Collaboration in Action

With collective impact as their primary goal, take a look at how eight hospitals, one local health department, and many other partners are working to identify the salient issues in their Community Health Needs Assessment and taking action to improve the health of San Franciscans in implementing their Community Health Improvement Plan.
Overview of Case Example

- What’s Happening in San Francisco
- Working Together
- Iterative Process
- Using Healthy People 2020
- Taking Action Together
- Community Engagement
- Accountability to Outcomes
- Community Voice and Trust

Comprised of many small, yet distinct neighborhoods, the city is a relatively small, but mighty population center, with a variety of organizations serving those that live, work, play, and learn there. Due to a nearly ten year old state law requiring non-profit hospitals in California to complete a community health needs assessment (CHNA), the eight hospitals serving San Francisco have a history of completing health assessment work collaboratively through the San Francisco Community Benefit Partnership.

This Partnership has grown over time and now includes representatives from a number of related sectors, and is co-led with the San Francisco Department of Public Health (SFDPH) and the University of California-San Francisco (UCSF). This collaborative recently completed a CHNA that will help the hospitals meet the IRS requirement and the State of California requirement and also positions the SFDPH to conform to the Community Health Assessment (CHA) and community health improvement plan (CHIP) requirements for national, voluntary, public health department accreditation.

What’s happening in San Francisco?

Meet the interviewees!

**Jim Soos**, Assistant Director of the Policy and Planning Department, San Francisco Department of Public Health, CA

**Abbie Yant**, Vice President of Mission, Advocacy and Community Health, St. Francis Memorial Hospital, CA

“I think we’ve done really well. We’re coming from diverse agencies and organizations. Our missions are fairly well-aligned, but not in complete alignment. I think we’ve managed to find the points of intersection where our interests are really aligned and made the most of those...Regardless of where we sit, our vision is the same: we all want to live, work, and play in healthier communities. That sort of is the bottom line for all of us.”
~Jim Soos, LHD representative

“I would agree that it’s been a good example of shared governance. We’re pretty conscious of resources that we each hold and try to use them in a complementary fashion We always seem to find a way to muscle up to get the work done. That’s really been a pleasure.”
~Abbie Yant, hospital representative
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~Abbie Yant, hospital representative

Yant describes hospitals and LHDs working collaboratively.
Iterative Process

“We really focused our efforts to get down to three to five goals this time and managed to come down to three. That’s a significant difference from the past. That’s part of the iterative learning process; it takes attempts at this, not to get it right, but to get it better each time.”

~Jim Soos, LHD representative
San Francisco also considered alignment of their final CHIP priorities with those at the state and national levels. Their current priorities, Access to Quality Health Care and Services, Physical Activity and Healthy Eating, and Safe and Healthy Living Environments, reflect those of the Let’s Get Healthy California initiative and mirror those set forth by Healthy People 2020 and the National Prevention Strategy. By adopting the Healthy People methodology of setting a ten percent improvement over the most recent citywide baseline measure for the respective indicator, San Francisco also set targets for their health improvement objectives for 2016 (intermediate) and 2020 (long-term) in alignment with Healthy People 2020 measures.
“I think with this leadership discussion, we’ll make some decisions on what we need to go forward with and what we can let go of in order to do the work that’s in front of us. I think we all know on a very intuitive level that we can’t maintain the commitment to the structures as the currently exist and continue the work that needs to be done going forward. But sometimes undoing structure is really hard...I think that the other thing we’ve experienced over the years is that there is always tremendous need that far outstrips our ability to respond. Working together to narrow those interests is worthwhile and yet, hospitals and health departments for the most part are looking at the health needs from two very different lenses. I think what we’ve found over the years is that there is room to have us both, or anything in between, represented.”

~Abbie Yant, hospital representative
“I think another key point of our success was that we agreed, worked hard, and learned a lot about how to engage community members in the process. I think that staying true to that commitment that we made with those community members is one of our large challenges moving...I think it’s very important to recognize that these are very long term commitments. It is one of the trepidations I have with the three year cycle [for CHAs and CHIPs]. Three years goes by in a Nano-second and bringing in the community and engaging them in the process carries a huge responsibility to follow through on the commitment...If you over promise you lose the trust of the community forever”.

~Abbie Yant, hospital representative
“One of the challenges of the short, three-year time frame is looking for indicators that can actually change over three years; that can actually demonstrate that we’ve made a difference. For some of the indicators we’ve chosen in the past, there is just no way we are going to make a difference in three years on them.”

~Jim Soos, LHD representative
Community Voice and Trust

Soos describes having the voice of the community.

Soos describes the importance of building trust between partners and with the community.
Many thanks!

Learn more about San Francisco’s work at:

http://www.naccho.org/topics/infrastructure/healthy-people/stories-from-the-field.cfm