

Accountable Communities of Health (ACH) Quarterly Activity Report

Reporting period: April 1–June 30, 2021

Report to Joint Select Committee on Health Care Oversight



Introduction

This report reflects statewide and regional ACH activities from April 1 to June 30, 2021. This report shares what ACHs are doing at the community level within and across regions to improve community health in Washington State.

Through their unique role, ACHs connect the health care delivery system and local community organizations. In addition to their MTP activities, ACHs have been coordinating and supporting COVID-19 response. Statewide activities summarized below reflect the most recent quarter: (April 1–June 30, 2021).

Statewide ACH activities

- ACHs are working to support the health and social services sectors on COVID-19 response and recovery. This includes vaccine awareness, testing capacity, telehealth, and many other examples. ACHs work closely with local public health, providers, tribal governments, and the community in these efforts.
- ACHs are working to facilitate and implement community-based care coordination. This includes several ACHs working with Washington State Department of Health (DOH) and local partners to run local CareConnect Hubs, a program for people and families with COVID-19 diagnoses, as well as Pathways HUB models and other projects. ACHs are also working on community information exchange projects to facilitate community-driven solutions and exchanging vital health and social needs information.
- ACHs are approaching their work with an equity lens, receiving and providing trainings on anti-racism and health disparities, working to convene partners to work on equity issues, and investing in organizations and initiatives led by communities of color. ACHs are oriented toward equity as they plan for the future.
- ACHs are actively looking to the future and planning for their role in the health system post-Medicaid Transformation Project (MTP). They are doing this by planning for project sustainability and transition in the MTP extension year and working with their communities on priority areas of focus for the next phase of work.

Individual ACH activities

Better Health Together (BHT)

Serving Adams, Ferry, Lincoln, Pend Oreille, Spokane, and Stevens counties

COVID-19 response

- Care Connect Washington launched in January with eight community-based Care Coordinating Agencies (including CHAS Health, Frontier, Rural Resources, SNAP, Spectrum, YWCA, and Peer Spokane) that employ 11 Community Health Workers (CHWs). The CHWs will provide direct support to individuals in quarantine. So far this year, Care Connect Washington served 734 individuals/families with food, personal protection equipment (PPE), and household assistance.
- DOH, Central Valley School District, and BHT are preparing to launch a COVID-19 Testing pilot program this fall within the Central Valley School District. To quickly identify positive cases, symptomatic students will receive rapid testing administered at schools. Students who test positive will be isolated until the parents



arrive. If parents choose, the COVID Care Connect Hub will receive a referral and be ready to provide immediate support.

- BHT is working with community partners to get as many people vaccinated as quickly as possible through a Vaccine Trusted Messenger campaign. BHT supports an [equitable COVID vaccine distribution](#) process that removes the barriers many people face accessing the vaccine. This two-pronged approach includes a [multi-media campaign](#) highlighting the voices of Black, Indigenous, Latinx, rural, and other impacted communities to combat misinformation and increase access to vaccine information.

Health-related social needs

- In January 2021, BHT staff participated in a stakeholder meeting regarding the challenges Black, Indigenous, and People of Color (BIPOC) and other impacted communities face with accessing housing assistance dollars. BHT submitted a proposal to be a housing assistance fund fiscal sponsor, which the City of Spokane accepted in May. Of the \$2 million released to BHT, \$400,000 is available for partner organizations; the remaining \$1.6 million will fund direct assistance to highly impacted communities. BHT is partnering exclusively with organizations led by and serving BIPOC and impacted communities, and specific allocations of the funding will be determined through a community-based participatory budgeting process.

Cascade Pacific Action Alliance (CPAA)

Serving Cowlitz, Grays Harbor, Lewis, Mason, Pacific, Thurston, and Wahkiakum counties

Health equity

- For the National Minority Health Month in April, CPAA released an open request for proposals (RFP) of up to \$10,000 per applicant to highlight and implement health equity strategies. Seventeen partners were selected, attended a kickoff meeting in June, and have since begun implementing the project. A total of \$170,000 has been committed to this initiative.
- As part of its ongoing health equity work, CPAA has ramped up efforts to accelerate vaccine uptake among communities of color across seven counties, which are about 25 percent of the region's 650,000 people. This is in addition to its other COVID-19 efforts, such as providing and distributing critical PPE across the region. Local forums are proving vital for this important work.

Care coordination

- Bi-monthly Medications for Opioid Use Disorder (MOUD) provider group meetings were convened to support the publication of research findings on gaps in care for pregnant people in need of treatment.
- A complete quality assessment of all existing partners was undertaken to evaluate consistency and performance on agreed quality metrics. Also, CPAA worked with DOH on the 1815 grant with the view of aligning the project budget with Outcome Based Payment financing.

Workforce development

- Geography and rural setting along with lack of a critical mass continue to impede Pacific and Wahkiakum counties from attracting and retaining permanent health providers. CPAA has held discussions with public health officials to explore funding a mobile unit to provide mental and behavioral health services in these counties. Services will include screening, treatment, providing prescription and referral services. An RFP will be released, and operator will be picked in quarter 3 (Q3) of 2021. CPAA will leverage a grant from a different funder for this work, with MTP dollars helping to close budgetary gaps as needed.

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- CCAA developed and advertised a Peer Professional Development series to support certified peer counselors in the region. It continues to share other partner training opportunities as they become available.

Whole-person care

- CCAA invested \$137,250 toward conducting a feasibility study and preliminary financial model to support an outpatient medication assisted treatment (MAT) facility with an optional pharmacy component. These funds are to be used to conduct discussions around project details and gather necessary project information and data; provide a basic new business model and forecast based on findings; develop a Power Point with feasibility findings and recommendations; and provide recommendations on existing programs, if any.

Elevate Health

Serving Pierce County

Sustainability

- Using guidance from the HCA, Elevate Health has begun conversations around sustainability with potential partners, specifically regarding three pillars of work: Community-Based Care Coordination, community information exchange (CIE), and OnePierce Community Resiliency Fund. The goal of workforce development is interwoven throughout the region's Community-Based Care Coordination and OnePierce activities.
- OnePierce Community Resiliency Fund disbursed community loans using funding that was repaid by borrowers in the first quarter of 2021. The revolving loans are a key part of OnePierce's sustainability strategy.

Health equity

- Elevate Health helped to fund a Community Health Worker through Castele, Williams, and Associates to help address social determinants of health (SDOH) needs within Tacoma's Black community. Elevate Health has also contracted with the Korean Women's Association (KWA) for this COVID-19 care coordination work to provide culturally appropriate services to various Asian populations in Pierce County.

Health-related social needs

- OnePierce Community Resiliency Fund made \$2.63 million in bridge loans to six agencies contracted with Pierce County for rental assistance and homeless outreach. These agencies included providers who were contracting with the county for the first time and providers focused on reaching minority populations.

Care coordination

- Elevate Health partnered with DOH as a Regional Care Coordination Hub to provide care coordination services and groceries/rental assistance to clients in need.
- Elevate Health is partnering with MultiCare and SeaMar in a pilot program to integrate the Pathways Hub model of care coordination for the patients of the Mobile Integrated Healthcare Clinic, serving populations with serious mental illness. Eight patients are being served so far.
- To develop a more robust care delivery infrastructure by leveraging data resources, Elevate Health has continued to build a team of subject matter experts to drive project planning, technological architecture, and strategy development for a multi-sector CIE as a legacy asset.



Greater Columbia ACH (GCACH)

Serving Asotin, Benton, Columbia, Franklin, Garfield, Kittitas, Walla Walla, Whitman, and Yakima counties

Whole-person care

- Training for Practice the Pause, GCACH's regional campaign to build community and individual resilience was in full motion during the past quarter. As of this report, 67 trainings to schools, public health agencies, community-based organizations (CBOs), behavioral health agencies, parent groups, case workers, and counselors had been conducted. Since the training, school districts and community organizations have worked to spread the message and train teams and staff. Over 136,000 students in 58 school districts received printed toolkits, made possible from a grant from Cambia Health Solutions.

Workforce development

- Applications for the CHW Internship program were received on April 16, and 11 organizations were awarded an opportunity to employ a CHW in their organization for an 18-month period, starting in July 2021. Primary care, behavioral health, CBOs, and mental health agencies will participate in the 18-month program. A training for supervisors was held on June 22, conducted by the Northwest Primary Care Association.

Health-related social needs

- GCACH awarded \$1.4 million to four philanthropies in April to address the SDOH as determined by Local Health Improvement Networks (LHIN) in the GCACH service area. Each philanthropy conducted a grant process to allocate funding for the LHIN region. Emotional and mental health, housing, access to care, transportation, education, food insecurity, and education were commonly cited as priority SDOH needs.
- GCACH received 316 cell phones from the HCA, which were passed through to Foundational Community Supports (FCS) providers in the region. These phones then went directly to clients seeking housing and employment assistance.

Sustainability planning

- Health Management Associates (HMA) was contracted in December 2020 to guide GCACH in developing a business plan to include a marketing, management, operations, and financial plan. GCACH took steps to finalize a menu of services that will provide sustainability for the future. This menu will be reviewed in August, and a roadmap for GCACH's future is the subject of a Board retreat in September.

Practice transformation

- GCACH continued providing virtual practice transformation navigation services to 80 contracted sites. The 80 sites are in various stages of practice transformation. All sites are showing process improvements, especially in follow-up care from the emergency department and hospitalizations. One of the requirements in the practice transformation program is to develop systematic coordination of care across the medical neighborhood. Cohort 1 achieved of 81.8 percent of follow-up within 72 hours of discharge from the hospital.

HealthierHere

Serving King County

Whole person care

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- The Clinical Integration Assessment Work Group (CIAWG), consisting of HealthierHere, HCA, all five managed care organizations (MCOs), and two other ACHs, are working to promote and implement standardized bi-directional integration assessment statewide. Following a review of seven tools and/or frameworks, the CIAWG recommended the state adopt the Continuum-Based Framework for Behavioral Health Integration into Primary Care and the Continuum-Based Framework for General Health Integration into Behavioral Health, a complementary set of tools not currently used in the state. To help inform and advance the adoption of these new tools, HCA contracted with HealthierHere to conduct a field test in March 2021, with six pilot partners representing diverse perspectives and organizational types. The group has now entered Phase II of implementation planning and hopes to implement a standardized tool across the state in 2022. Once implemented, this will allow the state to measure integration progress at the provider level, better understand gaps and challenges within regions of the state and/or certain provider types, and ultimately report on the impact of integration on client outcomes.

Health equity

- In partnership, HealthierHere and Public Health Seattle & King County (PHSKC) were awarded a \$3.8 million grant over two years, called "Advancing Health Literacy to Enhance Equitable Community Responses to COVID-19" through the Federal Office of Minority Health. The initiative hopes to identify and implement best practices for improving health literacy to COVID-19 vaccination and other mitigation practices among underserved populations and tackle health disparities surrounding COVID-19 vaccination, testing, and treatment. HealthierHere will work with PHSKC and their Community Partner Network of over 120 CBOs to build on existing efforts. The project will support community-driven development and dissemination of information to keep people safe and healthy. A key product will be a regional Health Literacy and Sustainability Plan.

COVID-19 response

- HealthierHere has been partnering with local providers (clinical, community, and tribal) as well as PHSKC, to ensure equitable access to vaccine information and vaccine administration. To better coordinate vaccination efforts across the region, HealthierHere convened a Community and Clinical Vaccination Cohort to provide opportunity for CBOs and clinical partners to come together and learn what other organizations are working on at this stage in the vaccination campaign and what strategies are working best for various communities. It serves as an opportunity to come together in thought partnership around what some of the remaining gaps are (as many communities are still experiencing disparities in vaccination rates) and to share strategies about effective ways to reach those communities.

North Central ACH (NCACH)

Serving Chelan, Douglas, Grant, and Okanogan counties

Whole-person care

- NCACH has been working with emergency management system (EMS) partners over the last few years to partner with health care providers, public health, law enforcement, and other service agencies to deliver a unique community-centered care delivery model called Community Paramedicine. Produced by Digital Media Northwest, this short documentary showcases NCACH's EMS partners and the great work they're doing to reimagine and transform emergency medicine as an integral part of whole-person health. [Watch the documentary.](#)
- With support from Beacon Health Options and the North Central ACH, two naloxone (commonly distributed as Narcan®) vending machines will be funded and placed in Chelan and Grant counties starting summer 2021. The goal is to reduce opioid overdose deaths in the region. Learn more on the [North Central ACH website.](#)

North Sound ACH (NSACH)

Serving Island, San Juan, Skagit, Snohomish, and Whatcom counties

Community engagement

- Continued meetings with partners advancing Tribal and Equity Learning partner sessions that began almost three years ago. These sessions included national speakers paired with regional and local partner and tribal perspectives.
- Supported several partner sessions, including the Regional Opioid Convening, leadership of the Oral Health Local Impact Network, monthly meetings of young indigenous leaders (Indigenous Futurities Alliance) and monthly meetings of people of color who work with partner organizations. This provides an opportunity for continual learning of the twin pandemics of COVID-19 and racism, with opportunities to foster community learning, healing, and action.
- Hosted an open meeting that acknowledged the past of Indian Boarding schools, and began a process of healing, led by Solana Booth with Advocates of Sacred.

COVID-19 response

- Continued support for COVID-19 care coordination across the five counties, leveraging both MTP and DOH funding to support local public health and CBOs.
- Partnered with organizations who are trusted messengers, community health workers and promoters, acting as interpreters, navigators, and advocates for community members to access vaccine and testing sites.
- Partnering with Kaiser Permanente and Medical Teams International to expand access to communities with lower rates of vaccine rates.

Care coordination

- At the request of five local health jurisdictions (LHJs), NSACH continued a contract with DOH to expand care coordination efforts to include strategies for people who test positive for COVID-19. With a strong history of collaboration among the LHJs, NSACH continues to advocate for more direct regional control over allocated funds.



Sustainability

- NSACH continues to work with national partners around federal recovery strategies, using targeted universalism.
- NSACH is preparing for sixth year activities and renewing partner agreements post-MTP.

Olympic Community of Health

Serving Clallam, Jefferson, and Kitsap counties

Health-related social needs

- Olympic Community of Health released an inventory of local products and opportunities for collaboration around the determinants of health. The [comprehensive tool](#) intends to build situational awareness, provide creative examples to inspire future projects and collaboration, and visually display current outreach and gaps.

Care coordination

- In June, Olympic Community of Health hosted a [partner convening around community-based care coordination](#). With care coordination, costs are reduced across systems and the savings can be reinvested in preventative programs or other services. This convening was an opportunity to discuss different ways to effectively connect, communicate, and coordinate among clinical and community-based agencies, ultimately fostering a region of healthy people and thriving communities. One community shared that their care coordination work has led to a 90 percent decrease in 911 calls for eight high-utilizers.

Whole-person care

- Olympic Community of Health partnered with [Kitsap Strong](#) to host a Train-the-Trainer series for Building Resilience and NEAR Sciences. Eighteen participants from across the region participated in this four-day training and will collaborate in a community of practice throughout the summer. Many of the participants are already planning local training sessions to bring and share the concepts across the region.
- With funding from Cambia Health Solutions, Olympic Community of Health is tackling stigma of substance use addiction across the three-county region. Staff conducted focus groups, a region-wide survey, and an analysis of available data and research on the topic. The Board of Directors will make decisions soon on what steps to take to address this important topic.

Sustainability

- The Board of Directors continues to plan for the post-MTP future state of the organization. The Board voted on a set of four focus areas that will be top priority: long-term, affordable, quality housing; access to the full spectrum of care; reduced substance misuse and abuse; and individual needs are met timely, easily, and compassionately. The Board will finalize a five-year strategic plan for the future state in September.

SWACH

Serving Clark, Klickitat, and Skamania counties

Whole-person care

- The Clark County Opioid Taskforce (CCOT) focused on awareness and integration of existing services, such as the Recovery Helpline, Job Supports, and Homeless Support services.

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- Motivational Interviewing for Mental Health Training was held for all Trueblood Project partners in the region and across the state for other Phase 1 Trueblood partners. This training was available for legal, law enforcement, clinical, and community serving stakeholders.

Health equity

- SWACH staff continued to work on developing Equity Growth Plan priorities based on organizational equity assessment.
- SWACH staff led a collaborative process with community partners in the development and submission of a \$1 million Health Resources and Services Administration (HRSA) grant focused on local community-based workforce to increase COVID-19 vaccine access.

COVID-19 response

- Successful handoff from DOH and integration in to HealthConnect operations of Household Assistance Resources (HAR) payment workflow, which has significantly reduced payment wait times for COVID-19-positive households.
- Collaboration with the National Association for the Advancement of Colored People (NAACP), League of United Latin American Citizens (LULAC), Pacific Islander Community Association of Washington (PICA), Odyssey World International, PeaceHealth, Warehouse 23, and other community partners to support COVID-19 response and community need, including food kit distribution and program referrals.

Care coordination

- SWACH is working on detailed and partner-driven implementation of the HealthConnect Hub program. Activities for the quarter included integrated partner supports, development of forms and technological infrastructure, integration of community health records, piloting an integrated program model between Care Connect and Pathways, and conducting outreach to facilitate referrals to new and vital community agencies and providers.
- SWACH acquired Litmos, a learning management system for tracking and accountability to support the HealthConnect community-based workforce around training, documentation, and shared learning requirements.
- Hepatitis C Cures Program—the cross-sector peer support program to improve Hepatitis (Hep) C outcomes—has supported more than 150 Hep C patients through treatment to test of cure. The program has expanded to two SeaMar clinics and multiple Hep C clinical providers, expanded peer support through Community Voices are Born (CVAB) peer recruitment and training, and is partnering with Molina for member support and program sustainability.