

North Carolina Partnerships for Public Health

Incubate, Invest In, and Institutionalize our
Public Health Partnerships

Incubators Year One Report

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UNC
SCHOOL OF PUBLIC HEALTH



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THE NORTH CAROLINA INSTITUTE FOR PUBLIC HEALTH

The backbone of the North Carolina public health system is the state Division of Public Health (DPH) and 86 local, autonomous public health agencies located throughout 100 counties in the state. In 2004, the North Carolina Public Health Task Force, convened by the North Carolina Department of Health and Human Services and DPH, developed recommendations to strengthen North Carolina's public health system through new systems in accountability, accreditation, and data collection. One of the recommendations to increase accountability involved creating voluntary, locally driven, regional collaborations called Public Health Incubators." The purpose of the Public Health Incubators is to promote voluntary partnerships to cooperate on service delivery, management, organization, preparedness, and special projects.

The North Carolina legislature established the Public Health Incubators program in 2004 and allocated \$1,125,000 in non-recurring funding. During the 2005 fiscal year, the program supported 4 regional collaborations that represented half of the 86 North Carolina local health departments. The North Carolina Institute for Public Health at the University of North Carolina at Chapel Hill was designated to coordinate incubator development.

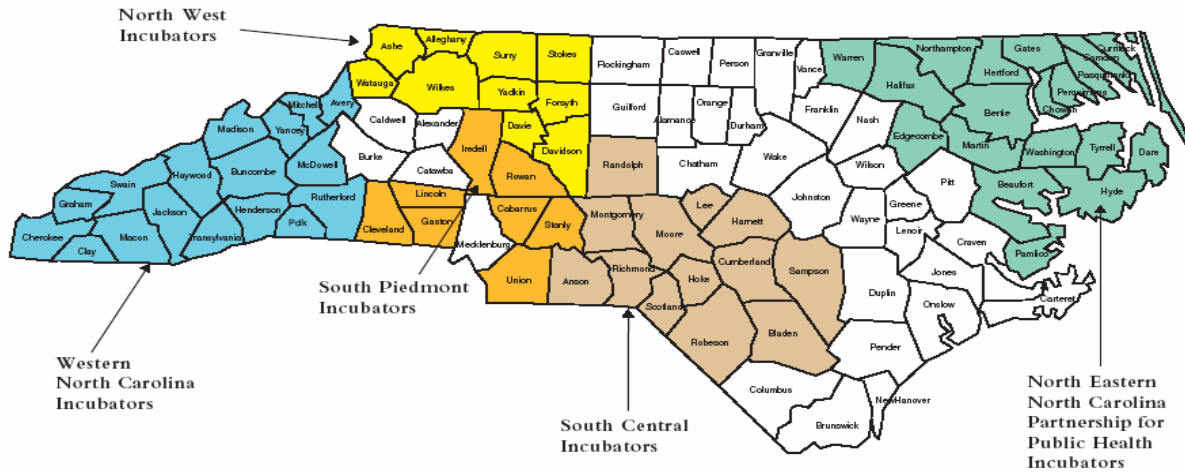
The Public Health Incubators have been established as "voluntary, flexible partnerships" among selected local health departments and an extended set of public health stakeholders. These partnerships are intended to institutionalize opportunities for dialogue and working together. This report summarizes the first year of the incubators' accomplishments. Individual incubator project reports are also available.

The Public Health Incubators are modeled after the Northeastern North Carolina Partnership for Public Health (NENCPPH) which was formed in 1999 and has demonstrated the efficacy of such a partnership. Since its inception, NENCPPH participants have shared and secured funds; undertaken a number of shared initiatives; and hired central staff that serves all Partnership health departments.

Following NENCPPH's lead, the three newly-created incubators have moved ahead quickly as part of the initial group, formally establishing governance structures, identifying strategic direction, and conducting base public health assessments. They are now undertaking specific projects with the lessons learned from NENCPPH and with support from the state legislature. A fifth partnership for public health has recently formed in the south central part of the state. This partnership has created mission and vision statements and bylaws, and will continue to develop regional priorities through its strategic planning process.

INCUBATOR PARTNERSHIPS

Figure 1. North Carolina's Public Health Incubators



Northeastern North Carolina Partnership for Public Health includes Beaufort, Bertie, Camden, Chowan, Currituck, Dare, Edgecombe, Gates, Halifax, Hertford, Hyde, Martin, Northampton, Pamlico, Pasquotank, Perquimans, Tyrrell, Warren, and Washington Counties.

Mission: "To provide, and procure state funding for, flexible regional partnerships for providing the local public health core functions and essential services that assure healthier communities."

Northwest Partnership for Public Health includes Alleghany, Ashe, Davidson, Davie, Forsyth, Stokes, Surry, Watauga, Wilkes, and Yadkin Counties.

Mission: "The Northwest Partnership for Public Health is the formal expression of a long standing and rich tradition of collaboration among its members. The purpose of the Partnership is to build upon this tradition to better secure resources for underserved areas, to enjoy economies of scale, to amplify the Partnership's member voices in support of positive health policy and lifestyle choices, and to clearly demonstrate that such collaborations can more effectively meet the concerns of local, regional, and state policy makers, better addressing public health challenges during times of fiscal constraints and greater accountability. "

South Piedmont Partnership for Public Health includes Cabarrus, Cleveland, Gaston, Iredell, Lincoln, Rowan, Stanly, and Union Counties.

Mission: *"The purpose of the South Piedmont Partnership for Public Health is to assess, address, and assure the public health of our rapidly growing and changing citizenry through flexible, synergistic, and innovative collaboration. Such collaboration is solution-oriented, based on trust, and will enable member agencies to enjoy a critical mass of thinking and resources to effectively and efficiently leverage scarce core resources. We assess, address, and assure our region's public health together."*

Western North Carolina Partnership for Public Health: includes Avery, Cherokee, Clay, Buncombe, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, and Yancey Counties.

Mission: *"Built on a history of informal cooperation, mutual respect, and common commitment to service, and trust, The Western North Carolina Partnership for Public Health is a formal, voluntary partnership of independent public health departments in Western North Carolina. The purpose of the Partnership is to bring the member public health departments together to more effectively share existing resources and garner new funding, to identify and bridge the common interests of the regional academic, healthcare, and public health communities, and together to engage in innovative public health projects. These projects would enhance capacity, raise the public's understanding of public health, and implement regional, population-based interventions for the common purpose of protecting against threats to public health and improving the public's health and well-being in North Carolina."*

South Central North Carolina Partnership for Public Health: includes Anson, Bladen, Cumberland, Harnett, Lee, Montgomery, Moore, Randolph, Richmond, Robeson, and Scotland counties.

Mission: *"The South Central Partnership is a joint venture of local health departments who share many pressing public health issues and through partnership, better address these issues and bring about positive solutions. The purpose of the Partnership is for its membership to work together to identify and secure resources that supplement existing resources, to share best practices, and to collectively assess and address public health issues."*

PUBLIC HEALTH INCUBATOR ACTIVITIES

Each partnership decides on activities to pursue through the incubator. Sample projects include the following.

Shared Revenue Enhancement Activities:

- Establish systematic scanning of grant opportunities.
- Develop collaborative grant proposals.
- Identify and implement best-practice bill collections policies and procedures.

Shared Public Health Prioritization/Quality Improvement:

- Establish regional public health priorities through collaborative community assessments.
- Plan regional programmatic initiatives.
- Collaboratively review and implement best-practice operational policy and procedure for accreditation.

Information Technology Initiatives:

- Design shared Geographic Information System (GIS) services.
- Conduct formal, collaborative management information assessment, identifying opportunities to share information technology support, technology platforms, and applications.
- Design and implement rapid needs assessment capability with custom software, handhelds, and training.

Public Health Promotion and Prevention Projects:

- Conduct regional/collaborative diabetes and obesity social marketing initiatives.
- Conduct regional/collaborative teen smoking prevention and cessation initiatives.

Public Health Workforce Development:

- Training in grants development and management.
- Custom training for public health educators.
- CD-ROM-based board of health/environmental health course.
- Strategic planning courses/conferences.
- Public health orientation for new employees.
- GIS instruction.
- Quality improvement instruction.

ADDRESSING THE 10 ESSENTIAL SERVICES

Delivery of the 10 Essential Public Health Services is an important component of local public health. Incubator projects address many of these services as presented in the table below.

10 Essential Services Addressed by Partnership Projects	%	#
Total Number of Projects Represented = 24		
1. Monitor health status to identify and solve community health problems.	66.7%	16
2. Diagnose and investigate health problems and hazards in the community.	37.5%	9
3. Inform, educate, and empower people about health issues.	66.7%	16
4. Mobilize community partnerships and action to identify and solve health problems.	70.8%	17
5. Develop policies and plans that support individual and community health efforts.	58.3%	14
6. Enforce laws and regulations that protect health and ensure safety.	33.3%	8
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.	41.7%	10
8. Assure competent public and personal health care workforce.	54.2%	13
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.	33.3%	8
10. Research for new insights and innovative solutions to health problems.	45.8%	11
Infrastructure to support delivery of 10 essential services.	41.7%	10
Project did not address any of the above.	4.2%	1

**based on data submitted by project leaders in project progress reports (July 2005)*

Of the 24 individual projects within the North Carolina Incubator Project that completed this evaluation component, only one indicated not addressing any of the 10 essential public health services. All of the remaining projects assisted in providing service or infrastructure in one (or more in many cases) of the essential service areas.

INCUBATOR ACHIEVEMENTS

The regional partnership approach to addressing shared and individual county public health priorities contributed to reaching project goals and objectives as well as introducing many anticipated and appreciated benefits. Members reported that the presence of the incubator relationship and activities within their region provided opportunities and created outcomes that would not have been possible if working as an isolated local unit. Some of these benefits include:

- Regional consistency in public health practice through sharing ideas and working together to interpret requirements and develop policy.
- Creation and expansion of new ideas, shared knowledge, lessons learned, and peer support to reach regional resolutions for local needs.
- Additional funding to plan and conduct necessary training.
- Opportunity to leverage work of other counties and create deliverables for regional dissemination.
- Establishment of regional database and collective data analysis to identify regional community health issues.
- More possibilities for favorable vendor pricing (economies of scale) in social marketing efforts. There is a greater impact when sharing this message with an entire region.
- Improved public health practice and use of technology through increased funding and rapid dissemination of lessons learned and successes through regional relationships.
- Development of mutually agreed upon objectives that make it easier for lawmakers to support non-competing initiatives.
- Shared staff, consulting services, and technical support to facilitate regional and local efforts.

CHALLENGES AND SOLUTIONS

Though the presence of public health partnership activities strengthened public health capacity and activities, this additional commitment to routine practice was challenging for some participants in the incubator project. Several of these challenges were anticipated and overcome by the individual projects that experienced them, while others continue to create barriers to participation and progress.

Finding the time and staff to balance working on regional initiatives with the daily demands of public health practice was a challenge for many participating in this initiative. However, most project leaders were able to reach the objectives they outlined by organizing to improve efficiency, dividing the work load between several staff members, charging incubators for staff time, and continuing to be enthusiastic and dedicated to project excellence. The use of contractors and subcontractors to provide services helped some who had limited staff for project efforts. Some projects used contract renegotiation and development of more realistic expectations to reach project goals.

Facilitating communication with region-wide members and partners is demanding, but participant willingness to work through challenges, patience, and flexibility helped members facilitate collaborative input on project progress. Various forms of regional communication and clarification among partners helped address difficulties in finding time to attend additional meetings, facilitated decision-making, and clarified information to address specific concerns. Incubator advocates continually convinced partners about the importance of collaboration to maintain interest when faced with minimal resources, including staff time.

Achieving consensus on regional initiatives, building trust among partners, resolving communication challenges, and engaging staff and management were barriers that took time for some incubators to overcome. Those that successfully overcame these hurdles did so through the dedication and commitment of members and partners.

LESSONS LEARNED

As regional partnerships worked to carry out their prioritized projects, incubator participants learned many lessons they will carry with them to future projects and relationships. Additionally, they can share insights with others looking to enter, support, or fund regional partnerships and projects.

Realistic Goals and Expectations

- Projects don't happen overnight—these initiatives are a process of continual improvement.
- Set realistic program components considering available time and resources.
- Assess individual agency desires and expectations prior to implementing project activities.
- As a region, select a realistic number of projects to work with; allocate more time to fewer projects.
- Remain focused on overall project implementation and longer term strategic development.

Communication

- Local partnerships and communication of proposed work, activities, and results are vital to project success.
- Be very clear about roles and responsibilities among partners.
- Emphasize the importance of communicating new opportunities with staff.
- Maintain communication with other state/regional stakeholders and incubators in order to seize upon opportunities for partnerships, lessons learned, etc.

Infrastructure and Decision-Making

- Consider using strategic planning methods for selecting project focus areas.
- Offer each incubator member the opportunity to participate in decision-making; involve and engage them directly at the onset of the process.
- Varying levels of expertise and experience among partners provide a well-rounded approach to need identification and problem solving.
- Consult with local, state, and federal agencies when necessary to guarantee you have meet appropriate guidelines, before creating a change.
- Employ objective reviewers in decision-making regarding the allocation of resources.
- Work with experienced and flexible consultants to supplement existing staff.

Collaboration

- Seek non-traditional partners.
- Set an expectation of mutual respect among all partners.
- Staff must be able to work independently and report to a variety of stakeholders.
- Build relationships prior to implementation of a collaborative intervention.
- Get samples, ideas, and input from other agencies before trying to reinvent the wheel.
- Working together achieves more than working alone.
- Share and celebrate best practices; maximize opportunities to share your story.

SUMMARY

Now that they have developed bylaws and missions, and have worked through the challenges of initiating projects on this scale, incubator partnerships indicated that more funding is needed to build on the foundation that this first year of progress developed. For the 2006 fiscal year the North Carolina legislature allocated \$1,000,000 to continue the work of the Public Health Incubators.

The North Carolina Incubator Partnerships facilitate accountability among health departments through encouraging common problem solving, as well as delivery and service improvement. Across the nation, local health departments are using performance standards and accreditation systems to improve public health systems. The North Carolina Incubator Partnership is another model for performance improvement and accountability.