

Intersectoral Community Health Improvement Collaborative

Working Together to Improve Community Health: Building a Bridge between Healthcare Consumer Advocates and Employers in Georgia



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1. Executive Summary

The Intersectoral Community Health Improvement Collaborative (ICHIC) project was conducted by Georgia Watch and partners in 2016. The ICHIC project aimed to build effective relationships among employers and consumer advocacy organizations, both of whom represent the actual customers of healthcare, and develop common approaches to improve the accessibility and value of healthcare and promote healthier communities throughout Georgia. Project partners met throughout 2016 to build relationships and plan and execute activities that brought together employers, public health, providers and advocates for joint learning and conversation. The ICHIC advisory group included representatives from the two major business groups in Georgia, Savannah Business Group and EmployersLikeMe, consumer advocate representatives from Georgia Watch, Georgians for a Healthy Future, and Voices for Georgia's Children, and representatives from the Department of Public Health's Chronic Disease Prevention section.

Throughout 2016, the ICHIC project partners forged and solidified relationships of mutual trust and respect, learned together, educated others, explored common interests and concerns, recognized areas of alignment and divergence, and created avenues for future partnerships and work together. We gathered information about highly innovative and effective rural community health improvement work happening in Georgia that is bringing public health, employers, advocacy groups, providers, hospitals, and community-based organizations together into cooperative working partnerships. We also learned about the expertise and capabilities of our diverse partners. We discovered that engagement between consumer advocates and employers requires building trust, clear communication, and actionable work that has a clear mission with data-driven goals.

At the conclusion of our project, we found that there was appetite among all project participants for:

- **Creating a permanent multi-stakeholder group to examine healthcare quality in Georgia**
- **Promoting the use of school-based health centers (SBHCs) in Georgia**
- **Creating a learning network of communities across the State of Georgia that are engaged in community health improvement initiatives**

ICHIC project partners plan to continue exploring ways that we can work together on these future endeavors.

2. Project Scope

Background Information

This project was funded by a grant from the Healthcare Georgia Foundation (Foundation). Created in 1999 as an independent private foundation, the Foundation's mission is to advance the health of all Georgians and to expand access to affordable, quality healthcare for underserved individuals and communities.

The goal of this Intersectoral Community Health Improvement Collaborative (ICHIC) project was to build effective relationships among employers and consumer advocacy organizations, both of whom represent the actual customers of healthcare, and develop common approaches to improve the accessibility and value of healthcare and promote healthier communities throughout Georgia. The project aimed to educate consumer advocates about the important concerns and expertise of local employers, and it also explored the consumer component to important healthcare delivery system innovations happening at the local level in Georgia.

To provide collaborative leadership, we formed the ICHIC advisory group included representatives from the two major business groups in Georgia, Savannah Business Group and EmployersLikeMe, consumer advocate representatives from Georgia Watch, Georgians for a Healthy Future, and Voices for Georgia's Children, and representatives from the Department of Public Health's Chronic Disease Prevention section. This collaborative group was formed to share knowledge and build relationships by planning and executing activities that brought together employers, public health, providers and advocates for joint learning and conversation.

Georgia Watch launched this project with the understanding that approximately 75% of health plans in Georgia are self-insured, and Georgia business leaders are engaging in initiatives at the national, state and local levels to improve their employees' access to quality, affordable care. A self-insured group health plan is one in which the employer assumes the financial risk and pays for each out-of-pocket claim as it is incurred instead of paying a fixed premium to an insurance carrier. In self-insured plans, employers often take a heightened interest in disease prevention, wellness, and wise use of healthcare because of their need for healthy, productive employees and wise containment of unnecessary medical expenses. Consumer advocates share these interests and goals.

Between 1999 and 2010, health insurance premiums rose by 138% nationally, while wages increased by just 42%. Rising healthcare costs impact businesses' bottom lines, but they also have negative consequences for communities. Rising medical costs influence local budgets by limiting how much a city can invest in infrastructure development and social services. Payment and delivery reform efforts across the country are being driven by the purchasers of healthcare. Those purchasers are innovative employers and consumer organizations. By working together toward common goals of improving healthcare access and value, these groups have the potential to improve health outcomes and lower costs more quickly and effectively than they could alone. This project lays the foundation for a lasting relationship between the healthcare consumer advocacy community and employers in Georgia.

3. Project Activities

Group Activities and Workshops

The Intersectoral Community Health Improvement Collaborative (ICHIC) advisory group came together in January 2016 and consisted of eight representatives from the partner organizations in this project. The group was established to achieve three goals: build effective relationships among employers and consumer advocacy organizations; develop common approaches to improve the accessibility and value of healthcare; and promote healthier communities throughout Georgia. ICHIC advisory group met to plan activities seven times in 2016.

The project included five workshops that convened and educated employers, consumer advocates, public health, and other stakeholders. These workshops aimed to provide opportunities for relationship building and identification of common areas of interest and concern among project participants.

Workshop #1

The first workshop, was an in-person meeting at the Georgia Tech Hotel and Conference Center in January 2016. The event provided the ICHIC partners and a number of Georgia employers with an opportunity to get to know each other, learn about the activities of regional coalitions like the Savannah Business Group and the Maine Health Management Coalition, talk about the project's goals and objectives, and explore common interests in improving population health and healthcare access, quality and affordability in Georgia. The following Georgia businesses that are EmployersLikeMe members were represented at the meeting: Rollins, Inc., The Langdale Company in Valdosta, GA, Southwire in

Carrollton, GA, Georgia Power / Southern Company, and Mohawk Industries from north Georgia.

Below is a summary of areas of common interest that were identified among meeting participants and that were discussed as topics for possible future project workshops and conversation:

- Examining healthcare price and quality data in Georgia
- Exploring existing work to collect and analyze claims data
- Creating a permanent multi-stakeholder group in Georgia that includes other providers and/or insurers
- Identifying local initiatives in Georgia that this group can build upon
- Understanding the mechanics of collaboratives in other states
- Identifying what is working well in Georgia: discovering what other employers are doing to engage their communities and improve the health of their communities
- Helping patients/consumers make better choices about their healthcare
- Ensuring that when we talk about data, we are also talking about children's data – children are the future of the workforce; quality education and healthcare are key to attracting employers to our state and our communities
- Health Literacy – figuring out how consumers use their benefits, access care, and manage disease
- Examining access to care issues in rural parts of the state
- Discussing network adequacy

The first convening of the ICHIC advisory group occurred in February 2016. At this meeting, the ICHIC advisory group planned workshop activities for 2016 and also came up with the following project purpose statement:

The Intersectoral Community Health Improvement Collaborative brings together the two major business groups in our state, EmployersLikeMe and The Savannah Business Group, the Georgia Department of Public Health's Chronic Disease Prevention section, and three statewide consumer advocacy organizations, Voices for Georgia's Children, Georgians for a Healthy Future and Georgia Watch. This group aims to highlight some of the most effective community approaches to improving population health and addressing chronic disease in Georgia. To accomplish this, we will identify opportunities to facilitate positive change in rural healthcare by: developing relationships among group members; learning group members' individual strengths; identifying areas of programmatic and goal alignment; and collectively examining issues of access, quality, and cost in our healthcare system.

Workshop #2

Our second workshop was a webinar titled "Healthcare Quality Improvement Initiatives in Georgia" conducted via the Healthcare Georgia Foundation's HealthTecd platform in May 2016. The archived webinar can be accessed and viewed [online](#). Participating presenters included the Georgia Department of Public Health Chronic Disease Prevention Section, Georgia Department of Community Health Division of Medical Assistance Plans, and Alliant Quality (GMCF), the QIN-QIO for Georgia and North Carolina.

The first speaker was Dr. Jean O'Connor, JD, MPH, DrPH, Director of the Chronic Disease Prevention section of the Georgia Department of Public Health (DPH). Dr. O'Connor explained that DPH focuses on improving both the length of life and the quality of life in their quality improvement initiatives. These initiatives are both internal and external facing. Internal facing programs are managed by DPH and run by DPH staff; these include the breast and cervical cancer program and the diabetes management program. DPH works with health partners, such as hospitals and physician offices, on external facing initiatives that focus on quality improvement measures, such as increased screening tests. Emphasis is placed on the use of evidence-based decision-making in developing DPH's quality improvement initiatives. Four specific quality improvement partnerships were discussed in depth: The Georgia Clinical Transformation Team, Georgia cAARds (Ask, Advise, and Refer with follow-up for tobacco cessation), The Georgia Asthma Control Program, and the Million Hearts Initiative for undiagnosed hypertension.

Dr. Janice Carson, Deputy Director of Performance, Quality and Outcomes with the Medicaid Division at the Georgia Department of Community Health was the second speaker. Dr. Carson focused on quality improvement activities in the Medicaid program and in PeachCare for Kids (Georgia's Children's Health Insurance Program). In 2006, there was a transition to managed care for some of these populations. These managed care services are evaluated annually under a Quality Assessment and Performance Improvement (QAPI) strategy, as required by federal law. Georgia's QAPI has two broad goals: improve health for Medicaid and PeachCare for Kids members, and smarter utilization of each Medicaid and PeachCare for Kids dollar. Dr. Carson mentioned many different goals within the strategic plan, such as improve preventative health and follow up care services, reduce statewide low birth weight, improve evidence-based practices, and improve care coordination. All goals have specific strategies to achieve desired outcomes.

The last speaker was JoVonn Givens, State Program Director for Georgia at Alliant GMCF, the Quality Innovation Network-Quality Improvement

Organization (QIN-QIO). QIN-QIOs' key roles are to provide technical assistance, serve as communicators, convene learning and action networks, and focus on results. They focus on better health and better care at a lower cost. Ms. Givens discussed three specific programs they are working on: reducing disparities in diabetes care, improving coordination of care, and improving Medicare beneficiary immunization rate.

During the workshop, several questions were posed to the audience of approximately 30 webinar attendees. Of those that responded, 84% of respondents were "not at all satisfied" or only "somewhat satisfied" with the overall quality of healthcare in their community. 100% of respondents said health care quality improvements initiatives are needed in their community. When polled, "improving care coordination among different health care entities" was identified by attendees as the highest priority healthcare quality improvement need in their communities.

Workshop #3

The third workshop was an event titled "Employers and Advocates Working Together to Improve Community Health." This event was held in Savannah in June 2016 and consisted of three panel discussions with local Savannah groups, statewide advocacy organizations, public health, and employers. There were more than 90 registrants in attendance, including approximately 25 employers. The workshop had the broad goals of learning about existing community health improvement collaboratives in Savannah and beyond, identifying areas of alignment among multi-stakeholder attendees, discussing challenges with intersectoral work, and sharing ideas for overcoming barriers and involving employers in these efforts.



The first morning panel discussion covered what local Savannah organizations and partnerships are doing to improve population health.



Representatives from the Chatham County Health Department, Chatham County Safety Net Planning Council, Healthy Savannah, Step Up Savannah, and Costal Georgia Indicators Coalition spoke on this panel. The panel highlighted the impressive local intersectoral community health improvement collaboratives that are ongoing in the Savannah area. The second morning panel discussion

explored what statewide advocacy organizations are doing to move the needle on population health, with presentations from Georgians for a Healthy Future, Voices for Georgia's Children, and Georgia Watch.

In the afternoon, a panel made up of employers discussed their health improvement initiatives and partnerships in their communities. Audience members heard about initiatives from Georgia Power, the City of Savannah, Gulfstream Aerospace, and Williams Institutional Foods in Douglas, Georgia. Employers were able to share what motivates them to improve community health and how they have used community partnerships to create a healthier workforce and offer helpful benefits to their employees.

Workshop #4

The fourth workshop was a webinar that consumer advocates conducted in November 2016 to highlight some of their recent policy work to improve consumer experience and transparency in healthcare. The webinar was titled "Consumer Protections for Surprise Medical Bills and Network Adequacy." Meredith Gonsahn, MPH, Health Policy Analyst at Georgians for a Health Future, spoke about network adequacy and provider directory accuracy standards in Georgia. Network adequacy is the ability of a health plan to provide meaningful access to all covered benefits. The issues associated with network adequacy center around outdated and inadequate information for consumers about their provider networks and a lack of guaranteed benchmarks for services and enforceable rights. Senate Bill 302, the "Provider Director Improvement Act" was passed by the Georgia Legislature in 2016. This legislation mandates that health insurance provider directories remain up-to-date and was highlighted to exemplify a policy solution.

Beth Stephens, Senior Director of Public Policy and Advocacy at Georgia Watch, spoke about surprise medical bills. Surprise medical bills can occur when a consumer unexpectedly receives care from an out-of-network provider at an in-network hospital or facility. This can result in higher cost-sharing for the consumer and balance bills from providers. This often comes as a surprise to consumers. A February 2016 survey of 407 Georgia consumers from Consumer Reports demonstrated that 66% of privately insured Georgians assume doctors in an in-network hospital are also in their insurance plan network, but this is not always the case. Policy activities at the federal and state levels are attempting to address the issue of surprise medical bills, including current legislation here in Georgia.

Workshop #5

The final workshop was a wrap-up meeting of the ICHIC project partners in December 2016. At this workshop, the ICHIC partners identified three priority initiatives for future work together.

- 1. Creating a permanent multi-stakeholder group to examine healthcare quality in Georgia**
- 2. Promoting the use of school-based health centers (SBHCs) in Georgia**
- 3. Creating a learning network of communities across the State of Georgia that are engaged in community health improvement initiatives**

4. Employer Engagement in Community Health Improvement

Georgia Department of Public Health Engagement with Employers

In 2016, the Georgia Department of Public Health (DPH) developed a new initiative to promote a healthier workforce, improve public health programs, and promote self-management of chronic conditions. This "[Georgia Working on Health](#)" initiative is aiming to reduce the burden of chronic disease by partnering with Georgia businesses to create and enhance healthy worksite environments and improve employee health. DPH is recruiting worksites that have or are interested in developing a wellness program and encouraging them to "take the pledge" online to do things like: promote physical activity and encourage healthy eating, support breastfeeding, and become tobacco-free workplace environments. DPH provides resources to employers and community health improvement project leadership around the state to support businesses in adopting and implementing policies and offering screenings and appropriate referrals to employees.

Literature Review

Effective community health improvement efforts require the involvement of many entities outside of the traditional healthcare sector. From a “health in all policies” approach to innovative new programs that bring nontraditional partners together, tackling community health problems has become a multi-sectoral effort. One sector that is crucial to engage but is sometimes considered the hardest to reach and retain is the business sector. Business leaders have a vested interest in the health of their local communities. Poor health impacts the productivity and satisfaction of their workforce, in addition to their customers’ financial well-being. However, businesses are often forced to focus on other priorities, and many do not have population health or healthcare delivery system expertise within their organizations. Engaging businesses and keeping them engaged in long-term community health improvement projects can be challenging.

Georgia Watch reviewed available literature and identified some valuable information on best practices for engaging the business sector in community health improvement partnerships. We found some of these best practices reflected in the community health improvement projects that we visited throughout Georgia.

The National Business Coalition on Health (NBCH) and the Community Coalitions Health Institute (CCHI) published a toolkit on how to engage businesses and employers in community health partnerships.¹ The first step outlined in the creation of these partnerships is the establishment of trust between the business and other partners. Trust can be built formally through contracts, but open communication is also critical. Communication includes how and when partners communicate, but it also means agreeing to common definitions. There should be clearly stated goals and common areas of interest, as well as an understanding of the benefits that the business/employer will gain from being a part of the partnership. This is mentioned as frequently being the link between quality improvements and cost avoidance or reduction. Businesses are data driven entities, so ensuring that data, metrics and information is presented throughout the partnership in a manor tailored to the business community is crucial. Engaging businesses with clear, actionable, tangible steps to be taken throughout the partnership and a timeline to do so is also considered important.

¹ *Community Health Partnerships Tools and Information for Development and Support* (pp. 1-27, Rep.). (n.d.). Retrieved from http://www.nbch.org/nbch/files/cclibraryfiles/filename/00000000353/community_health_partnerships_tools.pdf

NBCH and CCHI were specific to point out that not all partnerships look the same and that they each involve differing levels of trust and communication. They identified different types of partnerships with varying degrees of engagement that can be modeled. A basic *Networking Partnership* allows for the exchange of ideas and information for mutual benefit in an open forum, such as a newsletter, and requires little time and trust. A *Coordinating Partnership* involves exchanging information and amending activities to work towards a common purpose, requiring more time and trust than simply networking. As trust increases, a *Cooperating Partnership* is created, which includes sharing resources. The partnership requiring the most time and trust is the *Collaborating Partnership*, which enhances the capacity of the individual partners for mutual benefit and a common purpose.

In their article on multi-sectorial partnerships for community health, authors Kindig and Isham² expand on how to get businesses/employers engaged. They state that employers must consider that, while they can have control over the worksite to improve the health of their employees at work, that does not have a large impact if those same employees are going home to communities that have health inequalities. For employers to get the best return on cost avoidance or reduction, they must be engaging in the health of the employees outside of the worksite. This is largely a financial incentive for employers. Often the other incentive mentioned is a moral one. Many businesses and employers understand the importance of corporate responsibility and how they are viewed in the community. While these financial and moral incentives may seem like enough reason for businesses to engage in these partnerships, Kindig and Isham point out that it may not be enough, and sometimes regulatory incentives must be put in place. A mix of all three can be used.

In an attempt to create an impetus for action, Dr. Catherine Baase, MD, Global Director of Health Services at the Dow Chemical Company discussed ways the current health scenario negatively impacts the business sector at a Business Engagement in Building Health Communities workshop.³ She stated that

² Kindig, D. A., & Isham, G. (2014). Population Health Improvement: A Community Health Business Model That Engages Partners in All Sectors. *Frontiers of Health Services Management*, 30(4), 3-33. Retrieved from <https://uwphi.pophealth.wisc.edu/publications/other/frontiers-of-health-services-management-vol30-num4.pdf>

³ Wizemann, T. (Ed.). (2015). Business Engagement in Building Healthy Communities: Workshop Summary. *National Academies Press*. Retrieved from <https://www.nap.edu/read/19003/chapter/4>

areas of concern for business are: 1) a divestment of resources towards health instead of into education and infrastructure, and 2) reduced take-home wages and diminished purchasing power due to expenditures on health. However, while these components make businesses want to get involved, there frequently are barriers. The workshop mentioned several challenges, such as overall complexity of the problem, lack of metrics, lack of company leadership buy-in, and lack of strategy, as just some of the barriers businesses stated frequently exist. Seven thematic areas were presented as vital to getting businesses involved: metrics and measurement, return on investment, clear communications, shared values, shared vision, and shared definition. At the same workshop, Nicolaas Pronk, Vice President and Chief Science Officer at HealthPartners, emphasized the importance of having a defined role for the convener in the community to bring all the stakeholders together, and to build a partnership based on trust and respect.

5. Highlighting Community Health Improvement Projects from Rural Georgia Communities

An objective of this project was also to identify and learn about at least three rural Georgia communities where hospitals, physicians, employers, public health, and community-based organizations are engaging in innovative healthcare delivery and population health improvement initiatives. We identified and learned about four impressive projects in different parts of the state. Those projects are described below. Georgia Watch attended meetings for three of these projects in 2016 to engage with partners in those communities and learn more.

The Coffee Area Better Health Lower Cost Collaborative

Summary

The Coffee Area Better Health Lower Cost (BHLC) Collaborative was started in 2015 as a school-business-hospital-public health collaborative to bring about measurable improvements in the overall health of Coffee County. The focus of the collaborative is on reducing obesity and the incidence of diabetes, heart disease and hypertension in the community. The work of the collaborative began with patient/consumer education about healthy eating, active living and weight management. Certain factors and statistics in Coffee County have contributed to the need for this initiative. Coffee County ranks 140th of 159

counties in Georgia in overall health, and obesity has a prevalence rate of 32% in the county. The County also has one of the highest per capita concentrations of fast food restaurants in the state.

Funding

The Collaborative started as the Coffee Area EmployersLikeMe Healthcare Roundtable made up of local employers in and around Douglas, Georgia. The roundtable was then funded by the Georgia Department of Public Health and the Centers for Disease Control and Prevention to participate in an Institute for Healthcare Improvement (IHI) program. The IHI Triple Aim framework optimizes health system performance by providing better care for individuals, encouraging better health for populations, and lowering per capita costs. As part of the IHI program, the Better Health Lower Cost Collaborative was created. The Coffee BHLC team was one of 35 groups from around the world selected to participate in the IHI program. During the first phase of the IHI program, the team received 9 months of in-person and online learning sessions from IHI that emphasized testing new and different interventions based on individual patients' needs. It was through this process that the Coffee BHLC team developed the program that focused on patient education and individual coaching. In 2016, the BHLC Collaborative received the distinct honor of moving into the second phase of the IHI program.

Program Components

Coffee Regional Medical Center (CRMC) was the pilot employer from which participants were selected. The first five participants were four women from CRMC and one from an involved local employer. All patients desired to manage their obesity and improve their wellness. A Care Team was created to lead the intervention with the participants. The Care Team was comprised of four employees from CRMC with expertise in wellness and exercise, nutrition, social work and a nurse practitioner with internal medicine experience.

The program duration was originally 8 weeks, but was increased to 12 weeks. Program components included biometric testing and counseling, free CRMC Wellness Center memberships with the ability to participate in any of the special classes at no cost, weekly goal setting, nutrition counseling with a nutritionist as well as with a wellness coach, weekly food preparation discussions, and one-on-one exercise plans and coaching. Most of the weekly activities for the patients were directed out of the CRMC Wellness Center, which also engaged several additional staff members to help coach the group. There were also speakers brought in to discuss subjects including heart attack prevention, stress reduction, and stroke education. During the program, the Care Team also

met biweekly with the BHLC Collaborative leadership to make appropriate changes to the program.

Coffee County also has telemedicine units in all the County schools. These were established with a grant through the statewide telehealth network. CRMC provides a nurse practitioner that serves individuals at the school sites remotely. In addition to kids, school employees are also able to access the telemedicine services.

Partnerships

The original partners that helped the BHLC team get established were the Georgia Institute of Technology, the Georgia Department of Public Health, and the Centers for Disease Control and Prevention. The Coffee Area BHLC Collaborative also has many community partners from various sectors. Some partners include employers such as Williams Institutional Foods, Southwire, PCC Airfoils, Satilla REMC, and the Chamber of Commerce. Other partners include the Coffee County Board of Education and Coffee Regional Medical Center.

Healthy Colquitt Coalition

Summary

Started in 2009, the Healthy Colquitt Coalition (HCC) is a community-based, environmental and policy driven health initiative that engages partners from all sectors to increase health outcomes. Focusing on healthy lifestyle choices, HCC has a specific focus on the youth population and combatting childhood obesity. A University of Georgia (UGA) Archway partner, HCC hopes to improve the health of Colquitt County through engagement and education.

Funding

There have been several funding sources for HCC. HCC received a CDC Pioneering Healthy Communities grant around the start of the initiative. This grant helped to fund signs in Spanish for pre-school play areas and walking fitness trails at a high school sports park; it also contributed toward a salary for a Colquitt County UGA Archway Public Health Professional and money for food distribution to food desert areas in the County. The United Way also gives a grant each year to help with healthy food distribution. In collaboration with the Department of Education and the Department of Transportation, HCC was also able to get a Safe Route to School grant to create more sidewalks and lighted trails for paths to school.

Program Components

The HCC has been very intentional about implementing programs that are community-driven. The efforts to change how families and children think and act about healthy eating and exercise are accepted and used by the community. HCC has implemented gardens at all elementary schools, introduced the walking school bus where students in the same neighborhoods meet each other and walk to school, created an interactive walking trail at



Packer Park with multiple fitness stations along the trail that offer exercise options for children and parents, built the first city park with a walking trail and green space for children to play, and distributed fresh fruit and vegetables throughout the County in an effort to eliminate food deserts. They offer free healthy food options and educational programming at all

community events, including sponsoring Healthy Kids Day. Colquitt County has a rich history of many festivals celebrating seasonal and cultural events on the town square. By maintaining a presence at these events, they reach a vast amount of the residents.

Partnering with the University of Georgia, College of Public Health, HCC has assisted in a health program for children (grades 3-5) and their parents. The program consists of sessions that emphasize increasing consumption of healthy foods and being physically active. There are activities for the child to complete with the family that support the school sessions. Teachers are also provided with suggestions for ways to incorporate physical activity into their regular curriculum. The home activities are linked to community events. (e.g., walking at the new city park). This work is supported through a \$2.5 million grant to the College of Public Health from USDA. All programming, evaluation, and local staff are funded through the grant. HCC assisted the Moultrie YMCA in partnering with the University of Georgia's Workplace Health Group after the college received a grant from the National Institutes of Health. The partnership offers workshops in Colquitt



County based on the Chronic Disease Self-Management Program (CDSMP), which gives participants tools to manage many chronic health conditions.

Partnerships

The Healthy Colquitt Coalition is thoughtfully designed and deliberate in reaching the entire community. The Healthy Colquitt Coalition is comprised of community leaders representing multiple sectors including education, business, and non-profits with a mission of improving the health of all who live in Colquitt County. HCC works collaboratively with multiple entities such as Colquitt County, City of Moultrie, United Way, YMCA, Board of Education, Southern Regional Technical College, Colquitt Regional Medical Center, Colquitt County Health Department, UGA Extension, Economic Development Authority, Chamber of Commerce, Turning Point Hospital and private business in order to inspire the community to be a healthier population. The expansive arm that the HCC has created gives the coalition a deep reach into the community in order to touch and impact the greatest number and most diverse group of children possible.

These populations are reached through the school system by working with each of the schools in the County, by joining with faith based organizations as well as civic and social service groups. Partnering with other non-profits and the local YMCA and its multitude of programs, the Healthy Colquitt Coalition is committed to reaching the community and encouraging healthful options for the entire family. Social media, announcements in the school system, the local newspaper, and even advertising at the local football games are all forms of communication utilized in order to inform the citizens of Colquitt County of the many works of HCC. It informs them of the many opportunities where they can both participate as well as be a catalyst of change for the community.

Tanner Health System – Get Healthy, Live Well (GHLW)

Summary

Tanner Health System includes three hospitals in Carroll, Haralson, and Heard Counties in Georgia, impacting a population of roughly 151,000 people. In 2012, Tanner launched the Get Healthy, Live Well (GHLW) program, which includes 24 task forces and more than 160 local, state and national partners. GHLW utilizes this grassroots network to decrease health disparities, reduce obesity rates, prevent and manage chronic disease, eliminate tobacco use, increase physical activity and improve nutritious eating. Partnerships with schools, businesses, faith-based organizations and clinics have allowed GHLW have a broad reach and impact on the region's health. In the 3 years since starting the

program, Tanner has reported significant levels of buy-in from the community at large and has continually added to the services provided through the program.

Funding

Get Healthy, Live Well was initially started with a grant from a local community foundation. In order to provide more services, additional funding was sought from the Centers for Disease Control and Prevention (CDC), and Tanner received a CDC Community Transformation Grant (CTG) in September 2012. The CTG Small Communities program supports state and local governmental agencies and community-based organizations in the implementation, evaluation and dissemination of evidence-based community health activities to reduce chronic disease rates, prevent the development of secondary conditions, address health disparities, and develop effective prevention programming.

In 2014, Tanner received another grant from the CDC. The CDC Partnerships to Improve Community Health (PICH) grant supports implementation of evidence-based strategies to improve the health of communities and reduce the prevalence of chronic disease. PICH awardees must focus on addressing at least one of four risk factors for chronic diseases: tobacco use and exposure, poor nutrition, physical inactivity, and lack of access to opportunities for chronic disease prevention, risk reduction, and disease management.

Program Components & Partnerships

GHLW focuses on promoting healthy lifestyles and preventing chronic disease through a variety of initiatives and activities. Some of the chronic diseases that they focus on are diabetes, high blood pressure, heart disease and cancer. They tackle these diseases by offering free classes to the community. These classes include Diabetes Prevention, Diabetes Self-Management, Fresh Start Tobacco Cessation, Kids and Fitness, and a general Healthy Living class. These programs are evidence-based and have been shown to reduce hospitalizations and readmissions. On-site classes are also offered to employers, and there are incentives available for participation.

A huge component of GHLW is their partnerships. The program has partnered with various sectors of the community, such as schools, public and private employers, and faith-based institutions. GHLW attributes its success to these partnerships. GHLW also partners with local physician practices to refer patients to the GHLW classes. Numerous community physicians refer their patients for participation in 5 different free classes.

For the faith-based partners, GHLW has equipped them with toolkits to help their church community develop healthier lifestyle habits. GHLW has also provided training to pastors, or other church members, to lead Diabetes Self-Management and Nutrition classes for their membership. Some churches have taken the initiative to incorporate healthy programming and policies, such as walking bible study and banning fried chicken.

To target obesity prevention, GHLW created partnerships with the local school systems to promote Power Up for 30 (part of the Georgia SHAPE program), which encourages elementary schools to incorporate 30 extra minutes of physical activity into each day. GHLW has also developed numerous nutrition and physical activity programs for families, even creating an app that can provide information on healthy food choices at local restaurants.

Tanner and GHLW provide business and industry partners with support and resources to develop health initiatives at workplaces. These initiatives can be focused on tobacco cessation on business campuses, enabling healthy food access by providing healthier options in vending machines, providing individual health assessments for employees that measure blood pressure, glucose, etc., and encouraging improved health literacy among employees. Employers can access free promotional materials that encourage healthy workplace changes, such as encouraging employees to take the stairs over the elevator. GHLW also visits employer worksites to conduct on-site health education sessions.

Tobacco cessation programs and creating smoke-free environments have been important GHLW initiatives. Employers can be trained to be Fresh Start Smoking Cessation facilitators to encourage healthier habits for their employees. Employers can also work with GHLW to create signage for their specific workplace, as one employer did to create signage for smoke-free areas. GHLW has also been working with local housing authorities to help multi-unit housing sites go smoke-free.

Employers can get technical assistance from GHLW to establish workplace policies and incentives. For one employer, GHLW helped create a plan of action and timeline for the company to reach tobacco-free status by January 2017. This was done by establishing 7 policies that could be slowly implemented over time to influence employee culture to reach a tobacco-free status. GHLW has also worked with some employers that have had no prior health and wellness programs in place and has helped them create programs from the ground up.

GHLW has seen a lot of buy-in from the community and has had an incredibly high number of individuals volunteer to help the program grow. In

many ways, Tanner is the catalyst that brings the community together around health improvement efforts, and GHLW provides the backbone for many different community initiatives. There is also a Carrollton Greenbelt walking/running/biking trail development initiative that is connected to the work of GHLW.

Georgia Watch attended a community health summit on November 9, 2016 that Tanner hosted. At this meeting, GHLW partners came together to connect findings from the hospital's community health needs assessment with activities for the hospital's community benefit implementation plan. Tanner is working to ensure that community partners are involved at every step of the way to maintain GHLW's coordinated effort to improve community health.

Voices of Progress Terrell County

Summary

The Cancer Coalition of South Georgia (now Horizons Community Solutions) has been in Terrell County for over 10 years doing cancer prevention work. Now, they are serving as a neutral facilitator to bring different community partners together through the Voices of Progress Terrell County initiative. Several years ago, they started this work by conducting a two-year assessment to identify the needs and health priorities of the community. They collected data that confirmed high rates of cancer, cardiovascular disease, diabetes, teen pregnancy, and STD rates in Terrell County. Key informant interviews revealed areas of common concern, such as access to healthy food, primary care providers, and housing. Out of this work, the Voices of Progress Terrell County community health initiative was launched in 2015. Founding partners include: Horizons Community Solutions, Phoebe Putney Memorial Hospital, and the Southwest Public Health District of the Georgia Department of Public Health.

Voices of Progress has the mission to "create a culture of wellness by promoting opportunities that improve overall health and quality of life among individuals and families who live in Terrell County, Georgia." They have a three-year strategic community health plan with goals that include: increasing community engagement and cohesion, encouraging job training for young adults, expanding the availability of quality housing, increasing access to and utilization of healthcare services, promoting adolescent health, and reducing cancer incidence rates.

Funding

Voices of Progress is a relatively new community health initiative. Horizons Community Solutions was awarded funds from the Healthcare Georgia Foundation to support the development of the 3-year strategic plan. Various partner agencies provide in-kind support to fulfill the goals and objectives agreed upon in the strategic plan.

Program Components

There are four main program themes for the Voices of Progress project: Prevention and Healthcare Access, Community Engagement, Workforce Readiness, and Housing. The health program focuses on healthcare access and utilization in addition to encouraging a healthy lifestyle by promoting education on healthy food choices, fitness, adolescent health, and preventive health screenings. The community engagement arm works to increase community cohesion, pride, and cross cultural collaboration. This is done through community capacity building trainings, media engagement and community service projects. For workforce readiness, job trainings will be offered to the community to increase soft skills and expose residents to industry jobs. This is crucial since only 10.1% of the population in Terrell County graduated from college or have any form of higher education. Lastly, the housing arm works to expand the availability of decent, safe and affordable housing for low and moderate-income families. There is a recognition that housing is a social determinant of health and that safe housing is necessary for improving health outcomes.

Partnerships

There are many partnerships that are critical to Voice of Progress. The original and continual partnership between Horizons Community Solutions, Phoebe, and the Southwest Public Health District of the Georgia Department of Public Health is the foundation for the work being done in this initiative. Quest for Change has served as a local expert on adolescent health issues and evidence-based strategies to mitigate described issues. The partnership with the Terrell County Schools has been beneficial in this effort and facilitated the presentations at local schools. Other partners include the Terrell County Chamber of Commerce, local government, the local housing authority, the Terrell County UGA Extension Office, community-based organizations like Alpha Pregnancy Center and



Southwest Georgia Project, Turner Job Corps Center, and Terrell County Family Connections.

For more information visit www.voicesofprogress.com

6. Future Opportunities for Project Partners & Lessons Learned

Throughout 2016, our Intersectoral Community Health Improvement Collaborative partners forged and solidified relationships of mutual trust and respect, learned together, educated others, explored common interests and concerns, recognized areas of alignment and divergence, and created avenues for future partnerships and work together. We gathered information about extremely innovative and effective rural community health improvement work happening in Georgia that is bringing public health, employers, advocacy groups, providers, hospitals, and community-based organizations together into cooperative working partnerships.

We learned about the expertise and capabilities of our diverse partners, including: consumer and child advocates, public health and employers. We explored what motivates employers and keeps them engaged. Engagement with employers requires building trust (which takes time to cultivate) and clear communication. Employers appreciate work that has a clear mission and data-driven goals with actionable steps. To community health improvement work, employers can bring valuable relationships with community leaders, insight into local healthcare delivery systems, an understanding of the struggles their employees face, capability in healthcare claims processing and analysis, and expertise in ergonomics, healthy eating, and physical fitness. Engaging employers in community health improvement work and keeping them at the table may take an investment of time and a thoughtful strategy, but it is worth the effort.

At the conclusion of our project, we found that there was appetite among all project participants for:

- **Creating a permanent multi-stakeholder group to examine healthcare quality in Georgia**
- **Promoting the use of school-based health centers (SBHCs) in Georgia**
- **Creating a learning network of communities across the State of Georgia that are engaged in community health improvement initiatives**

The ICHIC partners plan to continue exploring ways that we can work together on these endeavors.