

Jefferson Community Health Improvement Plan



April 2017-December 2021

**Adopted April 2017
Revised October 2020**

**Department of Health Mission**

To protect, promote and improve the health of all people in Florida through integrated state, county, and community efforts.

Department of Health Vision

To be the healthiest state in the Nation

Department of Health Values (ICARE)

Innovation: We search for creative solutions and manage resources wisely.

Collaboration: We use teamwork to achieve common goals and solve problems.

Accountability: We perform with integrity and respect.

Responsiveness: We achieve our mission by serving our customers and engaging our partners.

Excellence: We promote quality outcomes through learning and continuous performance improvement.

Acknowledgements

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Florida State University
Healthy Start Coalition of Jefferson, Madison & Taylor Counties, Inc.
Jefferson Chamber of Commerce
Jefferson County Board of County Commissioners
Jefferson County Emergency Management Services
Jefferson County School District
North Florida Community College
Saint Leo University
Senior Citizens Council of Jefferson County, Inc.
Sickle Cell Foundation
Tri-County Electric Co-Op, Inc.
United Methodist Cooperative Ministry

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Executive Summary

The Department of Health in Jefferson County and community partners have collaborated to produce the 2017 Community Health Needs Assessment for Jefferson County. This meets the Public Health Accreditation Board (PHAB) requirements to involve the community in a participatory process to plan health priorities for the next three years.

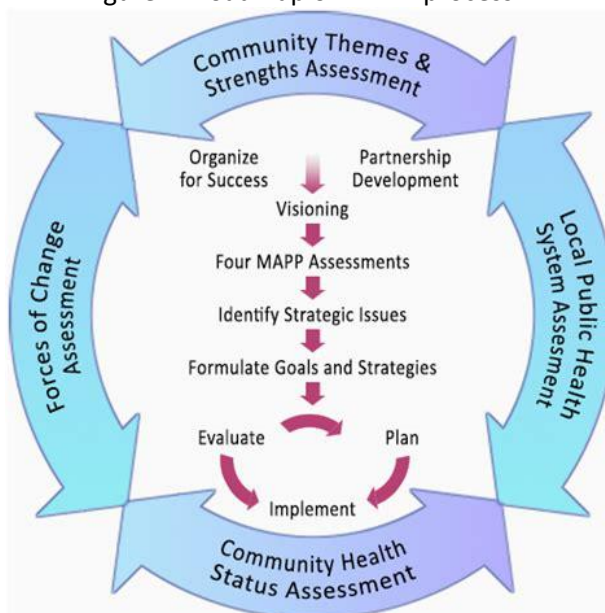
This Community Health Assessment serves to inform the Jefferson community for the purposes of decision making, the prioritization of health problems, and the development, implementation, and evaluation of community health improvement plans. The overarching goals of this report include:

- Examination of the current health status across Jefferson County as compared to Florida.
- Identification of the current health concerns among Jefferson County residents within the social and economic context of their community.
- Documentation of community strengths, resources, forces of change, and opportunities for health service provision to inform funding and programming priorities of Jefferson County.

Mobilizing for Action Through Planning and Partnerships (MAPP) Process

An overview of the Mobilizing for Action through Planning and Partnership (MAPP) process was discussed to educate the community about the development process of the Community Health Assessment (CHA). The MAPP process serves a resource to classify the priorities of the community and functions to identify resources to develop action plans in the community. This strategic planning tool, driven by the community, is conducted to assess the health within the community to identify issues and improve the well-being of the public. The MAPP process alters how we see public health planning and creates a health model focused on the community at large.

Figure 1. Roadmap of MAPP process



Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment identifies issues that residents of the community deem as the most important, along with distinguishing any resources available to aid in improving the health of the community.

The Community Themes and Strengths Assessment was performed in 2016-17 by direct solicitation of residents to complete a standardized survey (See Appendices). Residents were approached at county school board meetings, county commission meetings, community events, health fairs and at local establishments. Residents had the option to complete a printed survey at the solicitation location or to access a survey monkey link to complete a survey on-line.

Community Health Status Assessment

The Community Health Status Assessment distinguishes and prioritizes quality of life and community health issues.

The Health Summit to discuss the Community Health Status Assessment was held on December 5, 2017, at the Monticello Opera House, and was an all-day event. Community participants developed the Visioning Statement that is included in the assessment, listened to data presentation on health indicators, and broke into groups to discuss the major health indicator topic areas. At the end of the day, the group voted to choose the three priority areas to address in the Community Health Improvement Plan that will begin January 2018.

Local Public Health System Assessment

The Local Public Health System Assessment puts the spotlight on the network of organizations and agencies in the community and how well the ten Essential Services (ES) are being delivered.

The Local Public Health Assessment was divided into two parts, an external assessment, and an internal assessment. The external assessment was held at R.J. Bailer Public Library on February 8, 2018. During that time, we discussed Essential Public Health Services 3, 4, 5, 7 and 9. Since the internal partners mirrored those of Madison County, we used the information from the internal assessment held on August 9 at Madison Health Department. Essential Services 1, 2, 6, 8 and 10 were addressed.

Forces of Change Assessment

The Forces of Change Assessment focuses on recognizing forces or factors/trends that will affect the health of the community and the local public health system.

The Forces of Change Assessment was performed on October 24, 2017, at the R.J. Bailer Public Library to identify community strengths, weaknesses, opportunities and threats in specific topic areas.

Data Sources

The following data sources were utilized to develop this community health needs assessment.

Behavioral Risk Factor Surveillance System (BRFSS)

This state-based telephone surveillance system is designed to collect data on individual risk behaviors and preventive health practices related to the leading causes of morbidity and mortality.



Florida Cancer Registry

The Florida Cancer Data System (FCDS) is Florida's legislatively mandated, population-based, statewide cancer registry. The FCDS is a joint project of the Florida Department of Health and the University of Miami Miller School of Medicine.

Florida CHARTS

The Florida Department of Health, Office of Statistics and Assessment maintains the Community Health Assessment Resource Tool Set (CHARTS) is commonly used to conduct community health assessments, prioritize health issues at the state and local level, and monitor changes in health indicators over time.

Florida HealthFinder, Florida Agency for Health Care Administration (AHCA)

The Inpatient Data Query provides performance and outcome data and information on selected medical conditions and procedures in Florida health care facilities.

Florida Youth Tobacco Survey (FYTS)

The FYTS tracks indicators of tobacco use and exposure to second-hand smoke among Florida public middle and high school students, and provides data for monitoring and evaluating tobacco use among youth in the Florida Tobacco Prevention and Control Program.

Robert Wood Johnson County Health Rankings

The County Health Rankings rate the health of nearly every county in the nation. The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to provide this database.

Community Health Improvement Process

The Community Health Assessment process ended with identifying strategic issues (see Figure 1, page 8). The Community Health Improvement process will result in the formulation of goals and strategies, implementation of the goals and strategies, and evaluation of the progress toward accomplishing them. Progress will be reported quarterly. The revision of goals and strategies will be addressed annually, along with the annual progress report.

Limitations

All data presented to CHA participants were current as of March 2019 and whenever possible, comparisons were made between Jefferson County and the state of Florida as a whole. Some trend lines presented three-year rolling rates to control for static trend lines and years where the rate was zero. Three-year rolling rates can give a more fluid view of the overall trend up or down.

It should be noted that qualitative data from the Community Themes and Strengths Assessment, and the Forces of Change Assessment were representative of the persons who participated in the assessment. Data may or may not be generalizable to the entire Jefferson County community.

All survey data, such as Behavioral Risk Factor Surveillance System (BRFSS) and Florida Youth Substance Abuse Survey (FYSAS) were used as supplemental information to further inform the group about health indicators. These data can offer supporting or negating documentation of health indicators found in Florida CHARTS and other quantifiable sources.

Goals, strategies and objectives developed for the CHIP are community-wide strategies and do not pertain to any specific individual. All residents should consult with their primary care practitioner to develop a personalized health improvement plan.

Visioning Statement

Participants who attended the Community Health Assessment Health Summit on December 5, 2017, were first asked to develop a Visioning Statement. The purpose of the Visioning Statement is to serve as a guide when choosing the priority areas and the action plan items for the next three years. All health-related activities developed under the Community Health Improvement Plan should be able to be linked back to the Visioning Statement.

Participants were asked to list health characteristics for Jefferson County that were important to them personally; specifically, characteristics around working, playing and living in Jefferson County. Participants were also asked to write down what a healthy Jefferson County meant to them. Participants wrote responses on index cards and posted them on the Visioning Wall that was provided.

Listed below are the characteristics that participants contributed and later were classified into topic areas. These topic areas are health care access, education, infrastructure, food and support services. A main theme for each topic area is also included.

Healthcare Access	
All residents have access to needed services	
Every child can access the health care they need without any barriers	Access to health care services – local clinics and hospitals
Mental health and substance abuse services	Availability of mental health services for all who need it, not just Medicaid recipients
Free clinics once a month or quarter	

Education	
Jefferson County residents receive a quality education	
There is access to quality education	Community education on healthy lifestyle practices to include dangers of drugs and alcohol, eating habits, mental health self-care
In-school programs on life skills development, anger management, decision making, coping skills and stress management	Kids do well in school
Health literacy	Financial literacy

Infrastructure	
Access to recreation that supports physical activity	
Walkability	Sidewalks, bike trails
Parks, community centers	Commercial enterprises, bowling, skating
Recreation facilities, skateboard park	Public swimming pools
A full menu of school sports	YMCA
Free gym	

Food	
Access to healthy food options for all residents at home and outside of the home	
Every child has access to food	Restaurants offer healthy food options
Families prepare meals and eat together at home	Churches, community organizations, school functions offer healthy snacks and meals
Community garden	

Support	
Basic needs are met	
Crime prevention	Parents are supported in their interactions with all services
Affordable housing	Help is available to parents and children when they need it
Good employment opportunities	Services to support children exposed to adverse events in the home such as abuse, neglect, parental substance abuse, domestic violence, etc.
Transportation to health care facilities, and to resources.	Parental/family services to promote healthy child development, particularly from birth to age five.
Citizens understand the effects of trauma and know families need help and support to overcome	Access to services in the home is easy and there are no waiting lists
Citizens know everyone needs help occasionally	Positive activities for youth and families
More services for persons with disabilities	

Participants then drafted vision statements and posted them for consideration by the group. These vision statements are listed below:

- A healthy Jefferson County is one where all residents have a normal BMI, routine preventative care, including dental and abstain from tobacco.
- Every citizen of Jefferson County will have access to available services for health care, transportation, healthy food and recreation, while increasing community resilience.
- A healthy Jefferson County is a place with total agency cooperation accessible to residents
- Jefferson County will support healthy lifestyles through a community-wide culture of health and access to safe environments that provide healthy opportunities for youth, families and seniors.
- Achieving a healthier Jefferson County through the development of infrastructure, increasing access to care and services, and ensuring that all residents have the health literacy to make independent choices.

After voting, the chosen vision statement was, “Every citizen of Jefferson County will have access to available services for health care, transportation, healthy food, and recreation while increasing community resilience.”

Key Findings

The following significant data trends were presented at the Community Health Status Assessment. Detailed trends by priority area are available in the 2018 Jefferson County Community Health Assessment document.

Demographics

- 2017 population data by census tract indicate that tract 2501.01 is the most populated tract with 46% of the population. This includes the City of Monticello.
- 2017 population statistics indicate Jefferson County had a slightly higher percentage of males (52%) than females (48%). The state of Florida had slightly more females than males.
- Jefferson County had a higher proportion of Black, non-Hispanic residents (36%) than the state of Florida (25%). Census tract 2501.02 had the highest percentage of Black, non-Hispanic residents.
- Hispanics accounted for 4% of Jefferson County's population and 25% of the state's population. Census tract 2501.01 had the highest percentage of Hispanic residents in Jefferson County.
- Census tract 2501.02 had the highest percentage of school-age children, followed by 2502. Tract 2501.02 has the highest percentage of children under age 5.
- Jefferson County residents were less likely to have a college degree (21.2%) when compared to the state of Florida (28.5%). However, Jefferson County's percent increased from 2016 and the state's decreased.

Socioeconomics

- Jefferson County ranked 30 out of 67 counties for median household income in 2017. Median income increased from \$41,696 in 2016 to \$47,599 in 2017.
- Approximately 10.8% of families in Jefferson County lived in poverty in 2017, compared to 11.1% for the state of Florida. Census tract 2501.01 had the highest percent of families living under 100% poverty.
- Only 19.2% of Jefferson County residents under age 18 lived in poverty in 2017 compared to 22.3% for Florida.

Health Insurance and Medicaid

- Approximately 15% of adults and 8% of children are uninsured in Jefferson County. Census tract 2501.01 had the highest percentage of the population with no health insurance.
- Of the 2017 births to Jefferson County residents, 39.1% were covered by Medicaid, compared to 36.6% for Florida.

Health Equity

- The Community Health Improvement Plan includes a section on health equity and some action steps toward achieving health equity in Jefferson County.
- White, non-Hispanic persons represent 59% of Jefferson County's population. This population has been disproportionately affected in the areas of congestive heart failure, diabetes, hypertension, stroke, cancers, particularly cancers related to tobacco use, preterm births, births to mothers with little or no prenatal care, deaths due to firearm discharge, motor vehicle crash deaths, falls, alcohol and drug poisoning and suicides.
- Black or Other Race, non-Hispanic persons comprise 36% of Jefferson County's population. The data show that this population is disproportionately affected in the areas of HIV and other sexually transmitted diseases, asthma, cancer, diabetes, heart attacks, hypertension, infant deaths, infants

with very low birth weight or low birth weight, breastfeeding initiation rates, births to teen mothers, drowning deaths and homicide deaths.

- Hispanic persons of all races comprise 4% of Jefferson County's population. This population has been disproportionately affected in chlamydia, infant deaths, preterm births, births to mothers with little or no prenatal care, and births to teen mothers.

Leading Causes of Death

- The leading cause of death in Jefferson County for calendar year 2017 was heart disease, followed by cancer, cardiovascular diseases, diabetes and unintentional injury. These leading causes of death were consistent by race/ethnicity; however, the leading cause of death for black, non-Hispanics was cancer, followed by heart diseases, unintentional injury and cardiovascular disease. There was one death in 2017 to a Hispanic person from heart disease.
- Other than chronic diseases, unintentional injury also accounted for a high percentage of Jefferson County deaths in 2017.

Reportable Diseases

- Chlamydia cases have increased for Jefferson County and have increased among females ages 15-19, a group where reproductive health issues can be affected.
- Gonorrhea cases have decreased for Jefferson County but have increased among females ages 15-19.
- HIV cases slightly increased in 2017, while AIDS cases have decreased. This may suggest improvements with respect to medical care, adherence to medications and other continuity of care improvements. The percentage of Jefferson County residents with HIV/AIDS who had a suppressed viral load was slightly lower when compared to the state.
- Jefferson County has experienced four cases of vaccine-preventable diseases since 2010, including pertussis (two cases) and varicella (two cases).

Environmental Health

- There have been four deaths and 270 hospitalizations due to asthma since 2000. A total of 68 of the 200 hospitalizations were among the age group of 1-5.
- There were two lead poisoning cases in 2017.

Chronic Diseases

- Death rates for diabetes, hypertension, stroke, heart attack, and cancers are higher for Jefferson County than for Florida.
- Census tract 2501.02 has the highest death rates due to chronic diseases other than cancer. Census tract 2502 had the highest death rate due to all cancers.
- Jefferson County has a higher percentage of smokers than the state of Florida.
- Reported use of electronic cigarettes has dramatically increased in Jefferson County youth, from 4.8% in 2012 to 16.4% in 2018.

Maternal and Child Health

- Most of the infant deaths in Jefferson County from 2010 to 2017 were linked to premature delivery, low or very low birth weights and Sudden Infant Death Syndrome.
- Percentages of very low birth weight and low birth weight were higher in Jefferson County than for Florida in 2017.
- Preterm births have been increasing since 2015 but are still lower than the state rate in 2017.

- Census tract 2501.01 had the highest rates of negative birth outcomes in Jefferson County during 2013-2017.
- Breastfeeding initiation rates are lower for Jefferson County than Florida.
- The percent of repeat births to teens increased in 2017.

Injury and Violence

- Unintentional injury ranked as the seventh highest cause of death in Jefferson County in 2017.
- Motor vehicle crash rates, alcohol-suspected vehicle crash rates, and alcohol-suspected vehicle crash injury rates were higher in Jefferson County, compared to Florida.
- During the period of 2010-2017, there were six drowning deaths, 27 deaths due to falls, ten deaths due to fires, three deaths due to medical and surgical complications, and 15 deaths due to accidental poisoning in Jefferson County.
- During 2010-2017, there were 10 homicide deaths.
- Aggravated assault rates have been consistently higher in Jefferson County compared to Florida.

Social and Mental Health

- Reported domestic violence incidents have increased in Jefferson County since 2013.
- The suicide death rate was lower in Jefferson County than in Florida as a whole but is increasing slightly.
- There have been nine drug overdose deaths in Jefferson County since 2007.
- Hospitalization rates for mental disorders are lower in Jefferson County than the state, except for schizophrenic disorders.
- White, non-Hispanic women were most likely to report having a depressive disorder when surveyed through the 2016 Behavioral and Risk Factor Surveillance System.
- Middle and high school students surveyed through the 2018 Youth Substance Abuse Survey reported high usage of alcohol, marijuana, inhalants and over-the-counter drugs.
- Approximately 37% of middle school and 62% of high school students reported symptoms of depression.

Priority Area Plans

While all of the health indicators are important, the community participants were asked to choose three areas that would be addressed by the development of the 2018-2021 Community Health Improvement Plan. Participants voted during the Community Health Assessment and the areas chosen to address were Chronic Disease, Maternal and Child Health, and Social and Mental Health.

The individual community organizations will continue to address communicable diseases, environmental health, emergency planning, and injury/violence both separately and as an integrated entity when applicable. Listed below are the goals and strategies for all of the priority areas.

Reportable Infectious Diseases

Priority Areas	<i>The priority areas chosen by the group was Chlamydia and STI's.</i>
Issue	Racial minorities are disproportionately affected.
Goal	Reduce STI's to 0% in 5 years or reduce by 50% Address racial disparities and unprotected or unsafe sex
Barriers	Stigma, transportation, and lack of knowledge and awareness
Agencies Involved	Health Department, Big Bend Transit, News Media, School Board, School, Ministerial Association, Community Action Agency, Refuge House, 4H, Guardian ad Litem
Next Steps	The next steps to address this issue are to develop an action plan that includes social media, brochure distribution, media, billboards and outreach.

Chronic Diseases

Priority Areas	Cancer, Cardiovascular Disease, Diabetes
Issue	Cancer - lack of screening opportunities, health literacy Cardiovascular - lack of healthy food options and physical activity locations as well as health literacy Diabetes - lack of healthy food options and physical activity locations as well as health literacy
Goal	Cancer - increase in screenings, reducing the number of deaths Cardiovascular - increase awareness, increase education on living a healthier life Diabetes - Develop DPP and DSME
Barriers	Transportation, referral processes, availability of healthy food options and physical activity locations, health literacy, lack of participation from Churches, and money
Agencies Involved	IFAS Extension, Big Bend AHEC, Big Bend Rural Health Network, Health Department, Private Doctors offices, Senior Center, Area Agency on Aging & Disability Resource Center, local restaurants, school and library.
Next Steps	Continue the Heart Health Plus program, explore all screening options, continue DPP and DSME, inner agency meetings, utilize NFCC and FSU nurses

Maternal and Child Health

Priority Areas	Low Birth Weight, Extreme Low Birth Weight, Breastfeeding Initiation, Accessing Pre-Natal Care before the 1 st trimester
Issue	Data collection, lack of health literacy, referral process
Goal	Low birth weight & extreme low birth weight -Keeping the percentage consistently under 1% Breastfeeding - consistent data collection, address barriers of breastfeeding in the minority community
Barriers	Staffing, data collection, referral process, pediatricians and lack of health literacy.
Agencies Involved	Health Department, Private OBs Big Bend Transit, Literacy Alliance, Jail, WIC, Refuge House, Churches, Early Learning Coalition, School, Healthy Start, Hospitals, Parent Child Home Program, Early Steps and Child Protective Services
Next Steps	Develop a mentoring program and breastfeeding survey

Injury and Violence

Priority Areas	Under Reporting of Domestic Violence
Issue	Under reporting of Mental Health issues, early childhood trauma, Mental Health Services for Pregnant Women
Goal	Develop support groups, increase community education and develop a better partnership with DCF
Barriers	Stigma, Families depending on wage earner, finances, school being on board, commitment to continuing care
Agencies Involved	Department of Children and Families, Mental Health Providers, Prevent Child Abuse Florida, School, Law Enforcement, DJJ, Refuge House, Peace 4 the Big Bend
Next Steps	Establish support groups

Social and Mental Health

Priority Areas	Mental Health Services
Issue	Under reporting of Mental Health issues, early childhood trauma, Mental Health Services for Pregnant Women
Goal	Develop support groups, increase community education and develop a better partnership with DCF
Barriers	Stigma, Families depending on wage earner, finances, school being on board, commitment to continuing care
Agencies Involved	Department of Children and Families, Mental Health Providers, Prevent Child Abuse Florida, School, Law Enforcement, DJJ, Refuge House, Peace 4 the Big Bend
Next Steps	Establish support groups

Community Health Improvement Plan Process

The Jefferson County Community Health Improvement Plan Steering Committee decided to alter the meeting process for this cycle. Three subcommittees were created to address the three priority areas of Social and Mental Health, Maternal and Child Health, and Chronic Diseases. These subcommittees met during the first quarter of 2019 to develop long and short-term goals in their respective priority area, and to establish a meeting schedule for 2019.

Social and Mental Health Subcommittee

The Social and Mental Health subcommittee met on January 16, 2019 in Tallahassee, Florida. Local providers and persons interested in social and mental health services in Jefferson County were present at the meeting.

The group reviewed the status of the 2018 workplan and barriers or issues that prevented the completion of objectives. From there, the group developed the goals, strategies, objectives and action steps listed below for 2019.

Next Steps

The subcommittee members agreed to meet quarterly to advance progress with short and long-term goals. The next meeting is scheduled for April 16, 2019. The group will finalize the community-based survey format, discuss the sampling methods and continue work on a linkage and referral plan between the school district and family service agencies.

Maternal and Child Health Subcommittee

The Maternal and Child Health subcommittee met on February 12, 2019 in Monticello, Florida. Local providers and persons interested in maternal and child health services in Jefferson County were present at the meeting.

The group reviewed the status of the 2018 workplan and barriers or issues that prevented the completion of objectives. From there, the group developed the goals, strategies, objectives and action steps listed below for 2019.

The subcommittee decided on a community education approach to increasing breastfeeding initiation rates that would operate in tandem with the clinic initiatives of DOH-Jefferson and the Healthy Start Coalition. It was decided to work with local businesses to establish breastfeeding sites on their premises and to purchase signage. The subcommittee is also working on a marketing campaign designed to encourage pregnant women to seek obstetrical care in their first trimester.

DOH-Jefferson staff consulted with the Vital Registrar to submit a sample of 2018 birth mothers receiving services at the health department for comparison purposes with variables for prenatal entry to care dates, healthy start screening acceptance and breastfeeding initiation. This comparison may identify some system issues that can be corrected to ensure data accuracy in Florida CHARTS.

Next Steps

The sub-committee members agreed to meet quarterly to advance progress with short and long-term goals. The next meeting is scheduled for May 22, 2019.

Chronic Disease Subcommittee

The Chronic Disease subcommittee met on March 5, 2019 in Monticello, Florida. Local providers and persons interested in chronic disease services in Jefferson County were present at the meeting.

The group reviewed the status of the 2018 workplan and barriers or issues that prevented the completion of objectives. From there, the group developed the goals, strategies, objectives and action steps listed below for 2019.

The subcommittee decided to continue working with North Florida Community College nursing students to address healthy food options in businesses, a method that will complement the diabetes and hypertension work already taking place in the community. The group also decided that there should be group presentations on chronic diseases given to community groups to emphasize the need to change current health trends in the community. The subcommittee will continue to address screening opportunities for breast cancer and prostate cancer.

Next Steps

The sub-committee members agreed to meet quarterly to advance progress with short and long-term goals. The next meeting is scheduled for June 4, 2019.

Goals, Strategies and Objectives

I. Social and Mental Health

Three-Year Goal

- Social and Mental Health providers will maintain a consistent presence in Jefferson County and will establish an effective linkage and referral system by December 31, 2021

Strategy

- Partner with mental health providers and the Mental Health Council of the Big Bend to determine the needs of Jefferson County residents

Short-Term Objectives for Completion by March 31, 2020

- Create and distribute a survey to gather more information on accessing services (stigma, perception)
- Expand and enhance the referral process for family services between participating agencies

Healthy People 2020 Alignment

- These goals, strategies and objectives align with the Healthy People 2020 Goal: Improve mental health through prevention and by ensuring access to appropriate, quality mental health services.

II. Maternal and Child Health

Three-Year Goal Late Entry to Care

- Reduce late entry to care by 5% for Healthy Start and health department prenatal clients by December 31, 2021

Strategy Late Entry to Care

- Partner with the Healthy Start Coalition and TMH Family Residency Program to analyze 2016 and 2017 data to determine where to make system improvements

Short-term Objectives for Late Entry to Care for Completion by March 31, 2020

- Perform analysis to ensure that there is no data collection issue that results in artificially high prenatal entry to care after the first trimester rates
- Partner with the pregnancy center in Jefferson to train their volunteers on referrals
- Create a family planning and preconception health outreach campaign for women
- Continue to offer the Sexual Risk Avoidance program in the school district to encourage healthy choices and sexual abstinence
- Partner with Workforce Development to offer at least one job fair during the cycle
- Identify a community partner that can offer a life skills curriculum to middle and high school students

Three-Year Goal Breastfeeding Initiation

- Increase breastfeeding initiation by 10% for Healthy Start and health department prenatal clients by December 31, 2021

Strategy Breastfeeding Initiation

- Use peer counseling and lactation consultants to educate pregnant women on the benefits and importance of breastfeeding

Short-term Objectives for Breastfeeding Initiation for Completion by December 31, 2018

- Perform analysis to ensure that there is no data collection issue that results in artificially low breastfeeding initiation rates
- Continue to extend prenatal appointments at the health department by 30 minutes for women in their third trimester to allow for time to meet with a lactation consultant and increase participation in the WIC breastfeeding support groups
- Identify safe places to breastfeed in the community
- Create a marketing campaign to educate and encourage breastfeeding

Healthy People 2020 Alignment

- These goals, strategies and objectives align with the Healthy People 2020 Goal: Improve the health and well-being of women, infants, children, and families.

III. Chronic Diseases

Three-year Goals Diabetes

- Have a functional Diabetes Prevention Program
- Have a functional Diabetes Self-Management Education Program

Strategy Diabetes

- Pursue funding and mentorships to establish and maintain a Diabetes Prevention Program (DPP) and a Diabetes Self-Management Education Program (DSME)
- Pilot DSME class by June 30, 2020 by implementing Standards 8-9 of the ADA Guidance for Establishing an Accredited DSME
- Ensure all DPP pre-course requirements are in place
- Pilot DPP class by March 31, 2020

Short-term Objectives for Diabetes for Completion by December 31, 2018

- Implement Standards 1-7 of the ADA Guidance for Establishing an Accredited DSME by December 31, 2019
- Offer Diabetes Prevention pilot class by the end of 2018

Three-year Goal Cardiovascular Disease

- Increase the number of healthy food options in at least two food establishments by December 31, 2021

Healthy People 2020 Alignment

- These goals, strategies and objectives align with the Healthy People 2020 Goal: Reduce the disease burden of diabetes mellitus (DM) and improve the quality of life for all persons who have, or are at risk for, DM.

Strategy Cardiovascular Disease

- Partner with community agencies to educate the public and businesses on the importance of healthy food options

Short-term Objectives for Cardiovascular Disease for Completion by March 31, 2020

- Work with local restaurants and food vendors to identify healthy food options in their establishments
- Community health education and awareness presentations to civic groups, faith-based groups and local government

Healthy People 2020 Alignment

- These goals, strategies and objectives align with the Healthy People 2020 Goal: Improve cardiovascular health and quality of life through prevention, detection, and treatment of risk factors for heart attack and stroke; early identification and treatment of heart attacks and strokes; prevention of repeat cardiovascular events; and reduction in deaths from cardiovascular disease.

Three-year Goal Cancer

- Partner with an agency to offer breast, prostate and colon cancer screenings at least annually by December 31, 2021

Strategy Cancer

- Partner with an agency that provides cancer screening and treatment to offer services to residents

Short-term Objectives for Cancer for Completion by March 31, 2020

- Community health education and awareness presentations to civic groups, faith-based groups and local government
- Partner with a mobile cancer screening unit or utilize hospital services
- Promote the Holiday Challenge and virtual walk campaign county-wide

Healthy People 2020 Alignment

- These goals, strategies and objectives align with the Healthy People 2020 Goal: Reduce the number of new cancer cases, as well as illness, disability, and death caused by cancer.

IV. Health Equity

Three-year Goal Health Equity

- Establish shared understanding across all sectors in Jefferson County concerning information and issues surrounding Health Equity (HE), Cultural Competency/Sensitivity, and how Social Determinants of Health (SDOH) influence the health of Florida's residents and communities by December 31, 2021.

Strategy Health Equity

- Offer training opportunities to CHD staff and to local partner agencies

Short-term Objectives for Health Equity for Completion by March 31, 2020

- Develop and implement a training program for CHD staff
- Incorporate health equity into community presentations
- Work with FSU School of Nursing and the Healthy Start Coalition to develop and implement a research study on pregnant women and support systems

Healthy People 2020 Alignment

- These goals, strategies and objectives align with the Healthy People 2020 Goal: Throughout the next decade, Healthy People 2020 will assess health disparities in the U.S. population by tracking rates of illness, death, chronic conditions, behaviors, and other types of outcomes in relation to demographic factors including:
 - Race and ethnicity
 - Gender
 - Sexual identity and orientation
 - Disability status or special health care needs
 - Geographic location (rural and urban)

Action Plan - Social and Mental Health

Three-Year Goal: Social and Mental Health providers will maintain a consistent presence in Jefferson County and will establish an effective linkage and referral system by December 31, 2021				
Strategy: Partner with mental health providers and the Mental Health Council of the Big Bend to determine the needs of Jefferson County residents				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Create and distribute a survey to gather more information on accessing services (stigma, perception) 	<ul style="list-style-type: none"> Complete data sampling from property appraiser's database Develop survey tool Obtain IRB approval if needed Administer survey Enter data Analyze data and complete report 	3/31/2020	Jefferson CHD Subcommittee	<ul style="list-style-type: none"> Survey data entered into database/data analysis report
<ul style="list-style-type: none"> Expand and enhance the referral process for family services between participating agencies 	<ul style="list-style-type: none"> Convene meeting of providers and the Department of Children and Families Review existing referral procedure and implement enhancements Maintain quarterly meetings to discuss issues 	3/31/2020	Jefferson CHD	<ul style="list-style-type: none"> Documented referral procedure

Action Plan – Maternal and Child Health

Three-Year Goal: Reduce late entry to care by 5% for Healthy Start and health department prenatal clients by December 31, 2021				
Strategy: Partner with the Healthy Start Coalition and TMH Family Residency Program to analyze 2017 and 2018 data to determine where to make system improvements				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Perform analysis to ensure that there is no data collection issue that results in artificially high prenatal entry to care after the first trimester rates 	<ul style="list-style-type: none"> Pull a sample of Healthy Start and health department prenatal clients to obtain entry to care dates Compare these dates to birth clerk data collection at time of delivery Present findings to the hospital and DOH Vital Statistics 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Comparison of birth clerk data collection to documented prenatal care entry dates for Healthy Start and Health Department Clients
<ul style="list-style-type: none"> Partner with the pregnancy center in Madison to train their volunteers on referrals 	<ul style="list-style-type: none"> Meet with the pregnancy center staff to offer training Schedule and hold training Track referrals 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Number of patient referrals to health department prenatal care
<ul style="list-style-type: none"> Create a family planning and preconception health outreach campaign for women 	<ul style="list-style-type: none"> Market family planning services to health department clients and other venues in the community Market preconception health classes 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Increase in family planning services obtained at the health department Increase in preconception health course participants

Three-Year Goal: Reduce late entry to care by 5% for Healthy Start and health department prenatal clients by December 31, 2021				
Strategy: Partner with the Healthy Start Coalition and TMH Family Residency Program to analyze 2017 and 2018 data to determine where to make system improvements				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Continue to offer the Sexual Risk Avoidance program in the school district to encourage healthy choices and sexual abstinence 	<ul style="list-style-type: none"> Offer curriculum according to program guidance Document student opt-out percentage 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Decrease in teen births and repeat births to teens per Florida CHARTS
<ul style="list-style-type: none"> Partner with Workforce Development to offer at least one job fair during the cycle 	<ul style="list-style-type: none"> Identify a location and date for the job fair Advertise in the community 	3/31/2021	Jefferson CHD Workforce Development NFCC	<ul style="list-style-type: none"> Decrease in unemployment rates per Florida CHARTS Decrease in teen births and repeat births to teens per Florida CHARTS
<ul style="list-style-type: none"> Identify a community partner that can offer a life skills curriculum to middle and high school students 	<ul style="list-style-type: none"> Curriculum to include job interviewing skills, resume building skills, managing finances, applying to colleges or technical schools 	3/31/2021	Jefferson CHD Partners TBD	<ul style="list-style-type: none"> Decrease in teen births and repeat births to teens per Florida CHARTS

Three-Year Goal: Increase breastfeeding initiation by 10% for Healthy Start and health department prenatal clients by December 31, 2021				
Strategy: Use peer counseling and lactation consultants to educate pregnant women on the benefits and importance of breastfeeding				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Perform analysis to ensure that there is no data collection issue that results in artificially low breastfeeding initiation rates 	<ul style="list-style-type: none"> Pull a sample of Healthy Start and health department prenatal clients to breastfeeding initiation data Compare these dates to birth clerk data collection at time of delivery Present findings to the hospital and DOH Vital Statistics 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Comparison of birth clerk data collection to documented breastfeeding data for Healthy Start and Health Department Clients
<ul style="list-style-type: none"> Continue to extend prenatal appointments at the health department by 30 minutes for women in their third trimester to allow for time to meet with a lactation consultant and increase participation in the WIC breastfeeding support groups 	<ul style="list-style-type: none"> Develop and advertise breastfeeding support groups to increase participation Work with Tallahassee Memorial Hospital “Milk with Mommy” campaign Meet with TMH Family Residency staff to ascertain what messages they are giving to patients 	3/31/2021	Jefferson CHD TMH Family Residency Program Healthy Start Coalition WIC	<ul style="list-style-type: none"> Comparison of breastfeeding initiation rates prior to program implementation and after program implementation

Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Identify safe places to breastfeed in the community 	<ul style="list-style-type: none"> Buy signage and place in businesses and government offices that identify breastfeeding areas 	3/31/2021	Jefferson CHD Subcommittee	<ul style="list-style-type: none"> Number of breastfeeding friendly establishments after program implementation
<ul style="list-style-type: none"> Create a marketing campaign to educate and encourage breastfeeding 	<ul style="list-style-type: none"> Buy signage and educational materials 	3/31/2021	Jefferson CHD Healthy Start	<ul style="list-style-type: none"> Comparison of breastfeeding initiation rates prior to program implementation and after program implementation

Action Plan – Chronic Diseases

Three-Year Goal: Establish and Maintain an Accredited Diabetes Self-Management Education Program by December 31, 2021				
Strategy: Pursue funding and mentorships to establish and maintain a Diabetes Prevention Program (DPP) and a Diabetes Self-Management Education Program (DSME)				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Implement Standards 1-7 of the ADA Guidance for Establishing an Accredited DSME by December 31, 2019 	<ul style="list-style-type: none"> Ensure staff are adequately trained Develop curriculum and procedure manual Obtain the input of clinicians and potential participants Establish an advisory board 	12/31/2019	Jefferson CHD	<ul style="list-style-type: none"> Curriculum and procedure manual is approved by DSME mentor
<ul style="list-style-type: none"> Pilot DSME class by June 30, 2020 by implementing Standards 8-9 of the ADA Guidance for Establishing an Accredited DSME 	<ul style="list-style-type: none"> Work with mentor to establish action plan 	6/30/2020	Jefferson CHD	<ul style="list-style-type: none"> Documented course evaluations and sign-in sheets

Three-Year Goal: Establish and Maintain an Accredited Diabetes Prevention Program by December 31, 2021				
Strategy: Pursue funding and mentorships to establish and maintain a Diabetes Prevention Program (DPP) and a Diabetes Self-Management Education Program (DSME)				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Ensure all DPP pre-course requirements are in place 	<ul style="list-style-type: none"> Ensure staff are adequately trained Develop procedure manual that includes documents required by CDC for accreditation. 	12/31/2019	Jefferson CHD Big Bend AHEC	<ul style="list-style-type: none"> Completed CDC checklist with supporting documentation
<ul style="list-style-type: none"> Pilot DPP class by March 31, 2020 	<ul style="list-style-type: none"> Ensure billing mechanism is in place 	3/31/2021	Jefferson CHD Big Bend AHEC	<ul style="list-style-type: none"> Documented course evaluations and sign-in sheets

Three-Year Goal: Increase the number of healthy food options in at least two food establishments by December 31, 2021				
Strategy: Partner with community agencies to educate the public and businesses on the importance of healthy food options				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Work with local restaurants and food vendors to identify healthy food options in their establishments 	<ul style="list-style-type: none"> NFCC School of Nursing will utilize nursing students to work with establishments in both counties as group assignments. DOH-Jefferson/Madison staff will work with NFCC to create FAQ documents for nursing students to utilize, obtain access to nutritionists if needed and work to print new menus. 	3/31/2021	Jefferson CHD NFCC School of Nursing	<ul style="list-style-type: none"> Student New menus showing the healthier items
<ul style="list-style-type: none"> Community health education and awareness presentations to civic groups, faith-based groups and local government 	<ul style="list-style-type: none"> Develop a sample presentation that can be used in the different forums (PowerPoint, flyers, hand-outs, etc.) Ascertain which community partners want to co-present Schedule presentations with organizations 	12/31/2019	Jefferson CHD	<ul style="list-style-type: none"> Presentation to Rotary Club in Jefferson County on May 11, 2018. Social determinants of health base presentation is complete and distributed to partners. We will build on this to do presentations.

Three-Year Goal: Partner with an agency to offer breast, prostate and colon cancer screenings at least annually by December 31, 2021				
Strategy: Partner with an agency that provides cancer screening and treatment to offer services to residents				
Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Community health education and awareness presentations to civic groups, faith-based groups and local government 	<ul style="list-style-type: none"> Develop a sample presentation that can be used in the different forums (PowerPoint, flyers, hand-outs, etc.) Ascertain which community partners want to co-present Schedule presentations with organizations 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Documentation of event or presentation via sign-in sheets, advertisements or other documentation as appropriate
<ul style="list-style-type: none"> Partner with a mobile cancer screening unit or utilize hospital services 	<ul style="list-style-type: none"> Priorities are breast cancer, lung cancer and colorectal cancer Madison County Memorial Hospital has a full-service laboratory and offers mammography and endoscopy services 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Advertisements of screening events Aggregate numbers of persons screened with no identifiers
<ul style="list-style-type: none"> Promote the Holiday Challenge and virtual walk campaign county-wide 	<ul style="list-style-type: none"> Advertise the event community-wide Check into the cost per participant Pursue the possibility of making this a competition event 	12/31/2019	Jefferson CHD Community Partners	<ul style="list-style-type: none"> Number of participants

Action Plan – Health Equity

Three-Year Goal: Establish shared understanding across all sectors in Jefferson County concerning information and issues surrounding Health Equity (HE), Cultural Competency/Sensitivity, and how Social Determinants of Health (SDOH) influence the health of Florida’s residents and communities by December 31, 2021.

Strategy: Offer training opportunities to CHD staff and to local partner agencies

Short-Term Objectives	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Develop and implement a training program for CHD staff 	<ul style="list-style-type: none"> Obtain suggested training courses from HQ Require levels of training for all staff, depending on their role 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> TRAIN transcripts or sign-in sheets from training
<ul style="list-style-type: none"> Incorporate health equity into community presentations 	<ul style="list-style-type: none"> Prior to educating the community on chronic diseases and maternal and child health, incorporate health equity into the presentations 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Documentation of event or presentation via sign-in sheets, advertisements or other documentation as appropriate
<ul style="list-style-type: none"> Work with FSU School of Nursing and the Healthy Start Coalition to develop and implement a research study on pregnant women and support systems 	<ul style="list-style-type: none"> Assist with any IRB approval Work with partners to implement the project 	3/31/2021	Jefferson CHD Healthy Start Coalition FSU	<ul style="list-style-type: none"> Final data analysis report findings

List of Appendices

- Appendix 1 Social and Mental Health Subcommittee Meeting Agenda and Sign-in Sheet
- Appendix 2 Maternal and Child Health Subcommittee Meeting Agenda and Sign-in Sheet
- Appendix 3 Chronic Disease Subcommittee Meeting Agenda and Sign-in Sheet
- Appendix 4 Priority Area Plans, October 2020 Amendment
- Appendix 5 Goals, Strategies and Objectives, October 2020 Amendment
- Appendix 6 Action Plan, October 2020 Amendment

Appendix 1



Florida Department of Health in Jefferson & Madison County
 Community Health Improvement Plan Meeting-Social and Mental Health
 Apalachee Center Inc.
 January 22, 2019 10:00 a.m. to 11:00 a.m.

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Pam Beck/Chelsey McCoy
Sign In	Chelsey McCoy
Discussion of Family Services	Pam Beck
Review Progress to Date on Action Plan	Pam Beck
Updated Data Presentation	Pam Beck
Development of Year 2 CHIP Activities	Group Discussion
Status of Survey Project for Jefferson and Madison	Pam Beck
Meeting Evaluation	Chelsey McCoy
Adjourn	Pam Beck/Chelsey McCoy

Social and Mental Health Committee Meeting

January 22, 2019

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Name	Organization	Email Address
1. NAN BAUGHMAN	Refuge House	Nbaughman@refugehouse.com
2. Joseph Cantin Jr.	DLC	joseph.cantin@myflfamilies.com
3. Betsy Wood	FSU	betsywood100@gmail.com
4. Jay Reeve	Apalachee Center	jay@apalacheecenter.org
5. Shannon Mitchell	FDOT	
6. Lisa Hayes	FDOT	Lisa.Hayes@flhealth.gov
7. Luciana Brown	Family Network on Dis.	luciana@fnadfl.org
8. Sarah Bishop	Apalachee Center	sarahbi@apalacheecenter.org
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Florida Department of Health in Jefferson & Madison County
 Community Health Improvement Plan Meeting-Social and Mental Health
 Apalachee Center Inc.
 January 22, 2019 10:00 a.m. to 11:00 a.m.

Meeting Minutes

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic
<p>Welcome/Call to Order</p> <ul style="list-style-type: none"> Pam Beck, Operations Manager with the Florida Department of Health in Jefferson and Madison Counties welcomed everyone to the meeting and asked if everyone would introduce themselves.
<p>Discussion of Family Services</p> <ul style="list-style-type: none"> Pam stated that she had specifically asked Nan Baughman of Refuge House to be present today due to one of the last things on this year's plan being domestic violence and or family services. She noted that we would like to see what we can do in Jefferson County as well as what may be going on in Jefferson County. Pam passed around a handout from Partnership with Strong Families that speaks to what is happening in Madison County which is why she feels like we should be talking about what is going on in Jefferson County. She noted that Partnership for Strong Families does not cover Jefferson County, and asked Nan if she would mind speaking on some of the needs she sees in the Jefferson Community. Nan responded by saying the biggest issue is getting people to come forward when there is domestic violence and child abuse. She stated that nobody in Jefferson County wants anybody to know their business. She said she has been in the community speaking and really trying to get those that see something to say something and if CPI needs to go investigate they will and if they find nothing, that is great. Nan also stated that since Refuge House is a certified domestic violence center they are supposed to be receiving incident reports from law enforcement, but they have not been receiving any. She isn't sure if people are not reporting it because they are afraid nothing will be done about it. Pam thanked Nan for her input and stated that she thinks that serves Jefferson County in the capacity the Partnership for Strong Families serves Madison County is Big Bend Community Based Care. She said she believes this may need to be a separate meeting to discuss getting the services to Jefferson County. She also proposed that this be added to next year's action plan.

Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Social and Mental Health
Apalachee Center Inc.
January 22, 2019 10:00 a.m. to 11:00 a.m.

Meeting Minutes

Review Progress to Date on Action Plan

- Pam moved on to talk about closing out the year one action plan and planning the activities for the year two action plan. She stated that the only things left on year one's action plan are the survey and the family services area. She noted that we did get \$7,500 to do the survey. She said she has traded emails back and forth with Dan Thompson and Meade Grigg and we will probably pay Dan as a contractor. She noted that we must spend the money by June 30. She explained that this does not mean the survey must be completed by June 30. Pam also said that both property appraiser offices said we could utilize their data for the survey and that she would like to talk to FSU about working with their students for the process.
- Betsy Wood with FSU asked Pam how we were planning to conduct the surveys. Pam stated we were thinking we would send it out first via USPS to an address and if that doesn't work we will have to start visiting.
- Pam stated she would like to complete the data presentation before we talk about year two. At this time, she started the presentation.

Updated Data Presentation

- Pam gave a data presentation on the most recent data so that the group could use the information to decide on activities for year two. She explained that this data would be in the updated CHA that will be completed in March.

Development of Year 2 CHIP Activities

- Pam asked if the group that the survey and family services was enough to continue to focus on in year two, or if they would like to add something else. Jay Reeve, CEO of Apalachee said that once we have the results from the survey we could use that to develop a strategic plan. Pam said she agreed and felt these projects were going to be big projects that will require a lot of partner involvement. The group confirmed that these two areas were enough and that we would move forward through year two with the survey and family services.

Next Meeting Date and Location

- The group decided that the next meeting will be held on April 16, 2019 at 10:00 a.m. at Apalachee Center Inc.

Meeting Evaluation

- Chelsey asked the group to complete the evaluation attached to the back of their meeting packet.

Appendix 2



Florida Department of Health in Jefferson & Madison County
 Community Health Improvement Plan Meeting-Maternal and Child Health
 Jefferson County RJ Bailar Public Library
 February 12, 2019 10:00 a.m.

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Chelsey McCoy
Sign In	Chelsey McCoy
Data Analysis	Pam Beck
Action Plan Update/Year Two Priorities	Pam Beck
Next Meeting Date and Location	Chelsey McCoy
Group Announcements	Chelsey McCoy
Meeting Evaluation	Chelsey McCoy
Adjourn	Chelsey McCoy/Pam Beck



Florida Department of Health in Jefferson & Madison County
 Community Health Improvement Plan Meeting-Maternal and Child Health
 Jefferson County RJ Bailar Public Library
 February 12, 2019 10:00 a.m.

Sign in Sheet

Name	Organization	Email Address
1. ROBERT J. GUSTON, MD		rbguston@yahoos.com
2. Lisa Hayes	DOH Jefferson Madison	lisa.hayes@flhealth.gov
3. Anthony Jones	BBAHEC	ajones@bigbendtxc.org
4. Chastity McCarthey	DOH - Jefferson	Chastity.McCarthey@FLhealth.gov
5. Tonya Bell	HSLJMT	tbello@healthystartjmt.org
6. Willie Ann Dickey	All Gods Children Outreach ^{min.}	WillieAnnD@Embargo.net
7. Sandi MAZZA	All Gods Children Outreach Ministries	SMAZZA49@AOL.COM
8. Sarah Bishop	Apalachee Center	sarahbi@apalacheecenter.org
9. Shanetha Mitchell	DOH Jeff Madison	Shanetha.mitchell@flhealth.gov
10. Donna Hagan	Healthy Start Coalition	dhagan@healthystartjmt.org
11. Catherine Morris Smith	NFMC-Madison Medical Ctr.	cmorris@nfmc.org
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Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Maternal and Child Health
Jefferson County RJ Bailar Public Library
February 12, 2019 10:00 a.m. to 11:00 a.m.

Meeting Minutes

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic
<p>Welcome/Call to Order</p> <ul style="list-style-type: none"> Pam Beck, Operations Manager with the Florida Department of Health in Jefferson and Madison Counties welcomed everyone to the meeting and asked everyone to take a moment to introduce themselves.
<p>Data Analysis</p> <ul style="list-style-type: none"> Pam explained that the primary purpose of this meeting is to go over some Maternal and Child Health data and decide what the group would like to start working on in April. She stated that the current action plan for year one activities ends in March. Pam presented the data presentation to the group.
<p>Action Plan Update/Year Two Priorities</p> <ul style="list-style-type: none"> Upon completing the data presentation, Pam asked the group for suggestions on year two activities for the Maternal and Child Health action plan. Prenatal care was suggested by Dr. Bob Auston, a retired M.D. and Madison County resident. Pam responded to the suggestion by saying that if we focus on prenatal care she would like to look back at women who delivered in 2017 and see if they did in fact have prenatal care. She then asked the group what their thoughts were on the idea. Dr. Auston responded by saying we're on the right track. Ann Mi Pinello with FDLRS Gateway asked if there was partnership with our local schools where we could speak to young women on this topic. Pam responded that the Health Department has an SRA program that teaches 6-8 classes. She explained that the classes teach healthy decision making but they do not promote one birth control over another because they are really teaching abstinence. Lisa Hayes, Operations Manager with the Florida Department of Health in Jefferson and Madison Counties asked Ann if she was suggesting that prenatal care be taught to the young women in schools. Ann responded by saying that she doesn't think the young women know where to go or what to do when they get pregnant. Lisa stated that young women who participate in the SRA classes in Jefferson and Madison do know where to go if they get pregnant. Ann stated that it doesn't sound like knowledge is the barrier for prenatal care in our county. Lisa responded saying it shouldn't be but could be. Lisa stated she believes transportation is more of a barrier. Pam furthered the conversation by saying that educating the community is somewhat an issue. She stated that it's hard to know where you can put things for women to see that they

Florida Department of Health in Jefferson & Madison County
 Community Health Improvement Plan Meeting-Maternal and Child Health
 Jefferson County RJ Bailar Public Library
 February 12, 2019 10:00 a.m. to 11:00 a.m.

Meeting Minutes

<p>can go to the Health Department for prenatal care. She suggested doing an educational campaign with local hairdressers, faith-based community, and billboards to get the information out there.</p> <ul style="list-style-type: none"> • Donna Hagan, Director of Healthy Start Coalition Jefferson, Madison, and Taylor stated that she is more concerned with family planning (baby spacing and the number of unplanned pregnancies). She stated that she would like for us to do something in our communities on family planning. • Pam stated she could work on some objectives around verifying prenatal care and marketing family planning services in a more effective manner. • For further discussion Pam noted that many of the teen pregnancies occur in the summer because they are bored. This started discussion on things that can be offered to kids in the summer to keep them occupied. The new police Athletic League (PAL) was mentioned and Pam stated she was looking into partnering with them on doing a summer camp. • Peer counseling was brought up by the group as well, and Pam stated she would work on an objective around it. • To recap, Pam stated she had four areas listed that would be focused on for year two. These include: prenatal care, family planning, a community action piece with youth, and breastfeeding with peer counselors.
<p>Next Meeting Date and Location</p> <ul style="list-style-type: none"> • The group chose May 22, 2019 as the next meeting date. The meeting will take place in Madison at 10:00 am, location to be determined.
<p>Group Announcement's</p> <ul style="list-style-type: none"> • No group announcements.
<p>Meeting Evaluation</p> <ul style="list-style-type: none"> • Pam requested the group complete the evaluation attached to the back of their meeting packet.
<p>Adjourn</p> <ul style="list-style-type: none"> • There being no further business, Pam expressed their sincere thanks for everyone's attendance and input and the meeting adjourned.

Appendix 3



Florida Department of Health in Jefferson & Madison County
 Community Health Improvement Plan Meeting-Chronic Disease
 Jefferson County IFAS Extension Office
 March 5, 2018 2:30 p.m. to 3:30 p.m.

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Chelsey McCoy
Sign In	Chelsey McCoy
Data Presentation	Pam Beck
Develop Year 2 Activities	Group
Colorectal Cancer Event	Chelsey McCoy
Next Meeting Date and Location	Chelsey McCoy
Group Announcements	Group
Meeting Evaluation	Chelsey McCoy
Adjourn	Chelsey McCoy



Chronic Disease Committee Meeting

March 5, 2019



Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Name	Organization	Email Address
1. Robert J. Auston	—	DrBobA@yhcw.com
2. Gloria "Gigi" Auston	Area on Aging	" "
3. Anthony Jones	BBAHEC	ajones@bigbendarea.org
4. Patricia Blair	DOH	patricia.blair@health.gov
5. Melissa Dancer	Tallahassee Memorial Healthcare	melissa.dancer@tmh.org
6. Chastity McCarthy	DOH	Chastity.McCarthy@FLHealth.gov
7. Tonya Bell	HSCJMT	tbell@healthystartjmt.org
8. Diamond Douglas	Madison Extension	ddoug@ufl.edu
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Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Chronic Disease
Jefferson County IFAS Extension Office
March 5, 2018 2:30 p.m. to 3:30 p.m.

Meeting Minutes

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic
<p>Welcome/Call to Order</p> <ul style="list-style-type: none"> Chelsey McCoy, Human Service Program Specialist with the Florida Department of Health in Jefferson and Madison Counties welcomed the group to the meeting and asked everyone to introduce themselves.
<p>Data Presentation</p> <ul style="list-style-type: none"> Pam presented the most recent data for Chronic Disease in Jefferson and Madison County. After the presentation, she asked the group if they had any questions, comments, or suggestions about the data. Dr. Bob Auston, a retired MD and resident of Madison County suggested that in the future we check with South Georgia Medical Center and Tallahassee Memorial Healthcare about statistics for Jefferson and Madison County. Pam responded to Dr. Bob and stated that Tallahassee Memorial's data is included in the presentation but she doesn't think South Georgia Medical Center's information is in Florida CHARTS which is where she pulled the data. Melissa Dancer-Brown, Director of Health Promotion at Tallahassee Memorial Healthcare asked Pam if she looked at type break-out of all types of cancers? Pam responded no, and said when she writes the Community Health Assessment she would.
<p>Develop Year 2 Activities</p> <ul style="list-style-type: none"> Pam briefly went over what the activities were for year 1 with the group. One of the year 1 activities being the DPP and DSME, and Pam asked that it also be carried over into year 2. She also asked to extend the restaurant project that the NFCC BSN students are working on into year two. The group agreed. She then asked the group if they had any suggestions on year two activities? Melissa Dancer stated that TMH has a couple of programs that they offer in schools, one being a nutrition program that is for preschool and kindergarten and one for elementary. The program focuses on teaching kids the importance of reading nutrition labels and portion sizes. She stated that it is a very interactive program that gets the kids involved. She also noted that they have a program called Happy Hydrators which is a two-week program. Chelsey stated this may be something that could be incorporated into Every Kid Health Week which is a part of Healthiest Weight Florida. Dr. Bob Auston noted the use of the billboards in each county as a year two activity. Pam stated that we use them as often as possible, and have some new information that should be showing up on them soon.

Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Chronic Disease
Jefferson County IFAS Extension Office
March 5, 2018 2:30 p.m. to 3:30 p.m.

Meeting Minutes

<ul style="list-style-type: none"> • The group agreed that we would host the breast cancer awareness events again in year 2. • The group also discussed some objectives on the Church clinic that is held in Madison County and working with other Churches and the Senior Center on transportation. • It was also decided that Colorectal Cancer screenings would be incorporated into year two. Pam stated that the Health Department would work to figure out we could get at home testing kits to promote screenings. • Group discussed a step challenge utilizing the Holiday Challenge virtual walk app that begins in December. The step challenge would be a competition between Jefferson and Madison County.
<p>Colorectal Cancer Event</p> <ul style="list-style-type: none"> • Chelsey passed out a flyer for a Colorectal Cancer Awareness event that will be held on March 20, 2019 at the Lee Library and she also announced that there will be a second Colorectal Cancer event held at the Greenville Public Library on March 29, 2019.
<p>Next Meeting Date and Location</p> <ul style="list-style-type: none"> • The group chose June 4, 2019, 2:30 to 4:30 p.m. at the Madison County Senior Citizen Center.
<p>Group Announcements</p> <ul style="list-style-type: none"> • Tonya Bell reminded everyone to check out the Healthy Start resource calendar for the upcoming Shared Services meeting since the meeting dates have changed.
<p>Adjourn</p> <ul style="list-style-type: none"> • There being no further business, Pam and Chelsey expressed her sincere thanks for everyone's attendance and input and the meeting adjourned.

Appendix 4, Priority Area Plans October 2020 Amendment

Priority Area Plans

Pages 7-8, Priority Area Plans in the Jefferson County Community Health Improvement Plan, March 2019, were amended in September 2020 to align the format of the goals, strategies and objectives with the format used in the State Health Improvement Plan.

While all of the health indicators are important, the community participants were asked to choose three areas that would be addressed by the development of the 2018-2021 Community Health Improvement Plan. Participants voted during the Community Health Assessment and the areas chosen to address were **Chronic Disease, Maternal and Child Health, and Social and Mental Health**. Because **health equity** was raised as an overarching issue, goals, objectives and strategies are also included.

The individual community organizations will continue to address reportable and infectious diseases, injury/violence, environmental health and emergency planning both separately and as an integrated entity when applicable. Listed below are the goals and strategies for all of the priority areas.

Priority Area 1: Chronic Diseases

	Cancer, Cardiovascular Disease, Diabetes
Issue	Cancer - lack of screening opportunities, health literacy Cardiovascular - lack of healthy food options and physical activity locations as well as health literacy Diabetes - lack of healthy food options and physical activity locations as well as health literacy
Goal	Cancer - increase in screenings, reducing the number of deaths Cardiovascular - increase awareness, increase education on living a healthier life Diabetes - Develop DPP and DSME
Barriers	Transportation, referral processes, availability of healthy food options and physical activity locations, health literacy, lack of participation from Churches, and money
Agencies Involved	IFAS Extension, Big Bend AHEC, Big Bend Rural Health Network, Health Department, Private Doctors offices, Senior Center, Area Agency on Aging & Disability Resource Center, local restaurants, school and library.
Next Steps	Continue the Heart Health Plus program, explore all screening options, continue DPP and DSME, inner agency meetings, utilize NFCC and FSU nurses

Appendix 4, Priority Area Plans October 2020 Amendment

Priority Area 2: Maternal and Child Health

Low Birth Weight, Extreme Low Birth Weight, Breastfeeding Initiation, Accessing Prenatal Care before the 1st trimester

Issue	Data collection, lack of health literacy, referral process
Goal	Low birth weight & extreme low birth weight -keeping the percentage consistently under 1% Breastfeeding - consistent data collection, address barriers of breastfeeding in the minority community
Barriers	Staffing, data collection, referral process, pediatricians and lack of health literacy.
Agencies Involved	Health Department, Private OBs Big Bend Transit, Literacy Alliance, Jail, WIC, Refuge House, Churches, Early Learning Coalition, School, Healthy Start, Hospitals, Parent Child Home Program, Early Steps and Child Protective Services
Next Steps	Develop a mentoring program and breastfeeding survey

Priority Area 3: Social and Mental Health

Mental Health Services

Issue	Under reporting of Mental Health issues, early childhood trauma, Mental Health Services for Pregnant Women
Goal	Develop support groups, increase community education and develop a better partnership with DCF
Barriers	Stigma, Families depending on wage earner, finances, school being on board, commitment to continuing care
Agencies Involved	Department of Children and Families, Mental Health Providers, Prevent Child Abuse Florida, School, Law Enforcement, DJJ, Refuge House, Peace 4 the Big Bend
Next Steps	Establish support groups

Priority Area 4: Reportable Infectious Diseases

The priority areas chosen by the group were Chlamydia and STI's.

Issue	Racial minorities are disproportionately affected.
Goal	Reduce STI's to 0% in 5 years or reduce by 50% Address racial disparities and unprotected or unsafe sex
Barriers	Stigma, transportation, and lack of knowledge and awareness
Agencies Involved	Health Department, Big Bend Transit, News Media, School Board, School, Ministerial Association, Community Action Agency, Refuge House, 4H, Guardian ad Litem
Next Steps	The next steps to address this issue are to develop an action plan that includes social media, brochure distribution, media, billboards and outreach.

Appendix 4, Priority Area Plans October 2020 Amendment

Priority Area 5: Injury and Violence

Under Reporting of Domestic Violence

Issue	Under reporting of Mental Health issues, early childhood trauma, Mental Health Services for Pregnant Women
Goal	Develop support groups, increase community education and develop a better partnership with DCF
Barriers	Stigma, Families depending on wage earner, finances, school being on board, commitment to continuing care
Agencies Involved	Department of Children and Families, Mental Health Providers, Prevent Child Abuse Florida, School, Law Enforcement, DJJ, Refuge House, Peace 4 the Big Bend
Next Steps	Establish support groups

Appendix 5, Goals, Strategies and Objectives October 2020 Amendment

Goals, Strategies and Objectives

Pages 11-15 of the Jefferson County CHIP were amended in September 2020 with the following changes:

- Aligned the format of the goals, strategies and objectives with the format used in the State Health Improvement Plan.
- Added alignment with the State Health Improvement Plan
- Updated alignment to Healthy People 2020 to the recently released Healthy People 2030

Priority Area 1: Chronic Diseases

Cancer

Goal	Cancer- increase screenings, reduce the number of deaths
Strategy	Partner with an agency that provides cancer screening and treatment to offer services to residents
Objectives	By December 31, 2021, partner with an agency to offer breast, prostate and colon cancer screenings at least annually. (Baseline 2018=0, Target 2021=1)
Activities for Completion by March 31, 2020	<ul style="list-style-type: none"> • Community health education and awareness presentations to civic groups, faith-based groups and local government • Partner with a mobile cancer screening unit or utilize hospital services • Promote the Holiday Challenge and virtual walk campaign county-wide
Healthy People 2030 Alignment	Goal: Reduce new cases of cancer and cancer-related illness, disability, and death.
State Health Improvement Plan Alignment	Priority Area 8: Chronic Diseases & Conditions. Increase cross-sector collaboration for the prevention, early detection, treatment, and management of chronic diseases and conditions to improve health equity.

Cardiovascular Disease

Goal	Cardiovascular- increase awareness, increase education on living a healthier life
Strategy	Partner with community agencies to educate the public and businesses on the importance of healthy food options
Objectives	By December 31, 2021, increase the number of healthy food options in at least two food establishments (Baseline 2018=0, Target 2021=2)
Activities for Completion by March 31, 2020	<ul style="list-style-type: none"> • Work with local restaurants and food vendors to identify healthy food options in their establishments • Community health education and awareness presentations to civic groups, faith-based groups and local government
Healthy People 2030 Alignment	Goal: Improve cardiovascular health and reduce deaths from heart disease and stroke.
State Health Improvement Plan Alignment	Priority Area 8: Chronic Diseases & Conditions. Increase cross-sector collaboration for the prevention, early detection, treatment, and management of chronic diseases and conditions to improve health equity

Appendix 5, Goals, Strategies and Objectives October 2020 Amendment

Diabetes

Goal	Develop a diabetes prevention program and diabetes self-management education program
Strategies	<ul style="list-style-type: none"> • Pursue funding and mentorships to establish and maintain a Diabetes Prevention Program (DPP) and a Diabetes Self-Management Education Program (DSME) • Pilot DSME class by June 30, 2020 by implementing Standards 8-9 of the ADA Guidance for Establishing an Accredited DSME • Ensure all DPP pre-course requirements are in place • Pilot DPP class by March 31, 2020
Objectives	<ul style="list-style-type: none"> • By December 31, 2021, establish and maintain an accredited diabetes self-management education program (Baseline: 2018=0, 2021 Target=1) • By December 31, 2021, establish and maintain an accredited diabetes prevention program (Baseline 2018=0, Target 2021=1)
Activities for Completion by December 31, 2018	<ul style="list-style-type: none"> • Implement Standards 1-7 of the ADA Guidance for Establishing an Accredited DSME by December 31, 2019 • Offer Diabetes Prevention pilot class by the end of 2018
Healthy People 2030 Alignment	Increase the proportion of people with diabetes who get formal diabetes education — D-06
State Health Improvement Plan Alignment	Priority Area 8: Chronic Diseases & Conditions. Increase cross-sector collaboration for the prevention, early detection, treatment, and management of chronic diseases and conditions to improve health equity

Priority Area 2: Maternal and Child Health

Late Entry to Care

Goal	Maintain the percentage of low birth weight & extreme low birth weight consistently under 1%
Strategies	Partner with the Healthy Start Coalition and TMH Family Residency Program to analyze 2016 and 2017 data to determine where to make system improvements
Objectives	Reduce late entry to care by 10%, from 5.6% in 2018 to 5.0% by December 31, 2021
Activities for Completion by March 31, 2018	<ul style="list-style-type: none"> • Perform analysis to ensure that there is no data collection issue that results in artificially high prenatal entry to care after the first trimester rates • Partner with the pregnancy center in Jefferson to train their volunteers on referrals • Create a family planning and preconception health outreach campaign for women • Continue to offer the Sexual Risk Avoidance program in the school district to encourage healthy choices and sexual abstinence • Partner with Workforce Development to offer at least one job fair during the cycle • Identify a community partner that can offer a life skills curriculum to middle and high school students

Appendix 5, Goals, Strategies and Objectives October 2020 Amendment

Healthy People 2030 Alignment	Increase the proportion of pregnant women who receive early and adequate prenatal care — MICH-08
State Health Improvement Plan Alignment	Priority Area 2: Maternal & Child Health. Reduce infant mortality and related disparities

Breastfeeding Initiation

Goal	Address barriers of breastfeeding in the minority community
Strategies	Use peer counseling and lactation consultants to educate pregnant women on the benefits and importance of breastfeeding
Objectives	Increase breastfeeding initiation by 10%, from 76.6% in 2018 to 84.3% by December 31, 2021
Activities for Completion by December 31, 2018	<ul style="list-style-type: none"> • Perform analysis to ensure that there is no data collection issue that results in artificially low breastfeeding initiation rates • Continue to extend prenatal appointments at the health department by 30 minutes for women in their third trimester to allow for time to meet with a lactation consultant and increase participation in the WIC breastfeeding support groups • Identify safe places to breastfeed in the community • Create a marketing campaign to educate and encourage breastfeeding
Healthy People 2030 Alignment	Increase the proportion of infants who are breastfed at 1 year — MICH-16
State Health Improvement Plan Alignment	Priority Area 2: Maternal & Child Health. Reduce infant mortality and related disparities

Priority Area 3: Social and Mental Health

Mental Health Services

Goal	Develop support groups, increase community education and develop a better partnership with DCF
Strategies	Partner with mental health providers and the Mental Health Council of the Big Bend to determine the needs of Jefferson County residents
Objectives	By December 31, 2021, Social and Mental Health providers will maintain a consistent presence in Jefferson County and will establish an effective linkage and referral system. (Baseline 2018=0, Target 2021 =1)
Activities for Completion by March 31, 2020	<ul style="list-style-type: none"> • Create and distribute a survey to gather more information on accessing services (stigma, perception) • Expand and enhance the referral process for family services between participating agencies
Healthy People 2030 Alignment	Increase the capacity of the primary care and behavioral health workforce to deliver high quality, timely, and accessible patient-centered care, AHS-R01

Appendix 5, Goals, Strategies and Objectives October 2020 Amendment

State Health Improvement Plan Alignment	Priority Area 6: Behavioral Health, Mental Illness and Substance Abuse.
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Priority Area 4: Health Equity

Goal	Improve the community's understanding of health equity and its impact on health
Strategies	Offer training opportunities to CHD staff and to local partner agencies
Objectives	By December 31, 2021, establish shared understanding across all sectors in Jefferson County concerning information and issues surrounding Health Equity (HE), Cultural Competency/Sensitivity, and how Social Determinants of Health (SDOH) influence the health of Florida's residents and communities. (Baseline 2018=0, Target 2021=1)
Activities for Completion by March 31, 2020	<ul style="list-style-type: none"> • Develop and implement a training program for CHD staff • Incorporate health equity into community presentations • Work with FSU School of Nursing and the Healthy Start Coalition to develop and implement a research study on pregnant women and support systems
Healthy People 2030 Alignment	Social Determinants of Health Workgroup Objectives
State Health Improvement Plan Alignment	Priority Area 1: Health Equity

Appendix 6, Action Plan October 2020 Amendment

Action Plan - Social and Mental Health

Pages 16-25, the Action Plans of the Jefferson County CHIP, March 2018, were amended in September 2020 with the following changes:

- Aligned the format of the goals, strategies and objectives with the format used in the State Health Improvement Plan.
- Added a description of how partners are held accountable for implementing strategies in the plan.

Objective: By December 31, 2021, Social and Mental Health providers will maintain a consistent presence in Jefferson County and will establish an effective linkage and referral system. (Baseline 2018=0, Target 2021=1)

Strategy: Partner with mental health providers and the Mental Health Council of the Big Bend to determine the needs of Jefferson County residents

Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> • Create and distribute a survey to gather more information on accessing services (stigma, perception) 	<ul style="list-style-type: none"> • Complete data sampling from property appraiser's database • Develop survey tool • Obtain IRB approval if needed • Administer survey • Enter data • Analyze data and complete report 	3/31/2021	Jefferson CHD Subcommittee	<ul style="list-style-type: none"> • Survey data entered into database/data analysis report
<ul style="list-style-type: none"> • Expand and enhance the referral process for family services between participating agencies 	<ul style="list-style-type: none"> • Convene meeting of providers and the Department of Children and Families • Review existing referral procedure and implement enhancements • Maintain quarterly meetings to discuss issues 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> • Documented referral procedure

Policy change considerations: Enhance referral procedures based on the findings from surveys and provider feedback.

Appendix 6, Action Plan October 2020 Amendment

Action Plan – Maternal and Child Health

Objective: Reduce late entry to care by 10%, from 5.6% in 2018 to 5.0% by December 31, 2021				
Strategy: Partner with the Healthy Start Coalition and TMH Family Residency Program to analyze 2017 and 2018 data to determine where to make system improvements				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Perform analysis to ensure that there is no data collection issue that results in artificially high prenatal entry to care after the first trimester rates 	<ul style="list-style-type: none"> Pull a sample of Healthy Start and health department prenatal clients to obtain entry to care dates Compare these dates to birth clerk data collection at time of delivery Present findings to the hospital and DOH Vital Statistics 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Comparison of birth clerk data collection to documented prenatal care entry dates for Healthy Start and Health Department Clients
<ul style="list-style-type: none"> Partner with the pregnancy center in Madison to train their volunteers on referrals 	<ul style="list-style-type: none"> Meet with the pregnancy center staff to offer training Schedule and hold training Track referrals 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Number of patient referrals to health department prenatal care
<ul style="list-style-type: none"> Create a family planning and preconception health outreach campaign for women 	<ul style="list-style-type: none"> Market family planning services to health department clients and other venues in the community Market preconception health classes 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Increase in family planning services obtained at the health department Increase in preconception health course participants
Policy change considerations: Enhance referral procedures based on the findings from surveys and provider feedback.				

Appendix 6, Action Plan October 2020 Amendment

Objective: Reduce late entry to care by 10%, from 5.6% in 2018 to 5.0% by December 31, 2021				
Strategy: Partner with the Healthy Start Coalition and TMH Family Residency Program to analyze 2017 and 2018 data to determine where to make system improvements				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Continue to offer the Sexual Risk Avoidance program in the school district to encourage healthy choices and sexual abstinence 	<ul style="list-style-type: none"> Offer curriculum according to program guidance Document student opt-out percentage 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Decrease in teen births and repeat births to teens per Florida CHARTS
<ul style="list-style-type: none"> Partner with Workforce Development to offer at least one job fair during the cycle 	<ul style="list-style-type: none"> Identify a location and date for the job fair Advertise in the community 	3/31/2021	Jefferson CHD Workforce Development NFCC	<ul style="list-style-type: none"> Decrease in unemployment rates per Florida CHARTS Decrease in teen births and repeat births to teens per Florida CHARTS
<ul style="list-style-type: none"> Identify a community partner that can offer a life skills curriculum to middle and high school students 	<ul style="list-style-type: none"> Curriculum to include job interviewing skills, resume building skills, managing finances, applying to colleges or technical schools 	3/31/2021	Jefferson CHD Partners TBD	<ul style="list-style-type: none"> Decrease in teen births and repeat births to teens per Florida CHARTS
<p>Policy change considerations: Renew efforts to gain support for the adoption and implementation of evidence-based and sustained programs for teen pregnancy prevention.</p>				

Appendix 6, Action Plan October 2020 Amendment

Objective: Increase breastfeeding initiation by 10%, from 76.6% in 2018 to 84.3% by December 31, 2021				
Strategy: Use peer counseling and lactation consultants to educate pregnant women on the benefits and importance of breastfeeding				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Perform analysis to ensure that there is no data collection issue that results in artificially low breastfeeding initiation rates 	<ul style="list-style-type: none"> Pull a sample of Healthy Start and health department prenatal clients to breastfeeding initiation data Compare these dates to birth clerk data collection at time of delivery Present findings to the hospital and DOH Vital Statistics 	3/31/2021	Jefferson CHD Healthy Start Coalition	<ul style="list-style-type: none"> Comparison of birth clerk data collection to documented breastfeeding data for Healthy Start and Health Department Clients
<ul style="list-style-type: none"> Continue to extend prenatal appointments at the health department by 30 minutes for women in their third trimester to allow for time to meet with a lactation consultant and increase participation in the WIC breastfeeding support groups 	<ul style="list-style-type: none"> Develop and advertise breastfeeding support groups to increase participation Work with Tallahassee Memorial Hospital "Milk with Mommy" campaign Meet with TMH Family Residency staff to ascertain what messages they are giving to patients 	3/31/2021	Jefferson CHD TMH Family Residency Program Healthy Start Coalition WIC	<ul style="list-style-type: none"> Comparison of breastfeeding initiation rates prior to program implementation and after program implementation

Appendix 6, Action Plan October 2020 Amendment

Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Identify safe places to breastfeed in the community 	<ul style="list-style-type: none"> Buy signage and place in businesses and government offices that identify breastfeeding areas 	3/31/2021	Jefferson CHD Subcommittee	<ul style="list-style-type: none"> Number of breastfeeding friendly establishments after program implementation
<ul style="list-style-type: none"> Create a marketing campaign to educate and encourage breastfeeding 	<ul style="list-style-type: none"> Buy signage and educational materials 	3/31/2021	Jefferson CHD Healthy Start	<ul style="list-style-type: none"> Comparison of breastfeeding initiation rates prior to program implementation and after program implementation
Policy change considerations: Establish and communicate to the public safe places in the community to breastfeed.				

Appendix 6, Action Plan October 2020 Amendment

Action Plan – Chronic Diseases

Objective: By December 31, 2021, establish and maintain an accredited diabetes self-management education program (Baseline: 2018=0, 2021 Target=1)				
Strategy: Pursue funding and mentorships to establish and maintain a Diabetes Prevention Program (DPP) and a Diabetes Self-Management Education Program (DSME)				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Implement Standards 1-7 of the ADA Guidance for Establishing an Accredited DSME by December 31, 2019 	<ul style="list-style-type: none"> Ensure staff are adequately trained Develop curriculum and procedure manual Obtain the input of clinicians and potential participants Establish an advisory board 	12/31/2019	Jefferson CHD	<ul style="list-style-type: none"> Curriculum and procedure manual is approved by DSME mentor
<ul style="list-style-type: none"> Pilot DSME class by June 30, 2020 by implementing Standards 8-9 of the ADA Guidance for Establishing an Accredited DSME 	<ul style="list-style-type: none"> Work with mentor to establish action plan 	6/30/2020	Jefferson CHD	<ul style="list-style-type: none"> Documented course evaluations and sign-in sheets
Policy change considerations: Adopt and implement standards of an accredited diabetes self-management education program				

Appendix 6, Action Plan October 2020 Amendment

Objective: By December 31, 2021, establish and maintain an accredited diabetes prevention program (Baseline 2018=0, Target 2021=1)				
Strategy: Pursue funding and mentorships to establish and maintain a Diabetes Prevention Program (DPP) and a Diabetes Self-Management Education Program (DSME)				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Ensure all DPP pre-course requirements are in place 	<ul style="list-style-type: none"> Ensure staff are adequately trained Develop procedure manual that includes documents required by CDC for accreditation. 	12/31/2019	Jefferson CHD Big Bend AHEC	<ul style="list-style-type: none"> Completed CDC checklist with supporting documentation
<ul style="list-style-type: none"> Pilot DPP class by March 31, 2020 	<ul style="list-style-type: none"> Ensure billing mechanism is in place 	3/31/2021	Jefferson CHD Big Bend AHEC	<ul style="list-style-type: none"> Documented course evaluations and sign-in sheets
Policy change considerations: Adopt and implement standards of an accredited diabetes prevention program.				

Appendix 6, Action Plan October 2020 Amendment

Objective: By December 31, 2021, increase the number of healthy food options in at least two food establishments (Baseline 2018=0, Target 2021=2)				
Strategy: Partner with community agencies to educate the public and businesses on the importance of healthy food options				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Work with local restaurants and food vendors to identify healthy food options in their establishments 	<ul style="list-style-type: none"> NFCC School of Nursing will utilize nursing students to work with establishments in both counties as group assignments. DOH-Jefferson/Madison staff will work with NFCC to create FAQ documents for nursing students to utilize, obtain access to nutritionists if needed and work to print new menus. 	3/31/2021	Jefferson CHD NFCC School of Nursing	<ul style="list-style-type: none"> Student New menus showing the healthier items
<ul style="list-style-type: none"> Community health education and awareness presentations to civic groups, faith-based groups and local government 	<ul style="list-style-type: none"> Develop a sample presentation that can be used in the different forums (PowerPoint, flyers, hand-outs, etc.) Ascertain which community partners want to co-present Schedule presentations with organizations 	12/31/2019	Jefferson CHD	<ul style="list-style-type: none"> Presentation to Rotary Club in Jefferson County on May 11, 2018. Social determinants of health base presentation is complete and distributed to partners. We will build on this to do presentations.
Policy change considerations: Incentivize businesses to increase access to healthy food options.				

Appendix 6, Action Plan October 2020 Amendment

Objective: By December 31, 2021, partner with an agency to offer breast, prostate and colon cancer screenings at least annually. (Baseline 2018=0, Target 2021=1)				
Strategy: Partner with an agency that provides cancer screening and treatment to offer services to residents				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Community health education and awareness presentations to civic groups, faith-based groups and local government 	<ul style="list-style-type: none"> Develop a sample presentation that can be used in the different forums (PowerPoint, flyers, hand-outs, etc.) Ascertain which community partners want to co-present Schedule presentations with organizations 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Documentation of event or presentation via sign-in sheets, advertisements or other documentation as appropriate
<ul style="list-style-type: none"> Partner with a mobile cancer screening unit or utilize hospital services 	<ul style="list-style-type: none"> Priorities are breast cancer, lung cancer and colorectal cancer Madison County Memorial Hospital has a full-service laboratory and offers mammography and endoscopy services 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> Advertisements of screening events Aggregate numbers of persons screened with no identifiers
<ul style="list-style-type: none"> Promote the Holiday Challenge and virtual walk campaign county-wide 	<ul style="list-style-type: none"> Advertise the event community-wide Check into the cost per participant Pursue the possibility of making this a competition event 	12/31/2019	Jefferson CHD Community Partners	<ul style="list-style-type: none"> Number of participants
Policy change considerations: Regularly provide evidence of need, offer best practice screening materials, and aggregate data regarding need across the community.				

Appendix 6, Action Plan October 2020 Amendment

Action Plan – Health Equity

Objective: By December 31, 2021, establish shared understanding across all sectors in Jefferson County concerning information and issues surrounding Health Equity (HE), Cultural Competency/Sensitivity, and how Social Determinants of Health (SDOH) influence the health of Florida’s residents and communities. (Baseline 2018=0, Target 2021=1)				
Strategy: Offer training opportunities to CHD staff and to local partner agencies				
Activities	Action Steps	Due Date	Agency Responsible	Indicator
<ul style="list-style-type: none"> Develop and implement a training program for CHD staff 	<ul style="list-style-type: none"> Obtain suggested training courses from HQ Require levels of training for all staff, depending on their role 	3/31/2021	Jefferson CHD	<ul style="list-style-type: none"> TRAIN transcripts or sign-in sheets from training
<ul style="list-style-type: none"> Incorporate health equity into community presentations 	<ul style="list-style-type: none"> Prior to educating the community on chronic diseases and maternal and child health, incorporate health equity into the presentations 	3/31/2020	Jefferson CHD	<ul style="list-style-type: none"> Documentation of event or presentation via sign-in sheets, advertisements or other documentation as appropriate
<ul style="list-style-type: none"> Work with FSU School of Nursing and the Healthy Start Coalition to develop and implement a research study on pregnant women and support systems 	<ul style="list-style-type: none"> Assist with any IRB approval Work with partners to implement the project 	3/31/2020	Jefferson CHD Healthy Start Coalition FSU	<ul style="list-style-type: none"> Final data analysis report findings
Policy change considerations: Convene community organizations to promote linkages, develop community resource materials, and advocate for activities that impact social determinants of health.				