Better Together

Strategies for improving collaboration between public health and primary care



Contact Information

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Why Am I Here Today?





























About de Beaumont

- We believe in a strong governmental public health system
- Strategies
 - Strengthening the workforce
 - Connecting public health with key partners
 - Elevating the profile of public health



Why I'm Here Today

1. I love public health















Why I'm Here Today

I love public health I love North Carolina



Why I'm Here Today

I love public health I love North Carolina I love PH/PC Integration

What Do I Want to Do Today?

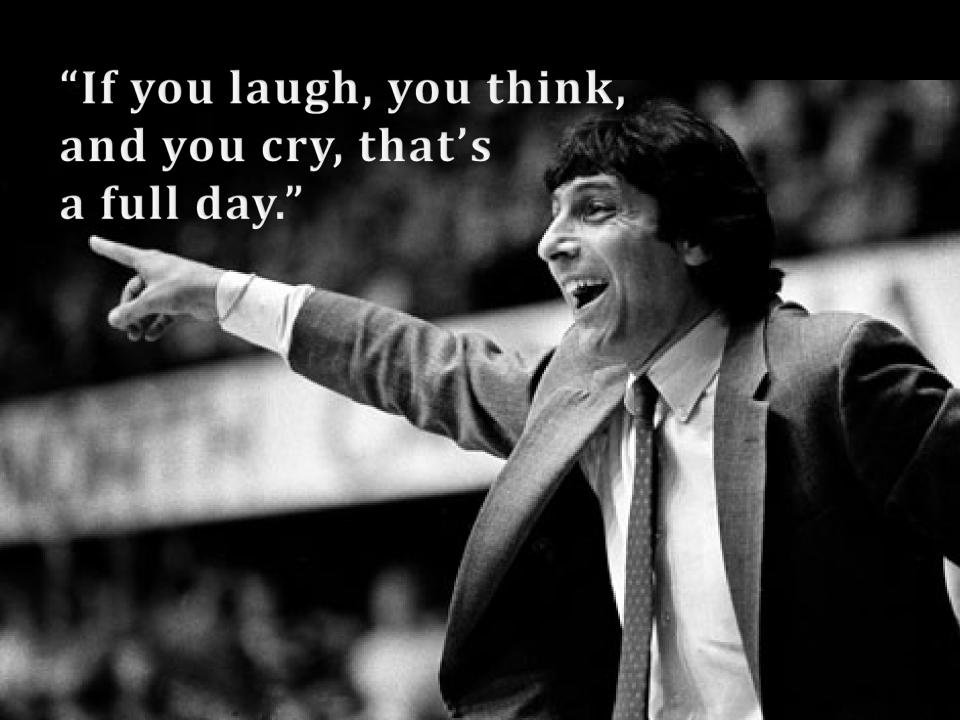


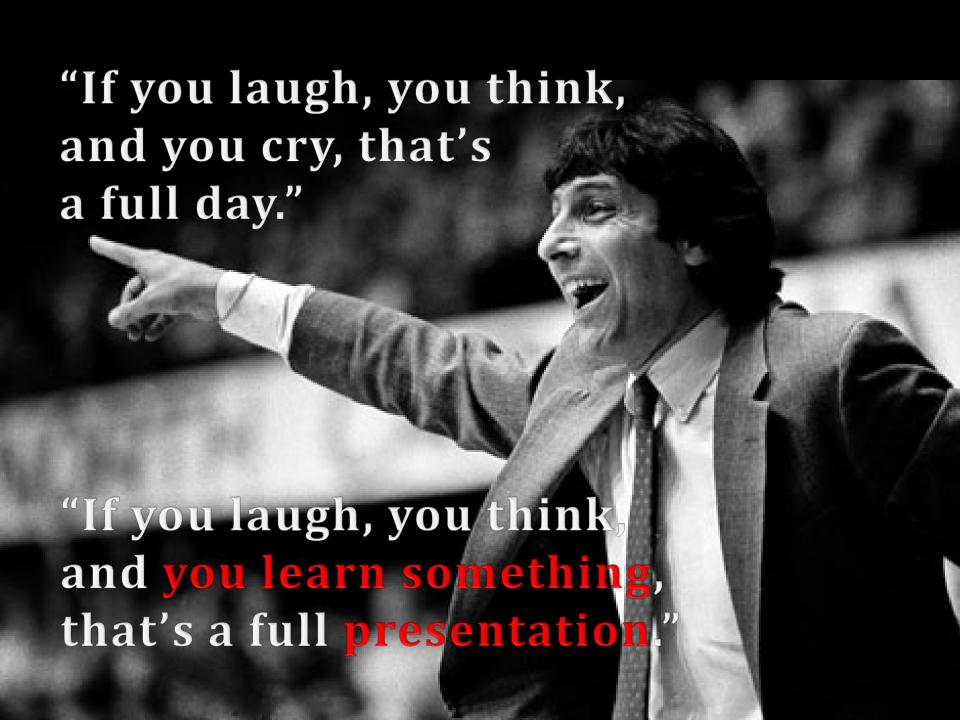












Framing the Problem













Our Healthcare System Doesn't Work Anymore

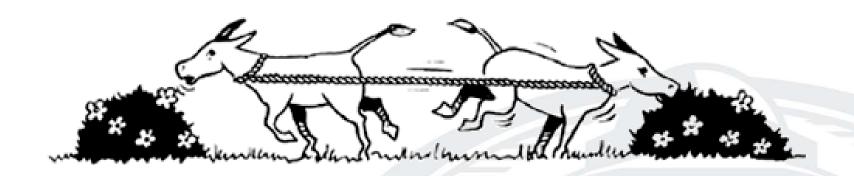
"It was designed to respond to acute illness, not to address causes of disease that occur far beyond the clinic walls."



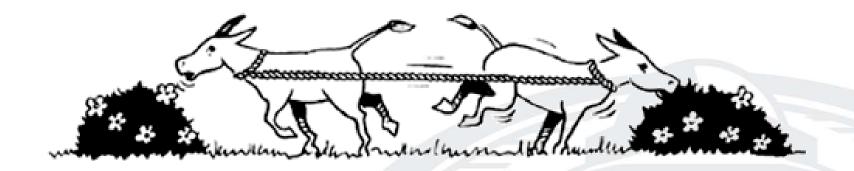
Our Healthcare System Doesn't Work Anymore

"There is no treatment, pill, or vaccine to address the challenge of having better access to an MRI in most communities than fresh fruits and vegetables or opportunities to exercise."











What Is de Beaumont Doing?





What is de Beaumont Doing?

- Practical Playbook
- BUILD Health Challenge



What is de Beaumont Doing?

- Practical Playbook
 - www.practicalplaybook.org
- BUILD Health Challenge



National Advisory Committee













COUNTY

















PERMANENTE®



















What is de Beaumont Doing?

HOW CAN THE PRACTICAL PLAYBOOK HELP WITH YOUR INTEGRATION PROJECT?



LEARN

Explore what integration is, what it is not, and the value of working together.

The Principles of Integration

The Value of Working Together



DO

Start an integrative project or move your project forward with guidance and tools.

The Stages of Integration

Topics for Your Project >



SHARE

See how communities across the country are working together to improve population health.

Success Stories >

Connect with Others >



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View

Edit

Unpublish

New York Monitors Blood Pressure with EHRs

in Community Engagement , Health Information Technology & Hypertension / High Blood Pressure

Summary:

Keep On Track provides blood pressure monitoring equipment and training to community organizations in New York City. Operated by the New York City Department of Health & Mental Hygiene and church health ministry volunteers, the project allows community members to keep track of their blood pressure data





SUCCESS STORIES / NORTH CAROLINA ADVANCES PATIENT-CENTERED CARE



View

Edit

Unpublish

North Carolina Advances Patient-Centered Care

in Health Information Technology & Patient Centered Medical Home

Summary:

In North Carolina, the **Southern Piedmont Beacon Community Program** demonstrates how health IT investments and meaningful use of electronic health records can advance the vision of patient-centered care. The Beacon Community Program is supported by three public health departments, three regional medical

* Save as favorite



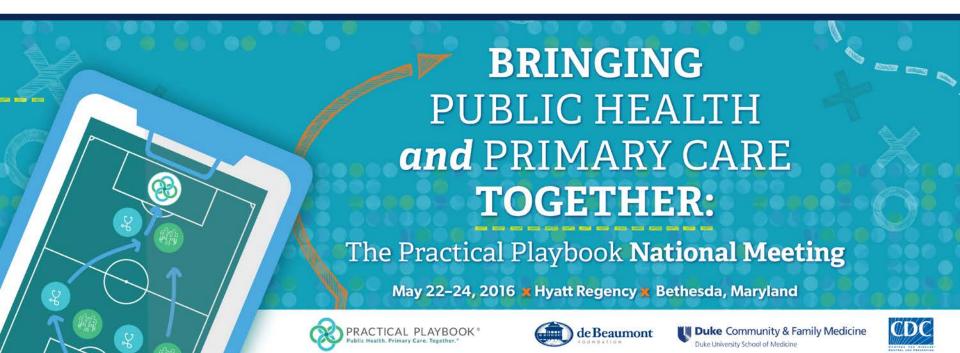


Ways to Connect

- Lloyd Michener, MD
 - Community and Family Medicine at Duke
- www.practicalplaybook.com
- Purchase the book at oup.com/us
 - 33715 for 20% off (\$22.36)
- @PracPlaybook



Ways to Connect





What is de Beaumont Doing?

- Practical Playbook
- BUILD Health Challenge
 - www.buildhealthchallenge.org



What is de Beaumont Doing?





What is de Beaumont Doing?





Ways to Connect

- www.buildhealthchallenge.org
- @BUILD_Health



Ways to Connect

- www.debeaumont.org
- Send me an email (castrucci@debeaumont.org) to get on our distribution list
- Huffingtonpost.com/brian-castrucci
- @BrianCCastrucci

What Can You Do?





What Can You Do?

- High Achieving Governmental Health Department in 2020 as the Community Chief Health Strategist
 - http://www.resolv.org/site-healthleadershipforum/
 - Promoting the reorientation of the healthcare system toward prevention and wellness
 - Interpreting and distributing data

- Practical Playbook
 - Aligned health messaging
 - Policy and community change
 - Data and analytics



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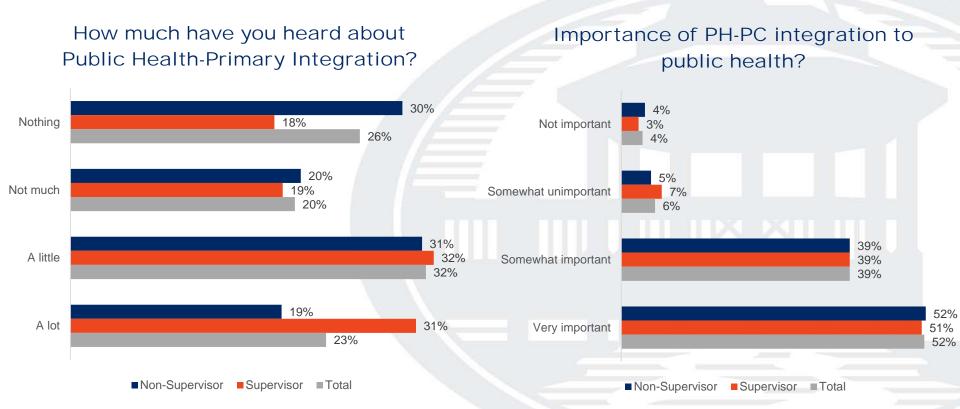
- Develop and educate the workforce
- Communicate, communicate, communicate
- Work with your primary care/hospital allies
- Funding
- Have courage



- Develop and educate the workforce
 - PH WINS data
 - See http://www.debeaumont.org/wordpress/wpcontent/uploads/PH_WINS_Infographic.pdf
- Communicate, communicate, communicate
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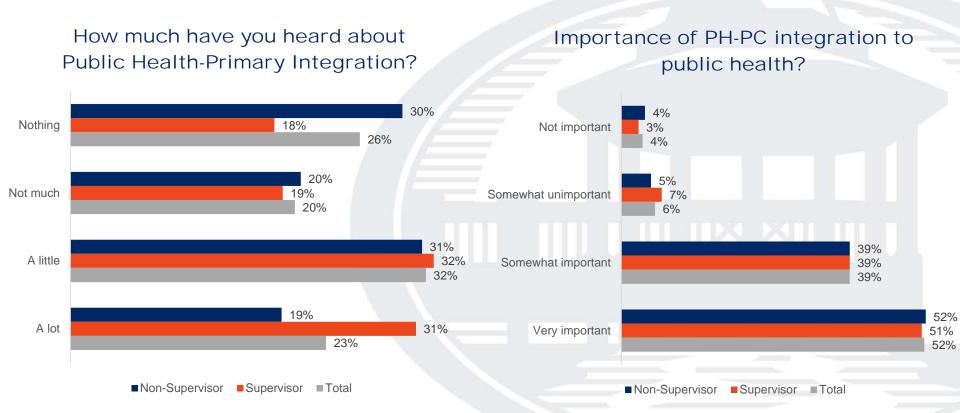


<1/5th of non-supervisors have heard a lot about integration



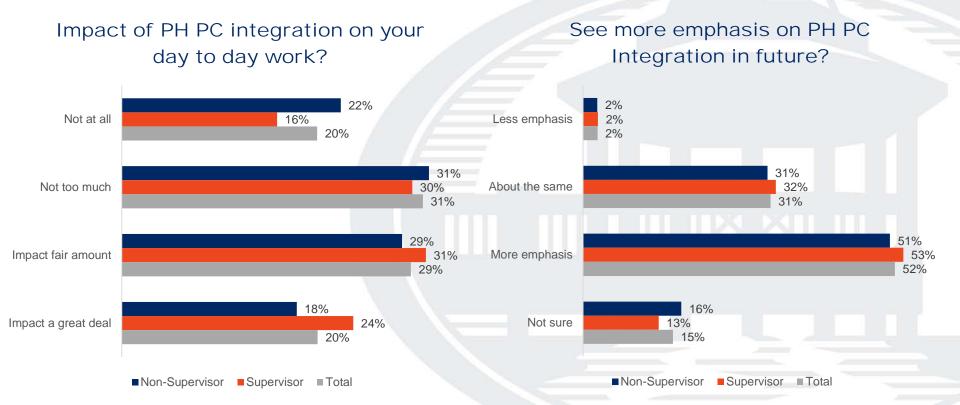


Overwhelming majority think it is important



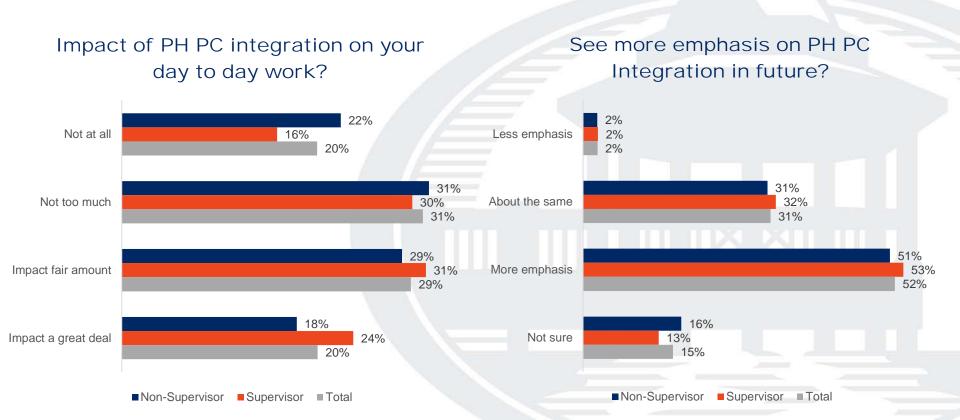


Nearly half of report integration impacting their day to day work





More than half want more emphasis





- Develop and educate the workforce
 - Understand the impact on their work
 - Increase the emphasis
- Communicate, communicate, communicate
- Work with your primary care/hospital allies
- Funding
- Have courage



- Develop and educate the workforce
- Communicate, communicate, communicate
 - Be a voice
- Work with your primary care/hospital allies
- Funding
- Have courage



- Develop and educate the workforce
- Communicate, communicate, communicate
- Work with your primary care/hospital allies
 - Align health messages
 - Explore policy and community change initiatives
 - Convene
 - Mayors/SHOs/Governor's staff
 - ED department heads/Police/CPS



Great Stories + Valid Data =

POWER + Credibility =

CHANGE





Schools' water may be key to teens' kidney ills

+1 more By Samantha Melamed STAFF WRITER

nna Okropiribce, 16, drinks from the water fountains at Northeast High School only when she's "desperate." The water is warm and metallic-tasting. "It's pretty gross," she said. "Once, I filled up my water bottle, and the water wasn't clear. It was gray. I got scared. I was like, I don't know if I should drink this."

That's cause for concern, given that poor water intake is a likely factor in a startling phenomenon outlined in research published Thursday by a Children's Hospital of Philadelphia doctor. It is: The childhood risk of kidney stones — an affliction historically found most often in middle-aged

White men - has doubled in less than two decades.

The risk increased the most for adolescents, girls, and African Americans, pediatric urologist and epidemiologist Gregory Tasian found.

So, Children's — along with Philadelphia city agencies, the School District, and other partners — is pushing to improve water access in Philadelphia and particularly in city schools. Broken and dilapidated fountains have long been a source of complaints for students and teachers, who have gone so far as to demand water access in contract work rules. Some local students, meanwhile, are taking steps to improve their schools' drink-

ing water.

Tasian, whose research was published in the Clinical Journal of the American Society of Nephrology, said he first saw the kidney-stone increase when he began practicing in 2005.

"Urologists who had been in practice 25 or 30 years were saying, at the beginning of their careers, the children with kidney stones were those with really rare and inherited metabolic conditions," he said. "Now, we're seeing otherwise healthy children who just develop kidney disease much earlier in life."

Tasian and his colleagues analyzed nearly 153,000 medical records, dating from 1997 to 2012, from South Carolina, one of a few states that maintain a complete claims database. In that time, kidney-stone incidence increased 4.7 percent annually among teens, and 2.9 percent per year among African Americans. There was a 45













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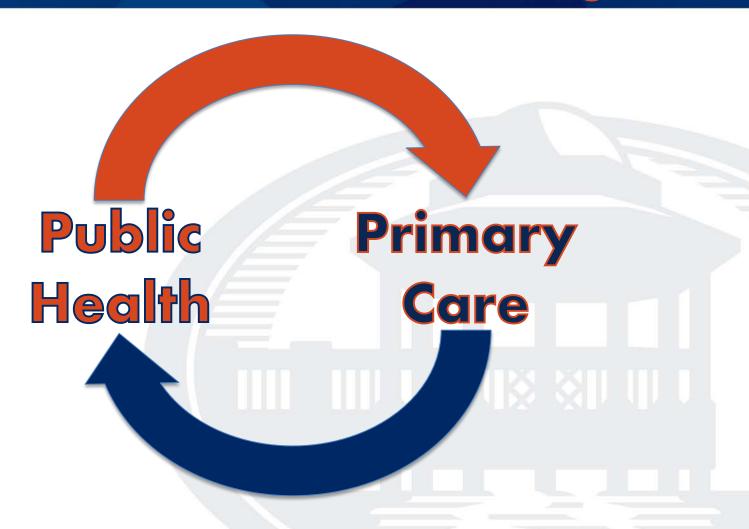
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 - Educating Physicians in their Communities
 - Leverage the CHNA process
- Have courage



- Develop and educate the workforce
- Communicate, communicate, communicate
- Work with your primary care/hospital allies
- Funding
- Have courage



Interpreting and Distributing Data





Interpreting and Distributing Data





Data Flow

CDC/HRSA

States

Regions/Counties

Towns/ Cities

Neighborhood/ Address



Data Flow

CDC/HRSA

States

Regions/ Counties

Towns/ Cities

Neighborhood/ Address



Data Flow

CDC/HRSA

States

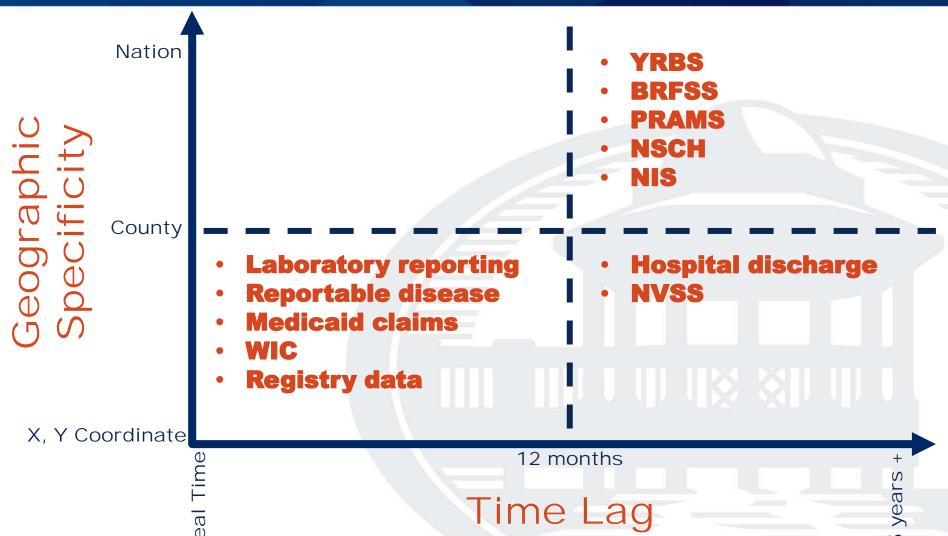
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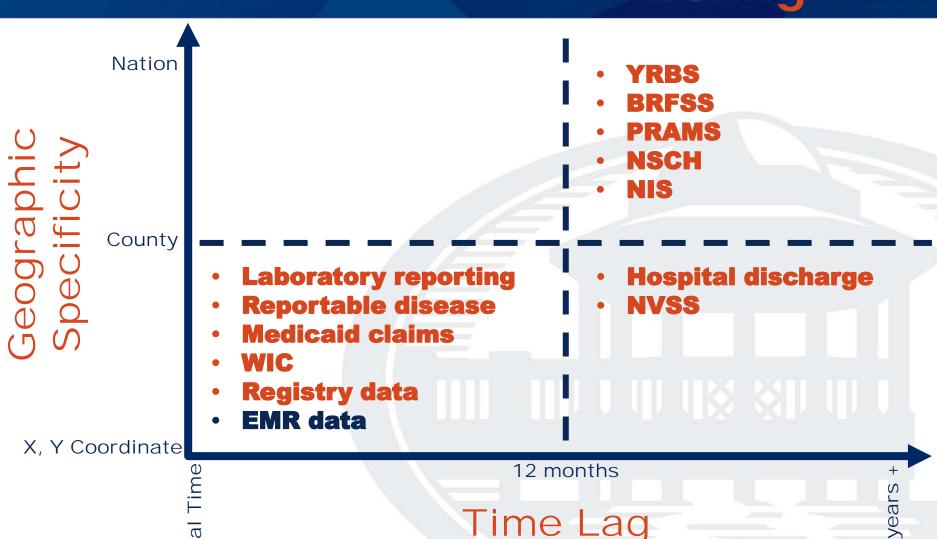


Interpreting and Distributing Data





Interpreting and Distributing Data





Voices from the Field

- Quotes from "Big Cities" health officials
 - Castrucci BC et al. What Gets Measured Gets Done. J Public Health Manag Pract. 2015;21(Suppl 1):S38-48.

"...I think BRFSS is great but, again, it's not granular enough...I think it would behoove us to have something that we could make a little more granular in terms of survey input, assessing people's behaviors and things like that."



Voices from the Field

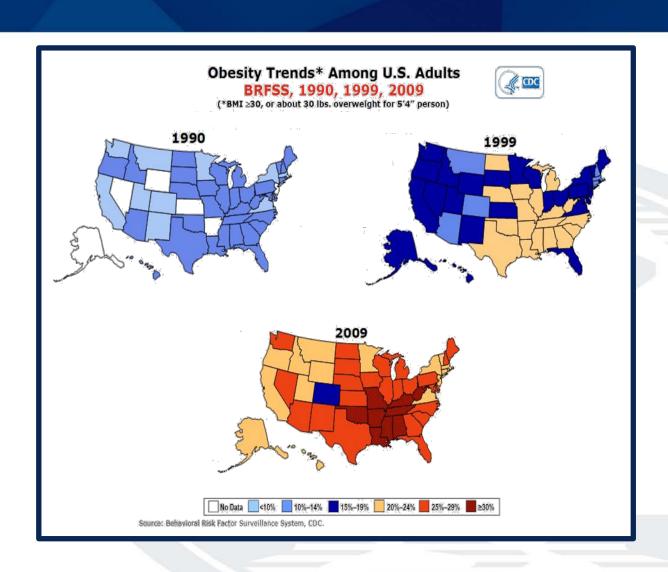
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"I think in an ideal world, we would be able to conduct a local health and nutrition examination survey every three years, but we can't... [and] that's challenging. That's really one of the reasons we're looking at electronic health record surveillance because we're hoping that that can fill some of the gaps we have."



Obesity as an Example

- Sources
 - Adults
 - BRFSS
 - Children
 - YRBS
 - NSCH



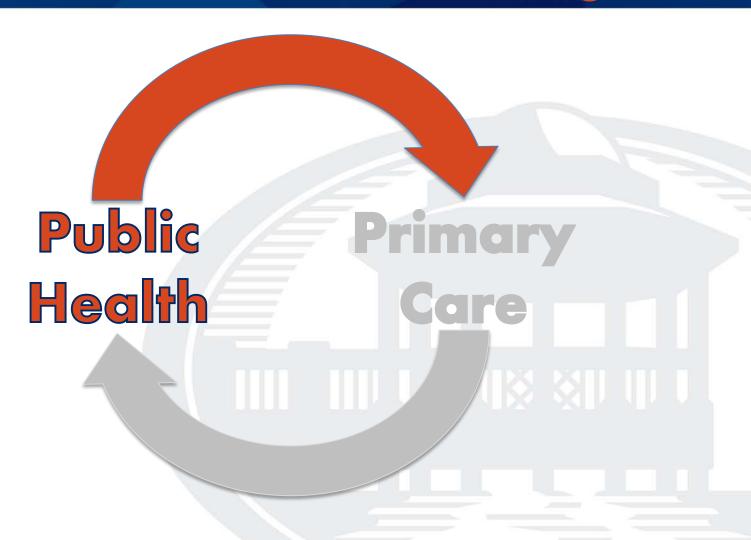


Obesity as an Example

"The natural history of the obesity epidemic lives in electronic medical records at the address level, but we can't access it."



Interpreting and Distributing Data





Contextualizing Clinical Data

- Infuse EMR data with context
 - Cleveland BUILD site
 - Housing data into EMRs
 - Robert Zarr
 - https://www.washingtonpost.com/national/healthscience/why-one-dc-doctor-is-prescribing-walks-inthe-park-instead-of-pills/2015/05/28/03a54004-fb45-11e4-9ef4-1bb7ce3b3fb7_story.html



Final Thoughts

- I believe that health transformation starts with you
- Seize the opportunity we have
- Don't be intimidated by the size of the problem
- Many small wins add up
- LEAVE HERE COMMITTED TO DO ONE THING TO ADVANCE THIS AGENDA

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