

Community Health Improvement Plan 2016-2019

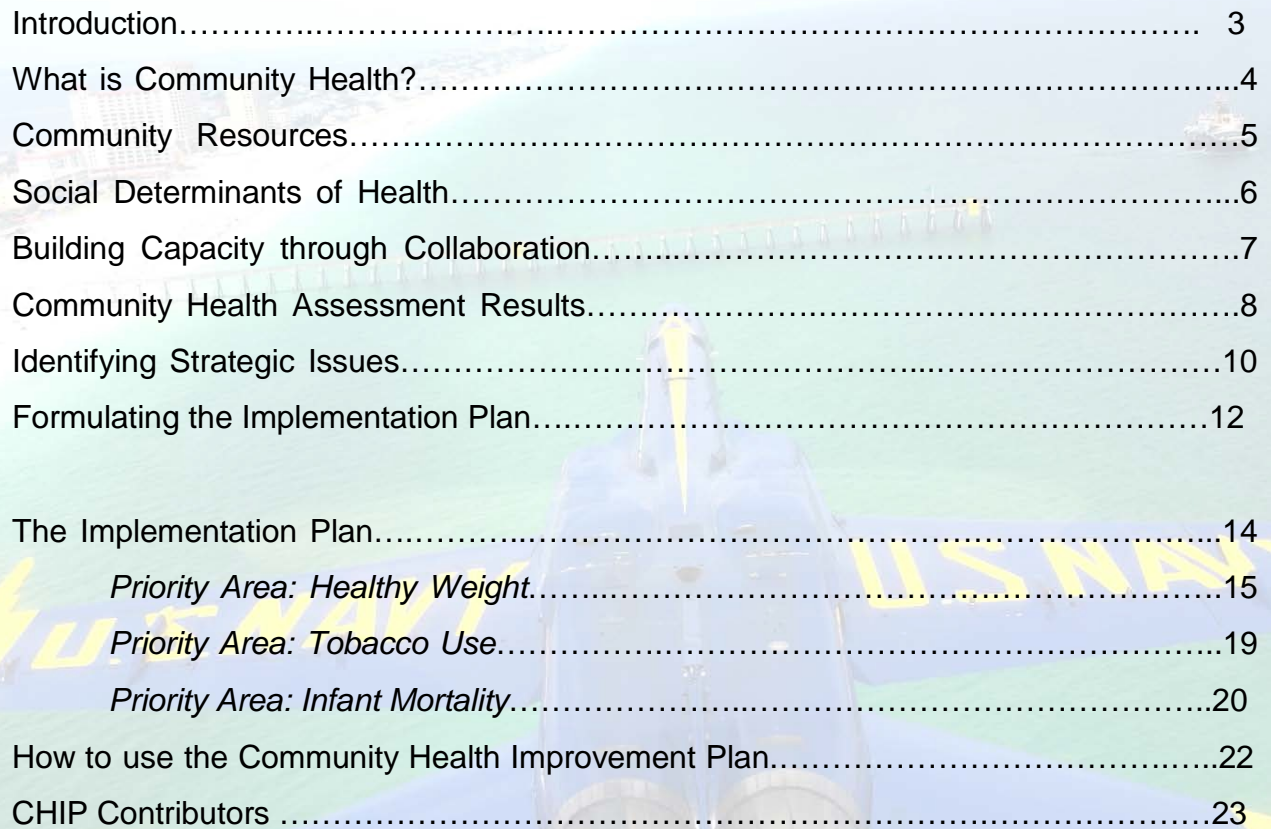


Florida Department of Health
In Escambia County

Version 2.0

Revised 03/2019

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Introduction

The role of public health is to protect and improve the health of families and communities through promotion of healthy lifestyles, research for disease and injury prevention, and detection and control of infectious diseases. Public health looks at issues affecting an entire population and focuses on prevention of disease, whereas traditional healthcare is focused on the treatment of disease.

Today, the Florida Department of Health in Escambia County operates as part of a statewide, integrated department. The mission of the Florida Department of Health is to protect, promote, and improve the health of all Floridians through integrated state, county, and community efforts. A cornerstone of these efforts is a thorough assessment of community needs, challenges, and resources. The most recent Community Health Assessment (CHA) was completed in 2015 under the leadership of the Live Well Partnership of Northwest Florida.



A public health institution has been operational in Escambia County for over 195 years. In 1821, Territorial Governor Andrew Jackson established a board of health in Pensacola. This gives Escambia County a unique place in history as home to one of the oldest continuously operating health departments in the country, and perhaps the world.

This Community Health Improvement Plan (CHIP) is derived from that assessment and outlines action steps to address the priorities selected by community members.

Improving health must be everyone's business. The CHIP is the result of the time and efforts of over one hundred individuals representing forty organizations. The action steps outlined in this plan will be implemented in the period from 2016 to 2019, however, the CHIP is a "living document" and can be modified to meet the changing needs of the community.

County Profile

Escambia County located in the Florida Panhandle is the western gateway to the state. It is surrounded by Alabama to the north and west, the Gulf of Mexico to the south, and Santa Rosa County to the east. The county has two cities; Century in the far north, and Pensacola in the south, where most of the population is centered. In 2014, an estimated 311,000 people lived within its borders; in 2018 the estimated number has risen by over 7,000 to 318,560 people continuing to make Escambia County the twentieth most populous county in Florida. A diverse community, the Black community represents 23% of Escambia County's population, which is higher than most counties in Florida, whereas, there are fewer residents who identify as Hispanic or Latino.

Social, environmental and economic factors play a significant role in the overall wellbeing of a community. Although the median household income has risen, poverty continues among the Black communities and their children. About 24% of Escambia County residents live in poverty, an increase from 17% in 2014. Households with children are disproportionately affected, with

28% of children living in poverty. The median household income has risen in Escambia County to \$49,783 per year, a \$4,783 increase over 2014, still under the state's median household income however. Approximately 37% of Escambia County residents are classified as a "cost burdened household," which means that 30% or more of a household's income is spent on rent or mortgage. The military and tourism anchor the local economy. The military and federal presence in Escambia County accounts for more than 20,000 jobs. In addition to the strong military presence in the area, healthcare accounts for a large segment of the local workforce. Other major employers in Escambia County include Navy Federal Credit Union, Gulf Power, and GE Wind Energy. Lastly, education is vital to individual health, and currently in Escambia County, high school graduation rate has increased exponentially from 2014 (66%) to 2017 (79%).

What is Community Health?

What is health? Ask members of the community and you will likely get many different answers. Some say it's the ability to run a marathon, some say it's not being sick, while others describe health as simply feeling well. The World Health Organization defines health as "a state of complete physical, mental, and social wellbeing."

A healthy community reflects a sense of mental and physical wellbeing among its individual members and is the foundation for achieving all other goals. Good health is essential for a productive society. Every community needs a healthy workforce upon which to build its economy and equip its students to learn and succeed academically. A community perceived as healthy and vital attracts new business and skilled labor. Healthy communities spend less on preventable healthcare costs related to chronic diseases such as diabetes, cancer, and heart disease.

The improvement of a community's health relies on no one person, government entity or private organization. The community is by very definition the shared, common interest among individuals and it requires the participation of all its members to succeed. A key part of the community health assessment is identifying resources in the community to actively participate in the improvement plan.

Escambia County Community Resources

<p style="text-align: center;">Education</p>  <p style="font-size: small; color: red;">We believe that children are the future!</p> <p style="font-size: small; color: red;">Teach them well and let them lead the way...</p>	<p>Public university State college Private colleges Public schools/school boards Vocational training schools Private/faith-based schools Head Start program Early Learning Coalition Childcare centers Public library system After-school programs</p>	<p style="text-align: center;">Family & Social Services</p> 	<p>Churches Faith-based organizations Maternal-child health coalitions State & federal programs Mental health counselors Crisis intervention facilities Social work students UF Extension Service Military family services Homeless shelters Safe houses Housing authority</p>
<p style="text-align: center;">Employment</p> 	<p>Healthcare system Military Small businesses Corporations Chamber of Commerce Hotel and restaurant industry Tourism industry Job placement services Bus services</p>	<p style="text-align: center;">Nutrition</p> 	<p>Large chain grocery stores Local farmers Farmer's markets Community gardens Food banks School breakfast & lunch WIC Program Restaurants Meals on Wheels Extension Service Senior centers Summer food programs Backpack meal programs</p>
<p style="text-align: center;">Healthcare</p> 	<p>Large hospital systems Military health system Federally Qualified Health Centers Florida Department of Health Walk-in clinics Degree programs in health Diabetes educators Disease support groups (cancer, lung, etc.) Mental health facilities Tobacco cessation programs Community school clinics</p>	<p style="text-align: center;">Physical Activity</p> 	<p>City Parks and Recreation Community centers Public sports fields YMCA Cycling groups Running associations Walking and biking paths Professional sports teams Recreational sports associations Worksite wellness programs School wellness coordinators After-school programs Weather, beaches</p>
<p style="text-align: center;">Civic Involvement</p> 	<p>Parent-Teacher Associations School wellness committees Hospital engagement Corporate and business leaders Government officials Faith-based groups Military volunteers/retirees Other volunteers/retirees Existing health work groups Media outlets</p>	<p style="text-align: center;">Culture</p> 	<p>Vital downtown development Beaches Maritime Park Museums Festivals and art shows Historical sites Airport, travel destination Retirees Urban and rural areas Agriculture</p>

Social Determinants of Health

The term “social determinants of health” is used to describe the effect social issues play on health. Education, income, and access to medical care and healthy foods are all part of the social determinants of health. If a person never learns how to read, it may be more difficult for that individual to choose nutritious food, to understand warning labels on cigarette packs, or other health messages. The ability to pay for insurance, to see a doctor, or to buy nutritious food has a strong impact on health. Residents must have access to stores that stock reasonably priced, nutritious foods to meet recommendations for a healthy diet. The physical environment also plays a role. If individuals do not feel safe in their community, and do not have places to walk or bike and be part of a social groups, their ability to reach optimal health is limited.

If we recognize that social issues are important to overall health, we must also recognize that these social issues impact certain groups more negatively than others, leading to some being less healthy than others. We use the term “health disparity” to describe these differences among groups of people. For example, in Escambia County, Black women are three times more likely to experience the death of an infant than their White counterparts. There is a myriad of various factors that play into infant health, but it is widely noted, Black families are more burdened by the negative aspects of those factors.



Health Disparity

“A type of difference in health that is closely linked with social or economic disadvantage. Health disparities negatively affect groups of people who have systematically experienced greater social or economic obstacles to health. These obstacles stem from characteristics historically linked to discrimination or exclusion based on race or ethnicity, religion, socioeconomic status, gender, mental health, sexual orientation, or geographic location.” - CDC

Health equity is achieved when health disparities are overcome. By identifying and addressing barriers to individual health for all citizens, we can empower our community to achieve a balanced state of wellbeing.

Comprehensive studies confirm that poor health translates into inflated costs for both the affected individuals and the community. Chronic diseases and related lifestyle risk factors are the leading drivers of rising health care costs for employers. Many of the health problems our community faces are the result of unhealthy behaviors such as not exercising, eating unhealthy food, and smoking, vaping or using smokeless tobacco. Of all poorly performing health outcomes in Escambia County, those affected by the identified priorities in the CHIP – unhealthy weight, tobacco/nicotine use and access to care-have higher health-related expenses.

Building Capacity through Collaboration

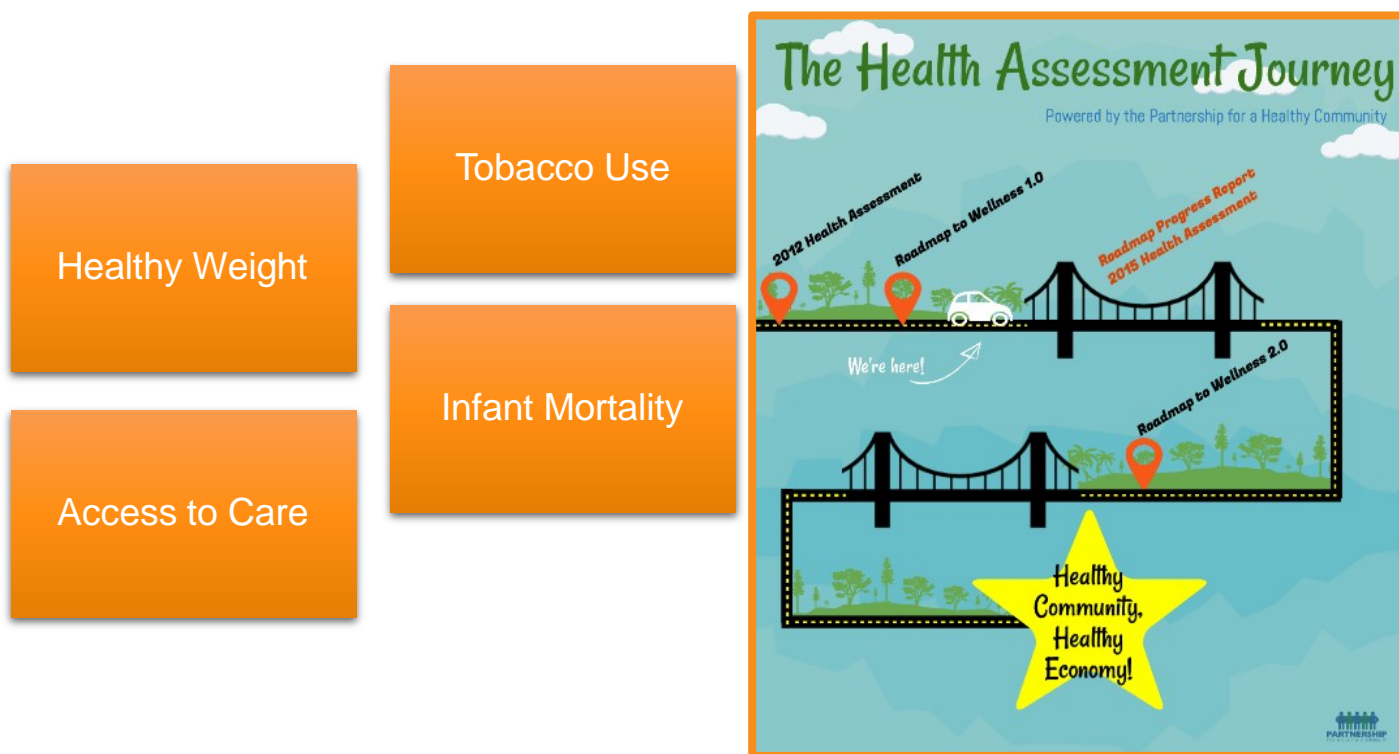


Escambia County shares its eastern border with Santa Rosa County. Members of each county share social groups; residents routinely work, play, shop, and obtain medical care in both counties. While each county retains a unique social and demographic identity, there is significant commonality in health challenges, available assets, and community leadership. Escambia and Santa

Rosa counties adopted a unique approach to community health assessment by combining resources to collect, assess, and address problems in both counties.

The process was directed by the Live Well Partnership of Northwest Florida, a nonprofit organization composed of a diverse group of community partners from both counties. Led by representatives from the Sacred Heart and Baptist Health Systems, and with technical assistance from the Florida Department of Health in both counties, the Partnership held three community forums with broad representation from both counties, and follow-up meetings to review the results of the community health assessment. The community forums resulted in the identification of three health priorities common to both counties, as well as issues unique to each county. Escambia and Santa Rosa counties have elected to combine their resources to address the common priorities of healthy weight, tobacco use, and access to care, while also working separately on the health priorities unique to each county.

Selected Health Priorities



Community Health Assessment Results

Methodology

The Florida Department of Health in Escambia County utilizes the Mobilizing for Action through Planning & Partnerships (MAPP) process to conduct Community Health Assessments. The MAPP process is a community-driven strategic planning process for improving community health. The process helps communities apply strategic thinking to identify and prioritize health issues and identify resources to address them. The MAPP tool was developed by the National Association for County and City Health Officials in cooperation with the Public Health Practice Program Office and the Centers for Disease Control and Prevention (CDC).

COME JOIN US

Do you want to see a healthier Escambia County?
WE WANT TO HEAR FROM YOU!

FORUM DATES:

AUGUST 12, 2015 - 8 AM
Access to Care
Baptist Medical Park
Azelea Room
9400 University Parkway
Pensacola, FL 32514

AUGUST 12, 2015 - 2 PM
Healthy Weight
Sacred Heart Hospital
Trinity Building
5375 North 9th Avenue
Pensacola, FL 32504

AUGUST 14, 2015 - 2 PM
Tobacco
Santa Rosa Medical Center
Locklin B Classroom
6002 Berryhill Road
Milton, FL 32570

The Partnership for a Healthy Community and the Florida Department of Health in Escambia and Santa Rosa Counties want to learn more about what can be done to improve the health of citizens in Northwest Florida.

Join members of your county in discussions about:

- physical activity
- nutrition
- tobacco use
- access to health care

For more information call:
850-595-6500 x 1801

Florida Department of Health in Escambia County
1295 West Fairfield Drive, Pensacola, FL 32501 Telephone: 850-595-6500

1) *The Community Themes and Strengths Assessment*

identifies themes that interest and engage the community, perceptions about quality of life, and community assets.

2) *The Local Public Health System Assessment*

measures the capacity of the local public health system to conduct essential public health services.

3) *The Forces of Change Assessment*

identifies forces that are occurring or will occur that will affect the community or the local public health system.

4) *The Community Health Status Assessment*

analyzes data about health status, quality of life, and risk factors in the community.

Summary of Findings

Community Themes and Strengths

A Community Health Survey was conducted with a total of 1,621 respondents from Escambia and Santa Rosa Counties.

Results

Obesity, Poor Eating Habits, Affordability of Healthy Foods, Access to Dental Care, Mental Health & Substance Abuse Behaviors, and Access to Mental Health Services

Local Public Health System Assessment (LPSHA)

Local public health partners convened in September 2015 and discussed Model Standard Activities that serve as quality indicators aligned with 10 Essential Public Health Service areas.

Results

Escambia County

39% of Model Standard Activities functioned within the Optimal Activity* category

Santa Rosa County

62% of Model Standard Activities functioned within the Optimal Activity* category

**Optimal Activity - Greater than 75% of the activity described within the question is met.*

Forces of Change Assessment (FOCA)

Twenty-two diverse stakeholders convened to answer the following question: "What is occurring or might occur that affects the health of our community or local public health system?"

Results

Top 5 Themes:

Education: Health Literacy, Funding, Partnerships, Chronic disease, Healthy Weight/Obesity

Community Health Status Assessment

County level data for 167 health status indicators and 27 demographic indicators were collected and compared to the state of Florida as a whole, using the Robert Wood Johnson County Health Rankings model.

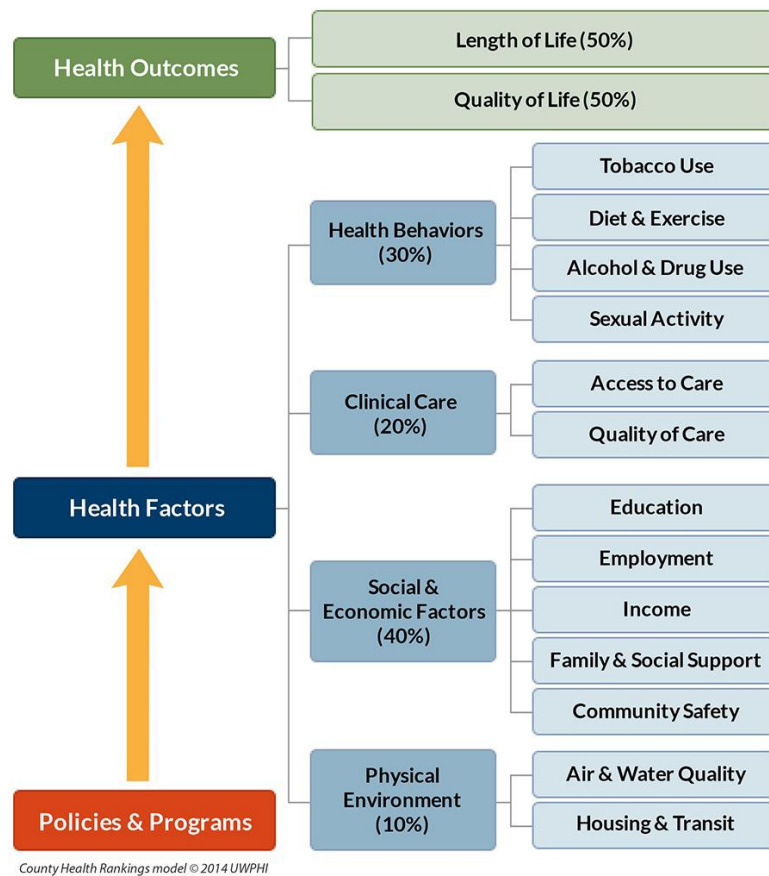
Results

For both counties, **worsening** trends in the following areas occurred: Healthy Weight/Obesity, Tobacco Use, and Access to Care.

Identifying Strategic Issues

Framework for Analysis

The results of the four MAPP assessments and the community profile were reviewed within the framework of the County Health Rankings Model created by the University of Wisconsin Population Health and The Robert Wood Johnson Foundation. To quantify a comparative scale among counties in the US, the County Health Rankings Model categorizes health data in three primary categories. The first, health outcomes, identifies health data that illustrate length and quality of life in a specific community. Secondly, the model recognizes the important health factors that contribute to these health outcomes. Data representing health behaviors, clinical care, social and economic factors, and the physical environment are weighted to describe the impact of these health factors in a comparable framework. Finally, the degree to which the policies and programs can affect health outcomes within a community.



Prioritizing Strategic Issues

A subcommittee of the Live Well Partnership of Northwest Florida was formed to conduct an extensive review and analysis of the data. The Community Assessment & Planning (CAP) committee included representation from the Florida Department of Health, hospitals, a federally qualified health center and a university representing both Escambia and Santa Rosa Counties. This group met regularly for several months to analyze the data and identify relationships between health factors and poor health outcomes in both counties. The committee considered each counties' ranking in health factors and outcomes compared to the average for the state. The committee also looked at trends for each indicator, whether our community was improving or growing worse compared to the rest of the state. Multiple opportunities for improvement were refined by assessing feasibility and potential impact using the following questions:

1. Are resources to address this issue available within the community?
2. Are there opportunities to achieve collective impact through partnerships?

Community Perspective

Community input was achieved in several steps throughout the process. The Live Well Partnership of Northwest Florida produced a summary of the health indicators and outcomes along with the recommended priorities. This summary was distributed to the public through emails, a community partner newsletter, posting on the Live Well and Florida Department of Health websites and presentations at community meetings. The Live Well Partnership hosted three community “roundtable” meetings to review the summary and give residents the opportunity to make recommendations. The committee identified three health priorities that were associated with multiple poor health outcomes in Escambia and Santa Rosa Counties. These are: *Healthy Weight, Tobacco Use, and Access to Care*. In addition, one county specific priority, *Infant Mortality*, was identified in Escambia County.

Healthy Weight

The Florida Department of Health has identified unhealthy weight as the number one public health threat to Florida’s future. Obesity contributes to millions of cases of preventable chronic diseases across the US each year. Heart disease, Type 2 diabetes, some cancers, and other debilitating conditions that contribute to lowered quality of life and premature death are associated with obesity and unhealthy weight. In Escambia County, the percentage of adults who are overweight or obese has risen from 60 in 2013 to 64 in 2016. This rise is consistent with the state overall, ensuring the need to address causal factors of unhealthy weight.

Tobacco Use

Tobacco use is the predominate cause of preventable death and disease in the United States. Smoking causes cancer, heart disease, stroke, diabetes, and lung disease. Secondhand smoke is also dangerous and can lead to cancer, heart disease and other chronic diseases. In the years 2013-2015, 1,004 Escambia County residents died from cancers related to tobacco use. The rate of residents dying from these diseases was higher than the overall Florida rate. The number of adults who are current smokers has dropped from 22% in 2013 to 17% in 2016. However, with the rise of electronic cigarettes, we have adapted our efforts to address the youth’s addiction to nicotine through this popular “safe” alternative.

Access to Care

Access to comprehensive, quality healthcare services is a fundamental aspect of maintaining health. For the individual, the cost of not having access to healthcare can result in loss of income, lowered quality of life, disability, and preventable death. The community suffers by bearing the burden of increased healthcare costs, depleted workforce, and greater demand of social services. Health insurance coverage is a major protective factor to access to healthcare,

What is a Healthy Community?

We asked residents of Escambia and Santa Rosa counties about the health of our community. Here’s what they had to say:

- ✓ *Stable employment, low crime, and a clean environment are important to having a healthy community.*
- ✓ *Obesity and child abuse are important health issues in the community.*
- ✓ *Drug abuse, poor eating, and excess weight are the most common unhealthy behaviors.*

as uninsured people are more likely have poor health status and die prematurely. Despite being unable to address this issue in the CHIP, the percentage of county residents that reported having ‘any type of health insurance’ has risen from 78% (2013) to 83% (2016) for Escambia County.

Infant Mortality

Infant mortality is a key indicator of a community’s overall health status. Leading causes of infant mortality include low birth weight (LBW) and preterm births. Low birth weight is classified as live birth of an infant weighing less than 2,500 grams, while preterm birth is a live birth occurring prior to 37 weeks gestation. Smoking during pregnancy has been linked to poor birth outcomes, including low birth weight and preterm deliveries. In Escambia County, the percentage of women who smoked during pregnancy has decreased from 10 (2012-2014) to 7 (2015-2017). In the same 3-year period (2015-2017), there has been an increase in low birth weight (10.6%), but a decrease in preterm births (12.9%). Turning our focus of the CHIP to other causes of low birth weight and premature births.

Formulating the Implementation Plan

Data from the community meetings was incorporated into the final priority recommendations and presented to the Live Well Partnership of Northwest Florida Board for review and approval. With priorities established, the next step was to identify specific goals within each priority and the approach the community would take to meet those goals. This was accomplished within the work groups assigned to each priority. The groups met over several months to identify specific goals, strategies, and objectives.

**Each Objective
is S.M.A.R.T.**

Common Language

To ensure a common language across all community work groups and partners, the following definitions were adopted:

Goal	What we hope to achieve, the desired result
Strategy	The approach we will take to achieve goals
Objective	A specific, measurable result
Tactic	Actions or steps taken to achieve the objective

S = Specific
M = Measurable
A = Achievable
R = Realistic
T = Time-bound

Evaluation

Evaluation is a key component of the Community Health Improvement Process. Stakeholders are constantly evaluating their efforts by asking questions such as: Did the objective have an impact? Are measurable outcomes observed? Are community members engaged in the process? Throughout the CHIP, specific objectives are written with specific outcome measures and time constraints. These S.M.A.R.T. objectives will be used to measure progress and document success. Leaders from each of the work groups will report quarterly on objectives.

These reports are shared with other work groups and members of the Live Well Partnership of Northwest Florida. The CAP committee will publicize an annual report detailing progress in all priority areas, success stories and barriers encountered. The Community Health Improvement Plan is a “living” document and may be modified to reflect changing conditions and priorities within the community. With the dissolution of the partnership in December 2018, 2017-2018 was the last year for the approval of the modifications by the Live Well Partnership of Northwest Florida Board. The CHIP will still prioritize community collaboration, but with the Florida Department of Health in Escambia County at the helm.

The Implementation Plan



2016-2019

Version 3.0

Revised 03/2019

Florida Department of Health
In Escambia County

Priority Area: Healthy Weight

Goal 1.0 Increase access to healthy foods among vulnerable populations

Strategy 1.1 Improve nutritional value of foods provided by food pantries

Objective 1.1.1 By December 31, 2017, at least 25% of the large food pantries in Escambia County will receive training in nutritional density standards

Objective 1.1.2 By June 30, 2019, at least 25% of food pantries in Escambia County that received training will adopt nutritional density standards

Lead Agency:	Key Partners:	Assets:	Policy needed: Yes
FDOH Escambia	Feeding the Gulf Coast Manna Food Pantries UWF	Food Banks Faith-based community Non-profit organizations	Local food pantry policy

Tactics	Measure	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Survey existing food distribution sites in Escambia on current policies and practices	Surveys completed	12/31/2016	0	100%	NA	NA
Develop nutritional guidelines for food pantries and train	Percent of large food pantries trained	12/31/2017	Establish January 2017	NA	25%	NA
Monitor food pantries on implementation of nutritional density standards policies	Percent of trained food pantries that adopt nutritional standards	12/31/2019	Number of food pantries trained	NA	15%	25%
Provide technical assistance to food pantries who have not yet adopted a nutritional standard policy	# of food pantries that have received TA from FDOH	12/31/2019	0	NA	NA	9

Priority Area: Healthy Weight

Goal 2.0 Increase the number of adults and children adopting behaviors associated with a healthy weight

Strategy 2.1 Decrease the consumption of sugar-sweetened beverages among children and their families

Objective 2.1.1 By June 30, 2019, at least 20 businesses or organizations in Escambia County will adopt zero sugar-sweetened beverage policies

Objective 2.1.2 By December 31, 2018 there will be a 2% decrease in Escambia County among the percentage of children enrolled in WIC with an assigned nutritional risk for consumption of sugar-sweetened beverages

Objective 2.1.3 By June 30, 2019, there will be no increase over 2016 baseline data in the number of 3rd grade or 6th grade students with high BMIs

Lead Agencies:	Key Partners:	Assets:	Policy needed: Yes
Florida Department of Health	School District School Dietitians/Nurses UF Extension Service	Chamber of Commerce membership Childcare center relationships	Local business or organizational policies

Tactics	Measures	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Identify and map elementary schools with high BMI rates for each year of the CHIP	1 st and 3 rd grade BMI	12/31/2016	0	100% identified	Compare to year 1	Compare to year 2
Provide technical assistance on policies and messaging for zero sugar-sweetened beverages to elementary school and childcare center	# of schools & CCC assisted	12/31/2019	0	1 class 5 CCC	3 classes 8 CCC	5 classes 10 CCC
Survey the community on awareness of the 5210 campaign	# of surveys at community events	06/30/2018	0	300	600	NA
Use 5210 message to promote zero sugar-sweetened beverages in WIC and parent education	WIC risk score	12/31/2018	27.6%	26.6%	26%	25.6%
Provide tech. assistance to businesses on developing zero sugar-sweetened beverage policies	# of businesses assisted	12/31/2019	0	2	4	5

Priority Area: Healthy Weight

Strategy 2.2 Increase physical activity among preschool age children

Objective 2.2.1 By December 30, 2017, 70 childcare providers will receive training on incorporating physical activity in daily non-recess activities

Objective 2.2.2 By June 30, 2019, 25% of the childcare centers that received training in FY 2016-2017 will implemented healthy physical activity policies

Lead Agency:	Key Partners:	Assets:	Policy needed: Yes
Florida Department of Health	Early Learning Coalition University of West Florida	Childcare centers relationships UWF student volunteers Parks and Recreation facilities	Local childcare center policies

Tactics	Measures	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Provide training to childcare center providers on incorporating physical activity in daily non-recess activities	Training attendance log	12/30/2017	119	160	190	NA
Monitor implementation of policies incorporating physical activity into daily non-recess activities	Monitoring log	06/30/2019	FY 2015-16 baseline	NA	15%	NA
Provide training and information to parents of preschool children on increasing physical activity throughout the day	# of presentations at community events	12/31/2019	0	4	7	10
Increase use of the 5210 Let's Wiggle website among parents and childcare providers	Increase in website hits per month	12/31/2019	01/30/2017 baseline	NA	30%	75%
Increase the distribution of Walker finds his wiggle book among teacher and parents of preschoolers	# of books distributed	12/31/2019	6500	NA	NA	10,000

Priority Area: Healthy Weight

Strategy 2.3 Increase diabetes education, including nutrition and physical activity education to vulnerable adult populations.

Objective 2.3.1 By December 31, 2018, there will be at least 8 community events in which behavioral risk factor screening for Type 2 Diabetes will be offered to vulnerable populations.

Objective 2.3.2 By June 30, 2019, there will be at least 7 NDPP classes offered in the community

Lead Agency:	Key Partners:	Assets:	Policy needed: No
Florida Department of Health	Diabetes Association YMCA Sacred Heart Health System	Faith-based Organizations Community Centers	Not at this time

Tactics	Measures	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Partner with healthcare providers, faith-based and community groups to conduct behavioral risk factor screenings for Type 2 diabetes in vulnerable populations	# of screening events offered to vulnerable populations	12/30/2018	0	2	5	8
Establish and maintain referral mechanisms among healthcare providers and health educators for NDPP programs	Referral mechanism in place	12/31/2017	0	1	NA	NA
Increase the # of referrals from participating healthcare providers and HEs to the NDPP programs	# of referrals	12/31/2019	13	NA	NA	20
Monitor number of National Diabetes Prevention Programs (NDPP) classes offered in the community	# of NDPP classes offered in the community	12/31/2019	1	3	5	7

Priority Area: Tobacco Use

Goal 3.0 Reduce the number of youth using electronic nicotine delivery systems (ENDS)

Strategy 3.1 Increase risk awareness of electronic nicotine delivery systems

Objective 3.1.1 By June 30, 2018, education on electronic nicotine delivery systems will be integrated into 100% of tobacco related classes or presentation to middle and high school students

Objective 3.1.2 By June 30, 2019, at least 25% of organizations with tobacco free policies will include electronic nicotine delivery systems language to their tobacco use policy

Objective 3.1.3 By June 30, 2019, there will be no increase over 2013 baseline data in the number of youth age 11-17 reporting electronic nicotine delivery system use

Lead Agency:	Key Partners:	Assets:	Policy needed: Yes
HEAT Coalition	SWAT Youth Group Area Health Education Coalition Florida Department of Health School District School Health Advisory Council	Established relationships with businesses and schools	Amended tobacco policies to include ENDS

Tactics	Measures	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Engage community partners and SWAT in distributing ENDS fact sheets at retail pharmacies, community centers, medical groups and schools	# of sites receiving information	12/31/2018	0	20	30	40
Integrate ENDS education into tobacco related classes or presentation to middle and high school students	% of middle and high school tobacco related classes that include ENDS	06/30/2018	0	25%	100%	NA
Provide technical assistance to organizations to include ENDS language in tobacco use policy	Policies that include ENDS	06/30/2019	16%	19%	21%	25%

Priority Area: Infant Mortality

Goal 4.0 Reduce the rates of low birth weight and preterm births in Escambia County

Strategy 4.1 Increase tobacco prevention and cessation education among women who are pregnant or may become pregnant

Objective 4.1.1 By June 30, 2018, 95% of WIC charts (of prenatal women with a smoking risk code in WIC program) audited will have documentation that a goal has been set to address smoking

Lead Agency:	Key Partners:	Assets:	Policy needed: No
Florida Department of Health	WIC	AHEC Classes WIC Electronic Record	Not at this time

Tactics	Measures	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Conduct training for WIC staff on impacts of smoking during pregnancy on low birth weight and preterm delivery	# of Staff Trained	12/30/2016	0	18	NA	NA
Perform quarterly audits on WIC prenatal charts with code for maternal smoking risks	% of charts audited with a documented tobacco related goal	06/30/2018	12/30/2016	70%	95%	NA
Provide training for WIC staff on asking clients with a prenatal smoking goal on their status during first postpartum visit.	# of Staff Trained	12/31/2019	NA	NA	NA	18

Priority Area: Infant Mortality

Strategy 5.2 Provide community education on risk factors for preterm and low birth weight births

Objective 5.2.1 By June 30, 2019, utilize at least 18 opportunities to deliver community education on perinatal risk factors for premature and low birth weight births to vulnerable populations

Objective 5.2.2 By June 30, 2019, utilize at least 9 opportunities to deliver education on perinatal risk factors for premature and low birth weight to community and/or organizational policy makers

Lead Agency:	Key Partners:	Assets:	Policy needed: No
Healthy Start	Florida Department of Health Faith-based organizations	Fetal & Infant Mortality Review Board Civic Organizations	Not at this time

Tactics	Measures	Due Date	Baseline	Year 1 Target	Year 2 Target	Year 3 Target
Deliver presentations on perinatal risk factors for premature and LBW births at community meetings or events	# of presentations given	12/31/2019	0	1	3	5
Deliver culturally appropriate handouts on perinatal risk factors for high risk populations	# of events	12/31/2019	0	2	6	8
Identify opportunities to provide information on perinatal risk factors in a variety of media outlets	# Media event used for perinatal risk education	12/31/2019	0	1	3	5

How to use the Community Health Improvement Plan

Employers

- Understand priority health issues in this community and use the plan to connect with resources that will make your business a healthier place to work.
- Educate your team leaders about the connection between health and productivity
- Complete the CDC Worksite Assessment survey to score the health of your worksite and learn what you can do to improve
- Advocate for city and county planning that incorporates health infrastructure such as increased walking and biking accessibility and community recreational spaces

Residents

- Understand priority health issues in this community. Use the plan to start a conversation with family, friends, co-workers and elected officials about what makes a community healthy.
- Pay attention to factors in schools, your workplace, church, and community that impact health. What could be done to make the healthy choice the easy choice?
- Get involved. Volunteer your time or expertise in one of the activities related to a health issue that's important to you.

Health Care Professionals

- Use this plan to identify resources and gaps in services that might impact your patients.
- Share information about the community health assessment and improvement plan with your colleagues, staff and patients.
- Offer your time and expertise to local improvement efforts.

Educators

- Advocate for a healthy school environment (promote availability of water, healthier food options and routine physical activity or “brain breaks”).
- Incorporate the science of healthy communities into math, science, social studies and history lesson plans. Educate students on how health behaviors, social, economic factors and environmental factors impact individual and community health.
- Use the data for background and statement of need components when writing community grants.

Non-Profit and Faith-based Organizations

- Understand priority health issues in this community and the impact for the most vulnerable populations.
- Lead discussions about the importance of overall wellness, mind, body and spirit, and the discuss personal behaviors and other factors that impact health.
- Identify opportunities for groups in your organization to support the health initiatives.
- Lead by example. Encourage water, healthier meal and snack options, and physical activity breaks.
- Use the data for background and statement of need components when writing community grants.

Government Officials

- Understand the priority health issues within the community.
- Identify barriers to good health among constituents. Encourage community leaders to invest in programs and policy changes that give residents the tools and opportunities to achieve optimal health.
- Use the data for background and statement of need components when writing community grants.

CHIP Contributors

Community Assessment and Planning Committee (CAP)

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Escambia and Santa Rosa County School Districts	Manna Food Pantries	Faith-based organizations