# ACHIEVING POPULATION-BASED HEALTH AND SOCIAL WELL BEING

### A Local Perspective from San Diego

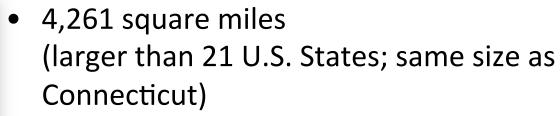


Nick Macchione, MS, MPH, FACHE Agency Director Health and Human Services Agency County of San Diego, CA



# SAN DIEGO DEMOGRAPHICS





- 5<sup>th</sup> largest U.S. County, 2<sup>nd</sup> largest in CA
- 18 municipalities; 36 unincorporated towns
- 18 tribal nations
- 42 school districts
- 2013 Estimates 3.1 million population
  - o 48% White
  - o 32% Latino
  - 11% Asian/PI
  - 4.7% African American
  - 0.5% American Indian
- Region is very diverse-

- •Over 100 languages
- Large military presence
- •Largest refugee resettlement site in CA
- Busiest international border crossing in the world (San Ysidro/MX)







# HHSA: FROM SILOS TO INTEGRATION



In 1998, HHSA brought together separate departments of health and social services:

Public health, mental health, substance abuse, child welfare, aging, public assistance, public guardian, etc.

- Integrated pre-natal to end-of-life
- Public/private contracting model for most service delivery
- 6,000 employees, 185 advisory boards
- \$2 billion operating budget; ~1 million clients
- No County-owned general acute hospital; County-owned Psychiatric Hospital and Skilled Nursing Facility
- Heavy emphasis on population-based approaches from welfare reform to health reform

# **PROBLEM**





Lack of Exercise Poor Diet Smoking

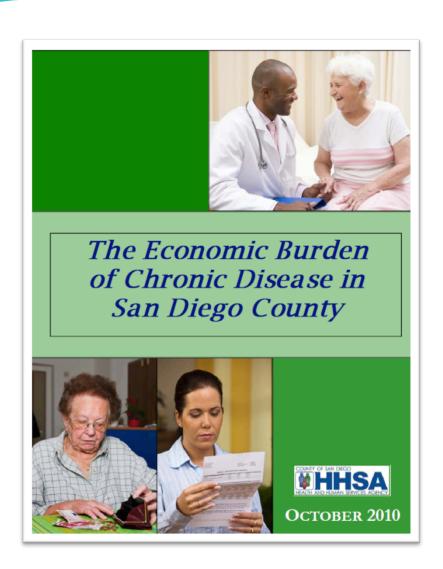
# **RESULT**





## COST IMPACT



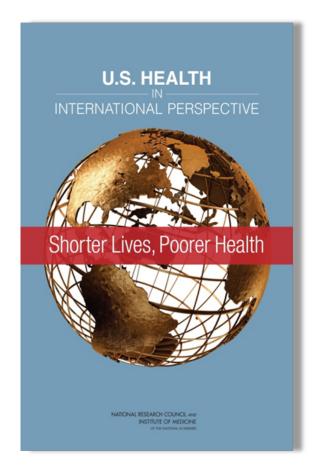


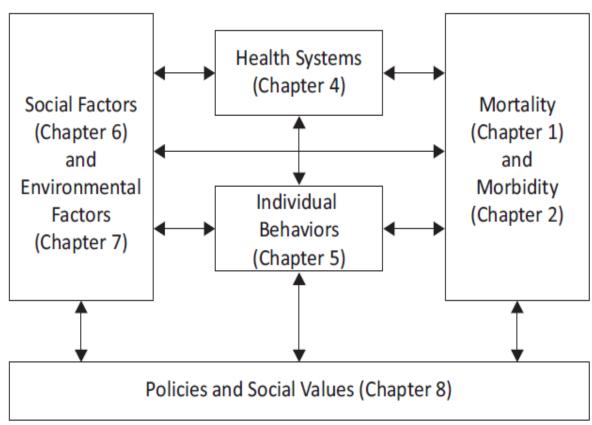
**ECONOMIC IMPACT IN 2007:** 

\$4.6 BILLION IN SAN DIEGO

# WHAT TO DO?







# **OUR FRAMEWORK**





Building
Better
Health

Living
Safely
Thriving
Thriving

#### **COMPREHENSIVE APPROACH**





# **COMPONENTS**

**Better Health** 

#### **4** STRATEGIC APPROACHES

**Building** a **Better Service Delivery System**  Supporting Positive Choices

Pursuing Policy & **Environmental** Changes

**Improving** the Culture Within

#### **5** AREAS OF INFLUENCE



**HEALTH** 



**KNOWLEDGE** 



**STANDARD OF LIVING** 



COMMUNITY



**SOCIAL** 

#### TOP 10 LIVE WELL SAN DIEGO INDICATORS

Life Expectancy **Quality of Life** 

Education

**Unemployment Rate** Income

Security **Physical Environment Built Environment** 

**Vulnerable Populations Community Involvement** 

# CHULA VISTA ELEMENTARY SCHOOL DISTRICT



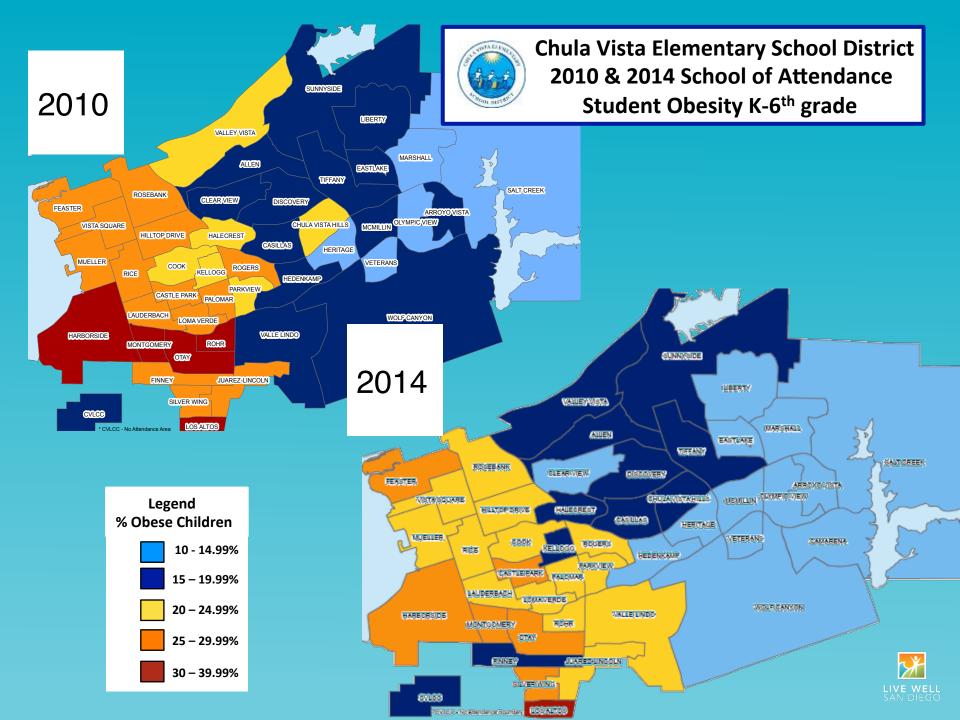


#### LAUNCHED A MULTI-FACETED APPROACH

Revamped and enhanced school wellness policies and practices:

- More nutritious school lunches
- Increased physical activity
- Replaced "unhealthy" birthday celebrations with games and activities
- Reached out to parents and community with cooking classes, healthy food budgeting and family fun

To assess impact, measuring Body Mass Index of students over time



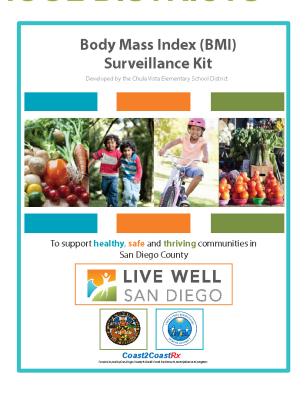
## **COLLECTIVE IMPACT**



# HOW MANY ARE HELPED TO LIVE WELL?

- 28,500 students
- 45 schools in ChulaVista ElementarySchool District
- Families too!

# BEST PRACTICES SHARED WITH 41 OTHER SAN DIEGO SCHOOL DISTRICTS



## **CONNECTING PRIMARY CARE** AND POPULATION HEALTH



HHSA and Clinical Partners across systems come together in:

- CMMI Innovation award to improve cardiovascular disease prevention and management in primary care practice
- CDC Diabetes Prevention grant to improve identification and management of pre-diabetes and hypertension









Where healing begins





















#### CARE COORDINATION



### COMMUNITY-BASED CARE TRANSITIONS PROGRAM (CCTP)

#### Section 3026 of the ACA

- Goal: reduce all-cause 30-day readmissions for fee-for-service (FFS) Medicare patients by 20% in 2 years.
- Medicare Trust Fund funding for 5 years to test models for improving care transitions from inpatient hospital to home or other settings.
- Link Community-Based Organizations to hospitals.

#### San Diego Care Transition Partnership (SDCTP)

- Partnership between HHSA and San Diego Health Systems – 11 hospitals/13 sites.
- Goal: serve ~20K FFS Medicare patients per year for 3 years, starting January 2013.
- Activate patients and caregivers to better manage chronic conditions.



# SAN DIEGO CARE TRANSITIONS PARTNERSHIP MODEL



CCTP in Action: 33,000 patients 1/13 to 7/15

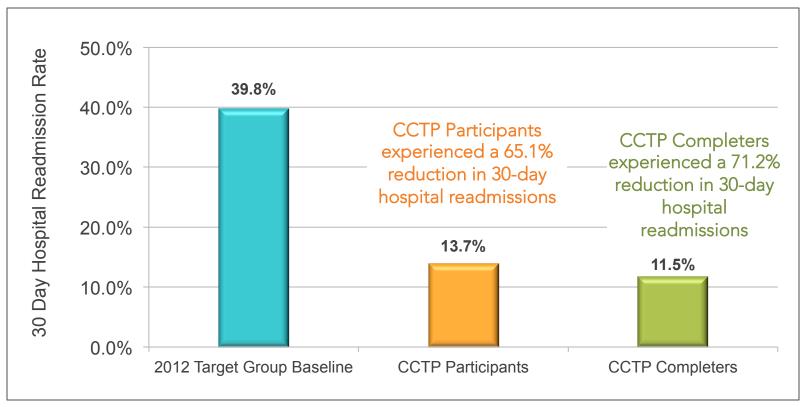


#### REDUCING PARTICIPANT READMISSIONS





# Community-Based Care Transitions Program (CCTP) 30-Day All-Cause Hospital Readmission Rate January 2013 to September 2014



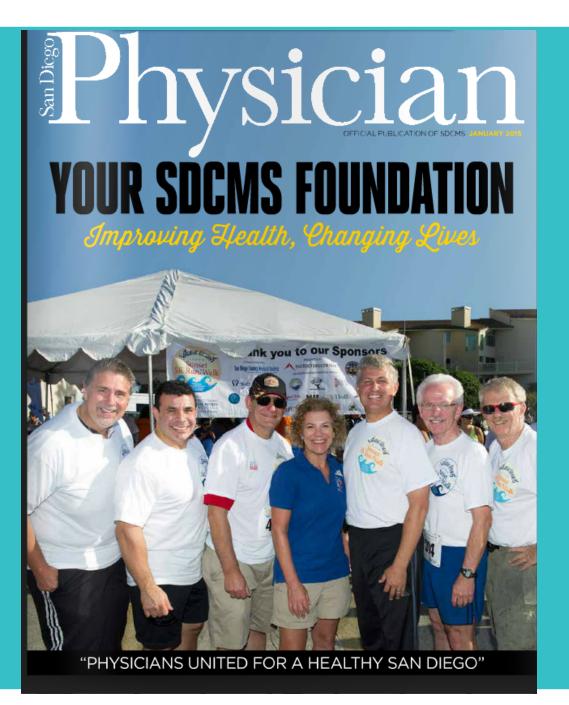
Target Group baseline: CCTP participants 30 day readmission rate from 2012

**CCTP Participants:** Those who completed services (CCTP Completers) and those who did not complete all aspects of the program

CCTP Completers: CCTP participants who completed all aspects of the program



The heart and soul of health care delivery systems are the physicians, nurses, and other members of the care team.





## "TRIPLE AIM 2.0"



Improved <u>Health</u> and <u>Social Well Being</u> for the Entire Population

Better
Service
Systems for
Individuals

Lower Cost per Capita

## TO LEARN MORE



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LWSD.HHSA@sdcounty.ca.gov



Thank you!