

*Knox County Community Health Assessment Partnership*

# **Knox County Community Health Improvement Plan (CHIP)**

**2013**



**CHIP GOAL:** Create a Healthy Knox County so that residents experience good health, feel safe, and are valued.

### ADDICTION & MENTAL HEALTH - PREVENTION

Goal	Objective	Strategy	Person/Group Implementing	Time Frame	Evaluation
Families adopt healthy habits	Implement a county-wide healthy habits campaign	<ul style="list-style-type: none"> <li>-Adopt focus areas for campaign (suggest sleep, nurturing homes, positive stress management and obesity)</li> <li>-Utilize existing EBP's for targeted media messages</li> <li>-Use variety of promotional strategies (PSA's, success stories, social media, billboards, traditional media) to disseminate the messages</li> <li>-Designate CHA committee members to sit on planning group</li> </ul>	Knox County Health Department	June 2013 (Coordinating group recommends plan and strategies to CHA)	<p>Suggestions for Evaluation:</p> <ul style="list-style-type: none"> <li>• Pre-post electronic survey targeting high-risk families with questions re: adoption of healthy habits</li> <li>• Use of constant Contact (or similar) to track reach</li> </ul> <p>Indicators:</p> <ul style="list-style-type: none"> <li>• Sleep deprivation (PRIDE)</li> <li>• Stress (CHA)</li> <li>• Mentally unhealthy days (CHA)</li> </ul>
Parents use parent education and support services	Develop accessible and comprehensive parent resources	<ul style="list-style-type: none"> <li>-Assess current parenting resources</li> <li>-Identify gaps</li> <li> </li> <li>-Identify priority parent populations</li> <li>-Identify EBP's (processes and programs) for parenting education/ support</li> </ul>	<p>Child Advocacy Sub-committee of FCFC</p> <p>Head Start VISTA volunteer</p> <p>Prevention CHA Committee</p>	<p>3/31/2013</p> <p>8/31/2013</p> <p>3/31/2014 12/2013</p>	<ul style="list-style-type: none"> <li>-Identification of existing parenting education/ support initiatives (including EBP status)</li> <li>-Identification of barriers</li> <li> </li> <li>-Written assessment of message consistency within initiatives (Intern?)</li> <li> </li> <li>-Plan for developing comprehensive parenting support and education</li> </ul>

Children experience trauma-informed environments in public settings	Teachers and other professionals working with children utilize trauma-informed care approaches promoting healthy environments for all children	<p>-Provide ACES training to community professionals targeting school staff</p> <p>-Identify tools and specific simple strategies or practices that support trauma-informed environments</p> <p>-Identify major child-oriented EBP's that utilize trauma-informed practices</p> <p>-Develop comprehensive plan for adoption of trauma-informed approaches</p>	<p>FYI Conference Committee</p> <p>Prevention CHA</p>	<p>June 2013</p> <p>December 2013</p>	<p>-Knox County professionals attend FYI Conference</p> <p>FYI Post Conference Evaluation:</p> <ul style="list-style-type: none"> <li>• Identify your current programs that utilize t-i approaches</li> <li>• Increased understanding of ACES</li> <li>• Identify specific t-i strategies you will adopt</li> </ul> <p>-Comprehensive plan for adoption of trauma-informed approaches</p>
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### ADDICTION & MENTAL HEALTH – INTERVENTION

Goal	Objective	Strategy	Person/Group Implementing	Time Frame	Evaluation
<p>Improve efforts to inform and educate the public.</p> <p>MHR goal - ‘Behavioral Health is Essential to Healthcare’ and part of a Public Health approach through integrated healthcare by promoting overall health and wellbeing and addressing stigma.</p>	<p>Marketing of 211 and behavioral health services</p> <p>The marketing of the MHR system of care is an activity of the Public Information (PI) Committee of the MHR Board. Generally, the committee meets monthly and all meetings are open to the public. At the end of the meeting, there is time set aside for public comment.</p>	<p>-Distribute marketing materials for 211 &amp; behavioral health</p> <p>-Consider increased radio promotion of services</p> <p>MHR PI Committee and marketing consultant are developing a Communications Strategy. Included is the use of social media, the development of a new website, E newsletters, etc.</p>	<p>211 MH &amp; Recovery Board BHP</p> <p>The full MHR Board plans to engage in strategic planning beginning in SFY14. Planning may include the development of long term strategies related to effective and targeted communication to the public.</p>	<p>SFY13 – SFY15</p>	<p>Results of focus groups conducted with different community groups to determine effectiveness of communication plan.</p>

<p>Adopt community-wide processes for early identification of behavioral health issues</p> <p>MHR goal – Adopting community-wide processes for early identification and intervention of behavioral health issues as part of their funded prevention framework of services (dependent upon available resources)</p>	<p>Promotion of use of evidenced–based practices by professionals on identification and implementation of behavioral health services</p> <p>Develop collaborative efforts</p>	<p>-Selection of EBP practices to be promoted</p> <p>-Presentation of same to local professionals</p> <p>MHR may elect to include early identification and implementation EBP strategies as part of their funded prevention framework of services (dependent upon available resources). Similar to the CIT model, strategies would include providing training to first responders, healthcare professionals, school personnel, etc.; data management for outcomes measurement; and facilitation of supportive steering committee of partners that would make program decisions.</p> <p>Use of current MHR crisis services/safety net services:</p> <ol style="list-style-type: none"> <li>1. BHPCO Crisis Intervention/Emergency Services – including Health Officers</li> <li>2. Pathways 211 Hotline</li> <li>3. Crisis Intervention Team (CIT) collaboration – law enforcement, BHPCO Crisis Intervention/Emergency Services, and Knox Community Hospital ER.</li> <li>4. Detox/MAT services</li> </ol>	<p>MH &amp; Recovery Board BHP Private Practitioners CIT (law enforcement, BHPCO, and Knox Community Hospital ER) Knox County Head Start</p>	<p>SFY13-SFY15</p>	<ul style="list-style-type: none"> <li>▪ Use of relevant federal NOMS (National Outcome Measures) for providers and other clinical practitioners</li> <li>▪ % of individuals that receive a safety plan or referral as a result of an early identification or intervention strategy</li> <li>▪ Decrease in inappropriate use of hospital ER</li> </ul>
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<p>Promote behavioral health as part of well-being and healthy lifestyle</p>	<p>Promote well-being and healthy lifestyles</p> <p>Adopt strategies that integrate behavioral health care with physical health care</p>	<p>-Inform local professionals on the benefits of "health homes"</p> <p>BHPCO leadership in providing information/education about Health Homes</p> <p>Use of MHR PI Communication Plan.</p> <p>Use of Knox County Health Department communication strategies.</p> <p>Use of other partners' communication strategies.</p> <p>Targeted trainings with community groups.</p>	<p>MHR Board and providers Knox County Health Department</p>	<p>SFY13-SFY15</p>	<ul style="list-style-type: none"> <li>▪ Improvements of overall health of Knox County residents as indicated on the next community health survey</li> <li>▪ Improvements of targeted behavioral health issues (reports of depression, anxiety, AOD abuse and dependency) on the next community health survey.</li> </ul>
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### OBESITY – PREVENTION

Goal	Objective	Strategy	Person/Group Implementing	Time Frame	Evaluation
Focus on school-based programs	<p>Collect local data</p> <p>School-based programs promoting diet &amp; exercise</p> <p>Provide nutrition; healthy habits information to parents</p>	<p>-Annual 3<sup>rd</sup> grade BMI's</p> <p>“Crunch Out Obesity”</p> <p>Health information in newsletters</p>	<p>Judy Gregg’s MVNU Nursing Students</p> <p>United Way/Elementary PE teachers, Obesity Group</p> <p>Information will be given to schools to include in their newsletters. JoAnn Kerr has contact with school secretaries.</p>	<p>Completed – repeat 2014</p> <p>Pilot with two classes – Spring 2012 Two school districts – Fall 2013</p> <p>Spring 2013</p>	<p>Completed stats</p> <p>By PE teachers; Parent questionnaire</p> <p>Copies of newsletters</p>
Expand “obesity work team”	Include community members and professionals working toward healthy youth	Contact possible members	<p>Implemented – Added members:</p> <p>Nancy Bevan Nick Clark Thom Collier Nancy Laslo PE teachers Tammi Ruhl</p>	Completed	Attendance/ Participation
Provide in-service for work team on EBP obesity prevention program	Involve primary care professionals	<p>“Crunch Out Obesity” presentation to Elementary School PE teachers</p> <p>Evidence Based Practice</p>	<p>Ashland United Way presented on January 24, 2013. Three Mount Vernon School District PE teachers attended.</p> <p>JoAnn Kerr working on EBP to present to group</p>	<p>Completed</p> <p>March 2013</p>	Programs evaluated to be EBP

	Develop identification/referral process for obese/at-risk children	Children with BMI > 25 Parents will receive nutritional education.	KCHD Medical Clinic & WIC currently provide nutritional education to obese/at risk children.	On going	
Implement county-wide program to raise awareness of childhood obesity and provide information to combat it	Provide information on obesity county-wide	<ul style="list-style-type: none"> <li>• Provide information on obesity to all new parents</li> <li>• Representative from the Obesity Group will work with the Wellness Coalition. The work of the Obesity Group will be shared with Wellness members.</li> <li>• Information on “5210” and “Promoting Healthy Conversation” will be explained to the group with the goal of a county-wide Health Campaign.</li> </ul>	Wellness Coalition/Obesity Group	Spring 2013	Public Awareness Campaign implemented