



MAT-SU HEALTH
FOUNDATION

MAT-SU REGIONAL
MEDICAL CENTER

HEALTH IS WHERE WE

Live, Learn, Work & Play

2016 Mat-Su Community Health Needs Assessment
Year 3 (Calendar Year 2019) Executive Summary

Community Health Needs Assessment 2016 Year 3 Executive Summary – Calendar Year 2019

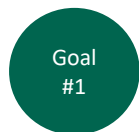
Executive Summary

Valley Hospital Association Inc. (VHA)/dba Mat-Su Health Foundation (MSHF), a nonprofit 501(c)(3) organization, is required by the Internal Revenue Service (IRS) to complete a Community Health Needs Assessment (CHNA) every three years (the last one was completed in 2016) and evaluate the implementation of strategy goals and objectives on a yearly basis due to VHA's 35% ownership in Mat-Su Regional Medical Center (MSRMC). MSRMC is a for-profit hospital that, without the ownership interest of VHA, would not be required by the IRS to complete a CHNA or implementation strategy action plan. The information from MSRMC that is contained in this evaluation shows the commitment the hospital has to supporting not only MSHF's mission and outreach to the community, but to the Mat-Su Borough residents as well.

MSHF retained the services of Strategy Solutions, Inc. in an advisory role to assist the foundation and hospital with the evaluation of its action plan. Significant accomplishments over the last year have been reported by MSHF, MSRMC and community partners. The infographic below depicts the 2016 Community Health Improvement Goals, as well as tools that the partners used to address these goals and achieve systems-level improvement.

Throughout 2019, MSHF and MSRMC along with their community partners have made substantial progress in all four goal areas, achieving policy change in numerous areas and short-term program performance targets. A new CHNA was completed in 2019, so the goals for 2020 will be updated to align with the needs identified in the most recent assessment.

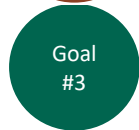
2016 Community Health Improvement Goals



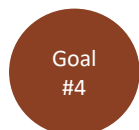
Mat-Su residents have access to an effective and complete behavioral health continuum of care.



All Mat-Su children and families are safe, healthy and thriving through an engaged and coordinated community.



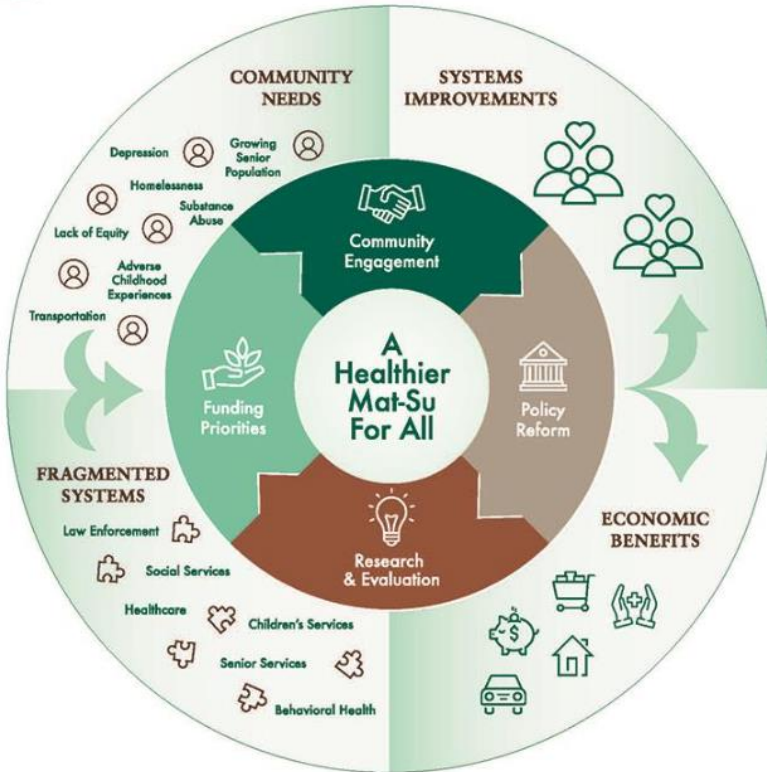
All Mat-Su residents have adequate income, housing, transportation, education levels, social connections, information on resources and health to support good health and access to physicians and behavioral health care.



All Mat-Su residents are a healthy weight.

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Our Way of Working in the World



Systems Improvement Tools

Community Engagement

Partners include MSHF, MSRMC, R.O.C.K. Mat-Su (Raising Our Children with Kindness), law enforcement and first responders, primary care providers, the Matanuska-Susitna Borough School District, Knik Tribal Council, Chickaloon Villa Traditional Council, senior centers, the Office of Children's Services, the Division of Behavioral Health, local birth centers and others.

Policy Reform

- State law that allows marriage and family counselors to bill Medicaid for their service.
- State law that allows behavioral health providers to be supervised by a physician instead of only a psychiatrist.
- \$250,000 in State of Alaska funding for the Alaska Healthcare Transformation Project.
- \$12 million in additional substance use treatment funding.
- \$7 million in State Disproportionate Share (DSH) funding for behavioral health inpatient care.
- Advocacy Win: for legislation requiring insurers to pay for services via telemedicine.
- State law passed that dedicates a portion of marijuana tax revenue to youth substance abuse prevention through after school program funding.

Research and Evaluation

- Mat-Su Health and Human Services Workforce Development Assessment and Plan – a strategic plan for our Workforce Development Focus Area.
- MSHF and the Matanuska Susitna Borough collaborated on a Coordinated Health and Human Services Transportation Assessment and Plan.

Grantmaking and Sponsorships

- MSHF Academic and Vocational Scholarships
- Target Wellness Grants (<\$15K)
- Healthy Impact and Discovery Grants (>\$15K)
- Strategic Grants
- MSHF and MSRMC Sponsorships

How We Approach Our Work



Focus Areas

Healthy Minds

- Complete continuum of behavioral health services
- Integrated care
- Reduce alcohol abuse
- Provider sustainability under Medicaid reform

Healthy Aging

- Maximize Independence of Older Alaskans
- Sustainable Senior Centers

Healthy Families

- Community Connections
- Promote positive youth development
- Increase quantity and quality of early care and learning programs
- Increase access to behavioral health care for children and families

Workforce Development

- Workforce recruitment and retention
- Supporting workforce growth
- Leadership and professional development
- Workforce development partnerships

Health Status Improvement

- Physical activity and nutrition
- Health screenings
- New specialties and clinical programs

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Mat-Su residents have access to an effective and complete behavioral health continuum of care.

Major investments and accomplishments of the implementation plan in 2019

MSRMC is expanding adult psychiatric and substance abuse treatment

On November 13, 2017, the State of Alaska approved the Certificate of Need application for MSRMC to add 36 inpatient beds for adult psychiatric and substance abuse treatment. MSRMC began the design/development phase of this expansion, which consisted of defining and describing all the important aspects of the space, including its form and function as well as the features and furnishings.

The psychiatric emergency department is also part of MSRMC's Emergency Department Expansion Plan. The timeline for the Emergency Department Expansion Plan was revised because the hospital was able to adjust its other expansion projects and corresponding timelines to expedite the construction of inpatient behavioral health beds.

The MSRMC inpatient behavioral health unit is slated to open in January 2020.

MSHF provided more than \$1,400,000 in behavioral health funding support in 2019

The funding supported behavioral health services in the Mat-Su Borough to fill gaps in the continuum of care, including: providing behavioral health support in 10 local schools for the 2019/20 school year, operational funding for children and family behavioral health services including the Palmer Families with Infants and Toddlers (FIT) therapeutic court, the High Utilizer Mat-Su (HUMS) program to address the needs of high

utilizers of Emergency Department Services, Child-Parent Psychotherapy Training, Crisis Intervention Team (CIT) Training, Peer Support Worker Training, expansion of Substance Use Disorder (SUD) outpatient services and implementation of harm reduction services.

High Utilizer Mat-Su (HUMS) program implemented to address ED utilization

Funded by MSHF through LINKS, the High Utilizer Mat-Su (HUMS) program is designed to increase patient self-reliance to more effectively address their health care needs by helping them navigate community-based systems and reduce their barriers to accessing appropriate care.

Training a Workforce for a Complete Continuum of Care

The Mat-Su Borough is Alaska's fastest growing region. This growth is expected to continue in every age cohort over the next three decades, outpacing Anchorage and the entire state. While Mat-Su's employment rate and available labor force have experienced growth, it has not matched the borough's population growth, with an unemployment rate consistently higher than both Anchorage and Alaska since 2008.

MSHF offered scholarships for 26 behavioral health professionals and R.O.C.K. Mat-Su sponsored a year-long training for Child-Parent Psychotherapy with 35 behavioral health providers training from Mat-Su. MSHF also sponsored a Workforce Development Network Meeting with educators and employers. MSRMC was able to fill 38% of hospital positions by local residents.

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Evaluation of the Crisis Intervention Team Training

MSHF continues to support the Crisis Intervention Training (CIT) coalition by funding a facilitator (\$25K annually), co-funding a yearly CIT Academy training and co-funding periodic Mental Health First Aid Training. MSRMC continues to invest in CIT. This year, over 200 first responders were trained in Mental Health First Aid (MHFA) and trained in CIT Academy. Additionally, 25 Community Council representatives were trained in MHFA. All Alaska State Troopers Palmer Detachment are trained in MHFA.

MSRMC had 189 staff who completed trauma-informed training, which accounts for 23% of the staff. MSHF had three staff participate in a year-long cohort with the National Council for Behavioral Health and participated in a building-wide team to create trauma-informed changes to the building aesthetic, use and policies.

Behavioral health incidents where CIT Officers were involved were less likely to result in hospital transport for involuntary commitment without pending criminal charges. These officers were more likely to report that the subject had been stabilized at the scene and that they had given resources to the subject.

Evaluation of the Behavioral Health in Schools Initiative

The Behavioral Health in Schools Initiative included funding to provide behavioral health services in 10 schools for the 2019/20 school year. Outcomes included development of positive relationships with school staff, a shared commitment among school staff and providers to routinely consult on student needs and appropriate space accommodations for program services.

The majority of students referred for program services were able to receive them in addition to therapy sessions being available during the school day.

Evaluation of the Palmer Families with Infants and Toddlers (FIT) Therapeutic Court

Implemented in 2018, the Palmer Families with Infants and Toddlers (FIT) Court is designed to better support children moving through the court system. Based on recent neurological research, adverse episodes - loss of parental contact, neglect and trauma can actually shape the way a child's brain develops, impacting them for their lifetimes. The effort looks holistically at linking government with health care and social services to improve system efficiency and to enhance communication about children's health and wellness.

During the first two years, the court served 21 families consisting of 16 adults and 20 children. Through the court children can receive a behavioral health assessment, parents can receive mental health, substance abuse and/or trauma assessments and be connected to the appropriate level of care.

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Goal
#2

All Mat-Su children and families are safe, healthy and thriving through an engaged and coordinated community.

Major investments and accomplishments of the implementation plan in 2019

In 2019, MSHF provided more than \$6,400,000 in grant funding to fill gaps in the array of services and programs that support children and families in the Mat-Su Borough

The funding supported programs that supported youth development, families involved in the child welfare system, community connections and social support programs, developmental screenings, parenting and early learning programs.

MSHF investment in early learning initiatives

The foundation awarded funds for early childcare providers for rental space and to commission an environmental scan of the early childhood learning and care sector in Mat-Su. Funding was also provided to support a statewide childhood partnership.

The foundation engaged grantees and other funding partners to address FY2020 Alaska State Budget concerns. This effort fully or partially restored two of our three priorities (early childhood and housing/homelessness).

R.O.C.K. continues to promote development screening, with 10 medical practices currently participating in the AK Developmental Screening Initiative.

MSHF continued to serve as the backbone organization for R.O.C.K. (Raising Our Children with Kindness) with the goal of promoting family resilience and eliminating child maltreatment

R.O.C.K. supported 15 schools to create a year-long process to become “Trauma-Sensitive” schools. The

program contracted with Knik Tribe to implement the Building Family Futures Program to offer voluntary, conflict-free case management services to tribal members with a screened out report of harm. R.O.C.K. hosted a self-care focused Building Community Connections event for 56 OCD workers. R.O.C.K. also sponsored 60 attendees at a Trauma Stewardship Institute training.

MSHF helped to secure a Robert Wood Johnson Grant to launch Youth360

Youth360 opened its doors in the summer of 2019, serving at least 144 unique students, providing 231 days of programming, 1,330 rides to/from programming and over 30 community presentations. The program builds youth connection with positive and meaningful activities for youth afterschool and in the summer that is accessible for all. It also offers education and support for parents and caregivers about the importance of engaging and connecting with youth.

Youth report that Youth360 has been life changing, helped them relax, and has helped them develop social skills.

MSRMC enhanced relationships with birthing centers

Initiated through a memorandum of understanding between the MSRMC and all birthing centers, improved relationships between the hospital and birthing center has resulted in a sustained improvement in the transfer of mothers and babies in distress. MSRMC also hired a new OB director this year.

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All Mat-Su residents have adequate income, housing, transportation, education levels, social connections, and information on resources and health to support good health and access to physicians and behavioral health care.

Major investments and accomplishments of the implementation plan in 2019

MSHF launched *Connect Mat-Su*, a regional resource and referral network and hub

The program includes a physical location and information database that provides Mat-Su residents with immediate access to the information, referrals, and direct assistance needed for them to thrive physically, mentally, and emotionally.

In 2019 the program served 924 residents and approximately 3,400 residents utilized the LINKS Parent Resource Center and Aging and Disability Resource Center. A social connections calendar was created to inform social connection opportunities for families.

MSHF supported local housing and homeless prevention efforts for youth and seniors, including hospice and skilled nursing beds

MSHF promoted safe and affordable housing for Mat-Su residents by funding Valley Residential Services for a capital supportive housing project. MSHF also funded the Mat-Su Coalition on Housing and Homelessness coordinator and the Homeless Connect event. Funding was provided to the United Way of Mat-Su to assist with rehousing efforts after the McKinley Fire, as well as funding to a domestic violence shelter for equipment and furnishings.

MSHF convened local housing providers to discuss recent cuts in state funding and to assess the gaps and strengths in the current system. Advocacy efforts resulted in fully or partially restoring funding for two of our three priorities (early childhood and housing/homelessness).

MSRMC expanded access to physicians, primary care and preventative care services

A new internal medicine provider was recruited. There was an increase in the number of patients receiving urgent care during extended hours (defined as after 5:00 pm on M-F, and anytime on the weekends). Hospital employees (577) received basic fall prevention training during new employee/contractor orientation or through the active learning center.

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All Mat-Su residents are a healthy weight.

Major investments and accomplishments of the implementation plan in 2019

MSRMC-Sponsored Community Physical Activity and Health Nutrition Initiatives

MSRMC sponsors 40 community initiatives directly related to physical activity and health nutrition. They also increased the number of Glucose and Cholesterol screenings from the previous year.

MSHF invested in trails and parks infrastructure

The foundation provided a multi-year grant (\$4,950,000) to Mat-Su Trails and Parks Foundation (MTPF). The MTPF awarded grants which will result in one mile of trail maintenance, and funds for a Trail Stewards Program and an Avalanche Forecaster Project.

MSHF supports emergency food assistance and health nutrition

MSHF provided over \$600,000 to support food security. Program officers assembled food security providers to discuss the need for food for children on the weekends in response to several requests for school for support in this area. MSHF also funded an Analysis of the Senior Food Nutrition System in the Mat-Su to outline strengths and gaps in the system.

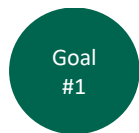
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Methodology

During the beginning of 2020, MSHF and MSRMC conducted an evaluation of the Community Health Needs Assessment Implementation Strategies that have been underway over the past year. Both MSHF and MSRMC submitted a review of the outcomes and impact data that was tracked and reported during the last calendar year.

Overview

The evaluation process includes a review of each of MSHF and MSRMC goals, objectives, implementation strategies and accomplishments for the following four goals:



Mat-Su residents have access to an effective and complete behavioral health continuum of care.



All Mat-Su children and families are safe, healthy and thriving through an engaged and coordinated community.



All Mat-Su residents have adequate income, housing, transportation, education levels, social connections, and information on resources and health to support good health and access to physicians and behavioral health care.



All Mat-Su residents are a healthy weight.

A new community health needs assessment was completed during 2019. The goals and objectives were reviewed and updated at that time.




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Progress Reports on the Implementation Strategy Action Plan

Throughout the evaluation process, detailed information regarding the progress of each of the goals and objectives was captured, including any outcomes/impact measurements related to the implementation strategy action plan indicators. The following is the progress report for each of the goals and objectives for MSHF and MSRMC.

Goal 1: Mat-Su Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care

Goal 1 has 13 objectives that MSHF, MSRMC, or a collaboration of the two organizations are working on. Below is an overview of where each of the objectives stand based on a color-coded system: green = objective complete or achieved yearly milestones, yellow = objective postponed or stalled due to some barrier, blue = objective not begun based on the original timeline and red = will not be completed or focus was changed.

2017	2018	2019	Objective A:
			Build out the MSRMC Emergency Department as part of Behavioral Health Crisis System (MSRMC)

Indicators:

- **% of MSRMC ED behavioral health patients who are high utilizers**
 - **Total patients with a primary BH diagnosis making "BH ED" visits:** 1,940 which is up from the previous two years (1,331 in 2018 and 1,314 in 2017)
 - **Total ED visits by BH patients:** 1,398, which is down from the previous year (3,413)
 - **Total patients with a primary BH diagnosis w/ 5 or more unique ED visits ("super utilizers"):** 169, up from 156 in 2017
 - **Total ED (BH visits + Non-BH visits) visits by super utilizers:** 239, which is lower than the previous two years (1,434 in 2018 and 1,260 in 2017)
 - **Percentage of patients w/primary BH DX who are super utilizers:** 2.15% which is lower than previous years (12.7% in 2018 and 11.9% in 2017)
- **% of MSRMC ED staff trained in Crisis Intervention:** 100% of ED staff are trained in Handle with Care and Trauma Informed Care.
- **Date Psychiatric ED up and running:** The psychiatric emergency department is part of Mat-Su Regional Medical Center's Emergency Department Expansion Plan. The timeline for the Emergency Department Expansion Plan is being revised because the hospital was able to adjust its other expansion projects and corresponding timelines to expedite the construction of inpatient behavioral health beds.

Note: a "BH Patient" is any patient who had a visit to the ED in which his or her primary diagnosis is from McDowell's BH diagnosis codes/groupers.

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RESULTS/IMPACT

MSRMC received approval from the State of Alaska on November 13, 2017 to add 36 inpatient beds for adult psychiatric and substance abuse treatment. In 2018, MSRMC initiated the development phase, which consists of defining and describing all of the important aspects of the space, its form and function, fine-tuning its features and furnishings, and what the finished product will look like. In 2019, construction was expedited for inpatient behavioral health beds. The unit is slated to open in January 2020.

2017



2018



2019



Objective B:

Support the Development of Needed Behavioral Health Crisis Services (MSHF) – continue to support the development of the CIT, MDT, and the Community-based Coordinated Care Project by providing funding for facilitation and training to create these components of the continuum of care.

Indicator:

- **# of first responders trained in either CIT or Mental Health First Aid:** over 200 first responders were trained in Mental Health First Aid (MHFA) and CIT Academy. Additionally, 25 Community Council Representatives were trained in MHFA.

CREATING A COMPLETE SYSTEM OF CARE – CRISIS SERVICES

FUNDING/SUPPORT

In 2019: MSHF continues to support the CIT coalition by:

- Funding a facilitator (\$25,000 annually)
- Co-funding a yearly Crisis Intervention Team Academy training
- Co-funding periodic Mental Health First Aid Trainings
- Sponsoring three first responders to attend a national MHFA instructor conference sponsored by the National Conference for Behavioral Health
- Awarding the MSHF 2018 Bert Hall Award to Lt. Dunn who was a community champion for the CIT Coalition

RESULTS/IMPACT

- Over 200+ first responders have been trained in MHFA/ CIT Academy; additionally, 25 Community Council representatives were trained in MHFA
- There is increased communication between MSRMC Emergency Department staff and EMS/law enforcement
- Department of Public Safety has endorsed the CIT lapel pin as part of the state trooper uniform
- All Alaska State Troopers Palmer Detachment are trained in MHFA
- MHFA training adopted by the statewide public safety academy for all law enforcement trainees
- Out of 307 incident entries made by Alaska State troopers for August 1 through Dec 31, 2019, the responders who were trained in Mental Health First Aid were statistically significantly more likely to use verbal de-escalation in the incident: 96% of those trained used verbal de-escalation compared to 86% of those not trained. This relationship was also seen for those officers trained in Crisis Intervention Training (97% vs. 92%).

SUCCESS STORY

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CREATING A COMPLETE SYSTEM OF CARE – CRISIS SERVICES

Excerpt from local letter to the editor about CIT officers: I'm writing tonight to honor and publicize my deep respect for two Alaska State Troopers who earlier this evening prevented what could easily have escalated into an out of control situation resulting in who knows what level of unnecessary arrests and/or violence if these two officers responding had been one of those seemingly increasing - minority - of out of control Bully-Cops. Those kinds of law enforcement officers seem to get too much publicity while those whose self-control, respectfulness and just downright professionalism get little to none of the media recognition they otherwise so deserve. A kind and helpful older next door neighbor who we know very well suffered some kind of maybe heart-related neurological incident exhibiting behavior totally opposite of his normal behavior in the middle of road asking the occupant of a car turning into a driveway to call the police; myself being asked to make that call. Two separate State Trooper's vehicles arrived shortly but my arrival to the scene was delayed such that I didn't arrive till shortly after the interaction began only to watch these two officers safely and so respectfully interact with this mildly aggressive obviously out of control otherwise very kind man. They would have had no idea of the "normal" behavior of our good neighbor before my arrival to vouch for him - yet they were reacting in a calm and so a respectful way that he began to calm and I brought a chair while these smart Troopers called for Paramedics who on arrival and almost immediately recognized – from my overhearing of interchange with the troopers – neurological and accelerated heart rate thus he was transported to the hospital. I'm in my 70's and have personally witnessed the shameful behavior of these FEWER bully-styled-impulsive "Cops." Based on these Alaska Trooper reactions to the behavior I witnessed I firmly believe this incident might very likely otherwise have escalated into an arrest or even headlines worse. Trooper Pierre Burkett and Trooper Heidi Venie so deserve honorable recognition for their professionalism in their handling of this incident. Thank-you for reading my effort to get them that deserved publicity – Thank You.

2017 2018 2019 Objective C:



Increase Emergency Department Behavioral Health Staffing (MSRMC)

Indicator:

- **Hire psychiatric practitioner for the ED:** Two psychiatrists were hired in 2019 with an additional one hired in January 2020.

2017 2018 2019 Objective D:



Improve the Environment for Behavioral Health Patients in the Emergency Department (MSRMC)

Indicator:

- **# of ED inpatient BH beds at MSRMC:** In 2019, there were two secure beds in the ED. MSRMC is planning for 4 psych ED beds by 2021. MSRMC opened a 16-bed inpatient behavioral health unit on January 27, 2020.

2017 2018 2019 Objective E:

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Support a Complete Behavioral Health System of Care (MSHF and MSRMC)

Indicators:

- **# of grants awarded in BH continuum of care:** 18 grants awarded in 2019 for a total of \$829,641.
- **BH services that have greater than one week waiting time:** Data not available for outpatient mental health providers. SUD providers for youth and adults report at beginning of 2020 0-1 week wait for outpatient SUD services.
- **% of residents who know where to go for behavioral health services:** 76% of residents said that they agree or strongly agree that they know where to find help for treatment of addictions; 79% of residents said that they know where to seek treatment for mental health problems. (2019 Mat-Su Household Survey)
- **# of options for immediate access to detox:** one residential detox, and some patients at MSRMC will undergo detox during their hospital stay. The ambulatory detox process using the “Bridge” may still be being used through MSRMC Urgent Care. Additionally, there are several providers who are offering Medicated Assisted Treatment. Southcentral residential detox treatment program has a wait of at least 3-7 days (capacity will increase in 2020 with the addition of 8 more beds).

1. Support the creation of services to fill gaps in the BH continuum of care for Mat-Su residents through grant funding, statewide policy change and leveraging funding from federal, state and local sources.

CHANGING POLICY AND FUNDING FOR A COMPLETE CONTINUUM OF CARE	
RESULTS/IMPACT	
POLICY/FUNDING	ADVOCACY
<ul style="list-style-type: none"> • Policy was passed that expands the SHARP Program for student loan repayment, resulting in more behavioral health providers in the Mat-Su. • Contracted with experts from the National Council on Behavioral Health to lead a learning cohort of Mat-Su BH providers to prepare organizations for incoming Administrative Services Organization. Two learning cohort convenings were held in 2019. 12 Mat-Su BH organizations were assessed for capacity for new funding environment and received one-on-one visits with experts. Two other organizations received in-depth assessment and written coaching plan. 	<p>MSHF advocated for:</p> <ul style="list-style-type: none"> • Legislation requiring insurers to pay for services via telemedicine (still in process). • Legislation requiring physicians prescribing opioids to provide more information to their patients (still in process). • Legislation to have Licensed Professional Counselors be able to bill Medicaid in Alaska (passed).

TRAINING A WORKFORCE FOR A COMPLETE CONTINUUM OF CARE

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FUNDING/SUPPORT	RESULTS/IMPACT
26 Academic Scholarships awarded for BH professionals	
MSHF sponsored the 3rd Annual Peer Power Self-Advocacy Summit (\$12,600).	120 individuals were trained.
MSHF hosted educators and employers from Mat-Su and Anchorage to participate in a Workforce Development Network Meeting.	These stakeholders had the opportunity to network and share program updates. The group also expressed that they would like to meet regularly and not lose momentum. They expressed that communicating with each other ensures that all their efforts and needs align.
R.O.C.K. sponsored a year-long training cohort in 2019 for Child-Parent Psychotherapy.	35 BH providers were trained and three were from Mat-Su.

CREATING A COMPLETE SYSTEM OF CARE – CHILDREN’S BH SERVICES	
FUNDING/SUPPORT	RESULTS/IMPACT
Organizational capacity building and leadership transition for CODI – an organization that provides children and families with BH care (\$76,781).	200 beneficiaries.
Set Free Alaska (\$237,870) and Full Circle Counseling (\$416,273) for provision of behavioral health services in schools.	In the 2019/20 school year: 165 students received services. 66% of students had mild-moderate or emerging MH needs and 30% had needs that could be classified as significant emotional disturbance. School and district administrators anecdotally said the 2019/2020 school year was positive for the program’s development and infrastructure across the school system, and for the reduction in stigma to seek and receive behavioral health services. One school remarked during the spring meeting that a young lady receiving medication management had been in and out of a treatment facility. Family services were offered which brought in the student’s mother addressing her addiction, and then a sibling also entered the counseling. The school administrator said the young woman is doing “exceptionally well” thanks to Full Circle working with the family. This program is increasing access, alleviating community waitlists, and eliminating transportation, funding and logistical barriers for children and their families. It is worth noting that these community BH providers are effectively working together.
Willow Elementary school with provision of behavioral health services by Sunshine Community Health Center. (\$10,000)	
The Family, Infant, and Toddler Court provided \$102,600 in funding for children and parents to receive BH services and assistance with supervised visitation.	

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CREATING A COMPLETE SYSTEM OF CARE – SUBSTANCE USE TREATMENT SERVICES	
FUNDING/SUPPORT	
True North to create a peer support program that provides services in the community and the MSRMC Emergency Department (\$21,910).	
Recover Alaska (\$150,000) to work to address and prevent the misuse of alcohol.	
Nugen’s Ranch to prepare to convert from grant funding to Medicaid billing.	

CREATING A COMPLETE SYSTEM OF CARE – ADULT MENTAL HEALTH SERVICES	
FUNDING AND SUPPORT	RESULTS/IMPACT
LINKS (\$361,108) was funded to run the High Utilizer Mat-Su Program.	According to the 2019 HUMS Evaluation: there was an ED utilization overall reduction for HUMS patients of 20.8%. Emergency Department utilization continues to decrease with time enrolled per patient. Enrollment for over one year results in a 52.6% decrease. Cost Savings (for those with a decrease in utilization) was \$2,167,810. Overall Cost Savings for the program in 2019 was \$1,910,210. Provider feedback: “I am aware of how dedicated HUMS is to helping their clients achieve their goals, no matter what their personal goals are. I have seen how HUMS clients are treated with dignity and respect. I see the caring and professional assistance no matter who the client is. HUMS is a valuable and necessary program in our community.”
Daybreak, which provides case management for residents with SMI, received \$30,200 in emergency assistance.	108 beneficiaries.
Alaska Family Services: MSHF awarded a grant in December 2019 to provide Technical Assistance, operations, planning and quality assurance.	

2. Support Medicaid reform that supports services in a complete continuum of care and build the capacity of local providers to be sustainable under Medicaid.

CHANGING POLICY AND FUNDING FOR A COMPLETE CONTINUUM OF CARE
FUNDING/SUPPORT
MSHF is a member of the Medicaid for All Alaskans steering committee. This group brings many organizations together to advocate to protect Medicaid.

3. Support immediate access to BH services for children and families.

CHILDRENS BEHAVIORAL HEALTH SERVICES
Refer to CREATING A COMPLETE SYSTEM OF CARE – CHILDREN’S BH SERVICES (above).

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2017 2018 2019 Objective F:



Connect MSRMC Behavioral Health Patients to Appropriate Outpatient Services

Indicators:




- **% of BH patient “Bounce Backs” to ED within specified timeframe:** In 2019, 4.86% of BH patents bounced back. For 2019, there were 68 (down from 216 and 186) BH patients that had at least one bounce back visit to the ED for a total of 103 (down from 442 and 241) bounce back visits. A bounce back visit is any type of revisit to the ED by the BH patient within 72 hours.
- **% of BH patients who receive a successful follow-up phone call after ED discharge:** Follow-up phone calls are not being done routinely, however, if there is a referral needed, they are followed up by BH clinicians.

- 1. Ensure successful transitions of BH patients out of MSRMC to home or Anchorage facilities. The includes a follow-up system for BH patients including the provision of follow up phone calls.**

RESULTS/IMPACT

<p>The Multi-Disciplinary Team (MDT) was established in 2017 to serve the complex needs of the patient and to eliminate their inappropriate use of the ED by increasing the patient’s connection to more appropriate community-based services outside of the hospital setting. This group started meeting in October 2017 and continued its work to assist patients in better coordinating their care. In 2019, the MDT met to clarify its mission and purpose and worked to broaden its scope beyond serving HUMS.</p>

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2017 **2018** **2019** **Objective G:**
   **Encourage Appropriate Use of the ED and Improve the Coordination of Care for Patients Within and Between in the Emergency Departments Statewide (MSRMC)**

Indicators:




- **# of primary care appointments made within 72-96 hours after discharge:** This was no longer available to track because ICA was not in use after the end of 2018.
- **# of ED prescribers enrolled in prescription monitoring database:** 100% of ED prescribers are enrolled in the prescription drug monitoring database.
- **# of community health care providers connected to the MSRMC ED electronic information system:** HUMS has access to MSRMC ED electronic system to help track and monitor high utilizers ED visits. At this time, no other community partners have access to this system.

RESULTS/IMPACT
MSRMC has been participating in activities consistent with the Seven Best Practices from Washington State that are focused on encouraging appropriate use of the ED. Additionally, MSHF hired an expert consultant to lay the groundwork for the High Utilizer Mat-Su Program which began in January 2018.

2017 **2018** **2019** **Objective H:**
   **Encourage the Connection of Community Services to the MSRMC ED Electronic Information System (MSHF)**

- 1. Support local medical and behavioral health care providers and clinics to be connected to MSRMC Care Coordination through connection with the ED electronic information (EDIE) system used by MSRMC.**

CREATING A COMPLETE SYSTEM OF CARE – CONNECTING PROVIDERS TO OTHER PARTNERS	
FUNDING/SUPPORT	RESULTS/IMPACT
The High Utilizer Mat-Su (HUMS) Program uses the PreManage portal for EDIE system to coordinate care for their 100+ patients.	<ul style="list-style-type: none"> • There was an ED overall reduction for HUMS patients of 20.8%. • Those enrolled in HUMS for over a year had a 52.6% decreased in ED utilization. • HUMS program connected to and utilizing EDIE for patient follow-up.

2017 **2018** **2019** **Objective I:**
   **Improve the Quality of Behavioral Health Services Delivered at MSRMC**

Indicator:

- **# of ED staff educated on behavioral health assessment and Pride Training:** 58 RNS were educated on BH assessments for full competencies and training related to BH suicide risk.

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2017 **2018** **2019** **Objective J:**



Improve the Quality of Behavioral Health Services in the Community (MSHF)

Indicator:

- # of Mat-Su organizations trained and supported on BH quality care practices: Data not available.

CREATING A COMPLETE SYSTEM OF CARE – TRAINING FOR QUALITY	
FUNDING/SUPPORT	RESULTS/IMPACT
Supported program for improving and increasing linguistically appropriate psychological services in AK. (\$10,000)	30 beneficiaries.

Indicator:

- # of Mat-Su organizations trained and supported serving LGBTQ residents: Not addressed.

- Support Pride training for staff at MSHF and community organizations to better serve Mat-Su residents:** MSHF funded the organization Choosing Our Roots to train host families for LGBTQ homeless youth.

2017 **2018** **2019** **Objective K:**



Maintain Specific Crisis Care Teams and Participate in Data Collection (MSRMC)

Indicators:

- # of Sexual Assault Response Team (SART) visits to MSRMC: 32 visits that results in a SART Exam. MSRMC does not track all cases that are triaged, only actual exams. There are over 100 cases triaged a year that don't result in an examination.
- # of Suspected Child Abuse and Neglect Team (SCAN) visits to MSRMC: MSRMC reported 166 Reports of Concern to Office of Children's Services (OCS) with each being reviewed at the monthly SCAN Team meetings.

2017 **2018** **2019** **Objective L:**



Ensure Use of Crisis Care Data to Improve the System of Care (MSHF)

Indicator:

- Data collected to evaluate ED-related implementation plan activities: MSRMC provided data for this evaluation, data for a crisis system analysis and data for the High Utilizer Mat-Su program evaluation.

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2017	2018	2019	Objective M: Improve the Quality of Behavioral Health Services and Care Coordination in the Mat-Su Medical and Behavioral Health Community (MSHF and MSRMC)
			

Indicators:

- # of settings in Mat-Su offering integrated behavioral and physical health care: seven settings exist – Mat-Su Health Services, Sunshine Community Health Clinic, Southcentral Foundation, Ptarmigan Pediatrics, Solstice Family Medicine, Life House and Capstone Family Medicine.
- # of primary care settings that received support to implement and maintain the use of SBIRT: one – True North is providing SBIRT Assessment in the MSRMC by Peer Support Workers.
- # of Mat-Su health care settings conducting routine trauma screening: Data not available.
- % of residents who report no stigma in seeking behavioral health care: Data not available.
- # of MSRMC staff trained on social stigma: 817 employees were trained.

1. Sponsor and/or co-sponsor physician CME offerings on business models that support implementation of evidence-based practices including primary care, BH integration, SBIRT, coordinated care, etc.

RESULTS/IMPACT
The Vice-President of Programs is mentoring a Doctoral of Nursing Practice student to pilot a communication tool that will improve communication between non-located behavioral health and primary care professionals. She is having a series of three meetings to train the providers on how to use the tool and collect their feedback.

2. Support the integration of physical and behavioral health in primary care settings through grant-making, trainings, and leveraging statewide and federal funding.

RESULTS/IMPACT
Ptarmigan Pediatrics conducted a MSHF funded internship program for pediatric psychologists and the two 2019 graduates secured positions at Mat-Su and Anchorage school districts.

3. Regularly convene Mat-Su behavioral health providers to assess gaps in the continuum of care and strategize how to fill these gaps.

RESULTS/IMPACT
In 2019, two convenings with behavioral health providers were held with the focus of creating a learning cohort to prepare providers to work with an Administrative Services Organization which will start up at the end of 2019.

4. Require the representation of at least one behavioral health professional on the Board of Directors.

RESULTS/IMPACT
A social worker was seated on the MSHF Board in 2019.

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5. Support community and organization-specific training and culture change activities to reduce social stigma related to mental health and substance abuse.

RESULTS/IMPACT
Not addressed.

Goal 2: All Mat-Su Children and Families are Safe, Healthy and Thriving through an Engaged and Coordinated Community

Goal 2 has eight (8) objectives that MSHF, MSRMC, or a collaboration of the two organizations are working on. Below is an overview on where each of the objectives stand based on a color-coded system: green = objective complete or achieved yearly milestones, yellow = objective postponed or stalled due to some barrier, blue = objective not begun based on the original timeline and red = will not be completed or focus was changed.

2017 2018 2019 Objective A:



Promote a Complete Array of Initiatives and Programs Focused on Prevention of Child Maltreatment and Promotion of Resilience in Families and Children (MSHF)

Indicator:

- # of grants provided that help to fill gaps in the array of initiatives and programs for families/children: MSHF provided \$2,453,064 in grant funding to promote a complete array of services for children and families.

1. Fill gaps and take to scale treatment, prevention and promotion strategies that have proven successful in the community, so they are accessible to all families through grants, policy change and leveraging funding.

CREATING A COMPLETE SYSTEM OF CARE – CONNECTING FAMILIES AND RESIDENTS	
FUNDING/SUPPORT	RESULTS/IMPACT
Connect Mat-Su (\$371,763).	In 2019, Connect Mat-Su helped 924 residents find the community resources they needed.
A total of \$660,949 was awarded to projects that connect families and residents.	These projects reached an estimated 15,900 people and included projects such as public gardens, a veterans monument and support program, two local museums, a large scale trail building project, Alaska Native celebrations and events, community organizing, library construction, a gathering place for men and the Special Olympics.
R.O.C.K. Mat-Su continues to address systemic racism in order to create a community where every family has an equal opportunity to thrive.	In February 2019, R.O.C.K. Mat-Su hosted another Confronting Racial Inequities workshop for 40 adults and 14 Mat-Su youth. R.O.C.K. Mat-Su has commissioned the development of a local curriculum to address systemic racism and intergenerational trauma as experienced in the Mat-Su and Alaska that will be ready to be implemented in 2020.

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CREATING A COMPLETE SYSTEM OF CARE – PROMOTING POSITIVE YOUTH DEVELOPMENT	
FUNDING/SUPPORT	RESULTS/IMPACT
Positive youth development: MSHF funded 14 grants totaling \$451,810 to promote positive youth development.	These programs, which included before, after, and summer school activities that promote protective factors in youth, reached at least 31,163 Mat-Su children.
Youth360 (\$100,000).	<p>Youth360 opened its doors in the summer of 2019. This initiative, which is based on the Icelandic Model of Youth Substance Abuse Prevention served at least 144 unique students in 2019, providing 231 days of programming, 1,330 rides to and from programming, and over 30 community presentations. Youth 360 kicked off the school year with two new after school programs in Wasilla and Houston. The clubs, in a short amount of time, created safe and supportive spaces built on a foundational framework of acceptance. Youth 360 staff report intentionally discussing conflict resolution and management of emotions, as well as implementing activities to develop student social, emotional, and learning skills (SEL), confidence, and coping mechanisms. A student reported, “This is the place that I feel safe and secure in Wasilla.” In a presentation by Youth 360 staff, a youth stood up and said, “Thank you for helping me deal with social situations and anxiety.” At one location, a student initiated, developed, and presented a youth-led mental health awareness presentation to other Youth 360 students. Parents provided positive feedback on the club’s ability to reduce family stress and help their children build coping strategies. One mother reported that her child grew immensely in this program. A father reported seeing improved mental health in his child. Site managers reported stories of students who are better able to communicate and process frustrations.</p> <p>When asked how Youth360 impact them, the youth stated:</p> <ul style="list-style-type: none"> • Kind of life changing • Not being afraid • Positivity • Helped me relax and distracted from my anxiety and stress • Made me come out of out my shell • Social skills <p>Additionally, principals in schools with BH providers report much progress on stigma reduction over the past school year.</p>

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CREATING A COMPLETE SYSTEM OF CARE – SUPPORTING FAMILIES INVOLVED IN THE CHILD WELFARE SYSTEM	
FUNDING/SUPPORT	RESULTS/IMPACT
R.O.C.K. created and leveraged funding for a Family, Infant, and Toddler (FIT) Court. Casey Family Programs has funded a new incentive program for FIT Court families and Rasmuson allowed an expansion of scope to allow for full utilization of grant funds to provide additional services to FIT Court families.	The court during its first two years served 21 families consisting of 16 adults and 20 children. Eight adults left the program after being reunited with their children, five parents had their rights terminated, and four parents relinquished their rights. The program provided stable placement for children with 87% having no more than two placements. The court is achieving its goal of reunifying children with their parents in 12 months. Children involved with the court received at least one of the following services (all but 4 received multiple services): developmental screenings/assessments, Early Head Start, infant mental health services, child psychotherapy, health care, dental care, psychological evaluation, occupational and physical therapy.
R.O.C.K. support for Office of Children’s Service (OCS) staff.	R.O.C.K. Mat-Su hosted a building community connection event, attended by 90 individuals, to create personal connections between Mat-Su OCS staff and providers of “concrete supports in times of need” and “empowerment and advocacy supports.” R.O.C.K. is also working closely with OCS to improve the system of family contact in Mat-Su.
R.O.C.K. efforts to improve family visitation in child welfare system.	R.O.C.K. released a Family Contact Best Practice Guide in September 2019. They also held a two-day training to introduce the Family Contact Best Practices Guide to Professionals (25 trained). As a result, policy changes in the community have included the addition of an OCS Holiday Party for biological parents and their children, an OCS policy change that encourages interaction between biological parents and foster parents during drop off and pick up at family contact visits, and Beacon Hill’s recent development of a home-like family contact visit site.
R.O.C.K. contracted with Knik Tribe - Building Family Futures Program.	Through this pilot project, a Knik Tribe staff person offers voluntary, conflict-free case management services to tribal members with a screened out report of harm in Mat-Su. In 2019, from 4/1/19 - 12/31/19: The program engaged 11 families, 21 adults, 42 children of which 16 were < 60 months of age. Two families have successfully completed 14 weeks of service with no further OCS contact, including three adults, nine children of which four were < 60 months of age.
MSHF granted the equivalent of \$49,287 (in-kind and funds) to Reach 907.	This organization involves children and teens in foster care with life-changing experiences through family-style summer camps, one-on-one mentoring and group mentoring.

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CREATING A COMPLETE SYSTEM OF CARE – SUPPORTING FAMILIES INVOLVED IN THE CHILD WELFARE SYSTEM	
FUNDING/SUPPORT	RESULTS/IMPACT
MSHF granted \$178,550 to Beacon Hill.	Beacon Hill runs a Safe Families for Children program in Mat-Su that partners with local churches and families to be host families for families who are struggling with life issues in an effort to keep children safe and families intact.

2017 2018 2019 Objective B:



Promote Quality Care Provision to Mat-Su Children and Families (MSHF and MSRMC)

Indicators:

- **# of staff completing trauma-informed training:** Three staff participated in a year-long learning cohort with the National Council for Behavioral Health and participated in a building-wide team to create trauma-informed changes to the building aesthetic, use, and policies.
- **# of MSRMC staff completing trauma-informed training:** 189 staff were trained which accounts for 23% of the staff.
- **# of child welfare, behavioral health and first responder organizations that offer secondary trauma care for employees:** Not addressed.

1. Support all child and family support workers with self-care practices to address secondary trauma.

RESULTS/IMPACT
R.O.C.K. Mat-Su hosted a self-care focused Building Community Connections event for 56 OCS workers. R.O.C.K. Mat-Su also sponsored 60 attendees at a Trauma Stewardship Institute half-day training.

2. Support all sectors that touch children and parents to be “trauma-informed.”

RESULTS/IMPACT
<ul style="list-style-type: none"> • The third Mat-Su Trauma-Sensitive Schools Learning Cohort with 15 schools participating concluded in November 2019. A case study evaluation is underway to assess the impact of training of three schools from the first cohort. • A second year-long trauma-informed learning community was held, with five organizations participating. • Child Sexual Abuse Prevention: Darkness to Light Stewards of Children train-the-trainer workshop deployed 16 new facilitators in the Mat-Su. Facilitators trained 137 community members in 2019.

2017 2018 2019 Objective C:






Promote Family-Friendly Work Environments for Mat-Su Parents (MSHF and MSRMC)

Indicators:

- **Existence of family-friendly policies at MSHF:** New MSHF HR policies were established in 2019 that added Bereavement Leave and Maternity Leave, and the opportunity to bring your infant to work.

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- **Existence of family-friendly policies at MSRMC:** MSRMC implemented adoption assistance, an employee assistance program, a health care services discount, a personal leave policy if FMLA not available, Community Cares Culture and a Solstice Family Care behavioral health counselor.

2017 **2018** **2019** **Objective D:**
   **Promote Support for the “whole” parent and child in medical settings (MSHF and MSRMC)**

Indicator:

- **# and amount of grants made for basic need assistance and other social service needs:** 51 grants were made for basic need assistance and other social service needs totaling \$1,362,343.

1. Support integrated physical and behavioral health care in MSRMC and other care settings.

RESULTS/IMPACT
See Objective M.

2. Support universal screening for trauma and basic need assistance and referral for social service needs.

RESULTS/IMPACT
Not Addressed.

3. Support educational campaigns to educate residents and professionals on ACEs and resilience.

RESULTS/IMPACT
In 2019, 1,016 community members received ACEs training hosted by R.O.C.K. Mat-Su. 16 new facilitators were trained, a youth-focused training was developed, and the Mat-Su Borough School District has added the training to their Summer Academy as a for credit offering for school district staff. R.O.C.K. Mat-Su hosted a screening of Wrestling Ghosts to 60 community members and continued to lend other ACEs-focused movies to community partners.

2017 **2018** **2019** **Objective E:**
   **Provide Birth-Related Care That Promotes Family Resilience (MSRMC)**

Indicators:

- **Kangaroo Care offered in MSRMC OB Department:** Continues to be offered.
- **Existence of collaboration initiative(s) among birth facilities:** Mat-Su Regional hired a new OB director in 2019. Providers outreach to birthing centers and mid-wives. Employed Certified Nurse Mid-Wife, Meg Ferguson, also visits the birthing centers to provide education and outreach quarterly.

2017 **2018** **2019** **Objective F:**

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Increase Social Connectedness to Support Families and Children (MSHF and MSRMC)

Indicator:

- # of events and # of participants: four events with at least 740 attendees.

1. Increase opportunities for social connection in the Mat-Su through increasing volunteer opportunities, gatherings in public spaces and other opportunities.

RESULTS/IMPACT
R.O.C.K. Mat-Su held the third annual community baby shower in 2019 with over 150 families in attendance and three community dance parties with 610 participants.

2017 2018 2019 Objective G:



Promote Social and Emotional Competence in Children (MSHF and MSRMC)

Indicators:

- # of children younger than five years old participating in early education: Data not available.
- # Project Search participants: four interns.

1. Increase access to early learning for all Mat-Su children.

CREATING A COMPLETE SYSTEM OF CARE – EARLY LEARNING	
FUNDING/SUPPORT	RESULTS/IMPACT
Child Care Connection, Inc. (\$100,000 and \$15,490 in-kind donation)	Awarded funds for rental space and to commission an environmental scan of the early childhood learning and care sector in Mat-Su.
Other early learning grants. (\$41,000)	Funding was provided to support a statewide childhood partnership, a local childhood partnership and the Sunshine Childcare Center.
R.O.C.K. Mat-Su has been promoting developmental screening.	There was a 256% increase in ASQ-Online developmental screening recorded in the Mat-Su between 2017 and 2019. Currently there are 10 medical practices participating in the AK Developmental Screening Initiative.
R.O.C.K. Mat-Su continued to provide Outreach for Help Me Grow in its early stages of development.	Survey respondents indicate an 18% familiarity with Help Me Grow, the highest percentage for any region in Alaska.
Advocacy Win: Engaged grantees and other funding partners in efforts to address FY2020 Alaska State Budget concerns. Funding was fully or partially restored for two of our three priorities (early childhood and housing/homelessness).	

2. Increase opportunities for school-age children to develop social emotional competence.

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CREATING A COMPLETE SYSTEM OF CARE – SOCIAL EMOTIONAL COMPETENCE	
FUNDING/SUPPORT	RESULTS/IMPACT
See Behavioral Health in Schools Initiative (Goal 1 Objective E).	

2017 2018 2019 Objective H:



Promote Knowledge of Parenting and Child Development (MSHF and MSRMC)

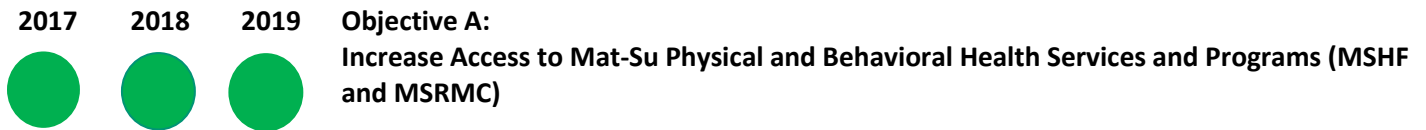
Indicator:

- # of post-partum depression referrals to the parenting program: MSRMC does not track postpartum depression referrals because these symptoms rarely present while in the hospital.

1. Support the development of parent support practices and parenting training in the community.

CREATING A COMPLETE SYSTEM OF CARE – PARENTING SUPPORT	
FUNDING AND SUPPORT	RESULTS/IMPACT
Plans of Safe Care Program: A goal of the Palmer FIT Court QIC-CCCT grant (supported by R.O.C.K. Mat-Su).	Works collaboratively with state agencies to develop a project site to implement Plans of Safe Care in the Mat-Su Borough. R.O.C.K. Mat-Su staff are participating in the statewide steering committee.

Goal 3: All Mat-Su Residents have Adequate Income, Housing, Transportation, Education Levels, Social Connections, and Information on Resources and Health to Support Good Health and Access to Physicians and Behavioral Health Care



Indicators:

- **Community Resource Center is open:** Done. This is Connect Mat-Su.
- **# of people utilizing the Community Resource Center:** 924 residents utilized Connect Mat-Su to access information on community resources.
- **# of times Connect Mat-Su information was given to a patient at discharge:** Zero. Education needs to be provided by Connect Mat-Su to the MSRMC case management team. Case management currently hands out a Mat-Su resource guide from United Way.
- **# of eligibility screenings for Medicaid and other assistance for MSRMC patients:** 3,449 screenings were completed which is up from the previous year (2,421).
- **# of internal medicine providers recruited:** one physician was recruited.
- **% of seniors accessing primary care physician network:** 4,467 seniors, which was 14% of the patients.
- **# patients using extended hours at urgent care:** 7,036 patients were seen. "Extended hours" is defined as after 5:00pm M-F and anytime on the weekend.
- **# specialists into clinically integrated network:** Medical Group of Alaska (i.e. Capstone), Mat-Su Women's Health Specialists, Solstice Family Medicine, Mat-Su Urgent Care Palmer, Mat-Su Urgent Care Settler's Bay and Moose Creek Medical Clinic.
- **# of glucose screenings:** 833.
- **# of cholesterol screenings:** 811.
- **# of fall prevention education participants:** 577 employees received fall prevention training during orientation for those that started in 2019, and those who started prior to 2019 completed training through our active learning center.

RESULTS/IMPACT
MSRMC has improved access to health care services through its strategic plan, including: <ul style="list-style-type: none"> • Set to bring on 16 inpatient behavioral health beds the beginning of 2020 • Availability of two secure inpatient beds in the ED • Recruited two psychiatrists with another planned for January 2020 • Recruited one internal medicine physician

- 1. Develop a Community Resource Center network to meet the information, referral and patient navigation needs of community residents related to transportation, social connections, income, housing, education, information and other factors that affect health.**

RESULTS/IMPACT
Done. This type of resource center was established and is called Connect Mat-Su.

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2. **Support the development of a community-based Coordinated Care Project initiative which provides patients with integrated physical and behavioral care and helps to coordinate their care providing linkages to necessary services.**

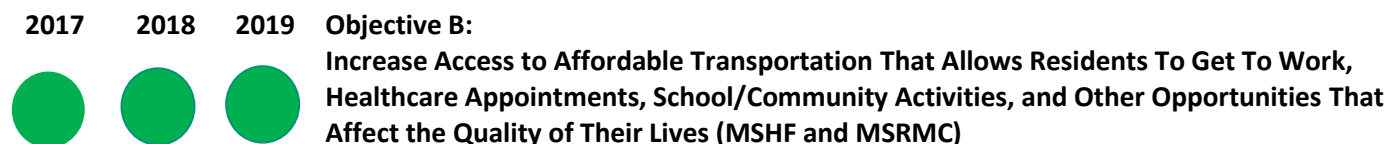
RESULTS/IMPACT
This is no longer being pursued by the State of Alaska.

3. **Promote access for seniors to primary care physicians that accept Medicare along with a model of chronic disease management for at-risk or identified seniors.**

RESULTS/IMPACT
Not addressed.

4. **Explore access issues for homeless youth by funding assessment and or initiatives that serve this population. (2018)**

FUNDING/SUPPORT	RESULTS/IMPACT
MSHF funded a consultant to lead a Mat-Su group to apply for Youth Homelessness Demonstration Program.	This consultant brought together all at-risk youth providers and successfully worked with them to create a proposal for the YHDP program that was approved in 2020.



Indicator:

- **# of transportation vouchers used:** MSRMC uses Alaska Cab Valley, LLC and TLC for its transportation vouchers. However, these entities also shuttle products between locations for the hospital's lab. The entries are not itemized out by purpose of transport, so it is difficult to provide an estimate of the number of vouchers used.

1. **Support a network of concrete support and service providers (transportation, housing, food, etc.) that leverage efforts to adequately meet the needs of Mat-Su families and provide services in a way that maintains their dignity and promotes resilience and self-advocacy.**

FUNDING/SUPPORT
51 grants were made for basic need assistance and other social service needs totaling \$1,362,343.

2. **Fund technical assistance to support the two Mat-Su transit organizations and their future merger.**

RESULTS/IMPACT
Complete.

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3. Support an improved transit system including encouraging deeper coordination with and between existing human service fleets, rides, riders, and the public system that meets the health care access needs of residents.

FUNDING/SUPPORT	RESULTS/IMPACT
MSHF provided matching funds to two public transit providers in the amount of \$461,799.	
The Mat-Su Borough Coordinated Human Services Transportation Plan was approved by the Mat-Su Borough Assembly in March and the MSHF funded a facilitator to bring together transportation providers to discuss the implementation of recommendations.	As a result of the convening, a workgroup on creating a central dispatch for all providers to ease rider access was created and to date that group has examined technology for the dispatch system, identified candidates to house technology, assessed the costs and benefits, developed a budget and applied for funding. The Mat-Su Borough government has secured a grant that will fund the majority of the cost of the software for the dispatch center. MSHF funded the facilitator and is staffing the Central Dispatch workgroup.

2017 2018 2019 Objective C:



Increase Economic Opportunities that Allow Residents to Have a Level of Income that Supports a Healthy Lifestyle and Provides for Safe and Affordable Housing (MSHF and MSRMC)

Indicators:

- #/% of locals hired to fill positions at MSRMC: 38% of hospital positions filled with local residents.
- # seniors placed in housing: Data not available.
- # scholarships provided: MSHF awarded 284 Academic Scholarships totaling \$1.4 million, \$262,000 in Vocational Scholarships, and \$53,000 in Leadership Development Scholarships (see below).

INCREASING ECONOMIC OPPORTUNITIES WHILE BUILDING THE HEALTHCARE WORKFORCE					
ACADEMIC HEALTH PROFESSIONS SCHOLARSHIPS					
Allied Health	11	Other	6	Primary Care Physician	5
Dental Health	5	Paramedic	1	Public Health Professional	1
Type of Medical Technician	11	Pharmacist	0	Specialist Physician	4
Nursing and Nurse Practitioner	72	Physician Assistant	6	Behavioral Health Professionals	26

1. Support local housing and homeless, and homeless prevention efforts including efforts to meet the needs of homeless youth, filling the gaps in senior housing, residential hospice beds, and skilled nursing beds.

FUNDING/SUPPORT	RESULTS/IMPACT
MSHF convened the local housing providers to discuss recent cuts in State funding and assess the gaps and strengths in the current system.	

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FUNDING/SUPPORT	RESULTS/IMPACT
MSHF provided a \$300,000 grant to Valley Residential Services for a capital supportive housing project.	
MSHF funded the Mat-Su Coalition on Housing and Homelessness coordinator and the Homeless Connect event (\$42,997).	
MSHF provided \$200,000 to the United Way of Mat-Su to assist with rehousing efforts after the McKinley Fire.	
MSHF has funded equipment and furnishings for a domestic violence shelter (\$25,200).	
MSHF funded a consultant to lead a Mat-Su group to apply for Youth Homelessness Demonstration Program.	This consultant brought together all at-risk youth providers and successfully worked with them to create a proposal for the YHDP program that was approved in 2020.
Advocacy Win: Engaged grantees and other funding partners in efforts to address FY2020 Alaska State Budget concerns. Funding was fully or partially restored for two of our three priorities (early childhood and housing/homelessness).	

2017 2018 2019 Objective D:



MSRMC Explore Becoming an Age-Friendly Hospital Through the John A. Hartford Foundation

RESULTS/IMPACT
MSRMC participated in a webinar to learn more about becoming an Age-Friendly hospital.

2017 2018 2019 Objective E:



Support the HUMS Program Through Data Sharing for Operations and Evaluations

RESULTS/IMPACT
MSRMC shared data in order to evaluate this program. The hospital has not developed an adequate referral program in the ED for patients into the HUMS program.

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Goal 4: All Mat-Su Residents are a Healthy Weight

2017	2018	2019	Objective A:
			Ensure Activities and Infrastructure That Promote Healthy Weights Through Opportunities for Physical Activity and Healthy Nutrition (MSHF and MSRMC)

Indicators:

- **Amount of funding for Mat-Su Trails and Parks Foundation:** \$4,950,000 multi-year grant that was awarded in 2018 and includes 2019.
- **# of projects awarded by Mat-Su Trails and Parks Foundation:** At the end of 2019 Q2, the MTPF had awarded three grants totaling \$62,146 which will result in one mile of trail maintenance, and funds for a Trail Stewards Program and an Avalanche Forecaster Project. \$72,980 of funding was leveraged.
- **# community initiatives related to physical activity and health nutrition sponsored by the foundation:** MSHF provided \$613,926 in funds to support food security. MSHF program officers assembled the food security providers to discuss the need for food for children on weekends in response to several requests from schools for funding for this area. MSHF funded an Analysis of the Senior Food Nutrition System in Mat-Su that outlines the strengths and gaps in the system.
- **# community initiatives related to physical activity and health nutrition sponsored by the hospital:** MSRMC sponsors 40 community initiatives annually directly related to physical activity and health nutrition. Included among these are the Bicycle Safety Rodeo, Baby & Children's Health Fair, Family Health Fair, Go Red for Heart Health, Senior Walking program at the Menard Center, Senior Fitness Day at MTA Sports Center, Senior Circle Health & Wellness program, numerous community walks/runs and bicycling activities.

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators <small>(Note: Hospital reported Indicators are yellow)</small>
<p>A. Build Out the Emergency Department as Part of BH Crisis System</p> <ul style="list-style-type: none"> ED staff will participate in the development of a multidisciplinary team, mobile crisis team, and community-based coordinated care project initiative. (Ongoing) The MSRMC ED will provide Social Work staff to work with the Crisis Intervention Team and coordinate discharge for patients who are linked to the multidisciplinary team and community-based coordinated care program that focuses on high utilizers. (Ongoing) MSRMC will maintain Crisis Intervention Instructors and all security guards will be required to take this training also. (Ongoing) All high utilizers will be managed via a multidisciplinary care plan, with the plan to merge via the statewide Health Information Exchange. (2017) Work toward the creation of a Psychiatric ED as part of the hospital expansion plan. (2020) 	<p>B. Support the Development of Needed BH Crisis Services</p> <p>Continue to support the development of the Crisis Intervention Team, Multidisciplinary Team and the Community-based Coordinated Care Project by providing funding for facilitation and training, to create these components of the continuum of care. (2017)</p>	<ul style="list-style-type: none"> MSHF Staff MSRMC ED Staff MSRMC Crisis Intervention Team Multi-disciplinary Team Community-based Coordinated Care Program Urgent Care Clinic Staff Community Behavioral Health Providers First Responders 	<ul style="list-style-type: none"> # of grants filled in BH continuum of care % of MSRMC ED behavioral health patients who are high utilizers % of MSRMC ED staff trained in Crisis Intervention # of first responders trained in either Crisis Intervention Team or Mental Health First Aid Date Psychiatric ED up and running Psychiatric Practitioner for the ED hired

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators <small>(Note: Hospital reported Indicators are yellow)</small>
<p>C. Increase Emergency Department BH Staffing</p> <ul style="list-style-type: none"> Social worker coverage will be expanded to seven days per week to cover the ED, Urgent Care Clinic and inpatient hospital beds, and will be a resource to providers in the community. (2017) Develop effective BH care in the MSRMC ED and Urgent Care Clinic to meet the needs of patients in crisis by increasing the number of behavioral health staff such as advanced nurse practitioners, psychiatrists or tele-psychiatry, and peer-support staff. The 2017 goal is for placement of an advanced psychiatric practitioner in the ED with support to the Urgent Care Clinic. (2017) 		<ul style="list-style-type: none"> MSRMC Administration MSRMC ED Staff Urgent Care Clinic Staff 	
<p>D. Improve the Environment for BH Patients in Emergency Department</p> <ul style="list-style-type: none"> Arrange physical space in the MSRMC ED to provide a secure space for BH patients that limits disruption to other patient care and staff while meeting the needs of patients to not be re-traumatized. This will be addressed with our hospital expansion plan. (2020) 		<ul style="list-style-type: none"> MSRMC Administration MSRMC ED Staff 	<ul style="list-style-type: none"> # of ED and inpatient BH beds at MSRMC # of options for immediate access to detox services for Mat-Su residents

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators (Note: Hospital reported Indicators are yellow)
<p>E. Support a Complete BH System of Care</p> <ul style="list-style-type: none"> Open BH facility which will have Diagnosis, Evaluation, and Treatment (DET) beds, detox services, "Sleep Off" beds, and other acute mental health services to meet the needs of the community. This will require a certificate of need with the State of Alaska. (2020) 	<p>E. Support a Complete BH System of Care</p> <ul style="list-style-type: none"> Support the creation of services to fill gaps in the BH continuum of care for Mat-Su residents through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (Ongoing) Support Medicaid reform that supports services in a complete continuum of care and build the capacity of local providers to be sustainable under Medicaid. (Ongoing) Support immediate access to BH services for children and families. (Ongoing) 	<ul style="list-style-type: none"> MSRMC Administration CHS Vice President, Behavioral Health MSHF Staff Mat-Su Behavioral Health Providers Anchorage Behavioral Health Providers AK Mental Health Trust Authority 	<ul style="list-style-type: none"> # of types of BH services that have greater than one week waiting time % of residents who know where to go for BH services

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators:
<p>F. Connect MSRMC BH Patients to Appropriate Outpatient Services</p> <ul style="list-style-type: none"> Ensure successful transitions of BH patients out of MSRMC to home or Anchorage facilities. This includes a follow-up system for BH patients including the provision of f/u phone calls. (Ongoing) 		MSRMC Social Work and ED staff	<ul style="list-style-type: none"> % of BH patient "Bounce Backs" to ED within specified time frame % of BH patients who receive a successful follow-up phone call after ED discharge

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators:
<p>G. Encourage Appropriate Use of the ED and Improve the Coordination of Care for Patients within and Between in the Emergency Departments Statewide</p> <ul style="list-style-type: none"> • Work with other Alaska hospitals, the Alaska State Hospital and Nursing Home Association, and the AK Chapter of the American College of Emergency Physicians on the Emergency Department Coordination Project, which is part of Senate Bill 74. (Ongoing) • Subscribe to and implement an electronic information system in the ED to be used to increase the effectiveness of existing care management resources and reduce medically unnecessary ED readmissions. (2017) • Integrate the Prescription Drug Monitoring Program into ED service delivery. (Ongoing) • Improve ED quality of care through consistent delivery of care, including patient education, and adhering to best practice statewide guidelines for prescribing narcotics in the ED. (Ongoing) 	<p>H. Encourage the Connection of Community Services to the MSRMC ED Electronic Information System</p> <ul style="list-style-type: none"> • Support local medical and behavioral health care providers and clinics to be connected to MSRMC Care Coordination through connection with the ED electronic Information System used by MSRMC. (2018) 	<ul style="list-style-type: none"> • MSRMC Administration • MSRMC ED Staff • Other AK Hospitals ED staff • MSHF Staff • Mat-Su Behavioral Health Providers 	<ul style="list-style-type: none"> • % of unnecessary ED visits per year • System initiated for ED patient exchange among hospitals • # of primary care appointments made within 72-96 hours after discharge • # of ED prescribers enrolled in prescription monitoring database • # of community health care providers connected to the MSRMC ED electronic information system

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators:
<p>I. Improve the Quality of Behavioral Health Services Delivered at MSRMC</p> <ul style="list-style-type: none"> • Ensure that all patients have access to an equitable behavioral health assessment. (2017) • Establish nursing didactics that will train at a minimum level core BH assessment skills. (Ongoing) • Develop a formal policy and related procedures outlining patient flow and Pride training to all ED staff. (Ongoing) • Create formal competency and ongoing education and policy adoptions needed for ED staff and physicians to better serve patients with BH issues. (Ongoing) 	<p>J. Improve Quality of Behavioral Health Services Delivered in the Community</p> <ul style="list-style-type: none"> • Support training for BH, Medical, and First Responder professionals in the community on best practices in delivering BH care. (2017) • Support Pride training for staff at MSHF and community organizations to better serve Mat-Su residents. (2017) 	<ul style="list-style-type: none"> • MSRMC ED Staff • CHS, Vice President Behavioral Health • MSRMC physicians and nurses • First Responders • MSHF staff • Other community organizations 	<ul style="list-style-type: none"> • # of ED staff educated on behavioral health assessment and Pride training • # of Mat-Su organizations trained and supported on BH quality care practices • # of Mat-Su organizations trained and supported serving LGBTQ residents
<p>K. Maintain Specific Crisis Care Teams and Participate in Data Collection:</p> <ul style="list-style-type: none"> • Maintain the SART (Sexual Assault Response Team) and SCAN (Scan for Child Abuse/Neglect) Team at MSRMC and design data collection and reporting to help inform prevention and treatment effort along with program evaluation. (Ongoing) • Maintain 1.2 FTE in forensic nursing for SART to include support for ongoing education and equipment needs, including SART examination and interview rooms. (Ongoing) • Provide de-identified, HIPPA compliant data to MSHF for evaluation of BH initiatives. (Ongoing) 	<p>L. Ensure Use of Crisis Care Data to Improve the System of Care:</p> <ul style="list-style-type: none"> • Support the system of collection, reporting of and analysis of data gathered by MSRMC for evaluation and improvement of care delivery. (2017) 	<ul style="list-style-type: none"> • SART Team • SCAN Team • MSHF Staff • Mat-Su Borough • City of Wasilla • Alaska Family Services • MSRMC Staff • Mat-Su Domestic Violence Coalition 	<ul style="list-style-type: none"> • # of SART visits to MSRMC • # of SCAN visits to MSRMC • Data collected to evaluate ED-related implementation plan activities

GOAL 1: Residents Have Access to an Effective and Complete Behavioral Health Continuum of Care			
MSRMC Action Steps (Timeline)	MSHF Action Steps (Timeline)	Responsibility	Impact will be measured and evaluated through these indicators:
<p>M. Improve the Quality of Behavioral Health Services and Care Coordination in the Mat-Su Medical and Behavioral Health Community</p> <ul style="list-style-type: none"> Sponsor and/or co-sponsor Physician CME offerings on business models that support implementation of evidence-based practices including, primary/BH integration, SBIRT, coordinated care, etc. (Ongoing) Encourage the representation of at least one behavioral health professional on the Board of Trustees. (2017) Provide training and culture change activities for MSRMC staff to reduce social stigma related to mental health and substance abuse disorders. (Ongoing) 	<p>M. Improve the Quality of Behavioral Health Services and Care Coordination in the Mat-Su Medical and Behavioral Health Community</p> <ul style="list-style-type: none"> Sponsor and/or co-sponsor Physician CME offerings on business models that support implementation of evidence-based practices including, primary/BH integration, SBIRT, coordinated care, etc. (2018) Support the integration of physical and behavioral health in primary care settings through grant-making, trainings and leveraging statewide and federal funding. (Ongoing) Regularly convene Mat-Su behavioral health providers to assess gaps in the continuum of care and strategize how to fill these gaps. (2017) Require the representation of at least one behavioral health professional the Board of Directors. (2017) Support community and organization-specific training and culture change activities to reduce social stigma related to mental health and substance abuse. (2018) 	<ul style="list-style-type: none"> MSRMC Staff MSHF Staff MSRMC Board of Directors MSRMC Board of Trustees MSHF Board of Directors Mat-Su health care professionals Other community organizations 	<ul style="list-style-type: none"> # of physicians receiving CME in behavioral health # of settings in Mat-Su offering integrated behavioral and physical health care # of Mat-Su primary care settings that receive support to implement and maintain the use of SBIRT # of Mat-Su health care settings conducting routine Trauma screening # of MSRMC staff trained on social stigma % of residents who report no stigma in seeking behavioral health care

GOAL 2: All Mat-Su Children and Families are Safe, Healthy and Thriving Through an Engaged and Coordinated Community			
MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
	<p>A. Promote a Complete Array of Initiatives and Programs Focused on Prevention of Child Maltreatment and Promotion of Resilience in Families and Children</p> <ul style="list-style-type: none"> Fill gaps and take to scale treatment, prevention and promotion strategies that have proven successful in the community so that they are accessible to all families. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) 	<ul style="list-style-type: none"> MSHF Staff Mat-Su child and family providers 	<ul style="list-style-type: none"> # of grants provided that help to fill gaps in the array of initiatives and programs for families/children
<p>B. Promote Quality Care Provision To Mat-Su Children and Families</p> <ul style="list-style-type: none"> Support all MSRMC ED staff with self-care practices to address secondary trauma, including a benefit packet EAP (Employee Assistance Program) that provides counseling and support at no fee. (Ongoing) Ensure that hospital processes, policy and staff that affect children and parents are “trauma- informed.” (Ongoing) 	<p>B. Promote Quality Care Provision To Mat-Su Children and Families</p> <ul style="list-style-type: none"> Support all child and family support workers with self-care practices to address secondary trauma. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2018) Support all sectors that touch children and parents to be “trauma-informed.” This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (Ongoing) 	<ul style="list-style-type: none"> MSRMC ED Staff MSRMC HR Department MSHF staff Mat-Su child and family providers 	<ul style="list-style-type: none"> % of staff completing trauma-informed education % of child welfare, behavioral health and First Responder organizations that offer secondary trauma care for employees

GOAL 2: All Mat-Su Children and Families are Safe, Healthy and Thriving Through an Engaged and Coordinated Community			
MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>C. Promote Family-Friendly Work Environments for Mat-Su Parents</p> <ul style="list-style-type: none"> Ensure family-friendly policies exist at MSRMC that include strategies for dealing with work-related stress reduction, parental leave, employee assistance program, and an environment for addressing behavioral health issues that is stigma-free. (Ongoing) 	<p>C. Promote Family-Friendly Work Environments for Mat-Su Parents</p> <ul style="list-style-type: none"> Ensure family-friendly policies at MSHF and other Mat-Su workplaces that include strategies for dealing with work-related stress reduction, parental leave, employee assistance programs, and an environment for addressing behavioral health issues that is stigma-free. This will be accomplished through grant funding, education and training initiatives, etc. (Ongoing) 	<ul style="list-style-type: none"> MSRMC Staff MSRMC HR Department MSHF Staff Mat-Su employers 	<ul style="list-style-type: none"> Existence of family-friendly human resource policies at MSRMC and MSHF
<p>D. Promote Support for the “Whole” Parent and Child in Medical Settings</p> <ul style="list-style-type: none"> Support integrated physical and behavioral health care in MSRMC care settings. (Ongoing) Conduct universal screening for trauma and basic need assistance, and referral for social service needs in MSRMC care settings. (Ongoing) Support educational campaigns to educate residents, including MSRMC, Urgent Care Clinic and other primary care staff on ACEs and resilience. (Ongoing) 	<p>D. Promote Support for the “Whole” Parent and Child in Medical Settings</p> <ul style="list-style-type: none"> Support integrated physical and behavioral health care in medical settings. (Ongoing) Support universal screening for trauma and basic need assistance and referral for social service needs. This will be accomplished through grant funding, education and training initiatives, etc. (Ongoing) Support educational campaigns to educate residents and professionals in Mat-Su on ACEs and resilience. (Ongoing) 	<ul style="list-style-type: none"> MSRMC Staff MSHF Staff SART Team SCAN Team 	<ul style="list-style-type: none"> # and \$ amount of grants made for basic need assistance and other social service needs

GOAL 2: All Mat-Su Children and Families are Safe, Healthy and Thriving Through an Engaged and Coordinated Community			
MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>E. Provide Birth-Related Care That Promotes Family Resilience</p> <ul style="list-style-type: none"> • Implement Kangaroo Care in the Mat-Su Regional OB department. (Ongoing) • Explore the need and viability of operating a Level 11 Nursery with Neonatal abstinence program and perinatal substance abuse treatment. (Ongoing) • Align MSRMC and certain birth centers and midwiferies to increase patient care and safety. (Ongoing) 		<ul style="list-style-type: none"> • MSRMC Staff including neonatal/perinatal staff • MSRMC OB Staff 	<ul style="list-style-type: none"> • Date Kangaroo Care began • Existence of NAP program • Existence of collaboration initiative(s) among birth facilities

GOAL 2: All Mat-Su Children and Families are Safe, Healthy and Thriving Through an Engaged and Coordinated Community			
MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>F. Increase Social Connectedness To Support Families and Children</p> <ul style="list-style-type: none"> MSRMC will continue offering to the community Baby Fair, Woman’s Fair, Bike Rodeo, Healthy Women, and other programs designed to support families and children. MSRMC will continue to sponsor family oriented athletic events such as Rotary 5K and the Night at the Ball Park. 	<p>F. Increase Social Connectedness To Support Families and Children</p> <ul style="list-style-type: none"> Increase opportunities for social connection in Mat-Su through increasing volunteer opportunities, gatherings in public spaces, and other opportunities. This will be accomplished through grant funding and leveraging funding from federal, state, and local sources. 	<p>MSRMC and MSHF staff and community partners</p>	<ul style="list-style-type: none"> # of events # of participants
<p>G. Promote Social and Emotional Competence in Children</p> <ul style="list-style-type: none"> MSRMC will continue supporting children with disabilities through Project Search and maintain Employee competency through our education department. (Ongoing) 	<p>G. Promote Social and Emotional Competence in Children</p> <ul style="list-style-type: none"> Increase access to early learning for all Mat- Su children. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) Increase opportunities for school-age children to develop social emotional competence. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (Ongoing) 	<ul style="list-style-type: none"> MSRMC Staff MSRMC Education Department MSHF Staff CCS Early Learning 	<ul style="list-style-type: none"> # of Project Search participants % of children younger than 5 years old participating in early learning

GOAL 2: All Mat-Su Children and Families are Safe, Healthy and Thriving Through an Engaged and Coordinated Community

MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>H. Promote Knowledge of Parenting and Child Development</p> <ul style="list-style-type: none"> Capitalize on opportunities to provide training on parenting skills and promote resources that inform parents on child development with new parents in the MSRMC Birthing Center, Urgent Care, and Solstice Family Medicine. Offer “centering” prenatal care meetings and other prenatal classes. (2017) 	<p>H. Promote Knowledge of Parenting and Child Development</p> <ul style="list-style-type: none"> Support the development of parent support practices and parenting training in the community through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) 	<ul style="list-style-type: none"> MSRMC Staff MSRMC OB Urgent Care Solstice Family Medicine MSHF Staff Community Partners 	<ul style="list-style-type: none"> # of post-partum depression referrals to the parenting program

GOAL 3: All Mat-Su Residents Have Adequate Income, Housing, Transportation, Education Levels, Social Connections and Information on Resources and Health to Support Good Health and Access to Physical and Behavioral Health Care			
MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>A. Increase Access to Mat-Su Physical and Behavioral Health Services and Programs</p> <ul style="list-style-type: none"> • Work with the Community Resource Center (CRC) network to ensure that it has correct information on all MSRMC services. (2017) • Ensure that MSRMC staff and medical staff are informed of and connected to the CRC to ensure successful discharge planning for patients. (2017) • Add patient care navigators for select service lines. (2018) • Work with the community-based Coordinated Care Project initiative to ensure the successful admission and discharge of hospital patients to home and their connection to community-based services. (Ongoing) • Maximize Eligibility Screening Services (ESS) to help patients find resources to pay for medical care. (Ongoing) • Recruit additional internal medicine providers to the community. (Ongoing) • Provide extended hours at the Urgent Care clinic to better accommodate patient work schedules (Ongoing) • Expand the hospital-led clinically integrated network project from participation at the primary care level to include other specialties. (Ongoing) • Train MSRMC staff on delivering effective and medically-appropriate care to the homeless youth population, including understanding the barriers to accessing care they face as well as the resources available in the community to support them. (2017) 	<p>A. Increase Access to Mat-Su Physical and Behavioral Services and Programs</p> <ul style="list-style-type: none"> • Develop a Community Resource Center network to meet the information, referral, and patient navigation needs of community residents related to transportation, social connections, income, housing, education, information and other factors that affect health. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) • Support the development of community-based Coordinated Care Project initiative which provides patients with integrated physical and behavioral care and helps to coordinate their care providing linkages to necessary services. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) • Promote access for seniors to primary care physicians that accept Medicare along with a model of chronic disease management for at-risk or identified seniors. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) • Explore access issues for homeless youth by funding assessment and/or initiatives that serve this population. This will be accomplished through grant funding, statewide policy change, and leveraging funding from federal, state, and local sources. (2017) 	<ul style="list-style-type: none"> • MSRMC Staff • MSHF Staff • Community Resource Center • Coordinated Care Project • Other community partners 	<ul style="list-style-type: none"> • Date Community Resource Center is open • # of people utilizing the Community Resource Center • # of times Connect Mat-Su information was given to patients at discharge • # of patients served by HUMS that have decreased ED usage • # of eligibility screenings for MSRMC patients • # of identified resources for MSRMC patients • # of internal medicine providers recruited • % of seniors accessing primary care physician network

GOAL 3: All Mat-Su Residents Have Adequate Income, Housing, Transportation, Education Levels, Social Connections and Information on Resources and Health to Support Good Health and Access to Physical and Behavioral Health Care

MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<ul style="list-style-type: none"> Establish a calendared screening and health awareness initiative that focuses on diabetes awareness (glucose monitoring), cholesterol (level screening/tests), hypertension (blood pressure clinics), fall prevention, and pulmonary-related illness and risk. Such a program could be integrated into a “circuit-rider” program that travels throughout the borough and is connected to the MSRMC Senior Circle Program. 			<ul style="list-style-type: none"> # of patients using extended hours # of specialists added to clinically integrated network # of glucose screenings per year # of cholesterol screenings per year # of blood pressure screenings per year # of fall prevention education participants # of referrals due to poor screening results

GOAL 3: All Mat-Su Residents Have Adequate Income, Housing, Transportation, Education Levels, Social Connections and Information on Resources and Health to Support Good Health and Access to Physical and Behavioral Health Care

MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>B. Increase Access To Affordable Transportation That Allows Residents To Get To Work, Health Care Appointments, School/Community Activities and Other Opportunities That Affect the Quality of Their Lives</p> <ul style="list-style-type: none"> In accordance with applicable state and federal law, provide transportation vouchers upon discharge to enable patients to get home or to access agencies and programs for which they have a hospital referral. (Ongoing) 	<p>B. Increase Access To Affordable Transportation That Allows Residents To Get To Work, Health Care Appointments, School/Community Activities and Other Opportunities That Affect the Quality of Their Lives</p> <ul style="list-style-type: none"> Support a network of concrete supports and service providers (transportation, housing, food, etc..) that leverage efforts to adequately meet the needs of Mat-Su families and provide services in a way that maintains their dignity and promotes resilience and self-advocacy. (2018) Fund technical assistance to support the two Mat-Su transit organizations and their future merger. (Ongoing) Support an improved transit system including encouraging deeper coordination with and between existing human service fleets, rides, riders, and the public system that meets the health care access needs of all residents through grants and leveraging funds from federal, state, and other sources. (Ongoing) 	<ul style="list-style-type: none"> MSRMC Staff MSHF Staff Community partners 	<ul style="list-style-type: none"> # of transportation subsidies used to transport patient from the hospital to a provider for services # of transportation vouchers used

GOAL 3: All Mat-Su Residents Have Adequate Income, Housing, Transportation, Education Levels, Social Connections and Information on Resources and Health to Support Good Health and Access to Physical and Behavioral Health Care

MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>C. Increase Economic Opportunities That Allow Residents To Have a Level of Income That Supports a Healthy Lifestyle and Provides for Safe and Affordable Housing</p> <ul style="list-style-type: none"> Maximize hospital impact on local economy and employment rate by hiring employees from Mat-Su and when possible purchasing from local vendors. Avoid outsourcing of Mat-Su jobs. (Ongoing) 	<p>C. Increase Economic Opportunities That Allow Residents To Have a Level of Income That Supports a Healthy Lifestyle and Provides for Safe and Affordable Housing</p> <ul style="list-style-type: none"> Support local housing and homelessness prevention efforts including efforts to meet the needs of homeless youth, filling the gaps in senior housing, residential hospice beds and skilled nursing beds. (2017) Fund coordinator for the Mat-Su Housing and Homelessness Coalition. (Ongoing) Hire employees from Mat-Su and, when possible, purchase from local vendors. Avoid outsourcing of Mat-Su jobs. (Ongoing) Provide academic and vocational scholarships to Mat-Su residents. (Ongoing) 	<ul style="list-style-type: none"> MSHF Staff MSRMC administration Community partners 	<ul style="list-style-type: none"> # of seniors placed in housing Evaluate developing a report to track "place of origin" for all new hires, January 1, 2018 - Dec 31, 2018 # of scholarships provided
<p>D. MSRMC To Explore Becoming an Age-Friendly Hospital Through the John A. Hartford Foundation</p> <ul style="list-style-type: none"> Attend webinar that explains how to become an Age-Friendly hospital. 		<ul style="list-style-type: none"> MSRMC administration 	<ul style="list-style-type: none"> Webinar attended to explain the program

GOAL 3: All Mat-Su Residents Have Adequate Income, Housing, Transportation, Education Levels, Social Connections and Information on Resources and Health to Support Good Health and Access to Physical and Behavioral Health Care

MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>E. Support the HUMS Program Through Data Sharing for Operations and Evaluations</p> <ul style="list-style-type: none"> Ensure that hospital staff work with HUMS staff, including sharing data as needed, to enroll and support ED high utilizers with the goal of connecting them with outpatient services that meet their basic needs and medical/behavioral health conditions to prevent inappropriate use of the ED. 	<p>E. Support the HUMS Program by Providing Funding and Data Sharing for Operations and Evaluation</p> <ul style="list-style-type: none"> Work with MSHF in sharing hospital data for HUMS patients as appropriate for the evaluation of the HUMS program in an effort to improve the program. 	<ul style="list-style-type: none"> MSHF Staff MSRMC administration HUMS Program Staff 	

GOAL 3: All Mat-Su Residents Have Adequate Income, Housing, Transportation, Education Levels, Social Connections and Information on Resources and Health to Support Good Health and Access to Physical and Behavioral Health Care

MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<ul style="list-style-type: none"> • Work with MSHF in sharing hospital data for HUMS patients as appropriate for the evaluation of the HUMS program in an effort to improve the program. This data should be de-identified with only a patient's identification # in order to track patient progress in aggregate form. Data should include: <ul style="list-style-type: none"> ○ Number of inpatient admissions (and length of stay) for each HUMS patient 12 months prior to admission in HUMS program ○ Number of inpatient admissions (and length of stay) for each HUMS patient after admission in HUMS program – reported quarterly ○ Cost of: <ul style="list-style-type: none"> • Inpatient admissions for each HUMS patient 12 months prior to HUMS involvement • Inpatient admissions for each HUMS patient quarterly post HUMS admission • ED admissions for each HUMS patient 12 months prior to HUMS involvement • ED admissions for each HUMS patient quarterly post HUMS admission 		<ul style="list-style-type: none"> • MSHF Staff • MSRMC Administration • HUMS Program Staff 	<ul style="list-style-type: none"> • # of inpatient admissions (and length of stay) for each HUMS patient 12 months prior to admission in HUMS program • # of inpatient admissions (and length of stay) for each HUMS patient after admission in HUMS program – reported quarterly • Cost of: <ul style="list-style-type: none"> • Inpatient admissions for each HUMS patient 12 months prior to HUMS involvement • Inpatient admissions for each HUMS patient quarterly post HUMS admission • ED admissions for each HUMS patient 12 months prior to HUMS involvement • ED admissions for each HUMS patient quarterly post HUMS admission

GOAL 4: All Mat-Su Residents are a Healthy Weight			
MSRMC Action Steps	MSHF Action Steps	Responsibility	Impact will be measured and evaluated through these indicators:
<p>A. Ensure Activities and Infrastructure That Promote Healthy Weights Through Opportunities for Physical Activity and Healthy Nutrition</p> <ul style="list-style-type: none"> • Support community initiatives such as Relay for Life, local running races and maintain employee wellness program. (Ongoing) • Support community nutrition initiatives such as wrap around nutritional counseling services for bariatric patients, provide meeting space for Overeaters Anonymous and contribute to local food drives. (Ongoing) 	<p>A. Ensure Activities and Infrastructure That Promote Healthy Weights Through Opportunities for Physical Activity and Healthy Nutrition</p> <ul style="list-style-type: none"> • Support Mat-Su Trails and Parks Foundation to coordinate trail and playground development. (Ongoing) 	<ul style="list-style-type: none"> • MSHF Staff • Mat-Su Trails and Parks Foundation • MSRMC • Overeater's Anonymous • Other local non-profit organizations 	<ul style="list-style-type: none"> • Amount of funding for Mat-Su Trails and Parks Foundation • # of projects awarded by Mat-Su Trails and Parks Foundation • Number of community initiatives related to physical activity and health nutrition sponsored by the hospital