Bridging Health and Social Services

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BECHARA CHOUCAIR
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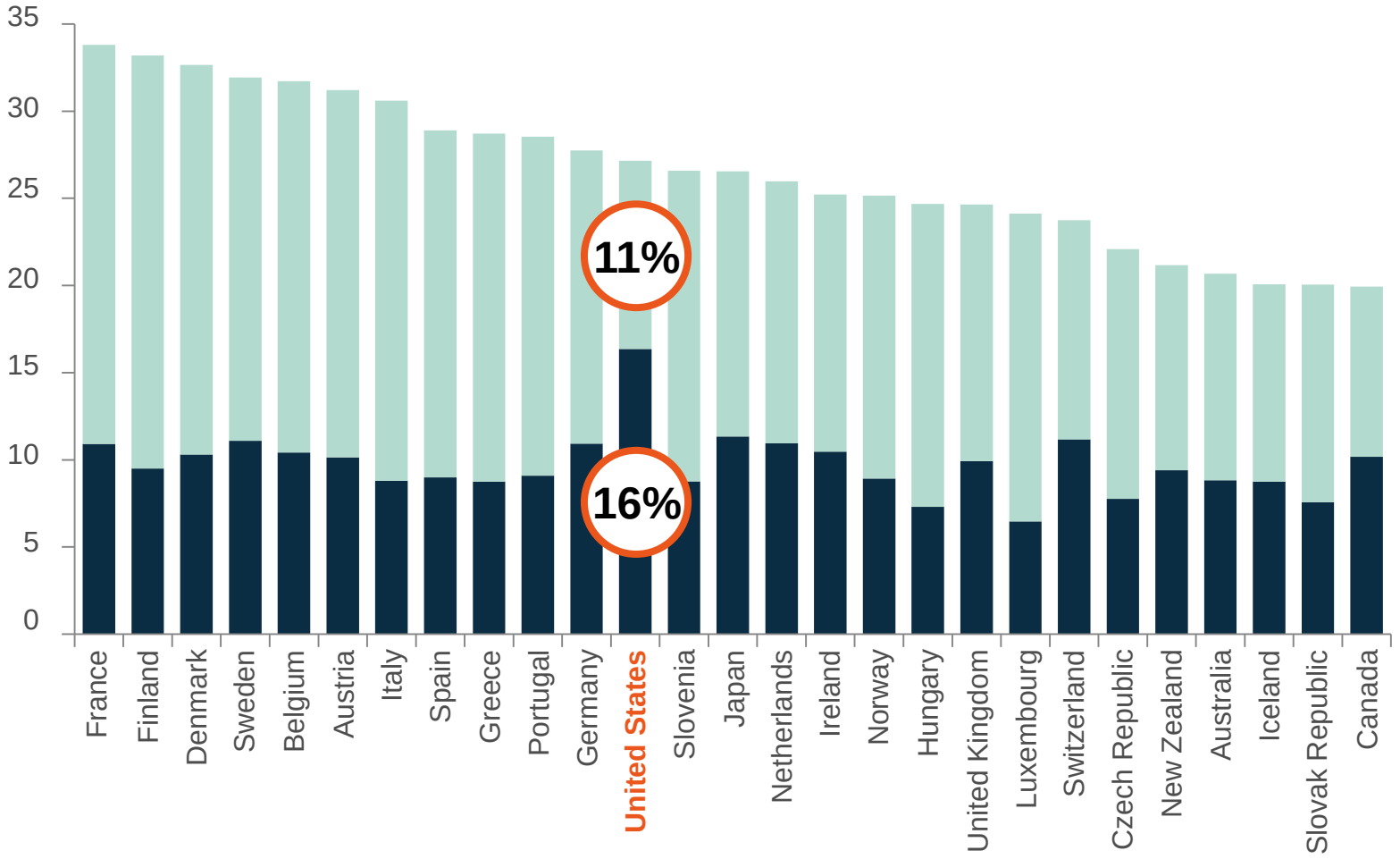
Meet Rufus

From *The American Healthcare Paradox*

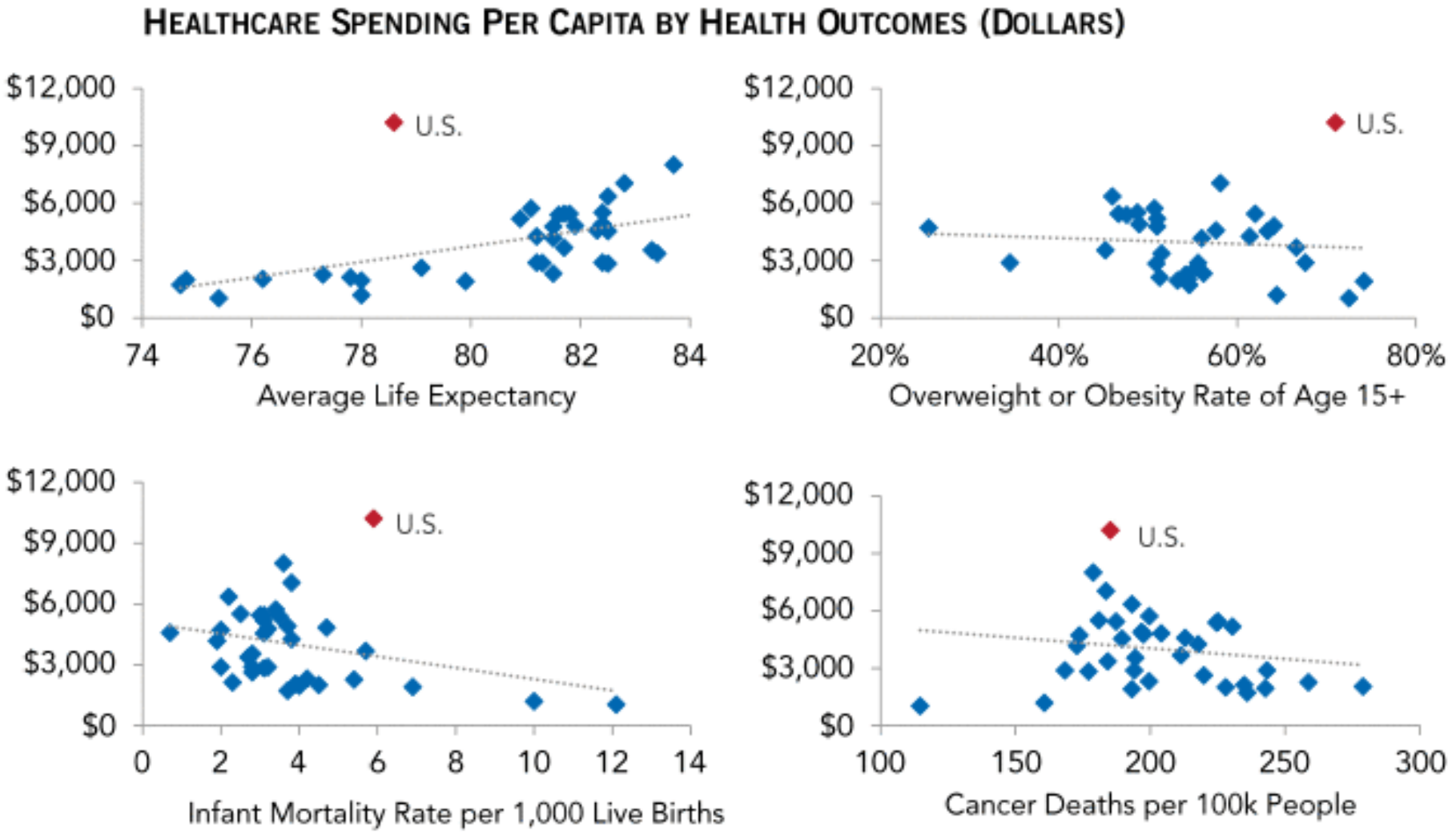


Spending on Social and Health Programs by Country (2013)

- Social service expenditure as % of GDP
- Health expenditure as % of GDP

Source: OECD, CDC, CMS

Higher Spending ≠ Better Outcomes



SOURCE: Organization for Economic Co-operation and Development, *OECD Health Statistics*, June 2018. Compiled by PGPF
NOTE: Data are for 2017 or latest available for all OECD countries.

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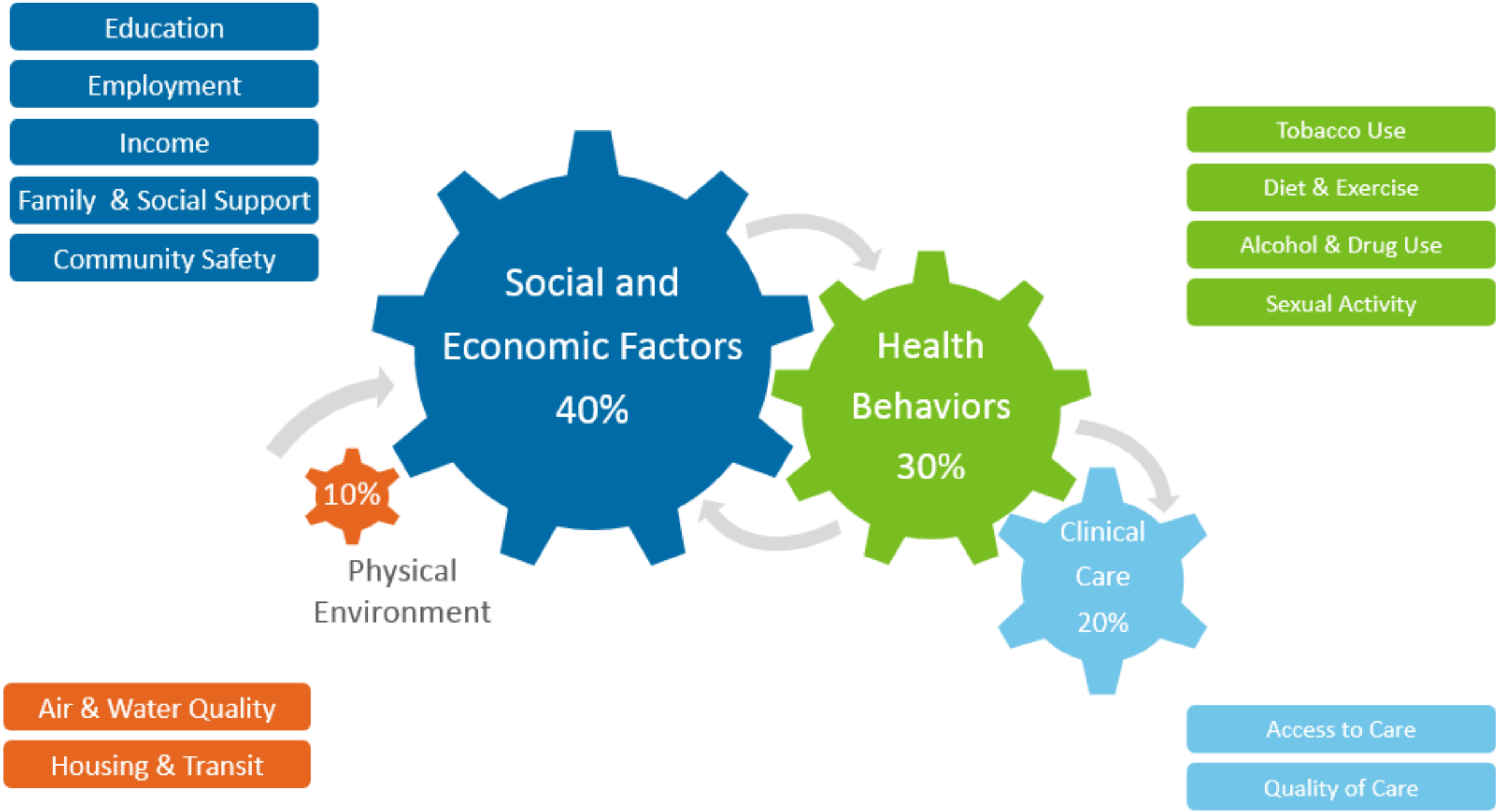
Education
Employment
Income
Family & Social Support
Community Safety
Social and Economic Factors 40%
Health Behaviors 30%
Clinical Care 20%
10%
Physical Environment
Tobacco Use
Diet & Exercise
Alcohol & Drug Use
Sexual Activity
Air & Water Quality
Housing & Transit
Access to Care
Quality of Care

Meaningful Partnership

CIE

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Connecting the Dots for Our Members

To meet our members' needs, we will:

- Identify those specific clinical moments and physical locations that regularly reencounter those members who are likely coping with an unmet social need
- Develop tools and/or optimize processes that make our staff more effective in identifying needs and matching them with specific assistance

Encounter-based Touchpoint Examples:

2-1-1 San Diego

- Food Insecurity Screening
- Referral Website
- CalFresh eligibility

Social Needs Among KP Members

Food Insecurity

29% of high utilizers

25% of elderly Medicaid members

Housing Concerns

11-23% of high utilizers across regions

Transportation Needs

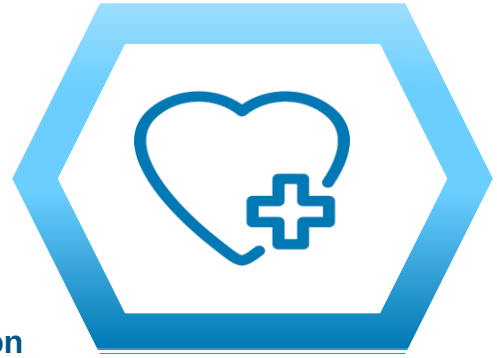
34% of “dual” Medicare/Medicaid eligible

Creating Social Care

Identification
Social needs are identified by KP staff, provider, member, caregiver or community partner

Connection
Locate resources from KP, community organizations and the government to meet those needs

Information
Provide information on community resources and tracks referrals with community partners



Optimization
Data used by KP and community partners to better understand social needs and provide programs, care and services that address community conditions for health

Housing, Homelessness, and Health

THRIVING SCHOOLS

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THRIVING SCHOOLS

- Attendance
- College/Career Readiness
- School Wellness Policies
- Healthy Eating
- Physical Activity
- Social & Emotional Well-being
- Staff Breakroom Makeovers
- Labor Management Collaboration
- Webinar Learning Series

Resilience in School Environments

School-Based Interventions

- Onsite Alliance for a Healthier Generation (AHG) intervention
- Virtual school-focused tools and resources
- KP workforce health
- Educational theatre

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Content that Connects Communities

- Messaging and resources for educators, parents & students inside and outside of school
- Focus areas: basic science behind trauma and stress, coping strategies and life skills, resilience-building strategies
- Partnerships with other ACES/Resilience campaigns (i.e., Stress Health)

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Artificial Intelligence

- Algorithm + machine learning to create resilience index for every school and community
- Use AI-generated insights to recommend resources, create custom interventions

Thriving Cities

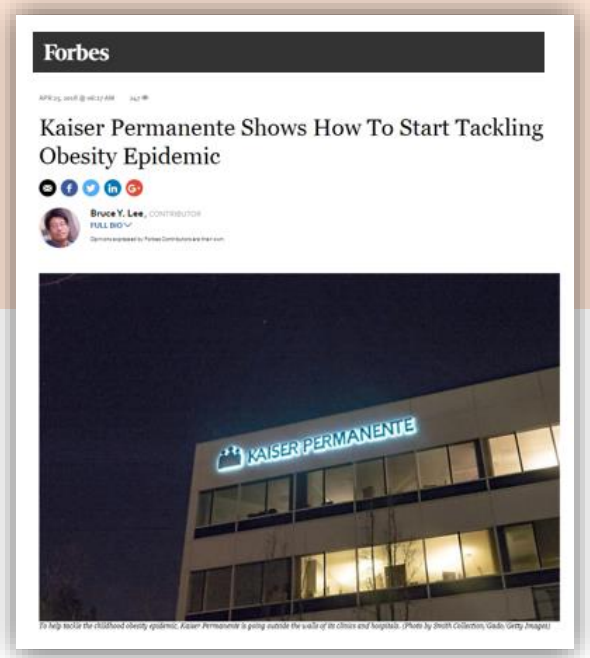
Healthy Eating Active Living Cities

Strategies

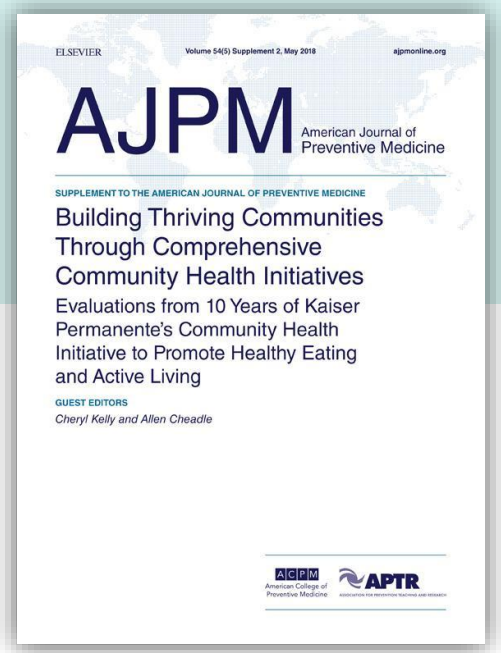
- Partnerships among statewide public health orgs and state municipal leagues
- Model HEAL resolutions
- Training and technical assistance for policy adoption and implementation
- Build movement through city recognition program

Progress to Date

- 337 HEAL Cities
- 1,000 HEAL policies
- Engagement of more than 2,400 elected officials
- A non-partisan platform for the HEAL movement



HEALTHY EATING ACTIVE LIVING CITIES CAMPAIGN



Proven Policies for Healthy Cities

cityhealth | de Beaumont FOUNDATION | KAISER PERMANENTE

An initiative of the de Beaumont Foundation & Kaiser Permanente

- Affordable Housing
- Alcohol Sales Control
- Complete Streets
- Earned Sick Leave
- Food Safety / Restaurant Inspection Rating
- Healthy Food Procurement
- High-Quality Universal Pre-K
- Smoke Free Indoor Air
- Tobacco 21

Q&A