

ALIGNING IN ACTION: VITA HEALTH & WELLNESS DISTRICT

- Lead organization: Vita Health & Wellness District
- Lead sector: Public housing authority
- Location: Stamford, Conn.
- Year founded: 2010
- Interview with Vincent J. Tufo, CEO, Charter Oak Communities

Health is impacted by factors outside of the health care delivery system, including housing, education, poverty, employment, food availability, transportation, and safety. Recognizing that addressing these socioeconomic determinants of health is needed to meaningfully impact health inequities, a national policy shift is taking place.

Government agencies, payers, and providers are all adopting a social determinants perspective. To effectively address these nonclinical needs, partners must work across sectors. Now, the question is how — what are the best practices for effectively aligning systems?

[Aligning Systems for Health: Health Care + Public Health + Social Services](#), sponsored by the Robert Wood Johnson Foundation (RWJF) and managed by the Georgia Health Policy Center (GHPC), is focused on learning from

stakeholders across the nation about effective ways to align these three sectors to better meet people's goals and needs.

Given variance in the local context, there is no single model or formula to align systems. However, *Aligning Systems for Health* seeks to understand commonalities that drive successful efforts to align sectors. This series examines how communities that describe their work as aligning systems are doing it around four core components of a [theory of change](#) that RWJF and GHPC are testing: purpose, governance, data, and sustainable financing mechanisms.

A decades-long relationship between Stamford's public housing authority, Charter Oak Communities, and the local health system, Stamford Health, enabled a land swap that ultimately led to the revitalization of that city's West Side neighborhood through a collective-impact approach. A thriving, health-themed neighborhood is visual proof that addressing the social determinants of health can close health disparities and improve personal well-being.

LOCAL CONTEXT

Ten years ago, both Charter Oak Communities and Stamford Health were at a critical juncture and independently committed to revamp their organizations in response to years of underinvestment and a changing marketplace. Leadership at the time had already established a collaborative relationship and were forward-thinking to envision that strategically aligning each organization's plans for development around a joint mission could create greater collective impact.

Charter Oak Communities sought to completely redevelop obsolete, Depression and postwar era public housing into new mixed-income communities with the assistance of federal Housing and Urban Development (HUD) grant programs, like HOPE VI, along with similar assistance from the state of Connecticut. At the same

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time, Stamford Health made the commitment to remain in the West Side neighborhood, reinvest, and build a new state-of-the-art medical center.

To move from high-rise to townhome-style housing, Charter Oak needed additional lower-density land. The hospital needed space to accommodate new development, allowing for construction to proceed while keeping the existing hospital operational. The two organizations created a money-free land swap, with the health system gaining an old public housing site next to the hospital, while the housing authority gained hospital-owned land elsewhere in the neighborhood that could be redeveloped.

“We basically said, it’s all about land. You need this acreage and we need that acreage. Let’s just total it all up and agree that we’re simply going to swap the deeds on these properties,” said Vincent Tufo, CEO of Charter Oak Communities. “Once we did that and we really committed ourselves, that was really the beginning of the Vita Health and Wellness Partnership. But it took all of 10 years to be at the point where we could consummate the deal.”

PURPOSE

At about the same time Charter Oak Communities and Stamford Health were committing to independently repositioning their businesses, the Affordable Care Act provided additional incentive to work collaboratively to create broader community uplift around a shared vision.

The first community health needs assessment (conducted jointly by Stamford Health and the Stamford Health Department) was conducted in 2011-2012 and identified the community immediately surrounding the hospital as among the city’s neediest and having the relatively least healthy residents. The needs assessment served as a call to action, galvanizing multisector partners to begin meeting regularly that same year.

A grant from HUD, under the Sustainable Communities Program, provided the resources to conduct an extensive community-based strategic-planning process, a number of neighborhood studies, and stakeholder engagements that resulted in a strategic vision that has guided the work ever since. The Vita Strategic Vision became a comprehensive, place-based approach that addresses not only the availability of quality affordable housing and safe recreational space, but also access to medical care, nutritious food, and educational services.

“Having a clear set of goals or standards that the community holds in common is in and of itself a value,” explains Tufo. “Our language, our connections, have certain assumptions built into them, and not incidentally, our funding community is insisting upon more effective cross-sector collaboration.”

DATA

Data is available on a program-by-program basis. Vita Partnership is committed to long-term quantitative and qualitative assessment. In addition to the community health needs assessments conducted by Stamford Health, Vita creates annual reports for each program, which are shared through presentations and multiple learning exchanges.

Mixed-method evaluations have become a general practice, using data from a variety of sources, to broadly examine what really happened, but also why it happened, how it happened, and how things can be done better.

“We think that this approach is key to doing any measurement of the social determinants of health,” says Tufo, “because what you’re not necessarily doing is expecting that a particular intervention, let’s say food security, is going to have a measurable effect over a reasonable period of time as to whether or not children become more effective learners.”

FINANCING

Charter Oak Communities acts as the fiduciary organization, providing oversight and administration for contractual arrangements and grants received by the Vita Partnership, and for any staff that are hired.

Charter Oak Communities and Stamford Health fund the backbone operating budget of several hundred thousand dollars that covers general administration, project direction, fund raising, and communications services. All program funding comes from grants.

“We don’t currently have a solution for alternate sources of funding for the backbone function,” explains Tufo. “Fortunately, right now both organizations are able to maintain the current level of funding for backbone activities. We’d like to expand this role, but short of getting a municipal funding source or another large institutional partner, right now we’re pretty much status quo.”

GOVERNANCE

As the Vita Partnership has developed a more expansive footprint — expanding from the West Side to a larger citywide initiative — it recently updated its memorandum of understanding with participating organizations and delineated the three tiers of participation — the Steering Committee, the Program Tier, and the Community Tier.

The Vita Partnership uses a steering committee structure, having made an intentional decision not to incorporate as a legal entity. The Steering Committee oversees the strategic direction and approves projects and the way the collaborative fulfills its responsibility. The Steering Committee consists of two representatives from Charter Oak, two from Stamford Health, key staff, and a rotating community representative.

The Program Tier consists of about 25 regular, active members. These organizations participate in critical Vita activities, including a monthly learning exchange program, collaboration on individual programs, as well as outreach and fundraising on a program-by-program basis. These organizations are invested in collective impact, “completely committed” to addressing the social determinants of health, and capable of building bridges across different sectors. Program Tier organizations are reflective of the cross-sector approach and include executive directors of organizations representing human services, behavioral health and substance use, physical health, early childhood education, public education, employment, housing, municipal government, youth development, and public health.

“Increasingly what keeps, and further knits us together, is that we are involved in a number of programs where multiple organizations routinely work together collaboratively on specific programs,” says Tufo. “We also tried to encourage organizations to consider other types of arrangements, some of which are structured partnerships with program commitments, but there are also unstructured relationships where we see organizations naturally gravitating toward each other.”

Finally, the Community Tier consists of heavier representation from community-based organizations providing direct community assistance but that are not as regular in their participation.

INSIGHTS FROM THE COLLABORATIVE

Building trust and taking the time to conduct relationship-building are central to the success of the Vital Partnership. Stamford Health and Charter Oak Communities spent 10 years building relationships before they could consummate the land swap, and it has been another 10 years of aligned partnership, a shared vision, and coinvestment that has enabled the transformation of Stamford’s West Side.

“There was an underlying lack of trust between the hospital and the community. There was a sense that the hospital had abandoned the community and the community was somehow a threat to their livelihood,” explains Tufo. “There were barbed wire fences and guard towers in the hospital parking lot looking over the neighborhood, which sent a message to this community that we are in your neighborhood, but we are not part of your neighborhood.”

Breaking down the distrust and the cynicism was the first part, followed by movement from a transactional connection to a strategic connection. Partner organizations are following a similar path.

Family Centers, a Vita Health & Wellness partner, is the largest human services agency in Stamford and in Greenwich and has been around for 120 years. When they did internal strategic planning, they adopted the Vita core values as their strategic vision for the organization.

“The Vita Bible is now becoming their operating playbook,” says Tufo. “It is working externally at the Community Table as well as internally within many of the organizations as they are embedding the Vita vision into their core principals. That takes time, but you can imagine over the course of five, 10 years, they might embed the Vita concept into practice.”

INSIGHTS FOR ALIGNING

- The two parties were brought together by a shared sense of urgency — each needed the other’s land.
- New policy opportunities — in the form of the Affordable Care Act — gave the parties further incentive to work together.
- Vita Health and Wellness Partnership deliberately chose a governance model that did not create a corporate entity, showing that successful collaborations can be governed in multiple ways.
- Vita points out the importance of having strong relationships through cross-sector alignment to take quick, multisector action and manage through a crisis such as COVID-19.

ALIGNING IN ACTION DURING COVID-19

“The question is, do you have the foundation to adapt those relationships to effectively support each other through this crisis?” says Tufo. “Additionally, we know many institutions are more insular. How do you take advantage of this time, the mutual need, to break down some of those insulators? What is it that you have that is of value to the other party? Is it information? Is it relationships with the community?”

The Vita Personal Protective Equipment (PPE) Initiative provides PPE to all of the front-line workers in nonprofits and civic agencies in Stamford during the pandemic. The Vita Partnership received a private donation that enabled them to import directly from a reliable, midlevel supplier in China. The initial funding enabled purchase of a baseline inventory that will be resold at cost to any of the agencies that qualify. Those funds will then be used to replenish supplies as long as needed.

“This need came out of the Vita Community Table,” says Tufo. “We heard from many of our partners that, even though they are doing all of the essential work in terms of maintaining their community connections, providing food support at food pantries, they weren’t able to acquire PPE. This program allows us to help protect the workers and the clients of our partners during this time and helps keep people out of the hospitals by preventing the spread of the virus.”

ALIGNING SYSTEMS FOR HEALTH

Health Care + Public Health + Social Services

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