Improving Healthcare

Legislative Leadership Program
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Agenda

• Context
• Improving Healthcare
  – Improve patient and family experience
  – Improve health of populations
  – Improve (reduce) per capita costs
• Workforce
• Discovery and Science
• Discussion
Context of College of Human Medicine

• MSU is the pioneer land grant institution.
• CHM (1964) was the first medical school accredited as a community-based medical school.
• 13 community hospitals, 83 community sites, 3700 faculty - about 250 are CHM employees.
• Community engagement is how we thrive.
• One of the oldest rural MD education programs.
• 2016 AAMC Spenser Foreman Award for Community Service
What Can We Improve in Healthcare?

• Patient Experience
  – Quality, access, satisfaction, etc

• Health of Populations
  – Mortality, morbidity, productivity

• Per capita cost
• First, do no harm
• Satisfaction and outcomes
• Complacency is an enemy
• Every institution has to focus on quality
  – Payers, health systems, governments, providers… medical schools
Education and quality

• Must teach students
  – Data collection, statistics, population health analysis, systems analysis, CQI cycles, root cause analysis, etc

• Our Shared Discovery Curriculum does that through clinical experiences beginning in the first year.
CLINICAL EXPERIENCES
The curriculum is organized around three major clinical experiences. The Early Clinical Experience (ECE) places students in ambulatory settings learning with medical assistants, nurses, and physicians. The Middle Clinical Experience (MCE) places students in ambulatory and inpatient environments with residents and attending physicians, but also with respiratory therapists, social workers, nutritionists, pharmacists and nurses. The Late Clinical Experience (LCE) places students in ambulatory and inpatient settings on disciplinary services, now equipped to take on more responsibility and to realistically prepare for the first day of residency training.

INTERSESSIONS
Between the ECE and the MCE, and between the MCE and the USMLE Step 1 examination, there are a series of four-week intersessions. These provide an opportunity for students to refocus on challenging areas of the curriculum, expand on areas of strength or pursue their interests and goals.

PROGRESS ASSESSMENTS
A suite of progress assessments enables students and their faculty to verify learners’ achievement of competence and readiness to advance. The components of the progress assessment are carefully aligned with our SCRIPT competencies, testing medical knowledge, skills and real world behaviors.
Health of Populations

• Mortality
  – Straight forward diagnosis
  – Encompasses social determinants of health
  – Easy dashboard item that matters
    • We are either winning or losing against death
Michigan Mortality vs. USA


Last Updated: 2/10/2016
## Michigan Life Expectancy

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<th>Men</th>
<th>Women</th>
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<tbody>
<tr>
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<tr>
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Education and Mortality

Education and Mortality

• Dose:response relationships in biology usually mean the relationship is important even if the relationship is not directly causal.

• The education-mortality relationship is found across the world and is generally more stable than income or other measures of SES.
Controlling Per Capita Costs

• Make value a central focus
  – Everyone has to focus (policy, funders, insurers, providers, patients)
  – Probably not fee for service
• Consumer engagement
• Technology has to make delivery cheaper not more expensive
• The economic importance of health care is a challenge to cost control.
Improving value

• Reducing unjustified variation
  – Should be following the evidence (e.g., c-section rates)

• Underuse of services
  – AHRQ estimates 18,000 Americans die each year from underuse of medications. (e.g., post MI beta-blockers)

• Overuse of services
  – For example, irrational antibiotic prescribing

• Misuse
  – Medical errors and injuries (44-250k deaths per year)
  – 12 of the 46 patients I saw in the last 2 weeks had at least a 1 day delay in discharge due to social or systems issues.
Consumers

- Who counts as a consumer?
- Patient or consumer?
- What does it mean to be a thoughtful medical consumer?
- Can we control demand? Can we shift people to healthier behaviors?
  - City design, food policy, discouraging smoking, opiate prescribing
Physician Workforce

- AAMC “Physician Supply and Demand Through 2025: Key Findings
- By 2025 demand will exceed supply by 61,700 to 94,000
- By speciality
  - 14,900-35,600 primary care
  - 3,600 to 10,200 medical specialist
  - 25,200 to 33,200 surgical specialist
  - 22,200-32,600 other specialist
Nursing Workforce

Percent Change in Michigan Licensed Nurses by County
RN & LPN Residing in Michigan
2014 to 2016
- Loss
- Gain of 5% or less
- Gain of more than 5%

Largest absolute loss: -110 Nurses
Largest absolute gain: +379 Nurses

Largest percent loss: -15.22% Nurses
Largest percent gain: +8.22% Nurses

MPHI
Michigan Nurse Mapping Project

Michigan State University
College of Human Medicine
Physician Residency 2016

- 27,655 MD and DO graduates
- 27,293 open residency positions
- CHM 97% match rate
Giselle Sholler
Andre Bachman
Grand Rapids
Neuroblastoma

Mona Hannah-Attisha
CS Mott Professors
Flint Public Health