



ACEs Work Group Meeting

Meeting Summary, 10/17/2017

Support and Backbone Staff: Jennifer Brackeen - *CHOICE*, Christina Mitchel- *CHOICE*, Michael O’Neill - *CHOICE*, Megan Moore- *CHOICE*, Shannon Linkous - *CHOICE*

In Attendance: Katie Strozyk – *Lewis County Public Health Department*, Christina Garcia - *Molina*, Mike Hickman - *ESD 113*, Afsaneh Rahimian - *Seamar*, Mitzi Hemp - *Seamar*, Nancy Rosales - *Seamar*, Greg Endler – *Behavioral Health Resources*, Gretchen Thaller – *Thurston County Public Health*, Apple Martine - *Thurston County Public Health*, Kyle Roesler - *CHOICE*, Laura Alfani- *Department of Early Learning*, Gary Burris – *Child Care Action Council*

I. Welcome and Introductions

Jennifer Brackeen facilitated introductions and reviewed the objectives on the agenda, which were to review the project application submittal, review the 2018 project work plan, and discuss a required assessment for the project plan.

II. Review Project Plan Submittal

Jennifer started by thanking all the CPAA Partners for their participation in the project plan proposal. Utilizing all the partner feedback, CPAA was able to create a very strong proposal. She emphasized that this was a group effort and CPAA could not have been successful without their partners.

The CPAA team successfully submitted the project plan November 16, 2017, to the Health Care Authority (HCA). The HCA has hired an independent assessor to score each project area and provide write backs that CPAA can use to improve the scores. There will be two write back periods from December through January, and CPAA will reach out to all of their partners to gain their input as well. The write back process will determine if there are any gaps in the project area that have room for improvement. The final application is due January 31st.

The final scores of the application will determine how much funding the CPAA earned. If the overall score is a 75, then the CPAA will be awarded 75% of the available funds. From there, the finance committee will develop a funding methodology for providing funding and allocations. Over the five-year period, the first two years will be based fully on Pay for Reporting. Over the next three years, the funding will start transitioning to Pay for Performance instead.

Although the project plan has been submitted, Jennifer highlighted that it is not too late to still submit an RFQ. Those are used to share ideas and express interests amongst partners. Jennifer also mentioned that the HCA is requiring CHOICE to collect EIN numbers for any partnering providers that submitted an RFQ. This does not guarantee any funding because no final decisions have been made, but the HCA needs the information by December 15th so an email requesting partner information will be sent out shortly.



III. 2018 Project Work Plan

Jennifer shared the specific milestones that must be completed. The group must start the planning process, conduct an environmental scan/ gap assessment, finalize target populations, determine partnering providers, and outline the roles and responsibilities of everyone involved.

Jennifer shared that CPAA wants to focus on the assessment piece first because they believe they can develop that and get it out rather quickly. She asked the group to provide their feedback and ideas for an assessment.

Ideas for the assessment:

- Region specific
- Find the gaps that are currently in our region and discover the need within our region so we know how to allocate our resources affectively
- Larger organizations need 6-8 weeks to respond
- Need to start with milestone of identifying and engaging implementation partners right away because it will be time consuming
- Wanted to send out a single survey but questions are too specific to different organizations
 - Could create a skip option for questions that do not apply to the surveyor

Should there be one large survey or focus groups?

- Not one large general survey
- Survey is limited to feedback, and focus groups are too specific
- One suggestion is to interview key stakeholders from each organization with pre-generated questions
- Another suggestion is to categorize by sector such as medical, behavioral health, etc. to see where questions can be universal amongst all project areas
- The less narrative in a survey, the more quantified data

How should the assessment be done?

- Easy access to all questions in the survey at once
- Online
- Quick 5-7 minutes

How do we identify target providers and organizations to receive assessments?

- Look at what coalitions exist within the community and their resources
- Assess expanding existing programs vs. startup of new programs
 - Can expand Home Visiting Programs
 - ACEs mitigation through schools in rural communities

Who should the survey go to?

- Educational institutions



- Domains around ACEs- behavioral health, education, housing, etc.

What questions do we have of our partners and people in the community during these surveys?

- Look what other ACHs are asking
- Ask questions that are specific to Maternal and Child Health
- How many of who do we need? Nurses, parents as teachers, etc.
- What is the organization's track record on getting the outcomes required for payment in year 3 in the survey, and return of investment?
- What is the gap in provider capacity- infrastructure, staffing need, etc.?

IV. Next Steps & Closing

- Next meeting Wednesday December 13, 3:15- 4:15pm
 - Teleconference: +1 (786) 535-3211, Access Code: 978-213-053
- Will ask for feedback on write back process from the HCA to strengthen project area
- In January, will start finalizing assessment approach, determine domain 1 investments, and finalize target populations