

The Partnership for a Healthy Delaware County 2019-2022 CHIP Planning Meeting #2

July 17, 2018

10:00AM – 2:00PM

Ohio Health Grady Memorial Hospital

561 W. Central Avenue, Delaware, Ohio 43015



MEETING MINUTES

PRESENT:

- **Armstrong, Jana** – *Hospital Council of Northwest Ohio*
- **Benishek, Tony** – *Preservation Parks of Delaware County*
- **Blayney, Pat** – *Delaware General Health District Board of Health*
- **Bonnette, Josie** – *Delaware General Health District*
- **Briant, Mitchell** – *Big Brothers Big Sisters*
- **Coy, Sgt. Jennifer** - *Delaware County Jail*
- **Cuciak, Daniel** - *Southeast Healthcare*
- **Fink, Christopher** – *Ohio Wesleyan University*
- **Hatcher, Officer Robert** – *Delaware Police Department*
- **Held, Judy** - *Physician*
- **Hiddleston, Shelia** – *Delaware General Health District*
- **Hill, Amy** - *Delaware-Morrow Mental Health Recovery Services Board*
- **Kannally, Lori** - *Delaware General Health District*
- **Kocher, Tiffany** – *Recovery & Prevention Resources of Delaware & Morrow Counties*
- **Kuhlman, Kelsey** – *Delaware General Health District*
- **Lane, Heather** - *Delaware General Health District*
- **McGarity, Nicole** - *Mount Carmel Lewis Center*
- **Moore, Adam** – *Delaware Police Department*
- **Neff, Kassie** - *Delaware County Sheriff's Office*
- **Nieset, Erin** – *Grady Memorial Hospital*
- **Nietfeld, Kristin** – *Nationwide Childrens Hospital*
- **Norman, Samantha** – *Olentangy Local School District*
- **Norris, Andrea** – *Liberty Twp / Powell YMCA*
- **Pickelheimer, Melissa** - *OhioHealth*
- **Pierson, Brian** - *Mount Carmel Health*
- **Rauschenberg, Erin** - *Hospital Council of Northwest Ohio*
- **Sanders, Scott** - *Regional Planning Commission*
- **Shrock, Ruth** - *Resident Genoa Twp.*
- **Stearns, Emily** - *Hospital Council of Northwest Ohio*
- **Stults, Sandra** - *Scioto Twp.*
- **Sullivan, Chase** - *Syntero*
- **Trimble, Abbey** - *Delaware General Health District*
- **Larry Walters** – *Community Resident*

- **Waugh, Fara** – *SourcePoint*
- **Wiest, Lily** – *Delaware City Family Resource Center*
- **Wing, Monica** – *Delaware General Health District*

ABSENT:

- **Fields, Avere** - *Columbus State Community College Delaware*
- **Kegley, Heidi** – *Delaware City Schools (Excused)*

WELCOME – Christopher Fink, Ohio Wesleyan University & Lori Kannally, Delaware General Health District

INDIVIDUAL INTRODUCTIONS – All Present

Handouts provided by Hospital Council of Northwest Ohio:

- *Local Public Health System Performance Assessment Instrument, Version 3.0*
- *2018 Delaware County CHIP Ranking Key Issues*
- *Local Public Health System Assessment Response Options*
- *Community Themes and Strengths: Open-Ended Questions to Committee*
- *Forces of Change Brainstorming Worksheet*
- *Quality of Life Survey*

Emily Stearns, Health Improvement Coordinator of Hospital Council of Northwest Ohio (HCNO) – Emily is leading The Partnership through all of the CHIP meetings. We will be reviewing our priorities today. We will start by going over the Local Public Health System Performance Assessment Instrument. During the last two assessments, we will break out into small groups. Emily reviewed the CHIP planning process timeline – The Partnership chose priorities at the last meeting and ranked the data. The Quality of Life Survey was sent out last week, and we already have 185 surveys returned! We will be completing all of the surveys for the MAPP process. We will be discussing gaps and strategies at the third CHIP meeting, and we will have a draft plan at our fourth meeting.

2018 DELAWARE COUNTY CHIP RANKING KEY ISSUES

These health issues were ranked from Survey Monkey at the last meeting. Emily will put the rankings in the final report.

The rankings were as follows:

Health Issue	Average Score
Mental Health (includes depression and suicide)	22.2
Opiates	21.6
Chronic Pain	20.1
Access to Care	19.4
Chronic Disease (includes diabetes and heart disease)	19.2
Weight Status	18.1

Bullying	18.1
Alcohol Consumption	17.2
Food Access	16.8
Tobacco Use	16.4
Abuse/Trauma	16.0

Delaware County will focus on the following two priorities over the next four years:

1. Chronic Disease

- Adult, youth and childhood obesity
- Diabetes
- Heart disease
- Chronic pain

2. Mental Health and Addiction

- Youth and child bullying
- Adult and youth alcohol consumption
- Adult and youth tobacco use
- Adult and youth opiate use
- Adult chronic pain (NOTE: Need to have a discussion on this. Where do we want it to be? Under Chronic Disease or Mental Health and Addiction?)

QUESTION: If it was a cross-cutting strategy, how might that look?

ANSWER: It would not have to be a specific. It could be placed under “Access to Care” or “Transportation.” Access to Healthcare and Social Determinants of Health are under cross-cutting.

Chronic Disease

A discussion occurred regarding diabetes and heart disease. The State tracks diabetes and heart disease, so we need to measure these two areas. Under Chronic Disease, there are so many health issues that are cross-cutting. It was decided to list out diabetes and heart disease under Chronic Disease.

Food Insecurity

Food Insecurity was a priority in the last CHIP. Discussion was held on whether food insecurity should be listed as a health issue under the Chronic Disease priority or if it should be a cross-cutting strategy. The Hunger Alliance will continue to operate and focus on food insecurity whether it is listed as a priority or not. Food access could be under Access to Care or be cross-cutting as a social determinant. It was decided to put Food Access as a sub-category under the cross-cutting strategies. **Action Item: Emily will send an updated document to Lori on Chronic Disease and Food Insecurity.**

QUESTION: About the required measurement reporting to the State—do we get to select which two measurements that we report on, or do we have to report everything that we are going to measure?

ANSWER: No, you actually just have to choose one, so you don’t have to choose to report on everything that they are doing. We most likely will have that summary in your plan just because these are such huge issues such as drug overdose deaths, suicide, depression. Emily has a feeling that all of these will show up as something that we are measuring, but they only

need to see one. So at the end of this, as long as you have that one, we are good to go. Delaware County is already doing a good job of tracking, even with the amount of action steps that we have. Delaware is doing an awesome job!

Emily explained that there are three over-arching priority topics that came from the State. Counties need to select, at a minimum, two of the three: Chronic Disease, Mental Health, or Maternal and Infant Health. Counties are required by law to have our CHIP match the state. Per Shelia Hiddleson, after everything is completed, the Health District would like to create a dashboard so that the community can see where we are. This dashboard can be shared with our partners to put on their websites as well.

MAPP PHASE 3: ASSESSMENTS

Local Public Health System Assessment (LPHSA):

The essential services were developed in 1994. There are 10 essential public health services that we will be reviewing today. All of our average scores will be sent out after today. The Health District pre-scored this assessment. Kelsey discussed how the Health District staff scored the LPHSA, and that we had already shared our assessment results with you via email. However, this does not mean that what we currently have to stay there. If you don't agree with something, this is our chance to change the score.

LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT RESPONSE OPTIONS:

Optimal Activity (76-100%)	The public health system is doing absolutely everything possible for this activity and there is no need for improvement.
Significant Activity (51-75%)	The public health system participates a great deal in this activity, and there is opportunity for minor improvement.
Moderate Activity (26-50%)	The public health system somewhat participates in this activity, and there is opportunity for greater improvement.
Minimal Activity (1-25%)	The public health system provides limited activity, and there is opportunity for substantial improvement.
No Activity (0%)	The public health system does not participate in this activity at all.

- **Essential Service #1 - Monitor Health Status to Identify Community Health Problems**
What is going on in our community? Do we know how healthy we are?
- **Essential Service #2 - Diagnose and Investigate Health Problems and Health Hazards in the Community**
Are we ready to respond to health problems or health hazards in our county? How quickly do we find out about problems? How effective is our response?
- **Essential Service #3 - Inform, Educate and Empower Individuals and Communities about Health Issues**
How well do we keep all segments of our community informed about health issues?

3.2.1 Develop health communication plans for media and public relations and for sharing information among LPHS organization?

DISCUSSION: Partnership messaging for the community. Delaware County Public Information Officer and the DGHD Public Information Officer belong to a Central Ohio group, the DGHD Physician Newsletter is sent out on a quarterly basis.

NOTE: Rating changed from “Significant” to “Optimal.”

3.2.3 Identify and train spokespersons on public health issues?

QUESTION: *What measurement is used? There is a big difference in developing a plan and getting the information into people’s homes. Not sure what the answer is.*

QUESTION: *What is meant when it says “Trained spokesperson on public health issues?”*

ANSWER: Per Shelia Hiddleston, DGHD staff is attending subdivision meetings and are well-versed on all subject matters.

NOTE: Rating changed from “Significant” to “Optimal.”

- **Essential Service #4 - Mobilize Community Partnerships to Identify and Solve Health Problems**

How well do we truly engage people in local health issues? Are we able to draw on the full range or potential human and material resources to improve community health?

DISCUSSION: **Per Emily Stearns from HCNO, many counties do not have a group like the Partnership to discuss issues with. Delaware County is easy to work with. We are significant here.**

NOTE: All responses were changed from “Significant” to “Optimal.”

- **Essential Service #5 - Develop Policies and Plans that Support Individuals and Community Health Efforts**

What local policies in both the government and private sector promote health in my community? How well are we setting healthy local policies?

NOTE: 5.1.3, 5.4.1, 5.4.2, and 5.4.3 were all changed from “Significant” to “Optimal.”

- **Essential Service #6 - Enforce Laws and Regulations that Protect Health and Ensure Safety**

When we enforce health regulations are we technically competent, fair and effective?

- **Essential Service #7 - Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable**

Are people in my community receiving the health services they need?

7.1.4 Understand the reasons that people do not get the care they need?

DISCUSSION: Brainstorm folks who are institutional. Tracy Sumer and Lori Kannally have discussed who is at the table and how to get them there. They have discussed churches and areas of poverty—will go and meet with people and let them know what we are doing here. Per Shelia, she would not move us to “Minimum” due to the many coalitions that the Health District facilitates.

NOTE: Changed from “Significant” to “Moderate.”

7.2.4 Coordinate the delivery of personal health and social services so that everyone has access to the care they need?

DISCUSSION: In terms of coordinating delivery of personal health services and communicating among clients, and in ping-ponging them from source to source (for example, schools and family backpacks for food), we have very “at-risk families.” Service coordination may need to be a cross-cutting factor.

NOTE: Changed from “Significant” to “Moderate.”

- **Essential Service #8 - Assure a Competent Public and Personal Health Care Workforce**
Do we have competent staff? How can we be sure our staff stays current?

8.1.3 Provide information from the workforce assessment to other community organizations and groups, including governing bodies and public and private agencies, for use in their organizational planning?

DISCUSSION: Council on Linkages—Most of the Health District staff scored in the 3s for most things although we did have some 2s that represents “I have some knowledge of that subject.”

NOTE: Changed from “Significant” to “Moderate.”

- **Essential Service #9 - Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services**

Are we meeting the needs of the population we serve? Are we doing things right? Are we doing the right things?

9.1.3 Identify gaps in the provision of population-based health services?

NOTE: Changed from “Significant” to “Moderate.”

9.1.4 Use evaluation findings to improve plans, processes, and services?

NOTE: Changed from “Significant” to “Moderate.”

9.2.2 Compare the quality of personal health services to established guidelines?

DISCUSSION: All of our hospitals are accredited. They are winning all kinds of awards as well as our Sheriff’s Department.

NOTE: Changed from “Significant” to “Optimal.”

9.2.3 Measure satisfaction with personal health services?

NOTE: Changed from “Significant” to “Optimal.”

- **Essential Service #10 - Research for New Insights and Innovative Solutions to Health Problems**

Are we discovering and using new ways to get the job done?

Emily thanked the Health District for taking the time to score the LPHSA prior to the meeting. Emily will take all of this information and the information obtained from the group at the meeting today and put it into the report.

Other Assessments:

Emily explained the “Community Themes & Strengths” assessment and the “Forces of Change” assessment. Those in attendance worked together in groups to answer and complete “The

Forces of Change Brainstorming” Worksheet and “Community Themes and Strengths: Open-Ended Questions to Committee” Worksheet. Each group reported out on their outcomes. Emily will compile the results from both of these assessments into the report as well.

Next Steps

Action item: All partners should send out the Quality of Life survey to their community partners to take. Please make them aware that the average time to take the survey is three minutes.

The next meeting will be held on Tuesday, August 7, 2018 from 10:00AM-2:00PM at OhioHealth Grady Memorial Hospital, MOB Room 1. We will be getting into groups and discuss subsets under other areas and will bring potential strategies. This meeting is very important. Please attend!

Lori Kannally and Christopher Fink thanked everyone for attending and giving their time and for participating in all of the exercises. If you need anything, please reach out to Lori.

The meeting ended at 1:50PM.

Respectfully Submitted by: Monica Wing, Administrative Assistant III, Delaware General Health District