



Member Driven. Patient Focused.

Dr. Christina Ghaly
Office of Health Integration
Kenneth Hahn Hall of Administration
500 W. Temple Street, Room 726
Los Angeles, CA 90012

Dear Dr. Ghaly:

On behalf of the Community Clinic Association of LA County (CCALAC) and the 55 non-profit community clinics and health centers we represent, I am writing to submit comments on the LA County CEO's Office Draft Report on the Potential Creation of a Health Agency (Draft Report). We appreciate the opportunity to review the report and comment on it.

In February of 2015, CCALAC Membership approved Principles for the Integration of LA County Mental Health, Health Services and Public Health. Our attached comments examine how the Draft Report addresses these principles, citing areas of agreement, concern, and areas where we feel more information is needed. While the report states the creation of a health agency could present many opportunities, we also agree that such an undertaking would bring many challenges that will require close partnership between agency leadership and stakeholders who have been working achieve the goal of improved integration for decades.

While CCALAC worked to provide comments on the Draft Report, others, such as the Coalition for an Office of Healthcare Enhancement, also approached us with ideas on how to improve the overall health of LA County residents. CCALAC reviewed these ideas as well against our principles. We are supportive of any effort that achieves those outcomes our Members prioritized. Because there is often more than one way to reach a desired outcome, we are in support of many different approaches to improve integration in LA County. We do not view our support of any one approach as exclusive and seek to be productive partners in all integration efforts.

We look forward to continued partnership with LA County to improve health in the region, particularly among the uninsured, underserved and most vulnerable. Please do not hesitate to contact me should you wish to further discuss our comments.

Best,

A handwritten signature in blue ink, appearing to read "Louise McCarthy".

Louise McCarthy, MPP
President & CEO

Encl: CCALAC Response to the LA County CEO's Draft Report on the Possible Creation of a Health Agency

Response to the LA County CEO's Draft Report on the Possible Creation of a Health Agency

The Community Clinic Association of LA County (CCALAC) reviewed the LA County CEO's Draft Report on the Possible Creation of a Health Agency (Draft Report) to the Los Angeles County Board of Supervisors regarding possible creation of a health agency in detail. In February 2015 CCALAC's membership approved Principles for the Integration of LA County Mental Health, Health Services and Public Health. In addition, CCALAC solicited comments and feedback from our members, including CEOs, providers and operations leaders. Our comments, below, examine the LA County CEO's Draft Report against these principles, citing areas of agreement, concern, and areas where we feel more information is needed.

CCALAC appreciates the opportunity to comment on the Draft Report and is proud of our partnership with LA County for over two decades. We continue to be eager to partner with LA County in addressing the many challenges that LA County residents face through innovation and collaboration.

Many Possibilities, Little Detail

While a health agency may, indeed, promote many opportunities for improved integration of services and coordination of care for the most vulnerable in LA County, the endeavor also carries a significant risk of destabilizing current systems of care. While the Draft Report attempts to address various concerns in this regard, details remain elusive on how such a significant shift would happen successfully.

Improved Integration as Primary Goal: Improved integration of services and coordination of care for clients of *all three departments* and their partner agencies should be the primary goal of this endeavor. Parity among the three departments must be considered throughout the process.

Service Integration: Any action to consolidate or integrate services must demonstrate that it will improve and enhance service delivery, quality of care and consumer satisfaction for all three departments.

- While the report certainly points out many opportunities for integration improvement, the document lacks detail on how a broader vision of overall integration might be achieved.
- There needs to be better integration *within* the Departments themselves before moving to the agency model. The report addresses improvement for the homeless population in stating, "In order to be effective, outreach staff need to have a broad range of tangible resources at their disposal including...urgent and primary care" (p. 20). Unfortunately, County policies with regard to the My Health LA (MHLA) program have made it more difficult to ensure this population receives the primary care they need. Another is the "no wrong-door" approach touted in the proposal. LA County has been very clear that there are wrong doors when it comes to enrollment in the MHLA program.
- The report discusses the promise of colocation. Colocation can be a first step to providing integrated services, yet much more must be done to ensure service are truly integrated in a meaningful way. To be successful, the physician, behavioral health provider and others must work together in delivering patient-centered care. There are significant barriers to collocate services effectively.
- In many places, the report calls for IT improvements to promote integration. These efforts are complicated and would be long-term in nature as many have attempted to overcome these issues in the past with little success.
- The report makes suggestions of how lessons learned by County agencies can help to inform its partners (e.g. prescription drug abuse, p. 14). CCALAC Members have utilized a number of approaches to address the issue. CCALAC participates in Kaiser Permanente's Opioid Task Force which has identified emergency rooms as the first

priority of focus. Perhaps County agencies could also learn lessons from those contracted clinics that have expertise in the area. The document is lean on opportunities for true *partnership* with the proposed agency.

Administrative Integration: Any action to consolidate or integrate planning, business, and administrative functions must also demonstrate that it adds clear value (meaningful savings and improvement in services) to each of the departments and their partner agencies.

- The Draft Report outlined many opportunities for administrative integration and simplification. As noted in services integration, there needs to be better administrative integration *within* the Departments themselves before moving to the agency model. Investments into communications, internal change management and internal coordination must be made before any moves to externally integrate with other departments. The County CEO states “Individuals who use services in more than one Department would benefit from greater commonality in departmental forms and electronic documentation tools” (p. 16). CCALAC has long advocated for simpler processes for patients but these suggestions have often been rebuffed in favor of duplication and a desire to avoid the true integration of systems for County patients (e.g. specialty care under Healthy Way LA). This is a difficult proposition for an agency when single departments continue to struggle here.
- The County’s report also mentions the detrimental effect that bureaucratic delays have had on individuals. “While delays may harm individuals who use County services, they are especially detrimental to disadvantaged populations who are already challenged with accessing the system and thus exacerbate health disparities” (p. 37). The very clinic sites that patients access are often put at risk with delays of this nature, particularly regarding payment. Contract provisions not thoughtfully considered have, in fact, resulted in clinics closing their doors. The report fails to explain how an agency model might improve circumstances in this regard.
- CCALAC Members open their doors to often duplicative County audits several times a year, disrupting productivity and taking time that could be better used for discussion on the improvement of patient care and innovation. These administrative layers and barriers are areas where CCALAC hopes any future consolidation effort would have significant impact.

Thoughtful and Measured Approach: Any plan to consolidate should not be rushed to meet an artificial deadline. Further, continued implementation of health reform and other critical initiatives currently underway should not take a back seat to the consolidation/integration efforts due to time or resource constraints.

Planning: LA County should allow sufficient time to not only engage stakeholders, but to also investigate appropriate models of integration and to ensure that any legal and operational issues are sufficiently addressed prior to implementation.

The Report fails to deeply investigate other appropriate models of integration and provides little detail on how any legal and operational issues are sufficiently addressed prior to implementation. The report references a high level of anxiety felt by many stakeholders on the establishment of an agency. “Once established, the agency can reduce this level of anxiety by establishing relationships with external partners, clearly communicating the agency’s priorities and commitment to not disrupt existing services that are serving individuals well” (p. 43). Is it reasonable to believe that agency leadership would dedicate enough time to establishing the meaningful relationships with such a wide range of stakeholders?

Implementation: CCALAC maintains that thoughtful planning and rollout can save the County from avoidable problems further down the line. The County should consider phasing in any proposed consolidations to ensure the smoothest transition possible.

The timeline proposed in the County CEO’s report is very ambitious, with the possible establishment of a health agency by October 1, 2015. CCALAC was disappointed that the Report did not provide more detail on a stakeholder process that might occur during formation of an agency. The County should provide additional detail on how agency creation could be structured and how they will ensure that stakeholder engagement during the creation is done in a meaningful way.

Ongoing Monitoring: Any plan to consolidate should have clearly defined objectives, along with a plan to evaluate and monitor progress toward those objectives.

The report contains a lengthy discussion of possible measures and metrics to monitor agency initiatives and significantly weaves stakeholder engagement into the discussion. While this is promising, these discussions can become complicated, with much disagreement on what measures are appropriate for various initiatives. CCALAC would hope that any agency created commits substantial energy to ensuring that monitoring progress occurs *with stakeholders* and that solutions to improve poor outcomes are reached collectively.

Transparency & Stakeholder Engagement: Any consolidation must involve a robust public stakeholder process, including community mental health agencies, community clinics and health centers and other contracted community partners. Stakeholders must remain engaged throughout planning, implementation and ongoing monitoring.

The report dedicates significant discussion to the continued engagement of stakeholders. The report states, “If an agency is created, several steps should be taken to reduce risks, establish safeguards, and build trust and reduce fear” (p. 54). The report goes on to describe several ways to build that trust by ensuring community participation, gathering feedback on various initiatives, creating metrics and establishing a forum to express concerns. However, what is the CEO’s vision and perspective when it comes to stakeholders? There is much in the way of engaging stakeholders but how would the agency view them? As partners in the creation of initiatives or simply as external entities affected by health agency initiatives? The Report lacks a bidirectional sense of tone when it references stakeholder relationships and CCALAC looks forward to improvement on this in the future.

When it comes to engaging in the planning, implementation and ongoing monitoring of a health agency, CCALAC’s Members have stated that the importance of this element calls for the building of stakeholders into the actual structure of the agency. Stakeholder engagement should first have a formal structure and the agency must clearly document the function of any stakeholder forum. While CCALAC understands that it is not appropriate for any stakeholder forum to participate in all agency functions, it should play a key role in shaping the direction of the agency and act as a real partner with leadership and staff to create the best possible health system for LA County. Some areas that stakeholders should be engaged in include:

- Creation of Stakeholder Forum or Fora
- Strategic Planning
- Integrating Services at Point of Care
- Information Technology and Data
- Addressing Service Gaps for Vulnerable Populations
- Workforce Issues
- Streamlining Access

CCALAC looks forward to participation in a stakeholder process and working with many other partners to improve the overall health of LA County residents.