Public Health Impact Task Force

Cecil Pollard
WVU SPH Office of Health Services Research
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Today's Conversation

- For the past 10-15 years have focused on working in chronic disease
  - Implementing standards of care-best practices
- Using appropriate technology
- Several years ago starting trying to link with local health and community services
- We will not win the battle with chronic disease without strengthening the ties between primary care and community prevention
- Where do we want to go?
Stakeholders are important
Technology is only as useful as the skills of user

Electronic Health Records—a tool or an obstacle

But data is very important
- Helps us measure how we are doing
- Can help with accountability
Working with community health centers

- Focusing on improving care for patients with chronic diseases
  - Mostly Diabetes, HTN, and Asthma
  - Using EHRs to help providers do what they want to do
  - But EHRs are not often easy to work with
  - We generally need to extract data from EHRs so we have more power to analyze the data
So what can we do to help providers

- First we ask what they would like to do
- Some examples
  - We helped a clinic identify patients that were using lots of resources
    - They now have weekly meets to review these patients’ cases
  - We helped another clinic identify patients with A1C’s > 9
  - Patients with uncontrolled HTN
  - In other sites we identified patients at risk for diabetes or HTN
    - In partnership with LHD we established referral system for providers to refer these patients to community interventions
    - Primary care and LHD worked together to manage these patients
Where do we want to go or what would I like to see

- We've all seen our health indicators
- Can we win this battle
- Role for local health
- “The Checklist Manifesto: How to Get Things Right”- Atul Gawande
- “World’s Apart: Poverty and Politics in Rural America”- Cynthia M. Ducan
Map of community with each pregnant woman listed