Getting to the Heart of It:
The Power of True Engagement for Population Health
About Minneapolis Heart Institute Foundation®

The Minneapolis Heart Institute Foundation (MHIF) strives to create a world without heart and vascular disease. To achieve this bold vision, it is dedicated to improving the cardiovascular health of individuals and communities through innovative research and education.

**Scientific Innovation and Research** — MHIF is a recognized research leader in the broadest range of cardiovascular medicine and population health initiatives. Each year MHIF leads more than 175 active research projects and publishes more than 120 peer-reviewed studies. Cardiologists, hospitals and communities around the world adopt MHIF protocols to save lives, improve care and create healthier living opportunities.

MHIF’s population health improvement team is passionate about evidence-based solutions and recognizes that collaboration is critical to population health improvement. Through cutting-edge population health research, the team has tested and discovered the most promising ways to improve health. Hearts Beat Back: The Heart of New Ulm Project began in 2009 in New Ulm, Minn., and collaborated with key stakeholders to successfully reduce heart attacks and risk factors in one rural community. The award-winning project has succeeded as a result of a strong commitment to improving the health of individuals, while also ensuring the places they live, learn, work and play support and promote healthful choices.

**Education and Outreach** — MHIF provides more than 10,000 hours of education each year putting its research into practice to improve outcomes. And, MHIF leads cutting-edge, transformative population health research to connect, engage, inform and empower individuals and communities to improve their health.
About This Guide

The Community Health Peer Learning (CHP) Program aims to advance progress toward population health improvements through the expanded capture, sharing, and use of electronic health data from diverse sectors. Engaging 10 Participant Communities and five Subject Matter Expert (SME) communities in a peer learning collaborative, the CHP Program builds community capacity and supports the identification of data solutions, acceleration of local progress, and dissemination of best practices and lessons learned.

This learning guide is part of a series developed by CHP SME communities — highlighting their practical experiences, noting key lessons, and sharing insights relevant to those working as part of local initiatives to improve population health. The guides are intended to inform the ongoing work of CHP Participant Communities, as well other projects supported through a rapidly growing number of place-based health improvement initiatives. While individual guides address specific topics, such as community-wide information exchange capacity building, at their core, they also tell a story of how data infrastructure development, enabled through purposeful collaboration, can help drive better care, smarter spending and healthier communities. We hope readers find these stories to be engaging, practical and useful.

This learning guide was produced as a part of the Community Health Peer Learning (CHP) Program.

In 2015, the Office of the National Coordinator for Health Information Technology (ONC) awarded AcademyHealth $2.2 million to cooperatively lead 15 communities in the CHP Program. Through this two-year program, AcademyHealth is working to establish a national peer learning collaborative addressing community-level population health management challenges through expanded collection, sharing, and use of electronic data. Learn more at www.academyhealth.org/CHPhealthIT. Learn more at www.academyhealth.org/CHPhealthIT.
Table of Contents

Executive Summary ...................................................................................................................................................... 4

Introduction .................................................................................................................................................................. 5

Part 1: Setting the Stage for Effective Engagement: 10 Best Practices
Engagement in an Era of Health Care Transformation ........................................................................................................ 7
Understanding Engagement and Why It Matters for Population Health .................................................................................. 9

Best practices:
1. Engage the Right Stakeholders and Partners .................................................................................................................. 10
2. Enable Open, Two-way Communication ............................................................................................................................... 11
3. Align Around a Common Vision ............................................................................................................................................ 13
4. Clearly Define Roles, Responsibilities, Authority .................................................................................................................. 14
5. Use a Community Asset Mapping Process .......................................................................................................................... 16
6. Identify Partners to Access and Generate Data ....................................................................................................................... 17
7. Develop a Collective, Long-Term Financial Strategy ........................................................................................................ 18
8. Establish Credibility, Engender Trust .................................................................................................................................... 19
9. Diligently Build Community Capacity ................................................................................................................................... 20
10. View Health as a Shared Value .......................................................................................................................................... 22

Part 2: Maximizing Engagement: 4 Communication Best Practices

Best practices:
1. Tailor Communications Strategies to Increase Engagement .................................................................................................. 24
2. Regularly Communicate Data to Facilitate Change .................................................................................................................. 25
3. Build a Pervasive, Strong Brand Strategy ............................................................................................................................. 27
4. Use Storytelling as a Winning Formula for Engagement ....................................................................................................... 28

Conclusion .................................................................................................................................................................... 29

References ....................................................................................................................................................................... 30
Executive Summary

For effective population health improvement, one of the most essential elements for success is meaningful and effective engagement of key community stakeholders. However, the reality is that it’s not widely practiced. This guide is designed to help population health improvement initiatives better understand stakeholder engagement, determine their stakeholders, identify and use various engagement approaches to achieve desired outcomes, and relate best practices to maximize engagement through effective communication.

In the quest to achieve synergistic goals of improving the patient care experience, improving population health and reducing health care costs, the health care landscape is constantly evolving. There are increasing opportunities for health care and public health systems to partner in a population health initiative and become accountable for health outcomes, while emphasizing social determinants of health, community environments, preventive care and nontraditional health care settings and resources.

Effective engagement helps a population health improvement initiative ensure that it can fully and strategically mobilize community resources to affect individual behavior, as well as policies, systems and environmental changes that impact health improvement. Successful engagement requires thoughtful participation, clear and mutually agreeable expectations, and the ongoing involvement of key stakeholders. Done well, engagement helps to establish and enhance buy-in and ultimate ownership, build capacity (including for key data), effect change and sustain impact.

This guide summarizes 10 best practices for effective stakeholder engagement, which include:

1. Engage a diverse array of traditional and nontraditional stakeholders to provide insight in defining problems, setting goals, identifying objectives and outcomes, and using their expertise to sustain progress.
2. Enable open, two-way communication from key stakeholders frequently and sincerely — especially with those representing the target audience.
3. Align stakeholders around a shared mission and vision that focuses on a specific population health need to help steer the initiative, set expectations, promote effective use of data and ensure ongoing progress.
4. Clearly define roles, responsibilities and authority, recognizing that roles may vary, as will the strategy for how much and how often to engage and communicate with specific stakeholders.
5. Use a community asset mapping process to identify positive community assets and identify connections or relationships that can help mobilize community resources to solve problems.
6. Identify partners to access and generate data to prioritize community health issues, align efforts and strategies, and share resources to maximize the initiative’s collective impact.
7. Develop a collective long-term financial strategy that considers both in-kind donations and direct monetary support to ensure long-term sustainability and ownership.
8. Establish credibility and engender trust by working with outside credible experts to address knowledge gaps.
9. Diligently and continually build community capacity to support the initiative’s goals and sustainability; grow pride, leadership and ownership; and drive the effort forward.
10. View health as a shared value that stakeholders can bring into their respective spheres and operations to maximize the initiative’s capacity to improve population health.

This guide also discusses four communication best practices for maximizing engagement: 1) Tailor communications strategies; 2) Regularly communicate data to facilitate change; 3) Build a strong, pervasive brand strategy; and 4) Use storytelling as a winning formula.

Meaningful stakeholder engagement is one of the most important factors for a successful population health initiative. Successful and effective engagement can be the result of an iterative process that leads to transformed community policies, systems, environments and culture. Through effective engagement, initiatives can better integrate within the community, connect strategies and services across sectors, and share data to improve population health.
Introduction

It is well understood, but not widely practiced, that meaningful engagement of key community stakeholders is essential to effective population health improvement. Consider:

- Research has shown that in programs that involve high levels of community participation and control, there is greater participation in health improvement activities.¹

- Community engagement builds “social capital” — social ties, networks and support — which is associated with better community health and well-being.¹

- Participatory decision-making can uncover and mobilize community assets, strengths and resources that would have been otherwise overlooked.¹

- Ensuring community engagement over the course of a project will promote greater likelihood of ownership and over time, sustainability of the work.¹

Much harder, however, is defining what effective engagement actually looks like. Who is most critical to engage? When and how can engagement be structured to ensure that the work is owned by the target audience? That it inspires them to act to ensure that places where people live, learn, work, and play in communities support and promote health?

This learning guide is designed to help those involved in population health improvement initiatives to:

- Appreciate the importance of stakeholder engagement for success,

- Determine who to engage in the context of a given initiative,

- Consider approaches for stakeholder engagement that will yield the best possible outcomes, and

- Discover best practices for communicating effectively to maximize engagement.

Lessons from an award-winning program

Throughout this guide are specific case study examples of effective engagement, including several from Hearts Beat Back: The Heart of New Ulm Project (HONU) a population health demonstration project with a goal to help reduce heart attacks in the rural community of New Ulm, Minn.

Since 2009, The Minneapolis Heart Institute Foundation has spearheaded the award-winning project in partnership with Allina Health’s New Ulm Medical Center. HONU has implemented multi-level, evidence-informed health improvement practices in the community, health care, worksites and the environment that have created impressive results from both a health and engagement perspective.²

Project staff have successfully engaged with stakeholders in various sectors to utilize data from electronic health records, community health screenings, community needs assessments and environmental assessments to positively impact individual health, as well as garner support for creating healthier environments that have transformed the community culture.

*Throughout this guide, the term “key stakeholders” refers to all individuals and organizations in the community that can affect or be affected by the population health initiative’s work.*

For more information on the project, visit www.heartsbeatback.org.
Part 1: Setting the Stage for Effective Engagement

10 Best Practices
Engagement in an Era of Health Care Transformation

We are in an era of tremendous health care transformation. Across the United States, health care organizations are striving to achieve the Triple Aim: simultaneously improving the patient experience of care, advancing the health of populations, and reducing the per capita cost of health care. As payment reform evolves and health systems are rewarded for keeping people healthy, they must place more emphasis on the social determinants of health, the health of the community's environment, and making care — particularly preventive care — a key priority.

Accordingly, health care systems are increasingly prioritizing resources that extend beyond the clinic walls into the communities that surround them. At the same time, our public health system is charged with promoting healthful behaviors, preventing disease and injuries, responding to disasters, and assuring the quality and accessibility of health services.

As both the health care and public health systems become accountable for health outcomes and move health out into the broader community, strategic partnerships along with community services, resources and support will be imperative. To effectively address a community's health needs and improve overall population health, partnerships must be formed with a variety of key stakeholders — not just those with a vested interest in the health of the population, but also those that have traditionally not viewed health as a strategic priority.

Strong partnerships serve as a foundation for leveraging critical data across all sectors of the community to engage, inspire and monitor change.

This engagement from both traditional and nontraditional stakeholders is imperative to ensure that the social, environmental, economic and structural factors that shape health are equitable for all, and that no one is disadvantaged from achieving their full health potential due to social position or any socially defined circumstance. Recognizing that creating cultural change to improve a population's health is a marathon, not a sprint, it's now more important than ever to partner with diverse stakeholders to create effective engagement that can yield dividends for decades. Relationship building, stakeholder cultivation and data sharing serve as a critical foundation in ensuring communities will be able to develop trust and continue building on it in future efforts.

Creating cultural change to improve a population's health is a marathon, not a sprint. More than ever, it's critical to partner with diverse stakeholders and leverage multiple data sources to create effective engagement that can yield dividends for decades.
So, what does this mean for health care, public health or other professionals leading population health improvement? In a word: **engagement**. Initiatives will not succeed without effectively engaging key stakeholders across a broad community spectrum (e.g., churches, schools, local business, individuals), and it is precisely this early engagement that can help to ensure that relevant sectors and perspectives are ultimately part of the solution.8

Engagement is not always easy, especially when potential connections are not well understood and/or relationships do not yet exist. Moreover, when so many roles, resources and policies are in flux, engagement may be more challenging and more complex than ever. Common goals or visions may be subject to rapid systemic and culture change, and stakeholders may not always agree on the best path to success. Although difficult, this rapid change can create an even stronger imperative to involve strategic thinkers, seek out diverse perspectives and engage those who can define competing priorities. Done effectively, engagement can be stronger and lead to stakeholders ultimately designing solutions that are more impactful and durable for the community.

Good foundations of engagement can help people respond and react to both anticipated and unanticipated challenges and opportunities. Where there is a common goal, even competing stakeholders can align when they center their efforts around a need that can be addressed more effectively as a group than as an individual organization.

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**Aligning competitors for Medicaid transformation**

In 2015, Illinois became the last state in the country to embrace mandatory Medicaid managed care. This decision, along with changes associated with the Affordable Care Act (and health care transformation overall), created the need to communicate with patients regarding the transition to Medicaid Managed Care. Given the changing landscape and the need to secure their patient base, health care providers needed to develop and execute a communication strategy to inform patients of the best way to ensure continuity of care by maintaining access at their current site.

Established in 2005, the South Side Healthcare Collaborative (SSHC) is a network of over 30 federally qualified health centers, free and charitable clinics and community hospitals physically located within the 34 communities that make up the south side of Chicago. Although the SSHC is comprised of competing health care organizations, these changes naturally created a common goal among this competitor community.

The SSHC Board of Directors charged the information and education committee with developing and executing a mandatory Medicaid Managed Care communication initiative to be implemented across SSHC sites. Rallying around the common goal and charge, the committee engaged the competing partners in developing communications tool that could benefit the entire community. Templates were created that allowed each organization to individually brand the materials and also include information specific to their organization.

The initiative was successful in raising patient awareness associated with navigating through the Medicaid managed care system. An analysis on a cohort of patients seen at the University of Chicago Medicine emergency room found that patients who were educated by a patient advocate had 2.2–2.7 fewer emergency room visits in the year following the patient advocate encounter.
The Centers for Disease Control defines community engagement as, "the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the well-being of those people." Engagement is critical to making changes in both individual behaviors, as well as the environment, both essential to improving the overall health of the community. It often requires working with community stakeholders to leverage resources and successfully change policies, programs and practices.

Beyond simply involvement, successful engagement requires thoughtful invitation to participate; clear, mutually agreeable and specific expectations about what that participation means; and ongoing involvement of key stakeholders (most importantly the target audience) in each step of the process. From design through implementation, bringing stakeholders together around a common goal:
• Helps establish more effective buy-in — and ultimately ownership,
• Enhances program design,
• Builds individual and community capacity (key to shifting values and cultures toward a culture of health),
• Galvanizes change, and
• Sustains support and progress into the future.

The following pages describe a variety of best practices that help set the stage for effective engagement.

What engagement looks like:
• Up-front involvement in shaping/explaining the big-picture vision
• Understanding of how data helps to create alignment around the vision and expected outcomes
• Capacity to contribute to the definition of stakeholder roles and responsibilities relative to the vision
• Commitment to helping define how and when roles are executed
• Ongoing opportunities for direct and indirect participation and feedback
To fully realize population health improvement, it’s essential to get the right people around the table to inform the initiative from start to finish. Once key stakeholders have been identified, defining the specific problem to address becomes easier. The group’s work can then turn to setting specific goals and objectives by leveraging existing community data and resources, identifying desired outcomes, and using its collective expertise to prioritize, inform, implement and measure the results of intervention(s) or next steps.

**Define the target audience early on**

Decide who the projected recipients of the population health improvement efforts are. The more narrowly this is defined, the more likely it is that efforts to reach and effect change in that population will succeed.

**Identify stakeholders across a wide spectrum**

Ensure that key stakeholders include representatives from the entire range of the target audience and reflect its diversity. Stakeholders will be key players in developing, implementing and evaluating the population health intervention project, so engaging those with a varied array of knowledge and skills is vital for success.

**Examples of key stakeholders to consider:**

- The **target audience** (i.e., community members who are end users), which is itself a key stakeholder and needs to be included in the process.
- **Principal institutional partners** such as health care, hospitals, public health, city officials, government, schools, businesses, etc.
- **Community or industry leaders** who genuinely understand the targeted community (population) can help to generate community support and ownership, using their specific knowledge and community influence to ensure the success of the health improvement project.
- **Nontraditional players** who may not be in the formal “health” business, but whose work may influence health and health disparities. For example, the participation of schools and educators, housing development stakeholders, transportation decision makers or faith-based leaders can add value with their practical knowledge and experience, and can increase support within the community and with other stakeholders for health improvement initiatives.
  - **Key policymakers or authorities within the field or specific community** who understand processes and policy, systems and environmental changes, and who possess the influence across varied sectors to help drive the health improvement work.
  - **Funding sources** that can provide monetary resources.
  - **Media outlets** or organizations that can help augment and extend the project’s outreach through effective and active communication.
  - **Administrators** who will be accountable for the work’s success, influencing whether the project continues and how well it is prioritized.
  - **Data experts** — such as analysts and statisticians — who can help pull and share data, as well as measure change.
  - **Other professionals, peers and members of the scientific community** who support community health improvement, in principle and in practice, and thus could be invested in the process or outcomes of the project and persuaded to contribute time, ideas, influence, etc.
Enable Open, Two-Way Communication

Effective engagement requires input and feedback from all key stakeholders, including the target audience. This may sound like common sense, but it warrants re-emphasis, as it's important to avoid it becoming an afterthought too late in the process.

There are a variety of ways to gather input, and it's likely to be an iterative process, especially for initiatives that have a planned timeframe of a year or longer. The best way to obtain feedback depends on the project's scope and target audience. Various approaches — including community surveys, key informant interviews, focus groups or community and town hall meetings — provide opportunities to garner feedback, create the best interventions and gather project support.

Helpful tips:

Ask key stakeholders for input and create an open, trusting environment that encourages and uses that input.

When stakeholders share their opinions and expertise, it's easier to inform decisions based on their experience. Ensure that stakeholders feel comfortable sharing their opinions and expertise, and provide positive reinforcement for their feedback. This helps to create engagement that is both meaningful and effective.

The responses of each stakeholder may differ from one another and may be different than expected, which is OK. Employ active listening to understand any potential barriers or hesitations related to the population health initiative’s scope, goals and desired outcomes.

Ask open-ended questions frequently.

For example: How do you like to stay informed? What do you want to hear about on an ongoing basis? What are your values around health? What do you think about ____? How will this work? The process for asking questions can be formal (surveys, focus groups or informational interviews) or informal (meeting or phone call).

Develop a follow-up plan to share learnings and next steps.

Ensure that participants are aware of specific steps that will occur, or decisions that have been made, as a result of their input.

Throughout all stages of the work, use stakeholder input to revise strategy and approaches.

It’s often beneficial to solicit feedback multiple times, as it plays a valuable role in informing key decisions, driving process improvements and enhancing final outcomes.
HONU began working with one group of key stakeholders — local restaurant owners and managers — to help improve the local food environment. The goal was to improve the availability, identification and promotion of affordable, lower-calorie, nutrient-dense foods (especially fruits, vegetables, smaller portions, healthier fats and whole grains).

HONU partnered with local restaurants that were committed to serving the same great-tasting food, while making it easier for people to eat healthier. HONU staff conducted an assessment of the community nutrition environment, a tailored assessment report for each restaurant, suggestions for improvements and consultative help.

The program was not necessarily an easy sell; one manager in particular was initially very skeptical about whether changes would be successful. After making small menu changes, the manager began to see increased customer demand for healthier food choices such as salads, much to her surprise. Slowly, the demand and offering of healthier foods increased in tandem, due to the project’s resources as well as the community’s interest in healthier options.

The manager was involved in the program process from the beginning, her opinion was sought and valued, and her positive and negative input was taken into account while planning the restaurant intervention. As a result of including her in the process, asking her opinion, and feeling as though her voice was heard, she stayed involved in the programming process even while skeptical.

Not surprisingly, the manager is now one of the project’s most passionate champions and serves on the project’s community Leadership Team. She has a keen interest in continuing to make changes not only in her own restaurant, but honestly sharing her story in order to expand the program and bring additional partners on board.

The feedback process is two-way. HONU regularly shares community needs assessment data that shows community members’ opinions regarding healthier options in local restaurants. Overall nutrition environment assessment data is also used to engage restaurants in partnership, and individual restaurant re-assessments help inform progress, highlight success stories to motivate other restaurants, and encourage community members to dine at those establishments.

In New Ulm, 50 percent of all restaurants in the community are partnering with the project to implement healthier practices and menu offerings. Data shows that among all restaurants in the community, healthy practices improved over two years:

- 84% now offer non-fried vegetables, up from 63% in 2011
- 53% now offer fruit, up from 41% in 2011
- 38% now offer whole grain bread, up from 25% in 2011
- 72% now offer smaller portions, up from 31% in 2011

In New Ulm, 50 percent of all restaurants in the community are partnering with the project to implement healthier practices and menu offerings. Data shows that among all restaurants in the community, healthy practices improved over two years:
Align Around a Common Vision

From the beginning, help key stakeholders to buy in to the mission, scope and expected outcomes of the work. Identify a common mission and vision, focusing on a specific community health need. This focus can help in narrowing the project’s scope, setting expectations, engaging key stakeholders and ensuring the ongoing progress of the collaborative or initiative. Use data from multiple sources to help identify needs, gain buy-in around the problem, and identify how to monitor progress.

Once these areas are collectively defined, outline the shared decision-making, ownership and management of the project.

This process should continue through all phases of the project, including assessment, planning, investment, implementation and evaluation. Consider key stakeholders to be partners. Partnerships are interdependencies — none can accomplish goals without the others. Each stakeholder brings with it unique resources for project success.

Revisit strategies as the work evolves and bring on additional stakeholders as they are identified to help move the health initiative forward.

The value of a specific, narrow mission

HONU’s mission is narrowly focused on preventing heart attacks in a defined geographic region (zip code of New Ulm, Minn.). This narrow focus on a single health need of preventing heart attacks — vs. something broader, such as becoming “one of America’s most fit cities” — has served as a distinct advantage.

In its study of the country’s 12 most successful collaborative health partnerships (including HONU) for the Commonwealth Center for Governance Studies, Inc., the University of Kentucky researchers wrote that partnerships whose leaders have chosen to address a single community health need, or a narrow set of needs on which to focus their efforts, "have a relatively less difficult challenge in setting objectives, developing or facilitating interventions directed at those needs, and selecting metrics to measure progress as compared to partnerships with a more expansive mission and focus. Comprehensive, far-reaching missions obviously require a broader range of objectives, interventions, and metrics with major implications for the time and resources that will be required to make a measurable impact.”

HONU’s narrow focus has helped maximize engagement, keep the project focused, and aligned around systematic ways to capture data, measure progress and reach desired outcomes. It’s also helped ensure that stakeholders are clear about the priorities for the work. For example, while improving children’s health is valuable and important work, the project has focused its activities, interventions, programs and messaging primarily on adults as a result of the clear focus on heart attack prevention.
All stakeholders must understand their roles and responsibilities, to agree upon expectations for their involvement, and to understand the value of being part of community change. How each stakeholder views the value of health, and to what level the stakeholders wish to engage in the project, may vary among the key stakeholder groups.

Their roles in observing, following, endorsing, contributing, owning and leading may vary. The ideal strategy for how and how often to engage and communicate with different stakeholders will also vary, depending on the outcomes expected. (See Stakeholder Communications Chart in Part 2.)

HONU used data from electronic health records and mapped “hot spots” within the community. Four clusters of residents who were at high risk for diabetes, tobacco use, asthma and depression were identified and mapped across the community.

After analyzing the data, project leaders learned that people living in these specific neighborhoods were not engaging in the project’s programs and initiatives at the same level as the rest of the community. The project staff set out to better understand why, and learn how they could engage these residents more effectively.

HONU partnered with the New Ulm Medical Center (NUMC), the city’s Park and Recreation Department, Allina Health, Brown County Public Health and other community organizations to host four neighborhood gatherings for residents. The gatherings provided an opportunity for neighbors to get acquainted and get health information, while at the same time help identify unmet needs related to health, barriers to health and health care access.

At the onset of the collaborative, the various partners quickly identified and agreed upon team members’ respective roles and responsibilities, based on the expertise that each key stakeholder brought to the table. The collaborative group also identified a need to work with an independent qualitative researcher. As a community outsider, the researcher could serve as an impartial expert to lead the research process and compile the findings report to prevent a bias that was infiltrating conversation.

The independent researcher was able to solicit feedback and use it to effectively inform, but not taint the process. This facilitated increased engagement and buy-in throughout the entire process by all key stakeholders.
Part 1: Setting the Stage for Effective Engagement

A Few Engagement Dos and Don’ts

**DO** Share the big picture: Too often, organizers ask individuals to participate in a specific component of an initiative, but don't provide them with an adequate perspective of the big picture. Or, individuals are asked to participate as a formality, or after plans have already been established, leaving little opportunity for meaningful engagement.

**DO** Engage stakeholders at the earliest formative stage: It’s all too common for a population health or community initiative to be developed with good intentions and a strong evidence base (as well as aggressive timelines, detailed project plans and defined metrics), only to fail in the execution phase. Why? Most often it’s because key stakeholders weren’t involved early enough in the process to help define the problem or build trust, ownership and support for the planned work.

In an effort to create a successful and sustainable population health initiative, it's crucial to engage stakeholders from the earliest formative stage. In most cases, this is when stakeholders face the challenge of identifying, characterizing and prioritizing the “problem” to be solved, relative to other possible issues.

**DO** Use data from multiple sources to engage: All communities have multiple population health needs that an initiative could address, and choosing what not to tackle is — in and of itself — an important decision that is best made alongside community partners. A well-designed engagement process uses data from multiple sources to define and refine the issue of greatest or most immediate concern in a community, (i.e., which particular issue generates the most interest, buy-in and commitment). The process then leverages the interest of key stakeholders in paving the way in the design of effective interventions.

**DO** Commit to engagement as a fluid process: View stakeholders as partners, with shared accountability, investment and potential benefit. Recognize that achieving stakeholder engagement is a fluid process and is not just a one-time event. Rather, it’s an ongoing strategic process designed to produce better outcomes and support sustainability. Use informational interviews and other strategies to determine who should be involved at each step — from design through evaluation. This can clarify the process and structure of the health improvement initiative. If people or organizations that have the potential to make valuable contributions to the health initiative and process are identified later, rather than early on, they can still be approached then for assistance, ideas, feedback or other help, and become engaged with the project and its activities. Engaging key stakeholders throughout the entire process can help inform and design strategy, process, implementation, measurement and communications.

**DON’T** Narrowly limit your perspectives: A common pitfall in engagement is over-reliance on the perspectives of a limited set of experts or organizations, absent corroboration from other community members — especially the initiative’s target audience. Though well intentioned and perceived as the right step, such approaches typically fail.

It’s imperative to take time to engage the target audience and learn from them by asking questions, actively listening to feedback, and seeking solutions that are tailored to their specific needs. To find and implement effective solutions to today’s complex health challenges and move community forward, cross-sector collaboration and stakeholder engagement are not optional, but essential.

Engagement is not a one-time event, but rather, an ongoing strategic process designed to produce better outcomes and support sustainability.
Use a Community Asset Mapping Process

Community Asset Mapping is a way of identifying existing resources available in the community. It focuses on positive assets within the community (as opposed to focusing on “problems” in the community), and helps to identify connections or relationships between individuals, between individuals and organizations, and between organizations.

Asset mapping often focuses on mapping five types of assets: individuals (members of the community and their skills), associations (groups like clubs or congregations that work in the community), institutions (organizations, businesses or governmental entities), physical (such as buildings and geography), and economic (such as consumer spending or tax revenue).18

As one example, communities can leverage available EHR data to map and target individuals at higher risk for heart disease due to high blood pressure, diabetes, obesity or other conditions. They can then employ asset mapping to identify available community resources and any existing gaps.

Asset mapping serves two functions:

1) It helps to discover both expected and unexpected key stakeholders to engage in a population health initiative.

2) It initiates a process that a community can ultimately use to mobilize the identified resources and help solve its own health problems.18

This identification of community assets — when conducted in an inclusive manner — can help key stakeholders prioritize engagement and intervention strategies in the context of likely enablers and possible barriers.
Identify Partners to Access and Generate Data

For all population health initiatives, developing partnerships with various stakeholders with access to data is essential for success. Using collective data can help prioritize community health issues. Explore ways to leverage points of alignment by working together, sharing resources and data, and aligning strategy to maximize the impact of collective actions through effective coordination of potential resources. Begin this work as soon as is feasible in order to fully exploit these partnerships. Then revisit the process from time to time as the work evolves, or as new groups are formed within the community, to attract and engage new stakeholders and modes of support.

Using data from a wide variety of stakeholders

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<td>• Worksites, organizations • Residents</td>
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<td>• 90% of community residents have EHR data (80% of target population)</td>
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<td><strong>Partner for the data:</strong></td>
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<tr>
<th>State and Local Government</th>
</tr>
</thead>
<tbody>
<tr>
<td>• State heart attack data • Police accident reports • Safe Routes to School data • Parks &amp; Rec data</td>
</tr>
<tr>
<td><strong>Partners for the data:</strong></td>
</tr>
<tr>
<td>• Government partners</td>
</tr>
</tbody>
</table>

**Data Integration Plan**

Synthesize information and share in a digestible, user-friendly way with various stakeholders to inform decision-making and messaging.

**Desired Impact**

Create interventions that would positively impact community diagnosis metrics through frequent communication and ongoing community engagement.
Part 1: Setting the Stage for Effective Engagement

BEST PRACTICE #7

Develop a Collective Long-term Financial Strategy

Program outcomes obtained with the assistance of grant funding can be unsustainable if funding ends without a plan in place to replace it. It’s imperative to develop a financial strategy with key stakeholders so that there is ownership, commitment and role clarification to the strategy for long-term engagement. Identify opportunities for in-kind donations as well as direct monetary support of the population health initiative. This can take many forms, such as pro bono services or administrative staff support; donation of space, volunteer time, prizes or supplies; or promotional support, such as free displays ads in local newspapers, public service announcements, and more.

The nuances of communicating a financial strategy

HONU learned from experience that messaging about a financial strategy requires thoughtful consideration of the audience and how everyday citizens perceive the project’s resources. As a population health demonstration project, HONU had a 10-year research component and initially received a large amount of funding for that research from the larger health care system.

Early on, the project shared that funding amount with the broader community, and unfortunately, the local media shared incorrect funding amounts (much higher than actually received). The messaging did not fully portray the cost and scope of the research component, and certain details were almost certainly too complex for individuals unfamiliar with research protocols, processes and expenses.

What project leaders didn’t realize at the time is how this would impact engagement and future funding. The community’s impression was that the project was very well funded, as leaders hadn’t publicly shared the cost details of conducting various integrated research components at a community level. Messages about funding actually backfired and gave the impression that the overall project had an overabundance of funding and dedicated research personnel.

Consequently, as the 10-year research phase of the project neared completion and project leaders began transitioning the work to a community-driven model, stakeholders and community members were resistant to take ownership through shared financial support of the work given the early perception of unlimited project resources.

Lesson learned: The messaging did not fully portray the cost and scope of the research component, and certain details were almost certainly too complex for individuals unfamiliar with research protocols, processes and expenses.
When implementing an initiative, it’s critical that the voices of health care or public health professionals do not drown out stakeholder voices, especially from the target audience. However, determining where there are gaps in knowledge or expertise among stakeholders is also important, so that experts can be invited to address those gaps.

Assistance from outside professionals has a couple advantages. First, outside experts can ensure that the project follows the best approach. Second, outside professional experts can help to engender stakeholders’ trust when they deliver information or messages, as they have established credentials and expertise in the topic and typically do not have any local political motives or interests.

Establish Credibility, Engender Trust

When implementing an initiative, it’s critical that the voices of health care or public health professionals do not drown out stakeholder voices, especially from the target audience. However, determining where there are gaps in knowledge or expertise among stakeholders is also important, so that experts can be invited to address those gaps.

The WALC Institute created a report with walkability data, case studies and recommendations about how the community could improve safety for all users. The report was used to garner enthusiasm and buy-in for built environment work and subsequently inspired the leadership group to begin working on the recommendations and providing guidance to action teams. The teams began work specifically on the areas identified in the report, provided education on bicycle and pedestrian safety, and developed processes or procedures to ensure that all users are taken into account whenever any street work is done over the next several years. Because of the outside consultation, the team members built confidence around what to do and how to influence others around the plan as well.

Activities included a driving tour of New Ulm to identify assets and areas of improvement in traffic flow and bicycle and pedestrian safety, a walk audit around New Ulm elementary and high school, and presentations about the many benefits of Complete Streets to New Ulm city leaders and the Brown County Commissioners.

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As a clinical example, to help local health care providers increase their knowledge, HONU brought in national experts for several Grand Rounds Continuing Medical Education (CME) events. Health care providers had the opportunity to hear about the latest evidence-based research on a variety of preventive topics, such as key gender differences in heart disease, treatment of high blood pressure and cholesterol, and overall risk reduction strategies.

Using a trusted expert in the target audience’s field not only helped to increase provider engagement, but also provided critical scientific data, evidence and real-life examples on how providers could integrate the information into their own practice.
Diligently Build Community Capacity

While bringing in experts to fill in specific gaps related to knowledge and expertise is important, equally important is building community capacity to enable more people to support the initiative’s goals and ensure that the work will be sustainable. Community capacity building is a continuous process for growing pride and leadership to ensure that key stakeholders (which include the target audience) are trained to take ownership for the work at hand.

Common methods include formal and informal training, sharing information, leveraging and sharing data from multiple sources, and even sending individuals to professional conferences.

The leaders of the initiative should not be the only experts in the room. Growing the knowledge base, confidence and skills of all stakeholders empowers each individual to represent the initiative.

In fact, some of the most important work the project’s team can do every day is to serve as a catalyst and resource for helping the broader community take ownership in efforts to improve the community’s health and work toward the project’s goals. This requires engagement at many levels.

Building capacity through PSE knowledge

Local leaders in New Ulm learned that while programs that promote individual behavior change and adoption of healthful lifestyle habits play a role, they are typically time- and resource-intensive, and typically affect a relatively small population.

To achieve and maintain meaningful health outcomes, creating supportive environmental and systems changes must also be a key focus.
Building capacity with a collaborative for worksite wellness

HONU held focus groups with New Ulm-area worksite wellness leaders, which revealed their desire for more training and opportunities to network and learn from one another, while discovering new knowledge and strategies for overcoming challenges and gaining traction with their worksite wellness programs. The shift from “educating” to community capacity building was implemented from engaging the target audience in the conversations.

To meet their needs, four area organizations joined together, including HONU; New Ulm Medical Center’s Occupational Health and Wellness Services; New Ulm Area Chamber of Commerce; and Healthy Together, a partnership of Brown, Nicollet, Le Sueur and Waseca Counties funded by the Minnesota Statewide Health Improvement Program.

Goals of the collaborative were defined up front. The focus group results informed the conversation and ensured the group stayed attentive to the needs of the target audience during the planning and implementation process. Roles and responsibilities were defined up front for each of the collaborating organizations.

As a result of this expanded collaboration, the community is building worksite wellness leader capacity to integrate health into their organizations while recognizing identified barriers. At the same time, the collaboration is helping to expand the audience reach, increase satisfaction, share resources and maximize outcomes for all stakeholders at the table.

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View Health as a Shared Value

It can be extremely beneficial for key stakeholders — representing a variety of sectors, including businesses, educational institutions, health care and faith-based organizations — to bring health into their respective operations, creating a culture where health for all becomes a shared value. Examples might be implementing a healthy vending policy at the school level that supports the mission, or having local businesses integrate worksite wellness initiatives.

Integrating health as a shared priority in all individual, family, organizational, government, city and school agendas is necessary in order to weave health into the fabric of the community and to maximize the opportunity for the community to reach its full health potential.

To do this requires key stakeholders to understand the impact of the individual's health on others. For example, individual health affects family health, organizational health affects community health, worksite health affects employee health, school health affects student health, and the collective health of all these entities has impacts on the overall health of the larger community.

Supporting health throughout the community also requires understanding where health issues fall to be prioritized among other competing priorities, such as education, transportation, safety, gun control, infectious disease, etc. Using data in a persuasive way helps people understand that health is not only about caring for those with chronic illness or disease, but also about preventing disease, reducing costs and improving policy, systems and environments. Ultimately, this understanding helps stakeholders feel increased ownership in the initiative.

Successful engagement rallies people to action in solving the specific health problem that’s been identified. When key stakeholders view health as a shared value, it’s easier for them to recognize their role as part of the collective effort to execute the vision and mission.

Improving employee health with the help of worksite-specific data

In New Ulm, more than two dozen worksites agreed to host onsite heart-health screenings for their employees. Employers received comprehensive, aggregate screening data pinpointing the top areas for health improvement among employees, and calculated how much the employer could be losing annually in health-related productivity loss. The data has helped employers guide their health promotion efforts, enabling them to focus on the specific lifestyle behaviors that will result in the biggest benefits for employees as well as the overall organization.
Part 2: Maximizing Engagement

4 Communication Best Practices
Tailor Communications Strategies to Increase Engagement

Engagement doesn’t happen overnight — and good engagement at only the onset of a project will not ensure engagement long term. Successful engagement requires ongoing thought, strategy and execution. The process requires layering communications across the community and aligning communication messages to the needs and values of the targeted stakeholder group (e.g., residents, funders, health care system executives, business leaders, etc.).

It’s important to understand what messaging resonates with the community and key stakeholders, as well as with the topic or goal, and the best communication vehicles with which to share that messaging. As mentioned earlier, the strategy for how and how often to engage and communicate with different stakeholders will vary, depending on the level of engagement desired and the outcomes expected from this engagement.

<table>
<thead>
<tr>
<th>Key Stakeholders</th>
<th>Level of Engagement</th>
<th>Engagement frequency/tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents and people who work in the community</td>
<td>Contributing by participation</td>
<td>Monthly newsletter; quarterly billboards/electronic signs; quarterly engagement programs; focus groups as needed; social media posts/interactions; community screenings (3 in 7 years); point-of-purchase information in local restaurants, convenience stores and grocery stores; news releases to local media; Letters to the Editor; videos; website; e-blasts on special events and programs; annual report delivered to every home; door hangers/postcards throughout the community for special events; print media; TV, radio and PSAs; cooking show on local cable access; worksite and community summits; numerous classes and events</td>
</tr>
<tr>
<td>Providers</td>
<td>Contributing</td>
<td>Continuing Medical Education (CME) activities; health coaching referrals; screening follow-up; providers serve on project leadership team and also served on a clinical leadership team that helped inform the project’s health care interventions</td>
</tr>
<tr>
<td>Leadership Team Members</td>
<td>Leading/owning</td>
<td>Monthly meetings; strategic planning; accountable for mission, vision and annual goals objectives and outcomes</td>
</tr>
<tr>
<td>Community Influencers</td>
<td>Owning</td>
<td>Engaged often and in a strategic thoughtful approach usually with a personal contact; project staff presented regularly at “Hot Topics” breakfast meetings sponsored by the local Chamber of Commerce; facilitated a bus tour of city streets for the County Commissioners to learn more about safety issues; ensured HONU had a visible presence at many community events where influencers would be present</td>
</tr>
<tr>
<td>Research Advisory Team Members</td>
<td>Contributing</td>
<td>Initially held quarterly meetings until the research agenda was finalized; then monthly Project Update via email</td>
</tr>
<tr>
<td>Media Outlets</td>
<td>Contributing</td>
<td>Regularly published news releases and columns; quarterly article in special Health Edition supplement; media invited to events to cover; discounted display ads</td>
</tr>
<tr>
<td>Funders/Administrators</td>
<td>Observing/following</td>
<td>Monthly Project Update via email; in-person meetings as requested; site visits</td>
</tr>
<tr>
<td>Professional Colleagues, Peers, Scientific Community</td>
<td>Observing/following</td>
<td>Scientific papers, presentations, poster sessions and calls; training through conferences; National Rural Health Training Institute in development</td>
</tr>
</tbody>
</table>
Intentional, planned follow-up with stakeholders to discuss the state of the project and progress made toward goals helps to ensure a high level of engagement. Regular reports to key stakeholders at every level helps to sustain their engagement throughout the project and gives them a sense of cumulative activity from knowing how they are improving in certain health measures. When data is communicated regularly, and in a meaningful way, it resonates with and effectively engages the project’s target audience.

Improving population health includes capturing, sharing and using data from diverse sectors to effectively plan, implement and measure impact. Different data will resonate with and impact audiences in different ways. For example, an initiative may share collective electronic health record data differently with a physician than with a patient. Consider how to tailor messaging to ensure impact with the relevant audience.

Communicating data is important, but that’s only the beginning; data does not have an impact unless stakeholders use it strategically to facilitate change. Data can help stakeholders identify risks in a target population, evaluate change, and communicate progress or the need for additional change. Data can also provide supporting evidence in demonstrating impact to key partners and funders. Through collaborative and coordinated action, transparent use and communication of data, ongoing dialogue and partnership across various sectors, and the community, success can be achieved.

Using data to determine a new park location

Getting other organizations to bring health into their operations can happen in several ways. In one case in New Ulm, it happened as a result of making data available to create a meaningful long-term impact in making a community decision.

HONU had used electronic health record data to map neighborhood “hot spots” in the community, where there were clusters of individuals at high risk for diabetes, tobacco use, asthma and depression. HONU shared this data with the local park and recreation department board, which used it during the process of securing funding for a new park. The data allowed the board to think more strategically and thoughtfully about park placement, versus the traditional approach of holding a meeting and listening to the loudest voices.
Communicating data with audiences according to need

HONU’s approach:

• **Scientific community**: Articles in peer-reviewed publications and national presentations serve to present research outcomes and share evidence-based approaches that are working in the community (right).

• **Project Leadership Team**: Presentations to this team with the latest data allow for conversations around planning, monitoring and impact.

• **Residents**: News releases, radio messages, newspaper ads, e-newsletter articles, social media posts, and community presentations communicate data in layperson language that is easily understood (example below).

• **Organizational leaders**: Data is packaged to inform project successes and to inform whether to stop or continue research.

• **Funders**: Data is used to justify additional funding for specific projects, interventions or policy, systems or environmental changes.

• **Vulnerable populations**: Data is used to map risk to neighborhoods, find risk clusters and share results with key leaders in the community to justify allocated resources, interventions and monitoring to these vulnerable groups.

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**First — and most importantly — people are healthier!**

Based on data from screenings and electronic health records, people age 40–79 who live or work in New Ulm are making impressive strides:

- **30%** of people in New Ulm now eat five or more servings of fruits and vegetables a day, up from 16% in 2009.
- **40%** of people in New Ulm now take a daily aspirin, up from 32% in 2009.
- **76%** of people in New Ulm now get 150 minutes a week of moderate exercise; up from 64% in 2009.

New Ulm’s cholesterol and blood pressure improvements are particularly notable because they represent larger improvements than trends being seen in the rest of the country!
Part 2: Maximizing Engagement: Communication Best Practices

BEST PRACTICE #3

Build a Strong, Pervasive Brand Strategy

Engagement includes building a brand experience and creating a positive relationship between the product/service and the target audience. Effective engagement is achieved by:

- Engaging the target audience in building the brand,
- Aligning shared values with the brand,
- Positioning the brand as a service to the target audience,
- Establishing the initiative as the trusted resource, and
- Positioning the initiative as a recognizable resource in the community.

For HONU, developing a brand identity has been critical to help tie in all of the initiatives as well as help everyone feel like they understand what the project is about. The brand was built around this idea, using feedback from the community, and the project has deployed the brand consistently through an annual communications strategy.

The project has worked to spread educational lifestyle messages everywhere — in people’s homes (direct mail, newspaper ads and stories, cable TV cooking show), in their cars (radio and billboard advertising), at work (worksite campaigns), online (website, social media and email communications), and throughout the community (restaurants, grocery stores, farmers markets, convenience stores, schools, Chamber of Commerce). In particular, HONU found that worksites are an excellent place to spread the word. More than 37 percent of people responded that they heard about one of the project’s initiatives through their worksite, taking the lead over project newsletters, friends and family, and media coverage.

Frequency of communication with the community is something HONU learned from the North Karelia Project in Finland. Leaders there learned that having articles appear in the newspaper or otherwise getting messages out in the community several times a month was key. HONU has worked hard to build upon this same philosophy, which is adapted from basic advertising and marketing principles as to how often a person needs to hear a message before they will act on it.

Often with community initiatives, communications happen in the form of marketing a specific program, product or service. HONU has marketed a way of life with messages that blanket the entire community, helping propel a shift to a culture where health is the new norm.

At the end of the first year of the HONU project, brand awareness was 94 percent, and the same percentage believed the project would be successful. This brand awareness has been maintained at more than 90 percent for more than seven years, and the identifiable “heart” icon has become immediately recognizable with all of the project’s themed campaigns even if the name isn’t used.
While not quantitative or scientific, storytelling engages people and is often a more effective format to help ensure that an audience remembers key messages. Not only is storytelling a way to communicate to stakeholders and the target audience, but soliciting stories furthers engagement and aids in building a supportive community.

Stories can inspire change and better outcomes. They can come in the form of personal success stories, organizational change or impact highlights; they can transform data into something that matters to the audience. When products, services and outcomes are wrapped into an engrossing story, they help to attract, involve and sustain the engagement of the target audience. Compelling beginnings, absorbing middles and satisfying endings create something that people want to share.

Also, encouraging social support in communications is a way to help develop commonalities. When it comes to successfully making healthful lifestyle changes, the power of social support can’t be emphasized enough. An individual’s healthful choices influences their family, coworkers and friends. Disseminating messages that reinforce how the entire community wins when everyone works together to support each other can create community bridges.

HONU has consistently shared stories that highlight success and convey the message that “If Tom or Mary can do it, so can you!” Communications highlight personal success stories of people in the community whenever possible to help inspire others and increase engagement. The project has solicited personal stories through casting calls, newspaper articles and through one-on-one outreach efforts.

Stories emphasize how small steps lead to success. In newsletters, the newspaper, annual reports and videos, HONU has consistently shared stories as to how people in New Ulm have lost weight, quit smoking, made healthier eating choices, began getting more physical activity into their day, or lowered their cholesterol or blood pressure.

Stories have also highlighted efforts by local employers to create tobacco-free campuses or implement worksite wellness programs, or shared their employees’ successes in losing weight or supporting each other to make lifestyle changes.
Conclusion

As health care organizations strive to achieve The Triple Aim, meaningful stakeholder engagement is one of the most important factors, if arguably not the most important factor, in the success of a population health initiative. When engagement is done thoughtfully and viewed as an ongoing, iterative process, a community can transform policies, systems, environments and indeed, its entire culture. Health can become a part of the fabric of the community, with an impact that’s visible wherever people live, work, learn and play.

The path to success starts with knowing who to engage, how to engage, and the best way to communicate to retain engagement and ownership. When a population health improvement initiative is deliberate in engaging diverse key stakeholders early and often in the process, they can help effectively inform and design strategy, process, implementation, measurement and communications to ensure that the work is sustainable long into the future.

With solid engagement, an initiative will be well positioned to expertly integrate and connect programs, strategies, services and evidence-based interventions across all sectors of the community. It will also be poised to ensure that all stakeholders have access to aggregate health data to develop policies, improve individual health, and facilitate systems and environmental change that will all lead toward realizing the shared vision of health.
References


