

Washoe County, Nevada

2022-2025 COMMUNITY HEALTH IMPROVEMENT PLAN

# **2024 ANNUAL REPORT**

NORTHERN NEVADA

# **Public Health**

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Dear Members of the Washoe County Community,

On behalf of the District Board of Health, I would like to extend our heartfelt gratitude to each and every one of you for your active participation, engagement, and expertise in the development of the Community Health Improvement Plan (CHIP). Your contributions have been invaluable in shaping a plan that reflects the needs and aspirations of our community.

The CHIP is a comprehensive roadmap designed to identify and address the key health challenges facing our community. It is a living document, crafted with input from local health experts, community organizations, and, importantly, the voices of residents like you. Through this plan, we are not only tackling emerging public health threats such as chronic diseases, mental health, and access to care, but also addressing the underlying social determinants that impact our quality of life.

As we work toward achieving the goals outlined in the CHIP, we must remember that the collective strength of our community is our greatest asset. By collaborating across sectors, we can make lasting improvements in health outcomes, create a more resilient community, and ensure that every resident has the opportunity to live a long, healthy, and fulfilling life.

Thank you again for your dedication and commitment to this effort. We are excited about the path forward and the continued work we will do together to create a healthier, more vibrant community. Your ongoing involvement will be key to our community's success, and we look forward to working alongside you in the implementation of the Community Health Improvement Plan.

Sincerely,

Devon Reese Chair, District Board of Health



Dear Community Members,

The Community Health Improvement Plan (CHIP) plays a key role in improving the health of our residents, and its success has only been possible through the collective contributions, partnership, and dedication of individuals, organizations, and leaders across our community.

The CHIP is not just a strategic document; it is a call to action. It provides a framework for addressing some of the most pressing health issues our community faces today, with the goal of creating healthier outcomes for everyone. The success of CHIP depends on the collaboration of local stakeholders, healthcare providers, nonprofits, schools, businesses, and residents—working together to tackle these challenges head-on.

Among the key priorities in this plan are:

- Mental Health: We recognize the profound impact mental health has on overall well-being. We are committed to enhancing mental health resources, reducing stigma, and making sure that mental health services are accessible to everyone who needs them.
- Access to Healthcare: Ensuring all individuals in our community have access to care is fundamental to improving health outcomes. We are working to reduce barriers to care, particularly for underserved populations, and ensure that healthcare services are available.
- Preventative Health Behaviors: Prevention is one of the most effective ways to promote long-term health.
   Our efforts focus on encouraging healthier behaviors—such as improved nutrition, physical activity, and regular health screenings so that we can reduce preventable diseases and promote a healthier, more vibrant community.
- Social Determinants of Health: We are also focusing on factors—such as financial stability and access to nutritious food—because they significantly influence our overall health outcomes. We have prioritized efforts, ensuring that all individuals have the resources they need to live a healthy life.

Your support, collaboration, and hard work have been instrumental in helping us move toward these goals. Whether through shared resources, innovative programs, or simply offering your expertise, you have all played an essential role in improving the health and lives of others.

Thank you once again for your invaluable contribution to this initiative. Together, we are making a difference.

Sincerely,

Dr. Chad Kingsley
District Health Officer, Northern Nevada Public Health

#### Introduction

#### **Background**

Community Health Improvement (CHI) is a process used in public health to identify and address the health needs of communities. The 2022-2025 Washoe County Community Health Improvement Plan (CHIP) draws on health data and assessments to form an action-oriented blueprint for improving quality of life for those in Washoe County. The 22-25 CHIP is meant to be a living document, adjusting to new or changing information, resources, and community context.

Northern Nevada Public Health released the 2022-2025 CHIP to reflect a three-year cycle and a comprehensive commitment to addressing public health challenges. Based on the findings of a 2022-2025 Community Health Assessment (CHA), the CHIP outlines the community's top priorities and a collective action plan for how health will be improved. Through ongoing collaboration, shared accountability, and shared resources, partners work closely to coordinate efforts targeted at each health priority area to maximize impact in the county.

#### **Annual Monitoring and Revisions**

The implementation of the Community Health Improvement Plan (CHIP) is a shared responsibility among a diverse group of partners, including public health organizations, hospitals, non-profits, faith-based groups, schools, and individual community members. These partners collaborate through workgroups and CHIP Subcommittees.

At the end of the year, CHIP Subcommittees convened to assess the progress of CHIP initiatives, refine goals, objectives, and strategies, and prioritize investments for 2025. During these discussions, partners reviewed new resources, emerging data, new opportunities to expand collaborations, and the momentum of ongoing projects to ensure continued alignment of resources and to capitalize on the collective efforts of organizations working together to improve long-term health outcomes. The action plans reflect the status of programs in 2024, and the decisions made by partners during these collaborative meetings, outlining the next steps for advancing CHIP programs through continued partnership and collective action.

#### **How to Read This Report**

#### **Objectives & Strategies**

Objectives and strategies were selected based on several factors:

• Availability of data to track progress

- Availability of resources
- Community readiness
- Alignment with state and national priorities

The original activities and strategies can be found in the 2022-2025 CHIP document at <a href="www.nnph.org">www.nnph.org</a>, while updates to the objectives and strategies are incorporated throughout this annual report and in the annual update section.

#### **Goal Setting**

Population-based outcome indicators were used to establish goals and objectives, with adjustments made for continuous improvement over the three-year period.

#### **Activities**

Detailed activities for the CHIP initiatives within each priority area are outlined in the action plans found in each section.

#### **Evaluation**

The status of CHIP activities from January 1, 2024, to December 31, 2024, are summarized in the action plans, A color-coding system was used to indicate the completion status of each strategy. The percentage of completed tactics in each strategy was calculated, with the following color indicators:

70-100% of activities completed indicates substantial progress and that the
measurement has met or is on target to meet the objective.
<b>50-69% of activities completed</b> indicates ongoing activities or progress toward
the objective.
49%-0% percent of activities completed indicates that minimal to no progress
has been made toward the objective.
Activities assessed among CHIP initiative partners that are no longer applicable
in CHIP year 1 or in CHIP year 2 are noted.
NEW CHIP initiatives coming in 2025

**Brief:** Annual reports provide ongoing updates on key actions and population health indicators, tracking progress throughout the implementation phase. This annual report serves as a status update and review of accomplishments for the second year of implementation, 2024.

Year 1: January 2023 - December 2023

Year 2: January 2024- December 2024

Year 3: January 2025- December 2025













## Looking Ahead in 2025: Opportunities for Further Collaboration

At the conclusion of 2024, more than 360 partners gathered to explore potential collaboration opportunities and identify areas of need within the community. The following is a summary of the suggestions discussed by partners during the CHIP Subcommittee meetings. These suggestions will be reviewed in the upcoming year to assess capacity and explore opportunities for further engagement in improvement efforts.

#### **CHIP Focus Area 1: Social Determinants of Health**

- Promote financial literacy and enhance understanding of financial stability concepts within minority populations.
- Provide awareness campaigns to promote the availability and benefits of healthy foods and locations.
- Ensure culture competency is considered throughout health improvement programs.
- Reduce barriers in obtaining transportation to access daily and necessary living events.

#### **CHIP Focus Area 2: Mental Health**

- Improve muti-tiered systems of support to prevent youth crisis events.
- Improve the health care workforce pipeline.
- Improve the integration of mental health services in schools and other areas frequented by families and individuals.
- Expand loan repayment options.
- Extend telehealth requirements.

#### **CHIP Focus Area 3: Preventative Health Behaviors**

- Improved coordination among nutrition partners to support Washoe County School District's Wellness Policy.
- Increase awareness of locations that sell healthy produce in communities across Washoe County
- Improve awareness of preventative health services and their importance the among minority populations

#### CHIP Focus Area 4: Access to Health

- Primary care provider shortage.
- Limited hours of operation among hospitals and other care centers.
- Establishing prenatal care in the first trimester among minority populations.
- Addressing substance use among pregnant and postpartum individuals.
- Advance Community Health Worker models and paraprofessionals to deliver navigation and improved services in low-resource settings.
- Improve the diversity of the health care workforce to better reflect and meet the needs of Washoe County.
- Increase prevention efforts to mitigate late-stage conditions.

#### Focus Area 1- Social Determinants of Health Year 2 Results

	Increase equitable access to fresh, healt County.	hy food for communities in Washoe	
Goal(s) Increase knowledge of and access to financial literacy tools to improve financial well-being for communities in Washoe County.			
	Increase inclusive and equitable access to information when providing service to, or interacting with, Limited English Proficient (LEP) individuals.		
Driovitica	Food Insecurity Among Seniors	Financial Literacy	
Priorities	Language Access		

## **Priority Specific Objectives**

Serve an average of 650 seniors monthly through all Golden Grocery pantries in Washoe County, in CY 24.

By 2024, finalize a language access plan and begin to implement 1-2 strategies for Washoe County departments.

By the end of 2024, hold 6-8 financial literacy classes to increase awareness and utilization of financial literacy tools among diverse and underserved communities.



Focus Area: Language Accessibility

Goal: Increase inclusive and equitable access to information when providing services to, or interacting with, Limited English Proficient (LEP) individuals.

Initiative: Language Access Plan (LAP)

**Priority Population:** Individuals with limited English proficiency in Washoe County.

#### 22-25 CHA Priority Indicator:

1. Percent of population by language spoken, Washoe County, Nevada.

Table 5: Percent of population by language spoken, Washoe County, Nevada, United States, 2016-2020 aggregate data					
Region	Speak Only English	Speak Spanish	Speak Asian/Pacific	Speak Indo-European	Speak Other
Islander Lang Language Language					
Washoe County	76.6%	17.1%	3.6%	2.2%	.6%
Nevada	69.8%	20.9%	5.8%	2.4%	1.1%
United States	78.5%	13.2%	3.5%	3.7%	1.1%
Source: US Census, American Community Survey, Table \$16001.5-year estimates — Language Spoken at Home					

**2023 SMART Objective:** By December 2023, develop an LAP for Washoe County departments.

2024 SMART Objective: By 2024, finalize a language access plan and begin to implement 1-2 strategies for Washoe County departments.

**2025 SMART Objective:** By 2025, implement the next phase of LAP as outlined in the multi-year LAP.

Ac	tion Step	Timeline	Status	2023	2024	2025 Target
			of Activities	Deliverables	Deliverables	Deliverables
1.	WCHD representatives attend facilitated Washoe County meetings	Completed.	Target met in		1. The LAP	1. Implement the next
	to assist in the development of a LAP.		2024.	a Language	was	phases of the multi
2	WCID shares final report of Health Literacy and Language	Completed	Towart mat in	Access Plan	finalized.	year LAP to
2.	WCHD shares final report of Health Literacy and Language	Completed.	Target met in		One plan wa	
	Accessibility Gaps & Assets Analysis with Washoe County		2024.		developed.	around data
	Human Resources.					collection, training
3.	Create a language accessibility needs assessment.	Completed.	Target met in		2. 2 strategies	and
			2024.		within	testing/certification
4.	Gather data within Washoe County departments.	Completed.	Target met in		Washoe	processes for staff.
	• •	_	2024.		County's	
5.	Produce a draft of the Washoe County LAP for review among	Completed.	Target met in		LAP were	2. Create 1 system to
	County departments.	•	2024.		implemented	* *
6.	Conduct a community survey (including targeted outreach) to gather	Completed.	Target met in		The first	collection.
	input about the LAP.	•	2024.		initiative wa	S

7. Analyze Washoe County and community data regarding the LAP.	Completed.	Target met in	developing a	3. Implement at least
		2024.	process and	2 language access
1.			expectations	trainings for staff.
8. Present proposed LAP to Board of County Commissioners.	Completed.	Target met in	for document	
		2024.	translation.	4. Establish 1 process
9. Finalize Washoe County LAP and submit to the Office of New	Completed.	Target met in	The second	to test and certify
Americans.	1	2024.	initiative was	•
10. Implement 1-2 strategies within Washoe County's LAP	Completed.	Target met in	contracting	martiniguai staii.
8	r	2024.	with	
11 Invalous at data callesting mother to for longues access	TDD	NEW in 2024		
11. Implement data collection methods for language access.	TBD	NEW III 2024	Wordly.ai	
12. Implement language access training for staff.	TBD	NEW in 2024	and	
12. Implement language access training for start.	IBD	11E W III 2024	Language	
13. Implement testing and certification for multilingual staff.	TBD	NEW in 2024	Line to put in	
			place	
14. Continued implementation of language access services across the	TBD	NEW in 2024	interpretation	
organization.			resources and	
6			services.	
			services.	

**2024** Annual Update: In 2024, Washoe County Human Resources developed and implemented a language access plan. A few of the larger initiatives that have been completed since the adoption of the plan in April 2024, are the roll out of multiple language access services to all departments, translation of vital documents and signs and establishing a verified list of multilingual staff across the organization.

Lead Contact/Agency: Washoe County Human Resources

Supporting partners: Northern Nevada Public Health, Washoe County department heads/representatives, and community partners.

Resources to address the initiative: Established working relationships in the community and an organization language access budget to support training, testing/certification, translation and interpretation.

Focus Area: Social Determinants of Health

Goal: Increase knowledge of and access to financial literacy tools to improve overall financial well-being for communities in Washoe County.

**Initiative:** Un Plan Financiero para Abrir Puertas, a Financial Plan to Open Doors.

**Priority Population:** Spanish-speaking families and underserved populations that lack access to financial literacy tools.

#### 22-25 CHA Priority Indicator:

- 1. Percent of Households with a mortgage, spending 30% or more of monthly income on mortgage Washoe County, Nevada and United State, 2010-2019
- 2. Percent of Households spending 30% or more of income on rent Washoe County, NV and United States, 2010-2019

### 2023 SMART Objective: New in 2024

**2024 SMART Objective**: By the end of 2024, hold 6-8 financial literacy classes to increase awareness and utilization of financial literacy tools among diverse and underserved communities.

**2025 SMART Objective:** By the end of 2025, conduct 8-12 financial literacy classes to enhance awareness and use of financial literacy tools among diverse and underserved communities.

	the Gr	m	a	2024 5 11	2025 D 11
A	tion Step	Timeline	Status of Activities	2024 Deliverables	2025 Deliverables
			of Activities		
1.	Identify different financial literacy topics for classes	Jan 2024	Target Acheieved in 2024	1. 10 Financial Literacy Classes were completed	1.Conduct 8 to 12 financial literacy classes 2. Reach at least
2.	Recruit subject matter expert speakers for each class	March 2024	Target Acheieved in 2024		65-70 total participants
3.	Coordinate dates and times for financial literacy classes	July 2024	Target Acheieved in 2024		
4.	Identify high-need zip code areas to host classes with community partners interested in collaboration	July 2024	Target Acheieved in 2024		
5.	Have participants fill out a survey after each class on what they learned and any other topics of interest.	Dec 2024	Target Acheieved in 2024		

6.	Identify a variety of financial literacy topics for classes	Jan 2025	NEW in 2025	
7.	Recruit bilingual subject matter expert speakers for each class	March 2025	NEW in 2025	
8.	Develop and coordinate an outreach plan to recruit community members to the classes via social media, flier distribution, and partner email lists.	July 2025	NEW in 2025	
9.	Identify locations in high-need zip code areas to partner with community organizations interested in hosting a class.	July 2025	NEW in 2025	
10.	Have participants complete a survey after each class on the knowledge they gained and any other areas they are interested in learning	Dec 2025	NEW in 2025	

**2024 Annual Update:** In 2024, 10 financial literacy classes were conducted with 83 community members. According to the CHA, the locations and community-based partners chosen to host these events were selected based on locations with the highest needs for community resources. A hosting partner, The Women's and Children's Center of the Sierra worked with clients to identify specific financial literacy topics they wanted to learn about. Each class included subject matter experts who spoke Spanish fluently to effectively communicate with clients. Participants expressed gratitude for receiving information in their language, along with practical tools that could be implemented immediately on topics that were of value to them. Class topics included budgeting and saving 101, credit building and maintaining, banking 101, how to start college savings for children and 1st steps to buying a home. Some Demographic data: 46% Spanish Speaking participants, 30% English, 17% both Spanish/English, 2% Korean, and 5% Arabic.

Lead Contact/Agency: Hello Real Estate Company

**Supporting partners**: Northern Nevada Public Health and a variety of bilingual Spanish subject experts who provide financial literacy tools within community-based organizations

**Resources to address the initiative**: NNPH staff time, outreach, and outreach materials for recruitment. Community funds were provided as incentives for participating families.

Focus Area: Social Determinants of Health

Goal: Increase equitable access to fresh, healthy food for communities in Washoe County

**Initiative:** Golden Groceries

**Priority Population:** Food Insecure Seniors (60+) residing in Washoe County

#### 22-25 CHA Priority Indicator:

- 1. Senior Food Insecurity Rate for Nevada is 10.8%, (based on Feeding America's State of Senior Hunger in 2020 -most current data)
- 2. Number of seniors enrolled in SNAP 8,000 seniors in Washoe County are enrolled in SNAP (60 years of age or older)
- 3. Decrease the number of Seniors who report skipping meals. Nationwide, 1 in 5 seniors report that they have to skip meals.
- 4. Percent of adults 65 years or older that had at least 1 serving of vegetables per day -82.1% (2019)

2023 SMART Objective: In FY23, provide new Client Choice Golden Grocery food pantry to 150 seniors weekly

**2023 SMART Objective:** In FY23, serve an average of 500 seniors monthly through all Golden Groceries pantries in Washoe County

**2024 SMART Objective:** In Calendar year 2024, reduce the number of meals skipped by 10%

2024 SMART Objective: In Calendar Year 2024, serve an average of 650 seniors monthly through all Golden Grocery pantries in Washoe County

Action Step	Timeline	Status of Activities	2023 Deliverables	2024 Deliverables	2025 Deliverable
Educate populations about senior hunger and senior foo programs.	dApril 2024 – ongoing	In Progress	1. Target not met due to unable to conduct survey.	will report consuming	This project concluded in the CHIP at the end of 2024.
<ol><li>Promote access to existing Golden Grocery Client Choic pantries in Washoe County.</li></ol>	eApril 2024 - ongoing	In Progress	Seniors will report	and vegetables, by	
3. Enroll eligible participants into the SNAP program	April 2024- ongoing	In Progress	consuming more fruits and	visiting Golden Grocery	
<ol> <li>Incorporate 5210 Healthy Washoe messaging into Golde Grocery environments.</li> </ol>	nJuly 2024	Not Started	vegetables.  2. 190 Seniors reported	pantries Deliverable: 682 Seniors served	
<ol> <li>Open a stand along Golden Grocery Client Choice Pantry for seniors in Washoe County</li> </ol>	rSept- Dec. 2023	In Progress	skipping fewer meals due to increased access to food, with the	monthly  2. Through access to Golden	

6. (	Create and distribute a healthy eating survey to all Golden	March- 2024	In Progress	opening of the	Groceries, we
(	Grocery pantries in March and April, 2024 to gather baseline			new Golden	will see a 10%
d	lata and then again in September and October 2024 to			Grocery site at	reduction in
d	letermine behavior changes.			Reno Housing	seniors
				Authority	reporting that
					they missed or
					skipped
					meals.
				-	Deliverable:
					See report
					below.

**2024 Annual Update:** In 2024, FBNN increased Golden Grocery sites from 8 to 11, which in turn almost doubled the number of seniors helped. The increase in numbers shows us that fewer Seniors are skipping meals since they are able to access the pantry during specific times and or days, receive more one-on-one help from the pantry staff and have less stress than they may have during the busy normal hours. There are still seniors that access pantries during all hours for the community, and these are calculated into the total numbers served monthly. Anecdotally, these numbers highlight that seniors are able to access food to ensure they avoid skipping meals.

Lead Contact/Agency: Food Bank of Northern Nevada

**Supporting partners**: Northern Nevada Public Health, Reno Housing Authority, Age Friendly and Senior Coalitions of Washoe County, Reno, and Sparks.

Resources to address the initiative: Safe, affordable, and accessible locations, food purchase funding, volunteers, equipment, marketing and outreach support, labor

# Focus Area 2 Mental Health Year 2 Results

	Decrease the number of suicide attempts and deaths by suicide in Washoe County.
Cool(a)	Divert individuals experiencing a behavioral health crisis from emergency rooms and detention facilities into an appropriate and effective system of care.
Goal(s)	Improve access to care through an appropriate child/family-oriented behavioral health system for youth experiencing a behavioral health crisis and/or behavioral health diagnoses.
	Improve public health and public safety outcomes for justice involved individuals with mental health and substance use disorders

Priorities	Intentional Injury	Firearm-related suicide
Friorities	Adult Mental Health	Youth Mental Health

# **Priority Specific Objectives**

By December 30, 2024, create and promote suicide prevention resources through social media platforms.	By December 30, 2024, implement 1-2 strategies from the Lethal Means Coalition workplan.
By January 31, 2025, complete implementation of remaining ZS action steps in the Northern Nevada Public Health clinic and support of expansion to external agencies identified.	By December 2024, reach at least 70 Spanish speaking participants by facilitating 5 Aca Entre Nos mental health sessions in schools
By December 31, 2024, build out all three elements of a best practice behavioral health crisis continuum of care system in Washoe County with affinity to the "Roadmap to the Ideal Crisis System" published by the National Council for Behavioral Health	By December 31, 2025, achieve goals identified in the Washoe County Crisis Response System Implementation Plan to build out a best practice youth behavioral health crisis continuum of care for youth in Washoe County with affinity to the "National Guidelines for Child and Youth Behavioral Health Crisis Care" distributed by SAMHSA.
By August 30 <sup>th</sup> , 2024, youth will have identified 1 focus area and assessed policies affecting mental health within the focus area.	By August 30, 2024, up to 12 Black youth leaders will be trained in mental health policy and advocacy efforts by the Larson Institute.
By December 31, 2024, make progress toward a best practice behavioral health response for justice involved individuals informed by the "Sequential Intercept Model" endorsed by SAMHSA's Gains Center.	By December 2025, host three retreats with workshops relating to mental, physical, emotional, and spiritual wellness for 24 Native American youth ages 12-18.

Goal: Improve public health and public safety outcomes for justice involved individuals with mental health and substance use disorders.

Initiative: Washoe County Sequential Intercept Model

**Priority Population:** Justice involved individuals with mental health and substance use disorders

#### 22-25 CHA Priority Indicator:

1. Percentage of adults reporting mental health "not good" for 14+ days in Washoe County – 14.7% (2020)

2. Intentional injury (suicide) mortality rate per 100,000 – 20.1 (2020)

#### 2023 SMART Objective: New CHIP Initiative in 2024.

**2024 SMART Objective:** By December 31, 2024, make progress toward a best practice behavioral health response for justice involved individuals informed by the "Sequential Intercept Model" endorsed by SAMHSA's Gains Center.

**2025 SMART Objective:** By December 31, 2025 implement at least two system improvements designed to divert and/or deflect individuals with behavioral health challenges from the justice system, informed by the "Sequential Intercept Model" endorsed by SAMHSA's Gains Center.

Ac	tion Step	Timeline		2024 Deliverables		5 Target iverables
1.	Collect and share existing data to inform how people with mental health and substance use disorders flow through the criminal justice system.	Jan 2024		attendees -Deliverable: Approximately 150 community members attended the summit.	2.	Complete a SIM Mapping Brief  Complete a behavioral health resources assets and gaps exercise.
2.	Convene stakeholders at a community summit to share information and advance understanding of gaps, resources, and opportunities at each intercept. Publish a report of proceedings and share information from the summit with community members and key stakeholders.	March 2024		complete - Deliverable: A data summary was completed		
3.	Identify an organizational structure, resources, and scope of work to continue Washoe County's collective efforts to improve public health and public safety outcomes for justice involved individuals.	May 2024	Target Acheieved in 2024	and published.		

4.	Develop a Strategic Framework and Action Plans to meet the needs of criminal justice involved individuals with mental health needs.	Dec 2024	In Progress	3. Report of proceeding complete - Deliverable: A
5.	Identify and initiate a minimum of three initiatives.	Dec 2024	In Progress	report of the proceedings was completed.
6.	Complete a SIM Mapping Brief to identify current efforts in Washoe County that align with the SIM model and identify gaps which could point to opportunities for improvement.	Dec 2025	NEW in 2025	4. Organizational structure and resources to move forward identified Deliverable:
7.	Complete a SIM Mapping Brief to identify current efforts in Washoe County that align with the SIM model and identify gaps which could point to opportunities for improvement.	Dec 2025	NEW in 2025	Washoe County hired a Behavioral Health Administrator and committed resources to an additional contract with SEI.  5. Strategic framework and action plans completed. Measurable outcomes identified Deliverable: A draft Strategic Framework is completed but needs input from

additional key
stakeholders to be
complete. Shift to
2025
6. Initiatives
identified.
- Deliverable:
Two initiatives
have been
identified with
more work to be
done in 2025 to
identify
additional
initiatives. Shift
to 2025.
10 2023.

**2024 Annual Update:** Significant progress has been made to advance SIM efforts. A successful summit was held in January of 2024 which included a data summary and the preliminary identification of assets and gaps. A core team was established, and resources were identified to contract with SEI for continued project support. A draft SIM Mapping Brief and draft Strategic Framework were produced and were vetted at a County SIM leadership retreat in Oct. 2024. Work continues to gain input from other key stakeholders to finalize the Mapping Brief and Strategic Framework in early 2025. Two initiatives focused on improved data collection and completing a behavioral health assets and gaps exercise have kicked off and will gain momentum in early 2025. A second community convening is tentatively scheduled for April 2025.

Lead Contact/Agency: Washoe County Manager's Office, Second Judicial District Court.

**Supporting partners**: Human Services Agency, Northern Nevada Public Health, law enforcement, detention, parole and probation, public defenders, district attorney's office, behavioral health providers, hospitals, state agencies and others

Resources to address the initiative: Washoe County, City of Reno, City of Sparks and Washoe County Health District provided funding to engage Social Entrepreneurs, Inc. to serve as facilitators and project managers as well as core staff to support the initiative the Summit. Washoe County identified additional resources to support the first year of project management following the summit. Staff from multiple agencies are serving as the core team to advance this effort.

Goal: Divert individuals experiencing a behavioral health crisis from emergency rooms and detention facilities into an appropriate and effective system of care.

Initiative: Washoe County Adult Crisis Response System

**Priority Population:** County-wide system response for adults in Washoe County experiencing a behavioral health crisis.

#### 22-25 CHA Priority Indicator(s):

- 1. Percentage of adults reporting mental health "not good" for 14+ days in Washoe County 14.7% (2020)
- 2. Intentional injury (suicide) mortality rate per 100,000 20.1 (2020)

**2023 SMART Objective:** By December 31, 2024, build out all three elements of a best practice behavioral health crisis continuum of care system in Washoe County with affinity to the "Roadmap to the Ideal Crisis System" published by the National Council for Behavioral Health

**2024 SMART Objective:** By December 31, 2024, build out all three elements of a best practice behavioral health crisis continuum of care system in Washoe County with affinity to the "Roadmap to the Ideal Crisis System" published by the National Council for Behavioral Health

**2025 SMART Objective:** By December 31, 2025, enhance all three elements of a best practice behavioral health crisis continuum of care system in Washoe County with affinity to the "Roadmap to the Ideal Crisis System" published by the National Council for Behavioral Health.

Ac	ction Step		Status of Activities	2023 Deliverables				25 Target liverables
1.	system implementation in Washoe County.	2022 – December 2024	Applicable	1. Crisis Stabilization Center openDeliverable: Not accomplished, shift	1.	Crisis Stabilization Center open. Deliverable: The stabilization	1.	The PAT will complete a new CRS implementation plan and continue
2.	$\mathcal{E}$	Monthly June 2022 – December 2024	In Progress	to 2024  2. Hub contract awarded.		center remodel is complete, staff is hired, and the Center is		to meet at least once a month to work on CRS implementation
3.	enhance the 988 Crisis Call Hub		Target Acheieved in	- Deliverable: Not accomplished, shift to 2024		expected to	2.	The PAT will actively collaborate with Carelon and Crisis Support
4.	Continue to work collaboratively with the State of Nevada and Renown Health to open a Crisis Stabilization Center.	Opened by December 2023	In Progress	teams	2.	Hub contract awarded and		Services of Nevada to achieve enhancements to the 988 Hub.

			- Deliverable: The RFQ was completed and a contract approved in Nov. 2024 with Carelon to enhance the 988 Hub. Kick off scheduled for Jan. 2025  3. MOUs in place. Deliverable: Multiple MOUs between system partners have been completed.	<ol> <li>4.</li> <li>5.</li> <li>6.</li> </ol>	The PAT will actively collaborate with the State and local partners to enhance mobile crisis response.  The PAT will actively collaborate with Renown to establish and enhance Crisis Care Center operations.  At least three additional trainings will be held for CRS partners and stakeholders.  Staff hired for ongoing coalition coordination.
5. Continue to work collaboratively with the State of Nevada and local agencies to build out mobile crisis response teams.	Designated Mobile Crisis Response Teams active by 2025	In Progress	training plan was completed and the first training was presented to 40+		
6. Continue to implement strategies and action steps in the Washoe County Behavioral Health Crisis Response Implementation Plan to assure the system as implemented has fidelity to the best practice standards.		Target Acheieved in 2024	attendees representing system partners in August 2024		

7. Complete a new Washoe County Crisis Response System Plan and pursue implementation through coalition efforts collaborating with statewide partners.	Dec 2025	NEW in 2025		<ul><li>5. Staff hired for ongoing coordination.</li><li>Deliverable: Not accomplished. Shift to 2025.</li></ul>	
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**2024 Annual Update**: Significant progress was achieved in 2024 to advance both statewide and Washoe County specific crisis response system efforts. DPBH finalized a statewide contract with Carelon to serve as a statewide Administrative Service Organization dedicated to enhancing the 988 Hub. Renown Health completed all facility improvements and hired staff to open the Renown Crisis Care Center. While the Center came just short of opening in 2024, the community looks forward to these new crisis services in early 2025. The coalition spent significant time working toward MOUs between key system partners as well as providing the first collaborative system training opportunity to assure a systems approach in the region. In 2025 we anticipate working closely with Carelon and Renown to enhance Hub and Crisis Care Center operations while shifting focus to collaborating with the state to enhance the mobile crisis team element of the Crisis Response System.

**Lead Contact/Agency:** NNPH, Washoe County Manager's Office, Nevada Department of Public and Behavioral Health **Supporting partners**: Crisis Support Services of Nevada, Renown Health, CCBHCs, local governments, hospitals, insurance plans, state agencies, law enforcement, behavioral health providers

Resources to address the initiative: This initiative is a continuation from the 2018 – 2020 CHIP. The Washoe County Crisis Response Implementation Plan was developed as a CHIP initiative starting in 2020. The partners have continued to collaborate to implement the plan. WCHD initially provided financial resources to contract with Social Entrepreneurs, Inc. in FY 21 and FY 22 to serve as facilitators and project managers as well as core staff to support the initiative. Washoe County continued financial support to retain SEI in FY 23 and 24. Going into 2025, seven system partners have made financial contributions to the Regional Behavioral Health Initiatives Fund which have been granted to Washoe County to hire staff to continue to facilitate this effort. From WCHSA, the Behavioral Health Coordinator serves as core staff to support the initiative. The State of Nevada is working toward Medicaid rates to support system implementation. State mental health block grants and ARPA funding have been allocated to the initiatives. SB390 of the 2021 Nevada Legislative Session created the Behavioral Health Crisis Response Fund which will collect fees on phone lines to support the crisis response system. Many agencies have dedicated many hours of staff time to work to implement elements of the crisis response plan.

Goal: Improve access to care through an appropriate child/family-oriented behavioral health system for youth experiencing a behavioral health crisis and/or behavioral health diagnosis.

**Initiative:** Washoe County Youth Crisis Response System

**Priority Population:** County-wide system response for youth in Washoe County experiencing a behavioral health crisis.

#### 22-25 CHA Priority Indicator:

- 1. Percentage of high school students who felt sad or hopeless almost every day for two or more weeks in a row during the 12 months before the survey 40.2% (2019 YRBS)
- 2. Percentage of middle school students who felt sad or hopeless almost every day for two or more weeks in a row during the 12 months before the survey 32.4% (2019 YRBS)
- 3. Percentage of high school students who tried killing themselves during the 12 months prior to the survey 9.9% (2019 YRBS)
- 4. Percentage of middle school students who tried killing themselves during the 12 months prior to the survey 6.0% (2019 YRBS)

**2023 SMART Objective:** By December 31, 2025, achieve goals identified in the Washoe County Crisis Response System Implementation Plan to build out a best practice youth behavioral health crisis continuum of care for youth in Washoe County with affinity to the "National Guidelines for Child and Youth Behavioral Health Crisis Care" distributed by SAMHSA.

**2024 SMART Objective:** By December 31, 2025, achieve goals identified in the Washoe County Crisis Response System Implementation Plan to build out a best practice youth behavioral health crisis continuum of care for youth in Washoe County with affinity to the "National Guidelines for Child and Youth Behavioral Health Crisis Care" distributed by SAMHSA.

**2025 SMART Objective:** By December 31, 2025, achieve goals identified in the Washoe County Children's Crisis Response System Plan to build out a best practice youth behavioral health crisis continuum of care for youth in Washoe County with affinity to the "National Guidelines for Child and Youth Behavioral Health Crisis Care" distributed by SAMHSA.

P	Action Step	Timeline	Status of	2023 Deliverables	2024 Deliverables	2025 Target Deliverables
			Activities			
1	Begin facilitation of the Youth Partner Agency Team		In Progress	Hub contract awarded     Deliverable: Not	Hub contract awarded and new vendor operational	1. The Children's Crisis Response Coalition
	to design and implement the	December 2024		accomplished, shift to	- Deliverable: Hub contract	(formerly Youth PAT)
	youth crisis response system including establishing				was awarded in Nov. 2024.  Project kick off anticipated in	will implement three goals and multiple
	agreements and protocols to			2. Mobile crisis teams with		strategies identified in a
	implement the system.			competency to serve youth		newly developed
				and families expanded	2. Mobile crisis teams with	Children's Crisis
				- Deliverable: Not	competency to serve youth	Response plan.
				accomplished, shift to	and families expanded	
				2024	- Deliverable:The State and	2. The CCRC will actively
					Washoe County	collaborate with Carelon

2. Identify gaps in children and Ongoing	Target	3.Number of goals and objectives in the plan related to youth and families achieved Deliverable: Not accomplished, shift to 2024.	collaborated to shift operation of the Children's Mobile Crisis Teams from DCFS to the County as of July 1. Hours of availability were expanded and numbers of clients served have grown significantly.  3. Progress toward establishing crisis respite center Deliverable: A crises stabilization/respite program is included in the County's current plan for the remodel of the facility formerly known as West Hills with a targeted opening date of late 2026.	collaborate with the WCHSA and local partners to enhance children's mobile crisis response.  The CCRC will collaborate with Washoe County to include a crisis stabilization/respite center in the facility formerly known as West Hills.
youth specific services and solutions to address those gaps. Work collaboratively to identify and implement opportunities for improvement of current youth behavioral health crisis services and systems.	Acheieved in 2024		<ul> <li>4. # of goals and objectives in the plan related to youth and families achieved.</li> <li>Deliverable: At least two goals and objectives from the original plan have been achieved with many others in progress.</li> </ul>	
3. Continue to work collaboratively with the State of Nevada and Crisis Support Services of Nevada to enhance the 988 Crisis Call Hub.				

4.	Continue to work	December 2024	Target
	collaboratively with the state		Acheieved in
	to expand mobile crisis		2024
	response teams with children		
	and youth expertise		

2024 Annual Update: Significant progress was achieved in 2024 to advance both statewide and Washoe County specific crisis response system efforts.

DPBH finalized a statewide contract with Carelon to serve as a statewide Administrative Service Organization dedicated to enhancing the 988 Hub. Nevada DCFS and Washoe County Human Services Agency collaborated to shift operations of the Children's Mobile Crisis Team from the State to the County. Nine out of 10 existing Children's MCRT transferred to the County. Hours of operations were expanded and the number of clients served grew significantly. The County continues to prioritize crisis stabilization and respite services as part of the plan for the facility formerly know as West Hills. The coalition completed a multi-month planning effort and goes into 2025 with an updated plan. Children's Cabinet, Quest Counseling and others also collaborated to present a very successful third annual Youth Mental Health Summit.

Lead Contact/Agency: Children's Cabinet, Quest Counseling Services, Office of the County Manager

**Supporting partners**: Youth-serving behavioral health providers, Washoe County Health District, Washoe County Human Services Agency, State of Nevada Department of Health and Human Services, and Division of Child and Family Services, local governments, hospitals, insurance plans, state agencies, law enforcement, behavioral health providers.

Resources to address the initiative: This initiative is a continuation from the 2018 – 2020 CHIP. The Washoe County Crisis Response Implementation Plan was developed as a CHIP initiative starting in 2020. The partners have continued to collaborate to implement the plan. The coalition delayed implementation of youth specific aspects of the system until the national guidelines were published in late 2022. WCHD provided financial resources to contract with Social Entrepreneurs, Inc. to serve as facilitators and project managers. Washoe County continued financial support to retain SEI in FY 23 and 24. Going into 2025, seven system partners have made financial contributions to the Regional Behavioral Health Initiatives Fund which have been granted to Washoe County to hire staff to continue to facilitate this effort. The Children's Cabinet and Quest Counseling Services provide core staff to support the Children's Crisis Response Coalition. The State of Nevada is working toward Medicaid rates to support system implementation. State mental health block grants and ARPA funding have been allocated to the initiatives. SB390 of the 2021 Nevada Legislative Session created the Behavioral Health Crisis Response Fund which will collect fees on phone lines to support the crisis response system. Many agencies have dedicated many hours of staff time to work to implement elements of the crisis response plan.

Goal: Reduce the number of suicide attempts and death by suicide in Washoe County.

**Initiative:** Aca Entre Nos

**Priority Population:** Spanish speaking families

#### 22-25 CHA Priority Indicator:

1. Percentage of adults reporting mental health "not good" for 14+ days in Washoe County – 14.7% (2020)

2. Percentage of high school students who felt sad or hopeless almost every day for two or more weeks in a row during the 12 months before the survey – 40.2% (2019 YRBS)

3. Percentage of middle school students who felt sad or hopeless almost every day for two or more weeks in a row during the 12 months before the survey – 32.4% (2019 YRBS)

**2023 SMART Objective:** By December 2023, facilitate 5 Aca Entre Nos sessions that reach at least 70 participants about mental health that can lead to reducing stigmatization of seeking mental health services among the Spanish-speaking community.

**2024 SMART Objective**: By December 2024, reach at least 70 Spanish speaking participants by facilitating 5 Aca Entre Nos mental health sessions in schools and/or through community requests to diminish the stigma about mental health services and foster equity in access to support.

**2025 SMART Objective:** By December 2025, engage 50 Spanish-speaking participants by facilitating 2-4 targeted mental health sessions at each of two schools and 1-2 community-wide sessions to reduce stigma surrounding mental health services and promote equitable access to support.

A	etion Step				23 Deliverables				25 Target eliverables
1.	Identify locations where conversations can be hosted monthly.	February – July 2023	Target Achieved in 2023	1.	Facilitated community conversations at 7 locations.  80+total participants	2.	Facilitated 4 Aca Entre Nos mental health sessions 28 total participants	2.	Facilitate 2-4 mental health sessions at 2 schools  Facilitate 1-2 community-wide sessions  Engage 50 participants.
2.	Tailor outreach plan for each different hosting location.	February – Dec 2023	Target Achieved in 2023						
3.	Engage in dialog and education around mental health with community participants.	February – Dec 2023	Target Achieved in 2023						
4.	Share mental health resources available within the community.	February – Dec 2023	Target Achieved in 2023						

		I	
5.	Identify locations where conversations can be hosted	May – June 2024	No Longer
	•	and October – Dec	Applicable
		2024	-FP
		May – June 2024,	Target
		and October - Dec	Acheieved in
		2024	2024
		Dec 2024	Target
	health during sessions.		Acheieved in
			2024
8.	Share mental health resources available within the	Dec 2024	Target
	community.		Acheieved in
	- ·		2024
Q	Establish a series curriculum to follow.	Aug 2025	NEW in 2025
٠.	Establish a series currenam to follow.	1 lug 2023	11LW III 2023
10	Establish a series enportunity with a seheel	Sant 2025	NEW in 2025
10.	Establish a series opportunity with a school.	Sept 2025	NEW III 2023
1.1	T1 ('C 10	g , 2025	MENT: 2027
	Identify 1-2 opportunities to host a community-wide	Sept 2025	NEW in 2025
	session.		
12.	Develop a mental health resource list and	Dec 2025	NEW in 2025
	description of what to expect for families to use and		
	reference.		
202			. 1. 1

**2024 Annual Update:** Facilitated four Aca Entre Nos sessions in the community and in schools, raising awareness among the Washoe County School District Middle School Counseling Department through a presentation. This led to a collaboration with Clayton Middle School to organize a four-part series for targeted families. An assessment to measure program impact was also developed, which will be piloted with Clayton Middle School families. Barriers included challenges with hosting events at school sites due to updated policies and a lower-than-expected turnout for the first session, prompting us to revise our outreach strategy.

**Lead Contact/Agency:** Nevada Hispanic Medical Association, Children's Cabinet, Northern Nevada Public Health **Supporting partners**: Renown, WCSD, Parent University, Quest Counseling

**Resources to address the initiative**: Nevada Hispanic Medical Association, bilingual, and bicultural medical professional participation. School counselor, professional bilingual and bicultural mental health participation. Renown, financial resources. Children's Cabinet, fiscal agent, potential hosting site. Parent University, outreach logistical and data collection support. Northern Nevada Public Health, outreach and organizational, logistical support.

Goal: Decrease the number of suicide attempts and deaths by suicide in Washoe County

Initiative: Zero Suicide

**Priority Population:** Adults in Washoe County

**22-25 CHA Priority Indicator(s):** Intentional injury (suicide) mortality rate per 100,000 – 20.1 (2020)

1. Percentage of high school students who tried killing themselves during the 12 months prior to the survey – 9.9% (2019 YRBS)

2. Percentage of middle school students who tried killing themselves during the 12 months prior to the survey – 6.0% (2019 YRBS)

#### 2023 SMART Objective:

1. By January 31, 2024, implement suicide prevention screening in at least one CCHS program in the Washoe County Health District clinic as a Zero Suicide site.

2. By December 30, 2025, add two additional sites implementing Zero Suicide in Washoe County.

**2024 SMART Objective**: By January 31, 2025, complete implementation of remaining ZS action steps in the Northern Nevada Public Health clinic and support of expansion to external agencies identified.

**2025 SMART Objective:** By December 30, 2025, offer at least 3 additional suicide prevention trainings and resources for Northern Nevada Public Health staff.

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Action Step	Timeline	Status of	2023	2024 Deliverables	2025 Target
		Activities	Deliverables		Deliverables
1. Continue training on suicide identification, prevention screening, support	Sept 2023	Target	1. # of staff	1. Complete	1. Offer 3
and transition to care in at least two programs within the Northern		Achieved	trained	primary	additional
Nevada Public Health – Community and Clinical Health Services		in 2023	- Deliverable:	program	suicide
Division (CCHS).			not reported	implementation	prevention
			_	steps in NNPH	training(s)
			2. Additional	Clinic,	and
			CCHS	- Deliverable:	resources
			program	NNPH	for NNPH
			piloted.	program	staff.
2. Pilot and implement ZS screening and procedures in at least one	Dec 30,	In Progress	- Deliverable: 1	implementing	
additional CCHS program. Identify the program, provide staff training,	2024		program	universal	
develop formal procedures, implement appropriate screening and			piloted	training and C-	
transition to care.			program	SSRS	
				screening tool.	

3.	Offer at least 3 suicide prevention trainings and prevention resources to NNPH staff members to support suicide prevention activities.	/	New in 2025	3. Add two additional Zero Suicide	
4.	Facilitate expansion and implementation of the Zero Suicide program by at least two additional local agencies in Washoe County.	July 2023 – Dec 2025	No Longer Applicable	Washoe County - Deliverable:	
5.	Provide continued technical assistance to all implementing ZS local agencies serving Washoe County residents (including Quest Counseling, The Children's Cabinet, Renown, WCHD, Carson Tahoe Hospital, Community Chest).	-	No Longer Applicable	Not accomplished	

**2024 Annual Update:** Nevada Office of Suicide Prevention (OSP)was not able to successfully hire a Zero Suicide Coordinator position to provide direct program implementation, technical support and expansion since 2023. However, additional suicide prevention training(s) – sponsored by the OSP - will continue to be hosted at/by NNPH and available for NNPH staff members, including SafeTalk and ASIST trainings. NNPH clinic staff continue to assess clients for suicide risk on a case-by-case basis, and provide appropriate referrals and transportation if/when needed. Suicide prevention resources and referrals will continue to be provided by staff members to clients.

Lead Contact/Agency: Nevada Office of Suicide Prevention

Supporting partners: Northern Nevada Public Health

**Resources to address the initiative**: Northern Nevada Public Health Chronic Disease and Injury Prevention Health Educator, Northern Nevada Public Health Clinic, Zero Suicide Policies Review Board

Goal: Decrease the number of suicide attempts and deaths by suicide in Washoe County.

Initiative: Lethal Means Coalition Priority Population: Washoe County 22-25 CHA Priority Indicator(s):

1. Intentional injury (suicide) mortality rate per 100,000 – 20.1 (2020)

2. Firearm-related suicide fatalities per 100,000 population – 13.2 (2021)

#### 2023 SMART Objective:

1. By December 30, 2023, create a new coalition to address suicide by certain lethal means.

2. By December 30, 2024, create and promote suicide prevention resources through social media platforms.

3. By December 30, 2024, implement 1-2 strategies from the Lethal Means Coalition workplan.

#### 2024 SMART Objective:

1. By December 30, 2024, create and promote suicide prevention resources through social media platforms.

2. By December 30, 2024, implement 1-2 strategies from the Lethal Means Coalition workplan.

## 2025 SMART Objective:

1. By December 30, 2025, create and promote suicide prevention resources through available media platforms, channels.

2. By December 30, 2025, increase FFL participation in the Temporary Safe Gun Storage network and map.

A	tion Step	Timeline	Status of	20	23 Deliverables	202	24 Deliverables	202	25 Target
			Activities					De	liverables
1.	Develop work plan for community-based lethal means reduction for suicide prevention.	July 2023	Target Achieved in 2023	1. 2.	Work plan developed.  At least 3 partners	1.	Developed and promoted resources through social	1.	Promote participation and resources to local FFL's
3.	Identify and recruit Lethal Means Coalition partners. Facilitate convenings and identify strategies and actions to be implemented.	Dec 30, 2023	Target Achieved in 2023	3.	recruited.  Coalition strategies and	2.	media platforms.  Implemented	2.	Increase Participation in Storage Map
4.	Facilitate development of community resources, including website, education materials and media, a regional gun safe storage locations map, practices, recommendations for gun safety advocacy.	Dec 30, 2024	Target Acheieved in 2024	4.	activities developed.  1 – 2		multiple strategies, including creation of		1
5.	Finalize the WSPA work plan for community-based lethal means reduction for suicide prevention	March 30, 2024	Target Achieved in 2023		strategies/activities implemented.		materials, organization, website, and		

6.	Develop and complete at least one survey of local Federal Firearm Licensed (FFL's) businesses and other targeted locations to determine their interest in participating in suicide prevention and as safe storage sites. Further consult an establish and interested location(s).	Dec 30, 2024	Target Acheieved in 2024	launch of Temporary Gun Storage Map with four (4) locations.	
7.	Increase the number of FFL's participating in Washoe County Temporary Gun Storage Map to six (6); offer them training and prevention resources.	Dec 30, 2025	New in 2025		
8.	Promote and support new Good Samaritan legislation for FFL's passage during the 2025 legislative session.	Dec 30, 2025	New in 2025		
9.	Promote WSPA community-based resources and prevention messaging in Washoe County at least five (5) instances in 2025.	· /	New in 2025		

**2024** Annual Update: The Washoe Suicide Prevention Alliance community-based suicide prevention initiative successfully accomplished stated goals in 2024, including publication of a large website resource, successful creation of the local Safe Gun Storage Map with four (4) gun shops partnering - consenting and receiving safe storage referrals, social media development, the development of four PSA-style videos on safe storage for suicide prevention, and participation at multiple local outreach events. WSPA also partners with local Alcohol Tobacco, and Firearms (ATF) office to distribute WSPA materials and promote, vet those resources. WSPA also helped introduce a Bill Draft to the 2025 Nevada legislature for Good Samaritan-type legislation for gun shops who provide temporary safe storage.

#### Lead Contact/Agency: Northern Nevada Public Health

Supporting partners: To be identified through coalition building activities. Participating organizations of the Washoe Suicide Prevention Alliance (WSPA) include: the Nevada Department of Veteran's Services, the Nevada Division of Public and Behavioral Health (DPBH) - Office of Suicide Prevention, Reno-Sparks Indian Colony, Nevada Urban Indians, VA Sierra Nevada Health Care, The American Foundation for Suicide Prevention, Eduardo Martinez (Veteran's Advocate), and Sam Knipmeyer (Vet-to-Vet) support group.

WSPA is also supported by an advisory team to provide feedback and guidance on the coalition's activities. The advisory team is comprised of stakeholders from Federally Licensed Firearms (FFLs), statutory bodies (City Council), behavioral health providers, medical providers, law enforcement, and veteran outreach.

**Resources to address the initiative**: Northern Nevada Public Health Chronic Disease and Injury Prevention Health Educator, web-based platform for hosting coalition site, gun violence and suicide prevention education resources;

Goal: Reduce the number of suicide attempts and death by suicide in Washoe County.

Initiative: Rez Girls Wellness Retreat and Boys Wellness Retreat

**Priority Population:** American Indian/ Alaska Native

#### 22-25 CHA Priority Indicator:

- 1. Percentage of adults reporting mental health "not good" for 14+ days in Washoe County 14.7% (2020)
- 2. Percent of high school students who tried killing themselves during the 12 months before the survey (Washoe County, 2019)
- 3. Percent of high school students who experienced sexual dating violence during the 12 months before the survey (Washoe County, 2019)
- 4. Percentage of high school students who felt sad or hopeless almost every day for two or more weeks in a row during the 12 months before the survey 40.2% (2019 YRBS)
- 5. Percentage of middle school students who felt sad or hopeless almost every day for two or more weeks in a row during the 12 months before the survey 32.4% (2019 YRBS)

#### 2023 SMART Objective: New in 2024.

**2024 SMART Objective:** By July 2024, host two retreats (one for males and one for females) with workshops relating to mental, physical, emotional, and spiritual wellness for 24 Native American youth ages 12-18.

**2025 SMART Objective:** By July 2025, host two retreats (one for males and one for females) with workshops relating to mental, physical, emotional, and spiritual wellness for 24 Native American youth ages 12-18. By December 2025, host one post-retreat, midyear cohort meetup for girls.

A	tion Step	Timeline	Status of Activities	2023 Deliverables	2024 Deliverables	2025 Target Deliverables
1.	Secure \$100k in funding for retreat.	January – July 2024	In Progress	None.	1. Hosted two wellness	1. Host two wellness
2.	Identify and book retreat hosting site and transportation rentals.	January 2024	Target Acheieved in 2024		retreats 2. 24 total	retreats  2. Reach at least
3.	Create retreat agenda and recruit workshop trainers, presenters, and counselors.	February - July 2024	Target Acheieved in 2024		participants	24 total participants
4.	Develop retreat flyers and advertise, open registration, and enroll and confirm 24-30 Native American youth.	May – July 2024	In Progress			3. Host one post- retreat midyear cohort workshop for girls.

5.	Expand on existing pre and post assessment of youth and parents and implement.		Acheieved in		
6.	Purchase program supplies (food, presenter materials, camper and presenter wellness items, camp supplies).	May – July 2024	2024 Target Acheieved in 2024		
7.	Secure \$100k in funding for retreat.		NEW in 2025		
8.	Restructure the boys wellness retreat.	July 2025	NEW in 2025		
9.	Rebrand boys wellness retreat (leadership, culture camp).	July 2025	NEW in 2025		
	Work on programming that has boys more engaged with their own location, more culture.		NEW in 2025		

**2024 Annual Update:** Hosted two retreats, including the first boys' retreat, which received positive feedback and strong interest in a follow-up next year. Barriers included differences in engagement between boys and girls, with boys preferring more hands-on, outdoor activities and practical curriculum over conceptual content. To address this, we will adapt the boys' programming for next year to better align with their needs and interests.

Lead Contact/Agency: Tribal Minds, Inc.

**Supporting partners**: Nellie Davis from Sawabe Muhano (Native Wellness Center), Reno Sparks Tribal Health Center, Anthem Blue Cross, Northern Nevada Public Health, A Life More Sacred (Michael Carson), AveryDeane from BodyWise, Marina Cordova (SoulSpa)

Resources to address the initiative: Tribal Minds personnel, supporting partner staff, donations and sponsorship

## Focus Area 3- Preventative Health Behaviors Year 2 Results

	Improve access to healthy foods and beverages in communities where availability is limited.
Goal(s)	Improve physical activity and nutrition behaviors among children in Washoe County.
	Increase access to fresh, healthy food for adults in Washoe County to prevent chronic disease.
	Improve physical activity among adults in Washoe County.

	Obesity Prevalence	Hemoglobin A1C
Priorities	Access to Food	Food Insecurity
	Fruit and Vegetable Consumption	Physical Activity

# **Priority Specific Objectives**

By December 2025, increase the number of stores participating in the Healthy Corner Store Program from 4 to 5 to improve the offering of healthy food options at their location.	By the end of the 2025-2026 school year, increase the number of sites implementing the 5210 Health Washoe program by adding 2 more schools.
By December 2025, provide food assistance to at least 40,000 food insecure individuals by implementing the Prescription Food Pantry at participating Northern Nevada healthy pantries.	By the end of the ABTG program, 30 participants will increase knowledge of coping skills for stress, anxiety, and depression by a positive movement of 1, within the mental health assessment tool.
By the end of the ABTG program, 30 participants' will each complete 1 plan to remain physically active after the conclusion of the program.	



Focus Area: Preventative Health Behaviors

Goal: Improve access to healthy foods and beverages in communities where availability is limited

**Initiative:** Healthy Corner Store

**Priority Population:** Areas with low access to a grocery store in Washoe County

#### 22-25 CHA Priority Indicator(s):

- 1. Percent of high school students who ate vegetables 1 or more times/day during 7 days 12.8% (2019)
- 2. Percent of adults that had at least 1 serving of vegetable per day 78.9% (2019)
- 3. Percent of high school students who have obesity 11.9% (2019)
- 4. Percent of adults that have obesity (based on BMI categories) 24.4% (2020)
- 5. Percent of the population that is food insecure, Washoe County, 11.0% (2019)

Percentage of population who are low-income and do not live close to a grocery store (RWJF)

**2023 SMART Objective:** By December 2024, increase the number of stores participating in the Healthy Corner Store Program from 4 to 7 to improve the offering of healthy food options at their location.

**2024 SMART Objective:** By December 2024, increase the number of stores participating in the Healthy Corner Store Program from 3 to 10 to improve the offering of healthy food options at their location.

**2025 SMART Objective:** By December 2025, increase the number of stores participating in the Healthy Corner Store Program from 4 to 5 to improve the offering of healthy food options at their location.

A	ction Step	Timeline	Status of Activities	202	23 Deliverables			2025 Target Deliverables
1.	Identify partners to support Healthy Corner Store activities.	Ongoing through December 2025	In Progress	1.	One store was onboarded with the HCS program,	1.		1. Onboard at least one store to the program.
2.	Provide guided technical assistance to store owners and employees on the store conversion process.	Ongoing through December 2025	In Progress	•	Carniceria Tres Amigos in February 2023. This		not met.	
3.		-	Target Achieved inn 2024		brings the total to 4 stores onboarded with the			
4.	Facilitate the development of a data collection tool to assess program effectiveness and monitor store inventory and sales.	By December 2024	In Progress		program.			

5.	Assess sustainability of non-profits ability to supply fresh produce to stores.		Target Achieved in 2024		
6.	Complete a comprehensive evaluation of store performance and progress.	By December 2025	NEW in 2025		
7.	Develop a pilot purchasing cooperative plan in partnership with store owners and local food distributors or hubs.	By December 2025	NEW in 2025		
8.	Expand the offering of fresh produce to two healthy corner stores	By December 2025	NEW in 2025		
9.	Secure partnership with a food supplier/distributor to sustain an inventory of fresh produce and healthy items for stores.	By December 2025	NEW in 2025		
10.	Onboard PSI to assist with program	By December 2025	New in 2025		

**2024 Annual Update:** The program focuses on engaging stores within the top priority zip codes which include 89512, 89431, 89433, and 89502. This year, 22 store visits were conducted and 13 of those stores were from these priority zip codes. Regular technical assistance visits with the four participating stores continued throughout the year. Staff approached recruitment differently this year and expanded outreach to Ethnic Markets as the majority carry an assortment of healthy items. Staff saw this as a valuable opportunity to connect the community to healthy foods from markets they may not be aware of. Efforts to work with Ethnic Markets included helping with product display, signage, and additional resources as needed. This approach opened more opportunities to work with additional stores in high need areas while focusing on areas where education and resources are needed to make the healthy choice the easy choice.

Additionally, staff spent time revamping and restructuring program guidelines and requirements to uphold program expectations of the roles and responsibility of the stores. A toolkit was created to provide a thorough overview of the program and outlined key requirements to maintain a healthy corner store status. The toolkit is intended as a guide for stores to reference and for explaining the onboarding process to new stores in greater detail. Some key changes include a tiered level approach, which encourages stores to increase the number of healthy items to receive different incentives based on the tier requirements met.

During store visits this year, a thorough assessment of store inventory was conducted. Through this assessment, it was identified stores were not stocking as many healthy items as before and signage was taken down including healthy option tags and clings due to no longer carrying the items. This is because business has been very slow, which led to a decrease in the purchasing of some of the regular fruit and vegetable items that were not selling. Although stores are not maintaining their healthy inventory, two stores are still interested in carrying the fresh produce provided by Reno Food Systems, which has been a great success at Vassar Market.

In June, the program launched a month-long campaign to bring awareness about the HCS initiative. The media focused on engaging specific demographic groups including target populations in Northern Nevada. The campaign was crafted to optimize reach through various media deployments, including social media (Meta platforms) and Google ads (e.g. YouTube). The campaign made an impact with a total of 743,207 impressions and 375,143 video views, including an increase in views of the Healthy Corner Store webpage.

Recruitment of additional stores continues, but staff have been challenged with onboarding new stores this year. Due to the slow progress made with recruitment, staff are looking to improve the offering of the program and re-evaluating the structure and approach. With the new toolkit and more structured guidelines and requirements, staff is hopeful these changes will address the gaps identified and improve the sustainability and accountability of the stores.

#### Lead Agency(s): Northern Nevada Public Health Chronic Disease and Injury Prevention Program

Supporting partners: Reno Food Systems has been a key ongoing partner for the program, supplying fresh produce for the stores.

UNR Extension & Environmental Health – NNPH have been supporting partners for additional resources.

**Resources to address the initiative**: Intern to improve gaps related to store inventory tracking and store engagement. Identify a consistent food supplier to sustain the supply of healthy foods in stores.

**Proposed Budget:** \$14,000. The additional funds could be used for additional staff support via PSI and partnerships with local producers/distributors to establish a consistent source/supply of healthy items for the stores.

Focus Area: Preventive Health Behaviors

Goal: Improve physical activity and nutrition behaviors among children in Washoe County.

**Initiative:** 5210 Healthy Cafeterias

**Priority Population:** Children in schools K-8<sup>th</sup>

#### 22-25 CHA Priority Indicator:

1. Percent of middle school students who watched TV, played video or computer games or used a computer for 3 or more houses/day – 60.6% (Nevada YRBS 2019)

- 2. Percent of middle school students who did not participate in at least 60 minutes of physical activity on any day during the seven days before the survey 17.4% (Nevada YRBS 2019)
- 3. Percent of Washoe County youth who consumed vegetables twice a day 21.2% (CDIP Chronic Disease Report 2021)
- 4. Percent of kindergarten students who have obesity 22.7 % (CDIP Chronic Disease Report 2020-2021)

# 2023 SMART Objective:

By the end of 2025, expand the number of sites that are implementing the 5210 Healthy Washoe program in 10 additional elementary schools.

**2024 SMART Objective**: By the end of 2025, expand the number of sites that are implementing the 5210 Healthy Washoe program in 2 additional elementary schools.

**2025 SMART Objective:** By the end of the 2025-2026 school year, increase the number of sites implementing the 5210 Health Washoe program by adding 2 more schools.

Ac	tion Step	Timeline		202		202			25 Target
			Activities	Del	liverables	De	liverables	De	liverables
1.	Recruit interested schools for the 5210 Healthy Washoe program.	Jan-Dec 2024	Target Acheieved in 2024	1.	Provided 5210 trainings to	1.	Recruited a Title One elementary	1.	Recruit 2 schools
2.	Host a meeting with recruited school principals on the 5210 program.	Jan – Dec 2024	Target Acheieved in 2024		5 schools instead of 10 goals.		school to implement the 5210	2.	Host 2 family engagement events
3.	Create a 5210 school coalition to implement the program	Jan Dec 2023	Not Started	2.	Implemented	l	Healthy Cafeteria		
4.	Provide tool kits to each school.	Jan Dec 2024	In Progress		the 5210 Healthy Cafeteria	2.	program  Implemented	3.	Implement 1-2 Healthy Cafeteria
5.	Conduct environmental scans at each school implementing 5210 Healthy Cafeterias	Dec 2024	Target Acheieved in 2024		Program in 2 schools		2 initiatives to increase fruit and vegetable	4.	Increase community

6. Create an action plan for each school implementing 5210 Healthy Cafeterias.	Dec.2024	Target Acheieved	consumption and teach	engagement on the 5210
Careterias.		in 2024	students how	Healthy
7. Align 5210 messaging with Coaches Challenge.	April 2023	No Longer	to fuel their	Washoe Page
	1	Applicable	bodies with	C
8. Implement 1-2 5210 strategies per school year.	Dec.2024	Target	the 5210	
		Acheieved	messaging.	
		in 2024		
9. Create a new 5210 messaging media campaign to recruit new schools	March	Target		
	April. 2024	Acheieved		
		in 2024		
10. Promote healthy nutrition and physical activity with Fuel up Health, GO!	Dec. 2024	Target		
Programs in classrooms		Acheieved		
		in 2024		
11. Recruit a 5210 Champion at each school to continue the 5210 programs	Dec. 2024-	In Progress		
	Ongoing			
12. Recruit schools interested in participating in the 5210 Healthy Washoe	August	NEW in		
program.	2025	2025		
13. Conduct environmental assessments at schools implementing the 5210	Oct 2025	NEW in		
Healthy Cafeterias program.		2025		
14. Implement 1 to 2 initiatives for each participating in Healthy Cafeteria	Dec 2025	NEW in		
School.		2025		
15. Organize 2 family engagement events in collaboration with the	Dec 2025	NEW in		
participating 5210 schools.		2025		
16. Encourage teachers to implement healthy nutrition and physical activity in	Oct 2025	NEW in		
their classrooms through the Fuel Up, Healthy Go program!		2025		
17. Create a media campaign to promote healthy living through the 5210	Dec 2025	NEW in		
messages.		2025		
18. Add 2-3 new resources on the 5210 Healthy Washoe page, that promotes	Dec 2025	NEW in		
nutrition and physical activity to increase activity.		2025	T ii4i-4i	

**2024 Annual Update:** In 2024, A Title 1 Elementary School was selected to implement the 5210 Healthy Cafeteria program. Two initiatives were implemented in the cafeteria to encourage increased fruit and vegetable consumption. One of the initiatives revised and replaced the name cards for fruit and vegetable items with name cards of something fun to attract kids to those options, such as, "powerful peas" or Moo Juice". Another focus was hanging 5210 posters which has the 5210 message to guide students on how to better fuel their bodies. Additionally, the Fuel Up, Healthy Go! program was promoted in an effort to integrate physical activity into classroom settings.

Before the students were dismissed for summer 2024, an Oddie Corridor map was created to share with families, parents, and students. This map highlighted locations where families, students, and individuals could find nutritious food options, parks and recreation centers for physical activities, and libraries to take a break from social media that was in their neighborhood to continue the 5210 journey while out of school.

There were two family engagement events. The first event focused on the 5210 messages with parents. The parents were able to take home resources and activities to do at home to help reduce personal screen time. All the materials were developed in English and Spanish as most of the families are Hispanic/Latino families. The second event was learning how to read a nutrition label and making decisions on items that may have added sugar. Afterward, students played the 5210 Loteria (Mexican Bingo) which has a variety of cultural references in Hispanic/Latino households that highlight physical activity and nutrition. This game is one of the examples students can use to help reduce screen time.

Lead Contact/Agency: Northern Nevada Public Health

**Supporting partners**: Washoe County School District, Washoe County Nutrition Services, Media NNPH staff including the Comms team.

**Resources to address the initiative**: CDC Healthy Disparities Grant, NNPH staff time, 5210 materials, Media companies- steaming services, online platforms, tv and radio.

Focus Area: Preventive Health Behaviors

Goal: Increase 5210 messaging among families and community members in Washoe County

**Initiative:** 5210 Healthy Washoe

**Priority Population:** Washoe County School District teachers, parents, and families

#### 22-25 CHA Priority Indicator:

- 1. Percent of adults that had at least 1 serving of vegetables per day- 78.9% (Nevada BRFSS, 2013-2019)
- 2. Percent of adults participated in enough aerobic and muscle-strengthening exercises to meet guidelines in Washoe county-26.7% (Nevada BRFSS 2011-2019)
- 3. Percent of adults who are classified in having obesity in Washoe County-24.4% (Nevada BRFSS 2016-2020)

**2023 SMART Objective:** Provide at least two 5210 engagement events within the WCSD and in the community by the end of school year 2024 **2024 SMART OBJECTIVE**: Provide at least two 5210 engagement events within the WCSD and in the community by the end of school year 2024

2025 SMARR OBJECTIVE: This action plan is being combined with the 5210 Health Washoe action plan. 2024 Deliverables 2024 Deliverables Action Step Timeline Status of Activities 1. Promote 5210 programs to interested teachers and families at 5210 Dec 2024 No Longer Host 2 Hosted 4 events for family/community School sites. Applicable families, parents, or events for 5210. community Deliverable: 2 members about events hosted 5210 Programs. 1. Create a pre and post-survey on 5210 knowledge for parents/families Dec 2024 Not Started two were held at Reach at least 200 Glenn Duncan Elementary, Early individuals. 2. Create a healthy habits toolkit/resources for families Dec 2024 Not Started Deliverable: HeadStart in Stead and Lemmon Valley Elementary School. 3. Host 3 family and community engagement events Dec 2024 Target Acheieved in A total of 70 of 2024 people attend both Conduct outreach on social media to increase awareness on 5210 Target Dec 2024 events. Acheieved in 2024 5. Recruit a marketing company to create a 5210 campaign and increase April 2023-Target the number of people visiting 5210 Healthy Washoe website May 2024 Acheieved in 2024

**2024 Annual Update:** In early spring, a 5210 Campaign was launched to raise community members' awareness of the 5210 Health Message. This campaign coincided with National Public Health Week, which focused on the simple message of 5210, health and wellness. Billboards were placed in high-need zip codes, and the materials were designed to reflect the diverse age, ethnicity, and body types of those communities, ensuring inclusivity. Media ads were also placed on streaming services and social media platforms to engage the community. This campaign encouraged community members to visit our website for tips on how to incorporate the 5210 message into their lives. Suggestions included giving their favorite dishes, like Carne Asada or Pork Adobo, a healthy twist, as well as utilizing the Park Finder Directory to discover local walking and hiking spots. Additionally, two local news outlets covered the story to promote the 5210 message within our community. More activity was observed on NNPH's 5210 website. Additionally, two outreach events were provided in the community to promote the 5210 message. One event was held at the Cinco De Mayo event in Sparks and the other event was at Lemmon Valley elementary to students and parents.

## Lead Contact/Agency: Northern Nevada Public Health

**Supporting partners**: Northern Nevada HOPES, State of Nevada Department of Public and Behavioral Health, Washoe County School District, UNR Cooperative Extension, Food Bank of Northern Nevada, Urban Roots

Resources to address the initiative: CDC Healthy Disparities Grant, NNPH staff time, 5210 materials, Communications-social media, radio and online platforms

**Focus Area:** Preventative Health Behaviors

Goal: Increase access to fresh, healthy food for adults in Washoe County to prevent chronic disease.

**Initiative:** Prescription (Rx) Pantry

Priority Population Food Insecure Adults and patients with diabetes in Washoe County

## 22-25 CHA Priority Indicator:

- 1. 10% of Adults that are food insecure, Washoe County, Adults 10.9% (2017-2019)
- 2. 55% of all Rx pantry users who had at least two Hemoglobin A1C's drawn have their A1C in a downward trend (2022)
- 3. 95% of all Rx pantry participants reported that visiting the pantry is helping their families consume more vegetables (2022)

**2023 SMART Objective:** By July 2023, provide food assistance to at least 40,000 food insecure individuals by implementing the Prescription Food Pantry at participating Northern Nevada healthy pantries.

**2024 SMART Objective:** By December 2024, provide food assistance to at least 40,000 food insecure individuals by implementing the Prescription Food Pantry at participating Northern Nevada healthy pantries.

**2025 SMART Objective:** By December 2025, provide food assistance to at least 40,000 food insecure individuals by implementing the Prescription Food Pantry at participating Northern Nevada healthy pantries.

	tion Step	Timeline	Status of	2023	2024 Deliverables	2025 Target
1	Add 5210 messaging in Rx pantry locations, including	July 2024	Activities  Target	Deliverables  1. Provide food	2. Increase the	Deliverables  1. Implement
1.	healthcare settings.	July 2024	Acheieved in 2024		number of prescriptions redeemed by 5% Deliverable:	5210 messaging in
2.	Bolster relationships with existing Rx Pantry healthcare providers to increase the number of prescriptions redeemed.	Dec 2024	Target Acheieved in 2024	individuals	exceeded the 5% goal and had 2,246 additional prescriptions	year.
3.	Create diabetes and high blood pressure messaging and education to increase knowledge on the prevention of chronic diseases.	July 2024	Target Acheieved in 2024		redeemed or 32% increase from FY23.	prescriptions redeemed by 5% from FY23
4.	Add 5210 messaging in Rx pantry locations, including healthcare settings.	March 2025	NEW in 2025		3. Add 5210 marketing to 5	3. Develop nutrition

5.	Bolster relationships with existing Rx Pantry healthcare providers to increase the number of prescriptions redeemed	Ongoing	NEW in 2025	Rx pantry locations Deliverable: Distributed some	education and messaging and education to promote
6.	.Develop nutrition education and messaging and education to promote awareness and prevention of chronic diseases.	March 2025	NEW in 2025	educational pamphlets to pantry partners during quarterly meetings as well as additional SWAP marketing materials.	awareness and prevention of chronic diseases.

**2024 Annual Update:** In FY 24 we met and exceeded our goal to provide food assistance to at least 40,000 individuals. Early in 2024, we experienced staff changes that limited our progress with the Rx program. However, we recently hired a new Health and Nutrition Partnerships Coordinator to help strengthen our partnerships and program. Additionally, we brought on a new healthcare partner, Access to Healthcare Network, which will help increase accessibility to the program. Unfortunately, we also recently lost a pantry that unexpectedly closed in a high-need area. Despite these challenges, we successfully met our goals and are optimistic about exceeding them in the final year 3 of CHIP.

Lead Contact/Agency: Food Bank of Northern Nevada

**Supporting partners**: Northern Nevada Public Health staff, Prescription Food Pantry partners, Health care providers in Washoe County, and 5210 Healthy Washoe

Resources to address the initiative: Healthcare partners with knowledge of diabetes/high blood pressure,5210 materials, marketing, and communications.

Goal: Improve physical activity among adults in Washoe County.

**Initiative:** Anything but the Gym

**Priority Population:** Adults from underserved communities with disparate health outcomes, including Black, African American, Tribal, Indigenous, LGBTQIA+, Asian Pacific Islander (API), Spanish-speaking and Faith-based communities.

#### 22-25 CHA Priority Indicator:

- 1. Percent of adults that participated in enough aerobic and muscle strengthening exercises to meet guidelines, Washoe County, (Black 32.7%, Hispanic 22.6%, Asian 40.4%), 2019
- 2. Percent of adults that participated in enough aerobic and muscle strengthening exercises to meet guidelines, Washoe County (26.7%), Nevada (20.0%), and United States (23.2%), 2011-2019

#### 2023 SMART Objective:

- 1.By the end of the program, increase knowledge of coping skills for stress, anxiety, and depression by a positive movement of 1, on a scale of 1 to 10.
- 2.By the end of the program, increase self-efficacy to engage in physical activity among participants by 10%.

#### 2024 SMART Objective:

- 1.By the end of the program, 24 participants will increase knowledge of coping skills for stress, anxiety, and depression by a positive movement of 1, within the mental health assessment tool.
- 2.By the end of the program, 24 participants' will each complete 1 plan to remain physically active after the conclusion of the program.

#### 2025 SMART Objective:

1.By the end of the program, 30 participants will increase knowledge of coping skills for stress, anxiety, and depression by a positive movement of 1, within the mental health assessment tool.

2.By the end of the program, 30 participants' will each complete 1 plan to remain physically active after the conclusion of the program.

Ac	tion Step	Timeline	Status of Activities	202 De	23 liverables	202	24 Deliverables		5 Target verables
2.	Recruit program participants.  Recruit program participants.	January - December 2025 February – December 2024	NEW in 2025  Target Acheieved in 2024	1.	Conduct 40 pre- and post- assessments Deliverables: not	1.	participants increased their knowledge of coping skills for stress,	]	30 participants will increase knowledge of coping skills for stress, anxiety, and
3.	Conduct a pre-assessment to measure chronic disease risk factors and coping skills for mental health (stress, anxiety, and depression levels)	January - December 2025	NEW in 2025	2.	accomplished. Conduct eight weekly exercise		anxiety, and depression by a positive movement of 1	1	depression by a positive movement of 1 within the
4.	Conduct a pre-assessment to measure chronic disease risk factors and coping skills for mental health (stress, anxiety, and depression levels)	February – December 2024	Target Acheieved in 2024		activities.		within the GAD-7 scale.	,	mental assessment tool.

	Deliver weekly exercise routines with access to video demonstrations to increase physical activity.  Participants are asked to work out 3 times a week for 30 minutes, in addition to walking three times a week  Deliver weekly exercise routines with access to video demonstrations to increase physical activity.  Participants are asked to work out 3 times a week for 30 minutes, in addition to walking three times a week.	January - December 2025  February - December 2024	NEW in 2025  Target Acheieved in 2024	- 3.	Deliverables: not accomplished.  Provide eight health coaching sessions Deliverables: not	3.	22 program participants completed 1 plan to remain physically active after the conclusion of the program.  By the end of the program	2.	By the end of the program participants will complete 1 plan to remain physically active after the conclusion of the program.
	Provide at least three health coaching sessions per participant to help clients adhere to the exercise program and help create healthy lifestyle habits.	January - December 2025	NEW in 2025		accomplished.		19 participants will engage in at least 150 minutes of	3.	the program participants will engage in
	Provide at least three health coaching sessions per participant to help clients adhere to the exercise program and help create healthy lifestyle habits.	February – December 2024	Target Acheieved in 2024				moderate- intensity physical activity.		at least 150 minutes of moderate- intensity
9.	Provide educational newsletters regarding chronic disease prevention	January - December 2025	NEW in 2025						physical activity.
10.	Provide educational newsletters regarding chronic disease prevention	February – December 2024	Target Acheieved in 2024						
11.	Conduct a post-assessment to measure chronic disease risk factors and coping skills for mental health (stress, anxiety, and depression levels).	January - December 2025	NEW in 2025						
12.	Conduct a post-assessment to measure chronic disease risk factors and coping skills for mental health (stress, anxiety, and depression levels).	February – December 2024	Target Acheieved in 2024						
13.	Analyze pre and post-test measures.	January - December 2025	NEW in 2025						

14. Analyze pre and post-test measures.	February – December 2024	In Progress		
15. Partner with at least two organizations to expand reach and participation among the priority population.	January - December 2025	NEW in 2025		
16. Create a communications plan to raise awareness and increase recruitment within the priority population.	January - December 2025	NEW in 2025		

**2024 Annual Update:** A total of 22 participants completed the program which included developing an adherence plan to remain physically active after the conclusion of the program. 86% of participants who completed the program engaged in at least 150 minutes of moderate-intensity physical activity per week which aligns with CDC's physical activity guidelines for adults. Furthermore, 15 participants showed an improvement of at least 1 point in their knowledge of coping skills for anxiety, 16 participants showed an improvement of at least 1 point in their knowledge of coping skills for depression, and 12 participants showed an improvement of at least 1 point in their knowledge of coping skills for perceived stress. Some barriers include participants dropping out of the program, not completing exit interviews, a lack of community awareness about the program, transportation for intake and exit interviews, or other conditions that required a doctor's note to continue.

Lead Contact/Agency: Black Community Collective and Kindred Health Coaching

**Supporting partners**: Northern Nevada Public Health (NNPH), Nevada Urban Indians, Our Center, local churches, and Anthem Blue Cross Blue Shield

**Resources to address the initiative**: Assistance with advertising, marketing, and social media from NNPH's Communications Team, along with incentives for program participants.

# Focus Area 4- Access to Health Care Year 2 Results

Goal(s)	Improve access to health care through e for residents in Washoe County.	establishment of a primary care homes
	Increase insurance enrollment among re	esidents in Washoe County.
Dui a sitta a	Children Uninsured	Adults Insured
Priorities	Annual Checkup Completed	

# **Priority Specific Objectives**

By December 2025, provide three FHFs to underserved communities in Washoe County that will serve a total of at least 400 households Focus Area: Access to Health Care

Goal: 1. Improve access to health care through establishment of a primary care home for residents in Washoe County.

2. Increase insurance enrollment among residents in Washoe County.

**Initiative:** Family Health Festivals (FHFs).

**Priority Population:** Residents in Washoe County

#### 22-25 CHA Indicators:

1. 19.1% Percent of children less than 19 years who are uninsured, Washoe County 2016-2020

- 2. 88.7% Percent of adults aged 18-64 years who have health insurance, Washoe County, Nevada, and United States, 2016-2020
- 3. 69.2% Percent of adults who last visited a doctor for a routine checkup within the past year, Washoe County, 2020

**2023 SMART Objective:** By December 2023, Provide three Family Health Festivals to underserved communities in Washoe County.

**2024 SMART Objective:** By December 2024, provide three FHFs to underserved communities in Washoe County.

**2025 SMART Objective:** By December 2025, provide three FHFs to underserved communities in Washoe County that will serve a total of at least 400 households

_	tion Step	Timeline	Status of Activities	2023 Deliverables	2024 Deliverables	2025 Target Deliverables
1.	Maintain partnerships with healthcare providers and Managed Care Organizations.	1. February 2024-December 2024	Target Acheieved in 2024	1. 3 Family Health Festivals	1. Family Health Festivals	1. Execute 3 Family Health
2.	Implement three FHFs located in zip codes with high Community Needs Index (CNI) scores.	<ul><li>2. February</li><li>2024-December</li><li>2024</li></ul>	Target Acheieved in 2024	executed	executed	Festivals with at least 400 total
3.	Secure financial support to fund FHF events.	3. January 2024- December 2024				households served
4.	Screen 100% of FHF attendees during intake for primary care homes and insurance	4. May 2024- October 2024	Target Acheieved in 2024			
5.	Conduct warm hand offs between triage and primary care homes.	5. May 2024- October 2024	In Progress			
6.	Conduct warm hand-offs between triage and Managed Care Organizations	6. May 2024- October 2024	In Progress			
7.	Maintain partnerships with healthcare providers and Managed Care Organizations.	January 2025- December 2025	NEW in 2025			

8. Create new partnerships with healthcare providers and	January 2025 –	NEW in 2025
managed care organizations.	December 2025	
9. Secure financial support to fund FHF events.	January 2025 –	In Progress
	December 2025	
10. Implement three FHFs located in zip codes with high	January 2025 –	NEW in 2025
Community Needs Index (CNI) scores.	December 2025	
11. Screen 100% of FHF attendees during intake for primary	May 2025-	NEW in 2025
care homes and insurance.	October 2025	
12. Conduct warm hand-offs between triage and primary	May 2025-	NEW in 2025
care homes	October 2025	
13. Conduct warm hand-offs between triage and Managed	May 2025-	NEW in 2025
Care Organizations	October 2025	

**2024 Annual Update:** Conducted three Family Health Festivals in calendar year 2024 in the 89506, 89502 and 89431 zip codes. The festivals were supported by funding acquired from MCO sponsors. The committee expanded participation among partners and fostered collaborations with direct service providers to more opportunities were available for families onsite. Each event achieved an average attendance of 182 households. The FHFs will continue into 2025 with efforts to expand partnerships, secure funds to support events, and better incorporate NNPH Community Health Workers will identify opportunities to connect participants with medical insurance and/or primary care homes.

**Lead Agency(s):** The Family Health Festival Committee is an interagency group that plans and executes all FHF-related functions. The committee is comprised of individuals from: Northern Nevada Public Health (leads the FHF committee), Community Health Alliance, Community Services Agency, Food Bank of Northern Nevada, Molina Healthcare, Renown Health, United Healthcare – Health Plan of Nevada Medicaid, United Way of Northern Nevada and the Sierra, Washoe County School District Family Resource Centers **Supporting partners**: Family Health Festival tabling event vendors/community partners, FHF venue location partners (schools, community centers, etc.)

**Resources to address the initiative**: Funds provided by events sponsors (MCOs, corporate donors), site locations for each event, volunteer/staff support, targeted outreach, incentives for participation provided to event attendees

# Acknowledgements

#### **Community Health Improvement Plan Authors**

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Review and Support

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Falisa Hilliard- Program Assistant

#### **CHIP Steering Committee**

Northern Nevada Public Health would like to thank the CHIP Steering Committee and partners for their involvement and participation in the community health improvement process. Your time and efforts are greatly appreciated as we move forward to improve the health and well-being of Washoe County residents.

LaNesha Battle - Washoe County School District

April Cruda - Department of Health and Human Services - Office of Minority Health and Equity

Megan Comlossy - Center for Public Health Excellence, UNR School of Public Health

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Rae McElroy - Economic Development Authority of Western Nevada (EDAWN)

Chasity Martinez - Faith in Action

Kylie Rowe - Truckee Meadows Tomorrow

Godwin Nwando - Department of Health and Human Services, Division of Public and Behavioral Health

Sean Savoy - Community Representative

Ann Silver - Reno Sparks Chamber of Commerce

Angie Wilson - Reno Sparks Indian Colony, Tribal Health Center

Annie Zucker - Children's Cabinet

#### Community Partners (not a comprehensive list of all agencies participating in an initiative)

A Life More Sacred
Access to Healthcare
Aging and Disability-APS
Alzheimer Association
Anthem Blue Cross

Asian Community Development Council

BodyWise Bristlecone CASAT

Catholic Charities of Northern Nevada Chronic Disease Prevention and Health

Promotion- Division of Public and Behavioral Health

Communities In School of Western NV Community Health Alliance of Nevada

Community Services Agency

Department of Health and Human Services

**Desert Farming Initiative** 

Economic Development Authority of Western

Nevada (EDAWN) Eddy House

Faith In Action-Nevada

Family Resource Center-WCSD Food Bank of Norther Nevada

Grace Church Reno Health Plan of Nevada High Sierra AHEC

Larson Institute for Health, Equity, and Impact, UNR

Latino Research Center (UNR)

Liberty Dental Molina Healthcare

Nevada Council for the Blind

Nevada Division of Public and Behavioral Health

Nevada Medicaid

Northern Nevada Adult Mental Health Services

Northern Nevada HOPES

Northern Nevada International Center

Northern Nevada Public Health

Office of US Senator Catherine Cortez Masto Office

of US Senator Jacky Rose

Our Center

Our Story, Inc.

Quest Counseling and Consulting

Regional Transportation Commission

Reno Housing Authority

Reno Sparks Indian Colony

Reno Sparks Tribal Health Center

Reno-Sparks NAACP Health Committee

Renown Health

Renown-NICE, NALA Rise Academy-WCSD

Sanford Center for Aging (UNR) Sierra Junior Tennis Association Silver Summit Health Plan

Soulful Seeds

Sparks Parks and Recreation (UNR Fitness &

Recreation Sports)
Summit Lake Tribe

Sawabe Muhano (Native Wellness Center)

SoulSpa

The Children's Cabinet
The Life Change Center

Tribal Minds

Truckee Meadows Parks Foundation

Truckee Meadows Regional Planning Agency Truckee Meadows Community College

United Healthcare

United Way Northern Nevada and the Sierras UNR, Nevada Center for Excellence in Disabilities

UNR, School of Medicine UNR, School of Public Health

Veterans Guest House

Washoe County Human Services Agency

Washoe County Juvenile Services Washoe County Manager's Office Washoe County School District

# **Appendix One: Acronyms**

BRFSS	Behavior Risk Factor Surveillance System
CDC	Centers for Disease Control
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
FBNN	Food Bank of Northern Nevada
UNR	University of Nevada Reno
NNPH	Northern Nevada Public Health
WCSD	Washoe County School District
YRBS	Youth Risk Behavior Survey