

What is a Sprint? The Collaborative adopted a new process for implementing our 2019 Community Health Improvement Plan. We are addressing nine strategies through system change ‘sprints’ and an ongoing policy agenda which utilize principles from the Scrum and Collective Impact frameworks to increase stakeholder engagement and allow flexibility. These focused sprints are taken on one at a time to ensure focused and rapid progress towards a system change. Each sprint has a designated lead organization to manage the sprint process, while all other members collaborate and support to the efforts success. For more information view our 2019-2022 Community Health Improvement Plan.

Team for Care Coordination Sprint #1

Lead: HSC Health Care System

Collaborate: Children’s National Hospital; Howard University Hospital; Sibley Memorial Hospital

Care Coordination was the first sprint topic for the 2019 CHIP cycle, and began in November of 2019 wrapping up in March of 2020. The Collaborative decided to address need for improving communication, awareness, and referral capabilities among health care providers, social service agencies and educational systems, by launching DC Health Matters Connect* (Connect). Connect is a free online directory to search and connect with social service programs in the DC metropolitan area, which the Collaborative piloted in our 2016 CHIP. The four month launch process focused on implementing the tool at our clinical sites while also educating stakeholders on the use and benefit of the tool in order to increase care coordination across disciplines.

*To learn more about how we chose this endeavor, head to the 2019 CHIP

Goals and Objectives The Sprint team developed a SMARTIE goal to guide the work and defined specific definitions for how we would know when we achieved our goals. The work intentionally spanned a short period of time, but to ensure we pushed towards long term system change, the work includes a specific sustainability plan.

SMARTIE Goal for Sprint #1

Specific: Disseminate information through in-person trainings, online resources, and community conversations to equip referring partners with the knowledge they need to refer participants to social resources in DC.

Measureable: Equip at least 14 partners across three different fields with resources to utilize Connect; increase searches on the platform by 20%.

Ambitious: Plan is challenging enough that achievement would mean significant progress.

Realistic: Goals are possible to execute and track.

Time-Bound: Completed within six months.

Inclusive: Engage with sites across Wards in DC including but not limited to 7&8; embed non-clinical stakeholders in sprint team as well as those receiving training.

Equitable: Provide definition of equity and social determinants of health in all training and rollout activities; review potential access issues in platform.

Defining Done

- Educate 14 referral sources / organization about Connect
✓ Achieved
- Increase searches on DC Health Matters connect by 20%
✓ Achieved
- Provide bi-monthly feedback to Aunt Bertha (the company that powers the platform) on the usage, inclusivity, and equity in the platform
✓ Achieved
- Increase community based organizations accepting referrals on the platform
✓ Partially Achieved
- Build 3 year sustainability plan for Connect
✓ Achieved

Want to learn more?

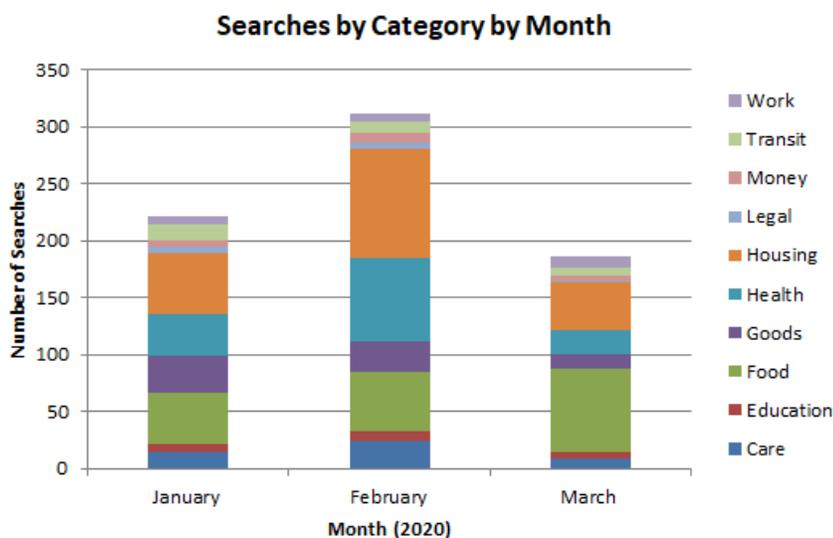
- The training materials we developed are available for anyone! Head to *BLOG LINK* to check them out
- Email us at connect@dhealthmatters.org with any questions about the project, or to get troubleshooting help
- Visit www.dhealthmattersconnect.org to explore the tool directly

*DC Health Matters Connect is powered by Aunt Bertha, the largest closed-loop referral network for social services in the US, servicing 1.8 million people (and growing). If an organization is already on Auntbertha.com, all information is mirrored on dhealthmattersconnect.com, and organizations only need to log in 1 time to see their portal, accept referrals, or update their listings.

Work completed How did the sprint team decide the SMARTIE Goal were achieved and the sprint could be closed?
We mapped our activities and achievements – found below:

- **Education and Training**
 - Trained 32 organizations across seven wards (not including organizations serving the whole city)
 - Gave three publicly available trainings attended by over 50 individuals
 - Recorded and published an online training
 - Provided education to organizations across seven different sectors (health, behavioral health, faith, education, insurance, community volunteers, and government)
 - Created education materials about DC Health Matters Connect
 - Trainings for Collaborative members and the public; a ‘how to’ guide; online training videos; a 1-pager overview of Connect; a 1-pager explaining how social service organizations can use the tool
- **Background (data and ‘other’)**
 - Created DC Health Matters Connect branding, logo, and website while ensuring alignment with our other work
 - Gathered and published monthly data on DC Health Matters Connect usage patterns
- **Engagement and communication**
 - Presented ‘elevator pitch’ training for 20+ individuals so they could share information about Connect
 - Developed and executed a social media engagement strategy
 - Embedded feedback mechanism into education materials
 - Developed Connect specific email address to ensure our team was readily available for questions
 - Created and disseminated over 1500 postcards sharing information about Connect
- **Partnerships**
 - Invited 12 individual organizations to publish information about DC Health Matters Connect in their newsletters
 - Presented information on DC Health Matters Connect to Community Advisory Board and community meeting
 - Engaged in landscape conversations with DC PACT, a leading local voice on resource connection platforms
 - Invited nearly 400 individuals to publicly available Trainings on Connect
- **Connect Website and Aunt Bertha**
 - Gave regular bi-weekly feedback to the Aunt-Bertha team
 - Attended meeting with Aunt Bertha and other DC customers to discuss opportunities for collaboration
 - Purchased a shared Aunt Bertha license to develop DC Health Matters Connect

Sustainability To sustain the progress made during the sprint and ensure the Collaborative continues progress addressing the larger system of care coordination, the group has committed to the following



- Maintaining and running DC Health Matters Connect including dissemination of education materials and online training
- Engaging with our peers in DC who are committed to resource directories and connections to social services
- Reviewing and publishing usage data in order to:
 - Provide a transparent view on utilization
 - Inform the policy work
 - Allow others to pull see the data to support research, grant writing, or social service programming