

With respect to Strategy 1.

Objective 1.1: Develop a strategic plan to strengthen Assertive Community Treatment in Columbia.

This strategy objective results from our Community Resource Scan, which indicates that improving mental health access and coordination is a specific, high priority objective necessary to attain our goal. Assertive Community Treatment (ACT) is an evidence-based approach to improved mental health access, coordination and service delivery. A new ACT program is underway in Columbia through Phoenix Programs, Inc. However, there appears to be significant unmet need and incomplete provider engagement.

Objective 1.2: Document the specific primary health care access needs in Columbia.

This strategy objective results from our Community Resource Scan, which indicates that despite Columbia's extraordinary health resources, barriers to access for primary care continue to exist for some populations. Barriers such as lack of medical insurance appear to result in delayed care and inappropriate emergency care. The new Missouri Health Net Systems has provisions that may ameliorate these conditions, although it remains to be seen how much and to what extent. The Family Health Center is the key community resource addressing this need. More precise information about the scope and dimensions of access problems in Columbia is required.

With respect to Strategy 2.:

Objective 2.1: Reduce the incidence of diabetes in Boone County by expanding the visibility and use of health promoters to foster behavioral changes likely to prevent or delay adult diabetes.

According to the Missouri Department of Health and Senior Services, the highest priority for community health programming in Boone County is the reduction of the incidence of diabetes. Adult onset diabetes is preventable and ought to be amenable to behavior changes fostered by health care promoters.

With respect to Strategy 3.:

This strategy results from our Community Resource Scan, which suggests the need to expand the capacity to communicate health messages using many coordinated multi-media and organizational channels simultaneously. We propose using the diabetes reduction project as the first pilot program of the expanded capacity.