

POPULATION HEALTH, SOCIAL DETERMINANTS OF HEALTH AND PRIMARY CARE PROVIDER
PARTNERSHIPS
Background Developed by The New York Academy of Medicine
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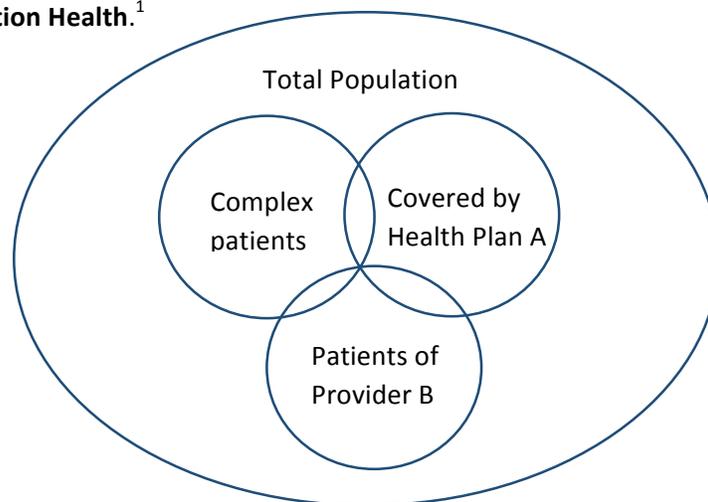
What is Population Health?

When we use the term “population health,” we mean the health of all persons living in a defined geographic region, such as all those living in a county, or all those living in a hospital’s service area.

How does this differ from other definitions of population health?

The term population health is sometimes used to describe the health of a sub-set of patients, such as all those served by a particular provider, or all those covered by a given health plan. The term may also refer to specific subpopulations like the most costly and complex patients - such as those with diabetes, cardiovascular disease, and/or mental health problems (as in the case of the Medicaid Health Homes program). In our definition, we consider all of these subpopulations as part of the total population.

Figure 1. Total Population Health.¹



Why Consider Total Population Health?

It is important to consider the health of geographic communities to promote conditions that help prevent disease and promote health because unhealthy communities both decrease the effectiveness of purely clinical programs – e.g., patients don’t have the healthy options recommended by their doctors - and prevent long-term cost control and related economic benefits.

Population health depends not only on the health care sector, but on education, transportation, housing, economic development, labor, and others. There is overwhelming evidence that the traditional health care system – clinical care - is only a minor determinant (10-20%) of overall health outcomes (for instance, see McGinnis et al, 2002). The rest is determined by health behaviors, social & economic

¹ Adapted from Jacobson and Teutsch, 2012.

factors, the physical environment, and genetics. Thus, to improve health, we must consider the social, economic and physical environments in which people live, work, learn and play.

Addressing the Broader Determinants of Health for Patients and Communities



It is now well-recognized that most of what determines a person’s health happens outside the doctor’s office; factors related to educational attainment, income, housing, stress and others have a far greater impact on health than clinical care alone. Therefore, partners across sectors, including primary care providers, have taken steps to address these broader determinants of health for patients and communities.

What are some ways primary care providers “leverage” the broader determinants of health to improve the health of their patients and the larger communities they serve?

The Fellows’ Primary Care and Population Health Working Group of the New York Academy of Medicine devised a matrix to showcase opportunities for various sectors, including primary care providers, to contribute to major determinants of total population health. That matrix is available here:

http://www.nyam.org/media/filer_public/fc/e5/fce5ba21-5916-4b36-8ea2-ba03324b490d/primary-care-and-pop-health-metrics-matrix-oct-2012.pdf

Recently, a commissioned IOM panel recommended standard metrics for health care providers to screen for patient’s social determinants of health (SDH) and include in the electronic health record. The purpose is multi-fold; it allows providers to better serve their own patients, but also to identify larger trends, such as “hotspots” of disease burden in communities they serve, and partner with community based organizations and others to address those. Standardized capture of SDH metrics will also allow researchers to better elucidate how those factors impact health over time. For more information, see

Adler and Stead (2015) and the IOM website at <http://www.nationalacademies.org/hmd/Activities/PublicHealth/SocialDeterminantsEHR.aspx>

Examples

Below are select examples of primary care provider's actions to leverage the broader determinants of health for patients and communities. (NOTE: This list is not meant to be exhaustive.)

Housing. In the late 1980s, Hudson River HealthCare in Peekskill New York created a subsidiary called The Preservation Company, Inc., a housing and community development organization, to respond to community housing needs. See case study at <http://www.altfutures.org/pubs/leveragingSDH/IAF-HRHCare-CaseStudy.pdf>)

Education. Community Health Center of Buffalo, New York, offers internships, mentoring and service learning placements for local high school students. (Source: Institute for Alternative Futures Leveraging SDH Database. See <http://www.altfutures.org/leveragingsdh/>)

Community Development. In NYS and nationally, the Local Initiatives Support Corporation and their partners provide assistance to Community Health Centers through the Healthy Future's Fund to co-locate with service providers that address the broader determinants of health, such a grocer or gym. More information about the Healthy Future's Fund is available at <http://www.healthyfuturesfund.org/>

Environment. Sixteenth Street Community Health Center in Milwaukee, Wisconsin, established its own Department of Environmental Health to lead efforts and partnerships to address environmental factors impacting community health, such as large brownfield clean-up to address poor air quality, contaminated groundwater and other factors. (Source: Institute for Alternative Futures. See full case study at <http://www.altfutures.org/pubs/leveragingSDH/IAF-SSCHC-CaseStudy.pdf>)

Access to Healthy Foods. Hudson Headwaters Health Network works with local farmers in upstate New York to provide access to healthy, fresh produce at clinic locations. <https://www.hhhn.org/>

Additional Resources and Information

The Practical Playbook: Helping Public Health and Primary Care Work Together to Improve Population Health. See <https://www.practicalplaybook.org/>

IOM (Institute of Medicine). 2012. Primary Care and Public Health: Exploring Integration to Improve Population Health. Washington, DC: The National Academies Press. <http://www.nationalacademies.org/hmd/Reports/2012/Primary-Care-and-Public-Health.aspx>

Community Health Centers Leveraging the Social Determinants of Health. Institute for Alternative Futures. Available here: <http://www.altfutures.org/leveragingsdh/>

Adler, Nancy and William Stead. "Patients in Context – EHR Capture of Social and Behavioral Determinants of Health." N ENGL J MED 372;8. 2015 and The National Academies of Sciences, Engineering, and Medicine. Health and Medicine Division. "Recommended Social and Behavioral Domains and Measures for Electronic Health Records" 2016. <http://www.nationalacademies.org/hmd/Activities/PublicHealth/SocialDeterminantsEHR.aspx>