

Community Health Equity Partnership in the St. Johnsbury District

Supported by funding from the CDC Health Equity Grant awarded to the Vermont Dept. of Health and administered by VTPHI

- · Grounds work in collective impact principles
 - Population and systems level change happen when we work together to achieve results
 - Community members, organizations and institutions all share in the responsibility
- · Builds on the strengths and successes of NEK Prosper!
- Engages a diverse range of community members and partners through new and existing opportunities
- · Develops capacity to advance health equity focused activities

Building Blocks



"Backbone" Agency and Key Staff

(Northern Counties/Kari White)



Action Learning Collaboratives

(VTPHI Coordinating/Resources Archived at NEPHTC)



Community Grants (\$150,000 to be awarded in the St. Johnsbury District)

* <u>NOT</u> the same funding offered through the Vermont Community Foundation







VT Community Health Equity Partnership - Mark Your Calendar - Updated - April 2022

- ALL are welcome
- Stipends available remove barriers to attendance and meeting participation (\$1800/month available)
- Broad range of topics to meet people where they are in terms of experience with collective impact and health equity work
- Encourage participation of those who may not yet be at the table

* Webinars have no limit on the number of attendees.

*Grant End Date, May 31, 2023

Topic	Date	Time	Required Attendees
Webinar #3 - Creating Health Equity in Vermont's Communities: Building partnerships through engagement and trust	May 12, 2022	10-12pm 12-2pm - lunch working session 2-4pm *12-2pm is a time to work with your team, collaborate on webinar prompts, and local groups are encouraged to enjoy lunch together; cost will be reimbursed.	 District Directors Backbone/integrator members/non-profit leadership Community members representing populations most negatively impacted by Covid-19 Stakeholders in partnering organizations supporting your health equity work Local groups are encouraged to enjoy lunch together; cost will be reimbursed
Webinar #4 - Collective Impact Principles and Importance Led by: Backbone/Integrator Organizations	June 2, 2022	8:30-10am	 District Directors Backbone/integrator members/non-profit leadership Community members representing populations most negatively impacted by Covid-19 Stakeholders in partnering organizations supporting your health equity work
Webinar #5 - Topic will be based on input/feedback	July 19, 2022	8:30-10am	 District Directors Backbone/integrator members/non-profit leadership Community members representing populations most negatively impacted by Covid-19 Stakeholders in partnering organizations supporting your health equity work
Statewide Convening (in-person)	Fall 2022 Either last 2 weeks Oct/1st 2 weeks Nov		

Resources

- NEK Prosper! Community Health Equity website
 - https://nekprosper.org/get-involved/nek-community-health-equity/
- Learning Collaborative Archive—recordings, slides, handouts, background materials, for more information:
 - https://nekprosper.org/get-involved/nek-community-health-equity/learning-collaboratives/
- Access to Coaching
 - Padgett Coaching—team support/coaching
 - Health Resources in Action (HRiA)—coaching on health equity, stakeholder engagement, addressing inequities and power imbalance



Community Grants

Total of \$150,000 available to the St. Johnsbury District

* Additional \$150,000 available to Newport District through Vibrant ONE

Community Grants

Make positive change to address ongoing health inequities and advance health equity

Meaningful interactions with residents are vital

Fund organizations that may have been excluded from past funding Activities coordinate and align with other community resources striving to advance equity and impact the social determinants of health

Include strategies that build skills, knowledge, leadership or confidence in new community partners and residents

Positively change formal or informal rules or regulations in an organization or community

Application process will be intentionally designed to build capacity within communities—easy to understand, simplified reporting requirements.

Consider ways for those who may not have an organizational infrastructure to apply for grants to participate.

Change the economic, social or physical surroundings that affect health outcomes

Funds directly benefit people who have first-hand lived experience with health inequities

Consider two deadlines for applications June 1 and November 1, 2022

All funds MUST be expended by May 31, 2023

Some Grant Nuts and Bolts

- Northern Counties will be the fiscal agent and contract with subrecipients
 - Sub-recipients must expend their own funds and invoice for reimbursement
 - Options for organizations without existing infrastructure are being considered
- Discussions on how to allocate funding are ongoing—options may include:
 - · Welcome applications to be reviewed by a smaller team
 - · Provide funds to NEK Prosper! CANs to support projects of their choice
 - · Reserve portion of funding for organizational capacity building
 - · Earmark funds for community engagement capacity building





Tools We Can Use

- · Community Health Equity Assessment
- · Data Driven Problem Statement
- Emergent Learning After Action Review



Community Health Equity Assessment

Instructions:

- Start by deciding who should take this assessment. This decision is up to each district. Things to consider: can the Learning Collaborative Team
 represent the larger community group? Do you want to include more members? If so, how? For example, having a group discussion and
 coming to consensus, or using a survey tool and averaging the results.
- Complete the assessment, using the suggested discussion questions under each topic to get to your answer.

Assessment scoring:

- 1: Not at all
- 2: Starting to Make Progress
- 3: Making Good Progress
- 4: Fully in Place

To what extent does your organization or group		2	3	4	Why is this habit important?
Engage local residents to support your efforts (e.g.,					
by providing input, selecting priorities, co-designing					
strategies, taking action roles, etc.					Local residents have first-hand experience with
Discussion questions: What could you engage					community problems; their perspectives and action
residents in? Who do you engage or want to engage?					roles can help your efforts meet local needs and
How do you want to or engage these residents?					achieve better outcomes.
Ask questions to understand the systemic reasons					
why problems are happening before designing					
solutions. Discussion questions: Have you done a					Strategies that address system root causes are more
root cause analysis? If so, what did you learn and					effective at solving problems. Root causes are the
what has been done to address the root causes?					underlying reason problems are happening.

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Community Health Equity Assessment

To what extent does your organization or group	1	2	3	4	Why is this habit important?
Use action learning and gather rapid feedback from					
diverse perspectives on the implementation and					
impact of your efforts to promote continuous					
improvement. Action learning is also called the PDSA					
cycle (plan, do, study, act). Discussion questions:					
How often does your group use the concept of					
continuous improvement in your work? Example:					
Plan – identify a problem; Do - pilot or implement a					Rapid feedback cycles and action learning helps
strategy; Study – track and evaluate the effectiveness					stakeholders quickly develop and adapt their efforts
of the strategy toward the intended outcome; Act –					until they discover the solution that works in their
adjust the strategy based on what you have learned.					community.
Ask questions during planning and decision-making					
processes to ensure your efforts are contributing to					
equity rather than unintentionally contributing to					
local inequities. Discussion questions: How often					
does your group ask health equity questions before					
making decisions? Example questions: What					
disparities (e.g., differences in outcomes across					
groups) exist related to your organization's targeted					
outcomes? Which groups are experiencing these					
disparities? Are some groups disproportionately					
disadvantaged and advantaged? Which groups should					
be prioritized by your efforts? What					
outcomes/indicators should be used to track progress					
on reducing these disparities? Which do residents					
from disadvantaged groups prioritize? What systemic					
root causes are driving these disparities/inequities?					
Which root causes do residents from disadvantaged					
groups identify and prioritize? Which root causes are					Many routine policies and decisions can
the most important to prioritize for action (e.g., have					unintentionally disadvantage certain groups in the
the biggest impact on affected groups, are prioritized					community, and require intentional consideration to
by residents, etc.)?					ensure they are designed to promote equity.

VIBRANT ONE (Orleans/No. Essex)

VISION: Orleans and Northern Essex is a vibrant, thriving, safe and inclusive community. We work collaboratively toward our shared vision: building on the strengths of our community; honoring voice and choice: and fostering health and wellness, dignity and respect.

WICKED PROBLEM/OPPORTUNITY STATEMENT #1: We are not providing the right mental health/substance misuse care, at the right place at the right time, every time and too many in our community are getting stuck at the wrong level of care/ wrong care location. This is frustrating, costly, and ineffective.

COMMUNITY ASPIRATION/RESULTS STATEMENT #1: Everyone living in Orleans/No. Essex will have easy access to person-centered and coordinated mental health and substance misuse services that are timely, close to home, at the appropriate level and with the appropriate transition supports for continued success in a person's home community.

ACTION TEAM

Rapid learning

through iteration

(accelerated

process) to build

proposal to bring

back to Steering

Committee

ROOT CAUSES

What is holding the wicked problem in place?

(identifying the root causes will help point to strategies to address those root causes)

COMMUNITY ASSETS

Why isn't the problem worse (what's going well)?

(identifying community assets will help point to strategies to make use of assets)

BACKBONE/DESIGN GROUP ROLE

- · Guide Overall Vision and Strategy
- · Support Aligned and High-Leverage Activities
- Establish Shared Measurement Practices
- Cultivate Inclusive Community Aspiration, Engagement and Ownership
 - Advance Policy
 - Mobilize Resources
- Provide Strategic Learning Opportunities
- Cultivate Systems Change Leaders

reduced the number of ED visits/length of stay for

POPULATION GOAL #1b: By 2025 we will have reduced the number of ED visits/length of stay for

POPULATION GOAL #1c: By 2025 we will have reduced the number of opioid related deaths

POPULATION GOAL #1d: By 2025 we will have reduced the number of suicide deaths

POPULATION GOAL #1e: By 2025 we will have

IDEAS of POP LEVEL INDICATORS (how will we know we are achieving our aspiration?)

- Shorter ED stays for MH/SUD
- . More texts to Crisis Text Line
- More local options for "less than crisis-level care"
- · Reduced opioid deaths
- · Reduced suicide deaths
- More MAT providers
- · More MH/SUD providers

POPULATION GOAL #1a: By 2025 we will have

reduced the number of poor mental health days

• Fewer ED visits for MH/SUD

- Decrease in poor mental days

Data Driven Problem Statement

- What is the problem/opportunity?
- What is the community aspiration/expected result?
- Identify the root causes of the problem or the "5 Whys" to guide strategies
- Define population level goals
- How will we know if we have moved towards our aspirations? (population level indicators)

Emergent Learning After Action Review

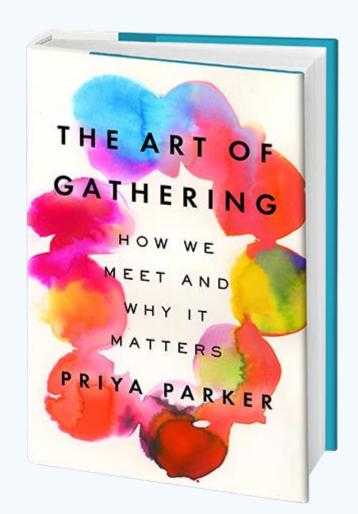
Emergent Learning After Action Review
Organization:
Date:
Intervention:
Target population(s):
What were our intended results?
What were our actual results?
What caused our results?
What will we sustain or improve?
What is our next opportunity to test what we learned?

April 15, 2022; Sources: https://pubmed.ncbi.nlm.nih.gov/23066408/ and https://thesystemsthinker.com/wp-content/uploads/pdfs/120801pk.pdf



Priya Parker and the Art of Gathering

- A gathering is 3 or more people coming together, but so much more!
- Purposeful—has a beginning/middle/end
- THE most powerful tool we have to shift culture, one group at a time as a daily practice
- Connect around a common purpose even though we have different sources of power.
- Choose to share that power.
- The moment of discovery begins with the invitation





Before...107 Eastern Ave, Vermont Department of Health







During...







More Work...





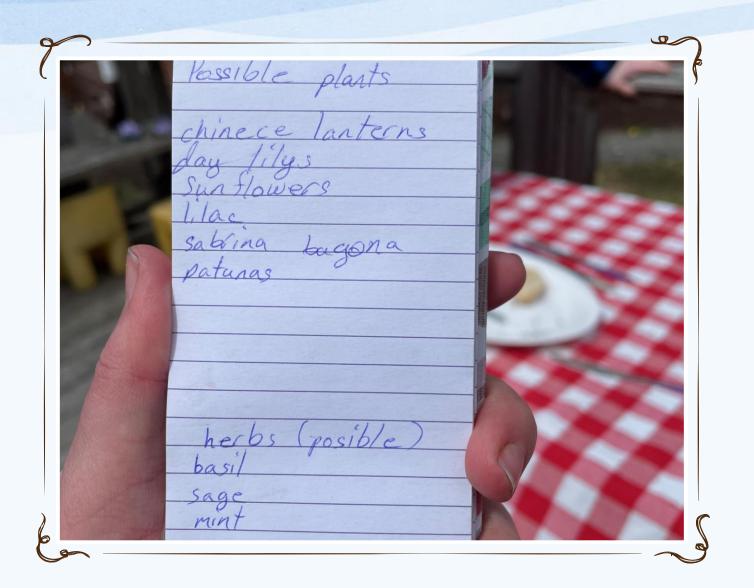


After...









Next Steps

- · June planting day!
- Planting boxes may be themed and incorporate links to Food Hero recipes (Well Nourished CAN)
- Look for more info on the Hub June calendar