

# Testing a Shared Decision-Making Model for Health and Social Service Delivery in East Harlem



Research in Progress Webinar

June 26, 2019

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# Today's Agenda

- Who We Are
- Study Design
- Findings
- Q+A

# Who We Are

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# Center for Health Equity

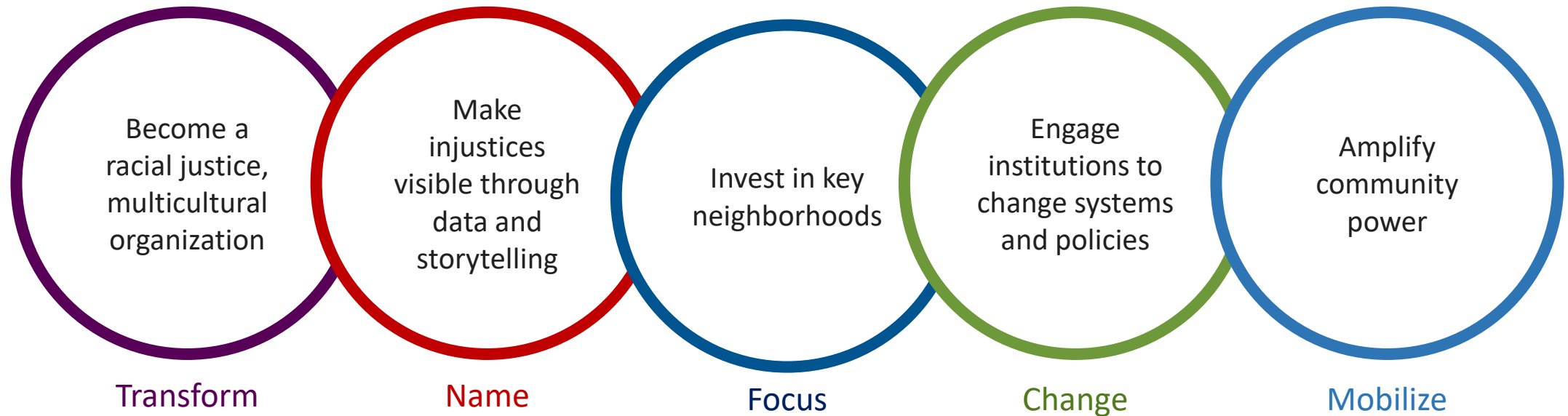
## Vision

The New York City Health Department and its Center for Health Equity use a racial and social justice approach to eliminate health inequities for those who are most marginalized in New York City, with the vision that every New Yorker will live in a thriving neighborhood with equitable access to resources that help support healthy individuals and communities.

## Values

- Racial, Gender, and Social Justice
- Community Engagement
- Accountability
- Diversity and Inclusion
- Data-Informed Practice

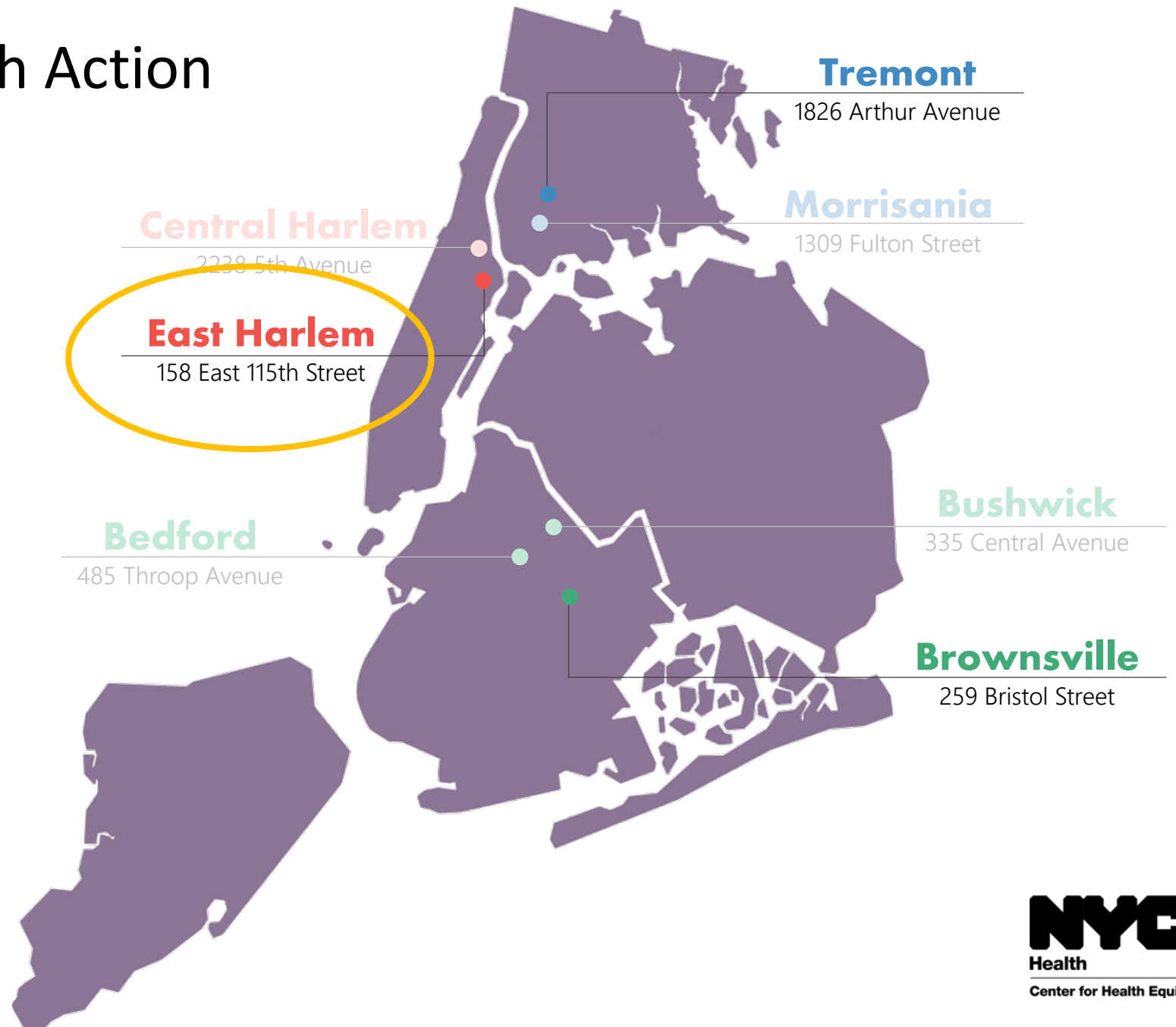
# Our Strategies to Advance Health Equity



# Neighborhood Health Action Center Locations

Phase #1

Phase #2



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# EAST HARLEM HEALTH CENTER DEPARTMENT of HEALTH

"Team-work has brought the power to increase efficiency and to prevent duplication of effort, to discover gaps in the local health program, and to provide the service needed."

RECEIVED BY  
NEW YORK COUNTY CHAPTER  
AMERICAN RED CROSS

**Ten-Year Report of the East  
Harlem Health Center – 1932**



## *A Decade of* DISTRICT HEALTH CENTER PIONEERING

Ten-Year Report  
of the  
EAST HARLEM HEALTH CENTER, *inc.*  
*A demonstration in coordinated health and welfare  
work in a defined city area undertaken by the*  
Department of Health, City of New York  
and  
Twenty-One Cooperating Voluntary Agencies

†  
*Initiated by the*  
American Red Cross, New York Chapter

†  
*Report prepared under the direction of*  
KENNETH D. WIDDEMER, *Executive Officer*  
New York City  
1932

# Neighborhood Health is Structured by Inequitable History

## A Walk Through History

A neighborhood is not only shaped by its residents, but also by governmental practices and policies. Some of these have discriminated against residents because of the color of their skin and have segregated neighborhoods across the nation—including in New York City. This timeline is a selection of key processes and policies that shaped the physical environment and population of East Harlem, and some of the efforts to respond to local issues.

### LEGEND

- POPULATION
- HOUSING
- HEALTH DEPARTMENT AND LOCAL ACTIVISM
- TRANSPORTATION
- DISINVESTMENT AND ZONING

1931: Due to the success of the East Harlem Health Center

**1934:** Construction of the Franklin Delano Roosevelt (FDR) Drive begins. The parkway runs along the East River and Manhattan neighborhoods, including East Harlem.<sup>16</sup>

Department, the American Red Cross, and health and social service providers.<sup>15</sup>

and impacts the neighborhood for the next several decades.<sup>17</sup>

With the Federal Housing Act of 1937, the NYC Housing Authority (NYCHA) demolishes East Harlem tenements to make way for high-rise public housing buildings, a process that continues for two decades.<sup>18</sup>

Puerto Ricans move to East Harlem. The neighborhood is nicknamed Spanish Harlem and El Barrio.

Department of Sanitation.<sup>19</sup>

1970: Daniel Patrick Moynihan, President Richard Nixon's urban affairs advisor, proposes benign neglect, which encourages the government to move public money from inner

2002: The NYC Department of City Planning rezones areas in East Harlem, leading

**1976:** NYC Housing Preservation and Development Commissioner Roger Starr proposes planned shrinkage, and the City withdraws services like garbage removal, fire service and street repairs from low-income neighborhoods, including East Harlem.<sup>24</sup>

with plans to extend the line to East Harlem in the coming years.



# Becoming the Neighborhood Health Action Centers

- **Co-location:** Revitalize underutilized health department buildings and co-locate community-based organizations, clinical providers, and City Govt. Agencies.
- **Innovation in programs and policy:** Bring together and build upon neighborhood assets (people and institutions), identify resource gaps, and optimize alignment for action to measurably improve population health.
- **Community Engagement, Action and Impact:** Identify and elevate system level barriers and policy opportunities via resident experiences and programs.



# What We Offer

## Clinical and programmatic providers

Co-located services provide direct clinical and social services, while allowing for place-based planning

## Navigators and referral specialists

Through building-wide free Wi-Fi and other software systems, residents are supported in getting the services they need

## The Family Wellness Suite

The Family Wellness Suite provides amenities including a lactation lounge, children's nook and targeted programming

## Neighborhood convening space

A multipurpose room provides a space for neighborhood partners and residents to meet, and there will be space for physical activity, events and free public Wi-Fi

## Kitchens and gardens

Some will feature a kitchen for communal meals and nutritional programming as well as a garden for growing fruits and vegetables. (anticipated)

# Action Center Co-Located Partners in East Harlem

## Community Partners

- Association to Benefit Children
- Concrete Safaris
- ID NYC
- Public Health Solutions
- SMART
- Harlem Health Advocacy Partners
- East Harlem Asthma Center of Excellence
- Newborn Home Visiting
- Family Wellness Suite
- Friendship Benches
- EHACE Chefs
- Fresh Food Box
- Shape Up
- East Harlem Community Walking Trail



# Action Center 'Pop-Up' Partners in East Harlem

- Coalición Mexicana
- CREA
- Creative Art Works
- Iris House
- H+H Metropolitan Hospital
- Harlem United
- Lenox Hill Neighborhood House
- Pueblos Internacionales

# Study Design

# Purpose and Goal

## **Purpose:**

The primary aim of this mixed-methods study is to provide new evidence on how aligning a city health department with cross-sector community stakeholders under a place-based model can improve health and reduce inequities across neighborhoods.

## **Goal:**

We expect to critically evaluate the impact of the system on the neighborhood, and detail how this alignment may be scaled up in New York City (NYC) and replicated in other U.S. cities.

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# Research Team



**Carl Letamendi, PhD, MBA, GStat**



Director of Evaluation  
Division Management



**Jennifer Pierre, DrPH, MPH**



Director of Qualitative Research  
Center for Health Equity



**Rachel Dannefer, MPH, MIA**



Director of Research and Evaluation  
Harlem Neighborhood Health Action Center



**Luke Sleiter, MPH**

Assistant Project Director, PEACH  
Center for Health Equity



**Presenter**

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# Building a Culture of Health in East Harlem

## CULTURE OF HEALTH ACTION FRAMEWORK



Action Area 2: **Fostering cross-sector collaboration to improve well-being**



# Objectives



Determine how aligning the city health department, clinical and nonclinical partners, internal and external frontline staff in *a collective governance structure* within the East Harlem Action Center builds a culture of health.



Determine whether the *use of NowPow* by Action Center stakeholders fosters a cross-sector collaboration to improve health & well-being in the neighborhood.



*Evaluate the impact* that the Action Center has on the health of the East Harlem community.

# Data Sources

- NowPow referral and tracking system
- Governance Council interviews
- Visitor surveys
- Action Center monitoring & tracking data

NOWPOW



# Findings: NowPow referral and tracking process

# What is NowPow?

**NowPow** is a resource directory and referral system

that allows community members to find health care and social services while connecting the provider network to facilitate referrals.

## **Core system functions include**

- Social needs screening
- A comprehensive and regularly updated resource directory
- Bi-directional referral management
- A client-centered action plan with reminder tools
- Population management dashboards for each organization



# Rich Partnerships Strengthened through NowPow Network

- Trained 137 frontline users across 5 programs in 5 institutions in social needs navigation and referrals
- Set up databases for 5 health department programs in East Harlem
- Executed agreements with 5 neighborhood partners (1 FQHC & 4 CBOs)
- 3 additional city agencies about to join the larger referral network
- Engaged in monthly work group with 7 health systems that have adopted NowPow

# Lesson #1: Tech solutions can build capacity



# Lesson #2: Comprehensive tracking of community needs can support advocacy

NOWPOW

## 10 Most Common Service Types, based on Total Referrals Sent/Shared

	Total Referrals Sent/Shared	Average Distance to Service (mi)
Food pantry	168	5.20
English as a second language (ESL) classes	79	7.08
Job training	77	7.57
Job search assistance	62	6.37
Individual counseling	60	1.77
Diapers	55	6.40
Housing search assistance	48	4.81
High school equivalency classes and testing	42	5.66
Soup kitchens and free meals	35	4.82
Child daycare	34	3.24

# Lesson #3: Use Institutional Leverage to Structure More Equitable Contracts



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# **Findings: Governance Council Interviews**

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# Monthly Governance Council Meeting

- Is attended by a representative from each co-located partner or program
- Seeks to build consistency in representative
- Encourages attendance by decision makers





# Governance Council Interviews

- In summer of 2018, we conducted semi-structured individual interviews with 13/30 Governance Council members
- Interviews were conducted in English, audio-recorded, transcribed and coded for themes
- Interviews covered: Perspectives and views of the Governance Council & Action Center as well as successes, challenges, and recommendations

# What Impact does the Governance Council have on Organizations/Programs?

## Organization or Program

- Program expansion: ↑ reach & access to community
- ↑ knowledge of and access to resources for clients
- ↑ referrals to programs
- Cross partner collaboration
- ↑ Access to resources, e.g. frontline staff support

## Action Center Building

- ↑ number of visitors to the Action Center
- ↑ number and type of program offerings
- Introduction of 'Pop-Up' Services
- Changes in policies
- Expansion of hours

# What would success look like for the Action Center?

- ↑foot traffic & community participation
- Gaining public trust
- Becoming a go-to place
- Understanding of community needs
- Engage and educate for community transformation

# How could East Harlem Community be better served?

- ↑ visitor comfort (trust) in accessing services in building
- ↑ community input: programs and services
- ↑ reach among priority populations
- Need to advertise Action Center & services widely

# What other feedback did members have?

- Shared leadership to expand participation and input
- Annual goal setting and strategic planning
- Consistent mechanism for member feedback
- Opportunities to strengthen relationships among members
- Participatory budgeting for joint activities

# How does a Governance Council Build A Culture of Health?

- Convening consistent, recurring meetings
- Encouraging information sharing and exchange
- Facilitating continuous communication
- Fostering “organic” partnerships
- Fostering a sense of belonging
- Developing shared identity and spirit of collaboration



# Findings: Visitor Survey

# Visitor Surveys

- In summer of 2018, we surveyed 207 visitors to the Action Center
- Interviewer-administered in English, Spanish, and Mandarin
- Respondents received a Metrocard and another small gift
- Survey covered: awareness of and participation in Action Center activities, satisfaction with services received, referrals, interest in various types of programming, demographics

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# Where do visitors come from?



10035 (Central Harlem)

13%

10029 (East Harlem)

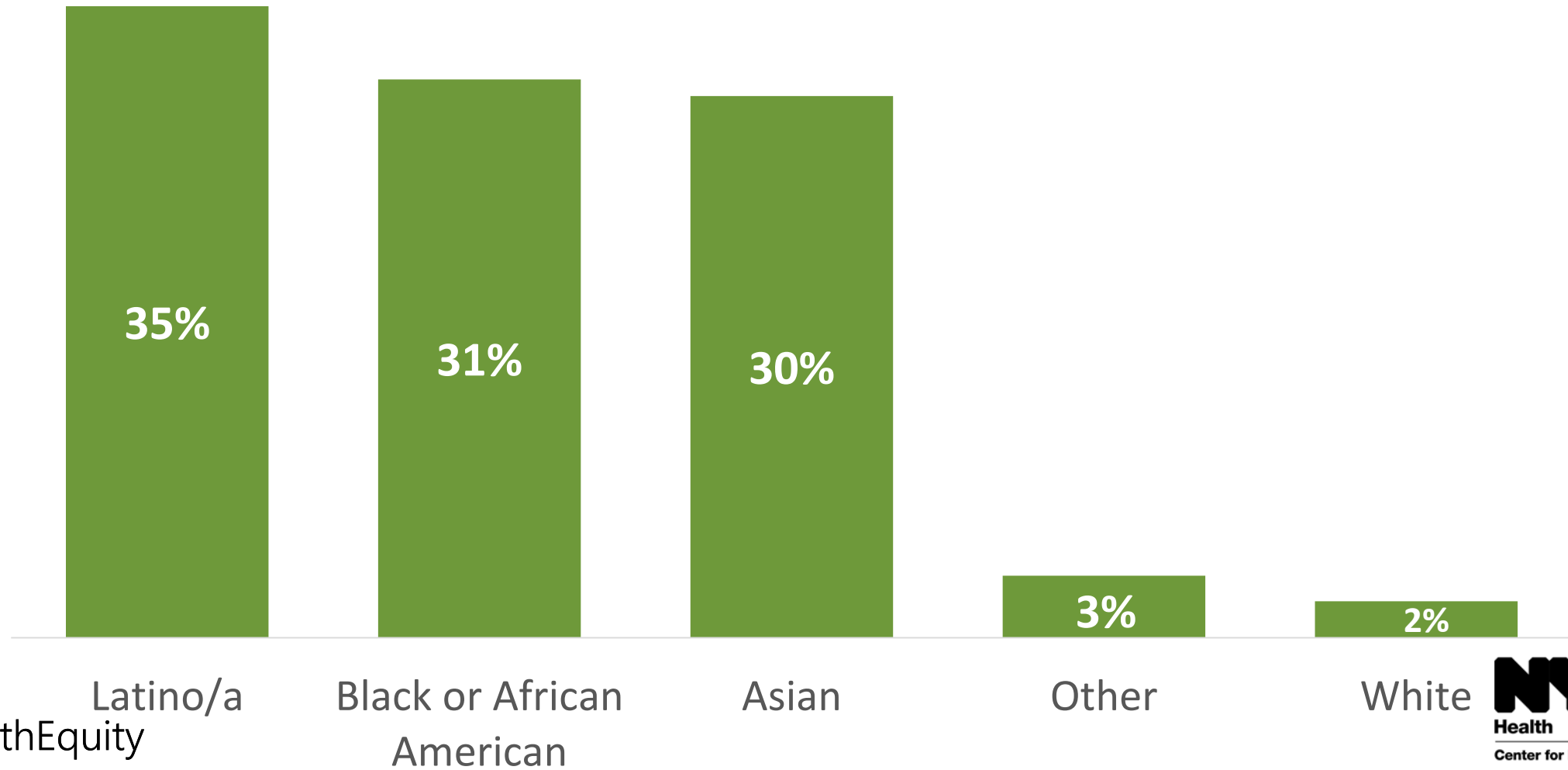
55%

Other Zip Codes

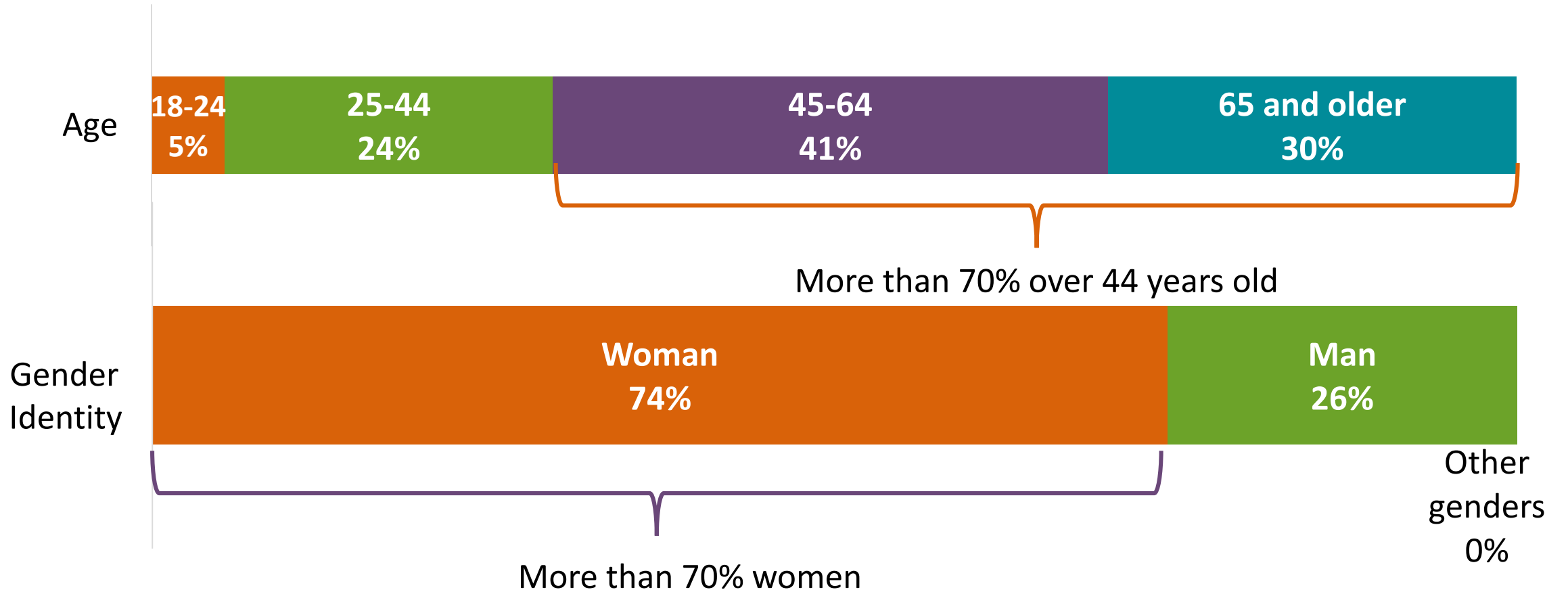
32%

68% walked  
to the Action  
Center

## Racialized Group



# Age and Gender Identity



# Experiences with the Action Center

- 6 out of 10 visitors learned about the Action Center through word of mouth
- Almost 7 out of 10 had been to the Action Center previously
- 66% were aware of other programming and services available at the Action Center
- Most respondents felt the Action Center was very welcoming (83%) or somewhat welcoming (15%)
- 86% were likely to return

# Referrals

50% were aware that referrals were available through the Action Center



## Referrals received

Action Center program

35%

Healthcare services  
outside Action Center

31%

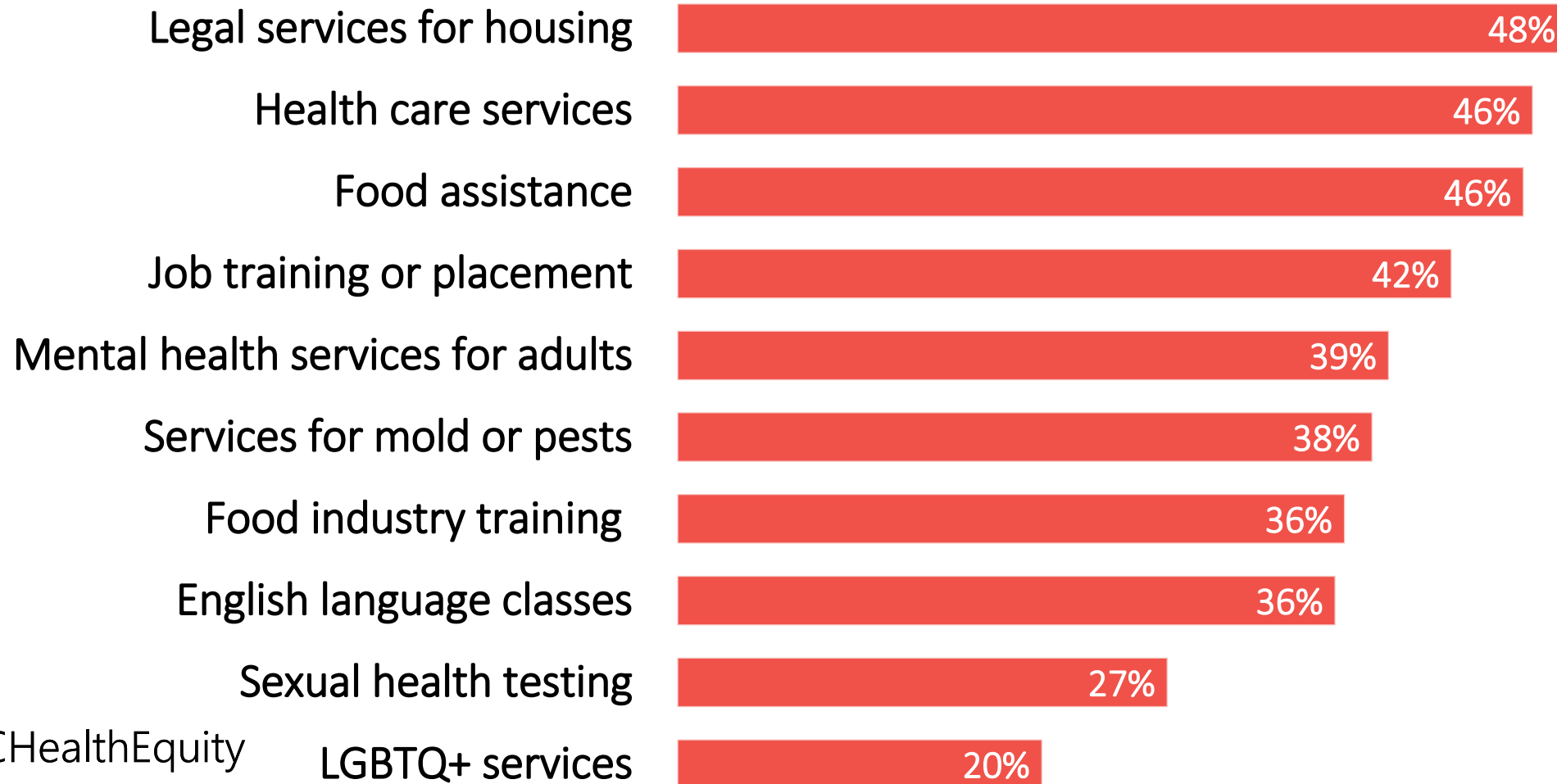
Social services outside  
Action Center

28%

Other

7%

# Services & programming of interest to respondents



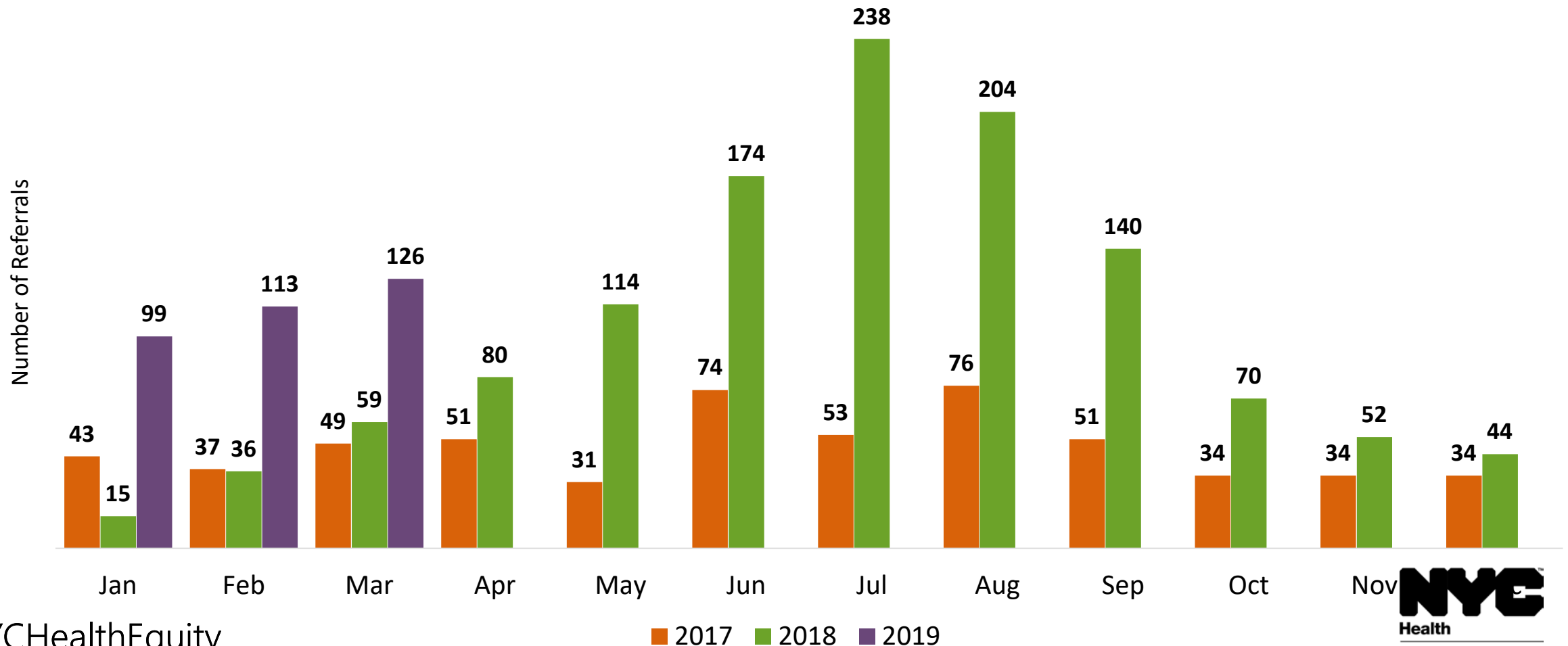
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# Findings: Action Center monitoring and tracking

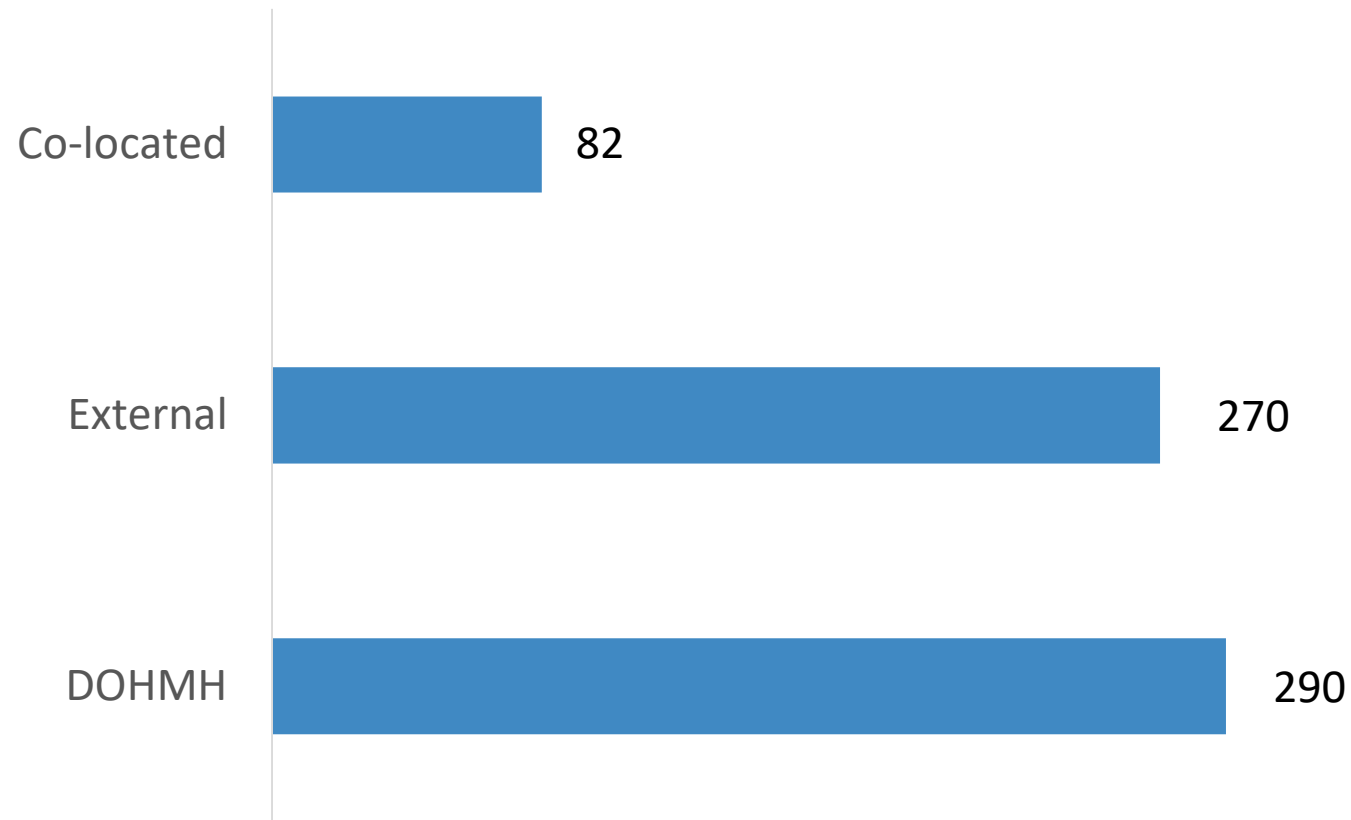
# East Harlem Action Center Referrals

Total Number of Referrals Given, by Month



# East Harlem Action Center Referral Type

January 2017-March 2019



## Top Referral Service Categories

1. Healthcare
2. Financial Assistance
3. Housing

# Conclusion

- Development of a Governance Council encourages collaboration aimed at improving health and well-being in the neighborhood.
- Visitors report having a positive experience at the Action Center. While many knew about other programming, knowledge of referral availability was lower.
- Startup investment in a referral management system is high but it creates new opportunities for important collaboration among diverse stakeholders.



**Padmore John, MS**

Neighborhood Health Action Center Manager  
East and Central Harlem Action Center



# Discussion

# Thank You!

## Stay in touch

Rachel Dannefer

[rdannefe@health.nyc.gov](mailto:rdannefe@health.nyc.gov)

Padmore John

[jpadmor1@health.nyc.gov](mailto:jpadmor1@health.nyc.gov)

Carl Letamendi

[cletamendi@health.nyc.gov](mailto:cletamendi@health.nyc.gov)

Jennifer Pierre

[jpierre4@health.nyc.gov](mailto:jpierre4@health.nyc.gov)

## Know our awesome team

Dr. Noel Manyindo

La'Shawn Brown-Dudley

Jaime Gutierrez

Krystle Rodriguez

Jessie Lopez

Crystal Sacaridiz

Stephanie Farquhar

Special thanks to Governance Council interview participants, Action Center visitor survey respondents, and to our survey team!

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