North Carolina Public Health Incubator Collaboratives

ADVANCING NC PUBLIC HEALTH THROUGH INNOVATION

What are the NC Public Health Incubator Collaboratives (NC PHICs)?

NC PHICs are teams of local health departments working together voluntarily to address pressing public health issues.

How do NC PHICs improve the public’s health in North Carolina?

NC PHICs enable the sharing of resources and ideas such that autonomous local health departments can focus on their community health needs while benefiting from regional public health initiatives. Member health departments work together to:

- Increase Level & Effectiveness of Services Delivered
- Increase Shared Resources Across Local Health Departments
- Increase Equity of Service Delivery to Incubator Populations
- Increase Opportunities to Solve Common Problems
- Improve Health Outcomes of North Carolina Citizens
- Foster Innovation

Since their inception, Incubator Collaboratives have together leveraged more than $12 million in additional grant funds to improve the public’s health in North Carolina.
DIABETES: A CRITICAL CHRONIC ILLNESS IN NORTH CAROLINA
From 1980 to 2005, the incidence of diagnosed diabetes increased 124%. For NC’s poorest populations, over 13% have diabetes. North Carolina’s local health directors are undertaking major initiatives through the Public Health Incubator Collaboratives to address the growing problems associated with Diabetes.

High Price
About 17.5 million people in the USA have diabetes, and an additional 6 million have it but don’t know. Costs associated with the disease include:
- Medical costs: $116 billion
- Lost productivity: $58 billion

Source: American Diabetes Association

Below are descriptions of two diabetes related Incubator projects.

EXPANDING HEALTH DEPARTMENT CAPACITY TO PROVIDE DIABETES MANAGEMENT
Without medical care based on the most current standards of practice, diabetes can lead to serious, often fatal complications. Many people in North Carolina do not have access to effective disease management care and education – particularly the poor and uninsured. While health departments are well positioned to address this need, roughly half North Carolina’s health departments lack the resources to provide these services.

In response, the NC Incubator Collaboratives and the Division of Public Health’s Diabetes Branch have collaborated to provide health department staff with necessary training and American Diabetes Association (ADA) certified oversight, enabling local health departments to secure third party reimbursement for these services.

This approach not only allows for the program to be self-sustaining, but provides potential to generate enough re-imbursement to local health departments to cover all fees for these services.

DIABETES SENTINEL PROGRAM
North Carolina Faith-Based Physical Activity & Nutrition Program
The Northeastern North Carolina Partnership for Public Health established the Diabetes Sentinel Program to address the growing presence of diabetes in the Northeastern Region of the state. This program is a faith-based physical activity and nutrition program implementing peer-based and lifestyle change models to achieve obesity reduction, diet modification, and disease management.

Currently, 31 churches in the 19-county partnership region participate in the program, providing services to more than 500 members of the target population. The Diabetes Sentinel Program seeks to train youth leaders as community diabetes sentinels and resources for relatives with diabetes.

A grant from the NC Health and Wellness Trust Fund and Commission would not have been possible without funds and guidance provided by the Public Health Incubator Collaboratives to perform extensive research and grant-writing. The model can be replicated state-wide as a cost-effective solution to reducing health disparities.
TARGETING PUBLIC HEALTH PRIORITIES WITH ACCURACY & PRECISION

The South Central Partnership, the State Center for Health Statistics, and University of North Carolina at Charlotte partnered to create a Comprehensive Assessment for Tracking Community Health (CATCH) tool for North Carolina public health. CATCH is an online warehouse that holds public health data and enables revealing reporting and analysis. This powerful and easy-to-use tool is designed to profile the health status of population, county, township, and census-track levels. CATCH benchmarks local data with other demographically similar communities, with state, and with national averages. With this tool, authorized health department staff can:

• Quickly and easily identify the public health priorities of their communities
• Measure impact of programs and services
• Precisely target populations for public health interventions resulting in better results using fewer resources
• Extract data for grant proposals
• Inform local and state policy and funding allocations

The health directors of the South Central Partnership recognized the value of this tool and provided initial funding necessary to improve community assessment data quality across North Carolina.

ELECTRONIC HEALTHCARE ACCESS FOR POOR RURAL COMMUNITIES

The Southern Piedmont Partnership together with the Cabarrus Health Alliance received funding from the Robert Wood Johnson Foundation and the Federal Communications Commission to establish a health information exchange among healthcare providers in the region. This cutting-edge technology places a patient’s health information in the patient’s hands. With this user-friendly, web-based tool, a patient can review diagnoses and lab results and can send real-time information to their physicians about their up-to-the-minute condition using their cell phone or Personal Digital Assistant (PDA) from their home or elsewhere.

This multifaceted project includes the
1) redesign of selected clinical workflows,
2) development of the personal health record application, 3) creation of a statewide broadband network serving even the most remote counties in the region, and 4) development of application solutions for handheld technologies.
Smaller counties such as ours have benefited greatly from the shared knowledge gained...It has helped us to improve our business processes and customer service. It also makes us feel proud to be part of the ‘bigger public health picture.’

– Health Director

NC Public Health Incubator Collaboratives (“Incubators”) are voluntary teams of local health departments working together to:

- Share ideas and cutting edge practices
- Secure additional resources to address common problems
- Develop and implement innovative projects that address local and regional public health priorities

Primary Points of Interest about Public Health Incubators:

1. **Local Public Health Provides the Leadership.**
   - Local health directors quickly identify and effectively respond to community needs.
   - Buy-in to incubator initiatives is rapid and widespread.
   - Local or regional projects can be piloted, evaluated, and where successful, replicated across incubators and health departments.

2. **Public Health Incubators Work.**
   Each partnership generates specific regional public health priorities and projects. Examples below provide a sample of the more than 30 ongoing Incubator projects across 6 regional partnerships:
   - An HIV mobile clinic providing service to a 19 county region
   - HPV vaccine and cancer prevention awareness initiative
   - Collective purchasing of environmental health technology and data standardization
   - Research about the growing aging population to improve access to care and overall quality of life for seniors

3. **Adding $2 million in recurring funds will allow for additional project innovation, replication, and expansion.**
   - Incubators have leveraged current core funds by raising nearly $12 million in grant awards for local projects. However, promising projects have not been pursued due to insufficient core funds — only half of the proposed health department projects were able to be funded in 2007.
   - Public Health Incubators have grown from 1 regional partnership to 6 partnerships across the state — now covering 81 of North Carolina’s counties. Additional funding is required to keep up with the growth and success of the program.