# Lincoln County

Community Health Improvement Plan

2018 - 2021

#### Overview

A Community Health Improvement Plan (CHIP) is a long-term, systematic effort to address public health problems based on the results of the Community Health Assessment activities and the community health improvement process. This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources (NACCHO, 2012).

This CHIP is a 3-year plan to help organizations focus energy and resources and support, policies, projects, and programs that will be most effective in improving the health of the people we serve.

The Lincoln County Community Health Assessment (CHA) was completed in 2016 as part of a collaborative effort in Lincoln County. A key stakeholder survey was conducted as part of the CHA to assess what stakeholders perceive as the greatest health concerns in Lincoln County. These areas carried over as the priority areas for the CHIP.

#### **Priorities Areas:**

- 1. Mental Health
- 2. Alcohol and Substance Abuse
- 3. Access to Care

Implementation and Tracking: CHAs and CHIPs will be completed every three years for Lincoln County. This CHIP will be reviewed at least annually to assess progress toward improvement in each of the priority areas.

### **Acknowledgements**

Thank you to the following organizations for participating in the development of the Lincoln County Community Health Improvement Plan.

- Lincoln County Health Department (LCHD)
- Cabinet Peaks Medical Center (CPMC)
- Northwest Community Health Center (NWCHC)
- 19<sup>th</sup> Judicial District Youth Court
- Lincoln County Unite for Youth (UFY)
- Libby Public Schools (Schools)

### Priority Area: Mental Health

#### Goal: Increase community coordination and awareness for Mental Health services and referral

Objective 1: Increase collaborative care by Integrating mental health into physical health, schools, medication management, etc. to decrease crisis situations

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Develop a team to develop a process	Ad hoc team developed including a	LCHD
and system for referral and sharing	legal representative	CPMC
health information to ensure		NWCHC
consumers are receiving the best, most		Schools
comprehensive care available		

## Objective 2: Reduce readmissions and duplicates into hospital emergency department, hospital inpatient and other clinics

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Develop a plan for coordinated effort	Plan developed	NWCHC
to analyze needs for social		CPMC
determinants of health for high utilizers		LCHD
Monitor readmission patients and	20 patients will have intensive	NWCHC
develop individual intensive discharge	discharge plans including follow-up	CPMC
plans	phone calls	

### Objective 3: Increase public awareness about mental health issues and resources available and create the culture of a trauma informed community

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Develop a community Mental Health	12 MHFA trainings provided to the	LCHD
First Aid training plan	community each year	
Invite media and develop stories to	Media invited to every Mental Health	LCHD
reduce stigma around mental health	Coalition meeting	
and empower residents of the		
community to reduce that stigma		

Objective 4: Improve transportation options during emergency mental health emergencies to other facilities or hospitals

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Analyze transportation options and	Solutions for options identified	CPMC
resource needs to and from all crisis		LCHD
stabilization facilities		

### Objective 5: Increase depression screening and suicide prevention efforts

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Implement universal screening in	PHQ9 screening enhanced in primary	CPMC
primary care	care settings	NWCHC
Evaluate utilizing PHQ9 in emergency	Outcome of the evaluation	CPMC
department and impatient at hospital		
Develop and implement suicide pre-,	Plan developed and implemented	Schools
inter- and post-vention plans at Lincoln		
County schools.		

### **Priority Area: Alcohol and Substance Abuse**

### Goal: Decrease SUD through prevention, education and treatment

Objective 1: Create community partnerships to address substance abuse and addiction related conditions

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Develop and implement a process for	Increased referrals to chemical	LCHD
referral and follow-up for consumers	dependency and follow up during	СРМС
with SUD as they integrate back into	discharge with phone calls	
the community after commitment or		
hospitalization to enhance continuity of		
care		
Develop and implement policies in the	Policies implemented in detention	LCHD
detention center for assessment and	center	
referral for SUD		
Develop Rx drug contracts	All clinics have their own Rx drug	CPMC
	contracts	NWCHC
Continue to plan for treatment court in	Submitted BJA grant application	LCHD
Lincoln County		

Objective 2: Increase collaboration, coordination, and community-based networking to prevent youth substance abuse.

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Evaluate current community-level partnerships,	Evaluation complete	UFY
Complete MOUs and Partner Involvement agreements	All MOUs and agreements complete	UFY
Update quantitative and qualitative data regarding youth perceptions of risk, perceived availability and perceived use by peers.	Updated with new data sets	UFY

### Objective 3: Reduce youth substance use

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Partner with Health Care Providers to	Provided all clinics with the	UFY
provide youth and parents with	information.	NWCHC
information about the effects of		CPMC
alcohol on sleep, performance and		
recovery during required sports		
physicals		
Partner with Schools to include	Reduce parent acceptance of youth	UFY
evidence-based prevention information	use	
for parents in quarterly report cards		

### **Priority Area: Access to Care**

### Goal: Improve Access to care for all individuals in Lincoln County

Objective 1: Reduce the burden on local transportation

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Increase telehealth options for patients	Reduced the amount of travel for	CPMC
	patients to out of town specialists	NWCHC
	and appointments	
Improve coordination of care when	Reduced the number of trips out of	CPMC
patients have out of town referrals and	the county for appointments by	NWCHC
appointments	coordinating appointments.	
Improve access to patients in their	Reduced the number of times a	NWCHC
home by reducing the need for the	patient must present in the clinic	
patients to come into office		

Objective 2: Improve transportation options to other facilities or hospitals

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Analyze transportation options and	List of options and solutions for	CPMC
resource needs	different transportation needs	LCHD

Objective 3: Increase referral opportunities for continuity of care.

Strategy/Activity	Performance Indicator/Outcome	Responsible
	Measures	Organization(s)
Evaluate technology for referral system	Developed a plan to implement a	CPMC
	referral system	NWCHC
		LCHD
Evaluate connecting Lincoln County to	Evaluation complete	СРМС
Kalispell Regional's referral system:		
Connect		

