# Prevention Center for Healthy Weight and Healthy Weight Collaborative

Grantmakers in Health
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#### **About HRSA**

#### **HRSA Mission**

"To improve health and achieve health equity through access to quality services, a skilled health workforce and innovative programs."





#### **About HRSA**

- Nearly **19 million patients** are served through more than 8000 HRSA-funded **health centers**.
- Over 500,000 persons with HIV/AIDS receive services through over 900 HRSA-funded Ryan White Clinics.
- **34 million** women, infants, children, and adolescents benefit from HRSA's maternal and child health programs.
- Over 6,700 National Health Service Corps clinicians work (or will work) in underserved areas and receive loan repayment or scholarships.





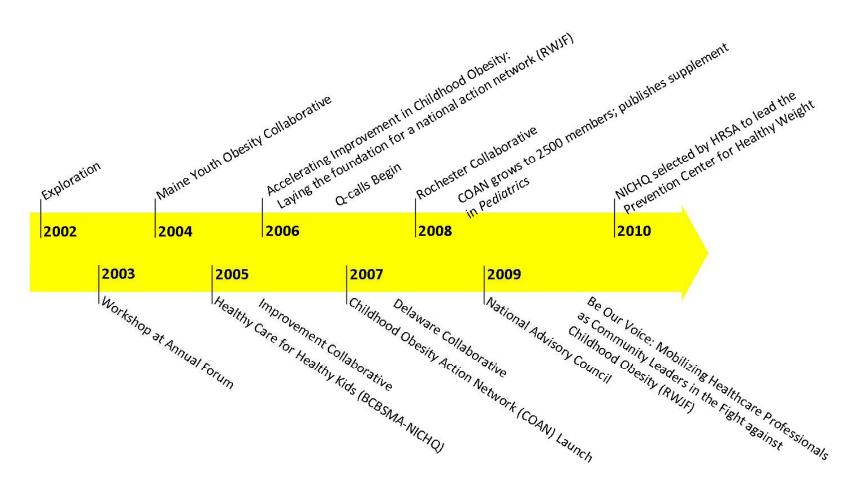
#### **About NICHQ**

- Founded in 1999, NICHQ is an independent non-profit organization that partners with healthcare systems, foundations, government, payors, and family and community organizations to:
  - Optimize healthcare system performance and
  - Identify and spread innovation and best practices.
- NICHQ's current areas of focus are:
  - Childhood Obesity
  - > Children and Youth with Special Healthcare Needs
    - Sickle Cell Disease
    - Autism
  - Neonatal Outcomes





## **NICHQ's Childhood Obesity Journey**







# The Prevention Center for Healthy Weight

Mission

 Promote positive community, healthcare and individual change to reverse the obesity epidemic and promote health equity

- Conduct Breakthrough Series Collaborative with 50+ teams to:
  - Facilitate community-based systems that bridge community, public and clinical health services
- Enable trans-sectoral teams to implement evidence-based practices to promote healthy weight and health equity
- Approach
- Focus on sustainability:
  - Strengthen regional HRSA infrastructure
  - Establish public-private partnerships
- Undertake Widespread Dissemination and Communication





# **Collaborative Design: The Systems Of Care**

#### In each community:

 Who is the population? What are their needs?

 Who are the providers and influencers and how do they interact?

 What interventions can lead to improved outcomes?

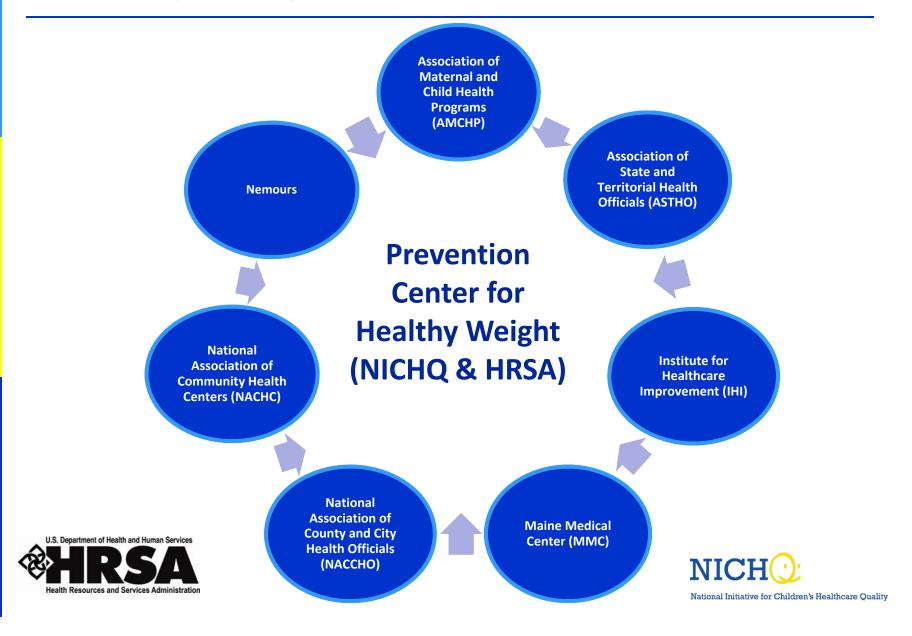




**Population** 



### **Healthy Weight Consortium**



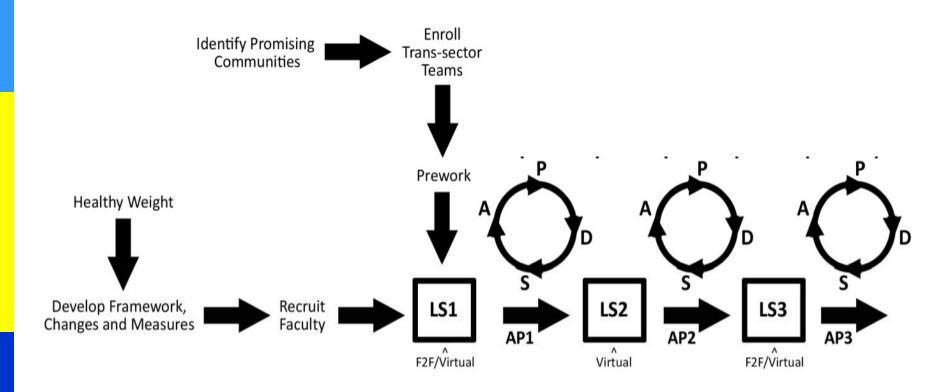
#### **Learning Collaboratives: Breakthrough Series**

- An improvement method that relies on <u>spread</u> and adaptation of <u>existing knowledge</u> to <u>multiple settings</u> to accomplish a common aim.
  - Technical Content:
    - Collaborative Charter
    - Change Package
    - Measurement System
  - Model for Improvement
  - > Attention to Structure:
    - Learning Sessions and Action Periods
- NICHQ obesity-related learning collaboratives have assisted delivery systems in moving best available evidence into action.





### **IHI Breakthrough Series™ Core Model**



LS: Learning Session AP: Action Period P-D-S-A: Plan-Do-Study-Act

#### Supports:

Email • Online Community • National & Regional Phone & Web Conferences Monthly Team Reports • Assessments • Tools • Asynchronous Training





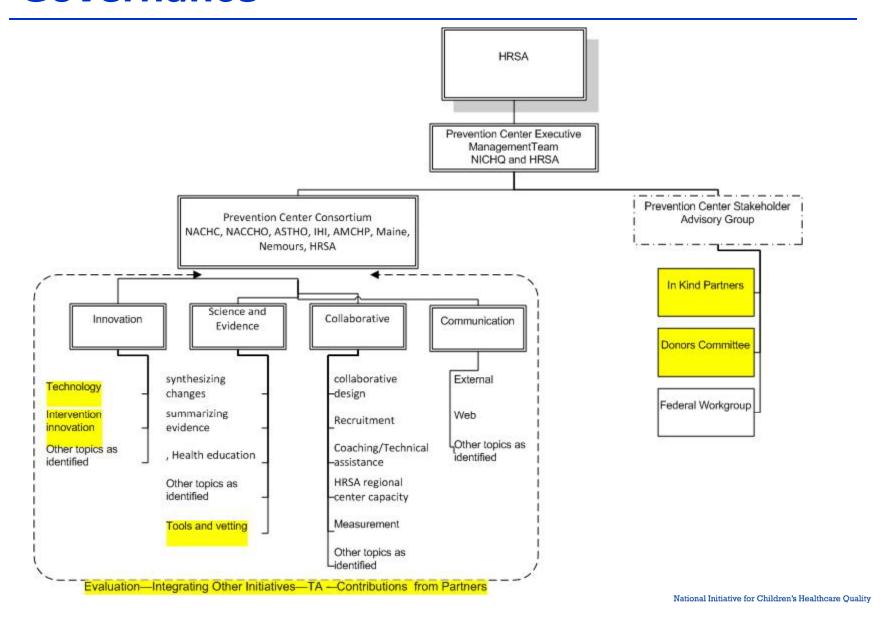
#### An expanded approach to collaboratives

- Trans-Federal partners from across HHS (e.g., CDC, NIH, AHRQ) and Federal government (e.g., USDA, Interior, Education)
- Trans-Sector public health AND primary care AND diverse communitybased partners
- Public-Private addition of private partners to fill gaps in tools and funding; diverse partners including insurers, foundations and branded partners like Sesame Place and the YMCA
- Technology emphasis on innovation and technology, particularly innovation in implementing evidence-based interventions or promising practices
- Mentor-mentee Teams to address disparities in high need/low capacity communities with high performing/higher capacity communities.





#### **Governance**



#### **Milestones**







#### **Opportunities for Partnerships**

- Provide tested tools and models
- Lend expertise
- Engage communities nationwide
- Provide financial and in-kind support:
  - Enable community teams to succeed by supporting broad collaborative participation and promising early community activities
  - Grow the Prevention Center's reach





#### **Support Teams and their Communities**

Because the Prevention Center federal funding mechanism does not allow financial support for teams/communities, we are seeking funds to enable teams to:

- Participate in the Healthy Weight Collaborative:
  - > Staff time, data collection and building of community coalitions: \$2.4 million
  - > Full multi-sector team (8 vs. typical 4 member team) to travel to learning sessions: \$600,000
- Implement programs via seed grants: \$1.5 million
- In-kind gifts (e.g., computer hardware and software, athletic clothing and supplies) to help teams promote healthy lifestyles





# **Support the Interactive Virtual Learning Community**

- We seek to build an Interactive Virtual Learning Community to expand the Prevention Center's reach, dissemination, and sustainability at lower cost
- The virtual community will:
  - > ensure seamless engagement and sharing of best practices
  - provide later adopters with learnings from high performers
  - ensure widespread dissemination and sustainability.
- A rigorous evaluation will monitor progress and inform continuous improvement





#### **Support Technology and Innovation**

- Online learning modules offered in Virtual Collaborative will include:
  - Model for Improvement
  - Capacity Building
  - > Family Engagement
  - Advocacy
  - Connecting Public Health, Clinical Care and Community
  - Change Package implementation and measurement
  - Specific Clinical, Public health, and Community Childhood and Adult Obesity Interventions
- Modules will enable users to learn at their own pace
- Initial cost: To build the virtual community environment and create online modules: ~\$1 Million
  TIGHT

National Initiative for Children's Healthcare Quality

#### **Support Dissemination and Sustainability**

- Seed grants to enable program implementation by virtual community teams: \$500,000
- Staff and technical support to maintain the virtual learning community: \$500,000 per year
- Celebratory conference to highlight promising programs and innovations.
  - Sponsorship packages to cover conference expenses, team travel





# **Next Steps: Team/Community Support**

- General approach: competitive application to:
  - Participate
  - Receive funding
- Team application timing:
  - Solicit applications starting February, 2011
  - Review and select March (Collaborative kick off April)
- Ideal: Funding for team participation in place
   February 2011
- Seed funding to support implementation of interventions to be made available on a rolling basis





# Next Steps: Technology and Innovation Support

- Technology development kicks off March 2011
- In kind donations of technology for participants,
   expertise in virtual learning desired on a rolling basis
- Virtual learning kickoff Summer, 2011 (funding permitting)





### **Partnership and Funding Next Steps**

#### **FAQs and Contact Information**

- FAQs will be provided to all interested parties
- While NICHQ finalizes partnership with the Foundation for NIH (FNIH), all inquires on funding/partnership opportunities can be directed to:
  - Funding: Melanie Hayden NICHQ Director of Development <a href="mailto:mhayden@nichq.org">mhayden@nichq.org</a> Direct line: 617-391-2727
  - ➤ Partnership opportunities: Rachel Sachs Steele, M.Ed. NICHQ Chief Operating officer and Executive Project Director <a href="mailto:rsteele@nichq.org">rsteele@nichq.org</a> 617-391-2722



