

NOPREN Hunger Safety Net WG: Meeting Minutes – April 25, 2016

Partner Perspective Presentation: Root Cause Coalition and Tackling Hunger Initiative

Presenters: Jason Gromley and Alex Lewin-Zwerdling

Background

Bio: Jason A. Gromley, Esq. Director of Operations, The Root Cause Coalition

As part of the leadership team of The Root Cause Coalition, Jason plays a critical role in the continued development and implementation of the coalition's strategic plan, recruitment of coalition members, and is responsible for the day-to-day management of the non-profit. In addition to his work with the coalition, Jason is the Vice President of Health Policy and Government Relations at a Washington, D.C. based consulting firm, Strategic Health Care. In this role he counsels his health sector clients on a wide variety of regulatory, legislative, and operational issues affecting patient access, reimbursement, community needs, and economic trends. He also guides his clients in their collaboration with other healthcare leaders, Members of Congress, Agency officials, and other community stakeholders. Jason is a graduate of Drexel University Thomas R. Kline School of Law in Philadelphia and is licensed to practice law in Pennsylvania.

- Ongoing effort for past 2 years but launched 6 months ago
- Partnership between AARP and ProMedica Health System
- Looking to bring healthcare to bear in the conversation around the social determinants, specifically focused in the outset on food insecurity because it plays an important role in long-term health
- Coalition includes: American Hospital Association, Michigan Health Hospital Association, Loma Linda University Health, University Hospitals out of Cleveland, Blue Cross Blue Shield of Minnesota, Paramount Insurance Company, Feeding America, Connecticut Mental Health Center, etc.
- Time to have this conversation in groups like NOPREN, but also with leaders in Congress and legislatures
 - Have more data and info than we have ever had on connection between environment, social determinants, and the long term health of individuals
 - Translates to long-term health of constituents as well as long-term costs of Medicare, Medicaid programs
- Coalition's mission/goals:
 - 1) to bring healthcare more fully into the conversation
 - 2) bring practitioners, physicians, executives from health care industry to the table to meet with traditional not-for-profit organizations that have been working on pieces of puzzle for a long time but lacking coordinated effort to tackle systemic issues
- Solutions to how we address these health needs is going to come from people on-the-ground
- Held 4 regional Hunger Summits around the country in conjunction with the USDA Food and Nutrition Service (loose coalition at this point)
 - Realized that there is a real need and desire to have a roadmap and ability to learn from each other and collaborate and not reinvent the wheel
- Lots of interesting projects, i.e.
 - Screening tools in Boston
 - Community housing in Baltimore
 - Transportation and crime prevention in CA
- Need an organization associated with healthcare (led by healthcare for healthcare to foster collaborations and bring solutions to the table and give operations folks to implement the tools they need)

- Seeing transformative change (i.e. tax status of hospitals being challenged, community health assessments, move towards bundling payments, etc.)—so we, as an industry, need to think more long-term
- Working through 3 facets (advocacy, education, and research) to bring the great minds and individuals working every day in the communities to the table and give the tools they need for long-term health improvement

Research Project

Bio: Alex Lewin-Zwerdling, PhD, MPA, Senior Advisor, AARP Foundation

Alex is currently a Senior Advisor on the Hunger Impact team at the AARP Foundation. She leads up the team's Hunger as a Health Issue platform including research, communications, partnerships and events with a specific focus on integrating nutrition and healthy eating into a broader food security strategy.

Alex previously worked for the USDA's, Food and Nutrition Service. At USDA, Alex led the USDA Foods Communications Initiative which worked to dispel misconceptions about school meal programs and increase awareness and understanding of the nutritional quality of school food.

Alex is Chair-Elect of the Society for Nutrition Education and Behavior's Advisory Committee on Public Policy, has served as a commissioner on the D.C. Mayor's Commission for Food and Nutrition as well as on the D.C. Mayor's Commission for Healthy Schools. She is currently the Chair of the Food Systems Working Group, NOPREN Hunger Safety Net Work Group. Alex graduated from Cornell University and has since received her Masters in Public Administration and PhD in Nutrition, also from Cornell.

- This particular project focuses on the role of health systems in addressing food insecurity in older adults with chronic diseases
- Includes experts in the field including CDC foundation, CDC, PHI, etc.
- **Project has 5 goals:**
 - 1) To identify and disseminate promising practices for addressing the need for food insecure patients through research and best practices
 - Looked at across health care systems as well as community organizations
 - 2) Identify the relationship between food insecurity and healthcare utilization, particularly among those with chronic disease
 - 3) Develop a research agenda for the development and evaluation of those promising strategies
 - 4) Develop and disseminate tools to establish the case for support of strategies to alleviate food insecurity and create linkages between clinical setting and community setting
 - Drawing out and implementing best practices at the same time
 - 5) Establish the evidence and practice base for the Root Cause Coalition
- Little evidence has been generated around effectiveness, cost, sustainability, etc. of strategies used to really meet the needs of the food insecure in a hospital setting
 - Work is happening in these areas but not collected under one umbrella
- Half way through first year of the project
- **Four components of research:**
 - 1) *Economic burden study.* (lit review completed so far) to develop economic argument for change
 - Examine relationship between FI, chronic disease, and health care utilization across patients age 50 and older
 - 2) *Promising practices, evaluability assessment*
 - Study protocol has been developed

- CDC staff has developed logic framework for the relationship between FI, chronic disease, and health care utilization among older adults
- Asking for online nominations regarding promising practices for evaluation to use
- 3) *Advocacy and Practice Tools*
 - www.phihungernet.org—being used to distribute and collect information for the evaluability assessment (online nomination process mentioned above)
 - Working with NOPREN under Food Systems and Food Policy Councils workgroups to develop community health needs assessment guidance to include a local food system assessment
 - Working closely with Root Cause to gather all valuable information from members/experts
- 4) *Consultative Review Group been setup*
 - Experts in FI and health, specifically in older adults
 - Will review the results of the economic burden study and evaluability assessment to further create a research agenda that can continue to highlight promising practices and research

- **QUESTION:** Data for the economic burden study?
 - Using data from National Health Interview Survey Food Insecurity Module and Medical Expenditures survey
- **COMMENT:** University of Georgia researchers have been working on relationship between FI, chronic health conditions, and health care utilization (see paper attached with email).
 - Includes older population—matching with Medicare data
 - Have been analyzing NHIS and MES data
 - Opportunity for collaboration!
- **QUESTION:** Integration of screening into electronic health records?
 - Promedica has worked with their vendor (Epic Systems) to develop a domain for adding two hunger vital sign screening questions and two resource related questions (also include referrals to resources, i.e. referrals to food pharmacy can be made through EHR)
 - 1) All inpatients are screened
 - Has been a point of discussion on various NOPREN calls—can we explore that further given that Promedica has worked successfully with a vendor to embed the questions into the EHR?
- **QUESTION:** Policy solutions at the state level around food insecurity screening? Might be some opportunities with the Section 115 waivers with Medicaid expansion—has that come up as an opportunity? Other opportunities?
 - Root Cause advisory committee looking at state level solutions very closely and needs to be explored further
- **QUESTION:** Advice on how to best engage local health systems in this work? Or how best to connect those already working on this issue with Root Cause’s initiative?
 - Advice for outside organizations looking to work more closely with health care institutions—it is a misnomer that because of the ACA, physicians, hospitals, etc. have unlimited money just waiting to be used. Do not approach a health system in that way. Must work with them on addressing social determinants of health/long-term health issues.
 - Connect through the Root Cause website (<http://www.rootcausecoalition.org/>) or email Jason directly: jgromley@rootcausecoalition.org
 - Local food needs assessment piece—Food Policy Councils that exist have been leaders in connecting the dots between health care and food sectors. Connect with Food Policy Councils!

Subgroup updates

- Clinical Linkages: Steve Cook and Ellen Barnidge
 - Discussed editorial advocating for state and regional resources need to effectively create clinic-community linkages in the most recent call and different screening algorithms.
- Food Systems: Alex Lewin-Zwerdling
 - Had a great call a few weeks ago to talk through assessment tools and resources that PHI is helping put together as part of the community health needs assessment
 - Next call on: **May 9 at 11am PST (2pm EST)** (will be working on getting tool finalized)
 - Dial-In:(866) 215-3402, Conference code: 4346031
- Research Agenda: Seth Berkowitz and Darcy Freedman
 - On last call, discussed key, unidentified questions in the field. Looked at the research capabilities of the different organizations. May want to play matchmaker between organizations and foster collaboration based on expertise and research capacities.
 - Follow-up call will soon be scheduled.

CDC updates

- HHS had a call with Mid-Ohio Food Bank—great work/project that is worth exploring
 - Project is looking at relationship between food banks and health care

Coordinating Center Updates

- Our next call is scheduled for Monday, June 27 @ 9am PST (12pm EST). We will be focusing on the topic of food recovery and will hear from City Harvest in NY and representatives of the EPA.