

Transformational Impact/Goal	Objectives	Action Steps
<p>Regional Coordination and Communication Strategy to Execute Equity-Centered Agenda for Health and Well-being</p>	<ol style="list-style-type: none"> 1. Reimagine the commission infrastructure, membership, and partnerships for execution of regional health equity agenda for priority populations 2. Champion collaborative solutions within and between healthcare ecosystem sectors that address priority population needs and priorities 3. Apply learnings from existing efforts to develop a sustainable communications framework and strategy 	<ol style="list-style-type: none"> a. Implement an audit and discovery process to identify structure for commission membership and partnership and add new members based on theory of change model b. Explore restructuring opportunities to ensure alignment and coordination with strategic partners c. Coordinate with regional Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) process/infrastructure to identify and elevate regional priorities and solutions d. Develop a mechanism based on the success of current efforts, like Bullet Related Injury Clinic (BRIC) and PrepareSTL, to provide resources and support to pilot and implement collaborative initiatives between and within sectors in the regional healthcare ecosystem e. Build on PrepareSTL efforts to develop a "<i>messaging machine</i>: a process-based apparatus that can quickly take creative ideas and execute them at scale."
<p>Shared Data Reporting Dashboard to Measure Efforts to Achieve Zero Health Disparities and Foster Accountability</p>	<ol style="list-style-type: none"> 1. Simplify data collection and reporting for regional measurement and accountability 2. Maintain a system that reports current disaggregated race data to inform strategy and priority within the targeted universalism framework to address inequities 3. Set and track specific metrics to identify and address chronic disease prevalence in Black and other communities of color 	<ol style="list-style-type: none"> a. Explore current data reporting systems (i.e. ThinkHealth, CIE, etc.) to develop a regional dashboard/scorecard b. Elevate the use and value of qualitative data in strategic planning and communication c. Reimagine Access to Care data collection, analysis and reporting process to speak directly to multiple levels of addressing priority populations d. Research learnings from existing efforts to implement infrastructure to support effective community/individual storytelling as a source of regional data reporting
<p>Community-Driven Policy Change for Health Equity and Well-Being</p>	<ol style="list-style-type: none"> 1. Create and implement a health in all policy-advocacy strategy based on learnings and efforts of current partners 2. Consistently provide relevant and timely qualitative and quantitative data that is clear and actionable to inform community decision-making 	<ol style="list-style-type: none"> a. Coordinate with boards and partners to map existing health policy-advocacy happening for priority populations across the region, state, and national context and identify gaps in existing efforts b. Utilize data systems and feedback mechanisms to translate priority population needs into action items for advocacy agenda c. Create levels of agenda setting and implementation across the ecosystem, region, state, and nation

	<ol style="list-style-type: none"> 3. Facilitate ongoing communication between stakeholders with lived experience from priority communities, decision makers throughout the healthcare ecosystem, and legislative policymakers 4. Build staff and advisory board capacity to educate and engage local, state and federal policymakers 	<ol style="list-style-type: none"> d. Hire health equity centered policy and advocacy staff to advocate for mission-aligned regional priorities in collaboration with strategic partners e. Deepen organizational capacity to partner with legislators to develop and support legislation that advances health equity centered regional priorities.
<p>Increased Access and Choice for Under-resourced Patients</p>	<ol style="list-style-type: none"> 1. Increase access for uninsured and underinsured individuals, including populations ineligible for Medicaid expansion and other coverage options, seeking primary, specialty and behavioral health services 2. Identify and strategically engage cross-sector partners to remove barriers that prevent access and choice (i.e. transportation, ability to pay, housing, etc.) 	<ol style="list-style-type: none"> a. Assist with the transition of eligible patients, including Gateway members, to Medicaid Expansion, and monitor coverage provided through managed care companies b. Utilize learnings from Gateway to Better Health and collaborate with the St. Louis Integrated Health Network (IHN), to expand care transition efforts to include specialty care transitions and address comprehensive care transition efforts c. Explore strategies to improve communications among primary and specialty care providers d. Develop strategies to identify, address, and create accountability for measurable progress toward eliminating social, structural, and political determinants of health e. Convene cross-sector initiatives/workgroups to problem-solve barriers identified by patient, community, and provider stakeholder groups
<p>Improved Workforce Wellness and Capacity to Address Emerging Needs</p>	<ol style="list-style-type: none"> 1. Champion efforts to address trauma informed care, workforce burnout and fatigue 2. Facilitate ongoing data sharing and advocacy to anticipate and address gaps and misalignment in the healthcare ecosystem workforce 3. Monitor and evaluate safety net providers capacity due to the growing demand with the passing of Medicaid Expansion 4. Explore regional collaboration with local institutions to build and sustain workforce pipeline and capacity building, and to pilot centers of excellence that gather, build and disseminate equity-centered best practices, and create funding and opportunity to pilot innovative, capacity building practice 	<ol style="list-style-type: none"> a. Utilize learnings/support/advance efforts [including Alive & Well/MHA Equity-Centered Trauma Informed Care Guidance and IHN Pathway to Health Equity to advance efforts to eliminate the experience of trauma and inequity among healthcare ecosystem workforce] b. Build on the existing work of partners with existing efforts and local universities to share best practices and advocate for workforce adaptations that respond to identified needs and anticipated gaps c. Build on existing relationships and aligned priorities of legislative and university partners d. Utilize table to share best practices, gaps and trends across provider organizations