

Faith – health collaboration to advance the social determinants of health

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South LA: An American inner city



CO\$T OF LIVING

- 31% of residents live **below the Federal Poverty Line**
- Roughly 1/4th of adults and 10% of children **cannot afford the health services they need**
- **Lack of affordable housing**



ACCESS

- **Poor access** to safe parks, quality fruits/vegetable
- 1 Physician per **10,000** residents
- 1 Pediatrician per **10,000** children
- 45% of Adults & 18% of children have **difficulty accessing healthcare**



HEALTH OUTCOMES

- Highest **obesity rates** in LA County - 29% of children & 33% of adults
- Highest **death rates** for lung cancer, diabetes, heart disease
- 8 in 100 babies are born underweight, 6 in 1000 die



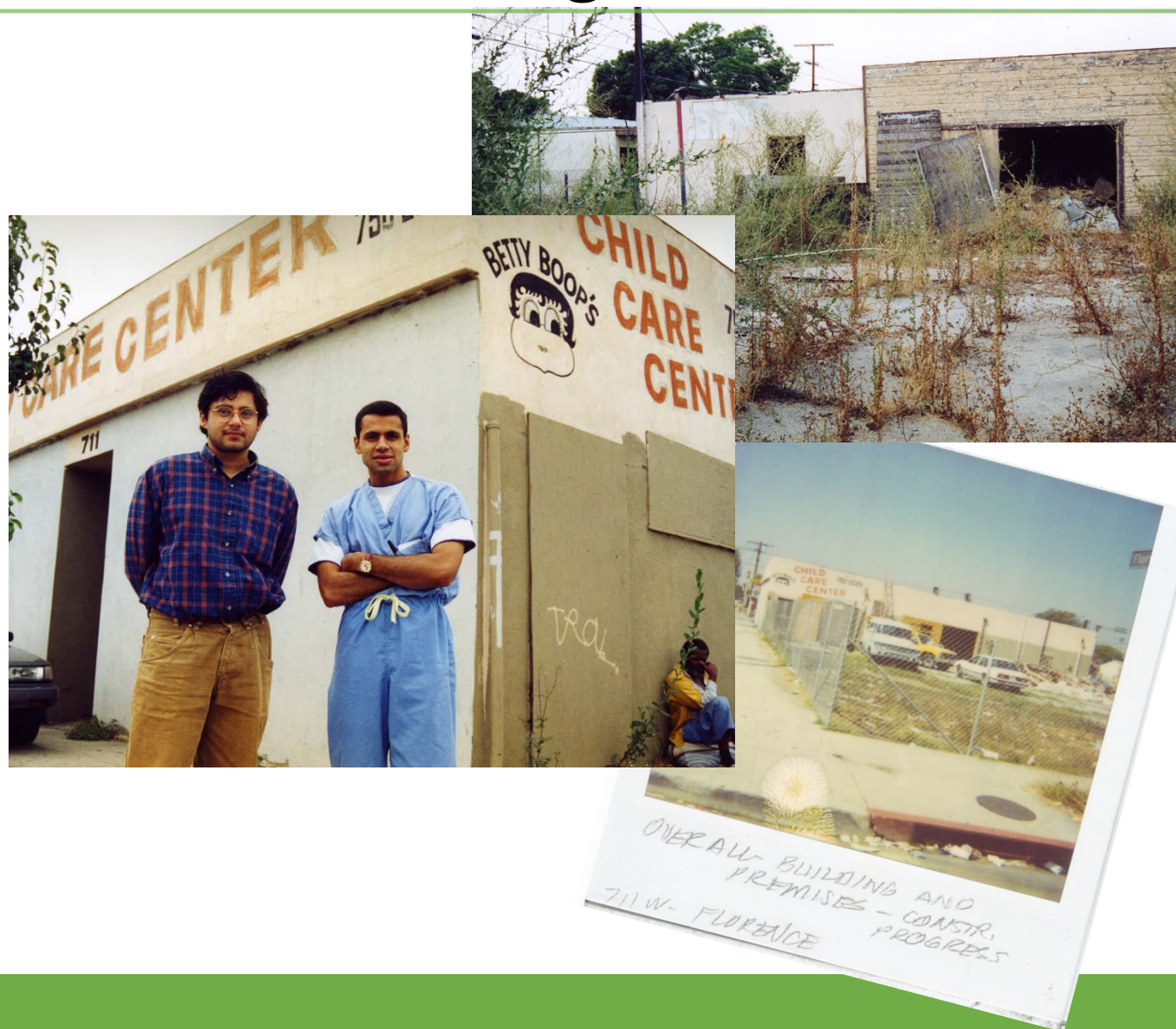
A PROJECT OF CHARLES R. DREW UNIVERSITY OF MEDICINE AND SCIENCE

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From Health Hazard to a *Place of Healing*

- LA City gave a building, abandoned due to toxic waste being found on the site, to UMMA.
- The UMMA students collected donated equipment and **with the invaluable help of a local councilwoman, raised more than \$1.3 million in funds.**
- Cleaned the site and constructed UMMA's first brick and mortar location

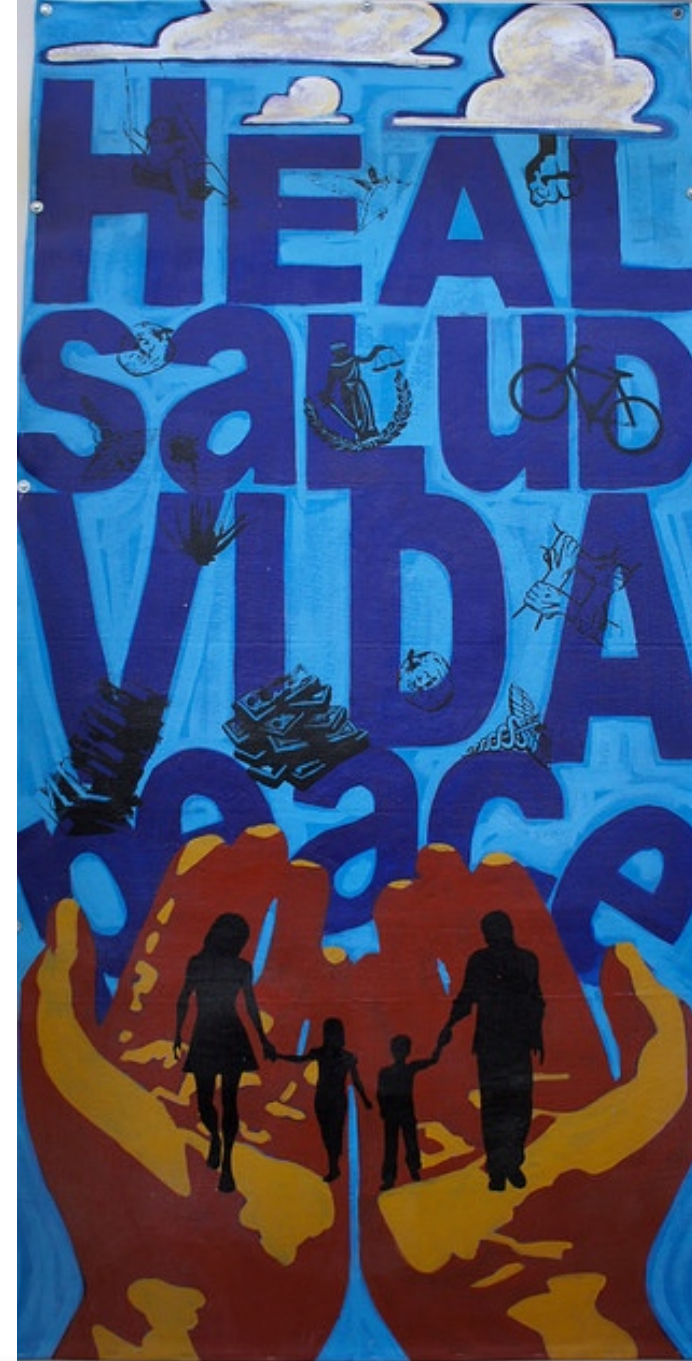
*“Take something that’s a detriment to health and make it something that promotes growth” – Dr. Rushdi
(pictured above)*



Healthcare for ALL Inspired by Islam

- **Mission** to serve ALL in need – the underrepresented, the underserved, the vulnerable
- **Only 2%** - of our patients are Muslim
- **40%** of our staff come from the community that we serve
- Desired outcome – get residents the regular preventative care they need to live longer, healthier lives

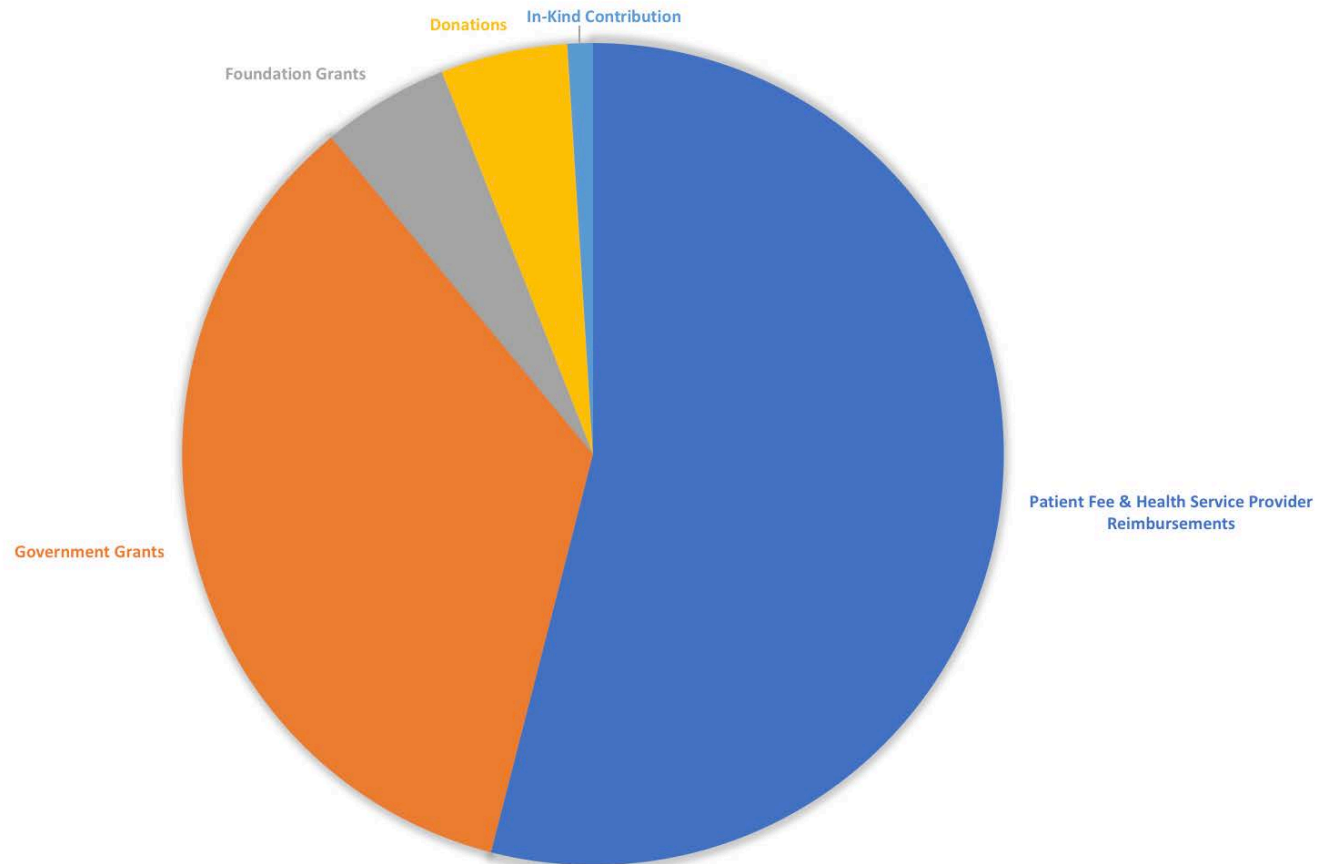
Life expectancy should not be predetermined by Zip Code



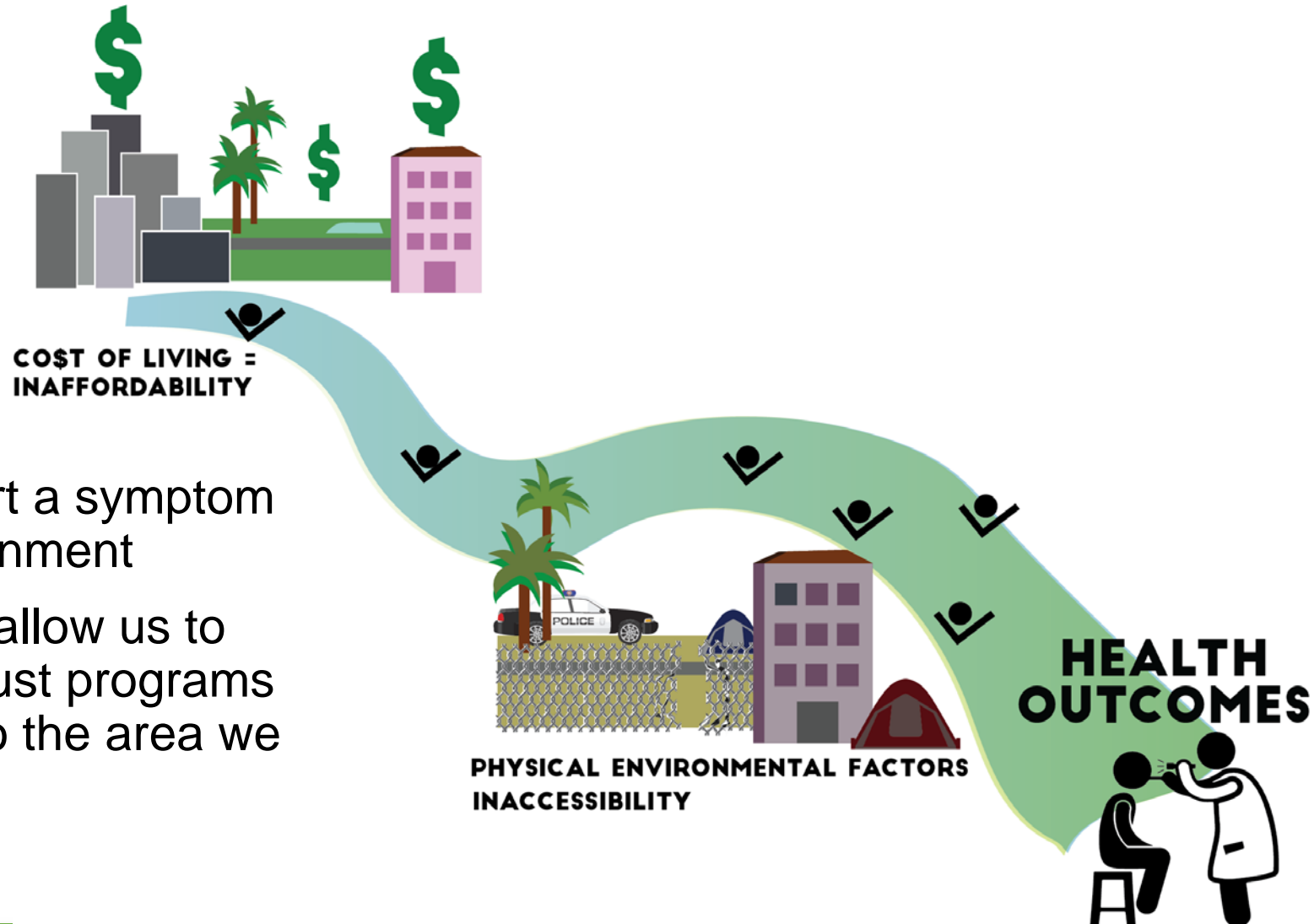


Sustainable Partnership

- A **PLUS** Program
- Donor base is largely Muslim
- **United in Health** – Community Partners are all shapes & sizes, all faiths, with the city, state, country, etc.
- Faith compels service for ALL



Working Upstream



- Health is in part a symptom of one's environment
- **Partnerships** allow us to offer more robust programs and services to the area we serve

Fremont Wellness Center & Community Garden



Our Key Partners:

Los Angeles Unified School District
Los Angeles Neighborhood Land Trust
The LA Trust for Childrens Health
Food Forward Los Angeles

- Wellness center with separate community & student entrances
 - Primary/preventative care
 - Behavioral Health Services & counseling
- Community Garden
- Orchard
- Park
- Greenhouse
- Raised planters
- Biweekly Free Food Market
- Student Health Leaders program





Better Together

Our Vision:

- Safe green space
- “Food does not come from a box”
- Preventative health
- Access to free fresh fruit & vegetables

Challenge? *We all have our own services and programs and must meet in the middle!*



Fremont Market



The Fremont Market is a free fruits and vegetables distribution event held at the Fremont Wellness Center and Community Garden in partnership with the **Los Angeles Neighborhood Land Trust**. We provide access to fresh fruits and vegetables at no charge in a “farmer’s market” style distribution made possible through the generous donation of produce provided by **Food Forward**’s Wholesale Recovery Program.

ACCOMPLISHMENTS

20

MARKETS TO DATE
FROM SEPTEMBER
2017 TO MARCH
2018.

80-100

FAMILIES
PARTICIPATE PER
MARKET EVENT

**~2,000
LBS**

OF PRODUCE IS
DISTRIBUTED AT
EVERY MARKET
EVENT

VARIETY OF PRODUCE

Participants have access to a variety of fresh produce, such as collard greens, kale, lettuce, onions, papayas, tomatoes, tomatillos, watermelon, and much more.

VOLUNTEERS

Approximately 10 adult volunteers from the community and 20 student volunteers from Fremont High School consistently participate at every market.

RECIPE DEMOS & EDUCATION

A local chef is invited during selected markets to demonstrate healthy recipe ideas with the items available that day. In addition, nutrition education sheets are distributed highlighting the health benefits of a specific fruit or vegetable available that day.

MEDIA COVERAGE

The market has attracted media coverage from KLCS, NBC, and Telemundo.

EXPANSION

Starting in March 2018, Food Forward will deliver 6-8 pallets (~10-15,000 lbs) of produce to the Fremont Market site. This will allow the program to expand the distribution to the Florence UMMA Community Clinic and become a distribution hub for approximately six to seven local organizations.

A Commitment to **Education**

- Ongoing collaboration with local universities, high schools, middle & elementary schools
- A robust culture of volunteerism
- Reach out & read
- Healthy living / nutrition classes

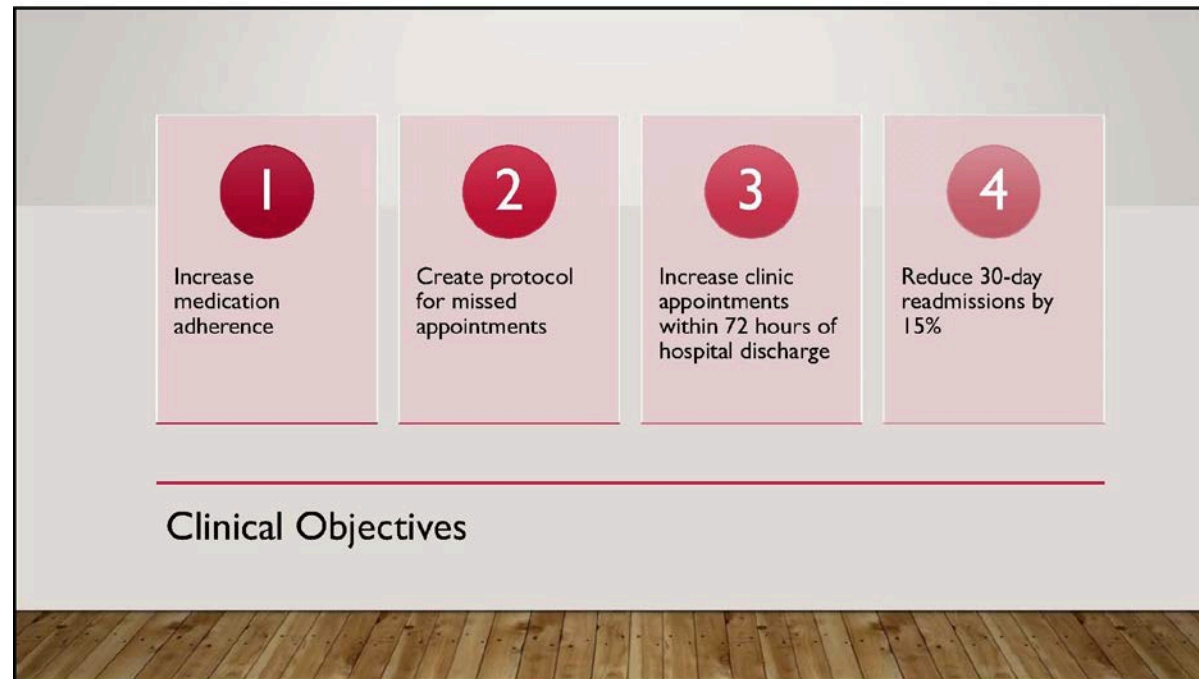


Thought Leader through **Care Coordination**

- Partnership with California Hospital Medical Center
- UMMA provides comprehensive follow-up medical care to chronic care patients following hospital discharge.
- Recognized by California Community Foundation as excellence in care coordination.




Outtakes from The California Hospital's recent presentation on Care Coordination



VALUE OF PROGRAM

- Cost Savings
- Education on appropriate use of Emergency Department
- Relationship Building with Navigators & Providers
- Reduced Readmissions and Emergency Department Usage



A photograph of a blue stethoscope resting on a folded blue cloth, with a clipboard and pen visible in the background.

Outtakes from The California Hospital's recent presentation on Care Coordination

RESULTS: CARE COORDINATION

- 5,451 eligible hospital encounters in the first two years
 - Eligible patients have been previously seen by one of the aligned clinics and who have been diagnosed with one or more of the chronic conditions of diabetes, hypertension, or congestive heart failure. Eligible patients may have one or more visits to CHMC over the reporting period.
- 3,875 encounters evaluated (71.1%)
- 51.5% of eligible visits had follow-up clinic appointments booked
- 74.8% of booked clinic appointments were kept

RESULTS: MEDICATION ADHERENCE

- Telephonic 8-question medication adherence surveys administered to 487 navigated patients
- Baseline adherence rate established in first six months of program
- 305 surveys completed in 2016 and 273 completed in 2017
 - 85.4% of patients were given one survey
 - 11.5% of patients were given two surveys
 - 3.1% of patients were given more than two surveys
- In the 18 months following establishment of baseline, medication adherence improved by 2.8% over baseline

Outtakes from The California Hospital's recent presentation on Care Coordination

RESULTS: REDUCTION of 30-DAY READMISSIONS/ REVISITS

30-day Readmission/Revisit Rates
for Chronic Condition Patients Assessed and Clinic Booking Made and
Subsequently Kept:

<u>Encounter Type</u>	<u>Rate</u>	<u>Reduction</u>
• Inpatient readmissions	18.83%	-9.79%
• ER revisits	14.22%	-42.2%
• Outpatient clinic revisits	7.72%	-66.8%

REDUCTION OF 30-DAY INPATIENT READMISSIONS WHEN CLINIC BOOKED BEFORE DISCHARGE

30-day Inpatient Readmission Rate for Chronic Patients Assessed
and Clinic Booking Made Before Discharge and Subsequently Kept:

<u>Encounter Type</u>	<u>Rate</u>	<u>Reduction</u>
Inpatient readmissions	10.00%	-52.1%

Key Takeaway

*For maximum benefit, engage with patient and make a follow-up clinic booking
before the patient leaves the hospital.*



Thank you!

To learn more about UMMA, visit us online:

www.UMMAClinic.org