

Clinical/Emergency Care Strategy Map

STRATEGIES - ACTIONS

OBJECTIVES

GOALS

VISION

Monitor, Evaluate, and Adapt

- Educate consumers on the appropriate health care settings for routine, urgent and emergency care
- Improve health literacy to promote healthier lifestyles, including practice of preventative care
- Promote health education about diet, active living and well-being in schools (K-12), educating and influencing people to make better health choices
- Promote targeted, professional and public interventions, to address deficiencies in current access to preventive and other health services, focusing on smoking cessation, adult obesity, STD infection rates, diabetic screening and mammography screening
- Expand access to and participation in self-management programs*
- Promote availability of ease of access tools for clinical providers which improves data sharing among a variety of health care settings
- Increase communications related to emergency response expectations among providers and public health (e.g. multi-casualty; pandemic outbreaks, etc.)
- Increase collaboration related to communicable disease control between providers and public health, including immunizations and early notification of reportable conditions
- Improve the provider network for outpatient, crisis and peer support of behavioral health sciences to ensure a greater diversity of contractors who can deliver an integrated, evidence-based model** and community oriented services to divert/transition patients from EDs, jails & homelessness
- Create a secure assessment facility for mentally ill persons who are interacting with law enforcement
- Succession Planning: Identify number of retiring providers; Estimate need per population growth; Recruit, train & replace needed providers
- Meet the demand for dental services by increasing capacity and access
- Support strategies to sustain access to free or reduced cost basic health services from safety net providers for the uninsured or underinsured individuals
- Promote advance care planning.
- Increase payment rates for primary care and behavioral health care with the county/state. ***Includes behavioral health parity in all Health Plans
- Expand opportunities to enroll eligible individuals using Washington Health Benefit Exchange (WAHBE) Program
- Encourage transition to value based reimbursement models
- Decrease utilization of jails as our primary mental health treatment center
- Improve access to mental health services for all, but especially for low and moderate income persons
- Provide on-site services to shelters, permanent support and transitional housing sites including SNFs, Adult Family Homes, etc.

- Educate and influence people to make better health choices
- Increase use of proven evidence based treatments and services; Increase public health's awareness and self-care
- Promote appropriate resource utilization
- Integration including in emergency and disaster response services across all community providers including public health, mental health, clinical service delivery and its various disciplines and their institutions
- Maximize insurance coverage
- Maintain "safety net" services
- Assure adequate supply and distribution of health care*** providers
- Increase capacity of and access to behavioral health services in the community including the criminal justice system, homeless, military, LGBT and non-English speaking residents

- Integration of care: medical, behavioral and public health
- Learn to live a healthy life and take care of yourself
- Increase access to appropriate medical, behavioral and public health
- Reduce disparities in health outcomes among the various demographic groups of county residents
- Maximize value of health care spending

More people live longer, healthier lives because they take care of themselves and received right care at the right place at the right time

*i.e. Stanford Chronic Disease Self-Management Program

**i.e. Recovery and Resiliency Model

***To include all 27 types of health care providers to be listed here

DRAFT

