COLUMBIA HEALTH, SOCIAL AND ENVIRONMENTAL AFFAIRS COMMITTEE MEETING AGENDA
TUESDAY, SEPTEMBER 26, 2023

The Columbia Health, Social and Environmental Affairs Committee will conduct a meeting on Tuesday, September 26, 2023 at 11:00 a.m. at City Hall (Mayor's Conference Room), 1737 Main Street, 2nd Floor, Columbia, SC 29201. Members of the public may view the meeting online at www.columbiasc.gov. Please contact the City Clerk's Office at (803)545-3045 or cityclerk@columbiasc.gov if you have questions regarding the meeting.

The Honorable Aditi Bussells, Chair
The Honorable Howard E. Duvall, Jr., At-Large ▪ The Honorable Edward H. McDowell, Jr., District II

Prior to entering the meeting please turn all electronic communication devices to the silent, vibrate or off position. All presenters are asked to speak directly into the microphone for recording purposes.

CALL TO ORDER

COMMITTEE DISCUSSION

1. Update on Community Health Initiatives - Ms. Angela Jenkins, Vice President, Office of Community and Social Health / Prisma Health

2. Differential Licensing - Ms. Victoria Riles, Animal Services Superintendent

3. Boundary Trees – Mr. Brian Neiger, Forestry & Beautification Superintendent

ADJOURNMENT

We Are Columbia

MEETING DATE: **September 26, 2023**

DEPARTMENT: **City Clerk**

FROM: ***Erika Hammond, City Clerk***

SUBJECT: **Update on Community Health Initiatives - Ms. Angela Jenkins, Vice President, Office of Community and Social Health / Prisma Health**

FUNDING SOURCE & ORIGINAL BUDGET:

ATTACHMENTS:

- **#a:** Prisma Health Update 092623 (PDF)
- #b: Highlights and Statistics
- #c: 2022 Community Health Needs Assessment Report
- #d: Community Health Needs Assessment Action Plan
- #e: FY 2022 Public Health Initiatives and Community Outreach Programs

PRISMA HEALTH SM

Health, Social and Environmental Affairs Committee

September 26, 2023

Prisma Health at a Glance

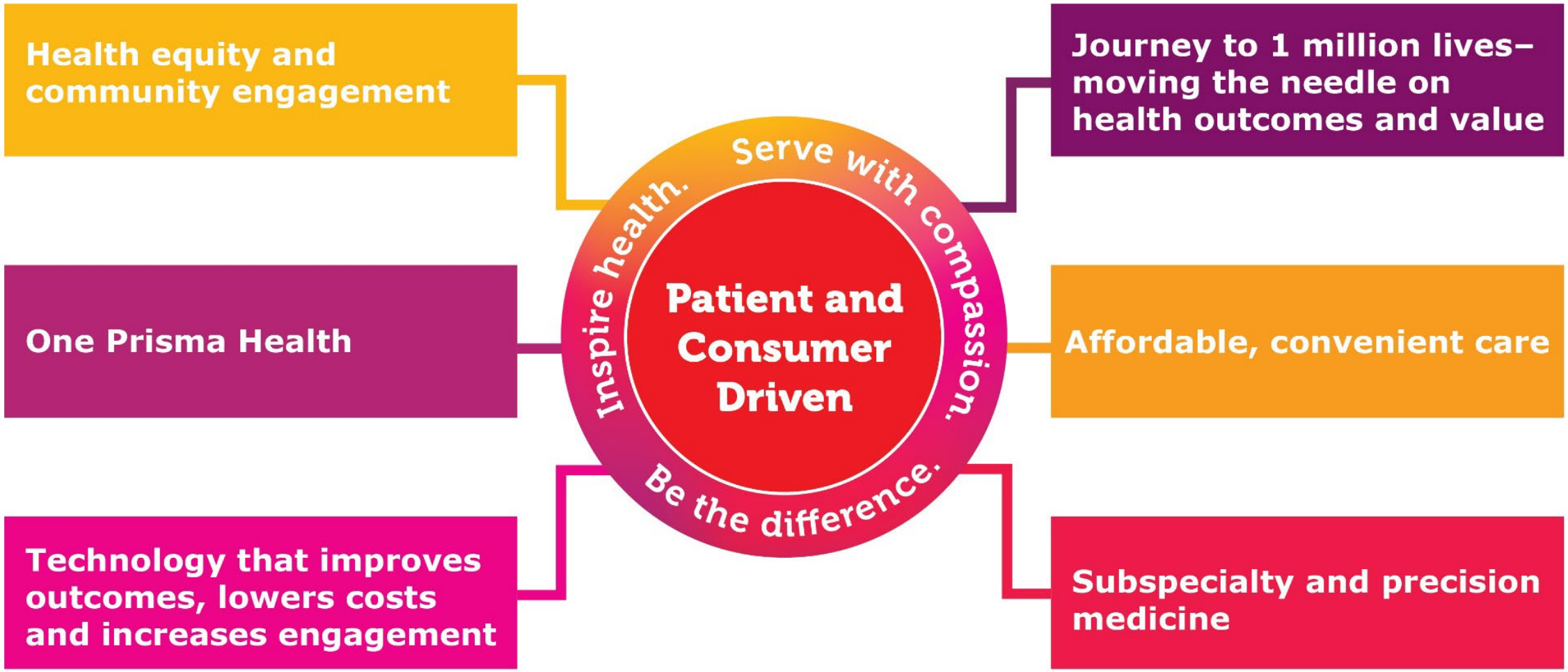
Prisma Health is a private nonprofit health company and the largest health care organization in South Carolina. Prisma Health has:

- 29,754 team members
- 18 acute and specialty hospitals
- 2,827 licensed beds
- 305 practice sites
- More than 5,200 employed and independent clinicians

Prisma Health serves almost 1.5 million unique patients annually in its 21-county market area that covers 50% of South Carolina.

https://prismahealth.org/pdfs/highlights-and-statistics-report-fy-2022

Creating a better state of health FY 22-25

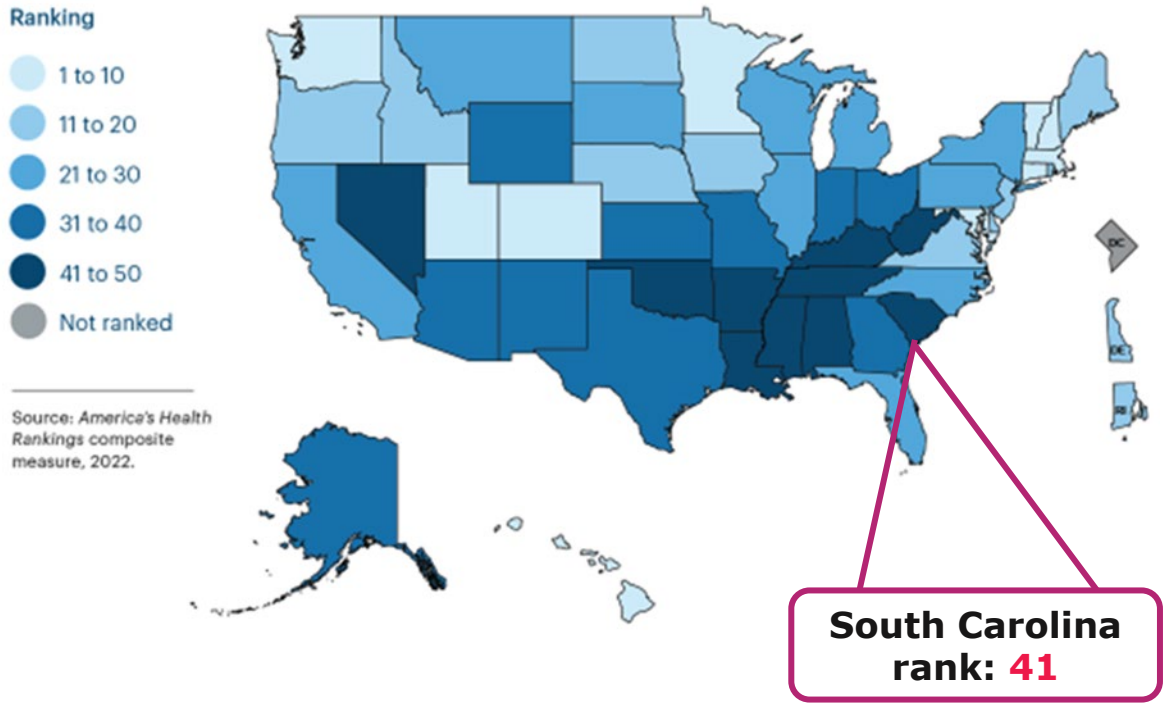


Challenges to Health Status in South Carolina

44th for social and economic factors
(food insecurity, poverty, education etc.)

43rd for health outcomes
(low birthweight, diabetes, etc.)

40th for behaviors
(smoking, sleep, exercise, etc.)



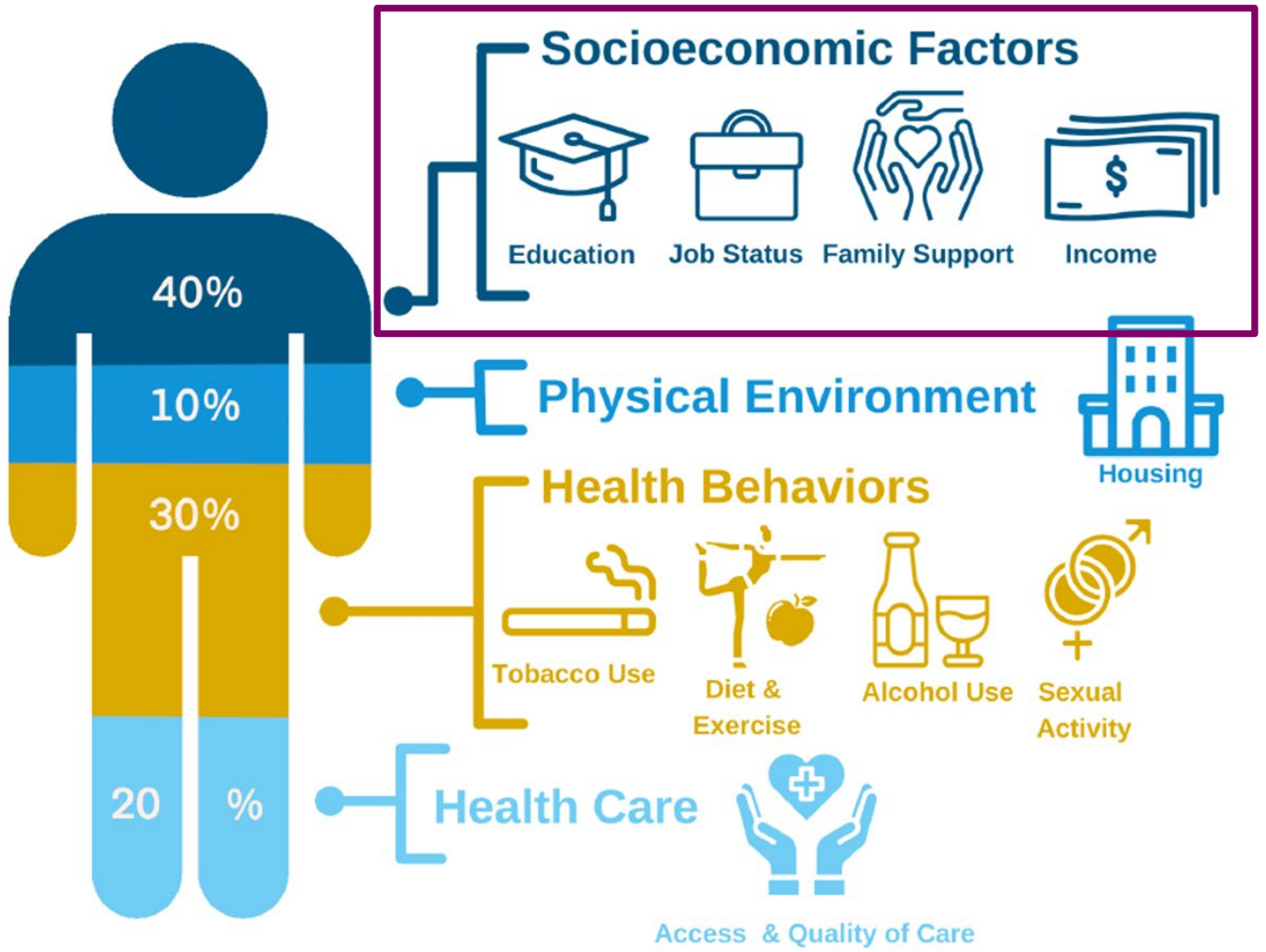
Consumers in Upstate and Midlands spend $28 Billion* per year on health care

Updated Numbers based on America's Health Ranking 2022 Annual Report of states and their health outcomes status rankings.

*US Census Bureau and CMS estimate of SC per capita spend on health care in 2014 was $7,311 and the average annual growth rate was 5.2% between 1991-2014. An increase in 5.2% was applied to each year to get an approximate 2021 per capita spend on health care of $10,425.

There are 2.7 million people in the Upstate and Midlands of SC (51% of the state's population).

Core Drivers of Health



Our Collective Imperative

In today's value-based care environment, **health care organizations are accountable for improving health outcomes and lowering costs, and to provide value**, **equity,** and assistance to unfunded/self-pay populations and underserved populations.

To achieve this, and succeed in such an environment, health care organizations need to address the **upstream socioeconomic factors** that impact patients' health behaviors, health outcomes, and health costs.

Image courtesy of The Story of the River David Aylward, Assistant Clinical Professor, Department of Family Medicine, University of Colorado School of Medicine July 2020

Advancing Population, Community, and Social Health

Improving health access, coordination, **social health needs, and equity** for those most at risk along the care continuum reduces costs, improves clinical outcomes **and community health.**

Population and Community Health

Community Health and Prevention

Rural Health and Access

Analytics, Evaluation and Communication

Community and Social Health Services

Prisma Health has been a catalyst in efforts to improve the physical and social health and well-being of our community. Our organization has provided more than a million health services to residents in our Midlands and Upstate service area.

ONE

PRISMA

Access to Care
- Care and resource support for uninsured/underinsured

Community and Health Partner Involvement
- Academic research
- Schools and safety net providers
- Funded partnerships (Midlands)

Disease Prevention & Management
- Diabetes Prevention Program
- Hypertension Management

Medical Neighborhoods
- Vaccinations, health screenings, SDOH assessments
- Mobile health services
- Community Paramedicine
- Community health workers (PASOs)

Healthy Start: Midlands
- Pre/Post-natal support for children and families
- Fatherhood engagement

School and Community Health Services
- Clinical services (in person and telehealth)
- Health Education services
- Social work and family support
- School health partnerships
- Injury Prevention

Community Health Needs Assessment (CHNA)

What is the Community Health Needs Assessment?	Designed to help improve overall health and wellness
	Identifies community needs and use of local health resources
	Actions needed to address healthcare delivery in defined areas
	Conducted every 3 years

Three major health improvement areas (2022):

- Mental health
- Overweight and obesity
- Heart disease and stroke

Prisma Health Diabetes Prevention Program

Prisma Health Diabetes Prevention Program has received **Full Plus recognition from the Centers for Disease Control,** the highest achievement for a Diabetes Prevention Program with:

- 397 participants
- 5,322 pounds lost
- 6.1% total weight loss
- 31 cohorts

Prisma Health Midlands Healthy Start

Midlands Richland and Sumter Counties

Provides services to **430** newly enrolled pregnant women, infants/children and fathers.


COLOR
CREATING
FASHION


Richland Hospital
5 Medical Park


Richland Hospital


5 Medical Park
adidas

Access Health Programs

- **38,374** total patients since inception.
- 2023 Q3, **443**, new patients were enrolled and **639** specialty care referrals, decreasing ED utilization by **21.5%.**
- In the past two years of tracking that data, we have **5%** reduction in our patient population who have an **HA1C greater than 9%.**
- Partnering with the Manning correctional facility we assisted **50 patients.** This pilot has expanded to several Access Health in the State.

Healthy People Healthy Carolinas Grant

Collective Impact Initiative

- Focus on chronic disease prevention, healthy eating and active living in Richland County.
- Enhance the capacity to align and sustain community health improvement efforts.
- Increase the number of policies, systems, and infrastructure changes in community-based and other key stakeholder organizations.
- Ensure the adoption of interventions equitably occurs within high-risk zip codes.

Planning Grant = $100K

Implementation = $650K over Five years

Advancing Health Equity

What we believe

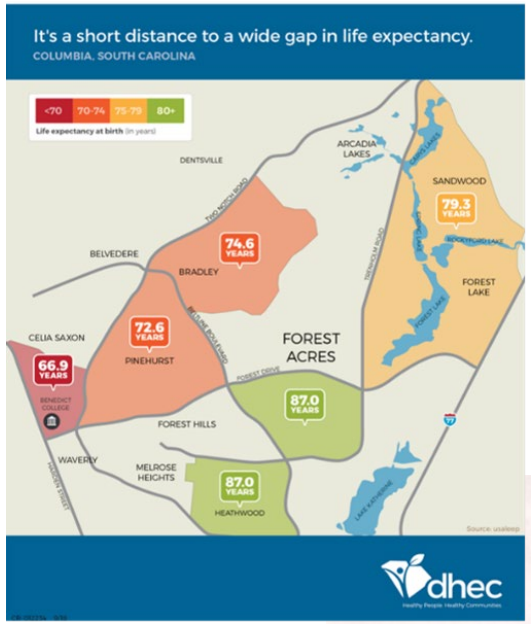
At Prisma Health, we believe that health equity is achieved when **everyone has an opportunity to receive the best healthcare** regardless of their sociodemographic status.

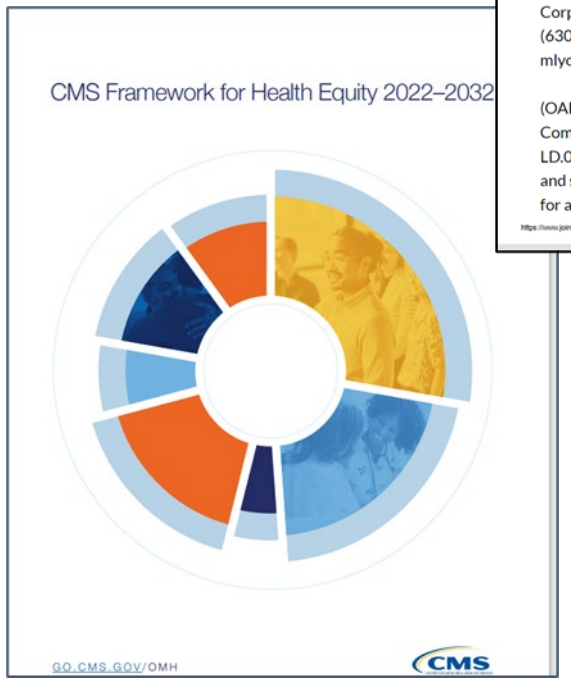
Health care equity is often viewed through a social justice lens, we understand it to be **first and foremost a quality-of-care opportunity**.

The only way to ensure success is to **take a critical look at our current practices, inherent biases, and structural deficiencies** which create conditions that inadvertently contribute to health disparities.

In order to achieve transformational and sustainable improvement for Prisma Health patients **we need to approach health care equity in the same way we approach other crucial patient safety and quality of care priorities** — by understanding the root causes and implementing consistent standards of care that improve quality and health outcomes.

External Drivers





The Joint Commission

The Joint Commission

The Joint Commission elevates health care equity standard to National Patient Safety Goal

New NPSG to increase focus on health care equity as a patient safety and quality priority
Tuesday, January 10 2023

Media Contact:
Maureen Lyons
Corporate Communications
(630) 792-5171
mlyons@jointcommission.org

(OAKBROOK TERRACE, Illinois, January 10, 2023) – The Joint Commission announced it is elevating Leadership (LD) Standard LD.04.03.08 – which addresses health care disparities as a quality and safety priority – to a new National Patient Safety Goal (NPSG) for all critical access hospitals and hospitals, as well as son.

NCQA
Measuring quality. Improving health care.

Pulse Program Clinical Operating Model

The Pulse Program, a key system wide priority, is a fully integrated quality, safety, experience, and population health improvement program that **engages every member of our team and our community and provides the clinical operating system and learning system that supports all our work**.

The program is dynamic and ever-evolving, enabling us to manage our daily work, and continually **redesign our care to make it better** - in service to our patients and our team members.

The Pulse Program enables our **Culture of Excellence**.

Population health and health disparities are part of and addressed through the **Clinical Advancement Program**.

Equity Of Care Pledge

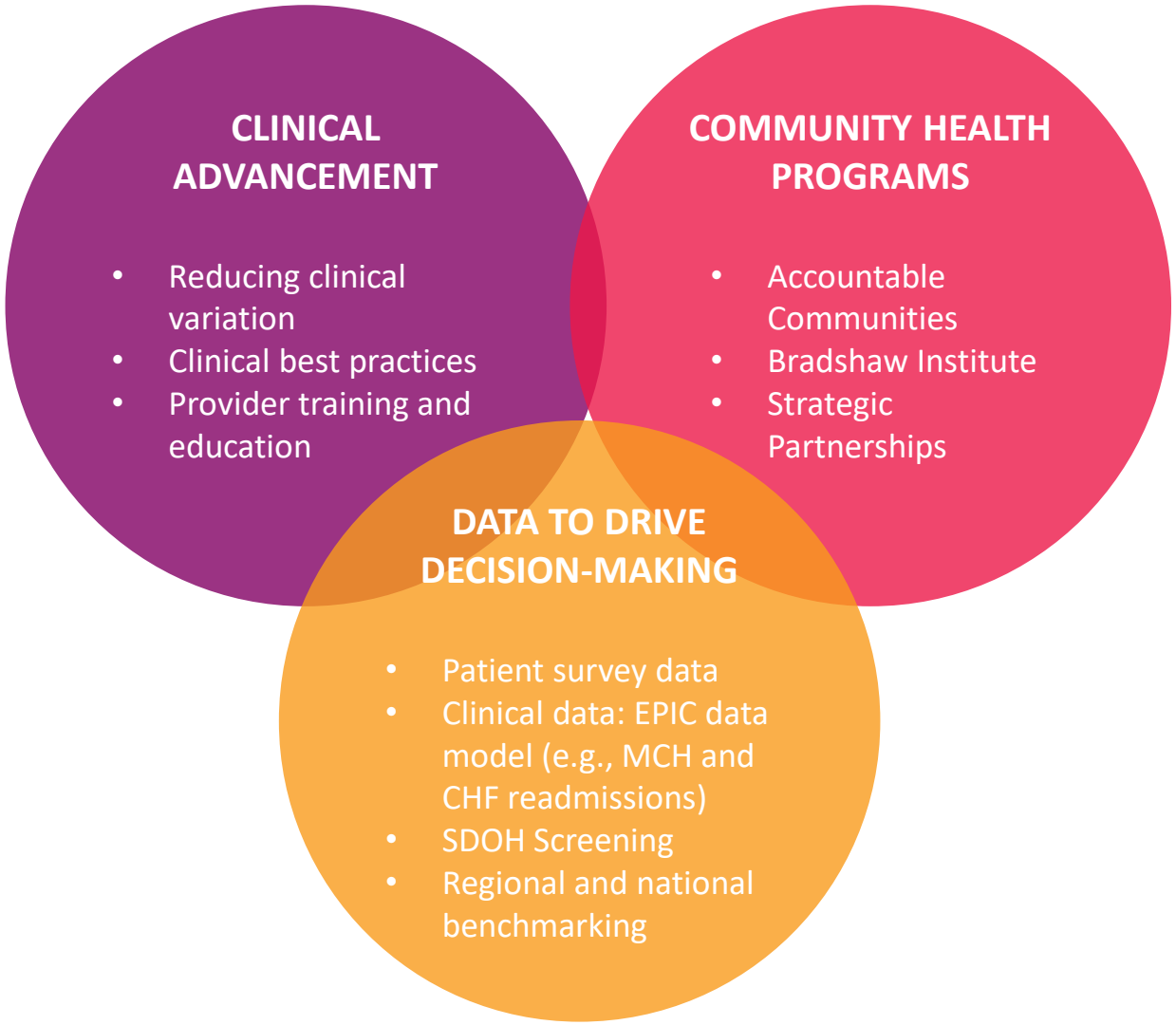
American Hospital Association™

Advancing Health in America

AHA Equity Of Care Pledge

- Implement strategies to **increase the collection, stratification and use of race, ethnicity, language preference** and other sociodemographic data to improve quality and safety.
- Advance **cultural competency** training to ensure **culturally responsive care**.
- Increase **diversity in leadership** and governance to reflect the communities served.
- Improve and **strengthen community capacity/partnerships**.

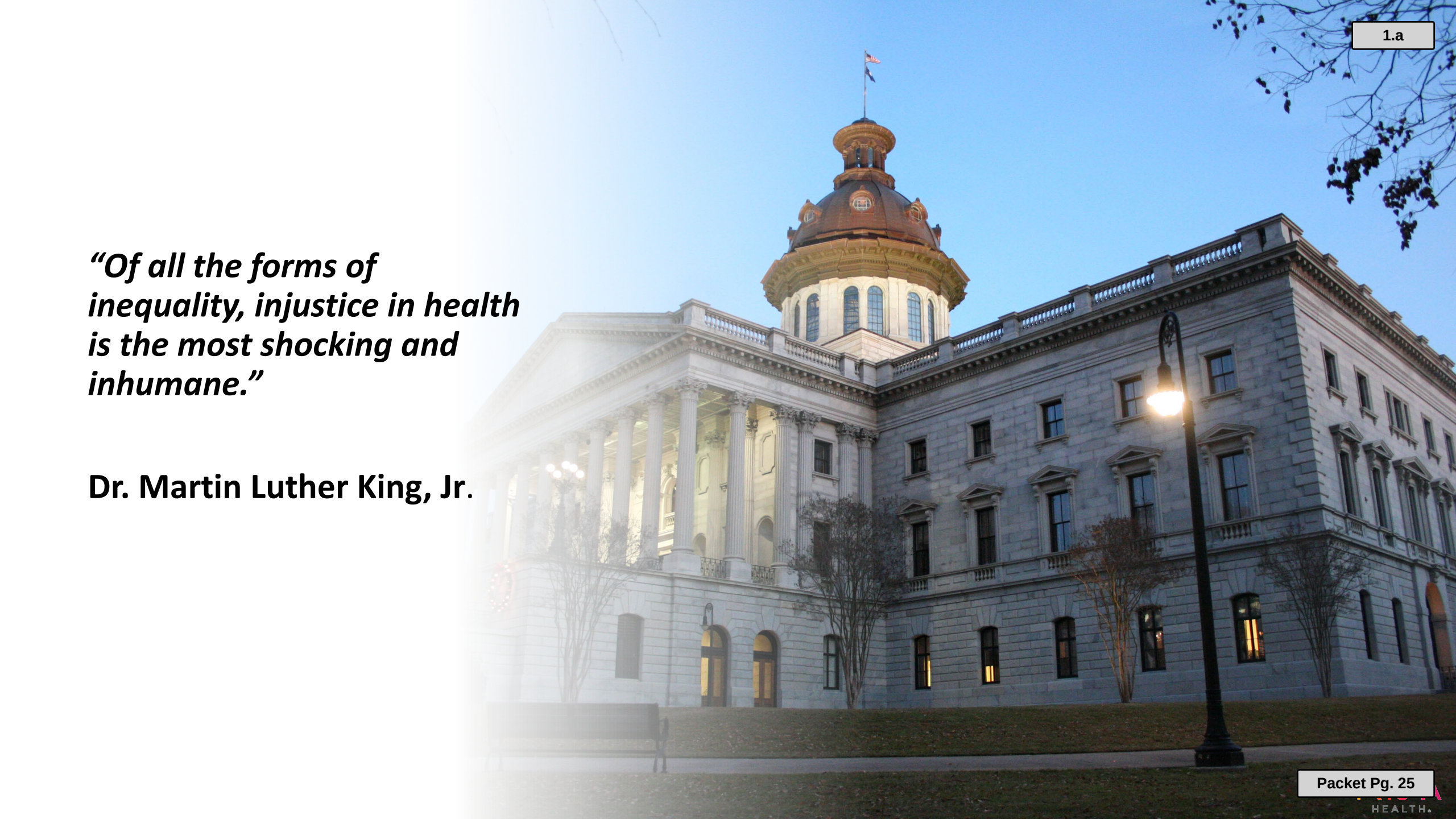
Advancing Health Equity Framework



Excellent & equitable health outcomes

Enhances our reputation and brand

Positions Prisma Health as a leader in improving health care for all



“Of all the forms of inequality, injustice in health is the most shocking and inhumane.”

Dr. Martin Luther King, Jr.

PRISMA HEALTH SM

PrismaHealth.org

We Are Columbia

MEETING DATE: **September 26, 2023**

DEPARTMENT: **City Clerk**

FROM: ***Erika Hammond, City Clerk***

SUBJECT: **Differential Licensing - Ms. Victoria Riles, Animal Services Superintendent**

FUNDING SOURCE & ORIGINAL BUDGET:

We Are Columbia

MEETING DATE: **September 26, 2023**

DEPARTMENT: **City Clerk**

FROM: ***Erika Hammond, City Clerk***

SUBJECT: **Boundary Trees**

FUNDING SOURCE & ORIGINAL BUDGET:

ATTACHMENTS:

- **#a:** Boundary trees (PDF)

Boundary Trees

Forestry and Beautification
September 26, 2023

Trees grow symmetrically from the center

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Current Practices

- Responsibility over right of way for public safety concerns
- Request received, ownership unknown
- Methods used to determine ownership include:
  - Tree records
  - Water meter placement
  - Driveway apron distance
  - Property stakes if readily visible
- If unable to determine ownership
  - Engineering department
  - Root flare
  - DBH
- Pruning ROW
- Removal
- Communication and cooperation with citizen
- Replanting if possible

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Forestry's Definition

A boundary tree is a tree whose trunk sits on or near the property line and the trunk extends onto adjoining properties. Boundary trees are a shared responsibility between the City and property owners.

In the City of Columbia's case, the tree trunk sits on the line between the right-of-way and private property and it is unknown who planted the tree.

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Google's Definition

A boundary tree is a tree whose trunk, roots, or branches break through the invisible barrier extending onto the property or air space of an adjoining owner. In most jurisdictions, each landowner has a tenants-in-common ownership interest in the boundary tree.

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State Law

The law says in reference to boundary trees specifically:

If any person shall knowingly, wilfully, maliciously or fraudulently cut, fell, alter or remove any certain boundary tree or other allowed landmark, such person so offending shall be guilty of a misdemeanor and, upon conviction, shall be fined not exceeding one hundred dollars or imprisoned not exceeding thirty days. SC Code § 16-11-680 (2012)

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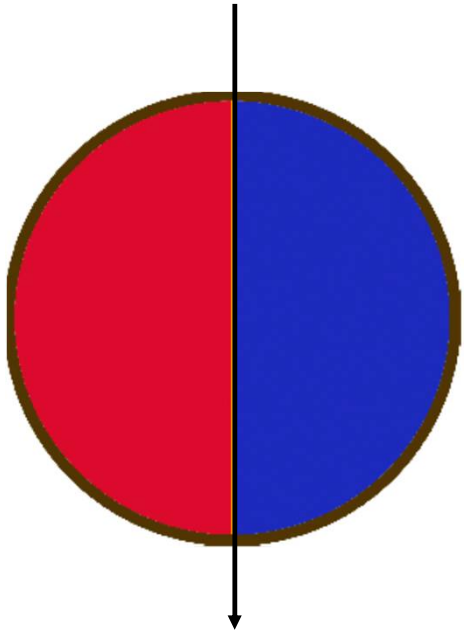
Ownership

Homeowner side

Street side



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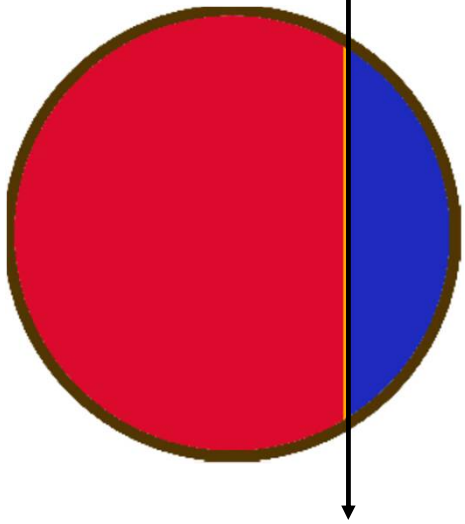
Ownership @ DBH

Homeowner side



Street side

City

Homeowner

Property line

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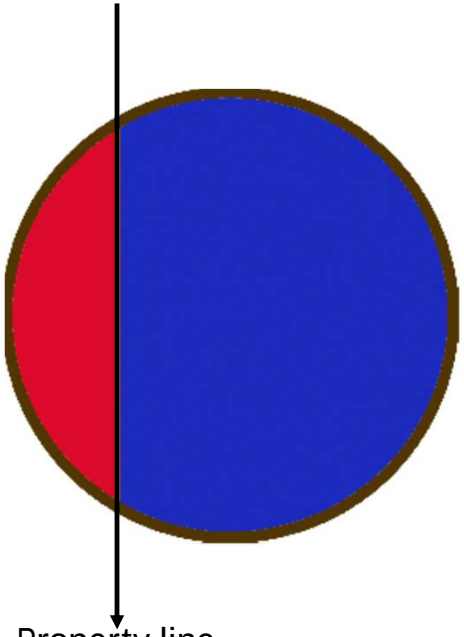
Ownership

Homeowner side

Street side



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Field Examples

Field Examples

Field Examples

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Field Examples

City's Legal Opinion

When we approached the City of Columbia Legal Review with this issue. Legal review sent the following response.

"There is the generally accepted ability to remove those limbs that extend over the vertical line from your boundary line up. But I would not recommend altering the portion of the tree that does not encroach into the ROW. I think our past history of cooperation but not assuming ownership is a sound one. There does not appear to be anything indicating the side that has the largest portion of the tree wins, either. Our most defensible position appears to be our current one".

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Questions/Discussion