Collaborative Cottage Grove
Case Study
Greensboro, NC
2018
The Funders Forum on Accountable Health is a collaborative at George Washington University’s Milken Institute School of Public Health that works to advance accountable communities for health (ACH) models by promoting dialogue and catalyzing change among public and private funders of ACH efforts across the country.

The Forum is a common table for funders of ACH efforts to share ideas and experiences, explore potential collaborations, support common assessment approaches, and build a community of practice.

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Acknowledgements

The Funders Forum on Accountable Health is supported by the following foundations: Blue Shield of California Foundation, The California Endowment, Episcopal Health Foundation, The Kresge Foundation, Robert Wood Johnson Foundation, and W. K. Kellogg Foundation.
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Accountable Communities for Health (ACH) are community-based partnerships formed across sectors to focus on a shared vision and responsibility for the health of the community. They pursue an integrated approach to health that focuses not only on the clinical setting, but also on how the broader community can support health care’s “Triple Aim” of better care for individuals, better health for populations, and lower health care costs.

The Funders Forum interviewed leadership from ten ACH sites in order to better understand the various approaches to governance structure, portfolio of interventions, investments in technology, funding sustainability strategies, and anticipated short- and long-term outcomes of their ACH efforts.

The purpose of this report is to provide an in-depth overview of the Collaborative Cottage Grove in Greensboro, NC. We wish to thank all the participants in this case study.

Reports on all ten case studies are available on our website at accountablehealth@gwu.edu.

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Collaborative Cottage Grove

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What is Collaborative Cottage Grove?

Collaborative Cottage Grove, based in Greensboro, North Carolina, is a resident-led coalition of local government agencies, health systems, social service providers, researchers, and housing advocates committed to: the transformation of health, equitable community development, and inclusion of cultural diversity.1

The Cottage Grove neighborhood has a median income of $12,000; over 40% of residents are uninsured, and over 80% of the community lives in rental properties, many of which are unsafe due to mold and other health hazards. The city of Greensboro itself has the highest eviction rates in the state and is ranked seventh nationally. The lack of safe and affordable housing, combined with high rates of asthma and other health risk factors, has galvanized the community into action and resulted in local and national grants used by the group to invest in building trust among the community partners; develop a framework for working together; document how substandard housing contributed to high asthma rates; conduct a successful home health assessment pilot to reduce asthma rates; pass a city bond to fund housing improvements; find a developer to invest in refurbishing a large rundown housing complex; and introduce new programs for addressing food insecurity in collaboration with a new community health center. Today, Collaborative Cottage Grove is engaged in a myriad of interventions, each with unique funding streams that drive towards the same vision: improved health and quality of life for Cottage Grove residents, achieved through addressing resident-led community priorities.

Origins of Collaborative Cottage Grove

Community leaders in Greensboro, NC have long recognized that substandard housing was having a negative impact on residents’ health and quality of life. In 1989, the Greensboro Housing Coalition (GHC) was established to empower people with low and moderate incomes to live in safe, fair and affordable housing through services that help prevent homelessness and foreclosures and increase access to healthy homes. In 2014, their Healthy Homes department began pursuing grants to work at the intersection of housing and health. At the same time, a doctor in the community had a dream to build a clinic that was in a neighborhood that could support health versus one that enabled a sedentary life, that didn’t feel safe, and didn’t have sidewalks or parks or many places to buy healthy food. And a community activist had a vision for a purpose built community. As these visions and partners converged, the group realized it would be helpful to have a health system involved. The local health system, Cone Health, was interested in participating and based on past experiences, realized it would be important to approach collaboration by becoming a part of the community and understanding and supporting their priorities versus being the helper sweeping in with the answers. Community input combined with survey data led the coalition, now known as Collaborative Cottage Grove, to initially focus on linkages between poor housing and asthma, a focus that remains a priority. They have subsequently received a cascade of public and private grants that have empowered the community and helped them expand their work and their partners in pursuit of healthy communities by addressing social determinants of health.

Governance Structure

Collaborative Cottage Grove embraces a decentralized governance structure, with each organization that receives a grant taking the lead on managing and organizing activities as necessary. Resident engagement and input is a key part of the Collaborative Cottage Grove effort. The Greensboro Housing Coalition has hired a project coordinator to regularly connect with partners and residents and help align the work of the clinical and social services providers and the community.

Today, the Collaborative engages an array of partners, including the Greensboro Housing Coalition, New Hope Community Development Group, Mustard Seed Community Health clinic, Cone Health, Guilford County

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Department of Health and Human Services, Hospice and Palliative Care of Greensboro, Greensboro Parks and Recreation, Legal Aid North Carolina, University of North Carolina at Greensboro (UNCG), City of Greensboro, a Cottage Grove resident’s association, and other local nonprofit organizations.

Recently, partners from UNCG created a tracking tool to assess working group progress, seeking to measure Collaborative Cottage Grove’s processes, such as: community involvement, new partnerships, representation from limited English proficient groups, and work progress. Resident-led community action teams inform partners’ priorities, and partners in turn seek out data to validate those priorities, and implement program activities.

Funding Enhanced Partnership and the Ability to Leverage Data

In 2014, the Greensboro Housing Coalition partnered with Cone Health, UNCG, and other nonprofit and community organizations to begin the Asthma Partnership Demonstration project. This project was made possible through support from The Kresge Foundation, the Community Foundation of Greater Greensboro, Cone Health, and Triad Healthcare Network. The project engaged partners across sectors in an effort to address asthma triggers in the home to improve children’s health and decrease medical events related to pediatric asthma. The program included asthma education in the home, elimination of asthma triggers through repairs, and introduction of education about cleaning regimens. The pilot enrolled 41 families and ultimately showed that these interventions had a positive effect on lessening the impact of child asthma on family lives and activities.\(^2\) The Asthma Partnership Demonstration project was a catalyst for future collaborative work in Greensboro, with positive outcomes acting as a major driver for the desire for future cross-sector collaborative work.

In 2015, the Greensboro Housing Coalition also received a Community Centered Health grant from the Blue Cross Blue Shield Foundation of North Carolina. This grant allowed the Greensboro Housing Coalition and partners like Cone Health to meaningfully engage with residents to better understand their concerns, to identify shared values and priorities, and to build trust and figure out how to work together as a community. The Greensboro Housing Coalition believes that the Community Centered Health grant laid the foundation for planning, action, and capacity building that would later enable the Collaborative to apply for and receive the BUILD Health grant.\(^3\)

Around the same time that momentum was building as a result of the Asthma Partnership Demonstration project, UNCG established the Center for Housing and Community Studies. In 2015, UNCG’s Center received a grant from the Community Foundation to research the linkage between housing and health in Guilford County, and reached out to the Greensboro Housing Coalition. The two organizations had partnered together previously on fair housing issues, so this was a prime opportunity to reach out again to explore new ways to collaborate. Students were trained on how to document housing issues using Google Street View and assessed all visible characteristics (foundation to roof) on 78,000 parcels. The group also partnered with Cone Health to combine de-identified asthma admission data in the neighborhood with data the researchers were collecting on housing conditions. Houses identified as having poor quality clustered in three neighborhoods, one of which was Cottage Grove. With the addition of the asthma admission rates, the group was able to run regression analysis to show that a lack of gutters and poor paint were correlated with asthma admissions, even when controlling for social determinants of health and neighborhood characteristics.

In 2016, the Center for Housing and Community Studies at the University of North Carolina at Greensboro was awarded an Invest Health grant, funded by the Robert Wood Johnson Foundation and Reinvestment Fund,


\(^3\) The Build Health Challenge supports “bold, upstream, integrated, local, and data-driven” (BUILD) community health interventions. https://buildhealthchallenge.org/
to develop strategies for increasing public and private investments to address substandard housing issues in the community partnering with the City of Greensboro, Cone Health, Greensboro Housing Coalition, East Greensboro Now, and UNCG. The group met every two weeks for almost a year and a half. This gave them a chance to learn each other’s specialty enough to speak each other’s language and learn to leverage those ties within the neighborhood. The coalition successfully advocated for a housing bond to leverage support for increasing the quantity and quality of affordable housing, making the case the investment would yield economic returns to the community while also improving lives and health conditions. A portion of the bond would eventually be used in 2018 to fund some of the refurbishment of Avalon Trace.

In 2017, all of the previous efforts resulted in the community being selected as a BUILD Health Challenge grantee, with Cone Health providing matching funds to support the effort. Being selected for this prestigious national grant engendered a deeper commitment from partners and inspired the group to think bigger about what they could accomplish together around housing and health. As part of the grant, the coalition received guidance from national experts on how to tailor their work to get private investors to support their agenda. Ultimately, by connecting developers with community leaders, Collaborative Cottage Grove partners orchestrated the successful purchase of Avalon Trace by a new developer. The City of Greensboro committed to a weatherization project where they would provide financial resources for HVAC and weatherization for ceilings and windows, as needed, therefore reducing utility costs for residents. Additionally, the Community Foundation has committed to $1,500 per unit, as necessary, in assistance funds for renovations such as replacing carpeting with smooth surfaces, and fixing HVAC. Through this collaboration, the new developer has additional resources to service the property, while residents will see a net reduction in their housing costs with higher quality of life.

BUILD is also helping to transform the neighborhood to support health and wellness around diabetes, another community priority. Interviews with residents revealed there were few places for purchasing healthy food and neighbors were uncomfortable engaging in walking or exercise within the neighborhood. New initiatives include developing community gardens; addressing food insecurity with the Mobile Food Oasis at the community marketplace to bring fresh produce to the neighborhood; further increasing accessibility and affordability by arranging for the Mobile Food Oasis to accept SNAP and EBT cards and $10 better food prescriptions from Mustard Seed Clinic for patients presenting with diabetes, obesity or prediabetic symptoms; working with the city to get new sidewalks, and organizing walking groups and diabetes classes. Funding also goes to support ongoing coordination with residents and partners. As of this writing, they are initiating a lead safety effort in federally funded houses and sending out a team to go door to door to identify lead safety issues both in water borne and patient borne particulate matter. As with the asthma efforts, they are also seeking funding for lead remediation and rehabilitation.

The Perfect Day

During the course of our interviews for this case study, one partner described “the Perfect Day,” in the summer

“That developer did not know anybody at Cone. That developer did not know anybody at Reinvestment Fund. That developer did not know anybody at the Community Foundation. Those are our partners and we kind of orchestrated those conversations with the evidence, with the mapping, with Cone sharing the data. All that played a role in that purchase.”

Josie Williams
Project Coordinator
Greensboro Housing Coalition
of 2017 that she believed exemplified the work that Collaborative Cottage Grove has accomplished together over the course of their partnership.

The day started with a powerful combination of presentations at the city’s Minimum Housing Commission Council Chamber meeting that featured resident advocates, the Greensboro Housing Coalition and UNCG mapping data on asthma admissions among Avalon Trace residents. A grandmother described the living conditions in Avalon Trace and what it was doing to her grandchildren’s health, and how her daughter could not get the landlord to make repairs and yet could not afford to move. There was also a presentation of a student video showing the dilapidated conditions inside the apartments. Using data from UNCG, the representative from Cone Health followed with a powerful presentation showing that out of 176 units in the Avalon Trace building, there were over 120 emergency department visits due to asthma in one year, when the expected rate should have been one. This was the first time a Cone representative had ever presented at a meeting like this. Leaders from the Greensboro Housing Coalition also presented and were joined by homeowners in the community who came to support their neighbors. Powerful data presented by a powerful member of the community, combined with impassioned resident testimonies and strong community support resulted in the commission issuing an order to repair without delay and ultimately to the building being sold to a new developer the following year.

That was followed by a community marketplace event in Cottage Grove that was established after the Cottage Grove Project Team Coordinator realized that people in the neighborhood were selling things to each other. So she set up a weekly market where neighbors could come and sell fruits and vegetables and crafts.

Then later that afternoon, the Collaborative Cottage Grove Project Team Coordinator and others from the Coalition attended a presentation by the Division of Environmental Quality that explained plans for the remediation of a local park that had once been the site of a city incinerator.

After that, the Collaborative Cottage Grove Project Team Coordinator and others from the coalition attended a participatory budget meeting to get funding to renovate another neighborhood park on the ballot. While it did not happen that day, renovation for the park was eventually authorized.

Community Voice and Priorities

Interventions to address asthma and diabetes are rooted in community-identified priorities and data. The Greensboro Housing Coalition and Cottage Grove Neighborhood Association collaborated to conduct a neighborhood canvassing survey, with UNCG processing the data on the back end. The neighborhood was interviewed about community health needs. Ultimately, the community indicated asthma and diabetes as the two most pressing health concerns. Additionally, community members reported concerns around community violence, difficulties with transportation, and lack of access to affordable and healthy options. Mustard Seed Community Clinic identified diabetes as one of their most common health issues addressed, and data from the CDC backed up these community assertions, showing an elevated rate of diabetes in the neighborhood as compared to other geographic areas.

Not all resident priorities immediately resonated with other coalition partners, but were not dismissed out of hand either. For example, during the Community Centered Health grant’s resident engagement sessions, the partners heard from residents stating that the neighborhood hoped to rename South English Street to Cottage Grove Avenue – a change that would reflect the street’s original name from decades prior. Instead of dismissing this concern as being out of scope, the coalition listened to the residents who shared personal stories about the neighborhood and what it was like before the public housing developments were installed, and why this name change was important to their identity. Once the group investigated what it would take to change the street names and weighed the potential unintended consequences to businesses in the area.
Ultimately, they agreed to a compromise of using “Cottage Grove Neighborhood” sign toppers above the street signs to designate the neighborhood. This win for the autonomy and identity of neighborhood residents was also a win for the collaborative as it led to enhanced mutual trust and demonstrated the partners could work together effectively for change.

Neighborhood residents partake in community asset mapping, a project that is driven to create self-sustaining economic development within the neighborhood. The project maps key assets among individuals and infrastructure in the neighborhood, such as: individuals who are contractors, roofers, plumbers, bakers, etc.

Collaborative Cottage Grove partners constantly visit the community. Greensboro Housing Coalition has encouraged its designated Collaborative Cottage Grove employee to visit the community regularly in an effort to build trust and understand community needs. Greensboro Housing Coalition employees also visit homes to do inspections, remediation, and assessments. Mustard Seed Community Clinic staffs an RN to do home visits and connect individuals to community resources, as needed.

**Social Determinants of Health**

The linkage between housing and health is at the heart of the Collaborative Cottage Grove efforts, but getting everyone to prioritize addressing housing and other social determinants of health requires significant ground work. The coalition is focusing on using data to shine a light on these relationships so that it becomes impossible to ignore.

The partnership pulled in a local media outlet, Greensboro News & Record, and a reporter subsequently sought residents’ testimony regarding the living conditions. The News & Record published a piece detailing the squalor, with photos included, and included a plea for community developers. At a city of Greensboro Minimum Housing Commission Council meeting, a representative from Cone Health presented some of the mapping data from the UNCG study described above to show that in one year within this apartment complex of 176 units, there were 120 cases of emergency department visits related to respiratory distress. Local consultants and individuals who have utilized UNCG’s maps have begun submitting letters of support for the project, with one even making the assertion that the maps produced assisted in making the case for passage of a local $25 million bond referendum for affordable housing.

New payment models that focus on improving health and lowering cost of care also play an important role in reinforcing why social determinants of health are a priority. For example, Cone Health became a Next Generation Medicare Accountable Care Organization, which may have laid the foundation for providers and administrators within the system to think about health in terms outside of the walls of the clinic. Federal requirements to conduct Community Health Needs Assessments (that is mandated for Cone to maintain nonprofit status) helped to further inspire the health system to partner with Collaborative Cottage Grove. As a result of these new connections with other community leaders, the C-Suite at Cone now pays attention to life expectancy maps in comparison to poverty maps and redlining maps, and is willing to share data on their

“**How does this become not just something that happens in one neighborhood...what if every kid who had asthma in North Carolina and had Medicaid got the chance to potentially get new carpet, if that’s what was triggering it?**”

Kathy Coleville
Healthy Communities Director
Cone Health

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patients with outside researchers to better understand the linkage between poor housing status and poor health outcomes. Reflecting on that experience, Kathy Coleville, Healthy Communities Director at Cone Health, said leaders at Cone are starting to ask themselves, “What are we doing wrong? This is our community and we’re supposed to be taking care of it...To me, it feels like those maps have been a call to action for people and that’s probably why we’ve gotten these new strategies within the strategic plan at the level they are right now.”

To help physicians in training get a deeper understanding of the importance of addressing social determinants of health in communities such as Cottage Grove, the program director for the family medicine residency reached out to Collaborative Cottage Grove and the Greensboro Housing Coalition to bring resident doctors into the community to participate in the work being done through Collaborative Cottage Grove. Now, as part of the family medicine residency at Cone, physicians will participate in a two day orientation to understand the work of Collaborative Cottage Grove, including a presentation on the asthma hot spotting maps. After, the family medicine residents will tour the communities, and be introduced to community members that are already engaged in the Collaborative Cottage Grove efforts. The family medicine residents will also shadow community members throughout their day, in hopes that these new physicians will gain a clear understanding of the varied daily factors that might influence an individual’s health and wellbeing.

Sustainability

To date, Collaborative Cottage Grove’s sustainability has hinged on their ability to identify grants that respond to resident priorities and that build on earlier successes. They are also engaging in creative partnerships, such as working with universities to engage students in what would otherwise be prohibitively costly data collection, and then presenting the findings to city leaders in such a compelling way that the community can no longer ignore how poor housing conditions are contributing to costly health problems for Cottage Grove residents.

The multiple grants and collaboration with city leadership are an attempt to build greater systems and pathways to achieving sustainable growth and economic development, community wide. Programs highlighting community resources may lay the framework for future investment in community infrastructure. Partnerships at the city and state level seek to create long lasting institutional change regarding the ways priorities are set for the City of Greensboro, including breaking longstanding prioritization of wealthy, mostly white neighborhoods rather than addressing immediate needs in poorer, more diverse ones. Ultimately, partners with Collaborative Cottage Grove are looking to engage more with State leadership to address inequities across the state.

“I think we really approach this in a different kind of economic model, and it’s gone beyond the grant funding now to: how do we get investment in the neighborhood? How do we get investors in the neighborhood? How do we bring in new policies that will help the neighborhood? It’s gone well beyond grant funding and grant cycles.”

Stephen Sills, PhD
Associate Professor and Director
The Center for Housing and Community Studies
University of North Carolina at Greensboro
Challenges

Finding the time to really connect with residents and engage in regular contact can be challenging for many of the participating partners. While the partners are committed to these programs, they have other responsibilities outside of Cottage Grove that make it challenging to maintain the level of engagement they feel is required. This is particularly true as they become increasingly successful and are approached by others who either want to learn from their efforts or engage them in new ones outside of Cottage Grove. While this recognition is exciting and opens countless doors to additional opportunities, additional strains on personnel pulls them away from the Cottage Grove neighborhood and the work for which they are recognized. Right now, grant funds are available to support the Project Coordinator thereby ensuring there is someone who is in regular contact with residents and other Cottage Grove partners and coordinating the multiple moving parts. It will be important to develop a sustainable funding stream to support this level of community engagement – which is viewed by all as an essential ingredient for the Coalition’s success to date.

Sharing de-identified patient level data that enables analysis such as the mapping project can be challenging given HIPAA privacy policies. The group experienced significant delays as they worked to develop a process that enabled Cone to share data with UNCG. However, now that Cone has seen the power of this type of data sharing, they want to make it easier to say yes to new data requests related to promoting health. They are now in the process of upgrading their HIPAA compliance process and anticipate future information sharing collaborations will be smoother with this change.

Figuring out the best metrics for evaluating the success of neighborhood improvements on changes in health outcomes can be difficult. Except for the case of asthma, it is not possible to link environmental changes to ER utilization. How do you link community gardens to lower incidence of diabetes when diabetes is a lifestyle disease acquired over years? This is particularly challenging when the outcome measure being assessed is a 20 percent reduction in emergency room visits due to diabetes complications. To ameliorate this issue, the Collaborative is focusing more and more on measures of systems change – such as Cone Health changing its internal policies related to data sharing, or the City of Greensboro training Code Enforcement Agents in Healthy Home Inspections.

Lessons Learned and Next Steps

Partners with Collaborative Cottage Grove all expressed an intense appreciation and respect for genuine resident-engagement. As the representative from the Greensboro Housing Coalition said, ““When you’re starting out, it is never too early to connect with that population on a one-on-one basis... and, I mean, it’s not just about asking them to come to a meeting. It’s about really connecting on a relationship level, really humanizing every facet of what you’re doing.”

Another key lesson learned is to pursue community priorities. When interventions are based in community identified priorities, the community is more likely to take ownership of those interventions and will be on an effective path towards sustainability.

Collaborative Cottage Grove continues to look towards additional opportunities to ramp up efforts to address the social determinants of health and improve community health and wellbeing. One such example is looking towards implementation of the Asthma Partnership Demonstration project 2.0, with a larger number of individuals enrolled. The Collaborative hopes to work with the state of North Carolina as opportunities emerge for potential Medicaid innovation work related to social needs. Finally, Collaborative Cottage Grove hopes to continue to use data mapping to inform policy decisions, such as the location of new clinics or targeted interventions.

5. Cone Health is transitioning from Safe Harbor to Expert Determination under HIPAA.