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2016 -2018

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Community Health  
Improvement Plan Update

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Hamilton County

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November 2016



## Table of Contents

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<b>Setting the Priority Issues – Background (2011-12)</b> .....	<b>2</b>
<i>Brainstorming and Identification of the Original Issues</i> .....	4
<i>Proposed 2012-2015 Community Health Improvement Plan - Key Activities</i> .....	6
<i>2012 Community Health Improvement Planning Activities</i> .....	7
<i>Original Next Steps</i> .....	9
<b>2013 Hamilton County Community Health Improvement Plan Update</b> .....	<b>8</b>
<i>2013 Update Overview</i> .....	8
<b>2014 Hamilton County Community Health Improvement Plan Update</b> .....	<b>9</b>
<i>Update Overview</i> .....	9
<b>2015 Hamilton County Community Health Improvement Plan Update</b> .....	<b>10</b>
<i>Update Overview</i> .....	10
<i>Updated Goals, Strategies and Objectives</i> .....	10
<i>Alignment with State and National Priorities</i> .....	15
<i>Potential Policy Implications</i> .....	18
<b>2016-18 Hamilton County Health Improvement Plan</b> .....	<b>21</b>
<i>Revision Overview</i> .....	21
<i>Revised Goals, Strategies and Objectives for 2016-18</i> .....	24
<i>Alignment with State and National Priorities</i> .....	29
<i>Potential Policy Implications</i> .....	32
<i>Next Steps</i> .....	34

### **Tables**

<i>Table 1 – Priority Rankings for 10 Essential Services, 2012</i> .....	3
<i>Table 2 – Key Community Health Improvement Activities and Time Horizons, 2012</i> .....	7
<i>Table 3 - Hamilton CHIP, 2015 Update</i> .....	11
<i>Table 4 – Hamilton CHIP Alignment, 2015 Update</i> .....	15
<i>Table 5 – Hamilton CHIP Potential Policy Changes, 2015 Update</i> .....	18
<i>Table 6 - Hamilton CHIP, 2016-18 Update</i> .....	25
<i>Table 7 – Hamilton CHIP Alignment, 2016-18 Update</i> .....	29
<i>Table 8 – Hamilton CHIP Potential Policy Changes, 2016-18 Update</i> .....	31

## Setting the Priority Issues – Background (2011-12)

On November 17, 2011, Jeff Feller of WellFlorida Council presented the recently completed results of the Hamilton County Local Public Health System Assessment (LPHSA) and the highlights of the Hamilton County Community Health Status Assessment (CHSA) to members of the Hamilton County Healthcare Strategic Planning Committee. This presentation was designed to provide the impetus to the first phase of development of a strategic healthcare plan or community health improvement plan which will ultimately become the focus of the Hamilton County Healthcare Strategic Planning Committee for the next 2-3 years.

Mr. Feller's presentation followed the following outline:

- I. Overview of Key Issues from CHSA
- II. Presentation of the Results of the LPHSA
- III. Summary of Results of Member Prioritization of 10 Essential Services and 30 Standards from the LPHSA
- IV. Selection of Potential Focus Areas for Strategic or Community Health Improvement Plan

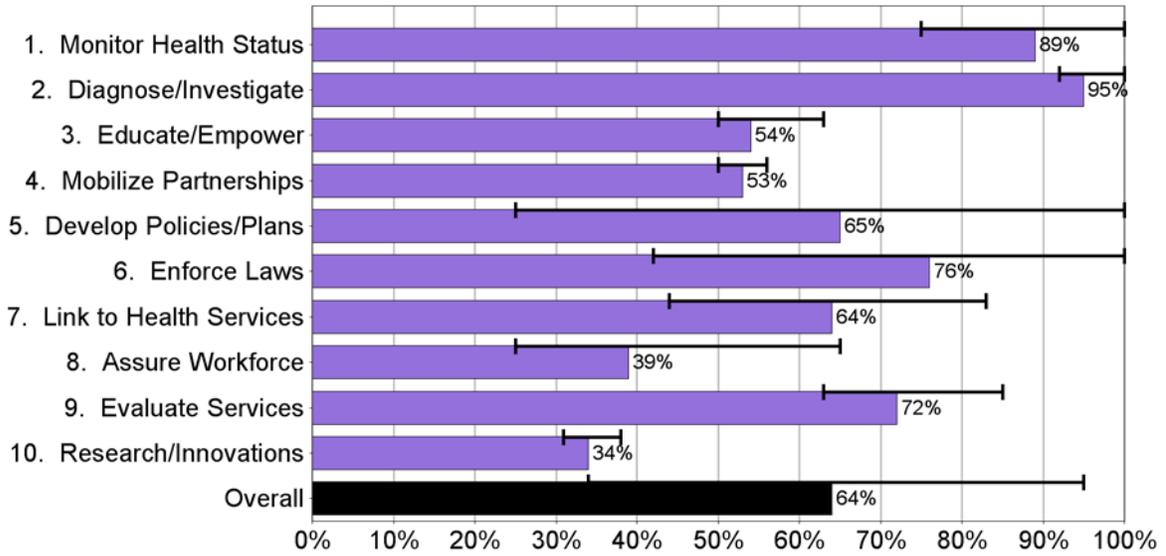
In his overview of the CHSA, Mr. Feller reviewed a variety of key observations in Hamilton County's socioeconomic and demographic data; morbidity and mortality data; and healthcare access and utilization data. He also provided summary results of the LPHSA for Hamilton County.

Figure 1 shows the rank order performance scores for each of the 10 Essential Services of the Hamilton County Public Health System. The scores can range from 0-100 with a lower score indicating poorer performance of that service compared to the national standards established for that service by the Centers for Disease Control (CDC) and the National Association of County and City Health Officials (NACCHO).

Members of the Committee also completed a prioritization survey prior to the November 17 meeting. This survey utilized 30 questions to establish a priority level (on a scale of 1-10 with 1 being lowest priority and 10 being highest) for each of the 10 Essential Services within Hamilton County. As seen in Table 1, the top three highest priority Essential Services, based on the survey responses of the Committee were (average priority score in parentheses):

1. Inform, educate and empower people about health issues (8.17).
2. Mobilize community partnerships and solve health problems (8.08).
3. Diagnose and investigate health problems and health hazards (8.05).

**Figure 1:** Rank ordered performance scores for each Essential Service.



**Table 1:** Priority rankings for each Essential Service.

Essential Service	Average Priority Score
3. Inform, educate and empower people about health issues	8.17
4. Mobilize community partnerships to identify and solve health problems	8.08
2. Diagnose and investigate health problems and health hazards	8.05
7. Link people to needed personal health services and assure the provision of health care when otherwise available	7.71
9. Evaluate effectiveness, accessibility, and quality of population-based and personal health services	7.61
10. Research for new insights and innovative solutions to health problems	7.61
5. Develop policies and plans that support individual and community health efforts	7.35
8. Assure a competent public health and personal health care workforce	7.00
1. Monitor health status to identify health problems	6.82
6. Enforce laws and regulations that protect health and ensure safety	6.49

Mr. Feller then informed members that based on CDC/NACCHO suggestions for strategic and community health improvement planning, where areas of low performance intersect areas of high priority of the community, strategic or community health improvement planning initiatives are warranted. After a brief discussion, members identified two key areas, based on a combination of low performance scores and high priority. These two areas were:

- Inform, educate and empower people about health issues.
- Mobilize community partnerships to identify and solve health issues.

## Brainstorming and Identification of the Original Issues

Mr. Feller led Committee members through a brainstorming session on these two key areas; the two key issues impacting community health improvement in Hamilton County. Members identified critical facets of each of the two key issue areas; facets that could comprise elements of strategic goals and objectives and actions for a strategic health vision or community health improvement plan for Hamilton County.

The following represents an unfiltered bullet by bullet presentation of ideas generated by Committee members for each of the two priority areas.

### Inform, Educate and Empower about Health Issues

- Language/cultural barriers
- Transportation/location of services
- Population begins or needs to begin to understand the need for education on healthcare and the ramifications of poor health decisions or practices
- Employment as a barrier to participation in healthcare (you may not have the luxury of taking off for an appointment when needed if you want to preserve your employment)
- Focus on the highest need areas and issues
- Stress and strain of current environment of uncertainty on health-related decisions
- Must take the education and information to them and not expect that they will come and get it
- Apathy until affected by health issue (due to lack of understanding of mounting impact of doing nothing)
- How to work within the financial constraints of this community and its residents knowing that this aspect will not change anytime soon
- Efforts must truly be a community effort
- Focus on community to recognize need for change
- Incentivization
- Train the young (and perhaps incentivize the older)
- Healthcare Academies in the school system
- How are other communities approaching things successfully like community weight loss?
- Partnerships
- School system
- Focus on youth and connecting with young adults and their families
- Dental bus – how did or does it work?
- Children reflect adult behaviors so we have to work on children and parents
- Reduced obesity
- Reduced avoidable hospitalization and emergency room visits
- Appropriate utilization of resources
- Take advantage of self-interest through incentivization
- Educate policymakers and local officials
- Utilize school programs and resources
- Take more advantage of our natural surroundings

- Include post-secondary institutions
- What is community's perspective of need? Does it need to be influenced or changed?
- Try to turn the sentiment among young adults that those that can leave the community will do so

#### Mobilize Community Partnerships

- Utilize the Healthcare Strategic Planning Committee
- Healthcare Strategic Planning Committee needs clear and focused goals and objectives
- Stabilize private healthcare
- Walk-in clinic or free-standing emergency room
- Solutions need to be more than just government-based though government can be a partner
- Everyone and every agency/entity has a role
- More involvement of key constituents and target populations
- Need lists of who the partners currently are and who they could be

Members then identified some very preliminary potential goal areas as follows:

1. Enhance Hamilton County Healthcare Strategic Planning Committee.
2. Develop specific goals, objectives and action plan for the Hamilton County Healthcare Strategic Planning Committee.
3. Unify and integrate other partners into the Healthcare Strategic Planning Committee.
4. Mobilize partners as needed on specific goals and tasks.
5. Promote cities and local government buy-in to strategic and community health improvement planning.

Members agreed by consensus to re-convene on December 13, 2011 at the Hamilton County Health Department to formulate a strategic plan with measurable goals and objectives for the Hamilton County Healthcare Strategic Planning Committee.

During the December 13, 2011 meeting of the Hamilton County Healthcare Strategic Planning Committee, Hugh Giebeig began the priority setting session by reviewing some of the archival records to the Committee. He reminded members of the charter mission of the Committee:

*Enhancing the quality of life in Hamilton County through increased healthcare options and accessibility.*

Mr. Giebeig also reviewed many of the past meeting minutes and work plans dating back to the inceptions of the Committee in 2002. Upon hearing Mr. Giebeig's review, members noted that a common theme ran throughout the many meeting minutes and work plans. That is, the Committee has frequently articulated that it wishes to "initiate community activities to support healthy lifestyles".

Reminded of its mission and with the realization of this common theme of healthy lifestyles that has been a major focus of the Committee since its inception, members were asked to participate in a discussion, facilitated by Jeff Feller of the WellFlorida Council, to identify and specify the focus of group activities in the short term. This discussion was to tease out activities related to key health issues for

Hamilton County. Note that most of this work was started prior to the guidance by DOH as to the utilization of standardized CHIP methods and approaches espoused by NACCHO and PHAB and some of the identification of key goals and issues comes through the discussion of key health improvement activities that the community identified and on which they desired to focus.

## **Proposed 2012-2015 Community Health Improvement Plan - Key Activities**

Members identified the following key activities on which they should focus in the coming months and over the next 1-2 years (in the order in which they were mentioned at the meeting):

1. Report (regularly) to County Commission on things such as:
  - a. Pharmaceutical assistance program
  - b. Emerging and ongoing health issues
  - c. Key access and outcome health data for the community
  - d. Community priorities as identified by the Committee
2. Monitor Healthy Kids enrollment and coordinate community-wide efforts to make sure enrollment levels are meeting or exceeding targets (WellFlorida will assist in data monitoring).
3. Identify existing no-cost/low-cost opportunities for physical education in Hamilton County and educate and inform community about these opportunities.
4. Direct other to or piggyback onto emerging wellness services and programming in the school system.
5. Focus on obesity issues.
6. Identify, educate and inform the community about the true personal and social costs of health behaviors and their relation to health outcomes and other issues.
7. Identify magnitude of health resources and access gaps in the community.
8. Educate population on utilizing existing or newly emerging healthcare resources efficiently and effectively (including Emergency Medical Services).
9. Focus on messages of prevention.
10. Tap into traditional and non-traditional media for messaging whenever possible.

Members discussed that they should, as soon as possible, begin reporting to the County Commission as their first activity. Also, they agreed they should try to determine the Healthy Kids enrollment levels for the community and determine what, if anything, the Committee could or should do to increase or enhance enrollment. Committee members felt that these items could be initiated rather quickly.

Jeff Feller also suggested that the members mobilize on one or more of the other eight remaining issues in an IMPACT grant application to the Blue Cross and Blue Shield of Florida (BCBSF) Foundation of Florida. Members determined that during the January 19, 2012 meeting of the Committee that they would finalize plans for the County Commission presentation and the Healthy Kids monitoring and that Jeff Feller and Hugh Giebeig would make a brief presentation to the Committee members regarding the BCBSF's grant program and that they would begin to discuss a potential response to this call for grants.

## 2012 Community Health Improvement Planning Activities

During 2012, the Hamilton County Healthcare Strategic Planning Committee, in addition to focusing on implementation of priority community health improvement planning activities detailed above, worked on completing a Community Themes and Strengths Assessment (CTSA) and a Forces of Change Assessment (FCA) to round out recent community health status assessment and community health improvement plan development initiatives.

The Community Themes and Strengths Assessment provides a deep understanding of the issues that residents feel are important by answering the questions: "What is important to our community?" "How is quality of life perceived in our community?" and "What assets do we have that can be used to improve community health?"

The Forces of Change Assessment focuses on identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate. This answers the questions: "What is occurring or might occur that affects the health of our community or the local public health system?" and "What specific threats or opportunities are generated by these occurrences?"

WellFlorida Council worked with the Hamilton County Strategic Healthcare Planning Committee to complete these two assessments. The assessments were conducted through online surveying of members and key informants as well as a utilizing a focus group process that incorporated Hamilton County Healthcare Strategic Planning Committee meetings as focus groups.

The results of these two assessments are summarized in separate reports. During December 2012, Committee members utilized the results of the CTSA and FCA to assist them to re-visit the key activities/priorities identified during the course of the planning process. Using the insights of the needs identified in the MAPP assessment process and the realities of the community themes and strengths and forces of change in Hamilton County, Committee members classified the key activities into short (initiated in less than 1 year); medium (initiated in more than 1 but less than two years); and long-term (initiated in two years or more) goal areas. Members also determined that the short-term goal areas were the highest priority areas as short term success would lend credibility and motivation to initiatives that will take longer to implement and to subsequently demonstrate improvement in the health of Hamilton County residents. Table 2 shows each of the key activity/goal areas and the identified time horizon for implementation for each.

**Table 2. Key community health improvement activities/goal areas and designated time horizon for implementation.**

Key Activity/Goal Area	Time Horizon
Report (regularly) to County Commission on things such as: <ul style="list-style-type: none"> <li>• Pharmaceutical assistance program</li> <li>• Emerging and ongoing health issues</li> <li>• Key access and outcome health data for the community</li> <li>• Community priorities as identified by the Committee</li> </ul>	ST

Direct other to or piggyback onto emerging wellness services and programming in the school system.	ST
Monitor Healthy Kids enrollment and coordinate community-wide efforts to make sure enrollment levels are meeting or exceeding targets (WellFlorida will assist in data monitoring).	ST-MT
Educate population on utilizing existing or newly emerging healthcare resources efficiently and effectively (including Emergency Medical Services).	ST-MT
Identify existing no-cost/low-cost opportunities for physical education in Hamilton County and educate and inform community about these opportunities.	MT
Identify, educate and inform the community about the true personal and social costs of health behaviors and their relation to health outcomes and other issues.	MT-LT
Identify magnitude of health resources and access gaps in the community.	LT-Ongoing

ST = Less than 1 Year; MT = Greater than 1 Year and Less than 2 Years; LT = 2 or More Years

While Table 2 details specific goal areas of potential interventions, Committee members also identified the following overarching themes that should be considered for all goal areas:

- Focus on obesity issues.
- Focus on messages of prevention.
- Tap into traditional and non-traditional media for messaging whenever possible.

## 2013 Hamilton County Community Health Improvement Planning Update

### Update Overview

The focus of the 2013 update of the Hamilton 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.

# 2014 Hamilton County Community Health Improvement Planning Update

## Update Overview

The 2011 version of Hamilton County's CHA was fully patterned after the Mobilizing for Action through Planning and Partnerships (MAPP). In 2014, the Hamilton County Strategic Healthcare Planning Committee, in a series of three meetings, began the process of focusing on three critical areas to prepare for the 2016-2018 revision of the Community Health Improvement Plan.

- Community Health Data Analysis
- Community Input on Issues Related to CHA and CHIP
- Community Health Assessment Implications for 2015 Update

During the August 12, 2014 meeting the committee of the Jeff Feller, of Well Florida Council, presented the group with a CHIP progress update and reviewed data from previous meetings regarding existing goals and their relevance to the 2015 update and 2016-2018 plan revision. The discussions indicated:

**Goal 1:** Report Regularly to County Commission and the public on key health issues.

- We have the community calendar on the health department website
- We have been putting information together for the local newspaper
- Rural health clinic has made radio appearances
- Ems working on ways to provide information to clients during service provision
- We still need to work on a resource card due to limited e-mail access

**Consensus:** Yes, participants feel goal 1 is still important. An objective should be to add the development of a community resource card with a specific time frame.

**Goal 2:** Enhance emerging wellness activities in the school system by linking other public and private sector partners to their efforts.

- The Fuel up and Play 60 program grant initiates community involvement with national partners and the school system
- School system is working to make healthier food options in schools. Guidelines exist to prohibit unhealthy treats being brought in from parents (cupcakes, cookies, etc..)
- School health fair being organized
- Exploring possibility of locally grown food being introduced to schools
- Nature Play Prescription Pads being distributed through school health

**Consensus:** Yes, Participants feel that goal 2 is still very relevant and needs to be kept in place. The health fair date should be established.

**Goal 3:** Educate the public on low-cost/no-cost opportunities for physical activity in Hamilton County and promote their use.

- We need to look into any grants available to update the parks we have in town
- Need to inform the public about the NFL Play 60 program grant

- United Way of Suwannee Valley has good resources, we need to share information

**Consensus:** Participants feel that goal 3 is important and should be kept as is.

**Goal 4:** Increase the appropriate use of healthcare.

- This goal is related to goal one as it is originally written. Possibly combine together
- We now have a breastfeeding sign in front of health department, which has helped increase awareness among the community. Surveys on signs were completed and showed signs were well received

**Consensus:** Participants felt goal 4 is important, but possible combine it with goal 1 for 2016-2018 CHIP.

## 2015 Hamilton County Community Health Improvement Planning Update

### Update Overview

On August 19, 2015 the Hamilton County Strategic Healthcare Planning committee met to review the current progress of the Hamilton County 2013-2015 Community Health Improvement Plan. The progress has been documented in the 2015 Community Health Improvement Plan Annual Report. During this session it was recommended that objective 4.1 be revised for the current 2013-2015 reporting period:

**Current Objective:** By December 31, 2015, decrease the preventable hospital discharge rate to 1600 preventable discharges per 100,000 population under age 65 (AHCA 2009-2011 data)

**Revised Objective:** By December 31, 2015, decrease the preventable hospital Medicaid discharge rate by 10% from 2010. (Baseline data from Robert Wood Johnson Foundation is 108/1,000)

**Reason for Revision:** The Robert Wood Johnson Foundation data is provided annually to county health departments. This data will more accurately reflect Florida's healthcare availability under the current Medicaid HMO plan.

### Goals, Strategies and Objectives

Table 3 represents the updates to the goals, objectives and strategies from the 2015 CHIP annual review process as well as the addition of performance measures and potential key leads and partners. The Hamilton County Strategic Health Care Planning Committee (HCSHCPC) has been the leader in community health improvement planning and implementation of the CHIP. This volunteer group has worked together for 10 years dedicating numerous meetings during 2014 and 2015 to working on updating the plan to meet Public Health Accreditation Board standards, and community needs.

**Table 3. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2015 Update.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
<p><b>GOAL 1 – Report regularly to County Commission and the public on key health issues and activities including:</b></p> <ul style="list-style-type: none"> <li>• <b>Pharmaceutical assistance program</b></li> <li>• <b>Emerging and ongoing health issues</b></li> <li>• <b>Availability of health services</b></li> <li>• <b>Key access and outcome health data for the community</b></li> <li>• <b>Community priorities as identified by the Hamilton County Strategic Health Care Committee</b></li> </ul>	<p><u>Objective 1.1</u> By December 31, 2014, the community will complete a comprehensive update of the community health assessment (CHA) and will update this assessment every three years.</p>	<p><u>Strategy 1.A</u> Create new and improved ways of informing key constituencies about what health services exist in the community and when and how to use them.</p>	<ul style="list-style-type: none"> <li>• Number of campaigns to target specific groups.</li> <li>• Number of exposures through social media.</li> <li>• Number of information events held.</li> <li>• Number of articles written by health care providers to write articles for newspaper (electronic media, blogs, etc).</li> <li>• Create provider/service directory of services; include Spanish version.</li> <li>• Number exposed to messages through mass media.</li> <li>• A communication network among businesses and agencies to inform residents of health services and activities in the county.</li> <li>• Number of avoidable hospitalizations.</li> </ul>	<ul style="list-style-type: none"> <li>• Hamilton County Healthcare Strategic Planning Committee</li> <li>• Hamilton County Health Department</li> </ul>
	<p><u>Objective 1.2</u> By July 1, 2014, develop an ongoing mechanism for reporting community personal costs of current community health outcomes.</p>	<p><u>Strategy 1.B</u> Develop and distribute materials and information that, in plain language, inform the general public on the true personal and community costs and benefits of health decision they regularly make.</p>	<ul style="list-style-type: none"> <li>• Brochures or educational pieces developed.</li> <li>• Number of presentations made.</li> <li>• Number of persons receiving information through mass media and other sources.</li> <li>• Number of website hits to partner websites where information can be linked.</li> <li>• Increased numbers of persons who understand these costs.</li> </ul>	<ul style="list-style-type: none"> <li>• Hamilton County Healthcare Strategic Planning Committee</li> <li>• Hamilton County Health Department</li> </ul>

**Table 3. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2015 Update.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners	
<b>GOAL 2 – Enhance emerging wellness activities in the school system by linking other public and private sector partners to their efforts.</b>	<u>Objective 2.1</u> By December 31, 2015, reduce the percentage of overweight or obese adults to 70.0% (Baseline: 73.5%, 2010 BRFSS)	<u>Strategy 2.A</u> Identify existing additional wellness programs outside of the school system and work to link them to school system efforts.	<ul style="list-style-type: none"> <li>• Compiled list of identified wellness resources in community.</li> <li>• Commitment from community wellness resources to be part of integrated approach.</li> <li>• Formal agreements in place.</li> </ul>	<ul style="list-style-type: none"> <li>• School system</li> <li>• Community wellness providers</li> <li>• Hamilton County Health Department</li> <li>• Faith-based groups</li> <li>• Parks and recreation</li> <li>• Local government</li> <li>• Businesses</li> </ul>	
	<u>Objective 2.2</u> By December 31, 2014, expand enrollment to enhanced wellness activities based in the school system to 1,000 residents.	<u>Objective 2.3</u> By December 31, 2015, increase the percentage of adults who eat at least five servings of fruits and vegetables per day to at least 25% (Baseline: 23.2%, 21010 BRFSS).	<u>Strategy 2.B</u> Form a partnership to market and promote, in an integrated manner, wellness program availability in Hamilton County.	<ul style="list-style-type: none"> <li>• Messages developed.</li> <li>• Marketing and awareness campaign developed.</li> <li>• Number of residents exposed to message.</li> <li>• Number of media partners.</li> <li>• Number of website hits from partners who link informational materials to their websites.</li> <li>• Percentage of persons reporting that they are aware of wellness opportunities in community.</li> <li>• Percentage of persons who became informed about wellness opportunities in the community through integrated awareness campaign.</li> </ul>	<ul style="list-style-type: none"> <li>• School system</li> <li>• Community wellness providers</li> <li>• Hamilton County Health Department</li> <li>• Faith-based groups</li> <li>• Parks and recreation</li> <li>• Local government</li> <li>• Businesses</li> <li>• Media</li> </ul>
	<u>Objective 2.4</u> By December 31, 2015, the percentage of Hamilton County high school students whose BMI classify them as overweight or obese will be below the Florida percentage (Baseline: must obtain for Hamilton County but state baseline		<u>Strategy 2.C</u> Increase enrollment in regular and ongoing wellness activities, with a special emphasis on	<ul style="list-style-type: none"> <li>• Number of adult participants in wellness programs.</li> <li>• Number of youth participants in wellness</li> </ul>	<ul style="list-style-type: none"> <li>• School system</li> <li>• Community wellness providers</li> </ul>

**Table 3. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2015 Update.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
	is 25.1%, 2011 Florida YRBS).	school-aged children.	<p>programs.</p> <ul style="list-style-type: none"> <li>Number of participants in wellness programs who made a positive change in their health outcomes or health behavior.</li> </ul>	<ul style="list-style-type: none"> <li>Hamilton County Health Department</li> <li>Faith-based groups</li> <li>Parks and recreation</li> <li>Local government</li> <li>Businesses</li> </ul>
<b>GOAL 3 – Educate the public on existing no-cost/low-cost opportunities for physical activity in Hamilton County and promote their use.</b>	<p><u>Objective 3.1</u> By December 31, 2015, increase the percentage of adults who meet vigorous physical activity recommendations to 28% (Baseline: 26.8%, 2010 BRFSS).</p> <p><u>Objective 3.2</u> By July 31, 2014, create a web-based guide that highlights no-cost/low-cost opportunities for physical education in Hamilton County.</p> <p><u>Objective 3.3</u> By December 31, 2015, the percentage of Hamilton County high school students who report physically active for 60 or more minutes on 5 of the past 7 days will be above the</p>	<p><u>Strategy 3.A</u> Create web-based guide that highlights no-cost/low-cost opportunities for physical activity.</p>	<ul style="list-style-type: none"> <li>Compiled list of no-cost and low-cost physical education opportunities.</li> <li>Regular updates to list.</li> <li>Completed website that lists physical education resources.</li> <li>Number of hits on website.</li> <li>Number of persons that report that they utilized a physical education opportunity all or in part due to being exposed to the guide.</li> </ul>	<ul style="list-style-type: none"> <li>Hamilton County Healthcare Strategic Planning Committee</li> <li>Parks and recreation</li> <li>Local government</li> <li>Businesses</li> <li>Hamilton County Health Department</li> <li>Chamber of Commerce</li> </ul>
		<p><u>Strategy 3.B</u> Conduct a community-wide marketing campaign to inform the public on existing low-cost or no-cost physical activity opportunities.</p>	<ul style="list-style-type: none"> <li>Messages developed.</li> <li>Marketing and awareness campaign developed.</li> <li>Number of residents exposed to message.</li> <li>Number of media partners.</li> <li>Number of website hits from partners who link informational materials to their websites.</li> <li>Percentage of persons reporting that they are aware of no-cost or low-cost physical activity opportunities in</li> </ul>	<ul style="list-style-type: none"> <li>School system</li> <li>Community wellness providers</li> <li>Hamilton County Health Department</li> <li>Faith-based groups</li> <li>Parks and recreation</li> <li>Local government</li> <li>Businesses</li> <li>Media</li> </ul>

**Table 3. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2015 Update.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
	Florida percentage (Baseline: must obtain for Hamilton County but state baseline is 43.6%, 2011 Florida YRBS).		community. <ul style="list-style-type: none"> <li>Percentage of persons who became informed about wellness opportunities in the community through integrated awareness campaign.</li> </ul>	<ul style="list-style-type: none"> <li>Chamber of Commerce</li> </ul>
<b>GOAL 4 – Increase the appropriate use of healthcare.</b>	<u>Objective 4.1</u> By December 31, 2015, decrease the preventable hospital Medicaid discharge rate by 10% from 2010. (Baseline data from Robert Wood Johnson Foundation is 108/1,000)	<u>Strategy 4.A</u> Create new and improved ways of informing key constituencies about what health services exist in the community and when and how to use them.	<ul style="list-style-type: none"> <li>Number of campaigns to target specific groups.</li> <li>Number of exposures through social media.</li> <li>Number of information events held.</li> <li>Number of articles written by health care providers to write articles for newspaper (electronic media, blogs, etc).</li> <li>Create provider/service directory of services; include Spanish version.</li> <li>Number exposed to messages through mass media.</li> <li>A communication network among businesses and agencies to inform residents of health services and activities in the county.</li> <li>Number of avoidable hospitalizations.</li> </ul>	<ul style="list-style-type: none"> <li>Hamilton County Healthcare Strategic Planning Committee</li> <li>Emergency medical services</li> <li>Hamilton County Health Department</li> <li>Physicians</li> <li>Local government</li> </ul>
		<u>Strategy 4.B</u> Develop and distribute materials and information that, in plain language, inform the general public on the true personal and community costs and benefits of health decision they regularly make.	<ul style="list-style-type: none"> <li>Brochures or educational pieces developed.</li> <li>Number of presentations made.</li> <li>Number of persons receiving information through mass media and other sources.</li> <li>Number of website hits</li> </ul>	<ul style="list-style-type: none"> <li>Hamilton County Healthcare Strategic Planning Committee</li> <li>Emergency medical services</li> <li>Hamilton</li> </ul>

**Table 3. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2015 Update.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
			to partner websites where information can be linked. <ul style="list-style-type: none"> <li>Increased numbers of persons who understand these costs.</li> </ul>	County Health Department <ul style="list-style-type: none"> <li>Physicians</li> <li>Local government</li> </ul>

### Alignment with State and National Priorities

The 2013 Hamilton County Community Health Improvement Plan Update was 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 4 summarizes where the 2013 Hamilton County CHIP Update objectives align with the various state and national standards.

**Table 4. Hamilton County CHIP Alignment with Healthy People 2020 (HP2020), Florida State Health Improvement Plan (FSHIP) and National Prevention Strategy (NPS).**

Objective	HP2020	FSHIP	NPS
<b><i>GOAL 1 Report regularly to County Commission and the public on key health issues and activities including:</i></b> <ul style="list-style-type: none"> <li><b><i>Pharmaceutical assistance program</i></b></li> <li><b><i>Emerging and ongoing health issues</i></b></li> <li><b><i>Availability of health services</i></b></li> <li><b><i>Key access and outcome health data for the community</i></b></li> <li><b><i>Community priorities as identified by the Hamilton County Strategic Health Care Committee</i></b></li> </ul>			
Objective 1.1 By December 31, 2014, the community will complete a comprehensive update of the community health assessment (CHA) and will update this assessment every three years.	Topic Area: Public Health Infrastructure Objective(s): PHI-14; PHI-15	Strategic Issue Area: Community Redevelopment and Partnerships; Health Finance and Infrastructure Goals CR1, Pg. 19; HI4, Pg. 33	Strategic Direction(s): Empowered People, Pg. 22; Elimination of Health Disparities, Pg. 25

**Table 4. Hamilton County CHIP Alignment with Healthy People 2020 (HP2020), Florida State Health Improvement Plan (FSHIP) and National Prevention Strategy (NPS).**

Objective	HP2020	FSHIP	NPS
Objective 1.2 By July 1, 2014, develop an ongoing mechanism for reporting community personal costs of current community health outcomes.	Topic Area: Public Health Infrastructure Objective(s): PHI-14; PHI-15 Topic Area: Health Communication and Health Information Technology: Objective(s): HC/HIT-8; HC/HIT-9; HC/HIT-13	Strategic Issue Area: Community Redevelopment and Partnerships; Health Finance and Infrastructure Goals CR1, Pg. 19; HI4, Pg. 33	Strategic Direction(s): Empowered People, Pg. 22; Elimination of Health Disparities, Pg. 25
<b><i>Goal 2 Enhance emerging wellness activities in the school system by linking other public and private sector partners to their efforts.</i></b>			
Objective 2.1 By December 31, 2015, reduce the percentage of overweight or obese adults to 70.0% (Baseline: 73.5%, 2010 BRFSS)	Topic Area: Nutrition and Weight Status Objective(s): NWS-5; NWS-8; NWS-9; NWS-11 Sub-objective(s): NWS-11.5	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Priorities: Healthy Eating, Pg. 34; Active Living, Pg. 38
Objective 2.2 By December 31, 2014, expand enrollment to enhanced wellness activities based in the school system to 1,000 residents.	Topic Area: Nutrition and Weight Status Objective(s): NWS-8; NWS-9; NWS-10; NWS-11	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Priorities: Healthy Eating, Pg. 34; Active Living, Pg. 38
Objective 2.3 By December 31, 2015, increase the percentage of adults who eat at least five servings of fruits and vegetables per day to at least 25% (Baseline: 23.2%, 2010 BRFSS).	Topic Area: Nutrition and Weight Status Objective(s): NWS-14; NWS-15	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Priorities: Healthy Eating, Pg. 34; Active Living, Pg. 38
Objective 2.4 By December 31, 2015, the percentage of Hamilton County high school students whose BMI classify them as overweight or obese will be below the Florida percentage (Baseline: must obtain for Hamilton County but state baseline is 25.1%, 2011 Florida YRBS).	Topic Area: Nutrition and Weight Status Objective(s): NWS-5; NWS-8; NWS-9; NWS-10; NWS-11	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Priorities: Healthy Eating, Pg. 34; Active Living, Pg. 38

**Table 4. Hamilton County CHIP Alignment with Healthy People 2020 (HP2020), Florida State Health Improvement Plan (FSHIP) and National Prevention Strategy (NPS).**

Objective	HP2020	FSHIP	NPS
<b><i>GOAL 3 Educate the public on existing no-cost/low-cost opportunities for physical activity in Hamilton County and promote their use.</i></b>			
Objective 3.1 By December 31, 2015, increase the percentage of adults who meet vigorous physical activity recommendations to 28% (Baseline: 26.8%, 2010 BRFSS).	Topic Area: Physical Activity Objectives: PA-1; PA-2	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Active Living, Pg. 38
Objective 3.2 By July 31, 2014, create a web-based guide that highlights no-cost/low-cost opportunities for physical education in Hamilton County.	Topic Area: Physical Activity Objectives: PA-1; PA-2 Topic Area: Health Communication and Health Information Technology: Objective(s): HC/HIT-8; HC/HIT-9; HC/HIT-13	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Active Living, Pg. 38
Objective 3.3 By December 31, 2015, the percentage of Hamilton County high school students who report physically active for 60 or more minutes on 5 of the past 7 days will be above the Florida percentage (Baseline: must obtain for Hamilton County but state baseline is 43.6%, 2011 Florida YRBS).	Topic Area: Physical Activity: Objective(s): PA-3; PA-4; PA-5; PA-6; PA-7; PA-8; PA-9; PA-10	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14	Active Living, Pg. 38
<b><i>Goal 4 Increase the appropriate use of healthcare.</i></b>			
Objective 4.1 By December 31, 2016, decrease the preventable hospital discharge rate to 1,000 preventable discharges per 100,000 population under age 65 (Baseline: 1,217, AHCA, 2009-11).	Topic Area: Access to Health Services Objective(s): AHS-3; AHS-5; AHS-6	Strategic Issue Area: Access to Care Goal AC2, Pg. 23	Strategic Direction: Clinical and Community Preventive Service, Pg. 18

## 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 5 catalogs for each objective in the 2013 Hamilton County Community Health Improvement Plan Update the policy changes that may be required or should be considered in order to achieve the objective.

**Table 5. Potential policy changes required to achieve objectives of Hamilton County CHIP.**

Objective	Potential Policy Changes
<p><b>GOAL 1 Report regularly to County Commission and the public on key health issues and activities including:</b></p> <ul style="list-style-type: none"> <li>• <b>Pharmaceutical assistance program</b></li> <li>• <b>Emerging and ongoing health issues</b></li> <li>• <b>Availability of health services</b></li> <li>• <b>Key access and outcome health data for the community</b></li> <li>• <b>Community priorities as identified by the Hamilton County Strategic Health Care Committee</b></li> </ul>	
<p>Objective 1.1 By December 31, 2014, the community will complete a comprehensive update of the community health assessment (CHA) and will update this assessment every three years.</p>	<ul style="list-style-type: none"> <li>• DOH policy change to consider funding or supporting these local CHA and CHIP efforts may be required (resources are scarce in smaller communities).</li> <li>• Informal policies and working agreements required to work together.</li> </ul>
<p>Objective 1.2 By July 1, 2014, develop an ongoing mechanism for reporting community personal costs of current community health outcomes.</p>	<ul style="list-style-type: none"> <li>• Local government may need to change policies to include this mechanism into its discussions and deliberations on funding allocation to community health initiatives.</li> </ul>
<p><b>Goal 2 Enhance emerging wellness activities in the school system by linking other public and private sector partners to their efforts.</b></p>	
<p>Objective 2.1 By December 31, 2015, reduce the percentage of overweight or obese adults to 70.0% (Baseline: 73.5%, 2010 BRFSS)</p>	<ul style="list-style-type: none"> <li>• Encourage local businesses that contribute to obesity and overweight to change practices.</li> <li>• Local government policies may need to be enacted to encourage the above.</li> </ul>
<p>Objective 2.2 By December 31, 2014, expand enrollment to enhanced wellness activities based in the school system to 1,000</p>	<ul style="list-style-type: none"> <li>• School system may need to address policies regarding how much outside participation and influence non-school agencies and persons will have in its program.</li> <li>• Liability policy issues may need to be addressed.</li> </ul>

**Table 5. Potential policy changes required to achieve objectives of Hamilton County CHIP.**

Objective	Potential Policy Changes
residents.	
<p>Objective 2.3 By December 31, 2015, increase the percentage of adults who eat at least five servings of fruits and vegetables per day to at least 25% (Baseline: 23.2%, 2010 BRFSS).</p>	<ul style="list-style-type: none"> <li>• Encourage local businesses that contribute to better eating habits.</li> <li>• Local government policies may need to be enacted to encourage the above.</li> <li>• Health insurance policies may need to change their policies to incentivize healthy eating.</li> </ul>
<p>Objective 2.4 By December 31, 2015, the percentage of Hamilton County high school students whose BMI classify them as overweight or obese will be below the Florida percentage (Baseline: must obtain for Hamilton County but state baseline is 25.1%, 2011 Florida YRBS).</p>	<ul style="list-style-type: none"> <li>• Funding policies to have someone in the school system to be able to take BMI measurements.</li> <li>• School policies regarding parent consent may need to be addressed.</li> <li>• Policies may be needed to seek BMI calculation requirements at entrance of school year like required immunizations.</li> </ul>
<p><b><i>GOAL 3 Educate the public on existing no-cost/low-cost opportunities for physical activity in Hamilton County and promote their use.</i></b></p>	
<p>Objective 3.1 By December 31, 2015, increase the percentage of adults who meet vigorous physical activity recommendations to 28% (Baseline: 26.8%, 2010 BRFSS).</p>	<ul style="list-style-type: none"> <li>• Encourage local businesses that contribute to more physical activity.</li> <li>• Local government policies may need to be enacted to encourage the above.</li> <li>• Health insurance policies may need to change their policies to incentivize physical fitness.</li> </ul>
<p>Objective 3.2 By July 31, 2014, create a web-based guide that highlights no-cost/low-cost opportunities for physical education in Hamilton County.</p>	<ul style="list-style-type: none"> <li>• Informal policies and working agreements required for community to work together.</li> </ul>
<p>Objective 3.3 By December 31, 2015, the percentage of Hamilton County high school students who report physically active</p>	<ul style="list-style-type: none"> <li>• State and local school policies regarding physical activity time allotted for students may need to be changed.</li> <li>• Local government may need to change policies to support recreation and physical activity as an investment in community health.</li> </ul>

**Table 5. Potential policy changes required to achieve objectives of Hamilton County CHIP.**

Objective	Potential Policy Changes
for 60 or more minutes on 5 of the past 7 days will be above the Florida percentage (Baseline: must obtain for Hamilton County but state baseline is 43.6%, 2011 Florida YRBS).	
<b>Goal 4 Increase the appropriate use of healthcare.</b>	
Objective 4.1 By December 31, 2016, decrease the preventable hospital discharge rate to 1,000 preventable discharges per 100,000 population under age 65 (Baseline: 1,217, AHCA, 2009-11).	<ul style="list-style-type: none"> <li>• Additional health insurance reform, both public and private, policy changes may be needed, especially in Florida which has not taken up the health reform, to provide people affordable preventive care to avoid hospitalizations.</li> <li>• Individual provider policies may need to change to offer more incentive or disincentive for utilizing care more effectively.</li> </ul>

# 2016-18 Hamilton County Community Health Improvement Plan

## Revision Overview

While community health improvement planning activities are ongoing and a central part of the mission of the Hamilton County Community Strategic Healthcare Planning Committee (SHPC), the process to formally create a revision to the CHIP for 2016-2018 began once the Hamilton County Community Health Improvement Plan Annual Report was prepared in August 2015. This report detailed the progress in the CHIP goal areas and against the measurable objectives that had been established in the 2013-15 CHIP and through its many updates.

Subsequent to the preparation of the Annual Report, the SHPC met to consider how the CHIP might change for 2016-2018. After a careful review, SHPC members agreed to eliminate two of the current 2012-2015 CHIP goals as follows:

### **Goal 1 – Report regularly to the County Commission and the public on key health issues (eliminated)**

*Reason for Preservation:* This goal was more instrumental when the SHPC was starting up and is actually more of a tactical component to all major goals and impact objectives.

### **Goal 2 – Enhance emerging wellness activities in the school system by linking other private and public sector partners to their efforts (eliminated)**

*Reason for Elimination:* Again, this has been an important part of the SHPC collaborative activities; however, it remains more of a tactical aspect rather than an over-arching goal or impact objective.

### **Goal 3 – Educate the public on existing no-cost/low-cost opportunities for physical activity in Hamilton County and promote use of the opportunities (eliminated)**

*Reason for Elimination:* This goal was too narrowly defined and as an educational objective, it did not often directly address what the CHIP is designed to do: make measurable impacts in health outcomes and not just measurable impacts in the processes that MAY lead to impacts in health outcomes.

### **Goal 4 – Increase the appropriate use of healthcare (preserved)**

*Reason for Preservation:* The Robert Wood Johnson Foundation's County Health Rankings measures this as a major sub-component in its rankings criteria.

Throughout 2016, SHPC members along with Florida Department of Health in Hamilton County staff began to review various sources of community health data in order to identify new goals and objectives. The two main sources that SHPC members relied upon were the Robert Wood Johnson County Health Rankings and the Center for Disease Control's Community Health Status Indicators.

The County Health Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. The Robert Wood Johnson Foundation has partnered with the University of Wisconsin Population Health Institute to rank the health of counties within all 50 states every year since 2011. The model provides rankings in two major categories: health factors and health outcomes. Health factors are those things that can ultimately impact health outcomes, many of which are not related directly to health behavior and are based on social determinants of health. Health outcomes represent the collective impact of the

health factors and represent the measurable health statuses for a county. Health factors and health outcomes are each ranked separately for each county and are defined as follows in the County Health Rankings methodology:

- Health Outcomes
  - Length of Life (50% of rank)
  - Quality of Life (50% of rank)
- Health Factors
  - Health Behaviors (30% of rank)
    - Tobacco Use
    - Diet and Exercise
    - Alcohol and Drug Use
    - Sexual Activity
  - Clinical Care (20% of rank)
    - Access to Care
    - Quality of Care
  - Social and Economic Factors (40% of rank)
    - Education
    - Employment
    - Income
    - Family and Social Support
    - Community Safety
  - Physical Environment (10% of rank)
    - Air and Water Quality
    - Housing and Transit.

Within each of these areas there a variety of sub-indicators and data that drive the scoring and the ranking. In addition to the final ranking of the Health Factors and the Health Outcomes, the County Health Rankings System looks at the sub-indicators for “areas to explore” for improvement and “areas of strength” where positive impacts have been made.

Community Health Status Indicators (CHSI), created by the Centers for Disease Control and Prevention (CDC), is an online web application that produces health status profiles for each of the 3,143 counties in the United States and the District of Hamilton. Each profile contains indicators of health outcomes (mortality and morbidity); indicators of factors selected based on evidence that they potentially have an important influence on population health status (e.g. healthcare access and quality, health behaviors, social factors and the physical environment); health outcomes stratified by subpopulations (e.g. race and ethnicity; important demographic characteristics; and Healthy People 2020 targets. The CHSI portal compares the value of each indicator with those demographically similar “peer counties” to the U.S. as a whole and to the Healthy People 2020 targets to determine if you compare better or favorably to your peer counties (upper 25<sup>th</sup> quartile); moderately (middle 50<sup>th</sup> quartile) or worse (lower 25<sup>th</sup> quartile) for each indicator.

SHPC members and FDOH in Hamilton staff decided to focus on the “areas to explore” in the 2016 County Health Rankings and the indicators in the lowest quartile in the CDC CHSI 2015 report for Hamilton County.

The following sub-indicators were deemed “areas to explore” for improvement in Hamilton County by the County Health Rankings system:

- Health Outcomes
  - None
- Health Factors
  - Health Behaviors
    - Adult Smoking
    - Adult Obesity
    - Food Environment Index
    - Physical Inactivity
  - Clinical Care
    - Primary Care Physicians Supply
    - Dentists Supply
    - Mental Health Providers Supply
    - Preventable Hospital Stays
  - Social and Economic Factors
    - High School Graduation Rate
    - College Attendance Rate
    - Children in Poverty Rate
    - Income Inequality
    - Children in Single Parent Households
    - Violent Crime
  - Physical Environment
    - None

The following indicators were identified in the least favorable (worse) comparison quartile on the 2015 CDC CHSI for Hamilton County:

- Mortality
  - Cancer Deaths
  - Female Life Expectancy
  - Unintentional Injury (including motor vehicle)
- Morbidity
  - Adult Overall Health Status
  - Gonorrhea
  - HIV
- Health Care Access and Quality
  - Cost Barrier to Care
- Health Behaviors
  - Adult Physical Inactivity
- Social Factors
  - Children in Single Parent Homes
  - High Housing Costs
  - On-Time High School Graduation
  - Violent Crime
- Physical Environment
  - Access to Parks
  - Housing Stress

- Living near highways

After a careful review of these two major community health indicator resources as well as the 2016 Florida's Healthy Babies Environmental Scan, SHPC members prioritized the following goals and objective areas:

**Goal 1 – Increase the appropriate use of healthcare**

Objective area(s): Preventable hospitalizations of older adults

**Goal 2 – Improve mortality and morbidity rates**

Objective area(s): Premature death; lung cancer mortality and incidence; healthy weight; and injury death

**Goal 3 – Improve the health of mothers and babies**

Objective area(s): Infant mortality; first trimester care; teen births

## 2016-2018 Revised Goals, Strategies and Objectives

Table 6 represents the new goals, objectives and strategies for the 2016-18 CHIP including performance measures and potential key leads and partners. Table 7 provides how the goals and objectives align with the 2012-2015 Florida State Health Improvement Plan, Healthy People 2020 and the 2016-18 FDOH Agency Strategic Plan. Finally, Table 8 details some of the policy changes that may have to occur in order to implement elements of the CHIP. Taken together, Tables 6-8 represent the composite elements of the CHIP.

Table 6 represents the new goals, objectives and strategies for the 2016-18 CHIP including performance measures and potential key leads and partners. Table 7 provides how the goals and objectives align with the 2012-2015 Florida State Health Improvement Plan, Healthy People 2020 and the 2016-18 FDOH Agency Strategic Plan. Finally, Table 8 details some of the policy changes that may have to occur in order to implement elements of the CHIP. Taken together, Tables 6-8 represent the composite elements of the CHIP.

**Table 6. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2016-18.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
<b>GOAL 1 – Increase the appropriate use of healthcare.</b>	<u>Objective 1.1</u> By December 31, 2018, decrease the rate of preventable hospital stays for Medicare enrollees by 10% to 81.9 per 1,000 Medicare enrollees (Baseline: 2013 from the 2016	<u>Strategy 1.A</u> Create new and improved ways of informing key constituencies about what health services exist in the community and when and how to use them.  <u>Strategy 1. B</u> Work with provider	<ul style="list-style-type: none"> <li>• Number of campaigns to target specific groups.</li> <li>• Number of exposures through social media.</li> <li>• Number of information events held.</li> <li>• Number of articles written by health care providers to write articles for newspaper (electronic</li> </ul>	<ul style="list-style-type: none"> <li>• Hamilton County Health Department</li> <li>• Regional Hospitals</li> <li>• Media</li> <li>• Faith-based groups</li> <li>• Emergency Medical</li> </ul>

**Table 6. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2016-18.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
	County Health Rankings by Robert Wood Johnson).	<p>community and hospitals to identify ER diversion opportunities and programs and services to increase the appropriate use of ER.</p> <p><u>Strategy 1.C</u> Foster the development of chronic disease self-management opportunities and enhance education in this area.</p>	<p>media, blogs, etc).</p> <ul style="list-style-type: none"> <li>• Create provider/service directory of services; include Spanish version.</li> <li>• Number exposed to messages through mass media.</li> <li>• A communication network among businesses and agencies to inform residents of health services and activities in the county.</li> <li>• Health System “How To Navigate” Users Guide created for general public.</li> <li>• Number of preventable hospitalizations.</li> <li>• Number of preventable ER visits.</li> </ul>	<p>Services</p> <ul style="list-style-type: none"> <li>• Businesses</li> <li>• Schools</li> <li>• Private physicians</li> <li>• United Way of Suwannee Valley</li> <li>• Chamber of Commerce</li> <li>• Regional Hospitals</li> <li>• Regional Federally Qualified Health Centers</li> </ul>

**Table 6. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2016-18.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
<p><b>GOAL 2 - Improve mortality and morbidity rates.</b></p>	<p><u>Objective 2.1</u> By December 31, 2018, reduce by 10% the age-adjusted rate for years of potential life lost before age 75 (YPLL) from a baseline of 9,600 years per 100,000 population in 2011-2013 to 8,640 (Source: Robert Wood Johnson 2016 County Health Rankings).</p> <p><u>Objective 2.2</u> By December 31, 2018, reduce by 10% the lung cancer incidence rate from a baseline of 120.5 per 100,000 population in 2011-13 to 108.4 per 100,000 population (Source: Florida CHARTS).</p> <p><u>Objective 2.3</u> By December 31, 2018, increase the percentage of adults by 10% who are at a healthy weight from 2013 baseline of 25.1% to 27.6% (Source: Florida CHARTS BRFSS data).</p> <p><u>Objective 2.4</u> Reduce the age-adjusted death rates due to</p>	<p><u>Strategy 2.A</u> Foster the development of chronic disease self-management opportunities and enhance education in this area.</p> <p><u>Strategy 2.B</u> Encourage and promote tobacco use cessation, to include all tobacco products with an emphasis on smokeless tobacco use.</p> <p><u>Strategy 2.C</u> Work with WellFlorida Council on emerging regional lung cancer screening project.</p> <p><u>Strategy 2.D</u> Develop and promote programs and services that address nutrition and physical activity to reach healthy weight.</p> <p><u>Strategy 2.E</u> Work with Public Safety Council and Safe Kids Coalition on prevention and education campaigns.</p>	<ul style="list-style-type: none"> <li>• Number of patients enrolled in chronic disease self-management programs.</li> <li>• Number of patients receiving education on chronic disease self-management programs.</li> <li>• Number of persons completing tobacco cessation training.</li> <li>• Adult smoking rates.</li> <li>• Youth smoking rates.</li> <li>• Adult physical activity rates.</li> <li>• Youth physical activity rates.</li> <li>• Adult healthy nutrition intake.</li> <li>• Youth healthy nutrition intake.</li> <li>• Adults at healthy weight.</li> <li>• Youth at healthy weight.</li> <li>• Injury prevention campaigns developed.</li> <li>• Numbers exposed to injury prevention campaign.</li> <li>• Rates of passengers in car crashes who were identified as wearing seatbelts.</li> <li>• Reduction in rate of accidents due to texting while driving.</li> <li>• Reduction in rate of accidents where alcohol is involved.</li> <li>• Farm and agricultural accidents.</li> <li>• Rate of falls of elderly.</li> </ul>	<ul style="list-style-type: none"> <li>• School system</li> <li>• Regional Hospitals</li> <li>• Hamilton County Health Department</li> <li>• Lake Shore Hospital Authority</li> <li>• Faith-based groups</li> <li>• Local government</li> <li>• Hamilton County Health Department</li> <li>• Media</li> <li>• Emergency Medical Services</li> <li>• Faith-based groups</li> <li>• Businesses</li> <li>• Schools</li> <li>• Private physicians</li> <li>• United Way of Suwannee Valley</li> <li>• Chambers of Commerce</li> <li>• Regional Federally Qualified Health Centers</li> <li>• North Central Florida Cancer Control Collaborative</li> </ul>

**Table 6. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2016-18.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
	unintentional injury by 10% from a 2009-2013 baseline of 80 per 100,000 population to 72.0 per 100,000 population (Source: 2016 County Health Rankings by Robert Wood Johnson).			
<b>GOAL 3 – Improve the health of mothers and babies.</b>	<p><u>Objective 3.1</u> By December 31, 2018, maintain infant death rate below the state average for any comparable reporting period (e.g. in 2013-2015 the infant mortality rate in Hamilton was 10.6 per 1,000 live births compared to 6.1 for the state; Source: Florida CHARTS).</p> <p><u>Objective 3.2</u> By December 31, 2018, reduce the birth rate to teen mother 15-18 years old from a baseline of 74 per 1,000 population (women aged 15-19) to 66.6 per 1,000 population (women aged 15-19). (Source: Florida CHARTS)</p> <p><u>Objective 3.3</u> By December 21, 2018, increase the percentage of</p>	<p><u>Strategy 3.A</u> Implement Black Infant Health Practice Initiative (BIHPI) in Hamilton County.</p> <p><u>Strategy 3.B</u> Establish Fetal and Infant Mortality Review (FIMR) process for Hamilton County (perhaps in partnership with other neighboring counties or through the Healthy Start Coalition of North Central Florida).</p> <p><u>Strategy 3.C</u> Study effectiveness of current sexual health education programs for youth.</p> <p><u>Strategy 3.D</u> Enhance community education on the importance of early prenatal care and greater linkage to prenatal care services, especially for the underserved.</p>	<ul style="list-style-type: none"> <li>• Infant mortality rates for all races and by race and ethnicity.</li> <li>• FIMR process or something like it developed.</li> <li>• Study completed to determine strengths and weaknesses and opportunities for improvement to existing sexual health education programs for youth.</li> <li>• Early entry into prenatal care rates.</li> <li>• Late entry into prenatal care rates.</li> <li>• Teen pregnancy rates.</li> </ul>	<ul style="list-style-type: none"> <li>• Hamilton County Health Department</li> <li>• Regional Hospitals</li> <li>• Hamilton County Public Schools</li> <li>• Hamilton County Private Schools</li> <li>• Faith-based groups</li> <li>• Businesses</li> <li>• Schools</li> <li>• Private OB/BYN physicians</li> <li>• Healthy Start Coalition of North Central Florida</li> <li>• Regional Federally Qualified Health Centers</li> </ul>

**Table 6. Hamilton County CHIP Goals, Objectives, Strategies, Performance Measures and Key Leads and Partners, 2016-18.**

Goals	Measurable Objective(s)	Strategies	Performance Measures	Key Leads and Partners
	expectant mothers who receive first trimester prenatal care by 10% from a 2013-15 baseline of 60.5% to 66.6%. (Source: Florida CHARTS)			

### Alignment with State and National Priorities

The 2016-18 Hamilton County Community Health Improvement Plan has been reviewed by FDOH in Hamilton County staff and CHAP members for alignment with the following state and national guidelines:

- 2012-2015 Florida State Health Improvement Plan (April 2012) from the Florida Department of Health
- Healthy People 2020 from the United States Department of Health and Human Services
- 2016-18 Florida Department of Health Agency Strategic Plan (ASP)

Each objective under each goal was reviewed to determine where within each of these state or national guidelines the objective was in alignment. Table 7 summarizes where the 2016-18 Hamilton County CHIP objectives align with these various state and national policies and standards.

**Table 7. Hamilton County CHIP Alignment with Healthy People 2020 (HP2020), 2012-15 Florida State Health Improvement Plan (FSHIP) and the 2016 FDOH Agency Strategic Plan (NPS), 2016-18.**

Objective	HP2020	FSHIP	ASP
<b><i>GOAL 1 Increase the appropriate use of healthcare.</i></b>			
Objective 1.1 By December 31, 2018, decrease the rate of preventable hospital stays for Medicare enrollees by 10% to 81.9 per 1,000 Medicare enrollees (Baseline: 2013 from the 2016 County Health Rankings by Robert Wood	Topic Area: Access to Health Services Objective(s): AHS-3;AHS-5; AHS-6	Strategic Issue Area: Access to Care Goal AC2, Pg. 23	No direct alignment

**Table 7. Hamilton County CHIP Alignment with Healthy People 2020 (HP2020), 2012-15 Florida State Health Improvement Plan (FSHIP) and the 2016 FDOH Agency Strategic Plan (NPS), 2016-18.**

Objective	HP2020	FSHIP	ASP
Johnson).			
<b>Goal 2 Improve mortality and morbidity rates.</b>			
Objective 2.1 By December 31, 2018, reduce by 10% the age-adjusted rate for years of potential life lost before age 75 (YPLL) from a baseline of 9,600 years per 100,000 population in 2011-2013 to 8,640 (Source: Robert Wood Johnson 2016 County Health Rankings).	Multiple Topic Areas Related to Chronic Disease: Cancer, Kidney Disease, Diabetes, and Heart Disease and Stroke	Strategic Issue Area: Chronic Disease Prevention Goal CD3, Pg. 16	Priority 2: Long, Healthy Life Goal 2.1 Increase healthy life expectancy
Objective 2.2 By December 31, 2018, reduce by 10% the lung cancer incidence rate from a baseline of 120.5 per 100,000 population in 2011-13 to 108.4 per 100,000 population (Source: Florida CHARTS).	Topic Area: Cancer Objective(s): C-2	Strategic Issue Area: Chronic Disease Prevention Goal CD3, Pg. 16; CD4, Pg. 17	Priority 2: Long, Healthy Life Goal 2.1: Increase healthy life expectancy Strategy 2.1.3: Reduce cancer incidence and increase cancer survival
Objective 2.3 By December 31, 2018, increase the percentage of adults by 10% who are at a healthy weight from 2013 baseline of 25.1% to 27.6% (Source: Florida CHARTS BRFSS data).	Topic Area: Nutrition and Weight Status Objective(s): NWS-8	Strategic Issue Area: Chronic Disease Prevention Goal CD1, Pg. 14; CD2, Pg. 15	Priority 2: Long, Healthy Life Goal 2.1: Increase healthy life expectancy Strategy 2.1.1: Increase the healthy weight of children and adults
Objective 2.4 Reduce the age-adjusted death rates due to unintentional injury by 10% from a 2009-2013 baseline of 80 per 100,000 population to 72.0 per 100,000 population (Source: 2016 County Health Rankings)	Topic Area: Injury and Violence Prevention Objective(s): IVP-1	Strategic Issue Area: Health Promotion Goal HP4, Pg. 12	Priority 2: Long, Healthy Life Goal 2.1: Increase healthy life expectancy Strategy 2.1.4: Reduce injury

**Table 7. Hamilton County CHIP Alignment with Healthy People 2020 (HP2020), 2012-15 Florida State Health Improvement Plan (FSHIP) and the 2016 FDOH Agency Strategic Plan (NPS), 2016-18.**

Objective	HP2020	FSHIP	ASP
by Robert Wood Johnson).			
<b>GOAL 3 Improve the health of mothers and babies.</b>			
Objective 3.1 By December 31, 2018, maintain infant death rate below the state average for any comparable reporting period (e.g. in 2013-2015 the infant mortality rate in Hamilton was 10.6 per 1,000 live births compared to 6.1 for the state; Source: Florida CHARTS).	Topic Area: Maternal, Infant and Child Health	Strategic Issue Area: Access to Care Goal AC-5, Pg. 26	Priority 1: Healthy Moms and Babies Goal 1.1: Eliminate infant mortality Strategy 1.1.1: Eliminate racial disparity in infant mortality
Objective 3.2 By December 31, 2018, reduce the birth rate to teen mother 15-18 years old from a baseline of 74 per 1,000 population (women aged 15-19) to 66.6 per 1,000 population (women aged 15-19). (Source: Florida CHARTS)	Topic Area: Public Health Infrastructure Objective(s): PHI-14; PHI-15 Topic Area: Health Communication and Health Information Technology: Objective(s): HC/HIT-8; HC/HIT-9; HC/HIT-13	Strategic Issue Area: Access to Care Goal AC-5, Pg. 26	No direct alignment
Objective 3.3 By December 21, 2018, increase the percentage of expectant mothers who receive first trimester prenatal care by 10% from a 2013-15 baseline of 60.5% to 66.6%. (Source: Florida CHARTS)	Topic Area: Public Health Infrastructure Objective(s): PHI-14; PHI-15 Topic Area: Health Communication and Health Information Technology: Objective(s): HC/HIT-8; HC/HIT-9; HC/HIT-13	Strategic Issue Area: Access to Care Goal AC-5, Pg. 26	Somewhat aligned with: Priority 1: Healthy Moms and Babies Goal 1.1: Eliminate infant mortality Strategy 1.1.1: Eliminate racial disparity in infant mortality

## 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 8 catalogs for each objective in the 2016-18 Hamilton County Community Health Improvement Plan Update the policy changes that may be required or should be considered in order achieve the objective.

**Table 8. Potential policy changes required to achieve objectives of Hamilton County CHIP, 2016-2018.**

Objective	Potential Policy Change Necessary
<b><i>GOAL 1 Increase the appropriate use of healthcare.</i></b>	
Objective 1.1 By December 31, 2018, decrease the rate of preventable hospital stays for Medicare enrollees by 10% to 81.9 per 1,000 Medicare enrollees (Baseline: 2013 from the 2016 County Health Rankings by Robert Wood Johnson).	<ul style="list-style-type: none"> <li>• Additional health insurance reform, both public and private, policy changes may be needed, especially in Florida which has not taken up the health reform, to provide people affordable preventive care to avoid hospitalizations.</li> <li>• Individual provider policies may need to change to offer more incentive or disincentive for utilizing care more effectively.</li> <li>• Community awareness increase is critical as most residents and policy makers not aware of the profound impact in Hamilton County.</li> <li>• As insurance reimbursement will increasingly reward health outcomes rather than volume of treatment, strategic partnerships must be developed to manage patients in the community.</li> </ul>
<b><i>Goal 2 Improve mortality and morbidity rates.</i></b>	
Objective 2.1 By December 31, 2018, reduce by 10% the age-adjusted rate for years of potential life lost before age 75 (YPLL) from a baseline of 9,600 years per 100,000 population in 2011-2013 to 8,640 (Source: Robert Wood Johnson 2016 County Health Rankings).	<ul style="list-style-type: none"> <li>• Community awareness increase is critical as most residents and policy makers not aware of the profound impact in Hamilton County.</li> <li>• As insurance reimbursement will increasingly reward health outcomes rather than volume of treatment, strategic partnerships must be developed to manage patients in the community.</li> <li>• Better case must be made to residents on linkage of poor behavior choices to chronic disease outcomes.</li> </ul>
Objective 2.2 By December 31, 2018, reduce by 10% the lung cancer incidence rate from a baseline of 120.5 per 100,000 population in 2011-13 to 108.4 per 100,000 population	<ul style="list-style-type: none"> <li>• Policies further restricting or disincentivizing smoking may still be warranted.</li> <li>• Lung cancer screening must be more widely encouraged now that screening is becoming more proficient.</li> </ul>

**Table 8. Potential policy changes required to achieve objectives of Hamilton County CHIP, 2016-2018.**

Objective	Potential Policy Change Necessary
(Source: Florida CHARTS).	
Objective 2.3 By December 31, 2018, increase the percentage of adults by 10% who are at a healthy weight from 2013 baseline of 25.1% to 27.6% (Source: Florida CHARTS BRFSS data).	<ul style="list-style-type: none"> <li>• Better case must be made to residents on linkage of poor behavior choices to chronic disease outcomes.</li> <li>• As providers of services are being incentivized by being paid on health outcomes perhaps insured individuals could be incentivized for meeting behavior modification and weight targets.</li> </ul>
Objective 2.4 Reduce the age-adjusted death rates due to unintentional injury by 10% from a 2009-2013 baseline of 80 per 100,000 population to 72.0 per 100,000 population (Source: 2016 County Health Rankings by Robert Wood Johnson).	<ul style="list-style-type: none"> <li>• Stricter safety belt laws and enforcement of current law.</li> <li>• Stricter driving under the influence laws and enforcement of current law.</li> <li>• Prevention and education on injury as a leading cause of death and disability not as widely promoted as chronic disease, obesity, etc.</li> </ul>
<b>GOAL 3 Improve the health of mothers and babies.</b>	
Objective 3.1 By December 31, 2018, maintain infant death rate below the state average for any comparable reporting period (e.g. in 2013-2015 the infant mortality rate in Hamilton was 10.6 per 1,000 live births compared to 6.1 for the state; Source: Florida CHARTS).	<ul style="list-style-type: none"> <li>• Elimination of racial and ethnic disparity in outcomes will reduce overall rates therefore a critical policy change is to eliminate policies and practices that promote racial disparities in outcomes.</li> <li>• Full participation in health reform could get more people eligible for critically needed prenatal care services.</li> </ul>
Objective 3.2 By December 31, 2018, reduce the birth rate to teen mother 15-18 years old from a baseline of 74 per 1,000 population (women aged 15-19) to 66.6 per 1,000 population (women aged 15-19). (Source: Florida CHARTS)	<ul style="list-style-type: none"> <li>• Curricula allowable in public and private school settings may have to change.</li> <li>• Cultural perspectives on where, when with whom to have discussions relating to youth sexual health need to be addressed.</li> </ul>

**Table 8. Potential policy changes required to achieve objectives of Hamilton County CHIP, 2016-2018.**

Objective	Potential Policy Change Necessary
Objective 3.3 By December 21, 2018, increase the percentage of expectant mothers who receive first trimester prenatal care by 10% from a 2013-15 baseline of 60.5% to 66.6%. (Source: Florida CHARTS)	<ul style="list-style-type: none"> <li>• Full participation in health reform could get more people for eligible for critically needed prenatal care services.</li> <li>• Cultural perspectives on the need for early prenatal care will have to be addressed.</li> </ul>

## Next Steps

The previously presented goals, priority issues and potential strategies represent the central components of the 2016-18 Community Health Improvement Plan for Hamilton County. Plans such as the 2016-18 CHIP are necessarily strategic in nature.

In order to fully articulate a Community Health Improvement Plan for Hamilton County, the Hamilton County Strategic Healthcare Planning Committee will need to continue with the following:

- Identification of critical resources necessary for implementation of strategies.
- Further identification of critical partners necessary for implementation of strategies.
- Formulation of key action steps that will result in implementation of strategies.
- Specify time table and targeted completion/achievement dates.
- Establish measurable process objectives and re-affirm or refine as needed the specified outcome objectives in order to chart progress and measure success.

One other critical factor to consider during this time horizon is the Community Health Assessment (or Community Health Needs Assessment). As the historical analyses in this document show regarding the development of the original CHIP, the various CHIP updates and the current 2016-18 CHIP, the data and insights provided by a Community Health Assessment are invaluable to the identification of a CHIP. As such, the Community Health Advisory Panel should establish a goal to see that new Community Health Assessment is conducted by June 30, 2018 so that there is time to review CHIP performance and development new standards of performance for the 2016-2018 current CHIP prior to its window of relevance expiring on December 31, 2018.