

About the Foundation

Launched in 1982 under the leadership of James D. Bernstein, the Foundation for Health Leadership & Innovation (FHLI) is the place where programs and partnerships grow to improve health of the whole-person through a whole-community approach. We work to collectively address health issues, and act as a convener for partners by creating an open environment for developing collaborative relationships and advancing new ideas.

Mission:

FHLI develops and supports innovative programs and partnerships that advance affordable and sustainable quality health services to improve the overall health of communities in North Carolina and beyond.

Vision:

We envision healthy communities where all people flourish.

Values:

- Everyone has a right to health care.
- Health encompasses the whole-person.
- Healthy individuals come from healthy communities.
- Care should be delivered in a manner that is collaborative, efficient, compassionate, respectful, and effective.
- Healthcare systems belong to and are shaped by the communities they serve.

About the Fellows Program

Jim Bernstein, FHLI's founder and first president, dedicated his life and work to improving healthcare in rural communities across North Carolina. An innovator and a motivator, he served as a role model to others in how to address some of the most difficult rural health care challenges.

Over thirty years, Jim accomplished a great deal, but he knew that new challenges in rural health would continue to emerge as time went on. In effort to strengthen and expand the next generation of rural health leaders to meet these challenges, he established the Jim Bernstein Community Health Leadership Fellows Program.



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The purpose of the Jim Bernstein Community Health Leadership Fellows Program is to develop future leaders to work in, and improve the health status of, rural and underserved communities in North Carolina. The Bernstein Fellows Program identifies and supports the work of outstanding individuals already working in health services in these areas and share Jim's commitment and passion for rural health.

Mission:

To develop and prepare future leaders to work in, and improve the health status of, rural and underserved communities in North Carolina.

Vision:

To strengthen the next generation of health leaders to provide affordable and sustainable quality health services to communities in North Carolina.

Principle:

To support the work and careers of outstanding individuals who share Jim Bernstein's vision, commitment, passion, and beliefs for improving the health status of North Carolinians, especially those who reside in rural and/or underserved communities.

Goal:

After the two-year fellowship, a Bernstein Fellow shall:

- have a clear understanding of rural and underserved community needs;
- demonstrate leadership skills to engage and collaborate with others to improve the health and economic status of a given community; and
- be prepared and inspired to become a confident, highly-skilled, and influential advocate for the needs of rural communities in North Carolina.

Objectives:

Because of the fellowship:

- Fellows will understand the importance and skills needed to move individuals and communities an improved health status with an interactive, team-based approach.
- Fellows will be introduced to key state stakeholders and organizations that will connect the Fellows to institutional resources available in our state and provide the Fellows with direct educational and networking opportunities.



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- Fellows will build a solid support system through their relationships with program participants and alumni, leadership and project mentors, and faculty and leaders from partner organizations.
- Fellows will develop meaningful and sustainable projects that have a positive impact on their organization and/or community.
- Fellows will understand the challenges that rural communities face, including economic and infrastructure needs, and investigate possible solutions.

Core Elements:

The fellowship emphasizes four core elements through educational opportunities and other experiences:

1. Leadership- The leadership component of the Fellowship involves both formal educational experiences and opportunities to learn from mentors and other health leaders. The formal leadership development programming is offered by a partner organization with extensive experience in leadership development for business and non-profit leaders in North Carolina and beyond. Fellows will also connect with leaders and mentors as appropriate throughout their fellowship who can offer the Fellow coaching and feedback on leadership issues that may arise.

2. Health Care in North Carolina- In order for Fellows to work effectively in their own communities and regions, they need a full understanding of the range of health care issues facing the state and the resources in place to address these issues. Fellows are given opportunities throughout the two years to hear formal presentations on all elements of the health care system, including hospitals, community health centers, health departments, the health workforce, insurance and related issues. These formal presentations are augmented by site visits to rural communities that have developed model programs to effectively address critical problems facing their communities.

3. Rural Life and Economic Development- The Fellows Program is designed on the assumption that health care does not exist in a vacuum, but is an integral part of the social and economic life of a community, and that this is particularly true in a rural area. As such the Fellows Program seeks to give the participants a thorough understanding of the key elements of a "healthy community", one that includes good schools, job opportunities, safe neighborhoods, and easily accessible places for recreation and exercise. Through partnerships with organizations representing a variety of social sectors, Fellows are given opportunities to learn about effective ways that rural communities across NC are addressing the issues of job creation, infrastructure development, resource development, and leadership, and how good quality health care is an essential component of a thriving rural community.

4. Partnership and Collaboration- The Fellows Program is built on the assumption that effective health programs are rooted in collaboration and successful partnerships, both within the health care sector and throughout the community. Fellows are given opportunities during the two years to meet and network with leaders of key health care organizations across the state who may serve as resources for them. In addition there is a strong emphasis as part of the project each Fellow completes to be fully engaged with



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all aspects of the local community and to learn to take full advantage of the array of assets that each community has to offer.

Educational Sessions:

Core Fellowship Sessions- A set of core educational sessions are held over the two-year fellowship period to enhance each Fellow's understanding of the social and economic aspects of rural communities and the key components of the health care system in the state, and to give Fellows an opportunity to hear from important leaders in health care in North Carolina. The sessions are also designed to develop each Fellow's professional skills and leadership capacity as they relate to the current health care climate. During the fellowship approximately 12 days will be devoted to core educational programming, usually in two-day blocks. All fellows are expected to attend these core fellowship educational sessions, and all travel and per diem expenses associated with attendance at these sessions will be covered by the program.

Optional Fellowship Events- In addition to the core educational sessions there are a number of other conferences and annual meetings that are held throughout the year which are offered by professional associations, other leadership development programs, the NC Institute of Medicine, and other partner organizations. These are considered optional and are at the discretion of the Fellow. The Fellow's stipend funds can be used to cover the costs associated with attending these optional educational and professional events.

Site Visits:

North Carolina is a large and culturally rich state. In order to more clearly understand the unique differences, opportunities and strengths of the communities of the state, Fellows participate in two site visits during the course of the fellowship. The site visits give the Fellows an opportunity to observe and better understand how model rural health organizations are effectively meeting the needs of their communities and are contributing to the health and well-being of the people living there. These site visits include a range of community partners including community health centers, rural hospitals, mental health facilities, AHECs, innovative university health programs, and non-profits meeting special needs of local populations, such as those serving seasonal farm workers.

Site visits provide an on-the-ground look at successful community partnerships and how effective and collaborative leaders are vital in creating services that make a difference in enhancing the health of the community. Site visits have been some of the most highly rated events by the Fellows in recent years.

Projects:

During the two-year Fellowship, each of the Fellows is required to complete a project designed to positively impact the health of a rural community or population. These projects serve as a capstone experience for the Fellows, allowing them to build on their own work and to incorporate information they have learned during the course of the Fellowship. Projects range in focus and may involve creation



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and launch of pilot programs, the development and implementation of community assessment tools, staffing a statewide task force, or organizing a conference or meeting on a timely health topic. The projects are individualized in accordance with the Fellow's professional interests and goals and the goals of the Fellow's employer. The Fellow's mentors can serve as additional resources for the project, both in terms of content and in assisting the Fellow in engaging community stakeholders to assure successful outcomes. During the fellowship period, Fellows submit project progress reports, and at the conclusion of the program, submit project summaries and share what they have accomplished

Stipends:

To assist with the project the Fellows are awarded a \$1500 stipend which can be used over the two-year fellowship period, which is defined as the days between orientation and the final project presentation. Expenses directly related to the Fellows project and leadership development are charged against this stipend. This can include, but not be limited to:

- travel and registration fees for seminars or conferences the Fellow requests to attend related to the aims of the Fellows program
- any materials, supplies, or special requested items or travel related to the project development and implementation
- contracting with professional support coaches (up to half of the stipend)
- costs for producing reports, data analysis, or printed materials on the project

Use of stipend funds requires request and written approval from FHLI. Upon approval, a Fellow will be asked to initially cover the costs of the request, and once costs are incurred, the Fellow must submit a reimbursement request and any applicable receipts to FHLI. In special cases, FHLI may assist in direct payment of approved costs, especially when the cost(s) to be incurred is over \$500.00 and is requested at least one month in advance of when payment is due. Reimbursement will occur via mailed check. In some instances, a W9 will be required of a vendor and can be downloaded from the Bernstein Fellows portal.

Mentors:

An important part of the fellowship experience involves connecting each fellow to a mentor to model the role of an effective leader, provide guidance and feedback to the fellow, and to serve as a sounding board when issues arise during the fellowship. Mentors may be a part of the fellow's organization or from an entirely different agency, but should be available to meet on an occasional basis with the fellow and to provide advice and counsel as required. Fellows may select their own mentors or seek assistance from FHLI in identifying an appropriate mentor. Mentors may be invited to join the group for some of the educational sessions of the Fellows, but attendance at these sessions is not a requirement or expectation for serving in a mentor role. At times, Fellows may be connected to an FHLI leader, fellowship program alum, or other community or state leader to assist with special topics or concerns.

Evaluation

Program evaluation has been an important component of the fellowship since its inception. Several methods are used to assess the value of various aspects of the program, to make improvements in the curriculum, and to demonstrate program impact; they include:

1. Group Interviews-
Following group educational workshops and events, program staff host group discussion to identify the strengths and the areas for improvement in regards to each event.
2. Individual Questionnaires-
Following group educational workshops and events, program staff send electronic questionnaires to Fellows for individual, anonymous feedback on each event.
3. Supervisor Surveys-
At the end of the Fellowship, program staff send electronic surveys to Fellows' employers to garner feedback on the impact of the program in regards to Fellows' knowledge and skill development, performance, and outcomes.
4. Alumni Surveys-
Periodically staff send electronic surveys to Fellowship alumni for feedback on their program experience and updates on project outcomes and career advancement since the completion of the program.

Additional evaluation methods may be developed in conjunction with program needs.

Contact Information

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