Familiar Faces Program

Board of Commissioners Health and Human Services Committee Update November 3, 2023



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CHV 2.3: Leverage data-sharing through medical, health, and human services organizations to implement the Familiar Faces program.



- Pilot Project Overview
- Technology Selection
- Care Coordination
- Next Steps

Project Overview

- In late 2022, Wake County engaged a consultant to review governance and readiness and prepare requirements for RFP for tool to support Familiar Faces program
- Established parameters for project approach, resource needs, and pilot project scope
- County committed to provide leadership and committed funding for the pilot; community partners committed to staying engaged, shaping content and where appropriate, participating in pilot

TOP RECOMMENDATIONS

STRUCTURE

Build on the program foundation

- Establish a dedicated, full-time program team with a program driver
- Create a small governing body (5-7) with decision-making authority
- Develop an action-oriented approach, roadmap and detailed project plan

APPROACH TO WORK

Adopt strategies to get the work done

- Adopt a "bias toward action" mindset; try things out and be willing to fail
- Take an agile approach to tasks; break work into smaller tasks and prioritize
- Initiate a pilot project and grow incrementally
- Engage end users to inform

SUSTAINABILITY

Set the program up for long-term success

- Secure long-term ownership
- **Define a long-term funding** strategy; secure funding
- Define outcome measures that motivate funding entities
- Develop communication materials that tell a strong story of the program's purpose and value



The Familiar Faces Pilot

Why a Pilot?

Pilot

WAKE COUNTY

A pilot enables the program to try something on a scale that aligns with given resources and budget, **LEARN FROM IT** and use the findings to determine next steps for the program

Learn, Iterate and Grow over Time

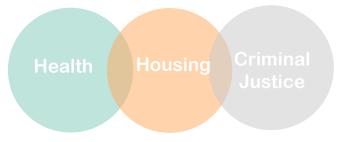
Vision

Pilot Focus



Target Population

- "Familiar Faces" are highutilizers of a partner's service as defined by the partner organization
- Have provided consent to share their information
- Primarily based / getting services in Wake County

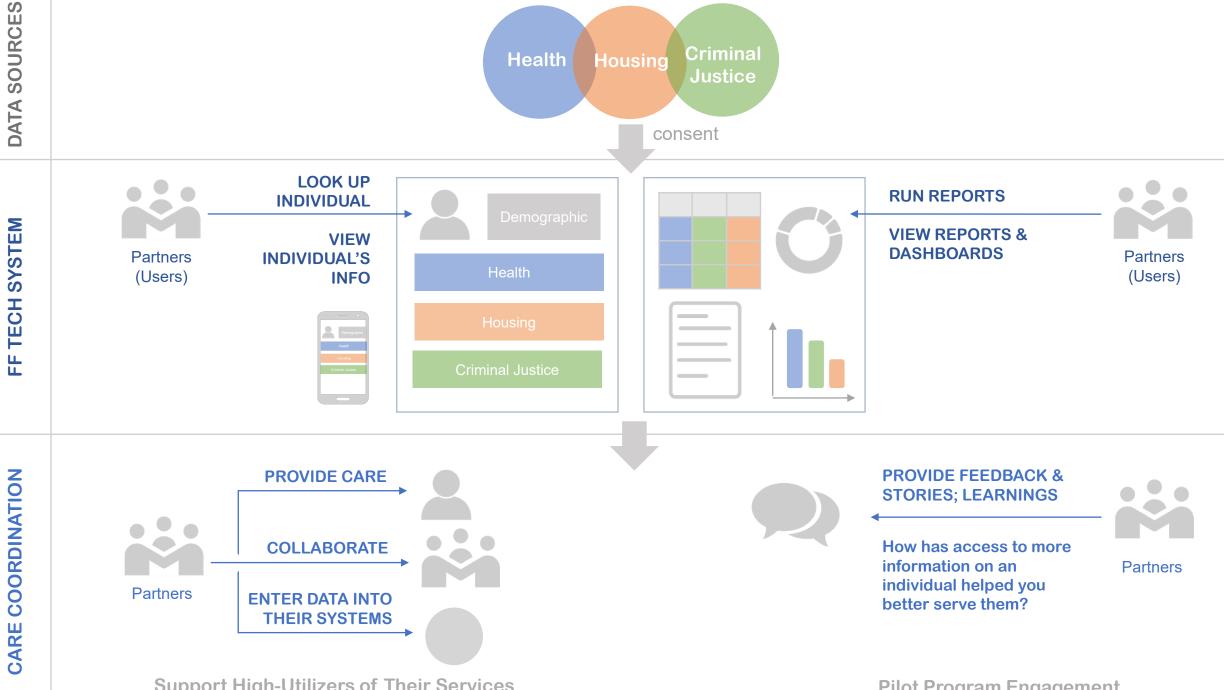


3 Data Sources

- Pursuing data sharing agreements
 - Health
 - Housing
 - Criminal Justice

6 Partners

- WakeMed, UNC Health, SouthLight, Triangle Family Services, Wake EMS, Wake Housing
- Use the system and provide feedback
- Select their high-utilizers based on their own criteria and share that criteria to foster transparency
- Are responsible for managing care of identified individuals



Support High-Utilizers of Their Services

Pilot Program Engagement

What We'd Like to Learn

	Willingness of FF individuals to share data
	 Impact to the well-being of high-utilizers (i.e. reduced usage of safety-net crisis services)
Familiar Faces	Population's greatest needs, biggest barriers
Community	• System usage and adoption - what is used, how often, in what situations
	 Effectiveness of data-sharing in helping front-line resources and community partners support high-utilizers
	Willingness to share data and commit to making this work
 Program 	Priority capabilities to consider for next phase
	What's needed to operate and expand the program
	• Discovery of gaps, problem and improvement areas to drive actionable next steps

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Key Accomplishments

- Completed requirement sessions and review
 51 User Stories
- Completed non-functional requirement sessions and review
 - o 92 Requirements
- Financial Assessment submitted and approved
- Hired Familiar Faces Program Manager and IS Project Manager
- **RFP posted October 31, 2023**

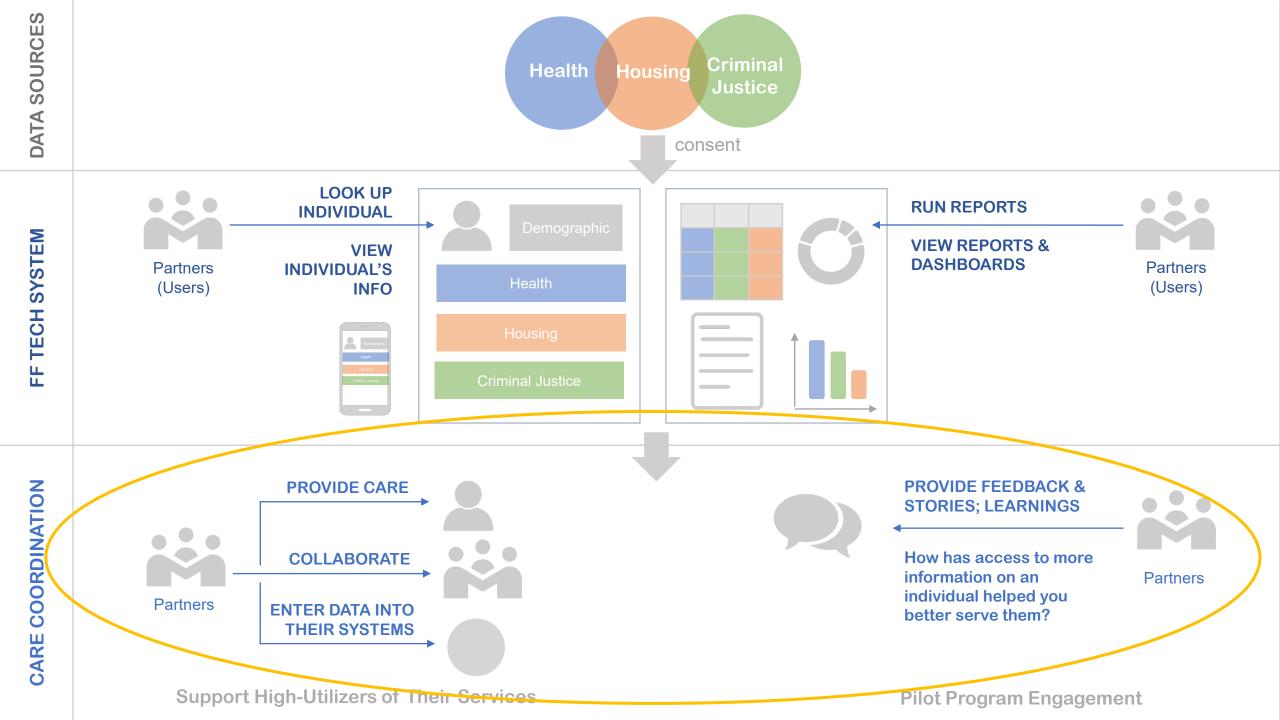
Familiar Faces Program/Technology Project Phases

Phase 1	Phase 2*	Phase 3
Assessment – Procurement Planning	Procurement	Implementation
COMPLETE	AUGUST 2023 - MARCH 2024	Tentative APRIL 2024 -

- Governance and Readiness Assessment
- National Survey
- Financial Assessment
- Program Structure / Governance
 Pilot Scope Definition
- Requirements and User Stories
- RFP Draft
- Program Manager, Project Manager Hired

- RFP Issued
- Vendor Evaluation, Selection, Contract
- Data Sharing Agreements Obtained
- Care Coordination Process Defined
- Pilot Partner Engagement

- Technology Implementation (pending data sharing agreements)
- Vendor Oversight
- Program Process Implementation
- Pilot Partner Engagement



Care Coordination

- Care Coordination deliberately organizing care activities and sharing info among all providers
 - Goal: Meet FF's needs and preferences in the delivery of high-quality care
- Representatives will convene to design system-wide Care Coordination in a series of interactive work sessions to determine care coordination process - including metrics, workflows, and procedures

Next Steps

- Complete Data Sharing Agreements
- Complete Memorandums of Understanding (MOUs) with pilot partners
- Complete vendor selection process
- Conduct Care Coordination Work Sessions
- Define outcomes measures to demonstrate program impact



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