



**Meeting Agenda**

**Date: Tuesday, May 3, 2016**      **Time: 1:00pm-2:30pm**  
**Location: Riverside Hotel - Aspen Rm (1<sup>st</sup> Floor)**      **Call In: 1-571-317-3122,**  
**#445-965-021 – Audio Pin 4**

**Next Meeting: Tuesday, June 7, 2016**

*Mission: To organize healthcare stakeholders by providing a structured forum for sharing valuable knowledge, finding common solutions, and identifying resources to improve health outcomes, improve quality and patient experience of care, and to lower costs of care in the region.*

Agenda Item	Outcome	Process	Person
Overview of Health Collaboratives 1:00-1:30	Improve knowledge of other structures and goals of national health collaborative efforts	Presentation	Craig Nolte
ER/SHIP Cohort communication 1:30-1:50	Identify and address barriers, next steps	Discussion – update from St. Luke’s and St. Al’s liaisons	Gina Pannell Megan Stright Dr. Beauregard Dr. Watts
Additional Cohort 1 Priorities/community needs 1:50-2:20	Increase knowledge of Cohort 1 PCMH priorities  Identify areas of CHC Support  Subgroups needed?	Discussion of preliminary clinic needs -Behavioral Health Integration -Referral Tracking/Management	Gina Pannell
Wrap-Up 2:20-2:30	Identify CHC member assignments/tasks	Action Item Review	Gina Pannell



# Top 10 Characteristics of Successful Health Collaboratives

Craig Nolte, Regional Manager

Federal Reserve Bank of San Francisco

# Top 10 Characteristics

## #1 Getting Started

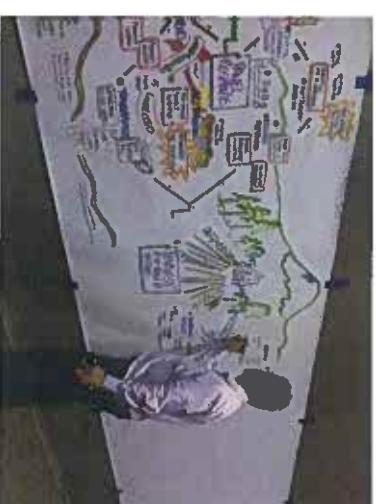
- Research major health disparities by HC area
- Upstream causes?
- Hospital goals?
- Hold small “thought leaders” meeting, separate sector meetings
- Draft concept paper



# Top 10 Characteristics

## #2 Convene Key Stakeholders

- Cross-sector, inclusive
- Major health disparities
- Social determinants
- Examples
- Collective impact
- Empower local group decide on projects, goals
- Incentives



# Top 10 Characteristics

## #3 Follow-up Meeting

- Governance
- Deadlines, accountability
- Future meetings – how often, where, time
- Refine goals, strategy, metrics
- Name for collaborative Logo? (branding)



# Top 10 Characteristics

## #4 Adopt an Effective Structure

- Consider separate committees:
  - A. Projects
  - B. Public policy
  - C. Sustainability
- Recruit additional key organizations/agencies if necessary



# Top 10 Characteristics

## A. Projects Committee

- ❑ Goal, metrics, strategy
  - Accidental injury
  - Complete streets, speed limits/lowering methods
  - Increase #insured
  - Increase #individuals with medical health homes
  - Low-income housing developments



# Top 10 Characteristics

## B. Public Policy Committee

- Education of elected officials
- Smoking/vapor ordinances
- Food awareness - calories
- Schools – exercise, fresh foods
- Local plans include health impact assessment
- School based initiatives, health centers





# Top 10 Characteristics

## C. Sustainability Committee

- Foundations, hospitals (local, regional, national)
- Health impact assessments
- Centers for Medicare and Medicaid Services (CMS)
- Workshops for employers
- Insurance companies
  - Redirect ED FFs to lower-cost providers, better care



# Top 10 Characteristics

## #5 Projects

- Look for “low-hanging fruit”
- Balance upstream initiatives with immediate impact activities
- Look for projects that do not have significant expenses compared to potential return
- Avoid being too bureaucratic



# Top 10 Characteristics

## #6 Network with Other Health Collaboratives

- Washington State's Accountable Communities of Health (9)
- Alaska Community Health Improvement Collaborative
- Idaho Regional Health Collaboratives (7)
- Others across the country...



# Top 10 Characteristics

## #7 Engage the private sector

- Workplace health and wellness programs
- Note employers with high percentage of LMI individuals
- Committee? Workshop? Meetings?
- Chamber of Commerce



# Top 10 Characteristics

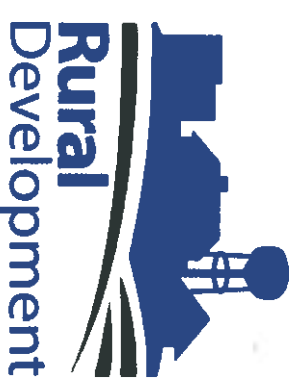
## #8 Partner with Financial Institutions

Hospitals	Banks
Patient Protection & Affordable Care Act	Community Reinvestment Act
Better health outcomes ..... Triple Aim	Access to credit, CD
CHNAs – health needs	Performance context
->High needs	->LMI

# Top 10 Characteristics

## #9 Align Resources with State & Federal Agencies

- Identify common goals and help identify potential solutions, resources
- Communicate with state legislature, elected officials
- Engage Federal agencies, national organizations
- Circulate new research



# Top 10 Characteristics

**#10 Celebrate Successes!!!!**



# FRBSF Community Development

- Research & Publications
  - Magazines, Working Papers
  - Books
- National Programs
  - Health
  - Native Communities
  - CRA
- Regional Initiatives
  - Economic Development
  - Asset Building
  - Affordable Housing
  - Healthy Communities
  - Workforce Development
- Approximately 150 convenings/year







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Craig Nolte, Regional Manager

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