Overview

The Public Health Alliance’s Regional Health Equity Accelerator (the Accelerator) is an action-oriented collective bringing together public health leaders to operationalize equity in Southern California. The inaugural 2023 Accelerator partnered with nine local health jurisdictions (LHJ) to identify, address, and reimagine approaches for operationalizing equity within their departments’ contracting and procurement practices.

Background: Advancing Equity in Contracting & Procurement

Significant barriers to equity exist within local health department contracting and procurement (C&P) processes and procedures, highlighting a unique opportunity to address health equity. As highlighted in the Public Health Alliance’s report Supporting Communities and Local Public Health Departments During COVID-19 and Beyond, as well as ChangeLab, CPHEN, and Prevention Institute’s report How California’s Community-Based Organizations Filled the Gaps for Underserved Communities, persistent under-investment in public health and community-based organizations (CBOs) has greatly diminished the capacity to safeguard the health of communities disproportionately affected by inequities. This vulnerability was exacerbated both before and during the pandemic, with CBOs grappling with restricted resources and bureaucratic funding constraints. Weak ties between many public health departments and diverse communities, coupled with funding narrowly focused on short-term and immediate needs, did not provide the long-term, comprehensive support essential for achieving health equity.

Additionally, limited access to general operating funds further strains the ability of smaller CBOs to navigate administrative burdens effectively. Between October 2020 and January 2021, an Alliance survey conducted with CBOs working in health/public health found:

» 70.4% of community organizations had not engaged in contracts with local health departments, emphasizing a substantial gap in collaboration.

» Health departments were 3x (three times) more likely to initiate contract discussions with organizations they had pre-existing non-COVID-19-related agreements with.

» 48% of respondents noted the absence of technical assistance (TA) on contracts and procurement, impeding the swift application for funding.

» Delays in funding distribution underscored the urgency of addressing systemic challenges within C&P that create additional barriers to health equity solutions.
**Project History**

In November 2021, the Public Health Alliance launched the Regional Equity Learning Collaborative (RELC) to provide foundational learning related to addressing equity challenges and opportunities in Southern California. The RELC brought together public health departments committed to advancing equity and laid the foundation for emergent Equity Change Teams. RELC key content areas included building internal equity capacity, addressing racism as a public health crisis, authentic community engagement and co-creation, advancing equity in workforce development, and equitable data practice.

Building on this foundation, by Spring of 2023, the Alliance’s partner LHJs were poised to move from a learning space to one of action, spurring the design and launch of the Accelerator.

In March 2023, nine (9) LHJs joined the Accelerator, reestablishing new, tailored, cross-departmental Equity Change Teams consisting of Executive Leadership, Health Equity Program Managers, Contracting & Procurement Officers, and other key stakeholders, to begin assessments and monthly modules workshopping actions to adopt and implement structural changes to contracting and procurement procedures. These actions included changes to increase the diversity of community-based partners, reduce administrative burdens in contracting and reporting, invest in community partnerships through targeted engagement strategies, and advance equity through community investment, among many others.

### 2023 Accelerator Design

#### Timeline & Sessions

The 2023 Accelerator included nine (9) dynamic modules:

- **Session 1**: Understanding Equity in Contracting & Procurement
- **Session 2**: Identifying Barriers to Equity within Contracting & Procurement
- **Session 3**: Community-Informed Contracting & Procurement Process Changes
- **Session 4**: Creating an Action Roadmap for Our Near-Term Process Change Goals
- **Session 5**: Examining the Impact of Chronic Community Disinvestment through Health Equity Metrics
- **Session 6**: Introduction to Impact Spending & Anchor Institution Framework
- **Session 7**: Advancing the Anchor Mission through Local Public Health
- **Session 8**: Defining a Regional Policy & Systems Change Recommendation
- **Session 9**: Review, Revise, Rejoice: Examining the Process & Celebrating Progress

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<td>Laying the Groundwork: Understanding Advancing Equity through Contracting &amp; Procurement</td>
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Strategic Design

**Team Composition:** Equity Change Teams were established in partnership with LHJ Executive Leadership to ensure the intimate involvement of key players and decision-makers with varied perspectives. Led by LHJ equity staff, change teams included representatives from executive leadership, administration, contracting and finance, and more.

**Tailored Approach:** In bringing together multiple jurisdictions with a great deal of diversity and thus unique needs, an essential element of the Accelerator design was prioritizing adaptability through a highly responsive design. Monthly modules were intentionally crafted to offer support, facilitate learning, and encourage the exchange of ideas among teams to benefit from rather than struggle against the diverse needs and directions of LHJs involved. In addition to incorporating a multi-layered collaborative approach to monthly group sessions, the Alliance also facilitated monthly one-on-one meetings with each Equity Change Team to discuss strategy, advance progress, and address barriers.

**Dual Perspective:** Addressing health equity with local contracting and procurement can be conceptualized from two intersecting angles:

*How can we improve equity within the contracting and procurement process?* Advancing equity in contracting and procurement involves intentional efforts to ensure that historically underserved communities have an equitable opportunity to participate in and benefit from government contract and procurement processes.

And,

*How can we improve equity through the contracting and procurement process?* Local government contracting and procurement is uniquely situated to operationalize a community-driven investment strategy, ensuring funds and resources are allocated strategically to advance health equity and address community-determined needs.

The 2023 Accelerator was designed to advance equity both *within* and *through* the contracting and procurement process. Equity Change Teams were initially tasked with selecting community driven near-term process change goals. These goals were to address the immediate barriers to creating equitable opportunities to those that might benefit from engaging in government contract and procurement processes. Next, the cohort engaged in collective learning about promising strategies to ensure local resources are allocated strategically to address the root causes of health inequities. Thereafter, they selected a longer-term policy and systems change recommendation.

Integrating the pursuit of short-term objectives with a forward-thinking approach underscores the accelerator’s commitment to proactive implementation, simultaneously cultivating the seeds for lasting, impactful systemic advancements.

**Key Findings & Insights**

**LHJ Impacts**

**Ideas into Action**

Throughout the Accelerator, Equity Change Teams:

- Completed nine (9) initial Equity in Contracting & Procurement Assessments
- Developed internal resources/tools including guidance documents, focus group interview guides, tracking tools, and talking points for informational sessions.

To support this work, the Alliance:

- Developed ten (10) unique tools and guides to facilitate a contracting and procurement assessment, identification of barriers and facilitators of equity, ways to better partner with community to guide process reform, and reasonable action throughout the project’s ambitious timeline.
- Compiled tailored resources and key frameworks to support continued learning and deepening of participants’ understanding of applied equity.

**Immediate Activities**

**By July 2023**, each Equity Change Team in the Accelerator successfully defined a near-term goal for process change. Throughout the Accelerator, participating jurisdictions advanced the following activities:

- Organize a focus group with leaders from diverse community-based organizations to identify barriers and concerns related to equitable C&P opportunities.
- Streamline the C&P process to enhance accessibility for small CBOs, eliminating barriers and improving the experience for increased participation in county contracts during the next solicitation cycle.
- Deliver comprehensive equity guidelines for embedding into C&P to CEO and department heads.
- Coordinate equitable contracting efforts by meeting with stakeholders, consolidating concerns, and developing a shared working document to track ongoing initiatives.
» Evaluate procurement policies for structural changes to embed equity, expanding outreach to new community partners.

» Collaborate across Public Health Contracting, County Purchasing, Budgets, and Grants teams to develop in-person workshops, virtual training, and TA handouts.

» Ensure transparency in the C&P process by making selection criteria, targets, and evaluation tools publicly available through automated RFP management software.

» Enhance understanding of equity in the C&P process among Public Health supervisors and managers through 1:1 conversations and training sessions conducted by the Health Equity team.

» Conduct key-informant/semi-structured interviews with key departments and community members to assess the impact of increased insurance requirements on small and minority-owned businesses.

Emergent Themes

Across the near-term process change goals, three themes emerged: Transparency, Partnering with Community, and Breaking Down Silos.

1. **Transparency**: Transparency involves setting clear and objective criteria for partner selection, bid evaluation, and contract awards. It may include transparent communication of contract details to partners and vendors, and critical analysis of historical precedence to ensure an unbiased and equitable process for all stakeholders.

2. **Partnering with Community**: Partnering with the community involves actively engaging to understand their needs and promote equity. This includes assessing capacity, increasing awareness of opportunities, and providing assistance to under-represented communities, emphasizing authentic engagement and responsiveness.

3. **Breaking Down Silos**: Breaking silos involves breaking down organizational barriers to promote collaboration and integration of equity into contracting and procurement. It encourages engagement across departments, teams, and stakeholders, fostering knowledge sharing and coordinated efforts for enhanced effectiveness and equity.

These three themes extend beyond components of the Accelerator as they also represent critical tenets of advancing equity.

Joint Policy & Systems Change Recommendation

**ADVANCED PAYMENTS**

Mirroring recent legislation at the state level, members of the 2023 Accelerator are recommending aligning local health jurisdictions’ department policy to offer ADVANCED PAYMENT options to community-based nonprofit agencies with which the department has contracted for the delivery of services.

As a result of the Accelerator’s deep dive into equity in contracting and procurement, it was identified that across jurisdictions, the current payment structure in C&P places an undue fiscal and administrative burden on Community Based Organizations (CBO), in particular, small CBOs most likely to be serving historically marginalized populations.

Offering advanced payments for qualifying CBOs would allow for departments to advance up to 25% of the contract amount with approved vendors upfront easing the financial burden of doing business for smaller organizations. This policy shift would support increased CBO diversity and assist departments in maintaining long-term positive relationships with those CBOs serving some of the hardest-to-reach populations who are all too often bearing a disproportionate burden of health inequities.

Accelerator Process Impacts

**Engagement & Reach**

Across nine local health jurisdictions, over 70 individuals joined the Accelerator across nine dynamic sessions over nine months. The cohort was comprised of a diverse mix of equity staff, administrators, C&P specialists, and Executive-level staff, ensuring diverse perspectives and varying levels of authority and decision-making power.

Equity Change Teams also had the opportunity to engage at a deeper level with the Alliance’s Health Equity and Justice (HEJ) team through more than 30 one-on-one sessions. This collaborative endeavor has not only expanded understanding but has also fostered a rich tapestry of insights and shared experiences.

**DISTRIBUTION OF MEMBERS**

- 42% Equity Staff
- 19% Administrators
- 23% C&P Staff
- 16% Executive Leadership
High Responsivity
Formative assessment demonstrated a highly positive response to the robust framework developed to ensure accountability and support in the pursuit of both near-term goals and long-term recommendations. The inter-departmental team design was particularly well-received, offering participants the opportunity to collaborate with relevant influencers and experts. The cross-pollination of ideas created a supportive network across local health jurisdictions and reinforced the strength of a regional approach to advancing health equity.

As individual Equity Change Teams advanced their efforts, the Alliance maintained consistent engagement through establishing an “open-door policy” and extending tailored 1:1 Technical Assistance (TA) sessions. These individualized follow-ups allowed a deeper examination into specific barriers and the unlocking of key solutions, ensuring a nuanced understanding of each team’s unique challenges.

During every session, dedicated work time was built into sessions, emerging as a mainstay feature. With time being a precious resource for teams, sessions served as pivotal touchpoints, providing the dedicated space needed for meaningful work execution.

“The formal structure of the Accelerator work group has created MOVEMENT. If our team hadn’t participated, none of this would have happened. That’s the benefit of having a structure.”
[Accelerator Member]

Regional Advancement & Building a Movement
Regional participation was a cornerstone of success in the Accelerator. With nine LHJs across Southern California participating, a high level of diversity in perspectives and priorities for departments existed. Through a facilitated exchange, departments were able to engage in shared learning, collective encouragement, and shared inspiration.

“Love hearing how other LHJs are breaking down walls in a way that works and gets us to better outcomes”
[Accelerator Member]

The change required to ensure equity both within and through local health department contracting and procurement will require sustained action far exceeding the project’s timeframe. However, within nine months, the Accelerator has boldly transformed an ambitious vision into tangible steps and meaningful action.

“Big Change is Possible”
[Accelerator Member]

As a cohort, participating Southern California health departments have demonstrated that engaging in collaborative brainstorming, implementing promptly actionable ideas, and establishing enduring long-term recommendations is a promising model for advancing equity. This approach not only underscores productivity in our current context but also provides a valuable template for addressing future challenges and scenarios.

Regional Impact Opportunity
Transitioning from short-term crisis response to longer-term recovery provides a unique moment to catalyze transformative action to reimagine and rebuild systems, strengthen communities, and redefine social contracts with community resilience and equity at the core. The 2023 Regional Health Equity Accelerator has not only achieved tangible action on advancing near-term process change goals to address barriers to equity in local contracting and procurement but has also set in motion a ripple effect of long-term recommendations. Together, the 2023 Accelerator Cohort of Local Health Jurisdictions in Southern California have the potential to impact

And includes

The 2023 Regional Health Equity Accelerator embraced the ability of local public health to contribute intentionally to building healthy and equitable local economies. By leveraging their economic power in addition to their social and programmatic resources, local health departments are uniquely positioned to advance the pillars of an Anchor Institution strategy (impact hiring, impact spending, impact investing) acting as models for place-based institutions to actively partner in improving the long-term health and wellbeing of their communities. This commitment reflects a collective vision for executed equity, ensuring lasting benefits for all within these communities.

F O R  M O R E  I N F O R M A T I O N

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18+ MILLION RESIDENTS ACROSS 9 LHJs

$1.3 BILLION IN CONTRACTS AND PROCUREMENT

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