

Mobilizing for Action through Planning and Partnerships

PHASE 5—Community Health Improvement Plan

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By

Cynthia Brown, MSM, LPN, CHES

Andrea Renfrow, BSN

Ida Butterworth, CSW

MaryAnn Blanton, RS

Vickie Trevino, ADN

Marilyn Loy,

Introduction

The Community Health Improvement Plan (CHIP) is a result of the MAPP (Mobilizing for Action through Planning and Partnerships) community assessment protocol and a part of the accreditation process. The CHIP will focus the efforts of this health department on addressing the strategic issues identified by the MAPP process through the development of goals and objectives.

In general, goals set a common direction and understanding of the anticipated end result. The question to ask is “What do we want to achieve by addressing this strategic issue?” Objectives communicate how the community will move in that direction. The question to ask is, “How do we want to achieve it? What action is needed?” Together, goals and objectives provide a connection between what the community’s health looks like now and what the community’s health will look like in the future. The CHIP will provide a means of coordinated action to address seemingly complicated problems. This Plan places each strategic issue into a logic model format identifying activities, short-term objectives (accomplished in 18 months or less); intermediate goals (accomplished in 18-24 months); and long-term goals (accomplished in 2-5 years). In Phase 3 of MAPP, four community assessments were completed. Please refer back to the Report of MAPP Findings as the background to this document.

It is the vision of the Bullitt County Health Department to become an accredited leader among local health departments in Kentucky in the areas of prevention, protection, and health promotions. Reaching this vision will take partnerships and collaborations among businesses, agencies, government, and the public.

Furthermore, our vision includes a community of vibrant people who are provided resources, programs, and facilities that will facilitate healthy choices for all of Bullitt County. Building protective factors into the community is a way to achieve this vision. Protective factors include behavioral changes, environmental changes, and policy changes to support healthy choices. The individual makes behavioral changes, like increasing daily physical activity and eating more fruits and vegetables. Environmental changes—such as creating safe routes to school, planning for and building pedestrian and bike friendly roads, installing sidewalks and lighting—increases the feeling of safety in a community; thereby, creating a healthier community. Policy changes—such as smoke-free policies, healthy food choices in vending machines, worksite wellness programs, land use plans, and physical activity in the school day—creates a normative mind-set. In general, protective factors serve the community as a whole, help improve self-esteem, and create a healthy environment.

The Strategic Planning team met to identify common issues highlighted in the assessments and chose the top four on which to work. Strategic issues are those fundamental policy choices or critical challenges that must be addressed in order for a community to achieve a healthy vision. Using the steps outlined in the MAPP process, the strategic planning team reviewed the data gathered. Participants responded to the question, “*Which issues suggested by the assessment findings must be addressed in order to achieve the vision?*”

Six topics migrated to the top of the list:

- Obesity
- Access to Care
- Cancer
- Mobilizing Community Partners
- Chronic Diseases, and
- Alcohol, Tobacco, and Other Drugs (ATOD) use and abuse

These six were combined into four strategic issues. In addressing these four issues, The Bullitt County Health Department will follow as closely as feasible with the CDC Healthy People 2020 guidelines and suggested strategies.

Issue 1: Obesity

Goal: Reduce the percentage of obese adults in Bullitt County over the next 3-5 years from 34 percent to 32 percent according to County Health Rankings.

Obesity, chosen as the number one issue, plays a big role in cancer and chronic disease rates. Reducing the obesity rate in the county will decrease the rates for diabetes, cancers, heart diseases, high blood pressure—the leading cause of stroke, and arthritis. Therefore, the goal of reducing the obesity rate of 34 percent (County Health Ranking 2011) to 32 percent over the next 3 to 5 years was set. A secondary goal of working for supportive policy changes and environmental changes related to promoting physical activity and nutrition within the community and local schools will directly influence reaching the primary goal of reduction in the obesity rate and a secondary goal of reducing complications from and incidence of heart disease, diabetes, and obesity. *(From CDC Strategic Alliance for Healthy Communities.)*

Strategies proven to reduce obesity rates also work to improve protective factors in a community, which, in turn, changes the cultural and social norms of the community. Changing the cultural and social norms of the community makes it easier to choose healthier options. Objectives for this goal are to focus on lifestyle behaviors, policy changes, and environmental factors.

Lifestyle behaviors contributing to obesity include physical inactivity (aka sedentary lifestyle) and poor nutritional habits. Policy changes within the schools and the county/city government would be the most effective means of change. Policy-level changes affect the most people for the most efficient use of money. Examples of policies implemented by city and county officials and school systems include:

- mandating physical activity in each grade level in school for at least 30 minutes a day;
- not allowing the withholding of recess time as a punitive tool;
- providing health choices in vending machines at a cheaper price than unhealthy options;
- increasing fresh fruits and vegetables served in school meals;
- implementing obesity monitoring in schools; and
- development of a county-wide land use plan that incorporates parks, recreational trails, and venues for physical activity.

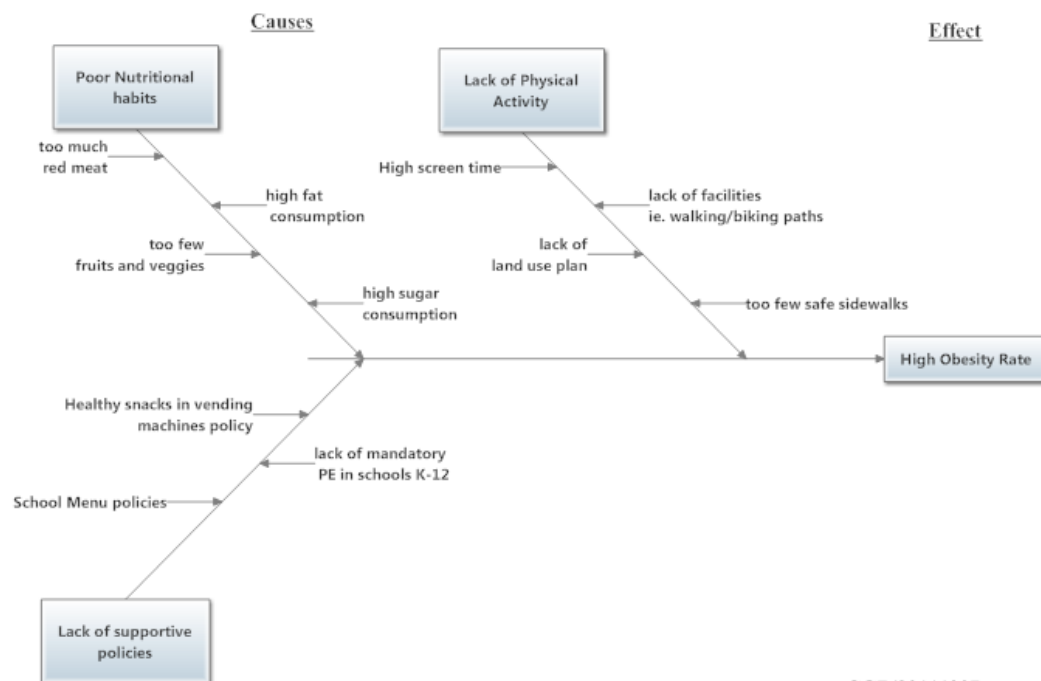
Activities will focus on increasing individual's knowledge and skills to make healthier choices. For example: People consuming a variety of nutrient-dense foods within and across the food groups, especially whole grains, fruits, vegetables, low-fat or fat-free milk or milk products, and lean meats and other protein sources tend to hold a healthier weight. Ensuring healthier options are available and affordable through policy changes in schools and worksites is a “best practice” strategy. Access to and availability of healthier foods can help people follow healthful diets.

Decreasing the time spent in front of a screen, whether it is a computer screen, video, or TV, is another “best-practice” strategy for reducing obesity. Too much screen time plays a large role in the increased obesity in children.

We will work with state and local schools, elected officials, and community members to increase the protective factors such as policy changes, increasing opportunities for physical activities, increase awareness of obesity and of the health benefits of maintaining a healthy weight. The goal is to institute policy, systems, and environmental changes related to promoting physical activity and nutrition.

In the Cause & Effect diagram below are three causes chosen because they represent modifiable causes in disease control and some contributing factors as discussed by the Strategic Planning Committee.

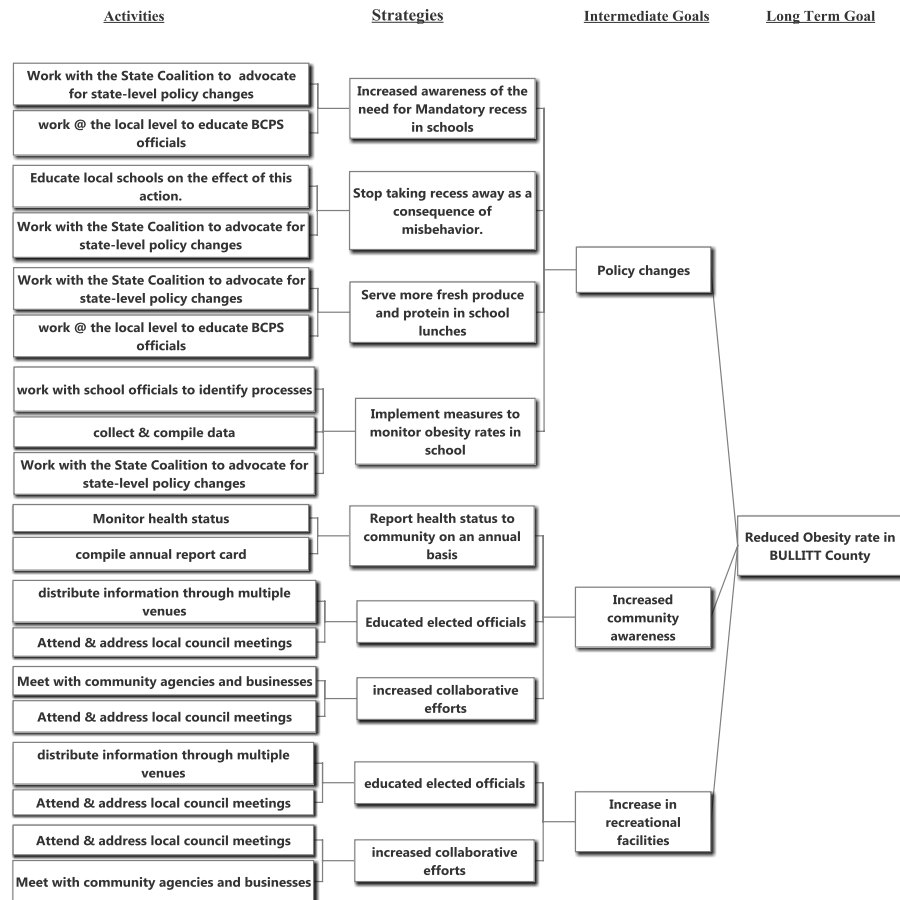
Cause and Effect diagram for Strategic Issue # 1--Obesity



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The causes generate activities that address the effect. Reducing the effect, then, becomes the goal to which we strive. Refer to the logic model below.

Logic Model for Strategic Issue # 1--Obesity



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Issue # 2: Access to Care & Mobilizing Local Public Health System Partners

Goal: Improve and increase access to quality health care through mobilizing the local Public Health System.

All persons living in Bullitt County should have a reasonable expectation of access to affordable healthcare. Bullitt County is adjacent to one of Kentucky's major metropolitan areas; however, it is considered to be a medically underserved area particularly the western and southern portions of the county. How can the community ensure access to population-based and personal health care services? Access to care and mobilizing community partners were combined because they are closely related and have similar activities that work toward improvement.

One means of assuring access to health care is to strengthen coordination among local public health system partners to eliminate gaps in service and improve referral mechanisms among providers. Another is to increase awareness of available services through the development of a resource directory, both hard copy and online versions of area public health and health care organizations. This should be distributed through all partners in the local public health care system.

Active recruiting of medical professionals should be ongoing by elected officials, economic development agency, the Chambers of Commerce, and others in the county. Finally, a continuous public education and outreach efforts is necessary so that all residents are aware of the population-based and personal health care services available in the community.

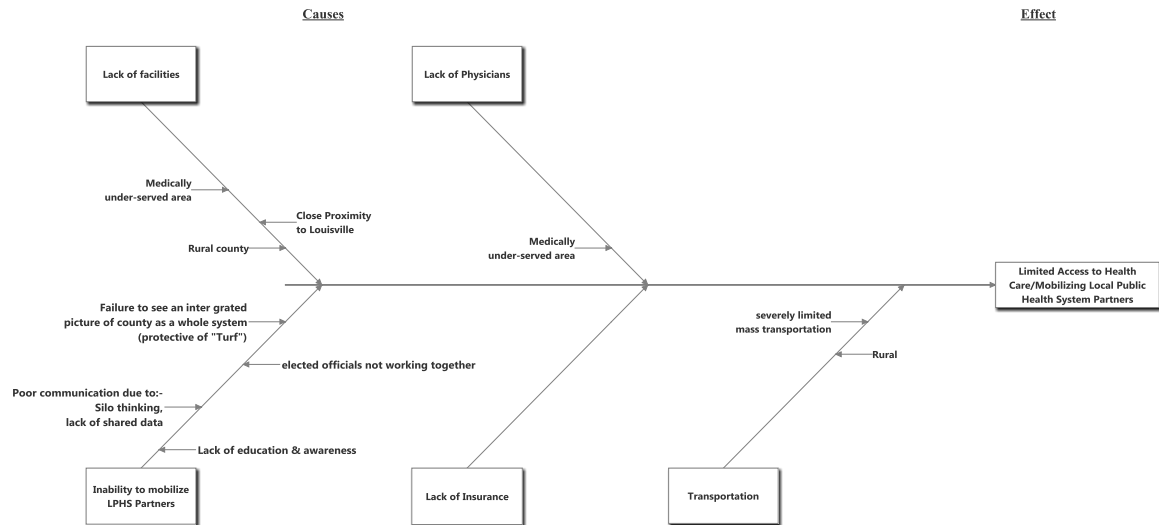
Several other causes identified by the group are transportation issues, inadequate insurance coverage, and inability to mobilize local public health system partners. Details of the mass transportation problem are covered in the MAPP Report of Findings. Addressing this aspect of Access to Care is beyond the health department's locus of control. Therefore all activities are more as a stakeholder at the table during discussions surrounding transportation issues. Maintaining a presence at the KIPDA meetings and Fiscal Court to advocate for and educate about access to care issue is the chosen activity.

Likewise, the inadequate insurance coverage cause is largely out of our control. However, we can maintain contact with elected officials to educate and advocate for adequate insurance coverage for all peoples, work with coalitions to affect policy changes, recruit medical professionals, and serve as a resource within the community to connect people to services.

A contributing cause in the Access issue is an inability to mobilize the local public health system partners into a focused, cohesive group working together toward a healthier community. Asking the "Why's" in this issue brought some insights to the group. The first insight was that there is a failure to see an integrated picture of the county as a whole system. One common statement from county residents and workers is that there are "many turfs" and people are protective of "their turf". Poor communication among entities within the county is part of this issue. Participants identified "silo thinking," the lack of sharing data, and elected officials not working together as contributing factors along with a lack of education and awareness as to what a mobilized Local Public Health System can accomplish. (Forces of Change County Assessment conducted by Rep. Linda Belcher)

The Cause and Effect diagram below shows the access to care problem in a more compact form.

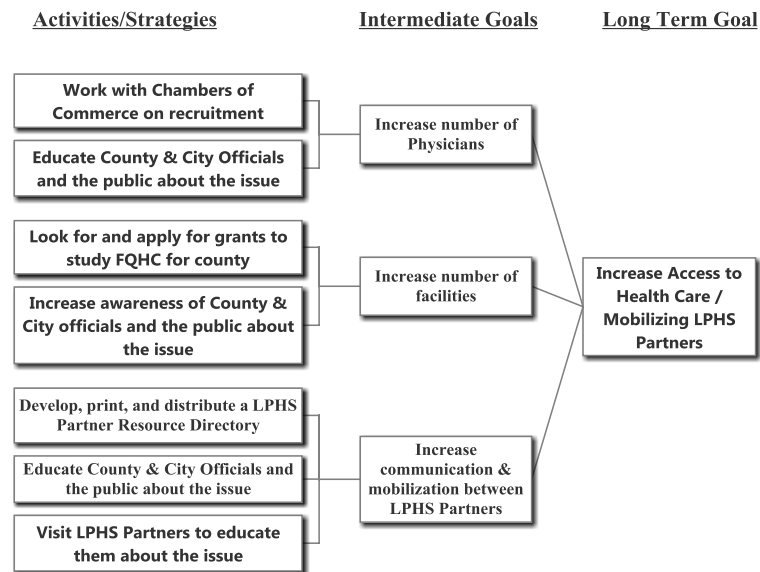
Cause And Effect diagram for Strategic Issue # 2--Access to Health Care / Mobilizing Local Public Health System Partners



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The Logic Model below highlights activities on which BCHD will focus to engage community partners to address the access to care issue. Working together on the Access issue mobilizes community partners addressing that issue.

Logic Model for Strategic Issue # 2--Access to Health Care/ Mobilizing Local Public Health System Partners



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Issue # 3: Chronic Diseases/Cancer

Goal: Reduce Morbidity of Chronic Disease by two percent within the next 3-5 years.

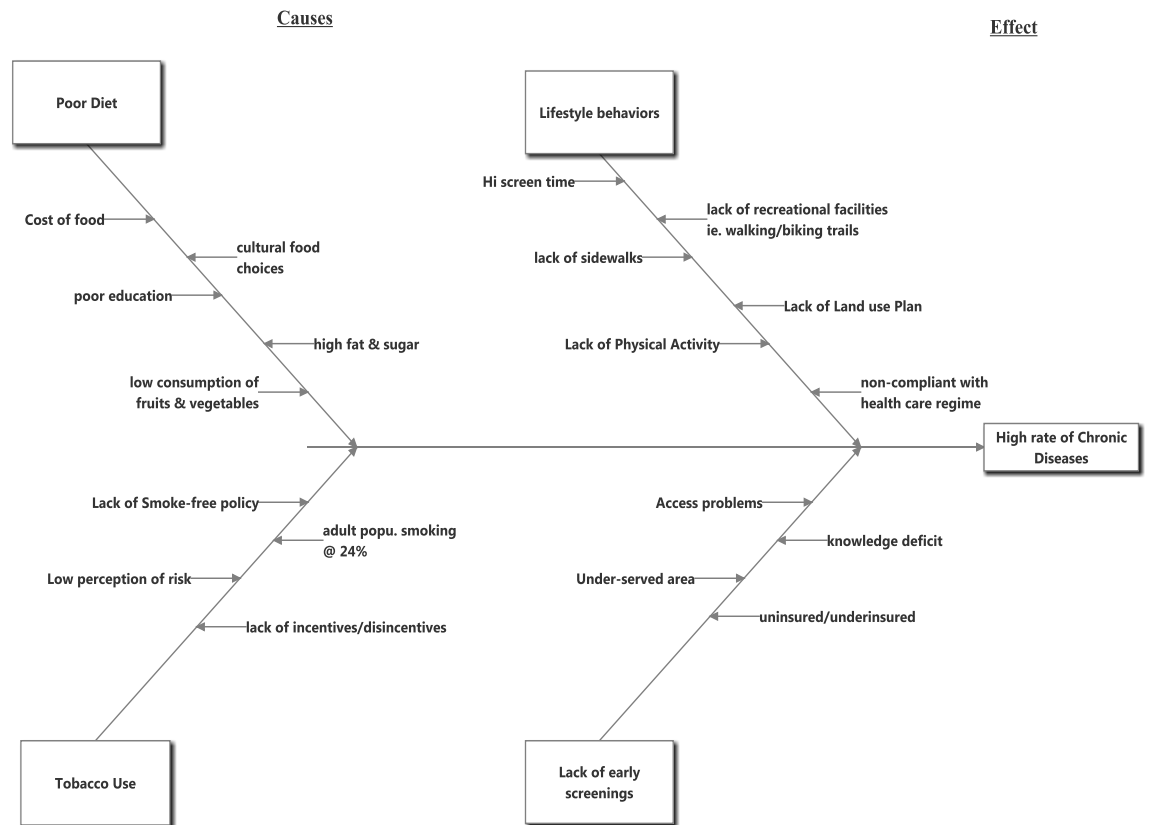
This Strategic Issue will combine Chronic Diseases and Cancer. Cancer and chronic diseases like heart disease and stroke, type II diabetes, and arthritis share many of the same modifiable risk factors. It is the consensus of the group that addressing the risk factors such as physical inactivity, poor diet, reducing tobacco use, and the lack of early screenings cover all of these conditions.

Chronic diseases are among the most prevalent, costly, and preventable of all health problems. Leading a healthy lifestyle (avoiding tobacco use, being physically active, and eating well) greatly reduces a person's risk for developing chronic disease and cancer. Access to high quality and affordable prevention measures (including screening and appropriate follow-up) are essential steps in saving lives, reducing disability, and lowering medical costs.

There has been a general decrease in physical activity over the years. Technology and mechanization of many physically demanding jobs, the rising popularity of video games and computers, and a drift away from active leisure activities has not only increased the waist line of Americans but has increased the rate of chronic diseases in the United States. Kentucky, as a state, ranks high in both morbidity and mortality of chronic diseases. Increasing the awareness of protective factors like regular exercise, eating more fresh fruits and vegetables, and reducing time spent in front of a screen, reducing or eliminating tobacco use, and accessing preventive health screenings will help move Bullitt County toward a healthier community.

The Cause and Effect diagram below focuses on risk factors that are reasonably modifiable by individuals and through policy changes.

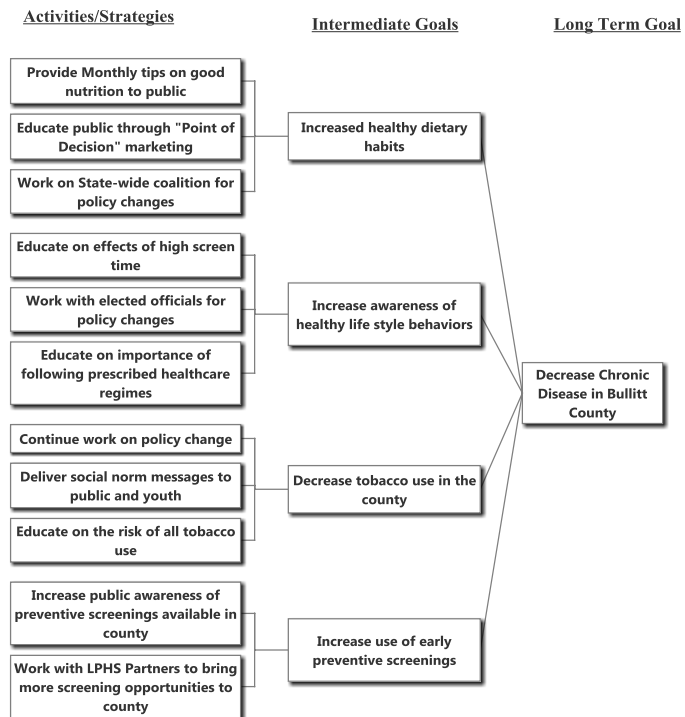
Cause and Effect diagram for Strategic Issue # 3--Chronic Disease



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Activities for Chronic Diseases and Cancer reduction will focus on modifiable risk factors. Education about lifestyle changes, social normalization to change perceptions, advocating for supportive policies, and providing opportunities to be physically active are all included in the Logic Model below.

Logic Model for Strategic Issue # 3--Chronic Disease



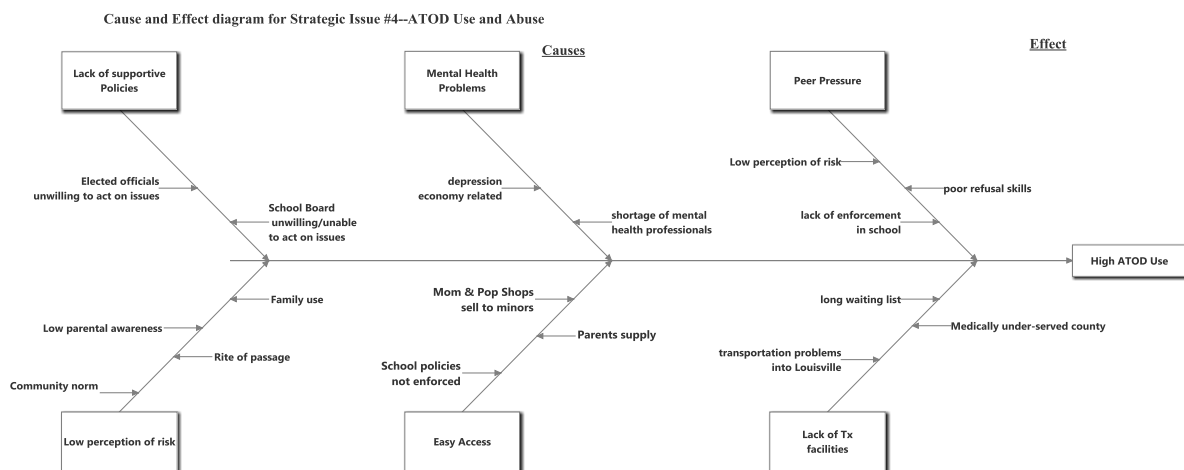
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Issue # 4: Alcohol, Tobacco, & Other Drugs (ATOD)

Goal: Reduce ATOD use and abuse through education, policy, systems, and environmental changes as measured by the KIP survey in middle and high school students.

Reducing abuse of alcohol, tobacco and other drugs, especially among the youth of the county is vital to the future of the health of the county. National agencies, such as the CDC, Office of National Drug Control Policy, and the Substance Abuse & Mental Health Service Administration agree that policy change and social normalization are best-practice strategies for combating ATOD issues in a community. Policies on ATOD issues place protective factors in the community, which, in turn, helps to support teens in their decision to not use or abuse these substances.

The Cause and Effect diagram below shows some identified causes. For example, there is a lack of supportive policies in the county. Examples of proven effective policies are—a 100% comprehensive Smoke-free policy, a 24/7, 100% smoke-free schools policy, Social Host policy, and Keg registration policy. These policies have been implemented, vetted, and proven effective in communities across the United States.



CGB/20111207

The parent of a local high school football star invites the team over after the game, to celebrate their victory. Thinking it is safer for the kids to be at a home drinking than out “in public,” the parents allow under-age drinking. This happens in communities all over.

One way to protect the youth of Bullitt County is with environmental strategies such as ordinances, policies, and law enforcement activities. A Social Host ordinance will fill gaps that exist in the current Statues by holding the adults responsible for any under-age drinking on their property.

Comprehensive Smoke-free policy has been proven effective at reducing chronic diseases, changing the perception of harm, and reducing the number of tobacco user’s attempt to quit. Comprehensive smoke-free policy is a Win-Win-Win solution—A win for businesses, a win for the consumer and employee, and a win for the public.

There are other effective strategies to move a community toward reducing the use and abuse of harmful substances. The logic model reflects the activities considered “best practice,” will involve mobilizing community partners and the local public health system. It reflects an ambitious effort to extend the work that has been done through the Drug-free Communities Grant over the past four years and the work of the Partners In Prevention over the past 15 years.

