



The Population Health Template: A Roadmap for Successful Health Improvement Initiatives



Michael Kobernick, MD, MS-HSA, MS-PopH

*Chief Medical Officer, Ascension-SmartHealth
Lecturer, Jefferson College of Population Health*

Poll Question #1

Social determinants are an important part of health improvement initiatives.

- 1) Strongly disagree
- 2) Disagree
- 3) Undecided
- 4) Agree
- 5) Strongly agree
- 6) Unsure or not applicable

Learning Objectives

- Describe the population health template as a tool designed to assist health systems and population health care organizations to achieve and report on quintuple aim objectives of health improvement initiatives.
- Identify gaps in current health initiatives illustrating the needs for the template's more organized approach.
- Apply the template to health improvement opportunities in group discussion with attention to:
 1. Health improvement statement.
 2. Population.
 3. Applicable social determinants of health.
 4. Metrics that demonstrate value.

The population health template was designed to assist health systems and population health care organizations to achieve and report on the quintuple aim objectives:



Health
Outcome.

Provider
Experience.

Patient
Experience.

Caregiver
Satisfaction.

Cost.



10%

**of health-related
activity...**



Nation's largest non-profit health system and world's largest Catholic health system.



2,500 care sites, including 141 hospitals, in 24 states and the District of Columbia.

More than 30 senior care facilities.

36,000 aligned providers.

90,000 employees.

200,000 covered by SmartHealth.

Current Gaps in Population Health Programs

Population health initiatives do not often address social determinants of health.



Health improvement issue is not clearly defined.

Most often deal with broad populations.



Measures of success are not carefully planned.

Do not follow project planning methodology.



Program evaluation is not well organized.

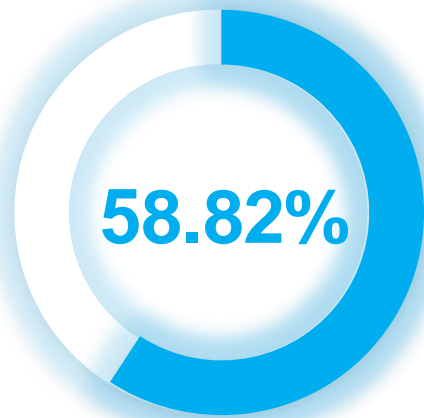
Poll Question #2

Thinking about common failure points for population health improvement programs, select the areas in which you most frequently observe issues. (Select all that apply.)

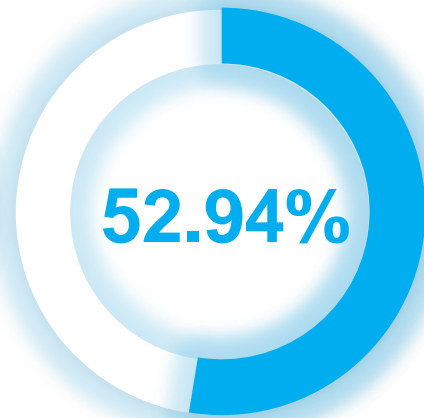
- a) Effective organizational change
- b) Engaging in collaborative leadership
- c) Client participation or program affinity
- d) Meeting user requirements
- e) Sustainable behavioral change
- f) Unsure or not applicable

Common Failure Points for Population Health Improvement Programs

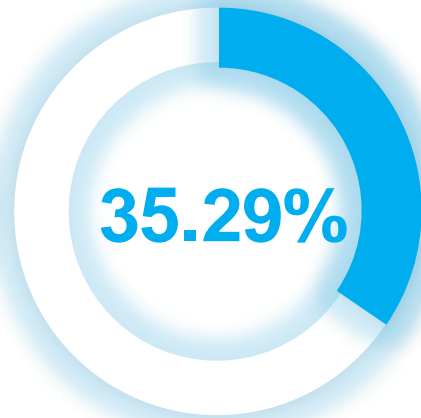
According to Population Health Experts:



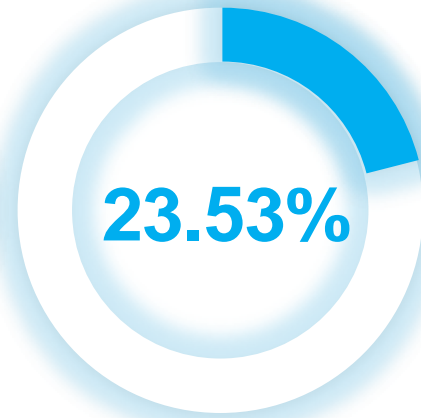
Effecting organizational change.



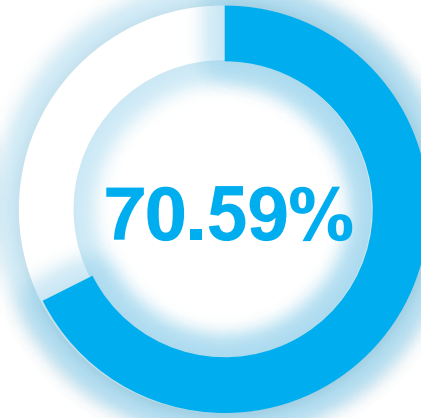
Engaging in collaborative leadership.



Client participation or program affinity.



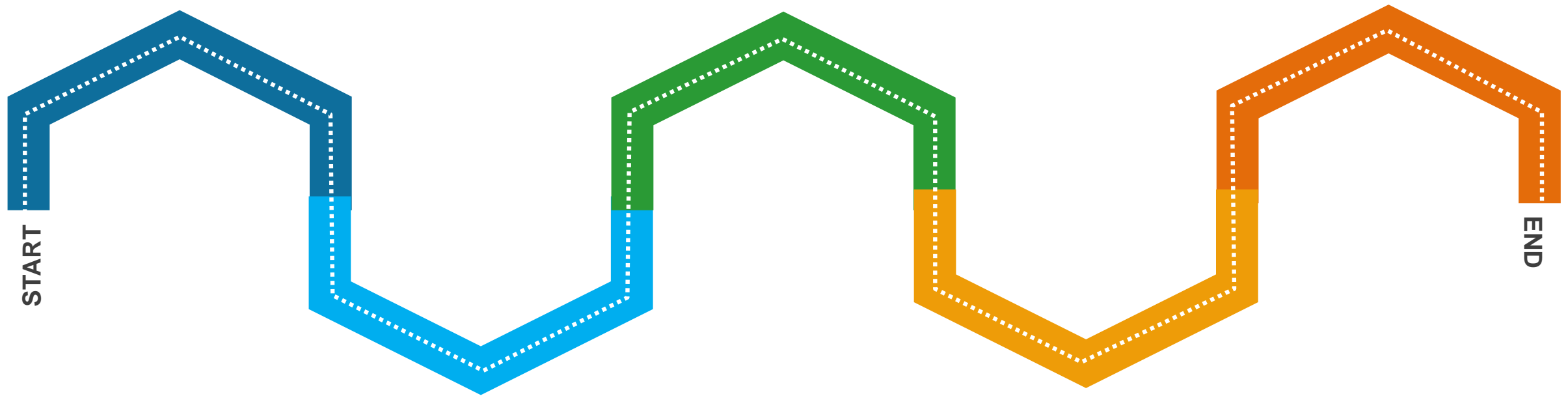
Meeting user requirements.



Sustainable behavioral change.

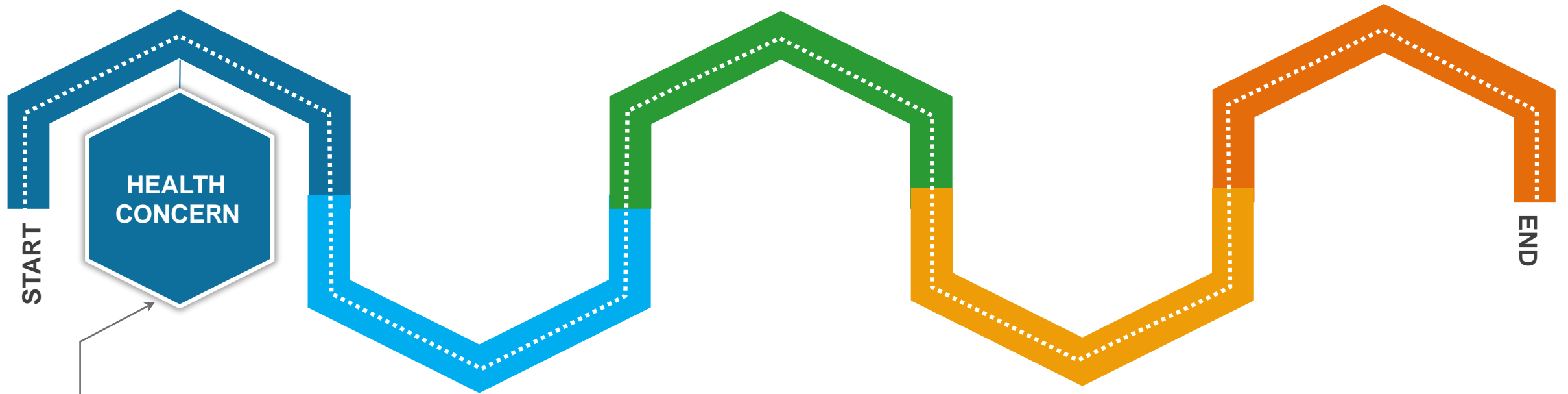
A Tool to Help Close the Gaps and Failure Points: The Population Health Template

This roadmap creates a standardized population health approach to project planning and execution that may be applied to all types of health improvement initiatives for a variety of populations.



Population Health Roadmap

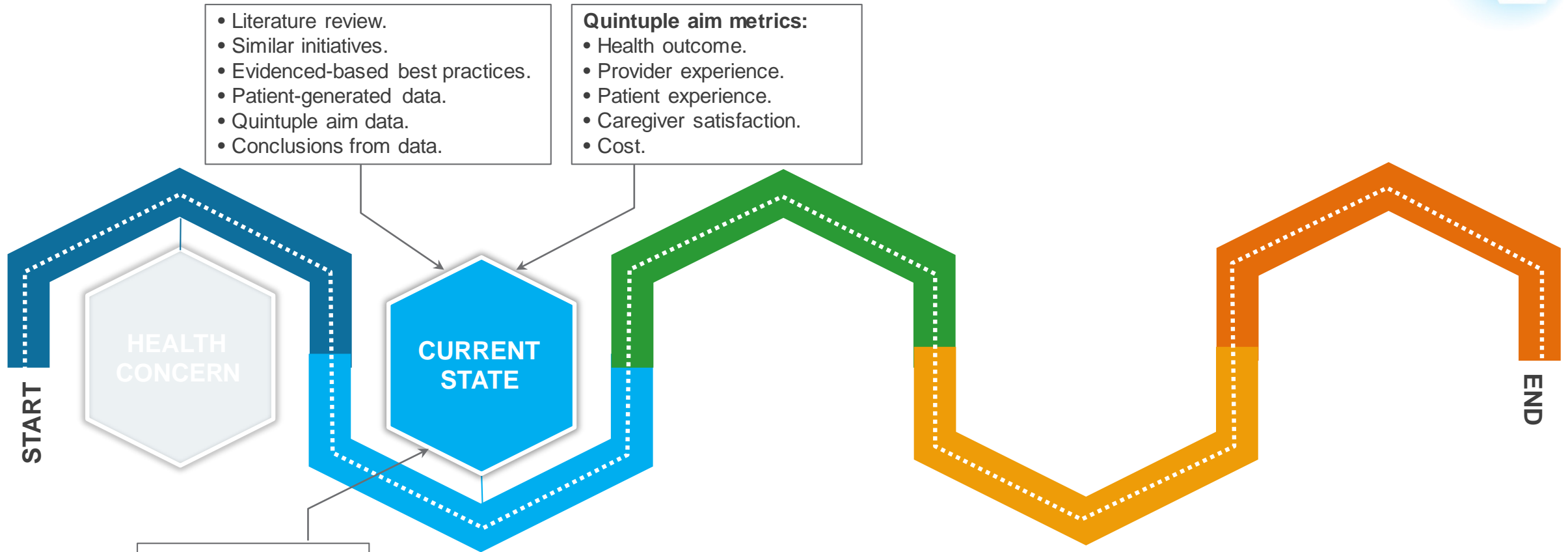
Health Improvement Statement



- Problem statement.
- Iterative.

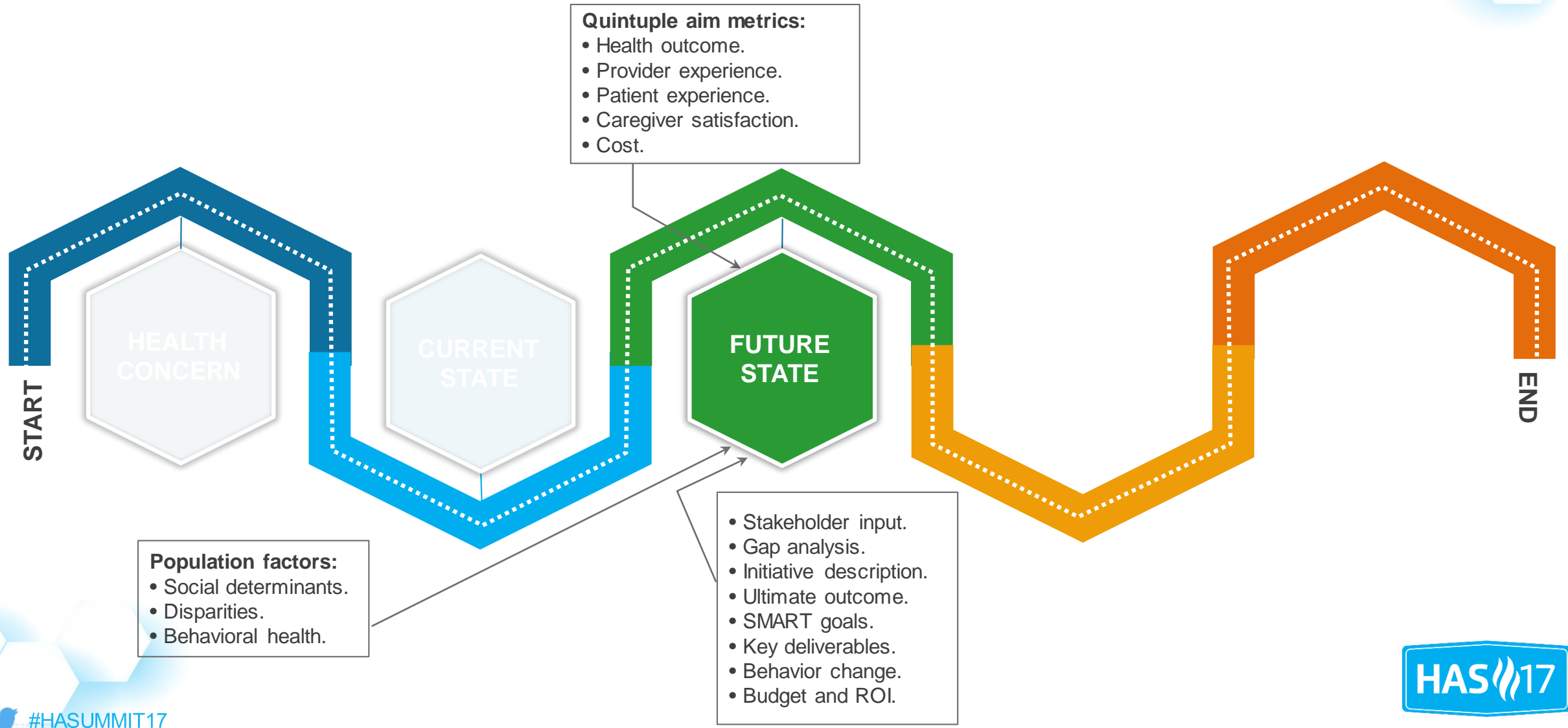
Population Health Roadmap

Current State



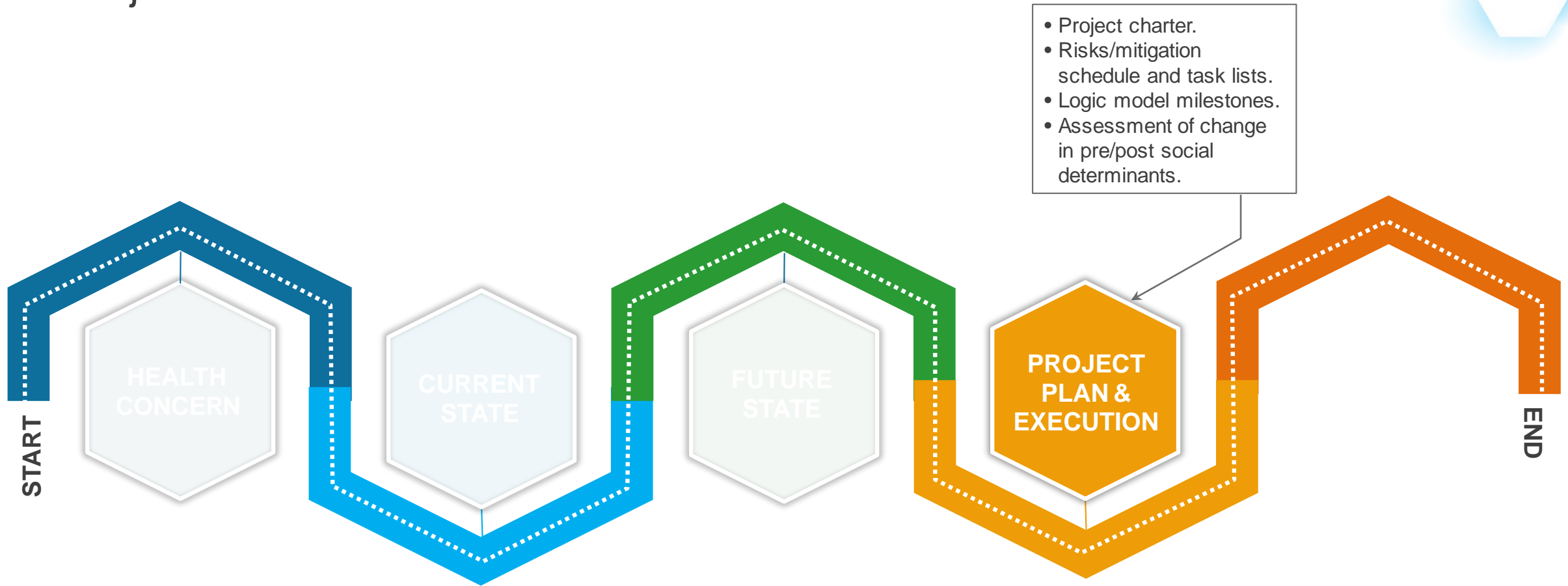
Population Health Roadmap

Future State



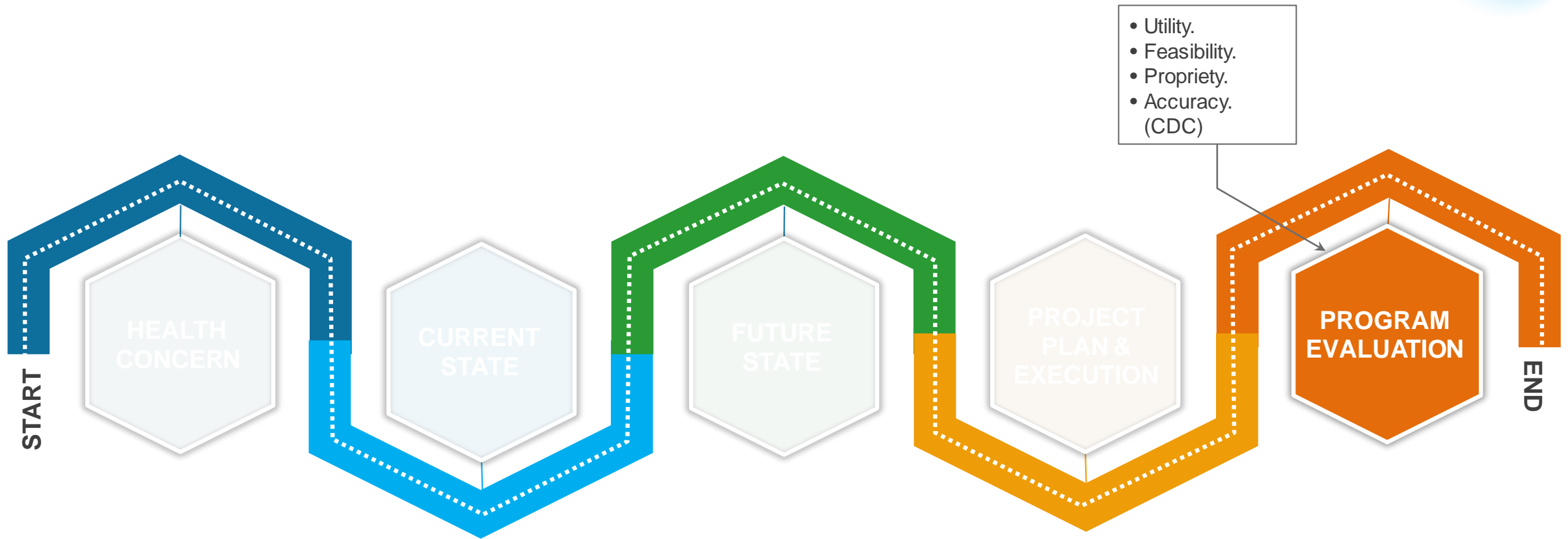
Population Health Roadmap

Project Plan & Execution



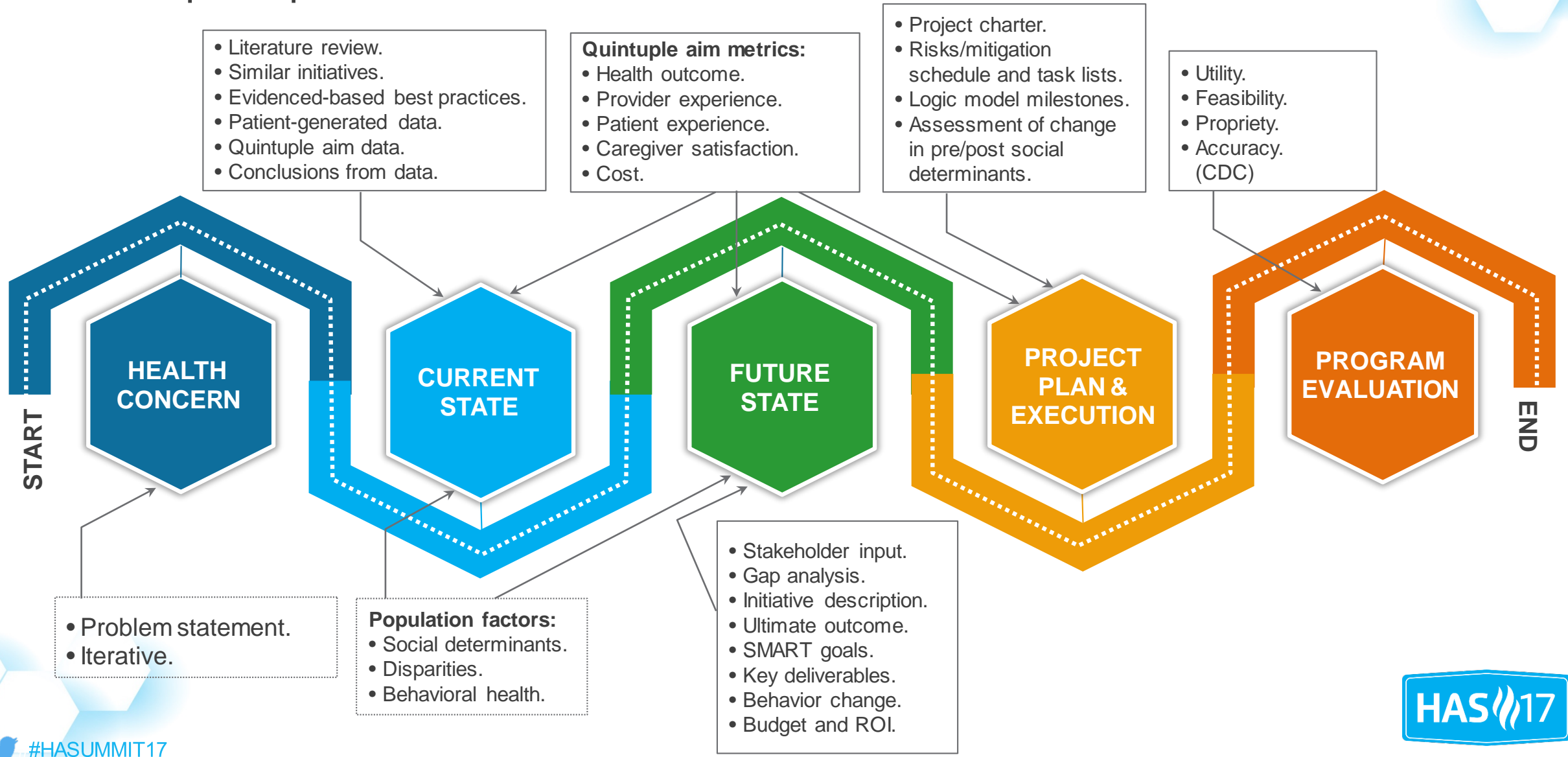
Population Health Roadmap

Program Evaluation



Population Health Roadmap

Concept Map



Gap Example: Health Coaching

Vendor was asked to provide specific examples of how they would demonstrate value from coaching. They were given the template and below was their response.

- **Year 1:** Identify a baseline using the Health Assessment (HA) Score for all HA completers. Also, identify coaching goal areas for future outcome improvements.
- **Year 2:** Collect data to compare with year 1 benchmark data (coaching participant vs. non-coaching participant).

Discussion:

No clear statement of health issue being addressed through coaching, the population being coached, and metrics of value.

Population Health Roadmap

Table Exercise

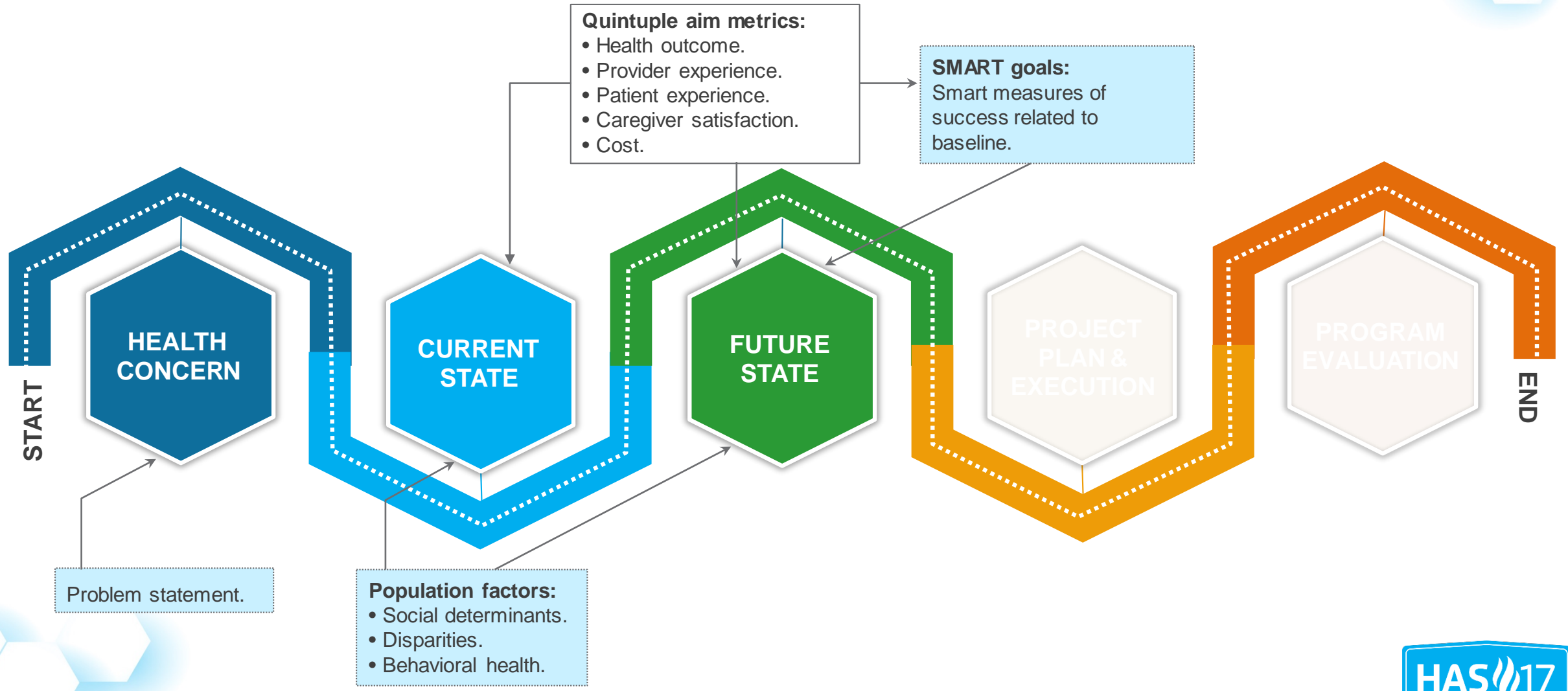
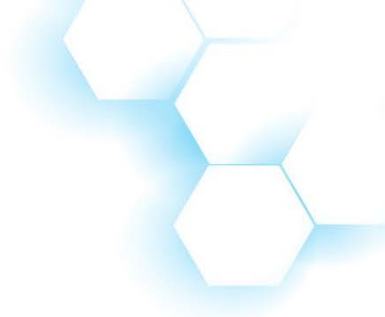


Table Exercise (10 minutes)



Team Exercise Topics for Selection: Health Coaching or Telemedicine

Template Topic	Reference	Team Exercise:
<i>Health Issue to be Improved Upon</i>	Succinct Problem Statement	
Current State		
<i>Population Factors</i>	Social Determinants Disparities Behavioral Health factors	
Desired Future State		
<i>SMART Goals</i>	SMART (specific, measurable, actionable, realistic, and timed) measures of success compared to baseline	

Health Improvement Topics

Table Exercise

- **Health coaching** for patients seeking to improve the management of their diabetes.
- **Telemedicine** for urgent care conditions.



Group Report

Discuss and report the following:

Define
problem.

Population
factors.

Metrics that
demonstrate
value.

Key Takeaways and Lessons Learned

Clear articulation of the health issue being addressed, which is missing in most initiatives.

1

2

Thorough assessment of the sub-populations in question with attention to the social determinants, disparities, and behavioral issues.

Pre-and post measures of value defined in terms of the quintuple aim and clearly related to the health issue in question.

3

Future Plans

Develop a workbook and website for health improvement initiative education.

Formalize the educational approach for the population health template.

Develop capstone course for Jefferson College of Population Health.

Thank You