



# Community Health Improvement Plan Annual Report, 2016

---

*Florida Department of Health in Nassau County*

July 2016

---

## Table of Contents

---

Introduction .....	3
Overview of Community Health Improvement Plan (CHIP).....	4
Summary of CHIP Annual Review Meeting .....	5
Strategic Issue Area #1 .....	5
Strategic Issue Area #2 .....	9
Strategic Issue Area #3 .....	11
Revisions .....	13
Accomplishments.....	14
Conclusion .....	16
Appendices .....	17
Appendix B: Annual CHIP Review Community Meeting Minutes .....	18

## **Introduction**

---

The Nassau County Community Health Improvement Plan (CHIP) Annual Report serves as a progress report of the strategies that were developed and the activities that have been implemented. The activities and collaborative efforts of the Florida Department of Health (FL DOH) in Nassau County and community partners will be reflected within this report. While the CHIP is, a community driven and collectively owned health improvement plan, the FL DOH Nassau County is charged with providing administrative support, tracking and data collection, and preparing the annual report.

## **Overview of the Community Health Improvement Plan (CHIP)**

In March 2015, the FL DOH Nassau County and Partnership for a Healthier Nassau (PHN) Steering Committee convened a planning meeting to review and update the 2012 – 2015 CHIP. The meeting was organized using the National Association of City and County Health Officials’ Mobilizing for Action through Planning and Partnership (MAPP) strategic planning model. Subject matter experts from 18 community partner organizations attended and learned more about the four assessments suggested by the MAPP process. From this meeting, CHIP Subcommittees were created and team leads were identified for each assessment. Over the next 4 – 5 months, the assessments yielded in-depth analyses of factors and forces that impact population health. Taken together, the assessment findings contribute to a comprehensive view of health and quality of life in Nassau County.

On September 15, 2015, the PHN Steering Committee shared the assessment findings with the community. Priorities were identified through a facilitated consensus process by looking for cross-cutting strategic issues that emerged from the four assessments. The attendees reached consensus on four strategic issue areas: Access to Care, Transportation, and Behavioral Health and Substance Abuse. See Table below for Strategic Issue Areas with their goals, developed by workgroups of subject matter experts.

<b>STRATEGIC ISSUE AREA</b>	<b>GOAL</b>
<b>Access to Care</b>	<ol style="list-style-type: none"> <li>1. <i>Educate target populations regarding health resources.</i></li> <li>2. <i>Expand Access to Care in West Nassau and high risk populations.</i></li> </ol>
<b>Behavioral Health and Substance Abuse</b>	<ol style="list-style-type: none"> <li>1. <i>Increase awareness and provide education to the community, providers, and Law Enforcement.</i></li> <li>2. <i>Create a sustainable Behavioral Health Professional Collaborative.</i></li> </ol>
<b>Transportation</b>	<ol style="list-style-type: none"> <li>1. <i>To improve the social determinants of health by reducing transportation barriers.</i></li> </ol>

## Summary of CHIP Annual Review Meeting

---

On May 19, 2017, PHN Steering Committee met to discuss the outcomes of each strategic issue area in preparation of this report. Community partners represented at the review meeting included Barnabas Center, Nassau County School District, Family Support Services, Nassau TRANSIT, State Attorney’s Office, Starting Point Behavioral Healthcare, Baptist Medical Center Nassau, and FL DOH Nassau County.

Each strategic issue area lead was tasked with drafting a status update and summary of outcomes to be included in this report. The updates and summaries were collected and compiled by FL DOH Nassau County. The final version of this report will be shared with the PHN Steering Committee at the next meeting on July 11, 2017.

### **Strategic Issue Area #1: Access to Care**

The Access to Care workgroup was led by Mary Snyder and John Bowls. Workgroup members began by formulating a vision: To improve access to care for minority and underserved groups. Members included Zayda Serrano, Teresa Rowe, Arridean Albertie, Jennett Baker, Danielle Lean, and Mary von Mohr. This group reviewed the summary findings and brainstormed specific strategies. Once strategies were created, members worked to draft goals, objectives, and action steps. Then the group evaluated and prioritized the strategies which resulted in two major goals related to access for care.

#### **Goal 1: Educate target populations regarding health resources.**

*Strategy 1: To provide an Annual Health Fair on the Westside of the county.*

*Key Partners: Barnabas Center, Baptist Medical Center, Florida Department of Health, and community volunteers.*

Why this is important to our community:					
<i>An annual community health fair takes place in Fernandina Beach, on the east side of the county. The city center of Callahan, on the west side of the county, is located approximately 27 miles from the location of the annual health fair in Fernandina Beach, making it difficult for those who are transportation disadvantaged to attend. An annual community health fair on the west side of the county will make it easier for transportation disadvantaged residents to attend the health fair and access resources.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status*

By December 2018, increase the frequency of promotional health messaging on the Westside of the County.	Hold health fairs on the Westside of Nassau County	2	2		First health fair was in 2016 and second health fair was in 2017.
---	--	---	---	---	---

*Strategy 2: Formation of the Interfaith Health Ministry which will provide education, outreach, health linkages and screenings at places of worship across the county.*

*Key Partners: Barnabas Center, Baptist Medical Center, and Florida Department of Health.*

<b>Why this is important to our community:</b>					
<i>An Interfaith Health Ministry was established during the 2012 – 2015 CHIP, but it is no longer active. During the 2016 – 2018 assessment process, community members expressed interest in the Interfaith Health Ministry being re-established. In order to increase access to care, there should be an Interfaith Health Ministry on both sides of Nassau County.</i>					
<b>Objective</b>	<b>Indicator</b>	<b>Current Level</b>	<b>Target</b>	<b>Status</b>	<b>Explanation of Status</b>
By December 2018, establish Interfaith Health Ministry on the Westside and re-establish in East Nassau.	Establish Interfaith Health Ministries	0	2		Committee meetings have begun, but still in brainstorming phase.

*Strategy 3: Create a user friendly “Nassau Resource Card”/resource tool in both English/Spanish.*

*Key Partners: Barnabas Center, Baptist Medical Center, and Florida Department of Health.*

<b>Why this is important to our community:</b>					
<i>A community resource guide currently exists, but it is lengthy, only in English, and is primarily accessed online. The creation of an additional resource guide is needed to specifically target high risk populations, be easily accessible, and available in Spanish.</i>					
<b>Objective</b>	<b>Indicator</b>	<b>Current Level</b>	<b>Target</b>	<b>Status</b>	<b>Explanation of Status</b>

By December 2018, assure written information is updated and available in locations accessible to high risk populations in Spanish and English.	Distribute resource cards in the community	N/A	N/A		Resource cards have been developed and printed by the Access to Care Workgroup and are being deployed to appropriate community venues.
--	--	-----	-----	---	--

**Goal 2: Expand Access to Care in West Nassau and high risk populations.**

*Strategy 1: Identify health champions who will routinely identify and assess for unmet or new health needs of the Westside community.*

*Key Partners: Barnabas Center, Baptist Medical Center, and Florida Department of Health.*

Why this is important to our community:					
<i>Identifying health champions on the Westside of the county will increase the community's knowledge of health resources. The Westside of the county has historically been underrepresented in community outreach and organizing efforts.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, develop a West Nassau Health Team to determine the growing health needs of the community and identify champions to advocate for care.	Create West Nassau Health Team	N/A	N/A		The planned West Nassau Health Team strategy has been put on hold due to continued barriers in engagement and transportation. When possible, informal input from west Nassau residents is sought at health fairs and community events.

*Strategy 2: Expand health services on the Westside by the expansion of Barnabas primary care services in Callahan and by exploring telehealth models for the community and schools.*

*Key Partners: Barnabas Center and Florida Department of Health.*

Why this is important to our community:					
<i>The Westside of the county is considered a Federally Designated Primary Care Health Professional Shortage Area. Bringing more healthcare services to Callahan and Hilliard will increase access to healthcare.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, develop and implement new health services in Callahan and Hilliard.	Provide new health services in Callahan and Hilliard	N/A	N/A		Barnabas has established a once weekly (Friday morning) clinic at the Health Department facility in Callahan.

*Strategy 3: Create a Men's Health team to promote men's health.*

*Key Partners: Barnabas Center and Florida Department of Health.*

Why this is important to our community:					
<i>Men have been identified as a group that seeks healthcare less often than women. The creation of a Men's Health Team will promote health and wellness among men and increase their frequency of accessing healthcare.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, create a Men's Health team to implement and promote men's health.	Creation of Men's Health Team.	N/A	N/A		The planned Men's Health Team has been put on hold due to continued barriers in target population engagement.

\* Status indicators are as follows:

-  = Little to no movement towards objective target
-  = some progress towards meeting the objective target
-  = reached or surpassed objective target

**Strategic Issue Area #2: Behavioral Health**

The Behavioral Health workgroup was led by local psychologist Dr. Catherine Drew. Workgroup members began by formulating a vision: To Improve the Mental Health of Nassau County. Members included Susan Woodford, Valerie Ray, Renae Lewin, Diane Hall, Clete Deller, Stephanie Basey, and Mary von Mohr. These persons represent public and private mental health providers, Nassau County School District, Baptist Medical Center Nassau, and health department social service staff. Committee members reviewed the CHA data to create goals and action steps.

**Goal 1: Increase awareness and provide education to the community, providers, and law enforcement.**

*Strategy 1: Provide Mental Health First Aid training to youth and law enforcement.*

*Key Partners: Starting Point Behavioral Healthcare, Nassau Alcohol Crime Drug Abatement Coalition, and Baptist Medical Center.*

Why this is important to our community:					
<i>The suicide rate in Nassau County is higher than the state level, suggesting a need for more mental health awareness. Mental Health First Aid trainings for community members will help link more people to mental health services.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, expand training to Youth and Adults on Mental Health First Aid.	Trainings on Mental Health First Aid.	N/A	N/A		Three entities (Starting Point, NACDAC, Baptist Medical Center) continue to provide free or low cost Mental Health First Aid training to general population and target groups.

*Strategy 2: Increase promotion of behavioral health services by 10%.*

*Key Partners: Starting Point Behavioral Healthcare, Nassau Alcohol Crime Drug Abatement Coalition, and Florida Psychological Associates.*

**Why this is important to our community:**

*There are several agencies and individuals providing mental health services in Nassau County, but there is confusion about how and where to access those services. Promotion of available services will increase people's awareness of resources.*

<b>Objective</b>	<b>Indicator</b>	<b>Current Level</b>	<b>Target</b>	<b>Status</b>	<b>Explanation of Status</b>
By December 2018, increase promotion of behavioral health services by 10%.	Promotion of behavioral health services.	N/A	N/A		Ongoing work by NACDAC to publish and disseminate a Behavioral Health Resource Guide is in place. Additionally, NACDAC has begun to provide direct services as well as a social marketing campaign (I am MORE) to reduce stigma.

**Goal 2: Create a sustainable Behavioral Health Collaborative.**

*Strategy 1: Establish Collaborative vision and mission.*

*Strategy 2: Produce a visual tool that defines structure including branding and logo.*

*Strategy 3: Launch community needs assessment.*

*Strategy 4: Analyze findings and establish high risk/gap areas.*

*Strategy 5: Share Data and Monitor trends.*

*Strategy 6: Develop a Strategic Plan for Collaborative.*

*Key Partners: Starting Point Behavioral Healthcare, Nassau Alcohol Crime Drug Abatement Coalition, and Florida Psychological Associates.*

**Why this is important to our community:**

*A recent increase in the availability of mental health services in Nassau County has created a need for providers to collaborate and communicate in order to better serve the community.*

<b>Objective</b>	<b>Indicator</b>	<b>Current Level</b>	<b>Target</b>	<b>Status</b>	<b>Explanation of Status</b>
------------------	------------------	----------------------	---------------	---------------	------------------------------

By January 2017, establish regularly scheduled Behavioral Health Collaborative meetings.	Behavioral Health Collaborative meetings	N/A	N/A		Three main non-profit behavioral health service providers participate in the CHIP Behavioral Health Workgroup (Starting Point, NACDAC, Florida Psychological Association) in addition to other private and non-profit groups.
--	--	-----	-----	---	---

\* Status indicators are as follows:

-  = Little to no movement towards objective target
-  = some progress towards meeting the objective target
-  = reached or surpassed objective target

### **Strategic Issue Area #3: Transportation**

As the CHIP was being created the transportation issue was already being addressed by another entity, the Nassau County Transit Strategy Workgroup. This established group had scheduled meetings to complete a full Nassau County transit assessment. This would allow for feedback to review how to determine what was needed in this area. Several PHN Steering Committee members attended meetings to share their ideas with the work group on expressed transportation needs. General ideas included creating additional bus stops and increasing the frequency of stops across the county. Separately, promotion of the NassauTRANSIT system was needed.

#### **Goal 1: To improve the social determinants of health by reducing transportation barriers.**

*Strategy 1: Support the County Plan for expanded transportation by collaboration and generation of ideas.*

Strategy 2: Advocate and promote existing transit system.

Key Partners: Transit Strategy Workgroup, Nassau TRANSIT, and PHN Steering Committee.

Why this is important to our community:					
NassauTRANSIT is the designated transportation coordinator for Nassau County and runs the only public and para-transit systems in the county. Increasing the availability of transportation will help residents make and keep their health and wellness appointments.					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, assist the County in planning for expanded transportation needs.	PHN attendance at County meetings	N/A	N/A		PHN and other community members provided information to County Transportation Workgroup to facilitate the development of an updated Plan. Additionally, ongoing promotion of low-cost Nassau TRANSIT services is marketed through private and public partners.

\* Status indicators are as follows:

-  = Little to no movement towards objective target
-  = some progress towards meeting the objective target
-  = reached or surpassed objective target

## Revisions

At this point, there has not been any revisions to the CHIP. There have been two area that have put on hold. This is in the area of Access to Care, Goal 2 - Strategies 1 and 3. These include the formation of a Westside Health team and Outreach to Men on the Westside of the County. Challenges have been encountered which have caused the committee to delay initiation of the action steps. The committee is currently seeking champions for these concerns to lead further efforts.

*Current areas of Challenge:*

### **Goal 2: Expand Access to Care in West Nassau and high risk populations.**

*Strategy 1: Identify health champions who will routinely identify and assess for unmet or new health needs of the Westside community.*

*Key Partners: Barnabas Center, Baptist Medical Center, and Florida Department of Health.*

Why this is important to our community:					
<i>Identifying health champions on the Westside of the county will increase the community's knowledge of health resources. The Westside of the county has historically been underrepresented in community outreach and organizing efforts.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, develop a West Nassau Health Team to determine the growing health needs of the community and identify champions to advocate for care.	Create West Nassau Health Team	N/A	N/A		The planned West Nassau Health Team strategy has been put on hold due to continued barriers in engagement and transportation. When possible, informal input from west Nassau residents is sought at health fairs and community events.

*Strategy 3: Create a Men's Health team to promote men's health.*

*Key Partners: Barnabas Center and Florida Department of Health.*

Why this is important to our community:					
<i>Men have been identified as a group that seeks healthcare less often than women. The creation of a Men's Health Team will promote health and wellness among men and increase their frequency of accessing healthcare.</i>					
Objective	Indicator	Current Level	Target	Status	Explanation of Status
By December 2018, create a Men's Health team to implement and promote men's health.	Creation of Men's Health Team.	N/A	N/A		The planned Men's Health Team has been put on hold due to continued barriers in target population engagement.



## Accomplishments

Community-wide strategic planning requires strong organization and a high level of commitment from partners, stakeholders, and the community residents who are recruited to participate. In addition to celebrating individuals and partner organizations, it is important to recognize and celebrate the accomplishments of the partnership as a whole. Below are details of community successes related to the Nassau Community Health Improvement Plan activities:

*Strategy 1: Provide Mental Health First Aid training to youth and law enforcement.*

*Key Partners: Starting Point Behavioral Healthcare, Nassau Alcohol Crime Drug Abatement Coalition, and Baptist Medical Center.*

Why this is important to our community:
<i>The suicide rate in Nassau County is higher than the state level, suggesting a need for more mental health awareness. Mental Health First Aid trainings for community members will help link more people to mental health services.</i>

Goal	Objective	Accomplishment
------	-----------	----------------

<p>Goal 1: Increase awareness and provide education to the community, providers, and law enforcement.</p>	<p>By December 2018, expand training to Youth and Adults on Mental Health First Aid (MHFA).</p>	<p>Three entities (Starting Point, NACDAC, Baptist Medical Center) continue to provide free or low cost Mental Health First Aid training to general population and target groups</p> <ol style="list-style-type: none"> <li>1. Update was provided for Dec 2016 and Jan/Feb of 2017: <ol style="list-style-type: none"> <li>a. 2-day Fernandina Beach Police Department training about trauma informed services provided by Women’s Center of Jacksonville</li> <li>b. State of Florida Sherriff’s Association provided CIT training to NCSO with behavioral health provider participants.</li> <li>c. NACDAC engaged in second planning phase for “I am More” campaign,</li> <li>d. Starting Point has six MHFA classes scheduled</li> <li>e. Florida Psychological offering systemic mental health screening services to Nassau, Duval, and Clay County</li> <li>f. Valerie Ray shared information about a trauma focused CBT learning collaborative in Northeast Florida.</li> </ol> </li> </ol> <p>Collectively the three mental health providers have already surpassed educational outreach on MHFA that was planned for Year one.</p>
<p><b>How it’s important for our community:</b> Nassau County has far too many persons living with Behavioral Health and Substance Abuse issues. By aligning and coordinating efforts across various partners and sectors, efforts and improvements in health are amplified. The partnership though the CHIP will educate the community on mental health first aid, prevention/intervention and care and treatment so we can improve the lives of Nassau residents.</p>		
<p>Goal 2: By December 2018, develop and implement new health</p>	<p>Provide new health services in Callahan and Hilliard</p>	<p>Barnabas has established a once weekly (Friday morning) clinic at the Health Department facility in Callahan.</p>

services in Callahan and Hilliard.

**How it's important for our community:** *The Westside of the county is considered a Federally Designated Primary Care Health Professional Shortage Area. Bringing more healthcare services to Callahan and Hilliard will increase access to healthcare.*

## Conclusion

---

The CHIP serves as a roadmap for a continuous health improvement process for the local public health system by providing a framework for the chosen strategic issue areas. It is not intended to be an exhaustive and static document. We will evaluate progress on an ongoing basis through our Partnership for a Healthier Nassau Steering meetings.

Looking at quarterly CHIP implementation reports and including discussion with community partners will support efforts and lead us to success. We will conduct annual reviews and revisions based on input from partners and create CHIP annual reports each year by Month, Year. The CHIP will continue to change and evolve over time as new information and insight emerge at the local, state and national levels.

By working together, we can have a significant impact on the community's health, improving where we live, work and play and realize the vision of a healthier Nassau County.

## **Appendices**

---

The following appendices include:

**Annual CHIP Review Community Meeting Minutes**

# PARTNERSHIP FOR A HEALTHIER NASSAU

## STEERING COMMITTEE MEETING MINUTES

Date: May 9, 2017

### Meeting locations:

FDOH Nassau Administration Bldg.  
30<sup>th</sup> South 4<sup>th</sup> St  
Fernandina Beach, FL 32034

Yulee Clinic (via conference call)  
86014 Pages Dairy Rd  
Yulee, FL 32097

---

**Meeting called by:** Steering Committee PHN

**Facilitator:** Mary von Mohr      **Note taker:** Dawna Cornelissen

**Attendees:** John Bowls, Kim Clemons, Chris Compton (by conference call), Dawna Cornelissen, Mike Hays, Renae Lewin (by conference call), Eugenia Ngo-Seidel (by conference call), Valerie Ray, Mary Snyder, and Mary von Mohr.

Self-introductions were made.

**Agenda Item #1** - M. von Mohr opened the meeting with a recap of the CHIP process over the last year and explained that the next step is to create an Annual Report. M. von Mohr pointed out the key components of the Annual Report and reviewed a CHIP Annual Report completed by Baker County to provide updates on each strategic issue area. Successes stories and accomplishments as well as challenges are being noted.

**Agenda Item #2** - M. Hays provided an updated from the Transportation Subcommittee. He reported that a presentation was given to the Transportation Working Group on March 21, 2017 and to the entire Board of County Commissioners (BOCC) last night. He stated that members of the BOCC will be riding a bus across the county later this month so they can observe the current state of public transportation in the county. M. Hays reported that the presentation was well received by the BOCC and he will be presenting a funding proposal to them at the end of this month.

M. Hays summarized that over the last year the Transportation Subcommittee has conducted a thorough, top level assessment of the transportation needs of the county through several stakeholder meetings and presentations. He reported that the next step is to bring the vision to life by securing funding for operational and capital improvements. M. Hays reported that right now there are no funds, however, there may be some funding available in October 2018. Committee discussed the benefits of marketing the project in phases to capture multiple successes. He expressed that there is a need to survey riders to learn why people ride the bus and where they are going to continue to expand routes and frequency.

D. Cornelissen suggested trying to get a transportation success story from a passenger.

V. Ray reported on the progress of the Behavioral Health and Substance Abuse Subcommittee. She explained that goal one is to increase awareness and provide education to the community. V. Ray reported that this has been done through NACDAC's PSA's for the "I am More" campaign and the mental health first aid trainings by SPBH, NACDAC, and Baptist Health. V. Ray reported that last year's goal for increasing awareness was met.

V. Ray explained that goal two is to form a behavioral health collaborative and reported that it is moving towards being formalized. M. von Mohr reported that there is a Collaborative planning meeting in June. She further explained that the Collaborative would be open to all social service agencies working with Nassau County residents. V. Ray suggested inviting Gateway, River Region, MHRC, and Wekiva.

V. Ray reported that NACDAC is building a new resource guide app for smart phones.

E. Seidel suggested contacting NACDAC to see if some of what they're doing can be included in the work plan.

D. Cornelissen suggested using the mental health first aid training provided to Nassau County School Board's bus drivers as a success story in the Annual Report.

R. Lewin reported that there has been an increase in our social media presence through the Partnership for a Healthier Nassau Facebook page. M. von Mohr assigned finding mental health related items for the Facebook page to D. Cornelissen.

M. Snyder and J. Bowls reported on the progress of the Access to Care Subcommittee. J. Bowls reported that there have been two health fairs in Callahan as part of the goal to expand access to the Westside of the county. He also reported that Barnabas has partnered with the DOH to offer a clinic in Callahan once per week. John also reported that the Subcommittee's resource pocket guide is almost completed and that Baptist Health is paying for them to be printed. E. Seidel reported that the DOH will pay for the display racks.

J. Bowls reported that the Interfaith Health Ministry Committee has had two meetings and progress is being made. He reported that the next meeting will be at Family Support Services on 5/24/17 at 1 pm. J. Bowls reported that Lynn Sherman from Baptist Health's Social Responsibility Program was in attendance, as well as the new liaison, Paul Cook. He reported that they will be partnering with the Committee because there is a lot of overlap. M. Snyder and J. Bowls are currently leading the meetings, but would like to find someone else to take over at some point. J. Bowls reported that not many church leaders have attended the meetings.

R. Lewin reported she might bring a pastor from the Baptist Church in Callahan to the next meeting.

J. Bowls explained that right now the Committee is at a brainstorming stage and is discussing how to pass information on to the churches. M. von Mohr explained that the intent behind the Interfaith Health

Ministry is that people who do not regularly seek out health care, might go to church and receive information and/or services there. She gave the example of Diane Twiggs doing monthly health topic presentations at her church.

V. Ray stated she would like to connect Theresa Stover from SPBH to the Interfaith Health Committee because she is providing counseling at two Christian schools.

K. Clemons expressed an interest in doing a presentation for churches about school health.

E. Seidel suggested not just using the term “parish nurse”, but also “lay health leader.”

M. Snyder reported that there has not been a lot of progress related to the goals of exploring telehealth models and promoting men’s health.

C. Compton recommended utilizing technology to do more teleconferences in multiple locations.

E. Seidel reported that Medicaid is starting to do telehealth, especially around behavioral health. She also reported that UF Health is doing telehealth.

J. Eberwein reported that FPA is doing telepsychiatry in schools.

V. Ray reported that SPBH is working on using telepsychiatry with their clients at Day Spring.

C. Compton reported that FSSNF provides telehealth services for staff through Florida Blue.

M. von Mohr asked the Committee to try to come up with a success story from the Access to Care Subcommittee. She reminded members that we can only report on the things we planned to do. M. von Mohr will be in touch with Subcommittee leads to ensure we can demonstrate success in the Annual Report. The Annual Report is due on June 30<sup>th</sup>. A final version of the Annual Report will be shared at the next meeting.

R. Lewin reminded members to send her items to post to the Partnership for a Healthier Nassau Facebook page.

M. von Mohr shared that Dr. Seidel and she will be speaking about social determinants of health and the CHIP at NACDAC’S quarterly lunch and learn on 5/12/17.

**Agenda Item #3** – Future meeting dates: July 11, September 12, November 14

Meeting adjourned.

**Handouts/Attachments** – 2014 CHIP Progress Report, CHIP Annual Report handout, sample CHIP Annual Report, CHIP Annual Report template.

Action items and who they are assigned to with due dates.

Action items	Assigned to:	Respond by
1. Transportation success story from a passenger?	Mike Hays	
2. BHSA success story - mental health first aid training provided to Nassau County School Board's bus drivers? NACDAC involvement?	Julie Eberwein	Mary von Mohr
3. Connect Theresa Stover from SPBH to the Interfaith Health Committee	V. Ray	
5. Access to Care success story	Mary Snyder	
6. Annual Report is due on June 30	John Bowles	Mary von Mohr
7. Dr. Seidel and M. von Mohr will be speaking about social determinants of health and the CHIP at NACDAC'S quarterly lunch and learn on 5/12/17.	Dr. Seidel	

---

***Other Information***

---

