### Improving the Health of the Communities We Serve: Harnessing Data to Achieve Population Outcomes

Winston F. Wong, MD, MS Medical Director, Community Benefit Kaiser Permanente July 12, 2011



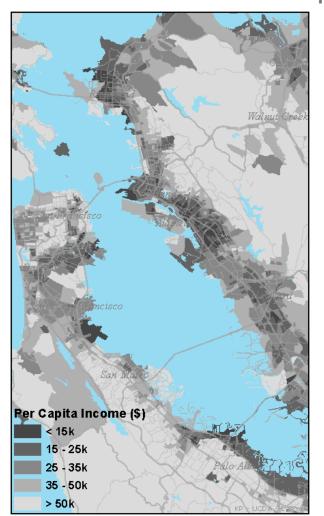
#### **Patients are part of communities**

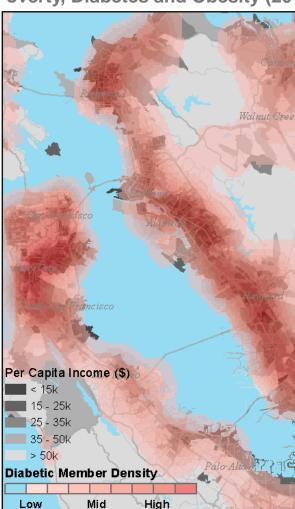
#### Social and Economic Factors

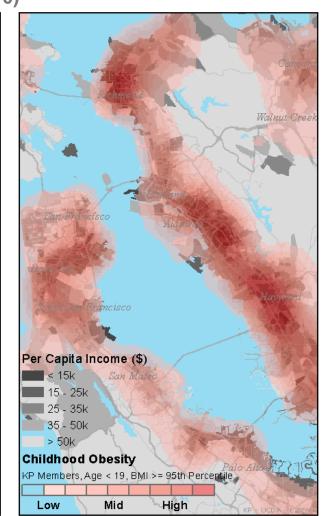
Education/LiteracyEmployment

• Income

- Community Safety
- Early Childhood
- Race and Ethnicity
- Family and social support
  - San Francisco Bay Area Kaiser Permanente Members Poverty, Diabetes and Obesity (2010)

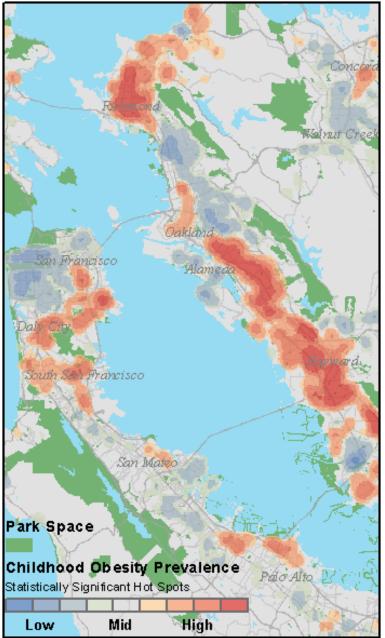






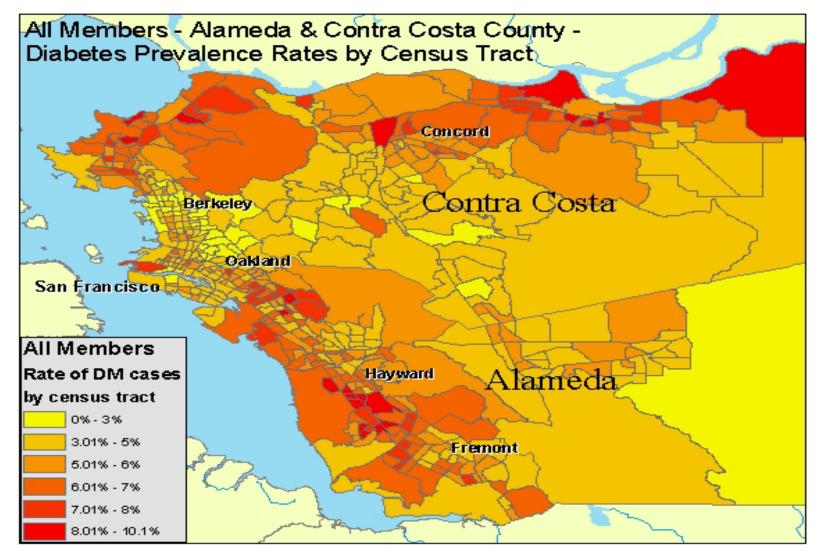
### Communities and Environment shape the health of patient

San Francisco Bay Area Kaiser Permanente Childhood Obesity and Park Space (2010)



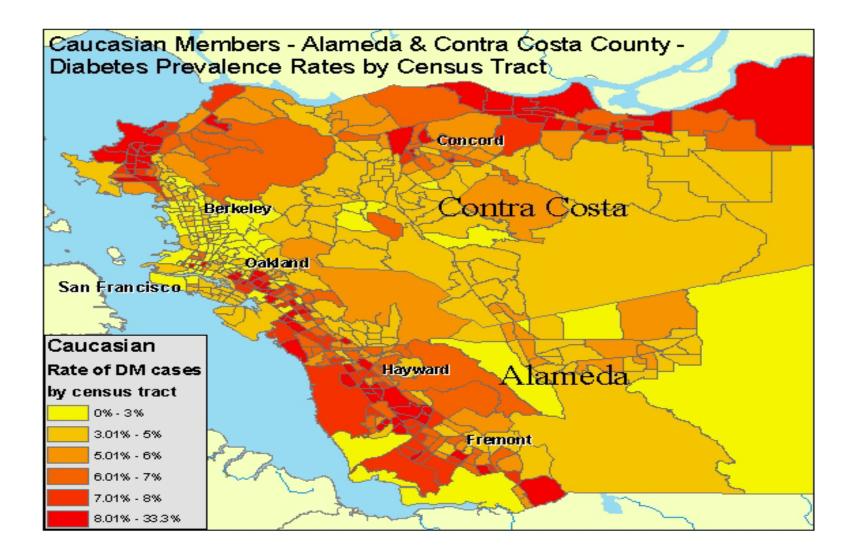
KAISER PERMANENTE 3

### **Diabetes** affect our members differently depending where they live



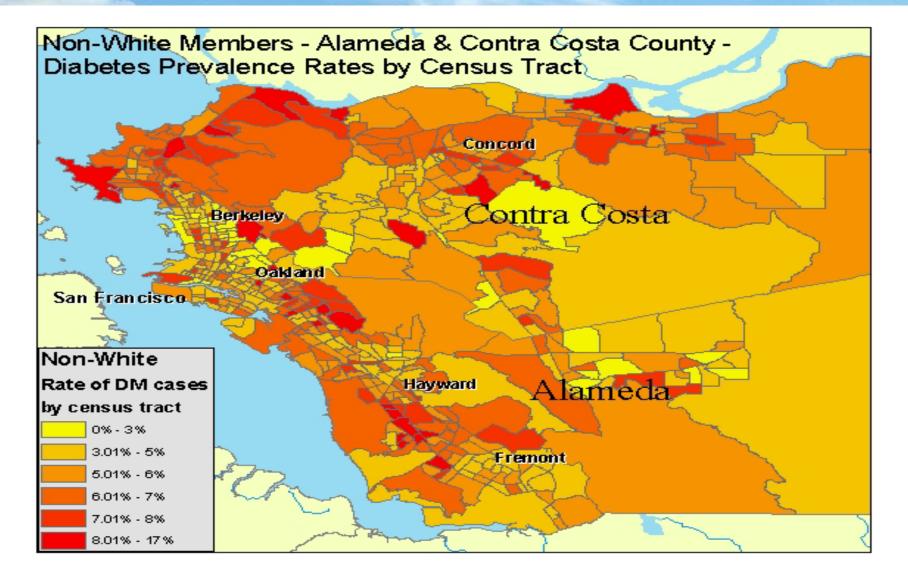


#### KP has the capacity to map diabetes by R/E





### Non-white DM members are more likely to live in communities with lower resources



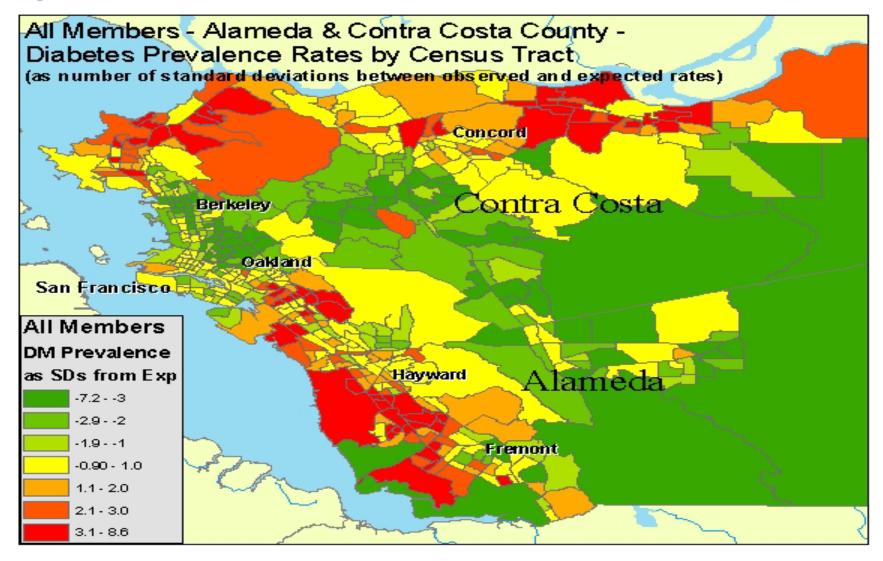


## A more sophisticated map confirms the same disparity pattern

- The above maps are not bad, but there is a potential problem with just looking at prevalence rates by census tract. For tracts with few members, prevalence rates can easily be very high!
- A solution is to ask the question
  - Does diabetes prevalence in each census tract differ from the overall prevalence for both counties?
- To answer this question
  - Assume the prevalence of diabetes is evenly distributed across race/ethnicity and geography in these two counties.
  - > Calculate the standard deviation around the expected rate for each tract.
  - The difference between the observed and expected rate divided by the standard deviation can be thought of as test statistic for determining if the observed rate is significantly different from the expected rate.
  - This test statistic (called the "standardized deviation" here) can be used to shade the tracts, highlighting where there are more diabetes cases than expected.
- The following maps use this "standardized deviation", which is just the number of standard deviations between the observed rate and the expected rate.

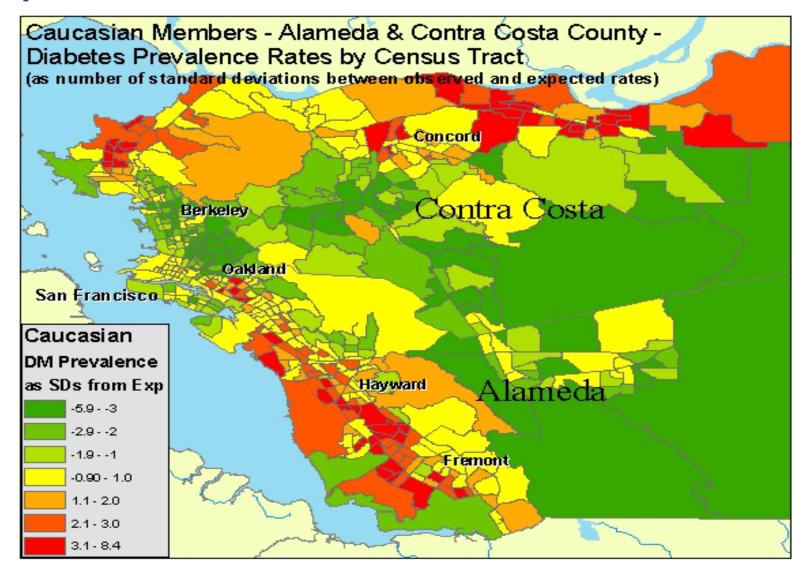


#### **Deviation of census tract prevalence from expected – All KP members**



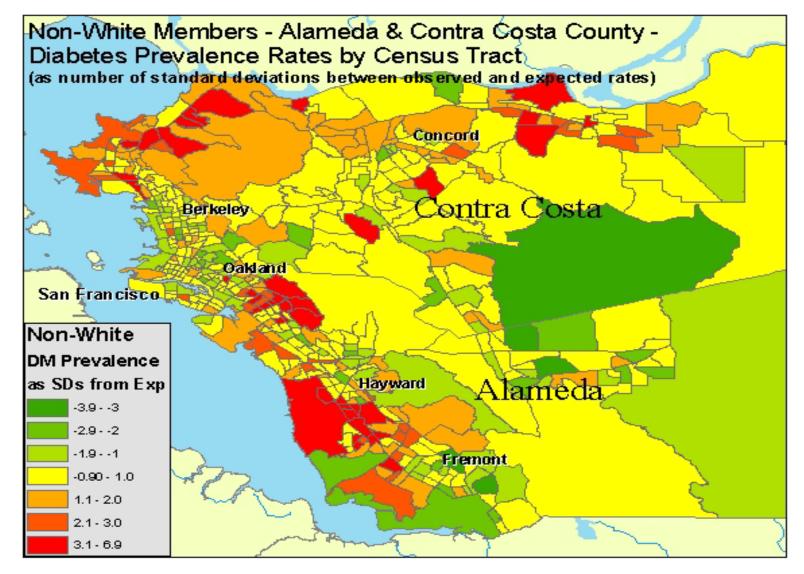


#### **Deviation of census tract prevalence from** expected – Caucasian KP members



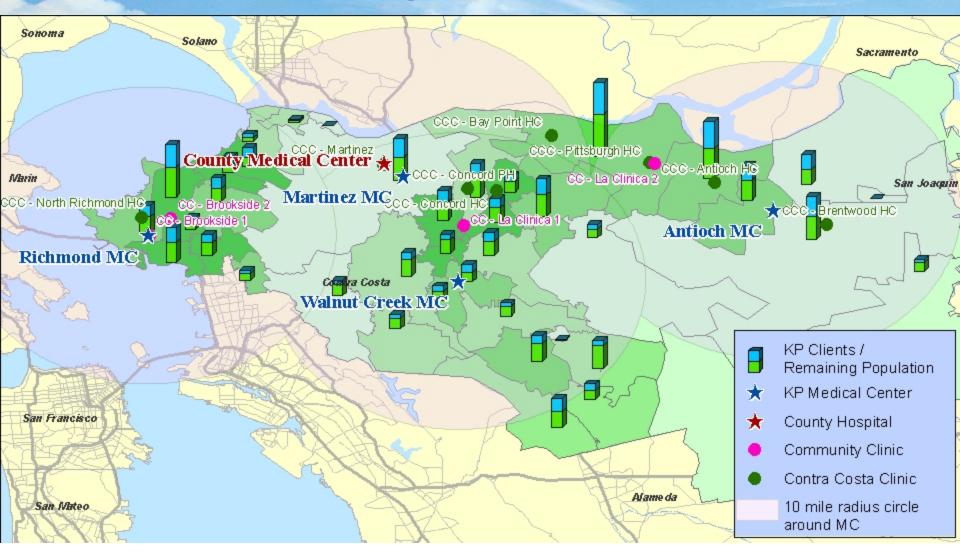


#### **Deviation** of census tract prevalence from expected – Non-White KP members



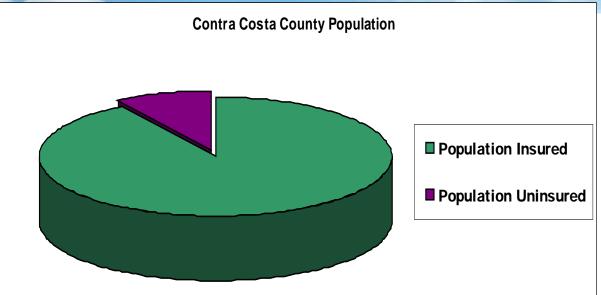


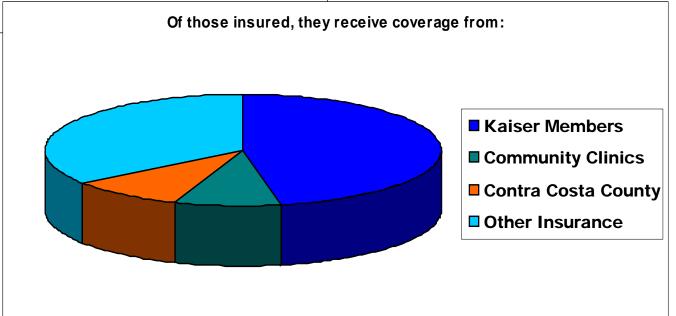
### KP provides care in communities with safety net providers: we share target populations





### **Example: KP, the county, and safety net provide care to the majority of people in Contra Costa country**

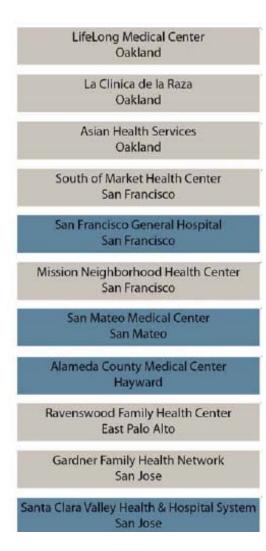


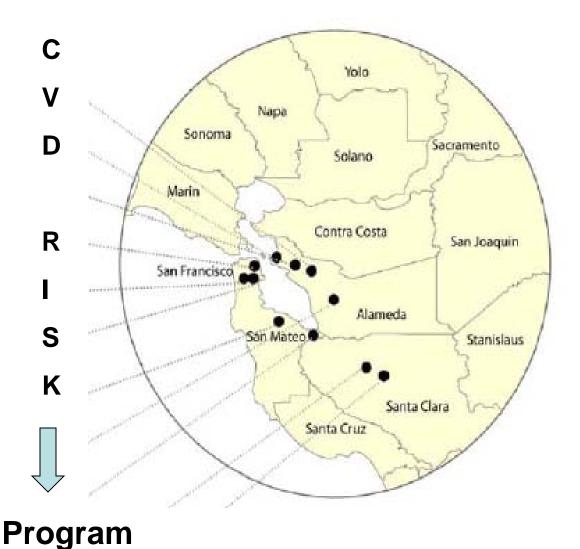


KAISER PERMANENTE

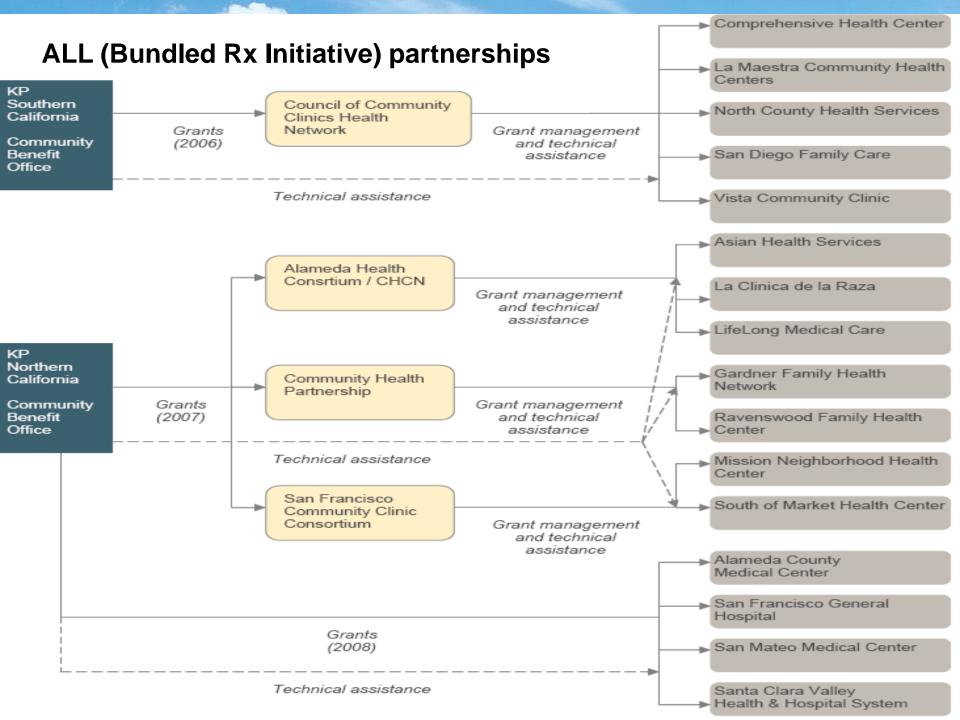
12

## Shared population can result in population management partnerships

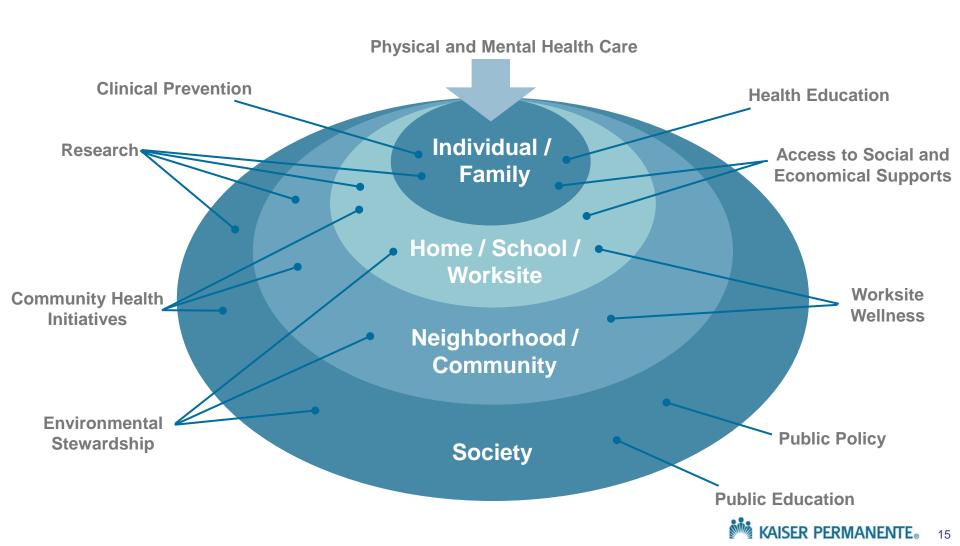








## Healthy communities requires multi-tiered intervention



# Interventions Occur Across the Spectrum of Care, Prevention, and Wellness

#### Example: Addressing obesity



- Medical Office Visit Interventions
- Weight Management Interventions

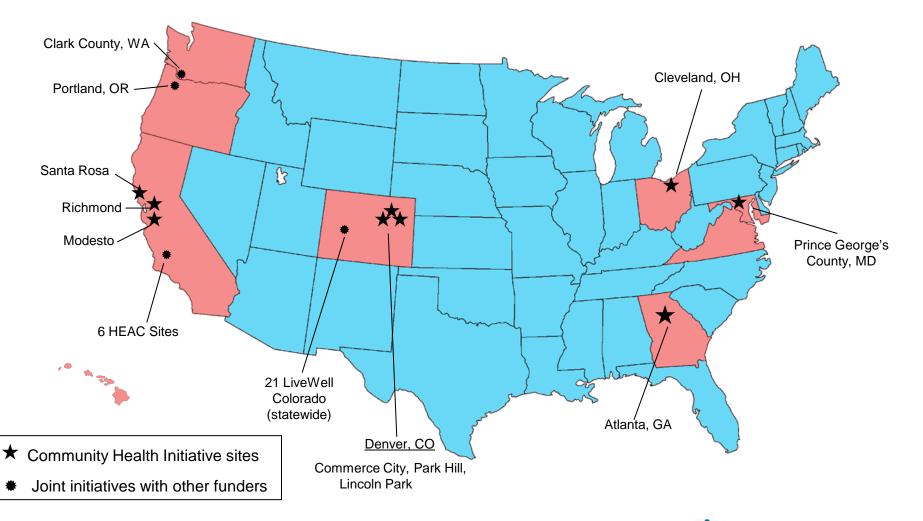
Environmental Changes

KAISER PERMANENTE.

16

## Healthy Eating Active Living goes beyond clinical and medical intervention

We Support 40+ Communities





#### **Future: Linking clinical with social determinants**

Social and Economic Factors

- Education/Literacy
- Adverse Childhood Event
  exposures
- Economic sustanability
- Violence prevention

- Open space per capita
- Early Childhood
- Race and Ethnicity

