Healthy Places North Carolina
Practice Profile for HPNC Program Officers

Allison Metz, Ph.D.
Renée Boothroyd, Ph.D., M.P.H.
National Implementation Research Network
University of North Carolina at Chapel Hill

With Contributions From
Abena Asante, Jehan Benton-Clark, J Nelson-Weaver
Douglas Easterling, and Allen Smart

For more information, please contact Allen Smart, Director of the Health Care Division at the Kate B. Reynolds Charitable Trust, at 336-397-5511 or allen@kbr.org.

The Kate B. Reynolds Charitable Trust was established in 1947 and is now one of the largest private trusts in North Carolina. Its mission is to improve the quality of life and quality of health for the financially needy of North Carolina. The Poor and Needy Division responds to basic life needs and invests in solutions that improve the quality of life and health for financially needy residents of Forsyth County. The Health Care Division promotes wellness statewide by investing in prevention and treatment. Wells Fargo Bank, N.A. serves as sole trustee. Learn more at www.krb.org.
Healthy Places North Carolina
Program Officer Practice Profile

Healthy Places North Carolina (HPNC) distinguishes itself from other foundation-sponsored community-change initiatives by promoting the crucial role that program officers play in cultivating positive community change. Program officers meet individuals and organizations from throughout the community, encourage them to pursue new projects, introduce new ideas, promote grant opportunities, and connect actors who are not currently working together. In order to serve as effective cultivators, program officers are expected to develop and make use of a core set of “essential functions,” including active listening; building and managing relationships; communication; power analysis; brokering connections; facilitating networks; strategic analysis and problem solving; grant making, management and monitoring; questioning and advising; and critical thinking. This practice profile describes how program officers carry out these essential functions of the HPNC strategy and support the funded communities in achieving their goals.

The program officer’s role Initiating Action in HPNC is comparable to what practitioners do in many health and human services settings. (Fixsen, Naoom, Blase, Friedman & Wallace, 2005). In both cases, the work can be made more deliberate and effective through the use of clearly defined programs and practice models that identify core activities and the expected benefits associated with this new way of work (Barr et al., 2002; Cooke 2000; Durlak and Dupree, 2008; Kallestad and Olweus 2003; Ringwalt et al., 2003). Just as health providers and other practitioners use defined practices and programs to guide their interactions with children, families, adults, and groups, HPNC program officers will use a shared set of developmental strategies and approaches to guide their interactions with key stakeholders in selected HPNC counties.

To be useful in practice, any program or practice model should describe the model’s philosophy, values and principles, the core components of the model, core activities associated with each core component, and practical assessments of fidelity (Fixsen, Blase, Metz and Van Dyke, 2013). Well-defined programs allow organizations to build supports and hospitable environments necessary to promote and sustain practitioner competence and confidence.

One of the key components of any program model is a clear description of what the practitioners do to implement the model. In the case of HPNC, we have characterized the program officer’s role along the following dimensions:

• The philosophy, values, and principles that underlie HPNC – these guide the program officers’ decisions and evaluations and ensure consistency, integrity, and sustainable effort across all HPNC counties

• The temporal, developmental or iterative phases of the work that frame sets of activities that can then stage reflection for next steps; and their connections to the milestones or objectives to be accomplished (“How do we know HPNC is working?”)
• Clear description of the essential functions that define the role of the HPNC program officer and inform activities within each phase of work — essential functions provide a clear description of the features that must be present to say that this is the role of an HPNC program officer rather than a traditional program officer role ("essential functions" sometimes are called core components, active ingredients, or practice elements)

• Operational definitions of the essential functions - practice profiles describe the core activities associated with each essential function of the HPNC program officer and allow their role to be teachable, learnable, and doable across a range of community and network contexts, and promote functional consistency across program officers at the county level (profiles sometimes are called innovation configurations, Hall and Hord, 2006).

Practice profiles have several benefits for HPNC program officers:

• Provide a fully operationalized practice model for engaging and supporting HPNC counties
• Facilitate the development of effective training protocols, coaching strategies, and staff performance assessments for HPNC program officers
• Refine the organizational and systems supports the Trust will need to install to facilitate consistent and effective practice across the HPNC program officers
• Promote the use continuous improvement strategies and data-driven decision making as essential functions and activities of the HPNC practice model are tested in interactions with county stakeholders
• Increase the replicability of the HPNC practice model in across a range of settings and contexts
• Inform ongoing strategic planning efforts to inform next steps and leverage resources that can advance what POs are trying to accomplish with counties
• Ensure that outputs and outcomes as they related to expected county milestones can be accurately interpreted
## Philosophical Principles

The HPNC Program Officer (PO) practice profile begins with the philosophical principles that apply to all phases and functions of the POs’ work and provide guidance for all decisions and evaluations across HPNC counties. It continues with the Essential Functions and Core Activities that define the role of the PO. These principles, functions, and activities apply to all Phases of the work. Taken together, these dimensions of the PO Profile enable the role of the PO to be teachable, learnable, and doable across a range of community and network contexts, and promote functional consistency across POs at the county level.

<table>
<thead>
<tr>
<th><strong>Philosophical Principles</strong> (these apply to all Phases of the work and essential functions)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reflective Practice:</strong> Intent on self-awareness, POs regularly assess and seek to understand how their own personal characteristic, values and assumptions influence their interactions with local actors in HPNC counties. POs examine “what works” in terms of PO roles and strategies in the counties, and connect what they are learning to best practices, theory, and conceptual frameworks for effective place-based grant making.</td>
</tr>
<tr>
<td><strong>Context Specific:</strong> POs explore programs with counties as appropriate to and consistent with the local context, health issues, and resources. The Trust and POs ensure that grants and resources are tailored to the local context rather than allocated according to a formula or pay-out target.</td>
</tr>
<tr>
<td><strong>Strength-Based:</strong> POs focus on and facilitate people and communities to build on their resources, skills, and assets to come together, plan for, implement, and affect positive change and improvement. POs trigger local actors to new ways of thinking to address challenges and build community capacities to think and do creatively in the presence of often tremendous need.</td>
</tr>
<tr>
<td><strong>Culturally Informed:</strong> POs inquire with openness, and listen and interact with counties without making assumptions. POs respect and learn from the counties’ unique characteristics, histories, and strengths, and bring this understanding of “their story” into subsequent county interactions and activities.</td>
</tr>
<tr>
<td><strong>Community Driven:</strong> POs support a process in HPNC counties that empowers counties to take initiative and play a leadership role in defining and addressing issues that affect them. POs support counties to recognize strategic issues through an emergent process of exploration, conversation, and analysis. POs ask probing questions but refrain from telling local actors what goals they should adopt or strategies to select.</td>
</tr>
<tr>
<td><strong>Collaborative:</strong> POs establish and maintain interactive, mutually beneficial, and well-defined relationships with county partners to achieve the goals of HPNC. The POs learn alongside the HPNC counties and evolve strategies to meet the emerging needs and opportunities presented by the counties.</td>
</tr>
<tr>
<td><strong>Inclusive/Shared Power:</strong> The Trust and POs interact with counties in ways that reflect the core belief that power should be shared within the community. POs are mindful of the wisdom and experience at the local level, and stimulate conversations with and seek input from a diverse set of established and emergent leaders, including those with varied levels of power yet a strong stake in decisions at-hand and those representing different community sectors.</td>
</tr>
<tr>
<td><strong>Decentralized, Dynamic, and Emergent:</strong> Instead of formal or centralized processes, the Trust and POs take a dynamic and developmental approach to HPNC planning, programming, and funding. Strategies used by POs are flexible and emergent, ebb and flow easily, and adjust with county needs over time. Existing coalitions and processes that are inclusive, strategic, and demonstrate movement toward tangible outcomes may be supported.</td>
</tr>
<tr>
<td><strong>Impact Focused:</strong> The Trust and POs focus on creating impact and value in the HPNC counties. Strategies used by the POs focus on improving the capacity and performance of HPNC counties, ensuring superior performance in the health arena, and improving measurable health outcomes.</td>
</tr>
</tbody>
</table>
Phases

The Healthy Places North Carolina (HPNC) Program Officer (PO) Practice Profile describes the three-phase approach that POs carry out to support communities in achieving their health goals. While not a linear process (POs may revisit activities as needs emerge), certain levels and progress of work (e.g., brokering connections) may be required before moving into others (e.g., facilitating networks). Within each phase are a set of core approaches that POs apply with local actors and organizations to achieve county milestones and facilitate communities’ readiness to move to the next phase of the work.

In Phase 1, POs Explore the HPNC counties focused on gathering information, analyzing data, forming relationships, and discovering/characterizing the situation. During Phase 2, POs Initiate Action, prompting and facilitating local actors to think and act differently, facilitating networks, cross-sector collaboration, and problem solving. In Phase 3, POs Learn Together local actors and networks to develop new and effective, comprehensive projects and strategies. While foundations discuss the importance of partnership with local communities they fund, the power balance in the funder-grantee relationship exists. In HPNC, it is expected that the power dynamic will be reduced by advances in trust, relationships, and partnership that are made in the first two phases of the work.

As POs move through phases of the change process, their activities are also guided but a set of HPNC Milestones – signs that HPNC is “working in the counties.” These milestones include: 1) Changes in Individual Actors; 2) Relationships and Networks; 3) Organizational Capacity; 4) Programs, Projects and Activities; and 5) Community Context. These areas of Milestones may be applicable during each Phase of the work, and may evolve as progress is made. For example, seed projects and activities may be followed by bigger, more strategic projects and finally coordinated, higher-level projects as the work grows and advances through different phases. Additionally, Relationships may begin with individual people and organizations and then grow into networks as trust, ideas, and mutual goals emerge. As HPNC progresses, it will be important to identify specific indicators of each Milestone within each of the three Phases to outline progression of the work and to clarify even further what POs are trying to accomplish with local actors. The PO Practice Profile frames a set of Essential Functions of the work under the three Phases.

The Practice Profile guides POs’ overall work in phase-based activities, critically reflecting on local actors’ readiness to move to new phases of work, leveraging technical resources for moving to a subsequent phase, and ongoing testing of the expected linkages between Functions and the achievement of county Milestones.

- **Guides phase-based work** – The three-phase approach aids POs in identifying which Phase they are working in with a particular group of local actors. It helps POs determine the readiness of local actors or organizations to move forward to a subsequent phase; or, when conditions or readiness are absent, barriers that need attention in order for progress to occur. Such issues might also serve to frame a kind of “pro-con” analysis for POs to consider the timing and selection of certain technical resources to leverage for strategic planning and local action.

- **Links core functions to county-level changes** – As POs enact and document the specific Essential Functions they use with local actors in the community, linkages can be tested between these core functions and the achievement of expected county Milestones that are also based on phases of the work.
### PHASES

<table>
<thead>
<tr>
<th>PHASES</th>
<th>1 – EXPLORE</th>
<th>2 – INITIATE ACTION</th>
<th>3 – LEARN TOGETHER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Forming relationships with people and organizations; gathering information, analyzing data, and discovering/characterizing the situation</td>
<td>Prompting and facilitating local actors to think and act differently together; facilitating networks and cross-sector collaboration; and problem-solving</td>
<td>Working closely and openly with local actors to develop more effective and comprehensive projects and strategies</td>
</tr>
</tbody>
</table>

### MILESTONES

**Changes in Individual Actors**

**Relationships and Networks**

**Organizational Capacity**

**Programs, Projects, and Activities**

**Community Context**

### CORE FUNCTIONS

- **Active Listening**
- **Building & Managing Relationships**
- **Communication**
- **Power Analysis**
- **Brokering Connections**

- **Facilitating Networks & Collaboration**
- **Critical Thinking (in phase)**

- **Strategic Analysis & Problem Solving**
- **Critical Thinking (between phases)**

- **Questioning & Advising**
- **Critical Thinking (in phase)**

- **Critical Thinking (between phases)**

**Range of Grant Making, Monitoring and Management**

*As a vehicle for partnering, initiative-taking, and programs in service to HPNC*

It should be noted that essential functions listed as part of a particular phase are not exclusive to that Phase.

While POs may emphasize certain Essential Functions during particular Phases, it is assumed that POs will continue attention to previous functions as they begin to test out and apply others in subsequent phases and activities.
Essential Functions Guided by Phases

Phase 1: Explore

The focus of HPNC POs in the Explore Phase is to engage a wide range of local actors in a wide range of conversations, to form relationships with people and organizations, and diagnose local situations. Through such conversations and meetings, POs will become “visible” in the counties and serve an “activating” role; POs will broker new relationships and connections with county people and organizations across sectors and lines of divisions. The use of data to guide decision-making is introduced in Phase 1 through a County Health Rankings and Roadmaps session for local actors. Essential functions for Phase 1-Explore include Active Listening, Building and Managing Relationships, Communication, Power Analysis, and Brokering Connections.

<table>
<thead>
<tr>
<th>Essential Functions</th>
<th>Core Activities</th>
</tr>
</thead>
</table>
| **1. Active Listening** - POs listen to 1) obtain information; 2) to understand and 3) to learn. POs make a conscious effort to not only hear the “words” someone is saying, but to understand their “message” and “story.” | • During one-one-one meetings, POs speak 20% of the time; community stakeholders speak 80% of the time  
• POs provide feedback on what they’ve heard through paraphrasing such as “What I hear you saying is...”  
• POs defer judgment on what they are hearing until they have a fuller understanding of context and perspectives  
• “Story telling” is valued by time spent in the field listening to community stakeholder, especially those on the periphery of leadership  
• POs learn about the community with the community |

| 2. Building and Managing Relationships – POs will cultivate and develop diverse, authentic, respectful, trusting relationships with community residents and key stakeholders, especially among a diverse set of established and emergent leaders and those with varied levels of power yet a strong stake in decisions at hand. POs also work with these leaders to facilitate lifting-up the voice of community members and consumers of services. Over time POs also seek to understand power dynamics and apply this knowledge to effective relationships | • KBR engages counties through mutual selection activities and invitations to participate  
• POs identify informal leaders in the community and seek to cultivate trust through one-on-one meetings  
• POs acknowledge community assets  
• POs acknowledge discomfort in new and emergent conversations  
• Over time, POs demonstrate authentic relationships with local actors through critical reflection with each other |
**Phase 1: Explore  Continued**

<table>
<thead>
<tr>
<th>Essential Functions</th>
<th>Core Activities</th>
</tr>
</thead>
</table>
| **3. Communication** – POs will be the primary messenger of HPNC’s vision, goals, and agenda. POs will work to effectively send and receive information regarding HPNC progress, goals, and expectations within the appropriate local context both to provide information and respond to community needs. POs facilitate delivering “audience-based” communication, serving as respectful and authentic translators of HPNC goals and decision points with local actors, extenders, partners, and key stakeholder groups. | • POs work with and assist KBR Communications Director to prepare written & verbal communications to share with local actors  
• POs coordinate the timing and content of communication with KBR Communications Director  
• POs gather feedback from local actors to validate and strengthen communications  
• POs identify local barriers or complications to effective communication and work with KBR communication directors to resolve these challenges. |
| **4. Power Analysis** - POs will continually and frequently seek to clarify and understand a county’s power structure and identify people and places of influence and power, especially related to issues of race/ethnicity and economic disparities. POs also work with a diverse set of established and emergent leaders and those with varied levels of power yet a strong stake in decisions at hand to facilitate lifting-up the voice of community members and consumers of services. | • During one-on-one and group meetings, KBR program officers will identify self-interests, constituencies, and connections among local actors and organizations as much as possible.  
• Program officers will track who in the county has “observable decision-making power,” the “ability to set a political agenda” and the “ability to shape a meeting.”  
• As Program Officers map the power “sources” they will identify opportunities for collaboration and facilitate the inclusion of nontraditional partners  
• Program Officers will use results from the county power analysis to assess how particular strategies can be employed to ensure HPNC goals are met |
| **5. Brokering Connections** – POs help individuals and organizations connect to other individuals and organizations and resources (ideas, knowledge, and data) where there might be some mutual benefit. POs also will serve as connectors to other funders when appropriate. | • POs will serve as “connectors” between existing organizations as well as in the development of new organizations by connecting key local actors  
• POs will determine when to broker new relationships (and eventually networks of people and organizations) by understanding how these individuals and organizations might mutually benefit from working together, assisting organizations to see mutual benefits, and generate synergy to achieve the goals of HPNC  
• POs also will, when appropriate, serve as connectors between organizations and other potential funders |
## Phase 2 – Initiate Action

The focus of the POs in the Initiate Action phase is on networks and initial infrastructure. POs will continue to build and manage relationships, but with particular attention to networking and cross-sector collaboration for mutual benefit. POs will seek to build the capacity of organizations and to increase problem solving and leadership skills among local organizations so that an initial infrastructure and county leadership for facilitating networks emerge. With attention on Milestones, POs will also consider how to leverage other resources in service to the kind of KBR funded projects aimed for in the next Phase. When appropriate, POs will connect with intermediaries and other funders to support counties’ efforts to improve health outcomes. In addition to attention on those functions carried out in Phase 1, essential functions for Phase 2-Initiate Action include Facilitating Networks & Collaboration and Strategic Analysis and Problem Solving.

<table>
<thead>
<tr>
<th>Essential Functions</th>
<th>Core Activities</th>
</tr>
</thead>
</table>
| **6. Facilitating Networks and Collaboration** – POs will connect local actors and organizations to think and act differently together to facilitate the “initial infrastructure” for HPNC. Emergent networks of local actors and organizations will represent a diverse set of established and emergent leaders, including those with varied levels of power yet a strong stake in decisions at hand and those representing different community sectors. POs will connect internal and external resources that build on local resources, skills, and assets to come together, plan, implement, and effect positive change and improvement for a common purpose. | • POs will begin to follow-up with, join, and convene local actors and organizations that have the potential to serve as an infrastructure to move HPNC to the next level (e.g., using data to select strategies)  
• POS will activate new connections, new leaders, and new approaches for local actors to work together to solve community problems  
• POs will assist groups of local actors through a continuum of activities – including exchanging information, sharing resources, and enhancing the capacity of others for mutual benefit  
• POs look for threads of connections across organizations and small groups of organizations.  
• POs offer ideas, then wait and see what is picked up by local actors.  
• POs play out scenarios, then see what gains traction at the local level |
| **7. Strategic Analysis and Problem Solving** – POs will engage in feedback cycles with local actors for understanding and improvement (“learning while doing”). POs will extend critical-thinking skills into understanding and defining problems, their complexity, and assisting counties to generate, evaluate, and select from alternatives. In doing so, POs will set in motion new thinking and behaviors that ultimately translate into more effective and comprehensive health strategies and a more health-promoting culture. | • POs will support counties to clarify and prioritize next steps  
• POs will use formal problem solving methods (e.g., PDSA)  
• POs will engage in regular, ongoing feedback loops with counties to learn from their experiences and deepen and broaden the work  
• POs will identify and highlight opportunities, alternatives, early wins  
• POs will seek to build the capacity of local actors to identify and solve health problems and to design and implement programs and policies that advance community health.  
• POs will activate local actors to take more initiative in problem solving  
• POs will use data generated from ongoing power analyses to develop strategies to address challenges related to county power structures.
Phase 3 – Learn Together

The focus of the POs in the Learn Together phase is on developing comprehensive and effective projects and strategies and building momentum and continuous improvement on the part of local actors. HPNC POs will continue to build and manage relationships and facilitate networks, but with particular attention to developing collaborative and comprehensive proposals and funded programs with support from KBR and potentially other sources. As relationships with local actors may also shift from networking to funded programs, the PO may also evolve into an Advisor role for continuous learning for broader and extended impact. In addition to attention on those functions carried out in Phase 1 and 2, an essential function for the Phase 3-Learn Together includes Questioning and Advising.

<table>
<thead>
<tr>
<th>Essential Functions</th>
<th>Core Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>7. Strategic Analysis and Problem Solving Continued</strong> [ongoing, enhanced]: POs will work with local actors to explore opportunities to expand the “health” space and design high impact work. These activities may include exploring alternative yet relevant partners (e.g., urban planning). In doing so, POs will stimulate and set into motion new, effective thinking and behaviors that ultimately translate into effective, comprehensive action for a more health-promoting community and culture across the county.</td>
<td>• Similar activities as noted in previous phase, but with enhanced and broader attention to expanded networks and partnering for larger, longer-term, high-leverage projects</td>
</tr>
<tr>
<td><strong>8. Questioning and Advising</strong> – POs will continue regular, ongoing interactions with counties to ask probing questions of local actors and organizations they interact with, while not imposing their viewpoint. Over time, as these interactions and exchanges focus on funded programs and looking ahead with grantees/other partners to a comprehensive county health strategy, POs may move into the role of advisor and colleague, working with counties to critically explore strategic focus and impact. Doing so may address both programmatic and organizational themes related to strengthening comprehensive projects and strategies.</td>
<td>• POs will advise counties through both proactive/assertive and responsive methods. • POs will raise questions to engage in dialogue and check for understanding upon conversation; mutual receptivity to feedback • POs may seek to identify an organization to manage local work (programmatically) and provide a degree of accountability for grants • POs provide constructive feedback that inspires and supports counties to move their ideas into actionable strategies that focus on impact • POs look for and encourage local actors/networks to make mid-course corrections in keeping with the strategic focus for change • POs will facilitate learning among and across grantees for strategic focus and to enhance impact</td>
</tr>
</tbody>
</table>
Bridging Functions across Phases

Critical Thinking and Grant Making are “bridging” functions that inform work within and across phases. In terms of Critical Thinking, during the Explore Phase, POs may ask themselves “What am I learning about strengths and opportunities among leaders and organizations? What are some priority points of contact that might leverage opportunities for next steps?” Additionally, between Exploring and Initiating Action, POs may ask themselves “What connections to technical resources can I make to help move local actors to action?” In terms of Grant Making, POs will use grant making for different purposes across the three phases. For example, during the early phases, grant making provides an opportunity to identify key actors and communicate expectations and principles associated with HPNC, while in later phases, grant making can be used to leverage comprehensive projects which can address pressing health problems.

**Essential Functions**

<table>
<thead>
<tr>
<th>Core Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>• POs gather information, recognize technical and adaptive challenges, prioritize next steps, distinguish content from process issues, interpret data, gauge strengths and opportunities, and consider alternative approaches</td>
</tr>
<tr>
<td>• POs use data to help counties problem solve, facilitate learning, assess accomplishments, draw conclusions, and further test the generalizability of particular strategies</td>
</tr>
</tbody>
</table>

**Core Activities**

| 9. Critical Thinking - POs will explore diverse elements involved in a situation, examine assumptions and make conscious choices, evaluate evidence and interpret data to make informed decisions, understand context, and facilitate the use of tailored and appropriate support to help counties |
| 10. Grant-Making, Management, and Monitoring – KBR and POs use a range of grant making to support health-improvement programming, and serve as a vehicle to stimulate partnering, initiative-taking, and programs in service to HPNC. POs are leveraging relationships and ideas, not grants, per se, as the resources for change cannot be leveraged effectively without buy-in and innovative, strategic ideas from local actors. |

Timing is situational, and grant making will build on community thinking and strategic momentum. Early awards will yield bigger, more strategic projects that yield coordinated, high-leverage programs and activities for an overall, comprehensive strategy to improve community health. Grant making will be aligned with the expectation that comprehensive health improvement strategies take time to evolve and that investments in initial partnering/project ideas will help to identify key leverage points for other strategizing at the county level and KBR’s longer-term investment. POs will guide HPNC counties in their understanding of and application for funds, work with consultants to address county needs and add value to the HPNC initiative, and monitor active grants in the counties.
Link to Strategic Planning and Field Leadership

Overall, as POs interact with and reflect on interactions with local actors, such reflections (on both progress and barriers) should occasion and inform ongoing strategic planning efforts to inform next steps and leverage resources that can advance what POs are trying to accomplish with counties.

Additionally, and more broadly, POs will also work with the support of Trust leadership to strengthen the platform internally and to engage others and help align interests in ways that can support the HPNC initiative and health outcomes in Tier 1 counties in NC. These activities will enhance the credibility of the HPNC initiative on a national stage.

Other Players

While the purpose of the Practice Profile is to outline core functions of the HPNC POs, it is expected that other individuals or organizations may serve “partner,” “extender,” or “intermediary” roles in supporting, or at times advancing, the implementation of these functions when deemed appropriate by POs and KBR Leadership. Criteria for engaging and selecting extenders or intermediaries will be developed and included as an addendum to this Practice Profile.