

Public Health Improvement Partnership  
**QUARTERLY MEETING**

December 2, 2013

# AGENDA

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## WORK SESSIONS

- Public Health – Health Care Delivery System Partnership
  - Progress Update
  - Discussion
- Planning for State Health Improvement Plan (SHIP)
  - Initial Thoughts and Ideas
  - Discussion on scope, direction and time line
- New Members to the Partnership
  - Discussion
- Foundational Performance Set
  - Progress Update
  - Discussion

# AGENDA

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## UPDATES

- From the Secretary of Health
- Foundational Public Health Services
- 2012 Public Health Activities & Services Inventory
- Other Strategic Priorities Updates

## NEXT STEPS

# PUBLIC HEALTH – HEALTH CARE DELIVERY SYSTEM PARTNERSHIP

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- Progress update

# STATE HEALTH CARE INNOVATION PLANNING

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What are **SIM** and **SHCIP**?

- **State Innovation Modes (SIM)**

The State Innovation Models initiative is a national effort and grant program of the Center for Medicare and Medicaid Innovation (CMMI) to identify and spread health practices that result in better health and better care at lower costs.

- **State Health Care Innovation Planning (SHCIP)**

Washington State was one of three states awarded a nearly \$1 million model pre-testing grant to fund collaborative development of a five-year plan for health innovation. Other states have received 'model design' grants, and are engaged in similar work. The effort is called **State Health Care Innovation Planning**.

# STATE HEALTH CARE INNOVATION PLANNING

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## Questions for the Partnership

- Should federal funds become available:
  - ▣ There is a time-critical role and opportunity for the Public Health – Health Care Delivery Systems Partnership to advise and give feedback to the Secretary of Health regarding how these systems can work together to improve population health under the construct of Accountable Communities of Health.
- Regardless of federal funding:
  - ▣ How might this workgroup advise the Secretary on how Accountable Communities of Health can play a role in bridging a historical divide between clinical care and public health and how public health and the health delivery system will work together under that construct?
- Narrow focus:
  - ▣ Should this workgroup more narrowly identify 1-3 actions that the public health and health care delivery systems can and should implement, that demonstrate how we move forward within the proposed SIM framework and other emerging opportunities?

# STATE HEALTH IMPROVEMENT PLAN

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- Purpose
- Goal
- Timeline

# ALIGNING PRIORITIES – WORK IN PROGRESS

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Results Washington		Secretary of Health	CDC Winnable Battle Areas
<b>Healthy Babies</b>	<ul style="list-style-type: none"> <li>○ Decrease the percentage of preterm births from 9.6% in 2011 to 9.1% by 2016</li> </ul>		
<b>Healthy Youth and Adults</b>	<ul style="list-style-type: none"> <li>○ Increase percentage of 10th graders with healthy weight from 75% to 76% by 2016</li> </ul>	<ul style="list-style-type: none"> <li>○ Childhood obesity</li> </ul>	Nutrition, Physical Activity, and Obesity
<b>Healthy Youth and Adults</b>	<ul style="list-style-type: none"> <li>○ Decrease the percentage of adults reporting fair or poor health from 15% in 2011 to 14% by 2017</li> </ul>		
<b>Healthy Youth and Adults</b>	<ul style="list-style-type: none"> <li>○ Increase percentage of children (19-35 months) receiving all recommended vaccinations from 74.4% in 2011 to 78% by 2017</li> </ul>		<b>Global Immunization</b>
<b>Healthy Youth and Adults</b>	<ul style="list-style-type: none"> <li>○ Decrease percentage of 10th graders who report smoking cigarettes in past 30 days from 10% in 2012 to 9% by 2017</li> <li>○ Decrease percentage of adults who smoke cigarettes from 17% in 2011 to 15% by 2017</li> <li>○ Decrease percentage of persons who smoke cigarettes among those with low education (high school or less) from 26% in 2011 to 23% by 2016, and pregnant women from 9% to 8% by 2016</li> </ul>	<ul style="list-style-type: none"> <li>○ Tobacco prevention</li> </ul>	Tobacco
<b>Access/Pay for Quality</b>	<ul style="list-style-type: none"> <li>○ Decrease the rate of uninsured in state from 15% to 6% by 2017</li> </ul>	<ul style="list-style-type: none"> <li>○ Implementation of the ACA</li> <li>○ Patient safety – and delivery of the Triple Aim</li> </ul>	

# STATE HEALTH IMPROVEMENT PLAN

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## Questions for the Partnership

- What are your thoughts on how we can make the SHIP work to bring about a healthier Washington? What is your vision for the SHIP?
- Who should be on the SHIP planning team?
- As we work through the SHIP process, we will need to plan how to work together with existing local coalitions, organizations and health systems to lead a process that improves our health – as individuals and as communities. What are your thoughts about partner engagement?
- With the SHIP and the SIM strategies rolling out in 2014, we feel this presents great opportunities for coordination and collaboration. How could/should we align these processes?

# POSSIBLE NEW MEMBERSHIP

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- Washington State Association of Counties (WSAC)
- Health Care Delivery System
- Academia
- Other state agencies
- Others?

# FOUNDATIONAL PERFORMANCE SET

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- Revised matrix
- Continue discussion on the future of public health standards and system performance reviews

# FROM THE SECRETARY OF HEALTH

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- Budget/Upcoming Legislative Session
- Health Information Exchange (HIE), *written update*
- Informatics Group, *written update*
- Progress on Priorities

# FOUNDATIONAL PUBLIC HEALTH SERVICES

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## Phase II

- FPHS Technical Workgroup
  - Workplan/Tasks
- FPHS Policy Workgroup
  - Scope
  - Membership

	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Technical Workgroup	Kickoff	Meeting 2	Meeting 3					
Policy Workgroup		Kickoff		Meeting 2	Meeting 3	Meeting 4	Meeting 5	Meeting 6

# 2012 PUBLIC HEALTH ACTIVITIES & SERVICES

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- Keeping our food, water and environment safe
  - ▣ Evaluated 153,053 drinking water samples for public health protection
- Preventing and rapidly responding to community health threats
  - ▣ Ordered and distributed 3 million doses of childhood vaccine for community providers to prevent communicable disease
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  - ▣ Ordered and distributed 3 million doses of childhood vaccine for community providers to prevent communicable disease
- Delivering science-based prevention programs for families and children
  - ▣ Served about 37,000 pregnant and new mothers to promote healthy pregnancies through prenatal services and parental education – services proven to reduce low-weight births and infant mortality, more than 130,000 visits
- Engaging with the community to prevent disease and foster wellness
  - ▣ 24 local health agencies lead or participated in community initiatives to increase access to healthy foods

<https://fortress.wa.gov/doh/hip/PHIP/MeasureGroup.mvc/MeasureGroupQuery?measureGroupId=19&cycleId=4>

# COMMUNICABLE DISEASE AND OTHER HEALTH THREATS

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- Increase immunization rates
- Standardize and prioritize communicable disease surveillance and response activities
- Develop, maintain and integrate a data collection system for communicable disease tracking, monitoring and response

# HEALTHY COMMUNITIES AND ENVIRONMENTS

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- *Governor Executive Order* – Improve the health and productivity of state employees and access to healthy foods in state facilities
- Partner with OSPI and DEL in proposing legislation focused on healthy weight in children

# NEXT STEPS

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- Quick Meeting Evaluation
- 2014 Meeting Schedule *TBA*

[www.doh.wa.gov/hip](http://www.doh.wa.gov/hip)

# SHCIP HIGH LEVEL SUMMARY

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- Integrate purchasing to support financing and delivery of whole person care (Integration of physical and behavioral health)
- Establish clear accountability at the payer level for practice level improvements and total cost of care
- Define common measures linked to performance guarantees
- Align common goals and commitments to the **Triple Aim** across the public and private sectors.
- **STILL DRAFT**

# SHCIP HIGH LEVEL SUMMARY

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- Develop Accountable Communities of Health (Philosophy and Structure)  
Regional service areas that reflect unique local innovation, collaboration and accountable community of health
- Promote evidence based care interventions and continuous quality improvement through the development of regional extension service centers
- Promote equitable representation of broad health care and community partners in accountable governance
- Develop creative financing mechanisms to invest in cross cutting supports and local innovation
- **STILL DRAFT**