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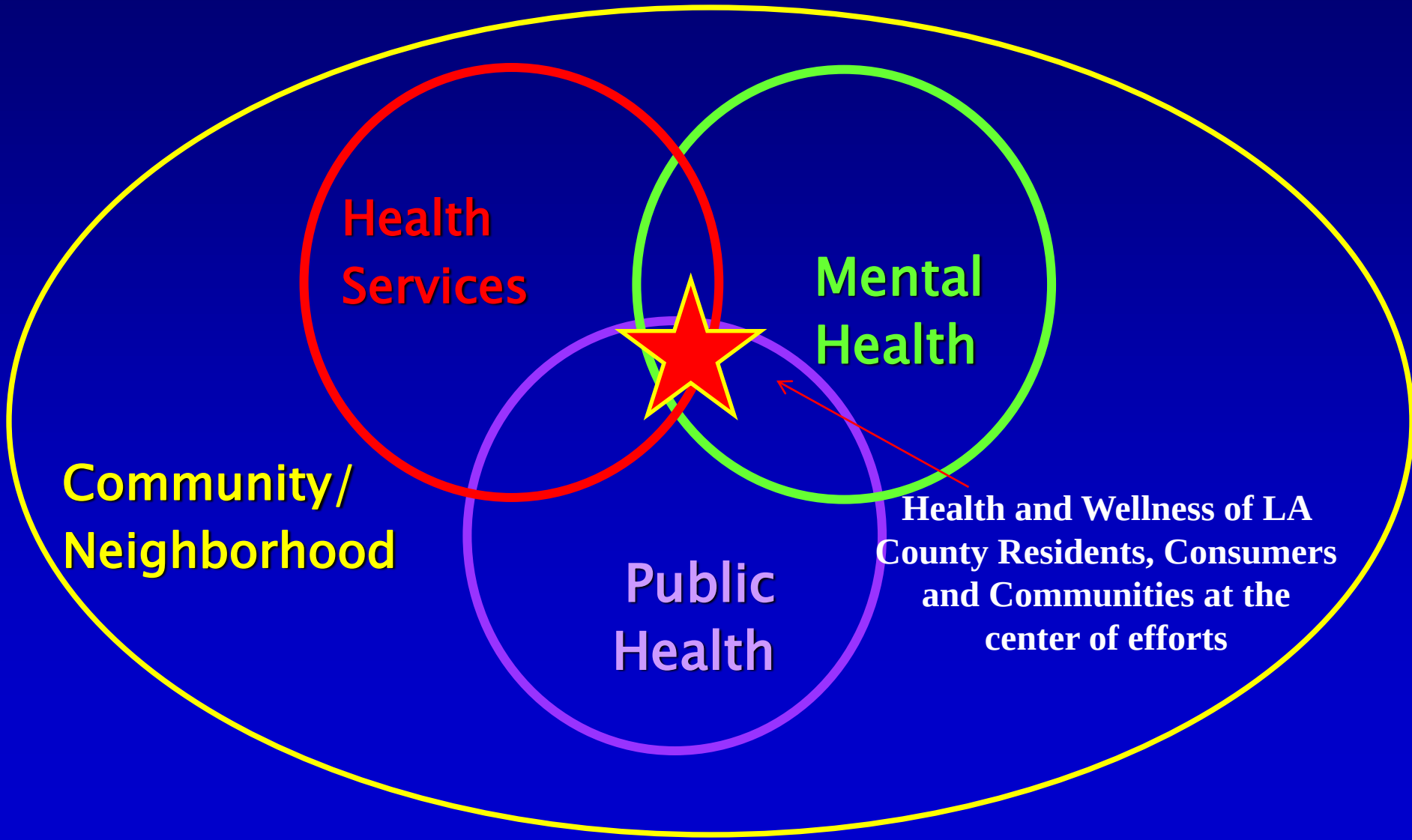
Advancing a Shared Vision for Integration: Exploring The Role of the Integration Advisory Board

DRAFT

Prepared by the IAB Subcommittee on Guiding Principles and Mission

27 January 2016

The Integration Opportunity



Mission: Health Agency

To improve the health and wellness of LA County residents.

- Comprehensive and integrated appropriate services, programs, and policies *drawing upon the expertise of the three departments and beyond*
- Culturally appropriate services, programs, and policies *for the residents of LA County*
- Promotes healthy people in healthy communities, *by prioritizing prevention and environmental approaches*

Mission: Mental Health

Enriching lives through partnerships designed to strengthen the community's capacity to support recovery and resiliency

Mission: LA County DPH

Protects health, prevents disease, and promotes the health and well-being for all persons in Los Angeles County.

- *Population as a whole*
- *Network of public health professionals*
- *Works with community coalitions to advocate for public policies to protect and improve health.*

Mission: Health Services

Our mission is to ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

Transformational Elements

From	To
Patient-Centered Care	Patient ***and*** **Community-Centered Health** *and* Healthcare
Population-based Care	**Population-based Care *and Population-based Community Health***
Evidence-based Treatment	**Evidence-based *and informed* treatment *and Prevention***
Accountable Care	**Accountable Care *and Accountable Community Health***

Integration Advisory Board

- Advisory body to the Board of Supervisors
- Reports in writing on at least semi annual basis for 2 years:
  - On positive or negative impacts of the Health Agency on ongoing department activities and operations
  - On progress of the Agency toward achieving LA County's health related priorities

Integration: A whole *greater* than the sum of its parts

On one hand…

- *Departments will still operate separately*
- *Budgets are still separate*
- *Not a complete consolidation*
- *Influences integration opportunities*

At the same time…

- *8 strategic priorities represent "big issues"*
- *Each department has resources & skills to bring to the table*
- *All departments have lessons-learned and best practices*
- *Departmental culture(s) can be positively influenced*

Maximizing the Value of Integration: 4 Guiding Principles

The Integration Advisory *Board—along with consumers and residents of LA County*—have the opportunity to bring forth the highest goals that the Board of Supervisors have established for integration: to improve health and wellness of *all* LA County residents.

It is our hope that we can achieve this aim, by applying the following as guiding principles (proposed):

1. Patient ***and*** **Community-Centered Health** *and* Healthcare
2. **Population-based Care *and Population-based Community Health***
3. **Evidence-based *and informed* treatment *and Prevention***
4. **Accountable Care *and Accountable Community Health***

#1: Patient *and* **Community-Centered Health** *and* Healthcare

Patient Centered Health Care

- Individual / Family
- Responsive to needs
- Collaborative care teams

Community-Centered Health

- Community
- Prevents illness and injury in the first place
- Multi-sector Collaboration

Integration = Seeking Balance

Service delivery and integration

Community prevention

What is a Consumer?

Mental Health: People who live with mental health conditions that affect their day to day activities, could be current recipient of services, former recipient of services, family members, support system

Health Services: An actual or potential consumer of LA County Health Care Services

Public Health: Any one of LA County's 10 million residents and visitors to LA County who encounter facilities, restaurants, water, etc; people who utilize and access public health services

More than just Consumers…

What about consumers who do more than consume?

- Constituents
- Contributors
- Co-creators
- Stakeholders
- What else?

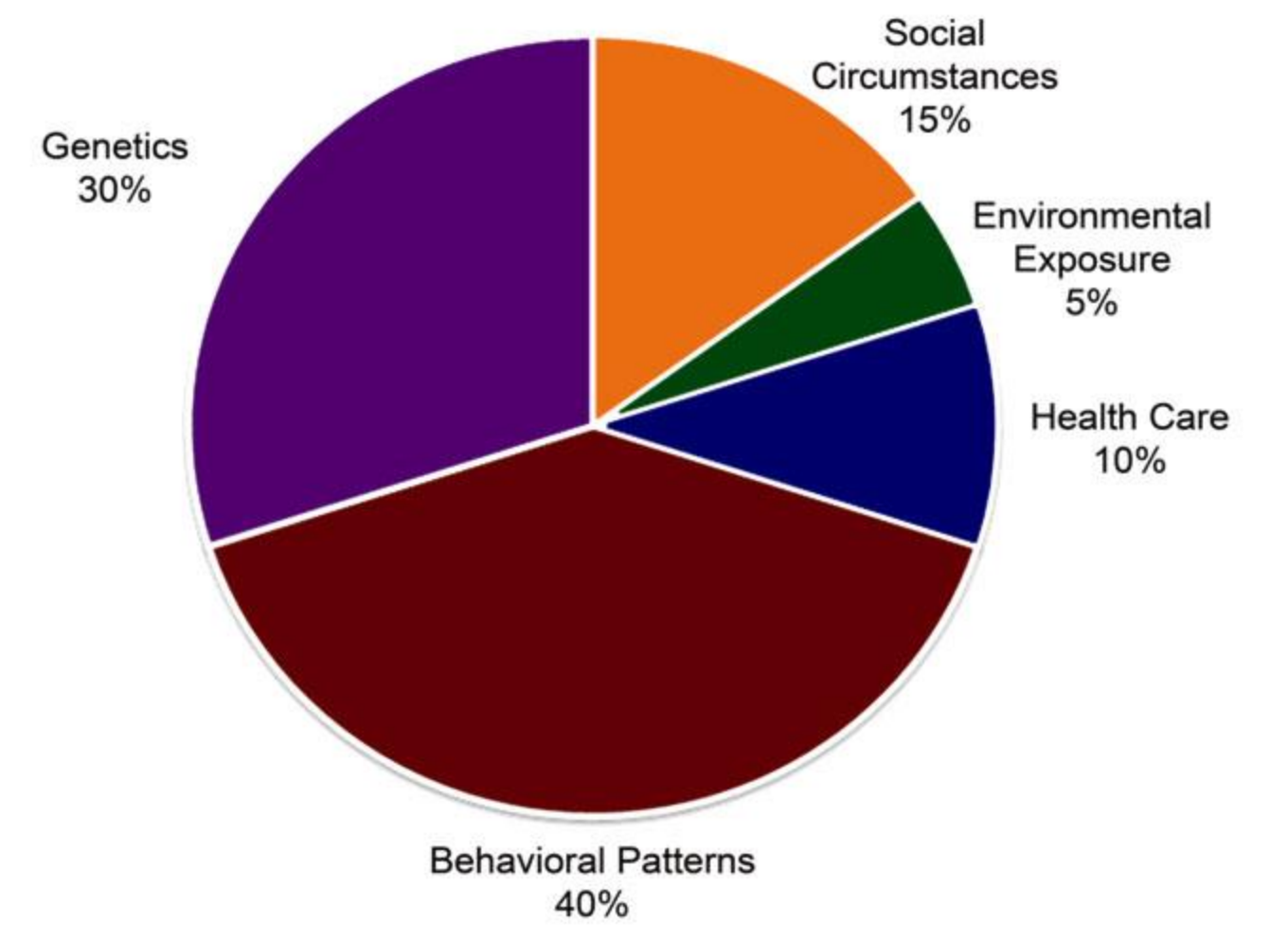
"No epidemic has ever been resolved by paying attention *solely* to the treatment of the affected individual."

George W. Albee

#2: **Population-based Care** ***and Population-based Community Health***

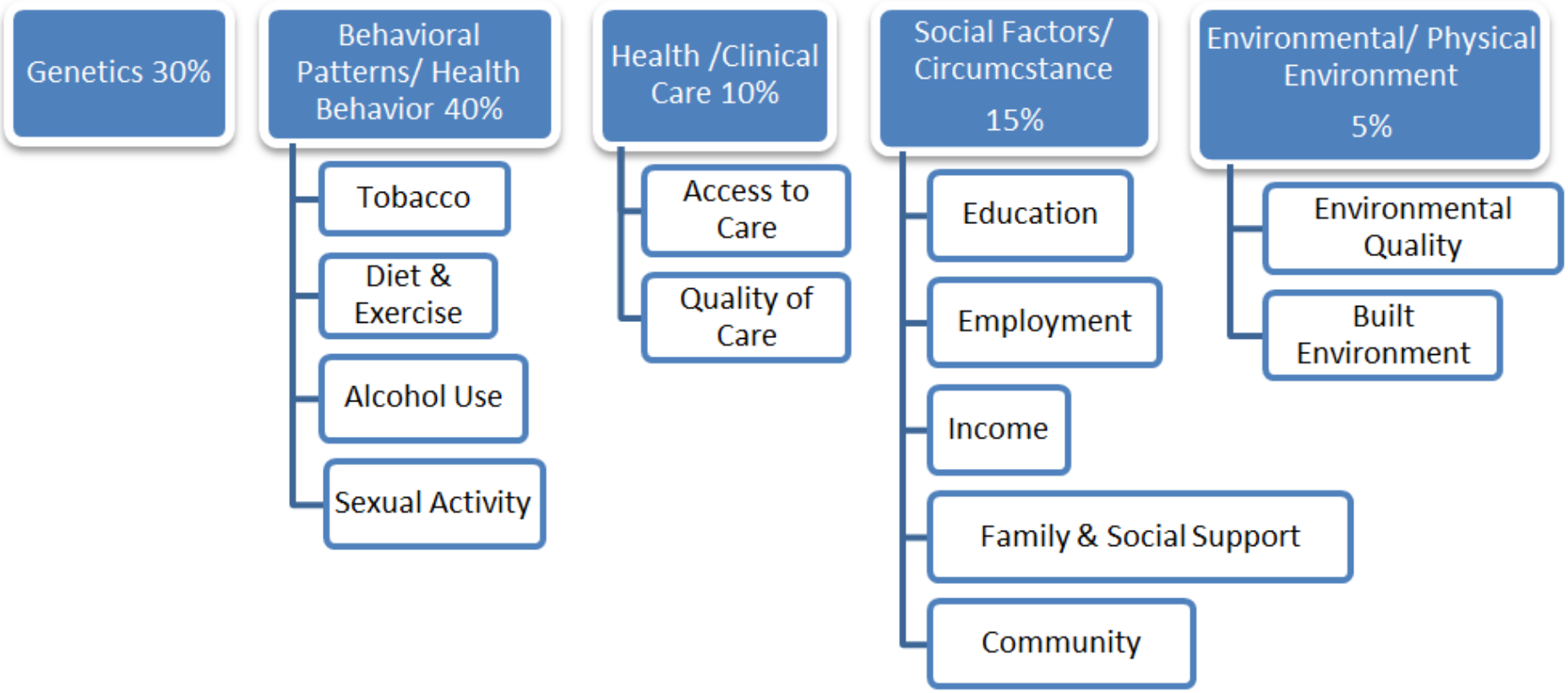
- Behavioral patterns, social conditions and environmental exposures influence health status and outcomes
- Community environments and social conditions play a large role in health behaviors and outcomes
- Not all environments are created equally
- Attention to improving social conditions and community environments is good for **residents, consumers and patients**

Determinants of Health: Factors Influencing Health Status



Source: Schroeder, Steven. N Engl J Med 2007;357:1221-8
Adapted from: McGinnis JM, et.al. *The Case for More Active Policy Attention to Health Promotion.* Health Aff (Millwood) 2002;21(2):78-93.

Factors Affecting Health Outcomes



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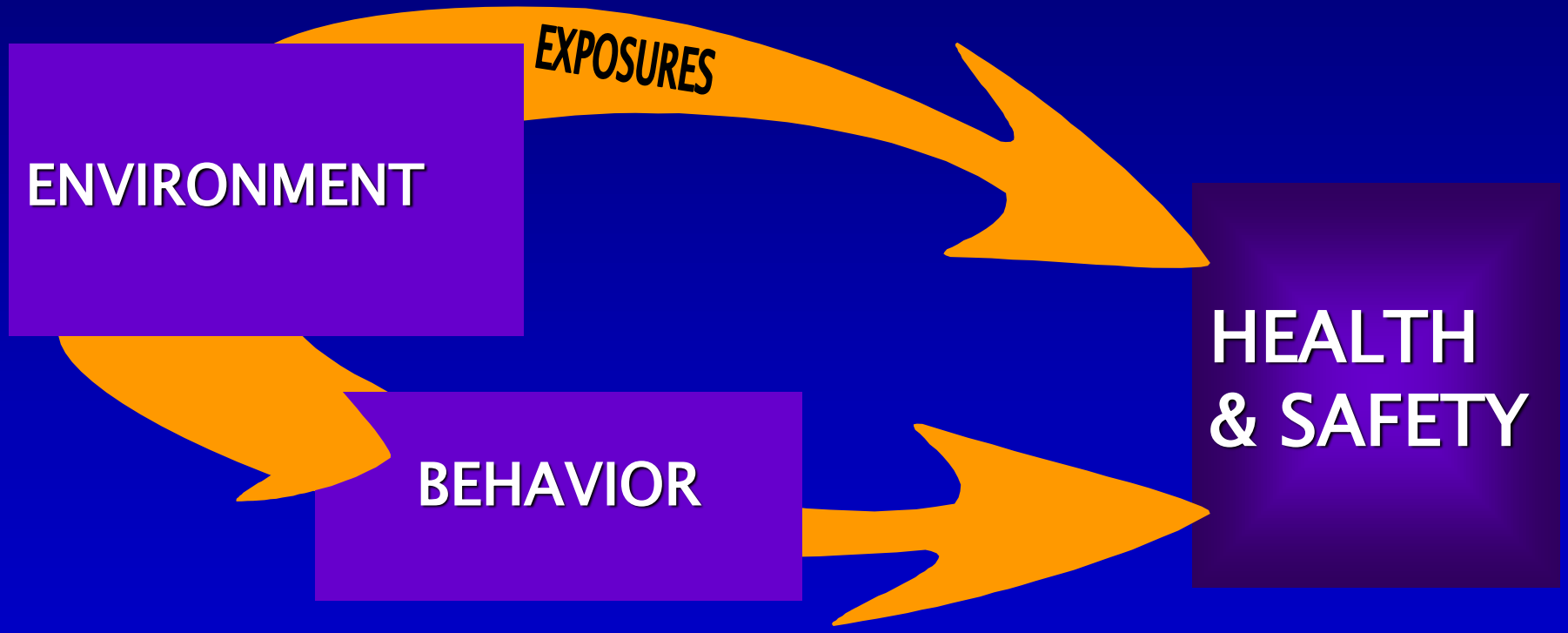
Environment Matters



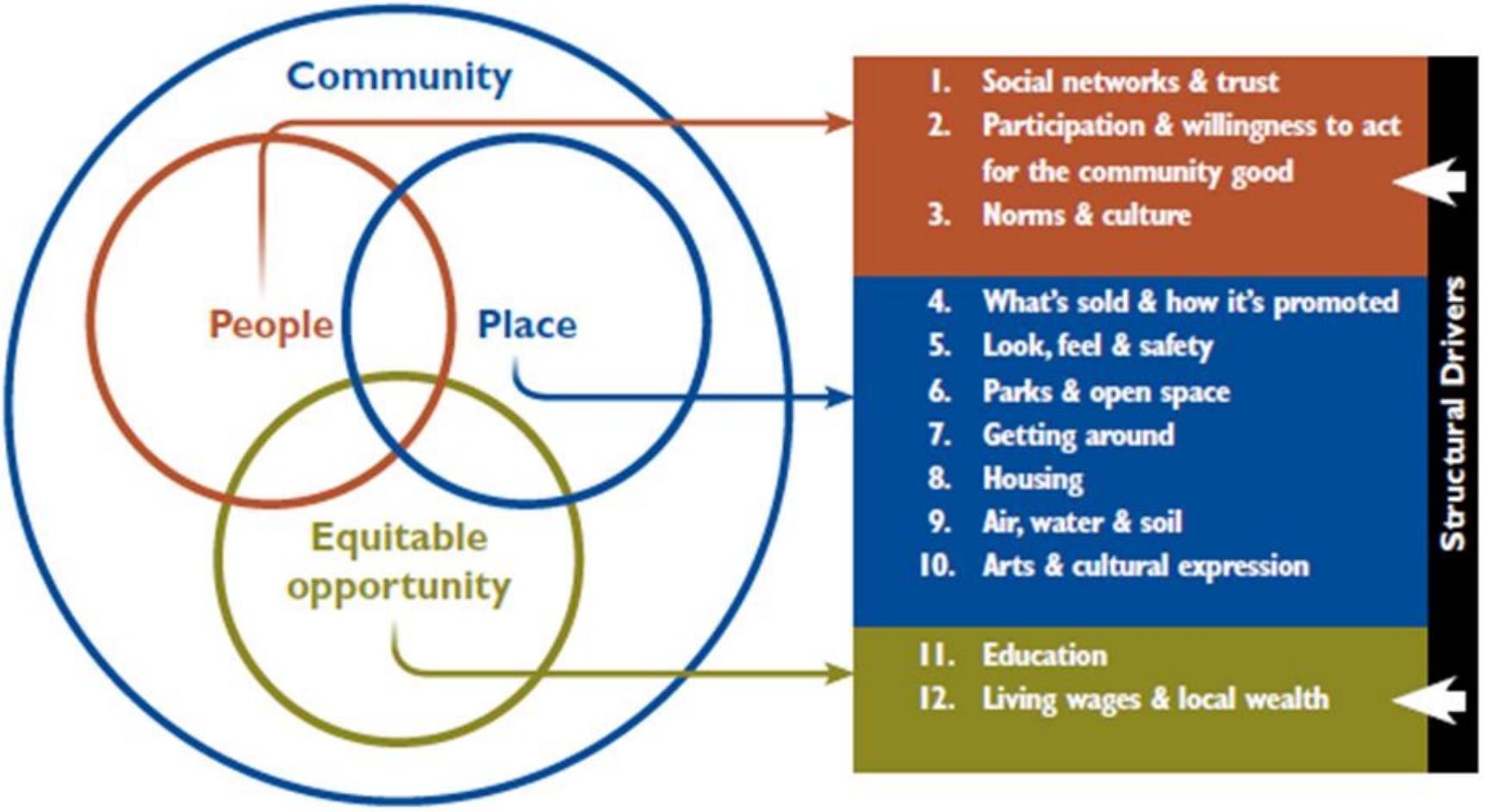
Environment: What's Sold & Promoted

“It is unreasonable to expect that people will change their behavior *easily* when so many forces in the social, cultural, and physical environment conspire against such change.”

Institute of Medicine

Source: Institute of Medicine. (2000). *Promoting health: Intervention strategies from social and behavioral research* (B. D. Smedley & L. S. Syme, Eds.). Washington, DC: National Academies Press.

Multiple Factors Impact Health

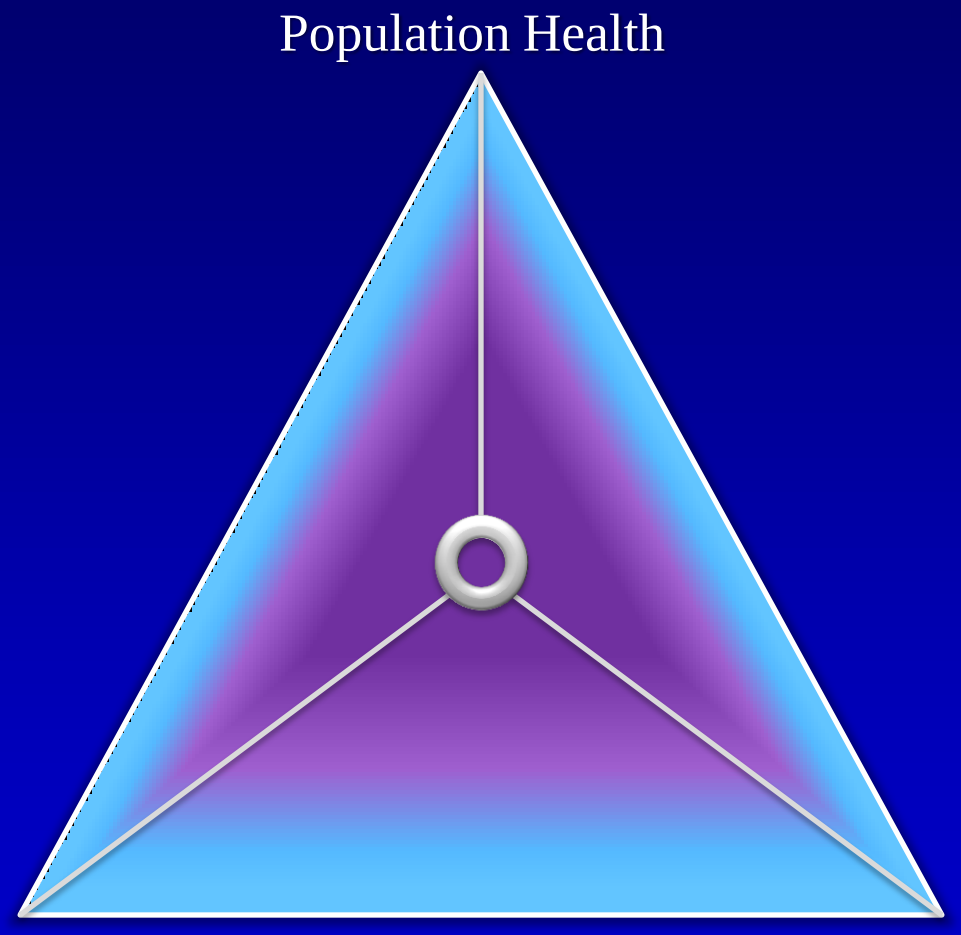


#3: Evidence-based *and evidence-informed* treatment *and Prevention*

- Community prevention has a key role to play
- Prevention saves lives and money and reduces suffering
- Evidence shows that prevention works
- We can apply lessons-learned from one field to the next

“Simply put, in the absence of a radical shift towards prevention and public health, we will not be successful in containing medical costs or improving the health of the American people.” - *President Obama*

The Triple Aim



IHI Triple Aim: http://www.ihi.org/Engage/Initiatives/TripleAim

Prevention has a key role

Prevention

a **systematic** process that reduces the frequency and/or severity of illness or injury.

Promotes healthy environments and behaviors to prevent problems from occurring before the onset of symptoms

Prevention Saves Lives & Money

Prevention Works

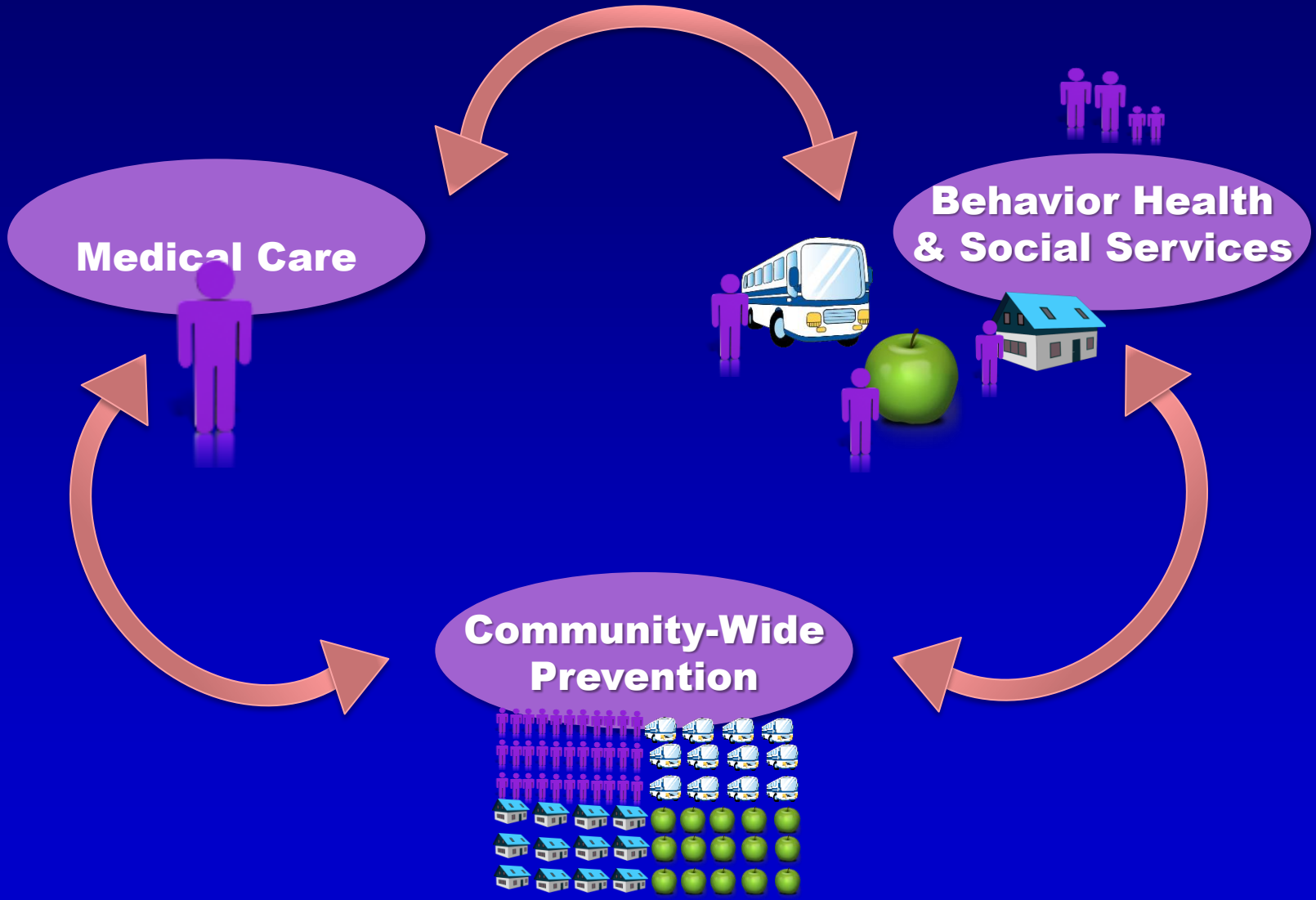
- *Child Restraint and Safety Belt Use*
- *Smoking Prevention*
- *Bans on School Junk Food*
- *Physical Activity*
- *Childhood Immunizations*
- *Motorcycle and Bicycle Helmet Laws*

#4: **Accountable Care *and Accountable Community Health***

- Accountable Care: Providers accountable and reimbursed for quality of care and clinical outcomes

- Accountable Communities for Health: Partners are accountable for improvements in community health and well-being

#4: Accountable Care *and Accountable Community Health*



Elements of Accountable Communities for Health

- Integrator
- Partnership
- Assessment, Planning, and Comprehensive Strategies
- Data, Metrics, and Accountability
- Community Resident Engagement
- Funding and Sustainability

Prevention Institute

Questions to Guide Integration Efforts (proposed)

- In what ways does this approach/ strategy help to promote health care, mental health, and prevent illness and injury *in the first place*?
- How can these strategies build upon successful examples – locally and nationally – to connect services and programs to community efforts aimed at changing environments, policy, and practices?
- How will these efforts increase capacity to deliver quality care, reduce costs, *and also* improve community level, environmental and social factors?
- In what ways does this harness the skills, expertise and perspectives of all three departments?

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- Advisory body to the Board of Supervisors
- Reports in writing on at least semi annual basis for 2 years:
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Strategic Priorities (1-4)

1. Chronic Disease and Injury Prevention
2. Vulnerable Children and Transitional Age Youth
3. Implement Expanded Substance Use Disorder Benefit
4. Divert Corrections-Involved to Community-Based Programs and Services

Developed by the Temporary Steering Committee, Approved by BOS 9/29/15

Strategic Priorities (5-8)

5. Increase access to culturally and linguistically competent programs and services

6. Reduce over crowding of Emergency Dept. by Individuals in Psychiatric Crisis

7. Housing and Supportive Services

8. Consumer Access to and Experience with Clinical Services

Developed by the Temporary Steering Committee, Approved by BOS 9/29/15

Key Roles for the IAB in relation to the Strategic Priorities

- Review and Comment on Strategic Priority Action Plans
- Provide Expertise & Guidance on Each Strategic Priority Workgroup
- Monitor the development and implementation of Strategic Priority Workgroup Action Plans
- What else?

Questions the IAB could ask for each Strategic Priority

- Is this workplan realistic?
- Is this the most important strategy for integration?
- Will it lead to meaningful integration and improve outcomes for consumers?
- Is this plan efficient?
- What is this workgroup hoping to accomplish with this workplan?

For further exploration

- Defining “consumer” for each of the three departments and the Agency
- How will best practices in each department be identified?
- How will the IAB monitor or become informed about “positive or negative impacts” of the Health Agency?
- What Else?