

Primary Care-Public Health Study Key Qualitative Findings

Rebekah Pratt, PhD

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Beth Gyllstrom, PI



Minnesota Investigators

Beth Gyllstrom, PhD, MPH

Beth.gyllstrom@state.mn.us

651-201-4072

Kevin Peterson, MD, MPH

peter223@umn.edu

612 624-3116

Kim Gearin, PhD, MS

Kim.gearin@state.mn.us

651-201-3884

Rebekah Pratt, PhD

rjpratt@umn.edu

612-625-1196

Carol Lange, MPH, RD

lange076@umn.edu

612-624-3125

MN Public Health Research to Action Network:

<http://www.health.state.mn.us/ran>

Partner State Investigators

Colorado



Lisa VanRaemdonck, MPH
Sarah Lampe, MPH
Colorado Association of
Local
Public Health Officials



Don Nease, MDH
University of Colorado,
Denver

Washington



Betty Bekemeier, PhD, MPH,
MSN, RN
University of Washington,
School of Nursing



Laura-Mae Baldwin, MD, MPH
Gina Keppel, MPH
University of Washington,
Department of Family
Medicine

Wisconsin



Susan Zahner, DrPH, RN
Tracy Mrocek, MPH
University of Wisconsin-
Madison School of Nursing



David Hahn, MD, MS
Erin Leege, MPH
University of Wisconsin
School of Medicine & Public
Health

Background

The Institute of Medicine (IOM) makes a compelling case that increased collaboration between primary care and public health is crucial to population health, and the Affordable Care Act provides new incentives and expectations for such partnerships.



Primary Care and Public Health: Exploring Integration to Improve Population Health.
IOM (Institute of Medicine). 2012.

Primary Care-Public Health Joint Study

Purpose

- Develop measures and use them to identify differences in integration.
- Identify factors that facilitate or inhibit integration.
- Examine the relationship between extent of integration, and services and outcomes in select areas (immunizations, tobacco use, and physical activity).

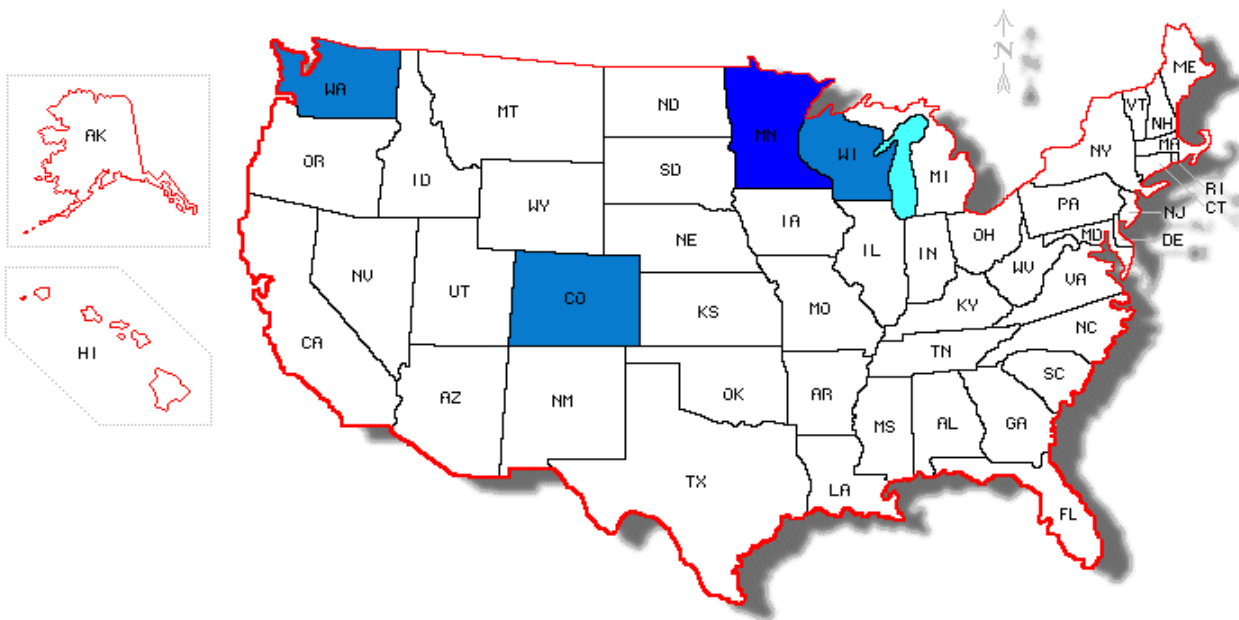


Primary Care-Public Health Study



Robert Wood Johnson Foundation

Participating States



Research Questions

- How does the degree of integration between PC and PH vary across local jurisdictions?
- What factors facilitate or inhibit integration, and how can PC and PH leverage those factors to increase integration?
- Does the degree of integration differ based on health topic?
- Do areas of greater integration have better health outcomes?

Qualitative Component

- In early 2014, each state conducted at least 5 pairs of key informant interviews that engaged a public health director and primary care representative from the same jurisdiction.
- Participants selected to represent a variety of primary care and public health organizational structures and geographic variation across the four states.
- In 2016, the primary care and public health practitioners who served as key informants will be invited to participate in focus groups to review, refine and validate findings.

Qualitative Analysis

- 40 interviews analyzed in total
- 10 in each state
- Emerging themes identified through systematically through the data
- Coding was done independently of theoretical models, allowing a fresh perspective
- Qualitative analysis contributes to all of the research questions

Findings

- Four key conceptual thematic areas
 - Partnership
 - Shared Strategic Vision
 - Opportunity
 - Collaboration Context

~~Integration~~

Partnership

“For me it has been a huge learning opportunity. I see them as equal partners. I think that you know I have been so many times amazed with regards to what they have been able to deliver, when we have a collaboration and how dedicated they are. So I cannot say better things. It’s just great to have this opportunity.” (Minnesota, Primary Care).



- **Aligned leadership:** having the right people at the table to champion and lead the work.
- **Formal processes:** formal roles, structure, agreements and co-location.
 - *“Since we have relocated to (be co-located) our relationship with them has been strengthening significantly. That is the entity who I meet with their administrative team quarterly, we have very good communication back and forth and it is easy for us to identify fairly quickly in the process were we can partner on new instances or even identifying new potential community issues or problems that may not be showing up yet in the data, but both of us are seeing in our daily work. So, I think the co-location has made a significant difference in that relationship.”*
(Wisconsin, Public Health)

Shared Strategic Vision

- ***Commitment to a shared strategic vision***; strategic planning, particularly community health needs assessments, partner in conducting planning, and then addressing mutually identified needs.
- *So we have had our primary care providers as part of our team that has done our community health assessment, which we do every five years. And then they are also a part of the team that develops our Community Health Improvement plan so once our top three health priorities are identified. And then typically those primary care providers continue to serve what we call implementation team. So, for each of our top three health priorities and our plan we have an implementation team and we have primary care representation in each of those implementation teams. (Wisconsin, Public Health)*

- ***Data sharing and analysis***; data driven identification of needs and priorities, needs shared infrastructure and/or expertise.
 - *And we rely pretty heavily on the population data that the Health Department does really, really well. That helps us do our planning and our grant writing and stuff like that. And we recognize that we have a very large degree of overlap in the work that we do, while we may be kind of trying to address different pieces of the puzzle, it is seen as the same big puzzle that we're all trying to work on. (Primary Care - Washington)*

- **Sustainability**; processes that keep partners communicating and connected, financial sustainability, sharing resources, sharing capacity.
- *We have hospital administrators that know they can make a difference if they work as a community. And we have county commissioners that understand that reality as well. As we – if we partner our resources and we collaborate together we can make more of an impact than we can on our own. And it's really been a great community collaboration that I'm not sure is felt in other places as strongly as it is here. (Public Health, Washington)*

Opportunity

- **Opportunity;** building from a crisis, innovation, funded project, and some serendipity
 - *“You’ve got to find those right moments in time. You know, I mentioned the H1N1 kind of thing. I think the—when you get a topical—a content topic that provides an opportunity to make a relationship where you’re both really interested in that, for some reason for that moment. You got to really capitalize on that. And then not lose that benefit that you just created.” (Minnesota Public Health)*
- **Innovation;** funded projects, neutral conveyor, the ‘one to many’ relationship
- **Health reform;** new opportunities, new challenges

Collaboration Context

- ***The collaboration context***; both PH and PC dealing with much change, understanding the particular environment of both, the role of health reform, identifying unique strength of public health as a facilitator across what can be a fragmented health sector
 - *He started a group where we actually pulled in the major health care organizations in town, ... along with the Public Health Department and kind of created a kind of network of care. Which was just the start, I think it has become catalyst of saying, "Wow", from my perspective, I felt at least, from this all the time. Like "Wow this is great!" (Wisconsin PC)*

- ***New culture of health?*** Changing understanding of the purpose/mission of both primary care and public health, greater awareness of social determinants of health
- ***Systems thinking***
 - *Well, I think primary care, and all health care is highly occupied with all the kind of structural changes that are occurring— consolidations and new data systems, and expectations by health plans and payers, I think that all makes it very difficult to focus on health topics, even though all that's being done in the name of health topics, but I think it's, yeah, it's a hectic environment out there, you know? (Minnesota PH)*

Partnership

Opportunity

Shared
Strategic
Vision

Collaboration
Context

Summary

- The study gives voice to what is needed at the local level to advance a collaborative working relationship.
- Findings will be used to identify and promote infrastructure and capacity needed to increase collaboration.
- The study will develop and test measures that could be used to monitor changes those relationships over time.
- The study contributes to stronger relationships, which paves the way for future collaborations.

Limitations

- Small sample given the scale of respondent potential roles and contexts
- Challenges in primary care sample
- Perceptions of key components of relationships, but not linked to outcome data that measures that

Next Steps

- Analyze quantitative survey to primary care and public health representatives from local jurisdictions across the four participating states
- Place local jurisdictions on the continuum of integration (IOM)
- Mixed methods analysis