Montgomery County
Community Health Improvement Plan
2016 – 2019

9 month progress report

April 2016 – December 2016

Montgomery County: A Healthy, Safe, and Thriving Community!

Introduction

This report documents the progress made during the first nine months of the implementation phase of the 2016-2019 Montgomery County Community Health Improvement Plan (CHIP). Implementation of the CHIP began in April 2016.

While the CHIP is a community driven and collectively owned health improvement plan, Public Health - Dayton & Montgomery County (PHDMC) is charged with providing administrative support, tracking and collecting data, and preparing this six month progress report as well as an annual report.

Understanding the Report

The following colors indicate the current status of each objective:

COMPLETED	- this action step has been accomplished
IN PROGRESS	- work associated with the action step has started
NOT STARTED	- the action steps associated with the objective are not yet started
ON HOLD	- progress toward the objective is on hold

**Complete Action Plans are available upon request.

Action Plan Revisions

Beginning in late February of 2017, the Implementation Teams will begin to review the present action plans and suggest any needed edits to the measures, objectives, action steps, and completion dates of the action plans. By late March, the Steering Committee will meet to discuss the proposed changes and provide the final approval of the action plans that will be used for the second year of CHIP implementation.

Recommended changes to the CHIP's action plans will be considered based on the following criteria:
  • availability of data to monitor progress;
  • availability of resources (funding, personnel);
  • community readiness;
  • evident progress; and
  • alignment of goals.

Annual Report and Meeting

In April of 2017, PHDMC will complete an annual progress report that will provide updated data measurements for all the goals and objectives in the action plans. In addition, a community meeting will be held to inform Stakeholders of the CHIP successes and the improvement efforts that require the continued support of the community.

Birth Outcomes

Goal 1
Reduce preterm births

Objective 1.1
Increase the number of pregnant women with prior preterm birth (PTB) or short cervix receiving progesterone supplementation.

Baseline*	Target
74	81

* Baseline data is based on 2015 Five Rivers Health Center for Women's Health enrollment data

Action Steps
- Identify and implement evidence-based practices to increase routine preconception and inter-conception health visits for women of reproductive age. **IN PROGRESS**

- Educate health care providers on the use of progesterone supplementation. **NOT STARTED**

- Expand recruitment for progesterone supplementation program engagement. **NOT STARTED**

Objective 1.2
Expand implementation of evidence-based models of prenatal care.

Baseline	Target
NA	2 new locations

Action Steps
- Identify and assess innovative evidence-based models for potential implementation. **COMPLETED**

- Identify/target prenatal practices. **IN PROGRESS**

- Implement innovative models of prenatal care demonstrated to improve preterm birth rates and other adverse pregnancy outcomes. **IN PROGRESS**

Objective 1.3
Increase the number of pregnant women enrolled in evidence-based home visiting programs.

Baseline	Target
pending	pending

Action Step
- Develop a plan to improve referral of women with risk factors to evidence-based home visiting programs. **NOT STARTED**

Goal 2

Reduce substance misuse in pregnant women

Objective 2.1

Decrease the percent of mothers using tobacco during pregnancy.

Baseline	Target
12.7%	11.4%

Action Steps

- Increase capacity for evidence-based tobacco cessation support for pregnant women. **NOT STARTED**

- Build local system and networks for outreach, engagement, referral, and coordinated follow up. **NOT STARTED**

- Increase the number of health care providers referring pregnant women who smoke to pregnancy-tailored smoking cessation programs. **NOT STARTED**

- Develop and conduct effective health communication/social marketing campaigns that promote norms of healthy behaviors before, between, and during pregnancy. **NOT STARTED**

Objective 2.2

Introduce evidence-based screening methods (including the Screening, Brief Intervention, and Referral to Treatment (SBIRT) model) to address alcohol use during pregnancy in healthcare settings that see pregnant women currently not using an evidence-based screening method.

Baseline	Target
NA	3

Action Steps

- Identify healthcare settings to implement SBIRT or other evidence-based screening methods. **NOT STARTED**

- Educate providers of health care and supportive services to ensure that they have knowledge, skills, tools, cultural competence, and motivation to effectively counsel patients on substance misuse. **NOT STARTED**

- Conduct a FASD awareness campaign to various community members. **NOT STARTED**

- Promote a referral to treatment process for women identified as needing follow up services after screening. **NOT STARTED**

> **Note: BH Priority - SBIRT Train the Trainer (January, March, July) – 2 day training funded by OMHAS**

Goal 3

Reduce the infant mortality racial disparity in zip codes: 45402, 45405, 45406, 45414, 45415, 45416, 45417, and 45426.

Objective 3.1

Increase awareness among the Black community regarding the infant mortality rate and infant mortality disparity and key risk factors by implementing a variety of awareness campaigns.

Baseline	Target
NA	1 social media; 1 print (3 types)
	1 visual; 1 audio
	3 in-person presentations
	3 resource booths

Action Steps

- Implement "One Key Question" initiative at all health care visits with women age 15-44 to promote reproductive health planning and create EPIC chart items to collect data. **NOT STARTED**

- Conduct an infant mortality and prematurity awareness campaign. **NOT STARTED**

- Create a plan with the criminal justice system to reach incarcerated and recently released women. **NOT STARTED**

> **Note:**
> **PHDMC is conducting Focus Groups to assess the community's level of awareness.**

Objective 3.2

Reduce preterm births among Blacks.

Baseline	Target
45402 - 20.6% 45405 - 19.8%	45402 - 18.5% 45405 - 17.8%
45406 - 20.3% 45414 - 18.7%	45406 - 18.3% 45414 - 16.9%
45415 - 18.4% 45416 - 19.2%	45415 - 16.6% 45416 - 17.3%
45417 - 21.7% 45426 - 20.0%	45417 - 19.5% 45426 - 18.0%

Action Steps

- Ensure that Black women who have experienced a preterm birth or other adverse pregnancy outcomes receive inter-conception health care and other supportive services to prevent subsequent preterm births. **NOT STARTED**

- Develop and implement local service networks and coordinating strategies to ensure that Black women with risk factors are linked to appropriate community resources. **NOT STARTED**

Objective 3.3

Implement a plan aimed at increasing participation of Black women of reproductive age in patient-centered medical homes.

Baseline	Target
NA	Plan Implemented

Action Steps

- Develop a plan to improve the number of women participating in patient-centered medical homes. **NOT STARTED**

- Utilize community health workers to provide enhanced social support of high-risk, preconception, inter-conception women and their families to improve practice of healthy behaviors, use of preventive health care and social services, and management of chronic medical conditions. **NOT STARTED**

- Promote adoption and integration of National Standards on Culturally and Linguistically Appropriate Services (CLAS) in clinical practices and other community service organizations to increase accessibility and effectiveness. **NOT STARTED**

Objective 3.4

Implement a long-term plan/strategy to address Social Determinants of Health in majority Black communities (racial disparity).

Baseline	Target
NA	Plan implemented

Action Steps

- Align with other community sectors, government agencies, etc to develop a plan to address social determinants of health: education, affordable and healthy housing, income/employment, access to food, chronic stress (including racism), and healthy community environments. **IN PROGRESS**

- Implement evidence-based strategies that address infant mortality in Black communities. **NOT STARTED**

- Develop a plan to collect more timely birth outcome data. **IN PROGRESS**

Note:
RFP for Community Plan to Address to Address Social Determinants of Health scheduled to be approved by the Board of Health at February meeting.

Chronic Disease Prevention

Goal 1

Increase access to safe physical activity opportunities in zip codes: 45402 & 45406 (West Dayton), 45417 (Jefferson Township), and 45416 & 45426 (Trotwood).

Objective 1.1

Conduct a Safe Physical Activity study to determine safety (real and perceived) of existing parks and recreation facilities.

Baseline	Target
NA	Study Results

Action Steps

- Recruit college students to assist with research (Walking trail audits, Literature review to create measurement tool). **NOT STARTED**

- Gather existing crime and safety data from law enforcement. **NOT STARTED**

- Conduct community focus groups and/or surveys. **NOT STARTED**

- Analyze results, prepare and publish findings and recommendations. **NOT STARTED**

> **Note:**
> **UD MPA student working on many of these action steps as part of his senior project. MVRPC will help in the spring getting walking audits started. There is possibility we can use of UD students to create and administer surveys.**

Objective 1.2

Implement a minimum of one evidence-based strategy that addresses a recommendation identified in the Safe Physical Activity study.

Baseline	Target
NA	1

Action Steps

- Create an evidence-based practice list. **NOT STARTED**

- Identify a lead agency for strategy implementation. **NOT STARTED**

- Seek funding opportunities for implementation. **NOT STARTED**

> **Note:**
> **WSU MPA student may identify evidence-based strategies. MVRPC - lead agency for this objective.**

Objective 1.3
Increase the number of targeted communities with local Complete Streets policies

Baseline	Target
1	3

Action Steps
Recruit jurisdictions to participate Complete Streets Local Policy Development workshops. **IN PROGRESS**

Make presentations to city and township Councils and/or Trustees to provide an overview of Complete Streets Policy. **IN PROGRESS**

Assist jurisdictions in writing local Complete Streets Policies. **IN PROGRESS**

> **Note:**
> **MVRPC is waiting for communities to commit to implementing a Complete Streets Policy.**

Objective 1.4
Implement awareness/education campaign to promote the use of existing infrastructure (especially bike trails, school gyms, and playgrounds) for physical activity.

Baseline	Target
NA	Campaign Implemented

Action Steps
Identify existing parks, bike trail infrastructure/ resources. **IN PROGRESS**

Identify schools with shared use policies and activity programs. **IN PROGRESS**

Identify public and non-profit fitness centers (community rec centers, senior centers, etc.). **IN PROGRESS**

Develop an awareness/education campaign. **NOT STARTED**

Goal 2

Increase access to healthy foods

Objective 2.1

Add healthy choice sections/options in convenience stores located in food desert communities.

Baseline	Target
0	4

Action Steps

- Identify and qualify potential partner stores in "food desert communities"
(West Dayton 45402 & 45406, Northwest Dayton - 45405, Jefferson Township - 45417, Moraine/West, Carrollton - 45418, 45439, & 45449, Northridge - 45404 & 45414, Trotwood - 45416 & 45426, Riverside- 45431, 45432, & 45433, Huber Heights - 45424). **IN PROGRESS**

- Incentivize grocery stores with grants. **NOT STARTED**

- Partner with Dayton Food Bank's efforts to distribute produce. **NOT STARTED**

- Review local established models/initiatives. **NOT STARTED**

Objective 2.2

Increase the number of farmers' markets/community gardens located in food desert communities.

Baseline	Target
Based on action step	pending

Action Steps

- Inventory food desert communities to document existing farmers' markets and community gardens. **IN PROGRESS**

- Partner with community schools, faith based organizations and community groups. **IN PROGRESS**

- Review EBT/SNAP usage policies at farmers markets. **NOT STARTED**

Goal 3
Decrease tobacco use

Objective 3.1
Increase the number of 100% smoke-free locations (schools, universities, public housing complexes) across Montgomery County.

Baseline	Target
13 of 17 (76%) Public School Districts	15 of 17 (88%) Public School Districts
2 of 4 (50%) Universities/Colleges	3 of 4 (75%) Universities/Colleges
0 of 1 (0%) Public Housing Authority	1 of 1 (100%) Public Housing Authority
Total = 15 of 22 (68%)	Total = 19 of 22 (86%)

Action Steps

- Create complete list of Montgomery County schools, universities, and public housing complexes. **IN PROGRESS**

- Determine current number of smoke free schools, universities, and public housing as baseline. **IN PROGRESS**

- Identify key leaders who can make these policy changes. **IN PROGRESS**

- Provide appropriate model policies and tools for implementation. **IN PROGRESS**

- Work with identified leaders to make the appropriate policy changes. **IN PROGRESS**

Objective 3.2
Pass local legislation to increase tobacco purchase age to 21 in Montgomery County jurisdictions.

Baseline	Target
0	4 of 24 (17%) jurisdictions

Action Steps

- Identify key leaders who can make these policy changes. **NOT STARTED**

- Provide appropriate model policies and tools for implementation. **NOT STARTED**

- Work with identified leaders to make the appropriate policy changes. **NOT STARTED**

Objective 3.3
Increase the average annual number of Montgomery County smokers enrolling in the "Ohio Quit Line."

Baseline	Target
12.5 per year	15.7 per year

Action Steps

- Identify cycles of national and state tobacco cessation campaigns. **IN PROGRESS**

- Expand local media campaign advertising the "Ohio Quit Line" (billboards, bus stops, buses) during gaps in national and state campaigns. **NOT STARTED**

Goal 4
Increase physical activity and healthy eating in children

Objective 4.1
Increase the annual number of new Montgomery County childcare centers that apply for the GetUp Childcare Award.

Baseline	Target
44	48

Action Steps
- Conduct media and childcare center awareness campaign promoting GetUp Childcare Award. **NOT STARTED**

- Send GetUp Childcare Assessment to all Montgomery childcare centers every January. **IN PROGRESS**

- Provide guidance/education to help centers improve nutritional and physical activity standards. **NOT STARTED**

Objective 4.2
Increase the number of Montgomery County elementary and middle schools that have a comprehensive, school-based physical activity program that includes physical education, recess, classroom-based physical activity, walk and bicycle to school, and out-of-school activities.

Baseline	Target
Collected as an action step	pending

Action Steps
- Conduct initial assessment of physical education programs. **NOT STARTED**

- Identify evidence-based practices used to promote and develop comprehensive, school-based physical activity programs. **NOT STARTED**

Objective 4.3
Increase the number of Montgomery County elementary and middle schools that have adopted the Institute of Medicine (IOM) nutritional standards for school foods sold/served outside of the school lunch program.

Baseline	Target
Collected as an action step	pending

Action Steps
- Conduct initial assessment of school nutritional standards. **NOT STARTED**

- Identify evidence-based practices used to promote nutritional policy changes within schools. **NOT STARTED**

- Assist schools in instituting nutritional and policy changes. **NOT STARTED**

Behavioral Health

Goal 1

Ensure access to needed behavioral health services at the right amount, at the right time, for the right person, and in the appropriate setting.

Objective 1.1

Conduct county-wide needs, gaps, and system barriers analysis to include primary care and behavioral health capacity and accessibility of services

Baseline	Target
NA	Completed analysis

Action Steps

- Determine baseline measure of current service delivery and continuum of care. **IN PROGRESS**

- Create a county-wide workgroup that includes system partners and community leaders who are connected to the most vulnerable populations with multiple needs. **IN PROGRESS**

- Evaluate current data on prevalence of mental health and substance abuse disorders and availability of mental health and substance abuse treatment and prevention programming. **IN PROGRESS**

- Develop recommendations for future service delivery expansion. **IN PROGRESS**

- Develop common performance measures and determine baseline data for change. **IN PROGRESS**

- Conduct wait time study of average time between referral and appointment for clients seeking behavior health treatment. **NOT STARTED**

> **Note:**
> **RFP for County-Wide Needs, Gaps, and System Barriers Analysis for Behavioral Health Services (submittal deadline January 31, 2017 1pm EST**

Objective 1.2

Implement evidence-based practice models across the continuum of care that will effectively address the results of the needs, gaps, and system barrier analysis.

Baseline	Target
0	2

Action Steps

- Create an evidence-based practice list. **NOT STARTED**

- Seek funding opportunities for expansion and/or improvement. **COMPLETED**

- Evaluate model fidelity and effectiveness to determine sustainability and replicability **NOT STARTED**

- Advocate for regulatory changes to decrease system barriers (i.e. prescribing privileges, Medicare providers). **NOT STARTED**

> **Note:**
> **Implementation will begin at the completion of the County-Wide Needs, Gaps, and System Barriers Analysis. Funding will be tied to the ADAMHS RFP process.**

Objective 1.3

Implement a behavioral health public awareness campaign to reduce stigma and increase awareness of services offered.

Baseline	Target
NA	Campaign implemented

Action Steps

- Define population focus and target areas. **IN PROGRESS**

- Define data evaluation points. **IN PROGRESS**

- Identify resources and potential funding needed to support the campaign. **COMPLETED**

- Develop a campaign strategy based on current resources. **COMPLETED**

- Hire professional media consulting firm to assist in design and implementation to expand public awareness of resources. **COMPLETED**

- Evaluate campaign effect. **NOT STARTED**

> **Note: Expand ADAMHS "Think Again" campaign beginning approximately July 2017**

Objective 1.4

Introduce evidence-based screening methods to address the use of opioids and other illicit substances during pregnancy in three healthcare settings that see pregnant women currently not using an evidence-based screening tool.

Baseline	Target
NA	3

Action Steps

- Identify Behavioral Health resources targeted toward pregnant women using opioids and illicit substances. **IN PROGRESS**

- Identify evidence-based screening tools used to screen and refer to treatment pregnant women using opioids or illicit substances. **IN PROGRESS**

> **Note: SBIRT Train the Trainer (January, March, July) – 2 day training funded by OMHAS**

Goal 2

Increase integration of primary and behavioral healthcare services

Objective 2.1

Identify the number of primary care and behavioral health providers in Montgomery County who screen for both physical and behavioral health disorders.

Baseline	Target
NA	# of providers screening

Action Steps

- Utilize screening survey method to establish baseline number of primary care and behavioral health providers who are screening for both physical and behavioral health disorders. **IN PROGRESS**

- Identify the number of physicians and behavioral health organizations who have adopted integrated screening process. **NOT STARTED**

- Identify the number of individuals who are interested in future training opportunities. **NOT STARTED**

> **Note: 4 question survey to health care providers administered by PHDMC**

Objective 2.2

Increase the knowledge base of behavioral health and primary care providers in integrated care models.

Baseline	Target
NA	15% gain in provider knowledge

Action Steps

- Develop a local learning community to expand integrated care through training opportunities and technical assistance in implementation. **IN PROGRESS**

- Provide Screening, Brief Intervention and Referral to Treatment (SBIRT); Mental Health First Aid and Trauma Informed Care and Integrated Care training. **NOT STARTED**

- Utilize a pretest-posttest design methodology to measure the effectiveness of training. **NOT STARTED**

> **Note: SBIRT Train the Trainer (January, March, July) – 2 day training funded by OMHAS**

Objective 2.3

Implement an evidence-based strategy aimed at increasing screening rates for behavioral health disorders.

Baseline	Target
NA	1

Action Steps

- Identify the number of individuals who have been trained and/or are implementing integration screening. **NOT STARTED**

- Implement strategies to increase screening rates. **NOT STARTED**

Goal 3

Enhance care coordination and information sharing across behavioral health and other system partners

> **Note: RFP Feasibility Study and Care Coordination Implementation will be released in March.**

Objective 3.1

Complete a feasibility study to identify an approach to information sharing.

Baseline	Target
NA	Feasibility study results

Action Steps

- Create a county-wide workgroup that includes system partners. **NOT STARTED**

- Conduct a review analysis of current and past initiatives and practice by gathering information from system partners, task forces, coalitions, and county-wide workgroup plans. **NOT STARTED**

- Evaluate the effectiveness of current care coordination methods used. **NOT STARTED**

Objective 3.2

Identify effective care coordination models that will focus on information sharing for possible implementation.

Baseline	Target
NA	Review results

Action Steps

- Review existing care coordination models that will focus on a collective impact system approach. **NOT STARTED**

Objective 3.3

Develop a cross-system coordination model.

Baseline	Target
NA	Protocol developed

Action Steps

- Write protocols that include goals and a plan of action that outlines mutually reinforcing activities and data driven change efforts with clear targeted outcomes and processes. **NOT STARTED**

Objective 3.4

Implement cross-system coordination protocols.

Baseline	Target
NA	Protocol implementation and adoption

Action Steps

- Educate providers on the protocols by offering live community presentations. **NOT STARTED**

- Implement protocols across systems of care and measure success and identify areas of improvement through performance measurement data. **NOT STARTED**

Goal 4
Reduce the use of opioids and other illicit substances

Objective 4.1
Finalize the Incident Management System framework of the Community Overdose Action Team (COAT), collective impact collaborative formed to address the present opioid epidemic.

Baseline	Target
NA	NA

Action Steps

- Convene a Steering Committee as part of the opioid epidemic collaborative. **COMPLETED**

- Select stakeholders to serve as the Backbone Support. **COMPLETED**

- Select stakeholders to serve on the Operations and Planning Sections and the Joint Information Center. **COMPLETED**

- Select stakeholders to serve on the Data Sharing Committee (branch of Planning Section). **COMPLETED**

Objective 4.2
Develop and implement the Incident Action Plans developed as part of the Community Overdose Action Team (COAT).

Baseline	Target
NA	NA

Action Steps

- Create broad objectives to address the opioid epidemic. **COMPLETED**

- Identify current actions occurring to address opioid misuse in the county. **IN PROGRESS**

- Identify short and long terms goals for the incident. **IN PROGRESS**

- Schedule situational updates to cover the identified operational period. **IN PROGRESS**