

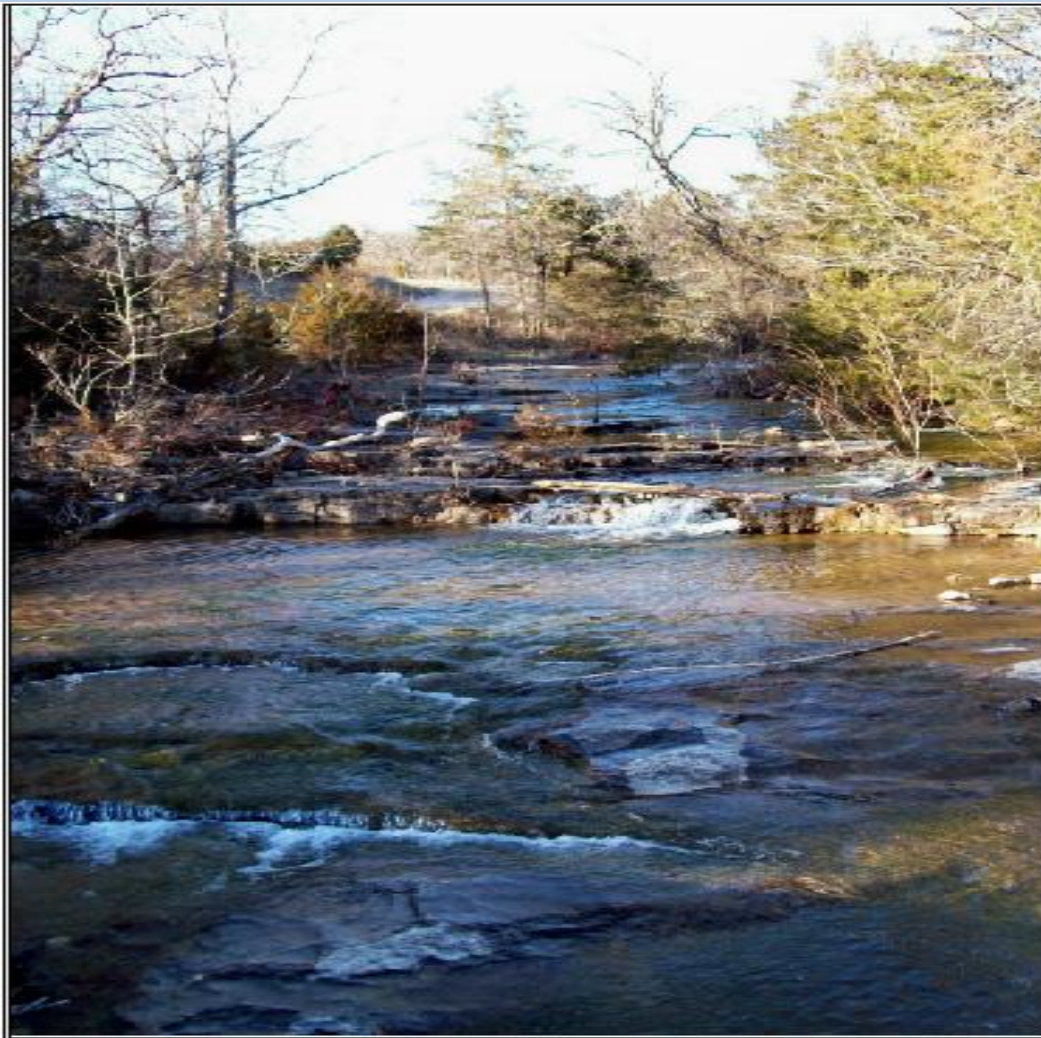
TANEY COUNTY

2012 Community Health Improvement Plan (CHIP)



Public Health
Prevent. Promote. Protect.

Taney County Health Department
An Accredited Local Public Health Department



November 8, 2012

CHIP Committee Member Organizations

ADAPT-Alcohol Drug Abuse Prevention Team
Boys and Girls Club
Branson Rec Plex
Branson Schools
Branson Senior Center
City of Branson
City of Hollister
Christian Action Ministries
Church Army
City of Hollister
College of the Ozarks
Community Representative
County Commissioner
Faith Community Health
City of Forsyth
Forsyth Schools
Forsyth Senior Friendship Center
Hollister Schools
Jesus Was Homeless
Missouri Extension
Open Horizons
Senior Tax Board
Skaggs Regional Medical Center
Taney County Ambulance District
Taney County Business Development Partnership
Taney County Health Department



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Taney County
Community Health Improvement Coalition (CHIC)

Vision and Values

VISION

The vision of the Community Health Improvement Coalition (CHIC) is to ensure individuals of Taney County have access to resources to achieve an optimum quality of life by continually providing and improving the health of the community.

VALUES

- *Promote child and family safety to all communities within the county*
- *Promote and collaborate with community partners to promote and strengthen exercise and nutritional programs for youths and adults within our community*
- *Support the work of the ADAPT coalition to reduce substance use/abuse and strengthen existing drug, tobacco and alcohol cessation programs*

The Strategic Planning Model



Taney County is located in the southwest corner of Missouri and is in the heart of Ozark Mountain Country. It is also home to the city of Branson, which is one of the most popular tourist destinations in the United States. Boasting a wide range of live music shows, restaurants and shopping locations, Taney County is also the home of Table Rock, Taneycomo and Bull Shoals Lakes, and provides great outdoor recreation.

Executive Summary

The Community Health Improvement Coalition (CHIC) of Taney County is pleased to present the following Community Health Improvement Plan (CHIP) to residents, community organizations, and civic groups after engaging in a yearlong strategic planning process. The CHIC is comprised of over 20 member organizations and individuals who represent a cross-section of the community.

The Community Health Assessment (CHA) consists of both quantitative and qualitative data. Input was gathered from residents of Taney County, focus groups and community stakeholders. Other assessments involved gathering data on the health status of the community and the local public health system data, surveillance systems and statistical reports provided by the Missouri Department of Health and Senior Services.

The resulting data was presented to the CHIC, who assisted in identifying three issues as health priorities. They are:

- Unhealthy Body Weight due to poor nutrition
- Tobacco, Alcohol and Substance Abuse
- Child and Family Safety

Goals and objectives relating to three of these issues as well as suggested strategies, barriers and community resources comprise the Community Health Improvement Plan.

The next step in the process is a five year action plan during which the strategies that are most important will be implemented. Currently, focus groups composed of individuals and groups committed to improving the identified health issues are being organized. Many focus group members have been drawn from the Community Health Improvement Coalition.

The CHIP process is an effort toward community engagement in addressing the identified health priorities. No single organization has the resources needed to raise community health to an optimal level or even to maintain it at its current level.



Background/Methodology

The Community Health Improvement Plan (CHIP) is part of the Ten Essential Public Health Services, in particular Essential Service #4; Mobilize Community Partnerships to Identify and Solve Health Problems and Essential Service #5; Develop Policies and Plans that Support Individual and Community Health Efforts.

In February 2012, new performance standards for Taney County Public Health were adopted by the Community Health Improvement Coalition (CHIC) as *National Public Health Performance Standards Local Public Health Systems(NPHPSP)*.

The *Performance Standards* were built on existing minimum standards for local public health and added new standards of public health performance that are aligned with the nationally recognized Ten Essential Public Health Services established by the Core Public Health Functions. The Essential Services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems. These services include: monitoring community health status; mobilizing community partnerships to identify and solve health problems; developing policies and plans that support individual and community health efforts; assuring a competent public health workforce; research, evaluation and enforcement; emergency preparedness and response. The Taney County NPHPSP/CHIP process has been and will continue to be a major milestone in the movement toward an integrated systems approach for local public health.

The Community Health Improvement Coalition (CHIC) will explore community initiatives to promote healthier lifestyles within our community by using *The Guide to Community Preventive Services* for Community Preventive Services. The guide provides recommendations and findings about evidence based programs to improve public health and prevent diseases based on the review of over 200 community interventions. The coalition will use the guide to develop interventions for the priorities identified in the Community Health Assessment to include in the Community Health Improvement Plan.

The CHIC will follow a strategic planning model borrowed from *Mobilizing for Action through Planning and Partnerships* (MAPP). MAPP was developed by the Centers for Disease Control and Prevention and the National Association of County and City Health Officials (NACCHO). MAPP uses traditional strategic planning methods within its model. Strategic planning will assist the Community Health Improvement Coalition in effectively securing resources, matching needs with assets, responding to external circumstances, and anticipating and managing change, while establishing a long-term direction for the community. The MAPP model includes basic strategic planning concepts, such as visioning, an environmental scan, the identification of strategic issues, and formulation of strategies.

The ultimate goal is to implement the *Healthy Cities/Healthy Communities* framework, which is a process by which citizens create healthy communities. This framework will be used in planning and implementation using community action. Healthy Cities/Healthy Communities rely on two basic premises: A comprehensive view of health; and a commitment to health promotion.

Public Health Priority Issues

Health Priority #1

Unhealthy Body Weight due to Poor Nutrition

Priority Area: 1. Unhealthy Body Weight due to poor nutrition
<p>Goal: Decrease the percentage of individuals who have overweight and obese Body Mass Index (BMI) and increase initiatives in Taney County addressing nutrition and physical activity in all age groups by implementing Healthy People 2020 initiative.</p> <p>If diet and nutrition is not properly aligned with physical activity, weight may become an issue. Healthy People 2020 address diet/nutrition as well as physical activity in its goals and objectives. The goals of Healthy People 2020 are to improve access to healthy foods, especially for children, and to increase physical activity for all ages. The objective for Healthy People 2020 is to reduce the proportion of the population that is obese by 10% to 30.6% by 2020. Obesity, nutrition and overweight/obesity are listed as one of the “Winnable Battles” by the CDC, which advocates environmental and policy-level changes to facilitate healthy eating and physical activity levels.</p>
<p>Risk Factors: Unhealthy diet, physical inactivity, lack of education, low income/poverty, physical or functional disability, unmanaged stress, uninsured or underinsured</p>

Performance Measures		
How will action plans implemented make a difference?		
Short Term Indicators		Frequency
Attitudes and beliefs among parents and youth will be challenged due to the knowledge and skill obtained on risks of being overweight and/or obese		Annual
Readiness of families to eat healthy and exercise will help in reducing their risks due to being overweight/obese		Annual
Attitudes and beliefs among adults may be challenged due their norm behavior		Annual
Long Term Indicators		Frequency
Decrease in morbidity and mortality among children, youth and adults		Annual
Quality of life improvement for Taney County residents		Annual
Behavior changes among youth and adults will bring positive change to the families, friends and the community		Annual

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Strategy

Background: Obesity rate for Taney County is in line with Missouri and the U.S. for children and adults with percentages of 65, 65.8 and 64.5 respectively. According to the National Initiative for Children's Healthcare Quality, "Obesity constitutes a grave threat to the health and well-being of our nation, as rates have risen dramatically over the past decades with particularly strong impact on diverse and disadvantaged communities.

Source

Evidence Base

- Point-of-Decision (POD) prompts to facilitate healthy decision making regarding increasing physical activity and improving nutritional choices
- Buddy-system programs to promote physical activity and increase adherence to exercise programs
- Community-wide campaigns to help increase awareness and knowledge of detrimental health effects and resources in the community

Policy Change

Action Plan	Target Date	Resources Required	Lead person/ Organization	Anticipated Product or Result	Progress Notes
Activity					
Increase messages to community regarding low-cost and available resources for physical activity in Taney County, such as trails, parks and recreational facilities	April 2013	Funding Time Travel	Skaggs Medical Clinics Boys & Girls Club	Increase of county residents participating in physical activity and better nutritional habits	
Increase low cost health screenings per year at various locations in eastern Taney County	May 2013	Funding Time Travel Staff	Skaggs	Increase health screenings in the community	
Implement "Fuel it Up to Play 60" for 3 rd through 7 th graders	April 2013	Funding Time Travel Staff	Skaggs Boys & Girls Club YMCA	Provide education and programs for 3 rd to 7 th graders	
Increase awareness of programs and resources providing increased access to healthy food choices including access to farmer's markets, cooking healthy meals, etc.	December 2013	Funding Time Travel Staff	Skaggs TCHD	Community will have better knowledge on resources and access to healthier choices	

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Alignment with State/National Priorities			
Objective #	Taney County	Healthy People 2020	National Prevention Strategy
1	Increase access to healthy foods and activities	Reduce the proportion of adults who are obese	Increase access to healthy and affordable foods in communities
2	Provide targeted nutritional information to mothers of children at nutritional risk	Increase the contribution of total vegetables to the diets of the population aged two years and older	Help people recognize and make healthy food and beverage choices
3	Increase messages to community regarding low-cost and available resources for physical activity in Taney County	Reduce the proportion of adults who engage in no leisure-time physical activity	Facilitate access to safe, accessible, and affordable places for physical activity

Barriers
<ul style="list-style-type: none"> • Challenges may be faced regarding the lack of funding to be able to implement a mass media campaign or to be able to sustain it over time • Media Messages may not be culturally appropriate, and thus not fully adopted by some subgroups of the population • Access to TV and radio stations, magazines and other forms of advertising may be limited in some communities • Cost • Time constraints • Lack of knowledge • Attitude about nutrition/physical activity

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Resources Available

- Hiking trails (Branson, Empire, Hollister, etc.)
- Senior Tax Board
- Skaggs Health and Wellness Program
- City of Branson Health and Wellness Program
- Insurance Brokerage with Wellness Program options (Akers and Arney; Connell Insurance)
- Diabetes class for public; Medical Home Counseling for Medicaid
- Faith Community Health Clinic
- YMCA, Rec Plex, Roark Fitness, Curves, Anytime Fitness, Faith-based Gyms, School Resources (open gym, outside track)
- Boys and Girls Club-Programs focusing on nutrition, portion control, exercise
- Schools-nutrition, exercise programs
- Local Running Club (Turkey Trot, other local run/walks)
- City Parks Department (Branson, Forsyth, Hollister)
- Springfield Schools and Parks= SPARK Model
- "Take 60" Model
- 5-Food Groups approach for food distribution- CAM
- MU extension office
- Local Markets. Grocery Stores
- "Give Yourself 5" Model

Contributing Factors

Direct Contributing Factors

- Lack of Knowledge
- Lack of time
- Poor eating habits
- Lifestyle does not incorporate physical activity

Indirect Contributing Factors

- Unhealthy foods being advertised
- Lack of access to wholesome foods
- Lack of access to exercise facilities
- Role models
- Chronic illness
- Disabilities

Health Priority #2

Tobacco, Alcohol and Drug Abuse

Priority Area: 2. Tobacco, Alcohol and Drug Abuse
Goal: Reduce the use and abuse of Alcohol, Tobacco and other Drugs
Healthy People 2020 address substance abuse in a ten year national plan for improving the lives and the health of Americans. The goal is to “reduce substance abuse to protect the health, safety and quality of life for all, especially children”. Tobacco use is the leading cause of death in the United States with an estimated 443,000 deaths each year which includes approximately 49,000 non-smokers exposed to secondhand smoke.
Risk Factors: Youth including those under 18, isolation and loss, parental and/or peer use of tobacco, alcohol and drugs.

Performance Measures		
How will action plans implemented make a difference?		
Short Term Indicators		Frequency
Attitudes and beliefs among parent and youth will be challenged due to the knowledge and skill obtained on second hand smoke		<i>Annual</i>
Readiness of families to quit smoking will help in tobacco cessation		<i>Annual</i>
Attitudes and beliefs among adults will be challenged due to substance abuse awareness and cessation		<i>Annual</i>
Access to cessation programs for individuals in the county who need the services at a reduced or low cost		<i>Annual</i>
Long Term Indicators		Frequency
Decrease in morbidity and mortality among children, youth and adults		<i>Annual</i>
Quality of life will improve		<i>Annual</i>
Behavior changes among youth and adults will bring positive change to the families, friends and the community		<i>Annual</i>

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Objective:

Background: Tobacco use is the leading cause of death in the United States with an estimated 443,000 deaths each year which includes approximately 49,000 non-smokers exposed to secondhand smoke. Smoking tobacco has been associated with an increased risk of stroke, heart disease, chronic obstructive pulmonary disease, and several forms of cancer. Smokeless tobacco has also been associated with an increased risk of oral cancer, pancreatic cancer, and cardiovascular disease. The Leading Health Indicators for Healthy People 2020 for substance abuse are: to reduce the proportion of adolescents reporting use of alcohol, marijuana or illicit drugs and reduce the proportion of people of all ages engaging in binge drinking.

2007 County Level Study:

Taney County 381 interviewed

- 36.5% currently smoked
- 2.9% used smokeless tobacco
- 22.5% were former smokers

Missouri, 49,019 interviewed

- 23.2% currently smoked
- 3.9% used smokeless tobacco
- 25.1% were former smokers

Evidence Based- Intervention MICA was used to assess evidence based interventions and practices.

Policy Change (Y/N)

Action Plan					
Activity	Target Date	Resources Required	Lead person/ Organization	Anticipated Product or Result	Progress Notes
Increase awareness of dangers of second-hand smoke in the community	March 2013	Funding Time Travel	ADAPT	Increase awareness of the dangers of second-hand smoke in the community	
Increase messages to community regarding low-cost and available resources for smoking cessation in the area	March 2013	Funding Time Travel	ADAPT Skaggs Clinics Boys & Girls Club	More smokers will use resources available to aid in quitting smoking	

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To provide education to the community regarding available resources for smoking cessation	November 2013	Funding Time Travel	ADAPT Skaggs	Cessation programs will increase by 5%	
To decrease the rates of adults and children in the county who use tobacco products by 10%	April 2017	Funding Time Travel	ADAPT Skaggs Boys & Girls Club	10% decrease of children and adults who use tobacco products	
Substance Abuse Prevention -Compliance Checks -After Prom Event	August 2013	Funding Time Travel	ADAPT City of Branson Taney County	Community will be more aware of substance abuse prevention programs that are available in the community	

Alignment with State/National Priorities			
Objective #	Taney County	Healthy People 2020	National Prevention Strategy
1	Review tobacco use policies for community sites to identify opportunities for education and policy change	Reduce tobacco use by adolescents	Support communities to implement tobacco control interventions and policies
2	Support ADAPT to Increase messages to community regarding low-cost and available resources for smoking cessation in the area	Increase smoking cessation attempts by adult smokers	Make cessation services more accessible and available by implementing applicable provisions of the Affordable Care Act, including in government health care delivery sites
3	Increase awareness of dangers of second-hand smoke in the community	Reduce the proportion of nonsmokers exposed to secondhand smoke	Use media to educate and encourage people to live tobacco free

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Barriers

- Challenges may be faced regarding the lack of funding to be able to implement a mass media campaign or to be able to sustain it over time
- Political resistance may prohibit messages from being broadcast to the entire population (pro-tobacco groups, tobacco industry, etc.)
- Messages may not be culturally appropriate, and thus not fully adopted by some subgroups of the population
- It is difficult to determine whether media messages are reaching the population as intended, so understanding how to modify messages or keep them “fresh” is also challenging
- Often free advertising time slots on television and radio occur when there are few viewers or listeners available; therefore, efforts to take advantage of these lower cost alternatives may not reach the community of interest
- Challenges may also be faced regarding the lack of funding or other types of support from institutions, organizations or communities
- Attitudes about substance use/abuse
- Lag time in appearance of detrimental effects

Resources Available

- Boys and Girls Club
- Senior Board
- Skaggs MFH Grant Program: “Freedom from Smoking Model”, Cessation and Policy Change “Americans for Non-Smokers Right” Model
- Skaggs Smoking Cessation Class (limited, on-demand)
- School Anti-tobacco Club Programs
- Non-Smoking Restaurant Promotion
- Tobacco Videos from Washington University.
- MO Quit Lines
- DHSS resources
- Larry Simmering Recovery Center
- Skaggs Screening Program (Alcohol, drugs) in primary care
- SMART moves Boys and Girls club-meth abuse
- DARE in schools
- Annual Seminar for the Hispanic population about programs available
- Celebrate Recovery at the River in Forsyth
- Permanent prescription drug drop boxes-2 locations-Branson police and Taney County Sheriff Department in Forsyth
- Elks Club-Alcohol and drug prevention resources

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Contributing Factors	
Direct Contributing Factors	Indirect Contributing Factors
<ul style="list-style-type: none">• Peer pressure• Lack of knowledge/refusal skills• Lack of resiliency or developmental assets• Attitudes about substance use/abuse• Access to smoking materials and other substances• Addiction	<ul style="list-style-type: none">• Low self-esteem• Role models• Lack of family management skills• Lack of community support for the elderly• Lack of support for those quitting tobacco• Lack of smoking policies• Media portrayals of substance use

Health Priority #3

Child and Family Safety

Priority Area: 3. Child and Family Safety
<p>Goal: To provide education to the community regarding injury prevention, child safety and mental health among various age groups. Education will focus on fall injuries, motor vehicle injuries, self-inflicted injuries, and injuries related to unintentional accidents.</p> <ul style="list-style-type: none"> • Increase awareness of car seat use • Fall prevention • Seat belt usage • Child safety • Mental Health
Risk Factors: Unintentional injury or death, low income/poverty, physical disability, lack of control

Performance Measures		
How will action plans implemented make a difference?		
Short Term Indicators		
Attitudes and beliefs among parent and youth will be challenged due to the knowledge and skill acquired on family safety		<i>Annual</i>
Knowledge among seniors will increase on fall prevention strategies		<i>Annual</i>
Safety will become a concern for families		<i>Annual</i>
Long Term Indicators		
Decrease in morbidity and mortality among children, youth and adults regarding injuries, child safety and mental health		<i>Annual</i>
Quality of life for seniors will improve		<i>Annual</i>
Behavior changes will change and the word spread on prevention of SIDS, Falls and unintentional injuries for children and adults		<i>Annual</i>

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Objectives:

Background: Injuries are the leading cause of death for Americans ages 1 to 44, and a leading cause of disability for all ages, regardless of sex, race/ethnicity, or socioeconomic status. More than 180,000 people die from injuries each year, and approximately 1 in 10 sustains a nonfatal injury serious enough to be treated in a hospital emergency department.

Policy Change (Y/N)

Action Plan

Activity	Target Date	Resources Required	Lead person/ Organization	Anticipated Product or Result	Progress Notes
Senior Health and Safety	January 2015	Funding Time Travel	Skaggs TCHD Senior Center	Decrease the number of unintentional falls among seniors	
Child Safety	May 2013	Funding Time Travel	TCHD Skaggs	Increase the number of families who have the skills to use a child restraint system	
Seat belt usage	December 2014	Funding Time Travel	TCHD Skaggs Law Enforcement	Seat belt usage among county residents will increase	
Implement "Safe to Sleep" campaign and other child safety programs	April 2013	Funding Time Travel	TCHD Skaggs	Increase the knowledge of Taney County residents of the prevention of SIDS and other injuries to children under a year old	

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Alignment with State/National Priorities			
Objective #	Taney County	Healthy People 2020	National Prevention Strategy
1	Increase seat belt usage among residents of Taney County by 10%	Increase seat belt use by 10% by 2020. Target is 92.4%	Provide individuals and families with the knowledge, skills, and tools to make safe choices that prevent injuries
2	Increase and promote vehicle restraint systems among children in Taney County by 10%	Increase age appropriate vehicle restraint system use by 10%.	Provide individuals and families with the knowledge, skills, and tools to make safe choices that prevent injuries
3	Promote "Safe to Sleep" to reduce the risk of SIDS	Reduce unintentional suffocation deaths among infants 0 to 12 months by 10%	Provide individuals and families with the knowledge, skills, and tools to make safe choices that prevent injuries
4	Promote programs available to seniors on fall prevention	Reduce nonfatal unintentional/intentional injuries by 10%	Promote and strengthen policies and programs to prevent falls, especially among older adults
5	Increase access to mental health facilities	Increase the proportion of primary care facilities that provide mental health treatment onsite or by paid referral	Enhance coordination and integration of clinical, behavioral, and complementary health strategies

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Barriers

- With low-income populations, there are high dropout rates due to participants being too busy, disconnected phones, only wanting supplies and then dropping out afterwards.
- Individual information exchange interventions may not reach a variety of different types of populations in a community given limited access to individuals and/or availability of their personal information
- Challenges may be faced regarding the lack of funding to be able to implement a mass media campaign or to be able to sustain it over time
- Media Messages may not be culturally appropriate, and thus not fully adopted by some subgroups of the population
- Challenges may also be faced regarding the lack of funding or other types of support from institutions, organizations or communities
- Access to TV and radio stations, magazines and other forms of advertising may be limited in some communities

Resources Available

- TCHD-car seats for \$10
- Senior Tax Board
- Child birth safety at Skaggs
- Safe sleep for families-Skaggs and TCHD
- Mandated reporter training
- Public education for child safety
- The Women's Crisis Center
- Jacobs Ranch-kids that are abandoned
- Skaggs-Fall prevention-will conduct class upon request

Contributing Factors

Direct Contributing Factors

- Peer pressure
- Lack of knowledge/refusal skills
- Attitudes about child safety

Indirect Contributing Factors

- Low self-esteem
- Role models
- Lack of family management skills
- Lack of community support for the elderly