



Executive Summary

Progress Along the Pathway for Transforming Regional Health: *A Pulse Check on Multi-Sector Partnerships*

Authors

Jane Erickson, Bobby Milstein, Lisa Schafer, Katy Evans Pritchard,
Carly Levitz, Creagh Miller, and Allen Cheadle

ReThink Health

in partnership with the Center for Community Health and Evaluation

March 2017

For the full report, visit www.rethinkhealth.org/pulsecheck

*Support for this report provided by the
Robert Wood Johnson Foundation and the Rippel Foundation.*





Executive Summary

Multi-sector partnerships play an increasingly significant role in the movement to improve health, equity, and economic prosperity. These partnerships recognize that many of our most pressing challenges defy sector boundaries, and cannot be effectively addressed by any one institution alone.

Progress Along the Pathway to Health System Transformation: A Pulse Check on Multi-Sector Partnerships is the only survey of its kind to ask leaders across the U.S. what their partnerships do, how they finance their work, and how their groups have been developing over time.

The inaugural *Pulse Check*, conducted in 2014, revealed insights into the rapidly changing frontiers addressed by multi-sector partnerships for health. This *Pulse Check*, conducted in 2016, refreshes our collective understanding about the state of the field, and goes further to explore developmental trends that partnerships may experience as they evolve. We studied dozens of potential momentum builders and pitfalls that could enable or impede progress. Findings also point to similarities and differences among partnerships regarding their geographic foci, memberships, priorities, sources of authority, operational infrastructures, financing, and shorter- vs. longer-term outlooks.

A project of ReThink Health, with support from the Robert Wood Johnson Foundation and the Rippel Foundation, the *Pulse Check* surfaces practical implications for partnerships and for outside allies who want to see these groups evolve into a powerful force for transforming health across the U.S.

Many of our most pressing challenges defy sector boundaries, and cannot be effectively addressed by any one institution alone.

Methods

The *Pulse Check* was conducted through a voluntary, web-based survey. It reflects profiles contributed from 237 partnerships in almost every state. It is a snapshot in time, with findings that describe patterns among the contributors. It may not represent other groups, nor do we infer conclusions about the countless number of other multi-sector partnerships at work across America. Instead, these data contain clues about the experiences and aspirations among those partnerships that chose to participate.

Findings

The survey revealed two sets of findings that are distinct, but closely related. These include characteristics of the partnerships and their efforts, such as composition, portfolio priorities, and financing; as well as developmental phases and the distinctive patterns of momentum builders and pitfalls that groups experience as they evolve.

Characteristics of Partnerships and their Efforts

- **Longevity:** While some partnerships have existed for decades, many more have formed only recently. A majority of responding partnerships formed after 2010.
- **Location:** Most respondents work at the county or multi-county level. The largest number serve areas with over one million people, and together the partnerships in this *Pulse Check* support regions that include about one third of the total U.S. population.
- **Priorities:** All partnerships must divide their time among potential priorities, covering four major areas: healthcare access, quality, and/or cost; health behaviors and risk factors; social, economic and educational conditions; and physical environments. Roughly equal proportions of respondents devote a majority of time on a single dominant focus, a mix of just two or three, or a comprehensive portfolio that encompasses all four priorities.
- **Sector involvement:** About half of all partnerships have active participation from 10 or more sectors. Public health and healthcare organizations are most often in the lead. However, each of the 17 sectors surveyed had a lead role in at least one partnership, and one-third had joint leadership spanning three-to-five sectors. The least engaged sectors included unions, media, law enforcement, faith-based institutions, and health insurers.
- **Authority:** Most partnerships indicate that their legitimacy, or authority to lead, comes from multiple sources, such as being champions of a widely shared vision, having recognition from leaders central to their cause, and being a trusted source of information. Less than half report that their authority comes from broad-based grassroots support.
- **Financing:** Long-term financial planning is the chief challenge for nearly all partnerships. Most groups operate without a robust financial infrastructure and do not have dependable resources to deliver their full potential value. The most commonly used financing structures tend to be those that are short-term in nature. Very few partnerships prioritize financing structures that could bring greater dependability and more diversity to their portfolios.
- **Infrastructure:** Most groups struggle with fragile capacity to support their work and place a high priority on gathering resources for their “backbone” or partnership infrastructure.

Developmental Phases

ReThink Health’s [Pathway for Transforming Regional Health](#) describes five phases of development that partnerships may experience over time. It combines insights from field work with scores of groups across the country, along with well-established principles of complex system change. In particular, it distinguishes those partnerships that concentrate on *improving* results within an existing system versus those that focus on *transforming* the structure of the health ecosystem itself. The *Pulse Check* provides an opportunity to assess the extent to which experiences from several hundred partnerships are consistent with this general developmental framework, and, if so, whether there are predictable patterns of momentum builders and pitfalls at different phases.

To clarify patterns across the spectrum from *improvement* through *transformation*, and due to a small number of responses in a few phases, we collapsed the *Pathway* into three broad categories, reflecting Earlier-, Middle-, and Later-phase efforts. The proportions of partnerships by phase were: Earlier (56%); Middle (29%), and Later (14%). When analyzed by these categories, the data do indeed show distinct differences across these three developmental phases.

Pitfalls & Momentum Builders

Challenges related to collaborative infrastructure, sustainable financing, and data-sharing surfaced as salient barriers for almost all partnerships. In addition, several pitfalls seem to be more prominent at certain phases, as are several distinctive momentum builders.

- **Earlier:** Lack of authority and fragile infrastructure are special barriers in the Earlier phase, as partnerships establish their standing to lead change on chosen priorities. Groups in this phase tend to generate momentum by engaging multi-sector stakeholders and by building a region-wide vision around shared values.
- **Middle:** Difficulties measuring progress and contending with political resistance are more pronounced for groups in the Middle phase. For these groups, their longer track records may raise expectations and they may have yet to negotiate all the vested interests that tend to reinforce the status quo. Experimenting and learning from easy wins take on special prominence as practical ways to drive progress. However, the utility of these approaches drops sharply by the Later phase.
- **Later:** In the Later phase, partnerships may have exhausted strategies that center primarily around win-win solutions or achievements that are perceived as low hanging fruit. Instead, they generate momentum more often by exercising influence upward and outward, as well as by taking a longer view of future scenarios.

Implications and Recommendations

Considerations for Partnerships

All partnerships may benefit by having a wider view of the health ecosystem in their region, and by contributing toward a strategy that will assure all of the vital conditions and services that people need through an organizational structure that best fits the local landscape. In addition, partnerships at each developmental phase may accelerate progress in different ways.

- **Earlier:** Partnerships in the Earlier phase can set themselves up for success when they: (1) Articulate a region-wide vision based on shared values (both moral and economic); (2) Establish authority and expand engagement far as possible; and (3) Strengthen infrastructure through staff capacity, operational capability (e.g. backbone functions), and long-term financial planning.
- **Middle:** Progress in the Middle phase may turn on building enough trust and transparency for more ambitious action as well as more difficult negotiations ahead. Groups may want to:



(1) Develop a compelling picture of the value they are poised to deliver; (2) Engage policymakers to create conditions that better enable regional action; and (3) Adopt a mindset for sustainable financing focused on creating new funding flows, especially ones that move beyond an excessive reliance on short-term grants, which often constrain the very ambitions and abilities that groups in the Middle phase need to succeed.

- **Later:** To propel progress in the Later phase, we recommend that partnerships: (1) Surface vested interests and negotiate tough topics that otherwise threaten to reinforce the status quo; (2) Employ a learning practice that delivers evidence of results and is also tied to continuous learning, adaptation, and renewal; (3) Align with state and federal policies, such as changes in payment or regulatory systems; and (4) Establish new forms of distributed leadership, with a focus on broad-based coordination to avoid placing too much power in the hands of a few key players.

Considerations for Funders, Policymakers, and Other Allies

For funders, policymakers, and other allies who support multi-sector partnerships, we suggest the following activities:

- **Learn about and consider developmental phases when crafting initiatives;**
- **Support long-term planning**—extending over decades—so that strategies will persist through inevitable leadership transitions and adapt to change in wider contexts;
- **Position grant funding as a bridge to more dependable financial structures.**
- **Fund core infrastructure and backbone organizations,** which can be decisive factors in the success of any multi-sector partnership.

For the full report, visit www.rethinkhealth.org/pulsecheck