



Communities
JOINED IN ACTION

Improving Health – Eliminating Disparities

2015 Annual Conference Breaking News



Take-Home Advice from the Panelists of CJA's Accelerating Action Toward Health & Equity Scavenger Hunt

October 1, 2015

This session at the Communities Joined in Action 2015 Annual Conference provides a terrific opportunity for participants to access national leaders of community health improvement initiatives that are committed to and achieving results in improving health and promoting equity. Learn about bold and effective ways to ensure better health for all people at less cost.



BUILD

Bold, Upstream, Integrated, Local, and Data-Driven

www.buildhealthchallenge.org

The inaugural BUILD Health Challenge launched in June 2015 with grants to 18 communities to strengthen partnerships among hospitals, nonprofits, local health departments, and other community organizations working to improve the health of low-income neighborhoods within cities with populations greater than 150,000. The goal is to increase the number and effectiveness of cross-sector collaborations to improve community health, promote health equity, and stimulate more effective methods of sharing and using health data. A combination of one-year planning awards and two-year implementation awards will be distributed through funding from The Advisory Board Company, the de Beaumont Foundation, The Kresge Foundation, Colorado Health Foundation, and the Robert Wood Johnson Foundation.

Catherine Patterson, from the BUILD Health Challenge, on advice to community organization leaders:

“Share your failures. There is so much to learn from what did not work. Don’t be afraid to say what did not go well. Fail fast, learn from your efforts, and adapt.”

Bridging for Health: Improving Community Health Through Innovations in Financing

www.ghpc.gsu.edu/bridging

Bridging for Health’s goal is to work with selected communities to improve population health by rebalancing and aligning investments through pursuit of innovations in policy, health care delivery, and financing mechanisms. Focusing on the three main areas of collaboration and collective impact, innovations in financing, and health equity, technical assistance and support will be provided to up to ten sites across the country. The Georgia Health Policy Center is the national coordinating center of the initiative supported by the Robert Wood Johnson Foundation.

Insights from Bridging for Health’s Karen Minyard:

Advice: “Be patient. This involves being ready to develop not just new partnerships, but a new mindset, along with a willingness to embrace the uncertainty associated with transformation and innovation.”

Pitfall to Avoid: “Thinking of innovations in financing as a technical fix, rather than an adaptive challenge.”

CJA

Communities Joined in Action

www.cjaonline.net

CJA is a national, private, non-profit membership organization. With nearly 200 members representing a variety of public and private organizations including community health collaboratives, each of our members are committed to improving health, access to care, and eliminating disparities in their communities. Throughout our history, CJA has been recognized as a change agent through our ability to broker important health and health care dialog, to be fluid and dynamic in our approach, to convene a variety of multi-sector stakeholders, and to provide access to this expertise to our national membership. The Georgia Health Policy Center is the administrative home for CJA.

Annette Pope, from the Georgia Health Policy Center, on advice to community organization leaders:

“Engage non-traditional partners by meeting them where they are, join their table, and invite them to yours. Everyone has an important role in improving health and reducing health disparities. Think outside of the box and don’t be afraid to work with new partners on innovative ideas.”



MHCU

Moving Healthcare Upstream

www.healthychild.ucla.edu/ourwork/mhcu

Moving Healthcare Upstream is a national initiative to accelerate developing and spreading innovations that improve health at a community level through recognition of the urgent need to complement quality health care with supportive services in other sectors that address the upstream social, behavioral and environmental determinants of health. Achieving this mission will require new partnerships among health care, public health, and non-health sectors as part of a learning system of collaborative innovation and improvement networks to prototype and promote scalable ideas, practices and policies that achieve the objectives of the Triple Aim. Nemours and UCLA Center for Families and Children co-direct this initiative funded by the Kresge Foundation.

MHCU's Debbie Chang on preliminary lessons learned:

“At this stage of the Moving Health Care Upstream initiative, we are learning about what struggles exist for health care systems attempting to go ‘upstream.’ Our early observations are that it takes a great degree of relationship building, coordination, and training of clinical professionals and a mindset change. ‘Learning by doing,’ that is, meaningful engagement of providers with community organizations around shared goals, is critical.”

Pathway to Pacesetter

www.ihl.org/Engage/Initiatives/100MillionHealthierLives

Pathway to Pacesetter is a new initiative that is part of 100 Million Healthier Lives. P2P will support over 100 communities from across the U.S. to accelerate their community health improvement journey. The goal of Pathway to Pacesetter is to support local leaders at every level of a community to be successful and to multiply their effectiveness in achieving their existing vision and goals. P2P is an 18-month program that begins in October 2015 and goes through March 2017.

Pathway to Pacesetter Director, Laura Brennan advises community health leaders:

“Accelerating the pace of improvement and creating a ‘culture of health’ is challenging and exhilarating. It requires a new level of commitment from each and all of us. To join the Pathway to Pacesetter community, you don’t need to be ‘perfect,’ but you do need to be ready to roll up your sleeves with your peers across the country and get to work. Join us! We are still accepting applications from communities to join P2P.”

Community-Centered Health Homes:

Bridging the gap between health services and community prevention

www.preventioninstitute.org

In Community-Centered Health Homes, Prevention Institute (PI) outlines an approach that healthcare organizations can take to promote community health and prevention, even as they deliver high-quality medical services to individual patients. The research-informed recommendations provide the steps to achieving improved outcomes and broader community change including: inquiry (collecting and aggregating data to identify trends); analysis (identifying priorities with community partners); and action (implementing strategies to improve community environments).

PI's Leslie Mikkelsen on a common pitfall that community organizations can avoid:

“Remember that the government agencies or groups you want at the table may not have health as a first priority. Consider their priorities and lead with those ‘co-benefits.’ For example, inviting the Director of Business and Economic Development to a meeting on health may lead to puzzled looks. However, inviting that director to participate in a meeting about how to improve foot traffic for local retail businesses or how to reduce health insurance costs for local businesses may get attention. Remember to build in this framing throughout the process, to keep the various sectors engaged.”



AHEAD Alignment for Health Equity and Development www.aligntheequitydevelop.org

AHEAD aims to make community investments smarter, more strategic, more aligned, and more effective. The program works with hospitals, public health agencies, financial institutions, businesses, and other community development stakeholders to create balanced portfolios of aligned investments in comprehensive health improvement strategies with a shared measurement system. Resources will be focused on neighborhoods where both health and social inequities are concentrated. The 5-year program launched in November 2014 and is an initiative of the Public Health Institute, in partnership with The Reinvestment Fund and a grant from The Kresge Foundation.

AHEAD'S Arthur Himmelman on lessons learned from AHEAD's five pilot sites:

“Explicit alignment of programs, services, and activities across the health sector is a disruptive innovation, and as such, laying the groundwork is painstaking and uncomfortable for many. People are not used to sharing details of current programs (e.g., who, what, when, where, how much, how measured, etc.), which is an important antecedent to identifying forms of alignment that yield tangible returns (e.g., increased scale, cost effectiveness, sustainability). Community leaders need to be ready to objectively assess the relative effectiveness and efficiency of their efforts.”

SCALE Spreading Community Accelerators through Learning and Evaluation www.ihl.org/Engage/Initiatives/100MillionHealthierLives

SCALE is the first community-based phase of the 100 Million Healthier Lives initiative. SCALE, an initiative of the Institute for Healthcare Improvement (IHI), is funded through the Robert Wood Johnson Foundation. The goal of SCALE is to equip communities with skills and resources to achieve significant results in improving the health and well-being of the community-at-large, ultimately closing equity gaps. The 20-month SCALE intensive of “learning and doing” involves partnering of “pacesetter” and “mentor” communities. The community-to-community learning effort will aid in the rapid spread of effective best practices. SCALE uses a formative evaluation approach, the application of a readiness and capability development framework, and a theory of change built on examples of programs globally that have achieved spread and scale.

Soma Stout, IHI, on advice to community organization leaders:

“Be systematic – every system is perfectly designed to obtain the results it gets. Whatever system we create in our communities to achieve health will produce the results it is designed for. If we want different results, we need to change the design.”

Way to Wellville: A Healthy Challenge to Create the Healthiest Communities www.hiccup.co

HICcup (the Health Initiative Coordinating Council) is sponsoring The Way to Wellville challenge. Over five years, five communities of less than 100,000 people, are challenged to make significant, visible, and lasting improvement in five measures of health and economic vitality. In the end, the communities will map new paths for others to make changes that result in healthier people and places. Focus areas will include: improving children's nutrition and exercise, reducing rates of chronic disease, improving social conditions and the overall environment, and assuring that high-quality medical services are available to all. Collectively, these initiatives could lead to big gains in preventing chronic disease.

Insight from Rick Brush, from HICcup:

Advice: “It's not always about new funding; it's often about more effective coordination. There are ways of convening that bring out the best (more inclusiveness, more impact) in collaborative work.”

Pitfall to Avoid: “Presuming to already know the answer, forecloses the possibility of new and more effective solutions.”



PCHCP

Pathways Community HUB Certification Program

pchcp.rockvilleinstitute.org

The Rockville Institute's Pathways Community HUB Certification Program promotes accountable care through the certification of organizations that use formal and standardized processes in the delivery of community care coordination services. Fundamental to certification is the use of the Pathways Community HUB Model of care coordination, which promotes quality services that measurably improve outcomes, and links payment to performance. This evidence-based model ensures an accountable and sustainable community care coordination system that leads to better health and lower costs. PCHCP is the certifying agent of the Pathways Community HUB model of care coordination. PCHCP was made possible through support from The Kresge Foundation and in partnership with the Community Health Access Project, Inc., Communities Joined in Action, Georgia Health Policy Center, and the Rockville Institute.

Brenda Leath, from PCHCP, on lessons learned:

"A comprehensive approach that addresses the whole person and all of his/her risk factors is needed to achieve better health and lower costs. The Pathways Community HUB is an evidence-based model of community-based care coordination that ensures an individual's medical, behavioral health, social, educational, and environmental 'risk factors' are identified and addressed efficiently and effectively."

ReThink Health

www.rethinkhealth.org

ReThink Health works with groups of visionary leaders to transform health at the regional level—their neighborhoods, cities, counties, or states. ReThink Health awakens change makers to what is possible and spurs big-picture thinking that allows leaders to step outside their own frames of reference to better see how the various parts of the system interact in unexpected ways and determine how and where they can exert influence. This is done by deeply understanding the challenges, listening to diverse voices, and working together to harness the information, insights, and actions needed to overcome entrenched beliefs and disrupt the status quo. ReThink's models and tools catalyze systems thinking, foster more effective and broad-based stewardship teams, develop strategies for change, and offer diverse financing approaches so that change is sustainable over time.

Laura Landy, founder and chair of ReThink Health, on pitfalls to avoid:

"Don't be complacent with the status quo and don't believe that a successful, short-term focused initiative will sustainably shift our norms and behaviors. Health is a complex and dynamic system that requires sustained and multi-faceted approaches to change. Multi-sector coalitions can be powerful change agents in creating a culture of health and thriving communities."



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