

Effects of the Kaiser Permanente Community Fund on the Social Determinants of Health



GroupHealth

Summary of Findings and Recommendations for the Future

Background

In late 2004, the Kaiser Permanente Community Fund (KPCF or the Fund) at the Northwest Health Foundation (NWHF) was established with a \$28 million gift from Kaiser Permanente Northwest (KP). KP chose NWHF to administer the Fund due to its strong regional track record of effective grantmaking, its progressive leadership and staffing capacity, and its history of community engagement. Fund advisors identified the social determinants of health as the Fund's strategic focus. In 2010, the leadership of KPCF commissioned the Center for Community Health and Evaluation to evaluate the first five years of grantmaking (2005-2009) in order to identify lessons that could improve the process and impact of the Fund.

Methods

- The evaluation examined 88 KPCF grants made between 2005-2009.
- CCHE conducted a document review, Web-based survey, and interviews with grantees and macro-level informants. Macro-level informants were in positions to observe the impact of the Fund at the initiative level.
- The evaluation was driven by a set of nine evaluation questions developed collaboratively by NWHF and KP.

Description of the Grant Portfolio

The average project implementation grant was \$175,350 with a duration of two and a half years; capacity building grants were typically \$50,000 for one a half years (Table 1).

Table 1. KPCF Grant Portfolio

| Type | Number of grants | Total | Range | Average | Range (months) | Average length (months) |
|-------------------|------------------|--------------|---------------------|-----------|----------------|-------------------------|
| Implementation | 64 | \$11,222,545 | \$10,000 -\$450,000 | \$175,350 | 8 - 39 | 30 |
| Capacity Building | 24 | \$1,199,739 | \$50,000 | \$50,000 | 9-18 | 14 |
| Total | 88 | \$12,422,284 | \$10,000 -\$450,000 | \$141,160 | 8-36 | 26 |

Table 2. Social Determinants Addressed by Grants*

| | | | |
|--|-----|--|-----|
| Civic engagement and social cohesion | 67% | Health promotion and disease and injury prevention | 19% |
| Neighborhood living conditions | 44% | Economic opportunity | 19% |
| Opportunities for learning and developing capacity | 23% | Cultural customs and social norms | 18% |

*Grants may target more than one area

Findings

Movement in appreciation and expertise among grantees and the broader community. There was an increase in expertise about the social determinants of health among grantees. Ten of sixteen interviewed indicated their involvement with the Fund changed their work—either their priorities and approach or in the way they frame and communicate their work. Experiences during the grants illuminated connections across sectors, systems, and processes that affect health. Macro-level informants reported increased facility with the social determinants concepts among grantees, Fund advisors and Foundation staff, and the broader philanthropic community.

Areas of Greatest Contribution

- The greatest number of reported accomplishments was in the category of *neighborhood living conditions*; followed closely by *health promotion, disease and injury prevention*; and *civic engagement and social cohesion*.
- Thus far, the categories of *education and childhood development* and *economic opportunity* have the highest ratios of accomplishments per grant.
- Within all accomplishments, CCHE identified 85 which were policy or environmental changes. The quote to the right exemplifies one such change. Policy and environmental changes also included a landlord smoking policy disclosure bill, new state legislation on menu labeling, newly built healthy and affordable homes, and expansion of a community garden in a low-income area.

What was Sustained?

- Of all the accomplishments, 37% were sustained or were likely to be sustained (i.e., there were indicators that the accomplishment would continue beyond the grant funding period). The largest proportion based on CCHE's assessment was changes in neighborhood living conditions like improved walking and bicycling infrastructure in East Portland.
- In response to an open-ended interview question about what has been sustained, grantees described relationships, products, individual empowerment, policy gains, and access to education.

“Social determinants felt to me like what we talk about all the time, but putting a health lens on it. It’s a way of seeing health connected through it all. We didn’t use that lens as much before partnering with the NWHF and the Fund. We weren’t specifically able to talk about health and homelessness.”

-KPCF grantee

“Nothing can top the \$39 million expansion legislation. Head Start is a comprehensive program and the bill really doubled the state’s investment—3,000 more children per year. And even as things have fallen apart we have really worked to maintain and preserve that allocation.”

-KPCF grantee

Factors that Enabled Success

- Grantees attributed success to strong partnerships, grantee capacity (such as their positive reputations within communities being served), and dedicated staff time. Collaborations were especially important. Ninety-two percent of grantees reported establishing cross-sector collaborations during the grants.
- Another success factor was the NWHF's role beyond administering grants. NWHF and its staff were described as creative and effective at connecting people. Grantees appreciated their "open-door" policy, as well as the staff's support and involvement with project events. The Foundation was described as progressive, willing to take risks, and committed to engaging under-represented communities and communities of color.

Opportunities to Enhance Impact

CCHE interviewed grantees and macro-level informants about ways the Fund could improve. CCHE explored the scope of the Fund, strategies it funds, and operational issues. A majority of macro-level informants (7/11) suggested the Fund establish a focus area. There was no consensus on what that focus should be. However, one suggestion mentioned by both grantees and macro-level informants was that *economic opportunities* and *education and childhood development* would be good potential areas of focus.

Conclusions

Through the process of the evaluation, the CCHE evaluation team took away these four conclusions:

- **The Fund is impressive and making a crucial contribution.** Translation of social determinants concepts into practice is a challenge, yet critical for getting at the root causes of health inequity. Dismantling silos is the way forward for public health and the Fund is unique for its cross-sector integration.
- **Power is being shared and shifted**—from the Fund, to grantees, and to communities. Those involved with the Fund hold respect and trust in grantees and communities. This is exemplified by the Fund's responsive and flexible nature; it is the community's health priorities and strengths that drive projects.
- **Especially since social determinants of health encompass so much, a clearly articulated vision of success is needed to assess progress and success.**
- **The Fund's agenda is progressive; examine who is setting it** to better understand what (if any) biases there may be.

"A lot of it is about having the time to invest in the relationship building and coalition building across multiple issue areas and identifying linkages."

-KPCF grantee

"...trying to rank order the social determinants and which is most critical. I don't know, it's really hard. Which do you like, your heart or your lungs?"

"I do think there is a danger in funding everything. So getting some sort of ground would be a good thing. It would help us do a good job—it would help us be efficient and it would help applicants."

-Macro-level informants

Recommendations for the Future

At the request of NWHF and KP, CCHE offers considerations in six categories to support the Fund as it strives to fulfill its mission.

Scope of the Fund

- Determine what “success of the Fund” looks like using a logic model or some other tool to articulate indicators of success and the strategies that will lead to achieving them.
- Use criteria to determine the focus or breadth of the Fund, according to the vision of success.
- Promote a social determinants of health framework through proposal development, shaping expectations about outcomes and reporting, and communicating initiative-level results.

Community-defined Need

- Assess the degree to which the Fund is responding to community needs articulated in proposals.
- Continue to convene and foster collaboration among grantees to share experiences, potentially using non-traditional formats and locations.

Inequity and Power Structures

- Elevate the Fund’s position as an advocate for eliminating health inequity by continuing to promote dialogue and self-examination within the philanthropic community.
- Explore language used by the Fund and how it helps or hinders access to the Fund for grantees and communities.
- Invite members from target communities to the table for deeper engagement around how the Fund’s values translate into strategies.

Partnerships

- Consider opportunities for Kaiser Permanente’s involvement in KPCF in addition to participation in the Advisory Board.
- For KP—explore other opportunities to collaborate with the Foundation in support of KP’s mission.
- For the Foundation—highlight the unique relationship between the NWHF and KP as an effective and replicable model in the fields of Community Benefit and philanthropy.

KPCF Visibility

- Communicate impact and lessons from grantee efforts and at the initiative level.
For KP—explore implications from this evaluation internally as KP strives to increase its delivery of high-quality, affordable care to a broad population.

Operations and Evaluation

- Build on and consider formalizing the capacity-building approaches offered through KPCF. For example, KPCF could facilitate a grantee learning community as part of capacity building.
- Use this evaluation to inform a “strategic refresh” of the Fund.
- Develop an evaluation plan for assessing progress and success of the remaining life of the Fund.