A Framework for Improving Health: Public Health 3.0
A Multi-Sector Approach

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PUBLIC HEALTH

What we do together as a society to ensure the conditions in which everyone can be healthy.
CDC Health Impact Pyramid

Factors that Affect Health

- **Examples**
  - Eat healthy, be physically active
  - Rx for high blood pressure, high cholesterol, diabetes
  - Immunizations, brief intervention, cessation treatment, colonoscopy
  - Fluoridation, trans fat, smoke-free laws, tobacco tax
  - Poverty, education, housing, inequality

- **Socioeconomic Factors**
- **Changing the Context**
  to make individuals' default decisions healthy
- **Long-lasting Protective Interventions**
- **Clinical Interventions**
- **Counseling & Education**

Smallest Impact

Largest Impact

Check the Tarrant County Public Health Web site to learn more.

http://health.tarrantcounty.com
Invest in your Community
4 Considerations to Improve Health & Well-Being for All

WHAT
Know What Affects Health

40% SOCIOECONOMIC FACTORS
20% CLINICAL CARE
30% HEALTH BEHAVIORS
10% PHYSICAL ENVIRONMENT

www.countyhealthrankings.org
PUBLIC HEALTH 1.0

Comprehensive public health protection—from primary prevention through treatment—becomes possible for the first time in history.

Development of an astonishing array of health-protecting tools and capacity with increasingly sophisticated techniques for ensuring sanitation and food safety.

(late 19th/most of 20th Century)
PUBLIC HEALTH 2.0

By late in the 20th century, there was tremendously uneven public health capacity at the local levels.

Health Departments strained to address new infectious disease challenges as well as the growing challenge of chronic disease prevention and preparedness.

**Governmental** public health ‘came of age’ – culminating in today’s Health Department accreditation movement.
Social Determinants of Health
are the conditions in which people are born, live, work and age.
**What is PUBLIC HEALTH 3.0?**

A significant upgrade in public health practice to a modern version that emphasizes cross-sectorial environmental, policy- and systems-level actions that directly affect the social determinants of health.

**Local Public Health Leaders as the Chief Health Strategist**
Invest in your Community
4 Considerations to Improve Health & Well-Being for All

Collaborate with Others to Maximize Efforts

WHO

COLLECTIVE VISION

- Nonprofits
- People
- Community Developers
- Businesses
- Education
- Government
- Health Care Providers
- Faith-Based Organizations
- Philanthropists & Investors
- Health Insurance
- Public Health
Collective Impact

The Five Conditions of Collective Impact

- **Common Agenda**: All participants have a **shared vision for change** including a common understanding of the problem and a joint approach to solving it through agreed upon actions.

- **Shared Measurement**: Collecting data and measuring results consistently across all participants ensures efforts remain aligned and participants hold each other accountable.

- **Mutually Reinforcing Activities**: Participant activities must be **differentiated while still being coordinated** through a mutually reinforcing plan of action.

- **Continuous Communication**: Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and appreciate common motivation.

- **Backbone Support**: Creating and managing collective impact requires a dedicated staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations and agencies.

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PUBLIC HEALTH 3.0

Key Components

- Leadership & Workforce
- Essential Infrastructure
- Strategic Partnerships
- Data, Analytics & Metrics
- Flexible & Sustainable Funding
Develop Leadership to Ensure Success

Goal: Integrative Plans, Quality Measures, Outcomes

Value Curve
Strategic Planning
Revised State Health Improvement Plan
Continuous Quality Improvement
Regulative Business Model: The focus is on serving constituents who are eligible for particular services while complying with categorical policy and program regulations.

Collaborative Business Model: The focus is on supporting constituents in receiving all the services for which they’re eligible by working across agency and programmatic boundaries.

Integrative Business Model: The focus is on addressing the root causes of client needs and problems by coordinating and integrating services at an optimum level.

Generative Business Model: The focus is on generating healthy communities by co-creating solutions for multi-dimensional and socioeconomic challenges and opportunities.

THREE LEADING PRIORITIES

1. Address the Social and Environmental Determinants of Health in Rhode Island
2. Eliminate the Disparities of Health in Rhode Island and Promote Health Equity
3. Ensure Access to Quality Health Services for Rhode Islanders, Including Our Vulnerable Populations

FIVE STRATEGIES

1. Promote healthy living for all through all stages of life
2. Ensure access to safe food, water, and healthy environments in all communities
3. Promote a comprehensive health system that a person can navigate, access, and afford
4. Prevent, investigate, control, and eliminate health hazards and emergent threats
5. Analyze and communicate data to improve the public's health

23 POPULATION HEALTH GOALS

1. Reduce obesity in children, teens, and adults
2. Reduce chronic illnesses, such as diabetes, heart disease, asthma, and cancer
3. Promote the health of mothers and their children
4. Promote senior health to support independent living
5. Promote behavioral health and wellness among all Rhode Islanders*
6. Support Rhode Islanders in ongoing recovery and rehabilitation for all aspects of health*
7. Increase access to safe, affordable, healthy food
8. Increase compliance with health standards in recreational and drinking water supplies
9. Reduce environmental toxic substances, such as tobacco and lead
10. Improve the availability of affordable, healthy housing and safe living conditions*
11. Improve access to care including physical health, oral health, and behavioral health systems
12. Improve healthcare licensing and complaints investigations
13. Expand models of care delivery and healthcare payment focused on improved outcomes*
14. Build a well-trained, culturally-competent, and diverse health system workforce to meet Rhode Island's needs*
15. Increase patients' and caregivers' engagement within care systems*
16. Reduce communicable diseases, such as HIV and Hepatitis C
17. Reduce substance use disorders
18. Improve emergency response and prevention in communities
19. Minimize exposure to traumatic experiences, such as bullying, violence, and neglect*
20. Encourage Health Information Technology adoption among RI healthcare providers as a means for data collection and quality improvement
21. Enhance and develop public health data systems to support public health surveillance and action
22. Develop and implement standards for data collection to improve data reliability and usability
23. Improve health literacy among Rhode Island residents*

*These goals have been proposed through the State Innovation Model and are under review.
DPHS Strategies (Draft)

1. Prevent disease and promote healthy living across the lifespan
2. Promote, monitor and ensure access to safe food, water and healthy environments in all NH communities
3. Promote a comprehensive clinical health care system that all NH residents can navigate, access, and afford
4. Prevent, identify, investigate and respond to community health problems, hazards and emerging threats
5. Collect, analyze and communicate data to improve the public’s health
6. Steward and administer public funds and resources effectively and securely toward our mission and values
Public health departments should engage with community stakeholders—from both the public and private sectors—to form vibrant, **structured, cross-sector partnerships** designed to develop and guide Public Health 3.0–style initiatives and to foster shared funding, services, governance, and collective action.
Public health leaders should embrace the role of Chief Health Strategist for their communities—working with all relevant partners so that they can drive initiatives including those that explicitly address “upstream” social determinants of health. Specialized Public Health 3.0 training should be available for those preparing to enter or already within the public health workforce.
Timely, reliable, granular-level (i.e., sub-county), and actionable data should be made accessible to communities throughout the country, and clear metrics to document success in public health practice should be developed in order to guide, focus, and assess the impact of prevention initiatives, including those targeting the social determinants of health and enhancing equity.
CONSIDERATIONS FOR SUCCESS

• INTEGRATION (STRATEGIC PLANNING)
• DATA ANALYTICS
• QUALITY MEASURES
• COMMUNICATION (How to tell our story in a way that is understandable and meaningful. Do we have the relationships to be successful-regional, state, legislators)
• INCREASE CAPACITY OF COMMUNITY BASED POPULATION HEALTH
• STAKEHOLDER ENGAGEMENT
• LOOKING UPSTREAM (Social Det. Of Hlth)
INVEST IN YOUR COMMUNITY

4 Considerations to Improve Health & Well-Being for All

WHAT
Know What Affects Health

WHERE
Focus on Areas of Greatest Need

WHO
Collaborate with Others to Maximize Efforts

HOW
Use a Balanced Portfolio of Interventions for Greatest Impact

- Action in one area may produce positive outcomes in another.
- Start by using interventions that work across all four action areas.
- Over time, increase investment in socioeconomic factors for the greatest impact on health and well-being for all.

www.cdc.gov/CHInav FOR TOOLS AND RESOURCES TO IMPROVE YOUR COMMUNITY’S HEALTH AND WELL-BEING
Thank You!

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DPHS Planny Plan

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**First Panel**: We need a plan for making our plan.

**Second Panel**: Then we need to plan the plan’s Planny plan.