

Social Determinants of Health: Evidence and Strategies for Treating Poverty



Marcella Wilson, Ph.D.
CEO and Founder
Transition To Success



MaryBeth Kurland, CAE
Chief Executive Officer
CCMC





Agenda

- Welcome and Introductions:
 - Commission for Case Manager Certification
- Presentation:
 - Marcella Wilson
 CEO and Founder
 Transition To Success
 - Question and Answer Session



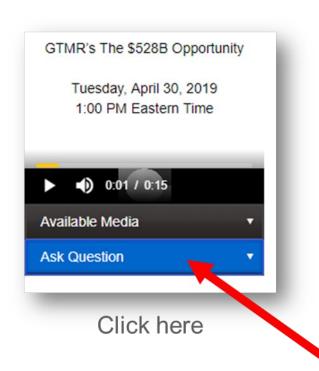


Audience Notes

There is no call-in number for today's event. Audio is by streaming only. Please use your computer speakers, or you may prefer to use headphones. There is a troubleshooting guide in the tab to the left of your screen. Please refresh your screen if slides don't appear to advance.







How to submit a question

To submit a question, click on Ask Question to display the Ask Question box. Type your question in the Ask Question box and submit. We will answer as many questions as time permits.





Audience Notes

- A recording of today's session will be posted within one week to the Commission's website, <u>www.ccmcertification.org</u>
- This webinar has been approved for one CCM continuing education credit for board-certified case managers (CCM), one nursing contact hour and/or for NYS Ed Department SW CEs only to those who registered in advance and are participating today.





Learning Outcomes Overview

After the webinar, participants will be able to:

- Describe evidence-based standards of care for the treatment of poverty as an environmental medical condition
- Identify ways to leverage standards of care and best practices to better address the social determinants of health that are contributing to poverty
- Evaluate current community partnerships and identify ways to expand these key relationships and grow new partnerships to support the treatment of poverty





Social Determinants of Health: Evidence and Strategies for Treating Poverty



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CMLearning network®

A Resource Center for Today's Case Manager

















Social Determinants of Health: Evidence and Strategies for Treating Poverty



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A Standard of Care to Treat the Social Determinants of Health

Social Determinants of Health: Evidence and Strategies for Treating Poverty

CCMC Webinar

1/30/2020

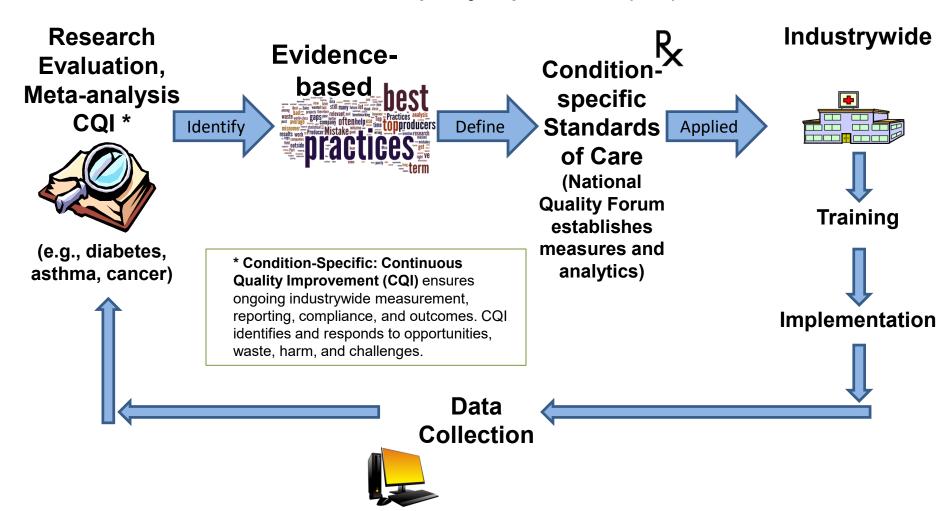
"Like slavery and apartheid, poverty is not natural. It is man-made, and it can be overcome and eradicated by the actions of human beings."

Marcella Wilson, Ph.D.
President & Founder
Transition To Success® LLC

The Medical Model

Understanding and Treating Disease

A uniform system of industrywide standards and analytics with continuous quality improvement (CQI)



RANSITION

Map of My Dreams

Treating Poverty in America



Povertyrelated





Research, Evaluation, and Metaanalysis Evidence-





No comprehensive, cross-industry, interdisciplinary, uniform analytics to support CQI *

- · Client self-navigation
- Individual practitioner preference
- Organizational preference



* Condition-specific: Continuous quality improvement (CQI) ensures ongoing industrywide measurement, reporting, compliance, and outcomes. CQI identifies and responds to opportunities, waste, harm, and challenges.

Current Funded U.S. Delivery System

Client Driven - Disconnected - Ineffective

Faith-Based

- 320,000 US Christian Churches
- 3,727 US Synagogues
- 2,106 US Mosques



Education

- Head Start (\$8.1B) (serves over 32M children in the US)
- Public Schools Vocational & High Education (\$69.9B)
- 99,000 public schools
- 3.7 million elementary and secondary teachers
- 262,300 school
 counselors

Human Service

- 1.4 million not for profits
- 650,000 social workers

Client independently attempts to access goods, services & supports

Healthcare

- 5,723 hospitals
- 209.000 PCPs
- Medicaid and CHIP (70M, 1 in 5 in the U.S.)
- Medicare health plans (53.8M)

\$1,660,451,000,000*

Does not include: Foundations,

Corporate or Individual

Estimated Cost:



Government

- DHS
- · Community Mental Health
- Housing
- Medicaid/Medicare
- Veterans
- · Juvenile justice
- Prisoner reentry



Poverty & Education

Children Growing Up In Poverty:

- Complete Less School
- Work and Earn Less as Adults
- Are More Likely to Receive Public Assistance as Adults
- Have Poorer Health
- Boys growing up in poverty are more likely to be arrested as adults.
- Girls growing up in poverty are more likely to become single parents.



Health Disparities for Those Living in Poverty

Poverty status is based on Gallup's best estimate of those in poverty, according to the U.S. Census Bureau's 2011 thresholds

	Percentage with Disease in Poverty	Percentage with Disease Not in Poverty	Difference (percentage points)
Depression	30.9	15.8	15.1
Asthma	1 <i>7</i> .1	11.0	6.1
Obesity	31.8	26.0	5.8
Diabetes	14.8	10.1	4.7
High blood pressure	31.8	29.1	2.7
Heart attack	5.8	3.8	2.0
Cancer	6.3	7.1	-0.8
High cholesterol	25.0	26.0	-1.0

(Gallup—Healthways Well-Being Index, 2011)

Treating Environmentally Based, Industry-Accepted Medical Conditions *



Environmental Exposures	Symptoms	Diagnosis	Standard of Care	Billable
Lead ingestion	Irritability, high blood pressure, long- term neurological damage	Lead poisoning	Required	✓
Asbestos	Trouble breathing, nausea, vomiting	Cancer/ Mesothelioma	Required	✓
Mosquito bites	Fever, rash, joint pain, conjunctivitis, muscle pain, headache	Zika, West Nile, yellow fever, and malaria viruses	Required	✓
Limited access to fresh fruits, vegetables, and exercise	Increased thirst, blurred vision	Type II diabetes Obesity	Required	✓
Cigarette smoking and second-hand exposure	Wheezing, increased risk of cancer, asthma, COPD	Nicotine addiction	Required	✓
Accidents	Broken bones, closed head injuries	Trauma	Required	✓
Pollution	Difficulty breathing, decrease in lung function, wheezing	Asthma/COPD	Required	✓
Social Determinants of Health Food insecurity, high crime rates, inadequate/unaffordable housing, lack of access to basic needs/resources, limited access to quality healthcare, poorly performing schools, racism, and unemployment, transportation	Increased rates of diabetes and blood pressure, infant and maternal mortality, increased depression and mental health disorders, asthma, compromised immune system and brain development, higher death rates	Extreme Poverty (ICD 10 Z59.5) Homelessness (ICD 10 Z59.0) Lack of adequate food or safe dinking water (ICD 10 Z59.4) Low Income (ICD 10 Z59.6)	TTS Screening Assessment Referrals: Behavioral Health, Substance Abuse and Social Determinants	Social Determinant Solutions Billable CPT Codes for Medicaid, Medicare and Third Party

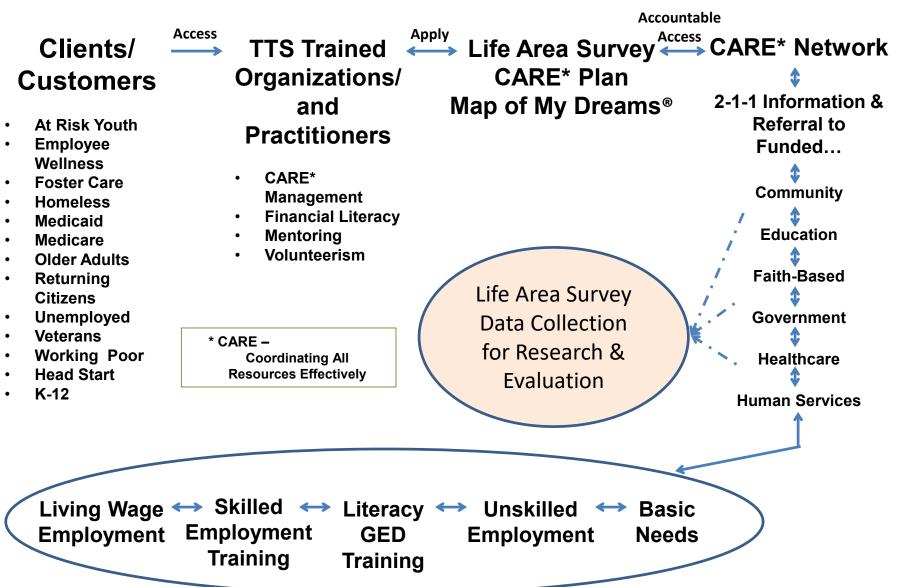
^{*} Note: Recognized disease without genetic predisposition

Transition To Success®

to SUCCESS Map of My Dreams

Treating the Condition of Poverty

With A Client Centered Community Based Continuum of Care



TTS Independent Evaluation Results

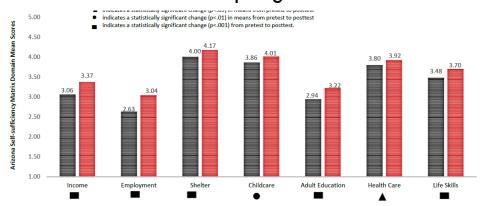


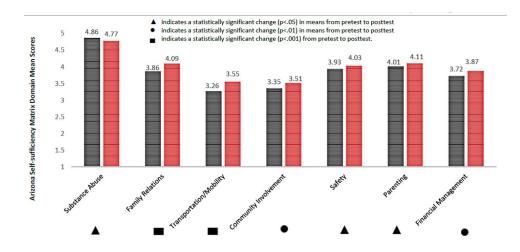
This 15-month independent study in Detroit Head Start focused on reducing the family exposure to 18 social determinants using a client self reporting Likert scale for pre and post study reporting.

This study was completed with no new funding other than research and evaluation. Existing staffing (parent educators) and training budgets were used to implement Transition To Success in Head Start for this study.

Results of this independent evaluation indicate statistically significant improvement in 14 of 18 social determinant domains, including but not limited to income, employment, medication compliance, healthcare, education, transportation and financial management.

Matrix Head Start: SSM* Domains with a Significant Change in Mean Scores, Winter 2014 to Spring 2015





Transition To Success® Final Evaluation Report – 8/29/2015 W. K. Kellogg Foundation Grant: P3018954

* Self-sufficiency Matrix

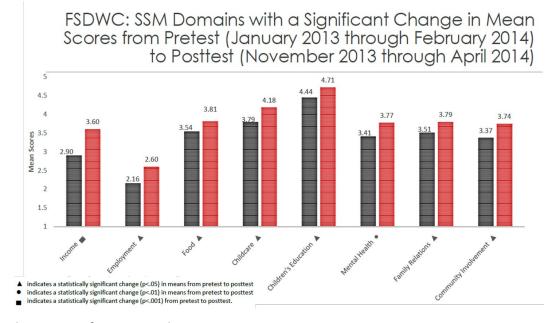
TTS Independent Evaluation Results

TTS Independent Evaluation Family Service of Detroit and Wayne County (FSDWC)

This 12-month independent evaluation of Transition To Success was completed at FSDWC, an outpatient, behavioral health, Medicaid Clinic in Detroit. Other than research and evaluation there was no additional funding for staffing and TTS training was accomplished within the existing training budget. In this study Master level, State of Michigan licensed therapists were trained in TTS, integrating social determinant screening and care management into the therapeutic response.

With an average length of stay of 6 outpatient visits clients reported statistically significant improvement in 8 of 18 domains, including but not limited to income, employment, food and mental health. All services provided were reimbursed by Medicaid at a cost of less than \$600.00 to the insurer.

Transition To Success® Final Evaluation Report – 8/29/2015 W.K. Kellogg Foundation Grant: P3018954



^{*} FSDWC: Family Service of Detroit and Wayne County





TTS Independent Evaluation Results

Head Start - Kauai, Hawaii

This 20-month independent evaluation of Head Start Kauai focused on reducing family exposure to the social determinants of health and was accomplished with no new funding other than research and evaluation. Using a client self reporting Likert scale, for pre and post scoring Head Start parents reported statistically significant improvement in 9 of 18 domains, including but not limited to shelter, employment, income, mental health and financial management.

Neighborhood Place - Maui, Hawaii

This 20-month independent evaluation of a human service provider in Maui was focused on reducing individuals and family's exposure to the social determinants of health. With the exception of research and evaluation results were accomplished within existing funding streams. Using the Arizona Self Sufficiency Matrix, a client self reporting tool, using a Likert scale with pre and post scoring, clients reported statistically significant change in 12 of 18 social determinant categories including but not limited to employment, food, transportation . Of note is the statistically significant decrease in adult education. This decrease corresponds with an increase in employment, indicating a childcare service gap for working parents. Also of note is a statistically significant increase in the reporting of substance abuse concerns. This increase reflects a higher level of trust and willingness to identify and address these concerns.

Statewide - Hawaii

This 20-month independent evaluation of CFS statewide programs was focused on reducing individually and family's exposure to 18 social determinants. With the exception of research and evaluation, results were accomplished within existing staffing and training budgets. Using the Arizona Self Sufficiency Matrix, a Likert scale client self reporting tool, clients reported statistically significant improvement in 11 of 18 Social Determinant domains including but not limited to, employment, food, transportation, mental health and financial management. Of note the increased reporting of substance abuse issues reflects the clients increased level of comfort and trust addressing their substance use concerns.

At Child & Family Service, Hawaii: Year End Evaluation of Pilot Implementation of Transition To Success® Fall 2016 - Spring 2018

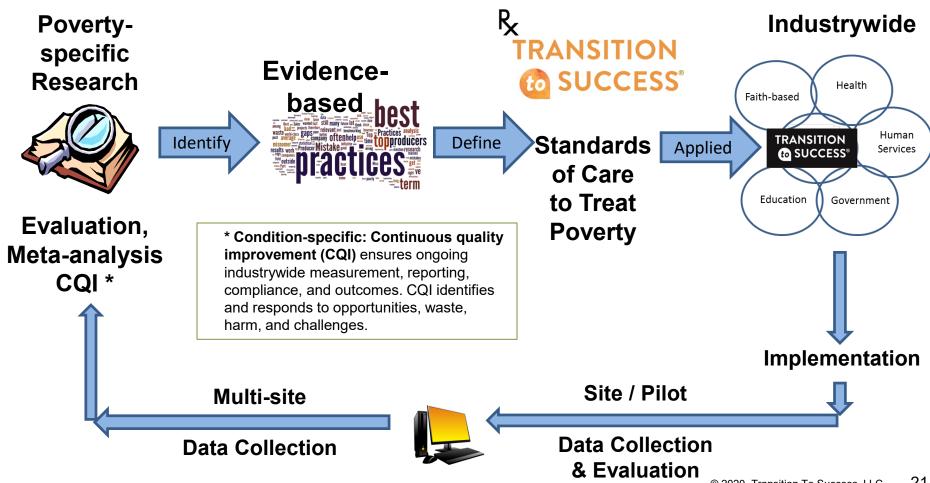


Understanding and Treating the **Condition of Poverty**



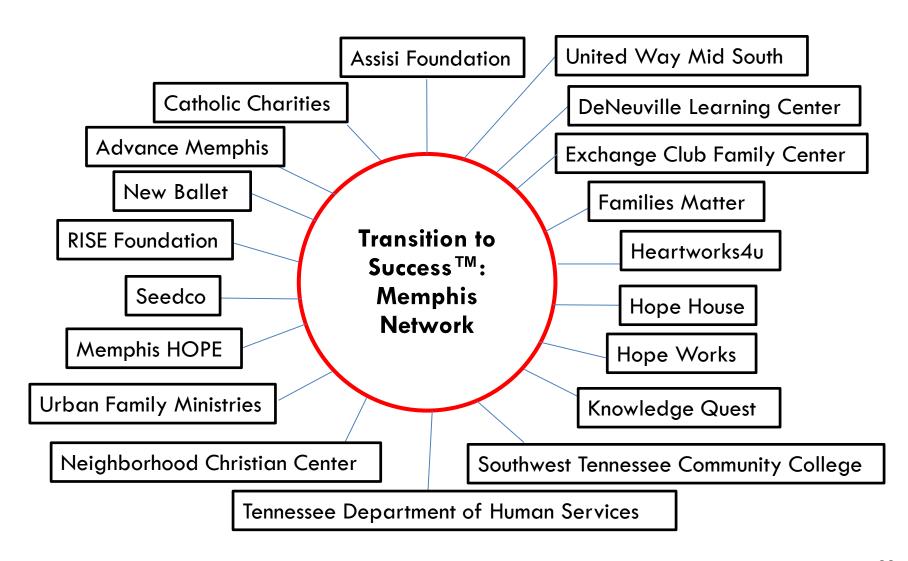
Transition To Success:

A uniform system of care with continuous quality improvement (CQI)











Transition To Success® (TTS): A National Standard of Care To Treat the Condition of Poverty

- A Clinton Global Initiative
- Statistically Significant Independent Evaluation Results
- Over 80 Organizations Involved
- Over 800 trained nationwide
- Pilots:
 - Assisi Foundation/ Memphis, TN
 - Child and Family Services/HI
 - Department of Human Services, City of Lansing MI
 - Third New Hope Baptist Church/Community Network (6 Congregations)
 Detroit, MI
 - Catholic Charities, Northern Kansas/Salina KS
 - · Catholic Charities, New Orleans, LA
 - Forward Service Corporation WI
- Organizational Partners
 - Melagro Technology (CMS Approved) Behavioral Health and Substance Abuse screening assessment and referral identification
 - J&B Healthy Opportunities: Comprehensive Telehealth Services integrated with Social Determinant, Behavioral Health and Substance Abuse screening, assessment and referral identification
 - "Diagnosis: Poverty A new approach for understanding and treating an epidemic" – Book and Curriculums



Questions and Closing Remarks

"SPIDERS WEBS UNITED CAN TIE UP A LION!"

African Proverb

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Check out my book:

Diagnosis: Poverty
A new approach for understanding and treating an epidemic

www.DiagnosisPoverty.com



Question and Answer Session



Marcella Wilson, Ph.D.
CEO and Founder
Transition To Success



MaryBeth Kurland, CAE
Chief Executive Officer
CCMC



Thank you!

- Please fill out the survey after today's session
- Those who signed up for continuing education will receive an evaluation from the Commission.
- A recording of today's webinar and slides will be available in one week at http://ccmcertification.org

Commission for Case Manager Certification

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