust

COLLECTIVE IMPACT AS A FACILITATOR FOR CIE DEVELOPMENT

Collective
Identification
of the Issue
(Shared
Challenges)

Network of
Partners

Participatory
Learning
Opportunities

Increased
Trust and
Shared
Understanding

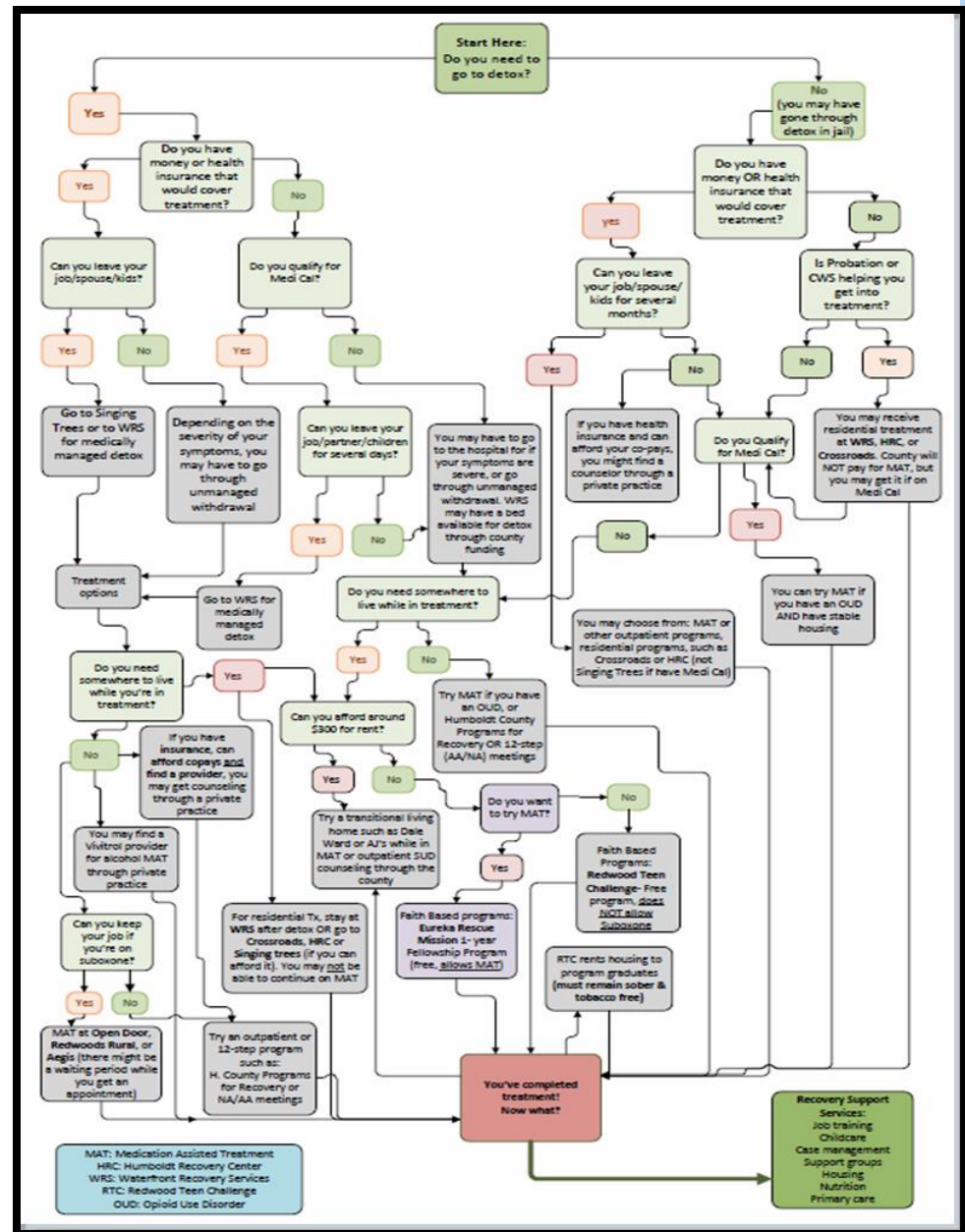
Collective
Commitment

Collective
Advocacy and
Ownership



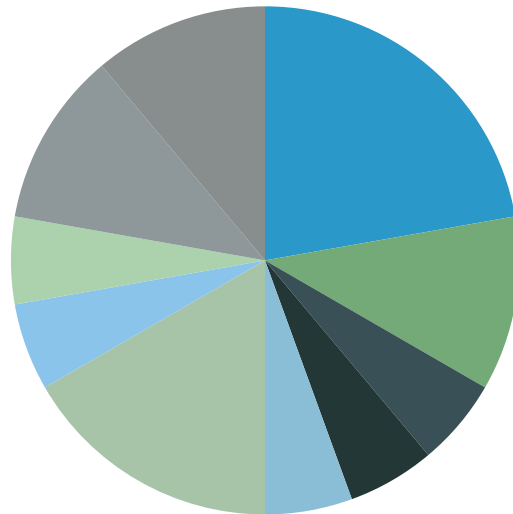
COLLECTIVE IMPACT: SHARED CHALLENGES

- This type of work may land you in different rooms, discussing new topics
- Listening opportunity for shared challenges and shared motivation



COLLECTIVE IMPACT: NETWORK OF PARTNERS

- Established network of partners provides forum for exploring innovation models with a high degree of trust



- | | |
|-----------------------|----------------------------|
| HealthCare/Healthplan | Behavioral Health |
| Childrens Services | Public Health |
| Research and Policy | Community Residents |
| Tribe | CBO |
| Government | Integrated Services Agency |



COLLECTIVE IMPACT: PARTICIPATORY LEARNING

- Take advantage of learning networks (yours and your partners)
- Engage partners and bring information back to the group



COLLECTIVE IMPACT: SHARED UNDERSTANDING

Advisory Group

Norms

Learning

Projected
Use

Current
Landscape

Populations

Concerns

Common
Language

Key
Functionality

Vendor
Review

Resources/
Education

COLLECTIVE IMPACT: SHARED COMMITMENT



First 5
HUMBOLDT



Humboldt County
Department of
Health & Human
Services



Humboldt IPA

Humboldt Independent Practice Association



Providence

Smullin

The Patricia D. & William B.
Smullin Foundation

Data Across
Sectors for Health



CALIFORNIA
ACCOUNTABLE
COMMUNITIES
FOR HEALTH
INITIATIVE



CALIFORNIA
Improvement
Network

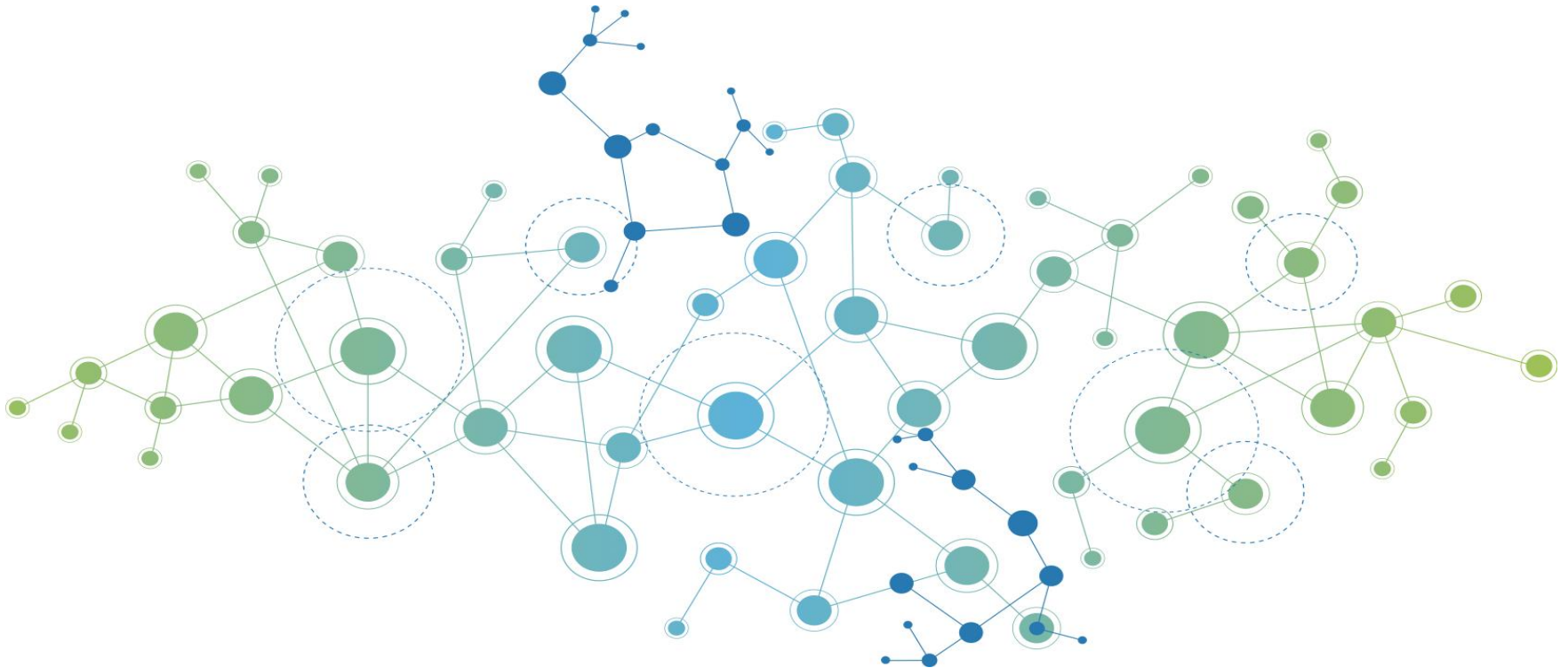


**North Coast
Care Connect**

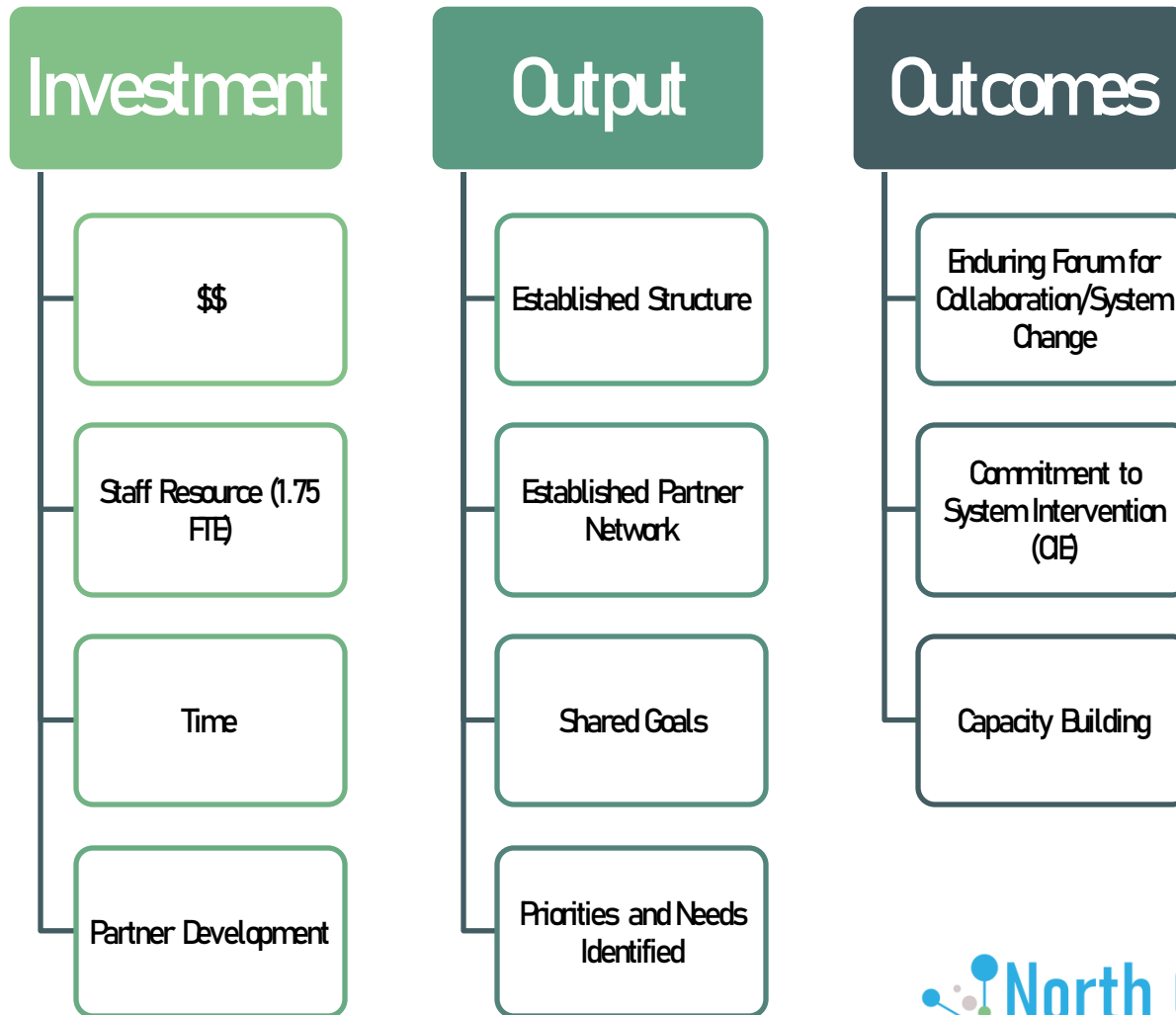


COLLECTIVE IMPACT: ADVOCACY AND OWNERSHIP

- Partners become advocates, connectors, and owners of the system



COLLECTIVE IMPACT: INVESTMENT, OUTPUTS, OUTCOMES



MOVING FROM COLLECTIVE INTEREST TO COLLECTIVE ACTION



COMMUNITY DISCOVERY INTERVIEWS- PROCESS

○ Aims:

- Early Introduction to CIE Services
- Surface Concerns and Value Equation Early

○ Participants:

- 35+ Sessions in a 3 month period
- Met with over 50 individuals and over 25 organizations/programs
- Engaged a “CBO Consultant” to take the lead

Tribes/Tribal Organization
Integrated Agencies (Govt.)
Behavioral Health
Healthcare
School/School Based Programs
Social Service Organizations
Early Childhood
Housing
Small CBOs
Healthplans

COMMUNITY DISCOVERY INTERVIEWS- TOPICS

Context Setting

Referrals

Care Coordination

Information
Sharing

Partners

Existing
Technology

Anticipated
Challenges

Priorities and
Recommendations

COMMUNITY DISCOVERY INTERVIEWS- KEY FINDINGS

Awareness of CIE

- Mixed

Barrier

- Consent

Value

- Referral
- Cross-organization care coordination
- Continuity

Recommendations

- Ease of Use
- Well Maintained Directory

Response

- Uniformly positive

FROM DISCOVERY TO CO-DESIGN

○ Intent:

- Deep commitment to community-designed and driven development
- Foster shared intent and participation
- Comprehensively understand community need

○ Balancing perceived benefits and drawbacks

- + One collective, intensive process > negotiating across multiple meetings
- + Develop norms across the group
- + Collective understanding of CIE system and proposed work
- Investment of time, slowdown of CIE launch
- Securing participation of partners
- Level and process-setting required

Co-DESIGN STRUCTURE

Collective Meetings (2)

Kick-Off

Capstone

Workgroup Meetings (18)

Data and Use
Case

Operations

Legal

1:1 Consults

Engaged Consultants

1:1 with Members as
needed

FOSTERING PARTICIPATION IN CO-DESIGN

(In the middle of a pandemic, over zoom in the dead of Summer, with multiple organizations/residents/stakeholders involved, while learning about new concepts together...)

- Executive support and participant appointees
- Transparent about ambitious timeline and objectives
- Recorded every meeting and distributed recordings
- Virtual Rounding/Check-Ins
- Offline work
- Paid residents
- Meet frequently and with regularity
- Didn't backtrack
- "Cliffhangers"

OUTCOMES OF CO-DESIGN DELIVERABLES

Operations

- Equity Statement, Shared Intent Statement, Outline of Operating Practices, Inclusion Policy

Data

- Recommended Data Sets, Shared Use Cases, Shared Assessment

Legal

- Regulatory background, Consent, NODP, Contracting Framework

OUTCOMES OF CO-DESIGN INTANGIBLES

Buy-In

- Collective Investment of Time = Collective Commitment

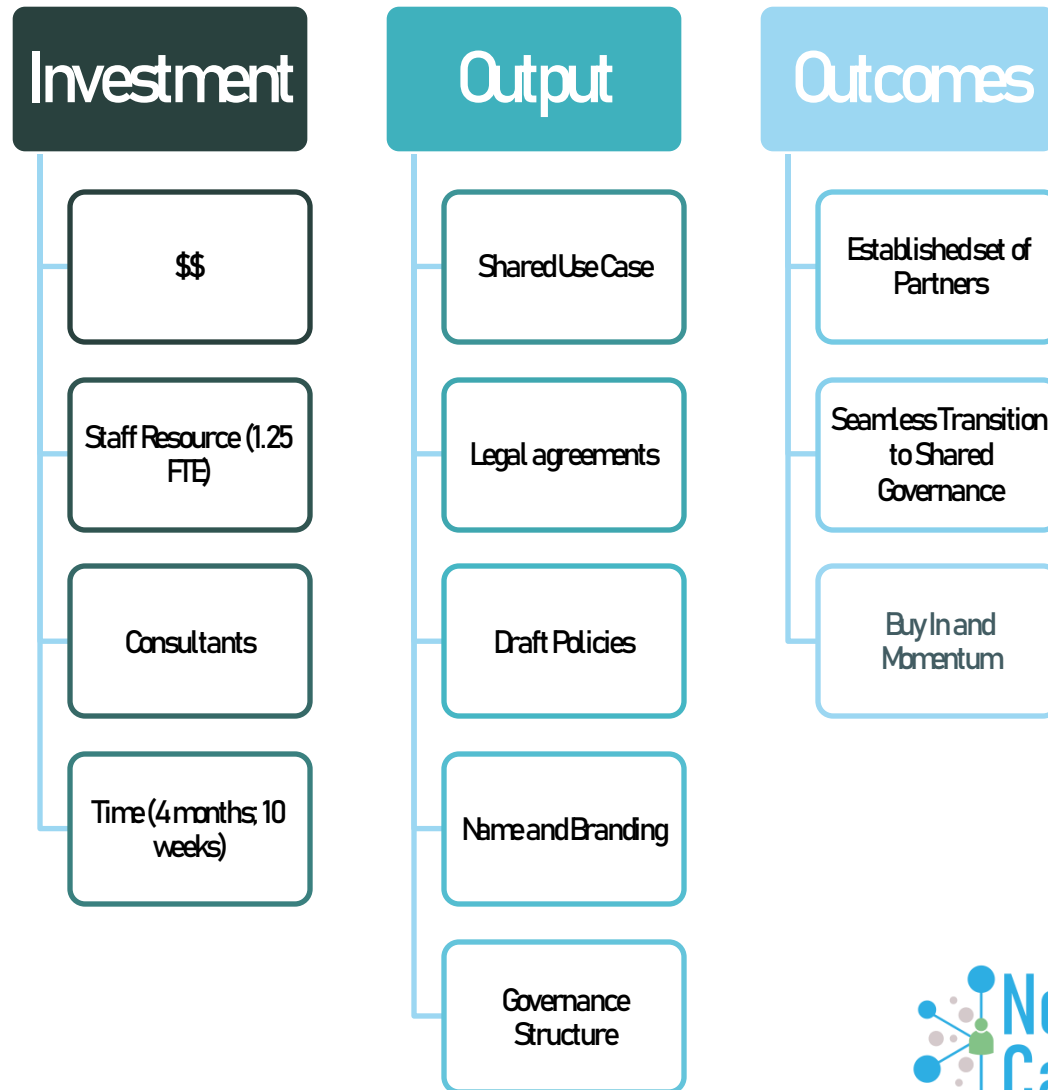
Theoretical to Actual

- Movement from the “thought lab” phase to implementation

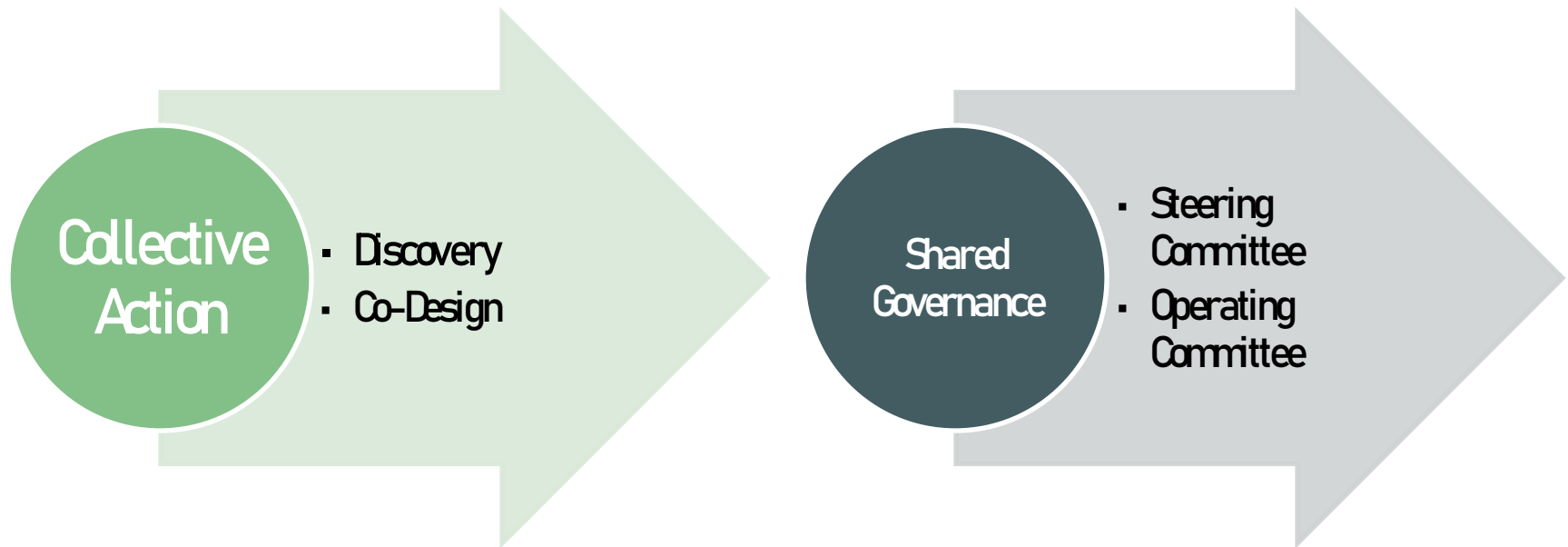
Forward Momentum

- Accelerated ability to transition from Co-Design to Ongoing Governance Structure

DISCOVERY/CO-DESIGN INVESTMENT, OUTPUTS, OUTCOMES

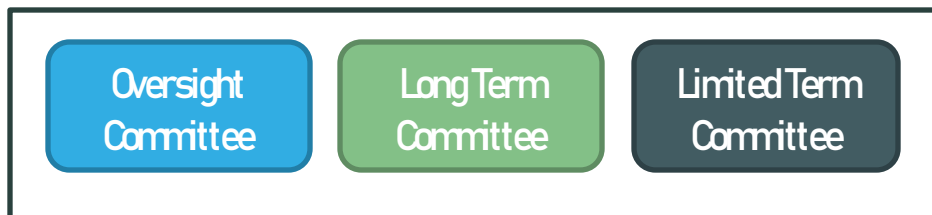
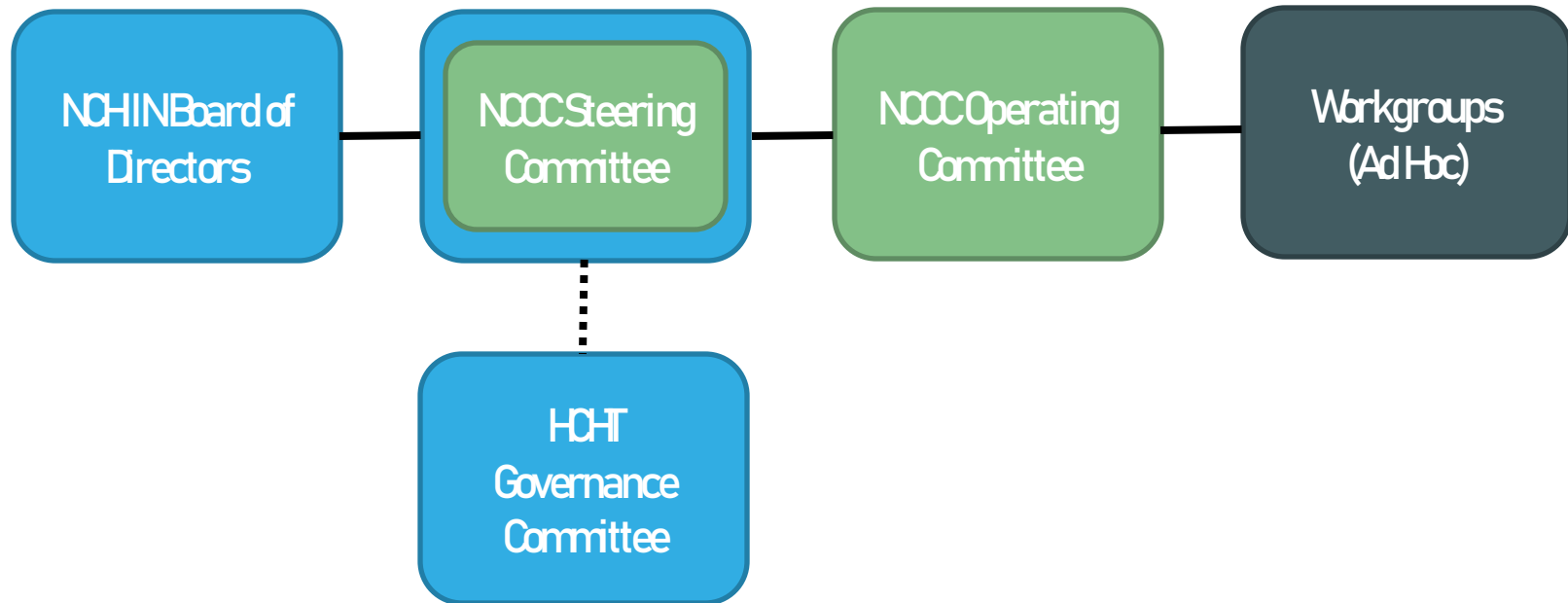


TRANSITIONING FROM CO-DESIGN TO SHARED GOVERNANCE



- Presented concept at Co-Design Capstone Meeting
- Established scopes and organizing schema
- Developed recruitment list (largely out of Co-Design Participants)
- Recruited and on boarded residents

NCOCC Governance Structure



STEERING COMMITTEE CURRENT FOCUS

Network
Inclusion

System
Implementation

Network
Performance

SystemDesign

Policiesand
Procedures

Shared Intent

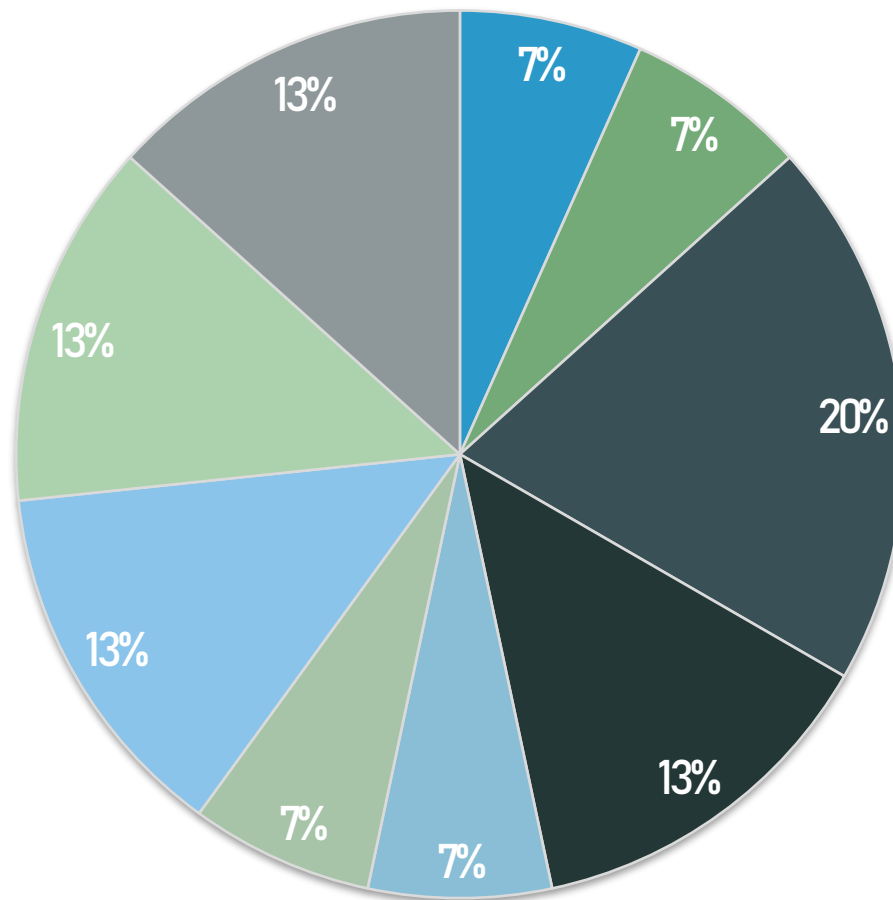
Fee Schedule

Equity



STEERING COMMITTEE STAKEHOLDER COMPOSITION

- Education
- FQHC
- Residents
- Integrated Health and Human Services
- Content Expert
- Tribal Organization
- Hospital
- Health Plan
- Children's Services



IN PRACTICE DECISION MAKING

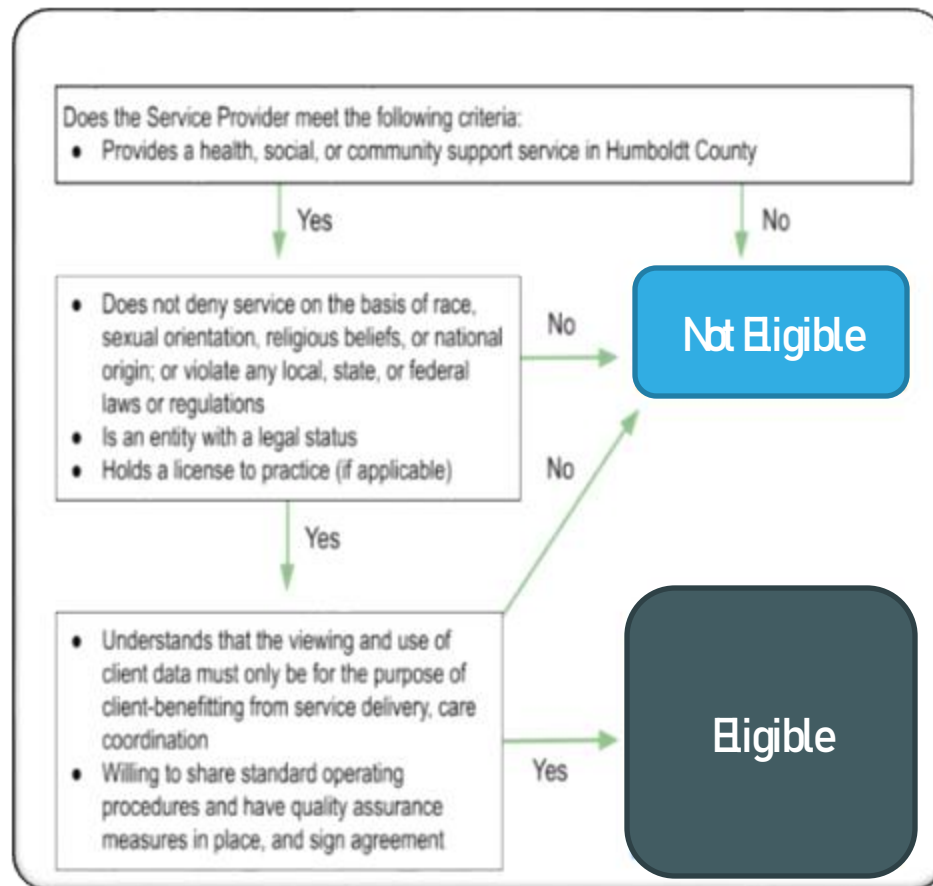
- Work towards consensus using level of agreement cards
 - Brings concerns forward
 - Slows process as needed
- Seminal Documents: Guideposts out of Co-Design
- Cultural of learning and refinement

Seminal Documents

- Participation Agreement
- Policies and Procedures
- Shared Intent Statement
- Equity Statement
- Network Inclusion Policy

IN PRACTICE NETWORK INCLUSION

- Rationale about potential participants and expected practices
- Anticipate a near-term test of the policy:
 - Justice Involved Programs
 - Child Welfare Services



IN PRACTICE FEE SCHEDULE

Intent: Creation of a fee schedule that sustainably covers cost and provides equitable access to the network for all community organizations

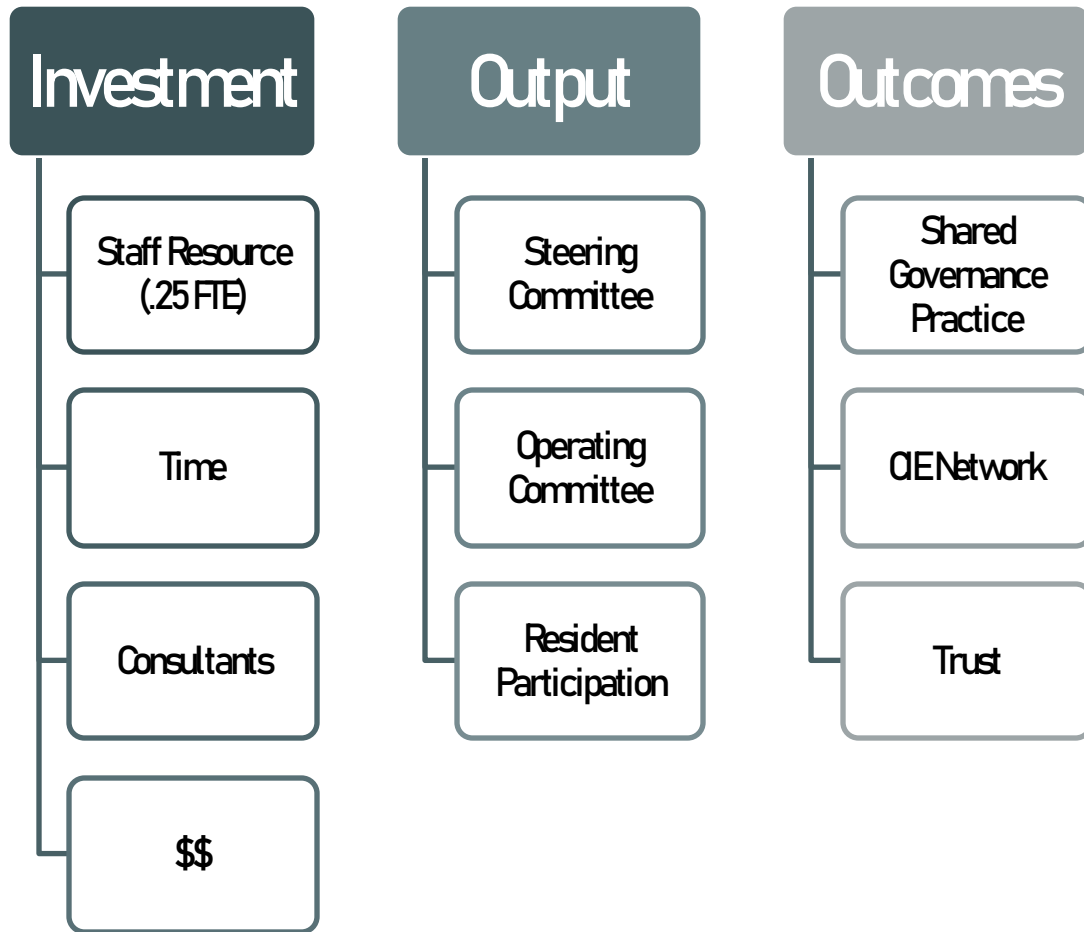
Backbone Activity:

- Development of operating budget
- Discovery- pricing models
- Speculation at early phase network engagement
- Draft pricing model

Steering Committee Activity:

- Advises on approach (licenses vs. subscription)
- Guidance on scale
- Provides community and organizational contexts
- Raises questions, concerns, considerations

SHARED GOVERNANCE INVESTMENT, OUTPUTS, OUTCOMES



CHALLENGES AND LESSONS LEARNED

Challenges

Shared Practice vs. Individual Priorities

Developing Norms/Process

Perfect is the Enemy of Good

7 Circles of Communication

Investment of Time and Pace

Lessons Learned

Relationships and Trust are Foundational to the Work

Community Process is an Investment but Yields Positive Returns

Resident Voice is Instrumental

THANK YOU



Humboldt County Painting: Leo Stafnes, 2014

"IT IS NOT THE STRONGEST SPECIES THAT SURVIVES, NOT THE MOST INTELLIGENT. IT IS ONE THAT IS THE MOST ADAPTABLE TO CHANGE.. IN THE LONG HISTORY OF HUMAN KIND (AND ANIMAL KIND, TOO) THOSE WHO LEARNED TO COLLABORATE AND IMPROVE MOST EFFECTIVELY HAVE PREVAILED." – CHARLES DARWIN

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