FORCES OF CHANGE ASSESSMENT RESULTS

Miami-Dade County Health Department
Mobilizing for Action through Planning and Partnerships (MAPP)
Forces of Change Assessment Results

Prepared by the Health Council of South Florida
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BACKGROUND: FORCES OF CHANGE ASSESSMENT

The HCSF is implementing the Mobilizing Action through Planning and Partnerships (MAPP) process on behalf of the MDCHD as the five-year follow-up to the 2007-2008 MAPP process, which resulted in the Miami-Dade Disparities Report and Action Plan. Two of the four assessments, the Local Public Health System Assessment and the Community Themes and Strengths Assessments have been completed. On **November 14th, 2012**, MAPP Stakeholders came together to complete the Forces of Change Assessment. Karen Weller of the Miami-Dade County Health Department introduced the session and the role of the MAPP Process in supporting the MDCHD's Community Health Improvement Planning Process. Shelley-Anne Glasgow-Wilson, from the Health Council of South Florida, described the purpose and format of the Forces of Change Assessment in identifying the key factors that are impacting or will impact community health planning in the coming years.

The intended result of the Forces of Change Assessment is a comprehensive, but focused, list that identifies key influences and describes their impact. It answers the questions:
1. "What is occurring or might occur that affects the health of our community or the local public health system?"
2. "What specific threats or opportunities are generated by these occurrences?"

Identifying and addressing forces of change is a form of environmental scanning. It ensures that the MAPP process: is relevant and timely, builds upon opportunities, and responds to potential threats. The identification of forces illuminates some of the "givens" under which the public health system operates or will need to operate. If these forces are not fully considered, the strategies developed later in the MAPP process may be less effective.

Forces are a broad all-encompassing category that includes trends, events, and factors defined as:
- Trends are patterns over time, such as migration in and out of a community or a growing disillusionment with government.
- Factors are discrete elements, such as a community's large ethnic population, an urban setting, or the jurisdiction's proximity to a major waterway.
- Events are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

Participants identified a variety of trends, factors, and events that shape the public health landscape in Miami-Dade County. Using this framework, and guided small group discussions facilitated by the Health Council team, MAPP Stakeholders identified Forces of Change, Opportunities, and Threats to improving community health in the county.

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 Four key forces were identified by the breakout groups:

- ♦ **Affordable Care Act:** changes to Medicaid and Medicare, private insurance market and managed care privatization
- ♦ **Shifting Demographics:** aging population and workforce, immigration and birth trends
- ♦ **Social Inequities:** evolving ethnic make-up of the community, underrepresented communities, the cost of care for un-and underinsured, and environmental justice issues
- ♦ **Technological Advances:** relating to Electronic Health/Medical Records, the role of social media and technology in data collection

Specific topics identified are shown in Table 1.

Table 1: Force of Change Results		
Forces of Change (Trends, Factors, Events)	**Opportunities** (Prospects, Responses)	**Threats** (Barriers, Challenges)
The Patient Protection and Affordable Care Act (ACA) • i.e. Healthcare Reform: Medicaid, Medicare, private insurance, managed care privatization	• "The angel is in the details" of ACA: education and awareness on what it means to communities • Focus of preventative care and health across the life span with holistic, integrated and coordinated care and follow-up. • Increase access to coverage • Access to care despite pre-existing conditions • Improve health outcomes • Increase job opportunities • Innovation and economic growth associated with ACA • Education for professional shortage areas • Loan forgiveness • Funding for community-based initiatives • Fosters partnership and collaboration	• "The Devil is in the details;" misinformation • Uncertainty with Medicaid e.g .small businesses are not expanding due to the unknown • Changes in state program that may cause higher costs or reduced services • Political resistance at state level to federal funding and other political challenges faced within the state • Financial impact on business • Consolidation threatens local control / autonomy

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Shifting Demographics: i.e. Increased Hispanic population, Aging Population (baby boomers), Birth Trends, an aging workforce	- Recognition of needs - Increase education and create targeted messages for different demographics - Increase partnerships - Grow the medical and public health workforce, using expertise of qualified immigrant population - Increased jobs associated with care for the elderly - Miami-Dade can be a model for caring for the undocumented and older adults	- Increased cost of living associated with aging population - Loss of expertise as seniors retire - Chronic disease prevalent in older residents - Health disparities faced in certain ethnic populations - Younger people not seeking preventive care - Lack of Primary Care across the lifespan - Increased ER use - Societal ageism - Lack of infrastructure to accommodate growing populations - Quality to meet demand for services - Funding for higher quality services - Shortage of prepared medical and public health workforce - Cultural competency - Misinformation - Generation gap/trust - Depletion of the system
Social Inequities: i.e. changes in ethnic make-up of the community, underrepresented communities, the cost of care to the un-and underinsured and issues of environmental justice	- Support medically underserved - Funding for health disparities - Increase collaboration across sectors - Increase education with regards to environmental influences on health - Increase the number of agencies focusing on environmental conditions	- Barriers to access/information - Increasing health and socioeconomic disparities - Lack of individual/personal responsibility - Unsanitary conditions - Not enough cross-agency collaboration

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Technological Advances • i.e. Electronic Medical/Health Records (EHR/EMR). Social media; Data	• Strengthening community based services • Resource sharing • Improved coordination of care • Reduces medical error • Tailored/targeted health communication messages • Job growth/innovation • Tele-health improves access to care • Consumer choice improvement • Integration of information • Increased evidence based approach • Better outreach/education on available resources • Better health outcomes	• Validity • HIPPA compliance • Standardization of EHR/EMR • Security breach of EMRs • Speed of Innovation, some cannot catch-up – lack of capacity • Cost association with implementation • Fraud/Identity Theft • Data interpretation w/o knowledge • Data validity
Workforce development • i.e better utilization of existing resources. Training and education, funding for education	• Targeted learning • Retraining of unemployed • Recruitment expand the use of students and the National Health Service Corps; partnering with higher education • Matching trained professionals to areas of concern or need • ACA offers funding for education • Messaging –community awareness	• Cultural competency • High school drop-out rates • Gaps in needs • Cost of education (loan debt) • Lack of cross-training between public health and health care
Immigration • i.e. services to the undocumented and uninsured	• Easily targeted for messaging • Funding information to educate on available resources • Increase available services	• Improper use of hospitals and clinics • Undocumented cannot get health insurance • Limited resources to undocumented in general • Privatization of Jackson

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Improving Wellness i.e. health education, Physical Activity, sedentary lifestyles, nutrition, mental health	• Utilizing parks and green space • Early education • "Make Healthy Happen" initiative • Increasing Physical Education in schools • Increase farmers markers in low income areas • Diminished cost/taking advantages of group wellness programs	• Increase in chronic disease Healthcare delivery • High rate of obesity and chronic disease • Diminished health education in low income populations
Reduced funding i.e., bureaucratic issues between organizations; struggling economy	• Hope for a stronger economy; increased awareness of the issues faced by average person • Decreased unemployment rate • More efficiency within programs; more collaboration • Higher awareness of public health	• People becoming sicker; cost of care is rising • Fraud • Social determinants of health • Reduced funding to social programs • High cost of living; lack of jobs
Political Climate	• Compromising /find solutions • Educating population on their right to vote • Educate legislators/decision-makers • Legislators to focus on issues and find solutions	• Resistant to change/lack of compromise • Confused/disengaged population • Misuse of resources which creates lost opportunities

At the end of the meeting, there was consensus that addressing uncertainties presented by the ACA and focusing on wellness and social inequities should be the core strategic priorities of the Community Health Improvement Action Plan in Miami-Dade County.