



RiseVT Presentation to Opioid Coordinating Council

February 12, 2018

Jill Berry Bowen, CEO
Northwestern Medical Center &
RiseVT Board Chair

RiseVT is a *Movement!*

Our Franklin Grand Isle

RiseVT Vision:

To Embrace Healthy
Lifestyles.

Our Statewide

RiseVT Vision:

Vermont will be
recognized as
the healthiest state
in the nation
with healthy living
the norm.



We developed a "stairway speech" for consistent messaging:

**RiseVT is a
community
collaborative to
embrace healthier
lifestyles, improve
the quality of life,
and lower
healthcare costs
where we live,
work, play, and
learn.**



The RiseVT Roadmap to a Healthier Future

Getting Started:

- Develop relationships between local stakeholders;
- Initial assessment of interest in pursuing primary prevention;
- Convene a diverse community group of leaders/stakeholders.

Understanding the Data:

- Review the local Community Health Needs Assessment;
- Review the VDH data specific to the service area;
- Review the One Care VT data specific to the service area;
- Review other relevant qualitative and quantitative data;

Inventorying Existing Resources & Readiness:

- Are the right people at the table for this priority?
- What is currently being done in the community around the priority?
- What infrastructure exists that can help with the priority?
- Who can bring what resources to the effort to address the priority?

Deciding to Move Forward:

- What stands out in the data as pressing priorities?
- Is there a priority the group wants to tackle together?
- Will the group commit to working together on this issue?

Conduct Results Based Accountability Process:

- Secure a facilitator trained in the RBA/Turn the Curve Process;
- Have diverse community group work through the RBA process;
- Identify desired outcomes, specific measures to be used, how progress will be measured, and long–mid– and short-term goals.

Drafting An Action Plan:

- What does best practice say will positively impact the priority to achieve the identified outcomes?
- What actions should be taken by who and by when?

Finalize the Action Plan:

- Organize RBA, draft action steps, and steps to align with EPODE methodology into a formal written action plan with specific timelines and point people for each action item;
- Create a dashboard of long-, mid-, and short-term indicators to track the progress.

Aligning with the EPODE Pillars:

- Plan how you will foster political support of your efforts;
- Identify how you will connect with the Scientific Advisory Council;
- Plan the development/expansion of public/private partnerships;
- Begin to plan a social marketing campaign (including social media) as a strategy to facilitate behavior change relating to priority;

Evolving the Structure:

- Reassess if the right people are engaged, changing as needed;
- Create an Executive Committee to steer local efforts;
- Create a Community Advisory Group to provide insight, advice, assistance, and connections across sectors within the community;

Pursuing the Resources:

- Revisit initial inventory of resources and engage partners in the effort to make use of existing staffing, funding, facilities, events, tools, communication vehicles, and other assets to create a shared approach to implementing the action plan;

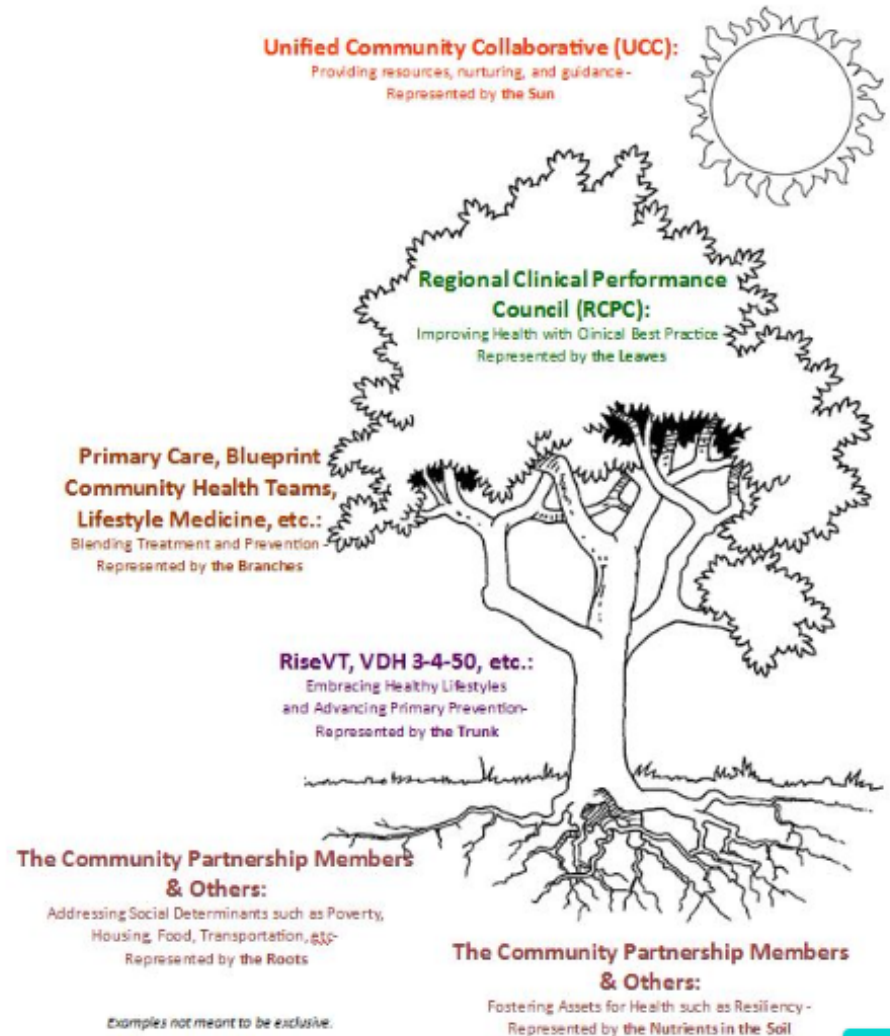
Evaluation:

- Collect and review participation and engagement measures;
- Monitor progress toward short-, mid-, and long-term goals;
- Re-assess and refine action plan based on progress to ensure outcomes;
- Arrange for an EPODE assessment of approach and progress.

Launch and Sustain the Movement!

- Refine action steps based on resources;
- Launch efforts, including communication blitz;
- Foster quick wins with individuals, schools, towns, & businesses;
- Work through action plan with ongoing monitoring and mid course correction for continuous improvement based on learnings

RiseVT has helped establish primary prevention as a valued strategy within our Accountable Community for Health in northwestern Vermont.





Ongoing Measurement of Engagement

WHO'S ALREADY RISING?



18997

PEOPLE

[VIEW ALL](#)



46

BUSINESSES

[VIEW ALL](#)



16

SCHOOLS

[VIEW ALL](#)



9

COMMUNITIES

[VIEW ALL](#)

Our Population Indicators

BRFSS (2014-15) or YRBS (2015)	FR (%)	GI (%)	VT Current (%)	US Current (%)	Vermont Target (%)	RiseVT Target (July 1, 2019)
% of adults (20+) who are obese	30	24	25	29	20	29%/23%
% of adolescents in grades 9-12 who are obese	16	19	12	14	8	15%/18%
% of adults eating fruit 2 or more times daily	33	26	32	29	45	35/28
% of adolescents in grades 9-12 eating fruit 2 or more times daily	31	28	34	32	40	33/30
% of adults eating vegetables 3 or more times daily	18	15	20	17	35	20/16
% of adolescents in grades 9-12 eating vegetables 3 or more times daily	13	16	18	15	20	15/16
% of adults meeting aerobic physical activity guidelines	49	60	59	51	65	50/61
% of adults with no leisure time aerobic physical activity	26	20	21	26	15	26/20
% of adolescents in grades 9-12 meeting physical activity guidelines	25	22	23	27	30	27/24
% of students who agree that in their community they feel like they matter to people. (protective factor)	FRCE 46 FRNE 48 FRNW 35 FRW 45	48	50	N/A	N/A	1% each school
% of adults exposed to second-hand smoke	50	N/A	46	37.8 (2005-08)	35	45
Increase number of eligible families enrolled in WIC (WIC data)	1,379 June 2017	N/A				1,480 (July 1, 2018)
Increase % of infants being breastfed (birth certificate data)	83% Quarter ending 12/2016		90% Quarter ending 12/2016			85%
Decrease % of women using tobacco during pregnancy (birth certificate data)	19% Quarter ending 12/2016		17% Quarter ending 12/2016			15%
Increase number of Breastfeeding Friendly employers	52	2	N/A	N/A	N/A	62/4

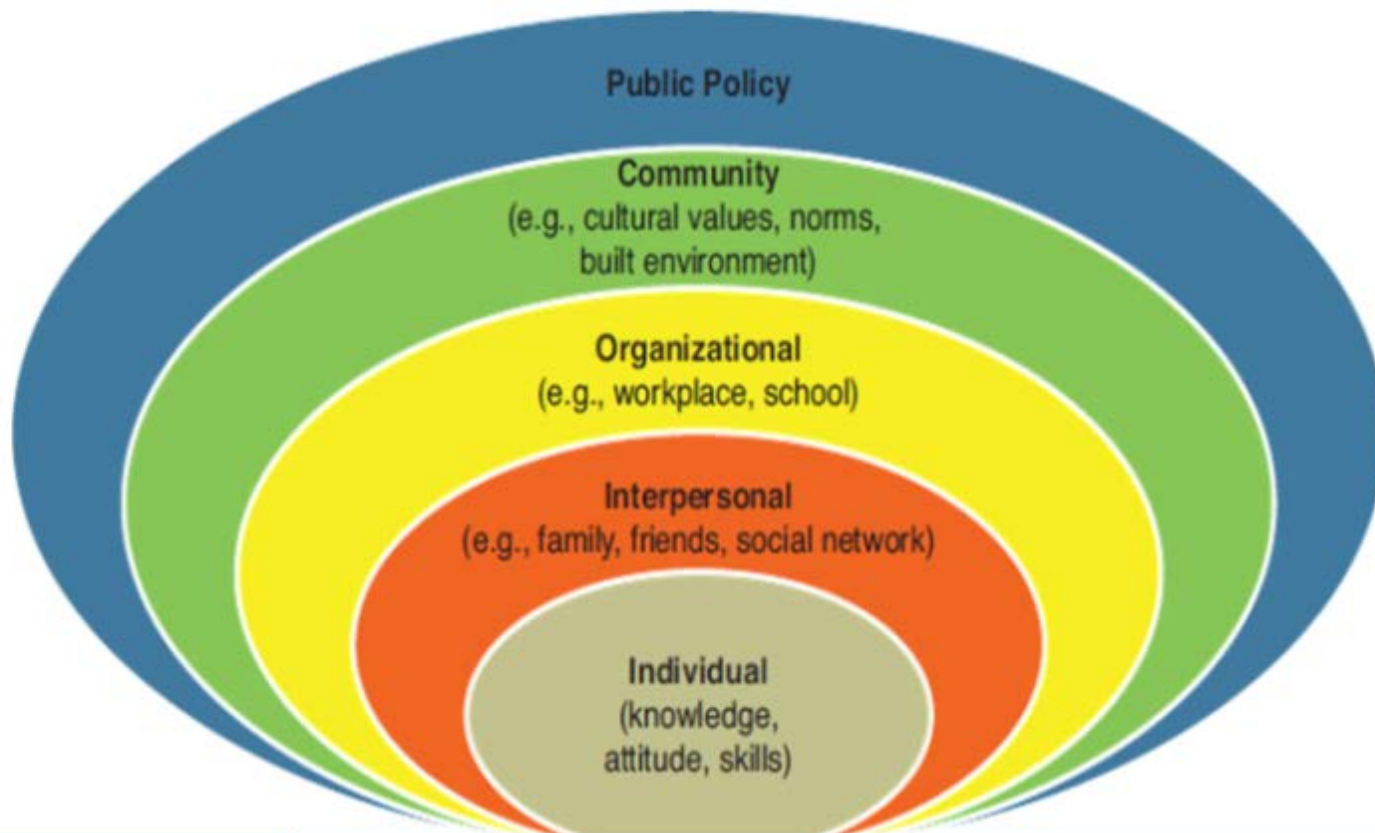
Program Evaluation

2018 Franklin Grand Isle RiseVT
Results Based Accountability – Metrics to evaluate our impact
IS ANYONE BETTER OFF?

	Numerical Target	GOAL: % Increase/decrease
Individuals	60 NEW PEOPLE	30% decreased their risk factors
		40% meet their 3 month goal
Schools	16 SCHOOLS	75% have active wellness committees (meet 4x/year)
		12.5% of schools increase their <u>wellsat</u> score (VDH tool to grade school wellness policies)
Classrooms	30	50% are at silver or above by end of school year
Worksites	55 WORKSITES (currently 46)	30% increase in scorecard level
	20 Policies @ worksites	50% NEW fully implemented wellness policies
		Each of our 55 worksites has 50% of employees engaged in worksite wellness. (defined as participation in at least one wellness initiative offered at work).
Municipalities	9 Municipalities	90% increase in scorecard level
		50% of the assessments performed moved forward to action

Socio-Ecological Model

Vermont's Prevention Model: Socio-ecological Model



CDC's Evidence-Based Approaches



**Centers for Disease
Control and Prevention**
National Center for
Health Statistics



Increasing Physical Activity: Built Environment Approaches

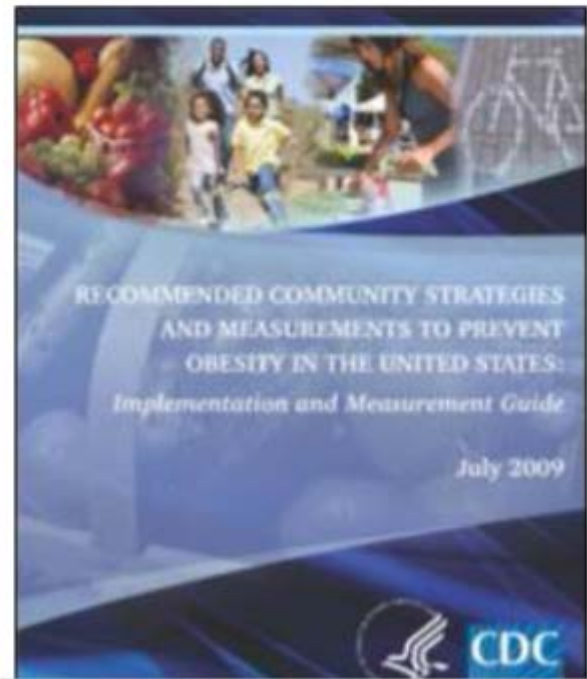


Community Preventive Services Task Force Recommendation

The Community Preventive Services Task Force recommends built environment strategies combining one or more intervention approaches to improve pedestrian or bicycle transportation systems with one or more land use and environmental design interventions based on sufficient evidence of effectiveness in increasing physical activity. Their recommendation is based on a systematic review of all available evidence.

Facts about Physical Activity

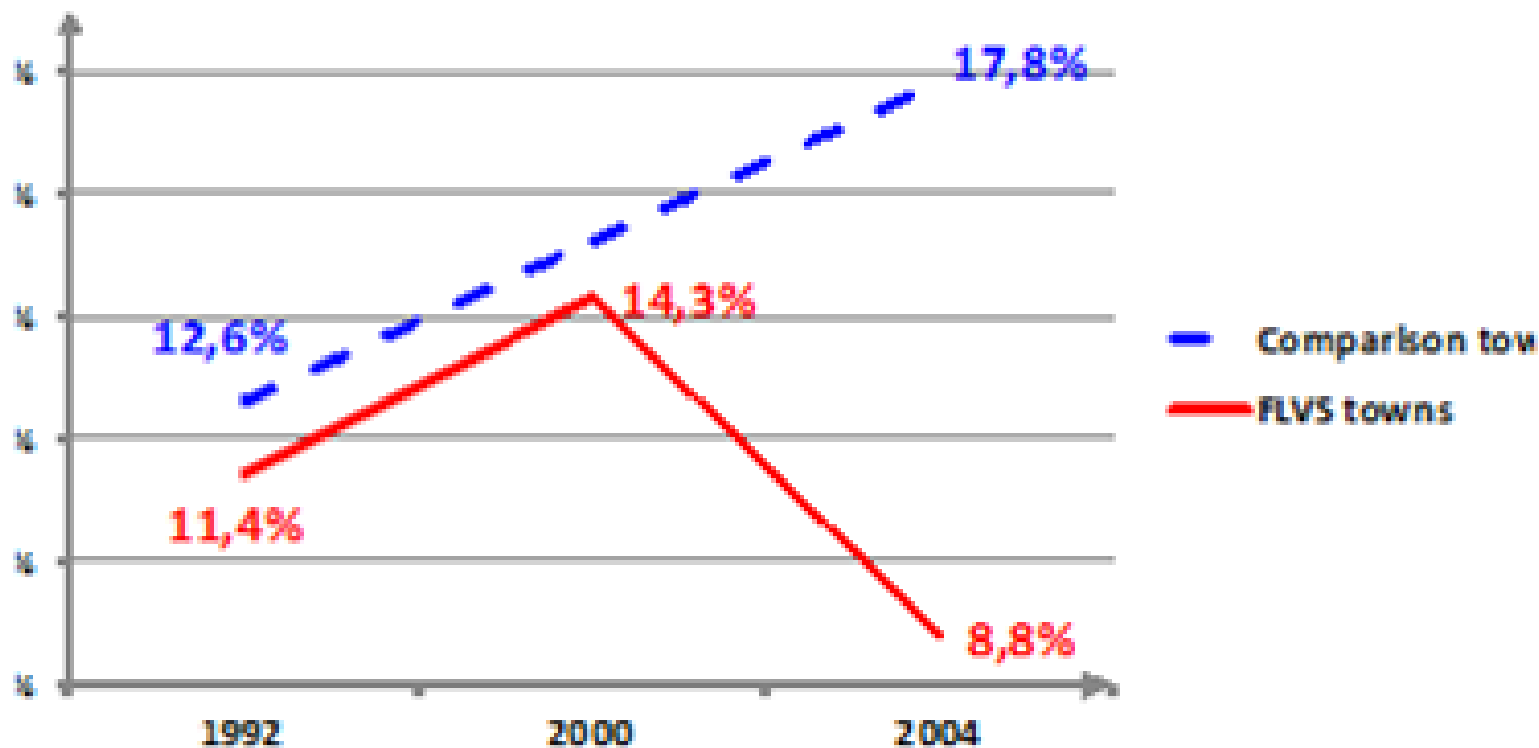
Despite the benefits, less than half of all adults, and 3 in 10 high school students in the United States, get the recommended daily amounts of physical activity.^{2,7}



EPODE's impact on children overweight & obesity

Results FLVS, 1992 – 2004

Prevalence of Overweight and Obesity



(1) Romon & Al., *Public Health Nutrition*, 2009; 12: 1735–1742

The EPODE Model



EPODE Pillars of Success



Building Resilient Communities to Address ACEs



WELLNESS

ACCESS

EDUCATION

ENGAGEMENT

SELF-SUFFICIENCY

PARTNERSHIP

QUALITY

EFFICIENCY



"Community resilience is a measure of the sustained ability of a community to utilize available resources to respond to, withstand, and recover from adverse situations."



Why Invest in A Healthier Future?

Embracing healthier lifestyles can have a significant impact on healthcare costs and quality of life.



The Research-Based Reality:

“For every dollar we spend on prevention, we see a five-to-one return on investment in just five years. We simply can't fix our economy without it.”

-- The Prevention Institute

Examples of Our Community Embracing Healthy Habits



2017 Heart Walk with NMC and Vermont Precision Tools employees

- RiseVT is actively working with 46 businesses, fostering employer-based **wellness initiatives for over 3700 employees**;
- RiseVT created the **Small Business Umbrella** (SBU) in St. Albans for micro businesses (less than 15 employees) in 2016 and it is being replicated in Enosburg and Swanton in 2017.
- The Mayor proclaimed St. Albans a "**breast feeding friendly city**" as a result of the SBU initiative which boosted the number of breast feeding friendly businesses from 4 to more than 50.

Examples of Our Community Embracing Healthy Habits



RiseVT assisting with healthy community design in Swanton.

- RiseVT's work with 9 municipalities has led to the **installation of signage** around community parks and paths, a **complete streets design in Swanton**, and the development of **the first sidewalks in Highgate**.
- This year RiseVT is working to assist in advancing **20 policies in municipalities**.

Examples of Our Community Embracing Healthy Habits



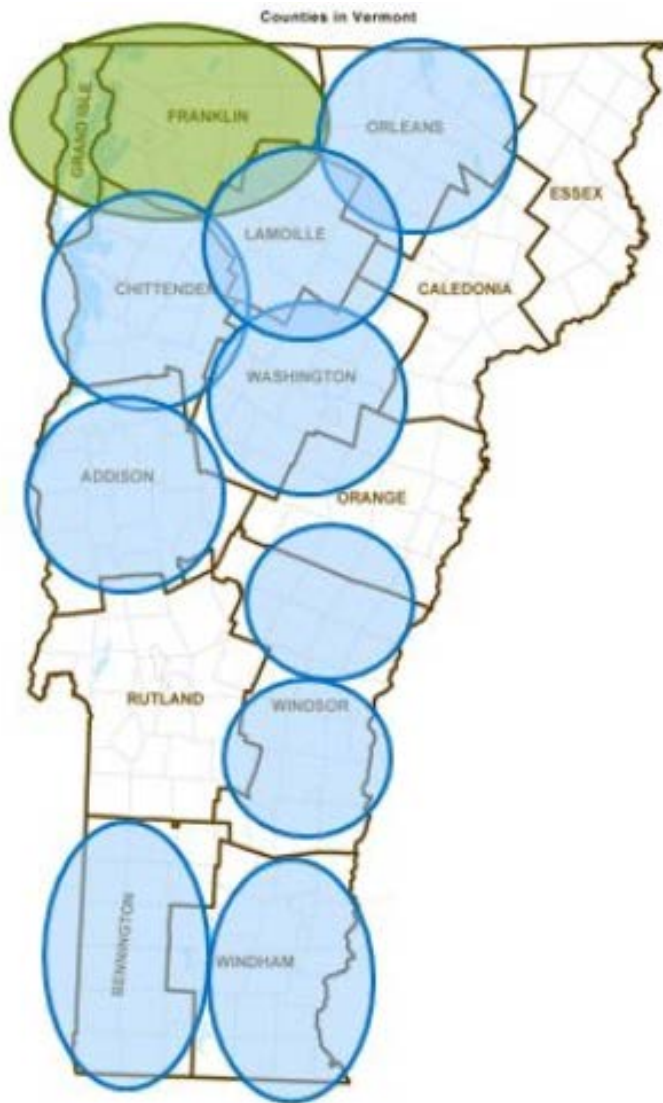
Local school children and parents on the walking school bus.

- RiseVT is partnering with 16 schools in our region which has led to a greater levels of engagement in **Safe Routes to School**.
- RiseVT has increased the capacity of Local Motion in our region, leading to over **2000 children trained in bike safety** and having access to helmets.
- RiseVT influenced **extended days in 2 schools** to provide children with more opportunities to move and play.
- RiseVT was awarded a Voices For Healthy Kids Grant to support grassroots support for **wellness policy creation and adoption by school boards**.

RiseVT – An Exciting Future

Moving Forward with





Statewide RiseVT Board of Directors

- **Jill Bowen**, CEO of Northwestern Medical Center;
- **Eileen Whalen**, COO of UVMMC;
- **Steve Gordon**, CEO of Brattleboro Memorial;
- **Don George**, CEO of BC/BS;
- **Dr. Mark Levine**, Commissioner of Health;
- **Todd Moore**, CEO of OneCareVT;
- **Chris Hickey**, NMC Chief Financial Officer
- **Winton Goodrich**, Superintendent of Schools, Franklin Northwest
- **Dr. Deanne Haag**, Pediatrician; and
- **Janet McCarthy**, Franklin County Home Health Agency, NMC Board, OneCareVT Board
- **Lisa Ventriss**, Executive Director of Vermont Business Roundtable
- **Beth Tanzman**, Executive Director, Vermont Blueprint for Health

Keeping Healthy People Healthy

Population Based Health Care Approach



➤ 44% of the population

➤ Focus: Maintain health through preventive care and community-based wellness activities

➤ Examples:

- Rise VT primary prevention program
- PCMH panel management
- Wellness campaigns (e.g. 3-40-50, health education and resources, wellness classes, parenting education)

➤ 6% of the population

➤ Focus: Address complex medical & social challenges by clarifying goals of care, developing action plans, & prioritizing tasks

➤ Examples:

- Complex care coordination: lead care coordinator, shared care plans, care conferences
- Community QI projects on hospice utilization
- Provider and patient education on palliative care (e.g. September OCV Grand Rounds)

➤ 40% of the population

➤ Focus: Optimize health and self-management of chronic disease

➤ Examples:

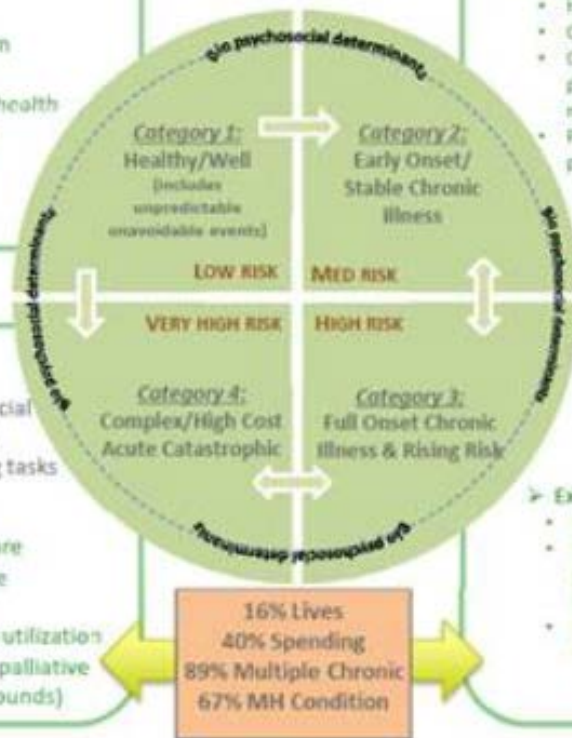
- HTN Peer-to-Peer Learning Collaborative
- QI Change Packages
- CHT resources (e.g. tobacco cessation, nutrition & physical activity coaching, diabetes self management)
- Patient resource library in Care Navigator (in progress)

➤ 10% of the population

➤ Focus: Active skill-building for chronic condition management; identify & address co-occurring SDoH

➤ Examples:

- Embedded mental health in primary care
- SDoH screening (e.g. food insecurity in/out patient peds; VT Self Sufficiency Outcomes Matrix for patients with complex CC needs)
- Care coordination: coordinate among care team members; shared care plans; transitions of care



Assembling an Exceptional Team

Elisabeth Fontaine, MD
Medical Director, RiseVT

Marissa Parisi
Executive Director, RiseVT Statewide

Emilia Wollenburg
Program Manager, RiseVT Statewide



Next Steps

Advancing the statewide expansion of RiseVT

- Onboarding the statewide staff in Dec & Jan
- Developing primary prevention population health indicators within the ACO
- Scaling up in 10 communities
- Hosting statewide education with EPODE

Summary

- RiseVT is a movement to amplify the great work and community assets that already exist and to further support a common methodology for primary prevention.
- RiseVT is an evidence based primary prevention strategy that is adaptable and transferable to meet the community's needs.
- RiseVT places the emphasis on children and community based intervention, in a collective impact framework of a community working together with a common purpose.
- RiseVT is creating the conditions in our communities to support making the healthy choice the easy choice.