NJHI Upstream Action Acceleration Learning Collaborative Session

Theory into Action:
A Road Map for your Upstream Action Acceleration Initiative

June 19, 2019
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Zoom Tips

NJHI Upstream Action Acceleration Learning Collaborative Session

Theory into Action:
A Road Map for your Upstream Action Acceleration Initiative

June 19, 2019
Learning Outcomes

- Connect Upstream Action Acceleration coalition partners for learning and networking.
- Learn tips about using a Theory of Change to guide and assess coalition work.
- Hear examples and experiences from two Upstream Action Acceleration coalitions.
- Share information about the next Learning Collaborative events.
To know whether you are making progress, you must have a sense of what you are trying to accomplish...

Or, in Yogi Berra’s words,

“If you don’t know where you’re going, you’ll end up somewhere else.”
The elements of a Theory of Change

- Contextual Analysis
- Goal(s)
- Activities/Actions
- Short Term Outcomes
- Long Term Outcomes

Assumptions
The elements of a Theory of Change

**Goal**
What is/are the ultimate goal(s) for your coalition?

Assumptions
Facts or conditions that qualify our thinking

**Actions/Activities**
What strategies/activities are your coalition members taking on to achieve your goal(s)?

Assumptions
Facts or conditions that make us believe this intervention or activity will work

**Contextual Analysis**
Identify the major conditions and reasons for why you are doing the work in your community. What are the assets in your community, where are the opportunities?

**Short-term Outcomes**
What are the shorter-term changes that you hope to see that will tell you that you are heading in the right direction to meeting your goals?

Assumptions
Facts or conditions that make us believe these outcomes will happen

**Long-term Outcomes**
What are the positive changes that you hope to achieve in the long-run, that will indicate to you that you have met or are close to meeting your goals?
The elements of a Theory of Change

Goal(s) – the Policy, Systems, Environmental shifts that you are working towards (i.e. where you are heading)

“employable workforce to run the businesses coming to our area, improve environmental conditions including the perception of safety”

“enhance civic engagement and neighborhood revitalization (...) aiming for a lead dust-free, healthy living environment for all children and families, mitigating lead and other environmental issues in affected homes and connecting individuals to needed services”
Goal(s) – the Policy, Systems, Environmental shifts that you are working towards (*i.e. where you are heading*)

**AND** UAA is also about *accelerating how you get there!*
“I think you should be more explicit here in step two.”
While we cannot expect to meet our goals within the timeframe of the UAA initiative, we do need to have a sense whether we are heading in the right direction ...

- Short- and long-term outcomes
- Activities that you are working on that will help you get towards your short- and long-term outcomes
- Milestones or markers of progress....so you (and we) can tell whether you are on the right track!
Unpacking the “miracle” in PSE efforts can be difficult

https://buildhealthchallenge.org/resources/getting-build-ready/

https://healthyplacesbydesign.org/essential-practices/
The elements of a Theory of Change

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OUTCOMES FRAMEWORK

Implementation of BUILD Principles

- BOLD
- UPSTREAM
- INTEGRATED
- LOCAL
- DATA-DRIVEN

Precursors to Systems Change

- Enhanced knowledge, shifts in disposition and behaviors, and refined, complex issue framing
- Increased individual and organizational capacity
- Strengthened relationships and increased alignment among partners and stakeholders
- Strengthened champions and community ownership

Systems Change

- Transformed Norms and Ways of Working
- Implementation of Supportive Regulatory, Legislative and Public Policies
- Organizational Shifts and Scaling that Sustain Practice and Policy
- Re-Allocated and New Funding Streams

End Goals

Improvements in Health and Health Equity

See BUILD implementation continued
See precursor outcomes on slides 2 and 3
See examples on slide 4
See details on slide 4
Enhanced **knowledge**, shifts in disposition and refined, complex issue framing

- Change in knowledge, mindset, openness and disposition among individuals, groups of individuals and organizations to address upstream health, system change
- Change in the way issues are viewed, framed, and overlap - through lenses of upstream health, root causes of health inequity, complex systems, and multi-sector accountability – by individuals, groups of individuals and organizations.

Increased individual and organizational **capacity**

- Enhanced capacity to identify, apply, and better align individual ways of working and organizational policies and practices to address upstream health, health inequities, and disparities.
- Increased understanding of complexity behind upstream issues, including public policies, funding streams, payer systems, and reimbursement mechanisms detrimental and supportive of upstream health and health inequities.
- Increased capacity to gather and integrate new and emerging priorities and interest areas of new partners and external context, and adjust initiative as needed.
- Increased use of existing data and data infrastructure to set priorities, monitor progress, and hold partners accountable.
- Increased capacity to collect information from sources that align with partners’ progress and emerging needs.
- Increasing recognition among partners individually and collectively as thought leaders and reliable sources of perspective on upstream health issues, policies and practices by policymakers and regional leaders.
• Strengthened relationships and increased alignment among partners, stakeholders, and system influencers
  • Demonstrated commitment among partners to the initiative’s goals, for example, through shifts in organizational priorities.
  • Enhanced ability to integrate new partners through common and expanded nomenclature, understanding of interests and priorities, defined roles and responsibilities, and shared learning.
  • Enhanced and new relationships with government, decision makers, and policymakers.
  • Increased leveraging and “parlaying” of partners’ existing relationships, resources, and connections to enhance upstream, system level change.
  • Valuable and expanded connections with local organizations, networks, parallel initiatives that support and enhance upstream work.
• Existence and strengthening of champions and community leadership
  • Stronger, more sustained connections to and engagement with community leaders working in upstream health and across social determinants of health.
  • Increased knowledge and changed mindset about upstream health and framing of issues among community leaders.
  • Enhanced ability to identify and progressively intensify targeted strategies to understand, address needs, create buy in, and empower community leaders and residents.
  • Increasing alignment in focus between partners and expressed needs and priorities of community.
• Increased buy-in and trust among partners, organizations, and entities in the community to collaborate and align policies, practices, and training to support upstream health.
### SYSTEMS CHANGE

#### Transformed Norms and Ways of Working.
Communities transform culture, norms, and default behaviors of organizations in ways that accelerate and aid continued progress, and also harness the “power” of precursors to change systems.
- Sustained and relevant partnership structures and alignment
- Data driven strategies suitable to complex, upstream issues
- Community ownership to resource and sustain work

#### Implementation of Supportive Regulatory, Legislative and Public Policies.
Policies support healthcare and public health by addressing root causes, social determinants of health, and upstream issues.
- Legislative policy shifts
- Infrastructures changes

#### Organizational Shifts and Scaling of Practice and Policy.
Community organizations, institutions and systems effectively move focus from downstream health care to upstream health issues of the community through integrated, sustained, consistent policies and practices.
- Organizational policy and practice shifts
- Changes in data processes
- Integration of organizational systems
- Organizational policy shifts
- Sustain adoption, adaptation, scaling, or mirroring of a new program or service
- Practices and policies adopted for other purposes

#### Re-Allocated and New Funding Streams.
New funding and new ways of braiding and allocating resources are sustained for the long-term
- Funding shifts
- Sustained, institutionalized resources and processes

### END GOALS

**Improvements in Health**, including reductions in: preventable disease and conditions, high utilization of health care system, chronic disease rates, asthma rates, poisoning, injuries, childhood obesity, isolation and social determinants of health in community.

**Improvements in Health Equity** across race, ethnicity, income levels, gender, age, immigration status, education level, and sexual identity.
## IMPLEMENTATION OF BOLD

The Bold principle focuses on (1) implementing systemic change strategies (changes to institutional, regulatory or legislative policies, system or practices); (2) developing a shared understanding among partners of how to address equity issues through systemic change; and (3) identifying ways to blend, braid, and leverage complementary initiative's and resource's streams.

### Primary Factor: Focus on Systemic Change: policies (institutional, regulatory, or legislative), systems, and practices

<table>
<thead>
<tr>
<th>Ground Stage (0)</th>
<th>Early Stage (1)</th>
<th>Middle Stage (2)</th>
<th>Advanced Stage (3)</th>
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<tbody>
<tr>
<td>Initiative articulates the solution in individual and programmatic terms and has not developed any systemic goals or strategies (solutions remain at the programmatic level)</td>
<td>Initiative has begun articulating the solution in a manner that highlights the need for a systemic approach and has developed systemic goals or strategies, but in practice relies primarily on programmatic approaches</td>
<td>Initiative clearly articulates the need for systemic change to address the issue area and has taken a few/small steps toward implementing systemic strategies</td>
<td>The initiative clearly articulates the need for systemic change and has taken significant steps toward implementing a multi pronged set of systemic strategies that can effectively address the issue area</td>
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### INDICATORS OF ADVANCED STAGE

- Developing or implementing advocacy or policy changes and agenda/strategy or communication campaign combat these
- Mobilizing key administrative or legislative partners (policy makers, decision-makers)
- Making individual-level behavior shifts that create momentum for a larger collective shift (e.g. partners begin sharing data)
- Identifying external opposition to necessary strategies to deploy to external forces
- Developing capacity of organizations and individuals to implement
Why is having a Theory of Change and an action plan necessary?

*These serve as great tools for:*

- Resident, community stakeholders, and partner engagement
- Communications including checking assumptions
- Accountability and gut “checking” progress
- Reporting, showcasing, and celebrating mini (and BIG!) wins
Care AC/ AC Collaborative

• Housing specific work started in 2017
• Began with a focus on community safety
• Mapping exercise was first step

Several Findings:
• Duplication of Services
• Fractured/ Unsystematic Responses
• Safety linked to Housing Insecurity
• Lack of data to make decisions
We Needed Housing Data

• How & Where Can We Get Data?
  – Review of Inputs: What is common? Or could be common?
  – HMIS: Who is in? Who needs to be in?
  – Standardization of Tools: Are we using in the same way?
  – Resource Prioritization: Are we allocating resources to those in greatest need? Are we all doing this in the same way?
We Needed a Plan

Data-Driven/ Established Infrastructure to Ensure Housing Security Logic Model

Inputs

Activities

Outputs - Impact

Priorities

- Infrastructure Needs
- Transparency
- Education
- Resources
- Agency Priorities
- Local Dynamics
- Government
- Cultural Values

We Needed a Plan

Goals Setting

- Data Collection
  - Standardized Intake
  - Quality Review Meetings
  - Professional Workshops
  - Presentation Tool
  - Referral Management
  - Case Worker Training
  - Policy initiatives (Data-sharing)

- Goal Setting
  - Definition Development
  - Agency Adoption
  - Assigned Accountability
  - Data Analysis

- Infrastructure Development
  - Referral Process & Network
  - Data Sharing
  - Annual Review of Effects

- Data Agreements Adopted
  - Shared Accountability
  - Greater Resources Available
  - Shorter wait times for housing placement

Evaluation
Pre/Post Knowledge Surveys - charting observations - Community/ Agency Reports - Policy Development - Policy Impacts - participation rates - social and clinical indicators - partnerships - goal attainment.

AtlantiCare
A member of Geisinger

National Quality Award 2005 Award Reception
Small Steps for Sustainable Change

# 1  Data Collection
- Standardized Intake
- Quality Review Meetings
- Professional Workshops
- Prioritization Tool
- Referral Management
- Case Worker Training
- Policy initiatives (Data-sharing)

# 2  Goal Setting
- Definition Development
- Agency Adoption
- Assigned Accountability
- Data Analysis

# 3  Infrastructure Development
- Referral Process & Network
- Data Sharing
- Annual Review of Efforts

Short Term
- Common Intake
- Better Data
- Trained Workforce

Mid-Term
- Community & Agency Goals established and aligned
- Data Agreements Adopted
- Shared Accountability
- Processes Developed, Shared and Implemented

Long Term
- Resources allocated to greatest needs
- Community Trends & Themes Identified
- Improved Quality of Life
- Improved Environmental Factors
- Reduced incidence of chronic homelessness
- Greater Resources Available
- Shorter wait times for housing placement
Documentation & Training

• Documentation of Processes
  – Defined Requirements/ User Guide
  – Understanding How Data is Getting Pulled
  – Accountability Assigned
  – Data Review: Quality Important
    • Does it make sense?

• Training
  – Agency & Case Worker Focused
  – Informal Survey to Capture Needs/ Cross-walked with Consultant Report
Next Steps & Early Wins

Next Steps:
• Aggregate Community Findings to Develop Community Goals
• Develop Interagency Plan to Address Identified Goals

Early Wins:
• Community Driven (Sector & Non-Sector Participants)
• Official & Non-Official Leaders Emerging
Theory into Action: Developing a Road Map for Your UAA Initiative Webinar
Utilizing a Theory of Change

- **Tell**: Authentically tell the story of a coalition’s efforts
- **Measure**: Measure progress
- **Maintain**: Maintain accountability
- **Communicate**: Clearly communicate with participants, partners and funders
- **Prioritize**: Prioritize efforts
- **Focus**: Focus data collection
- **Test**: Test assumptions
- **Change**: Change (or stay) the course
Useful Resource

https://www.plusacumen.org/courses/social-impact-analysis

Social Impact Analysis
How to know if your work is making an impact

IMPACT

COURSE DETAILS
PRICE: FREE
START DATE: SEPT 24, 2019
TIME: 3 HOURS/WEEK
DURATION: 5 WEEKS
INSTRUCTOR: TOM ADAMS

ENROLL NOW

LOGIN
A Roadmap for Your Upstream Action Acceleration Initiative

• **Upstream Goal**
  • Stated as policy-, systems-, and/or environmental-change
  • Target date may extend beyond this initiative

• **Short-term / Year 1 Outcomes**
  • Derived from your Theory of Change or Logic Model

• **Key Activities, Milestones, and Progress Indicators**
  • Specifics about what you plan to do now through December 2019
  • Describe how you will know whether you’ve advanced in your journey toward your upstream goal

*Please share this information by July 15, 2019*
Upstream Action Acceleration
Events & Activities

Webinar – July 17, 1:00-2:15 pm

Affinity Groups

In-Person Convening – September
Chat-in your feedback:

➕ liked, helpful

➖ not helpful, suggestion for improvement

Thank you!