

Realizing the Potential of Authentic Community University Partnerships



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Presentation Outline

- **CCHERS Partnership**
 - Mission – Goals and Objectives
 - University/Community Partnerships
 - Organizational History & Development
 - Lessons Learned
- **CCHERS: Engaging a University**
 - Urban Focus
 - Priorities
- **Community Health Academic Medicine Partnership (CHAMP)**

The CCHERS Partnership: Building an Organization

Mission Statement

The mission of CCHERS is to educate health professions students for careers in primary care in community-based settings through “**academic community health centers**” that integrate service, education and research to influence and change health professions education, improve health care delivery, and promote health systems change.

Goals

- Promote community based, primary care oriented **education** for a range of health professions students, from high school through graduate and professional school, to improve community health services provided to underserved populations.
- Promote community derived and directed health services and clinical **research**, in partnerships with academic medical center, government, and university researchers, that focuses on health problems that impact diverse urban populations.
- Promote coordination of **services** and interagency collaboration among universities, health services providers, community based organizations, and community residents to create healthier communities.
- Promote public and marketplace policy **change** in health professions education, community health, and health care access to create an equitable health care system for diverse urban populations and communities.

Institutional Partners

- Boston Medical Center
- Boston Public Health Commission
- Boston University School of Medicine
- Northeastern University Bouve College of Health Sciences



Community Health Center Partners

- 
- Bowdoin Street
 - Brookside
 - Codman Square
 - Dimock
 - Dorchester House
 - East Boston
 - Gieger Gibson
 - Harvard Street
 - Mattapan
 - Neponset
 - Roslindale
 - South Boston
 - Southern Jamaica Plain
 - Uphams Corner
 - Whittier Street

University - Community Partnerships??

- Can universities and communities work in collaboration?
- What are the benefits of partnership?
- How should the partnership be structured?
- Who will be involved in decision-making?
- How will power be shared?

The Great Cultural Divide

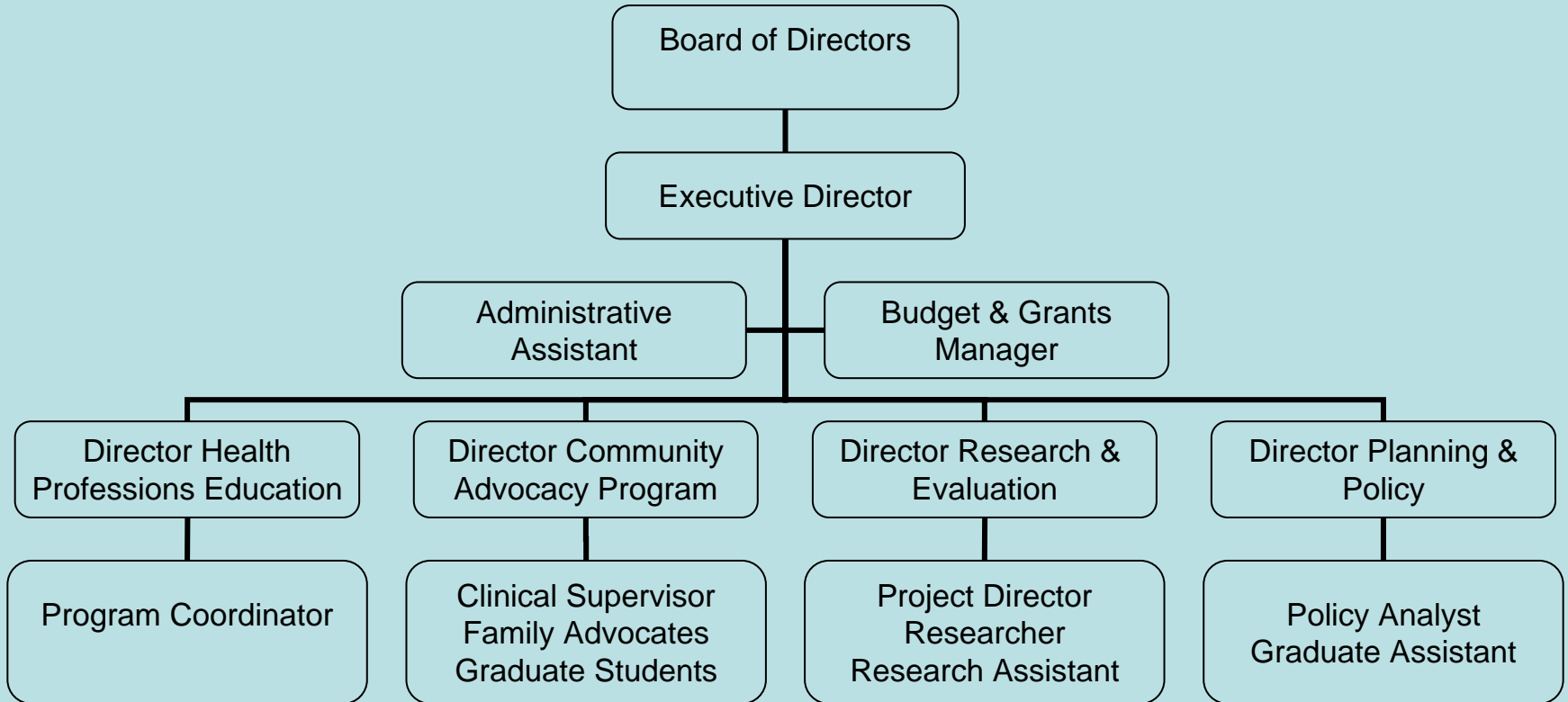
University – Community

- 
- University disrespect
 - Theoretical perspective
 - Education mission
 - Intellectual rhetoric
 - Analytical frame
 - Stagnant culture
 - Community distrust
 - Practical orientation
 - Service mission
 - Concrete action
 - Political arena
 - Dynamic environment

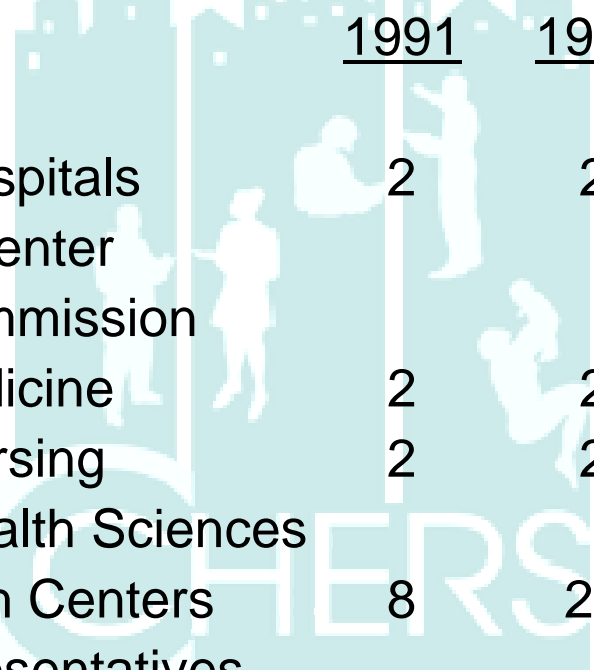
Characteristics of Partnership

- Mutual Respect
- Mutual Benefit
- Shared Vision
- Shared Decision-Making
- Leadership at Various Levels in Multiple Arenas
- Work Across Boundaries

Organization Chart



Governance Representation



<u>Partner</u>	<u>1991</u>	<u>1994</u>	<u>1996</u>	<u>1998</u>
Dept Health & Hospitals	2	2		
Boston Medical Center			2	2
Public Health Commission			2	2
BU School of Medicine	2	2	2	2
NU College of Nursing	2	2	2	
NU College of Health Sciences				2
Community Health Centers	8	20	24	10
Community Representatives				10
At-Large				6
Executive Director	1	1	1	1
Total	15	27	33	35

Organizational History and Development

1991

CCHERS Partnership between *Boston University School of Medicine*, *Northeastern University College of Nursing*, the *Boston Department of Health and Hospitals* is funded by W.K. Kellogg Foundation as a Community Partnership in Health Professions Education, along with *Codman Square*, *Dorchester House*, *East Boston* and *Whittier Street* health centers.

1994

Funding from Corporation for National Service establishes **Community Health Service Corps** service learning program for students from BUSM and NU.

1997

CCHERS, Inc. established as an independent not-for-profit corporation with a board of directors composed of representatives of the partner organizations and the communities they serve.

2001

CCHERS, NU School of Pharmacy and four community health centers funded for **Boston Clinical Pharmacy Practice Network** a HRSA demonstration project in clinical pharmacy and affordability of prescription drugs.

2003

CCHERS becomes organizational home of the **New England Regional Network of Community Campus Partnerships for Health** organizing a leadership team of academic faculty and their community partners in service learning, research and other community engagement in Massachusetts and New England.

1999

NU Institutional Grant for CCHERS to integrate other health professions into model of community based education.

1993

Six new health centers join CCHERS Partnership: *Bowdoin Street*, *Dimock*, *Geiger-Gibson*, *Little House*, *Mattapan*, and *Neponset*.

1996

Funded by Kellogg as a Community Partnership in Graduate Medical and Nursing Education. Merger of BCH and BUMC creates *Boston Medical Center* and the *Boston Public Health Commission* as successor institutional partners in CCHERS.

2000

CCHERS establishes **Boston Community Practice Research Collaborative** as a primary care practice based research network recognized by the Agency for Healthcare Research and Quality.

1995

CCHERS establishes **Health Careers Academy** as pilot high school of the Boston Public Schools for students interested in pursuing careers in the health professions. The **Community Advocacy Program** established as a response to domestic violence in Dorchester.

1998

Health Careers Academy becomes a Horace Mann Charter School and relocates to Northeastern University Campus. Merger of Northeastern's Colleges of Nursing and Pharmacy and Allied Health. Three new health centers join CCHERS partnership: *Harvard Street*, *Greater Roslindale* and *Uphams Corner*

2002

CCHERS **Asthma Center on Community Environment and Social Stress** in partnership with Brigham and Women's Hospital and Harvard School of Public Health funded by NIH/NHLBI as a national center for reducing disparities in asthma. Two new health centers join CCHERS partnership: *Brookside* and *Southern Jamaica Plain*.

Lessons of Partnership

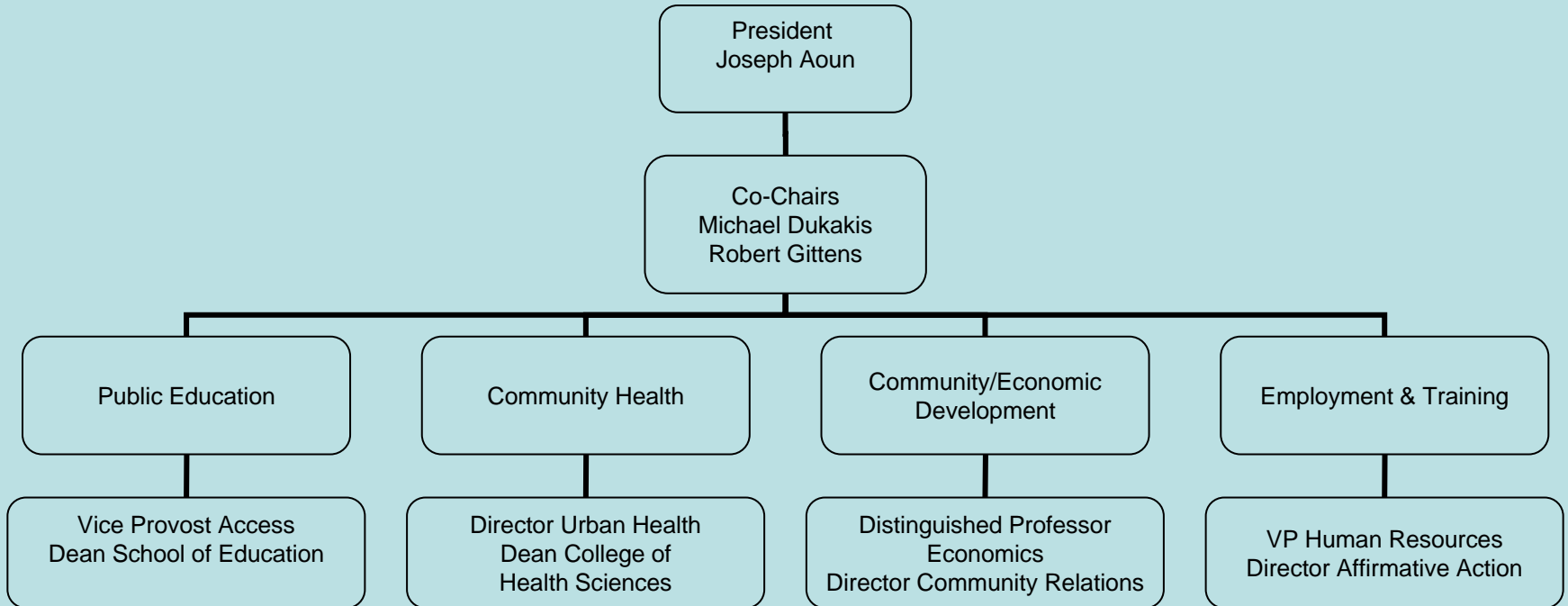
- From separate worlds a shared vision.
- Successful partnerships must be built on trust.
- The heart is more important than the head.
- Being is more important than doing.
- It's a process not an event.
- Build on the strengths of the partners.
- Pay attention to details, the Devil's in them.
- Sharing power is empowering.
- Maintenance of momentum.

Engaging a University: The CCHERS Experience

A University President's Point of View

- Incidental Impacts – by products of efforts to strengthen institutions.
- Intentional Contributions – conscious decisions by universities to strengthen communities.
- Extracted Benefits – something the city demands of the university as a quid pro quo.

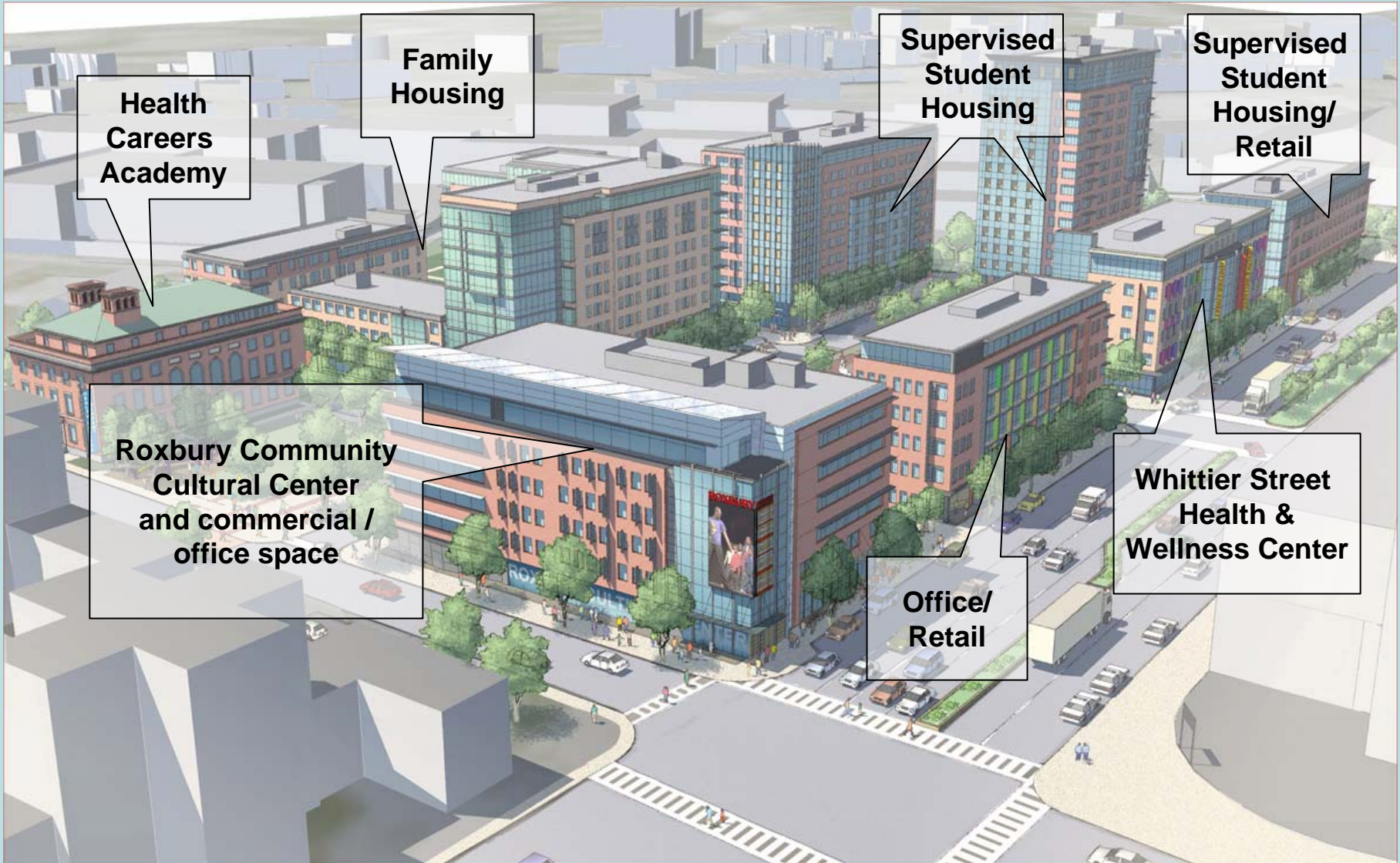
NU Urban Outreach Council



Council Priorities

- **Public Education**
 - Partnership in Education
 - School of Education
- **Community Health**
 - Healthy Communities Movement
 - Urban Health Program
- **Community/Economic Development**
 - Roxbury Technology Council
 - Davenport Commons
- **Employment and Training**
 - Walk to Work Program
 - Minority Vendors/Contractors

Tremont Center



Tremont Center



Partnering for Community Based Participatory Research

Community Health and Academic Medicine Partnership (CHAMP)



**Brigham and Women's Hospital – Division of Internal Medicine
Investigator – JudyAnn Bigby, MD**



**Center for Community Health Education Research and Service
Co-Investigator – Elmer R. Freeman, MSW**



**Harvard Medical School – Department of Health Care Policy
Principal Investigator – LeRoi Hicks, MD, MPH**

Community Health Centers

Potential for Eliminating Disparities in Heart Disease Risks and Outcomes

- Enroll the largest proportion of uninsured individuals and families.
- Provide disproportionate share of care for immigrant populations and racial and ethnic minority groups.
- Participation in the HRSA Chronic Disease Management Collaboratives.
- Model for providing community oriented primary care with individual and community level interventions.

Communities and Health Centers

- **Roxbury**

- Whittier Street Health Center
- Roxbury Comprehensive Community Health Center

- **Dorchester**

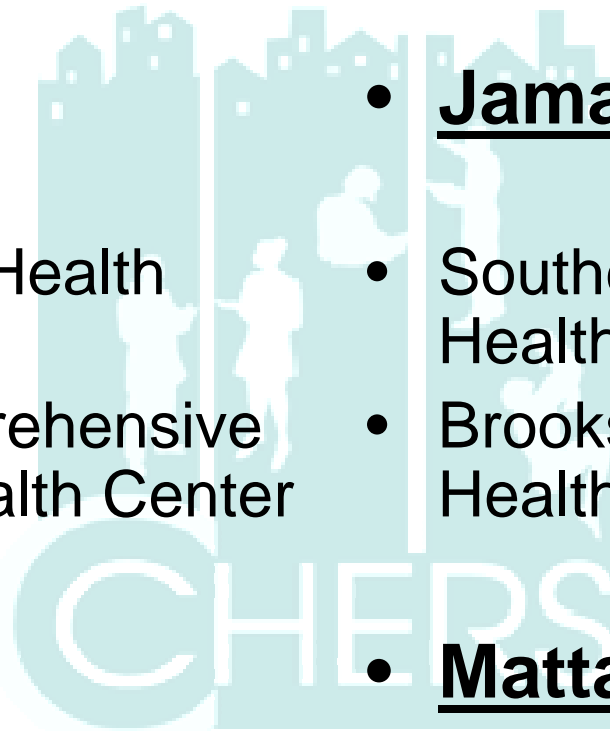
- Uphams Corner Health Center

- **Jamaica Plain**

- Southern Jamaica Plain Health Center
- Brookside Community Health Center

- **Mattapan**

- Mattapan Community Health Center



Objectives

- Create a research collaboration among academic researchers, community health centers (CHC), and community residents.
- Determine the potentially modifiable factors that act as barriers to highest quality care for diabetes and hypertension among CHC patients in Boston neighborhoods.
- Utilize the collaboration of a community advisory committee and investigators to plan and test interventions for patients receiving care for diabetes or hypertension at the participating CHCs.

Research Aims

- **Community/Academic Collaboration (Years 1&2)**
 - **Establish Advisory Committee for project oversight (8 members)**
 - **Conduct regular face-to-face meetings in common forum**
 - **Implement assessment plan for collaboration**
- **Information Gathering (Year 1)**
 - **Conduct CHC site visits**
 - **Conduct focus groups with patients**
 - **Interview and provide quarterly reports to key informants**
- **Pilot Intervention (Year 2 patient and/or CHC centered)**
 - **Patient health literacy, navigation or adherence**
 - **Provider communication and/or competencies**
 - **CHC systems/process analysis**

Patient or CHC Centered Pilot Intervention

- Targeting patient health-literacy
- Improving patient navigation
- Improving patient adherence to provider recommendations
- Improving provider communication and competencies
- External review of quality of performance with directed feedback

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