

## Project Description / Purpose

<b>Project Name:</b>	Case Management (Peds.) – Behavioral Health and Medication Management Crisis Intervention, Spanish Support
<b>Clinic:</b>	Lifeline Behavioral Health
<b>Process:</b>	Identification of Tier 1 Medication Management, Spanish and Mandated Adolescent support
<b>TIP 2.0 Process Milestone:</b>	Culturally and Linguistically Appropriate Service Standards (CLAS)

<b>Project Description / Purpose</b>	
<p>The purpose of our project involves two tiers.</p> <p><b>Tier (1)</b> includes efforts to monitor the connection between medication compliance, nurse practitioner intervention, and subsequent connection to medical/behavioral health services, to limit the negative effects of medication interactions, linked to suicidality. We will identify vulnerable demographics and current clients, who do not regularly have access to medication reviews necessary to find the correct combination of medications and routine behavioral health intervention. Due to lack of identification of this demographic, those suffering from depression and suicidality, receive medication without routine review and connection to behavioral health support, causing negative symptoms to increase and result in suicide. We will use the Health Information Exchange to quickly identify those who have spent recent time within inpatient settings and who have a diagnosis aligned with increased crisis and suicidality risk. Our aim will be to ensure documentation is transferred at all levels to keep medical professionals and behavioral health care providers connected to monitor behavioral and medical outcomes.</p> <p>Our goal is to keep close watch on those with depression and crisis backgrounds, to ensure appropriate and frequent connection to medication management services to minimize medication interactions, that contribute to suicide and self-harm. We will use information from health information exchange to ensure we are quickly alerted to any individual who has been released from recent inpatient, to ensure support is given within 48 hours for med management, enrollment in services, and after care planning.</p> <p><b>Tier (2)</b> involves increasing access to culturally and linguistically appropriate services for Spanish speaking adolescent clients. We have a designated Spanish department, and our goal is to increase the specificity and focus of the efforts, to provide translations services for Spanish speaking individuals, materials in native language, training and support for both clients and staff, to mitigate cultural stigma related to receiving service. We will examine data to determine the presence of any logistical, scheduling, tele communication, or mental health literacy components, which serve as barriers to enrollment in services. We will match individuals with Spanish speaking practitioners and use translation service when needed. Also, we intend to increase the time within service and attendance rate for individuals within this demographic. Current metrics indicate a 65% show rate as compared to other demographics which display an 80% attendance rate. We will connect with the parents and guardians of the adolescents to increase support and mental health literacy.</p>	

## Project Overview

<b>Problem Summary:</b>	<p>Enter description of problem or performance gap identified here. Include descriptions of the impact to staff and/or patients.</p> <p>Individuals in need of medication review for depressive symptoms and Spanish Speaking clients represent vulnerable populations, that currently lack access to all CLAS standards for care. Pandemic related depression impacted younger Americans particularly hard, with <u>10.6% of youth</u>, or 2.5 million people, experiencing severe depression in 2021, though fewer than <u>1 in 3</u> received consistent mental health care. This combination of outcomes further distances community members from affordable, consistent, opportunity to receive behavioral health and psychiatric care.</p>
<b>Desired Outcome (s):</b>	<p>The specific aim rests within identifying the service contact show rate, time within treatment, treatment outcomes, and culturally specific needs for the above demographics (Crisis Medication management Populations and Spanish Speaking). Our goal is to improve our existing data collection procedures to increase culturally appropriate access to treatment.</p> <p><b>Barrier Analysis Report-</b> Detailed reports outlining quantitative and qualitative indicators related to barriers for (Crisis Medication management, and Spanish populations)</p> <p><b>Intervention Plan-</b> Plan outlining specific initiatives related to treatment for (Crisis Medication management and Spanish populations,)</p> <p><b>Mental Health Literacy Offerings and Stakeholder Collaboration -</b> Plan outlining connection with community support, nonprofits, and justice partners to increase mental health literacy within the community. Specifically monitoring cases from Mesa Court, Federal Probation, and AOC (area of concentration)</p> <p><b>Training-</b> Increased training for staff related to CLAS standards, referral to community supports, and advocacy</p> <p><b>Progress Monitoring Reports</b> –Regular updates on the progress of the project including feedback from surveys distributed to staff, clients, and stakeholders.</p>
<b>Benefits:</b>	<p><b>Tier 1-</b> increased connection to medication reviews to minimize suicidality, Increased documentation across all levels through Health information Exchange</p> <p><b>Tier 2-</b> Increased mental health literacy offerings, address barriers related to Language, logistics, telecommunication, and stigma for Spanish Speaking demographics</p>

## Timeline

	Description of Task and Completion Dates
Task 1	Planning and Analysis Month (1)

## Project Charter

	Form Project Team and Assign Roles
<b>Task 2</b>	<b>Intervention Development Month (2)</b> Create Targeted Interventions based upon Barrier Analysis
<b>Task 3</b>	<b>Implementation Month (2-3)</b> Coordinate staff and review policy and procedure
<b>Task 4</b>	<b>Monitoring and Evaluation Month (3)</b> Aggregate data
<b>Task 5</b>	<b>Implement Action Items from Monitoring and Evaluation (Month 4)</b> Cross train staff and update screening protocol

\* Add new rows as needed.

## Project Charter

### Project Scope

In Scope Project Objectives
The primary objective of this project is to use quality improvement strategies to improve screening and data collection for medication review and CLAS standards for vulnerable demographics
Out of Scope Project Objectives or Activities
We are not addressing any issues related to other screening measures or introducing any new screening protocol. We are enhancing our in-place procedures.

### Project Team

<b>Team Lead:</b>	James D. Heiskell, LPC, Assistant Clinical Director	<b>Project Champion:</b>	Dr. Roxanne DalPos LPC, PHD, Clinical Director
<b>Process Owner:</b>	Mr. Kristopher Schlepp LPC, Assistant Clinical Director	<b>Process Managers:</b> Patti Gillespie/ Kristen Jones	Patti Gillespie – Health Care Operations Kristen Jones – Community Engagement Manager

Stakeholders			
Stakeholder	Title	Department	Organization
Trenalisa Lewis	Program Specialist	Maricopa County Superior Courts	Maricopa County Superior Courts
Lisa Porter	Deputy Court Administrator	Court Operations	Mesa City Court
Ryan Bennett	Procurement Officer	Procurement Services	AZ at Work
Heather Redmond	Supervisor	DV Unit 33	Maricopa County Adult Probation
Laura Tomchak	School Liaison/Child Advocate	CSOC Coordinator	Mercy Care

Project Team Members	
Name	Team Role
Dr. Roxanne DalPos	Project Champion
Mr. Kristopher Schlepp LPC	Process Owner

## Project Charter

Mr. James D. Heiskell II LPC	Team Lead
Kristen Jones	Process Manager
Patti Gillespie	Process Manager

### Signatures

<b>Process Owner</b>	Mr. Kristopher Schlepp LPC, Asst. Clinical Director
<b>Project Champion</b>	Dr. Roxanne DalPos, Clinical Director
<b>Team Leader</b>	James D. Heiskell II LPC, Asst. Clinical Director