**COMMITTEE INFORMATION**

**Co-Chairs:** Jonathan Gauerke ([jonathan.gauerke@carle.com](mailto:jonathan.gauerke@carle.com)) and Dawn Lochbaum ([DMLochbaum@osfhealthcare.org](mailto:DMLochbaum@osfhealthcare.org))

**Support Person:** Amy Roberts ([aroberts@peoriacounty.org](file:///\\IHS.ORG\PIA\HULT\HULT\Youth%20Programs\Partnership%20for%20Healthy%20Community\aroberts@peoriacounty.org))

**Useful Resources:**

* Partnership for a Healthy Community Website: <https://healthyhoi.wildapricot.org/>
* Discussion Boards: <https://healthyhoi.wildapricot.org/discussions>

**AGENDA**

1. **Introductions**
2. **Mental Health 2023-2025**
   1. **Gap Analysis Review by Dr. Sara Kelly**
      1. Mental Health Disparities:
         1. Peoria respondents more often reported a mental health condition (p=0.01); Woodford County had the lowest reporting a mental health condition
         2. Residents in Peoria/West Peoria more often reported below average mental health compared to others in the county
         3. The South West Peoria, North West Peoria, and North East Peoria less often reported below average mental health (p=0.02)
         4. Younger individuals and those in the LGBTQ+ community more often reported worse mental health outcomes in the survey
   2. **2023-2025 Mental Health Interventions** 
      1. Culturally-Adapted Health Care:
         1. Objective: Enhance awareness and education to improve cultural competence related to mental health care in the tri-county region by December31, 2025.
            1. Outcome Objectives:

Behaviors: More than 50% of the individuals who attend the session will self-report improvement in behaviors after cultural competence training(s).

Attitudes: More than 70% of the individuals who attended the session will self-report improvement in attitudes after cultural competence training(s).

* + - 1. Brainstorming:
         1. What specific tasks or tangible next steps do we need to take?
         2. Who needs to be most targeted based on the gap analysis?
         3. Who else needs to be brought to the table?
         4. How do we measure the success of this intervention? Do we have baselines?
         5. What does success look like?
    1. Telemedicine
       1. Objective: Increase engagement by 10% in mental health telemedicine in the tri-county region by December 31, 2025.
          1. Output Objectives:

Disseminate Knowledge: Disseminate information through 10 promotional campaigns on how to access (mental health) telemedicine services throughout the Tri-County.

Development: Support the development of structured partnerships for community healthcare organizations to provide telemedicine in the tri-county region.

* + - * 1. Outcome Objectives:

Engagement: Increase patient engagement for mental health telemedicine by 10% in 2026.

Accessibility: Provide more than 100 residents access to mental health telemedicine appointments who are either medically underserved or live in rural areas.

Clinical Care: Reduce hospital readmissions by 30% among individuals who engage in mental health telemedicine services.

* + - 1. Brainstorming:
         1. What specific tasks or tangible next steps do we need to take?
         2. Who needs to be most targeted based on the gap analysis?
         3. Who else needs to be brought to the table?
         4. How do we measure the success of this intervention? Do we have baselines?
         5. What does success look like?
  1. **Last Cycle Action Teams** 
     1. MHFA
     2. Suicide Prevention
     3. TI Schools

1. **Next Meeting Date:**
   1. Next Meeting TBD
2. **Member Announcements:** Please feel free to share relevant information & announcements