

Assessing Health and Human Service Needs to Support an Integrated Health in All Policies Plan for Prince George's County

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SOCIAL AND ECONOMIC WELL-BEING

Roadmap

1. Motivation for report
2. Review findings
3. Discuss recommendations

Overview of Work

- Contracted by the County Council, acting as the Board of Health, to assess health and human service needs of County residents and make recommendations related to health-in-all-policies planning and resource allocation
 - Follows up a 2009 health needs assessment conducted by RAND
- Team led by RAND includes researchers from Georgetown University
- Final report to be publicly released in early 2020

Motivation

- Board of Health recognizes the importance of assessing and addressing health and human service needs of County residents
- Assessment offers opportunity to view the health issues in the County through a cross-sector, holistic lens and with attention to potential policy actions
- Report builds on rich history of assessing health care access and health of County residents

Build on the work of others

UNEVEN OPPORTUNITIES

How conditions for wellness vary across the metropolitan Washington region



October 2018



Assessing Health and Health Care in Prince George's County



COMMUNITY

HEALTH NEEDS ASSESSMENT

PRINCE GEORGE'S COUNTY
2017 HEALTH REPORT



HEALTH
DEPARTMENT
Prince George's County

Prepared by:
Prince George's County
Health Department



PRINCE GEORGE'S COUNTY HEALTH DEPARTMENT
2017-2021 Strategic Plan

Forum Report
June 7, 2018



Transformative Change

Our Role in Achieving Health Equity for Prince George's County

TRANSFORMING HEALTH IN PRINCE GEORGE'S COUNTY, MARYLAND: A PUBLIC HEALTH IMPACT STUDY

UNIVERSITY OF MARYLAND SCHOOL OF PUBLIC HEALTH
JULY 2012



SCHOOL OF
PUBLIC HEALTH

Objectives

1. Describe health and human service needs of County residents
2. Assess the drivers of these health and human service needs with attention to context; and
3. Develop recommendations for improving comprehensive health and well-being outcomes, with particular focus on strategies to better address Health in All Policies

Approach

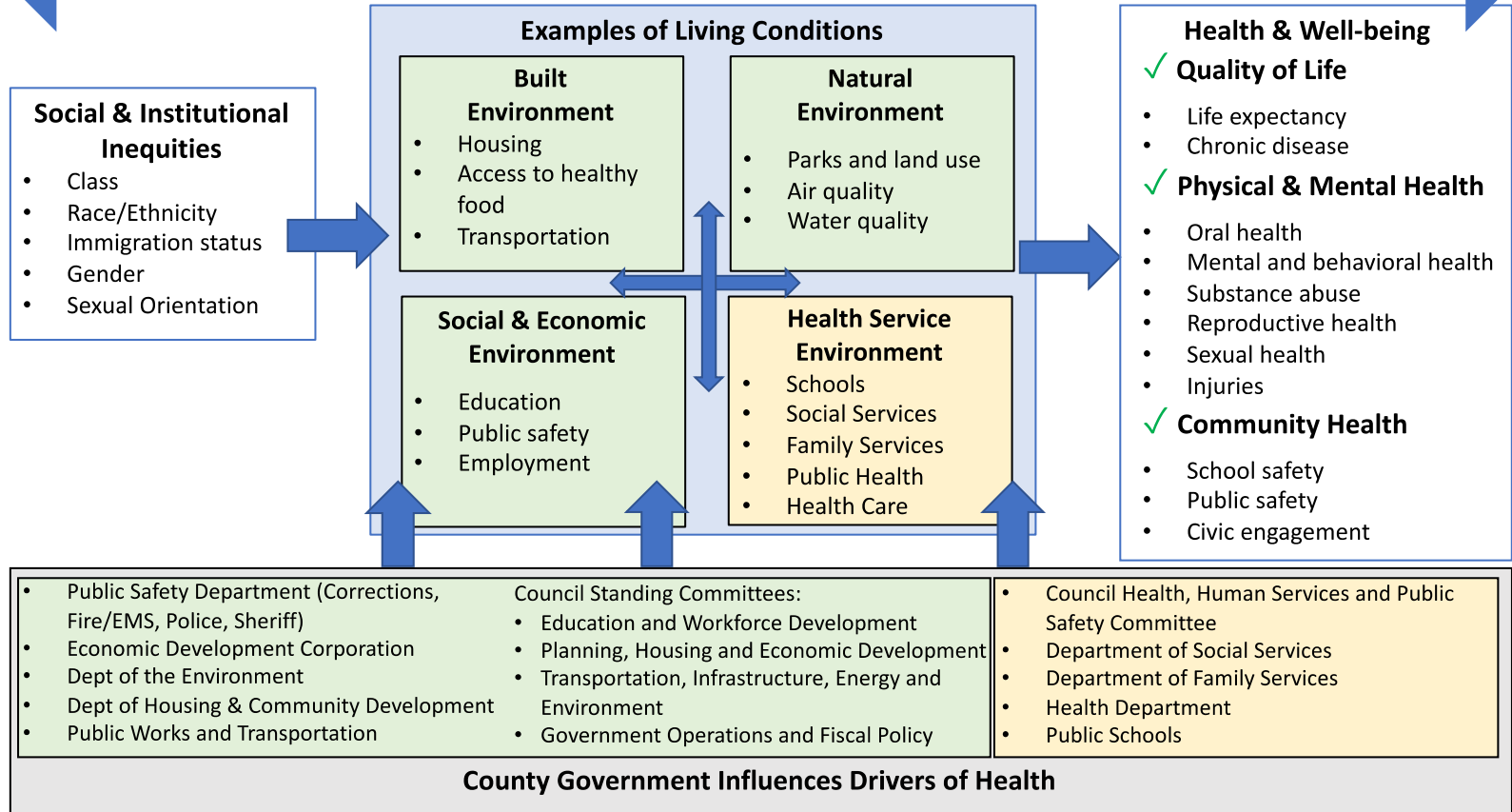
- Collect and analyze data from County, public sources, and proprietary sources
- Talk to residents and stakeholders via:
 - 1 Town Hall meeting during June 2019
 - 3 focus groups for residents in the North, Central and South regions of the County
 - 1 focus group for adolescents and young adults
 - Interviews with 28 key stakeholders knowledgeable about the health and human services needs of County residents
- Review department budgets to understand current use of a health-in-all-policies approach
- Make recommendations and offer examples of strategies used to better align resources to address unmet needs

Framework for Improving Health

UPSTREAM

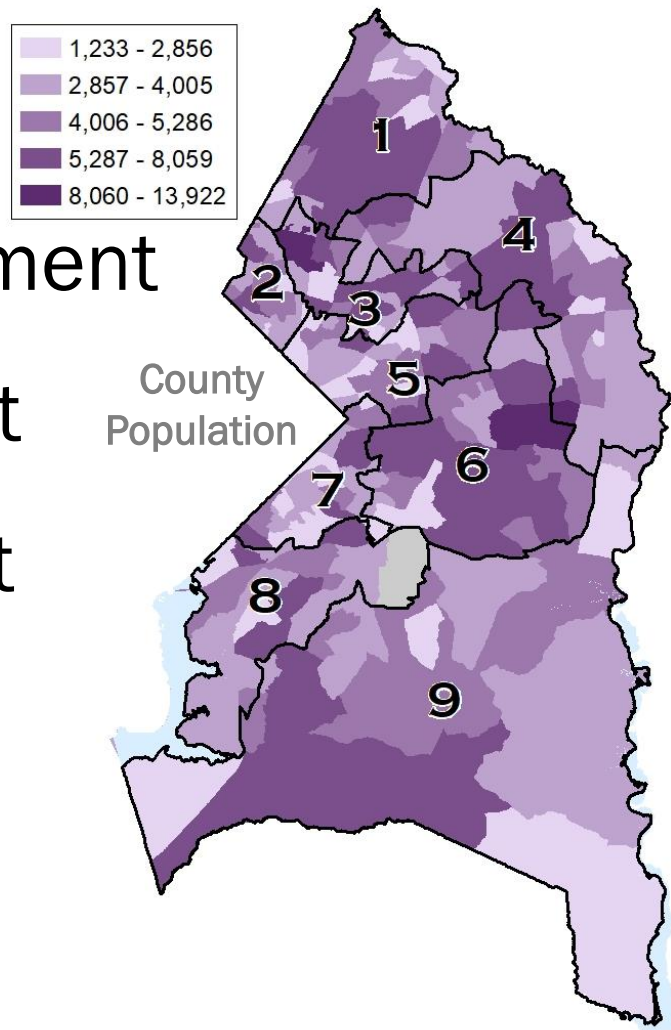
DRIVERS OF HEALTH

DOWNSTREAM



Overview of Findings

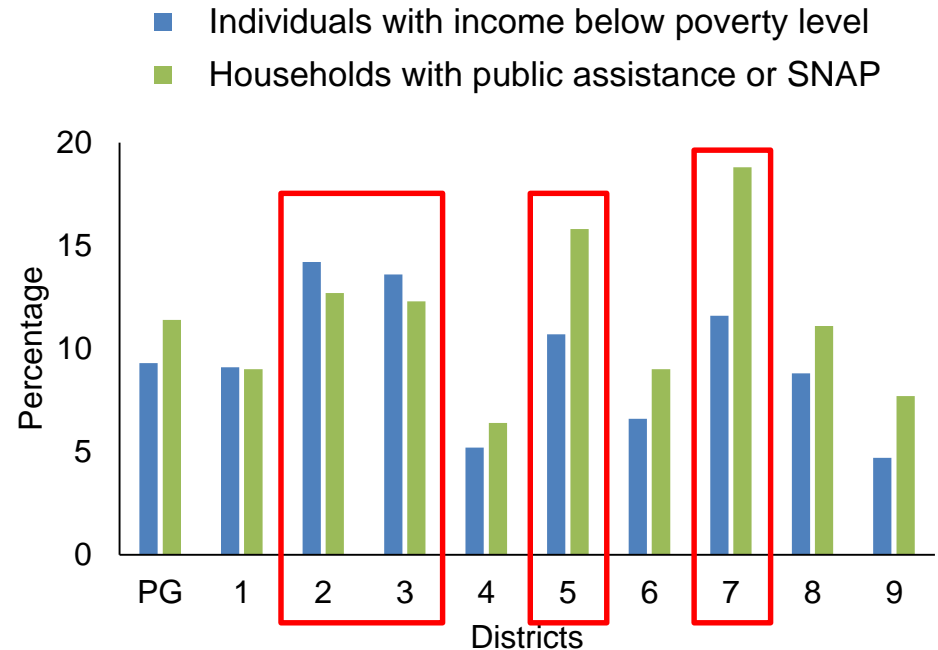
- Social & Economic Environment
- Built & Natural Environment
- Health Service Environment
- Health & Well-being



Drivers of Health:

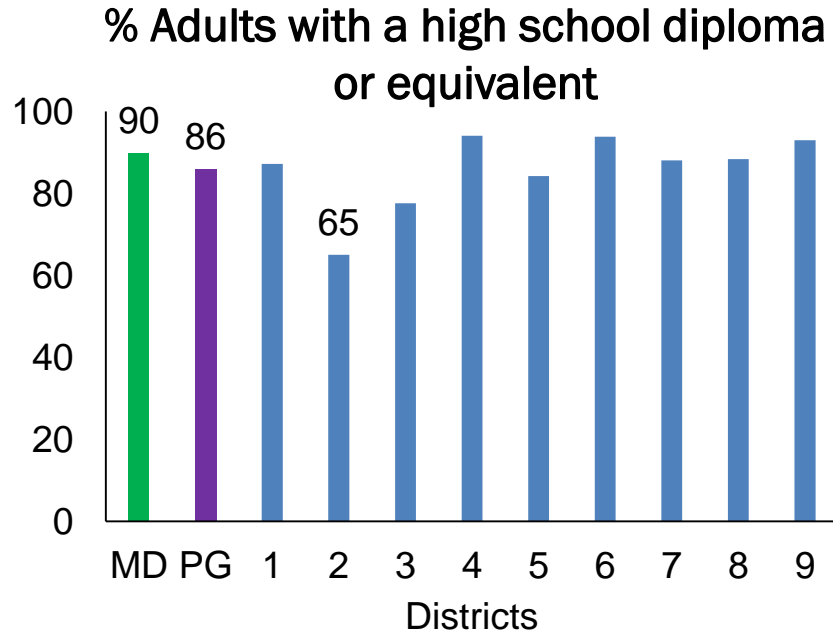
Social & Economic Environment

- Highest poverty rates observed in Districts 2 and 3
- Highest rates of Supplemental Nutrition Assistance Program (SNAP) and public assistance income in Districts 5 and 7

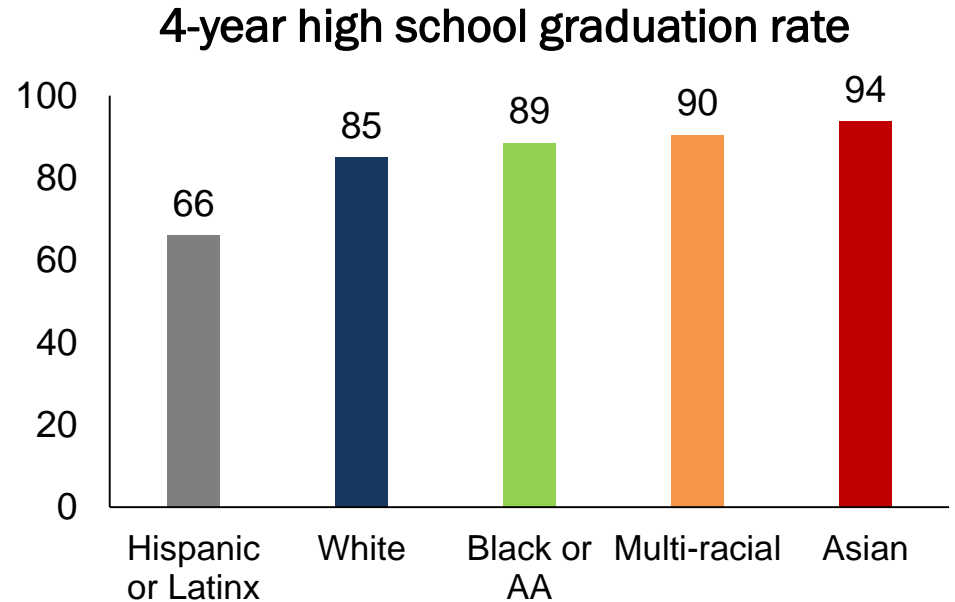


SOURCE: American Community Survey,
5-year estimates, 2013 – 2017

Drivers of Health: Social & Economic Environment



SOURCE: American Community Survey,
5-Year Estimates, 2013-2017

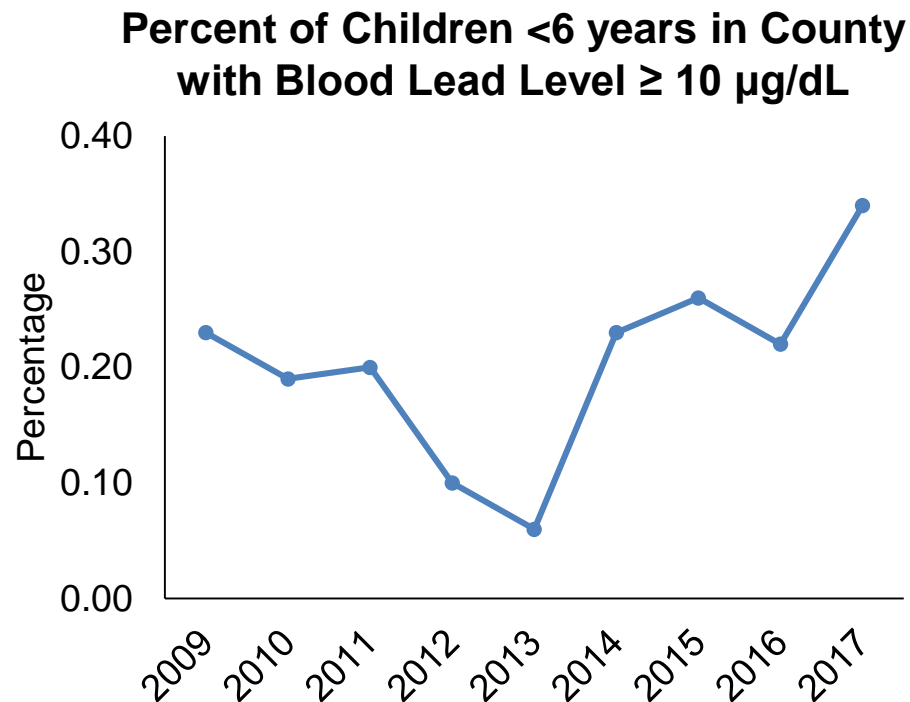


SOURCE: Maryland Report Card 2018 Progress Report

Drivers of Health:

Built & Natural Environment

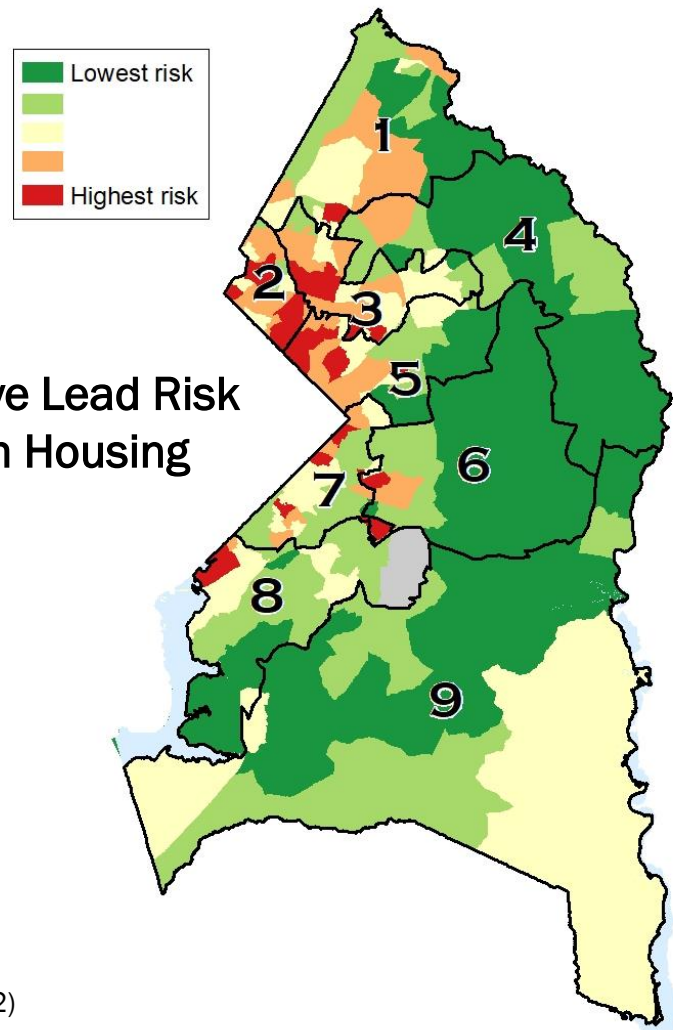
- Lead is a neurotoxicant and can cause neurodevelopmental deficits even at very low levels
 - No level for blood lead is considered “safe”
- Percentage of children with concerning blood lead levels is increasing
- In 2017, 0.3% of children tested had a blood lead level $\geq 10 \mu\text{g/dL}$, which is greater than was observed in prior years



Drivers of Health: Built & Natural Environment

- Age of a home is a marker of risk for lead exposure because paint typically contained high levels of lead prior to 1980.
- More homes were built before 1960 in Districts 2 and 3, reflecting a higher risk of exposure to lead from paint than other districts.

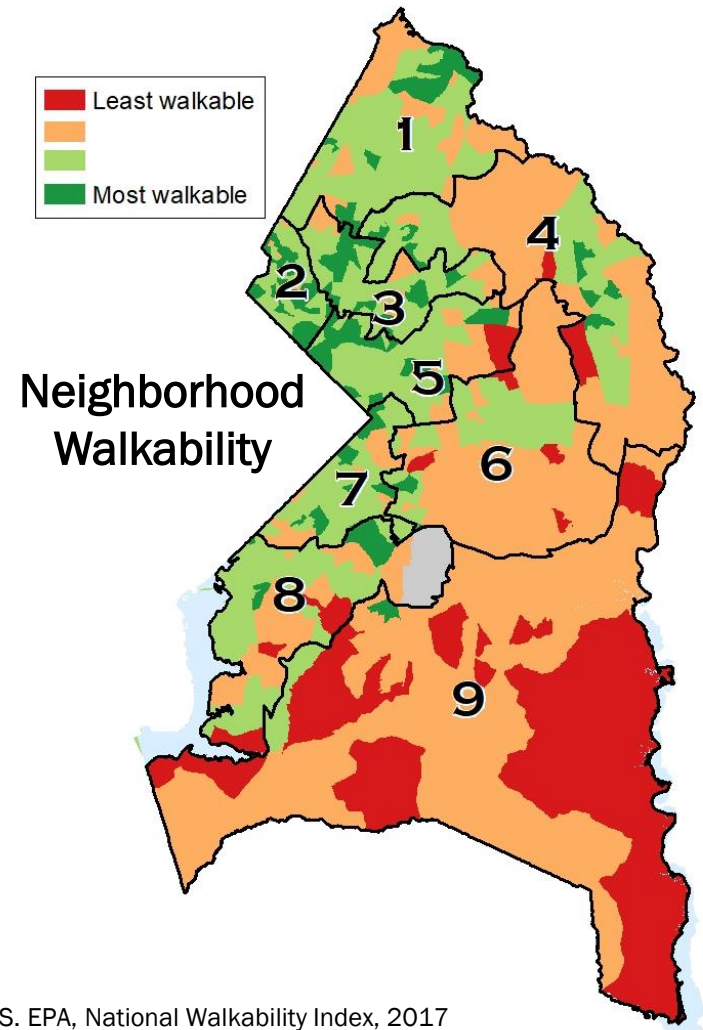
Relative Lead Risk
from Housing



Drivers of Health:

Built & Natural Environment

- Stakeholders wanted more opportunities for outdoor exercise
- *Walkable* neighborhoods make it easier to walk to stores, jobs, and other places, encouraging people to be more active
 - Walkable means = more street intersections, less distance to transit stops, high diversity of business types and residences
- Parks and trees also encourage physical activity
 - Walkable neighborhoods have more pavement and asphalt, planting sidewalk trees can enhance them
- *Plan 2035*, from the County Planning Department, focuses on enhancing walkability and preserving the natural environment



SOURCE: U.S. EPA, National Walkability Index, 2017

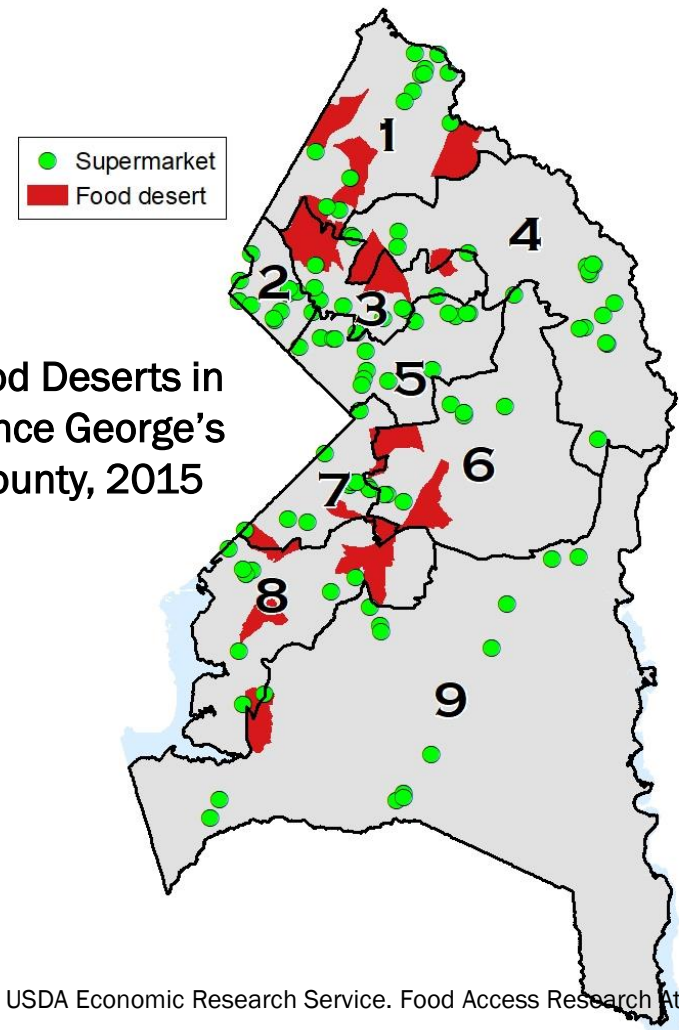
Drivers of Health: Built & Natural Environment

- Stakeholders mentioned lack of healthy food and limited food variety as barriers to healthy eating

“...We need markets with fruits and vegetables. We’ve been trying to get just a Trader Joe’s. Or even restaurants that just serve fresh food.”

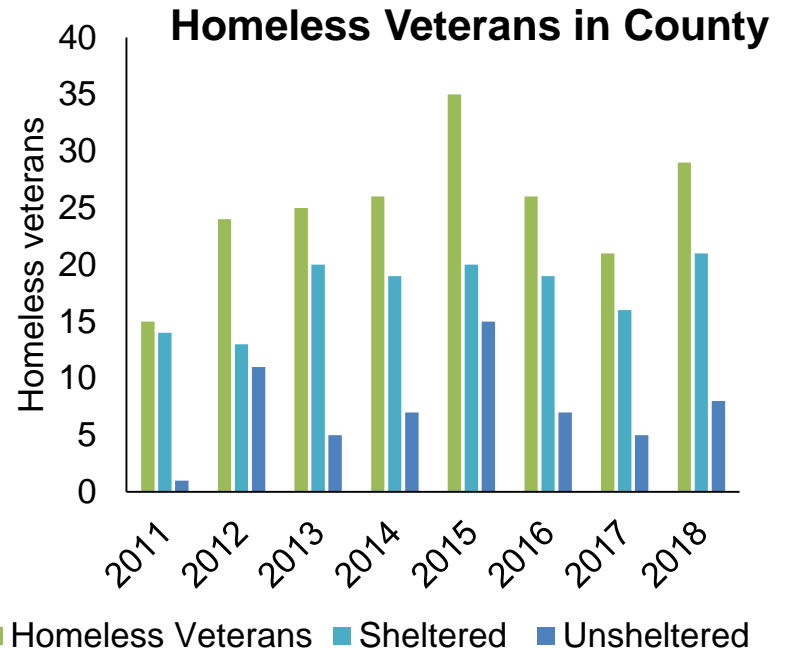
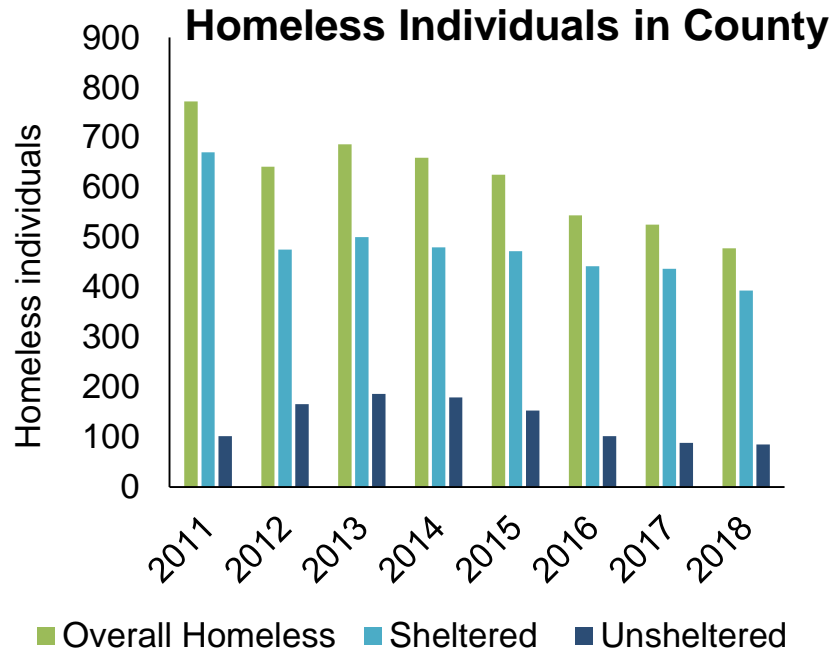
- Schools are an important setting for introducing and maintaining healthy habits, but few students eat healthy foods
 - 11% of high school students reported eating vegetables frequently and recently
 - 17% reported eating fruit frequently and recently

Food Deserts in
Prince George’s
County, 2015



Drivers of Health: Health & Social Services

- Number of homeless and unsheltered homeless individuals has declined, but number of homeless veterans increased slightly.



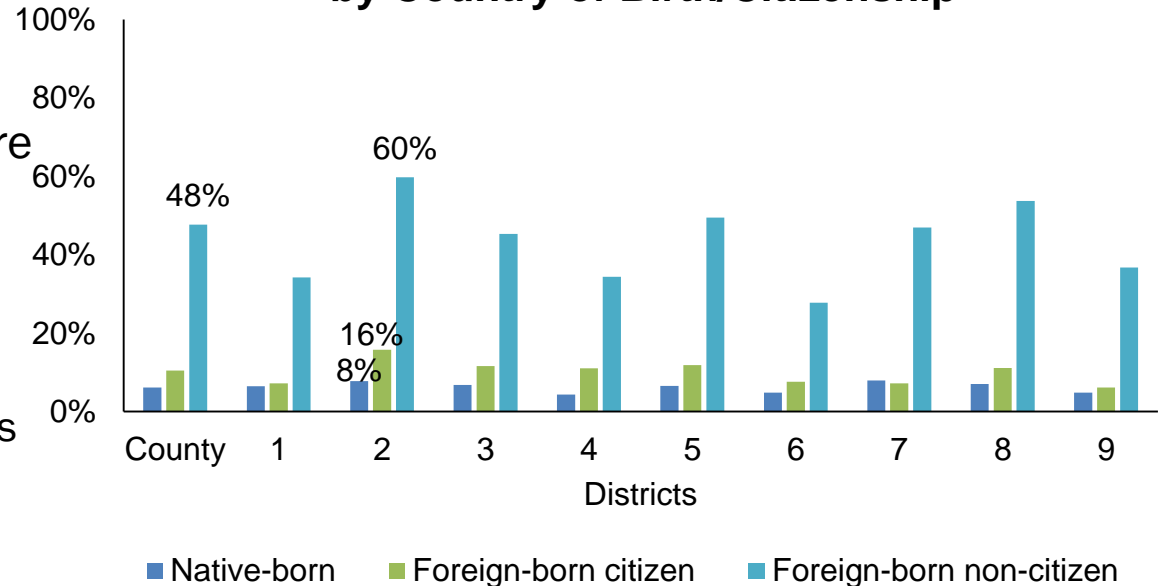
SOURCE: U.S. Department HUD. Annual Homeless Assessment Report to Congress.

Drivers of Health: Health & Social Services

Many immigrants lack health insurance

- One in five County residents were born outside the U.S.
- Nearly 13% of residents are not citizens
- Countywide, lack of health insurance:
 - 6% of native born citizens
 - 10% of foreign-born citizens
 - 48% of non-citizens

Uninsurance Rates by District and by Country of Birth/Citizenship

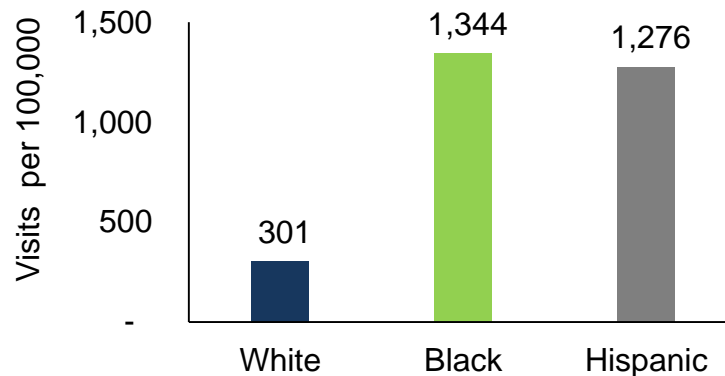


SOURCE: American Community Survey, 5-Year Estimates, 2013-2017.

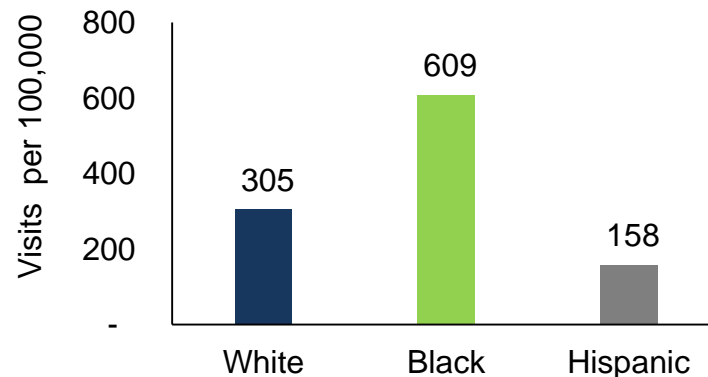
Drivers of Health: Health & Social Services

- EDs are used for preventable issues
 - Highest rates observed among Black and African American residents
- Asthma is best managed in primary care settings, but we found high rates of asthma-related ED visits for children
- High ED visit rates for adults for preventable dental issues

Asthma-related ED visits for children



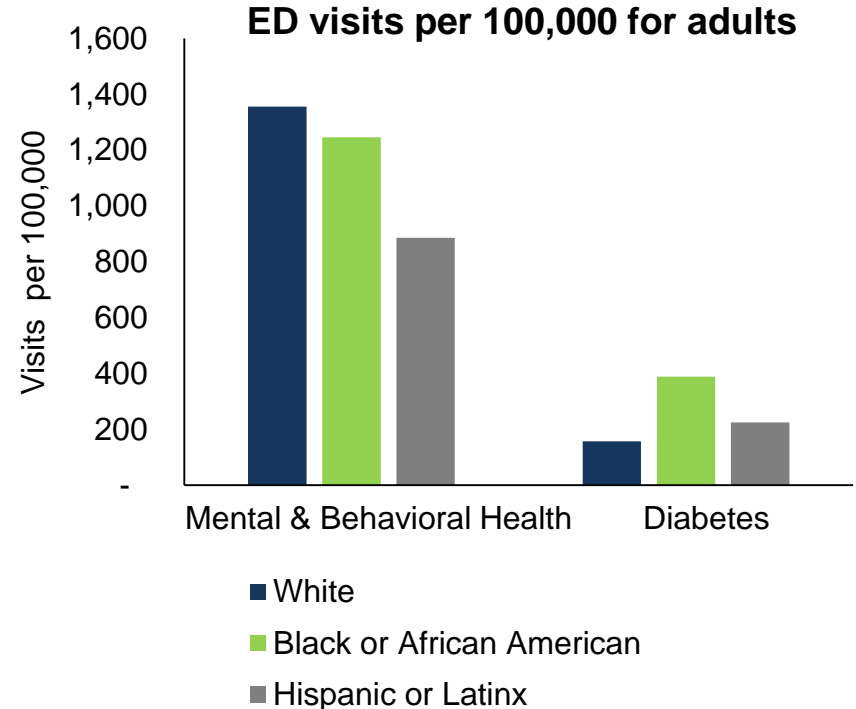
ED visits for non-traumatic dental care for adults



SOURCE: 2017 Maryland data was obtained from the Maryland Health Services Cost Review Commission. 2017 D.C. data was obtained from the DC Hospital Association.

Drivers of Health: Health & Social Services

- ED visits for behavioral and mental health (MH) conditions are common
- Concerned about access to MH providers, especially for children, immigrants, homeless individuals, and inmate and returnee populations
- Stakeholders wanted better links to services that address health and human service needs (e.g., health care and housing)



SOURCE: 2017 Maryland data was obtained from the Maryland Health Services Cost Review Commission. 2017 D.C. data was obtained from the DC Hospital Association.

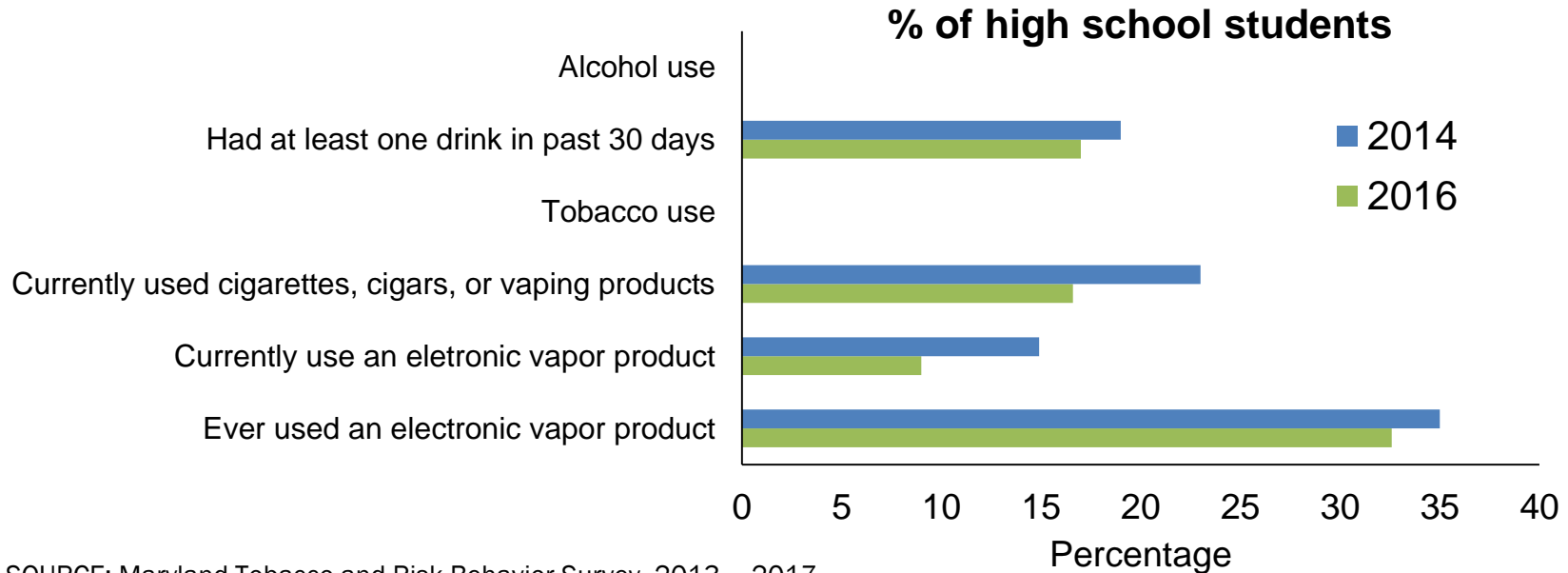
Health and Well-Being: Safety is Improving

- Violent crime declined by 59% from 2005 to 2016
- High school students reporting sexual dating violence declined from 11.5% in 2013 to 5.5% in 2016

SOURCES: RWJF County Health Rankings, using data obtained from the FBI's Uniform Crime Reporting Program 2005–2016 & Maryland Tobacco and Risk Behavior Survey, 2013 – 2017.

Health & Well-Being

- More high school students are making healthy decisions related to alcohol and tobacco use, but vaping is a concern

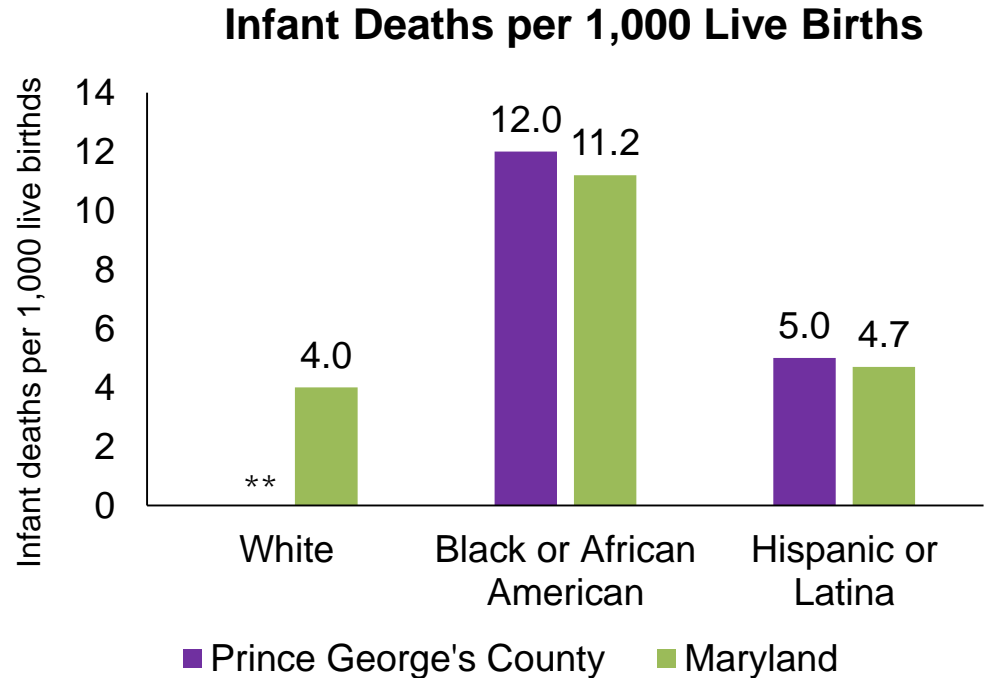


SOURCE: Maryland Tobacco and Risk Behavior Survey, 2013 – 2017.

Health & Well-Being

Large racial/ethnic disparities for pregnant women and infants

- Most births are to Black mothers
- Black and Hispanic mothers are less likely to receive prenatal care than White mothers
- Infant mortality rate was 12 per 1,000 live births for Black or African American mothers and 5 per 1,000 live births for Hispanic or Latina mothers

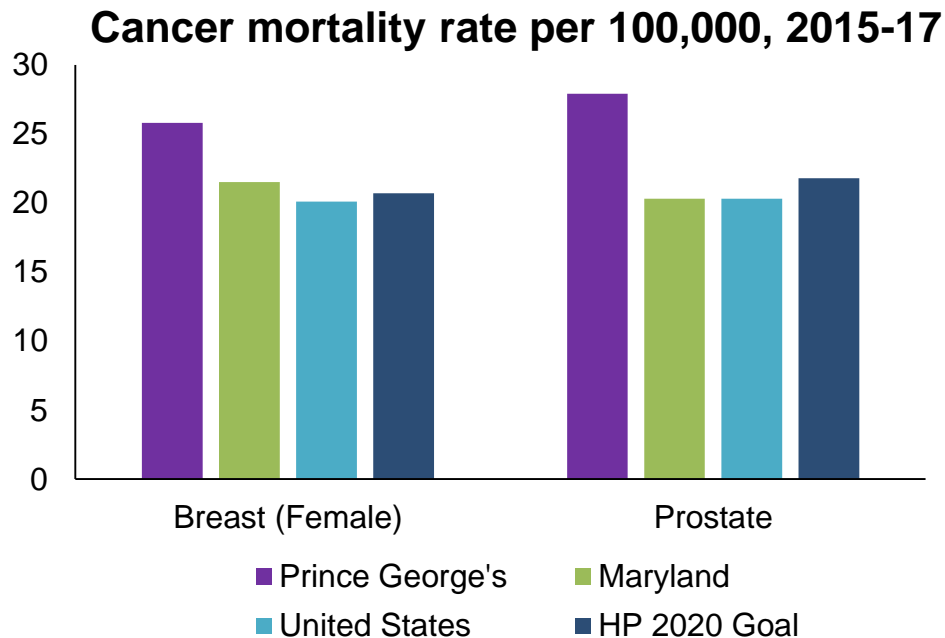


SOURCE: 2017 Maryland Vital Statistics. **Rates based on <5 deaths not shown.

Health & Well-Being:

High Rates of Cancer Mortality

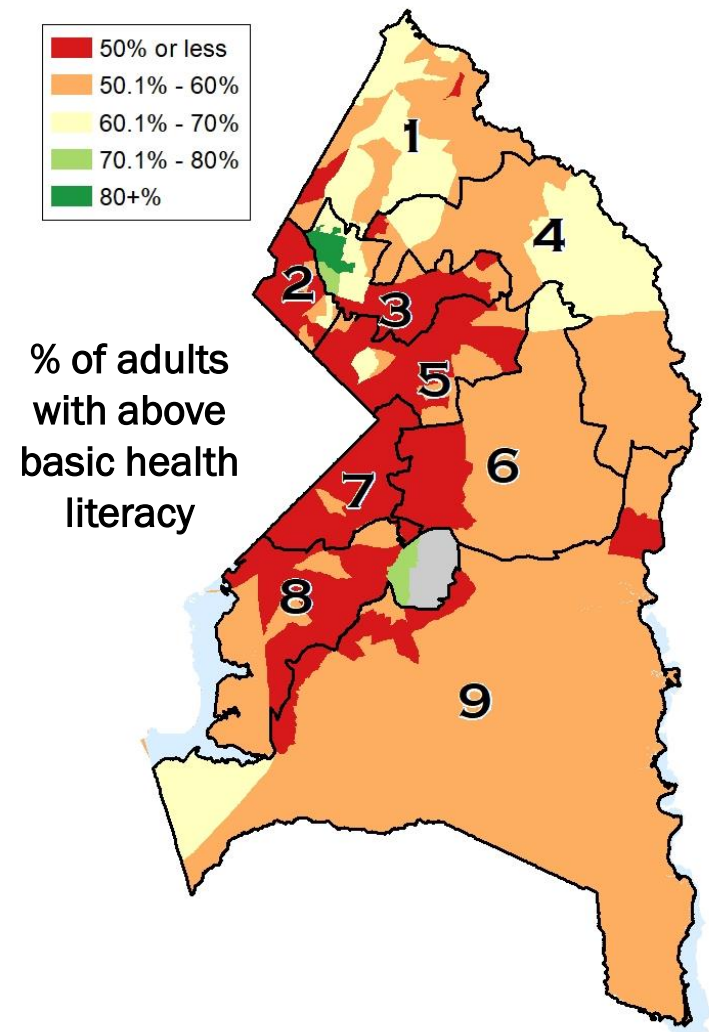
- High mortality rates for breast and prostate cancer
- Breast cancer mortality rates increased from 22.7 per 100,000 in 2015 to 25.8 per 100,000 in 2017



SOURCES: 2015-2017 CDC WONDER Online Database; MDH Maryland SHIP; Healthy People 2020.

Health and Well-Being: Health literacy

- Health literacy refers to “the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions” (DHHS 2010)
- 52% of adults in the County have above basic health literacy
- Rates were highest in District 4 (59%) and lowest in District 2 (45%)

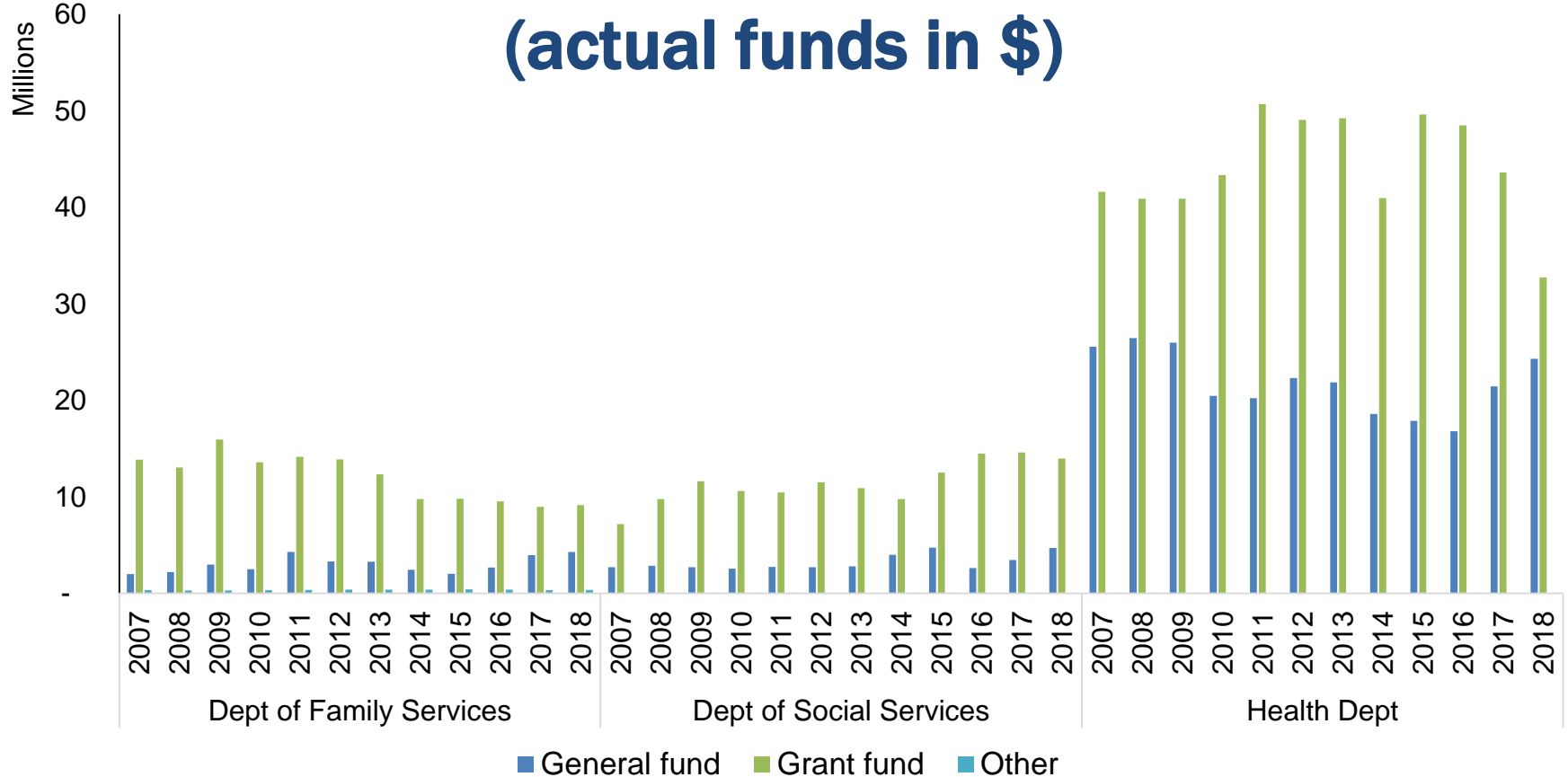


Policy Recommendations

- 1.1. Improve coordination and communication, including data sharing, governance, and shared narrative, among agencies addressing County health and well-being needs.
- 1.2. Break down silos between funding streams for health and human services, particularly in ways that can better leverage and coordinate grant funding.
- 1.3. Better coordinate the nongovernmental organizations that address health and human service needs in the County, and employ high capacity nonprofits strategically.
- 1.4. Implement policies that promote walkability and economic investment, with a focus on equity.

Human Services Budget, FY2007-FY2018

(actual funds in \$)



Policy Recommendations: Exemplars

Massachusetts

Two-way electronic referral system whereby clinical providers can refer patients with out-of-scope health needs to community organizations, which provide patient updates to the provider.

Virginia

Pools 8 funds for services for at-risk youth; Family Assessment Planning Teams convene agencies, families, and service providers to coordinate health/human services for child; ensures services are not duplicative.

Allegheny County

Multi-stakeholder strategic partnership between several non-profits to address food equity; track the development of grocery stores and SNAP utilization.

Detroit

“20-minute neighborhoods,” walkable urban design concept; residents can obtain all of the services in their neighborhood that they need without a car in just twenty minutes.

Programmatic Recommendations

2.1. Improve the delivery and coordination of health services, including better screening for social needs.

2.2. Improve the accessibility, clarity and usability of health promoting resources and related civic engagement opportunities among County residents.

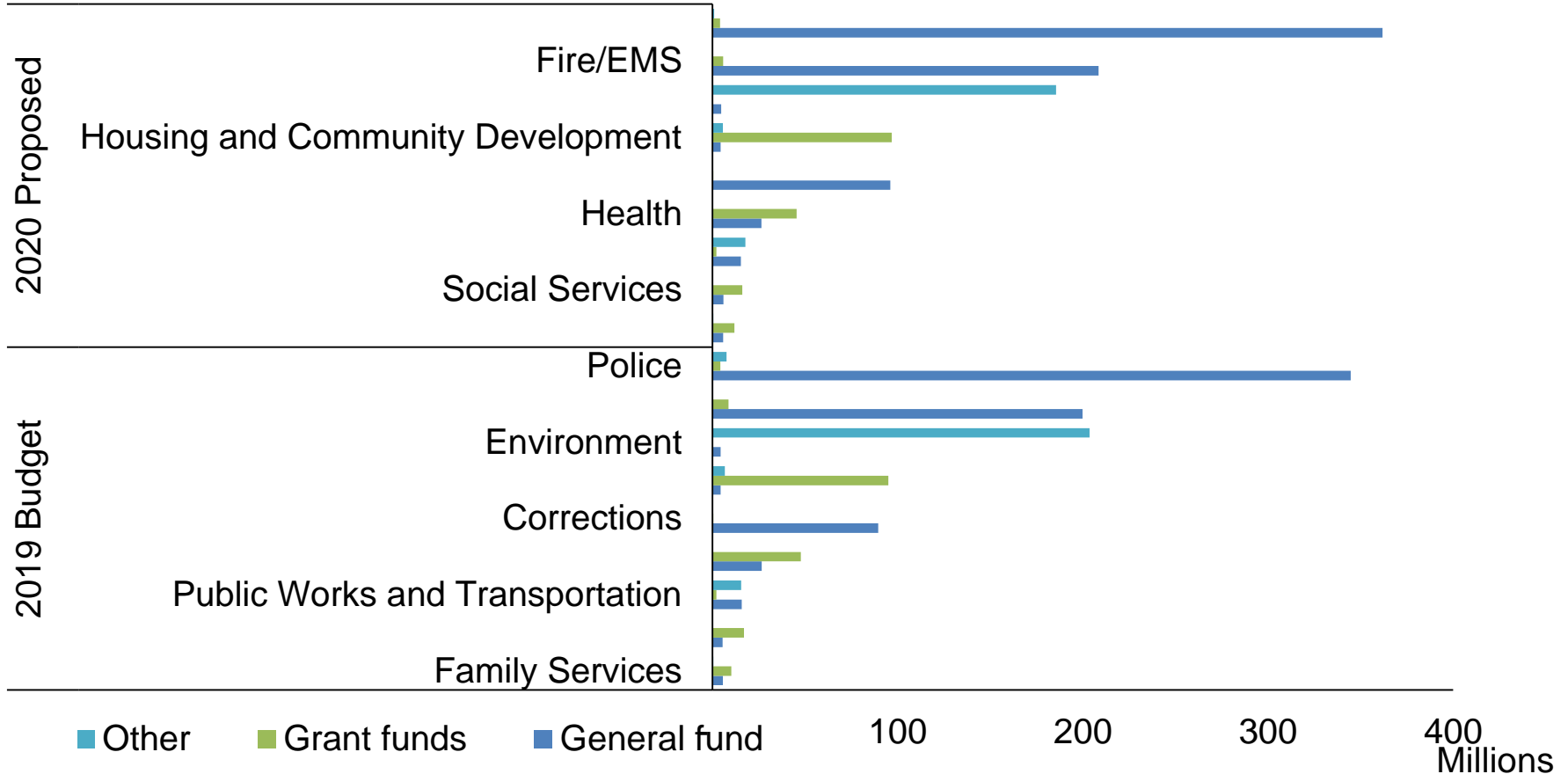
Programmatic Recommendations: Exemplars

- King County** The Familiar Faces program targets high utilizers of jail with mental health or substance abuse issues to provide comprehensive rehabilitative services, which pair behavioral health, primary care, and life skills training into one service delivery.
- Minnesota** LifeStyle Overview screening tool helps providers identify non-clinical needs such as housing and other social services.
- Washington** Predictive Risk Intelligence System (PRISM) identifies high-risk Medicaid patients by conglomerating medical, behavioral health, social service, and health assessment data; provides clinical decisionmakers with a holistic view of a patient's risk factors, health outcomes, and service utilization.

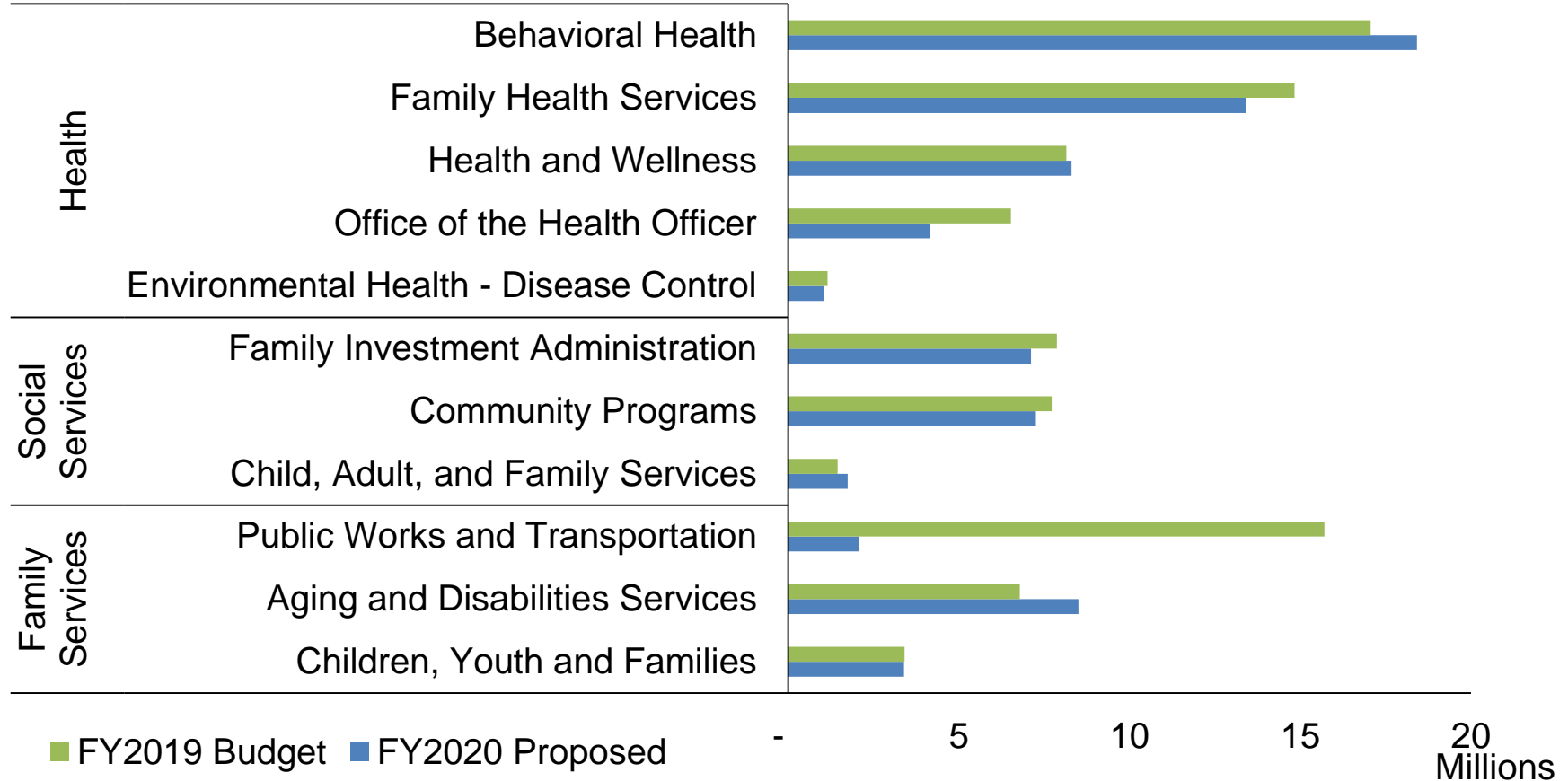
Measurement & Investment Recommendations

- 3.1. Review areas of data gaps that allow for better analysis of within County variation and offer more insight about health assets and the health ecosystem.
- 3.2. Engage nontraditional health sector to participate in health mapping and analysis.
- 3.3. Improve structures that support health and well-being data transparency and stewardship.

Budget by Agency, FY19 and FY20 Proposed



Budgets by Agency and Program, FY19 and FY20 proposed



Measurement Recommendations: Exemplars

Vermont

HiAP Task Force conducted series of health impact assessments to develop policy recommendations for non-health areas: regulation of recreational marijuana, paid sick leave policy, and school transportation policy. Used in conjuncture with Total Health Expenditure Analyses.

Massachusetts

Healthy Transportation Compact mandates health impact assessments be conducted for every transportation project. Used in the implementation of complete streets, the expansion of safe routes to school programs, and the execution of partnerships to support efficient transportation.

Santa Monica

Dashboard measures dimensions including traditional health outputs and outcomes in physical, social, and emotional health along with measures of community cohesion, the quality of the natural and built environment, and economic opportunity.

Moving Forward

- Key finding: Shared interest of leaders and residents to embrace a more integrated strategy to improve and track health and well-being
- Opportunity to think differently about budgeting
 - Global budgeting removes silos and focuses on tracking dollars allocated to achieve goals related to health and well-being
- Opportunity to think differently about data
 - Ensure indicators are tracking key health and well-being priorities



SOCIAL AND ECONOMIC WELL-BEING