

COMMUNITY HEALTH EQUITY AND PROMOTION BRANCH



Health Commission Update: Community Engagement Health Commission: Community and Public Health Committee

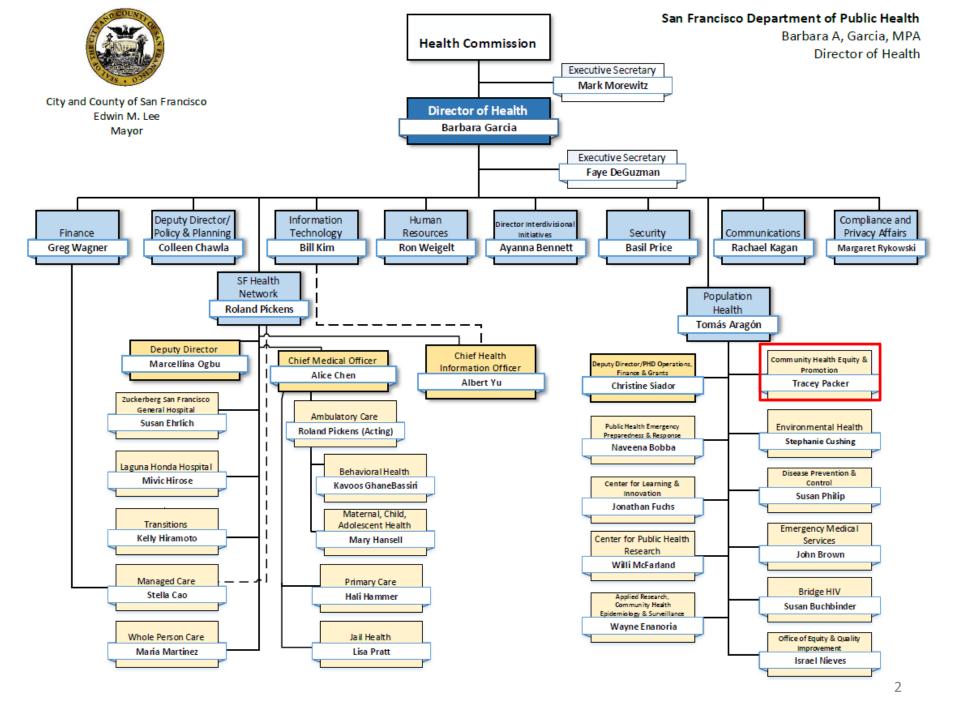
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POPULATION HEALTH DIVISION

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



Population Health Division Organizational Framework

Superb knowledge
management systems and
empowered users

2. Assessment and research aligned with our vision and priorities

3. Policy development with collective impact

4. Assurance of healthy places and healthy people

5. Sustainable funding and maximize collective resources

Learning organization with a culture of trust and innovation. <u>GOAL 1</u>: Build an integrated information and knowledge management infrastructure that enables us to monitor health, to inform and guide activities, and to improve staff and systems performance.

OBJECTIVES:

- 1.1.Build a strong, highly functional information technology (IT) and technical assistance infrastructure in alignment with Department of Public Health IT strategy.
- 1.2 Establish a highly functional, integrated infectious disease system to collect and report data, and to deliver and monitor public health actions.

<u>GOAL 2</u>: Integrate, innovate, improve, and expand efforts in community and environmental assessments, research, and translation.

OBJECTIVES:

- 2.1 Create an action plan that supports division priorities.
- · 2.2 Build cross-section interdisciplinary teams to improve health outcomes and programmatic activities.

<u>GOAL 3</u>: Conduct effective policy & planning that achieves collective impact to improve health and well-being for all San Franciscans.

OBJECTIVES:

- · 3.1 Establish a division-wide Performance Management, Equity & Quality Improvement Program.
- 3.2 Establish systems and partnerships to achieve and maintain Public Health Accreditation.
- 3.3 Develop a prioritized legislative agenda and strategic implementation plan to address health status and inequities.

GOAL 4: Lead public health systems efforts to ensure healthy people and healthy places

- 4.1 Establish community-centered approaches that address the social determinants of health and increase
 population well-being.
- 4.2 Sustain and improve the infrastructure and capacity to support core public health functions, including legally mandated public health activities.

GOAL 5: Increase administrative, financial and human resources efficiencies within the division. OBJECTIVES:

- 5.1 Establish a centralized business office for the division.
- · 5.2 Appropriately address the human resource issues regarding civil service and contract employees.
- · 5.3 Establish a centralized grants management and development system for the division.

GOAL 6: Build a division-wide learning environment that supports public health efforts.

OBJECTIVE:

6.1 Establish a division-wide Workforce Development program.

CHEP Essential Functions



Public health functions of *informing, engaging, educating, and empowering* community.



Support community well-being, sustain healthy communities, and work toward health equity through sustainable change approaches, community capacity building, mobilization, and community partnerships with a racial and cultural humility lens.



Active living, safe and healthy environments, community-clinical linkages, decreasing HIV, sexually transmitted infections, viral hepatitis, and the effects of trauma.



Quality improvement, with a focus on achieving health equity through results-based accountability.

Community Engagement in PrEP



Collective Impact

"Commitment of groups from different sectors to a common agenda to solve a specific problem."

Common Agenda

Keeps all parties moving towards the same goal

Common Progress Measures

Measures that get to the TRUE outcome

Mutually Reinforcing Activities

Each expertise is leveraged as part of the overall

Communications

This allows a culture of collaboration

Backbone Organization

Takes on the role of managing collaboration

Collective Impact: Principles of Practice

- Design and implement with priority on equity
 - Include community members
- Recruit and co-create with cross-sector partners
- Use data to continuously learn, adapt, improve
- Choose leaders
 - Focus on program and system strategies
 - Build culture that fosters relationships, trust, respect
 - Customize for local context

1. Design and implement with priority placed on equity

To achieve sustainable improvements in communities, it is critical that initiatives address the **systemic structures and practices that create barriers to equitable outcomes** for all populations, particularly along the lines of race and class. Initiatives must be intentional in their design from the very outset to ensure that an equity lens is prominent throughout their governance, planning, implementation, and evaluation. Practitioners must disaggregate data and develop strategies that focus on improving outcomes for affected populations.

 Black/African American Wellness and Peer Leaders (BAAWPL)



2. Include community members in the collaborative



Those whose lives are most deeply affected by the problem addressed by the initiative must be meaningfully engaged in the initiative's governance, planning, implementation, and evaluation.

Community members bring crucial perspectives; contribute to refining evolving goals, strategies, and indicators; help co-create and

implement solutions that are rooted in lived experience and have potential for significant uptake; participate in building communities' capacity to lead and sustain change; and participate in data interpretation and continuous learning processes. Engaging community helps collective impact efforts address issues most important to those most directly affected, builds capacity and enables community participation in and ownership of solutions, and helps embed the work in the community so that it will be more effective

and sustainable.

3. Recruit and co-create with cross sector partners

While not all initiatives will engage *all* sectors actively at the same time, collaboratives made up of only one or two types of actors (e.g., all nonprofits, all funders) do not have the diversity required to create the systems-level view that contributes to a robust collective impact initiative. Cross-sector partners share in co-creating the common agenda, identifying shared measures, and implementing the work required to achieve the effort's goals.







4. Use data to continuously learn, adapt, and improve

Remain aware of changes in context, collect and learn from data, openly share information and observations with others, and adapt strategies quickly in response to an evolving environment. Have clear learning priorities, build strong structures and processes for learning, and create a learning culture that enables the group to use meaningful, credible, and useful qualitative and quantitative data for continuous learning and strategic refinement.

 Results Scorecard: An interactive scorecard that provides "snapshot overviews" of performance and contribution to high-level goals, and ability to see details.



Getting to Zero

Getting to Zero Headline Indicators and Performance Measures

GTZ Headline Indicators				
R Zero new HIV infections	Time Period	Actual Value	Current Trend	Baseline % Change
HIV Number of new HIV diagnoses	2016	223	¥ 4	-51% 👃
GTZ Number of new perinatal HIV diagnoses	2011-2015	0	→ 1	-96% 👃
R Zero HIV-related deaths	Time Period	Actual Value	Current Trend	Baseline % Change
GTZ Total number of deaths among people with HIV	2016	165	> 3	-30% 👃
GTZ Number of HIV-related deaths among people with HIV	() ()(-	-	-
GTZ % of deaths among people with HIV that are HIV-related	-	-	-	-
R Zero stigma	Time Period	Actual Value	Current Trend	Baseline % Change
GTZ % of people living with HIV reporting internalized HIV-related stigma	2013/2014	66.3%	1 1	-6% 👃
RAPID Headline Indicators and Performance Measures				
R People newly diagnosed with HIV receive immediate care and treatment	Time Period	Actual Value	Current Trend	Baseline % Change
GTZ Median # of days from diagnosis to viral suppression	2016	51	> 3	-62% 👃

5. Cultivate leaders with unique system leadership skills



Leaders must be able to create a space for people to come together and work out their disparate viewpoints, possess the capacity to foster shared meaning and shared aspirations among participants, help participants understand the complexity and non-linearity of

system-level change, be dedicated to the health of the whole, be willing to change their own organizations in service of the group's agenda, and be adept at building relationships and trust among collaborators.

Tobacco Free Project – Community Action Model





6. Focus on program and system strategies



Use of policy, systems and environmental change — a way of modifying the environment to make healthy choices practical and available to all community members. By changing policies, systems and/or environments, communities can help tackle health issues like obesity, diabetes, cancer and other chronic diseases.

Shape Up San Francisco/Healthy Retail



7. Build a culture that fosters relationships, trust, respect

Participants come to a common understanding of the problem and shared goals to work together and align work in new ways, and to learn from each other. Authentic interpersonal relationships, trust, respect, and inclusion are key elements that are required for this work to occur. **Initiative leaders must be proactive in their efforts to create this culture.**

Community Health Response Team



8. Customize for local context



To deeply understand the problem... both from the data and input from the community and from understanding the existing work and

coalitions that may be working on similar issues.

Customizing the work to fit the local community context enables the coalition to honor, build on, and/or align with existing work and pursue system and program strategies that are most relevant to local needs.





Thank you











San Francisco EMA
HIV COMMUNITY PLANNING COUNCIL











