OKALOOSA COUNTY Community Health Improvement Plan

2022-2027



Letter to the Community

The Florida Department of Health in Okaloosa County (DOH-Okaloosa) is pleased to present the 2022-2027 Community Health Improvement Plan (CHIP) in collaboration with the Okaloosa County Health Improvement Partnership (OCHIP). This report is built from the foundation set by the Community Health Assessment (CHA). The CHIP follows a strategic methodology to address the identified health priorities in the CHA by aligning our goals with those of our community partners, medical providers, and local government agencies.

The findings from the CHA were presented at the Okaloosa Health Summit and led to the selection of the top four priority areas that Okaloosans wish to address. The highest ranked issues became the OCHIP groups that will function during the new CHIP cycle:

- Healthy Behaviors
- Healthy Children
- Healthy Communities
- Healthy Moms & Babies

Each OCHIP group works through a collaborative process to develop the goals, objectives, and strategies that will address their priority health issues. These issues include topics such as nicotine use, youth exposure to substance use, pedestrian safety, high rent cost burden, and infant mortality. The OCHIP groups will implement evidence-based strategies to achieve measurable improvement in each of the priority areas over the next three to five years. Their progress will be tracked and reviewed annually to ensure they continue to reflect the needs of the community.

DOH-Okaloosa is committed to working alongside our partners to improve the wellness, health, and quality of life for Okaloosa County residents and visitors. We would like to thank our community members and leaders for their contribution to this communitydriven plan.

Sincerely,

Elizabeth "Beth" Smith, MSN, RN Health Officer

Elizabet Smith



2022-2027 Okaloosa County Community Health Improvement Plan

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Introduction & Methodology

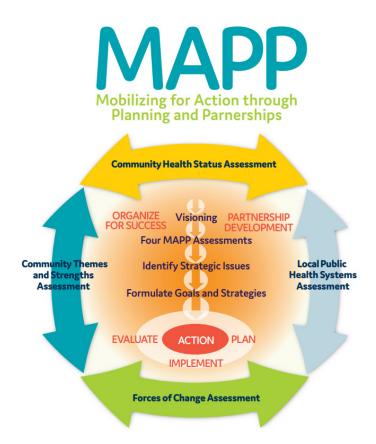
This is the 2022-2027 Okaloosa County Community Health Improvement Plan (CHIP). The activities and collaborative efforts of the Florida Department of Health in Okaloosa County (DOH-Okaloosa) and community partners are reflected within the plan. This document serves as an overview of the strategies that were developed by members of the Okaloosa County Health Improvement Partnership (OCHIP). While the CHIP is a community-driven and collectively owned health improvement plan, the Florida Department of Health in Okaloosa County is charged with providing administrative support, tracking and collecting data, and preparing the plan.

Community Health Assessment Process

In 2020, DOH-Okaloosa began the Community Health Assesment (CHA) process. To develop the document, we used the Mobilizing for Action through Planning and Partnerships (MAPP) model. According to the National Association of County and

City Health Officials (NACCHO), MAPP is "a community-driven strategic planning process for improving community health. Facilitated by public health leaders, this framework helps communities apply strategic thinking to prioritize public health issues and identify resources to address them.¹ MAPP is not an agencyfocused assessment process; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems." The MAPP model is made up of four assessments that help identify public health issues in our community (see page 7 for an overview of the assessment results).

Complete details and additional data collected for each assessment can be requested by emailing the DOH-Okaloosa Community Health Improvement Planning staff at HealthyOkaloosa@FLHealth.gov.



After the MAPP assessments were completed in December 2021, DOH-Okaloosa created the 2022 CHA document in partnership with the CHA Leadership Team and Internal Core Support Team. The CHA was then edited by various community partners. Afterward, the document was reviewed by the public and feedback was given via survey. The responses provided by the community shaped the final CHA document.

Health Issue Prioritization Process

It would be impossible to tackle all health issues mentioned in the CHA at the same time

and attain measurable improvement. Addressing a small number of health issues in a coordinated, rigorous manner is more effective than uncoordinated efforts aimed at multiple problems. Identifying a few priorities allows our community to concentrate limited resources to achieve the greatest impact on key issues. The CHA Leadership Team and Internal Core Support Team received a detailed presentation on the 2022 Okaloosa County CHA draft. The criteria for consideration included the magnitude of the problem and existence of health disparities. Following this, participants completed a survey via SurveyMonkey to select the top health issue(s) they felt were most important based on the data. These health issues were reviewed by the CHA Leadership Team and categorized into focus areas which include: Healthy Moms & Babies, Healthy Children, Healthy Adults, Healthy Behaviors, Healthy Places, and Healthy Communities.

OCHIP Group Formation

On September 8, 2022, DOH-Okaloosa hosted the Okaloosa Health Summit. The Summit served to launch the 2022 CHA and form the Okaloosa County Health Improvement Partnership (OCHIP), which houses the groups that work to implement the CHIP. More than 80 attendees tuned in across three in-person locations throughout the county and virtually via Microsoft Teams. Members of DOH-Okaloosa senior leadership met at Crosspoint Church, where they were broadcasted via livestream to the other meeting locations. Health Officer Beth Smith welcomed attendees and provided an overview of the CHA. Presenters also explained the MAPP process, reviewed the importance of understanding the social determinants of health when addressing issues, and highlighted the key successes from the 2018-2022 CHIP groups.

After learning about the CHA findings, attendees voted via SurveyMonkey to select their top four priority areas by ranking options from greatest (1) to least (6) importance. Attendees selected Healthy Behaviors, Healthy Children, Healthy Communities, and Healthy Moms & Babies as the most important issues to address during the new CHIP cycle. These priority areas were then announced as the newly formed OCHIP groups.

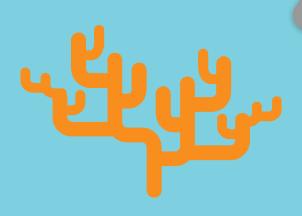
Attendees then moved into breakout sessions to elect OCHIP Champions. These members serve as leaders for the group and are charged with keeping the group on track. Attendees also engaged in open discussion to assess existing community resources, determine what work is already being done in each area, and prioritize the importance of unaddressed issues related to their chosen OCHIP group priority.

Development of Goals, Objectives, and Strategies

On September 27, 2022, DOH-Okaloosa hosted the first OCHIP meeting, where attendees formulated the goals, objectives, and strategies for each OCHIP group. After the meeting, a DOH-Okaloosa Community Health Improvement Planning staff member formulated the objectives to include measurable indicators that are achievable based on the National Center for Health Statistics trend analysis tool.

The next OCHIP meeting was held on November 14, 2022. At this meeting, members of each OCHIP group reviewed and finalized their goals, objectives, and strategies. They also evaluated existing evidence-based practices, including policy recommendations and their projected impacts. Before concluding the meeting, attendees discussed which key organizations were absent and made plans to engage these stakeholders.

MAPP Assessments



Forces of Change Conducted: September 8, 2021

Forces (Trends, Events, Factors)	Opportunities	Threats
	Political	
 Governmental bodies Funding Changing community leaders 	Increasing focus on substance use and mental health; Local govern- ment engaged in public health; New leadership	No control over budgetary changes; Politics impact public health decisions; Governmental mistrust; Political divide
	Economic	
 Business growth & development Military Employment 	Local growth and development; Military brings high-paying jobs to area; Low unemployment rate	Wealth and wage gaps among residents; Limited professional diversity; Low-paying jobs
	Social	
 Racism & intolerance Faith-based network Educational system Crime Transportation 	Strong faith-based network and educational system; Limited entertainment for youth and adults; Active volunteer networks	Increased crime and violence; Public transportation system disagreements; Limited healthy food options
	Technology	
 Connectivity issues Telehealth Telework Social media 	COVID-19 increased telehealth and telework options; Opportunity to use social media to connect	Certain areas of county have limited Internet access, fewer resources; False information being spread
	Geography & Environme	nt
 Rural areas Population split between North and South Okaloosa Housing & construction Coastal location Global warming 	Tourism and snowbirds bring funding to area; Need for outreach in rural areas; Opportunity to improve way-finding; Need for increased tourist education; Need for sidewalks and/or bicycle lanes	Traffic visibility concerns; Roadway wear and tear and increased traffic from tourism; Increases in crashes and injuries; Coastal location brings weather events (i.e. hurricanes, flooding); Military land coverage reduces housing areas
	Health	
 Disease & illness Substance use COVID-19 Mental health Physical health 	Youth resiliency needed; Need for mental health promotion; Increased awareness of nicotine harms; Beaches and parks provide exercise options	COVID-19; Governmental and medical provider mistrust; Global travel; Substance use; Mental health concerns; Tourist injuries and deaths; Medical care options
	Demographics	
 Aging population Global travel Increasing population Increasing diversity 	Governmental focus on addressing public health concerns; Increasing focus on health equity	Long-term planning needed for aging population; Lack of community re- sources

Community Themes & Strengths

Key Informant Interviews & Focus Groups

Conducted: August 5, 2021 - December 22, 2021

As part of the Community Themes & Strengths Assessment, 12 in-depth interviews and 6 focus groups were conducted. Participants raised issues that mirrored those shared in the Health Survey and Forces of Change Assessment.

Health Survey

Conducted: July 8, 2021 - October 29, 2021

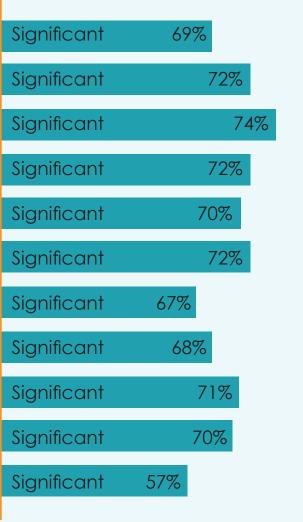
Top Five Health Issues	Top Five Issues Affecting Wellness & Quality of Life	Community Rankings
Mental Health Problems	Lack of Safe, Affordable Housing	45% of residents rated Okaloosa as a healthy
Obesity	Too Many Low Paying, Entry-Level Jobs	community. 83% of Okaloosans are
Drug Overdoses	Lack of Affordable Childcare	satisfied with the quality of life in the county.
COVID-19	Lack of Planning for Needs of Aging/Disabled Populations	59% of residents are satisfied with the health care system in Okaloosa
Motor Vehicle Crash Injuries	Lack of Sidewalks	County.
		82% of residents think
Top Five Environmental Health Problems	Top Five Most Important Risky Behaviors	Okaloosa County is a good place to raise children.
		good place to raise children. 93% of Okaloosans
Health Problems	Behaviors	good place to raise children. 93% of Okaloosans believe there are faith community and church support networks for
Health Problems Flooding/Drainage Problems	BehaviorsStreet Opioids/Fentanyl UseTexting/Cellphone Use	 good place to raise children. 93% of Okaloosans believe there are faith community and church support networks for individuals and families. 69% of Okaloosans are
Health Problems Flooding/Drainage Problems Littering/Illegal Dumping	Behaviors Street Opioids/Fentanyl Use Texting/Cellphone Use While Driving	good place to raise children. 93% of Okaloosans believe there are faith community and church support networks for individuals and families.

Local Public Health System

Average Essential Public Health Service Self-Assessment Scores

Conducted: July 26, 2021 - August 31, 2021

Average Overall Score
Monitor Community Health Status
Diagnose & Investigate Health Problems
Inform, Educate, & Empower Public
Mobilize Community Partnerships
Develop Policies & Plans
Enforce Laws & Regulations
Link People to Health Resources
Assure Competent Health Workforce
Evaluate Health Services
Research Innovative Health Solutions



Strongest Performance

ES 2: Diagnose and Investigate Health Problems and Health Hazards......74% This Essential Public Health Service centers around identifying and monitoring health threats, investigating and responding to public health threats and emergencies, and laboratory support for investigating health threats.

Weakest Performance

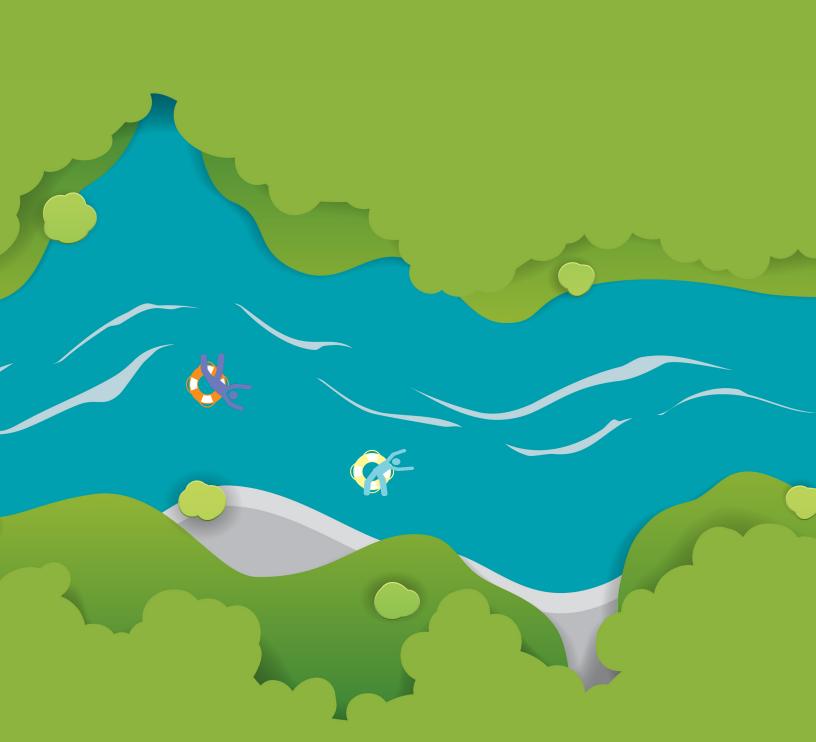
Community Health Status

Conducted: January 4, 2021 - December 27, 2021

Community Health Status Assessment data was collected from a wide variety of sources. Please see the reference list located on page 32 of the 2022 Okaloosa County Community Health Assessment for some of the sources examined.

The Community Health Status Assessment was reviewed by the Okaloosa County Community Health Assessment (CHA) Leadership Team and the DOH-Okaloosa Internal Core Support Team in February 2022. Members were provided a draft of the 2022 CHA document and a survey to record any comments or edits. The comments and edits were then incorporated into the final version of the 2022 CHA. The final data included in the document was determined by DOH-Okaloosa staff members based on the guidance of the teams.

Health Equity



Health Equity

DOH-Okaloosa is committed to addressing the barriers that prevent our community members from reaching optimal health. A focus on health equity means recognizing and eliminating the systematic barriers that have produced disparities in achieving wellness. In July 2022, DOH-Okaloosa published a Health Equity Plan (HEP) to address health disparities in the community. This plan was formulated similarly to the CHIP, by analyzing data and resources, coordinating existing efforts, and establishing collaborative initiatives.

Although Okaloosa ranks among the healthiest counties in Florida for many health outcomes and factors according to County Health Rankings and Roadmaps (2022), there are still persistent disparities that exist. DOH-Okaloosa worked with community partners to identify and review these health disparities. Life expectancy was selected as the prioritized health disparity for the HEP because residents have an average life expectancy of 77 years, compared to the state average of 80 years.³ Life expectancy is higher for women than men, and differences also exist for some racial and ethnic groups.

Differences in life expectancy can also be found based on zip code, as some areas of Okaloosa County have higher life expectancies than others. DOH-Okalosoa prioritized residents of Wright and Ocean City in the HEP because their average life expectancy is the lowest (74 years) in the county.⁴ This area is also home to higher percentages of racial and ethnic minority groups than most other parts of the county, including Black and African American, Hispanic or Latino, and Asian residents.⁴

The plan includes key findings that demonstrate the impact of the social determinants of health, a Health Disparity Objective, and three Social Determinant of Health Projects. As of November 2022, DOH-Okaloosa will incorporate the HEP in the CHIP. The Social Determinant of Health Projects will be included as strategies of the corresponding OCHIP group.

Health Disparity Objective

By December 31, 2025, increase the life expectancy of Okaloosa County residents residing in the Wright and Ocean City areas by six months, from an average of 74.8 to 75.3 years.

Social Determinant of Health Data

Data illustrating the social determinants of health, or drivers of health, can be found starting on page 26 of the HEP. This includes data regarding education access and quality, economic stability, social and community context, neighborhood and built environment, and health care access and quality indicators. Data was provided at the national, state, and county level where applicable, including neighborhoods, zip codes, and Census tracts.



Health Equity Team

DOH-Okaloosa formed the Health Equity Committee on January 13, 2022. This committee serves as the internal Health Equity Team and includes individuals that represent different programs within the Department. This team explores opportunities to improve health equity efforts within the county health department, assesses the current understanding of health equity within their programs, and develops strategies to improve it. The committee meets on the third Thursday of each month.

Name	Title	Program
Emily Tash	Community Health Improvement Planning Branch Director	Community Health Improvement Planning Branch
Lisa Greear	Planning Consultant	Public Health Preparedness
Jessica Durand	Nursing Program Specialist	Ryan White
Meghan Bowman	Nutrition Educator	Women, Infants, and Children
Trisha Dall	Environmental Health Section Chief	Environmental Health
DeeDranae Cole	Biological Scientist III	Epidemiology
Lauren McWilliams	Administrative Assistant III	Workforce Relations
Christy Craig	OPS Health Educator Consultant - Minority Health Liaison	Community Health Improvement Planning Branch
Amanda Colwell	Assistant Director	Office of Health Improvement and Protection
Petra Maddens	Community Health Improvement Section Chief	Community Health Improvement
Lauren Hobbs	OPS Government Operations Consultant II	Community Health Improvement Planning Branch
Cynthia Wirkus	Advanced Practice Registered Nursing Specialist	Medical Services
Nadege Takeh	Environmental Specialist II	Environmental Health
Anamaria Penagos	Health Educator Consultant	Community Health Improvement

Health Equity Task Force

The CHA Leadership Team also served as the Health Equity Task Force. This group includes representatives from various organizations that provide services to address the social determinants of health. This group was utilized for both purposes because of the simultaneous development of the CHA and HEP. Members' expert knowledge, experience, and guidance were essential in the development and review of these documents. Please see page 29 of this plan for a membership list. The team meets at least once per year.

Health Equity Coalition

On June 28, 2022, DOH-Okaloosa and DOH-Walton formed the Okaloosa-Walton Health Equity Coalition. The coalition members developed the following vision statement: to work collaboratively across Okaloosa and Walton Counties to ensure that ALL people have what they need to be healthy. The membership listing can be found in Addendum A of the HEP. The coalition meets bi-annually.

Minority Health Month

DOH-Okaloosa and DOH-Walton also partnered to host the 2022 Health Equity Summit on April 28, 2022. The Summit included a keynote address from Dr. Cynthia Harris, who

educated attendees about important topics in the community ranging from mental health and substance use to housing and infant mortality. DOH-Okaloosa is committed to celebrating Minority Health Month on an annual basis.

Health Disparity Data

DOH-Okaloosa compiled numerous indicators in order to appropriately identify health disparity data. The provided data sought to inform readers about the priority populations designated by the Office of Minority Health and Health Equity, including Black and African American, American Indian and Alaskan Native, Asian, Native Hawiian and Other Pacific Islander, Hispanic and Latino, Elderly (Ages 65+), Infants and Toddlers (0-5 Years), people living with disabilities, veterans, LGBTQ+, immigrants, and any other populations identified through research. This data can be found beginning on page 19 of the HEP.

Social Determinant of Health Projects

Three projects were developed using evidence-based strategies to overcome the identified barriers and improve the social determinants of health that impact life expectancy. Projects included measurable objectives reviewed, edited, and approved to ensure feasibility. These projects have now been incorporated into the priorities set by the OCHIP groups. Please see the table below for more information about project design. Project objectives and story boards can be found on page 50 of the HEP.

Childhood Literacy Project

Literacy is an important skill needed for academic success and general wellbeing.⁵ DOH-Okaloosa partnered with United Way Emerald Coast to extend an existing project. DoorDash will deliver a literacy kit to 100 children in need each month. DOH-Okaloosa extended the project from six-months to one year.

*This project was not included in an OCHIP group because it is in a final implementation phase.

Social Determinants of Health Addressed

Literacy, income

Priority Populations

Preschool students who live in Wright and Ocean City

Responsible Party

United Way Emerald Coast and DOH-Okaloosa

Community Poverty Simulation Project

Significant racial disparities persist for income earnings, with Hispanic or Latino and Black and African American residents earning less than White households and facing greater rent burdens.⁶ To address this, DOH-Okaloosa will partner with a training organization to educate community members and leaders about poverty and the social determinants of health.

Social Determinants of Health Addressed

Employment, income, expenses, health care access

Priority Populations

Those serving the Wright and Ocean City areas

Responsible Party

Cost of Poverty Experience and Healthy Communities OCHIP Group

Born Learning Trail Project

Nearly half of Okaloosa residents live near a park, but many do not get enough exercise.⁷ United Way developed Born Learning Trails to promote physical activity while teaching parents and caregivers to engage with their children while promoting social and emotional learning. DOH-Okaloosa will partner with United Way to build two Born Learning Trails in the Wright and Ocean City areas.

Social Determinants of Health Addressed

Parks, social and community context, literacy

Priority Populations

Wright and Ocean City residents

Responsible Party

United Way Emerald Coast and Healthy Children OCHIP Group

Priority Areas



Healthy Behaviors

According to the Robert Wood Johnson Foundation, "the health of our nation depends upon the health and wellbeing of our children and families" (2022). The members of the Healthy Behaviors OCHIP group know this to be true. The group's priority areas include alcohol and drug use, injury, falls, drowning prevention, and nutrition and physical activity.

Goals, Objectives & Strategies

Goal 1: To reduce the number of adults engaged in nicotine, alcohol, and substance use.

Objective 1.1: By December 31, 2025, decrease the number of people participating in heavy or binge drinking from 18.8% to 17.5%.

- Strategy 1.1.1: Increase education on the health impacts of binge drinking.
- Strategy 1.1.2: Improve reintegration for community members who have experienced life-controlling circumstances.

Objective 1.2: By December 31, 2024, and every year thereafter, reduce the number of EMS responses for drug ingested poisoning.

- Strategy 1.2.1: Increase awareness of fentanyl safety and education.
- Strategy 1.2.2: Improve reintegration for community members who have experienced life-controlling circumstances.

Healthy Behaviors OCHIP Group

Champions

Deb Willis, West Florida Area Health Education Center Kaylee Gallavan, Freedom Life Compass

DOH Representative(s)

Allison McDaniel, Public Information Officer Anamaria Penagos, Health Educator Consultant Christine Syfrett, Biological Scientist III Katherine "Kat" Beedie, Epidemiology Section Chief Mandy Bricker, Health Educator Consultant Petra Maddens, Community Health Improvement Section Chief **Members** Angela Conner, Davis-Watkins Funeral Home Aubrey Robbie, United Way Emerald Coast Denise Manassa, CDAC Behavioral Healthcare Gina Gammick, People Passion Coachina Gloria DeBerry, Community Member Jenna McElyea, Bridgeway Center, Inc.

Kelsi Gulig, Lakeview Center Savannah Cobb, CAN Community Health Solange Arnett, Emerald Coast

Children's Advocacy Center Stephanie Wedel, Freedom Life Compass

Tina Henson, Alzheimer's Association

• Strategy 1.2.3: Assess community needs through GIS mapping.

Objective 1.3: By December 31, 2025, increase the percent of adult current smokers who tried to quit smoking at least once in the past year from 61.9% to 62.5%.

- Strategy 1.3.1: Increase education on the amount of nicotine in products.
- Strategy 1.3.2: Conduct targeted nicotine cessation outreach.

Healthy Behaviors

Healthy Behaviors OCHIP Group Aciton Plan			
Goal 1 To reduce the number of adults engaged in nicotine, alcohol, and substance use.			
Objective 1.1 By December 31, 2025, decrease the number of people participating in heavy or binge drinking from 18.8% to 17.5%.			
Strategy 1.1.1 Increase education on the I	nealth impacts of binge d	rinking.	
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Strategy 1.1.2 Improve reintegration for co life-controlling circumstances.	ommunity members who h	nave experienced	
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Objective 1.2 By December 31, 2024, and responses for drug ingested poisoning.	every year thereafter, rec	duce the number of EMS	
Strategy 1.2.1 Increase awareness of fentanyl safety and education.			
	Notes: Timeline: Person(s) Responsible:		
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Strategy 1.2.2 Improve reintegration for co			
Strategy 1.2.2 Improve reintegration for co life-controlling circumstances.	mmunity members who h	ave experienced	
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Strategy 1.2.2 Improve reintegration for colife-controlling circumstances. Notes: Strategy 1.2.3 Assess community needs thr	mmunity members who h Timeline: Ough GIS mapping.	ave experienced Person(s) Responsible:	
Strategy 1.2.2 Improve reintegration for colife-controlling circumstances. Notes: Strategy 1.2.3 Assess community needs thr	mmunity members who h Timeline: Tough GIS mapping. Timeline:	ave experienced Person(s) Responsible: Person(s) Responsible: Current smokers who	

Healthy Behaviors OCHIP Group Aciton Plan (Continued)		
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Strategy 1.3.2 Conduct targeted	nicating cossistion outroach	
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Notes: Timeline: Person(s) Responsible:		

Healthy Children

Like the National Alliance for Drug Endangered Children, members of the Healthy Children OCHIP group believe that "children and families deserve a community free from the negative impact of substance misuse and drug activity" (2022). The group's priority areas include Adverse Childhood Experiences (ACEs), exposure to alcohol and drugs, mental health, childcare cost and availability, resiliency, child abuse, and food insecurity.

Goals, Objectives & Strategies

Goal 1: To reduce the negative impact of substance abuse on children and communities.

Objective 1: By December 31, 2027, decrease the number of Okaloosa County students who report having four or more ACEs from 26.8% to 25.8%.

- Strategy 1: Host community events to raise awareness.
- Strategy 2: Hold Train-the-Trainer event to increase number of National Alliance for Drug Endangered Children instructors.
- Strategy 3: Distribute student survey to assess student exposures and needs.
 - Strategy 4: Increase opportunity for student social engagement and support.

Objective 2: By December 31, 2025, decrease the rate of school environmental safety incidents from 18.6 per 1,000 to 17.8 per 1,000 for K-12 students.

 Strategy 1: Increase awareness of Okaloosa County Sheriff's Office lock-down and lock-out procedures.

Healthy Children OCHIP Group

Champions

Danielle Wilson, Emerald Coast Children's Advocacy Center Sgt. Jessica Trimboli, Okaloosa County Sheriff's Office

DOH Representative(s)

Amanda Colwell, Assistant Director Caitlyn Golding, OPS Government Operations Consultant II Lauren Hobbs, OPS Government Operations Consultant II

Members

Alex Fuller, Beyond Expectations, Inc. Ashley Bailey, Okaloosa County Sheriff's Office Ashton DiPietro, Community Member Beverly Orezzoli, Families First Network Bobbi Lowe, Northwest Florida Health Christopher Duare, Fort Walton Beach Police Department Christina Schneider, Northwest Florida Sate College Dana Crupi, Early Learning Coalition of the Emerald Coast Lt. Demeika McClendon, Okaloosa County Sheriff's Office Diane Fraser, Emerald Coast Science Center Diane Freeman, A Bed4Me Kaitlyn Sanchez, Habitat for Humanity Kathleen Swope, Northwest Florida State College Miriam Pohl, Grace Lutheran Church Destin Ramon Harris, Northwest Florida State College Robert McEachern, Does Your Student Need an Advocate Tami Lawson, Department of Children and Families

- Strategy 2: Hold Train-the-Trainer event to increase the number of partners training on lockdown and lock-out procedures.
- Strategy 3: Coordinate training and promote alert system with non-Okaloosa County School District facilities serving children.

Healthy Children

Goal 2: To reduce food insecurity among Okaloosa children.

Objective 1: By December 31, 2025, increase the number of Okaloosans aware of food distribution services by 100 people.

- Strategy 1: To increase community knowledge and coordination of food distribution services.
- Strategy 2: To determine needs and expand food pantry services within Okaloosa County.

Goal 3: To improve access to healthcare for children.

Objective 1: By December 31, 2025, decrease the percent of overall students who, in the past year, felt sad or hopeless for two or more weeks in a row and stopped doing usual activities from 30.2% to 29.7%.

Objective 2: By December 31, 2025, decrease the percent of female students who, in the past year, felt sad or hopeless for two or more weeks in a row and stopped doing usual activities from 40.3% to 39.6%.

- Strategy 1: Foster student engagement in mental health promotion.
- Strategy 2: Increase awareness of mental health and social health status of young children and adolescents.

Objective 3: By December 31, 2025, increase the number of schools participating in the Florida Heiken from 37 to 41.

• Strategy 1: To increase the number of schools participating in Florida Heiken vision program.

Building on Past Success

The Healthy Children OCHIP group was previously called the Drug Endangered Children and Communities CHIP group. It continues to house the Okaloosa County Alliance for Drug Endangered Children (DEC-C), which is the local branch of the National Alliance for Drug Endangered Children.

During the 2018-2022 CHIP cycle, this group educated hundreds of Okaloosans on how to recognize when children are being exposed to drug environments and what they can do to help.

They also implemented the Handle with Care Policy. This policy is a partnership between the Okaloosa County School District, service providers, and law enforcement. When a child experiences a traumatic event, the law enforcement or other service agency contacts the school district and informs them to "handle the child with care".

The school district then informs that student's teachers and other key staff. No personal details are shared, they are simply told to handle the child with care because behavioral issues often arise after children experience traumatic events.

The group hopes to expand the Handle with Care policy to reach more children during the new CHIP cycle.

Healthy Children

Healthy Children OCHIP Group Aciton Plan			
Goal 1 To reduce the negative impact of substance abuse on children and communities.			
Objective 1.1 By December 31, 2027, decrease the number of Okaloosa County students who report having four or more ACEs from 26.8% to 25.8%.			
Strategy 1.1.1 Host community events to re	aise awareness.		
Notes:	Timeline:	Person(s) Responsible:	
Strategy 1.1.2 Hold Train-the-Trainer event Endangered Children instructors.	to increase number of Nc	ational Alliance for Drug	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 1.1.3 Distribute student survey to a	assess student exposures a	and needs.	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 1.1.4 Increase opportunity for stud	dent social engagement	and support.	
Notes:	Timeline:	Person(s) Responsible:	
Objective 1.2 By December 31, 2025, decincidents from 18.6 per 1,000 to 17.8 per 1,000		nvironmental safety	
Strategy 1.2.2 Increase awareness of Okal out procedures.		ce lock-down and lock-	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 1.2.3 Hold Train-the-Trainer event to increase the number of partners training on lock-down and lock-out procedures.			
Notes:	Timeline:	Person(s) Responsible:	

Healthy Children OCHIP Group Aciton Plan (Continued)			
Strategy 1.2.3 Coordinate training and promote alert system with non-Okaloosa County School District facilities serving children.			
Notes:	Timeline:	Person(s) Responsible:	
Goal 2 To reduce food insecurity among (Dkaloosa children.		
Objective 2.1 By December 31, 2025, incredistribution services by 100 people.	ease the number of Okalo	oosans aware of food	
Strategy 2.1.1 To increase community know vices.	wledge and coordination	of food distribution ser-	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 2.1.2 To determine needs and ex	l Dand food pantry service	s within Okaloosa Coun-	
ty.			
Notes:	Timeline:	Person(s) Responsible:	
Goal 3 To improve access to healthcare for	or children.		
Objective 3.1 By December 31, 2025, decipast year, felt sad or hopeless for two or mo	· · · · · · · · · · · · · · · · · · ·		
ties from 30.2% to 29.7%.			
Objective 3.2 By December 31, 2025, decrease the percent of female students who, in the past year, felt sad or hopeless for two or more weeks in a row and stopped doing usual activi-			
ties from 40.3% to 39.6%. Strategy 3.2.1 Foster student engagement	in mental health promoti	on.	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 3.2.2 Increase awareness of mental health and social health status of young children and adolescents.			
Notes:	Timeline:	Person(s) Responsible:	
Objective 3.3 By December 31, 2025, increase the number of schools participating in the Florida Heiken from 37 to 41.			

Healthy Children OCHIP Group Aciton Plan (Continued)				
Strategy 3.3.1 To increase the number of schools participating in Florida Heiken vision pro- gram.				
Notes:Timeline:Person(s) Responsible:				

Healthy Communities

The Healthy Communities OCHIP group members believe that "where we live shouldn't determine how long or how well we live. In our communities, we all should be surrounded by conditions that enable us to live the healthiest life possible" (Robert Wood Johnson Foundation, 2022). The group's priority areas include infrastructure, rent costs and affordable housing, social support, injury prevention, and pedestrian safety.

Goals, Objectives & Strategies

Goal 1: To reduce injuries in Okaloosa County.

Objective 1: By December 31, 2027, reduce the rate of emergency department visits from non-fatal motor vehicle traffic related injuries from 419 per 100,000 to 412.2 per 100,000.

- Strategy 1: To educate residents and visitors about pedestrian-related safety risks.
- Strategy 2: To assess infrastructure and policy needs in relation to pedestrian-related injuries and deaths.
- Strategy 3: To assess funding opportunities related to infrastructure needs.

Goal 2: To reduce the housing burden in Okaloosa County.

Objective 1: By December 31, 2025, reduce the percentage of Okaloosans who are cost-burdened by rent costs from 51.7% to 49.3%.

- Strategy 1: To identify opportunities to share information on strategies and partnerships to leverage funds.
- Strategy 2: To assess funding opportunities related to infrastructure needs.
- Strategy 3: To identify policy opportunities to reduce rent cost burden.

Healthy Communities OCHIP Group

Champions

Robert Bage, Fort Walton Beach Police Department

DOH Representative(s)

Christy Craig, OPS Health Educator Consultant Elizabeth "Beth" Smith, Health Officer Emily Tash, Community Health Improvement Planning Branch Director Trisha Dall, Environmental Health Section Chief

Members

Anthony Sawyer, 90Works Arielle May, Catholic Charities Brent Couch, Simply Healthcare Chrissy Howell, Centerwell Home Health Danielle Payne, City of Fort Walton Beach Gabrielle Smith, CDI Head Start Henry Hawkins, Destin Baptist Church Mayor JB Whitten, City of Crestview Jeffrey Cain, Okaloosa County Jessica Leavins, City of Crestview Jill Breslawski, UF IFAS Extension Office Josephine Stockdale, HCA Fort Walton Beach-Destin Hospital Karen Reid, Beyond Expectations Kelsey Fischer, Community Member Ken Hovatter, Fort Walton Beach Church of Christ Kim Bowman, Emerald Coast Hospice Kimberly Fraley, Elder Services Kristina Goode, Bridgeway Center, Inc. Lauren Anzaldo, Gulf Coast Veterans Health Care System Leslie Moland, White Wilson Medical Center Mary Beth Blanchard, My Local Urgent Care Melissa Rust, CareeerSource Okaloosa Walton Melody Joy, Convent Care Home Health Mike Coupe, Cox Media Shannon Hayes, City of Crestview Shayne Betts, Walton Okaloosa Council on Aging Shelia Fitzgerald, Okaloosa County Board of County Commissioners Solange Arnett, Emerald Coast Children's Advocacy Center Stephanie Wedel, Freedom Life Compass Vanessa Byerly, Lakeview Center

Healthy Communities OCHIP Group Aciton Plan			
Goal 1 To reduce injuries in Okaloosa County.			
Objective 1.1 Objective 1: By December 31, 2027, reduce the rate of emergency depart- ment visits from non-fatal motor vehicle traffic related injuries from 419 per 100,000 to 412.2 per 100,000.			
Strategy 1.1.1 To educate residents and vi	sitors about pedestrian-re	lated safety risks.	
Notes: Timeline: Person(s) Responsible			
Strategy 1.1.2 To assess infrastructure and ries and deaths.	policy needs in relation to	pedestrian-related inju-	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 1.1.3 To assess funding opportunit Notes:	Timeline:	Person(s) Responsible:	
Goal 2 To reduce the housing burden in C	kaloosa County.		
Objective 2.1 By December 31, 2025, reduces cost-burdened by rent costs from 51.7% to 4	9.3%.		
Strategy 2.1.1 To identify opportunities to s leverage funds.	hare information on strate	egies and partnerships to	
Notes:	Timeline:	Person(s) Responsible:	
Strategy 2.1.2 To assess funding opportunities related to infrastructure needs.			
Notes:	Timeline:	Person(s) Responsible:	
Strategy 2.1.3 To identify policy opportunities to reduce rent cost burden.			
Notes:	Timeline:	Person(s) Responsible:	

Healthy Moms & Babies

According to the Centers for Disease Control and Prevention, "the infant mortality rate is an important marker of the overall health of a society" (2022). The group's priority areas include breastfeeding, eliminating the Black-White infant mortality gap, and reducing the overall infant mortality rate.

Goals, Objectives & Strategies

Goal 1: To reduce the infant mortality rate.

Objective 1: By December 31, 2025, reduce the Black-White infant mortality gap from a rate of 9.6 per 1,000 live births to 8.8 per 1,000 live births.

- Strategy 1: To promote best practices in prenatal, infant, and maternal care in Okaloosa County.
- Strategy 2: To create a plan for mass distribution of Recipe for a Healthy Baby educational materials.
- Strategy 3: To re-engage community partners and increase participation in Healthy Moms & Babies OCHIP Group post-COVID.
- Strategy 4: To educate the community about maternal advocacy.
- Strategy 5: To promote comprehensive breastfeeding policies through the Healthy Okaloosa Worksites program and Florida Breastfeeding Friendly Employer Award.

Objective 2: By December 31, 2025, reduce the overall infant mortality rate from 5.1 per 1,000 live births to 4.2 per 1,000 live births.*

Objective 3: By December 31, 2025, reduce the Black-White preterm birth gap from 4.4 per 1,000 live births to 2.4 per 1,000 live births.*

Objective 4: By December 31, 2025, reduce the Black-White low birth weight gap from 3.8 per 1,000 live births to 3.5 per 1,000 live births.*

Champions

Ardelle Bush, Healthy Start Coalition of Okaloosa and Walton Counites Crystal Harrison, Homelessness and Housing Alliance

Healthy Moms & Babies OCHIP Group

DOH Representative(s)

Amy Miller, Women Infants and Children Director Jennifer Wilhelm, Health Educator Consultant Lynn Wadsworth, Health Medical Executive Director

Members

Bethany Guillory, Healthy Start Coalition of Okaloosa and Walton Counties Chris Hatch, Department of Children and Families Christeia Hawkins, CDAC Behavioral Healthcare Denise Manassa, CDAC Behavioral Healthcare Miranda Smollen, Healthy Start Coalition of Okaloosa and Walton Counties Robin Neese, Children's Home Society of Florida Solange Arnett, Emerald Coast Children's Advocacy Center Theresa Ryan, Northwest Florida State College

Building on Past Success

The Healthy Moms & Babies OCHIP group was previously called the Reducing Infant Mortality CHIP group. During the 2018-2022 CHIP cycle, the group created a set of umbillical cord testing procedures for local birthing facilities. These procedures allow our hospitals and EMS to get faster and more accurate test results when babies may be exposed to drugs in utero, allowing for faster and better treatment.

*Each objective will utilize the same strategies as Objective 1.

Healthy Moms & Babies OCHIP Group Aciton Plan				
Goal 1 To reduce the infant mortality rate.				
Objective 1.1 By December 31, 2025, reduce the Black-White infant mortality gap from a rate of 9.6 per 1,000 live births to 8.8 per 1,000 live births.				
Strategy 1.1.1 To promote best practices in County.	n prenatal, infant, and mo	aternal care in Okaloosa		
Notes:	Timeline:	Person(s) Responsible:		
Strategy 1.1.2 To create a plan for mass di al materials.	stribution of Recipe for a l	Healthy Baby education-		
Notes:	Timeline:	Person(s) Responsible:		
Strategy 1.1.3 To re-engage community per	artners and increase parti	cipation in Healthy		
Moms & Babies OCHIP Group post-COVID. Notes:	Timeline:	Person(s) Responsible:		
Strategy 1.1.4 To educate the community Notes:	Timeline:	Person(s) Responsible:		
Strategy 1.1.5 To promote comprehensive loosa Worksites program and Florida Breastf	- · ·	-		
Notes:	Timeline:	Person(s) Responsible:		
Objective 1.2 By December 31, 2025, reduce the overall infant mortality rate from 5.1 per 1,000 live births to 4.2 per 1,000 live births.*				
Objective 1.3 By December 31, 2025, reduce the Black-White preterm birth gap from 4.4 per 1,000 live births to 2.4 per 1,000 live births.*				
Objective 1.4 By December 31, 2025, reduce the Black-White low birth weight gap from 3.8 per 1,000 live births to 3.5 per 1,000 live births.*				

*Each objective will utilize the same strategies as Objective 1.

Progress Tracking

All members of OCHIP gather together at least twice per year to share updates across groups. This is done to ensure that collaboration is at the forefront of the groups' efforts. Some OCHIP groups have complimentary goals and action steps that benefit from this intentional dissemination of information among the groups.

Outside of collaborative meetings with the entirety of the partership, each OCHIP group hosts regular meetings. Some groups have elected to meet bi-monthly, while others prefer a quarterly schedule. All groups are expected to meet at least quarterly. The OCHIP Champions work with a member of the DOH-Okaloosa Community Health Improvement Planning staff to plan and schedule meetings. Before each OCHIP group meeting concludes, the OCHIP Champion ensures that members understand their responsibilities as an individual organization and as function of the larger group.

After the conclusion of each meeting, a DOH-Okaloosa Coummunity Health Improvement Planning Branch staff member shares meeting minutes with the action items listed along with a progress status and responsible party. This helps to confirm that each group member is actively engaged and working to accomplish the group's goals, objectives, and strategies. The OCHIP Champion follows up with group members to track progress as the group progresses through each strategy. During meetings, individuals are responsible for sharing updates on their assigned action items. When items are not completed in the agreed upon timeframe, the OCHIP Champion facilitates open discussion amongst the group to motivate the team and foster an enivronment of collaboration.

DOH-Okaloosa will update the CHIP action plan anually in order to make certain that each OCHIP group's progress is accurately tracked and cataloged. These updates will be made to reflect any added action steps, changes in community resources, or other circumstances that impact the groups' efforts.

Plan Alignment

OCHIP	State Health	DOH-Okaloosa	Healthy People 2030
Group	Improvement Plan (SHIP)	Strategic Plan	
Healthy Behaviors	Mental Well-being and Sub- stance Use Prevention: Re- duce the impact of adult mental, emotional, and be- havioral health disorders; Reduce substance use dis- orders and drug overdose deaths. Chronic Diseases and Condi- tions: Promote the attainment and maintenance of health through nutrition, physical ac- tivity, and supportive lifestyle behaviors.	TBD - Placeholder until plan is approved	Addiction: Reduce drug and alcohol addiction; Reduce the proportion of people who had alcohol use disorder in the past year. Reduce the proportion of people who had drug use disorder in the past year; Tobacco Use: Increase past-year attempts to quit smoking in adults.
Healthy Children	Mental Well-being and Sub- stance Abuse Prevention: Reduce the impact of pedi- atric mental, emotional, and behavioral health disorders. Injury Safety and Violence: Increase mitigation of Ad- verse Childhood Experiences (ACEs) as a statewide preven- tion strategy.	TBD - Placeholder until plan is approved	Adolescents: Increase the proportion of children and adolescents who show resilience to challenges and stress. Mental Health and Mental Disorders: Increase the proprtion of children and adolescents who receive preventive mental health care in school.
Healthy Communities	Injury Safety and Violence: Prevent or reduce adult inju- ries; Prevent or reduce injuries in vulnerable populations. Social and Economic Condi- tions Impacting Health: Sup- port communities to promote healthy, interconnected, and safe environments; Enhance opportunities for economic vitality and resil- ience for all people.	TBD - Placeholder until plan is approved	Injury Prevention: Reduce fatal injuries; Reduce unintentional injury deaths; Reduce deaths from mo- tor vehicle crashes. Housing: Reduce the proportion of families that spend more than 30 percent of income on housing.
Healthy Moms & Babies	Maternal and Child Health: Increase access to quality primary, preventative, and sub-speciality care for infants, children and adolescents; Reduce infant morbidity and mortality; Reduce maternal morbidity and mortality.	TBD - Placeholder until plan is approved	Pregnancy and Childbirth: Reduce preterm births; Reduce maternal deaths; Reduce the rate of fe- tal deaths at 20 or more weeks gestation; Increase the proportion of pregnant women who re- ceive early and adequate prenatal care.

Acknowledgments

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CHA Leadership Team

Aaron Murray, Northwest Florida State College Anthony Sawyer, 90Works, Inc. April Sawyer, Okaloosa County Ardelle Bush, Healthy Start Coalition of Okaloosa and Walton Counties Bonnie Barlow, Bridaeway Center, Inc. Dana Crupi, Early Learning Coalition of Okaloosa and Walton Counties Danielle Holley, City of Niceville David Triana, United for a Good Cause Lieutenant Demeika McClendon, Okaloosa County Sheriff's Office Major Erin Archer, Hurlburt Field Lida Fratangelo, North Okaloosa Medical Center Teri Schroeder, Okaloosa County School District Jennifer Clark, Okaloosa County School District Sandra Wilson, Crestview Chamber of Commerce Sargent Jessica Trimboli, Okaloosa County Sheriff's Office Sargent Joseph Gordon, Okaloosa County Sheriff's Office Kelly Jasen, United Way Emerald Coast Michelle Burns, Career Source of Okaloosa and Walton Counties Nichole DeVito, City of Destin Robyn Burnett, Okaloosa County NAACP William Stone, First Judicial Court of Florida

DOH-Okaloosa Internal Core Support Team

Allison McDaniel Amanda Colwell Amy Miller DeeDranae "Dee" Cole Elizabeth "Beth" Smith Emily Tash Jennifer Wilhelm Katherine "Kat" Beedie Katie Scott Lynn Wadsworth Petra Maddens Susan Wagner Sydney Harper Trisha Dall

Focus Groups

Destin Chamber of Commerce DOH-Okaloosa Staff (3) Healthy Okaloosa Faith-Based, Childcare, and Worksites Partners Okaloosa County Anti-Drug Coalition

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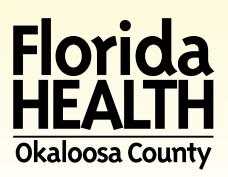
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