

C 2 C

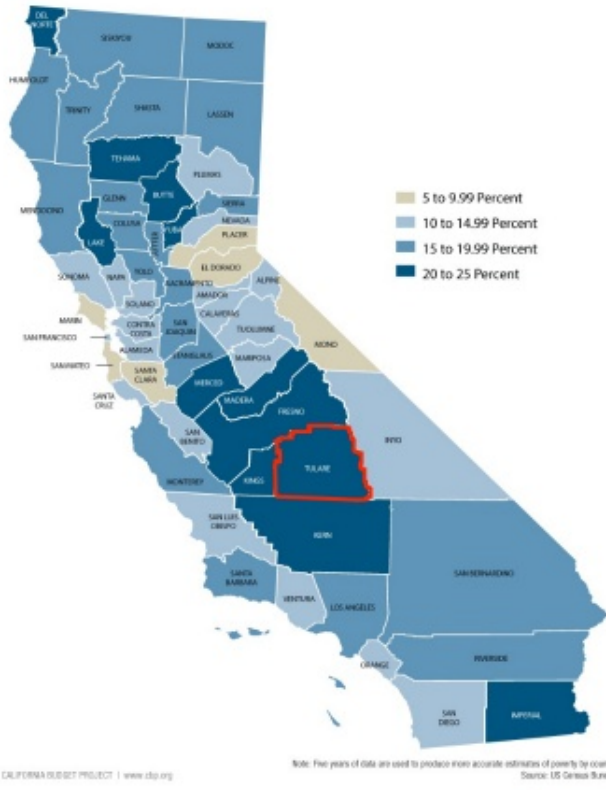
Connectedness 2 Community



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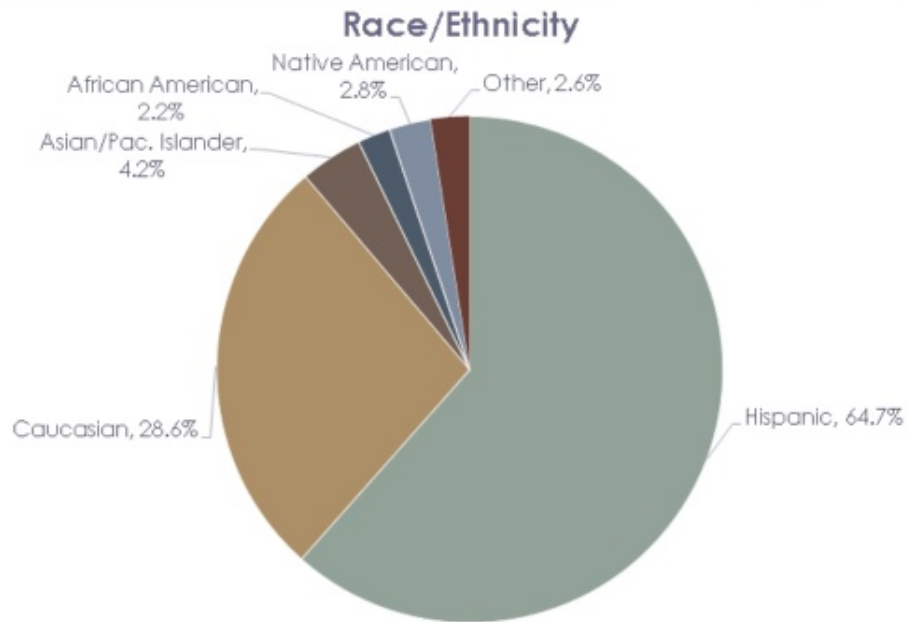


Poverty Varies Significantly Across California Counties
 Percentage of People With Incomes Below the Federal Poverty Line, 2008-2012



Tulare County Overview

- 2nd highest **poverty** rate in California
- Approximately **55%** of residents are on **public assistance**.



Three-Year Plan 2017-2020

28 Focus Groups - 198 participants

884 Survey responses

- Access
- Cultural Awareness

Top 3 Barrier

4th Community Need

Focus Group
Main Theme

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Cultural awareness defined

Of those served

FY 2015-16, 2016-17, 2017-18

Population groups

- African-American
- Hispanic
- Native American

10 - 13.5%

do not return after 1 service

Where is LGBT+?

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Strategy

- Engage community leaders and cultural brokers
- Coach mental health professionals
- Develop “Champions”
- Develop curriculum based on discovered “best practices”
- Host trainings in natural community settings with external providers
- Build Pathway to access services

**Learning
Objectives**

Innovation



**To introduce a new
mental health practice
or approach**

**To increase access to
mental health services**

- To coach and consult with mental health professionals
- To lead to a wider variety of treatment modalities
- To create an established protocol for new therapeutic strategies

Resulting in



- Reduction of stigma
- Greater awareness of consumer needs
- Increase in new consumers served
- Increased community activities

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- Cultural Brokers and Community Leaders
- Clinical providers
- Consumers



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MHCCC

Number of clinicians attending cultural sessions
Increase in numbers served
Number of consumers remaining engaged,
Discharge disposition


Quantitative

Narratives
Pre/Post Surveys

Qualitative

Budget

Sustainability



Total 5-year Program Budget = \$1,320,684

AB 114 funds = \$494,322

Bulk of cost is for Subject Matter Experts
contracts = \$727,881



Peer Champions potential for Certification

- Billable services moved under CSS

Creation of sustainable grass roots organizations

- Build alongside and support Mental Health and wellness for their constituencies

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Proposed Motions

The Commission approves Tulare County's Innovation plans as follows:

Name: Addressing Metabolic Syndrome and its Components in Consumers Taking Antipsychotic Medication

Amount: \$1,610,734

Project Length: Five (5) Years

Name: Connectedness 2 Community

Amount: \$1,320,684

Project Length: Five (5) Years

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Addressing Metabolic Syndrome and Its Components in Consumers Taking Antipsychotic Medication

March 28, 2019

Background

Need

Addressing the Need

Innovation

Learning Objectives & Outcomes

Budget & Sustainability

Team & Oversight



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Background



County
Overview

CPP

Integration

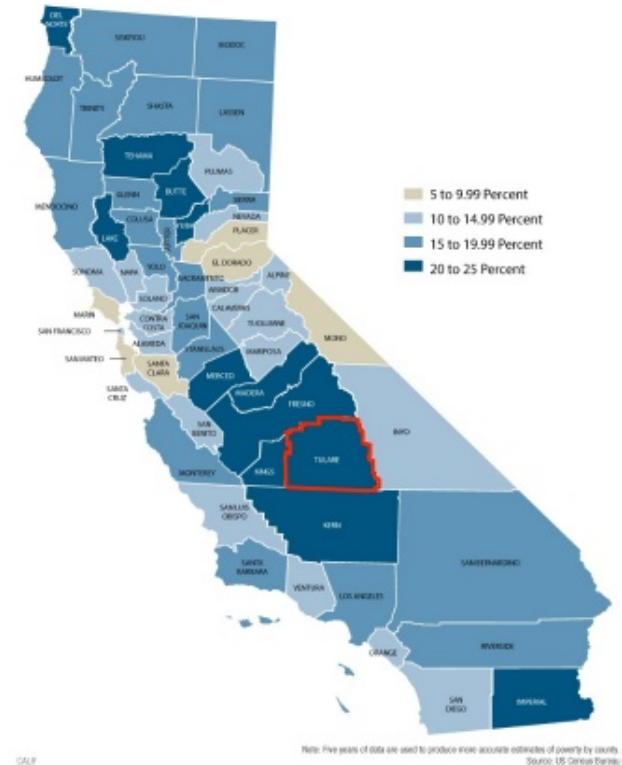
Metabolic
Syndrome
Project

Tulare County Overview

- **Large** with many **rural** communities spread throughout
- 2nd highest **poverty** rate in California
- Approximately **55%** of residents are on **public assistance**.



Poverty Varies Significantly Across California Counties
Percentage of People With Incomes Below the Federal Poverty Line, 2008-2012



Community Planning Process 2017

- 884 completed surveys
- Ranking of "**untreated medical conditions**" issue:
 - Spanish-language surveys: 4th
 - English-language surveys: 6th
- 28 focus groups, 198 participants
- Viewed **health as holistic**, including both mental health and physical health.



History of Mental & Physical Health Integration

- Older Adult Hopelessness Screening Program
- Physical Health and Mental Health Integration Program



Metabolic Syndrome Pilot Project Implementation

- Implementation of original version began in April 2018 with CSS funds:
 - Intention was always to support with Innovation funds as soon as possible.
 - Need to address overall consumer health without delay: continuity of care & whole-person care take precedence.
 - Mental Health Branch developed a strong working relationship with the Public Health Branch. Both were ready to begin.
 - For the start of Innovation funding we will add 3 interventions & measure effects on outcomes.





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The Need

Metabolic syndrome



What
is it?

Connection
to MH

Local
Study

What Is Metabolic Syndrome?

- A **cluster of risk factors**:
 - Obesity
 - High blood pressure
 - Elevated blood glucose
 - Elevated triglycerides
 - Low HDL cholesterol
- Can lead to **cardiovascular disease, stroke, and type-2 diabetes.**



Connection to Mental Health

- Individuals with serious and persistent mental illness and those who take **antipsychotics** (especially second-generation) are **more likely** to develop symptoms of **metabolic syndrome**.
- U.S. adults living with serious mental illness **die 25 years earlier** than others, on average, largely due to **treatable medical conditions**.



Local Psychiatric Hospital Study, 2013-2014

- Only **2.4%** of patients had ever been **evaluated** for metabolic syndrome.
- Just **0.16%** had ever been **treated** for it.
- However, **34.5% met the criteria.**





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Treatment Protocol



Steps
1-3

Steps
4-7

Added
Interventions

Warm
Referrals

Steps 1-3

Anticipate serving 150 individuals

1. Screening every 3 months by an MD in the mental health clinic.

Blood testing on site, quick results

2. Medical treatment provided by participants' PCPs.

3. Participants fill out the *Staying Healthy Assessment* at each clinic visit.



Steps 4-7

4. Participants and Certified Nurse Educator (CNE) develop health behavior improvement plans.

5. CNE provides information & warm referrals.

6. Participants review progress with CNE at each clinic visit and modify plans, as needed.

7. Mental health clinic staff provide additional support.



Added Interventions

- Voluntary weekly group visits to a **gym** with a **healthy meal** afterward
- Voluntary weekly **hands-on cooking classes** and **health and wellness support group** meetings
- **Healthy snacks** available to participants on clinic appointment days



Examples of Certified Nurse Educator Warm Referrals



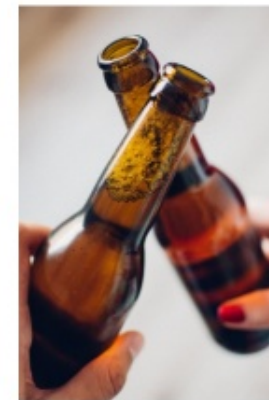
Gym visits & memberships



Tobacco use cessation support



Hands-on cooking classes



Alcohol use cessation support





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How This Project Is Innovative

- Addresses a **serious health condition**.
 - **More common** among people with serious & persistent **mental illness**
 - Causal factor: **antipsychotics**
- Provides help in a **mental health clinic**.
- Addresses need **more comprehensively** than other programs we found.
- **Collaboration between mental & physical health** organizations



Addressing Metabolic Syndrome and Its Components in Consumers Taking Antipsychotic Medication

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the Need

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Learning
Objectives
&
Outcomes

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Team &
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Learning Objectives & Outcomes



Learning
Objectives

Outcomes

Selected Learning Objectives

- Can this project increase the number of individuals who are taking antipsychotics who are **diagnosed and treated for metabolic syndrome**?
- Can this project **improve participants' health behaviors** related to metabolic syndrome?
- Can strong **interagency collaboration** take place over the course of this project?
- Will the two major **added interventions improve participant outcomes**?



Selected Outcomes

- Number of **participants receiving treatment** for metabolic syndrome or its components
- Participants' **quarterly measurements**:
 - Waist circumference
 - Body mass index
 - Blood pressure
 - Hemoglobin A1c
 - Total cholesterol
 - LDL cholesterol
 - HDL cholesterol
 - Triglycerides



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Budget & Sustainability

- Total 5-year budget: \$1,610,734
 - AB 114 funds: \$692,999
- Bulk of cost for personnel: \$904,785
- Sustainability, if outcomes are good enough, with CSS funds.



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Project Team & Oversight

- Project Team will include consumers and family members.
- Project Team will report to the Cultural Competency Committee & Tulare County Mental Health Board, which include consumers & family members.



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