



COALITION HEALTH: BUILDING TOWARD SUCCESS

May 2014

Victor Colman & Robbi Kay Norman

PSE DEVELOPMENT FRAMEWORK — POLICY, SYSTEMS, ENVIRONMENTAL CHANGE

BUILD PARTNERSHIPS

Who is involved and how?



Partnerships are core to all stages of PSE development

Community identification

Shared goal

Coalition-building

- Leadership development
- Engaging the Community Wheel
- Role clarity in advocacy and lobbying

IDENTIFY THE ISSUE

Should something be done?



Is there a problem?

What are the contributing factors?

Is the data compelling (burden of the problem)?

Urgency and timing

What happens if it is not addressed (societal costs)?

Assessing health equity (Does it unequally impact the population?)

DETERMINE OPTIONS

What should be done?



Chose type/level of PSE needed

- Federal
- State
- Local
- Institutional

Collection of proven PSE change ideas

- Evidence-based
- Cost-benefit (ROI)
- How expensive to implement?

Check biases and assumptions of key partners

REVIEW FEASIBILITY

Can it be done?



Prioritize your PSE options based on the criteria below

Political

- Assess political climate and readiness

Programmatic

- Level of complexity?
- Who will implement?
- Enforcement: who/how?
- Can impacts be measured?

Social

- Connection to community values
- Magnitude of impact on the community
- Unintended consequences

DEVELOP ADVOCACY PLAN

How to get the idea into policy?



Know your authorizing environment

- Capacity and resources
- Lobbying vs. advocacy

Choose your PSE pathways

Refine PSE Action Statement

Smart Advocacy

- Frame your message
- Create a movement
- Develop your pitch
- Deploy champions

IMPLEMENT AND ENFORCE

How to make the PSE idea come alive?



Implementation planning

- Ensure adequate resources
- Deploy media to educate about policy
- Collect baseline data
- Counteract obstacles and constraints
- Re-deploy media to shape new norms

Enforcement

- Create prioritization with enforcement
- Ensure adequate and sustained enforcement

EVALUATE OUTCOMES

What happened? What difference did it make?



Short-term outcomes

- Degree of implementation?
- Magnitude of PSE enforcement?
- Foundation built for PSE modification?
- Funds dedicated to implementation?

Long-term outcomes

- Was there any measureable change in behavior (norms)
- Answer the question: What difference did the PSE change make in the lives of the people impacted?

Coalition Cohesiveness

Policy Modification (process begins again)

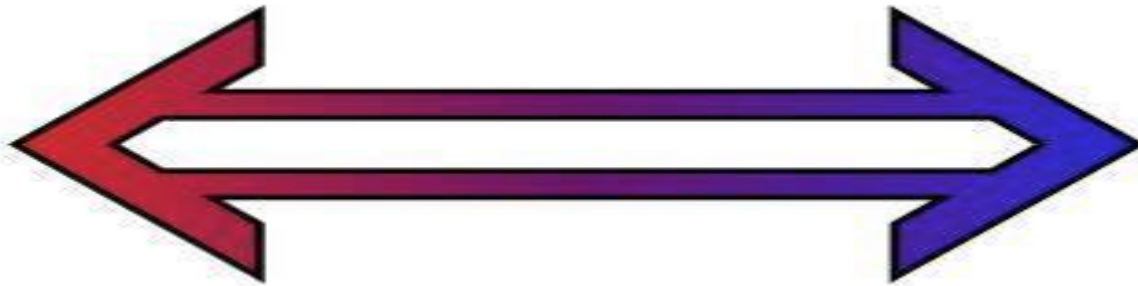
COLLABORATE

PRIORITIZE

ADVOCATE

IMPLEMENT

CONTINUUM EXERCISE



WORKSHOP OUTLINE & PURPOSE

- I. **Recognize** the power of building lasting partnerships and collaborations.
- II. **Understand** coalition typologies and become comfortable assessing what type of coalition falls into which category.
- III. **Recognize** how to evaluate coalition effectiveness.
- IV. **Learn** how to elevate your coalition experience.

**You Are
Here!**



Successful policy work is more than just good ideas;
it is about the “who” – people, relationships,
partnerships and collaborations.



***“If we are together nothing is impossible.
If we are divided all will fail.”*** – Winston Churchill

PARTNERSHIPS AND COLLABORATIONS



THREE REASONS TO DEVELOP PARTNERSHIPS AND ALLIANCES

1. Better Chance of Success

- Program development
- Policy and systems change
- Funding and sustainability

2. Multiple Messengers

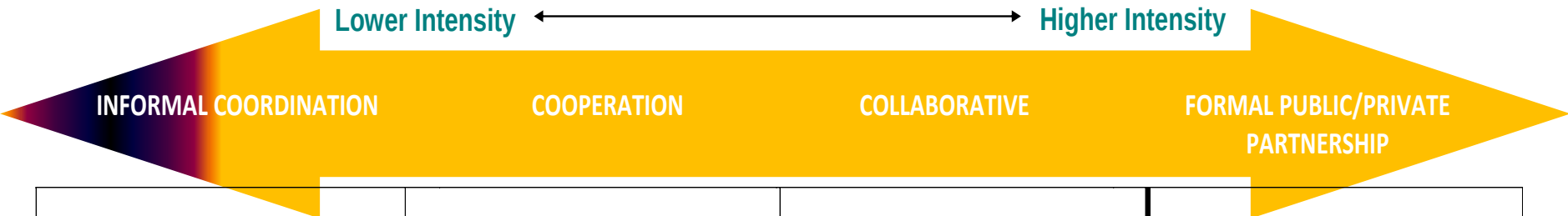
3. Less Work for You (and Your Agency)



PARTNERSHIPS AND COLLABORATION : CREATING EFFECTIVE STRUCTURES

- **Cooperation/Communication** (networking):
Share information.
- **Coordination:**
Some effort made to develop joint endeavors.
- **Collaboration/Integration:**
Development of common agenda
(program, policy)

SPECTRUM OF STAKEHOLDER ENGAGEMENT



Definition: Describes a range of learning opportunities for interested stakeholders to further the goals set by the lead organization.	Definition: Describes a collection of diverse stakeholders that identify and shape Joint efforts. This level of engagement can provide a mechanism to organize, plan, and implement common goals.	Definition: Describes a formal assembly of stakeholders with unique knowledge and skills. This level of engagement allows for recommendations and guidance regarding direction, implementation and resourcing of the shared goals.	Definition: Describes a venture that is jointly controlled, funded and operated by public, private, and community partners. This level of engagement assumes shared risks and rewards including leadership, accountability, and combined resources.
Characteristics: • GOALS: Goals are set by a lead organization and then partners are sought to support it • GOVERNANCE: This does <i>not</i> include any stakeholder governance authority • RESOURCES AND REWARDS ✓ Information exchanged in order to allow each organization to better support the identified goal ✓ Dialogue encouraged among grassroots community groups, agencies, and organizations	Characteristics: • GOALS: Common goals are identified with stakeholder input • GOVERNANCE: This does <i>not</i> include any stakeholder governance authority • RESOURCES AND REWARDS ✓ Stakeholders can provide the basis for new products, ideas, services, and processes ✓ Organizations and stakeholders may develop or modify <i>some</i> joint activities to better meet the common goals ✓ Share information and/or coordinate events together so there are no conflicts	Characteristics: • GOALS: Common goals and priorities are identified and agreed to by stakeholders • GOVERNANCE: This can include formal project governance, including written agreements that detail project charter and any bylaws • RESOURCES AND REWARDS ✓ Stakeholders <i>to</i> provide guidance and expertise regarding strategic planning, political climate, or funding opportunities ✓ Organizations and stakeholders <i>may</i> develop joint staffing or funding models to better meet goals and priorities ✓ Regular project updates are provided for stakeholder guidance and input	Characteristics: • GOALS: Vision, purpose and priorities are mutually set by the partnership • GOVERNANCE: This <i>does</i> include formal authority and structure to govern the project. Partners develop and adhere to written agreements that include: ✓ Clear decision-making processes ✓ Transparent fiscal accountability ✓ Mutual fund development ✓ Shared staffing & volunteers • RESOURCES AND REWARDS ✓ Resources are pooled or jointly secured for a longer-term effort that is managed by the partnership structure ✓ Risk and rewards are shared by all organizations in the partnership

PARTNERSHIPS AND COLLABORATION: EXERCISE

TOOL A: DEFINING TYPE AND KIND OF COALITION

COLLABORATION

LOWER INTENSITY -----→ HIGHER INTENSITY

1. DEFINE YOUR PARTNERSHIPS
2. ARE YOU SEEING FATAL FLAWS?
3. WHAT STEPS CAN YOU TAKE?

WHO IS A COMMUNITY “INFLUENCER”?

Anybody with the authority to distribute funding, resources, human capital - as well as community leaders or those connected to local policy makers.

Examples:

Local, state or federal legislator; county commissioner; mayor; local boards of health or state health administrators; school board members; school board administrator; private business owners; non-profit executive directors (i.e., United Way); respected community member or natural community leaders (i.e., influential parents).

THE POWER OF COMMUNITY INFLUENCERS

Each encounter with any influencer is an opportunity to:

- Market your PSE health service goals.
- Expand or defend critical funding streams.
- Build initial steps to achieve greater public support of your efforts (includes positive media).



Ultimately, positive contact with community influencers can establish yourself and your partners as valuable resources for school health issues

Community Wheel



UNDERSTAND YOUR “AUTHORIZING ENVIRONMENT”

Example – School Setting

- What is the current administrative support and commitment to school health (i.e., is health in the district’s or school’s vision and mission statements and school improvement plans?)
- What individual or team currently guides health services at the district and school level?
- Who facilitates collaboration between the school and the community regarding school health issues?
- How has the community responded in the past to school health issues?



WHO SHOULD BE A PARTNER?

WHO COULD BE A CHAMPION?

School Setting -- Example cont.

- Administrator / Principal / Board member
- School Nurse / Nurse Administrator / Director of Health Services
- Counselor / Director of Student Services
- Staff Safety / Wellness Program Coordinator
- Building Services Manager
- Classroom Teacher / Grade Level Team Leader / Curriculum Director / Health Educator Administrator
- Parent or Other Family Member / Child Caregiver
- Physical Education Teacher / Physical Education Director / Administrator
- Nutrition Services Coordinator / Nutrition Services Director / Cafeteria Manager

FOSTERING CHAMPIONS – OPPORTUNITIES

More Formal Communications

- Invite a decision-maker to address team or coalition meeting of your organization.
- Invite decision-makers to visit a successful program that you administer or work in.
- Use of recognition and awards of local “champions” that have supported your work.



DEPLOY CHAMPIONS – OPPORTUNITIES

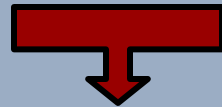
More Informal Communications (spontaneous)

- Take advantage of opportunities (i.e., elevators, soccer games, other community settings).
- Be sure to get to your take-home message (even it is only 30 seconds).
- Could be an opportunity to set up time for a subsequent formal meeting.

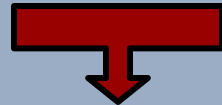


ENGAGING DIVERSE STAKEHOLDERS AS MESSENGERS

Community Player = Diverse Partnerships



Diverse Partnerships = Multiple Messengers



Multiple Messengers = Better Outcomes

WHO: ENGAGING DIVERSE STAKEHOLDERS AS MESSENGERS FOR POLICY ADVOCACY

Power Analysis

- Who **appears** to have power? Who **has** the power?
- What is their self-interest?
- To whom do they listen?
- Who are allies?
- Who are opponents?
- Organizational risks?



Power Analysis Worksheet

Who are the most important individuals?	To whom must you talk before you approach them?	What is the self interest of each?	How do you influence them?	Who should approach each one?

SUSTAINING YOUR COALITION

Key Variables

- Clarity of roles and mission
- Strength in leadership
- Ability to influence and persuade
- Utilize influential champions
- Wide & diverse community involvement
- Adherence to clear values and principles

SUSTAINING YOUR COALITION

Key Variables -- cont.

- Meeting community needs and expectations
- Diversified funding
- Solid infrastructure and management
- Stakeholder engagement
- Adaptability
- Demonstrate positive outcomes

MAINTAINING YOUR HEALTH

- Keep Members Engaged
- Ensure Growth
- Rotate Leadership
- Revise Action Plans
- Spotlight Products from Projects



KNOW YOUR HIGH FUNCTIONING MEMBERS

- Participate in determining the direction of the coalition
- Share organization's needs and concerns
- Assist in goal setting
- Implement activities
- Attend meetings regularly
- Serve as an ambassador or advocate



DEMONSTRATING VALUE

- Tracking our Work
- Evaluation and metrics
- Sharing Costs & Benefits
- Customer-Oriented Branding & Marketing
- Licensing Crosswalks



King County Healthcare Coalition
Program Goals
FY11 (July 2011 - June 2012)
December 13, 2011

	Complete		Continued From FY10		On track		Managing Challenges		Significant Barriers
--	----------	--	---------------------	--	----------	--	---------------------	--	----------------------

Status	% Complete	Projects	Benefitting Sector
Strengthen Coalition Operations			
	80%	Complete text messaging project proposal and identify funding opportunities	All
	55%	Raise \$200,000 in donations to support the Foundation for Healthcare Quality's grant to KCHC	All
	75%	Improve efficiencies in event and contact management through software implementation	All
Build Participant / Partner Network and Awareness			
	60%	Form and convene a King County Disaster Clinical Advisory Committee	All
	67%	Convene seasonal forums and orientations for Coalition participants	All
	67%	Increase awareness of Coalition by submitting to at least 3 publications and 3 large conference presentations	All
	20%	Outline engagement strategies with potential and existing healthcare participants	All
	15%	Identify and engage with local businesses on building capabilities and sponsorship	All
Develop and Deliver Coalition Program Services			
Accreditation and Licensing Support			
	10%	Expand and update accreditation and licensing tools for Joint Commission, DNV, and CMS standards	All
Training, Exercise, and Evaluation			
	100%	Deliver workshops on crisis standards of care, fatality management, pediatric disaster management	All
	100%	Acquire video training capabilities	All
	30%	Complete Phase 1 of Training Competencies Development ~ Outline a competency-based regional training program and implementation plan ~ Define essential training competencies for healthcare	All
	50%	Develop training tools and templates for pediatric response team development, a dirty bomb scenario, regional evacuation, and incident command for ambulatory health systems	All
	50%	Deliver bi-annual trainings on business continuity	All
	50%	Facilitate two regional exercises in the Fall and Spring	All
	25%	Enhance program evaluation with metrics to evaluate program delivery and response capabilities	All
Disaster Behavioral Health			
	75%	Complete Phase 1 of Disaster Behavioral Health Plan, including development of a concept of operations and capability assessment	All
	75%	Update Opioid Treatment Provider Memorandum of Agreement and submit for signatures	Opioid Treatment Providers

THE POWER OF VISIBILITY

Example Objectives:

- Host National Healthcare Coalition Conference with MESH and Northern Virginia Health Alliance.
- Submit to or engage in six publications, large conference presentations and awards.

The Seattle Times

The King County Healthcare Coalition



PREPARE RESPOND RECOVER

A unique partnership serving our community. Saving lives when disaster strikes.

Thank you to our financial sponsors:



For more information, to join or provide charitable support, please contact us at 206.263.8715 or visit our website at www.kingcountyhealthcoalition.org. We are proud to partner with the Seattle-based media for health care and life sciences coverage that places its advertisement, the King County Healthcare Coalition is committed to public health - making a difference.



The 2012 National Healthcare Coalition Preparedness Conference
BUILDING CAPABILITIES THROUGH PARTNERSHIPS



Save the Date:
November 27th & 28th, 2012
Crowne Plaza Old Town Alexandria, VA

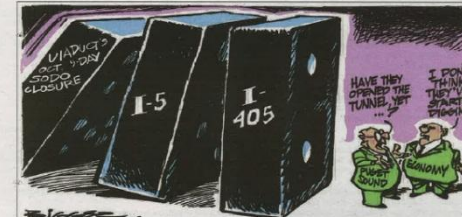
Hosted By:
The King County Healthcare Coalition
Northern Virginia Health Alliance (NVHA)
MESH

Conference Registration:
www.healthcarecoalitions.org
Sponsorship Opportunities Available

Puget Sound BUSINESS JOURNAL Business Leaders Get It.

VIEWPOINT

42 | PUGET SOUND BUSINESS JOURNAL | SEPTEMBER 23-29, 2011



Before disaster, collaboration is critical

In May one of the nation's deadliest tornadoes left 150 people dead, almost 1,000 people injured and thousands of homes, offices and buildings destroyed in Joplin, Mo. — including the regional medical center. What if disaster strikes King County and one of our large hospitals gets destroyed — Harborview, Swedish or Overlake? Are we prepared? Have we practiced how to respond? How many have drilled on this issue?

GUEST OPINION
Johnese Spino
David Grossman

main source of revenue — federal grants — is decreasing. Consequently, our participating health care organizations are already investing in the coalition's broader community campaign and making commitments of financial support. But, the health care industry cannot do it alone. That is why we are reaching out to companies and organizations not responsible for health care — in the local and national arena.

COALITION PITFALLS

- Mission creep
- Power of the lead fiscal agent
- Diversion of key staff
- Turnover
- Member Retention

“Watch your step!”



THE VALUE OF EVALUATION

If you evaluate processes, outcomes, and impacts associated with coalition activities, its members can:

- Improve outreach and coordination skills
- Determine which strategies help the coalition achieve its ultimate goals most effectively
- Improve its reputation and credibility within the community
- Strengthen future fund development proposals

TWO TYPES OF EVALUATION

Coalitions can employ two basic types of evaluation, **process** and **outcome**:

- **Process:** How effective was the process by which the coalition attempted to achieve this goal?
- **Outcome:** What were the short, medium and long-term impacts of the specific efforts being measured?



EVALUATION – PROCESS

Process questions in our school example might include:

- How actively are the current district policies monitored?
- How many times did coalition staff and members meet with local schools to encourage and support urgent injury/illness policies?
- How many schools received resources on how to communicate the proposed policy to key stakeholders?

EVALUATION – OUTCOME/IMPACT

Outcome / Impact questions might include:

- Did the schools that the coalition work with actually change their practices to incorporate the new injury/illness policy?
- Is a school health services coordinator designated to respond to health emergencies?
- Are other school health services staff and other school staff trained to respond to health emergencies?
- Did the new policy result in any measureable data related to better response to emergency related injury/illnesses (e.g., absenteeism)?

ASSESSMENT EXERCISE

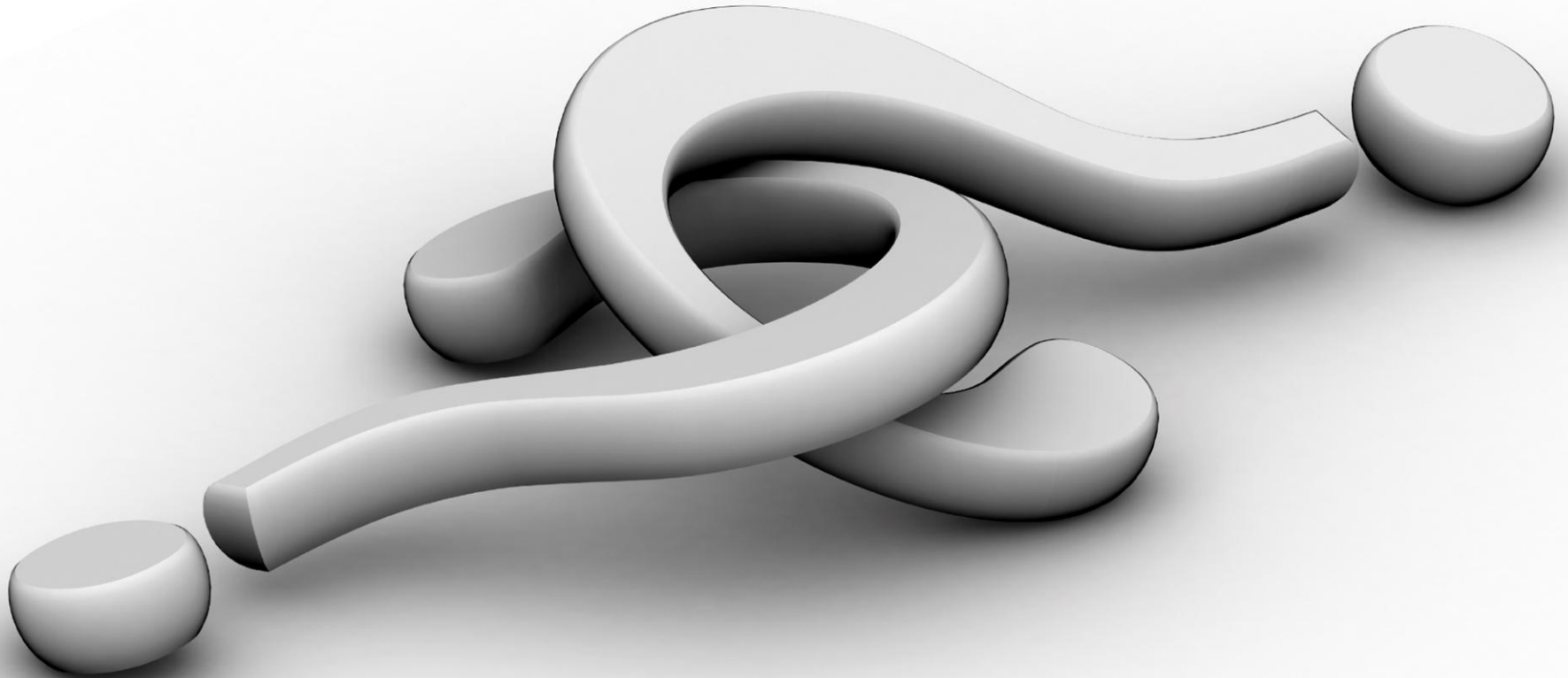


Partnerships and Coalitions – Selected Resources

Stage 1: Coalitions and Partnerships

- http://www.cdc.gov/CommunitiesPuttingPreventiontoWork/resources/foundational_skills.htm
- www.coalitionswork.com
- <http://www.cadca.org/resources/detail/strengthening-partnerships-toolkit>
- Collective Impact:
<http://www.fsg.org/tabid/191/ArticleId/211/Default.aspx?srpush=true>

QUESTIONS





Victor Colman & Robbi Kay Norman

<http://uncommonsolutionsinc.com>