Good Health and Wellness in Indian Country: Community-Clinical Linkages

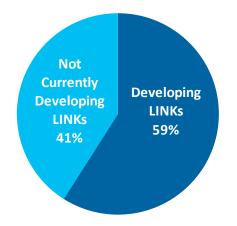


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What are Community-Clinical Linkages? Community-Clinical Linkages are LINKs between the community and clinical sectors aimed at improving population health. In a tribal setting, this may look like a tribe and a local tribal health program creating a LINK to serve community members. The community sector includes "community wide efforts that impact the social and built environments, such as improving food access, walkability or bikeability, tobacco use and exposure, or personal safety." The clinical sector includes "places where people go to receive preventive care or treatment, or emergency health care services, such as hospitals, private doctors' offices, and community clinics."

Goals of Community-Clinical Linkages:

- 1. Form partnerships
- 2. Coordinate care delivery
- 3. Promote patient, family, and community involvement
- 4. Track patients across sectors to ensure positive change occurs
- 5. Share resources across sectors
- 6. Improve population health



How many ACORNS grantees are currently developing Community-Clinical Linkages? Over half of ACORNS grantees (59%; 13 of 22) indicated they are currently developing policies or programs to increase **LINKs**.² Among those grantees developing **LINKs**, 77% (10 of 13) are doing so in *Work* and/or *Tribal Settings*. Furthermore, many grantees (39%; 5 of 13) are already in the process of *implementing* **LINKs**, while others (31%; 4 of 13) are working to *formulate* or *adopt policies*. The remaining 31% (4 of 13) of ACORNS grantees are still in the process of *defining the problem* or *setting an agenda* for **LINKs**.

Strengths of LINKs for ACORNS Grantees

Tribal and volunteer support
Community buy-in
Community Health Representatives

Challenges of LINKs for ACORNS Grantees

Staff and client resistance to change
Lack of transportation
Limited staff and client availability across sectors

Call to Action

Among ACORNS grantees who indicated they are not currently developing **LINKs**, 89% (8 of 9) said they would like to develop **LINKs** in the future.





¹ Centers for Disease Control and Prevention. Change Tool Healthy Communities Program. http://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/change.htm. Accessed March 22, 2016.

² ACORNS Quarterly Report. January 2016. Grant Contact: Virginia Hedrick. http://crihb.org/acorns.

Tips for Developing a Examples from Community-Clinical Linkage ACORNS Grantees ⇒ Identify the health problem(s) and ⇒ Utilize the **CHANGE** Tool and coordination needs of people served Community Action Plan to make a plan Set an ⇒ Identify a potential relationship ⇒ Network with nearby Diabetes support Agenda across sectors to LINK people in services to **LINK** the local tribal health need program and community resources ⇒ Set up systems for referral and ⇒ Provide culturally informed nutrition tracking of people served across physical activity courses for sectors students at risk for chronic diseases Build & ⇒ Recognize health outcomes ⇒ Teachers may **LINK** students to the interest and how to measure these **Partner** school nurse to track student height, outcomes using data weight, and blood pressure monthly ⇒ Establish necessary Memoranda of **Understanding** ⇒ Refer diabetic patients to get blood drawn and to meet with RN who then **LINKs** the patient to food and exercise classes in the community **Implement** ⇒ Start linking, referring, tracking, and ⇒ Have RN provide educational support as sharing across sectors! & Track necessary ⇒ Have RN track lab results monthly and share lab results and class attendance with health program staff and physicians

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