



Community Health Improvement Plan

Gilchrist County

September 2012



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Overview

Community health needs assessment (CHNA) and community health improvement planning (CHIP) activities for Gilchrist County in 2012 have utilized the Mobilizing for Action through Planning and Partnerships (MAPP) framework, developed by the National Association of County and City Health Officials and the Centers for Disease Control (www.naccho.org/topics/infrastructure/mapp/). These activities were funded, in part, by the Florida Department of Health through grant funds to the Gilchrist County Health Department (GCHD) that originated from the U.S. Department of Health and Human Services in its efforts to promote and enhance needs assessment and priority setting and planning capacity of local public health systems.

The MAPP process consists of six phases:

Phase 1 - Organizing for Success and Organizing for Success

Phase 2 - Visioning

Phase 3 - The Four MAPP Assessments

- Community Health Status Assessment (CHSA)
- Local Public Health System Assessment (LPHSA)
- Community Themes and Strengths Assessment (CTSA)
- Forces of Change Assessment (FCA)

Phase 4 - Identify Strategic Issues (CHIP activity)

Phase 5 - Formulate Goals and Strategies (CHIP activity)

Phase 6 - Action Cycle (Program Planning, Implementation and Evaluation)

The CHSA provides insights into the current health status and key health system and health outcome indicators in a community. The LPHSA provides a community self-assessed report card for the local public health system (all partners with a vested interest in the public's health; not just the local health department). The CTSA allows members of the community to offer insights as to the key issues, strengths and weaknesses associated with the local public health system. And finally, while the FCA asks key leaders in the community in a variety of critical sectors what they believe will be the emerging threats, opportunities, events and trends that may either enhance or hinder a community's ability to address its most pressing healthcare issues, the Gilchrist County Community Health Needs Assessment did not include a FCA.

Collectively, the results of the three MAPP assessments conducted for Gilchrist County provide input to the community in order to identify strategic issues and formulate goals and objectives, activities which comprise the core of a CHIP process. Ultimately, a cycle of actions will emerge that include program planning, program implementation and ongoing evaluation to improve community health. This document provides a brief summary of key findings in each of the three key MAPP assessment areas (CHSA, LPHSA, and CTSA) and presents the Gilchrist County Community Health Improvement Plan.

Key Community Health Needs Assessment Issues

The following is a brief bulleted list of key insights each of the four assessments that comprised the MAPP CHNA. Ultimately, these key insights provided input to the CHIP process for Gilchrist County.

Community Health Status Assessment

Key insights of this section include:

- Low income, high poverty and limited economic base continue to be leading predictors of health outcome and health access in Gilchrist County both on an individual and county-wide basis.
- Gilchrist County continues to exceed the state death rates for most of the ten leading causes of death in Florida with the overall death rate in Gilchrist County being nearly 33% higher than the state.
- While there are disparities in death rates among white and black residents in Gilchrist County, black residents of Gilchrist County fare better than their counterparts at the state level for overall mortality.
- Gilchrist County is slightly worse than the state for many of the leading birth indicators.
- Overall, poor health behaviors are on the rise in Gilchrist County as measured by the Behavioral Risk Factor Surveillance System (BRFSS).
- Gilchrist County's rate of avoidable hospitalizations is nearly 50% higher than the state rate.
- The most recent estimates for the uninsured put the uninsured rate of Gilchrist County non-elderly residents between 18-21% though most of the best estimates are available for the period immediately prior to the precipitous economic downturn.
- Gilchrist County is near the bottom third of counties in Florida based on health rankings from the Robert Wood Johnson Foundation and the University of Wisconsin.
- Life expectancies of residents of Gilchrist County are substantially lower than state and national averages.

Local Public Health System Assessment

The LPHSA asks the question: "How well did the local public health system perform the ten Essential Public Health Services?" The ten Essential Public Health Services (EPHS) include the following:

1. Monitor Health Status To Identify Community Health Problems
2. Diagnose And Investigate Health Problems and Health Hazards
3. Inform, Educate, and Empower People about Health Issues
4. **Mobilize Community Partnerships to Identify and Solve Health Problems**
5. Develop Policies and Plans that Support Individual and Community Health Efforts
6. **Enforce Laws and Regulations that Protect Health and Ensure Safety**
7. **Link People to Needed Personal Health Services and Assure the Provision of 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

During the LPHSA, a cross-sectional group representing the local public health system was convened and asked to score the system in each of the EPHS areas. Then each EPHS was given a composite value determined by the scores given to those activities that contribute to each Essential Service. These scores range from a minimum value of 0% (no activity is performed pursuant to the standards) to a maximum of 100% (all activities associated with the standards are performed at optimal levels).

Based on the self-assessed scores of how Gilchrist County stacks up in each of the 10 Essential Public Health Services, these scores indicate that there may be opportunities in Gilchrist County to better mobilize community partnerships to identify and solve health problems, to enforce laws and regulations that protect health and ensure safety and to link people to needed personal health services. These were the areas where Gilchrist County scored lowest, based on self-assessment.

Based on the self-assessment of the cross-sectional group representing the local public health system partners, three of the ten Essential Services scored very low, which indicates a self-assessment of moderate or less performance against the standards. These include Essential Services 4, 6 and 7. The low scores for EPHS 4, 6 and 7 may indicate that there are opportunities in Gilchrist County in the following areas:

- better mobilize community partnerships to identify and solve health problems (EPHS 4);
- enforce laws and regulations that protect health and ensure safety (EPHS 6); and
- link people to needed personal health services and assure the provision of health care when otherwise unavailable (EPHS 7).

Community Themes and Strengths Assessment

Based on perceptions shared during Community Themes and Strengths Assessment (CTSA) focus groups, participants highlighted the following areas of concern:

- Economic barriers
 - Lack of jobs
 - Lack of health insurance
- Service needs and barriers
 - Public transportation
 - Mental health and dental services
 - After-hours care
- Potential resources available
 - School system
 - Health Department
 - Faith-based services

Forces of Change Assessment

Forces of change discussions were held after the original community health assessment process in conjunction with ongoing community health improvement activities. Key themes in the forces of change discussion included:

- Economic barriers
 - Lack of jobs
 - Lack of health insurance
- Service needs and barriers
 - Public transportation
 - Dental services
 - After-hours care
- Potential resources available
 - School system
 - Health Department
 - Faith-based services

Gilchrist County CHIP Methodology

To conclude the MAPP community health needs assessment, the Core Community Support Team, a group representative of the local public health system partners, was re-convened and to identify some potential next steps for Gilchrist County in addressing its most pressing needs and issues. Partners met to brainstorm issues and concerns. To conclude the session, participants also identified and discussed some potential strategic actions to pursue in order to address and possibly make improvements in these priority issue areas.

Potential next steps identified included:

- Conduct the fourth and final of the four core MAPP assessments (the Forces of Change Assessment).
- Formation of a key group of community leaders to address and advise the community on local public health system improvement activities.
- Utilize results of four MAPP assessments to drive a process of developing community-identified strategic priorities with goal statements and strategies.
- Utilize results of the four MAPP assessments to create a community health improvement plan (CHIP).
- Utilize results of the four MAPP assessments to create a local public health system improvement plan.

In order to create the Gilchrist County Community Health Improvement Plan, a Gilchrist County CHIP Work Group was formed from among key members of the of the original needs assessment team and from a representative group of the local public health system.

Members of the Gilchrist County CHIP Work Group met in-person for two workshops (July 31 and September 25, 2012) to take the input of the MAPP needs assessment and identify the priority issues and formulate a response to those issues which ultimately became the CHIP. During the workshop process, in addition to in-person deliberations and consensus-building, the CHIP Work Group utilized SurveyMonkey and other internet-based activities to help foster the plan. WellFlorida Council, the statutorily designated (F.S. 408.033) local health council that serves Gilchrist County, provided technical and administrative assistance as well as facilitation for the Work Group workshops.

During the July 31 workshop, members dissected the key insights of the needs assessment and brainstormed a list of key community health issues. Between the first and the second workshops, members participated in online priority ranking exercises utilizing SurveyMonkey in order to prioritize the list of issues based on their magnitude of importance in Gilchrist County and the likelihood that these issues could be substantially positively impacted through local efforts. Members of the CHIP Work Group reviewed priority rankings and finalized a ranked list of all key issues in an online forum. The Work Group then followed a similar brainstorming procedure to create a list of strategies for each of the key priority issues. To conclude the online issue and strategy prioritization, the Work Group employed a SurveyMonkey process similar to the issue prioritization survey in order to prioritize the key strategies for each key issue.

The final in-person workshop was held on September 25, 2012. During this meeting, Work Group members finalized the priority strategies for each priority issue and also identified goals and objectives for each of the major issue areas and strategies. WellFlorida Council then consolidated all of the information generated during the in-person workshops and during online sessions to create the draft

CHIP report. Members reviewed draft materials and then approved the CHIP goals, strategies and objectives and this final draft report via email.

Gilchrist County CHIP (Goals, Strategies and Objectives)

A key component of Gilchrist County's CHIP is an overarching strategy to conduct a community workshop sometime after the November 2012 general elections to present the results of the needs assessment and the CHIP to the key leaders and decision makers in Gilchrist County including representatives of:

- Gilchrist County Board of County Commissioners;
- City Commissions;
- County and City Managers;
- Clerks of County and Cities;
- Gilchrist County Sheriff's Department;
- City Police Departments;
- Emergency Medical Services;
- Gilchrist County Health Department;
- Palms Medical Group;
- Gilchrist County School Board and Public Schools;
- Ministerial Association and Churches;
- Physicians and Dentists;
- Mental Health Providers;
- Social Services Providers;
- Department of Children and Families;
- Department of Corrections;
- Gilchrist County Jail; and
- Leading Community Businesses

The Gilchrist County Work Group hopes for either the identification of groups to address specific components of the CHIP or the formation an ongoing key group of community leaders to address and advise the community on local public health issues, lead community projects to address health issues, and to shepherd ongoing needs assessment and community health improvement activities. As such, the following Gilchrist County CHIP is presented below as goals, strategies and objectives, and the Gilchrist County CHIP Work Group hopes and recommends that a group or groups committing to the vision in the CHIP will specify detailed action plans that include key activities, lead roles, community resources, targeted dates for key activities and evaluation measures. The Work Group noted that the consensus building that will ensue around the community workshop and the development of the detailed action plans may foster the growth and the development of ongoing community health improvement planning efforts.

GOAL 1 Increase the availability of physician services in Gilchrist County.

Strategy 1.1 Appeal to existing provider groups in surrounding counties, especially providers or provider groups, who have a personal history with previously delivering services in Gilchrist County.

Objective 1.1.1: Establish a community physician recruiting plan that includes recruiting permanent physician services or clinics and locum tenens services by September 2013.

Strategy 1.2 Pursue Low Income Pool (LIP) grant opportunities with the state of Florida in order to enhance services that promote emergency room diversion, outreach and education on appropriate utilization of health services and chronic disease management.

Objective 1.2.1: Submit a LIP grant application to the state of Florida, incorporating a community partnership approach, by August 2013.

GOAL 2 Reduce the negative societal and economic impacts of teen pregnancy, sexually communicable diseases and child abuse.

Strategy 2.1 Educate the community, key leaders and decision makers on the scope and magnitude of the problems associated with teen pregnancy, sexually transmitted diseases and child abuse.

Objective 2.1.1: By April 2013, conduct a community education campaign on the scope and magnitude of the impact of teen pregnancy, sexually transmitted disease and child abuse in Gilchrist County.

Strategy 2.2 Investigate best practices regarding human sexuality education for youth and tailor best practices to Gilchrist County standards.

Objective 2.2.1: Work with the school system to incorporate these new human sexuality education opportunities into Gilchrist Counties 2-Year School Health Plan by September 2013.

Strategy 2.3 Promote the Good Touch/Bad Touch program for the school-aged population in order to raise young children's awareness of their exposure to child abuse.

Objective 2.3.1: By September 2013, implement the Good Touch/Bad Touch program in venues that promote the program to young, school-aged children.

GOAL 3 Reduce the negative societal impacts due to substance abuse (especially prescription drugs and meth) in Gilchrist County.

Strategy 3.1 Pursue a federal Department of Health and Human Services Health Resources Services Administration Rural Health Network Planning Grant, potentially in partnership with Gilchrist County, to plan for a system of substance abuse and mental health services for uninsured and indigent clients.

Objective 3.1.1: By October 2013, apply for the Department of Health and Human Services Health Resources and Services Administration Rural Health Network Development Grant.

Strategy 3.2 Combine with Gilchrist County to work with the University of Florida Department of Psychiatry to re-introduce the free-of-charge Psychologist Services Program that was previously provided to Gilchrist County for 15 years (ending in September 2012).

Objective 3.2.1: By June 2013, investigate the feasibility, with Gilchrist County, of a community partnership to help the University of Florida defray some of the costs of this free (to clients) program to encourage the University of Florida to relocate the program back in the community.

Strategy 3.3 Create an annual or semi-annual unused prescription drugs round-up patterned after the successful toxic roundup efforts.

Objective 3.3.1: By April 2013, implement an ongoing annual or semi-annual unused prescription drugs roundup.

Gilchrist County Community Health Improvement Plan: Next Steps

As stated in Robert Wood Johnson's 2010 portfolio about vulnerable populations *A New Way to Talk about the Social Determinants of Health*:

"...No institution alone can restore a healthy America that nurtures families and communities. That will require leadership, and a partnership of business, government and civic and religious institutions."

In this respect, Gilchrist County and the health challenges its citizens face are no different. Members of the CHIP Work Group realize that the first step is to formulate promote this CHIP through a community workshop that will lead efforts to implement and grow this plan with the hopes of:

- Creating a healthier community and better quality of life;
- Increasing the visibility of public health and an understanding of what truly is the "local public health system;"
- Anticipating and managing change;
- Creating a stronger local public health infrastructure; and
- Engaging the community and creating community ownership for community health issues.

Thus, the "first" of the next steps that will be critical to implementation of the overall Gilchrist County CHIP and resultant action steps, subsequent MAPP assessments and ongoing community health improvement planning will be the presentation of the Gilchrist County community health needs assessment and CHIP to key community leaders and decision makers. Key constituencies that worked on the MAPP assessments and the CHIP will now focus on putting together the framework for the workshop that will hopefully lead to the implementation of the CHIP, monitoring of CHIP performance and ongoing community health needs assessment and community health improvement planning activities.

2013 Gilchrist County Community Health Improvement Planning Update

Update Overview

The focus of the 2013 update of the Gilchrist County Community Health Improvement Plan was to bring the plan into alignment with Public Health Accreditation Board standards for community health improvement planning. As such, the update includes the following components:

- An update to the goals, strategies and objectives to make them more consistent with the SMART format; that is the goals and strategies are tied to objectives that are **S**pecific, **M**easurable, **A**chievable, **R**ealistic and **T**ime-sensitive.
- Identification for each strategy of potential key leads and partners for implementation.
- Potential performance indicators (or interim measures of success).

- Alignment of goals and objectives of local plan with state and national priorities.
- Potential policy implications or policy actions that may need to be taken for implementation.

The sections that follow detail each of these components.

Updated Goals, Strategies and Objectives

Table 1 represents the updates to the goals, objectives and strategies from the 2012 CHIP process as well as the addition of performance measures and potential key leads and partners. Three additional CHIP meetings were held to update the 2012 CHIP to make it more in alignment with the Public Health Accreditation Board standards. Two meetings were held with the internal Gilchrist County staff team dedicated to CHIP activities and one meeting was held with the community-based CHIP Work Group. It is hoped that from this volunteer CHIP Work Group an ongoing implementation coalition will develop and that this coalition will be the coordinating body for ongoing CHIP and CHA activities in Gilchrist County.

Table 1. Gilchrist County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2013 Update.

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Partners and Resources
<p>GOAL 1 - Increase the availability of physician services in Gilchrist County.</p>	<p><u>Objective 1.1</u> By December 31, 2015, increase the number of licensed physicians in Gilchrist County from a 2009-2011 rolling average of 25 to a 2013-2015 rolling average of 27 (Source: Florida CHARTS).</p> <p><u>Objective 1.2</u> By December 21, 2015, reduce the percentage of adult residents of Gilchrist County who could not see a doctor at least once during the past year due to cost to 16.0% (Baseline: 17.5%, 2010 Department of Health, Florida CHARTS).</p>	<p><u>Strategy 1.A</u> Appeal to existing provider groups in surrounding counties, especially providers or provider groups, who have a personal history with previously delivering services in Gilchrist County.</p>	<ul style="list-style-type: none"> • By July 1, 2014, establish a community physician recruiting plan that includes recruiting permanent physician services or clinics and locum tenens services. • Identify potential recruiting partners. • Make pitch to local businesses and Chamber of Commerce that supporting this activity is economic development. • Create marketing message to potential providers in surrounding counties. • Work with Chamber and local businesses to develop potential incentives for new providers. • Conduct annual community-branded recruiting efforts to encourage providers to come to community. 	<ul style="list-style-type: none"> • Existing clinics and practices • Local government • Local businesses • Chamber of Commerce

Table 1. Gilchrist County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2013 Update.

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Partners and Resources
		<p><u>Strategy 1.B</u> Pursue Low Income Pool (LIP) grant opportunities (or the equivalent of LIP in the wake of health reform) with the state of Florida in order to enhance services that promote emergency room diversion, outreach and education on appropriate utilization of health services and chronic disease management.</p>	<ul style="list-style-type: none"> • By July 31, 2014 (or the grant cycle nearest this date), submit a LIP grant application, or its new equivalent, to the state of Florida, incorporating a community partnership approach • Gather all relevant data to determine most pressing needs. • Develop intervention or services model that the grant will fund. • Successfully recruit all necessary partners in Gilchrist County (and potentially Gilchrist County). • Develop volunteer grantwriting team and allocate work activities accordingly. 	<ul style="list-style-type: none"> • Gilchrist CHD • Local FQHC partners • Local government • Other local provider entities • Volunteer grant writer(s)
<p>GOAL 2 - Reduce the negative societal and economic impacts of teen pregnancy, communicable diseases and child abuse.</p>	<p><u>Objective 2.1</u> By December 31, 2015, reduce the rate of births to teens age 15-17 to 16.0 per 1,000 female teens aged 15-17 (Baseline: 2010-12 three-year average of 17.2, Florida CHARTS).</p> <p><u>Objective 2.2</u> By December 31, 2015, reduce the rate of domestic violence offenses to 600.0 offenses per 100,000 population (Baseline: 660.6 per 100,000, 2009-2011 Florida CHARTS).</p> <p><u>Objective 2.3</u> By December 31, 2015, reduce the rate of total Gonorrhea, Chlamydia and infectious Syphilis cases to 300.0 per 100,000 population (Baseline: 2010-12 three-year average of 390.2 per 100,000, Florida CHARTS).</p>	<p><u>Strategy 2.A</u> Educate the community, key leaders and decision makers on the scope and magnitude of the problems associated with teen pregnancy, sexually transmitted diseases and child abuse.</p> <p><u>Strategy 2.B</u> Investigate best practices regarding human sexuality education for youth and tailor best practices to Gilchrist County standards.</p>	<ul style="list-style-type: none"> • By December 31, 2014, conduct a community education campaign on the scope and magnitude of the impact of teen pregnancy, sexually transmitted disease and child abuse in Gilchrist County. • Develop priority messages. • Identify key media partners. • Identify community champions. • Develop educational materials and presentations. • Develop public service announcements and media resources. • Launch campaign. • By September 1, 2014, work with the school system to incorporate these new human sexuality 	<ul style="list-style-type: none"> • School system • Media outlets • Volunteer speakers • Media consultants • Gilchrist CHD • WIC • Local businesses • Local government • Meridian BHC • School system • Gilchrist CHD • Local government • Meridian BHC • Faith-based

Table 1. Gilchrist County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2013 Update.

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Partners and Resources
			education opportunities into Gilchrist Counties 2-Year School Health Plan. <ul style="list-style-type: none"> • Identify best practices. • Tailor best practices to Gilchrist County. • Incorporate policies and curriculum necessary to make these practices part of the 2-Year Plan. 	organizations
		<u>Strategy 2.C</u> Promote the Good Touch/Bad Touch program for the school-aged population in order to raise young children’s awareness of their exposure to child abuse.	<ul style="list-style-type: none"> • By September 1, 2014, implement the Good Touch/Bad Touch program in venues that promote the program to young, school-aged children. • Identify potential venues. • Secure potential venues. • Identify potential program staff or volunteers. • Identify opportunities within school system and with faith-based organizations. 	<ul style="list-style-type: none"> • School system • Gilchrist CHD • Faith-based organizations • Students • Parents • Volunteers or paid staff to deliver programming • Meridian BHC • EMS • DCF • Healthy Start
GOAL 3 - Reduce the negative societal impacts due to substance abuse in Gilchrist County.	<u>Objective 3.1</u> By December 31, 2015, reduce the percentage of adults who engage in heavy or binge drinking to 18.0% (Baseline: 20.1%, 2010 BRFSS). <u>Objective 3.2</u> By December 31, 2015, reduce the percentage of middle and high school students who report using alcohol in the past 30 days to 25.0% (Baseline: 30.0%, 2012 Florida Youth Substance Abuse Survey). <u>Objective 3.3</u> By December 31, 2016, reduce the risk factor prevalence rate for early	<u>Strategy 3.A</u> Pursue a federal Department of Health and Human Services Health Resources Services Administration Rural Health Network Planning Grant, potentially in partnership with Gilchrist County, to plan for a system of substance abuse and mental health services for uninsured and indigent clients.	<ul style="list-style-type: none"> • By July 30, 2014, apply for the Department of Health and Human Services Health Resources and Services Administration Rural Health Network Development Grant. • Gather all relevant data to determine most pressing needs. • Develop intervention or services model that the grant will fund. • Successfully recruit all necessary partners in Gilchrist and potentially Gilchrist Counties. 	<ul style="list-style-type: none"> • Department of Health and Human Services Health Resources and Services Administration • FQHC Partner(s) • Gilchrist County CHD • Meridian BHC • Law enforcement • Judicial system • County government • Grantwriting team comprised of key partners

Table 1. Gilchrist County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2013 Update.

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Partners and Resources
	initiation of drug use to 37% for middle school students and 39% for high school students (Baseline: 39% middle school, 41% high school, 2012 Florida Youth Substance Abuse Survey).		<ul style="list-style-type: none"> Develop volunteer grantwriting team and allocate work activities accordingly. 	
<p><u>Strategy 3.B</u> Combine with Gilchrist County to work with the University of Florida Department of Psychiatry to re-introduce the free-of-charge Psychologist Services Program that was previously provided to Gilchrist County for 15 years (ending in September 2012).</p>		<ul style="list-style-type: none"> By July 1, 2014, investigate the feasibility of a community partnership (including the possibility of partners in Gilchrist County) to help the University of Florida defray some of the costs of this free (to clients) program to encourage the University of Florida to relocate the program back in the community. Develop concept to pitch to University of Florida. Meet with key University of Florida contacts. Secure new commitments. Determine parameters of commitments. Re-launch services. 	<ul style="list-style-type: none"> University of Florida Gilchrist County Health Department Local government Sheriff's office Faith-based organizations Florida State University psychology program 	
<p><u>Strategy 3.C</u> Create an annual or semi-annual unused prescription drugs round-up patterned after the successful toxic roundup efforts.</p>		<ul style="list-style-type: none"> By December 31, 2013, implement an ongoing annual or semi-annual unused prescription drugs roundup. Investigate other potential environmental round-ups on which to potentially piggy-back. Investigate local, state and federal requirements regarding collection and disposal of these unused drugs. Secure support of key law enforcement and environmental protection staff to help collect. 	<ul style="list-style-type: none"> FDLE DEA Local pharmacies DEP Gilchrist County Sheriff's Office Drug Free Coalitions Willing residents Local businesses 	

Table 1. Gilchrist County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2013 Update.

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Partners and Resources
			<ul style="list-style-type: none"> Identify best time of year for such a collection. Recruit pharmacies and local businesses to provide incentives to encourage community participation. Conduct round-up at least annually. 	

Alignment with State and National Priorities

The 2013 Gilchrist County Community Health Improvement Plan Update has been reviewed for alignment with the following state and national guidelines:

- Florida State Health Improvement Plan 2012-2015 (April 2012) from the Florida Department of Health
- Healthy People 2020 from the United States Department of Health and Human Services
- National Prevention Strategy – America’s Plan for Better Health and Wellness (June 2011) from the National Prevention Council

Each objective under each goal was reviewed to determine where within each of these state or national guidelines the objective was in alignment. Table 2 summarizes where the 2013 Gilchrist County CHIP Update objectives align with the various state and national standards.

Table 2. Gilchrist County CHIP Alignment with Healthy People 2020 (HP2020), Florida State Health Improvement Plan (FSHIP) and National Prevention Strategy (NPS).

Objective	HP2020	FSHIP	NPS
<i>GOAL 1 - Increase the availability of physician services in Gilchrist County.</i>			
Objective 1.1 By December 31, 2015, increase the number of licensed physicians in Gilchrist County from a 2009-2011 rolling average of 25 to a 2013-2015 rolling average of 27 (Source: Florida CHARTS).	Topic Area: Access to Health Services Objective(s): AHS-4;AHS-5	Strategic Issue Area: Access to Care Goal AC2, Pg. 23	Strategic Direction: Clinical and Community Preventive Service, Pg. 18

Table 2. Gilchrist County CHIP Alignment with Healthy People 2020 (HP2020), Florida State Health Improvement Plan (FSHIP) and National Prevention Strategy (NPS).

Objective	HP2020	FSHIP	NPS
<p>Objective 1.2 By December 21, 2015, reduce the percentage of adult residents of Gilchrist County who could not see a doctor at least once during the past year due to cost to 16.0% (Baseline: 17.5%, 2010 Department of Health, Florida CHARTS).</p>	<p>Topic Area: Access to Health Services Objective(s): AHS-1;AHS-4;AHS-5</p>	<p>Strategic Issue Area: Access to Care Goal AC2, Pg. 23</p>	<p>Strategic Direction: Clinical and Community Preventive Service, Pg. 18</p>
<p><i>GOAL 2 - Reduce the negative societal and economic impacts of teen pregnancy, sexually communicable diseases and child abuse.</i></p>			
<p>Objective 2.1 By December 31, 2015, reduce the rate of births to teens age 15-17 to 16.0 per 1,000 female teens aged 15-17 (Baseline: 2010-12 three-year average of 17.2, Florida CHARTS).</p>	<p>Topic Area: Family Planning Objective(s): FP-8</p>	<p>Strategic Issue Area: Access to Care Goal AC5, Pg. 26</p>	<p>Priority: Reproductive and Sexual Health, Pg. 44</p>
<p>Objective 2.2 By December 31, 2015, reduce the rate of domestic violence offenses to 600.0 offenses per 100,000 population (Baseline: 660.6 per 100,000, 2009-2011 Florida CHARTS).</p>	<p>Topic Area: Injury and Violence Prevention Objectives: IVP-29; IVP-30; IVP-31; IVP-32; IVP-33; IVP-34; IVP-35; IVP-36; IVP-37; IVP-38; IVP-39; IVP-40; IVP-41; IVP-42; IVP-43</p>	<p>Strategic Issue Area: Community Redevelopment and Partnerships Goal CR2, Strategy CR2.1, Pg. 20 (limited alignment)</p>	<p>Priority: Injury and Violence Free Living, Pg. 41</p>
<p>Objective 2.3 By December 31, 2015, reduce the rate of total Gonorrhea, Chlamydia and infectious Syphilis cases to 300.0 per 100,000 population (Baseline: 2010-12 three-year average of 390.2 per 100,000, Florida CHARTS).</p>	<p>Topic Area: Family Planning Objective(s): FP-8 Sexually Transmitted Diseases Objective(s)(2): STD-1; STD-2; STD-3; STD-4; STD-5; STD-6; STD-7; STD-8</p>	<p>Strategic Issue Area: Health Protection Goal HP1, Pg. 25</p>	<p>Priority: Reproductive and Sexual Health, Pg. 44</p>

Table 2. Gilchrist County CHIP Alignment with Healthy People 2020 (HP2020), Florida State Health Improvement Plan (FSHIP) and National Prevention Strategy (NPS).

Objective	HP2020	FSHIP	NPS
<i>GOAL 3 - Reduce the negative societal impacts due to substance abuse in Gilchrist County.</i>			
Objective 3.1 By December 31, 2015, reduce the percentage of adults who engage in heavy or binge drinking to 18.0% (Baseline: 20.1%, 2010 BRFSS).	Topic Area: Substance Abuse Objective(s): SA-9; SA-10; SA-14; SA-15; SA-16	Strategic Issue Area: Access to Care Goal AC3; Strategies AC3.1 and AC3.2: Pg. 24	Strategic Direction(s): Preventing Drug and Alcohol Abuse, Pg. 31
Objective 3.2 By December 31, 2015, reduce the percentage of middle and high school students who report using alcohol in the past 30 days to 25.0% (Baseline: 30.0%, 2012 Florida Youth Substance Abuse Survey).	Topic Area: Substance Abuse Objective(s): SA-1; SA-2; SA-3; SA-4	Strategic Issue Area: Access to Care Goal AC3; Strategies AC3.1 and AC3.2: Pg. 24	Strategic Direction(s): Preventing Drug and Alcohol Abuse, Pg. 31
Objective 3.3 By December 31, 2016, reduce the risk factor prevalence rate for early initiation of drug use to 37% for middle school students and 39% for high school students (Baseline: 39% middle school, 41% high school, 2012 Florida Youth Substance Abuse Survey).	Topic Area: Substance Abuse Objective(s): SA-1; SA-2; SA-3; SA-4	Strategic Issue Area: Access to Care Goal AC3; Strategies AC3.1 and AC3.2: Pg. 24	Strategic Direction(s): Preventing Drug and Alcohol Abuse, Pg. 31

Potential Policy Implications

Community health improvement activities and initiatives require both a mix of policy and non-policy changes to accomplish objectives. The Public Health Accreditation Board standards encourage communities to closely review their CHIP objectives and to determine possible policy changes that may need to be made in order to facilitate reaching the desired measurable objective. Table 3 catalogs for each objective in the 2013 Gilchrist County Community Health Improvement Plan Update the policy changes that may be required or should be considered in order achieve the objective.

Table 3. Potential policy changes required to achieve objectives of Gilchrist County CHIP.

Objective	Potential Policy Changes
GOAL 1 - Increase the availability of physician services in Gilchrist County.	
<p>Objective 1.1 By December 31, 2015, increase the number of licensed physicians in Gilchrist County from a 2009-2011 rolling average of 25 to a 2013-2015 rolling average of 27 (Source: Florida CHARTS).</p>	<ul style="list-style-type: none"> • Individual healthcare facilities, clinics and practices will need to change policies to work together to promote community-wide message that Gilchrist County is a destination for healthcare providers. • Individual healthcare facilities, clinics and practices may need to change policies to offer more incentives for providers to locate in Gilchrist County. • Local government, the Chamber of Commerce and economic development entities may need to reconsider polices or focus of economic development polices (or rather the lack of focus of economic development policies supporting the healthcare sector).
<p>Objective 1.2 By December 21, 2015, reduce the percentage of adult residents of Gilchrist County who could not see a doctor at least once during the past year due to cost to 16.0% (Baseline: 17.5%, 2010 Department of Health, Florida CHARTS).</p>	<ul style="list-style-type: none"> • Individual healthcare facilities, clinics and practices may need to change their policies of acceptance of indigent and charity care cases. • More national state and national policy changes may need to occur so that Florida is an active participant in health reform and expansion of care to the underserved.
GOAL 2 - Reduce the negative societal and economic impacts of teen pregnancy, sexually communicable diseases and child abuse.	
<p>Objective 2.1 By December 31, 2015, reduce the rate of births to teens age 15-17 to 16.0 per 1,000 female teens aged 15-17 (Baseline: 2010-12 three-year average of 17.2, Florida CHARTS).</p>	<ul style="list-style-type: none"> • School system policies may need to change for enhanced sexual health education. • Education to change community perspectives on sexual health and family planning may be needed to challenge informal policies and procedures regarding community discussion of these issues.
<p>Objective 2.2 By December 31, 2015, reduce the rate of domestic violence offenses to 600.0 offenses per 100,000 population (Baseline: 660.6 per 100,000, 2009-2011 Florida CHARTS).</p>	<ul style="list-style-type: none"> • Policy changes may be required for health insurance to cover more treatment and counseling of offenders. • Education to change community perspectives on family and community violence may be needed to challenge informal policies and procedures regarding community discussion of these issues. • State sentencing guidelines and policies for domestic violence offenders may need to be reviewed for effectiveness.
<p>Objective 2.3 By December 31, 2015, reduce the rate of total Gonorrhea, Chlamydia</p>	<ul style="list-style-type: none"> • School system policies may need to change for enhanced sexual health education. • Education to change community perspectives on sexual health and family planning may be needed to challenge informal policies and procedures regarding

Table 3. Potential policy changes required to achieve objectives of Gilchrist County CHIP.

Objective	Potential Policy Changes
and infectious Syphilis cases to 300.0 per 100,000 population (Baseline: 2010-12 three-year average of 390.2 per 100,000, Florida CHARTS).	community discussion of these issues.
GOAL 3 - Reduce the negative societal impacts due to substance abuse in Gilchrist County.	
Objective 3.1 By December 31, 2015, reduce the percentage of adults who engage in heavy or binge drinking to 18.0% (Baseline: 20.1%, 2010 BRFSS).	<ul style="list-style-type: none"> • Potential policy changes at national level and state level regarding drinking age. • Increased enforcement of existing sales of alcohol to minors laws. • National, state and local laws and ordinances on marketing that targets youth.
Objective 3.2 By December 31, 2015, reduce the percentage of middle and high school students who report using alcohol in the past 30 days to 25.0% (Baseline: 30.0%, 2012 Florida Youth Substance Abuse Survey).	<ul style="list-style-type: none"> • Potential policy changes at national level and state level regarding drinking age. • Increased enforcement of existing sales of alcohol to minors laws. • National, state and local laws and ordinances on marketing that targets youth. • Policies to encourage testing in school settings.
Objective 3.3 By December 31, 2016, reduce the risk factor prevalence rate for early initiation of drug use to 37% for middle school students and 39% for high school students (Baseline: 39% middle school, 41% high school, 2012 Florida Youth Substance Abuse Survey).	<ul style="list-style-type: none"> • Potential policy changes at national level and state level regarding drinking age. • Increased enforcement of existing sales of alcohol to minors laws. • National, state and local laws and ordinances on marketing that targets youth. • Policies to encourage testing in school settings.