



Florida Department of Health in Escambia County has one document for their Community Health Assessment and their Community Health Improvement Plan. Please see below for the page number for each.

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FLORIDA DEPARTMENT OF HEALTH

Escambia County

Community Health Assessment

FLORIDA DEPARTMENT OF HEALTH IN ESCAMBIA COUNTY

Community Health Assessment

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Introduction

To protect, promote and improve the health of all people in Florida through integrated state, county, and community efforts.

The mission of the Florida Department of Health in Escambia County (DOH-ESCAMBIA) is to protect, promote and improve the health of all people in Florida through integrated state, county, and community efforts. The history of the DOH-ESCAMBIA dates back to 1821. At over 192 years in continuous operation, the DOH-ESCAMBIA is one of the oldest health departments in the world. The DOH-ESCAMBIA provides most of the public health services to the over 299,000 residents of Escambia County, Florida and to the over 3.5 million annual visitors. In addition, DOH-Escambia provides environmental health, communicable disease, public health preparedness, and certain engineering services to its neighboring Florida counties. The availability of public health services is fundamental to ensuring the quality of life for residents and visitors in Escambia County.

- Protect
- Promote
- Improve

Participation

Improving the health of a community is a shared responsibility. Through the collaboration of the Partnership for a Healthy Community (PFAHC) and the Louisiana Public Health Institute (LPHI), and with input from the Florida Public Health Institute (FPHI), this comprehensive report was championed by the DOH-ESCAMBIA.

The PFAHC formed in 1994 to assess the community health status and to communicate that information to community decision-makers and to the public. The PFAHC has sponsored comprehensive health status assessments in 1995, 1999, 2005, and in 2012.

The LPHI is the director of the Primary Care Capacity Project of the Gulf Region Health Outreach Program (GRHOP). The GRHOP was developed jointly by the British Petroleum Corporation and counsel as a result of the Deepwater Horizon litigation.

The FPHI was incorporated in 2001 and conducts action-oriented research and promotes leadership, partnerships and collaborations to build capacity for strong public health policy, programs, systems and practices. The mission of the Institute is to “advance the knowledge and practice of public health to promote, protect, and improve the health of all.”

Determinants

The following white paper was compiled by Dr. Susan Turner, associate director of the Escambia County Health Department, in March 2013, and it was shared by the PFAHC Executive Director and President with many stakeholders in the weeks leading up to the 2013 Health Summit.

Health Status is More Than Just Healthcare.

While health statistics are essential to evaluating the health of the Escambia County population, they do not tell the whole story. There are very powerful determinants of individual health beyond access to healthcare. Healthcare accounts for only 20 percent of those things that determine our health. The remaining 80 percent is divided evenly between personal behaviors and socioeconomic status. Poverty, education, race, community culture/infrastructure/policies, and personal choices (smoking, sedentary lifestyle, poor nutrition, obesity, risky sexual behaviors) are all significant determinants of health. These factors are all interrelated. In order to change the health of our county's residents, a culture change is needed. All factors negatively affecting health need to be addressed by multiple sectors of the community as a concerted effort. The UniteEscambia effort attempted to do just this, through the development of the "solution teams" (poverty, education, housing, health, environment). There is more to be done.

Poverty: when controlling for all other factors, income level is strongly associated with health and longevity. Unfortunately, there is a direct relationship between wealth and health. The more wealth a person or family enjoys, the longer they live.

- Areas with high poverty rates often have neighborhoods with more fast food, liquor, gun, and tobacco stores than grocery stores that sell fresh fruits and vegetables
- High poverty neighborhoods often lack parks but have rail yards or industrial parks, air or soil pollution, segregated housing, unsafe streets, and crime.
- These conditions foster homicide, asthma, substance abuse, heart disease, high blood pressure, infant mortality and mental stress.

Education: Education has profound health effects.

- More schooling in general – not just health education – can lead to greater knowledge about health and greater ability to apply that knowledge to change behavior – one's own behaviors and the behaviors of one's children – in healthy ways.
- More education makes an individual more aware of healthy and unhealthy choices and makes it easier to make healthy choices.
- Education is tightly linked with income and wealth (see Income), which in turn are tightly linked with health; for example, more schooling yields opportunities for more rewarding jobs with healthier working conditions (see Work).

Race: our community experiences several distressing racial disparities.

- Infant mortality is three times more prevalent in black babies than in white
- Chronic diseases such as hypertension, diabetes and cardiovascular disease are all more prevalent among our black population.

Community: where one lives strongly affects one's life choices and health behaviors.

- Community infrastructure such as sidewalks, bike paths and stores (and restaurants) offering healthful food choices affect behavior choices by community residents. We need to support "smart growth".
- Cultural aspects, such as making healthful physical activity and healthful food choices the norm, practicing safe sexual behaviors and avoiding tobacco and alcohol use reinforce healthful choices by individuals. Culture can directly affect personal behaviors/choices.
- Community policies, such as tobacco use limitations, food choices that can be offered in schools and other community venues, an emphasis on encouraging development of health facilities, the inclusion of side walks in community development, the location of healthful food outlets in all parts of the community, can also affect an individual's health choices
- Community leaders can assist in addressing these kinds of issues when making economic development, transportation, redevelopment and funding allocation decisions.

Personal choices:

- Smoking is one of the biggest single contributors to premature death, followed closely by sedentary lifestyle and poor diet.
- Obesity is the underlying cause of much of the morbidity associated with chronic diseases.
- Risky sexual behaviors have contributed to Escambia County's recent syphilis outbreak, the higher levels of sexually transmitted diseases and the higher levels of teen pregnancy our community experiences compared to the rest of the state.



Escambia County Profile

Population Characteristics

Escambia County, Florida is bordered by Alabama to the north and west, the Gulf of Mexico to the south, and Santa Rosa County, Florida 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. Escambia is the 19th largest of Florida's 67 counties by population with 1.6% of Florida's population and the 38th largest county by landmass.



The population trend over the past 50 years shown in Table 3 highlights the significant population growth differences between Escambia County and the State of Florida. The State of Florida has grown over 280% in the past 50 years, whereas Escambia County has grown just over 70%.

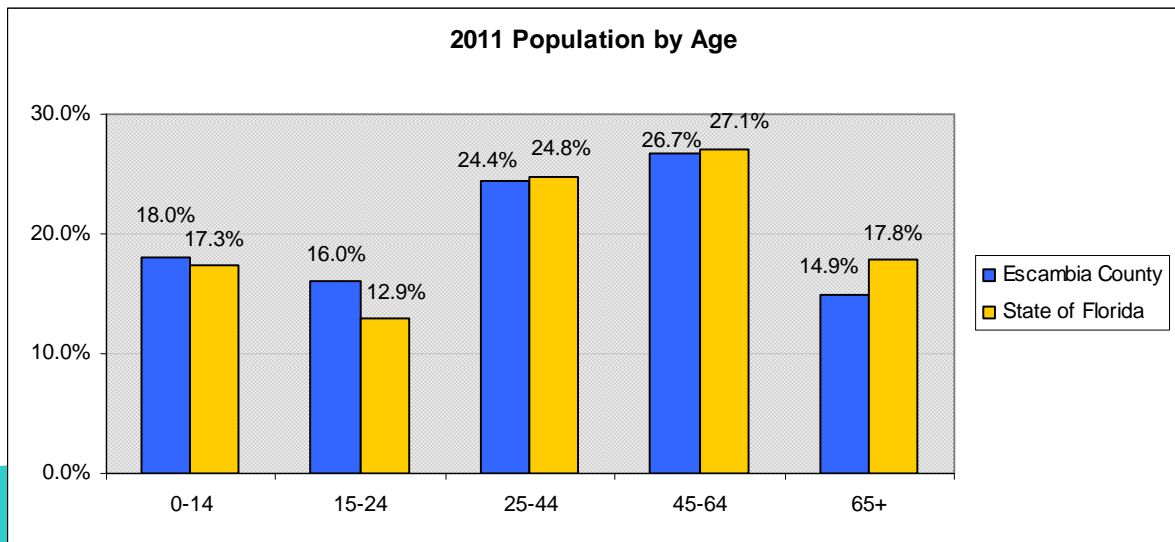
Population Trend

	1960	1970	1980	1990	2000	2010
Escambia County	173,829	205,334	233,794	262,798	294,410	297,619
State of Florida	4,951,560	6,789,443	9,746,324	12,937,926	15,982,378	18,900,773

Source: U.S. Census Bureau, Population Division

The *natural increase* in population is the increase or decrease in the population based on births (fertility) and deaths (mortality). The formula is: Births - Deaths = Natural Increase. The Florida Population Atlas states that “Five counties in Florida attribute over 50% of their population growth from 1970 to 2010 to natural increase: Escambia, Gadsden, Hardee, Monroe, and Okaloosa. Escambia County is the only county that consistently accounted for a majority of its population change due to natural increase for each 10-year interval over the 40-year period.”

The figure below shows that Escambia County is similar to the state of Florida in the age range of its population. More than half of the population for the county and the state falls into the 25-64 age range



Source: Florida Charts

There are greater differences between Escambia County and the state of Florida in population distribution by race and in the Hispanic population. The table below shows the state of Florida is over 78% percent white by race, whereas Escambia County is only 70% white by race. And the state of Florida is more than 22% Hispanic whereas Escambia County is less than 5% Hispanic.

Population by Race

	Escambia County		State of Florida	
	Population	Percentage	Population	Percentage
White	209,875	70.1%	14,979,576	78.5%
Black	69,254	23.1%	3,148,573	16.5%
Other	20,474	6.8%	954,113	5.0%
Total	299,603	100.0%	19,082,262	100.0%

Source: Florida Charts

Hispanic Population

	Escambia County		State of Florida	
	Population	Percentage	Population	Percentage
Hispanic	14,681	4.9%	4,350,756	22.8%
Non-Hispanic	284,922	95.1%	14,731,506	77.2%
Total	299,603	100.0%	19,082,262	100.0%

Source: Florida Charts

SOCIAL AND ECONOMIC CHARACTERISTICS

Socioeconomic factors, including income, education and employment status, are health status indicators. Escambia County measures lower than the state of Florida on all counts of income including per capita personal income, average weekly wage and median household income. With respect to poverty, Escambia County has higher percentages of poverty than the state of Florida in all ages, under age 18 and ages 5-17 in families.

Income

	Escambia County	State of Florida
Per Capita Personal Income	\$36,047	\$39,636
Average Weekly Wage	\$727	\$814
Median Household Income	\$41,072	\$44,250

Source: FREIDA, Quarterly Census of Employment and Wages

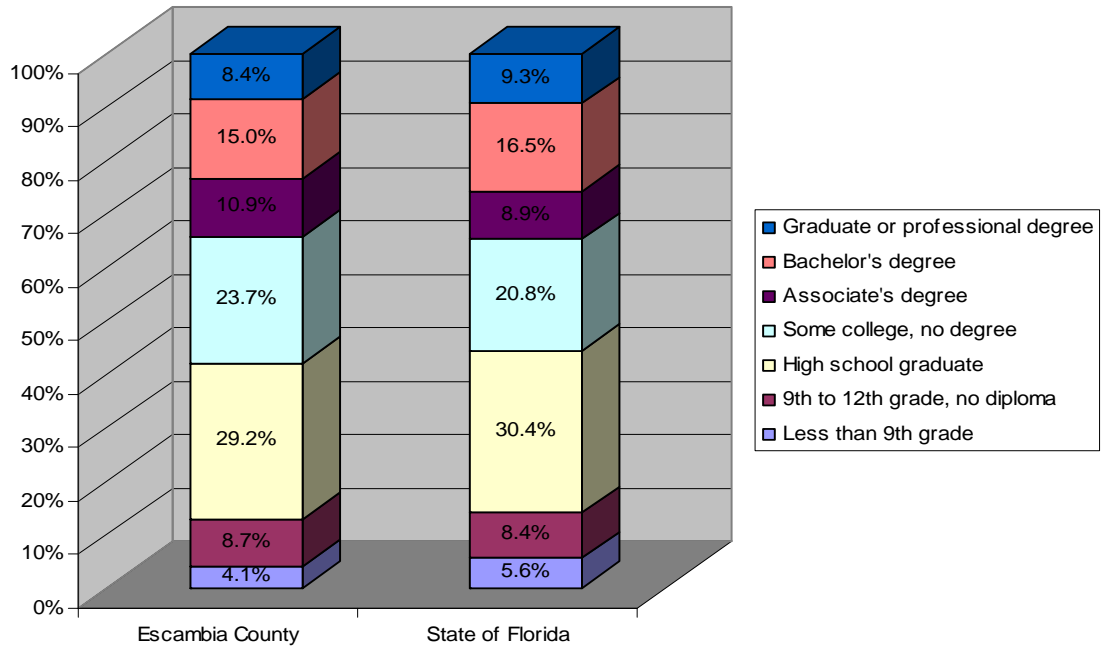
Percent in Poverty

	Escambia County	State of Florida
All ages in poverty	18.5%	17.0%
Under age 18 in poverty	28.3%	25.1%
Ages 5-17 in families in poverty	26.1%	23.5%

Source: Florida Legislature, Office of Economic and Demographic Research

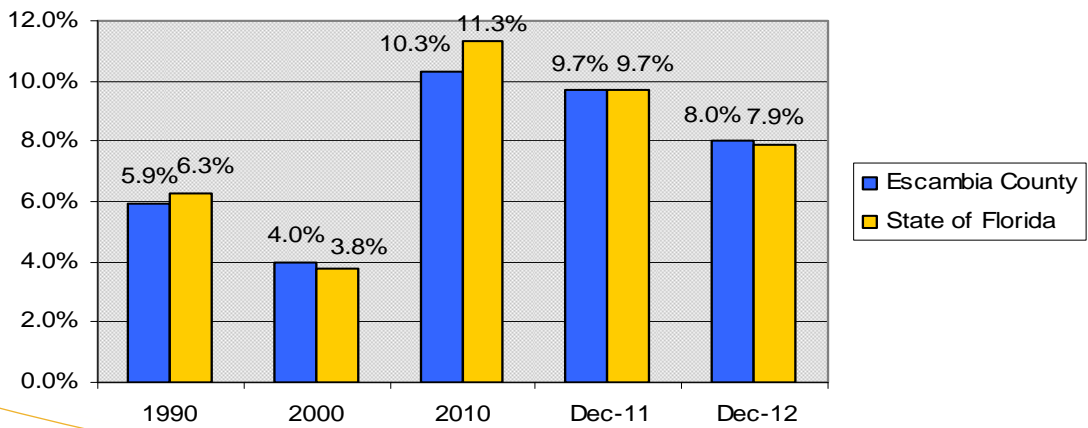
The educational attainment of Escambia County residents ages 25 and older is 87.2% with a high school degree or higher whereas the state of Florida is at 85.9%. And the unemployment rate for Escambia County and the state of Florida is approximately 8.0%.

Educational Attainment, Ages 25 and older



Source: U.S. Census Bureau, American Community Survey, 2011

Unemployment Rate



Source: Florida Legislature, Office of Economic and Demographic Research

Community Health Assessment

A community health assessment is the systematic collecting and analyzing of data to educate and mobilize communities, develop priorities, garner resources, and plan actions to improve public health. Through the substantial amounts of data available in Florida Charts, the FDOH-Escambia County is able to provide the analysis of data for the assessment process.

MAJOR CAUSES OF DEATH

The following table shows the age-adjusted death rate by cause for Escambia County as compared to the state of Florida. Age-adjustment is a statistical process applied to rates of disease, death, or other health outcomes which allows communities with different age structures to be compared. Rates are usually expressed in terms of the number of cases/deaths per 100,000 people per year.

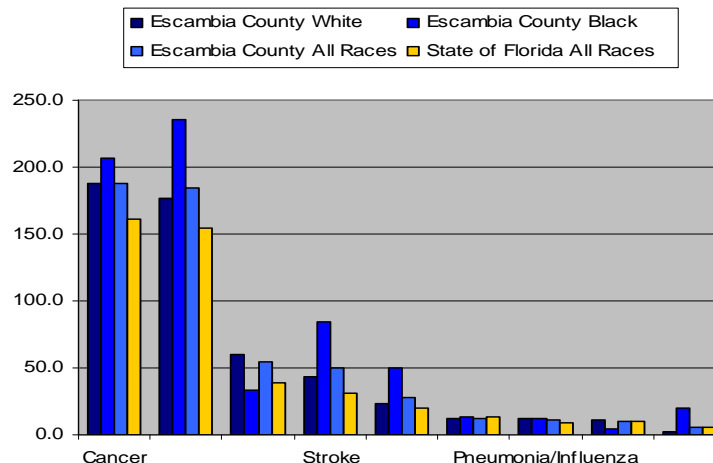
Heart Disease is the leading cause of death among black residents in Escambia County whereas cancer is the leading cause of death among white residents. The breakdown in the table below shows the differences in race as well as the similarities to the state of Florida.

Major Causes of Death

Resident 3-year age-adjusted death rates by cause

	Escambia County			State of Florida
	White	Black	All Races	All Races
Total Deaths	841.9	1038.4	862.1	676.2
Cancer	187.6	206.2	187.3	161.1
Heart Disease	177.0	235.3	184.2	154.3
CLRD	60.5	33.2	54.9	38.6
Stroke	43.6	84.1	49.9	31.4
Diabetes	23.5	49.6	27.6	19.5
Motor Vehicle Crashes	12.6	13.7	12.4	12.9
Pneumonia/Influenza	11.7	12.4	11.5	9.0
Cirrhosis	11.4	4.3	9.8	10.5
AIDS/HIV	2.4	19.8	6.0	5.6

Source: Florida Office of Vital Statistics *Chronic Lower Respiratory Disease



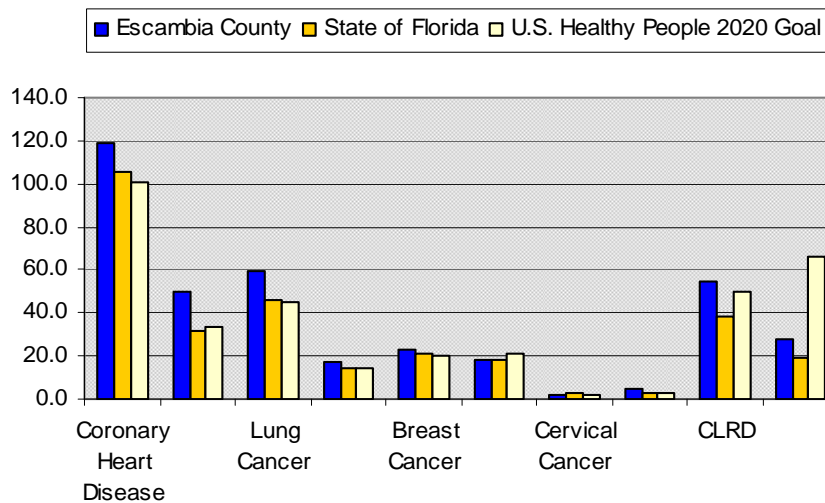
CHRONIC DISEASE

According to the CDC, chronic diseases such as such as heart disease, stroke, cancer, diabetes, and arthritis are among the most common, costly, and preventable of all health problems in the U.S. The table below shows the chronic disease profile for Escambia County as compared to the state of Florida and the U.S. Healthy People 2020 Goal. Coronary heart disease followed by lung cancer is the chronic disease in Escambia County with the highest death rate.

Chronic Disease Profile, 2009-2011
Resident 3-year age-adjusted death rates by cause

	Escambia County	State of Florida	U.S. Healthy People 2020 Goal
Coronary Heart Disease	119.1	105.8	100.8
Stroke	49.9	31.4	33.8
Lung Cancer	59.0	46.1	45.5
Colorectal Cancer	17.5	14.3	14.5
Breast Cancer	23.2	20.9	20.6
Prostate Cancer	18.1	18.0	21.2
Cervical Cancer	1.6	2.7	2.2
Skin Cancer	4.4	2.9	2.4
CLRD	54.9	38.6	50.1
Diabetes	27.6	19.5	65.8

Source: Florida Charts *Chronic Lower Respiratory Disease



COMMUNICABLE DISEASE

The table below shows the 3-year rate of communicable diseases per 100,000 residents for Escambia County and the state of Florida. Where AIDS, Hepatitis A and Tuberculosis are below the state measure, STDs and Pertussis are significantly higher than the state

Communicable Diseases, 2009-2011
Resident 3-year rate per 100,000

	Escambia County	State of Florida
Sexually Transmitted Diseases (STD)		
Infectious Syphilis	10.9	6.2
Gonorrhea	199.6	107.6
Chlamydia	571.2	396.0
TOTAL	781.7	509.7
Vaccine Preventable Diseases		
Acute Hepatitis B	1.0	1.5
Measles	0.0	0.0
Mumps	0.0	0.1
Rubella	0.0	0.0
Pertussis	11.3	2.0
Tetanus	0.0	0.0
AIDS and Other Disease		
AIDS	14.4	18.9
Hepatitis A	0.2	0.9
Tuberculosis	2.2	2.9

Source: Florida Department of Health, Division of Disease Control

The high rate of STDs is a trend for Escambia County. The table below shows the increase in rates over ten years per 100,000 residents.

Total Syphilis, Conorrhea, Chlamydia

Reported cases per 100,000 residents

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Escambia County	698.5	631.6	662.7	464.2	528.1	634.2	710.8	808.8	825.6	803.3	713.1
State of Florida	366.4	378.0	397.4	376.4	363.8	368.9	411.1	453.8	523.8	518.8	523.4

Source: Florida Department of Health, Division of Disease Control

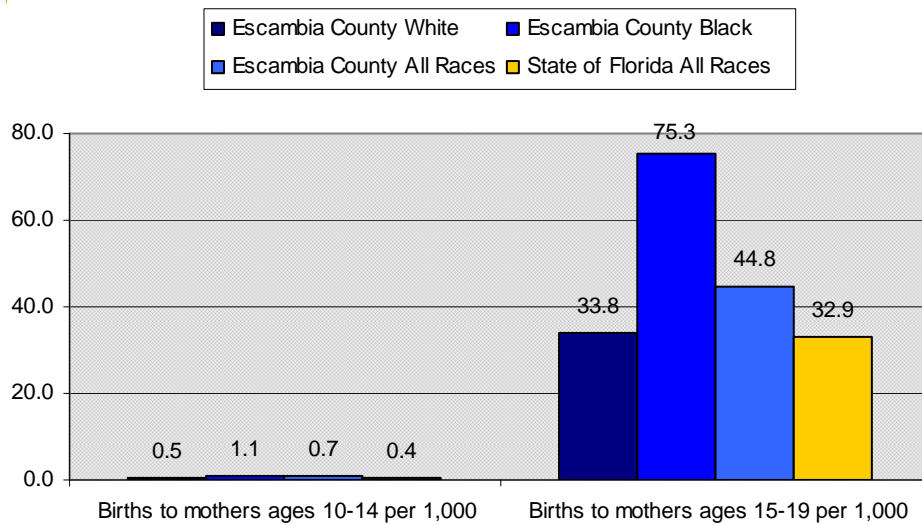
MATERNAL AND CHILD HEALTH

Research by the CDC and other health organizations shows that pregnancy and childbirth have a huge impact on the physical, mental, emotional, and socioeconomic health of women and their families. In Escambia County, births to unwed black mothers are significantly higher than births to unwed white mothers. Births to black teen mothers are also significantly higher than births to white teen mothers.

Maternal and Child Health, 2009-2011

	Escambia County			State of Florida
	White	Black	All Races	All Races
Total Births	2,515.0	1,232.3	3,974.7	
Percent of births to unwed mothers	37.3	81.4	50.9	47.6
Births to mothers ages 15-44 per 1,000	63.3	81.0	66.9	61.0
Births to mothers ages 10-14 per 1,000	0.5	1.1	0.7	0.4
Births to mothers ages 15-19 per 1,000	33.8	75.3	44.8	32.9
Infant Deaths (0-364 days) per 1,000 births	6.2	15.1	9.2	6.6
Low birth weight, percent of births <2500 grams	8.1	15.2	10.3	8.7

Source: Florida Department of Health



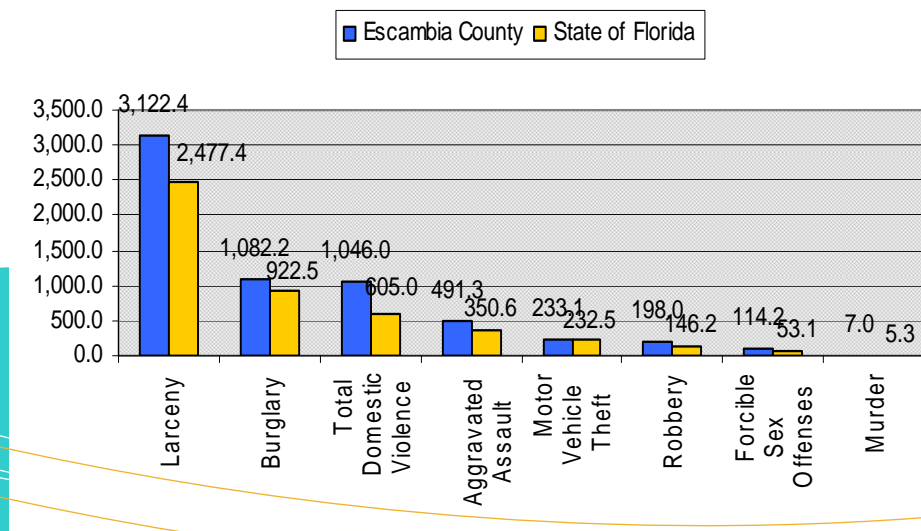
Overall health Escambia County residents experience a higher rate of violence on almost all measures than the state of Florida. Larceny and total domestic violence offenses are significantly higher than the state rates. According to Healthy People 2020, the effects of injuries and violence extend well beyond the injured person or victim of violence, affecting family members, friends, coworkers, employers, and communities. Witnessing or being a victim of violence is linked to lifelong negative physical, emotional, and social consequences.

Social and Mental Health, 2009-2011

Resident 3-year rate per 100,000

Crime and Domestic Violence	Escambia County	State of Florida
Larceny	3,122.4	2,477.4
Burglary	1,082.2	922.5
Total Domestic Violence Offenses	1,046.0	605.0
Aggravated Assault	491.3	350.6
Motor Vehicle Theft	233.1	232.5
Robbery	198.0	146.2
Forcible Sex Offenses	114.2	53.1
Murder	7.0	5.3
Alcohol-related Motor Vehicle Crashes		
Crashes	180.5	107.0
Injuries	147.2	74.8
Deaths	7.7	5.3
Suicide		
Age-Adjusted Suicide, 3-year death rate	12.3	13.8

Source: FDLE Uniform Crime Report, DHSMV "Traffic Crash Facts", Florida Office of Vital Statistics



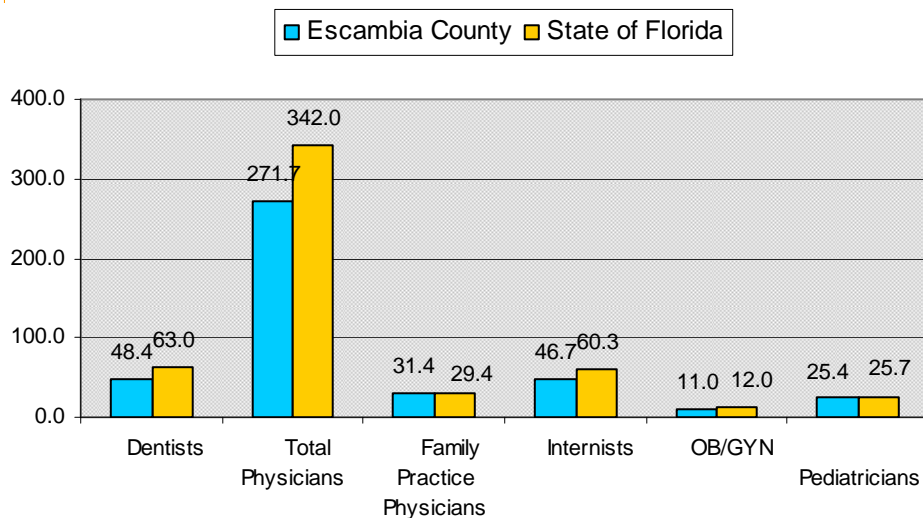
Access to health care services continues to be a central focus for health policy in Florida and is a determining factor in the health of a community. Hospital and nursing home beds in Escambia County are measured at a higher rate than the state of Florida. However, the number of healthcare professionals is significantly less in Escambia County than the state of Florida. The table below shows that the state of Florida has 342 physicians per 100,000 residents while Escambia County has only 271 physicians per 100,000.

Access to Care, 2011

Rate per 100,000

	Escambia County	State of Florida
Healthcare Professionals		
Dentists	48.4	63.0
Total Physicians	271.7	342.0
Family Practice Physicians	31.4	29.4
Internists	46.7	60.3
OB/GYN	11.0	12.0
Pediatricians	25.4	25.7
Facilities		
Total Hospital Beds	509.7	319.2
Total Nursing Home Beds	575.1	438.0

Source: Division of medical Quality Assurance and Office of Planning, Evaluation and Data Analysis, Florida Department of Health; Florida Agency for Health Care Administration



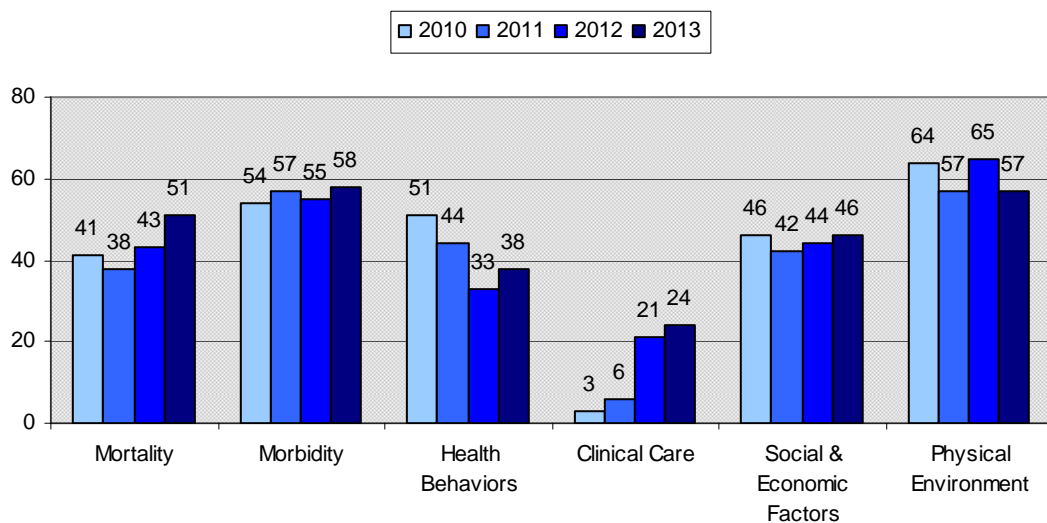
County Health Rankings

The University of Wisconsin and the Robert Wood Johnson Foundation published the fourth annual County Health Rankings & Roadmaps tool in March 2013. The data used in these rankings are available on each state and include information related to physical environment, social and economic factors, health behaviors, education, crime rate/law enforcement, and clinical care. These rankings serve as a snapshot of the health of the population for each county in Florida. The report highlights that health is a “work-in-progress” achieved by the combined actions of a variety of community partners. The Florida Department of Health (FDOH), through the efforts of its county health departments, works to improve the health of all Floridians.

In Escambia County, Florida, there are areas of progress and continuing opportunity. For example, the rate of adult smokers has decreased over the past four years, due in part to expanding partnerships between Tobacco Free Escambia, Escambia County schools, Pensacola State College, and the University of West Florida, as well as local businesses, and multi-family housing complexes. Challenges include the county’s adult obesity rate, which has remained unchanged since 2009.

Together, the Rankings and the Community Health Assessment provide a comprehensive picture of the health status and resources in our community. The Rankings frame a broad picture of the factors affecting the health of residents in Escambia County while the Community Health Assessment helps to bring into focus areas the community can address that will impact our health.

Escambia County Health Rankings



MAP-IT Process

Healthy People provides science-based, 10-year national objectives for improving the health of all Americans. For three decades, Healthy People has established benchmarks and monitored progress. Healthy People 2020 continues in this tradition with the launch on December 2, 2010 of its ambitious, yet achievable, 10-year agenda for improving the Nation's health. Healthy People 2020 is the result of a multiyear process that reflects input from a diverse group of individuals and organizations.

Healthy People 2020 uses a framework called MAP-IT (Mobilize, Assess, Plan, Implement, Track) that can be used to plan and evaluate public health interventions in a community.

- **Mobilize** individuals and organizations that care about the health of your community into a coalition.
- **Assess** the areas of greatest need in your community, as well as the resources and other strengths that you can tap into to address those areas.
- **Plan** your approach: start with a vision of where you want to be as a community; then add strategies and action steps to help you achieve that vision.
- **Implement** your plan using concrete action steps that can be monitored and will make a difference.
- **Track** your progress over time.

Mobilize The Partnership for a Healthy Community (PFAHC) produced a health status assessment in 2012 for Escambia and Santa Rosa Counties in Florida. The assessment results were presented at the Community Forum on December 5, 2012 sponsored by PFAHC. The following list of individuals represents organizations involved in Escambia County and is comprised of decision-makers and leaders in their fields. Each person was invited to the Community Forum. The panel-style format at the forum allowed questions and answers and created dialogue for the community decision-makers.

Rita Icenogle	211 Escambia
Audrey Wippler	Alzheimer's Family Services
Natalie Padgett	American Heart Assoc.
Jerry Kindle	American Red Cross
Bernard Williams	AMIkids Pensacola
Donna Fassett	ARC Gateway
Susan Byram	Autism Pensacola
Tammy Ward	Bay Area Food Bank
Paula Shell	Big Brothers/Big Sisters
Spencer Page	Boy Scouts of America
Jessica Jarosz	Boys & Girls Club of the Emerald Coast
Greg Strader	BRACE
La-Vonne Haven	Campfire USA
Mark Dufva	Catholic Charities
Lindsey Cannon	Catholic Charities
Kristin Fairchild	Chain Reaction
Tim Putman	Children's Home Society
Doug Brown	Community Action Program
Leashia Scrivner	Community Drug & Alcohol
Robin Kingry	Community Equity Investments
Jim Oleksak	Community Equity Investments
Marcell Davis	Community Information Network
Libby Rogers	Consumer Credit Counseling
John Clark	Council On Aging of West FL
Dale Knee	Covenant Hospice
Bruce Watson	Early Learning Coalition
Ashley Bodmer	ECARE
Holley Moseley	Epilepsy Society of NW Florida
Debra Trocki	Escambia County Healthy Start
Jennifer Passeretti	Escambia County Public Schools Foundation
John Johnson	EscaRosa Coalition on the Homeless
Cate Jordan	Families Count
Sue Hand	Favor House
Marty Stanovich	First Tee of Northwest Florida
Dondie Roper	Friends of the Pensacola Library
Michelle Kyser	Girl Scouts
Sheree Cagle	Global Learning Academy
Robin King	Goodwill Easter Seals
Stacey Kostevicki	Gulf Coast Kids House
Jessica Simpson	Health & Hope Clinic

Jennifer Young	Hope Center for Teens
Becky Kirsch	Independence for the Blind
Carmela Bechtel	Informed Families
Dennis Goodspeed	Lakeview Center
Parham Booker	Leaning Post Ranch
Manette Magera	Learn to Read of NW Florida
Kris Knab	Legal Services of North Florida
Beth Deck	Lutheran Services of Florida
Dorothy Brown	M & A Community Outreach
Dede Flounlacker	Manna Food Bank
Sonya Culliver	Milk & Honey Outreach Ministry
Doug White	N.W. Florida Legal Services
Chris Echsner	New Beginnings
Laurie Rodgers	PACE Center for Girls
Connie Bookman	Pathways for Change
Tim Evans	Pensacola Habitat for Humanity
Natalie Stolfi	Pensacola Habitat for Humanity
Sandra Woodbery	Rebuild Northwest Florida
Bambi Provost	Sacred Heart Foundation
Robin Heller	Seastars Aquatics
Leslie Hunter-Huff	Sickle Cell Foundation
Nancy Locke	Southwest Panhandle Search & Rescue
Katherine Champlin	Speech & Hearing Board
Roger Windell	The Salvation Army
Trudy O'Brien	United Cerebral Palsy
Sherry White	United Cerebral Palsy
Danny Contreras	United Cerebral Palsy
Ashley Meyer	United Ministries
Melissa Lewis	United Way of Escambia County
Andrea Krieger	United Way of Escambia County
Heidi Blair	USO of the Greater Pensacola
Michael Bodenhausen	YMCA
Andrea Rosenbaum	YMCA

Assess

The Louisiana Public Health Institute (LPHI) conducted a meeting for the GRHOP Primary Care Capacity Project on December 19, 2012. One goal of the Gulf Region Health Outreach Program (GRHOP) is to support the capacity of the five panhandle counties of Florida to conduct community health assessments, as a way to inform what community health improvement activities may best support community need. The key informants or stakeholders that participated in this process represent the groups listed below.

- Alliance Institute
- Escambia Community Clinics
- North Florida Educational Development Corporation
- Fort Walton Beach Medical Center
- Florida Department of Health in Bay County
- Gulf Coast State College
- Florida Department of Health in Escambia County
- Healthmark Regional Med Center
- Florida Department of Health in Okaloosa County
- Life Management Center
- Florida Department of Health in Santa Rosa County
- Mississippi Gulf Coast Black Nurses Association
- Florida Department of Health in Walton County
- North Florida Medical Centers, Inc.
- University of West Florida
- Panama City Community Redevelopment Agency
- Florida Department of Health
- PanCare of Florida, Inc.
- Baptist Health Care
- Sacred Heart Hospital
- Bay District School Board
- SAFER and Emergency Management
- Catholic Charities of Northwest Florida
- United Way of Escambia County
- Children's Medical Services Northwest Region
- University of South Alabama
- Community Partnership
- West Florida AHEC
- COPE Center
- YMCA of Northwest Florida- Escambia
- Emerald Coast Children's Advisory Center

The day-long meeting began with a review of community data such as the PFAHC report and information from Florida Charts. The stakeholders then identified health needs and barriers to health care services through facilitated discussion. The Escambia County roundtable of stakeholders narrowed the list of health status/outcomes to priorities including diabetes/obesity, adult dental health, chronic disease management, mental health, tobacco use, limited access to primary health care and overutilization of the emergency department.

Additional meetings were held in Louisiana and Florida with leaders of LPHI and PFAHC in January and February 2013. Through analysis of the Community Health Assessment, the assessment of the stakeholders at the LPHI group meeting, the County Health Rankings, and Dr. Susan Turner's compilation paper "Health Status is More than Healthcare," the health priorities identified for Escambia County were

- ✓ Tobacco use
 - ✓ Obesity/Nutrition
 - ✓ Access to Care
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Plan

On May 10, 2013, the Partnership for a Healthy Community (PFAHC), Baptist Health Care and Sacred Heart Health System sponsored a Community Health Summit, inviting leaders from area governments, businesses, education, health care, churches and other service organizations. The Summit was held to help all who attended understand why improving health must be a priority for everyone.

The Summit confirmed three priority areas for our community:

- ✓ Tobacco Use - Reduce the use of all tobacco products
- ✓ Obesity - Increase physical activity and improve nutrition
- ✓ Health Management - Improve the management of personal health and improve access to appropriate health services

Priority work groups were formed with group goals, responsibilities, membership and meeting schedules.

Group	Responsibility/Scope	Membership	Meetings
<p>Tobacco Use</p> <p>Goal Reduce the Use of All Tobacco Products</p> <p><i>Organizational Focus</i></p>	<ul style="list-style-type: none"> ▪ Identify and develop intervention strategies that promote policy, systems and environmental change within organizations ▪ Identify existing community resources ▪ Develop 3-year phased implementation plan for selected intervention strategies and activities ▪ Identify short-, medium-, and long-term indicators for selected interventions and activities ▪ Identify needs and resource opportunities for selected intervention strategies and activities 	<p><u>Co-Leaders</u> Escambia: TBD Santa Rosa: TBD</p> <p>Representatives from area businesses, governments, schools/colleges/universities, health providers, and service organizations</p>	Monthly
<p>Obesity</p> <p>Goal Increase Physical Activity and Improve Nutrition</p> <p><i>Community Focus</i></p>	<ul style="list-style-type: none"> ▪ Identify and intervention strategies and activities that promote policy, systems and environmental change within the community ▪ Identify existing community resources ▪ Develop 3-year phased implementation plan for selected intervention strategies and activities ▪ Identify short-, medium-, and long-term indicators for selected intervention strategies and activities ▪ Identify needs and resources opportunities for selected intervention strategies and activities 	<p><u>Co-Leaders</u> Escambia: TBD Santa Rosa: TBD</p> <p>Representatives from area businesses, governments, schools/colleges/universities, health providers, and service organizations</p>	Monthly
<p>Health Management</p> <p>Goal Improve the Management of Personal Health and Improve Access to Appropriate Health Services</p> <p><i>Provider Focus</i></p>	<ul style="list-style-type: none"> ▪ Identify intervention strategies and activities that promote policy, systems and environmental change to improve service referral capabilities, expansion of capacity for patient medical homes, and targeted care management programs ▪ Identify existing community resources ▪ Develop 3-year phased implementation plan for selected intervention strategies and activities ▪ Identify short-, medium-, and long-term indicators for selected intervention strategies and activities ▪ Identify needs and resources opportunities for selected intervention strategies and activities 	<p><u>Co-Leaders</u> Escambia: TBD Santa Rosa: TBD</p> <p>Representative from area health providers and service organizations</p>	Monthly

Implement and Track

Leaders in Escambia County are mobilizing to achieve improvements in the three strategic areas. With goals identified, strategies aligned, leaders enabled and measures in place, Escambia County is poised for success.

GOAL	STRATEGY ALIGNMENT			MEASURE	TIMELINE	LEAD ENTITY
	Healthy People 2020	State Health Improvement Plan	State Strategic Plan			
Reduce the Use of All Tobacco Products	HP2020: TU – Reduce illness, disability and death related to tobacco use and second-hand smoke exposure	CD4 Reduce illness, disability and death related to tobacco use and secondhand smoke exposure	Strategy 1.2.2 Reduce illness, disability and death related to tobacco use and secondhand smoke exposure	Reduction in current smoking rates	December 31, 2013 and then yearly measurements to show a decrease each year	PFAHC
Increase Physical Activity and Improve Nutrition	HP2020: NWS – Promote health and reduce chronic disease through the consumption of healthful diets and achievement and maintenance of healthy body weights	CD2 Increase access to resources that promote healthy behaviors	Strategy 1.2.1 Increase the proportion of adults and children who are at a healthy weight	Increase the percentage of adults who have a healthy weight (BMI)	December 31, 2013 and then yearly measurements to show an increase each year	YMCA
Improve the Management of Personal Health and Improve Access to Appropriate Health Services	HP2020: AHS – Improve access to comprehensive quality health care services	AC2 Improve access to primary care services for Floridians	Strategy 3.1.1 Increase access to care for underserved populations	Increase the percentage of persons who report having any kind of health care coverage	December 31, 2013 and then yearly measurements to show an increase each year	BHC/SHH

