

Franklin County/North Quabbin Community Health Improvement Plan 2021-2023

Action Plan

PRIORITY AREA: Anxiety and Depression

Goal: Increase individual and collective resilience by strengthening social connectedness for those experiencing depression and/or anxiety.

Objective 1: By 2023, increase the engagement of people experiencing the spectrum of mental wellness in both decision-making for planning and services, and peer support/sharing activities (with at least 5 people from communities that have experienced systemic oppression recruited first so they can help design the project).

Outcome Indicators	Baseline	2023 Target	Data Source
<ul style="list-style-type: none"> Increased access to peer support groups (virtual and in-person) 	TBD	10% increase	Tally of current peer support groups Attendance numbers at peer groups (survey annual) Increased engagement with peer coaches/counselors # of meetings
<ul style="list-style-type: none"> Increased engagement with peer coaches/counselors 	TBD	10% increase	
<ul style="list-style-type: none"> # of focus groups/advisory meetings held in FC/NQ that give people experiencing the spectrum of mental wellness input into systems and program development. 	TBD	25% increase	

Strategy 1.1: Increase access/decrease barriers to trainings and certifications for people with experience of anxiety or depression by providing funding, publicity, and professional/career supports for Certified Peer Support Specialists (CPS), Community Health Workers (CHW), Young Adult Peer Mentor Certification (YAPM), Doulas, and Recovery Coaches (RC).

Action Steps	Partners and Organizations Responsible	Outcomes	Year 1 Time Line			
			Q1	Q2	Q3	Q4
1.1.1 Recruit people whose voices have been systemically ignored (youth, people of color, indigenous people, people with low incomes in isolated rural areas, transgender people) to give input into how Objective 1 will be addressed	Wildflower Alliance (formerly RLC), CSO, ServiceNet, CHD, Recover Project, Life Path, MCSM, Nurturing Fathers, Art Garden, CAPV Youth Programs, COC	Focus group formed to guide action steps	x			
1.1.2 Gather data on current certification opportunities	Partners: HCC, MassHire, DMH, GCC, CAYP	List complete			x	
1.1.3 Identify barriers to participation, with support of focus groups. Barriers may include access to online classes, transportation, tuition, childcare, translation, and more.	MassHire, Recover Project, CCBHCs, Mass Rehab, CAPV	Barriers identified		x	x	x

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	Youth Programs WIOA, NQCC, LifePath, Wildflower Alliance						
1.1.4	<p>Implement efforts to reduce barriers to participation in CPS, CHW, RC certification for people with experiences of anxiety and depression. Efforts may include:</p> <ul style="list-style-type: none"> • Tuition support • Targeted outreach and advertising • Employment coaches to assist with grandfathering applications. • Work with employers to support professional development of CHWs, RC, etc 	Wildflower Alliance (formerly RLC), CSO, ServiceNet, CHD, Recover Project, Life Path, HCC, MassHire, DMH, GCC, Mass Rehab, CCBHCs, CAPV Youth Programs & WIOA	Outreach and Access campaign			x	x
Strategy 1.2: Gather baseline data on # of support groups currently, and attendance at them.							
Action Steps	Partners and Organizations Responsible	Outcomes	Q1	Q2	Q3	Q4	
1.2.1	Work with focus groups to identify all support groups and design survey to gather baseline data. Ensure survey includes demographic information.	Working Group Co-Chairs lead Audley manage		x			
1.2.2	Collect baseline data from places hosting support groups: Recover Project, Wildflower Alliance, Interfaith Council, AA, NA, Al Anon, North Quabbin Recovery Center, LifePath, schools offering online supports during COVID, and more.	Working Group Co-Chairs lead Audley manage			x		
Strategy 1.3 Support those with lived experience of anxiety and depression to participate in coalitions, planning groups, etc. through stipends, 1:1 preparation support and follow up, and agency “best practice” checklist for optimal inclusion of those with priority perspectives.							
Action Steps	Partners and Organizations Responsible	Outcomes	Q1	Q2	Q3	Q4	
1.3.1	Work with focus groups to review best practice for welcoming and involving people with lived experience into settings that have not traditionally done so.	TBD Project Lead with Wildflower Alliance, Recover Project, CSO, CHD, ServiceNet, Life Path, CAPV, BFMC, NQCC, and more			x		
1.3.2	Distribute best practices	CHIP Network members			x	x	
1.3.3	Organizations in FC/NQ increase their commitment to inclusion (through stipends, changes to meeting format/timing/location, etc. identified in best practice list) of those with lived experience of anxiety and depression in coalitions, planning groups, etc.	TBD Project Lead with many partners				x	

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Objective 2: Increase compassion for people experiencing the spectrum of mental wellness as shown by 10% reduction of stigma reported in surveys in our region.

Outcome Indicators	Baseline	2023 Target	Data Source
Reduction in reported stigma experienced or felt by respondents	TBD	10% reduction	Annual Teen Health Survey CAPV Needs Assessment Survey Healthy Families data Behavioral Risk Factor Survey

Strategy 2.1: Implement educational programs that decrease stigma and increase help-seeking behavior:

Action Steps	Partners and Organizations Responsible	Outcomes	Year 1 Time Line			
			Q1	Q2	Q3	Q4
2.1.1 work with focus groups to review “Minding Your Mind” and “Emotional CPR” curricula and select one	TBD Project Lead, include cultural partners like Art Garden	Curriculum selected	x	x		
2.1.2 Implement chosen curriculum in community settings across the region, through a subcontractor.	CAPV Youth Programs and Family Resource Center, Recover Project, Wildflower Alliance, CHD, CSO, ServiceNet, Medical Reserve Corps, Coalitions: NQCC, 4SC, GMCSP, CTC, MCSM, BFMC, All Souls and Other Faith Communities	Presentations across the region with many groups of people			x	x
2.1.3 Implement “Second Step” elementary curriculum in schools.	Regional School Health Task Force, all local school districts, Communities That Care Coalition	Increased number of districts implement				
2.1.4 Implement effective stigma prevention public education/marketing campaigns through communication and relationship-building (health fairs, bus signage, story-telling events, radio PSAs)	TBD Project Lead and all partners listed above in 2.1.1.	# reached change in our overall measure			x	x

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Objective 3: By 2023, increase the number of organizations funding people in system navigator roles over a 2020 baseline, and increase collaboration between them by 20%.						
Outcome Indicators			Baseline	2023 Target	Data Source	
1.Legislation, policy change at insurers 2.Franklin County Resource Network (FCRN) meeting data 3.Organizational survey results			None currently	1.passage	1.MALegislature.gov 2.FC Resource Ntwk 3. New survey	
Strategy 3.1: Advocate for State policy change on increasing Mass Health and Commercial reimbursement rates for peer support roles filled by people with lived experience to be paid a living wage.						
Action Steps	Partners and Organizations Responsible	Outcomes	Year 1 Time Line			
			Q1	Q2	Q3	Q4
3.1.1 Update CHIP/OTF list of all peer navigator roles in FC/NQ and invite them to participate in advocacy	BFMC, Life Path, CSO, CHD, CHCFC, DMH, DCF, CBHI, Recover Project, FCSO, CAPV, MCSM, Nurturing Fathers, etc. FCRN Lead?	List and Meetings	x			
3.1.2 Meet with key commercial insurance stakeholders to understand levers of policy change for them.	TBD Lead on this project	Meeting, policy change				
3.1.3 Meet with Legislators to address in next Legislative Session	Coalition formed above, and FRCOG	Legislation introduced, local testimony @ hearing			x	x
3.2: Create a network of peer navigators/CHWs through Franklin County Resource Network and using Look4Help						
Action Steps	Partners and Organizations Responsible	Outcomes	Q1	Q2	Q3	Q4
3.2.1 Design improved care coordination systems, better referral connections and mutual support and advocacy between different kinds of peer navigators.	FCRN, BFMC (HRSA Rural Health Network grant),	Model designed, grant applications submitted	x	x		
3.3: Support organizations that host peer roles to better integrate them.						
Action Steps	Partners and Organizations Responsible	Outcomes	Q1	Q2	Q3	Q4
3.3.3 Work with all peer-hosting organizations to identify barriers to integration, support professional development to increase comfort with and use of the role.	TBD Project Lead, MACHW, DPH Recovery Coach Program, and all organizations hosting peer roles.	Survey, Trainings, Coaching, possible grantwriting assistance to identify funding			x	x

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Action Planning Definition of Terms

	Term	Definition/Description
CHIP	Goal	A goal is a broadly stated, non-measurable change in a priority area that describes a desired outcome for that priority area.
	Objective	Objectives articulate goal-related outcomes in specific and measurable terms. Objectives are narrow, precise, tangible, and concrete. Objectives are SMART (specific, measurable, achievable, relevant, time-phased). Objectives usually start with INCREASE, DECREASE, ENHANCE, IMPROVE...
	Strategies	A strategy describes an approach for fulfilling the objective. It is less specific than action steps but tries to answer the question, " How can we get from where we are now to where we want to be?"
	Potential Partners	Those individuals or organizations who are key to achieving the objective and moving it forward. Potential partners could also be organizations who already have initiatives underway in the objective area.
	Outcome Indicators	Indicators are ways to track progress for each of the objectives. These indicators ultimately let your team know if the plan was successful in impacting the priority. They describe the baseline and target values for each objective based on data that are relevant and available.
Action Planning	Monitoring/Evaluation Approaches	The approaches you will use to gather data used to track and monitor progress on strategies and activities (e.g., quarterly reports, participant evaluations from training).
	Action Steps	The tactical steps you will take to achieve each strategy. It is best to arrange activities chronologically by start dates.
	Organization(s) Responsible L=Lead, M=Manage, I=Implement	Identify by name the key person(s) or organization(s) that will lead, manage, and implement the activities for each strategy, including initiating the activity, providing direction for the work, and monitoring progress.
	Outcome (Products) or Results	Describe the direct, tangible and measurable results of the activity (e.g., a product or document, an agreement or policy, number of participants) to demonstrate interim progress.
	Time Line	Indicate the projected quarter/month of completion for each activity in Year 1, or indicate whether activities will not take place until Year 2 or 3.
	Resources Needed	Include all resources needed for this strategy. (Examples: funding, staff time, space needs, supplies, technology, equipment, and key partners)