



GOLDEN VALLEY
HEALTH CENTERS

Street Medicine Team

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Director of Clinical Education and Outreach

We **care** for you.

Who We Are

Federally-
Qualified
Health
Centers
(FQHC)

32+
locations in
San Joaquin,
Stanislaus
and Merced
Counties

322,308
medical
visits

Patients
with Medi-
Cal,
Medicare
or
uninsured

Homeless
persons

22,071
behavioral
health visits

Seasonal
and farm
workers

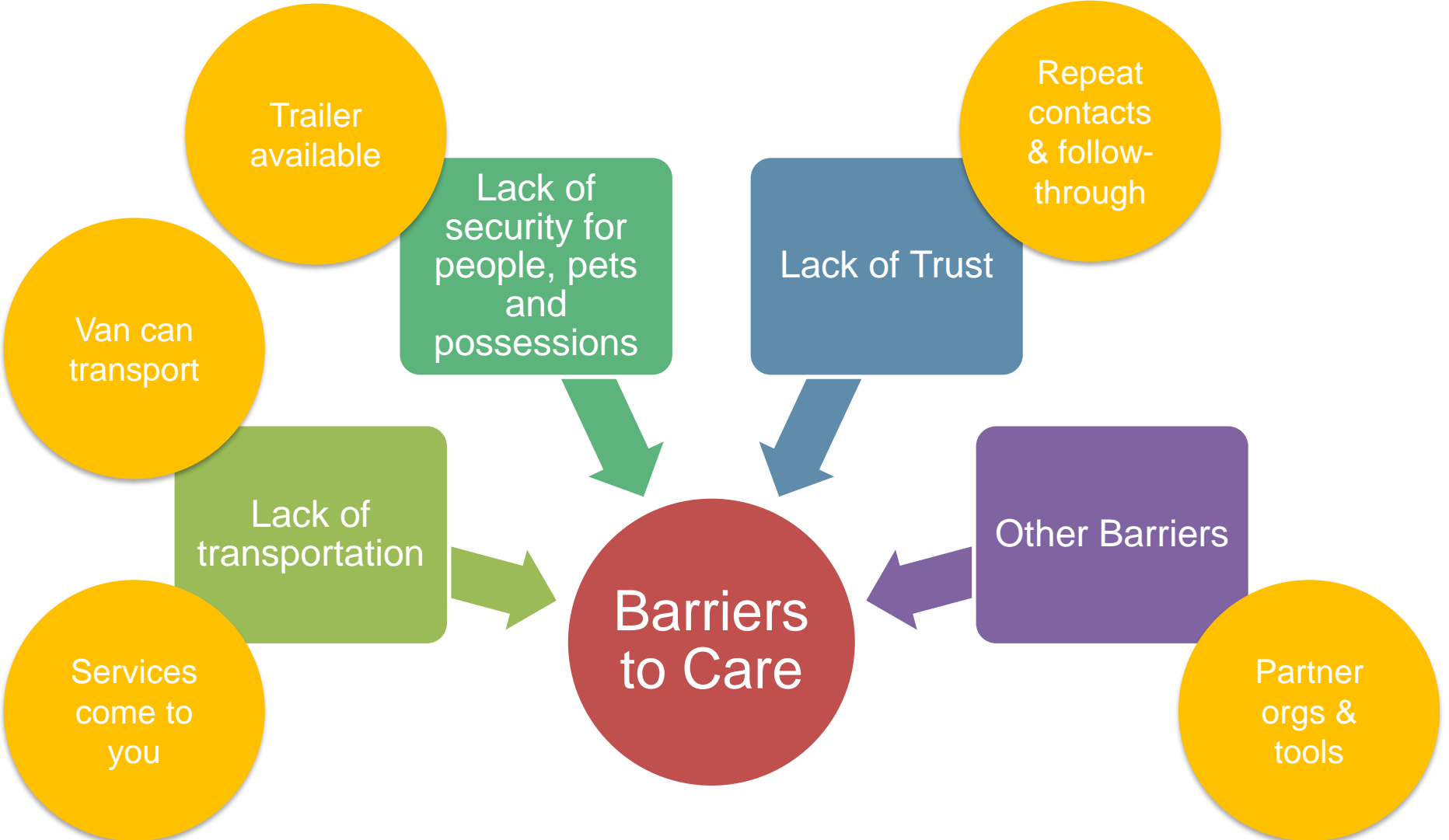
70,030
dental visits

3,377
optometry
visits

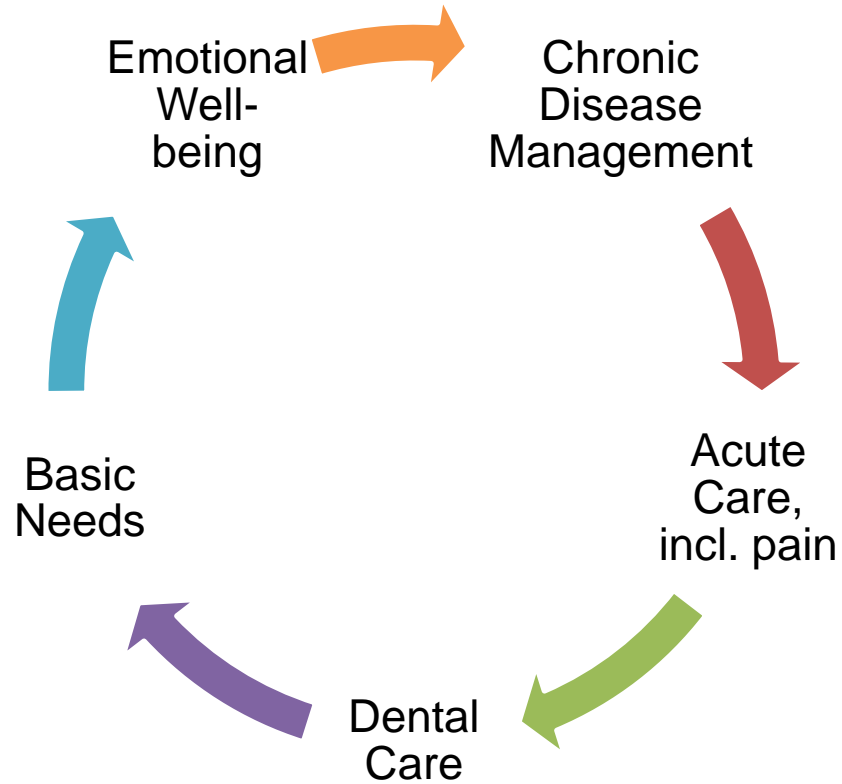
27,193
prompt care
visits



Ceres • Dos Palos • Newman • Le Grand • Los Banos • Merced
Modesto • Patterson • Planada • Turlock • Westley • Riverbank



Health Needs



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Street Medicine



Solutions



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STREET MEDICINE

HOMELESS HEALTH CARE

MOBILE ACUTE CARE AND OUTREACH TO PEOPLE EXPERIENCING
HOMELESSNESS IN MERCED AND STANISLAUS COUNTIES
(LOS BANOS, MODESTO, PATTERSON, TURLOCK)



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SERVICES INCLUDE WOUND CARE; BLOOD PRESSURE CHECKS; GLUCOSE CHECKS; RAPID APPOINTMENT ACCESS; TRANSPORTATION FOR PATIENT, PETS AND POSSESSIONS. PARTICIPANTS ALSO RECEIVE A NEW PAIR OF SOCKS, HYGIENE SUPPLIES, FOOD AND WATER

1,178

TOTAL PEOPLE REACHED (MAY-AUG 2018)



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310 NURSE VISITS

HEAT SAFETY, FOOT CARE, DIABETES MANAGEMENT AND
DENTAL ARE HIGH AREAS OF NEED



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**NURSE (LVN), COMMUNITY HEALTH WORKER (CHW), MOBILE
VAN, TRAILER AND SUPPLIES ANNUAL BUDGET**

\$157,776

**FUNDING PROVIDED THROUGH A GRANT WITH SUTTER
GOULD FOUNDATION (JANUARY-DECEMBER 2018)**

**FOR MORE INFORMATION:
JHENDERSON@GVHC.ORG**



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Stanislaus County Suicide Prevention Innovation Project

2018 Suicide Prevention Needs Assessment Findings
A Community Discussion

September 10, 2018

Project Background

- Sept. 2015 Stanislaus County Board of Supervisors expressed concern statewide efforts to reduce suicides had not been effective and identified **reducing suicide rates as a funding priority**
- Oct. 2015 MHSA Representative Stakeholder Steering Committee (RSSC) endorsed the Suicide Prevention Project, an initiative to **help decrease suicides** in Stanislaus County and **increase suicide awareness and prevention**
- April 2016 the **Mental Health Services Act Oversight and Accountability Commission** approved the **Suicide Prevention Innovation Project**

Project Strategy – *Innovation*

■ Innovation

- *Projects **contribute to learning** about and **addressing an unmet need** rather than providing direct service*

■ Collective Impact Model (CIM)

- *The Project will **utilize and evaluate** CIM as the promising community driven best practice or adaptive approach*
- *The Collective Impact Model was adopted as the **innovative approach** for the **project** because:*
 - Allows for cross-sector perspectives and collaboration
 - Ability to address complex root causes

Project Strategy – *Collective Impact Model*

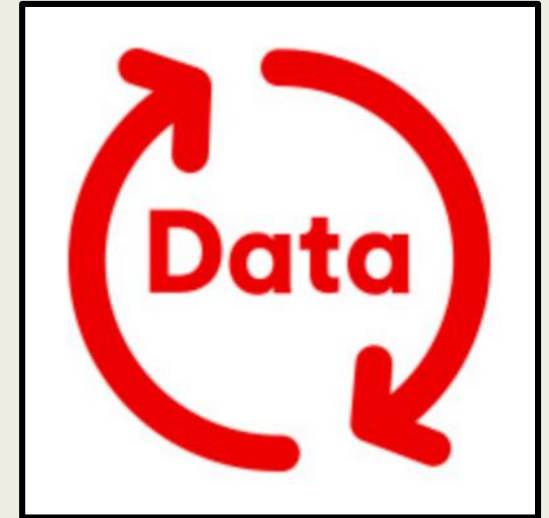


- “*Collective Impact*” brings people together, in a structured way, to achieve social change
- Project Team (BHRS) formed and convenes the *Stanislaus County Suicide Prevention Advisory Board*
- A Common Agenda is when diverse stakeholders come together to collectively define the problem and create a shared vision to solve it

Collectively Define the Problem

■ Needs Assessment

- Secondary Data Review
 - Death and Attempt Data
- Advisory Board Assessment
 - Asset Mapping
 - Root Cause Mapping
 - Federal and State Policy Scan
 - Literature Review
- Problem Statement



Defining the Problem Through Data

- **207** Stanislaus County residents have died by suicide *(over a four-year period)*
- Equates to nearly **1 suicide** death **every week**
- For every **1** suicide, **115 people** are directly and indirectly **impacted**
- Suicide takes an emotional toll on families, affects the well-being of the larger community and carries a heavy societal cost burden
- Death reflects only a portion of the problem, non-fatal suicidal behaviors and attempts pose a serious challenge and are strongly associated with suicide rates
- Suicide has no single cause

Defining the Problem Through Data

More Stanislaus County residents **die** by **suicide** than by **homicide**.

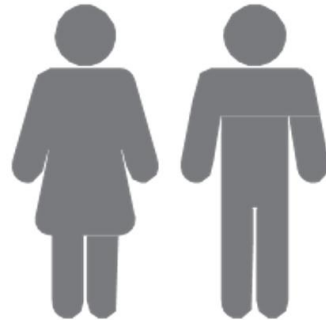
Suicide Death
Stanislaus County
2016 (n=55)



Homicide Death
Stanislaus County
2016 (n=25)

(VRBIS, 2018)

Gender:

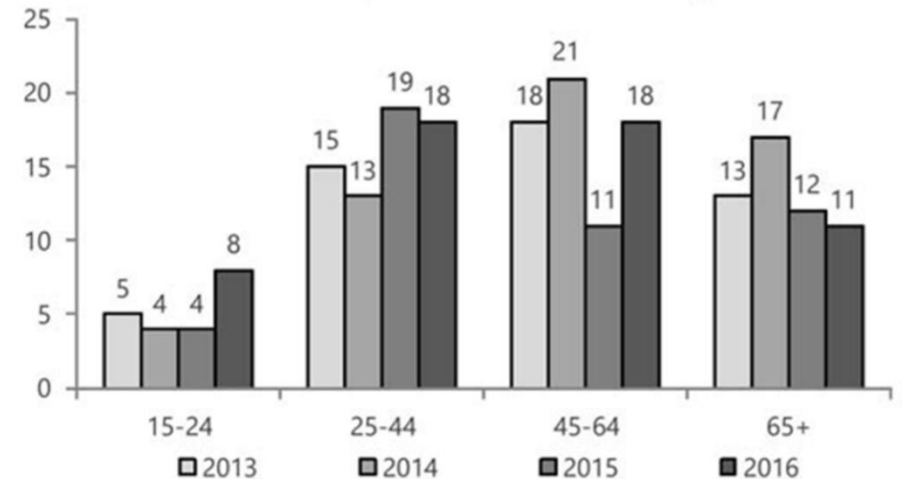


24%
Female

76%
Male

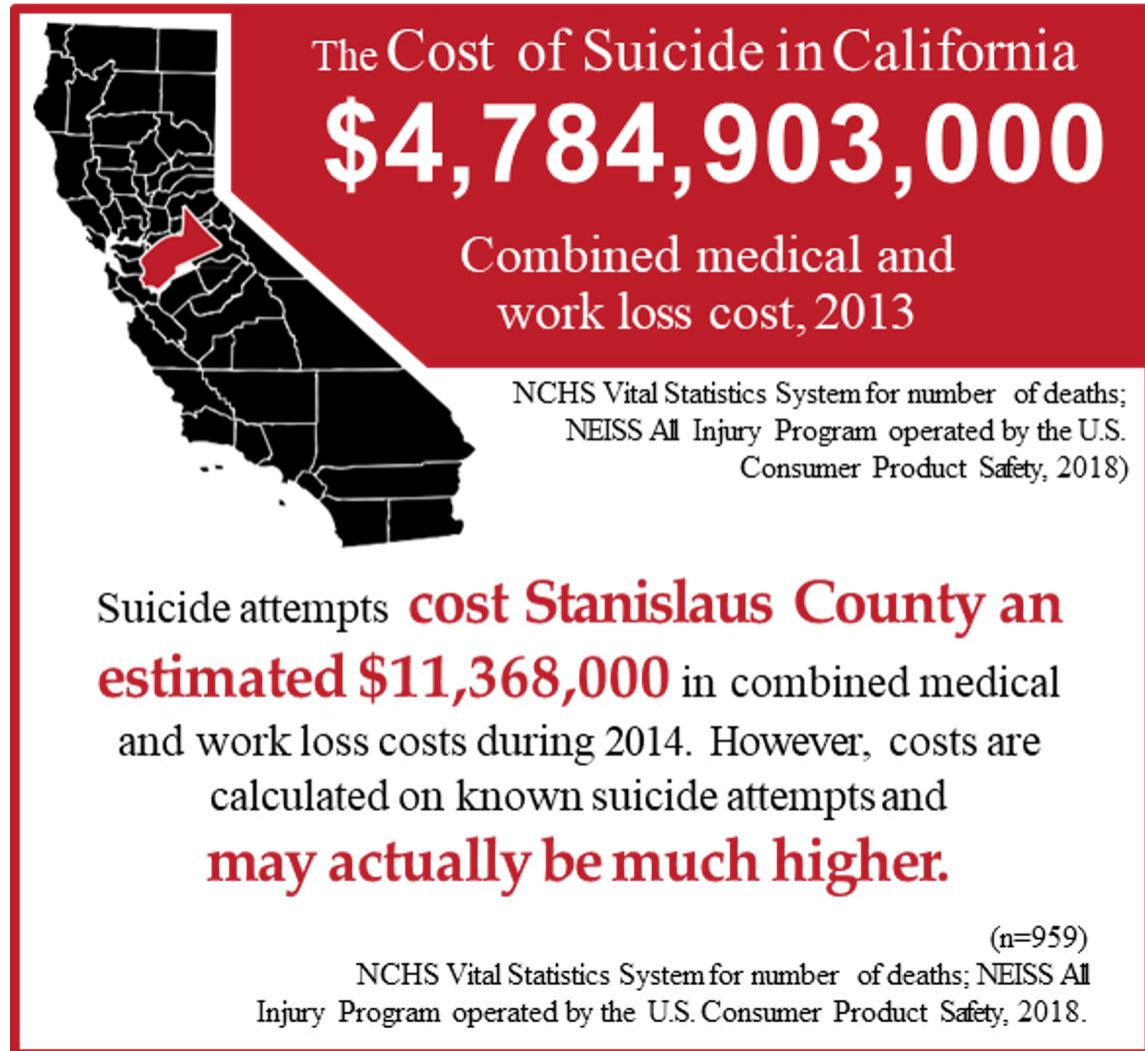
2016 Suicide Death Data

Suicide Death by Age, Stanislaus County
2013 - 2016



- Nearly **1** suicide death **every** week

Defining the Problem Through Data

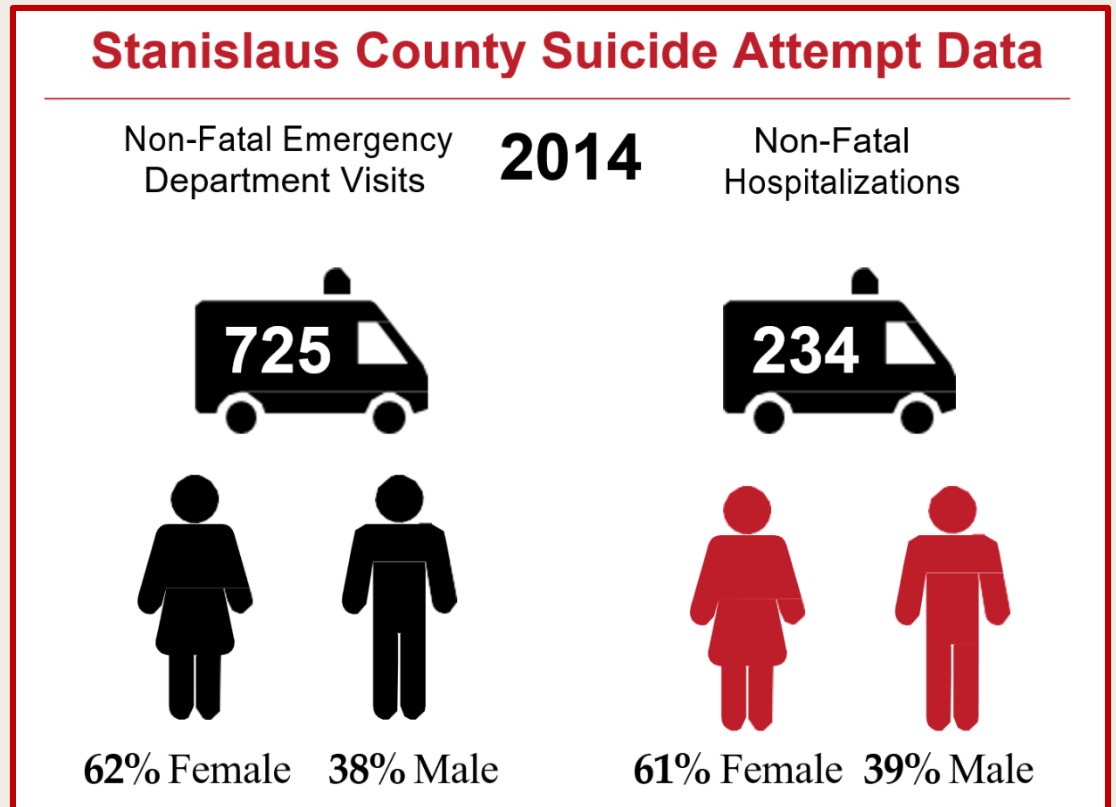


- Community & Cost Burden
 - Suicide takes an **emotional toll** on families, **affects** the **well-being** of the larger community and carries a **heavy societal cost burden**

Defining the Problem Through Data

■ Non-Fatal & Attempt Data

- Death reflects **only** a **portion** of the **problem, non-fatal suicidal behaviors and attempts** pose a serious challenge and are strongly associated with suicide rates



Defining the Problem Through Data

■ Root Causes

- Suicide has no single cause
- The multiple contributing factors of suicide and suicidal behaviors are complex and can be attributed to the interaction of the following root causes:
 - Mental health stigma and misconceptions around suicide
 - Decline in connectedness, interpersonal relationships, institutions and other social assets of a society (social capital)
 - Challenges of sharing information across public and private systems, impacting the quality of care
 - Lack of shared best practices or standard practices of care for suicidal behaviors and prevention

Discussing the Data

- Were you surprised by any data?
- What (specific) data caused concern for you?



Discussing Root Causes

- What are your thoughts about the root causes?
 - ✓ Stigma and misconceptions around suicide
- Do you disagree or agree with them?
 - ✓ Decline in connectedness
 - ✓ Challenges of sharing information across systems, impacting the quality of care
 - ✓ Lack of shared best/standard practices of care

Gathering the Community's Ideas

- Considering the root causes, what suggestions or ideas do you have to address them?
- Any specific strategies, interventions, services or supports?
- Considering the root causes and demographic data (*i.e. age, gender, education attainment and marital status*), where would the best place be to reach people?



Stanislaus County Suicide Prevention Innovation Project

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