

Community Health Coalition Initiative

Research and Reflected Models



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Product of the Greater Killeen Free Clinic

Table of Contents

I.	Preamble	3
II.	Executive Summary	3
III.	Methodology	4
IV.	Findings	4
V.	Remarks	12
VI.	Limitations	14
VII.	Conclusion	14
VIII.	References	15
IX.	Appendixes	16

Preamble

There are three health coalition models described in this report. Each health coalition model discussed has the overview of its program, the governing members and activities performed for the community. Additionally, there are brief descriptions of local organizations that serve Greater Killeen and are potential health coalition members.

Executive Summary

Maintaining the general health of the community is a process that includes mental, physical, spiritual, and social connections. Stephen Fawcett in *Community Tool Box* stated that, as Citizens, we have the obligation to craft programs that will transform our community, and base these programs on our common values and purposes (2016). With that said, not everyone has an easy path to connect with the resources that will help to build a strong community. Moreover, it is hard for one individual or one organization to implement activities that will respond to community health needs. Community health coalitions are an answer to bring individuals and organizations into a platform to share their existing resources and create new opportunities.

Building a community health coalition is a straightforward process that requires clear understanding of the six foundational steps (5W1H) for a community initiative: Why (1), What (2), Where (3), Who (4), When (5) and How (6). The core project should analytically define what the purpose of the coalition is and thereafter identify potential partners. It is with this perspective I conducted this important research to find out the impact of existing coalitions and other institutions that work closely with the community, and to learn more about their foundational strategies, strengths, and weaknesses. This document will serve as the toolkit for the Killeen Do It Well Community Health Coalition.

Methodology

The research strategies were developed during the first three weeks of August 2016 with input from the Greater Killeen Free Clinic Executive Director, Mrs. Marlene Dilillo. Out of ten identified active community health coalitions (Appendix 1) operating in five states, three were contacted through email with the help of the Health Associate from the National Association of Counties (NACo), Andrew Whitacre, and seven with phone calls.

Additionally, with support from Mrs. Dilillo, local potential coalition partners were either visited in their workplaces and interviewed or were contacted through emails and phone. Two community health needs assessment reports were reviewed.

Findings

Prior to presenting the findings for the three coalitions that will serve as models for the formation of the Killeen Do It Well Health Coalition, it is important to describe the **National Association of Counties (NACo)**, considered one of the important resources for many coalitions in the country.

Founded in 1935 the National Association of Counties has a vision to have “healthy, vibrant, and safe counties across the United States.” According to the Andrew Whitacre, the Association organizes a yearly program called “County Health Learning Challenge” with the purpose of improving the social, economic, and physical environment factors that impact health of a community. In 2015, three counties (Cabarrus County, NC, Knox County, TN, and Salt Lake County, UT) participated in this program. The main activities for the three selected counties were to form a cross-sector team within the community and design strategies that will serve to improve community health.

NACo is a good resource for the coalition to receive updates on its County Health Ranking, to get new strategies to cope with the overall health issues of the community, and to learn from other impactful community health coalitions the different approaches they are using to successfully achieve their goals.

1. Outside the Greater Killeen Area

Community coalitions described in this report operate in different areas of the country. Three community coalitions found to have significant impact and ideals that aligned with *It's Time Texas* (a program toolkit for Mayor' Health and Fitness Council) in their communities are described in this report. The details in the models depend on data gathered and actual activities that the coalitions do within the community.

Model 1: Greater Flint Health Coalition (GFHC)

GFHC is non-profit organization founded in 1992 and is based in Flint, Michigan. It wasn't until 1996 that the GFHC, with other partners, became an incorporated 501 (c) (3). It has 26 member organizations from different backgrounds. The GFHC is a coalition of hospitals, physicians, insurers, businesses, public health, government, nonprofits, educators, community-based organizations, organized labor, and local residents. The organization's mission is to improve the health status of the residents of Genesee County, and improve the efficiency and effectiveness of the healthcare delivery system in Genesee County. The GFHC implements a variety of programs in the areas of health & wellness, healthcare access, quality and innovation, cost and resource planning, sector workforce development, and health fairness (unbiased healthcare).

Health and Wellness: Through the support of the Michigan Department of Health and Human Services, the Greater Flint Health Coalition is one of the five community coalitions in charge of the implementation of the *Michigan 4x4 Plan*. The GFHC implements this program in collaboration with the Genesee County Community. The program involves the commitment of overweight and obese adults pledging to lose 10% of their total body weight using the 4x4 Tool, with the directions to maintain a “healthy diet, exercise, annual exam, avoid tobacco” while managing four health measures (body mass index, blood pressure, cholesterol, blood glucose). Funding for the GFHC's 4x4 Plan activities in Flint & Genesee County is provided by the Michigan Department of Health & Human Services. The funding seeks to bring the community together to increase physical activity practices.

Diabetes Management: This practice is managed through the Community Diabetes Registry, Patient Centered Medical Home and Patient Education. GFHC created a HIPAA-compliant database to track patients' diabetes records. Patients with diabetes are given a 4x4 Plan pocket card with instructions on how to control health behaviors: maintain a healthy diet (1), engage

in regular exercise (2), get an annual physical examination (3) and avoid all tobacco use and exposure (4) - Talk to your PCP about the following health status: Body mass index (BMI) (1), blood pressure (2), cholesterol (3) and blood glucose level (4). Participants can pledge to follow healthy practices and the disease is tracked periodically with the hospital visit support. Progress reports of community members who pledged for the 4x4 Plan are obtained from their primary doctors' offices who are part of the coalition team.

Community Health Needs Assessment (CHNA): In compliance with the Affordable Care Act, the GFHC and its partners jointly conduct community health needs assessments to evaluate the health needs of the community, prioritize the most sensitive issues and develop appropriate strategies.

Community Information Platform: Beside direct health programs that the GFHC conducts with its partners, the organization plays a crucial role serving as a source of health needs information. Their website displays important materials available for the entire community to access. These materials include social marketing campaigns, training opportunities to the underemployed or unemployed community members, and various event information.

Board and Executive: The GFHC has a board of seven officers and executive committee members with the Chair, Vice Chair, President & CEO, Vice President, Secretary, Treasurer and a member in charge of the *Community Liaison*. Added to this panel are twenty-eight directors from different institutions. The administration is composed of the President & CEO who is supported by a collective of 22 staff members (Appendix 2).

Is GFHC a Good Reference?

This organization is an important model for a yet-to-be Community Health Coalition Killeen Do It Well. Its operation's strength is from the collation members who understand the importance of having a strong and healthy community. As a multi-sector organization, the GFHC is able to provide a wide array of health and wellness programs that benefit a large number of the community members. Its success is built on a partnership system.

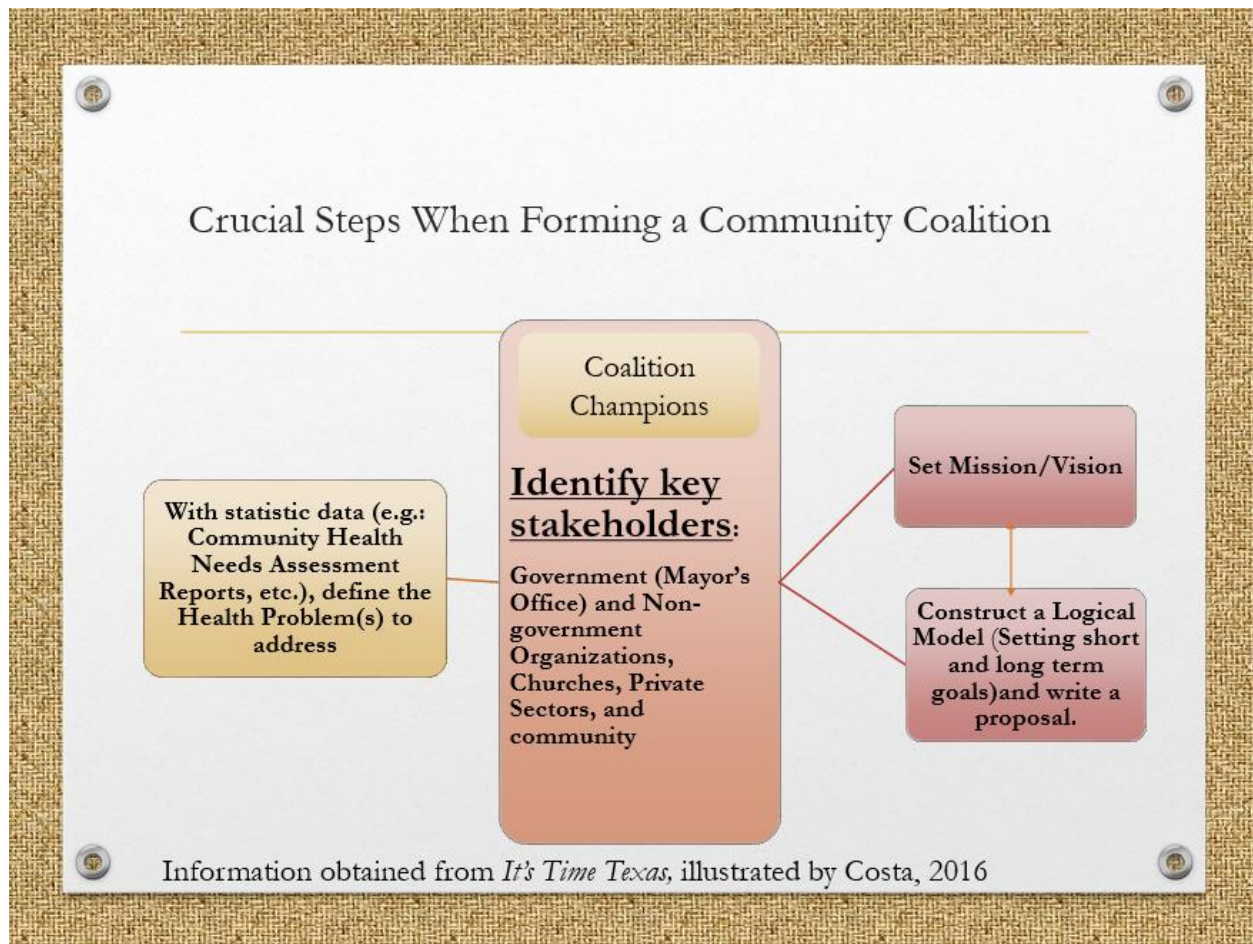
Model 2: It's Time Texas

Overview of the Program

As a program toolkit for community health development, *It's Time Texas* contains rational strategies that can be applied to improve the health of citizens within the state of Texas.

It's Time Texas bases its philosophy on Mayor's Health & Fitness Councils, which are designed "to bring together key community stakeholders and city leaders, as well as local individuals, organizations, agencies, churches, and businesses that share the vision of a healthier community."

The updated toolkit is an informative platform with rich guidance to plan, implement and evaluate community health initiatives. Below is an illustration that depicts the most important steps adapted from the *It's Time Texas* Toolkit to consider when creating a new coalition.



Prioritization

As illustrated above, prioritizing the steps is an important action to systematically design a community health coalition. *It's Time Texas* recommends the following simple but important steps:

1. **Define the Problem:** When establishing a community health coalition, the primary organization should clearly explain health issues to be addressed, and provide current statistical data about the problem reported by competent institutions.
2. **Identify the Key Stakeholders:** It is important to know the most influential partners with possible strategies to contribute to the community health intervention process. In *It's Time Texas*, these partners are called “Champions,” which means they are valuable resources for the coalition. Partnering with passionate and active groups such as school districts, non-government organizations, faith-based organizations, community associations, hospitals, and private sectors is the fundamental first step to building a coalition. At this point, the coalition structure should be constructed with different committees based on the committee members’ major fields of operation, i.e.: policy, healthcare, faith-based, healthy schools, active living, etc.
3. **Coalition Mission/Vision:** With the key stakeholders, a clear mission or vision should be crafted with projected long term goals and short term goals. According to *It's Time Texas*, it is recommended that you check with the Mayor’s vision in order to obtain additional feedback from his/her office to further inform your vision. It is under this vision that SMART (Specific, Measurable, Achievable, Realistic and Timely) GOALS should be clearly defined.
4. **Strategic Plan:** After the above points, *It's Time Texas* suggests that the coalition should consider designing an organized strategic plan that will contain the coalition Mission (1), Priorities (2), Objectives (3), Activities (4) and Goals (5).

Programs

31 cities within the state of Texas have implemented community programs that follow the Mayor’s Health and Fitness Council procedures. These programs tackle individual health development and that of their community as a whole (family, workplace, and community).

It's Time Texas involves different partners to ensure a large number of community members are impacted with the program. For example, in the city of San Antonio, the program focuses on pediatric mental health by helping their parents to manage the level of stress. The outcome of the program is measured through a lifestyle report evaluation showing the status of the patient after a health therapy session. Other fascinating programs include “Teach Healthier After School” in which

children participate in active healthy style lessons. The H.E.B challenge in Coppell, Texas focuses on nutrition, physical and personal/social health.

Note: *It's Time Texas*-program is a packaged tool, which provides all essential tool elements to form a new program to improve community health. However, the toolkit does not provide a monitoring and evaluation (M&E) plan. Even though “Impact/Evaluation” was briefly discussed in the toolkit, M&E are very important actions not only to appraise the program but also to support the entire operation from the conception of the idea to attainment of the goal.

Model 3: Brownsville Wellness Coalition (BWC)

Background:

Based in Brownsville, Texas, the BWC has the mission to “cultivate healthy food and lifestyles”. Brownsville has a predominantly Hispanic population of 175,023, with 41.4 % of residents under federal poverty level (City-Data.Com, 2013). According to the statement from the BWC, 31% of Brownsville’s occupants are diabetic and up to 80% are obese.

Programs:

Brownsville Wellness Coalition was founded in 2008 with the focus to promote ideas for farmers’ markets. It wasn’t until the fourth year of operation (2012) that BWC received funding to hire staff for community garden work. This program has been successful and since then, five community gardens have impacted 850 members within Brownsville. BWC has broadened its program by incorporating diabetes management activities. In 2014, Happy Kitchen and Walking Club program were introduced to the BWC responsibilities.

The Happy Kitchen, known as “La Cocina Alegre”, class is a six-week long program that hosts around 20-25 community members at a time. This series of classes focus on how to cook seasonal and economic foods using fresh produce.

The Walking Club is a program designed to provide “affordable, safe and community building movement to the citizens of Brownsville that will increase physical activity levels”.

Governing Board:

BWC is governed by a board of eight directors and seven staff members. Four of the seven staff members work in Happy Kitchen program, two in farmers’ market section, and one works with the community gardens (Appendix 3).

Potential Local Partners

Bell County Indigent Health Services

This department implements medical assistance programs to individuals who meet the eligibility requirement. According to Ebony Jackson, Deputy Director and Office Manager, “we serve those who are categorically ineligible for Medicaid through Temporary Assistance for Needy Families (TANF), and who reside in the local responsible jurisdictions (County, Hospital District, and Public Hospital).” Those with incomes of 21% of Federal Poverty Level or less are eligible for the program.

Is Bell County Indigent Health Services a Potential Partner?

Bell County Indigent Health Services has an existing partnership with the Greater Killeen Free Clinic to provide medical assistance to some of their patients. As a department that directly deals with the community, Bell County Indigent Health Services can play a big role to provide successful approaches to reach the low-income population in Killeen area.

Metroplex Health System (Wellness Department)

Since 1998, the Wellness Department of the Adventist-based Health System Metroplex offered a variety of community programs focusing on health improvement. These include monthly health related classes and screening for health factors such as blood pressure, BMI, cholesterol, body fat, bone density, height, and weight. Additionally, the Wellness program conducts blood drives and immunization/flu clinics, oversees the CREATION Health Grant with the Boys and Girls Club of Central Texas, and diabetes education, as well as fitness classes like Zumba, Tai Chi, cardio kickboxing, yoga, arthritis exercise, step aerobics, Zumba Tone and CPR lessons. Furthermore, there are two special services: Prime of Life that benefit individuals aged 55 years and older, and monthly childbirth classes for mothers of the more than 1,400 babies born at Metroplex each year. According to LaToya Ellis, the Wellness Coordinator, Metroplex works with the community to implement community outreach programs, including an annual Silver Classic 5K Run and Walk each spring, Breast Cancer 5K Walk, and a KidFest Health and Safety Fair every fall. The audience for the Wellness Department is community living in Killeen, Copperas Cove, Lampasas, Kempner, and Harker Heights. The program is funded by a yearly budget that is at the discretion of the Metroplex Health System.

Is the Wellness Department at Metroplex a potential partner?

As a community health program, the Wellness Department from the Adventist Health

System is an important community partner. Previous experience in community outreach programs is an essential element for new community outreach efforts. Therefore, the Killeen Do It Well Community Health Coalition should consider the foresaid Wellness Department at Metroplex to be a member.

Hill Country Community Action Association (HCCAA)

Operating in 13 locations, the HCCAA has two Multi-Service Centers operating in Killeen and which to provide opportunities and resources to improve the lives of central Texans. The HCCAA provides assistance to senior citizens who are 60 years and older and disabled-individuals. This assistance includes home delivered meals, utilities assistance, and Medicaid transportation. According to Yvonne, one of the staff at the HCCAA in Killeen, the Center assists almost 100 seniors in Killeen, mainly by providing a space to congregate for hot meals and sharing ideas. The center has in-home services to eligible seniors who benefit from the Meals on Wheels program. The organization is funded by United Way, Area Agencies on Aging (AAA) and from other funding sources.

Is HCCAA a Potential Partner?

Aging populations are a part of the entire community system. Consequently, baby boomers and seniors should be encouraged to be proactive in the promotion of programs that tackle the health of the community. When constructing a community health coalition, it is important to partner with organizations such as HCCAA that have interaction with senior citizens. As with other coalition members, HCCAA is a good resource to create relations between the coalition and the senior population in Killeen.

Texas A&M University-Central Texas

As an academic institution, the Texas A&M University-Central Texas has a Health and Wellness program to promote health to students. Paul York, the Associate Dean of Student Affairs & Deputy Title IX Coordinator, said that their main focus is the implementation of a drug and alcohol prevention program. Beside the drug and alcohol prevention obligation, the Health and Wellness program has implemented and plans to continue the HIV prevention program. Additionally, and in-campus counseling service.

Is Texas A&M University-Health and Wellness a Potential Partner?

Texas A&M University-Central Texas Health and Wellness team works actively with the community in different aspects of life. Considering this organization as a partner will bring academic resources to the planning process and also open the door to access the student and youth population during the coalition's operational stage.

Mission Soup Kitchen

Mission Soup Kitchen serves hot meals and provides clothing and personal care items to those in need. All of these services are made possible because of different kinds of donations from the local community. Some donate their time to clean, cook, and serve, while others donate foods and household items like kitchen soaps, towels, hand soaps, and hand sanitizers. Additionally, Mission Soup Kitchen receives monetary donations. The social problem the organization is working on is poverty reduction. The population served at the Mission Soup Kitchen is composed of homeless and other individuals who can't easily afford meals or clothing by themselves.

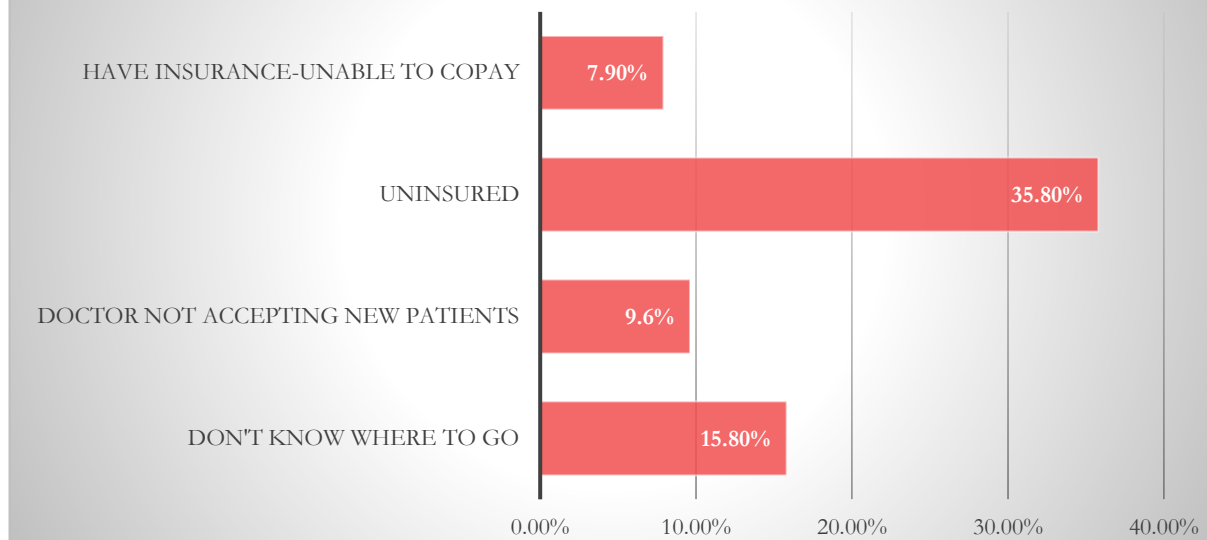
Is Mission Soup Kitchen a Potential Partner?

Considering organizations that directly work with the low-income individual is one of the best strategies to empower the community. Mission Soup Kitchen can be a key partner to promote health in the community.

Remarks

According to the National Association of Counties, Bell County is the 89th in State of Texas as far as Health Outcomes are concerned based on quality of life and taking the 110th rank on Health Factors, based on weighted scores for health behaviors, clinical care, social and economic factors, and the physical environment (NACos, 2016). Based on both the Bell County Community Needs Assessment and the Community Health Assessment compiled by the Metroplex Health System in Killeen, there are indicators of concern in the health of Killeen. Both reports indicated a deficient of healthcare accessibility and prevention programs. However, there are services such the Greater Killeen Free Clinic that provide adequate medical support to the uninsured from different parts of Bell county. Below is the chart with data related to healthcare accessibility in Killeen:

Healthcare Accessibilty Concerns in Killeen



Data retrieved from the Metroplex Health System Community Health Needs Assessment Report, page 40, 2016

As previously noted, coalitions contacted that operate outside of the Killeen area work in the health context either by providing foods, or by creating channels for the community to access affordable healthcare. Large numbers of community health coalitions are involved in food recovery programs; consequently, they work partner with grocery stores and other food resource organizations. Conversely, coalitions that focus to improve community access to healthcare, partner with healthcare oriented institutions. Subsequently, other institutions such as businesses or academic institutions have little or no representation. These observations prompted me to research and create a picture of an ideal community health coalition.

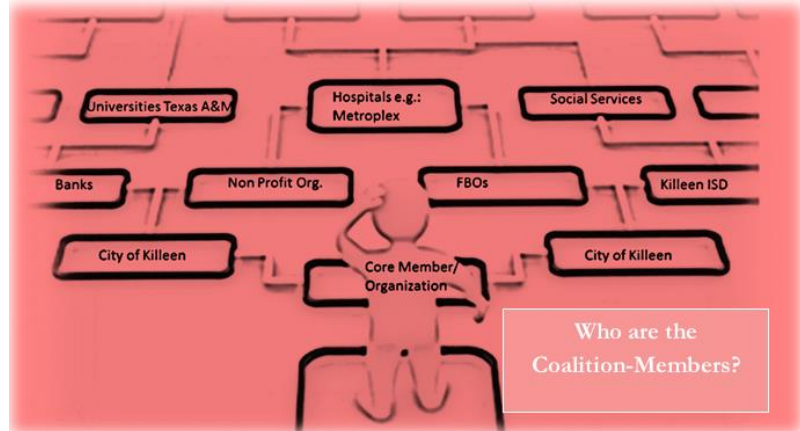
Important Steps to Consider

1. Defining the Community Health Coalition Concept: It is important to know that a coalition is formed by individuals or organizations from different backgrounds who come together to implement programs that will achieve a common goal. Therefore, in order to develop a conceptual framework for exploring community health collation concepts, some of the key issues are:

- What is the purpose of the community health coalition? In this case, what is the new thing that the Killeen Do It Well Community Health Coalition is bringing in the community? Is there any particular health concern?

- Is the Killeen Do It Well CHC part of community development? This step should be clearly defined in both geographic and community setting. Note that the umbrella term is “Killeen Do It Well.”

2. Coalitions create alliances among those who do not routinely work together. It is the responsibility of the core organization to identify initial partners who will be



invited in the first meeting. To ensure a thorough identification, the Greater Killeen Free Clinic should critically assess organizations with existing experience working with the community.

3. Community connectedness should be at the forefront of the Killeen Do It Well CHC. The coalition should provide strategies that enable active community involvement. Approaches such as direct service delivery systems should be well defined in the coalition model. These processes should go with the description of the selected areas of intervention. It is very important to have focuses that the coalition will have the ability to implement.

Limitations

Confidentiality: Coalitions contacted could not provide all the information needed for this research. From my observation, the governing hierarchy and the budget were shared at discretion. It was hard for some individuals contacted to discuss how their directors are elected and how staff are recruited. However, they would discuss the most relevant elements, including the goal behind forming the coalition and programming. Other challenges noted during research were caused by bureaucracy. Some staff members of contacted coalitions would not freely discuss when they started, who their audience is, or how they get funding until they talked to their “directors” who were busy and reluctant to respond. Another challenge noted is that some staff referred me to a coalition’s website which had limited information.

Conclusion

Conclusively, the research conducted was very crucial to provide a clear path for a yet-to-be built coalition. Elements gathered in this report will help to identify both the area of operation and

the audience. This report will serve to point to the primary partners who will form the first team of the coalition.

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1. List of Community Health Associations Contacted:

- Beaumont Community Health Coalition, Grosse Pointe, MI
- Brownsville Wellness Coalition (<http://www.brownsvillewellnesscoalition.com>), Brownsville, TX
- Coalition of Orange County Health Centers (<http://www.coccc.org/>), Santa Ana, CA
- Durham Community Health Coalition, Inc. (<http://www.chealthc.org/>), Durham, NC.
- Greater Flint Community Health Coalition (<http://gfhc.org/>). Flint, MI
- Health Alliance of Northern California (<http://thehanc.org/>), Redding, CA
- Hunger and Health Coalition (<http://www.hungerandhealthcoalition.com/services-programs>), Boone, NC
- Minnesota Community Health Worker (<http://mnchwalliance.org/who-are-chws/roles/>), St. Paul, MN
- National Association for Counties (<http://www.naco.org/>)
- Redwood Community Health Coalition (<http://www.rchc.net/>) , Redwood, CA
- Woodlands Wellness Coalition (<http://thewoodlandswc.weebly.com/>), Woodlands, TX

2. Greater Flint Community Health Coalition: Staff Members (Obtained from <http://gfhc.org/about/staff/>)

STAFF

1. President & CEO

Collective Impact Team

2. Vice President of Programs

3. Assistant Project Manager

4. Administrative Assistant

5. Executive Assistant

6. Project Director

7. Special Projects Coordinator

8. Social Worker

Genesee Children's Health Access Program (CHAP)

9. Social Worker

Genesee Children's Health Access Program (CHAP)

10. Assistant Project Manager
Genesee Children's Health Access Program (CHAP)
11. Assistant Project Manager
12. Case Manager & Job Development Specialist
Flint Healthcare Employment Opportunities (FHEO) Program
13. Social Worker
Genesee Children's Health Access Program (CHAP)
14. Nurse Case Manager / Clinical Care Coordinator
Genesee Children's Health Access Program (CHAP)
15. Program Director
16. Senior Program Director,
Genesee Children's Health Access Program (CHAP)
17. Assistant Project Manager
18. Case Manager & Job Development Specialist
Flint Healthcare Employment Opportunities (FHEO) Program
19. Nurse Case Manager / Clinical Care Coordinator
Genesee Children's Health Access Program (CHAP)
20. Project Manager
21. Outreach & Enrollment Coordinator
22. Social Worker
Genesee Children's Health Access Program (CHAP)
23. Nurse Case Manager / Clinical Care Coordinator

Genesee Children's Health Access Program (CHAP)

3. **Brownsville Community Health Coalition-Board of Directors**

(<http://www.brownsvillewellnesscoalition.com/who-we-are>)

Board President

Board Vice President

Board Treasurer

Board Secretary

Board member (4) one is has a Ph.D.