

# Tribal Care Coordination Dashboard: Coeur Adolescent Support Team (CAST) Intake & Referrals

Strategies to Achieve Alignment, Collaboration and Synergy across Delivery and Financing Systems



Research-in-Progress Webinar May 8, 2024 12pm ET

colorado school of public health

## Agenda



Welcome: Systems for Action

Presenters: Elva "Cookie" Allan (CdA Tribe), Marquette Hendrickx (CdA Tribe), Christina Oré (U of WA), Myra Parker (U of WA), and Rhea Jansen (CdA Tribe)

Commentary: Joey Buckner (CdA Tribe)

**Q&A:** Systems for Action



### **Presenter Bios**





**Elva "Cookie" Allan** has worked for the Coeur d'Alene Tribe since 1999, served as the Director of the Strategic Initiatives & Development Office and is the PI for the S4A Tribal Care Coordination Dashboard Project. She is currently working as a project consultant and seeking to complete a PhD program in Education at the University of Idaho. Her work is aimed at building internal and community capacity. Ms. Allan has worked as an advocate for Latino and Native American issues. Priority issues have been education, public health and safety, systems alignment, comprehensive and strategic planning, and Indigenous data sovereignty.



**Marquette Hendrickx**, a member of the Coeur d'Alene Tribe, works as the Director of the Strategic Initiatives & Development Office. Marquette has dedicated her career to expanding and improving healthcare on the Coeur d'Alene Reservation. Marquette is most proud of the role she played in advancing behavioral health access and services on the reservation through increased children's services, medication assisted treatment (MAT), reentry programming, and traumainformed care

### **Presenter Bios**





Myra Parker, PhD
Director, UW Seven Directions

Associate Professor, Department of Psychiatry and Behavioral Sciences, University of Washington Dr. Parker is an enrolled member of the Three Affiliated Tribes, originally from the Fort Berthold Indian Reservation in North Dakota. She is Mandan and Hidatsa on her mother's side and Cree on her father's side. Dr. Parker has worked in American Indian and Alaska Native public health for over fifteen years, first in health policy and then as a researcher. Her research focuses on cultural adaptation of evidence-based interventions at the individual, family, and community levels.



Christina E. Oré, DrPH
Associate Director, Seven Directions, University of Washington

Acting Assistant Professor, Center for the Study of Health and Risk Behavior (CSHRB), UW School of Medicine. She is lead/co lead on Indigenous systems strengthening projects. Dr Oré has worked as in public health practice and research serving Native Nations and Indigenous health organizations/entities for over twenty years. She is also an associate member of the Collaboratory for Indigenous Data Governance, Udall Center, Univ of AZ.

### **Presenter Bios**





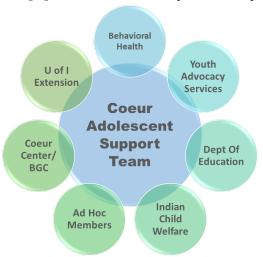
**Joey Buckner** is the Wellbriety Services Manager for Marimn Health with the Coeur d'Alene Tribe and is the interim facilitator of the Coeur Adolescent Support Team (CAST). She is a member of the Coeur d'Alene Tribe and has worked for Marimn Health for 10+ years. Joey is passionate about opening doors through her work for youth and families seeking stability and wellness. She is a proud mother and grandmother and is grateful for the opportunity to serve her community.

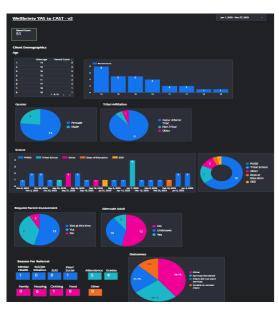
**Rhea Jansen** has worked for the Coeur d'Alene Tribe since 2021 first as a college intern and mentor with the Departments of Education and Natural Resources. After completing her bachelor's degree from Gonzaga University in biology and environmental studies and minors in English and political science, she has served as the data analyst for the Office of Strategic Initiatives and Development. Her focus is in systems alignment.

### **Brief Summary - Tribal Coordination Dashboard Project**



Coeur Adolescent Support Team (CAST) Dashboards





### **Project Goal**

The project aims to study how tribal organizations can create and implement an Indigenous youth care coordination dashboard aimed at improving access to health and wellness services for youth, using a tribally aligned (public health & safety, social, & education services) intake and referrals system. The project will support community leaders and service staff in accessing real-time data and information to optimize decision making.

## Tracking of Services for Youth at Risk



#### **Background:**

12-17 year olds not being served by ICWP/Child Protection Team TCC Data - Schools, community, DOE showed that youth still needing help Creation of CAST (Marimn Wellbriety, BGC, BH, SID, ICW, DOE, Courts, & Schools)

#### **Problem:**

- No universal application
- No formal referrals system or process
- No established data system for status/information of clients
- Tribal Leadership unable to see what services have been provided to youth

#### **Proposed Solution:**

- → Create universal application & referrals system for CAST & partners (and is scalable)
- → Create a Dashboard for Tribal leadership and service providers to have up-todate information

## **Pilot Study - Original Research Questions**



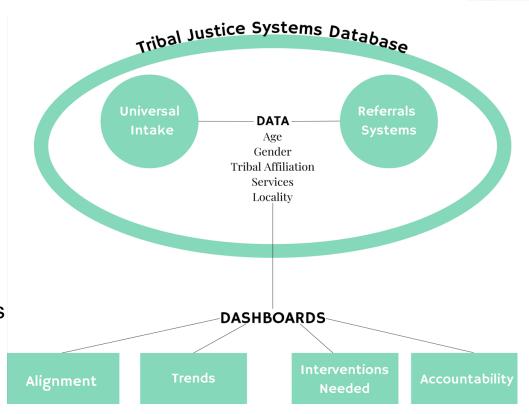
- 1. Will a youth care coordination dashboard intervention improve access and use of care services for Coeur d'Alene tribal youth (individual level)?
- 1. What are the facilitators and barriers to its implementation within the Coeur d'Alene Tribe's public health, behavioral health, and social service programs (systems level)?



## **Study Aims**

S4A Systems for Action

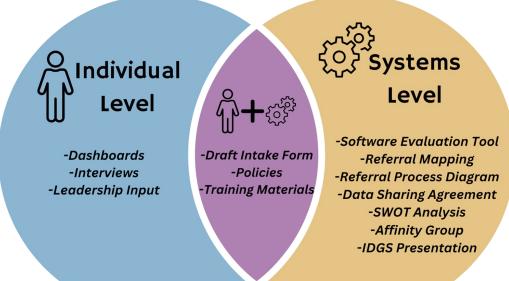
- 1. Design and map the CDA Tribe's intake and referral system and support network.
- Establish the indicators to be included in the CDA Tribe's Dashboard, develop dashboards.
- Research of other tribal/non-tribal referral systems to inform or use as a model for the CDA Tribal referral system.





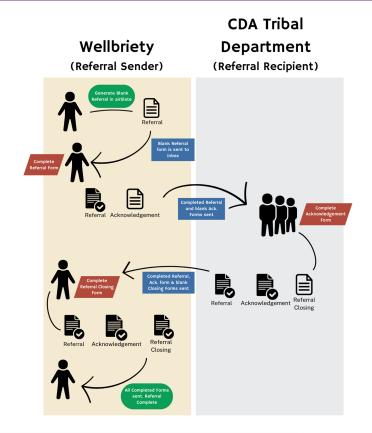
Q1- Will a youth care coordination dashboard intervention improve access and use of care services for Coeur d'Alene tribal youth?

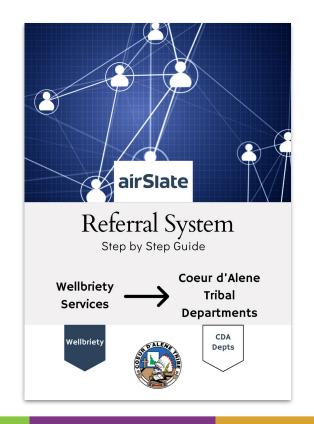
Q2- What are the facilitators and barriers to its implementation within the Coeur d'Alene Tribe's public health, behavioral health, and social service programs?



#### ~ Process Diagram & Training Manual

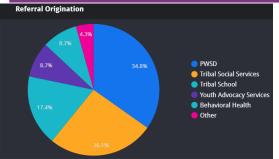




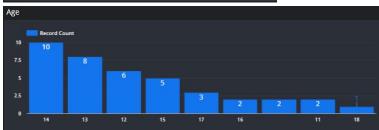


~ Dashboards





Coeur Adolescent Support Team (Operational- November, 2022) Total of 64 Referrals



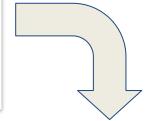




### Actions & Deliverables ~ Evaluation Tool & SWOT Analysis



ibal Collaborat	ion Committee <u>Data</u>	System Evaluation Tool	Charity Tracker	DocMgt	apricot
	System functionality: Database possesses critical func	tions to meet department needs	Rank Eac	:h Category	(1=Best)
	1. Best: Referrals are streamlined, trackable, with account	ability and failsafe's in place, i.e. automatic reminders			
	and notifications. The system streamlines the referral pro	cess, making it easier and faster to connect clients with			
Efficiency of	the services they need.				
Referrals	2.OK: Referrals can be made, but without all functions ab	ove.			
	3. Caution: Referrals are difficult to make or they are not	trackable.			
	4. Unacceptable: Referrals can be documented but not se	nt outside the software			
	1. Best: The system offers an intuitive and user-friendly in	terface; quick and easy to learn and use.			
User-Friendly	2.OK: Requires some technical experience or additional to	aining and usage to learn and feel comfortable using			
Interface	3. Caution: Requires advance technical experience, rules a	re not clear and consistent.			
	4. Unacceptable: Not user friendly.				



\*adapted from NNEDV's "Database Review Chart"

#### **Main Areas Assessed**

- System Functionality
- Data Collection & Retention
- Ownership of Data
- Access to Data
- Data Security
- Training, TA and Support
- Cost

Streng	ths, Weaknesses, Oppor	rtunities, and Threats Ai	nalysis						
Strengths									
Charity Tracker	DocMgt	apricot	airSlate						
Centralized Database and Case Management: Centralized platform for tracking and managing cases, linking based on family/groups	Comprehensive Document Management: Manages documents efficiently, allowing for easy storage, retrieval, and organization of case files and related documents	Tailored for Social Services: Features are tailored to track outcomes, manage cases, and report on the effectiveness of programs, aligning well with the needs of a referral system	Automation Capabilities: Allows for automated workflows that can streamline the referral process						
Real-Time Collaboration: Supports real-time collaboration between different programs, which is essential for effective communication and referral management. Bulletin board feature available	Workflow Automation: This feature streamlines processes and reduces manual tasks. Customizable workflows for the tailoring of processes to meet specific job roles or case requirements	Comprehensive Data Management and Reporting: Collects, analyze, and report on data across various programs. This can be invaluable for tracking the effectiveness of referrals, understanding service utilization	Flexibility and Customization: AirSlate offers a high level of customization, allowing organizations to tailor workflows to their specific needs						

~ Data Sharing Agreement



#### **Departments Involved**

	Entity/ Sector	Marimn Health	Law & Order	Social Services	Dept of Education	Tribal School	CDA Tribe
	Department/ Program	Medical, Behavioral Health, Wellbriety, Coeur Center, BGC	Police, Courts, Prosecution, Probation, Public Defender	Indian Child Welfare, Career Renewal, TANF, Foster Care, STOP Violence	ECLC, Higher Ed, High School, GED	Coeur d'Alene Tribal School leadership, counselors and other staff	Strategic Initiatives & Development, Leadership
Indicators	Data Indicators: Provided at least semi- annually	# BH/YAS youth clients, visits, youth substance use diagnoses, youth suicide ideation, referrals to CAST, top client needs, i.e. housing, food, clothing, etc	# Juvenile charges, juvenile probation #s	# Cases involving youth 12-17, and reasons for case, i.e. drugs and alcohol, DV, etc	Afterschool programming #s, Behavior Intervention #s,	Enrollment, attendance/ truancy, # referrals	

\*A separate DSA/MOU will be drafted for the public school

~ Affinity Group & IDS Summit





- Round table presentation at the US Indigenous Data Sovereignty & Governance Summit
- Continuing to build interest and participation in the Tribal Data Affinity Group
- LEADERSHIP PARTICIPATION
  - Tribal Council/Tribal Leadership attendance and participation in summit workshop
  - TCC involvement

## **Direct Service Impact - Commentator**

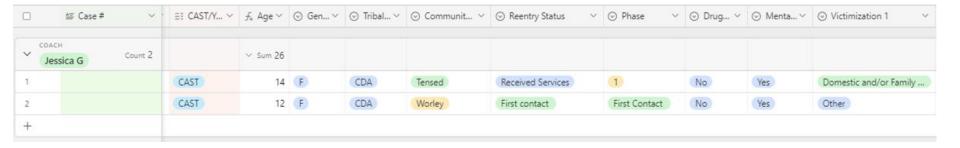


### Improved:

- Data collection
- Program data visibility and usage
- Staff accountability
- Case management
  - Referral tracking

### Still working on:

- Outcomes
- Multiple software systems
- External referrals



## Our Findings: Demographics

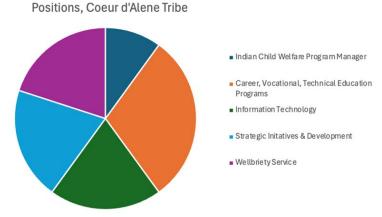


User - Community members n=10

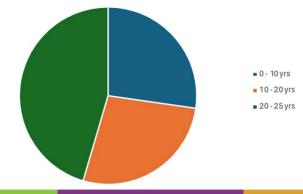
Tribal Affiliation:
60% Coeur d'Alene Tribe

Age range: 80% 40 - 59 yrs

Gender: 90% Female







## Our Findings: Piloting Tribal Data System



### **User Experience - Facilitators & Barriers -**

Aligning model & emerging best practices for action

- Community member > User
  - Long-term collaboration & Shared Purpose
- Team learning
  - Universal Intake & Release of Information
- Technology & Data
  - Referral Systems & Dashboard Challenges

## Our Findings: Preparing for impact study



### **Potential Impact for Adolescents**

- Data, Systems, & Community Connection
- CAST Team Model
- Tribal Leadership Support and Involvement
- Data Sharing Agreement

## What we are still working on...



- Leadership feedback Pt 2
- Software Decision / Funding
- Training
- Software Roll out to other entities
- Evaluation Development Plan
- Expand conversations with other Tribes with similar issues
- Continued research needed in Indigenous communities, and preferably by Indigenous researchers



### Conclusion



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Thank You!

## **Questions?**



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One will be emailed to you.

## Next ResProg Webinar



## <u>Achieving Reach in Youth Behavioral Health and Wellness</u> <u>through Catchment-Area Community Governance</u>



Wednesday, May 22 | 12pm ET

## **Acknowledgements**



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Robert Wood Johnson Foundation

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