

Department of Health Care Services
Stakeholder Engagement Initiative
Summary of Survey Results and
Impact to the Stakeholder Engagement Process
January 2, 2015

As part of our effort to improve communication, and to improve Medi-Cal overall and fulfill the vision of the Triple Aim, the Department of Health Care Services (DHCS) surveyed stakeholders from September 5-26, 2014, with 14 questions about ongoing and future DHCS stakeholder engagement efforts. This document summarizes the 139 responses received by the department.

Additionally, as a result of the feedback received, DHCS has implemented an internal, department-wide protocol to facilitate the integration of best practices across DHCS stakeholder groups. The initial series of changes include prompt calendaring of public stakeholder meetings on the external calendar, timely notification to legislative staff, and the development of multiple stakeholder group pages that contain meeting materials and information for each group. To further disseminate the use of best practices when engaging with stakeholders, DHCS is planning to hold internal educational seminars for all staff to describe elements of effective stakeholder engagement and to encourage compliance with the new stakeholder engagement guidelines.

Stakeholder Group Structure: Most respondents generally supported the existing stakeholder group structure, organized around policy and operational efforts, and did not suggest substantial restructuring. Respondents favored a flexible approach in meeting topics and structure. However, some key respondents suggested significant changes, including periodic overall departmental stakeholder meetings.

Stakeholder Group Process: Many respondents suggested a more consistent and improved approach to scheduling and announcing meetings and providing information about the topics to be discussed. A common theme was that better, consistent communication, meeting facilitation, and standard processes would promote greater transparency for stakeholders and participation in developing policy and improving operations. DHCS is developing internal guidance to share results and institute standard practices for stakeholder engagement across the department.

Key respondent feedback around process is described below.

Meetings:

- DHCS should focus on quality instead of quantity for meetings.
- Stakeholders want to have relevant discussions, so DHCS should encourage dialogue and participatory decision-making during meetings, with less time on DHCS reporting out and more time on conversation.

- About half of participants indicated that DHCS does allow enough time for both stakeholder and public input.
- Stakeholders want to receive meeting materials in advance along with links to specific group pages as a critical component of successful interaction.
- Stakeholders want to collaborate on setting agenda topics.
- DHCS should ensure that all stakeholder meetings are listed on the DHCS calendar.
- DHCS should use a consistent feedback loop, including the following: document action items; provide meeting summaries; follow up on action items; and openly communicate on what was eventually adopted from stakeholder input.

Overall:

- DHCS should incorporate stakeholder input as it develops policy, not afterward.
- DHCS should be transparent when describing what was done with stakeholder suggestions -- accepted, declined, or moved to another group -- and provide explanation for final outcome.
- The department should develop a central location for stakeholder information, such as a new webpage, and deploy periodic email notifications.
- DHCS should consider additional technology or web tools to facilitate stakeholder dialogue.
- Respondents noted the biggest area of recent improvement is the way in which stakeholders are notified of meetings, workgroups, and clear opportunities to participate or “plug in.”
- DHCS should consider developing a formal channel to receive feedback on the actual DHCS engagement process.

Profile of survey respondents:

- Consumer Advocates 30%
- Providers, Clinics, Hospital 17%
- Other 15% - (included professional associations, school districts, labor)
- Managed Care Plan 12%
- Local/County Government 7%
- Consumer/Parent 7%
- State 6%
- Foundation/Research Org. 3%
- Legislature 2%