



2014-2017 Community Health Improvement Plan

Summary and Final Reflections

Total Project Period: July 1, 2014 – June 30, 2017

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Making the Healthy Choice the Easy Choice

Mission: To collaborate with partners across sectors of the community to promote and improve health

If you have any question or are seeking a complete copy of workgroup reflections (including strengths, weaknesses, opportunities, and challenges) email a request to info@hbduc.org.

Introduction

The Yellowstone County Community Health Needs Assessment process is sponsored by the Alliance. The Alliance of Billings Clinic, Yellowstone City County Health Department dba RiverStone Health, and St. Vincent Healthcare is an affiliated partnership consisting of the Chief Executive Officers from these three health organizations whose vision states *“Together we improve the health of our community, especially those who are underserved and most vulnerable, in ways that surpass our individual capacity.”*

In 2005, the Alliance sponsored the first comprehensive Yellowstone County Community Health Needs Assessment (CHNA). The Alliance contracted with Professional Research Consultants, Inc. (PRC) to perform the assessment which included focus groups with community leaders and surveys of 400 community members using the random-digit-dialing method. This process was repeated in both 2010-11, and 2013-14 when CHNAs were once again conducted utilizing the same methodology.

Following the 2013-14 CHNA, opportunities were identified, a Community Forum voting process occurred, and CHNA Advisory Committee validated the results. The identified priorities include: Access to Health Services, Healthy Weight, and Mental Health and Substance Abuse.

These identified priorities formed the Healthy By Design goals. Community experts reviewed formulated objectives. Goals and objectives were then approved by the Alliance and strategies, based on community input, were identified. The Community Health Improvement Plan was adopted June 30, 2014. Each Healthy By Design priority area workgroup reviewed and approved strategies written into the plan. Revisions to any strategies were made. Six month progress reporting occurred throughout the cycle.

This report is the final report of the 2014-2017 Community Health Improvement Plan cycle. Enclosed you will find “report cards” and a “reflection” on the work completed for each of the three priorities focused on by Healthy By Design during the 2014-2017 Community Health Improvement Plan cycle. The report concludes with a high-level listing of overall accomplishments of Healthy By Design.

Note: the report cards indicate progress (actual result from CHNA questions) made on each objective compared to the target set. The color (red, orange, or green) indicates whether we exceeded (green), were in the ballpark (orange) or didn't hit the mark (red) on goals for each objective.

2014-2017 Community Health Improvement Plan Report Card

Access to Health Services	Goal: Improve Access to Health Services	Question	Data			Goal/ Actual 2017
			2005	2010	2014	
	Objectives:					
	By 2017, the proportion of adults in Yellowstone County who have a specific source of ongoing care will increase from 81.7% to 85%	[Adults 18+] Specific source of ongoing care	84.0%	82.0%	81.7%	85% 81.3%
	By 2017, the proportion of adults in Yellowstone County who have visited a dentist or dental clinic in the past year will increase from 62.9% to 69%	About how long has it been since you last visited a dentist or a dental clinic for any reason?	63.9%	70.0%	62.9%	69% 68%
	By 2017, the proportion of adults in Yellowstone County who are without health insurance will decrease from 16.7% to 15%	[Adults 18-64] Insured Status	13.1%	18.6%	16.7%	15% 7.4%
	By 2017, decrease proportion of adults in Yellowstone County who have used the ED more than once in past year from 5.8% to 5.2%	In the past 12 months, how many times have you gone to a hospital emergency room about your own health? This includes ER visits that resulted in a hospital admission.	7.3%	8.6%	5.8%	5.2% 6.1%

REFLECTION: Priority: Access		Goal: Improve Access to Health Services
Key Successes		Access Strategies and Responses
Collective Impact	A team participated in the National Leadership for the Public's Health and applied tools and learnings to formulate a Super Utilizer Patient response and share the Collective Impact Model across the Coalition and community.	<p><u>Overarching Strategies: (reviewed and revised from CHIP by Workgroup 10/16/14)</u></p> <p>Address patient management and implementation of the Patient Centered Medical Home model by identifying high risk unassigned patients and developing a management strategy in order to increase appropriate access, produce positive health outcomes, and reduce costs</p> <p>RESPONSE: in cooperation with increased learning about collective impact, a Super Utilizer Pilot, Care Transitions Team is now in place with shared learnings and patient progress and outcomes being collected</p>
Super Utilizer Pilot	<p>An interdisciplinary team secured funding and formulated a pilot to address complex patients stressing the hospitals through over-use of EDs and inpatient visits.</p> <p>The Pilot is in place, with shared patients being served in coordination with their primary care provider's case management services.</p>	<p>Advocate for Medicaid expansion and access to healthcare and dental service programs that assist those with financial need (e.g. Medicaid, Healthy Montana Kids, Medication Assistance Program, Community Health Access Partnership) through the development and advocacy of an Alliance legislative agenda</p> <p>RESPONSE: Each sponsoring organization addressed independently with collective efforts related to the legislative session and key conversations regarding Medication Assistance Program</p>
Key Opportunities	<p>Continued enhancement, support and promotion of Montana211 with varying users and organizations.</p> <p>Continued collective advocacy for Medicaid expansion and other health insurance coverage conversations. Additionally, considering specific barriers around things such as specialty medications. Opportunity for community education on healthcare and insurance access and appropriate usage.</p> <p>Ongoing exploration and support of residency programs, including coordination among healthcare entities.</p> <p>Communication about learnings and successes of Super Utilizer pilot with exploration of sustainability/next steps.</p> <p>Additional/Ongoing collective impact practice and shared learnings</p>	<p>Promote health insurance acquisition via the Health Insurance Marketplace or other avenues at each Alliance institution and develop a collaborative strategy to educate residents of Yellowstone County about what health insurance means and how to use it effectively. (continuum of "covered to care")</p> <p>RESPONSE: Each sponsoring organization addressed independently with collective efforts related to the legislative session</p> <p>Promote the Montana Family Medicine Residency, Internal Medicine Residency, Dental Residency, and Pharmacy Residency programs and consider the development of other residencies that may offer pathways to appropriate workforce development.</p> <p>RESPONSE: Each sponsoring organization addressed with collective efforts related to the MFMR program</p> <p>Explore avenues of asset mapping along the continuum of care that provides residents of Yellowstone County access to resources and services.</p> <p>RESPONSE: The grant funding and personnel invested in Montana211 has allowed for progress on this strategy. Additionally engagement in shared learnings through the Care Transitions Team is providing insight into future opportunity.</p>

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Healthy Weight

Goal: Improve Healthy Weight Status	Question	Data			Goal/ Actual 2017
		2005	2010	2014	
Objectives:					
By 2017, the proportion of adults in Yellowstone County who have a healthy weight (normal BMI range: 18.5-24.9) will increase from 31.9% to 35%	Weight Status (height and weight) <small>(4 categories: underweight, healthy, overweight, obese)</small>	35.8%	25.4%	31.9%	35% 32.1%
By 2017, the proportion of adults in Yellowstone County reporting no leisure-time physical activity in the past month will decrease from 23.7% to 21.25%	During the past month, other than your regular job, did you participate in any physical activities or exercises, such as running, calisthenics, golf, gardening, or walking for exercise?	26.3%	22.4%	23.7%	21.25% 18%
By 2017, the proportion of adults in Yellowstone County who eat 5 or more servings of fruit and vegetables per day will increase from 40% to 44%	5 or more servings of Fruits/Vegetables per day	34.9%	40.6%	40.1%	44% 30.8%
By 2017, the proportion of Children in Yellowstone County who are physically active for one or more hours per day (ages 2-17) will increase from 42.8% to 47%	During the past 7 days, on how many days was this child physically active for a total of at least 60 minutes per day?	Not asked	Not asked	42.8%	47% 70.8%

REFLECTION: Priority: Healthy Weight

Goal: Improve Healthy Weight Status Priority

CHIP Objectives and Strategies

1. Increase the percentage of people that have received advice about weight by a doctor, nurse, or other health professional
 - Increase number of primary care patients who have had their Body Mass Index (BMI) calculated
 - Increase number of patients having healthy weight plan with BMI outside of healthy range

Response – This work was previously undertaken by the Healthy Weight workgroup, which sunsetted once project was operationalized

2. Decrease the percentage of people with no leisure-time physical activity in past month
 - Increase the number of workplaces adopting Healthy By Design physical activity guidelines (Healthy PLACEs, Wellness)
 - Increase the proportion of commuters who use active transportation (i.e. walk, bicycle and public transit) to travel to work (Healthy PLACEs, Wellness)
 - Increase awareness of gender-based physical activity disparities (Healthy PLACEs)
 - Support Yellowstone County area school-based efforts to increase students' physical activity (Healthy PLACEs)

Response – Worksite wellness demonstration project, inclusion of active transportation resources in toolkits (e.g. Commuter Challenge, bike parking guidelines, etc.), and engagement in Billings Area Bikeway and Trail Master Plan focus groups regarding equity, Active Living Every Day classes, *It All Adds Up* campaign, active transportation initiative at the Gardeners' Market, and School Wellness Champion recognition framework and toolkit.

3. Increase number of people that eat 5 or more servings of fruit and vegetables per day
 - Increase the number of workplaces adopting Healthy By Design nutrition guidelines (Healthy PLACEs, Wellness)
 - Increase the number of community events applying for and achieving Healthy By Design recognition (Wellness)
 - Advocate for access to healthy foods for low-income individuals and families (i.e. WIC, SNAP, food pantries, etc.) (Healthy PLACEs, Ready Community)
 - Support Yellowstone County area school-based efforts to increase students' daily consumption of fruits and vegetables (Healthy PLACEs, Ready Community)

Response – Gardeners' Market (offering WIC/SNAP benefits), framing of Complete Streets as access to daily needs such as healthy foods, elevation of food desert concept, Kresge FreshLo healthy neighborhood planning project, food distribution efforts, event recognition criteria including healthy food options, healthy catering tip sheet, School Wellness Champion recognition framework and toolkit.

4. Overarching Strategies:
 - Promote the use of the 5-2-1-0 awareness campaign (Healthy PLACEs, Wellness)
 - Support the valuation of the built environment as it relates to health and safety (Healthy PLACEs)

Response – Incorporation of 5-2-1-0 message into event recognition and signage for HBD events (e.g. Gardeners' Market and Kresge FreshLo community events); development of School Wellness Champion recognition framework and toolkit; advocacy of built environment in community presentations.

Key Successes

- Complete Streets: Successfully advocated for updated Complete Streets resolution (2016) including the engagement of diverse area stakeholders and a focus on health equity; assisted in Complete Streets Progress Report
- Complete Neighborhoods: Investigate walkability, connectivity, and placemaking opportunities of Billings-area neighborhoods to promote physical activity and access to resources
- Gardeners' Market: Successfully introduced an Active Transportation at the Market campaign; 7th annual Gardeners' Market underway
- Active Living Every Day class series/Office of Women's Health Project (through August 2016): Successfully completed Office of Women's Health grant to include implementation of the *It All Adds Up* campaign and Active Living Every Day classes; Over 92% of class participants reported fewer barriers to physical activity than before starting the Active Living Every day course.
- Worksite Wellness: Created a catering tips brochure to assist businesses in selected healthy food options for meetings and events. Piloted a demonstration project in partnership with Big Sky Economic Development and area small businesses; including the recruitment of local Technical Assistants, development of action planning tools and toolkits based on a broad array of wellness topics.
- Event Recognition: Application was successfully streamlined for easier use, especially among repeat event organizers
- Connect Food Distribution Efforts: Strong networks among pantries, food distributors, and referral sources have been established to reduce waste and increase food access. SD2 and Food Services of America increased the number of summer meals distributed and summer feeding sites; Family Services increased direct delivery to vulnerable populations (e.g. seniors and lower income neighborhoods)
- School Wellness Champion Toolkit (ad hoc group): Developed a School Wellness Champion toolkit and recognition framework for middle/high school staff

Key Opportunities

- Continued exploration of the "Complete Neighborhoods" concept, including tangible policy, system, and environmental approaches to implement this at the local level (currently focused on South Side via Kresge FreshLo project)
- Promotion of Bicycle Friendly Business recognition among local businesses to promote overall culture change and marketing of Billings as a vibrant, active community
- Further implementation of ALED classes and *It All Adds Up* campaign post-grant cycle (e.g. MT Cancer Control Program at RiverStone Health will implement classes in Yellowstone and surrounding counties)
- Identify likeminded early adopters and role models of healthy events, such as specific restaurants or event centers that are committed to healthy options to promote event recognition principles and expand application pool beyond HBD Coalition members
- Explore avenues to communicate established worksite wellness resources, such as catering guide, toolkits, action planning tool, and event recognition (e.g. social media, website, peer networks)
- Examining how food distribution efforts can be enhanced beyond additional pantry sites (e.g. identification of strong leaders and advocates, staff capacity, and referral networks)
- Increased efforts to institute school breakfast and alternative breakfast programs
- Additional promotion of School Wellness Champion project, continued toolkit refinement

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Mental Health & Mental Disorders and Substance Abuse	Goal: Improve Mental Health & Reduce Substance Abuse Objectives:	Question	Data			Goal/Actual 2017
			2005	2010	2014	
	By 2017, the proportion of adults in Yellowstone County who report their mental health as being good, very good, or excellent in the past 30 days will increase from 89.4% to 94%	Now thinking about your MENTAL health, which includes stress, depression and problems with emotions, would you say that, in general, your mental health is:	93.1%	89.9%	89.4%	94% 86.6%
	By 2017, the reported suicide rate in Yellowstone County will be reduced from 17.3 deaths per 100,000 to 16.3 per 100,000 population	Data extracted from CDC WONDER online query system	14.3 per 100,000	16.6 per 100,000	17.3 per 100,000	16.3 per 100,000 22.8 per 100,000
	By 2017, reduce the proportion of adults in Yellowstone County who report drinking chronically from 7.1% to 6.4%	Chronic Drinker (60 or more drinks in past month) *BRFSS/PRC calculation change: now “heavy drinking” 60+ drinks/mo.-men; 30+ drink/mo.-women; for comparison, calculated for 2014: rate was 10.8%	3.2%	3.2%	7.1%	11.1%*
	By 2017, pursue at least one policy focused opportunity related to chronic pain and opioid abuse that will positively impact the residents of Yellowstone County	<p>Comments: The 2013 legislature passed an interim study bill on prescription drug abuse. The children, families, health and human services interim committee studied the issue June 2013 - September 2014 and forwarded three bills for consideration to the 2015 legislature:</p> <ul style="list-style-type: none"> · SB 9 - Allow sharing of certain health care information with law enforcement (did not pass) · SB 8 - Allow electronic prescribing of controlled substances prescriptions (passed) · SB 7 - Revise and extend the prescription drug registry fee (passed) <p>The 2017 Legislature did a few things that will positively impact opioid abuse:</p> <ul style="list-style-type: none"> • HB 323 Allows schools to maintain a supply of an anti-overdose drug and administer the drug in instances of suspected opioid overdoses. • HB 333 Allows the state medical officer and medical practitioners to prescribe an anti-overdose drug to certain individuals and entities, including first responders, to be used in cases of opioid overdoses. • SB 56 Revises sunset date to June 30, 2019 for funding of the prescription drug registry <p>Also, DPPHS was granted authority to enter into the cooperative agreement with CDC and is facilitating a statewide opioid abuse strategic plan.</p>				
	By 2017, reduce the proportion of adults in Yellowstone County who report smoking cigarettes from 11.7% to 10.5%	Smoking Status	18.3%	13.8%	11.7%	10.5% 19.6%

<p>By 2017, pursue at least one policy focused opportunity related to smoke free/tobacco free facilities, campuses, worksites, or public spaces (e.g. parks, housing) that will positively impact the residents of Yellowstone County</p>	<p>Comments: there is continued advocacy for tobacco-free parks; Partnership building continues as well awareness of position. Advocacy has occurred through the strategic planning key informant interviewing conducted by the local parks and recreation department and as well as public comment/survey opportunities. Also, a clean indoor air rule, RULE #7 is under consideration by the local Board of Health. It proposes prohibiting the indoor use of electronic nicotine delivery systems (ENDS), which include e-cigarettes and other vaping devices, in public spaces. Furthermore, RULE #7 establishes that smoking, including the use of ENDS, may not occur within 30 feet of public entryways, windows or ventilation systems. Hearing have been conducted, a decision is pending.</p>
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REFLECTION: Priority: Mental Health and Substance Abuse		Goal: Improve Mental Health and Reduce Substance Abuse
<p>Workgroup Key: Community Advocates for Student Mental Health (CASMH), DE-STRESS Grant Partners (DE-STRESS), Mindfulness Task Group (MTG), RiverStone Health -Montana Tobacco Use Prevention Program (MTUPP), Suicide Prevention Coalition of Yellowstone Valley (SPCYV)</p>		
Key Successes	Core Activity Summary	Mental Health and Substance Abuse Strategies and Response:
<p>Adverse Childhood Experiences (ACEs) and Trauma-Informed Care (TIC) Awareness</p>	<p>Social Marketing Campaign: General public campaign about ACEs designed to empower individuals to know their score and take action. (DE-STRESS)</p> <p>Introductory Training: Community-wide training for the general public and staff working in agencies across various sectors to introduce the concepts of TIC and ACEs. A train the trainer model was created to sustain future efforts. (DE-STRESS)</p> <p>Community Collaboration: Many organizations have worked together towards common goals. The relationships and connections made will continue to positively influence future efforts.</p>	<p>Strategy: Identify, support, convene, and/or engage in community – collaborative work focused on the area of mental health in order to address commination and treatment gaps.</p> <p>Response: <i>Several relationships have been built and groups are meeting to collaborate on trauma-informed care, suicide prevention and overall community mental health.</i></p> <p>Strategy: Increase access to behavioral health specialist in primary care settings.</p> <p>Response: <i>We have worked to increase access by providing supervision to students and professionals working on licensure, establishing a mental health clinic on the south side of billings, and creating an electronic directory for mental health resources.</i></p>
<p>Trauma-Informed Care (TIC) Response</p>	<p>Staff Response Training and Organizational Assessment: Trauma-informed Care training for local organizations aimed to build skills for individuals and help improve organizational response. A train the trainer model has created to sustain future efforts as well as an assessment toolkit. (DE-STRESS)</p> <p>Training for Teachers: Coordinated mental health support for teachers. Strategically providing teachers resources, training and strategies for helping students in the areas of trauma, suicide prevention and crisis intervention. (DE-STRESS, CASM)</p> <p>Mindfulness Classes: A 6-week mindfulness program for stress reduction was created and offered to health care and social service providers. (DE-STRESS, MTG)</p> <p>Student Supervision: Local MSW and LCPC students received clinical supervision and workforce development opportunities. (DE-STRESS)</p>	<p>Strategy: Increase capacity for trauma-informed care education, promotion, collaboration and implementation.</p> <p>Response: <i>We have increased capacity of trauma-informed care education, promotion and response through the many elements of the DE-STRESS grant project.</i></p> <p>Strategy: Continue to support the Community Crisis Center.</p> <p>Response: <i>The Community Crisis Center has been an active partner in the trauma-informed care training initiatives.</i></p> <p>Strategy: Explore avenues of asset mapping to provide residents of Yellowstone County access to resources and services</p>

	<p>Mental Health Directory: A local up-to-date electronic database for mental health resources was disseminated via montana211.org (DE-STRESS)</p> <p>Walla Walla Mental Health Clinic: South-side student led mental health clinic serving low-income individuals and families was established. (DE-STRESS)</p> <p>Home Visiting Referral: A system to better process referrals for new baby home visits was established. Several local home visiting agencies are now working closer together to triage and visit families in need. (DE-STRESS)</p>	<p>Response: <i>Through the Montana211 system we have been able to map referral opportunities via a public electronic database.</i></p> <p>Strategy: Support advocacy efforts to reduce gaps in prevention, as well as support treatment for co-occurring disorders and treatment of family units.</p> <p>Response: <i>Through the DE-STRESS grant we helped to address the issues of toxic stress and trauma in our community. Several of the partners of the projected worked with individuals being treated for co-occurring disorders.</i></p>
<p>Suicide Prevention Awareness and Gatekeeper training</p>	<p>Workshops on Suicide Prevention: Several events raising awareness and teaching skills to prevent suicide have been offered to a variety of professionals and general community members. (SPCYV)</p> <p>Signs of Suicide School (SOS): Training and systems have been put in place for the school based curriculum to begin to be used at School District 2 high schools in 2017 (CASM)</p> <p>Gatekeeper Suicide Prevention Training: Coordinated training provided to community groups to help prevent suicide. Trainings include: QPR, safeTALK, ASSIST and Talk Saves Lives. (SPCYV)</p> <p>Firearm Safety Awareness: Utilizing a national partnership with the American Foundation for Suicide Prevention and National Shooting Sports Foundation, a local subcommittee has formed to advocate for safe gun storage. (SPCYV)</p>	<p>Strategy: Support Suicide prevention by increasing the number of people in the community who have received suicide prevention training.</p> <p>Response: <i>We continue to provide training to individuals in the community so they can better identify warning signs of suicide and refer individuals to help. An opportunity with School District 2 has allowed us to improve systems within the educational setting and national partnerships around safe gun storage have given us the ability to address access to means.</i></p> <p>Strategy: Continue promoting depression screening and referral for adolescents over the age of 12 as well as adults (Increase depression screening HP MHMD 11)</p> <p>Response: <i>Depression screening is one part of the SOS curriculum which is set to be implemented in School District 2.</i></p>
<p>Tobacco Prevention</p>	<p>Tobacco Free Policy Promotion: Advocate for tobacco free policies and places. (MTUPP)</p> <p>Tobacco Prevention Education: Tobacco prevention education in the schools (MTUPP)</p>	<p>Strategy: Examine emergency department utilization across organizations. Develop recommendation as appropriate. Identify high users and strategies to increase health outcomes and reduce costs</p> <p>Response: <i>This strategy was primarily addressed through the Access priority. Beyond the resource directory that was created as part of the DE-STRESS project, no other formal response took place.</i></p>
<p>Key Opportunities</p>	<p>Ongoing exploration for addressing mental health and substance abuse issues collectively.</p> <p>Continued awareness of ACEs and Trauma-Informed Care. Specifically, with parents and families.</p> <p>Continued training on how to apply Trauma-Informed Care at a practical level.</p> <p>With a more efficient universal system for referring home visits, opportunity exists for increasing the number of visits offered in our community.</p> <p>Coaching or incentivizing for agencies working to become trauma-informed. This would ensure they are applying the Trauma-Informed Care principles they were trained in.</p>	<p>Strategy: Establish a county baseline and create community guidelines for prescribing controlled substances and discouraging nonmedical use of pain relievers in Yellowstone County</p> <p>Response: <i>No formal response took place due to limited resources in the area of substance abuse.</i></p> <p>Strategy: Promote and encourage policy opportunities related to smoke free/tobacco free facilities, campuses, worksites, or public spaces.</p> <p>Response: <i>Through RiverStone Health's contract with the state, work continues via youth education and the promotion of policies to reduce exposure.</i></p>

Healthy By Design Accomplishments

Historical efforts of the Alliance (Billings Clinic RiverStone Health and St. Vincent Healthcare) offered the example and for the opportunity to collaborate among healthcare organizations in Yellowstone County on Community Health Needs Assessments (CHNA) followed by specific efforts tied into a Community Health Improvement Plan (CHIP)

2006

- Community Health Needs Assessment completed

2007

- Awarded Robert Wood Johnson Foundation grant
- Healthy Places Initiative began
- Health Impact Assessment of Yellowstone County/City of Billings Growth Policy
- Birth of Healthy By Design Recognition program

2008

- Community Health component adopted into Growth Policy

2009

- Awarded NACCHO ACHIEVE Healthy Community grant (promote PSE)
- Community Action Plan focused on “Complete Streets” policy
- Roll out of the Recognition program

2010

- National Association of County City Health Officials Model Practice Award
- NICHQ grant-Healthy Weight Collaborative and 5-2-1-0 development
- CHNA completed, developed PITCH, revised to CHIP

2011

- Complete Streets policy adopted
- Worksite nutrition and physical activity tools developed
- Women and Children’s Health work began pending grant funds
- Creation of a Gardeners’ Market located at RiverStone Health
- Office on Women’s Health grant secured (focused on increasing leisure-time physical activity among women)

2012

- Healthy By Design structure and workgroups formalized (with on-going shifts to follow reflecting need for flexibility in coalition efforts)
- Farmers Market Promotion Program grant received

2013-14

- Community Health Improvement staff hired to enhance and coordinate efforts of Healthy By Design
- CHNA completed, CHIP authored
- Received DE-STRESS funding for mental health priority and trauma informed care
- Established mental health workgroup
- Established access to care workgroup
- Accepted as a National Leadership Academy of Public Health team

2014-15

- Received funding from MT DPHHS on behalf of the Montana Health Care Foundation to work on identifying the characteristics of shared high utilizing patients. Funding was also secured via Pacific Source Charitable Foundation to support the collective high utilizing patient analysis and response planning resulting in a Community Care Coordination Pilot for shared complex patients
- Trauma Informed training modules completed with delivery underway
- Sub-granted organizations pursued trauma-informed and responsive status
- MAP program was reviewed and was refined by pharmacy directors at the three Alliance organizations.
- Blue Cross Blue Shield Foundation funding secured to support Healthy Kids, Healthy Families Initiative focused on piloting health champions in middle and high school programs
- Healthy By Design hosted a presentation by Mark Fenton, national walking advocate
- Piloted a policy, systems and environmental focused worksite demonstration project in collaboration with small employers identified by Big Sky Economic Development, resulting in developed tools and learnings regarding small employer wellness.

2016

- Successfully advocated for an updated Complete Streets resolution; adopted by Billings City Council
- Farmers Market Promotion Program grant received to support the Gardeners' Market in 2016 – 2017
- Community Health Needs Assessment completed
- Event recognition application was revised to streamline process for repeat events
- Received funding from the Kresge Foundation to identify barriers and opportunities to food security and neighborhood placemaking within the South Side triangle of Billings
- Sub-granted organizations pursuing food access and placemaking projects on the South Side (greenhouse at the South Side Community Center, container gardens through Parks and Recreation, community garden at Passages, and South Siders exhibit at the Western Heritage Center)
- Received a micro grant from the Everybody Walk! Initiative of America Walks to implement an active transportation campaign into the Healthy By Design Gardeners' Market at South Park in summer 2017
- Work related to the 5-year Office on Women's Health grant including a social marketing campaign (1 hour of physical activity—It all adds up!), and community Active Living Every Day classes was completed while Yellowstone County survey results showed an increase leisure time physical activity and increase in awareness of the community health message (5-2-1-0)

2017

- 7th annual Gardeners' Market begins (4th at South Park)
- Launched a re-vamped Healthy By Design website, www.hbdyc.org including resources on ACES, Trauma Informed Care, and the latest CHNA and CHIP
- Latest CHNA and CHIP published