

# **Executive Summary**

## Mental Health and Maternal, Infant, Child Health Convening for Colorado Funded by The Colorado Trust

#### Purpose

The purpose of this grant is to pull together multiple stakeholders to discuss topic areas that arose out of the 2013 Community Health Needs Assessment and Priortization Plan. The top 5 issues identified in the prioritization process were:

- 1) Mental Health
- 2) Access to Health Care
- 3) Maternal, Infant, and Child Health
- 4) Substance Abuse
- 5) Health Information and Awareness

GCRHN engaged independent consultants to walk us through a strategic planning discussion revolving around two of the topic areas: mental health and maternal, infant, child health. We chose these two topic areas because the other three areas align. For example, we can address substance abuse with mental health. And the community identified the base issue behind access to healthcare as lack of health information and awarness. Further, the prioritization process identified that health information and awareness is a thread that runs through all topic areas.

Therefore, we focused on Mental Health and Maternal, Infant, and Child Health (MICH). We also spent significant time discussing health information and awareness as it relates to both topics.

## **Strategic Planning Process**

We created two work groups: Mental Health and MICH. We convened one launch meeting with both work groups together to dicuss history and overall process, brainstorm, and get cross-pollination of issues. Then each work group met separately 3 times for approximately 2 hours each time to create a draft community-wide streategic plan with identified strategies for each topic.

About two-thirds of the way through the process, we convened the Grand County Healthcare Professionals Society for medical, dental, and mental health provider input on each identified strategy. We then convened two community meetings, including work group participants and other community members who could not commit to the more time-consuming work groups. The purpose of these larger convenings was to garner greater community feedback on the strategic planning process and make changes as needed.

Finally, we convened the two work groups together to complete final action planning and discuss next steps.

#### Outcome

We created a community-wide strategic plan for Mental Health, MICH, and Health Information and Awareness as a result of this process. We identified leaders and champions for each strategy to promote sustainability of future initiatives and potential funding options for several of the strategies.

During the planning process, we gauged community support from each group (work group, healthcare professionals, community) through a 1-5 scale with 1 being the lowest level of support and 5 being the highest. Work group participants also created 1-page summaries on each strategy to review history in Grand County and to provide a potential model and potential funding sources.

Please see *Attachment A – Sequence and Timeline for Implementation Final Action Plan* for a summary of the strategies discussed, level of community support, champions and timeline. A summary of identified strategies for each topic area are as follows:

### **Maternal Infant Child Health**

The final MICH outcome statement is that high-quality services will be available and utilized efficiently for parents and children to ensure the healthy development of children in Grand County. The final identified strategies, timeline and immediate action plan are:

- Implement Nurse Family Partnership. The leading champion is Grand County Public Health. They will potentially support the program pending Board of County Commissioner (BOCC) approval and work with the potential fiscal agent, Summit County Public Health. Other community champions include a teacher and parent; a primary care provider; a mental health provider; and an elementary school principal. The timeline is to begin the first phase of implementation by the end of August 2014. Immediate action steps include: Public Health discussing program implementation with Summit County Public Health and Invest in Kids; convening the committee to convey said information and create detailed action plan; and advocating to the BOCC for approval in September at the board of health meeting, with these community champions.
- *All parents/guardians get a home visit.* The leading champion is Grand Beginnings Early Childhood Council. Other champions include: an elementary school principal; Horizons Specialized Services; a concerned citizen; and Public Health. The timeline is 24-36 months to begin research and implementation. Action steps are to convene the Nurse Family Partnership committee and these champions to identify gaps once Nurse Family Partnership is fully implemented and running for at least one year and research other home visitation programs appropriate to our community.

### **Mental Health**

The final Outcome Statement for MH is that Grand County will create additional high-quality mental health services including prevention, screening and treatment programs for all ages and residents. Strategies related to this outcome statement, timeline and action plans are:

- Implement a general mental health awareness class or presentation for staff, volunteers, and general public working with at-risk populations. The leading champion is Mind Springs Health. They already do a Mental Health First Aid Class. The goal is to support Mind Springs Health in securing funding for community scholarships to take the class (\$35 for the purchase of the book) and promote the class to populations such as providers and teachers. Other champions include Middle Park Medical Center, the Network, and Public Health. MPMC has already secured funding for MH trainings for all community providers. The timeline is one to three months. Immediate action step is to work with MPMC to identify the MH training specific to providers and implement that program. Mind Springs Health will then convene the champions to complete the detailed action plan including the identification of funding sources for scholarships and group rates for teachers.
- Complete a detailed gap analysis and data assessment on MH service capacity and need; use the report to make recommendations on training and staffing levels county-wide. Leading champion is Grand County Public Health. Other champions include the Network and school district representatives. The timeline is one to three months to convene the committee, complete detailed action plan, and determine the need for a consultant.
- *Improve the crises response system*. The leading champion is the Network for the short-term only. This is already happening with MPMC, independent providers, and Mind Springs Health through various venues. The Network will convene everyone by October at the latest to align all initiatives and determine which direction to move forward so we can affect change locally.
- Develop a flow chart that everyone in the county understands and uses for referrals (e.g. a referral road map). The leading champion is the Network with other champions including the gap analysis committee. The timeline is after the completion of the gap analysis or approximately 6 months. The Network will then

convene the committee to determine the detailed action plan based on knowledge gained by the gap analysis.

• *Implement a mental health navigator program* (also known as integrated behavioral health). The leading champions are the Network and Middle Park Medical Center because of their partnership and expertise with the patient navigator program. Other champions include three individual primary care providers and one mental health provider. The timeline is 6-24 months

## **Health Information and Awareness**

The MH and MICH work groups immediately determined that the health information and awareness issue should be separated in each of the MH and the MICH plans. However, both groups came up with the same strategies so the two plans were then combined into one. The MH outcome statement is that there will be greater awareness by residents and professionals about what mental health services exist in Grand County and how to access them. The MICH outcome statement is that information about maternal, infant, child health services and mental health services is easily accessible to all residents and providers using multiple touch points, locations, and strategies. Strategies related to this outcome statement, timeline and action plans are:

- Implement a single source of information, such as a website (e.g. summitcares.org), that can be utilized by individuals and service providers. The leading champion is the Network with other champions including Public Health, the school district, and an online teacher and parent. The timeline is to begin researching by the end of July 2014. Funding has already been identified. The action plan is to meet with a consultant to convey the vision of the website and garner a proposal that includes robust marketing of the website. The committee will then research other similar websites with positive and negative features, communicate with community partners and create content.
- Develop an information and education campaign to promote services and information on MH and MICH that is on-going and multi-pronged. The leading champion is Public Health with partnering champions including the Network, the school district, and an online teacher and parent. The timeline is three to six months. The initial action plan is dependent on the creation of a single source of information website. Public Health is gathering information from other community partners on their information and education campaigns to look at underlying topics. Once that is completed and the website is created, Public Health will convene the committee to discuss a detailed action plan that looks at aligning the underlying topics.

#### Future Accountability

The GCRHN will ultimately be responsible for holding the leading champions accountable for moving each strategy forward. One way in which GCRHN might do this is through the creation of a Health and Human Resources Coalition. The overarching goal of the HHRC is to align all health and human resources agencies' initiatives, improve functional collaboration, and ultimately work toward long-term, sustainable solutions of health inequities. In this role, the HHRC would be a good fit to hold these champions accountable.

# Grand County Rural Health Network Mental Health and Maternal Infant Child Health Strategy Rubric Sequence and Timeline for Implementation Final Action Plan

## **Mental Health**

**Outcome Statement 1:** Grand County will create additional high-quality mental health services including prevention, screening, and intervention and treatment programs for all ages and residents

Strategy	Support	Support	Community	Community	Organizational	Aligned Initiatives	Timeline and
	By Planning Groups	By Health Providers	Member Support	Champions	Champion	5	Sequencing
Strategy # 1 Implement a general mental health awareness class/presentation for staff, volunteers, and general public working with at-risk populations.	4.5	4.0	Average: 3.7		MPMC & Mind Springs Health		Short - ASAP
Strategy # 2 Complete detailed gap analysis and data assessment on MH service capacity and need; use report to make recommendations on training and staffing levels. (Overlaps with MICH efforts)	✓ ✓ 4.1	✓ ✓ 3.8	Average: 4.0	Julie (GCPH) Brene (GCPH) Tara (Teacher) Michelle (EGSD) Sally (GCRHN)	Grand County Public Health	Develop a flowchart that everyone in the county understand and uses for referrals	Short – 1 to 3 months
Strategy # 3 Improve the crises response system (Overlaps with MICH efforts)	3.0	3.2	✓ Average 4.1	Jen (GCRHN) Sally (GCRHN) MPMC Mind Springs Health Independent providers	GCRHN Short term only to convene providers		Short – 3 to 6 months By October

Strategy # 4 Develop a flowchart that everyone in the county understands and uses for referrals (e.g. a referral road map). (Overlaps with MICH efforts)	4.0	3.6	✓ Average: 4.7	Jen (GCRHN) Tara (teacher) Sally (GCRHN)	GCRHN	Same as #2	Medium – 6 -12 months
Strategy # 5 Implement a mental health navigator program. (Possibly include co-located care)	4.8	3.0	Average: 4.3	Jen (GCRHN) Carmen (MPMC) Sally (GCRHN)	GCRHN		Medium – 6 to 12 months
Strategy # 6 Implement depression and anxiety screenings in appropriate settings and assure screened patients receive appropriate referrals	√ √ 3.2	✓ 3.0	✓ Average: 3.6 ✓			Road Map, MH Navigator and Single Source of Info need to come first. Then revisit.	Not Sure – Wait and See after gap analysis, road map, MH navigator and Single Source of Info.

# **Maternal Infant Child Health**

**Outcome Statement 1:** High-quality services will be available and utilized efficiently for parents and children to ensure the healthy development of children in Grand County.

Strategy	Support by Planning Group	Support by Health Providers	Communi ty Member Support	Community Champions	Organizational Champion	Aligned Initiatives	Timeline and Sequencing
Strategy # 1 Parenting support and education - especially 1 <sup>st</sup> year of life			Indiv. scores: 5				
a. Nurse Family Partnership (within parameters)	4.0	<b>√</b> 5.0	✓ Average: 4.7	Tara (Teacher) Mark (Provider) Mary (MH)	Grand County Public Health		Short – ASAP Two weeks

				Jane (Principal GES)			
b. All parents/guardia ns get a home visit	3.0	4.0	√ Average: 4.4	Jane (Principal GES) Amy (Horizons) Brene (GCPH) Debbie (Concerned Citizen)	Grand Beginnings	Nurse Family Partnership – needs to be implemented first and running for 1 year before deciding on home visitation program	Long – 24 to 36 months

## **Health Information and Awareness**

**Outcome Statement 1:** Information about maternal, infant, child health services and mental health services is easily accessible to all residents and providers using multiple touch points, locations, and strategies. (Combined public education campaigns from Mental Health and MICH Strategies.)

Strategy	Supporte d by Planning Groups	Supporte d by Health Providers	Communi ty Member Support	Community Champions	Organizational Champion	Aligned Initiatives	Timeline and Sequencing
Strategy # 1 Develop an information and educational campaign — ongoing and multipronged							
a. Implement a single source of information, such as a website (like summitcares.org) that can be utilized by individuals and service providers.	3.5	4.0	√ Average: 5.0	Jen (GCRHN) Sally (GCRHN) Tara (teacher) Michelle (counselor)	Grand County Rural Health Network		ASAP
b. Develop an information and education campaign to promote services and information on MICH (on-going and multi-pronged)	<b>✓</b>	3.0	✓ Average: 4.1	Julie (GCPH) Tara (teacher) Jen (GCRHN) Michelle (counselor)	Grand County Public Health		Medium – 6 to 24 months