



CHASE & MORRIS COUNTY

COMMUNITY HEALTH IMPROVEMENT PLAN

2025 - 2027

ACKNOWLEDGEMENTS

The Community Health Improvement Plan (CHIP) for Chase and Morris Counties results from collaborative efforts among several community partners. Morris County Health Department spearheaded the process by assembling data sources, gathering a Design Team of community members, contracting facilitation services, and inviting the public to participate. Wichita State University Community Engagement Institute, Center for Public Health Initiatives, provided facilitation and technical support.

CHASE & MORRIS COUNTY CHIP DESIGN TEAM



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Preface

This report describes the CHIP for Chase and Morris Counties, a community-initiated plan to address public health priorities determined through robust community engagement. “The CHIP is the ‘roadmap’ for improving public health system performance, improving population health, and keeping community health planning visible to local decision-makers and communities. It lays out a long-term, strategic effort to address public health issues based on the Community Health Needs Assessment (CHNA) results” ([CHIP Collaborative Handbook](#)). The CHIP should address the full range of strengths, weaknesses, challenges, and opportunities that exist in the community. It should look beyond the actions, responsibilities, and performance of any one agency and instead look at ways many organizations will contribute to the overall health and well-being of the community. The CHIP is an opportunity to move beyond identifying the community's health challenges. This is a chance to look at root causes and design thoughtful, evidence-based approaches to measurably improving community health.

2024 Chase and Morris CHNA

Chase and Morris County residents participated in a Community Health Assessment in 2024 to assess the community's health status. Community input was gathered through a community survey and two community listening sessions. Data about the community from publicly available sources were also compiled. Findings from the 2024 Chase and Morris County Community Health Assessment are documented in a separate report.

2025-2027 Chase and Morris County CHIP

Community Health Improvement Planning

After completing the community health assessment process, stakeholders shifted their focus to developing the CHIP for 2025-2027. This planning process was informed by established health planning frameworks, including the Community Health Improvement Planning Handbook (Kansas Health Institute, 2015) and the Mobilizing for Action through Planning and Partnerships (MAPP) frameworks (2001, 2022).

The Chase and Morris County CHIP Design Team invited community members to participate in two working sessions: the Consensus Workshop on October 8, 2024, and the Action Plan Workshop on October 29, 2024.

Planning Session #1: Consensus Workshop

The goals of the Consensus Workshop were to reach a consensus on three Priority Health Issues, identify 1 to 2 goals for each Priority Health Issue, and have an initial discussion about possible strategies and actions. The meeting was held at the Morris County Hospital on October 8, 2024.

Consensus on CHIP Priorities

Facilitators from WSU CEI summarized the CHA process, including identifying three Priority Health Issues during the CHA process. The CHIP Design Team reached consensus that the CHIP planning effort would focus on the following Priority Health Issues:

- Food and Nutrition
- Youth and Children
- Health Care

Gathering Insights About the Three Priority Health Issues

During the session, participants used the MAPP (Mobilizing for Action through Planning and Partnerships) 1.0 Brainstorming Worksheet to explore the "current situation" for each Priority Health Issue. This activity helped everyone share their knowledge and experiences about the community's Priority Health Issues.

The group gained a clearer picture of the key factors affecting each Priority Health Issue by bringing different perspectives. The discussion helped lay the groundwork for the next steps, including setting goals and strategies to address each Priority Health Issue. The ideas and insights from this brainstorming session will guide future decisions in the CHIP process, ensuring efforts are focused on the most critical needs.

Prioritizing Goals for Each Priority Health Issue

Participants worked individually and as a large group to brainstorm as many goals as possible for each Priority Health Issue. Participants wrote each brainstormed goal on a sticky note. The sticky notes were attached to flip chart pages by Priority Health Issue for the group to see. Sticky notes with similar goals written on them were grouped into themes to identify shared priorities.

Participants then participated in a prioritization activity. Each participant received sticky “voting dots” to place next to the goals they felt were most important. They considered factors like how big of a problem each issue was, how realistic the goal would be to achieve, and the potential impact it could have. Two goals were selected for each Health Priority Area.

Discussion About Strategies and Activities

Participants worked together to review and discuss each identified Goal, focusing on partnerships, current efforts, and potential future opportunities. The discussion was held as a large group, allowing everyone to contribute their insights and ideas.

For each Goal, the conversation centered around key questions: How will we know we are making a difference? What partners should be involved? What is happening now? As participants shared their thoughts, key points were recorded on a flip chart to ensure that important ideas were captured.

After discussing each Goal, the group reviewed the key points and summarized the main themes. This helped identify potential strategies for moving forward.

At the end of the session, major themes and areas of consensus were recapped. The group also discussed potential next steps, including actions they would like to take to continue progress on the identified priorities.

Planning Session #2: Action Planning

The goals of the Action Planning Session were to determine objectives, strategies, and action steps for each Goal and to plan for CHIP implementation and monitoring. Participants worked together to refine priorities and outline the next steps to ensure progress. The session built on previous discussions and helped establish a clear path forward for addressing the identified Priority Health Issues. This meeting was held at the first Congregational UCC in Council Grove on October 29, 2024.

Develop Action Plans for Each Priority Health Issue

The Action Planning Workshop began with an overview of key terms and the structured approach for the day. Participants reviewed key definitions using a Kansas Health Institute CHIP Handbook definitions worksheet to ensure a shared understanding of priorities, goals, objectives, intervention strategies, and measures. The session focused on the previously identified Priority Health Issues, each with two goals. The group also reviewed the CHIP Planning Worksheet, an action plan template developed by facilitation partners at WSU.

Participants engaged in a large group discussion to explore why each issue is a priority, considering available data and community context. From there, they broke into small groups, with each group focusing on one of the two goals within a Priority Health Issue. In these discussions, participants brainstormed and prioritized objectives, strategies, lead partners, and measures for tracking progress. A designated scribe captured notes on the CHIP Planning Worksheet to ensure accurate documentation.

After small group discussions, participants reconvened as a large group to refine their ideas, focusing on measurable objectives and clear and specific strategies. The large group reviewed key points for each Priority Health Issue, ensuring alignment and clarity on the next steps.

Develop a Plan for CHIP Implementation and Monitoring

The session then transitioned to planning for implementation and monitoring. Participants discussed how often to check in on progress, whether additional action teams were needed, and how updates would be shared among partners. A successful plan was defined as having a clear lead for each strategy, a coordinator to track the overall progress of the CHIP Action Plan, and a regular schedule for updates to the community and CHIP partners, ideally quarterly.

Next Steps Following Action Planning Session

The next steps following the action planning session were focused on finalizing and refining the CHIP Action Plan. Staff from WSU CEI compiled notes from the session and sent a draft of the CHIP Action Plan to Jamie Johnson at the Morris County Health Department. Jamie then worked with meeting participants and other stakeholders throughout November and December 2024 to finalize objectives, strategies, lead partners, and measures. During this process, WSU CEI staff supported Jamie via Zoom meetings and email as needed. In January 2025, WSU CEI delivered a draft CHIP report, with a final report completed in February 2025 after the CHIP design team had the opportunity to review and provide input.

Attachment A: October 8, 2024, Consensus Workshop Discussion Notes – Gathering Insights About the Three Priority Health Issues

Discussion Notes

Priority Health Issue: Food and Nutrition

Current work	<ul style="list-style-type: none"> • Care and share • KSRE education • Commodities boxes • SNAP Education • C4 Food Pantry • Back Pack Programs • No barrier (\$) • Summer Food Program at Schools (Morris only, not Chase)
Resources	<ul style="list-style-type: none"> • Food Pantries • Farmers Market (Morris only, Not Chase) • Home gardeners sharing at pantries • Good local grocer in Morris • WIC
Who's is it?	<ul style="list-style-type: none"> • Baptist church Community meals • KSRE • Hospital Foundation • Becky Local Food
Barriers	<ul style="list-style-type: none"> • Concerns about low-quality summer food program • Limited hours at food pantries • No grocery store in Chase County (DG and Casey's positive) • Getting people to come to healthy food training • Stigma – parents not signing kids up for F/R lunch or WIC • Knowing which resources are available and how they work • Struggle sustaining farmers markets • Transportation

Priority Health Issue: Medical Care

Current work	<ul style="list-style-type: none"> • Rural health clinics • Provider recruitment activities • Self-pay sliding fee schedule • Hospital working on convenient evening and weekend care • Specialists, OT/PT • Outpatient skilled nursing
Resources	<ul style="list-style-type: none"> • Crosswinds expansion – space and staff • Health fairs • Pharmacy access

	<ul style="list-style-type: none"> • Dentist in Morris but not in Chase • LHD services • KSRE Medicare sign-up support • KSRE Resource connectors
Who's is it?	<ul style="list-style-type: none"> • Hospital • Crosswinds • Pharmacy • MHIT Grant – School-based mental health services • School counselors and nurses
Barriers	<ul style="list-style-type: none"> • Access • Complexity of payment systems • Stigma • LHD limited services and staff • Long waits for appointments • Confidentiality • Complexity of communication and education • Access and payment • Transportation

Priority Health Issue: Issues related to youth and children

Note: Participants narrowed the focus to Child Care, Mental Health Services, and Activities.

Current work	<ul style="list-style-type: none"> • White City Co-Op for child care – little husky • Building blocks? • After-school care @ schools • Summer school
Resources	<ul style="list-style-type: none"> • Grants for \$ to cover parents \$ for child care • Crosswinds summer groups working closely with schools to deliver mental health services – MHIT\$
Who's is it?	<ul style="list-style-type: none"> • Kansas State Research and Extension • Libraries (programming for kids) • Schools • Tallgrass Prairie Preserve
Barriers	<ul style="list-style-type: none"> • Child care access, especially for infants • Lack of youth activities • Services for 0-5 – No Parents as Teachers in Chase • Getting appointments for BH/MH kid services • Costs of daycare • Lack of daycare leads to short-staffing

Attachment B: October 8, 2024, Consensus Workshop Discussion Notes – Prioritizing Goals for Each Priority Health Issue

Health Priority: Youth and Children

Increase activities for kids (2 Dots)

- A program that provides more activities for younger kids to engage and interact
- Improve community partnerships to provide more programming for youth
- Safe spaces for at-risk youth
- Activities (non sport)
- Provider summer “camps” or activities that include healthy meals (boys/girls club model)
- After-school program for kids with behavioral problems
- Child/youth provide a summer center for child care in the community
- Summer programs and activities with transportation

Youth mental health (6 Dots)

- Communities in schools
- Mental health
- Parental support outside of TFI or St Francis agencies
- More behavioral health specialists in schools

Community education (5 Dots)

- Community Education
- Increase awareness of programs and services & resources available for youth and children
- offer child care training classes coupled with entrepreneur programming
- Educate the public about childcare needs and build capacity
- Offering parent education and relationship-building

Increase access to child care (7 Dots)

- Expand childcare options for working families
- Child care access
- Facility for child care that takes assistance to low-income families
- Child care
- Increased access to child care

Health Priority: Health Care

Recruit Providers (4 Dots)

- Increase provider availability
- Increase weekend and evening hours
- Strengthen CMV? Care hours
- Getting appointment timely

- More providers
- Increase access to available primary care services for all individuals

Health Access for Income (5 Dots)

- Provide insurance education programs targeting CHIP & KanCare for kids
- Access
- Decrease access to healthcare barriers
- Free screening clinics with blood draws, seasonal shots, medical and first aid kids
- Better and more insurance options
- Sliding fee scales for health care
- Accessibility to care

Mental Health Access (4 Dots)

- Improve transportation to/from appointments and treatment

Transportation (Combined with Mental Health Access)

- Expand access to mental health resources/care building on current local resources
- Mental health access
- Reduce stigma around mental health services
- Transportation to appointments
- Home Health
- Improve transportation to/from appointments and treatment

Community Education (7 Dots)

- Community awareness events (medical and mental including screenings and panels)
- Better community referrals for authorizations can be done
- Health liaison program – employ a CHW for each county
- Education – educate public about available resources
- Help connect – education about nutrition with health issues
- Improve community's perception of the quality of care resources locally
- Increase communication about insurance / help connect with insurance

Health Priority: Food and Nutrition

Education about available resources (1 Dot)

- Educate – resources available
- Improve community partnerships – leverage our ext office resources
- Expand the accessibility of existing local programs like Snap Ed, C4, etc.
- Food Nutrition – increase parents completing forms to allow county to access funds to benefit those w/ food insecurity (free and reduced school lunch application?)

- Increase awareness of programs and support for families
- Assistance w/ applying for TANF
- Free or reduced lunch
- Awareness of how every step action counts to get a positive end result everyone do their part
- SNAP benefits application at clinics assistance and resource sharing

Access to nutritious food (9 Dots)

- Provide resources list to guide people to access
- Access
- Access to healthy foods
- A community box similar to the ones in Manhattan (community food box – like a Little Free Library w/ food)

Educate parents and families on available programs and services (10 Dots)

- Change community perceptions about WIC, school summer food program
- Educate public to services we have to both parents and childcare
- Nutrition education across the lifespan
- Community education – on healthy foods and nutrition and on resources available
- Diet related chronic disease – education including diabetes, heart disease, cancer, etc.
- Resources on how to cook with less and still be nutritious

Leverage local producers (0 Dots)

- True farmers market collaborating as a community
- Local beef growers
- Local farmers market

Promote healthy donations (0 Dots)

- Farm to table or at least food that is edible
- Food pantry nutritional items for kids to take home that don't have options at home
- Need to have around the year access
- Shop healthy mindset
- Food pantry donations drives commodity use

Attachment C: October 8, 2024, Consensus Workshop Discussion Notes – Discussion About Strategies & Activities

Health Priority: Medical Care	
<i>Goal 1: Increase awareness and community education about medical care, healthcare resources, and health and wellness programs.</i>	<i>Goal 2: Increase access to mental health and health care services, including transportation, payment/insurance, available providers, and appointments.</i>
What is happening now? <ul style="list-style-type: none"> • Limited coordination resources • Health Fairs focused on special populations • Reviving CORE Coalition • Medical Education through clinics & hospital • Kansas State Research and Extension (KSRE) • Education Programs 	What is happening now? <ul style="list-style-type: none"> • Recruiting efforts • Lost a provider • Grants to work on mental health/behavioral health • Rural Health Clinics (RHC) • Patient Navigator at Crosswinds
What partners should be involved? <ul style="list-style-type: none"> • Kansas State Research and Extension (KSRE) • Schools • Senior Centers • The Republican • Skilled Nursing Facilities • City Partners • Tallgrass Prairie Preserve How will we know we are making a difference in this area? <ul style="list-style-type: none"> • Need to ID baseline • Increase use, visibility, and awareness of services • More health fairs focused on special populations • Seen on Facebook • Creative outreach models 	What partners should be involved? <ul style="list-style-type: none"> • Crosswinds • Private Clinics • Kansas Hospital Association • RHC • Transportation Providers • Insurance Partners • KanCare • Hospital Board • Kansas State Research and Extension (KSRE) • Community Health Workers • Area Agency on Aging (AAA) • Health Department

Health Priority: Food and Nutrition	
<i>Goal 1: Provide accurate and accessible education materials to parents and families about available programs and services</i>	<i>Goal 2: Increase access to nutritious food across the lifespan</i>
What is happening now? <ul style="list-style-type: none"> • Library Programs • Scouting Programs • Community Events • Kansas State Research and Extension (KSRE) • Story walk & education • 4-H Nutrition Programs 	What is happening now? <ul style="list-style-type: none"> • Pathways Grant (applied) • C-4 • Coalition Restart • Available Programs: SNAP, WIC, Free and Reduced School Lunch • School Farm-to-Table • Grow Gardens
What partners should be involved? <ul style="list-style-type: none"> • K-State • Future Farmers of America (FFA) • Kansas State Research and Extension (KSRE) • Save Farm • Elected officials • Schools • Churches • Library • Senior Centers • Wellness Professionals 	What partners should be involved? <ul style="list-style-type: none"> • Food Pantries • School Food Director • Kansas State Research and Extension (KSRE) • Senior Center Food Directors • Faith-Based • Local Government • Future Farmers of America (FFA) • Health Occupations Students of America (HOSA) • Grow Gardens

Health Priority Youth and Children-Related Issues	
<i>Goal 1: Increase mental/behavioral programs support for parents and kids</i>	<i>Goal 2: Improve access to affordable, quality childcare</i>
What is happening now? <ul style="list-style-type: none"> • Mental Health Intervention Teams (MHIT) • Health Innovations Network of Kansas (HINK) & Sunflower Foundation • Local Child Healthcare Organization - It is a local group (I think it's a 501c3) that helps pay for medical care/items (I know they've paid for kids to get glasses for example) for children. 	What is happening now? <ul style="list-style-type: none"> • Little Huskies • Concerns about Quality • Losing some local childcare providers • Learn about Emporia Crosswinds childcare • Confusing regulations – Food program for childcare questions • Cost challenges • Assistance programs not maximized
What partners should be involved? <ul style="list-style-type: none"> • Neurologist • Crosswinds (Arthalia) • Health Innovations Network of Kansas (HINK) K-State Speech Therapy • Kansas Rural Hospital Association (KRHA) • School District Leadership Teams • Co-Ops (School social worker/psychologists) • No Stone Unturned • Local Child Healthcare Organization (501c3) NAME? 	What partners should be involved? <ul style="list-style-type: none"> • Kansas State Research and Extension (KSRE) - Deb • Little Huskies Daycare Providers • Community Foundations (Philanthropy) • Examples: Loving Arms (Junction City) and Little Apple Douglas (Manhattan) • Kansas Department of Health and Environment • Kansas Health Institute (KHI) Resources • School After School Program • Schools

Attachment D: 2025-2027 Chase and Morris County CHIP Action Plan

Health Priority: Food and Nutrition

Goal 1: Provide accurate and accessible education materials about available programs and services to parents and families.

Goal 1 Outcome Measures:

- Participation in education about food, including cooking classes
- WIC Participation Numbers
- Community Survey Responses

Objective 1: By December 31, 2025, boost the coordination and thoroughness of education resources to support access to local food and nutrition programs for Chase and Morris Counties residents.

Intervention Strategy 1: Compile a current list of food and nutrition resources for the community.	Who will lead or coordinate this strategy? Kansas State Research and Extension
Process Measures <ul style="list-style-type: none">• Number of resources identified• Completion date of the resource list	

Intervention Strategy 2: Share the resources list through a variety of channels and formats.	Who will lead or coordinate this strategy? Kansas State Research and Extension
Process Measures <ul style="list-style-type: none">• Number of distribution points for the resource list• Formats of distribution• Number of distribution points	

Objective 2: By December 31, 2026, increase promotion of Kansas State Research and Extension resources and materials to at least 10 community entities by distributing quarterly informational packets, presenting to at least two community meetings, and sharing resources on social media platforms monthly.

Intervention Strategy 1: Distribute the KSRE nutrition fact sheet monthly at grocery stores and other community sites.	Who will lead or coordinate this strategy? Kansas State Research and Extension
Process Measures <ul style="list-style-type: none">• Number of informational packets provided• Percent increase of community distribution sites• Frequency of resource sharing	

Intervention Strategy 2: Develop an intentional social media presence to engage a broader audience and reduce the stigma surrounding WIC and food access resources.	Who will lead or coordinate this strategy? Kansas State Research and Extension, Morris County Health Department, Health Occupations Students of America (HOSA), and Family and Consumer Sciences (FACS) Students
Process Measures <ul style="list-style-type: none"> • # of TikTok posts • # of Facebook posts 	

Intervention Strategy 3: Collaborate with community partners to feature accurate, stigma-reducing information about WIC and food access resources on their websites and social media accounts.	Who will lead or coordinate this strategy? Live Well Morris County Coalition and C4 Pantry
Process Measures <ul style="list-style-type: none"> • Number of resources/informational posts added to websites • Number of community partner websites/social media accounts engaged 	

Objective 3: By December 31, 2027, increase participation in food access resources: WIC participants from 52 to 57; food pantry household boxes provided in outreach from 394 to 433; SNAP participants from 433 to 476.

Intervention Strategy 1: Distribute the KSRE nutrition fact sheet monthly at grocery stores and other community sites.	Who will lead or coordinate this strategy? Kansas State Research and Extension
Process Measures <ul style="list-style-type: none"> • Number of informational packets provided • Percent increase of community distribution sites • Frequency of resource sharing 	

Intervention Strategy 2: Develop an intentional social media presence to engage a broader audience and reduce the stigma surrounding WIC and food access resources.	Who will lead or coordinate this strategy? Kansas State Research and Extension, Morris County Health Department, Health Occupations Students of America (HOSA), and Family and Consumer Sciences (FACS) Students
Process Measures <ul style="list-style-type: none"> • # of TikTok posts • # of Facebook posts 	

Intervention Strategy 3: Collaborate with community partners to feature accurate, stigma-reducing information about WIC and food access resources on their websites and social media accounts.	Who will lead or coordinate this strategy? Live Well Morris County Coalition and C4 Food Pantry
Process Measures <ul style="list-style-type: none"> • Number of resources/informational posts added to websites • Number of community partner websites/social media accounts engaged 	

Goal 2: Increase access to nutritious food across the lifespan

Goal 2 Outcome Measures:

- More availability of healthy foods at local food pantries
- More availability of healthy foods at local retailers

Objective 1: By September 20, 2026, increase participation in the free and reduced lunch program in Chase County from 39.6% to 50% among eligible students through targeted outreach efforts, including informational sessions for parents, partnership with local schools, and distributing application resources via social media and community centers.

Intervention Strategy 1: Convene school leaders in all districts to learn more; at least 1 per district.	Who will lead or coordinate this strategy? C4 Food Pantry and Glenna Grinstead
Process Measures <ul style="list-style-type: none"> • Number of informational meetings or sessions held • Number of schools involved • School policies in Chase County are changed to require F/R Lunch Applications completed by all as part of BTS enrollment 	

Objective 2: Increase access to healthier options at local food banks

By December 31, 2026, access to healthier food options based on HER guidelines at local food pantries will be increased by 10% from the 2024 baseline.

Intervention Strategy 1: Conduct an assessment of local food pantries regarding healthy eating requirements.	Who will lead or coordinate this strategy? Kansas State Research and Extension
Process Measures <ul style="list-style-type: none"> • # of assessments conducted (1 food pantry in each county - Care and Share and C4 Pantry) • Actions taken because of assessment findings 	

Intervention Strategy 2: Establish a Farm to Pantry task force.	Who will lead or coordinate this strategy? Live Well Morris County and C4 Coalition
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Process Measures

- Recruit targeted partners for the task force
- Pantry participation in the program

Intervention Strategy 3: Implement healthier food drive wish lists.

Who will lead or coordinate this strategy?
Live Well Morris County and C4 Coalition

Process Measures

- Pre and Post Pantry assessments to track # of wish list items collected before and after wish list implementation
- Quantity of healthy foods collected per Healthy Eating Research Nutrition Guidelines.

Intervention Strategy 4: Increase food access through mobile food clinics and food commodity deliveries.

Who will lead or coordinate this strategy?
Live Well Morris County and C4 Coalition

Process Measures

- Include in the Community Resource Guide
- Include in the Food Resource Fact Sheet
- Include clinic and delivery information in social media campaigns

Intervention Strategy 5: Increase access to food through expanded food pantry hours.

Who will lead or coordinate this strategy?
Live Well Morris County and C4 Coalition

Process Measures

- Number of additional hours implemented
- Increased number of clients served
- Promotions and awareness efforts

Health Priority: Youth and Children

Goal 1: Increase mental/behavioral programs support for parents and kids

Goal 1 Outcome Measures:

- # Participants in programs including parenting, Cross Winds summer camp
- # of parental support program participants
- # of MHIT participants

Objective 1: By December 31, 2025, provide support to CrossWinds to support increased hours of available program support from 160 hours per month to 168 hours per month.

Intervention Strategy 1: Collaborate with CrossWinds to identify and address office and space needs.	Who will lead or coordinate this strategy? Crosswinds with support from Morris County Health Department
Process Measures <ul style="list-style-type: none">• Number of possible office spaces identified	

Intervention Strategy 2: Work to raise awareness of CrossWinds Mental Health Organization's services through targeted outreach campaigns, partnerships, and community engagement.	Who will lead or coordinate this strategy? Crosswinds
Process Measures <ul style="list-style-type: none">• Number of outreach campaigns conducted• Number of referrals from partners• Number of joint programs or initiatives (e.g., school-Crosswinds partnerships) Numb	

Intervention Strategy 3: Work with the Morris/Chase County Health Department to support Crosswinds staff and community partners training costs.	Who will lead or coordinate this strategy? Crosswinds with support from Morris County Health Department - Jamie Johnson and Arthalia Weekes
Process Measures <ul style="list-style-type: none">• Number of trainings provided• Number of people trained	

Objective 2: By September 30, 2025, participation in the MHIT program will increase by 15%. (# of participants = 15% increase)

Intervention Strategy 1: Facilitate group sessions with key community organizational partners to engage them in the program's goals and objectives.	Who will lead or coordinate this strategy? Crosswinds with help from the School Counselors
Process Measures <ul style="list-style-type: none"> • Number of sessions held • Number of participants attending sessions 	

Intervention Strategy 2: Educate parents about the impact of mental health on physical health.	Who will lead or coordinate this strategy? Crosswinds Marketing Team with support from Morris County Health Department, Clinic/Hospital, and schools
Process Measures <ul style="list-style-type: none"> • Number of trainings provided • Content distribution (think # of posts, educational handouts printed and passed out, etc.) 	

Goal 2: Improve access to affordable, quality childcare

Goal 2 Outcome Measures:

- # of needed childcare spots
- # of FTEs for childcare
- Increased funding at the community level designated to support childcare

Objective 1: By December 31, 2025, increase community-level funding to support childcare through targeted fundraising efforts, partnerships with local businesses, and community awareness campaigns.

Intervention Strategy 1: Convene a childcare summit within the coalitions.	Who will lead or coordinate this strategy? Live Well Morris County and C4 Coalition
Process Measures <ul style="list-style-type: none"> • # of entities involved (business/chamber, employers, social services, faith communities, other) • # of meetings held 	

Intervention Strategy 2: Apply/obtain grants for centers and home daycare infrastructure.	Who will lead or coordinate this strategy? Childcare Summit Committee, in partner with the Council Grove Community Foundation
Process Measures <ul style="list-style-type: none"> • Number of applications submitted • Dollars generated 	
Intervention Strategy 3: Apply for grant funding to offer scholarships.	Who will lead or coordinate this strategy? Childcare Summit Committee, in partner with the Council Grove Community Foundation
Process Measures <ul style="list-style-type: none"> • Number of applications submitted • Dollars generated 	
Intervention Strategy 4: Create a fund for childcare.	Who will lead or coordinate this strategy? Childcare Summit Committee, in partnership with the Council Grove Area Foundation
Process Measures <ul style="list-style-type: none"> • Engagement with Amy Honor at CGAF • Public awareness campaigns conducted 	

Health Priority: Health Care

Goal 1: Increase awareness and community education about medical care resources and health and wellness programs.

Goal 1 Outcome Measures:

- Community Survey Responses

Objective 1: Increase community participation in local health fairs by 10% by having specialized health fairs by December 31, 2027.

Intervention Strategy 1: Plan and implement at least two health fairs for vulnerable populations in the community annually.	Who will lead or coordinate this strategy? Morris County Hospital (Stacy) with Community Partner Support
Process Measures <ul style="list-style-type: none">• Marketing and outreach materials created/shared• # of health fair partners contacted	

Objective 2: Increase the number of community partners actively supporting the CHIP plan and moving its priorities and goals forward

By December 31, 2025, increase the number of community partners actively supporting the CHIP and moving its priorities and goals forward from 6 community partners to 10.

Intervention Strategy 1: Create a robust CORE Coalition, now named Live Well Morris County.	Who will lead or coordinate this strategy? Live Well Morris County Leadership Team
Process Measures <ul style="list-style-type: none">• Completed Bylaws• Meeting attendance• Number of meetings held• Number of organizations invited	

Objective 3: Increase awareness about community health programs and resources.

By December 31, 2027, 30% of community residents contacted know where to access a list of community resources (such as available healthcare, mental health, and community health programs and services).

Intervention Strategy 1: Compile a list of community resources.	Who will lead or coordinate this strategy? Morris County Hospital and Morris County Hospital with Live Well Morris County Coalition
Process Measures <ul style="list-style-type: none">• Completed list of resources (Community Resource Guide).	

- Increase the number of community health partners contributing to the resources list.
- Stakeholder survey findings.

Intervention Strategy 2: Increase accessibility to the newly created Community Resource Guide.	Who will lead or coordinate this strategy? Morris County Health Department and Morris County Hospital with Live Well Morris County Coalition
Process Measures <ul style="list-style-type: none"> • Number of placements on websites/postings on social media 	

Goal 2: Increase access to mental health and health care services, including transportation, payment/insurance, available providers, and appointments.

Goal 2 Outcome Measures:

- Percent no access to care (See CHA)
- Length of time to visit (from date called for appointment to date of appointment)

Objective 1: Increase the number of PCPs (including mental health) FTE from 5.2 to 7 by December 2027.

Intervention Strategy 1: Strengthening the recruitment and retention of healthcare providers in the community by engaging consultants to assist in identifying gaps in provider availability, developing targeted recruitment strategies, and improving retention efforts.	Who will lead or coordinate this strategy? Morris County Hospital - Kevin Leeper
Process Measures <ul style="list-style-type: none"> • Number of meetings with consultants • Number of providers contacted/recruited • Number of applicants 	

Intervention Strategy 2: Establish strategic partnerships with local and regional universities to facilitate clinical rotations for healthcare students. Explore apprenticeship with KHA.	Who will lead or coordinate this strategy? Morris County hospital - Sara Roberts and Kevin Kepley
Process Measures <ul style="list-style-type: none"> • Number of partnerships established (MOUs) • Number of students placed in clinical rotations • Types of disciplines represented • mb 	

Objective 2: Increase access to primary care services (including mental health services) by 8% from the baseline 2024 number of visits by December 2027.

Intervention Strategy 1: Explore non-traditional hours on evenings and weekends.	Who will lead or coordinate this strategy? Kevin Leeper
Process Measures <ul style="list-style-type: none"> • Number of hours available 	

Intervention Strategy 2: Explore telehealth and regional provider sharing.	Who will lead or coordinate this strategy? Sara Roberts and Kevin Kepley
Process Measures <ul style="list-style-type: none"> • # of telehealth visits 	