



CHIP Annual Progress Report
Lewis and Clark City-County Health Department
May 28, 2014

Purpose

At the request of the Lewis and Clark City-County Health Department, the Community Health Improvement Planning (CHIP) Task Force met May 28 to assess progress toward the goals established in the Community Health Improvement Plan developed by the task force and adopted in May 2013 by the City-County Board of Health.

Participants

Verner Bertelsen, President, Golden Nuggets senior organization
Dr. Maria Braman, Vice President of Medical Affairs, St. Peter's Hospital
Marsha Davis, County School Superintendent
Erin Drynan, WoRC Program Manager, Career Training Institute
Alexis Gibbons, Community Resource & Referral Coordinator, Helena School District 1
Mike Henderson, Disease Control and Prevention Administrator, Health Department
Kim Kurokawa, Project Manager, St. Peter's Hospital
Karen Lane, Prevention Programs Manager, Health Department
Gary Mihelish, NAMI Advocate
Billie Miller, citizen
Drenda Niemann, Community Health Promotion Administrator, Health Department
Brie Oliver, Home Visiting, Health Department
Katy Peterson, Director of Public Relations, St. Peter's Hospital
Melanie Reynolds, Health Officer, Health Department
Frank Rives, County Planner
Gayle Shirley, Accreditation Coordinator, Health Department
Paul Spengler, County Disaster and Emergency Coordinator
Eric Strauss, Director of Quality, St. Peter's Hospital
Kathleen Trudnowski, Health Services Director, Carroll College

Presentations

Priority 1: Mental Illness

Presenter: Melanie Reynolds

CHIP Goals

1. Reduce stigma associated with mental health disorders.
2. Improve screening and early intervention efforts.

3. Ensure access to quality mental-health services.

Progress

On Dec. 3, 2013, Health Officer Melanie Reynolds gave a presentation to the Lewis and Clark County [Mental Health Local Advisory Council](#) (LAC) on the mental health goals, objectives and strategies in the CHIP. The council includes representatives of NAMI, the County Commission, St. Peter's Hospital Behavioral Health Unit, the Health Department, the Cooperative Health Center, and the Center for Mental Health.

Issues discussed at the meeting included:

- Baseline data and statistics on referral rates, gaps, and patient treatment statistics
- Use of mental health screening by health providers
- Suggestion to use public service announcements to spread the word about mental health services in the area
- Need for screening in elementary schools

On Feb. 20, 2014, a subcommittee of the LAC met to discuss next steps related to the CHIP goals, objectives, and strategies. Issues discussed included:

- Need to inventory community's mental health services
- Review mental health programs in other counties
- Help individuals connect to resources
- Reduce stigma

The subcommittee decided to focus first on reducing the stigma associated with mental health disorders.

Melanie noted that the [Our Place](#) Drop-in Center has received funding to continue operation for the next 3 years.

Gary Mihelish reported that:

- [Journey Home](#), a new crisis care facility, is set to open Oct. 15, 2014. The home is a collaboration of the Center for Mental Health, Western Montana Mental Health, and the County Commission.
- The [Center for Mental Health](#) is now offering free evaluations, open access, on Thursday mornings.
- St. Peter's Hospital has hired a full-time psychiatrist and is integrating psychiatric and physical health care.
- The [Behavioral Health Unit](#) (BHU) at St. Peter's Hospital is remodeling to better serve adult and geriatric patients.
- The Center for Mental Health and St. Pete's BHU conduct conference calls several times a week to coordinate care of patients who are served at both facilities.

Alexis Gibbons reported that:

- [Intermountain](#) plans to provide mental health screening for School District 1. Intermountain and AWARE will continue to provide treatment for children with diagnosable mental illnesses. These services are currently available in all high schools, middle schools, and elementary schools, with 125 children being served. Intermountain will also provide billable transitional school-based mental health services for students in need of short-term mental health care.
- [Teen Screen](#), a program formerly run by Youth Connection Coalition, provided mental health services for youth from 8th through 12th grades. Intermountain will continue to offer these services but plans to select a different program model.
- Helena Police Department is implementing a program that allows for texting 9-1-1. This may help reduce suicide attempts by allowing additional access to crisis services.

Barriers to Progress

The issues surrounding mental health are so big and complex that it's difficult to focus. The LAC subcommittee believes it's best to start small, and it believes reducing stigma is a good starting point. The LAC realizes much is happening in the community, but coordination could possibly be better.

Next Steps

- The LAC subcommittee needs to reconvene to monitor and document progress.
- Baseline data needs to be collected so we can document progress.
- Depression screening during clinical visits should be strongly promoted.

Priority 2: Substance Abuse

Presenter: Drenda Niemann

CHIP Goals

1. Reduce substance abuse to protect the health, safety, and quality of life in Lewis and Clark County.

Progress

Drenda Niemann said the community risks losing a great advocate for substance abuse prevention among youth. Funding for [Youth Connections](#), which has been administered by the Helena School District, will expire at the end of June. The organization is working to become a nonprofit and find other sources of funding. Members of the Youth Connections Coalition have met quarterly to identify gaps in services for youth, including mental health and substance abuse services.

Alexis reported that the Helena School District referred 25 students to community substance-abuse providers in 2013. Of these, 21 completed or partially completed treatment or were referred to a higher level of care.

Alexis said that [Project Success](#), a substance abuse prevention program in the Helena School District that placed counselors in the middle and high schools, will no longer be funded after June 30. From 2009 to

2014, Project Success served 370 middle and high school students with individual and group counseling and other prevention services. Intermountain plans to replace Project Success by providing billable substance abuse services, as well as some substance abuse prevention.

There are currently 35 providers and agencies using the Consented Referral System developed by Youth Connections. The Health Department has agreed to take over administration of the system July 1, when funding for Youth Connections ends.

Drenda noted that the [Montana 2-1-1](#) website lists chemical dependency services in the community. Intermountain is now a state-approved chemical dependency service provider for adolescents, in addition to [Boyd Andrew](#).

Regarding access to substance abuse services, Drenda said the [Helena Area Transit Service](#) (HATS) stops at 4 locations within walking distance of Boyd Andrew and Intermountain.

Barriers to Progress

The potential elimination of Youth Connections would be a significant barrier to progress.

Next Steps

- Transfer administration of the Consented Referral System from the Helena School District to the Health Department.
- Update the 2-1-1 website list of providers.
- Sustain Youth Connections.

Priority 3: Chronic Disease

Presenter: Karen Lane

CHIP Goals

1. Reduce incidence of chronic diseases (like cancer, strokes, heart disease, diabetes, asthma) among residents of Lewis and Clark County.

Progress

Karen Lane reported that the Healthy Communities Coalition, convened by the Health Department, has agreed to track and encourage progress toward the chronic disease prevention goal. The coalition will meet periodically to assess and support progress. The coalition intends to look at the overall picture, policy and environment, not create new programs. A youth advisory council of the coalition has identified suicide as a primary problem among youth.

Progress in the community has included:

- Initiation of “bike rodeos” at bookmobile stops to promote activity and educate youth regarding bicycling safety.
- Revision of city engineering standards and subdivision regulations to incorporate Complete Streets features, which encourage physical activity.
- Launch of a revision of the Greater Helena Area Transportation Plan to include nonmotorized transportation.
- Launch of a revision of the county growth policy to encourage bikeable and walkable neighborhoods.
- Work by the Health Department to include pedestrian and bike safety in the Helena-area transportation plan developed by the Montana Department of Transportation.
- [ExplorationWorks](#) classes in nutrition and cooking, community gardening, and other activities that promote good nutrition.
- Implementation by the Health Department of [PM Advance](#), an EPA program aimed at reducing exposure to particulate air pollution.
- Work by the Health Department to reduce exposure to second- and third-hand tobacco smoke in low-income and multi-unit housing. (Staff have encouraged the Board of Housing to make low-income housing tax credits contingent on tobacco-free policies.)

Barriers to Progress

- Funding
- Lack of coordination and communication among groups working in topic areas
- Lack of leadership in some areas

Next Steps

- Conduct a needs assessment of nutrition programs and services in the community and encourage better coordination among them.
- Incorporate skin cancer screening into wellness checks, and get a baseline of how many people have been screened for skin cancer.
- Identify system-level, environmental-level adjustments that could facilitate progress on a population level.

Priority 4: Maternal and Child Health

Presenter: Mike Henderson

CHIP Goals

1. Improve the health and well-being of women, infants, and children in Lewis and Clark County.
2. Prevent unintended pregnancies among youth.

Progress

- The Health Department has implemented First Breath, a smoking cessation counseling program for pregnant women through 4 months after birth.
- The Health Department has implemented Nurse Family Partnership, an evidence-based home-visiting program that will provide up to 25 families with support.
- The Health Department has expanded its Parents as Teachers Program to include new mothers at Florence Crittenton Home. The program offers support to parents in promoting school readiness and healthy development of children.
- In partnership with Family Concepts, AWARE, and Florence Crittenton, the Health Department has implemented Safe Care, an evidence-based program that offers intensive home visiting.
- 4 of 8 providers of prenatal, obstetrics, and gynecological care in the community say they provide smoking cessation counseling at every visit.
- The Health Department uses a reminder and recall notification system to encourage vaccination of children.

Barriers to Progress

- A high level of community engagement is needed to improve the health of a whole population.

Next Steps

- Encourage use of the vaccination reminder/recall system by the 2 pediatric clinics in the community.
- Encourage all providers of prenatal care to provide evidence-based smoking cessation counseling.
- Identify where in the community free condoms are available to young people.

Priority 5: Health Care Access

Presenter: Eric Strauss

CHIP Goals

1. Improve access to health-care services in Lewis and Clark County.

Progress

Eric Strauss reported that a shortage of primary-care providers in the community appears to have been resolved, in part due to recruitment of new physicians by St. Peter's Hospital and the addition of the state-employee health clinic ([Montana Health Center](#)) and a new family practice walk-in clinic ([Cost Care](#)).

[St. Peter's Hospital](#) and St. Peter's Medical Group are:

- Adopting a patient-centered medical home model that requires a certain number of medical appointments to be available within 24 hours.
- Working with providers not employed by the hospital on better continuity of care after hospitalization.

- Adding significant numbers of mid-level providers, including in the Behavioral Health Unit, to expand accessibility.
- Employing a pulmonologist and mid-level provider to focus on working with chronic COPD patients.

Melanie reported that the [Cooperative Health Center](#) got funding to hire 3 outreach and education coordinators to sign people up for health insurance under the Affordable Care Act. The team helped 468 local residents to apply by the March 31, 2014, deadline and 240 to actually enroll in an insurance plan.

Barriers to Progress

- Increase in providers refusing to accept Medicaid/Medicare patients.

Next Steps

- Recruit more internal medicine specialists to the community to deal with an aging population.
- Expand HATS routes.

Potential Partners

The CHIP Task Force may want to consider inviting representatives of the following organizations to participate in community health improvement planning:

- [Healthy Mothers Healthy Babies](#)
- Family Concepts
- [Florence Crittenton](#)
- [Intermountain](#)
- Law enforcement ([Missouri River Drug Task Force](#), for example)
- [Montana 2-1-1](#)
- [ExplorationWorks](#)
- [Stirring Up Wellness](#)
- [No Kid Hungry](#)
- [Helena Indian Alliance](#)
- [Susan G. Komen Montana](#)