

Darke County Community Health Plan, 2012

In January 2012, Darke County community leaders organized into three task forces to identify critical health priorities. Members of the Nutrition and Physical Activity; Preventive Health; and the Youth Health and Well-Being task forces represented primary and post-secondary education, government, community based organizations, and the health care system.

Each task force met at least once via webinar in January to analyze the results of the 2011 BRFSS survey and other local data; identify priorities and gaps in services and resources; and discuss potential strategies to address each priority. Priority health issues according to each task force are presented in the table below.

Nutrition and Physical Activity

Changing residents' mindsets towards physical activity and nutrition

Preventive Health

Increasing awareness and utilization of dental services

Increasing awareness and utilization of mental health services

Youth Health and Well-Being

Educating school staff about mental health policies and procedures

Reducing STD rates among youth

A team of Wright State University researchers reviewed current literature to identify evidence based practices that could be used to remedy the priority issues. Task forces reconvened via webinar in February and March to review and determine the viability of the evidence based practices (EBP). Once consensus was reached, each task force outlined actionable steps to implement the EBPs. This information was organized into action plans by the Wright State team and distributed to each task force for review. Upon approval, the plans were sent to the Steering Committee members. In May, the Steering Committee convened to identify lead agents, costs and timelines for the implementation of each strategy. This information was then synthesized into one final plan.

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The five priority issues represent the most pressing public health issues for Darke County in 2012 and in the pending future. As conditions, resources and the environment changes, the details of the initiatives may be adapted to meet new challenges. This document will serve as a guide for community health improvement and a catalyst for a unified community effort to improve the health and quality of life for all residents.

THANK YOU TASK FORCES AND STEERING COMMITTEE

The Darke County General Health District would like to thank the individuals and organizations who donated their time to make the community health planning initiative a success, and one which will benefit the health and well-being of all Darke County residents.

Task force participants:

- ❖ **AmeriCorps Darke County**
- ❖ **Sarah and Mary**, Darke County WIC Program
- ❖ **Shelly Acker**, Wayne Healthcare
- ❖ **Christy Baker**, YMCA of Darke County
- ❖ **Darlene Baker**, Darke County Mental Health Clinic
- ❖ **Jennifer Barga**, Darke County General Health District
- ❖ **James Beyke**, Wayne Healthcare
- ❖ **Jill Brown**, Wayne Healthcare
- ❖ **Brenda Chrisman**, Franklin Monroe Schools
- ❖ **Tracy Cordonnier**, Bradford Schools
- ❖ **Erica Dickey**, Darke County Parks
- ❖ **Carolyn Doenges**, Wayne Healthcare
- ❖ **Karen Droesch**, Wayne Healthcare
- ❖ **Teresa Greve**, Arcanum Schools
- ❖ **Lynn Gump**, Red Cross
- ❖ **Terrence Holman**, Darke County General Health District
- ❖ **Janet Julian**, Brethren Retirement Community
- ❖ **LaJeanne Riegler**, Miami Valley Career Technology Center
- ❖ **Pat Roach**, Ansonia Schools
- ❖ **Phil Suman**, Darke County Mental Health Clinic
- ❖ **Dennis Wein**, Darke County General Health District
- ❖ **Rhonda Williams**, OSU Extension Office
- ❖ **Laurie White**, Family Health
- ❖ **Leslie Zimmers**, Anthony Wayne Early Childhood Center

Steering Committee members:

- ❖ **Wayne Deschambeau**, Wayne HealthCare
- ❖ **Dennis Wein**, Darke County General Health District
- ❖ **Mike Gray**, Educational Service Center
- ❖ **Terrence Holman**, Darke County General Health District
- ❖ **Phil Suman**, Darke County Mental Health Clinic

NUTRITION AND PHYSICAL ACTIVITY

STRATEGIC ISSUE 1: CHANGING RESIDENTS' MINDSETS TOWARDS PHYSICAL ACTIVITY AND NUTRITION

Rationale:

Research has shown that chronic diseases make up approximately 70% of deaths (Partnership to Fight Chronic Disease). Major risk factors for chronic disease are behavioral, such as smoking, unhealthy diet and physical inactivity. According to the World Health Organization, the elimination of these risk factors would achieve at least an 80% decrease in the prevalence of heart disease, stroke and Type 2 diabetes as well as a 40% decrease in cancer. The increasing incidents of diabetes and obesity have heightened the concern regarding risky health behaviors. From 2009 to 2010, the number of states with obesity rates greater than or equal to 30% increased from nine to twelve. According to the 2011 Darke County Adult Survey, 66.3% of respondents were overweight or obese.

Motivational Interviewing (MI) is a collaborative, client-centered counseling method that seeks to elicit and strengthen motivation for change. Through the use of various strategies such as reflective listening, using open-ended questions and affirmations, MI works toward positive behavior modification by helping clients' resolve their ambivalence towards change. This method stresses that motivation for change must come from within the client therefore MI promotes collaboration between client and clinician. In the partnership between client and clinician, the client is ultimately responsible for articulating and resolving ambivalence, while the clinician helps elicit motivation for change by cultivating partnership rather than imposing expert opinions. Research has demonstrated MI's effectiveness in promoting health-related behavior change in areas such as substance abuse, diet and exercise.

Goal 1: Institute practices within health agencies that promote improved attitudes towards living healthy lifestyles.

Key Result Areas: An increased number of counseling centers will utilize motivational interviewing.

Lead Agent: Wayne HealthCare

Supporting Agent: Darke County Mental Health Clinic

Strategy 1: Increase the number of organizations using Motivational Interviewing.

- **Action Step 1:** Perform and evaluate outcomes of pilot demonstrations in areas, such as the Diabetes Education Program at Wayne HealthCare and the County's WIC program, where MI has shown promising results.
- **Action Step 2:** Craft a communication brief based on the results of the pilot demonstrations.
- **Action Step 3:** Present communication brief to key agencies in order to assess openness to implementing MI.
- **Action Step 4:** Approach senior management about changes to policy and procedure that would facilitate the successful integration of MI into the organization.
- **Action Step 5:** Organize formal training sessions for supervisors and staff.
 - **Time Frame:** Approximately 1 year
 - **Estimated Cost:** Low cost

Goal 2: Implement community-wide wellness initiative to encourage healthy lifestyle choices.

Rationale:

In recent years, many institutions have started investing in employee wellness programs to help promote the health and well-being of their employees. These programs generally assess and try to reduce participants' health risks through personalized educational and lifestyle management efforts. Participation is often encouraged through the use of incentives and coaching. Research has shown that employee wellness programs can not only reduce an employer's health care related costs, but also change participants' behavior, increase productivity and reduce participants' health risks.

Key Result Areas: An increased number of employers will allow their employees to attend the Darke County Health Fair.

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Lead Agent: Phase 1 – Health Fair Committee

Strategy: Apply effective elements of employee wellness programs to a broader community-wide initiative.

- **Phase 1:** Use the Darke County Health Fair as a means of getting more people to obtain health screenings.
 - **Action Step 1:** Approach a prominent business representative or chamber of commerce member about serving on the Health Fair Committee.
 - **Action Step 2:** Prepare a value proposition to pitch to businesses that would calculate the cost savings to businesses if employees obtained health screenings at the fair. Based on the cost savings, determine if employers would allow employees two-hours off to attend the health fair.
 - **Action Step 3:** Use linkages with business leaders to help distribute the value proposition to other companies.
 - **Action Step 4:** Identify key organizations that can assist in promoting health fair attendance to different populations: workforce, youth and elderly.
 - Time Frame: Approximately 1 year
 - Estimated Cost: Low cost

- **Phase 2:** Communicate to residents how to adopt healthy habits.
 - **Action Step 1:** Select a specific health topic.
 - **Action Step 2:** Craft a specific health message that narrows the health topic to a specific action that makes behavior modification clear and manageable.
 - **Action Step 3:** Identify the most appropriate mediums through which to convey the message.
 - **Action Step 4:** Identify how the program's success will be measured.
 - **Action Step 5:** Approach a local college or university to assist with data collection and analysis.
 - **Action Step 6:** Evaluate the success of the program and determine whether related campaigns would be a viable option for the future.
 - **Time Frame:** Beginning in year 2 of the planning time table
 - **Estimated Cost:** Low cost

Current Situation:

According to the Surgeon General's report on oral health in America, oral health is integral to general health. Since many systemic diseases have oral manifestations, there is a critical link between oral health and a person's general well-being. Results of the Darke County Adult Survey showed that 47% of respondents had one or more teeth removed due to tooth decay or gum disease. Roughly 12% of respondents had 6 or more teeth removed, while another 9% had all of their teeth removed due to decay.

Multiple sources including the Surgeon General and the Institute of Medicine support the integration of oral health care into overall health care. Though there are higher level changes needed to help institutionalize this linkage, health care providers are aptly positioned to lead the charge by coordinating local efforts such as strengthening referral systems and incorporating lifelong dental care into medical schedules.

PREVENTIVE HEALTH

STRATEGIC ISSUE 1: INCREASING AWARENESS AND UTILIZATION OF DENTAL SERVICES.

Goal: Increase the number of doctors' offices that proactively support oral health.

Key Result Areas: An increased number of doctors' offices providing oral health information and materials to their patients.

Lead Agent: Family Health

Strategy: Coordinate oral health messaging between primary care physicians and dental service providers.

- **Action Step 1:** Develop oral health education materials to be displayed in in primary care physicians' offices.
- **Action Step 2:** Pilot Test the materials with the Federally Qualified Health Center.
- **Action Step 3:** Select at least one more physician's office to partner with, to distribute/display oral health education materials.
- **Action Step 4:** Approach primary care physicians about adding oral health questions to their general patient assessment or annual physical.

- **Time Frame:** Approximately 1 year
- **Estimated Cost:** Low cost

STRATEGIC ISSUE 2: INCREASING AWARENESS AND UTILIZATION OF MENTAL HEALTH SERVICES.

Current Situation:

Research shows that mental disorders often affect the progression and outcome of chronic health conditions such as diabetes, cancer, cardiovascular disease, asthma and obesity. In the United States, an estimated 1 in 10 adults report experiencing depression (CDC). According to the 2011 Darke County Adult Survey, 7% of respondents felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.

An essential part of effective communication is using strategies that are community-specific. Identifying appropriate communication channels, through a method such as focus groups, can enhance community dialogue. A focus group is an exploratory method of inquiry. These in-depth group interviews are used to collect information regarding participants' perceptions and points of view. During these sessions, a facilitator guides group discussions through a set of predetermined topics. The unstructured format of these sessions allows participants to elaborate on their thoughts and share their experiences in their own words. From these conversations, researchers can gather valuable information regarding community-specific concerns and previously undiscovered challenges.

Goal: Select at least one proactive method to market mental health services to residents.

Key Result Areas: Increased communication between mental health agencies and residents through community appropriate communication channels.

Lead Agent: Darke County Mental Health Clinic

Strategy: Conduct focus groups to identify the best ways to communicate with residents about available services.

- **Action Step 1:** Select a target audience you would like to reach with your marketing efforts.
- **Action Step 2:** Develop a set of questions to guide discussions during the focus group.

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- **Action Step 3:** Conduct one, two-part focus group.
 - Part 1: Gather information about the best ways to communicate with this audience.
 - Part 2: Collect participants' feedback about outreach methods currently being used in other areas to get the word out about mental health services.
- **Action Step 4:** Use the focus group results to select at least one way to market mental health services to the chosen audience.
 - **Time Frame:** Approximately 1 year to try out the approach and then ongoing
 - **Estimated Cost:** Low cost

YOUTH HEALTH AND WELL-BEING

STRATEGIC ISSUE 1: EDUCATING SCHOOL STAFF ABOUT MENTAL HEALTH POLICIES AND PROCEDURES.

Goal: Train school employees to follow the proper protocol when they encounter a student in crisis or exhibiting symptoms of poor mental health.

Key Result Areas: Increased number of school personnel who are knowledgeable about school mental health policies. In addition, the creation of a routine training schedule to maintain school personnel awareness of policies and procedures.

Lead Agent: Darke County Mental Health Clinic

Supporting Agencies: County schools

Strategy: Establish or strengthen current school mental health policies.

- **Sub-strategy:** Hold training sessions to provide continuing education and training to school personnel on school mental health policies and procedures.
 - **Action Step 1:** Assess the quality of the current school mental health policies. For example, determine whether there is a definition for what constitutes a student in “crisis.” Identify whether the policy clearly identifies staff members to whom students should be referred for assessment.
 - For detailed information see: www.nationalguidelines.org

Current Situation:

In recent years, youth mental health has become an increasing concern. According to the 2011 Darke County Youth Survey, 16.9% of high school students and 14% of middle school students considered attempting suicide within the past 12 months. Approximately half of these students, 8.6% of high school students and 7.9% of middle school students actually attempted to do so.

To ensure the timely identification, assessment and referral of students with mental health needs, the American Academy of Pediatrics and the National Association of School Nurses recommend maintaining written policies outlining the formal assessment and referral process. School personnel are in a unique position to identify symptoms of poor mental health that may not be recognized by family members. To aid personnel in this endeavor, periodic training should be provided to ensure all staff are able to identify students in need and are aware of the formal policies and procedures.

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- **Action Step 2:** Use the National Guideline criteria to update and strengthen school mental health policies and procedures.
- **Action Step 3:** Partner with Darke County Mental Health to organize a training session for school employees.
- **Action Step 4:** Hold a training session for all school personnel to educate them about the policies and how to identify students in crisis or exhibiting symptoms of poor mental health.
- **Action Step 5:** Establish a schedule to ensure continuous education and training.
 - **Time Frame:** Approximately 1 year to institute and then ongoing
 - **Estimated Cost:** Low cost