Health Impact Table Recommendations

Community driven solutions for systems change
Health Impact Table Co-Chairs

- Julie Hadnot, Associate Director, ALL IN-Alameda County
- Melanie Moore, Director, ALL IN-Alameda County
- Sherry Novick, Managing Director, Community Benefits, Northern California Kaiser Permanente
- Lisa Warhuus, Interim Director, Alameda County Center for Healthy Schools and Communities

Rachel Richman, Project Manager
Health Impact Table Process and Priorities: Community driven solutions for systems change

Health Impact Table
Making Oakland the healthiest city in the US
- Purpose
- Indicators
- Stakeholders

Priority areas
Explore systems, strategies and priorities
- Healthy Food
- Mental Health
- Health Access

HIT Overall Approach: Community-Driven Solutions for Systems Change
- Equity focused
- Community and youth led; capacity building
- Leverage partnerships and existing assets
- Transform systems of care

Priority Strategies for 2019-20
- Healthy Corner Stores
- System of Youth Peer Supports
- Collaboration for health access
Collective Impact Strategies:

*Community-driven solutions for systems change*

- Change Neighborhood Food Systems Through Healthy Corner Stores
- Youth Engagement in a Multi-Tiered System of Peer Support
- Collaborative Approach to Improving Health Outcomes
Oakland Citywide Dashboard

Health: Children and youth are physically, socially, and emotionally healthy

<table>
<thead>
<tr>
<th>What we want to see</th>
<th>What we’re tracking</th>
<th>Where we are</th>
<th>Change</th>
<th>Target</th>
<th>Trend *</th>
<th>Are we closing the equity gap?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our children and youth are at a healthy weight</td>
<td>% of children and youth at a healthy weight (OUSD 7th grade)</td>
<td>48.9%</td>
<td>▼</td>
<td>PENDING</td>
<td>54.4% - 48.9%</td>
<td>CHALLENGES</td>
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<tr>
<td></td>
<td></td>
<td>2017-2018</td>
<td>Prior value 52.8% 2016-2017</td>
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<tr>
<td>Our children and youth have health care</td>
<td>% of children and youth ages 0-24 with a usual place to go when sick or need health advice (Alameda County)</td>
<td>91%</td>
<td>▲</td>
<td>PENDING</td>
<td>91.0% - 93.2%</td>
<td>PROGRESS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2018</td>
<td>Prior value 88.7% 2017</td>
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<tr>
<td>Our children and youth enjoy good mental health</td>
<td>% of children and youth experiencing chronic sadness/hopelessness (OUSD 9th grade)</td>
<td>30%</td>
<td>▲</td>
<td>PENDING</td>
<td>30% - 28%</td>
<td>CHALLENGES</td>
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<td></td>
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<td>2017-2018</td>
<td>Prior value 25% 2015-2016</td>
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California Healthy Kids Survey, 2017-18 Fitnessgram Data, California Dept. of Education, 2017-18 California Health Interview Survey
<table>
<thead>
<tr>
<th>Indicator</th>
<th>Systems Change</th>
<th>Expected outcome</th>
</tr>
</thead>
</table>
| % of children at a healthy weight | Change neighborhood food systems through community, public and private sector collaboration for collective impact | • Residents transform neighborhood food systems to access healthier, affordable food in the community, impact health outcomes  
• Economically stronger small stores serve as hubs of healthier living. |
| % of children experiencing chronic sadness/hopelessness | Shift to a more culturally responsive, youth driven peer-to-peer system for students who need more intensive support | • Children and youth are more emotionally resilient  
• Peer support is a potential career path |
| % of children and youth ages 0–24 with a usual place to go when sick or need health advice | Coordinated, accurate information and referral systems that address medical and nonmedical needs impacting health | • Health systems address medical and non-medical needs with robust follow up and feedback loop to the health provider on outcomes |
Changing neighborhood food systems

Healthy corner stores

Community driven solutions for systems change

California Healthy Kids Survey and Fitnessgram Data, CA Dept. of Education
Neighborhood Food System from a Child’s Perspective

- Breakfast After the Bell
- School Wellness Programs
- Water Stations
- Healthy School Lunch
- Food Pantry
- Supper at Park & Rec Center
- Food Rx
Neighborhood Food System from a Child’s Perspective

- Breakfast After the Bell
- School Wellness Programs
- Water Stations
- Healthy School Lunch
- Supper at Park & Rec Center
- Food Rx
- Food Pantry
Focus on Weakest Link in Food System

From this

To this
What does it take to transform corner stores?
• Engage store owner & community residents
• Provide technical assistance & concrete resources
• Provide POS machines to track data

How can public systems support this change?
• Alignment between Public Health, Economic Development, Zoning & Planning, Arts, Schools
• Funding & staffing for coordination, community engagement, owner incentives

Results in San Francisco
• 39% increase in sale of produce
• 11,000 units of fruits and vegetables sold monthly
• 25% increase in total revenue over three years
Healthy Food systems recommendations

- Align County, City, school and non-profit resources
- Engage and empower community members
- Incentivize and support corner stores to transition

Community driven solutions for systems change
Place-based Strategy: More Kids At A Healthy Weight

Schools: black pennants
Full service grocery stores: green dots

1) Life and Death from Unnatural Causes: Health and Social Inequity in Alameda County 2008 report
Map: OUSD Environmental Factors Analysis 2016
## Healthy Food Systems Change: Next Steps

<table>
<thead>
<tr>
<th>Indicator</th>
<th>% of children at a healthy weight</th>
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<tbody>
<tr>
<td>Systems change</td>
<td>Change neighborhood food systems through community, public and private sector collaboration for collective impact</td>
</tr>
</tbody>
</table>
| Actions to implement:      | • Engage youth to identify potential stores near schools.  
• Better align Healthy Corner Stores with the Oakland Sugar Sweetened Beverage Advisory Board. Expand and strengthen alignment of Healthy Corner Store programs with Oakland economic development to support small businesses.  
• Better align and expand the County Healthy Corner Store programs with each other, nonprofit partners Mandela Partners, Hope Collaborative and County green business program.  
• Earmark one-time City, County and philanthropic funds for incentives to stores  
• Align participating corner stores, City of Oakland recreation centers, neighborhood health champions, school-based health centers and CBOs with OUSD’s wellness programs for integrated education and outreach to students on drinking water and healthy eating. |
| Expected outcomes          | • Easier access to healthier food, which will improve health outcomes and promote healthier weight.  
• Economically stronger small stores that serve as hubs of healthier living. |
Involve Youth in the School-Based System of Mental Health Supports

Community driven solutions for systems change
What We Know

First cut indicator: % of 9th graders experiencing chronic sadness/hopelessness = 30% (prior value 25%).

11% of high school students & 13% of middle school students reported seriously considering suicide, and only half said they know where to go for help if they are feeling stressed, nervous, sad, depressed, or angry.

School-based, school-lined behavioral health services are linked to positive outcomes

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4California Healthy Kids Survey, 5http://www.cdc.gov/violenceprevention/acesstudy/
OUSD as Full-Service Community School District has strong partnerships with the Health Care Services Agency, non-profit providers, private, and public allies to implement a 3-tiered system of mental health supports in the schools.

16 OUSD School Health Centers provide comprehensive physical, mental, & dental health, health education, and youth development services.

Current Peer to Peer efforts in Oakland strengthen preventative mental health supports

- Peer Health Educators and YPAR
- Youth Wellness Ambassadors
- Youth Restorative Justice Ambassadors
- Emotional Emancipation Circles
- Health Initiatives for Youth - anti-stigma work
- ReCast Youth Facilitators

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1 Mental Health America. www.mentalhealthamerica.net/conditions/peer-support-research-and-reports
3 Evaluation of a Youth-Led Program for Preventing Bullying, Sexual Harassment, and Dating Aggression in Middle Schools. The Journal of Early Adolescence. Volume: 35 issue: 3, page(s): 403-434
4 Center for Supportive Schools www.supportiveschools.org/results
OUSD Multi-Tiered System of Supports

**Tier 3: Individualized Support**
Individual counseling, 504 plan, behavior support plan, family school partnership, wrap-around case management.

**Tier 2: Targeted Supports**
COST referral, classroom behavioral support, check-in/check-out mentoring, SST, group counseling.

**Tier 1: Universal Support**
3–5 school-wide positive expectations taught, modeled, narrated, differentiated instruction, SEL integrated at all grades.
Mental Health and Wellness recommendation

Youth-driven, peer-to-peer mental health supports

- Integrate youth-driven peer supports into all Tiers of the school-based mental health system
- Support community-based youth development programs in implementing peer-to-peer mental health supports
- Build on alignment of School, City, Nonprofit, County efforts
- Create linkages with college and career pathways
### Mental Health and Wellness: Next Steps

<table>
<thead>
<tr>
<th>Indicator</th>
<th>% of children feeling sad or hopeless</th>
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<tbody>
<tr>
<td>Systems change</td>
<td>Enhance mental health and wellness to utilize youth driven, peer support at all levels, creating a responsive, robust, and culturally relevant mental health and wellness system.</td>
</tr>
</tbody>
</table>
| Actions to implement | • Integrate peer-to-peer focus into existing partnership structures between OUSD, Alameda County Health Care Services Agency, school health centers, school-based and mental health programs, peer to peer youth led groups, and City of Oakland youth led programs.  
• Develop a cohesive design for a multi-tiered system of peer supports and related curricula and materials  
• Funding for youth stipends, youth training and curriculum development. |
| Expected outcomes | Children and youth are more emotionally resilient  
Potential health and wellness career path (to be developed) |
Access to healthcare

Linking health care to non-medical social supports that impact health

Community driven solutions for systems change
Social and Economic Factors: 40%

Health Behaviors: 30%

Physical Environment: 10%

Clinical Care: 20%

County Health Ranking Model, University of Wisconsin, 2017 and Referral System Collaboration Between Public Health and Medical Systems: A Population Health Case Report, Eric W. Fleegler, Clement J. Bottino, and Areej Hassan: Boston Children’s Hospital; Beth Baker, Boston Public Health Commission; Emmett Kistler, Icahn School of Medicine at Mount Sinai; Aaron Pikcilingis, ViiV Healthcare, National Academy of Medicine)
Models to leverage and challenges

211 Alameda County
211 San Diego Community Information Exchange
FIND/Connect Children’s Hospital Oakland
Care/Connect Alameda County
Commercial referral services

21 Referral System Collaboration Between Public Health and Medical Systems: A Population Health Case Report, Eric W. Fleegler, Clement J. Bottino, and Areej Hassan; Boston Children’s Hospital; Beth Baker, Boston Public Health Commission; Emmett Kistler, Icahn School of Medicine at Mount Sinai; Aaron Pikelingis, ViiV Healthcare, National Academy of Medicine
Access to Healthcare Recommendations

**Community driven solutions for systems change**

- Convene public, private and nonprofit agencies to jointly investigate best cost-effective practices for information and referral.
- Recommend a model that builds on current efforts, maximizes collaboration and creates efficiencies for users.
- Improve health care delivery to address equity and reduce disparities in health outcomes.
- Explore avenues to train and support individuals who serve as "navigators", who work directly with families to link them to services.
<table>
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<tr>
<th>Access to Healthcare: Next steps</th>
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</thead>
<tbody>
<tr>
<td>Indicator</td>
</tr>
<tr>
<td>Systems change</td>
</tr>
</tbody>
</table>
| Steps to implement and expected outcomes | • Convene public, private and nonprofit agencies to jointly investigate best cost-effective practices for information and referral.  
• A healthcare delivery system that addresses the whole person. |
School Absences as a Through-Line Indicator

*Significant health factors in school absences*

- Food insecurity and hunger
- Mental illness
- Parental and child stressors
- Health status

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Health Impact Table members and participants

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Chris Iglesias, Chief Executive Officer, Unity Council
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Thanks OUSD, Alameda County, City of Oakland, PolicyLink, The Food Trust, Oakland Food Policy Council, Matt Beyers, CAPE, Alameda County Center for Healthy Schools and Communities, JPA staff, Bev Bitagon and Jesse Robbins

-Partial list-