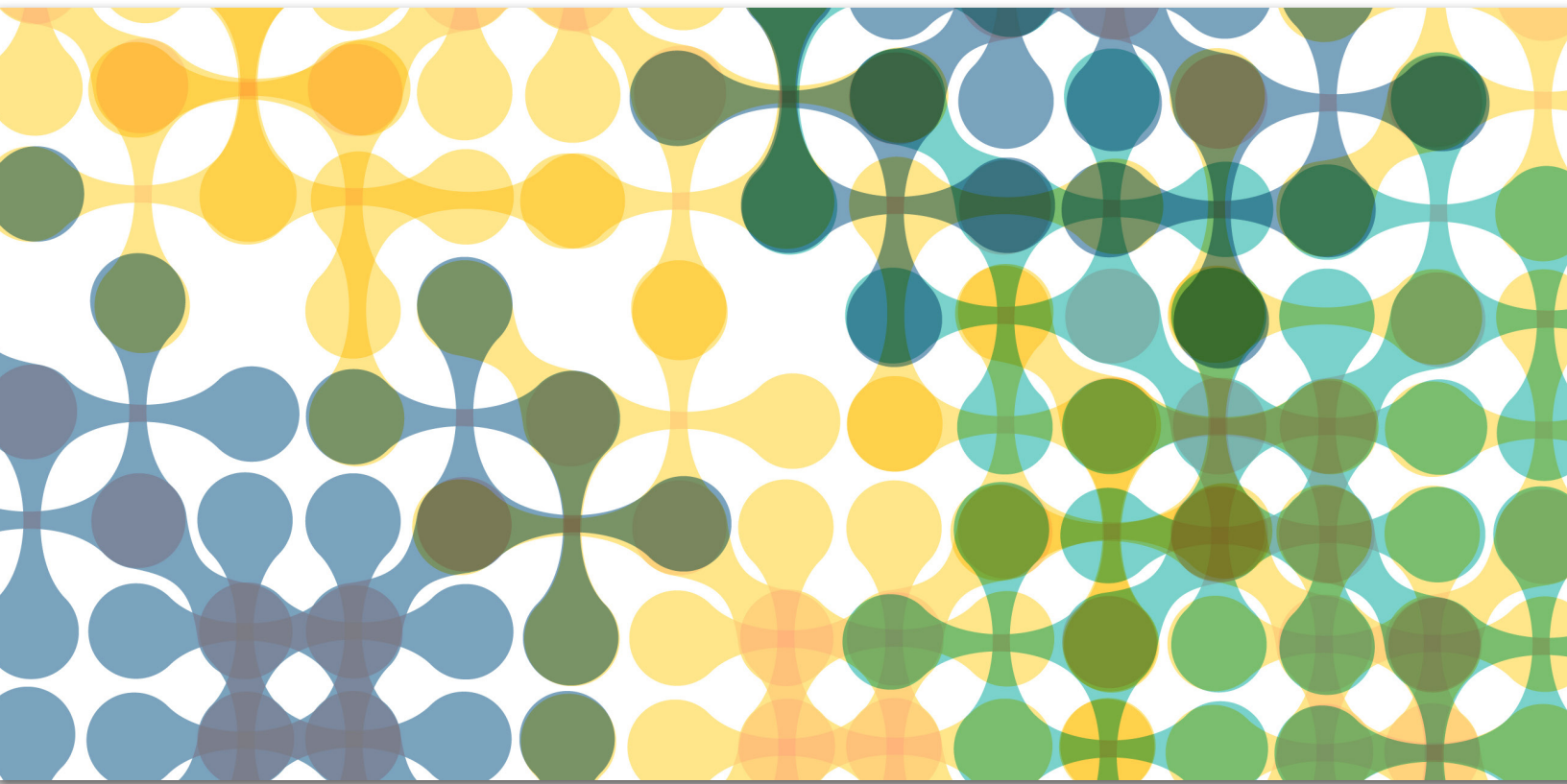


Creating Effective Hospital-Community Partnerships to Build a Culture of Health



Suggested Citation: Health Research & Educational Trust. (2016, August). *Creating effective hospital-community partnerships to build a Culture of Health*. Chicago, IL: Health Research & Educational Trust. Accessed at www.hpoe.org

Accessible at: www.hpoe.org/effectivepartnerships

Contact: hpoe@aha.org or (877) 243-0027

© 2016 Health Research & Educational Trust. All rights reserved. All materials contained in this publication are available to anyone for download on www.aha.org, www.hret.org or www.hpoe.org for personal, non-commercial use only. No part of this publication may be reproduced and distributed in any form without permission of the publication or in the case of third party materials, the owner of that content, except in the case of brief quotations followed by the above suggested citation. To request permission to reproduce any of these materials, please email hpoe@aha.org.

Table of Contents

- Executive Summary.....4
- Introduction.....7
- Building Partnerships Around Community Health Needs.....10
 - CHNA-driven Partnerships.....12
 - Enhancing Existing Partnerships.....14
 - Initiating New Partnerships.....14
- Hospital and Community Organization Partnership Structures.....15
 - Effective Leadership, Governance and Organizational Structures.....15
 - Aligned Mission, Vision and Goals.....17
 - Clearly Defined Roles and Responsibilities.....18
 - Operational Structures and Processes.....19
 - Programs and Interventions to Address Community Needs.....19
 - Assessment of Interventions and the Partnership.....23
- Overcoming Obstacles in Partnership Development.....28
- Creating an Effective and Sustainable Partnership.....31
- Conclusion.....33
- Case Study 1 – SouthEast Alaska Regional Health Consortium – Juneau, Alaska.....34
- Case Study 2 – Indiana University Health – Indianapolis, Indiana.....37
- Case Study 3 – PIH Health – Whittier, California.....40
- Case Study 4 – Cook Children’s Health Care System – Fort Worth, Texas.....43
- Case Study 5 – Duke University Hospital – Durham, North Carolina.....46
- Case Study 6 – WestTennessee Healthcare – Jackson, Tennessee.....49
- Case Study 7 – Montrose Memorial Hospital – Montrose, Colorado.....52
- Appendix A: Survey Methodology.....54
- Appendix B: Partnership Results from the AHA/ACHI Population Health Survey.....57
- Appendix C: The Hospital's Role in Partnerships.....60
- Appendix D: Health Impact Collaborative of Cook County Survey.....61
- Appendix E: Duke Health Division of Community Health Partnership Survey.....63
- Appendix F: Coalition Member Assessment.....65
- Resources.....70
- Endnotes.....72

Executive Summary

Effective and sustainable hospital-community partnerships are critical to building a Culture of Health. Building a Culture of Health means creating a society that gives all individuals an equal opportunity to live the healthiest life they can, whatever their ethnic, geographic, racial, socioeconomic or physical circumstances may be.

To understand the variety of ways that hospitals and communities can develop and sustain partnerships, the Health Research & Educational Trust (HRET), with support from the Robert Wood Johnson Foundation (RWJF), conducted 50 interviews with hospital, health system and community leaders from 25 diverse communities. These interviews resulted in lessons learned and best practices in identifying community health needs, potential partners, and sustainable partnership structures, as well as recommendations for overcoming obstacles and challenges and assessing partnerships.

Though some partnerships develop organically, a catalyst event – such as the initiation of a community health needs assessment process, new policies or payment models, or emerging community health issues – often brings organizations together or revitalizes long-standing partnerships. Hospitals and health systems also are seeking out new and nontraditional partners, such as grocery stores, food banks, 2-1-1 centers and local police departments, to address a wide range of community needs.

As new partnerships form, there is a need for increased structure and effective operations for the partnerships. It is critical to define goals based on the community's health needs when building an effective partnership. When partners come together to address an identified priority health need of the community, the goals and objectives of the partnership should be agreed upon and understood by all partners. The most appropriate governance and organization structure can then be developed, with all partners understanding their distinct role in the collaborative approach to addressing their community's health needs. Shared governance can take the form of steering committees, advisory boards, joint ventures, coalitions and a variety of more informal structures. With a strong organizational structure and identified goals, objectives and roles, these partnerships can effectively develop evidence-based interventions.

Creating effective partnerships within communities also includes evaluating the interventions and the partnership itself. Successful partnerships, including those highlighted in this guide, evaluate the effectiveness of their interventions by using process and outcome metrics. Additionally, hospitals and community organizations are beginning to assess the effectiveness of their partnerships through surveys and such resources as coalition member assessments.

Hospital-community partnerships face some common barriers and challenges, including limited funding, lack of structure, differing organizational cultures, disparate data collection and storage, limited operational resources, and the need for leadership and organizational buy-in. Overcoming these barriers and challenges is necessary to have a positive impact on the effectiveness and sustainability of the interventions. Using a systematic process for forming effective partnerships will ensure that all functions and operations for the partners are identified and established. These functions include structure, communication, representation, funding and other partnership activities.

Figure 1 outlines strategic considerations for creating an effective and sustainable hospital-community partnership to build a Culture of Health.

Figure 1: Strategic Considerations for Creating an Effective and Sustainable Hospital-Community Partnership

Partnership Leadership and Governance
Develop an informal or formal governance/steering group (e.g., coalition, board, committee) with individuals representing each partner organization.
Obtain support and commitment from each partner’s CEO, senior management team, board of trustees and other key leaders.
Develop succession plans with current and future leaders so the partnership does not rely entirely on one person or organization.
Get agreement with all partners on mission, vision, goals, objectives and appropriate intervention strategy.
Draft any legal agreements or memorandums of understanding to solidify the partnership structure, as needed.
Present return-on-investment case to leadership at all organizations.
Partnership Structure and Culture
Clearly define roles and responsibilities of each partner.
Convene active workgroups and committees that focus on execution and continually work to address challenges and barriers.
Engage partners in collaborative problem-solving of jointly shared problems.
Discuss lessons learned on an ongoing basis to modify and strengthen partnership structure and processes.
Ensure transparent and frequent communication between partners and other key stakeholders.
Regularly conduct informal reviews (e.g., Plan-Do-Study-Act cycle) of partnership quality to identify any areas for improvement.

Partnership Program Development and Implementation
Identify health needs through a community assessment, with participation or input from key partners. Develop programs based on prioritized community health needs.
Ensure partners agree on the scope of the interventions (e.g., focus on a few targeted conditions/drivers or a comprehensive range of health and sociological issues).
Identify any evidence-based interventions and promising practices for the identified need, and agree upon process and outcome metrics.
Identify community assets to determine all available resources (e.g., financial, time, facility space, staff, IT, in-kind or other resources) and potential partners.
Identify and apply for secure, sustainable funding. Consider pilot grants if long-term funding is unavailable.
Tracking Partnership Outcomes
Adopt a partnership assessment survey tool to periodically gauge partnership satisfaction.
Measure the impact of the partnership's efforts on the stated goals. Select process measures to signal progress toward the long-term goal.
Share data among partners, particularly data on partnership goals.
Share data with community stakeholders and community members to demonstrate progress.
Ensure that partners measure the perceived quality and impact of the partnership to improve health.
Evaluate how the partnership facilitates ongoing community relationships.
Celebrate successes and communicate stories broadly.

Source: HRET, 2016.

Effective partnerships are important in building a Culture of Health in a community. This leadership guide summarizes a range of approaches that hospitals, health systems and communities have used successfully; provides a framework for building effective partnerships; and describes approaches to evaluating partnerships. Promising practices presented in this guide highlight the importance of leadership, mutual understanding and alignment of goals, common terminology, and transparent communication to cultivate effective partnerships and build a Culture of Health.

Introduction

With the passage of the Affordable Care Act and the adoption of value-based payment models, hospitals and health care systems are being challenged to improve the health of the communities they serve. To successfully improve the health of populations, it is necessary to address the drivers of health, including socioeconomic factors, health behaviors and the physical environment.

Hospitals and health systems are ideally positioned to improve the health of their communities. Not only do they have expertise in improving health, most hospitals are one of the largest employers in their communities and have established strong reputations as major community stakeholders. The scope and multifaceted approach necessary to improve the health of communities is not a task that can be undertaken by a single organization or sector alone. Each organization working independently can have an impact, but by partnering with other organizations around a shared goal, the impact can be much greater. This collaborative approach among partners is essential to build a Culture of Health: a society where all individuals have an equal opportunity to live the healthiest lives they can, whatever their ethnic, geographic, racial, socioeconomic or physical circumstances happen to be.

Cross-sector collaborations to improve community health are becoming widespread across the United States, with many hospitals and health systems playing a key role. Though the impetus for initiating such collaborations varies, the result is clear: Everyone can make a bigger impact if they work collaboratively rather than independently. This approach is sensible because, in many cases, the various community organizations are working on related issues or are targeting the same populations, creating an opportunity to align efforts, reduce duplication and silos, optimize financial resources and, ultimately, improve the overall health and well-being of the community.

While it is widely accepted that a collaborative approach between hospitals and community stakeholder organizations is key to building a Culture of Health, developing and sustaining collaborations remains a challenge for many. As part of the Robert Wood Johnson Foundation's (RWJF) vision to build a Culture of Health, the Health Research & Educational Trust (HRET), an affiliate of the American Hospital Association (AHA), is seeking to advance hospital-community partnerships by learning how hospitals and community partners develop effective collaborations and how these partnerships are measured.

A Culture of Health is a vision where:

- » Good health flourishes across geographic, demographic and social sectors.
- » Attaining the best health possible is valued by our entire society.
- » Individuals and families have the means and the opportunity to make choices that lead to the healthiest lives possible.
- » Business, government, individuals and organizations work together to build healthy communities and lifestyles.
- » Everyone has access to affordable, quality health care because it is essential to maintain, or reclaim, health.
- » No one is excluded.
- » Health care is efficient and equitable.
- » The economy is less burdened by excessive and unwarranted health care spending.
- » Keeping everyone as healthy as possible guides public and private decision-making.
- » Americans understand that we are all in this together.

Source: Robert Wood Johnson Foundation, 2015.

In a past project with RWJF, HRET developed "[Hospital-based Strategies for Creating a Culture of Health](#)." A key approach to building a Culture of Health is the development of multisectoral partnerships to collaboratively address priority health needs within the community.

To further explore collaborative approaches for building a Culture of Health, HRET and RWJF researched the elements of successful partnerships between hospitals and community-based organizations. This leadership guide elaborates on the elements of effective partnerships and provides recommendations on developing and maintaining successful partnerships between hospitals and community stakeholders.

The recommendations in this guide are informed by:

- » Fifty interviews with leaders from hospitals and community organizations, selected from a diverse sample of 25 communities, to determine common themes and approaches for developing effective collaboration. Communities were selected based on a population health survey administered in 2015 by the Association for Community Health Improvement, a division of the AHA.

- » Analysis of the interviews to capture targeted health priorities; approaches to partnership selection, partnership organizational structures and operations; tactics to address collaboration challenges; evaluation approaches; recommendations; and lessons learned for partnership sustainability.
- » Reviews of additional documents collected from hospitals and community organizations for detailed assessments of successful partnerships.

A full description of the methodology can be found in Appendix A.

This leadership guide describes a range of approaches hospitals and communities have used successfully, provides a framework for building effective partnerships and describes approaches to evaluating the effectiveness of partnerships. The guide also includes promising practices that highlight the importance of leadership, mutually understood and aligned goals, common terminology, and transparent communication—all of which will help hospitals and health systems cultivate effective partnerships and build a Culture of Health.

Building Partnerships Around Community Health Needs

Developing partnerships to address community health needs is critical for building a Culture of Health. Though the necessity for collaborative action is currently gaining traction in the health care field, many hospitals and health systems have been working with community partners for years. Leveraging existing assets in the community is an effective way to strengthen partnerships. An asset-based development plan focuses on identifying available resources within the community and building stronger relationships between all community organizations. Assets can be people, physical structures or places, community services and community organizations, which can be used to improve the quality of life within a community.¹ Though using external resources is sometimes necessary, an asset-based development plan enhances the effectiveness of internal resources and planned interventions by mobilizing the entire community's involvement through the use of local assets and skills.²

“It’s [important] to think about partnerships and the process of your partnerships so that you can maximize [the] impact. We can do more collectively than we each could by totaling up our individual actions.”

– Hospital leader

The partnerships described in this guide’s case studies reflect the results of a 2015 survey by the Association for Community Health Improvement and American Hospital Association. This survey identified the percentage of hospitals surveyed that partnered with traditional organizations (e.g., public health departments, other health care organizations) and nontraditional organizations (e.g., educational organizations, faith-based organizations) and the degree to which they are collaborating (see Appendix A). Figure 2 lists different types of organizational partnerships identified during the interviews.

Figure 2: Types of Organizational Partnerships

Category	Examples
Community organizations	Social services organizations, Salvation Army, food banks, parks, zoos
Educational organizations	Early childhood centers (day care, foster care); primary, secondary and post-secondary (colleges, universities) schools
Faith-based organizations	Temples, churches, mosques, other religious or spiritual congregations
Housing and transportation services	Homeless shelters, housing and land development planning commissions, transportation authorities
Government	Local (municipal, city, county), state or federal (Dept. of Justice, Dept. of Agriculture, Dept. of Housing and Urban Development) government employees or organizations; prisons; fire and police departments; ambulance services
Local businesses	Chambers of commerce, grocery stores, restaurants, manufacturing organizations
Public health organizations	Public health departments, foundations and institutes
Service organizations	Lions, Rotary, United Way, YMCAs, Boys & Girls Clubs
Health care organizations	Other hospitals in the community, federally qualified health centers, community health centers, rural health or free clinics, mental health organizations, pharmacies, walk-in clinics, state hospital associations

Source: HRET, 2016.

CHNA-driven Partnerships

The Affordable Care Act requirement that all tax-exempt hospitals conduct a community health needs assessment (CHNA) has served as a primary catalyst for new or augmented hospital-community collaborations. A CHNA is a systematic process to identify and analyze community health needs and assets, prioritize those needs, and develop improvement strategies. Hospitals are encouraged to involve community members and stakeholder organizations throughout the assessment and implementation process. The scale at which these assessments are being done across the country makes the CHNA process a springboard for collaboration to build a Culture of Health.

In 2014, HRET examined a sample of 300 CHNAs to determine the most commonly identified community health needs.³ The most frequently prioritized driver of community health needs was lack of access to care (67%), which includes transportation issues and provider shortages. Other commonly identified drivers include limited preventive and screening services (36%), inadequate chronic condition management (32%), socioeconomic factors (27%) and lack of insurance coverage (27%). For community needs related to health conditions, obesity (70%) and behavioral health (64%) were prioritized by about two-thirds of hospitals. Other commonly prioritized health concerns included substance abuse (44%) and diabetes (36%).

Many community health needs identified by hospitals are aligned with those identified by other community organizations, making the CHNA a prime impetus for collaboration. Hospitals and community organizations interviewed by HRET identified the same priorities as those in the 2014 sample, with many organizations focusing on increasing access to care by providing free health services, increasing provider capacity, or providing care in unique ways such as telehealth or in homeless shelters. Additionally, most hospitals and their

partners focus on better preventing and managing chronic conditions and addressing socioeconomic insecurities.

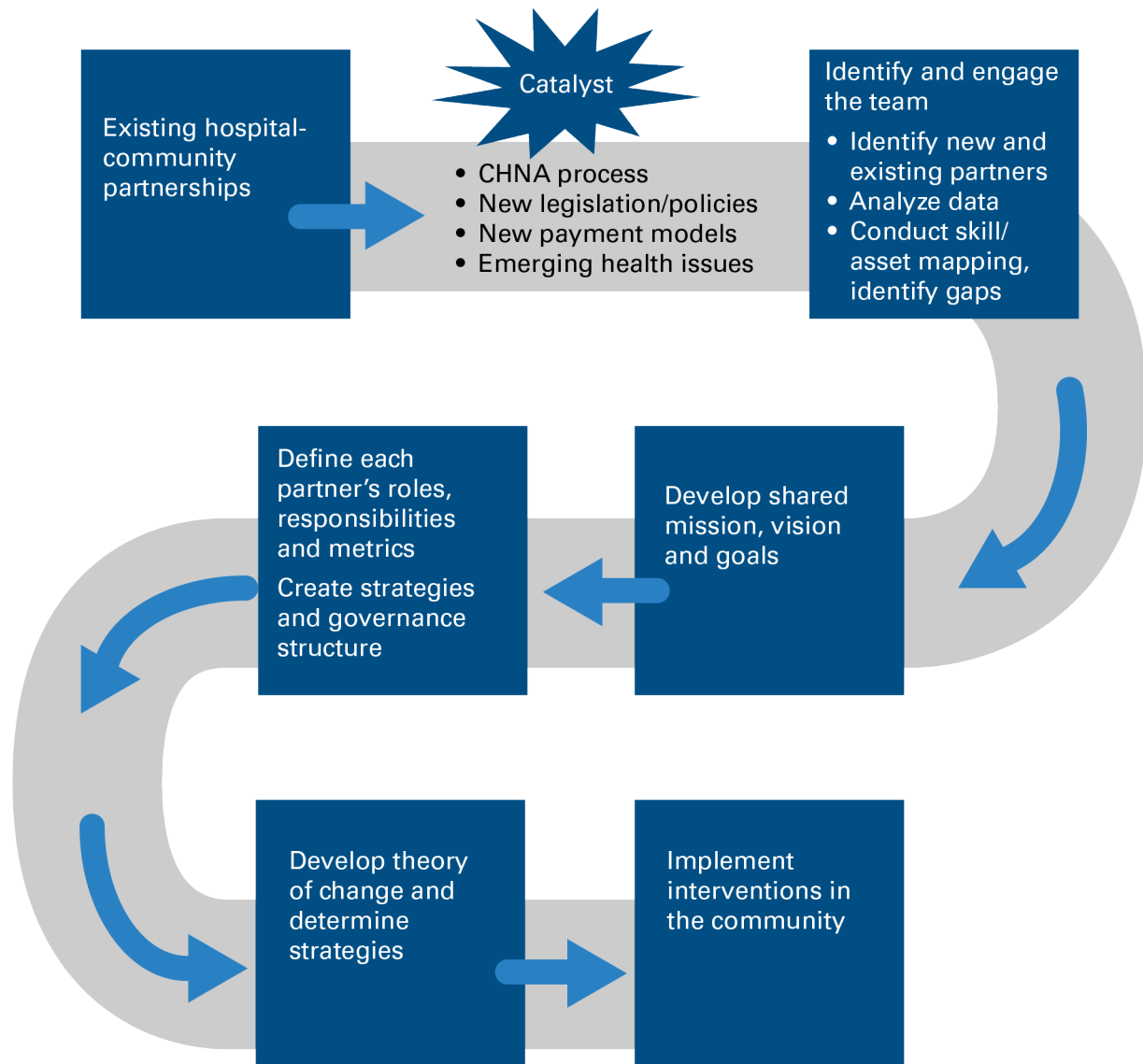
"[We used] a top-down, bottom-up, grassroots type of movement in each of the outlying areas that would be sustainable. As we did this, organizations in those communities joined with us."

– Hospital leader

As the CHNA process has become more robust and new community priorities have emerged, hospitals have developed traditional partnerships as well as novel partnerships focused on needs such as behavioral health and socioeconomic issues such as food security, transportation and crime. More complex partnerships across multiple sectors are being created to address the multifaceted and interconnected nature of community needs, which will help in building a Culture of Health within the community.

Though some partnerships develop organically, a catalyst event – the initiation of a CHNA process, new policies or payment models, or emerging community health issues – often brings organizations together or revitalizes long-standing partnerships. Figure 3 outlines the process hospitals may follow to realign existing partners and identify new partners to address community needs. The timeline for developing these partnerships is dependent on a variety of factors, including the emerging health issue, availability of appropriate partners, ability to build consensus on the mission and goals, formation of trust, and available resources or expertise.

Figure 3. Hospital-Community Partnership Initiation Process



Source: HRET, 2016.

Enhancing Existing Partnerships

Many hospitals established community partnerships before the CHNA requirement and were using these partnerships as a platform to address emerging needs in the community. These partnerships may have developed organically because the individual organizations were working on similar issues or had a shared mission that led to increased contact between them. As these partnerships mature, there is often greater integration between the hospital and its partners. Hospitals and health systems leverage these existing partnerships, which have been sustained over time, to increase impact. Such partnerships also tend to have more formal structures since the organizations have worked together on a specific project, grant or contract.

Initiating New Partnerships

When existing partners are not fully able to meet the health needs of the community, hospitals may seek out additional partners. Identifying potential partners can include a formal vetting process, which may involve examining existing resources and aligning mission and vision. Many hospitals described development of relationships with nontraditional partners, such as government or municipal agencies, faith-based organizations, and transportation and housing services, due to the uniqueness of the community need or lack of available resources.

"The point was that these people had never worked together in a collaborative [manner]. It was an opportunity for [everyone] to experience, in a structured way, how to interact with each other in ways that were productive."

– Hospital leader