Register for a Pilot Webinar on the CDC’s 6|18 Initiative

An Introduction to the CDC’s 6|18 Initiative
May 1, 12:30 PM ET
1.5 CME/MOC credits

The American College of Preventive Medicine (ACPM) is hosting a free pilot webinar May 1, 12:30 - 2:00 PM ET to provide a first look at an introductory course on the CDC’s 6|18 Initiative. This unique opportunity allows participants to provide feedback and interact with the faculty - Joyce Carter, MD, MPH; Catherine Livingston, MD, MPH; and Toyosi Morgan, MD, MPH, MBA, pictured below left to right.

As this webinar is piloting new material, constructive feedback from participants is critical for final edits and improvements. Faculty bios are available on the project webpage. ACPM will offer 1.5 CME/MOC credits for this webinar. Wendy Braund, MD, MPH, MSEd, FACPM—a member of the ACPM Board of Regents and the Health Systems Transformation (HST) Task Force—will moderate this webinar.

ACPM has received a grant from the Centers for Disease Control and Prevention (CDC) Office of Health Systems Collaboration to develop this introductory course that will provide an overview of the initiative and, through case studies, address the role of providers in implementing the 6|18 Initiative. The course will be available in the summer on ACPM’s E-Learning Portal.

Registration is required by April 30th to attend this free webinar

Register for Preventive Medicine 2018: Prevention at the Nexus of Health Systems Transformation

Preventive Medicine 2018, the annual meeting of the American College of Preventive Medicine, is the premier event for professionals in disease prevention and health promotion. The meeting advances the science of preventive medicine through state-of-the-art educational...
The Preventive Medicine 2018 conference theme is "Prevention at the Nexus of Health System Transformation." There is a changing landscape in health care delivery systems characterized by a number of transformational changes from the status quo—a shift away from a supply-driven system to demand-driven networks, away from physician-driven care to patient-centered care, from volume of services to value and patient outcomes achieved, and from fragmented health care systems to more integrated health care delivery organizations across the entire community.

Access the full schedule of the conference to learn about the speakers and sessions that are organized across six tracks: 1) improvement and innovation; 2) policy, evidence and practice; 3) engagement and change; 4) models and health systems; 5) lifestyle medicine and precision public health; and 6) the future of preventive medicine.

Register by May 1 to take advantage of online registration.

ACPM joins the NAM Clinical Resilience Collaborative

ACPM has made a commitment to the National Academy of Medicine (NAM) Action Collaborative on Clinician Well-Being and Resilience and is proud to promote the recently launched Clinician Well-Being Knowledge Hub. The hub provides resources to help health system leaders, clinicians, and trainees better understand what's causing clinician burnout and to adopt solutions. ACPM is committed to addressing clinician resilience and poor well-being, and collaborating with the other members of this initiative.

RELATED: An article published in the Annals of Family Medicine that advocates for changing the paradigm from triple aim—enhancing patient experience, improving population health, and reducing costs—to quadruple aim to include the goal of improving the work life of health care providers, including clinicians and staff.

FEDERAL GOVERNMENT UPDATES

CDC's 6|18 Initiative: A Cross-Sector Approach to Translating Evidence Into Practice

The CDC, the Center for Health Care Strategies, and the Robert Wood Johnson Foundation recently published an article in the Journal of Public Health Practice and Management about how the 6|18 Initiative is strengthening partnerships between state health departments and Medicaid agencies to help improve health coverage and control health care costs using evidence-based interventions. This new article explores how the collaboration of nine state Medicaid and public health agency teams contributed to payment policy changes and improved health outcomes.

RELATED: CDC's 6|18 Initiative infographic (pictured right) summarizes what the first group of state Medicaid and public health partners had to say about the initiative in exploratory interviews.
The Center for Disease Control and Prevention's Antibiotic Resistance (AR) Solutions Initiative supports national infrastructure to detect, respond, contain, and prevent resistant infections across healthcare settings, food, and communities.

Once such initiative is the AR Investment Map which showcases CDC activities to meet the national goals to prevent drug-resistant infections. CDC's AR Solutions Initiative puts state and local AR laboratory and epidemiological expertise in every state and makes investments in public health innovation to fight AR across healthcare settings, food, and communities. CDC has also released a stakeholder toolkit to raise awareness about the importance of antibiotic prescribing.

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**SPOTLIGHT ISSUE: HEALTH EQUITY**

**Pathways to Health Equity: Communities in Action**

Health equity is the state in which everyone has the opportunity to attain full health potential and no one is disadvantaged from achieving this potential because of social position or any other socially defined circumstance. Health equity is crucial to community well being.

A report of the National Academies of Sciences, Engineering, and Medicine, sponsored by the Robert Wood Johnson Foundation, finds that communities are taking action to address health inequities in the United States. Partners in education, transportation, housing, planning, public health, business, and many other sectors are joining forces with community members to promote health equity.

**Perspectives on Health Equity and Social Determinants of Health**

Health disparities and health inequities have long been experienced between and among people and communities. Recognition and understanding of how social factors impact health outcomes and disparities is crucial to reversing the debilitating and lethal consequences of inequities.

Perspectives on Health Equity and Social Determinants of Health, a publication from the National Academy of Medicine, is an edited volume of discussion papers which provides recommendations to advance the agenda to promote health equity for all. The publication is organized by research approaches and policy implications, systems that perpetuate or ameliorate health disparities, and specific examples of ways in which health disparities manifest in communities of color. The publication provides a stark look at how health and well-being are nurtured, protected, and preserved where people live, learn, work, and play. The discussions make way for the translation of policies and actions to improve health and health equity for all citizens of our society.

**Health Affairs Issue on Advancing Health Equity**

The March 2018 issue of Health Affairs titled "Advancing Health"
Equity—a follow-up to the June 2017 issue on "Pursuing Health Equity"—explores various approaches to reducing inequity and analyzes a range of programs designed to advance the goal of health equity. The issue discusses several topics including: 1) health-in-all-policies framework to elevate health equity as a priority, 2) medical-legal partnerships to address the social determinants of health, 3) access to housing for people with disabilities, 4) community organizing to advance health equity, 5) promoting health equity and eliminating disparities through performance measure and payment, among others.

OPPORTUNITY

Call for Papers on Population Health

Preventing Chronic Disease (PCD), a journal of the CDC, has announced an opportunity to submit papers in two different categories:

- Population Health, Place and Space: Spatial Perspectives in Chronic Disease Research and Practice - PCD welcomes submissions for this upcoming collection, which highlights the variety of ways in which geographic information systems (GIS) and spatial analyses are being applied to enhance chronic disease research and public health practice. Deadline for submission is August 31, 2018.

- Health Care Systems, Public Health, and Communities: Population Health Improvements - PCD invites authors to submit manuscripts on research, evaluation, and other work describing innovative and effective work to link health care and community health in ways that improve population health. Deadline for submission is November 16, 2018.

ADDITIONAL READINGS

- The State of US Health, 1990-2016 - Burden of Diseases, Injuries, and Risk Factors Among US States - This original investigation published in JAMA, examines 333 causes and 84 risk factors, demonstrated that health in the United States improved from 1990 to 2016, although the drivers of mortality and morbidity have changed in some states, with specific risk factors such as drug use disorders, high body mass index (BMI), and alcohol use disorders being associated with adverse outcomes. This study used the Global Burden of Disease Study (GBD) to report trends in the burden of diseases, injuries, and risk factors at the state level from 1990 to 2016.

- Redesigning Provider Payments to Reduce Long-Term Costs by Promoting Healthy Development - Health systems do not operate in a vacuum in ensuring population health. As our health system becomes more proactive rather than reactive, the incentives and payment infrastructure must be flexible enough to include all of the systems that produce health. This National Academy of Medicine Perspectives paper provides suggestions for overcoming existing barriers to achieving a focus on prevention rather than treatment, which will lower health care costs for all.

- States Develop New Approaches to Improve Population Health Through Accountable Health Models - To improve population health and health equity, states are working across Medicaid, public health, and other agencies to develop accountable health structures that acknowledge that health is affected by factors that extend beyond clinical care.
The Center for Care Innovations is a California-based organization that connects safety-net providers with solutions, resources, and experts to accelerate innovations for healthy people and healthy communities. They connect providers with numerous resources in technology solutions, data analytics, innovation and design thinking, delivery system reform, community centered care and population health.

ACPM'S HEALTH SYSTEMS TRANSFORMATION PROJECT

This is part of ACPM's Health Systems Transformation Project, funded through a cooperative agreement with the Centers for Disease Control and Prevention. Learn more about the project and access additional educational materials and our past newsletters.

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