Accountability, Coordination, and Telehealth in the Valley
to Achieve Transformation and Equity (ACTIVATE)

ACTIVATE is a demonstration project using digital health to improve the well-being of underserved and rural communities in partnership with community health centers. The ultimate goal of ACTIVATE is to promote telehealth, telemental health and remote monitoring as cost-effective strategies for health improvement, reaching and providing maximum benefit to at-risk and vulnerable populations. ACTIVATE is a collaborative effort between the University of California's CITRIS, the Banatao Institute, MITRE and UC Davis Heath.

Key principles:
- Promote equitable access to telehealth-enabled solutions, specifically addressing the needs of low-income, at-risk individuals.
- Address the wide variation of health care needs, resources, and capacity of California's – and the nation's – diverse population.
- Develop a program that is efficient, cost-effective and evidence-based.
- Maximize public/private collaboration to ensure the greatest impact possible.
- Build upon existing networks and resources.
- Design a program to be replicated, rapidly scaled and sustainable.
- Consider the unique workforce and development needs of rural communities.
- Inform public policy and program design to ensure long-term sustainability of telehealth.

The project aims to improve chronic illness care coordination, increase the availability of digital technology and improve access to high quality health care in rural, agricultural, and underserved communities. To achieve this, community engagement efforts complement and reinforce digital technology and service delivery by promoting the use of telehealth and implementing a telemental pathway to engage the community in a culturally and linguistically appropriate manner through the involvement of trusted Community Health Workers, or Promotoras. developing trust and engaging the community.

In partnership with Community Health Centers, ACTIVATE partners provide support for the following:
- Virtual visits for primary care.
- Remote patient monitoring for diabetes and hypertension.
- Tablets, connectivity, monitoring devices and individualized technology adoption support for patients.
- Digital literacy resources.
- Implementation of data integration with electronic health records
- Health coach training for community health workers (CHW) and medical assistants (MA) to assist patients with diabetes and hypertension.
- Co-design processes resulting in solutions that are well-integrated into clinic workflows.
- Rigorous program evaluation of the quadruple aims of quality, outcomes, experience, and cost.
- Outreach and engagement strategies tailored to the context and needs of farmworkers and their families.
- Culturally and linguistically appropriate trainings and sessions to drive demand and increase access to health services among hard to reach populations (i.e., farmworkers).
- Through trust and information, increase utilization of telehealth services.
- Implement a telemental pathway that provides mental health resources and referrals.
- Train CHWs to provide telehealth/telemental health resources and referrals.