

# 2021-2023 Manatee County Community Health Improvement Plan

February 2021 – December 2023

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## Acknowledgements

### Community Partners

Community ownership and broad participation are key components of effective community health assessment (CHA) and community health improvement planning (CHIP). The Manatee Health Care Alliance would like to acknowledge and thank the many community partners who contributed time and resources to the 2020 Community Health Assessment in Manatee County and the 2021-2023 Community Health Improvement Plan.

Florida Department of Health in Manatee County (DOH Manatee)

Healthy Teens Manatee

Manatee County Sheriff's Office

Manatee County School District

The Center for Urgent Care

United Way Suncoast

Parenting Matters

North River Prevention Partners

Drug Free Manatee

Centerstone

MCR Health

Turning Points

Manatee County EMS

Family Resources Inc

Manatee Memorial Hospital

Manatee Chamber of Commerce

UF/IFAS Extension Family Nutrition Program

Community Members

Suncoast Behavioral Health Center

League of Women Voters Manatee

We Care Manatee

The Multicultural Health Institute

Meals on Wheels

Mission Made Possible

Health Council of West Central Florida

Gulfcoast South AHEC

Brain Health Initiative

Senior Care Group

Neighborhood Services Manatee County Government

LECOM (Lake Erie College of Osteopathic Medicine)

Manatee County Medical Society

American Heart Association

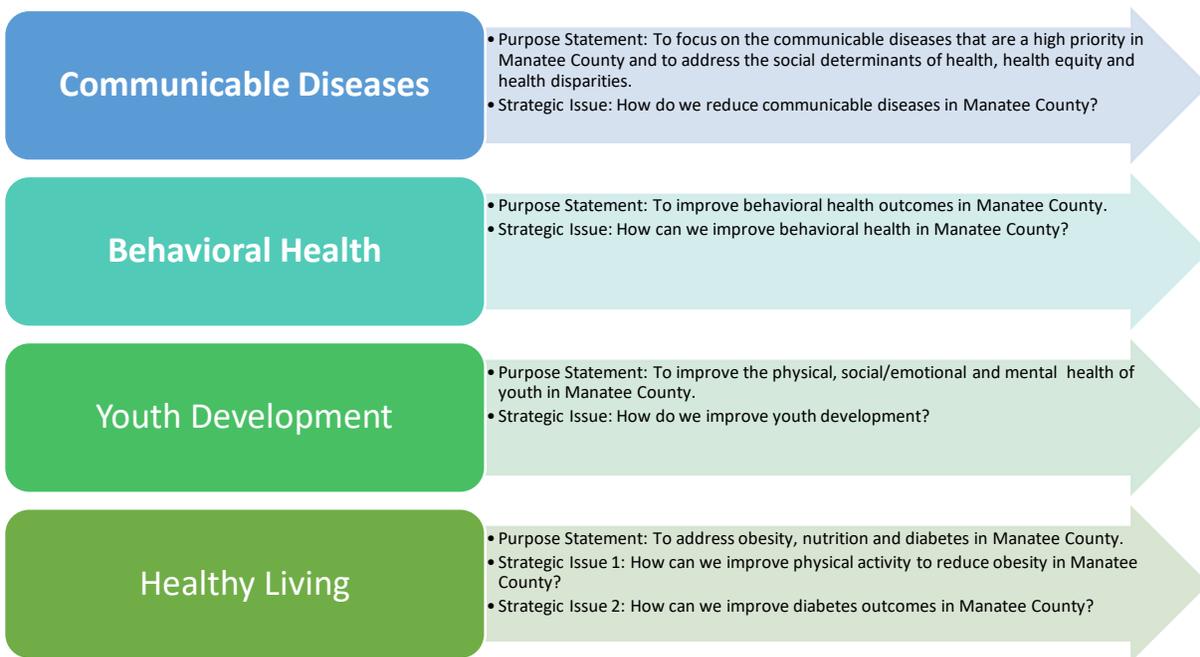
Manatee County Parks and Natural Resources

## Introduction

A community health improvement plan (CHIP) is a long-term effort to address issues identified by the community health assessment process with participation of a broad set of community partners (PHAB 2013). A successful CHIP will help community partners plan activities, set priorities, and take action together to make meaningful improvements in community health.

The 2021-2023 Manatee CHIP is a result of the 2020 Community Health Assessment (CHA), prepared by the Manatee Healthcare Alliance (MHCA) and facilitated by the Florida Department of Health in Manatee County (DOH-Manatee) and the Health Council of West Central Florida (HCWF). The CHA and CHIP were developed following the Mobilizing for Action through Planning and Partnerships (MAPP) strategic planning framework (NACCHO 2013). As its name suggests, MAPP is an intensely community-driven process. The resulting CHIP would not have been possible without the many community partners who participated in the process.

The purpose of this document is to identify strategic health issues and objectives for Manatee County for 2021 to 2023. This document will also illustrate why these issues are important to the community. The chart below shows the four CHIP committees, purpose statements and seven strategic issues elected by community partners based on results of the 2020 Manatee CHA.



## Manatee County Profile

Florida's 15<sup>th</sup> largest county, Manatee County is a coastal community offering an attractive lifestyle for residents and visitors alike. Manatee's beautiful parks and beaches are an asset to the community and facilitate numerous opportunities for physical activity, socialization and recreation. Centerstone, Manatee Memorial Hospital, MCR Health, Turning Point, The Multicultural Health Institute, LECOM, United Way Suncoast, Drug Free Manatee, North River Prevention Partners, Manatee Medical Society are resources that contribute to the health of Manatee County residents and visitors. Compared to state and national averages, Manatee County's population is growing more rapidly, has more residents over 55 years of age, and has fewer residents from racial and ethnic minorities. Healthcare, education, manufacturing, and hospitality are important sources of employment. The community has seen

favorable developments in recent years, including rising high school graduation as well as falling violent crime and unemployment rates. Financial hardship, violent crime, and poverty pose continuing challenges; however, and disproportionately affect some sectors of the community. The COVID-19 pandemic has had broad and deep impacts during this CHA/CHIP cycle. In many ways the full impact of the pandemic is not yet realized and will not be understood in the foreseeable future. The pandemic impacts not only the direct health of the community as a communicable disease but across the social determinants of health including economic stability, social and community context, neighborhood and environment, healthcare and health access, and education. Manatee County celebrates the following achievements and community assets as discussed throughout the CHA's Community Themes and Strength's activities.

1. Grant was awarded to pilot a coordinated care system where home visiting agencies worked to ensure that they were not duplicating efforts and reaching different families and address all those in need.
2. The Remote Area Medical Program was a two-day effort where medical professionals volunteer and to provide free healthcare.
3. Recent teacher salary increases.
4. Manatee County Healthcare Advisory Board is working with the social service delivery models to expand primary care and reduce emergency room visits.
5. Approximately four years ago there was a task force to implement school-based health centers, the first was at Southeast High School a second was implemented at an elementary school. This was a successful partnership between Manatee Rural Health and the Manatee County School District.
6. Healthy Teens Coalition of Manatee works with peer educators/mentors to help fellow youth lead healthier happier lives. The peer educators/mentors go through a minimum of six weeks of extensive training. The Coalition has been a vital part of reducing the high rate of teen pregnancies in Manatee County and continues to address this issue and others important to the health of youth.
7. Programing has led to an increase in survival rate in drug overdoses.
8. Students from LECOM are engaged in offering free services to Manatee County residents. Third year dental students do a dental clinic for underserved/underinsured children. Medical students work with Turning Point, and pharmacy students assist EMS in ride-along to help identify the impact of medications.
9. Award winning Chamber of Commerce that is very involved in public health.

A full list of community assets and resources identified during the CHA-CHIP process is outlined below:

#### Business/Industry

Manasota Black Chamber of Commerce  
Manatee Chamber of Commerce  
Manatee Chamber of Commerce, Health Care Committee  
Mission Made Possible  
Realize Bradenton  
Happy Feet

#### Child and Youth Development

Early Learning Coalition of Manatee County

Step-up Suncoast  
Whole Child Manatee  
School District of Manatee County  
Department of Juvenile Justice  
Department of Children and Families  
SWAT(Students Working Against Tobacco)  
Healthy Teens Coalition  
Jewish Family & Children's Service  
Pice Athletic League

Community Engagement

Manatee County NAACP  
Unidos Now  
League of Women Voters of Manatee County  
Manatee County Community Dashboard

Crime/Traffic/Safety

Manatee County Sheriff's Office  
Bradenton Police Department  
Palmetto Police Department  
Holmes Beach Police Department  
Longboat Key Police Department  
Bradenton Beach Police  
Manatee County HOPE Family Services  
Department of Children and Families

Disaster Response

Manatee County Emergency Management  
Manasota Medical Reserve Corp

Education

School District of Manatee County  
University of South Florida  
State College of Florida  
Manatee County Government, Library Division

Employment

CareerEdge  
CareerSource

Food Insecurity/Nutrition

Women, Infants and Children (WIC), Manatee County  
School District of Manatee County Nutrition Services  
Meals on Wheels Plus  
Feeding Tampa Bay  
St George's Episcopal Church  
St Joseph's Food Pantry  
Resonate Life Church  
UF/IFAS Manatee County Extension

### Healthcare and Access

MCR Health

Manatee County Government, Neighborhood Services- Health Care Services

WeCare Manatee

Turning Points of Manatee County

Remote Area Medical Program

LECOM (Lake Erie College of Osteopathic Medicine)

Manatee Memorial Hospital

Lakewood Ranch Medical Center

Blake Medical Center

Manatee County Community Paramedicine

Tidewell

The Center for Urgent Care

The Eye Associates

Manatee County Medical Society

Manatee County Emergency Medical Services

Florida Department of Health in Manatee County (DOH-Manatee)

Health Council of West Central Florida

### Housing/Shelter/Assistance

Manatee County Housing Authority

The Salvation Army

Turning Points of Manatee County

### Maternal and Child Health

Healthy Start Coalition of Manatee

Florida Healthy Babies

### Mental Health/Substance Abuse

Centerstone

Suncoast Behavioral Health Center

Palm Shores Behavioral Health Center (children's residential treatment)

Meals on Wheel Plus Senior Centers and Adult Day Care

Operation PAR

Brain Health Initiative

Opioid Task Force

Drug-Free Manatee

Tobacco Free Manatee - Gulfcoast South AHEC

North River Prevention Partners

### Oral Health

Manatee Rural Health

Turning Points

Remote Area Medical program

LECOM dental clinic

### Philanthropy

United Way Suncoast

Giving Alliance of Myakka City

Florida Blue

### Physical Activity

Manatee County Parks and Natural Resources  
City of Bradenton Parks and Recreation  
Manatee County YMCA

### Senior Services

Meals on Wheel Plus  
Manatee County Government, Aging & Eligibility Services  
Age-Friendly Committee  
Alzheimer's Association Florida Gulf Coast Chapter  
Brookdale Living  
Helping Hands Outreach  
Tidewell  
Surrey Place Healthcare and Rehabilitation  
Senior Connection Center

### Transportation

Manatee County Transportation Disadvantaged Program  
Handy Bus  
Manatee County Area Transit

Finally, each committee identified assets and resources as part of the action planning process (see Resources under each goal in the work plan).

## [Manatee Healthcare Alliance](#)

In Manatee County, a solid foundation for collaborative community health assessment and improvement planning was established in 2010, with the formation of a community coalition of professionals and residents with an interest in health care. This coalition, the Manatee Healthcare Alliance., Inc. (MHCA), is a non-profit organization with the mission of “promoting and ensuring the health and well-being of Manatee County residents through fostering collaboration and partnerships, ensuring access to healthcare and promoting healthy behaviors.”

The organizational structure of the MHCA includes a Board of Directors and standing committees dedicated to strategic priorities.

In 2010, the MHCA initiated a collaborative process of community health assessment with a summit devoted to a review of county health data and visioning. The aim was to identify and prioritize key health challenges. This process was repeated in annual State of the County data reviews in 2011, 2012, 2013, and 2014. In late 2014, the Prevention and Wellness Committee accepted responsibility for steering a new community health assessment of Manatee County in 2015, with emphasis on community engagement. In April 2016, the MHCA presented the 2015-2020 CHIP to the community engaging partners to address strategic issues identified. In January 2020, the MHCA began the CHA process to inform the 2021-2023 CHIP. This process was halted in February 2020 as COVID-19 threatened the health of the community. In October of 2020, the MCHA steering committee re-convened to complete the CHA and CHIP. At this time the Health Council of West Central Florida (HCWF) was engaged to facilitate the process. The CHA was published in January 2021 as the MCHA began with a prioritization

discussion to identify the strategic issues for the CHIP and establish the four committees, Youth Development, Healthy Living, Communicable Diseases and Behavioral Health.

As a result of the COVID-19 pandemic, committees met over Zoom to discuss workplan development and completing these documents in January 2021. MCHA committees were assigned to each strategic issue. These committees developed goals, objectives, activities, and short- and long-term outcomes to address each strategic issue.

Each committee was charged with reporting progress regularly at the monthly MCHA meetings to ensure regular communications with partners on the progress of the CHIP objectives. In addition, a new Manatee County Community Dashboard has been created to host the CHA, CHIP and updates, using the mySidewalks platform.

The MHCA holds annual CHIP reviews, with the most recent in November 2019. The annual update process is utilized as an opportunity to review progress toward achievement of each objective. CHIP committee leaders provide monthly updates and quarterly reports on progress and as needed propose revisions to goals, strategies, objectives, and activities for each of the nine Strategic Issues. The MCHA served as the guiding force for the 2020-2023 CHA/CHIP development.

#### **MANATEE HEALTHCARE ALLIANCE MEMBERSHIP LIST**

Alitz	Paige	Florida Department of Health in Manatee County (DOH Manatee)
Allen	Tarah	Manatee County School District
Almodovar	Evelyn	Healthy Teens Manatee
Andrews	Robert	Manatee County Sheriff's Office
Ardilas	Suzanne	Manatee County School District
Avila	Dr. Albert	The Center for Urgent Care
Badal	Runa	Florida Department of Health in Manatee County (DOH Manatee)
Beightol	Bronwyn	United Way Suncoast
Bencie	Jennifer	Florida Department of Health in Manatee County (DOH Manatee)
Benford	Kelly	Parenting Matters
Bergmann	Ally	North River Prevention Partners
Brown	Bonnie	Drug Free Manatee
Caulley	Kristin	Florida Department of Health in Manatee County (DOH Manatee)
Clayson	Gemma	Centerstone
Colgate	Bill	MCR Health
Cramer	Kathleen	Turning Points
Crutchfield	James	Manatee County EMS
Davis	Lisa	Family Resources Inc
Destefano	Gerri	Manatee Memorial Hospital
Dezelski	Jacki	Manatee Chamber of Commerce

Drawdy	Lynne	Florida Department of Health in Manatee County (DOH Manatee)
Farrington	Amy	Manatee Chamber of Commerce
Gadison	Tori	Manatee Memorial Hospital
Gage	Tara	UF/IFAS Extension Family Nutrition Program
Gottlieb	Ron	Community Member
Grant	Emily	UF/IFAS Extension Family Nutrition Program
Hamilton	Brandy	Suncoast Behavioral Health Center
Hannah	Jan	Florida Department of Health in Manatee County (DOH Manatee)
Harenchar	Ruth	League of Women Voters Manatee
Hernandez	Edwin	Florida Department of Health in Manatee County (DOH Manatee)
Houseweart	Kathleen	We Care Manatee
Houston	Renita	Children's Home Society
Hoy	Sandra	Sunshine Health
J-Abnar	JoOni	The Multicultural Health Institute
James	Noliyanda	UF/IFAS Extension Family Nutrition Program
Jewett	Joy	Manatee County Sheriff's Office
Kasdan	Victoria	Mission Made Possible
Keegan	Heather	Manatee County School District
Kelly	Teresa	Health Council of West Central Florida
Larkin-Skinner	Melissa	Centerstone
Legler	Mary Ann	Healthy Teens Manatee
Letourneau	Sandra	Manatee Memorial Hospital
Linton	Cecilia	Centerstone
Lipps	Bryan	Meals on Wheels
Maholtz	Elaine	Manatee County Government
Marochi	Belisa	Florida Department of Health in Manatee County (DOH Manatee)
Marquez	Nicole	Gulfcoast South AHEC
McGill	Carla	Florida Department of Health in Manatee County (DOH Manatee)
Megan	Lucas	Manatee Memorial Hospital
Midyette	Tima	Florida Department of Health in Manatee County (DOH Manatee)
Mora	Ansley	Gulf Coast South AHEC
O'Meara	Jodi	Manatee County School District
Pappa	John	Florida Department of Health in Manatee County (DOH Manatee)
Peabody	Stephanie	Brain Health Initiative
Peele	Anastasia	Florida Department of Health in Manatee County (DOH Manatee)
Peters	Carol	Florida Department of Health in Manatee County (DOH Manatee)

Pugh	Lanita	Senior Care Group
Reber	Philip	Manatee Memorial Hospital
Rees	Catherine	Florida Department of Health in Manatee County (DOH Manatee)
Rosa	Eddie	Florida Department of Health in Manatee County (DOH Manatee)
Roseboro	Jane	Centerstone
Rosenburg	Melissa	Florida Department of Health in Manatee County (DOH Manatee)
Ross	Kim	Neighborhood Services Manatee County Government
Rusnak	Jamie	Manatee YMCA
Schmidt	Keilah	Florida Department of Health in Manatee County (DOH Manatee)
Scott	Nathan	Family Safety Alliance DOH
Seiffert	Stephanie	Manatee County Government
Slawinski	Michelle	Florida Department of Health in Manatee County (DOH Manatee)
Smith	Shelly	Florida Department of Health in Manatee County (DOH Manatee)
Stopper	Giselle	Centerstone
Tavallali	Lisa	LECOM (Lake Erie College Osteopathic Medicine)
Taylor	Lindsay	Florida Department of Health in Manatee County (DOH Manatee)
Thompson	Linda	Drug Free Manatee
Tittel	Christopher	Florida Department of Health in Manatee County (DOH Manatee)
Tordesillas	Judy	MCR Health
Vale	Valerie	Manatee County Medical Society
Wagner	Amanda	American Heart Association
White	Molly	Manatee County Parks and Natural Resources
Whitfield	Charles	Centerstone
Whitmore	Carol	Manatee County Government
Wilhoit	Skip	Manatee County School District
Wolf	Abby	Florida Department of Health in Manatee County (DOH Manatee)

### Description of CHA/CHIP/MAPP Process

A community health assessment (CHA) is a systematic examination of the current health status in the community, factors contributing to poor health outcomes in a community, and identification of key resources available to address needs. The process includes comprehensive data collection and analysis and focuses on the broad system of services and organizations that contribute to the improvement of community health. The CHA is developed through a collaborative process and serves as a basis to identify priority issues and develop strategies to address those needs in measurable ways through the development of a community health plan (CHIP).

The Florida Department of Health in Manatee County (DOH-Manatee) facilitates the CHA process every three to five years. The CHA process begins about 6-9 months before the end of the previous CHIP in order to insure an informed and seamless transition between the plans. The previous process was conducted in 2015 and the resulting plan covered a five -year period. This CHA/CHIP will cover a three-year period from 2021-2023, to better respond to a rapidly changing landscape and to allow for coordination with the community health needs assessment planning effort conducted the by non-profit hospital in the county. Committee Chairs will present workplan progress monthly to the MHCA. Every November, an annual report will be submitted by each committee to assess progress. The Robert Wood Johnsons Foundation's County Health Rankings produces a summary of the health of the county providing an additional opportunity to evaluate the advancement of the CHIP. As emerging issues arise they are addressed at a monthly MHCA meeting and added to the CHIP. An example of this is the Hepatitis A outbreak in Florida during 2019 and 2020.

## MOBILIZING FOR ACTION THROUGH PLANNING AND PARTNERSHIPS

The Florida Department of Health in Manatee County (DOH–Manatee) utilized the National Association of County and City Health Officials (NACCHO)'s Mobilizing for Action through Planning and Partnerships (MAPP) model to steer its Community Health Assessment (CHA) and Community Health Improvement Process (CHIP). The MAPP model is a community–driven strategic planning process for improving community health, and its framework helps communities to apply strategic thinking to prioritize public health issues and identify resources to address them. The MAPP Process defines a series of six sequential phases. Phases 1 to 3 guide the CHA process and Phases 4 to 6 guide the CHIP process.

### Community Health Assessment Overview

#### Phase 1: Organize for Success & Partnership Development

The first phase of the CHA/CHIP involves two critical and interrelated activities: organizing the planning process and developing the planning partnership. The purpose of this phase is to structure a planning process that builds commitment, engages participants as active partners, uses participants' time well, and results in a plan that can be realistically implemented.

Beginning in January 2020, a steering committee made up of six community partners was formed to guide and assist with community engagement that includes representation from residents, key stakeholders and other representatives of the local public health system. The committee had begun the process and released a community survey when COVID-19 struck. Attention and resources were shifted to respond to the pandemic and for several months work on the CHA/CHIP was suspended. In September 2020 the committee was revitalized, and assistance was sought from staff of the Health Council of West Central Florida to complete the CHA/CHIP process in conjunction with staff from the DOH-Manatee.

#### Phase 2: Visioning

Visioning, the second phase, guides the community through a collaborative, creative process that leads to a shared community vision and common values.

Vision and values statements provide focus, purpose, and direction to the CHA/CHIP so that participants collectively achieve a shared vision for the future. A shared community vision provides an overarching goal for the community—a statement of what the ideal future looks like. Values are the fundamental principles and beliefs that guide a community-driven planning process.

Because visioning is done at the beginning of the CHA/CHIP, it offers a useful mechanism for convening the community and building enthusiasm for the process, setting the stage for planning, and providing a common framework throughout subsequent phases.

An extensive visioning process was undertaken for the 2015 CHA/CHIP. The Manatee Alliance for Healthcare discussed the need to conduct the exercise again and ultimately decided to reaffirm the vision statement “Manatee County is Florida’s healthiest community.”

### Phase 3: The Four Assessments

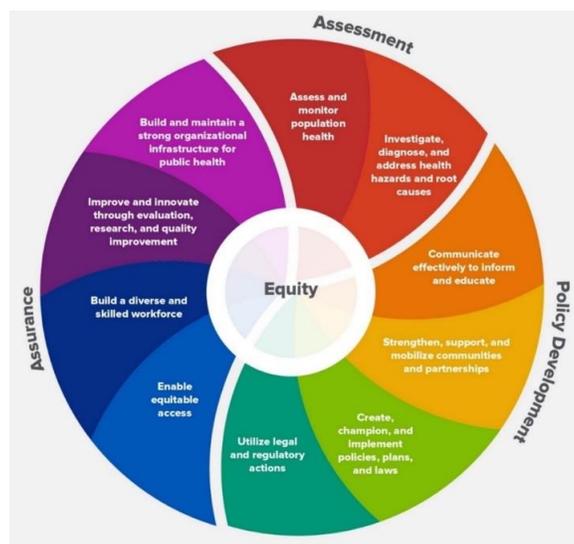
The Community Themes and Strengths (CTS) Assessment evaluates community members’ thoughts, experiences, opinions, and concerns. It answers questions such as:

- How is quality of life perceived in the community?
- What is important to the community?
- What assets does the community have to improve community health?

For the CHA, three primary data collection efforts were undertaken to assess themes and strengths- a community survey, key informant interviews and focus groups with under-represented populations from the survey and key informant activities.

### Local Public Health System (LPHS) Assessment

The primary purpose of the Local Public Health System Assessment (LPHSA) is to promote continuous improvement that will result in positive outcomes for system performance according to the 10 Essential Services of Public Health.



Local public health departments and their system partners can use the results of the LPHSA as a tool to:

- Better understand current system functioning and performances.
- Identify and prioritize areas of strength, weakness and opportunities for improvement.
- Articulate the value that quality improvement initiatives will bring to the public health system.
- Develop an initial workplan with specific quality improvement strategies to achieve goals.
- Take action toward achieving performance and quality improvement in one or more targeted areas.
- Reassess the progress of improvement efforts at regular intervals.

Participants were asked to rate the activity level for each of the 10 Essential Services. A total of 32 people representing 14 partners in the Manatee local public health system participated.

Optimal (76%-100%)	Greater than 75% of the activity described within the question is met
Significant (51%-75%)	Greater than 50% but no more than 75% of the activity described within the question is met
Moderate (25%-50%)	Greater than 25% but no more than 50% of the activity described within the question is met
Minimal (1%-25%)	Greater than 25% but no more than 25% of the activity described within the question is met
No activity (0%)-	Absolutely no activity Don't Know-Unaware of these activities

### Forces of Change (FoC) Assessment

The Forces of Change Assessment identifies forces that may affect a community, and the opportunities and threats associated with these forces. It answers the questions: *What is occurring or might occur that affects the health of the community or the local public health system? What specific threats or opportunities are generated by these occurrences?*

The Forces of Change Assessment was held on November 5, 2020. Invitations were sent in advance to 70 people representing a wide variety of constituencies. Twenty-nine people, representing 18 distinct organizations including local government, education, non-profit sector, health care, and concerned citizens, participated in a virtual meeting facilitated by the Health Council of West Central Florida. The impact of both COVID-19 and a national election with unknown outcome was woven through the discussion of many of the forces. Other common themes included racial and ethnic disparities in education, employment, income, access to care and health status; and the need for a proactive, long-term approach to funding so progress made isn't lost.

### Community Themes and Strengths (CTS) Assessment

The Community Themes and Strengths Assessment identifies assets in the community and issues that are important to community members. It answers the questions: *What is important to the community? How is quality of life perceived in the community? What assets does the community have that can be used to improve community health?*

Key informant interviews were selected as a method to gather information about community perspectives as part of the Community Themes and Strengths Assessment informing the CHA. The Manatee Healthcare Alliance and the DOH Manatee staff developed a list of 20 potential community representatives and the Health Council of West Central Florida staff scheduled and conducted 15 interviews between October 12 and November 4, 2020 via Zoom Virtual Conferencing. Interviews

lasted from 20 minutes to 90 minutes and were recorded to enable staff to review to ensure accuracy in the reporting process. Recordings were deleted upon the completion of the report.

A community survey was developed and distributed from September 28, 2020 to November 9, 2020. Community partners were provided with links to English and Spanish versions of the survey, a flyer, images for social media and QR-codes. An e-mail was sent to the MHA to distribute to clients and partners.

A total of 809 participants completed the survey in English and 11 in Spanish. Most respondents were White, Non-Hispanic Females in the age group of 46-65 living in a two-person household with an annual income of at least \$100,000 a year.

Virtual focus groups were conducted to further inform the CTS Assessment. Typically focus groups take place with groups of individuals with similar characteristics meeting face-to-face allowing for conversations to emerge organically with the guidance of a qualified facilitator. By meeting in-person, body language becomes part of the experience and facilitators can more effectively lead the discussion. In the best interest of the participants and facilitators with respect to the continued threat of COVID-19 and recommended social distancing practices, it was determined that the focus groups would take place through video conferencing.

Seniors, youth and young adults were selected as the target audiences for the focus groups and participants were recruited for the three groups through the Healthy Teens Coalition of Manatee County, Manatee County YMCA and Meals on Wheels/Daybreak Adult Day Center.

## Community Health Status (CHS) Assessment

The Community Health Status Assessment provides quantitative data on the community's health condition. It answers the questions: *How healthy is the community? What does the health status of the community look like?*

Demographic, health outcomes and health factors data were collected from multiple secondary data sources and presented in the CHA.

## Community Health Improvement Plan Overview

### Phase 4: Identifying Strategic issues

Once the CHA was complete, the next step was to prioritize which issues the Manatee Healthcare Alliance would include in the CHIP. This process takes place through Phase Four of the Mobilizing for Action through Planning and Partnerships (MAPP).

The CHA reveals challenges and opportunities from each assessment that are utilized to identify and select strategic issues. This information is combined into a master list where all challenges and opportunities are aligned, establishing a comprehensive list of strategic issues. Typically, this takes a full day of stakeholders meeting together to carefully dissect each issue and to determine root causes and the capacity to address the issues. Due to the delayed start as a result of the COVID-19 pandemic,

the Health Council of West Central Florida (HCWF) utilized the Hanlon Method to efficiently prioritize strategic issues and complete Phase Four of the MAPP process. The Hanlon Method efficiently quantifies strategic issues measuring their capacity, feasibility and effectiveness.

Phase Four of the MAPP process is conducted through four steps:

Step 1: Determining the Method to Complete this Phase

Step 2: Present Summary of All Four Assessments

Step 3: Brainstorm Potential Strategic Issues (5 Whys)

Step 4: Synthesize and Prioritize Strategic Issues

In order to accomplish steps 1, 2, and 3, the HCWF synthesized the data from the CHA into a table (Appendix A), identifying the crosswalks of all health outcomes and factors mentioned throughout each assessment. Issues were further condensed into broad topics and listed in a table as a health factor and/or a health outcome according to each assessment. Once again related topics were further combined and color-coded allowing for a visual and quantifiable list of top health issues to prioritize using the Hanlon method, including:

- Obesity/Nutrition/Diabetes
- Mental Health
- Substance Abuse
- Access/Affordability
- Crime/Traffic/Safety
- Disparities/Discrimination/Population
- Oral/Dental Health
- Pandemic/COVID-19
- Youth Development
- Seniors

Upon the completion of the Hanlon Method, participants developed a deeper understanding of the issues facing the community and critical details needed to prioritize which issues to address in the CHIP. Following a review of the results, participants identified their choices for the top three strategic issues. This was conducted through a polling feature on the Zoom virtual meeting platform to rank the issues and reveal the top four strategic issues to pursue in the CHIP and complete step 4 of the MAPP process.

#### *Hanlon/Pearl Method*

The Hanlon Method is a research-based proven method for setting community priorities using the Basic Priority Rating System (BPR). It was developed by Rollins School of Public Health at Emory University in Atlanta and the Association of Schools of Public Health. It is a part of “Setting Health Priorities” from the Assessment Protocol for Excellence in Public Health (APEX-PH) program. The system mathematically accounts for A-the size of the problem, B-the seriousness of the problem and C-the availability of effective solutions. The method produces a quantifiable result for comparison allowing for the removal of bias in prioritizing issues.

$$\text{BPR}=(\text{A}+2\text{B}) \times \text{C}$$

Component A: Size of the Problem		Component B: Seriousness of the Problem		Component C: Effectiveness of Evidence Based Intervention	
% of Population Affected by Problem	Size "Rating"	How Serious Problem is Considered?	Seriousness Rating	Availability / Effectiveness of Evidence-Based Interventions to Reduce or Eliminate the Problem	Effectiveness "Rating"
25% or more	9 or 10	Very Serious	9 or 10	Very Effective (80-100%)	9 or 10
10% - 24.9%	7 or 8	Serious	6, 7 or 8	Relatively Effective (60-80%)	7 or 8
1% - 9.9%	5 or 6	Moderately Serious	3, 4 or 5	Effective (40-60%)	5 or 6
.1% - .9%	3 or 4	Not Serious	0, 1 or 2	Moderately Ineffective (20-40%)	3 or 4
.01% - .09%	1 or 2			Relatively Ineffective (5-20%)	1 or 2
< .01%	0			Almost Entirely Ineffective (Less than 5%)	0

The issues were weighted using the PEARL factors indicated in the table below. Each of the questions within the factors that received a "yes" were assigned a point to be consider with the BPR for prioritization.

<b>Propriety</b>	(1) Is the problem one that falls within the overall scope of operation, and (2) is it consistent with mission statement?
<b>Economic Feasibility</b>	(1) Does it make economic sense to address the problem? (2) Are there economic consequences as a result of the problem NOT being addressed?
<b>Acceptability</b>	Will the community and/or target population accept a program to address the problem?
<b>Resources</b>	Are, or should, resources be available to address the problem?

<b>Legality</b>	Do current laws allow, favor or prohibit interventions to address the problem?
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Prioritization Session

In advance of the prioritization meeting, participants received the CHA in its entirety along with additional documents summarizing the common themes. The top 10 issues were identified through the common themes and data specific to each issue was summarized for participants to utilize through the prioritization work (Appendix B). Participants were divided into breakout groups of 7-8 per group to apply the Hanlon Method to 2-3 issues per group. Each breakout group presented their results to the full group. Following the report out, participants completed a poll indicating their top three choices to prioritize in the CHIP. The results were shared instantly, and workgroups were formed to continue the process. Each work group discussed the data from the CHA process that is most pertinent to the issue to develop goals, strategies and measures for the CHIP.

*Determination of Top Issues and Committees*

Following the report out, participants completed a poll indicating their top three choices to prioritize in the CHIP. The results were shared instantly, and workgroups were formed to continue the process. Each work group discussed the data from the CHA process that is most pertinent to the issue to develop goals, strategies and measures for the CHIP. The four top issues selected were Communicable Diseases, Healthy Living, Youth Development, and Behavioral Health. Committees were formed for each of the issues.

Phase 5: Formulate Goals & Objectives

This phase involves specifying goals for each of the strategic issues identified in the previous phase. Each committee met through Zoom at the end of December 2020 and began with a deep dive into the data specific to the issue they were addressing. Through the development of goals, and objectives, committees focused on health equity and access to health and social services. The committees considered issues such as health equity and access to care when developing goals and objectives.

**Definition of Health:**

Health is a state of complete physical, mental and social well-being. Health also has the goal of preventing disease and prolonging life. The health of a community is determined by various social, economic and environmental factors. Higher levels of education, access to healthy food option, clean air, safe and clean neighborhoods and opportunities for physical activity positively influence health behaviors. The improvement of health behaviors leads to a more productive workforce and lower health care expenditures.

**Definition of Healthy Community:**

A healthy community is one in which all groups of the community work together and collaborate to prevent disease and make healthy living options accessible. A healthy community promotes healthy living to bring the greatest health benefits to the greatest number of people. A healthy community works together to reduce health gaps caused by various social, economic and environmental factors.

In January 2021, the meetings to develop goals and objectives began with the selection of a chair, co-chair and a liaison from the DOH-Manatee to support the implementation of the plan. The HCWF

facilitated the meetings and reviewed the highlights from the previous month's data review. Strategic issues were formed along with a purpose statement to guide the work of the committees. Over the course of the next few weeks, committees formed their conversations around the development of goals and objectives by reviewing data, considering assets and opportunities identified in the CHA and updates from committee members. Between meetings, committee members received notes and updated workplans.

## Phase 6: Action Cycle

### Strategic Issue Summary

The following section illustrates each strategic issue identified along with the data from the CHA pertinent to the particular issue as it was considered in the development of the workplans. Many of the issues are interrelated but goals, objectives and activities were tailored to the needs of the community based on the data indicated.

### Communicable Diseases

Strategic Issue: How do we reduce communicable diseases in Manatee County?

- The COVID-19 pandemic has had broad and deep impacts during this CHA/CHIP cycle. It is impossible to quantify all the effects in this point in time since the pandemic is on-going. There are references throughout this Community Health Assessment report of impacts on social indicators of health, mental health and drug use and they are provided to frame issues that will continue for the foreseeable future and will ultimately impact the health of Manatee County residents.
- It is also apparent that the pandemic not only rose to a high level of importance in the assessments, but also help to increase awareness of health disparities in the county. In November, the Manatee County Commission declared racism as a public health crisis, opening the door for more significant and coordinated work around issues of equity and health disparities.
- COVID-19 and natural disasters have increased focus on the need to develop better policies and strategies to meet the needs of these populations to address, mitigate and prevent poor health outcomes.
- The young adults focus group discussed the impact the COVID-19 pandemic has placed on mental health by increasing anxiety.
- COVID-19 has also resulted in the delay of health screenings such as colonoscopies, mammograms and routine blood work due to fears of contracting the virus in a medical setting even for those with insurance. Elective surgeries have also been postponed and at times there have been shortages of ICU beds.
- People with employer -sponsored health insurance may have lost coverage as a result of layoffs and business closings since the beginning of the COVID-19 pandemic.
- From January 1, 2018 through October 24, 2020, 4,838 hepatitis A cases were reported in Florida. The first declaration of a public health emergency for Hepatitis A was made August 1, 2019 and has been redeclared four times, with the most recent declaration being in March of 2020. Manatee County had a spike in cases in 2019 to 138 cases as opposed to 3 cases in 2018. The COVID-19 pandemic is affecting health care seeking behavior, which may be impacting the diagnosis and reporting of hepatitis A cases. Although there are only 3 cases

reported between January 1 and June 13, 2020 in Manatee County, there is concern that cases are going undiagnosed and that another outbreak may occur.

- Manatee County has higher rates of both early and infectious syphilis than per county average, nearest local health department and Florida.
- Manatee County rates for gonorrhea, chlamydia and bacterial STDs are higher than peer counties and nearest local health department, but lower than Florida.
- According to the CDC, during the 2019 season Florida has the fifth lowest percentage for children and third lowest for adults receiving annual flu vaccine at 55% for children and 38% for adults. Hepatitis C is declining in Manatee County and is rising in Florida. As of the 2016-18 period, Manatee County's rate is below that of Florida. Manatee County's rate is also below the nearest local health department but is higher than the peer county average.
- Manatee County has higher rates of tuberculosis cases than the per county average and the nearest local health department.

## **Behavioral Health**

Strategic Issue: How can we improve behavioral health in Manatee County?

- Hospitalization rates for mental disorders among Manatee County residents between 65 and 74 years old were higher than Florida in 2018.
- Suicide rates in Manatee County are higher than Florida and peer county average, and lower than the nearest local health department.
- In 2019, suicide death rates in Manatee County were highest in the 75 and older age cohort, with the second highest rates in the 45-54 age cohort.
- At least seven out of the fifteen key informant participants highlighted mental health as one of the top issues in Manatee County.
- A key informant shared the perspective that those with mental health and/or substance abuse challenges struggle more than others and that these issues often lead to homelessness.
- One of the participants highlighted the pressures facing mothers, especially single moms as the sole care provider for infants and children. This is exacerbated in underserved communities and as pressures compound, mother's mental health is not sufficiently addressed. They are high risk for impaired access to food, formula, diapers and other basic needs.
- Manatee County had higher death rates from alcohol-suspected motor vehicle crashes than Florida, peer counties or the nearest local health department.
- The U.S. Department of Health & Human Services (USHHS) has designated Health Professional Shortage Areas (HPSAs) and Manatee County as a Mental Health Professional Shortage Area.
- When comparing data from the first six months of 2020 with same period of 2019 fatal overdoses from all drugs increased 8.8% in Manatee County and opioid overdoses remained the same. Non-fatal overdoses from all drugs increased 23.7% and non-fatal opioid overdoses increased by 34.6%.

## **Healthy Living**

Strategic Issue 1: How can we improve nutrition and physical activity in order to reduce obesity in Manatee County?

- Obesity rates are very high in minority populations; whites seem to be doing better Food deserts, no sidewalks in some neighborhoods so walking is dangerous, fast food consumption. Opportunities include recreation offerings improving in some areas, community gardens, strategies to increase participation in WIC and SNAP

- Manatee County has higher rates of obesity in mothers at time pregnancy occurs, than Florida.
- Black adults in Manatee County have higher rates of being sedentary than Blacks in Florida, as well as Whites and Hispanics in Manatee County and Florida.
- Females are more likely to report being sedentary than males in both Manatee County and Florida.
- Manatee County has higher rates of overweight adults overall and among non-Hispanic Whites than Florida. Blacks and Hispanics, Manatee County has higher rates of obesity than Florida.
- The County Health Rankings identified adult obesity as an area to explore in the 2020 Manatee County profile.

#### Strategic Issue 2: How can we improve diabetes outcomes in Manatee County?

- Diabetes death rates in Manatee County are lower than Florida but are increasing over time. Manatee County has lower diabetes death rates than the peer county average, but higher rates than the nearest local health department.
- Blacks and Hispanics have higher death rates than Whites, are more likely to be hospitalized, have an ER visit related to diabetes and higher rates of amputation of a lower extremity than Whites.
- Manatee County has lower rate of amputation of lower extremity attributable to diabetes than Florida, the trend is increasing overall however, Blacks and Hispanics have a higher rate of amputation of a lower extremity than Whites.

#### Youth Development

##### Strategic Issue: How do we improve youth development?

- Teens and young adults agreed that mental health, substance abuse and obesity/nutrition, and sexually transmitted infections (STIs) as the most critical health issues in Manatee County.
- In discussing mental health, a focus group participant explained their observation of parents taking their stress out on their children creating a cycle of poor mental health.
- Existing mental illness among adolescents may be exacerbated by the pandemic, and with school closures, they do not have the same access to key mental health services. Additionally, substance use is a concern among adolescents as they may use substances to cope.
- The Forces of Change identified threats including increasing STI rates, comprehensive sexual and reproductive health information lacking, vaping.
- Youth Vaping in 2020, 25.6% of Florida high school students reported current use of electronic vaping – a 63% increase compared to 2017. Only about 4% of adults in Florida were using ENDS.
- A key informant shared that youth crime has been increasing even before the onset of the pandemic and specifically mentioned youth shootings.
- In 2018,
  - 9.7% of students in Manatee County, ages 11-17, in the past year, did something to purposely hurt themselves without wanting to die (2018).
  - It was estimated that 3,246 youth 9-17 were seriously emotionally disturbed.
  - 22.2% of students ages 11-17, who in the past year, felt sad or hopeless for two or more weeks in a row and stopped doing usual activities.
  - 4.4% of students ages 11-17, who did not go to school because they felt they would be unsafe at school or on their way to school in the past 30 4.4% days.
- Disconnected youth are at an increased risk of violent behavior, smoking, alcohol consumption and marijuana use, and may have emotional deficits and less cognitive and academic skills than their peers who are working and/or in school.

- There are higher rates of disconnection among Black and Hispanic youth in Manatee County.
- Manatee County rates of students who have ever used smokeless tobacco (chewing tobacco, snuff, or dip), among all middle and high school students have remained in the 30 to 32% range from 2014 to 2020 and are lower than rate in Florida, but higher than peer counties or nearest local health department.
- Exposure to second-hand smoke was reported by over 61% of youth in both Florida and Manatee County.
- Manatee students have reported higher rates of trying to lose weight than students in Florida over the last decade.
- Among youth, Manatee County Hispanics and males have higher rates of obesity than Hispanics and males in Florida. Overall, Manatee County has lower rates of youth obesity when compared with Florida, and higher rates than the peer county average and the nearest local health department.

## Strategy Map

The Strategy Map not only provides the purpose, strategic issues, goals and objectives specific to each committee, but the alignment with the state of Florida's State Health Improvement Plan and the national Healthy People 2030 goals.

## Communicable Diseases

Healthy People 2030 national health targets include:

- Reduce the rate of hepatitis A to 0.4 cases per 100,000. Manatee County's current rate of 0.7 does not meet the national target.
- Reduce the rate of hepatitis B-acute to 0.9 cases per 100,000. Manatee County's current rate of 2.5 does not meet the national target.

Florida State Health Improvement Plan Alignment:

- Increase access to immunizations for infants and pregnant women.
- Increase access to immunizations for vaccine preventable diseases in children and teens.
- Reduce syphilis in Florida.
- Reduce new HIV infections in Florida through a coordinated response across public health systems partners.
- Demonstrate readiness for existing and emerging infectious disease threats.

**PURPOSE:** To focus on the communicable diseases that are a high priority in Manatee County and to address the social determinants of health, health equity and health disparities.

**Strategic Issue:** How do we reduce communicable diseases in Manatee County?

**Goal 1:** By October 2021, to increase Manatee Healthcare Alliance's awareness of the knowledge, skills and access of Manatee County residents in order to effectively minimize communicable diseases in Manatee County.

**SMART Objectives:**

- By October 2021, determine and obtain information necessary to assess the rates, knowledge, skills beliefs and perceptions of Manatee County residents regarding testing, treatment, and prevention of communicable diseases.

**Hepatitis A rate per 100,000 cases:**

**Baseline 0.7, November, 2020**

**Target 0.4 by December, 2023**

**Hepatitis B rate per 100,000 cases:**

**Baseline 2.5, November, 2020**

**Target 0.9 by December, 2023**

**Goal 2: Increase culturally and linguistically (Health Equity) sensitive communication of communicable disease education, access and affordability regarding testing, transmission, treatment and vaccination, by 2022. (Health equity)**

**SMART Objectives:**

- A. Design and implement culturally and linguistically (Health Equity) sensitive outreach to educate communities about prevention, testing, treatment and access regarding communicable diseases by October 2022.
- B. Establish and support systems that enable clinicians to comprehensively test, treat, and educate, specific to community needs, by 2023.

**Hepatitis A rate per 100,000 cases:**

**Baseline 0.7, November, 2020**

**Target 0.4 by December, 2023**

**Hepatitis B rate per 100,000 cases:**

**Baseline 2.5, November, 2020**

**Target 0.9 by December, 2023**

**Behavioral Health**

**Healthy People 2030 national health targets include:**

- Reduce unintentional injury deaths to 43.2 deaths per 100,000. Manatee County's current rate of 66.3 does not meet the national target.
- Reducing the suicide rate to 12.8 per 100,000 population. Manatee County's current rate of 15.9 does not meet the national target.
- Reducing drug overdose deaths to 20.7 per 100,000 population. Manatee County's current rate of 32 does not meet the national target.
- Reduce the death rate of from alcohol- suspected motor vehicle crashes to 28.3 per 100,000 population

**Florida State Health Improvement Plan Alignment:**

- Reduce mental, emotional, and behavioral health disorders in children through improved identification and treatment of behavioral health disorders in parents who come in contact with the child welfare system.
- Decrease the number of newborns experiencing neonatal abstinence syndrome.
- Reduce the number of opioid overdose deaths among individuals with opioid use disorders.
- Reduce the number of deaths by suicide in Florida

**PURPOSE: To improve behavioral health outcomes in Manatee County.**

**Strategic Issue: How can we improve behavioral health in Manatee County?**

**Goal 1: Improve behavioral health outcomes for Manatee County residents by 2023.**

**SMART Objectives:**

- A. Increase availability and communication of culturally, linguistically and developmentally appropriate behavioral health and substance use/abuse treatment services by October 2021. (Health Equity)
  - Objective will address children, adolescents, adults and seniors.
- B. Provide education to Manatee County residents regarding access to culturally, linguistically and developmentally appropriate health services by October 2022. (Health Equity)
  - Objective will address children, adolescents, adults and seniors.

**Reducing unintentional injury deaths per 100,000:**

**Baseline: 66.3, November 2020**

**Target: 43.2, December 2023**

**Reducing suicide rate per 100,000:unintentional injury deaths per 100,000**

**Baseline: 15.9, November 2020**

**Target: 12.8, December 2023**

**Reducing drug overdose deaths per 100,000**

**Baseline: 32, November 2020**

**Target: 20.7, December 2023**

**Reducing death rate from alcohol-suspected motor vehicle crashes per 100,000:**

**Baseline: 15.9, November 2020**

**Target: 5.3, December 2023**

**Goal 2: Increase awareness of the number of individuals readmitted for substance abuse treatment by 2023.**

**SMART Objectives:**

- A. **By 2023, distribute a report that will act as a call to action to address the use and abuse of harmful substances.**

**Reducing drug overdose deaths per 100,000**

**Baseline: 32, November 2020**

**Target: 20.7, December 2023**

**Healthy Living**

**Healthy People 2030 national health targets include:**

- Increasing the proportion of women who had a healthy weight before pregnancy to 47.1 percent. Manatee County's current rate of 40.1 does not meet the national target. Manatee County has lower rates of mothers who initiate breastfeeding among Whites, Blacks and

Hispanics when compared with Florida. Blacks in Manatee County have the lowest rates of all groups.

- Healthy People 2030 has established a variety of indicators for diabetes prevention, treatment and outcomes using data sets not currently accessible.

**Florida State Health Improvement Plan Alignment:**

- Improve the food environment and nutrition habits across the lifespan to increase healthy weight.
- Improve access to and participation in physical activity opportunities across the lifespan to increase healthy weight.

**PURPOSE: To address obesity, nutrition and diabetes in Manatee County.**

**Strategic Issue 1: How can we improve nutrition and physical activity in order to reduce obesity in Manatee County?**

**Goal 1: Improve access to healthy food and increase physical activity participation by 2023.**

**SMART Objectives:**

- A. Increase participation in gyms, community centers, and parks, and recreation offerings especially in neighborhoods/zip codes with high rates of overweight/obesity (Health Equity).
  - Zip codes/Areas include: Palmetto (34222), Ellenton (34208), downtown Bradenton (34208 and 34205).
- B. By December 2023, 2-5 new Early Care and Education Centers will have implemented CATCH or NAPSACC to improve their nutrition and physical activity standards.

Increasing proportion of women who had a healthy weight before pregnancy:

Baseline: 40.1,% November 2020

Target: 47.1%. December 2023

**Goal 2: Increase access to healthy food and nutrition education by 2023. (Health Equity).**

**SMART Objectives:**

- A. By 2023, Increase participation in UF/IFAS Extension Family Nutrition Program (FNP) to SNAP-eligible recipients by 10% from baseline of 2,124 participants (Health Equity).
- B. By 2023, Increase participation in Community Gardens and/or Garden Education by 10% from a baseline of 500 participants.

Increasing proportion of women who had a healthy weight before pregnancy:

Baseline: 40.1,% November 2020

Target: 47.1%. December 2023

**Goal 3: Increase breastfeeding rates in Manatee County by 2023.**

**SMART Objectives:**

- A. By 2023, promote the recognition of breastfeeding-friendly workplaces and provide technical assistance to 10 new workplaces (2 Black-owned) to achieve Breastfeeding Friendly Workplaces Award by November 2023. (Health Equity)
  - Defined by the Census Bureau as business with African American owners holding at least a 51% stake in the business.
- B. By 2023, increase the percentage of mothers who initiate breastfeeding in Manatee County from 83.3% to 84% (based on 3-year rolling rates).

**Increasing percentage of Black mothers who initiate breastfeeding:**

**Baseline: 83.3% November 2020**

**Target: 84%, December 2023**

**Strategic Issue 2: How can we improve diabetes outcomes in Manatee County?**

**Goal 1: Increase access to diabetes medication, testing and treatment and support by 2023.**

**SMART Objectives:**

- A. Develop a referral system for patients with diabetes to gain access to necessary services and medical care by October 2021.
- B. Work with Manatee Medical Society to recruit two Endocrinologists by October 2023.

**Reduce diabetes death rate per 100,000:**

**Baseline: 15.3, November 2020**

**Target: 11.4, December 2023**

**Youth Development**

**Healthy People 2030 national health targets include:**

- Reduce death from suicide to 12.8 deaths per 100,000 population. Manatee County's current rate of 15.9 does not yet meet the national target.
- Reduce pregnancies among adolescent females to 31.4 births per 1,000 females. Manatee County's current rate of 22.5 meets the national target. While this goal has been met, the rate is still higher than the state, peer county average and nearest local health department.

**Florida State Health Improvement Plan Alignment:**

- Reduce mental, emotional, and behavioral health disorders in children through improved identification and treatment of behavioral health disorders in parents who come in contact with the child welfare system.

**PURPOSE: To improve the physical, social/emotional and mental HEALTH of youth in Manatee County.**

**Strategic Issue: How do we improve youth development?**

**Goal: 1: Improve physical, social/emotional health outcomes for youth by increasing the delivery of age and developmentally appropriate education and support, by 2023.**

**SMART Objectives:**

- A. To improve physical, social/emotional health outcomes for youth by providing age and developmentally appropriate education and support, by 2023.

**B. Improve the knowledge, skills and behaviors of parents/caregivers to support healthy behaviors for youth, by 2023.**

**Reduce teen deaths from suicide per 100,000**

**Baseline: 15.9, November 2020**

**Target: 12.8, December 2023**

**Reduce pregnancies among adolescent females per 1,000:**

**Baseline: 31.4, November 2020**

**Target: 22.5, December 2023**

**Goal 2: Improve access and reduce barriers to physical and mental health services for youth, by 2023.**

**SMART Objectives:**

**A. Increase awareness and access to the school-based health clinics in Manatee County by 2023. By increasing access to SBHC's and keeping track of current measures this will support need for future SBHC's in SDMC.**

**Reduce teen deaths from suicide per 100,000**

**Baseline: 15.9, November 2020**

**Target: 12.8, December 2023**

**Reduce pregnancies among adolescent females per 1,000:**

**Baseline: 31.4, November 2020**

**Target: 22.5, December 2023**

## CHIP Workplans

The following workplans denote the specific details regarding, what, who, when and how the strategic issues will be addressed. Goals, objectives, activities, measures and action teams indicated by the workplans facilitate consistent and meaningful implementation of the CHIP. Committee Chairs will present to the MHCA monthly and report their progress in an annual review in November of each year to demonstrate the impact of the activities over time.

<b>Communicable Diseases</b>				
<b>Chair: Victoria Kasdan</b>	<b>Co-Chair: Ron Gottlieb</b>	<b>DOH Liaison: Dr. Carla McGill</b>		<b>Monthly Meetings: third Tuesdays of the month</b>
The Chair should make sure the goals are being achieved and should report back and present to the Manatee Healthcare Alliance monthly.	The Co-chair steps in as back-up if the Chair is not available.	The DOH liaison is responsible for collecting meeting notes from the CHIP committee; ensuring that either the Chair/Co-Chair is presenting updates, progress and any requests at monthly MHCA meetings.		
<b>Committee Members:</b> Victoria Kasdan (Mission Made Possible), Dr. Bill Colgate (MCR Health), Ron Gottlieb (retired Radiologist), Carol Whitmore (Manatee County Commissioner), Ruth Harenchar (League of Women Voters Manatee), Belisa Marochi (DOH-Manatee), Keilah Schmidt (DOH-Manatee), Edwin Hernandez (DOH-Manatee), Eddie Rosa (DOH-Manatee), James Crutchfield (Manatee County EMS), Paige Alitz (DOH-Manatee), Carla McGill (DOH-Manatee), JoOni J-Abnar (The Multicultural Health Institute), Megan Lucas (Manatee Memorial Hospital), Michelle Slawinski (DOH-Manatee).				
<b>Purpose Statement: To focus on the communicable diseases that are a high priority in Manatee County and to address the social determinants of health, health equity and health disparities.</b>				
Strategic Issue: How do we reduce communicable diseases in Manatee County?				
<b>Goal 1.</b> By October 2021, to increase Manatee Healthcare Alliance's awareness of the knowledge, skills and access of Manatee County residents in order to effectively minimize communicable diseases in Manatee County.				
<b>Resources:</b> FL CHARTS Data, FL Community Health Workers Coalition				
<b>SMART Objectives</b>	<b>Activities</b>	<b>Progress</b>	<b>Measure</b>	<b>Action Team</b>
A. By October 2021, determine and obtain	1.A.1 Determine and obtain quantitative and qualitative			FL Department of Health

<p>information necessary to assess the rates, knowledge, skills beliefs and perceptions of Manatee County residents regarding testing, treatment, and prevention of communicable diseases.</p> <p>Hepatitis A rate per 100,000 cases: Baseline 0.7, 2020 Target 0.4 by December, 2023</p> <p>Hepatitis B rate per 100,000 cases: Baseline 2.5, 2020 Target 0.9 by December, 2023</p>	<p>data necessary to address purpose by April 2021.</p>		<p>Spreadsheet with data needs, sources, etc.</p> <p>List of questions/needs</p> <p>List/spreadsheet of priority populations/neighborhoods/disparate groups along with specific resources.</p> <p>Survey/focus group/key informant interview tool</p> <p>Report of assessments</p>	<p>(state), FL Department of Health in Manatee County, Manatee County Government, MCR Health, The Multicultural Health Institute, Mission Made Possible, Manatee Memorial Hospital, Manatee County EMS.</p>
	<p>1.A.2 Identify organizations/key partners to (CBOs, Community Health Workers, lay leaders) to reach out and learn about more about qualitative data needs by May 2021.</p>			
	<p>1.A.3 Determine populations/communities to further assess knowledge, skills, beliefs, and perceptions regarding testing, treatment, and prevention of communicable diseases by July 2021.</p>			
	<p>1.A.4 Identify questions to address through survey with community members, CBOs and Community Health Workers by August 2021.</p>			
	<p>1.A.5 Research and address policies limiting necessary data to address goal by September 2021.</p>			
	<p>1.A.6 Conduct survey and present results by October 2021.</p>			

**Goal 2:** Increase culturally and linguistically (Health Equity) sensitive communication of communicable disease education, access and affordability regarding testing, transmission, treatment and vaccination, by 2022. (Health equity)

**Resources:** GCAHEC's trainings

SMART Objectives	Activities	Progress	Measures	Action Team
A. Design and implement culturally	2.A.1 Analyze and prioritize results of community survey		Defined program outline,	DOH-Manatee, MCR Health,

<p>and linguistically sensitive outreach to educate communities about prevention, testing, treatment and access regarding communicable diseases by October 2022.</p> <p>Hepatitis A rate per 100,000 cases: Baseline 0.7, November 2020 Target 0.4 by December, 2023</p> <p>Hepatitis B rate per 100,000 cases: Baseline 2.5, November, 2020 Target 0.9 by December, 2023</p>	<p>to indicate topics to cover, priority populations, communication methods, by December 2021.</p>		<p>resources/materials, list individuals, implementing (CHWs, Health Educators, lay leaders, organizations with social media), program/initiative developed, evaluation plan and tools, participant list, # of individuals reached, #dates/#hours (if applicable), evaluation report</p>	<p>Mission Made Possible, The Multicultural Health Institute, League of Women Voters Manatee, Manatee Memorial Hospital, Manatee County Government, Manatee County EMS.</p>
	2.A.2 Identify existing resources pertaining to topics covered by January 2022.			
	2.A.3 Determine who is and how they are going to outreach and recruit as appropriate by February 2022.			
	2.A.4 Create campaign to promote education and resources by May 2022.			
	2.4.5 Design evaluation plan and tools by June 2022.			
	2.A.6 Recruit participants (if necessary) by July 2022.			
	2.A.7 Implementation of campaign by September 2022.			
	2.A.8 Complete evaluation of campaign by October 2022.			
<p>B. Establish and support systems that enable clinicians to comprehensively test, treat, and educate, specific to community needs, by 2023.</p> <p>Hepatitis A rate per 100,000 cases:</p>	<p>2.B.1 Capture existing systems/protocols, policies and expectations of clinical professionals to address prevention, testing and treatment of communicable diseases by December 2022.</p>		<p>Inventory of existing systems/protocols and expectations of clinical professionals, list of gaps and barriers to communication related to inventory, prioritization of gaps/barriers, resources, strategy defined, evaluation plan, # of people reached.</p>	<p>DOH Manatee, MCR Health, Mission Made Possible, The Multicultural Health Institute, League of Women Voters Manatee, Manatee Memorial</p>
	<p>2.B.2 Identify gaps and barriers to clinical professionals to communicate prevention,</p>			

<p>Baseline 0.7, November 2020 Target 0.4 by December, 2023</p> <p>Hepatitis B rate per 100,000 cases: Baseline 2.5, November, 2020 Target 0.9 by December, 2023</p>	testing and treatment of communicable disease by January 2023.		Hospital, Manatee County EMS.
	2.B.3 Prioritize and determine how to address the gaps and barriers of clinical professionals to communicate prevention, testing, and treatment of communicable diseases by February 2023.		
	2.B.4 Utilizing existing resources, design strategy to address the gaps and barriers of clinical professionals to communicate prevention, testing, and treatment of communicable diseases by May 2023.		
	2.B.5 Design evaluation plan by June 2023.		
	2.B.5 Implement strategy by July 2023.		
	2.B.6 Evaluate progress by October 2023.		

<b>Behavioral Health</b>			
<b>Chair: Dr. Linda Thompson</b>	<b>Co-Chair: Charles Whitfield</b>	<b>DOH Liaison: Paige Alitz</b>	<b>Monthly Meetings: Second Tuesdays of the month</b>

<p>The Chair should make sure the goals are being achieved and should report back and present to the Manatee Healthcare Alliance monthly.</p>	<p>The Co-chair steps in as back-up if the Chair is not available</p>	<p>The DOH liaison is responsible for collecting meeting notes from the CHIP committee; ensuring that either the Chair/Co-Chair is presenting updates, progress and any requests at monthly MHCA meetings.</p>		
<p><b>Committee Members:</b> Dr. Bill Colgate (MCR Health), Ron Gottlieb (retired radiologist/community member), Brandy Hamilton (Suncoast Behavioral Health Center), Nicole Marquez (Gulfcoast South AHEC), Paige Alitz (DOH-Manatee), Belisa Marochi (DOH-Manatee), Dr. Linda Thompson (Drug Free Manatee), Charles Whitfield (Centerstone), Dr. Lisa Tavallali (LECOM), Jan Hannah (DOH-Manatee), James Crutchfield (Manatee County EMS), Gemma Clayson (Centerstone), Nathan Scott (Family Safety Alliance, DOH-Manatee), Bonnie Brown (Drug Free Manatee), Stephanie Peabody (The Brain Health Initiative), Tarah Allen (Manatee County School District)</p>				
<p><b>PURPOSE:</b> To improve behavioral health outcomes in Manatee County.</p>				
<p><b>Strategic Issue 1:</b> How can we improve behavioral health in Manatee County?</p>				
<p><b>Goal 1:</b> Improve behavioral health outcomes for Manatee County residents by 2023.</p>				
<p><b>Resources:</b> GSAHEC's Access Program (Medical Interpreting Training, Cultural Competency Seminars, and Occupational Spanish Workshops), The Multicultural Health Institute.</p>				
SMART Objectives	Activities	Progress	Measures	Action Team
<p>A. Increase <u>availability</u> and communication of culturally, linguistically and developmentally appropriate behavioral health and substance use/abuse treatment services by October 2021. (Health Equity)</p> <ul style="list-style-type: none"> <li>Objective will address children, adolescents, adults and seniors.</li> </ul> <p>Reducing unintentional injury deaths per 100,000: Baseline: 66.3, November 2020</p>	<p>1.A.1. Develop an inventory of the number of mental health, child welfare and substance abuse professionals, including the number that speak languages other than English to better serve in a health equity capacity by April 2021. (Health equity)</p> <p>1.A.2 Identify gaps in culturally, linguistically and developmentally appropriate services related to mental health, child welfare and substance abuse professionals by June 2021.</p> <p>1.A.3 Identify resources (CHWs, training, National Network to Eliminate Disparities in Behavioral Health etc.) to increase the availability of culturally, linguistically and</p>		<p># of mental health providers, # that speak languages other than English, # receive cultural and linguistic training, # of professionals and agencies receiving information for the forum, # of professionals and agencies attending forum, estimated # of patients reached by professionals and agencies attending forum, plan for resource distribution and enhancement, # of materials distributed, # of professionals completing trainings,</p>	<p>Gulfcoast South AHEC, DOH-Manatee, LECOM, Centerstone, Drug Free Manatee, The Brain Health Initiative, MCR Health, Manatee County EMS, Suncoast Behavioral Health Center</p>

Target: 43.2, December 2023	developmentally appropriate behavioral health and substance use/abuse treatment services by August 2021.			
Reducing suicide rate per 100,000:unintentional injury deaths per 100,000 Baseline: 15.9, November 2020 Target: 12.8, December 2023	1.A.4 Develop plan (draft agenda, date, location/platform) for a “behavioral health and substance abuse equity forum,” by October 2021.			
Reducing drug overdose deaths per 100,000 Baseline: 32, November 2020 Target: 20.7, December 2023	1.A.5 Identify and confirm presenters to address health equity specific to behavioral health and substance use/abuse and suicide prevention, by December 2021.			
Reducing death rate from alcohol-suspected motor vehicle crashes per 100,000: Baseline: 15.9, November 2020 Target: 5.3, December 2023	1.A.6 Advertise and collect registrations for forum by March 2022.			
	1.A.7 Host “Health Equity, Behavioral Health, Substance Abuse and Suicide Prevention Forum” by March 2022.			
	1.A.8 Complete evaluation of forum by April 2022.			
	1.A.9 Follow-up with forum participants regarding opportunities and resources to expand capacity to provide culturally, linguistically and developmentally appropriate behavioral health, substance abuse services and, suicide prevention by May 2022 and ongoing.			
	1.A.10 Develop recognition plan to provide culturally, linguistically and developmentally appropriate			

	behavioral health and substance abuse services by July 2022.			
	1.A.11 Conduct outreach recognizing culturally, linguistically and developmentally appropriate behavioral health and substance abuse services by September 2022 and ongoing.			
<p>B. Provide education to Manatee County residents regarding <u>access</u> to culturally, linguistically and developmentally appropriate health services by October 2022. (Health Equity)</p> <ul style="list-style-type: none"> <li>Objective will address children, adolescents, adults and seniors.</li> </ul>	<p>1.B. 1 Determine what Manatee County residents want/need to have information about regarding behavioral health and substance abuse/use and suicide prevention, and culturally and linguistically and developmentally appropriate mental health services by August 2021. (Health Equity)</p>		<p># of individuals reached for identification of specific cultural, linguistic and developmental needs, list of criteria for providers to be considered culturally, linguistically and developmentally appropriate behavioral health, substance abuse and suicide prevention services, resources for community members to inform them how to access services and providers, identification of barriers, evaluation of resources, impact/reach.</p>	<p>Gulfcoast South AHEC, DOH-Manatee, LECOM, Centerstone, Drug Free Manatee, The Brain Health Initiative, MCR Health, Manatee County EMS, Suncoast Behavioral Health Center</p>
<p>Reducing unintentional injury deaths per 100,000: Baseline: 66.3, November 2020 Target: 43.2, December 2023</p>	<p>1.B.2 Develop criteria for providers to be considered culturally, linguistically and developmentally appropriate behavioral health, substance abuse and suicide prevention services by September 2021. (Health Equity)</p>			
<p>Reducing suicide rate per 100,000:unintentional injury deaths per 100,000 Baseline: 15.9, November 2020 Target: 12.8, December 2023</p>	<p>1.B.3 Populate a spreadsheet with providers/services that provide culturally, linguistically and developmentally appropriate mental health services by November 2021. (Health Equity)</p>			
	<p>1.B.4 Assess access barriers to providers included on spreadsheet by January 2022.</p>			

<p>Reducing drug overdose deaths per 100,000 Baseline: 32, November 2020 Target: 20.7, December 2023</p> <p>Reducing death rate from alcohol-suspected motor vehicle crashes per 100,000: Baseline: 15.9, November 2020 Target: 5.3, December 2023</p>	1.B.5 Identify resources to eliminate or minimize barriers to services by March 2022.			
	1.B.6 Determine outreach mechanisms (CHW, faith, social etc./referral protocol for providers/community resources) for information by April 2022.			
	1.B.7 Distribute resources through community partners by June 2022.			
	1.B.8 Establish a plan to regularly update resources by August 2022.			
	1.B.9 Evaluate resources content and impact by October 2022.			
<b>Goal 2: Increase awareness of the number of individuals readmitted for substance abuse treatment by 2023.</b>				
<b>Resources:</b> DOH-Fellow, GIS				
<b>SMART Objectives</b>	<b>Activities</b>	<b>Progress</b>	<b>Measures</b>	<b>Action Team</b>
<p>A. By 2023, distribute a report that will act as a call to action to address the use and abuse of harmful substances</p> <p>Reducing drug overdose deaths per 100,000 Baseline: 32, November 2020 Target: 20.7, December 2023</p>	2.A.1 Identify neighboring counties that have conducted similar analysis and review by March 2021.		Report criteria, report developed, report distribution/reach, and policy recommendations	<p>Gulfcoast South AHEC, DOH-Manatee, LECOM, Centerstone, Drug Free Manatee, The Brain Health Initiative, MCR Health, Manatee County EMS, Suncoast Behavioral Health Center, Manatee County Government,</p>
	2.A.2 Identify stakeholders and determine their involvement by April 2021.			
	2.A.3 Conclude all Institutional Review Board (IRB) training by April 2021.			
	2.A.4 Draft a project proposal to include purpose of project and pertinent variables for analysis by June 2021.			
	2.A.5 Complete the request for determination of whether an IRB review is required by July 2021.			

	2.A.6 Develop and obtain all materials needed for the initial application package for the IRB review and submit by August 2021.		Manatee County Jail
	2.A.7 Collect, compile and clean data from key stakeholders by February 2022.		
	2.A.8 Analyze data, draft findings and submit report for review by June 2022.		
	2.A.9 Distribute final report and other publishable pieces, and present on findings by July 2022 and ongoing.		
	2.A.10 Research and develop policy recommendations to improve outcomes related to the use and abuse of harmful substances in Manatee County and construct a policy brief addressing these findings by October 2022.		

<b>Healthy Living</b>			
<b>Chair: Ruth Harenchar</b>	<b>Co-chair: Molly White</b>	<b>DOH Liaison: Anastasia Peele</b>	<b>Monthly Meetings: Third Thursdays of the month</b>
The Chair should make sure the goals are being achieved and should report back to the Manatee Healthcare Alliance every month.	The Co-chair steps in as back-up if the Chair is not available	The DOH liaison is responsible for collecting meeting notes from the CHIP committee; ensuring that either the Chair/Co-Chair is presenting updates, progress and any requests at monthly MHCA meetings.	

**Committee Members:** Dr. Bill Colgate (MCR Health), Ron Gottlieb (retired radiologist/community member), Shelly Smith (DOH-Manatee), Belisa Marochi (DOH-Manatee), Anastasia Peele (DOH-Manatee), Lindsay Taylor (DOH-Manatee), Carla McGill (DOH-Manatee), Tima Midyette (DOH-Manatee), Kathleen Houseweart (We Care Manatee), John Pappa (DOH-Manatee), Ruth Harenchar (League of Women Voters Manatee), Noliyanda James (UF/IFAS Extension Family Nutrition Program), Tara Gage (UF/IFAS Extension Family Nutrition Program), Emily Grant (UF/IFAS Extension Family Nutrition Program), Melissa Rosenburg Ehrmann (DOH-Manatee), Amanda Wagner (American Heart Association), JoOni J-Abnar (The Multicultural Health Institute), Molly White (Manatee County Parks and Natural Resources), Amy Farrington (Manatee Chamber of Commerce), Sandra Hoy (Sunshine Health), Bryan Lipps (Meals on Wheels), Jamie Rusnak (Manatee YMCA), Stephanie Seiffert (Manatee County Government)

**PURPOSE:** To address obesity, nutrition and diabetes in Manatee County.

**Strategic Issue 1:** How can we improve nutrition and physical activity in order to reduce obesity in Manatee County?

**Goal 1:** Improve access to healthy food and increase physical activity participation by 2023.

**Resources:** Parks and Natural Resources, YMCA, Medicare supporting gym membership cost, Manatee County Govt., Manasota Food Action Council, Bradenton Farmers Market, CATCH, NAPSACC

SMART Objectives	Activities	Progress	Measures	Action Team
<p>A. Increase participation in gyms, community centers, and parks, and recreation offerings especially in neighborhoods/zip codes with high rates of overweight/obesity (Health Equity).</p> <p>Zip codes/Areas include: Palmetto (34222), Ellenton (34208), downtown Bradenton (34208 and 34205).</p> <p><b>Increasing proportion of women who had a healthy weight before pregnancy:</b>  <b>Baseline: 40.1,% November 2020</b>  <b>Target: 47.1%. December 2023</b></p>	1.A.1 Create a spreadsheet of opportunities/calendars, schedules to be physically active and cost/membership/location etc., in zip codes with high rates of overweight/obesity. by April 2021.		<p>Spreadsheet, tracking of spreadsheet/calendar shared through community, survey/# of community members engaged, prioritization of barriers, plan designed to address barriers, tracking of outreach and implementation, attendance in classes/programs and parks.</p>	<p>Manatee County Government Parks and Natural Resources, UF IFAS (Family Nutrition Program), DOH-Manatee, The Multicultural Health Institute, Manatee Chamber of Commerce, American Heart Association.</p>
	1.A.2 Publish spreadsheet as a resource for the community by June 2021.			
	1.A.3 Determine how to find out what the barriers to participating in activities on the list are by August 2021.			
	1.A.4 Find out barriers through community engagement (survey, community leaders etc.) by October 2021.			
	1.A.5 Prioritize findings and gather resources by December 2021.			
	1.A.6 Implement outreach plan by January 2022.			

<p>Reduce diabetes death rate per 100,000: Baseline: 15.3, November 2020 Target: 11.4, December 2023</p>	<p>1.A.7 Evaluate outreach efforts by June 2022.</p>			
	<p>1.A.8 Update resources and continue outreach efforts by September 2022.</p>			
<p>B. By December 2023, 2-5 new Early Care and Education Centers will have implemented CATCH or NAPSACC to improve their nutrition and physical activity standards.</p> <p><b>Increasing proportion of women who had a healthy weight before pregnancy: Baseline: 40.1,% November 2020 Target: 47.1%. December 2023</b></p> <p>Increasing percentage of Black mothers who initiate breastfeeding: Baseline: 83.3% November 2020 Target: 84%, December 2023</p> <p>Reduce diabetes death rate per 100,000: Baseline: 15.3, November 2020 Target: 11.4, December 2023</p>	<p>1.B.1 Identify all ECE's in Manatee County that are not currently using CATCH or NAPSACC by October 2021.</p>		<p># of ECEs, # of ECEs using CATCH or NAPSACC, resources disseminated, population reached, implementation status of CATCH or NAPSACC</p>	<p>UF IFAS (Family Nutrition Program), ELC of Manatee, DOH-Manatee, The Multicultural Health Institute</p>
<p>1.B.2 Disseminate resources and education on physical activity and nutrition to 25% of ECE's not using CATCH or NAPSACC by August 2022.</p>				
<p>1.B.3 Provide technical assistance to 2 – 5 Early Care and Education Centers to implement CATCH or NAPSACC by December 2023.</p>				

<b>Goal 2: Increase access to healthy food and nutrition education by 2023. (Health Equity).</b>				
<b>Resources: UF/IFAS Extension Family Nutrition Program, Fresh Access Bucks-Receive double the fresh produce at participating SNAP farmers markets- Realize Bradenton, Justice MAP, Census SNAP data.</b>				
<b>SMART Objectives</b>	<b>Activities</b>	<b>Progress</b>	<b>Measures</b>	<b>Action Team</b>
<p>A. By 2023, Increase participation in UF/IFAS Extension Family Nutrition Program (FNP) to SNAP-eligible recipients by 10% from baseline of 2,124 participants (Health Equity).</p> <p><b>Increasing proportion of women who had a healthy weight before pregnancy: Baseline: 40.1,% November 2020 Target: 47.1%. December 2023</b></p> <p>Reduce diabetes death rate per 100,000: Baseline: 15.3, November 2020 Target: 11.4, December 2023</p>	2.A.1 Develop a toolkit that includes recruitment materials that can be shared by June 2021.		<p>Toolkit, zip code % of SNAP eligibility per, list of partners in zip codes, % of population receiving materials.</p>	<p>Manatee County Government Parks and Natural Resources, UF IFAS (Family Nutrition Program), DOH-Manatee, The Multicultural Health Institute, Manatee Chamber of Commerce, American Heart Association.</p>
	2.A.2 Identify zip codes where SNAP-eligibility is 30% or higher by October 2021.			
	2.A.3 Identify community partners within the identified zip codes that will assist in promotion of the FNP using provided recruitment materials by December 2021.			
	2.A.4 Track quarterly growth of program participants in years 2 and 3 to achieve 10% growth year over year by December 2023. <ul style="list-style-type: none"> <li>10% growth by 2022, as baseline and 15% growth by 2023</li> </ul>			
<p>B. By 2023, Increase participation in Community Gardens and/or Garden Education by 10% from a baseline of 500 participants.</p> <p><b>Increasing proportion of women who had a healthy weight before pregnancy:</b></p>	2.B.1 Develop informative and recruitment collateral to share with community partners by June 30, 2021.		<p>Number of plots used number of memberships.</p>	<p>Manatee County Government Parks and Natural Resources, UF IFAS (Family Nutrition Program), DOH-Manatee, The Multicultural</p>
	2.B.2 Disseminate collateral to community partners by September 2021.			
	2.B.3 Track quarterly participation and retention in			

<b>Baseline: 40.1,% November 2020</b> <b>Target: 47.1%. December 2023</b>  Reduce diabetes death rate per 100,000: Baseline: 15.3, November 2020 Target: 11.4, December 2023	community gardens through December 2023.			Health Institute, Manatee Chamber of Commerce, American Heart Association.
	2.B.4 Track quarterly participation in UF/IFAS Extension Manatee County Online gardening events to achieve at least 20% growth in classes per month in year 3 by December 2023.			

**Goal 3:** Increase breastfeeding rates in Manatee County by 2023.

**Resources:** Breastfeeding friendly workplaces, WIC, Manatee Memorial Health’s MOMM’s Place

SMART Objectives	Activities	Progress	Measures	Action Team
<b>A. By 2023, promote the recognition of breastfeeding-friendly workplaces and provide technical assistance to 10 new workplaces (2 Black-owned) to achieve Breastfeeding Friendly Workplaces Award by November 2023. (Health Equity)</b> <ul style="list-style-type: none"> <li>Defined by the Census Bureau as business with African American owners holding at least a 51% stake in the business.</li> </ul> <b>Increasing percentage of Black mothers who initiate breastfeeding:</b>	3.A.1 Identify existing resources for the promotion of Breastfeeding Friendly Workplaces by March 2021.		DOH Manatee WIC Breastfeeding Data Quarterly, Florida CHARTS data, number of partners, number of workplaces, number of materials distributed, number of individuals reached.	Healthiest Weight Florida, Manasota Black Chamber of Commerce, DOH-Manatee WIC, MCR Health, Florida, Manatee Chamber of Commerce, Multicultural Health Institute
	3.A.2 Design additional resources needed to promote Breastfeeding Friendly Workplaces by May 2021.			
	3.A.3 Develop outreach plan to promote Breastfeeding Friendly Workplaces by July 2021.			
	3.A.4 Implement outreach campaign with workplaces for Breastfeeding Awareness Month Campaign in August 2021 (annually 2022, 2023).			
	3.A.5 Implement outreach plan to promote Breastfeeding Friendly Workplaces by September 2021.			

<p>Baseline: 83.3% November 2020 Target: 84%, December 2023</p>	<p>3.A.6 Provide technical assistance to 5 workplaces (1 of 5 Black-owned) to achieve the Breastfeeding Friendly Workplaces Award by January 2022.</p> <ul style="list-style-type: none"> <li>• Additional 5 sites (1 of 5 Black-owned by 2023).</li> </ul>			
<p>B. By December, 2023, increase the percentage of mothers who initiate breastfeeding in Manatee County from 83.3% in November 2020 to 84% (based on 3-year rolling rates).</p> <p>Increasing percentage of Black mothers who initiate breastfeeding: Baseline: 83.3% November 2020 Target: 84%, December 2023</p>	<p>3.B.1 Engage partners in Manatee County that reach prenatal women by March 2021.</p>			
	<p>3.B.2 Collect resources for the promotion of breastfeeding for prenatal women by May 2021.</p>			
	<p>3.B.3 Design outreach plan to promote consistent messages around the benefits of breastfeeding to prenatal women by June 2021.</p>			
	<p>3.B.4 Establish an evaluation plan for outreach by July 2021.</p>			
	<p>3.B.5 Implement outreach campaign with partners reaching prenatal women for Breastfeeding Awareness Month Campaign in August 2021 (annually 2022, 2023).</p>			
	<p>3.B.6 Implement outreach plan by September 2021.</p>			
	<p>3.B.7 Evaluate effectiveness of outreach by January 2022 and ongoing.</p>			

**Strategic Issue 2: How can we improve diabetes outcomes in Manatee County?**

**Goal 1:** Increase access to diabetes medication, testing and treatment and support by 2023.

**Resources:** Manatee County Medical Society, Insulin program with, DSMP, Mobile Medical Units

SMART Objectives	Activities	Progress	Measures	Action Team
<p>A. Develop a referral system for patients with diabetes to gain access to necessary services and medical care by October 2021.</p> <p>Reduce diabetes death rate per 100,000: Baseline: 15.3, November 2020 Target: 11.4, December 2023</p>	<p>1.A.1 Identify diabetes services in Manatee and telehealth options</p> <p>1.A.2 Connect with others in team</p> <p>1.A.3 Develop referral process</p> <p>1.A.4 Train diabetes service providers, and medical professionals on referral sources.</p> <p>1.A.5 Outreach to diabetes patients to promote awareness and use of referral process.</p> <p>1.A.6 Evaluate referral process and outreach efforts.</p> <p>1.A.7 Routinely update resources.</p>		<p>List of diabetes services, providers and medical professionals, referral process.</p>	<p>DOH-Manatee, MCR Health, and Manatee Memorial, American Heart Diabetes</p>
<p>B. Work with Manatee Medical Society to recruit two Endocrinologists by October 2023.</p>	<p>1.B.1 Research and define the need for additional endocrinologists by April 2021.</p>			<p>MCR Health, DOH-Manatee Memorial Hospital, Manatee Medical Society</p>

<p>Reduce diabetes death rate per 100,000:          Baseline: 15.3, November 2020          Target: 11.4, December 2023</p>	<p>1.B.2 Approach Manatee Medical Society with evidence of need for Endocrinologists by June 2021.</p>			
	<p>1.B.3 Determine capacity of partner organizations and Manatee Medical Society to employ two Endocrinologists by August 2021.</p>			
	<p>1.B.4 Address barriers of partner organizations to employ two Endocrinologists by November 2021.</p>			
	<p>1.B.5 Develop recruitment plan for two Endocrinologists by December 2021.</p>			
	<p>1.B.6 Implement recruitment plan by February 2022.</p>			
	<p>1.B.7 Recruit and onboard one Endocrinologist by April 2022.</p>			
	<p>1.B.8 Recruit and onboard additional Endocrinologist by April 2023.</p>			

<b>Youth Development</b>			
<b>Chair: Skip Wilhoit</b>	<b>Co-Chair: Gemma Clayson</b>	<b>DOH Liaison: Kristin Caulley</b>	<b>Monthly Meetings: Second Wednesdays of the month</b>
The Chair should make sure the goals are being achieved and should report back every month.	The Co-chair steps in as back-up if the Chair is not available	The DOH liaison is responsible for collecting meeting notes from the CHIP committee; ensuring that either the Chair/Co-Chair is presenting updates, progress and any requests at monthly MHCA meetings.	
<b>Committee Members:</b> Skip Wilhoit (Manatee County School District), Evelyn Almodovar (Healthy Teens Manatee), Mary Ann Legler (Healthy Teens Manatee), Ally Bergmann (North River Prevention Partners), Dr. Bill Colgate (MCR Health), Ansley Mora (Gulfcoast South AHEC), Belisa Marochi (DOH-Manatee), Kristin Caulley (DOH-Manatee), Gemma Clayson (Centerstone), Carol Peters (DOH-Manatee), Kelly Benford (Parenting Matters), Lisa Davis (Family Resources INC), Kim Ross (Whole Child Manatee), Renita Houston (Children's Home Society), Heather Keegan (Manatee County School District), Jodi O'Meara (Manatee County School District), Catherine Rees (DOH-Manatee)			
<b>PURPOSE: To improve the physical, social/emotional and mental health of youth in Manatee County.</b>			
<b>Strategic Issue: How do we improve youth development?</b>			
<b>Goal: 1:</b> To improve physical, social/emotional health outcomes for youth by increasing the delivery of age and developmentally appropriate education and support, by 2023.			
<b>Resources: Sample programs:</b>			
<b>Sexual Health</b> - Healthy Teens summer and after school programming, School District of Manatee County TAPP program, school nurses, Insight Counseling.			
<b>Substance Abuse &amp; Vaping</b> - AHEC's Youth Vaping Cessation Program, Centerstone, Drug-Free Manatee, Healthy Teens Coalition Teen Health Educators, Youth In Action, Centerstone delivery of Too Good For Drugs II, Health Department/School District vaping Intervention course.			
<b>Mental Health</b> – Centerstone on-campus counseling services, School District threat assessment process, Healthy Teens Coalition Teen Health Educators			
<b>Social-Emotional Learning</b> – The School District of Manatee County's implementation of Character Strong, SNAP program (Family Resources), Healthy Teens Coalition Teen Health Educators.			
<b>DOH-Manatee</b> -School Health monthly/yearly report			
<b>Resources</b> -Grant for Health Relationships, Manatee Educational television, media partner, social media, PTO groups, School Advisory Committee, Parenting Matters, Hanley Institute, Manatee County School District: videos and workshop materials for families and caregivers to increase child wellness in diversity/inclusion, empathy, critical thinking, communication, problem solving, peer relations through			

the Sanford Harmony National University System, 40Carrots, SNAP program, Family Network on Disabilities, Trauma Leadership Core Grant

SMART Objectives	Activities	Progress	Measures	Action Team:
<p>A. Improve physical, social/emotional health outcomes for youth by providing age and developmentally appropriate education and support, by 2023.</p> <p>Reduce teen deaths from suicide per 100,000 Baseline: 15.9, November 2020 Target: 12.8, December 2023</p> <p>Reduce pregnancies among adolescent females per 1,000: Baseline: 31.4, November 2020 Target: 22.5, December 2023</p>	<p>1.A.1 Develop an inventory of health education reaching Manatee County youth by end of March of 2021. Data will include:</p> <ul style="list-style-type: none"> <li>o Number of students or classrooms reached,</li> <li>o Subtopics covered under each of the 4 topics</li> <li>o Partner program delivering each topic.</li> </ul> <p>1.A.2 Determine what is needed to expand program reach in each area by June of 2021.</p> <p>1.A.3 Identify outcome measures that are to be monitored for each topic area by June of 2021.</p> <p>1.A.4 Monthly progress reports from each partner organization on expansion and student engagement activities.</p> <p>1.A.4 Quarterly student outcome data for progress monitoring.</p> <p>1.A..5 Annual report completed by November of each year.</p>		<p>Spreadsheet of health education programs reaching Manatee County Youth, topics included and participation numbers, biannual data reporting from each partner organization on number of students served in each program and topic area, monthly progress reports from each partner organization.</p>	<p><b>Sexual Health -</b> Healthy Teens Coalition of Manatee</p> <p><b>Substance Abuse &amp; Vaping -</b> AHEC &amp; Drug-Free Manatee, North River Prevention Partners, Healthy Teens Coalition Teen Health Educators</p> <p><b>Mental Health –</b> Centerstone, School District of Manatee County, Healthy Teens Coalition Teen Health Educators</p> <p><b>Social-Emotional Learning –</b> The School District of Manatee County, Healthy Teens Coalition Teen Health Educators</p>

<p>B. Improve the knowledge, skills and behaviors of parents/caregivers to support healthy behaviors for youth, by 2023.</p> <p>Reduce teen deaths from suicide per 100,000 Baseline: 15.9, November 2020 Target: 12.8, December 2023</p> <p>Reduce pregnancies among adolescent females per 1,000: Baseline: 31.4, November 2020 Target: 22.5, December 2023</p>	1.B.1 Design survey tool to assess parents/caregiver's knowledge and skills to support healthy behaviors in youth to establish baseline knowledge and skills. (survey, focus groups, key informant interviews) by June 2021.		pre-post assessments of education offerings, participation numbers, development of materials/programs etc., rates of issues addressed in education offerings, Family Resources report, Whole Child Manatee Parent Questionnaire (# of families that complete)	School District of Manatee, Parenting Matters, Family Resources, Whole Child Manatee, North River Prevention Partners, Centerstone
	1.B.2 Conduct a survey by September 2021.			
	1.B.3 Collect resources and opportunities for parents/caregivers to receive culturally sensitive and linguistically appropriate resources and information to support healthy behaviors for youth by November 2021 and ongoing.			
	1.B.4 Design evaluation of opportunities by December 2021.			
	1.B.5 Recruit parents/caregivers for participation by January 2022 and ongoing.			
	1.B.6 Implement and evaluate by May 2022 and ongoing.			

**Goal 2:** Improve access and reduce barriers to physical and mental health services for youth, by 2023.

**Resources:** Manatee County Schools, Schools Based Health Center Task Force, National School based Health Alliance, Manatee County Rural Health Services (community health partner).

SMART Objective	Activities	Progress	Measures	Action Team
A. Increase awareness and access to the school-based health clinics in Manatee County by 2023. By increasing access	2.A.1 Identify and prioritize barriers to access and awareness of school-based health clinics by May 2021.		Number of students with return signed consents to access services, number of students with consents on file will be seen for medical appointment, number of students with a consent on file will have utilized counseling/medical services, number of	Manatee County Schools, MCR Health, Healthy Teens Manatee
	2.A.2 Identify opportunities to address barriers for students and families to access school-based health clinic by June 2021.			
	2.A.3 Develop outreach to address barriers to of students and families to			

<p>to SBHC's and keeping track of current measures this will support need for future SBHC's in SDMC.</p> <p>Reduce teen deaths from suicide per 100,000 Baseline: 15.9, November 2020 Target: 12.8, December 2023</p> <p>Reduce pregnancies among adolescent females per 1,000: Baseline: 31.4, November 2020 Target: 22.5, December 2023</p>	<p>accessing school-based health clinic by August 2021.</p>		<p>suspensions, high school graduation rate per school based-health center school, number of dental visits, number of vision visits.</p>
	<p>2.A.4 Evaluate outreach efforts by January 2022 and ongoing.</p>		
	<p>2.A.5 Participate in the ongoing efforts to establish additional school-based health centers in Manatee County March 2021 and ongoing.</p>		
	<p>2.A.6 Contribute to the determination of services offered as part of the school base health centers by October 2023. Services may include the following:</p> <ul style="list-style-type: none"> <li>a. Annual Well Child Exams/Sports Physicals</li> <li>b. Immunizations</li> <li>c. Some labs/tests done on campus/others sent to LabCorp</li> <li>d. Annual Risk Assessment which includes education/discussion on alcohol, tobacco, drugs and sexual health.</li> <li>e. Sick Visits</li> <li>f. Counseling Services</li> <li>g. Vision Bus</li> <li>h. Dental Bus</li> </ul>		

## HOW TO USE THE CHIP

The four priority issues committees are responsible for implementing the plan activities and demonstrating progress to the MHCA monthly. In addition, action team members have been added to support each goal and objective as needed. In an annual report completed in November, the MHCA will evaluate progress and complete an annual report.

Following the MAPP process to create a community health assessment and improvement plan includes a diverse group of Manatee County community members—anyone who works, learns, lives, and plays in the community. “Community members have expertise about what works well in their community, what issues affect their ability to live healthy lives, and resources in the community that they can use to improve health” (NACCHO 2013, MAPP Handbook, p. 8). Community members play a key role in understanding priority health issues and using this plan to improve the health of the community.

### Community Residents

- Volunteer to help groups that support the strategic health issues identified in this county.
- Stay informed on the top health issues in the community and speak with community leaders about these issues.

### Faith-based Groups

- Connect your organization or individual members with specific activities they can support in the CHIP Scorecard (i.e., community gardens, promoting breastfeeding among moms).

### Health Care Workers

- Share this plan with your colleagues and staff.
- Participate in a strategic issue or specific activities that require professionals (i.e., cultural and linguistically appropriate services).
- Understand the barriers related to priority health issues and help create solutions for removing them.
- Refer patients to resources or education in alignment with the identified health priorities.

### Educators

- Share this plan with your colleagues, staff, and parents.
- Promote activities and resources among students and faculty (i.e., school based-health clinics).
- Provide knowledge and expertise about the school system to Youth Committee members.

### Public Health Professionals & Non-Profit Organizations

- Support the Community Scorecard with education, facilitation, direction, knowledge or specific activities.
- Combine efforts for greater impact when a strategic issue aligns with your organization’s mission or vision.

### Government Officials

- Understand the priority health issues and barriers to good health in the community.

- Mobilize community leaders to support policy or program changes that advance the health of the community.

In October 2020, a new online interactive dashboard called mySidewalks was launched at the Manatee Healthcare Alliance meeting. The Manatee County Community Dashboard is an interactive site that allows everyone access to Manatee County health information on one platform and provides a comprehensive understanding of our community's health issues.

The Dashboard delivers a new level of intelligence and transparency to the health of our community by turning health data into actionable information. The dashboard is designed to be mobile-friendly, and anyone can access and learn from the data. It allows a story to be told using visualizations, including maps, charts, tables, and more. The data visualizations can be instantly applied to a report, to a dashboard, or even a grant application. This feature is what led the Manatee Healthcare Alliance to choose mySidewalks. Users have the freedom to choose how their data is visualized and make it relevant for any audience. For example, if you are writing a grant, you can export graphs. The dashboard can also be used by a business or by a member of the community if they want to learn more about the health of our community.

The sidebar provides an outline of the pages within the dashboard. The information is organized across the lifespan, from birth to end of life. For instance, healthy beginnings contain data from 0 to five years old, healthy learners has data for those K-12, then healthy adults, and healthy aging for areas regarding seniors and older adults. Healthy beginnings, healthy learners, healthy adults and healthy aging data are also organized by social and environmental factors, behavioral factors, and health outcomes. It contains more than 100 data insights into the social, economic and environmental factors of our community, allowing us to discover how to best address health issues within Manatee County and meet the needs of our constituents.

The Manatee County Community Dashboard is a new tool that will support communication and use of the Manatee Community Health Assessment and Community Health Improvement Plan.

## REFERENCES

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## Abbreviations

CHA – Community Health Assessment.

CHIP – Community Health Improvement Planning or Community Health Improvement Plan.

CHS Assessment – Community Health Status MAPP Assessment.

CTS Assessment – Community Themes and Strengths MAPP Assessment.

DHHS – US Department of Health and Human Services.

DOH – Florida Department of Health.

DOH-Manatee – Florida Department of Health in Manatee County.

Florida CHARTS – Florida Department of Health, Community Health Assessment Resource Tool Set.

FoC Assessment – Forces of Change MAPP Assessment.

HW – Healthiest Weight Florida Initiative

IFOC – International Fellowship of Chaplains.

LPHS Assessment – Local Public Health System MAPP Assessment.

MAPP – Mobilizing for Action through Planning and Partnership.

MEBH – Mental, Emotional, and Behavioral Health.

MHCA – Manatee Healthcare Alliance.

NACCHO – National Association of County and City Health Officials.

PDMP – Prescription Drug Monitoring Program.

PHAB – Public Health Accreditation Board.

RWJF – Robert Wood Johnson Foundation.

SA – Substance Abuse.

SNAP/EBP – Supplemental Nutrition Assistance Program /Electronic Benefits Transfer.

SUID – Sudden Unexpected Infant Death.

Appendix A: Results Top 10 Issues

Top 10 Health Problems/Outcomes	Community Survey	Focus Groups-Seniors	Focus Groups-Youth	Key Informant Interviews	County Health Rankings	Mentioned in Forces of Change
1	Substance Abuse	Diabetes	Mental Health	COVID-19	Premature Death	Pandemic/COVID-19
2	Mental Health	Orthopedics	Substance Abuse	Mental Health		Mental health
3	Infectious Disease/Covid-19	Mental Health	STIs	Substance abuse		Obesity
4	Child abuse/neglect	Dental/Oral Health	Obesity	Social Isolation		Sense of Community
5	Cancer			Traffic/Safety		
6	Heart Disease			Breast Cancer		
7	End of life care			Teen Pregnancy		
8	Diabetes			STI		
9	Motor vehicle crashes			Dementia		
10	Dental/Oral Health			Dental/Oral Health		

Top 10 Health Factors	Community Survey	Focus Groups-Seniors	Focus Groups-Youth	Key Informant Interviews	County Health Rankings	Mentioned in Forces of Change
1	Substance Abuse	Nutrition	Racial, Ethnic and Economic Disparities	Affordability	Adult Smoking	Population Growth/Development
2	Weight/nutrition	Road safety/traffic	Nutrition	Homelessness/Poverty	Adult Obesity	Racial, Ethnic, Economic Disparities

3	Crime		Road safety/traffic	Provider Limitations (Medicaid)	Uninsured	Access to Healthcare/Chronic Disease Management
4	Mental Health			Mental Health (stigma)	High school graduation	Youth Development
5	Lack of Preventative care/vaccines and screening			Food insecurity	Violent crime	Environment
6	Discrimination			Laziness		Public Mistrust of science and government
7	Dropping out of school			Awareness of Programs/assistance		Economic
8	COVID-19					Funding
9	Homelessness					Crime
10	Oral Health					Technology

Pink-Obesity/Nutrition/Diabetes  
 Yellow-Mental Health  
 Orange-Substance Abuse  
 Dark Green-Access/Affordability  
 Dark Blue-Crime/Traffic/Safety  
 Red-Disparities/Discrimination/Population  
 Gray- Oral/Dental Health  
 Light Blue- Pandemic/COVID-19  
 Purple-Youth development  
 Mint- Seniors

Appendix B: Data for Top 10 Issues

1) Obesity/Nutrition/Diabetes

- County Health Rankings lists adult obesity as an area to explore

Force	Threat	Opportunities
Obesity	<ul style="list-style-type: none"> <li>Rates are very high in minority populations; whites seem to be doing better</li> <li>Food deserts No sidewalks in some neighborhoods so walking is dangerous</li> <li>Fast food consumption</li> </ul>	<ul style="list-style-type: none"> <li>Recreation offerings improving in some areas</li> <li>Community gardens</li> <li>Strategies to increase participation in WIC and SNAP</li> <li>Find way to do online cooking classes · Diabetes education</li> <li>Program to focus on pre-conception weight for women.</li> </ul>

Component A: Size of the Problem			Component B: Seriousness of the Problem			Component C: Effectiveness of Intervention
% of Population Affected by Problem			How Serious Problem is Considered?			Effectiveness of Available Interventions to Reduce or Eliminate the Problem <ul style="list-style-type: none"> <li>Eliminate transportation as a barrier by establishing a transportation network for safe walking and biking.</li> <li>Natural resources in the community like the water, parks, beaches.</li> <li>Education-healthy eating, nutrition and weight control.</li> <li>Treatment of obesity-access, affordability, more community spaces for physical activity.</li> <li>Incentives-employer provided options or cost reductions for maintaining healthy weight.</li> <li>Lack of nutrition counseling availability.</li> <li>Improve access to fresh produce in low-income areas-mobile produce van.</li> <li>Climate-controlled areas to exercise in heat</li> </ul>
% of Adults who are Overweight by Race, Ethnicity and Gender	Manatee	Florida	Age Adjusted Death Rate from Diabetes 2017-2019	Manatee	Florida	
Non-Hispanic White	42.8	35.3	TOTAL	15.3	20.3	
Non-Hispanic Black	29.4	32.7	White	13.9	18	
Hispanic	29.3	40.4	Black	39.9	38.8	
Overall	39.7	35.8	Hispanic	16.4	18.5	
Male	49.6	41.4	Non-Hispanic	15.1	20.8	
Female	28.5	30.1	Age Adjusted Hospitalization Rate from or with Diabetes 2017-2019	Manatee	Florida	
% of Adults who are Obese by Race, Ethnicity and Gender	Manatee	Florida	TOTAL			
Non-Hispanic White	21.2	26.6	White	1,545.10	1931.8	
			Black	4,136.80	4059.2	
			Hispanic	2,457.90	2269.9	
			Age Adjusted Emergency Room	Manatee	Florida	

Non-Hispanic Black	50.6	34	Visits Rate from or with Diabetes 2017-2019			<ul style="list-style-type: none"> <li>• Sidewalks and safe places to walk in all neighborhoods</li> <li>• Free or low-cost community exercise programs</li> <li>• Senior-specific exercise opportunities</li> <li>• Physical education in schools</li> <li>• Social components of exercise-walking groups, family friendly, canine friendly.</li> </ul>	
Hispanic	33.6	27.3					
Overall	25	27.4		TOTAL	228.1		236
Male	25.9	28.3		White	150.8		164.9
Female	24.1	26.6		Black	741.3		554.1
				Hispanic	389.5		207.4
				Non-Hispanic	208		247.6
			*Rates per 100,000				

## 2) Mental Health

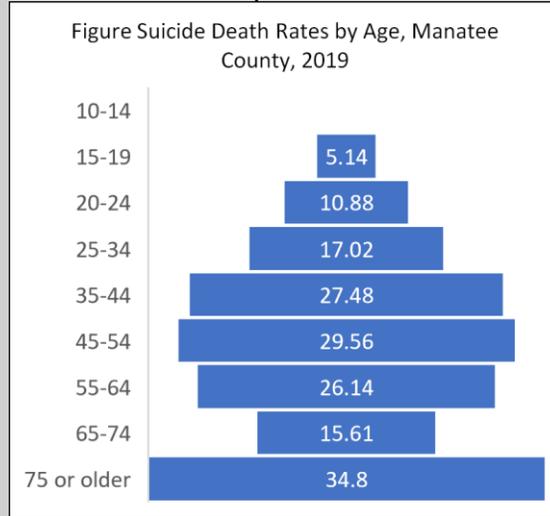
Force	Threat	Opportunities
Increased mental health needs	<ul style="list-style-type: none"> <li>• Social isolation impacting everyone, particularly seniors</li> <li>• Inadequate funding to meet the needs</li> <li>• Stigma</li> </ul>	<ul style="list-style-type: none"> <li>• Brain Health initiative</li> <li>• Senior centers will reopen at some point</li> <li>• Focus on the whole person don't look at mental health in a vacuum</li> </ul>

Component A: Size of the Problem	Component B: Seriousness of the Problem	Component C: Effectiveness of Intervention
<b>% of Population Affected by Problem</b>	<b>How Serious Problem is Considered?</b>	<b>Effectiveness of Available Interventions to Reduce or Eliminate the Problem</b>

Indicator	Count / Percent
Estimated Seriously Mentally Ill Adults*	11,196
Estimated Seriously Emotionally Disturbed Youth Ages 9-17**	3,246
Children in Schools Grades K-12 With Emotional/Behavioral Disability	146
Percent of students, ages 11-17, who in the past year, did something to purposely hurt themselves without wanting to die***	9.7%
Percent of students, ages 11-17, who in the past year, felt sad or hopeless for two or more weeks in a row and stopped doing usual activities***	22.2%
Percent of students, ages 11-17, who did not go to school because they felt they would be unsafe at school or on their way to school in the past 30 days***	4.4%

Age-adjusted Suicide Death Rate 2017-2019	Manatee	Florida
TOTAL	15.9	14.6
White	18.4	16.8
Black	8.4	5.5
Hispanic	5.8	7.7
Non-Hispanic	17.8	16.7

\*Rates per 100,000



Source: Florida Department of Health, Bureau of Vital Statistics

- Need more providers
- Need care that is affordable for everyone
- More screening for depression
- More/better coordination between law enforcement and service providers
- Public education and stigma reduction needed
- Expand health access in schools, for example the existing school health clinics.
- Include social workers and mental health providers.
- Mobile mental health response
- Expand provider networks, including mental health providers.
  - a. Increase Medicaid plan options
  - b. Identify incentives for providers
  - c. Simplify Medicaid billing
  - d. Increase residency positions for both primary care and psychiatry.
- Establish a community based mobile behavioral health model in order to improve flexibility and reach.
- Seniors expressed a very positive mental health status, and several went on to share that they live with their adult children who take very good care of them.
- Young adults discussed the impact the COVID-19 pandemic has placed on mental health by increasing anxiety
- One of the teens described a correlation between mental health, substance abuse, and obesity. In discussing mental health, a participant explained their observation of

Indicator	Count	Rate
Drug and Alcohol-Induced Mental Disorders	920	237

Mood and Depressive Disorders	1946	501		parents taking their stress out on their children creating a cycle of poor mental health.
Schizophrenic Disorders	685	176		
Eating Disorders	52	13		
Hospitalizations Attributable to Mental Disorders	3888	1000		
<b>Hospitalizations for Mental and Behavioral Health Disorders, Manatee County – 2019</b>				

### 3) Substance Abuse

<b>Force</b>	<b>Threat</b>	<b>Opportunity</b>
Increased Substance Abuse	Manatee County continues to have serious substance abuse issues COVID-19 may be contributing to substance abuse as a coping mechanism	Opioid taskforce Approval for needle exchange risk reduction programs in the county

<b>Component A: Size of the Problem</b>	<b>Component B: Seriousness of the Problem</b>	<b>Component C: Effectiveness of Intervention</b>				
% of Population Affected by Problem	How Serious Problem is Considered?	Effectiveness of Available Interventions to Reduce or Eliminate the Problem				
<table border="1" style="width: 100%;"> <tr> <td style="text-align: center;"><b>Non-fatal Overdoses</b></td> <td style="text-align: center;"><b>2017</b></td> <td style="text-align: center;"><b>2018</b></td> <td style="text-align: center;"><b>2019</b></td> </tr> </table>	<b>Non-fatal Overdoses</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>		
<b>Non-fatal Overdoses</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>			

All drug non-fatal overdose emergency department visits	1566	1566	1159
Opioid-involved non-fatal overdose emergency department visits	1083	1083	642
All drug non-fatal overdose hospitalizations	508	508	460
Opioid-involved non-fatal overdose hospitalizations	196	196	141

Indicator	Manatee County	Florida
% Adults current smokers	19.7%	15.5%
% of females who are smokers	12.3%	13.3%
% of males who are smokers	27%	17.8%
Adults age 18-44 who are smoker	29.7%	17.0%
Adults age 45-64 who are smokers	23.0%	19.0%
Adults age 65 and older who are smokers	5.4%	8.4%
% Smokers who earn less than \$25,000/year	43.9%	23.5%
% Adults who tried to quit smoking at least once in the past year	59.9%	62.1%

Unintentional Injury Deaths by Drug Poisoning	
Manatee	32
Florida	22.3
Peer County Average	26.7
Local Health Department	27.8

\*Rates per 100,000

Drug Deaths 2014-2018 by Age, Manatee County					
Age	2014	2015	2016	2017	2018
18 and under	0	1	1	2	0
19-24	8	18	12	11	2
25-34	27	44	55	36	18
35-44	31	37	44	40	27
45-54	17	28	40	36	22
55-64	14	24	27	17	18
65-74	2	5	6	5	8
75 & over	0	2	0	1	3

Source: District 12 Medical Examiner Comprehensive Drug Death Report 2003-2018

Type	January-June 2019	January-June 2020	% Change
Fatal overdoses All drugs	68	74	8.8%
Fatal Overdoses Opioids	62	62	0%
Non-Fatal Overdoses-All Drugs	670	829	23.7%

- Educate community about the ability to turn in drugs to the Sherriff's department safely without facing any charges.
- Enforce prohibition of sales of tobacco and vaping supplies to minors.
- Ban alcohol sales at public events. Ban all tobacco use in public.
- Smoking cessation classes needed.
- Drug court to divert addicts away from criminal system.
- More education and awareness for prescription drug abuse
- Law enforcement to prevent illegal drugs from entering the County
- More treatment providers, expand continuum of care
- Need affordable treatment
- Invest in prevention
- Stigma reduction
- Focus on healthy family education that includes treatment of mental illness and financial wellbeing courses to ensure that children are not being abused at home and feeding a cycle that leads to

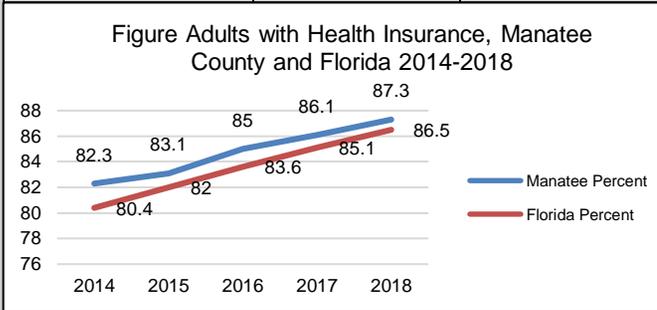
Percent Current Tobacco Use and Second-hand Smoke Exposure, Manatee County and Florida, 2020					Non-fatal Overdoses Opioids	341	459	34.6%	unsafe behaviors and addiction <ul style="list-style-type: none"> <li>• Need more treatment-wait time to get into it can be a problem</li> </ul>
Area	2014	2016	2018	2020					
Manatee	31.7	30.5	32.1	30.9					
Peer Average	28.4	30.5	32.6*	29.8					
Nearest LHD	37.2	18.8	n/a	13.9					
Florida	30.7	32.8	33.1	32.5					

#### 4) Access/Affordability

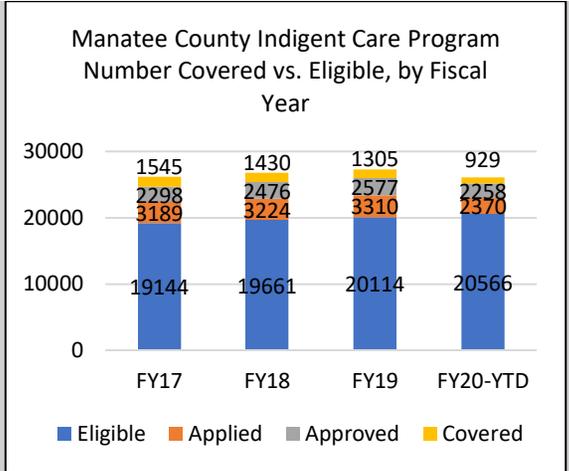
Forces of changes evaluated several components of Access and Affordability including, Development to Accommodate Growth, Access to Healthcare/Chronic Disease Management, Economic.

Component A: Size of the Problem			Component B: Seriousness of the Problem			Component C: Effectiveness of Intervention
% of Population Affected by Problem			How Serious Problem is Considered?			Effectiveness of Available Interventions to Reduce or Eliminate the Problem <ul style="list-style-type: none"> <li>• Expand provider networks, including mental health providers.               <ul style="list-style-type: none"> <li>○ Increase Medicaid plan options</li> <li>○ Identify incentives for providers</li> <li>○ Simplify Medicaid billing</li> <li>○ Increase residency positions for primary care and psychiatry.</li> </ul> </li> <li>• Remote Area Medical Program               <ul style="list-style-type: none"> <li>○ A two-day effort where medical professionals volunteer and to provide free healthcare.</li> </ul> </li> <li>• Diversify and increase marketing of programs and services.</li> </ul>
% of Individuals living below Poverty Level 2015-2018	Manatee	Florida	Total Licensed providers (Fiscal Year) Rate per 100,000	Manatee	Florida	
Non-Hispanic White	11.1	12.7	Dentists	117.4	56.7	
Non-Hispanic Black	26.2	23.5	Physicians	952.9	310	
Hispanic	24.7	18.9	Family Practice Physicians	49.5	19.2	
Overall	12.5	14.8	Internists	131.6	27.5	
Hispanic	24.7	18.9	OB/GYN	19.1	9.3	
% of Children less than 5 years old Living in Poverty	Manatee	Florida	Pediatricians	84.1	22	
2018	20.8	23.6	% of Adults who did not see a Doctor in the Past year due to Cost, 2016	15.4%	16.6%	
Homeless Estimate Manatee						
2020	466					
2019	541					

Income level, 2018	% Uninsured in Manatee County	% Uninsured in Florida
<= 138% FPL	24.2	22.3
200% FPL	34.7	30.9
Between 138 and 400% FPL	24.2	22.3
<= 400% FPL	27.6	25.3



US Bureau of the Census, American Community Survey, Table S2701.



Source: Manatee County Government, Neighborhood Services Department

- In 2019 it was estimated that 28.4 % of Manatee County population lives within .5 mile of park compared with 45.2% for Florida.
- 4.9% of households in Manatee County have no vehicle available

- Collaborate between organizations, programs and systems.
  - Coordinate services to reduce duplication of efforts.
- Develop affordable housing to support infrastructure.
- Expand health access in schools, for example the existing school health clinics.
  - Include social workers and mental health providers.
- Eliminate transportation as a barrier by establishing a transportation network for safe walking and biking.
- Advocate for Medicaid expansion
- Employ “Zero Initiative” approach to reduce homelessness.
- Take services to the community members to eliminate barriers.
  - Increase access and provide multiple services at once like food distribution, childcare, housing assistance, job placement etc.
- Affordability of care and insurance is the most cited need
- Cultivate public/private partnerships where private entities are immersed in the community and have established trust and can elevate resources more efficiently.
- Community based mobile behavioral health model in order to improve flexibility and reach.
- Solutions to enable small businesses to afford to offer medical coverage to employees.

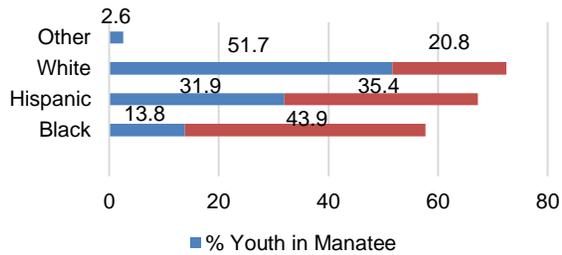
### 5) Crime/Traffic/Safety

County Health Rankings considers violent crime to be an area to explore in Manatee County.

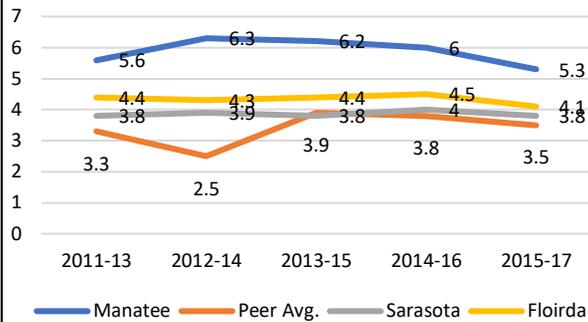
Force	Threat	Opportunity
Crime	<ul style="list-style-type: none"> <li>Domestic abuse, sexual abuse and child marriage. May be more hidden during pandemic.</li> <li>Racial inequities in prosecution and sentencing</li> </ul>	<ul style="list-style-type: none"> <li>Task force to look at inequities</li> <li>Training community on domestic violence, human trafficking and child abuse</li> </ul>

Component A: Size of the Problem	Component B: Seriousness of the Problem	Component C: Effectiveness of Intervention																																																
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Juvenile Justice Disproportionate Minority Contact/Racial Ethnic Disparity Benchmark FY 2018-2019



Comparison Alcohol-suspected Motor Vehicle Traffic Crash Death Rates per 100,000 Population, 3-year Rolling Rates, 2011-2017



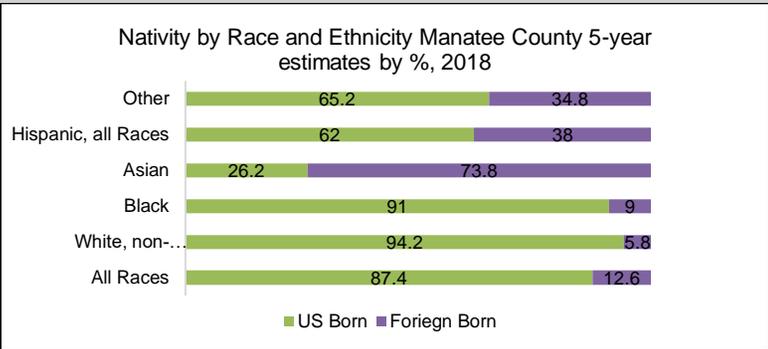
\$120 bond). Stricter laws on 2nd offenses.

- Stricter driving regulations and no driving of Seniors who can't hear, can't see, can't turn to see etc.
- Minority populations often struggle with trusting law enforcement with respect to how their race is perceived and the realities of their immigration status.
- Educate community about the ability to turn in drugs to the Sherriff's department safely without facing any charges.
- Beautification of higher crime areas.

## 6) Disparities/Discrimination/Population

Force	Threat	Opportunity
Racial, Ethnic and Economic Disparities	<ul style="list-style-type: none"> <li>• Social unrest</li> <li>• Lower graduation rates among minorities leading to lower earning capacity later</li> <li>• Inequity in juvenile justice system</li> <li>• Lower wages for minorities</li> </ul>	<ul style="list-style-type: none"> <li>• Develop and implement community-based and employer education on social and economic disparities and how to improve opportunities for all</li> <li>• Develop county-wide initiative to look for solutions</li> <li>• Identify specific interventions that can address inequities and implement programs that have shown success</li> </ul>

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<p style="text-align: center;">% of Population Affected by Problem</p> <p style="text-align: center; background-color: #e6f2ff;">2020 population estimate of <b>413,253, Manatee County</b> is the 14th most densely populated county in Florida out of 67 counties</p> <div style="text-align: center;"> <p>MANATEE COUNTY POPULATION PROJECTIONS 2020-2040</p> <table border="1"> <caption>Manatee County Population Projections (2020-2040)</caption> <thead> <tr> <th>Year</th> <th>White</th> <th>Non-Hispanic White</th> <th>Hispanic</th> <th>Non-White</th> <th>Black</th> <th>Non-Hispanic Black</th> </tr> </thead> <tbody> <tr> <td>2020</td> <td>395,789</td> <td>274,437</td> <td>74,938</td> <td>51,900</td> <td>40,910</td> <td>37,692</td> </tr> <tr> <td>2025</td> <td>434,554</td> <td>292,558</td> <td>89,460</td> <td>59,079</td> <td>46,529</td> <td>42,701</td> </tr> <tr> <td>2030</td> <td>466,461</td> <td>307,634</td> <td>101,297</td> <td>84,934</td> <td>51,139</td> <td>46,827</td> </tr> <tr> <td>2035</td> <td>493,845</td> <td>320,381</td> <td>111,580</td> <td>70,041</td> <td>55,126</td> <td>50,375</td> </tr> <tr> <td>2040</td> <td>519,183</td> <td>332,031</td> <td>121,205</td> <td>74,810</td> <td>58,845</td> <td>53,682</td> </tr> </tbody> </table> </div>	Year	White	Non-Hispanic White	Hispanic	Non-White	Black	Non-Hispanic Black	2020	395,789	274,437	74,938	51,900	40,910	37,692	2025	434,554	292,558	89,460	59,079	46,529	42,701	2030	466,461	307,634	101,297	84,934	51,139	46,827	2035	493,845	320,381	111,580	70,041	55,126	50,375	2040	519,183	332,031	121,205	74,810	58,845	53,682	<p style="text-align: center;">How Serious Problem is Considered?</p> <p style="text-align: center;">Life Expectancy Manatee County and Florida, Three-year Rolling Rate 2017-2019</p> <table border="1"> <caption>Life Expectancy Comparison (2017-2019)</caption> <thead> <tr> <th>Group</th> <th>Manatee County</th> <th>Florida</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td>78</td> <td>77</td> </tr> <tr> <td>Females</td> <td>83.7</td> <td>82.6</td> </tr> <tr> <td>White</td> <td>81.1</td> <td>80</td> </tr> <tr> <td>Black</td> <td>75.8</td> <td>77.7</td> </tr> <tr> <td>Hispanic</td> <td>85.5</td> <td>83.6</td> </tr> <tr> <td>Non-Hispanic</td> <td>80.4</td> <td>78.9</td> </tr> </tbody> </table> <ul style="list-style-type: none"> <li>• Blacks have higher rates of death from cancer, diabetes, heart disease and HIV/AIDS than other races or Hispanic/Latinos of any race.</li> </ul>	Group	Manatee County	Florida	Male	78	77	Females	83.7	82.6	White	81.1	80	Black	75.8	77.7	Hispanic	85.5	83.6	Non-Hispanic	80.4	78.9	<p style="text-align: center;">Effectiveness of Available Interventions to Reduce or Eliminate the Problem</p> <ul style="list-style-type: none"> <li>• Many disparities are missed or not addressed with current system. Ask those impacted, ask those outside of traditional systems</li> <li>• Florida Healthy Babies: A statewide collaborative to positively influence social determinants of health and reduce racial disparities in infant mortality</li> <li>• Disparities existing in specific areas of the county, like Palmetto (34222), Ellenton (34208), and downtown Bradenton (34208) and 34205.</li> <li>• Minority groups need a better structure in place like education and decent wages.</li> </ul>
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- Whites have higher death rates from CLRD and stroke than other races or Hispanic/Latinos of any race.
- Blacks also have higher number of years of potential life lost than other races, but men overall have the highest number of years of potential life lost.
- Infant mortality rate for black infants is 3.9 points higher in Manatee County than the entire state

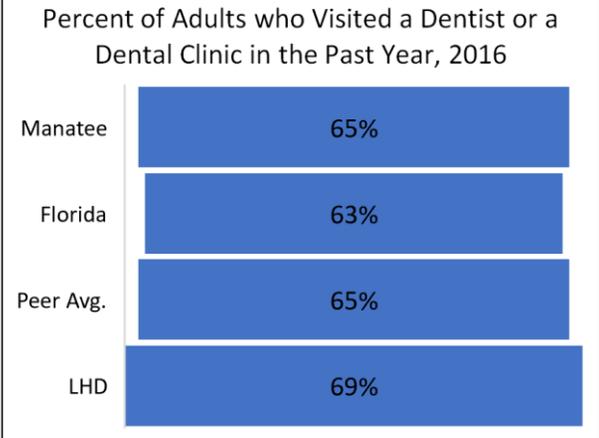
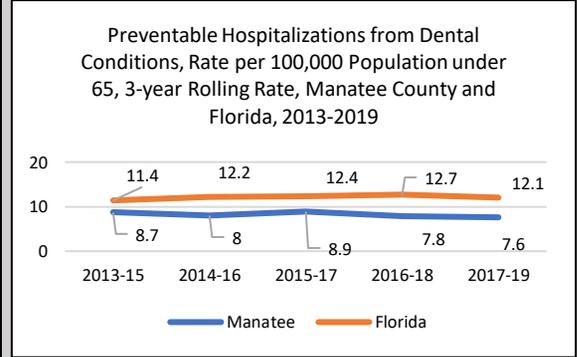
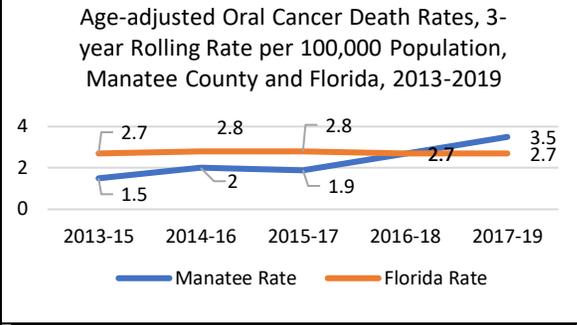
- Despite schools assisting in distribution of food, there are many challenges, especially for people of color, to maintain healthy diets.
- Need for community dialog around equity issues
- Need to have more diversity at decision-making level
- Address discrimination and disparities with LGBTQIA for example, insurance exclusions in County insurance
- Focus on disparities between Blacks and whites, low-income and high income.
- Housing, health care, and jobs with livable wages to address equity needs
- Awareness of cultural differences and to not be judgmental over differences

**7) Oral/Dental Health**

Component A: Size of the Problem	Component B: Seriousness of the Problem	Component C: Effectiveness of Intervention
% of Population Affected by Problem	How Serious Problem is Considered?	Effectiveness of Available Interventions to Reduce or Eliminate the Problem

In 2016 35% of adults in Manatee County did not visit a dentist or dental clinic in the past year

Health and Healthcare Availability, 2016	% Manatee	% Florida
Visited a dentist or dental clinic in past year 65+	70.8	68.4
Permanent tooth removed because of tooth decay or gum disease 65+	69.5	70.2



- Department of Health & Human Services HPSA website, the designations include the following:
  - Dental Health Professional Shortage Area- Low Income Population; Bradenton and Palmetto/Parrish

# of Licensed	Manatee Number	Manatee Rate Per 100,000	State Rate Per 100,000

- Oral health is underutilized due to cost, fear and lack of insurance
- Improve access to dental care
- Access to affordable pediatric dental care
- Third year LECOM dental students do a dental clinic for underserved/underinsured children
- In focus groups, when asked about oral health, only one of the senior participants said that they regularly see a dentist. Two of the participants share that they wear dentures and as a result, assumed dental care was not necessary.
- Legislature has taken up the issue of licensing dental therapists in Florida which could expand care options
- Turning point medical and dental clinic
- The Healthy People 2030 national health target is to increase the percent of persons served by community water systems with optimally fluoridated to 77.1 percent. Manatee County's current rate of 100% meets the national target.
- Statewide Medicaid Managed Care (SMMC) program
  - Provides dental services to children and adult Medicaid recipients who are eligible to receive dental benefits.

Provide rs 2019					
Dentists	235	60.5	56.7		

### 8) Pandemic/COVID-19

Force	Threat	Opportunity
Pandemic, New Disease Outbreaks	<ul style="list-style-type: none"> <li>• Lack of political support and funding</li> <li>• Public mistrust of science/politicization of response,</li> <li>• Economic collapse</li> <li>• High unemployment and loss of health insurance</li> <li>• Increasing medical costs</li> <li>• Long-term disability and higher death rates</li> <li>• Strain on health care system and providers</li> <li>• Small business failures</li> <li>• Funding allocations not enough</li> </ul>	<ul style="list-style-type: none"> <li>• Collaboration with local experts, partners and regional responses</li> <li>• Epidemiological improvements (testing, contact tracing, vaccination)</li> <li>• Development of public responses based on experience to mitigate some impacts</li> <li>• Use of technology to do things differently</li> <li>• New vaccines in development</li> </ul>

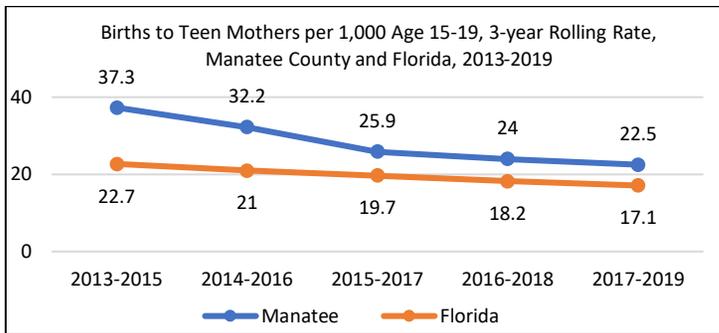
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% of Population Affected by Problem				How Serious Problem is Considered?			Effectiveness of Available Interventions to Reduce or Eliminate the Problem	
<b>Indicator as of 11/10/2020</b>		<b>Measure</b>		Total hospitalizations and Deaths by			<ul style="list-style-type: none"> <li>As a result of COVID-19, unemployment reached 11.8% in May of 2020, 9.5% in July 2020, and 6.3% in August 2020.</li> <li>COVID-19 has also resulted in the delay of health screenings such as colonoscopies, mammograms and routine blood work due to fears of contracting the virus in a medical setting even for those with insurance</li> <li>People with employer -sponsored health insurance may have lost coverage as a result of lay-offs and business closings.</li> <li>Mask mandate</li> <li>Find better ways to educate people about the facts</li> <li>Testing needs to be accessible and free</li> <li>Resources needed to address mental health impact of COVID</li> <li>Need consistent messaging and policies and enforcement of regulations</li> <li>Plan for vaccine deployment should be shared</li> <li>Expanded public health screenings for infectious diseases (STD's, HIV, COVID, etc.)</li> <li>Changing home environment where kids are home due to COVID-19 and have too much time on their hands.</li> <li>Impact COVID-19 has placed on the pressures of women both at home and in the workplace.</li> </ul>	
Total Number of Cases (residents)		14,318		<b>Race/Age</b>	<b>Hospitalizations</b>	<b>Deaths</b>		
Total Number of Cases (non-residents)		162		% White	65%	71%		
Number Pediatric cases (residents under age 18)		1,683		% Black	18%	16%		
Cases among residents and staff of long-term care facilities (including transfers)		895 (6% of all cases)		% Other	16%	11%		
Hospitalizations (residents)		913 (7% of all cases)		% Unknown race	2%	1%		
Deaths		340 (2% of all cases)		Age 0-4	0%	0%		
Adult Positivity rate as of 11/9/20		5%		Age 5-14	1%	0%		
Pediatric Positivity Rate as of 11/9/20		11.6%		Age 15-24	2%	0%		
Zip Code		% of Cases		Age 25-34	5%	1%		
34221		14.3%		Age 35-44	10%	3%		
34207		8.8%		Age 45-54	10%	4%		
34203		10.5%		Age 55-64	19%	14%		
34205		9.3%		Age 65-74	20%	19%		
34209		7.1%		Age 75-84	22%	31%		
				Age 85 +	11%	27%		
				Unknown	0%	0%		
				Race and Age through 11/11/2020				

Total % of Cases	65.4%	Race Unknown	19%		<ul style="list-style-type: none"> <li>• Impact the COVID-19 pandemic has placed on mental health by increasing anxiety.</li> <li>• COVID-19 created challenges for senior nutrition programs.</li> <li>• COVID-19 has compounded issues of social isolation.</li> </ul>
		Ethnicity Unknown	21%		

### 9) Youth development

Force	Threat	Opportunity
Youth Development	<ul style="list-style-type: none"> <li>• STI rates increasing</li> <li>• Comprehensive sexual and reproductive health information lacking</li> <li>• Vaping increasing among youth</li> <li>• Services still needed for families that are not fluent English speakers, despite reduction in number of English language learners in school district</li> </ul>	<ul style="list-style-type: none"> <li>• Millage increases to support schools and Children's services fund</li> <li>• SWAT (Students working against tobacco)</li> <li>• AHEC smoking cessation classes</li> <li>• Access to pre-K and head start in the county</li> <li>• Increasing recreational opportunities</li> </ul>

Component A: Size of the Problem	Component B: Seriousness of the Problem	Component C: Effectiveness of Intervention
% of Population Affected by Problem	How Serious Problem is Considered?	Effectiveness of Available Interventions to Reduce or Eliminate the Problem



**Comparison Sexually Transmitted Diseases Summary, 3-year Rolling Average, 2017-2019**

STI	# of cases	3 year rolling rate	FL rate
Early Syphilis	399	35.1	31.3
Infectious syphilis	236	20.8	13.5
Gonorrhea	1626	143	161.7
Chlamydia	4834	425.2	504.2
Bacterial STDs	7074	622.2	716.8

% of students who have ever used smokeless tobacco (chewing tobacco,

Age Cohort	Cause of Death in Rank Order
Under 1 year	Perinatal Condition, Congenital Malformation, Unintentional Injury
1 to 4 years	Unintentional Injury, Congenital Malformation
5-14 years	Unintentional Injury, Heart Disease, CLRD
15-24 years	Unintentional Injury, Homicide, Suicide

Leading Causes of Death by Age, 2019

Indicator	Count / Percent
Estimated Seriously Emotionally Disturbed Youth Ages 9-17**	3,246
Children in Schools Grades K-12 With Emotional/Behavioral Disability	146
% of students, ages 11-17, who in the past year, did something to	9.7%

- Invest in early childhood education/childcare
- Have a variety of educational options including vocational, community college, universities, certificate programs to improve job opportunities for residents
- Health education on wide variety of topics, in K-12
- On-the-job training programs
- Sex education in schools should be comprehensive and not be abstinence only
- Quality childcare as well as education
- challenges teens encounter in accessing care due to hours of operation and transportation.
- teens cannot access sexual health services in school-based health clinics
- Healthy Teens Coalition of Manatee

snuff, or dip), Among all middle and high school students

purposely hurt themselves without wanting to die***	
% of students, ages 11-17, who in the past year, felt sad or hopeless for two or more weeks in a row and stopped doing usual activities***	22.2%
% of students, ages 11-17, who did not go to school because they felt they would be unsafe at school or on their way to school in the past 30 days***	4.4%

	2014	2016	2018	2020
Manatee	31.7	30.5	32.1	30.9
Florida	30.7	32.8	33.1	32.5

**10)Seniors**

2018 population estimates for individuals age 65 and older in Manatee County was 102,252 which represents approximately 27% of the population.

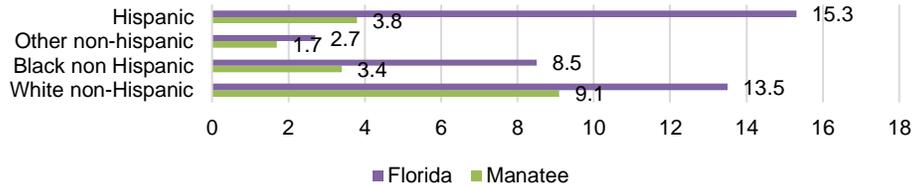
**Component A:  
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### % of Population Affected by Problem

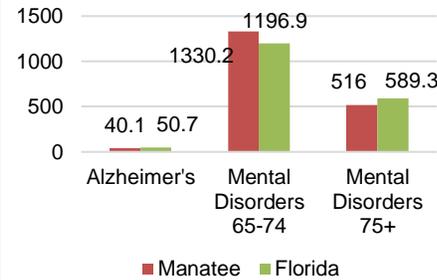
Figure Percent Population age 65+ by Race and Ethnicity, Manatee and Florida, 2018



Health and Healthcare Availability, 2016	% Manatee	% Florida
Reported good, very good or excellent health status 65+	76	75.7
Reported fair or poor health status 65+	24	24.3
Meet aerobic activity recommendations 65+	55.4	45.7
Meet muscle strengthening recommendations 65+	44.2	31
Current smoker 65+	5.4	8.4
Engage in heavy or binge drinking 65+	10.9	8.7
Overweight 65+	48.6	39.7
Obese 65+	23.7	25.8
Have a personal doctor 65+	94.4	93.2
Could not see a doctor due to cost 65+	3.5	5.2
Received a flu shot in past year 65+	57.5	57.4
Ever received a pneumonia vaccine 65+	73.4	65.6
Visited a dentist or dental clinic in past year 65+	70.8	68.4
Permanent tooth removed because of tooth decay or gum disease 65+	69.5	70.2
Ever told they have a depressive disorder 65+	13	11.8

### How Serious Problem is Considered?

Hospitalization Rates per 100,000 Population for Mental Disorders and Alzheimer's Disease, Manatee County and Florida, 2018



People Age 65+% Below Poverty	Manatee	Florida
50% of Poverty	2.9	3.5
75% of Poverty	4.2	6.1
100% of Poverty	7.1	10.3
125% of Poverty	11	15.3
150% of Poverty	15.1	20.6
175% of Poverty	19.9	25.8

### Effectiveness of Available Interventions to Reduce or Eliminate the Problem

- The seniors focus group agreed that diabetes, orthopedics (need for providers), mental health and osteoporosis as their top health concerns.
- Establish a senior center, including activities for seniors in addition to support services like housing assistance, healthcare access, support for utilities, etc.
- Seniors on a fixed income experience greater challenges in accessing the care they need.
- Transportation is especially difficult for seniors due to mobility issues.
- Need for services for lower income seniors
- Better communication about available services
- Support for caregivers
- Promote available services and there are so many seniors living alone or who need professional help. Most seniors can't afford the assisted living we have here and thus are stuck at home or living off relatives that are neither trained nor mentally capable of taking care of their elderly loved ones.

Poor physical health on 14 days or more of the last 30 days 65+	22.2	16.1	185% of Poverty	21.7	27.8	<ul style="list-style-type: none"> <li>• Outreach services for mental health and citizens that need assistance doing everyday activities which become more difficult with aging</li> <li>• More affordable housing (for limited-income seniors)</li> <li>• Improved options for seniors needing long-term care including in-home/community.</li> </ul>
Poor mental health on 14 days or more of last 30 days 65+	11.8	7.3	200% of Poverty	24.4	30.8	
Limited activities due to physical, mental or emotional problem 65+	33.9	27.1	300% of Poverty	43.8	49.4	
			400% of Poverty	58	63.2	
			500% of Poverty	68.6	73.2	
			500% or more of Poverty	31.4	26.8	