



Corazon de Coastal: Healing the Heart of West Marin

Point Reyes Practice, PHC

Diane Hozer, Christina Hetzer, Rachel Joseph, Glenda Mejia, Cristina Salcedo, Angelica Sanchez, Jessica Moore, Francisco Vielma, Martin Farias

November 4, 2021

Who are we?

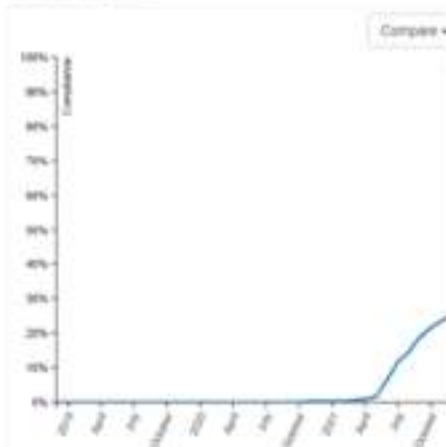
- A **clinic-to-community partnership** born during a global pandemic
- A **seedling** of a long-standing initiative
- A **multidisciplinary team** finding its center “outside the walls”



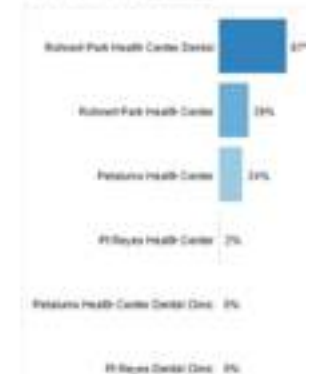
Adverse Childhood Event Screening (ACES) For Children With Well Visits ^



Compliance trend

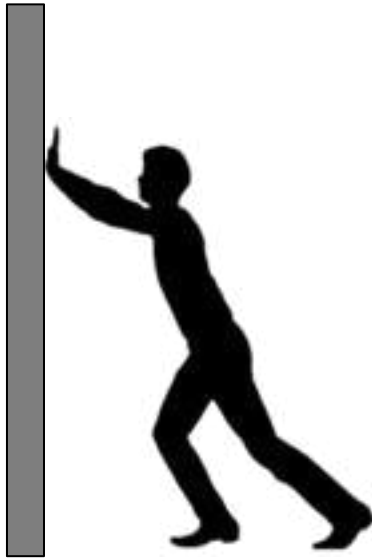


Compliance by Location

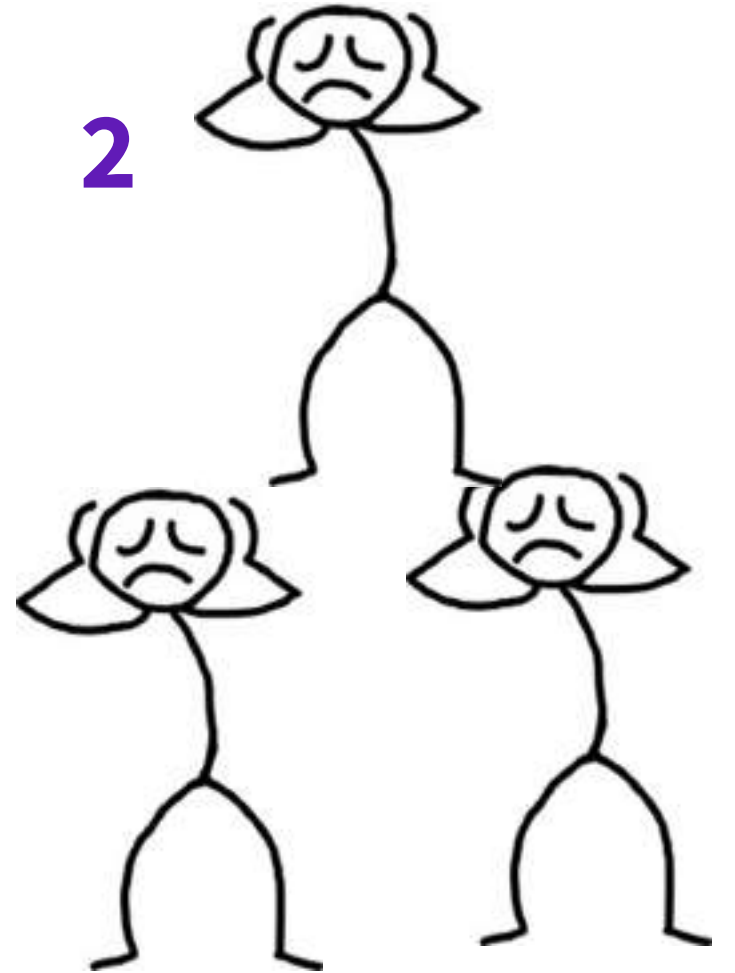


The Challenges

1



2



**We've come a
long way
together...**

“We have no visible information to make it a safe space for vulnerable groups...”

“I think our staff needs more training. [Caring for survivors is] hard, even for trained staff.”

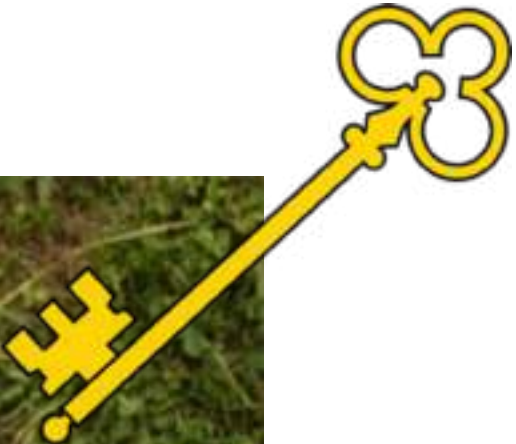
“We have a diverse workforce, except for providers...”

What Have We Accomplished?

1. Survey of **baseline capacity** and **patient experience**
1. Launch of **clinic-wide resilience initiative**
1. Birth of **Clinic-School Resilience Partnership**
1. Launch of **ACEs screening pilot** within our newest practice sites



Key Insights



Our Desired Future: RBN Y2

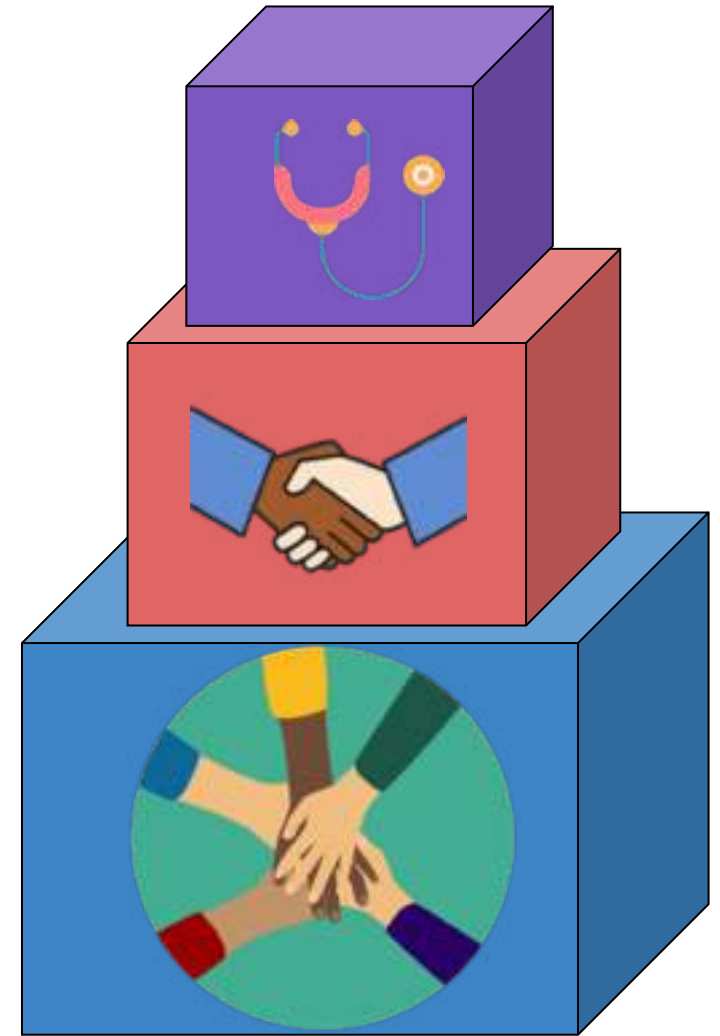


Proposed Strategy

Universal ACEs Screening + Linkage

Robust School - Clinic Community Resilience
Partnership

Community Investment and Co-Design



What do we **risk** if we don't proceed?



Our Ask of You:

- **Training, retention, and ongoing healing**
- Family Advocate **co-leadership**
- Equitable **community-centered** design





RBN Grant Year One

Creating our Vision

Marin Community Clinics

Dana Jackson, DO, Pediatrician

Cayenne Bierman, LCSW, Complex Care

November 4, 2021

Mitigate Social Determinants of Health to Improve the Health Outcomes of our Patients

Raul: 50yo w/ SUD, homelessness and chronic health conditions

Maria: 18yo pregnant mom with 2yo and FOB fleeing country



“I’m going to fail this family.”

Reactive vs Preventive Care:

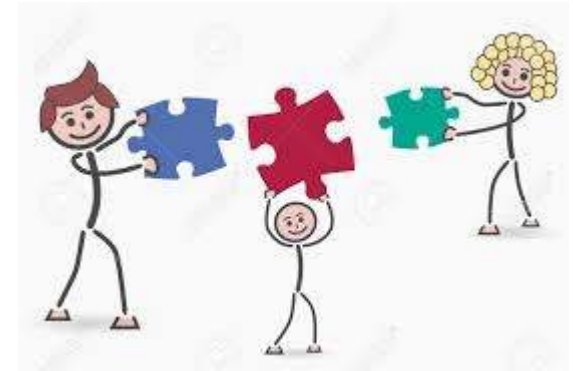
- Our current system is reactive to crisis, not preventative. This creates less efficient care.
- Patients come to the clinic with multiple issues at once.
- Providers burn out because they often feel alone and like the problems of their patients are insurmountable in a 15 min visit.
- Families feel like they are not being respected or getting their needs met.



We have excellent Adult Whole Person Care and OB High Risk Care.

- MCC has developed a robust Complex Care department for individuals.
- We have an excellent multidisciplinary OB high-risk program that identifies vulnerable patients and then addresses both medical and psychosocial needs.
- Pediatric providers then try to pick up where the OB team left off, independently trying to navigate a complex system of resources in addition to providing medical care.



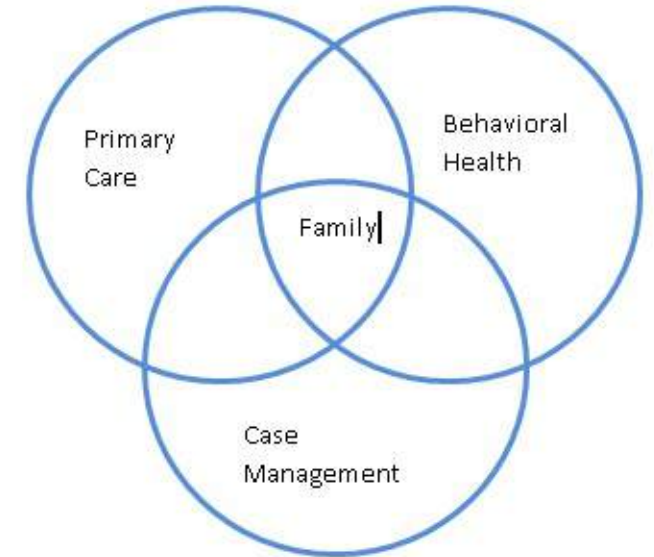


RBN Year 2 Plan: Healthy Steps

From Whole Person Care to
Whole Family Care.

Whole Person to Whole Family

- The implementation of Healthy Steps will allow MCC to transition from siloed, individual-base care to providing whole-family care.
- Healthy Steps encompasses preventative screenings, early intervention, psychoeducation, resource connection, and emotional support, and will allow MCC to provide proactive (vs reactive) care that addresses the needs of the family unit.
- **Building In ...** Families and providers will benefit from an integrated model that addresses developmental risk factors at a critically early age – preventing future crisis and improving health outcomes.



Consequences of more-of-the-same...



- Less Efficient health care system with lower Quality care. Poorer outcomes leading to more costly care.
- Providers will continue to experience burnout, vicarious trauma, and feelings of helplessness in the face of complex, social-ecological issues.
- The cycle of intergenerational trauma/ACES will continue – perpetuating poor health outcomes for many of our most vulnerable children and families.

Our ask from MCC leadership:



- We are purchasing Healthy Steps Training we need you to invest in training our staff by providing adequate admin time for training.
 - This will increase our Quality of care
- Invest in staffing to cover 2 Healthy Steps Specialists, licensed BH providers.
- Commitment to taking the next step toward Whole Family Care into the future.
 - This can be bolstered by new *Partnership reimbursement of dyad care and increased medical coverage for one year post partum.*



Thank you for your time!

Marin Community Clinics

Dana Jackson, DO, Pediatrician

Cayenne Bierman, LCSW, Complex Care

djackson@marinclinic.org

cbierman@marinclinic.org

Elevating Patient + Staff Voices Santa Rosa Community Health

Resilient Beginning Team Members:

Dr. Erin Lund, MD, MPH, Family & Addiction Medicine + RBN Team Lead

Dr. Hannah Watson, MD, Family & Addiction Medicine + Clinical Team Lead

Susan Dunlop, RN, Perinatal Services

Mary Finnican, LCSW

Jackie Leon, Senior Clinical Operations Manager

Angelique Sinnott, Medical Assistant

Brenda Beltran, Medical Assistant

Roxana Diaz-Cruz, Medical Assistant

Abigail Ramirez, Medical Assistant

Carin Hewitt, Project Manager

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Our Desired Future



"This is not a one-time activity. This is a culture shift." ~ Erin Lund, MD, MPH

Why It's Not Happening Now

COVID-19 has created an overall sense of isolation.

Financial constraints mean productivity drives our work.

Staffing shortages mean no one is focused on patient engagement.

Key Insights about our Current State



Staff is experiencing burn out and morale is low.



Patient engagement has not been prioritized for many years and its absence prevents us from being truly trauma informed.



The potential for a culture shift is here if we put time and attention into it.

Eliciting Patient + Staff Experience at Vista

RBN
Year 2 Plan



Benefits of Achieving Our Desired Future



Enhancing patient experience so that everyone, particularly those with a history of trauma, can feel safe, welcome, and seen.



Building a workplace culture where staff feel valued, supported, and seen as individuals.



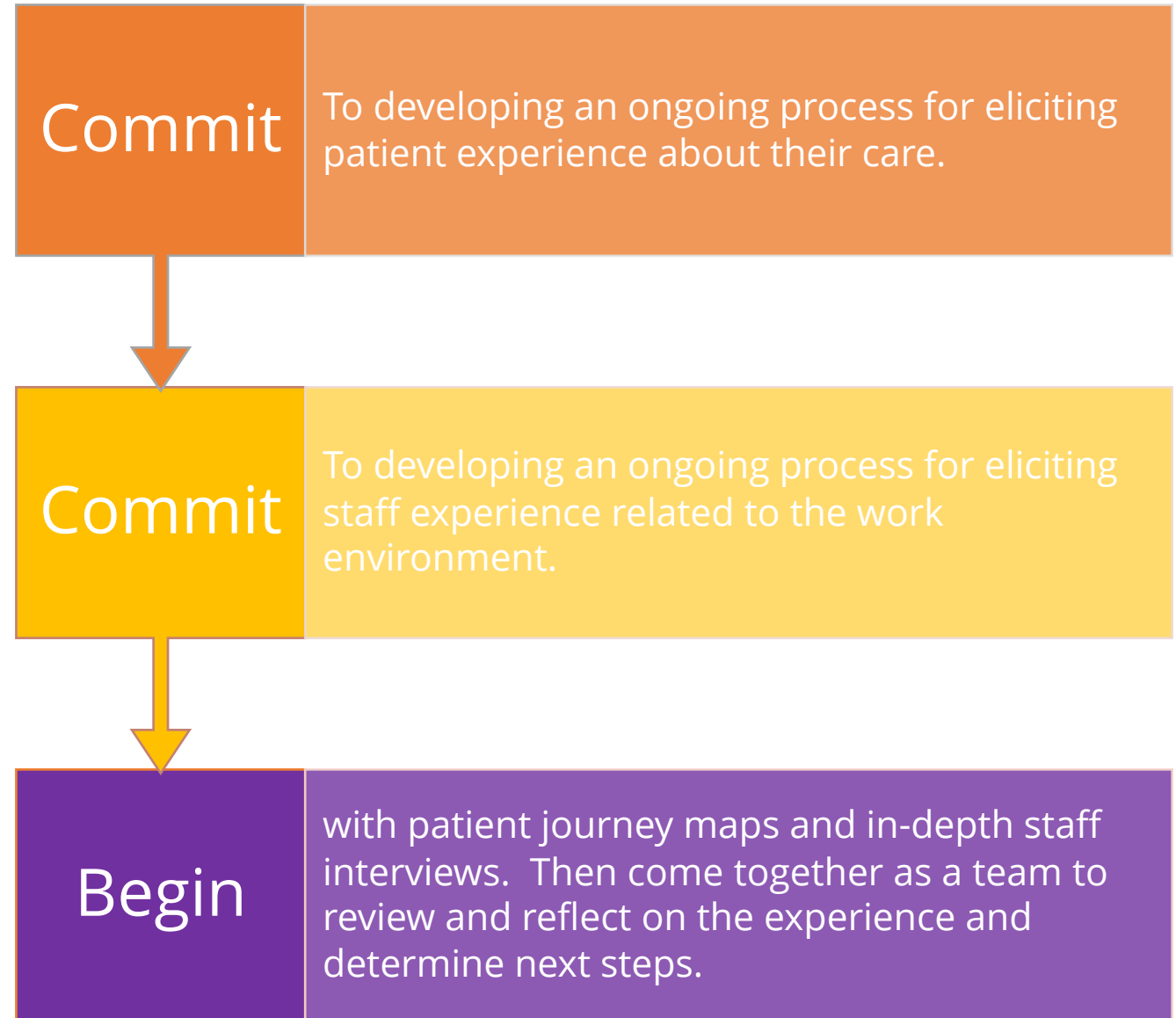
Creating a trauma informed, strength based, experience for staff and patients.



Challenges or Consequences if We Don't Move Forward with This Work

- Staff continue to feel burn out and turnover remains high.
- Patients have repeated negative experiences which leads to mistrust and reinforces inequities in care.
- Patients are triggered which leads to protective responses towards staff or others.

What We Need from Vista Leadership to Make it Happen



Thank you for your time!

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Santa Rosa
COMMUNITY
HEALTH

Primary Contact: Dr. Erin Lund, MD, MPH erinl@srhealth.org