



Community Health Improvement Plan Annual Report, 2016

Florida Department of Health in Sarasota County

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Introduction

Each year the Florida Department of Health in Sarasota County reviews the progress of the Community Health Improvement Plan (CHIP). The purpose of this Annual Report is to review the activities and strategies implemented to improve county-wide health outcomes. Much of the progress made toward improving the health and overall wellness of Sarasota residents is attributed to collaboration with key community stakeholders and partners.

The Florida Department of Health in Sarasota County has engaged key community stakeholders such as Sarasota Memorial Health Care System, Coastal Behavioral Centers, The Friendship Centers, All Faiths Food Bank, Early Learning Coalition of Sarasota County, Sarasota County Parks & Recreation, Manatee Rural Health Institute, UF/IFAS Extension Offices, First Step of Sarasota, The Salvation Army, and Multicultural Health Institute. In addition to these partners, the Department of Health staffs Community Health Action Teams (CHATs), which are community-led groups working to improve the health of Sarasota County residents.

Overview of the Community Health Improvement Plan (CHIP)

In the Spring of 2015, the Florida Department of Health in Sarasota County completed a Community Health Assessment (CHA) to better understand and analyze the health of the county and its residents. The assessment took into account health factors such as the environment, social and economic status, disease incidence, disability, behavioral health, healthy weight, and access to care. The findings from this assessment were used to identify the priority areas of the CHIP.

The National Associations of County and City Health Official's (NACCHO) Mobilizing for Action through Planning and Partnership (MAPP) helped to guide the CHIP planning and implementation process. The four key MAPP assessments used throughout this process include:

1. Community Health Status Assessment
2. Community Themes and Strength Assessments
3. Forces of Change Assessment
4. Local Health System Assessment

The components of the 2015 Community Health Assessment were:

1. Community Health Survey
2. Key Informant Interviews
3. Focus Groups
4. Secondary Data Analysis

Qualitative and quantitative data from the CHA informed members of the CHIP Leadership Council of key strategic health issues which in turn helped guide the formation of the CHIP goals and strategies toward improved county health.

The three identified health strategic areas were as follows:

1. Healthy Weight
2. Access to Healthcare
3. Behavioral Health: Mental Health & Substance Abuse

Objectives and indicators were determined during several CHIP Leadership Council meetings in early 2016. Work on activities continued throughout the year by DOH-Sarasota, partner agencies, and collaborations.

STRATEGIC ISSUE AREA	GOAL
Healthy Weight	<ol style="list-style-type: none"> 1. <i>Increase percentage of Sarasota County residents at a healthy weight</i>
Access to Healthcare	<ol style="list-style-type: none"> 1. <i>Improve access to dental healthcare services</i>
	<ol style="list-style-type: none"> 2. <i>Increase the utilization of health services available to the low-income population</i> 3. <i>Increase the percentage of insured adults in Sarasota County</i> 4. <i>Reduce infant mortality rates</i>
Behavioral Health: Mental Health and Substance Abuse	<ol style="list-style-type: none"> 1. <i>Improve access to mental health services</i> 2. <i>Reduce the percentage of Sarasota County residents who engage in excessive alcohol consumption</i> 3. <i>Reduce the percentage/numbers of Sarasota County residents who engage in illicit drug use</i> 4. <i>Decrease the percentage of current tobacco users</i>

Summary of CHIP Annual Review Meeting

The Community Health Improvement Plan (CHIP) Leadership Council 2016 Annual Review meeting was held on January 27, 2017. During the meeting the following were discussed: Community Health Action Team (CHAT) accomplishments, status updates on the three (3) CHIP strategy areas for 2016, and revisions for the 2017 CHIP.

CHAT Chairs discussed the accomplishments and challenges that they face in their respective CHATs. A brief history was given of the 2015 Community Health Assessment (CHA) and the CHIP Leadership Council. A status update on the 2015-2018 CHIP three (3) strategic areas: healthy weight, access to healthcare, and behavioral health (mental health & substance abuse) was provided for 2016. The CHIP Leadership Council was told that they will receive a report of the meeting (2016 Annual Report). Based on the feedback provided, the CHIP will be revised. Lastly, first quarter updates for the CHIP will be provided in April 2017. Positive support was received from the partners concerning the emphasis on engagement during the 2016 and 2017 CHIP planning process.

Strategic Issue Area #1: Healthy Weight

Maintaining a healthy weight is attributable to overall health and wellness. Key factors that play a significant role in achieving and sustaining a healthy weight include daily consumption of nutrient rich foods and regular physical activity. Healthy eating and physical activity are proven to reduce the risk of the obesity and chronic health conditions. Results from the 2015 Community Health Assessment indicated that increasing the number of children and adults at a healthy weight is a priority.

Goal: Increase the percentage of Sarasota County residents at a healthy weight.

Strategy: With community partnerships and engagement, DOH-Sarasota conducted a training for early childhood education settings, supported efforts of school nurses to work with children identified outside of the healthy weight range, assisted with education programs provided through food and nutrition services in schools, developed and implemented a workplace wellness initiative, supported Healthy Heroes as a primary care intervention program utilizing 5-2-1-0 messaging, offered walking programs throughout the year, created a GIS map to determine where healthy eating gaps exist, and increased the number of sites that offer the Family Nutrition Program through UF/IFAS.

Key Partners: Healthy Sarasota County Collaborative, Sarasota County Schools, Early Learning Coalition, Lake Erie College of Osteopathic Medicine (LECOM), Community Health Centers of Sarasota County, UF/IFAS Extension Offices, All Faiths Food Bank

Why this is important to our community:

Maintaining a healthy weight decreases the risk of chronic health conditions such as diabetes, heart disease and high blood pressure. Ensuring our residents live in an environment that encourages healthy eating and physical activity, among a range of competing unhealthy behaviors, supports an improved quality of life for our community.

Objective	Indicator	Current Level (most recent data available)	Target	Status	Progress Notes*
Decrease the percentage of overweight adults from 36.4% to 34.6%.	Adults who are overweight	36.4% 2013 CHARTS	34.6%		Per CHARTS, from 2002 to 2013, the percentage of overweight adults has decreased from 41.9% to 36.4%; 5.5% decrease in 11 years.
Increase the percentage of Sarasota County children at a healthy weight from 63.6% to 68.6%.	Percentage of Sarasota County school children in grades 1, 3, 6, and 9 who have BMI in a healthy range (18.6-24.5)	64% 2015- 2016 School Health	68.6%		Data shows that the number of children who have a BMI in the healthy range is increasing. Progress, however, is not occurring at the rate of a 1% increase per year.
Increase the percentage of Sarasota County adults who meet the daily physical activity recommendations from 50.2% to 55%.	Adults who meet moderate physical activity recommendations (overall)	50.2% 2013 FL CHARTS (County Health Profile- Behavioral Risk Factors)	55%		Data shows that the trend is increasing. From 2002 to 2007, there was an increase from 36.9% to 43.6% of adults who meet moderate physical activity. 6.7% in 5 years; 1.34% per year.

* 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: Access to Healthcare

Access to quality healthcare plays a major role in population health. Factors such as high costs and lack of insurance coverage are primary barriers. Inaccessibility to healthcare can lead to unmet health needs, the inability to receive preventative services, and avoidable hospitalization. In order to ensure that everyone within a community can reach their full potential, access to quality healthcare is necessary.

According to the 2011 National Healthcare Quality Report, whether or not one has health insurance is a contributing factor to poor quality of life. Uninsured populations are more likely to suffer from chronic diseases related to healthy weight, cancer, and dental care due to inaccessible preventative health care services. As such, access to healthcare was listed as the second priority health issue by survey participants to be addressed in the CHIP.

Goal: Increase access to quality health care

Strategy: Collaborate and engage with key community stakeholders and agencies to decrease the percentage of uninsured adults, decrease the percentage of adults unable to access needed medical services, and to decrease the percentage of adults with unmet dental care needs.

Key Partners: Health Planning Council, Sarasota Memorial Health Care System, Friendship Centers, Lake Erie College of Osteopathic Medicine (LECOM) Dental School

Why this is important to our community:

Access to healthcare is important because it contributes to the vitality of our community. Increased access to healthcare leads to reduced burdens of health disparities among particular populations and can increase the quality of life of Sarasota County residents. Thus in order to ensure that all Sarasota County residents have access to quality and equitable healthcare, the following are our objectives: decrease the percentage of the uninsured adults, decrease inaccessibility of medical services among adults and to decrease the percentage of unmet dental needs.

Objective	Indicator	Current Level (most recent data available)	Target	Status	Progress Notes
Decrease the percentage of low-income adults who could not access dental services due to cost from 41.1% to 39.1%.	Adults who could not see a dentist in the past year due to cost, by annual income (<\$25,000)	41.1% 2007 FL CHARTS	39.05%		A grant with the Friendship Centers has expanded access to adult dental care. Additionally, DOH-Sarasota continues to promote low-cost services through LECOM Dental School.
Reduce the number of emergency room visits for adult dental related services from 1,461 to 731.	Emergency room visits for adult dental related services	1,461 ESSENCE 2015	731		A grant with the Friendship Centers has expanded access to adult dental care. Additionally, DOH-Sarasota provides emergency dental services for adults.
Increase the number of youth in Sarasota County with access to dental services from 7,000 to 7,200.	Patients at DOH in Sarasota County	7,000 DOH Sarasota	7,200		DOH-Sarasota continues to promote Project Christmas Smiles and provide education about preventative dental services through Head Start and Children First. A child sealant program was also implemented in the Sarasota County school district.
Increase the percentage of low-income adults who had a medical checkup in the past year from 57.9% to 60.8%.	Adults who had a medical checkup in the past year (by income <\$25,000)	57.9% 2013 FL CHARTS	60.8%		No consistent upward or downward trend among those with income <\$25,000. Compared to 2007, there has been a 3.7% decrease among this population. The overall

					percentage was 72.2%.
Decrease the percentage of low-income adults who could not see a doctor at least once in the past year from 43.9% to 41.7%.	Adults who could not see a doctor at least once in the past year due to cost	43.9% Enroll America	41.7%		A GIS map was created to determine where health access points are located for medically underserved areas.
Continue primary care services funded under the Affordable Care Act Community and Primary Services grant as evidenced by a transition team.	Team List	Team Established DOH-Sarasota	Regular meeting of team		The FQHC Transition Team met monthly in 2016.
Increase the percentage of adults with any type of health insurance coverage from 80.3% to 84.3%.	Adults with any type of health insurance coverage, overall	80.3% Enroll America	84.3%		In 2015, 15% of the county was uninsured. 2016 estimates reflect that the rate has dropped. At the end of 2016, uninsured rates were between 5-10%. In 2016, 475 individuals were enrolled through the Marketplace, 66 of whom were previously uninsured.
Reduce the 3-year rolling average of black infant death rate from 7.2 to 4.2 per 1,000.	Infant death rate	9.0 2012-2014 FL CHARTS	4.6		Healthy Start coordinated the Save my Life Program. Additionally, DOH-Sarasota completed Phase I of Florida Healthy Babies and the Prematurity Prevention Team met.
Reduce low birthweight among black babies born in Sarasota County from 15.1% to 7.55%.	Live births under 2500 grams (low birth weight), single year rates	15.1 2014 FL CHARTS	7.55%		Through the Safe Children's Coalition Safe Sleep program, pack n' plays were provided to mothers, along with Safe Sleep classes. The number of Safe Sleep trained facilities in Sarasota County increased, in addition to 190 trained nurses at Sarasota Memorial. Human

					Services funding was aligned with the Healthy Start Coalition Save My Life Program. Additionally, the Infant Mortality Data Assessment was completed in April and an action plan for addressing maternal and infant health disparities was developed.
Increase percentage of WIC infants who are breastfed through six months of age by 10%.	FDOT- Sarasota WIC % of infants breastfed for 26 weeks	38.1% WIC- FDOH	45.2%		From 2015 to 2016, there was a 2.9% increase from 35.2% to 38.1%. The community worked together to train more than 20 certified lactation consultants. Additionally, peer support groups were established.

* 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: Behavioral Health: Mental Health & Substance Abuse

Mental health is critical to maintaining good overall health, sustaining relationships, and the ability to contribute to society. Poor mental health can lead to depression, anxiety, and loss of productivity. There is a strong link between mental and physical health. To improve mental health, access to appropriate mental health services is key. Substance abuse is devastating to individuals, families, friends, coworkers, and entire communities. The impact of substance abuse is long lasting and can lead to chronic disease, domestic violence, motor vehicle crashes, crime, homicide, and suicide.

As a result of the data collected for the 2015 Community Health Assessment, mental health and substance abuse among Sarasota County residents was determined to be a key priority health issue to focus on. The primary objective of this CHIP domain is to improve access to mental health services and reduce substance abuse.

Goal: Improve mental health and decrease substance abuse rates among adults and youth in Sarasota County.

Strategy: Support strategic efforts of community partners and agencies working to improve access to mental health services among adults, develop a program to decrease heavy or binge drinking, support the efforts of Drug Free Sarasota to create Underage Drinking PSAs and Town Halls and the Safe Rx Drop Box Campaign, promote the activities of the Family Safety Alliance, increase the number of active D- Fy participants, and decrease tobacco use through Students Working Against Tobacco (SWAT) involvement and tobacco free policies.

Key Partners: Coastal Behavioral Healthcare, Inc., Drug Free Sarasota, Behavioral Health Stakeholders Consortium and its subcommittee the Behavioral Health Strategic Planning Workgroup, Drug Free Youth (D-Fy), First Step of Sarasota, Sarasota Memorial Hospital, Sarasota County Government, Local Businesses

Why this is important to our community:					
Behavioral health is important to our community because it directly impacts quality of life. Increased access to affordable, high quality mental health care can reduce the burden of disease and lessen substance abuse and addiction. Therefore, the objectives are to: improve access to mental health services, decrease the percentage of adults and youth who engage in binge drinking and illicit drug use, decrease the amount of youth removed from the home due to substance abuse, and decrease the percentage of current tobacco users.					
Mental Health					
Objective	Indicator	Current Level (most recent data available)	Target	Status	Explanation of Status
Decrease the number of unhealthy mental health days in the past 30 days among low-income adults from 7.0 to 5.5 days.	Average number of the unhealthy mental health days in the past 30 days for adults with an income less than \$25,000	7.0 2013 FL CHARTS	5.5		Sarasota County Health & Human Services completed the Behavioral Health Acute Care System Data Review in 2016.
Substance Abuse					
Decrease the percentage of adults who engage in heavy or binge drinking from 21.9% to 20.8%.	Adults who engage in heavy or binge drinking	21.9% 2013 FL CHARTS	20.8%		Planning has begun for an education campaign for service industry.
Decrease the percentage of youth who engage in heavy or binge drinking from 13.5% to 12.15%.	Youth who reported engaging in binge drinking	13.5% 2014 Florida Youth Substance Abuse Survey	11.77%		From 2006 to 2010, there has been a decrease in binge drinking among youth from 25.1% to 13.5%. Although the trend is decreasing compared to neighboring and larger counties, Sarasota is ranked high.
Decrease the percentage of youth who have reported using alcohol in their lifetime from 46.7% to 42.03%.	Percentage of Sarasota school youth who reported having used alcohol in their lifetime and past 30 days	46.7% 2014 Florida Youth Substance Abuse Survey	42.03%		The percentage of teens reporting using alcohol in their lifetime has decreased from 2006-2012 (68.6% to 46.7%). Drug free Sarasota hosted Underage Drinking Town Halls and PSAs.

Decrease the number of youth removed from homes due to substance abuse from 171 to 139.	Children removed from the home	171 DCF (Florida Safe Families Network)	85.5		The data shows that there has been an increase in the number of children removed from the home due to substance abuse from 2015 to 2016. The number has increased by 62.
Decrease the percentage of youth who reported engaging in illicit drug use from 24.4% to 21.96%.	Youth who engage in illicit drug use in the past 30 days	24.4% 2014 Florida Youth Substance Abuse Survey	21.96%		There has been a 4.8% decrease in the percentage of youth reporting that they've engaged in illicit drug use from 2006-2012, decreasing from 23.3% to 18.5%. Active D-Fy members have increased by 450 in Sarasota County from 2015 to 2016.
Increase the pounds of expired/unused prescription medication from 2,926.25 to 3,804.12 disposed of through the Safe Rx Drop Box Campaign.	Pounds of expired/unused prescription medication YTD	2,926.25 lbs. Drug Free Sarasota (11/2015)	3804.12		The target was surpassed; in 2016, 4,743 lbs. of prescription medication were collected.
Decrease the number of NAS (Neonatal Abstinence Syndrome) diagnosed babies at Sarasota Memorial Hospital from 98 to 78.	Infants diagnosed with NAS	98 Sarasota Memorial Hospital	78		In 2016, there were 19 Clean Start presentations with an audience of 193. The Action Plan for Florida Healthy Babies 2017 includes Clean Start.
Decrease the percentage of youth who reported using any form of tobacco on one or more days in the past 30 days from 13.5% to 11.8%.	Percentage of youth who reported using any form of tobacco on one or more days in the past 30 days	13.5% 2014 Florida Youth Substance Abuse Survey	11.8%		There has been a downward trend in the percentage of youth using any form of tobacco from 2008 to 2014.

Decrease the percentage of adults who are current smokers from 18.4% to 17.4%.	Adults who are current tobacco smokers	18.% 2013 FL CHARTS	17.4%		The percentage of current adult smokers has decreased from 2002 to 2013, from 19.6% to 18.4%.
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Revisions

Through the ongoing collaborative partnership with community agencies, revisions to the 2015-2018 Community Health Improvement Plan (CHIP) were made in January 2017. Priority areas and goals did not change. Much of the revisions to be made to the CHIP will be based on the following parameters:

- Availability of data to monitor progress – performance measures that had county-level data available were preferred, etc.
- Availability of resources
- Community readiness
- Evident progress
- Alignment of goals

As a result of the feedback received at the Community Health Improvement Plan Leadership Council 2016 Annual Meeting in January 2017, further revisions will be made to the 2015-2018 CHIP:

- The CHIP Leadership Council agreed that the 2017 CHIP should list less activities and instead tighten the focus on more high impact actions.
- It was decided to include health disparities throughout the Plan.
- The Council discussed focusing on opioid addiction and overdose in the 2017 CHIP, as rates in the County have increased.
- Objective B, in the Mental Health section of the CHIP, will be removed and rewritten in 2017 to better reflect mental health service utilization among homeless adults.
- In the Substance Abuse section of the Behavioral Health priority area, objective D will be revised to reflect updated, accurate information. The baseline number from 2015 is 171, instead of 278. As such, the 5-year target for the number of children removed from the home due to substance abuse will be updated to 86 to reflect a 50% improvement, instead of 139.

Accomplishments

Priority health areas on which Sarasota County has made strides include Access to Healthcare and Behavioral Health, specifically indicators of increasing the percentage of insured adults and increasing the pounds of expired or unused prescription medication disposed of through the Safe Rx Drop Box Campaign.

Access to Healthcare

Access to healthcare is critical to achieve health equity and quality of life. According to Healthy People 2020, timely, comprehensive access to healthcare can prevent disease, detect and treat health conditions, and increase life expectancy. Individuals who do not have health insurance are more likely to die early, have poor overall health, and are less likely to receive medical attention. By increasing the number of Sarasota County adults who are insured through the Affordable Care Act, quality of life and productivity will be higher for the community as a whole.

Sarasota County was successful in achieving the goal of increasing the percentage of insured adults through the activities of the Outreach and Enrollment Specialists and various community partners. The dedicated Outreach and Enrollment Specialists enrolled 475 Sarasota County adults in the Affordable Care Act, 66 of whom were previously uninsured. Through enrollment events and community engagement, the uninsured rate in Sarasota County has dropped between five and ten percent from 2015 to 2016.

Accessibility and availability of the Outreach & Enrollment Specialists in north and south county helped to educate residents and increase awareness about the Affordable Care Act and the Health Insurance Marketplace. As a result, more adults in Sarasota County signed up for health insurance in 2016 than in 2015.

Substance Abuse

Substance abuse can have serious consequences, including addiction, memory loss, kidney and liver damage, cancer, stroke, cardiovascular disease, and death. According to the National Institute on Drug Abuse, the most commonly abused classes of prescription drugs are opioids, depressants, and stimulants. The abuse of prescription drugs can be harmful to the health and safety of a population. Therefore, reducing the risk of prescription drug abuse is paramount to the health of Sarasota County residents.

Sarasota County has been successful in increasing the pounds of unused and/or expired prescription medication disposal through the Safe Rx Drop Box Campaign. Through the efforts of Drug Free Sarasota, several drop boxes throughout the county were used to collect 4,743 pounds of prescription medication. Much of the success in this effort is attributable to a collaborative effort with Drug Free Sarasota to promote disposal campaigns year-round.

Goal	Objective	Accomplishment
1. Increase the percentage of insured adults in Sarasota County.	Increase the percentage of adults with any type of health insurance coverage from 80.3% to 84.3%.	In 2015, 15% of Sarasota County was uninsured. Estimates for 2016 reflect that the rate has dropped. At the close of 2016, uninsured rates for the county were between 5-10%. In 2016, 475 individuals were enrolled through the Affordable Care Act, 66 of whom were previously uninsured.
How it's important for our community: Access to healthcare is very important to Sarasota County, as residents reported it as a major concern in Community Health Assessment. As a result of collaboration between the various government agencies and community agencies, Sarasota County is making strides towards increasing health insurance coverage among adults.		
2. Reduce the percentage/ numbers of youth who reported engaging in illicit drug use.	Increase the pound of expired/unused prescription medication from 2,936.25 to 3804.12 pounds disposed of through the Safe Rx Drop Box Campaign.	There were over 4,743 pounds of prescription medicines collected in 2016. The goal was surpassed by almost one thousand pounds.
How it's important for our community: Illicit drug use is also an important issue to Sarasota County residents. As a result of the perceived importance of the issue, agencies such as Drug Free Sarasota have collaborated with the Department of Health to combat the problem. Overall, Sarasota County has experienced a decrease in the amount of residents using illicit drugs.		

Conclusion

The Community Health Improvement Plan serves as a guide to assist in the implementation of strategies to address key health issues within Sarasota County. Sarasota County's commitment to extensive community engagement and collaboration ensure that community input is sought to identify priority health issues. As our local health department commences the 2017 Community Health Improvement Plan, the same attention will be given to ensure that community partners are engaged throughout the process in a collaborative approach to improving the health and well-being of Sarasota County residents.

Every effort will be made to keep partners informed of the status of any progress made through implemented strategic efforts toward improved health through Annual CHIP Reviews.

Great achievements in public health are made through multi-sector collaborative approaches among community agencies with an investment in the well-being of its residents. Through continued collaborative processes, significant positive impacts can be made on our community's health. The goals of the CHIP align with the mission of DOH-Sarasota, as well as the Strategic Plan of the agency, to protect, promote and improve the health of its residents.

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CHIP Leadership Council Meeting
January 27, 2017, 12:00-2:00 pm
2200 Ringling Boulevard, Room 2063
Sarasota, FL 34237

Agenda

- **Welcome-** Melanie Grafals 35 minutes
 - Introductions
 - Community Health Assessment Plan & History- Beth Kregenow
 - Overview
 - CHIP Leadership Council Commitment Letter
 - Frequency of CHIP Leadership Council Meetings

- **Community Health Action Teams (CHATs)-** CHAT Chairs 25 minutes
 - North Port- Sam George
 - Highlights and accomplishments
 - Laurel, Osprey, Venice, Nokomis (LOVN)- Tom Gosler
 - Highlights and accomplishments
 - Englewood- Laurie Tellier
 - Highlights and accomplishments
 - Newtown- Wendy White
 - Highlights and accomplishments

- **2016 CHIP Progress-** Melanie Grafals 30 minutes
 - Healthy Weight
 - Access to Care
 - Behavioral Health and Substance Abuse

- **Next Steps-** Beth Kregenow 10 minutes
 - Annual Report
 - Additions and Revisions
 - 2017 CHIP
 - Quarter 1 Report in April

- **Community of Health Announcements-** All 10 minutes
 - Feedback and Input

- **Meeting Evaluation-** All 5 minutes

- **Actions and Adjournment-** Melanie 5 minutes

Meeting Summary Notes

Attendees:

Ken Alexander- **Bayside Center for Behavioral Health**; Kameroon Boykins- **Drug Free Sarasota**; Nancy DeLoach- **Health and Human Services**; Ormond Derrick- **Multicultural Health Institute**; Sam George- **North Port CHAT**; Tom Gosler- **LOVN CHAT**; Shawn Halls- **Sarasota Memorial Healthcare Services**; Charles Henry-**Florida Department of Health in Sarasota County**; Janet Kahn-**Early Learning Coalition**; Andrea King- **Sarasota County Parks & Recreation**; Toni Rosier- **Manatee Rural Healthcare**; Laurie Tellier- **Englewood CHAT**; Rosa Valenzuela- **Friendship Centers**; Rick Ver Helst- **Coastal Behavioral Centers**; Amber Ward- **UF/IFAS Extension Offices**; Wendy White- **Newtown CHAT**

Staff: Melanie Grafals and Beth Kregenow

Topic	Lead	Discussion
<p>Welcome</p> <ul style="list-style-type: none"> • Introductions • Overview • Commitment Letter 	<p>Melanie Grafals</p>	<p>All meeting attendees were provided with the opportunity to introduce themselves, their respective organizations, and their past experiences with the CHIP Leadership Council. Melanie provided a brief overview of the meeting and asked for attendees to sign and return the Commitment Letter. The group discussed the frequency of CHIP Leadership Council meetings and decided to meet at least twice per year, with quarterly report updates via email between meetings.</p>
<p>Community Health Action Teams (CHATs)</p>	<p>CHAT Chairs</p>	<p>CHAT Chairs introduced themselves and provided a brief summary of their CHAT's accomplishments and highlights:</p> <p>Sam George, North Port CHAT</p> <ul style="list-style-type: none"> • Sam discussed the potential for a medical village in North Port. • North Port focus: PACE program (Program of All-Inclusive Care for the Elderly) expansion to Sarasota County. A representative from PACE in Charlotte County will speak to the CHAT in the coming months. • North Port accomplishments: Creation of D-FY (Drug Free Youth). <p>Tom Gosler, LOVN CHAT</p> <ul style="list-style-type: none"> • Tom explained how he became involved in the CHAT. • LOVN accomplishments: Home Safety Videos, Community Health Walks, Farmer's Market events, seminars and presentations for various health topics, Cyclovias, creating community resource guides.

		<ul style="list-style-type: none"> • LOVN challenges: maintaining participation from the community. <p>Laurie Tellier, Englewood CHAT</p> <ul style="list-style-type: none"> • Laurie discussed her background and qualifications as a nurse in maternal and child health. • Englewood accomplishments: created a video on the health and human service needs in the community, Englewood Community Resources Directory, helped support Dollars for Mammograms program in partnership with Englewood Community Hospital. • Englewood challenges: many health services are county-driven. Englewood is not a town- it is a place separated by county lines. <p>Wendy White, Newtown CHAT</p> <ul style="list-style-type: none"> • Wendy discussed her background as a nurse and founder of the West Coast Lupus Foundation. • Newtown accomplishments: gardening projects with IFAS, Newtown Neighborhood Walks, resource guides, produced a play communicating an anti-tobacco message. • Wendy would like to CHATs to focus on health issues that affect the Newtown community, specifically lupus, hypertension, diabetes, and heart disease. <p>The Leadership Council discussed ways to increase and sustain participation in the CHATs.</p> <ul style="list-style-type: none"> • Sam George suggested that subcommittees could be a good way to keep an array of people engaged, all while working to improve the outcomes in the 3 CHIP priority areas. • A member suggested promoting CHATs on social media to help disseminate information. • A recommendation was made to invite government officers, such as city commissioners and police, to attend and report on relevant issues.
CHIP History	Beth Kregenow	Beth provided the Leadership Council with the historical context of the Partnership efforts to improve the health of Sarasota County residents. Lastly, Beth discussed the 2015 Community Health Assessment, which guides the current CHIP.
2016 CHIP <ul style="list-style-type: none"> ▪ Review priority health areas ▪ Discuss Proposed Goals, Objectives, & Indicators 	Melanie Grafals	Melanie presented the progress made to the CHIP in 2016 in each of the three priority areas. Suggestions and feedback were obtained from the group in the following areas: <p>Priority Health Area 1: Healthy Weight Goal 1: Increase the percentage of Sarasota County residents at a healthy weight Objectives A, B, and C</p>

		<ul style="list-style-type: none"> Recommendation: Sheriff's Athletic League (SAL) could help encourage active living and promote physical activity. The sheriff's departments should be contacted. <p>Priority Health Area 2: Access to Healthcare Goal 4: Reduce Infant Mortality Rates Objectives A, B, and C</p> <ul style="list-style-type: none"> Recommendation: Instead of only using WIC data, Healthy Start and hospital data should be included in the analysis, when available. This will help to broaden the scope and give a more complete picture of infant health in the county. <p>Objective B:</p> <ul style="list-style-type: none"> Recommendation: Fathers should be included in programs that promote healthy babies. In order to build healthy communities, fathers need to receive encouragement, education, and resources. It cannot only be aimed solely at mothers. <ul style="list-style-type: none"> Melanie will research existing programs and report in quarterly email. <p>Priority Health Area 3: Behavioral Health (Mental Health & Substance Abuse) Mental Health Goal 1: Improve access to mental health services Objective A:</p> <ul style="list-style-type: none"> Recommendation: Moving forward, there should be specification as to what constitutes an "unhealthy mental health day." Recommendation: Behavioral Health Acute Care System Data Review should be shared with the community, specifically within the CHATs. <p>Objective B:</p> <ul style="list-style-type: none"> This objective will be removed and Melanie will work with Nancy DeLoach to set appropriate goals for 2017 using the Point in Time Survey and community outcome targets.
Next Steps	Beth Kregenow	Beth reported that the next step is to produce the Annual Report, which will include the revisions discussed. Additionally, there will be a Quarter 1 Report of the 2017 CHIP in April.
Community of Health Announcements	All	Beth asked the Council if anyone else should be included in the next meeting who was not represented today. The group offered recommendations: <ul style="list-style-type: none"> 211 of Sarasota County State Commissioners and/or county leaders Medical Society of Sarasota County Dentists
Meeting Evaluation, Actions and Adjournment	All	<ul style="list-style-type: none"> The group agreed that it was a productive meeting. Melanie asked if anyone was opposed to sharing contact information with all attendees. All agreed. Melanie will send it along with meeting minutes.

CHIP Leadership Council

2016 Annual Review

Attendance Sheet

January 27, 2017

12:00-2:00pm

Room 226

2200 Ringling Blvd. Sarasota, FL

Name- if not listed, PLEASE PRINT	Representing	Please Initial	If you are here representing someone from your organization, please print your name.
Ken Alexander	Bayside Center for Behavioral Health	KA	
Kathy Black	Age Friendly Sarasota		
Kameron Boykins	Drug Free Sarasota/First Step	KB	
Bryan Dailey	UF/IFAS Extension Office		
Nancy DeLoach	Health and Human Services	ND	
Ormond Derrick	Multicultural Health Institute	OD	
Suzanne Dubose	Sarasota County Schools Health Services		
Rowena Elliott	Newtown Redevelopment Office		
Sam George	North Port CHAT	SG	
Tom Gosler	LOVN CHAT	TG	
Shawn Halls	Sarasota Memorial Healthcare Services	SH	
Beth Harrison	Englewood Community Clinic		
Charles Henry	DOH Sarasota	CH	

Name- if not listed, PLEASE PRINT	Representing	Please Initial	If you are here representing someone from your organization, please print your name.
Bob Hite	Venice Regional Bayfront Health		
Kameron Hodgins	Glasser Schoenbaum Health & Human Services		
Janet Kahn	Early Learning Coalition/Child Care Connection	<i>JK</i>	
Sarabeth Kalajian	Sarasota County Library Systems		
Andrea King	Sarasota County Parks & Recreation	<i>AK</i>	
John Livingston	All Faiths Food Bank		
Erin McLeod	Friendship Centers		
Lisa Merritt, MD	Multicultural Health Institute		
Jack Minge	Coastal Behavioral Health Centers		
Toni Rosier	Manatee Rural Healthcare	<i>TR</i>	
Valerie Powell-Stafford	Englewood Community Clinic		
Kathryn Shea	The Florida Center for Early Childhood		
Linda Stone, PhD	Community Health Centers of Sarasota County		
Laurie Tellier	Englewood CHAT	<i>LT</i>	
Rosa Valenzuela	Friendship Centers	<i>RV</i>	<i>Erin McLeod</i>
Rick Ver Helst	Coastal Behavioral Centers	<i>RVH</i>	
Amber Ward	UF/IFAS Extension Offices	<i>AW</i>	<i>Abeyta Daloy</i>
Wendy White	Newtown CHAT	<i>WW</i>	

Comprehensive List of Community Partners

Charter Seat	Name	Organization/Agency
1. Healthcare Representative	Shawn Halls	Sarasota Memorial Healthcare Systems
2. Healthcare Representative	Beth Harrison	Englewood Community Clinic
3. Healthcare Representative	Valerie Powell-Stafford	Englewood Community Hospital
4. Healthcare Representative	Bob Hite	Venice Regional Bayfront Health
5. Healthcare Representative	Lisa Merritt, MD	Multicultural Health Institute
6. Healthcare Representative	Toni Rosier	Manatee Rural Healthcare
7. Healthcare Representative	Linda Stone, PhD	Community Health Centers of Sarasota County
8. CHAT representative	(Edwina) Wendy White	Newtown CHAT/ West Coast Florida Lupus Foundation
9. CHAT representative	Sam George	North Port CHAT
10. CHAT representative	Laurie Tellier	Englewood CHAT
11. CHAT representative	Tom Gosler	LOVN CHAT
12. City/County Government	Charles Henry	DOH Sarasota
13. City/County Government	Andrea King	Sarasota County Parks and Recreation
14. City/County Government	Sarabeth Kalajian	Sarasota County Library Systems
15. City/County Government	Rowena Elliott	Newtown Redevelopment Office
16. City/County Government	Nancy DeLoach	Health and Human Services
17. City/County Government	Kameron Hedges	Glasser Schoenbaum Health and Human Services Center
18. Behavioral Health (Mental Health)	Jack Minge	Coastal Behavioral Health Centers
19. Behavioral Health (Mental Health)	Ken Alexander	Bayside Center for Behavioral Health
20. Behavioral Health (Substance Abuse)	Kameron Boykins	Drug Free Sarasota Coalition/First Step
21. Community Partners (Education)	Janet Kahn	Early Learning Coalition/Child Care Connection
22. Community Partners	Bryan Dailey	UF/IFAS Extension Offices
23. Community Partners	Erin McLeod	Friendships Centers
24. Community Partner	Kathy Black	Patterson Foundation - Age Friendly Sarasota Initiative
25. Community Partner (Education)	Suzanne Dubose	Sarasota County Schools (Health Services)
26. Community Partner	Kathryn Shea	The Florida Center for Early Childhood
27. Community Partner	John Livingston	All Faiths Food Bank