



Integrated Care Solutions

at Centerstone

Nashville, Tennessee Year 1

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1

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Populations of Focus:



- We plan to serve 600 individuals with Serious Mental Illness
- Sub-populations of this group include **Poverty, Females, Minorities, Veterans, Immigrant/Refugee, and LGBT communities**
- This population closely resembles the demographic make-up of the Davidson County population.
- The **poverty rate** for Serious Mental Illness is **4x** that of the general population. The lack of associated supports create barriers to access and use.
- Additionally, **10% more women** access services than the general population.

2

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Implementation Practices: Expected and Current Enrollment

- * We are currently gathering data to review the sub-populations that are engaging and those that require more outreach
- * Currently, the 78% of our clients are female and 36% are African-American

	Goal Total	Goal Percentage	Actual Total	Actual Percentage
Direct Services: Number to be served	600		36	
By Race/Ethnicity				
African American	192	32%	13	36%
Asian	24	4%	0	0%
White	348	58%	22	61%
Hispanic or Latino	18	3%	0	0%
Immigrant/Refugee	60	10%		0%
Other	58	10%	1	3%
By Gender				
Female	372	62%	28	78%
Male	228	38%	9	25%
Transgender	unknown		0	0%
By Military				
Active Duty		0%		0%
Veterans	30	5%	1	3%

3

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Implementation Practices: Strategies we will use to engage our sub-populations

- Services are delivered in a welcoming environment that is culturally respectful
- All staff will receive cultural competency training, initially and ongoing, to ensure they understand, appreciate, and are sensitive to ethnic, religious, and other cultural differences
- Our staff will continue to receive trainings on culturally sensitive topics, including a recent Seeking Safety training focusing on Trauma Informed Care
- Staff diversity is critical to ensuring a culturally competent project, and ICS will actively recruit staff representative of the area's cultural makeup, including socioeconomic status, gender, race, sexual orientation, etc.
- Currently, the project staff is comprised of a group of culturally diverse individuals



4

Image courtesy of stockimages/ FreeDigitalPhotos.net

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Implementation Practices:

Strategies we will use to engage our sub-populations

- All project forms, brochures, and educational materials will be available in Spanish, the most common local, non-English language. Bilingual staff and language interpreters will be used and materials translated into other languages as needed. ICS can access translation services available via a partnering agency, which offers translation services in 170 languages.
- Currently, the ICS grant employs a full time peer wellness coach and regularly includes culturally diverse members of the our agency to participate in implementation activities.



- While Tennessee has yet to make a decision regarding the Medicaid option in the Affordable Care Act, staff are currently scheduled to receive training on healthcare benefits for potential enrollees in the next month.

Image courtesy of news.uwmidsouth.org

5

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Challenges and Barriers

- The challenge has been determining which populations are currently utilizing our services and which sub-populations that will need outreach.
- Currently, we are reviewing data to ensure that strategies are developed on an on-going basis to reduce the discrepancies.
- Historically, our agency has not been actively identifying clients from the sub-populations (LGBT and immigrant/refugee). Additionally, questions were brought up about accurately recording race and ethnicity. While we independently collect this for our grant enrollees, we are simultaneously taking steps to improve this for the agency.
- While our primary location is situated in a culturally and racially diverse neighborhood, with a population of immigrant/refugees, it has been a challenge to engage them.

6

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Data & Collection Measures

- Our goal is to decrease risk factors across all populations. Data will be review based on sub-populations to determine strategies to best fit the specific population's needs.
- New questions were added to ensure identification of the sub-populations (GLBT, immigrant/refugee)
- All members of the Integrated Care Solutions grant will receive follow-up interviews. The data will be reviewed regularly with the treatment team
- Currently, the sub-groups are being compared to the majority (see table). However, internal work is being done to be able to indentify a local comparison group.

	Smoking	Any Alcohol Use	Average # of Risk Factors	BPS	BPD	BMI	Waist Circumference	CO	A1c	HDL	LDL	Tri-glycerides
<i>By Gender</i>												
Male	67%	33%	7 out of 9	83%	83%	83%	83%	50%	100%	83%	17%	67%
Female	29%	10%	4 out of 9	56%	17%	94%	100%	22%	65%	15%	25%	45%
<i>By Race/Ethnicity</i>												
Minority	33%	25%	5 out of 9	67%	55%	83%	83%	27%	83%	25%	18%	50%
Non-Minority	38%	15%	5 out of 9	62%	15%	92%	100%	31%	67%	33%	33%	47%

7

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Successes to Date

- We have overcome limitations of our EHR and identified areas of need.
- While requirements surrounding the health disparities have focused our attention to the needs of these populations for the project, they have additionally empowered us to start change within the entire organization.
- New procedures will include a quarterly review of our disparity statement along with current data to ensure that services are most effective.

8

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Looking Ahead

- ICS will continue to be vigilant about available healthcare dollars and how/if our clients can access them.
- Disparity data will be used to influence how and what services we provide.
- Strategic attempts will be made to reach out to populations that may not have been historically utilizing Centerstone services.
- Continuous education will be required to ensure competency.