EXECUTIVE SUMMARY EXAMPLES

The Executive Summary (1-2 pages) will eventually be given to judges at the Semi-Finals and Final Round of the competition. Your document should quickly summarize: the problem, your idea, and the benefits of your solution. The format can be a bullet-point list or it can contain more graphics. For your first draft, focus on content rather than design; make sure to include the basics of your project and the summary of your solution. For the revised drafts, focus more on the design and the function of this piece of paper as a takeaway for the judges.

See five great examples below!

CLOSING SCHOOLS, OPENING OPPORTUNITIES

The creation of **The School Redevelopment Authority** will revitalize communities across Philadelphia that are the victims of closing schools and shifting demographics.

The goal of the SRDA is to acquire and develop the former school buildings. After performing light modifications and low-cost improvements, the SRDA will divide and lease the buildings to a mix of tenants–both non-profit and for-profit–to create a **balanced, income producing portfolio.**

Our innovation is in the **market-based approach to asset management**. Working under the Philadelphia Redevelopment Authority, and in collaboration with neighbors, community leaders and potential investors, the SRDA decides on a **theme for the redevelopment** of each building:

HEALTH AND FAMILIES

The schools will house community clinics, counseling centers and low-cost healthcare facilities improving the health and wellness of communities.

BUSINESS AND TECHNOLOGY

A home for business incubators, entrepreneurship hubs, small workshare office space and neighborhood internet and computer centers, bringing economic vibrancy and opportunity to Philadelphia neighborhoods.

ART AND INDUSTRY

Transformed into artist studios, workshop spaces, small-scale manufacturing and fabrication facilities, the school buildings will house up-and-coming artists and micro-industries.

NUTRITION AND AGRICULTURE

A place for community gardens, grocery stores, weekend farmer's markets, and local food entrepreneurs, these programs will address the expansive 'food desert' throughout low-income neighborhoods in Philadelphia.

COMMUNITY CARE AND EDUCATION

Allows school buildings to be used for a mix of educational and recreational purposes, such as athletic facilities, day care centers, nursery schools, charter schools and adult education classrooms.

THE UNIVERSITY OF PENNSYLVANIA
PUBLIC POLICY CHALLENGE, 2012
TEAM 4

¡Habilita! (Empower!)

Lee Every • William Moen • Thomas Molieri • Marissa Prianti • Jason Riley

In the past decade, the Latino population of Philadelphia has increased by 46% to 181,292 people, or 12.3% of the city's overall population. The majority (68.3%) of school-aged Latinos are enrolled in the city's public schools. Their performance, however, is dismal, with only 43% of Latinos graduating high school in four years. Given that the School District of Philadelphia (SDP) has made layoffs in the past year, endured a very public management crisis, and faces an additional $629 million in cuts this year, there is a clear need for innovative approaches to enhance student performance without further burdening the district.

A significant body of research links parents' involvement in their children's educations to student success in the classroom. Philadelphia's Latino population faces significant barriers to this involvement, including a language barrier, low parental literacy rates, and lack of computer literacy/access among parents, to name a few.[1]

Facing many of the same challenges, the Denver school system launched "La Educa" in 2009. La Educa is a radio program that airs three times per week on a Spanish language station. It informs parents of what is taking place in the district, the rights and responsibilities of students and parents, and features a call in session that allows parents to direct content. The initiative was based on the idea of meeting Latino parents where they are. Many work in service industry occupations where they have access to radio throughout the day. In its first year, La Educa had 54,200 listeners. Today, the show averages approximately 100 callers per month.

The Denver program is run out of the Denver Public School District's Office of Multicultural Affairs. We propose to launch a similar initiative in Philadelphia, but with a different model. As noted above, SDP is not in a position to take on new programming. There is, however, a very active network of Latino advocacy organizations that can be leveraged to develop a partnership between Spanish language radio, community development organizations, and SDP to make this initiative a success.

The Denver Public School District has offered its support and guidance in the development of this initiative. We have begun conversations with Latino community organizations including *Juntos* and *Congreso de Latinos Unidos*. The Spanish language radio station *El Voz* has agreed to partner on the initiative, including production of the show, provision of the on-air talent, and air time. Members of the School Reform Commission have agreed to meet with our team to brainstorm the model, partners, marketing, and funding. Additionally, the Archdiocese of Philadelphia's Office of Multicultural Affairs has offered advertising support, and SDP's Multilingual Family Support Office has pledged programming assistance.

At this stage, we envision a Spanish language radio program for parents that will keep them informed of what is happening in the school district, and provide them with the knowledge and resources necessary to participate more fully in their children's educations. We will also explore the possibility of podcasts. Both the radio program and potential podcasts would be implemented at no cost to the city or SDP.

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[1] *Parental Involvement and Student Achievement: A Meta-Analysis* by William Jeynes, *Family Involvement Research* Digests, December 2005. Accessed at http://www.hfrp.org/publications-resources/browse-our-publications/parental-involvement-and-student-achievement-a-meta-analysis.
Parental Effort, School Resources, and Student Achievement by Karen Conway and Andrew Houtenville, *Journal of Human Resources*, Spring 2008. Accessed at http://www.unh.edu/news/docs/Conway_May08.pdf.

re:Mind
Closing Gaps in Mental Health Continuity of Care

Executive Summary

re:Mind is an appointment reminder service targeting individuals discharged from inpatient mental health hospitalizations. **re:Mind** calls for the creation and adoption of a cheap, simple, and research-supported intervention that addresses the #1 reason patients miss their initial appointment—forgetting. By facilitating successful establishment of outpatient care, **re:Mind** has the potential to save the City millions of dollars in wasted time and preventable hospitalizations, while preserving the mental health of thousands of our fellow Philadelphians.

OUTCOMES
- *Short term*: improve initial outpatient mental health appointment attendance rates.
- *Intermediate term*: decrease rates of re-hospitalization, shorten wait time for initial appointments, reduce lost revenue and health care costs associated with no-show and readmissions.
- *Long term*: improve lifetime outcomes for mental health consumers, create a "pathway to policy" for future policy initiatives.

THE PROBLEM

WHAT'S WRONG?

In Philadelphia, hospitals discharge upwards of 11,000 patients every year from inpatient acute psychiatric care.[i] As part of a movement towards recovery-oriented treatment, the standard practice is to ensure continued care by scheduling an appointment in advance of discharge connecting patients to an outpatient provider.[ii] However, on average only 42% of those initial appointments are kept.[iii] Research indicates that **the most common single reason cited for non-attendance at mental health follow-up appointments is forgetting the appointment**.[ivv]

SO WHAT?

Serious mental illnesses generally require long-term treatment to maintain recovery.[vi] Patients who miss their initial outpatient appointment are less likely to adhere to their medications and treatment plans[vii] and up to 50% of patients who miss appointments drop out of scheduled care[viii]. Newly discharged patients who do not attend follow-ups have been reported to have a **two- to three-fold increase in the rate of readmission** compared with those who remain in contact with services.[ixx] Patients who miss their initial follow-up appointment have a 1 in 4 chance of being re-hospitalized in 12 months (vs. 1 in 10 if they keep the appointment).[xi] **In Philadelphia, the cost of re-hospitalization for patients who missed their follow-up appointments is roughly $9,429,000 annually.[xii]**

Dropping out of treatment has devastating consequences for many stakeholders:
- *Patients and Communities*- without continued care, mentally ill individuals face an increased risk of unemployment, homelessness, and becoming a threat to themselves or others. 24% of suicides by the mentally ill occur within a month of discharge from hospital.[xiii]
- *Outpatient Providers*- missed appointments mean lost revenue, lowered ability to attract qualified mental health employees, and longer wait times until the next available appointment.
- *Medicaid*- as the largest payer of mental health services in the US,[xiv] waste in mental health services translates to a waste of public funds.
- *Other Patients*- missed appointments create longer wait times to the next available appointment, which in turn decreases the likelihood the appointment will be kept[xv]

THE re:Mind SOLUTION

<u>THE DESIGN</u>

Using software licensed from www.appointmentreminder.org, the **re:Mind** service will exist as a website, **www.reMindPhilly.org,** available to hospital discharge planners. With a simple, user-friendly interface, it will take users a maximum of five minutes to enter necessary contact and appointment information. The website will then automatically generate two reminder phone call attempts, two text messages, and an email in advance of the patient's appointment.

<u>THE RESEARCH</u>

The service is based on findings that reminders reduce no-shows by 28-36% among psychiatric patients.[xvi][xvii] Text messaging offers a rapid, cost-effective, and desirable means to deliver reminders.[xviii][xix] Research suggests patients may find text messaging less intrusive than phone calls.[xx] In a pilot study involving 1,256 patients in 4 British psychiatric outpatient clinics, text reminders reduced did-not-attend status by 25-28% compared to the year prior to the intervention.[xxi] Only 0.1% of patients opted out. The authors of this study estimate that text message reminders could have an annual cost savings of $245 million USD in England.

<u>THE IMPLEMENTATION</u>

Implementation of **re:Mind** tackles the systemic barriers to improving patient care by targeting two of its biggest stakeholders: hospital social service departments, who will be charged with using the service, and Community Behavioral Health (CBH), the not-for-profit organization contracted by the Department of Behavioral Health to provide behavioral health coverage for the City's 420,000 Medicaid recipients. CBH will be charged with long-term project management.

<u>FUNDING</u>

- *Budget*
    - $8,500 for the creation of the website
    - $250 monthly to license the reminder software ($3,000 annually)
    - $500 annually for website updating, repairs, and hosting fees
    - $7,500 for 1 temporary staffer to supervise project development and stage an education campaign targeting Philadelphia's 23 inpatient psychiatric care facilities
    - TOTALS: $19,000 startup costs, $3500 annual maintenance
- *Initial startup costs:* **re:Mind** will lobby for the creation of a "Special Initiative" through the Department of Behavioral Health and Intellectual disAbility Services (DBHIDS).
- *Long-term maintenance*: **re:Mind** system maintenance and data mining will become the responsibility of existing employees within CBH's Continuous Quality Improvement (CQI) department.

<u>ADOPTION</u>

- *Carrot:* **re:Mind** will launch an education campaign targeting hospital social service departments, using the research to appeal their sense of altruism, efficacy, and efficiency.
- *Stick:* **re:Mind** will engage CBH in incorporating **re:Mind** into their utilization manual, making the use of **re:Mind** a mandatory element in receiving reimbursement for discharge planning.

<u>PROJECTED SAVINGS</u>

- If **re:Mind** helps just two patients continue with treatment, it has already recouped its costs.
- **If Philadelphia reduces no-shows at a rate similar to the British pilot study that serves as its model, there would be an estimated annual savings of $2,360,000.**[xxii]

[i] Commonwealth of Pennsylvania Department of Public Welfare. (2010). Readmission within 30 days of inpatient psychiatric discharge. Retrieved from http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/report/p_004127.pdf

[ii] Community Behavioral Health. (2012). Aftercare & discharge planning. Utilization Manual, p. 116.

[iii] Rajasuriya, M., De Silva, V., & Hanwella, R. (2010). Effectiveness of reminders in reducing non-attendance among out-patients. The Psychiatrist, 34, 515-518.

[iv] Mitchell, A. J., & Selmes, T. (2007). Why don't patients attend their appointments? Maintaining engagement with psychiatric services. Advances in Psychiatric Treatment, 13, 423-434.

[v] Killapsy, H., Banerjee, S., King, M., & Lloyd, M. (2000). Prospective controlled study of psychiatric out-patient non-attendance. The British Journal of Psychiatry, 176, 160-165.

[vi] Kreyenbuhl, J., Nossel, I., & Dixon, L. (2009). Disengagement from mental health treatment among individuals with schizophrenia and strategies for facilitating connections to care: A review of the literature. Schizophrenia Bulletin, 35(4), 696-703.

[vii] Sims et al (2012). Text Message Reminders of Appointments: A pilot intervention at four community mental health clinics in London. Psychiatric Services. 63(2):161-168.

[viii] Mitchell & Selmes, 2007.

[ix] Koch, A., & Gillis, L. S. (1991). Non-attendance of psychiatric outpatients. South African Medical Journal, 88, 289-291.

[x] North Sound Mental Health Administration. (2012). Improved delivery of non-crisis outpatient appointments after a psychiatric hospitalization. Nonclinical Performance Improvement Project. Retrieved from http://www.nsmha.org/PDFs/Reports/PIP_NSMHA_Inp7_2012_FINAL.pdf, p. 3.

[xi] MItchell & Selmes, 2007

[xii] Amount based on the following estimates: of the 11,584 Philadelphia patients discharged from inpatient psychiatric care, 20-42% of them miss their appointment, 25% of those will be rehospitalized, and average hospitalization cost of $1400 per diem with an average length of stay of 7.5 days. Data gathered from Center for Disease Control and Prevention. (2009). National hospital discharge survey: 2009 table, average length of stay and days of care - number and rate of discharges by first-listed diagnostic categories. Retrieved from http://www.cdc.gov/nchs/data/nhds/2average/2009ave2_firstlist.pdf; Commonwealth of Pennsylvania Department of Public Welfare. (2010).

[xiii] Mitchell & Selmes, 2007

[xiv] Shirk, C. (2008). Medicaid and mental health services. National Health Policy Forum, Background Paper, 66, 1-19.

[xv] Mitchell & Selmes, 2007

[xvi] Rowett, Rewa and Makhoul, 2010

[xvii] Rajasuriya, M., De Silva, V., & Hanwella, R., 2010

[xviii] Sims et al (2012)

[xix] McLean, S. & Perera, M. (2012). The Use of Short Message Service (SMS) For Patient Appointment Reminders. JMTM. 1(3):53-55.

[xx] McLean & Perera, 2012

[xxi] Sims et al, 2012

[xxii] If similar results were demonstrated in Philadelphia , 898 additional people would now make it to their first appointment, reducing their chance of returning to the hospital within 6 months from 1 in 4 to 1 in 10, leading to an estimated $8,484,000 in savings based on the average length of a hospital stay and the average per diem rate of Philadelphia area hospitals, as outlined in footnote xii.

Faith in Farmers Winter Market Initiative

In recent years several programs have emerged to deal with food deserts and the lack of healthy affordable foods in lower income communities around the city. Organizations like the Philadelphia Food Trust and Farm to City have established different programs and created weekly farmers' markets in traditionally underserved neighborhoods. However, what happens when winter hits and the markets retire for the season?

Our proposal, the Faith in Farmers Winter Market Initiative, provides low-income neighborhoods access to freshly grown foods within the centerpiece of their community – the local church, synagogue, temple or mosque. After or between weekend services, local farmers will set up indoor markets within the religious facility. Community members, both within and from outside the congregation, can then purchase produce, meats and dairy as they would at a spring or summer market. Participating vendors will have to be equipped with EBT (electronic benefit transfer) devices to accept SNAP (Supplemental Nutrition Assistance Program) and WIC (Women, Infants and Children Program) cards. Fortunately, vendors currently participating in Philadelphia farmers' markets already have EBT devices, most through the state-administered Farmers' Market Nutrition Program.

Program Benefits

While establishing a new market of any kind bears risk, connecting religious institutions with local farmers to address a public health problem offers several advantages:
1. Fresh food access for low-income Philadelphians is broadened with minimal involvement of the city government
2. Local farmers are provided new markets during typically slow winter months
3. The concentration of residents at weekend services ensures a reliable consumer base for participating farmers
4. Farmers' markets are effective in community building and disseminating nutrition education
5. The program would require minimal start-up funding and the mutually beneficial partnership between farmers and the host organization should sustain the enterprise

Proven Success

Similar programs have thrived in major cities like Chicago and Washington D.C. as well as small towns like Dubuque, Iowa. Many successful programs have begun with small handfuls of vendors but grew quickly as residents became accustomed to the availability of freshly grown foods. Both in Chicago and D.C., winter farmers' markets hosted by churches now boast 8 to 30 vendors per market; meanwhile, new markets are being created each year to satisfy demand. Most importantly, research has suggested that farmer's markets produce results in lower-income communities. A recent study of farmer's markets in an underserved Los Angeles neighborhood boasted positive feedback from residents:

- 75% came to market to do more than shop.
- 55% felt the market increased their connection to the community.
- 99% believed the market improved the health of the community.

Such ancillary benefits to the community only strengthen the argument for creating a winter program in Philadelphia. The success of the program depends on piquing the interest of local farmers and host organizations while helping coordinate between the two – requirements that are not only realistic but possible in the short-term.

Scope and Operation

Currently, there are five winter markets coordinated by Philadelphia's Farm to Table organization, three of which are within the Philadelphia metropolitan area. These markets are located in Rittenhouse Square, Suburban Station and Chestnut Hill. Our initial goal would be to add at least two new markets in lower-income areas, as defined by the Census Bureau's 2011 median annual household income in Philadelphia. These would be small markets, with at least two vendors at each location. Our group would spearhead the project, but aim to work with organizations like the Food Trust in a consulting capacity. It is unlikely that much staffing would be required, as vendors already pay staff to sell at markets and most religious organizations can find members to volunteer for community functions. Initial funding would be used to pay for promotion and any unforeseen incidental expenses. We believe that if work were to begin this spring, the program could launch the new winter markets by January of 2014.

Immediate Plan of Action

Given the limited financial resources required to push forward with the program, we may immediately begin work on the following:

1. Contact the ten local farmers currently participating in Philadelphia-area markets to gauge interest in additional business opportunities during the winter
2. Contact the Mayor's Office on Faith Based Initiatives for clarity on how public services may be delivered through a relationship with the religious community.
3. Target 2-3 potential host religious organizations in two lower-income areas.
4. Discuss potential costs and feasibility concerns with the Philadelphia Food Trust and Farm to City
5. Evalaute potential funding sources, such as the The Pennsylvania Fresh Food Financing Initiative (FFFI) and the Healthy Food Financing Initiative (HFFI), both administered through The Reinvestment Fund.

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Smart Justice: Probation and Parole Kiosks for Philadelphia

Key Terms

Probation: Probation is an alternative to incarceration in which the offender is permitted to serve the entire sentence in the community.

Parole: Parole is an alternative to continued incarceration in which the offender is permitted to serve the remainder of the sentence in the community.

Low Risk Offender: Any offender deemed, by a widely used set of assessments, highly unlikely to commit a violent crime within the next two years. By definition, these are the least worrisome offenders supervised by Philadelphia Adult Probation and Parole (APPD). There are roughly 12,000 low risk probationer and parolees in Philadelphia at any given time. Low risk offenders are also those most likely to succeed and often require less assistance.

Kiosk: A device similar in appearance to an airport check-in kiosk (see picture and handout) on which probationers sign in using their fingerprint, answer all the standard questions that Probation or Parole Officers (PO's) ask during in-person meetings, indicate issues or a desire to contact their PO, and receive personalized messages from their PO's.

The Current State of Probation and Parole

Low risk offenders on probation or parole must travel from their neighborhoods to APPD's location in Center City (see the handout), where they often wait for hours for what is no more than a fifteen-minute appointment. This system is inconvenient for the probationer or parolee, and it is also extraordinarily time consuming for the PO's, who typically manage approximately 350-400 individual cases at any given time. Under the current system, PO's must spend a majority of their time rushing through these meetings, with little time left for probationers and parolees who need extra help.

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Our Solution

Based on a solution already enacted by New York City and Washington, D.C., we propose a kiosk system for low risk probationers and parolees. Kiosks would be placed within the neighborhoods with the highest concentrations of probationers and parolees, allowing them to check in with the APPD more easily, and freeing up Probation Officers to spend a greater amount of time with high-risk individuals who are more likely to recidivate or their low risk charges that need or seek more guidance.

Objectives

1. To increase compliance with probation and parole for low risk offenders. Offenders will no longer need to travel to Center City to meet with their PO's. Instead, there will be an easily reached kiosk within their neighborhood, and thus they will be more likely to report regularly.

2. To increase the likelihood that low risk offenders will achieve legal means of employment and a healthy lifestyle. Kiosks will enable those who truly need additional support to connect with their PO's (who will have more time due to the lighter meeting schedule) and allow those who have acquired jobs to work with minimal interference.

3. To increase resources for high risk offenders by freeing up PO's. PO's will have a greater impact on recidivism rates if they can focus on high risk offenders and low risk offenders who need or want extra help.

4. To keep better records of probationer and parolee information through digitization.

5. To create a more efficient and cost-effective probation and parole system in Philadelphia.

6. To increase the use of probation and parole as an alternative to jail and prison sentences. Like many prisons and jails throughout the U.S., Pennsylvania's prisons and jails are overcrowded. Use of intermediate sanctions in place of incarceration is vital to fixing this problem. If our program is successful, Philadelphia decsionmakers can be more confident that probation and parole are viable alternatives to incarceration.

7. To increase the use of probation and parole nationally through a more successful system in Philadelphia, and to increase the use of kiosks, which would greatly benefit areas even more spread out than Philadelphia, such a large rural counties.