Clay County

Community Health Improvement Plan

November 2019 - November 2022

A look at the health and well-being of Clay County residents.

Prepared by

Health Planning Council of Northeast Florida, Inc.

Revised October 2020

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EXECUTIVE SUMMARY

The Clay County Health Improvement Planning group has worked together to better understand the current and future health needs of the Clay County community since 2010. The group, with guidance from the Health Planning Council of Northeast Florida (HPCNEF), developed this Community Health Improvement Plan (CHIP) as part of ongoing efforts to improve health in Clay County.

The Florida Department of Health in Clay County (DOH-Clay), in partnership with HPCNEF, championed a Community Health Improvement Plan (CHIP) to identify and prioritize health issues in Clay County, using a nationally recognized approach called Mobilizing for Action through Planning and Partnerships (MAPP). The CHIP uses information from the Community Health Assessment (CHA) which includes quantitative (e.g., disease incidence rates and mortality rates) and qualitative data (e.g., community input) to assess the health status of the community and determine which health issues will be the focus of health planning efforts for the next three years.

The CHIP group decided the 2019 CHIP would focus on the following priority health issues after reviewing and discussing the data collected through the CHA process:

- Disease prevention & Lifestyle behaviors (including nutrition, weight management, physical activity, health education, screenings)
- Behavioral health (including mental health, substance misuse, resources)
- Healthcare access (including policy change, dental care, FQHC)

The purpose of the CHIP process is to create goals, objectives, and strategies targeting the priority health issues identified in the CHA. To improve implementation and evaluation of the goals in this plan, the CHIP group decided to utilize a balanced scorecard approach, which identifies goals, objectives, and strategies and sets measurable targets to move the CHIP process forward.

The targets and measures outlined in the CHIP Action Plans at the end of this document were carefully selected through collaborative and inclusive workgroups for each health issue. Additionally, many of the targets align with the national Healthy People 2020 initiative and with goals and objectives from the Florida State Health Improvement Plan. These national and statewide initiatives provide evidence-based benchmarks to track and monitor health, as well as best practices to guide health promotion and disease prevention efforts, which will ultimately help improve health outcomes in Clay County.

As a living document, the ***2019 Clay County Community Health Improvement Plan*** is flexible and can accommodate changes or updates as needed. The CHIP group will re-assess and update the CHIP Action Plans and the Community Health Assessment annually to best address the needs of the local community.

ACKNOWLEDGEMENTS

With valuable input from Clay County's community stakeholders and leaders, the 2019 Clay County CHIP became a decisive community call to action. DOH-Clay and HPCNEF would like to extend gratitude to the organizations and individuals that dedicated their valuable time to make sure that the CHIP goals, objectives, and strategies aligned best with the needs of the local community.

CHIP Contributors:

Clay Action Coalition

Clay Behavioral Health Center

Children's Home Society

Keystone and Wilkinson Jr. High Community Partnership Schools

QuitDoc

Tobacco Free Partnership

Clay County School District

UF/IFAS Extension Clay County

Orange Park Medical Center

Baptist Clay

Ascension St. Vincent's Clay

Mercy Support Services

Kid's First of Florida

Palms Medical Group

Clay County Sheriff's Office

Episcopal Children's Services

Azalea Health

LSF

State Attorney's Office, Jacksonville

United Healthcare

First Coast Child Advocacy Center/Child Protection Team

USING THE COMMUNITY HEALTH IMPROVEMENT PLAN

The creation of CHIP for Clay County serves as a reminder for how the collaboration between government officials, community leaders, public health professionals, and community advocates, as well as many other Clay County participants, can build public health infrastructure, aid and guide planning, and ultimately improve the health outcomes of Clay County. There are several suggested ways to use this CHIP to improve the well-being and quality of life for the Clay County community:

Community Resident

- Use this CHIP to compare individual health with that of Clay County's community health data
- Be an advocate in the community to support healthy lifestyles and behaviors
- Volunteer! Share your resources, time, funding with your community
- Understand the top health priorities facing Clay County

Health Care Professional

- Understand the top health priorities facing Clay County
- Inform your patients/clients on available resources in the community listed in the CHIP
- Be a resource for the community whether it be expertise, funding, time, or support

Faith-based Organization

- Understand the top health priorities facing Clay County
- Use this plan to improve the overall health (mind, body, and spirit) of members in your community
- Identify opportunities for your community or members to be able to support and encourage participation in public health projects.

Government Official

- Understand the top health priorities facing Clay County
- Participate in community efforts as laid out in the CHIP strategies
- Engage with other government officials to inform and promote your community's health

Educators

- Understand the top health priorities facing Clay County
- Be a resource for the community whether it be expertise, funding, time, or support
- Engage the support of leaders, teachers, students, and parents

Public Health Professionals

- Understand the top health priorities facing Clay County
- Recognize how the Clay County community compares with peer counties, Florida, and the U.S. population as a whole
- Be a resource for the community whether it be expertise, funding, time, or support

Employers

- Understand the top health priorities facing Clay County
- Inform and educate your team/staff on the importance of employee wellness and productivity

REVIEW OF CLAY COUNTY'S COMMUNITY HEALTH ASSESSMENT

DOH-Clay maintains strong and enduring relationships with multiple health and social services providers throughout the community. DOH-Clay invited the ongoing CHIP group to act as a platform and steering committee for the Clay County Community Health Assessment (CHA) process, which began in November 2018.

Community health assessments intend to answer questions about community health status and needs, including: "How healthy are our community residents?" and "What does the health status of our community look like?" An underlying goal of the Clay County community health assessment was to ensure a truly community-driven process by empowering community members, organizations, and stakeholders to help facilitate change through collaboration, coordination, and communication.

The MAPP Process

DOH-Clay and HPCNEF completed the CHA using the Mobilizing for Action through Planning and Partnerships (MAPP) process, developed by the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control (CDC). The MAPP process is a community-driven, participatory process intended to bring together not only health care providers, but also mental health and social service agencies, public safety agencies, education and youth development organizations, recreation agencies, local governments, neighborhood associations, and civic groups to improve community health. By participating in the MAPP process, community stakeholders gain a higher understanding and awareness of their community and local health issues.

FIGURE 1. THE MAPP ROADMAP

MAPP Assessments

The MAPP process consists of four assessments:

1. The **Forces of Change Assessment** identifies forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate.
2. The **Local Public Health System Assessment** which focuses on all of the organizations and entities that contribute to the public's health. The LPHSA answers the questions, "What are the components, activities, competencies, and capacities of our local public health system?"
3. The **Community Themes and Strengths Assessment** provides an understanding of the health issues that residents feel are important, including quality of life.
4. The **Community Health Status Assessment** identifies priority community health and quality of life issues. Questions answered here include, "How healthy are our residents?" and "What does the health status of our community look like?"

Detailed information on all of the MAPP assessments can be found in the ***2019 Clay County Community Health Assessment***, which is available on the Florida Department of Health in Clay County's website at http://clay.floridahealth.gov/. A brief summary of each assessment is provided below.

FIGURE 2. THE MAPP PROCESS

Forces of Change Assessment

The Forces of Change Assessment identifies forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate. The assessment answers two primary questions: "What is occurring or might occur that affects the health of our community or the local public health system?" and "What specific threats or opportunities are generated by these occurrences?" CHIP group members identified the following as forces, trends, or factors in several categories that may have a significant impact on health in Clay County.

Some governmental/political forces include:

1. Lack of civility, respect among leadership (at national, state and local levels)
2. Increase in religious exemptions for vaccinations
3. Change in elected officials in elections (School Board, Sheriff's office)

Some economic forces include:

1. Increase in student loan debt
2. Cost of living

Some social forces include:

1. Increased mental health issues (substance abuse, suicide, not enough resources/providers)
2. Increase in violence/shootings
3. Lack of comprehensive health education

Some technological forces include:

1. Increase in social media usage
2. Increased use of technology/electronic devices in classrooms

For the full comprehensive list of the Clay County forces of change, please refer to the 2019 Clay County CHA.

Community Strengths & Themes Assessment

The Community Strengths and Themes Assessment generates direct feedback from community residents regarding observations of their own health, community health, and access to healthcare services. Themes and issues identified during this phase often offer insight into information discovered through other MAPP assessments.

Community surveys, focus groups and key stakeholder interviews provided the information needed to complete the Community Strengths and Themes Assessment. The Health Planning Council of Northeast Florida (HPCNEF) conducted five focus groups and 11 key stakeholder interviews with coordination by the Florida Department of Health in Clay County. The CHIP group asked community members and stakeholders to participate in a survey on community health, healthcare services, and quality of life in Clay County. A total of 956 community members and stakeholders in Clay County took the community survey. Surveys and focus groups intended to ascertain opinions of community stakeholders with knowledge of the

community or influence in the county. The findings provided qualitative information, revealing community sentiments regarding healthcare services in Clay County.

Focus Groups

Focus group participants were asked to fill out a survey with questions about their demographics, insurance status, quality of life, health status, and more. A total of 47 participants in attendance at the focus groups filled out the demographic survey. The majority of participants were over age 40, female, white, and had at least a High School Diploma or GED.

- Of the 47 participants, 89.4 were female and about 77% of participants were white.
- More than half (about 60%) of participants were 55 or older.
- Half of the participants (50%) had an educational level of a Technical/Community College or higher.

The focus group discussion covered topics such as system's access to care, quality of care, safety networks, health needs and concerns, community closeness and pride, and the role of schools in health. Several themes and issues were discussed more frequently, extensively, and with more intensity than others throughout the duration of the focus groups. These themes, which came up in response to more than one question, include: economy/jobs, substance abuse, and the need for more and/or improved transportation. According to focus group participants, some of the most significant health status concerns in Clay are alcohol or drug addiction, mental health/suicide, overweight/obesity, and access to health care.

Community Survey

A total of 956 community members and stakeholders in Clay County took the community survey. Not all respondents answered every question on the survey. 96% of the 956 participants who responded to the question on gender were female (78.5%), and 75% (of 916 respondents) were white. Of the 925 people who responded to the question on age, more than 60% were in the age groups 26-39 (31%) and 40-54 (30%). Most respondents resided in zip code area 32068 (Middleburg) (26%) and in zip code area 32073 (Orange Park) (22%).

Respondents were asked to identify the five most important health problems and unhealthy behaviors in Clay County. Among the top health problems and unhealthy behaviors were alcohol/drug addiction, mental health/suicide, obesity/overweight, child abuse/neglect, and domestic violence. One-third of survey respondents stated that being unable to afford healthcare and lack of evening and weekend services (30%) were barriers to receiving healthcare. When asked what the five most important features of a healthy community were, the top choices were low crime rates/safe neighborhoods, good education, good place to raise kids, good jobs/healthy economy, and access to healthcare.

Interviews with Key Stakeholders

A total of 11 interviews in person and over the phone were conducted by HPCNEF staff during the months of November and December 2018. The key stakeholders were suggested and initially contacted by the Florida Department of Health in Clay County. Key stakeholders included but were not limited to governmental representatives, health care providers, health care consumers, and representatives of local community organizations. Topics addressed during the interviews included the interviewee's overall perspective on the most important health care needs and issues in Clay County, opinions of important health issues that affect county residents, and impressions of specific health services available in the county and the accessibility of these services. The following issues were identified by key stakeholders:

- Behavioral health/mental health/substance abuse: Key stakeholders felt that there were numerous issues related to behavioral health/mental health and substance abuse within Clay County. Most interviewees felt that a lack of mental health providers and resources is a major factor contributing to this problem.
- Chronic diseases and unhealthy lifestyle behaviors: Key stakeholders also felt that unhealthy lifestyle behaviors including smoking, obesity/overweight, poor diet, high stress levels, and lack of physical activity contribute to many chronic diseases in Clay County. Many believed that an emphasis on disease prevention and education is the key to addressing this issue.
- Access to health care: Social determinants of health and geography of where residents live in the county are important factors affecting access to health care. Low-income populations have more issues accessing health care services as well as achieving optimal health outcomes.

Local Public Health Systems Assessment

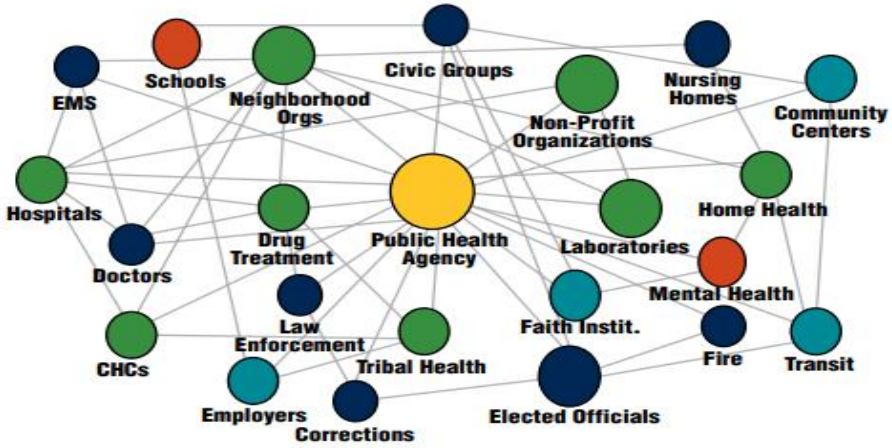
The Local Public Health System Assessment (LPHSA) is a tool from the National Public Health Performance Standards Program used to answer the question: "What are the components, activities, competencies, and capacities of our local public health system?" Public health systems include "all public, private, and voluntary entities that contribute to the delivery of essential public health services within a jurisdiction."[1] The *10 Essential Public Health Services* are key public health activities to be undertaken in all communities,[2] and are as follows:

1. **Monitor** health status to identify community health problems.
2. **Diagnose and investigate** health problems and health hazards in the community.
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 health care when otherwise unavailable.
8. **Assure** a competent public and personal health care 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.

Key health system stakeholders in Clay County answered questions about the local public health system via four in person meetings in order to determine how the local public health system performs in each of the 10 Essential Public Health Services. Participants answered questions about each essential service and scored each service using recommended scoring levels provided in the assessment instrument. Strengths and gaps in the county's healthcare safety net and public health system were identified in this way and were subsequently considered during the remainder of the planning process.

Clay County performs best in essential services *2: Diagnose and Investigate, 4: Mobilizing Partnerships* and *9: Evaluate Services* and scores worst in *3: Educate/Empower*, *8: Assure Workforce*, and *10: Research/Innovations*.

[1] U.S. Centers for Disease Control and Prevention. (2015). *National Public Health Performance Standards (NPHPS)*. Retrieved from CDC.gov: http://www.cdc.gov/nphpsp/
[2] U.S. Centers for Disease Control and Prevention. (2015). *National Public Health Performance Standards (NPHPS)*.


Schools
Civic Groups
Nursing Homes
EMS
Neighborhood Orgs
Non-Profit Organizations
Community Centers
Hospitals
Home Health
Drug Treatment
Public Health Agency
Laboratories
Doctors
Mental Health
Law Enforcement
Faith Instit.
Fire
Transit
CHCs
Tribal Health
Employers
Corrections
Elected Officials

Community Health Status Assessment

According to the Florida MAPP Field Guide, the Community Health Status Assessment is intended to answer the questions:

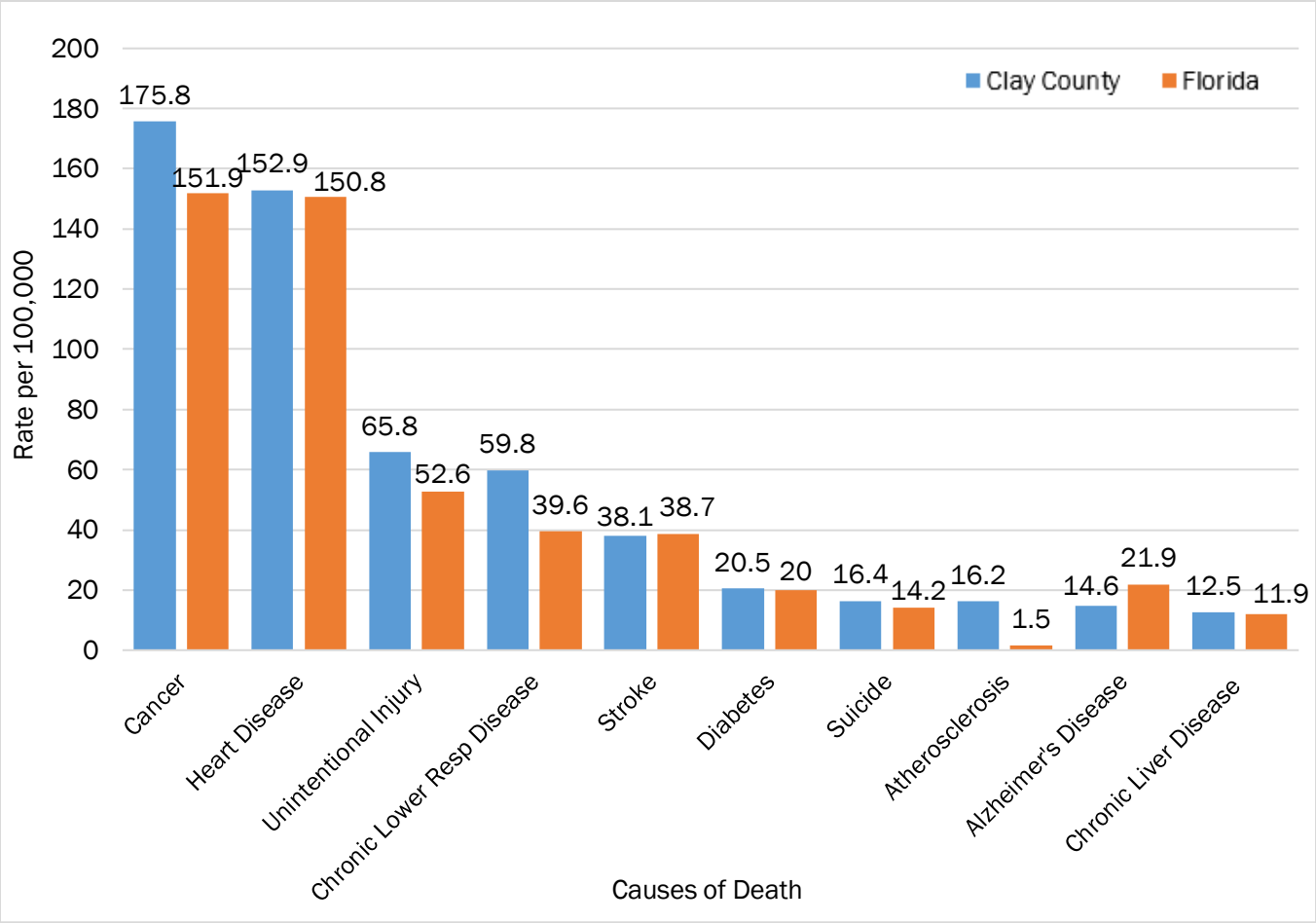
- *"How healthy are our residents?"*
- *"What does the health status of our community look like?"*
- *"What are the strengths and risks in our community that contribute to health?"*[3]

To answer these questions, HPCNEF staff collected, analyzed, and reviewed secondary data describing population health in Clay County and compared that data to other known time periods and/or geographies.

Mortality rates are key indicators of the state of health of a community. Figure 3 shows the top ten causes of death in Clay County and the state of Florida. Cancer, heart disease, and unintentional injury are the leading causes of death in both Clay County and the state of Florida. Clay has a higher mortality rate for cancer (175.8 versus 151.9 deaths per 100,000 population) and unintentional injury (65.8 versus 52.6 deaths per 100,000 population) and a slightly higher mortality rate for heart disease (152.9 versus 150.8 deaths per 100,000 population) when compared to Florida's rates.

[3] National Association of County and City Health Officials. (n.d.). *Mobilizing for Action through Planning and Partnerships, Achieving Healthier Communities through MAPP: A User's Handbook.* Washington, DC.

FIGURE 3. LEADING CAUSES OF DEATH, CLAY COUNTY & FLORIDA, 2015-17



Data Source: Florida Health CHARTS, Leading Causes of Death

Identifying Priority Health Issues

Health Priorities Identified by the CHIP group

When developing the Community Health Improvement Plan, the CHIP workgroup recognized the importance of viewing data through a Health Equity and Social Determinants of Health lens. This was accomplished by utilizing the data collected from community residents of all demographics (race, ethnicity, age, gender, income, etc.) to create the CHA. The surveys distributed to residents were based on questions that targeted the Social Determinants of Health. This included questions regarding economic stability, neighborhood and physical environment, education level, healthy food availability, community and social contact, and health care access. From there, the CHIP workgroup voted on the top three health issues identified by Clay residents. When presenting the data to the workgroup, FL Health Charts was utilized to ensure all demographics of Clay County were discussed. The agencies involved with the creation of the CHIP were brought together as a representative of different aspects of the Social Determinants of Health, including the partners listed on page 4. In using the social determinants, the CHIP workgroup chose three top health issues:

1. Disease prevention & Lifestyle behaviors (including nutrition, weight management, physical activity, health education, screenings)
2. Behavioral health (including mental health, substance misuse, resources)
3. Healthcare access (including policy change, dental care, FQHC

Through these issues, the CHIP strives to improve health outcomes such as morbidity, mortality, life expectancy, health care expenditures, health states and function limitations.

In summary, the CHIP group completed the following process to select health priorities:

1. Overview and explanation of the Social Determinants of Health was completed.
2. Discussion of quantitative data (e.g. disease mortality rates, health behaviors, factors in the physical environment, quality of life indicators) and the top health issues identified through FL Charts data, focus groups and community surveys addressing Social Determinants of Health.
3. Review of key findings from the four MAPP assessments.
4. Attendees provided feedback by answering the following question via an electronic polling system “Of all the issues discussed today, which do you think is the most important?”

DESCRIPTION OF PRIORITY HEALTH ISSUES

Disease Prevention and Lifestyle Behaviors

Lifestyle Behaviors – including poor diet, lack of exercise, tobacco use, and excessive alcohol use – are a key contributor to the development of heart disease, cancer, stroke, and diabetes[4], all of which are leading causes of death in Clay County. The Disease Prevention and Lifestyle Behavior priority health area focuses on Obesity, Poor Nutrition/Unhealthy Eating, Weight Management, Physical Activity, Health Education, and Screenings. Key data related to lifestyle in Clay County is presented below.

Obesity & Physical Activity

According to the CDC, more than one-third (about 40%) of U.S. adults are obese.[5] Obesity is associated with many health and chronic conditions, such as high blood pressure, high cholesterol, diabetes, heart disease, stroke, and certain types of cancer.

The 2016 Behavior Risk Factor Surveillance System Survey (BRFSS) provides counties with rich data on a variety of issues related to health status, health care access, lifestyle, chronic illnesses, and disease prevention practice. According to the 2016 BRFSS, almost 31% of Clay County adults are obese, which is higher than the state average of 27%. Other key findings related to obesity and physical activity are presented below.

Physical Activity & Obesity	Clay County	Florida
Adults who are obese	31.1%	27.4%
Adults who are overweight or obese	67.8%	63.2%
Adults who are overweight	36.7%	35.8%
Adults who have a healthy weight	30.1%	34.5%
Adults who are sedentary	28.1%	29.8%
Adults who are inactive or insufficiently active	53.3%	56.7%

Nutrition & the Food Environment

According to 2016 BRFSS data, only 15% of adults in Clay County consume five or more servings of fruits and vegetables per day. Additional nutrition BRFSS indicators are below:

Nutrition	Clay County	Florida
Adults who consumed 5 or more servings of fruits or vegetables per day	14.8%	18.3%
Adults who consumed 3 or more servings of vegetables per day	17.8%	17.0%
Adults who consumed 2 or more servings of fruit per day	28.1%	32.0%

[4] U.S. Centers for Disease Control and Prevention. (2015, August 26). *Chronic Disease Overview*. Retrieved 2016, from CDC.gov: http://www.cdc.gov/chronicdisease/overview/
[5] U.S. Centers for Disease Control & Prevention. (2019, June). *Adult Obesity Facts*. Retrieved from CDC.gov: http://www.cdc.gov/obesity/data/adult.html

Tobacco Use

Tobacco is the largest cause of preventable morbidity and mortality in the United States.[6] Smoking harms nearly every organ of the body, causing many diseases and affecting the overall health of smokers. Approximately 19% of adults in Clay County are current smokers, greater than the state rate of 15.5% of adults. Key BRFSS findings related to tobacco use are presented in the table below.

Tobacco Use	Clay County	Florida
Adult current smokers who tried to quit smoking at least once in the past year	63.6%	62.1%
Adults who are current smokers	18.7%	15.5%
Adults who are former smokers (currently quit smoking)	27.2%	26.5%
Adults who have never smoked	54.1%	58.0%

Behavioral Health (including Mental Health, Mental Health Resources, & Substance Misuse)

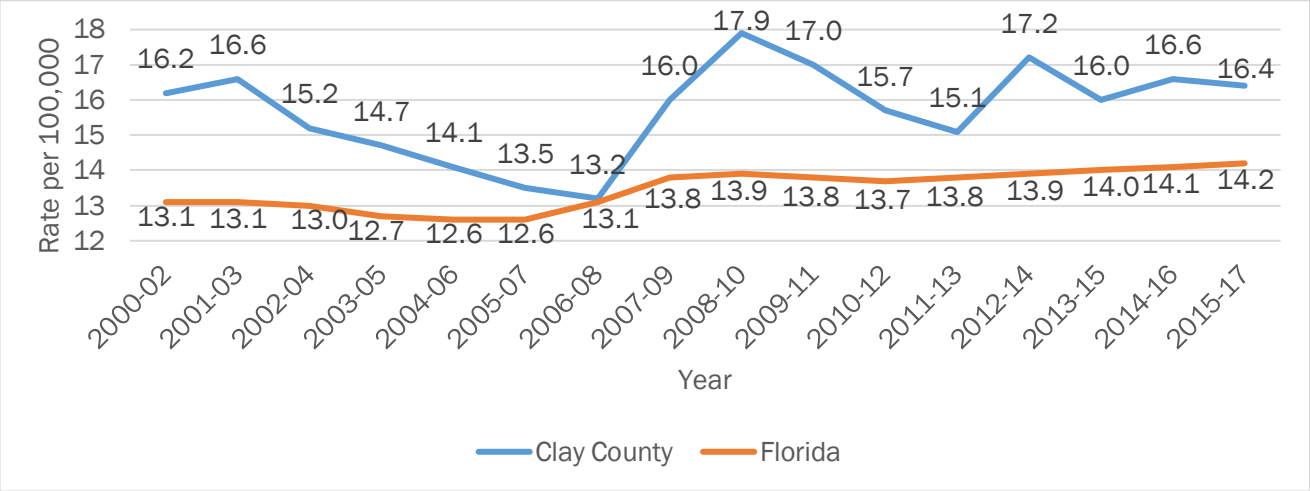
According to the World Health Organization, "mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community."[7] Social, economic, psychological, and biological factors all play a role in determining mental health.[8]

Suicide

Suicide occurs when a person ends their own life and is the tenth leading cause of death among Americans.[9] Deaths are not the only consequence of suicide. More people survive suicide attempts than die, and suicide survivors may have serious injuries, such as broken bones, brain damage, or organ failure.[10] From 2006-2008 to 2008-2010, the suicide mortality rate for Clay County rose sharply to peak at 17.9 suicide deaths per 100,000 population in 2008-2010 and has remained above 15 ever since. The Clay County age-adjusted, 3 year rolling suicide death rate has been higher than Florida's rate for well over a decade (Figure 6).

[6] U.S. Centers for Disease Control and Prevention. (2015, July). Tobacco Use. Retrieved from The Community Guide. http://www.thecommunityguide.org/tobacco/index.html
[7] World Health Organization (2014, August). *Mental health: strengthening our response, Fact sheet N°220*. Retrieved 2016, from WHO.int: http://www.who.int/mediacentre/factsheets/fs220/en/
[8] World Health Organization. (2014, August).
[9] U.S. Centers for Disease Control and Prevention (2019, July). Deaths: Leading Causes *for 2017*. Retrieved from CDC.gov: http://www.cdc.gov/leadingcausesofdeath
[10] U.S. Centers for Disease Control and Prevention (2014, September). *Preventing Suicide*. Retrieved from CDC.gov: http://www.cdc.gov/Features/PreventingSuicide/

FIGURE 4. SUICIDE (ALL MEANS) AGE-ADJUSTED DEATH RATE, ALL RACES, 3-YEAR ROLLING RATES, CLAY COUNTY & FLORIDA, 2000-2017



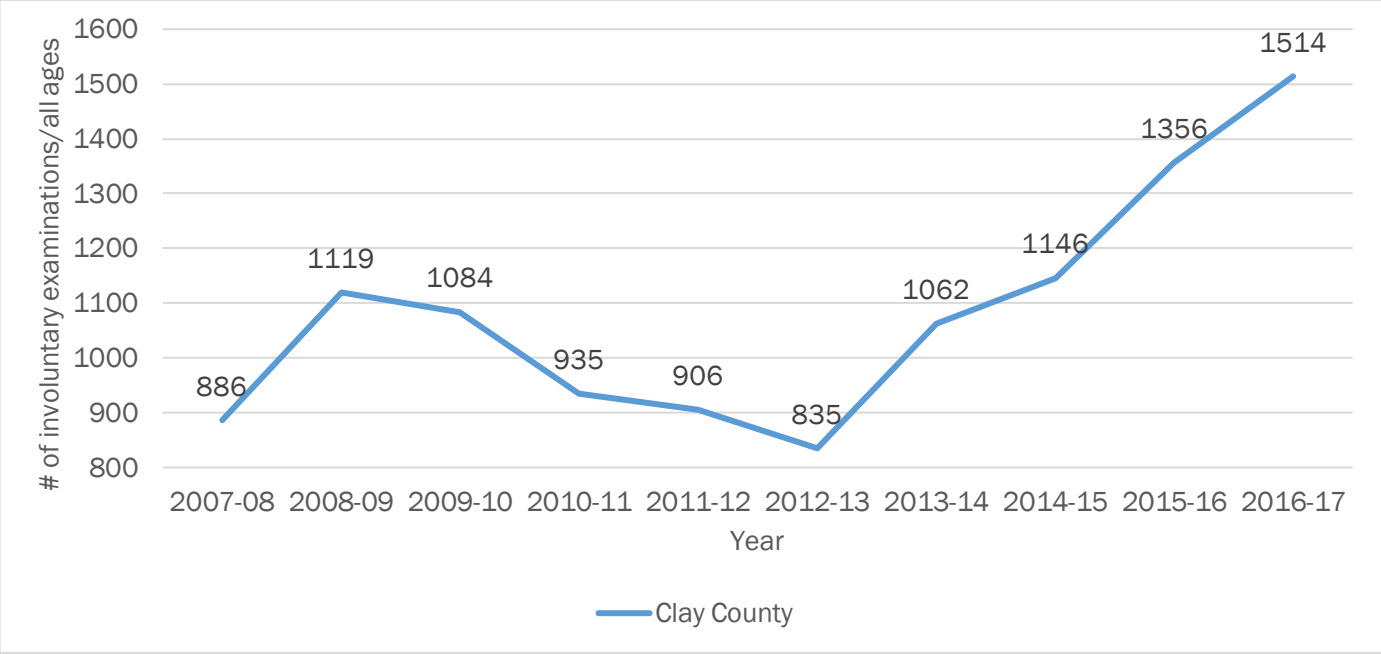
Data Source: Florida CHARTS, Suicide Deaths

Baker Act Referrals/Examinations

The Baker Act allows for voluntary and involuntary admissions for psychiatric care under specific circumstances. Involuntary initiations can be made by courts, law enforcement officials, physicians, or mental health professionals only when there is evidence that a person has a mental illness and is a threat to their own well-being or the well-being of others.[11] Figure 7 illustrates the total number of reported involuntary exam initiations (i.e. Baker Acts) for Clay County residents from 2007-2008 to 2016-2017. There is a general upward trend in involuntary exam initiations for Clay County. From 2007-2008 to 2016-2017 the number of involuntary examinations has increased by 71% from 886 to 1,514. Figure 7 shows no comparison to the state of Florida as data comparing state and county Baker Act rates is not readily available.

[11] Mental Health Program Office & Department of Mental Health Law & Policy. (2014). *2014 Baker Act User Reference Guide: The Florida Mental Health Act.* Tallahassee: Department of Children and Families, Mental Health Program; University of South Florida, Louis de la Parte Florida Mental.

FIGURE 5. TOTAL INVOLUNTARY EXAM INITIATIONS FOR CLAY COUNTY RESIDENTS, 2007-2017

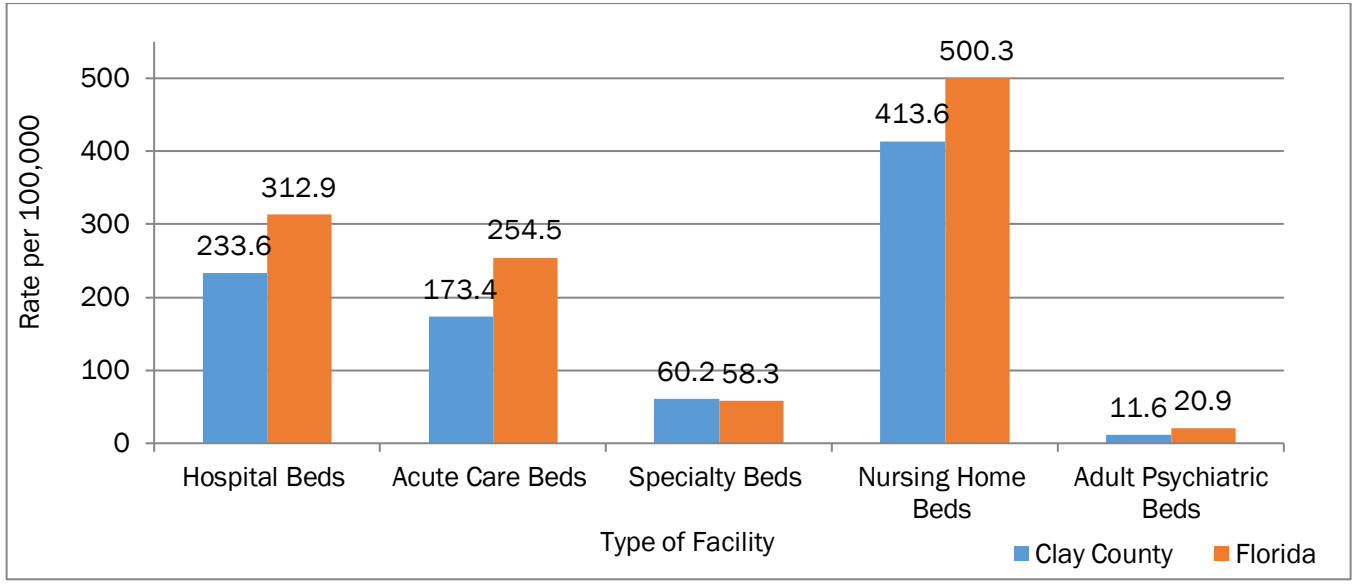


Data Source: Baker Act Reporting Center Fiscal Year 2016-17. University of South Florida.

Mental Health Services/Resources

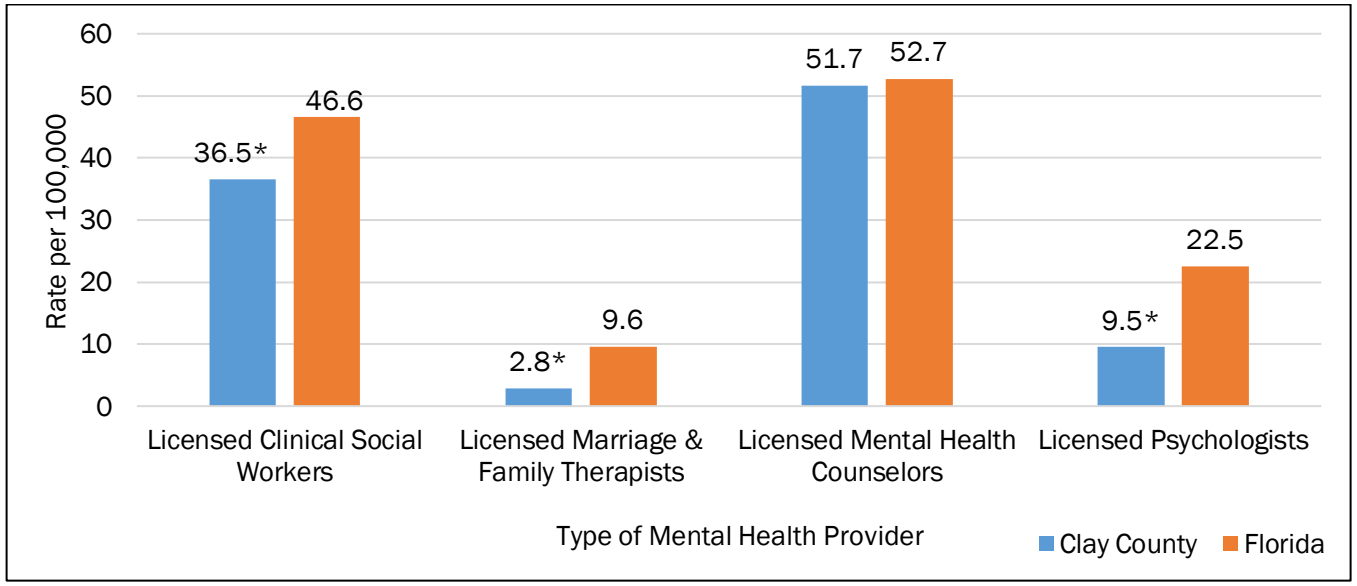
Acute care hospitals play a key role in the delivery of health care services, especially in communities where primary and specialist outpatient care shortages may exist. Clay County has a lower rate of total hospital beds, acute care beds, nursing home beds, and adult psychiatric beds per 100,000 population than Florida (Figure 8). The number of total licensed mental health professionals is also an indicator for the need of additional mental health resources in Clay County. Clay County has fewer licensed clinical social workers, licensed marriage & family therapists, mental health counselors, and licensed psychologists per 100,000 people than Florida (Figure 7).

FIGURE 6. HEALTH CARE FACILITY BEDS IN CLAY COUNTY AND FLORIDA, 2015-17



Data Source: Florida Agency for Health Care Administration (AHCA)

FIGURE 7. TOTAL LICENSED MENTAL HEALTH PROFESSIONALS, CLAY COUNTY & FLORIDA, FY 2017/18



Data Source: FL Dept. of Health, Division of Medical Quality Assurance
* indicates the county rate is statistically significantly different from the statewide rate

Substance Misuse

Youth Substance Abuse Survey

The Florida Youth Substance Abuse Survey (FYSAS) is an annual, statewide school-based survey effort that measures the prevalence of alcohol, tobacco and other drug use, and delinquent behaviors, as well as the risk and protective factors related to these behaviors. Key findings revealed:

- E-Cigarettes and vaporizers are the most commonly used substances among Clay County students, with usage rates of 16.9% for the past 30 days, compared to Florida's rate of 13.7%
- After E-Cigarettes and vaporizers, students reported alcohol (16.2% for past 30 day use) as the most commonly used substance. Florida's prevalence rate is lower at 15.3%
- Any illicit drug is the next most commonly used substance type with a usage rate of 14.2% in the past 30 days versus 14.3% in Florida
- Another substance with a prevalence rate of over 10% is marijuana, with 11.3% of Clay County youth reporting having used it in the past 30 days – this is slightly higher than Florida's rate of 10.9%.

Behavioral Risk Factor Surveillance System

The Behavioral Risk Factor Surveillance System (BRFSS) "is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. 2016 BRFSS key findings revealed:

- 22.2% of Clay County residents engage in heavy or binge drinking compared to 17.5% at the state level
- Among Clay County's population 18.7% are current smokers, compared to 15.5% of Floridians
- 8.4% of Clay County's population are current e-cigarette users, compared to 4.7% of Florida's population
- 6.0% of Clay County residents reported having used marijuana or hashish during the past 30 days, compared to 7.4% at the state level

Improving Behavioral Health

The Behavioral Health workgroup's goal is to improve behavioral health (to include mental health, mental health resources, and substance misuse) in Clay County so that adults, children and families are healthy participants living in their communities. See CHIP Action Plans at the end of this document for detailed goals, objectives, and strategies for addressing behavioral health issues in Clay County.

Health Care Access (including policy change, dental care, FQHC)

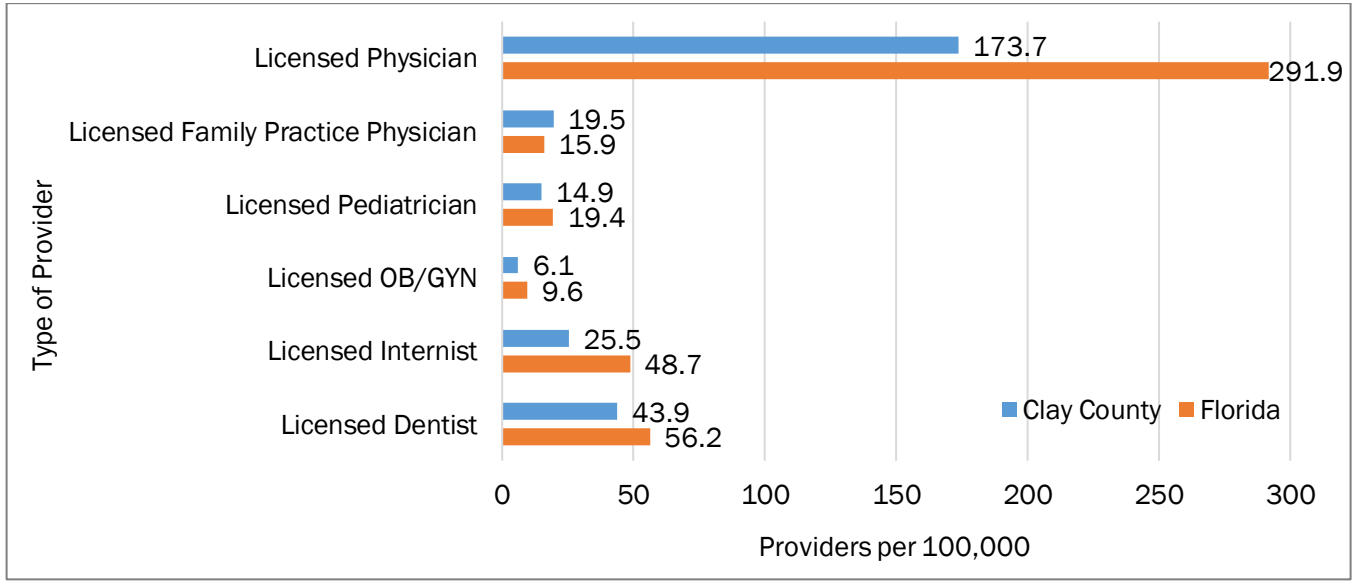
Health Care Access Shortages

Federal Health Professional Shortage Designation

The Human Health Resources and Services (HRSA) develops a shortage designation criteria to determine whether an area or population group is experiencing a health professional shortage. Health Professional Shortage Areas (HPSAs) can be for primary medical care, dental, or mental health providers and may be geographic (a county or service area), population (low-income or Medicaid eligible), or facilities (e.g. federally qualified health centers or state or federal prisons). Keystone Heights is designated as a geographic HPSA and the low-income population of Green Cove Springs is designated as a low-income population HPSA due to a lack of primary care services in both areas of Clay County.[12]

Health Care Providers

The number of total licensed providers in Clay County compared to Florida provides insights in the health care access shortage areas in Clay County. Clay County has less licensed physicians, pediatricians, OB/GYN, internists, and dentists than Florida. Also note the lower coverage of mental health professionals and health care facility beds within Clay County compared to Florida.



Data Source: FL Dept. of Health, Division of Medical Quality Assurance

[12]Health Resources and Services Administration (2017, 03 30). HRSA Data Warehouse . Retrieved from https://datawarehouse.hrsa.gov/tools/analyzers/HpsaFindResults.aspx

Health Care Access Gaps and Barriers from Community Survey

A total of 956 people completed the survey and of the 956 survey participants 806 have identified the following health care gaps in Clay County (Figure 8). Out of the 956 survey respondents 912 have selected an answer choice to the question of the type of barriers or difficulties that affect Clay County residents in receiving their health care (Figure 9).

FIGURE 8. HEALTH CARE GAPS FROM COMMUNITY SURVEY RESPONDENTS

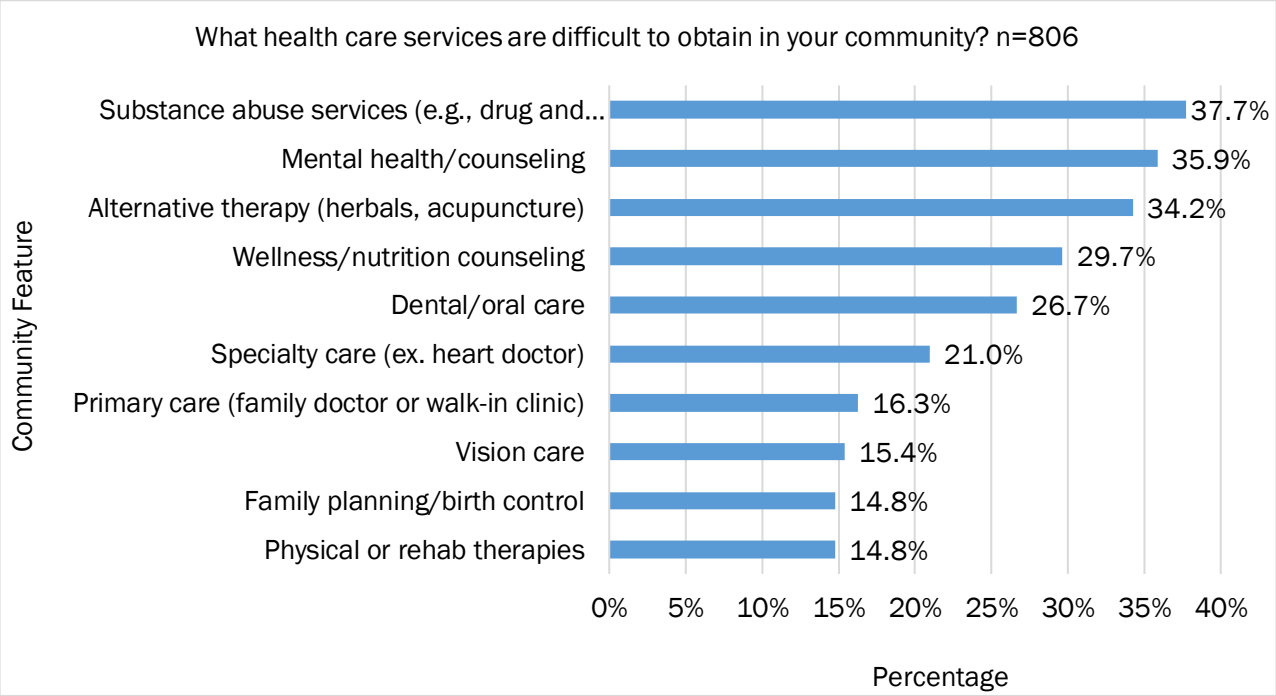
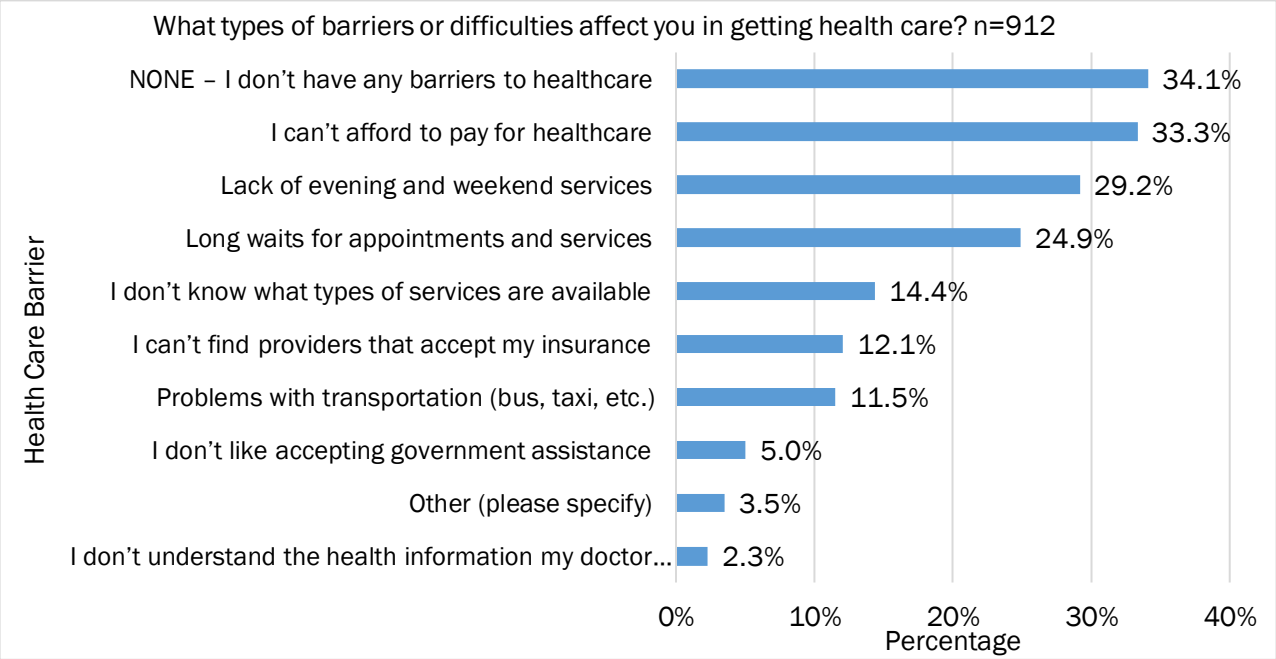


FIGURE 9. HEALTH CARE BARRIERS FROM COMMUNITY SURVEY RESPONDENTS



OVERVIEW OF CHIP PROCESS

Phases 1-4 of the Mobilizing for Action through Planning and Partnerships (MAPP) process involve visioning, collecting and analyzing data, and gathering community input in order to determine which health issues will become the strategic focus of health planning in the community for the next three to five years. A Community Health Improvement Plan (CHIP) is formulated primarily in **Phases 5) Goals & Strategies** and **6) Action Cycle** of the MAPP process. In Phase 5, the community formulates broad goal statements addressing the previously identified health issues, as well as more specific strategies related to each goal. Phase 6 involves planning, implementation, and evaluation. During Phase 6, the community creates an action plan which provides details on how goals and strategies will be achieved.[13]

The CHIP group held meetings with each of the workgroups from May to July 2019. The workgroups included one for each priority area; Disease Prevention, Behavioral Health and Healthcare Access. Workgroups began with a summary of the findings of the community health assessment and a recap of the health issue(s) to be addressed in each workgroup. Next, HPCNEF facilitated a brief discussion of goals, objectives, and strategies; provided examples of each; and guided the group through the process of goal creation for each health issue.

Following the creation of broad, overarching goals, the workgroup developed objectives for each goal as well as strategies for each objective. In addition to generating strategies that could be used to achieve each goal, the workgroup brainstormed and described potential resources, lead persons/organizations, measures for tracking progress of a strategy, current performance levels, and targets for each strategy, detailed in the CHIP Action Plans included at the end of this document.

The goal of the CHIP is to not only outline health issues, future action steps, and strategies to improve the health of Clay County, but also to align with already existing state, national objectives and other local programs, projects and organizations. The CHIP group made efforts to align Clay County with state and national objectives by referring to the Florida State Health Improvement Plan and the Healthy People 2020 initiative. This alignment is illustrated in the CHIP Action Plans, using the symbols below:

- ■ This symbol represents alignment with the National Healthy People 2020 initiative.
- ▲ This symbol represents alignment with the Florida State Health Improvement Plan.
- ● This symbol represents a policy-based intervention.

[13] National Association of County and City Health Officials. (n.d.). *Mobilizing for Action through Planning and Partnerships*. Retrieved March 2016, from NACCHO.org: http://www.naccho.org/programs/public-health-infrastructure/mapp

CHIP ACTION PLANS

DISEASE PREVENTION & LIFESTYLE BEHAVIORS

Health Priority Area: Disease Prevention & Lifestyle Behaviors						
Goal A: Increase access to and consumption of healthy foods.						
Objective 1: By December 31, 2022, maintain the percentage of Clay County residents who consume five or more servings of fruit or vegetables per day at 15% (BRFSS). ▲						
Strategy: Increase participation in nutrition education programs in Clay County.					Anticipated Completion Date:	31-Dec-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
1.1: Increase number of youth nutrition education sites in Clay County.	1	Increase	# of sites	1- Met, 1 new to date	2	UF IFAS
1.2: Increase number of adult nutrition education sites in Clay County.	2	Increase	# of sites	1 - met, 1 new to date	2	UF IFAS

Activity 1.1: Increase number of youth nutrition education sites in Clay County.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
1.1.1: Create recruitment and referral package and process.	UF IFAS	Clay County School Board, DOH-Clay	In progress	19-Sep
1.1.2: Recruit new partners through referrals.	UF IFAS	Clay County School Board, DOH-Clay	In progress	Sep-19
1.1.3: Implement nutrition education program at current and new sites.	UF IFAS	Clay County School Board, DOH-Clay	Added 1 new site (Lakeside Jr. High)	19-Oct

Activity 1.2: Increase number of adult nutrition education sites in Clay County.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
1.2.1: Create recruitment and referral package and process.	UF IFAS	Clay County School Board, DOH-Clay	In Progress	19-Sep
1.2.2: Recruit new partners through referrals.	UF IFAS	Clay County School Board, DOH-Clay	In Progress	19-Sep
1.2.3: Implement nutrition education program at current and new sites.	UF IFAS	Clay County School Board, DOH-Clay	Added 1 new site (Wilkinson Food Pantry)	19-Sep

Health Priority Area: Disease Prevention & Lifestyle Behaviors						
Goal A: Increase access to and consumption of healthy foods.						
Objective 2: By December 31, 2022, identify a farmers market or community garden in every zip code that is available at least once per month (from PACE-EH).						
Strategy: Increase pounds of vegetables and fruits produced by school and community gardens.					Anticipated Completion Date:	31-Dec-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
2.1. Increase the number of school and community gardens.	9	Increase	number of schools and community gardens	1 (1 new garden to date at Wilkinson Jr)	2	Primary Data
2.2. Measure pounds of produce grown.	277	Increase	pounds of produce	305 (10%)	335 (10%)	Primary Data

Activity 2.1: Increase the number of school and community gardens. 12 established zip-codes in Clay.				
Description of Activities	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
2.1.1: Develop a brochure listing all farmers markets, community gardens, farm/produce stands and u-pick farms.	UF IFAS Extension	UF IFAS Extension, Florida Department of Agriculture and Consumer Service (FDACS), USDA Farmers Market Promotion Program - grants	Complete. Available on UF IFAS website.	
2.1.2: Research the number of community gardens in Clay County.	UF IFAS Extension	FDACS, Mercy Support Services	Complete. Available on UF IFAS website.	

Activity 2.2: Measure pounds of produce grown.				
Description of Activities	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
2.2.1: Provide scales to school and community garden sites.	UF IFAS	Clay County Schools, DOH-Clay, Head Start	Purchase request to order scales submitted	19-Nov
2.2.2: Tentatively, provide training on how to use scales and weigh produce.	UF IFAS	Clay County Schools, DOH-Clay, Head Start		
2.2.3: Create a standard measurement tool and outline process to document produce weight.	UF IFAS	Clay County Schools, DOH-Clay, Head Start		

Health Priority Area: Disease Prevention & Lifestyle Behaviors						
Goal B: Increase the percentage of adults and youth that are at healthy weight.						
Objective 1: By Dec 31, 2022, increase the number of adults that are at healthy weight from 31% to 34.5%. ▲ ■						
Strategy: Increase access to and participation in weight management and lifestyle change programs.					Anticipated Completion Date:	31-Dec-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
1.1: Expand number of worksites that participate in 12 week healthy weight program- "towards permanent weight management" program.	1	Increase	Number of worksites	1	1	UF IFAS
1.2: Expand United Healthcare's Real Appeal program which is a covered benefit for UHC medical employees within CCDS.	173	Increase	Number of UHC medical employees registered	200 (173 registered to date for year 1)	250	UHC
1.3: Increase the number of employees that participate in physical activity challenges during the school year at CCDS.	360	Increase	Number of employees registered	350 (360 participating so far for year 1)	400	UHC

Activity 1.1: Expand number of worksites that participate in 12 week healthy weight program.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.1.1: Create recruitment and referral package and process.	UF IFAS	DOH-Clay		
1.1.2: Recruit new partners through referrals.	UF IFAS	DOH-Clay		
1.1.3: Implement weight management program at current and new sites.	UF IFAS	DOH-Clay		

Activity 1.2: Expand United Healthcare's Real Appeal program which is a covered benefit for UHC medical employees within CCDS.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
Establish Wellness Champions at locations promoting to their employees	United Healthcare	UF IFAS, School District, DOH Clay	41 Wellness Champions established	10.1.18
Develop marketing materials and annoucements for employees to be made aware	United Healthcare	School District, DOH Clay	In progress	10.1.16

Activity 1.3: Increase the number of employees that participant in physical activity challenges during the school year at CCDS.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
Set up a demo of the success kit at the biometric screening event that employees receive when signing up	United Healthcare	UF IFAS, School District, DOH Clay	In progress. Completed 6 our of 36 onsite biometric screening events.	10.22.19

Health Priority Area: Disease Prevention & Lifestyle Behaviors						
Goal B: Increase the percentage of adults and youth that are at healthy weight.						
Objective 2: By Dec 31, 2022, increase the number of youth from 1st through 6th grade that are at a healthy weight from 64.21% to 65.0%. ■						
Strategy: Encourage youth to be more active in their daily lives.					Anticipated Completion Date:	31-Dec-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
2.1. Increase the number of students at specific school (find Title 1 or low participation rate and focus on that school) that participate in a school sponsored physical activity program.	1	Increase	Number of students that participate in PE programming	1	1	Clay Schools, FL Charts, School Health

Activity 2.1: Increase the number of students at specific school (find Title 1 or low participation rate and focus on that school) that participate in a school sponsored physical activity program.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
2.1.1: Increase the number of students that participate in Girls on the Run and run/walk groups.	Clay County Schools	PE Teachers	Survey sent out to see what we have in place and who is planning on starting a new program.	
2.1.2: Expand Fuel up to Play 60 to 2 schools.	Clay County Schools	Cafeteria Managers	2 new schools have impllemented, totalling 3 schools (Middleburg Elem, Lakeside Elem, OP Elem)	19-Oct

Health Priority Area: Disease Prevention & Lifestyle Behaviors

Goal C: Reduce nicotine use in Clay County residents.

Objective 1: By December 31, 2021, increase the number of adults who tried to quit smoking at least once in the past year from 63.6% to 66%. (Get info from BRFSS). ▲

Strategy: Create an environment that supports tobacco free lifestyles through education and policy. | Anticipated Completion Date: 31-Dec-21

Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
1.1: Increase locations and participation in tobacco cessation classes.	5 on average per class	Increase	Number of new locations	1	1	AHEC
1.2: Promote Quitline to local Clay County employers.	5	Increase	Number of worksites that are provided education packets	2 worksites (promoted to Clay Behavioral & Clay Schools)	3 additional worksites	QuitDoc
1.3: Increase the number of smoke-free multi-unit housing and community facilities in Clay County.	6 facilities	Increase	Number of smoke-free multi-unit housing and community facilities	1 facility (1 - Cassie Gardens in MB)	1 additional facility	QuitDoc

Activity 1.1: Increase locations and participation in tobacco cessation classes.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.1.1: Find new location (Keystone Heights possibility).	AHEC	DOH-Clay	In Progress/Discussion (Met with DOH, The Way Clinic, and Azalea Health)	19-Oct
1.1.2: Set up class.	AHEC	DOH-Clay		
1.1.3: Advertise class.	AHEC	DOH-Clay		
1.1.4: Hold class (1 class @ 2 hours).	AHEC	DOH-Clay		

Activity 1.2: Promote Quitline to local Clay County employers.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.2.1: Prioritize 5 employers to provide Quitline information to in the next 3 years.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT youth	Clay Schools, Clay Co Government and Clay Behavioral to date	19-Oct
1.2.2: Set-up an in-person meeting with the employer HR representative to discuss Quitline information and education.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT youth	Met with Clay Behavioral	19-Oct
1.2.3: Print and distribute Quitline information to put in county government paystub checks.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT youth	In Progress	19-Oct
1.2.4: Print and distribute Quitline information to put in the teacher boxes through Clay County school district.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT youth	In Progress (11/21/19 GASO event at 10 schools)	19-Oct
1.2.5: Follow-up with the employers to answer questions and vet additional information.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT youth	Using TFW log to follow up with emplopyers	19-Oct

Activity 1.3: Increase the number of smoke-free multi-unit housing and community facilities in Clay County.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.3.1: Meet with department heads (planning & zoning, parks & rec, etc.) to discuss the importance of smoke-free facilities.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT Youth	TBD	
1.3.2: Meet with staff (property manager or developer, etc.) at new housing developments to discuss the importance of smoke-free housing (2 per year).	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT Youth	Met with Villages at Oakleaf and Cobblestone in Fleming	19-Oct
1.3.3: Distribute mailers to the housing units to promote smoke-free policies.	QuitDoc	DOH-Clay, UF IFAS, Clay County Schools, SWAT Youth	In Progress will take place in Jan-June	

Health Priority Area: Disease Prevention & Lifestyle Behaviors						
Goal C: Reduce nicotine use in Clay County residents.						
Objective 2: By December 31, 2021, reduce the number of youth who currently reported using tobacco related products from 18.2% to 17.9%. ▲ ■						
Strategy: Educate and promote health education with youth on tobacco related products.					Anticipated Completion Date:	31-Dec-21
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
2.1: Expand Health Rocks to all 11 schools with SWAT club elementary and middle school students - IFAS and QuitDoc.	4	Increase	Number of Schools that have Health Rocks	3 schools (4 total, 2 new schools from last year)	3 schools	Year 3 would be 3 schools, UF IFAS
2.2: Implement, monitor and evaluate "Catch my Breath" in Jr High School - CCSD.	0	Increase	Number of schools	6 Junior High Schools	Maintain	Shelley Luter
2.3: Increase the participation in SWAT clubs in Clay County.	225	Increase	Number of SWAT club members	18 additional members (increase by 5%)	19 additional members (increase by 5%)	QuitDoc, SWAT

Activity 2.1: Expand Health Rocks to all 11 schools with SWAT club elementary and middle school students - IFAS and QuitDoc.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
2.1.1: Reach out to additional Clay County school SWAT advisor to get buy-in for the Health Rocks program.	UF IFAS	QuitDoc, DOH-Clay	Reached out to SWAT coordinators to promote Health Rocks	19-Sep
2.1.2: Set- up meeting with SWAT club and Health Rocks to complete curriculum.	UF IFAS	QuitDoc, DOH-Clay	Set dates with 4 SWAT clubs to deliver curriculum	19-Sep

Activity 2.2: Implement, monitor and evaluate "Catch my Breath" in Jr High School - CCSD.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
2.2.1: Teachers provide instruction during the month of October due to district prevention initiatives.	Shelley Luter	Clay County Schools, SWAT, Community Partners, PE Teachers	Ongoing	#########
2.2.2: Pre/post survey and data analysis.	Shelley Luter	Clay County Schools, SWAT, Community Partners, PE Teachers	Awaiting results from the company- probably December	

Activity 2.3: Increase the participation in SWAT clubs in Clay County.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
2.3.1: Facilitate recruitment activities to get additional SWAT members.	QuitDoc	DOH-Clay, UF IFAS		
2.3.2: Increase advertisements for the club throughout the school district.	QuitDoc	DOH-Clay, UF IFAS		

Health Priority Area: Disease Prevention & Lifestyle Behaviors						
Goal D: Increase healthy school district score in Clay County Schools.						
Objective 1: By December 31, 2022, increase the capacity of Clay County Schools in the Healthy District Award from 73% (silver) to 82%. ▲ ■●						
Strategy: Improve and promote sustainable healthy behaviors.					Anticipated Completion Date:	31-Dec-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
1.1. Implement an updated comprehensive health education program in K through 6th grades.	0	Increase	Implemented health education program	0	1	Primary Data - Clay County Schools
1.2. Improve scores of 3 out of the 10 sub-categories of the healthy school district award.	7	Increase	Sub-category scores for the healthy school district award	Improve 1 score	Improve 2 additional scores	Clay County School District

Activity 1.1: Implement an updated comprehensive health education program in K through 6th grades.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.1.1: Train teachers on current research based materials.	Clay County Schools	DOH-Clay, United Healthcare		
1.1.2: Provide updated materials to teachers.	Clay County Schools	DOH-Clay, United Healthcare		
1.1.3: Conduct teacher survey by end of March 2020 with feedback on the training material.	Clay County Schools	DOH-Clay, United Healthcare		

Activity 1.2: Improve scores of 3 out of the 10 sub-categories of the healthy school district award.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.2.1: Identify sub-categories with opportunities for improvement.	Clay County Schools (Shelley)	DOH-Clay	Shelley identified 3 sub-categories for improvement: 1. Health education, 2. Counseling (psychological & social), 3.Family and Community Involvement.	8.9.19
1.2.2: Understand and make a plan to achieve missing requirements and goals.	Clay County Schools (Shelley)	District health partners, curriculum instruction	Spreadsheet has been made of who is responsible for what- A few of the activites have been completed.	

Health Priority Area: Disease Prevention & Lifestyle Behaviors

Goal E: Decrease the number of adults and youth with a diagnosed chronic disease (diabetes, heart disease, hypertension, etc.).

Objective 1: By Dec 31, 2022 decrease the number of adults who have been told that they have prediabetes from 11.2% to 10%. ▲

Strategy: Educate adults about diabetes prevention and self-management. Anticipated Completion Date: 31-Dec-22

Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
1.1. Meeting with partners to strengthen marketing and advertise DSME & CDSM classes.	3	Increase	# of meetings	2	2	DOH-Clay, OPMC, YMCA, FL Charts, ADA
1.2. Establish new partners & locations for education.	1	Increase	# of partners & locations	3	3	Local Physicians, DOH-Clay Clinic, Palms Medical Group, Azalea Health
1.3. Increase diabetes education opportunities.	1	Increase	# of opportunities	2	2	

Activity 1.1: Meeting with partners to strengthen marketing and advertise DSME & CDSM classes.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.1.1: Increased participation in DSME &/or CDSM course through promotion for assistance from community agencies.	DOH-Clay	AHEC, OPMC, YMCA	Senior Citizens at senior center provided chronic disease self management course	

Activity 1.2: Establish new partners & locations for education.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.2.1: Advertise classes at various settings, including churches, food pantry, mom's clubs, retirement centers, subsidized housing (College St), county employees.	Disease Prevention and Healthy Behaviors Workgroup	Moosehaven; Penney Farms; Allegro; Mom's/parent groups; Subsidized Housing; Salvation Army; Churches/Faith based; Walmart; Diabetes Foundation; Council on Aging; Aging True; Athletic Association; Police Athletic Association	Ongoing	

Activity 1.3: Increase diabetes education opportunities.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.3.1: Explore new opportunities for diabetes education in settings such as: health fairs, senior centers, health wellness seminars; small groups classes/info sessions; Diabetes Walks (ADA).	Disease Prevention and Healthy Lifestyle Behaviors Workgroup	OPMC/Hospitals; Same list as above (1.2.1)	Ongoing	

Health Priority Area: Disease Prevention & Lifestyle Behaviors							
Goal E: Decrease the number of adults and youth with a diagnosed chronic disease (diabetes, heart disease, hypertension, etc.).							
Objective 2: By Dec 31, 2022, decrease the number of adults who have ever been told that they had hypertension from 32.4% to 31%. ▲ ■							
Strategy: Promote Heart Health among Clay County adults.					Anticipated Completion Date:		31-Dec-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**	
2.1. Increase opportunities for heart health education.	2	Increase	# of opportunities	2	2	AHA, DOH-Clay, OPMC, St. Vincent's, Baptist, Palms Medical, Azalea Health	
2.2. Provide opportunities for physical activity and heart health education.	0	Increase	# of opportunities	2	2	AHA, DOH-Clay, OPMC, St. Vincent's, Baptist, Palms Medical, Azalea Health	
Activity 2.1: Increase opportunities for heart health education.							
Description		**Person Responsible**	**Key Partners/Contractors/Consultant**		**Status**		**Actual Start Date**
2.1.1: Work with community partners to identify or create opportunities to provide heart health education.		DOH-Clay	American Heart Association, Hospitals/ER's, Local Gyms, YMCA, Partnership Schools (Parents)				
Activity 2.2: Provide opportunities for physical activity and heart health education.							
Description		**Person Responsible**	**Key Partners/Contractors/Consultant**		**Status**		**Actual Start Date**
2.2.1: Plan activities and events to increase heart health education and physical activity. Coordinate with existing events to incorporate physical activity (Walk a Puppy A Day; Bark in the Park; Yoga in the Park). Promote on social media, newspaper, flyers to reach community.		Disease Prevention and Healthy Lifestyle Behaviors Workgroup	American Heart Association, Clay Today, other county agencies, Sheriff's office, hospitals		OPMC is hosting a "Women's Heart Disease"seminar on Feb. 26, 2020. DOH-Clay participated in the Heart Health event at Orange Park Mall on Feb. 2, 2020.		

BEHAVIORAL HEALTH

Health Priority Area: Behavioral Health						
Goal A: Decrease substance misuse in Clay County youth.						
Objective 1: By June 30, 2022 decrease 30 day youth alcohol use (Clay Action Coalition) from 16.2% (2018) to 15.0%. ■						
Objective 2: By June 30, 2022 decrease 30 day youth marijuana use (Clay Prevention Coalition) from 11.3% (2018) to 10.9%. ■						
Strategy: Reduce access to alcohol & marijuana in home and by retailers.					Anticipated Completion Date:	June 30, 2022
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
1.1: Increase the number of compliance checks for alcohol and tobacco sales to minors.	0	Increase	# of compliance checks	2	4	Law Enforcement
1.2: Increase parent education specifically on youth with alcohol and marijuana use.	250 pledge cards/150 presentation-participants	Increase	# signed pledge cards/# presentation participants	200 pledge cards/150 participants	250 pledge cards/200 participants	Clay Action Coalition (CAC), Clay Behavioral Health Center

Activity 1.1: Increase the number of compliance checks.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
1.1.1: Attain more funding and support from agencies to supplement compliance checks.	Clay Action Coalition (CAC)	CAC, Law Enforcement, ABT	Not Met	1-Oct-19

Activity 1.2: Increase parent education.				
Description	**Person Responsible**	**Key Partners/Contractors/Consultant**	**Status**	**Actual Start Date**
1.2.1: Expand events where organizations hand out pledge cards. Some examples of these events include: Parents Who Host Lose The Most, football games and 9th grade orientation night, fair.	CAC	CAC, Clay Behavioral Health Center, DOH-Clay, Orange Park Medical Center (OPMC), Baptist Health, Palms Medical	Ongoing	
1.2.2: DOH-Clay educate parents on pledge cards while in clinic.	DOH-Clay	DOH-Clay	Ongoing	
1.2.3: Host town hall meeting focused on underage drinking - Nov 12th at Wilkinson Jr. High focused on underage drinking and vaping	CAC	DOH-Clay, OPMC, Law enforcement, QuitDoc, Palms Medical	Not Met	

Health Priority Area: Behavioral Health

Goal B: Decrease death by suicide rate in Clay County.

Objective 1: By June 30, 2022, decrease the number of deaths by suicide from 18.0 to 16.5. ▲

Strategy: Increase community awareness and education on alternatives on being Baker Acted. | Anticipated Completion Date: June 30, 2022

Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
1.1: Educate health professionals & employers on Adult Crisis Alternative Program (ACAP) program (i.e. EMT, hospital staff).	20+	Increase	# agencies contacted	20	25	Clay Behavioral Healthcare
1.2: Increase number of people trained in mental health first aid (MHFA).	189	Increase	#of people trained	120	120	Lutheran Services Florida (LSF), Clay Behavioral Health Center, Baptist, CCSD
1.3: Educate the community about mental health resources available locally. This includes resources regarding safety plans, organizations, and ways to avoid being repeat Baker Acted (types of mental health facilities, etc.).	0	Increase	#of organizations with access to info packet	5	10	All

Activity 1.1: Educate health professionals & employers on ACAP program (i.e. EMT, hospital staff).

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.1.1: Distribute ACAP flyer to hospitals & primary care offices.	Clay Behavioral Health Center	Baptist Health, St. Vincent's Medical Center, OPMC, DOH-Clay	Ongoing	
1.1.2: Conduct lecture to Palms Medical and OPMC residents.	Clay Behavioral Health Center	Palms Medical, OPMC	Complete	
1.1.3: Educate Clay & Duval Medical Societies.	Clay Behavioral Health Center	Palms Medical, OPMC	Ongoing	

Activity 1.2: Increase number of people trained in MHFA.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.2.1: Share national MHFA advertisements via social media and news print.	Clay Behavioral Health Center	All	Share # trained participants per session to Courtney Ellis prior to quarterly meetings	10/1/2019
1.2.2: Identify employers and organizations to show relevance of MHFA training.	Clay Behavioral Health Center	Clay Behavioral Health Center	Ongoing	

Activity 1.3: Educate the community about mental health resources available locally. This includes resources regarding safety plans, organizations, and ways to avoid being repeat Baker Acted (types of mental health facilities, etc.).

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.3.1: Create an informational packet with the mental health resources available to local Clay County residents.	Behavioral Health Workgroup	All	Not started	
1.3.2: Identify a list of organizations and employers who need to receive info packet.	Behavioral Health Workgroup	All		
1.3.3: Distribute and educate about info packet.	Behavioral Health Workgroup	All		

Health Priority Area: Behavioral Health						
Goal C: Increase behavioral health care coordination for identified at-risk populations.						
Objective 1: By June 30, 2022, increase community resources that can provide behavioral health prevention services to Clay residents by 3 locations.						
Strategy: Increase behavioral health resources.					Anticipated Completion Date:	30-Jun-22
Activities	**Current Performance Level**	**Direction of Intended Change**	**Unit of Measurement**	**Year 1 Target**	**Year 2 Target**	**Data Source**
1.1: Apply for more funding for behavioral health prevention services.	Average of 3	Increase	# of Grants (Applications)	3 Grants	3 Grants	LSF, CAC, DOH- Clay, Clay Behavioral Health Center
1.2: Expand the peer specialist program to one Clay County Hospital. (After completion: expand peer specialist program to Clay County schools).	1 (St. Vincent's)	Increase	Number of peer specialists at Clay hospitals	1 (OPMC)	1 (Baptist)	Clay Behavioral Health Center
1.3: Complete a Keystone Heights Behavioral Health Strategic Plan.	1	Increase	Completion of behavioral health strategic plan	0	1	Keystone Heights Community Partnership School
1.4: Present behavioral health data/personal stories/workgroup progress to community groups and leaders.	0	Increase	# of presentations	4	4	Behavioral Health Workgroup

Activity 1.1: Apply for more funding for behavioral health prevention services.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.1.1: Research funding opportunities that Clay County is eligible for (Clay Electric, Partnership for Success/CAC, NACCHO).	Behavioral Health Workgroup	Clay Behavioral Health Center, CAC, DOH-Clay, LSF, Keystone Heights City Council	LSF received grant for Clay specifically. Pending details from LSF Representative. DOH-Clay, Fire and Rescue, CBHC received O2DA grant.	
1.1.2: Complete an assessment to understand what type of capacity/areas of need/type of need is needed.	Grant Applicant	Clay Behavioral Health Center, CAC, DOH-Clay, LSF, Keystone Height City Council		
1.1.3: Report grant status to behavioral health workgroup, Board of County Commissioners and Clay County municipalities.	Grant Applicant	Clay Behavioral Health Center, CAC, DOH-Clay, LSF, Keystone Height City Council		

Activity 1.2: Expand the peer specialist program to one Clay County hospital.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.2.1: Secure funding for Peer Specialist Program ($31,000).	Clay Behavioral Health Center	OPMC, Baptist Health		
1.2.2: Recruit, hire, and train Peer Specialist.	Clay Behavioral Health Center	OPMC, Baptist Health		
1.2.3: Set up protocol with hospital (OPMC).	OPMC/Baptist Health	OPMC, Baptist Health		
1.2.4: Educate community partners about Peer Specialist Program.	Clay Behavioral Health Center	OPMC, Baptist Health		

1.3: Complete a Keystone Heights Behavioral Health Strategic Plan.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.3.1: Present behavioral health assessment findings to leadership cabinet.	Keystone Heights Community Partnership School (KHCPS)	DOH-Clay, LSF, Clay Behavioral, CAC, Right Path	Complete	
1.3.2: Attain direction and guidance from leadership cabinet.	KHCPS	DOH-Clay, LSF, Clay Behavioral, CAC, Right Path		
1.3.3: Conduct strategic planning meetings.	KHCPS	DOH-Clay, LSF, Clay Behavioral, CAC, Right Path		

1.4: Report Behavioral Health data/personal stories/workgroup progress to community groups/leaders.

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1.4.1: Get on Board of County Commissioners Agenda/School Board for presentation once a quarter.	Clay Behavioral	DOH, CAC, KHCPS		
1.4.2: Create a list of stakeholder meetings to attend and present.	DOH-Clay	Behavioral Health Workgroup	Ongoing, BOCC, Clay SafetyNet Alliance (Monthly), CityNet - Keystone Heights, CCSB, CCSO, Economic & Community Development Committee	
1.4.3: Create a data bank of success/personal stories, testimonials of Clay residents.	Clay Behavioral	Behavioral Health Workgroup		
1.4.4: Create a presentation template, elevator speech, message.	DOH-Clay	Behavioral Health Workgroup		

Health Priority Area: Health Care Access						
Goal A: Increase education for legislators/policy makers/decision makers about health care access (especially behavioral health)						
Objective 1: By Dec 31, 2022 reach 5 legislators/policy makers/decision makers to share information about health care access in Clay County ▲						
Strategy: Encourage health care access related policy change through education					Anticipated Completion Date:	31-Dec-22
Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
1.1: Inform policy maker and legislators on health care access issues in Clay County	0	Increase	# of initiated contacts	3	4	Health Care Access Workgroup
1.2: Create a unified message - what's your ask (elevator speech) (need Clay County hospital involvement in creation)	0	Increase	Creation of message	1	1	Health Care Access Workgroup

Activity 1.1: Inform policy makers and legislators on health care access issues in Clay County				
Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1. Do some research on the policy makers – identify decision makers, most important individuals, individuals at the local level who are responsible for Clay County (combine 1&2)	Tina Baker	DOH-Clay, Heather Huffman		
2. Do some research on the policy makers – what is their stance on certain issues, length of time in office, etc.	Tina Baker	DOH-Clay, Heather Huffman		
3. Research legislative committees that are pertinent to health care access. Research Clay Day in Tallahassee (March), State of the County presentation, and Legislator Town hall	Tina Baker	DOH-Clay, Heather Huffman		
4. Research timing and cycles	Tina Baker	DOH-Clay, Heather Huffman		

Activity 1.2: Create a unified message				
Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1. Do some research on baseline data, current situation in Clay County/use CHA figures to better demonstrate current gap of health care access	DOH	Clay County Hospitals, KHCPS		
2. Outline advantages to telehealth practices - List of any financial incentives available	St. Vincent's Mobile Health	St. Vincent's Clay, RHN		
3. Create unified message once research and baseline data is complete	DOH	Health Care Access Workgroup		

Health Priority Area: Health Care Access						
Goal B: Increase access to primary medical and dental care services						
Objective 1: By Dec 31, 2020 identify 1 location for St. Vincent's Mobile Health Outreach Ministry that is closer to the area of need in Clay County. ▲						
Strategy: Identify priority areas of need					Anticipated Completion Date:	31-Dec-19
Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
1.1 Distribute a priority population (agencies that work primarily with populations of need) survey to understand areas/locations of need	0	Increase	Number of surveys completed	100	50	
Activity 1.1: Distribute a community or partner survey to understand areas/locations of need (maybe at the Clay SafetyNet Alliance).						
Description		Person Responsible	Key Partners/Contractors/Consultant		Status	Actual Start Date
1. Create the draft priority population survey based on local, state and federal best practices.		St. Vincents Mobile Health Outreach Ministry (MHOM)	DOH, Mercy Support Services, Clay SafetyNet Alliance		11.19.19: Survey created through Surveymonkey link and will be distributed to member of the SafetyNet Alliance group on Feb 20th.	
2. Research how to distribute the survey to the community groups. (what are the best locations to reach out to the community and gain buy-in. what agencies serve the populations in need) Health Care Access Wokgroup would distribute the survey starting at the Clay Safetynet Alliance....		St. Vincents Mobile Health Outreach Ministry (MHOM)	DOH, Mercy Support Services, Clay SafetyNet Alliance			
Analyze survey results and prioritize 3 areas of needs identified in Clay		St. Vincents Mobile Health Outreach Ministry (MHOM)	DOH, Mercy Support Services, Clay SafetyNet Alliance			

Health Priority Area: Health Care Access						
Goal B: Increase access to primary medical and dental care services						
Objective 2: By Dec 31, 2022 develop a dental health care access plan to enhance access to preventative services. (dental society, private dentists, St. Vincent's MHOM). ■						
Strategy: Improve access to dental care in Clay County.					Anticipated Completion Date:	31-Dec-22
Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
2.1: Gather information about low cost dental care benefits and providers.	0	Increase	Creation of low cost dental care information packet	1	n/a	

Activity 2.1 Gather information about low cost dental care benefits and providers.				
Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1. Research the dental society - when do they meet, list of members, etc.	DOH-Clay	Healthcare Access Workgroup, Duval Medical Society	The society meets at the Holiday Inn in Orange Park once a quarter. Members include: Dr. Aylin Mazzuoccolo – President Dr. Lauren Andreolas – Vice President Dr. Mike Sherman – Treasurer Dr. Alesia Apana – Secretary Dr. Nikki Darbani Sent email to aylin@264kids.com on 11/19 with no response received (1/6/20). Will follow up. Claudia has not received a call	
2. Find and update a list of providers available at the school through the social workers and through Mercy Support Services. This would also include researching the dental providers and dental colleges that are willing to do reduced dental care for the priority populations) This also includes research private dental practices that are willing to do preventative and crisis cases. Ensure that the list differentiates between free, low cost, reduced cost, etc.	Mercy Support Services	School System (Clay County Schools), Clay Safetynet Alliance, Clay County Hospitals		
3. Send information about low cost dental care benefits and opportunities to faith based organizations, school district, hospitals, Claysafety Net members, police and law enforcement, etc.	DOH-Clay	All	Sent provider list to Mercy Support Services.	
4. Educate the dental community about applying for sovereign immunity through the State of Florida.	St. Vincent's MOHM	State of Florida Volunteer provider (Claudia to send Courtney more information on this)	http://www.floridahealth.gov/provider-and-partner-resources/getting-involved-in-public-health/volunteer-health-services-opportunities/index.html	

Health Priority Area: Health Care Access						
Goal D: Enhance collaboration between decision makers in the local public health system. (behavioral health, etc.)						
Objective 1: By December 31, 2020, establish an annual health care access meeting to better understand Clay County's overall capacity, services, and referral processes. (OPMC, Baptist, St. Vincent's, St. Vincent's MHOM, The Way Free Clinic, DOH-Clay, FQHC-Palms and Azalea, Clay Behavioral)						
Strategy: Strengthen collaboration among community partnerships and healthcare leaders.					Anticipated Completion Date:	31-Dec-22
Activities	Current Performance Level	Direction of Intended Change	Unit of Measurement	Year 1 Target	Year 2 Target	Data Source
1.1 Outline logistics for the annual healthcare access meeting	0	Increase	Completion of annual healthcare access meeting.	1	1	
Activity 1.1 Outline logistics for the annual healthcare access meeting						

Description	Person Responsible	Key Partners/Contractors/Consultant	Status	Actual Start Date
1. Create an invite list for the healthcare access meeting: to include healthcare leaders and congressional reps. Design and create invitation email to possible service providers	DOH-Clay	Healthcare Access Workgroup		
2. Invite specific leaders to the meeting personally with a one-on-one meeting to gain buy-in for the topic and the meeting. This will include: Establish a time to meet with services providers via doodle link. Prepare for meeting with services providers	Health Care Access Workgroup	DOH-Clay, Clay Safetynet, Mercy Support Services		
3. Create a date/time for the healthcare access annual meeting. Secure a location for the meeting.	DOH-Clay	Healthcare Access Workgroup		
4. Develop annual topic/theme for the meeting, create the agenda.	Health Care Access Workgroup	DOH-Clay, Clay Safetynet, Mercy Support Services		
5. After the meeting, create a list of take-always and action steps.	DOH-Clay	Healthcare Access Workgroup		

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