Community Balanced Scorecards
for Leading Collaborative Strategies to
Achieve Community Health Outcomes

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Results That Matter Team
(www.RTMteam.net)

For APHA Annual Meeting
San Francisco
October 29, 2012

Presenter Disclosures

Paul David Epstein

(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

“No relationships to disclose, other than the obvious relationship with my own consulting firm that does paid work of the type I am presenting.”
Results That Matter Team [www.RTMteam.net](www.RTMteam.net)

- Measuring & improving performance since 1985, mostly as Epstein & Fass Associates
- Use of RTM Team’s Community Balanced Scorecard (CBSC) tools for collaborative health improvement planning & implementation, strategic planning, & accreditation preparation
- Work with ASTHO, NACCHO, Public Health Foundation, & directly for PH organizations, hospitals, partnerships, others
- QI & Evaluation Coaching for LHDs across the U.S. (NACCHO)
- 3 chapters in *The Public Health Quality Improvement Handbook*, including one on Community Balanced Scorecards
- Working with InsightVision Inc. whose InsightVision software powers scaling-up the use of CBSC & collaborative implementation

CBSC Tools: From a Promising to a Best Practice

- Used by state & local health departments & HD-led, nonprofit-led, & hospital-led community health partnerships for strategic planning & health improvement planning for many issues, e.g.:
  - Healthy eating & active living*/wellness/obesity reduction
  - Health disparities/determinants of health
  - Social support networks
  - Access to: health care/dental care/mental health care
  - Behavioral health*/substance abuse/suicide prevention
  - Integration of community health & clinical practice
  - Breastfeeding*
  - Low birth weight rate reduction
  - Cancer morbidity & mortality reduction
  - Public health information management
  - Public health preparedness
  - Healthy housing*

*Examples in this presentation

Results That Matter Team [www.RTMteam.net](www.RTMteam.net)
Power of Strategic Alignment

Community Balanced Scorecard tools (e.g., strategy maps) improve the Alignment and Execution of Strategies

No Strategic Alignment → Execution Gap

- State Health Dept
- Local Health Depts
- Other Public Agencies
- Hospitals
- Nonprofits
- Employers
- Schools
- Community Groups
- Faith Communities
- Families & Individuals

→ Public Health Outcomes

→ High Level Goals

Community Balanced Scorecard Components

- Vision, Overall or by Issue or “Theme” or Program
- Perspectives
- Strategic Objectives
- Strategy Map(s)
- Performance Measures, Targets, & Initiatives

Could be MAPP Vision or related to it.

Other Tools in this Presentation:
- Priority Setting Tools
- Community Results Compacts

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Approach to Collaborative Action

1. Develop strategy maps with vision and indicators (CBSC approach)
2. Align community partners with each strategy
3. Develop action plans with strategies, measures, key partners
4. Leverage assets from all sectors of community
5. Implement strategies

Vision: Cheshire County residents will make our community the healthiest in the nation by 2020 by adopting more active lifestyles.
Vision: Cheshire County residents will make our community the healthiest in the nation by 2020 by adopting more active lifestyles.

**STRATEGIC OBJECTIVES**

- Decrease prevalence of disease related to obesity
- Increase Active Living and Reduce Screen Time
- Improve the Built Environment for Active Living
- Develop & Advocate for Policies, Plans & Programs that increase active living
- Evaluate and Improve Programs and Projects
- Identify and Use Best Practices

**MRTMA becomes lead partner of “Built Environment” objective**

“Complete Streets” evaluated as an early high-value opportunity

Engage individuals and organizations in action around active living where people live, learn, work & play

**MRTMA & Young Professionals Network Advocate for Complete Streets**

Decrease prevalence of disease related to obesity

Increase percentage of adults and children at a healthy weight

Increase Active Living and Reduce Screen Time

Improve the Built Environment for Active Living

Develop & Advocate for Policies, Plans & Programs that increase active living

Identify and Use Best Practices

“Complete Streets” among many best practices ID’d

**Resident's take a look at their city with their feet**

Walking the walk in Keene

Health advocate touts 'complete streets' thinking in city planning

Champions Live • Share • Model • Inspire

**MRTMA**

**Keene YPN**

Young Professionals Network

**Complete Streets** among many best practices ID’d

“Complete Streets” evaluated as an early high-value opportunity

Engage individuals and organizations in action around active living where people live, learn, work & play

**Strategic Objectives**

- Engage individuals and organizations in action around active living where people live, learn, work & play
- Increase percentage of adults and children at a healthy weight
- Improve the Built Environment for Active Living
- Develop & Advocate for Policies, Plans & Programs that increase active living
- Evaluate and Improve Programs and Projects
- Identify and Use Best Practices

**Vision:**

Cheshire County residents will make our community the healthiest in the nation by 2020 by adopting more active lifestyles.
Sign the Complete Streets Pledge

Call to Action

More than 150 civic leaders, clinicians, business owners, educators, and citizens have signed on as supporters of the Complete Streets Resolution

Keene City Council Adopts Resolution as City Policy!
Vision: Cheshire County residents will create the healthiest in the nation by 2020 by promoting breastfeeding initiation and continuation

Priority Issue: Weight/Physical Activity/Nutrition
Theme: PHYSICAL ACTIVITY

Strategic Focus: Stop. Decrease. Reverse

- Increase Physical Activity
- Increase Prevalence of Healthy Weight & Fitness
- Improve Work-Life Balance, Stress Management, & Sleep
- Improve Health Providers’ Competencies w/Breastfeeding Promotion

- Increase Accessible Bike Paths & Walking Trails
- Increase Safe Walking to Schools & Other Destinations
- Encourage Structured Organization to Incorporate Physical Activity into Daily Schedule
- Engage Elected Officials in Promoting Healthy Behaviors

- Increase Prevalence of Ideal Body Weight
- Increase Adoption of Workplace & School Wellness Programs
- Engage Parents in School Wellness Policies & Programs
- Increase Healthcare Providers’ Engagement in Promoting Healthy Lifestyles

- Replace Children’s & Adult’s Passive Screen Time with Physical Activity
- Create Policies to Encourage Frequent Activity Everywhere
- Improve School Wellness Policies & Programs
- Engage Organizations in Wellness Policies & Programs

- Increase Accessible Screen Time for Established Travel
- Assess the Physical Environment to Increase Self-powered Travel
- Identify & Use Data & Best Practices
- Engage Many Partners to Support Active Lifestyles

- Increase Healthcare Providers’ Engagement in Promoting Healthy Lifestyles
- Engage Elected Officials in Promoting Healthy Behaviors
- Engage Parents in School Wellness Policies & Programs
- Increase Healthcare Providers’ Engagement in Promoting Healthy Lifestyles
A “Collaborative Leadership Conversation” that started by examining one Strategic Objective.

**Perspective**
- Community Health Status
- Community Planning & Policy Development
- Community Asset Identification & Development

**STRATEGIC OBJECTIVES**
- Strategic Focus: Stop. Decrease. Reverse
- Increase Prevalence of Healthy Weight & Fitness
- Increase Prevalence of Ideal Body Weight
- Increase Physical Activity

**Issues:**
- Availability of bike paths & walking trails vary by community
- Most paths and trails do not connect across communities
- Now, while no one is building, is the time to press for healthy zoning such as connecting paths & trails across subdivisions.
- So we need to focus on this planning & policy objective on the physical environment & make zoning improvements part of it.
- We will need elected officials to approve zoning changes.

- Who do we know who can be effective advocate for these policies? Who would lead?
- HART to lead; others: Pete’s Bike Shop, Parks & Rec, Biking/Hiking Clubs, Law Enforcement.

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**Strategic Performance Measurement**

**Population Outcomes**

**Place Outcomes**

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Lagging & Leading Indicators

Population & place outcomes tend to “lag” …

So you need **performance drivers** that “lead” to enable mid-course corrections to your strategy.

*Some performance drivers are participant outcomes*

Performance Drivers to Outcomes

**Chains of Success in a CBSC**
**STRATEGIC OBJECTIVES**

**Perspective**
Another strategy map conversation: “What are our early ‘high leverage drivers’ of outcomes?

**Improve outcomes for people with, or at risk of, behavioral health problems**

- Reduce risk of behavioral health crises, including hospitalizations & suicides
- Improve access to behavioral health resources
- Research & seek funding for opportunities to use evidenced-based best practices

**Increase early identification & treatment**

- Develop & advocate for new or improved programs & policies on behavioral health
- Monitor needs by problem type & demographics
- Continually update knowledge & skills of behavioral health professionals

**Educate “gatekeepers” (health workers, educators, employers, first responders, & others) about behavioral health**

**Wood County Performance Measures for Highlighted Objectives**

<table>
<thead>
<tr>
<th>Community Assets</th>
<th>Improve outcomes for people with, or at risk of, behavioral health problems</th>
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<tbody>
<tr>
<td><strong>Population Outcomes:</strong></td>
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<tr>
<td>- Suicide rate</td>
<td></td>
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<tr>
<td>- Substance abuse rates for youth</td>
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<td>- Hospitalization rates for behavioral health</td>
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</table>

<table>
<thead>
<tr>
<th>Community Implementation</th>
<th>Increase early identification &amp; treatment</th>
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<tr>
<td><strong>Performance Drivers:</strong></td>
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<tr>
<td>- # of youth and adults who are screened for depression</td>
<td></td>
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<tr>
<td>- # of youth identified for early behavioral health concerns</td>
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<tr>
<td>- # of youth who receive treatment due to the screening process</td>
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<thead>
<tr>
<th>Community Implementation</th>
<th>Educate “gatekeepers” (health workers, educators, employers, first responders, &amp; other stakeholders) about behavioral health</th>
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<tbody>
<tr>
<td><strong>Performance Driver:</strong></td>
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<tr>
<td>- # of “gatekeepers” trained in identifying &amp; responding to behavioral health concerns</td>
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<tr>
<td>- # of gatekeepers who report that the training enhanced their ability to respond to behaviors of concern in others.</td>
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<tr>
<td>- # of gatekeepers who report having applied the knowledge learned in training situations in their life.</td>
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Collaborative Conversations to Set Implementation Priorities

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STRATEGIC OBJECTIVES

Vision: All New Yorkers enjoy healthy built environments that reduce risks from environmental exposures and hazards that cause illness and injury

<table>
<thead>
<tr>
<th>Perspective</th>
<th>Strategic Focus: Create Healthier Homes</th>
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<tr>
<td></td>
<td>Reduce illnesses, injuries, &amp; other adverse health outcomes related to the home environment</td>
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<td>Reduce health risks from hazards related to the home environment</td>
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<td>Implement theme-based healthy housing education tailored to specific audiences</td>
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<td>Develop &amp; implement an investigative agenda that focuses resources in areas of known high risk</td>
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<td>Collaborate with state &amp; local agencies to improve enforcement of home environment laws &amp; regulations</td>
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<td>Modernize healthy housing legal, policy, and program frameworks to close public health gaps</td>
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<td>Assess housing health issues by analyzing surveillance systems &amp; databases</td>
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<td>Share the results of evaluations with partners to improve program effectiveness</td>
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<td></td>
<td>Implement environmental public health cross training</td>
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<td></td>
<td>Collaborate/coordinate with housing stakeholders to identify solutions for improving home health</td>
</tr>
</tbody>
</table>
Vision: All New Yorkers enjoy healthy built environments that reduce risks from environmental exposures and hazards that cause illness and injury.

STRATEGIC OBJECTIVES

- Reduce illnesses, injuries, & other adverse health outcomes related to the home environment.
- Reduce health risks from hazards related to the home environment.
- Implement theme-based healthy housing education tailored to specific audiences.
- Collaborate with state agencies to improve enforcing home environment laws.

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Difficult Easy
Low Medium High

- Educate homeowners & residents thru mass market TV ads
- Educate code enforcers & home inspectors thru web-based training
- Home inspectors inform home buyers (brochures, briefing, point to website)
- Educate home buyers thru web-based resources
- Educate homeowners & residents thru PSAs
- Educate home buyers thru web-based resources

Ability to Implement
**Collaborative Criteria Development** for Priorities: Example

**Strategic Importance**
- Likelihood to “move the needle” on performance measures for this objective
- Likelihood to drive performance of other objective(s) on strategy map
- Urgency: Important to implement soon, e.g.,
  - Other things depend on it, enables things to happen
  - Will lose an opportunity if not done soon
- Implementation will be noticed; generate visibility to increase support
- Severity of problem (no. people affected, severity for those affected)
- Number of people who will benefit from the initiative
  - *Strength of data supporting strategic importance*

Results That Matter Team ([www.RTMteam.net](http://www.RTMteam.net))

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**Clinical Practice-Community Health Integration Criteria**

**Integration Continuum**

Integration efforts are propelled along a multi-dimensional continuum accelerated by defined facilitators

- **Activity is Good Medicine**
  - 5-2-1-0
  - Heart Safe
  - Breastfeeding
  - Prescription med
- **Tobacco**
- **Conjunctivitis Care**
- **Falls Prevention**
- **Chronic Disease**
- **Concussion Care**
- **Addiction Treatment**

- **Shared Accountability**
  - Formal commitment to share resources and risk
  - Formal commitment for common work
- **Collaboration**
  - Informal agreement on common project
- **Involvement**
  - Coordinate resources toward common goal
- **Alignment**
  - Agree on population, goals, outcome
  - Acknowledge self interest and risk
  - Build trust and transparency
  - Share power and control
- **Shared Vision**
  - Facilitators

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Cheshire Medical Center
Dartmouth-Hitchcock Keene

25 Results That Matter Team ([www.RTMteam.net](http://www.RTMteam.net))
Criteria on Priority Setting Worksheet

**Strategic Importance**
Prioritize the Strategic Importance for CMC/DHK considering the following factors:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Issue is important and an organizational priority</th>
<th>Need to move quality/clinical metrics in this area</th>
<th>Impact is substantial and population level</th>
<th>Low Importance</th>
<th>Medium Importance</th>
<th>High Importance</th>
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**Ability to Implement**
Prioritize the ability for CMC/DHK to Implement or Advance considering the following factors:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Early integration efforts show promise and can be extended</th>
<th>There are existing resources and capacity</th>
<th>There is internal and external interest, readiness, and partners</th>
<th>Difficult to Implement or Advance</th>
<th>Moderately Difficult</th>
<th>Easy to Implement or Advance</th>
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**Prioritization Tool**

The prioritization tool is a grid that combines Strategic Importance and Ability to Implement or advance, with levels ranging from High to Low and Easy to Difficult. The tool is used to classify various health issues, such as Addiction Care, Concussion Care, Chronic Disease, Falls, Obesity, Tobacco, Activity is Good Medicine, HeartSafe, Breastfeeding, Prescription Med Misuse, and Conjunctivitis Care, based on their strategic importance and ability to implement or advance.
Community Results Compacts

250 partners with agreements by “sector,” e.g., Schools (16 districts), Early Childhood, After School, Health Care Professionals (incl. hospital systems), community (city governments, nonprofits, faith-based, etc.)

Provide partners with best practice lists from their sectors to choose what they’ll do

Effective Way to Use Results Compacts

Collaboratively identify among partners:
- Issue to be addressed by compact
- Community outcomes to improve (lagging indicators)
- Specific actions each partner will take to drive outcomes, and results they can target achieving (leading indicators)

Each partner is accountable for meeting their own performance driver targets

Collectively, all partners are mutually accountable for improving community outcomes

Results That Matter Team (www.RTMteam.net)
More on Community Balanced Scorecards (CBSCs) at RTMteam.net

Or contact Paul Epstein at paul@RTMteam.net or 212-349-1719

“Quick Guides” & briefing paper relating CBSCs & MAPP at RTMteam.net

Sampling of other website resources:
- “CBSCs to Mesh Strategic Planning, Health Improvement Planning & Accreditation”: 2011 APHA Presentation
- Free Webinar “CBSCs to Meet Public Health Challenges”
- “Community Health Strategy Management: Adding Value One Step at a Time”: CBSC tools on a limited budget

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