

DELIVERING HEALTH CARE IN RURAL CALIFORNIA



Why Rural Health Matters?

A lack of traditional health care facilities threatens many of California's rural communities. A lack of available providers is one of the greatest challenges in rural health care. Rural Residents need to travel greater distances to access health care to providers, resulting in transportation and financial constraints for patients in the region.

OUR GOAL

- To reduce care gaps by >1% for controlling blood pressure (CBP) and colorectal cancer screening (COL) for adult members (18+ years old) of Northern Valley Indian Health (NVIH) clinic.
- To increase completed prevention screenings by >1% for CBP and COL with adult members (18+ years old) from NVIH.
- To increase awareness on the importance of CBP and **COL** preventive screenings by participating in community wellness events and providing multi-modal campaigns that are accessible and culturally appropriate.

OUR TARG	BET	
Using Cozeva data to identify PPGs in rural counties with high care gaps, we chose NVIH specifically because the care gaps focused on areas that we can	Data Pull #1: April 2023	Refreshed Data Pull #2: July 2023
leverage existing resources, and utilize our existing relationship with key staff in NVIH to promote screenings.	Non-compliant CBP: 89	Non-compliant CBP: 253
Population Health data identified Health Net members from this PPG were primarily Medi-Cal and located in Yolo, Glenn, Butte and Tehema Counties.	Non-compliant COL: 261	Non-compliant COL: 693
NVIH Champions: Terri Martens, MSN, RN, and Raquel Gomez, MSN, RN, PHN	Non-compliant CBP+COL: 349	Non-compliant CBP+COL: 945

TALKING CIRCLE

Willows Location: 8/15/2023

- 77 calls made by NVIH CHR's- 1st call attempt
- 12 patients responded "yes" they will attend Talking Circle
- 8 patients responded "maybe" they will attend Talking Circle
- 10 calls made by NVIH CHR's- 2nd call attempt
- 7 calls made by NVIH CHR's- 3rd call attempt
- Attendance for Talking Circle: 10 patients/6 staff

- **Grinding Stone Reservation: 8/29/2023** · Canceled due to school closure from COVID-19 outbreak
- No running water in Grind Stone
- Tribal Office (where Talking Circle was to be held) was close due to no running water

A Talking Circle has been used as a culturally appropriate way to address barriers at a patient, community, and staff level. It is a method used by Native American's to share indigenous knowledge.

COMMUNITY HEALTH FAIR

Community Health Fair was held on April 15th at NVIH Hospital in Woodland, CA (Yolo County), conveniently located within a shopping center. NVIH provided various health education activities and food to attendees. We partnered with NVIH to provide BP screening, and resources (Diabetes booklet, BP flyers, Fit Kits and A1C Kits).



- Over 100 attendees visited our Health Net booth
- 15 people completed their BP screening
- 17 A1c Kits were distributed during the fair
- 50 A1c Kits were provided to NVIH to continue distribution after the health fair
- 50 Colorectal Cancer Screening Fit Kits were provided to NVIH to continue distribution after the health fair

NVIH STRATEGY

1. Controlling Blood Pressure

- Provided 20 blood pressure monitors to NVIH as part of the BP Loaning Pilot Program
- Provided blood pressure resource guide to promote Self Monitoring Blood Pressure (SMBP)
- NVIH distributed the blood pressure monitors to their satellite clinics
- Clinical Champions trained NVIH staff and Community Health Representatives (CHRs) across multiple counties and their clinic sites

2. Colorectal Cancer Screening

- Vendor conducted training of Fit Kits to NVIH staff on 4/3/23 and 8/1/23
- Developed tracker for NVIH CHRs to complete live calls to close COL care

BARRIERS AND OPPORTUNITIES FOR IMPROVEMENT

SWOT ANALYSIS			
Strength	Weaknesses		
 Leverage existing relationship with NVIH that represents the population it serves. Leverage Health Net resources 	 Limited budget, resources, and staff Low availability of physician specialists Delay in deliverables 		
Opportunities	Threats		
 Indigenous knowledge – talking circles by utilizing NVIH Community Health Representatives Cultural competency trainings Streamline vendor vetting for multiple LOB 	 Distrust Care gaps continue to persist Inadequate cultural awarenes \textstaraining Missed vendor opportunity if vendor does not serve Medi-Cal LOB 		

FLOW CHART **Close Care Gaps** Resources (HN) Set up cadence of Care Gap Staff Resources Interventions -HN QI staff -NVIH Staff: Colo in-home kits/BP Monitors Live outreach calls by NVIH Ed. Materials Talking Circles Clinical Champion -NVIH Staff: CHR Community events Outreach non-compliant Outreach Dept. Distribute Fit Kits/Conduct BP Screening BP monitor loaner program for SMBP

BEYOND DLP

"Receiving support from [Health Net] and not doing the work alone" is essential to making continued progress.

- Terri Martens, NVIH Community Outreach Director.
 - Bi-weekly standing meetings between Health Net and NVIH
- Equipping NVIH with the resources to initiate and sustain the **BP Loaner Program**
- Adapt a call script for live patient calls and use opportunity to offer patients education on wellness preventive screenings
- Incorporate Train-the-Trainer model to equip NVIH staff through the process of creating a plan of activities that are adaptable to their needs
- Support to strengthen the transfer of learned strategies or best practices
- Advance health equity by addressing health disparities for the population served by NVIH