Systems for Action
Systems and Services Research to Build a Culture of Health

PHSSR Research-In-Progress Webinar

Wednesday, November 4, 2015   12:00-1:00 pm ET/ 9:00-10:00 am PT

Bridging Health and Health Care

Evaluating the Impact of Organizational Partnerships on Community Resilience

Note: *Download today's presentation & speaker bios from the 'Resources' box in the top right corner of the screen.*

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Center for Public Health Systems
and Services Research

Agenda

Welcome: C. B. Mamaril, PhD, *Systems for Action* National Program Office, Research Assistant Professor, U. of Kentucky College of Public Health

"Evaluating the Impact of Organizational Partnerships on Community Resilience"

Presenter: Malcolm Williams, PhD, MPP, Behavioral & Policy Sciences Department, RAND Corporation *mwilliam@rand.org*

Commentary: David Eisenman, MD, MSHS, UCLA Center for Public Health and Disasters *deisenman@mednet.ucla.edu*

Sandra Gomez, RN, Los Angeles County Department of Public Health *sagomez@ph.lacounty.gov*

Questions and Discussion

Presenter

Malcolm V. Williams, MPP, PhD

Policy Researcher

Associate Director, Behavioral and Policy Sciences Department

RAND Corporation, California

mwilliam@rand.org

PARTNER provides an assessment of coalition relationship characteristics and community resilience activities

Malcolm V. Williams, MPP, PhD

RAND HEALTH

Study Team and Organizational Partners

Study Team

- Anita Chandra, DrPH
- Asya Spears, MA
- David Eisenman, MD, MSHS
- Danielle Varda, PhD
- Sara Sprong, MPA

Organizational Partners

- Los Angeles County Department of Public Health
- University of California Los Angeles
- Emergency Network Los Angeles
- Loma Linda University
- Community Partners

Research funded by the Robert Wood Johnson Foundation
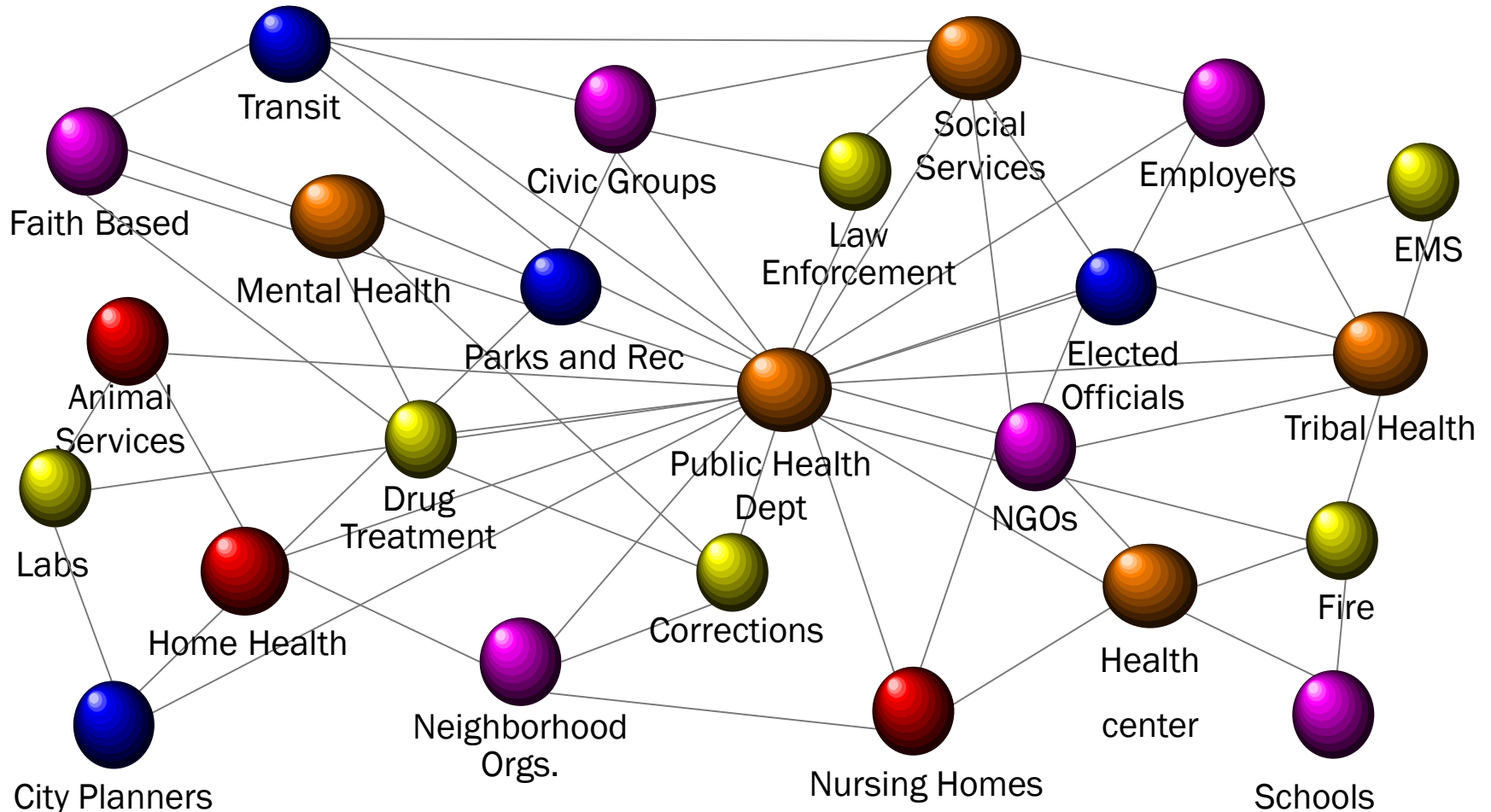
Community Resilience

Definition Developed with Communities (2008-2010):

The ongoing and developing capacity of the community to account for its vulnerabilities and develop capabilities that aid in:

1. preventing, withstanding, and mitigating the stress of a health incident;

2. recovering in a way that restores the community to a state of self-sufficiency and at least the same level of health and social functioning after a health incident; and

3. using knowledge from a past response to strengthen the community's ability to withstand the next health incident

Elements of Community Resilience
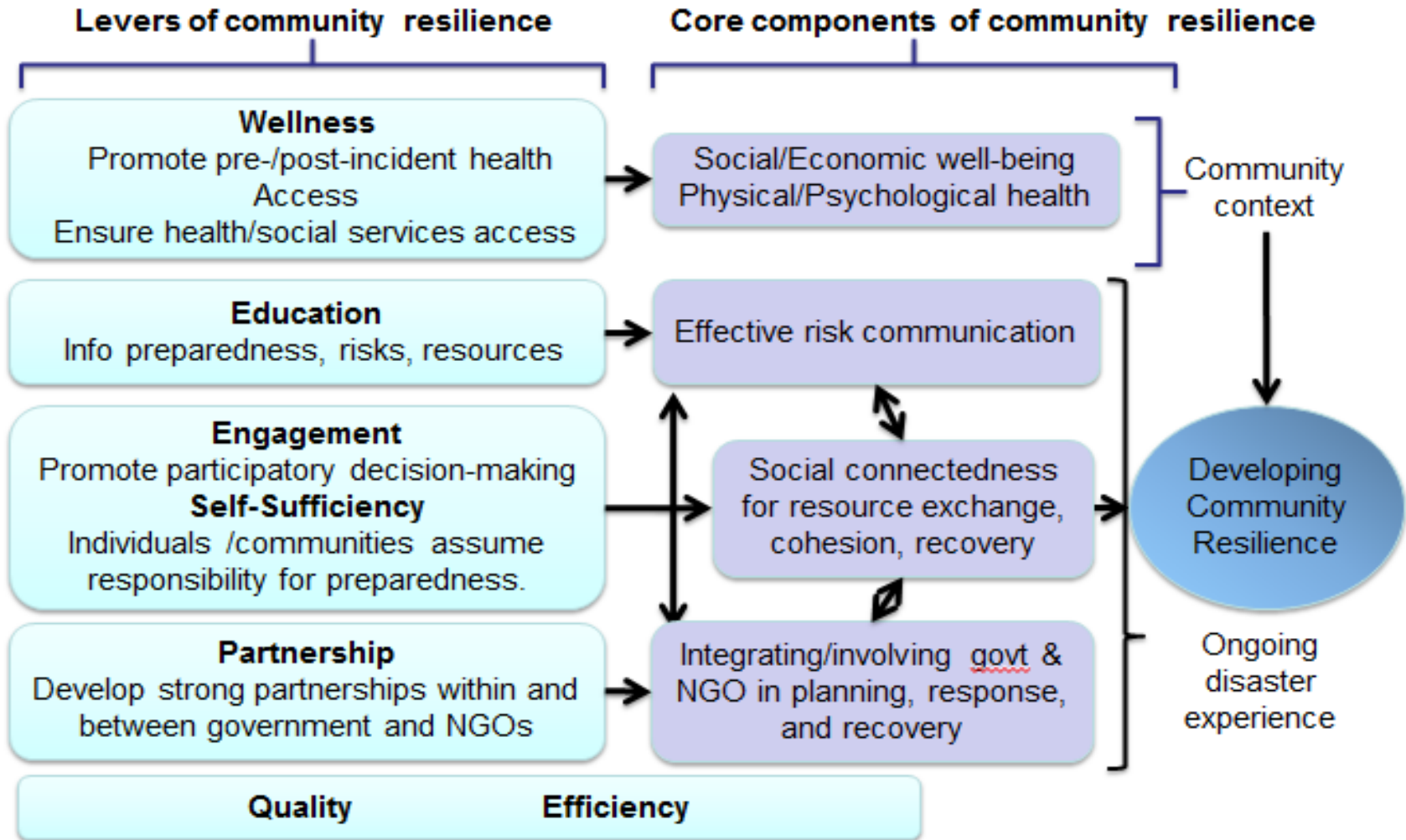
Community resilience acknowledges the intersection between individuals and organizations

LACCDR is about moving from just "me" to include "we"

Individual Resilience

- Emergency kits

- Emergency plans

- Individual education and training

- Individual stockpiles

- Individual/household oriented messages

Community Resilience

- Assessing and addressing community vulnerabilities

- Developing community partnerships

- Community training, education, and engagement

- Community preparedness networks/Social connections

Measuring organizational partnerships in LA County with PARTNER

Implemented in May 2014

- 2-year development and 3-year Pilot Phase
- 16 communities randomized into two program models: Preparedness (CP) and Resilience (CR)
- Emergency Preparedness Communities
  - Individual and Family Preparedness
- Community Resilience Communities
  - Neighborhood and Community Preparedness

PARTNER is a social network analysis tool to measure the strength and quality of relationships

PARTNER
Program to Analyze, Record, and Track Networks to Enhance Relationships

HOME   ABOUT   MANAGER'S CORNER   RESOURCES   F.A.Q.   PROJECTS   ANALYSIS TOOL   LOG IN   CONTACT

PARTNER is a Free Tool to Collect, Analyze, & Interpret Data to Improve Collaboration within Community Networks

Click here to see a 5 minute video introducing PARTNER.

The Need for Tools to Assess Partnerships/Collaboration

A major challenge facing organizations today is how to partner with other organizations, agencies, and groups to collaboratively address social and political goals while effectively maximizing resource sharing of the partners involved. However, the process by which organizations have engaged partners in collaboration has varied, with few ways to measure the success of these partnerships. Public leaders are eager to understand how to analyze the collaboratives in which they are involved so that they may determine whether efforts to focus resources on partnership or collaborative development are working.

PARTNER is a social network analysis tool designed to measure and monitor collaboration among people/organizations. The tool is free (sponsored by the Robert Wood Johnson Foundation) and designed for use by collaboratives/coalitions to demonstrate how members are connected, how resources are leveraged and exchanged, the levels of trust, and to link outcomes to the process of collaboration. The tool includes an online survey that you can administer to collect data and an analysis program that analyzes these data. By using the tool, you will be able to demonstrate to stakeholders, partners, evaluators, and funders how your collaborative activity has changed over time and progress made in regard to how community members and organizations participate.

Using PARTNER, you will be able to analyze relationships in three ways:

1. Create visuals (similar to the image to the right) to see who is connected to whom.

2. Assess network scores including metrics on the number and quality of relationships, the trust between partners, the value that each partner brings to the larger collaborative, and assessments of the roles that each member of the collaborative play based on how they are connected to others.

See which organizations are connected to each other.

Identify how the health department is embedded in the community.

Business Owner
Salvation Army
Job Training Program
Dept of Housing
Homeless Shelter
Public Health
Measure the quality of these connections.
Catholic Charities
Law Enforcement
Drug/Alcohol Clinic
Strategize how to strengthen ties, fill gaps, and increase efficiency.
Politician

KEY:
Nodes
Relationships
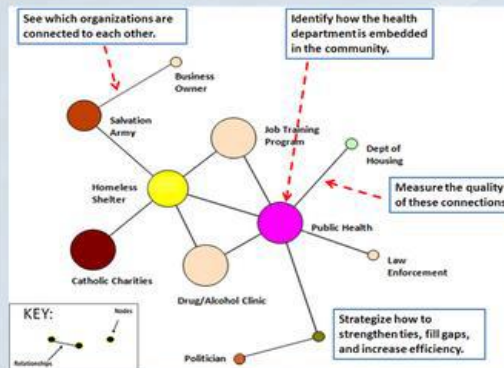
Learn How to Use PARTNER

Register Here Start Using PARTNER
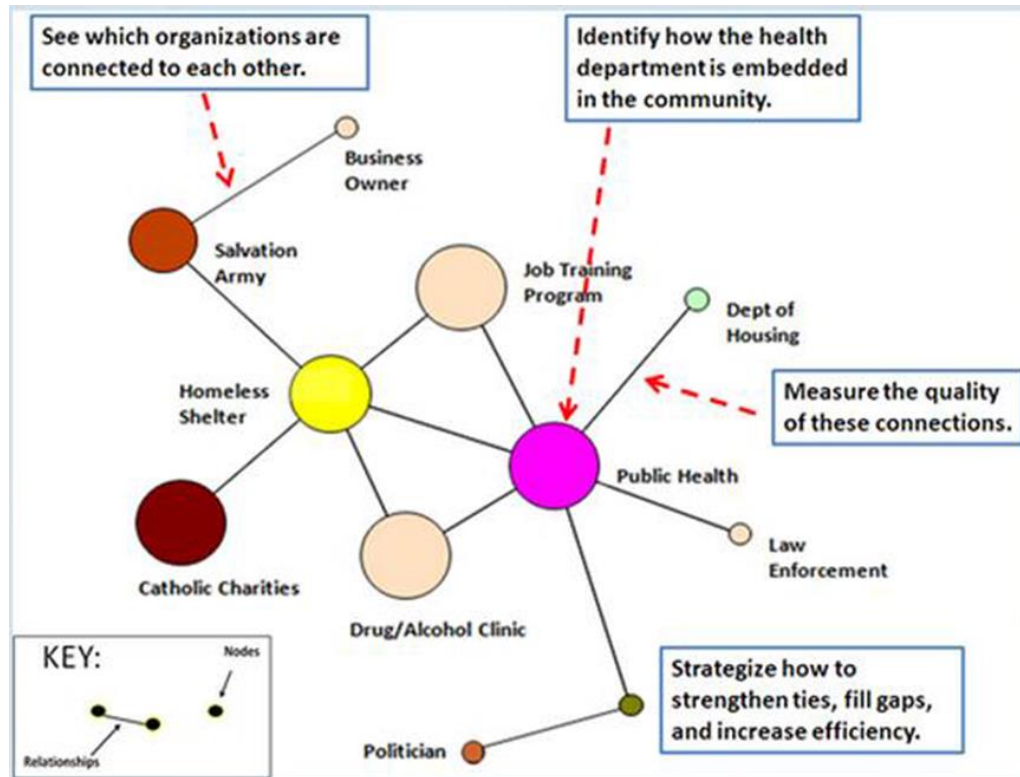
Manager's Corner

Meet Others Who Have Used PARTNER

National Spotlight on PARTNER

Exchange

# PARTNER measures relationships in a way that users can understand and manipulate

PARTNER has been used in various settings

- Improving substance abuse prevention services in a community

- Measuring relationship changes at the local level and state level for one organization

- Annual evaluation of one organization's development process

The results of PARTNER can facilitate quality improvement

Why was PARTNER Survey administered to NH Regional Network Partner Organizations?

- Measure connectivity among and between key stakeholders
- Gain deeper understanding of how members collaborate to address health issues
- Assess where and how its partnerships can be strengthened
- Begin to chart progress in those relationships and activities
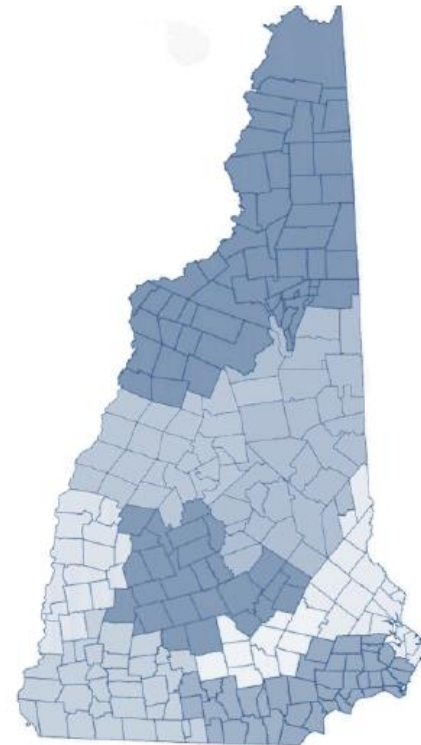
PARTNER supports quality improvement goals

Things to consider when using PARTNER

MEMBERSHIP

Are the 5 sectors represented?

If not, where will you get the most benefits from relationship building?

Are the right connections in place? Are there some missing?

Which lie in the network periphery that might be more engaged?

Possible Improvement Goals

Increasing # or % of organizations identifying higher levels of collaborative activities (coordinated and/or integrated)

Increasing Response Rates OR increasing # of member organization included and response rate

Increasing the #s of organizations within a sector that are actively engaged in the network

Increasing linkages between sectors

Increasing any of the outcomes

Increasing overall trust scores

Presentations to nurses informed how we presented our data to coalition members

- Made presentations to each of the coalition nurses via webinar

- Nurses provided feedback on clarity and quality improvement aspects
  - "This data makes sense"
  - "The coalition has changed since the survey was given"
  - "The coalition will be excited to see this presentation"

Coalition A is diverse with broad representation from 8 sectors

Legend:
- Business
- Community Leadership
- Education and Childcare Settings
- Emergency Management
- Healthcare
- Housing and Sheltering
- Mental/Behavioral Health
- Office of Aging or equivalent
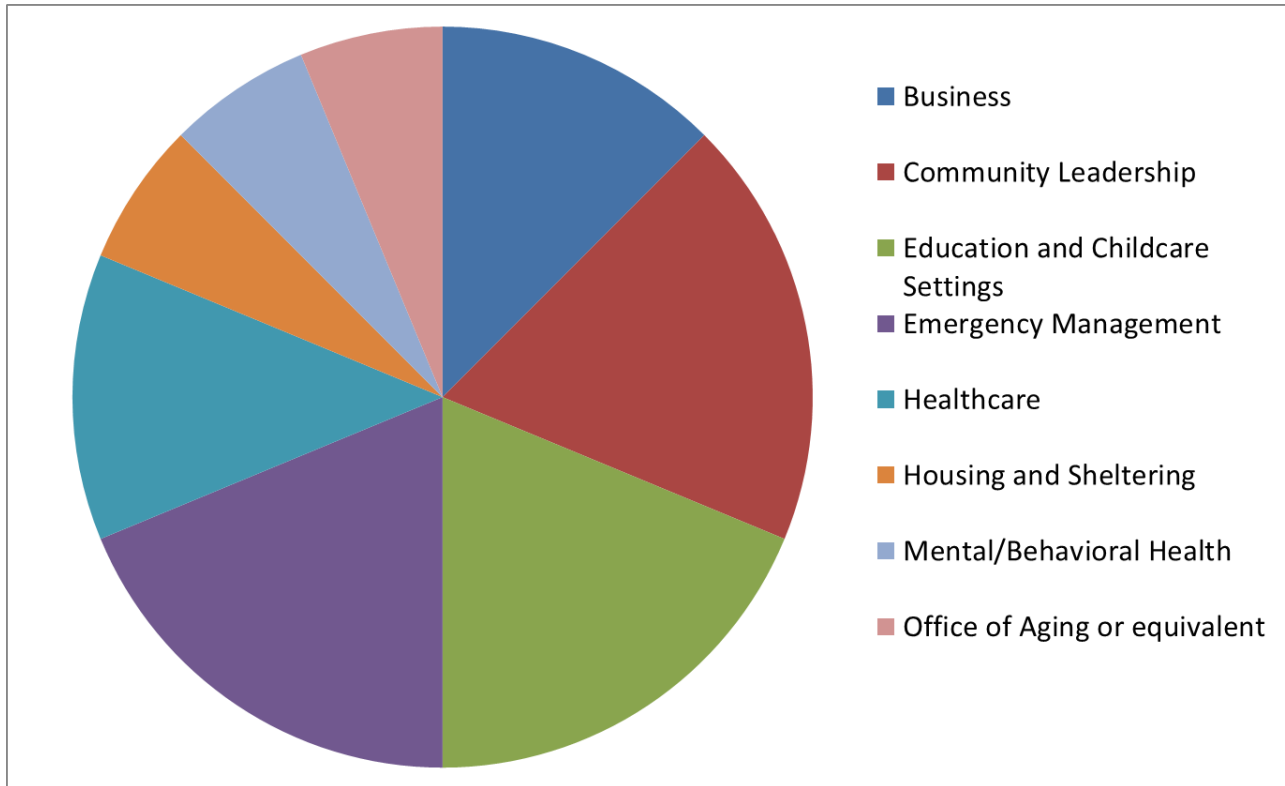
3 Sectors not yet participating:
Media, Cultural and Faith Based Organizations, Social Services

Access to disaster supplies and improved ability to communicate with the public were reported as two of the most valuable organizational benefits to Community C

Benefit	Community C	Benefit	Community C
Better organization emergency plans	Yes	Stronger relationships with other organizations	Yes*
Better community emergency plans	Yes	Stronger relationships with neighbors	Yes*
Improved communication with first responders		New disaster preparation information	Yes
Improved communication with government		New information on addressing needs of vulnerable populations	Yes
Disaster plan that incorporates community members needs		Additional funding	Yes
Disaster plan that incorporates organization's needs		Access to disaster supplies	Yes*
Improved communication with public	Yes*		

* Indicates Selection as Most Valuable Benefit

Resilience communities have broader coalitions but lower trust

	Preparedness		Resilience		P values - Resilience vs. Preparedness	
	Year1	Year2	Year 1	Year 2	Year 1	Year 2
Mean number of organizations per coalition	7.12	8.43	9.87	14.88	0.117	**.006**
Mean number of sectors per coalition	3.63	3.86	5.63	7.13	**0.028**	**>.001**
Median hours spent on preparedness activities (per month)	13.40	31.56	12.56	27.79	.916	.729
Mean Trust	3.43	3.37	2.91	3.24	**0.004**	.500
Mean Value	3.20	3.05	2.97	2.88	0.362	.523
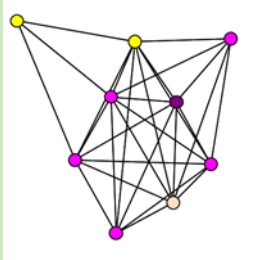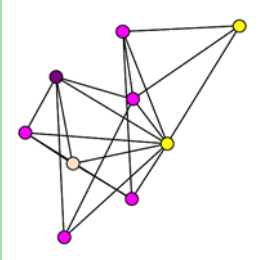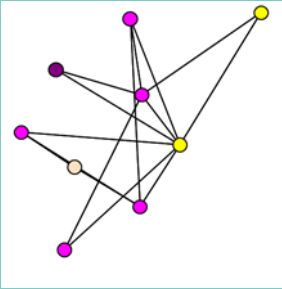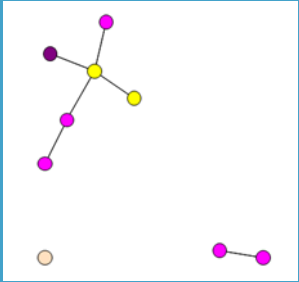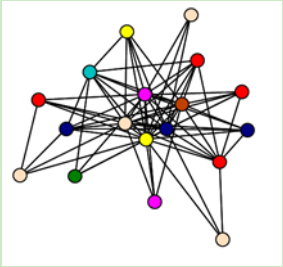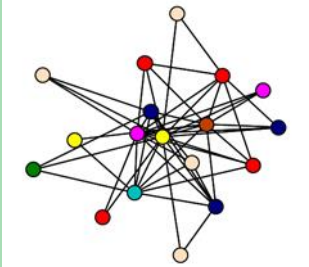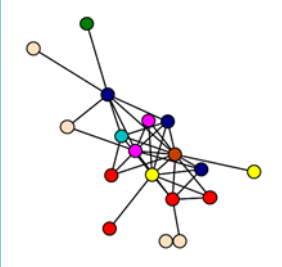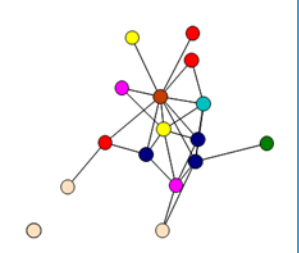
Resilience and Preparedness Communities Emphasize Different Activities

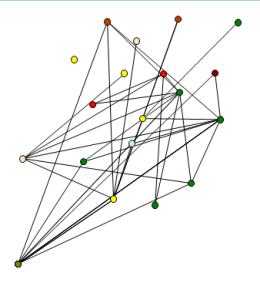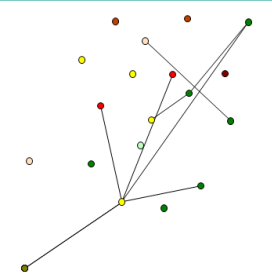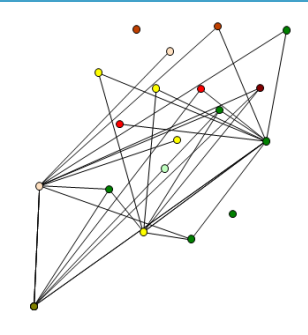| Activities Completed	Preparedness			Resilience			Grand Total
	Year 1	Year 2	Total	Year 1	Year 2	Total	
Made or translated disaster materials (e.g. brochures, posters, etc.)	38%	86%	88%	50%	75%	75%	81%
Put disaster brochures or other materials into the community	88%	100%	100%	88%	100%	100%	100%
Worked with the media (radio, tv, newspapers) to communicate about our coalition's activities	**13%**	**43%**	**50%**	**63%**	**50%**	**88%**	**69%**
Developed plan to communicate with residents during a disaster	**50%**	**86%**	**88%**	**25%**	**63%**	**63%**	**75%**
Developed integrated emergency plans for coalition partners	38%	43%	75%	38%	63%	63%	69%
Participated in a community mapping (e.g. Sahana)	**38%**	**29%**	**50%**	**63%**	**100%**	**100%**	**75%**
Identified priority hazards in the community	63%	86%	100%	88%	100%	100%	100%
Organized community events (e.g. health fairs, convening neighborhood watch)	63%	100%	88%	100%	100%	100%	94%
Exercised or implemented community disaster plan during an emergency	**38%**	**57%**	**88%**	**25%**	**25%**	**38%**	**63%**
Exercised or implemented disaster communication plan during a disaster	25%	43%	63%	25%	25%	38%	50%
Held community leadership training	50%	71%	100%	75%	63%	88%	94%
Held psychological first aid training	**13%**	**14%**	**13%**	**50%**	**38%**	**63%**	**38%**
Held Community Emergency Response Team (CERT) training	50%	86%	88%	63%	88%	88%	88%
Held community health worker training	0%	29%	25%	13%	0%	13%	19%
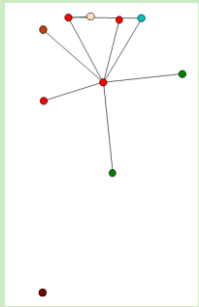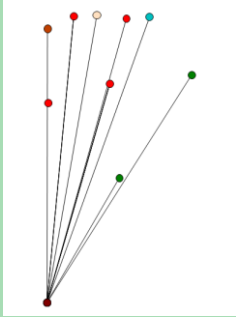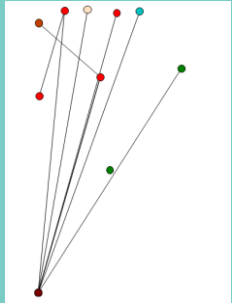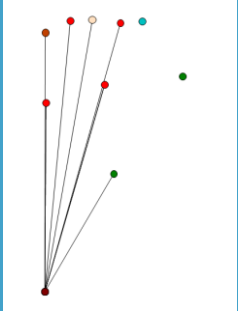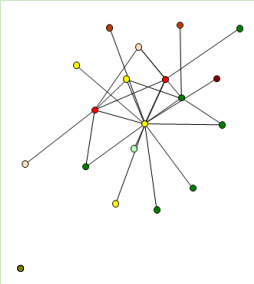
Resilience Communities Emphasized Cooperative Interactions; Preparedness Communities Emphasized Integrated Interactions

Level of Activity	Preparedness			Resilience			Average
	Year 1	Year 2	Average	Year 1	Year 2	Average	
Process – attending meetings	34.34%	18.66%	27.02%	23.74%	19.15%	21.44%	24.14%
Cooperative – Process + Sharing Information	29.27%	36.72%	32.75%	39.18%	44.87%	42.02%	37.53%
Coordinated – Cooperative + Sharing Data, Training ideas and interventions	9.68%	5.28%	7.63%	15.68%	11.90%	13.79%	10.81%
Integrated – Coordinated + Implementing Trainings	26.71%	39.33%	32.60%	21.27%	24.09%	22.68%	27.48%

There is wide variability in the connections among coalition partners

Year 1	Process (Attending Meetings Together)	Cooperative (Process Activities + Sharing information)	Coordinated (Collaborative Activities + Sharing Data, Training Ideas and Interventions)	Integrated (Coordinated activities + implementing trainings together)
Community B				
Most Well-Connected Coalition				

There is wide variability in the connections among coalition partners

Year 2	Process (Attending Meetings Together)	Cooperative (Process Activities + Sharing information)	Coordinated (Collaborative Activities + Sharing Data, Training Ideas and Interventions)	Integrated (Coordinated activities + implementing trainings together)
Community B				
Most Well-Connected Coalition				

PARTNER faced challenges in response rates and interpretation of questions

- Variable response rates across communities

  -Results are dependent on who replies

- Interpretation of activities

  -Respondents

  -Researchers (what is more CR like)

Where to find more information

- LACCDR Website
  http://www.laresilience.org/

- RAND Community Resilience Website
  http://www.rand.org/pubs/tools/TL109.html

- Chandra A, Williams M, Plough A et al. Getting actionable about community resilience: Los Angeles County Community Disaster Resilience Project. *Am J Public Health*. Published online ahead of print May 16, 2013: e1–e9, July 2013

- Wells KB, Tang J, Lizaola E, Jones F, Brown A, Stayton A, Williams MV, Chandra A, et al. Applying Community Engagement to Disaster Planning: Developing the Vision and Design for the Los Angeles County Community Disaster Resilience Initiative. *Am J Public Health*. Published online ahead of print May 16, 2013: e1–e9.

- Plough A, Fielding, JE, Chandra A, Williams MV, Eisenman D, Wells KB, Law GY, Fogleman S, Magaña A. Building Community Disaster Resilience: Perspectives From a Large Urban County Department of Public Health. *Am J Public Health*. Published online ahead of print May 16, 2013: e1–e8.

Commentary

David Eisenman, MD, MSHS

Associate Professor, UCLA David Geffen School of Medicine, UCLA Fielding School of Public Health

Director, UCLA Center for Public Health and Disasters

Preparedness Science Officer, Los Angeles County Department of Public Health *deisenman@mednet.ucla.edu*

Sandra Gomez

Public Health Nurse

Los Angeles County Department of Public Health

sagomez@ph.lacounty.gov

Questions and Discussion

EVALUATING THE IMPACT OF ORGANIZATIONAL PARTNERSHIPS ON COMMUNITY RESILIENCE

Project Webpage:
http://www.publichealthsystems.org/projects/assessing-effectiveness-partnerships-between-local-health-departments-and-community-and

Check back for project updates!

Webinar Archives
http://www.publichealthsystems.org/phssr-research-progress-webinars

Upcoming Webinars

Thurs, Nov. 19 (1-2pm ET/ 10-11am PT)

CLINICAL-COMMUNITY PARTNERSHIPS AND 2-1-1 TECHNOLOGY TO IMPROVE EARLY CHILDHOOD DEVELOPMENTAL SCREENING AND CARE

Bergen Nelson, MD, MS, [Center for Healthier Children, Families & Communities](http://www.publichealthsystems.org/phssr-research-progress-webinars); Department of Pediatrics, UCLA School of Medicine

Wed, Dec. 2 (12-1pm ET)

EXPLORING NEW METHODS AND MEASURES TO ASSESS THE IMPACT OF THE ECONOMIC RECESSION ON PUBLIC HEALTH OUTCOMES

Anna Schenck, PhD and Anne-Marie Meyer, PhD, School of Public Health, University of North Carolina at Chapel Hill

Wed, Dec. 9 (12-1pm ET/ 9-10am PT)

IMPROVING THE REACH AND EFFECTIVENESS OF STD PREVENTION, SCREENING, AND TREATMENT SERVICES IN LOCAL PUBLIC HEALTH SYSTEMS

Lynn Silver, MD, MPH, Senior Advisor for Chronic Disease and Obesity, Public Health Institute, California

Thank you for participating in today's webinar!
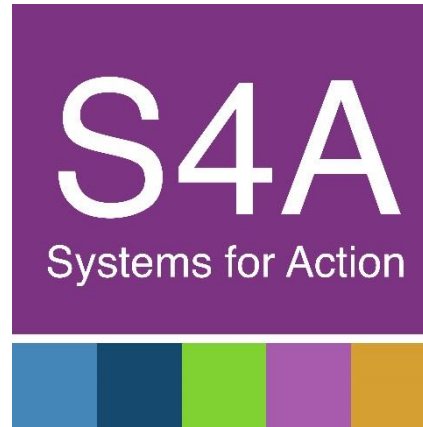
For more information about the webinars, contact:

Ann Kelly, Project Manager *Ann.Kelly@uky.edu*

111 Washington Avenue #201, Lexington, KY 40536

859.218.2317

www.systemsforaction.org