



GILLINGS SCHOOL OF GLOBAL PUBLIC HEALTH
North Carolina Institute for Public Health

**Leveraging Cross-institutional Academic
Collaboration to Build Collective Impact within a
Community-based Substance Misuse Coalition**

American Public Health Association
Annual Meeting 2020

Leveraging Cross-institutional Academic Collaboration to Build Collective Impact

within a Community-based Substance Misuse Coalition

Erin Magee, MSW, MPH

Emma Olson, MSW, MPH

Kathryn Gaasch, MEM

John Wallace, PhD, MSPH



GILLINGS SCHOOL OF GLOBAL PUBLIC HEALTH
North Carolina Institute for Public Health

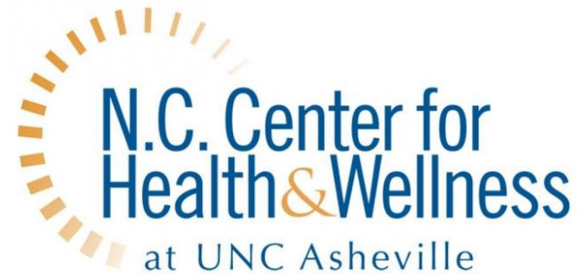
Project Background



Collaboration Partners

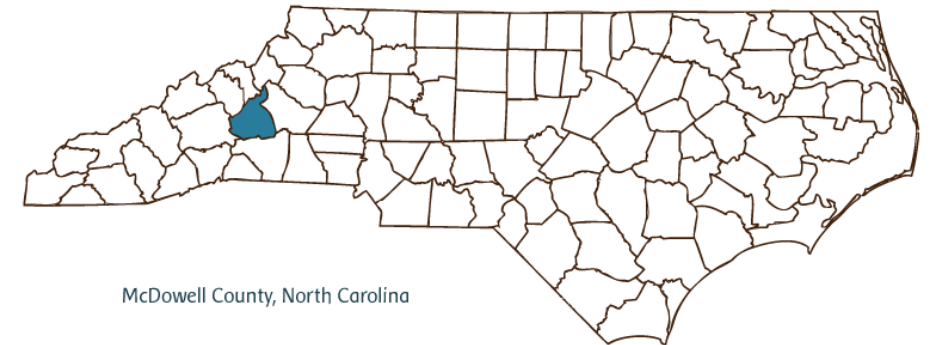


GILLINGS SCHOOL OF GLOBAL PUBLIC HEALTH
North Carolina Institute for Public Health



RURAL FORWARD
NORTH CAROLINA

McDowell County Substance Use Workgroup



McDowell County, North Carolina



GILLINGS SCHOOL OF GLOBAL PUBLIC HEALTH
North Carolina Institute for Public Health

North Carolina Institute for Public Health (NCIPH)

ASSURANCE
ASSESSMENT
POLICY



We are *passionate and committed* to the work of public health.



We *build capacity* to create positive outcomes.



Our work is deeply rooted in *collaborative partnership*.



We strive to support and serve *all communities* in North Carolina.



GILLINGS SCHOOL OF
GLOBAL PUBLIC HEALTH

North Carolina
Institute for
Public Health



We help bridge public health *academics and practice*.

Mission: To facilitate collaborative solutions to population health challenges in N.C. and beyond

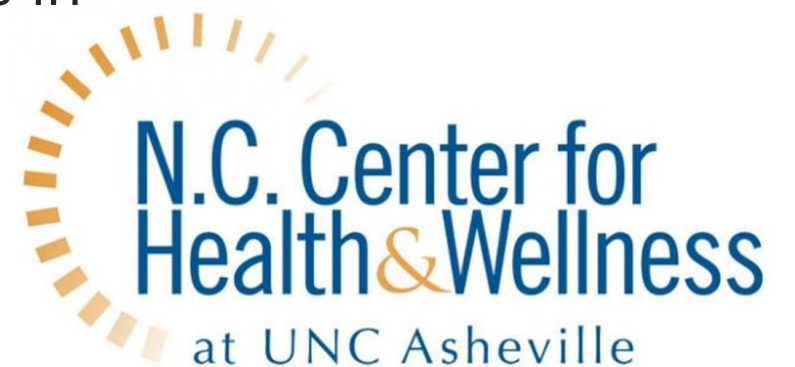


GILLINGS SCHOOL OF GLOBAL PUBLIC HEALTH

North Carolina Institute for Public Health

North Carolina Center for Health & Wellness (NCCHW)

- Located within the University of North Carolina Asheville
- Mission: Develop equitable opportunities that lead to healthy North Carolina communities.
- Works “to impact policy, build capacity, and ignite community initiatives by working through a web of cross-sector relationships organized around building healthier places throughout the state.”
- Training and technical assistance support partners in understanding strengths and needs, measuring impact and improving results



Rural Forward North Carolina

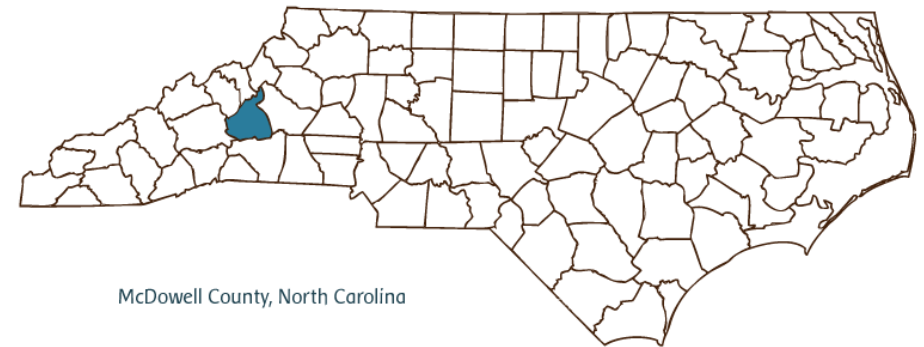
- Rural Forward NC is a program of the Foundation for Health Leadership and Innovation.
- Supports individual leaders, their organizations, and the county coalitions that are actively working to make their rural counties healthier and more thriving.
- Works collaboratively with the Kate B. Reynolds Charitable Trust to build leadership capacity, provide program-wide guidance, identify opportunities for community collaboration, and develop technical assistance and support programs in 10 rural NC counties.



RURAL FORWARD
NORTH CAROLINA

McDowell County Substance Use Workgroup

- Community led coalition of 62 stakeholders representing 39 organizations, providers and the community
- Structure of leadership group, full group, and action groups
- Leadership and full groups meet monthly
- Technical assistance (TA) provided by cross-institutional academic collaborative



McDowell County, North Carolina

Project Description



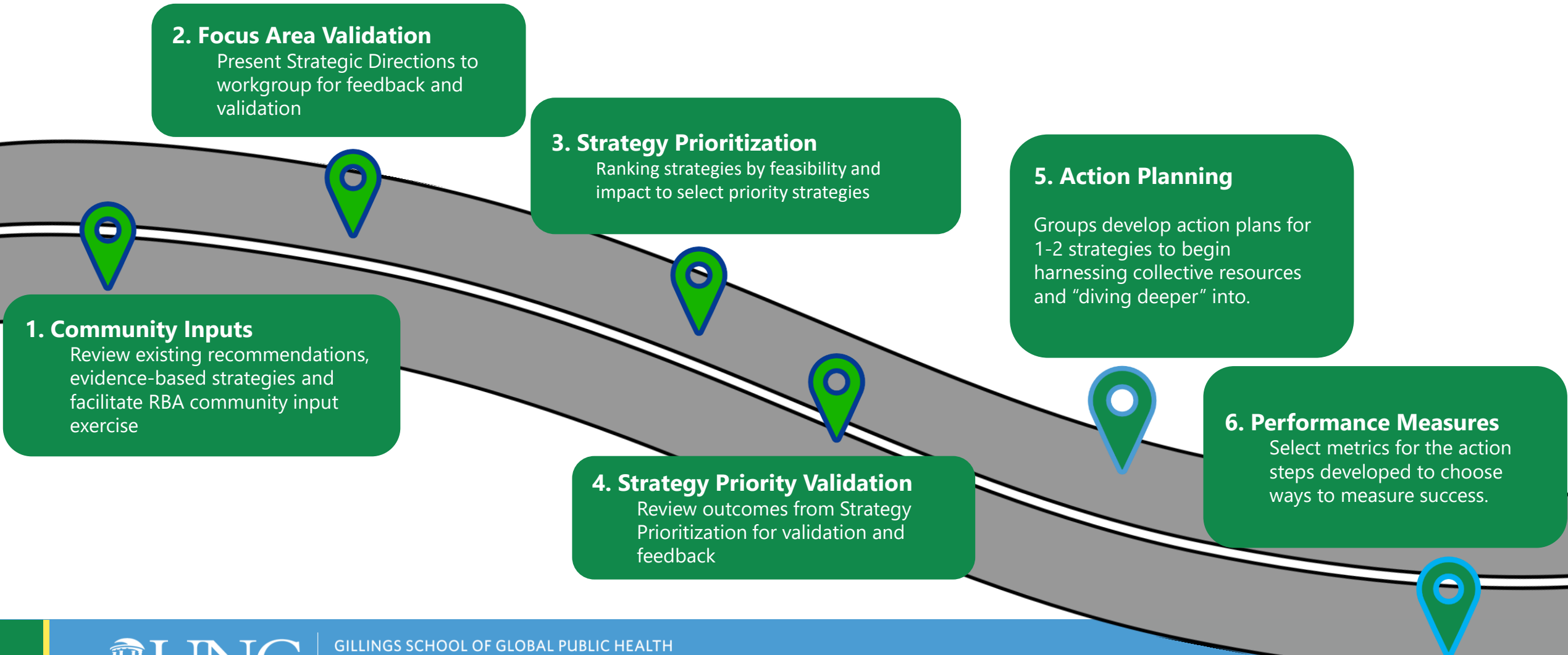
Project Description, Methods, Timeline

- 3yr Project (Jan 2019 – Dec 2021)
 - Data Gathering
 - Strategic Planning & Development
 - Empowerment for Implementation
- Identify short-term needs, strategize for long-term success
 - Support workgroup efforts around strategic planning for treatment, recovery, and prevention
- Use new and existing data/resources to quantify needs
 - Build the rationale for further investment in sustainability & coordination of care and resources

Desired Results of Collaboration

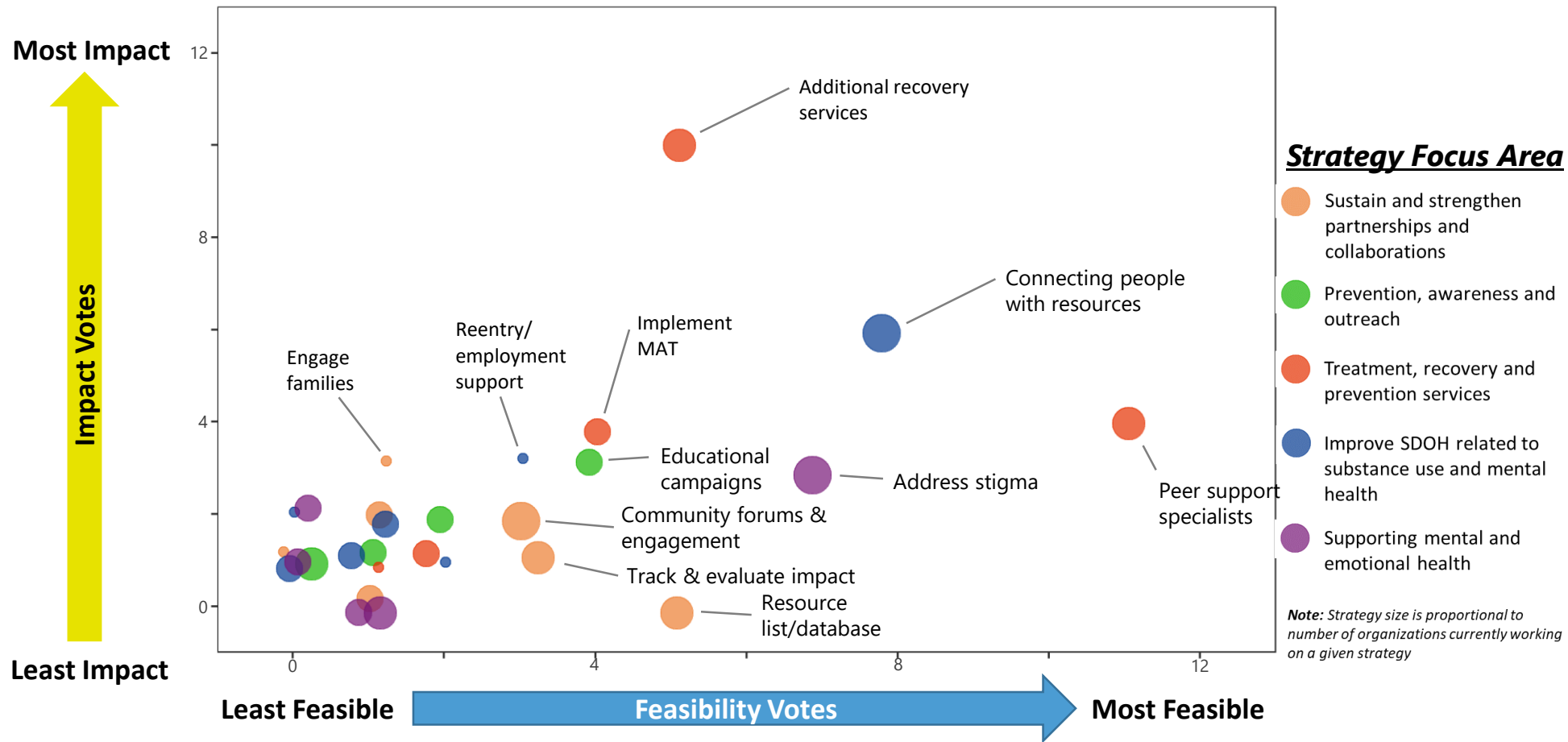
- Shared knowledge & expertise
 - Cross-institutional collaboration utilizes strengths of each organization
 - Broad perspective from across NC based on prior work of each institution
- Shared power
 - Cross-institutional collaboration is a partnership rather than hierarchy
 - TA model ensures community maintains power & voice
- Objectivity
 - Community-driven work supported by “outside” TA providers
 - Support workgroup with state & national perspective and context applied to local driven solutions

Strategic Planning Roadmap

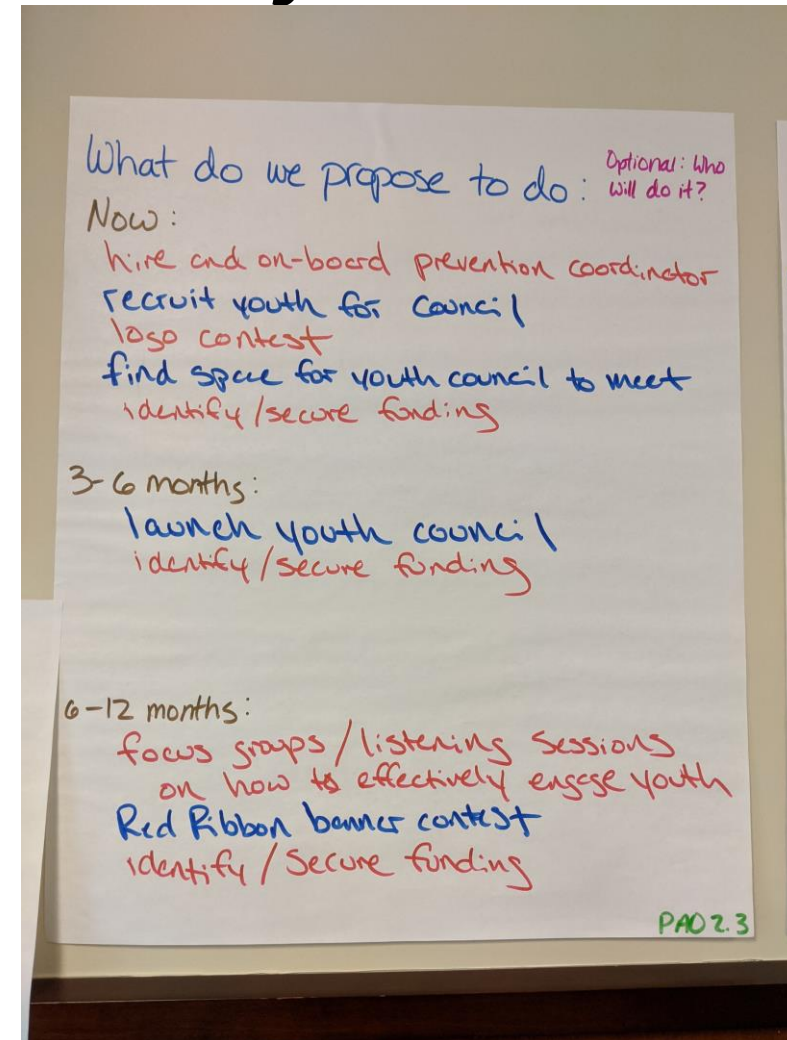


Prioritizing Strategies

Impact & Feasibility of All Strategies That Received Votes



Results-Based Accountability™ Planning Process

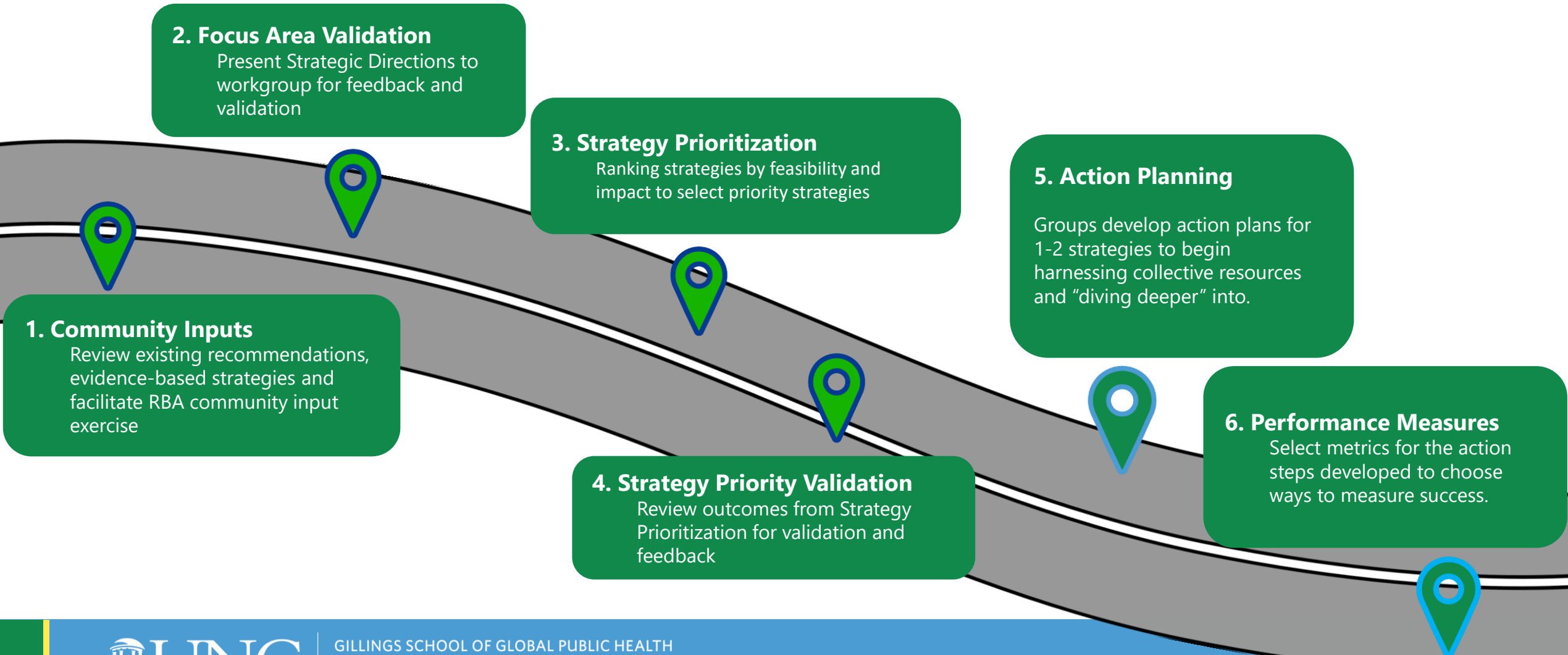


Process Outcomes

- Strategic Action Plan
 - Different strategic areas selected from community inputs through a process of Substance Use Group discussion and voting and action groups formed around them
 - Action groups began identifying metrics to track to identify success and forward motion
- Collaborative Partners Leveraging Strengths
 - Facilitation and Results-Based Accountability (RBA) from NCCHW
 - Data collection, analysis and support from NCIPH
 - Coordination and facilitation of Workgroup by Rural Forward NC



Strategic Planning Roadmap



COVID-19 Challenges

- Challenges

- Change to virtual meetings
- Collaborative members responding to community needs
 - Increase in mental health and substance use needs
 - Lack of reliable internet access in some areas of the rural county
- Rapidly changing picture of community outcomes
 - Unemployment
 - Schools closed
 - Food and nutrition needs increased

- Collaborative Partners Leveraging Strengths

- Partners' varied skills and expertise allowed them to respond to coalitions changing needs as situation evolved
- Surveyed members in September to assess members' perspectives on how the coalition should move forward and feasibility of work for members

Survey: Pulse-check and Moving Forward

- Six-months into the COVID-19 pandemic, the TA team conducted a survey of the workgroup to:
 - **Build understanding** of the workgroup members' experiences, and perceived strengths, opportunities and priorities
 - Help the workgroup and leadership team decide next steps and **where to channel energy** over the next year and beyond
 - **Drive internal improvement planning** related to communication, functioning, member experience, resources, group effectiveness, etc.
 - Provide **direction to TA team** for how we could best support the work group in growing and moving forward

Survey Results

- Future directions
 - Racial equity awareness
 - Address resource gaps in community
 - Trainings on best practices for substance misuse work
 - Building and strengthening the workgroup network for program implementation



Key Takeaways: Community Work

- **Prioritizing action steps:** The challenge and need to balance a sense of overall urgency in the work with meeting the needs of a community in crisis and preventing burnout among providers
- **Processes not linear:** Finding ways to develop tools that build on previous planning processes and also recognize and support what feels feasible and necessary now
- **Following community leadership:** continue to meet community where they are and work to educate funders when the timeline and work plan don't match initial proposal

Key Takeaways: Cross-institutional TA

- Successful collaboration has relied on **shared power dynamics** between the partners and the workgroup
 - Shared power & community autonomy is critical
 - Flexibility and responsiveness to community direction made pivot to COVID-19 possible
- Cross-institutional academic collaboration **leveraged the skills & expertise of various organizations**
- Cross-institutional collaborative made for an **adaptive and responsive model** for continued support during COVID-19
 - COVID-19 challenges were dispersed across multiple agencies, rather than absorbed by a single agency



GILLINGS SCHOOL OF
GLOBAL PUBLIC HEALTH

North Carolina
Institute for
Public Health



sph.unc.edu/nciph



facebook.com/uncnciph

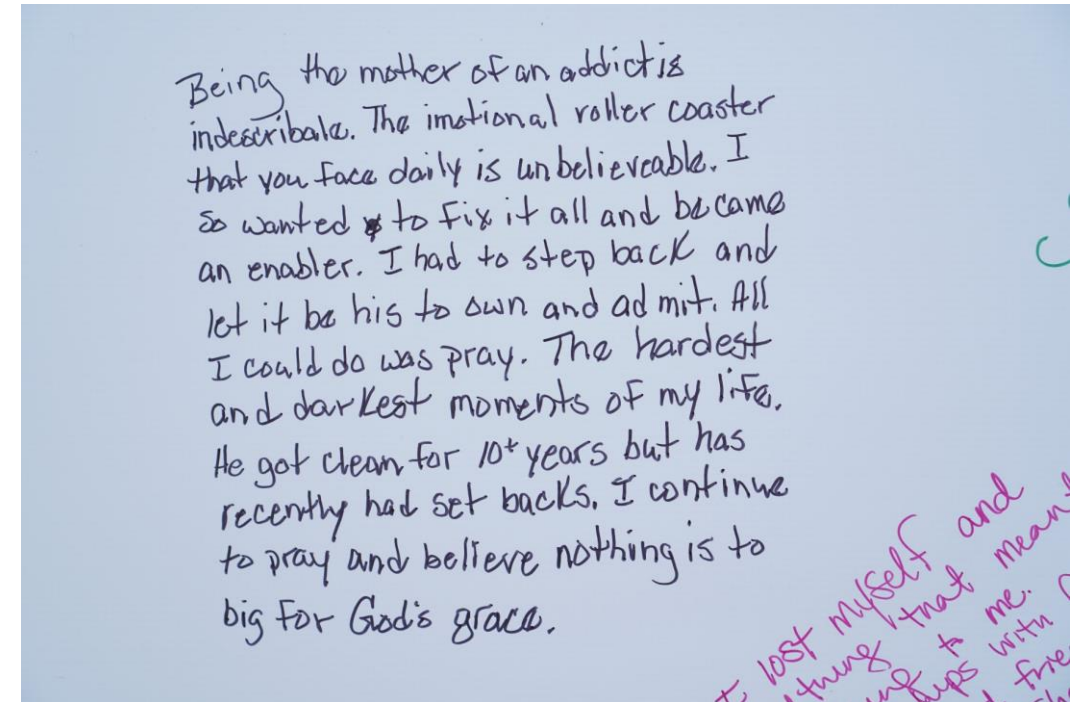


linkedin.com/company/nciph

Extra slides

Assessment and Qualitative Data Collection

- Community data collection at the Recovery Rally



Survey Results

- 70% of the workgroup reported their participation was affected by COVID-19
- Strengths of the workgroup
 - Member experience
 - TA & Leadership
 - Community value
 - Local subject matter experts participation
- Opportunities for the workgroup
 - Resources
 - Member experience
 - Group effectiveness
 - Value of participation
 - Shared language

Cross-Institutional Collaboration Staff



John Wallace, PhD, MSPH
Primary Investigator, NCIPH

Emma Olson, MSW, MPH
NCCHW



Amy Belflower Thomas, DrPH, MHA, MSPH
Primary Investigator, NCIPH

Amy Lanou, PhD
NCCHW



Erin Magee, MSW, MPH
NCIPH

Kathryn Gaasch, MEM
Rural Forward NC

Identifying Strategies

- Summarize Community Inputs

- Community Health Assessment 2018
- Community Recommendations and Strategy
- Whole Distance Exercise
- North Carolina Opioid Action Plan 2017-2021

- Form Action Workgroups

- Cross walked community inputs to identify different strategic areas of work
- Voted on strategies by impact and feasibility
- Formed small work groups based on coalition partners' interest and expertise
- Began process of identifying metrics to measure success and forward motion

Identifying Strategies

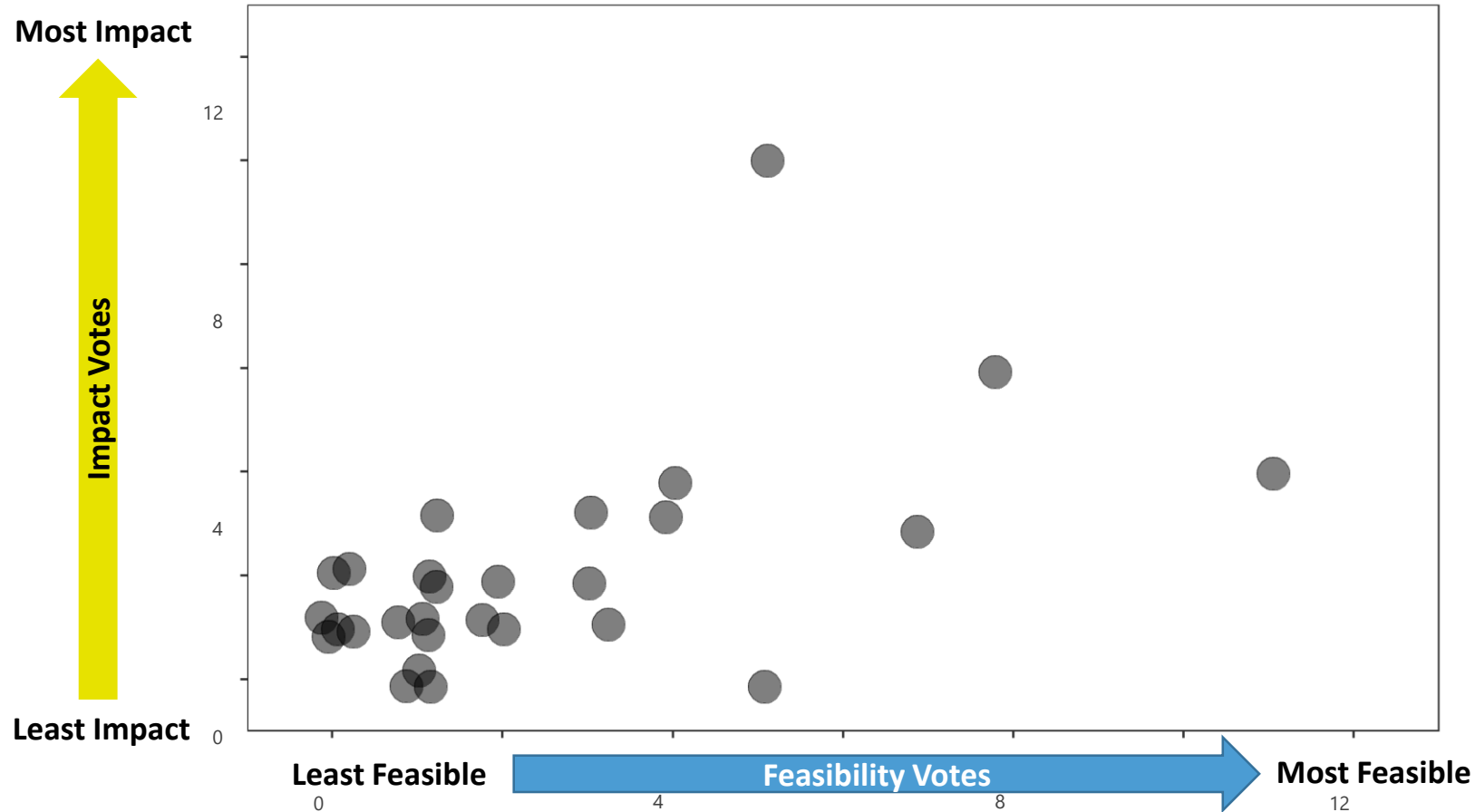
Strategic Area	Strategy
Sustain and strengthen partnerships and collaborations	Family Engagement - support & mediation
Improve SDOH related to substance use and mental health	Legal support and advocacy - Macro/governmental, Micro/interagency
Improve SDOH related to substance use and mental health	Addressing and educating about systemic racism
Sustain and strengthen partnerships and collaborations	Engage new partners in planning and implementing strategy - including faith communities

Strategic Planning Process



Prioritizing by Impact and Feasibility

Impact & Feasibility of All Strategies That Received Votes



- 28 strategies received at least 1 vote for feasibility/impact
- Some strategies begin to emerge as impactful & feasible