



STAFF REPORT

Report To: Board of Health

Meeting Date: July 19, 2018

Staff Contact: Mary Jane Ostrander (mostrander@carson.org)

Agenda Title: For Presentation and Discussion Only: Presentation and discussion about the quality improvement project conducted within the Human Services Division - Community Health Worker within the housing program.

Staff Summary: Carson City Health and Human Services (CCHHS) has a quality improvement plan and fosters a culture of quality improvement. The mission of the plan is to continuously improve the quality of our programs, processes, and services so that the department may provide high quality services which best fulfill the needs of the community and improves the quality of life within the community. Quality improvement is the foundation of the Public Health Accreditation process.

Agenda Action: Other/Presentation

Time Requested: 15 minutes

Proposed Motion

Presentation and discussion only.

Board's Strategic Goal

Quality of Life

Previous Action

N/A

Background/Issues & Analysis

Acknowledging that many clients use emergency rooms as primary healthcare and have a misunderstanding of recommendations made by medical providers, as well as other barriers, CCHHS' Human Services piloted the Community Health Worker within the housing program. The apotheosis was that having a Community Health Worker assist the housing clients with healthcare needs would help clients be more successful within the housing program. Some of the assistance that the Community Health Worker provides is making sure doctor's appointments were made and attended, assessing if the clients understand the doctor's directions, prescribed medications were filled, picked up and taken as prescribed, and others. By assisting with the client's healthcare needs, a client can work on accomplishing the objectives decided upon by the Housing Case Manager and the client.

Applicable Statute, Code, Policy, Rule or Regulation

N/A

Financial Information

Is there a fiscal impact? Yes No

If yes, account name/number:

Is it currently budgeted? Yes No

Explanation of Fiscal Impact:

Alternatives

None

Board Action Taken:

Motion: _____

1) _____

2) _____

Aye/Nay

(Vote Recorded By)



COMMUNITY HEALTH WORKER

QUALITY IMPROVEMENT PROJECT
HUMAN SERVICES DIVISION

PROBLEM STATEMENT:

FOR INDIVIDUALS

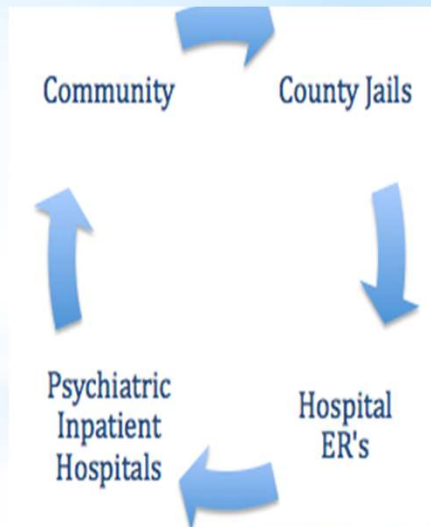
- Repeated emergency room visits
- No follow up with specialists
- Not making doctor appointments
- Cannot fill prescriptions
- No transportation
- Did not understand what doctor said

FOR FIRST RESPONDERS, HOSPITALS

- No one to follow up after crisis

INDIVIDUALS IN CHRONIC CRISIS “THE SPIN CYCLE”

- * Superutilizers utilize a variety of costly emergency services leading to fragmented care
- * They cycle in and out of hospital ER's, inpatient psychiatric hospitals, and jails without receiving the necessary support to succeed
- * This population includes veterans with PTSD and substance use issues, young people struggling with mental illness, and our elderly
- * Often these individuals have experienced trauma, mental illness, and substance use issues, and move from crisis to crisis



WHAT ARE WE TRYING TO ACCOMPLISH:

Reduce the number of emergency calls by eliminating barriers to follow up on medical appointments.

PARTNERS:

- ✓ Carson Tahoe Hospital
- ✓ Behavior Health Services
- ✓ Mobile Outreach Safety Team (MOST)
- ✓ Forensic Assessment Services Triage Team (FASTT)

*Since July 1, 2017, the Community Health Worker has completed an intake on 145 individuals and has had a total of 459 client interactions with those individuals.

DATA COLLECTION:

A needs assessment will be completed upon referral:

- Transportation
- Primary Healthcare
- Housing
- Employment
- Health Insurance
- Childcare needs if applicable

Re-assessed every three months

Databases:

Elogic database - inner-agency only

Community Management Information System (CMIS) - statewide

Performance measures for FASTT and MOST are being determined and will be consistent with outlying counties

DO:

- ✓ Respond to MOST referrals
- ✓ Continue discharge planning with hospital
- ✓ Now a partner on FASTT
- ✓ Act as liaison between FASTT, Human Services, and Courts



CHECK:

We will know if this change is an improvement as each individual reduces the number of crisis interventions and moves toward maintaining a healthy lifestyle.

ACT:

We have witnessed the benefits of the Community Health Worker program and will evolve the data collecting toward measurable performance measures.

FUNDING:

The Discretionary portion of the Community Services Block Grant piloted the Community Health Worker program July 1, 2017 through June 30, 2019. The second year is to be decreased 25%.

REFERRAL: CARSON TAHOE REGIONAL HEALTH

HISTORY

- 52 Year Old Male
- Diabetic at risk for losing limbs
- Income - Employed
- Determined not to lose his job so he return to work against medical advice
- Living in a weekly motel
- Medical concern - Re-infection due to living conditions
- Repeated visits to emergency room

CHW INTERVENTION

- ✓ Met with him while he was still in the hospital
- ✓ Discharged from hospital, housing subsidized through a CCHHS housing grant (allowed him to take time off work to heal)
- ✓ Established with a primary care physician
- ✓ Diabetes is now being treated
- ✓ No visits to emergency room

REFERRAL: FISH

HISTORY

- Exiting emergency shelter after a 3 month stay
- Mental health issues
- Self medicating resulting in frequent arrests and jail time
- Children in custody of Child Protective Services

CHW INTERVENTION

- ✓ Housing subsidized by CCHHS housing grant
- ✓ Established primary care physician and specialists
- ✓ Encouraged AA support
- ✓ Assisted with employment services

Currently:

- ✓ Mental illness being treated
- ✓ Has maintained employment
- ✓ Going to school
- ✓ Has full custody of her child



THANK YOU

QUESTIONS