## Theory of Change for the Northwest CPI Collaborative

## CURRENT ENVIRONMENT STRATEGIES TO EFFECTIVELY COLLABORATE Policy is constantly changing FOR ECM AND COMMUNITY SUPPORT Long Term · DHCS is transforming Medi-Cal **EXPANSION** Results **KEY ELEMENTS** through various initiatives, including CalAIM. · Such initiatives, including the Increased access to **Shared Vision & Goals** Capacity Providing Access and Transforming and enrollments into Building Health (PATH) initiative, have CalAIM ECM/CS Relationship **Shared Knowledge** complex and unique roll-outs. (Increase providers, Building Regional providers have variable increase in clients **Engagement and Retention** levels of capacity and interest to implement Enhanced Care Increase in utilization of Management and Community **Testing and Innovation** Collaborative Supports. Systems · Organizations are working with new Gap Identification and Solution Improvements external partners and new systems Siloed approaches to implementing CalAIM Short Term Results Collaborative Supports Resource compilation Monthly and Pop-Up Convenings Increase peer networks TEAM Gap identification Office Hours and Technical Assistance **CPI Participants** Unbiased convening space PHIL Workgroups for learning and sharing Increased partnerships Peer-to-Peer Learning **MCPs** Increase alignment in CalAIM participation Resource Hub PCG/ DHCS Skill Building and Training Hub

