

Executive Summary
Annual Report
Tahoe Forest Health System
Wellness Neighborhood
2013-2014

Purpose: This report provides key findings of the Wellness Neighborhood's execution of the TFHS Board of Director's established *Community Health Improvement Plan* that prioritized five issue areas: Access to Primary Care, Immunizations, Ethnic Disparities, Mental/Behavioral Health and Substance Abuse.

Methods: The Wellness Neighborhood accomplished the goals and objectives of our work through key partnerships and community engagement. Our vision to "achieve equitable, sustainable programs and partnerships that respond to local health priorities" built upon the TFHS 2011 Community Health Needs Assessment. This assessment and intervention strategies were developed through a broad spectrum of community leaders and organizations and represent the most critical element of our methods, that of community engagement and expertise on activities that are relevant, measureable and have health care improvements.

Major Accomplishments: The most significant results highlight the **65,035** various connections with the community that resulted in either participation or receipt of educational information through **881** *Rethink Healthy!* events in Fy 2014. Through our outreach and educational trainings, we averted a suicide attempt and intervened in a young child's lifethreatening dental emergency. These are a few examples of lives saved, and of how we touched the lives of hundreds, to address their health issues and improvements towards optimal health.

Future: The 2014 Community Health Needs Assessment is well underway that will validate the health improvement priorities and goals established between 2011-2012, and provide the results to the TFHS Board of Directors and community partner organizations. This will realign our benchmarks and understanding of health in the Truckee/North Tahoe area. This process allows our organization to understand the full impact of our work to date, and to engage with the community to address the issues that continue to affect our health in all ages and ethnicities. We continue to achieve our mission to "develop a collaborative community-based system of care that transforms health in the high sierra region".

# Annual Report Tahoe Forest Health System Wellness Neighborhood 2013-2014



An Affiliated Program of the Tahoe Forest Health System

Presented by: Caroline Ford, M.P.H. Executive Director

#### **Background**

This report encompasses the work of the Wellness Neighborhood in Fy 14 that was built upon the framework of strategic planning by TFHS after careful review of the 2011 Community Health Needs Assessment.

That process assessed the community and established recommendations concerning health needs within the region. The initial program addressed: Primary Prevention, Chronic Disease Management, Dental Care, Mental/Behavioral Health and Ethnic Disparities.

The TFHD Board of Directors, area health care professionals, social service agencies, public health representatives and local organizations further examined these health needs to prioritize and to strategize upon improvements. From this work emerged a *Community Health Improvement Plan*. The overarching goal was engagement of the community to examine the root causes of disease and illness leading to greater illness prevention and healthy lifestyle choices. The five prioritized TFHS Board of Director issue areas were: **Access to Primary Care, Immunizations, Ethnic Disparities, Mental/Behavioral Health and Substance Abuse**.

Concurrent with TFHS' focus on community health issues came the nation's significant overhaul of the health system. The Wellness Neighborhood co-joined their community-based efforts with TFHS' to address "improving the health of populations" as part of the Affordable Care Act's Triple Aim, in order that the community would experience their transition to health care improvements in a coordinated system of care.

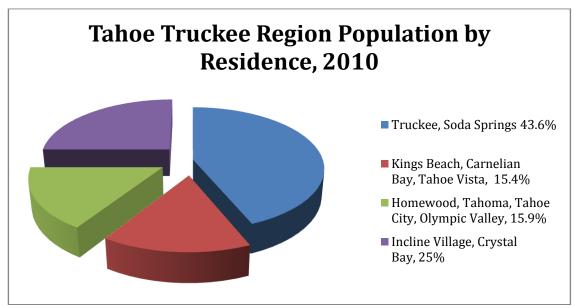
To further the now established priority issue areas, beginning in the summer of 2013, several over-arching principles were used to guide the Wellness Neighborhood program planning and development:

- Integration of the Wellness Neighborhood and TFHD's Division of Community Health with a reformed name, mission, purpose, values and vision, and reflective of community-based partnerships;
- Increase capacity building internally and at the local level to strengthen the capabilities of partners and organizations to maintain or expand services delivery;
- Formalize partnerships and collaborations that articulate specific community health goals and activities;
- Analyze structural components that influence access to primary and preventive health services;
- Incorporate TFHD's ability to provide health careers development in their service area to influence and produce our next generation of health care leaders and our future health care workforce;
- Utilize evidence-based data that allows the creation of programming that reflects area needs, is measureable and comparable to recognized standards and considers new models of rural community health care.

The Wellness Neighborhood (WN) and Community Health, conducted internal strategic planning and an asset inventory in November 2013 to move the Division integration. The Wellness Neighborhood (WN) incorporated community organizations, individuals, WN workgroups and chairs into ongoing advisory roles and strategic community-based efforts to execute WN Community Health Improvements. This approach has allowed improved integration across the issue areas.

# **Regional Overview**

The TFHS Wellness Neighborhood program encompasses the TFHD community areas of eastern Nevada and Placer Counties, California and the western portion of Washoe County, Nevada known as Incline Village. The demographics and ethnicity for these areas include: regional population of 37,039; and an average ethnic breakdown of 20% Latino and 80% Non-Latino.



Source: United State Census Bureau, Population Finder (2012)

#### **Setting the Stage**

The Wellness Neighborhood integrated all Community Health outreach activities into a new template of programs beginning in February 2014 with our new promotional identity: *Rethink Healthy!* 

The calendar of rotating health topics promotes community wellbeing and integrates public health. Many of these health topics align with national health observances. Education is provided throughout the community at various venues to reach diverse subsets of the population. February's Heart Month kicked off the *Rethink Healthy!* series with classes such as Breathing and Movement for a Healthy Heart, Heart Healthy Eating & Nutrition, Optimizing Your Exercise, The Latest in Heart Health and blood pressure screenings & education events. Heart Month was followed by Nutrition and Colorectal Health, Substance Abuse, Physical Fitness, Skin Cancer, and Men's Health.

The month of May Walking Challenge of 10,000 Steps a Day engaged 156 community individuals, who participated solo or as part of a team, for **30 days** to produce enough steps to walk from Tahoe to New Zealand. Inspiration to walk promoted one community member to participate through her 81-year-old friend who, just four months after breaking her femur in a skiing accident, hiked over 6 miles from Sage Hen Creek to Stampede Reservoir and was at the time planning her 7<sup>th</sup> hut to hut hike in Yosemite this summer.

A total of **65,035** various connections with the community resulted in either participation or receipt of educational information through **881** *Rethink Healthy!* events in Fy 2014.

#### **Our Partners**

Without the partners that support the Wellness Neighborhood goals, programs and activities we could not describe the results in this report. To them we dedicate the improvements in our community's health and share in the successes that bring quality programs to our region. The following is representative of the majority of organizational partners, but does not reflect many individuals within the community that have extended their time and efforts. Nor does the list reflect the many departments and programs within the Tahoe Forest Health System and our community of health care practitioners that commit their lives to our community's health.

Boys & Girls Club of North Tahoe

Colon Cancer Alliance

**Community Recovery Resources** 

Diamond Peak Ski Resort **Hvatt Incline Village** 

Incline Village General Improvement District

**Nevada County Crisis Workers** 

Nevada County Immunization Coalition

North Tahoe Family Resource Center

**Nutrition Coalition** 

**Placer County Crisis Workers** 

**Placer County State Preschools** 

Sierra College **Tahoe Donner** 

Tahoe Truckee Future W/O Drug Dependence Truckee Donner Public Utility District

Tahoe Truckee Unified Sch. District Teachers,

Administrators, Nurses and Parents

Tahoe Truckee Youth Suicide Prevention Task Force

Town of Truckee/Town of Truckee Police Dept. Truckee Home and Building Show Truckee Meadows Community College Washoe County District Court

Washoe County School District

**Behavioral Health Practitioners** 

Community Collaborative of Tahoe Truckee

Crisis Intervention Task Force Family Resource Center of Truckee **Incline Village Community Businesses** 

Narcanon

Nevada County Health and Human Services Nevada HOPES (HIV Outreach, Prevention, Education, Services)

Northstar at Tahoe

Parasol Tahoe Community Foundation Placer County Health and Human Services

**Project MANA** 

Sierra Nevada College **Tahoe Safe Alliance** 

Truckee Donner Parks & Recreation District

Tahoe Truckee Unified School District Wellness Centers

University of California, Davis Washoe County Health District Washoe County Sheriff Department

#### **Results**

The following accomplishments reflect the accumulation of achievements by the staff of the Wellness Neighborhood and Community Health, and community partners that have direct contractual relationships or investment in the outcomes.

#### **Access to Primary Care**

All residents will be able to identify and access a primary care provider (medical home).

How the TFHS reaches into the community to address Access to Primary Care builds off internal policies and practices that create a framework for access. Importantly, TFHS openly provides multiple opportunities for the community to receive care. Patients may come through the Emergency Department where no one is turned away due to finances, and various payment options exist to facilitate coverage including charity care and public assistance. Patients may come to the TFHS Health Clinic where acceptance of MediCal (now Managed Care options) and Medicare financing are in place, and where a sliding fee scale is provided for other financial support. Additionally, through the TFHS Multi-Specialty Clinic practice, acceptance of public financing and other means of financial support are available. All of these options are critical in understanding that institutionally, TFHS offers a wide range of options to address Access to Care.

#### **Intervention, Methods, Results**

The Wellness Neighborhood (WN) built upon the TFHS existing framework in several key ways.

• The WN priorities of Access to Care and Disparities were integrated through an expansion of the WN grant scope of work with both of the Family Resource Centers. These actions included support of the personnel providing Covered California outreach/education and enrollment services to the general community and the Latino community specifically. Additional outreach for TFHS included the availability of education to internal staff on the Covered California options and process, and Spanish language translation of materials. During the next six months (July-Dec. 2014), the FRCs will consult with the WN to identify health service gaps by newly insured FRC clients. This will provide the basis for future mitigation by TFHS to reduce barriers to care.

Affordable Care Act-Covered California results for the North Tahoe Family Resource Center (NTFRC) and the Truckee Family Resource Center (TFRC) funded through multiple organizations: 4468 outreach encounters, 895 education contacts, 562 insurance coverage leads, and 105 MediCal enrollments between 1/1/14-6/30/14.

Of particular note: Placer County ACA Enrollment Statistics: 13,048 newly enrolled in Covered CA; 13,277 enrolled MediCal; 4000 current applications still waiting to be processed for MediCal. Placer County estimates they reached 100% of the uninsured. (These figures are for all of Placer County but a higher proportion of those in poverty live in the eastern part of the county).

Implications: newly insured patients are beginning to identify primary care practitioners and are starting to access care. Our health professions shortages in primary care personnel will mean that we will have difficulties in keeping pace with the impact of the demand. Another enrollment period will occur in the fall of 2014.

• The WN was notified of the potential loss of TFHS' federal Health Professions Shortage Area (HPSA) designation in the fall of 2013. This designation has many direct and indirect implications for community practitioners: access to federal resources for primary care programs, and reimbursement (10% bonus payments) for primary care services to the Medicare population (approximately 9% of TFHD and 18% of Incline Village populations).

Analytics performed by the WN Director produced a second report to the Healthcare Workforce Development Division of the Office of Statewide Health Planning and Development for the State of California to challenge the reported numbers.

- The HPSA de-designation was reversed by the State of California, which provided state approval onward to the federal Office of Designations. The results directly impacting TFHS included: retaining quarterly Medicare bonus payments for CMS Medicare services by selected practitioners.
- All primary care practitioners of the Truckee Tahoe Medical Group and the Kings Beach Clinic operated by Placer County also benefitted from the bonus payments and other HPSA related programming.
- WN awarded federal Office of Rural Health Policy grant 6/1/14 -5/30/15 of \$83,794 for a Network Grant with the Truckee/Tahoe Unified School District and Placer and Nevada counties to plan and design enhanced access to integrated school-based health services for the 12-18 year old population.
- Memorandum of Understanding executed with TTUSD & Nv/Placer Counties to formalize partnership;
- Collaboration with Nevada-based Access to Healthcare Network (AHN) to improve access to the delivery of primary care services to patients not otherwise eligible for health insurance coverage in Nevada, and to examine financing options and AHN medical-discount services in California; Fortyseven (47) current primary care patients, eighteen (18) specialty care patients;
- All four (4) TFHS Pediatricians and one (1) Pediatric Nurse Practitioner were trained in Fluoride Applications; MediCal children, 5 and under, are being targeted for treatment;
- Facilitated Incline Village access to pediatric dental screening and dental varnish event-processed **27** children. The impact resulted in **48**% additional referrals for dental caries and braces as a result of this intervention; importantly, helped save the life of a 4-year-old child suffering from advanced dental infection in the mouth.



"Professionally, I am amazed that the little guy did not have an emergency episode much sooner. Several of his teeth were "time bombs" just on the verge of explosion! Spiritually, perhaps the "Universe/God/Angel of Mercy" brought him to the screening just for the desperately needed lifeline that was available there. I want to emphasize, scientifically and factually that his was/is truly a life-threatening condition. I want to stress emotionally as tears fill my eyes how very thankful I am for all of your concern, efforts, supplies, time and love!"

Syd McKenzie, RDH Co-Founder Oral Health Nevada Inc.

#### **Immunization**

We will improve immunizations among those receptive to them and aim to reduce vaccine preventable diseases.

Tahoe Forest Health system coordination of immunization efforts within Nevada and Placer counties bridged multiple organizations addressing immunization efforts. Nevada County immunization levels were specifically targeted for schoolage children deemed up-to-date and admitted to school with conditional acceptance and registered with personal belief exemptions.

Nevada County led the state in the number of Personal Belief Exemptions (PBE), with 21% of students unvaccinated compared to about 3% for the state average. As a result, Nevada County had a Pertussis outbreak in 2013 and the highest year-over-year increase in the incidence of this disease per 100,000 for any Californian county (with 70 cases in 2013 compared to 5 in 2012). Additionally, there was one infant Pertussis death in Placer County in 2014 magnifying the issue within the region.

#### Intervention, Methods, Results

In response to this resurgence the Tahoe Truckee Unified School District (TTUSD), the Nevada County Health Department, TFHS Wellness Neighborhood staff and clinical staff, and primary care providers collaborated to target parent and childcare providers with education, and implement a strict school immunization adherence policy (including denying admission to students whose immunizations were not up to date). As a result of these interventions, TTUSD achieved a **strong improvement** in the up-to-date immunization status at kindergarten entry over a two-year period.

TTUSD & California Immunization Status 2011 - 2014

|                           | 2011-2012  |                 |     | 2013-2014  | -           |     |
|---------------------------|------------|-----------------|-----|------------|-------------|-----|
|                           | Up to Date | Conditiona<br>1 | PBE | Up to Date | Conditional | PBE |
| Kings Beach<br>Elementary | 62%        | 34%             | 4%  | 90%        | 1%          | 9%  |
| Tahoe Lake<br>Elementary  | 61%        | 39%             | 0%  | 82%        | 2%          | 14% |
| Glenshire<br>Elementary   | 54%        | 34%             | 9%  | 72%        | 21%         | 7%  |
| Truckee<br>Elementary     | 82%        | 18%             | 0%  | 97%        | 1%          | 2%  |
| Nevada<br>County          |            |                 |     | 72%        |             |     |
| Placer County             |            |                 |     | 87%        |             |     |
| California                | 91%        | 7%              | 2%  | 90%        | 7%          | 3%  |

Data prepared by the WN, June 2014

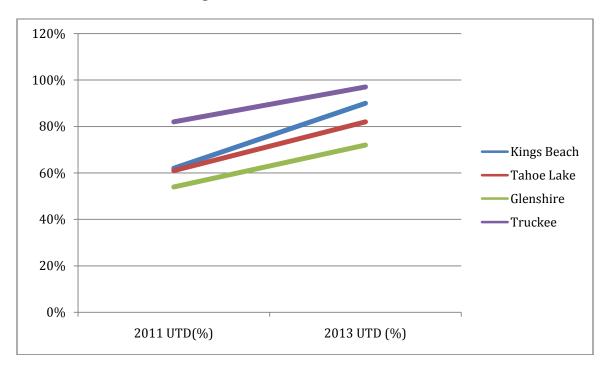
The decrease in conditional entrants (students who had some immunizations, but not current with all of their immunizations) reflects an **improvement** in education, access to immunizations, recordkeeping, immunization policy adherence and follow up.

Immunization awareness interventions continued throughout 2013/2014 and included:

- Development of an Immunization Toolkit by two University of California Davis Masters level Nursing students under WN supervision, for distribution at the Placer County School Nurse Meeting and for regional practitioners at community education events-information to (4,000);
- Creation and distribution of an Immunization Resource Flyer to all TTUSD targeted students deficient or scheduled for boosters;
- Thirty-four (34) parents educated by Tahoe Forest Health System Pediatricians, the Pediatric Nurse Practitioner, the School Nurse or Wellness Neighborhood Staff at Kindergarten Round-ups held at five (5) locations throughout the school district;
- Fifteen (15) attendees of immunization education and Tdap vaccine/clinical services available for adults at the Healthy Living Forum on two (2) days for four (4) hours/day;
- One hundred and ten (110) expectant parents educated regarding immunizations during prenatal classes by TFHS Pediatricians.
- Immunization outreach to all parents (twice) within the TTUSD (**8,000**);
- Adult Immunization outreach to all TTUSD employees;

 September 2014 TTUSD student entrance compliance will provide the most significant revelation of all immunization outreach activities coupled with strong school administration compliance to CDC Recommendations & AB 2109.

Graph 1
Percentage of TTUSD Students Up To Date (UTD) with Immunizations at Kindergarten Entrance 2011 & 2013



#### **Ethnic Disparities**

In our community, there should be no inequities in health with regard to ethnicity.

The WN strongest efforts addressing ethnic disparities focuses upon the outreach and contact with populations served through the Family Resource Centers in Truckee and North Tahoe. The WN contract with both FRCs guides a focused scope of work that expands, supports and co-joins para-professional outreach through the Promotora workforce. The work includes behavioral health outreach, services and support for the expansion efforts of Covered California enrollment to address Access to Care.

#### **Intervention, Methods, Results**

Promotoras are community educators employed with the North Tahoe Family Resource Center and the Family Resource Center of Truckee. Promotoras cover a vast array of community health education themes throughout the Truckee North Tahoe region including prevention, nutrition, school readiness, breast health education, parenting classes, strengthening and building relationships in families and reducing stigma around mental health. Promotoras serve as a bridge to connect Latino community members with information and resources.

- The WN completed an asset inventory in the spring of 2014 of all Promotoras employed by the FRCs to gauge their training, pay scale, outreach services and content focus.
- Resource Centers to review and evaluate new promotora training curriculums to develop an expanded foundation of program education and specific health and teaching skills. The new curriculums, under subcontract with two separate organizations (Vision y Compromiso and MHP-Migrant Health Promotion), will provide re-training to all existing Promotoras, newly recruited FRC Promotoras, and new to-be-recruited TFHS Promotoras. All will train in unison and form a close network of client services that will extend the reach and support of those in need of health care services, and care coordination of those utilizing services within TFHS.
- Mental/Behavioral Health support to the FRCs is separately described in the next section. The following services reflect multiple FRC funding sources, primarily County Mental Health Service funds in Prevention and Early Intervention:

NTFRC Latino Community Liaison and Promotora encounters: **89** events with **137** individuals;

FRCoT Promotora encounters: **41** events with **93** individuals.

Specific WN education/training outreach to Latino population: Suicide prevention (57), Heart Health (16), Colon Health (8), various fitness (45), and nutrition (73).

# Mental/Behavioral Health

Our residents will enjoy good mental health and those in need will have access to prevention and treatment.

The WN engaged in multiple approaches to address various aspects of Mental/Behavioral Health prevention, outreach, education, services delivery and strategic planning. The community partnerships are critical to a comprehensive, regional approach that not only addresses the current issues, but also provides important collaborative planning for future services.

#### **Intervention, Methods, Results**

• Production of a current and regional, Mental/Behavioral Health Resource Directory of services and practitioners inclusive of: translation services, bi-lingual capacity, financing options, services by age (adolescent & adult), gender of the practitioner, license and description of service

- location/hours. The Directory was published and distributed to **300**+ locations, was hyper-linked on the TFHD website and is currently under revision for an updated publication slated for September 2014;
- Steering Committee representation on the Truckee/Tahoe Youth Suicide Prevention Task Force that executed the following results: Community Members engaged: 442 Community Task Force Members

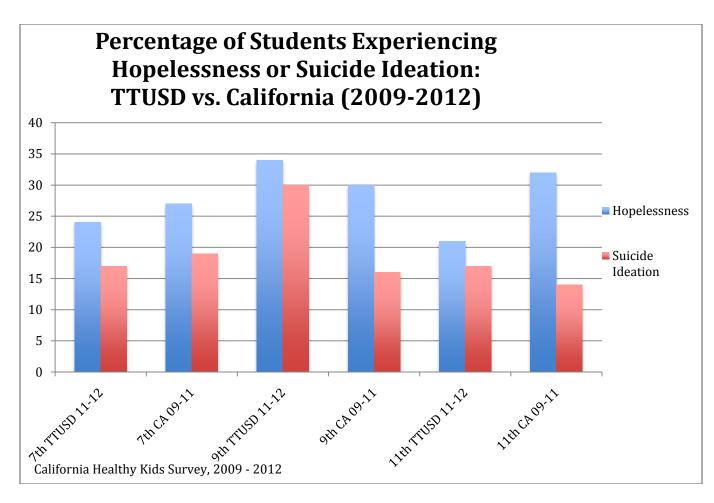
**395** direct trainings in Know the Signs (KTS) campaign that included **40** persons from TFHS Partners in Patient Services in-service training, and placement of materials in the Community Collaborative and Clever Minds Newsletters reaching over **1100** community members;

**60** direct trainings in Question, Persuade, Refer (QPR);

We know from these trainings that there already has been at least one teen suicide averted due to a community person's training in QPR. The goal of the WN within TFHS is to execute the KTS training within every department of the system by the end of 2014.

- TFHS will be the principle supporter of the Youth Suicide Prevention Task Force activities in partnership with the TTUSD in Fy 15;
- Alignment of the crisis intervention data collection of adolescent behavioral health Emergency Department visits with Nevada and Placer county statistics and shape community intervention efforts. According to Fy 14 data, TFHS had 56 patient encounters, 9-18 yrs. of age, in the Emergency Department. Of the 56, twenty (20) were admitted to psychiatric facilities. This data represent a 25% increase over Fy 13 with a comparable rate of psychiatric facility admission. One interpretation of the data is the significantly increased education and awareness outreach to students, parents and the community to recognize a child in distress and to seek help, which might account for increasing numbers.

Continued surveillance within the TTUSD through the California Healthy Kids Survey shows an increase in prevalence of feelings of hopelessness as well as contemplation of suicide compared to statewide results. To emphasize the significance of this issue, Healthy People 2020 has established the proportion of adolescents who experience a major depressive episode as a leading health indicator thereby identifying this as a high-priority health issue. The target level for adolescents experiencing intense hopelessness is 7.4%.



As the data becomes available from the CA Survey of 2012-13 & 2013-14, it will allow us to compare the trends across three years of data. We anticipate that the last two years of data would provide a positive indication of the impact of outreach and education to students on behavioral health topics and would also reflect the establishment of the two TTUSD Wellness Centers in each high school.

The WN is a partner organization to the TTUSD Wellness Centers. The Centers are designed to support high school student access to services that address physical, mental, emotional, and social concerns while offering activities to increase their resiliency and over all well-being. It is a collaborative effort by the school district, community partners and youth to improve the health of TTUSD high school students. Examples of programming include: Bully and Cyberbullying education, Freshman Challenge Days, Parent support, drop in space and refreshments for teens, counseling support, and referrals.

# Targeted WN work includes:

- Site visit and co-location review of Nevada County Behavioral Health services with county administrative staff;
- Lead agency school-health planning with behavioral health focus as part
  of the HRSA Network initiated June 1st (described in the Access to Care

- section) with emphasis on collaboration between county behavioral services and others to be offered;
- Participation in a new community-based Mental Health Task Force assessing gaps and service delivery roles that might be provided through TFHS;
- Examination and selection of Tele-Psychiatry services to be initiated in the Emergency Department to address the current 5150 holds and appropriate referrals and expedited care;
- Participation in a community network of mental health professionals workgroup to exchange information and improve patient referrals;
- Development of para-professional workforce to work in conjunction with other TFHD departments to address outreach, patient care and care management in behavioral health through Peer Counseling, Community Health Workers and Promotoras;
- Planning in conjunction with Nevada County Behavioral Health staff of a Peer Counseling training program for the FRCs and TFHD (planning for ED replacement of sitters by trained Peer Counselors to assist patient care):
- Targeted and accelerated Mental Health needs assessment for addressing TFHS integration of Behavioral Health services delivery through colocation with Primary Care practitioners or through other co-location options with Nevada County (this addresses the expansion of Access to Care for Behavioral Health and also freeing more Primary Care patient scheduling time due to 20-30% lost appointments to Behavioral Health diagnoses);
- Expansion of contract scope of work with the FRCs to provide direct patient access to behavioral health services;
- Collaboration with other rural California counties regarding access to Mental/Behavioral Health dollars and resources to improve regional network of care:
- Meetings with Nevada County Behavioral Health Advisory Council to improve representation of community issues, TFHS behavioral health activities and future development, and improve resource acquisition by TFHS:
- Ongoing meetings with Nevada and Placer County Behavioral Health officials to improve patient services. Offer from Nevada County to TFHS to utilize Mental Health patient observation beds (4 beds to open in early 2015 at Sierra Nevada Memorial) is forthcoming;
- Execution of community outreach/education events on Mental Health topics (discussed in the Substance Abuse section).

#### **Substance Abuse**

We will reduce substance abuse in the community.

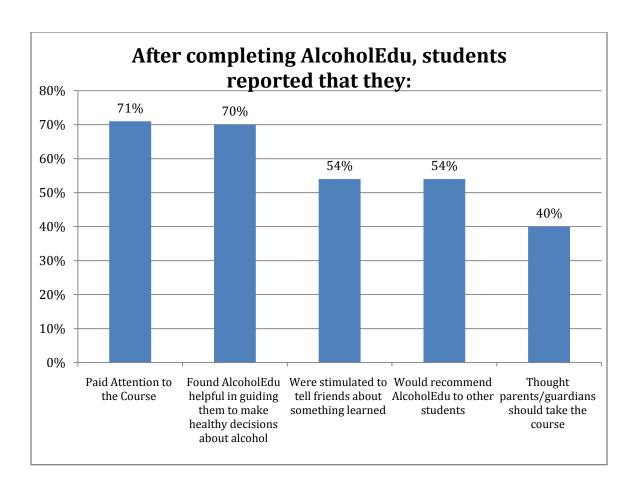
The array of activities completed by the WN reflects our significant community partnerships to focus on issues of substance abuse and intervention. Ongoing assessment of behaviors associated with substance abuse is monitored through the California Healthy Kids survey tool and our own current Community Health Needs Assessment (discussed later in this report).

#### **Intervention, Methods, Results**

According to the most recent data available from the California Healthy Kids Survey (CHKS), the percentage of students in the Tahoe Truckee Unified School District (TTUSD) who have used any alcohol or other drugs (AODs) surpasses state percentages for both 9th and 11th graders. Data show that in 2012, 57% of TTUSD 9th graders and 72% of 11th graders had used AODs compared to 49% of statewide 9th graders and 64% of statewide 11th graders.

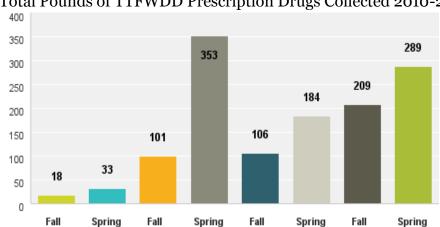
The WN addressed these significant issues with the TTUSD through the following program:

• AlcoholEdu: a program supported by the Wellness Neighborhood. AlcoholEdu is a highly scalable online program that allows high schools to reach all students with a consistent message and empower them with the necessary skill set to make safer and healthier decisions about alcohol. In the two school years since its inception with funding from the Wellness Neighborhood, 576 TTUSD students have participated in the program and survey results demonstrate they are able to identify when someone has consumed too much alcohol and to stop a friend from driving drunk. Students found the program helpful in guiding them to make healthy decisions about alcohol. \*The 2013-14 AlcoholEdu full report is due to the WN in August with current year results and the previous year's comparisons.



• Partnership with the Truckee/Tahoe Future Without Drug Dependence (TTFWDD) named TFHS Partner of the Year in 2013. Other partnership activities included:

The Prescription Medication Take-back Day orchestrated by TTFWDD to protect teens from an epidemic of Rx abuse, prevent accidental poisoning of young children, safeguard seniors from misuse and mistakes, and keep medications out of our water supplies and environment. In FY 2013/2014, **152** participants dropped off a total of **498 lbs.** of prescription drugs. This includes medications that were dropped off in permanent bins located in Tahoe City at the Placer County Sheriff's Office and in Truckee at the Police Department.



2012

2013

Total Pounds of TTFWDD Prescription Drugs Collected 2010-2014

WN, in conjunction with TTFWDD, sponsored a TFHD ED Nurse's attendance to the 2014 Prescription Drug Abuse Conference. The primary theme of the conference was the necessity to implement a Prescription Drug Monitoring Program (PDMP) to ensure physicians and pharmacists are aware of a patient's drug history prior to initiating opioid therapies. The use of a PDMP is considered best practice. Building upon this best practices approach, TFHS WN will work to bring this monitoring system to our facilities and practitioners;

2011

- Ongoing discussions with TFHD Emergency Department staff to integrate SBIRT (Screening, Brief Intervention, Referral & Treatment) into ongoing work;
- Developing a unified pain contract with TFHD health providers including Home Health, Ambulatory Surgery, MSC, TTMG and Dental clinics;
- Community education and outreach regarding Substance Abuse and Behavioral Health topics (see sample community programming flyer).

2010



# Drinking and Drug Abuse as a Community Issue

The greatest influence on a young person's decision to drink alcohol is the world they live in.

Join local professionals for a panel discussion on the impact of alcohol and drugs on the youth in our community. Learn how can we establish and support healthy community behaviors.

#### Moderator

Andrew Whyman M.D. - Dr. Whyman specializes in clinical and forensic psychiatry. He is a published author, and former Vice-Chair, Department of Psychiatry, Pacific Medical Center. San Francisco.

#### Community Panel:

Adam McGill – Truckee Chief of police. The police department's philosophy is rooted in the concept of PIE – Prevention, Intervention, and Enforcement. They maintain a supportive school presence, provide education, and partner with community stakeholders to reduce youth access to alcohol and drugs.

**River Coyote, MPH** –Placer County Health Educator and Director of the Tahoe Truckee Future Without Drug Dependence (IT-FWDD) Coalition which works to reduce local conditions that enable or encourage youth to use alcohol and drugs.

Corine Harvey, Executive Director of Student Services, Tahoe Truckee Unified School District. The school district partners in the fight against underage drinking through education, counseling, and promotion of activities that encourage positive choices and a healthy lifestyle.

Christi Goates – Counselor and Program Coordinator at Community Recovery Resources (CORR) in Truckee and Kings Beach. CORR provides education and treatment for substance abuse issues.

**Heather Redlich** – Director of Public Affairs for Narcanon of Northern California which provides long-term residential rehabilitation and free education and outreach services in our community.

For more information, please contact: Maria Martin Community Health, TFHS mmartin@tfhd.com / 530.587.3769, ext 7126 WHEN: Thurs., April 10<sup>th</sup>
 4:30-6:00pm

WHERE: Sierra College, Truckee
 Main Lobby

FREE and Open to The Public

Light refreshments served!



ffhd.com

# **Other Activities of Significance**

I. 2014 Community Health Needs Assessment

The WN leads TFHS' regional effort to:

- Update and compare results from the 2011 Community Assessment;
- Meet hospital regulatory criteria to engage with the community regarding health needs;
- Validate the health improvement priorities and Wellness Neighborhood goals established between 2011-2012;
- Provide a collaborative process to use these results on behalf of Nevada & Placer County Public Health and Washoe County Health District, to move towards Public Health Department Accreditation;
- Provide these results to community partner organizations for their use in benchmarks and understanding of health.

#### The logistics include:

- Established steering group and two regional community advisory committees guiding the development;
- Secondary data collection on special population groups and needs;
- Key informant interviews and focus groups on health needs, barriers and intervention strategies;
- Health status data collection establishing community benchmarks and determinants of health compared to national targets.
- II. Review and assess the selection of WN website criteria:
  - Health and quality of life indicators;
  - Comparisons of data measures and tracking;
  - Disparities tracking;
  - Promising practices;
  - GIS mapping;
  - Topical content;
  - Language translation;
  - Hospitalization data:
  - Local content;
  - Personalized chronic disease tracking;
  - Health education;
  - Reports.

# III. Para-Professional Workforce Development

- Link efforts to expansion of FRC Promotoras;
- Sync TFHS workforce with the FRC Promotoras;
- Integrate WN effort within TFHD departments addressing patient centered care and medical home, care coordination and management;
- Link para-professionals with Community Health team to expand community based training, interventions, tracking and outcomes.

# IV. Health Careers Development

- Guided health careers development opportunities within the WN Division;
- Graduate Intern meets MPH standards, graduates, successfully employed in North Lake Tahoe;
- Two Nursing graduates complete Masters program, graduate;
- Current graduate intern addressing competency standards for MPH degree;
- Interviewing Doctoral student for 12 month placement in 2015.

#### V. Behavioral Health Workforce Development

- Development of Mental/Behavioral Health clinical and outreach services;
- Development of a para-professional workforce to assist with behavioral health outreach and care coordination;
- Implementation in the fall of 2014, of Tele-Psychiatry to assist with 5150 holds in the ED to facilitate patient care and referral;
- Investigation of co-location sites for behavioral health personnel with either primary care or with county behavioral health services;
- Coordination with the FRCs of Promotora outreach in behavioral health topics and patient care coordination.

# VI. B-Fit Program

B-Fit provides activity bursts of multiple 5 minutes in the classroom and monthly wellness challenges for 8 months. The program, which piloted in Kings Beach Elementary in 2011/2012, has expanded to include all elementary schools within TTUSD. Students are tested for BMI, a 1-mile run for aerobic capacity and flexed arm hang in the fall and again the spring. This year 22% of students fell into the "needs improvement" category specifically for BMI. Seventy-five percent of those who need improvement are Hispanic, and 65% are male.

• The B-Fit program for the 2012-2013 school years reported a 43.6% teacher participation rate which **increased** to **54.5**% in 2013-2014.

The 2013-2014 Student Survey Pre and Post Results

The most exciting support came from student testimonials as a result of the B-Fit program. The following data collected from Kings Beach Elementary only.

- <u>Dental Hygiene</u>: Most children report brushing their teeth in the morning and at night. A **3% increase** was reported at the end of the year.
- <u>Sleep Hygiene</u>: **11% increase** in 10+ hours of sleeping was reported. A noted **27.9% decrease** in food consumed prior to bedtime was reported.
- <u>Breakfast:</u> **13% increase** in consuming 3 or more breakfast items was reported.
- <u>Screen Time</u>: **Fewer** children reported watching TV for more than 2+ shows. Forty-four (44%) of children still reported watching 1 TV show after school, which in the fall, only 22% watched 1 TV show. Children continue getting screen time, but stated they are now aware of the amount of time. A **3.2% reduction** in the amount of time spent on video games or computers in the evening was also reported.
- <u>Fruits and Vegetables</u>: **43.5**% of children are reporting getting **2 or more** fruits and vegetables at lunch. This may be due to the new salad bar implementation, advocated by WN, at KBE that was put into place in the spring. A **7% increase** in fruits or vegetables occurred at snack.

In summary, the range of activities, progress and results reflected in this report provide an understanding of the depth of work that is being accomplished with the Truckee and North Tahoe region. The current Community Health Needs Assessment will allow the Wellness Neighborhood and our partners to bring better understanding of our current community health issues and challenges. The development work that is mentioned in this report is staged to reach deeply into all age ranges and ethnicities to improve our emotional and physical well being. Our mission is to "develop a collaborative community-based system of care that transforms health in the high sierra region". Our vision is to "achieve equitable, sustainable programs and partnerships that respond to local health priorities".

The Wellness Neighborhood Executive Director extends her deep appreciation to the all of the staff and medical directors within TFHS, who have worked tirelessly to execute programs, guide their patients and set a standard for quality health in the community. To each and all of the partner organizations, individuals and practitioners, the WN gratefully thanks them for their participation, expertise and leadership in addressing community health improvements and health services development in the Truckee/North Tahoe area.