



CHRISTUS®
Foundation for HealthCare

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Project CHANGE Director

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Community Outreach HP Coordinator

CHRISTUS Health Plan/USFHP



Questions?

Please use the chat feature.

There will be a Q&A when all presentations are complete!



Addressing Mental Health Needs and Health Care for the Uninsured and Underserved



History of CHRISTUS Foundation for HealthCare



1866

First three Sisters of the Sisters of Charity of the Incarnate Word arrive in Galveston from France at urging of Bishop Claude Dubuis to extend healing ministry of Jesus Christ to sick and infirm of every kind.

1887

Sisters open St. Joseph's Infirmary, Houston's first general hospital.

1999

Healthcare systems of the Sisters of Charity of the Incarnate Word - Houston and the Sisters of Charity of the Incarnate Word - San Antonio combine to form CHRISTUS Health in 1999, which included St. Joseph's Hospital.

2005

St. Joseph's Hospital is sold, and St. Joseph's Foundation becomes CHRISTUS Foundation for HealthCare. Focus shifts to medical outreach and social services for the uninsured and underinsured.



Programs



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CHRISTUS Operation San José (Est. 1983)

- Annual 10-day mission trip to areas in Latin America
- All surgeries free of cost
- Team of 20+ medical volunteers

CHRISTUS Our Daily Bread (Est. 1986)

- 28,000+ meals prepared
- 5,400+ volunteer hours donated
- Narcotics Anonymous and mental health counseling services

CHRISTUS Point of Light Clinic (Est. 1989)

- 5,600+ patient encounters
- Preventive and restorative health services
- Prescription assistance and nutrition counseling

CHRISTUS Healthy Living Mobile Clinics (Est. 1993)

- 30,000+ patient encounters
- 400+ sites visited annually
- 7,300+ vision and hearing screenings

CHRISTUS School Clinics (Est. 1997)

- 12,000+ student encounters
- 800+ state-mandated screenings
- Manage illness and ongoing conditions

CHRISTUS St. Mary's Clinic (Est. 2011)

- 23,500+ patient encounters
- Preventive and restorative health services
- Prescription assistance and nutrition counseling

CHRISTUS Learning Center (Est. 2018)

- ABE, GED, ESL, and basic computer skills & citizenship classes
- 3,600+ students encounters
- Students from Latin America, Russia, Ukraine, Iran, China, U.S. and more





Addressing Mental Health In Our Communities



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- Mental health is just as important as medical care for underserved communities
- COVID-19 has made it more of a pronounced issue
- Demand for mental health care in our service areas
- Currently partnered with Krist Samaritan to provide mental health services at CHRISTUS Point of Light Clinic and CHRISTUS Our Daily Bread
- Currently partnered with Catholic Charities to provide mental health services at CHRISTUS St. Mary's Clinic and CHRISTUS School Clinics
- Physicians at both clinics oversee initial screenings for mental health, and patients are then referred for in-office treatment with counselors





East End Community Collaborative



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- Spring 2019 awarded a \$800,000 grant from Hogg Foundation for Mental Health
- 5-year grant to support launch of East End Community Collaborative in partnership with Sisters of Charity of the Incarnate Word – Houston, SER Jobs for Progress, El Centro de Corazon, Community Family Centers and East End Unidos
- Collaboration offers a systematic approach towards addressing social determinants of health in East End community
- Will make a significant impact on wellbeing of residents, especially children, who may be impacted by factors related to poor mental health





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To learn more about our mission and programs:

CHRISTUS Foundation for HealthCare

713.652.3100

www.christusfoundation.org



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Chantel Hemphill, LCSW

Suicide Prevention Coordinator

Michael E. DeBakey VA Medical Center



IT'S YOUR CALL

Chantel Hemphill, LCSW
Suicide Prevention Coordinator
Michael E. DeBakey VA Medical Center
713-794-7002



**U.S. Department
of Veterans Affairs**

**Veterans
Crisis Line**



1-800-273-8255
PRESS 1

VeteransCrisisLine.net
or text to **838255**

Confidential help for Veterans and their families and friends

Objectives

By participating in this training you will:

- Have a general understanding of the scope of suicide within the United States
- Know how to identify a Veteran that may be at risk for suicide
- Know what to do when you identify a Veteran at risk

Suicide in the United States

- **47,173** U.S. deaths from suicide per year among the population overall (2017) On average, there are 129 suicides a day.
- **19,510** U.S. deaths from homicide per year
 - Less than 1/2 the number of annual suicides
- Suicide is the **10th** leading cause of death in the U.S. (14.5 per 100,000)
- Homicide is the **16th** leading cause of death in the U.S (6 per 100,000)

[Drapeau, C.W. , & McIntosh, J. L. (for the American Association of Suicidology), (2018)]

Suicidal Behavior

- **Gender:** Men take their lives 3.5 times the rate of women
 - Women are 3 times more likely to attempt suicide

[Drapeau, C.W. , & McIntosh, J. L. (for the American Association of Suicidology), (2018)]
- **Age:**
 - 15 – 24 y/o: Suicide is 2nd leading cause of death
 - 25 – 34 y/o: Suicide is 2nd leading cause of death
 - Persons aged 65 years and older have an increased risk for suicide

[Drapeau, C.W. , & McIntosh, J. L. (for the American Association of Suicidology), (2018)]

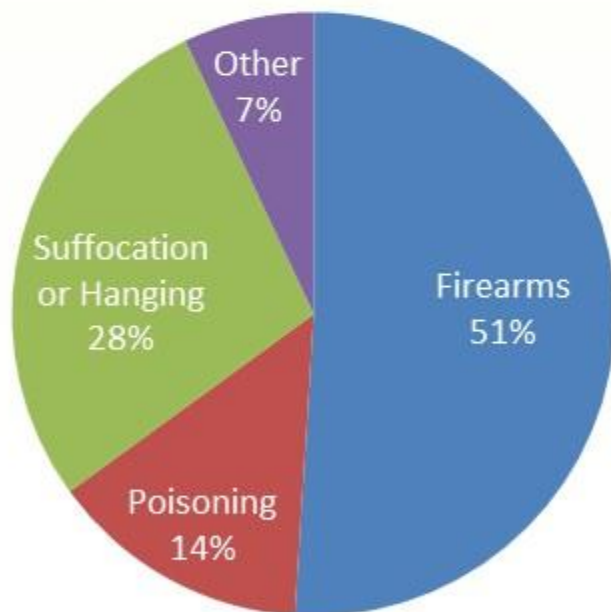
Veteran Suicide Data

Veterans may be at even greater risk than those in the general population

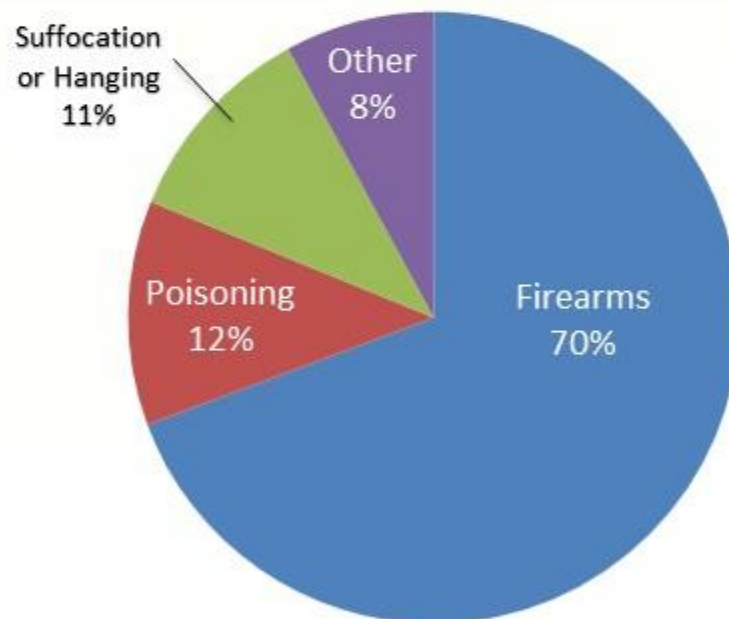
- 18% of suicide deaths are Veterans (National Violent Death Reporting System)
- 8.5% of the US Population are Veterans
- 20.6 suicides per day are Veterans, Active Duty Service Members, Guard and Reserve (National Violent Death Reporting System)
- ~ 6 suicides per day among Veterans receiving care in VHA (VA Serious Mental Illness Treatment, Research and Evaluation Center)
- ~ 70% of Veterans that die by suicide are not engaged in care with the VA
- In 2014, about 68% of all Veteran who died by suicide were ages 50 and older

Methods of Suicide

US Suicides



Veteran Suicides



[Drapeau, C.W., & McIntosh, J. L. (for the American Association of Suicidology), (2018)]

Typical Myths and Realities

Myth or reality: Asking about suicide may lead to someone to taking his or her life.

Reality: Asking about suicide does not create suicidal thoughts. The act of asking the question simply gives the Veteran permission to talk about his or her thoughts or feelings.

Typical Myths and Realities

Myth or reality: He/she really wouldn't die by suicide because...

- he just made plans for a vacation
- he made a verbal or written promise
- she knows her family loves her

Reality: The intent to die can override any rational thinking. Someone experiencing suicidal ideation or intent must be taken seriously and referred to a clinical provider who can further evaluate their condition and provide treatment as appropriate.

Operation S.A.V.E.

Operation S.A.V.E. will help talk with a Veteran in crisis and respond if needed.

- Signs of suicidal thinking can be recognized
- Ask the most important question of all
- Validate the Veteran's experience
- Encourage treatment and Expedite getting help

Signs of Suicidal Thinking

Important Warning Signs

- Hopelessness
- Rage, anger
- Strong feelings of guilt
- Anxiety, agitation
- Seeking revenge
- Acting reckless or engaging in risky activities
- Feeling trapped
- Increasing drug or alcohol abuse
- Withdrawing from friends, family and society
- Dramatic changes in mood
- No reason for living, no sense of purpose in life
- Difficulty sleeping or sleeping all the time
- Giving away possessions

Asking the Question

- Know how to ask the most important question of all...

“Are you thinking about killing yourself?”

- Are you thinking of suicide?
- Have you had thoughts about taking your own life?
- Are you thinking of ending it all?

Asking the Question

DO ask the question if you've identified warning signs or symptoms

DON'T ask the question as though you are looking for a "no" answer

- "You aren't thinking of killing yourself are you?"

DON'T wait to ask the question when he/she is halfway out the door

Validate the Veteran's experience

- Talk openly about suicide.
- Allow the Veteran to express his or her feelings
- Acknowledge the Veteran's feelings.
- Do not pass judgment or argue
- Use supportive, encouraging comments
- Reassure that help is available

Encourage treatment, and expedite getting help.

- If there is immediate danger, call 911 or the Veterans Crisis Line number **1-800-273-8255 and Press 1**
- Veterans Crisis Line brochures and wallet cards



Resources

Mental Health

- ***MakeTheConnection.net*** is a one-stop resource where Veterans and their families and friends can privately explore information about physical and mental health symptoms, challenging life events, and mental health conditions. On this site, Veterans and their families and friends can learn about available resources and support. Visit www.MakeTheConnection.net to learn more.
- For more information on VA Mental Health Services, visit www.mentalhealth.va.gov

Vet Centers

- Vet Centers are VA community-based centers that provide a range of counseling, outreach, and referral services.
- For more information about Vet Centers and to find the Vet Center closest to you, visit www.vetcenter.va.gov

There's an App for That! (VA Virtual Hope Box)



Remind Me: Store supportive photos, videos, recorded messages, music

Distract Me: Sudoku puzzles, photo puzzles, word search, mahjong solitaire

Inspire Me: Inspirational quotes

Relax Me: Controlled breathing, muscle relaxation, guided meditation

Coping Tools: Coping cards and positive activity planner

Support Contacts: Quick access to preselected contacts



Post-Traumatic Stress Disorder (PTSD)

- Each VA medical center has PTSD specialists who provide treatment for Veterans with PTSD. For more information about PTSD and to locate the VA PTSD program nearest you, visit www.ptsd.va.gov
- PTSD Coach app: The PTSD Coach app allows mobile users to manage their symptoms, links them with local sources of support, and provides information on PTSD. Visit www.ptsd.va.gov/public/materials/apps/PTSDCoach.asp

Important Numbers

- Suicide Prevention Coordinators:
713-794-7002
- To initiate Mental Health Care:
713-794-8454
- VETERANS CRISIS LINE
1-800-273-TALK or
1-800-273-8255, Press "1"

VA Behavioral Health

- Outpatient Counseling (mental health & substance use)
- Psychosocial Rehabilitation & Recovery Services (day program)
- Mental Health Intensive Care Management
- Vocational Rehabilitation Services
- Homeless & Housing Services
- Chaplain Services
- Inpatient psychiatric hospitalization

VA Behavioral Health

Locations:

- Michael E. DeBakey VA Medical Center
 - 2002 Holcombe Blvd. Houston, Texas 77030
- Community Based Outpatient Clinics
 - Beaumont, Conroe, Galveston, Lake Jackson, Lufkin, Katy, Richmond, Texas City, & Tomball

Eligibility:

- Veteran must meet VA health care eligibility criteria established by Congress.



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Sarah Strang MEd., LPC

Mobile Crisis Outreach Team (MCOT) Program Director

Project CHANGE Director



Mobile Crisis Outreach Team (MCOT)

Sarah Strang, MEd, LPC
Program Director

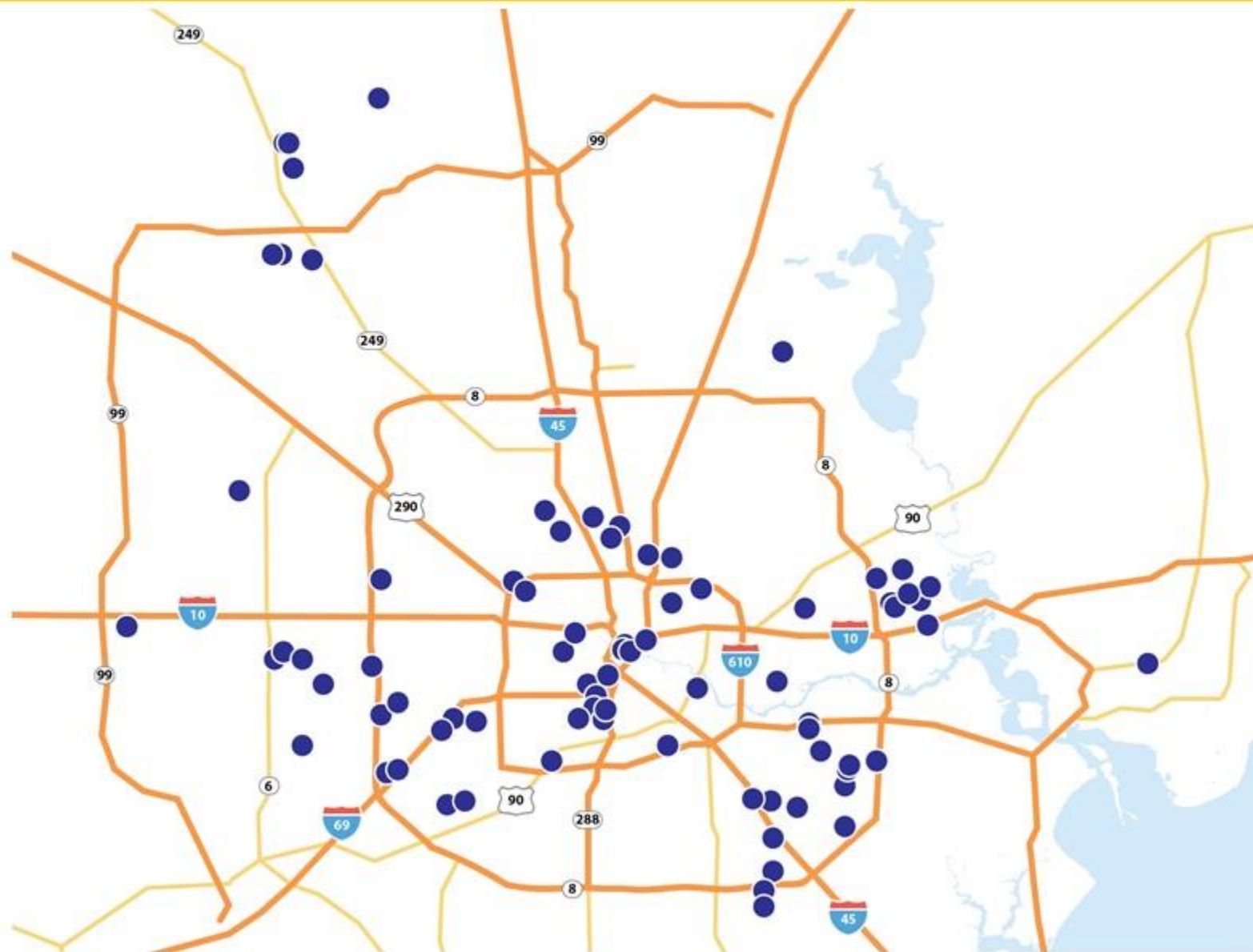
The People We Serve



21.8K Adult Mental Health	5K Children/Adolescent Mental Health	21K IDD & Autism
17K Psychiatric Crisis	4K Forensic Mental Health	19K Harris County Jail
274K+ Prescriptions Filled	126K Crisis Line Calls	1.8K Diverted from Jail

80% of the people we serve have household incomes at or below the Federal Poverty Level.

Map of The Harris Center's Sites



We have 2,400 team members who provide care in 86 locations throughout Harris County.

30% of our services are delivered where people live, work or go to school.

Who Are We?

MCOT Goal Statement:

- Rapid community-based crisis response and assessment to establish safety and provide interventions, skills training, and resources to restore balance, promote self-reliance, and increase support systems.

Who Are We?

Our Team:

- The **Mobile Crisis Outreach Team (MCOT)** is an interdisciplinary mobile team comprised of Psychiatrists, Licensed Master's Level Clinicians, Bachelor Level Clinicians, and Psychiatric Technicians specializing in crisis intervention.
- MCOT provides services anywhere throughout the community in Harris County.
- MCOT has two office locations.
 - Midtown: 2627 Caroline St. Houston, TX 77004
 - Southwest: 9401 Southwest Freeway Houston, TX 77074

Who Do We Serve?

Our Clients:

- All residents of Harris County willing to voluntarily accept MCOT services.
- MCOT provides services to children and adults who are experiencing a mental health crisis. Including:
 - Clients who are in a mental health crisis but unable to and/or initially unwilling to access services through a traditional psychiatric outpatient hospital.
 - At risk for hospitalization without immediate intervention.
 - Not in acute crisis but in need of outreach services to prevent further deterioration and to ensure linkage to appropriate services and community services.

Our Services

Emergent:

- Emergent referrals are engaged face to face for a crisis intervention and assessment within 1 hour from the time of the referral.

Urgent:

- Urgent referrals are engaged face to face for a crisis intervention and assessment within 8 hours from the time of the referral.

Our Services

Crisis Prevention:

- Crisis Prevention referrals are engaged face to face for a crisis intervention and assessment within 24 business hours from the time of the referral.
- Clients are seen weekly for approximately 4 weeks in order to establish linkage to long term mental health services.
- Clients can be seen in their home, school, or a variety of community settings.
- Routine case management hours are Monday-Friday 7am-10pm.

Referral Process

All Referrals:

- Referrals can be made by anyone and any organization.
- MCOT is open 24 hours a day, 7 days a week.
- Referrals are made by calling The Harris Center Crisis Line.
- If you or someone you know is experiencing a mental health crisis, please contact The Harris Center Crisis Line. Crisis Line Specialist will determine if a MCOT referral can benefit you.
 - Crisis Line Telephone: 713-970-7000 & press option #1

Financial Responsibility

Client financial responsibility:

- Private Insurance is accepted at The Harris Center.
- For clients without insurance, financial assistance is provided for services based on a sliding scale.
 - Clients and/or their families will need to apply for financial assistance with the help from The Harris Center staff.
 - Financial is active for 1 year.

Financial Responsibility

HEALTH AND HUMAN SERVICES COMMISSION LOCAL INTELLECTUAL AND DEVELOPMENTAL DISABILITY AUTHORITY MONTHLY ABILITY-TO-PAY FEE SCHEDULE

Title 40 TAC, Part 1, Chapter 2, Subchapter C

Effective March 1, 2019

Annual Gross Income	Monthly Gross Income	Maximum Monthly Fee By Family Size									% monthly income family size 1
		1	2	3	4	5	6	7	8	9+	
12,490	1,041	0	0	0	0	0	0	0	0	0	
18,735	1,561	39	0	0	0	0	0	0	0	0	2.50%
20,945	1,745	46	0	0	0	0	0	0	0	0	2.66%
23,155	1,930	54	0	0	0	0	0	0	0	0	2.82%
25,365	2,114	63	39	0	0	0	0	0	0	0	2.98%
27,575	2,298	72	46	0	0	0	0	0	0	0	3.14%
29,785	2,482	82	54	0	0	0	0	0	0	0	3.30%
31,995	2,666	92	63	39	0	0	0	0	0	0	3.46%
34,205	2,850	103	72	46	0	0	0	0	0	0	3.62%
36,415	3,035	115	82	54	0	0	0	0	0	0	3.78%
38,625	3,219	127	92	63	39	0	0	0	0	0	3.94%
40,835	3,403	140	103	72	46	0	0	0	0	0	4.10%
43,045	3,587	153	115	82	54	0	0	0	0	0	4.26%
45,255	3,771	167	127	92	63	39	0	0	0	0	4.42%
47,465	3,955	181	140	103	72	46	0	0	0	0	4.58%
49,675	4,140	196	153	115	82	54	0	0	0	0	4.74%
51,885	4,324	212	167	127	92	63	39	0	0	0	4.90%
54,095	4,508	228	181	140	103	72	46	0	0	0	5.06%
56,305	4,692	245	196	153	115	82	54	0	0	0	5.22%



Contact Information

Sarah Strang, MEd, LPC

Email: sarah.strang@theharriscenter.org

Office Phone: 713-970-7429

Crisis Line: 713-970-7000 option #1



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Myrna Saldana-Trevino

Community Outreach HP Coordinator

CHRISTUS Health Plan/USFHP



*Faith Community Mental Health Event:
Veterans, Family, Community*



- CHRISTUS Health has been a part of the Gulf Coast community for 150 years
 - 4 Uniformed Services treatments center became Uniformed Services Family Health plan
 - Help the community by providing holistic health and wellness thru community events and our services.
 - Include family members in any healing process so everyone has the opportunity to participate.
- This Tricare option, US Family Health Plan streamlines the specialist referral process by allowing the family members and service member to see a specialist without a referral as is required in Tricare Prime.
 - Our military active duty family members
 - Retired/medically retired military (under 65)
 - Retired reservist who are 60 yrs. old
 - Medal of Honor service members
 - Health and wellness events through our community outreach

Some of the programs and resources available to you include:

- ***AfterDeployment:*** This is for service members, veterans and **military families**.
- ***Coast Guard Employee Assistance Program (EAP):*** Get confidential help before a concern becomes a crisis. For US Coast Guard **members, civilians and their families**.
- ***inTransition:*** Transferring to a new location or separating from active duty? Call to get help while you are in transition.
- ***Military Crisis Line:*** Call, chat online or send a text message to reach a trained professional at any time. Call **800.273.8255** and press 1, or text **838255** to speak with someone if you experience a crisis or are concerned about someone experiencing a crisis.
- **Mental Health Benefits:** Find tools and resources to maintain a healthy lifestyle.
- For additional information about the mental health benefit or to obtain names of in-network mental health professionals, please contact **Member Services (800.67.USFHP)**.





*Faith Community Mental Health Event:
Veterans, Family, Community*



As part of our mission, we work with our members to find the best care available. We recently had a request for a specific behavioral health doctor for children not in our network. We obtain the doctor information and had our provider rep reach to their office to contract with USFHP.

- Offering case managers
- An extensive list of specialist and a no referral procedure as part of our resources.
- This is especially important when dealing with our holistic approach.
- Everyone should participate in the process, whether is physically, mental or spiritual.

Myrna Trevino

www.facebook.com/USFHP BOOK NOW

Myrna.saldanatrevino@christushealth.org



Q&A

Please let us know if you have any questions.