Northland Health Alliance 2020-2023 CHIP

Implementation Worksheets

Mission Driven

Priority
1 Access to Care: **Focus Area:** Access to Behavioral Health Care
Goal: Identify Northland residents with behavioral health care needs and link them to the appropriate level of care in a timely manner.

Objective 1.1 Integration of Care: In order to address a shortage in behavioral health care providers in the Northland, increase number of behavioral health encounters through integration with primary care by X% annually after gathering baseline in Year 1.		Key Performance Indicators		
Strategy 1.1.1 Integration of care for vulnerable populations: Integration of primary care and behavioral health care for vulnerable populations.	Actions 1.1.1.1 Screening: Screen patients with PHQ2 and PHQ9 and refer for services. 1.1.1.2 Referrals: As PCPs visit with patients, referrals are made to the Behavioral Health Clinicians. 1.1.1.3 Crisis Intake: Patients in crisis receive an immediate intake and face to face (or telehealth) meeting with clinicians. 1.1.1.4 Counseling: Patients receive face to face (or telehealth) counseling and as needed, are referred to Tri County office for additional diagnoses and RX dispensing. 1.1.1.5 Reporting: Track number of behavioral health encounters monthly and report.	Responsible Party *Strategy* NHCA +CCPHC +PCHD +SURHC +TCMHS *Actions* 1. +CCPHC +PCHD +SURHC 2. +CCPHC +PCHD +SURHC 3. NHCA +CCPHC +PCHD +SURHC +TCMHS 4. NHCA +CCPHC +PCHD +SURHC +TCMHS 5. NHCA +CCPHC +PCHD +SURHC +TCMHS	Date Range *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/23 -Ongoing 2.1/01/20 - 12/31/23 -Ongoing 3.1/01/20 - 12/31/23 -Ongoing 4.1/01/20 - 12/31/23 5.1/01/20 - 12/31/23 -Quarterly	Resources *Strategy* *Actions*

Strategy	Actions	Responsible Party	Date Range	Resources
Strategy 1.1.2 Establish services at SURHC North Oak location: Integration of primary care and behavioral health care for vulnerable populations by establishing Rodger's Health behavioral health services at North Oak location.	*Actions* 1.1.2.1 Establish: Establish Services at Samuel Rodgers - Move to new/additional space location early 2020. 1.1.2.2 Staffing: Determine staffing at new SURHC location and ramp up. 1.1.2.3 Reporting: Report monthly behavioral health care visits for each location. 1.1.2.4 Marketing: Ensure listing of services are on provider directory and level of care on NHA website.	*Responsible Party* *Strategy* SURHC *Actions* 1. SURHC 2. SURHC 3. SURHC 4. MTF +SURHC	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23 -Quarterly 4.1/01/20 - 6/30/21 -Annually	*Resources* *Strategy* *Actions*
Strategy 1.1.3 Integration with LCSW: Integration of primary care and behavioral health care by staffing primary care offices with LCSWs.	*Actions* 1.1.3.1 Screening: Screen patients with PHQ2 and PHQ9and refer for services. 1.1.3.2 Referrals: As PCPs visit with patients, referrals are made to the Behavioral Health Clinicians. 1.1.3.3 Reporting: Track number of behavioral health encounters monthly.	*Responsible Party* *Strategy* NKCH *Actions* 1. NKCH 2. NKCH 3. NKCH	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/23 -Ongoing 2.1/01/20 - 12/31/23 -Ongoing 3.1/01/20 - 12/31/23 -Quarterly	*Resources* *Strategy* *Actions*

Strategy	Actions	Responsible Party	Date Range	Resources
1.1.4 Integration with Mental Health clinician: Integration of primary care and behavioral health care by staffing mental health clinician embedded in primary care clinics.	1.1.4.1 Screening: Screen patients with PHQ2 and PHQ9 and refer for services. 1.1.4.2 Referrals: As PCPs visit with patients, referrals are made to the Mental health clinician. 1.1.4.3 Reporting: Track number of behavioral health encounters monthly.	*Strategy* LH *Actions* 1. LH 2. LH 3. LH	*Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/23 -Ongoing 2.1/01/20 - 12/31/23 -Ongoing 3.1/01/20 - 12/31/23 -Quarterly	*Strategy* *Actions*

Objective 1.2 Trainings: To streamline a regional response to a shortage in behavioral health care providers, assess health care providers in the Northland (including primary care, urgent care, EMS, school nurses, large employers with EAP/Health Facilities, etc.) for their interest in trainings to use behavioral health screening tools and how many staff would need to be trained. Complete assessment of training needs and develop a plan to address these needs by June 2021.		Key Performance Indicators		
Strategy 1.2.1 Assess training needs: Survey health care providers to see if they are already using behavioral health screening tools, if they need training (including online trainings) to use these tools, and how many staff they would train.	Actions 1.2.1.1 Identify needs: Work with Behavioral Health Task Force to identify training needs in community. 1.2.1.2 Compile resources: Compile a list of behavioral health screening options and resources/training materials to assist with completing these screenings. 1.2.1.3 Create survey: Create a survey to ask health care providers about current use of behavioral health screening tools and training needs regarding behavioral health screening tools. 1.2.1.4 Distribution list: Identify Northland health care providers to survey. 1.2.1.5 Send survey: Send survey to Northland health care providers. 1.2.1.6 Analyze results: Analyze survey results. Identify training needs based on these results. 1.2.1.7 Create new strategies: Using survey results, work with Behavioral Health Task Force to create additional strategies to address training needs in the Northland.	Responsible Party Strategy ATCTF +TCMHS Actions 1. ATCTF +BHTF +TCMHS 2. TCMHS +ATCTF 3. ATCTF +TCMHS 4. ATCTF +TCMHS 5. ATCTF +TCMHS 6. ATCTF +TCMHS 7. ATCTF +TCMHS	Date Range Strategy 1/01/20 - 12/31/20 -Ongoing Actions 1.1/01/20 - 9/30/20 -Monthly 2.1/01/20 - 6/30/20 -Ongoing 3.1/01/20 - 9/30/20 -Ongoing 4.1/01/20 - 9/30/20 -Ongoing 5.7/01/20 - 9/30/20 -Ongoing 6.9/01/19 - 1/31/21 -Ongoing 7.11/01/20 - 1/31/21 -Ongoing	Resources Strategy Actions

Objective 1.3 Crisis Line and Intake Utilization : Increase utilization of intakes at clinics and crisis lines by X% annually after gathering baseline in Year 1.		Key Performance Indicators		
Strategy 1.3.1 Walk-in Services: Educate community about Open Access Walk-in Services at TCMHS.	*Actions* 1.3.1.1 Website Promotion: Ensure listing on Provider Directory and level of care on NHA website. 1.3.1.2 Track Intakes and Referral Source: Track number of people who intake and where referral is coming from. Create a baseline for 2021.	*Responsible Party* *Strategy* TCMHS +ATCTF +MKTG *Actions* 1. ATCTF MKTG +TCMHS 2. TCMHS +ATCTF +MKTG +SPH	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 1/01/21	*Resources* *Strategy* *Actions*
Strategy 1.3.2 Crisis Line: Educate community about Crisis Line Services at TCMHS	*Actions* 1.3.2.1 Website Promotion: Ensure listing on Provider Directory and level of care on NHA website. 1.3.2.2 Track Calls: Track number of crisis line calls monthly. Create a baseline for 2021	*Responsible Party* *Strategy* TCMHS +ATCTF +MKTG *Actions* 1. TCMHS +ATCTF +MKTG 2. TCMHS +ATCTF +MKTG	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*

Objective 1.4 Access to Care in Areas with Geographic Barriers: Increase utilization of behavioral health services provided within communities of populations affected by geographic barriers by X% annually after gathering baseline in Year 1.		Key Performance Indicators		
Strategy 1.4.1 ED Telehealth: Utilize behavioral health telehealth services in ED visits.	*Actions* 1.4.1.1 Establish Contract: Contracting in place with HCA for telehealth services available through the ED. 1.4.1.2 Tracking: Track number of ED visits using telehealth services monthly.	*Responsible Party* *Strategy* ESH *Actions* 1. ESH 2. ESH	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 2/29/20 2.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*
Strategy 1.4.2 Psychiatric Services: Establish access to behavioral health/psychiatric services for clinic visits.	*Actions* 1.4.2.1 Telehealth Psychiatric Services: Access to behavioral health/psychiatrist services available for set timeframes – for clinic visits through telehealth. 1.4.2.2 Establish Contracts: Contracting for IP services /weekly clinic for onsite psychiatry services. 1.4.2.3 Provider Partnerships: Explore opportunities to develop/partner with IP Behavioral Health providers – using recently vacated independent living center area. 1.4.2.4 Track Visits: Track clinic visits using behavioral health services monthly.	*Responsible Party* *Strategy* ESH *Actions* 1. ESH 2. ESH 3. ESH 4. ESH	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23 4.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*

Objective 1.5 COVID-19 Response: Establish mental health services for residents impacted by COVID-19.		Key Performance Indicators		
Strategy 1.5.1 Crisis Counseling Program Disaster Response: Expand Crisis Counseling programming efforts to address trauma assiciated with COVID-19 pandemic.	Actions 1.5.1.1 Launch Program: Launch Crisis Counseling disaster response program. 1.5.1.2 Support Northland Residents: Partner with health care providers to offer services to residents of the Northland. 1.5.1.3 Vulnerable Populations: Increase outreach to vulnerable COVID-19 populations (older adults, children, families).	Responsible Party Strategy TCMHS +CC Actions 1. TCMHS +CC 3. ATCTF	Date Range Strategy 4/01/20 - 12/31/23 Actions 1.4/01/20 - 8/01/20 -Ongoing 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23	Resources Strategy Actions
Strategy 1.5.2 COVID-19 Resources: Connect Northland residents to various resources that support mental wellness during COVID-19 pandemic and pandemic recovery period.	Actions 1.5.2.1 Compile Resource List: Work with Alive and Well KC and the United Way to identify mental wellness resources in the Northland. 1.5.2.2 Publish Resource List: Publish mental health resource list. 1.5.2.3 Promote Resource List: Promote resource list so that all Northalnd residents can access and utilize list.	Responsible Party Strategy AWKC +ATCTF +BHTF Actions	Date Range Strategy 1/01/20 - 12/31/23 -Ongoing Actions 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23	Resources Strategy Actions

Priority
2 Behavioral Health: **Focus Area:** Youth Suicide Prevention
Goal: Eliminate youth suicide deaths in the Northland through coordinated trauma-informed and evidence-based prevention initiatives.

Objective 2.1 Trainings: Increase number of people educated about youth suicide prevention in the Northland by 10% annually after gathering baseline in Year 1.		Key Performance Indicators		
Strategy 2.1.1 Early Childhood Education Mental Health Staff Training: Create and implement state approved Early Childhood Education Mental Health staff training for childcare providers and home providers.	*Actions* 2.1.1.1 Identify Training Sites: Identify a minimum of 3 childcare centers willing to receive training. 2.1.1.2 Finalize Curriculum: Finalize training curriculum and get approval from State of MO. 2.1.1.3 Become a Licensed Home Site: Become Licensed Home Site through State of MO. 2.1.1.4 Implement Trainings: Implement trainings at a minimum of 3 early childhood centers. 2.1.1.5 Submit Training Implementation Report to State: Submit a report over training implementation to State of MO to undergo comprehensive evaluation and receive evidence-based practice designation.	*Responsible Party* *Strategy* PCHD *Actions* 1. PCHD 2. PCHD 3. PCHD 4. PCHD 5. PCHD	*Date Range* *Strategy* 1/01/20 - 12/31/20 *Actions* 1.1/01/20 - 3/31/20 2.1/01/20 - 3/31/20 3.1/01/20 - 3/31/20 4.1/01/20 - 3/31/20 5.1/01/20 - 6/30/21	*Resources* *Strategy* *Actions*
Strategy 2.1.2 SOS Program: Continue to implement Signs of Suicide (SOS) Program annually in Northland schools and sustain school participation levels.	*Actions* 2.1.2.1 Implement Refresher Training: Launch annual SOS refresher training for Northland schools. 2.1.2.2 Sustain School Participation: Sustain annual school participation in SOS Program.	*Responsible Party* *Strategy* TCMHS *Actions* 1. TCMHS 2. TCMHS	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 9/30/20 2.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*
Strategy 2.1.3 QPR Training: Implement 1-hour Question, Persuade, and Refer (QPR) trainings across the Northland.	*Actions* 2.1.3.1 Train the Trainer: Train all Youth Crisis Team members in facilitating QPR by the end of 2020. 2.1.3.2 Implement QPR: Conduct a minimum of 3 QPR trainings across the Northland annually (starting in 2021) with a focus of adults who work with at-risk youth (i.e., grand families, foster families, etc.)	*Responsible Party* *Strategy* TCMHS *Actions* 1. TCMHS 2. TCMHS	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*

Strategy	Actions	Responsible Party	Date Range	Resources
Strategy 2.1.4 Law Enforcement Youth CIT Training: Train law enforcement officers in Youth CIT.	*Actions* 2.1.4.1 Identify Training Dates: Identify Youth CIT training opportunities in the area. 2.1.4.2 Train Gladstone PD: Train all Gladstone Police Department officers in Youth CIT by end of 2020. 2.1.4.3 Maintain: Ensure all new officer are trained within a year of being hired to GSPD.	*Strategy* GSPD +TCMHS *Actions* 1. GSPD +TCMHS 2. GSPD +TCMHS 3. GSPD +TCMHS	*Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 3.1/01/20 - 12/31/23	*Strategy* *Actions*
Strategy 2.1.5 Community Youth Mental Health First Aid Training: Conduct at least 4 Youth Mental Health First Aid Trainings across the Northland annually.	*Actions* 2.1.5.1 Identify Locations to Host Trainings: Identify at least 4 locations across the Northland to host Youth Mental Health First Aid trainings. 2.1.5.2 Implement Trainings: Implement at least 4 Youth Mental Health First Aid trainings.	*Strategy* TCMHS *Actions* 1. TCMHS 2. TCMHS	*Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23	*Strategy* *Actions*

Objective 2.2 New Programming/Pilot Projects: Launch 50% of new planned programs annually.		Key Performance Indicators		
Strategy 2.2.1 Wellness Wednesdays: Bring youth suicide prevention resources to North Kansas City Hospital Wellness Corner at least once a year at each of the 3 locations (North Kansa City YMCA, Gladstone Community Center, and Zona Rosa) on Wellness Wednesdays.	*Actions* 2.2.1.1 TCMHS Partnership: NKCH will establish partnership with TCMHS to provide resources for event. 2.2.1.2 Signature Psychiatric Partnership: NKCH will establish partnership with Signature Psychiatric Hospital to provide resources for event. 2.2.1.3 Schedule Events: Schedule at least 1 youth suicide prevention event at each of the 3 NKCH Wellness Corner locations in 2020. 2.2.1.4 Implement Events: Implement youth suicide prevention events at all 3 NKCH Wellness Corner locations in 2020.	*Responsible Party* *Strategy* NKCH +SPH +TCMHS *Actions* 1. NKCH +TCMHS 2. NKCH +SPH 3. NKCH +SPH +TCMHS 4. NKCH +SPH +TCMHS	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 3/31/20 2.1/01/20 - 3/31/20 3.1/01/20 - 12/31/20 4.1/01/20 - 12/31/20	*Resources* *Strategy* *Actions*
Strategy 2.2.2 Northland CAPS Training: Provide youth suicide prevention training to Northland CAPS students placed at NKCH during Professional Development Mondays 2 times per school year.	*Actions* 2.2.2.1 TCMHS Partnership: NKCH will establish partnership with TCMHS to provide resources for NCAPS training. 2.2.2.2 Curriculum Approval: Get curriculum approved by NCAPS leadership. 2.2.2.3 Schedule Trainings: Schedule at least 2 youth suicide prevention trainings each school year for NCAPS students. 2.2.2.4 Implement Trainings: Implement at least 2 youth suicide prevention trainings each school year for NCAPS students.	*Responsible Party* *Strategy* NKCH +TCMHS *Actions* 1. NKCH +TCMHS 2. NKCH +TCMHS 3. NKCH +TCMHS 4. NKCH +TCMHS	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 3/31/20 3.1/01/20 - 3/31/20 4.1/01/20 - 6/30/21	*Resources* *Strategy* *Actions*

Strategy	Actions	Responsible Party	Date Range	Resources
Strategy 2.2.3 Synergy Services ESCA Staff Training: Roll out Health Forward Foundation Enhanced Suicide Care Academy (ESCA) suicide prevention training among all Synergy Services staff.	*Actions* 2.2.3.1 Adjust Curriculum: Work with Health Forward Foundation staff and 5 Synergy staff who already ESCA trained to adjust the curriculum and training process so that all Synergy staff (both clinical and non-clinical) can complete training. 2.2.3.2 Train Staff: Train all Synergy Services staff in ESCA. 2.2.3.3 Change Procedure: Modify assessment tools.	*Responsible Party* *Strategy* Synergy *Actions* 1. Synergy 2. Synergy 3. Synergy	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 12/31/20 3.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*
Strategy 2.2.4 Hope Squad: Assess ability to implement Hope Squad school-based, peer-to-peer suicide prevention program in Northland schools.	*Actions* 2.2.4.1 Assess Feasibility: Meet with TCMHS and school district to assess feasibility of Hope Squad program. 2.2.4.2 Identify Pilot Schools: Identify schools to pilot Hope Squad. 2.2.4.3 Conduct Train the Trainer: Conduct adult train the trainer at TCMHS. 2.2.4.4 Launch Program: Launch Hope Squad programming.	*Responsible Party* *Strategy* TCMHS *Actions* 1. TCMHS 2. TCMHS 3. TCMHS 4. TCMHS	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 3/31/20 2.1/01/20 - 3/31/20 3.1/01/20 - 9/30/20 4.1/01/20 - 12/31/20	*Resources* *Strategy* *Actions*
Strategy 2.2.5 Clay County SOS Analysis Project: Conduct data analysis of Signs of Suicide (SOS) program in Clay County to contribute to overall understanding of suicide in the Northland.	*Actions* 2.2.5.1 Identify Schools: Identify all Clay County schools participating in the SOS Program. 2.2.5.2 Request Data: Request data from 2019-2020 SOS Program implementation. 2.2.5.3 Analyze Data: Analyze 2019-2020 Clay County SOS data.	*Responsible Party* *Strategy* CCPHC *Actions* 1. CCPHC 2. CCPHC 3. CCPHC	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 3/31/20 2.1/01/20 - 6/30/20 3.1/01/20 - 12/31/20	*Resources* *Strategy* *Actions*

Objective 2.3 Community Building: Work to create a social network map of organizations and their partners collaborating on youth suicide prevention initiatives to identify strengths and gaps in Year 1.		Key Performance Indicators		
Strategy 2.3.1 Coalition Work: Continue to integrate NHA members into community groups and coalitions to help build and maintain good working relationships partners working on youth suicide prevention initiatives.	*Actions*	*Responsible Party* *Strategy* TCMHS +CCPHC +PCHD *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions*	*Resources* *Strategy* *Actions*
Strategy 2.3.2 Health Equity Community Groups: Increase involvement of NHA members in community groups that focus on health equity, social determinants of health, addressing trauma, or at-risk social groups (i.e., Trauma Informed Northland, Northland Homelessness Assistance Coalition, etc.).	*Actions*	*Responsible Party* *Strategy* CCPHC PCHD *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions*	*Resources* *Strategy* *Actions*

Objective 2.4 Social Media: Establish baseline for social media engagements on youth suicide prevention content in Year 1. Increase by 10% annually after baseline.		Key Performance Indicators		
Strategy 2.4.1 Youth Suicide Prevention Social Media Campaign: Develop youth suicide prevention social media campaign targeted at parents.	*Actions* 2.4.1.1 Develop Content: Develop content for social media campaign. 2.4.1.2 Launch Campaign: Launch campaign during September 2020 National Suicide Prevention Month.	*Responsible Party* *Strategy* TCMHS *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 9/30/20 2.1/01/20 - 9/30/20	*Resources* *Strategy* *Actions*

Strategy	*Actions*	*Responsible Party*	*Date Range*	*Resources*
2.4.2 Social Media Management: Post youth suicide prevention educational and awareness content on all participating NHA organization social media accounts annually during the months of May and September.	2.4.2.1 May - Mental Health Month: Each NHA BHTF organization posts at least 4 youth suicide prevention posts every May during Mental Health Month. 2.4.2.2 September - Suicide Prevention Month: Each NHA BHTF organization posts at least 4 youth suicide prevention posts every September during Suicide Prevention Month.	*Strategy* BHTF +CCPHC +GSPD +NKCH +PCHD +SPH +Synergy +TCMHS *Actions* 1. BHTF 2. BHTF	*Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23	*Strategy* *Actions*
Strategy 2.4.3 NHA Youth Suicide Prevention Campaign: Work with NHA Marketing Committee to develop NHA Youth Suicide Prevention Social Marketing Campaign	*Actions* 2.4.3.1 Meet with Marketing Campaign: Meet with NHA Marketing Committee to pitch ideas and develop timeline. 2.4.3.2 Develop Content: Develop content for NHA branded youth suicide prevention campaign. 2.4.3.3 Develop Landing Page: Develop landing page for social media campaign. 2.4.3.4 Launch Campaign: Launch campaign during September 2021 National Suicide Prevention Month.	*Responsible Party* *Strategy* BHTF MKTG *Actions* 1. BHTF MKTG 2. BHTF MKTG 3. BHTF MKTG 4. BHTF MKTG	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/20 2.1/01/20 - 9/30/21 3.1/01/20 - 9/30/21 4.1/01/20 - 9/30/21	*Resources* *Strategy* *Actions*

Objective 2.5 Policy: Research youth suicide prevention policies to campion/advocate for and publish at least 1 white paper annually.		Key Performance Indicators		
Strategy 2.5.1 National, State and Local : Track national, state, and local youth suicide prevention policies and monitor compliance if passed.	Actions 2.5.1.1 Track and Report: Track national, state, and local youth suicide prevention policy and report out at quarterly Behavioral Health Task Force meetings. 2.5.1.2 Compliance: IF APPLICABLE: Help ensure implementation of passed policies. 2.5.1.3 Policy Brief: IF APPLICABLE: Write a white paper or policy brief about policy and publish to NHA website.	Responsible Party Strategy CCPHC +PCHD Actions 1. CCPHC +PCHD +TCMHS 2. CCPHC +PCHD +TCMHS 3. CCPHC +PCHD +TCMHS	Date Range Strategy 1/01/20 - 12/31/23 Actions 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23	Resources Strategy Actions
Strategy 2.5.2 Missouri Hospital Association : Track MHA's policy agenda and monitor compliance if any polices are passed.	Actions 2.5.2.1 Track and Report: Track MHA's policy agenda related to youth suicide prevention legislative and clinical policy and report out at quarterly Behavioral Health Task Force meetings. 2.5.2.2 Compliance: IF APPLICABLE: Help ensure implementation of passed policies. 2.5.2.3 Policy Brief: IF APPLICABLE: Write a white paper or policy brief about policy and publish to NHA website.	Responsible Party Strategy NKCH Actions 1. NKCH 2. NKCH 3. NKCH	Date Range Strategy 1/01/20 - 12/31/23 Actions 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23	Resources Strategy Actions

Strategy	Actions	Responsible Party	Date Range	Resources
2.5.3 Community Behavioral Health Association: Track CBHA's policy agenda and monitor compliance if any polices are passed.	2.5.3.1 Track and Report: Track CBHA's policy agenda related to youth suicide prevention legislative and clinical policy and report out at quarterly Behavioral Health Task Force meetings. 2.5.3.2 Compliance: IF APPLICABLE: Help ensure implementation of passed policies. 2.5.3.3 Policy Brief: IF APPLICABLE: Write a white paper or policy brief about policy and publish to NHA website.	*Responsible Party* *Strategy* TCMHS *Actions* 1. TCMHS 2. TCMHS 3. TCMHS	*Date Range* *Strategy* 1/01/20 - 12/31/23 *Actions* 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*
Strategy 2.5.4 Ballot Initiatives: Track ballot initiates that can health to prevent youth suicide and monitor compliance if passed.	*Actions* 2.5.4.1 Track and Report: Track ballot initiates related to youth suicide prevention and report out at quarterly Behavioral Health Task Force meetings. 2.5.4.2 Compliance: IF APPLICABLE: Help ensure implementation of passed policies. 2.5.4.3 Policy Brief: IF APPLICABLE: Write a white paper or policy brief about policy and publish to NHA website.	*Responsible Party* *Strategy* *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/23 -Ongoing 2.1/01/20 - 12/31/23 -Ongoing 3.1/01/20 - 12/31/23 -Ongoing	*Resources* *Strategy* *Actions*

Objective 2.6 COVID-19 Response: Address the mental health fallout of the COVID-19 pandemic by providing resources to prevent youth suicide.		Key Performance Indicators		
Strategy 2.6.1 Community Groups Supporting COVID-19 Response and Recovery : Participate in community groups working to address the mental health fallout of the COVID-19 pandemic and prevent youth suicide.	*Actions*	*Responsible Party* *Strategy* *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions*	*Resources* *Strategy* *Actions*

Strategy	Actions	Responsible Party	Date Range	Resources
Strategy 2.6.2 COVID-19 Policy Supporting Youth Suicide Prevention : Track local, state, and national policy and budget allocations related to COVID-19 and mental health, and monitor compliance if any polices are passed.	*Actions* 2.6.2.1 Track and Report: Track national, state, and local youth suicide prevention policy in response to COVID-19 and report out at quarterly Behavioral Health Task Force meetings. 2.6.2.2 Compliance: IF APPLICABLE: Help ensure implementation of passed policies. 2.6.2.3 Policy Brief: IF APPLICABLE: Write a white paper or policy brief about policy and publish to NHA website.	*Responsible Party* *Strategy* *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/23 -Ongoing 2.1/01/20 - 12/31/23 -Ongoing 3.1/01/20 - 12/31/23 -Ongoing	*Resources* *Strategy* *Actions*
Strategy 2.6.3 COVID Trauma Training for Caretakers : Promote KC Northland Strong's "Taking Care of Ourselves During Challenging Times" training to Northland organizations who address youth suicide to ensure our youth suicide prevention workforce is well enough to work.	*Actions* 2.6.3.1 Identify Organizations: Identify organizations in the Northland who would benefit from training opportunity. 2.6.3.2 Connect Organizations to Training Opportunity: Refer organizations to training. 2.6.3.3 Identify Organizations: Identify organizations in the Northland who would benefit from training opportunity. 2.6.3.4 Connect Organizations to Training Opportunity: Refer organizations to training.	*Responsible Party* *Strategy* BHTF *Actions*	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/23 2.1/01/20 - 12/31/23 3.1/01/20 - 12/31/23 4.1/01/20 - 12/31/23	*Resources* *Strategy* *Actions*

Priority
3 Chronic Disease: **Focus Area:** Nutrition (Access to Healthy Foods)
Goal: Increase food access and nutritious food choices through prioritizing populations struggling with income, unstable transportation and/or geography as barriers to healthy food.

Objective 3.1 Food distribution: Establish baseline in Year 1 in the amount of food provided.		Key Performance Indicators		
Strategy 3.1.1 Distribute food in low-income census tracts	*Actions* 3.1.1.1 Form partnerships: Partner with organizations to provide resources/funding for mobile food pantry programs. 3.1.1.2 Implement programs: Provide food pantries and Meals on Wheels programs at locations.	*Responsible Party* *Strategy* *Actions* 1. HARV +CCSS +NKCH 2. NSC +CCPHC +YMCA	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*
Strategy 3.1.2 Distribute food in low-vehicle access census tracts	*Actions* 3.1.2.1 Form partnerships: Partner with organizations to provide resources/funding for mobile food pantry programs. 3.1.2.2 Implement programs: Provide food pantries and Meals on Wheels programs at locations. 3.1.2.3 Provide transportation: Provide transportation services to groceries or food pantry.	*Responsible Party* *Strategy* *Actions* 1. HARV +CCSS +NKCH 2. NSC +CCPHC +YMCA 3. NSC	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing 3.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*
Strategy 3.1.3 Distribute food in low-food access census tracts	*Actions* 3.1.3.1 Form partnerships: Partner with organizations to provide resources/funding for mobile food pantry programs. 3.1.3.2 Implement programs: Provide food pantries and Meals on Wheels programs at locations.	*Responsible Party* *Strategy* *Actions* 1. HARV +CCSS +NKCH 2. NSC +CCPHC +YMCA	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*

Objective 3.2 Nutrition education: Establish baseline in Year 1 in the number of people served in nutrition classes/demos.		Key Performance Indicators			
Strategy 3.2.1 Provide nutrition classes in low-income census tracts	*Actions* 3.2.1.1 Form partnerships: Partner with organizations and host nutrition classes at community locations. 3.2.1.2 Deliver nutrition education: Host nutrition classes/demos at locations.	*Responsible Party* *Strategy* *Actions* 1. MU Extension +AHA +HARV 2. MU Extension +CCPHC +NKCH +SL	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*
Strategy 3.2.2 Provide nutrition classes in low-vehicle access census tracts	*Actions* 3.2.2.1 Form partnerships: Partner with organizations and host nutrition classes at community locations. 3.2.2.2 Deliver nutrition education: Host nutrition classes/demos at locations.	*Responsible Party* *Strategy* *Actions* 1. MU Extension +AHA +HARV 2. MU Extension SL +CCPHC +NKCH	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*
Strategy 3.2.3 Provide nutrition classes in low-food access census tracts	*Actions* 3.2.3.1 Form partnerships: Partner with organizations and host nutrition classes at community locations. 3.2.3.2 Deliver nutrition education: Host nutrition classes/demos at locations.	*Responsible Party* *Strategy* *Actions* 1. MU Extension +AHA +HARV 2. MU Extension +CCPHC +NKCH +SL	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*

Objective 3.3 Program enrollment : Establish baseline in Year 1 in WIC and SNAP enrollment.		Key Performance Indicators		
Strategy 3.3.1 Food insecurity screenings: Conduct screenings for food insecurity, focusing on areas that are low-income, low-vehicle access, and low-food access census tracts	*Actions* 3.3.1.1 Resource line: Use a resource line to screen clients for food insecurity and refer to resources 3.3.1.2 Screen patients: Screen patients for food access/security during primary care appointments and refer to resources	*Responsible Party* *Strategy* *Actions* 1. NHCA 2. SL	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*
Strategy 3.3.2 Program applications: Assist participants with applications for SNAP, WIC, food stamps and other food access programs, focusing on areas that are low-income, low-vehicle access, and low-food access census tracts	*Actions* 3.3.2.1 SNAP applications: Assist clients with SNAP applications 3.3.2.2 WIC applications: Assist clients with WIC applications 3.3.2.3 Other applications: Assist clients with applications for other food assistance programs (food pantries, food stamps)	*Responsible Party* *Strategy* *Actions* 1. HARV +NHCA +NSC 2. CCPHC +NHCA +PCHD 3. NHCA +NSC	*Date Range* *Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/20 -Ongoing 2.1/01/20 - 12/31/20 -Ongoing 3.1/01/20 - 12/31/20 -Ongoing	*Resources* *Strategy* *Actions*

Objective 3.4 Collaborative interventions: By the end of the CHIP cycle, launch # of collaborative community-level intervention.		Key Performance Indicators		
Strategy 3.4.1 Prescriptive food pantries: Provide prescriptive pantries in partnership with healthcare organizations	Actions 3.4.1.1 Explore partnerships: Explore opportunities for prescriptive pantries with partners 3.4.1.2 Implement programs: Implement prescriptive pantries	Responsible Party Strategy HARV Actions 1. HARV 2. HARV	Date Range Strategy 1/01/20 - 12/31/23 -Ongoing Actions 1.1/01/20 - 12/31/21 2.1/01/20 - 12/31/21	Resources Strategy Actions
Strategy 3.4.2 Advocacy and awareness: In partnership with organizations, conduct advocacy and awareness campaigns/initiatives	Actions 3.4.2.1 Form partnerships: Partner with organizations to assess policies around procurement and distribution 3.4.2.2 Conduct campaigns: Conduct advocacy/awareness campaigns around food insecurity	Responsible Party Strategy AHA Actions 1. AHA 2. AHA	Date Range Strategy 1/01/20 - 12/31/23 -Ongoing Actions 1.1/01/20 - 12/31/21 2.1/01/20 - 12/31/21	Resources Strategy Actions
Strategy 3.4.3 Design and establish urban farm: Design and establish an urban farm	Actions 3.4.3.1 Establish infrastructure: Establish infrastructure (tunnels, greenhouse) 3.4.3.2 Create educational curricula: Establish educational sessions around urban farming and farm-to-table foods	Responsible Party Strategy YMCA Actions 1. YMCA 2. YMCA	Date Range Strategy 1/01/20 - 12/31/23 -Ongoing Actions 1.1/01/20 - 12/31/21 2.1/01/20 - 12/31/21	Resources Strategy Actions
Strategy 3.4.4 Convenience stores: In partnerships with convenience stores, provide healthy food options	Actions 3.4.4.1 Explore options: Explore options for partnerships	Responsible Party Strategy CCPHC Actions 1. CCPHC	Date Range Strategy 1/01/20 - 12/31/23 -Ongoing Actions 1.1/01/20 - 12/31/21	Resources Strategy Actions

Strategy	Actions	Responsible Party	Date Range	Resources
Strategy 3.4.5 Stock healthy, shop healthy: Implement Stock Healthy, Shop Healthy program	Actions 3.4.5.1 Explore options: Explore options for implementation	*Strategy* MU Extension *Actions* 1. MU Extension	*Strategy* 1/01/20 - 12/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/21	*Strategy* *Actions*
Strategy 3.4.6 Chronic disease management program: Implement Chronic Disease Management Program	Actions 3.4.6.1 Form partnerships: Form partnerships with communities to implement program 3.4.6.2 Implement classes: Implement 14 classes	*Strategy* CCSS +MU Extension *Actions* 1. CCSS 2. MU Extension +CCSS +NKCH	*Strategy* 1/01/20 - 7/31/23 -Ongoing *Actions* 1.1/01/20 - 12/31/21 2.1/01/20 - 12/31/21	*Strategy* *Actions*