

HEALTH FOUNDATION OF SOUTH FLORIDA

REFLECTIONS

Ideas and Insights from
the Evaluation of Grants
to Expand Information
Technology Capacity

INTRODUCTION

This past decade was one of tremendous growth for many nonprofit organizations. For some nonprofits, their management systems were not able to keep pace with the demands. They lagged behind their counterparts in the business and government sectors in the sophistication of their applications and abilities to use technology to manage their operations.

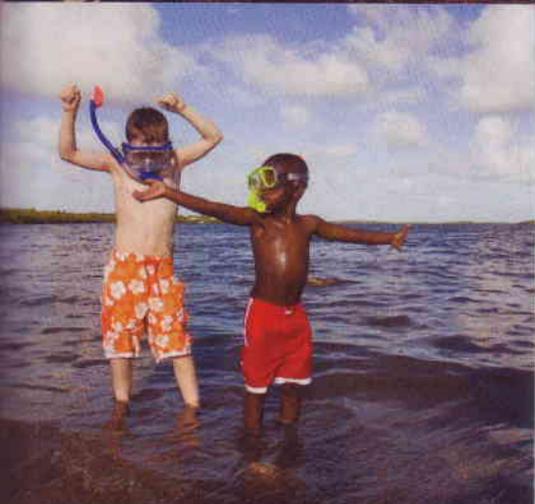
Since information technology has a key role in improving organizational effectiveness, Health Foundation of South Florida created a program which offered three types of grants: Circuit Riders, large grants for technology infrastructure and conversion to electronic medical records. Over a five-year period that began in 2005, local, nonprofit health-related organizations in need of developing and enhancing technological capacities were invited to apply for funding. Grants were awarded to 90 organizations. The funding totaled more than \$5 million.

From those agencies, seven were selected for comprehensive case studies. The studies focus on organizational effectiveness and efficiency. Questions to be answered included the grants' impact on Health Foundation's goals, the grantees' achievements and long-term impact on servicing clients. The results of the studies are tools that sharpen grantmaking skills. And as such, they have been summarized and reflected upon in this report.

This report offers insights into how an outstanding information technology platform becomes a valuable asset. It benefits vital areas, including managing client services, fundraising, accounting, financial management, enterprise communications, billing, reporting and staff productivity. Up-to-date information systems seamlessly integrate various functional areas, enabling management to gain real-time data about how well the organization is performing. This information can be employed immediately to improve service and longer-term to develop sound plans for future growth.

Although the lesson to be learned is always ours, this report on information technology grants is shared with other funders, partners and grantees so that they may gain from our experience. By shifting some grant dollars to support technology, we help to drive the delivery of efficient and quality health services for South Floridians. Your comments and questions are encouraged. Please e-mail us via the Foundation's Web site, www.hfsf.org.





A Byte-Size Overview:

HEALTH FOUNDATION AND ITS GRANTMAKING PROGRAMS

Health Foundation of South Florida (HFSF), a philanthropic, grantmaking organization, has a mission to improve the health status of people in Broward, Miami-Dade and Monroe counties. Guided by this mission, the Foundation supports programs to promote health and prevent disease while making measurable and sustainable differences in the health and well-being of individuals and families.

Since 1993, the Foundation has awarded more than \$85 million to more than 300 grantees. In 2008, after discussions with grantees, the Foundation's Board of Directors and staff restructured their Responsive Grantmaking program to focus on four priority areas: healthy lifestyles, preventive health measures, oral health and primary care.

Health Foundation also has Strategic Initiatives, which includes funding for the Healthy Aging Regional Collaborative of South Florida. Rounding out its grantmaking programs are Recurring Grants, which include funding nursing scholarships at local universities.

The grant categories are varied, but the emphasis is the same: supporting programs and services that will make measurable improvements in health and address the particular needs of traditionally underserved populations. Through grantmaking, the following goals are pursued:

- Reduce health care barriers and increase access to primary care health services, including oral and behavioral health.
- Promote healthy lifestyles and preventive health measures.
- Improve the quality, value and cultural sensitivity of health services.
- Eliminate health disparities for all.
- Strengthen nonprofit health providers' capacity to deliver sustainable health services.

The goal to strengthen nonprofit health providers' capacity to deliver sustainable health services is what drives our efforts to build infrastructure and capacity through information technology grants and support.

HENDERSON MENTAL HEALTH CENTER



Situation analysis

Founded in 1953, Henderson Mental Health Center offers a full array of comprehensive behavioral health services. Some 620 staff members serve more than 20,000 people of all ages, including 5,000 youth under the age of 18, at 16 South Florida centers. Also, its crisis center receives more than 147,000 calls each year, providing emergency assistance to those in need. Nearly all of the people served have incomes at or below the federal poverty guidelines.

Over the previous ten years, Henderson's budget and client roster had both doubled. However, its aging, 20 year-old client management systems and cabling infrastructure had lagged behind.

Henderson sought to gain instant access to information to facilitate clinical decisions that would support clients' need for care. For instance, when a client called the crisis help line and a mobile unit was deployed, the need existed for the crisis phone staff to query the client processing system to determine case relevant information including the diagnosis, name of the physician and case manager, and any other information that would assist in providing care. The need also existed for the client process system to communicate the services rendered or about to be rendered to clients. There was also the need to schedule and keep track of services rendered for a client at multiple sites.

In late 2006, Henderson Mental Health Center assessed that its technology needed significant enhancements. In early 2007, Henderson approached the Foundation to request a grant of \$12,000 for a technology assessment and development of a comprehensive information

technology plan. Upon receipt of the grant, the project went out to bid and Henderson selected Waveguard, Inc. from among three responders to perform the work.

The assessment of all 16 facilities provided detailed information on the renovations necessary to meet current needs, future growth requirements and provide complete desktop computing to all appropriate end-users. It documented the equipment needed to link all of Henderson's facilities. And it detailed critical issues if left unchecked would have had a significant impact on Henderson's ability to meet client needs. For the large South and Central branches, the recommendation was for "a complete revitalization, from new cabling and network equipment to new PCs."

The study called for the data center to be expanded and prepared to support the new applications systems. "Waveguard documented the need and gave us a map to follow," according to Mike Masi, director of Information Technology.

Henderson went back to the Foundation for a much larger \$200,000 grant, which was approved in March 2008. Work began in May 2008 and is scheduled to be completed in April 2010.

Technology needs

The Foundation's \$200,000 grant sought to:

- Replace the wiring, cabling and switches at Henderson's South and Central branches.
- Purchase a new intermediate distribution frame and hardware, personal computers and printers.
- Purchase MS Office and Norton antivirus software.

Project goals

Within a two-year timeframe, Henderson sought to:

- Upgrade and modernize its telecommunications, cabling and multiple system connectivity. This modernization was to help stabilize the network infrastructure and increase application systems availability and reliability.
- Staff members will have client information more easily and quickly accessible and be able to submit billing and required reports more effectively and efficiently.
- Through installation of the upgrades at designated locations, the branches will experience a reduction in system downtime, a reduction in data entry lag time and an overall increase in billing submittal.

Budget

The total budget for all modifications was estimated to be \$1,670,806. The Foundation granted \$200,000 to fund a portion of the assessment's recommendations. Henderson planned to support further technology improvements by making internal funds available and by seeking additional grants. The budget is broken down as follows:

- Professional fees (installation) = \$22,066
- Professional fees (evaluation) = \$16,362
- Equipment & supplies (PC's, printers, wiring, cabling, programs, etc.) = \$157,386
- Anti-virus software = \$4,186

Implementation

A team approach for network implementation was chosen for several reasons:

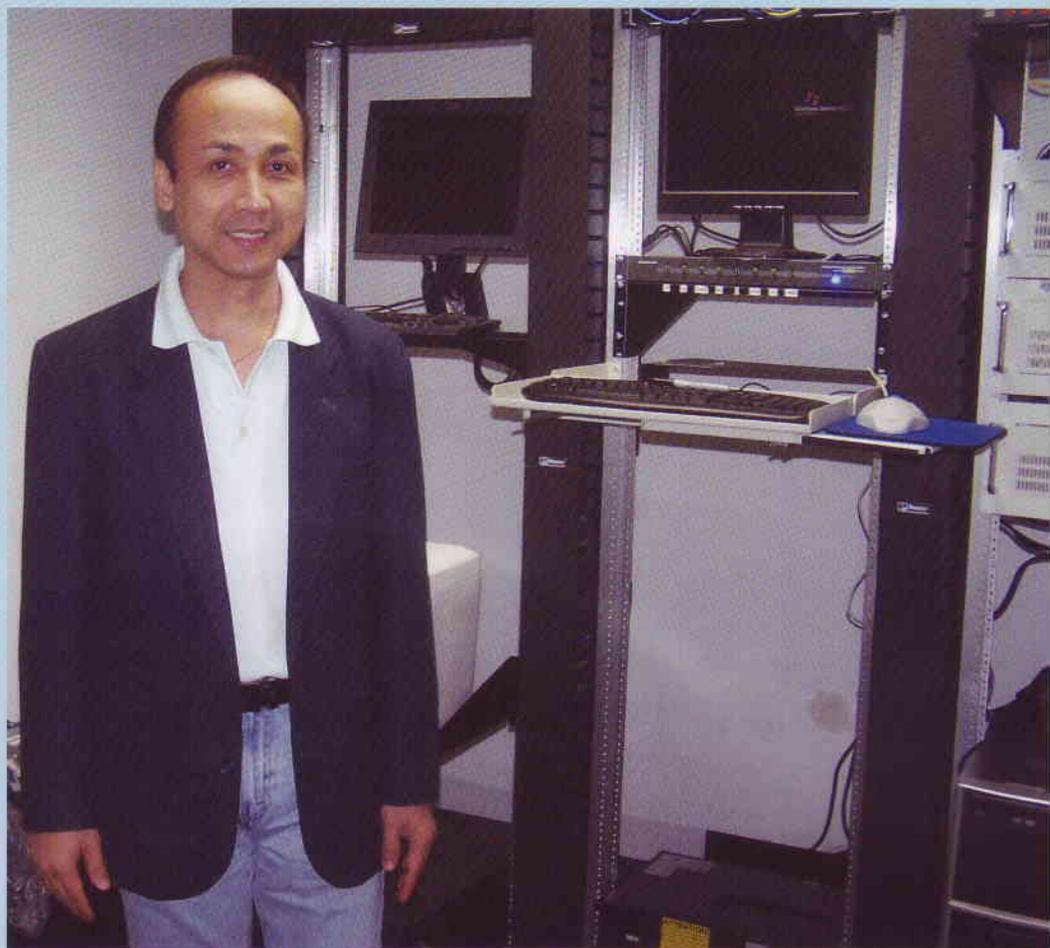
1. Task responsibilities could be shared.
2. Building a knowledge bank of ideas and information was thought to be beneficial.
3. Impacts touched all areas of clinical and administrative operations.
4. Input from all levels of the organization was desired.
5. It was deemed the best way to assure good communication between Henderson and vendors.

Initial channels and protocols were developed by the team and communicated to vendors who were also part of the process. Major roles were assigned:

- Team manager oversees project management including vendors, team members and the project evaluator.
- Project evaluator reviews project goals, objectives and outcomes as an observer.
- Decision maker implements decisions taking into account impacts on facilities and operations.
- South facility coordinator of vendor and client activities to ensure minimal disruption to clients.
- Central facility coordinator of vendor and client activities ensures minimal disruption to clients.
- Two information technology staff monitor vendor activities and assimilate the new technology.
- Vendors with contracts for equipment purchase and installation.

Progress/Accomplishments

The work is still in progress. At the half way mark, the team manager reported that implementation was



running ahead of schedule, with the first year's work essentially accomplished in nine months. Team members, working together, were able to reduce infrastructure costs by \$9,000 on one aspect of the project, an unanticipated savings.

The team continues to follow the project plan. Some projects have had to remain partially completed because the work was advancing ahead of the funding pace. This has caused challenges in the implementation process. Because sub-projects are interrelated, full benefits have had to be deferred until the last ones are completed.

Overall, process and outcome objectives are being exceeded. The first PC and cable infrastructure installations at Central Branch are producing the expected results. Ten new

PCs were installed and 20 existing ones were upgraded for critical users. Downtime was reduced to zero from 30 interruptions per day. Also, the billing process now takes four days compared to 10 days previously.

Masi reported that the team has matured as a unit, working together and addressing complex issues. Teambuilding is seen as extremely useful in anticipation of a major electronic medical records system project yet to come.

"We're making excellent progress. This project is setting us up for installation of an electronic medical records system for which planning has already begun and which we expect to start implementing early next year", said Masi. ■