



# Move Utah

ACTIVE, HEALTHY, CONNECTED COMMUNITIES

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Transportation and Land Use: Social  
Determinants of Health



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A photograph of a young boy with Down syndrome, wearing a red and white striped shirt, painting a wooden structure with a brush. He is looking intently at his work. In the background, a man with a beard and long hair, wearing a blue t-shirt, is smiling. To the left, a woman with blonde hair is also smiling. The scene is outdoors, with a red building and green foliage in the background.

# The Alliance for the Determinants of Health





### West Town – 84000

High school/college 71%

Below poverty 24%

Household income \$40,000

Life expectancy 75.8

Zip Code Determines Health  
More than Genetic Code

### East Town Heights – 84100

High school/college 97%

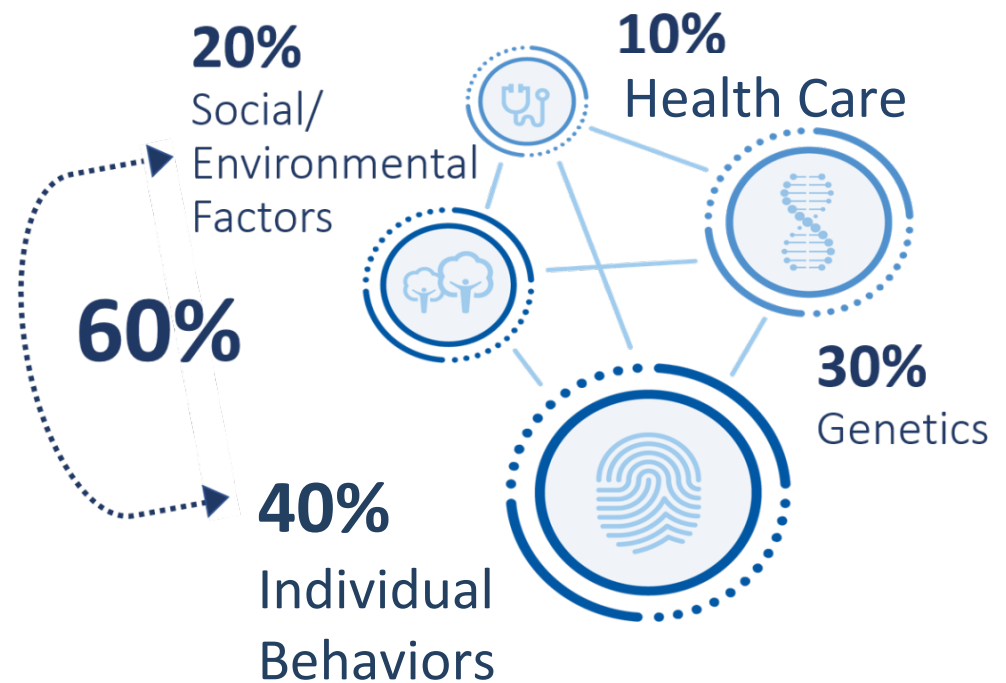
Below poverty 5%

Household income \$77,000

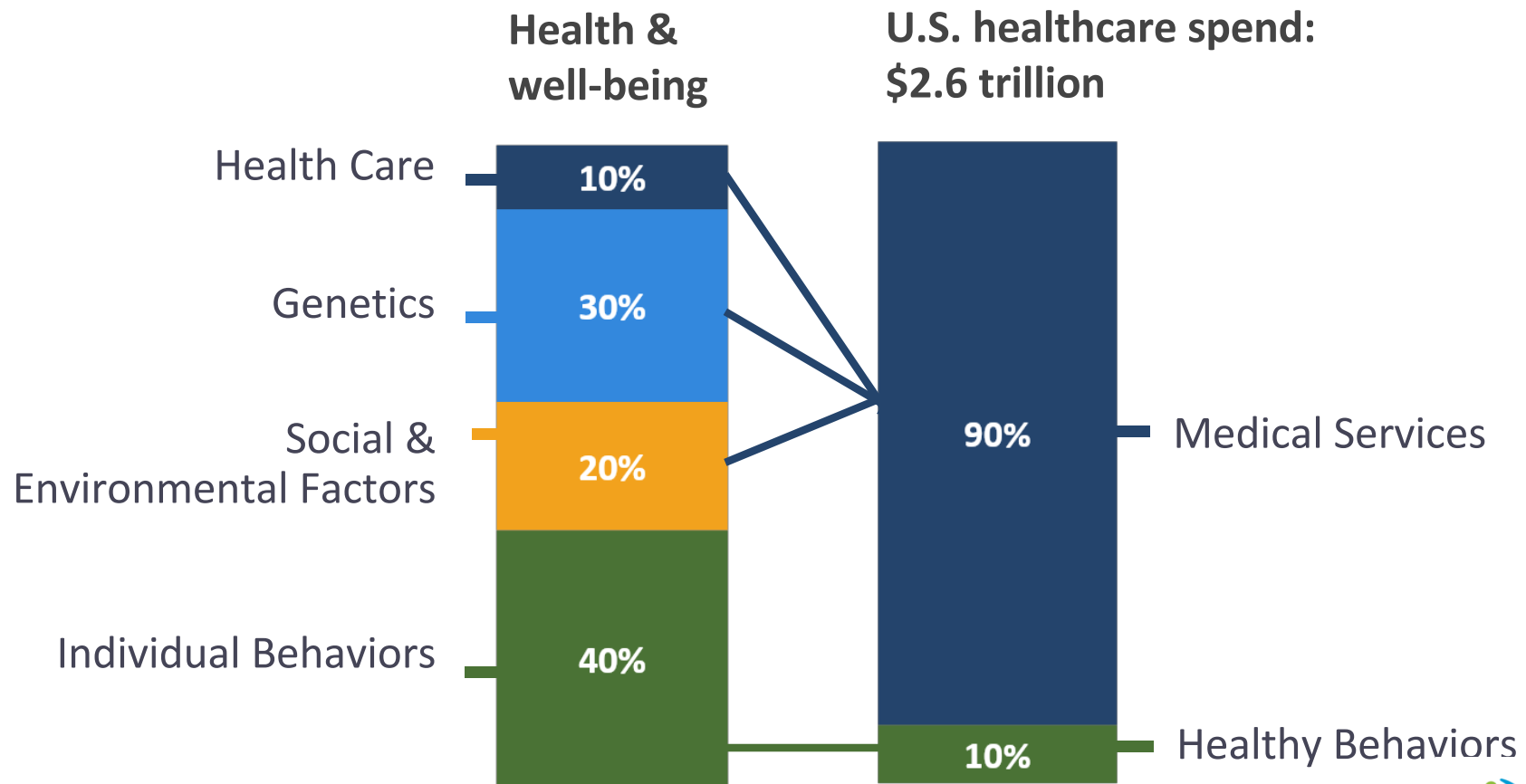
Life expectancy 85



**Helping people  
live the  
healthiest lives  
possible**



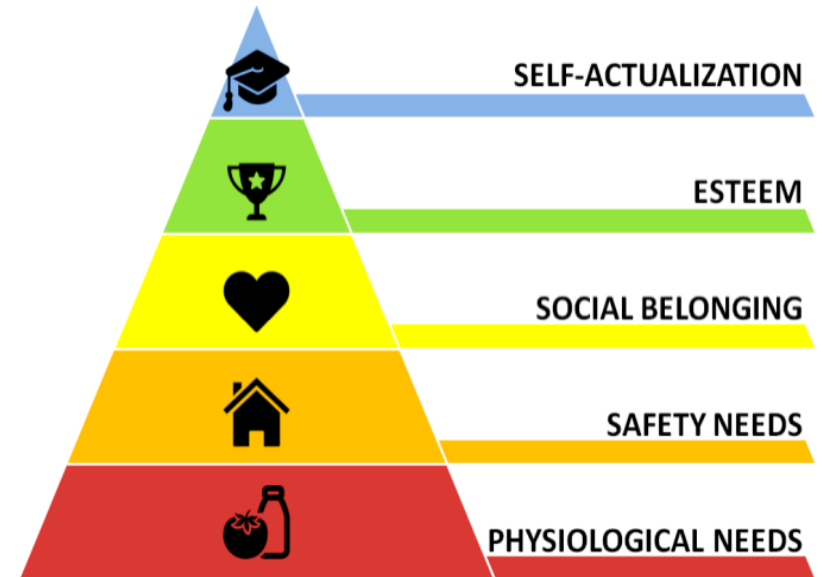
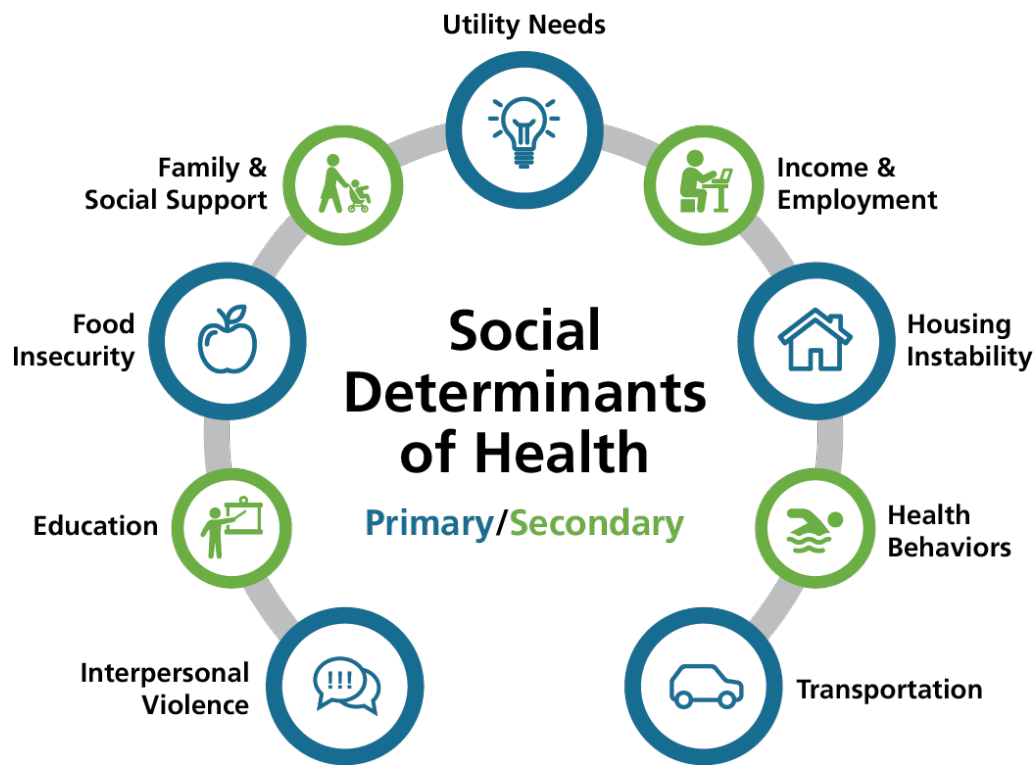
# Mismatch Between Drivers of Health and Spending



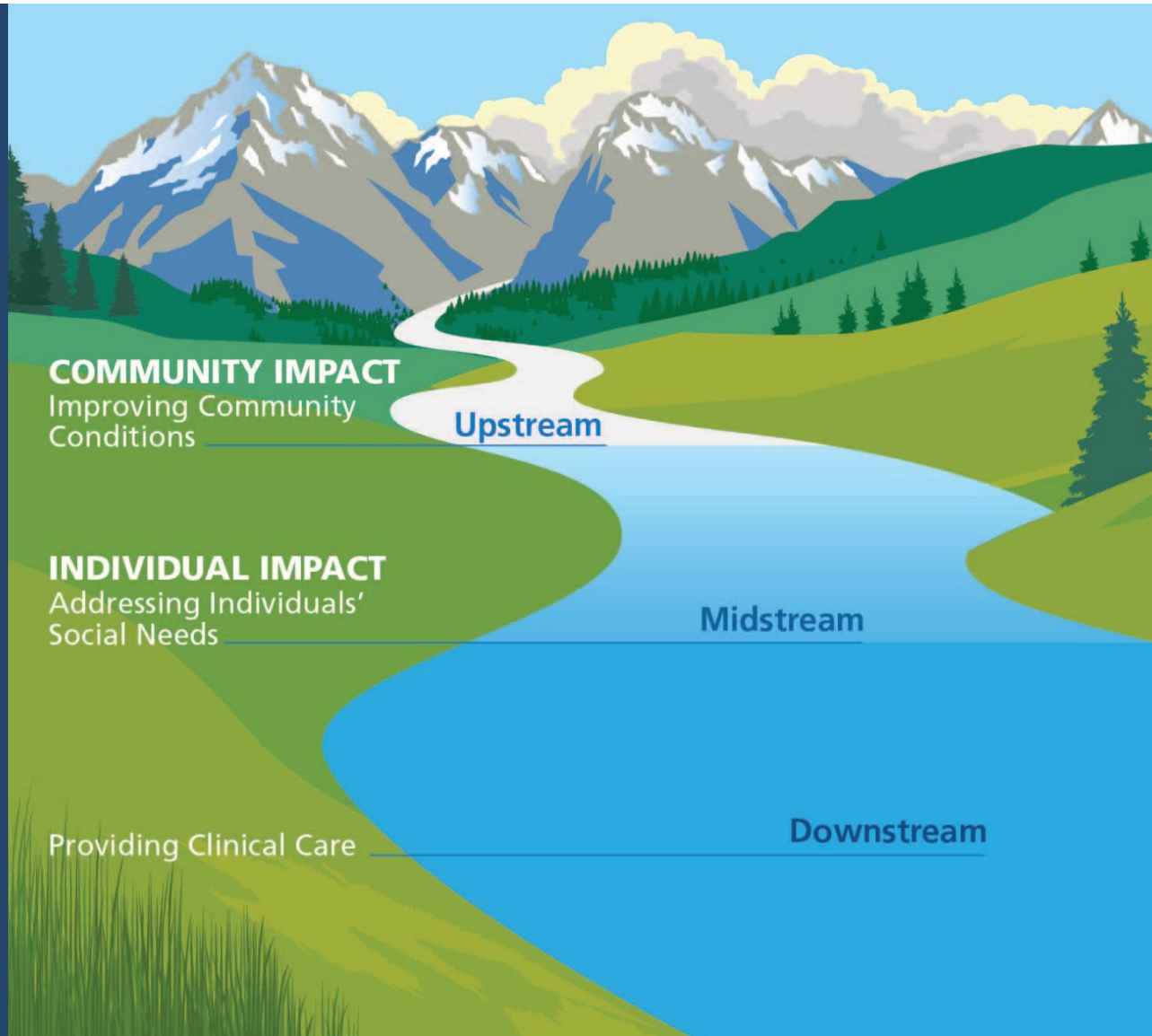
Source: *Institute for the Future*, University of California-San Francisco, CDC, 2007



# Influencing The Social Determinants



# Meeting Social Needs and Addressing the Social Determinants of Health





# The Alliance for the Determinants of Health

\$2 million annually per community for 3 years



WASHINGTON COUNTY



WEBER COUNTY

- Lower than average life expectancy
- High behavioral health needs
- High emergency room use for non-emergency needs

## Alliance Objective:

Improve health outcomes, reduce healthcare costs, and be a model for change by addressing social determinants of health



- Align social services and care delivery



- Remove silos among delivery systems, public health and community partners through innovative partnerships



- Use technology and data sharing to find solutions



## AWARENESS



## ASSISTANCE



## ALIGNMENT



# Connect Us Coordinated Network

## Community Based Organizations in Weber County

Association for Community Health  
Catholic Community Services  
Habitat for Humanity  
Housing Authority of Ogden City  
Lantern House  
Midtown Community Health Center  
Ogden City Fire Department  
Ogden Weber Community Action Partnership  
Parents as Teachers – Prevent Child Abuse Utah  
United Way of Northern Utah – Welcome Baby  
Weber County – ICAN Project  
Weber Housing Authority  
Weber Human Services  
Weber Morgan Health Department  
Youth Futures  
YMCA of Northern Utah



# Impact of Alliance Collaboration



## Alliance Communities

- Referral infrastructure
- Collaborative relationships
- Improved integration of medical and Behavioral health



## Alliance Community Organizations

- Data sharing
- Digital platform



## SelectHealth Medicaid Members & Households

- Connect to services addressing social determinants of health



## SelectHealth Medicaid Members

- Improve coordination of medical and behavioral health
- Connect to services addressing social determinants of health

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# Community Health Workers

Alliance for the Determinants of Health in partnership with AUCH

# What is a Community Health Worker?

*“A community health worker is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.”*

— Cited from The American Public Health Association (<https://www.apha.org/>)



2 Teams of 6 AUCH CHWs serving

# Weber and Washington County

## Criteria for Referral to CHW:

### Patient has 2 or more chronic conditions PLUS:

- One uncontrolled condition;
- No insurance;
- No PCP
- Recent ED visits; and/or
- Recent SDOH crisis
- Must be a Select Health Community Care Member

### CHWs work with patients for up to six months and help by:

- Addressing social needs (SDOH) through referrals to community resources
- Supporting patients to become engaged in their health through goal setting, health coaching, and resource navigation



*A selfie of Sarai (left) and Jasmine (right) from the Washington County team.*



*A photo of Ashlynn, Shardae, Jackson, and Alycia from the Weber County team in front of Midtown Community Health Center.*

# Who We Are and What We Do *for You*

**Resource Navigators** - We help guide you to nutrition, legal, medical, utility, transportation and clothing resources

**Connectors** - We connect you to affordable and accessible healthcare

**Listeners** - We live in your community and understand your concerns

**Problem Solvers** - We listen to your needs and work with you to find solutions

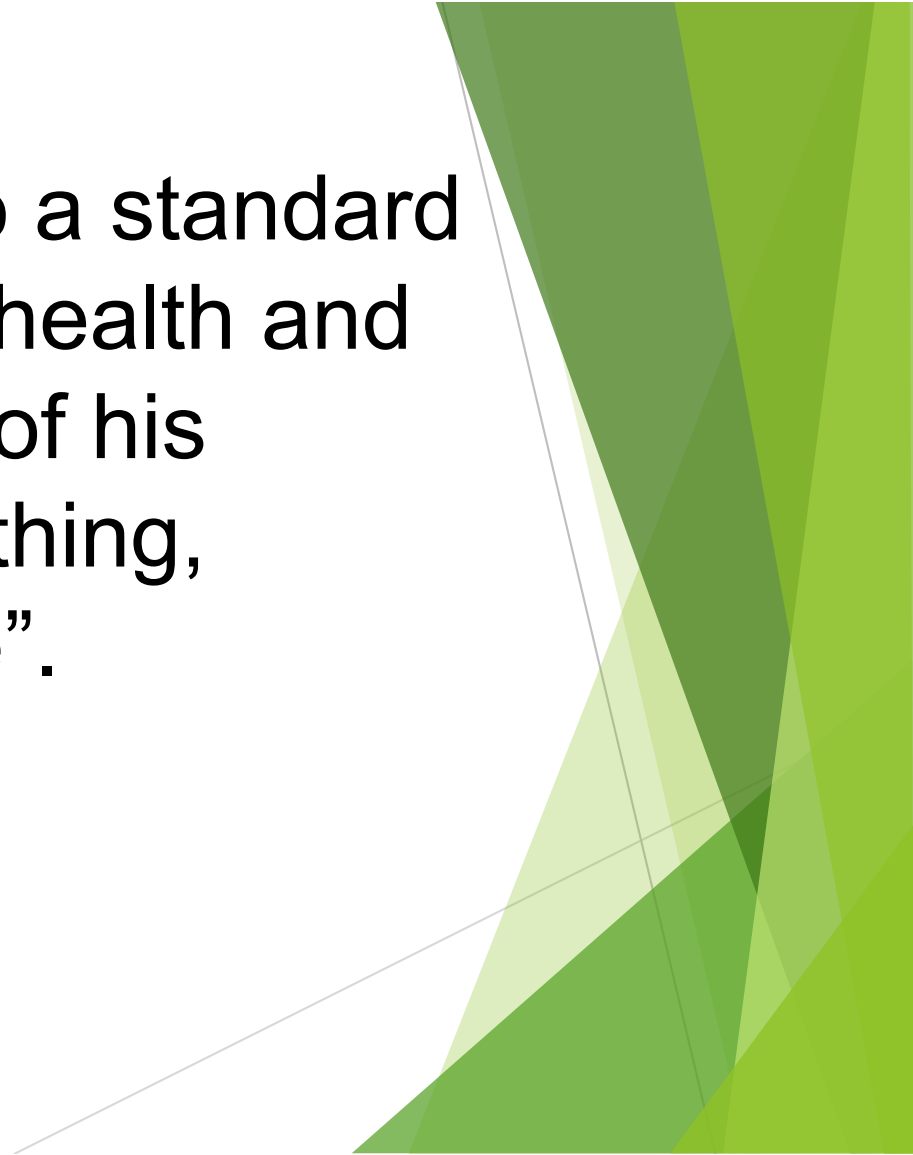
**Wellness Advocates** - We help you make and keep health-related goals and provide support to help you manage your ongoing conditions

The background features abstract, overlapping green geometric shapes, primarily triangles and polygons, in various shades of green. These shapes are positioned on the left and right sides of the slide, framing the central text. A thin, light gray line also extends from the bottom right towards the center.

# Socially Equitable Affordable Housing and Health



“Everyone has the right to a standard of living adequate for the health and well being of himself and of his family, including food, clothing, housing and medical care”.



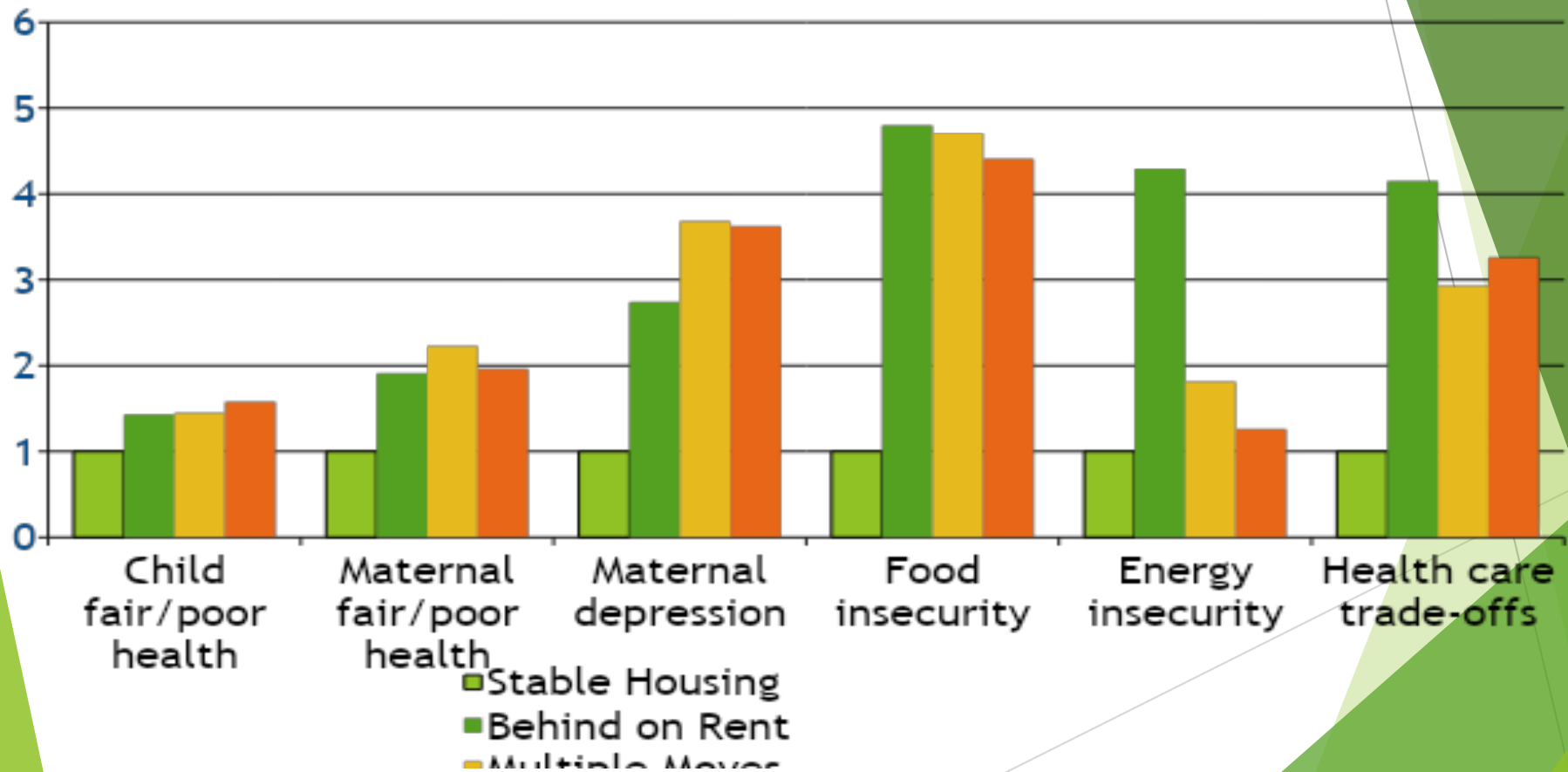
# Evidence on Home Quality

- Accidents/Injuries - exposed wiring, needed repairs
- Development and worsening asthma, allergies tied to home
  - Pests (cockroaches and mice)
  - Molds/Chronic Dampness
  - Tobacco smoke
- Lead exposure tied to long term effects
  - Developmental delay, Attention deficit

# Poor Indoor Air Quality

- People spend 80% of time indoors
- Damp housing :
  - due to poor construction and materials, inadequate heat, lack of ventilation
  - Ideal conditions for mold
  - Evidence of link is strongest in children
- House dust mites, cockroaches
- Pets
- Tobacco smoke
- VOCs (volatile organic compounds)- in cleaning products, paints- ex- formaldehyde
- Radon
- Cooking and heating equipment

## Outcomes of unstable housing with hardship outcomes; (BMC Pediatrics 2018)





# Socially Equitable Affordable Housing

- ▶ Frees up resources for food and health care
- ▶ Reduce stress and related adverse health outcomes
- ▶ Home ownership can increase self- esteem
- ▶ Well constructed and managed housing can reduce poor health as related to poor indoor air quality
- ▶ Stable housing can improve health for seniors and those with disabilities
- ▶ Access to neighborhoods for purposes of income mobility
- ▶ Alleviating crowding
- ▶ Alleviating stress

The Positive Impact of Affordable Housing on Health: A Research Summary  
Center for Housing Policy

# THE WELLNESS BUS

A Chronic Disease Prevention and Education Program  
Addressing Social Determinants of Health



September 26, 2019

Nancy Ortiz, Operations Manager Mobile Health Program

# THE WELLNESS BUS

## What is The Wellness Bus?

The Wellness Bus is a 39 foot mobile health clinic that brings preventive and education services to people in places they live, work, and play.

It is a part of the Driving Out Diabetes Initiative- a partnership between the Larry H. & Gail Miller Family Foundation and the University of Utah.



DRIVING OUT  
DIABETES

A LARRY H. MILLER FAMILY  
WELLNESS INITIATIVE

LARRY H. & GAIL  
MILLER  
FAMILY FOUNDATION



# THE WELLNESS BUS

## Vision:

**To create healthier communities** by offering chronic disease screening, nutrition education, health and wellness counseling, and referrals to social services, particularly in medically underserved areas.





# THE WELLNESS BUS

## Who's on The Wellness Bus?

- Community Health Workers
- Registered Dietitians
- Connect2Health Volunteers
- Health Coaches
- Dental Students



## Screenings & Services offered:

- Blood Glucose
- A1c
- Blood Pressure
- Cholesterol
- Body Mass Index
- Dental /Oral Health
- Nutrition Counseling
- Health Coaching
- Social needs referrals



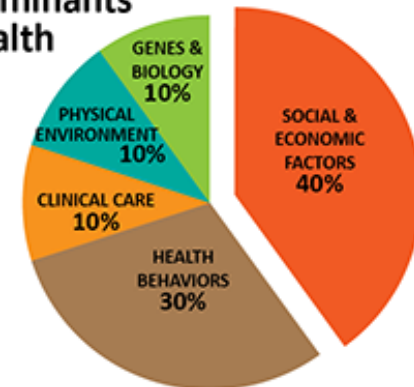
# THE WELLNESS BUS

## Connect2Health

Connect2Health is a University of Utah program staffed by student volunteers that offers *referrals to free or low-cost local community resources* which include medical and social needs support such as food, housing, clothing and **transportation**.



Determinants of health



# THE WELLNESS BUS

## Connect2Health Transportation Referrals:

- **The HIVE Bus Pass** – Reduced price bus pass through UTA for SLC residents
- **Crossroads Urban Center** – Gives out day-use bus passes/tokens and also gift cards to Sinclair to help pay for gas
- **Priority 1 Transportation** – Provides non-emergency transportation at a fee
- **LDS Church Welfare Square** – Hands out bus tokens
- **Non Emergent Rides for Medicaid** – Free transportation options for Medicaid members
- **New- United Way Ride United Program** – patients can get free rides through Lyft for medical/health services, food assistance, or public benefits.



# THE WELLNESS BUS

## Where does The Wellness Bus go?

Mon 9-1PM **Midvale**- Cornerstone Church  
Tues 3-7PM **Glendale**- Sorenson Unity Center  
Wed 3-7PM **Kearns** High School  
Thur 3-7PM **South Salt Lake**- Central Park Community Center  
Fri /Sat **Local Community Events**



# THE WELLNESS BUS

**Thank you!**

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- Email: [nancy.ortiz@hsc.utah.edu](mailto:nancy.ortiz@hsc.utah.edu)
- Website: WellnessBus.org
- @utahwellnessbus



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