

Beyond the Medical Neighborhood Collaboration for Healthier Communities

Population Health Colloquium Philadelphia, Pennsylvania March 17, 2014



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Purpose: discuss why healthy community activism can't wait

Discussion threads

- where are we in war for better population health
- where do we need to go
- who cares



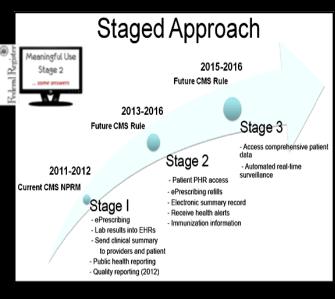




Health Care Transformation

IBM

Data & Information



Safety and Quality Whole Person Orientation Personal Physician Directed Practice Payment for Added Value MEDICAL BECAUSE SOMETIMES, IT'S GOOD TO BE ALL ABOUT ME.

Finances

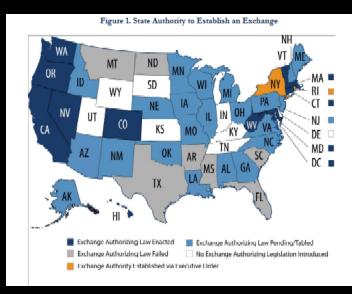






Delivery System

Health Exchanges















Employee Health Clinic Home Health Care Mgmt Vendor Nursing Home DME Supplier



Patient-Centered Medical Home Outcome Indicators

	Total Studies	\$ Cost	Fewer ED Visits	Fewer Inpatient Admits	Fewer Re-Adm.	Better Biometric Indicator	Better Access	More Prev. Service	Better Pt. Sat'n
PEER-REVIEW/ACADEMIA									
Reported outcomes	(n=13)	61% (n=8)	61% (n=8)	31% (n=4)	13% (n=1)	31% (n=4)	31% (n=4)	31% (n=4)	23% (n=3)
INDUSTRY REPORTS									
Reported outcomes	(n=7)	57% (n=4)	57% (n=4)	57% (n=4)	29% (n=2)	29% (n=2)	14% (n=1)	29% (n=2)	14% (n=1)

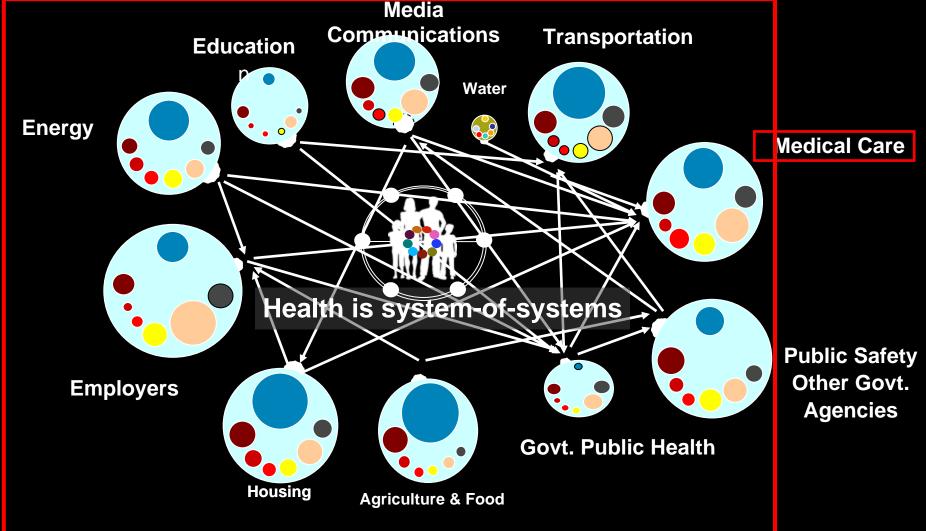


Concepcion

- ■16 y.o. Latina, obese
- ■1 of 4 children, both parents work, one overweight, other obese
- Recent dx type II diabetes
- Care in world class Primary Care Medical Home
- Received all recommended coaching, counseling, training:
- e.g. diet, activity, behavioral health support
- Prescribed metformin to lower blood sugar
- Keeps appointments, non adherent, no change

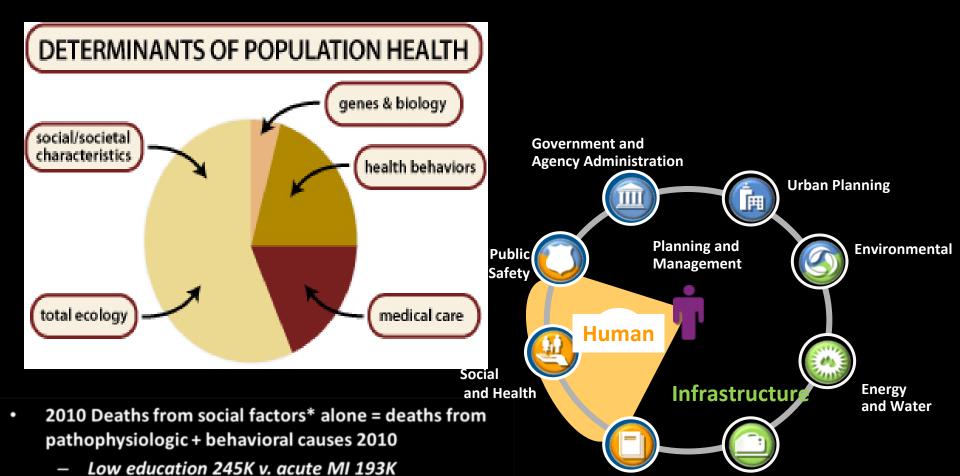
Health is an outcome of nature, mothers, families, communities and behaviors in a complex, dynamic, and highly interrelated system-of-systems





lource. IDM IBV analysis based on OECD

>75% of health is largely determined by factors outside of medical care that are social and ecological (environmental)



Education

Transportation

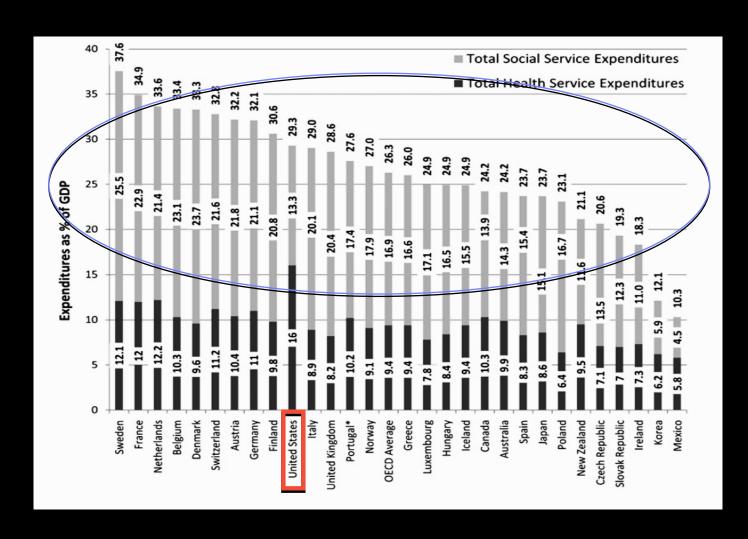
Galea S et al. Estimated Deaths Attributable to Social factors in the US.

Racial segregation 176K v. Stroke 168K

AJPH. 2011;101(8):1456-1465.

Health v. Social Services Expenditures: OECD 2005





THE AMERICAN
HEALTHCARE
PARADOX
WHY SPENDING MORE
IS GETTING US LESS

ELIZABETH H. BRADLEY
AND LAUREN A. TAYLOR

Bradley E, : Health and social services expenditures: associations with health outcomes. BMJ Qual Saf 2011;20:826-831.

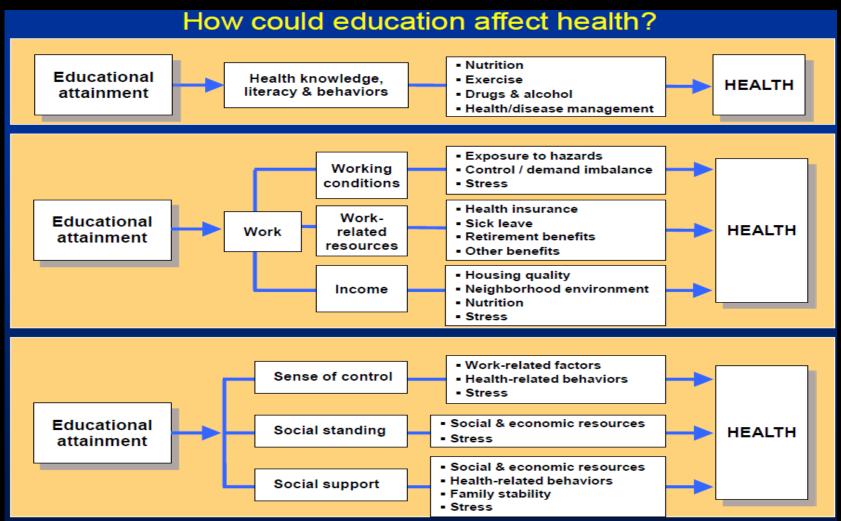
Total Population Health Outcomes from Health Care v. Social Services Expenditures OECD 2005



	Life Expectancy	Potential Years Life Lost	Maternal Mortality	Infant Mortality	Low Birth Weight
Health Care Expenditure (%GDP)					
Social Services Expenditure					
(%GDP)		BMJ Qual Saf 2011;20	0 :826—831		

Bradley E, : Health and social services expenditures: associations with health outcomes. BMJ Qual Saf 2011;20:826-831.

Health System: Schools



Braveman & Egerter, UCSF Center on Social Disparities in Health, 2010

Health System: More Education, Longer Life, Fewer Infant Deaths

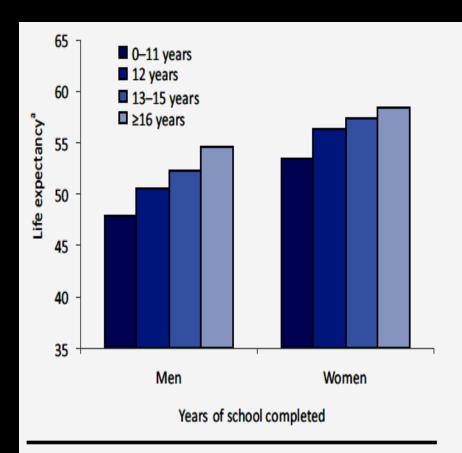


Figure 2. More education, longer life²⁷ aNumber of additional years of life expected at age 25 years

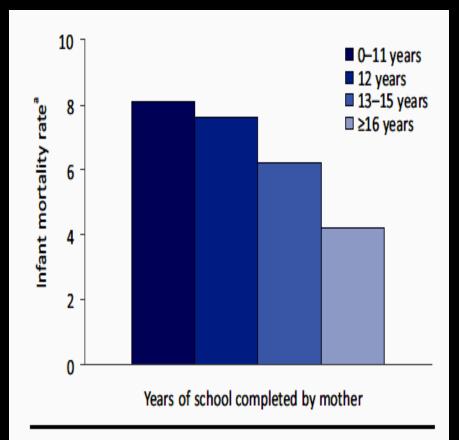


Figure 1. An infant's chances of survival, by mother's education level²⁶ ^aPer 1000 live births

Get Healthy Philly Leadership Team

Mayor Michael Nutter

Marian Tasco, Councilwoman, City of Philadelphia

Dr. Dennis Creedon, School District of Philadelph

Dr. Larry Kaiser, Temple University

David Cohen, Comcast

Daniel Hilferty, Independence Blue Cross

Ronnie Bloom, William Penn Foundation

Jeffrey Cooper, University of Pennsylvania

Ken Trujillo, Trujillo Rodriguez and Richards, LLC Dr. Maria Gold, Drexel University

Leslie Best, Pennsylvania Department of Health Dr. Donald Schwarz, Health Commissioner,

Deputy Mayor, Health and Opportunity

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Get Healthy Philly: Chronic Disease Framework

Environmental Factors & Changing the Context











Shop

Tobacco-Free Living:

- · Promote 100% smoke-free policies for homes, childcare settings, schools, colleges/universities, workplaces, and outdoor spaces
- · Decrease availability and marketing of tobacco products
- Increase access to resources to help smokers guit
- Improve knowledge, attitudes, and norms regarding health effects of smoking and secondhand smoke

Chronic Disease Prevention









Heart Disease





Tobacco Policy and Control

Actions

- •Help smokers quit: social marketing,
- drug coverage, programs, primary care
- •Limit access: educate, permitting,
- monitor, penalties
- Clean air indoor/outdoor: public places,
- bars, childcare, workplaces, colleges
- Culture: youth leadership development,
- community engagement control policies
- Taxation/pricing

Outcomes

- ■25,000 fewer smokers
- •2K intensive program plus free NRT |
- ■7K workers with new low cost NRT
- ■183 new smoke free public spaces,
- affecting 3.7M park/rec visitors
- ■16% reduction Clean IAWPA waivers
- 100K in student smoke/tobacco free
- symposiums/workshops



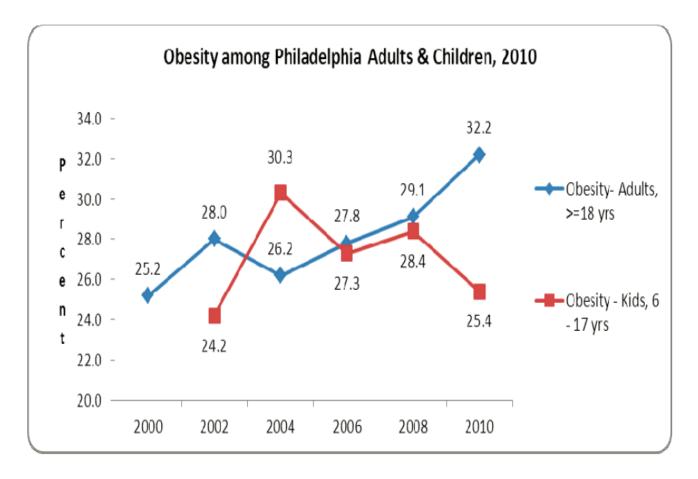
Built environment – safer walking and biking

- 2 new north-south bike lanes and an education & enforcement campaign for an area with a day-time population of 250,000
- Over 28,000 2nd and 5th graders provided pedestrian and bicycle safety lessons





Figure 3: Obesity Rates among Philadelphia Adults and Children, 2000 - 2010









P TECH: NYC, IBM

- PPP: education innovation, talent generation
- 6 year, grades 9-12, AAS degree
- Focus: STEM, finance, manufacturing, health
- Plus: business, leadership, communication, apprentice, job @end

2011: P TECH Brooklyn NY

- PPP NYC, IBM , CUNY
- Focus: STEM

2012: P TECH 5 schools

- PPP Chicago PS, City Colleges
- Business: IBM, Cisco, Microsoft, Motorola, Verizon

2013: P TECH NY State 10 schools (economic development regions)

- PPP regions, local municipalities
- Business: IBM, Cisco, Microsoft, GE Healthcare, Wegman's, Global Foundries, Regeneron, TRC, others

Community Health Initiatives (CHI) Healthy Eating and Active Living (HEAL)



KAISER PERMANENTE®





KAISER PERMANENTE. Community Health Initiatives: Healthy Eating Active Living (CHI-HEAL)

- 3 Cities, communities served by KP: Modesto (38,4K, 54% Latino), Richmond (52,9K, 45% Latino, 29% African American), Santa Rosa (37.9K, 41% Latino)
- **Principles**: place-based, multi-sectoral, multi-level, community engagement

Examples:

- -policy: organization (school/worksites: e.g. healthy entrees) public (urban planning w health impact assessment)
- -environment: more distribution pts. fresh food, lighted walking paths, bike paths around schools

• Results:

- -62 strategies (31 policies, 12 environment, 19 programs)
- -79% (n=49) successfully implemented
- -61% (n=38) considered sustainable (30/38 policies or environment)



THINK

A Forum on the Future of Leadership

New York | September 20-21, 2011

Session III: THINK—Making the World Work Better

Thomas L. Friedman, Foreign Affairs Columnist, <u>The New York Times</u>, and Author

Pascal Lamy, Director-General, World Trade Organization

Andrew N. Liveris, President, Chairman and Chief Executive Officer, <u>The</u> <u>Dow Chemical Company</u>

Sunil Bharti Mittal, Chairman and Group Chief Executive Officer, **Bharti Enterprises Limited**

Laura D'Andrea Tyson, S. K. and Angela Chan Professor of Global Management, Haas School of Business, *University of California*, *Berkeley*

Peter Voser, Chief Executive Officer, Royal Dutch Shell plc



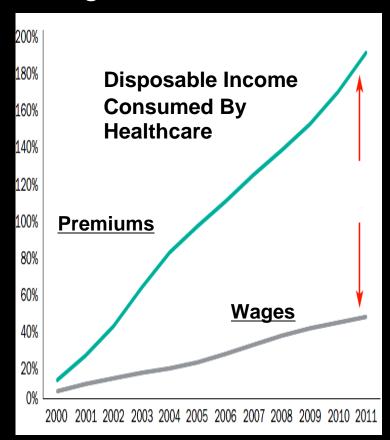
Sustainable Health Systems Visions, Strategies, Critical Uncertainties and Scenarios 2013

Sustainable health systems will depend upon sustained health at home and in communities, well before the healthcare system, as it is currently known, is called upon.

Cultural norms, urban environment, choices in food and drink, how children are parented and educated... must all evolve in a mutually supporting web to create a new age of healthy behaviours.

...poor health depletes disposable income and adversely impacts markets, consumption & global competitiveness

Insurance Premium v. Wages, Cumulative Increase

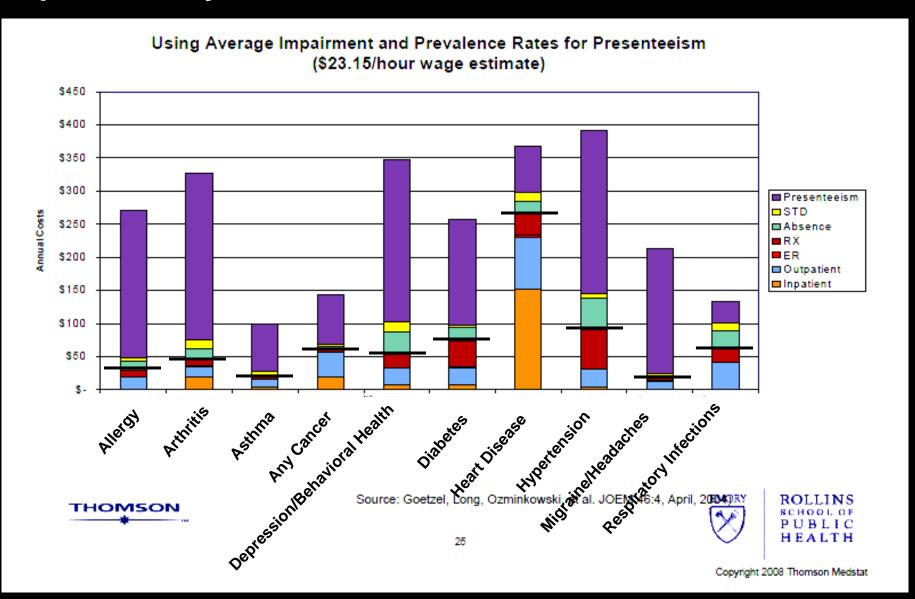


2011 OECD Health Expenditures 2011 Towers Watson Healthcare Cost Survey Bureau Labor Statistics, US DOL

2011 OECD Health Expenditures PPP/Capita, USD

United States	8,608
Switzerland	5,564
Denmark	4,564
Germany	4,371
France	4,085
Sweden	3,870
United Kingdom	3,322
Japan* ²⁰¹⁰	3,120
Spain	3,041
BRIC, S.Korea, Mexico	<3,000

...poor health constrains talent output: productivity costs are 2-3X the cost of healthcare



...Health is a talent issue

Human Capital remains the top challenge, but CEOs are getting more focused on Customer Relationships and Corporate Brand and Reputation						
Global		Global 2013*	Global 2012			
N=1,020	CHALLENGES 2014	N=729	N=776			
1	Human capital	1	2			
2	Customer relationships	4	7			
T3	Innovation	3	1			
T3	Operational excellence	2	NA			
5	Corporate brand and reputation	8	9			



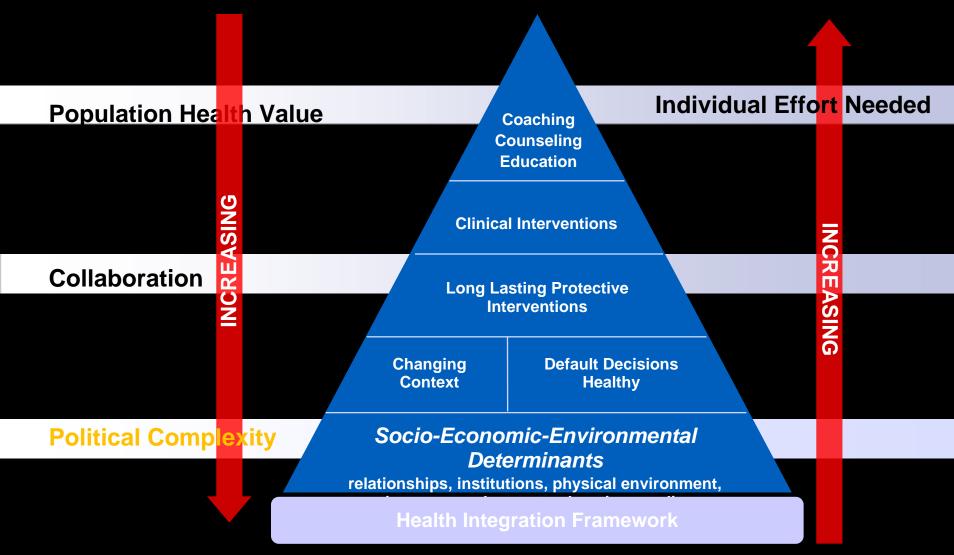
Health is an outcome of dynamics played out in cities, towns and communities

We don't lack for systems oriented approaches for change,
 we need leadership, investment, better information and will

Disrupting these dynamics is a business and national competitiveness issue



"Health Impact Pyramid"





Appendix

Higher Income, Longer Life & Less Chronic Disease

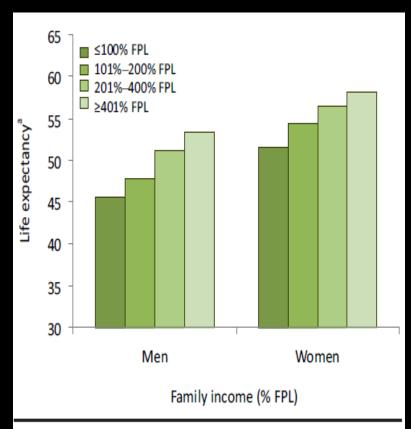


Figure 3. Higher income, longer life²⁷
^aNumber of additional years of life expected at age 25 years FPL, federal poverty level

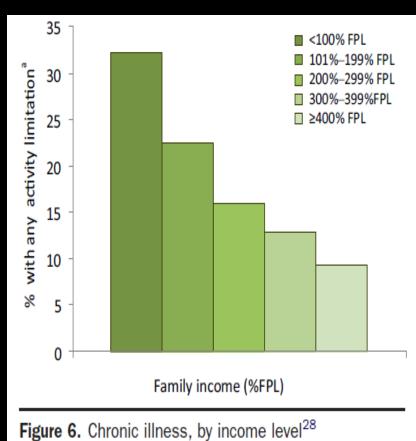


Figure 6. Chronic illness, by income level²⁸ ^aAt age ≥25 years; age-adjusted FPL, federal poverty level