



Strategic Shifts and Synergies: Strengthening Community Impact Through Adaptability and Connection

BY PHIG PARTNERS



SHAPING TOMORROW'S PUBLIC HEALTH TODAY.

Navigating Disruption: Sharing the Story of How Building Relationships & Interconnectivity Among PHIG Strategies Has Shaped Grant Progress

2025 PHIG Annual Recipient Convening

Sarah Brooks | Eliza Daly | Jeneane McDonald

August 20, 2025



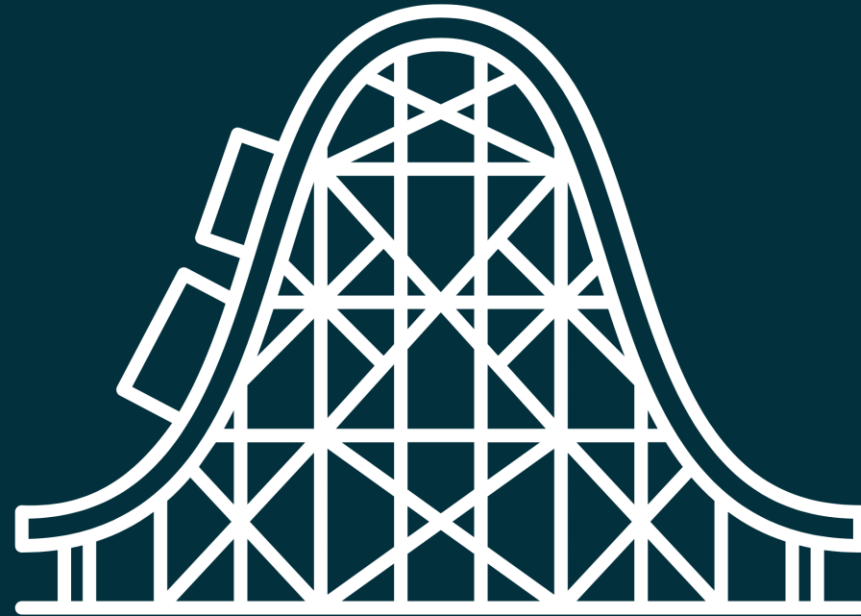
Health and
Human Services

Learning Objectives

- ▶ Describe the **value of inter-team collaboration** for PHIG implementation
- ▶ **Identify opportunities for interconnectivity** between A3 and the other PHIG strategies
- ▶ Translate the **organizational learning** of one PHIG grantee to their own **implementation context**

Act I

Original Vision



A3 Data Modernization: Three Primary Outcomes

- Expand current data modernization efforts beyond reportable diseases to include additional public health datasets within the department:

Invest in a more modern and efficient data infrastructure by building on work started through ELC Data Modernization funding

Increase data interoperability by moving data systems toward a common platform, common data dictionary and variable format, and data storage location (a data lake)

Increase availability and use of public health data through investments and improvements in data-related processes, staffing, and technology

Act II

Turbulence & Shifting



Poll Question

Have you been able to implement PHIG exactly as you originally proposed in your grant application?

☐ Yes

☐ No

Rapid Evolution & Systemic Shifts

- ▶ Agency mergers
- ▶ Consolidation of IT services
- ▶ Delays in hiring PHIG-funded positions
- ▶ Funding Shifts:
 - Supplemental PHIG DMI funding received post-award
 - Instability of ELC funding sources meant to be braided & blended



2022 Award

**Administration and
Professional Licensure**

**Deputy Director's
Office**

**Acute Disease
Prevention, Emergency
Response, and
Environmental Health**

Information Management

Public Health Performance

DMI Director

PHIG PI
Public Health
Surveillance
Data Strategy (vacant)
Data Sharing

Other DMI PHIG workforce
to fit here

2023 Merger

Administration

Information Technology
- Public Health

DMI Director

Strategic Operations

Performance

PHIG PI
Grant Coordinator
Data Strategy
(vacant)

Public Health

Health Statistics

Public Health Surveillance
(vacant positions)

Compliance

Data Sharing,
Privacy, Open
Records

Compliance
Officers
Privacy Officer

2024 IT Consolidation

Administration

Performance

PHIG PI
Grant Coordinator
Data Strategy
(vacant)

Public Health

Health Statistics

Public Health
Surveillance
(vacant
positions)

Public Health Workforce Director

Compliance

Data Sharing, Privacy, Open Records

Compliance Officers
Privacy Officer

Department of Management: Division of Information Technology

DMI Director

2025 Data Modernization

Compliance and Administration

Public Health

Performance & Operations

Data Privacy & Strategy

Health Statistics

Public Health Workforce Director

PHIG PI
Grant Coordinator

Compliance Officers
Privacy Officer

DMI Director*
Data Scientist 2*
Data Strategy Coordinator
Health Economist*

Public Health
Surveillance

Data Scientist 1
Data Scientist 1
Syndromic Epi
Epidemiologist x 4

*not PHIG funded



Health and
Human Services

2022 Award

2023 Merger

2024 IT
Consolidation

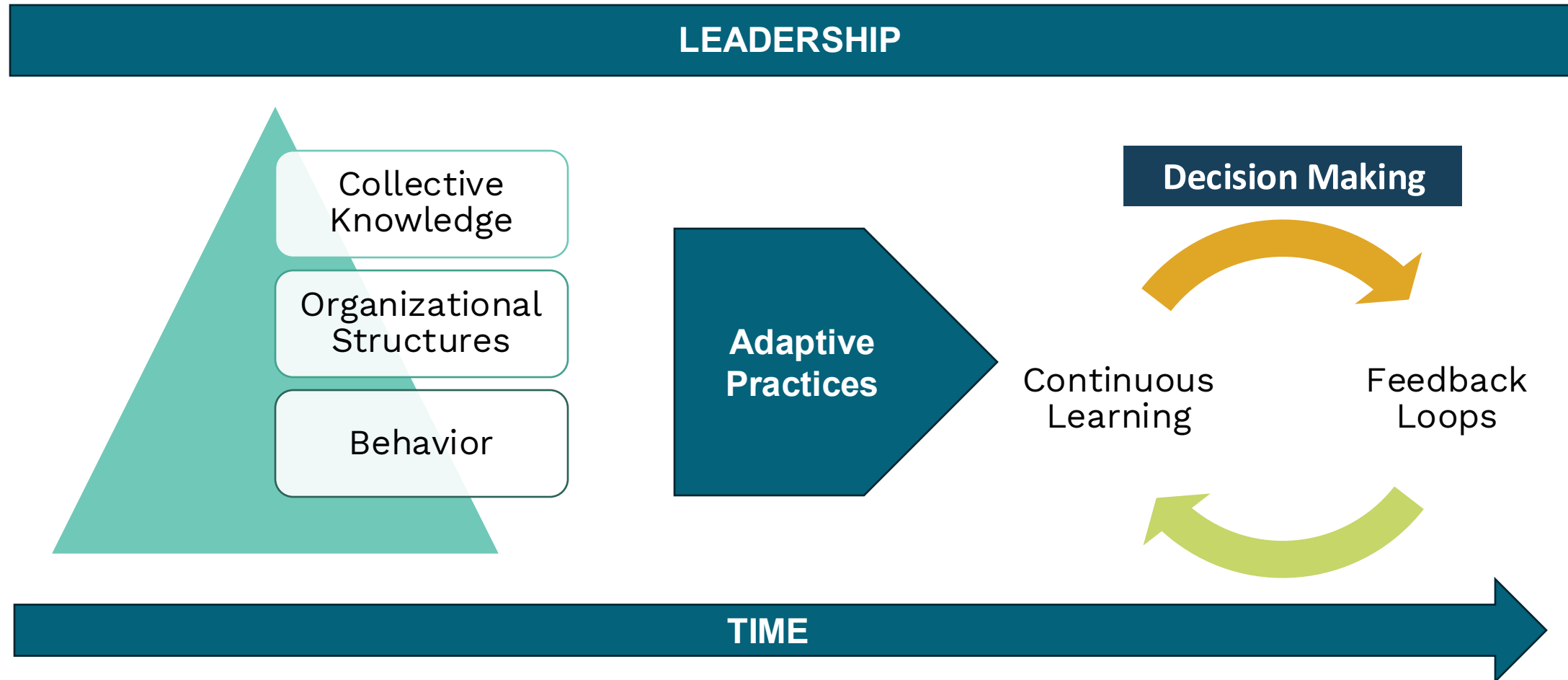
2025 Data
Modernization

Act III

Connectivity in Practice



Organizational Learning



A3 Data Modernization: Three Primary Outcomes

- Expand current data modernization efforts beyond reportable diseases to include additional public health datasets within the department:

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Invest in a more modern and efficient data infrastructure by building on work started through ELC Data Modernization funding

Successes:

- New data systems being developed for disease surveillance, immunization and family health
- Enhancements to ELR and eCR
- Syndromic surveillance program established

Work to Come:

- Health Information Exchange procurement
- Scope and breadth of infrastructure work to be determined by funding

Increase data interoperability by moving data systems toward a common platform, common data dictionary and variable format, and data storage location (a data lake)

Successes:

- Data lake has been established and currently holds 11 data sets.
- Data inventory has been completed for HHS with system name, data purpose, data owner, legal authority and retention schedule

Work to Come:

- Implementing data governance and access controls to the data lake
- Further granularity in the data inventory
- Modernization of the Public Health tracking portal

Increase availability and use of public health data through investments and improvements in data-related processes, staffing, and technology

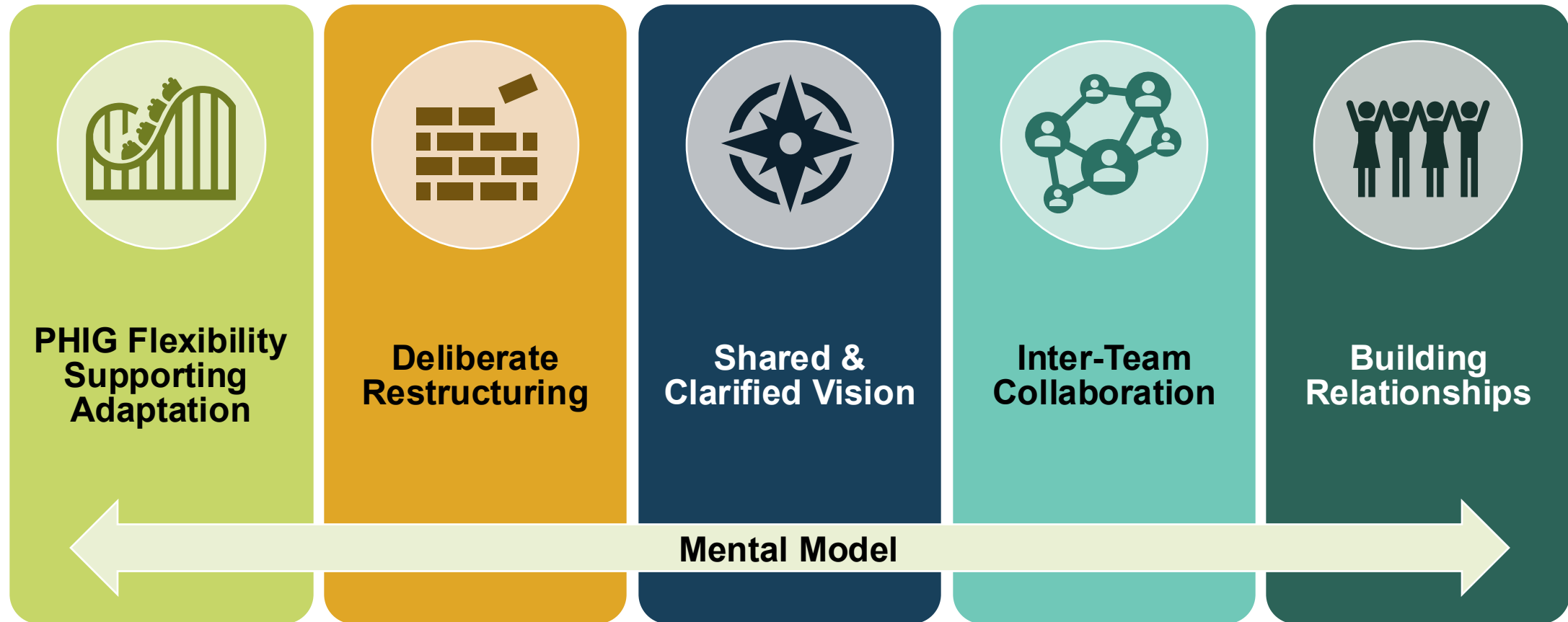
Successes:

- Hiring key data-related positions
- Initial creation of a data strategy roadmap
- Updating data sharing, confidentiality, and research misconduct policies and internal processes

Work to Come:

- Additional contracting of services through DOM DoIT
- Refining internal data sharing and data governance processes related to the data lake

Facilitators to Success | Mindset



Questions

Sarah Brooks

Data Modernization Director

sarah.brooks@hhs.iowa.gov

Jeneane McDonald

Public Health Workforce Director

jeneane.mcdonald@hhs.iowa.gov

Eliza Daly

PHIG Coordinator

eliza.daly@hhs.iowa.gov





Harris County
Public Health
Building a Healthy Community

Strategic Shifts and Synergies: Strengthening Community Impact through Adaptability and Connection



HCPHTX.ORG



Learning Objectives

- Understand how to better engage stakeholders and partners to enhance new program development and service delivery
- Recognize and take advantage of opportunities to make adjustments throughout the program design, launch, and implementation phases
- Embrace a community-centric approach to guide program development



Brandon Maddox
Director, Office of Planning &
Innovation



Regina Dennis
Grants Administration Manager
Office of Planning & Innovation



Hannah Eason
Project Coordinator
Office of Planning & Innovation



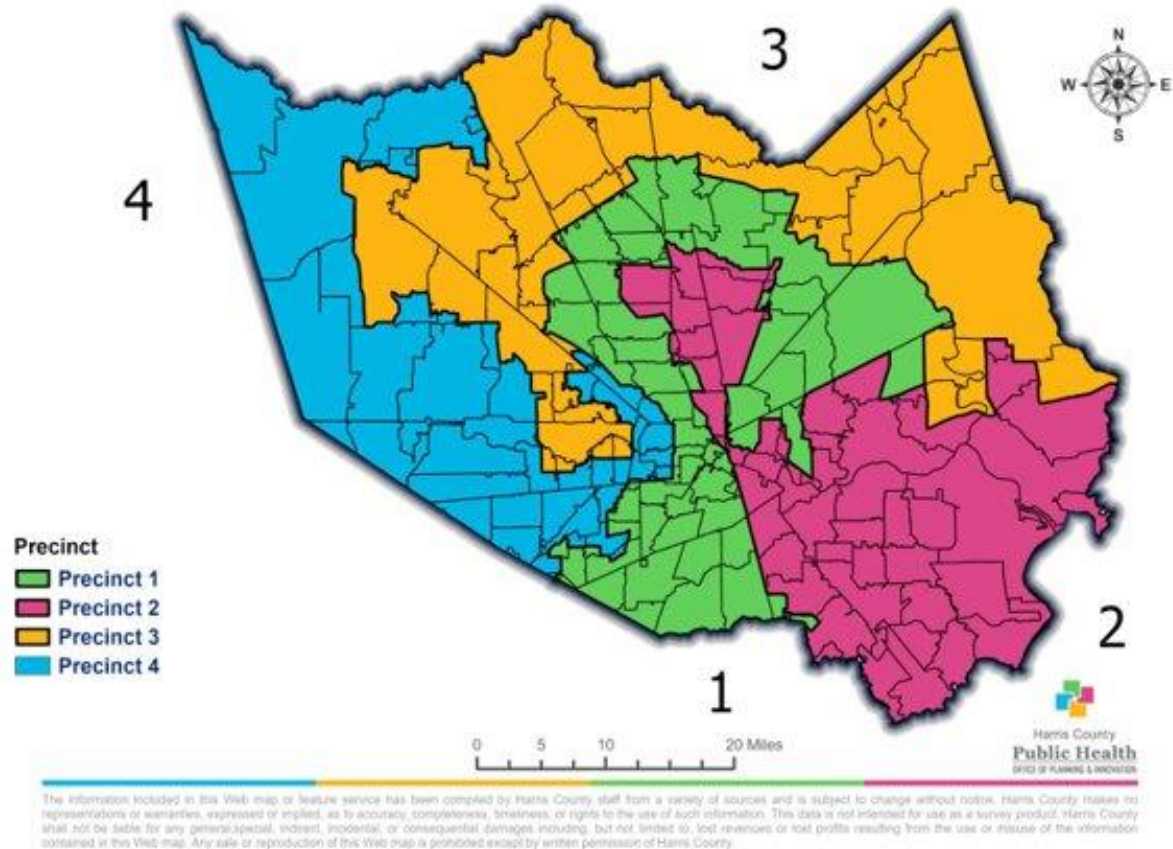
Harris County is the 3rd largest county in the U.S., home to over 4.8 million people across 34 cities — including Houston, the most diverse city in the U.S.

Harris County Public Health



HCPHTX.ORG

Harris County Public Health (HCPH)



- Provides comprehensive health services to the community through approximately **900 public health professionals**.
- HCPH's jurisdiction serves **2.5 million community members** living in unincorporated areas of Harris County
- For public health services, such as mosquito control, Ryan White/Part A HIV funding, and refugee health screening, HCPH's jurisdiction encompasses the entirety of the county - **4.8 million people**

MISSION

To protect health, prevent disease and injury, and promote health and well-being for everyone in Harris County by advancing equity, building partnerships, and establishing culturally responsive systems.

Vision

A Harris County in which all people can achieve their full potential for health and well-being.

Values

Harris County Public Health embraces a foundation of progressive work anchored by the department's cornerstone values guiding our work to improve the community's health and well-being.

Leadership
Service and Excellence
Quality
Collaboration
Communication
Inclusion and Belonging
Accountability, Integrity, and Stewardship
Professionalism
Compassion

Capacity Strengthening Program (CSP)

THE VISION

Strengthen community partnerships to improve health, support wellness, and increase resilience

Build on lessons learned from the COVID-19 pandemic when HCPH was able to reach underserved populations by partnering with smaller **community-based organizations** (CBOs) that were trusted community pillars.

HCPH designed the CSP as a unique partnership model, giving CBOs contractual experience that prepares them for future partnerships while enhancing their capacity to serve the diverse needs of our County's residents.

Capacity Strengthening Program

The CSP aims to support the **development of healthy and sustainable CBOs**, specifically those serving communities that have been underrepresented or underserved.

INPUTS

To support eligible grantees, HCPH offers the following resources:



Funding up to \$100,000
per organization*



Technical assistance for
ongoing capacity
strengthening support



Connections to learning
and peer
networking opportunities

Capacity Strengthening Program

ELIGIBILITY

- Applicants must be based in Harris County, conduct their proposed work in Harris County
- Be categorized as **501(c)(3)** of the Internal Revenue Code or fiscally sponsored.
- Have programs and/or services that address **Non-medical Determinants of Health** (NMDOH) and advance **optimal health for all**.

HCPH prioritizes applications from organizations with less than 25 paid employees and limited organizational infrastructure.

30 Harris County CBOs will participate in the CSP across three 16-month cohorts. CBOs work to develop then implement a customized Capacity Strengthening Plan.

Poll: What best describes your experience developing a new public health program?

Responses:

- I've led a program from idea to launch
- I've supported program development as a team member
- I've adapted or revamped an existing program
- I've never developed a program, but I'm here to learn

CSP: The Plan

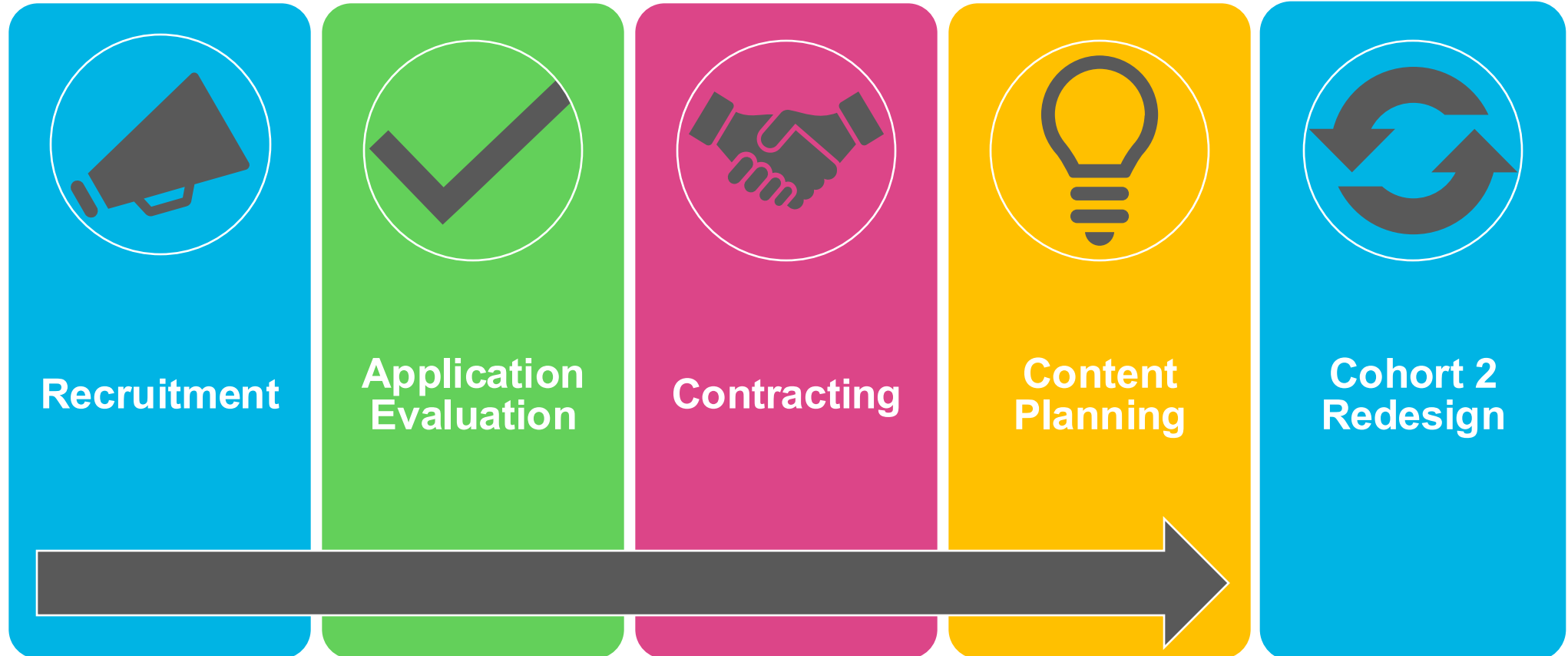
- 30-day application period with 2 information sessions for prospective applicants
- 1-month application evaluation period
- Notify recommended awardees (CBOs) and undergo Contracting + Insurance Verification in 1 month
- Contracts approved by Commissioners Court within 2 months of application close
- Pre-determined learning content and schedule



Poll: What's the biggest challenge you've faced (or would expect to face) when launching a new program?

Responses: Word Cloud
(free/open responses)

Strategic Shifts



Strategic Shift: Recruitment

Plan:

1 virtual + 1 in-person information session

- Sessions covered eligibility, program overview, and application process
- The sessions & application period were promoted through HCPH socials, Outreach staff, and community partners



Challenge:

Technical difficulties & an abundance of questions from prospective applicants, indicating confusion about the process and CSP eligibility



Shift:

- Additional virtual session added to enhance clarity and expand awareness of the CSP launch
- Provided individual support to CBOs that had trouble submitting application materials

Request For Applications (RFA)

- 30-day window
- Application (PDF) and attachments submitted via CSP email inbox
- Due to technical difficulties, other application formats were accepted

**Build Your
Organization's
Capacity**

**APPLICATIONS NOW OPEN
VISIT: [HCPHTX.ORG/CSP](https://hcphtx.org/csp)
FOR DETAILS.**



Strategic Shift: Application Evaluation

Plan:

1-month evaluation period (Dec. 2023)

- Review for completeness, timeliness, and eligibility
- Independently evaluate and score by a panel of 3 HCPH staff
- All scored applications are compared to select 10 recommended awardees



Challenge:

Underestimated the volume of work required to evaluate

- High application volume required more review time
- The evaluation rubric produced similar scores, making it difficult to distinguish between applicants



Shift:

Extended the evaluation period to 2 months

- Sent ad hoc communications to keep all applicants informed



96 Applications received



88 complete & eligible for review

92% Completion Rate

Strategic Shift: Contracting

Plan:

One month contracting period (Jan. - Feb. 2024)

- Recommended awardees remained confidential during the entire process, limiting allowed communications with the applicant pool
- Intended to conduct all contracting communication via the CSP email



Challenge:

Multiple delays in executing contracts due to:

- Lengthy drafting process with the County Attorney's Office
- Questions around insurance requirements
- Communications challenges with selected CBOs



Shift:

Extended contracting period and delayed start by 10 mos.

- Provided ad hoc insurance waivers
- Delivered 1-on-1 support to guide CBOs through contracting issues

Strategic Shift: Content Planning

Plan:

Preplanned learning schedule for the cohort

- Worked with consultants and received TA from the Louisiana Public Health Institute (PHIG partner) to pre-plan a learning schedule



Challenge:

CBOs have diverse needs and evolving priorities shaped by organizational capacity and external factors



Shift:

Selected a Technical Assistance provider to work directly with the selected organizations to develop a learning schedule

Learning opportunities ultimately selected based on:

- Brainstorming and prioritization activities held during orientation
- CBOs 1:1 TA coaching calls
- CBOs' progress on implementing their individualized Capacity Strengthening Plans
- Responsive scheduling based on CBO feedback



Strategic Shift: Content Planning

Planned Content Areas



Cohort #1 Content Schedule

Jan: Orientation

Feb: Foundations for Optimal Health

Mar: Fundraising Foundations Primer

Apr: Building a Strong Board Primer

May: Fundraising Foundations

Jun: Individual Giving

Jul: Collaborations that Count

Aug: Building a Strong Board

Peer networking events | Topic-specific Workshops |
Trainings

Strategic Shift: Cohort 2 Redesign

Plan:

Replicate the application process and timeline from Cohort #1



Challenge:

CBOs have varying levels of readiness and need tailored support



Shift:

Streamlined the application process and tentative programming for cohort 2 based on the lessons learned

- Application Process
- Identifying CBO readiness for capacity strengthening
- Timeline

Strategic Shift: Cohort 2 Redesign

Application Process

- Online Application Form - Fewer technical difficulties and more complete applications
- Provide application information and status updates on the CSP Webpage
- Updated the evaluation rubric to improve scoring differentiation



100 applications received

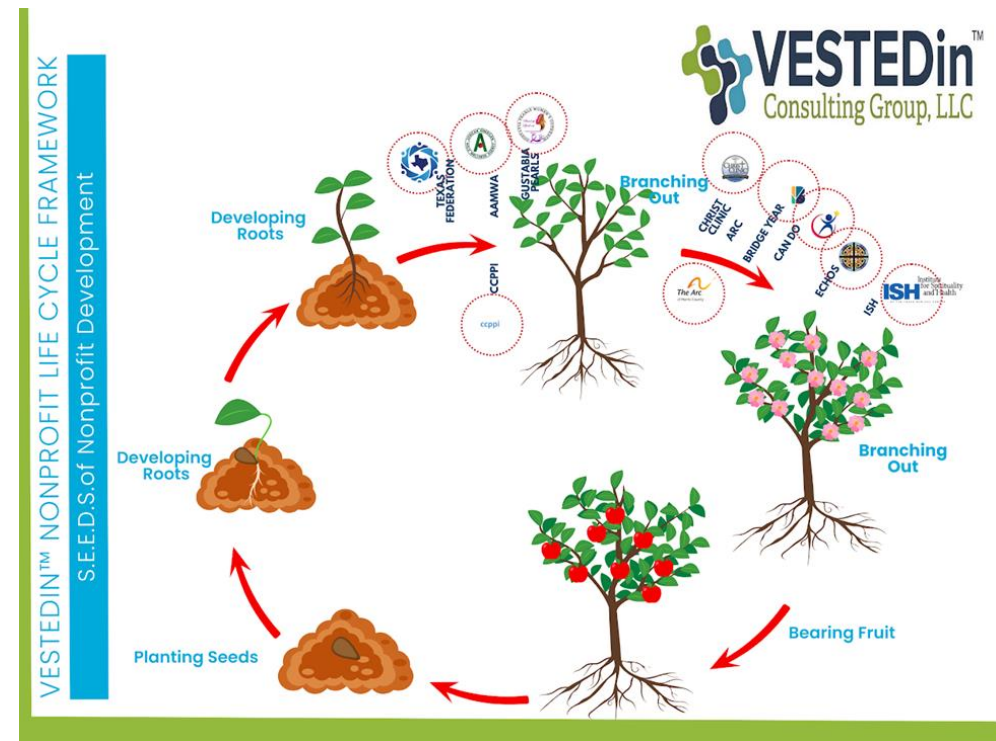


94 complete + eligible for review

94% Completion Rate

Determining CBO Readiness

- Application Questions
- Organizational Assessment & Pre-implementation survey
- Orientation activities



CSP: cohort 2 Redesign

TIMELINE

- Added a Contracting & Onboarding Phase to the program
- Plan to collaboratively determine learning opportunities with the TA provider + CBOs




Lessons Learned

 Start Technical Assistance early to align goals and ensure smooth program launch

 Offer multiple info sessions + application support to increase submission quality

 Use neutral, consistent communication to protect confidentiality and build trust during delays

 Developing CBOs require tailored support to meet contract and insurance requirements - extend timelines accordingly

 Co-designed content results in more relevant and timely engagement. Keep programming flexible and responsive to evolving needs

THANK YOU!

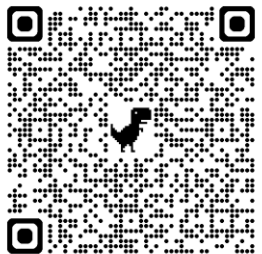


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Brandon Maddox
Director, Office of Planning &
Innovation
Brandon.Maddox@phs.hctx.net

Regina Dennis
Grants Administration Manager
Office of Planning and Innovation
Regina.Dennis@phs.hctx.net

Hannah Eason
Project Coordinator
Office of Planning and Innovation
Hannah.Eason@phs.hctx.net



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