King County
Regional Health Improvement Plan

…to serve as a common agenda for our county to align actions across multiple sectors and systems to:

1. Achieve healthy communities and populations,
2. Reduce inequities,
3. Improve quality and
4. Lower costs.

Public Health
Seattle & King County

Proposed Regional Health Improvement Plan framework

The RHIP workgroup incorporated feedback from the ACH ILC small group exercise on Nov 4

1. Made edits to five priority areas and principles including:
    - Social determinants, added reference to race and social justice
    - Cultural competence, changed to culturally and linguistically responsive
    - Included “peer support specialists” in list of team members
    - Wrote up feedback to use for future work related to the RHIP
2. Recommends resources when using the RHIP framework:
    - Culture of Health action tools
    - ACH toolkit community engagement tools
    - Sources of definitions

The RHIP framework will partially fulfill a Regional Health Needs Inventory (RHNI) and will guide waiver projects

Recommended King County Health Improvement Plan framework

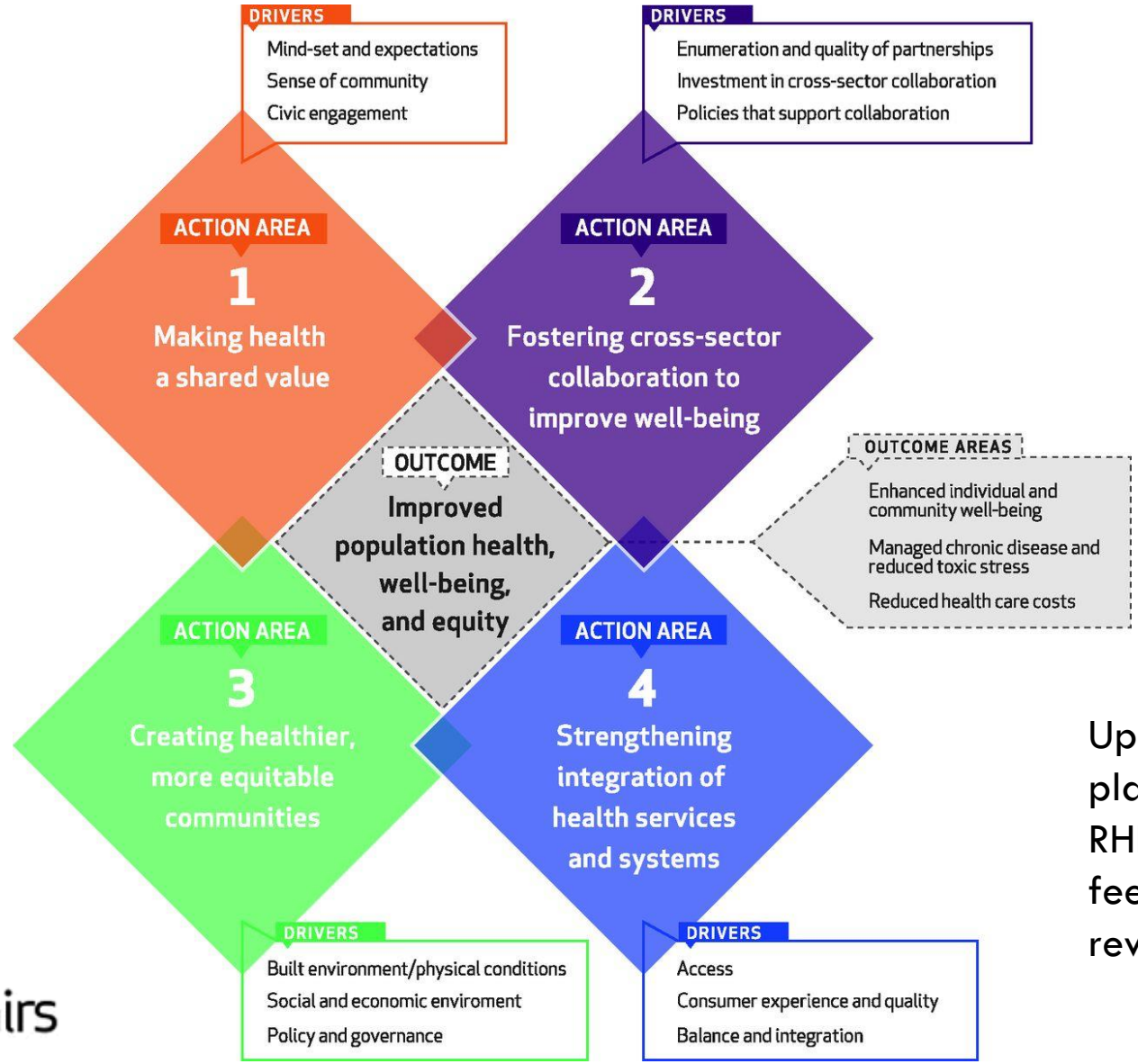
Priority Focus Areas:

- Care coordination
- Physical and behavioral health integration
- Maternal and child health
- Chronic disease prevention
- Social determinants of health, addressing race and social justice

Principles:

a. Use culturally and linguistically relevant and responsive services
b. Focus on assets more than deficits
c. Have on-going partnerships with community, not one-time interactions
d. Embrace community-driven solutions
e. Use team-based approaches that include community health workers, peer support specialists, navigators, and others

Culture of Health action tools at www.cultureofhealth.org



Updated action plan aligns with RHIP workgroup feedback when reviewed in 2015

HealthAffairs

Alan R. Weil Health Aff 2016;35:1953-1958

100 Million Healthier Lives, Institute for Healthcare Improvement

Benefits of Engagement

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- Provides strong links to community health workers
- Helps reach high-risk / yet to be reached populations
- Knows what works and doesn't in the community
- Knows the community's history, strengths, needs
- Increases the likelihood that the community will own the issues and participate
- Creates positive norms in the community
- Helps inform and shape priorities
- Brings the voice of the community into the room
- Cultural/experiential translator
- Assists with sustainability

Failure to Engage

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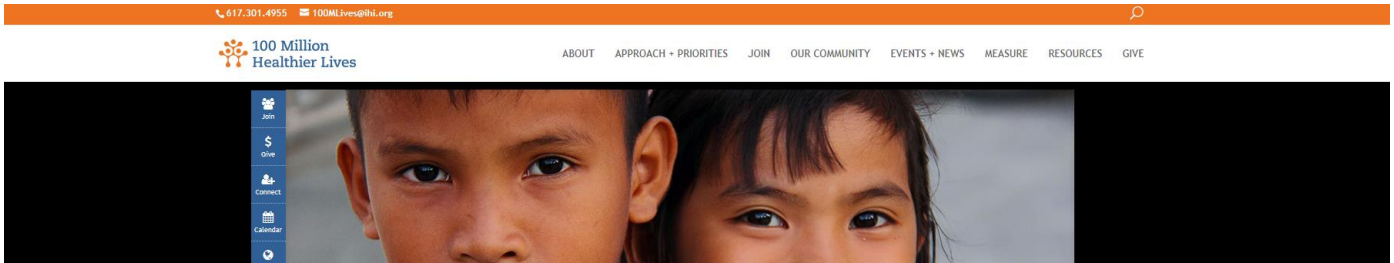
- Interventions created without meaningfully engaging key stakeholders and the "end-users" in the design process are more likely to fail.
  - Define the responses we want vs. getting real feedback
  - Miss core insights about how to solve the problems
  - Create an initiative or system that no one needs, wants, likes, or uses
  - Pay for services that do **not** promote health, well-being and equity
  - Create an initiative or system that is unnecessarily costly
  - Create something that is not sustainable

More in the ACH Toolkits and at: www.100mlives.org



IAP2 Spectrum of Public Participation

Inform	Consult	Involve	Collaborate	Empower
We promise to keep you informed.	We will keep you informed, listen and acknowledge concerns and provide feedback on how public input influenced the decision.	We will work with you to ensure your concerns are directly reflected in the alternatives developed and let the public know how they influenced the decision.	We will look to you for direct advice for formulating solutions and incorporate the recommendations into the decisions.	We will implement what you decide.

Source: International Association for Public Participation, www.iap2.org. Similar approach used in the King County Community Engagement Guide, under Tools and Resources at www.kingcounty.gov/equity.

Good Sources of Definitions Include:

- **Care coordination**—waiver toolkit and online pchcp.rockvilleinstitute.org and AHRQ
- **Physical and behavioral health integration**—PBHI workgroup www.kingcounty.gov/transformation
- **Maternal and child health**—Public Health-Seattle & King County www.kingcounty.gov/healthservices
- **Chronic disease prevention**—World Health Organization www.who.int/topics/noncommunicable_diseases
- **Social determinants of health**—World Health Organization www.who.int/topics/social_determinants

Medicaid Waiver Focus Areas

A. Initiative 1: Accountable Community of Health
   - Domain 1: Health and Community Systems Capacity Building (in support of 2 & 3)
     - Financial sustainability through value-based payment
     - Workforce
     - Systems for population health management
   - Domain 2: Care Deliver Redesign
     1. Bi-directional integration of behavioral and physical care*
     2. Care coordination
     3. Transitional care
     4. Diversion from the criminal justice system
   - Domain 3: Prevention and Health Promotion (one of first three is required)
     1. Chronic disease prevention
     2. Maternal and child health
     3. Oral health
     4. Opioid use

B. Initiative 2: Array of services to stay at home, long term services and supports

C. Initiative 3: Targeted supportive housing and employment to address homelessness and unemployment

*Red are required projects

Regional Health Needs Inventory (RHNI)

- The RHNI is part of the planning process for the 8 project areas
- State will provide information from statewide data sources
- ACHs will fill in gaps, complete an environmental scan of providers and may rely on previously completed inventories or assessments
- **Section I:** description of geography, SDOH infrastructure (housing, education, transportation, employers, etc.), demographics and health status
- **Section II:** description of capacity of health care system and community organizations, including access/utilization data and service areas of hospitals, long-term care, rehabilitation, specialty, urgent care, dental, care coordination, home health, primary care, behavioral health, SDOH agencies, health depts, jail health, school health, managed care organizations and others
- We have partially completed Section I, but not Section II

Summary

The King County Health Improvement Plan framework highlights five key priorities focus areas:

- Care coordination
- Physical and behavioral health integration
- Maternal and child health
- Chronic disease prevention
- Social determinants of health—addressing race and social justice

The identification of these priorities was based on:

a) Desk review of existing community needs assessments

b) Analysis of extensive community engagement findings

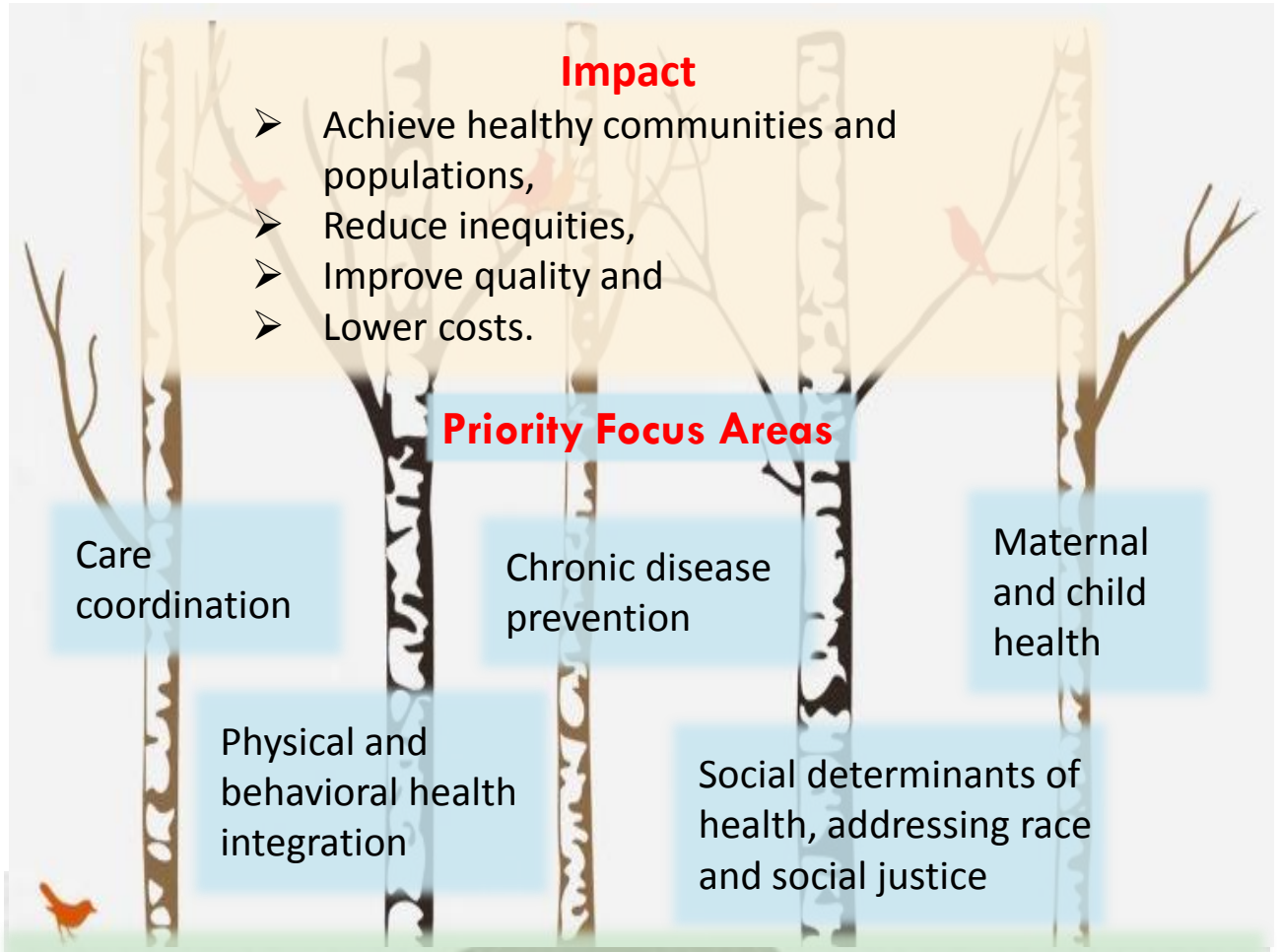
c) Application of the Culture of Health framework

d) Alignment with Medicaid waiver focus areas

e) Consultation with the Community and Consumer Voice committee and the Interim Leadership Council, and final revisions by RHIP workgroup

If approved, the priorities and principles outlined in this framework will inform the ACH's Regional Health Needs Inventory and be an important resource for Medicaid waiver projects.

The King County Health Improvement Plan Framework



Principles

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