



PHNCI Innovation Grant Program

With funding from the Robert Wood Johnson Foundation, PHNCI has awarded \$1.55 million to nine agencies implementing cross-sector innovations in health equity, data collection and analytics, health in all policies, systems redesign, and access to services. Below are brief overviews of each project. For more information about these projects and how they might be adapted, adopted, or replicated in your community, please contact Jessica Solomon Fisher at jfisher@phnci.org.

Baltimore City Health Department (MD)

Since launching “Baltimarket” in 2010, the Baltimore City Health Department (BCHD) has been a leader in utilizing grocery delivery as a food desert solution. After developing the Virtual Supermarket, a successful model for group-based online grocery ordering and delivery to low-income communities, BCHD pushed for federal policy change. In January 2017, the USDA selected seven retailers to pilot online SNAP acceptance, three of which are in Maryland. With its PHNCI grant, BCHD is working to increase access to healthy food by supporting the implementation of the USDA’s online SNAP pilot in Baltimore, providing support for residents and grocers as well as advocacy for program policies and processes that maximize accessibility of online grocery ordering and delivery. The project will create a train-the-trainer learning network that will develop tools to support implementation of online SNAP orders in community sites such as libraries, schools, recreation centers, and the facilities of community-based partners.

Colorado Department of Public Health & Environment, Community Relations Division

The environment in which people live, work, and learn has a profound impact on health, but policies and programs that shape environments generally fall outside the jurisdiction of health agencies. The Colorado Department of Public Health & Environment (CDPHE) is implementing a “health in all policies” (HiAP) approach to address equity across sectors and lead to sustained improvements in the social determinants of health. With its PHNCI grant, CDPHE is advancing its HiAP approach by delivering a community leadership coaching model and a meaningful community engagement workshop to government leaders, with the goal of increasing capacity for collaboration among them. In addition, CDPHE will form a Colorado equity alliance comprised of 20 multidisciplinary partners working on “win-win” initiatives; harness the power of data to decrease inequities; leverage state dollars to support local policy change and spur cross-disciplinary networks by hosting a statewide Equity Summit.

DuPage County Health Department (IL)

The large population of individuals with mental illness in the nation’s criminal justice system, and their risk of recidivism, is an ongoing public health challenge. To reduce their numbers and minimize their risk of recidivism, the DuPage County Health Department (DCHD) is partnering with the DuPage County Sheriff’s Office to implement the DuPage County Post-Crisis Response Team (PCRT) project. DCHD is using its PHNCI grant to advance strategies such as cross-sector teams comprised of a mental health clinician and a DuPage County sheriff’s deputy to conduct follow-up visits with individuals with potential mental health issues who have previously encountered law enforcement and link them to the appropriate care. PCRT’s Sequential Intercept Mapping workshop is also examining opportunities for data collection and analysis created by the unique partnership of DCHD and the DuPage County Sheriff’s Office, including standardizing Uniform Crime Reporting codes used to document mental health-related calls to law enforcement.



Garrett County Health Department (MD)

Innovation and Appalachia are two words not often associated with one another because technology has traditionally lagged in that part of the country. However, Garrett County Health Department's (GCHD) recent development of the Garrett County Planning Tool, a digital community planning experience, has empowered thousands of historically unrepresented individuals to participate in community planning. The tool is revolutionizing the way the community develops a comprehensive Community Health Improvement Plan and is the first to successfully engage over 25% of the entire county population, from teens to senior citizens. The tool balances what people most care about with the most current data, making sustainable changes possible. With its PHNCI grant, GCHD aims to customize the tool for use by other communities by developing a Universal Community Planning Tool through the development of a manager plug-in that installs inherited open-source libraries, ensuring future, low-cost updates with minimal overhead.

Kansas Association of Local Health Departments

The Kansas Public Health Systems Group (PHSG), a partnership representing public health practice, academia, government, and charitable organizations, has explored options for implementing the foundational public health services (FPHS) since 2015, with significant progress. PHSG's grant will go toward building on these efforts by engaging cross-sector partners to determine the feasibility of applying the model in a rural, decentralized state; planning, piloting, and documenting the evolution of the FPHS model from an emerging practice to a prevailing practice; and evaluating the use of cross-jurisdictional sharing for specific FPHS components. This project includes developing a state modernization roadmap for the FPHS model; creating a performance management system with measures for each component of the Kansas FPHS model to increase efficiency, effectiveness, accountability and adaptability to other communities using similar FPHS models; and supporting a local pilot project using the roadmap and performance management system to develop a local FPHS implementation manual.

Minnesota Department of Health

To address the root causes of health inequities, public health practice must shift from an emphasis on the consequences of health inequities to the social conditions that create them. The Minnesota Department of Health (MDH) is utilizing its PHNCI grant to convene a learning community to help six local health departments (LHDs) transform the way they do business to advance health equity. The learning community will focus on three practices: aligning programs and resources with the organizational commitment to health equity; working in true partnership with the community; and working at the policy level on the social conditions that affect health. Through structure and support for risk-taking and mutual learning, this project will facilitate rapid, collective progress toward a common goal. Moreover, the project will give MDH and its national partners an in-depth look at innovation so that emerging health equity practices become prevailing practices in public health.

Pima County Health Department (AZ)

Mothers in Arizona Moving Ahead (MAMA) is a pilot project focused on individual and systems-level changes that improve health outcomes and financial stability for mothers and children living in poverty. A joint project of Pima County's Health and the Community Services Employment and Training Departments, MAMA enables low-income mothers to become partners, not just patients, and to identify the system changes needed in practice and policy to achieve greater equity and to provide more responsive care for people living in poverty. In a time of uncertain funding, this model is designed to be



lean and replicable by harnessing strong community collaboration and a volunteer base. Pima County Health Department is using its PHNCI grant to ensure that this model will build social capital across economic class as it engages and educates new sectors of the community for a deeper understanding of poverty while increasing political will to undertake lasting community change.

Tacoma-Pierce County Health Department (WA)

Only through true empowerment can communities most impacted by health inequities take ownership of their health. Since many communities with low civic engagement have been historically disempowered, the Tacoma-Pierce County Health Department (TPCHD) aims to create a hyper-local and authentic civic engagement opportunity with visible results. To achieve this goal, TPCHD sees participatory budgeting as an innovative, democratic process in which community members directly decide how to spend part of a public budget. The process gives community members the authority and resources to respond rapidly and directly to the root causes of their health problems, reduce the scale and duration of problems, and improve feelings of connectedness and well-being by participating. TPCHD is using its grant to initiate multiple projects that directly reflect community health priorities by implementing a participatory budgeting process focused on two schools in one of TPCHD's highest-need communities, East Side Tacoma.

University of Chicago (IL)

To help government officials improve the match between where public funds for health and health-related social services are sent within the city of Chicago, and where the need for those services is most acute, the Chicago Department of Public Health (CDPH), in collaboration with the University of Chicago's Center for Spatial Data Science and School of Social Service Administration, is developing a scalable, open-source spatial analytic framework and web-based tool. With their PHNCI grant, project leaders aim to enhance the project's ability to meet two key strategies of CDPH's Healthy Chicago 2.0 initiative: analyze geographic access to health and human services and address gaps in care; and increase capacity and availability of health and human services by maximizing the impact of existing resources. The project will offer a replicable framework and tool for jurisdictions beyond Chicago to analyze and improve their own distributions of public funds for health and health-related social services.