### Arizona Health Improvement Plan Detailed Action Plan

2024-2025 UPDATE



### **Priorities**

Numerous community and stakeholder <u>forums</u> were held during the planning of the 2021-2025 Arizona Health Improvement Plan (AzHIP). In total, over 500 individuals participated from both private and public organizations across the state. These forums were designed to ensure the AzHIP priorities were meaningful and addressed the most important issues to Arizonans.

**Note:** Leading organizations of tactics and/or action steps have been noted in parentheses.

### **Health Equity**

### **STRATEGIES & INDICATORS**







#### **Advance Data Equity Best Practices**

- Advance best practices for centering equity during each stage of data lifecycle which can include the development of collaborative position papers and facts sheets, and a catalog of data equity resources. (ADHS, ADHS Data Advisory Committee)
- Identify the action areas from the other AZHIP Priority implementation groups that involve data and ensure that data equity best practices are prioritized wherever possible. (ADHS, ADHS Data Advisory Committee, AZHIP Co-Chairs)
- Connect ADHS programs with community based organizations (e.g., through community advisory boards and the ADHS Equity Partner list) with an emphasis on strengthening and building collaborations around data. (ADHS, ADHS Data Advisory Committee)
- Encourage the ethical usage and expanded adoption of Community Based Participatory Research (CBPR) by groups committed to health equity doing work at the community level. (ADHS, ADHS Data Advisory Committee)
- Spread awareness of funding opportunities that support Arizona organizations to build their capacity for using data to advance health equity. (ADHS, ADHS Data Advisory Committee)





#### **Strengthen Data Sharing and Transparency**

- Increase collaboration and strengthen best practices around data sharing between ADHS and state agencies, health information exchange, local health departments, and community organizations. Identify common goals and any barriers that can be removed. (Contexture, ADHS Data Advisory Committee)
- Increase collaboration and strengthen best practices around data sharing between ADHS and Tribal Nations with emphasis on Indigenous data sovereignty. (Arizona Advisory Council on Indian Health Care, ADHS Data Advisory Committee)
- Increase the public awareness of all data available at ADHS and the means of accessing it (e.g., public health data portal, data requests submission form, GIS open data, annual reports and dashboards).
   (ADHS, ADHS Data Advisory Committee)
- Enhance the use and capabilities of informatics in public health. (ADHS, ADHS Data Advisory Committee)





Strategically engage stakeholders, including diverse and nontraditional stakeholders, in meaningful ways which build trust in relationships and engagement

- Conduct training on best & promising practices, including topics such as non-traditional community engagement, models/frameworks of innovative Community Engagement, common language, telecommunity engagement, and offering a variety of practices that are culturally competent in approach. (ADHS, OHE)
  - Currently being reviewed and adapted at the ADHS agency level in the Equity Action Plan
- Communicate (e.g., through webinars, data sharing) data collection findings with statewide partners and communities, which closes the loop on identifying, sharing, and communicating data. (AzHIP HEIT, ADHS)
- Develop evaluation metrics/tools which assess the impact of partnerships. (ADHS)
  - ADHS will do this through the Equity Partner List and report back to HEIT





#### Policy Change: Empower communities to drive policy change

- Develop educational opportunities for community stakeholders so that they may engage in policy change efforts. Centering the importance of lobbying vs. advocacy vs. education. Ensuring that all levels of government - tribal, federal, state, local - are highlighted in the training.
- Reassess previous policy, systems, and environmental (PSE)
  initiatives/efforts to reinvigorate opportunities for health in all
  policies (HiAP) implementation, (e.g., complete streets, shared use,
  urban shade plans, multimodal transportation, affordable housing,
  and local school wellness policies). (ADHS, HEIT)
  - PSE Playbook has been completed and now it needs to be promoted.



#### Systems Change: Remove barriers to assist individuals/ communities in navigating systems

 Adopt an inclusive practice that ensures community members, including under-represented and resourced, are represented in all planning stages of initiatives and programs designed to advance health equity. (ADHS)





### Environmental Change: Promote Smart Growth development and foster engagement of non-traditional stakeholders

- Support efforts of the AzHIP Rural & Urban Underserved Health Priority to bolster rural resources addressing access to healthcare services. (HEIT)
  - Schedule meeting between HEIT and Rural and Urban Underserved Health Priority to see where there is alignment or collaboration
- Increase the health literacy of the population. (ADHS, HEIT)
  - Strengthen health and digital literacy efforts by providing communication in multiple languages & modes, and offering professional interpretation and translation services, in coordination with the Health Equity Community Partnership & Engagement strategies.

# Health in All Policies/ Social Determinants of Health

#### **STRATEGIES & INDICATORS**



# Reduce the proportion of Arizonans spending more than 30% of their income on housing

 Reduce the proportion of families that spend more than 30% of their income on housing

### Create neighborhoods and environments that promote health and safety

- Reduce the number of days people are exposed to unhealthy air
- Reduce the number of heat-related deaths and emergency department visits

#### Promote safe and active transportation

- Increase trips to work made by mass transit
- Increase the proportion of adults who walk or bike to get places
- Reduce deaths from motor vehicle crashes

### Improve health by making nutritious foods available

- Reduce household food insecurity and hunger
- Increase % of eligible individuals enrolling in SNAP and WIC
- Increase the number of farmers markets accepting Senior Farmer Markets Nutrition Program and Farmer Markets Nutrition Program





# Consider and integrate where appropriate, health considerations into the State's Low-Income Housing Tax Credit Qualified Allocation Plan (QAP)

- Drive increase in participation/input in the QAP (focus groups with targeted public health professionals/populations/communities). (ADHS, Vitalyst Health Foundation, ADOH, LISC)
- Review how other states/jurisdictions have incorporated health into their QAP and identify opportunities to leverage best practices. (ADOH)



#### **Enhance coordination across the state on housing issues**

- Track progress and align efforts with the Governor's Interagency Council on Housing & Homelessness (ADHS, ADOH, AHCCCS, DES)
- Track progress and align efforts with the Governor's Roadmap for Housing and Human Services (ADHS, ADOH, AHCCCS, DES)
- Identify specific gaps in which municipal governments can assist/collaborate with state agencies on promoting public health initiatives (City of Tempe)



## Support use of Medicaid billing codes among community-based organizations to increase ability to access federal resources for services

- Develop and deliver training to AHCCCS providers. (AHCCCS)
- Develop or expand meaningful partnerships between housing and AHCCCS providers. (AHCCCS)
- Identify gaps in billing for social determinants of health and determine how to address them. (AHCCCS)





# Integrate economic support services (e.g., financial literacy, Earned Income Tax Credit, childcare, etc.) in public health programs

- Promote earned income tax credit and other economic support services through public health programs. (ADHS)
- Incorporate SOAR initiative (homeless) SSB/Social Security. (AHCCCS, ADOH)
- Enhance awareness of opportunities of EITC and financial literacy (529 accounts). (Wildfire)
- Utilize community health navigators to promote services



### Monitor and support financing and funding tools available to develop and preserve housing affordability

- Implement Arizona's Housing and Health Opportunities (H2O)
   Demonstration starting October 2024 (AHCCCS)
- Review tax credit criteria to increase approval capacity for Low Income Housing Tax Credit (LIHTC) proposals (AHCCCS)
- Provide support service dollars to LIHTC properties following award (AHCCCS)



#### Utilize supportive housing to improve health outcomes

- Increase access and utilization to social services for supportive housing residents. (Arizona Housing, Inc.)
- Partner with organizations to create standard operating procedures for housing supportive services. Including identifying mandatory training courses for housing support staff. (AHCCCS with AzHIP and Community Organizations)





# Improve information systems and data sharing between medical and other care systems (human services) to facilitate coordination/referral of individuals to the right resources and track outcomes

- Align stakeholders with a closed loop referral system to ensure appropriate referral was made and service delivered. (AHCCCS, Contexture)
- Establish data sharing agreements to ensure partners gain real-time insights for the rapid detection of current and potential health hazards and threats. (ADHS)
- Ensure the Master Person Index facilitates linkages and information exchange between disparate systems. (ADHS)



### Increase awareness and understanding of the connection between health and housing

- Promote adoption of the Home is where it all starts campaign (Home Matters to Arizona)
- Increase awareness and adoption of social determinants of health into affordable housing development and community development projects. (Home Matters to Arizona)



### Develop actions to contribute to addressing tribal determinants of health needs in consultation with tribes

- Consult and engage with tribal leaders and communities on housing, and health, human services, and transportation on an ongoing basis. (ADOH, ADHS, AHCCCS, DES, ADOT)
- Provide training on tribal housing needs. (Arizona Advisory Council on Indian Health Care)





#### **Engage communities in improving the built environment**

- Consider and integrate where appropriate health considerations into General Plan updates.
- Encourage walkability in municipal codes and development projects.
- Build partnerships with municipal and state Parks and Recreation departments and other outdoor recreation organizations. (ADHS, AZ Health Zone, AHCCCS)
- Support the implementation of the Statewide Comprehensive Outdoor Recreation Plan (SCORP) (Arizona State Parks & Trails (ASPT), ADHS, AZ Health Zone)
- Complete a landscape analysis and map to identify areas receiving and not receiving support for built environment projects to inform future areas of work. (ADHS, AZ Health Zone)
- Increase capacity for built environment work to include pilot testing walkability audit training and toolkit (ADHS, AZ Health Zone)
- Conduct a built environment workshop for local partners to increase knowledge of built environment strategies and available funding sources for projects. (ADHS, AZ Health Zone, ASPT)
- Support communities in utilizing the Active Communities Tool or similar assessment and action planning tool to support built environment changes. (ADHS, AZ Health Zone)



Tactic B

#### **Engage communities in funding prioritization**

- Increase the number of smaller-scale transportation projects and activities utilizing funds from the Transportation Alternatives Program for Greater Arizona (ADOT)
- Codify large funding sources for the built environment (e.g. LIHTC, trust fund, investors, philanthropy) to require SDOH-specific investments. (Arizona Department of Housing, Arizona Housing Coalition, Home Matters to Arizona)
- Identify new funding opportunities that support innovation in the built environment. (Home Matters to Arizona, Arizona Housing Coalition)
- Identify partners that can help with infrastructure funding. (ASPT)



#### Mitigate the impacts of extreme heat

- Implement the Arizona Extreme Heat Response Plan (ADHS)
- Improve development standards for engineered shade options (parking lots, private outdoor spaces, and public sidewalks) (City of Tempe)
- Increase shade percentage requirement for projects seeking alternate landscape standards or increased surface parking (City of Tempe)





#### Enhance the connection between health and transportation

- Support mixed density projects along transportation corridors. (Vitalyst)
- Promote SDOH screening and referrals for transportation via CommunityCares. (Contexture)
- Increase percentage of transit stops with shelter and amenities. (City of Tempe)
- Identify Active Transportation projects. (ADHS, AZ Health Zone, ADOT, COGs, local coalitions)
- Support the development and implementation of the Arizona Active Transportation Safety Action Plan (ADHS, ADOT)



#### Increase safe, healthy, and equitable mobility for all Arizonans

- Support municipalities that have adopted the Vision Zero approach and encourage others to eliminate traffic fatalities and severe injuries among all road users. (ADHS, City of Tempe)
- Explore opportunities that expand a Safe System Approach (SSA) to address roadway safety. (ADHS)
- Support the implementation of the Governor's Office of Highway Safety State of Arizona Highway Safety Plan. (ADHS, ADOT, MAG, GOHS)
- Support the development and implementation of ADOT's Arizona 2024 Strategic Highway Safety Plan. (ADOT, ADHS, DES)
- Increase public awareness and community programming to decrease High Severity Traffic Crashes. (City of Tempe)



Tactic A

#### **Connect communities to food**

- Promote access to and increase the number of farmers markets and retailers participating in Double Up Food Bucks and EBT acceptance. (Arizona State Nutrition Action Committee (SNAC))
- Support and engage with the Arizona Food System Network's food food action plan including mobile food access.
- Promote SDOH screening and referrals for food access via CommunityCares. (Contexture, ADHS)
- Support worksites in implementing food service guidelines to improve access to healthy food during work hours. (ADHS)
- Increase autonomy for participants at food banks and food pantries through implementation of the Nutrition Pantry Program. (ADHS, AZ Health Zone)
- Implement a Food as Medicine Program to improve access to healthy foods for individuals with chronic conditions (Blue Cross Blue Shield of Arizona)

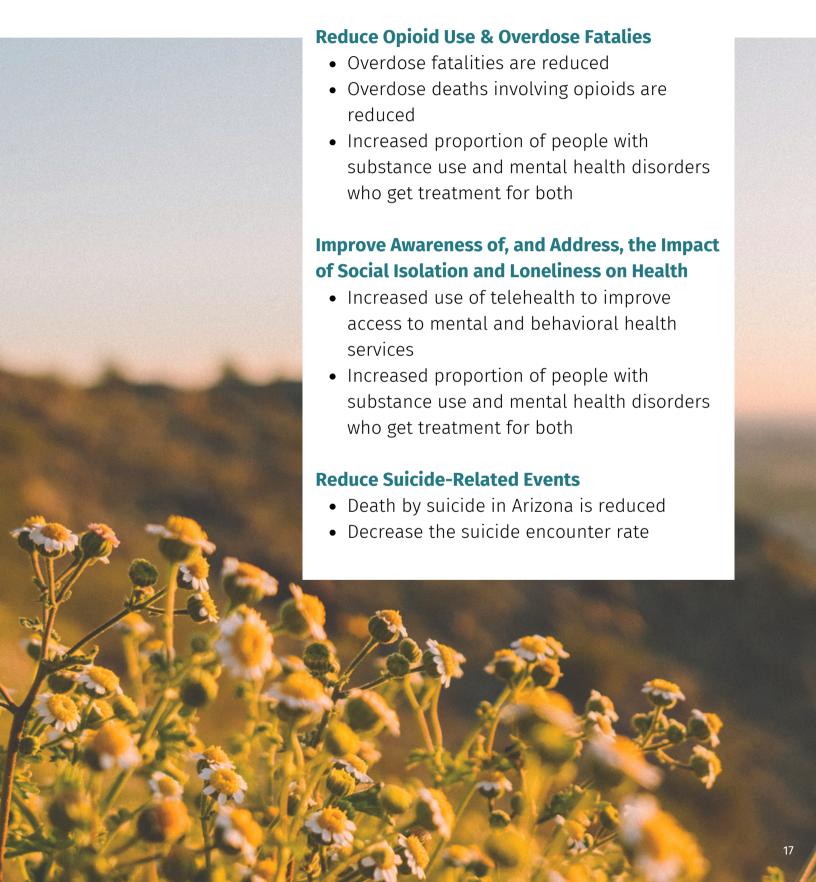


#### Increase nutrition assistance redemption rates

- Increase access and redemption of federal nutrition programs administered by ADE, DES, and ADHS. (SNAC)
- Increase Senior FMNP and WIC FMNP utilization at approved farmers markets. (ADHS, AZ Health Zone, Pinnacle Prevention, DES)

### **Mental Well-Being**

### **STRATEGIES & INDICATORS**



### **Reduce Opioid Use & Overdose Fatalities**

Continue coordination across state and local agencies on prevention, access to treatment, and harm reduction strategies.



Facilitate Statewide Clinical Opioid Work Group to bring clinical stakeholders together for strategic action (i.e., increasing naloxone distribution in EDs). (ADHS)



Strengthen linkages to care by adding peer support to OAR Line services. (ADHS, AHCCCS)

### Implement harm reduction strategies.



Distribute naloxone across the state to priority agencies (county health departments, law enforcement, community coalitions, etc.).



Address stigma around use of harm reduction strategies via media campaigns, increased distribution of fentanyl test strips, and targeted use of drug-testing equipment. (ADHS, AHCCCS)



Work with Arizona emergency medical services (EMS) agencies to enhance access for at-risk populations to opioid-reversing agents (e.g., naloxone) and treatment referral opportunities through EMS agencies distributing Naloxone Leave Behind kits containing a nasal spray naloxone dose kit, substance use treatment referral resource contact information, and other information.

### Improve Awareness of, and Address, the Impact of Social Isolation and Loneliness on Health

Continue awareness of social isolation and loneliness, and its impact on health.



Continue to promote the Start a Conversation public awareness campaign. (ADHS)



House ASU's Solving Loneliness: A Mindfulness-Based Toolkit on ADHS website and promote its availability. (ADHS, ASU)

# Make widely available resources and strategies people can take to address loneliness.



Promote resources and strategies accessible to persons identifying as lonely or experiencing social isolation and normalizes loneliness. (ADHS, ADVS, ASU, Duet, Televeda)

- Create and communicate an ADHS webpage with links to various resources which support individuals who are feeling isolated or lonely with sensitivity to how people want to access information.
  - 0 988
  - Closed loop referral system (i.e. CommunityCares)
  - ASU's Center for Mindfulness, Compassion and Resiliency Solving Loneliness: A Mindfulness-Based Toolkit



Promote awareness and resources of social isolation issues among key stakeholders. (ADHS, ADVS, ASU, Blue Cross Blue Shield of Arizona, Duet, Televeda, Arizona ACEs Consortium)

- Share AzHIP partner projects with other AzHIP stakeholders and outside groups.
- Encourage implementation team members to share AzHIP partner projects.

## Improve Awareness of, and Address, the Impact of Social Isolation and Loneliness on Health

Create increased sense of community and belonging throughout Arizona in more vulnerable populations.



Create a mental health community of practice to share information and address disconnects. (Arizona ACEs Consortium, ADHS, ASU, MCDPH, YMCA)

• Leverage trauma informed data.



Continue to support community-based projects that provide telehealth opportunities for select rural/underserved populations to acquire a sense of community and belonging. (ADVS, Televeda, Duet, ASU)



Enhance Resilience in Arizona Communities with more vulnerable populations. (Arizona ACEs Consortium, ADHS, ASU, MCDPH, YMCA)

- Expand approaches to improving mental health and addressing trauma.
  - Expanding approaches, such as strengthening the state's response to Adverse Childhood Experiences (ACEs) and creating mental well-being and resilience COPs.
  - Expanding mental health first aid, enhancing school staff training, reducing mental health stigma, and engaging community stakeholders through community coalitions.
  - Continue to train professionals and Community Health Workers who work directly with community members to increase health literacy regarding mental health and resilience.

## Improve Awareness of, and Address, the Impact of Social Isolation and Loneliness on Health

# Create increased sense of community and belonging throughout Arizona in more vulnerable populations.

- Identify meaningful ways for people to take an active role in their health (including seeking resources) and contribute to the health of their communities
  - Promote and provide CPR/First Aid training, including naloxone training, especially in rural areas.
  - Capitalize on existing community events for community education and engagement.
  - Provide education on best practices for wellness and resiliencyon bio/psycho/spiritual wellness.
  - Strengthen cross-sector collaborations; look at collective impact model; and have a central organization to facilitate collaboration at state and local levels.
    - Develop a Network Map of resources and community partnerships.

#### **Reduce Suicide-Related Events**

# Increase number of public facing/front-line staff who receive an approved evidence-based suicide prevention training



Encourage organizations (employers/corporations, partners, providers, agencies, etc.) and front-line/public facing staff to receive training in a manner that ensures cultural humility and health equity are a priority

- Advertise and promote Mitch Warnock Act-approved gatekeeper training. (ADHS)
- Encourage state agencies to follow the Zero Suicide model and implement virtual practices. (ADHS, EDC)
  - o Promote the use of the State Suicide Prevention Plan.

Increase access to mental health management resources, with a particular focus on remote options (telehealth therapy/ psychiatry/ addiction support appointments, virtual support groups, mental health first aid, etc.)



### Ongoing surveillance of suicidal behaviors, risks, and protective factors

- Continue to support state and local suicide mortality review teams to review all suicide deaths in Arizona and identify recommendations for prevention. (ADHS, County Health Departments)
- Develop recommendations for feasibility of a statewide program for Arizonans to receive navigation to suicide prevention resources. (ADHS)
- Create 'pathways to service' toolkit to all populations and distribute in an equitable manner. (ADHS)

#### **Reduce Suicide-Related Events**

# Increase awareness and utilization of population-based mental health and wellness resources/outreach where they exist and develop strategies to close the gap

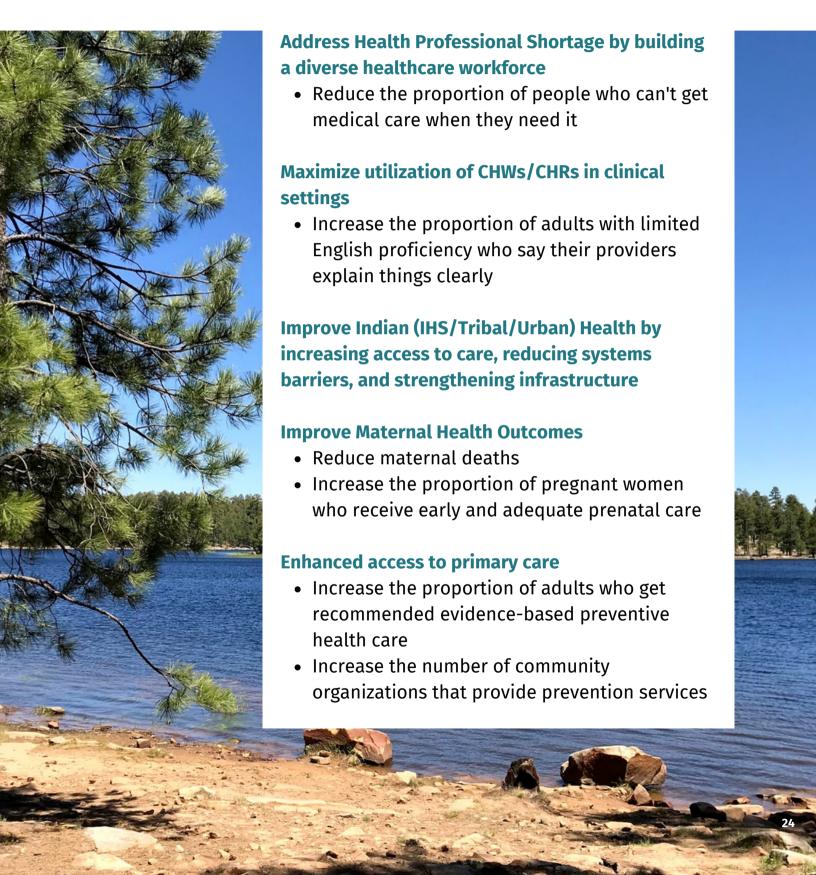


Communicate to the public at large (inclusive of higher risk populations) in a manner that ensures cultural humility and health equity are a priority.

- Continue social media campaign highlighting suicide prevention resources. (ADHS)
- Continue stigma reduction campaign to promote help seeking behavior to include youth awareness. (ADHS)
- Continue to develop and leverage relationships to further suicide prevention efforts with Tribal, veteran, and rural stakeholders. (ADHS)
- Continue to develop and leverage relationships with priority professions to promote suicide prevention. (ADHS)
- Promote the Healthy Arizona Worksite Program (HAWP), assist employers to encourage their employees to take advantage of available mental health resources. (ADHS)

### **Rural & Urban Underserved**





# Address Health Professional Shortage by building a diverse healthcare workforce



Develop strategies to reduce financial and other barriers for underserved students in health professions/providers education programs (Arizona Area Health Education Centers (AzAHEC), Community Colleges, College/Universities, High Schools, others such as EMT/Paramedic Training Programs)

- Inventory, analyze, and perform gap analysis of existing strategies.
- Establish partnerships between academic institutions to develop pathway programs for underserved students. Consider scholarships, tuition remission, training in high needs communities, additional support to build capacity for Limited English Proficiency (LEP).
- Provide rural students support, beyond financial (e.g., childcare/eldercare, transportation, tutoring/educational support, formal/informal mentoring, test preparation, connectivity/equipment).
- Identify and share best practice models for replication (e.g., Pharmacy Tech Program - Tuba City Regional Health Care Corporation, Public Health Certificate Program - Dine College, Western Arizona AHEC MA program, North Country HealthCare Residency Program).
- Develop communications to inform students in underserved areas about scholarships, financial aid, mentorships, etc.



### Build/grow healthcare workforce which is representative of the communities served (AzAHEC)

 Convene and partner with academic institutions to develop professional pathways for entry level health professionals to advance their careers. (e.g., certified nursing assistant (CNA) to licensed practical nurse (LPN) to registered nurse (RN), Community Health Worker/Representative (community health worker (CHW)/community health representative (CHR)) to allied health professions, paramedics/EMTs)



- Explore paid training opportunities, including Federally funded workforce opportunities, apprenticeships, and internships for students and explore incentives for staff and site serving as preceptors, mentors or trainers.
- Identify target audiences and partner with organizations to deliver trainings, include specialized training (e.g. sexual assault nurse examiners) in rural and tribal communities.
- Build opportunities and career fairs that focus and prioritize diverse student bodies about becoming a provider and serving in rural areas in Arizona including methods to assist these students with job placement.
- Expand use of traditional healers, CHW/CHRs, direct care workers and others that reach underserved communities and reflect the diversity of the communities in which they serve
- Upskill the health workforce by offering "non-degree" continuing education and certifications for various members of the health workforce.
- Support the professional fulfillment of clinicians in primary care.
   Continue support for economic survival of the existing network of primary care practitioners to strengthen primary care throughout Arizona.



### Quantify healthcare professional shortages in rural & urban underserved areas (Center for Rural Health)

- Align issues and access to retention of healthcare professionals.
- Use data to identify tactics to address recruitment and retention of healthcare professionals.
- Collect data on alternative care medical providers to understand usage.

# Address Health Professional Shortage by building a diverse healthcare workforce



Develop a curriculum to address local community priorities/concerns (University of Arizona, NAU, Grand Canyon University, ASU, post-high school)

- Identify specific communities in greatest need and determine the respective needs of each.
- Provide specific and detailed messaging to groups (demographic, community, etc.).
- Develop a community informed curriculum which meets identified needs of the community leverage existing collateral where possible.
- Align efforts with CHW certification requirements.



### Implement curriculum with consideration of Tribal communities needs and cultural understanding (Center for Rural Health)

- Work with tribal and community colleges to further establish health career curriculums which consider specific needs and cultural understanding of tribal communities.
- Create a level of awareness of where shortages exist and develop training opportunities to address shortages.
- Convene and develop processes/mechanisms for communication of opportunities between the education community and healthcare providers community.

# Maximize utilization of CHWs/CHRs in clinical settings



Integrate community-based CHWs into primary care/ medical practices to expand access to care and address social determinants of health (SDOH) (AzCHOW, University of Arizona PRC, Indian Health Service (IHS)-Chinle)

- Educate healthcare teams and provide supervisor support on the role and benefits of the CHW workforce, including benefits of voluntary certification, core competencies and reimbursement opportunities.
- Engage clinical teams through organizational assessments to assess clinical roles and identify best practices and opportunities for CHW involvement within the clinical setting. (particularly as trusted messengers for vaccines promotion)
- Assess current CHW knowledge, skills, and abilities to participate in the patient plan of care to determine training needs.
- Identify external training, internships/apprenticeships, and other educational opportunities.
- Create a resource which brings together multiple sources which will help individuals navigate the systems and processes associated with vocational training programs.
- Assess opportunities in technical institutes/schools and drive awareness with individuals to grow the pipeline of healthcare professionals.
- Evaluate levels of access which are required and develop a proposal which would enable CHW/R to have access to Electronic Health Records (care plans) as appropriate.

# Maximize utilization of CHWs/CHRs in clinical settings



# Identify and inventory resources to support/attract funders of CHWs/CHRs at various levels (federal, state, private, etc.) (AzCHOW, ADHS)

- Identify, inventory, and promote resources to support/attract funders at various levels (federal, state, private, etc.) (AzCHOW, University of Arizona PRC, ADHS)
- Identify and advocate for financial aid opportunities through scholarships and reimbursement.
- Recommend strategies and policy changes which provide financial aid and other funding opportunities to support CHW training and integration.



#### **Explore reimbursement strategies for CHWs (AzCHOW, ADHS)**

- Assess current reimbursement strategies (Medicaid and value-based) to identify and document barriers and successes in reimbursing for services provided by CHWs.
- Share findings with clinics and other payers to education on the advantages of the CHW workforce and how to best implement reimbursement strategies.

# Improve Indian (IHS/Tribal/Urban) Health by increasing access to care, reducing systems barriers, and strengthening infrastructure



Establish a joint effort between ADHS/Arizona Advisory Council on Indian Health Care (AACIHC)/DES/AHCCCS/First Things First to identify initiatives which addresses and improves Tribal needs (access to care, reducing systems barriers, and strengthening infrastructure) (ADHS, AHCCCS)

- Establish MOU between ADHS, AACIHC, DES, AHCCCS, First Things First (FTF) which target tribal needs.
- Identify resources which support policy, system, and environmental change.
- Identify (quarterly/annual) reporting on Native American health which would highlight in reports back to the tribes.
- Coordinate with state programs and resource and financial investments in American Indian/American Native health by providing training on funding opportunities, contracts from the state.
- Engage in and contribute to cross-cultural training for new state agency workers.



## Inform state and Tribal leaders of AzHIP goals specific to ITU and identify commitments and resources to achieve them (AACIHC, ADHS)

- Implement a state/local health department governance classification system, important statutory considerations, and how tribes can successfully work with state and local health departments.
- Assemble all the Arizona State agency tribal liaisons focused in health and partner organizations for cross collaboration addressing social determinants of health.
- Develop and communicate webinars on how tribes have increased access to care, highlighting best practices at the tribal level; develop case studies to be shared with other tribes.

# Improve Indian (IHS/Tribal/Urban) Health by increasing access to care, reducing systems barriers, and strengthening infrastructure



Initiate data mining/reporting initiatives which will help identify and prioritize issues (Inter Tribal Council of Arizona (ITCA) Navajo Epi Center, ADHS, AHCCCS)

- Create a data collection task force which is aligned with Tribal priorities.
- Develop and deliver training on available data, accessing it, and utilizing the data/tools.
- Develop best practices on data sharing agreements, how to negotiate, or how to share data.
- Build training partnerships (along with a toolkit) to support tribes gathering information at the local level in partnership with ITCA and Navajo Nation.

## Improve Maternal Health Outcomes



Increase awareness of urgent maternal warning signs for pregnant and postpartum individuals, their partners, support systems, and health professionals (home visitors, breastfeeding consultants, physicians, nurses, mental health providers, etc) that are culturally appropriate and reflect the needs of communities at the highest risk. (ADHS, March of Dimes, County Health Departments, First Things First (FTF))

- Educate pregnant and postpartum individuals, support systems, and health professionals (home visitors, breastfeeding consultants, physicians, nurses, mental health providers, etc) on urgent maternal warning signs that are culturally appropriate and reflect the needs of communities at the highest risk.
- Incorporate the role of fathers/partners in campaigns to drive awareness and understanding (of partners) in their role in the 4th trimester/postpartum care keeping in mind cultural norms and health literacy of the target populations.
- Develop and implement campaigns focused on mental health and substance use awareness, stigma reduction, and culturally sensitive.



### Improve the access to care for pregnant and postpartum women in Arizona (AHCCCS, AACHC, ADHS, Arizona Family Health Partnership, IHS)

- Adopt maternity care incentive plans or family levels of care models to optimize maternal health care during and after pregnancy to reduce maternal deaths
- Ensure women have covered access to the full range of reproductive resources, including inpatient postpartum LARC.
- Ensure women have access to oral health services during pregnancy by partnering with the Arizona Oral Health Coalition, FTF and county health departments to provide best practice messaging for pregnant women on accessing oral health care.



- Identify resources and agencies that provide one-on-one case management tailored to adolescent pregnant moms to assist them with the continuum of care.
- Increase knowledge and awareness of the expanded AHCCCS coverage for women one year postpartum (mental health screenings, continuum of care for mother and child) and reducing overall barriers to enrolling, to increase the proportion of pregnant women who receive early and adequate prenatal care.
- Identify opportunities to expand and diversify the maternal health workforce, including midwifery, doulas, CHWs, and certified peer specialists through recruitment and incentive programs such as loan repayment.



# Support workforce and workforce capacity that serve pregnant and postpartum women in Arizona (ADHS, AzHHA, AACHC, APT, ITCA, Navajo Nation)

- Support healthcare facilities in adopting health equity frameworks to include racial equity training, equitable hiring practices, strategies to address SDOH in patients, and equitable physical environments.
- Enhance statewide workforce development opportunities to advance primary care, emergency care, and rural provider skills and awareness of conditions across perinatal periods, including education on conditions needing immediate stabilization for ED providers and procedures for perinatal transport.
- Identify resources and agencies that provide one-on-one case management tailored to adolescent pregnant moms to assist them with the continuum of care.



- Increase knowledge and awareness of the expanded AHCCCS coverage for women one year postpartum (mental health screenings, continuum of care for mother and child) and reducing overall barriers to enrolling, to increase the proportion of pregnant women who receive early and adequate prenatal care.
- Identify opportunities to expand and diversify the maternal health workforce, including midwifery, doulas, CHWs, and certified peer specialists through recruitment and incentive programs such as loan repayment.



#### Improve surveillance of maternal mortalities and morbidities (TBD)

 Encourage healthcare providers of all types to leverage Health Current as a statewide, universal medical record and prescription drug monitoring/medication reconciliation program.



### Support the systems of care that serve pregnant and postpartum women in Arizona (AHCCCS, DES, ADHS)

- Ensure patients who are uninsured or underinsured have access to affordable and appropriate services or supplies, including supplies to manage their conditions (e.g., glucose monitors, insulin), access to dental services, healthy food (particularly to support appropriate weight gain during pregnancy), housing assistance programs, mental health or substance use services, and childcare services.
- Expand models of funded perinatal peer support and group prenatal care programs to support women with perinatal mood disorders, substance use disorders, experiences of Domestic Violence or Intimate Partner Violence, or loss of a child, ensuring that these programs are culturally appropriate and trauma informed.
- Explore opportunities to leverage pediatricians to educate/ influence/assess mother's health needs and encourage follow-up appointments (women-postpartum).



- Establish more systematic referral and follow-up services to support women and families experiencing mental health conditions, substance use, domestic violence, or other SDOH needs.
- Explore chronic disease management models for pregnant and postpartum women.
- Implement safety bundles from the Alliance on Innovation for Maternal Health (AIM) to all birthing facilities in Arizona.
- Partner with AACHC to expand and inform the Federally Qualified Health Center (FQHC) provider network on Alliance for Innovation in Maternal Health safety bundle strategies.
- Strengthen relationship with Tribal healthcare/birthing facilities to improve maternal safety and outcomes by focusing on the wellbeing of mothers and children both during pregnancy and after birth also improving access to culturally appropriate treatment.
- Disseminate and explain Maternal Mortality (MM) and Severe Maternal Morbidity (SMM) findings to families, providers, communities, and systems to elevate areas of opportunity to improve maternal health outcomes, particularly as they relate to mental health, substance use, and domestic violence.





Expand the school nurse and school health workforce. Every Arizona student has access to a registered school nurse while at school. (Arizona Department of Education, Arizona Health Care Cost Containment System)

- Identify long-term sustainable funding solutions to supporting a registered school nurse for every student attending public school in Arizona.
- Work with AHCCCS and ADE to streamline and assure the health funding mechanisms in place to support billing in schools, for example, cover primary care services.
- Activate collaborations between LHDs, County Superintendent of Schools, and/or LEA's to support school nursing.
- Promote partnerships with CHC's and FQHC's to support school nurses;
- Implement a robust data collection system that provides health outcome data for school-age children in Arizona, including school health office staff and the level of certification
- Implement funded policy to support every school district hiring a "lead" nurse to support student health and safety
- Expand the use of behavioral health services and increase the number of school behavioral health counselors on school campus and use of federal funding for the Individual Education Plan. (for example of transportation needs)

### **Enhanced access to primary care**



Expand and enhance access to telehealth in rural and underserved areas – Augment tribal ability to provide care via telehealth (Arizona Telemedicine Program, University of Arizona)

- Gather assessments of broadband, internet, telehealth infrastructure for rural Arizona and particularly impact on Tribes.
- Work with vulnerable communities to increase connectivity, access, and literacy for those who do not have it to increase the proportion of adults with limited English proficiency who say their providers explain things clearly.
- Add software tools to gather data, visuals, and sound to easily measure vitals
- Maximize, promote, and connect through use of partnership with the Arizona Telemedicine Program.
- Support and explore (identify) telemedicine resources to cover equipment costs (telemedicine start-up costs, equipment purchases, remote access monitoring systems, and staff training)
- Provide targeted technical assistance to Tribes on telehealth/ telemedicine reimbursement, coding, documentation, etc.
- Support (identify) long-term resources and collaborations to build broadband infrastructure in areas with no or less than ideal internet connections. (e.g. ADOA/911 program)
- Promote and expand the awareness of the ECHO programs to healthcare practitioners in rural and tribal communities.

# Enhanced access to primary care



#### Increase access to health insurance coverage

- Support the increased use of CHW/CHRs, Community Health navigators and eligibility workers to enroll/re-enroll members to AHCCCS and gain more knowledge about their benefits to reduce the proportion of people who can't get medical care when they need it.
- Target education and outreach campaigns regarding health insurance coverage to rural & urban underserved communities and special populations to increase the proportion of adults who get recommended evidence-based preventive health care.
- Expand access to preventive health care services beyond clinical care (such as yoga, physical exercise, food, and nutrition, mediation, self-care, etc) to increase the number of community organizations that provide prevention services

### **Appendix** Implementation Partners

Arizona Developmental Disabilities Planning Council

Arizona Family Health Partnership

Arizona ACEs Consortium Arizona Health Care Cost Containment System

Arizona Advisory Council on Indian Health Care Arizona Hospital and Healthcare Association

Arizona Area Health Education Centers Arizona Housing Coalition

Arizona Alliance for Community Health Centers Arizona Housing, Inc.

Arizona Association of Area Agencies on Aging Arizona Local Health Officers Association

Arizona Association of Health Plans Arizona Medical Association

Arizona Community Health Worker Association Arizona Public Health Association

Arizona Council of Human Service Providers Arizona State Parks & Trails

Arizona Department of Economic Security Arizona State University

Arizona Department of Education Arizona Statewide Independent Living Council

Arizona Department of Health Services Arizona Telemedicine Program

Arizona Department of Housing ASU Center for Mindfulness, Compassion

and Resilience

Arizona Department of Transportation AZ Aging

Arizona Department of Veterans' Services Arizona Food Bank Network

Blue Cross Blue Shield of Arizona	Health Services Advisory Group
Care 1st AZ	Home Matters to Arizona
Chicanos Por La Causa	HonorHealth
City of Tempe	Indian Health Service
Contexture	Inter Tribal Council of Arizona
Corporation for Supportive Housing	Inter Tribal Council of Arizona Epidemiology Center
Dignity Health, St. Joseph's Hospital and Medical Center	LISC Phoenix   Local Initiatives Support Corporation
Diverse Ability Incorporated	March of Dimes
Dominium Housing	Maricopa Association of Governments
Duet: Partners In Health & Aging	Maricopa County Department of Public Health
Equality Health Foundation	Mayo Clinic Office for Community Affairs
Esperança	Mercy Care
First Things First	Native Health
Graham County	Navajo County Public Health Services
Grand Canyon University	Navajo Nation
Health First Foundation	Navajo Nation - Navajo Epidemiology Center
Health Management Associates	Navajo Nation Department of Health

Northern Arizona University Center for Health Equity Research	University of Arizona Center for Rural Health
Office of the Governor	University of Arizona Prevention Research Center
Peer Solutions	Valley Leadership
Phoenix Area Indian Health Services	Valley of the Sun United Way
Phoenix Children's Hospital	Valley of the Sun YMCA
Pima County Health Department	Vitalyst Health Foundation
Pinal County	Wildfire: Igniting Community Action to End Poverty in Arizona
Pinnacle Prevention	Yavapai County Community Health Services
S.T.A.R Stand Together and Recover Centers, Inc.	Yuma County Department of Health
School Nurses Organization of Arizona	
Solari	
Southwest Behavioral & Health Services	
Televeda	
Unite Us	
United Health Group	
UnitedHealthcare Community Plan	
University of Arizona	



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