



# COMMUNITY HEALTH IMPROVEMENT PLAN

CALHOUN COUNTY, FLORIDA

JUNE 2013





## **Contributors**

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PREPARED BY

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### **Disclaimer**

While statistics and data for the indicators were, to the best of the author's knowledge, current as the Community Health Improvement Plan Report 2013 was drafted, there may be subsequent data and developments, including recent legislative actions, that could alter the information provided herein.

This report does not include statistical tests for significance and does not constitute medical advice. Individuals with health problems should consult an appropriate health care provider. This report does not constitute legal advice.

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# Calhoun County Community Health Improvement Plan

## EXECUTIVE SUMMARY

Building a healthier Calhoun County began as a community-wide initiative with the goal of establishing an ongoing process for identifying and addressing health needs. The intent of this project was to foster successful partnerships within the community in order to improve the health of Calhoun County residents. The *Public Health Accreditation Board* defines a Community Health Improvement Plan (CHIP) as “a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process.” A CHIP can be used by health departments, as well as other government, education, or human service agencies, to coordinate efforts and target resources that promote health.

A CHIP serves to address health issues, roles, and common goals and objectives throughout the community. The plan can be used to guide action and monitor and measure progress toward achievement of goals and objectives. The plan, along with a Community Health Assessment (CHA), can be utilized as justification for support of certain public health initiatives, as part of funding proposals, and for attracting other resources toward building programs that improve the overall quality of life of the community.

## **Health Priorities and Recommendations**

Calhoun county community health partners identified two key issues –*Obesity, and Poverty* - and developed recommendations and action steps. It is recommended the Community Health Action Plans be incorporated into the work of the Florida Department of Health in Calhoun County, existing community groups, and health care partners.

### **HEALTH PRIORITY: OBESITY**

#### **Goal: Decrease obesity in Calhoun County.**

**Objective 1:** Increase fruit/vegetable intake in adults by 10% from 21.5% to 31.5% by June 30, 2015.

**Strategy 1:** Develop community nutrition activities/education.

**Objective 2:** Decrease percentage of high school students reporting BMI at or above 95th% by 5% from 18% to 13% by June 30, 2015.

**Strategy 1:** Establish physical activity in high school.

**Strategy 2:** Establish nutrition education in high school.

**Objective 3:** Increase percentage of adults who meet moderate activity by 5% from 33.5% to 38.5% by June 30, 2015.

**Strategy 1:** Develop community physical fitness activities.

## HEALTH PRIORITY: POVERTY

**Goal: Reduce poverty in Calhoun County.**

**Objective:** Reduce poverty from 25.9% to 15.9% by August 31, 2016.

**Strategy 1:** Develop financial management courses for high school.

**Strategy 2:** Implement financial planning workshop for adults.



## INTRODUCTION

The health status of a community plays a large role in social and economic prosperity, hence it is important that a community strives to continually improve and maintain its health.

Government agencies (city, county, state) may provide health services; however, successful health programs require an active partnership between all community agencies.

Community health improvement planning is a long-term, systematic effort that addresses health problems on the basis of the results of community health assessment activities and the community health improvement process. The resulting Community Health Improvement Plan is used by health and other government, educational and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. A CHIP is critical for developing policies and defining actions to target efforts that promote health. It defines the vision for the health of the community through a collaborative process and addresses the strengths, weaknesses, challenges, and opportunities that exist in the community

in order to improve the health status of that community.



The Florida Department of Health in Calhoun County, working with community health partners, initiated community-wide strategic planning for improving community health utilizing the *Mobilizing for Action through Planning and Partnerships* (MAPP) model. MAPP was developed by the *National Association of County and City Health Officials*

(NACCHO), in collaboration with the *Centers for Disease Control and Prevention* (CDC). MAPP provides a framework to create and implement a community health improvement plan that focuses on long-term strategies that address multiple factors that affect health in a community. The resulting community health improvement plan is designed to use existing resources wisely, consider unique local conditions and needs, and form effective partnerships for action.

## METHODOLOGY

The Florida Department of Health in Calhoun County and community health partners met together for the purpose of evaluating the health status of the citizens of the Calhoun County area in order to develop health improvement interventions. The goal of these partners was to develop and implement comprehensive, community-based health promotion and wellness programs in the Calhoun County area and provide a forum where members may join together to plan, share resources, and implement strategies and programs to address the health care needs of citizens.

The NACCHO MAPP model for community health planning was used, which provides a strategic approach to community health improvement. This model utilizes six distinct phases:

1. Partnership development and organizing for success
2. Visioning
3. The Four MAPP assessments
  - Community Health Status Assessment
  - Community Strength and Themes Assessment
  - Local Public Health System Assessment
  - Forces of Change Assessment
4. Identifying strategic issues
5. Formulating goals and strategies
6. Action (program planning, implementation, and evaluation)

The ***Community Health Status Assessment*** provided a “snapshot in time” of the demographics, employment, health status, health risk factors, health resource availability, and quality of life perceptions. Florida Department of Health in Calhoun County conducted a Community Health Status Profile in April 2012. Data from the 2010 U.S. Census, U.S. Bureau of Labor Statistics, and the Florida Department of Health, Legislative Office of Economic and Demographic Research, Department of Children and Families, Department of Law Enforcement, and Agency for Health Care Administration was utilized in the *Community Health Status Assessment*.

Community perceptions of the health care system are a critical part of the MAPP process.

**Community Themes and Strengths** were identified in May 2013 as part of the **Goals & Strategies** workshop. Perceptions of the quality and accessibility of healthcare in Calhoun County were assessed. Community health partners identified 10 health themes:

- Alcohol & Substance Abuse
- Cancer
- Cardiovascular Disease
- Diabetes
- Domestic Violence
- Educational Issues
- Health Insurance
- Obesity
- Poverty
- Tobacco Use

Community health partners participated in the **Forces of Change Assessment** workshop on April 2013 to identify what is occurring or might occur that impacts the health of the community and local public health system. Six themes or issues, with corresponding sub-themes and threats, were identified:

- Economic
- Environmental
- Health
- Social
- Political
- Technological

Data from the **2012 County Health Rankings**, compiled by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation were reviewed by community partners throughout the MAPP process. In addition, community health partners reviewed the **10 Essential Public Health Services** rankings from the **Local Public Health Performance Standards Program**.



Trammell Bridge

## Goals & Strategies Report

As part of the Calhoun County Community Health Improvement Project, the “Mobilizing for Action through Planning and Partnerships” (MAPP) a Strategic Priorities and Goals workshop was conducted on May 7, 2013. Fifteen community health partners participated in the workshop and identified four community health themes for Calhoun County.

# Calhoun County Goals & Strategies Report

## BACKGROUND

As part of the “Mobilizing for Action through Planning and Partnerships” (MAPP) project in Calhoun County, Quad R, LLC was contracted by the Florida Department of Health in Calhoun County to facilitate the Community Identified Goals and Strategies workshop on May 7, 2013. The purpose of this workshop was to identify health priorities which are impacting Calhoun County residents and to develop goal statements and strategies for each priority.

A total of 15 individuals attended. Individuals were representative of various social service agencies, not-for-profit organizations, and other public health system agencies. Participants represented a cross-section of the community and input provided was based on their knowledge, awareness and perceptions of related health concerns with Calhoun County. The list of participants can be found at the end of this report.

## METHODS

Approximately two weeks prior to the scheduled Goals and Strategies workshop, community health partners were contacted by e-mail from the Florida Department of Health in Calhoun County regarding the date, time, and purpose of the workshop. At this time, community health partners were provided the agenda. The email and agenda are located at the end of the report.

The participants were welcomed to the workshop by the Calhoun County Outreach Coordinator Susan Chafin. Workshop participants introduced themselves and identified their organization. After reviewing



the agenda, the workshop facilitator then asked participants to examine the data which highlighted key health statistics for Calhoun County. This data included:

- Florida Department of Health CHARTS – Calhoun County Health Status Summary (accessed April 15, 2013)
- 2013 County Health Rankings (Florida Big Bend, Florida Public Health Institute)
- Florida Legislature, Office of Economic and Demographic Research – Calhoun County Summary (accessed April 15, 2013)
- Calhoun CHARTS Pregnancy & Young Child Profile (accessed April 15, 2013)
- Calhoun CHARTS School-aged Child & Adolescent Profile (accessed April 15, 2013)
- 2010 Florida Behavioral Risk Factor Surveillance System (BRFSS) Data Report
- Florida Department of Law Enforcement January-December 2011 Crime in Calhoun County Summary
- Calhoun County Quick Facts, US Census Report (accessed April 15, 2013)
- Florida Youth Tobacco Survey (FYTS) 2012 – Calhoun County at a Glance
- Calhoun County: Specialty and Flavored Tobacco Trends Among Youths (Ages 11-17) from the Florida Youth Tobacco Survey (Florida Department of Health)



Participants reviewed the data individually and identified key health issues and/or needs for Calhoun County residents. Individual health concerns were written on sticky notes by each participant. Workshop participants were reminded to identify local, state and national health issues that may affect the context in which the community and its public health system operate

within Calhoun County.

Participants were then asked to combine their health issues and/or concerns (sticky notes) into common themes or categories. Workshop members worked collaboratively to cluster their issues and identify a label for the theme or category. They then reviewed all the themes and categories and re-assembled them into a master list of community health issues.

Ten health issues were identified:

- Alcohol & Substance Abuse
- Cancer
- Cardiovascular Disease
- Diabetes
- Domestic Violence
- Educational Issues
- Health Insurance
- Obesity
- Poverty
- Tobacco Use

Workshop participants were instructed to self-select into one of the 10 health issues. Each group was to review the health issues represented by the sticky notes associated with that issue. Each group was tasked with identifying two *Do-able* activities in order to change and/or impact the health issue in Calhoun County. Groups were reminded to think about the *Resources* and





*Barriers/Challenges* identified at the April 9<sup>th</sup> workshop when identifying *Do-able* activities (these were provided as a handout at this workshop). Once two activities were listed, each group moved to the next health issue, reviewed the sticky notes, discussed the *Do-able* activities listed, and identified two different *Do-able* activities. This process was repeated until each

group had reviewed and added items to each of the 10 health issues.

Next, workshop participants reviewed the *Do-able* activities on each of the 10 health issues. Each group was instructed to reach consensus on the three most *Do-able* activities given the *Resources* and *Barriers/Challenges*, and place a “star” next to these activities on each chart.

Once each group had selected the top three most *Do-able* activities on each of the 10 health issues, the workshop participants were asked to review all the health issues a final time. This work is presented at the end of the report.

Workshop participants then voted on the top health issues which they could impact in the next two to three years. The participants reached consensus on three health issues:

- Alcohol & Substance Abuse
- Obesity
- Poverty

After a short break for a working lunch and networking, workshop participants self-selected into one of the three health issues. The facilitator reviewed the key terms associated with goals and strategies on the back of the agenda with the participants. Each workgroup was then tasked with developing a Goal Statement and Strategies for their health issue. Once each workgroup had at least 2 strategies for the health issue, the participants reviewed the work for

each issue. Participants provided feedback and added additional strategies as needed. In addition, participants worked collaboratively to structure the goals and strategies in the format associated with MAPP process (see Key terms and examples on the Agenda).

The *Goal & Strategies* template was provided on a large easel chart paper. Each workgroup selected at least two strategies from the list created in the previous step, and identified *Barriers/Challenges* from the master list which could prevent or act as a challenge to implementing and/or completing the strategy. These were listed on the *Goal & Strategies* template. In addition, the workgroup identified factors associated with the *Implementation* of the strategy, such as a proposed timeline for completion, lead and key members, and resources.

Workgroups reviewed each other's work and provided feedback. Each group continued to add information on the *Goal & Strategies* template for their health issue. The goals and strategies developed during this workshop are found on the following pages.



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## GOALS & STRATEGIES

Calhoun County Community Health Project				
Priority Issue	Goal	Strategy	Barriers	Implementation
<b>Alcohol and Substance Abuse</b>	Calhoun County will reduce instances of Alcohol and Substance Abuse.	1. Educate the population on effects of alcohol and substance abuse.	<ul style="list-style-type: none"> <li>• Funding(legislative)</li> <li>• Generational change</li> <li>• Advertisement and glamorization of alcohol</li> <li>• Parental acceptance of alcohol use</li> </ul>	<p><b>Timeline</b> 3 Years</p> <p><b>Lead &amp; Team Members</b> Calhoun County Chamber of Commerce Schools Department of Health (DOH) Department of Children and Families (DCF) Local business</p> <p><b>Resources</b> CARE Department of Health (DOH) Department of Children and Families (DCF)</p>
		2. Provide alternative to alcohol and drugs.	<ul style="list-style-type: none"> <li>• Funding</li> <li>• Space</li> <li>• transportation</li> </ul>	<p><b>Timeline</b> 1 Year</p> <p><b>Lead &amp; Team Members</b> Local leaders Churches Schools County Health Department</p> <p><b>Resources</b> Local funding Volunteers</p>

**Calhoun County Community Health Project**

<b>Priority Issue</b>	<b>Goal</b>	<b>Strategy</b>	<b>Barriers</b>	<b>Implementation</b>
<b>Obesity</b>	Calhoun County will decrease the rate of Obesity in overall population.	1. Explore and acquire funding sources to establish and maintain Community Based fitness program.	<ul style="list-style-type: none"> <li>• Funding</li> <li>• politics</li> </ul>	<p><b>Timeline</b> 3 Years</p> <p><b>Lead &amp; Team Members</b> Chamber Schools Hospital Department of Health (DOH) Churches</p> <p><b>Resources</b> See above</p>
		2. Promote healthy lifestyles across the lifespan through broad-based collaborative educational programs.	<ul style="list-style-type: none"> <li>• Southern culture</li> <li>• Fast food mentality</li> <li>• Healthy lifestyle perceived as more expensive</li> </ul>	<p><b>Timeline</b> 3 Years</p> <p><b>Lead &amp; Team Members</b> Local business leaders Schools Extension office Department of Health( DOH)</p> <p><b>Resources</b> See above</p>

Calhoun County Community Health Project				
Priority Issue	Goal	Strategy	Barriers	Implementation
Obesity  (continued)	Calhoun County will decrease the rate of Obesity in overall population.	3. Increase access to preventative care/screenings in order to promote awareness of risk of obesity.	<ul style="list-style-type: none"> <li>• Funding</li> <li>• Lack of providers</li> <li>• Transportation</li> <li>• Lack of participation</li> </ul>	<b>Timeline</b> 3 Years  <b>Lead &amp; Team Members</b> Local business Schools Department of Health (DOH)  <b>Resources</b> See above

Calhoun County Community Health Project				
Priority Issue	Goal	Strategy	Barriers	Implementation
Poverty	Calhoun County will reverse the Poverty level among residents.	1. Expand programs that support families and the values needed to encourage a rise above poverty.	<ul style="list-style-type: none"> <li>• Legislative</li> <li>• Generational change</li> <li>• Community awareness</li> <li>• Pride</li> </ul>	<b>Timeline</b> 2-3 Years  <b>Lead &amp; Team Members</b> Local leaders Academic  <b>Resources</b> State and Local funding Grants
		2. Encourage development of vocational/technical education.	<ul style="list-style-type: none"> <li>• Legislative/funding</li> <li>• Vocational specialties on the decline</li> <li>• Identifying vocational opportunities</li> <li>• Community support</li> </ul>	<b>Timeline</b> 3 Years  <b>Lead &amp; Team Members</b> Educators Local leaders  <b>Resources</b> State/Federal funding

**Calhoun County Community Health Project**

<b>Priority Issue</b>	<b>Goal</b>	<b>Strategy</b>	<b>Barriers</b>	<b>Implementation</b>
<b>Poverty</b>  (continued)	Calhoun County will reverse the Poverty level among residents.	3. Provide awareness of financial awareness and accountability, and life skills.	<ul style="list-style-type: none"> <li>• Funding program</li> <li>• Educational awareness of the need/priority</li> <li>• Community acceptance</li> <li>• Lack of awareness</li> </ul>	<b>Timeline</b> 1-2 Years  <b>Lead &amp; Team Members</b> Educators Local leaders Community activist Resources Local funding  <b>Resources</b> State/Federal funding

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## SUMMARY/KEY FINDINGS

The information gathered during the Strategic Priorities & Goals workshop is an important component of the MAPP comprehensive community assessment process. These findings can be used in conjunction with the other three MAPP assessments to develop the Community Health Improvement Plan (CHIP) for implementation and evaluation within the Calhoun County public health system.

Nationally, the current economic climate will continue to affect the local public health system and overall community throughout Calhoun County and the state of Florida. Budget cuts and limited grant opportunities have led to a decrease in funding for various services, from social services to charity care, mental illness and Medicaid. With local, state, and federal budget cuts, public health systems are challenged to find creative ways of continuing services and leveraging resources through collaboration and partnership with more non-traditional partners. *Poverty* was identified as a key priority health issue.

Continued unemployment and foreclosures result in a burdening of current health care and social service systems. Population growth and changing demographics also contribute to an increase in the need for services and programs. Calhoun County is a rural community, and as such, challenges to both access to healthcare, education, and the transportation infrastructure result. Changing demographics within Calhoun County and the state of Florida also present the need to address language and cultural barriers. *Alcohol & Substance Abuse* is a priority issue which impacts the health of Calhoun County residents.

There were other forces of change noted that are reflective of many issues on the national agenda. For example, health care reform, immigration reform, regulation of medical malpractice, use and overuse of technology, and need for sustainable energy

resources are issues being considered on the national level, but they would also have an impact on local and state health care and social service delivery systems. With the rise in unemployment, there is a greater need for all public health services. *Obesity* is a priority issue which impacts and is impacted by the other health issues identified in the workshop.

In summary, these strategic health issues priorities and goals impact the community's ability to implement action plans and impact (positively) the health of the Calhoun County community. These strategic priorities and goals impact multiple sectors of the Calhoun County community and surrounding counties, and should be reviewed in conjunction with the other MAPP community health assessments.



## NEXT STEPS

Community health improvement planning is a long-term, systematic effort that addresses health problems on the basis of the results of community health assessment activities. The next step in the Calhoun County process is to conduct the *Community Health Improvement Planning (CHIP)* phase of the MAPP process, wherein the results from this report will be reviewed in conjunction with Community Health Status Assessment, the Forces of Changes Assessment, and the Local Public Health System Assessment.



This process follows the guidelines of the Mobilizing for Action through Planning and Partnerships (MAPP) model. MAPP was developed by the National Association of County and City Health Officials (NACCHO), in collaboration with the Centers for Disease Control and Prevention (CDC). MAPP provides a framework to create and implement a community health improvement plan

that focuses on long-term strategies that address multiple factors that affect health in a community.

This model utilizes six distinct phases:

1. Partnership development and organizing for success
2. Visioning
3. The Four MAPP assessments
  - Community Health Status Assessment
  - Community Strength and Themes Assessment
  - Local Public Health System Assessment
  - Forces of Change Assessment

4. Identifying strategic issues
5. Formulating goals and strategies
6. Action (program planning, implementation, and evaluation)

The resulting Community Health Improvement Plan (CHIP) is designed to use existing resources wisely, consider unique local conditions and needs, and form effective partnerships for action, and is used by health and other government, educational and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources.





Historic M & B Train, Blountstown

# **ACTION PLAN**

## **(PROGRAM PLANNING, IMPLEMENTATION, AND EVALUATION)**

As part of the Calhoun County Community Health Improvement Project, the “Mobilizing for Action through Planning and Partnerships” (MAPP) a CHIP workshop were conducted on May 23, 2013. Twenty community health partners participated in this workshop and developed the Action Plans for community health improvement.

## BACKGROUND

Community Health Improvement Team members met to develop the **Community Health Improvement Plan**, which involved creating an action plan that focused on program planning, implementation, and evaluation. One seven-hour workshop was held in Bristol, Florida at the Veteran's Memorial Civic Center on May 23, 2013. The session was facilitated by Quad R, LLC and session logistics were coordinated with the Florida Department of Health in Calhoun County. Appendix 2 contains the email invitation, agenda, and list of workshop participants for the workshop.

## METHODS

There were 20 community health partners representing a diverse collection of public and private agencies in Calhoun County at the workshop. The workshop participants were welcomed by the Florida Department of Health in Calhoun County Administrator Rachel Manspeaker. After participants introduced themselves and the organization they represented, the facilitator reviewed the workshop agenda and provided the **Goals & Strategies** developed in the May 7, 2013 workshop.

Data folders were provided to those participants who either did not attend the May 7<sup>th</sup> workshop or did not bring their data folder. Appendix 2 contains the email invitation, agenda, and list of participants for this workshop.

The facilitator reminded workshop members that the data was to serve as the foundation of the Action Plan efforts. The three health goals and strategies from the May 7, 2013 **Goals & Strategies** workshop were also provided to the participants.



These three health issues were:

- Alcohol & Substance Abuse
- Obesity
- Poverty

After reviewing the goals and strategies, each participant self-selected into one of the three health issues and identified two “Do-able” activities for that health issue on the easel chart sheets provided. The participants were reminded to review the data to determine what activities could be measured and could be accomplished by 2016 with the current resources in Calhoun County. The participants then reviewed each health issue and added “Do-able” activities. This work is located in Appendix 2.

The workshop participants were instructed to review the information on each health, issue in conjunction with the data, and vote for the most “Do-able” activities for each health issue. Next, the participants used a multi-voting technique to prioritize the health issues. This technique allows the participants to narrow the list of health issues using the criteria of “Most Do-able” and “Most Achieve-able” within the parameters of the resources and timeline. Two health issues emerged from this process:

- Obesity
- Poverty



*Demonstrations at the Panhandle Pioneer Settlement, a living history museum.*

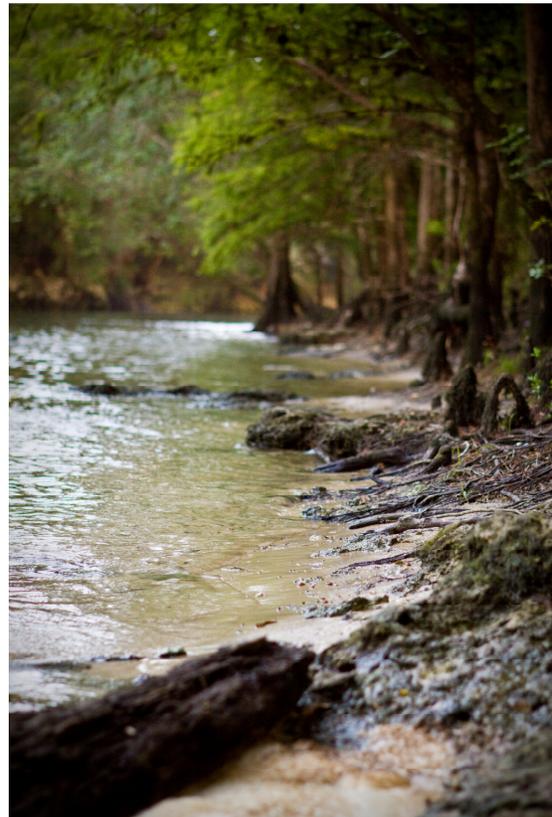
The facilitator reviewed the information regarding goals and SMART (Specific, Measurable, Achievable, Realistic, and Time-bound) Objectives provided on the agenda. Workshop participants self-selected into one of the two health issues. Each team developed a goal and SMART objectives for their health issues. Workshop participants reviewed the goal and SMART objective for each health issue and provided feedback. The goals and SMART objectives were further refined by each team.

After reviewing the work of the other groups, participants delineated activities for each SMART objective. Evaluation measures were identified for each activity and the final evaluation was linked back to the baseline measure for the SMART objective. In addition, the participants identified lead roles, community resources, and target date(s) for completion for each activity contained in the Action Plan.

Each Action Plan contained the following components:

- Goals and Objectives for improving Calhoun County Health Issues
- Performance measures with measurable and time-framed targets
- Policy changes needed to accomplish health objectives
- Designation of accountable persons and organizations for implementing strategies
- Measurable health outcomes or indicators to monitor progress

It should be noted that each team discussed whether there were policy changes required



in order to accomplish the specific Objective associated with their Action Plan. The teams decided either there were no policy changes required or needed policy changes would emerge through the activities within the Action Plan and would be addressed and added to the Action Plan. A presentation with the evaluation measure of “Approval Obtained” was identified for these specific Action Plans with identified policy changes.

The final product is presented on the following pages.



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<b>Priority Issue:</b> Obesity					
<b>Goal:</b> Decrease obesity in Calhoun County.					
<b>Objective 1:</b> Increase fruit/vegetable intake in adults by 10% from 21.5% to 31.5% by June 30, 2015.					
<b>Strategy 1:</b> Develop community nutrition activities/education.					
<b>Baseline Measure/Source:</b> Adults who consume at least five servings of fruits and vegetables a day - Calhoun: 21.5% compared to the state 26.2% (Florida CHARTS 2007) Adults who are overweight –Calhoun 36.2% as compared to state 37.8% (BRFSS 2010) Adults who are obese - Calhoun 34.7% as compared to state 27.2% (BRFSS 2010)					
<b>Key Activities</b>	<b>Lead Role &amp; Community Resources</b>	<b>Target Date for Completion</b>	<b>Status of Progress</b>	<b>Evaluation Measure</b>	<b>Evaluation Results</b>
1. Form Task Force.	<ul style="list-style-type: none"> <li>• County Health Department (CHD)</li> <li>• Restaurant Diners</li> <li>• Business Leaders</li> <li>• Grocery Stores</li> <li>• Farmers</li> <li>• Extension Agency</li> <li>• Faith Based</li> <li>• School</li> </ul>	9/30/13		Task Force formed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
2. Review/Revise Action Plan as needed.	Task Force	10/31/13		Action Plan revised.	
3. Research best practices for community nutrition activities & education to include: a. Rural community focus. b. Curriculum c. Handouts d. Marketing/Community Awareness campaign with materials e. Presentation materials f. Evaluation measures.	Task Force	10/31/13		Best practices researched.	
4. Research grants opportunities.	Task Force	10/31/13		Grant opportunities researched.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
5. Establish Selection Criteria to include: <ul style="list-style-type: none"> <li>a. Rural community focus.</li> <li>b. Curriculum</li> <li>c. Handouts</li> <li>d. Marketing/Community Awareness campaign with materials</li> <li>e. Presentation materials</li> <li>f. Comprehensive in scope</li> <li>g. Meets target audience</li> <li>h. Is realistic.</li> </ul>	Task Force	11/15/13		Selection Criteria established.	
6. Write and submit grant.	Task Force	12/15/13		Grant submitted.	
7. Select program(s) using Selection Criteria.	Task Force	11/15/13		Program(s) selected.	
8. Modify program(s).	Task Force	11/30/13		Program(s) modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
9. Draft Implementation Plan to include: <ul style="list-style-type: none"> <li>a. Coordination with community partners.</li> <li>b. Media campaign.</li> <li>c. Train staff for program.</li> <li>d. Schedule</li> <li>e. Location</li> <li>f. Date/time</li> <li>g. Target groups.</li> <li>h. Evaluation measure.</li> <li>i. Curriculum/Handouts.</li> <li>j. Posters/flyers.</li> <li>k. Sponsor(s).</li> <li>l. Incentives.</li> </ul>	Task Force	1/30/14		Implementation Plan drafted.	
10. Begin Implementation Plan.	Task Force	8/15/14		Plan implemented.	
11. Evaluate and compare to baseline.	Task Force	6/30/15		Increased fruit/vegetable intake in adults by 10% from 21.5% to 31.5%	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
12. Evaluate and compare to obesity and overweight BFRSS measures to determine impact.	Task Force	6/30/2015		<ul style="list-style-type: none"> <li>• Adults who are overweight – Calhoun 36.2% as compared to state 37.8%.</li> <li>• Adults who are obese - Calhoun 34.7% as compared to state 27.2%.</li> </ul>	
13. Determine Next Steps.	Task Force	6/30/2015		Next Steps determined.	

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<b>Priority Issue:</b> Obesity					
<b>Goal:</b> Decrease obesity in Calhoun County.					
<b>Objective 2:</b> Decrease percentage of high school students reporting BMI at or above 95 <sup>th</sup> % by 5% from 18% to 13% by June 30, 2015.					
<b>Strategy 1:</b> Establish physical activity in high school.					
<b>Baseline Measure/Source:</b> Obese (i.e., at or above the 95th percentile for body mass index, by age and sex) Calhoun: 18.0% compared to state 11.1% - Florida Youth Tobacco Survey (FYTS) 2012					
<b>Key Activities</b>	<b>Lead Role &amp; Community Resources</b>	<b>Target Date for Completion</b>	<b>Status of Progress</b>	<b>Evaluation Measure</b>	<b>Evaluation Results</b>
1. Form Task Force.	<ul style="list-style-type: none"> <li>• County Health Department(CHD )</li> <li>• Business Leaders</li> <li>• Extension Office</li> <li>• Chamber</li> <li>• Churches</li> <li>•</li> </ul>	9/30/2013		Task Force formed.	
2. Review and revise Action Plan as needed.	Task Force	9/30/2013		Action Plan reviewed and revised.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
3. Research evidence based programs for: <ul style="list-style-type: none"> <li>a. Rural community focus</li> <li>b. High school students</li> <li>c. Curriculum</li> <li>d. Handouts</li> <li>e. Marketing/Community Awareness campaign with materials</li> <li>f. Presentation materials</li> <li>g. Evaluation measures</li> </ul>	Task Force	10/30/2013		Evidence based programs researched.	
4. Research grants opportunity.	Task Force	11/30/2013		Grant opportunities researched.	
5. Write and submit grant.	Task Force	12/30/2013		Grant written and submitted.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
6. Establish Selection Criteria to include: <ul style="list-style-type: none"> <li>a. Realistic money and time</li> <li>b. Rural community focus</li> <li>c. High school students</li> <li>d. Curriculum</li> <li>e. Handouts</li> <li>f. Marketing/Community Awareness campaign with materials</li> <li>g. Presentation materials</li> <li>h. Evaluation measures</li> </ul>	Task Force	2/30/2014		Criteria selection established.	
7. Select program(s) based on Selection Criteria.	Task Force	3/30/2014		Program(s) selected.	
8. Modify program(s).	Task Force	5/30/2014		Program(s) modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
9. Develop Draft Implementation Plan to include: <ul style="list-style-type: none"> <li>a. Permission slips</li> <li>b. Invitations</li> <li>c. Train staff</li> <li>d. Coordinate with local schools</li> <li>e. Seek community partner</li> <li>f. Sponsor(s)</li> <li>g. Incentives</li> <li>h. Schedule</li> <li>i. Location</li> <li>j. Curriculum/handouts</li> <li>k. Media Campaign</li> <li>l. Evaluation measure(s)</li> </ul>	Task Force	5/30/2014		Draft implementation plan developed.	
10. Develop presentation for School Board to include: <ul style="list-style-type: none"> <li>a. Multi-media needs</li> <li>b. Handouts</li> <li>c. Speaker(s)</li> <li>d. Location</li> </ul>	Task Force	6/30/2014		Presentation developed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
11. Schedule School Board presentation.	Task Force	6/30/2014		School Board presentation scheduled.	
12. Deliver School Board presentation.	Task Force	7/30/2014		<ul style="list-style-type: none"> <li>• Presentation delivered.</li> <li>• School Board approval for program.</li> <li>• List of participants at meeting.</li> <li>• Feedback from meeting.</li> </ul>	
13. Modify curriculum/program based on feedback from School Board presentation, if needed.	Task Force	8/30/2014		Curriculum/program modified.	
14. Modify implementation plan based on feedback from School Board presentation, if needed.	Task Force	8/30/2014		Implementation plan modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
15. Develop presentation for School Board if approval not obtained in Step 12 (otherwise skip to Step 18) to include: <ul style="list-style-type: none"> <li>a. Multi-media needs</li> <li>b. Handouts</li> <li>c. Speaker(s)</li> <li>d. Location</li> </ul>	Task Force	6/30/2014		Presentation developed.	
16. Schedule School Board presentation.	Task Force	6/30/2014		School Board presentation scheduled.	
17. Deliver School Board presentation.	Task Force	7/30/2014		<ul style="list-style-type: none"> <li>• Presentation delivered.</li> <li>• School Board approval for program.</li> <li>• List of participants at meeting.</li> <li>• Feedback from meeting.</li> </ul>	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
18. Begin implementation plan to include: a. Permission slips b. Invitations c. Media/marketing campaign d. Program logistics e. Evaluation measures	Task Force	9/30/2014		<ul style="list-style-type: none"> <li>• Implementation plan started.</li> <li>• Program(s) delivered.</li> <li>• Evaluation data collected.</li> </ul>	
19. Analyze and summarize data.	Task Force	6/30/2015		Data from all measures summarized.	
20. Evaluate and compare to baseline.		6/30/2015		Decreased percentage of high school students reporting BMI at or above 95 <sup>th</sup> % by 5% from 18% to 13%.	
22. Determine Next Steps.	Task Force	6/30/2015		Next Steps determined.	

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<b>Priority Issue:</b> Obesity					
<b>Goal:</b> Decrease obesity in Calhoun County.					
<b>Objective 2:</b> Increase fruit and vegetable intake in high school students by 10% June 30, 2015.					
<b>Strategy 2:</b> Establish nutrition education in high school.					
<b>Baseline Measure/Source:</b> <b>Need to establish baseline via a survey of high school students in 2013-2014 school year.</b> Obese (i.e., at or above the 95th percentile for body mass index, by age and sex Calhoun: 18.0% compared to state 11.1% - Florida Youth Tobacco Survey (FYTS) 2012					
<b>Key Activities</b>	<b>Lead Role &amp; Community Resources</b>	<b>Target Date for Completion</b>	<b>Status of Progress</b>	<b>Evaluation Measure</b>	<b>Evaluation Results</b>
1. Form Task Force.	<ul style="list-style-type: none"> <li>• County Health Department (CHD) Lead</li> <li>• Superintendent</li> <li>• Principals</li> <li>• Health Department</li> <li>• Teachers</li> <li>• Coaches</li> <li>• Extension Office</li> </ul>	9/30/2013		Task Force formed.	
2. Review and revise Action Plan as needed.	Task Force	10/30/2013		Action Plan reviewed and revised.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
3. Develop self-report survey of high school students on fruit and vegetable intake.	Task Force	10/30/2013		Survey completed.	
4. Coordinate survey administration with local high school.	Task Force	11/30/2013		Survey administration coordinated.	
5. Implement survey on fruit and vegetable intake.	Task Force	2/28/2014		<ul style="list-style-type: none"> <li>• Survey implemented.</li> <li>• Data collected.</li> </ul>	
6. Analyze and summarize data.	Task Force	3/30/2014		Data summarized.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
7. Research Evidence Based programs to include: <ul style="list-style-type: none"> <li>a. Rural community focus</li> <li>b. High school students</li> <li>c. Nutrition education curriculum</li> <li>d. Handouts</li> <li>e. Marketing/Community Awareness campaign with materials</li> <li>f. Presentation materials</li> <li>g. Evaluation measures including baseline measure of fruit and vegetable consumption.</li> </ul>	Task Force	10/30/2013		Evidence Based programs researched.	
8. Research grants opportunities.	Task Force	12/15/2013		Grant opportunities researched.	
9. Write and submit grants.	Task Force	1/30/2014		Grants written and submitted.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
10. Establish Selection Criteria to include: <ul style="list-style-type: none"> <li>a. Rural community focus</li> <li>b. High school students</li> <li>c. Nutrition education curriculum</li> <li>d. Handouts</li> <li>e. Marketing/Community Awareness campaign with materials</li> <li>f. Presentation materials</li> <li>g. Implementation plan/logistics</li> <li>h. Evaluation measures including baseline measure of fruit and vegetable consumption.</li> <li>i. Comprehensive in scope</li> <li>j. Realistic in considering money and time</li> </ul>	Task Force	2/28/2014		Selection criteria established.	
11. Select Programs(s) based on selection.	Task Force	3/30/2014		Program(s) selected.	
12. Modify program(s) as needed.	Task Force	6/15/2014		Program(s) modified if needed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
<p>13. Develop Draft Implementation Plan to include:</p> <ul style="list-style-type: none"> <li>a. School Board approval</li> <li>b. Training presenters in curriculum</li> <li>c. Coordinating with local schools for scheduling</li> <li>d. Seek community partners for collaboration</li> <li>e. Permission slips</li> <li>f. Invitations</li> <li>g. Train staff</li> <li>h. Sponsor(s)</li> <li>i. Incentives</li> <li>j. Schedule</li> <li>k. Location</li> <li>l. Curriculum/handouts</li> <li>m. Media Campaign</li> <li>n. Evaluation measure(s)</li> <li>o. Re-survey of fruit and vegetable intake</li> </ul>	Task Force	6/15/2014		Draft implementation Plan developed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
14. Develop presentation for School Board to include: a. Multi-media needs b. Handouts c. Speaker(s) d. Location	Task Force	6/30/2014		Presentation developed.	
15. Schedule School Board presentation.	Task Force	6/30/2014		Presentation scheduled.	
16. Deliver School Board presentation.	Task Force	7/15/2014		<ul style="list-style-type: none"> <li>• Presentation delivered.</li> <li>• School Board approval.</li> <li>• List of meeting participants.</li> </ul>	
17. Modify program based on feedback from School Board.	Task Force	8/15/2014		Program modified.	
18. Modify implementation plan based on feedback from School Board presentation.	Task Force	8/15/2014		Implementation plan modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
19. Begin implementation plan.	Task Force	8/30/2014		<ul style="list-style-type: none"> <li>• Implementation plan started.</li> <li>• Data collected for 2014-2015 measure of fruit and vegetable consumption.</li> <li>• Program implemented.</li> <li>• Post-program data collected on fruit and vegetable consumption.</li> <li>• Other evaluation data collected.</li> </ul>	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
20. Evaluate and compare to baseline.	Task Force	6/30/2015		<ul style="list-style-type: none"> <li>Fruit and vegetable intake increased by 10% as compared to 2013-2014. Pre/post data collected as part of program</li> </ul>	
21. Evaluate and compare to FYTS 2012 obesity baseline.	Task Force	6/30/2015		Obese (i.e., at or above the 95th percentile for body mass index, by age and sex) Calhoun: 18.0% compared to state 11.1% (FYTS 2012)	
22. Determine Next Steps.	Task Force	6/30/2015		Next Steps determined.	

<b>Priority Issue:</b> Obesity					
<b>Goal:</b> Decrease obesity in Calhoun County.					
<b>Objective 3:</b> Increase percentage of adults who meet moderate activity by 5% from 33.5% to 38.5% by June 30, 2015.					
<b>Strategy 1:</b> Develop community physical fitness activities.					
<b>Baseline Measure/Source:</b> Adults who meet moderate physical activity recommendations Calhoun: 33.5% compared to state 34.6% (Florida BRFSS 2007)					
<b>Key Activities</b>	<b>Lead Role &amp; Community Resources</b>	<b>Target Date for Completion</b>	<b>Status of Progress</b>	<b>Evaluation Measure</b>	<b>Evaluation Results</b>
1. Form Task Force.	<ul style="list-style-type: none"> <li>• County Health Department (CHD)</li> <li>• Senior citizens</li> <li>• Extension Office</li> <li>• Business Leaders</li> <li>• Chamber of Commerce</li> <li>• Community and Faith Based Organizations</li> </ul>	9/30/2013		Task Force formed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
2. Review and revise Action Plan as needed.	Task Force	10/31/2013		Action Plan reviewed and revised.	
3. Research evidence based programs to include: a. Rural community focus. b. Curriculum c. Handouts d. Marketing/Community Awareness campaign with materials e. Presentation materials f. Evaluation measures.	Task Force	10/31/2013		Programs researched.	
4. Research grants opportunity.	Task Force	12/15/2013		Grant opportunity researched.	
5. Write and submit grants.	Task Force	1/30/2014		Grants written and submitted.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
6. Write Selection Criteria to include: <ul style="list-style-type: none"> <li>a. Rural community focus.</li> <li>b. Curriculum</li> <li>c. Handouts</li> <li>d. Marketing/Community Awareness campaign with materials</li> <li>e. Presentation materials</li> <li>f. Evaluation measures</li> <li>g. Is it realistic – money and time?</li> </ul>	Task Force	1/30/2014		Selection Criteria written.	
7. Select program(s) based on Selection Criteria.	Task Force	2/28/2014		Program(s) selected.	
8. Modify program(s).	Task Force	5/31/2014		Program(s) modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
9. Develop Draft Implementation to include: <ul style="list-style-type: none"> <li>a. Coordination with community partners.</li> <li>b. Media campaign.</li> <li>c. Train staff for program.</li> <li>d. Schedule</li> <li>e. Location</li> <li>f. Date/time</li> <li>g. Target groups.</li> <li>h. Evaluation measure.</li> <li>i. Curriculum/Handouts.</li> <li>j. Posters/flyers.</li> <li>k. Sponsor(s).</li> <li>l. Incentives.</li> <li>m. Educate and inform proposed participants.</li> </ul>	Task Force	5/31/2014		Draft implementation developed	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
10. Develop presentation to community organizations to include: a. Multi-media needs b. Handouts c. Speaker(s) d. Location. e. Evaluation of presentation.	Task Force	6/30/2014		Presentation developed.	
11. Schedule community organizations presentation.	Task Force	6/30/2014		Presentations scheduled.	
12. Deliver community organizations presentation.	Task Force	7/15/2014		<ul style="list-style-type: none"> <li>• Presentation delivered.</li> <li>• List of community participation at presentation.</li> <li>• Evaluation data collected.</li> </ul>	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
13. Analyze and summarize evaluation data from community organizations presentation.	Task Force	7/30/2014		Evaluation data summarized.	
14. Modify program based on evaluation if needed.	Task Force	8/15/2014		Program modified.	
15. Modify implementation plan based on evaluation if needed.	Task Force	8/15/2014		Implementation plan modified.	
16. Begin implement plan.	Task Force	8/30/2014		<ul style="list-style-type: none"> <li>• Implementation plan started.</li> <li>• Program delivered.</li> <li>• Participant data gathered.</li> <li>• Evaluation data collected.</li> </ul>	
17. Analyze and summarize data from all evaluations.	Task Force	5/30/2015		Data summarized.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
18. Evaluate and compare to baseline.	Task Force	6/30/2015		Increased moderate activity by 5% from 33.5% to 38.5% as compared to the 2007 BRFSS data.	
19. Determine Next Steps.	Task Force	6/30/2015		Next Steps determined.	

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<b>Priority Issue:</b> Poverty in Calhoun County.					
<b>Goal:</b> Reduce poverty in Calhoun County.					
<b>Objective:</b> Reduce poverty from 25.9% to 15.9% by August 31, 2016.					
<b>Strategy 1:</b> Develop financial management courses for high school.					
<b>Baseline Measure/Source:</b> Percent in Poverty Calhoun County, 2011 All ages in poverty 25.9% compared to state 17.0% Under age 18 in poverty 31.8% compared to state 25.1% Ages 5-17 in families in poverty 29.9% compared to state 23.5% (Florida Legislature Office of Economic and Demographic Research <a href="http://edr.state.fl.us">http://edr.state.fl.us</a> )					
<b>Key Activities</b>	<b>Lead Role &amp; Community Resources</b>	<b>Target Date for Completion</b>	<b>Status of Progress</b>	<b>Evaluation Measure</b>	<b>Evaluation Results</b>
1. Form Task Force.	<ul style="list-style-type: none"> <li>• School Superintendent</li> <li>• Financial Institution</li> <li>• IFAS</li> <li>• Department of Health (DOH)/Health Department</li> <li>• Chamber of Commerce</li> <li>• Calhoun County Sheriff Office</li> </ul>	8/1/2013		Task Force formed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
2. Review and revise Action Plan as needed.	Task Force	8/15/2013		Action Plan reviewed and revised.	
3. Research evidence based programs to include: a. Financial management curriculum b. Handouts/materials c. Rural community focus d. High school e. Evaluation measures f. Implementation plan/logistics g. Training for teachers h. Marketing/media campaign i. Presentation materials	Task Force	9/1/2013		Research completed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
<p>4. Research what Calhoun County high school is currently teaching about financial management to include:</p> <ul style="list-style-type: none"> <li>a. Obtain curriculum/materials.</li> <li>b. Develop list of contacts.</li> <li>c. Evaluation/tests</li> <li>d. Number of students in each grade level.</li> </ul>	Task Force	10/30/2013		<ul style="list-style-type: none"> <li>• Current high school curriculum obtained.</li> <li>• Data on student numbers collected.</li> </ul>	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
5. Establish Selection Criteria to include: <ul style="list-style-type: none"> <li>a. Success rate of program participants</li> <li>b. Affordability of program</li> <li>c. Applicable to Calhoun County</li> <li>d. Time/length of curriculum</li> <li>e. Focus of curriculum</li> <li>f. Financial management curriculum</li> <li>g. Handouts/materials</li> <li>h. Rural community focus</li> <li>i. Evaluation measures</li> <li>j. Implementation plan/logistics</li> <li>k. Training for teachers</li> <li>l. Marketing/media campaign</li> <li>m. Presentation materials</li> </ul>	Task Force	9/30/2013		Selection criteria established.	
6. Select program(s) based on Selection Criteria.	Task Force	10/30/2013		Program(s) selected.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
7. Modify program(s) as needed.	Task Force	12/30/2013		Program(s) modified.	
8. Develop Implementation Plan to include: <ul style="list-style-type: none"> <li>a. Curriculum/handouts</li> <li>b. Plan for 2014-2015 program delivery</li> <li>c. Plan for 2015-2016 program delivery</li> <li>d. Teacher training plan to include:           <ul style="list-style-type: none"> <li>i. Identify instructors</li> <li>ii. Location/timing of delivery of information</li> <li>iii. Train instructors</li> <li>iv. Provide materials</li> <li>v. Provide evaluation measures</li> </ul> </li> <li>e. Evaluation measures</li> <li>f. Schedule</li> <li>g. Sponsor(s)/Incentives</li> <li>h. Permission slips</li> <li>i. Logistical plan</li> </ul>	Task Force	2/28/2014		Implementation Plan developed.	

j. Marketing campaign					
Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
9. Develop Presentation for School Board to include: a. Need for program b. Program benefits c. Implementation Plan d. Multi-media needs e. Speaker(s) f. Handouts	Task Force	2/28/2014		Presentation developed.	
10. Schedule School Board Presentation.	Task Force	2/28/2014		Presentation scheduled.	
11. Deliver presentation to School Board.	Task Force	3/30/2014		<ul style="list-style-type: none"> <li>• Presentation delivered.</li> <li>• Approval obtained.</li> <li>• Feedback from School Board.</li> <li>• List of meeting participants.</li> </ul>	
12. Modify program based on School Board feedback, if needed.	Task Force	4/30/2014		Program modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
13. Modify 2014-2015 implementation plan based on School Board feedback, if needed.	Task Force	4/30/2014		Implementation plan modified.	
14. Repeat Steps 9-13 if needed.	Task Force	5/30/2014		Steps repeated and evaluation measures obtained.	
15. Begin 2014-2015 implementation plan.	Task Force	8/30/2014		<ul style="list-style-type: none"> <li>• Implementation plan started.</li> <li>• Program materials printed.</li> <li>• Teacher training conducted.</li> <li>• Students registered.</li> <li>• Program delivered.</li> <li>• Evaluation data collected.</li> </ul>	
16. Analyze and summarize data.	Task Force	6/30/2015		Evaluation data summarized.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
17. Collect poverty data from Florida Legislature Office for Economic & Demographic Research.	Task Force	6/30/2015		Calhoun and State rates for: All ages in poverty. Under age 18 in poverty. Ages 5-17 in families in poverty.	
18. Modify program based on data summary.	Task Force	7/30/2015		Program modified.	
19. Modify implementation plan for 2015-2016 based on data summary.	Task Force	7/30/2015		Implementation plan modified.	
20. Provide feedback to School Board if needed to include: a. Develop presentation b. Schedule presentation c. Deliver presentation	Task Force	7/30/2015		Feedback to School Board provided.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
21. Begin 2015-2016 implementation plan.		8/30/2015		Implementation plan started. Program materials printed. Teacher training conducted. Students registered. Program delivered. Evaluation data collected.	
22. Analyze and summarize data.	Task Force	6/30/2016		Evaluation data summarized.	
23. Collect poverty data from Florida Legislature Office for Economic & Demographic Research.	Task Force	6/30/2016		Calhoun and State rates for: All ages in poverty. Under age 18 in poverty. Ages 5-17 in families in poverty.	
24. Evaluate and compare to baseline for 2014-2015 and 2015-2016 programs.	Task Force	8/30/2016		Reduced poverty from 25.9% in 2011 to 15.9%.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
25. Provide feedback to School Board if needed to include: a. Develop presentation b. Schedule presentation c. Deliver presentation	Task Force	8/30/2016		Feedback to School Board provided.	
26. Determine Next Steps.	Task Force	8/30/2016		Next Steps determined.	

<b>Priority Issue:</b> Poverty					
<b>Goal:</b> Reduce poverty in Calhoun County.					
<b>Objective:</b> Reduce poverty from 25.9% to 15.9% by August 31, 2016.					
<b>Strategy 2:</b> Implement financial planning workshop for adults.					
<b>Baseline Measure/Source:</b> <u>Percent in Poverty Calhoun County, 2011</u> All ages in poverty 25.9% compared to state 17.0% Under age 18 in poverty 31.8% compared to state 25.1% Ages 5-17 in families in poverty 29.9% compared to state 23.5% Florida Legislature Office of Economic and Demographic Research <a href="http://edr.state.fl.us">http://edr.state.fl.us</a>					
<b>Key Activities</b>	<b>Lead Role &amp; Community Resources</b>	<b>Target Date for Completion</b>	<b>Status of Progress</b>	<b>Evaluation Measure</b>	<b>Evaluation Results</b>
1. Form Task Force.	<ul style="list-style-type: none"> <li>• Partner with library</li> <li>• Workforce development</li> <li>• Chamber of Commerce</li> <li>• BOCC</li> <li>• Department of Health (DOC)/Health Department</li> </ul>	8/1/2013		Task Force formed.	
2. Review and revise Action Plan as needed.	Task Force	8/15/2013		Action plan reviewed/revise.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
3. Research evidence based programs to include: <ul style="list-style-type: none"> <li>a. Focus on entry level financial management and planning</li> <li>b. Rural community</li> <li>c. Handouts/materials</li> <li>d. Rural community focus</li> <li>e. Evaluation measures</li> <li>f. Implementation plan/logistics</li> <li>g. Training for teachers</li> <li>h. Marketing/media campaign</li> <li>i. Presentation materials</li> </ul>	Task Force	9/1/2013		Research completed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
<p>4. Establish Selection Criteria to include:</p> <ul style="list-style-type: none"> <li>a. Success rate of program participants</li> <li>b. Affordability of program</li> <li>c. Applicable to Calhoun County</li> <li>d. Time/length of curriculum</li> <li>e. Focus of curriculum</li> <li>f. Financial management curriculum</li> <li>g. Handouts/materials</li> <li>h. Rural community focus</li> <li>i. Evaluation measures</li> <li>j. Implementation plan/logistics</li> <li>k. Training for teachers</li> <li>l. Marketing/media campaign</li> <li>m. Presentation materials</li> </ul>	Task Force	9/30/2013		Selection criteria established.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
5. Obtain information about current entry level financial management and planning programs being offered in Calhoun County through the library and workforce development to include: <ul style="list-style-type: none"> <li>a. Obtain curriculum/materials.</li> <li>b. Develop list of contacts.</li> <li>c. Evaluation/tests</li> <li>d. Number of participants.</li> <li>e. Success rate.</li> <li>f. Evaluation measures.</li> <li>g. Instructors.</li> </ul>	Task Force	10/30/2013		Information obtained.	
6. Select program(s) based on selection criteria.	Task Force	11/30/2013		Program(s) selected.	
7. Modify program(s) and/or integrate with current programs.	Task Force	3/30/2014		Program(s) modified and/or integrated.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
<p>8. Develop implementation Plan to include:</p> <ul style="list-style-type: none"> <li>a. Curriculum/handouts</li> <li>b. Plan for 2014-2015 program delivery</li> <li>c. Plan for 2015-2016 program delivery</li> <li>d. Instructor training plan to include: <ul style="list-style-type: none"> <li>i. Identify instructors</li> <li>ii. Location/timing of delivery of information</li> <li>iii. Train instructors</li> <li>iv. Provide materials</li> <li>v. Provide evaluation measures</li> </ul> </li> <li>e. Evaluation measures</li> <li>f. Schedule</li> <li>g. Sponsor(s)/Incentives</li> <li>h. Logistical plan</li> <li>i. Marketing campaign</li> <li>j. Media plan (Communication plan &amp; Marketing materials)</li> </ul>	Task Force	3/30/2014		Implementation Plan developed.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
9. Develop Presentation for community partners to include: <ul style="list-style-type: none"> <li>a. Need for program</li> <li>b. Program benefits</li> <li>c. Implementation Plan</li> <li>d. Multi-media needs</li> <li>e. Speaker(s)</li> <li>f. Handouts</li> </ul>	Task Force	4/30/2014		Presentation developed.	
10. Schedule Presentation to include: <ul style="list-style-type: none"> <li>a. Location</li> <li>b. Date/time</li> <li>c. Sponsor(s)</li> <li>d. Incentives</li> <li>e. Invitations</li> <li>f. Flyers/Posters</li> <li>g. Handouts</li> <li>h. Feedback form</li> </ul>	Task Force	4/30/2014		Presentation scheduled.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
11. Deliver presentation to community partners.	Task Force	5/30/2014		<ul style="list-style-type: none"> <li>• Presentation delivered.</li> <li>• Feedback from community partners.</li> <li>• List of meeting participants.</li> </ul>	
12. Modify program based on community partner feedback, if needed.	Task Force	6/30/2014		Program modified.	
13. Modify 2014-2015 implementation plan based on feedback, if needed.	Task Force	6/30/2014		Implementation plan modified.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
14. Begin 2014-2015 implementation plan.	Task Force	8/30/2014		<ul style="list-style-type: none"> <li>• Implementation plan started.</li> <li>• Program materials printed.</li> <li>• Instructor training conducted.</li> <li>• Participants registered.</li> <li>• Program delivered.</li> <li>• Evaluation data collected.</li> </ul>	
15. Analyze and summarize data.	Task Force	6/30/2015		Evaluation data summarized.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
16. Collect poverty data from Florida Legislature Office for Economic & Demographic Research.	Task Force	6/30/2015		Calhoun and State rates for: <ul style="list-style-type: none"> <li>• All ages in poverty.</li> <li>• Under age 18 in poverty.</li> <li>• Ages 5-17 in families in poverty.</li> </ul>	
17. Modify program based on data summary.	Task Force	7/30/2015		Program modified.	
18. Modify implementation plan for 2015-2016 based on data summary.	Task Force	7/30/2015		Implementation plan modified.	
19. Provide feedback to community partners if needed to include: <ol style="list-style-type: none"> <li>a. Develop presentation</li> <li>b. Schedule presentation</li> <li>c. Deliver presentation</li> </ol>	Task Force	7/30/2015		Feedback to School Board provided.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
20. Begin 2015-2016 implementation plan.		8/30/2015		<ul style="list-style-type: none"> <li>• Implementation plan started.</li> <li>• Program materials printed.</li> <li>• Instructor training conducted.</li> <li>• Participants registered.</li> <li>• Program delivered.</li> <li>• Evaluation data collected.</li> </ul>	
21. Analyze and summarize data.	Task Force	6/30/2016		Evaluation data summarized.	

Key Activities	Lead Role & Community Resources	Target Date for Completion	Status of Progress	Evaluation Measure	Evaluation Results
22. Collect poverty data from Florida Legislature Office for Economic & Demographic Research.	Task Force	6/30/2016		Calhoun and State rates for: <ul style="list-style-type: none"> <li>• All ages in poverty.</li> <li>• Under age 18 in poverty.</li> <li>• Ages 5-17 in families in poverty.</li> </ul>	
23. Evaluate and compare to baseline for 2014-2015 and 2015-2016 programs.	Task Force	8/30/2016		Reduced poverty from 25.9% in 2011 to 15.9%.	
24. Provide feedback to community partners if needed to include: <ol style="list-style-type: none"> <li>a. Develop presentation</li> <li>b. Schedule presentation</li> <li>c. Deliver presentation</li> </ol>	Task Force	8/30/2016		Feedback to School Board provided.	

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## ACTION PLAN LINKAGES

The Community Health Improvement Project planning is a long-term, systematic effort that addresses health problems on the basis of the results of community health assessment activities. This process follows the guidelines of the Mobilizing for Action through Planning and Partnerships (MAPP) model. MAPP was developed by the National Association of County and City Health Officials (NACCHO), in collaboration with the Centers for Disease Control and Prevention (CDC). MAPP provides a framework to create and implement a community health improvement plan that focuses on long-term strategies that address multiple factors that affect health in a community.

The Calhoun County CHIP identifies the priorities, goals, objectives, and strategies for the public health system within Calhoun County. Through the integrated efforts of the health department and community partners, the desired health outcomes can be addressed in a systematic and accountable manner.



This CHIP plan provides a framework to promote greater collaboration across the organization and with external community partners, supports a comprehensive approach to public health service delivery within the 10 Essential Services of Public Health, and provides leverage to address the needs of Calhoun County residents and the larger Florida Department of Health community.

Using the NACCHO model for strategic planning, this CHIP plan can be integrated with the Florida Department of Health in Calhoun County Strategic Plan, and is informed by the Community Health Assessment. The CHIP plan can serve as the guiding force for the health department's activities and direction for the next five years, as well as coordinate

community health partners' efforts within the three health issue areas. The strategies and activities identified in this plan are specific standards for achievement designed to evaluate and measure success and impact.

The CHIP plan is aligned with the following:

- **Florida Department of Health's State Health Improvement Plan 2012-2015**  
Representing the plan for the Florida public health system, this document enables the network of state and local health partners to target and integrate health improvement efforts.  
[http://www.doh.state.fl.us/Planning\\_eval/Strategic\\_Planning/SHIP/FloridaSHIP2012-2015.pdf](http://www.doh.state.fl.us/Planning_eval/Strategic_Planning/SHIP/FloridaSHIP2012-2015.pdf)
- **Healthy People 2020**  
This U.S. Department of Health and Human Services program provides 10-year objectives for improving the health of all U.S. residents.  
<http://www.healthypeople.gov/2020/Consortium/HP2020Framework.pdf>
- **National Prevention and Health Strategies 2011**  
Developed by the National Prevention Council at the U.S. Department of Health and Human Services, Office of the Surgeon General, 2011, these strategies aim to guide the nation in the most effective and achievable means for improving health and well-being.  
<http://www.surgeongeneral.gov/initiatives/prevention/index.html>

The tables on the following pages identify the linkages between the Calhoun County CHIP and each of the above referenced plans.

Alignment					
Calhoun County CHIP	Florida State Health Improvement Plan		Healthy People 2020		National Prevention Strategies
	Chronic Disease Prevention				
<p><b>Goal: Decrease obesity in Calhoun County.</b>  <b>Objective 1:</b> Increase fruit/vegetable intake in adults by 10% from 21.5% to 31.5% by June 30, 2015.</p> <p><b>Objective 2:</b> Decrease percentage of high school students reporting BMI at or above 95th% by 5% from 18% to 13% by June 30, 2015.</p> <p><b>Objective 3:</b> Increase percentage of adults who meet moderate activity by 5% from 33.5% to 38.5% by June 30, 2015.</p>	Goal CD1	Increase the percentage of adults and children who are a healthy weight.	Nutrition and Weight Status Goal	Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights.	Support research and programs that help people make healthy choices (e.g., understand how choices should be presented).
	Goal CD2	Increase access to resources that promote healthy behaviors.	Educational and Community-based Programs Goal	Increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and injury, improve health, and enhance quality of life.	<p>Provide tools, guidance, and best practices to promote positive early childhood and youth development and prevent child abuse.</p> <p>Support coordinated, comprehensive, and multicomponent programs and policies to encourage physical activity and physical education, especially in schools and early learning centers.</p> <p>Identify and address barriers to the dissemination and use of reliable health information.</p>

Alignment					
Calhoun County CHIP	Florida State Health Improvement Plan		Healthy People 2020		National Prevention Strategies
	<b>Community Redevelopment and Partnerships</b>				
<p><b>Goal: Reduce poverty in Calhoun County.</b>  <b>Objective:</b> Reduce poverty from 25.9% to 15.9% by August 31, 2016.  <b>Strategy 1:</b> Develop financial management courses for high school.  <b>Strategy 2:</b> Implement financial planning workshop for adults.</p>	Goal CR1	Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.	Environmental Health Goal	Promote health for all through a healthy environment.	Support and expand cross-sector activities to enhance access to high- quality education, jobs, economic opportunity, and opportunities for healthy living (e.g., access to parks, grocery stores, and safe neighborhoods).
			Educational and Community-based Programs Goal	Increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and injury, improve health, and enhance quality of life.	

Alignment					
Calhoun County CHIP	Florida State Health Improvement Plan		Healthy People 2020		National Prevention Strategies
	<b>Community Redevelopment and Partnerships</b>				
<b>Goal: Decrease obesity in Calhoun County.</b> <b>Goal: Reduce poverty in Calhoun County.</b>	Goal CR2	Build and revitalize communities so people can live healthy lives.	Social Determinants Goal	Create social and physical environments that promote good health for all.	Enhance capacity of state, tribal, local, and territorial governments to create healthy, livable, and sustainable communities (e.g., increase access to healthy food and opportunities for physical activity, revitalize brownfields, enhance alternative transportation options, and develop green facilities and buildings).

Alignment					
Calhoun County CHIP	Florida State Health Improvement Plan		Healthy People 2020		National Prevention Strategies
	Community Redevelopment and Partnerships				
<b>Goal: Decrease obesity in Calhoun County.</b> <b>Goal: Reduce poverty in Calhoun County.</b>	Goal CR3	Provide equal access to culturally and linguistically competent care.	Educational and Community-based Programs Goal	Increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and injury, improve health, and enhance quality of life.	Increase availability and use of prevention research to identify effective environmental, policy, and systems that reduce chronic diseases, promote safety, and eliminate health disparities.
					Identify and map high-need areas that experience health disparities and align existing resources to meet these needs.
					Increase dissemination and use of evidence-based health literacy practices and interventions.

## Community Health Improvement Plan: Next Steps

Community Health Improvement Plans (CHIPs) are detailed work plans that guide communities through their action steps in order to address priorities that have been defined in the community health profile through community input and review of local health data.

The Calhoun County Community Health Improvement Team developed three action plans for the key health issues of *Obesity* and *Poverty*.

These action plans:

- Provide a framework for planning the work needed to achieve the objectives;
- Provide justification as to why funds are needed and how they will be used, imparting credibility to the organization or agency;
- Provide a guide for accomplishing the work within the given time period; and
- Communicate specific action-oriented approaches and measures for impact which can be shared with all interested parties.

The Calhoun County Community Health Improvement Committee will work with other community health partners to implement and evaluate each action plan activity for success and impact. Implementation of the action plans will ultimately strengthen the public health infrastructure, enhance the planning, research and development of community health partnerships, and promote and support the health, well-being, and quality of life of Calhoun County residents. It is recommended that the Community Health Improvement Committee review the implementation on an annual basis to update the information and to continually, and collaboratively, improve the health of Calhoun County.



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# APPENDICES

Goals & Strategies

CHIP Workshop

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## **Appendix 1: Goals & Strategies Workshop– May 7, 2013**

### **Email to workshop participants**

Dear Community Health Partners:

We had a great Forces of Change workshop on April 9th, and had participation from a number of agencies in the Calhoun County community. We have 2 more workshops to go and need your help!

The Florida Department of Health, in partnership with the Calhoun Liberty Hospital, are working on the Community Health Improvement Plan for Calhoun County. Our next step is to review the health-associated data for both counties and identify strategic priorities and goals. The last workshop will involve creating an Action Plan for improving the health of community residents. Your experience and expertise is a critical! Please plan on attending both remaining workshops.

**PLEASE SAVE THESE DATES** (Calhoun County will be working together in these workshops):

May 7 (Tuesday) 9:00am - 2:00pm EST (includes working lunch) Strategic Priorities & Goals Workshop

May 23 (Thursday) 9:00am - 4:00pm EST (includes working lunch) CHIP Session

All workshops will be held at:

Veteran's Memorial Civic Center  
10405 NW Theo Jacobs Lane, Bristol, Florida 32321

NOTE: All times are Eastern Standard Time (EST).

For more information and to RSVP, contact Susan Chafin at [susan\\_chafin@doh.state.fl.us](mailto:susan_chafin@doh.state.fl.us) or call (850) 643-2145.

Thank you in advance. We look forward to working with you on this valuable project!

## Workshop Participants

**Calhoun County Community Health Improvement Project  
Goals & Strategies Workshop  
May 7, 2013 Sign-In Sheet**

<b>Name/Title</b>	<b>Organization</b>
Nathan Ebersole	Calhoun-Liberty Hospital
Suzanne Mason	Calhoun County School District
Kristy Terry	Calhoun County Chamber
Carolyn Harper	Department of Corrections
Dr. Moses Izuegbu	Department of Corrections
Peggy Deason-Howland, RN	Florida Department of Health – Calhoun & Liberty Counties Healthy Start
Susan Chafin	Florida Department of Health – Calhoun & Liberty Counties
Melissa L’Heureux	Florida Department of Health – Calhoun & Liberty Counties
Rhonda Lewis	Liberty County Emergency Management
Sharon Gaskin	North Florida Child Development, Inc.
Curtis Green	North Florida Child Development, Inc.
Regina Burgess, Liberty County Branch Manager	Northwest Regional Library System
Norrie Chumley, Diabetes Clinical Coordinator, PAHN	Panhandle Area Health Network
Dan Yoder	Retired/Rivertown Community Church
Donnie Read	Twin Oaks Juvenile Development

## Workshop Agenda



### Calhoun County Community Health Improvement Project:

#### *Forces of Change Workshop*

#### May 7, 2013 Agenda

May 7, Tuesday – 9:00am-2:00pm  
Florida Department of Health in Calhoun County  
Veteran's Memorial Civic Center  
10405 NW Theo Jacobs Lane, Bristol, Florida 32321

- |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>9:00am - 9:15am</b>   | <b>Introductions &amp; Workshop Logistics Review</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>9:15am – 9:45am</b>   | <b>Participants will review Calhoun County data for health issues</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>9:45am - 10:15am</b>  | <b>Participants will identify key health issues</b> <ul style="list-style-type: none"><li>• Based on their data review, participants will collaboratively group the health issues</li><li>• Participants will “name” the category for each grouped health issue</li></ul>                                                                                                                                                                                                                                                             |
| <b>10:15am – 10:45am</b> | <b>Participants will be assigned to workgroups to:</b> <ul style="list-style-type: none"><li>• Identify <u>Health Resources</u> - Identify all resources for achieving a Healthy Calhoun County (e.g., community groups, policies, funding, state/federal partners, etc.)</li><li>• Identify <u>Health Challenges</u> – Identify “<i>What gets in the way of achieving a Healthy Calhoun County?</i>” (e.g., insufficient resources, lack of community support, legal or policy impediments, or technological difficulties)</li></ul> |
| <b>10:45am – 11:15am</b> | <b>Strategic Planning</b> <ul style="list-style-type: none"><li>• Individuals will self-assign into an “Issue” workgroup</li><li>• Each workgroup will identify a <i>GOAL</i> statement for their issue(s)</li></ul>                                                                                                                                                                                                                                                                                                                  |
| <b>11:15am – 11:30am</b> | <b>Workgroup Round-Robin Review</b> <ul style="list-style-type: none"><li>• Workgroups will review results of other workgroups &amp; provide feedback</li></ul>                                                                                                                                                                                                                                                                                                                                                                       |

- 11:30am-12:00pm**                      **Lunch** (Lunch will be provided)  
Networking and community health partnership building.
- 12:00pm – 12:30pm**                      **Strategic Planning (continued)**
- Each workgroup will identify *STRATEGIES* to accomplish that *GOAL*
- 12:30pm – 12:45pm**                      **Workgroup Round-Robin Review**
- Workgroups will review & provide feedback for other workgroups
- 12:45pm – 1:15pm**                      **Strategic Planning (continued)**
- Workgroups will fine tune their GOAL statement and *STRATEGIES*
  - Workgroups will identify *BARRIERS* for each *STRATEGY*
- 1:15pm – 1:30pm**                      **Strategic Planning (continued)**
- Workgroups will complete the IMPLEMENTATION section of the Priorities/Strategies Plan
    - Estimated *TIMELINE*
    - *LEAD/TEAM MEMBERS*
    - *RESOURCES*
- 1:30pm - 1:45pm**                      **Workgroup Round-Robin Review**
- 1:45pm – 2:00pm**                      **Workshop Summary & Next Steps**

---

**KEY TERMS:** Goals and strategies provide a connection between the current reality (what the public health system and the community’s health looks like now) and the vision (what the public health system and community’s health will look like in the future).

**Goals**

- Broad, long-term aims that define the desired result associated with identified strategic issues.
- Set a common direction and understanding of the anticipated end result.

Example:

*Strategic issue:* How can the public health community ensure access to population-based and personal health care services?

*Goal:* All persons living in our community will have access to affordable quality health care.

**Strategies**

- Patterns of action, decisions, and policies that guide a local public health system toward a vision or goal.
- Broad statements that set a direction & communicate how the community will move in that direction.

*Example:*

*Strategic issue:* How can the public health community ensure access to population-based and personal health care services?

*Goal:* All persons living in our community will have access to high-quality, affordable health care.

*Strategies:*

1. Increase awareness of available services through the development of an online directory of area public health and health care organizations.
4. Develop the capacity to provide culturally and linguistically appropriate services.
5. Increase education and outreach efforts so that all residents are aware of the population-based and personal health care services available in the community.

For more information:

[http://www.doh.state.fl.us/compass/Resources/FieldGuide/2008\\_Version/6Goals.pdf](http://www.doh.state.fl.us/compass/Resources/FieldGuide/2008_Version/6Goals.pdf)

## **Workshop Summary Notes**

### **Health Issues & Do-able Activities**

#### **Alcohol and Substance Abuse**

- Births to teens 15-19(9)
- STD's
- ↑ rate of substance abuse
- ↑ alcohol use in teens
- Middle school alcohol use
- Substance abuse of students(3)
- Repeat births(2)
- Lack of supervision
- Criminal homicide
- Suicide
- Socio-economic only
- Population over 25 without diploma
- Sexual activity
- Child passenger killed in motor vehicle crash
- Mental health 12-18

#### **Doable**

- Continue education in schools on effects of alcohol abuse (6)
- Increase availability of entertainment/activities (1)
- Educate – completely
- Counseling made available
- Stop excusing substance abuse
- Tighten up access to alcohol

## **Educational Issues**

- ↑ # of adults with zero high school diploma(2)
- High school graduation rate(2)
- Learning environment absent 21 days+(2)
- High school diploma rate need improvement
- Lack of training on handling money
- V- Pre-K participation
- No high school education
- Children not promoted, elementary
- High school asthma
- Median household income
- Birth to mothers 15-19
- Birth to mothers born in other countries

### **Do-able**

- Calhoun – Liberty Vo-Tech (4)
- Promote the importance of education (3)
- Increase vocational programs (1)
- Increase educational funding(grants, scholar)
- Mentoring programs
- Encouraging community support of educators

## **Cancer**

- Cervical cancer death and incidence rate (4)
- Lung cancer
- ↑ rate colorectal cancer

### **Do-able**

- Education on the importance of lifestyle choices when you are young (5)
- Early detection screening (2)
- Annual exams
- Educate\*
- Explore environmental contributors to cancer – safety of water supply
- See 1-4 on tobacco
- Screening at local events

### **Cardiovascular Disease**

- Coronary heart disease (4)
- ↑ Stroke rate (2)
- Heart problems
- Awareness of risk factors for heart disease
- Chronic heart failure

#### **Do-able**

- Encourage healthy community (5)
- ↑ Interventions to ↑ compliance (2)
- ↑ Education/awareness of importance of lifestyle changes
- Promote physical activity (1)
- Education on healthy lifestyle and eating (1)
- More recreation, parks, etc.

### **Diabetes**

- Diabetes age adjusted death rate
- Diabetes(3)
- Awareness and information on diabetes
- ↑ DM rate

#### **Do-able**

- Encourage healthy community (4)
- Educate (3)
- Initiate ↑ # of community risk screenings (1)
- More parks, recreation, gyms, etc.
- Education on healthy foods – how to read food labeling
- Promote healthy food eating habits for students → school lunch programs

## **Domestic Violence**

- Domestic violence (2)

### **Do-able**

- Promote availability of resources
- Promote education
- Empowerment
- Educate law enforcement
- As income rises – violence decreases
- Education of pastors on how to deal with domestic violence
- Safe house

## **Health Insurance**

- Failure of care
- Ratio of primary physicians per reside is low
- No health insurance
- Uninsured
- Healthcare availability
- ↓ # of adults with health insurance
- Dental care
- Poor health of newborns
- Access to preventative dental care
- Births covered by Medicaid

### **Do-able**

- Encourage new industry (1)
- Manage affordability
- Educate on availability government health insurance programs (5)
- Improve the availability of specialists
  - Develop “Kid Care” program for adults
  - Develop local “Coops” to provide health uninsured

## **Obesity**

- Adults need more moderate physical activities (7)
- Obesity/overweight(7)
- Adults – no leisure-time activity (2)
- Adults need to consume more fruits and vegetables (2)
- Obesity in middle and high school students (2)
- Healthy food options
- Coronary heart disease
- Stroke
- Heart failure
- Lung cancer
- Cervical cancer
- Diabetes
- ↓ BF rates

## **Doable**

- Continue community based fitness programs (6)
- Initiate education beginning in pre-K – comprehensive involving families (1)
- Mandate physical education in all grades (1)
- Promote healthy eating through the school lunch programs (1)
- Praise fitness standards in workplace community based education/activities

### Poverty Level

- Median income
- Low income(below poverty) (2)
- Education and income
- ↓ low income , ↑ # living at poverty level
- ↑ poverty rate
- Annual wages
- Single parent households
- Employment opportunities

### Doable

- Stress importance of education to students (4)
- Encourage new industry (1)
- Vocational/technical education
- Make students aware of career opportunities
- Require or offer financial planning courses in high school

### Tobacco Use

- Smoking/tobacco use(6)
- Births to mothers who smoked during pregnancy(2)
- Lung cancer(2)Smoking rates
- Tobacco use among adults
- Chronic lower respiratory rate

### Do-able

- Continue school education programs (4)
- Educate (2)
- Promote availability of cessation programs (1)
- Cessation programs
- Continue funding for evidence-based programs
- Explore and implement new laws/ordinances that restrict tobacco use

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## Appendix 2: CHIP Workshop – May 23, 2013

### Email to workshop participants

We had a great workshop on May 7<sup>th</sup> – thank you to everyone who attended and participated in developing strategic goals and priorities. **Please be sure to bring back the data folders for Calhoun County. We will use these as we develop the Action Plans.**

The next step in our Community Health Improvement Planning Project is the final workshop where the Action Plan for improving the health of Calhoun County will be developed. We need your participation in this workshop in order to develop a realistic and action-oriented plan for implementation. Measures for impact and success will be detailed, and specific activities for achieving success will be identified.

Please join us on May 23rd - your experience and expertise is vital to this process. If you are unable to attend, please send a representative from your organization.

Lunch and snacks will be provided at the workshop. Please RSVP to Susan Chafin at [susan\\_chafin@doh.state.fl.us](mailto:susan_chafin@doh.state.fl.us), and let her know if you have any dietary restrictions.

**Date: CHIP Session May 23, 2013**

**Time:** 9:00am-4:00pm (EST)

**Location:** Veteran's Memorial Civic Center  
10405 NW Theo Jacobs Lane, Bristol, Florida 32321

Thank you in advance. We are looking forward to your valuable input at these workshops.

## CHIP Workshop Participants

**Florida Department of Health in Calhoun County  
Community Health Improvement Project  
CHIP Workshop  
May 23, 2013 Sign-In Sheet**

<b>Name/Title</b>	<b>Organization</b>
April Landrum	Apalachee Center
David Taylor	Chemical Addiction Recovery Effort (CARE)
Nathan Ebersole	Calhoun-Liberty Hospital
Kristy Terry	Calhoun County Chamber
Jim Pruette	Chipola Adolescent Pregnancy Prevention (CAPP)
Carolyn Harper	Department of Corrections
Dr. Moses Izuegbu	Department of Corrections
Sally S. Mayo, Senior Registered Nurse Supervisor	Department of Corrections
Diann Smith, Senior Health Services Administrator	Department of Corrections
Susan Chafin	Florida Department of Health – Calhoun & Liberty Counties
Kelly King	Florida Department of Health – Calhoun & Liberty Counties
Melissa L’Heureux	Florida Department of Health – Calhoun & Liberty Counties
Rachel Manspeaker	Florida Department of Health – Calhoun & Liberty Counties
Vanessa O’Neal	Healthy Start - Florida Department of Health – Calhoun & Liberty Counties
Rhonda Hall	Life Management Center
Curtis Green	North Florida Child Development, Inc.
Regina Burgess, Liberty County Branch Manager	Northwest Regional Library System
Norrie Chumley, Diabetes Clinical Coordinator, PAHN	Panhandle Area Health Network
Dan Yoder	Retired/Rivertown Community Church
Renee Crawford	Ruth Attaway CPA

## CHIP Workshop Agenda



### Calhoun County Community Health Improvement Project:

#### *CHIP Workshop*

#### May 23, 2013 Agenda

May 23, Thursday – 9:00am-4:00pm  
Florida Department of Health in Calhoun County  
Veteran's Memorial Civic Center  
10405 NW Theo Jacobs Lane, Bristol, Florida 32321

- |                          |                                                                                                                                                                                                                                                                                                             |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>9:00am – 9:15am</b>   | <b>Introductions</b><br><b>Workshop Logistics Review</b>                                                                                                                                                                                                                                                    |
| <b>9:15am - 9:45am</b>   | <b>Workgroup Assignments</b><br>Participants will be assigned to a workgroup to prioritize issues. <ul style="list-style-type: none"><li>☐ Review Strategic Priorities &amp; Goals from May 7, 2013 workshop</li><li>☐ Review Calhoun County Health data</li></ul>                                          |
| <b>9:45am – 10:15am</b>  | <b>Prioritize Goals</b> <ul style="list-style-type: none"><li>☐ Identify <i>Do-able</i> issues – Which Issues/Goals can be <u>realistically</u> impacted in the next 2 years?</li><li>☐ Identify <i>Barriers to Action</i> – What barriers <u>must be</u> addressed in order to impact the issue?</li></ul> |
| <b>10:15am – 10:30am</b> | <b>Group Decision Making</b> <ul style="list-style-type: none"><li>☐ Issues/goals will be prioritized using nominal group technique.</li><li>☐ Top 2-3 issues/goals for the County will be selected for development in the Community Health Improvement Plan.</li></ul>                                     |
| <b>10:30am – 10:45am</b> | <b>Goal for each Health Issue</b> <ul style="list-style-type: none"><li>☐ Participants will self-select into an issue and work together to develop a <i>Goal</i> for the issue.</li></ul>                                                                                                                   |
| <b>10:45am - 11:00am</b> | <b>Group Review of Goals</b> <ul style="list-style-type: none"><li>☐ Groups will review each other's work and provide feedback</li></ul>                                                                                                                                                                    |

<b>11:00am - 11:45am</b>	<p><b>SMART Objectives for each Goal (Issue)</b></p> <ul style="list-style-type: none"> <li>☐ Participants will develop SMART Objectives for the Goal</li> </ul>
<b>11:45am - 12:15pm</b>	<p><b>Lunch Break</b> (Lunch provided &amp; networking)</p>
<b>12:15pm – 12:45pm</b>	<p><b>SMART Objectives</b></p> <ul style="list-style-type: none"> <li>☐ Participants will review each other’s work and provide feedback.</li> <li>☐ Feedback will be used to refine Goal and SMART Objectives.</li> </ul>
<b>12:45pm – 1:30pm</b>	<p><b>ACTIVITIES for Action Plan</b></p> <ul style="list-style-type: none"> <li>☐ Each workgroup will identify the <i>ACTIVITIES</i> for each <i>OBJECTIVE</i> in their Action Plan.</li> </ul>
<b>1:30pm-1:45pm</b>	<p><b>Group Review</b></p> <ul style="list-style-type: none"> <li>☐ Workgroups will review each other’s work and provide feedback.</li> </ul>
<b>1:45pm – 2:30pm</b>	<p><b>Action Plan Completion</b></p> <ul style="list-style-type: none"> <li>☐ For each <i>OBJECTIVE</i> in their Action plan, workgroups will identify: <ul style="list-style-type: none"> <li>• Lead Role &amp; Community Resources</li> <li>• Target Date for Completion</li> <li>• Evaluation Measure.</li> <li>• <u>NOTE</u> – the Action Plan will end with measuring against the baseline measure to determine impact/success</li> </ul> </li> </ul>
<b>2:30pm – 3:00pm</b>	<p><b>Group Review</b></p> <ul style="list-style-type: none"> <li>☐ Workgroups will review each other’s work and provide feedback.</li> </ul>
<b>3:00pm – 3:30pm</b>	<p><b>Action Plan Final Revision</b></p> <ul style="list-style-type: none"> <li>☐ Based on feedback, workgroups will finalize their Action Plan(s).</li> </ul>
<b>3:30pm – 3:45pm Summary</b>	<p><b>Community Health Improvement Plan Workshop</b></p>

## Next Steps

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A Community Health Improvement Plan (CHIP) has been defined as “a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process.”

### **CHIP:**

- ☐ Serves to address issues, roles, and common goals and objectives throughout the community.
- ☐ Is used to coordinate efforts and target resources that promote health.
- ☐ Guides action and monitors and measures progress toward achievement of goals and objectives.
- ☐ Often used as justification for support of certain public health initiatives, as part of funding proposals, and for attracting other resources toward building programs that improve the overall quality of life of the community.

### **GOAL:**

- ☐ Broad, long-term aims that define the desired result associated with identified strategic issues.
- ☐ Set a common direction and understanding of the anticipated end result.

#### Example:

*Strategic issue:* Access to population-based and personal health care services.

*Goal:* All persons living in our community will have access to affordable quality health care.

## **S-M-A-R-T Objectives**

**S**pecific means that the outcome is concrete, detailed, focused and well defined.

**M**easurable outcomes include units for counting, which determines quantity and comparison.

**A**chievable outcomes are feasible, reasonable and actionable.

**R**ealistic outcomes add value or contribute to the accomplishment of the goal.

**T**ime limited means there is a deadline(s) for completion.

Example:

*Strategic issue:* Access to population-based and personal health care services

*Goal:* All persons living in our community will have access to affordable quality health care.

*Objective:*

1. Develop an online directory of area public health and health care organizations by June 30, 2014.
2. Advertise the online directory to community residents at 100% of county facilities (e.g., schools, library, government offices) and primary care and health care facilities by December 30, 2014.

## CHIP Workshop Summary Notes - Other Issues

### **Tobacco and Substance Abuse**

- Role model to visit schools
- Continue education in schools on affects of alcohol and substance abuse.
- Community based cessation classes.
- Retail education/ sting operation.
- Partnering with local hospitals/area resources to try to bring into communities.
- Promote more education and financial import of smoking/substance abuse.
- Community based programs that encourage and facilitate role models in the schools.
- Community based educational workshops, seminars, programs, etc involving tobacco and drug abuse.
- Starting focused clubs early in school focusing on students against tobacco, alcohol, illicit substances. Cooperating with community partners to cover all basis.
- Resolution to band synthetic drugs.
- Education on the affects.

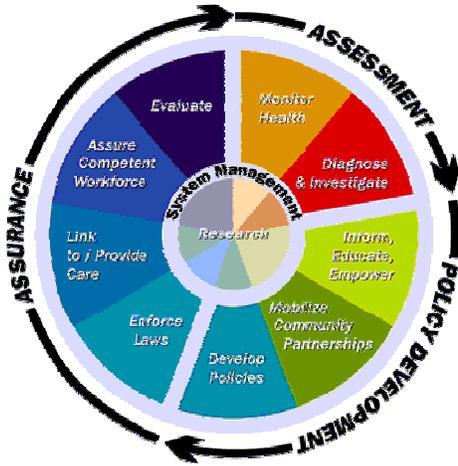
### **Alcohol and Substance Abuse**

- Re-incorporate the "MADD" "SADD" SAIS clubs at high school/ middle school levels to include public awareness/ outing fundraisers.
- Screening tools implemented in software with hospital clinics primary care to determine proactive concepts to offer assistance.
- Additional AA/NA mtg. opportunities.
- Resolution to band synthetic drugs.
- Education in schools of the effects.
- Education regarding financial input of substance/ drug abuse.
- Priority with local area resources in our community.
- Provide opportunities for different providers to go into schools to educate re: SA and MH issues.
- Address the culture of silence beginning @ secondary level and post community- include parents and have babysitting available.
- Increase "free" "fun" activities/ entertainment.
- Retail education- underage.

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From:

<http://www.naccho.org/topics/infrastructure/CHAIP/index.cfm>



The fundamental purpose of public health is defined by three core functions: assessment, policy development and assurance. Community Health Improvement Plans (CHIPs) provide information for problem and asset identification and policy formulation, implementation, and evaluation. CHIPs also help measure how well a public health system is fulfilling its assurance function.

A CHIP is part of an ongoing broad community health improvement process. A community health improvement process uses CHA data to identify priority issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement, which are often outlined in the form of a Community Health Improvement Plan (CHIP).

The Public Health Accreditation Board's (PHAB's) voluntary, national public health department accreditation program is designed to document the capacity of a public health department to deliver the three core functions of public health and the Ten Essential Public Health Services. PHAB requires completion of a CHA and a CHIP as two of three prerequisites to accreditation program application.



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