

Health Care Breakout Session: A Play in Two Acts

As mostly remembered by David
Chambers*

Act 1: Brain Dump

- **Measurement** (planning, implementation, feedback)
- **Resources** (Coverage for Srv, Workforce, IT)
- **Actions** (implementation, adaptation, demand, evidence synthesis, local innovation)

Challenges (Opportunities)

- **Definitional** -Prevention, Evidence, EBPs vs. EIPs
- **Getting information to key stakeholders**
 - Types of Data (Epi, Q of Care, Dvl Apprp. Outcomes)
 - Data for stakeholders (e.g. State Medicaid, MCOs, QI Directors, Children and Families)
- **Creating the Business Case** – Fitting existing streams, workforce with Px programs

What has helped...

- Starting with a **shared outcome of interest**, even if not specifically C-CAB
- **Ongoing assessment** in local community
- New ways **technology** can be used (Fidel, Epi, Program Delivery)
- Use of **waivers, payment flexibility**
- **Menus of what to implement**

Act II: Where should we go next?

- Invite key state HC folks—sharing headaches
- Engagement—“community ownership”
- Build technical capacity for implementation
 - @ state level
- Marketing Prevention Impact to all (from Op-ed to journals to focus groups)

And...Fostering New Measurement Development

- Business Case Measures
- Predictive proximal measures for L-T health
- Cost metrics
- Optimizing use of existing measures (e.g. PhenX, Toolbox)

Criteria: Specificity to context, publically available, usable, actionable, understandable, developmentally appropriate

Cross-Sectoral Opportunities

- Harmonization of data across sectors; Information exchange
- Clearinghouse of EBPs
- Improving measurement of Health/MH in JJ/Foster Care/CW
- Understanding knock-on benefits beyond the sector (e.g. Planting Trees)

There was so much more but...

