

# **Living Well in the San Joaquin Valley:** ***New Directions for Healthy Places***

**Local Government Commission**  
**Wednesday, September 10, 2014**

**Lynne Ashbeck, MA, MS, RD**  
**Regional Vice President**

**Mayor, City of Clovis**



*Excellence Through Leadership & Collaboration*

# Tonight...

**New and shared understanding** of the  
community health

Identify **drivers, opportunities,  
challenges**

Highlight **‘best practices’**

***What is possible here?***



## ***By way of background...***

- **Hospital Council of Northern and Central California**
  - Part of the California Hospital Association
  - ~ 200 hospitals from Kern to the Oregon border
  - *Shared interests of hospitals* drive work
- **City of Clovis**
  - Served on Council since 2001; Mayor 2003-2005, 2013 – 2015
  - 100,000+ people, safest city in the San Joaquin Valley, ranked best place to raise a family by *NerdWallet*
  - In a Valley surrounded by challenges of poverty, urban decay...often described as the *Appalachia of the West*



# What's driving the interest in community health?

- Affordable Care Act
  - Unsustainable costs of health care
  - Limited/zero access in many of our communities
  - “Population health” provisions
- Sustainable Communities Strategies/SB 375
- General Plan updates and land use decisions
- The drought has made everything “worse.”
- The realization that no one sector can get there on their own.





# Wait. Is there a difference...

*...between*

“healthy communities” and

“population health?”



# “Healthy communities”...

From the *CA Planning Roundtable*, the term is used to mean a community that ensures the infrastructure for:

- **Basic needs**

- Health care, foods, clean drinking water, transportation, quality schools, safe neighborhoods, housing

- **A safe environment**

- **Economic and social vitality**

- **Efficient development patterns**



# Your definition of population health...

...probably depends on where along the  
continuum that you start.

- “The health outcomes of a group of individuals, including the distribution of such outcomes within a group” (*Kindig, University of WI-Madison*)
- More than public health, more than ‘managed care’
- Addressing upstream factors, reducing disparities and inequities



# And one more thing...

## who is responsible for it? Not *me*?

- **Health *functions*** typically seen as the responsibility of a County.
  - Immunizations
  - Disease tracking
  - Clinics, labs, and environmental health
- **Cities play a role** in land use policies and plans, ordinances, public safety, parks and recreation/trails, and more.
  - Use of public spaces for Farmer's Markets, cycling events
  - City/school district partnerships
  - Citizen engagement
- **Hospitals**
- **Schools and universities**
- **Local government agencies (COG)**
- **CBOs**
- ***...the answer is ALL OF US.***



# The health of a community is more than this.



**“...no single sector alone  
has the capability  
to successfully pursue  
improving the health  
of a population...”**



*Institute for Healthcare Improvement  
Steifel, 2012*



*“Starbucks  
spends more  
on health care  
than they do  
coffee beans.”*



*Howard Schultz, CEO*



# **‘Community health’ and ‘population health’ must be considered in context.**

- A fundamental tenet of attention to the health of a population...or of a community...is to be mindful of the larger issues at play:
  - Poverty rates
  - Employment base
  - Access to safe neighborhoods, good schools, food to eat, and livable environments





# Population health? **HERE?** **REALLY?**

- We are starting WAY behind many other regions of California.
  - 47<sup>th</sup> out of 57 counties (County Health Rankings, 2014, University of WI)
- We are always at the wrong end of lists ranking air quality, childhood obesity, diabetes, teen pregnancy, and more.
- Folks entering our systems of care are sicker, with less access to primary care (if at all), and longer periods of time between health care visits (if ever).



# The Fresno Bee



## San Joaquin Valley Hospitals Filled with Diabetes Patients



*May 15, 2014*



**Take three times a day with food.**



Or with water.



# ***Yes. Here. Really.***

- **Care Transitions Collaboratives**
  - Fresno-Madera-Tulare-Kings, Kern
- **“Hot spots”**—Clovis Police/Fire
- **CHIP formation** (Hospital Council/Fresno County Department of Public Health)
- **Community needs assessments**
- **School health** discussions
- **Safe prescribing** initiative
- *...among others.*



# Is *anyone* doing it very well?

- **Community Health Improvement Partnership (CHIP)—San Diego**
  - Portfolio of projects
  - Target audiences
  - Measuring collective action
- **Community Health Action Team (CHAT)—Wisconsin**
  - Rural communities, kitchen tables, churches
- **Community Asthma Initiative (Boston)**
  - Geocoding/”hot spots”





**Traditionally, our community  
has measured progress...**



# How will we measure improved health going forward?

- It *cannot* be on how many grants we have received or how many consultants we hire to tell us we have poor air quality or overweight kids.
- Given our 'project portfolio,' identify specific, shared measurements; as examples:
  - Reduced 'missed school days' due to asthma
  - Reduced ER utilizations due to chronic disease 'mis-management'
  - Increased access to primary care interventions/increased number of physicians in the community
  - Fewer calls for EMS/police/fire response
  - More park space, safer neighborhoods, bus lines that run by a hospital
  - More grocery stores in zip codes w/o them





# And for each of us in the continuum...

- Strengthen our own individual capacities, competencies, and resources AND contribute to the 'whole'
  - Local government (cities, counties, planning organizations, LGC)
  - Hospitals: internal competencies, new job categories, as employers
  - Health care providers
  - Schools and universities
  - CBOs



**Our only chance is to row together.**







# What might we consider together?

*Let's take a closer look at:*

- Lessons from “*Valley Vision*”
- What we can learn from ‘hot spot’ mapping as it relates to community health and safety
- State and local land use policies dealing with the elements of a ‘healthy community’

