



California Area Indian Health Service
**Director's Three Initiatives
Integration 2008 Update**

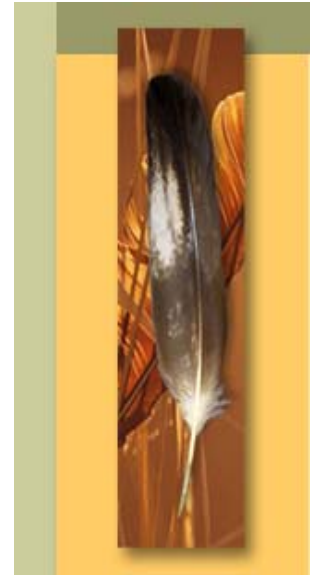


October 2008

Introduction

The California Area compliments all T/U programs efforts to address the health challenges and disparities facing Indian people today with a focus on the Director's 3 Initiatives, Health Promotion/Disease Prevention, Chronic Care, and Behavioral Health. These initiatives were launched with the belief they will have an impact on the health and wellness of Indian people.

These three initiatives are linked together and when integrated have the potential to achieve positive improvements in the health of Indian people. This update provides a summary of the California Area Office, FY 2008 integration efforts.



For more information on the Dir's 3 Initiatives visit:

IHS Director's Initiatives Home Page:

<http://www.ihs.gov/nonmedicalprograms/dirinitiatives/>

CAIHS webpage, under clinical management

<http://www.ihs.gov/FacilitiesServices/AreaOffices/California/Universal/PageMain.cfm?p=10>

REMINDER

Medical Providers Best Practices Conference

“Turning the Corner on Quality”

November 18-19, 2008

Double Tree Hotel Sacramento California

bestpracticesconference.eventbrite.com/

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CALIFORNIA AREA DIRECTOR'S INTEGRATION STRATEGIC PLAN
FY FISCAL YEAR 2008 UPDATES

INTRODUCTION

In 2006, the California Area Indian Health Service (CAIHS) initiated efforts to improve the integration of Indian Health Service Director's Three Initiatives; Behavioral Health, Health Promotion/Disease Prevention and Chronic Care.

An integration strategic plan was completed during the fourth quarter of 2007. The plan aims to counter health conditions and chronic diseases that are related to lifestyle challenges, and foster physical, spiritual and mental wellness through healthier lifestyles that lead to reduced health disparities in current and future generations of California Indian people. It strives to be community focused, patient centered, and multidisciplinary and includes defined objectives. The plan includes focus on four GPRA measures, which characterize the integration of behavioral health, chronic disease and health promotion/disease prevention and will provide a means of evaluating the progress of this integration. These measures demonstrate clinical services and community initiatives that support overall health and wellness.

PROGRESS UPDATE

Focus 1: Domestic Violence

2007-2008 baseline results:

| 2007 – 4th Quarter | 2008 – 2nd Quarter | 2008 – 3rd Quarter | 2008-4th Quarter | 2008 Target |
|--------------------------------------|--------------------------------------|--------------------------------------|------------------------------------|--------------------|
| 34% | 25% | 34% | 43% | 36% |

- In 2007, 34% of women were screened for domestic violence at Tribal healthcare facilities in California; the National rate was 36%
- In 2008, the rate improved to 43%, exceeding the National target of 36%.

During FY 2008, collaborations in support of this focus area included the Community Wellness Forum, with two presentations targeting this focus area. In FY 2009, improvement efforts will include continual methods of integration among disciplines that lead to increased screening rates in addition to assessing available services and increasing the ability to monitor and support prevention education and campaigns annually.

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Focus 2: Tobacco Cessation

2007-2008 baseline results:

| 2007 – 4 th Quarter | 2008 – 2 nd Quarter | 2008 – 3 rd Quarter | 2008 – 4 th Quarter | 2008 Target |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|-------------|
| 11% | 9% | 13% | 20% | 16% |

- In 2007, 11% of tobacco-using patients received tobacco cessation intervention; the National rate was 16%
- In 2008, the rate improved from 11% to 20% to exceed the National target of 16%.

During FY 2008, collaborations in support of this focus area include the Community Wellness Forum, with one presentation targeting this focus area. In FY 2009, improvements will include continual methods of integration among disciplines that lead to increased cessation intervention in addition to assessing available services and increasing the ability to monitor and support prevention education and campaigns annually.

Focus 3: Childhood Weight Control

2007-2008 baseline results:

| 2007 – 4 th Quarter | 2008 – 2 nd Quarter | 2008 – 3 rd Quarter | 2008 – 4 th Quarter | 2008 Target |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|-------------|
| 23% | 24% | 22% | 23% | 24% |

- In 2007, 23% of children ages 2-5 years had a BMI of 95% or higher; the National rate was 24%
- In 2008, the rate was maintained at 23%, exceeding the National target of 24%.

During FY 2008, collaborations in support of this focus area include the Footsteps to Health-Native Youth Wellness, a youth diabetes prevention conference; supported two tribal planning projects on community-directed collaborative obesity prevention, to identify social and environmental factors influencing obesity. In FY 2009, improvement efforts will include

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assessing services available that lead to the ability to monitor and support prevention education and campaigns annually.

Focus 4: Immunization

2007-2008 baseline results for Immunization measures:

| Measure | 2007 4 th Quarter | 2008 2 nd Quarter | 2008 3 rd Quarter | 2008 4 th Quarter | 2008 Target |
|-----------------------|------------------------------------|------------------------------------|------------------------------------|---------------------------------|----------------|
| Influenza (65+) | 57% | 53% | 58% | 59% | 59% |
| Pneumococcal (65+) | 75% | 77% | 78% | 79% | 79% |
| Childhood IZs | 64% | 48% | 59% | 66% | 78% |

- In 2007, 57% of patients 65 and older were immunized for influenza and 75% for Pneumococcal; the National rates were 59% and 76%, respectively.
- In 2007, 64% of patients 19 – 35 months were vaccinated with the childhood immunization series (4:3:1:3:3); the National rate was 78%.
- In 2008, the rates improved for influenza from 57% to 59% to meet the 2008 National target of 59%.
- In 2008, the rates improved for Pneumococcal from 75% to 79% to meet the 2008 National target of 79%.
- In 2008, the rates improved for Childhood immunizations from 64% to 66%; however they did not meet the 2008 National target of 78%.

During FY 2008, collaborations in support this focus area include the Community Wellness Forum with immunization update provided. Efforts will continue to improve integration. In FY 2009, assessing services available will be completed and will lead to the ability to monitor and support prevention education and campaigns annually.

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CAIHS DIRECTOR'S 3 AWARDS

The awards recognized initiatives and accomplishments T/U programs achieved that demonstrate integration and collaborations of behavioral health, chronic care and health promotion/disease prevention. The awards are presented annually at the Tribal Leaders Consultation Conference.

DIRECTOR'S 3 INITIATIVES FOCUS AREA INTEGRATION AWARDS

- **Domestic/Intimate Partner Violence Screening**
 - American Indian Health Project, of Bakersfield
- **Tobacco Cessation Counseling**
 - Pit River Health Service, Inc.
- **Childhood Weight Control**
 - K'ima:w Medical Center
 - Central Valley Indian Health, Inc.
- **Immunization Overall**
 - Central Valley Indian Health, Inc.

ANNUAL DIABETES AWARDS

- **Outstanding Performance in Diabetes Care and Case Management**
 - San Diego American Indian Health Center, Inc.
 - Greenville Rancheria Tribal Health Program
 - Northern Valley Indian Health, Inc.
 - K'ima:w Medical Center
 - Southern Indian Health Council, Inc.
 - Chapa-De Indian Health Program, Inc.
- **Significant Improvement in Diabetes Care and Case Management with Electronic Health Record**
 - Feather River Tribal Health, Inc.

ANNUAL GPRA AWARDS

- **Outstanding GPRA Performance, 2008 Integration Focus Areas**
 - Susanville Indian Rancheria
 - Central Valley Indian Health, Inc.
 - Shingle Springs Tribal Health
 - Indian Health Council, Inc.

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SUMMARY OF FY 2008 INTEGRATION ACTIVITIES

- November - **2nd Best Practices/GPRA conference**, education & networking for providers/ healthcare staff.
- February - **Integration poster** at National Combined Council
<http://www.ihs.gov/nonmedicalprograms/dirinitatives/Documents/Integration.pdf>
- February – June: **WebEx series on Cancer Prevention and Treatment**, provider education and training
- March - **3rd Just Move It – California Challenge**, supported T/U physical activity programs and Just Move It campaign.
- April - **Taking Care of Your Diabetes (TCOYD)**, a community focused diabetes education & motivation event.
- April - **Footsteps to Health – Native Youth Wellness**, a youth diabetes prevention conference in partnership with UC Davis.
- May – CAIHS **Annual Dental Conference**, presented oral health topics for clinical staff.
- June - **Community Wellness Forum**: a partnership with CRIHB
- and the state Indian Health Program providing community focused education & training.
- June – **Alcohol prevention curriculum training**, “Protecting You/Protecting Me”.
- September - **Community wellness planning**, pilot training using the Restoring Balance manual.
- September – **CAIHS Diabetes Panel at NIHB Conference**
- September – **CAIHS Public Health Nursing (PHN) Documentation and Coding Training**, included integration of GPRA measures with PHN practice and documentation.
- *On going* - **Telemedicine psychiatric pilot**, integrating Behavioral Health in primary care.
- *On going* - **Tele-Retinopathy**, expansion of camera use, networking with UC Davis, and on-site staff trainings.
- *On going* - **Diabetes case-management project**, provides technical support to all T/U diabetes grant programs.
- *On going* – **IPC pilot site (Indian Health Council) initiatives**, improving patient care and performance on GPRA measures through empanelling patients and setting improvement goals for them.