Health Home Communication Plan

Given the extent of this system level change it is essential that the leadership provide continuous messaging regarding the vision, the steps required to achieve the vision, and work plan progress achieved. It is difficult for leadership to over message a system level change initiative if the vision and steps to achieving it are clear AND the follow-through by leadership is maintained (i.e., leadership must be of one voice and constantly “on message”/discussing the initiatives otherwise staff will see this as “the next big thing from management” and assume that it will fizzle over time). The following are the leadership team communication plan elements.

Face-to-Face Meetings with All Staff:
The executive leadership will meet with all staff monthly either via team meetings, one-on-one meetings, or all staff meetings to discuss the vision for the HH and progress being made. Supervisors/Team leaders will be provided with guidance on how to answer staff questions and support their work through this change process.

Monday Morning Memo (MMM) from CEO:
Each MMM will include a section stating the vision for HH and the work completed to date. Additionally, the MMM will discuss progress to date on the implementation plan and recognize staff/teams that are making significant progress with the movement to becoming a HH.

Governing Board Presentation:
Develop and provide a detailed power point presentation and handouts for the agency governing board on how the Affordable Care Act and the Ohio Health Home are linked and the associated work plan for the agency. The board should be given regular high level updates on progress toward certification.

Clinical & Administrative Supervisors:
Meet with supervisory staff to provide information about how to link team and individual staff work plans with the vision and agency level HH work plans. Each staff should have this as part of their work plan (e.g., if staff needs to learn how to use a computer they will have this in their work plan; if staff needs to learn how to incorporate a health goal into a treatment plan they should be working on this). Staff assigned to a work group should have the amount/percentage of time they will spend on the work group detailed in their work plan and approved and monitored by their supervisor.

Staff and Public Area Notices:
Post materials in the hallways, waiting areas, break rooms, bathrooms, etc. describing the HH initiative. This can be used to inform and generate discussion between and among staff and clients. This will also provide a means for communicating and charting progress toward achieving organizational goals.

Community/Network Presentations:
Develop two presentations one for community organizations (e.g., NAMI) and another for partner service providers (e.g., MCO) detailing the plan for implementing the HH. The purpose of this is to generate community awareness and collaboration.

Celebrations of Success:
It will be important that the HH Leadership Team celebrate milestones completed by the workgroups. This should be done in a visible way and can include pizza parties, thank you letters from leadership or board members, “shout outs” by leadership via the MMM, etc. We will never underestimate the
positive impact this can have on staff. Whenever possible we will share stories of consumers who have benefited from the good work of the staff.

**Work Group Leader's Communication Checklist:**

It is important that each work group member can answer “yes” to the following questions. It is the responsibility of the work group lead that all members of the work group can agree with each of the following statements. If as a lead, your work group team cannot answer yes to each statement at each work group meeting it is the job of the work group lead to work with the staff until they can.

1. I have a clear understanding of the vision for HH, the implementation plan and can explain it to my coworkers and clients (i.e., staff know the ‘elevator speech”).
2. I have the time allotted in my work to take part in this work group.
3. I know exactly what I need to do following this meeting to complete the task(s) I agreed to complete.
4. I know what to do if I try to complete a work group task and my fellow co-workers don’t support me in executing the task (e.g., they tell me they are too busy to help me or don’t follow through on a commitment they’ve made to do something).