With continued support from North Carolina’s legislators through $1 million in recurring funds, the NC Public Health Incubator Collaboratives (NC-PHICs) program is well under way in its second year of funding and activity. Using financial support to enhance long-time and recent histories of regional collaboration, this project now encompasses more NC counties than it excludes, illustrating its growing success. To date, the project includes six voluntary associations of local public health agencies as well as a “shared project” that addresses a state-wide need (see below), sponsored by the NC PHICs Advisory Board instead of a specific region. Through sharing leadership experiences and expertise, financial risk and responsibility, health priorities and political voice, these Partnerships are helping build public health capacity in North Carolina. This program not only enhances collaboration among health directors, but many Partnerships also involve staff work groups and regional stakeholders to complete projects, leverage resources, and improve regional sustainability. For example, the HWTF Eliminating Health Disparities Initiative recently awarded funds to two Incubator Partnerships: $800,000 to the Northeastern NC Partnership for their Diabetes Sentinel Project and $660,000 to the South Central NC Partnership for their Eye on the Sparrow Project. For more information on these projects and others, please contact us, and we will be glad to continue “sharing our stories”.

~ Heather Gates, NC-PHICs Program Coordinator
During fiscal year 2005-2006, the Northeastern North Carolina Partnership hired a consultant to conduct an assessment of the billing practices in our 11 local health departments to determine if we were recouping all possible reimbursements for home health and clinical services. Common areas needing improvement included the correct coding of services to ensure the maximum reimbursement possible, the establishment of policies and procedures related to the billing process, education on billing software systems and the development of a monthly billing quality assurance report for the health director. Rather than hiring a consultant, Anne Thomas, Dare County health director, volunteered for her experienced office manager and billing coordinator, Bobbye Workman, to facilitate a group of local health department billing employees to implement the common areas of improvement. “We have identified nine main areas and divided our group into sub-committees to work on development of uniform procedures and standards. Our goal includes development of a billing manual, which can be used by all employees,” Bobbye reported. Through monthly meetings and ongoing support from the NENCPPH Governing Board, this group continues to move forward with tremendous dedication and enthusiasm. According to Bobbye, “The best thing about the group is the communication and networking. The folks in the group are dedicated employees, who want to make a difference. We are all in the same boat... It is nice to know you have others who have the same issues or experiences.”

~ Barbara Earley, NENCPPH Project Director

Optimistic and hopeful.

The tone of the Legislative Breakfast held by the South Central Partnership on April 24. Key members of the General Assembly and local commissioners were invited and encouraged to learn about the partnership and how 13 counties are working together to address teen pregnancy and chronic diseases within our region. During his presentation on the Health Access Project, Mike Hanes, Lee County health director stated he thought public health was like a religion. I thought about Mike’s comment, and realized that very rarely do you see someone leave public health once they develop the passion to make a difference in another person’s life. This “religion” is what our partnership will hold close to our hearts as we continue to move ahead in our first year of legislative funding. After we shared our regional project updates and key legislative priorities, Dr. Francis Kateh, Anson County Health Director, ended our program by saying, “If we improve the health of our counties, we improve the health of our state; if we improve the health of our state, we improve the health of our nation.”

Francis very eloquently rejuvenated our enthusiasm to continue our public health work while showing our elected officials that we do indeed have a vision that is beyond our county lines. Look for great things to come from our partnership—each of us is committed to making lives better for those people in our communities. I can’t think of a better formula for success.

~ Jane Murray, SCNCPPH Chairperson

The Central Partnership for Public Health is pleased to join the ranks of other incubator initiatives as the newest incubator region. The nine local health departments in central North Carolina are Alamance, Caswell, Chatham, Durham, Guilford, Orange, Person, Rockingham and Wake. The Central Partnership is busy implementing its Strategic Public Health Workforce Planning and Development initiative. The initiative is focused on immediate and long-term public health workforce needs. A comprehensive assessment is currently underway in the nine counties which includes a review of workforce data, management team surveys, staff surveys, and focus groups. The Central Partnership has contracted with The Mejorando Group, the NCIPH, and Program Manager, Eugene Hines, to collect the information, analyze the data, and oversee project implementation. A final workforce report will be completed by August 2006. We plan to implement recommendations from the report as part of our Year 2 regional incubator activities.

~ Dorothy Cilenti, CPPH Chairperson
**SOUTHERN PIEDMONT PARTNERSHIP FOR PUBLIC HEALTH**

**Finance Focus Group Developing Policies to Enhance Revenues and Productivity**

Led by Kathy Hartsell and Donna Campbell, the Finance Focus Group of the SPPPH is 30 members strong, and its work products are among the most useful of our incubator’s accomplishments. These products include financial policy templates, eligibility determination scripts, client photo ID badge policy, fraud prevention tips, and flyers for clients regarding the risk of using falsified identification. One county used our quality improvement process to hone its fee collection practices, resulting in a 13% increase in patient revenues over a three month period.

**NORTHWEST PARTNERSHIP FOR PUBLIC HEALTH**

We all have heard estimates about the aging public health workforce and how many of our employees are eligible for retirement in the near future. We have noticed challenges in recruiting new employees, and have hired staff who look at working in public health as merely a stepping stone to “something better.” We’re working as a region to respond to these workforce needs. To address recruitment issues, we are developing a regional paid internship program to expose students to the variety of public health disciplines and practices in hopes of recruiting motivated graduates into the public health workforce, while accomplishing regional goals. We will support and mentor four interns this summer. Two will be involved with Environmental Health (EH), one with employee development and one with our obesity workgroup. The EH interns will work on survey/analysis projects. One will look at other states’ EH programs, organization and service delivery. The other EH intern will survey former EH specialists, determining elements of job satisfaction and the reasons why employees leave the field, as well as exploring EH student awareness of public health as a career. Our employee development intern will create a web-based orientation program with an initial focus on compliance issues, such as confidentiality and HIPAA, while working with a regional workgroup to identify resources and share orientation practices. The obesity prevention intern will coordinate and help conduct pilot trainings at two schools on physical activity in the classroom, in support of local school wellness policies.

**WESTERN NC PARTNERSHIP FOR PUBLIC HEALTH**

As part of the Western NC Partnership for Public Health, the Swain County Health Department was one of the counties that received funding to apply handheld technology to public health practice. We used handheld computers for the collection of BMI (Body Mass Index) data. Height and weight measurements were collected for 1514 students at four Swain county schools, including two elementary, one middle, and one high school. The use of the hand held computers at each school greatly decreased the amount of time needed to collect and input the data since we only had to enter it once. In previous years, this information had to be collected initially on paper and then entered into the main database housed at the Health Department. This time, Joey Wilson (Bradshaw Consulting) was able to program our data collection form into handheld computers. We entered student information directly into the handhelds where it could be automatically transferred to the main database (no paper and no data re-entry). Using this method of data collection provided the health department a cost-effective method for collecting and tracking childhood obesity rates and identifying trends among Swain county students.

Visit us online at: www.sph.unc.edu/nciph/incubator
MEET THE PARTNERS

North Carolina Division of Public Health
Regional Partnership NC - DPH Governing Board Members:
Northwest - Marcus Plescia
Central - Rick Mumford
South Central NC - Bernie Operario
Northeastern NC - Joy Reed
Southern Piedmont - Dennis Harrington
Western NC - Sarah Thatch
NC Alliance - Chris Hoke

North Carolina Institute for Public Health
North Carolina Public Health Association
NC Alliance of Public Health Agencies
North Carolina Association of Local Health Directors

Collaboratives

?? Incubate What ??

“the rest of the story”

Since this newsletter is designed to highlight specific stories, I will use my corner of the page to share a story that may help answer the one question I hear most often from those who are new to the NC-PHICs (NC Public Health Incubator Collaboratives, our full program title).

“What is an incubator?” people ask me. “What are y’all incubating...chickens?” No. Actually, the idea of a “public health incubator” dates back to pre-2004 when this term surfaced in a meeting of the minds working on how to gain support for a regional model that had been in place in Northeastern NC for years. The Northeastern NC Partnership for Public Health (NENCPPH) and NC Institute for Public Health (NCIPH) were searching for a way to describe to legislators a vision where local health departments voluntarily work together to grow and test new regional approaches to public health practice, using state allocated funds. According to the legend, Jerry Parks (director of Albemarle Regional Health Services, part of the NENCPPH) brought the term “incubator” often used in the business industry, and Ed Baker, director of NCIPH, loved it! From that day forward, “incubators” has been the term used to explain and advocate for this effort to enhance public health capacity at the local level. So, when someone asks you, feel free to say: “No, incubators are not places that hatch eggs, they are voluntary associations of local public health agencies who have been granted legislative funding to work regionally on shared public health priorities.” We welcome your involvement, questions, and stories about the NC PHICs, and send a huge THANKS to those of you who have helped support our efforts thus far. ~Heather Gates, NC-PHICs Program Coordinator