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CENTER FOR CARE INNOVATIONS

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ROOTS Program

Program Update Webinar
January 10, 2018

Welcome!

Veenu Aulakh,
Executive Director,
Center for Care Innovations
veenu@careinnovations.org

Diana Nguyen,
Program Coordinator
Center for Care Innovations
diana@careinnovations.org

Megan O'Brien,
Value-Based Care Program Manager,
Center for Care Innovations
mobrien@careinnovations.org

Webinar Reminders

1. Everyone is muted.
   - Press *6 to **mute** yourself and *7 to **unmute**.

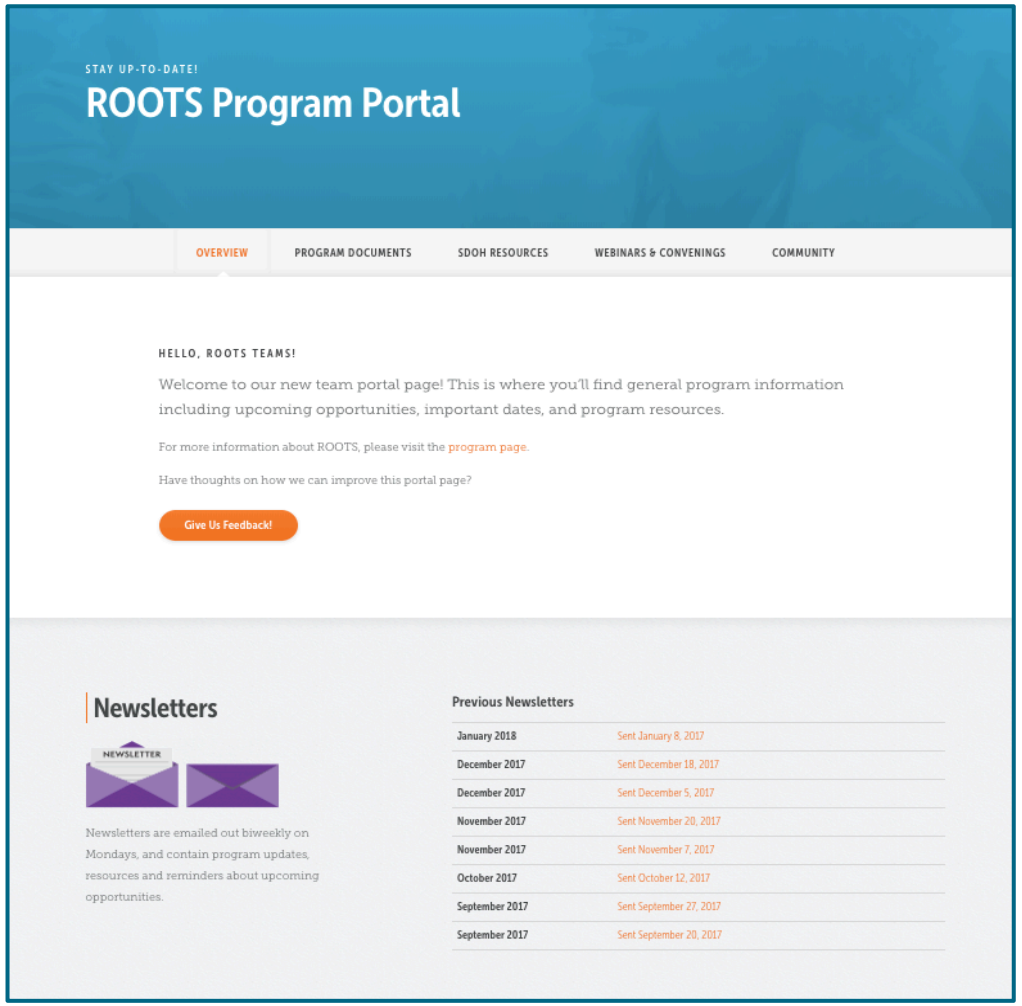
2. Remember to chat in questions!

3. Webinar is being recorded and will be posted on ROOTS Portal and sent out via the next newsletter.

ROOTS Portal

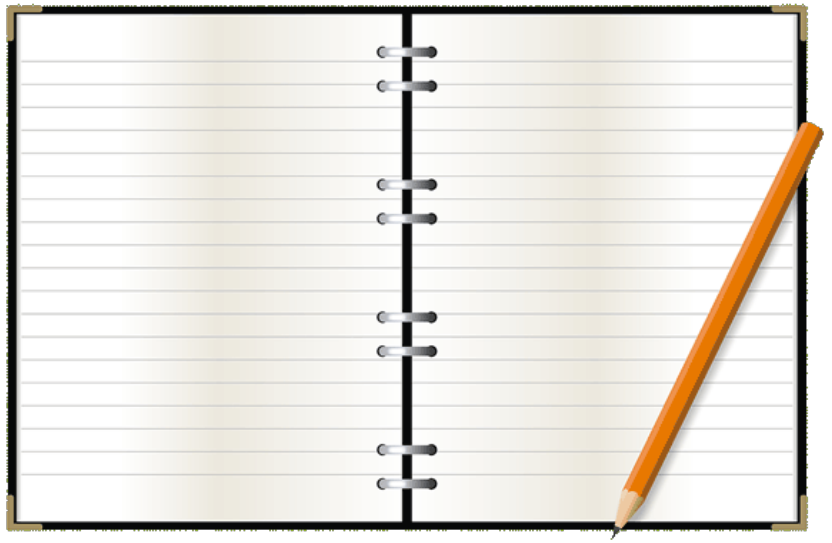
- Access past newsletters, SDOH resources, webinar recordings, & program documents
- Link to monthly milestone updates

www.careinnovations.org/roots-portal



Agenda

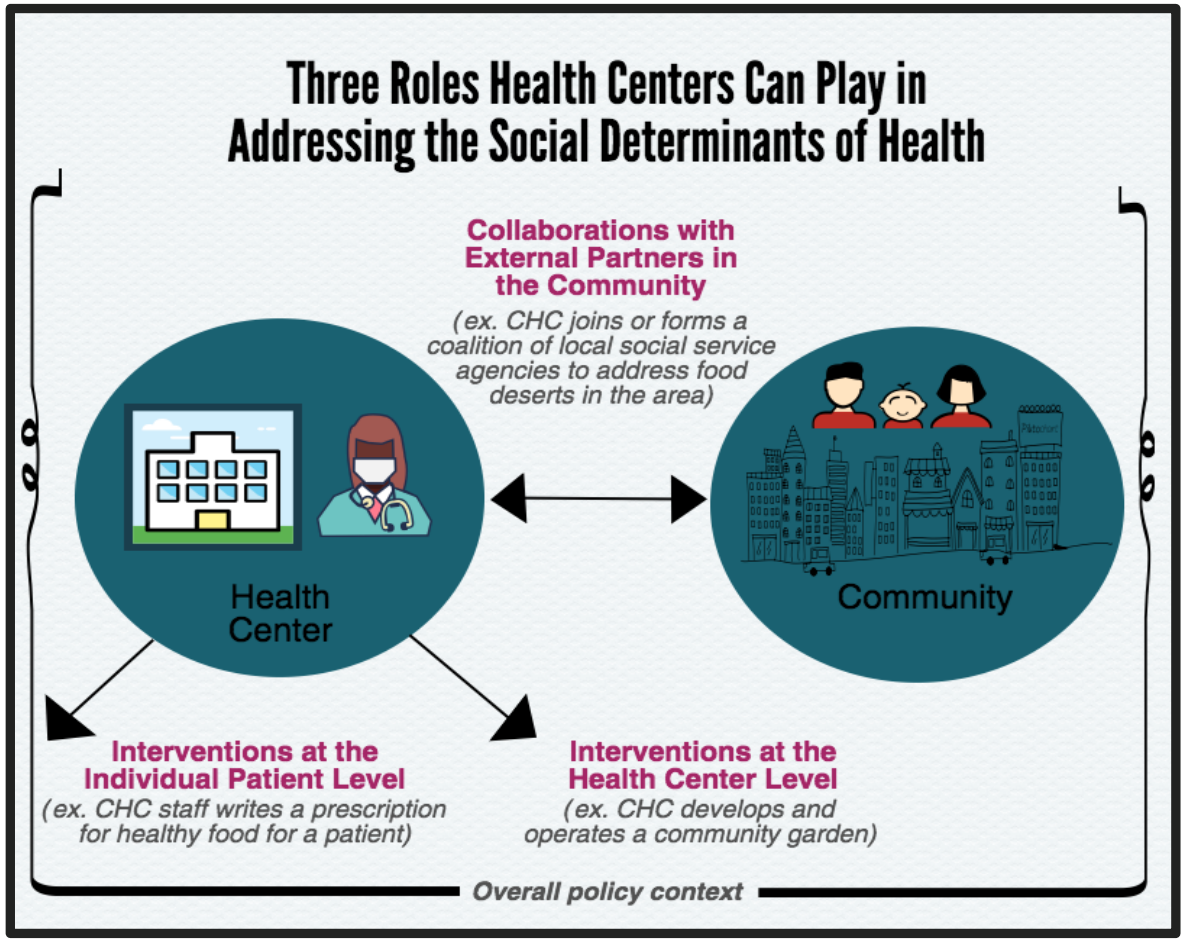
1. Where We've Come
   - Program Goals & Structure
   - Roadmap
   - Milestones
2. Evaluation Reminders & Metrics
3. Site Visit Reminders
4. Looking Forward: Partnerships
   - February 8 Webinar & March 8 Session in LA



Where We've Come:
Goals, Structure, & Milestones

Scope of ROOTS Program

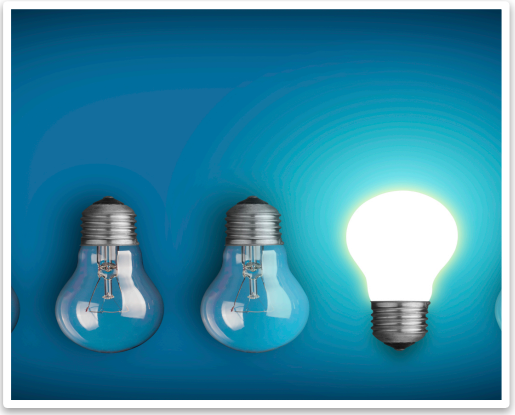
- Can we clarify the roles clinics can play to address SDOH *(individual level, organization level, community level, policy level)?*
- Not going to spend a lot of time defining SDOH or creating new frameworks
- Focus on applied projects and learning where health centers can best leverage strengths



Key Objectives

- **Support and build capacity** of clinics to use patients & community-level SDOH data
- Identify sustainable ways to **use data to focus on critical issues** and **build partnerships** to improve health
- Clarify the **role of clinics** in addressing SDOH and how to integrate these roles into the fabric of the organization
- Identify and develop **resources, tools, and lessons** to share with the larger safety net health care community

What Makes this Different?



This is an innovation collaborative.

We don't have a single change package

We want to co-design this program with you.

Spread lessons through-out the safety-net

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- Session #2 — 3/8/18 — Los Angeles
- Session #3 — 8/9/18 — TBD

Remote Support

Coaching: Monthly Team Calls

- Kickoff Webinar — 9/14/17
- Content Webinar — 11/16/17
- Idea Sharing Webinar — 12/7/17
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- Idea Sharing Webinar — 6/7/18
- Content Webinar — 7/12/18

Milestones & Program Deliverables

**Projects should have at least 9 months of implementation.

Milestone #1: *Team Build, Data Review, Finalize Target Population & Need, Consider Staff & Partners, Initiate Metrics*

Milestone #2: *Start Project Operations**, Design Project Workflow and Marketing, Form Partnerships*

Milestone #3: *Analyze Progress, Redesign, Formalize Sustainable Operations*

- Project Charter — 11/17/17
- Partners Agreements — 3/18
- Share Lessons Learned — 8/18-10/18

Evaluation Activities

- Interviews w/ Leads — 10/17-11/17
- Provider/Patient Surveys — 12/17-1/18
- Midpoint interviews (onsite) — 2/18-4/18
- FUP Interviews & Surveys + project metrics collection — 9/18-10/18

Surveys to gauge satisfaction with sessions, webinars, TA, etc

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September 14 Kick-Off Webinar

- Heard **from Jeff Acido from KKV** about their organizational approach to addressing SDOH
- Introduced CCI Team, Jim the coach, SIREN evaluation team, and Health Begins Team
- We **listed key dates and milestones** for project team members, which are intended to support teams throughout the year-long process.

October 5 Session

Understand the **goals and expectations** of the ROOTS program and learning community.

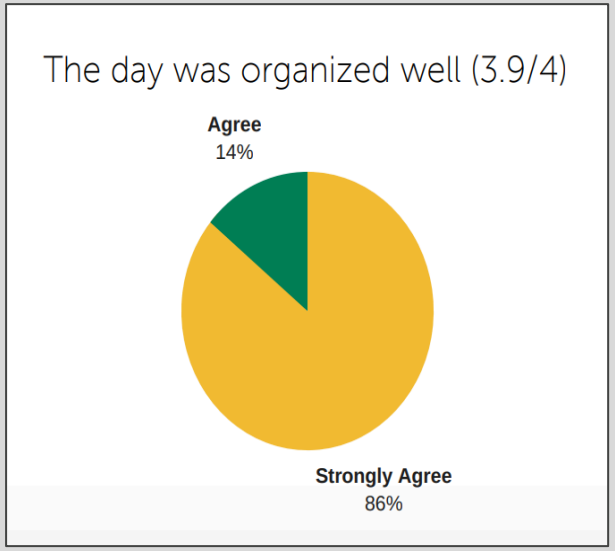
Understand your colleagues' project goals and key components, challenges, and questions, and where you may be able to learn from them.

Receive **feedback** from your peers and faculty about your own project.

Clarify and validate how your data and end-user input led you to your proposed project and the population you will be working with.

Co-design with CCI staff the content and support you need to succeed in the ROOTS program.

October 5th Evaluation: Overall Day



Length of day (n=29)	Too Short	**About Right**	Too long
	1 (3%)	**27 (93%)**	1 (3%)
Quantity of Info (n=29)	Not enough	**About Right**	Too much
	0 (0%)	**29 (100%)**	0 (0%)
Opportunities to interact w/ other teams	Too few	**About Right**	Too many
	6 (21%)	**23 (79%)**	0 (0%)

- Overall all respondents thought the meeting was either excellent (62%) or very good (38%).
- Nearly all thought the day was well organized and the right length.
- Things to consider for next time:
  1. More team team
  2. More time with experts
  3. Better wi-fi


HOW MIGHT WE BEST
SUPPORT YOU IN DEVELOPING


The Sun

October 5th Evaluation: Sessions

How Useful was each session?	Not Useful (1)	Somewhat Useful (2)	Useful (3)	Very Useful (4)	
Welcome (n=29)	0 (0%)	1 (3%)	6 (21%)	22 (76%)	3.7
Dr. Noha Aboelata (n=29)	0 (0%)	0 (0%)	0 (0%)	29 (100%)	4.0
Team Time (n=28)	0 (0%)	0 (0%)	5 (17%)	23 (82%)	3.8
Loretta Khangura (n=28)	0 (0%)	3 (11%)	12 (43%)	13 (46%)	3.4
Learning & Sharing (n=29)	0 (0%)	1 (3%)	7 (24%)	21 (72%)	3.7

- The **most useful** sessions were **Dr. Noha Aboelata's** presentation about the ROOTS clinic, followed by team time, the welcome, and the learning and sharing presentations.
- **Loretta's** was the **least useful session**, however 89 % of respondents still thought it was either useful or very useful, and concerns centered more around the **technical difficulties** rather than the content or presentation style.

Additional Webinars

- Heard important reminders from Dr. Andy Beck:
  - That screening patients SDOHs is important, but what really matters is **how you use screening data to drive action** to improve health outcomes & narrow inequities.
  - That **data is critical** (both quantitative and qualitative) at each step along the way of addressing SDOH.
  - That collecting SDOH data can **open opportunities** for innovative **outreach & new partnerships.**

November 16: Using Data to Drive SDOH Priorities: Lessons Learned from Cincinnati Children's Hospital

- Heard from all 7 teams about your progress, the good, the bad, and one question you have for the group.
- Many of the questions were about **partnership**!

December 7: Idea Sharing Webinar: Using Data to Understand SDOH Needs

- Heard from Rishi & Sarah from Health Begins about **mapping out workflow,** and how to identify opportunities to enhance workflow to **incorporate social needs** screening & referrals.
- Learned about Health Begins Upstream Medicine **Workflow Canvas**.
- Joined by Dr. Steven Chen from **Hayward Wellness** & heard how they improved the flow of information and work in order to **integrate food insecurity screening.**

December 14: Optimizing the Flow of Information and Work for Social Needs

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Surveys to gauge satisfaction with sessions, webinars, TA, etc

Program Expectations & Metrics

Participate in Overall ROOTS Evaluation

- As examples of successful models and changes through **case studies**
- **Interviews** with evaluators
- Willingness to participate and **share lessons learned** beyond program

Project Metrics

- Work with the SIREN team to develop **project specific** metrics

Milestones & Deliverables

Milestone Set 1 - Team Build, Data Review, Finalize Target Population & Target Need, Consider Potential Staff & Partners, Initiate Metrics

- ***Finalize Project Charter: November 2017***

Milestone Set 2 – Start Project Operations, Design Project Workflow and Marketing, Form Partnerships

- ***Develop partner agreements: March 2018***

Milestone Set 3 - Analyze Progress, Redesign, Formalize Sustainable Operations

- ***Participate in sharing lessons learned, August-October 2018***

Wins!

Asian Health Services: Building Knowledge of Community Resources

- Sat down with HIV and BH teams to look at the different sets of community resources they offer to clients who express insecurity with food or housing. It was amazing how the lists were different! This one exercise helped us build our knowledge of community resources!

LAC-USC: Care Team Engagement

- RN on team expressed extreme excitement: "After 30 years in nursing, I get to finally see that we are taking a proactive approach to the SDOH needs of our patients. The needs has always been there - it is a big part of chronic issues. We can now help plan for a fix in these important areas of need."

LifeLong: Leadership Engagement

- Developed new monthly report of progress will be reviewed by senior leaders that will include data on process measures once process begins.

Wins!

NEVHC: Staff Engagement

- Rishi presented at our All Staff meeting and it was a huge hit.

Petaluma: Community Connections

- Our community has a amazing group called COTS (Community on the Shelter List) and we are now connected with them to share resources on work insecurity - and other SDOH resources in the community!

St John's: Partnership Work

- It is amazing that we are doing this work today across LA. Others in CHAMP are not necessarily health organizations but we are seeing "whole person care" actually improving lives of the reentry community. It is a success of a policy/legislation turning into action!

West County: Data Sharing Agreements

- To resolve concerns over data sharing, formed an independent data management consultant agreement to capture data from all parties, use Personally Identifiable information to match data and then de-identify all data before sharing back with all partners. Unique legal arrangement that works!

Q & A

Evaluation Reminders & Metrics

Evaluation

Goal: Ensure learnings from the program are identified and recorded, in particular:

1. What roles can CHCs best play in addressing SDOH?
2. What types of projects were easiest to implement and why?
3. What challenges did you face in implementing your projects and how did you address them?
4. What ROOTS program activities were most helpful?
5. Did participation in this program increase your clinic's capacity to address patients' SDOH?

Evaluation

- **Baseline project lead interviews:** Nov-Dec 2017 ✓
- **Baseline staff *(and patient)* surveys**: Dec 2017 – Jan 2018 – *in process*
- **Mid course in-person interviews**: Mar-May 2018
- **Follow-up staff *(and patient)* surveys**: Sep-Oct 2018
- **Follow-up project lead interviews**: Sep-Oct 2018
- Collection of **site-specific process and outcome metrics**: Sept-Oct 2018
- Throughout: **Surveys to gauge satisfaction** with program sessions, and **one-on-one evaluation TA**.

	(Measuring activities)	*(Measuring impacts of activities)*			
Patient	<u>Screening and referral</u> • Number screened • Number with needs • Number referred • Number who followed through on referrals • Numbers receiving services • Etc.	<u>Social needs</u> • Global (risk scores) • Need specific, eg. food insecurity, housing insecurity, etc.	<u>Health Behaviors and Health Status</u> • Global measures, eg. self-rated health, health-related quality of life (eg. VR-12, SF-12), etc. • Specific measures, eg. HbA1c and BP control, BMI, mental health, healthy eating, drug use, etc.	<u>Health Care Utilization</u> • Primary care visits • Apt. adherence • Specialist visits • ED visits • Hospitalizations	<u>Health Care Costs</u> • Total cost of care • Costs associated with specific services, eg. primary care, or ED use
		<u>Experience of Care</u> • Satisfaction with care • Trust in provider • Loyalty to clinic		Health Care Quality	
Staff/ Provider	Knowledge, capacity and confidence to address patients' SDH	Experience of Care Job satisfaction		Burnout Turnover	
Clinic	Leadership support	Financial sustainability and ROI System efficiency			
	Workflow systems capacity				
	EHR systems capacity				
	Strength of community partnerships				
	Data integration with community partners				
	Staff training for SDH work; Recruitment of specialized staff				

Outcomes Measurement Considerations

- Tailor!
- Timing and dose
- Some measures of utilization and costs may increase, eg. primary care vs. ED.

Site Visit Reminders

ROOTS PROGRAM
SITE VISIT INFORMATION

DECEMBER 2017

UPCOMING SITE VISITS

JANUARY
31

ROOTS CLINIC, OAKLAND

ROOTS Community Health Center (Oakland, CA) will highlight their work in building a social enterprise to address unemployment; working with formerly incarcerated individuals; and providing face-to-face visits to homeless encampments.

FEBRUARY
22

KOKUA KALIHI VALLEY, HAWAII

Kokua Kalihi Valley (Honolulu, Hawaii) will highlight their work in addressing food insecurity through growing, preparing, and sharing food; cultivating community partnerships; and local and state advocacy.

FEBRUARY
23

WAIMANALO HEALTH CENTER, HAWAII

Waimānalo Health Center (Waimānalo, Hawaii) will highlight their work in developing a medical-legal partnership, youth mentorship program, cultural healing and cultural activities. **This site visit will only occur in the morning.**

GENERAL SITE VISIT AGENDA

SDOH SCREENING & PRIORITIES

- How do they screen and collect SDOH data?
- How do they prioritize what SDOH to address?

FUNDING & SUSTAINABILITY

- How do they manage to bill or fund the services they provide?
- What sources of funding have they used?

CLINIC TOUR & WORKFLOWS

- What do they offer in terms of services and physical space?
- Who leads and carries out the services?

PARTNERSHIP PHILOSOPHY

- How are partnerships built and maintained?
- What makes a successful partnership?

Q&A WITH CLINIC STAFF

- What role does each staff member play in addressing SDOH?

ROOTS CLINIC

- **Date:** Wednesday, January 31, 2018
- **Location:** Oakland, CA
- **Website:** www.rootsclinic.org
- **Highlights:** : Building a social enterprise to address unemployment; working with formerly incarcerated individuals; and providing face-to-face visits to homeless encampments

ABOUT ROOTS

Roots Community Health Center is dedicated to improving the status of health of East Bay residents. Roots Community Health Center was founded to address the growing need for accessible, culturally appropriate, community-responsive, comprehensive health care in Oakland, California.

ROOTS operates 3 clinic locations in the Bay Area. Most notable is their soapmaking social enterprise, Clean360 , where Roots Emancipators (or formerly incarcerated individuals) receive paid, on-the-job training and wraparound support to become workforce ready.

TRAVEL RECOMMENDATIONS

For teams outside of the Bay Area attending the ROOTS clinic site visit, we recommend flying into the Oakland Airport, and staying at a nearby airport hotel. ROOTS Clinic is located 4 miles, or less than a 20-minute ride, from the airport and nearby hotels. While the site visit agenda hasn't been confirmed, we expect to start between 9:30-10am, and end by 4pm, so depending on flight times and your preference, you could fly in and out the same day.

HOTEL RECOMMENDATIONS

BEST WESTERN PLUS AIRPORT INN & SUITES

170 Hegenberger Loop, Oakland, California 94621
Cost per night: $141 + tax

COURTYARD BY MARRIOTT OAKLAND AIRPORT

350 Hegenberger Road, Oakland, California 94621
Cost per night: $159 + tax

HILTON OAKLAND AIRPORT

1 Hegenberger Road, Oakland, California 94621
Cost per night: $219 + tax

KOKUA KALIHI VALLEY

- **Date:** Thursday, February 22, 2018
- **Location:** Honolulu, Hawaii
- **Website:** www.kkv.net/
- **Highlights:** Growth & sharing of food, nature preserve, community partnerships & community advocacy

ABOUT KOKUA KALIHI VALLEY

Beyond providing comprehensive services, Kokua Kalihi Valley Comprehensive Family Services (KKV) is also known for their work in social services, transportation, translation, outreach, professional education, youth services, and community advocacy to the city and county of Honolulu and urban community of Kalihi Valley.

KKV employs 180 staff who are fluent in 20 Asian and Pacific Island languages and dialects, and work out of nine locations throughout the valley—including two of the largest public housing communities in the State of Hawai'i, a 12,000 square foot health center, a 16,500 square foot Wellness Center, a 4,000 square foot Elder Center (the former site of the main clinic) and 100 acres of leased State Park land at the back of Kalihi Valley.

WAIMANALO HEALTH CENTER

- **Date:** Friday, February 23, 2018 (Morning)
- **Location:** Waimanalo, Hawaii
- **Website:** **www.**waimanalohealth.org
- **Highlights:** Medical-legal partnership, youth mentorship, cultural healing & activities

ABOUT WAIMANALO

Waimānalo Health Center (WHC) provides primary and preventive health services, with special attention to the needs of Native Hawaiians and the medically underserved, and improving the health and wellness of individuals and their `ohana regardless of their ability to pay.

WHC offers services that are grounded in Hawaiian culture. The Ai Kupele Cultural Healing Center offers everything from prayer to spiritual counseling, lomi lomi massage and a pharmacy of Native Hawaiian plants and herbs that come straight from the garden next door. Their Youth Mentoring Program is based upon respect for Native Hawaiian language, cultural practices, and values of mo`olelo (story telling), kūkākūkā (talk story), kālele (to lean on for support) and pono (to make right).

TRAVEL RECOMMENDATIONS

For teams attending the KKV site visit, we recommend flying into the Honolulu International Airport. KKV is located in Kalihi Valley, about 5 miles from the airport and 4 miles from downtown Honolulu. While this seems close, traffic is notoriously congested, so expect to spend at least 30 minutes getting from the airport or downtown area to KKV.

The site visit agenda hasn't been confirmed, but we expect to start by 9am and end by 5pm. We are also trying to confirm an optional visit to Waimanalo Health Center on Friday morning from 10am-12pm; if you are interested, please consider this potential opportunity when booking your return flight.

HOTEL RECOMMENDATIONS

There are a variety of hotel and AirBnB options available, though nothing near the clinic. We recommend staying in downtown Honolulu.

THE LAYLOW WAKIKI

2299 Kuhio Avenue, Honolulu, Hawaii 96815
Cost per night: $223 + tax

ALA MOANA HOTEL

410 Atkinson Drive, Honolulu, Hawaii 96814
Cost per night: $229 + tax

ASTON WAIKIKI BEACH HOTEL

2570 Kalakaua Avenue, Honolulu, Hawaii 96815
Cost per night: $179 + tax

1. SELECT 2 TEAM MEMBERS

Due to limited space, CCI can only allow for 2 attendees per organization to each site visit.

2. REGISTER BY JANUARY 12

Make sure to register online **here** by January 12. If you do not register by the deadline, your spot will be given up to another organization.

3. BOOK YOUR TRAVEL

CCI will be offering reimbursements to help lower travel costs (up to $500 to organizations outside the Bay Area visiting the ROOTS Clinic and up to $1500 to all organizations visiting KKV).

WHAT TO EXPECT AFTERWARDS:

1. All confirmed attendees will receive a calendar invite for the respective site visit.

2. A comprehensive email with the site visit agenda, meeting time and contact information will be sent to all attendees prior to each site visit.

QUESTIONS?

CONTACT:
DIANA@CAREINNOVATIONS.ORG

Looking Forward:
Partnerships

March 8 Session & Draft Agenda

When/Where:

- Thursday, March 8, 2018 from 9:00am-4:30pm
- Downtown Los Angeles
- Registration Link will be sent out in next two weeks

9:00am – 9:30: *Breakfast & Registration*

9:30 – 10:00: Welcome & Overview

10:00 – 10:45: Potential Speaker

11:00–12:15: Break Out, Part 1

12:15 – 1:00: Lunch

1:00 – 2:15: Break Out, Part 2

2:30 – 3:15: Team Time & Reportback

3:15 – 4:15: Ask An Expert & Group Sharing

4:15 – 4:30pm: *Wrap Up, Evaluation, & Closing*

Potential Faculty

Areas of Focus:
- Implementing Social Needs Strategy
- Developed Social Needs Roadmap & Screening Toolkit

For March 8:
- Change Management
- Engagement & Buy-in

https://healthleadsusa.org/

Areas of Focus:
- Creating Partnerships between Health Care & Social Service Organizations
- Org Development & Change Management
- Fostering Community Agency

For March 8:
- Spectrum of Collaboration
- Systemic Leadership

https://collaborativeconsulting.net/

Areas of Focus:
- Financial capacity building among nonprofits/CBOs
- Sustainability & Partnership Development

For March 8:
- PATH Tool
- Best Practices for Developing Partnerships

http://www.nonprofitfinancefund.org/

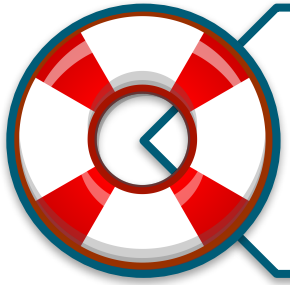
Partnership TA Requests & Questions

SHARING DATA:	How do you best share data and resources with community partners?
ALIGNMENT:	How do you make sure that missions and goal are aligned between partners?
AGREEMENTS:	Do you use formal or informal agreements when establishing partnerships?
ROADMAP:	Is there a roadmap or toolkit for developing and sustaining partnerships?
ASSESSMENT:	How do you assess community partners to ensure a good fit?
ENGAGEMENT STRATEGIES:	What are strategies for engaging upstream community partners?
MODELS:	What are innovative partnership models?

Questions

What **successes** with partnership have you had that you'd like to share?

What **challenges** have you been encountering related to partnerships/collaborations?



What **support would be most helpful** to you moving your partnership/collaboration work forward?

Press *7 to unmute!

Thank you!

For questions contact:

Megan O'Brien
Value-Based Care Program Manager
Center for Care Innovations
mobrien@careinnovations.org

Diana Nguyen
Program Coordinator
Center for Care Innovations
diana@careinnovations.org