

16-04

STATEMENT OF POLICY

Integration of Services and Supports for Community Health

Policy

The National Association of County and City Health Officials (NACCHO) supports efforts to better connect and integrate public health, physical and behavioral health, and social services. NACCHO encourages all sectors and disciplines to work collaboratively to leverage their resources, authority, expertise, and shared interests in pursuit of achieving the Triple Aim: simultaneously improving population health outcomes, reducing per capita cost of healthcare, and improving patient satisfaction and quality of healthcare.

NACCHO highlights the critical role local health departments play in developing integrated health systems and encourages local health departments to engage with partners to plan, implement, and evaluate strategies to improve the health of their communities.

NACCHO encourages the adoption of policies and practices at the local, state, and federal levels to facilitate integration by doing the following:

- Encouraging collaboration and coordination among sectors (e.g., community health needs assessment/community health improvement plan; see NACCHO's statement of policy on [Community Health Needs Assessment](#)).
- Encouraging clinical-community linkages that help connect healthcare and behavioral healthcare providers, community organizations, and public health agencies in order to improve access to prevention, early intervention, and chronic behavioral healthcare services.
- Establishing public and private financing mechanisms that support the coordination and delivery of a range of integrated clinical, public health, and supportive services.
- Supporting research on integrative systems of care, such as coordinated care organization models, primary care medical homes, community-based primary healthcare and regionally based health improvement collaboratives.
- Supporting the creation of interoperable health information exchange (HIE) systems to support improved health outcomes for individuals and to inform community health planning and evaluation (see NACCHO's statement of policy on [Local Public Health Informatics](#)).
- Offering incentives for integration through performance metrics that measure population health outcomes across all social levels (see NACCHO's statements of policy on [Meaningful Use](#)).
- Promoting the incorporation of principles of social justice into public health practice in order to improve health outcomes and equity for all people in their communities (see NACCHO's statement of policy on [Health Equity and Social Justice](#)).



Justification

Assuring a “complete state of physical, mental, and social health” for all people in all communities requires more than the provision of healthcare alone.¹ The 2011 National Prevention Strategy² posits that clinical preventive services should be supported and reinforced by community-based prevention, policy, and programs, and the Department of Health and Human Services’ Healthy People 2020 further emphasizes the need to consider how social structures influence the health of populations.³ The 2012 Institute of Medicine report “Primary Care and Public Health: Exploring Integration to Improve Population Health” states that “integration of primary care and public health can serve as a catalyst for cooperation across the entire health system,” and calls for generating an appropriate balance in investment across and within three domains: (1) social and environmental determinants of health, (2) healthcare services for individuals, and (3) public health services for populations.⁴

As leaders in their communities with specialized knowledge and resources, local health departments have a unique front-line perspective of the community’s health needs. As local health departments assume the role of community health strategist (See NACCHO’s statement of policy on [Community Health Strategist](#)), local health departments can lead, facilitate, and participate in integrating community services to improve health in their communities. One opportunity for this is to leverage common goals across public health and healthcare, including the Internal Revenue Service and Health Resources and Services Administration requirements of tax-exempt hospitals and health centers, respectively, to conduct community health needs assessments (CHNAs), and the Public Health Accreditation Board’s (PHAB) requirements of local health departments to collaborate on a community health assessment and improvement plan. This collaboration and alignment can promote access to integrated health delivery systems aimed at improving population health, as local health departments can increase access to healthcare and clinical providers can link patient populations to needed social and public health programs and services (See NACCHO’s statement of policy on [Community Health Needs Assessment](#)).⁵

The Affordable Care Act (ACA) provides a key opportunity to integrate public health and medicine. Given the shared origins and commitments of public health and medicine to the health of communities,⁶ the principles, practices, assets, and resources of medicine and public health should be integrated in order to accomplish national health outcomes.⁷ Health is influenced by a range of interconnected physical, behavioral, and social factors, and the integration of services and supports provides opportunities to effectively address those factors. Behavioral health services are often more effective when integrated with primary care and public health services.⁸ Interventions for adults with co-occurring physical, mental health, and substance use disorders have been shown to be more effective when implemented in an integrated atmosphere of public health, primary care, and mental health or primary care and mental health, as in some health centers.^{9, 10} Furthermore, the integration of public health with social services creates opportunities to coordinate services to address social determinants of health – conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.¹¹ Public health shares historical origins with several social service fields,¹² as well as the goals of promoting the well-being of the whole person and eliminating disparities.

Achieving integrated public and personal healthcare will position local health departments as community health strategists. From this position, local health departments can ensure the complex healthcare network maintains a culturally sensitive approach to improving the public's health and well-being.

References

1. World Health Organization. (1946). Constitution of the World Health Organization. New York: World Health Organization.
2. Office of the Surgeon General. (2011.) National Prevention Strategy. Washington, DC: U.S. Department of Health and Human Services.
3. Koh, H.K., Piotrowski, J.J., Kumanyika, S., & Fielding J.E. (2011). Healthy people: a 2020 vision for the social determinants approach. *Health Education and Behavior*, 38.
4. Institute of Medicine. (2012). *Primary Care and Public Health: Exploring Integration to Improve Population Health*. Washington, DC: The National Academies Press.
5. Prybil, L., F.D. Scutchfield, R. Kilian, A. Kelly, Mays, G., Carman A., Levey, S. McGeorge, A., Pardo, D.W. (2014) *Improving community health through hospital-public health collaboration: Insights and lessons learned from successful partnerships*.
https://uknowledge.uky.edu/cgi/viewcontent.cgi?article=1001&context=hsm_book
6. Lasker, R.D. & The Committee on Medicine and Public Health. (1997). *Medicine and Public Health: The Power of Collaboration*. New York: The New York Academy of Medicine.
7. U.S. Department of Health and Human Services. (2016). *Healthy People 2020*.
8. 2005-2009 NYS OMH Statewide Comprehensive Plan for Mental Health Services;
<http://www.omh.state.ny.us/omhweb/statewideplan/2005/chapter1.htm>
9. Bartels, S.J., Dums, A.R., Oxman, T.E., Schneider, L.S., Areal, P.A., Alexopoulos, G.S., & Jeste, D.V. (2003) *Evidence- Based Practices in Geriatric Mental Health Care*. *Psychiatric Clinics of North America*, 53.
10. Bruce, M.L., Van Citters, A.D. & Bartels, S.J. (2005). *Evidence Based Mental Health Services for Home and Community*. *Psychiatric Clinics of North America*, 28.
11. CDC. *Social Determinants of Health*. Retrieved October 3, 2019 from <https://www.cdc.gov/socialdeterminants/index.htm>.
12. Fairchild, A.L., Rosner, D., Colgrove, J., Bayer, R., & Fried L.P. (2010). The EXODUS of Public Health What History Can Tell Us About the Future. *American Journal of Public Health*, 100.

Record of Action

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