Roundtable on Population Health Improvement

Board on Population Health and Public Health Practice

2017 Annual Report
MESSAGE FROM THE CO-CHAIRS

George Isham and Sanne Magnan

The roundtable’s fifth year represented a productive continuation of its role as a preeminent national forum for building the population health field. Members and outside colleagues reported that research pursuits, program activities, and new collaborations were inspired and informed by the roundtable’s work.

In 2016, the roundtable developed a theory of change to illustrate its process and goals. The theory of change is that the activities organized by roundtable—such as workshops, perspectives, and collaboratives—and tactics that include raising awareness, framing issues, posing questions, and making connections can catalyze actions to improve population health. The theory of change includes a structured exploration of the six conditions of influence to help shape and inform the field: resources, relationships, policy, communication, metrics, and research.

Through strategic planning, the roundtable members decided to focus 2017 and 2018 efforts on highlighting the following determinants of health: equity, education, and economics, or the three Es. Following its 2016 workshop Framing the Dialogue on Race and Ethnicity to Advance Health Equity, the roundtable also committed to making health equity a permanent lens for all activities.

The roundtable hosted four workshops in Washington, DC, Prattville, AL, New York City, and Oakland, CA. Topics ranged from health implications of climate change to the ways that tax policies could be designed to support population health improvement. To extend the work, we focused on multi-sector collaboration; e.g., we invited education experts to participate in a dialogue on common ground for effect and collaboration. We also organized our workshops to include practical experiences and tools, such as a small group exercise on how to develop a tax or tax credit policy.
Members also participated in workgroups, and with outside colleagues, in two topical collaboratives that advanced the conversation and facilitated important relationships. Staff and members continued their engagement in external stakeholder convenings, which offered opportunities to disseminate roundtable products and form new collaborative relationships.

In 2018, we are excited to welcome Joshua Sharfstein as a co-chair of the roundtable with one of us George Isham retiring from the roundtable. We will continue to focus on the three Es, including an evolving conversation about a well-being economy—advancing the health-in-all-policies approach in broader context and with attention to the flow of funds in society and how it supports or impedes community health, prosperity, and vibrancy.

We look forward to another fruitful year for the roundtable and working together toward a culture of health and well-being.

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Visit us at http://www.nas.edu/PopHealthRT.
“Doing something urgently about the global climate crisis, could be the largest public health opportunity we’ve had in a very long time.”

– Heard at workshop on climate change and health.

Looking Back
Roundtable Activities in 2017

Workshops
The roundtable met four times in 2017. Based on 2016 strategic planning, the roundtable held workshops on the three Es: education and economics (as two key social determinants of health), and health equity, which the roundtable resolved to consider a permanent lens for its work.

In 2017, the roundtable’s workshops addressed the topics of rural health equity, early childhood care and education, tax policy, and climate change. All workshops were webcast live; video and slide presentations for these events are archived at http://www.nas.edu/PopHealthRT. In addition, the roundtable convened collaborative activities.

Protecting the Health and Well-Being of Communities in a Changing Climate
In March 2017, the roundtable worked with the Roundtable on Environmental Health Sciences, Research, and Medicine to explore the implications of climate change for population health and the potential strategies that public health, environmental health, health care, and related stakeholders can implement to help communities and regions address and mitigate health effects. The roundtable featured presentations that ranged from interfaith and private-sector actions to strengthen the environmental features that mitigate the effects of climate change, to health-sector efforts to lower environmental impacts in ways that support improved health outcomes.
Rural Health Equity and Well-Being: Challenges and Opportunities

In June 2017, the roundtable held a joint workshop with the Roundtable on the Promotion of Health Equity to explore a range of initiatives focused on improving community well-being. The objectives of this workshop were: (1) to explore the impacts of racial inequities, economic issues, and immigration on U.S. rural communities; and (2) to learn about asset-based approaches to addressing these challenges in initiatives that improve population health and health equity. The workshop included invited presentations on and discussions of initiatives created to tackle systematic disinvestment in rural communities and implications for improving the social determinants of health, including access to and quality of health care services. The workshop was intended to illustrate some promising and constructive actions that rural communities facing these enormous challenges are taking to equitably improve residents’ health and well-being.

“Rural communities are close-knit. People know each other. They come to each other’s aid. They are resilient. There are a lot of really positive factors about being in a rural community that can be leveraged”

– Heard at workshop on rural health equity.
Exploring Early Childhood Care and Education Levers to Improve Population Health

In September 2017, the roundtable explored the intersection of health and early childhood care and education, two key social determinants of health. The workshop featured perspectives of experts from the health, child care, early childhood education, and other relevant sectors, and explored topics such as the state of the evidence, shared outcomes/metrics, financing, and ways that health-sector leaders and practitioners can partner with and support care- and education-sector colleagues.

Participants from Colorado, Missouri, Nebraska, and other communities showcased state- and local-level approaches and organizational strategies to create incentives and partnerships for better access and quality of early childhood care and education. Speakers and audience members discussed effective interventions to improve early literacy, and began an inquiry into the possibilities for integrating measures of educational attainment in the health sector, including payment models.

Exploring Tax Policy to Advance Population Health, Health Equity, and Economic Prosperity

In December 2017, the roundtable addressed the use of tax policies to channel resources and shape economic incentives affecting population health. The workshop began with a “tax policy 101” overview. Other presentations and discussion ranged from extant and potential excise taxes and the conditions and considerations needed to enact them, to state budgetary environments and available opportunities.

Participants engaged in table-top tax policy design exercises for the fictional state of Ourlandia, equipped with state revenue and spending figures and thought-provoking questions about who is harmed and who benefits from a particular policy approach.

“...young children thrive when they have secure, positive relationships with adults who are knowledgeable about how to support their development and learning and are responsive to their individual progress.”

– Heard at the workshop on early childhood care and education.
 Proceedings of a Workshop

Advancing the Science to Improve Population Health was released in January 2017. It summarized the workshop presentations and discussions that explored the basic and translational research needs for population health science, and discussed specific research priorities and actions to foster population health improvement. This workshop was designed to provide frameworks for understanding population health research and its role in shaping and having an effect on population health; identify individual and institutional facilitators and challenges regarding the production, communication, and use of research for population health improvement; and identify key areas for future research critical to the advancement of population health improvement.

In January 2017, Community Violence as a Population Health Issue was released. It provided an overview of the presentations and discussions that explored the influence of trauma and violence on communities. The publication highlighted examples of community-based organizations using trauma-informed approaches to treat violence and build safe and healthy communities. The proceedings showcased examples that can serve as models in different sectors and communities and shared lessons learned.

Exploring Equity in Multisector Community Health Partnerships was released in June 2017. The publication summarized the presentations and discussions that built on previous National Academies of Sciences, Engineering, and Medicine workshops that explored how safe and healthy communities are a necessary component of health equity and efforts to improve population health. The proceedings explored how a variety of community-based organizations worked with and through multisector health partnerships to engage residents, reduce health disparities, and improve health and well-being.

In October 2017, the roundtable’s 18th Proceedings of a Workshop, Protecting the Health and Well-Being of Communities in a Changing Climate, was released. It summarized the presentations and discussions that share current approaches and explore potential strategies for public health, environmental health, health care, and related stakeholders to help communities and regions to address and mitigate the health effects of climate change.

All roundtable proceedings to date are available for free download at http://www.nas.edu/PopHealthRT under Publications.
Discussion Papers and Commentaries*

In 2017, a total of 10 papers authored by individuals or groups of relevant experts associated with the roundtable were posted on the National Academy of Medicine’s Perspective page at https://nam.edu/perspectives. Paper topics ranged from accountable communities for health to the value of business investment in community health.


- **Philanthropy and Beyond: Creating Shared Value to Promote Well-Being for Individuals in Their Communities** [https://nam.edu/philanthropy-and-beyond-creating-shared-value-to-promote-well-being-for-individuals-in-their-communities/](https://nam.edu/philanthropy-and-beyond-creating-shared-value-to-promote-well-being-for-individuals-in-their-communities/)


- **Case Study: Nationwide Children’s Hospital: An Accountable Care Organization Going Upstream to Address Population Health** [https://nam.edu/case-study-nationwide-childrens-hospital-an-accountable-care-organization-going-upstream-to-address-population-health/](https://nam.edu/case-study-nationwide-childrens-hospital-an-accountable-care-organization-going-upstream-to-address-population-health/)


• The ROI of Health and Well-Being: Business Investment in Healthier Communities [https://nam.edu/roi-health-well-business-investment-healthier-communities/]

• Elements of Accountable Communities for Health: A Review of the Literature [https://nam.edu/elements-of-accountable-communities-for-health-a-review-of-the-literature/]

Disclaimer: The views expressed in these papers are those of the authors and not necessarily of the authors’ organizations, the National Academy of Medicine (NAM), or the National Academies of Sciences, Engineering, and Medicine (the National Academies). The papers are intended to help inform and stimulate discussion. They are not reports of the NAM or the National Academies. Copyright by the National Academy of Sciences. All rights reserved.

Other Activities

The roundtable and staff continued to support the work and learning of two action collaboratives: one on bridging public health and health care, and the other on the business role in building healthy communities. Collaborative activities included webinars, conference calls, and an in-person meeting.

In October 2017, the roundtable and the National Academy of Medicine co-hosted the fifth annual DC Public Health Case Challenge, a problem-based learning opportunity in which teams from area universities compete in developing innovative responses to a hypothetical case/call for proposals.

The 2017 case was developed around two key threats to the well-being of Washington, DC’s youngest residents: lead poisoning and adverse childhood experiences. Six teams competed and were judged by a panel with expertise in early childhood health and development, child health policy, and social work. A grand prize and three categorical prizes were awarded. A stakeholder dialogue is being planned for early 2018 to bring students together with leaders from relevant DC-area nonprofits and local government.
Looking Forward
Roundtable Activities in 2018

In 2018, roundtable members and staff will host four workshops and will continue two or more collaborative efforts to encourage broad external engagement on topics of relevance to population health, in addition to continuing to disseminate and build on past work through webinars, dialogues, and writings.

Workshop topics for 2018 will likely include the following:

1. March 2018: a workshop on faith-based health assets exploring their collaboration with the public and health sectors, describing lessons about effectiveness and lack thereof (including challenges and barriers), and showcasing work that has achieved improved outcomes.

2. June 2018: a workshop on education that builds on previous dialogue about this key social determinant of health and the cross-sector engagement necessary.

3. October 2018: a workshop co-hosted with the Interdisciplinary Association for Population Health Science to explore past achievements and future frontiers.

4. December 2018: a workshop on economics, examining the ways in which economic and related policies can support the improvement of population health.
Looking Forward:
Roundtable Activities in 2018
ROUND TABLE MEMBERS

George J. Isham (Co-Chair)
HealthPartners, Inc.

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ROUNDTABLE VISION AND MISSION

The roundtable’s vision is of a strong, healthful, and productive society that cultivates human capital and equal opportunity. This vision rests on the recognition that outcomes such as improved life expectancy, quality of life, and health for all are shaped by interdependent social, economic, environmental, genetic, behavioral, and health care factors. Altering these factors will require robust national and community-based actions and dependable resources to achieve them.

The roundtable intends to catalyze urgently needed action toward a stronger, more healthful, and more productive society. The roundtable will therefore facilitate sustainable collaborative action by a community of science-informed leaders from public health, health care, business, education, early childhood development, housing, agriculture, transportation, economic development, and nonprofit and faith-based organizations.

ROUNDTABLE STAFF

ALINA B. BACIU
Project Director

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Senior Program Assistant

CARLA ALVARADO
Program Officer (from October 2017)

DARLA THOMPSON
Program Officer (until August 2017)

ROSE MARIE MARTINEZ
Director, Board on Population Health and Public Health Practice

ROUNDTABLE SPONSORSHIP

Aetna Foundation
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HHS Program Support Center
Kaiser Permanente East Bay Community Foundation
Kresge Foundation
Nemours
New York State Health Foundation
NYU School of Medicine Department of Population Health
ReThink Health
Robert Wood Johnson Foundation
Samueli Institute
Wake Forest Baptist Medical Center/Stakeholder Health


About the Roundtable on Population Health Improvement

The Roundtable on Population Health Improvement was established in February 2013 to bring together philanthropy, community-based organizations, health care delivery, governmental public health, academia, and business in a wide-ranging dialogue about what is needed to improve health in the United States and across diverse populations. Multiple National Academies reports have added to a growing chorus of concern that while U.S. spending on health care services has no peer, the nation’s performance as measured by key health metrics leaves much to be desired. Finding solutions calls for acknowledging that health is created by many different factors, and that child poverty, the high school dropout rate, and a lack of affordable housing, to name a few such factors, have far-reaching consequences for the health of individuals, communities, and the nation. Finding solutions will also require unusual partnerships and creative interactions across disciplines and sectors, involving a combination of individual resolve, community action, and societal commitment. To inform the dialogue among those seeking and implementing such solutions, the roundtable organizes four workshops per year to explore topics of interest and showcase promising examples and lessons learned.

Information about past and upcoming events is available at the roundtable’s website at http://www.nas.edu/pophealthRT.

About the National Academies of Sciences, Engineering, and Medicine

The National Academy of Sciences, National Academy of Engineering, and National Academy of Medicine work together as the National Academies of Sciences, Engineering, and Medicine (“the Academies”) to provide independent, objective analysis and advice to the nation and conduct other activities to solve complex problems and inform public policy decisions. The Academies also encourage education and research, recognize outstanding contributions to knowledge, and increase public understanding in matters of science, engineering, and medicine.

The Health and Medicine Division (HMD), formerly known as the program unit of the Institute of Medicine, is a division of the Academies. HMD’s aim is to help those in government and the private sector make informed health decisions by providing evidence upon which they can rely. Each year, more than 3,000 individuals volunteer their time, knowledge, and expertise to advance the nation’s health through the work of HMD.

Many of the studies that HMD undertakes are requested by federal agencies and independent organizations; others begin as specific mandates from Congress. While our expert, consensus committees are vital to our advisory role, HMD also convenes a series of forums, roundtables, and standing committees, as well as other activities, to facilitate discussion; discovery; and critical, cross-disciplinary thinking.