

The Guidance Center Community Health Needs Assessment



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Background



The Guidance Center (TGC) conducted a Community Health Needs Assessment (CHNA) in August and September, 2015 for the approximately 135,000 residents in Coconino County, Arizona. This CHNA focused specifically on the mental health needs of the community, consistent with The Guidance Center's mission.

The Guidance Center contracted with Eide Bailly LLP, an accounting and consulting firm specializing in consulting with healthcare organizations, to provide technical assistance in ensuring the process met IRS requirements under 501(r).



Background

The Guidance Center is a behavioral health center with office locations in Flagstaff and Williams, Arizona.

In Flagstaff, the Guidance Center operates a 16-bed inpatient psychiatric facility, residential and outpatient substance abuse services, community living services, general mental health services, outpatient psychiatry and child/family services.

The Williams location provides outpatient substance abuse services, community living services, general mental health services, outpatient psychiatry and child/family services.



Conducting the Assessment



The first step addressed in The Guidance Center's process was to determine how the community served would be defined. The community served can be defined as broadly as desired, but can not specifically exclude medically underserved populations.

The Guidance Center defined their community broadly to include all of Coconino county. While they consider their catchment area to primarily include Flagstaff, Williams and Havasupai in the southern portion of the county, they do provide services throughout the county. Encompass Care in Page primarily serves the Northernmost communities in the state including Page, Fredonia and the North rim of the Grand Canyon.



Defining the Community



Coconino
County



Defining the Community



Coconino County is the largest county in Arizona and the second largest county in the United States with 18,608 square miles of land. Roughly half of the land is public property, and 38% belongs to Indian reservations that are home to Navajo, Hopi, Paiute, Hualapai, and Havasupai tribes. Population centers include Flagstaff, Fredonia, Page, Tuba City, Tusayan, and Williams, with populations ranging from 558 in Tusayan to 65,870 in Flagstaff. The remaining area is dotted with isolated communities.

Major employers in the county are the government, the leisure and hospitality industry, and trade, transportation and utilities.

Coconino County Community Health Assessment (June 2013)

Defining the Community



The total population in Coconino County is 134,421 people and is relatively young, with only eight percent of the population being 65 years or older. The overrepresentation of young adults is due to the 18,292 Northern Arizona University students who live in the vicinity of Flagstaff during most or all of the year. Nearly one in every eight Coconino County residents is a University student.

The majority of residents are white, however 27% of residents belong to Navajo, Hopi, Paiute, Hualapai, Havasupai, or other Native American tribes. An additional 14% percent of the total Coconino County population identifies themselves as Hispanic or Latino.

Coconino County Community Health Assessment (June 2013)



Defining the Community



Median household income in the service area for 2009 was \$49,777 and the average per capita income is \$17,139. The median household income is slightly higher than the state average and per capita income was slightly better than the average for U.S. counties.

Unemployment rates for the county have increased sharply over the past five years. In 2011 the rate was slightly lower than Arizona's and slightly above the U.S. rate.

The percentage of uninsured adults between 2009-2011 is relatively stable and is higher than the state. This is expected to decrease with the enactment of the Affordable Care Act.

Coconino County Community Health Assessment (June 2013)

Defining the Community

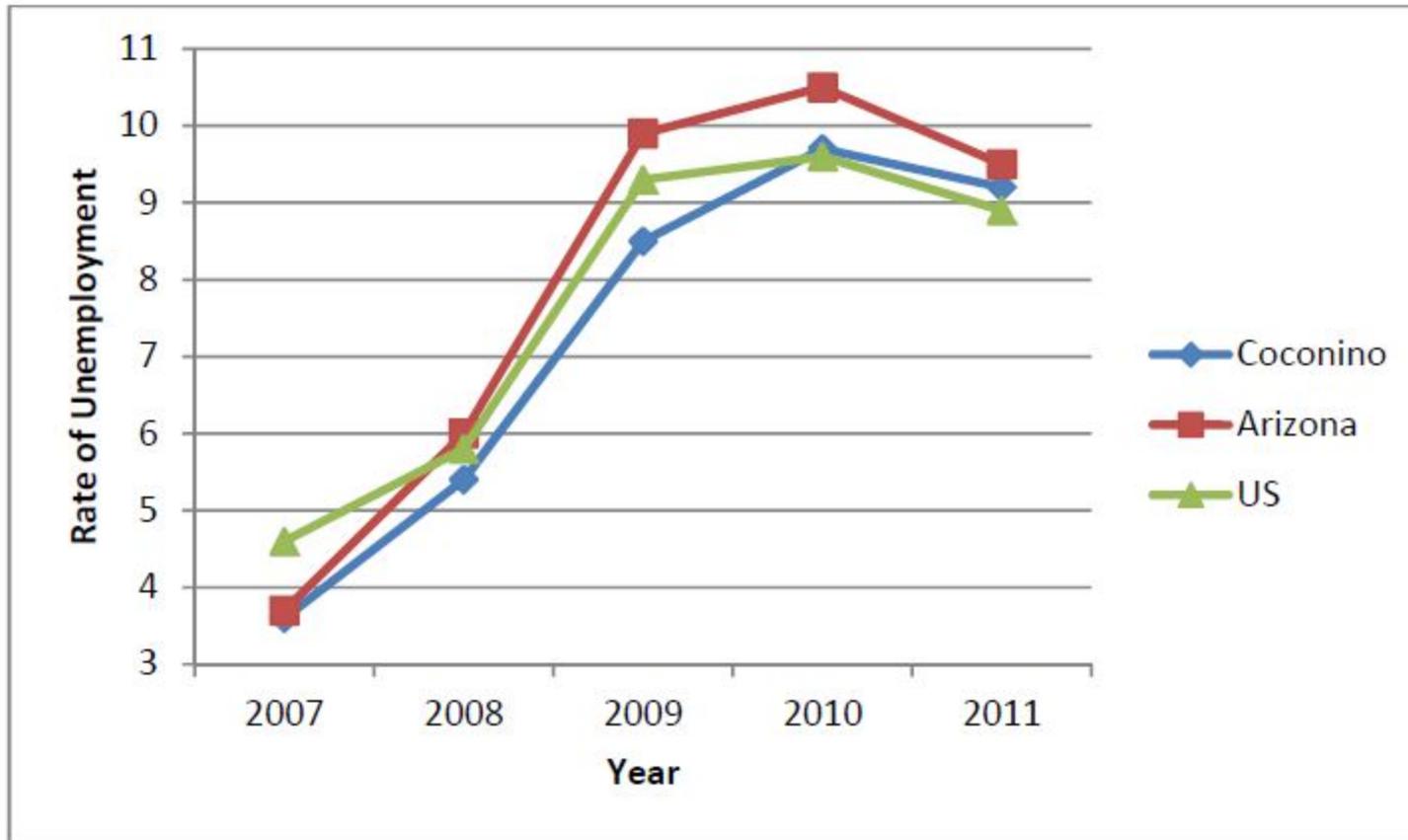


Figure 7: Average Annual Unemployment Rates, Coconino County, Arizona, U.S. – 2007-2011

Coconino County Community Health Assessment (June 2013)

Defining the Community

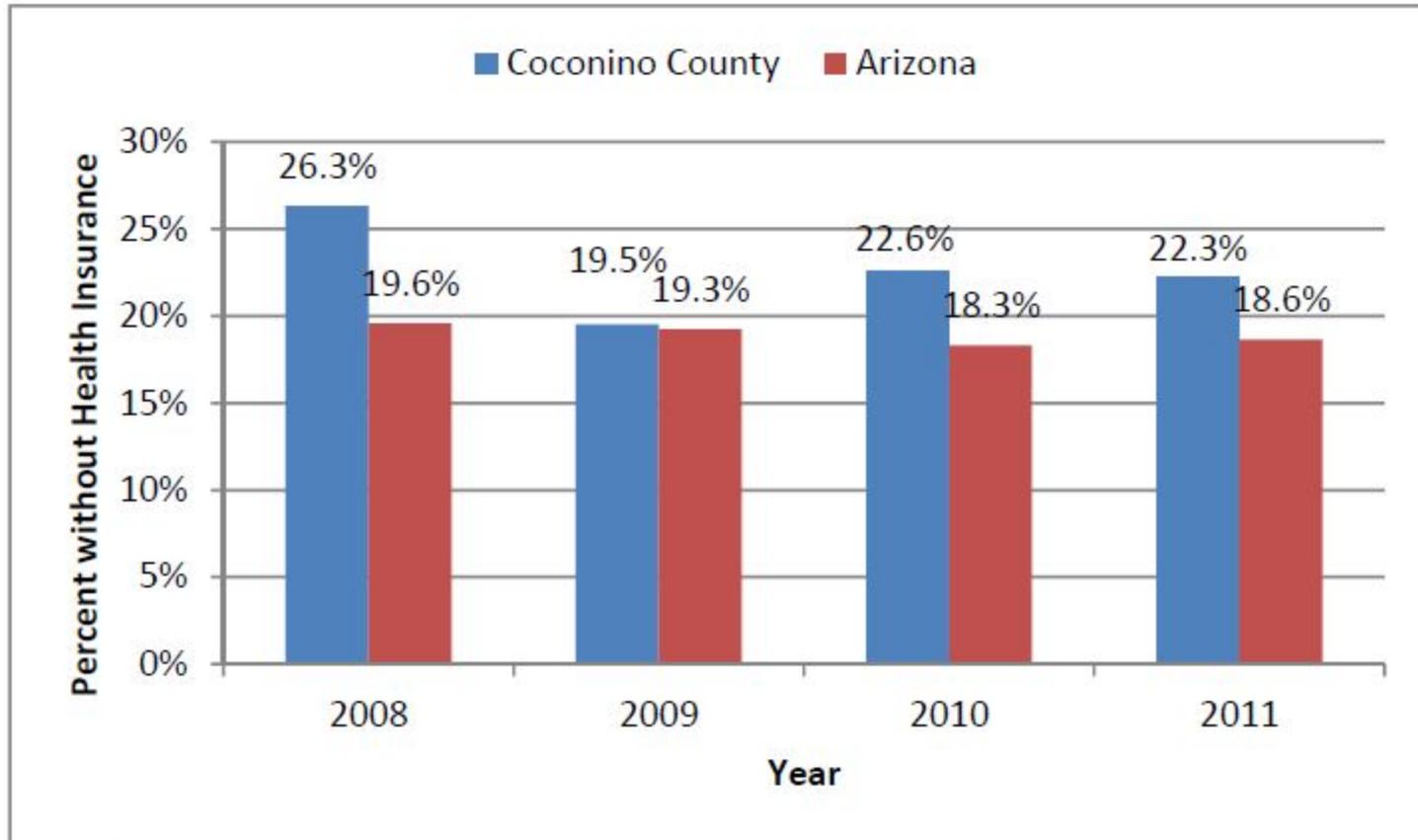


Figure 8: Percent of Adults without Health Insurance

Coconino County Community Health Assessment (June 2013)

Defining the Community



The eastern half of the county (Flagstaff and the Navajo reservation are excluded) is designated as a Federal “Primary Care Health Professional Shortage Area”.

Arizona designation of “Medically Underserved Area” applies to all but the southeast quadrant of the County, with the northern half of the County being the most underserved

The entire county is a “Mental Health Professional Shortage Area”

Coconino County Community Health Assessment (June 2013)

Conducting the Assessment



In February 2013, TGC participated in the development of Coconino County's Community Health Improvement Plan (CHIP). This process was led by the Coconino County Public Health Service District and was a direct response to the Community Health Assessment (CHA) the Public Health Service completed in December 2012. The purpose of the CHIP was to gather stakeholders and identify priority issues, develop and implement strategies for action and establish accountability around the health priorities identified in the CHA.

The results of this planning forms a part of the basis for the assessment completed by the Guidance Center.



Conducting the Assessment

In addition to the information gathered through the Coconino County Public Health Department, TGC collected information regarding behavioral health issues in the defined service area from the following sources:

- Department of Behavioral Health Services (DBHS) 2014 Annual Report on Substance Abuse Treatment Programs
- Arizona Health Matters
- Flagstaff Police Department
- Coconino County Sheriff's office
- The Guidance Center's Consumer Advisory Board



Coconino County Community Public Health



The County's Community Health Improvement Plan identified the following areas of concern from the County's CHNA:

- Injury associated with alcohol consumption
- Chronic illness including heart disease, diabetes, and obesity
- Inability to access health care (financial, geographic, etc.)

The “injury associated with alcohol consumption” was the primary factor that impacted TGC. With respect to this issue, the following goals were established:

- Coordinate service providers
- Make the Flagstaff community aware of prevention and treatment opportunities



Coconino County Community Public Health



TGC also reviewed the Coconino County Public Health Department's strategic plan which was developed to address the specific actions the county would take in response to the CHIP.

- Elements of the plan, relevant to TGC's mission, included streamlining the Title-36 process to increase access to care.

DBHS FY 2014 Annual Report



Department of Behavior Health Service (DBHS) data indicates continued concerns regarding co-occurring substance abuse and mental illness.

- 2014 Annual Report on Substance Abuse Treatment Programs
 - Co-occurring substance abuse and Serious Mental Illness (SMI)
 - 31.2% of substance abuse treatment recipients had a co-occurring Serious Mental Illness
 - 22.1% of substance abuse treatment clients had a co-occurring General Mental Health Disorder



In TGC's previous CHNA, the following information was obtained related to suicide rates in Coconino County:

- Coconino County suicide rate has consistently been above both state and national rates over the past decade at 18.1 deaths per 100,000 people
- Among adults diagnosed with depression, 93% acknowledge they have sought professional help which is higher than national average
- Group participants indicated an inadequate number of psychiatrists and treatment facility options and the need to “act out” in order to receive treatment

Arizona Health Matters continues to report 2013 data consistent with prior findings:

- Age adjusted death rate due to suicide = 17.7/100,000 population (25-50% percentile, compared to AZ state average of 17.0)



TGC contacted the Flagstaff Police Department to obtain information on their experience in dealing with individuals with mental illness. Specifically they were asked to provide information related to the following questions :

- When dealing with a subject with an obvious mental illness committing a crime, what difficulties do the police experience in obtaining mental health assistance/resources for the subject?
- When dealing with a subject with an obvious substance abuse issue committing a crime, what difficulties do the police experience in obtaining substance abuse treatment resources for the subject?



The Flagstaff Police Department provided the following feedback:

- For subjects with a mental illness, the Title-36 option is most often used. The FPD indicated this process is “constantly evolving”, which is addressed in the Coconino County Public Health Department’s strategic plan.
- For subjects with substance abuse, the process is straightforward and includes arrest leading to recommended or mandated treatments.



The FPD indicated a concern regarding the vulnerability of people with mental illness. They noted many subjects they work with are the victims of violent crime and/or exploitation.

FPD indicated there is an issue in the community around elder abuse. However, the problem is under-reported, frequently due to the victim's many fears including reporting a loved one and potential loss of care provider, and risking increased violence.



TGC discussed the issue of domestic violence with the Coconino County Sherriff's Office. They indicated they are currently compiling data, however it will not be available in time for TGC to use in this report.

- TGC will include domestic violence statistics in upcoming CHNAs.



TGC's Consumer Advisory Board



TGC Consumer Advisory Board provided insight into the primary concerns faced by the people most likely to need TGC services

- Comprised of individuals who receive services through the TGC Adult Services department and all suffer from mental illness.
- Meets monthly to provide insight into the issues faced by individuals dealing with mental health illness.



TGC's Consumer Advisory Board



Primary concerns:

- Connection with providers
 - Tele-medicine services provide access to care, however these services can result in the loss of an authentic connection with a provider.
 - Tele-medicine services are acceptable, but not optimal.
- Homelessness, including family homelessness
 - Adequate bedding is a sub-issue of homelessness.
 - Bedbugs and other vermin are a significant issue, making clean bedding difficult to obtain on a low-income.
- Food insecurity
 - This causes broader health issues of malnutrition, obesity and diabetes.



TGC's Consumer Advisory Board



Primary concerns:

- Lack of placements such as group homes
 - Results in relocation to an unfamiliar area away from natural supports.
- A lack of meaningful work
 - Due to both stigma and community economical issues
 - Ex: An unintended outcome of the Affordable Care Act is hesitation to hire someone with a known health issue for fear of raising insurance costs to their business. While it is illegal to inquire of an applicant's health status, employers often do ask, and sometimes the disability is obvious or perceived. Many available jobs are low-paying service jobs, due to Flagstaff's tourism economy.
- Lack of coordination of services
- Lack of knowledge of services



Primary concerns:

- A history of forced relocation and cultural trauma
 - Particularly true with the Native American population
 - Results in difficulty when attempting to transition from the reservation to a border town, such as Flagstaff.
 - Struggles include a lack of skills necessary to succeed off of the reservation.
- Coverage for services
 - The Affordable Care Act has increased the number of people with a pay-source for health care, not all coverage is equal.
 - For example: Arizona Health Care Cost Containment System (AHCCCS, AKA as Medicaid) provides more services than Medicare resulting in continued difficulties in accessing services.



Prior CHNA Feedback



The Guidance Center did not receive any written comments on the CHNA report issued June 30, 2013 or the related implementation strategy.



Activities Based on Prior CHNA



TGC has engaged in the following activities as a result of the prior CHNA

- Participated in an on-going community based group called “closing the gap” addressing chronic substance abuse & homelessness.
- Increased programming provided in the Alcohol Stabilization Unit
- Completed a feasibility study regarding provision of medical detox in TGC’s Psychiatric Acute Care unit (PAC)
- Obtained grant funding to provide adolescent substance abuse prevention in Coconino County.
- Implemented Crisis Intervention Team training for area law enforcement officers

Activities Based on Prior CHNA



TGC has engaged in the following activities as a result of the prior CHNA:

- Increased Mental Health First Aid classes to TGC's non-clinical staff, local law enforcement and other interested parties
- Created a marketing department to increase the community's recognition and knowledge of resources for assistance, including services provided by TGC

Conducting the Assessment



The information gathered through the various sources was analyzed and discussed internally and in conjunction with the process developed during the Coconino County Public Health Services District process to identify specific needs in the community related to mental health issues. These were also compared to the work that is already being conducted as part of the prior implementation strategy.

Despite the efforts of TGC and relevant stakeholders, changes to the rates of substance abuse, violent crime and suicide have not been seen. This may be due to the short time-frame since the previous CHNA and a lack of available updated statistics. More likely, the issues identified are systemic and complicated, requiring more time before seeing substantial change.



Results



The following mental health and behavioral health needs continue to exist for the community, presented in rank order based on the issues of greatest significance and those with the biggest potential impact:

1. Mental Health driven issues
 - Substance Abuse
 - Suicide prevention
 - Violent crime prevention
2. Availability of services
 - Medically Monitored Detox services
3. Awareness
 - Information on resources available
 - Recognition of symptoms and the need for help



Next Steps



The Guidance Center will adopt an organization specific implementation strategy in response to the Community Health Needs Assessment report. The implementation strategy will be developed by management and will be approved by the Board of Directors on an annual basis. The implementation strategy will build off the actions already taken by TGC along with others in the community.

The Guidance Center will continue to work with the other resources in the community addressing mental health issues:

- Coconino County Public Health Services District
- Reservation Resources
- Schools
- Law Enforcement



Community Contact Information for CHNA



Community members who would like to provide input on the next CHNA process, or would like to provide feedback on the results of the assessment are encouraged to contact The Guidance Center with their inquiries, suggestions or comments.

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