



Community Health Improvement Plan Annual Report, 2015

*Florida Department of Health in Santa Rosa County
Partnership for a Healthy Community*

September 2015

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Introduction

Santa Rosa's poor health status affects everyone who lives and works in our county. Tobacco use, unhealthy weight, and other poor health habits and behaviors have high cost, to individuals and to area employers. In part, the health status of an area's residents is affected by "social determinants" – low incomes, poor living conditions, lack of transportation and other infrastructure problems. The social determinants of health present in our area are not easily or quickly changed. To address this, the Studer Institute has been formed to research and identify approaches to improving community economic and infrastructure issues. Health status is also determined by poor health choices and behaviors- things that we have more direct control over as individuals, and can be affected in a shorter amount of time. The Community Health Improvement Plan 2013-2016 focuses on interventions designed to address health status impacted by behaviors.

Poor health impacts families, schools, businesses, and the area's economy overall. Those with poor health suffer more of the consequences, but even the most health conscious among us are not left unaffected. We actively compete for new businesses, economic development, and job growth as our poor health status and lack of attention to health problems present roadblocks to that growth. We fall short of our full potential because poor health impacts productivity and absenteeism in our schools and places of work. Healthier communities are attractive to new businesses because of the likelihood of a healthier workforce. If we achieve even moderate success in improving the health of area residents, the costs we avoid will be channeled back into the area's economy and facilitate growth and development.

The ultimate goal is to support initiatives to help people feel better and live better, longer lives. We must be willing, as a community, to confront the area's health issues more openly and with action. By working together, we can make healthier choices and make Santa Rosa a healthier place to live, learn, work and play.

Overview of the Community Health Improvement Plan (CHIP)

This is the annual review report for the 2013 – 2016 Santa Rosa County Community Health Improvement Plan. The activities and collaborative efforts of the Florida Department of Health in Santa Rosa County (DOH-Santa Rosa) and community partners will be reflected within the report. This document will serve as a progress review of the strategies that were developed and the activities that have been implemented. While the Community Health Improvement Plan is a community driven and collectively owned health improvement plan, DOH-Santa Rosa is charged with providing administrative support, tracking and collecting data, and preparing the annual review report.

The findings were presented to the full Partnership Board which served as the steering committee for the community health assessment and improvement process. The Partnership Board is comprised of a diverse leadership group representing 11 agencies and organizations in Santa Rosa County. Priorities were set through a facilitated consensus process on three strategic issue areas: Healthiest Weight, Tobacco Use, and Access to Care. The following table shows Strategic Issue Areas with their goals.

STRATEGIC ISSUE AREA	GOAL
Healthiest Weight	1. <i>Identify and develop intervention strategies that promote policy, systems and environmental change within organizations</i>
	2. <i>Identify existing community resources</i>
	3. <i>Develop a 3-year phased implementation plan for selected strategies and activities</i>
	4. <i>Identify short, medium and long-term indicators for selected strategies</i>
Tobacco Use	1. <i>Identify and develop intervention strategies that promote policy, systems and environmental change within organizations</i>
	2. <i>Identify existing community resources</i>
	3. <i>Develop a 3-year phased implementation plan for selected strategies and activities</i>
	4. <i>Identify short, medium and long-term indicators for selected strategies</i>
Access to Care	1. <i>Identify and develop intervention strategies that promote policy, systems and environmental change within organizations</i>
	2. <i>Identify existing community resources</i>
	3. <i>Develop a 3-year phased implementation plan for selected strategies and activities</i>
	4. <i>Identify short, medium and long-term indicators for selected strategies</i>

Summary of CHIP Annual Review Meeting

The Santa Rosa Community Health Improvement Plan Steering Committee, partners, and community members developed and will implement the action plans correlating to the Health Priorities of the community. Monitoring of the Santa Rosa County Community Health Improvement Plan has occurred on a quarterly basis for tracking progress and implementation in 2014-15.

The success of each goal is based on outcome measurements that track the progress and impact of the project. Each goal has an assigned owner and, in some cases, a task force and/or additional work group who are (or will be) working together to develop coordinated Action and Evaluation plans. Progress has been monitored by each owner as well as by the Steering Committee. Continual Plan updates will be provided. Lessons learned from actions taken will help guide key decision makers to ensure the right strategies are implemented and the desired outcomes achieved.

The key success and progress within this Annual Report is the community involvement which identified the need to revise the current Community Health Improvement Plan and the publishing and deployment of the September 2015 Plan that is now “in action”. Below are the three Health Priorities with their corresponding Statement of Need, Background and Progress.

Evaluation will remain important throughout the remainder of the three-year cycle so measurable progress of the Plan is meaningful.

The Santa Rosa County Community Health Initiative Steering Committee voted unanimously to integrate with the Partnership for a Healthy Community and the Live Well Northwest Florida Workgroups.

The Mission of the Partnership for a Healthy Community is to periodically conduct comprehensive health status assessments, and to advance, support or promote collaborative initiatives to improve health and quality of life for residents of Escambia County and Santa Rosa County in Northwest Florida

The Partnership for a Healthy Community is a Florida not-for-profit corporation, formed in 1994 with the mission of assessing health status, identifying priority health needs, and supporting collaborative efforts to address those needs to improve health and quality of life for the residents

of Escambia and Santa Rosa Counties in Northwest Florida. The Board of Directors of the Partnership is broadly representative of key constituencies in the two counties. The Partnership performed comprehensive health status assessments for the Escambia and Santa Rosa Counties in 1995, 2000, 2005 and 2012. The Partnership has sponsored community forums and has been instrumental in helping area health providers obtain grant funds for projects addressing priority health needs, and supported a variety of initiatives to improve health status for area residents.

Priority Healthy Needs are the same as Santa Rosa County: Healthy Weight, Tobacco and Access to Care.

Partnership for a Healthy Community hosted three Roundtables bringing both Santa Rosa and Escambia Counties together to identify common goals and strategies. As a result, the Healthy Weight and Tobacco Workgroups merged. The Access to Care health priority will have an Oversight Group which will collaborate on all issues as well as individually address the needs of Santa Rosa County's Transportation issue.

The annual review meeting was held on September 3, 2015 in a special session of the Partnership for a Healthy Community. Members were provided with the annual report and proposed revision for version 3 of the CHIP (2015-2016) several days in advance. During the meeting a summary of progress toward goals was presented and the floor was opened for discussion and a vote of approval. A representative from the Florida Department of Health in Santa Rosa County presented recommended revisions developed by the work groups for Healthy Weight and Tobacco. There were no revisions from the Access to Care work group; however, there is a revised work group structure. The meeting was opened for a discussion on the proposed revisions and a vote to accept the revisions.

Health Priority: Healthiest Weight Santa Rosa

Statement of Need

According to 2012 Florida Census Update, Santa Rosa County's adult obesity rate increased over a four year period. In Santa Rosa County, 52,692 people are overweight and 47,104 are obese. The two together equate to almost two thirds of the total County population. The average person who is overweight costs employers approximately \$75 more annually than persons of normal weight which equates to \$3,951,900. The average person in the lowest obesity range (Grade 1) costs employers approximately \$2,030 more annually than a person of normal weight. In 2014, if all 47,104 of Santa Rosa County resident that are obese were in Grade 1, the cost to employers would be \$95,621,120. Therefore, the combined cost to employers in Santa Rosa County for all persons overweight and obese would exceed \$99 million annually.

At the end of the 2013-2014 school year, over 28% of students in first, third and sixth grade were overweight or obese. In 2014, sixth graders that were considered at risk for being overweight or obese were 35%. The risk of developing type 2 diabetes increases with age, obesity, and lack of physical activity. Diabetic screenings are improving in Santa Rosa; however, the County is 7% below the State average.

Background

Census data shows that, between 2010 and 2012, the rate of overweight and obese adults increased by 3.3%, or 3,158 individuals. Adolescents (ages 10 to 19) and young adults (ages 20 to 24) make up 21% of the population of the United States. The behavioral patterns established during these developmental periods help determine young people's current health status and their risk for developing chronic diseases in adulthood. The financial burdens of preventable health problems in adolescence are large and include the long-term costs of chronic diseases that are a result of behaviors begun during adolescence. This is important for the Santa Rosa County community because overweight adolescents have a 70% chance of becoming overweight or obese adults. Santa Rosa County Community Health Initiative decided to focus on adolescent obesity to reduce the rates of adult obesity and improve health outcomes. Healthy students make a healthy community. The Community Health Improvement Plan will integrate the 5-2-1-0 Let's Go! campaign to work in the multi-sector, community and schools to change the behaviors of students.

Health Priority: Healthiest Weight Santa Rosa

Goals, Strategies and Objectives

Goal 1: Increase the delivery of 5-2-1-0 educational materials to 75% of target school age population. <i>Healthy People 2020: NWS-10 Reduce the proportion of children and adolescents who are considered obese.</i>			
Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
SRC School District BMI Annual Report	Baseline	75%	100%
Objective 1: Implement a healthy weight promotional campaign.			
Activities	Performance Measure	Target Date	Community Action
Implement evidence-based healthy weight promotional campaigns for public-health education.	75% (+4,500) of target school age population	June 30, 2016	➤ Achieved annual target.
Develop evaluation methods for community outreach tools.	SRC School System Annual Report 2014: 28%	August 2014	➤ Achieved target, survey created.
Goal 2: Provide 5-2-1-0 educational campaign materials to 50% of community outreach populations. <i>Healthy People 2020: NWS-11.4 (Developmental) prevent inappropriate weight gain in children and adolescents aged 2-19</i>			
Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
5-2-1-0 Let's Go!	Baseline	50%	100%
Objective 1: Increase community engagement (+3 community partners) of the 5-2-1-0 health promotion campaign			
Activities	Performance Measure	Target Date	Community Action
Adopt 5-2-1-0 promotional campaign in the Santa Rosa Community.	Community Engagement Baseline	June 30, 2016	➤ Achieved target; program is in 26 out of 27 elementary schools.
Promote the health and cost- saving benefits of evidence-based employee wellness programs.	Community Engagement Baseline	December 31, 2016	➤ Achieved target; Community Health Summit 2014
Collaborate and jointly sponsor 5-2-1-0 to promote healthy behaviors with community partners	Community Engagement Baseline	June 30, 2016	➤ Achieved target. ➤ Present at Kids Marathon, 11/9 and Community Health Summit 11/4/2014. ➤ 75 Pre- K posters in 17 elementary schools + 1 Pre-K center. ➤ 75 posters in schools, 2 per school at a minimum. ➤ 5-2-1-0 incorporated into the health education program in the UF Extension services program at about 12 sites in 2nd and 4th grade to about 1,800 students.

Objective 2: Increase (+1 member of the Healthy Weight Santa Rosa Committee) the participation and collaboration with Live Well Northwest Florida.

Increase (+1 member of the Healthy Weight Santa Rosa Committee) the participation and collaboration with Live Well Northwest Florida	Community Engagement Baseline	June 30, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ Integration with the Live Well NWFL Healthy Weight Workgroup.
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Goal 3: Increase the adoption of a Wellness Policy in the Santa Rosa County VPK centers by 60%.
Healthy People 2020: NWS-11.1 (Developmental) Prevent inappropriate weight gain in children aged 2 to 5 years.

Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
VPK Wellness Policies	Baseline	60%	100%

Objective 1: Implement and incorporate a wellness policy to 60% (17) of the Early Learning Center (ELC) programs

Activities	Performance Measure	Target Date	Community Action
Integrate the 5-2-1-0 message into the Early Learning Center (ELC) health education programs.	60% of VPK centers have a wellness policy by 6/2016.	June 30, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ 29 out of 31 provided materials

Goal 4: Decrease the Diabetes Type 2 rates in Santa Rosa County.
Healthy People 2020: d-1 Reduce the annual number of new cases of diagnosed diabetes in the population.

Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
Health Rankings	Medicare enrollees that receive HbA1c monitoring: 78%	1%	2%

Objective 1: Implement the Diabetes Prevention Classes for community members at risk for developing Type 2 diabetes.

Activities	Performance Measure	Target Date	Community Action
Implement 16 week courses by the National Diabetes Prevention Program (NDPP) to a minimum of 20 community members at risk for developing Type 2 diabetes	Increase screenings by 1%.	June 30, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ One, 16 week course with 31 community members

Health Priority: Tobacco Free Santa Rosa

Statement of Need

Tobacco use is the single most preventable cause of death and disease in the United States. Each year, approximately 443,000 Americans die from tobacco-related illnesses. For every person who dies from tobacco use, 20 more people suffer with at least one serious tobacco-related illness. In addition, tobacco use costs the U.S. \$193 billion annually in direct medical expenses and lost productivity. According to the 2012 Florida Charts update, there are 34,812 tobacco users in Santa Rosa County. The average smoker costs employers at least \$5,800 more annually than employees who don't smoke. Costs to employers include increased expenses for employee health plans, absenteeism and loss of productivity in the workplace. Smokers cost Santa Rosa County employers \$201,909,600 annually.

Individual costs to an average smoker living in Santa Rosa County are approximately \$1,965 a year on cigarettes, and approximately \$3,340 more a year on health care costs than non-smokers. Combined, these amounts represent nearly 15% of annual personal income per person in Santa Rosa County.

Background

According to Healthy People 2020, in 2008, 48.3% of adult smokers aged 18 years and older reported an attempt to stop smoking in the past 12 months. Tobacco use is identified as a cause of various cancers and cardiovascular disease as well as low birth weight and other adverse health outcomes. Measuring the prevalence of tobacco use in the population can alert communities to potential avoidable health problems and the need for cessation programs or the effectiveness of existing programs. The percentage of adults that are currently smoking "most days" or "everyday" in Santa Rosa County is 24%, which ranks it among the highest usage rates in the State.

Santa Rosa County youths who have used cigarettes in the last 30 days are 9.1%, with the State at 6.1%. Youths who use smokeless tobacco products in Santa Rosa County are 6.0%, with the State rate being 3.5%

Health Priority: Tobacco Free Santa Rosa

Goals, Strategies and Objectives

Goal 1: Increase the tobacco cessation rates for residents in Santa Rosa County. <i>Healthy People 2020: TU-4.1 Increase smoking cessation attempts by adult smokers.</i>			
Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
AHEC	1	2	3
Objective 1: Increase the number of employers by a third (+2) with tobacco-free campuses and/or worksites by June 30, 2016.			
Activities	Performance Measure	Target Date	Community Action
Provide area employers with information and tools to develop and implement tobacco-free policies.	Santa Rosa Tobacco Survey	June 30, 2016	➤ Achieved target. ➤ 6 employers adopted smoke-free policies: CVS, AppRiver; City of Milton; Santa Rosa School Board, Family Dollar Stores and Lowe's.
Objective 2: Increase by 100% (+3) the number of tobacco-free business policies by June 30, 2016.			
Activities	Performance Measure	Target Date	Community Action
Provide evidence based information on benefits of tobacco cessation programs.	Florida BTFF data	June 30, 2016	➤ Achieved target. ➤ 2 – City of Milton & Forsley Properties
Objective 3: Increase by 16% (21 classes per annum) the free tobacco cessation classes by June 30, 2016.			
Activities	Performance Measure	Target Date	Community Action
Provide free cessation classes by Area Health Education Center (AHEC) to the general public.	AHEC	June 30, 2016	➤ Achieved annual target. ➤ 8 classes in 2015
Objective 4: Increase the number of smoke-free rental/leasing properties by 100% (+4) by June 30, 2016.			
Activities	Performance Measure	Target Date	Community Action
Establish data collection and analysis of surveys for smoke-free rental/leasing.	Tax Collector's Office	June 30, 2016	➤ Completed in 2013.
Increase awareness of smoke-free rental/leasing policies	Baseline	June 30, 2016	➤ Achieved target. ➤ There are 4 smoke free multi-unit housing that had adopted a smoke-free policy: Woodland Run East Apartments; The Breeze Apartments.

Goal 2: Reduce the incidence of youth tobacco use in Santa Rosa County.*Healthy People 2020: TU-2 Reduce tobacco use by adolescents.*

Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
Florida Youth Tobacco Survey (2012)	9.1%	9.0%	8.9%

Objective 1: Reduce the incidence of youth tobacco use by 2% (840 students) by June 30, 2016.

Activities	Performance Measure	Target Date	Community Action
Increase awareness of "Students Working Against Tobacco" (SWAT) to diverse youth populations.	Florida Youth Tobacco Survey (2012)	June 30, 2016	<ul style="list-style-type: none">➤ Achieved annual awareness target.➤ SWAT Meetings since Aug 2014:<ul style="list-style-type: none">➤ County wide – 22 meetings➤ School wide – six schools have a minimum of two meetings per month, high school usually meets weekly (3 middle, 2 high 1 k-12)➤ This year 26 County officer meetings were held and 140 school based meetings throughout the county.

Health Priority: Access to Care

Statement of Need

Access to comprehensive, quality health care services is important for the achievement of health equity across all populations and for increasing the quality of life for everyone. Access to health services encompasses four components: coverage, services, timeliness, and workforce. Its service is wide and includes overall physical, social and mental health status, prevention of disease and disability, detection and treatment of health conditions, quality of life, preventable death and life expectancy. Disparities in access to health services affect individuals and the community. Limited access to health care impacts people's ability to reach their full potential, negatively affecting their quality of life. Barriers to services include lack of availability, high cost and lack of insurance coverage. In Santa Rosa County, more than 11% of residents live below the poverty line, 13% are elderly and 14% disabled. The unemployment rate sits just above 9%, with a median household income of \$55,129. Only 18% of Santa Rosa residents do not have health insurance, below the State uninsured level of 25%. Of the residents in Santa Rosa County, 15% could not see a doctor due to costs. Medicare costs per client in the County are \$10,650. The Medicaid and Transportation Plan Disadvantage (TDSP) in Santa Rosa County serves .79% (402 people) of the potential population, ranking the lowest in the State, leaving over 50,000 people without the necessary transportation.

Background

In Santa Rosa County the use of hospital Emergency Departments, among the most expensive form of medical care, for treatment that should be provided by a primary care physician may indicate lack of access. Inappropriate use of the Emergency Department is 14% higher than the State average, the cost of which exceeds \$10 million. In the County there are 100 Primary Care Physicians with the population-to-physician ratio 1,541:1. The number of dentists in the Santa Rosa County community is 38, with the population-to-dentist ratio of 4,334:1, among the worst in the State. The reasons Floridians do not receive regular dental preventive care include lack of dental coverage for adult Medicaid patients, lack of private-practice dentists willing to accept Medicaid's low reimbursement rates, lack of County Health Department resources, lack of affordable dental insurance or inability to meet high co-pays and lack of awareness of the importance of dental health to overall health. The low ratio of mental health providers in Santa Rosa County to the population is 8,942:1. Mental health provider ratio is among the bottom half in the State.

Health Priority: Access to Care

Goals, Strategies and Objectives

Goal 1: Santa Rosa County will improve access to health care for residents. <i>Healthy People 2020: AHS-6 Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care or prescription medicines.</i>			
Data Source	Current Status	Short Term Target (2014)	Long Term Target (2016)
Expert & resident feedback	To be developed	Data and resource input completed	Shared directory to resources and partners with increased awareness for residents.
Objective 1: Establish, maintain and distribute a centralized directory of healthcare services for Santa Rosa County.			
Activities	Performance Measure	Target Date	Community Action
Identify all healthcare service sources in Santa Rosa County.	Baseline	Dec. 31, 2016	➤ Completed. The directory will be updated in June and December.
Increase health directory distribution to partners, community and the underserved population. Ensuring healthcare service data is maintained and accurate.	Baseline	Dec. 31, 2016	➤ Achieved target. ➤ AmeriCorps Interns with the Santa Rosa EOC will update and maintain the directory.
Encourage exchange of key client information to improve access and coordination of services.	Baseline	Dec. 31, 2016	➤ Achieved target. ➤ Available on Department of Health and School Board websites.
Objective 2: Develop and implement a volunteer dental provider pool in the WECARE program for underserved adult patients.			
Activities	Performance Measure	Target Date	Community Action
Initiate a dental recruitment program.	<i>Health Rankings:</i> 4,334:1 - among the worst in the State	Dec. 31, 2014.	➤ Achieved target. ➤ Completed volunteer dentist recruitment letter, provider contract and referral form. ➤ End of year June 2015. \$5,000 in services was contributed by Drs. Webster, Lassiter, Ottley, and Turner. ➤ MOU for health services between DOH-SRC, ECC and School Board for McKinney Vento students and their families. Services beginning April 1, 2015.

Objective 3: Increase access to (+3) resources for non-emergency healthcare for underserved clients.			
Activities	Performance Measure	Target Date	Community Action
Increase the awareness of non-emergent clinics and the services offered in Santa Rosa County.	Baseline	Dec. 31, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ Live Well Northwest Florida Safety Net Providers and Santa Rosa Safety Net Providers integration.
Increase data collection and analysis of inappropriate Emergency Department healthcare usage.	Partnership for a Healthy Community: 14% higher than the State average	Dec. 31, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ Data reported at quarterly meetings.
Review transportation as a significant barrier to underserved residents.	Serves less than 1% (402) of the population, ranking lowest in the State	Dec. 31, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ Conducted a gap analysis. ➤ Formed sub-committees. ➤ Gathered evidenced based transportation programs information from other communities. ➤ Transportation Summit was held and a gap analysis was conducted. ➤ Held business/post-secondary roundtable.
Objective 4: Establish the base level of behavioral and mental health services in Santa Rosa County for underserved population.			
Establish data collection and analysis of behavioral and mental health services.	Baseline	Dec. 31, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ Department of Children and Families has produced Behavioral Health Study for the community.
Increase the awareness of behavioral and mental health, including the services offered in Santa Rosa County.	Baseline	Dec. 31, 2016	<ul style="list-style-type: none"> ➤ Achieved target. ➤ Resources are listed in the SAMHSA service directory, 1/23/2015.

Revisions

Health Priority: Healthy Weight

Goal: Increase the number of children and adults who eat more fruits and vegetables, limit screen time to 2 hours or less, are physically active 60 minutes each day, and consume less sugar-sweetened drinks.

Revision: Combine goals 1-3 into one new goal as stated above.

Updated Priorities

1. Increase physical activity and healthy nutrition practices in child care centers
 - a. Assess pre-implementation practices and policies related to physical activity and nutrition in child care centers
2. Promote and support adoption of 5-2-1-0 Let's Go! Program in elementary schools.
 - a. Assess pre-implementation classroom practices and policies in schools
 - b. Disseminate 5-2-1-0 information to public elementary schools
 - c. Disseminate 5-2-1-0 information to private elementary schools
 - d. Assess post-implementation practices and policies in schools
3. Distribute 5-2-1-0 information to the community through faith-based organizations
 - a. Survey faith-based organizations regarding current activities and needs related to healthy weight
 - b. Develop and distribute a 5-2-1-0 toolkit for faith-based organizations based on needs identified in survey
 - c. Assess post-toolkit activities in faith-based organizations

Additional Strategic Objectives	Current Strategic Objective	Indicator (Data Source)	Current Level	Target	Explanation for Revision
By April 2016 assess current policies and practices related to nutrition and PA in 6 childcare centers	These will be ongoing	Number of childcare center assessments completed	0	6	Available community resources and readiness to adopt
By July 2016, provide education and technical assistance to implement 5-2-1-0 in 6 childcare centers	Aligns with Goal 3	Number of childcare centers that adopt the 5-2-1-0 Let's Go! curriculum	0	6	Expand number of organizations impacted by 5-2-1-0 and created access to parents for 5-2-1-0 education
By March 2016 survey faith-based organizations regarding current activities and needs related to healthy weight	No current activities	Number of surveys completed	0	10	New initiative to reach more adults and decision makers in the community
By June 2016 develop and distribute 5210 toolkits to faith-based organizations	No current activities	Number of requests for toolkits	0	5 (50% of the assessed org.)	New initiative to reach more adults and decision makers in the community
By September 2016 assess post-toolkit activities	No current activities	Response on survey to assess toolkits	0	75% report at least 1 positive change	

New Live Well Healthy Weight Workgroup for 2015-16

<ul style="list-style-type: none"> Debra Vinci (UWF) – Chair Enid Sisskin (UWF) – Co-Chair Alyssa Curtis (Partnership for a Healthy Community) - Secretary Becky Washler (Partnership for a Healthy Community) Cynthia Brown (Eating Better, Feeling Better, Living Better Inc.) Debbie Price (DOH – Santa Rosa) Deborah Napier (Gulf Power Company) Dotty Thomas (Navarre YMCA) JoAnn Vanfleteren (DOH – Santa Rosa & Ascendant Health Partners) Julie Burger (DOH – Escambia) 	<ul style="list-style-type: none"> Kay Johnson (Escambia County Schools – Food Services) Leslie Bell (Sodexo) Martha Hanna (Escambia County Schools – Hall Center) Megan McCarthy (Baptist Health Care - Healthy Lives) Sandy Peloke (Early Learning Coalition) Sue Kennedy (Parent Teacher Association) Susan Kennedy (Parent Teacher Association) Versilla Turner (DOH – Escambia)
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Health Priority: Tobacco Use

Goal 1: *Increase number of employers with tobacco-free policies and campuses*

- Strategy 1: Increase tobacco-free businesses by promoting the benefits of going tobacco-free

Key Partners: DOH-Santa Rosa, Chamber of Commerce, LiveWell, AHEC, Tobacco Free Santa Rosa Coalition

Revisions: Combine goal 1, objectives 1-4 into the new goal as stated above. Goal 2 will be managed by Tobacco Free Santa Rosa.

Updated Priorities

1. Increase tobacco-free businesses by promoting the business benefits of going tobacco-free
 - a. Increase the number of employers by 3 with tobacco-free policies
 - b. Increase by 100 the number of individuals who complete a free tobacco cessation class at a worksite
 - c. Increase the number of smoke-free rental/lease properties by 100% (+4)
2. Implement a public awareness campaign on the dangers of e-cigarettes
 - a. Develop a public service announcement (PSA) on e-cigarettes aimed at increasing awareness among youths

Additional Strategic Objective	Current Strategic Objective	Indicator (Data Source)	Current Level	Target	Explanation for Revision
By June 2016 Increase the number of new businesses or organizations with tobacco-free policies	Increase by 100% (+3) the number of tobacco-free business policies by June 30, 2016.	Documented policies	0 new policies for 2015-2016	2 new organizations in Santa Rosa County with tobacco policies	Original objective completed
By June 2016 increase the number of individuals who complete a tobacco cessation class	Increase by 100% (+3) the number of tobacco-free business policies by June 30, 2016.	AHEC Register	45	Increase Santa Rosa TFF referrals by 20% between 6/2015 and 6/2016	Original objective completed
By January 2016 develop a PSA campaign on the dangers of e-cigarettes	Increase by 100% (+3) the number of tobacco-free business policies by June 30, 2016.	Media materials developed; deployment plan in place	none	Print PSAs ready for deployment	Original objective completed

New Live Well Tobacco Workgroup for 2015-16

<ul style="list-style-type: none"> • Martha Zimmerman (<i>Healthy Start - Santa Rosa</i>) – Chair • Patsy Barrington (<i>UWF</i>) – Co-Chair • TBD - Secretary • Angel Brady (<i>DOH– Escambia</i>) • Angela Hahn (<i>University of West Florida</i>) • Barbara Bowman (<i>Healthy Start</i>) • Bill Gamblin (<i>City of Milton</i>) • Carly Perreault (<i>AmeriCorps</i>) • Cory Brown (<i>90 Works</i>) • Dede Barrett (<i>DOH – Santa Rosa</i>) • Diane Farris (<i>Fox 10 TV</i>) • Elizabeth Oakes (<i>Landrum</i>) • Jenea Highfill (<i>DOH – Santa Rosa</i>) • Jessica Leggett (<i>FL Department of Children & Families</i>) • JoAnn Vanfleteren (<i>DOH – Santa Rosa, Ascendant Healthcare Partners</i>) • Kim Schmidt (<i>West Florida AHEC</i>) • Lydia Delcambre (<i>Students Working Against Tobacco</i>) • Mary Beverly (<i>DOH – Santa Rosa</i>) 	<ul style="list-style-type: none"> • Nicole Larson (<i>West Florida AHEC</i>) • Pat Dunn (<i>Partnership for a Healthy Community</i>) • Penny Eubanks (<i>West Florida AHEC</i>) • TBD (<i>Students Working Against Tobacco</i>) • Tommy McDaniel (<i>Santa Rosa Health & Rehabilitation Center</i>) • Vanessa Phillips (<i>DOH – Escambia</i>) • Vince Nguyen (<i>DOH - Santa Rosa</i>) • Zachary Post (<i>AmeriCorps</i>) • Others to be added may include: <ul style="list-style-type: none"> ○ <i>Chambers of Commerce</i> ○ <i>Small and/or large business owners</i> ○ <i>Lamar Advertising</i> ○ <i>Society for Human Resource Managers</i> ○ <i>University of West Florida Communications</i>
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Health Priority: Access to Care

The Access to Care health priority will have an Oversight Group which will collaborate on all issues as well as individually address the needs of Santa Rosa County's Transportation issue.

New Live Well Access to Care Workgroups

1. Assure residents of Escambia and Santa Rosa Counties access the right health and/or social services at the right time and at the right place

Referral Management Software Subcommittee

- a. Encourage exchange of key client information to improve access and coordination of services
 - i. Maintain and distribute a centralized directory of healthcare services (*Santa Rosa County*)
 - ii. Implement a shared electronic platform and universal intake-form among area health and social services (*Escambia County and Santa Rosa County*)

Safety Net Providers Subcommittee

- a. Implement a pilot Emergency Department diversion/care management program (*Escambia County*)
- b. Increase access to resources for non-emergency healthcare for underserved clients. (*Escambia County and Santa Rosa County*)

Specialty Referral Subcommittee

- a. Increase the availability of medical and surgical specialists in the WeCare program (*Escambia County and Santa Rosa County*)
- b. Develop and implement a volunteer dental provider pool in the WeCare program for underserved adult patients (*Santa Rosa County*)
- c. Establish the base level of behavioral and mental health services for underserved population (*Santa Rosa County*)

Santa Rosa Issues Subcommittee

2. Review transportation as a significant barrier to underserved residents (*Santa Rosa County*)

New Live Well Access to Care Work Groups for 2015-16

Access Oversight Work Group	<ul style="list-style-type: none"> • Brunie Emmanuel – CHAIR • Karen Barber (Santa Rosa Schools) CO-CHAIR • Ann Papadelias (ECC/SRCC) • Chandra Smiley (ECC/SRCC) • John Porter (Baptist Health Care) 	<ul style="list-style-type: none"> • Nora Bailey (Partnership) • Pam Chesser (Santa Rosa Medical Center) • Paul McLeod (Health & Hope) • JoAnn Vanfleteren (DOH-Santa Rosa & Ascendant Healthcare Partners)
Safety Net Providers Subcommittee	<ul style="list-style-type: none"> • Brunie Emmanuel – CHAIR • Michael Adamson (SHHS) • Alyssa Curtis (Partnership) • Ann Papadelias (ECC/SRCC) • Chandra Smiley (ECC/SRCC) • Dennis Goodspeed (Lakeview) • Dick Hooper, MD (St. Joseph's Clinic) • Jessica Ham (Health & Hope) • John Johnson (Homeless Coalition) • John Porter (Baptist Health Care) 	<ul style="list-style-type: none"> • Karen Barber (Santa Rosa Schools) • Pam Chesser (Santa Rosa Medical Center) • Pat Dunn (Partnership) • Paul Baroco, MD (ECC) • Sara Davy (Health & Hope) • Shirley Cornett (Good Samaritan Clinic) • Susan Howell (DOH – Santa Rosa) • Susan Prescott (DOH – Escambia) • William Brown (St. Joseph's Clinic)
Specialty Referral Subcommittee	<ul style="list-style-type: none"> • Paul McLeod (Health & Hope) – CHAIR • Candi Chitty (Quality Healthcare Consulting) • Chandra Smiley (ECC/SRCC) • Gary Pablo, MD (SHH) • George Smith, MD (ECC) • Jessica Ham (Health & Hope) • John Porter (Baptist Health Care) • Nora Bailey (Partnership) 	<ul style="list-style-type: none"> • Paul Baroco, MD (ECC) Shirley Cornett (Good Samaritan Clinic) • Sharon Harris (DOH – Escambia) • Susan Howell (DOH – Santa Rosa) • Susan Prescott (DOH – Escambia) • To Be Added as Deemed Appropriate by Work Group: Mental Health, Dental, and additional SRC representatives
Referral Management Software Subcommittee	<ul style="list-style-type: none"> • Brunie Emmanuel – CHAIR • Alyssa Curtis (Partnership) • Ann Papadelias (ECC/SRCC) • Dennis Goodspeed (Lakeview) • John Porter (Baptist Health Care) • Karen Barber (Santa Rosa Schools) • JoAnn Vanfleteren (FLDOH-Santa Rosa & Ascendant Healthcare Partners) • Lindsey Cannon (Children's Home Society) • Marius Petruc, MD (Health Informatics) 	<ul style="list-style-type: none"> • Pat Dunn (Partnership) • Phyllis Gonzalez (FL Dept of Children & Families) • Sara Davy (Health & Hope) • Sharon Harris (DOH – Escambia) • Shirley Cornett (Good Samaritan Clinic) • Susan Howell (DOH – Santa Rosa) • Susan Kearney (SHH Social Work) • Susan Prescott (DOH – Escambia) • William Brown (St. Joseph's Clinic) • Pam Chesser (Santa Rosa Medical Center)
Santa Rosa Issues Subcommittee	<ul style="list-style-type: none"> • Karen Barber (Santa Rosa Schools) – CHAIR • Brunie Emmanuel – CO-CHAIR • Daniel Hahn (Santa Rosa County, Emergency Management) • Deborah Stilphen (FL Dept of Health - Santa Rosa) • Debra Russell (Sacred Heart Health System) • Denise Manassa (Community Drug & Alcohol Commission) • Fay Evans (FL Dept of Children & Families) • Ginger Staley (Gentiva/Emerald Coast Hospice) • Jamie Mattina (Gentiva/Emerald Coast Hospice) • Jimmie Melvin (Sandy Ridge Health & Rehabilitation) • JoAnn Vanfleteren (FLDOH-Santa Rosa & Ascendant Health Partners) 	<ul style="list-style-type: none"> • Kelly Hinnant (Sacred Heart Health System - Rehab Referral) • Kelly Telesz (Santa Rosa Medical Center) • Kyle Holley (United Way Santa Rosa County) • Mary Beverly (DOH - Santa Rosa) • Maxine Ivey (Escambia River Electric Cooperative) • Paige Richards (90 Works) • Phyllis Gonzalez (FL Dept of Children & Families) • Reverend Eugene Franklin (National Cultural Heritage Tourism Center, Inc.) • Sandra Parks-O'Hara (DOH - Santa Rosa) • Sara Block • Susan King (FL Dept of Children & Families) • Juliana Young (Sacred Heart Health System - Rehab Referral)

Accomplishments

Live Well Healthy Weight in Santa Rosa County

Primary Focus	Activities and Accomplishments
Awareness of 5-2-1-0	<ul style="list-style-type: none"> Created /distributed <i>Healthy Workplace - Healthy Weight Toolkit</i> to 200+ East Milton Elementary (partnering) with Sodexo and Extension Services) on a fruit and vegetable “try” table DOH-SR delivering 5210 information materials to Santa Rosa physicians for brand/message consistency DOH-SR partnered to get the 5-2-1-0 materials posted in pediatrician offices Distributed posters, brochures and coloring books to 11 physicians Conducted 10 community outreach events with estimated 770 total participants (includes Mommy & Me Walk with 412 participants) Presented 5-2-1-0 to school board staff
Diabetes prevention	<ul style="list-style-type: none"> DOH-Santa Rosa delivering diabetes education materials to Santa Rosa physicians

Live Well Tobacco Free in Santa Rosa County

Primary Focus	Activities and Accomplishments
Tobacco Use by Youth	<ul style="list-style-type: none"> Over 100 youth involved in SWAT across county 6 schools involved (2 high school, 3 middle schools, 1 k-12)
Tobacco-Free Policies	<ul style="list-style-type: none"> 6 employers adopted smoke-free policies: AppRiver, CVS, City of Milton, Santa Rosa School Board, Family Dollar Stores, & Lowes 4 multi-family housing units have adopted smoke-free policies for tenants Created and distributed to 200+ individuals the Healthy Workplace Toolkit addressing tobacco On-going distribution of Toolkit through Pensacola Chamber of Commerce website, Partnership for a Healthy Community website, and Live Well Northwest Florida Facebook page. Distributed a survey on tobacco policies to LiveWell partner organizations Baptist Health Care implemented smoke-free hire policies January 2014
Tobacco Cessation	<ul style="list-style-type: none"> Distributed evidence-based information on tobacco cessation to approximately 3,000 residents at various community events or health fairs Held 22 classes in Santa Rosa County <ul style="list-style-type: none"> 1 worksite 156 individuals completed the course

Live Well Access to Care Workgroup in Santa Rosa County

Primary Focus	Activities and Accomplishments
Specialty Referrals	<p><u>Medical/Surgical Specialties</u></p> <ul style="list-style-type: none"> Analyzed WeCare data for number of referrals to specialists, number of patients on wait list, and value of services provided Created a data base of specialty physicians in Santa Rosa Collecting hospital data on number of uninsured patients referred to specialists out of Baptist and Sacred Heart Emergency Departments <p><i>Next Step:</i> Approach hospitals and physicians regarding potential solutions</p> <p><u>Dental Services</u></p> <ul style="list-style-type: none"> Completed volunteer dentist recruitment letter, provider contract, and referral form. Developed MOU for dental services between DOH-Santa Rosa, ECC and School Board for McKinney-Vento students and their families. Services began April 2015. WeCare is creating a report on number of dentists, patients, and value of services contributed. <p><u>Mental Health Services</u></p> <ul style="list-style-type: none"> Department of Children and Families produced Behavioral Health Study. Listed mental health resources in the Service Directory.
Exchange of Information	<p><u>Directory of Health Services</u></p> <ul style="list-style-type: none"> Service Directory for Santa Rosa County completed Posted directory FL Department of Health – Santa Rosa and the Santa Rosa County School Board Next Step: Seeking partner to maintain databases. <p><u>Referral Management Software</u></p> <ul style="list-style-type: none"> Identified & prioritized criteria for selection of software system for health & social service providers Sent out Request for Information and reviewed responses from 4 vendors No one system is good at both referral management and care management; put decision on-hold Obtained download of all CareScope data and identifying analysis to be performed on data Next Step: Re-evaluate software solutions based on revised needs/priorities of service providers
Transportation	<ul style="list-style-type: none"> Held a Faith-based Transportation Summit. Conducted a gap analysis. Formed sub-committees. A database and inventory of transportation is in progress Gathering evidenced-based transportation programs information from other communities. Held a business/post-secondary roundtable.

Conclusion

The CHIP serves as a roadmap for a continuous health improvement process for the local public health system by providing a framework for the chosen strategic issue areas. It is not intended to be an exhaustive and static document. We will evaluate progress on an ongoing basis through quarterly CHIP implementation reports and quarterly discussion by community partners. We will conduct annual reviews and revisions based on input from partners and create CHIP annual reports in September of each year. The CHIP will continue to change and evolve over time as new information and insight emerge at the local, state and national levels.

The Partnership for a Healthy Community, in collaboration with the Florida Department of Health in Escambia and Santa Rosa counties, is in the process of producing a new community health assessment. The assessment, scheduled for release in December 2015, will be released to the partners in our public health system and the public for discussion and input. A new CHIP will be produced in 2016.

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



Board Roster September 15, 2015

President

Nora Bailey (2015)

Strategic Management Initiatives
850-291-6410
nbailey@smiconsultants.com

Vice President

John B. Clark (2015)

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Secretary/Treasurer (2015)

Michael Adamson (2016)

Sacred Heart Health System
850-416-7715
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Freddie Cattouse (2016)

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850-439-2712
No email address

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Chandra Smiley (2016)

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Linda Martin, Assistant ext. 1106
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Andrea Krieger (2015)

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John Lanza, MD (2016)

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Sandra Park-O'Hara (2015)

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Lumon May (2015)

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850-595-4930
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JoAnn Vanfleteren (2015)

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Shirley Cornett (2016)

Interfaith Ministries/Good Samaritan Clinic
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Versilla Turner (2016)

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Ann Papadelias (2016)

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David Sjoberg

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Denise Barton

Alternate for Michael Adamson until Jan '16
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Partnership for a Healthy Community

Board of Directors Meeting
September 3, 2015 - Webinar and Survey Monkey

Meeting Minutes

MEMBERS PRESENT

Denise Barton

Nora Bailey

John Clark

Sandra Park-O'Hara

Andrea Krieger

Krystle Galace

Debra Vinci

Versilla Turner for John Lanza

JoAnn Vanfleteren

ASSOCIATE MEMBERS PRESENT

Karen Barber

STAFF

Pat Dunn

Becky Washler

Alyssa Curtis

BEGIN 3:15pm, END: 3:50pm

AGENDA	DISCUSSION	ACTION/FOLLOW-UP
I. Welcome	Meeting was called to order by Nora Bailey	
II. Escambia County CHIP Annual Report and Revisions	Presented by Versilla Turner	Motion to approve Escambia County CHIP Annual Report Motion: Denise Barton Second: JoAnn Vanfleteren In Favor: 9, Opposed: 0 Motion to approve Escambia County CHIP Revisions Motion: Denise Barton Second: JoAnn Vanfleteren In Favor: 9, Opposed: 0
III. Santa Rosa County CHIP Annual Report and Revisions	Presented by JoAnn Vanfleteren	Motion to approve Santa Rosa County CHIP Annual Report Motion: Denise Barton Second: Versilla Turner In Favor: 9, Opposed: 0 Motion to approve Santa Rosa County CHIP Revisions Motion: Denise Barton Second: Versilla Turner In Favor: 9, Opposed: 0