

CASE STUDY REPORT

February 2019

Universal Community Planning Tool (UCPT) Project

Garrett County Health Department (GCHD)

INNOVATION CHARACTERISTICS

New or creative



Co-produced



Creates value



Replicable



Open source technology



The innovation team at the Garrett County Health Department (GCHD) in rural western Maryland developed the Universal Community Planning Tool (UCPT), a digital platform that utilizes open source technology to help communities expand engagement in community health planning. The UCPT enables multi-sectoral partners and community members to engage in strategic community planning and qualitative data collection, with the goal of ensuring transparent and data-driven decision-making and improved health equity. GCHD has used their own version of the tool, the Garrett County Planning Tool, to increase community engagement in health improvement planning, expand the types of data collected for community health assessments, and improve the representativeness of data across the community. The UCPT is built on an open source platform, so it can be used by health departments and other agencies to develop, customize, and implement a digital collaborative within their jurisdictions. The GCHD innovation team created the UCPT with funding and support from the Robert Wood Johnson Foundation (RWJF) through the Public Health National Center for Innovations (PHNCI) Public Health Innovations Implementation Grant Program.

Background

When developing a community health assessment in Garrett County, Maryland, it became evident to staff at GCHD that existing data did not comprehensively reflect the complexities of the local public health issues. They recognized that the agency's community health assessment was not representative of all residents and experiences in the county, which raised concerns about the resulting strategies in the community health improvement plan. In response, GCHD staff sought to develop novel ways to engage more people – partners and community members – in community health assessment and planning processes. They realized that traditional outreach approaches, such as public meetings held during common working hours, were not necessarily capturing the input of all county residents; they were particularly concerned about engaging low-income residents who may face barriers such as a lack of transportation or lack of time

due to having multiple jobs. The team recognized that an online platform could capture more diverse perspectives and priorities, including the needs of vulnerable populations that may have been underserved or overlooked by historical data collection efforts. They also wanted community members to know that the health department valued their input and experiences, and felt that an online platform would increase transparency and ultimately build trust between community members and governmental public health through robust community engagement.

Key Activities

GCHD created the Garrett County Planning Tool, available at MyGarrettCounty.com, to expand engagement in community health planning and to also capture richer qualitative data on the public health-related needs and experiences of all residents within the county. Through this enhanced engagement, GCHD sought to develop more accurate community health assessments and create more equitable community health improvement plans that comprehensively reflected the needs of all county residents.

The Garrett County Planning Tool has had marked success in increasing community engagement in public health planning. During its initial implementation, GCHD successfully engaged over 25% of the county population, who actively used the tool to discuss local health issues; before the creation of the Planning Tool, less than one percent of the Garrett County population participated in traditional health planning. The tool has become a community focal point for public health communications and broad community conversations related to social determinants of health.

Universal Community Planning Tool (UCPT)

With funding from PHNCI, GCHD developed the Universal Community Planning Tool (UCPT), an open source model that other communities can easily implement to increase community participation in health planning activities. The UCPT is a template of the Garrett County Health Planning Tool. Based on an online platform, the UCPT guides agencies to increase engagement of community partners and residents in public health planning activities. The UCPT is built in the popular content management system, WordPress, and its associated system, BuddyPress. Two BuddyPress plugins support the UCPT framework—a strategy card and raw data module—which are designed to integrate into WordPress.

The strategy card module of the UCPT enables stakeholders, including agency planning partners and community residents, to collaboratively identify goals and strategies for addressing community issues of interest. The strategy card module enables the creation of action groups, through which stakeholders track individual efforts towards addressing identified goals. Action groups can be public-facing or private, which creates spaces for both open community discussion with community residents, as well as deliberate, multi-sectoral collaboration among planning partners.

INNOVATION FOCUS

Topic Areas

Health Equity; Strategic Community Planning; Capacity Building

Summary

The UCPT is a framework built on open source software that health departments and other agencies can use as a tool for increasing community participation in strategic community planning. The UCPT is modeled after the Garrett County Planning Tool.

Location Served

The Garrett County Planning Tool serves Garrett County, Maryland and neighboring counties in Maryland, Pennsylvania, and West Virginia

Partners

- Community residents
- Local planners from other agencies

Key Characteristics

- Open community news feed
- Open source systems
- Transparent government planning
- Comprehensive community representation in decision making

Target Audience

- Audience: organizations delivering public health services
- End users: community members and multi-sectoral partners

The raw data module of the UCPT is the data tracking mechanism that multi-sectoral planning partners can use to focus on key performance indicators and track hyperlocal data. This creates a universal data system within the UCPT that integrates stakeholders in public health and across agencies to provide them access to health-related data, which can be used to track the progress of their strategies and inform service delivery. The raw data module includes tools that support hyperlocal data collection, which are metrics reported by various community stakeholders that operate local programs and initiatives.

In its design, the UCPT is a customizable framework that other agencies can adopt and adapt to meet their own unique community's needs. The strategy card and raw data module plugins designed by GCHD use the General Public License (GPL), which ensures that they can be copied and modified by any user.¹ Thousands of other plug-ins exist through WordPress and BuddyPress that organizations can use to further customize the tool and tailor it to their community's needs.

Implementation Experiences

GCHD's experiences with implementing the Garrett County Planning Tool and then designing the UCPT for broader replication provided some lessons learned. These included:

Building Technological and Communications Capacity. To prepare to implement the Garrett County Planning Tool, GCHD updated their communications infrastructure. Most notably, they established a digital presence by becoming engaged on social media and developing digital marketing and branding campaigns. This was a critical stepping stone that prepared GCHD for robust public engagement on a digital platform, since they had historically relied on traditional communication mediums such as newspaper and radio.

Identifying an Appropriate Content Management System. When GCHD first began looking into options for digital community planning, the available options were prohibitively expensive for a rural community. Further, there were no open source software options designed for public health or population health initiatives. GCHD reviewed the most popular content management systems available and ultimately chose WordPress because it was open source and therefore easy for their community to adapt and modify and it would be easy for other communities to replicate. Many other public health agencies use WordPress, so they extensively evaluated the websites of other collaboratives and public health organizations in their region and beyond to inform their own website development. After the Garrett County Planning Tool had gone live, GCHD chose to add BuddyPress, an extension of WordPress, as a way for users to form action groups for discussing specific health topics of interest.

Using Open Source Software. The use of open source software is a key promising practice in this innovation. Open source processes ensure that any community can build their own planning tool, as the UCPT framework is open source and available for download.

Staffing. Deployment of the planning tool, including installation, launch, and maintenance, may require varying levels of staff support. At GCHD, two staff developed, launched, and continue to maintain the Garrett County Planning Tool. One individual, a Strategic Health Planner, was responsible for founding the idea and ensuring diverse representation, while the other individual, a Public Affairs Specialist, was charged with developing the social and digital media aspects of the initiative. Through their combined technical skills and commitment to equity, this dynamic team designed and implemented the innovation.

¹ Frequently Asked Questions about the GNU Licenses. GNU Operating System. <https://www.gnu.org/licenses/gpl-faq.html#WhatDoesGPLStandFor>. Created 14 September 2018. Accessed 1 November 2018.

Engaging Community Partners. The Garrett County Planning Tool engages planning partners who contribute to developing strategies and tracking shared data. The end users of the UCPT are any community members who want to be involved in public health decision making and engage openly and transparently with health planners. Ideally, the people using this tool should be those that are most affected by different public health issues and those who are most influenced by the health department's work. End users range from lay community members to officials in other sectors, and they may be involved with initiatives in their county or collecting and reporting on local data. This allows for organizations across different sectors to share data in one centralized place and connect with multisectoral partners, such as businesses and other private sector groups.

Addressing Implementation Challenges. The overarching challenge in designing and implementing the Garrett County Planning Tool was resistance to change, largely because stakeholders tend to be concerned about how they might be impacted if a traditional process changes. To address potential skepticism among internal health department staff and the broader community, GCHD purposefully shared results with all parties involved and clearly articulated ways in which various stakeholders would benefit from the UCPT and expanded stakeholder engagement. As more aspects of the tool were deployed and people became increasingly familiar with the concept, the resistance diminished over time.

Cultivating Broader Engagement. GCHD decided on a soft launch for the Garrett County Planning Tool, which led to the quick adoption and utilization of the platform among internal staff and the community members with whom they directly interacted. After approximately one hundred people – including internal staff, planning partners, and community members – had the opportunity to engage on the platform, GCHD launched the Garrett County Planning Tool publicly in December 2016. The public launch led to broader engagement among planning partners and community residents.

Garnering Support for Innovation. While it is critical for agencies to have the technological knowledge and expertise to implement an open source software, the innovation will only flourish with staff champions – those who are fully dedicated to the successful integration of the tool into the agency's standard practice. Further, organizational leadership needed to embrace and invest in the innovation, beyond the team charged with managing the innovation. The grantees described having leadership that was open to the innovation and provided an opportunity to launch the Garrett County Planning Tool and develop the Universal Community Planning Tool framework to support its replication.

Considerations for Replication, Adaption, and Adoption

An essential component of the UCPT is the use of open source software. Open source software mitigates the cost of replication, and enables adoption among communities that have limited technological support. GCHD developed an Action Plan for Agency Readiness, a document that guides communities through questions about their agency's readiness and likelihood of success with implementing the UCPT, based on factors such as their culture, personnel, and infrastructure.²

Since the innovation itself is a tool that other organizations can implement, replicability is not dependent upon any unique staffing positions. What is required are staff champions – those who are passionate about systems change, increasing engagement in health planning, and ensuring health equity. GCHD has two primary staff that oversee the Garrett County Planning Tool. One person offers insight into community health planning processes, which provides them with the skills to identify trends or gaps in data and develop solutions; this was critical to conceptualizing the innovation. The other person offers the technical skills in digital and social media design and implementation, which

² Action Plan for Agency Readiness Worksheet Activity. Equity Engage. <https://equityengage.com/action-plan-for-agency-readiness-worksheet-activity/>. Created 3 August 2018. Accessed 10 October 2018.

are imperative to drive the innovation. Additional personnel that could enhance and accelerate the adoption and adaption of the tool include a software developer, a marketer, or a community implementation coach.

The UCPT was developed and implemented in the context of public health, but GCHD emphasizes that it could be applied in other sectors to support community engagement in strategic planning efforts. The open source format of the UCPT framework is highly structured yet flexible to local needs and priorities, so lay community members and health department partners can engage at any pace on the platform.

Results

The abundance of individual users, topic-specific action groups, and hyperlocal data converge to create a resource that can inform public health decision making from a broad community perspective, in contrast to the narrow perspective of the limited actors previously included in community health improvement processes. GCHD uses a live-work-play model for engaging community members, meaning that they involve residents of Garrett County, Maryland in addition to people from surrounding counties in Pennsylvania, Maryland, and West Virginia. As of December 2018, GCHD has achieved the following through their own Garrett County Planning Tool:

- 27,240 individual user records (profiles) created, including those outside of traditional service provision
- 1,975 individuals engaged in community health planning through action groups
- 13,943 discussion posts and activity updates
- 145 action groups on community topics, 122 of which are public-facing and have multi-sectoral collaboration
- 576 hyper-local measures compiled to track progress on health improvement strategies
- 138,000+ page views
- 54.4% of total website traffic in 2018 was from new users
- Used data collected by multi-sectoral action groups on the tool to inform the community health improvement plan, published March 2018

The tool has encouraged cross-sector collaboration. For other entities that seek to replicate the UCPT, results will vary depending on how users leverage the partnerships formed and the data collected. The UCPT can be used to inform planning strategies for public health, as well as other sectors, as additional data points are captured. For example, Garrett County had not historically monitored uptake of adolescent well-child checks until they decided to track that measure on their planning tool. Upon collecting the data, they discovered that their county health department ranked lowest in the state on adolescent well-child checks. Now that the issue has been identified, the health department has undertaken a variety of initiatives to measure their progress on adolescent well-child checks.

The successful development and deployment of the UCPT has motivated GCHD to explore other opportunities to use informatics to inform and improve organizational processes. They are interested in leveraging data analytics to extract demographic information, like age and gender, to develop demographic profiles, as well as psychographic information, such as attitudes, interests, and preferences, to develop psychographic profiles on tool users. It is expected that this information may inform the state of health equity in their community. For example, an analysis of user data identified that the most popular mobile device among active tool users was a \$20 smartphone, which is a possible indicator or proxy for assessing health equity. Through such data analytics, organizations that deploy the UCPT can develop a data-informed strategy to address equity concerns in their respective communities. Further, because of the breadth of engagement with the tool, GCHD has developed a split analytic model with two tracks: first, there is a generalized track that aggregates all of the data gathered through the Planning Tool, and then there is a localized track that aggregates data from Garrett County and its surrounding communities.

The UCPT has achieved national recognition. For their work on the planning tool, GCHD was a 2017 Culture of Health prize winner from the Robert Wood Johnson Foundation.³ This provided a national platform by which GCHD could promote and market the UCPT. GCHD also received a Promising Practice award from the National Association of County and City Health Officials for the tool, particularly due to its use of open source software and its focus on addressing equity through broad community engagement.⁴ Upon replication of the UCPT, they aspire to be recognized as a Model Practice.

Next Steps

GCHD obtained additional funding from PHNCI and the Robert Wood Johnson Foundation for a replication learning community, through which five health departments have replicated the UCPT. The learning community has allowed these agencies to assess the technical capabilities of the tool and its impacts on health equity practices in other jurisdictions. Through this replication pilot, GCHD has developed additional tools and resources to support future replication of the UCPT. GCHD is working with PHNCI to further support the implementation of the UCPT in other communities. They are further considering additional avenues for innovation diffusion within their national partnerships and exploring other grant opportunities to support replication of the tool in other communities, including opportunities outside the scope of public health.

GCHD continues to share their work on the UCPT at national conferences and invite other agencies and organizations to implement the UCPT. GCHD encourages other organizations to expand on the current version of the tool and add new foundational plug-ins beyond the core strategy card and raw data modules. Because the tool was conceptualized as a platform for increasing equity, the UCPT has been made accessible, via open source software, to communities everywhere regardless of resources.



RESOURCES

Garrett County Planning Tool

The original tool for Garrett County and surrounding counties in Maryland, West Virginia, and Pennsylvania

- ▶ www.mygarrettcountry.com

EquityEngage

The online replication portal for the Universal Community Planning Tool Project

- ▶ www.equityengage.com

GitHub.com/equityengage/UCPT

Directly download the most recent open source UCPT release

- ▶ www.GitHub.com/equityengage/UCPT

Action Plan for Agency Readiness

A worksheet to help determine whether your organization is prepared to deploy the UCPT

- ▶ <https://equityengage.com/action-plan-for-agency-readiness-worksheet-activity>

³ Garrett County, Maryland – 2017 RWJF Culture of Health Prize Winner. Robert Wood Johnson Foundation.

<https://www.rwjf.org/en/library/features/culture-of-health-prize/2017-winner-garrett-county-md.html>. Accessed 8 November 2018.

⁴ Garrett County Health Department Receives National Award and Recognition for Innovative Practice to Improve Health Equity and Stakeholder Engagement. Garrett County Health Department. <https://garretthealth.org/garrett-county-health-department-receives-national-award-and-recognition-for-innovative-practice-to-improve-health-equity-and-stakeholder-engagement/>. Created 29 August 2018. Accessed 10 October 2018.

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