Nurses as cross-sector data sharing champions

Future of Nursing 2030 Seattle Town Hall:
Technology to Inform Practice and Advance Equity
Barriers to improving the health and well-being of the U.S. population include:
- Challenges in addressing social determinants of health
- Fragmentation in delivery of health care, social, and public health services

Many cross-sector partnerships aim to address health and social needs across clinical and community settings:
- Successful partnerships typically require information sharing
- Information sharing may be more difficult when including non-clinical partners

Focus of this presentation:
- How cross-sector data sharing can advance health equity
- Potential role of nurses in supporting cross-sector data sharing
Health begins where we live, learn, work and play

CORE DETERMINANTS OF HEALTH

- gender
- health care
- employment
- education
- built environment
- social support networks
- personal health practices
- social environment
- healthy child development
- genetics
- income and wealth
- culture
- social support networks
- personal health practices
- social environment
- healthy child development
- genetics
- income and wealth
- culture
In King County, cross-sector partnerships aim to improve health and well-being throughout the life course.

**Things that influence our health and well-being**

- **Social**: school, work, money, housing, crime, community, racism/discrimination
- **Behavior**: choices around diet, exercise, sex, drugs, safety and stress
- **Environment**: harmful substances in air, food, and water, structural hazards
- **Genetics**: what we’re born with

**Crises we try to avoid**

- Homelessness
- Jail and prison
- Visits to hospital and Emergency Department
- Disease, injury and disability – physical, behavioral and chemical dependency

Successful cross-sector partnerships require information to be shared across partners.

Born or move into King County:

- Infant
- Toddler
- Preschooler
- School-age
- Adolescent
- Young adult
- Middle age
- Old age

Optimal quality of life:
Data fragmentation is a barrier to advancing health equity

**Data fragmentation =**
data systems are program specific and largely do not talk with each other

**Clinic**  
**Jail**  
**School**  
**Housing provider**

**Health & human service providers struggle to:**
- Access information about the whole person
- Coordinate services across delivery systems

**Population health analysts struggle to:**
- Access information about the whole community
- Measure progress towards elimination of health and social disparities

Image credit: Can Stock Photo
Cross-sector data sharing is both an art and a science.
Cross-sector data sharing in King County

**Health & housing partnership**
- Medicaid claims
- Medicare claims
- Public housing authorities

**Jail-based continuity of care program evaluation**
- Medicaid claims
- Jail electronic health record
- Jail booking

**Accountable Community of Health**
- Medicaid claims
- Behavioral health data
- 2-1-1 calls

- Public health
Relationship between health status and emergency department use

ED visits per 1,000 member months

- Overall: 40.4
- Behavioral health need only: 54.5
- Co-occurring BH/chronic illness: 129.2
- Chronic illness only: 49.5

Source: Medicaid claims data, WA Health Care Authority (HCA). This data product has not been reviewed or approved by HCA. Data shown are for King County Medicaid members for services received in 2017. Behavioral health includes mental illness and substance use disorder. Chronic illness includes asthma, chronic obstructive pulmonary disease, diabetes, chronic kidney disease, heart failure, hypertension and ischemic heart disease.
Health status-related disparities widen when considering race

<table>
<thead>
<tr>
<th>Race</th>
<th>ED visits per 1,000 member months</th>
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<td>American Indian/Alaska Native</td>
<td>196.7</td>
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<tr>
<td>Unknown race</td>
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</tr>
</tbody>
</table>

Medicaid members with co-occurring behavioral health & chronic illness

Source: Medicaid claims data, WA Health Care Authority (HCA). This data product has not been reviewed or approved by HCA. Data shown are for King County Medicaid members for services received in 2017. Behavioral health includes mental illness and substance use disorder. Chronic illness includes asthma, chronic obstructive pulmonary disease, diabetes, chronic kidney disease, heart failure, hypertension and ischemic heart disease.
Building trust: Drawing from nursing and public health practice

Nursing

- Seeing the person behind each data point
- Cultural humility
- Negotiation

Public health

- Data linkage
- Data quality
- Mapping & analysis
- Data visualization
Nurses as cross-sector data sharing champions

Key message

As expert negotiators with a practice grounded in person-centered care and cultural humility, nurses can serve as effective cross-sector data sharing champions.

How do we support more nurses to fulfill this role?

1. Financial support for nurses to attend public health educational programs

2. Academic partnerships between nursing schools and public health systems

3. Recruitment of nurses to lead cross-sector partnerships, with a focus on partnerships with social service and public health systems
For more information...

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Explore HealthierHere data: https://www.healthierhere.org/our-impact/