NH Communities in Action

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Director of Public Health Services, NH Department of Health and Human Services
Vision 2020: The Healthiest Community Initiative

Presented by: Patrick Heneghan

NHPHA/NHCHI Fall Conference

October 20th, 2009
“Culture is the shared ideas, meanings, and values that are acquired by individual as members of a community. It is socially learned, continually evolves, and often influences us unconsciously…”

Institute of Medicine *Health Literacy: A Prescription to End Confusion*
Know Your Numbers

Social Capital
Know Your Neighbors

Wellness Opportunities
Move Your Numbers

Health Literacy
Understand Your Numbers

Health Access
Manage Your Numbers

Health Status
GOAL STATEMENT

Increase the degree to which the community can achieve and maintain recognizable indicators of health and well-being.

KNOW YOUR NUMBERS
GOAL STATEMENT

Increase the degree to which the community can obtain, process, and understand health information and services needed to make appropriate decisions.

UNDERSTAND YOUR NUMBERS
GOAL STATEMENT

Expand the timely use of appropriate and affordable health services to achieve the best possible health outcomes for the community.

MANAGE YOUR NUMBERS
GOAL STATEMENT

Increase the opportunities for using the community’s built environment to support healthy lifestyles and overall well-being.

MOVE YOUR NUMBERS
GOAL STATEMENT

Strengthen the accumulated interconnection, goodwill and collective trust among members of our neighborhoods and communities.

KNOW YOUR NEIGHBORS
“The greatest untapped resource for improving healthcare is the knowledge, wisdom, and energy of individuals, families, and communities who face challenging health issues in their everyday lives.”

“Citizen Health Care: A Model for Engaging Patients, Families and Communities as Coproducers of Health”

Reaching New Hampshire residents where they live, learn, work & play
The Public Health Challenge

Prevalence of Overweight and Obesity
Adults 18 Years Old and Older
New Hampshire, BRFSS, 1990-2005

10% increase in combined prevalence of overweight & obesity from 1995 to 2005
### Overweight & Obesity Among NH Children & Adolescents

<table>
<thead>
<tr>
<th>Preschoolers (2-5 yrs. old)*</th>
<th>Students (9-12 grade)*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>At Risk for Overweight</strong></td>
<td><strong>At Risk for Overweight</strong></td>
</tr>
<tr>
<td>NH – 18.1%</td>
<td>NH – 13.2%</td>
</tr>
<tr>
<td>US – 16.3%</td>
<td>US – 15.7%</td>
</tr>
<tr>
<td><strong>Overweight</strong></td>
<td><strong>Overweight</strong></td>
</tr>
<tr>
<td>NH – 15.9%</td>
<td>NH – 11.4%</td>
</tr>
<tr>
<td>US – 13.0%</td>
<td>US – 13.1%</td>
</tr>
</tbody>
</table>

*Low-income U.S. children who attend federally-funded maternal and child health and nutrition programs.

(PedNSS-2006)

*State-based, self report, school administered survey of representative sample of 9-12 grade students

(YRBS-2005)

*Children who are diagnosed as overweight as toddlers or preschoolers are more likely to be overweight in early adolescence.*
Economic Impact

Total cost of overweight and obesity:

US – $147 billion spent annually treating obesity related medical conditions
Finkelstein, Trogdon, Cohen, and Dietz, 2009

NH – $302 million
Finkelstein, Fiebelkorn, and Wang, 2004
The Vision

Creating healthy environments where all residents improve health and quality of life through healthy eating and active living.
Goals

Promote environmental and policy changes at state and local levels

Support implementation of evidence-based and promising practices interventions

Increase the number of people (and pets) in NH who improve their health
Integrated Multi-Sector Approach

- Cities & Towns
- Food Outlets
- Schools
- Worksites
- Health Care

Focus on Individuals & Families
Strategies

- HEAL Home
- Statewide Committees, Leadership Council and Partnerships
- Community Grant Program
- Tools, Resources & Technical Assistance
- Communications (Website, Partner Program, Speakers Bureau)
Community Grant Program
(Round 1)

April 2009 – $600,000 awarded to four NH community partnerships serving 46 cities and towns:

• Franklin-Twin Rivers HEAL
• Cheshire County HEAL
• Lakes Region HEAL
• Upper Valley HEAL
Upper Valley HEAL: A Community Partnership in Action

Serves Lebanon & 5 Mascoma Towns

Identified Needs:

- High rate of Overweight/Obesity compared to neighboring towns (40% compared to 25%)
- Less likely to achieve 60 minutes/5 days per week activity standard (40% Mascoma to 47.4% NH)
- Low team sports participation (70%/52% compared to 90% NH)
- Higher soda consumption (81% compared to 75% NH)
- Somewhat lower vegetable consumption than statewide
Upper Valley HEAL: An Integrated Approach

Target Sectors and Interventions

**Community:** Improve Built Environment
Mascoma River Greenway, Safe Routes to School and Play, Mascoma Trails, Produce Access Projects

**Health Care:** A Regional Clinical Approach to Healthy Weight
Routine BMI, 5210-Based Education/Counseling, Tailored Referrals to Community Resources

**Schools:** Improve School Nutrition & Physical Activity Environments
Policy Assessment and Change, 5210-Based Curriculum Integration, School-Community HEAL Development
Upper Valley HEAL: Desired Outcomes

Long-Term Goal: Increase physical activity, improve nutrition, and begin shaping HEAL related social norms in UV HEAL communities

Outputs: Multi-Sector interventions occur in variety of scopes and settings
Upper Valley HEAL: Desired Outcomes

Short-Term Outcomes (Year 1)

- Parents, Teachers, Community members and institutions connected with elementary students begin developing social/cultural norms that support 5210 concepts

- Policy Changes begin to support 5210 & HEAL goals

- Built environment changes begin which support 5210 and HEAL goals
Upper Valley HEAL: Desired Outcomes

Intermediate Outcomes (Years 2 & 3)

- hours/week of youth non-school screen time
- + %/# of students participate in team sports
- + in physical activity of non-athlete students
- + in physical activity of all students October-March
- + in families being physically active together
- + mins/week physical activity in schools
- + w/b/s/n to schools
- + in youth/parents who indicate they utilize trails
- + perception that physical activity is a valued community norm
- + perception that w/b/s/n is a valued community norm
- + perception that fruit/vegetable consumption is a valued community norm
- + perception that reducing sugary drinks is a valued community norm
- + number of youth eat breakfast more regularly
Funding Partners

- HNH Foundation
- Anthem BCBS Foundation
- Harvard Pilgrim Health Care Foundation
- Endowment for Health
- NH Charitable Foundation
- NH Department of Health and Human Services
For More Information...

www.HEALNH.org

or contact

(603) 225-0900
Realizing the Goal of an Integrated Public and Personal Health System

October 20, 2009
Healthy UNH

- Vision - *to become the healthiest campus community in the country by 2020*
- Take a multidisciplinary approach to achieve the program goals (CORE)
- Serve as a pilot site for engagement, wellness and reform efforts and translate methods, materials and successes for other campuses
Healthy UNH - Values

1. Transforming health care delivery
2. Creating value for the money we invest in medical care
3. Ensuring that the care we purchase is the right care at the right time
4. Following medical care practices that are evidence-based
5. Improving the health of our entire community, spanning multiple locations and audiences
6. Sustaining health and health care
7. Collaborating across our community
8. Engaging and educating our community
9. Advancing mental and physical well-being
10. Promoting work/life balance
HEALTHY UNH - Domains

HEALTHY UNH

Coverage and Reimbursement
Delivery System
Market
Wellness

CORE
Curriculum Operations Research Engagement
At the Intersection

- Bifurcated message
  - Be well
  - Be wise

*Be actively engaged in the pursuit of both*
At the Intersection

- Translate complex issues into easy-to-understand actions
- Draw upon the lessons from UNH Sustainability
- Small steps that, collectively, result in big effects
At the Intersection

- Plethora of exercise & health options on campus
- Easy healthful food substitutions
- Increase use of generic drugs
- Decrease unnecessary ER use
- Choose high quality, cost effective care
USNH Annual Health Care Spend

USNH spends approximately $50 million on medical care for active employees each year.

www.unh.edu/healthyunh
Use of Generic Medications

If USNH increased its rate of generic drug use from 60% to 70% - we would save more than $500,000 per year

www.unh.edu/healthyunh
Using the Emergency Room Wisely

Choosing wisely can improve your quality of life!

If emergency rooms and urgent care facilities were used appropriately - we would save more than $400,000 per year

www.unh.edu/healthyunh
## New Hampshire Hospital Scorecard

**June 2009**

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>Patient Experience</th>
<th>Patient Safety</th>
<th>Select Clinical Quality</th>
<th>Cost Index</th>
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</thead>
<tbody>
<tr>
<td><strong>MARY HITCHCOCK MEMORIAL HOSPITAL</strong></td>
<td>Overall Recommend</td>
<td>National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>$ $</td>
</tr>
<tr>
<td>One Medical Center Drive, Lebanon 03756</td>
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<td></td>
<td>Heart Failure Surgical Infection</td>
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<tr>
<td><strong>CONCORD HOSPITAL</strong></td>
<td>Overall Recommend</td>
<td>National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>$</td>
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<tr>
<td>250 Pleasant Street, Concord 03301</td>
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<td>Heart Failure Surgical Infection</td>
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<tr>
<td><strong>WENTWORTH-DOUGLASS HOSPITAL</strong></td>
<td>Overall Recommend</td>
<td>National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>$</td>
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<tr>
<td>789 Central Avenue, Dover 03820</td>
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<td>Heart Failure Surgical Infection</td>
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<tr>
<td><strong>CATHOLIC MEDICAL CENTER</strong></td>
<td>Overall Recommend</td>
<td>National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>$ $</td>
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<tr>
<td>100 McGregor Street, Manchester 03102</td>
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<td>Heart Failure Surgical Infection</td>
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<tr>
<td><strong>MONADNOCK COMMUNITY HOSPITAL</strong></td>
<td>Overall Did Not Report National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>Heart Failure Surgical Infection</td>
<td>$</td>
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<tr>
<td>452 Old Street Road, Peterborough 03458</td>
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<td><strong>SOUTHERN NH MEDICAL CENTER</strong></td>
<td>Overall Did Not Report National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>Heart Failure Surgical Infection</td>
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<tr>
<td>8 Prospect Street, Nashua 03061</td>
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<tr>
<td><strong>EXETER HOSPITAL INC</strong></td>
<td>Overall Did Not Report National Survey</td>
<td>Heart Attack Pneumonia</td>
<td>Heart Failure Surgical Infection</td>
<td>$ $ $ $</td>
</tr>
<tr>
<td>5 Alumni Drive, Exeter 03833</td>
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NH Health Care Cost & Quality

[www.unh.edu/healthyunh](http://www.unh.edu/healthyunh)
Implementation Methods

- Raising awareness
  - Events
  - Brown bags
  - Formal communications plan
- Interdisciplinary Action Committee
  - Faculty, Staff, Students
- Curriculum and Research
- Aggressive Implementation Plan
Early Lessons Learned

- Don’t underestimate the enthusiasm
- Have a measurement plan early – people want to know what defines success
- Much of the early effort is about communication
  - Message must be targeted for the audience
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