#### **Introduction:**

The Licking County Community Health Improvement Committee (CHIC) was established in 2010, and the inaugural Licking County Community Health Improvement Plan (CHIP) was finalized in 2011. CHIC member agencies worked to implement interventions to achieve the objectives established in the CHIP, and substantial progress was made in improving public health in Licking County as a result. The CHIP was evaluated by CHIC members, as was additional data collected as part of the Mobilizing for Action through Planning and Partnerships (MAPP) process. CHIC members are dedicated to implementing evidence-based strategies to address the county's top public health priorities. This includes utilizing the information and data contained in Healthy People 2020 and the National Prevention Strategy. Committee members will also utilize interventions contained in The Guide to Community Prevention Services. Below are the priorities and objectives for the second edition of the Licking County CHIP.

#### **Priority One: Tobacco Use**

Justification: Tobacco use, particularly, smoking has long been a public health issue in Licking County. There are a myriad of negative health consequences associated with tobacco use. In its 2012 Community Health Assessment (CHA), the Licking County Health Department (LCHD) found that 25% of adults in the county identified themselves as a smoker. This number represented a slight decrease from 27% in 2010. LCHD set an overarching goal to reduce the percentage of smokers to 13% by 2023, and work in this edition of the CHIP will work toward this goal. Maybe even more troubling than the adult smoking rate in the county is that 26% of high school students (grades 9-12) have identified themselves as smokers. Reducing the number of adolescent smokers will ultimately decrease the number of adult smokers, which will ultimately increase the quality of life of these individuals. CHIC members will work to reduce the adult smoking rate from 25% to 20%, and reduce the smoking rate of high school students in the county from 26% to 20%. Both will allow the county to progress toward the Health People 2020 objectives of 12% and 16% respectively. Tobacco free living is the top priority in the National Prevention Strategy, and promoting this type of lifestyle will improve the overall public health of Licking County.

Objective	Activities	Responsible	Timeframe	Evaluation	Outcomes
		Parties		Measures	
Increase access to evidence based tobacco cessation services.	Activity 1: Evaluate resident needs/wants for cessation programs	Tobacco Use Reduction Network	Activity 1: January 2015- December 2015	Activity 1: Completed evaluation results. Completed	

	Activity 2: Develop additional services based on evaluation  Activity 3: Train or hire additional Certified Tobacco Treatment Specialists		Activity 2: January 2016- December 2016 Activity 3: June 2016-June 2017	action plan to address cessation needs.  Activity 2: Additional services established.  Written protocols established.
Increase the number of 100% Tobacco-Free K-12 school policies by 3 by 2018.	Activity 1: Provide technical assistance to 3 Licking County school districts to update their district tobacco policies.  Activity 2: Assist school districts with policy communication and signage.	Tobacco Use Reduction Network	Activity 1: January 2015- December 2017  Activity 2: January 2015- December 2017	Activity 1: Copies of updated school tobacco policies  Activity 2: Copies of policy communication (newsletter articles, email blasts, etc.) and pictures of signs.
Increase the number of youth involved in tobacco prevention programs.	Activity 1: Establish baseline number of youth reached by LifeSkills, Project ALERT and stand.  Activity 2: LifeSkills and/or Project ALERT offered in all Licking County school districts by 2017.  Activity 3: Increase participation in Licking County stand groups by 20% by 2018.	Pathways, LCHD, Tobacco Use Reduction Network	Activity 1: January 2015 – May 2015  Activity 2: May 2015 – December 2017  Activity 3: March 2015- December 2018	Activity 1:  Activity 2: List of school districts receiving LifeSkills and/or Project ALERT will be kept each year.  Activity 3: Youth participation reported using attendance logs.

#### **Priority Two: Obesity**

<u>Justification:</u> The Licking County Health Department (LCHD) found that 40% of adults in Licking County were considered overweight and 29% of adults were considered obese in 2008. As part of its 2012 Community Health Assessment (CHA), LCHD found the number of overweight adults had fallen to 33%, however the number of obese adults rose to 33%. While significant

progress has been made in this area, obesity remains one of the public health priorities in Licking County. The Healthy People 2020 objective for obese adults is 30.5%, and the Licking County CHIP will align with this goal. Additionally, the incidence rate of Diabetes continues to rise in the county. A total of 14% of adults in the county were diabetics in 2012, compared to 10% in 2006. Obesity is a prominent risk factor for Diabetes, and CHIC members will work to not only educate current Diabetes suffers, but also those at risk of developing the disease. Doing so is follows guidance from the National Prevention Strategy to empower people with the necessary knowledge and understanding to make the necessary choices to improve their health.

Objective	Activities	Responsible Parties	Timeframe	Evaluation Measures	Outcomes
Increase access to affordable healthy food options.	Activity 1: Evaluate need for affordable healthy food options (CHANGE tool).  Activity 2: Develop plan to address access issues.  Activity 3: Increase by 3 the number of farmer's markets with EBT/WIC infrastructure.	Licking County Wellness Coalition	Activity 1: January 2015-June 2015 Activity 2: May 2015-December 2015 Activity 3: January 2015-December 2018	Activity 1: Evaluation report  Activity 2: Written action plan to address food access issues.  Activity 3: A list of farmer's markets accepting EBT/WIC.	
Increase access to affordable places for physical activity.	Activity 1: Evaluate need for affordable places for physical activity.  Activity 2: Develop plan to address access issues.  Activity 3: Provide technical assistance to worksites, schools	Licking County Wellness Coalition	Activity 1: January 2015-June 2015 Activity 2: May 2015-December 2015 Activity 3: January 2016-December 2018	Activity 1: Evaluation report  Activity 2: Written action plan to address physical activity access issues.  Activity 3: Will keep contact logs and list of	

	and community partners to increase physical activity.			organizations who have implemented strategies to increase physical activity.	
Increase the number of worksites in Licking County that have a worksite wellness program by 10% by 2018.	Activity 1: The number of "actual" worksite wellness programs in the county will be evaluated.  Activity 2: CHIC and LCWC members will collect data related to the benefits of existing worksite wellness programs and promote the benefits to encourage employers to adopt similar programs.  Activity 3: CHIC and LCWC members will provide technical assistance to companies adopting policies.	Licking County Wellness Coalition	Activity 1: January 2015- December 2015  Activity 2: January 2015-June 2016  Activity 3: June 2016-December 2018	Activity 1: A list of effectively implemented worksite wellness programs will be developed  Activity 2: A promotional flyer and list of best practices from implemented programs will be developed  Activity 3: A list of companies that adopt policies due to this effort will be developed and promoted.	

### **Priority Three: Improve Access to Affordable Health Care Services**

<u>Justification</u>: One of the Ten Essential Public Health Services involves linking people to necessary health services and providing services when they aren't available. With the implementation of the Affordable Care Act access to health care has increased, however additional education is needed to inform newly eligible individuals of options available to them. The percentage of Licking County residents reporting they did not have access to healthcare in 2006 was 9%. This number climbed to 15% in 2011, and currently stands at 13%. While lowering this number to 0% as is

stated in Healthy People 2020 may not be realistic during this cycle of the CHIP, work will be implemented to reduce this number through interventions implemented by CHIC members.

Objective	Activities	Responsible	Timeframe	Evaluation	
		Parties		Measures	
Evaluate the need for free/low cost adult preventative dental care in Licking County by 2018.	Activity 1: Collect data from 211 regarding number of calls for the Look Up Center and the number of calls for preventative dental care.  Activity 2: Review data collected as part of 2015 BRFSS  Activity 3: Determine if adequate data exists to fully evaluate if a low cost preventative dental option is necessary.	Access to Care Committee	Activity 1: January 2015- December 2017  Activity 2: January 2016- December 2016  Activity 3: January 2017- December 2017	Activity 1: Report analyzing data will be developed.  Activity 2: Data will be extracted from BRFSS and analyzed.  Activity 3: Final evaluation report will be developed and presented to CHIC members.	
Establish a patient navigator service for Licking County residents seeking medical needs by 2016	Activity 1: Recruit volunteers with a medical background to form a patient navigator network.  Activity 2: Establish a training program for volunteer patient navigators regarding the services available in Licking County.  Activity 3: Patient navigator volunteers will begin taking calls.	Access to Care Committee, Medical Reserve Corps	Activity 1: January 2015- June 2015  Activity 2: June 2015-December 2015  Activity 3: January 2016	Activity 1: Volunteers will be recruited through the Licking County MRC, and other volunteer networks.  Activity 2: Volunteers will work with CHIC members to develop a training protocol that will enable them to provide direction to medical services available in Licking County	

		Activity 3: Patient	
		navigators will begin	
		taking calls from the	
		public.	

#### **Priority Four: Chronic and Communicable Diseases**

Justification: In addition to working collaboratively to address priority public health issues, CHIC members also conduct surveillance activities to determine which chronic and communicable diseases are creating the negative health outcomes in the county. Through this surveillance network, data is collected and the most prominent diseases, both chronic and communicable, are identified. CHIC members evaluated the most recent data, and it was determined that objectives addressing cancer, diabetes, and sexually transmitted diseases, specifically chlamydia and gonorrhea, should be included in this edition of the CHIP. Incidence of all three diseases continue to rise, and as a result negatively impact public health in Licking County.

Objective	Activities	Responsible	Timeframe	Evaluation	Outcomes
-		Parties		Measures	
Develop interventions designed	Activity 1: Assist	LMH, LCWC,	Activity 1:	Activity 1: The	
to promote awareness and	employers with	LCHD	January 2015-	number of employers	
screening guidelines for colon	promoting colon cancer		December 2017	promoting colon	
cancer.	screening for their			cancer screenings will	
	employees		Activity 2:	be tracked and	
			January 2016-	recorded	
	Activity 2: Increase the		December 2017		
	number of physicians			Activity 2: The	
	who provide regular		Activity 3:	number of physicians	
	colon cancer screening		January 2017-	providing regular	
	reminders to their		December 2018	colon cancer	
	patients.			screenings to their	
				patients will be tracked	
				and recorded	

Increase awareness regarding increasing Chlamydia and Gonorrhea rates in Licking County by 2018	Activity 3: Develop a YouTube video or other online education tool that will target populations eligible for colon cancer screenings  Activity 1: Increase the number of individuals being tested for STDs in Licking County on a yearly basis through multiple clinic locations throughout Licking County.  Activity 2: Develop marketing campaign designed to increase screening rates among age groups with highest incidence rates.  Activity 3: Develop talking points/suggestions for physicians to speak to their patients regarding STD awareness and	Licking County STD Taskforce & Licking County MRC	Activity 1: January 2015- December 2018  Activity 2: January 2016- December 2018  Activity 3: January 2017- December 2018	Activity 3: Evidence-based materials will be used to develop video and video will be maintained.  Activity 1: STD clinic locations in county will be mapped with dates and times and provided to the public  Activity 2: Marketing materials will be maintained, as will the sources utilized for their development.  Activity 3: Materials developed for distribution to physicians will be maintained, as will the sources utilized for their development.	
Increase the number of Diabetics in Licking County that receive	screening.  Activity 1: Licking County Diabetes Forum	Licking County Diabetes Forum:	Activity 1: January 2015-	Activity 1: Attendance at the	
education related to the management of their disease.	(LCDF) will hold a minimum of 3 Diabetes education seminars in 2015.	Shari Gallup, OSU Extension Diane Kintner, LCHD, Teresa	January 2016  Activity 2: January 2016- January 2017	educational sessions will be tracked and evaluations will be completed.	
	Activity 2: LCDF will present at an LMH Grand Rounds session in	Knicely, LMH		Activity 2: Grand Rounds training will be documented and	

	order to stress the importance of Diabetes education in prevention and control of the disease so they can implement this approach in their practices.  Activity 3: LCDF will develop an online educational tool for Diabetics to access via the web.	Activity 3: January 2017- December 2018	evaluations will be completed.  Activity 3: Online tool will be developed, and hosted on a CHIC member website. The number of times the tool is accessed will be tracked.	
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### **Revision Table:**

CHIC members will review their progress throughout the planning cycle, and whenever this document is updated, reviewed or revised it will be documented. This will allow members and the public to ensure they are reviewing the most up to date version of the plan.

	Revision	Date of Revision	Section Revised	Person Completing Revision
-	1	10/2014	Document Created	Chad Brown
	2	11/2014	Document Approved	CHIC Members