

Multi-sector Partnerships for Health:

2014 PULSE CHECK FINDINGS

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HIGHLIGHTS: 2014 PULSE CHECK REPORT

Across the country, leaders from many sectors are collaboratively reimagining and redesigning the systems that affect health and resilience in their regions. In 2014, representatives from 133 of these multi-sector partnerships in 33 states shared brief profiles of their work using an online questionnaire. While our findings may not represent the full field, they do reveal insights, possibly for the first time, into where and when these groups were formed; who participates; the scope of their visions and approaches; key successes and challenges; and how they finance their work. Here are some selected highlights.

- Multi-sector partnerships for health are broadly distributed across the U.S. and 75% of responding organizations were formed in the last decade (median age = 5 five years).
- Nearly half operate at the county level, with another 22% working at the state level.
- Many constituencies are often involved, with more than half reporting at least 10 different sectors at the table, with certain sectors more commonly engaged than others.
- The most engaged sectors are hospitals and healthcare providers, public health, community organizations, government and elected officials, social services, and academia/research. The least likely to be engaged are: health insurance, philanthropy, and media.
- Nearly half have a broad vision of population health and seek to improve it for all residents, while others focus on a specific disease, risk factor, or population group.
- About one third have a strong emphasis across all four possible action areas, including: health behaviors and risk factors; social, economic, educational conditions or services; health care access, quality, and/or cost; and physical environments.

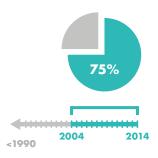
 Nearly three-fourths named financing as their most persistent challenge, with the vast majority relying on just a few, short-term mechanisms, such as grants and contracts.

Based on these findings, there are several frontiers where groups may have room to improve.

- Formation: With so many relatively young partnerships, and with others likely to form, there may be opportunities to get off to an even stronger start as each group learns how to fulfill the basic functions of stewardship, strategy, and sustainable financing.
- Multi-Sector Engagement: The number and diversity of sectors in a partnership can affect its purpose and progress, particularly if certain key constituents are absent. Those who value greater inclusion could engage area residents and colleagues who tend to be less involved but are likely important for progress (such as health insurers, philanthropies, business, and those in economic development).
- Matching Vision and Practice: Groups with the most comprehensive visions generally did not have an equally comprehensive scope and approach in practice. This disconnect may reflect the fact that many respondents had only just begun this work, and it may also a signal a need for new tactics, tools, and support to assure that those with broad ambitions are equally well-equipped to enact a diverse portfolio of programs, policies, and practices.
- Sustainable Financing: Financing for these
 multi-sector partnerships may be either their chief
 impediment or a profound way to unlock greater
 potential. With an expanding menu of financing
 options, leaders may learn to manage a larger
 mosaic of financing mechanisms that together
 could better match resources with the stated
 values and priorities in each region.

HOW WERE GROUPS COMPOSED?

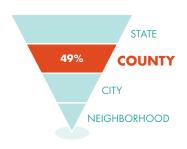
A total of 133 diverse partnerships responded to the Pulse Check.



75% of the groups were formed in the past decade



Most groups had more than 10 of 15 sectors represented



Almost half of the groups focused on **county-wide** change

WHICH ACTION AREAS WERE GROUPS ADDRESSING?

About one third of groups have a strong emphasis across all four action areas.



Healthcare Access, Quality, and/or Cost



Health Behaviors and Risk Factors



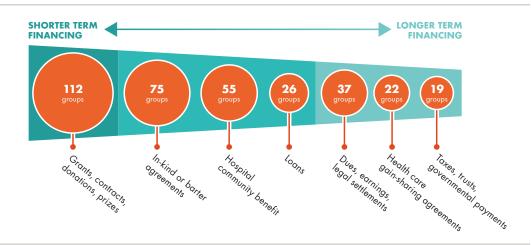
Physical Environment



Social, Economic, Educational Conditions or Services

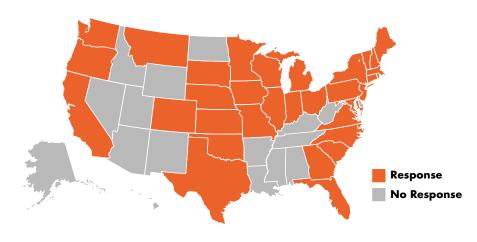
HOW DID GROUPS FINANCE THEIR EFFORTS?

Most groups rely on short-term financing mechanisms.



WHERE WERE GROUPS LOCATED?

Groups from 33 states responded to the Pulse Check.



PARTICIPATING MULTI-SECTOR PARTNERSHIPS

CA	Building Healthy Communities	MA	Interagency Supportive Housing	NH	ReThink Health Upper Valley
CA	Contra Costa Health Services		Working Group	NH	Upper Valley Public Health Advisory Council
CA	East Bay Asian Local	MA		NH	Upper Valley Public Health Advisory
	Development Corporation		Healthier Communities		Council/Upper Valley Substance Misuse
CA	Fresno Healthy Communities	MA	The MGH Center for		Prevention Partnership/Upper Valley
٠.	Access Partners		Community Health Improvement		Healthy Eating Active Living/& others!
CA	Go For Health	MD	Allegany County Health Planning Coalition	NJ	Eat Play Live Better
CA	HEAL Zones	MD	HELPS/HEZ	NJ	North Jersey Health Collaborative
CA	Healthier Community Coalition	MD	Long Branch Health Enterprise Zone	NJ	VNA Health Group
CA	Healthy Sacramento Coalition	MD	Prince George's County Community	NY	Corona Maternal Infant Community
CA	Healthy Ventura County	MD	Advisory Group	NIX	Health Collaborative
CA	Impact Monterey County	MD	The Access Partnership	NY	Intersectoral Forum on Advancing Health
CA	Live Well San Diego	MD	The Partnership for a	NIX	and Equity in New York City
CA	Patient Health Improvement Initiative	NAF	Healthier Carroll County	NY	North Country Health Compass Partners
CA	Prevention Network for Family Health	ME	Cumberland District Public Health Council	NY	Prevention Agenda
CA	Sonoma Health Action	ME	Healthy Casco Bay	NY	Spinney Hill Partnership
CA	South Bay Cities Council of Governments	ME	Healthy Maine Partnership	NY OH	The Bronx Health Link
	Services for Seniors Workgroup/Torrance	ME MI	Health Improvement Organization	ОП	Athens County Healthy
CA	Prevention Community Council thebalancedetectives.org	MI	Health Improvement Organization	ОН	Community Coalition Health Care Access Now
CO	Center for Improving Value in Health Care	MI	Northern Michigan Public Health Alliance Saginaw Pathways to Better Health	ОН	
co	Mesa County Health	MI	The Michigan Health Information Alliance	OII	Healthy Lucas County & Toledo/Lucas County CareNet
CO	Leadership Consortium	MN	Health Care Homes	ОН	Hospital Council of Northwest Ohio
co	Pueblo Triple Aim Coalition	MN	Health Commons	OH	The Health Policy Institute of Ohio
CT	Northeast Neighborhood Partnership, an	MN	Healthy Northland/The Health and	0	Health Measurement Initiative
٠.	initiative of Community Solutions		Wellness Table	ОК	Urban Health Plan
FL	Bithlo Transformation Effort	MN		OR	Community Health and Advocacy
FL	Hialeah Healthy Families	MN	Hearts Beat Back: The Heart of	•	Resource Team (CHART)
FL	Miami-Dade Health Action Network		New Ulm Project	OR	Healthy Columbia Willamette Collaborative
GA	Atlanta Regional Collaborative for Health	MN	Honoring Choices Minnesota/LifeCourse/	OR	Northwest OpenNotes Consortium
	Improvement (ARCHI)		Make It OK/others	PA	Healthy York Network
GA	Georgia Shape	MN	Institute for Clinical Systems Improvement	PA	Lancaster County Medical Foundation
GA	Get Healthy, Live Well	MN	Minnesota Community Measurement	PA	Lighten Up Lancaster
GA	Healthy Houston County	MN	Minnesota Diabetes &	PA	Tobacco Free Coalition and
IA	Iowa Healthiest State		Heart Health Collaborative		Livewell Lancaster
	Initiative/Blue Zones Project	MN	Minnesota Immunization Networking	RI	Healthy Washington County
IA	Quad City Health Initiative		Initiative (MINI)	RI	Interagency Food and
IL	Community Engagement &	MN	PartnerSHIP 4 Health		Nutrition Policy Advisory Council
	Healthcare Partnerships	MN	Tri City Partners	SC	AccessHealth Spartanburg
IL	CommunityRx and the South Side Health		Winona Collaborative	SD	Live Well Sioux Falls
	and Vitality Studies	МО	Greater Kansas City	ΤX	Health and Wellness Alliance for Children
IL	Feeding America Diabetes Initiative		Community Health Partnership	ΤX	The Health Collaborative
IL	GOHIT's Public Health	МО	Heartland Foundation/Healthy	VA	Live Healthy Lynchburg
	Integration Workgroup		Communities	VA	Virginia Center for Health Innovation
IL 	Illinois Alliance to Prevent Obesity	MT	MT Healthcare Workforce	VT	ECOS
IL 	Impact DuPage		Advisory Committee	VT	Winooski Coalition for a Safe
IL 	Kane County Planning Cooperative	NC	Durham Health Innovations		and Peaceful Community
IL 	Strengthening Chicago's Youth (SCY)	NC	Healthiest Capital County campaign	WA	Active Community Environments
IL	Will County MAPP Collaborative	NC	Not yet a formal association with a name	WA	CHOICE Regional Health Network
IN	Floyd County Health Coalitions	NC	McDowell County Health Coalition	WA	Communities of Opportunity
IN IN	Healthy Communities of Clinton County	NC	McDowell Health Coalition	WA	Spokane Regional Health
KS	Reach Healthy Communities Finney County Community Health Coalition	NC NC	Orange County Child Poverty Council	\A/A	District - Priority Spokane Transforming the Health of South Spattle
KS	Healthy Community Wyandotte	NC	Renaissance West Community Initiative	WA	Transforming the Health of South Seattle
KS	Healthy Harvey Coalition	NC	Rockingham County Healthcare Alliance Wilkes Health Action Team	WA	and South King County Whatcom Alliance for Health Advancement
MA	Boston Alliance for Community	NE	North Central Community Care Partnership	WI	Evidence-Based Health Policy Project
WA	Health (BACH)	PA	Way to Wellville Scranton	441	Evidence-Dased Health Folicy Floject
МА	Greater Fall River Partners for	NH	Healthy Monadnock 2020		
WA	a Healthiar Community	NH	NH Citizens Health Initiative		



a Healthier Community

For the full report and to participate in the 2015 Pulse Check, visit: www.rethinkhealth.org/pulsecheck

NH NH Citizens Health Initiative

ReThink Health works with visionary changemakers to transform health at the regional level, helping to identify and overcome the barriers that hinder true reform. ReThink Health is an initiative of the Fannie E. Rippel Foundation, which was founded in 1953 to seed innovations in health and health care.

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