

2025 Community Health Improvement Progress Report

Mental Health

Strategic Goal: Promote an infrastructure of support for mental health in the community.

First Year Strategies (2025)

Strategy	Lead	2025 Progress Update
Support growth of the Quad Cities Behavioral Health Coalition's membership.	Quad Cities Behavioral Health Coalition Steering Committee	The QC Behavioral Health Coalition conducted an annual review of its membership list in December. Currently, there are over 200 individuals on the contact list. This list will be updated on the coalition's website in the coming months.
Coordinate ongoing community conversations around a referral system for access to care, including mental health services.	Quad Cities Behavioral Health Coalition Steering Committee and Member Organizations; Quad Cities Open Network (QCON)	- QCON secured initial funding for Find Help and IRIS referral systems. The pilot is expected to start next year where community members can refer and integrate with electronic health records. Connections were made with community organizations to reduce duplication. - The QC Behavioral Health Coalition helped facilitate conversations related to raising awareness of current mental health services and resources available in the community.
Actively monitor the development and implementation of the District 7 prevention, inpatient, outpatient, and crisis services plan through Iowa's Behavioral Health Service System Alignment.	Scott County Health Department; Quad Cities Behavioral Health Coalition Member Organizations	- The QC Behavioral Health Coalition had members share updates at quarterly coalition meetings related to the impact of the Behavioral Health Service System Alignment in both IA and IL. - Robert Young Center staff facilitated a series of meetings with local public health staff in the HHS Behavioral Health District 7 area to discuss impacts of the

		Behavioral Health Service System Alignment. • Iowa Primary Care Association (PCA) has established a Behavioral Health District 7 Advisory Council to identify opportunities, address challenges, and advise the Administrative Service Organization on developing policies that improve access to behavioral health services. A local Scott County provider is a member of this council. • New Behavioral Health Navigators with Iowa PCA are trying to identify physical locations to be housed in Scott County. • Local behavioral health partners have shared challenges in the rollout of the new behavioral health system, including delayed payments, weaker service coordination due to new service navigators who are not familiar with local services, and changes to previously funded programs that were supporting local community needs. • Ongoing implementation continues to be monitored. Updates can be found at https://www.iowapca.org/administrative-service-organization.
Promote mental health training and supports for the public, mental health providers, and non-clinical community partners.	Quad Cities Behavioral Health Coalition; Quad Cities Trauma Informed Consortium; Vera French Community Mental Health Center	• The QC Behavioral Health Coalition's Promotions Team hosted quarterly Lunch and Learns in 2025: ○ Beyond the Binary: Fostering Inclusive Care for Transgender and Gender Diverse Individuals

		○ Caregivers Share Their Experiences Supporting a Loved One with Mental Health Challenges and the Resources That Helped Along the Way ○ Adverse Childhood Events (ACEs): Connections with Depression and Anxiety ○ Bridging the Gap: Integrating Mental Health into Perinatal Care ● The QCBHC’s Innovation Team hosted a series of Professional Network sessions, called Gather and Grow sessions, aimed at bringing together new professionals in partner organizations and facilitating learning about a behavioral health topic. In 2025, topics included: ○ Best Practice Client Engagement ○ Crafting Useful and Effective Treatment Plans ○ Trauma-Informed Collaborative Care in Community Mental Health Care ○ Behavioral Approaches for the Dually Diagnosed ○ What It Really Means to Be a Therapist ○ Stress Management Tools for Burnout Prevention A short survey was sent after these sessions to gather feedback and all respondents (34 total) agreed or strongly agreed that they learned more about the
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		host provider and that they learned something educational that was applicable to their work. Nearly all respondents agreed they expanded their professional network and all respondents said they would be interested in attending a future Gather and Grow event. • The Zero Suicide Initiative (ZSI) funding support concluded in July 2025. These efforts included training 1,038 individuals in Question, Persuade, Refer (QPR), which is a suicide prevention training; implementing a 1,003-day suicide prevention campaign; and engaging 56 organizations in implementing or updating suicide prevention protocols and policies. The ZSI also partnered with NAMI to continue the promotion work and training efforts. • The QC Trauma Informed Consortium hosted monthly meetings in 2025 showing the connection between trauma and its impacts in several areas, including child abuse, substance use, attachment styles, and more. The consortium also hosted an Equity Speaker's Bureau Series to broaden the community conversation on environmental and community-based challenges that have created the social context for individual trauma. The consortium also offered Adverse Childhood Experiences (ACEs) trainings to
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		the community in September and November. ○ In total in 2025, the QCTIC provided awareness training to 148 individuals in the QC community and 98% of individuals reported increased awareness. ○ The QCTIC provided educational training to 363 individuals in the QC community and 100% of individuals reported increased knowledge on trauma-informed care practices. Bite-sized training courses are available anytime on the consortium’s website on implementing trauma-informed care in various workplace and community settings. • Vera French Community Mental Health Center hosted a Mental Health for Healthy Living Conference in May 2025 with Dr. Judson Brewer, a psychiatrist and New York Times best-selling author of “Unwinding Anxiety”.
<u>Other Related Updates</u> • The Scott County High Utilizer Review Team is a committee made up of local healthcare providers, first responders, law enforcement, and behavioral health service agencies, who discuss and brainstorm alternative service options for individuals who are high utilizers of these systems. This team is planning for implementation of Assisted Outpatient Treatment (AOT) in Scott County in July 2026. This service consists of supervised community-based treatment for individuals with severe mental health issues. • A subcommittee of the Scott County High Utilizer Group, called the Scott County Mental Health Alliance, completed a cost analysis regarding the costs of 10 community stakeholders to care for 17 of the individuals involved in mental health-related incidents or high		

users of mental health services. This cost analysis led to the creation of a white paper that is being used to propose local programs and legislative solutions to address the mental health needs of the community.

- Efforts to advocate for increasing the number of beds for inpatient mental health care by community partners are continuing as well.

Long-Term Strategies (2025-2027)

Improve and enhance mental health education within the Quad Cities region.

Promote timely and comprehensive access by addressing physical, social, and financial barriers to mental health care.

Indicators

Source	Indicator	Baseline	Target	National Standard	2025 Progress Update
Quad Cities Behavioral Health Coalition Outcomes Team	Number of hospital crisis encounters	8,850 (2024)*	7,000	N/A	TBD
Quad Cities Behavioral Health Coalition Outcomes Team	Number of days for prescriber appointment (adult referral)	19 (2024)*	17	Less than 10 business days	TBD
Quad Cities Behavioral Health Coalition Outcomes Team	Number of days for therapist appointment (adult referral)	3 (2024)*	3	Less than 10 business days	TBD
Quad Cities Behavioral Health Coalition	Number of member organizations	115 member organizations and affiliates	2 or 3 new	N/A	120

*Quad Cities

Access to Healthcare

Strategic Goal: Promote a robust support infrastructure for access to health care in the community.

First Year Strategies (2025)

Strategy	Lead	2025 Progress Update
Coordinate ongoing community conversations to develop a community agenda to address access to health care.	Quad City Health Initiative Executive Committee; Community Health Assessment Steering Committee	• Conversations are ongoing with members of the Quad City Health Initiative Executive Committee to

		determine next steps for creating a community agenda to address access to health care. Potential ideas include developing community messaging to help patients navigate Medicaid changes. The QCHI Executive Committee includes leaders from local health systems and public health. • Community Health Assessment Steering Committee partners shared that there are multiple ongoing initiatives to improve access to care through the health system providers in the area. Services for maternal health and substance use are expanding. Primary care provider availability is still an ongoing issue. • Community Health Assessment Steering Committee partners are monitoring the potential impacts of the federal OBBBA act. • Steering Committee member, Community Health Care, Inc. has been active in engaging community non-profits, individuals, and elected officials regarding the impact through OneTable QC. Other steering committee partners have attended sessions hosted by OneTable QC.
Determine the role of the Access to Care Workgroup in addressing access to health care.	Quad City Health Initiative Executive Committee; Community Health Assessment Steering Committee	• The role of the Access to Care Workgroup is TBD pending decisions made on the focus of the work by the QCHI Executive Committee and CHA Steering Committee partners. Federal

					actions have impacted the discussions regarding next steps.
Long-Term Strategies (2025-2027)					
Develop a community strategy that increases funding, resources, and coverage that supports access to health care.					
Implement formal strategies to address health care access.					
Indicators					
Source	Indicator	Baseline	Target	National Standard	2025 Progress Update
Behavioral Risk Factor Surveillance System	Percentage without health care coverage	4.3% (2023)	4%	N/A	TBD
Behavioral Risk Factor Surveillance System	Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?	Yes: 8.5% No: 91.5% (2023)	6%	N/A	TBD
Access to Care Workgroup	Number of member organizations	30 (2025)	2 or 3 new	N/A	No change.