

# 2016 Center for Health Leadership Fellows Consulting Projects Overview

## CITY HOPE



### *Fellows Team Members*

- *Jessica Ng Luna Klein*
- *Jeremy Ramirez*
- *Brian Rodriguez*

### *The Challenge*

Our Center for Health Leadership Fellows team partnered with City Hope in the spring of 2015. We set out to outline meaningful deliverables that City Hope could use to enhance their new community development center, which promotes substance abuse recovery and reducing recidivism among the homeless in the Tenderloin neighborhood of San Francisco. Our goals evolved into helping City Hope expand its organizational capacity through a grant application guide. Through this guide, we aimed to help City Hope build on their current grant writing framework, and streamline their grant searching process.



**Figure 1. A scene from one of our early team visits to the City Hope community center before it opened on Olive Street in the Tenderloin.**

### *Our Work*

We divided our work into four work streams. These included: conducting SRO focus groups, researching best practices for food co-ops and mental health services, submitting a midpoint evaluation report, and developing a grant framework. Our findings in our midpoint evaluation report highlighted a number of points. Most importantly, City Hope's main focus on long-term relational support to reduce substance abuse and promote mental health wellness to reduce recidivism separates City Hope from other organizations operating within the Tenderloin. In addition, many social service organizations experience financial uncertainty, and there are reported cases of centers in the Tenderloin closing due to a lack of funds. Thus, after several conversations with City Hope, we determined that developing a grant framework would facilitate long-term sustainability.

### *The Outcome*

Through our work this spring, our team has helped City Hope organize grant information so that they can move toward greater financial sustainability and continue serving the Tenderloin. This project brought together a multidisciplinary team of students in possession of various talents, skills, and backgrounds. Together with a community-focused organization and a strong support team, our team reflected Hackman's five enabling conditions for an effective team including a real team, compelling direction, enabling structure, supportive context, and expert coaching. The presence of these five conditions, along with acknowledgement of the privilege and power that accompany a consulting position, helped enable our team to build our own skill sets and work productively together as well as with the client.

# HUMAN IMPACT PARTNERS

## *Fellows Team Members*

- Carlos Cerda
- Briana Levin
- Billy Luong

## *The Challenge*

The primary goal of this consulting project with Human Impact Partners (HIP) was to assess the market for equity-focused health impact assessments (HIA). This goal was achieved through a series of seven in-depth,

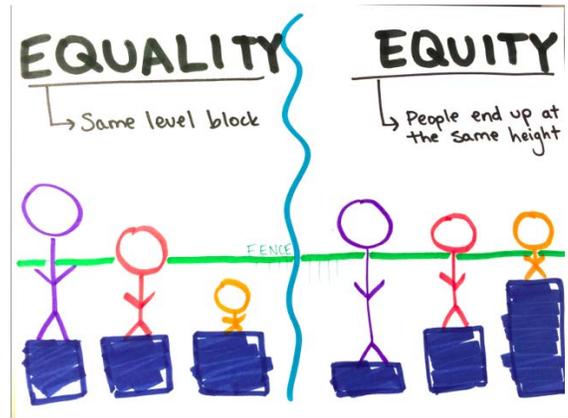
semi-structured interviews with clients, partners, and affiliates of HIP. Human Impact Partners has recently completed a strategic planning process. One of the main shifts in organizational directions is the focus on social movement based work, rather than the individual, project-based work HIP generally focused on in the past. As part of this organizational shift, it is important for HIP to select clients that allow HIP to fulfill this new focus while maintaining a source of revenue to sustain the organization. This new direction would require HIP to gauge how its services are viewed within the market and how it could meet the specific needs of the market, both currently and in the near future.

## *Our Work*

The Berkeley Consulting Team conducted interviews with planning, housing and transportation agencies. There were several high-level takeaways from the data. These lessons learned informed the recommendations that were presented to the client organization. Agencies reported that they value HIA being conducted by an external agency, such as HIP, because they are seen as neutral, objective experts who bring an outside perspective. Interviewees also discussed the barriers they encounter when using formal HIA, including time, cost, fear of negative results, and difficulty implementing rigorous requirements. In addition, many agencies reported that the term 'equity' can be barrier to getting stakeholders on board and that having elected officials pushing for equity-focused agendas can be challenging. Interviewees added that analysis of big data can raise privacy concerns.

## *The Outcome*

After careful consideration and discussion with the co-directors and project directors of HIP, it was agreed upon that the Berkeley Consulting Team would initiate implementation of 2 recommendations. As previously stated, the infographic will serve to communicate the topic of equity in a simple to understand way that would help HIP reach wider audiences that they may not have been able to reach prior. The equity assessment tools developed for phone use could allow HIP, which often obtains clients through referrals over the phone, to gain a sense of whether an organization has demonstrated that it has a focus on equity in past work that it has completed. This is favorable to HIP because of their desire to work specifically with equity-focused organizations.



**Figure 1.** This image is the inspiration for the recommendation to create a visual representation of the term “equity.” Equality is the idea that everyone has access to the same resources and opportunities. Equity, on the other hand, is the idea that people have access to the resources and opportunities they need.

## SHANTI



### *Fellows Team Members*

- *Victoria Gawlik*
- *Sam Gunther*
- *David Resnick*
- *Cassandra Vega*

### *The Challenge*

Shanti, as an HIV/AIDS centered organization, has been serving the San Francisco community since 1975. At the end of 2015, their Margot Murphy Breast Cancer Program was relaunched as the Margot Murphy Women's Cancer Program (MMWCP), which seeks to provide services for all women in the Bay Area dealing with any kind of cancer diagnosis. A number of partner organizations around the Bay serve as not only service providers for clients, but also as referral agencies to the MMWCP. These partners will likely be affected by the relaunch and, as such, should not be ignored. This mission shift represents an exciting and dynamic time in which Shanti can promote MMWCP's strengths and identify areas of improvement in order to ensure continued quality care and support for current and future clients.

With all of this in mind, our consulting team was tasked with the goal of identifying ways to improve client and partner organization experiences. Our scope was later narrowed to focus on ways to improve the MMWCP website. In order to broaden our impact, we have pushed them to consider recommendations that go beyond the website, such as suggestions for their print material or where and how they advertise their services, to great success.

### *Our Work*

To better understand how Shanti can improve the experience of their MMWCP clients and partners, our consulting team utilized several forms of data collection. In Spring 2015, we conducted two semi-structured interviews with Shanti staff to better understand the project at hand and to develop a better sense for how our consulting team could be of service. Furthermore, one of our team members went through a mock-intake process so that we could experience the onboarding process from the client's point of view. In Fall 2015, our team facilitated a focus

group with current Shanti clients. From the information gathered we used a design-thinking approach to generate the following suggestions for improving client experience: (1) clarifying resources, (2) maintaining a personal touch, (3) streamlining processes, and finally, (4) improving website functionality. In Spring 2016, our team developed and deployed a survey that was sent to a list of partner organizations. We analyzed the data separately and then came together to draw out major themes present throughout survey respondents. From this discussion we proposed the following suggestions for improving partner experience: (1) resource clarity, (2) transparency around staffing, (3) define care navigation, (4) easy access to forms, and (5) patient tracking.

### *The Outcome*

First and foremost, the MMWCP is a program dedicated to its clients. They are the focus day in and day out. By making sure their voices are being brought to the table, we feel that they are finally getting the chance to shape the program. While MMWCP offers great benefits to the community, fundamental aspects like a clearly defined services list or an obvious explanation of their role in cancer care are missing in print materials as well as online. While their objectives and methods may be clear to those that are employed by the program, those on the outside may not always grasp them -- a finding backed by the data we were able to collect. By making those who have the power to make these changes aware of the problems, we hope to have an overall positive impact on the number of women coming through the front doors. However, we were able to meet with the newly appointed director of the program and she shared with us that change is often a slow process at Shanti as a whole. Making insignificant changes typically takes a lot of convincing, especially when the problem isn't interfering with daily operations. In response to this potential barrier, we have made all of our data available to both our project sponsor and the new director. We also developed a presentation to help them initiate the process.