Your Health Partners of the Finger Lakes LLC

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BackGround

- BHCC Collaborative with both Lead Agency and Lead Partner
- 3-year, $1.5M grant by NYS through March 2020 for the 9 Finger Lakes Counties
- Clinical and quality deliverables enabled by technology across up to 50 BH, Health and SDoH partners
Governance Key to Making Collaboration Work

Elements of Good Governance

- Equity & Inclusiveness
- Transparency
- Responsiveness
- Consensus-Oriented
- Fair Legal Framework
- Effectiveness & Efficiency
- Accountability
- Participation
Governance Structure

**Executive Committee**
- **Review and approve**: strategic direction, budget, policies and procedures, membership (addition/removal of agencies) and contracts between collaborative members and with MCOs.
- All Network providers and named Affiliate partners are **voting members** as long as they **have at least one member on a special committee**.

**Core Team**
- **Commit 10 hours per week**: focal points for consultants, develop initial proposals for Special Committees (SC) and budget to insure alignment with overall Collaborative direction.
- **Act as the Change Review Board** as SC designs are proposed
- Identify and facilitate **resolution of inter-SC issues/needs**

**Special Committees**
- **Commit 10 hours/mth** to validate and further develop proposals of Core Team /Consultants, validate budgets. **Represent breadth of Collaborative**
- **Approve operating policies and procedure** for Data Sharing & Analysis, Clinical Integration, Quality Management
Collaborative Development

“Democratic” governance structure – assure that all critical partners are engaged in decisions

Agree engagement expectations up front:

- Participation in Executive Committee for Decision making
- ‘Sweat Equity’ in planning, design and implementation
Governance in Action

**Representation & Attendance**

- Primary and alternate (with decision rights) representatives identified from all Network and voting Affiliate partners
- 75% attendance at Network meetings to remain in good standing
- Voting members must participate on one or more Special Committees

**Meeting Management**

- Agenda and meeting materials to be sent ≥ 3 business days prior to meeting; Agenda will specify Info Sharing, Discussion or Decisions Required.
- Virtual meetings will be enabled, including high quality voice and desktop sharing
- Strive for consensus; default to super-majority if time sensitive decision

**Powers Reserved for Executive Committee**

- Budget approval
- Addition/Removal of members

- Governing policies (e.g. non-disclosure)
- Technology requirements of the Collaborative.
Early Agreement on Strategic Approach

- Meaningfully addressing the Social Determinants of Health
  - Screening for SDOH
  - Utilize a closed-loop referral management platform – Unite Us
  - Expand network to incorporate critical services
Early Agreement on Strategic Approach

Managing outcomes through data analytics platform

- Utilizing real-time data to significantly impact on outcomes
- Create alerts that identify follow up opportunities
- Identify care management, peer engagement effectiveness in real-time
Early Agreement on Strategic Approach

- Development agreement on quality measures and leading indicators
- Develop best practice workflows
  - Identify effective engagement and follow up strategies for replication across LLC
Continuous Engagement

Critical for Success

- Regularly reengage with Network Partners to remain strategically aligned
- Maintain Core Leadership Team to sustain momentum
- Utilize consultants to expand knowledge and background in areas requiring expertise (e.g., Cost Analysis)
- Explore multiple strategies for contracting/reimbursement