

Preparing for the Future

Linking Arms With Cross Sector Partners

John Auerbach
President and CEO



Meet Fran Edwards:

- ❑ At MD 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

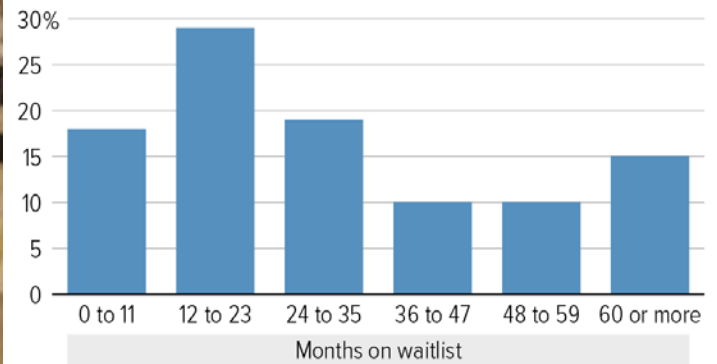
Daytime phone number Mobile number

But There's Only So Much Her Doctor Can Do



Most Voucher Households Endured Long Waits to Receive Assistance

Share of voucher households by time spent on a waiting list



Source: Department of Housing and Urban Development 2016 Picture of Subsidized Households

There Are Many Mrs. Edwards

- U.S. has shortage of 7.4 M affordable/available rental homes for poorest
- In NC - Average rental costs not affordable for those with average wages

HOUSING COSTS COMPARED WITH WAGES

	Hourly wage necessary to afford a 2BR at fair-market rent (FMR)	Monthly cost of 2BR FMR	Annual income to afford 2BR FMR
North Carolina	\$13.63	\$709	\$28,351
Durham-Chapel Hill	\$14.98	\$779	\$31,640
Raleigh-Cary	\$16.33	\$849	\$33,960
Chatham County	\$14.98	\$779	\$31,160

RENTER HOUSEHOLDS (2006-2010)

	Number	% of households	Avg. hourly wage, renter	Rent affordable at that wage
North Carolina	1,157,690	32	\$12.11	\$630
Durham-Chapel Hill*	71,644	40	\$17.80	\$925
Raleigh-Cary	130,899	32	\$12.53	\$652
Chatham County	5,190	21	\$8.08	\$420

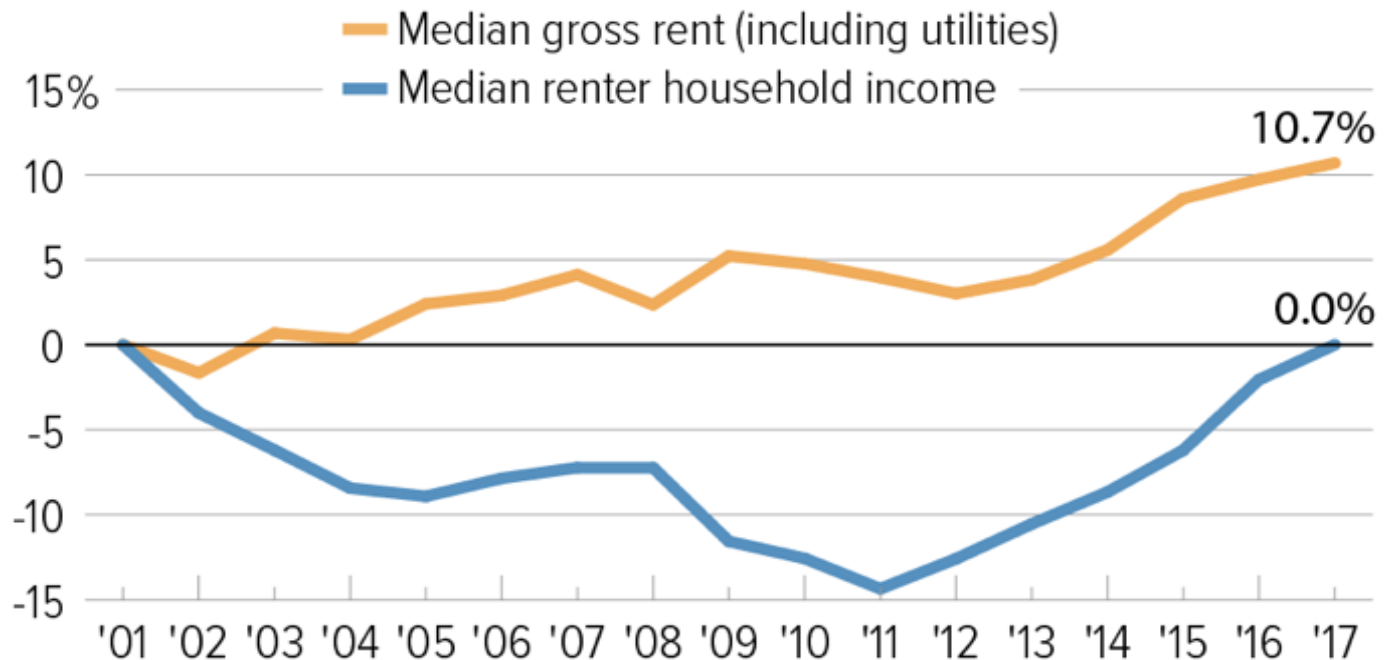
*Large numbers of students at Duke, NCCU and UNC as a proportion of the area's overall population

SOURCE: NATIONAL LOW INCOME HOUSING COALITION

Housing Costs: Problem for Both Low & Middle Income People

Renters' Incomes Haven't Caught Up With Housing Costs

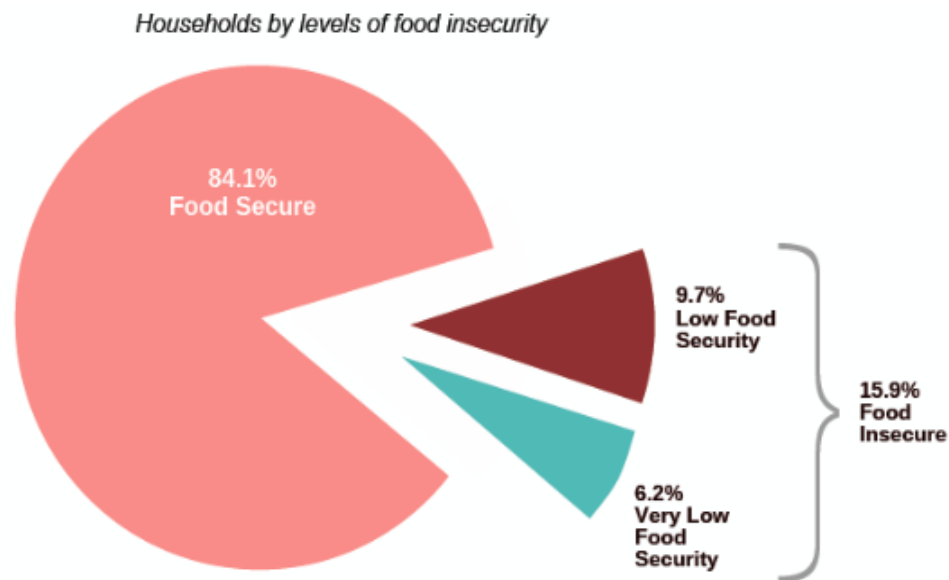
Percent change since 2001, adjusted for inflation



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

Same Picture with Food and Other Needs

North Carolina is the 10th Hungriest State in the U.S.



SOURCE: USDA's 2015 Report on Food Insecurity, 3-year average (2013-2015)

Low Food Security: Homes that often must make tough choices about the amount and quality of food they are able to provide their families.

Very Low Food Security: Homes that often miss meals.

According to the USDA, in the past year more than 90% of these families worried that food would run out; nearly 80% could not afford a balanced meal; and individuals in 96% of homes with very low food security skipped meals in order to make food last longer.

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

Government action/funding: public health & other sectors

Screening for necessary social, economic and safety issues in clinical & other settings

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

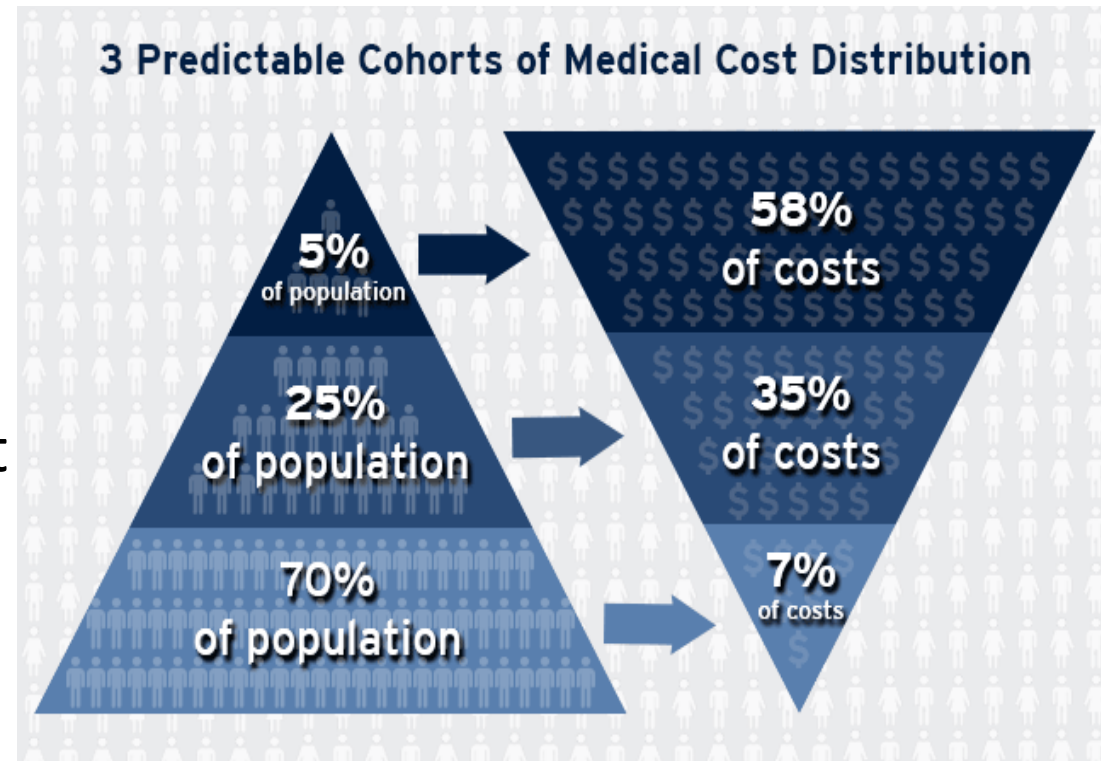
Addresses patient social needs

Addresses community social determinants

How Much Can Health Care Do?

The Limits Include:

- Emphasis on reducing costs of most expensive
- Short term need for return on investment
- “Attributable” patient focus

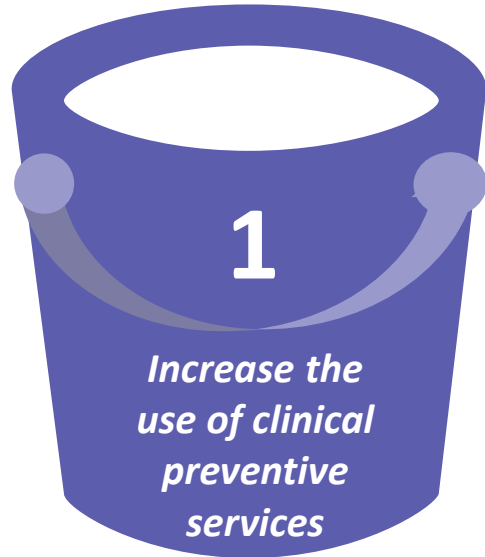


Health Care Should Do as Much as Possible

- Screening
- Bringing social services in-house
- Referring skillfully to community agencies
- 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



Public Health

Community-Wide Prevention



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



Provide All Tobacco Cessation Meds Without Cost



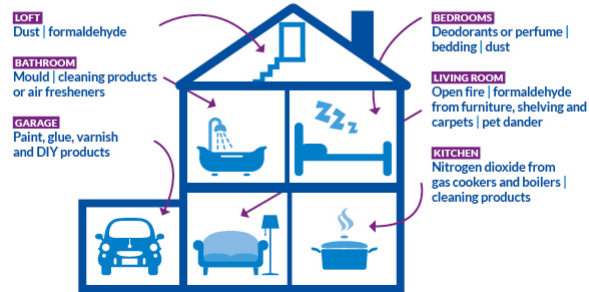
Bucket 2: Innovative Patient-Centered Care

Focus on Preventive Care



To Address Asthma: Healthy Home Risk Reduction

Common asthma triggers in the home



Home visit by CHWs to

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

Bucket 3: Community-Wide Health

Focus on Preventive Care

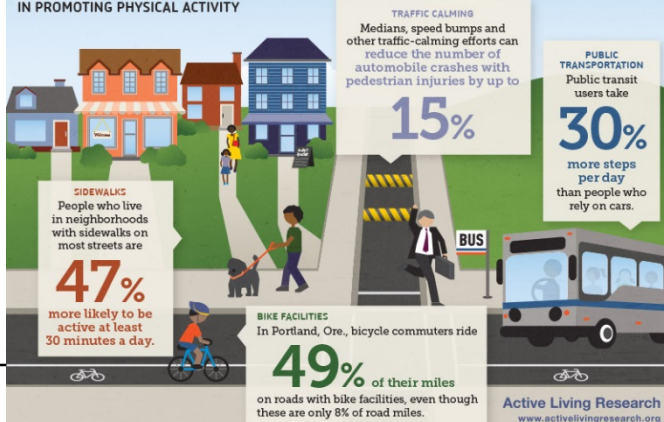


Social Determinants Of Health: More Widely Recognized

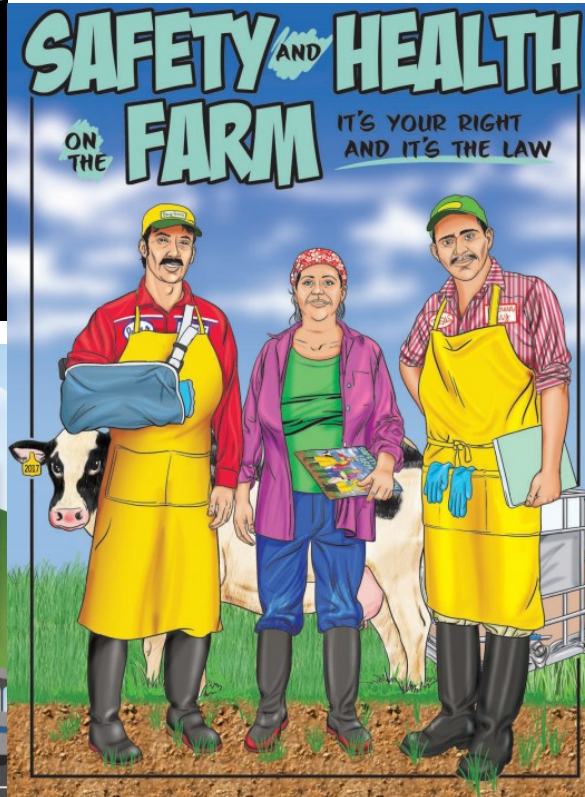
Social Determinants of Health and Equity

The Impacts of Racism on Health

THE ROLE OF Transportation IN PROMOTING PHYSICAL ACTIVITY



Sources: SIDEWALKS: Sallis J, Bauman H, Baurman A, et al. "Neighborhood Environments and Physical Activity among Adults in 11 Countries." American Journal of Preventive Medicine, 2003; 484-490, June 2009. BIKE LANES: Dill J et al. "Bicycling for Transportation and Health: The Role of Infrastructure." Journal of Public Health Policy (2009) 30, 595-610. doi:10.1057/jphp.2008.561. TRAFFIC CALMING: Bunn F, Collier T, Frost C, et al. "Area-wide Traffic Calming for Preventing Traffic Related Injuries." Cochrane Database of Systematic Reviews (1), January 2002. LINK R. "Area-wide Urban Traffic Calming Schemes: A Meta-Analysis of Safety Effects." Accident Analysis and Prevention, 2010; 43(2): 207-216, May 2010. PUBLIC TRANSPORTATION: Caporaso R. "Public Transit, Obesity, and Medical Costs: Assessing the Magnitudes." Preventive Medicine, 44(1): 14-21, January 2008.



HOUSING & HEALTH

IMPROVED WATER & SANITATION

reduces diarrhoea related deaths in young children.

BETTER FLOORING

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

BETTER VENTILATION

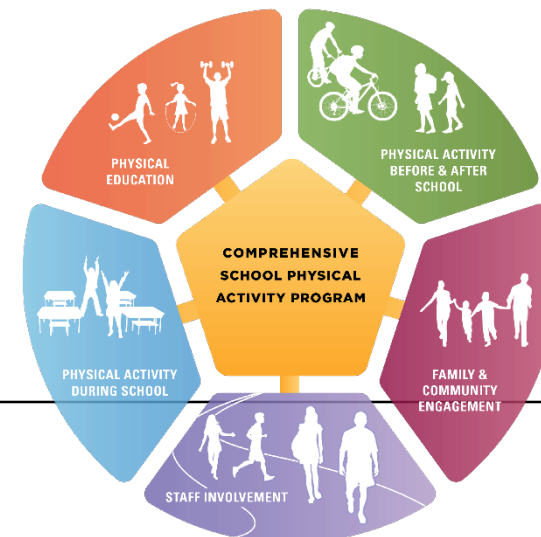
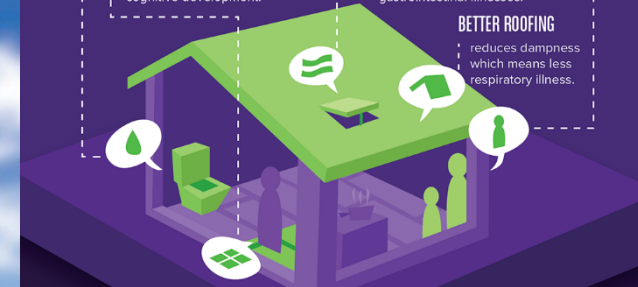
means fewer eye and lung irritations and smoke related diseases.

HEALTH

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

BETTER ROOFING

reduces dampness which means less respiratory illness.



- 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

Counseling and Education

Clinical Interventions

Long Lasting Protective Interventions



Changing the Context

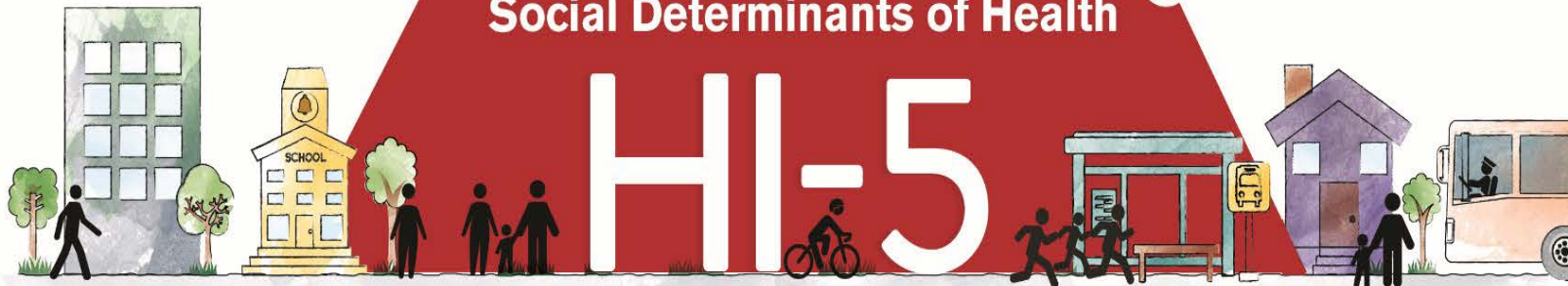
Making the healthy choice the easy choice

- 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



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 ▶

● 3 ● 5 ● 11



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 ▶

● 5 ● 8 ● 20



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 ▶

● 3 ● 6 ● 4



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 ▶

● 22 ● 9 ● 1



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 ▶

● 8 ● 8 ● 0



Tobacco 21

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

LEARN MORE ▶

● 15 ● 0 ● 0



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 ▶

Rhode Island Health Equity Zones



- Funds **9 local collaboratives** representing diverse sectors of the community.
- Supports **partnerships to create healthy places** for people to live, learn, work, and play.
- **Requires hospitals** to contribute as part of community benefits and expansion projects.



Preview of Coming Attractions:

Promoting Health Improvement and Cost Controls in States (PHACCS)

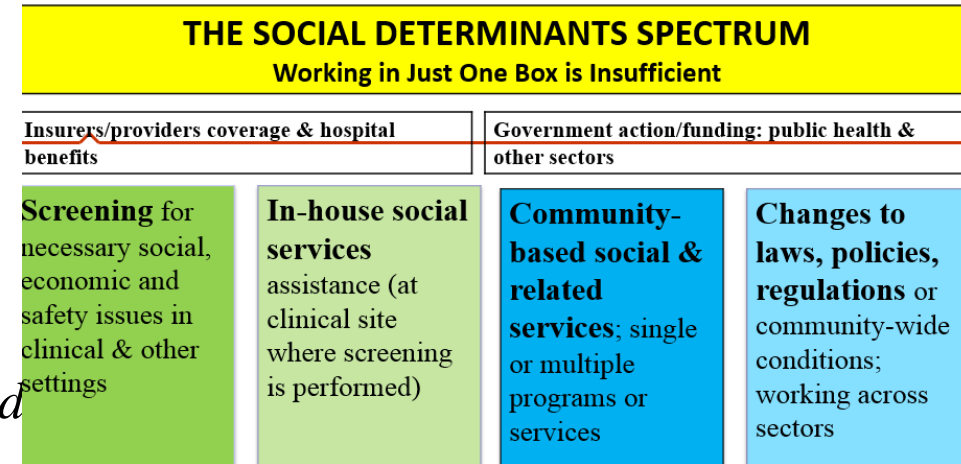
- Trust for America's Health initiative with support from the Robert Wood Johnson Foundation and Kaiser Permanente
- The 12 key health policies each should consider
- What to expect:
 - The Data on What Works
 - Peer Support and Teaching
 - Technical Assistance
- To be released in early Feb., 2019



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

linked with total

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



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She Needs Our Support

