



Health Announcement Meeting

- November 12, 2009



Give. Advocate. Volunteer.

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Agenda



- Road to Transformation
- Community Impact Overview
- Health Impact Subcommittee
 - Process
 - Plan
- Next Steps
- Questions



ROAD TO TRANSFORMATION



Road to Transformation

Evolution-Resource Investment Strategy



1967-mid 1990's

- focus on basic levels of fiscal and programmatic accountability

mid 1990's-2009

- focus on direct service outputs & results

2010 —————>

- focus on root causes & creating community & personal change



Road to Transformation



September 2006

- UWMC participated in an online United Way of America (UWA) Self Assessment survey in evaluating how our UW ranked according to the UWA Standards of Excellence
 - The UWA Standards of Excellence:
Describe the benchmarks for a United Way being considered a Community Impact United Way

Road to Transformation



January 2007

- UWMC Board formally appointed the Community Impact Ad Hoc Planning Committee

March 2008

- Committee Report presented and accepted by the UWMC Board
- Education, Income and Health Subcommittees approved

July 2008

- Strategic plan presented to the Board to initiate the Community Impact transformation
- Public Policy Subcommittee approved



Road to Transformation

August 2008

- Community Impact presentation for partner agencies
- One-on-one follow up conducted

September 2008

- Impact Subcommittee recruitment

January-October 2009

- Impact Subcommittee process

September 2009

- Board approved Income Impact Plan

October 2009

- Board approved Education & Health Impact Plans





COMMUNITY IMPACT OVERVIEW



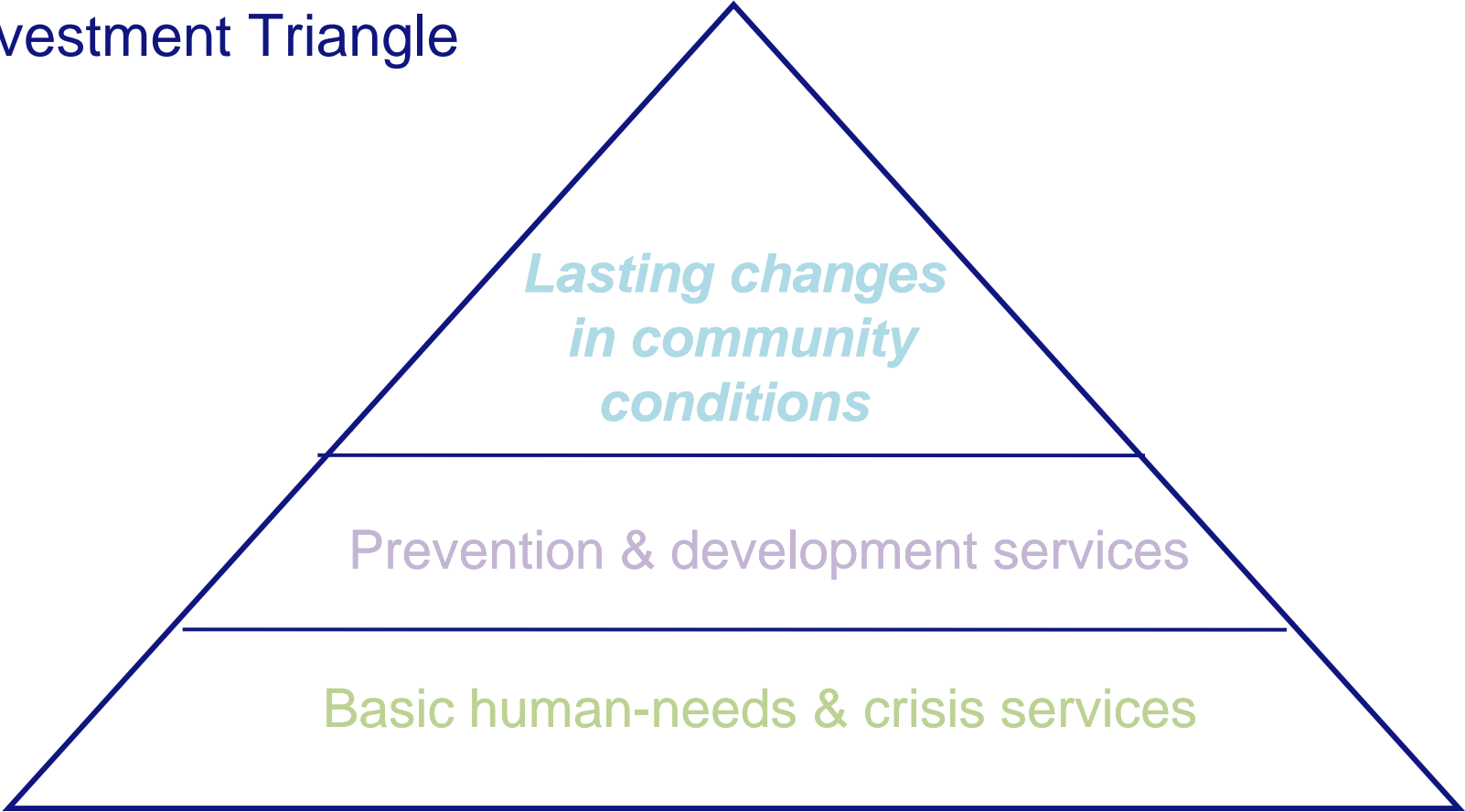
Community Impact Overview



Improving lives
by mobilizing communities
*to create lasting changes
in community conditions*

Community Impact Overview

Investment Triangle



This integrated approach encompasses all components of the Resources Investment process



Community Impact Overview

Resources

- Funding
 - Unrestricted, grants, sponsorships
- Volunteerism
 - Volunteer Center
- Advocacy
 - Public policy subcommittee
- Collaboration
 - Impact subcommittees, funding partners
- Public Education & Awareness
 - Impact subcommittees

Community Impact Overview

Focus Areas



Creating the opportunities
for a good life for all by focusing on:



EDUCATION

Helping children
and youth achieve
their potential



INCOME

Promoting financial
stability and
independence



HEALTH

Improving
people's health





HEALTH IMPACT SUBCOMMITTEE





Health Impact Subcommittee

Chair: Michael Knecht, Robert Wood Johnson Foundation

Members:

Theresa Beck, Visiting Nurse Association of Central Jersey

Patti Carlesimo, LADACIN Network

Dr. Gene Cheslock, Parker Family Health Center

Gary Engelstad, Seabrook Village

Henry Hung, Enterprise Rent-A-Car

Barry Johnson, Monmouth County Department of Human Services

Michael Meddis, Monmouth County Department of Health

Ginger Mulligan, Collier Youth Services

Helen Varvi, Prevention First

Carla Ward, Planned Parenthood of Central Jersey

Health Impact Subcommittee

Vision & Purpose



Vision

To improve people's health

Purpose

To develop, implement and measure strategic investments of resources that will lead to sustainable, long term change in the focus areas of health.

Health Impact Subcommittee Process



Step 1-Issue identification

Step 2-Issue selection

Step 3-Objectives

Step 4-Strategies

Health Impact Subcommittee

Step 1-Issue identification

- Social & Demographic report produced
- Community Leaders survey conducted
 - Nonprofit agency-67.1%
 - Government agency-12.0%
 - Private/for profit agency-3.2%
 - Corporation-10.8%
 - Individual-8.2%

Health Impact Subcommittee

Step 1-Issue identification

- Focus groups:
 - Diversity/Demographics
 - Education
 - Immigration
 - Income
 - Seniors
 - People with Disabilities
 - Health

Health Impact Subcommittee Research



Community Leaders Survey (rated very serious)

- 71.0%-Healthcare coverage/insurance (1st)
- 66.5%-Youth-substance abuse (4th)
- 62.9%-Youth-alcohol abuse (8th)
- 62.6%-Substance/alcohol abuse in schools (9th)
- 60.5%-Child abuse/neglect (10th)

- Overall Barriers
 - 61.6%-Lack of funding
 - 58.8%-Cost/affordability
 - 42.0%-Transportation
 - 41.8%-Information/knowledge of resources

Health Impact Subcommittee Research



2007 New Jersey Middle School Risk & Protective Factor Survey

- Prevalence rates for substance abuse (above the state average):
 - Alcohol- annual- 28.5%; State 25.8%
 - Alcohol-past 30 days-16.4%; State 15.3%
 - Cocaine-lifetime-.4%; State .3%

- Prevalence rates for delinquent behaviors (above the state average):
 - Attempting to steal a vehicle-1.2%; State .9%
 - Carrying a handgun-2.4%; State 1.6%
 - Taking a handgun to school-.6%; State .4%

Health Impact Subcommittee Research



2008 New Jersey High School Risk & Protective Factor Survey

- Prevalence rates for substance abuse (highest in state):
 - Alcohol-lifetime-80.2%; State 72.1%
 - Alcohol-past year-74.2%; State 63.1%
 - Alcohol-past 30 days-59.2%; State 45.9%
 - Marijuana-lifetime-39.6%; State 29.7%
 - Marijuana-past 30 days-23.4%; State 16.6%
- Prevalence rates for delinquent behaviors (above state average):
 - Attacking someone with intent to harm-12.6%; State 11.1%
 - Attempting to steal a vehicle-2.2%; State 1.9%
 - Being arrested-8.5%; State 6.5%
 - Being drunk or high at school-20.5%(highest in state); State 13.9%
 - Selling drugs-10.5%; State 7.9%
 - Taking a handgun to school-.6%; State .4%

Health Impact Subcommittee

Step 2-Issue selection



- Community Impact Issue Ranking Worksheet
 - Community Importance
 - UWMC Involvement

Health Impact Subcommittee

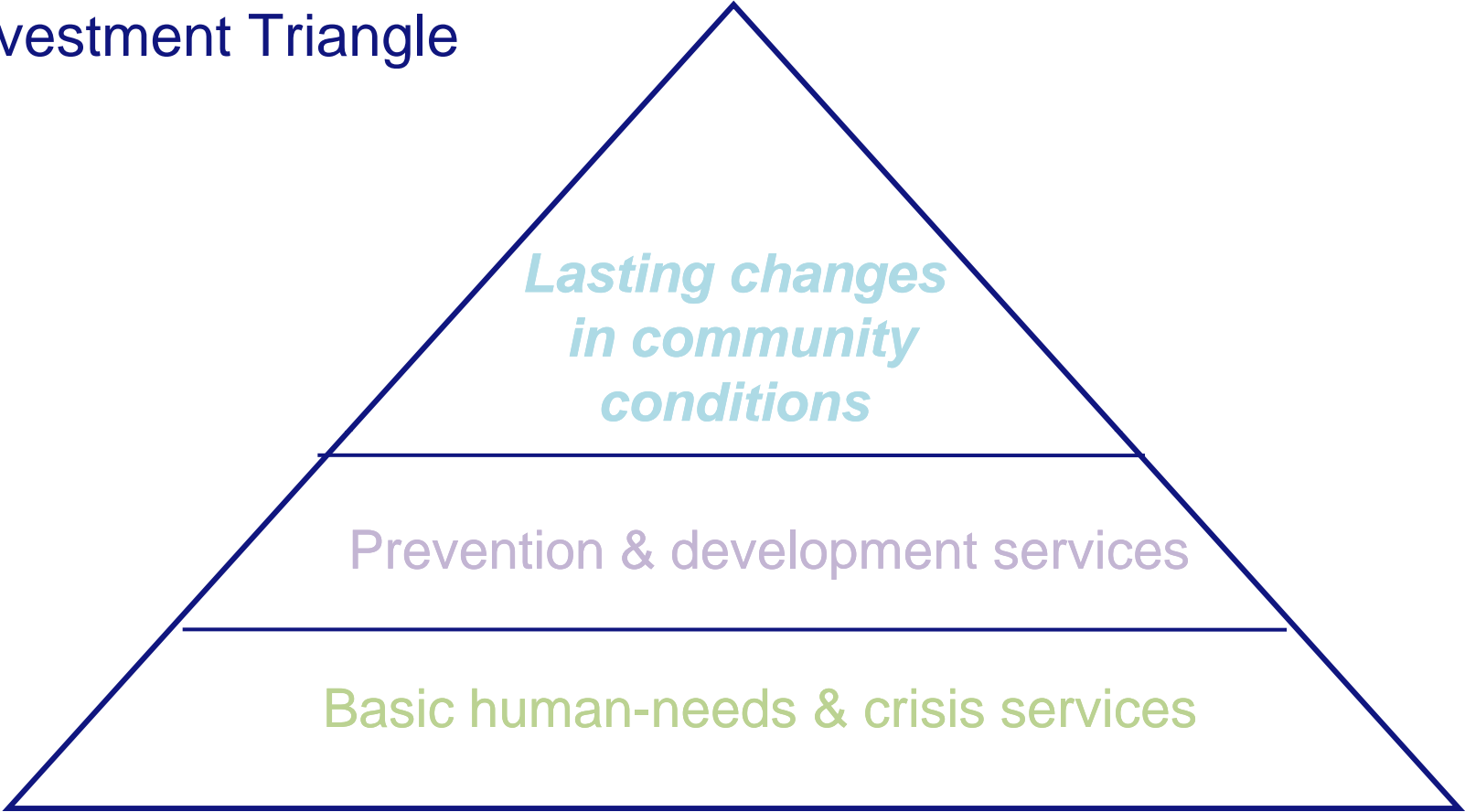
Step 2-Issue selection



1. Information and awareness of health services
2. Eligibility and access to health services
3. High risk behaviors

Community Impact Overview

Investment Triangle



This integrated approach encompasses all components of the Resources Investment process



Health Impact Subcommittee

Step 3 & 4-Objectives & Strategies

Targeted Issue: Information & awareness
of health services

Objective:

1. Connect households in need of health services with available programs

Target population (s): a) households; b) health service providers

Health Impact Subcommittee

Step 3 & 4-Objectives & Strategies

Targeted Issue: Eligibility & access to health services

Objective:

1. Overcoming barriers to ensure people receive timely, regular preventive & primary health care

Target Population(s): a) un-/under-insured children & adults, b) lower-income households

Health Impact Subcommittee

Step 3 & 4-Objectives & Strategies

Targeted Issue: High risk behaviors

Objectives:

1. Improve the health and well-being of children and their families
 2. Reduce the likelihood of youth involvement with high-risk behaviors, including:
 - Alcohol and drug use,
 - Violence,
 - Sexual activity,
 - Tobacco use,
 - Depression and attempted suicide,
 - Antisocial behavior,
 - School problems,
 - Driving and alcohol, and
 - Gambling
- *Target Population: a) High risk target population(s)/ community(s)- TBD by consideration of Risk & Protective Factors*



Health Impact Subcommittee

Search Institutes - 40 Developmental Assets

Protecting Youth from High-Risk Behaviors

	0–10 Assets	11–20 Assets	21–30 Assets	31–40 Assets
Problem Alcohol Use	45%	26%	11%	3%
Violence	62%	38%	18%	6%
Illicit Drug Use	38%	18%	6%	1%
Sexual Activity	34%	23%	11%	3%

Promoting Positive Attitudes and Behaviors

	0–10 Assets	11–20 Assets	21–30 Assets	31–40 Assets
Exhibits Leadership	48%	66%	78%	87%
Maintains Good Health	27%	48%	69%	88%
Values Diversity	39%	60%	76%	89%
Succeeds in School	9%	19%	34%	54%



NEXT STEPS





Next Steps

Get involved

- Funding
- Volunteerism
- Advocacy
- Collaboration
- Public Education & Awareness

–Contact us at 732-938-5988 or
e-mail: thearne@uwmonmouth.org or
cjagerburger@uwmonmouth.org

Next Steps

Funding Implementation Timeline

Community Impact funding cycle for
Income, Education & Health:

- October 1, 2010 – September 30,
- Focus area 1- 2011
- Focus area 2-2012
- Focus area 3-2013



Next Steps

Transition to Multi-Year Funding

All funding amounts for the multi-year grants will be subject to actual availability of funds

	2010	2011	2012	2013
Focus Area 1	Award 3 year grant	Reporting only	Reporting only	Award 3 year grant
Focus Area 2	Award 1 year grant	Award 3 year grant	Reporting only	Reporting only
Focus Area 3	Award 2 year grant	Reporting only	Award 3 year grant	Reporting only

Next Steps

Health Impact Funding



Mandatory Health Technical Assistance meeting

April 6, 2010

2:00 PM

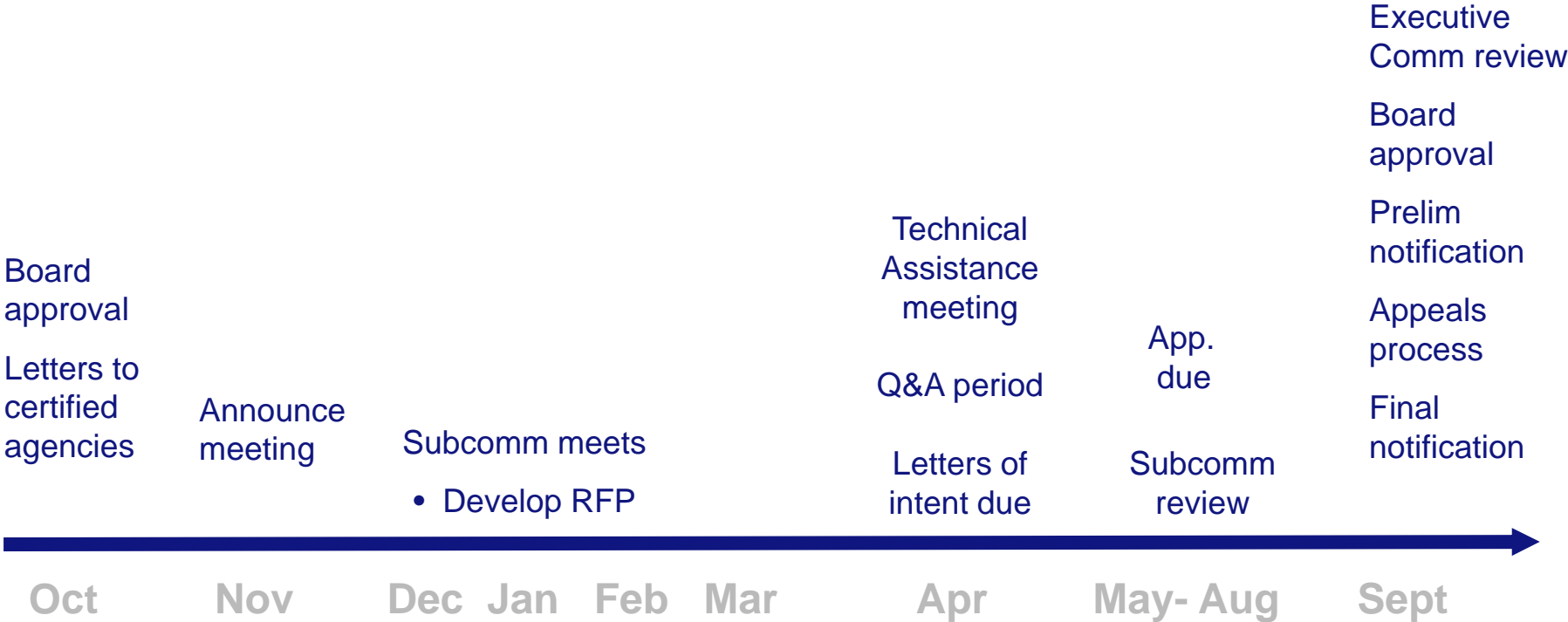
Conference Rooms C, D, E

NJNG Building, Wall Township



Next Steps

Health Impact Funding Timeline



Next Steps

Impact Funding

- Multiple proposals per agency
- Alignment with objectives & strategies
- Strong emphasis on:
 - Capacity
 - Collaboration
 - Staff will provide training/consultation
 - Lead agency will be UWMC Certified
 - Outcomes & results

Next Steps



Education announcement meeting

- November 18th
2:00-4:00 PM,
Conference Rooms C, D, E

UWMC encourages meetings with agency staff and board members to discuss Community Impact

QUESTIONS





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