

Accountable Communities of Health Evaluation

# ACH Participant Survey 2016

Center for Community Health and Evaluation  
December 2016



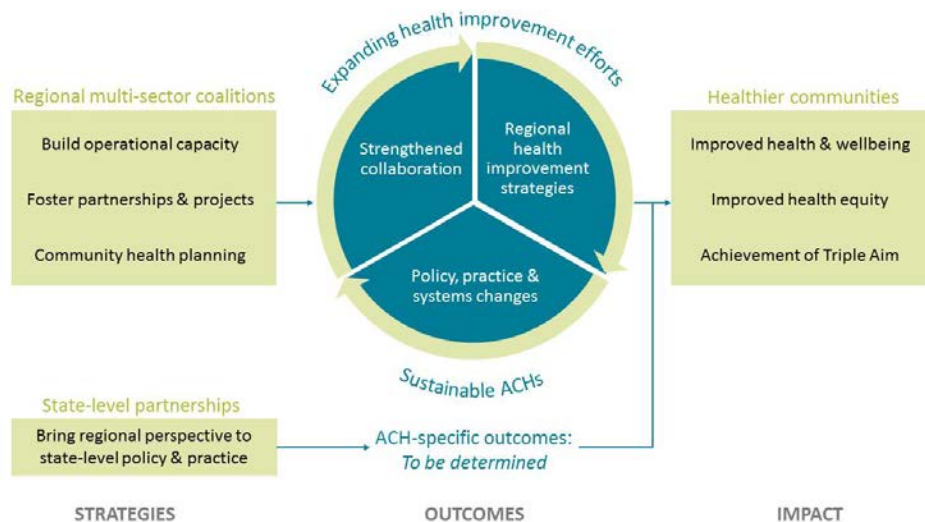
An Accountable Community of Health (ACH) is a regional coalition consisting of representatives from a variety of sectors, working together to improve population health. There are nine ACHs operating across the state as part of the Healthier Washington initiative, which are currently funded by the Health Care Authority (HCA) through a State Innovation Models (SIM) federal grant. ACHs are intended to strengthen collaboration, develop and implement regional health improvement efforts, and provide feedback to state agencies about their regions’ health needs and priorities.

During their first year (2015), ACHs began by establishing operational and governance infrastructure in order to function effectively as coalitions. The ACHs started engaging stakeholders from many sectors and community perspectives across their regions—some of which had never worked together before. They also began to develop regional health needs inventories.

The development of operational, governance, and leadership structures continued through 2016 as ACHs further developed their coalitions and considered transitions to non-profit status. ACHs also selected their first health improvement projects to address one of their region’s population health priorities.

As part of the evaluation of the ACH initiative, the Center for Community Health and Evaluation (CCHE) worked with HCA and the ACHs to develop an ACH “theory of change”, or model for how Healthier Washington envisions the ACHs will achieve their impact (Figure 1). See Appendix A for a detailed version.

Figure 1. ACH Theory of Change



CCHE has conducted an annual survey of regional stakeholders engaged in the ACHs to monitor their perceptions of ACH progress over time. To date, the survey has been administered in 2015 and 2016.

The survey data provide a snapshot of individual ACH participants' opinions and perspectives about how each of the nine ACHs are developing and functioning, including their areas of strength and opportunities for growth. Survey data are also being used to validate findings from other evaluation data sources, including interviews, meeting observations, site visits, and document review. Individual ACH survey results are shared with each ACH and HCA to inform their ongoing development.

## Key findings / Highlights

Overall, survey respondents indicate ACHs continue to develop well as coalitions for regional health improvement.

- Respondents reported high levels of satisfaction; two-thirds are very satisfied (15%) or satisfied (46%) with overall ACH development.
- Areas of strength across ACHs included: backbone organization activities, such as providing the organization and administrative support needed to main ACH operations; and having leaders who promote and support effective collaboration and bring the most needed skills and resources.
- Opportunities for growth included: engaging ethnically and racially diverse communities, engaging community members with opportunities for public comment or participation, and communicating effectively with the broader community. ACHs also have room for improvement related to implementing a sustainability strategy.

*Our ACH leadership and staff are committed to collaboration, true partnership, and transparency.*

In their open-ended responses, many respondents highlighted the need to further clarify governance structures, decision-making processes, and participant roles within the ACH. Respondents noted a need to increase the transparency of ACH decision-making for participants and the broader community.

Like last year, nearly all survey respondents agreed or strongly agreed that ACHs are making a positive contribution to health improvement and are a worthwhile use of their organization's time and resources. Participants described that in the next year of the ACH initiative, they hope to succeed in implementing State Innovation Model (SIM) projects and focus on achieving good stakeholder representation in the ACH. Participants suggested that Healthier Washington staff could further support their regional work by providing increased opportunities for cross-ACH learning and clarifying expectations and guidance for ACHs as they transition to new roles under Medicaid Transformation.

## Methods

ACH participants were asked to complete an online survey. It included rating 23 items about coalition functioning on a scale of: outstanding=4, good=3, adequate=2, needs improvement=1, and don't know=N/A. These items fell into five domains:

- member participation
- mission, goals, and objectives
- governance and operations
- backbone organization
- community engagement

There were nine additional items asking participants their level of agreement with regional impact statements, as well as four open ended questions about hopes, challenges and suggestions for improvement.

Responses were received from 472 of 920 ACH participants surveyed for a 51% response rate (compared to 391 of 824 ACH participants surveyed in 2015 with a 47% response rate). See Appendix B for more on survey methods, Appendix C for survey questions, and Appendices D and E for complete data tables.

## Characteristics of ACH participants

### Length of participation

A majority of survey respondents (63%) had participated in ACH activities for 1 year or longer; 27% participated more than 2 years<sup>1</sup>. Thirty-six percent of respondents participated in activities for 1 year or less (Figure 2). Ratings of ACH functioning did not differ significantly based on how long a participant had been involved with the ACH.

### Decision-makers

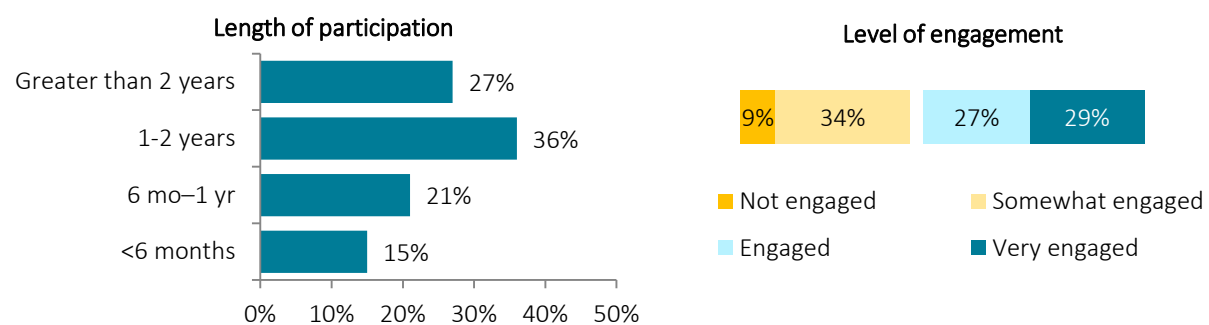
One third (33%) of respondents reported they were members of an ACH's decision-making body. For aggregate data across all ACHs, there was a statistically significant higher rating of ACH overall functioning from decision-makers compared to non-decision-makers.

### Level of engagement

Participants' self-reported level of engagement in their ACHs was split relatively evenly between the three response options (very engaged, engaged, somewhat engaged), with 27-34% in each. The remaining 9% of respondents said they were not engaged (Figure 2).

More engaged participants rated ACHs higher; there was a statistically significant higher rating of ACH overall functioning from engaged or very engaged respondents compared to those who are less engaged.

Figure 2. Respondent participation and engagement



## ACH strengths and opportunities for improvement

### Participant satisfaction

Overall, respondents were satisfied with the performance of their ACH, with over half indicating they were very satisfied (15%) or satisfied (46%) with the way their ACH was operating. There was a

<sup>1</sup> The 2016 version of the survey added a new response option: "greater than 2 years".

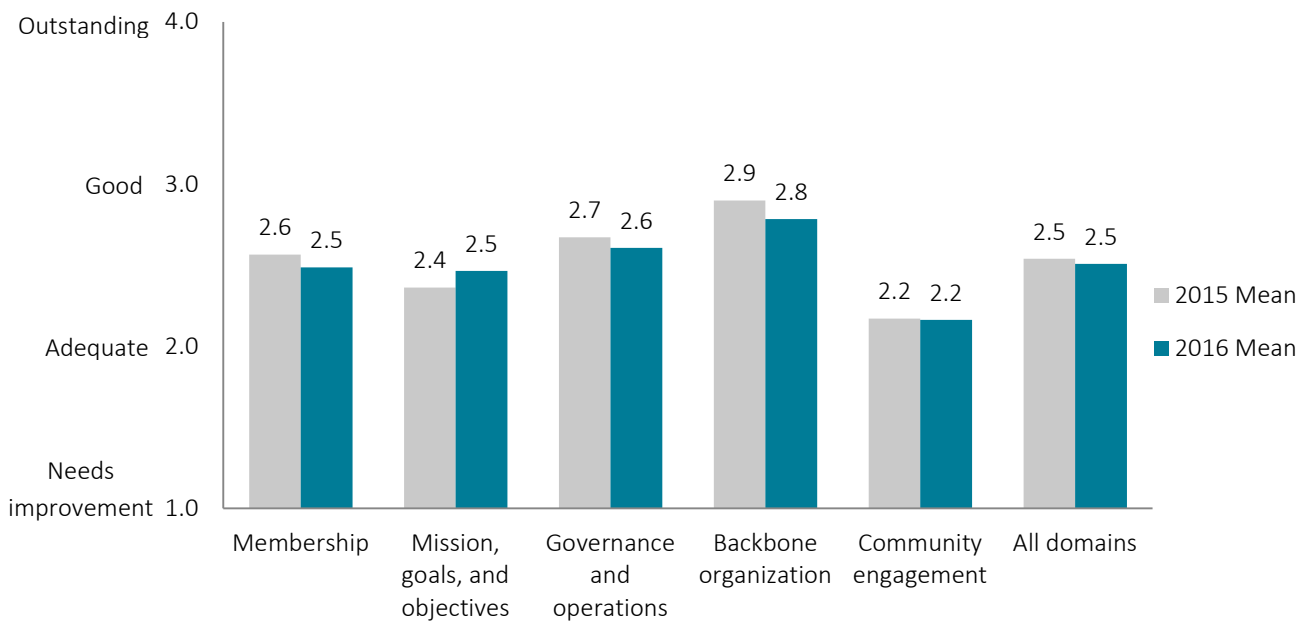
statistically significant higher rating of ACH overall functioning from those who were satisfied compared to those less satisfied.

### ACH coalition functioning in 2016

ACHs are developing capacity across multiple functions. The annual survey asked participants to rate their ACHs on five domains of coalition performance. Across ACHs, there were no statistically significant changes between 2015 and 2016 on domain averages. Respondents rated ACHs highest in the backbone organization domain (also highest in 2015) with a statewide average rating of 2.8, which corresponds to a score of *good* on the survey rating scale (Figure 3). Across all domains, the individual survey items with the highest proportion of respondents answering *outstanding* related to qualities of the backbone and leadership of ACH governance:

- Provides the organization and administrative support needed to maintain ACH operations and activities
- Has leaders who promote and support effective collaboration
- Has leaders who bring the skills and resources that our ACH most needs

Figure 3. Statewide average ratings of ACH functioning comparing 2015 and 2016



Community engagement continues to be the lowest rated domain, with a statewide average rating of 2.2, which corresponds to a score of *adequate* on the survey rating scale. Three of the four lowest rated individual survey items across all of the domains were related to community engagement, and received a *needs improvement* rating from over 38% of survey respondents:

- Engaging the broader community with participation opportunities
- Communicating effectively with the broader community
- Engaging ethnically and racially diverse communities in ACH activities

Executing a sustainability strategy was also rated low. Survey items rated lowest in 2016 were the lowest rated in 2015, as well.

## ACH ratings by domain

### Backbone organization: Key to building ACH capacity

The backbone domain received the highest average rating statewide, which at 2.8 corresponds to a *good* rating. This aligns with the focus areas of ACH work during the first and second years, including building operational capacity and infrastructure that depended on facilitation by backbone organizations. In 2016, ACHs had to select a regional health improvement project, a process that was also facilitated by backbone organizations.

ACH backbone organizations were rated well for all domain items, receiving a *good* or *outstanding* rating from at least 63% of respondents for the survey items listed below:

- Effectively providing support for collaboration
- Providing the administrative support needed for the ACH
- Separating [their] own agenda from the ACH's agenda

*I think the ACH staff are doing a good job. I especially appreciate when notes and information from a meeting I was unable to attend are sent out so I can remain engaged and informed.*

### Governance & operations: Developing capacity but uncertain of sustainability

The statewide average rating for the governance and operations domain was 2.6 across seven items, indicating a split between *adequate* and *good* on the survey scale. There was little change on this domain rating from 2015. However, this domain had two survey items with the highest proportion of outstanding ratings from across all the domains:

- Has leaders who promote and support effective collaboration
- Has leaders who bring the skills and resources that our ACH most needs

*The ACH is high performing for a newly evolving organization and mission. Trust in the ACH leadership is high.*

The ratings were lower for investing adequate resources into ACH operational capacity and executing a sustainability strategy, which indicates a continued opportunity for progress across ACHs. For example, 65% of respondents said their ACH's ability to execute a sustainability strategy was *adequate* or *needs improvement* and there were many *don't know* responses. These results are consistent with ratings in the 2015 survey, suggesting that ACHs are still developing core functions and clarifying their operations and priorities before planning for sustainability. There may be change in this domain next year as ACHs continue to work to align and refine governance structures in advance of the Medicaid Transformation Demonstration in 2017.

### ACH membership: Continuing to engage key stakeholders

The statewide average rating for the membership domain was 2.5, which corresponds to an *adequate* rating on the survey scale. There was little change on this domain from 2016. Respondents rated ACHs well in getting active engagement from key stakeholders, where 67% of respondents rated their ACH either *good* or *outstanding*.

Clearly defined roles for ACH members was rated lowest, with more than half of respondents rating this item *adequate* or *needs improvement*, suggesting ACHs have an ongoing opportunity to improve roles and clarify expectations for their stakeholders.

### Mission, goals & objectives: Strong shared vision but challenges with action planning

The mission domain had a statewide average rating of 2.5 across five items, which corresponds with *adequate* on the survey scale. Survey results are consistent with results from the 2015 survey.

One item in this domain, having a shared vision and mission, was rated highly compared to other items in this domain, with 60% of respondents rating it *good* or *outstanding*.

*The ACH staff and leadership are working hard to achieve their vision and purposes – the ability to be engaged and accomplish that is what will keep the ACH meaningful and an important vehicle for accomplishing the work.*

However, ratings for other items of this domain indicate room for improvement related to agreement on health priorities and collective ACH project: at least 43% of respondents said *adequate* or *needs improvement* for ACH progress made on their collective ACH project, having a realistic action plan for their collective ACH project, members investing adequate resources into the collective ACH project, and agreement on health priorities based on identified regional health needs.

### Community engagement: Opportunity for improvement remains

The community engagement domain received the lowest average rating statewide at 2.2, which corresponds to an *adequate* rating on the survey scale and is the same as the 2015 survey results. Results in this domain highlight a continued opportunity for improvement, such as strengthening relationships between stakeholders, and enhancing outreach and communications within their communities.

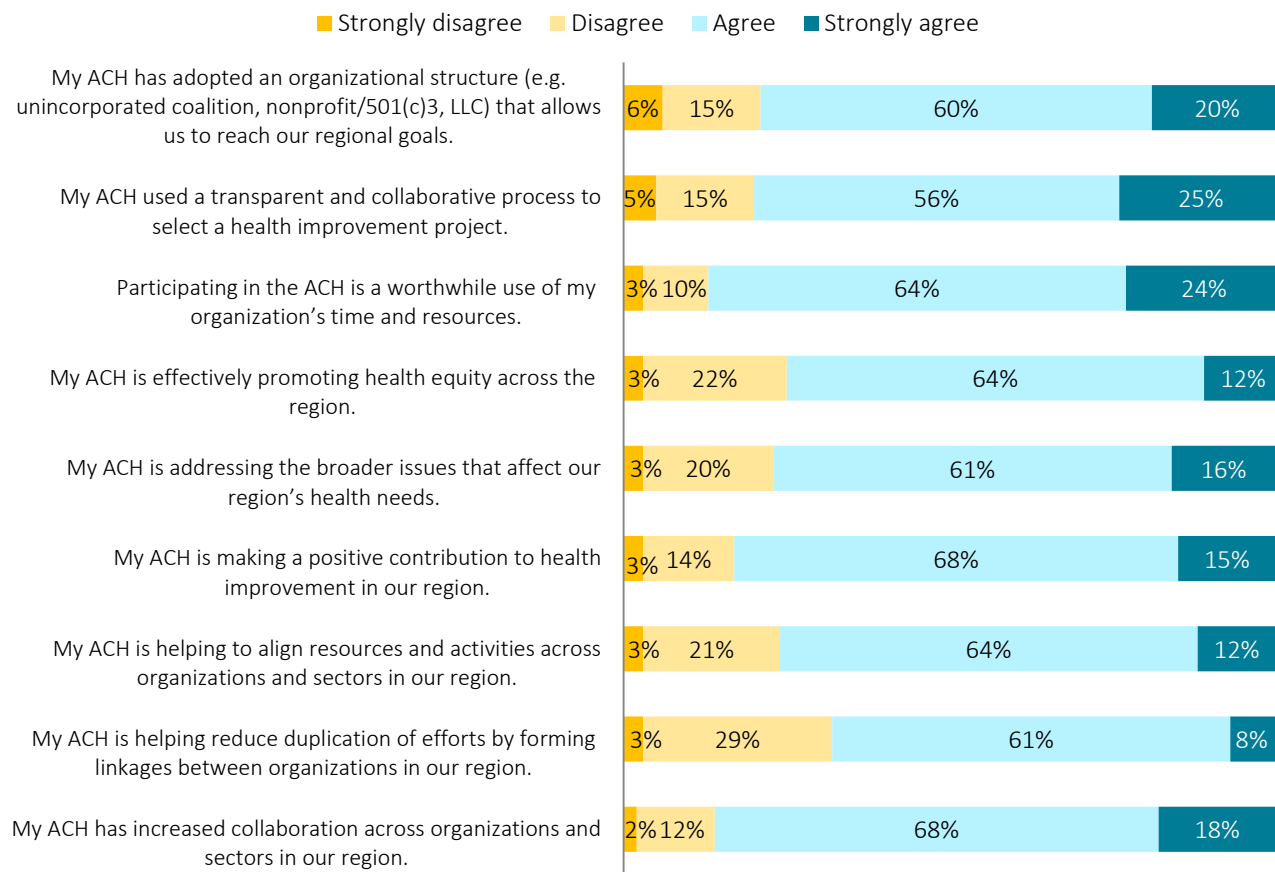
The highest rated item within the community engagement domain was ACHs having support from key community leaders. More than 55% rated performance in this area as *good* or *outstanding*, a higher percentage than in 2015 when this was also the highest rated item of the domain.

There were more respondents that rated ACHs engagement of ethnically and racially diverse communities low this year than in 2015. Close to half of respondents said ACHs *need improvement* when working with diverse communities. At least 37% of respondents also said their ACH *needed improvement* on communicating effectively with the broader community, engaging the broader community with participation opportunities.

## Participants agree ACHs are contributing to regional health improvement

Similar to last year, there was strong agreement among survey respondents that ACHs are making progress on key outcomes related to their ability to positively impact regional community health. Over 75% of respondents across the state *agreed* or *strongly agreed* to eight of nine items related to ACHs having positive effects in their region (Figure 4). There was slightly less agreement (69%) that ACHs are helping reduce duplication of efforts by forming linkages between organizations in our region.

Figure 4. Respondent agreement with ACH regional impact statements



### ACH participants identify hopes, concerns & opportunities

Respondents were asked four open-ended questions about their hopes, concerns, and suggestions for improving their ACH and the statewide ACH initiative. This format allows participants to provide more detailed information on next steps and areas for growth to support ACH development. The following summary includes overarching themes representing respondent feedback from a majority of ACHs. There was some variation in these responses by region.

#### Hopes & suggestions for upcoming work

In the next year of the ACH initiative, participants hope to succeed in implementing their chosen SIM regional health improvement projects and focus on achieving broad stakeholder representation.

*[Hope for] successful implementation of the SIM project. Selection of realistic projects that can be scaled and duplicated across the region—particularly rural areas.*

*[Hope to] provide a clear, detailed, transparent plan so our community can work collaboratively to make positive improvements and lower cost to achieve true population health.*

To do this, respondents highlighted the need to further clarify governance structures and member roles within their ACHs, finalize formal decision-making processes, and improve ACH transparency, both for

their members and the broader community. They identified increasing the opportunities for public comment and participation in the ACH as an important step forward.

*Develop more ways to share information with others not directly involved with the ACH.*

*There is too much decision-making going on in very small groups without a deep understanding of the service delivery system. Things go too fast, thereby the Board approves things without complete information. We need to build a transparent and well vetted process that has structure.*

### Concerns to keep in mind

Challenges that survey respondents elevated included navigating regional power dynamics—especially as increased resources become available to the ACHs through Medicaid Transformation. Respondents also identified maintaining stakeholder buy-in to the ACH initiative as a challenge. Furthermore, there were some concerns about building the governance and operational capacity necessary to respond to the health care transformation call to action under Medicaid Transformation.

*I am worried that it will be difficult for the ACH to keep balance of power between all of the involved entities.*

*I worry about the delicate balance of adequate representation on the board and being inclusive, versus reducing to a smaller number to be more nimble and make decisions more quickly.*

*Building necessary administrative and governance infrastructure to effectively carry out the waiver projects.*

### Suggestions for support from Healthier Washington

ACHs identified several ways Healthier Washington could further support their regional work, with a particular focus on clarifying expectations and guidance for ACHs.

*More clarity on HCA expectations for ACH development and consistency statewide.*

*Additional clarity of ACH roles and boundaries regarding fiscal management, strategic direction, and agency support.*

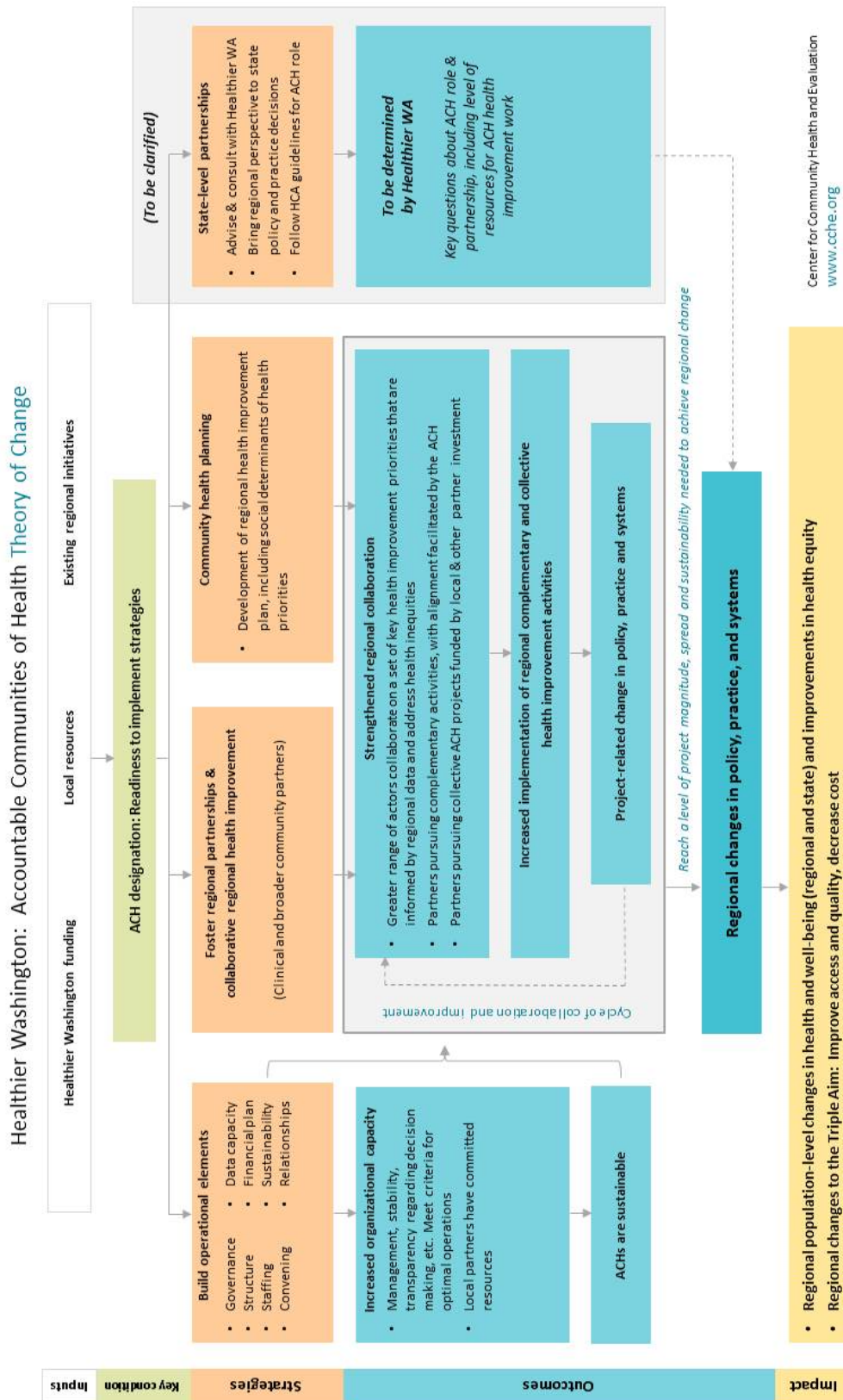
*This is meant to be a locally driven process but I believe we've floundered a little over the last two years in part because there has not been strong communication about how to proceed...strong direction where it can be given is very helpful.*

### Conclusions and using survey data to facilitate learning across ACHs

Survey findings indicate there are key areas where ACHs are making progress as a cohort, particularly in backbone organization activities, such as providing the organizational and administrative support needed to main ACH operations. Overall, compared to 2015 survey results there was not a great deal of change in how participants rated ACHs this year. Respondents identified areas of growth and gave concrete suggestions for improvement as ACHs prepare for upcoming work in 2017. These findings will be used to guide support for the ACHs moving forward and will help ACHs engage in continuous learning as individual regions and as a statewide cohort.



## Appendix A: Theory of change for ACH evaluation



## Appendix B: Methods and response rates

### Survey design

Survey questions were drawn from validated tools and existing surveys that assess coalition functioning. The evaluation team revised the questions to fit the context of ACHs, their role within Healthier Washington, and the evaluation's Theory of Change – a framework for how the ACHs will grow into functioning and sustainable coalitions (Appendix B).

The survey (Appendix C) included questions in the following sections:

- **Respondent characteristics** – Role in ACH, length of participation, level of engagement, and satisfaction rating. ACH role categories were tailored to each ACH's governance structure.
- **ACH coalition functioning** – 23 items categorized into five domains, including: ACH membership; mission, goals & objectives; governance & operations; backbone organization; and, community engagement. Items were rated on a scale of Outstanding, Good, Adequate, Needs improvement, and Don't know.
- **Overall feedback** – Nine questions on regional benefits of the ACH, rated on an *agree/disagree* scale. Two additional items were added to the 2016 version to capture ratings on activities that occurred in 2016.<sup>2</sup> Survey concluded with four open-ended questions asking about ACH participants' hopes, concerns, and suggestions for their ACH and the statewide ACH initiative.

### Data collection

The survey was administered using SurveyMonkey and invitations to the survey were distributed to ACH participants via email. Distribution lists were provided by each ACH's backbone organization; inclusion in the list was at the discretion of each ACH, but ACHs were encouraged to identify decision-makers and key council, committee, or workgroup members.

Responses were collected from September 30 – October 28, 2016, with regular reminder emails sent from SurveyMonkey and ACH backbone staff.

### Response rates

A total of 920 ACH participants were included in this year's sample (n=824, 2015). The number by ACH ranged from 21 to 378. A total of 472 responses were received for a 51% response rate (47%, 2015), with individual ACH response rates ranging from 41% to 87%.

### Analysis

Average scores were computed for each of the five domains of ACH coalition functioning, both overall and by ACH. These domain scores provide an overall picture of areas of strength and weakness for the ACHs. Average scores were compared between 2015 and 2016 and t-tests were used to determine statistically significant change between years. Chi-squared analyses were used to understand trends in ratings by participant characteristics (decision-maker, level of engagement, length of participation, level

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<sup>2</sup> New survey items added in 2016: *My ACH used a transparent and collaborative process to select a health improvement project; My ACH has adopted an organizational structure (e.g. unincorporated coalition, nonprofit/501(c)3, LLC) that allows us to reach our regional goals.*

of satisfaction). Comments from the open-ended questions were coded and analyzed to identify themes, including statewide themes for each survey question and regional themes for each ACH.

Given the differences in the participant lists provided—some very inclusive, others limited to decision-makers—scores by individual ACH are not presented. Ratings by ACH are shared with individual ACHs to facilitate their coalition development.

### Data characteristics

The survey rating scale was used to calculate average scores for each survey item where outstanding=4, good=3, adequate=2, needs improvement=1, and don't know=N/A.

When ACH participants responded “Don't know,” to a survey item, that response was treated as missing data when averaging the scores for each survey item and domain. Respondents who said they were engaged or very engaged in ACH activities, were decision-makers, had participated for longer than 1 year, and who were satisfied or very satisfied selected “Don't know” less often; this finding was statistically significant.

## Appendix C: Survey questions

Thank you for responding to the 2016 ACH participant survey.

Completing the survey will take about 10 minutes. Your responses are confidential. A summary of survey results will be shared with ACH backbone organizations and participants.

Please direct questions to Sarah Evers (evers.s@ghc.org) at CCHE.

1. What is your role in the ACH? (mark all that apply, response options differed by ACH)

- Board
- Leadership Council
- County coalition

2. How long have you participated in ACH activities?

- Less than 6 months
- 6 months – 1 year
- 1-2 years
- 2 or more years

3. How would you rate your engagement in the ACH in the last year?

- Very engaged
- Engaged
- Somewhat engaged
- Not engaged

### Membership

4. Please rate the extent to which your ACH currently has...

	Outstanding	Good	Adequate	Needs improvement	Don't Know
Active engagement from key stakeholders from multiple sectors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clearly defined roles and responsibilities for ACH members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trust among members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Members operating in the shared interest of the ACH versus their own personal/organization interest.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Mission, goals & objectives**

5. Please rate the extent to which your ACH currently has...

	Outstanding	Good	Adequate	Needs improvement	Don't Know
A shared vision and mission.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Agreed on health priorities based on identified regional health needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A realistic action plan for at least one collective ACH project.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Made progress on at least one collective ACH project.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ACH members that are investing adequate resources into the <u>collective ACH project(s)</u> .	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Governance & operations**

6. Please rate the extent to which your ACH currently...

	Outstanding	Good	Adequate	Needs improvement	Don't Know
Involves all members in the decision-making process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has an effective governance structure to make decisions and plan activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communicates information clearly among members to help achieve ACH goals (via meetings, emails, calls, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has leaders who bring the skills and resources that our ACH most needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has leaders who promote and support effective collaboration.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has ACH members that are investing adequate resources into <u>ACH operational capacity</u> .	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is executing a sustainability strategy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Backbone organization**

7. Please rate the extent to which your ACH’s “backbone organization” currently...

	Outstanding	Good	Adequate	Needs improvement	Don't Know
Effectively provides support for collaboration among ACH member organizations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provides the organization and administrative support needed to maintain ACH operations and activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Separates its own organizational agenda from the agenda of the collective ACH.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Community engagement**

8. Please rate the extent to which your ACH currently...

	Outstanding	Good	Adequate	Needs improvement	Don't Know
Has support from key community leaders for the ACH's mission and activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communicates effectively with the broader community about the ACH mission and activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engages the broader community with opportunities for public comment or participation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engages ethnically and racially diverse communities in ACH activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**ACH regional Impact**

9. Please indicate how much you agree or disagree with each statement...

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
My ACH has increased collaboration across organizations and sectors in our region.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH is helping reduce duplication of efforts by forming linkages between organizations in our region.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH is helping to align resources and activities across organizations and sectors in our region.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH is making a positive contribution to health improvement in our region.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH is addressing the broader issues that affect our region's health needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH is effectively promoting health equity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participating in the ACH is a worthwhile use of my organization's time and resources.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH used a transparent and collaborative process to select a health improvement project.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My ACH has adopted an organizational structure (e.g. unincorporated coalition, nonprofit/501(c)3, LLC) that allows us to reach our regional goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Please indicate your overall level of satisfaction with how your ACH is currently operating:

- Very satisfied
- Satisfied
- Somewhat satisfied
- Not satisfied

11. What do you hope the ACH will accomplish in your region in the next year?

12. Are there any challenges you are worried the ACH will encounter in the next year?

13. Do you have suggestions about how to improve your ACH?

14. Do you have suggestions about how to improve the statewide ACH initiative?

## Appendix D: Survey data, individual item results

Please note:

- Percentages may not add up to 100% due to rounding.
- The distribution of ratings (i.e. the proportion of respondents rating survey items *outstanding*, *good*, *adequate*, *needs improvement*) does not include those who responded *don't know*. In calculating the ratings of each survey item, *don't know* responses were treated as missing values, so they did not skew ratings of survey items.
- *Don't know* response rates for individual survey items are included in this appendix as extra information, for interested readers. There were varying levels of *don't know* responses throughout the survey, and some questions where a quarter or more respondents selected *don't know*, particularly among the regional impact questions.

Length of participation	N (total=447)	% respondents
<6 months	69	15%
6 months – 1 year	95	21%
1 -2 years	162	36%
>2 years	121	27%

Level of engagement	N (total=456)	% respondents
Very engaged	133	29%
Engaged	124	27%
Somewhat engaged	156	34%
Not engaged	43	9%

Overall satisfaction	N (total=406)	% respondents
Very satisfied	62	15%
Satisfied	187	46%
Somewhat satisfied	111	27%
Not satisfied	46	11%

Membership	N	Needs improvement	Adequate	Good	Outstanding	Don't know
Active engagement from key stakeholders	406	16%	17%	46%	21%	8%
Clearly defined roles	396	26%	30%	36%	8%	11%
Trust among members	381	17%	28%	42%	13%	14%
Members operating in the shared interest of the ACH	381	21%	28%	40%	12%	14%

Mission, goals & objectives	N	Needs improvement	Adequate	Good	Outstanding	Don't know
Shared vision and mission	398	20%	21%	44%	16%	8%
Agreed on health priorities based on identified regional health needs	391	21%	25%	37%	17%	10%



Realistic action plan for one ACH project	378	21%	26%	34%	19%	13%
Made progress on a collective ACH project	361	20%	26%	39%	16%	17%
Members are investing resources in collective ACH projects	328	25%	32%	36%	7%	24%

<b>Governance &amp; operations</b>	<b>N</b>	<b>Needs improvement</b>	<b>Adequate</b>	<b>Good</b>	<b>Outstanding</b>	<b>Don't know</b>
Involves all members in decision-making	382	17%	25%	37%	21%	9%
Has an effective governance structure	376	18%	24%	39%	19%	11%
Communicates information clearly among members	400	14%	23%	37%	26%	5%
Has leaders who bring skills and resources	391	12%	19%	40%	29%	8%
Has leaders who promote and support effective collaboration	393	11%	21%	38%	31%	7%
Members are investing resources in ACH operational capacity	333	25%	29%	36%	11%	21%
Executing a sustainability strategy	338	38%	28%	26%	9%	20%

<b>Backbone organization</b>	<b>N</b>	<b>Needs improvement</b>	<b>Adequate</b>	<b>Good</b>	<b>Outstanding</b>	<b>Don't know</b>
Effectively provides support for collaboration	382	16%	18%	42%	24%	9%
Provides administrative support needed for the ACH	376	11%	21%	36%	32%	11%
Backbone organization separates its own agenda from the ACH	357	15%	22%	38%	25%	15%

<b>Community engagement</b>	<b>N</b>	<b>Needs improvement</b>	<b>Adequate</b>	<b>Good</b>	<b>Outstanding</b>	<b>Don't know</b>
ACH has support from key community leaders	369	18%	26%	44%	11%	12%
Communicates effectively with the broader community	367	39%	26%	24%	11%	12%
Engages the broader community with participation opportunities	358	41%	26%	22%	11%	14%
Engages ethnically and racially diverse communities	347	37%	27%	26%	11%	17%

ACH regional impact	N	Strongly disagree	Disagree	Agree	Strongly agree	Don't know
Increased collaboration in our region	359	2%	12%	68%	18%	14%
Helping reduce duplication of efforts	321	3%	29%	61%	8%	23%
Helping to align resources	326	3%	21%	64%	12%	22%
Making a position contribution to regional health improvement	321	3%	14%	68%	15%	23%
Addressing the broader issues that affect regional health needs	338	3%	20%	61%	16%	18%
Effectively promoting health equity across the region	314	3%	22%	64%	12%	24%
Worthwhile use of my organization's time and resources	364	3%	10%	64%	24%	12%
Used transparent and collaborative process to select a project	348	5%	15%	56%	25%	16%
Adopted organizational structure that allows us to reach our regional goals.	302	6%	15%	60%	20%	27%

## Appendix E: Survey data, individual items comparing 2015 to 2016

ACH Functioning Domains	Mean 2015	Mean 2016	% Difference
<b>Membership</b>			
Active engagement from key stakeholders	2.8	2.7	-2.0%
Clearly defined roles	2.3	2.3	-3.0%
Trust among members	2.6	2.5	-2.0%
Members operating in the shared interest of the ACH	2.5	2.4	-4.2%
<b>Mission, goals &amp; objectives</b>			
Shared vision and mission	2.7	2.6	-3.5%
Agreed on health priorities based on identified regional health needs	2.5	2.5	1.2%
Realistic action plan for one ACH project	2.2	2.5	12.9%
Made progress on a collective ACH project	2.3	2.5	11.3%
Members are investing resources in collective ACH projects	2.2	2.2	2.9%
<b>Governance &amp; operations</b>			
Involves all members in decision-making	2.8	2.6	-5.6%
Has an effective governance structure	2.7	2.6	-2.6%
Communicates information clearly among members	2.8	2.8	-3.4%
Has leaders who bring skills and resources	2.9	2.9	-1.0%
Has leaders who promote and support effective collaboration	3.0	2.9	-3.4%
Members are investing resources in ACH operational capacity	2.3	2.3	0.9%
Executing a sustainability strategy	2.1	2.1	-1.8%
<b>Backbone organization</b>			
Effectively provides support for collaboration	2.9	2.7	-4.9%
Provides administrative support needed for the ACH	2.9	2.9	-1.5%
Backbone organization separates its own agenda from the ACH	2.9	2.7	-5.9%
<b>Community engagement</b>			
ACH has support from key community leaders	2.5	2.5	-1.2%
Communicates effectively with the broader community	2.0	2.1	1.8%
Engages the broader community with participation opportunities	2.0	2.0	1.0%
Engages ethnically and racially diverse communities in ACH activities	2.2	2.1	-2.5%
<b>ACH regional impact</b>			
Increased collaboration in our region	3.1	3.0	-1.5%
Helping reduce duplication of efforts	2.8	2.7	-1.0%
Helping to align resources	2.9	2.9	-1.2%
Making a positive contribution to regional health improvement	3.0	2.9	-1.0%
Addressing the broader issues that affect regional health needs	3.0	2.9	-3.6%

Effectively promoting health equity across the region	2.9	2.8	-1.6%
Worthwhile use of my organization's time and resources	3.2	3.1	-2.1%
Used transparent and collaborative process to select a project <sup>3</sup>	–	3.0	–
Adopted organizational structure that allows us to reach our regional <sup>4</sup> goals.	–	2.9	–

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<sup>3</sup> Data from 2015 not available because items on 2016 survey only

<sup>4</sup> See above