

CONNECTING THE DOTS

Leveraging Community Benefit Programs With City Leadership

NANCY ZUECH LIM, MPH, CPH, AND SUE PECHILIO POLIS

We know community benefit programs work with a variety of local partners, including faith-based organizations, nonprofits, local health departments, even other hospitals. But often forgotten are these important partners to consider: local city leaders.

Mayors and city leaders play a pivotal role in the overall health and well-being of the communities they serve.

“When you look at maps of neighboring communities and ZIP codes and see significant disparities in life expectancy within a couple of miles — sometimes blocks — you’re compelled to advance policies to address those gaps in a meaningful way,” said Mayor David Baker of Kenmore, Washington.

Where we live, work, learn, grow, play and pray impacts our health and well-being. These, “and the wider set of forces and systems shaping the conditions of daily life,”¹ are known as the social determinants of health. According to the World Health Organization, “Conditions such as environment, housing, economy and policies impact the health and well-being of our communities.” Access to meaningful educational and economic opportunities vary by place and ultimately affect how long and how well we live.

To be truly healthy, one not only needs high quality health care but also access to high quality early childhood programs, good schools, good jobs, affordable housing, safe and active transportation options, places to play and healthy foods. Mayors and city leaders address these issues each day, and they need myriad strong partnerships to fully leverage the assets in their cities.

Hospitals and city leaders can work together

**Where we live, work, learn,
grow, play and pray impacts
our health and well-being.**

to address the social determinants of health and well-being through policy, structural and environmental changes in order to ensure sustainable improvements for city residents at three levels:

■ **Individual and family level:** Build awareness of healthy behaviors, address barriers and support ways that basic needs can be met.

■ **Neighborhood and community level:** Build communities that decrease barriers to ensure the healthy choice is the easy choice in every neighborhood.

■ **Policy:** Promote policies that support healthy choices and healthy behaviors.

Because community benefit programs are moving beyond hospital walls, it is a ripe time for hospitals to further align efforts with city leaders and departments. Conducting Community Health Needs Assessments together to identify priority health needs and develop implementation strategies is a way for hospitals and city leaders to build a fruitful and ongoing partnership.²

Some hospitals already are collaborating with city leaders and other community partners. Examples include:

■ **Baton Rouge, Louisiana,** Mayor Melvin L. “Kip” Holden, through his Healthy City Initiative, brought together area hospitals Baton Rouge General Medical Center, Lane Regional Medical Center, Our Lady of the Lake Regional Medical Center, Surgical Specialty Center of Baton Rouge and Woman’s Hospital to conduct a joint CHNA and implementation strategy, putting them on a course for greater collaboration to address systematic issues that influence health.³

■ **Spartanburg Regional Healthcare System,** municipal leaders and community partners took

a holistic view of health in South Carolina and worked together to address all health indicators, including education, housing, access to healthy food and economic stability. Together, they won the 2015 Robert Wood Johnson Culture of Health Prize in recognition of their progress in making changes that lead to improvements in health and well-being of local residents.⁴

■ **St. Vincent Hospital Frankfort** in Indiana works with city and county leaders and community partners as part of the Healthy Communities of Clinton County Coalition. The coalition works to improve health through policy, system and environmental changes, complete streets and tobacco-free programs.⁵

■ **The D.C. Healthy Communities Collaborative** is a local partnership among four District of Columbia hospitals (Children's National Health System, Howard University Hospital, Providence Health System and Sibley Memorial Hospital), four Federally Qualified Health Centers (Unity Health Care Inc., Community of Hope, Mary's Center and Bread for the City), and two ex-officio members (DC Primary Care Association and DC Hospital Association) that conducted a joint CHNA in the nation's capital. In collaboration with the D.C. Department of Health, the collaborative is developing an implementation strategy to address the priority health needs in the District of Columbia.⁶

■ **Saint Thomas Health, Nashville, Tennessee**, collaborates with Metro Nashville Public Schools to provide the Saint Thomas Health Scholars Program, a free program for selected high school seniors to promote health care careers through mentoring and training for the medical assistant certification exam.⁷

■ **Trinity Health**, based in Livonia, Michigan, created the Transforming Communities Initiative that uses a wide variety of funding mechanisms for direct community health improvement in awarded locations.⁸

Among the health systems working with city leaders to address affordable and healthy housing are: Bon Secours Baltimore Health System, Saint Agnes Healthcare in Baltimore, Nationwide Children's Hospital in Columbus, Ohio, and Children's National Health System in Washington, D.C.

TIPS FOR GETTING STARTED

Successful efforts start by developing key partner-

ships that include city officials.

■ **Share with your mayor/city leaders:** Share your CHNA, implementation strategy and community benefit report with your mayor, council members, local school superintendent and health department director. Offer to provide key city officials with an overview of your CHNA process, community benefit programs and the community support you provide.

■ **Know your city's plans and priorities.** Become familiar with your city's master plan, school wellness plan and health department plan. Listen to your mayor's State of the City address. Lincoln, Nebraska's "Taking Charge" program is an example of a city using its budgeting process to improve community health and well-being. The program uses an outcomes-based budgeting and evaluation process that identified community priorities and set outcome goals.⁹

■ **Meet and discuss:** Meet with city leaders to learn more about their efforts to improve health and well-being. Share and discuss how social determinants affect the health and well-being of your community. Consider using key resources like County Health Rankings & Roadmaps (www.countyhealthrankings.org/) and Community Commons (www.communitycommons.org/) to map by ZIP codes the areas of greatest need. Highlight areas of focus that overlap and initiatives that complement city goals.

■ **Assess together.** Share information and assessment processes. Consider working towards one needs assessment for the city and look for other ways you may be able to collaborate and leverage resources.

■ **Align efforts to improve health and well-being.** Build on each other's strengths and expertise, and work together to address barriers to healthy lifestyle behaviors, health care and the social determinants of health. Look for ways your programs and efforts may support each other's goals and initiatives.

NANCY ZUECH LIM is a community health and benefit consultant with the National League of Cities as part of the Institute for Youth, Education and Families' early childhood success portfolio. She can be reached at NancyZuechLim@gmail.com.

SUE PECHILIO POLIS directs the health and well-being portfolio for the National League of Cities as

part of the Institute for Youth, Education and Families. She can be reached at Polis@nlc.org.

Interested in learning more about social determinants of health? Please see a short video by Julie Trocchio, senior director, community benefit and continuing care, in CHA's Washington, D.C. office. At www.chausa.org/community-benefit/community-benefit.

NOTES

1. World Health Organization, "Social Determinants of Health" website. www.who.int/social_determinants/en/.
2. Internal Revenue Service, "Additional Requirements for Charitable Hospitals; Community Health Needs Assessments for Charitable Hospitals; Requirement of a Section 4959 Excise Tax Return and Time for Filing the Return; Final Rule," 26 CFR Parts 1, 53, and 602, *Federal Register* 79, no. 250 (Dec. 31, 2014). www.federalregister.gov/articles/2014/12/31/2014-30525/additional-requirements-for-charitable-hospitals-community-health-needs-assessments-for-charitable#h-30.
3. www.healthybr.com/be-smart/community-health-needs-assessment/.
4. www.rwjf.org/en/library/articles-and-news/2015/10/coh-prize-spartanburg-sc.html.
5. <http://healthyclintoncounty.org/>.
6. <http://www.dchealthmatters.org/>.
7. www.sthealth.com/about-us/mission-integration/community/saint-thomas-health-scholars.
8. www.clinical-innovation.com/topics/clinical-practice/trinity-health-announces-grant-recipients-community-health-improvements.
9. City of Lincoln, Nebraska, "Performance Indicators," *Taking Charge: A Community Conversation on City Priorities and the Budget*, City of Lincoln website. <http://lincoln.ne.gov/city/mayor/takingcharge/performance-indicators.htm>.



A Shared Statement of Identity for the Catholic Health Ministry

We are the people of Catholic health care, a ministry of the church continuing Jesus' mission of love and healing today. As provider, employer, advocate, citizen — bringing together people of diverse faiths and backgrounds — our ministry is an enduring sign of health care rooted in our belief that every person is a treasure, every life a sacred gift, every human being a unity of body, mind, and spirit.

We work to bring alive the Gospel vision of justice and peace. We answer God's call to foster healing, act with compassion, and promote wellness for all persons and communities, with special attention to our neighbors who are poor, underserved, and most vulnerable. By our service, we strive to transform hurt into hope.

AS THE CHURCH'S MINISTRY OF HEALTH CARE, WE COMMIT TO:

- + Promote and Defend Human Dignity
- + Attend to the Whole Person
- + Care for Poor and Vulnerable Persons
- + Promote the Common Good
- + Act on Behalf of Justice
- + Steward Resources
- + Act in Communion with the Church

© The Catholic Health Association of the United States

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

www.chausa.org

HEALTH PROGRESS®

Reprinted from *Health Progress*, January - February 2017
Copyright © 2017 by The Catholic Health Association of the United States
