

Total Population Health Approaches (in Partnership with Health Care)

John Auerbach
President and CEO



Meet Fran Edwards:

- ❑ At doctor for first physical in 5 years
- ❑ 55 years old, married, smokes, overweight, little exercise
- ❑ Asthmatic, pre-diabetic
- ❑ Stopped taking medications in past due to cost



She Needs More Than Health Care

- **Income** - Low income, family of 5
- **Barriers to Fitness** – Safety, few parks, no nearby supermarket
- **Sub-par Housing** – Mold and ventilation problems



Her Doctor Tries to Help

- ❑ Screens for social needs
- ❑ Helps her seek new housing - via local agency
- ❑ Helps meet food needs - on-site help with emergency food assistance

Housing application form

1 Are you eligible for housing?

If you have come to live in the UK from abroad, under the Housing (Scotland) Act 2001 and the Asylum and Immigration Act 1999 local authorities must find out if you qualify for public help, including housing. Please answer the questions below.

1a Are you and all members of your household British citizens?

Yes No

1b If you have answered 'No', please tell us your and their nationality.

We may speak to the immigration authorities or associated organisations to check the information that you have given us and to get more relevant information.

If you are not sure whether this applies to you, please contact North Lanarkshire Council or any of the partner landlords on the back page of this form.

1c Information about you

Title (Mr, Mrs, Miss and so on)

Last name

First name or names

Are you, or have you ever been known by any other name (an example of this could be your maiden name, or if you have ever changed your name).

Date of Birth

National Insurance number

E-mail address

Daytime phone number

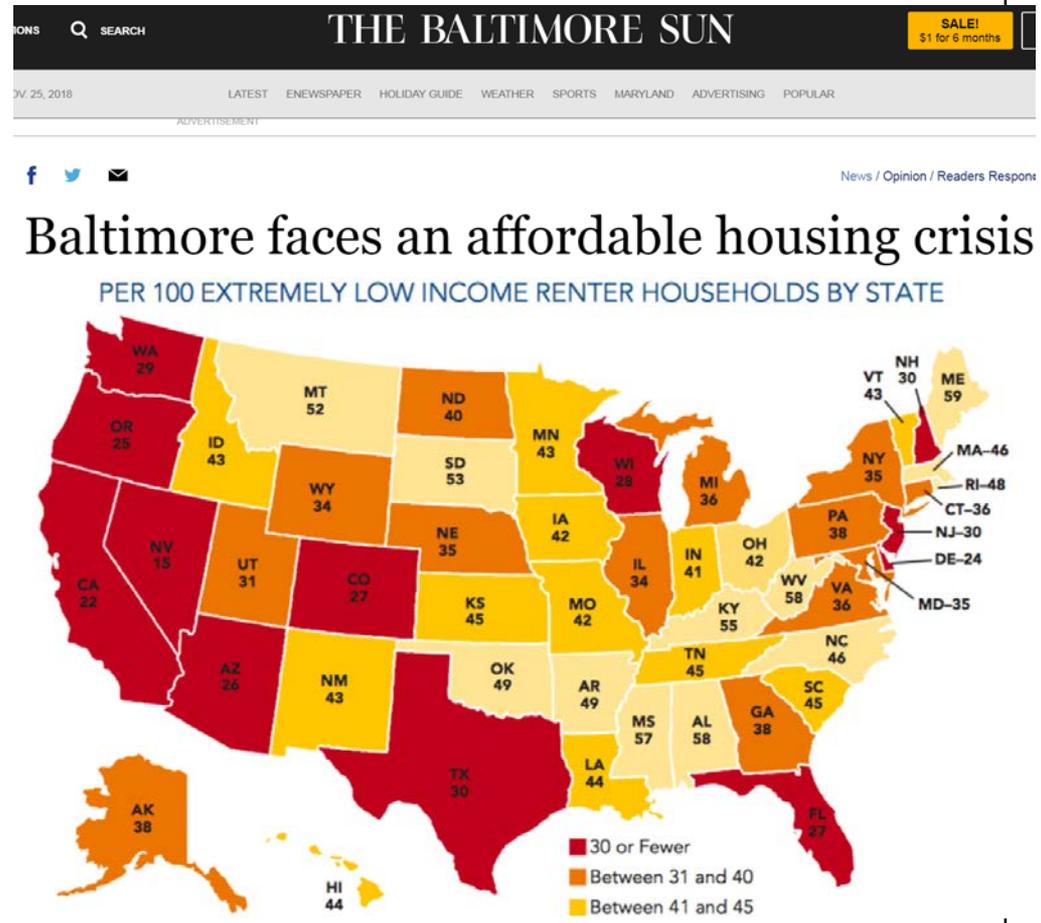
Mobile number

But There's Only So Much Her Doctor Can Do



There Are Many Mrs. Edwards

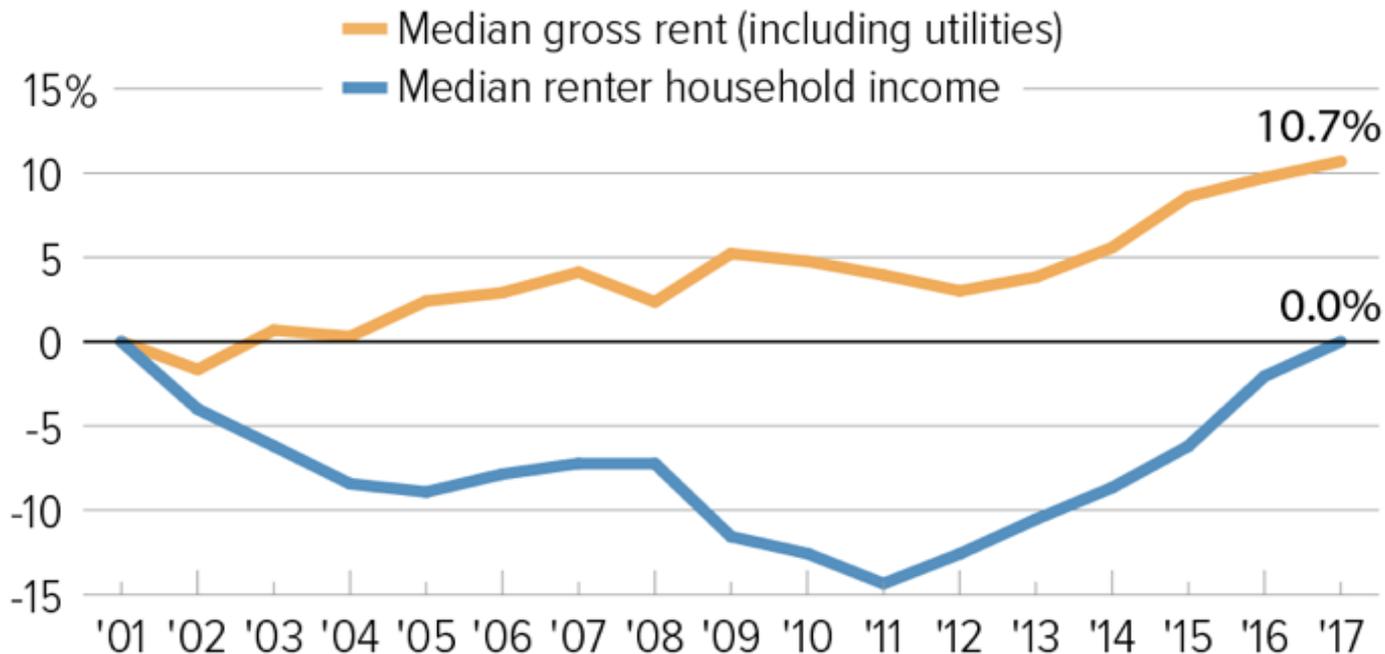
- U.S. has shortage of 7.4 M affordable/available rental homes for poorest
- 25 % of MD renters spend 50 % or more of income on rent.



Housing Costs: Problem for Both Low & Middle Income People

Renters' Incomes Haven't Caught Up With Housing Costs

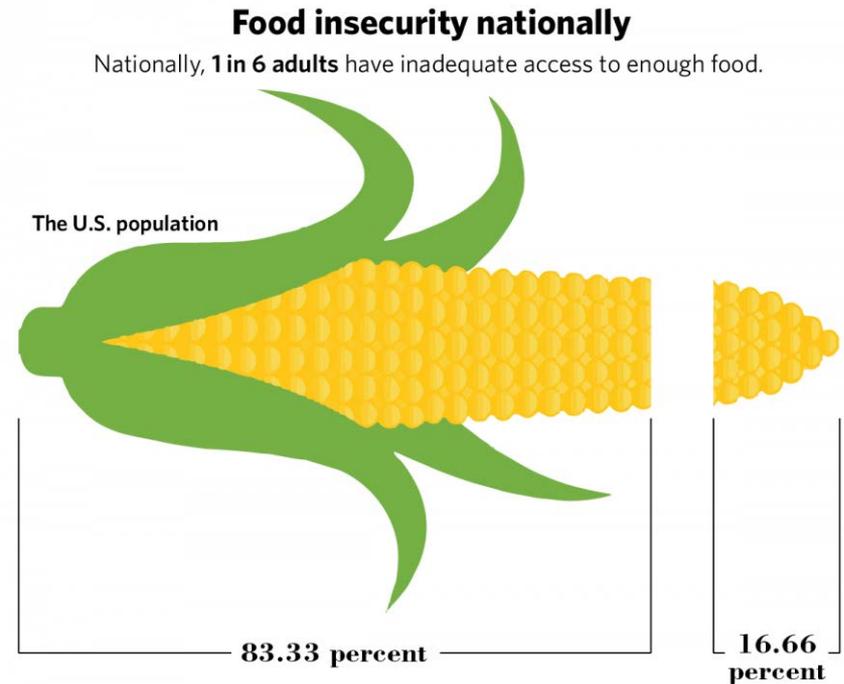
Percent change since 2001, adjusted for inflation



Source: CBPP tabulations of the Census Bureau's American Community Survey

Same Picture with Food and Other Needs

- ❑ 1 in 6 adults Americans are food insecure;
- ❑ 5 M of them are older adults
- ❑ 24 M live in food deserts
- ❑ 2 M live in low-income, rural areas; 10+ mi. from supermarket



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SOURCE U.S. DEPARTMENT OF AGRICULTURE

A Total Population Approach Includes:

□ Housing:

- Expand the housing supply
- Improve the existing housing stock
- Lower the cost of housing

□ Food

- Increase the availability of healthful foods
- Lower the cost of food
- Improve mass transit

THE SOCIAL DETERMINANTS SPECTRUM

Working in Just One Box is Insufficient

Insurers/providers coverage & hospital benefits

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In-house social services assistance (at clinical site where screening is performed)

Community-based social & related services; single or multiple programs or services

Changes to laws, policies, regulations or community-wide conditions; working across sectors

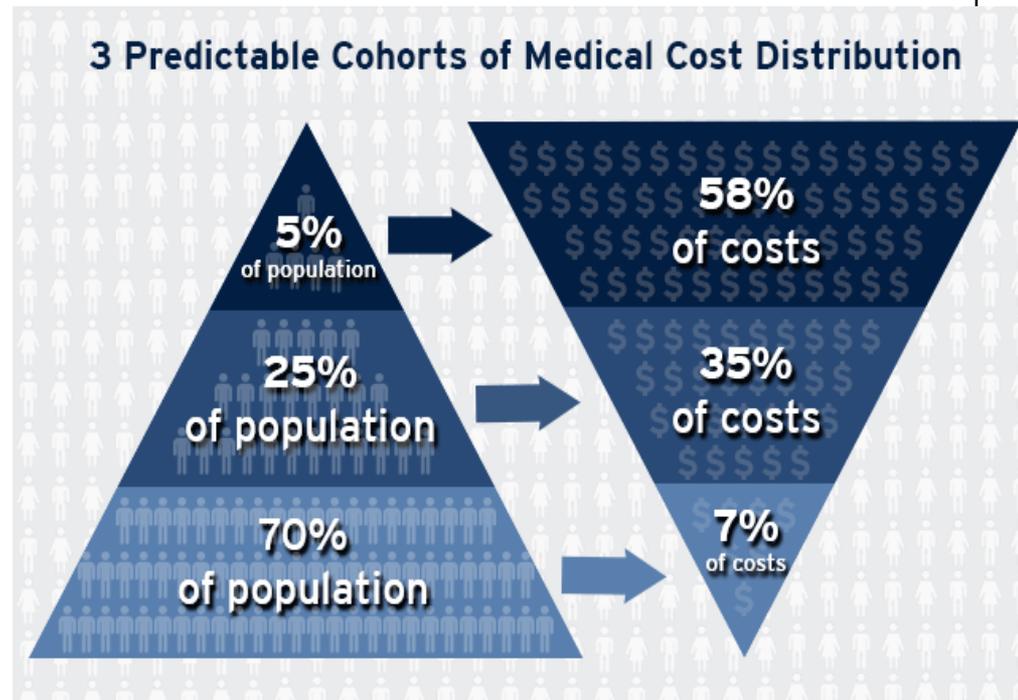
Addresses patient social needs

Addresses community social determinants

How Much Can Health Care Do?

The Limits Include:

- Emphasis on reducing costs of most costly
- Short term need for return
- “Attributable” patient focus
- MD is a model - total respons. for Medicare; all payer pop improvements

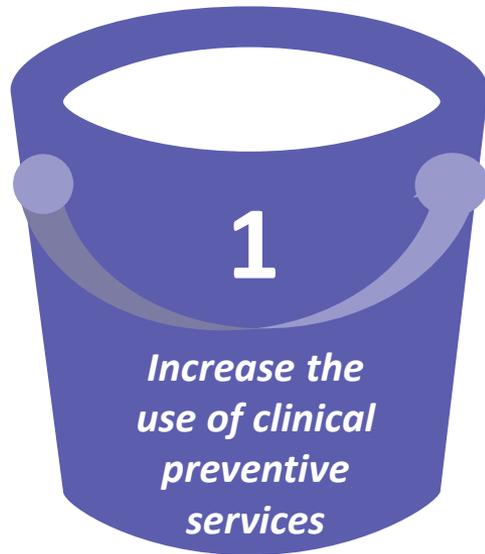


Health Care Should Do as Much as Possible

- Screening
- Bringing social services in-house
- Referring skillfully to community agencies
- Streamlined feedback loops
- Considering broader needs in its community benefits & investments
- Supporting resources for other sectors to:
 - Address the community-wide needs
 - Address the underlying problems

The 3 Buckets of Prevention

Traditional Clinical Prevention



Health Care

Innovative Clinical Prevention



Community-Wide Prevention



Public Health

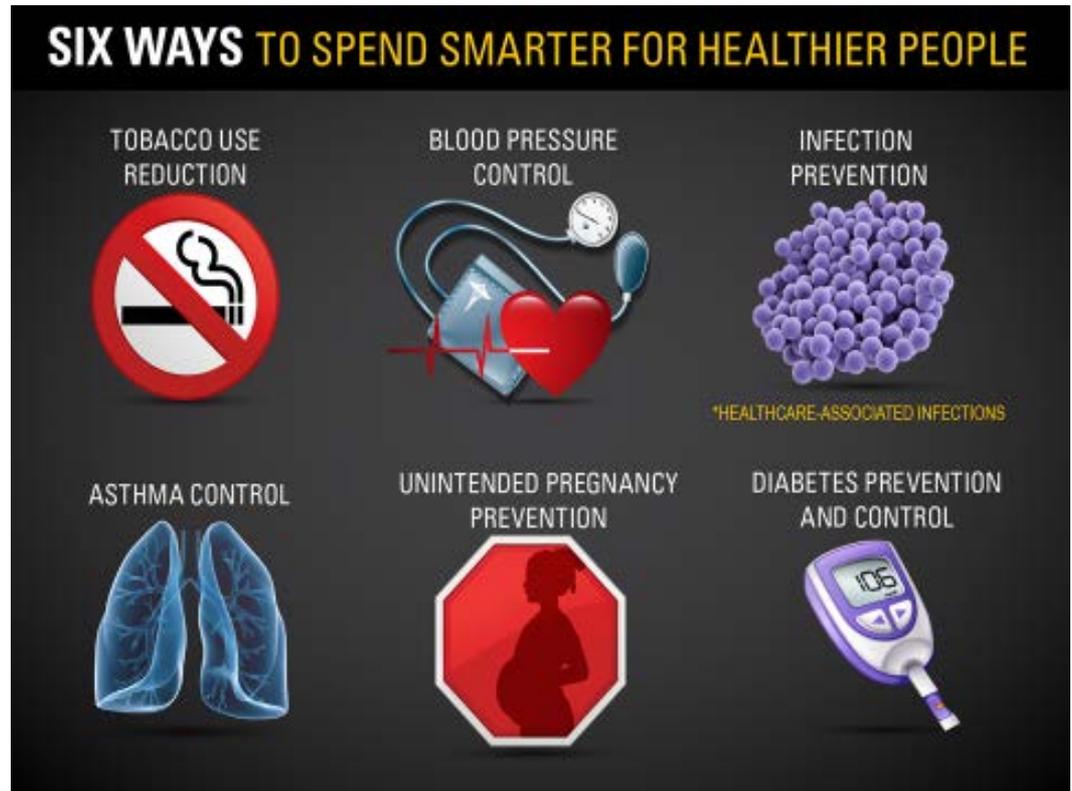
Bucket 1: Traditional Clinical Approaches

Focus on Preventive Care



Development of 6 | 18 Initiative

- ❑ Focus on 6 high-cost, high-prevalence conditions
- ❑ Review of CIO evidence-based clinical interventions
- ❑ 18 interventions identified



Make Diabetes Prevention Widely Available

YOU CAN TAKE CONTROL

REDUCE YOUR RISK TODAY



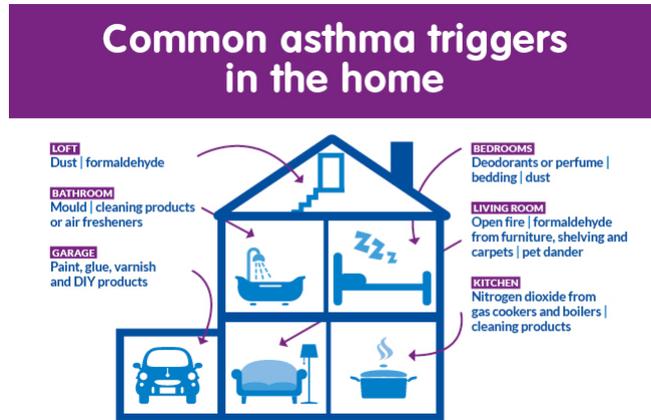
YMCA's DIABETES PREVENTION PROGRAM

Bucket 2: Innovative Patient-Centered Care

Focus on Preventive Care



To Address Asthma: Healthy Home Risk Reduction

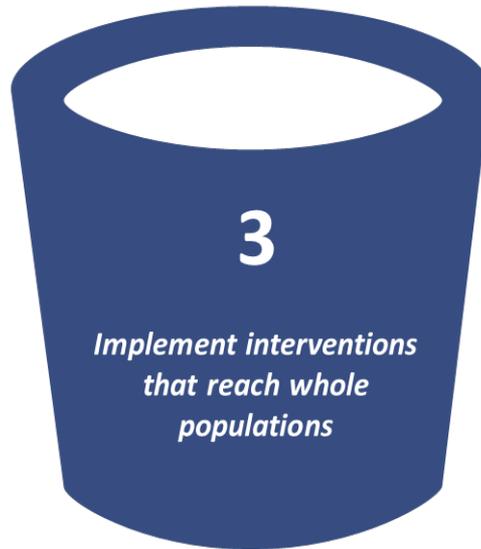


Home visit by CHWs to

- Provide additional education/ encouragement
 - Assess risk factors in the home
 - Assist in removing risk
- Coordinate/education schools

Bucket 3: Community-Wide Health

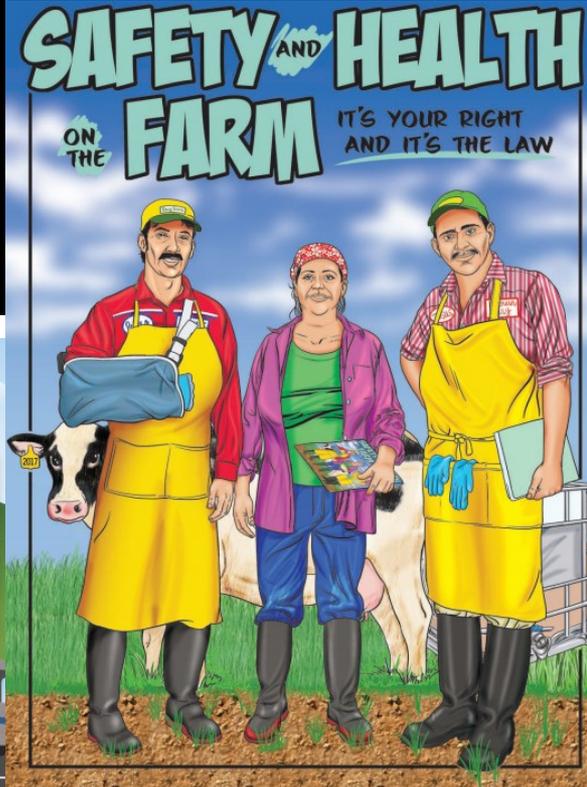
Focus on Preventive Care



Social Determinants Of Health: More Widely Recognized

Social Determinants of Health and Equity

The Impacts of Racism on Health



HOUSING & HEALTH

IMPROVED WATER & SANITATION

reduces diarrhoea related deaths in young children.

BETTER VENTILATION

means fewer eye and lung irritations and smoke related diseases.

BETTER FLOORING

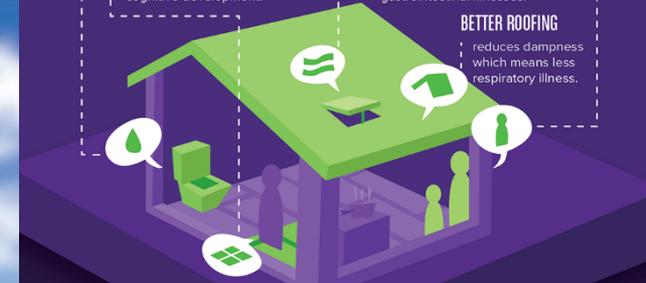
reduces parasitic infestations, diarrhoea, anaemia and improves cognitive development.

HEALTH

improves with reduced rates of malaria, respiratory infections and gastrointestinal illnesses.

BETTER ROOFING

reduces dampness which means less respiratory illness.



THE ROLE OF Transportation

IN PROMOTING PHYSICAL ACTIVITY

TRAFFIC CALMING
Medians, speed bumps and other traffic-calming efforts can reduce the number of automobile crashes with pedestrian injuries by up to

15%

PUBLIC TRANSPORTATION
Public transit users take

30%

more steps per day than people who rely on cars.

SIDEWALKS
People who live in neighborhoods with sidewalks on most streets are

47%

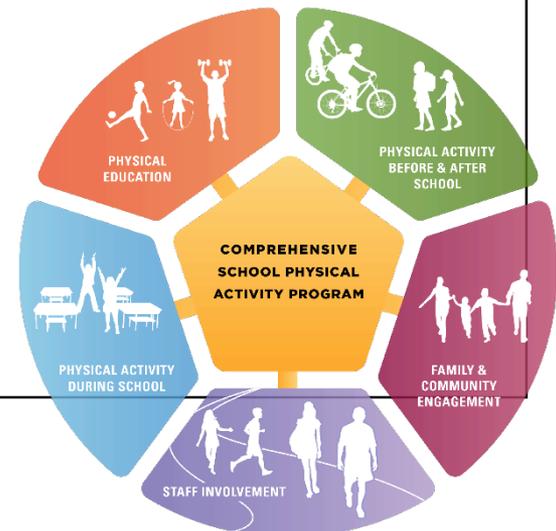
more likely to be active at least 30 minutes a day.

BIKE FACILITIES
In Portland, Ore., bicycle commuters ride

49% of their miles on roads with bike facilities, even though these are only 8% of road miles.

Active Living Research
www.activelivingresearch.org

SOURCES: SIDEWALKS: Smith J, Bauman H, Bullman A, et al. "Neighborhood Environments and Physical Activity among Adults in 11 Countries." *American Journal of Preventive Medicine*, 2010; 48A-48E, June 2009. BIKE LANES: Gill J et al. "Bicycling for Transportation and Health: The Role of Infrastructure." *Journal of Public Health Policy* (2009) 30, 595-610. doi:10.1093/jphp/30.5.595. TRAFFIC CALMING: Bunn F, Collier T, Frost C, et al. "Area-wide Traffic Calming for Preventing Traffic Related Injuries." *Cochrane Database of Systematic Reviews* (3), January 2010. LINK R. "Area-wide Urban Traffic Calming Schemes: A Meta-Analysis of Safety Effects." *Accident Analysis and Prevention*, 2010; 44(1): 37-46, May 2010. PUBLIC TRANSPORTATION: Saunders K. "Public Transit, Obesity, and Mental Costs: Assessing the Megafuel." *Preventive Medicine*, 48(1): 14-21, January 2008.



- School-Based Programs to Increase Physical Activity
- School-Based Violence Prevention
- Safe Routes to School
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention



Changing the Context

Making the healthy choice the easy choice

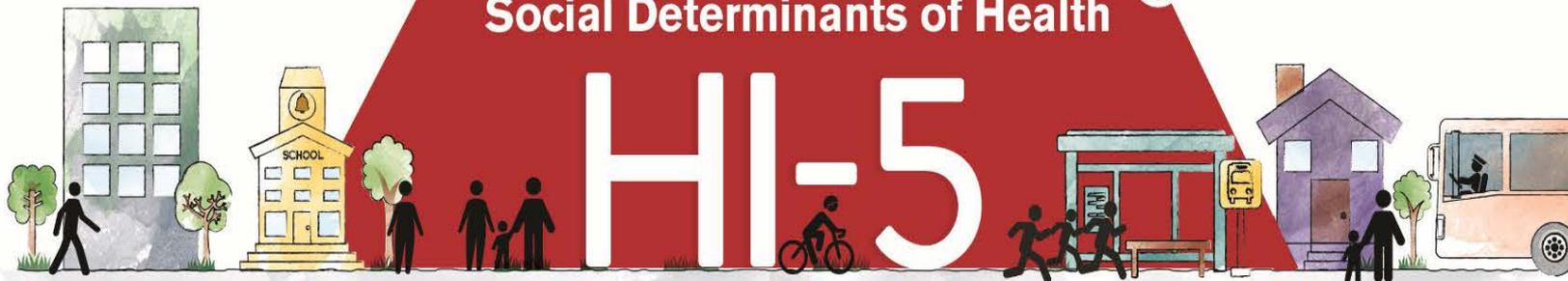
- Counseling and Education
- Clinical Interventions
- Long Lasting Protective Interventions

- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation



Social Determinants of Health

HI-5



HEALTH **IMPACT** IN 5 YEARS

cityhealth



cityhealth

AN INITIATIVE OF

the de Beaumont Foundation + Kaiser Permanente



Earned Sick Leave

Earned sick leave laws reduce the spread of contagious illnesses, increase employment and income stability, and save cities money in health care costs.

LEARN MORE ▶



High-quality, Universal Pre-Kindergarten

Children who attend high-quality pre-k are more likely to succeed in school, go on to stable jobs and earn more as adults—all of which are linked to better health and stronger communities.

LEARN MORE ▶



Affordable Housing/Inclusionary Zoning

As cities grow, it's important that residents of all income levels have access to affordable housing that sets them up for good health.

LEARN MORE ▶



Complete Streets

Complete streets policies unlock opportunities by allowing city residents to safely walk, bike, drive and take public transit around their community.

LEARN MORE ▶



Alcohol Sales Control

Neighborhoods with high concentrations of alcohol outlets are linked to more drinking and higher rates of violence and driving under the influence. Policies that control the number of alcohol sales outlets can reduce crime, increase safety, and reduce spending on health care and criminal justice.

LEARN MORE ▶



Tobacco 21

Curbing tobacco use among young adults has been shown to decrease the number of people who start—and continue—smoking.

LEARN MORE ▶



Smoke Free Indoor Air

Comprehensive smoke-free air laws protect non-smokers from secondhand smoke and reduce smokers' consumption of tobacco—the leading cause of preventable death in the US.

LEARN MORE ▶



Food Safety and Restaurant Inspection Rating

Policies requiring food establishments to publicly post safety inspection "grades" empower consumers, reduce foodborne illness rates and cut down on health care costs.

LEARN MORE ▶



Healthy Food Procurement

Policies that make sure healthy food options are available on public property aid city residents in making smart decisions that will help them achieve and maintain a healthy weight.

LEARN MORE ▶

Preview of Coming Attractions:

Promoting Health Improvement and Cost Controls in States (PHACCS)

- Trust for America's Health initiative with support from the Robert Wood Johnson Foundation and Kaiser Permanente
- The 12 key health policies each should consider
- What to expect:
 - The Data on What Works
 - Peer Support and Teaching
 - Technical Assistance
- To be released in early Feb., 2019



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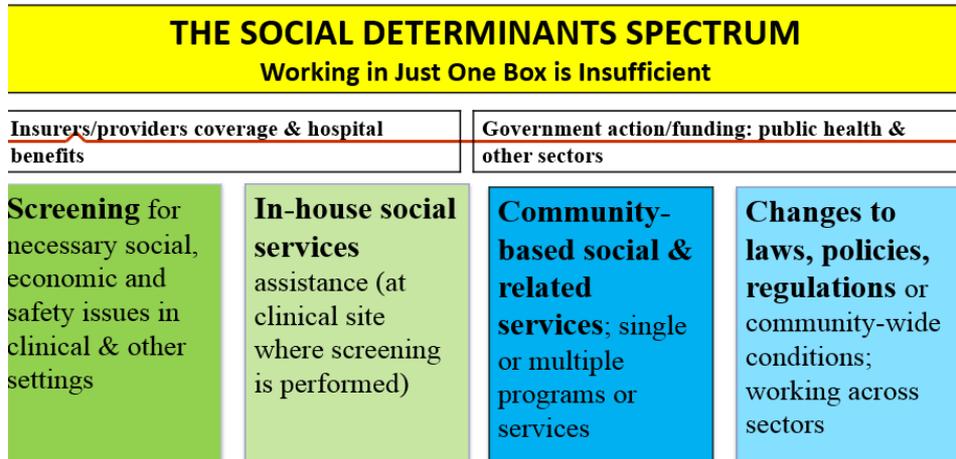
Changes to laws, policies, regulations or community-wide conditions; working across sectors

Addresses patient social needs

Addresses community social determinants

What's Your Role? – Improved patient care linked with total population health

- Policymakers/state agencies:
 - *Link payment reform to wider policy change*
- Legislators, consider:
 - *Consider laws/budgets that total population health*
- Health care providers:
 - *Screen/refer but also support changes that address identified need*
- Community based organizations:
 - *Work to change local conditions while linking with health care*
- Foundations, academia, others:
 - *Help “plug the holes” along the spectrum*



This afternoon

- Breakout sessions on these topics and areas:
 - Measuring Success in the Maryland Model
 - Engaging Local Communities
 - Behavioral Health Innovations
 - The Role of Primary Care
 - Beyond the Health Care System: Policy, Systems, and Environmental Changes
 - Engaging Consumers
 - Tailoring the Maryland Model for Different Populations
- As you attend breakout sessions,
 - Help Maryland identify key barriers and opportunities
 - Identify your role
 - Where could state focus and make a difference?
 - What policy and environmental changes are needed?

She Needs Our Help

Screening plus in-house social & community services
*But also policy changes that prevent and address the
social determinants*

