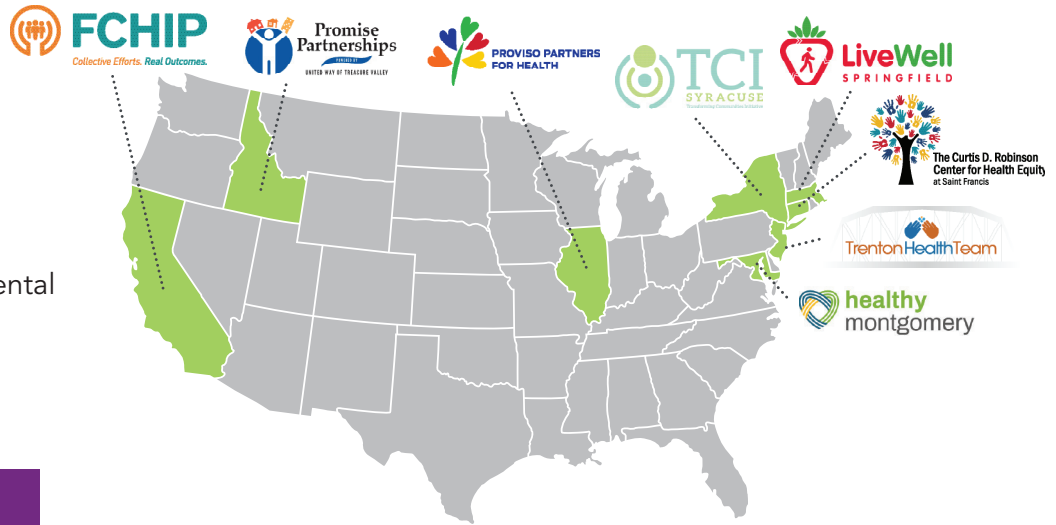
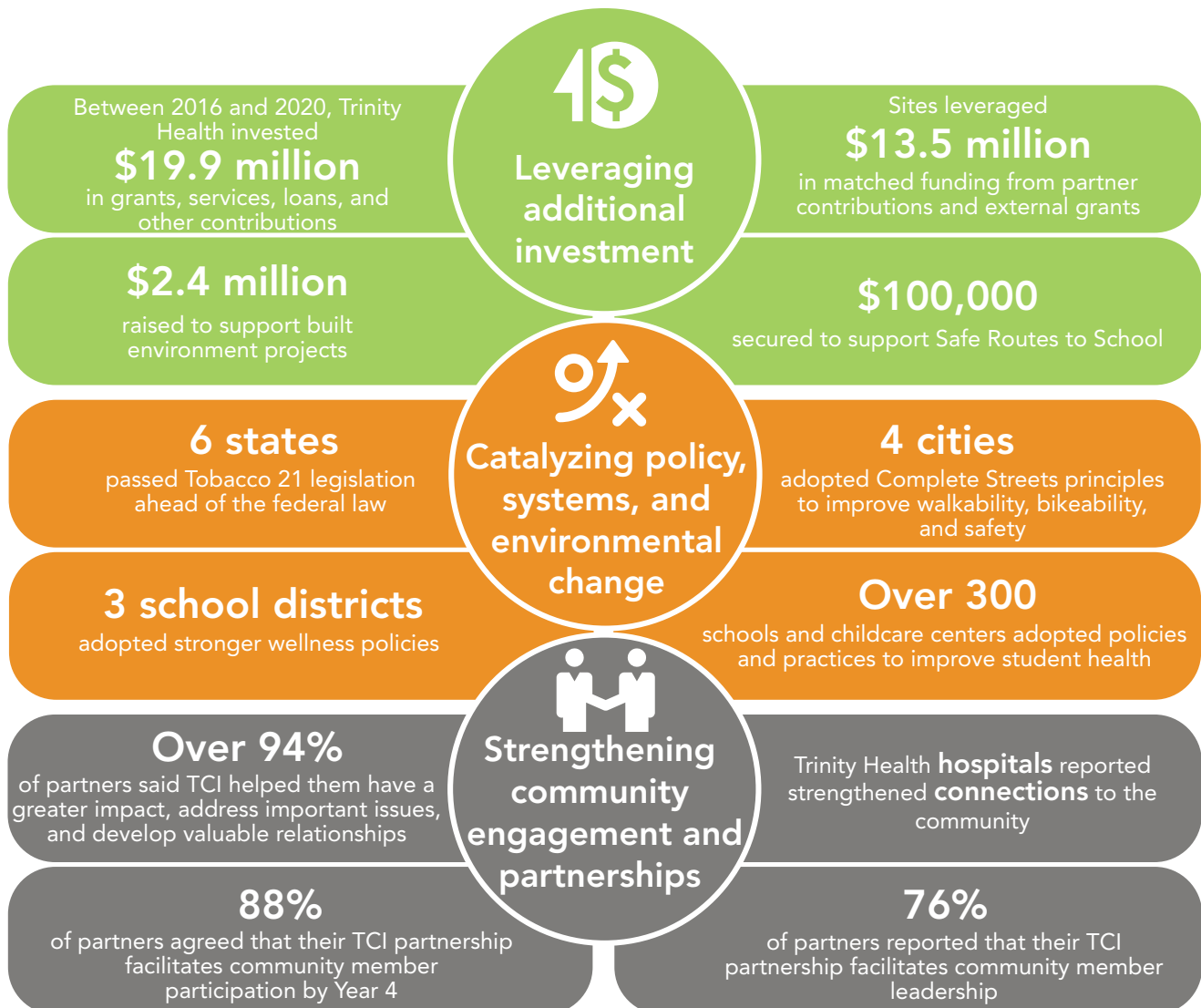


TRANSFORMING COMMUNITIES INITIATIVE FINAL EVALUATION HIGHLIGHTS

Trinity Health created the Transforming Communities Initiative (TCI) to improve health and well-being in eight participating sites through supporting community partnerships that focused on policy, systems, and environmental (PSE) change strategies.



TCI Impacts



About this Brief

The Georgia Health Policy Center (GHPC) conducted the TCI cross-site evaluation to assess partnership and collaboration, as well as policy, systems, and environmental change reach, implementation, and impact. This brief presents key highlights of the impact evaluation and lessons learned. Data sources include key stakeholder interviews, a TCI partner collaboration survey, and project documents, including site annual reports, meeting notes, site visits, and observations.

Initiative Overview

TCI invested \$19.9 million in grants, services, loans, and other contributions for eight sites over four years. Grantees were collaborations between a local Trinity Health hospital and a community-based organization, with a TCI-funded program director. Trinity Health's Community Health & Well-Being department managed the four-year TCI initiative (July 2016-June 2020). TCI resources included:

Grant dollars	<ul style="list-style-type: none">Trinity Health invested \$12.2 million through grants and \$3.7 million in committed or deployed loans
Technical assistance and evaluation	<ul style="list-style-type: none">Each site had access to technical assistance (TA) tailored to site needs, including one-on-one engagement, consulting, coaching and in-person trainings and workshops.
In-person peer networking and learning opportunities	<ul style="list-style-type: none">Trinity Health organized four three-day peer learning and networking events (Learning Institutes) for grantees and partners in 2016, 2017, 2018, and 2020.TCI also held two Program Director Meetings — two-day peer learning events (2018 and 2019) and hosted ongoing check-in calls.

TCI evolved from an initial focus solely on implementing evidence-based PSE strategies related to tobacco use and childhood obesity to addressing a broader range of community needs and goals related to social influencers of health (e.g., housing, education, employment, food, and the built environment).

Three principles defined the initiative:

- The importance of strong collaboratives and community engagement
- The focus on PSE strategies and upstream work
- The spread of TCI resources across multiple strategies

Policy, Systems, and Environment Change

Policy: Changes in organizational, local, state, or national policies, rules, and procedures (such as legislation, ordinances, resolutions, mandates, guidelines, or rules).

Systems: Changes in organizational procedures (such as personnel, resource allocation, programs).

Environment: Physical, observable changes in the built, economic, or social environment.

Impact

- Sites recognized TCI as an essential contributor to many of their PSE accomplishments. Much of the work was (1) rooted in efforts established before the TCI grant and (2) supported by resources from complementary initiatives.
- Each TCI site spread the initiative's resources across multiple strategies (between six and 11 different strategies), both initiating new work and accelerating existing work. TCI built capacity and contributed to PSE change.
- More than half (56%) of the most significant highlights identified by site leaders and partners were PSE changes — accomplishments not likely (70%) or only somewhat likely (30%) without the support of TCI. These accomplishments ranged across PSE areas, including the built environment, public school wellness, and food access.
- While TCI was planned as a PSE initiative, many stakeholders (44%) identified their most significant accomplishment as related to building capacity — amongst community members as leaders, within their collaborative, or through leveraging funds — which was not likely (50%) or only somewhat likely (50%) to be achieved without the funding and support of TCI.

"I would recommend continuing to fund collaborative efforts for PSE work. This work has been effective and helped spark a culture around alignment and cooperation that may not be able to be sustained if funding doesn't continue to promote collaborative work. PSE efforts have the largest impact but can also take the most time. Having 4-5 years of sustained funding is also key."

—TCI site leader

Key takeaways for funders and partners:

- Consider focusing on one or two strategies to address social influencers of health based on community priorities to avoid dilution and maximize impact
- Assess other ongoing funded initiatives in the community, and identify ways to blend efforts and share accomplishments
- Invest in both collaborative work and PSE change
- Encourage capacity-building outcomes as goals in addition to PSE change

Structure and Implementation of TCI

Community Perspective

Each local Trinity Health hospital partnered with a lead community organization (three public health institutes, two regional United Way organizations, two community health collaboratives, and one economic development organization).

- Lead organizations usually employed the program director, required by the grant to coordinate the TCI grant, oversaw the implementation of TCI strategies, managed stakeholder relationships, and engaged with peers across sites. These organizations were usually home to the collaborative or coalition implementing TCI's evidence-based health-improvement strategies.
- Community partners often received subawards to implement individual strategies or represented residents in areas directly impacted by the work of TCI.

Impact

- All site leaders recognized TCI as an accelerant to their work. Sites were able to reach more people and move faster due to the (1) dedicated program director and support staff time to coordinate strategies, relationships, and resources and (2) TCI funding and TA.
- Depending on the maturity and structure of their TCI partnership and their intentions for growth, sites engaged in a range of collaborative development activities with varying amounts of resources invested in coalition building.
- Site partners reported positive benefits from participating in TCI. (See Table 1.)

Table 1. Participating in TCI Allowed Site Leaders and Partners to:

	Year 2 %	Year 3 %	Year 4 %
Develop valuable relationships	100%	99%	100%
Make a contribution to the community	94%	95%	96%
Enhance their ability to address an important issue	95%	96%	94%
Acquire useful knowledge about services, programs, or people in the community	94%	96%	94%
Have a greater impact than they could have had on their own	94%	97%	94%
Enhance their ability to affect policy, systems, and environments	82%	83%	90%
Increase the utilization of their expertise or services	90%	89%	89%
Heighten their public profile	74%	79%	88%
Enhance their ability to meet the needs of their constituency or clients	86%	84%	85%
Acquire additional financial support	74%	71%	78%
Develop new skills	65%	77%	75%
Response rates	81 surveys (64% participation)	98 surveys (83% participation)	72 surveys (57% participation)

This online anonymous survey was distributed to TCI partners annually. It is not possible to determine if the same stakeholders from each site completed the survey from year to year; results are best understood as a point-in-time reflection rather than a three-year trend. Survey questions are based on the Wilder Collaboration Factors Inventory as well as assessments from the Center for the Advancement of Collaborative Strategies in Health and Community Science (see report for references).

Key takeaways for funders and partners:

- Support a half- to full-time program director position, which is also supported by other funding streams for sustainability
- Use funds to support collaboration time for partnership and coalition development to strengthen coalitions' connection to communities and maximize effectiveness
- Agree on purpose, function, and tracking of matched funding, with funders offering grant-writing support to sites that do not have this capacity
- Integrate communications planning early, allocate funds specifically to communication, and provide TA in strategic communication for telling the story of each collaboratives' work and engaging stakeholders and community members

Health System Perspective

Health systems looking to take a multisectoral approach to community health improvement using PSE change strategies can take lessons from the structure and implementation of TCI.

TCI was structured as a multiyear, cost-reimbursable grant, with specific allocations required for community partners, evaluation, communication, and raising matched funding. Trinity Health System Office staff managed TCI as a cooperative agreement. The local Trinity Health hospital's primary role was as fiscal agent of the grant, but role definition beyond that varied.

"It's helped position [our hospital] even more in the community than where we already were. We talk a lot about providing health care outside the brick-and-mortar walls of the facility, of the hospital. Which we do. We have a lot of programming in our community. But it's prescribed programming. We're taking care of acute and emergent illnesses. It's not as much about keeping people well. Population health has helped to change that, but TCI has done that much and more."

—Local Trinity Health lead

Impact

- Building on the work and relationships forged through TCI, several hospitals were able to incorporate TCI initiatives or lead community organizations into other community health assessments and community health improvement projects.
- TCI provided a valuable opportunity to raise visibility and enhance the reputation of the hospital in the community.

Key takeaways for funders and partners:

- Establish roles and responsibilities for hospital leads and community-based program directors — particularly in budgeting, raising match funding, and communications — but allow site flexibility
- Ensure grant administrators within the hospital system have adequate understanding and experience working with collaboratives, PSE, and community transformation
- Connect initiatives like TCI to other hospital system goals
- Involve governmental affairs hospital system leaders when policy advocacy is a strategy

Evaluation

The TCI evaluation used a local-national evaluator model and a flexible framework to address the range of strategies both across sites and within sites over time. The local and cross-site evaluation designs included approaches to assessing partnership and collaboration, as well as PSE reach, implementation, and impact. Given the adaptive nature of TCI, the evaluation relied heavily on qualitative methods. Having a centralized cross-site evaluator was important for coordination as the initiative evolved.

“Having funding set aside for local-level evaluation and communications support greatly facilitated the work of the partners. These resources allowed partners to document successes and challenges as well as to disseminate information about the progress and contributions of their work.”

—TCI site leader

Key takeaways for funders and partners:

- Invest in both local and cross-site evaluation, require budget allocations, and conduct both formative and impact evaluations
- Establish common indicators across sites if possible, but balance this goal with challenges posed by variation in local strategies, context, and available data
- Think broadly about outcomes — beyond PSE implementation — to include community engagement, coalition development, and community capacity
- Streamline reporting requirements for program directors and evaluation and build capacity at the local level to tell sites’ stories with evaluation data
- Increase sharing of interim results and briefs that local partners can use and find valuable

Community Engagement

While community engagement was always a value of TCI, Trinity Health and the TA providers increasingly recognized that sites might benefit from a more intentional and consistent focus on putting community engagement into practice. Community Catalyst, one of the national TA providers for TCI, developed a process for sites to follow (Engaging for Equity) and provided ongoing individualized TA to build additional capacity within communities to integrate community engagement into their strategies. All sites embedded community engagement into their TCI work to varying extents depending on the strategy. Sites that developed specific strategies to build leadership (for example, resident advisory councils, the Community Leadership Academy, and participatory budgeting) had higher levels of agreement on leadership development.

For the purposes of TCI, *community engagement* is defined as the activities and process each site uses to work collaboratively with and through community residents, groups, and organizations that are from, led by, or partner closely with the populations that are the intended beneficiaries of the TCI grant award.

Table 2. Perceptions of Community Engagement

Percentage of participants who agreed or strongly agreed	Year 2 %	Year 3 %	Year 4 %
The partnership seeks out and facilitates the participation of community members affected by the partnership’s decisions	84%	84%	88%
The partnership includes the views and priorities of community members affected by the partnership’s work	83%	83%	82%
The partnership facilitates the development of leadership by community members affected by the partnership’s decisions	62%	67%	76%
Response rates	81 surveys (64% participation)	98 surveys (83% participation)	72 surveys (57% participation)

This online anonymous survey was distributed to TCI partners annually. It is not possible to determine if the same stakeholders from each site completed the survey from year to year; results are best understood as a point-in-time reflection rather than a three-year trend.

Key takeaways for funders and partners:

- Consider budget allocations to plan and support community engagement
- Develop clear roles and activities for community members — including position descriptions for ongoing coalition roles
- Incorporate community engagement at the beginning of any initiative by identifying methods and opportunities for the community to participate, and include directives in the initial grant guidance
- Evaluate community-engagement efforts, and use findings to refine the approach and methods used
- Ensure that partners and organizational leadership are versed in key equity concepts and that sites have opportunities to deepen their joint work on equity
- Develop sustainable opportunities to build leadership among community members

Technical Assistance and Peer Learning

National TA organizations ([Community Catalyst](#), [ChangeLab Solutions](#), [Campaign for Tobacco-Free Kids](#), and [Public Good Projects](#) [PGP]) provided guidance on building effective collaborations; planning, implementing, and supporting PSE changes; and developing supportive media and communication strategies.

“The two in-person workshops we held for community residents and stakeholders were key inflection points for our success and effectiveness as a coalition and community partner.”

—TCI program director

Site-level Technical Assistance

The neutral third-party position and expertise of the TA providers helped facilitate difficult conversations about engagement, equity, and strategies.

- Building the capacity of communities by providing TA directly to partner organizations and resident leaders empowered communities and strengthened the relationships between TCI coalitions and their communities.
- TA providers informed and influenced decisions that were made across a variety of PSE strategies.

Because of sites' varied PSE strategies, capacities, and interests, TA had to be highly customized. Not all sites used TA in the same ways and to the same extent. TA providers were described as knowledgeable and responsive, and the benefits of on-demand, individualized TA services were noted consistently.

TCI Learning Institutes

TCI included four in-person, peer learning and networking events that offered representatives of the eight TCI sites access to TA and the opportunity to learn from peers in a positive, experiential environment.

Sites noted that their teams grew stronger, more energized, and more inspired after each Learning Institute. The professional development offered to sites and their partners through the Learning Institute extended the capacity for local PSE.

"Our collaboration with PGP over the years has impacted more than the way we look at health messaging. It has created inroads with grassroots-level community engagement that our organization had never attempted. We have developed rich, symbiotic relationships with various local social media influencers that will continue beyond the TCI grant."

—TCI program director

Key takeaways for funders and partners:

- Conduct readiness assessments and select TA providers based on site strengths and needs
- Design the TA approach and coordination structure to maximize sites' capacity to absorb TA
- Strengthen knowledge transfer and make TA products accessible to all sites
- Consider offering TA options that include local and national TA providers
- Support in-person site visits and cross-site convenings to build relationships and capacity, and plan for translating learning to local environments

Sustainability

The sustainability of grant-funded initiatives can be integrated into the design of the program, policies and procedures, and structure of the funding. The TCI grant encouraged sustainability through:

- Setting grant requirements for multisectoral partnerships and match funding
- Permitting investments in coalition development
- Affording flexibility to communities when rebudgeting or repurposing funds

Sustainability was a growing focus of sites' TCI work during the last year of TCI. The final Learning Institute focused on sustainability planning, the third Learning Institute provided some resources, and many sites had a sustainability planning focus in Year 5, which was not able to occur because of the global pandemic (see below). While sites found these discussions helpful, they occurred late in the initiative and were not sufficiently concrete. Table 3 illustrates partners' perceptions on sustainability over time.

Table 3. Site Partners' Perceptions on Sustainability			
	Year 2 Average	Year 3 Average	Year 4 Average
The TCI partnership is able to adapt to changing conditions, such as fewer funds than expected, a changing political climate, a change in leadership, or a change in membership.	3.9	4.1	4.0
The TCI partnership has developed a realistic plan for how to continue work on the TCI strategies when the TCI grant ends.	3.5	3.8	3.8
The partnership has developed a realistic, concrete plan for how to continue building their membership.	3.4	3.5	3.5
We have organized a strong network, including formal and informal connections, to carry on this work.	3.9	3.9	4.2

Each question had five response options (1-5): strongly agree, agree, neutral/no opinion, disagree, strongly disagree. This online anonymous survey was distributed to TCI partners annually. It is not possible to determine if the same stakeholders from each site completed the survey from year to year; results are best understood as a point-in-time reflection rather than a three-year trend.

Sites' common approaches to establishing the sustainability of the PSE work included:

- Taking steps to embed strategies, projects, or the backbone functions of a collaborative into compatible and sustainable organizations.
- Securing additional grant funding that would support current projects and TCI-funded partners past the end of the TCI grant cycle.
- Increasing the visibility of the accomplishments and outcomes of TCI projects or teams.
- Increasing community and member ownership through community-engagement efforts and encouraging the financial contributions of coalition members.

"Comparing this project to a lot of other grant-funded work, so much of what we did has really taken hold and kept going. Whereas in many grant programs, you start programs [that] tend to sunset when the grant sunsets, but I think that especially given the duration of funding and then the nature of how Trinity [Health] structured the program has really allowed the work to have built momentum, which is such a huge part of sustainability."

—TCI site leader

Key takeaways for funders and partners:

- Offer TA in sustainability planning from the beginning of the grant period
- Encourage that the salaries of program directors and other staff be shared among multiple funding streams to provide professional growth and continued employment after TCI
- Support and share the grant-writing and development efforts of sites without this capacity
- Encourage more collaboration and blending of resources among partners

For the sites that had developed and begun to implement their sustainability plans, some found themselves adjusting to shrinking budgets and shifting priorities of funders with the onset of the pandemic. While some of the sites' sustainability plans and efforts were truncated, much of the work of TCI remains durable and sustainable by nature, including investments made in capacity building, infrastructure, relationship building, community engagement, and successful PSE changes.

"Because TCI sustains the backbone, we're able to continue [to] advance and expand funding for initiatives where, I would say, we stand in the gap ... of some of this very prescriptive programmatic work, and we're able to be more opportunistic in terms of the work we do. ... And that has propelled our work infinitely."

—TCI site leader

COVID-19 and TCI









In March 2020, the COVID-19 pandemic changed the focus and work of the TCI sites. While Trinity Health originally considered supporting a fifth year of TCI to focus on sustainability and evaluation, the COVID-19 pandemic restricted much of the sites' TCI work, and Trinity Health's operations shifted to pandemic response. TCI ended without a fifth year.

Overall, TCI site stakeholders conveyed an understanding that this was a financial decision in a difficult and unprecedented situation but commented that the decision felt very abrupt and was mostly unexpected. Some expressed concern that the decision was unilateral and too hasty, resulting in missed opportunities and potential damage to coalitions and relationships. Others indicated that since the coalition had a strong structure in place and the grant was waning, the early close did not have a strong negative impact. Sites were able to redeploy some of their remaining Year 4 funds to pandemic relief. At many sites, TCI partners and funds helped to provide direct food assistance and basic needs. The investments that TCI made in community engagement and economic development increased the resilience in several of the TCI communities as they responded to the global pandemic.

"I think the collaborative partnerships that we had already been engaging in over the previous three and a half years really positioned us well to be able to respond and to respond quickly [to COVID-19]."

—TCI site leader

TCI Accomplishments July 2016-June 2020

DOMAIN	NUMBER OF SITES	KEY STRATEGIES	REACH
 Coalition development	8 sites	<ul style="list-style-type: none"> Recruited partners Established organizational structures Codeveloped strategic plans Engaged in sustainability planning 	(not estimated)
 Tobacco control	8 sites	<ul style="list-style-type: none"> Trained youth advocates Conducted outreach and communication Collaborated with local coalitions Implemented Tobacco 21 legislation 	9.16 million youth aged 15-24 in the 6 states where TCI influenced Tobacco 21 passage
 Public school wellness	6 sites	<ul style="list-style-type: none"> Assessed and strengthened district policies Advocated for district-level wellness policy change Expanded local school wellness councils Created and promoted Safe Routes to School Promoted school-level physical activity and nutrition Expanded implementation of school gardens 	235,924 students across 343 schools in seven districts
 Community food access and nutrition	6 sites	<ul style="list-style-type: none"> Convened food policy councils to improve the accessibility of food Implemented shared use agreements for food distribution Built health care food system partnerships Supported urban agriculture, farm stands, farmers markets, and healthy corner stores 	Over 1.2 million pounds of food distributed and approximately 257,000 people reached
 Early care and education	4 sites	<ul style="list-style-type: none"> Advocated for and implemented center-level nutrition and physical activity policies and practices Implemented playground enhancements and gardens Supported state-level policy assessment 	Over 3,600 children across 45 centers
 Built environment	4 sites	<ul style="list-style-type: none"> Used data to influence local officials Facilitated local governmental adoption of Complete Streets principles Developed and fundraised for community wellness spaces and infrastructure 	Over 181,000 community members
 Breastfeeding policy	3 sites	<ul style="list-style-type: none"> Advocated for state-level policies protecting breastfeeding rights Designed and publicized 27 breastfeeding-friendly spaces 10 organizations adopted supportive policies 	Estimated 35,000 breastfeeding women
 Economic development and community capacity	2 sites	<ul style="list-style-type: none"> Created a community leadership academy Supported and connected small enterprises with institutional clients Conducted community needs assessments Conducted trauma-informed care trainings 	75 residents completed leadership course 73 trainings reached over 800 residents

*Population reach for tobacco uses census data. Otherwise, estimated population reach is a sum of the population reach numbers as reported by sites in annual or monthly reports. Some duplication in counts may occur within sites with multiple strategies.



The Transforming Communities Initiative (TCI) was launched to advance community partnerships that focus on improving the health and well-being in communities served by the Ministries of Trinity Health. Trinity Health is one of the largest multi-institutional Catholic health care delivery systems in the nation, serving in 22 states. TCI was an innovative funding model and technical assistance initiative that supported eight communities using policy, system, and environmental change strategies to prevent tobacco use and childhood obesity, as well as address social influencers of health.

Visit ghpc.gsu.edu or trinity-health.org for full reports and site profiles.