

# Population Health for Children: Changes in Practice and Payment Policy

Robert S. Kahn, MD MPH

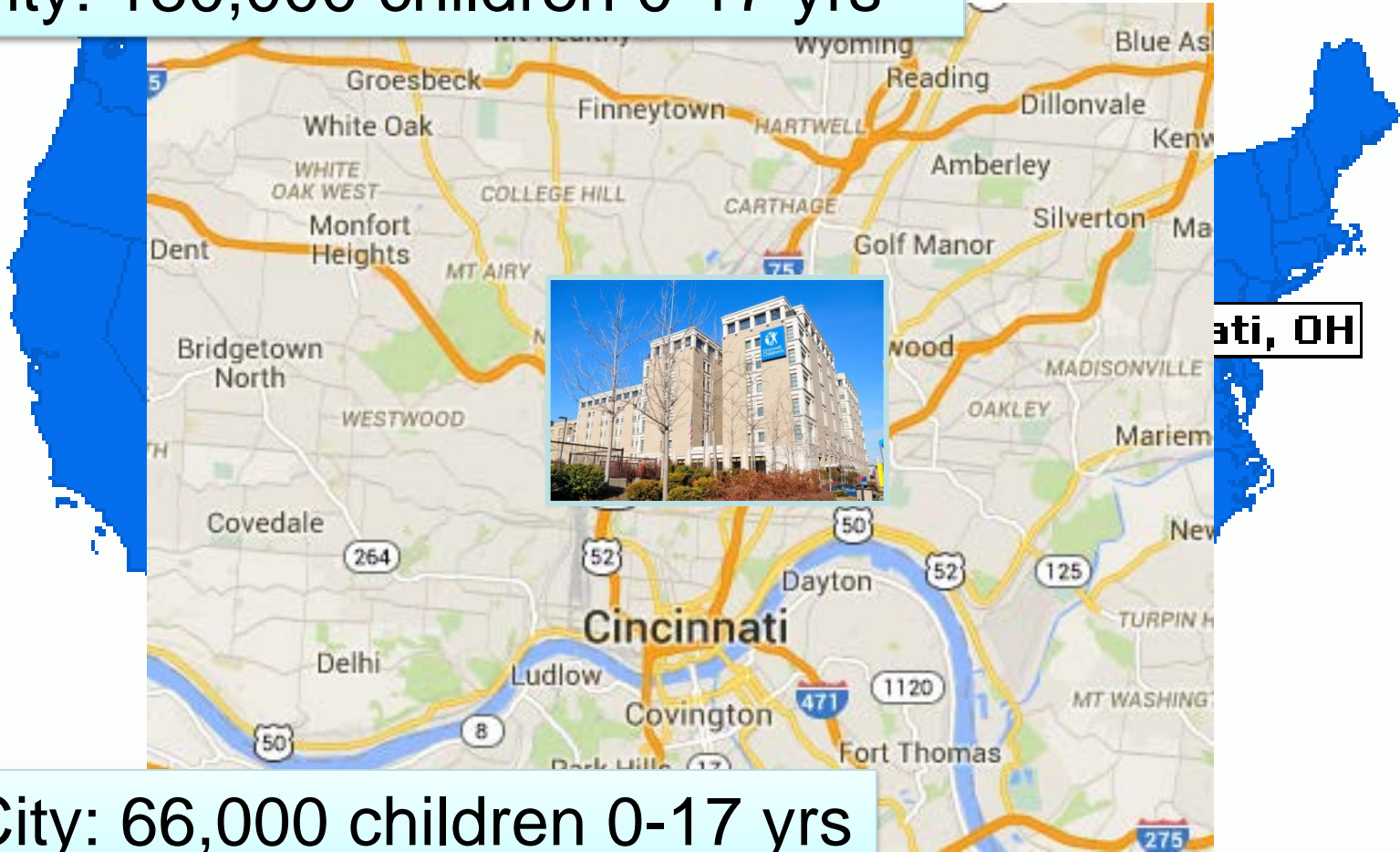
Cincinnati Children's Hospital Medical Center

INRICH 7<sup>th</sup> Annual Workshop

June 27, 2015

# Cincinnati, Ohio

County: 180,000 children 0-17 yrs



Cincinnati, OH

City: 66,000 children 0-17 yrs

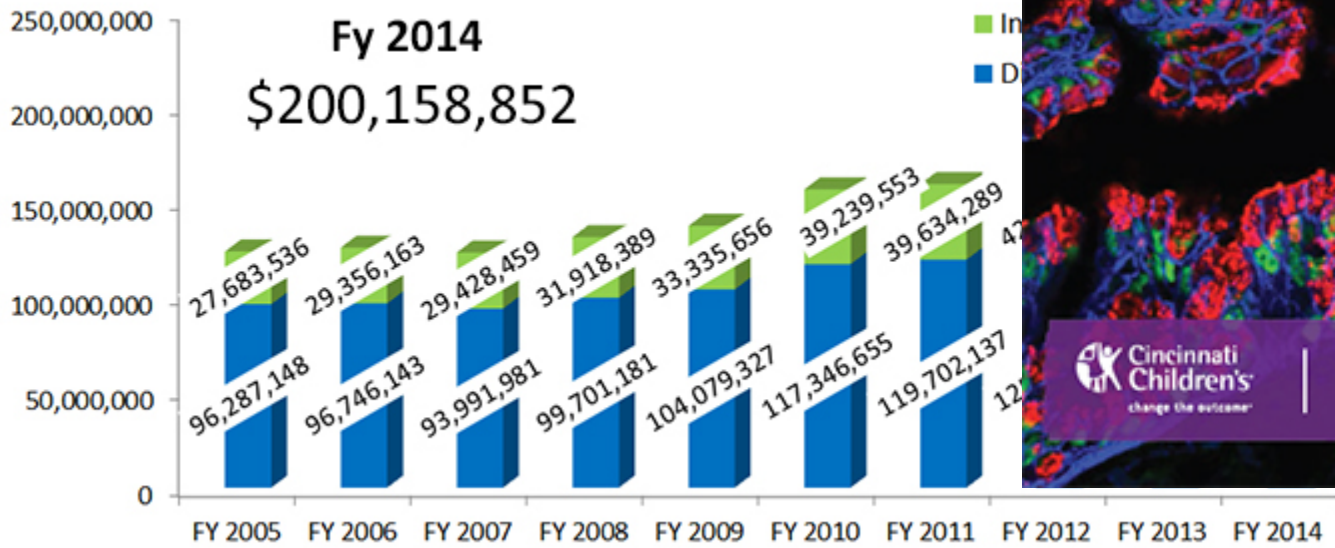
53% of children below poverty line

# Cincinnati Children's Hospital Medical Center (CCHMC)



**RANKED  
TOP 3 IN  
THE COUNTRY**

**BEST  
CHILDREN'S  
HOSPITALS**



**Cincinnati Children's**  
change the outcome™

**FILLING IN THE FUTURE**  
2014 Research Foundation Annual Report



# Cincinnati Children's Hospital Medical Center (CCHMC)

53 infants died  
by age 1

450 hospitalized  
for asthma

730 hospitalized  
for psychiatric  
conditions

>1100 not  
ready to learn  
at kindergarten



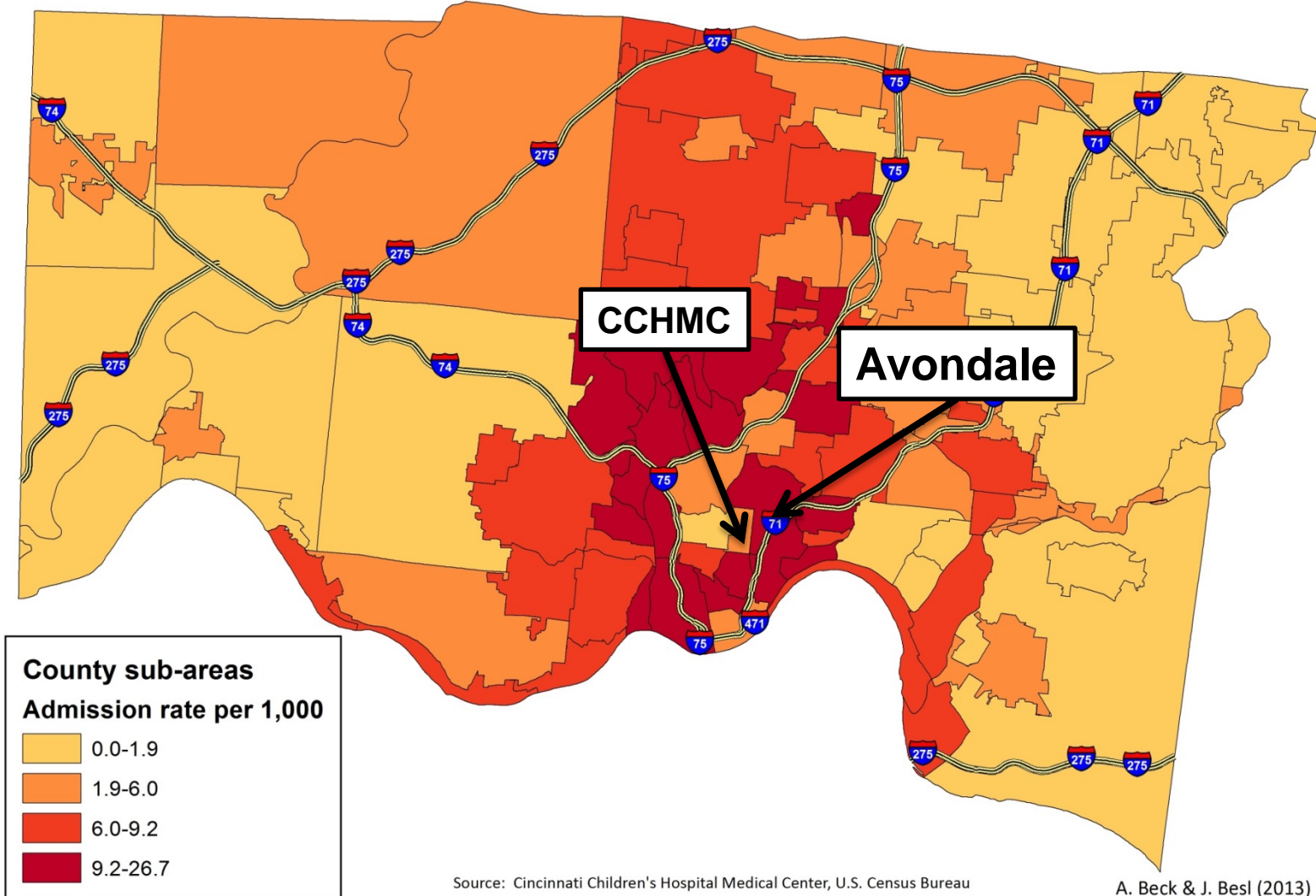
# Questions that we may need to answer

- **Urgency:** Can we create a sense of urgency about child health inequities?
- **Partnerships:** What is the production system for child health equity? Who are the right partners, and how do we build a reliable system?
- **Actionable data:** Can we use data to drive meaningful action? Can we move beyond descriptions and “hotspots”?
- **Co-creation:** Can we build services valued by the hardest to reach families?
- **Scale:** Can we get to scale?
- **Funding:** How do we fund transformation?



# Urgency

Asthma admissions to Cincinnati Children's Hospital, children ages 1-16, Hamilton County (2010-2012)

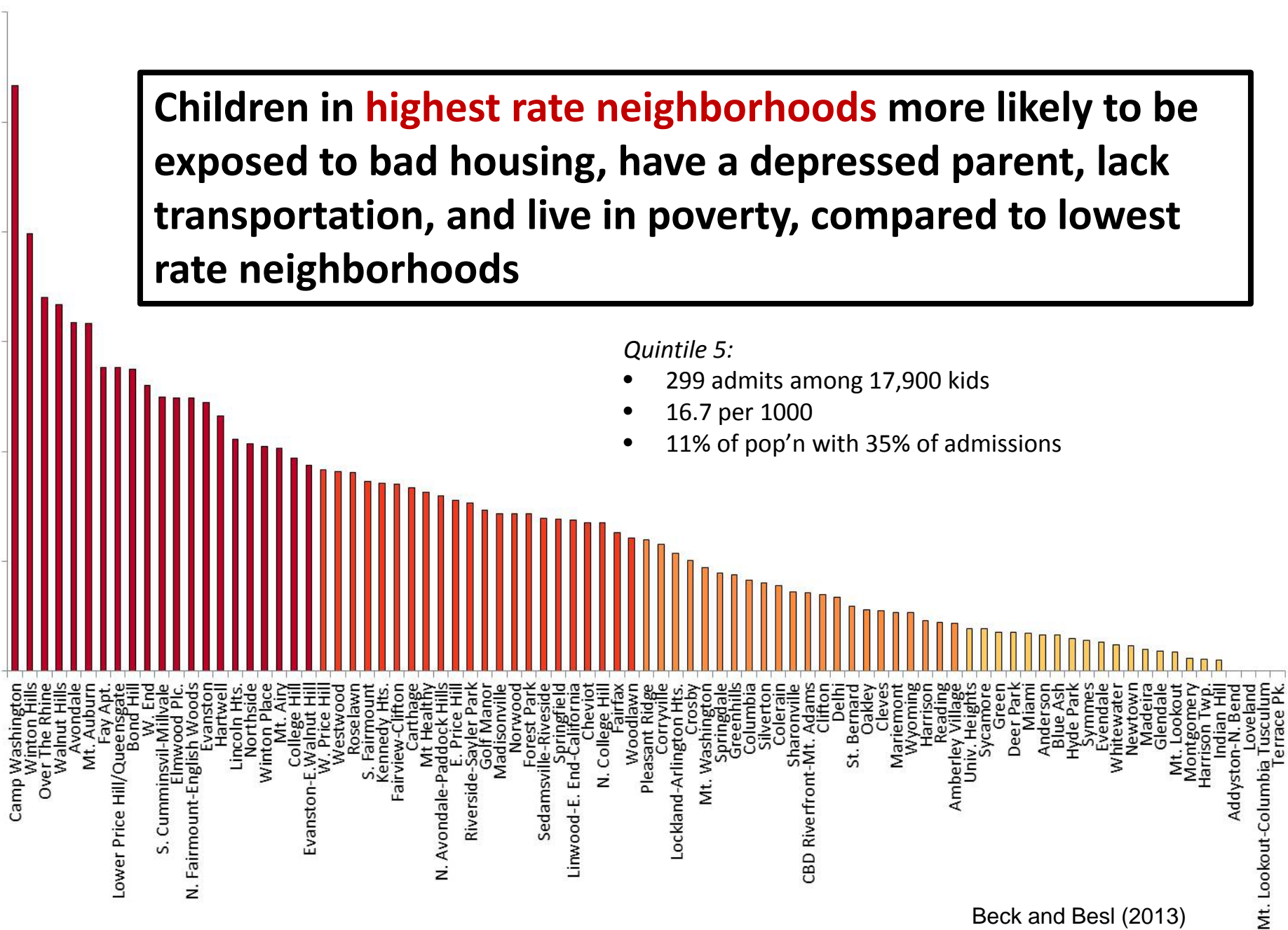


# Asthma admission rate per 1000 children, 3 year average (2010-2012)

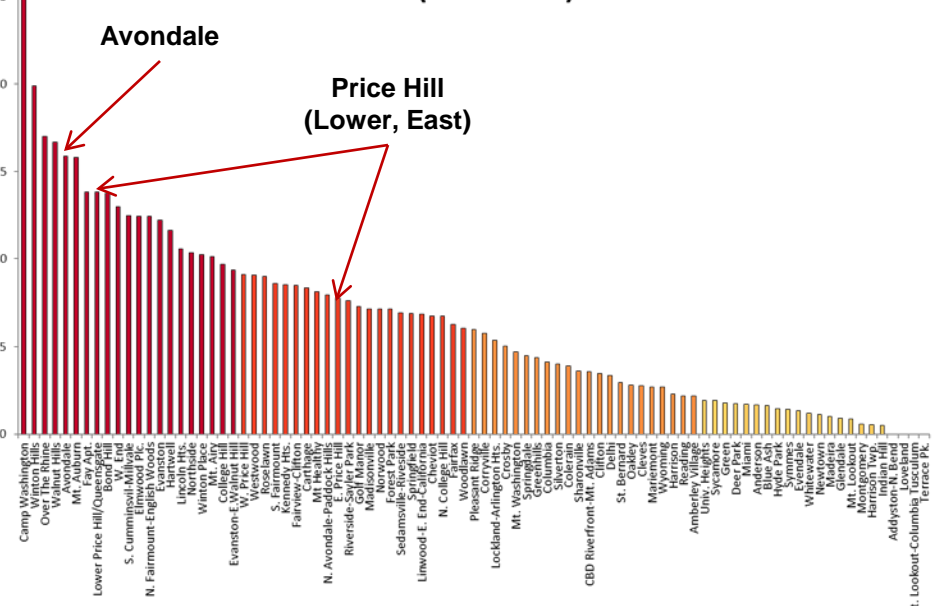
Children in **highest rate neighborhoods** more likely to be exposed to bad housing, have a depressed parent, lack transportation, and live in poverty, compared to lowest rate neighborhoods

## Quintile 5:

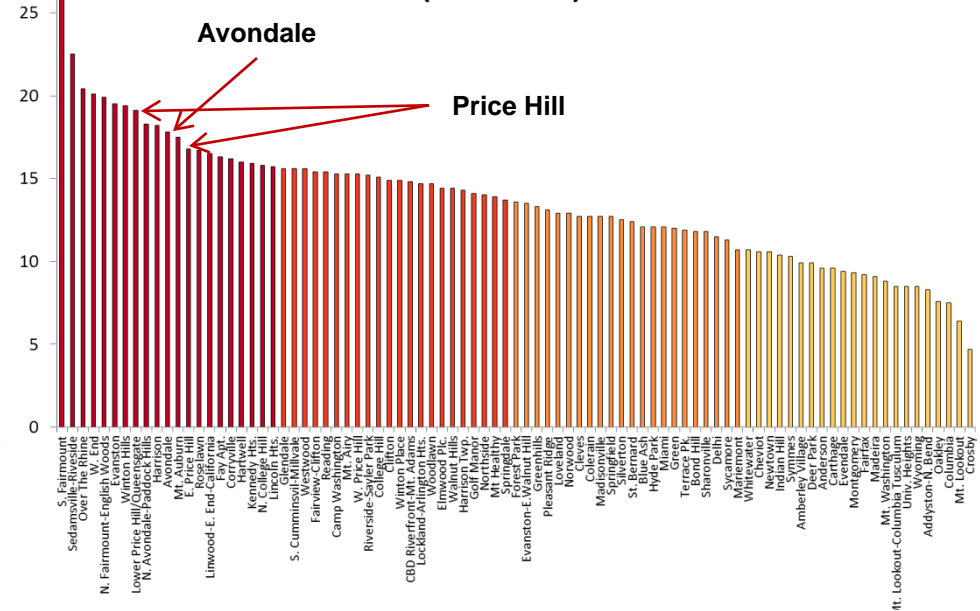
- 299 admits among 17,900 kids
- 16.7 per 1000
- 11% of pop'n with 35% of admissions



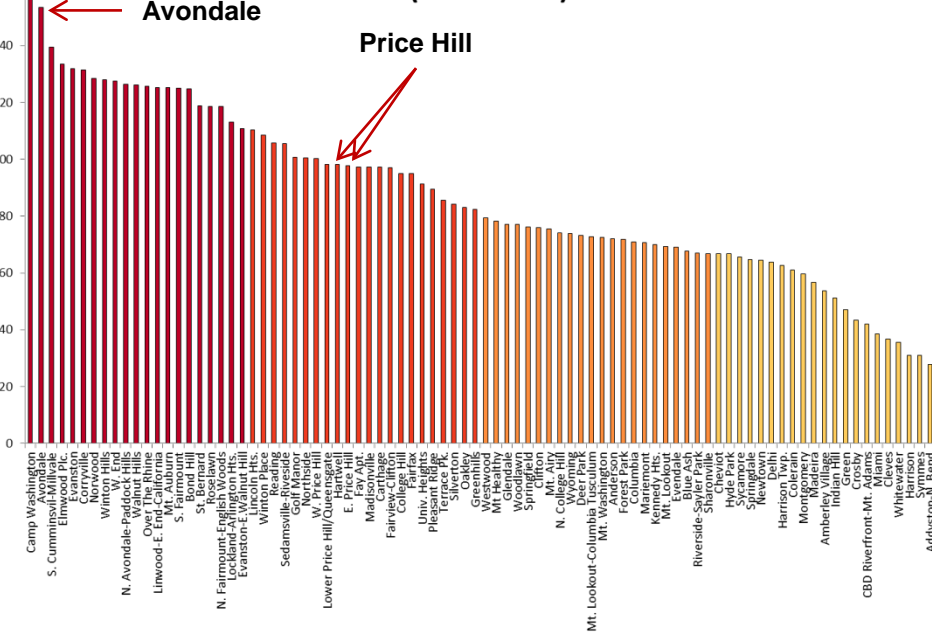
**Asthma admission rate per 1000 children 0-17 yrs (2010-2012)**



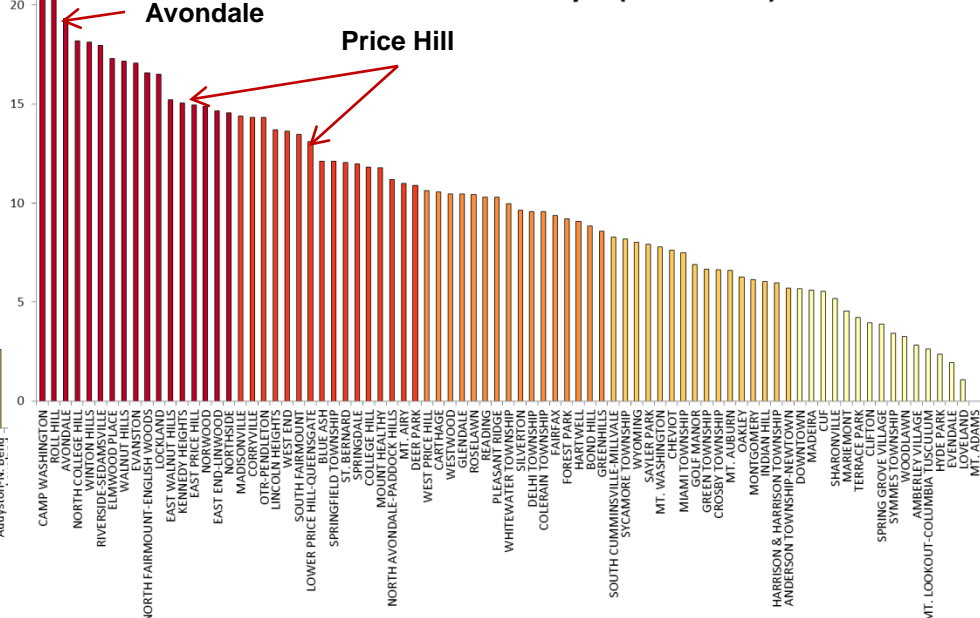
**Neighborhood Preterm Birth Rates per 100 births (2010-2012)**



**Neighborhood Injury rate per 1000 children aged 0-16 yrs (2010-2012)**

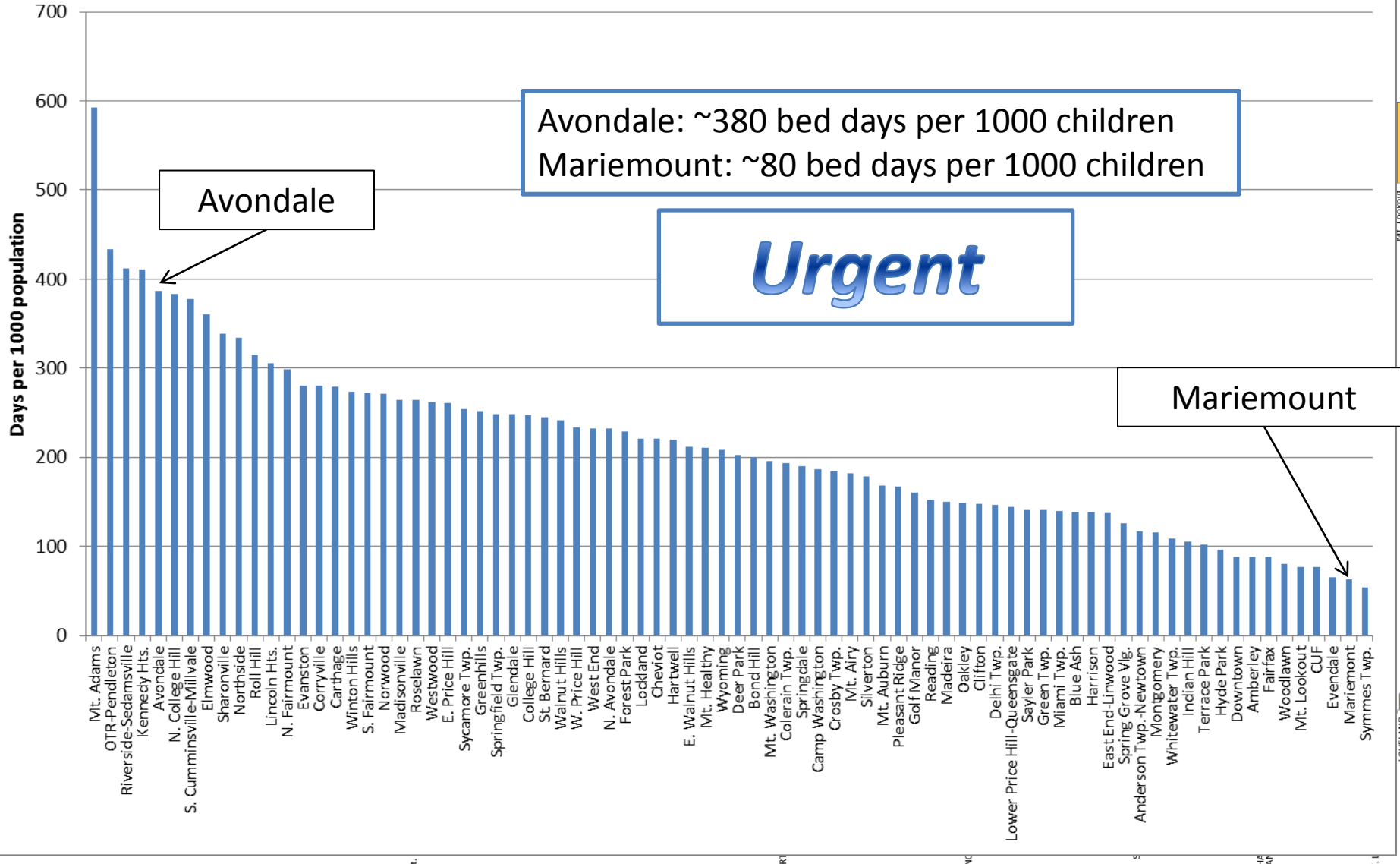


**Neighborhood Psychiatric Admission Rate per 1,000 Children 3 to < 18 yrs (2012-2014)**





**Neighborhood Average Annual Inpatient Days  
Per 1000 Population Age 0-18  
By Hamilton County Neighborhood  
(Average of 2012-2014)  
(Excludes Patients Whose Address is at JFS)**



Avondale

Avondale: ~380 bed days per 1000 children  
Mariemont: ~80 bed days per 1000 children

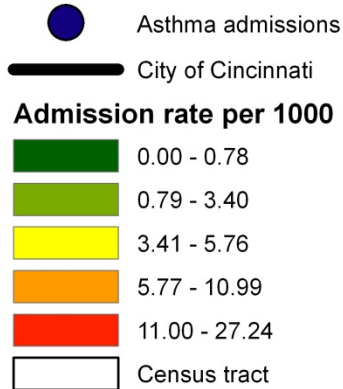
**Urgent**

Mariemont

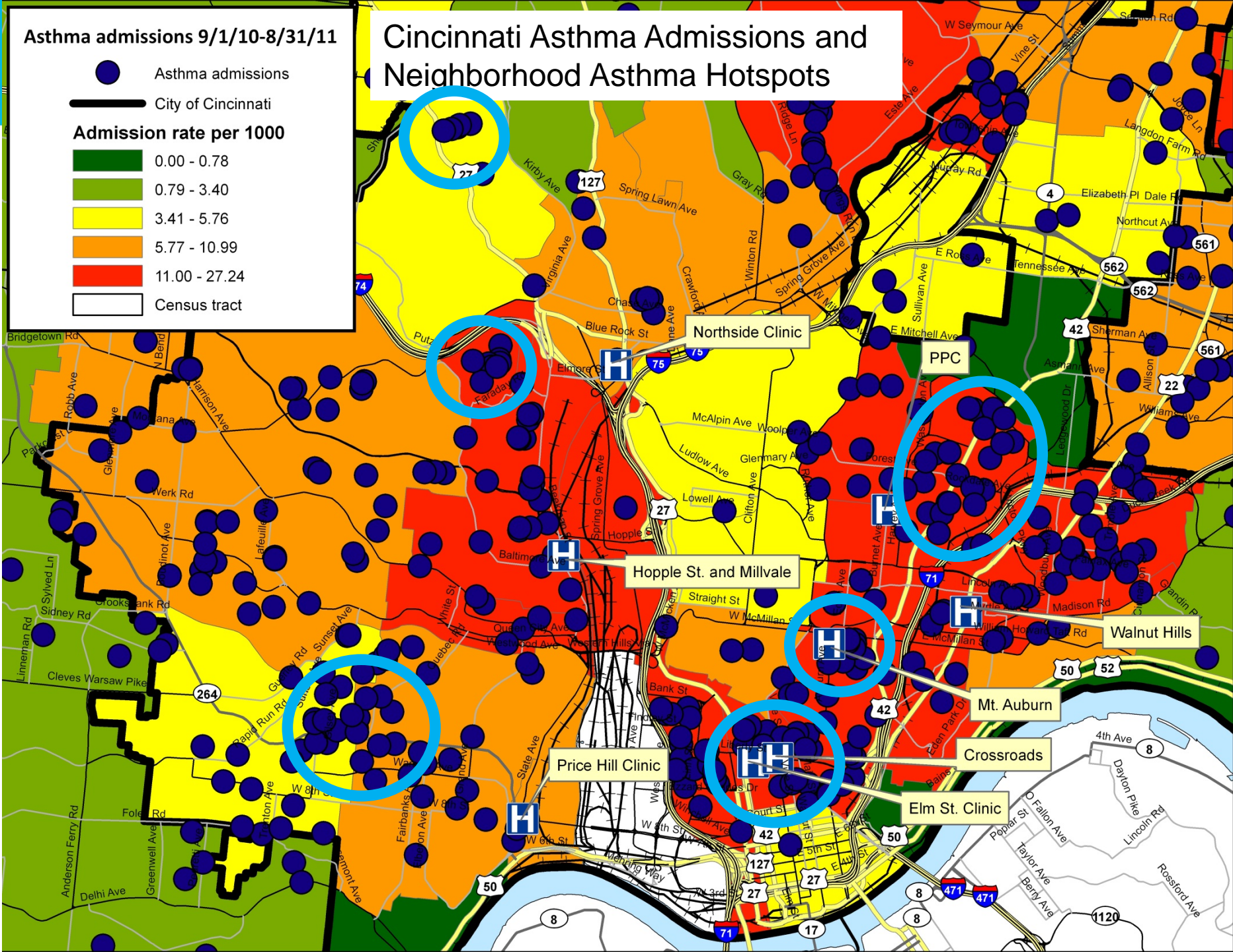
# Partnerships

- Care Coordinators
- Community Health Workers
- Home health care
- Pharmacies
- Cincinnati Public Schools, School Nurses
- Cincinnati Public Health Department
- Foodbank
- Job training
- *Legal Aid Society*

# Asthma admissions 9/1/10-8/31/11

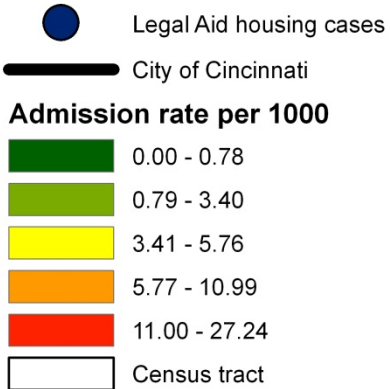


# Cincinnati Asthma Admissions and Neighborhood Asthma Hotspots

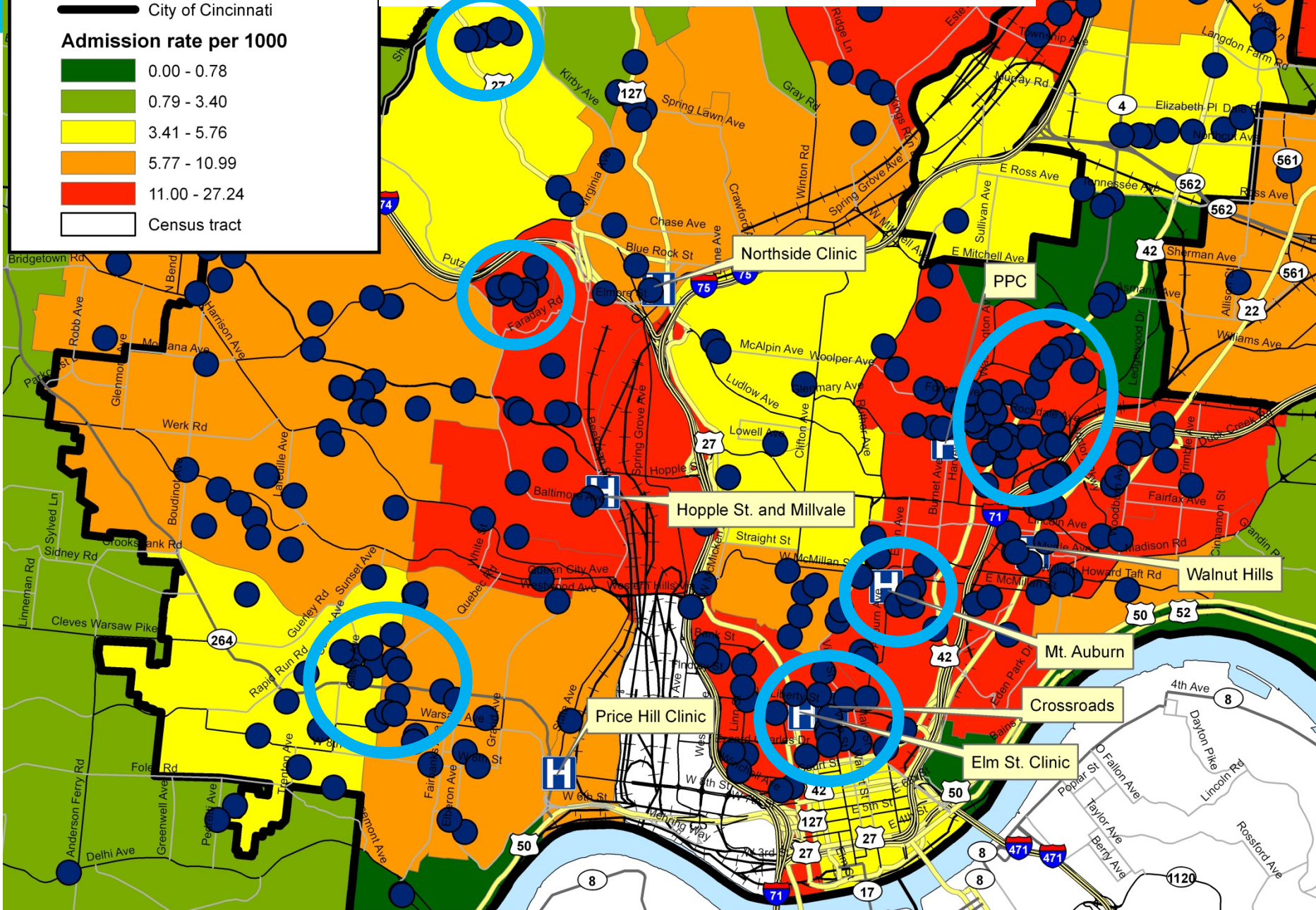




# Asthma admissions 9/1/10-8/31/11



# Legal Aid Housing Cases Mapped Against Neighborhood Asthma Hotspots





# Partnership re: housing with Legal Aid



## Keeping sick buildings from making children sick

SAVING AVONDALE

11:19 PM, Oct 24, 2012 | Comments

Recommend 17 people reco

Recommend 17 Tweet 2 +1 0

AA



Reginald Liddell, 10, left, and his younger brother, Jaylijah, 8, both suffer from asthma that was made worse by mold in their former Avondale home. / The Enquirer/Jeff Swinger

# PEDIATRICS®

OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

### Identifying and Treating a Substandard Housing Cluster Using a Medical-Legal Partnership

Andrew F. Beck, Melissa D. Klein, Joshua K. Schaffzin, Virginia Tallent, Marcheta Gillam and Robert S. Kahn

*Pediatrics*; originally published online October 22, 2012;

DOI: 10.1542/peds.2012-0769

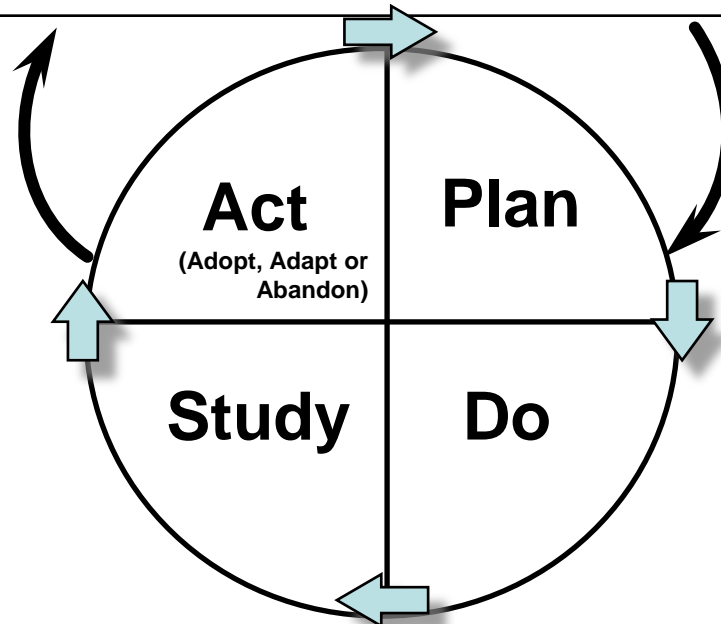
# Model for Improvement

What are we trying to accomplish? **AIM**

How will we know that a change is an improvement? **MEASURES**

What change can we make that will result in improvement? **IDEAS**

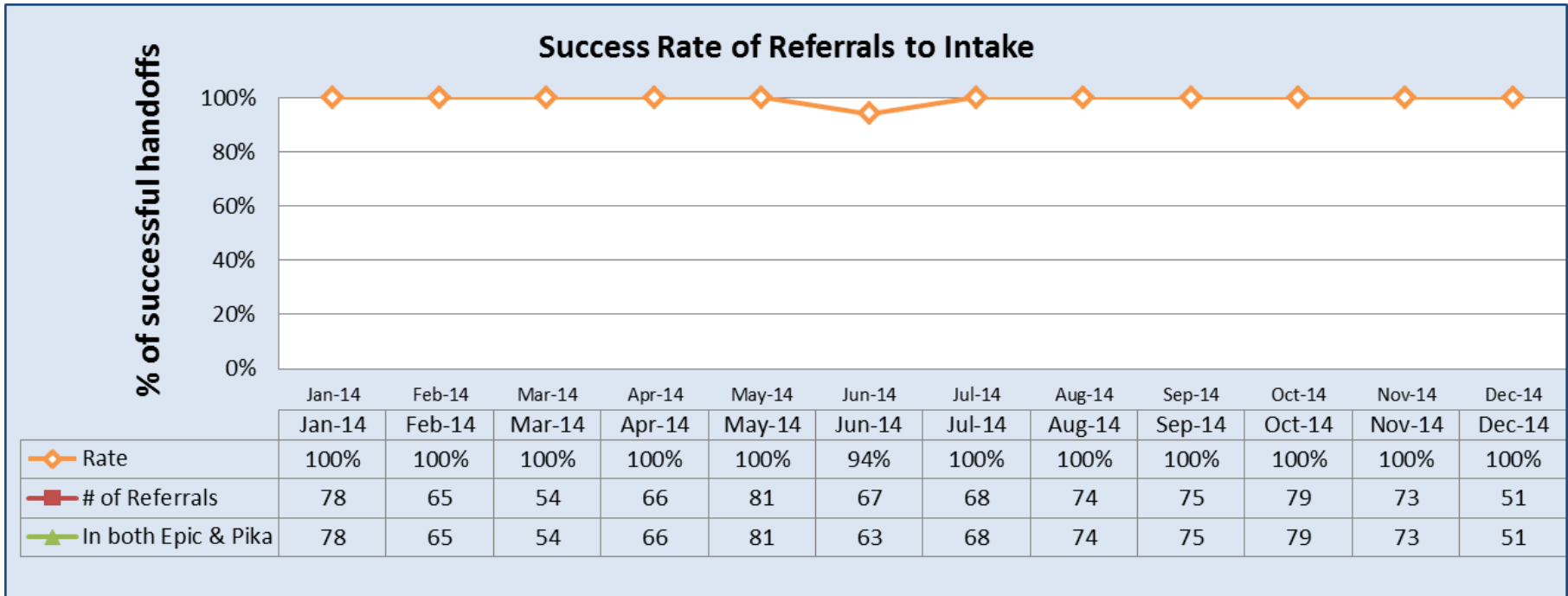
← **SMART**  
Specific  
Measurable  
Action Oriented  
Realistic  
Timely



Langley et al. 1996

# Building a reliable system

# Partnership through QI: Medical and Legal



# Partnership through QI: Medical and School RN's



## FY '12

- **<1%** CPS School RNs
- **METHOD:** One-off project with 1-2 RNs

## FY '13

- **5%** CPS School RN Trained in QI
- **METHOD:** 2 Teams in Rapid Cycle Improvement Class (120 days)

## FY '14

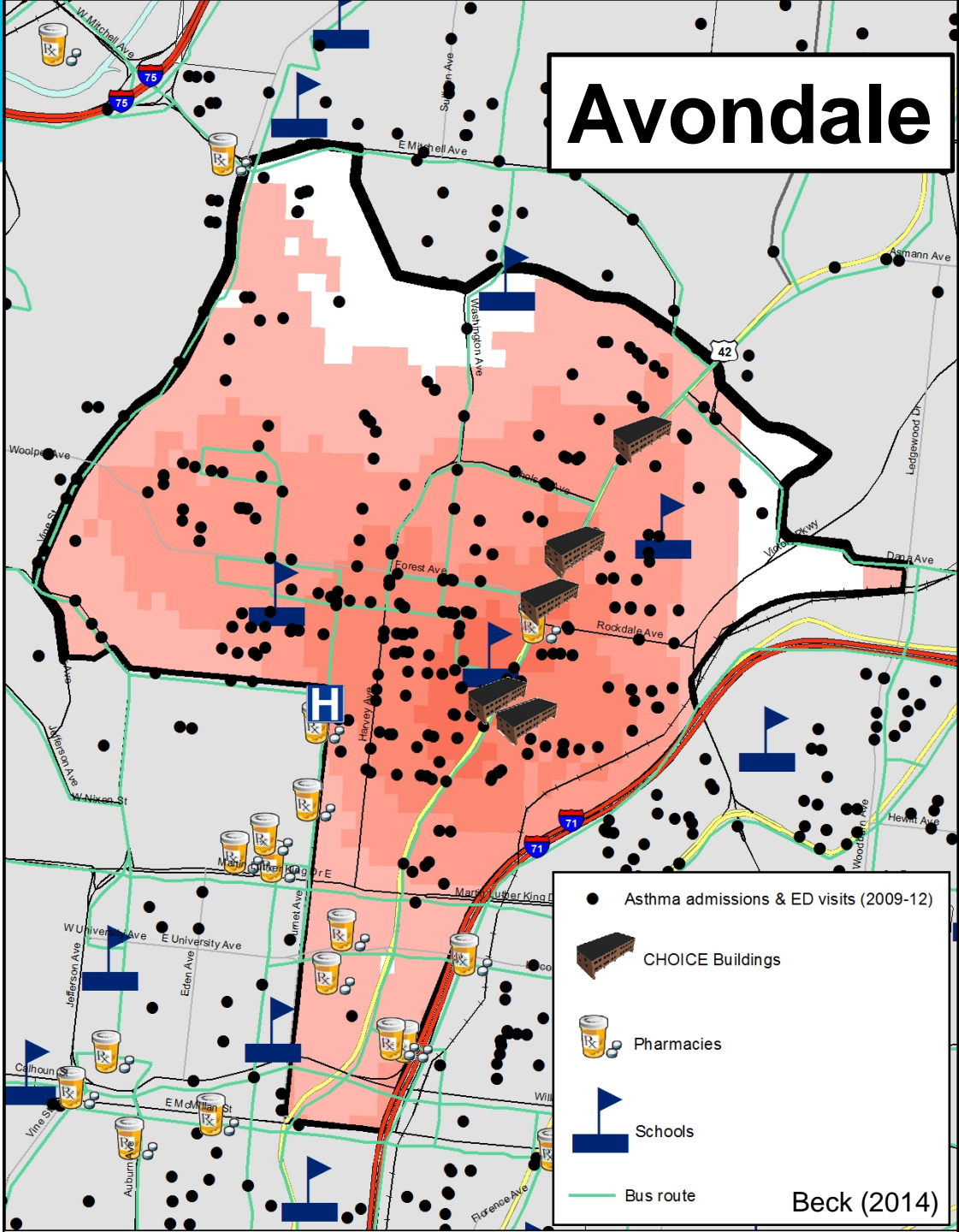
- **40%** CPS School RNs Trained
- **METHOD:** 1 Team in RCIC Class 13
- CCHMC-CPS Pilot mini learning collaborative

## FY '15

- **100%** CPS School RNs Trained (n=50)
- **METHOD:** Summer School RN Boot Camp
- Increase Learning in how to promote a "Asthma Friendly School"
- Co-Led Community-CCHMC Team working

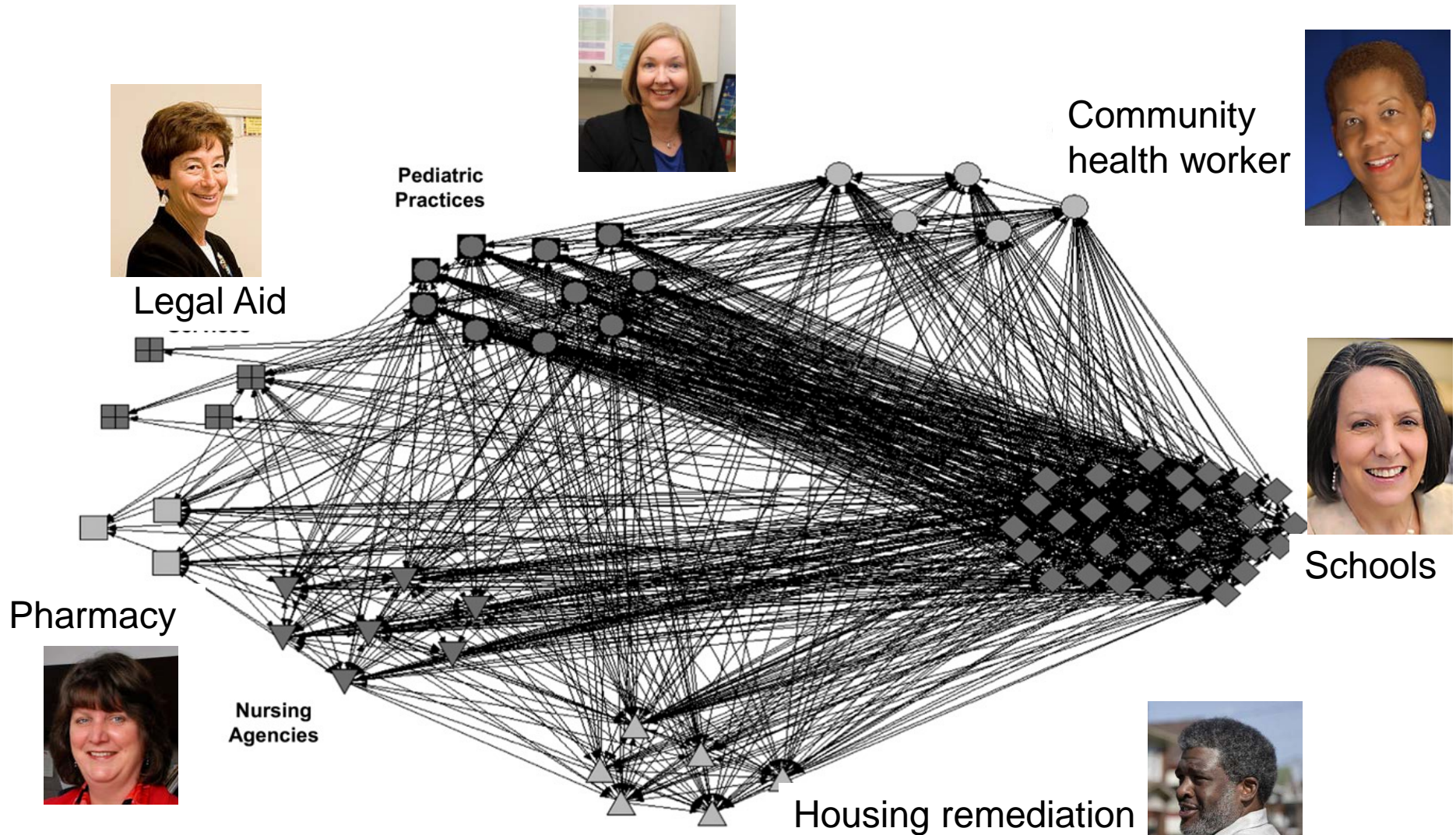


# Avondale



Beck (2014)

# Neighborhood network to produce health

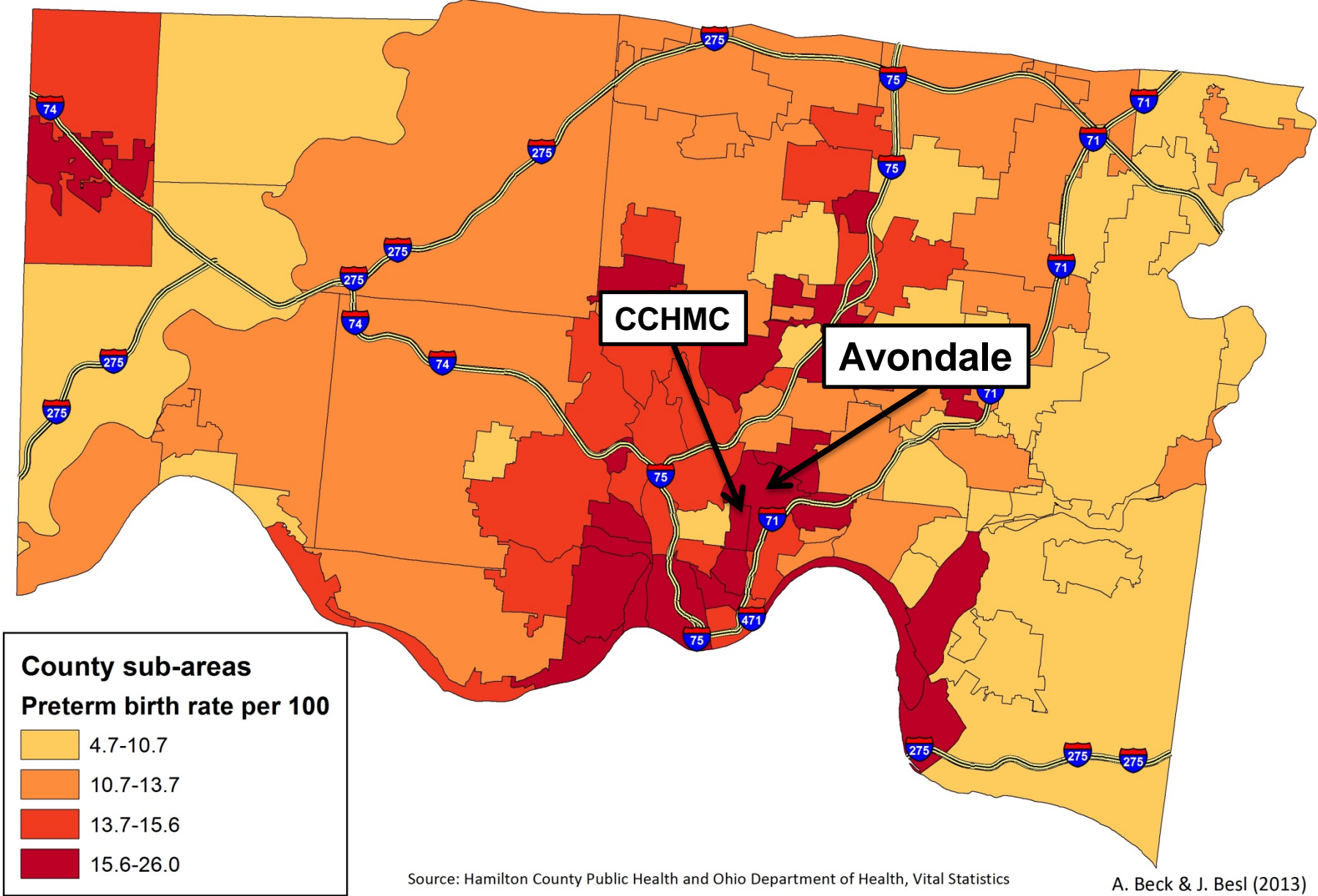


Agency Collaboration in the Care of Children with Complex Chronic Conditions. Nageswaran et al. Acad Ped 2012



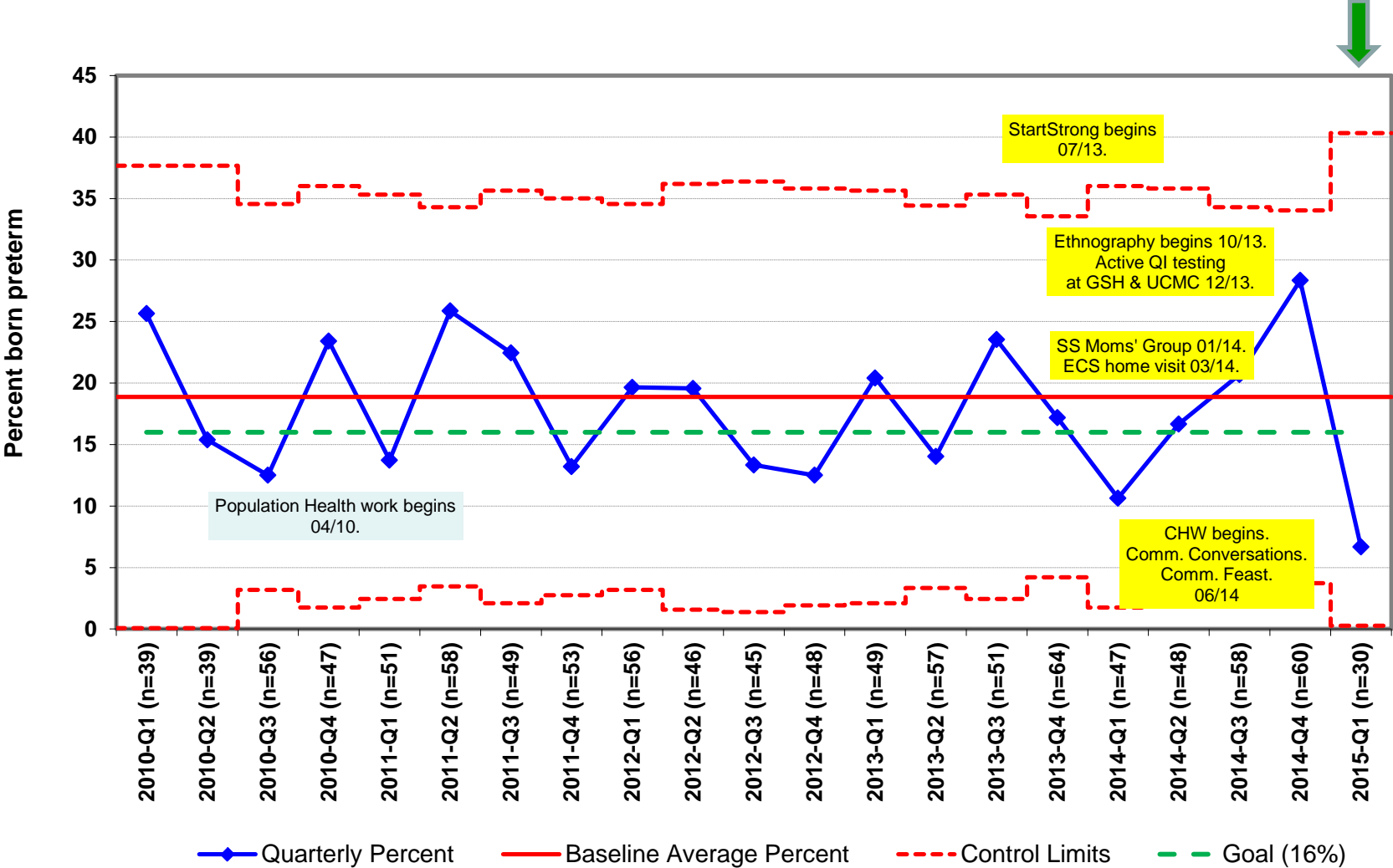


# Preterm birth rate, Hamilton County (2010-2012)



# Local Actionable Data

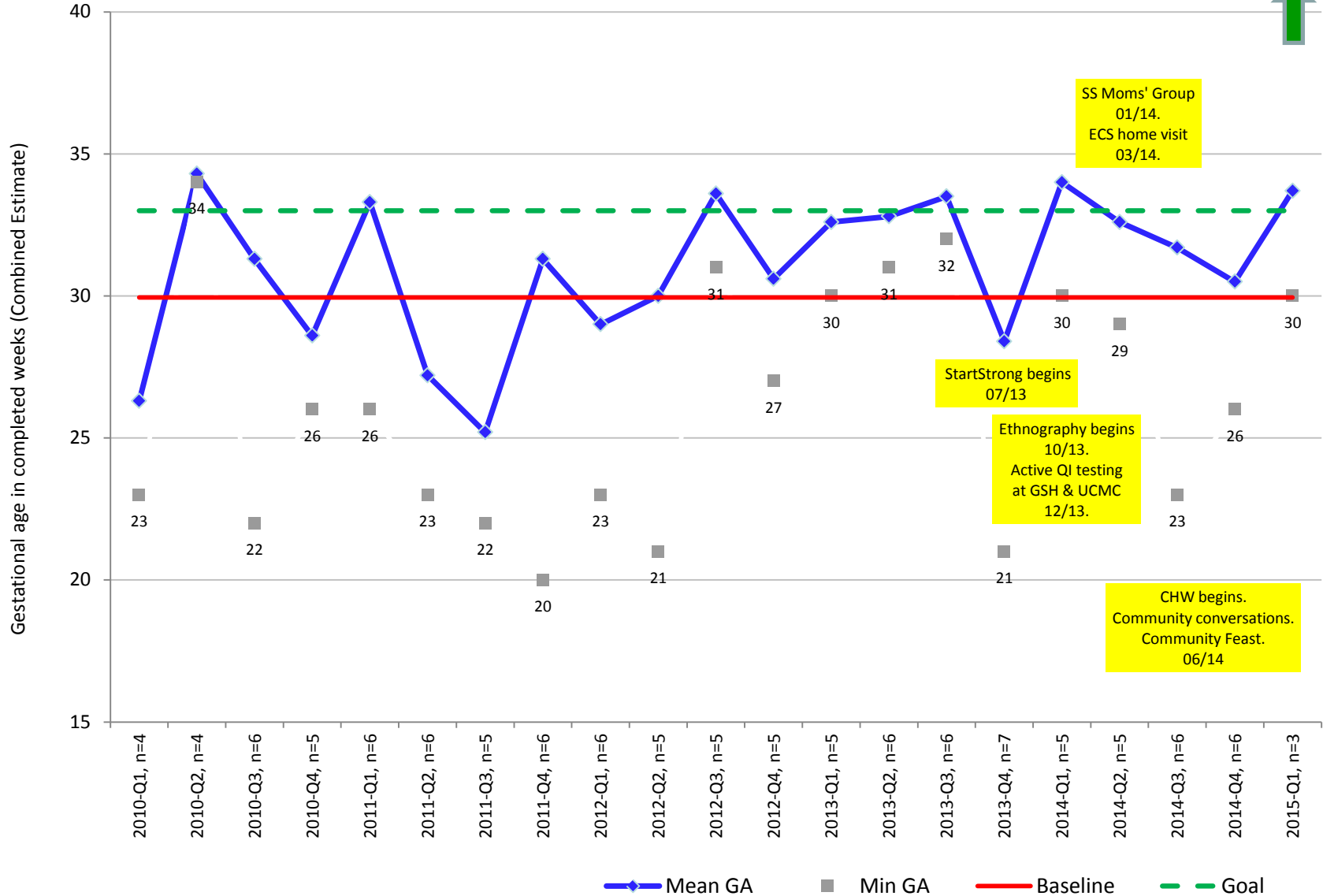
ZIP Code 45229 (Avondale) resident preterm births, by quarter, 2010-2015  
(Combined estimate of gestation <37 weeks)



Source: Hamilton County Public Health. Updated by J. Besl 4/6/15



## Mean and Minimum Gestational Age among 10th percentile of ZIP Code 45229 (Avondale) resident births, by quarter, 2010-2015



# KEY DRIVER DIAGRAM

## GLOBAL AIM

Improve maternal and infant health outcomes and care at substantially reduced cost

EARLY, SUSTAINED, VALUED EVIDENCE BASED PRENATAL CARE FOR EVERY MOM

## SMART AIM

Reduce preterm births in Avondale by 10% by June 30, 2016

EARLY, ACCESSIBLE, VALUED AND COORDINATED CARE IN THE COMMUNITY

ACTIVATED MOTHERS SUPPORTED BY ENGAGED COMMUNITIES

TIMELY VALUED SERVICES THAT REDUCE HARDSHIPS

# Co-Creation: Design with families



## FUTURECASTING

The ability to imagine one's self in the future, and discover the proactive steps necessary to get there

## TRUSTED KNOWLEDGE

Quality information that is qualified and delivered by a trusted source, making it relevant, tangible, and actionable

## COMMUNITY LOVE

The strong, social network that provides resources, knowledge, advice, and support;

## PERSONAL POWER

The ability to advocate for one's self, feeling confident that your decisions will lead to beautiful outcomes.

# Scale: Successful Learning Networks

## Care Network

## Goals

## Outcomes

### CF Care Network

- Drive adherence to CF treatment regimens and improve life expectancy

- Rate of improvement in life expectancy increased (7 years added)

### ImproveCareNow

- Improve care in pediatric inflammatory bowel disease

- % remission from 50% to 80% in 5 years. No new drugs

### Ohio Solutions for Patient Safety

- Reduce pediatric adverse events

- 60% reduction in surgical site infections
- 34.5% reduction in AEs
- Saved >7,700 children from unnecessary harm, \$12.3m in unnecessary costs



Reduce pre-term births

- 30,000 births shifted to 39-41 wks

- \$36m savings in 4 years

- % pre-term births on steroids up from <30% to 75%

Improve care of asthma patients

- % patients receiving “perfect care” from 5% to 90% in <4 years

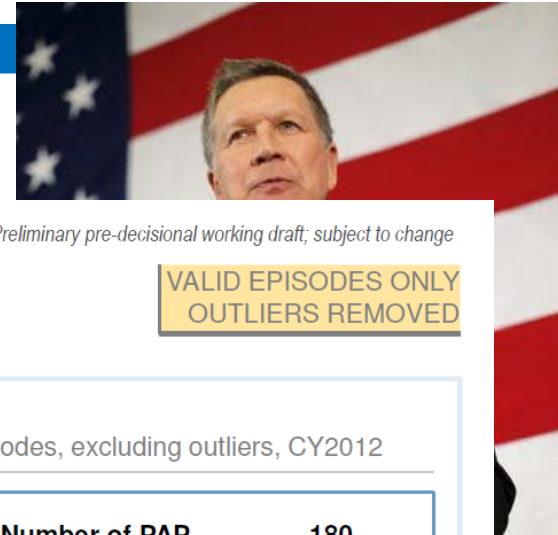
- 50% reduction in asthma related admissions



# Funding: Payment reform

## Shift to population-based and episode-based payment

Payment ap



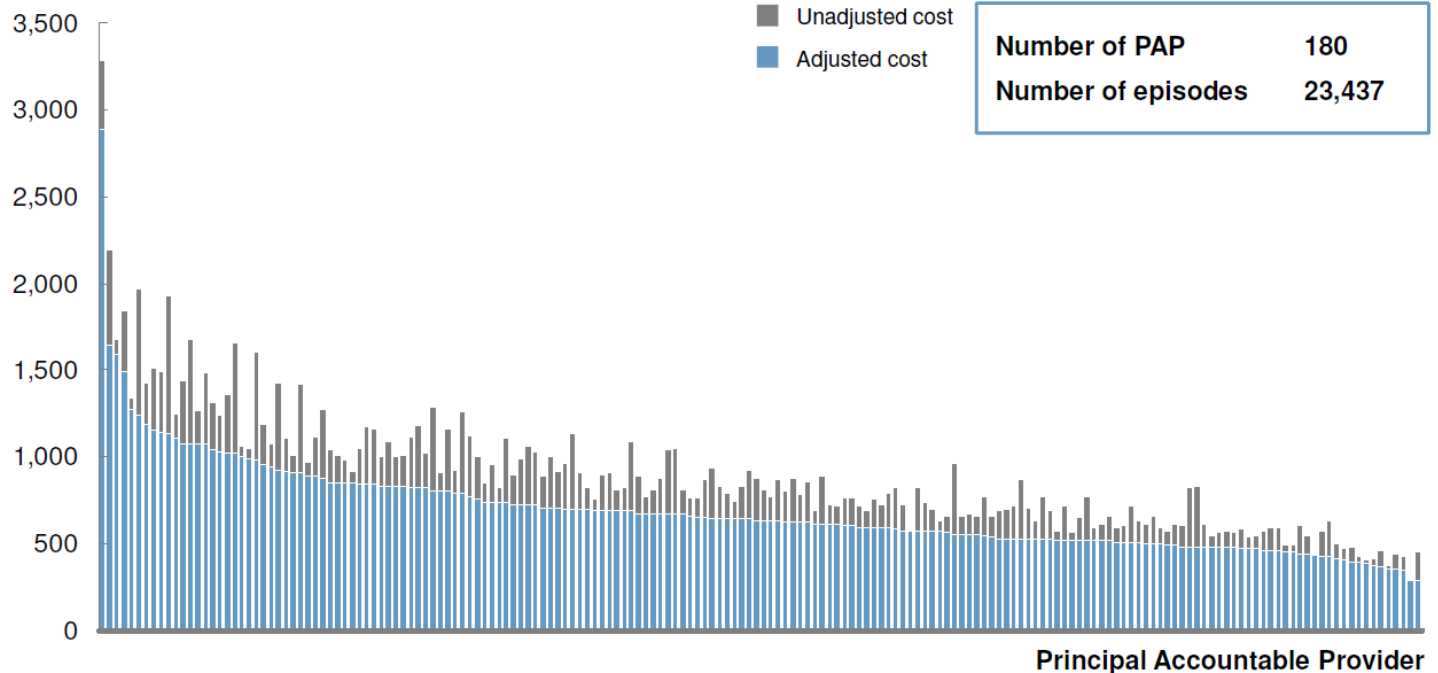
Preliminary pre-decisional working draft; subject to change

VALID EPISODES ONLY  
OUTLIERS REMOVED

### 6 Impact of risk adjustment

#### B Asthma acute exacerbation provider spend distribution

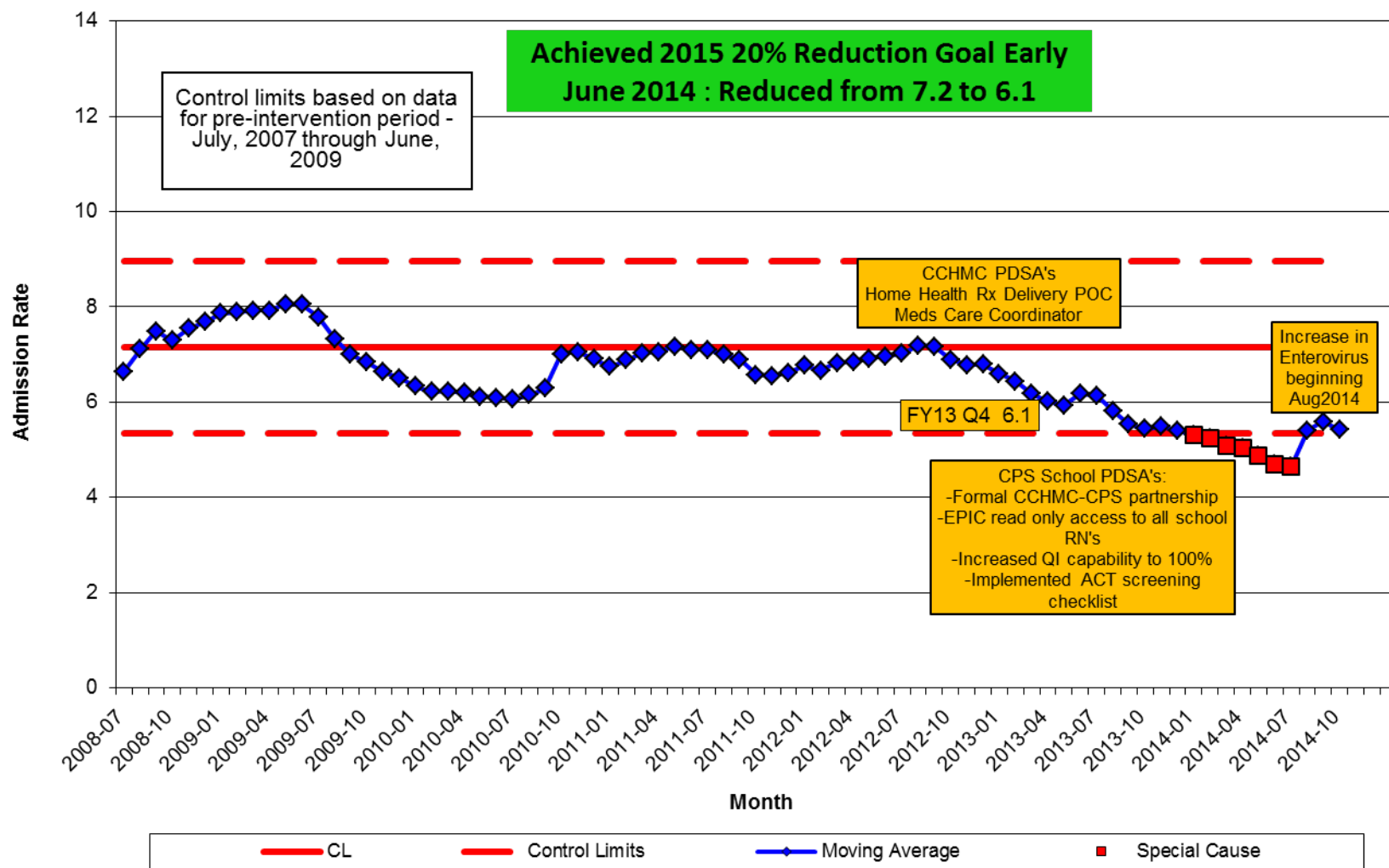
Unadj. / adj. avg. episode spend per provider<sup>1</sup> in USD, providers w/ at least 5 episodes, excluding outliers, CY2012



# Asthma: Reduce use of the ED and inpatient services by 20% in children with asthma covered by Medicaid - Mansour, Kercksmar



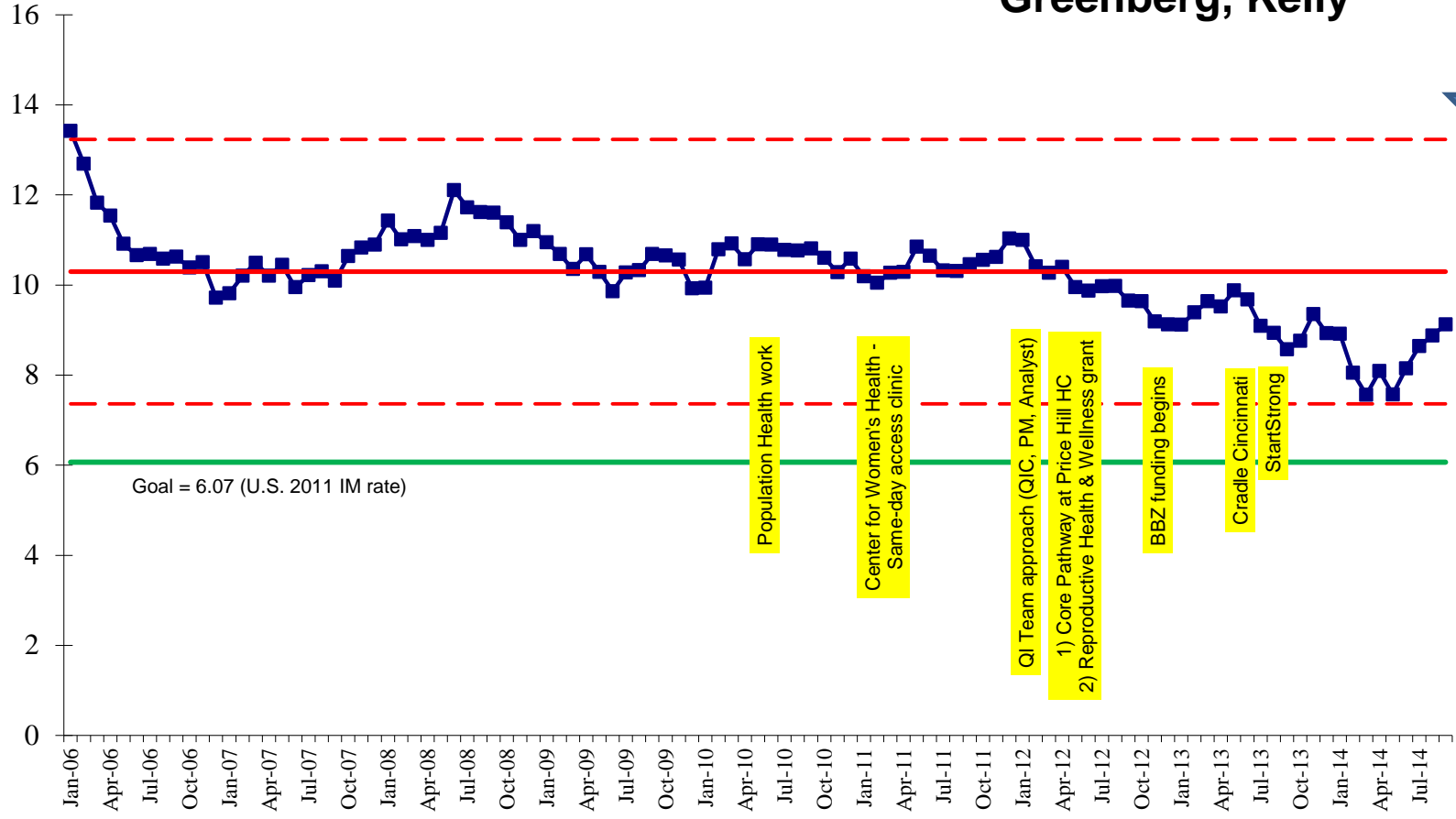
Rolling 12 Month Average Number of Admissions per 10,000 Hamilton Co. Medicaid Patients age 2 through 17 years old



# Hamilton County Infant Mortality Rate 12-month moving average

**Greenberg, Kelly**

Infant Deaths per 1,000 Live Births

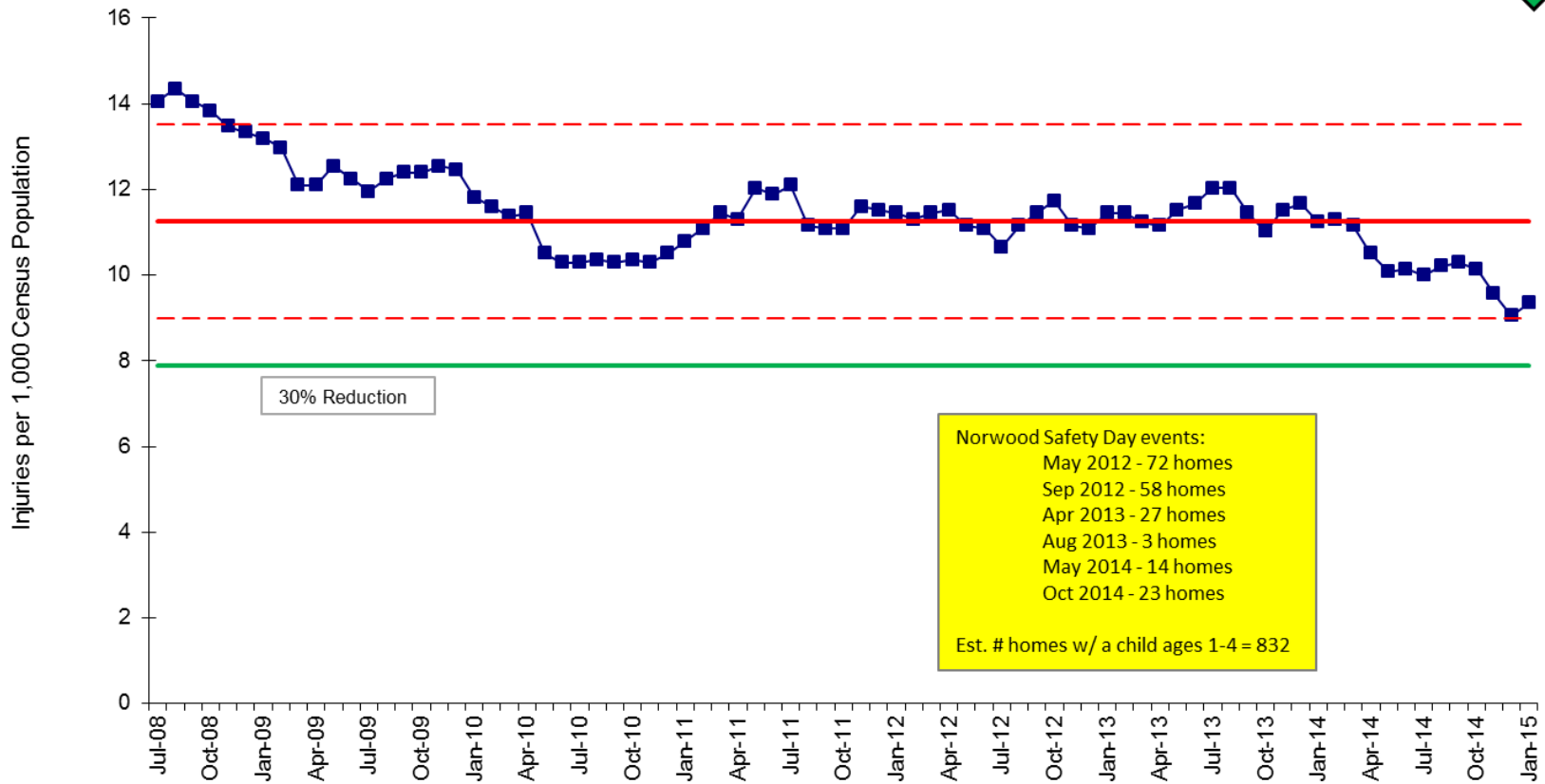


Note: Moving Average (MA12) Control Charts - ONLY POINTS OUTSIDE OF THE LIMITS DESIGNATE SPECIAL CAUSE

■ 12-Month Moving Average   
 - - - UCL   
 — Baseline (Jan06-Dec07)   
 - - - LCL   
 — Goal



## 12-month Moving Average of Monthly Rate - All Mechanisms, ages 1-4, ZIP Code 45212 (Norwood)



\*\*\*Note: Moving Average (MA12) Control Charts- ONLY POINTS OUTSIDE OF THE LIMITS DESIGNATE SPECIAL CAUSE

■ 12 Month Moving Average-Norwood    - - - UCL    — Baseline (Jul2008-Jun2010)    - - - LCL    — Goal

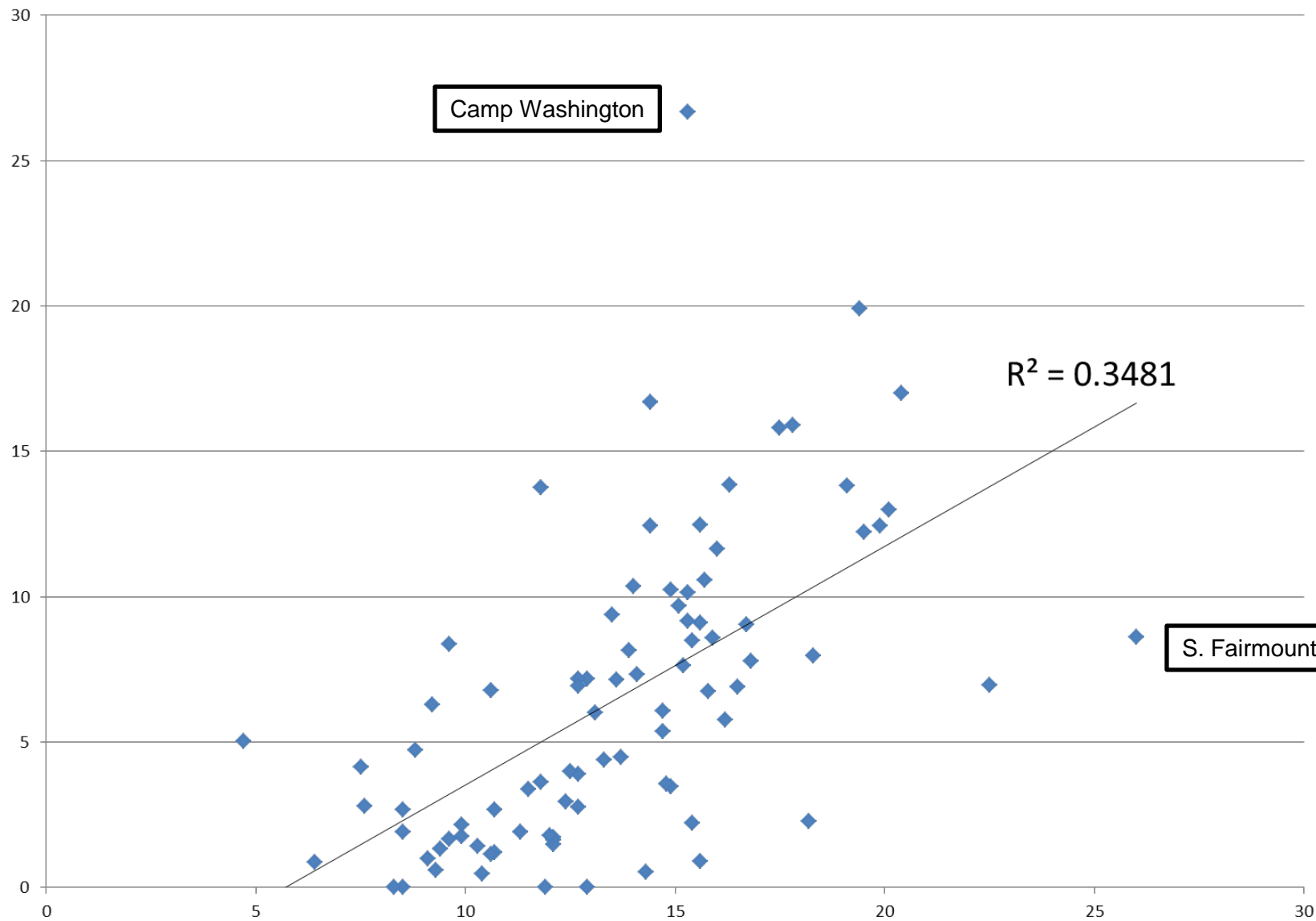
Source: CCHMC Trauma Registry and 2010 Census. Updated by J.Besl 2/12/2015.  
Note: Denominator for rate calculation is 1,150, the 2010 Census population at ages 1-4.

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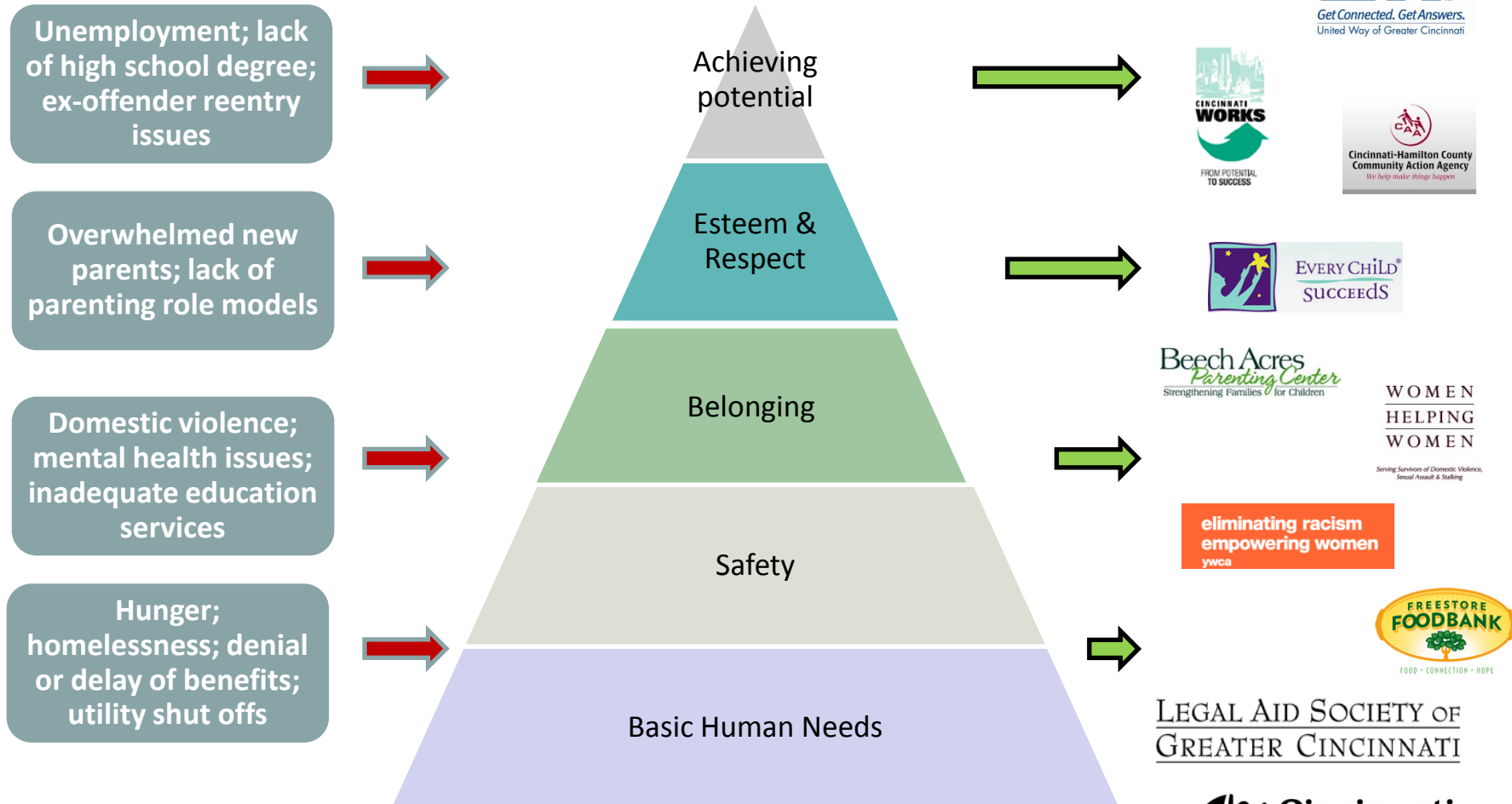
## X-axis is Preterm Birth Rate; Y-axis is Asthma Admission Rate



## Social Determinants a Clinic Will Detect

## Maslow's Hierarchy of Needs

## Potential Collaborations



# Using EPIC to drive social history screening

Social/Environmental (Questions to ask family during visit)

Child lives with

\* Are you having problems receiving WIC food stamp, daycare vouchers, medical card, or SSI?

\* Housing problems (overcrowding, roaches, rodents, utilities, mold, lead)?

\* Threatened with eviction or losing your home?

\* Over the past 2 weeks, have you felt down, depressed or hopeless?

\* Over the past 2 weeks, have you felt little interest or pleasure in doing things?

\* Do you feel that you and/or your children are unsafe in your relationships?

\* Would you like to speak with a social worker or legal advocate in the clinic about these issues?

**Benefits**

**Housing**

**Depression**

**Domestic Violence**

**All others**