

PRIORITY AREA 1: MENTAL HEALTH

GOAL

Support access to & improve utilization of mental health resources among residents of Teton County.

Mental Health Objective 1: Support access to & improve utilization of mental health resources among residents of Teton County

Activity 1.2 Implement use of standardized screening tool for anxiety and depression, such as PHQ-2 or PHQ-9, among PCPs and health-focused service providers.

- Screen 20% of clinic, inpatient and ER patients using the PHQ-9.

Year	Number of Screenings		
	Clinic	Inpatient	ER
2021			
2022			
2023			

- Responsible Staff: Susan (Clinic), Penny (ER & Inpatient)

Activity 1.3 Create a crisis response system plan so that family members have clear direction for getting family in need to a mental health professional.

- Nurses will make follow up phone calls to patients scoring moderate depression or higher (10 and above) on the mental health screen tools (PHQ-9) to ensure contact with Mental Health services has been completed.

Year	Number of Screenings		
	Qualifying Patients	Number of Calls	MH connections
2021			
2022			
2023			

- Responsible Staff: Susan (Clinic), Penny (ER & Inpatient)

Mental Health Objective 2: At the next CHNA Key Informant Survey, 50% of respondents will indicate that they have seen an increase in awareness around mental health issues and types of mental health services available in the community over the past 3 years.

Activity 2.2 Spreading the "Teton County Wellness Resources" flyer with the list of Teton County mental health providers to various outlets around the community.

- “Teton County Wellness Resources” flier will be posted in all Clinic Exam room and will be added to all hospital inpatient, observation and swing bed Intake packets. Monthly checks of rooms will be completed to ensure fliers are posted and up to date.
 - *Responsible Staff: Public Relations*

Mental Health Objective 3: At the next CHNA Key Informant Survey, 50% of respondents will indicate that there are more opportunities for people to be connected in the community and less socially isolated than in 2021.

Activity 3.1 *Connecting senior citizens and high school students through completion of school community volunteer hours.*

- Connect with the local school to establish a volunteer program to introduce high school student volunteers into our Long Term Care.

Year	Number of Student Volunteers
2021	
2022	
2023	

- *Responsible Staff: Public Relations & Life Enrichment*

Activity 3.2 *More people engaged in social groups like Lions and Soroptimists.*

- Work closely with families of Long Term Care residents to digitally connect residents with churches and other social groups they participated in prior to residency at BTMC.

Year	Number of Residents Connected
2021	
2022	
2023	

- *Responsible Staff: Public Relations & Life Enrichment*

PRIORITY AREA 2: THRIVING FAMILIES

GOAL

Community-wide support for decreasing ACEs and increasing resiliency among families & youth so they can thrive mentally, physically, & emotionally.

Note: The objectives in this area do not directly reflect the services of BTMC, however we are taking an approach to ensure relationships with families within our service areas are continually improving.

Thriving Families Objective 1: By June 2021, BTMC will establish procedures to increase the family engagement of ER patients.

Activity 1.1 *Create a safe, private space for providers to talk to families of ER patients.*

- Clean and update small office in front of the hospital side to make families of ER feel safe and welcome to wait in privacy for their loved one.

Year	Project
2021	
2022	

- *Responsible Staff: Susan, Annie*

Activity 1.2 *Increase communication between ER and family of ER patients.*

- Establish procedure for nurses or providers to make contact with family waiting for ER patient within 20 minutes of patient presenting at the ER.

Year	Procedure established
2021	
2022	
2023	

- *Responsible Staff: Susan, Penny, Nancy*
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Thriving Families Objective 2: BTMC will increase its Patient Family Engagement (PFE) by 75% by the end of 2021.

Activity 2.1 *Families will be engaged regarding their loved one in our care no less than biweekly.*

- Life enrichment coordinator and care team members will find ways to engaged resident families in the care of their loved ones.

Resident (Initials)	Date	Patient Family Engagement Description

Responsible Staff: DON, Life Enrichment Coordinator

PRIORITY AREA 3: HEALTH COMMUNICATIONS

GOAL

Empower community members to engage with their health through clear, consistent, collaborative, and culturally appropriate health messaging.

Health Communications Objective 1: By January 2022, 75% of the members of an established Health Information Committee will indicate in a survey that they have an increased understanding of how Teton County residents interact with health information.

Activity 1.1 *Actively participate in establishment and progress of Health Information Committee.*

- Number of meetings attended and brief description of progress

Year	# of Meetings	Committee Progress
2021		
2022		
2023		

- *Responsible Staff: Annie*

Health Communications Objective 2: By June 2023, implement an accurate and collaborative health information campaign that engages 500 individuals using strategies commonly accessed by “hard to reach” populations, and at least 1,000 Teton county residents overall.

Activity 2.1 *Use our information distribution platforms to disseminate the health information campaigns implemented by the Health Information Committee*

- BMTc will work closely with the HIC to ensure our messaging is in line with the health information they are disseminating.

Health Information Campaign	BTMC Distribution Platforms

- *Responsible Staff: Annie*

Health Communications Objective 3: At the next CHNA Key Informant Survey, 50% of respondents indicate that many or all of the people they serve are able to access health information electronically, including scheduling appointments, accessing health records, utilizing telehealth services, and finding reliable and accurate health information.

Activity 3.1 *Coordinate with staff in Great Falls to present two adult education opportunities pertaining to health communications.*

- BMTc will work closely with the IT and Communications teams to build presentations to assist patients in accessing health records, making appointments and other health communications topics.

Date	Adult Education Activity

- *Responsible Staff: Annie, IT, Communications*

Health Communications Objective 4: Increase utilization of CONNECT Referral System to an average of 10 referrals per month by July 2022.

Activity 3.1 *Utilize CONNECT Referral System at least once per month to get patients in contact with needed services.*

- BMTc will host two training opportunities per year for appropriate staff to be trained on how to send and receive CONNECT referrals. We will incorporate the use of the system in referrals for patients.

Date	CONNECT Referral System Training

- *Responsible Staff: Annie, Nursing Staff*