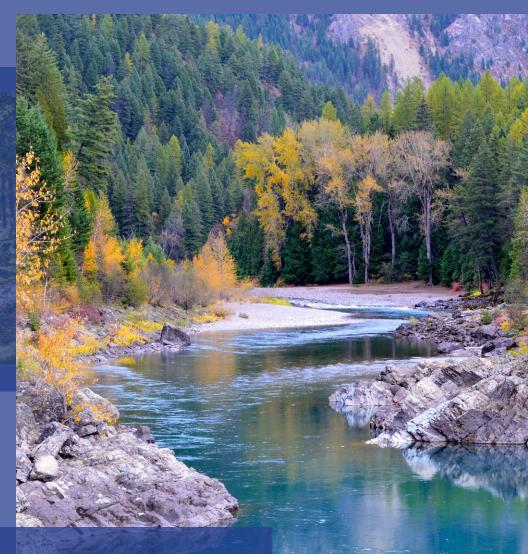
Lewis and Clark County

2022

# Community Health Improvement Plan





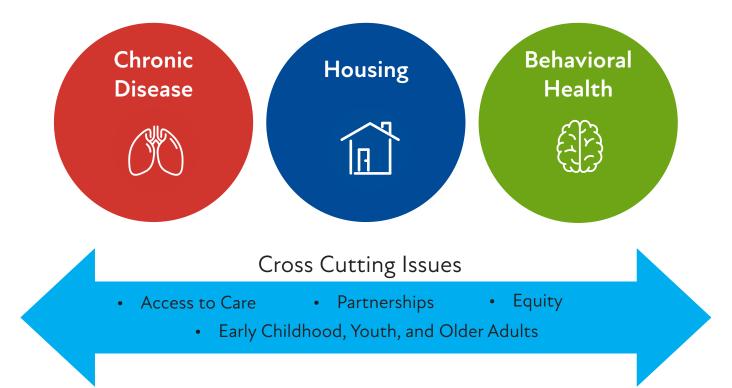




# Community Health Improvement Plan 2022

In the spring of 2022, Lewis and Clark Public Health and Healthy Together convened a group of stakeholders to create our community's fourth Community Health Improvement Plan (CHIP). The plan outlines strategies to improve the health of all county residents over the next three years.

For the purposes of planning, Healthy Together leadership selected three priority areas based on the results of the Community Health Assessment: 1) Chronic Disease 2) Behavioral Health and 3) Housing. The leadership team also selected a number cross cutting issues that impact all priority areas. These include health equity, access to care and services, partnerships, and lifespan concerns for children in early childhood, youth and older adults. Within each priority area, the plan outlines targeted strategies designed to improve the health of all county residents, with a focus on increasing partnerships, access and equity while considering evidence based supports for all county residents across the lifespan.



Healthy Together believes that implementing these strategies will help us achieve our vision for a healthy community.

We envision a healthy community where every person is safe, connected, and engaged and has the resources they need to reach their full potential.

## The CHIP Process

The CHIP process was led by Healthy Together, a community partnership dedicated to improving the health of all residents of Lewis and Clark County by working together to focus energy and resources. Healthy Together was founded in October 2017 by leaders from Lewis and Clark Public Health, PureView Health Center, Rocky Mountain Development Council, St. Peter's Health, and United Way of the Lewis and Clark Area. These individuals serve as the Healthy Together Steering Committee.



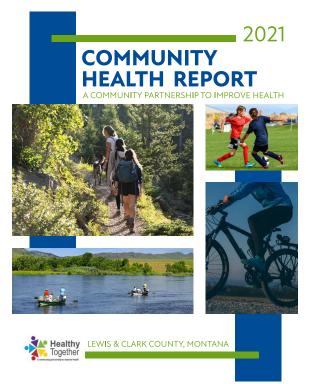
# The Healthy Together Steering Committee

Lori Ladas Executive Director: Rocky Mountain Development Council, Inc. **Amy Emmert** Senior Director of Population Health: St. Peter's Health Haylie Wisemiller Population Health and Community Education Specialist: St. Peter's Health Emily McVey Executive Director: United Way of the Lewis and Clark Area **Jill Steeley** CEO: PureView Health Center Drenda Niemann Health Director/Health Officer: Lewis and Clark Public Health Jolene Jennings Behavioral Health Systems Improvement Specialist: Lewis and Clark Public Health Dorota Carpenedo COVID-19 Epidemiologist: Lewis and Clark Public Health **Damian Boudreau** Communications Specialist: Lewis and Clark Public Health

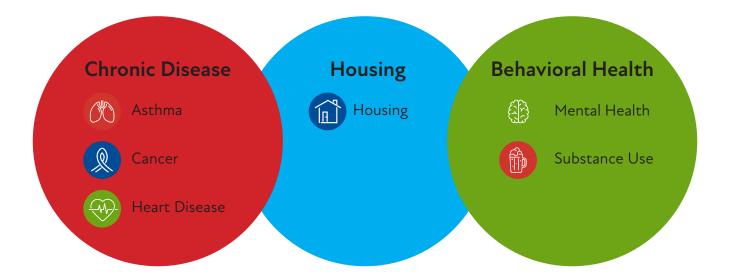
# The Community Health Report (CHR)

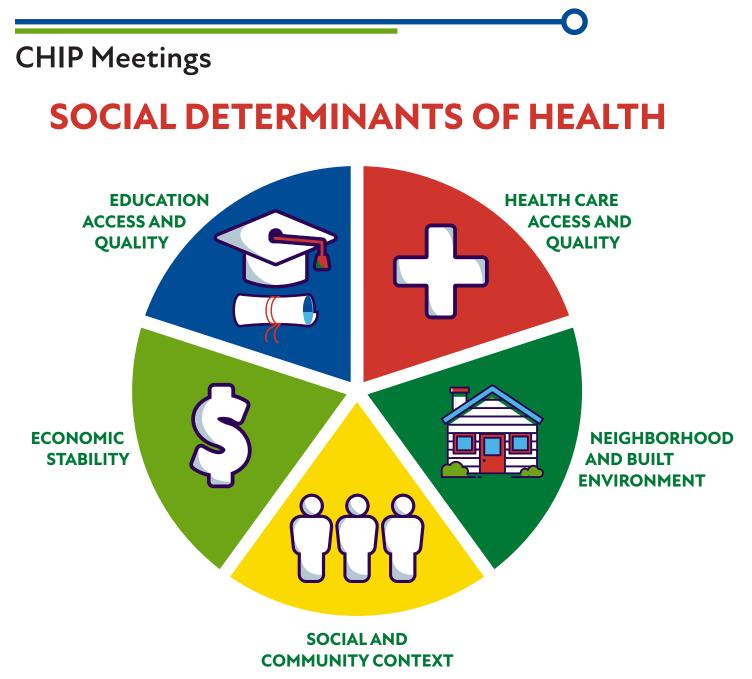
The CHIP process relies on data to inform which priority areas and strategies are selected. In late 2021, Lewis and Clark Public Health and Heathy Together partners released the fourth Community Health Report for Lewis and Clark County. The report provides a snapshot of our community on various health conditions, health behaviors, systems, and social determinants of health. Since 2011, Lewis and Clark Public Health has partnered with St. Peter's Health to produce this community health report which includes all available population level primary and secondary data to describe the health of our community. The CHR identified 6 key areas of highest concern for health in our community: asthma, cancer, heart disease, housing, mental health and substance use.

Based on this data, the Healthy Together steering committee proposed three areas of focus for the 2022 Community Health Improvement Plan.



## **Priority Areas of Highest Concern**





Data Source: U.S. Department of Health and Human Services

To develop this plan, the Healthy Together steering committee convened three virtual meetings in the spring of 2022 with health partners from a variety of sectors to create the Community Health Improvement Plan. Stakeholders used the CHR data, research on best practices and their own expertise to select key strategies for improving health in our three key areas for action. Participants were also instructed to consider the social determinants of health when considering priorities for collective action.

### Participants

- A.C. Rothenbuecher, Community Health Promotion Division Administrator, LCPH
- Andy Hunthausen, Lewis and Clark County Commission
- Ben McGaugh, Project Manager, PureView Health Center
- Brandi Thomas, Provider Services Supervisor, Child Care Connections
- Bray Holmes, Zero to Five Community Coordinator, St. Peters Health
- Brett Lloyd, PHEP Coordinator, LCPH
- Bruce Tyler, St. Peter's Health
- Cassie Drynan, Rocky Head Start and Senior Nutrition and Kids Nutrition Coalition
- Chloe Lundquist, SNAP-Ed Instructor, MSU Extension
- Damian Boudreau, Communications Specialist, LCPH
- Dawn Sullivan, Admin Asst II, LCPH
- Donna Breitbart, Director of Marketing & Communication, Helena College
- Dorota Carpenedo, Epidemiologist, LCPH
- Drenda Niemann, Health Officer, LCPH
- Emily Burton, RN Account Manager, Mountain-Pacific Quality Health
- Emily McVey, Executive Director, United Way of the Lewis and Clark Area
- Gina Boesdorfer, Executive Director, The Friendship Center
- Haylie Wisemiller, Population Health & Community Education Specialist, St. Peter's Health
- Heather Hundtoft, Clinical Director of Addiction Services, Boyd Andrew Community Services
- Jackie Girard, HUD
- Jake Henderson, AWARE
- Jeannie Ferriss, Library Director, Whitehall Community Library
- Jeff Buscher, Community Impact Coordinator, United Way of Lewis & Clark Area
- Jennifer McBroom, Water Quality Protection District, LCPH
- Jennifer Whitfield, LCPC, Chief Clinical Officer, Center for Mental Health
- Jess Hegstrom, Suicide Prevention Coordinator, LCPH
- Jill Steeley, CEO, PureView Health Center
- Jolene Helgerson, LCPH
- Jolene Jennings, Behavioral Health Systems Improvement Specialist
- Julie Bir, CONNECT Referral and Systems Improvement Specialist, LCPH
- Kara Snyder, Housing Coordinator, City of Helena
- Kathy Marks, Operations Director, Rocky Mountain Development Council, Inc.
- Kathy Moore, Environmental Division Administrator, LCPH
- Kayla Morris, Supervisor of Community Based Services- St. Peter's Health
- Kellie McBride, Department of Criminal Justice Services, Lewis and Clark County
- Kim Dale, Program Operations Director, Helena Food Share
- Kim Lloyd, Harvest of the Month Community Coordinator, St. Peter's Health
- Kristie Whitaker, LCPH
- Laurel Riek, Disease Control and Prevention Administrator, LCPH
- Lisa Lee, Director, Montana No Kid Hungry & Lead of the Kids Nutrition Coalition
- Lisa Troyer, Health Promotion and Wellness Manager, Pacific Source
- Lois Fitzpatrick, Advocate Emeritus, American Cancer Society Cancer Action Network
- Mary Sparks, Home Visiting Supervisor, LCPH
- Melissa Baker, Cancer Screening, Lewis and Clark Public Health
- Mindy Diehl, Senior Nutrition and Transportation Director, Rocky Mountain Development Council
- Nancy Andersen, Outreach Director, AARP Montana
- Nik Griffith, Strategy Manager, PureView Health Center
- Patty Kosednar, Account Manager, Mountain Pacific Quality Health
- Paula Wright, COO, PureView Health Center
- Rebecca Hargis, Chair, Elevate Montana Helena Affiliate
- Ron Wiens, Director of Business Development, Shodair Children's Hospital
- Sandy Bauman, Dean/CEO, Helena College
- Sarah Elliott, Director of Complex Care, St. Peter's Health
- Sarah Sandau, Prevention Programs Supervisor, LCPH
- Shari Hagengruber, Community Relations Coordinator, St. Peter's Health
- Sydney Blair, CEO, Center for Mental Health
- Taylore Dinsdale, Tobacco Prevention Health Educator, LCPH
- Theresa Ortega, Executive Director, Good Samaritan Ministries

# 2022 Lewis and Clark County CHIP

#### What is Health?

Health is an all-encompassing state of well-being in mind, body, and spirit that characterizes thriving individuals, families, and communities.

#### **Our Vision for a Healthy Community**

We envision a healthy community where every person is safe, connected, and engaged and has the resources they need to reach their full potential.

## **CHIP - Priorities Within Focus Areas**

Chronic Disease	Housing	Behavioral Health
Nutrition	Continuum of housing supports	Prevention
Physical activity	Permanent supportive housing	Treatment
Partnerships,	Partnerships,	Partnerships,
funding and	funding and	funding and
capacity	capacity	capacity

# Priority Area | Chronic Disease

#### Chronic diseases assets and resources in Lewis and Clark County

As part of the CHIP process, participants were asked to create a map of the assets and resources that currently exist to address chronic disease in our county utilizing the CDC's four domains of chronic disease prevention framework.<sup>1</sup>

#### CDC's Four Domains of Chronic Disease Prevention Framework

Data and Surveillance	Environmental Approaches	Community Programs Linked to Clinical Services	Healthcare System Interventions
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The map of the Chronic Disease assets and resources in Lewis and Clark County as of spring 2022 that CHIP participants created is on the following page.

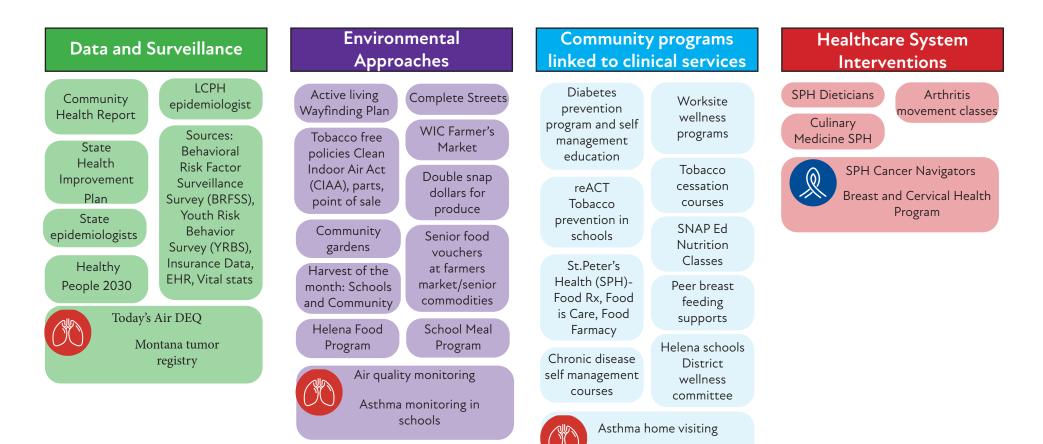
CHIP participants also mapped the crosscutting lifespan services that exist for addressing chronic disease in Lewis and Clark county. These included:

Cross Cutting Lifespan Services for Chronic Disease					
Coalitions and Partnerships	Early Childhood and Families	Youth	Older Adults	Equity	Access to Care and Services
<ul> <li>Healthy communities coalition</li> <li>Non- motorized Travel Advisory Council (NMTAC)</li> <li>Harvest of the month</li> </ul>	<ul> <li>Early childhood coalition</li> <li>Kids Nutrition Coalition</li> <li>Elevate MT-Helena Affiliate</li> </ul>	<ul> <li>District wellness committee- Helena School District</li> <li>Youth CONNECTIONS</li> </ul>	• Aging well workgroup	• No services identified	<ul> <li>Health Improvement Coalition</li> </ul>

After the assessment of current assets and resources, participants were asked to identify any gaps in the current system and consider how to improve our response to chronic disease prevention in our community.

Based on this in-depth assessment, which included a review of the chronic disease data in the 2021 Community Health Report (CHR), group members outlined an overarching goal along with metrics and strategies for improving Chronic Disease outcomes in Lewis and Clark County, all of which are outlined on the following pages.

<sup>1</sup>https://www.cdc.gov/chronicdisease/center/nccdphp/how.htm



Health Coaches for Hypertension

## **Chronic Disease Metrics**

Metric 1	Cancer incidence and mortality for female breast and colorectal cancers
Metric Target	Long Term – 3 years
Numerator	Number of people diagnosed with the disease
	Number of people who have died from the disease
Denominator	Number of people
Reporting Type	Age adjusted incidence and mortality rates per 100,000 population
Unit of Analysis	
Data Sources	Montana Central Tumor Registry and the Office of Vital Statistics,
	Montana Department of Public Health and Human Services Centers for Disease Control and Prevention (CDC) and the National
	Cancer Institute (NCI), U.S. Decennial Census
Data Frequency	Annual, based on 3 years of latest available data
Data Notes	Stratify by race, gender, age groups
Metric 2	Asthma hospital admissions and emergency room visits
Metric Target	Long Term – 3 years
Numerator	Number of asthma hospital admissions
	Number of asthma emergency room visits
Denominator	Number of hospital admissions
	Number of emergency room visits
Reporting Type	Age adjusted hospital admissions and emergency department visits rates per 100,000 population
Unit of Analysis	Hospital Stay
Offic Of Analysis	Emergency Department Visit
Data Sources	St. Peter's Health, U.S. Decennial Census
Data Frequency	Annual, based on 3 years of latest available data
Data Notes	Stratify by race, gender, age group
Metric 3	Cardiovascular disease mortality
Metric Target Numerator	Long Term – 3 years Number of people who have died from the disease
Denominator	Number of people
Reporting Type	Age-adjusted mortality rates per 100,000 population
Unit of Analysis	Individuals
Data Sources	National Center for Chronic Disease Prevention and Health Promotion,
	Centers for Disease Control and Prevention.
Data Frequency	Annual, based on 3 years of latest available data
Data Notes	Stratify by race, gender, age group

#### **Overarching Chronic Disease Goal** Design culturally responsive policies, systems and environments in Lewis and Clark County for making the healthy choice the easy choice so that all community members can thrive in a culture that sustains health and prevents chronic disease. **Chronic Disease Focus Area 1** Support the development of a healthy, accessible, and affordable food system. Timeline Strategy Lead **District Wellness Committee** Increase nutrition security for school Kids Nutrition Coalition Ongoing aged kids and families Harvest of the Month Support and expand the partnership for senior meals (for example the commodities program, Meals Aging Well Workgroup Ongoing on Wheels, Congregate Meals, Community Gardens, senior farmers market vouchers, etc.) Increase food knowledge and skills through a campaign or Healthy Communities Coalition strategy grounded in cultural Kids Nutrition Coalition humility and healthy food choices. Environment Health Ongoing Gather feedback in those specific Specialists-Licensed communities, including lived experts Establishments and community food program experts Harvest of the Month Promote the importance of local

• Helena Community Gardens

Ongoing

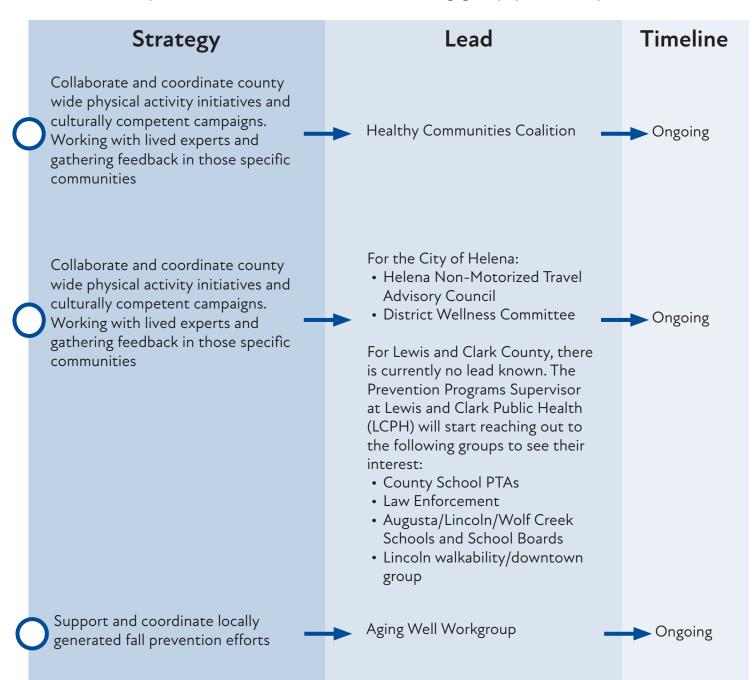
MSU Extensions

foods through new partnerships,

education, and access

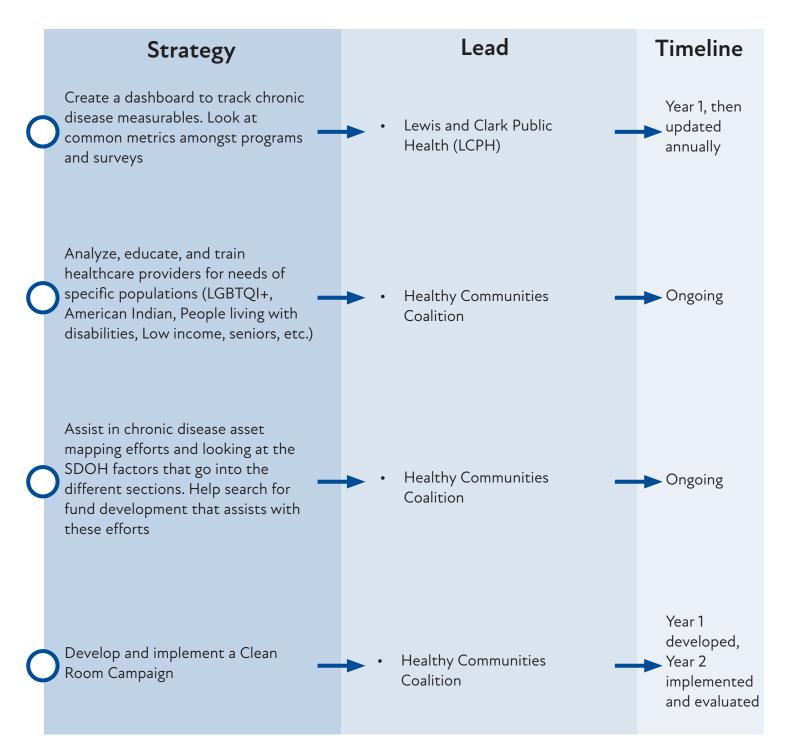
## **Chronic Disease Focus Area 2**

Ensure that every Lewis and Clark resident can access and engage in physical activity.



# **Chronic Disease Focus Area 3**

Support and sustain chronic disease efforts with effective partnerships, evidence based training, and robust data collection and evaluation.



# Priority Area | Behavioral Health

# Behavioral Health Assets and Resources in Lewis and Clark County

As part of the CHIP process, participants were asked to create a map of the assets and resources that currently exist to address behavioral health in our county utilizing a modified version of the Institute of Medicine's Behavioral Health Continuum of Care framework.<sup>2</sup>

Prevention and Awareness	Referrals and Connection to Care	Outpatient Services	Intensive Support Services	Crisis Services	Residential and Inpatient Services	Community Support Services and Recovery Suports
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The map of the behavioral health assets and resources in Lewis and Clark County as of spring 2022 that CHIP participants created is on the following page.

CHIP participants also mapped the crosscutting lifespan services that exist for addressing behavioral health in Lewis and Clark County. These included:

Cross Cutting Lifespan Services					
Coalitions and Partnerships • Suicide prevention coalition • Local Advisory Council • Behavioral Health Systems Leadership Improvement team • Law Enforcement, Mental Health, Emergency Room	<ul> <li>Early Childhood and Families</li> <li>YWCA and YMCA</li> <li>Public schools</li> <li>Childcare Connections</li> </ul>	Youth • Youth Connections • YMCA • Big Brothers, Big Sisters • Shodair	Older Adults <ul> <li>Rocky <ul> <li>Mountain</li> <li>Development</li> <li>Council</li> <li>(RMDC)</li> </ul> </li> <li>AARP</li> </ul>	Equity • LCPH Health Equity Widerstand • Disability Rights MT • Helena Indian Alliance	Access to Care and Services • CONNECT referral system • MT211

After the assessment of current assets and resources, participants were asked to identify any gaps in the current system and consider how to improve our prevention, promotion and treatment of behavioral health concerns in our community.

Based on this in-depth assessment, which included a review of the behavioral health data in the CHR, group members selected the following goals, metrics and strategies for improving behavioral health outcomes in Lewis and Clark County.

<sup>2</sup> https://prevention.nd.gov/files/pdf/parentslead/ContinuumofCareModel.pdf

#### Behavioral Health Services Map | Lewis and Clark County

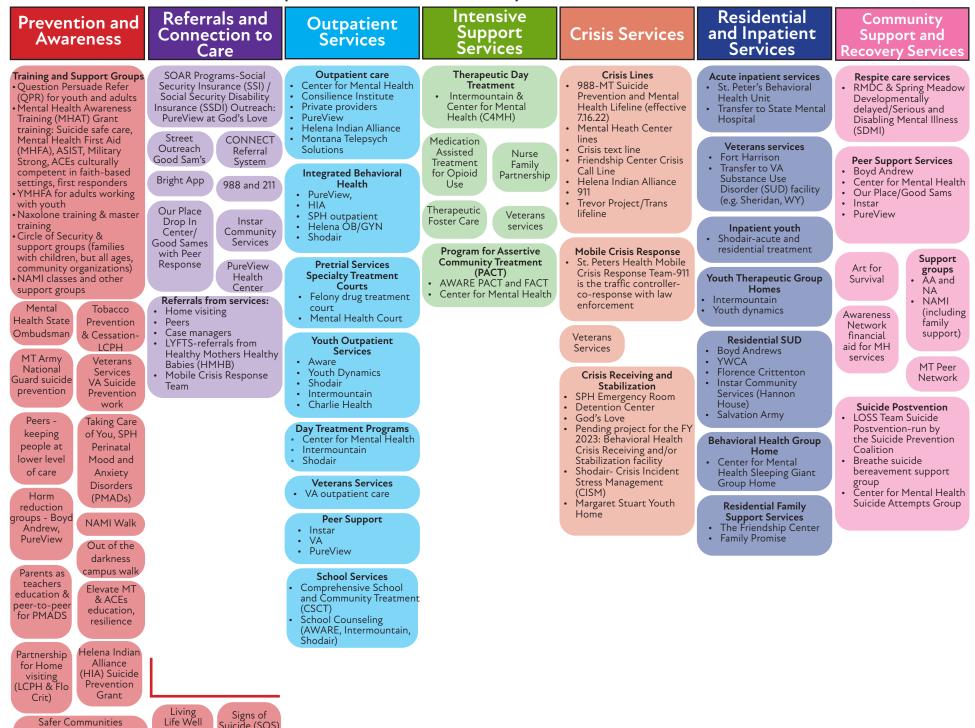
Suicide (SOS)

for students

at all schools

Chronic

Disease



Safer Communities

Montana (SCM) lethal

means campaign

# **Behavioral Health Metrics**

Metric 1	Suicide mortality
Metric Target Numerator Denominator Reporting Type Unit of Analysis Data Sources Data Frequency Data Notes	Long Term – 3 years Number of people who have died by suicide Number of people Age-adjusted mortality rates per 100,000 population Individuals National Center for Health Statistics, Centers for Disease Control and Prevention. Annual, based on 3 years of latest available data Stratify by race, gender, age group
Metric 2	Binge drinking among adults aged 18 years and older
Metric Target Numerator Denominator Reporting Type Unit of Analysis Data Sources Data Frequency Data Notes	Long Term – 3 years Number of adults reporting having 4 (women), 5 (men) or more drinks, within a couple of hours on one or more days in the last month Number of people Percent Individuals by alcohol utilization units Behavioral Risk Factor Surveillance System (BRFSS), Montana Department of Public Health and Human Services Annual, based on 3 years of latest available data Stratify by race, gender, age group
Metric 3	Tobacco use among adults aged 18 years and older
Metric Target Numerator Denominator Reporting Type Unit of Analysis Data Sources Data Frequency Data Notes	Long Term – 3 years Number of adults who are current smokers Number of people Percent Individuals by tobacco use status Behavioral Risk Factor Surveillance System (BRFSS), Montana Department of Public Health and Human Services Annual, based on 3 years of latest available data Stratify by race, gender, age group

Metric 4	Depressive disorders among adolescents and adults aged 18 years and older
Metric Target Numerator	Long Term – 3 years Number adults diagnosed with depressive disorders Number of high school students that felt sad or hopeless almost every day for two weeks or more in a row that stopped doing some usual activity.
Denominator Reporting Type	Number of people Percent Individuals
Unit of Analysis Data Sources	Youth Risk Behavior Survey (YRBS), Office of Public Instruction (OPI) and Behavio Risk Factor Surveillance System (BRFSS), Montana Department of Public Health ar Human Services and CDC
Data Frequency	Annual, based on 3 years of latest available data
,	Every other year
Data Notes	Every other year Stratify by race, gender, age group
	, ,
Data Notes	Stratify by race, gender, age group Marijuana, alcohol, vapor products and any illegal drug use among adolescents a
Data Notes Metric 5	<ul> <li>Stratify by race, gender, age group</li> <li>Marijuana, alcohol, vapor products and any illegal drug use among adolescents a adults aged 18 years and older</li> <li>Long Term – 3 years</li> <li>Number of adults reporting substance use</li> <li>Number of high school students who reported using substance at least once in th</li> </ul>
Data Notes Metric 5 Metric Target	<ul> <li>Stratify by race, gender, age group</li> <li>Marijuana, alcohol, vapor products and any illegal drug use among adolescents a adults aged 18 years and older</li> <li>Long Term – 3 years Number of adults reporting substance use</li> </ul>
Data Notes Metric 5 Metric Target Numerator Denominator Reporting Type	<ul> <li>Stratify by race, gender, age group</li> <li>Marijuana, alcohol, vapor products and any illegal drug use among adolescents a adults aged 18 years and older</li> <li>Long Term – 3 years</li> <li>Number of adults reporting substance use</li> <li>Number of high school students who reported using substance at least once in th past month</li> <li>Number of people</li> <li>Percent</li> </ul>
Data Notes Metric 5 Metric Target Numerator Denominator	<ul> <li>Stratify by race, gender, age group</li> <li>Marijuana, alcohol, vapor products and any illegal drug use among adolescents a adults aged 18 years and older</li> <li>Long Term – 3 years</li> <li>Number of adults reporting substance use</li> <li>Number of high school students who reported using substance at least once in th past month</li> <li>Number of people</li> </ul>

#### Overarching behavioral health goal

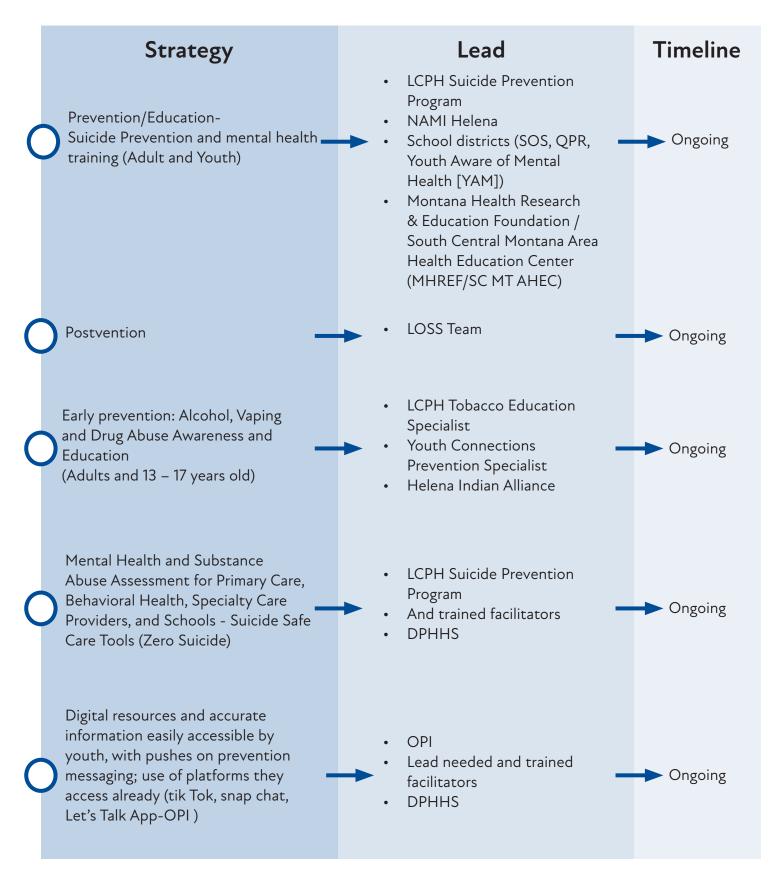
Create an environment in Lewis and Clark County in which the mental wellness of every resident is supported and all are empowered to live free from substance misuse or abuse.



Dr. Abentroth, Surgery, in conversation with patient. Photo from St. Peter's Health.

### Behavioral health focus area 1

Build and sustain a robust and evidence-based mental health promotion and substance use prevention culture.



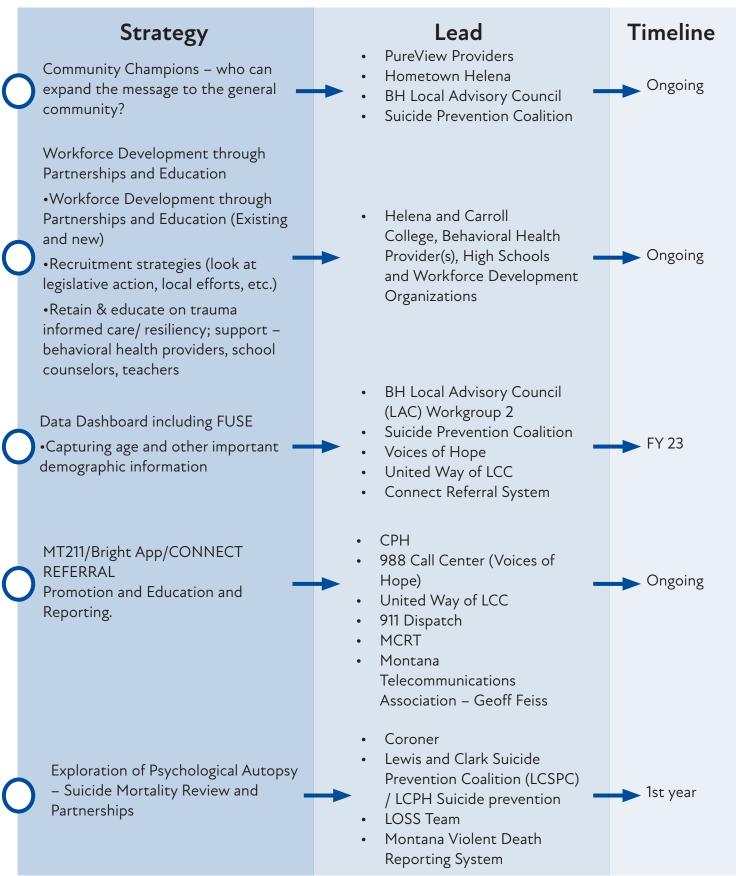
## **Behavioral Health Focus Area 2**

Build and sustain the continuum of behavioral health care across the lifespan.



# **Behavioral Health Focus Area 3**

Support behavioral health efforts through effective partnerships, evidence based training, and robust data collection and evaluation.



# Priority Area | Housing Housing Assets and Resources in Lewis and Clark County

As part of the CHIP process, participants were asked to create a map of the assets and resources that currently exist to address housing concerns in our county across a modified version of the Housing and Urban Development continuum of care.

### Housing Continuum of Care Framework

Prevention	Outreach, Intake and Assessment	0 /	Transitional and Behavioral Health Housing	Affordable and/ or Subsidized Housing
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The map of the housing assets and resources in Lewis and Clark County as of spring 2022 that CHIP participants created is on the following page.

CHIP participants also mapped the crosscutting lifespan services that exist for addressing housing in Lewis and Clark County. These included:

Cross Cutting Lifespan Services					
Coalitions and Partnerships • Coordinated entry • Law enforcement • Frequent Users System Engagement (FUSE)	Childhood and Families • Early Childhood	Youth <ul> <li>Helena</li> <li>School</li> <li>District</li> <li>Youth</li> <li>homes</li> <li>Life houses</li> </ul>	Older Adults <ul> <li>The Guardian Apartments</li> <li>Senior Adult housing</li> </ul>	Equity <ul> <li>Frequent <ul> <li>Users System</li> <li>Engagement <ul> <li>(FUSE)</li> <li>program</li> </ul> </li> <li>Homeless <ul> <li>Management</li> <li>Information</li> <li>System</li> <li>Mapping for</li> <li>Appropriate</li> <li>Placement</li> <li>(HMIS MAP)</li> <li>scores</li> </ul> </li> <li>Clear policies</li> </ul></li></ul>	<ul> <li>Crisis Intervention Team</li> <li>Human Resources Development Council (HRDC)</li> <li>VA for veterans</li> <li>Helena Indian Alliance</li> <li>St. Peters BHU</li> </ul>

Housing Continuum	Lewis and Clark Cou	nty	O	
Prevention	Outreach, Intake and Assessment	Emergency Shelter	Transitional and Behavioral Health Housing	Affordable and/or Subsidized Housing
Eviction Prevention Good Samaratin Ministries (GSM) Housing NavigatorPACT Teams (Center for Mental HealthEviction Moratoriums (Limited)MT ERA Emergency Rental AssistanceSupport for increased low income 	Coordinated Entry System Housed and facilitated by the United Way of the Lewis and Clark Area-Case Conferencing meetings Front Doors for entry into the Coordinated Entry System All locations administer Vulnerability Index-Service prioritization Assistance Toole (VI-SPDAT) and enter clients into the Homeless Information Management System (HIMS). Based on VI-SPDAT scores, clients are placed on the By Name List and prioritized to receive housing supports through the Continuum of Care Coordinated Entry System (CoC CES) Good Sam's Street Outreach Volunteers of America Helena Indian Alliance Street DureView Healthcare for the Homeless and connection to low income	Day Shelter Our Place-drop in center Dvernight Shelter Overnight Shelter God's Love Men, Women and Families The Friendship Center Domestic Violance/ Sexual Assault Extended stay at St. Peters Sleeping in vehicles Day Shelter Behavioral Health-Our Place Peer Support Family Promise Families rotating through churches Veterans Volunteers of America Good Samaritan Ministries Hotel Program (limited) Area camping sites	<ul> <li>Short term Transitional Housing <ul> <li>The Friendship Center on-site program</li> <li>Family Promise</li> <li>Life Houses youth homes</li> </ul> </li> <li>Rapid Rehousing/Rental Support <ul> <li>The Friendship Center rental support grant (10/2022)</li> </ul> </li> <li>Behavioral Health <ul> <li>Transitional Housing</li> </ul> </li> <li>Salvation Army Ground Zero Sober Living</li> <li>YWCA women and children</li> <li>Florence Crittenton</li> <li>INSTAR Hannon House</li> <li>Hope Center for Women</li> <li>Center for Mental Health Sleeping Giant Group Home</li> </ul>	<ul> <li>Helena Housing Authority</li> <li>Public housing vouchers</li> <li>Affordable units</li> <li>Affordable units</li> <li>Affordable housing</li> <li>Red Alder</li> <li>Ironfront Apartments</li> <li>Broadwater Village</li> <li>Rocky</li> <li>Eagle Manor (seniors)</li> <li>Queen City Estates (qualifying disabilities and seniors)</li> <li>The Guardian Apartments (seniors)</li> <li>Rocky, Boulder, Augusta, Townsend</li> <li>Habitat for Humanity</li> <li>Affordable home ownership</li> </ul>

After the assessment of current assets and resources, participants were asked to identify any gaps in the current system and consider how to improve access to safe and secure housing in our county.

#### Housing and Services Gaps Shortage of Issues with Staff Shortage No Detox Supportive Affordable Warm Springs Housing With Housing for Low Services & Moderate Income Folk Barriers in LGBTQ+ Youth Resources for Not enough Lack of Funding & Adults Homeless Youth Government for Nonprofits Application Funding for doing the work Process needed Programs

Based on this in-depth assessment, which included a review of the housing data in the 2021 Community Health Report (CHR), group members outlined an overarching goal along with metrics and strategies for improving access to housing in Lewis and Clark County, all of which are outlined on the following pages.



Family biking: Photo from Pixabay.com

# **Housing Metrics**

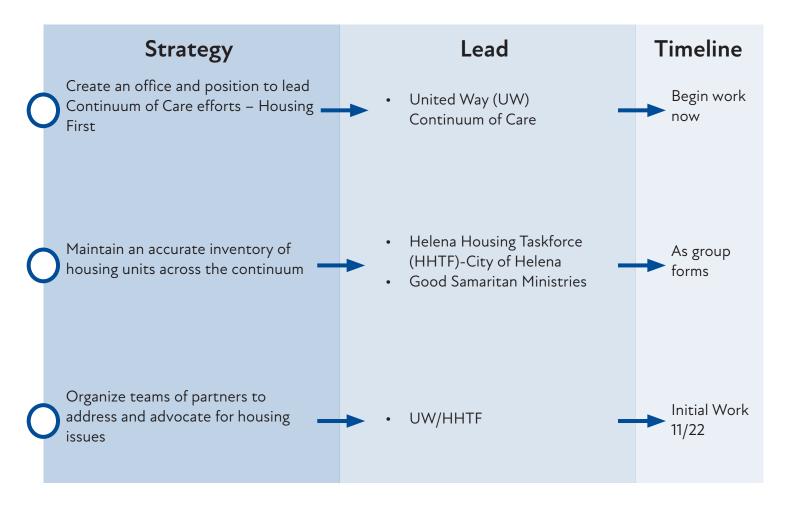
Metric 1	Quality of rental/housing stock-HUD standards, lead free, smoke-free multi- unit housing
Metric Target Numerator Denominator Reporting Type Unit of Analysis Data Sources Data Frequency Data Notes	Long Term – 3 years Number of multi-unit housing with absence of smoke-free policies Number of multi-unit housing with presence of lead hazard Number of multi-unit housing Percent, number Multi-unit housing U.S. Housing and Urban Development (HUD), Montana Tobacco Prevention Program, Program records, Surveys, other sources Annual or latest available data Identify other data sources and develop tracking mechanisms for hazardous exposure. Consider addressing housing properties prior to 1978 for lead-based paint exposure.
Metric 2	Housing ownership continuum (home ownership, displacement, homelessness)
Metric Target Numerator	Long Term – 3 years Number of emergency shelter beds Number of transitional housing units Number of homeless individuals who transition to permanent housing
Denominator Reporting Type	NA Number; Ratio
Unit of Analysis Data Sources	Shelter bed, housing units, ownership status, homelessness U.S. Housing and Urban Development (HUD), U.S Census American Community Survey
Data Frequency Data Notes	Annual or latest available data U.S Census American Community Survey, U.S. Housing and Urban Development HUD), Program records, Surveys, other sources
Metric 3	Household income spent on rent or mortgage
Metric Target Numerator Denominator Reporting Type Unit of Analysis Data Sources Data Frequency Data Notes	Long Term – 3 years Income spent on rent or mortgage Total household income, home cost, home value Percent (spend more than 30% of income on housing) Income, housing cost, home values, U.S Census American Community Survey Annually, 5-year estimates Stratify by race, ownership type, housing type, income level

#### **Overarching Housing Goal**

Provide opportunities for residents of Lewis and Clark County to access to safe and affordable housing.

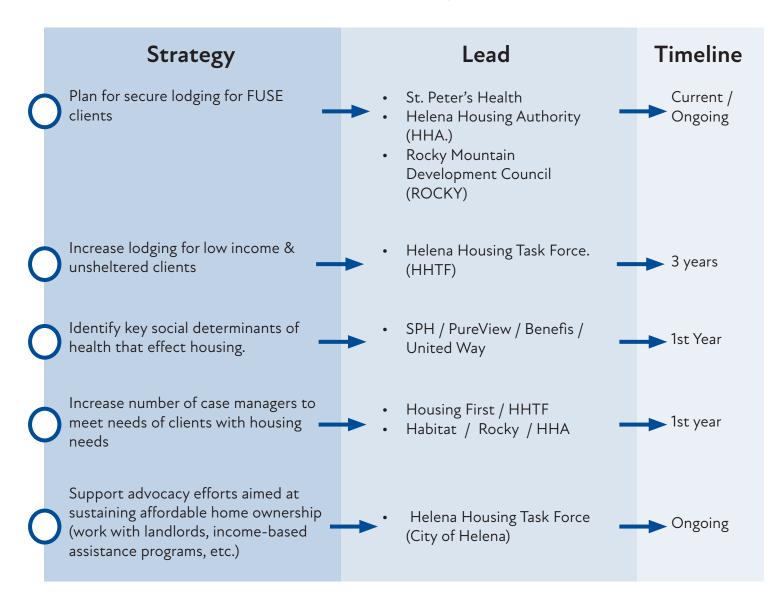
#### **Housing Focus Area 1**

Build a robust, sustainable, continuum of care that has the capacity to offer a variety of housing to persons at-risk of or experiencing homelessness.



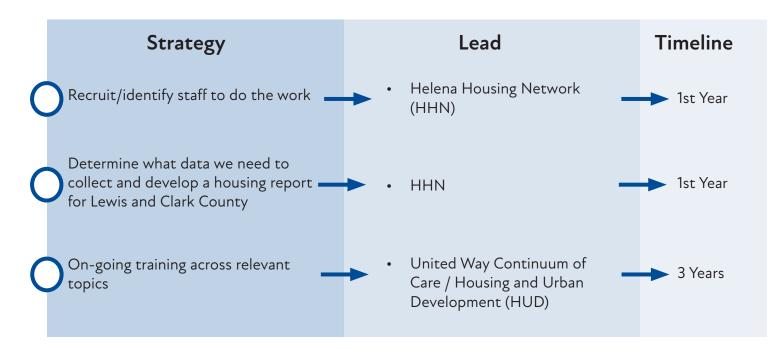
# Housing Focus Area 2

Ensure that unsheltered or at-risk individuals with behavioral health concerns are provided safe housing and the services needed to move toward permanent housing.



#### Housing Focus Area 3

Support all housing efforts through effective partnerships, evidence-based training, and robust data collection and evaluation.





Overlooking portion of Downtown Helena. Photo from Adobe Stock.



A community partnership to improve health, spearheaded by these local organizations









of the Lewis and Clark Area

