

PROSPER Community Benefit & Hospital Outreach Network Projects (DRAFT)

The 2010 Affordable Care Act included broad provisions for a "community benefit" requirement for nonprofit hospitals. The IRS recently issued new rules and regulations that encourage collaboration between hospitals and other community-serving organizations. These changes create an opportunity for implementing and studying new, scalable hospital outreach practice models. The PROSPER Community Benefit project is designed to evaluate a potentially far-reaching practice model supporting hospitals' cost-effective, wellcoordinated, and sustained quality implementation of proven community outreach services.

Award-Winning PROSPER Can Help**

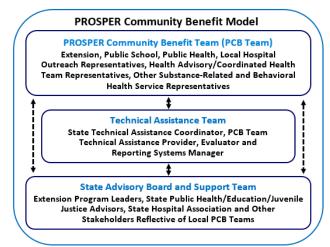
Evolving from a 25-year program of research funded primarily by the National Institutes of Health, PROSPER (<u>PRO</u>moting <u>S</u>chool-community-university <u>P</u>artnerships to <u>E</u>nhance <u>R</u>esilience) is an innovative, empiricallysupported program and service delivery model that can serve as a "backbone organization" to help fulfill community benefit requirements for hospitals.

The National Institutes of Health has funded extensive and rigorous research that has shown that youth from PROSPER communities do better on a number of positive outcomes (e.g., reduction of substance misuse and behavior problems, other indicators of positive development) than youth from communities where similar programming may be offered, but without the PROSPER delivery system. In part, this occurs through positive changes in families, peer social networks, and improvements in adolescent socioemotional skills. PROSPER is a cost-effective system that not only uses proven programs and services to reduce health-risk behaviors, but also facilitates capacity-building at the community level to ensure that services are offered year after year.

A PROSPER Community Benefit project is expected to advance adolescent behavioral health, and family health more generally, by (1) developing and testing innovative and cost-effective hospital outreach practice models; (2) working in underserved and understudied rural communities; (3) studying outreach strategies and factors associated with quality service and sustainability, and; (4) evaluating public health impact of preventive services.

PROSPER Backbone Organization Structure

There are three primary structural components in the project Model, represented here by the *PROSPER Community Benefit (PCB) Teams*, the *Technical Assistance Team*, and the *State Advisory Team*.



The PCB Teams

The PROSPER Community Benefit Model assists teams of local stakeholders to efficiently and effectively: (1) build community awareness about proven programs and services; (2) oversee the implementation of universal family and school evidence-based programs, including a Family Health Self-Management Program; and (3) coordinate referrals to additional programs and services for youth and families that might need them.

^{**} PROSPER has been recognized by two review panels known for the rigor of their standards of evidence: Top Tier and Blueprints for Healthy Youth Development. The Social Impact Exchange has selected PROSPER for its index of top nonprofits increasing social impact, the S&I 100. PROSPER also has received many other nationallevel awards and recognitions; it is recently featured in HHS's "Who's Leading the Leading Health Indicators." (http://content.govdelivery.com/accounts/USOPHSODP HPHF/bulletins/10a3de0)

Teams support these efforts on an ongoing basis to produce a population- level impact in their community. Basically, teams focus on strategies to organize, build capacity, and scale-up the delivery of their programs and services with quality, and to sustain them long-term. High-level technical assistance supports these team efforts.

The Technical Assistance Team

Each PCB Team is assigned a Technical Assistance (TA) Provider who provides direct on-going, proactive technical assistance to help them avoid pitfalls, address challenges, and sustain their effort. TA Providers work with their assigned team, as well as coordinate with one another, to share experiences and information about relevant prevention science.

The State Team

TA Providers and communities are supported by the State Advisory Board and Support Team, who oversee and direct the entire effort. PCB Team Leaders and TA Providers report on various aspects of their work so that data can inform both general (of benefit to all teams) and targeted assistance (needed by individual teams). As a result, the State Team is able to pinpoint types of support needed and provide "just in time" assistance so that PCB Teams experience success and are motivated to continue working.

Benefits of Using a PROSPER Approach

By expanding the current PROSPER Partnership Model, adding local hospital outreach, public health, and primary care service providers, we expect to increase positive adolescent and family health impacts, while addressing the community benefit requirements of the ACA.

With the coordinated approach that will be used with PCB Team members and other local service providers, the tailored TA provided to the teams, and the support provided by the State Team, we anticipate that, compared to traditional collaborations offering empirically-supported services, PCB Teams will:

- Be able to get more youth and families to participate in the service offerings,
- Develop a coordinated approach to providing referrals through the use of an online Family Outreach Resource Guide,
- Promote the use of more high quality services,

- Implement services with greater fidelity,
- Be able to sustain these long-term.

Summaries of a range of expected benefits to individual stakeholder organizations are available.

Prior research suggests PROSPER's effectiveness and benefits are due to a unique combination of elements, including:

- Maximization of cross-site learning opportunities/learning communities,
- Mobilization and networking of teams, and
- A benchmarking process that uses data to guide decisions about the type of technical assistance needed. Overall, the backbone organizational structure of PCB Teams, TA Providers, and the State Team provides *support and accountability* to achieve the goal of implementing and sustaining empirically-supported services in the community.

Current Points of Focus

The PROSPER partnership group is developing a twopronged approach to PCB efforts. First, PROSPER scientists are planning to evaluate the PROSPER partnership approach to a community benefitoriented hospital outreach practice model. For example, they are planning to collect data on a range of youth outcomes associated with healthy development, as part of a large-scale study comparing the PROSPER Community Benefit approach to traditional outreach collaborations and services.

Second, a PROSPER Network Organization has been established that will support the *development of a hospital outreach network in collaboration with state and local departments of public health.* Each participating state will begin with 1-3 leading hospitals having a one or two year capacity-building phase that evolves into a pilot implementation phase with 2-3 community sites.

For more PROSPER information see: www.prosper.ppsi.iatate.edu

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