Joining Forces to Improve Health Outcomes in Metro Atlanta

Denver Public Health Grand Rounds
March 4, 2015

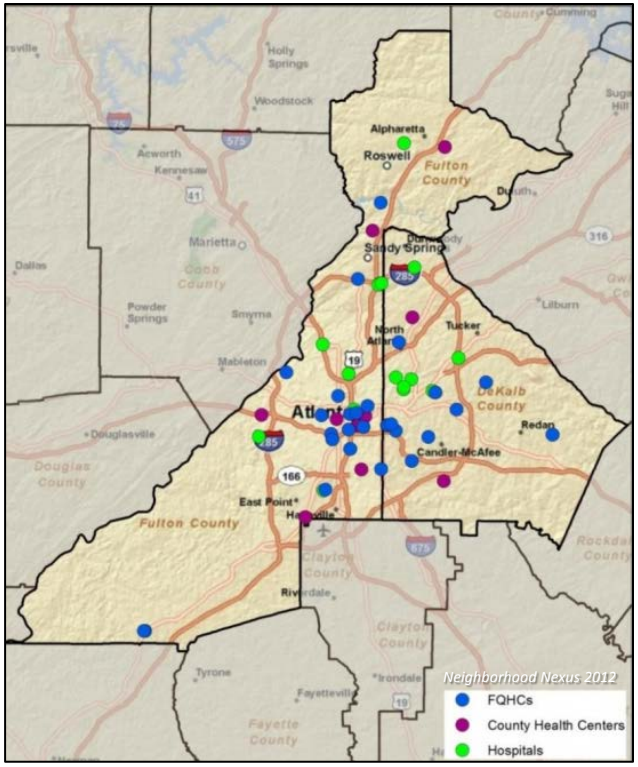
Karen Minyard

ARCHI

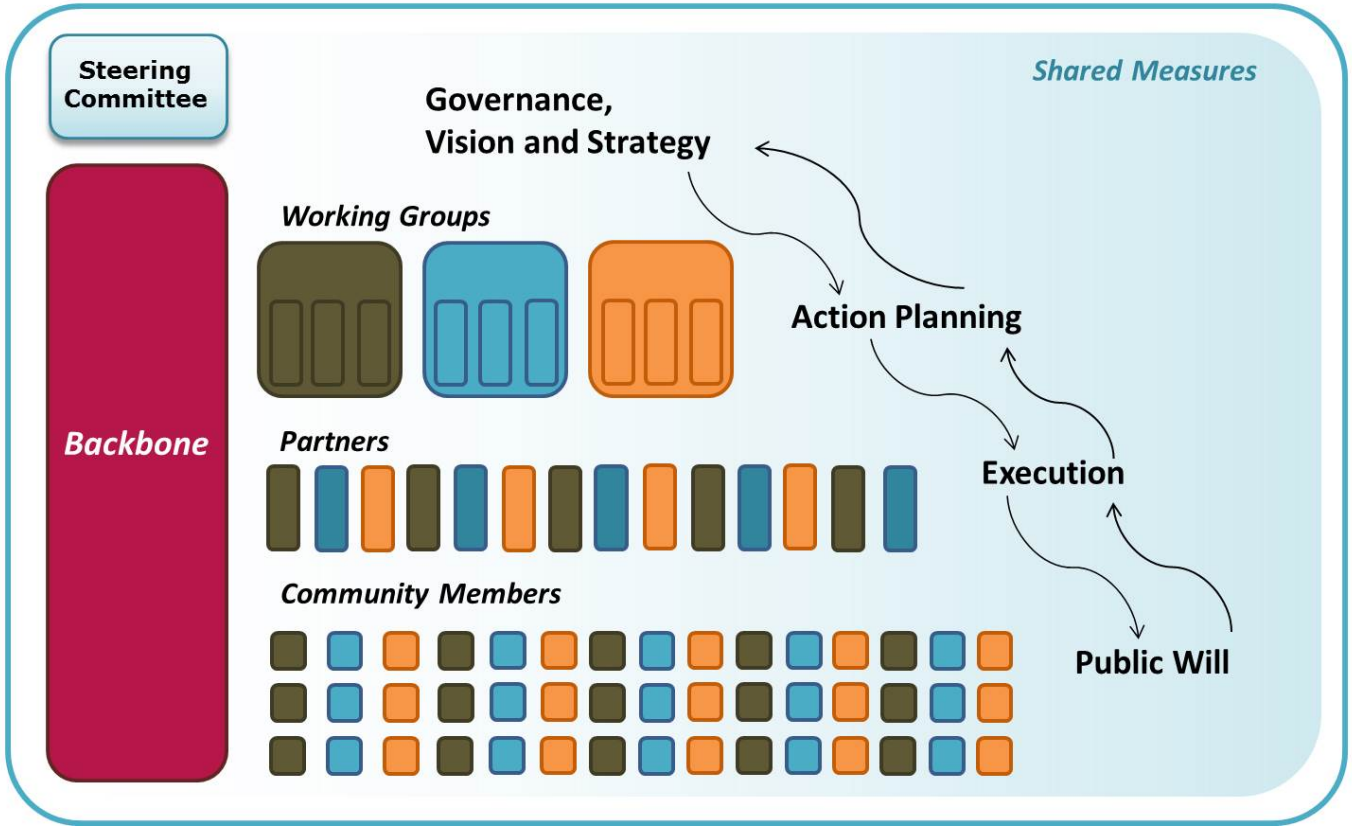
What is the Atlanta Regional Collaborative for Health Improvement?

Problem

Fulton and
DeKalb Counties



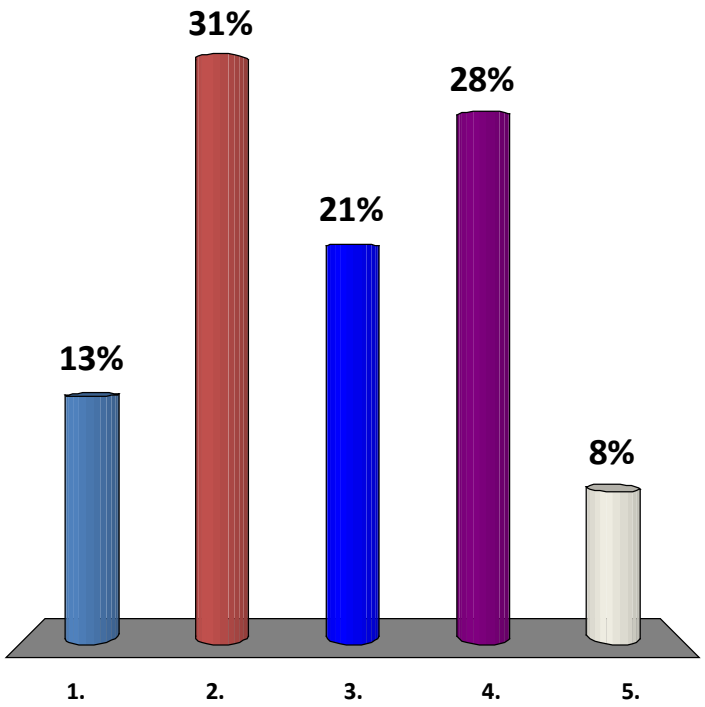
Structuring Efforts as "Cascading Levels of Linked Collaborative Work" Critically Enables Collective Seeing, Learning and Doing



ARCHI Goals

Which goal should be prioritized for work to begin immediately?

1. Build alignment in Atlanta toward the ARCHI priorities
2. Align ARCHI partnership and resources
3. Build financial investment in ARCHI
4. Develop infrastructure to support ARCHI
5. Evaluation



ARCHI Areas of Focus

- Stewardship
- Strategy
- Financing

Stewardship

Stewardship

Eight Design Principles:

1. Clearly defined boundaries
2. Rules adapted to local conditions
3. Collective decision making process
4. Monitoring by those involved
5. Graduated sanctions for rule violators
6. Cheap and accessible conflict resolution
7. Power recognized by higher-level authorities
8. Organization in layers of nested enterprises

While Each Collective Impact Initiative Evolves Based on Local Context, These Four Phases Provide a General Guide to Thinking about an Initiative's Maturity

Components for Success	*Phase I* Pre-Launch	*Phase II* Initiate Action	*Phase III* Organize for Impact	*Phase IV* Implementing and Sustaining Impact
Governance and Infrastructure	Convene community stakeholders	Identify champions and form cross-sector Steering Committee	Create backbone infrastructure (backbone function, work groups, other collaborative processes)	Facilitate collaboration across groups; refine structure as needed
Strategic Planning	Hold dialogue about issue, community context, and available resources	Map the landscape and use data to make case; Begin to frame common agenda	Create common agenda (common goals and strategic priorities)	Support implementation (alignment of partners to goal and strategies)
Community Involvement	Facilitate community outreach specific to goal	Engage the community to help frame common agenda	Engage community and build public will around common agenda	Continue engagement and conduct advocacy
Evaluation And Improvement	Determine if there is consensus/urgency to move forward	Analyze baseline data to ID key issues and gaps	Establish shared metrics (indicators, measurement, and approach)	Collect, track, and report progress (process to learn and improve)

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Stewardship

Four Kinds of Leadership Groups:

- Decision-making Group
- Coordinating Group
- Consultative Group
- Information-sharing and Alignment Group

Ruth Wageman, Harvard, **Building Great Leadership Teams for Complex Problems**

Stewardship

Key reflections for determining type(s) of group you want to be:

- Not just “all of these” but which ones, for what leadership functions?
- What decisions—focus, strategy, priorities—are shared and done by consensus? For which will we authorize a small group?
- What are some priorities/outcomes for which it makes most sense to combine our resources and coordinate initiatives?
- What are some key challenges that different leaders or organizations face, for which advice and robust discussion would be especially valuable?

Ruth Wageman, Harvard, **Building Great Leadership Teams for Complex Problems**

Stewardship

Collaboration Questions:

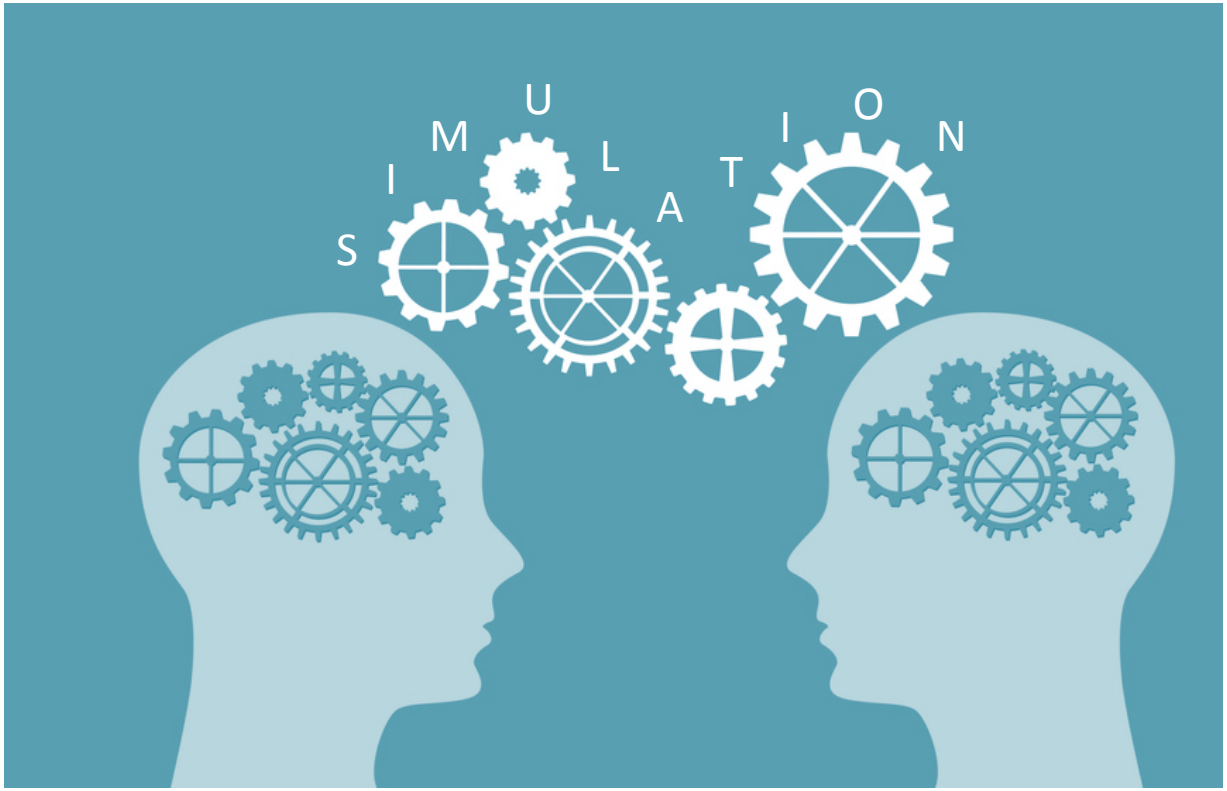
- Do we agree what kind of collaborative we are going to be?
- Do we have a compelling shared purpose for this collaborative?
- Are the right people involved?
- Have we built the kinds of structures that allow this group to do it's work?
- Have we identified and secured the resources we need to work together
- Have we built an evaluation and learning process to enable course correction and improvement over time

Stewardship

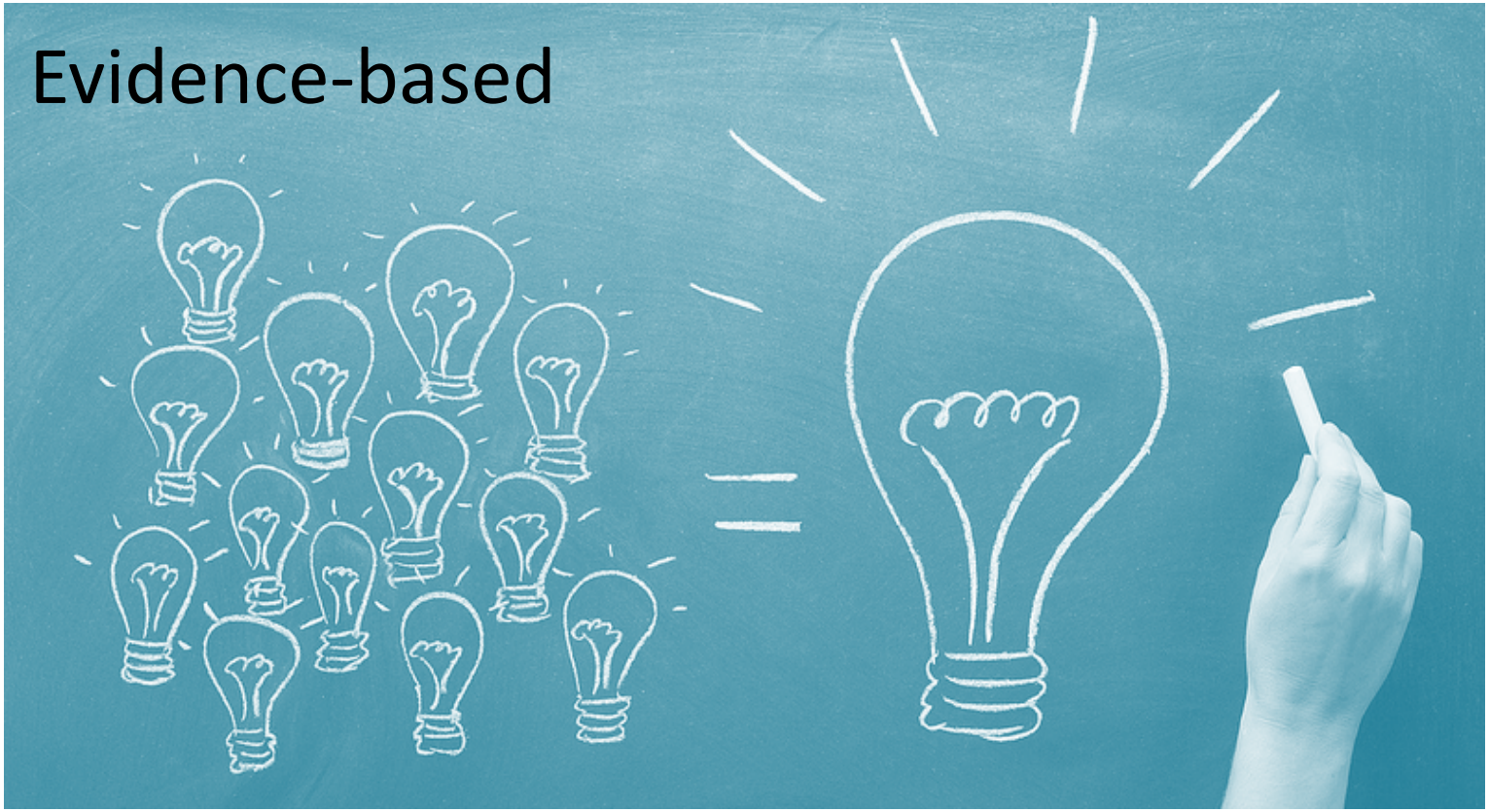
Agreements:

- Partners
- Steering Committee
- Executive Leadership Organizational Teaming Agreement

Strategy



Strategy



ReThink Health

Strategy

ReThink Health

Intervention Options for Simulation Scenarios

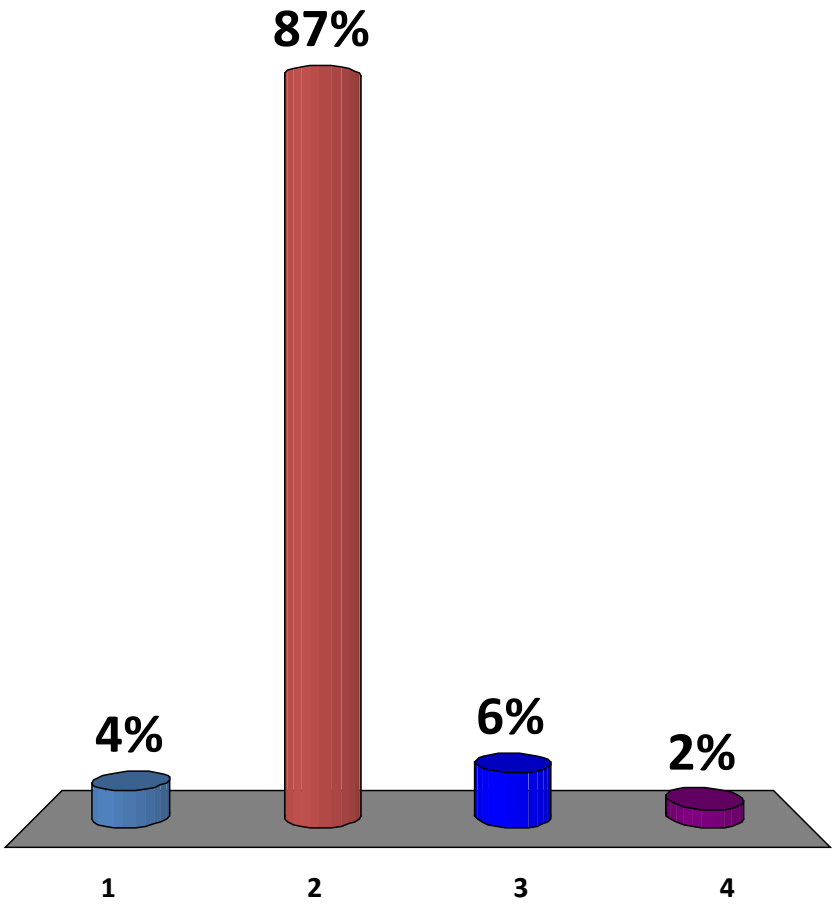
The table below shows where the direct effects of each intervention concentrate.

http://www.RethinkHealth.org/Dynamics

RISK	Behaviors Environ hazards	Crime	Pathways to advantage (family; student)
CARE	Prev/chronic Mental illness	Self-care	Hospital infections
CAPACITY	PCP efficiency	Recruit PCPs (general; FQHC)	Hospital efficiency
COST	Pre-visit consult Medical homes	Coordinate care Shared decisions Generic drugs	Post-discharge care Malpractice Hospice
TRENDS	Uninsurance Local economy	Primary care slots for Disadvantaged	Inflation rate
FUNDING	Innovation fund	Capture & Reinvest	Contingent Global Payment

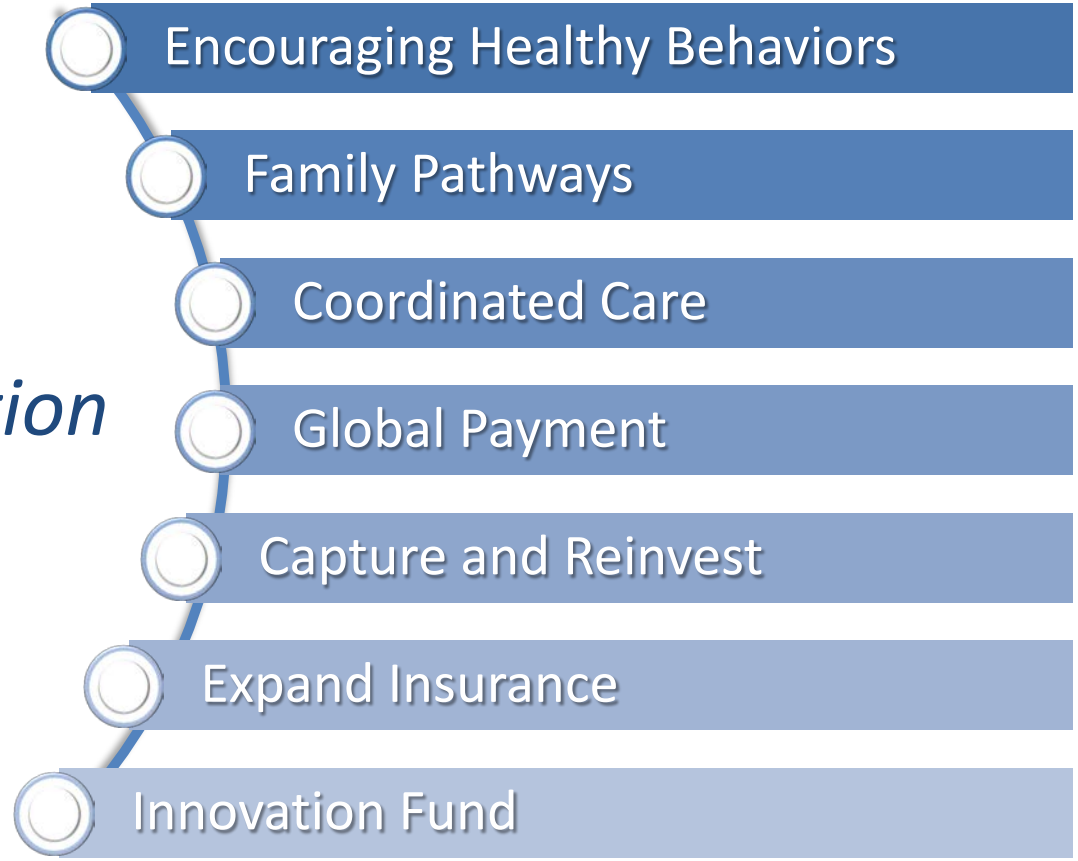
Which scenario offers the strongest foundation?

1. Far-Reaching
2. Atlanta Transformation
3. Better Health Atlanta
4. Promote Health Today



Strategy

Atlanta Transformation



ReThink Health - Atlanta

Logout

ReThink Health

Introduction | Create New Scenario | Results | Select Scenarios | Map | About

Expand All | Close All | Guide

- Indicators
- Stakeholder Indicators
- Net Incomes
- Cumulative Results
- ROIs
- 4-Panel
- HEALTH
- COSTS
- CARE
- PROVIDERS
- SPENDING
- REINVESTM
- PRODUCTI
  - Value
  - Worker ca
  - Value net
- Value
  - Value

Progress Toward Core Values

Scenario: Atlanta Transformation

Percent Chan

Health

-16.2% De

Death

0.012

0.011

Uncontrolled

0.15

0.11

0.07

0.03

0.00

2000 2008 2016 2024 2032 2040

Fraction of total population with uncontrolled mental illness

$15

$12

$9

$6

$3,000

2000 2008 2016 2024 2032 2040

Value of productivity

$55.0B

$47.5B

$40.0B

$32.5B

$25.0B

2000 2008 2016 2024 2032 2040

Base

Atlanta Transformation

VAR: Value of productivity. DESCRIPTION: Total economic output of workers, affected by the size of the employed population as well as changes in lost productivity due to absenteeism and presenteeism.

e of productivity

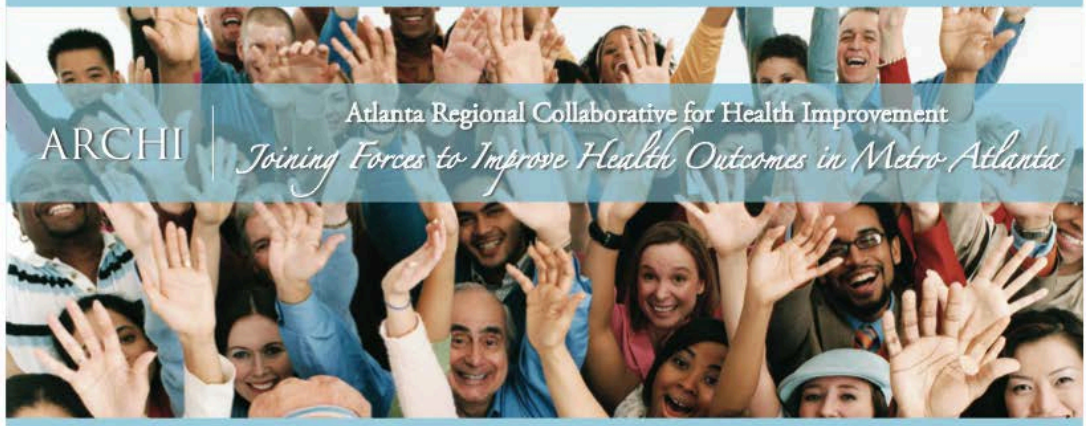
kforce care costs, per cap

Work-in-P

Model Version 2a1: 12.26.12

Strategy

Distributed approach



ARCHI

PLAYBOOK

Opportunity

Financing

Financial Development:

- Backbone Support
- Independently Align Organizational Investments
- Pooling Investments for Collective Decision-making
- Innovative Investments for Sustainability

Opportunity

The real opportunity lies in collaboration.

Opportunity

The challenges that lie ahead for the health system are vast and complex.

We need a better path forward.

Thank you!

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