

Population Health Trust Advisory Committee Meeting

Skagit County Board of Health
August 6th, 2015



Skagit County Board of Health - Population Health Trust

"Always working for a safer and healthier Skagit County"

*Kenneth A. Dahlstedt, Chair
Lisa Janicki, Commissioner
Ron Wesen, Commissioner*

Agenda

- Introductions
- John Wiesman Report and Community Forum
- Update on Business Advisory Committee
- Update on Contributions
- Data Indicators Update
- Survey Results
- Connie Davis and Kari Ranten, Skagit Regional Health - Forces of Change
- Lunch Break
- Colleen Pacheco, Sea mar Community Health Centers - Forces of Change
- Summary, next steps and closing



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Introductions

- Please Provide Your Name
- Sector you Represent



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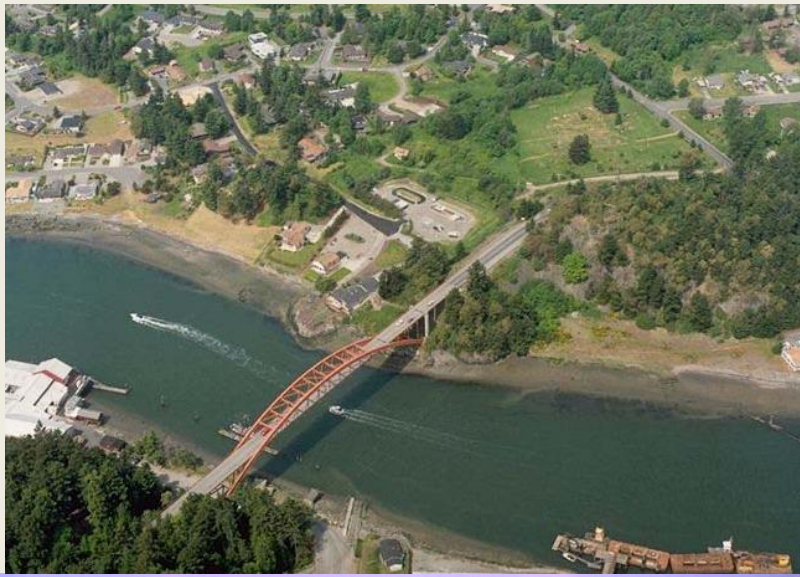
Welcome John Wiesman and Marie Flake



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15 Minutes



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Business Advisory Committee Report

Second Meeting was July 23rd

**Anneliese Vance-Sherman, Andi Martin, Mary McGoffin,
Jennifer Johnson, Mark Raaka, Lisa Janicki, Terry Belcoe,
Don Wick**

What are our common concerns?

What compels us to move forward?

Develop a charter

Next meeting Aug 13th



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Short Survey to Business Partners

- **Considering the RWJ health factors, which ones cause recruitment and hiring obstacles for your organizations?**
 - **What would make Skagit County more attractive to potential employees for your business?**
 - **How can other services sectors like medical, behavioral health, housing and education better serve your organization and the people who work with you?**
-



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Commonalities

Obstacles to Hiring

- Health Care (2)
- Housing (2)
- Education

Attractiveness to Employees

- Health Care
- Housing
- Education (2)

We Can We Do

- Health Care
- Housing
- Education

Business Impact

- Employment
- Health Care
- Income
- Education
- Housing (#10)



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2015 Budget and Contribution Report

Pledged Contributions (9)	\$62,500
Total 2015 Expected Cost	\$76,959
Pending Gap	(\$14,459)



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Data Group Report

- Thank our Survey Members: Connie Davis, Duncan West, Mo Pettitt, & Yeshi Tulu
- Reviewed updated assessment timeline
- Draft Data Carousel groups and potential members

SAVE THE DATE OCTOBER 21st
DATA CAROUSEL



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Clinical Care

Health Behaviors

Demographics
QoL Survey
1115 Waiver

Physical Environment

Social & Economical



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750

How do we improve health?
You Decide
OPEN from June 22 to July 10
\$5 Gift Card to first 200

Skagit County Quality of Life Survey



1513



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Thank You!!

- Kitsap, Spokane, Snohomish, Island, Whatcom, King, Benton-Franklin and Walla Walla Counties
- Population Health Trust Advisory Committee
- Survey Advisory Committee
- Skagit Valley College
- Tribal Communities
- Community Action
- Sea Mar
- Public Health Staff

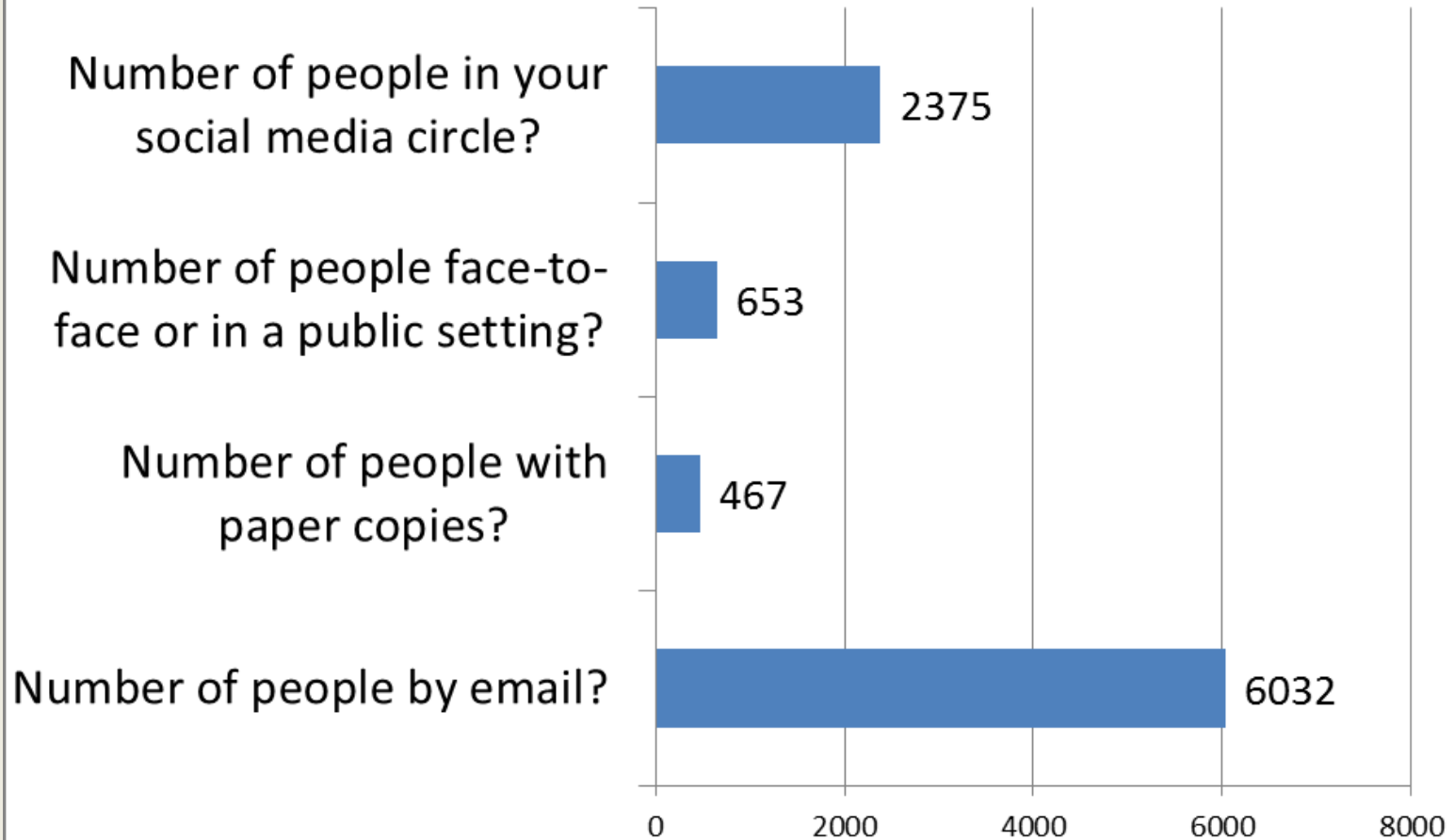


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Efforts to Distribute Survey

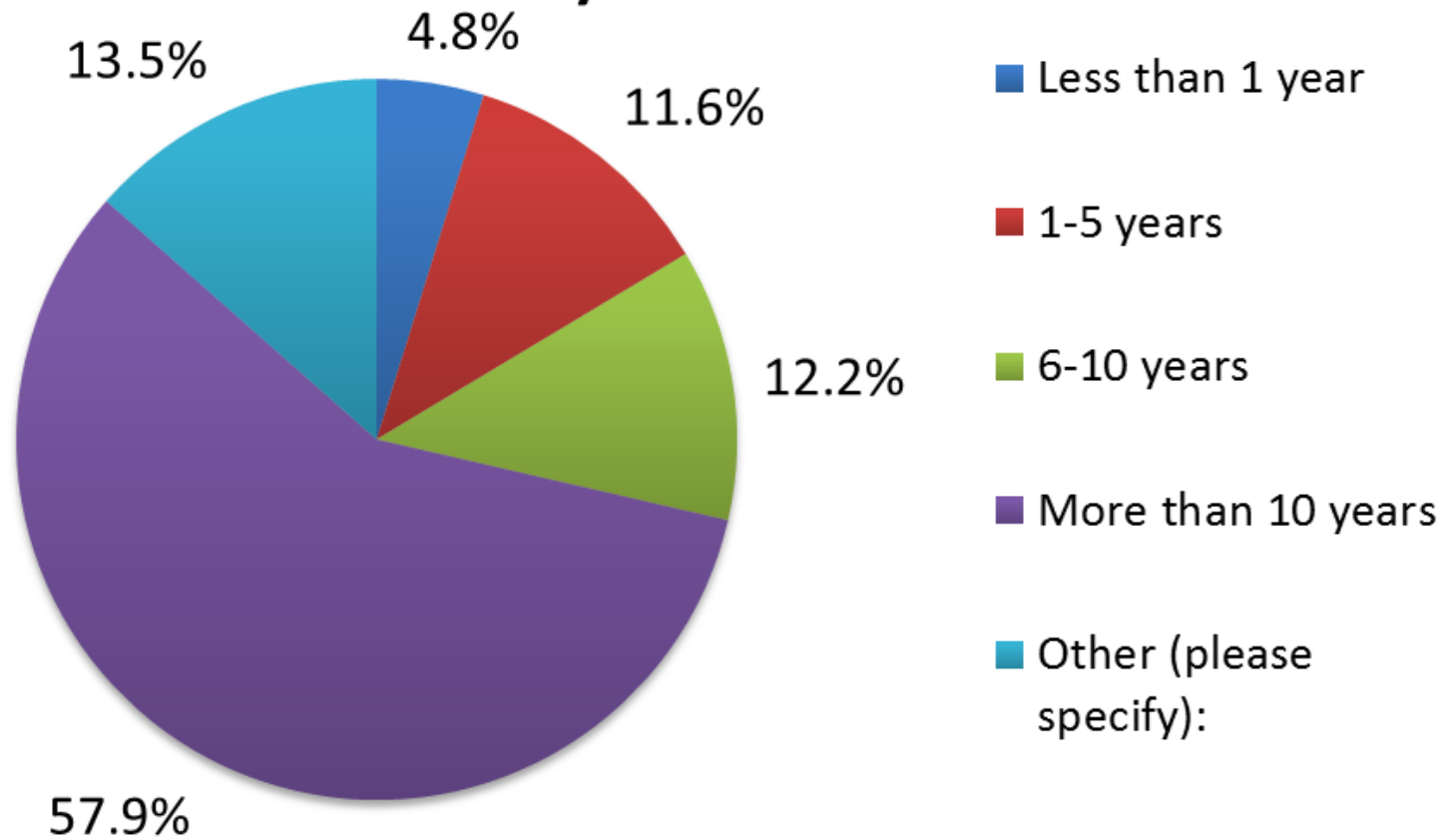


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1. How many years have you lived in Skagit County?

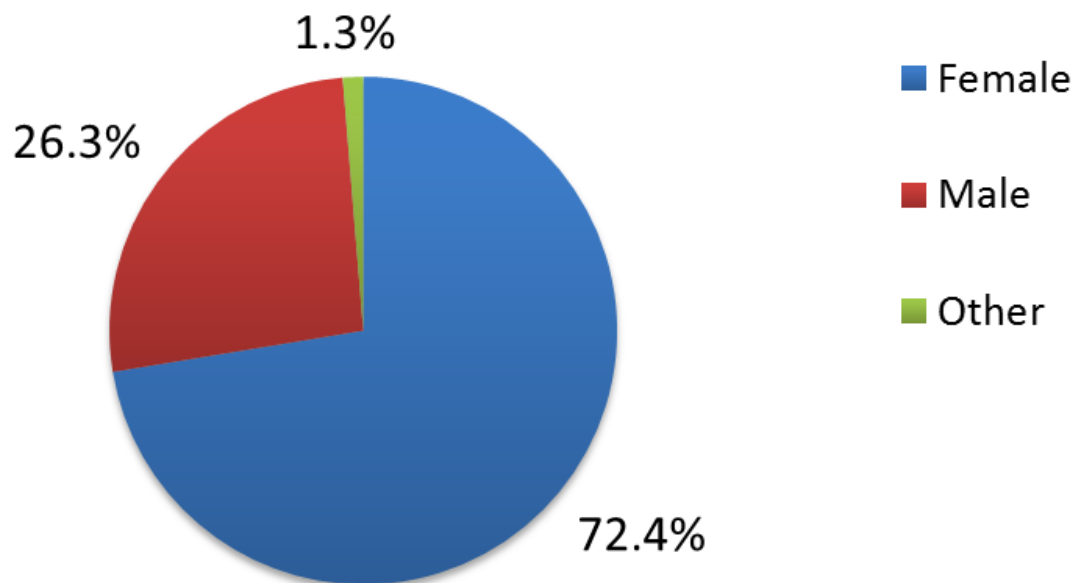


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32. Gender

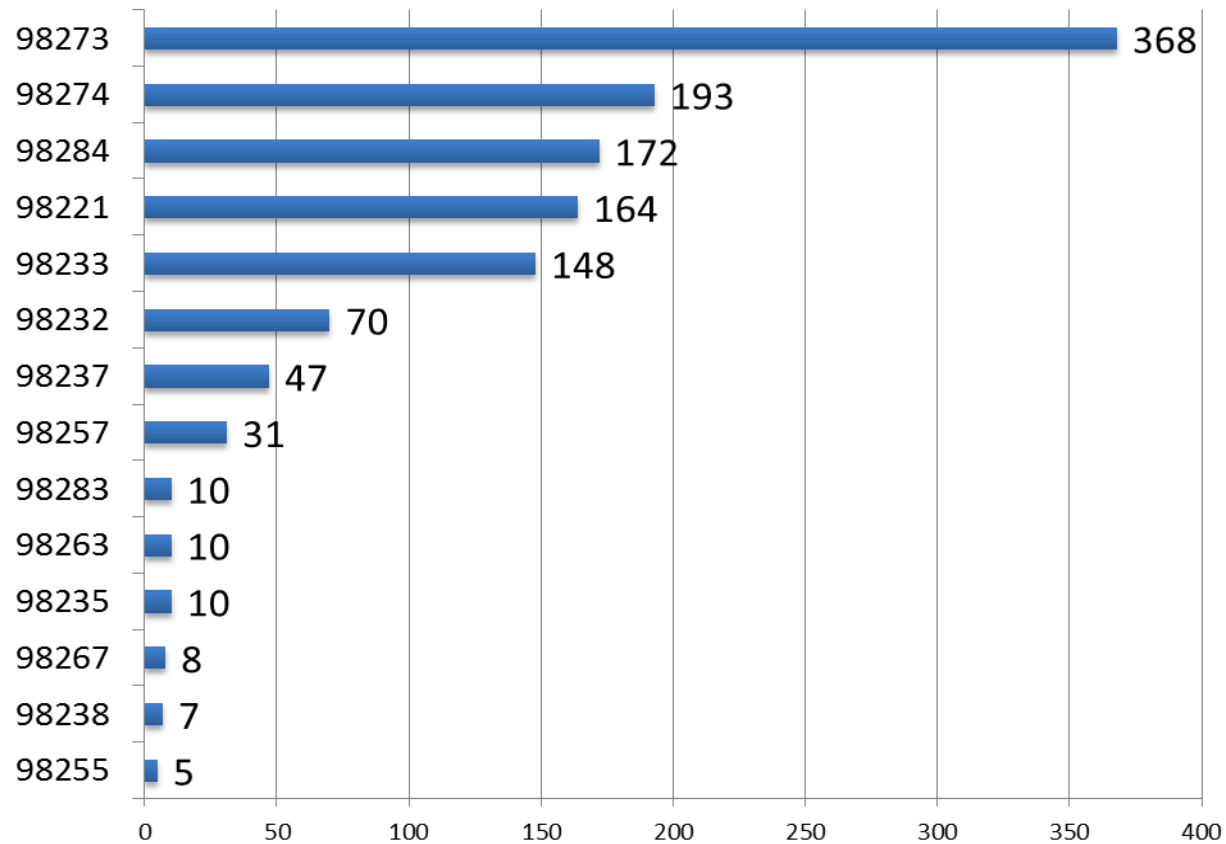


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33. Zip Code where you live 1243 answered, 270 skipped

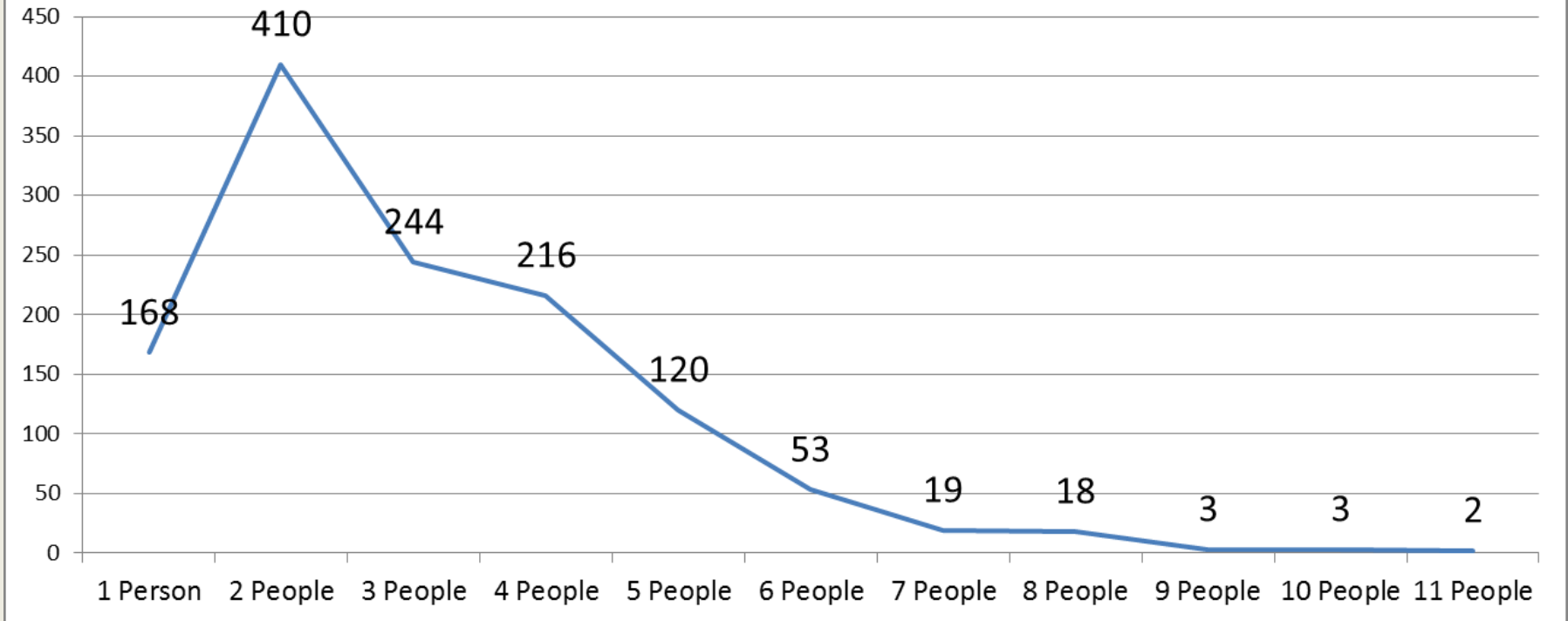


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34. Number of people in your household

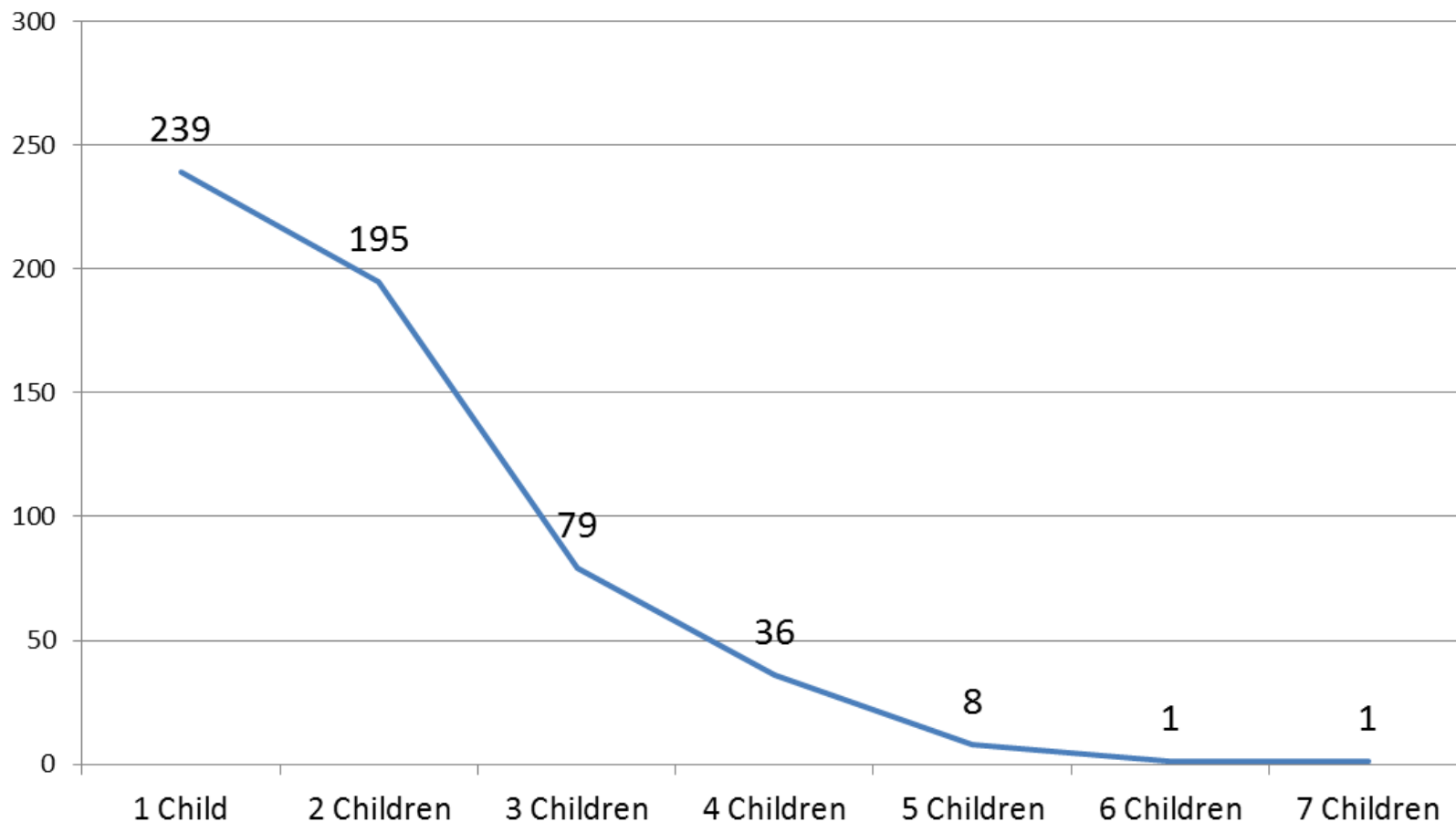


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35. Number of children under age 18 in your household

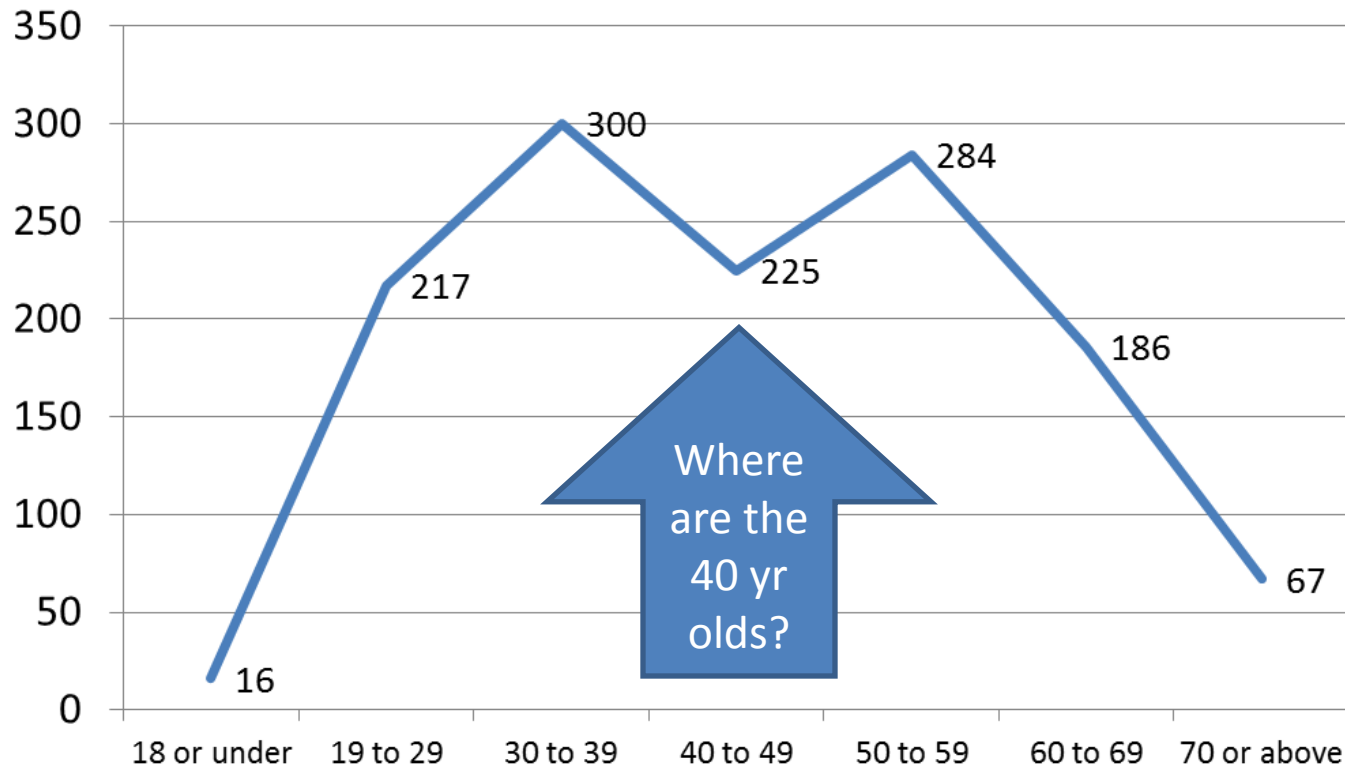


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36. Your age group:

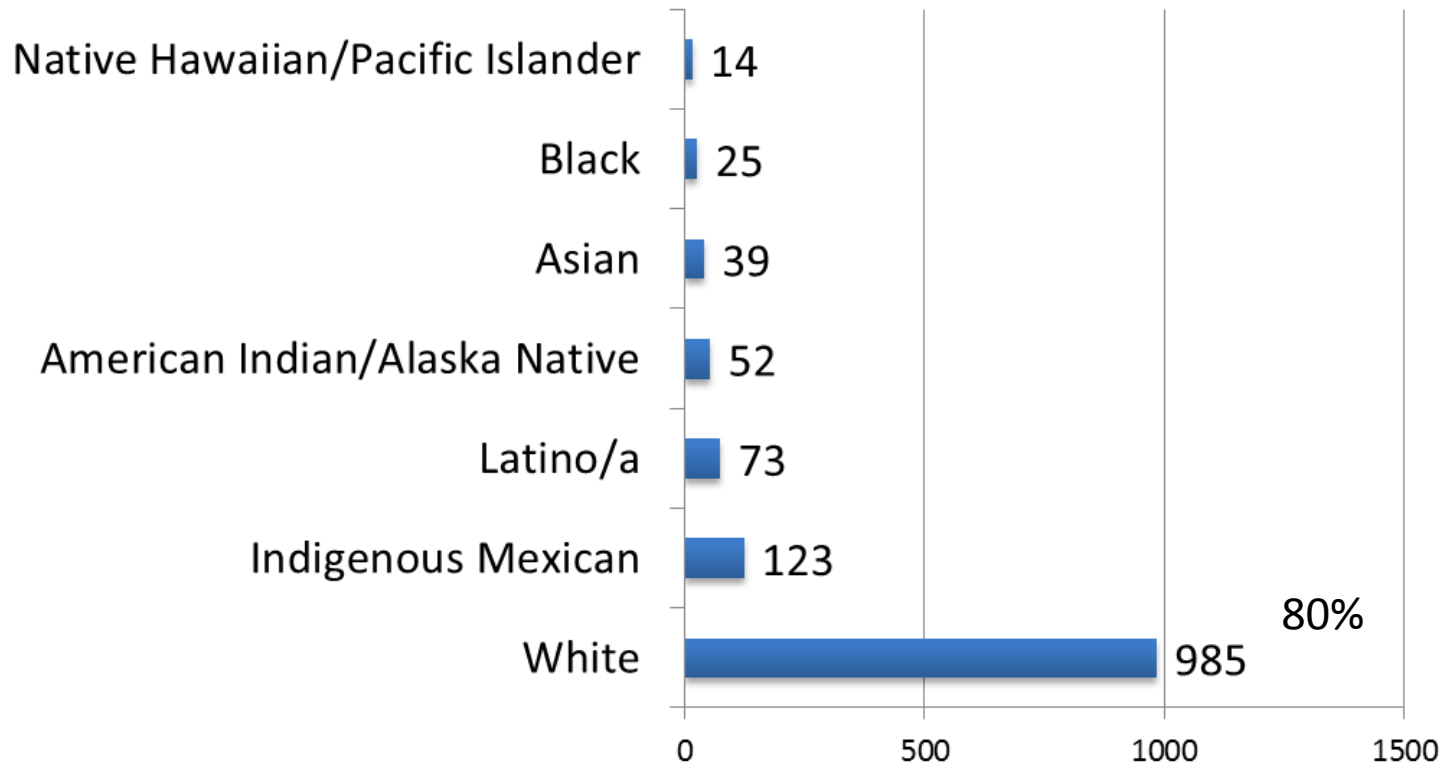


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37. Which of the following do you consider yourself?

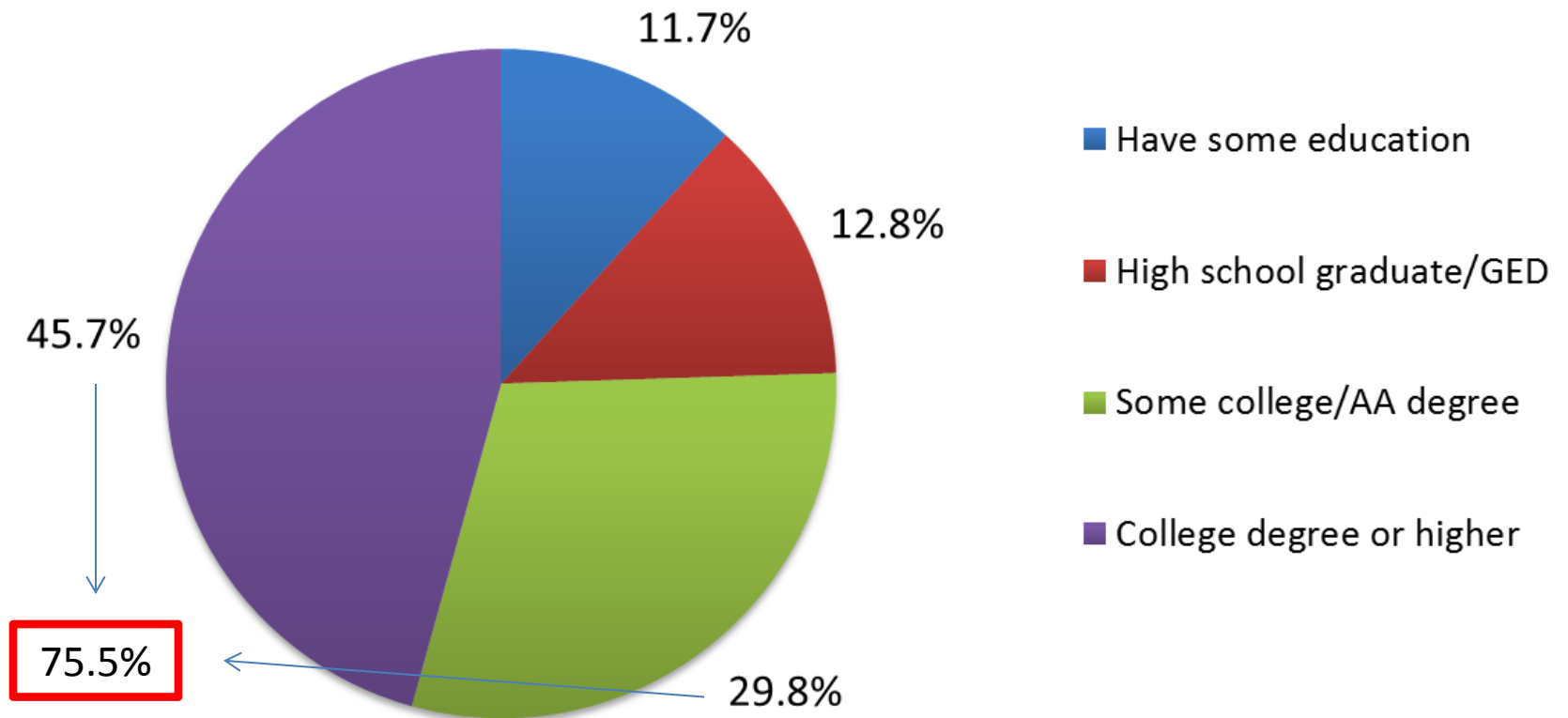


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38. Your highest level of education:



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39. Your average annual household income

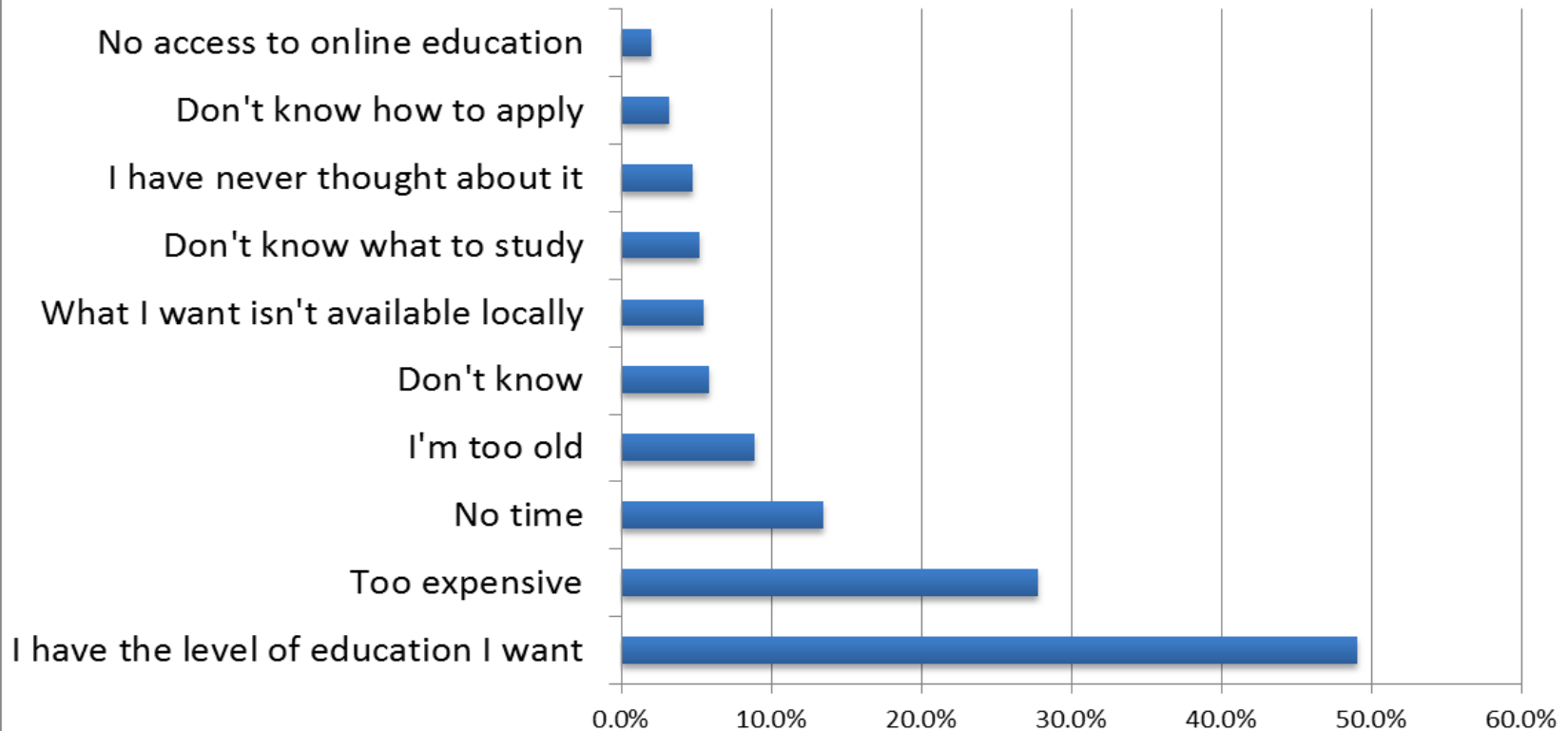


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2. Having the right education often leads to higher income and better quality of life. If you don't have the education you want, what is getting in the way? (Mark all that apply)

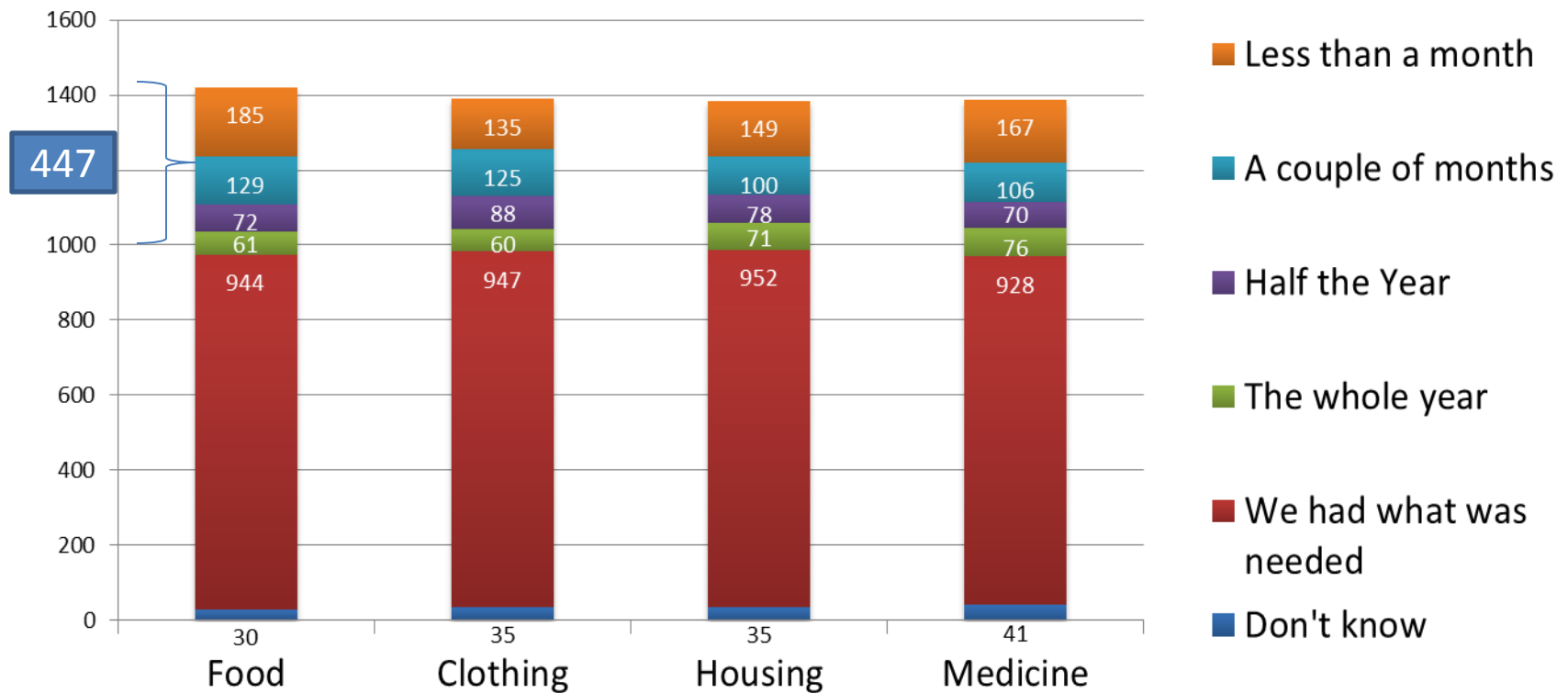


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3. In the past year, about how many months did you or your family NOT have enough money to pay for essentials such as food, clothing, housing, and medicine? (1449 Answered, Skipped 64)

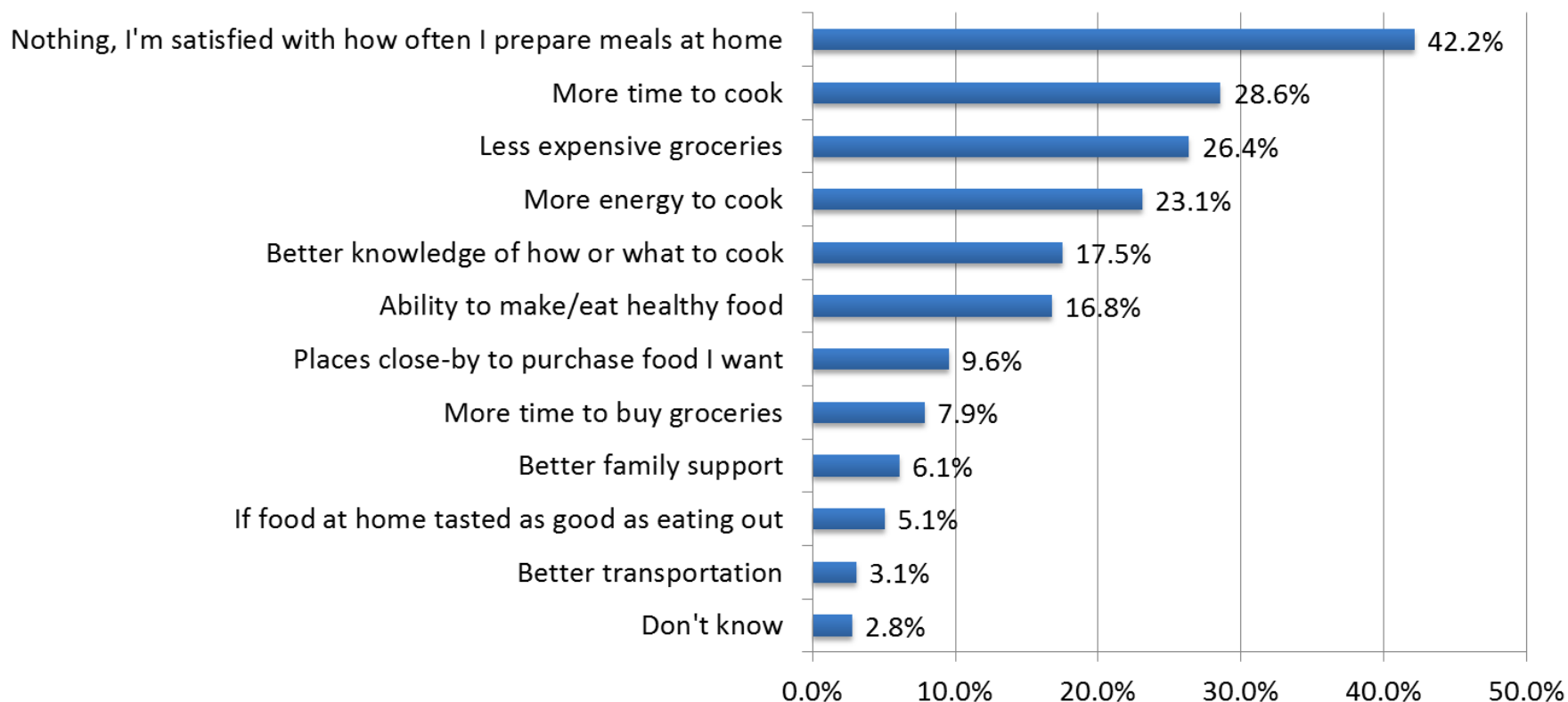


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4. Which of the following would motivate you to prepare meals at home more? (Mark all that apply)

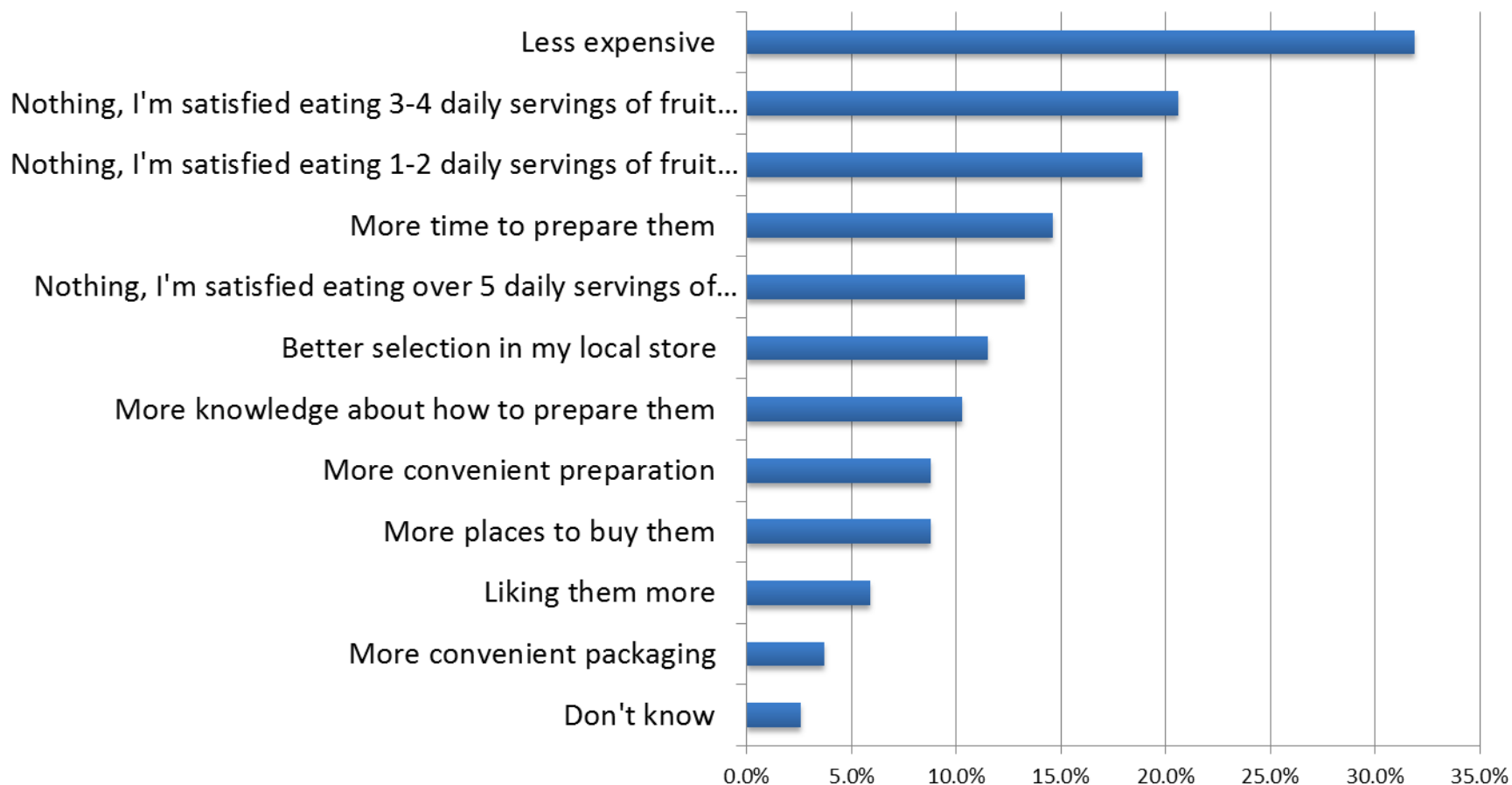


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5. Which of the following would help you eat more fruits and vegetables daily? (Mark all that apply)

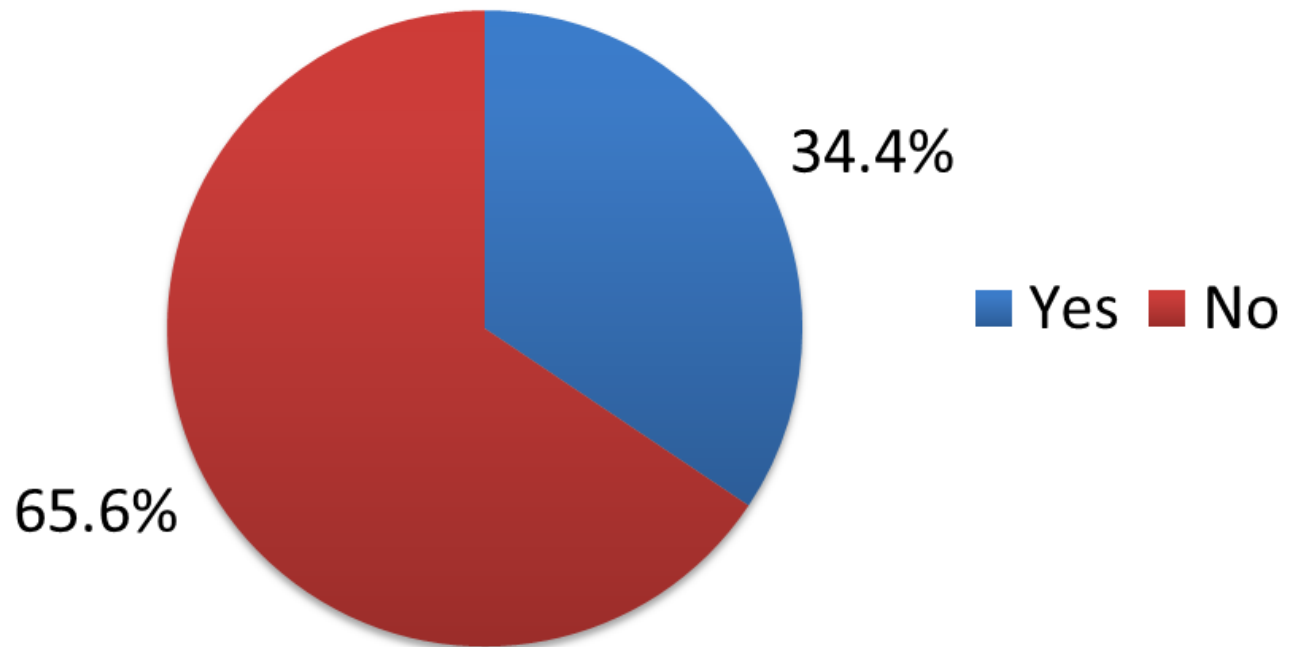


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6. Do you have school age children (Kindergarten-12th grade)?

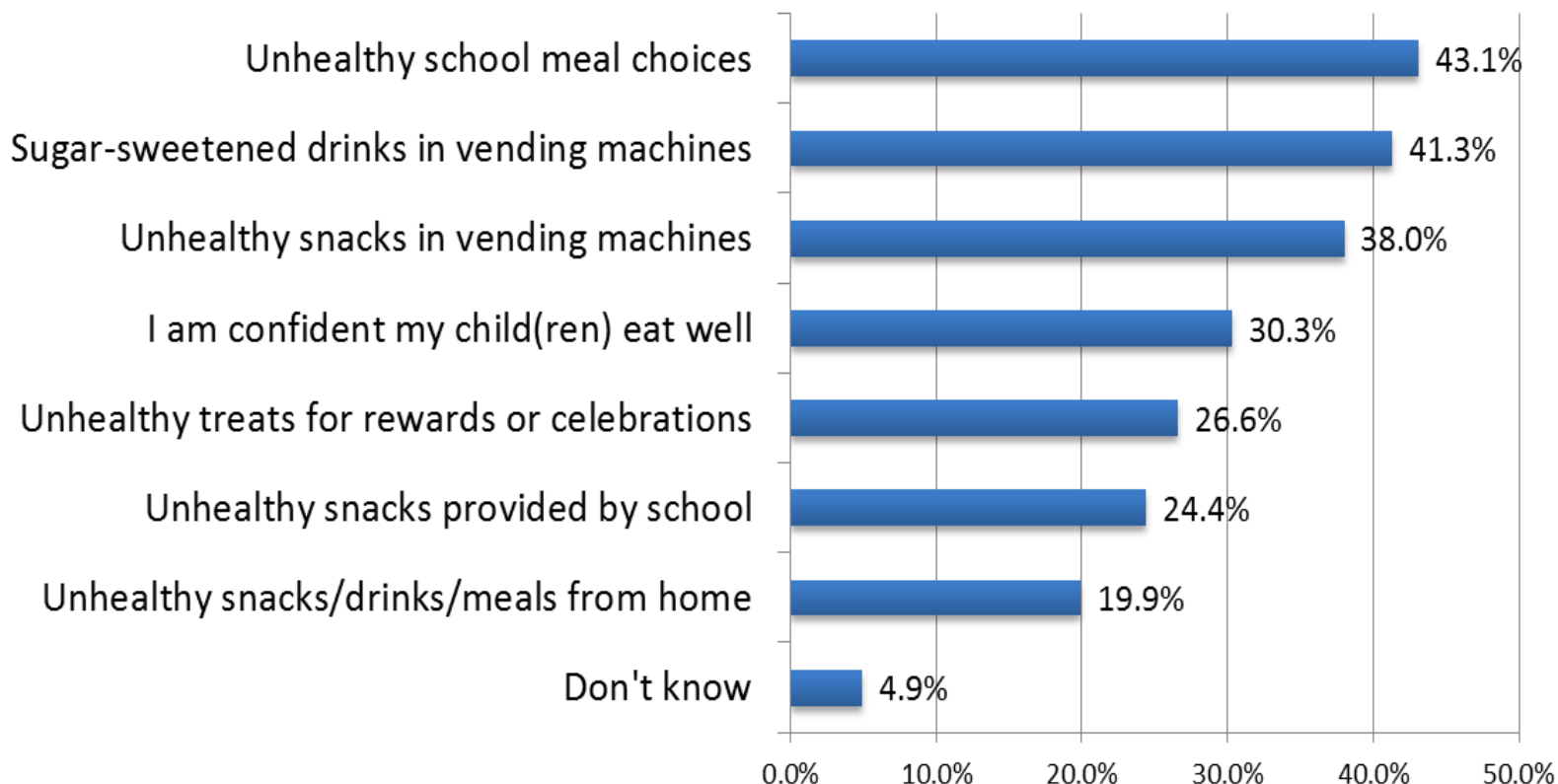


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7. As a caregiver of children, are you concerned about any of these food choices? (Mark all that apply)

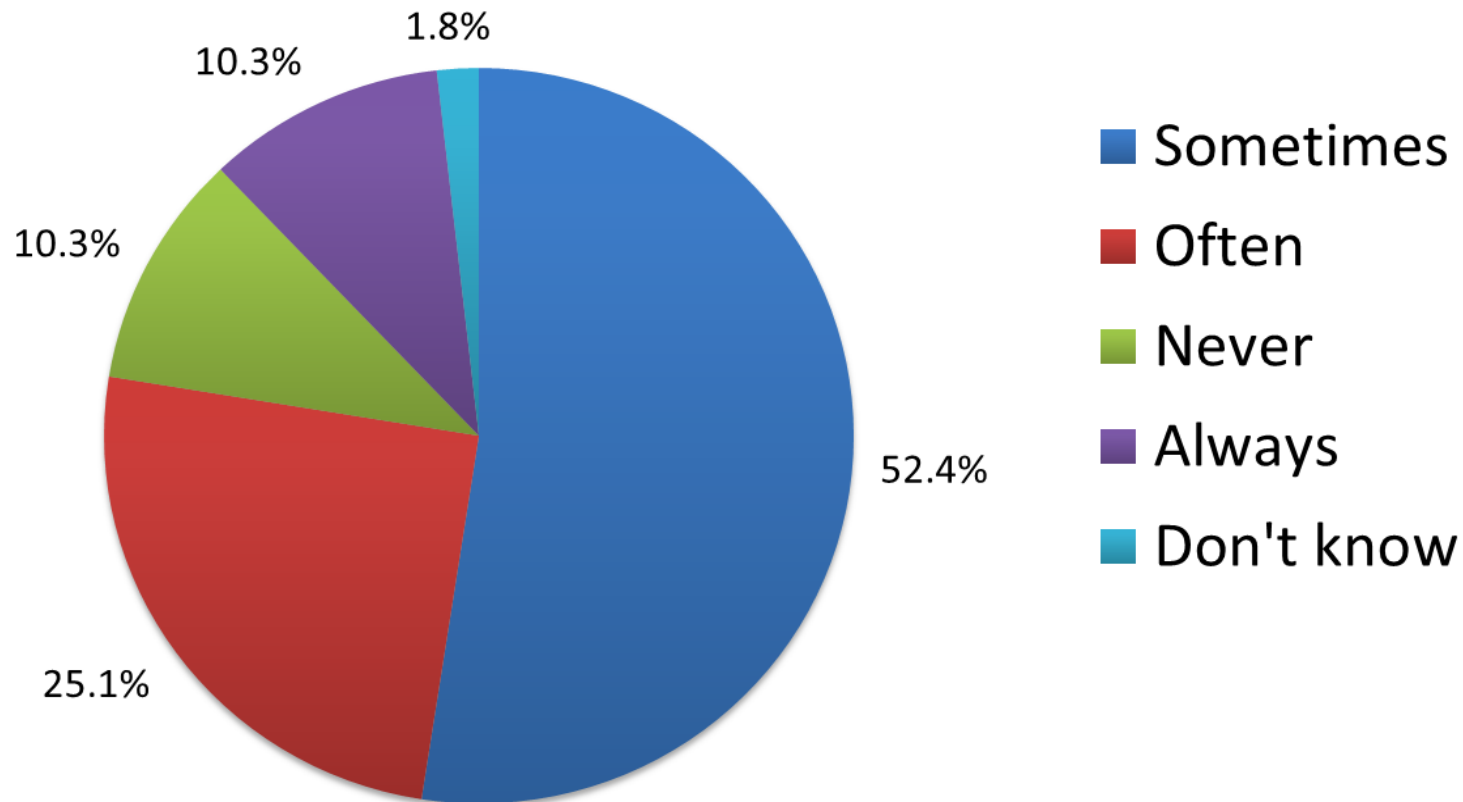


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8. For your school age children, how often does screen time (watching TV or movies, playing video games, or using a computer, tablet or smart phone) reduce other activities like being physically active, getting homework done, or spending time with family?

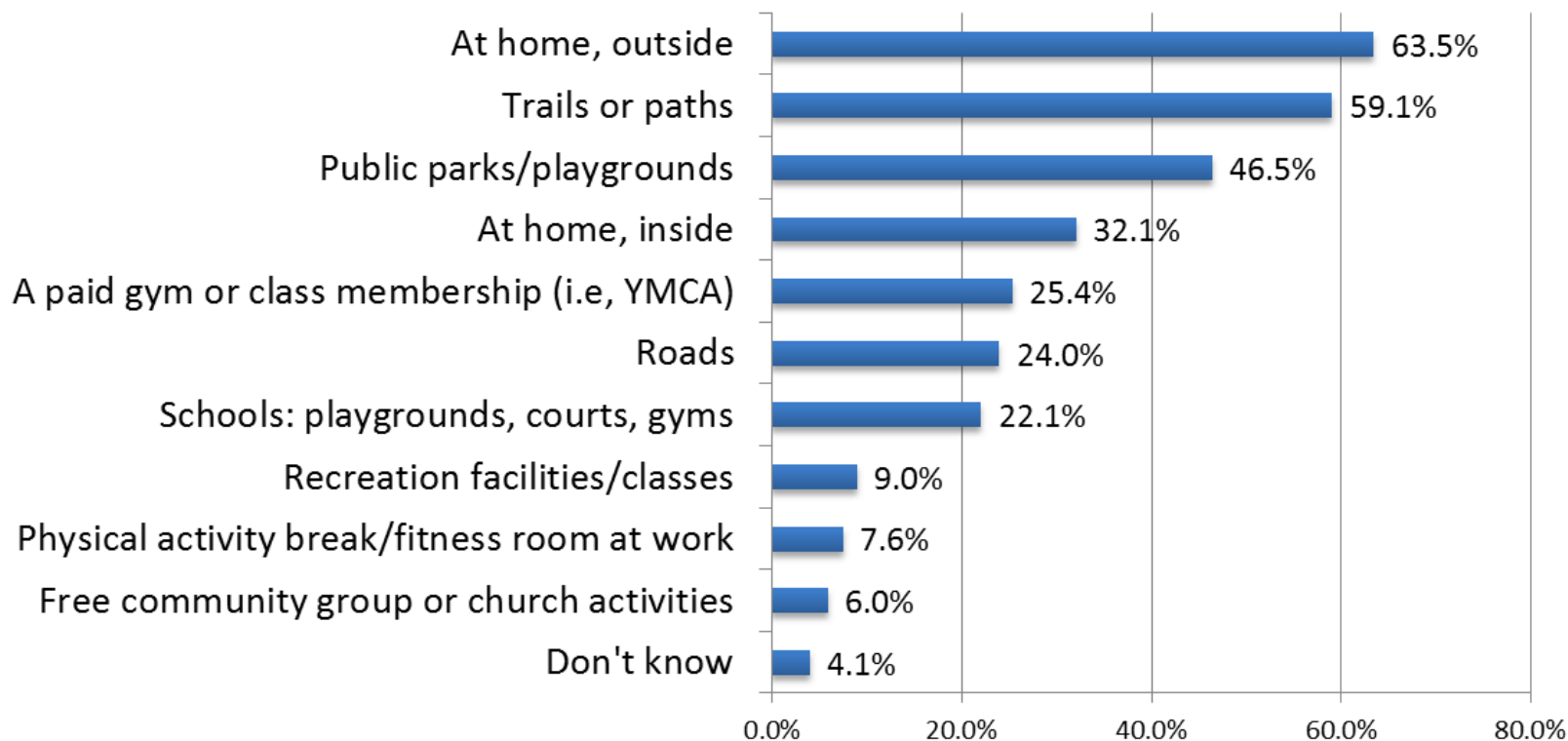


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9. Where do you or your family go to get physical activity? (Mark all that apply)

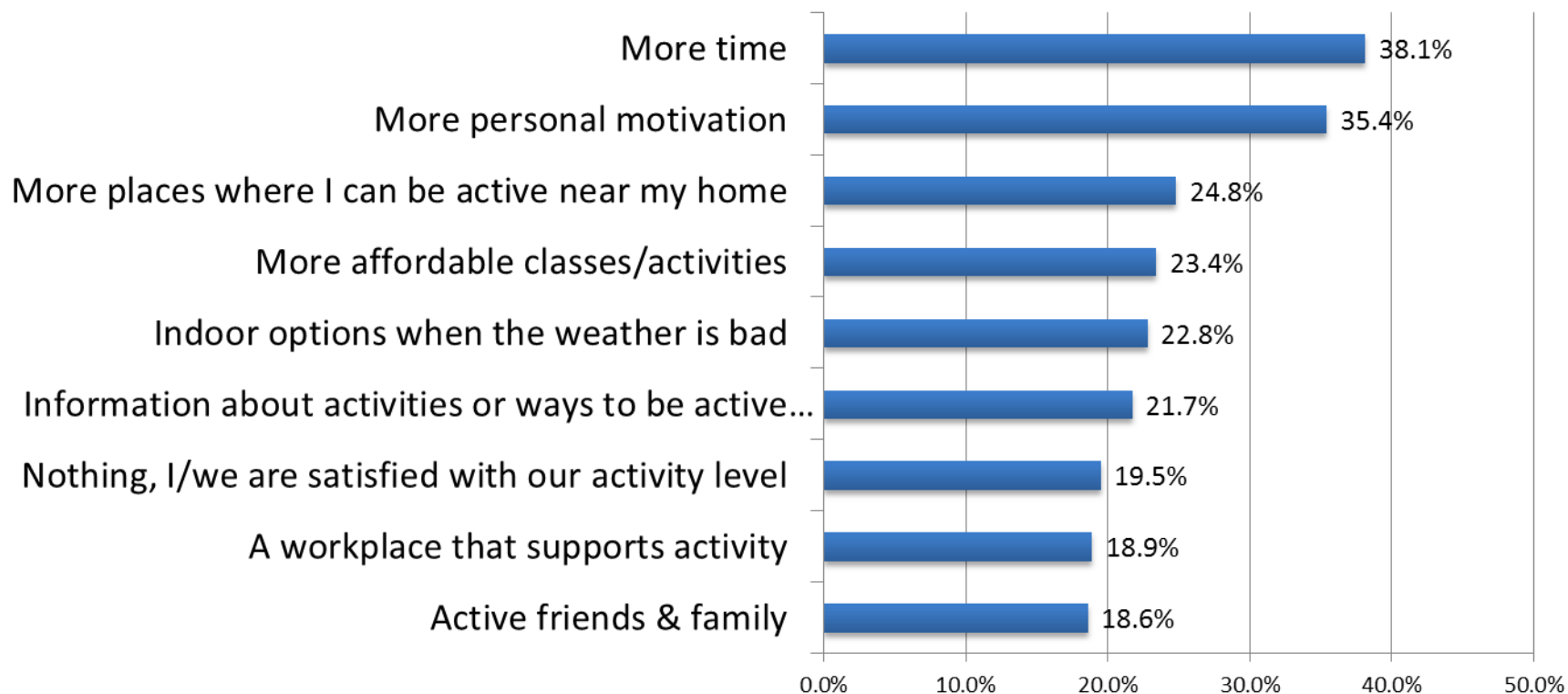


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10. Which of the following would help you or your family to be more physically active? (There were other choices)

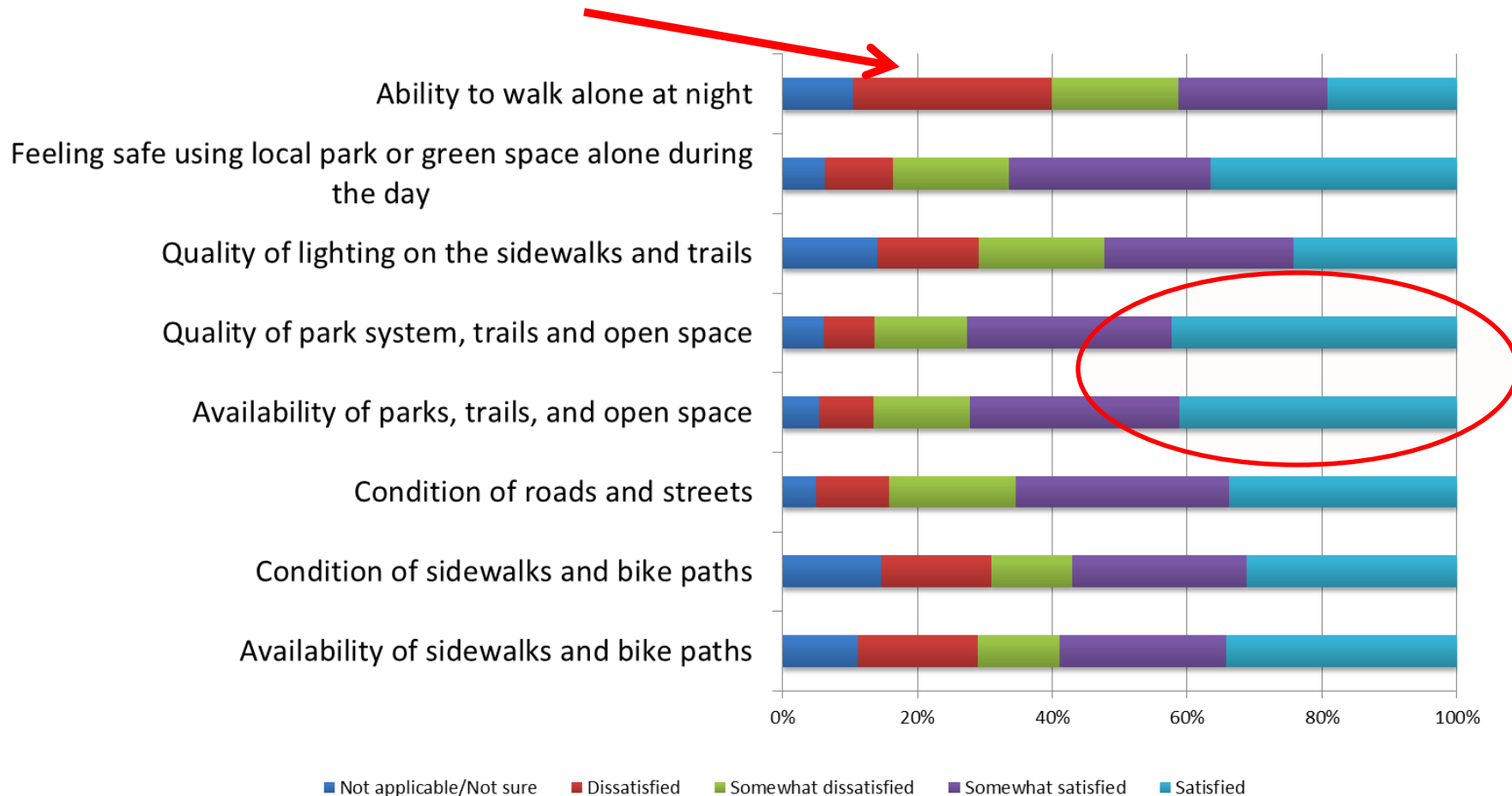


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11. How satisfied or dissatisfied are you with the following in your neighborhood?

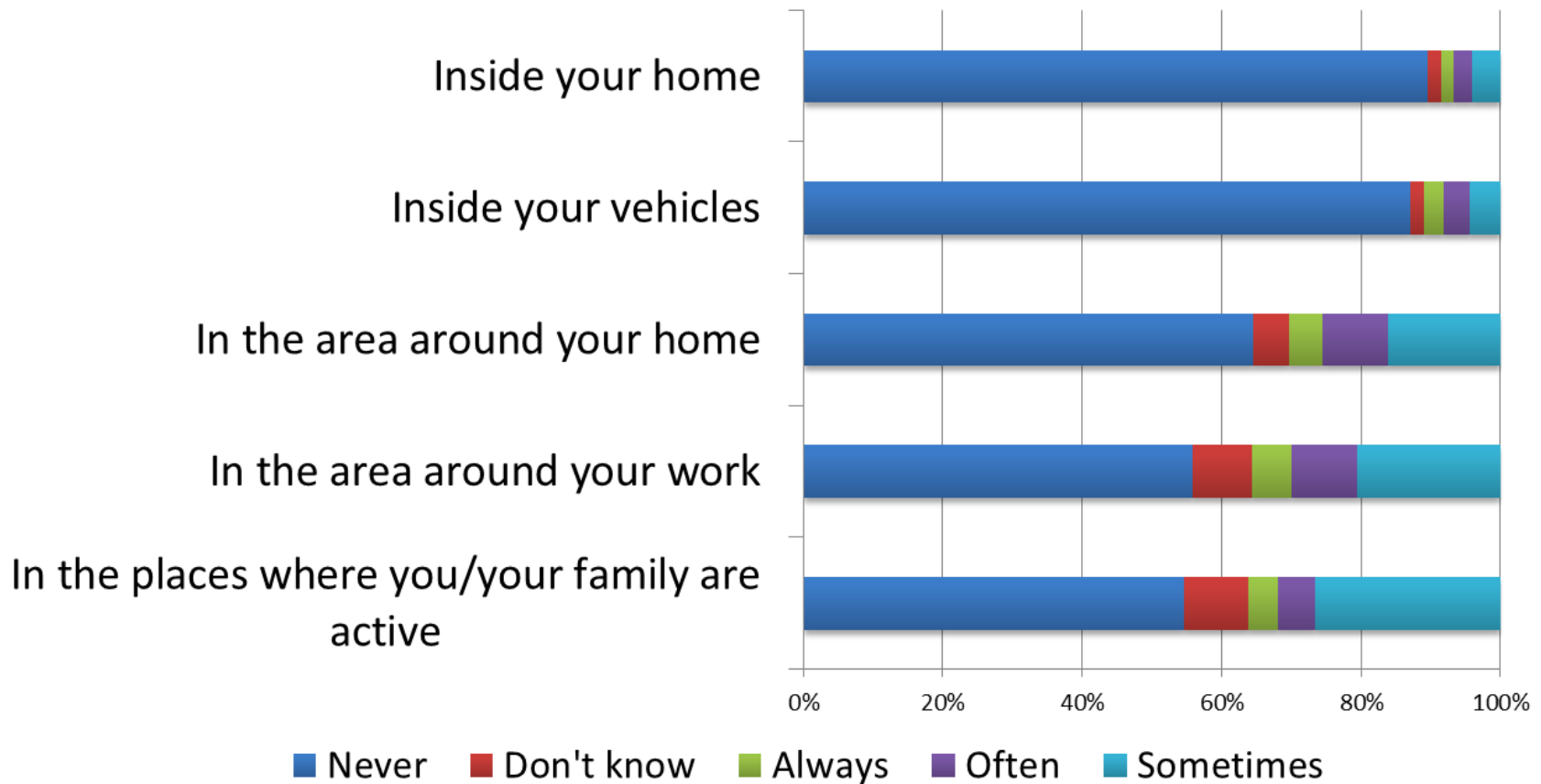


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12. Which of the following best describes how often there is cigarette smoke in the following places:

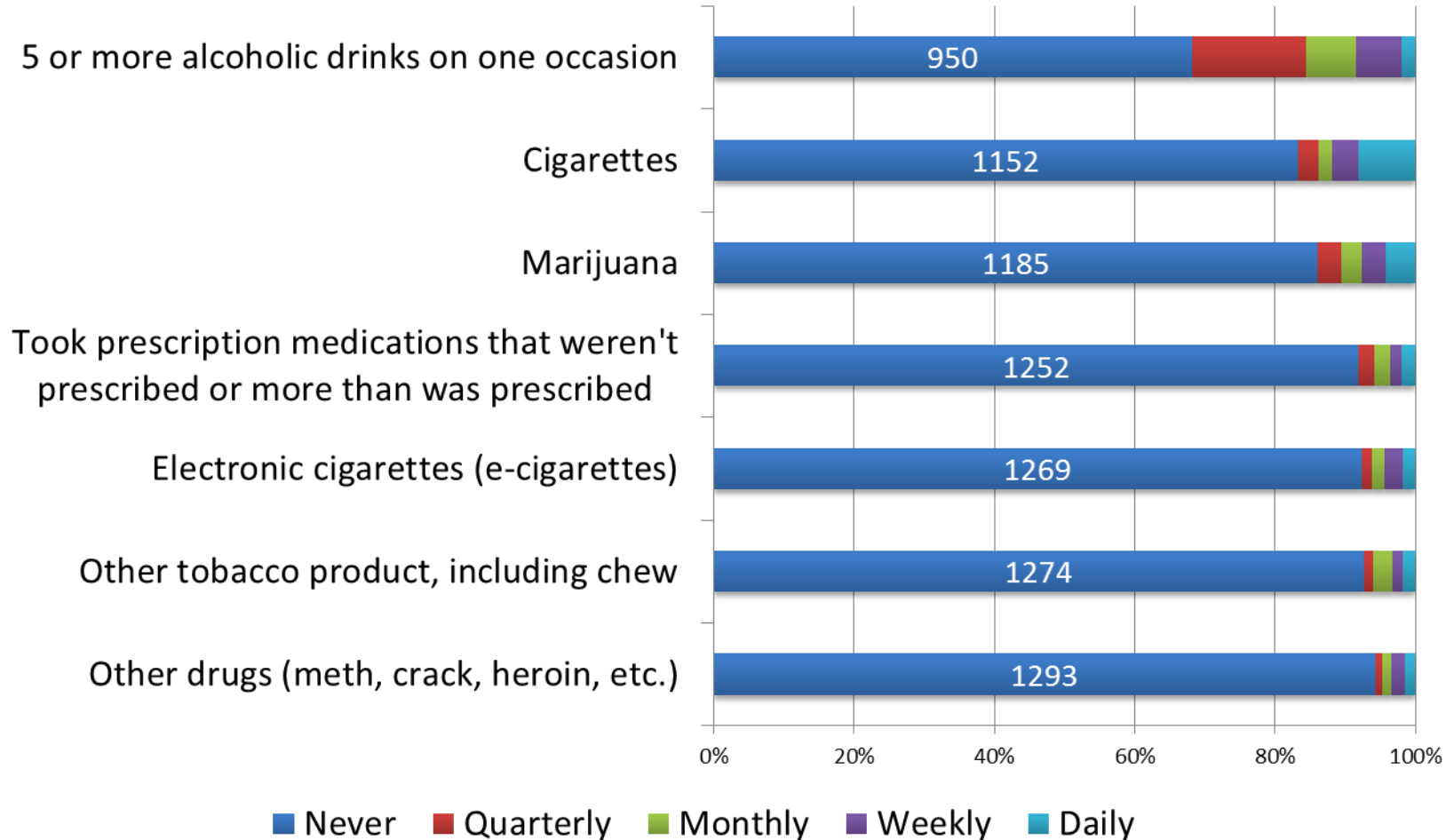


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13. In the past year, how often have you used the following substances?
1390 answered, 123 skipped



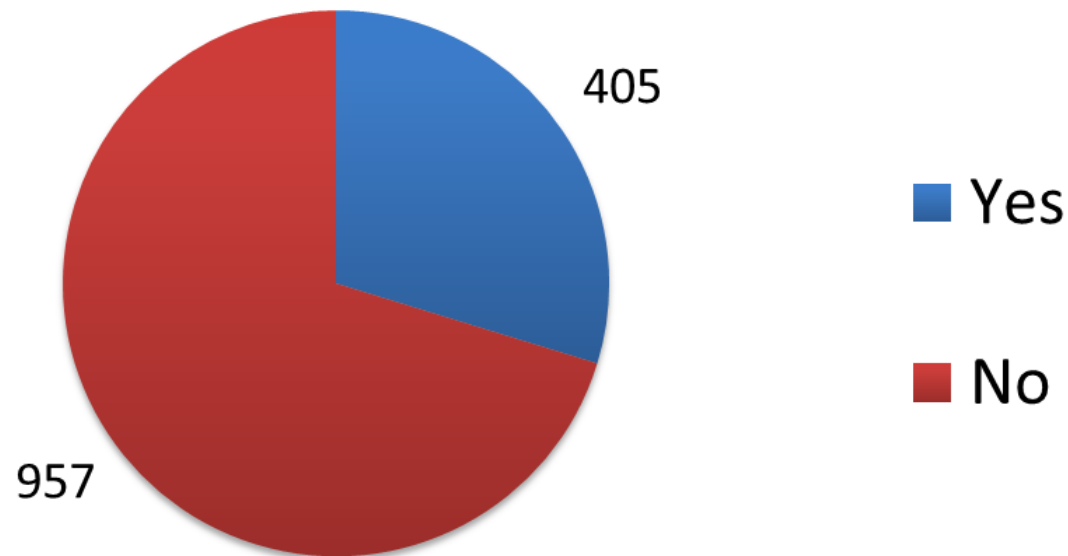
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14. In the past year, have you been concerned about your mental health, use of alcohol, tobacco or other drugs or have you been concerned about another family member's struggle with these issues?

1361 answered, 151 skipped

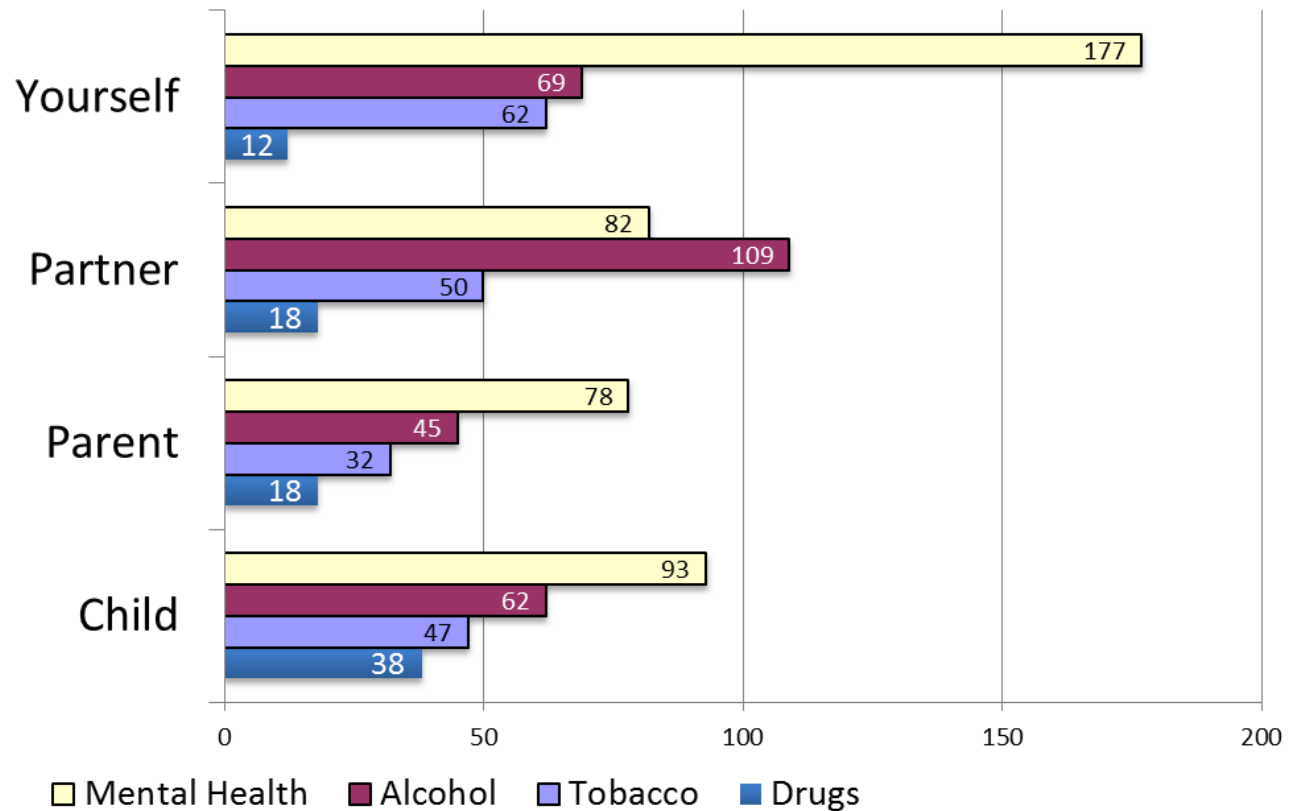


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15. Please check all the people and areas where you have concerns.

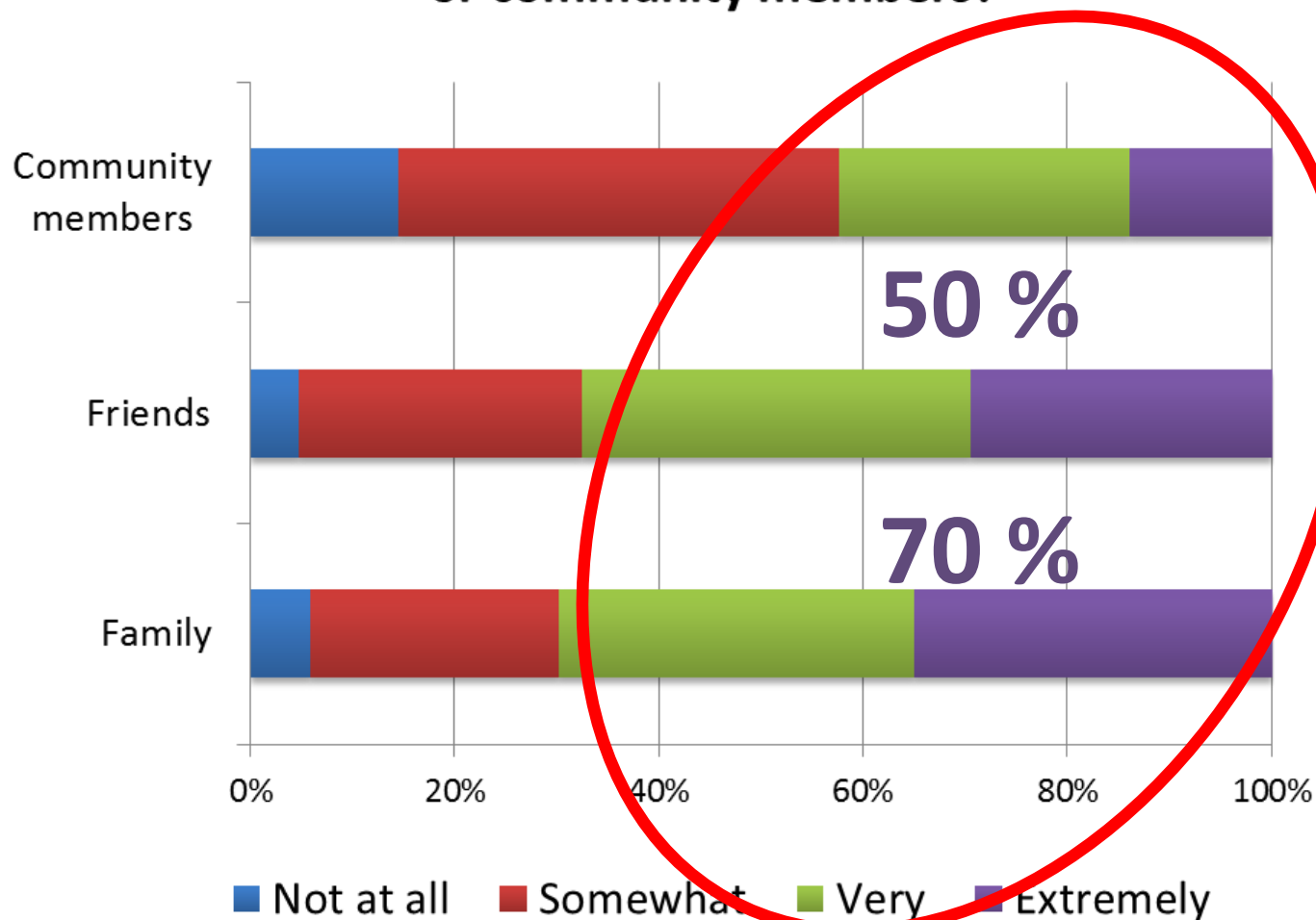


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16. How supportive is your network of friends, family or community members?

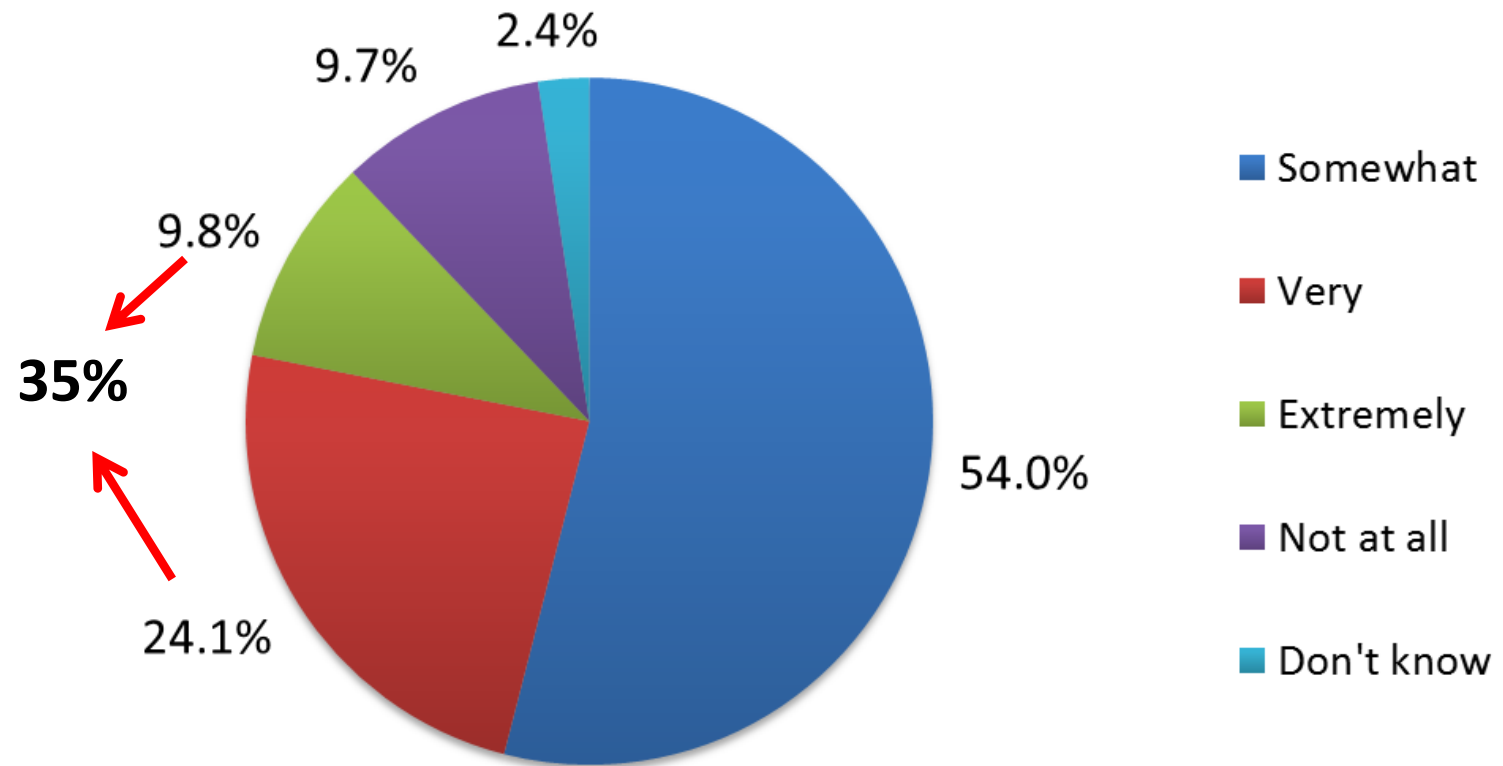


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17. Thinking about the amount of stress in your life, how stressful are most days?

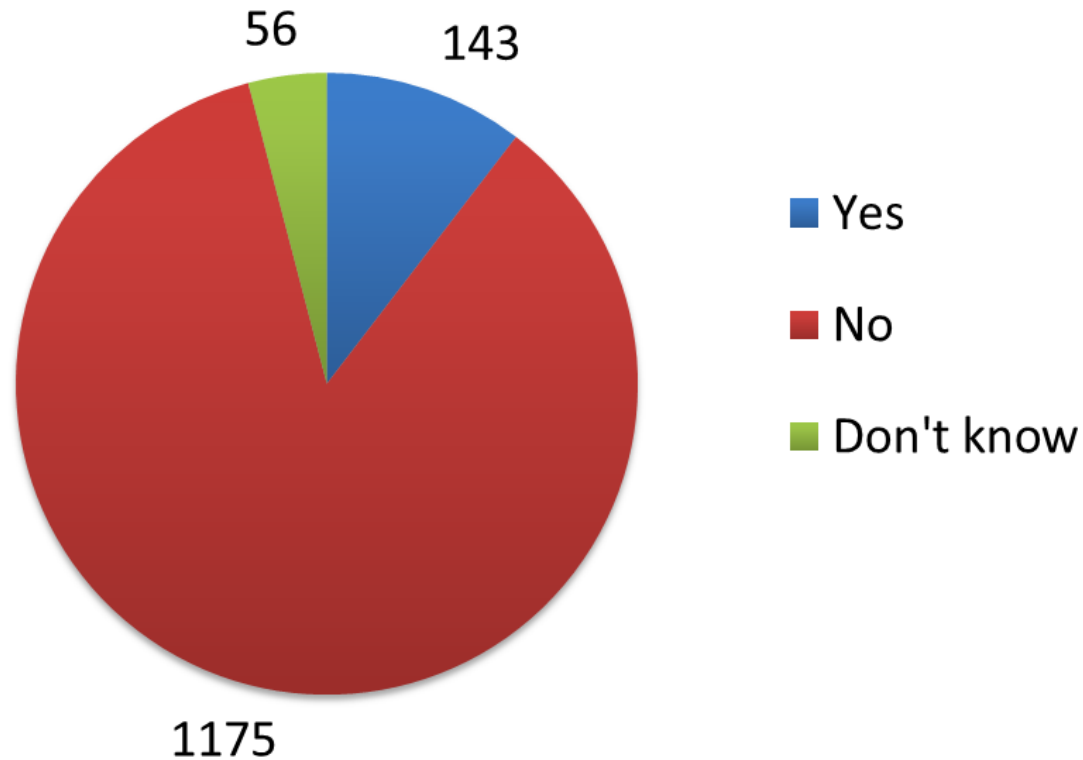


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18. In the past year, did you seriously think about killing yourself?

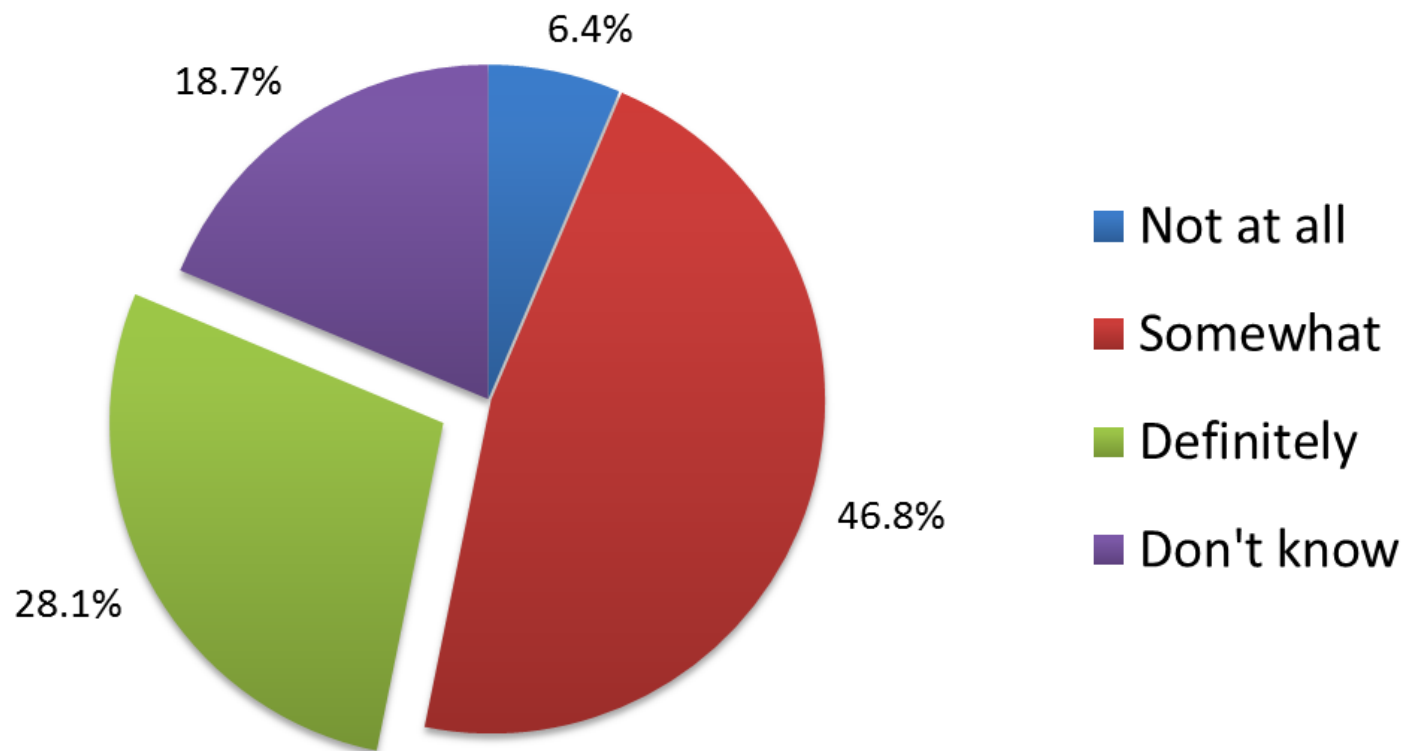


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19. Do community members have a shared feeling of pride and responsibility for what happens in your community?



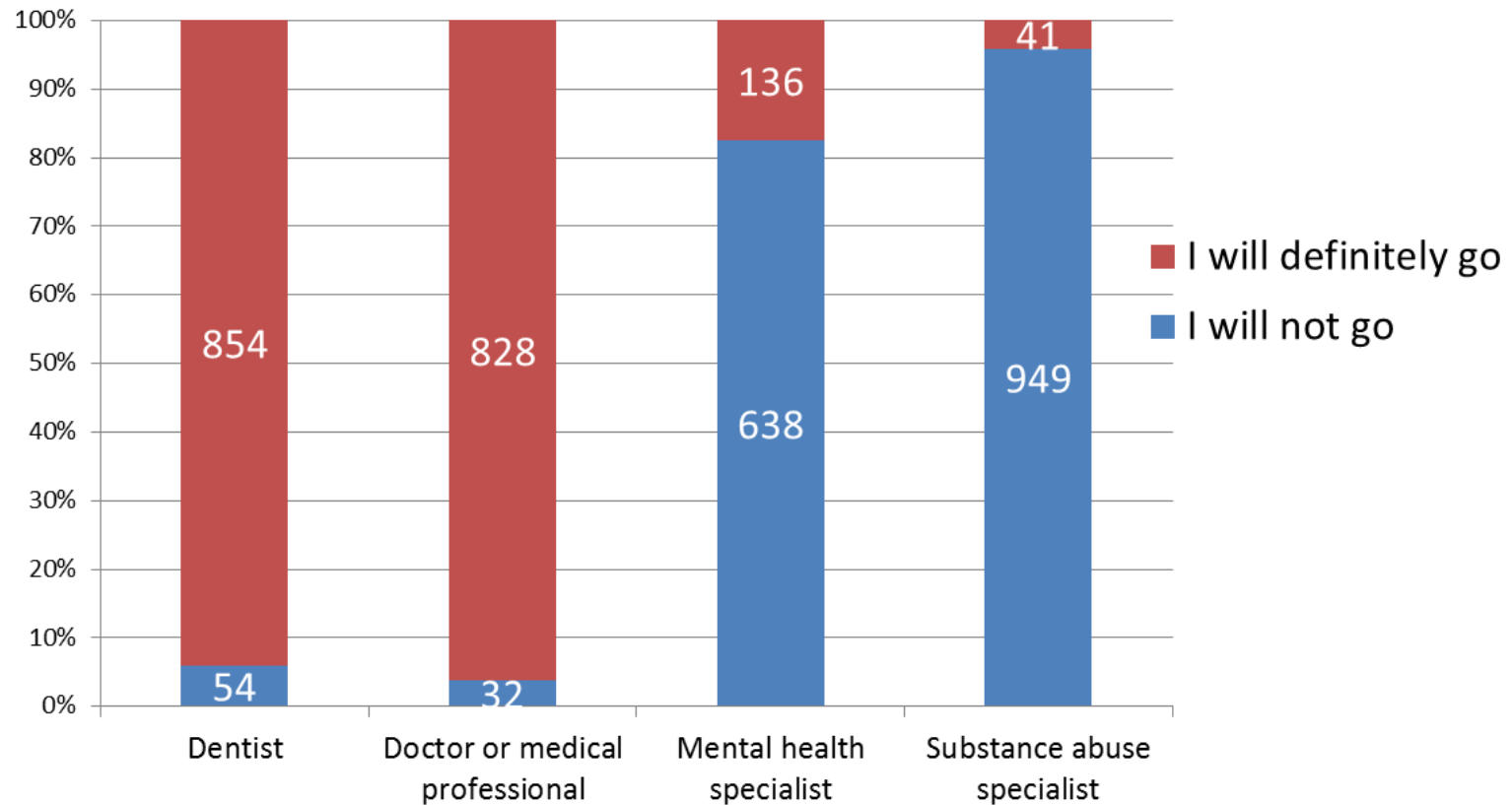
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20. How likely are you to go for an appointment in the next year with a doctor, dentist, mental health or substance abuse specialist?

1343 answered 170 skipped

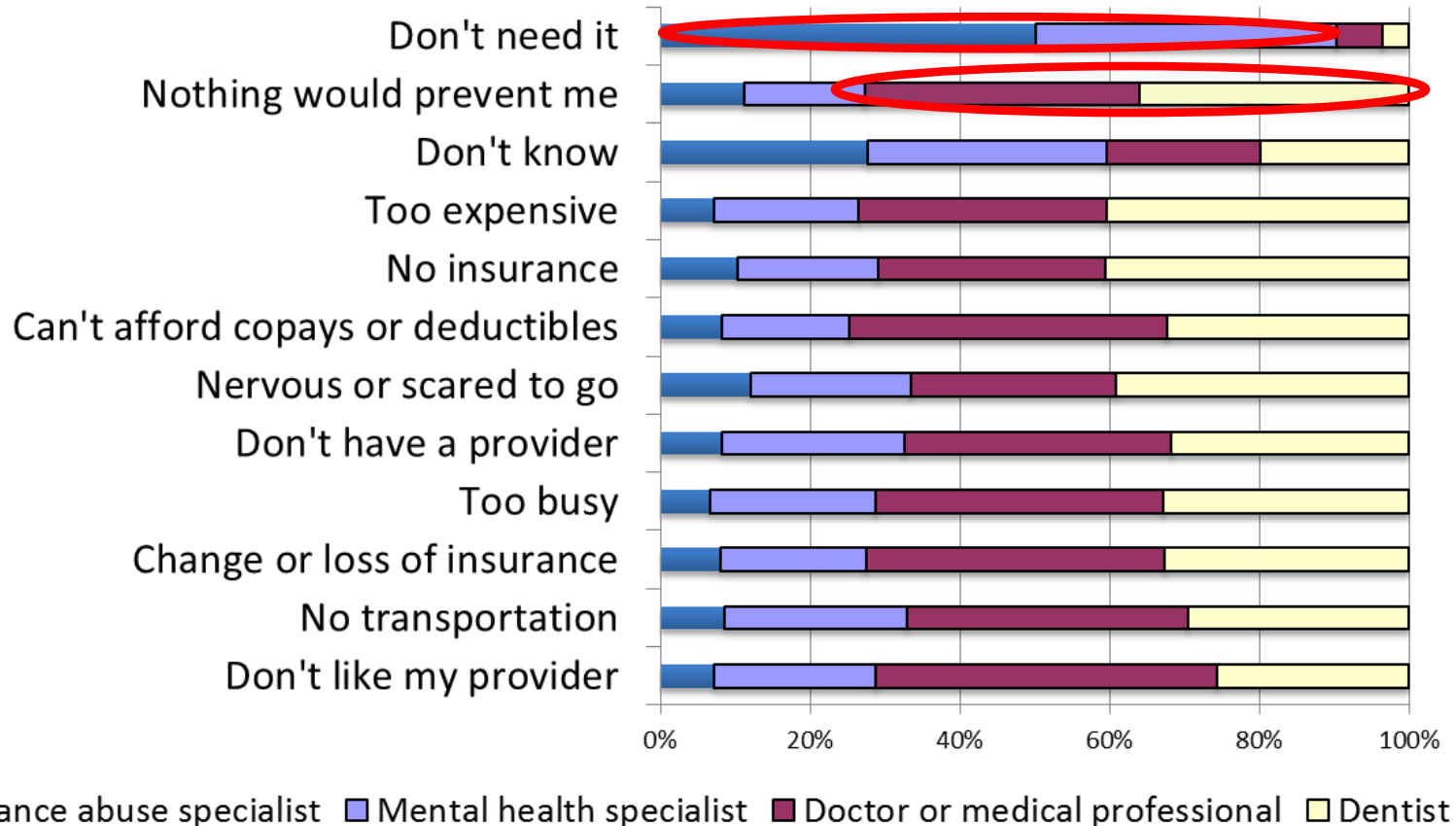


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21. What might prevent you from seeing a dentist, doctor, mental health or substance abuse specialist for services? (Mark all that apply)

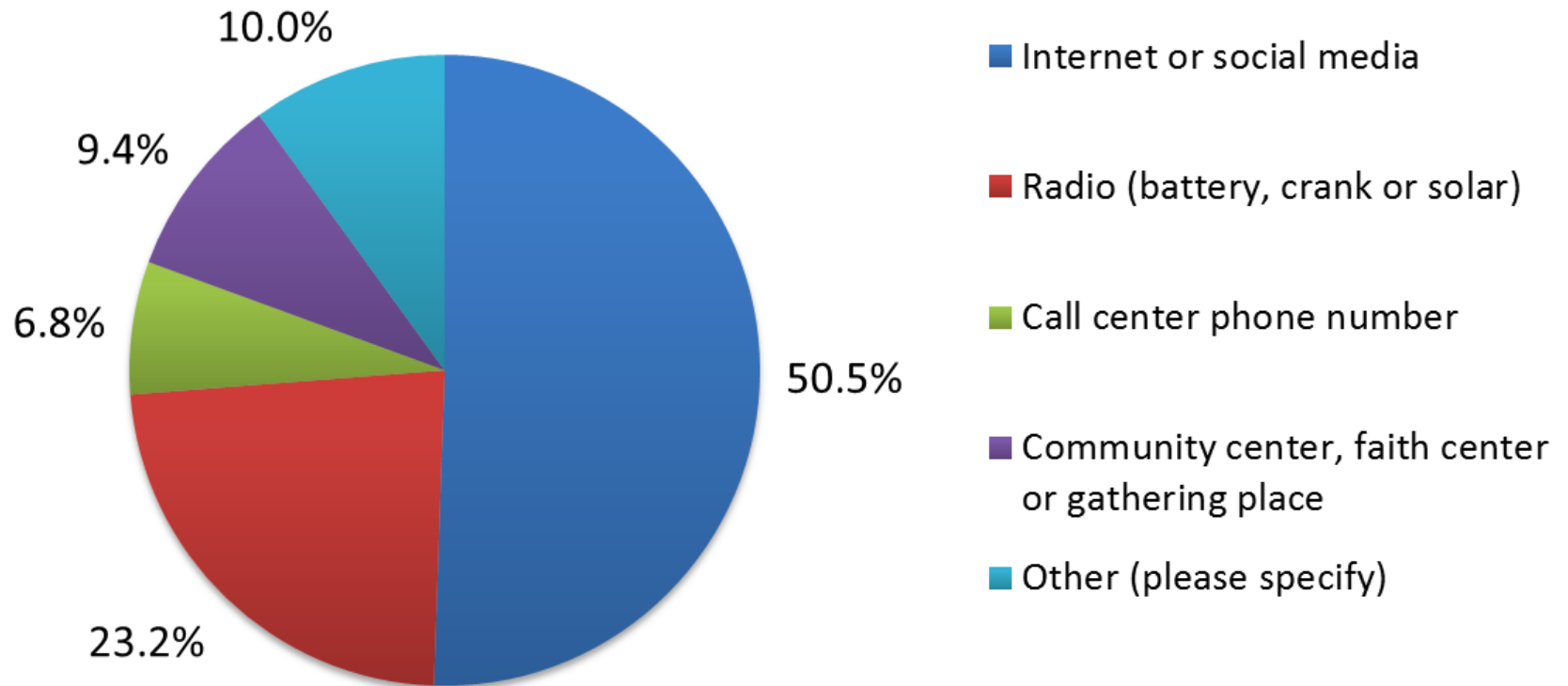


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22. If our community experienced an emergency, where would you most likely turn for information other than the T.V.?

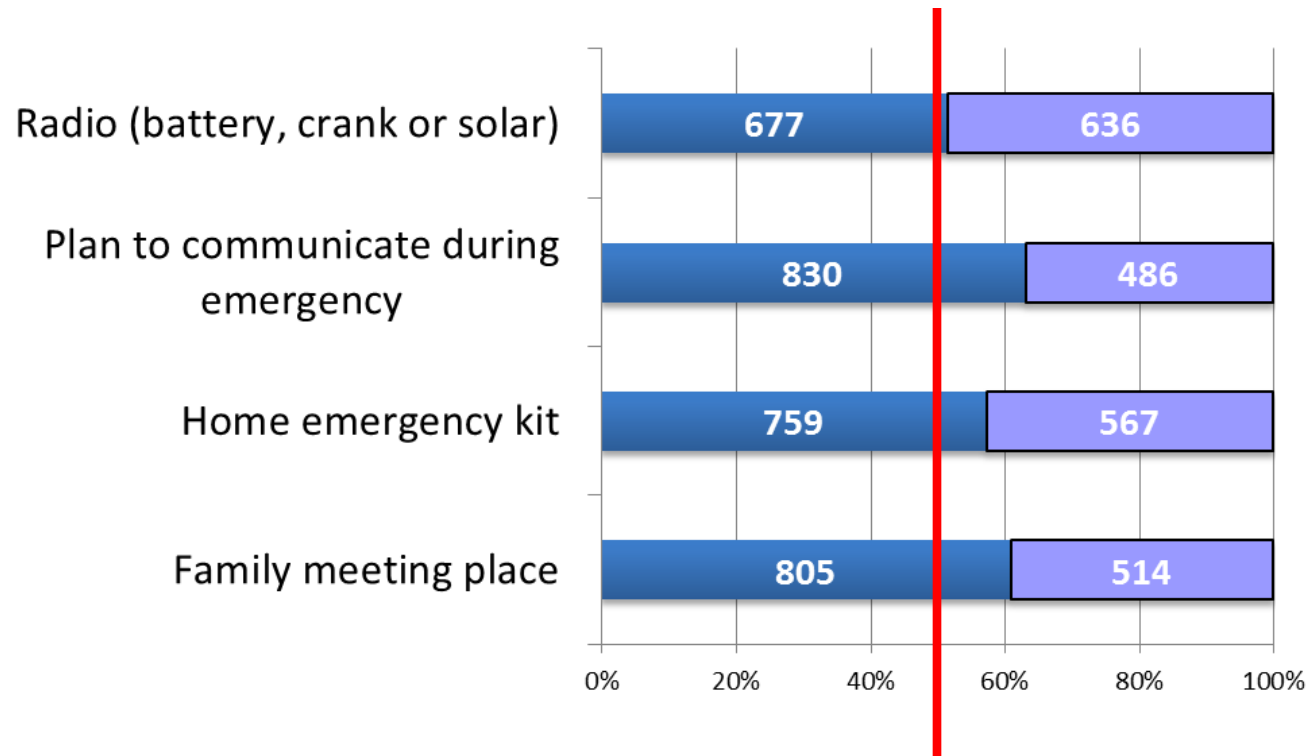


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23. In case of emergency, do you have the following?



No's outweigh Yes

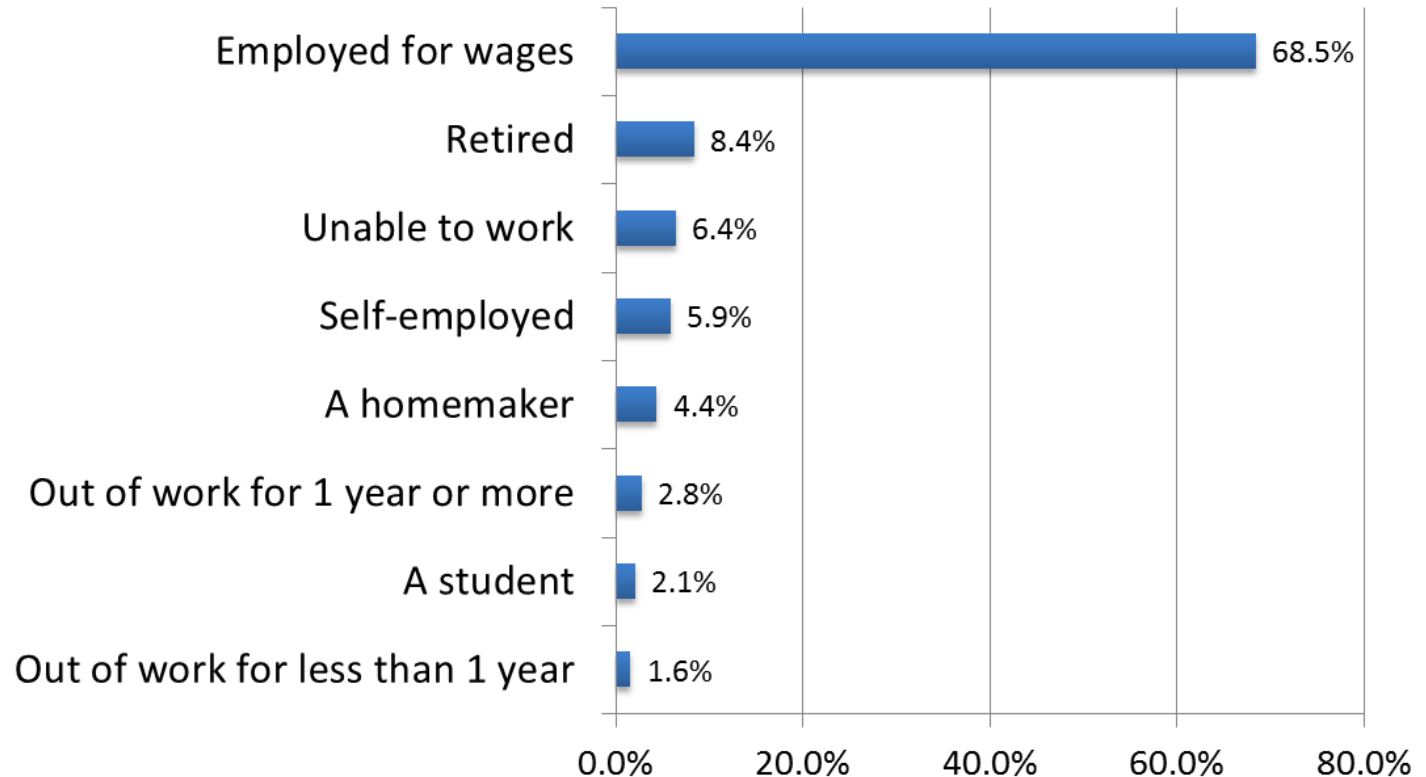


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24. Which of the following best describe your employment situation?
1351 answered, 162 skipped



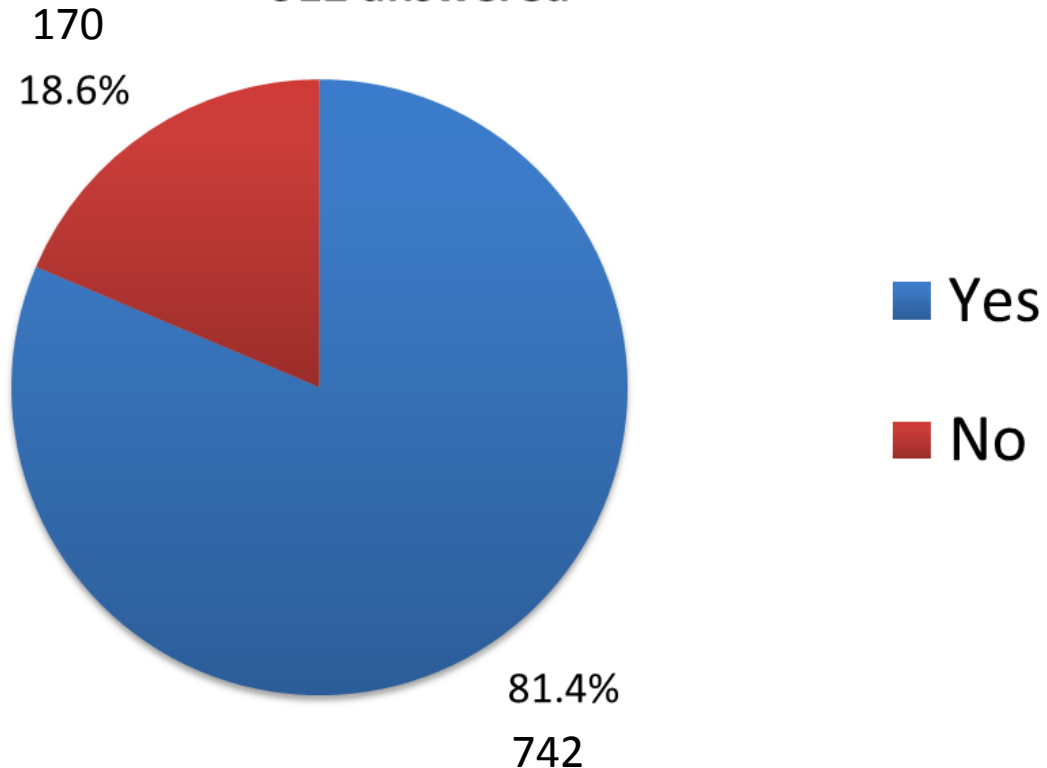
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25. Does your employer offer sick leave or paid time off?

912 answered

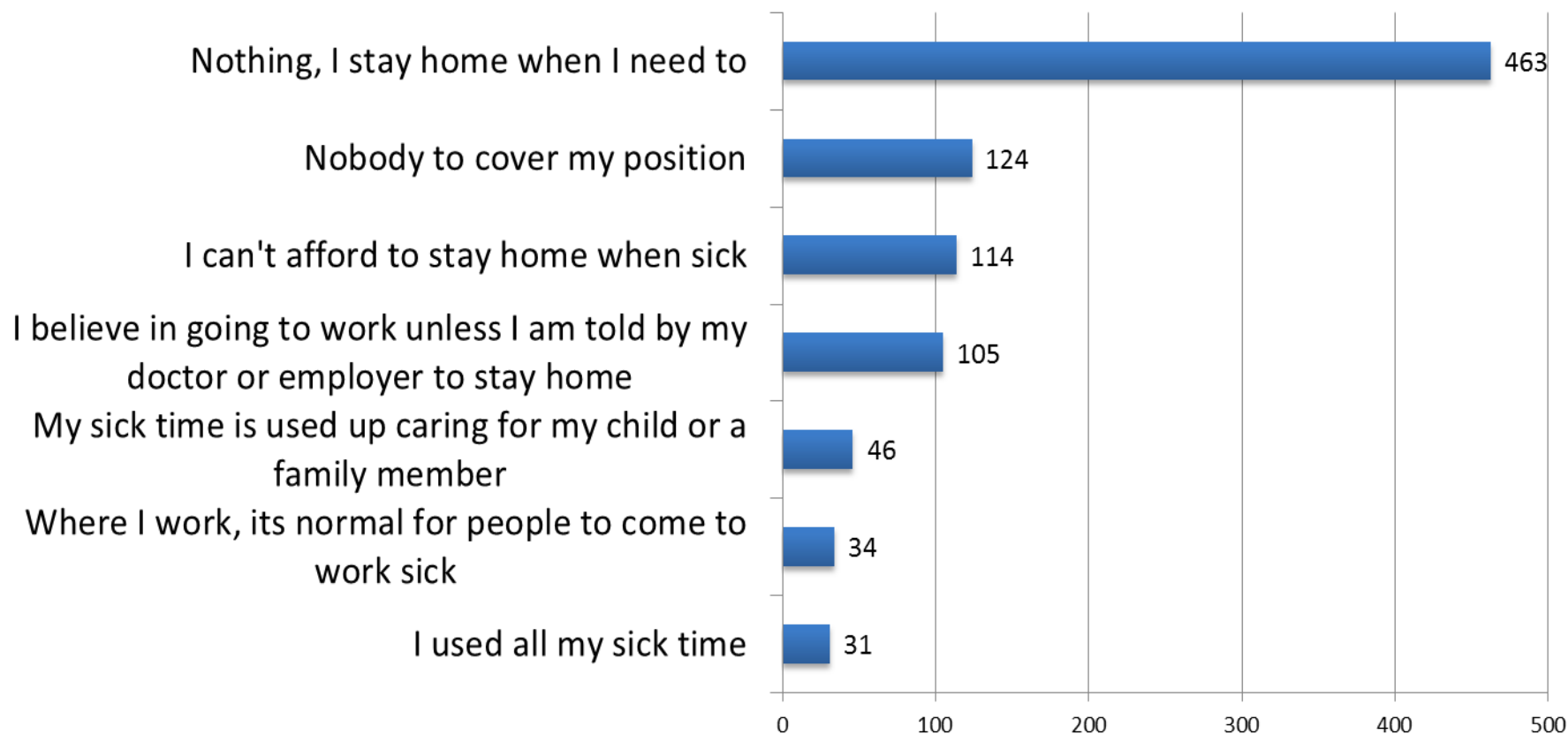


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26. What gets in the way of you staying home when sick?

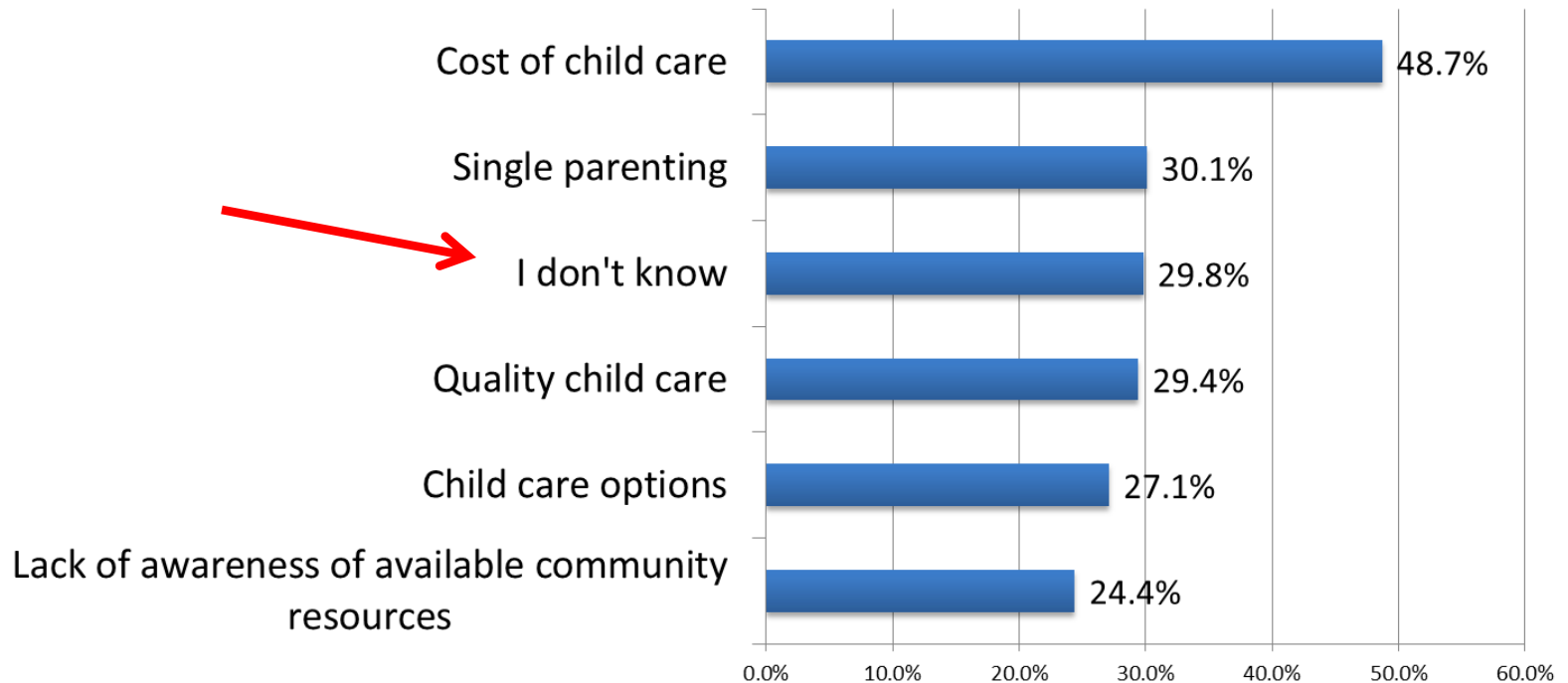


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**27. What are the biggest challenges for caregivers/parents of young children (age 0-5)? 1330 Answered, 183 skipped
5 OF 15 Responses Displayed**

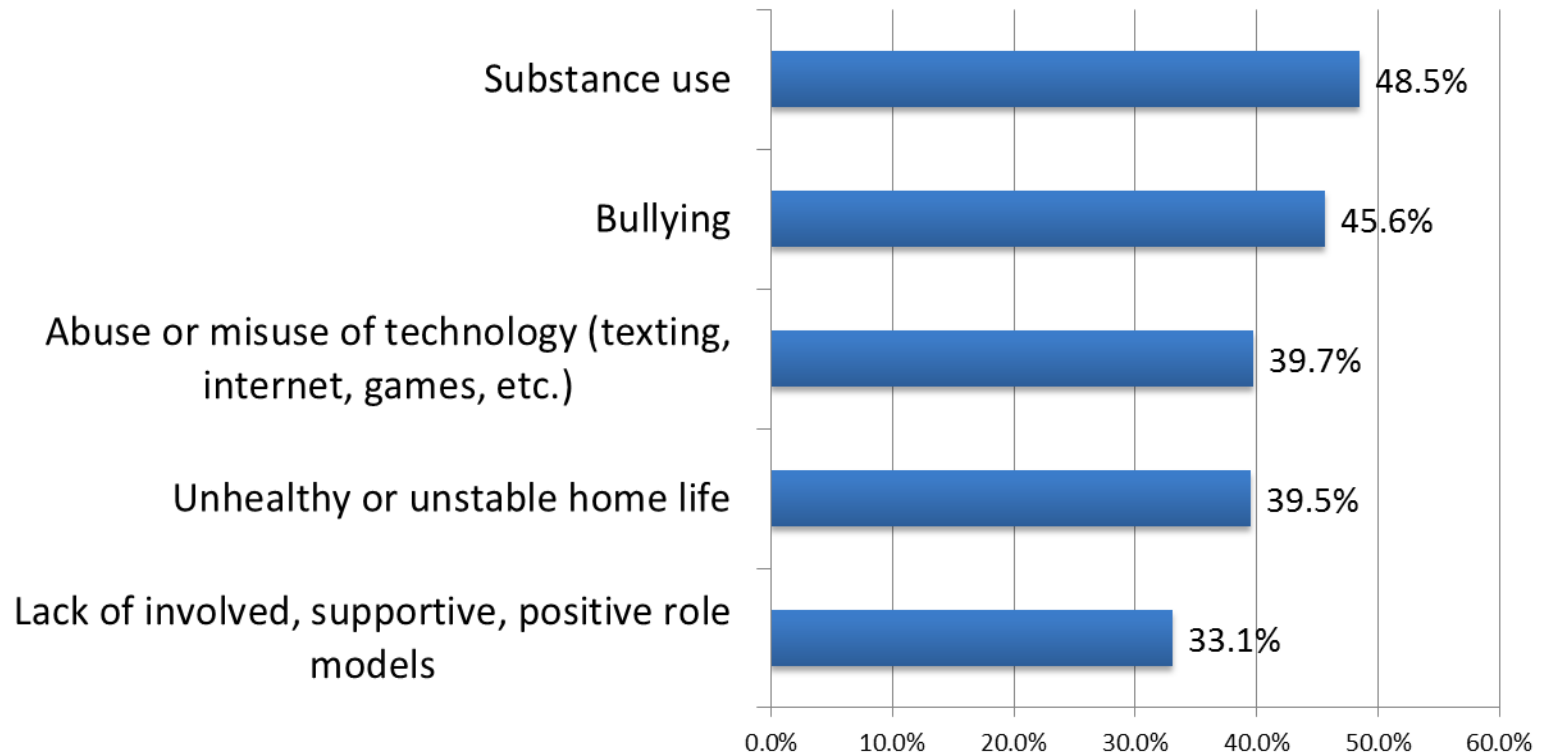


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**28. What are the biggest challenges for high-school age children?
(Mark all that apply) 5 of 14 Displayed**



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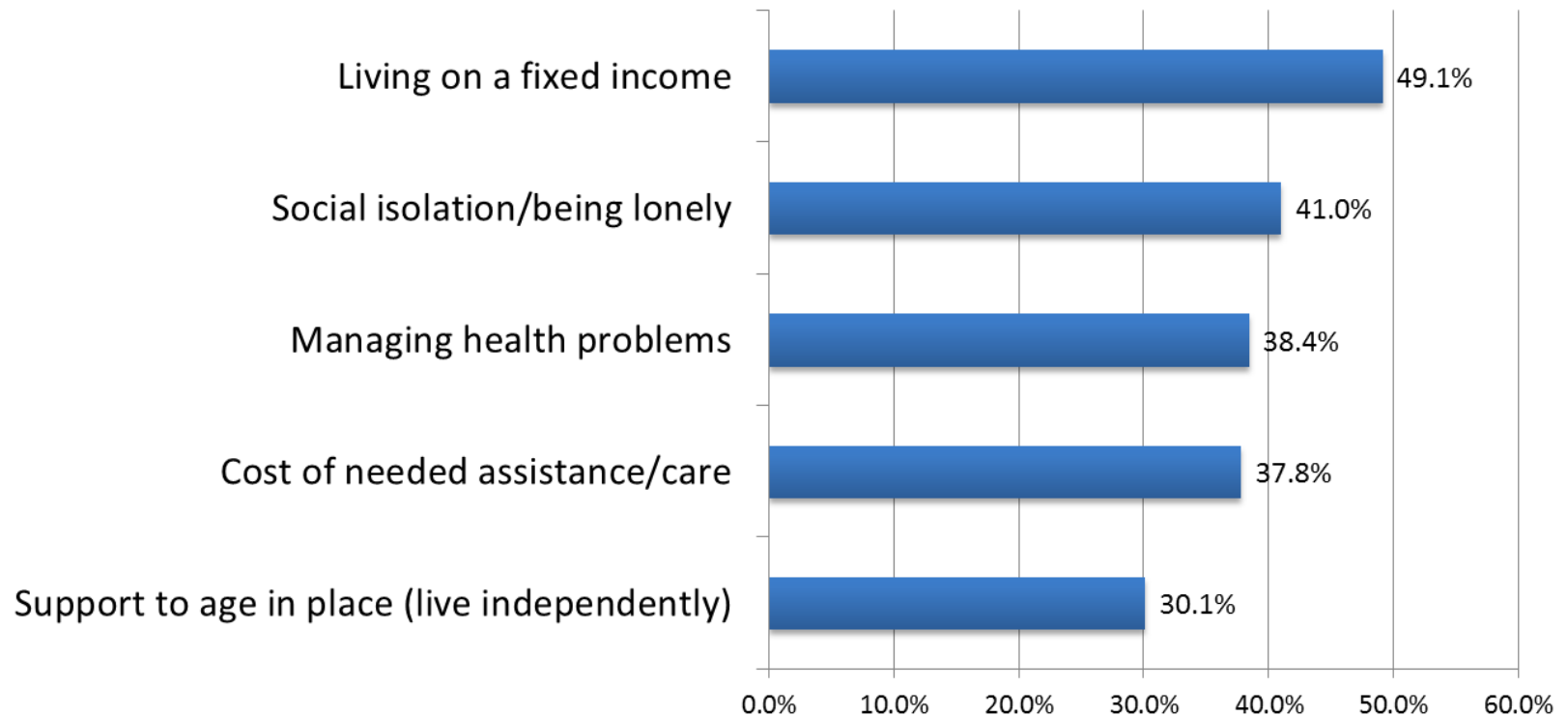
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29. What are the biggest challenges for seniors (age 65+)?

5 of 13 Displayed

1287 answered, 226 skipped

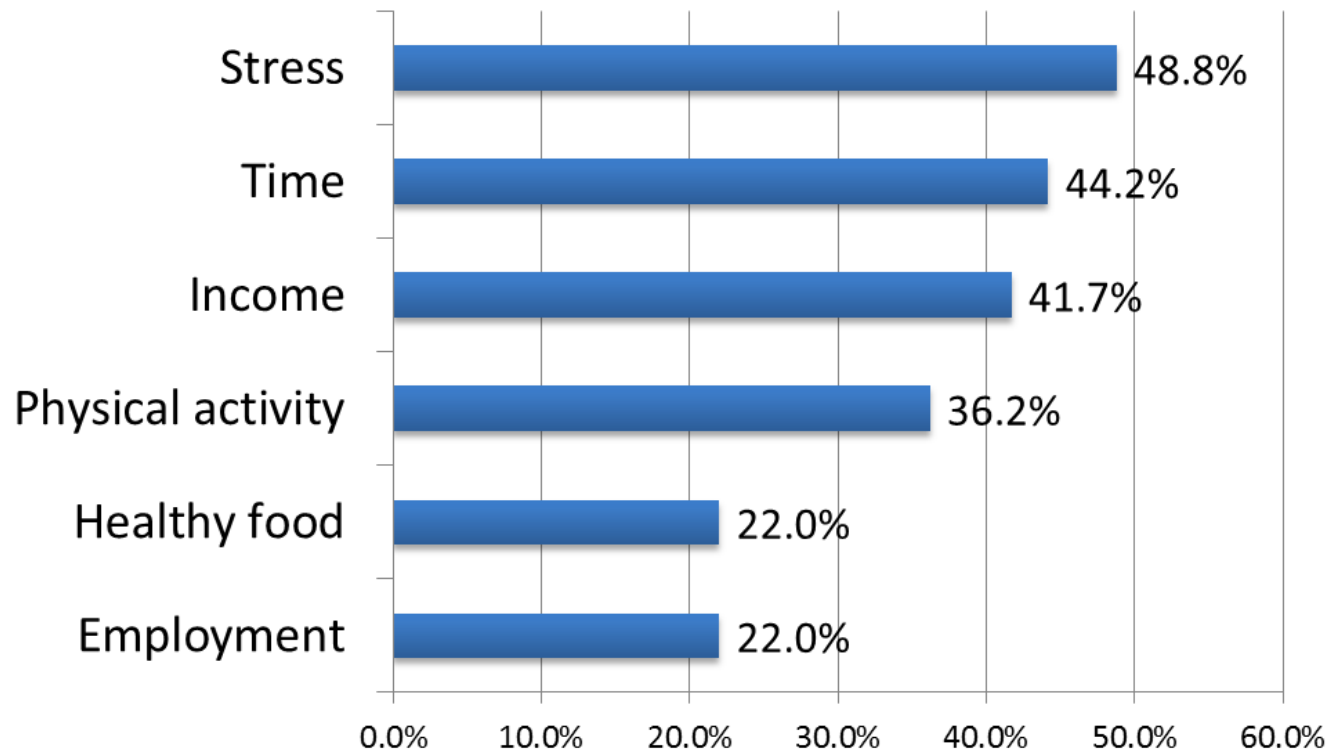


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30. What are the FIVE biggest day-to-day challenges for you and/or your family? 6 of 21 Displayed
1286 answered, 227 skipped



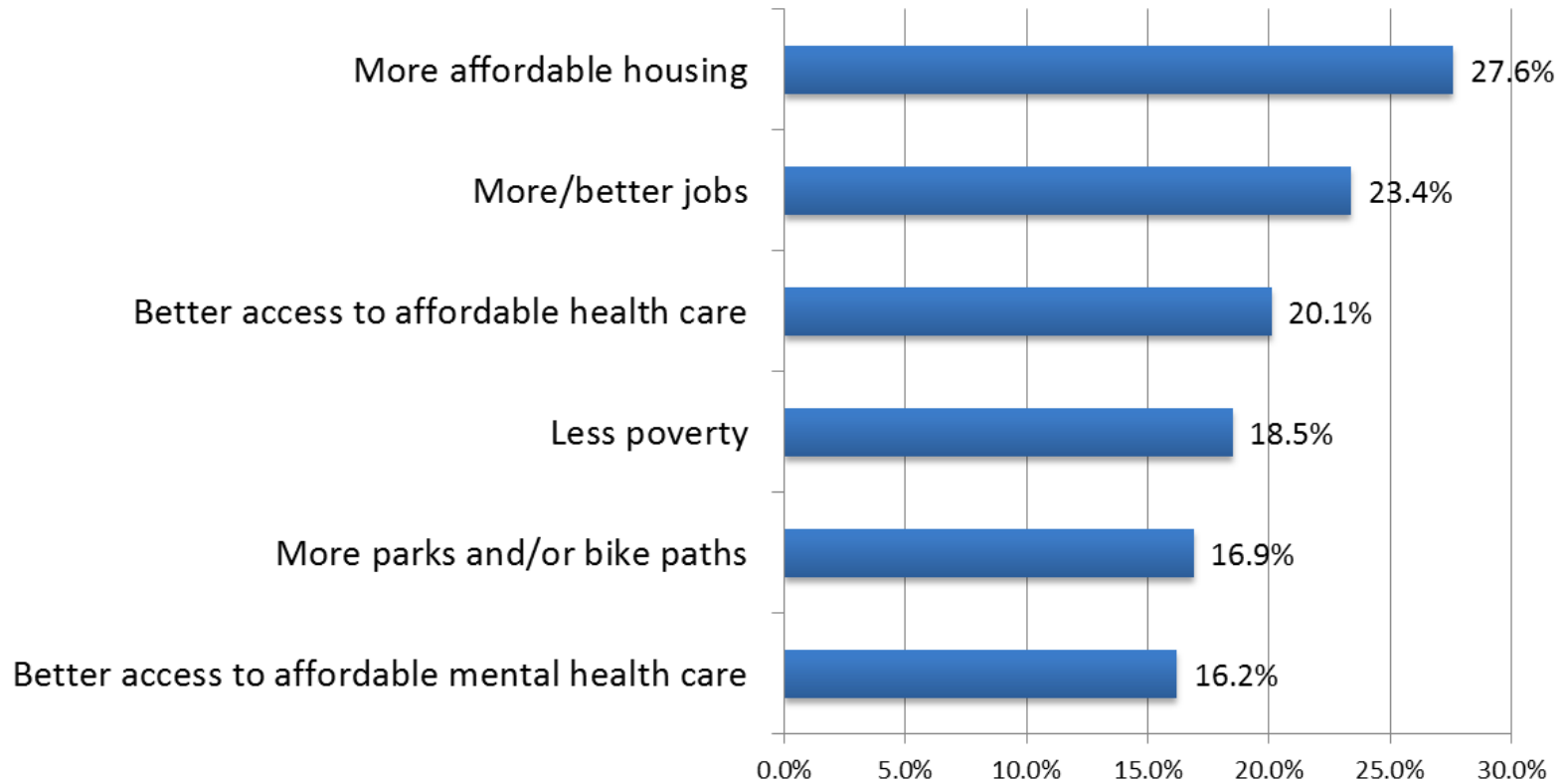
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31. Which THREE things would you change to improve health and well-being in Skagit County?

6 of 22 Displayed - 1311 answered, 202 skipped



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Connie Davis and Kari Ranten

Skagit Regional Health



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Sea Mar Community Health Centers Forces of Change Presentation



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Closing Remarks

- **Next meeting September 3rd**
- **NWESD 189**
- **Time: 9:00 to 12:00**

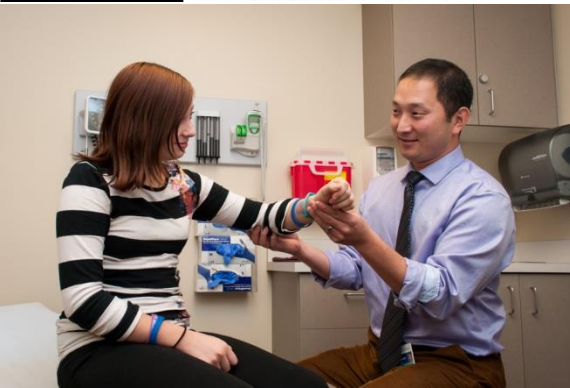


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Ron Wesen, Commissioner*

Skagit Regional Health



Forces of Change

A Report to the Population Health Trust

August 6, 2015



Our vision: Working together, Skagit Regional Health will transform healthcare by improving access, service, quality and efficiency in support of our goal of healthier communities.



A black and white image of a handwritten signature that reads "Gregg Davidson".

Gregg Davidson, FACHE
Chief Executive Officer



• Leadership



Integrated health care delivery system

- **11 outpatient clinic locations**
 - Primary care focus
 - Wide variety of specialty care
- **140 providers at Skagit Regional Clinics**
 - 373 providers with active status on Medical Staff of Skagit Regional Health
- **137-bed acute care hospital**

Skagit Regional Health's network



An economic driver

Revenue:

- Net patient revenue 2014 \$261 million
- Anticipated net patient revenue 2015 \$274 million
- Net patient revenue growth: Ranks first among peers
 - 2008 \$148 million
 - 2013 \$258 million +74%

Uncompensated Care:

2014: \$15.2 million

An economic driver

Largest employer:

- Salaries and Benefits 2014 \$134 million
- FTE growth: Ranks second among peers
 - 2008 1,018
 - 2013 1,343 +32%
- Largest employer in Skagit County
 - 2014 W-2 forms issued 2,200

Skagit Regional Health: Partnerships



Seattle Children's
HOSPITAL • RESEARCH • FOUNDATION



**CASCADE
VALLEY**
Hospital and Clinics

Close to Home
Close to Heart



UW Medicine

MIN-NS
MEDICAL INFORMATION NETWORK - NORTH SOUND

SWEDISH
NEUROSCIENCE
INSTITUTE

Skagit Regional Health
Skagit Valley Hospital • Skagit Regional Clinics

Trends in health care

- **Volume to Value**

- Value based purchasing
- Bundled payments
- Accountable Care Networks

- **Transparency**

- Data
- Pricing
- Quality

- **Consumerism**

- Retail
- Mobile apps
- Virtual clinics

Trends in health care

- **Regionalization**
- **Regulations and policy**
- **Everything electronic**
- **Real-time feedback**
- **Patient access to care providers
24/7**

Trends in Healthcare

- **Patient engagement**
 - Payer and government oversight
 - Tracking you
 - Individuals tracking individuals
 - Teams tracking teams
- **Information exchange**
- **Non-traditional work force**
- **To move the dial we need partnerships**

Goals

- **Quality outcomes**

- Safety
- People
- Payers
- Policy
- Society

Goals

• **Quality outcomes**

- August 2014 – July 2015
 - Urinary Tract Infections – 1 non-CCU, 1 CCU = 2 total
 - Hospital-acquired c-diff = 0 cases
 - Hospital-acquired MRSA = 0 cases
 - Ventilator associated events = 1 case
 - Blood borne pathogen exposure = 46 total exposures or needle sticks in hospital and clinics
 - Elective deliveries before 39 weeks = 2

Goals

- **Integrate population health**

- Access to care
- Communicate across the continuum of care
- Prevention and wellness
- Case Management
- Education
 - Health literacy
 - Shared decision making
 - Cultural competency
- Outreach

Population Health

North Sound Mental Health Administration
Regional Support Network for Island, San Juan, Skagit, Snohomish, and Whatcom Counties
Improving the mental health and well being of individuals and families in our communities
117 North First Street, Suite 8 • Mount Vernon, WA 98273 • 360.416.7013
800.684.3555 • Fax 360.416.7017 • TTY 360.419.9008 • Email nsmha@nsmha.org • Web Site http://nsmha.org



Residency Clinic
•Access to care

Mental Health/ Chemical Dependency
•Resources
•Care plan

Hospital
•Inpatient team connects plan to community systems
•DSHS ED plan

Public Health Department
•Access
•Resource connecting

SNF
•Resource
•Readmission Review
•PC
•Shared care plan

Schools Jail
•Partnership
•Preventative

Home Health
•Telemedicine partnership
•Transitional Care from HH
•Self care

Patient at Home
•MIN-NS
•Resource connecting
•Transitional Coaching

PCP
•Has MSW Resource
•Coordinated Care Plan

CONNECTED
Patient Navigator
Outpatient Care
Coordination

Access = adding providers

- **Recruited 33 providers in 2014**
- **Have recruited 25 so far in 2015**
- **Growing our own:**
 - 26 Family and Internal Medicine residents
 - 22 third- and fourth-year medical students



Questions? Discussion



Skagit Regional Health
Skagit Valley Hospital · Skagit Regional Clinics



Sea Mar Community Health Centers

Forces of Change



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OUR MISSION

Sea Mar Community Health Centers is a community-based organization committed to providing quality, comprehensive health, human, and housing services to diverse communities, specializing in service to Latinos.



Sea Mar's administrative offices and skilled-nursing facility near Boeing Airfield, South Park, Seattle.

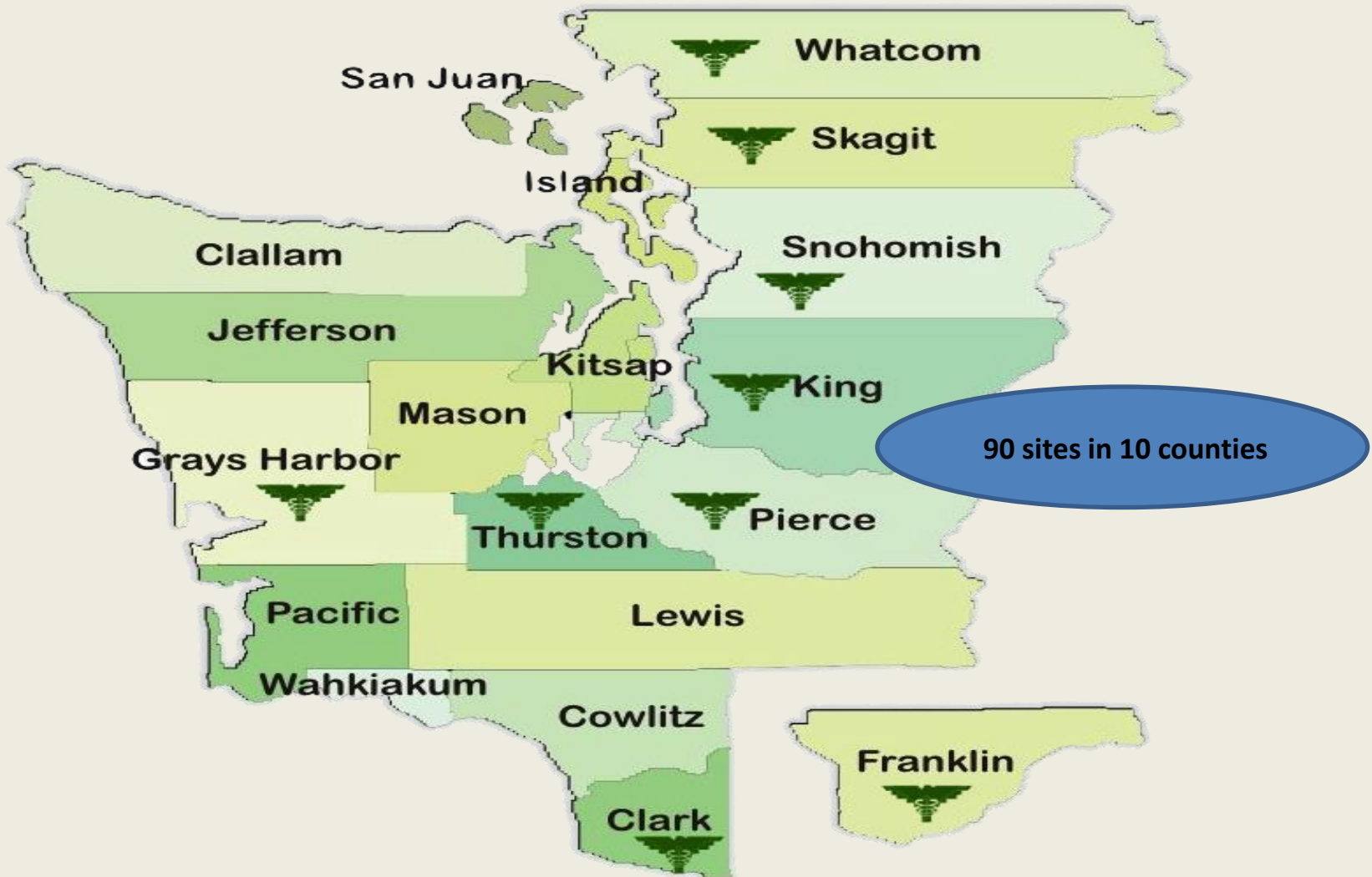


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OUR LOCATIONS



Skagit County

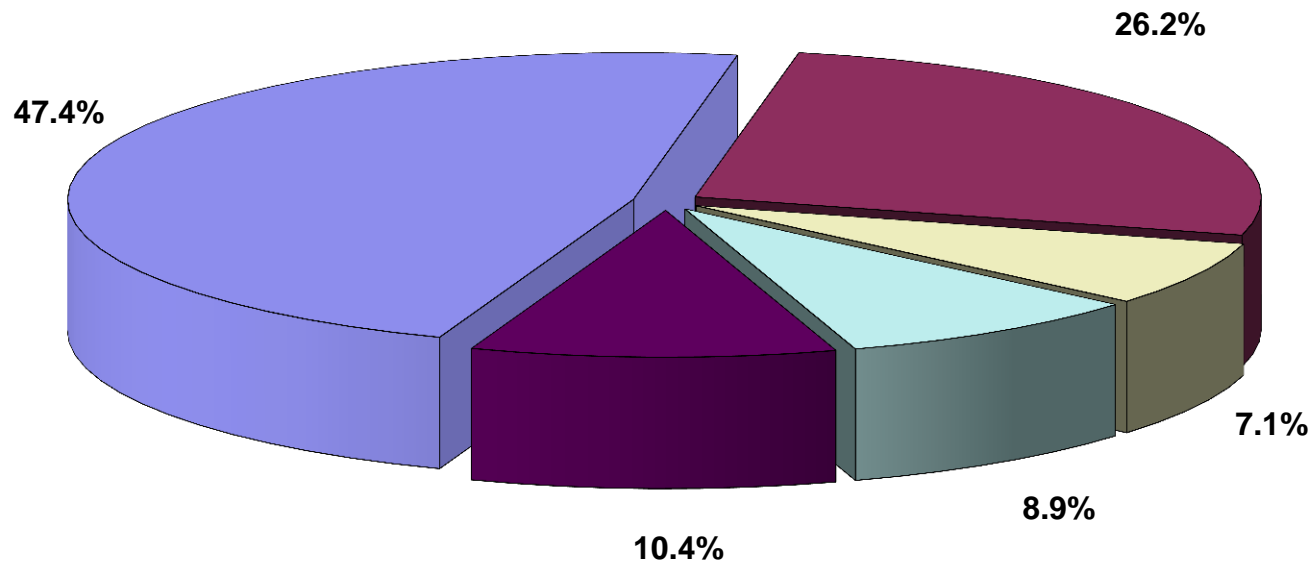


- Our services:
 - 2 primary health clinics
 - Mt Vernon (since 1985)
 - Concrete (since Oct 2014)
 - Women's health clinic
 - Preventive services (health education, MSS)
 - Dental clinic
 - Behavioral health services (mental health & substance abuse)
 - Special Population services (homeless program, farmworker promotores program)
 - Community resource navigators/Customer Service Representatives

Sea Mar Skagit County 2014 Visits

Total Visits: 55,780

- 12,192 users
- On average, 4 visits per year



■ Medical Visits

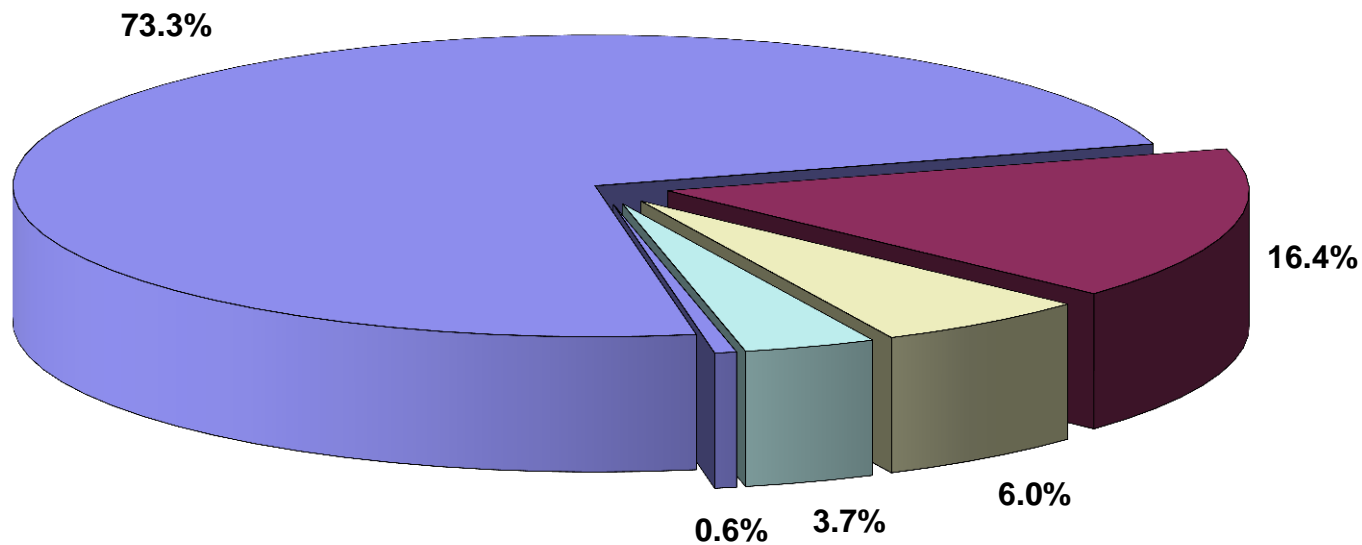
■ Dental Visits

■ Substance Abuse Treatment

■ Mental Health Services

■ Ancillary Services

**Sea Mar Skagit County
2014 Users by Poverty Level
Total Users: 12,192**



■ 100% and Below

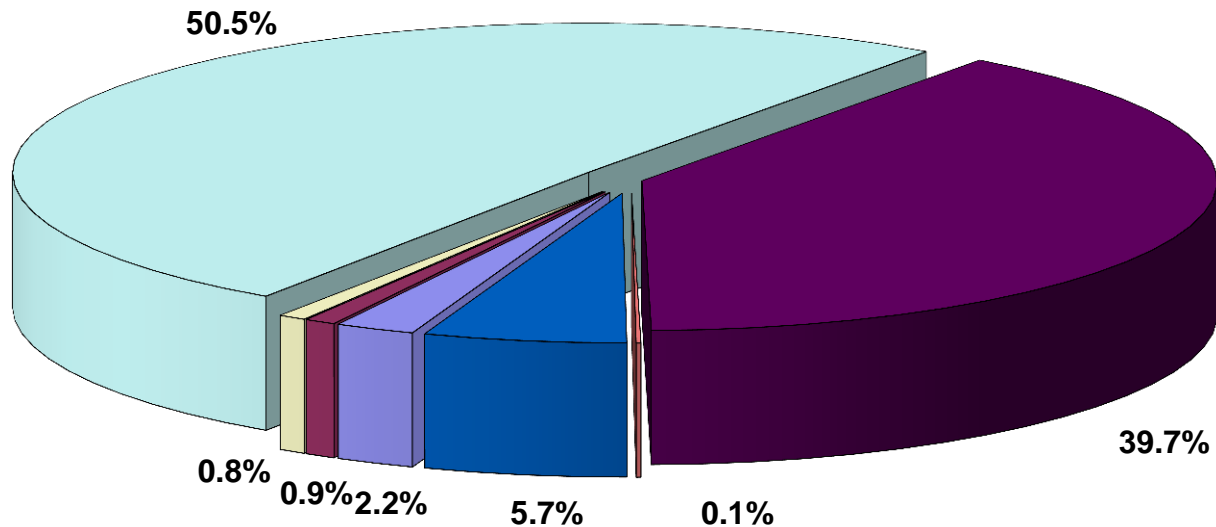
■ 101% - 150%

■ 151% - 200%

■ Over 200%

■ Unknown

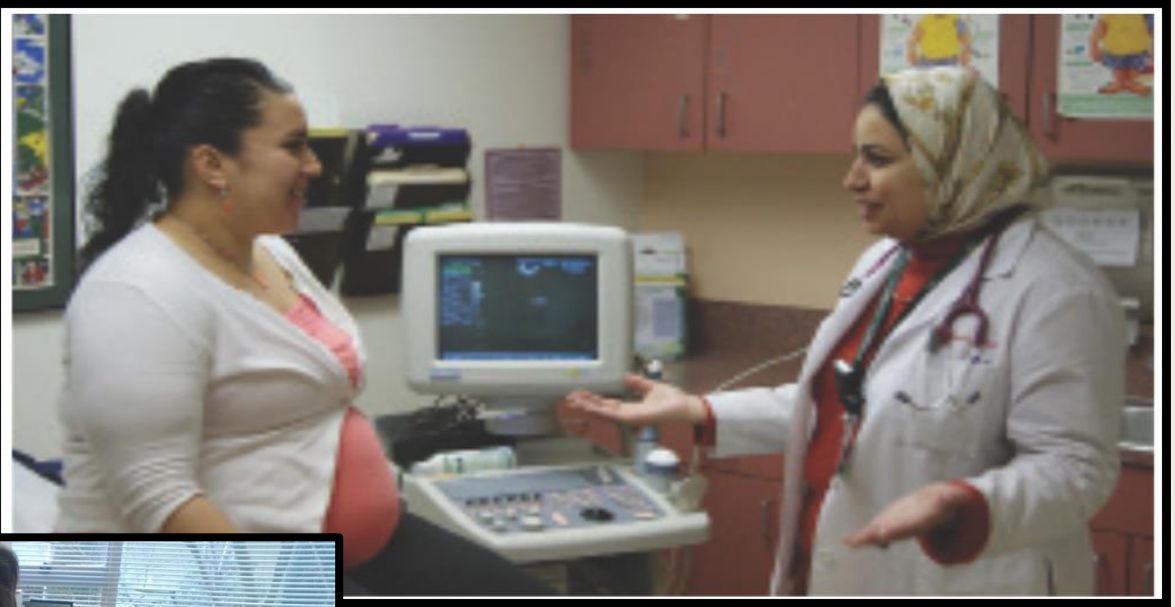
**Sea Mar Skagit County
2014 Users by Race
Total Users: 12,192**



■ Asian/Pacific Islander	■ Black/African American	■ American Indian/Alaska Native	■ Latino
■ Caucasian	■ Native Hawaiian	■ Unknown/More than One	

- Agency-wide: Latinos (34.3%) and Caucasians (45.6%)
- Whatcom: Latinos (31.8%) and Caucasians (51%)

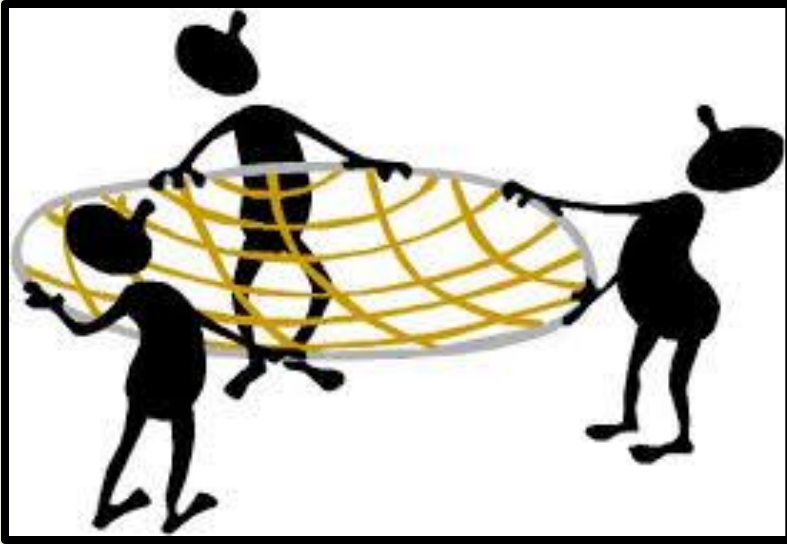
We see
everyone
regardless of
their ability
to pay



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Health Care for Homeless

Public Health Service
Act, Section 330 (h)

**10,355 agency-wide;
1,323 in Skagit**

- **Primary health care**
 - Basic health, Referrals, Case management
 - Enabling services
- **Substance abuse (alcohol and drugs)**
 - outreach, screening, assess, treatment, education, counseling, vocational training, etc
- **Additional services – case management**
 - ie, MH, job training, housing assistance, podiatry, respite, restorative dental services, vision services and eye glasses.

**In Skagit and Whatcom county, we
have homeless case managers**



Migrant Health Center

Public Health Service
Act, Section 330 (g)

- Migrant Health Act became law September 25, 1962
- 166 migrant health centers
- 151 are joint Community Health Centers (remaining 15 voucher programs)
- Federally assisted migrant health centers only reach 15-20% of MSFW



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WHERE FARMWORKERS ARE LOCATED



- 3,441 patients (2014)
- 5 encounters average MSFW patient

In Skagit and Whatcom counties, we have a MSFW promotores Program



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Forces Affecting Change



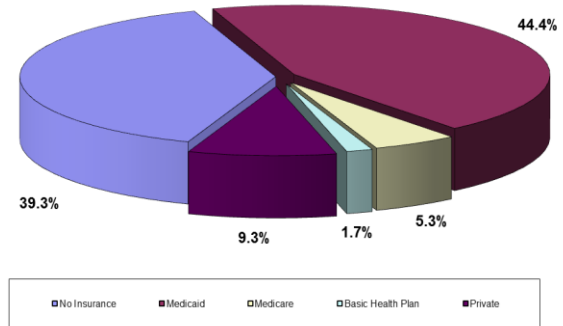
- # Uninsured



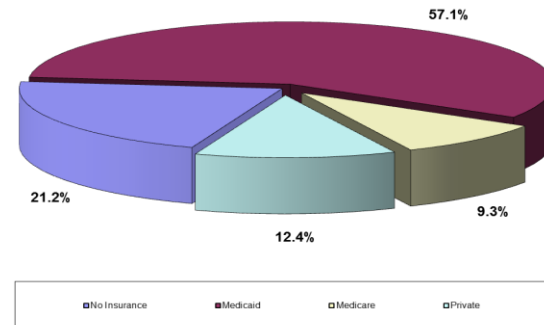
- # Medicaid



Sea Mar Skagit County
2013 Users by Insurance Type
Total Users: 11,333



Sea Mar Skagit County
2014 Users by Insurance Type
Total Users: 12,192



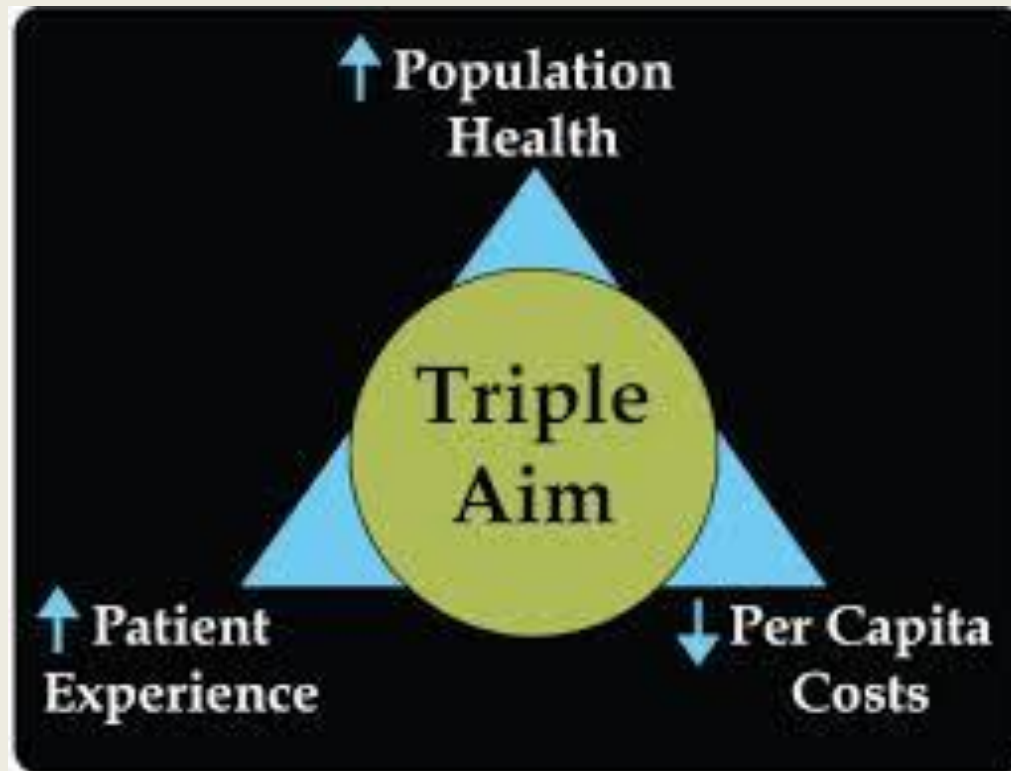
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Triple AIM Initiative Institute for Healthcare Improvement



NCQA Patient-Centered Medical Home (PCMH) Recognition



A **Patient-Centered Medical Home** is a team-based model of care led by a personal physician who provides continuous and coordinated care throughout a patient's lifetime to maximize health outcomes.

Care Team members:
Provider, BH integration specialist, care coordinator



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Integrated Care Management Continuum



Team-based care management services for high risk patients to reduce hospital admissions, keep them out of the ER, and move them into better care.

Team members:

- **Point-of-Care Team** (on-site Integration specialists, Care coordinators)
- **Community Team** (Community Integration Specialist, Care Management RN, Peer Advocates)



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CDC REACH Grant

April 2013-Sep 2014



- Gained better understanding of local Latino population
- Realized we needed to learn much more about our farmworkers.....



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Our local farmworkers



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Our indigenous farmworkers (MSFW)

- ▶ 15,721 ag workers in Skagit and Whatcom (99% Mexican)
 - ▶ 29,855 total workers + dependents
 - ▶ Some punjabi, nepali, russian, samoan, vietnamese, burmese
- ▶ In Skagit, at least 60% are Mexican indigenous (vs. 23% statewide (2006))
 - ▶ Originate from rural Mexico -
 - ▶ Oaxaca, Guerrero, Michoacán.



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Our indigenous MSFW

- Multiple Aztec & Mayan communities: Mixtecs, Triqui, Zapoteco; Purepecha, Nahuatl, Tsozil...
- Recently discovered Guatemalan indigenous communities - Aguacateco, Mam, Chalchitecos, Ixil, Canjoval



- Migrant trail through hometown networks
- Increasingly seasonal
- Many children between 6-11 years old left in Mexico



Our local indigenous MSFW



- Will continue to evolve
 - High diversity in California
 - New languages appearing in the western stream



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Some relevant demographic info



- Younger & poorer than other Mexican immigrants
- Increasing families
- Little education - 3-4 años
- High degree of monolingualism
 - 6 out of 10 mixtec women do NOT speak Spanish.
 - Triqui men/women usually bilingual
- Very low literacy
 - Cannot read/write Spanish
- Women often don't drive

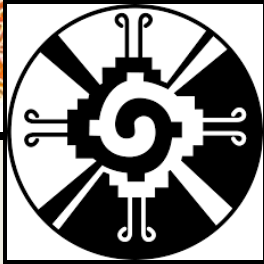
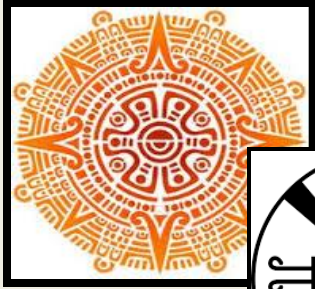


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Perspective on health, wellness and illness



- Rooted in ancient Mayan and Aztec traditions and beliefs

- Nature, society, the spirit world and cosmos all interconnect



- Balancing hot and cold is the key to health

- Many illnesses caused by evil spirits, evil eye or violation of taboos



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Perspective on health, wellness and illness



- Mayan and Aztec contemporaries
- Language & culture as different from spanish-speaking Mestizo Mexicans as Navajo is to English



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Perspective on health, wellness and illness



Common ailments:

Susto, Espanto, Mal de ojo, Tristeza, Envidia

Identified other barriers to health care



- Unfamiliar with US systems or customs
- Lack of knowledge of preventive health
- Don't rely on health clinics -prefer folk medicine and curanderos
- Seek out treatment they are familiar with..
- High degree of monolingualism & low literacy
- Distrust outsiders



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Identified other barriers to health care



- Lack of knowledge or understanding of US concepts or approaches to disease
 - May know words but not their significance
 - No words for certain medical conditions, body parts, or procedures
 - Some issues too sensitive



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Health disparities



- Life expectancy:
 - Oaxacan in homeland = 72.5 yrs
 - Oaxacan farmworker in US = 45 years
- Doctor visits
 - 62% (68%) of Indigenous MSFW women visited doctor last 2 years (vs 75% of mestizo MSFW women)
 - 24% (33%) indigenous MSFW men visited doctor last 2 years (vs 43% of mestizo MSFW men)



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Sea Mar's Changes

- Hiring indigenous speaking staff & recruiting indigenous promotores
- Ensuring all staff know how to better identify preferred language.
- Continue learning about our communities, language, culture, healthcare issues
- Building relationships and trust within the communities
- Bringing culturally appropriate services & messages to them
 - In the clinic
 - In the community
 - mobile medical/dental clinics
 - Health fairs
 - Health information



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Bringing services to the community



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- How can the Public Health Trust help the most vulnerable and marginalized in society improve their health and have a healthier quality of life?
- How can Sea Mar and Public Health Trust best collaborate towards this effort?



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