Contents

Community Health Improvement Plan ............................................................... 3
  Introduction ........................................................................................................ 3
Methodology for the Development of the Hernando County Community Health Improvement Plan ______ 4
  Meeting 1 ........................................................................................................... 4
  Homework 1: Prioritize The Issues ................................................................... 6
  Meeting 2 ........................................................................................................... 7
  Homework 2: Strategies To Improve Hernando County ...................................... 7
  Meeting 3 ........................................................................................................... 7
Hernando County Community Health Improvement Plan Summary 2017 – 2019 ....................... 8
Community Health Improvement Plan Appendix ................................................... 10
  List of Participating Community Partners and Agencies .................................... 11
  Meeting 1: CHIPP September 20, 2016 Meeting Agenda .................................. 12
  Meeting 1: CHIPP September 20, 2016 Meeting Minutes .................................. 13
  Meeting 1: CHIPP September 20, 2016 Meeting Sign-In Sheet .......................... 15
  Homework 1/Survey .......................................................................................... 21
  Meeting 2: CHIPP October 12, 2016 Agenda .................................................... 27
  Meeting 2: CHIPP October 12, 2016 Meeting Minutes ....................................... 28
  Meeting 2: CHIPP October 12, 2016 Sign-In Sheet ........................................... 31
  Homework 2 Email and Survey 2 Results .......................................................... 34
  Meeting Three: CHIPP November 1, 2016 Meeting Agenda .............................. 43
  Meeting Three: CHIPP November 1, 2016 Sign-In Sheet .................................... 44
  List of Available Resources and Assets ............................................................... 46
  Community Health Needs Assessment Summary Report Presentation ................. 47
  Community Health Improvement Work Plan ....................................................... 93
Community Health Improvement Plan

INTRODUCTION
Community Health Improvement Plans (CHIP) begin with the completion of a Community Health Needs Assessment (CHNA). CHNAs serve as a systematic approach to collecting, analyzing and utilizing data to identify priority areas for improving health. Organizations use needs assessments as a call to action, engaging community members through public awareness messages, creating effective programs and policies and collaborating with other organizations to bring positive change to their community. The long-term goal of a Community Health Needs Assessment is to identify health priorities and develop impact strategies with all health-related stakeholders in the community.

The Florida Department of Health in Hernando County engaged the services of WellFlorida Council to facilitate the comprehensive community health needs assessment and the community health improvement planning process. WellFlorida Council is the statutorily designed (F.S. 408.033) local health council that serves Hernando County along with 15 other north central Florida counties. The mission of WellFlorida Council is to forge partnerships in planning, research and service that build healthier communities. WellFlorida Council has been an active participant in Hernando County community health needs assessments for more than ten (10) years. In this capacity, WellFlorida Council staff brings together community members, business leaders and providers in Hernando County to discuss and review primary and secondary data, identify key health priorities and develop community-level strategies to address those health priorities.

The process of identifying health priorities and developing strategies to address these priorities in Hernando County was a year-long process that began with the development and completion of the CHNA. A copy of the comprehensive community health needs assessment can be found at: http://wellflorida.org/wp-content/uploads/2016/12/Hernando-County-Community-Health-Needs-Assessment-Combined-Report-September-29-2016.pdf

At the completion of the comprehensive community health needs assessment, the Community Health Improvement Plan Partnership (CHIPP) and other community partners worked in collaboration with the Florida Department of Health in Hernando County and WellFlorida Council to develop the community health improvement plan. (CHIPP is a partnership comprised of community members, business leaders, providers and representatives from provider locations serving Hernando County. CHIPP meets on a regular basis to develop and implement the Hernando County CHIP.)

The development of the 2017-2019 community health improvement plan followed the Mobilizing for Action through Planning and Partnerships (MAPP) model. MAPP is a community-driven strategic planning process for improving community health. This framework helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is not an agency-focused assessment process; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems. Broad community participation was documented throughout
the needs assessment process and development of the community health improvement plan. CHIPP members collaborated to identify the health priorities and strategies to impact those health priorities. Please see the CHIP Appendix for a list of community partners and agencies who participated in the development of the community health improvement plan.

METHODOLOGY FOR THE DEVELOPMENT OF THE HERNANDO COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

The development of the Community Health Improvement Plan began immediately following the completion of the Community Health Needs Assessment. Three face-to-face meetings were held with the Community Health Improvement Plan Partnership (CHIPP) to discuss, strategize, and develop the Community Health Improvement Plan. Surveys/homework assignments were used as a tool to identify priority community health issues and potential activities and strategies to impact those community health issues.

MEETING 1

A general membership meeting for the Community Health Improvement Plan Partnership (CHIPP) was held from 9:00 – 10:00 a.m. on September 20, 2016 at the Florida Department of Health in Hernando County. The main agenda item for this meeting was the review of the Community Health Needs Assessment Summary Report Presentation that provided critical data and findings from the assessment and the foundation of future discussions. Generally, the health of a community is measured by the physical, mental, environmental and social well-being of its residents. Due to the complex determinants of health, the Community Health Needs Assessment was driven by quantitative and qualitative data collecting and analysis from both primary and secondary data sources. The purpose of the needs assessment was to uncover or substantiate the health needs and health issues in Hernando County such that a community health improvement plan could be developed to address and achieve improved health and quality of life by mobilizing partnerships and taking strategic action. The presentation provided an overview of the process used to complete the community health needs assessment (following the MAPP model) and findings from each of the four MAPP assessments.

The following excerpt includes the intersecting themes and key considerations identified through the community health needs assessment (pages 49 – 50).

**Intersecting Themes and Key Considerations**

Presented below are the intersecting themes, which, in essence, comprise an overview of the major health needs/issues in Hernando County. Following the intersecting themes are the key considerations which are the potential strategic areas of opportunity identified as a result of the community health needs assessment.

**Intersecting Themes/Health Needs and Issues**

- Social Determinants (identified in the Community Health Status Assessment and Forces of Change Assessment)
  - Lower Income than Florida
  - Higher Poverty than Florida
• Lower Educational Attainment than Florida
• Unemployment Rates Higher than Florida
• Racial Disparities (Black/African Americans fare worse than white counterparts)
• Transportation Barriers
• Health Status Measures (identified in the Community Health Status Assessment, Forces of Change Assessment, and Community Themes and Strengths Assessment)
  • Over All Age-Adjusted Death Rate Higher than Florida
  • Top Causes of Death Rates Higher than Florida:
    • Cancer
    • Chronic Lower Respiratory Disease
    • Unintentional Injury
  • Low Physician Rates
    • Access to Primary Care and Specialty Care
  • Hospitalization Rates Higher than Florida
  • Avoidable Emergency Department Rates Higher than Florida
  • Mental Health and Substance Abuse Hospitalization Rates Higher than Florida (inappropriate use of Hospitals)
  • Lower Life Expectancy than Florida
  • Access to Mental Health Care
  • Drug and Alcohol Abuse and Access to Treatment
  • Obesity Increasing
  • Lack of Exercise/Physical Activity

Key Considerations
• Promote a culture of community health as a system of many diverse partners and systems
• Foster a unifying community organizing principle and capacity building system around shared outcomes and measures
• Create a core system of metrics to monitor the performance of a community health system and to inform collective and individual entity investment in community health
• Develop resource availability and appropriate utilization education programs
• Enhance or create preventive programs, services and resources to address behaviors that lead to or exacerbate chronic diseases
• Enhance or create programs to more effectively and efficiently manage chronic diseases
• Enhance or create programs to address obesity and promote attainment of a healthy weight
• Create initiatives to increase the availability of primary, specialty, dental and mental health professionals and services
• Consider programs to address root causes (social determinants of health)
Information gleaned from the community health needs assessment were meant to be used as a guide for the identification of strategic community health issues in Hernando County. CHIPP members received electronic copies of the community health needs assessment including both the narrative documents and the technical appendix. The narrative document provides a summary of the community health needs assessment process and findings. The technical appendix includes the secondary data used to support the Community Health Status Assessment findings. Please see the CHIP Appendix for the agenda, meeting minutes, sign-in sheet and the Community Health Needs Assessment Summary Report Presentation from the September 20th meeting.

**HOMEWORK 1: PRIORITIZE THE ISSUES**

CHIPP members were emailed a link to a survey titled: “Hernando – CHIP – Prioritize the Issues HW#1” on October 5, 2016. The purpose of the survey was to prioritize/rank the key issues identified in the community health needs assessment and to rate the likelihood of improving each key issue in the next 3 years. The survey results were collected using a survey software, Qualtrics. A printed version of the survey can be found in the CHIP Appendix. Results to the survey are summarized in the table below.

**SURVEY 1/HW 1: PRIORITIZE THE ISSUES SURVEY RESULTS**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Strategic Issue</th>
<th>Ranking Score</th>
<th>Likelihood to Improve Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Access to Mental Health Services</td>
<td>54</td>
<td>6.85</td>
</tr>
<tr>
<td>2</td>
<td>Substance Abuse</td>
<td>81</td>
<td>6.12</td>
</tr>
<tr>
<td>3</td>
<td>Access to Primary Care Services</td>
<td>94</td>
<td>6.25</td>
</tr>
<tr>
<td>4</td>
<td>Economy: Affordable Good, Job Industry</td>
<td>111</td>
<td>6</td>
</tr>
<tr>
<td>5</td>
<td>Mental Health Hospitalization Rates</td>
<td>118</td>
<td>NA</td>
</tr>
<tr>
<td>6</td>
<td>Avoidable ER Rates</td>
<td>136</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Obesity</td>
<td>143</td>
<td>6</td>
</tr>
<tr>
<td>8</td>
<td>Avoidable Hospitalizations Rates</td>
<td>144</td>
<td>6.86</td>
</tr>
<tr>
<td>9</td>
<td>Substance Abuse Hospitalization Rates</td>
<td>150</td>
<td>6.75</td>
</tr>
<tr>
<td>10</td>
<td>Racial and Ethnic Disparities</td>
<td>200</td>
<td>4.67</td>
</tr>
<tr>
<td>11</td>
<td>Natural Disasters</td>
<td>221</td>
<td>NA</td>
</tr>
</tbody>
</table>

Each survey respondent was asked to rank the 11 strategic issues identified in the community health needs assessment in order of importance. The strategic issues with the lowest ranking score is the highest priority and the strategic issue with the highest ranking score is the lowest priority. Respondents were then asked to rate the likelihood of improving the strategic issues they ranked 1-3. For example, if Respondent A selected Access to Mental Health Services as his/her number one ranked strategic issues, he/she received a follow-up question related to likelihood of improvement on a 1 – 10 scale with 10 being very likely and 1 being very unlikely.

In total, twenty-four (24) CHIPP members responded to the survey.
MEETING 2
A general membership meeting for the Community Health Improvement Plan Partnership (CHIPP) was held from 9:00 – 10:30 a.m. on October 12, 2016. The main agenda for this meeting was the development of the Community Health Improvement Plan 2017 – 2019. Results from Homework 1 was presented and discussed during the meeting. Through discussion, and consolidation of strategic issues presented in the homework summary, CHIPP members agreed that access to primary care, mental health care, and substance abuse services were crucial. Access to care related issues needed to be included in the CHIP as they are a critical component to the definition of health and a healthy community. Another key piece of that definition was the discussion of the interaction between the social determinants of health and access to care and the previous iterations of CHIP (which focused on healthy weight, diabetes care and prevention and other healthy behaviors) that indicated a need to address and improve quality of life in Hernando County. CHIPP members agreed that a healthy community is one in which everyone in Hernando County has full and equal access to opportunities that enable them to lead healthy lives creating an environment of health equity in Hernando County. Finally, CHIPP members discussed ongoing efforts to build CHIPP membership and capacity such that strategic issues could be resolved through community-wide participation. At conclusion of this meeting, the following three overarching CHIP goals were determined:

1. Goal 1: Improve Access to Care in Hernando County
2. Goal 2: Improve Quality of Life in Hernando County (including social determinants of health and health-related behaviors)
3. Goal 3: Increase CHIPP Capacity (including grant-seeking efforts, increasing membership and active participation in CHIPP)

The October 12th meeting agenda and minutes can be found in the CHIP Appendix.

HOMEWORK 2: STRATEGIES TO IMPROVE HERNANDO COUNTY
The second homework assignment was emailed to all CHIPP members and collected via an online survey. The purpose of the survey was to identify potential objectives and activities for each of the three goals identified at the October 12th CHIPP meeting. Results from the homework assignment were used to facilitate discussion of objectives and activities/strategies used to meet those objectives at the next CHIPP meeting. In total, ten (10) CHIPP members completed Homework 2. A printed version of the survey results can be found in the CHIP Appendix.

MEETING 3
A general membership meeting for the Community Health Improvement Plan Partnership (CHIPP) was held from 9:00 – 12:00 p.m. on November 1st at the Florida Department of Health in Hernando County. The purpose of this meeting was to finalize objectives and strategies for the community health improvement plan and ensure alignment with Healthy People 2020 (HP2020) objectives as HP 2020 so keenly reflects the vision, mission, and direction of the CHIPP. Results from the second homework assignment (survey) were reviewed and then a facilitated discussion took place regarding each of the three overarching goals (Improve Access to Care, Improve Quality of Life, and Increase CHIPP Capacity). Goal 1, Improve Access to Care included discussion of access to primary care, access to mental health care and access to substance abuse
care. Discussions were documented on large easel paper. Social determinants of health were discussed for each issue and where possible, strategies to address social determinants of health were identified. Consideration of available resources and potential community assets were discussed, such that realistic objectives and activities were identified for the community health improvement plan. The Forces of Change Assessment, as completed for the Community Health Needs Assessment was utilized to identify resources and local community assets. Please review the CHIP Appendix for the meeting agenda, list of community resources and assets and the completed Community Health Improvement Plan 2017 - 2019.

HERNANDO COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN SUMMARY 2017 – 2019

Goal 1: Improve access to primary care, mental health care and substance abuse services in Hernando County, Florida.

Strategy: Increase community awareness of available resources.
Strategy: Increase funding.
Strategy: Train and educate.

1. Determine the need for a mental health logic model to be used as a framework for funding applications by March 31, 2018. (Healthy People 2020 MHMD-1 - 12)
2. Increase by 200 the number of individuals who have completed adult or youth mental health first aid training by June 30, 2018. (Healthy People 2020 MHMD-1-12)
4. Promote substance abuse support groups for persons 25 and younger in Hernando County by August 30, 2017. (Healthy People 2020 SA 9, 12 14, 18, 21)
5. Promote low-cost/safety net primary care providers in Hernando County beginning February 1, 2017. (Healthy People 2020 AHS – 3,5,6)
6. By June 30, 2018, the Florida Healthy Babies (FHB) Committee will promote the Edinburgh Postnatal Depression Scale screening tool and referral protocol to Pediatric, OB/GYN, and Primary Care Providers who encounter Post-Partum women.

Goal 2: Improve Quality of Life in Hernando County, Florida

Strategy: Key community stakeholders collaborate to address obesity prevention, physical activity, diabetes, substance abuse, and infant mortality in Hernando County.
1. Increase the percentage of Hernando County residents living at a healthy weight by 2% by March 15, 2018. (Healthy People 2020 NWS-8)

2. By June 30, 2018, increase the percentage of Hernando County adult residents with diagnosed diabetes that have ever taken a course or class in how to manage their diabetes from 48% to 53%. (Healthy People 2020 D-14)

3. By June 30, 2018, increase the number of Hernando County residents who have participated in the CDC National Diabetes Prevention Program by 20 residents. (Healthy People 2020 D14)

4. Support and collaborate with the Hernando Healthy Babies Initiative on a quarterly basis beginning November 1, 2016. (Healthy People 2020 MICH-1)

5. At least one Hernando County organization/business will adopt a tobacco-free policy on their campus/worksite by June 30, 2018. (Healthy People 2020-TU 1, 3, 4, 5, 11)

6. Four Hernando County preschools will become 5210 Healthy Hernando Certified by June 30, 2018.(Healthy People 2020 NWS -1)

**Goal 3: Increase and Enhance CHIPP Capacity**

*Strategy: Promote CHIPP throughout the Hernando County Community.*

1. Grow CHIPP membership to include at least one representative from the School Board and one representative from Hernando County Transit by June 30, 2018.

2. Partner and support at least two resource fairs yearly beginning January 1, 2017.

3. Seek and apply for at least two funding opportunities per calendar year beginning January 1, 2017.

4. Maintain CHIPP member meeting attendance to at least 15 members per meeting beginning January 1, 2017.

5. By August 1 of each year, CHIPP will have promoted its accomplishments through a minimum of 2 venues/platforms.

A detailed work plan for the Community Health Improvement Plan can be found in the CHIP Appendix. This work plan includes activities associated with each objective and champions for each objective. Please note, the State Health Improvement Plan (SHIP) for Florida is currently under development. As such, alignment with the SHIP is not referenced in the Hernando County CHIP.
Community Health Improvement Plan Appendix
LIST OF PARTICIPATING COMMUNITY PARTNERS AND AGENCIES

- Ann-Gayl Ellis, DOH - Hernando
- Kathleen Sauskojus, DOH - Hernando
- Sheena Thompson, Gulfcoast Area Health Education Center
- Robin Napier, DOH - Hernando
- Virginia Crandall, DOH – Hernando
- Amy Anderson, Pasco Hernando State College
- Tina Kinney, NAMI
- Rich Linkul, Oak Hill Hospital
- Mike Walker, City of Brooksville
- Lauren Jolley, Spherion Staffing
- Angie Bonfardino, United Way Hernando
- Tresa Watson, Hernando County Community Anti-Drug Coalition, Inc.
- Cheryl Pollock, Premier Community Health Center
- Judy Everett, Hernando County School Board
- Deanne Karbe, Primerica
- Barbara Sweinburg, Crescent Clinic
- Martha Maner, MidFlorida Community Services Head Start
- Valeria Pianta, Hernando County Economic Development
- Eric Liberty, Clerk of Court
- Jennifer Siam, Bayfront Health
- Amber Slusser, YMCA
- Lesley Hersey, Lutheran Services Florida Health Systems
- Alex Lopez, Hernando County Fire Department
- Tina Miller, DOH – Hernando
- Veda Ramirez, BoCC Hernando County
- Sylvia Torres, Devereux
- Marla Banta, Naturecoast Community Health Center
- Madeline Austin
- Natalie Kahler, Mayor, City of Brooksville
- Captain Harold Hutchinson, Jr., Hernando County Sheriff’s Office
- Maureen Soliman, Crescent Community Clinic
- Jenenne Norman-Vacha, City of Brooksville
- John Mitten, Sr.
## CHIPP General Membership Meeting
### September 20, 2016
9am-10am

<table>
<thead>
<tr>
<th>AGENDA</th>
<th>PRESENTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>I Welcome &amp; Introductions</td>
<td>Duane Chichester</td>
</tr>
<tr>
<td>II Review of August meeting minutes</td>
<td>Ann-Gayl Ellis</td>
</tr>
<tr>
<td>III Treasurer’s Report</td>
<td>Tresa Watson</td>
</tr>
<tr>
<td>IV Community Health Assessment Summary</td>
<td>Lindsey Redding, MPH</td>
</tr>
<tr>
<td>(40 minutes)</td>
<td>Well Florida Council</td>
</tr>
<tr>
<td>V Next Steps</td>
<td>Ann-Gayl/Lindsey</td>
</tr>
<tr>
<td>(5 minutes)</td>
<td>Membership</td>
</tr>
<tr>
<td>VI Misc. Announcements</td>
<td></td>
</tr>
</tbody>
</table>
**Meeting Minutes**

### DISCUSSION

<table>
<thead>
<tr>
<th>I</th>
<th>Welcome &amp; Introductions</th>
<th>Duane Chichester</th>
</tr>
</thead>
<tbody>
<tr>
<td>II</td>
<td>Review and acceptance of August meeting minutes</td>
<td>Ann-Gayl Ellis noted the omission of the discussion about the Lutheran Services grant opportunity. Veda Rameirez is taking lead on this planning grant opportunity. Also omitted from the August Minutes was the discussion about a field trip to Pinellas County Vincent House.</td>
</tr>
<tr>
<td>III</td>
<td>Treasurer’s Report</td>
<td>Tresa Watson reported the current balance in the CHIPP checking account as $3,534.94. Recent deposit of $300.00 unsolicited donation from Kiwanis Club of Brooksville Ridge for 5210 initiative. Recent check written and cleared for $600 for Toro Marketing Group for HDA facebook page management (paid</td>
</tr>
</tbody>
</table>
for by Florida Blueberry Festival)

IV Community Health Assessment Summary Lindsey Redding, MPH
Well Florida Council presented information reflected in the attached powerpoint. Electronic copies of this powerpoint and a copy of the Assessment will be provided to members in the coming days.

V Next Steps Ann-Gayl/Lindsey
The next CHIPP two meetings will be to used the information from the CHA and participant input to develop a 2016-2019 Community Health Improvement Plan. Meeting dates will be sent in the coming days.

VI Misc. Announcements
<table>
<thead>
<tr>
<th>NAME</th>
<th>ORGANIZATION &amp; EMAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ann-Cayl Ellis</td>
<td>Dott Hernandez</td>
</tr>
<tr>
<td>Lesley Hersey</td>
<td>LSF Health Systems</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:lesley.hersey@lsfret.org">lesley.hersey@lsfret.org</a></td>
</tr>
<tr>
<td>Alex Casper</td>
<td>Hernando County Fire</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:alopez@hernandocoounty.us">alopez@hernandocoounty.us</a></td>
</tr>
<tr>
<td>Robin Napoli</td>
<td>Dott Hernando</td>
</tr>
<tr>
<td>Virginia Crandall</td>
<td>Dott Hernando</td>
</tr>
<tr>
<td>Martha Maner</td>
<td>Mid Florida Head Start</td>
</tr>
<tr>
<td>Tim Miller</td>
<td>Dott Hernando</td>
</tr>
<tr>
<td>NAME</td>
<td>ORGANIZATION &amp; EMAIL ADDRESS</td>
</tr>
<tr>
<td>---------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>Lindsay K. Redding</td>
<td>WellFlorida Council <a href="mailto:redding@wellFlorida.org">redding@wellFlorida.org</a></td>
</tr>
<tr>
<td>Tresa Watson</td>
<td><a href="mailto:tresa@acenaps.com">tresa@acenaps.com</a></td>
</tr>
<tr>
<td>Marla Banta</td>
<td>NCCHC <a href="mailto:MARLAFTH@AOL.COM">MARLAFTH@AOL.COM</a></td>
</tr>
<tr>
<td>Kathy Sauskojos</td>
<td>DOH: HERNANDO <a href="mailto:KATHLEEN.SAUSKOJOS@FL.HEALTH.GOV">KATHLEEN.SAUSKOJOS@FL.HEALTH.GOV</a></td>
</tr>
<tr>
<td>Eric Liberty</td>
<td>Clerk of Court <a href="mailto:eliberty@hernandoclerk.org">eliberty@hernandoclerk.org</a></td>
</tr>
<tr>
<td>Tina Kinney</td>
<td>Hernandez <a href="mailto:hernandez.hernando@tempebay.rr.com">hernandez.hernando@tempebay.rr.com</a></td>
</tr>
<tr>
<td>Mackenzie Alestra</td>
<td>BPD <a href="mailto:hnndn.cemcy@rn.com">hnndn.cemcy@rn.com</a></td>
</tr>
<tr>
<td>City of Brooksville</td>
<td>Hernando County Sheriff's Office</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Joe Cobb</td>
<td>Hutchinson Jr.</td>
</tr>
<tr>
<td>Jennifer</td>
<td>Alyssa</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Organization</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------</td>
</tr>
<tr>
<td>Cheryl Pollock</td>
<td>Premier Pool HC</td>
</tr>
<tr>
<td>Amber Slussier</td>
<td>YMCA</td>
</tr>
<tr>
<td>Mike Walker</td>
<td>C.F. of Brookville</td>
</tr>
<tr>
<td>Bessie Slussier</td>
<td>Current Community Clinic</td>
</tr>
<tr>
<td>Ann Anderson</td>
<td></td>
</tr>
</tbody>
</table>
HOMEWORK 1/SURVEY

Hernando - CHIP - Prioritize The Issues HW #1 - Copy

Q1 The Florida Department of Health in Hernando County engaged WellFlorida Council to assist the Community Health Improvement Plan Partnership to identify strategic issues, goals and objectives to be included in the Community Health Improvement Plan. This short survey will help prioritize the key issues identified in the Community Health Needs Assessment.

Q2 The following are key issues identified through the needs assessment process. Please rank, in order of most importance, each of the following key issues. The key issue you believe is most important to address in the Community Health Improvement Plan, should be ranked #1. Click on the options and drag them to the appropriate ranked position. Please rank all key issues 1 - 11.

_____ Avoidable Hospitalizations rates (1)
_____ Avoidable ER rates (2)
_____ Mental Health Hospitalization Rates (3)
_____ Substance Abuse Hospitalization Rates (4)
_____ Substance Abuse (5)
_____ Access to Mental Health Services (6)
_____ Access to Primary Care Services (7)
_____ Obesity (rates of) (8)
_____ Natural Disasters (preparation for) (9)
_____ Economy: Affordable Goods, Job Industry (10)
_____ Racial and Ethnic Disparities (11)
Q3 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Avoidable Hospitalizations can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

Q5 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Mental Health Hospitalizations can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)
Q6 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Substance Abuse Hospitalizations can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

Q8 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Substance Abuse can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)
Answer If The following are key issues identified through the needs assessment process. Please rank, in ord... Access to Mental Health Services Is Less Than or Equal to 5

Q9 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Access to Mental Health Services can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

Answer If The following are key issues identified through the needs assessment process. Please rank, in ord... Access to Primary Care Services Is Less Than or Equal to 5

Q10 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Access to Primary Care Services can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)
Answer If The following are key issues identified through the needs assessment process. Please rank, in ord... Obesity (rates of) Is Less Than or Equal to 5

Q11 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Rates of Obesity can be improved (lowered) in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

Answer If The following are key issues identified through the needs assessment process. Please rank, in ord... Natural Disasters (preparation for) Is Less Than or Equal to 5

Q12 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood that preparation for Natural Disasters can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)
Answer: If the following are key issues identified through the needs assessment process. Please rank, in order...

**Economy: Affordable Goods, Job Industry is Less Than or Equal to 5**

Q13 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood the Economy (including affordable goods and the job industry) can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

**Racial and Ethnic Disparities Is Less Than or Equal to 5**

Q14 On a scale of 1 - 10 (with 10 being extremely likely; 1 being not likely at all); what is likelihood Racial and Ethnic Disparities can be improved in the next 3 years?

- 0 (0)
- 1 (1)
- 2 (2)
- 3 (3)
- 4 (4)
- 5 (5)
- 6 (6)
- 7 (7)
- 8 (8)
- 9 (9)
- 10 (10)

Q15 Thank you for completing the survey. These results will be shared at the upcoming CHIPP meeting on October 12th from 9:00 am - 12:00 pm. During this meeting, we will confirm priority issues and begin setting goals for each issue. Should you have questions or concerns, please contact Lindsey K. Redding, MPH, Director of Community Initiatives at 352-538-2988 or lredding@wellflorida.org
MEETING 2: CHIPP OCTOBER 12, 2016 AGENDA

CHIPP General Membership Meeting
October 12, 2016
9am-10:30am

AGENDA

<table>
<thead>
<tr>
<th>TOPIC</th>
<th>PRESENTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>I   Welcome &amp; Introductions</td>
<td>Duane Chichester</td>
</tr>
<tr>
<td>II  Review of September meeting minutes</td>
<td>Ann-Gayl Ellis</td>
</tr>
<tr>
<td>III 2016-19 Community Health Assessment Planning</td>
<td>Lindsey Redding, MPH</td>
</tr>
<tr>
<td>IV  Next Step</td>
<td>WellFlorida Council</td>
</tr>
<tr>
<td>VI  Misc. Announcements</td>
<td>Membership</td>
</tr>
</tbody>
</table>
CHIPP General Membership Meeting Minutes
October 12, 2016
9am-10:30am

DISCUSSION

In Attendance:
Barbara Sweinberg, Ann-Gayl Ellis, Lauren Jolly, Martha Maner, Robin Napier, Ginni Crandall, Angie Bonfardino, Valerie Pianta, Tina Kinney, Eric Liberty, Tresa Watson, Jennifer Siem, Cheryl Pollock, Kathy Sauskojus

I  Welcome and Introduction of Lindsey Redding

II  2016-19 Community Health Assessment Planning Process
Lindsey explained that today’s meeting was to establish what the priorities the partnership wanted to concentrate on for 2016-2017. The November 1st meeting would be to establish what the strategies and action items under each priority would be for the first year of the three year cycle.

Lindsey shared the results of the Survey Monkey ranking exercise that CHIPP members were asked to complete prior to today’s meeting. Approximately 20 members completed the exercise (results attached). The group initially identified mental health, substance abuse and access to primary care as the three priorities to focus on. There was some discussion about maintaining some progress on strategies from previous years, i.e., healthy weight, CHIPP infrastructure, diabetes and 211. Recommendation was made to have an “ongoing
strategies” priority area so that continued support could occur and progress made would not be abandoned. There was also discussion about the inclusion of the Healthy Babies (decreasing infant mortality) initiative in the new plan although this particular topic was not identified as a community priority in the Community Health Assessment or subsequent CHIPP surveys. Inclusion of the Healthy Babies initiative in every Florida county CHIP comes at the request of the State Surgeon General. Dept of Health staff in cooperation with community members has this initiative already underway with identified strategies and action items.

III Next Step

CHIPP members will receive another survey via email to complete before next meeting (Nov 1). Again, this will allow Lindsey to come to the meeting with some consensus already in place which will allow for more effective use of during the meeting.
IV  Next Meeting

Tuesday, November 1, 9-noon (please note this extended meet time)
Dept. of Health in Hernando County
7551 Forest Oaks Blvd
Spring Hill

V  Misc. Announcements

Angie Bonfardino (United Way) announced that Walgreens, United Way and Dept of Health have teamed up to provide free flu shots at the People Helping People meal site on Sunday, October 16 at the Senior Center in Spring Hill.

Tina Kinney (NAMI) announced 10 week Peer to Peer series currently be offered by NAMI.

Jen Siem announced a new project being spearheaded by five local partners. “Hernando Cares” is a collection of behavioral health resource and service information for residents and visitors.

Jen also announced the $65.00 mammogram special Bayfront is offering during October and the Healthy Pregnancy Event scheduled for 10/20 at 7pm at Bayfront Spring Hill.

Meeting Adjourned 10:40am
MEETING 2: CHIPP OCTOBER 12, 2016 SIGN-IN SHEET
<table>
<thead>
<tr>
<th>NAME</th>
<th>ORGANIZATION &amp; EMAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barbara Greenberg</td>
<td>Crescent Community Clinic <a href="mailto:admin@crescentclinic.org">admin@crescentclinic.org</a></td>
</tr>
<tr>
<td>Ann Coyle Eli</td>
<td>DOH Hernando</td>
</tr>
<tr>
<td>Hadrian Savitska</td>
<td>DOH Hernando</td>
</tr>
<tr>
<td>Robin Navia</td>
<td>DOH Hernando</td>
</tr>
<tr>
<td>Lauren Kelley</td>
<td>Spheroon Staffing</td>
</tr>
<tr>
<td>Martha Maner</td>
<td>MidFl. Commission Head Start</td>
</tr>
<tr>
<td>Eugene Crandle</td>
<td>FDOH Hernando</td>
</tr>
<tr>
<td>NAME</td>
<td>ORGANIZATION &amp; EMAIL ADDRESS</td>
</tr>
<tr>
<td>---------------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>Angie Benjardino</td>
<td>United Way</td>
</tr>
<tr>
<td>Valerie Pianta</td>
<td>Hernando County Ec Dev</td>
</tr>
<tr>
<td>Tina Kinney</td>
<td>NAMI</td>
</tr>
<tr>
<td>Eric Liberty</td>
<td>Clerk of Court</td>
</tr>
<tr>
<td>West Watson</td>
<td>HCCADC</td>
</tr>
<tr>
<td>Jennifer Tom</td>
<td>Bayfront Health</td>
</tr>
<tr>
<td>Cheryl Pollock</td>
<td>Premier ctc</td>
</tr>
</tbody>
</table>
HOMEWORK 2 EMAIL AND SURVEY 2 RESULTS

Dear CHIPP Members:

Subject: Homework 2 and Preliminary CHIP Summary

A facilitated discussion was held at the Wednesday, October 12th CHIPP meeting with the purpose of identifying key issues to be addressed in the next Community Health Improvement Plan. The following key issues were determined as the Priority Issues of this year's CHIP:

- Access to Primary Care
- Access to Mental Health Care
- Access to Substance Abuse Care

We also discussed the interaction between the priorities issues above and the social determinants of health (definition below).

According to HealthyPeople.gov:

*Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.*

Finally, we discussed the previous Community Health Improvement Plan which included efforts related to CHIPP capacity building, healthy weight initiatives, and other ongoing activities that will continue into this upcoming year.

To formalize the CHIP, my recommendation, following examples set forth by the National Association for County and City Health Officials (NACCHO) and the Public Health Accreditation Board (PHAB) is to develop three overarching goals related to: 1) Access to Care; 2) Quality of Life; and 3) Capacity Building. Each associated Objective Topic will need to be SMART (Specific, Measurable, Achievable, Relevant and Time-bound).

I.  **Goal 1: Improve Access to Care in Hernando County**

   Objective 1 Topic: Access to Primary Care

   Objective 2 Topic: Access to Mental Health Care

   Objective 3 Topic: Access to Substance Abuse Care

II. **Goal 2: Improve Quality of Life in Hernando County (include social determinants of health and health-related behaviors)**
Objective 1 Topic: Improve social determinants of health (What social determinants of health are impacting access to primary care, access to mental health care, access to substance abuse care? – What can CHIPP do to break down those barriers?)

Objective 2 Topic: Behaviors that support healthy lifestyle (healthy weight activities, substance abuse prevention activities, etc. would fall under this objective)

III. Goal 3: Increase CHIPP Capacity (grant-seeking, increased membership activity, etc.)

Homework Assignment 2

Our next meeting is November 1, from 9:00 am – 12:00 pm. During the November 1 meeting we will finalize the CHIP by identifying objectives, strategies used to meet those objectives, and metrics used to measure progress towards successful completion of strategies.

In order to prepare for the November 1 meeting, please complete the following survey by Midnight on Sunday, October 30th. This survey will take approximately 15 minutes to complete. I will summarize survey results and present them at the November 1 meeting. These results will help launch our discussions throughout the meeting. Please make every reasonable effort to ensure your responses are clear and understandable.

Should you have questions or concerns regarding the survey, please contact me, at lredding@wellflorida.org or 352-313-6500 ext. 110

Link to Survey: https://survey.co1.qualtrics.com/SE/?SID=SV_4ZaYxvzn4uWaFJT

Thank you,

Lindsey K. Redding, MPH
Director of Community Initiatives
Q1 - Please identify at least 1 strategy that will improve access to primary care for residents of Hernando County.

<table>
<thead>
<tr>
<th>Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct everyone to call the 211 number that would have all of the primary care locations/contacts/emails and the insurance plans accepted. The physician offices would be responsible for keeping 211 updated like everyone else.</td>
</tr>
<tr>
<td>Increase knowledge of primary care physicians taking new patients in the county.</td>
</tr>
<tr>
<td>Identifying existing primary care/health &amp; human services, comparing that list to what is already provided, then filling in the gaps of un-met needs and potential resources to be listed.</td>
</tr>
<tr>
<td>Create a sliding scale for the cost of services dependent on what the individual earns</td>
</tr>
<tr>
<td>Increasing Medicaid reimbursement</td>
</tr>
<tr>
<td>Increase awareness of safety-net/low-cost clinics through the promotion of 211 on at least 2 social media outlets every month beginning January 2017.</td>
</tr>
<tr>
<td>I think we should look into public service billboards. They are an amazing marketing tool that really works. Some companies are willing to provide space free for PSA's.</td>
</tr>
<tr>
<td>n/a</td>
</tr>
<tr>
<td>Transportation on The Bus for low-income residents who are handicapped. Crescent Community Clinic provides access to chronic health care for non-elderly that do not qualify for Affordable Care Act Marketplace Insurance. However, reaching the general public who are eligible for healthcare at the clinic has not been as successful as desired even though last year there were 9575 patient visits at clinic. With the addition of Premier Health access might improve</td>
</tr>
<tr>
<td>n/a</td>
</tr>
</tbody>
</table>
Q2 - Please identify at least 1 strategy that can improve access to mental health care for residents of Hernando County.

Same as above.

1. Create or update phone numbers of local providers for Mental health care using 211. 2. Inform public of the continuum of care for Mental Health via websites, prevention services, 211, or discharge paperwork from ER.

Increasing support for the Vincent House will not only raise awareness, but will provide easy access to mental health resources and referrals. The leadership and Vincent House staff is crucial to the success of this program.

Campaign for more funding to assist in raising awareness of the dire need for mental health support and services.

Increasing public transportation options.

Increase awareness to clinics and Hospitals available in Hernando County through Radio, Newspapers and posters beginning January 2017.

It's all about awareness. I think we should look into public service billboards. They are an amazing marketing tool that really works. Some companies are willing to provide space free for PSAs. Identifying key partner organizations like libraries, The Bus, Utility payment places - WREC office, WalMart, AMSCOT, pharmacies, etc. for placement of information.

Identify at least 5 additional Mental Health First Aid trainers for the community to offer trainings to the community members. Hold at least 10 Mental Health First Aid trainings for the community throughout the year.

Inmates incarcerated in Hernando County Detention Center, Baker Act patients without insurance who are hospitalized may not be provided information about access to free aftercare of follow-up services in a timely manner.

By March 30, 2017, all Hernando County Obstetricians, Gynecologists, Pediatricians, and Primary Care providers will be surveyed as to use of Edinbourgh Post Natal Depression Survey. By June 30, the logic model initiated in 2015-16 year will be completed.
Q3 - Please identify at least 1 strategy that can improve access to substance abuse care for residents of Hernando County.

<table>
<thead>
<tr>
<th>Please identify at least 1 strategy that can improve access to substance ab...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Same as above</td>
</tr>
<tr>
<td>Implement a local Marchman act receiving facility. 2. Improve funding equity for this county to increase capacity.</td>
</tr>
<tr>
<td>Stronger marketing on where to go and resources.</td>
</tr>
<tr>
<td>Campaign for more funding to assist in raising awareness of the dire need for substance abuse support and services.</td>
</tr>
<tr>
<td>Public transportation</td>
</tr>
<tr>
<td>Place posters and include information in 211 and other social media of locations of where to get help for substance abuse.</td>
</tr>
<tr>
<td>Increase availability of affordable services at a local level</td>
</tr>
<tr>
<td>Increase awareness for major businesses/agencies around substance abuse rates for county and resources available for referrals.</td>
</tr>
<tr>
<td>N/A</td>
</tr>
<tr>
<td>By February 28, 2017, CHIPP will research substance abuse support group models for youth (25 years and younger).</td>
</tr>
</tbody>
</table>
Q4 - Please identify at least 1 social determinant of health impacting access to primary care services in Hernando County.

Please identify at least 1 social determinant of health impacting access to...

Of course transportation. Set up an UBER program where people can call 211 and they send an UBER car to take them to their physician and take them home when done. If necessary they call 211 again and have another UBER person take them home. Most will not want to hang around until they are done.

1. Employment. 2. Safe and affordable Housing 3. transportation

By our community being aware of common trends and local health factors, we can better address the barriers holding residents back from accessing needed primary care services

Economic and lack of education

Education level

N/A

Unemployment

Access to healthy activity opportunities and educational opportunities around healthy eating. Providing more healthy weight activities to improve overall quality of health for individuals.

The BUS does not run on Saturday which limits individuals without insurance or transportation to get to Crescent Community Clinic

lack of insurance for low income healthy adults (can't afford Obamacare and don't qualify for Medicaid).
Q5 - Please identify at least 1 social determinant of health that is impacting access to mental health care for residents of Hernando County.

<table>
<thead>
<tr>
<th>Social Determinant of Health</th>
<th>Impact on Mental Health Care Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited Transportation</td>
<td>Access. See above.</td>
</tr>
<tr>
<td>Limited Coping Skills</td>
<td>1. Limited Transportation.</td>
</tr>
<tr>
<td>Shortage of Psychiatrist in the entire nation</td>
<td>3. Flawed Natural Support Systems.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Stigma around mental health and what it looks like</td>
<td>Insufficient facilities and services to support those in need</td>
</tr>
<tr>
<td></td>
<td>Raising mental health awareness and taking new approaches</td>
</tr>
<tr>
<td></td>
<td>Education around mental health and overall well-being</td>
</tr>
<tr>
<td></td>
<td>Stigma about mental illnesses needs to be addressed by elected officials and general public</td>
</tr>
<tr>
<td></td>
<td>Access to resources</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>lack of jail diversion program for those with mental illness</td>
</tr>
</tbody>
</table>
Q6 - Please identify at least 1 social determinant of health that is impacting access to substance abuse care for residents of Hernando County.

<table>
<thead>
<tr>
<th>Social Determinant of Health</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>same as above.</td>
<td></td>
</tr>
<tr>
<td>1. Employment. Safe and affordable Housing 3. Transportation</td>
<td></td>
</tr>
<tr>
<td>Easy access to alcohol and drugs within our schools, high traffic residential areas, etc.</td>
<td></td>
</tr>
<tr>
<td>Insufficient facilities and services to support those in need</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Income/Financial Resources</td>
<td></td>
</tr>
<tr>
<td>Affordability of substance abuse programs for those looking for assistance</td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Access to transportation</td>
<td></td>
</tr>
</tbody>
</table>
Q7 - Please identify at least 1 strategy that can help build CHIPP capacity in Hernando County.

Please identify at least 1 strategy that can help build CHIPP capacity in H...

Have some part time admin support to help communicate out to the CHIPP member organizations.

1. Improved advertisement (Chamber, Faith Communities etc). 2. Convenient Hours for meetings. 3. Demonstrate outcomes regularly.

I recommend for every CHIPP member to bring a guest with them every meeting to help expand our outreach and awareness. The guest is welcomed to come back

Publicize what changes we are making in the community. Media needs to be increased.

Funding for Vincent House

Set up web site about CHIPP and it's goals.

Getting the word out - one message addressing the benefits.

Host a community resource day inviting non-profits, community resource groups, entities within the county that people can connect to not only around the three directives but general resource information available in our community.

More visibility about CHIPP and the mission of the organization Reaching out to businesses to join CHIPP Personal invitation by CHIPP members to non-profit organizations

Continue annual presentation to Board of County Commissioners; Present to City of Brooksville Commission annually; Continue to invite new partners; Aggressively seek out funding opportunities (outside of Hernando County) to support local initiatives
MEETING THREE: CHIPP NOVEMBER 1, 2016 MEETING AGENDA

CHIPP Meeting

Date: November 1, 2016
Time: 9:00 AM – 12:00 PM
Location: Department of Health in Hernando County,
7551 Forest Oaks Blvd, Spring Hill, FL

AGENDA:

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 – 9:10 AM</td>
<td>Welcome and Introductions</td>
<td>Ann-Gayl Ellis and Everyone</td>
</tr>
<tr>
<td>9:10 – 9:30 AM</td>
<td>Summary from last CHIPP and HW Assignment #2</td>
<td>Lindsey K. Redding</td>
</tr>
<tr>
<td>9:30 – 10:10 AM</td>
<td>Discuss Strategic Planning for Improving Access to Primary Care</td>
<td>Lindsey K. Redding and Everyone</td>
</tr>
<tr>
<td>10:10 – 10:50 AM</td>
<td>Discuss Strategic Planning for Improving Access to Mental Health Care</td>
<td>Lindsey K. Redding and Everyone</td>
</tr>
<tr>
<td>10:50 – 11:30 AM</td>
<td>Discuss Strategic Planning for Improving Access to Substance Abuse Care</td>
<td>Lindsey K. Redding and Everyone</td>
</tr>
<tr>
<td>11:30 – 11:55 AM</td>
<td>Discuss Strategic Planning for Building CHIPP Capacity</td>
<td>Lindsey K. Redding and Everyone</td>
</tr>
<tr>
<td>11:55 – 12:00 PM</td>
<td>Wrap Up</td>
<td>Lindsey K. Redding</td>
</tr>
<tr>
<td>NAME</td>
<td>ORGANIZATION</td>
<td></td>
</tr>
<tr>
<td>---------------------</td>
<td>-------------------------------</td>
<td></td>
</tr>
<tr>
<td>Jan-Cayl Ellis</td>
<td>Dept of Health-Hernando</td>
<td></td>
</tr>
<tr>
<td>Kathleen Saukkoos</td>
<td>DOH - Hernando</td>
<td></td>
</tr>
<tr>
<td>Sheena Thompson</td>
<td>AHEC</td>
<td></td>
</tr>
<tr>
<td>Robbin Marlow</td>
<td>DOH - Hernando</td>
<td></td>
</tr>
<tr>
<td>Virginia Crandall</td>
<td>HCSO</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amy Anderson</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tina Kenny</td>
<td>NAMI</td>
<td></td>
</tr>
<tr>
<td>Rich Linder</td>
<td>OTH</td>
<td></td>
</tr>
<tr>
<td>Mike Walker</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colleen Molly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Angie Bertandino</td>
<td>United Way</td>
<td></td>
</tr>
<tr>
<td>Tresa Wase</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cheryl Pollock</td>
<td>Premier</td>
<td></td>
</tr>
<tr>
<td>Judy Evenas</td>
<td>HCSO  <a href="mailto:everett_g@hcsb.k12.fl.us">everett_g@hcsb.k12.fl.us</a></td>
<td></td>
</tr>
<tr>
<td>Jeanne Karbe</td>
<td>Primerica  <a href="mailto:jkarbe@tampabay.rr.com">jkarbe@tampabay.rr.com</a></td>
<td></td>
</tr>
</tbody>
</table>
LIST OF AVAILABLE RESOURCES AND ASSETS
The following list of available resources and assets were determined through the Forces of Change Assessment.

Large senior population (insured) and experienced workforce
Seasonal population creating diversity
Recreational areas and many free areas for physical activity
Clean air and water
Hernando County is a destination for eco-tourism
Population is growing
Technological advances may mean increased ability to provide services to rural residents
New OB center at Oak Hill Hospital
FQHC in Hernando County
Many partners and agencies participating in community health improvement including schools, private businesses, health care providers, employers, nonprofit organization, etc. (Refer to List of Agencies/Partners in Appendix)
Pasco-Hernando State College provides volunteers and new to the workforce employees for local positions
Safety-net providers such as Crescent Community Clinic working to provide care to uninsured and underinsured residents
Newly funded planning grant to address criminal justice mental health and substance abuse
Large faith-based community
Topics of Discussion

- Community Health Needs Assessment Overview
- Community Health Status Assessment
- Community Themes and Strengths Assessment
- Forces of Change Assessment
- Local Public Health System Assessment
- Key Insights
WellFlorida History

- WellFlorida Council is a private, 501C3 nonprofit, which has served the residents of north central Florida since 1969.

- We are one of the state’s 11 local health councils, (Section 408.033 F.S.) a network of nonprofit agencies that conduct regional health planning and implementation activities.

- WellFlorida’s mission is to forge partnerships in planning, research and service that build healthier communities.
How does WellFlorida support the mission?

- Manager for regional programs
  - HIV/AIDS
  - Maternal and Infant Health
  - Rural Health
- Needs Assessments
  - Community Health Improvement Planning
- Coalition Building
- Strategic Planning
- Certificate of Need
- Health Insurance Marketplace
- Program Evaluation
- Grant Research, Writing and Management
Community Health Needs Assessment
What is a CHNA?

- Systematic approach to collecting, analyzing and utilizing data to identify priority areas for improving health.

- The CHNA Report can be used to:
  - Create a call to action
  - Engage community members
  - Create programs and policies
  - Collaborate with others

- Long-term goal of a CHNA: identify health priorities and develop strategies with stakeholders in the community
CHNA Methodology: MAPP

- Mobilizing for Action through Planning and Partnerships
  - Mobilizing – community engagement
  - Action – implementation of a health improvement plan
  - Planning – built on strategic planning concepts
  - Partnerships – the public’s health is more than the concern of one entity
MAPP is...

- A community-wide strategic planning process for improving public health
- A method to help communities prioritize public health issues, identify resources for addressing them, and take action
- A method for facilitating the CHNA
MAPP Overview

Diagram:
- Community Health Status Assessment
- Forces of Change Assessment
- Community Themes & Strengths Assessment
  - Organize for Success
  - Partnership Development
  - Visioning
- Four MAPP Assessments
- Identify Strategic Issues
- Formulate Goals and Strategies
- Evaluate
- Plan
- Action
- Implement
- Local Public Health System Assessment
WHAT DOES THE DATA TELL US?

Community Health Status Assessment
Community Health Status Assessment Highlights

Population

- 172,778 in Hernando
- 89% white, 5% black, .4% AI/AN, 2.4% Asian, Other 1.9% and two or more races 2%
Percent of Population By Age Groups, 2010

- 0-4
- 5-9
- 10-14
- 15-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 85+

Hernando County vs. Florida
Life Expectancy Comparisons

- US Males
- Hernando Males
- Florida Males
- US Females
- Hernando Females
- Florida Females
Poverty
More on Poverty

- Zip code tabulation areas with highest concentration of poverty:
  - Brooksville (34601): 25.6%
  - Brooksville (34602): 23.2%

- Zip code tabulation areas with lowest concentration of poverty:
  - Brooksville (34613): 10.1%
  - Brooksville (34614): 10.9%

- Racial Disparities and Poverty:
  - 14.3% of White VS 40.5% of Black
Income and Unemployment

- Lower incomes in Hernando than Florida
- Higher unemployment in Hernando than Florida
Death Rates

- Age-adjusted death rate in Hernando is higher than in Florida.
Top Causes of Death (rate per 100,000)

**Hernando**
1. Cancer (176.2)
2. Heart Disease (179.6)
3. Chronic Lower Respiratory Disease (36.2)
4. Unintentional Injuries (46.3)
5. Stroke (37.8)

**Florida**
1. Heart Disease (206.1)
2. Cancer (159.1)
3. Chronic Lower Respiratory Disease (30.2)
4. Stroke (44.6)
5. Unintentional Injuries (36.7)
Flu vaccination rates have declined, but are still higher than the state of Florida.

In 2013, 19.5% were current smokers, an increase since 2010 when only 17.9% were smokers.

Colorectal Cancer screenings have increased in Hernando (but the state numbers are declining).

Breast and Cervical Cancer screenings have declined in Hernando (in 2013, 36.6% of women 18+ reported having a PAP-test in the previous year).

Improved percentage of adults self-monitoring Diabetes in Hernando has increased since 2010.

Percent of adults who are overweight or obese is 68.7% in Hernando.
Access to Health Services

- 20% on Medicaid
  - Brooksville (34601) highest concentration of Medicaid Eligible
- Physician rates per 100,000 lower in Hernando than Florida
  - 2014 - 2015: 133.7 in Hernando VS 259.3 in Florida (total physicians)
  - 2014 – 2015: 2.8 in Hernando VS 10.2 in Florida (OB/GYN)
Community Themes and Strengths Assessment

WHAT DOES THE COMMUNITY SAY ABOUT THE HEALTH OF HERNANDO COUNTY RESIDENTS?
Survey Types

Three Surveys:

- Community Member Survey – general population (n=370)
- Provider Survey – health, mental health/substance abuse, oral healthcare providers (n=51)
- Business Leader Survey – managers, business owners (n=72)

Collected Surveys May 1 – July 31
| Demographics | Community Members | | Providers | | Business Leaders | |
|--------------|------------------|---|--------|---|--------|
| | Number | Percent | Number | Percent | Number | Percent |
| **Age Group** | | | | | | |
| 0-17 | 1 | .30 | 0 | 0 | 0 | 0 |
| 18-24 | 13 | 3.6 | 0 | 0 | 0 | 0 |
| 25-29 | 16 | 4.4 | 0 | 0 | 2 | 2.8 |
| 30-39 | 63 | 17.5 | 10 | 21.7 | 5 | 7.0 |
| 40-49 | 65 | 18.1 | 12 | 26.1 | 19 | 26.8 |
| 50-59 | 103 | 28.6 | 9 | 19.6 | 27 | 38.0 |
| 60-69 | 67 | 18.6 | 11 | 23.9 | 12 | 17.0 |
| 70-79 | 23 | 6.4 | 2 | 4.4 | 3 | 4.2 |
| 80 or older | 5 | 1.4 | 0 | 0 | 0 | 0 |
| Preferred not to answer | 4 | 1.1 | 2 | 4.4 | 3 | 4.2 |
| **Race/Ethnic Group** | | | | | | |
| Asian Pacific Islander | 2 | .6 | 2 | 4.4 | 1 | 1.4 |
| Black or African American (Non-Hispanic) | 18 | 5.0 | 3 | 6.5 | 0 | 0 |
| American Indian/ Alaskan Native | 0 | 0 | 0 | 0 | 1 | 1.4 |
| White (Non-Hispanic) | 283 | 78.8 | 29 | 63.0 | 62 | 87.3 |
| Hispanic/ Latino | 34 | 9.5 | 5 | 10.9 | 3 | 4.2 |
| Multiracial/ Multiethnic | 4 | 1.1 | 0 | 0 | 1 | 1.4 |
| Other | 4 | 1.1 | 2 | 4.4 | 1 | 1.4 |
| Preferred not to answer | 14 | 3.9 | 5 | 10.9 | 2 | 2.8 |
### Most important factors that define a healthy community

<table>
<thead>
<tr>
<th>Factor</th>
<th>Community Members (n=370)</th>
<th>Providers (n=51)</th>
<th>Business Leaders (n=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Access to healthcare (54.4)</td>
<td>Access to healthcare (76.1)</td>
<td>Access to healthcare (48.6)</td>
</tr>
<tr>
<td>2</td>
<td>Job opportunities for all levels of education (35.6)</td>
<td>Healthy behaviors and healthy lifestyles (43.5)</td>
<td>Healthy economy (38.9)</td>
</tr>
<tr>
<td>3</td>
<td>Healthy behaviors and healthy lifestyles (27.8)</td>
<td>Job opportunities for all levels of education (39.1)</td>
<td>Job opportunities for all levels of education (37.5)</td>
</tr>
<tr>
<td>4</td>
<td>Affordable goods/services (23.3)</td>
<td>Low crime/safe neighborhoods (21.7)</td>
<td>Healthy behaviors and healthy lifestyles (30.6)</td>
</tr>
</tbody>
</table>
Behaviors with the greatest negative impact on overall health

<table>
<thead>
<tr>
<th>Factor</th>
<th>Community Members (n=370)</th>
<th>Providers (n=51)</th>
<th>Business Leaders (n=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Drug abuse (62.5)</td>
<td>Drug abuse (78.3)</td>
<td>Drug abuse (65.3)</td>
</tr>
<tr>
<td>2</td>
<td>Alcohol abuse (36.4)</td>
<td>Alcohol abuse (41.3)</td>
<td>Alcohol abuse (31.9)</td>
</tr>
<tr>
<td>3</td>
<td>Violence (27.5)</td>
<td>Not using health care services appropriately (26.1)</td>
<td>Dropping out of school (30.6)</td>
</tr>
<tr>
<td>4</td>
<td>Distracted driving (25.3)</td>
<td>Tobacco use (21.7)</td>
<td>Eating unhealthy foods/drinks (27.8)</td>
</tr>
</tbody>
</table>
### Most important health problems in a community

<table>
<thead>
<tr>
<th>Factor</th>
<th>Community Members (n=370)</th>
<th>Providers (n=51)</th>
<th>Business Leaders (n=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Substance abuse/drug abuse (57.2)</td>
<td>Substance abuse/drug abuse (76.1)</td>
<td>Substance abuse/drug abuse (58.3)</td>
</tr>
<tr>
<td>2</td>
<td>Mental health problems (47.2)</td>
<td>Mental health problems (65.2)</td>
<td>Obesity (54.2)</td>
</tr>
<tr>
<td>3</td>
<td>Access to primary care (36.1)</td>
<td>Access to primary care (41.3)</td>
<td>Mental health problems (52.8)</td>
</tr>
<tr>
<td>4</td>
<td>Obesity (35.0)</td>
<td>Obesity (37.0)</td>
<td>Access to primary care (31.9)</td>
</tr>
</tbody>
</table>
Rate the overall health of residents

<table>
<thead>
<tr>
<th>Rating</th>
<th>Community Members (n=370)</th>
<th>Providers (n=51)</th>
<th>Business Leaders (n=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Community (%)</td>
<td>Individual (%)</td>
<td>Community (%)</td>
</tr>
<tr>
<td>Very unhealthy</td>
<td>6.1</td>
<td>1.7</td>
<td>17.4</td>
</tr>
<tr>
<td>Unhealthy</td>
<td>33.3</td>
<td>11.7</td>
<td>54.5</td>
</tr>
<tr>
<td>Somewhat healthy</td>
<td>53.1</td>
<td>42.8</td>
<td>28.3</td>
</tr>
<tr>
<td>Healthy</td>
<td>7.2</td>
<td>37.2</td>
<td>0</td>
</tr>
<tr>
<td>Very healthy</td>
<td>.3</td>
<td>6.7</td>
<td>0</td>
</tr>
<tr>
<td>Preferred not to answer</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Reasons why is obesity a public health issue

**Major Reasons:**

- Fast food is inexpensive and easy to find
- People spend too much time in front of the TV, video games and computer screens
- Health foods are expensive
- People don’t want to change
<table>
<thead>
<tr>
<th>Likelihood to participate in Activity</th>
<th>Community Members (n=370)</th>
<th>Business Leaders (n=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Highly Likely</strong></td>
<td>Use low-cost exercise options</td>
<td>Use nature trails</td>
</tr>
<tr>
<td></td>
<td>Use nature trails</td>
<td>Use low-cost exercise options</td>
</tr>
<tr>
<td><strong>Likely</strong></td>
<td>Community organized biking/walking/jogging</td>
<td>Community organized biking/walking/jogging</td>
</tr>
<tr>
<td></td>
<td>Attend healthy cooking and/or nutrition classes</td>
<td>Attend healthy cooking and/or nutrition classes</td>
</tr>
<tr>
<td><strong>Neither Unlikely or Likely</strong></td>
<td>Participate in a diabetes educational empowerment program</td>
<td>Participate in a diabetes self-management program</td>
</tr>
<tr>
<td></td>
<td>Participate in a diabetes self-management program</td>
<td></td>
</tr>
<tr>
<td><strong>Unlikely</strong></td>
<td>Participate in a community weight loss challenge</td>
<td>Attend healthy cooking and/or nutrition classes</td>
</tr>
<tr>
<td><strong>Highly Unlikely</strong></td>
<td>Visit Facebook pages or other social media concerning healthy eating and exercise</td>
<td>Visit Facebook pages or other social media concerning healthy eating and exercise</td>
</tr>
</tbody>
</table>
Forces of Change Assessment

WHAT ARE OUR OPPORTUNITIES AND THREATS?
What is the Forces of Change Assessment?

- What forces, such as trends, factors and events will influence the health and quality of life of community residents.
  - Trends: patterns over time
  - Factors: discrete elements
  - Events: one time occurrences
- How will these forces impact the work we do to improve health outcomes in Hernando County?
Factors

Homeless population
Unemployment
Educational Attainment
Seasonal population
Senior population
Substance Abuse
Mental Health Needs
High concentration of service industry jobs
Transportation barriers
ACA and legislation

Trends

Obesity increasing
Aging population
Increasing high school drop-out rates
Increasing homeless population
Population growth
Increasing Spanish speaking population
Unemployment
Drug abuse
Inappropriate use of ER
Lack of Insurance
Trauma Informed Care
Political stratification
Migration
Use of Technology

Events

OB offered at Oak Hill
FQHC changes
Terrorism threats
Refugee Immigration
Home-Schooling
Vaccinations
Elections 2016
Technology and cyber attacks
Zika Virus
Hurricanes and other natural disasters
Opportunities

- Increase educational opportunities (trade and vocational programs)
- Leverage large senior population to enrich the community
- Collaboration with organizations (government, private, public, faith-based)
- Seek funding opportunities for Mental Health and Substance Abuse; trauma-informed care training opportunities
- Leverage natural resources as a venue for healthy behaviors
- Technology – Telehealth
- ACA – Expansion of Medicaid?
Local Public Health System Assessment

TO WHAT EXTENT DOES HERNANDO COUNTY PERFORM THE 10 ESSENTIAL PUBLIC HEALTH SERVICES?
What is the LPHSA

- "What are the components, activities, competencies, and capacities of our local public health system?"
- "How are the Essential Services being provided to our community?"
LPHSA Essential Services

1. Monitor Health Status to Identify Community Health Problems
2. Diagnose and Investigate Health Problems and Health Hazards
3. Inform, Educate and Empower People about Health Issues
4. Mobilize Community Partnerships to Identify and Solve Health Problems
5. Develop Policies and Plans that Support Individual and Community Health Efforts
6. Enforce Laws and Regulations that Protect Health and Ensure Safety
7. Link People to Needed Personal Health Services and Assure the Provision of Healthcare when Otherwise Unavailable
8. Assure a Competent Public Health and Personal Healthcare Workforce
9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services
10. Research for New Insights and Innovative Solutions to Health Problems
<table>
<thead>
<tr>
<th>Activity Level</th>
<th>Scoring Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optimal Activity (76-100%)</td>
<td>Greater than 75% of the activity described within the question is met.</td>
</tr>
<tr>
<td>Significant Activity (51-75%)</td>
<td>Greater than 50%, but no more than 75% of the activity described within the question is met.</td>
</tr>
<tr>
<td>Moderate Activity (26-50%)</td>
<td>Greater than 25%, but no more than 50% of the activity described within the question is met.</td>
</tr>
<tr>
<td>Minimal Activity (1-25%)</td>
<td>Greater than zero, but no more than 25% of the activity described within the question is met.</td>
</tr>
<tr>
<td>No Activity (0%)</td>
<td>0% or absolutely no activity.</td>
</tr>
</tbody>
</table>
LPHSA Scores in Hernando

Summary of Average ES Performance Score

- Average Overall Score: 71.7
- ES 1: Monitor Health Status: 70.8
- ES 2: Diagnose and Investigate: 97.2
- ES 3: Educate/Empower: 83.3
- ES 4: Mobilize Partnerships: 71.9
- ES 5: Develop Policies/Plans: 85.4
- ES 6: Enforce Laws: 71.8
- ES 7: Link to Health Services: 65.6
- ES 8: Assure Workforce: 70.8
- ES 9: Evaluate Services: 69.6
- ES 10: Research/Innovations: 30.6
LPHS Areas of Opportunity

- Increase the use of technology to manage and communicate population health data
- Improve access to care for diverse populations
- Workforce assessment, planning and development
- Foster innovation in research, link with higher learning and research institutions, increase capacity to participate and initiative research
Key Insights

COMMON THEMES THROUGHOUT FOUR MAPP ASSESSMENTS
Common Themes

CHSA
- Population age-distribution
- Lower life expectancy
- 40% of Black Hernando residents living at or below the poverty threshold
- Lower incomes in Hernando than in Florida
- Age-Adjusted death rates are higher in Hernando than Florida
- Low physician rates per 100,000 population
- Hospitalization rates high
- Avoidable ER rates high
- Mental Health and Substance Abuse hospitalization rates higher than State

CTSA
- Access to healthcare, jobs, healthy behaviors/lifestyles, affordable goods, low crime, healthy economy
- Major issues: Substance Abuse, Mental Health Problems, Access to Primary Care, Obesity
- Likely to Participate In: low-cost exercise, nature trails, biking/walking/jogging, healthy cooking classes

FOC
- Obesity
- Substance Abuse
- Mental Health Needs
- Service Industry Jobs
- ACA and other Legislation
- Use of Technology
- Political Landscape
- Natural Disasters
Now What?

Community Health Improvement Planning!
**Goal I: Improve access to primary care, mental health care, and substance abuse services in Hernando County Florida.**

**Strategy:** Increase community awareness of available resources.

**Strategy:** Increase funding.

**Strategy:** Train and educate.

<table>
<thead>
<tr>
<th>Lead Agencies</th>
<th>Objectives</th>
<th>Alignment</th>
<th>Activities</th>
<th>Measures</th>
<th>Champion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lesley Hersey/Lutheran Services Florida, Veda Ramirez/HC Health &amp; Human Services, Tina Kinney/NAMI</td>
<td>1. Determine the need for a mental health logic model to be used as a framework for funding applications by March 31, 2018</td>
<td>Healthy People 2020 MHMD-1 -12</td>
<td>1A. Partners meet to discuss.</td>
<td>1A. Meeting minutes and action items.</td>
<td>TBD</td>
</tr>
<tr>
<td>Lesley Hersey/Lutheran Services Foundation, Veda Ramirez/HC Health &amp; Human Services, Tina Kinney/NAMI</td>
<td></td>
<td></td>
<td>1B. If needed, support the development of a logic model and use in future funding applications and planning of mental health related projects supported by CHIPP</td>
<td>1B. Logic Model</td>
<td>TBD</td>
</tr>
<tr>
<td>JR Hutchinson/HC Sheriff's Office, Tresa Watson/HCCADC, Sandra Marrero/Baycare Behavioral Health, Tina Kinney/NAMI</td>
<td>2. Increase by 200 the number of individuals who have completed adult or youth mental health first aid training by June 30, 2018.</td>
<td>Healthy People 2020 MHMD-1-12</td>
<td>2. Assist and support in the provision of youth and adult first aid training by promoting scheduled trainings, serving as a host-site and encouraging community-wide participation</td>
<td>2. Number of first aid trainings provided; Number of attendees who successfully complete the training (# of 2016 participants + 200)</td>
<td>Tresa Watson</td>
</tr>
<tr>
<td>Tresa Watson/HCCADC, Tina Kinney/NAMI, Jen Siem/Bayfront Health, Sandra Marrero/Baycare Behavioral Health</td>
<td>4. Promote substance abuse support groups for persons 25 and younger in Hernando County by August 30, 2017.</td>
<td>Healthy People 2020 SA 9, 12 14, 18, 21</td>
<td>4A. Utilize the CHIPP network to identify substance abuse support groups for persons 25 and younger in Hernando County.</td>
<td>4A. List of existing substance abuse support groups for persons 25 and younger in Hernando County</td>
<td>Tresa Watson</td>
</tr>
<tr>
<td>Tresa Watson/HCCADC, Tina Kinney/NAMI, Jen Siem/Bayfront Health, Sandra Marrero/Baycare Behavioral Health</td>
<td></td>
<td></td>
<td>4B. If gaps in substance abuse support groups for persons 25 and younger in Hernando County exist, collaborate with HCCADC and other appropriate groups to support a group formation.</td>
<td>4B. List of new substance abuse support groups for persons 25 and younger in Hernando County</td>
<td>Tresa Watson</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Angie Bonfardino/United Way Hernando, Lauren Jolly/Spherion Staffing Services</td>
<td>5A. Promote utilization of United Way’s 211 system to CHIPP partners and Hernando County residents using 211 prepared messaging.</td>
<td>Angie Bonfardino</td>
<td>5A. Increase the number of referrals reported through 211 data collection system; Number of CHIPP partners who receive 211 prepared marketing via Community Health Improvement Plan Partnership, Inc. (CHIPP)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>J.R. Hutchinson/HC Sheriff's Office, Barbara Sweinberg/Crescent Community Clinic</td>
<td>5B. Facilitate a policy adoption to link soon-to-be released incarcerated uninsured and underinsured Hernando County residents to primary care and mental health care services within three days of release.</td>
<td>J.R. Hutchinson, Barbara Sweinberg</td>
<td>5B. Established referral process (written documentation); Number of successful referrals; Policy adopted</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rich Linkul/Oak Hill Hospital, Jen Siem/Bayfront Hospital; Federally Quality Health Center</td>
<td>5C. CHIPP will support efforts to promote new primary care providers/services in Hernando County by June 30, 2018</td>
<td>Rich Linkul, Jen Siem, FQHC Representative</td>
<td>5C. Number of postings on the CHIPP website for each new primary care provider.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ginni Crandall/DOH-Hernando</td>
<td>6A. The FHB Committee will plan and facilitate outreach regarding post partum depression screening policies and tools to local OB/GYNs, Pediatricians, and Primary Care Physicians</td>
<td>Ginni Crandall</td>
<td>6A. Number of health care providers visited (year 1 50% of Pediatricians and OB/GYN’s, along with 20% of Primary Care Providers; year 2 50% of Pediatricians and OB/GYN’s, along with an additional 40% of Primary Care Providers; year 3 the remaining Primary Care Providers.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ginni Crandall/DOH-Hernando</td>
<td>6B. Number of health care providers adopting screening tool and referral protocol.</td>
<td>Ginni Crandall</td>
<td>6B. Number of health care providers adopting screening tool and referral protocol.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Goal II: Improve Quality of Life in Hernando County Florida

**Strategy:** Key community stakeholders collaborate to address obesity prevention, physical activity, diabetes, substance abuse, and infant mortality in Hernando County.

<table>
<thead>
<tr>
<th>Lead Agencies</th>
<th>Objectives</th>
<th>Alignment</th>
<th>Activities</th>
<th>Measures</th>
<th>Champion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashley Thomas/DOH-Hernando, Rich Linkul/Oak Hill Hospital, Angie Bonfardino/United Way Hernando, Mike Walker/City of Brooksville</td>
<td>1: Increase the percentage of Hernando County adults living at a healthy weight by 2% by March 15, 2018. *RWJ County Health Rankings 2016 data</td>
<td>Healthy People 2020 NWS-8</td>
<td>1A. Champion the Great Hernando Weight Loss Challenge beginning November 1, 2016. Challenge scheduled for 1/14 thru 3/25/17.</td>
<td>1A. Number of participants; total pounds lost</td>
<td>Rich Linkul</td>
</tr>
<tr>
<td>Ashley Thomas/DOH-Hernando</td>
<td>1: Increase the percentage of Hernando County residents with diagnosed diabetes who have taken a course or class in how to manage their diabetes from 48% to 53%. *2013 CHARTS data</td>
<td>Healthy People 2020 D-14</td>
<td>1A. Promote diabetes self-management courses/classes</td>
<td>2A. Number of diabetes self-management courses/classes promoted; Number of diagnosed diabetes adults who attend courses/classes</td>
<td>Rich Linkul</td>
</tr>
<tr>
<td>Ann-Gayl Ellis/DOH-Hernando, JR Hutchinson/HC Sheriff’s Office</td>
<td>2: By June 30, 2018, increase the percentage of Hernando County adult residents with diagnosed diabetes who have taken a course or class in how to manage their diabetes from 48% to 53%. *2013 CHARTS data</td>
<td>Healthy People 2020 D-14</td>
<td>1A. Promote diabetes self-management courses/classes</td>
<td>2A. Number of diabetes self-management courses(classes)</td>
<td>Ann-Gayl Ellis</td>
</tr>
<tr>
<td>Ann-Gayl Ellis/DOH-Hernando, Rich Linkul/Oak Hill Hospital, Jen Siem/Bayfront Health</td>
<td>2: By June 30, 2018, increase the percentage of Hernando County residents with diagnosed diabetes who have taken a course or class in how to manage their diabetes from 48% to 53%. *2013 CHARTS data</td>
<td>Healthy People 2020 D-14</td>
<td>1A. Promote diabetes self-management courses/classes</td>
<td>2A. Number of diabetes self-management courses(classes)</td>
<td>Ann-Gayl Ellis</td>
</tr>
<tr>
<td>Rich Linkul/Oak Hill Hospital, Ann-Gayl Ellis/DOH-Hernando, Jen Siem/Bayfront Health</td>
<td>2: By June 30, 2018, increase the percentage of Hernando County residents with diagnosed diabetes who have taken a course or class in how to manage their diabetes from 48% to 53%. *2013 CHARTS data</td>
<td>Healthy People 2020 D-14</td>
<td>1A. Promote diabetes self-management courses/classes</td>
<td>2A. Number of diabetes self-management courses(classes)</td>
<td>Rich Linkul</td>
</tr>
<tr>
<td>Amber Slusser/ YMCA</td>
<td>3: By June 30, 2018, increase the number of Hernando County residents who have participated in the CDC National Diabetes Prevention Program (DPP) by 20 residents.</td>
<td>Healthy People 2020 D14</td>
<td>3A. Collaborate with the YMCA to promote the National DPP on a quarterly basis.</td>
<td>3A. Evidence of promotional materials and distribution methods</td>
<td>Amber Slusser</td>
</tr>
<tr>
<td>Amber Slusser/ YMCA</td>
<td>3: By June 30, 2018, increase the number of Hernando County residents who have participated in the CDC National Diabetes Prevention Program (DPP) by 20 residents.</td>
<td>Healthy People 2020 D14</td>
<td>3A. Collaborate with the YMCA to promote the National DPP on a quarterly basis.</td>
<td>3A. Evidence of promotional materials and distribution methods</td>
<td>Amber Slusser</td>
</tr>
<tr>
<td>Task</td>
<td>Responsible Parties</td>
<td>Notes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4A. At least one CHIPP member will participate in 70% of Healthy Babies Initiative meetings and will provide updates to CHIPP.</td>
<td>Ginni Crandall/DOH-Hernando, Ann-Gayl Ellis/DOH-Hernando</td>
<td>4A. Health Babies Initiative meeting sign in sheets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4B. CHIPP will support Healthy Babies Initiative by promoting strategies/activities and providing 501c3 support when applicable for funding opportunities by June 30, 2018.</td>
<td>Ginni Crandall/DOH-Hernando, Ann-Gayl Ellis/DOH-Hernando</td>
<td>4B. Date and title of supported Healthy Babies Initiative activities including how they were supported.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5A. Identify potential organizations/businesses who are not currently tobacco-free.</td>
<td>Tresa Watson/HCCADC, Sheena Thompson/GNAHEC, Ashley Thomas/DOH-Hernando</td>
<td>5A. List of potential organizations/businesses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5B. Collaborate with potential organizations/business to encourage their adoption of tobacco-free policy</td>
<td>Tresa Watson/HCCADC, Sheena Thompson/GNAHEC, Ashley Thomas/DOH-Hernando</td>
<td>5B. List of organizations/businesses that have adopted a tobacco-free policy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6A. Promote 5210 Healthy Hernando Certification through outreach</td>
<td>Ashley Thomas/DOH-Hernando, Amber Slusser/YMCA, Rich Linkul/Hernando Diabetes Alliance</td>
<td>6A. Copies of promotion activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6B. Identify interested preschools and provide 5210 Healthy Hernando training</td>
<td>Ashley Thomas/DOH-Hernando, Amber Slusser/YMCA</td>
<td>6B. List of preschools; dates of trainings; attendance sheets from trainings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6C. Certify preschools who have successfully adopted 5210 Healthy Hernando</td>
<td>Ashley Thomas/DOH-Hernando, Amber Slusser/YMCA, Rich Linkul/Hernando Diabetes Alliance</td>
<td>6C. List of certified preschools that have adopted a 5210 Healthy Hernando policy</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Goal III: Increase and Enhance CHIPP Capacity

### Strategy: Promote CHIPP throughout the Hernando County community

<table>
<thead>
<tr>
<th>Lead Agencies</th>
<th>Objectives</th>
<th>Activities</th>
<th>Measures</th>
<th>Champion</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHIPP Membership</td>
<td>1: Grow CHIPP membership to include at least one representative from the School Board and one representative from Hernando County Transit by June 30, 2018.</td>
<td>1A. Identify potential school board representatives; Identify potential Hernando County Transit representatives</td>
<td>1A. Names of potential representatives</td>
<td>Ann-Gayl Ellis</td>
</tr>
<tr>
<td>Ann-Gayl Ellis/DOH-Hernando</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2: Partner and support at least two resource fairs per year beginning January 1, 2017.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rich Linkul/Oak Hill Hospital</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHIPP Membership</td>
<td>3: Seek and apply for at least two funding opportunities per calendar year beginning January 1, 2017.</td>
<td>3A. Identify possible funding opportunities and ensure non-compete.</td>
<td>3A. List of potential funding opportunities</td>
<td>Ann-Gayl Ellis</td>
</tr>
<tr>
<td>CHIPP Executive Board</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3B. Submit at least 2 proposals/applications per fiscal year to support and enhance goals and objectives as developed in the CHIP. CHIPP fiscal year is July 1-June 30.</td>
<td></td>
<td>3B. Number of proposals/applications submitted</td>
<td>Ann-Gayl Ellis</td>
<td></td>
</tr>
<tr>
<td>Rich Linkul/Oak Hill Hospital</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Valerie Planta/HC Economic Dev’t. Rich Linkul/Oak Hill Hospital, Duane Chichester/Hernando Progress</td>
<td>4: Maintain CHIPP general member meeting attendance to at least 15 members per meeting beginning January 1, 2017.</td>
<td>4A. Hold general and Executive Board meetings as outlined in CHIPP bylaws.</td>
<td>4A. Meeting sign in sheets in CHIPP bylaws.</td>
<td>Duane Chichester</td>
</tr>
<tr>
<td>CHIPP Membership</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Valarie Planta/HC Economic Dev’t. Rich Linkul/Oak Hill Hospital, Duane Chichester/Hernando Progress</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHIPP Membership</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHIPP Executive Board</td>
<td>5. By August 1 of each year, CHIPP will have promoted its accomplishments through a minimum of 2 venues/platforms</td>
<td>5A. Assess the validity of developing a CHIPP online communication tool/platform by February 1, 2017</td>
<td>5A. Completed assessment</td>
<td>Duane Chichester</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Robin Napier/DOH-Hernando, CHIPP Executive Board</td>
<td>5B. Present CHIPP update to BOCC</td>
<td>5B. Presentation and Bocce meeting minutes</td>
<td>Robin Napier</td>
<td></td>
</tr>
<tr>
<td>Robin Napier/DOH-Hernando, CHIPP Executive Board</td>
<td>5C. Introduce CHIPP and CHIP process to Brooksville City Commission</td>
<td>5C. Presentation and City Commission meeting minutes</td>
<td>Robin Napier</td>
<td></td>
</tr>
</tbody>
</table>

**Agencies:**

- **HCCADC**: Hernando County Community Anti-Drug Coalition, Inc.
- **NAMI**: National Alliance on Mental Illness
- **GNAHEC**: Gulfcoast North Area Health Education Center
- **HC**: Hernando County