

COMMUNITY HEALTH IMPROVEMENT PLAN



FY 2016 – FY 2019

ACKNOWLEDGMENTS

Healthy Gallatin would like to thank the following organizations for participating in the community health improvement planning process:

*Alcohol and Drug Services
Belgrade School District
Bozeman City Commission
Bozeman Health Deaconess Hospital
Bozeman Job Service
Bozeman School District
Bridgercare
Cancer Support Community
City of West Yellowstone
Child Care Connections
Community Health Partners
Early Childhood Community Council
Gallatin City-County Health Department
Gallatin County Board of Health
Gallatin County Planning Office
Gallatin County Detention Center
Gallatin Mental Health Center*

*Gallatin Valley Farm to School
Gallatin Valley Food Bank
Gallatin Valley Land Trust
Gallatin Valley YMCA
Greater Gallatin United Way
Heeb's Grocery Store
Human Resource Development Council
Montana Nutrition and Physical Activity
Montana Office of Rural Health
Montana State University
Montana State University Extension Office
Montana Team Nutrition
Montana Tobacco Use Prevention Program
National Association of Mental Illness
Thrive
Western Transportation Institute
...and various community members.*

The Community Health Improvement Plan is a dynamic document that will be updated and revised as needed. While the work is shared amongst many partners, the Gallatin City-County Health Department will take responsibility for making changes to the CHIP document and ensuring that the most recent version is posted on www.HealthyGallatin.org. For questions or comments regarding the CHIP, please email hs@gallatin.mt.gov or call (406) 582-3100.



DETERMINING HEALTH PRIORITIES

During the first iteration of the Community Health Improvement Plan, a community-driven health improvement framework called Mobilizing Action through Planning and Partnership (MAPP) was used to guide the health improvement process. The MAPP process began in July of 2011 and took 18 months to complete. The process was guided by a steering committee made up of community members and representatives of human service organizations. The work outlined in the first edition of the Community Health Improvement Plan spanned from 2012 to 2015.

In August 2015, the CHIP steering committee reconvened to discuss new community health data and identify strategic priorities. The priority areas identified included:

- Access; specifically: for seniors, transportation and mobility, insurance access, and medical home/primary care physicians
- Behavioral Health; specifically: mental health, substance use/abuse, and smoking in women of child-bearing age
- Nutrition and Physical Activity; specifically: fruit and vegetable access, youth engagement, and the built environment

Once these priority areas were finalized, work groups were convened to develop 3-year action plans and assign metrics and tasks. The Access and Behavioral Health groups were already established from the first iteration of the CHIP. The newly formed Nutrition and Physical Activity group garnered much interest from a variety of community partners. The resulting work plans for these three priority areas are detailed in this document.

(Collaboration was identified as a priority area during the first iteration of the CHIP and has made great progress since 2012. The work of the Collaboration group will be kept in this document as a strategy and will be facilitated and monitored by Gallatin City-County Health Department.)

PURPOSE

Gallatin City-County Health Department and our various community partners and stakeholders recognize the importance of working together in order to accomplish more than we could alone. The purpose of the Community Health Improvement Plan (CHIP) is not to create more work for our partners, but to align and leverage the efforts of multiple organizations and to move toward improved health for the residents of Gallatin County in a strategic manner.

What follows is the result of the community's deliberation and planning to address health concerns in a strategic way that aligns resources and energy to make measurable impact on health issues in Gallatin County that will help this process move toward accomplishing its goals.

PROCESS

Following the CHIP steering committee meeting where priority areas were identified, subcommittees were convened to identify goals, strategies, and tactics to address the strategic issues.

Each subcommittee will meet regularly to continue the work that has been outlined, and will do so by setting meetings that will be amenable to the members' schedules. The Health Department will assist in convening that meetings and measuring progress within each workgroup.



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STRATEGIC ISSUE 1: HOW DO WE INCREASE ACCESS TO CARE?

Gallatin County is lucky to have a significant number of health care resources. Bozeman is home to Bozeman Health Deaconess Hospital, as well as Montana State University, which offers counseling and nursing programs. Community Health Partners (Federally Qualified Health Center) serves populations on a sliding-fee scale throughout the county, with clinic locations in Belgrade, Bozeman, and West Yellowstone. However, there are still disparities that exist within our community. The Access Committee (participating organizations listed below) was convened in 2012 during the first Community Health Improvement Plan, with the goal of working together as a community to increase access to care. This committee met during 2015 to discuss new focus areas and priorities for the 2016-2018 CHIP.

During the 2015 legislative session, the Montana Health and Economic Livelihood Partnership (HELP) Act was signed into law, thus expanding Medicaid coverage for all adults with incomes up to 138% of the Federal Poverty Level (FPL). Data from the 2014 Community Health Assessment showed that among adults age 18-64, 13.5% reported having no insurance coverage for health care expenses. One of the main focus areas for the Access portion of this CHIP will be to work on decreasing the number of uninsured individuals in Gallatin County, with a specific emphasis on increasing Medicaid enrollment numbers. The health department will work closely with the county detention center to get coverage for eligible inmates with the goal of reducing county expenditures on health care services, as well as connecting inmates with long-term health or mental health care services during the pre-release period.

Transportation has consistently been identified as a barrier of getting to medical appointments, especially in rural communities in the county. During the previous CHIP, great progress was made to expand transportation services to the Three Forks, Manhattan, and Belgrade areas. The focus for this CHIP will be to promote the usage of these transportation services, as well as find ways to make these services sustainable for the communities that they serve. Additionally, the Access Committee will support the work of Bozeman Health Deaconess Hospital in developing and implementing telehealth services for rural communities in Gallatin County.

The Access committee agreed to continue to work on increasing the percentage of Gallatin County residents accessing preventive health services. Preventive health care not only improves health and quality of life, but also helps reduce costs associated with medical care and treatments for chronic diseases that are preventable when detected early. The Access committee will work closely with the Tri-County Cancer Coalition (serving Park, Gallatin, and Sweet Grass counties) to collaborate on cancer screening and prevention work. This committee is also exploring opportunities to utilize geographic information systems (GIS) to identify underserved populations and develop targeted messaging and interventions that will help connect them to preventive health care.

Finally, Community Health Partners, in collaboration with the Montana State University INBRE program, recently received funding from the Montana Healthcare Foundation to design and implement a *Promotoras* program (promoters of health). *Promotoras* is an evidence-based model where lay members of the community collaborate with local health care providers to bridge the gap between vulnerable populations and quality health care/community resources. *Promotoras* are trusted members of their community and provide culturally appropriate services for their peers. This program will work extensively to address population-based health disparities in the Belgrade and West Yellowstone areas.



Participating Organizations:

- Alcohol & Drug Services
- Board of Health
- Bozeman Health
- Bridgercare
- Community Health Partners
- Bozeman Job Service
- HRDC
- Gallatin County Detention Center
- Gallatin City-County Health Dept.
- Gallatin Mental Health Center

GOAL 1: DECREASE THE PERCENTAGE OF UN-INSURED INDIVIDUALS IN GALLATIN COUNTY.

Objective 1: By the end of 2017 the percentage of uninsured individuals will be below 10%				
Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
1.1 Improve access to health and mental health services by working with jail staff to provide training and support to enroll inmates in health insurance (Medicaid) in order to reduce recidivism and save local tax dollars	1.1.1 Identify and analyze rules and regulations affecting efforts to bill Medicaid for health care services delivered to individuals at the Gallatin County jail	(1.1.1) Number of jail staff trained to enroll in Medicaid	September 2016	Gallatin County Detention Center Gallatin City-County Health Dept
	1.1.2 Identify jail staff to train as certified application counselors	(1.1.2) Number of qualified inmates enrolled in Medicaid	On-going	
	1.1.3 Create and implement system for getting inmates enrolled in Medicaid or other coverage	(1.1.3) Gallatin County expenditures on health care services	December 2016	
	1.1.4 Work with other human service organizations to identify other health care services, such as mental health services, that could reduce recidivism	(1.1.4) Recidivism rate for individuals enrolled in health insurance and connected to health or mental health services	On-going	
1.2 Facilitate in-reach within organizations serving individuals who fall within the 133% of the FPL	1.2.1 Identify human services organizations	(1.2.1) Number of identified organizations contacted	On-going	All
	1.2.2 Hold informational sessions to inform staff of identified human services organizations of availability and appropriate clients	(1.2.2) Number of informational sessions held with HS organizations	On-going/ As needed	
	1.2.3 Provide support to allow for organizations to reach out to their clients to enroll those who will qualify	(1.2.3) Number of clients enrolled in Medicaid by the partner organizations providing in-reach	On-going	



1.3 Form a collaboration group of Certified Application Counselors (CACs) in the community	1.3.1 Hold quarterly meetings for CACs to discuss strengths, weaknesses, opportunities, and threats, as well as utilizing this time to train one another to allow for more efficient enrollments in the future	(1.3.1) Collaboration team formed (1.3.1) Number of quarterly meetings held	March 2016 (first meeting)	Bridgercare CHP
	1.3.2 Maintain current knowledge and stay apprised of changes at the State level that will affect Medicaid enrollment	(1.3.2) Number of changes identified and communicated	On-going	

Focus area: Montana HELP (Health & Economic Livelihood Partnership) Act (i.e. expanded Medicaid)

GOAL 2: IMPROVE ACCESSIBILITY OF HEALTH SERVICES IN GALLATIN COUNTY.

Objective 1: Advocate and provide support for the expansion of HRDC transportation services (Galavan and Streamline) to make daily roundtrips to Three Forks, Manhattan, and Belgrade by the end of fiscal year 2017.				
Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
1.1 Raise awareness around the Galavan on-call service in Three Forks, Manhattan, and Belgrade in order to increase usage and improve access to health resources	1.1.1 Support advertising and media campaigns to inform the community of the on-call Galavan bus service in Three Forks	(1.1.1) Number of trips made from Three Forks, Manhattan, and Belgrade into Bozeman	December 2016	Western Transportation Institute – David Kack Human Resource Development Council – Lee Hazelbaker
	1.1.2 Educate service navigators and providers on free transportation services through Galavan and Streamline for qualified clients/patients needing to come to Bozeman from Three Forks, Manhattan, or Belgrade	(1.1.2) Number of people accessing Galavan service from Three Forks, Manhattan, and Belgrade	December 2016	
1.2 Explore potential sources for additional funding, including employers and local governments, to support expanded transportation services	1.2.1 Conduct cost-study for making 3 daily roundtrips (Galavan) from Three Forks, Manhattan, and Belgrade into Bozeman	(1.2.1) Number of trips made and cost associated (1.2.1) Projected cost of daily roundtrip routes	On-going	
	1.2.2 Compile data to present to community partners, businesses, and governing bodies	(1.2.2) Number of presentations made to community partners, businesses, and governing bodies	January 2017	



	1.2.3 Convene a group/coalition of interested community partners and businesses to advocate for additional transportation funding from County Commissioners	(1.2.3) Number of interested community partners (1.2.3) Additional funding for transportation service on county ballot	June 2017	
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Alignment: 2017 Transportation Goals for HRDC/Streamline/Galavan

Objective 2: Bozeman Health Deaconess Hospital will provide specialist and complementary telehealth services to rural sites by the end of 2017.				
Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
2.1 Develop organizational capacity to provide telehealth services at rural sites	2.1.1 Develop business case for telehealth	(2.1.1) Telehealth vendor selected	September 2016	Bozeman Health Deaconess Hospital Telehealth Services – Sarah Acker
2.2 Pilot telehealth services at one site	2.2.1 Establish agreement between Bozeman Health Deaconess and Big Sky Medical Center	(2.2.1) Number of telehealth appointments (2.2.2) Patient satisfaction	January 2017	
	2.2.2 Establish workflows between pilot site and clinics			
2.3 Roll out telehealth services to rural sites in southwestern Montana	2.3.1 Establish agreement between Bozeman Health Deaconess Hospital and rural sites	(2.3.1) Number of Sites (2.3.2) Number of services	December 2017	
	2.3.2 Establish workflows between pilot site and clinics			

GOAL 3: INCREASE THE PERCENTAGE OF GALLATIN COUNTY RESIDENTS ACCESSING PREVENTIVE HEALTH SERVICES.

Objective 1: By 2017, the proportion of people living below 200% FPL accessing the following preventive services will increase by the following:

Outcome Indicators:	All Gallatin County Residents			
	Gallatin County	All Incomes 2014	2017 Target Range	<200% FPL 2014
% Blood Pressure Checked in the Past 2 Years	91.4%	93.4% - 96.4%	85.5%	
% Cholesterol Check in the Past 5 Years	85.5%	88.6% - 91.6%	81.2%	
% [Women 50-74] Mammogram in the Past 2 Years	77.4%	85.6% - 88.6%	72.5%	
% [Women 21-65] Pap smear in the Past 3 Years	85.6%	90.4% - 93.4%	94.6%	
% [Age 50-75] Colorectal Cancer Screening	72.7%	79.3% - 82.3%	71.7%	

Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
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1.1 Improve the local public health system's ability to deliver recommended preventive services to underserved populations	1.1.1 Support the work of the Tri-County Cancer Coalition, specifically as it relates to colorectal cancer screening	(1.1.1) % of Adults, age 50 and over, who have had a FOBT within the past year, or colonoscopy within the past 10 years	June 2017	Bozeman Health Gallatin City-County Health Dept. Community Health Partners Tri-County Cancer Collaborative
	1.1.2 Inform target populations of events offering free or reduced-priced preventive screenings (HealthCare Connections bus and other Bozeman Health events – i.e. annual wellness fair)	(1.1.2) Number of clients served/number of health screenings provided		
	1.1.3 Utilize GIS technology to identify and target outreach to underserved populations	(1.1.3) Number of targeted outreach campaigns		
	1.1.4 Maintain a master list of community-based preventive programs/services for underserved population	(1.1.4) Number of lists distributed in community (1.1.4) Number of revisions made to list		
1.2 Increase underserved population's understanding of the benefits of preventive care and increase motivation to access preventive care while reducing cultural and health literacy barriers	1.2.1 Identify and design training opportunities for the Promotoras program (specifically cancer screening training)*	(1.2.1) Number of Promotoras trained and serving target communities (1.2.1) Number of people served by the Promotoras program	June 2017	Community Health Partners Gallatin City-County Health Dept.
	1.2.2 Explore opportunities for sustainable funding sources to continue the Promotoras program	(1.2.2) Number of funding sources identified		

**Scientifically supported: Expand use of Community Health Workers (CHW). "There is strong evidence that CHW interventions improve a variety of health outcomes and behaviors, and increase access to care. CHW models are a suggested strategy to promote health behaviors and connect underserved populations." – County Health Rankings & Roadmaps*



STRATEGIC ISSUE 2: HOW DO WE ENCOURAGE HEALTHY BEHAVIORS ACROSS THE LIFE SPAN?

Healthy Behaviors Work Plan – Substance Use – Priority Area Alcohol

Vision: Reduce the negative impacts of alcohol, tobacco and other drugs in Gallatin County, Montana.

To accomplish this, public-private partnerships will use mixed environmental and individual-level strategies that will reinforce a consistent message about the physical and mental health consequences associated with substance use and misuse. The intention of this work is to prevent the onset and reduce the progression of substance abuse and misuse across the lifespan by taking a public-health approach in the settings identified below.



Participating Organizations:

- Alcohol & Drug Services
- C-CODA
- Gallatin City-County Health Department
- Gallatin Mental Health Center
- Montana State University

Long-Term Indicators:

HEALTHY PEOPLE 2020	HEALTHY CAMPUS 2020
<p>Objectives related to Substance Use:</p> <ul style="list-style-type: none"> • Reduce the proportion of adolescents who report that they rode, during the previous 30 days, with a driver who had been drinking alcohol. ** • Increase the proportion of adolescents never using substances. • Increase the proportion of adolescents who disapprove of substance abuse. • Increase the proportion of adolescents who perceive great risk associated with substance abuse. • Reduce the proportion of persons engaging in binge drinking of alcoholic beverages. ** • Reduce the proportion of adults who drank excessively in the previous 30 days. • Decrease the rate of alcohol-impaired driving (.08+ blood alcohol content) fatalities. • Reduce the number of deaths attributable to alcohol. <p>** CHNA data available</p>	<p>Objectives related to Substance Use:</p> <ul style="list-style-type: none"> • Reduce the proportion of students who report engaging in high-risk (binge) drinking of alcoholic beverages in the last 2 weeks. • Reduce the proportion of students who, in the last 30 days, report driving after consuming any alcohol.



GOAL 1: INCREASE COMMUNITY AWARENESS AROUND HEALTH RISKS ASSOCIATED WITH ALCOHOL MISUSE.

High-risk drinking is often identified as a leading issue negatively impacting universities and communities. Gallatin County is no exception. Alcohol misuse and abuse is a complex public health issue with numerous contributing factors. To ensure that future recommendations adopted by Montana State University have the greatest likelihood of adoption and success, a collaborative and shared commitment to this approach is necessary. Addressing alcohol misuse is an opportunity to mark a commitment to an ongoing collaboration between the University and community to address complex and pervasive public health issues.

Objective 1: By the end of 2016, Assess Community Readiness for social change.				
Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
1.1 Conduct a community readiness survey in partnership with MSU of community attitudes, levels of awareness, and political will to change culture within Gallatin County.	1.1.1 MSU INBRE, MSU Health Advancement, and GCCHD will determine existing Data Sources for Community/University perception of alcohol use in Gallatin County.	(1.1.1) Number of partners identifying and compiling existing data sources	April 2016	Montana State University Gallatin City-County Health Dept MSU INBRE Student – Nolan
	1.1.2 Identify and clearly define issue concerning alcohol use.	(1.1.2) Number of key respondents interviews		
	1.1.3 INBRE will help conduct a community readiness survey of community attitudes, levels of awareness, political will to change culture within the community.	(1.1.3) Community readiness score		
	1.1.4 INBRE in collaboration with MSU Health Advancement will analyze and interpret data.	(1.1.4) Number of barriers to change identified and communicated		
2.2 Form stronger cross-coalition relationship to mirror and address alcohol misuse in a consistent way across all settings (University/Schools, Community, Neighborhoods, and Health Care Professionals).	1.2.1 Identify timeline that fits University Coalition’s goals and collaborate on ideas and activities that have outcomes of mutual interest.	(1.2.1) Number of monthly meetings held	December 2016	Healthy Behaviors Coalition
	1.2.2 Collaborate on a regular, scheduled basis with other identified community partners to help float University process to greater community.	(1.2.2) Coalition effectiveness scores		
	1.2.3 Invite leadership from other coalitions (C-CODA, ADSGC, DUI Task Force, etc.) to regularly report on			



	current programs.			
	1.2.2 Annual review process will be established to review to reflect on coalition effectiveness and cohesion.			

Objective 2: By July 2016, develop unified Community and University Value Statement on alcohol use from which to develop any future policy and enforcement procedures.

Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
2.1 Share draft value statement developed by MSU's Coalition to Community, Neighborhoods, and Schools by the end of March 2016.	2.1.1 Identify partners and methods to disseminate value statement for feedback.	(2.1.1) Number of community partners who provide feedback on value statement	March 2016	Healthy Behaviors Coalition
	2.1.2 Finalize value statement based on community feedback.			
2.2 Share finalized value statement through educational materials and joint media release.	2.2.1 Identify media tactics and resources available.	(2.2.1) Number of paid and un-paid media tactics used	July 2016	
		(2.2.1) Estimated audience reached as a result of all combined media tactics		

Objective 3: By December 2016, create a central repository of data related to alcohol use and misuse in the County – accessible to community partners (City, County, University officials, and public).

Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
3.1 Identify where data is stored and how it is shared, who has access, and resources available.	3.1.1 Identify committee to take the lead on this effort.	(3.1.1) # of resources shared	December 2016	Healthy Behaviors Coalition

Objective 4: By June 2016, assess Screening for alcohol use – 18 and under and over 18 in Gallatin County – by Health Providers (Primary Care Provider), include what brief intervention, resources and referrals and follow – up care/procedures they use.

Strategy:	Tactic:	Performance Indicators:	Target Date:	Owner:
4.1 Develop Assessment using Survey Monkey.	4.1.1 Identify populations to survey (CHP, BHDH, MSU Bozeman, Acorn Pediatrics, Three Forks Clinic)	(4.1.1) # of surveys conducted	February 2016	Healthy Behaviors Coalition
4.2 Conduct survey by last week of March.			March 2016	
4.3 Assess results by April 30 and provide recommendations based on survey results.			June 2016	



STRATEGIC ISSUE 3: HOW DO WE ENCOURAGE HEALTHY LIFESTYLE CHOICES?

Based on the results from the 2014 Community Health Assessment, nutrition, physical activity, and weight status emerged as an area of opportunity and a new focus area for our Community Health Improvement Plan. Despite Gallatin County being named the healthiest county in Montana (County Health Rankings & Roadmaps), there is still work to be done to increase access to healthy foods and opportunities to be physically active. A comparison between 2011 and 2014 health assessment data shows that obesity is on the rise across all age groups, particularly in children and seniors. Additionally, low-income individuals and those living outside of Bozeman have an increased risk of being overweight or obese.

Participating Organizations:

- Belgrade Schools
- Bozeman Health Deaconess Hospital
- Bozeman Parks and Recreation
- Bozeman Schools
- Community Health Partners
- Gallatin City-County Health Department
- Gallatin Valley Farm to School
- Gallatin Valley Land Trust
- Gallatin Valley YMCA
- Greater Gallatin United Way
- Heeb’s Grocery Store
- HRDC
- Interested Community Members
- Montana State University
- MSU Extension – SNAP Education Program
- MT Team Nutrition
- Thrive

GOAL: TO EMPOWER THE GALLATIN COMMUNITY TO INCREASE OPPORTUNITIES TO MAKE HEALTHY FOOD AND PHYSICAL ACTIVITY CHOICES

Long-term Outcomes:

- By 2018, the proportion of adults in Gallatin County who have a healthy weight will increase from 45.2% to 52.4%.
- By 2018, the proportion of children and adolescents in Gallatin County who have a healthy weight will increase from 58.4% to 71.4%.
- By 2018, the proportion of adults in Gallatin County who meet HHS physical activity recommendations will increase from 52.7% to 59.7%.
- By 2018, the proportion of children (ages 2-17) in Gallatin County who are physically active for one or more hours per day (for each of the seven days) will increase from 40.1% to 51.9%.
- By 2018 the proportion of the population in Gallatin County who eat five or more servings of fruit and vegetables per day will increase from 39.7% to 46.7%.

These objectives have been identified as long-term indicators for the Nutrition & Physical Activity Committee and are in alignment with leading health indicators from Healthy People 2020.

Strategy:	Tactic:	Process Indicators:	Target Date:	Owner:
1.2 Explore the feasibility of a Nutrition & Physical Activity Coordinator position to help lead the work of the	1.1.1 Investigate how other communities/counties have implemented nutrition & physical activity programs 1.1.2 Explore funding	(1.1.1) Input and shared experiences from other communities (1.1.2) Additional funding opportunities identified	Fall 2016	Gallatin City-County Health Dept. Bozeman Health



group	opportunities (pooling existing funds across organizations, additional grant funding, etc.) 1.1.3 Draft a position description and finalize details of where position would be housed			
1.1 Determine barriers that currently exist regarding access to making healthy food and access to physical activity opportunities	1.2.1 Conduct primary market research (e.g. interviews, focus groups, etc.) in various community/group settings where people and families live, learn, work, and play 1.2.2 Examine existing data to identify trends and barriers	(1.2.1) # and type of primary market research conducted (1.2.2) Trends and barriers identified	Fall 2016	Nutrition & Physical Activity Committee
1.3 Explore community-wide intervention strategies and opportunities	1.3.1 Provide appropriate interventions based on feedback and recommendation from the primary market research	(1.3.1) # of interventions designed and implemented	Fall 2016	Nutrition & Physical Activity Committee
1.4 Establish a Worksite Wellbeing Community Collaborative	1.4.1 Convene employers and worksite wellbeing champions on a quarterly basis to discuss best practices, improve existing worksite wellbeing initiatives, and share resources for implementing worksite wellbeing strategies 1.4.2 Engage Nut/PA coalition members in the work of this collaborative to provide knowledge and expertise to collaborative participants	(1.4.1) # of employers and/or worksite wellbeing champions identified and engaged in worksite wellbeing collaborative (1.4.1) # of worksite wellbeing collaborative meetings held (1.4.2) # of presentations or informational sessions by Nut/PA coalition members	Winter 2017	Gallatin City-County Health Dept.



STRATEGIC ISSUE 4: HOW DO WE INCREASE STRATEGIC COLLABORATION BETWEEN SERVICE PROVIDERS?

During the 2012 Community Health Improvement Planning process, strategic collaboration between service providers was identified as a priority area. As a result, a network of systems navigators in major health and human services organizations throughout the county was created. This network, named the Collaboration team, met on a monthly basis over the course of a year to share and learn about the various organizations within the community. At the end of the year, a new group of service navigators were nominated to participate in the group. Based on the success of this group, Healthy Gallatin will continue to organize and convene the Collaboration team throughout the lifespan of this Community Health Improvement Plan.

Participating Organizations for 2015-2016 Collaboration team:

- Aware/Early Head Start
- Bozeman Adult Learning Center
- Bozeman Job Service
- Bozeman Health Deaconess Hospital
- Bridgercare
- Community Health Partners
- Department of Family Services
- Gallatin City-County Health Department
- Gallatin Mental Health Center
- Gallatin Valley Food Bank
- HRDC
- Love INC
- MSU Extension SNAP Education Program
- Thrive
- Youth Dynamics
- ZoeCare

