The following objectives detail what will be done by individuals and organizations in Pueblo County to address behavioral health in 2018. Progress to achieve activities outlined in the work plan will be tracked quarterly. A new work plan will be created for 2019. Activities will be modified based on progress, barriers and opportunities.

Behavioral Health Work Plan 2018

Goal: Partner Engagement

OBJECTIVE #1: By December 31, 2018, PCCHD will meet with partners involved in behavioral health issues in Pueblo County to determine current efforts, future plans and gaps in order to develop year 2-5 action plans.

BACKGROUND ON STRATEGY

Source: County Health Ranking and Roadmaps Action Center: Assess Needs and Resources

Evidence Base: "Understand current community strengths, resources, needs and gaps to help decide where and how to focus efforts."

Policy Change (Y/N): No

Lead Person/Organization: PCCHD, Public Health Planner

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Activity	Start/End	Partner	Anticipated Product or	Progress Notes
	Date	Organizations	Result	
Meet with partners and develop a list of current efforts, gaps and future plans.	January 1 – March 31, 2018	 Health Solutions Crossroads PCHC Heroin Task Force Others as appropriate 	 List of current and future efforts including partners involved created Gaps identified based on socio-ecological model, evidence-based approaches, and other relevant factors 	
Obtain commitment to implement and track efforts through the behavioral health CHIP action plans	April 1 – September 30, 2018	Partner organizations from activity 1	Signed letters of commitment detailing who will report and how often	
Create and approve CHIP action plans for years 2-5	April 1 – December 31, 2018	• Community Health Assessment Steering Committee • PCCHD	 Action plans detailing efforts and timelines Objective addressing identified gaps Efforts spanning the socio-ecological model Approved by CHA Steering Committee 	
Revise and recommit to CHIP action plans	October 1 - December 31, 2019	Partner organizations from activity 1	 Meetings held with partners to recommit to implementing efforts Action plans revised to adjust for successes, barriers, challenges and new efforts 	

Goal: Youth Substance Use

OBJECTIVE #2: By December 31, 2018, the Pueblo City-County Health Department (PCCHD) will work with community partners to complete a review of risk factor, protective factor and problem behavior assessment data in order to refine youth substance abuse efforts being implemented in Pueblo County.

BACKGROUND ON STRATEGY

Source: Monahan, K. C., Oesterle, S., Rhew, I. and Hawkins, J. D. (2014), The Relation Between Risk and Protective Factors for Problem Behaviors and Depressive Symptoms, Antisocial Behavior, and Alcohol Use in Adolescence. J. Community Psychol., 42: 621–638. doi:10.1002/jcop.21642

Evidence Base: Findings indicate that risk and protective factors for antisocial behavior and alcohol use are also associated with depressive symptoms, both concurrently and longitudinally. Prevention approaches that target risk and protective factors for externalizing problems may have crossover effects on depressive symptoms during adolescence.

Policy Change (Y/N): N

Lead Person/Organization: PCCHD, Communities That Care (CTC) Facilitator

ACTION PLAN	ACTION PLAN				
Activity	Start/End Date (m/d/y)	Partner Organizations	Anticipated Product or Result	Progress Notes	
Obtain signed releases of information from Pueblo City Schools and District 70 to receive Healthy Kids Colorado Survey (HKCS) 2017 data	January 1, 2018- April 30, 2018	PCCHDPueblo City SchoolsDistrict 70UC Denver	Signed releases from both school districts HKCS 2017 data reports		
Convene CTC Resource Assessment & Evaluation Workgroup to review data	May 1, 2018-June 30, 2018	PCCHD CTC Resource Assessment & Evaluation Workgroup	Youth-related data is updated		
Key data from assessments are shared with youth, school personnel, civic leaders, business communities, religious communities, social service providers and the general public	July 1, 2018- August 31, 2018	PCCHD CTC Resource Assessment & Evaluation Workgroup	Report on key data from HKCS 2017 generated and distributed		
The Community Action Plan is refined as needed based on assessment results	September 1, 2018- December 31, 2018	 PCCHD CTC Community Board CTC Key Leader Board 	Community Action Plan detailing efforts to address youth substance use is updated as needed.		

Goal: Youth Substance Use

OBJECTIVE #3: By December 31, 2018, PCCHD will work with community partners to oversee implementation of at least two recommended strategies under the Community Action Plan to reduce youth substance use in Pueblo County.

BACKGROUND ON STRATEGY

Source: Hawkins, J. D., Oesterle, S., Brown, E. C., Arthur, M. W., Abbott, R. D., Fagan, A. A., & Catalano, R. F. (2009). Results of a type 2 translational research trial to prevent adolescent drug use and delinquency: A test of Communities That Care. Archives of Pediatrics and Adolescent Medicine, 163(9), 789-798

Evidence Base: Results from the first randomized experimental trial of CTC demonstrate the success of this coalition-driven community prevention approach.

Policy Change (Y/N): N

ACTION PLAN				
Activity	Start/End Date (m/d/y)	Partner Organizations	Anticipated Product or Result	Progress Notes
Develop implementation plans for each program, policy or practice selected to reduce or prevent youth substance use	January 1, 2018- March 30, 2018	 PCCHD CTC Community Board CTC Key Leader Board 	Implementation plans for each strategy developed	
Develop an evaluation plan to monitor impact of each program, policy or practice implemented	April 1, 2018- June 30, 2018	 PCCHD CTC Community Board CTC Key Leader Board Contracted evaluators if needed 	Evaluation plan encompassing a work plan and time line for the collection of implementation goal and participant outcome data for each program, policy or practice	
Track implementation of strategies with fidelity	July 1, 2018- December 31, 2018	 Partners from Activity 2 Other relevant community partners 	Work plans are kept updated with progress notes	

	Meetings with partners held as needed	

Goal: Integrate Behavioral and Primary Healthcare and Educate Youth About Mental Health/Suicide.

OBJECTIVE #4: By August 1, 2018, Health Department staff will improve Pueblo County's behavioral health status through outreach, engagement, and community development, designed to systematically integrate primary care and behavioral health services and improve awareness and understanding of behavioral health issues.

BACKGROUND ON STRATEGY

Source: The Jason Foundation, Inc. 2010. Comprehensive Evaluation of "A Promise for Tomorrow".

Source: Substance Abuse and Mental Health Services Administration (SAMHSA). 2017. Health Care and Health Systems Integration.

Evidence Base: A Promise for Tomorrow empowers students with information, tools and resources to help identify at-risk youth, and become better able to make positive decisions for their collective future.

Evidence Base: As behavioral health is essential to health, ensuring behavioral health care services are more accessible and connected to the broader health care system will improve health outcome and reduce costs.

Policy Change (Y/N): Yes

Lead Person/Organization: PCCHD, State Innovation Model (SIM) Program

ACTION PLAN Activity Start/End **Partner Anticipated Product or Result Progress Notes** Date **Organizations** Implement suicide prevention August 1, 100% of middle school Health curriculum into middle schools Department students in D70 will have a 2017/July and presentation for high school • District 70 (D70) better understanding of 31, 2018 health classes • Pueblo City why suicide is not a solution to a temporary Schools problem 100% of high school freshmen in D70 will understand what mental health entails, and retain knowledge on types of mental illness and suicide prevention Develop and distribute toolkits August 1, Local primary At least 25% of providers and resource guide to integrate care and in Pueblo will be able to 2017/July primary care and behavioral behavioral health easily and quickly access 31, 2018 health entities information for patients and understand on how to Toolkits will contain information implement integrated care about various types of mental into their practices illnesses, maternal mental health. a guide on how to effectively implement integrated care

Goal: Behavioral Health Training (Regional Health Connector)

OBJECTIVE #5: By December 31, 2018 RHC will collaborate with SIM LPHA grantees to recruit, plan, and implement 6 Mental Health First Aid Training classes that will be provided at no cost in an effort to prevent suicide and reduce stigma surrounding mental illness in the Pueblo community by teaching community members how to learn the signs of a person in mental distress and how to get the affected person the help they need.

BACKGROUND ON STRATEGY

Source: Hadlaczky G, Hokby S, Mkrtchian A, Carli V, Wassmerman D. Mental Health First Aid is an effective public health intervention for improving knowledge, attitudes, and behavior: A meta-analysis. International Review of Psychiatry, 2014; 4; 467-475.

Evidence Base: Evaluation results demonstrate that Mental Health First Aid "increases participants' knowledge regarding mental health, decreases their negative attitudes, and increases supportive behaviors toward individuals with mental health problems."

Policy Change (Y/N): No

Lead Person/Organization: PCCHD, Regional Health Connector (RHC)

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ACTION PLAN				
Activity	Start/End	Partner	Anticipated Product or Result	Progress Notes
Participate in the SIM LPHA Steering Committee meetings	January 1 December 31, 2018	PCCHD Health Solutions Suicide Sucks NAMI	Monitor progress Change curriculum to meet community needs	
Plan, organize, and recruit	January 1	Parents Against Teen Suicide. PCCHD	Number of trainings	
attendees for the 6 training sessions to be completed by September 2018	December 31, 2018	 Health Solutions Suicide Sucks NAMI Parents Against Teen Suicide 	provided Number of participants	
Meet regularly with SIM LPHA grantees to determine target audiences, successes, gaps and process improvement needs in regard to each of the training sessions	January 1 December 31, 2018	PCCHD Health Solutions Suicide Sucks NAMI Parents Against Teen Suicide	Meeting notes	
Identify additional training opportunities for providers/community members and add to the roadmap as these become available	January 1 - December 31, 2018	 PCCHD Health Solutions Suicide Sucks NAMI Parents Against Teen Suicide 	Needs identifiedNext steps determined	

Goal: Effectiveness of Substance Abuse Services (Regional Health Connector)

OBJECTIVE #6: By December 31st, 2018 the community task forces/coalitions/PCP's that address substance abuse will be connected to each other by the RHC attending meetings and creating a crosswalk document, which will enable each group to gain a better understanding of the focus of others to avoid duplication of efforts and close gaps.

BACKGROUND ON STRATEGY

Source: Kania, J., & Kramer, M. (2011). Collective Impact. Stanford Social Innovation Review.

Evidence Base: "Large scale social change comes from better cross-sector coordinator rather than from the isolated intervention of individual organizations."

Policy Change (Y/N): No

Lead Person/Organization: PCCHD, Regional Health Connector (RHC)

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Activity	Start/End	Partner	Anticipated Product or Result	Progress Notes	
	Date	Organizations			

Organize SBIRT/CME training at no cost to providers in an effort to prevent and reduce alcohol and other drug use in the patients that see these providers.	January 1 December 31, 2018	PCCHD ICHP Parkview Medical Center Pueblo Primary Care Providers (PCP's) Communities That Care Heroin Task Force Triple Aim (PTAC)	•	Number of participants Number of trainings	
Join the new substance abuse reduction coalition being formed by the Public Health Project Specialists at PCCHD as well as the Heroin Task Force and Communities that Care groups	January 1 December 31, 2018	 PCCHD ICHP Parkview Medical Center Pueblo Primary Care Providers (PCP's) Communities That Care Heroin Task Force Triple Aim (PTAC) 	•	Meeting minutes Determine potential projects for partners to work together	
Recruit providers to the groups and keep providers informed of community efforts around substance abuse.	January 1 December 31, 2018	 PCCHD ICHP Parkview Medical Center Pueblo Primary Care Providers (PCP's) Communities That Care Heroin Task Force Triple Aim (PTAC) 	•	Number of providers recruited	
Determine additional training opportunities for providers that will help reduce substance abuse, over the course of the next two years.	January 1 December 31, 2018	PCCHD ICHP Parkview Medical Center Pueblo Primary Care Providers (PCP's) Communities That Care Heroin Task Force Triple Aim (PTAC)	•	Training opportunities provided to partners Number of participants in trainings	
Create a "Crosswalk Document" that will show the focus areas of each of the coalitions to help keep these groups informed of what other actions are occurring in the community.	January 1 December 31, 2018	PCCHD ICHP Parkview Medical Center Pueblo Primary Care Providers (PCP's) Communities That Care Heroin Task Force Triple Aim (PTAC)	•	Document completed Number of documents distributed	

Goal: Opioid Provider Education

OBJECTIVE #7: By December 31, 2018, PCCHD will convene, or actively participate in, a local coalition of at least ten community partners to address prescription drug misuse, abuse and overdose prevention in Pueblo County.

BACKGROUND ON STRATEGY

Source: Kania, J., & Kramer, M. (2011). Collective Impact. Stanford Social Innovation Review.

Evidence Base: "Large scale social change comes from better cross-sector coordinator rather than from the isolated intervention of individual organizations."

Policy Change (Y/N): No

Lead Person/Organization: PCCHD, Opioid Provider Outreach and Education Program

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Activity	Start/End Date	Partner Organizations	Anticipated Product or Result	Progress Notes
Provide guidance on prescriber education activities	January 1 – June 30, 2018	Coalition members including: • Law enforcement • Treatment • Behavioral Health • FQHC • Hospitals • Harm Reduction groups • Impacted individuals	Efficient and effective education activities and methods will be identified Activities will increase provider knowledge and improve attitudes around prescribing practices and CDC Opioid Prescribing Guidelines	
Identify existing or planned efforts related to drug misuse and organizations involved in those efforts	January 1 December 31, 2018	Coalition members	Areas of alignment and coordination identified Knowledge or resources and referral processes increased	
Develop action plan to increase provider education	January 1 December 31, 2018	Coalition members	Plan developed outlining provider outreach and education efforts, methods, timelines, etc.	

Goal: Opioid Provider Education

OBJECTIVE #8: By December 31, 2018, PCCHD will outreach to providers with a specific focus on reaching at least 30% of dental providers in Pueblo County to promote the use of CDC Opioid Prescribing Guidelines and drug misuse prevention strategies.

BACKGROUND ON STRATEGY

Source: Center for Disease Control and Prevention: CDC Guidelines for Prescribing Opioids for Chronic Pain

Evidence Base: Improving the way opioids are prescribed through clinical guidelines can ensure patients have access to safer, more effective chronic pain treatment while reducing the number of people who misuse, abuse, or overdose from these drugs.

Policy Change (Y/N): Yes

Lead Person/Organization: PCCHD, Opioid Provider Outreach and Education Program

ACTION PLAN

Activity	Start/End	Partner	Anticipated Product or Result	Progress Notes
	Date	Organizations		
Assess dental community to obtain feedback on appropriate and interesting educational activities	January 1, 2018-June 2018	PCCHD CDPHE PCC Dental Hygiene program Local Dentists	An understanding of what dental providers' educational needs and desires are and willingness to participate	
Outreach to providers regarding CDC Opioid Prescribing Guidelines and drug misuse prevention strategies	June 1, 2018- August 31, 2019	PCCHD CDPHE Coalition	 Education provided to at least 30% of dental providers Increased use of strategies by providers 	

Evaluate additional needs of providers	June 1, 2018- August 31, 2019	PCCHD CDPHE Coalition	Additional needs identified Plan to address needs created	
Evaluate knowledge of providers in their use of CDC Guidelines for prescribing, prescription drug management program (PDMP) and proper disposal of opioids	June 1, 2018- August 31, 2019	PCCHD CDPHE Coalition	 Increase in knowledge Increased use of CDC Guidelines and strategies 	

Goal: Capacity Building

OBJECTIVE #9: By December 31, 2018, PCCHD and the existing Community Health Assessment (CHA) Steering Committee members will recruit individuals to join the CHA Steering Committee in order to represent and provide expertise on behavioral health as CHIP action plans are implemented.

BACKGROUND ON STRATEGY

Source: County Health Ranking and Roadmaps Action Center: Work Together

Evidence Base: "Build and sustain partnerships that reflect the diversity of your community so you can collaboratively implement strategies that result in meaningful change."

Policy Change (Y/N): N

Lead Person/Organization: PCCHD, Public Health Planner

ACTION PLAN

ACTION PLAN				
Activity	Start/End	Partner	Anticipated Product or Result	Progress Notes
	Date	Organizations		
Brainstorm and recruit potential	January 1,	CHA Steering	List of potential	
individuals or organizations	February	Committee	individuals with who will	
	28, 2018		contact and 'ask'	
			Commitment to	
			participate	
Orient new members to Steering	March 1-	PCCHD	Members will understand:	
Committee	31, 2018		role, background and	
			future goals of Steering	
			Committee	
Work with Steering Committee to	April 1-28,	PCCHD	List of organizations and	
identify organizations and groups	2018	CHA Steering	partners to contact	
currently implementing efforts		Committee		
related to behavioral health				
Re-examine Steering Committee	September	CHA Steering	Committee evaluation	
make-up to ensure proper	1 –	Committee	completed to ensure	
representation based on CHIP	December		adequate representation	
action plans	31, 2018			
Recruit additional individuals or	October 1	CHA Steering	Additional members	
organizations to Steering	-	Committee	recruited and oriented as	
Committee as necessary	December		necessary	
	31, 2018			

Goal: Capacity Building

OBJECTIVE #10: By December 31, 2018, the Pueblo City-County Health Department will meet with the Regional Accountable Entity (RAE) to determine levels of collaboration and ways to support the CHIP.

BACKGROUND ON STRATEGY

Source: Colorado Department of Health Care Policy and Financing: <u>Regional Accountable Entity for the Accountable Care Collaborative</u>.

Evidence Base: Activities outlined are detailed within the requirements for the Regional Accountable Entity for the Accountable Care Collaborative request for proposal.

Policy Change (Y/N): Possible

Lead Person/Organization: PCCHD, Public Health Planner

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Activity	Start/End	Partner	Anticipated Product or Result	Progress Notes	
	Date	Organizations			

Schedule meeting with RAE leadership to discuss the CHA and CHIP in order to develop and implement collaborative strategies to reduce health inequities and disparities in Pueblo County.	July 1 – August 30, 2018	PCCHDCHA Steering CommitteeRAE	 Collaborative strategies identified Implementation steps determined
Collect and review public health data relevant to the CHIP and RAE Key Performance Indicators	October 1 – December 31, 2018	 PCCHD CHA Steering Committee Pueblo Triple Aim Corp. RAE 	Data will be reviewed to determine trends Review will guide resource allocation and program decisions CHIP outcome metrics will be updated
Determine who from RAE, PCCHD and/or CHA Steering Committee will serve on appropriate committees	July 1 – August 30, 2018	PCCHD CHA Steering Committee RAE	Individuals will be named to serve on CHA Steering Committee, Program Improvement Advisory Committee and other committees as appropriate