



**COOK COUNTY
HEALTH**

**Office of
Behavioral Health**

Regional Behavioral Health Strategic Plan for Cook County

2025-2027



COOK COUNTY
HEALTH

Office of
Behavioral Health

Letter From the President



Mental illness knows no bounds, and its impact is far-reaching. About 1 in 5 U.S. adults experienced mental illness in 2021, and nearly 17 percent of youth ages 6-17 have experienced a mental health disorder.

Here in Cook County, I am proud of the investments we have made to support initiatives that increase resources to communities most impacted.

Lifting up organizations that help those dealing with mental illness will have a positive downstream effect on so many facets of our society, including our business, our schools, the justice system, and more.

Our charge going forward as a society is to identify opportunities to improve access and delivery of behavioral health services. Whether it is social stigma, access, or cost that prevent people from getting the care they need, we need to continue to work to break down these hurdles and make care available wherever a person needs it and however they require it.

My hope is that this strategic framework provides all invested parties with the guidance they need to help join us in building a more equitable health system across Cook County. By doing so, we have the opportunity to make Cook County a model for other large municipalities.

We are stronger together as a city, a county, and a nation when we care for those who too often feel or have been left behind. By uniting for the common good, we can make Cook County a healthier place to live, work, and play for all.

Toni Preckwinkle

President, Cook County Board of Commissioners

Letter From the CEO



Over the past year, Cook County Health has been seeking input from our community partners to develop a roadmap for guiding behavioral health decisions and mental health-related investments in Cook County.

The needs before us are vast, as everyone knows. Like much of the country, we have an ever-increasing demand for services across Cook County and a lack of mental health providers. At times it can feel like the problem is too big and too complicated to tackle. Yet, I know that by collaborating with our partners, we can achieve many of the lofty goals set out in this plan.

This strategic plan, led by the Cook County Health Office of Behavioral Health, provides a roadmap for all of us. It is a reflection of the values that our mental health professionals, community leaders, and elected officials have voiced, and serves to guide our response to the unique needs of Cook County residents.

Mental health care is not a one-size-fits-all service, so our strategies must be diverse, thoughtful, and culturally mindful. In order to address the challenges we face, we must work together to remove the silos that have too often impacted the way care has been delivered.

This is a critical point in our county's history as we continue to recover from the COVID-19 pandemic and look to build a more equitable health care network. I hope you will join us on that journey. We truly are stronger together.

A handwritten signature in black ink, reading "Erik Mikaitis". The signature is stylized with a large, sweeping "E" and "M".

Erik Mikaitis, MD, MBA
CEO, Cook County Health

Letter from the Chief Behavioral Health Officer



The urgency of addressing the behavioral health of our nation and of Cook County may never have been greater. Demand for services continues to outpace supply, particularly in disinvested communities. Rates of overdose deaths have more than doubled in the last decade. The behavioral health workforce is inequitably distributed, and many within the field report feeling burned out by the day-to-day frustrations of walking with those we serve through the hurdles and complexities of our systems of care.

Yet, this is also a time of unprecedented opportunity. Awareness of mental health conditions continues to increase across the country and across political lines, and the resolve of the citizens of Cook County to address behavioral health concerns is clear. A strong, unwavering commitment to collaboration across organizations serving those with behavioral health conditions has led to the crafting of this (first ever) Countywide Behavioral Health Strategic Plan.

We are indebted to Cook County Board President Preckwinkle, Cook County Health CEO Dr. Erik Mikaitis, the Cook County Board of Commissioners, and the CCH Board of Directors for the creation of the Office of Behavioral Health and for their leadership and strong support. We also wish to express our deepest gratitude to individuals with lived experience who have shared their voices, insights, and resilience throughout this process. Lastly, thank you to our partners across numerous governmental agencies and hundreds of community-based organizations. Because of you, we strongly believe the pages that follow will serve as a blueprint for impactful collective action—improving the behavioral health landscape for all Cook County residents for years to come.

Thank you and onward we go!

A handwritten signature in black ink, appearing to read "Tom Nutter MD".

Tom Nutter, MD

Chief Behavioral Health Officer
Cook County Health

Executive Summary

Cook County Health Office of Behavioral Health

The Cook County Health Office of Behavioral Health (OBH) was established by the Cook County Board President's Office, the Cook County Board of Commissioners, the Cook County Health Board of Directors, and Cook County Health (CCH) leadership to address the behavioral health needs of all Cook County residents, particularly those from vulnerable populations. Input from community members, providers, family members, and regional and state governments led to the development of this Strategic Plan to establish a comprehensive, equitable, and aligned behavioral health system. The goal is to ensure that all individuals have access to the care they need, when they need it, and where they need it, regardless of race, gender, or geography. By leveraging partnerships, resources, and strategic initiatives, the plan aims to expand

access to care, reduce behavioral health inequities, and provide culturally humble services, with special emphasis on populations such as justice-involved individuals; those with severe mental illnesses; and children, youth, and families.

A critical foundation of the plan is the establishment of an intergovernmental workgroup and eleven Regional Behavioral Health Collaboratives. OBH will provide administrative and operational support to these Collaboratives, which will play a vital role in informing, executing, and assessing the impact of strategic initiatives. OBH will serve as a convener and coordinator, fostering enhanced collaboration among stakeholders across the region.



Key Challenges and Drivers in the Behavioral Health System

Although Cook County is home to extensive healthcare resources, significant gaps in mental health and substance use disorder (SUD) treatment persist. The demand for services far exceeds the available resources. Per the 2024 Workforce Assessment Report, approximately 23% of the county's population—more than 1.2 million individuals—needed behavioral health services in 2023, but about 420,000 (35%) did not receive them. Addressing this unmet need is further complicated by a substantial workforce shortage. Cook County was short by 15,885 the number of behavioral health workers needed to meet existing 2023 demand, a deficit exceeding 50% of the existing workforce.

There are also notable geographic disparities in the availability of behavioral health services across the county. Areas with higher socioeconomic disadvantages have fewer providers, leading to longer travel times and wait times for residents seeking care. Opioid-related deaths continue to occur in alarming numbers, with certain ZIP codes experiencing rates higher than 400 deaths per 10,000 residents. Despite the

importance of addiction treatment, these services remain inaccessible to many individuals in the community.

Vulnerable populations—such as racial and ethnic minorities, immigrants, justice-involved individuals, older adults, and individuals with severe mental illnesses—experience greater disparities in accessing and receiving quality care. These gaps are exacerbated by social determinants of health, such as poverty, housing instability, and systemic inequities, which disproportionately affect marginalized groups. Furthermore, these individuals often face cultural stigma, language barriers, and inadequate health insurance, further compounding disparities in behavioral health outcomes.

Behavioral health challenges are, in many cases, deeply tied to structural inequities. Social determinants such as poverty, inadequate housing, and limited access to healthcare create significant barriers to care, especially for BIPOC individuals, immigrants, the elderly, and those with severe mental health conditions.



Strategic Plan

The Cook County Behavioral Health Strategic Plan is informed by key assessments and community input, including the Cook County Behavioral Health Summit; the Cook County Behavioral Health Workforce Assessment and Behavioral Health Workforce Symposium; the 2024 Cook County Behavioral Health Community Needs Assessment; and multiple regional and countywide forums. These efforts have illuminated the critical challenges facing the

behavioral health system and helped shape targeted interventions to improve outcomes across the county. The plan focuses on five priority areas: **(1) Systems Alignment; (2) Workforce Development; (3) Behavioral Health Services for Children, Youth, and Families; (4) Access to Treatment, Support, and Recovery Services; and (5) Crisis System Enhancement.**

1 SYSTEMS ALIGNMENT:

Systems alignment is about breaking down silos and making sure that behavioral health services—from prevention to crisis care—are working together, efficiently and equitably. Fragmentation across the behavioral health system has led to inefficient use of resources, under-developed infrastructure, and lack of meaningful outcomes, all reducing system effectiveness. This plan calls for enhanced coordination through Regional Behavioral Health Collaboratives, an Intergovernmental Advisory Group, and alignment with state and federal initiatives, such as the Illinois Behavioral Health Transformation Plan and SAMHSA (Substance Abuse and Mental Health Services Administration) guidelines.

2 WORKFORCE DEVELOPMENT:

Building a strong, diverse, and representative workforce is essential to addressing the behavioral health needs of Cook County. The plan emphasizes advocacy for enhancing compensation, benefits, and career development opportunities, including internships, scholarships, and the expansion of peer support specialist roles. This includes developing awareness of behavioral health careers and creating a workforce pipeline that supports individuals from historically underserved communities to work in behavioral health. Collaboration with academic institutions, in particular, the Behavioral Health Workforce Center at the University of Illinois-Chicago, will drive sustainable workforce solutions.

3 BEHAVIORAL HEALTH SERVICES FOR CHILDREN, YOUTH, AND FAMILIES:

Proactive care, especially for children, youth, and families, is critical in reducing the long-term impacts of behavioral health challenges. Early support helps to prevent conditions from worsening, leading to fewer complications in the future. The plan prioritizes integrating services into schools and community-based settings, addressing family support needs, and ensuring timely access to care.

Strategic Plan

4 ACCESS TO TREATMENT, SUPPORT, AND RECOVERY:

Enhancing and expanding access to treatment, support, and recovery services requires a comprehensive, data-driven, and collaborative approach to build an equitable, accessible, and effective system. The plan aims to reduce disparities in care and provide support throughout an individual's recovery journey. Strategies will focus on identifying service gaps, enhancing access and coordination, promoting innovative care models, and expanding the use of evidence-based practices.

5 CRISIS SYSTEM ENHANCEMENT:

Strengthening crisis care systems is key to reducing unnecessary arrests, hospitalizations, and reliance on emergency services while increasing access to community-based care. The plan supports the development of a comprehensive crisis care continuum by expanding access, enhancing care coordination, supporting post-crisis transitions, and reducing stigma through community awareness.

Through these strategic initiatives, Cook County seeks to transform its behavioral health system into one that is equitable, accessible, and responsive to the needs of all residents—particularly those who face the greatest barriers to care. OBH will serve as a central convener, fostering collaboration across local, regional, and state partners to align efforts and effectively and equitably address the pressing behavioral health needs across the County's diverse communities.

STRONGER TOGETHER

Vision

To foster a healthier and more resilient county where all residents have equitable access to timely, comprehensive, compassionate, and high-quality behavioral health services. We envision a county where behavioral health care is prioritized as an essential component of overall well-being and where support is integrated and available to everyone regardless of background, circumstances, or zip code.



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Guiding Principles

Through the development and implementation of a countywide Behavioral Health Strategic Plan, the Cook County Health Office of Behavioral Health (OBH) in partnership with behavioral health partners and stakeholders from across the region will work together to build an equitable behavioral health ecosystem. These Guiding Principles will lay the foundation for all stages of planning, execution, and evaluation.



Collective Advocacy and Community Engagement

Develop Countywide and Regional Behavioral Health Collaboratives built upon existing stakeholder networks and working groups to optimally understand, respond, and advance the behavioral health system.



Diversity

Prioritize and recognize that embracing varied perspectives and experiences enriches our community and enhances the effectiveness of behavioral health programs and services.



Evidence-Based/Evidence-Informed Models of Care

Promote, adapt, and disseminate evidence-based practices to enhance care quality and improve treatment outcomes.



Health Equity

Every individual in Cook County should have access to convenient, high-quality services along a continuum of care that promotes prevention and early intervention; crisis assessment; and intervention, recovery, and support.



Inclusion

Stakeholders with diverse backgrounds and roles in behavioral healthcare are welcomed, culturally and socially accepted, and engaged in efforts to build a countywide vision for the behavioral health continuum.



Innovative Community Models

Support and facilitate innovative, locally-generated approaches to addressing the behavioral health and health-related social needs of all Cook County residents.



Strategic Priority Areas

1

Systems Alignment

Behavioral health challenges have intensified over the past decade, highlighting the need for systemic improvements both nationally and locally. While increased awareness and education have encouraged more individuals to seek care, the fragmented and under-resourced mental health system struggles to meet growing demand. The Cook County Behavioral Health Summit in February 2024 identified stronger coordination across communities, government jurisdictions, and care sectors as a critical priority. To address these challenges, the Office of Behavioral Health (OBH) is fostering connections through Regional Behavioral Health Collaboratives and an Intergovernmental Advisory Group. These initiatives aim to streamline resources and ensure community voices drive strategic planning, implementation, and evaluation.

Efforts at federal, state, and local levels, including SAMHSA's crisis care guidelines, Illinois' Certified Community Behavioral Health Clinics (CCBHC) demonstration project, and the Behavioral Health Transformation program- represent significant progress toward system alignment. However, these initiatives often focus on specific populations or care segments, underscoring the need for broader resource integration and information-sharing across stakeholders. By engaging local consumers, providers, and policymakers to align priorities, Cook County's diverse communities can equitably benefit from these advancements.

1.1 **Goal 1.1:** Engage stakeholders at hyperlocal, county and state levels to advance the alignment of an equitable, cohesive, and responsive behavioral health system

Objective: Establish Collaboratives that engage stakeholders to ensure coordinated and equitable approaches to prevention, treatment and care, optimize system resources, and monitor impact on behavioral health priorities.

1 Strategy

Establish a Cook County Intergovernmental Behavioral Health Advisory Group that supports the alignment and implementation of countywide behavioral health strategic priorities with local, state, and federal behavioral health initiatives.

Tactic

- Identify and engage stakeholders from local and state government entities that influence behavioral health policy, funding, services, and community engagement.
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2 Strategy

Establish Regional Behavioral Health Collaboratives within each of the eleven County regions to guide the implementation of strategic priorities and enhance collaboration and coordination of care at the hyperlocal level.

Tactics

- Identify and engage stakeholders in the eleven regions to foster connection, collaboration, and innovation to increase the mental health and well-being of residents through the advancement of culturally competent, evidence-based prevention, early intervention, treatment, support, and the crisis care continuum.
 - Foster collaboration with partners to encourage innovation and the development of new programs to meet emerging needs.
 - Engage residents and incorporate input in plans for change.
 - Ensure representation of those with lived expertise in each of the Regional Behavioral Health Collaboratives.
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3 Strategy

Establish a Countywide Behavioral Health Collaborative consisting of representatives from each of the Regional Behavioral Health Collaboratives to support implementation and alignment of the behavioral health strategic plan across the County.

Tactics

- Convene identified representatives from each of the eleven Regional Behavioral Health Collaboratives in a Countywide Behavioral Health Collaborative.
- Office of Behavioral Health to hold quarterly open meetings, or office hours, to provide updates, receive feedback, and engage with other agencies and stakeholders within Cook County Government.

Metrics for Goal 1.1:

Engage stakeholders at hyperlocal, county, and state levels to advance the alignment of an equitable, cohesive, and responsive behavioral health system.

- Policy & Funding Influence Policy changes, funding allocations, and/or strategic shifts influenced through engagement efforts.
- Collaboration Effectiveness – Qualitative assessment of cross-sector partnerships, as measured through stakeholder feedback.

Cook County Intergovernmental Behavioral Health Advisory Group Metrics

- Number of Intergovernmental Meetings (tracked by attendance and representation).

Countywide Behavioral Health Collaborative Metrics

- Number of Countywide Behavioral Health Collaborative Meetings convened (tracked by attendance and representation).

Regional Behavioral Health Collaboratives Metrics

- Number of Regional Behavioral Health Collaboratives engaged in the countywide group.
- Frequency and attendance of Regional Behavioral Health Collaborative convenings.
- Number of Workgroup Meetings across the Regional Behavioral Health Collaboratives held.
- Number of Training Sessions organized by the Regional Behavioral Health Collaboratives.
- Number and type of collaborative projects initiated or supported.
- Stakeholder satisfaction with the collaborative process.



1.2

Goal 1.2: Develop standardized metrics for data-informed decision support, planning, and evaluation of the countywide behavioral health system.

Objective: Establish a countywide framework for collecting, analyzing, and sharing key behavioral health metrics.

1 Strategy

Build upon publicly accessible dashboards to capture key metrics in priority areas that will support funding and innovation.

Tactics

- Evaluate population-level data based on existing data available across systems to demonstrate impact and assess future needs.
- Establish a Data & Monitoring workgroup that engages key stakeholders in a Countywide Behavioral Health Collaborative to identify specific indicators and metrics that demonstrate access, capacity, and needs at local and county levels.
- Collect data on access, capacity, quality of care, system utilization, cost of care, implementation of innovative models, infrastructure enhancements, and workforce initiatives.

Objective: Enhance a system for sharing information about behavioral health services and health-related social needs to improve overall coordination of services.

1 Strategy

Support the development of centralized information-sharing technology to support the facilitation and coordination of care across different health and social service systems.

Tactics

- Identify existing information-sharing systems.
- Support the launch of the Community Information Exchange (CIE).
- Evaluate utilization patterns and identify service gaps.

2 Strategy

Collaborate with other County agencies to ensure that the non-health related County initiatives consider the potential impacts on the mental health and well-being of the communities and their residents.

Tactics

- Develop cross-sector partnerships and formalized data-sharing agreements to incorporate behavioral health impact assessments into broader county initiatives
- Establish processes for integrating behavioral health considerations into housing, employment, and justice system planning efforts through interagency workgroups.

Metrics for Goal 1.2:

Develop standardized metrics for data-informed decision support, planning, and evaluation of the countywide behavioral health system.

Data & Monitoring Metrics:

- Milestone: Establishment (and sustainability) of a countywide dashboard for tracking behavioral health metrics, with defined data sources and reporting frequency.
- Number of stakeholders engaged in the Data & Monitoring Workgroup within the Countywide Behavioral Health Collaborative.
- Number of unique users accessing the dashboard, frequency of access, and number of reports/downloads generated.

Information Sharing & Coordination Metrics/Milestones:

- Number of existing information-sharing systems identified, assessed, and mapped for interoperability.
- Progress towards supporting the launch of the Community Information Exchange (CIE), including key implementation milestones (e.g., system selection, pilot testing, full deployment).
- Number of organizations onboarded and actively using the Community Information Exchange (CIE).
- Percentage increase in cross-agency referrals and coordinated care cases facilitated through information-sharing tools.
- Disaggregation of data by demographic groups to track disparities in access, service utilization, and outcomes over time.

1.3

Goal: Optimize resources and funding for behavioral health services to create a comprehensive and responsive behavioral health system that ensures every community member has access to the care they need where and when they need it.

Objective: Assess current behavioral health funding streams and resources across the county to maximize resource efficiency, promote sustainability, and expand resources.

1 Strategy

Conduct a countywide analysis of behavioral health funding sources, including the offices receiving funds and any restrictions, conditions, or directives attached to those funds.

2 Strategy

Promote community-level collaboration to identify system gaps through the eleven Regional Behavioral Health Collaboratives.

Tactics

- Utilize Regional Collaboratives to evaluate community resources and develop funding strategies that promote alignment and effectiveness.
- Implement a standardized process for Regional Behavioral Health Collaboratives to submit priority funding needs for countywide advocacy efforts.

3 Strategy

Explore innovative funding models.

Tactic

- Research alternative payment models (e.g., value-based payment, outcome-based reimbursement) that promote sustainability and incentivize high-quality behavioral health services.

Objective: Advocate for equity and parity in funding to support behavioral health system infrastructure, sustainability, and innovation across the service continuum.

1 Strategy

Engage in collective advocacy for funding equity and parity.

Tactic

- Advocate for rate increases in the fee-for-service system and living wage requirements in grant funded programs.
- Explore establishment of a Behavioral Health Funding Advocacy Coalition with providers, policymakers, and community representatives to coordinate advocacy efforts.
- Develop policy briefs and data-driven reports demonstrating the impact of behavioral health underfunding on service access and community outcomes.

2 Strategy

Advocate for funding opportunities that invest in enhancing the behavioral health infrastructure including: (a) Capital investments (e.g., facilities, space, technology), (b) System-wide technology upgrades to reduce administrative burdens and support organizational capacity building.

Tactic

- Explore opportunities created by the 1115 Waiver.

3 Strategy

Develop targeted messaging and campaigns highlighting the impacts of increased funding for various audiences, including community members, healthcare providers, policymakers, and potential funders.

Tactic

- Conduct community listening sessions to gather testimonials and real-world impact stories to incorporate into advocacy materials.
- Leverage digital marketing and social media campaigns to amplify advocacy message and increase public engagement in funding efforts.

Objective: Support the growth of community-based organizations providing reimbursable behavioral health services.

1 Strategy

Explore opportunities to expand the capacity of community-based organizations to receive fee-for-service reimbursement.

Tactic

- Support provision of technical assistance to organizations interested in becoming Medicaid providers and develop sustainable business models that support reimbursement and long-term financial viability.
- Establish a mentorship program pairing established Medicaid providers with emerging community-based organizations to facilitate knowledge sharing.

Metrics for Goal 1.3

Optimize resources and funding for behavioral health services to create a comprehensive and responsive behavioral health system.

Funding & Resource Alignment Metrics:

- Completion of pilot funding analysis in at least two Regional Behavioral Health Collaboratives.
- Tracking and development of funding strategies by Regional Behavioral Health Collaboratives and the Office of Behavioral Health
- Number of system gaps and funding needs identified through Regional Behavioral Health Collaboratives, tracked by region and priority area.
- Number of funding proposals developed collaboratively through Regional Behavioral Health Collaboratives and OBH.

Advocacy & Policy Impact Metrics:

- Policy outcomes influenced by advocacy efforts (e.g., funding increases, legislative changes).
- Progress on 1115 Waiver exploration – tracking and reporting.

Capacity-Building Metrics:

- Number of community-based organizations receiving technical assistance for Medicaid enrollment and reimbursement expansion.
- Increase in the number of community-based organizations providing reimbursable behavioral health services (tracked annually).
- Percentage of newly enrolled Medicaid providers still actively billing after one year.
- Number of organizations, tracked by region, participating in the Medicaid mentorship program.



Strategic Priority Areas

2

Workforce Development

A strong, inclusive behavioral health workforce is essential to meeting the diverse needs of Cook County residents. At the 2024 Behavioral Health Summit, participants emphasized the urgent need to address workforce shortages, high turnover, and burnout by improving compensation, benefits, and career pathways. Key strategies identified include paid internships, scholarships, and training in trauma-informed care and cultural competence. Additionally, expanding the roles of community health workers and integrating peer support specialists with lived expertise can fill critical care gaps and diversify the workforce.

Cook County's workforce development efforts are guided by the Behavioral Health Workforce Report, completed in Summer 2024, and insights from the Workforce Symposium held in October 2024. Partnerships with entities like the Behavioral Health Workforce Center and local academic institutions are helping address barriers such as regulatory challenges, low salaries, and limited training opportunities. By improving job satisfaction, implementing best practices, and increasing reimbursement rates, these initiatives aim to build a sustainable, well-supported workforce equipped to meet the county's behavioral health needs.

2.1

Goal 2.1: Support the expansion and retention of a culturally informed, inclusive, and trauma-competent behavioral health workforce across Cook County to meet the diverse needs of the community and to improve overall health outcomes.

Objective: Ensure behavioral health professionals receive competitive wages that align with other industries to mitigate workforce shortages in community behavioral health settings.

1 Strategy

Advocate for increased pay and higher reimbursement rates for behavioral health workers.

2 Strategy

Promote grant-funded programs that support a living wage, paid sick leave, and paid time off.

Tactic

- Expand awareness and access to loan forgiveness programs for behavioral health professionals.

Objective: Expand the pipeline by promoting behavioral health careers to students and trainees in K-12 schools, community colleges, and post-secondary programs in nursing, medicine, social work, and psychology.

1 Strategy

Partner with public schools, community colleges, and workforce programs to facilitate guest speakers, job shadows, and externships.

Tactics

- Collaborate with professional and trade associations to develop accessible and compelling career path materials detailing wages, education and licensure requirements, local programs, and financial aid options.
 - Expand internship, fellowship, and field placement opportunities at Cook County Health and community-based organizations.
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2 Strategy

Develop workforce pipelines that support individuals from historically underserved communities in entering behavioral health careers (e.g., high school internships/scholarships for LPNs).

Objective: Create accessible education and training community behavioral health “Earn and Learn” pathways that allow individuals to gain professional experience while earning income, thereby increasing diversity and career mobility in the behavioral health workforce.

1 Strategy

Launch a Cook County Behavioral Health Workforce Training Fund to expand scholarships, apprenticeships, paid-internships, residencies, and fellowships.

Tactics

- Engage public (local, state, and federal) and private funders (philanthropies and social impact investors) to align on goals, target programs, and expected outcomes.
- Evaluate the Fund’s impact and effectiveness.

Objective: Enhance behavioral health jobs by supporting employers in creating attractive with competitive benefits, advancement opportunities, and work-life balance.

1 Strategy

Partner with the Illinois Behavioral Health Workforce Center (BHWC) to support talent attraction and retention collaboratives that offer peer-learning, technical assistance, and funding for community behavioral health employers.

Objective: Advocate for reduction of administrative burden and explore innovative technologies to maximize workforce capacity and efficiency.

1 Strategy

Reduce administrative burden on providers.

Tactics

- Develop shared systems for required trainings and continuing education to improve efficiency.
- Promote efforts to reduce administrative burden through continued engagement in state-wide working groups.

2 Strategy

Expand awareness and adoption of evidenced-based Collaborative Care for Medicaid population.

Tactics

- Establish a multi-disciplinary workgroup to assess opportunities and barriers to implementing the Collaborative Care model.
- Explore other alternative care models.

3 Strategy

Explore responsible use of Artificial Intelligence.

Tactic

- Convene a working group to explore how Artificial Intelligence can be optimally deployed in BH settings.

Goal 2.1 Metrics:

Expand and Retain a Culturally Informed, Inclusive, and Trauma-Competent Behavioral Health Workforce.

Compensation & Retention Metrics

- Average salary trends across behavioral health professions in Cook County (tracked annually).
- Increase in behavioral health reimbursement rates (state & federal policy tracking).

Workforce Awareness & Pipeline Expansion Metrics

- Number of outreach events conducted in K-12 schools, community colleges, and workforce training programs.
- Number of students reached through school-based awareness campaigns and educational partnerships.
- Number of students participating in job shadows, externships, and field placements at Cook County Health and grant-funded partners.

Earn & Learn Program Metrics

- Number of “Learn & Earn” trainees funded per year through the Cook County Behavioral Health Workforce Training Fund.
- Total amount of funds disbursed through the Cook County Behavioral Health Workforce Training Fund (tracked annually).
- Number of new or expanded apprenticeship, internship, and fellowship programs supported by the fund.
- Retention rates of professionals who complete “Learn & Earn” programs and enter the behavioral health workforce.
- Number of funding partners contributing to the Workforce Training Fund (public & private).

Behavioral Health Employer Support & Workforce Well-being Metrics

- Employee satisfaction & burnout levels (measured through workforce surveys).

Administrative Burden & Technology Integration Metrics

- Development of shared systems for required trainings and CEUs.
- Number of organizations newly implementing the Collaborative Care model.



Strategic Priority Areas

3

Behavioral Health Services for Children, Youth, and Families

Expanding prevention and early intervention services for children, youth, and families is central to the Cook County Behavioral Health Strategic Plan. Accessible, evidence-based programs tailored to the developmental and diverse needs of these populations are critical. Building on state-level initiatives, such as the Illinois' Children's Behavioral Health Transformation Initiative, is key to improving access and creating equitable pathways to care. While school and community partnerships play a vital role in early identification and support, helping address challenges proactively.

Collaboration across sectors is crucial to strengthening child- and youth-focused services, including prevention and early intervention programs, age-appropriate substance use services, expanded public awareness campaigns, and tailored crisis response. Addressing health-related social needs, such as housing instability and poverty, is also integral to these efforts. Ensuring stable housing, food security, and essential resources, will create a foundation for effective behavioral health interventions, promoting long-term health and well-being for children, youth, and families while advancing health equity across the county.

3.1 **Goal 3.1:** Improve the mental and social well-being of Cook County children, youth, and families by ensuring a comprehensive continuum of behavioral health services available when and where they need them.

Objective: Reduce behavioral health inequities for children, youth, and families by increasing access to behavioral health resources at county, regional, and community levels.

1 Strategy

Increase funding for prevention, early intervention, treatment, support, recovery, and health-related social needs in communities with the highest unmet needs.

Tactics

- Establish funding for direct prevention and early intervention services and bridge gaps in existing services.
- Establish funding for treatment, support, and recovery services and bridge gaps in existing services.
- Establish funding for crisis assessment and care and bridge gaps in existing services.
- Expand access to supports that address housing insecurity, including permanent supportive housing, low-barrier transitional housing, and wraparound services.

2 Strategy

Increase access to a continuum of behavioral health services that span prevention, early intervention, treatment, support, recovery, and crisis assessment and care for all stakeholders.

Tactics

- Develop region-specific resource directories for families.
- Leverage the State's BEACON children's behavioral health portal for centralized information.

Objective: Foster community partnerships and public awareness efforts to reduce stigma and promote available resources.

1 Strategy

Develop targeted public awareness campaigns for historically marginalized communities.

Tactics

- Collaborate with cultural and community leaders to tailor outreach efforts and increase resource utilization.
- Promote harm reduction approaches in public messaging.
- Partner with community organizations to expand Youth and Teen Mental Health First Aid training.

Goal 3.1 Metrics

Improve the mental and social well-being of Cook County children, youth, and families through a comprehensive continuum of behavioral health services available when and where they need them.

Service Accessibility & Utilization Metrics

- Creation and utilization rates of region-specific resource directories.
- Improve access to services in high-need communities (tracked via BEACON and NA-MI-Chicago databases).
- Number of families accessing behavioral health services through the BEACON portal.

Public Awareness & Stigma Reduction Metrics

- Reach and engagement rates of public awareness campaigns.
- Number of individuals trained in Youth and Teen Mental Health First Aid.
- Rate of depression among high school students (tracked via Chicago and Cook County Health Atlases).

3.2

Goal 3.2: Support the healthy development of children and youth, reduce the likelihood of future difficulties, and promote the well-being of Cook County families.

Objective: Enhance community collaboration to increase access to evidence-informed prevention and early intervention programs.

1

Strategy

Build collaboration among schools, behavioral health providers, and community organizations to improve access.

Tactics

- Increase awareness of behavioral health programs and services to facilitate early risk detection and care transitions.
- Streamline service referrals to improve access to services.
- Partner with community organizations to expand Youth and Teen Mental Health First Aid training.

2 Strategy

Promote universal behavioral health screenings and early detection.

Tactics

- Advocate for universal behavioral health screening in schools and pediatric settings.

Goal 3.2 Metrics:

Support the healthy development of children and youth, reduce the likelihood of future difficulties, and promote the well-being of Cook County families.

Early Intervention & Collaboration Metrics

- Number of children and youth receiving behavioral health screenings in schools.
- Number of Youth and Teen Mental Health First Aid trainings conducted in schools and community settings.

Service Access & Utilization Metrics

- Average time from referral to service initiation for children and youth in need (Per BEACON database).

3.3

Goal 3.3: Expand access to evidence informed, trauma-competent, culturally, and linguistically responsive treatment, support, and recovery services for children, youth and families in Cook County.

Objective: Reduce service gaps to developmentally appropriate treatment, support, and recovery services for children, youth, and families.

1 Strategy

Support innovative service models for historically marginalized communities.

Tactics

- Use the Social Vulnerability Index to identify priority areas for program development.
- Pilot telehealth services to expand access in underserved areas.

2 Strategy

Implement evidence-informed practices across service networks.

Tactics

- Expand the use of YSBIRT (Youth Screening, Brief Intervention, and Referral to Treatment) and collaborative care models in primary care settings.
- Expand access to evidence-informed treatment, support, and recovery trainings through the Regional Behavioral Health Collaboratives.
- Expand use of standardized tools such as Illinois Medicaid Comprehensive Assessment of Needs & Strengths (IM+CANS).

Objective: Improve the quality and inclusivity of treatment, support, and recovery services.

1 Strategy

Expand peer and community support networks for children, youth, and families.

Tactic

- Bolster behavioral health consultation for parents of children and youth with complex needs.

Goal 3.3 Metrics:

Expand access to evidence informed, trauma-competent, culturally, and linguistically responsive treatment, support, and recovery services for children, youth, and families in Cook County.

Equity & Access Metrics

- Utilization rates of outpatient behavioral health services for children and youth in communities with SVI scores of 0.8 or higher. (Using County Care data)

Innovative & Evidence-Based Practices Metrics

- Trends in outcome measures for prevention, treatment, and recovery services using the Core Set of Children's Health Care Quality Measures for Medicaid & CHIP.

3.4 **Goal 3.4:** Develop a robust crisis system to address the acute needs of children, youth, and families in Cook County.

Objective: Build capacity for comprehensive crisis response for children, youth, and families.

1 Strategy

Conduct countywide and regional assessments to identify crisis service entry points and gaps for children, youth, and families.

Tactics

- Leverage the State's behavioral health portal to provide centralized crisis resources.
- Pilot resource referral technologies to improve linkage to crisis services.

2 Strategy

Expand age-appropriate crisis stabilization resources for children, youth, and families.

Tactics

- Expand access to developmentally appropriate assessments, sensitive de-escalation support, and safety planning.
- Support innovative crisis models, including mobile crisis teams, living rooms, and crisis stabilization units.
- Increase access to housing supports to address housing insecurity during crises.

3 Strategy

Empower families navigating crisis.

Tactics

- Develop a Family Crisis Resource Guide with local crisis numbers, including 988, mobile crisis teams, and specialized services (e.g., youth, substance use, suicide prevention).
- Implement community training sessions to educate families on recognizing crisis signs and understanding de-escalation techniques.
- Create a digital "Crisis Response Roadmap" (website) that guides families through crisis scenarios with interactive decision trees.

Objective: Improve coordination of crisis care delivery across systems.

1 Strategy

Foster the streamlining and coordination of crisis service delivery through the Regional Behavioral Health Collaboratives.

Tactic

Enhance communication and coordination between healthcare providers, schools, and community organizations at the regional and community level.

2 Strategy

Use public awareness campaigns to educate children, youth, and families about recognizing crisis signs, and when and where to access help.

Tactic

Partner with community leaders to design culturally relevant messaging that increases community awareness and engagement.

Goal 3.4 Metrics:

Develop a robust crisis system to address the acute needs of children, youth, and families in Cook County.

Crisis System Capacity Metrics

- Completion of countywide and regional children, youth, and family crisis service assessments.
- Number of new crisis stabilization units, mobile crisis teams, or living rooms established for children and youth.
- Utilization rates of crisis stabilization resources for children and youth.

Crisis Service Coordination & Public Awareness Metrics

- Creation of Family Crisis Resource Guide with local crisis numbers, including 988, mobile crisis teams, and specialized services.
- Utilization rates of Family Crisis Resource Guide.
- Average wait times for crisis care interventions for children and youth.
- Number of families accessing crisis resources through the BEACON portal.
- Engagement rates in public education efforts related to crisis recognition and intervention for children, youth, and families.

A background image showing a person in a light-colored sweater leaning over a table, looking at documents in a meeting setting. Other people are partially visible in the background.

Strategic Priority Areas

4

Access to treatment, support, and recovery

Improving access to behavioral health treatment, support, and recovery services is essential to addressing public health challenges and social equity issues in Cook County. Behavioral health conditions, including substance use disorders and age-related mental health issues, place significant strain on emergency services, the justice system, and family networks. Justice-involved individuals, those with severe mental illnesses (SMI), and older adults face unique barriers to care, deepening disparities and hindering recovery.

The Cook County Behavioral Health Summit in February 2024 highlighted systemic inequities rooted in poverty, racial discrimination, and insufficient access to trauma-competent, culturally informed, and linguistically responsive care. Expanding community-based services, integrating care, and tailoring interventions for special populations across the Regional Behavioral Health Collaboratives will advance an equitable behavioral health system. These efforts align with the priorities of the Cook County Office of the President and Board of Commissioners and support state and local initiatives to address health disparities and improve access to behavioral health services.

4.1

Goal 4.1: Expand access to and coordination of a full continuum of evidence-based, trauma-competent, culturally informed, linguistically responsive treatment, support, and recovery services.

Objective: Increase access and improve systems alignment through a comprehensive, community-focused system of care model.

1 Strategy

Utilize countywide and regional/community needs assessments to identify entry points, resources, and service gaps.

Tactics

- Identify gaps in services for priority populations, including individuals with serious mental illness (SMI), those involved with or at risk of becoming involved with the legal system, and older adults.
 - Expand treatment availability for individuals at high risk for legal involvement to reduce rates of incarceration of those with SMI.
 - Enhance care coordination for individuals with SMI through integrated service models.
-

2 Strategy

Leverage the Regional Behavioral Health Collaboratives to promote triage, collaboration, coordination, and access.

Tactics

- Expand NAMI Chicago's Helpline to improve front door system navigation and outpatient service access.
 - Align access efforts with the State's "Children's Behavioral Health Transformation Initiative" to enhance care pathways for youth.
-

3 Strategy

Expand and integrate innovative care models across Cook County.

Tactics

- Promote adoption of Collaborative Care models across the county.
 - Fund pilot programs using innovative funding mechanisms and service delivery models.
-

4 Strategy

Use Geographic Information Systems (GIS) and data tools to improve behavioral health service visibility.

Tactic

- Develop publicly accessible maps displaying the locations of mental health services to help residents navigate available care options.

5 Strategy

Reduce service gaps and strengthen the continuum of evidence-based, trauma-competent, culturally informed treatment, support, and recovery services.

Tactics

- Catalogue behavioral health resources to ensure all local agencies can provide targeted information targeted to individuals in need.
- Expand access to permanent supportive housing, low barrier transitional housing, and wrap-around supports for individuals with SMI and for those re-entering from carceral settings.
- Support the expansion of telehealth services to reach underserved populations.
- Strengthen and sustain violence prevention programs through coordination across public health and safety initiatives.
- Expand use of SBIRT (Screening, Brief Intervention, and Referral to Treatment) in primary care settings.
- Expand community and peer support networks to enhance treatment engagement and long-term recovery outcomes.

Objective: Enhance the quality of treatment, recovery, and support services for all residents.

1 Strategy

Support the dissemination and adoption of evidence-based practices across the Regional Behavioral Health Collaboratives.

Tactics

- Assess the current landscape of evidence-based and evidence-informed practices in Cook County and how they are being evaluated.
- Provide technical assistance to agencies adopting and maintaining evidence-informed and evidence-based practices.

Objective: Reduce opioid deaths.

1 Strategy

Increase access to Medication-Assisted Recovery (MAR)/Medications for Opioid Use Disorder (MOUD) for residents living with an Opioid Use Disorder.

Tactics

- Improve awareness and utilization of MAR Now Illinois Helpline to connect individuals to immediate support.
- Expand distribution of naloxone.

2 Strategy

Strengthen community, county, and statewide collaborations to reduce opioid-involved morbidity and mortality.

Tactic

- Improve linkages to timely care, case management, and treatment for individuals with Opioid Use Disorders.

Goal 4.1 Metrics

Expand access to and coordination of a full continuum of evidence-based, trauma-competent, culturally informed, linguistically responsive treatment, support, and recovery services.

Access and Coordination Metrics

- Utilization rates of NAMI Chicago's Helpline, disaggregated by geography and demographics.
- Number of referrals made through NAMI Chicago's Helpline.

Enhancing Quality of Treatment Services Metrics

- Number of providers participating in learning collaboratives focused on evidence-based practices.

Reduction in Opioid-Involved Morbidity and Mortality Metrics

- Decrease in opioid-related overdose deaths in Cook County.
- Number of people accessing MAR/MOUD services via the MAR Now Illinois Helpline.
- Referral rates and engagement rates for individuals connected through the MAR Helpline.
- Number of naloxone boxes distributed.



Strategic Priority Areas

5

Crisis System Enhancement

Enhancing crisis care systems is crucial for reducing unnecessary arrests, hospitalizations, and reliance on emergency services while simultaneously increasing access to community-based care. SAMHSA's National Guidelines for Behavioral Health Crisis Care emphasize three core elements: Regional Crisis Call Centers ("Someone to Talk To"), Crisis Mobile Team Response ("Someone to Respond"), and Crisis Receiving and Stabilization Facilities ("A Place to Go"). Cook County has made progress in the first two areas through initiatives such as the 988 Suicide and Crisis Lifeline and expanded Mobile Crisis Response (MCR) teams under Illinois' Community Emergency Services and Support Act (CESSA). However, a significant gap remains in the development of crisis stabilization facilities.

It is important to acknowledge that many of the existing crisis services and system-wide initiatives primarily focus on adults. There is a need to incorporate developmentally appropriate crisis response services for children and youth. These services should be tailored to youth-specific needs and integrate family and youth peer supports in planning, implementing, and evaluating of services across the crisis continuum.

The Cook County Behavioral Health Summit in February 2024 highlighted challenges such as geographic disparities in crisis care access, insufficient youth-focused services, substance use-related crisis, and the over-reliance on emergency rooms. Addressing these challenges requires a comprehensive crisis care continuum that ensures equitable access to services. Key objectives include strengthening post-crisis transitions, promoting evidence-based practices, and launching stigma-reduction campaigns to encourage service use. By advancing these initiatives, Cook County aims to create a responsive and inclusive crisis care system that meets the diverse needs of its residents.

5.1

Goal 5.1: Bridge gaps in the crisis care continuum to minimize reliance on law enforcement, legal system involvement, or emergency room admissions, and reduce the potential trauma and criminalization of behavioral health issues.

Objective: Support the development, maintenance, and expansion of existing programs and services with someone to call, someone to respond, and somewhere to go.

1 Strategy

Ensure the development, maintenance and expansion of a complete crisis care continuum, aligned with state and local efforts. This includes moving crisis response and post-crisis care away from emergency departments, law enforcement, or criminal justice settings to safe, appropriate places to go. These services may encompass living rooms, in-home stabilization, crisis stabilization units, and sobering centers.

Tactics

- Collaborate with and support efforts to increase awareness and utilization of crisis call services.
- Collaborate with and support efforts to maintain and expand crisis response services.
- Collaborate with and support efforts to maintain and expand crisis stabilization options.

2 Strategy

Increase access and coordination of care to provide the right response for individuals in need.

Tactic

- Map Mobile Crisis Response teams and immediate post-crisis care (i.e., somewhere to go) providers across Cook County and disseminate findings.

3 Strategy

Support the development of best practices for post-crisis transitions to enhance engagement in outpatient care, reduce the likelihood of future crises, and improve health outcomes.

Tactics

- Facilitate the transition of residents experiencing behavioral health crises—whether identified by law enforcement, emergency rooms, or clinics—to post crisis follow-up care and longer-term engagement with community health providers.
- Collect and analyze data related to post-crisis follow-up to ensure efficient transition to appropriate care through community providers.

Objective: Reduce stigma and cultural shame, while increasing community awareness and engagement with community-based crisis access points, and follow-up services with age-appropriate assessment and treatment.

1 Strategy

Secure funding for a multi-platform campaign (including social media, community workshops, and school programs) to promote awareness of available crisis response services.

Tactics

- Utilize social media to share positive messages about behavioral health and promote available services.

Goal 5.1 Metrics:

Bridge gaps in the crisis care continuum to minimize reliance on law enforcement, legal system involvement, or emergency room admissions, and to reduce the potential trauma and criminalization of behavioral health issues.

Crisis System Capacity Metrics

- Completion of countywide and regional crisis service assessments.
- Number of new crisis stabilization units, mobile crisis teams, or living rooms established.
- Utilization rates of crisis stabilization resources.

Crisis Service Coordination Metrics

- Distribution of crisis service provider maps for Chicago and suburban Cook.
- Average wait times for crisis care interventions.
- Number of 988 calls, CARES calls, and direct calls to 590 providers.
- Average call response time for crisis services (988, CARES, 590 providers).
- Caller demographics (age, race, gender, geography) to track equity and gaps in response.

Public Awareness Metrics

- Number of public awareness campaigns initiated at State, county, or local levels conducted regarding signs of mental health crisis and resources to help.
- Engagement rates in public education efforts related to crisis recognition and intervention.
- Increase in public awareness of crisis services (measured through community surveys and tracking social media engagement).

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Dedicated to

Commissioner Dennis Deer, PhD, Vice Chair of Cook County Health's Board of Directors and Chair of the Cook County Health & Hospitals Committee, whose unwavering dedication as a mental health clinician and advocate paved the way for destigmatizing behavioral health issues and expanding access to care. His contributions continue to shape the future of behavioral health across Cook County, leaving a lasting impact on the lives of many, and we honor his legacy in this report.





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