Objective

Assess the association of Washington State’s Accountable Communities of Health (ACH) model, including shared data systems and care coordination strategies, with improved health and criminal justice outcomes for adults with complex medical and social needs in King and Whatcom counties.

Study Design

Explanatory Multiple Case and Retrospective Cohort

What ACH factors support or inhibit local health & human service department’s (LHHSDs) ability to develop shared data?

What is the role of LHHSD’s in building shared data through an ACH context?

Is care coordination associated with improved health care and criminal justice outcomes among King and Whatcom county jail populations?

Principal Findings and Relevance – Phase One

Six different counties have varying levels of involvement in these two nascent ACHs. The extent of their involvement in ACH leadership and staffing structures were primary factors in how influential the ACH was in accelerating any existing data sharing efforts in both urban and rural settings.

As the ACH is one of the first to purposely integrate public health strategies that address the community level factors that shape population health, the model serves as an important vehicle to:

- Understand how each county will organize, finance, and deliver their public health and human services in changing value-based payment environments.
- Learn how cross-sector partners work through data sharing and integration barriers (e.g. motivational, legal, political, economic & ethical) together.

Contact Information & Acknowledgments

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