



Community-Clinical Linkages Programs

Lainey Faulkner, CPTA | October 12, 2023

Community-Clinical Linkages Programs



Lainey Faulkner, CPTA

Section Director, Community-Clinical Linkages
Bureau of Health Promotion
Kansas Department of Health and Environment

Community-Clinical Linkages Programs

Division of Public Health – Bureau of Health Promotion, Community-Clinical Linkages Section

Diabetes:

- National Diabetes Prevention Program
- Diabetes Self-Management Education and Support
- Team-Based Care
- Community Health Worker Engagement
- Bidirectional Referral

Cardiovascular Disease:

- Health Systems Approaches
- Clinical Quality Improvement
- Self-Measured Blood Pressure Monitoring
- Medication Therapy Management
- Team-Based Care
- Bidirectional Referral

BOLD: Alzheimer's Disease and Related Dementias (ADRD)

- Build the Public Health Infrastructure
- Statewide ADRD Coalition
- Kansas ADRD State Plan
- Community-Clinical Linkages

WISEWOMAN

- Establish WISEWOMAN Infrastructure and integrate with Early Detection Works
- CVD Screening and Referral
- Team-Based Care
- Community-Clinical Linkages

Community-Clinical Linkages

- Community-clinical linkages are connections between community and clinical sectors. Community-clinical linkages strive to improve health within a community¹
- Public health is integral to creating and sustaining community-clinical linkages.

Figure 1. Public Health Sector Linking Community and Clinical Sectors



Community Sector

Composed of organizations that provide services, programs, or resources to community members in non-health care settings.



Public Health Sector

Composed of public health organizations that can lead efforts to build and improve linkages between community and clinical sectors.



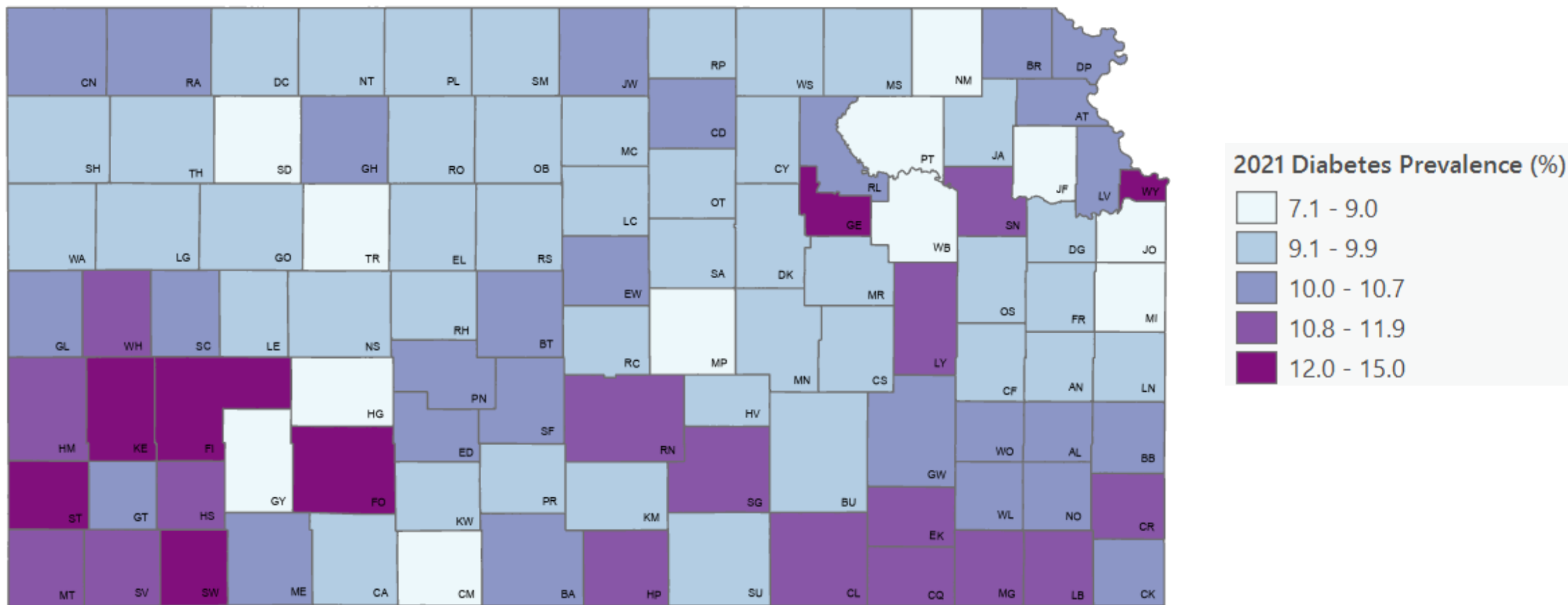
Clinical Sector

Composed of organizations that provide services, programs, or resources directly related to medical diagnoses or treatment of community members by health care workers in health care settings.

1. Centers for Disease Control and Prevention. Community-Clinical Linkages: Implementing an Operational Structure with a Health Equity Lens. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2020

2. Centers for Disease Control and Prevention. Community-Clinical Linkages for the Prevention and Control of Chronic Diseases: A Practitioner's Guide. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2016.

Diabetes in Kansas



Diabetes Prevention and Management Program

Focus Areas:

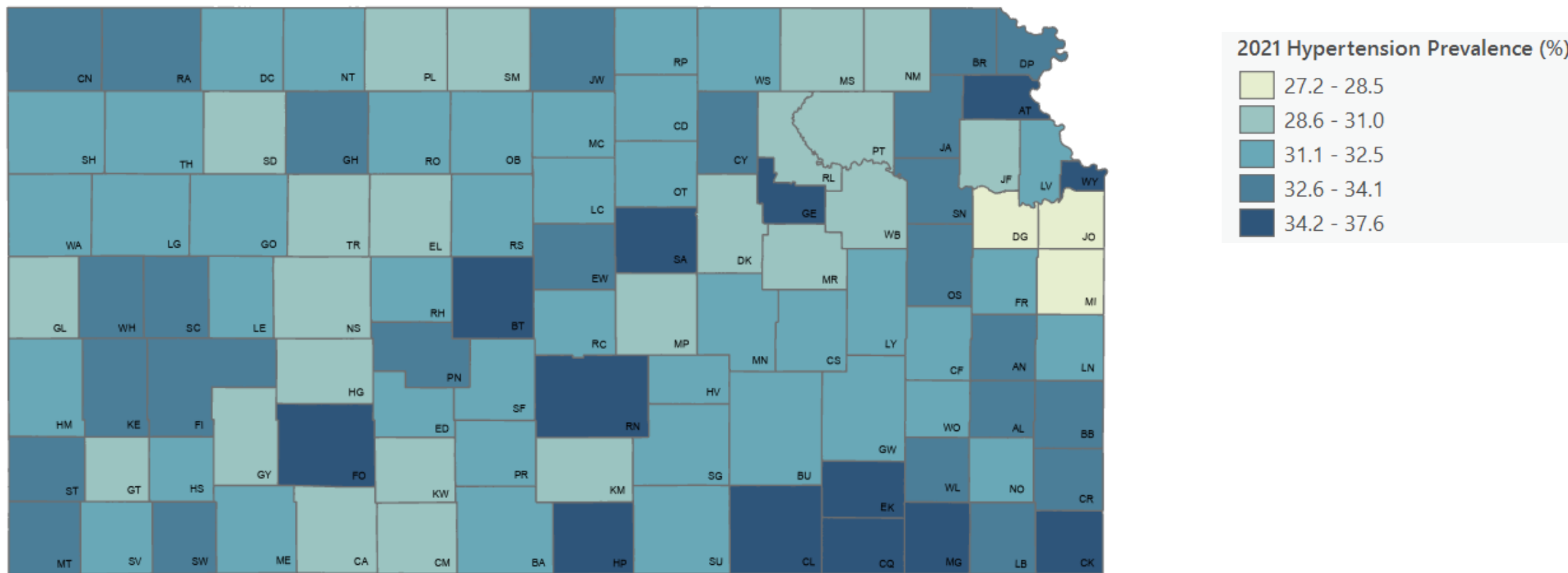
- Decrease the risk for type 2 diabetes among adults
- Improve self-care practices, quality of care and early detection of complications among people with diabetes
- Implement evidence-based strategies contributing to the prevention and management of diabetes
- Support efforts to establish and improve systems to address social determinants of health-related barriers

Diabetes Prevention and Management Program

Notable Initiatives:

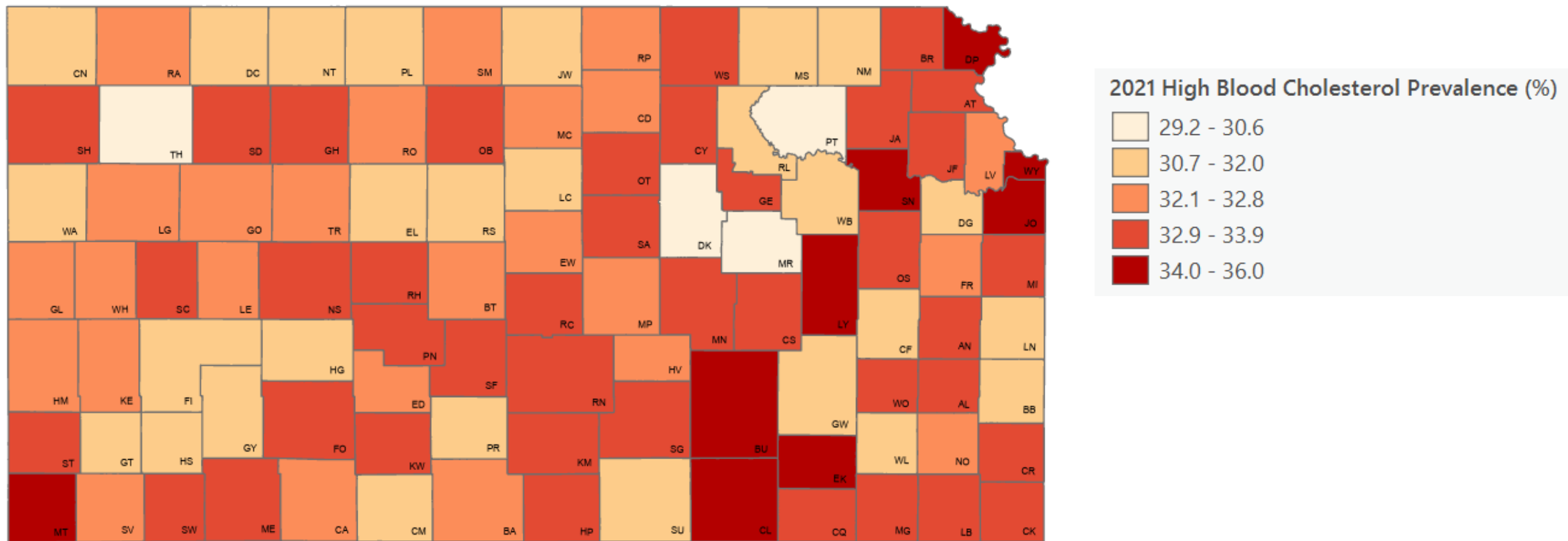
- Kansas Diabetes State Report
 - A report to the Kansas Legislative Coordinating Council in Accordance with K.S.A. 65-1,122
- National Diabetes Prevention Program (National DPP)
- Health And Lifestyle Training (HALT) Platform Implementation
- Diabetes Self-Management Education and Support (DSMES)

Cardiovascular Disease in Kansas – Hypertension



2021 CDC PLACES, Centers for Disease Control and Prevention, Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion.

Cardiovascular Disease in Kansas – High Cholesterol



2021 CDC PLACES, Centers for Disease Control and Prevention, Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion.

Cardiovascular Disease Prevention and Management Program

Focus Areas:

- Improve cardiovascular health in adults by reducing the number of adults with high blood pressure and high cholesterol
- Improve quality of care and early detection of those with hypertension and high cholesterol
- Implement evidence-based strategies contributing to the prevention and management of cardiovascular disease
- Support efforts to establish and improve systems to address social determinants of health-related barriers

Cardiovascular Disease Prevention and Management Program

Notable Initiatives:

- Healthy Heart Ambassador (HHA) Program
- Clinical Quality Improvement
 - Clinic supported self-measured blood pressure monitoring
 - Identification and referral of at-risk patients to clinical or community services
 - Team-based care workflows including non-physician team members such as community health workers and pharmacists

Alzheimer's Disease and Related Dementias in Kansas

- Alzheimer's disease is the eighth-leading cause of death in Kansas, with an age-adjusted death rate of 22.6 deaths per 100,000.
- In 2019, about 335,000 Kansas aged adults 18 years and older (11.5%; 95% CI: 10.2% - 12.8%) reported subjective cognitive decline (SCD).
 - The prevalence of SCD was significantly higher among those with lower annual household incomes and lower levels of education.
 - In addition, prevalence of SCD was significantly higher among those who reported hypertension, depression, diabetes, and hearing loss.
 - There was no significant difference in age-adjusted SCD across racial/ethnic groups.

Source: 2019 Kansas Behavioral Risk Factor Surveillance System,, Bureau of Health Promotion, Kansas Department of Health and Environment.

BOLD Public Health Program to Address Alzheimer's Disease and Related Dementias (ADRD) Program

- Focus Areas:
 - Establish a statewide ADRD coalition
 - Update the Kansas Alzheimer's Disease and related dementias state plan
 - Implement evidence-based strategies in line with Kansas' strategic plan and CDC's *Healthy Brain Initiative State and Local Public Health Partnerships to Address Dementia: The 2023-2027 Road Map*

Cardiovascular Disease in Kansas Women

- Among the 2.93 million people in Kansas, an estimated 530,239 are women aged 35 – 64 years.
- In 2021, about 284,000 Kansas adult women aged 35 – 64 years (53.6%; 95% CI: 51.7% - 55.6%) have been diagnosed with cardiovascular disease (CVD), including hypertension and high blood cholesterol.
 - The prevalence of CVD was significantly higher among women aged 35 – 64 years with lower annual household incomes and lower levels of education.
 - In addition, there were no significant differences among racial/ethnic groups in age-adjusted CVD prevalence.

Well-Integrated Screening and Evaluation for WOMen Across the Nation (WISEWOMAN) Program

- Focus Areas:
 - Provide screenings and counseling to qualifying Kansas women about their risk for heart disease and stroke
 - Implement team-based care to reduce cardiovascular disease risk
 - Track and monitor clinical measures shown to improve health care quality
 - Refer Kansas women to evidence-based lifestyle programs, individual health coaching or other community-based resources
 - Support Kansas women in participating in healthy lifestyle services by linking community and clinical resources for women at risk for cardiovascular disease

Looking Ahead

- Areas of Focus
 - Health Equity
 - Social Determinants of Health
 - Screening and Tracking
 - Addressing through referral to social supports and services
 - Team-Based Care
 - Community-Clinical Linkages
 - Coalition Building
 - Creating and enhancing partnerships
 - Bi- or Multi- directional referral
 - E-referral



Thank you and Questions



Contact Me

Lainey Faulkner

Section Director

Community-Clinical Linkages

Lainey.Faulkner@ks.gov

785-600-1534

