

# FAIRFIELD COUNTY

**Community Health Improvement Plan 2023 - 2025** 

Released January 2023



In 2021, the Fairfield County Health Department in Fairfield County, Ohio entered into an agreement with Illuminology to develop a regional Community Health Improvement Plan (CHIP).

Before developing this CHIP, the Fairfield County Health Department participated in a collaborative effort to conduct a Community Health Assessment (CHA). This CHA was intended to help community stakeholders better understand the health needs and priorities of those who reside in Fairfield County. The final report of that effort can be accessed via the Fairfield County Health Department website (https://www.myfdh.org/pdf/2022-Fairfield-County-CHA-Report.pdf).

Public health professionals from the Fairfield County Health Department, along with leaders representing a diverse array of social service and community organizations, participated in large and small group discussions on September 28, 2022 in the Fairfield County EMA Conference Room. During this session, community members worked in small groups to review the recently completed CHA and identified the most important health issues facing residents in Fairfield County:

## Substance use treatment and prevention Mental health care access Community outreach Transportation access

These community members then pledged to work together to develop a strategic plan - this CHIP - to address these prioritized community health needs.

Another important task that was part of this effort involved the identification of a shared definition, or vision, for a healthy Fairfield County. After discussion of the vision of health identified during the previous CHIP process, consensus was reached. Fairfield County's vision of health is:

## Fairfield County: An engaged community working together to achieve health and wellness for all who live, work, and play here.

The community members involved in this process then split into three work groups to begin drafting health improvement plans for each health priority, following a systematic process that was informed by Public Health Accreditation Board Standard 5.2. The plans drafted by each group detail the specific goals, objectives, and measures that will be used to address the community health priorities and track progress over time. The three work plan groups considered several overarching principles during their discussions and writing: the concepts of evidence-based public health practice, social determinants of health, SMART objectives

(specific, measurable, achievable and actionable, relevant, and time-oriented), and priority alignment with Ohio's 2020-2022 State Health Improvement Plan.

Fairfield County's 2023-2025 Community Health Improvement Plan identifies health priorities, goals, objectives, and action steps that the community will use to develop and implement projects, programs, and policies to improve the health of its residents.

Implementation of the CHIP will begin in 2023. On an annual basis, Fairfield County will publish a report outlining progress made towards accomplishing the goals outlined in the work plan and reconvene community partners to discuss progress and necessary revisions. The original group of community partners, along with additional community members, will be invited to provide ongoing guidance and support throughout the implementation of this CHIP and any revisions that may be necessary; the composition of this group will be expanded and maintained as this work progresses. The CHIP is scheduled to be implemented over a three-year period.

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I want to thank the many organizations, representatives, and concerned public, that participated in the Community Health Assessment and in the development of this Community Health Improvement Plan.

Without an engaged and energized network of organizations, working together toward a common goal, we would not be able to bend the curve toward a healthier future for all of Fairfield County's residents.

The last Fairfield County Community Health Assessment was conducted in 2019, before the pandemic, and the stress of a multi-year, deadly pandemic on our community was evident in many ways.

The most obvious impacts were the number of COVID-19 cases, hospitalizations, and deaths. During 2021 there were 215 resident deaths due to COVID-19, with over 450 total resident COVID-19 associated deaths in the first 3 years of the pandemic. These impacts have been devastating to our families, friends, and our economic stability. The trauma endured will linger long past the pandemic. Our priorities identified for the Community Health Improvement Plan reflect the pandemic's impact on Mental Health, Addiction, and the proliferation of health misinformation during the pandemic.

While the pandemic drove the major changes in health status since the previous Community Health Assessment, the leading causes of death continue to be heart disease and cancer. As part of our Community Health Improvement Plan, we will continue to work toward reducing premature deaths due to both heart disease and cancer by increasing screening and early detection, and by addressing risk factors for these diseases including tobacco use, poor nutrition, and a lack of physical activity.

R. Joseph Ebel, RS, MS, MBA

R. Gort Ehl RS.MS,MBA

Health Commissioner

Introduction 5

In the fall of 2022, the Fairfield County Health Department published a comprehensive assessment of the health of its residents. The 2022 Fairfield County Community Health Assessment (CHA) considered a wide range of information, including disease rates, quality of life issues, causes of death, community resources, and self-reported health status to paint a picture of the health of Fairfield County residents. Residents and partners can access the most recent CHA at the following link: <a href="https://www.myfdh.org/">https://www.myfdh.org/</a>.

Based on the 2022 Fairfield County CHA, the Community Health Improvement Committee members embarked on a comprehensive strategic planning process focused on improving the health of the community. This began with a review and identification of priority health needs (considering the 2022 CHA data), was followed by a review and discussion of a vision of health for Fairfield County, and finished with the creation of a Community Health Improvement Plan (CHIP) for addressing those priorities. The CHIP is comprehensive and long term, detailing action steps that will be used by public health system partner organizations as they implement projects, programs, and policies in Fairfield County.

This report provides a description of the process used to engage the community and stakeholders in the development of the CHIP. Following the process summary, there is a section for each identified priority, listing the goals, key measures, an overview of the objectives selected for each health priority, and information to demonstrate the significance of this priority. A work plan that includes more detailed objectives, action steps, and evidence-based strategies for each priority is available in Appendix A. This report concludes with a brief discussion of next steps relative to implementation, ongoing monitoring, and evaluation of the CHIP.

The Fairfield County Health Department contracted with Illuminology to design the CHIP process, to facilitate multiple group meetings, and to draft this document.

#### **Identifying The Community's Priority Health Needs**

On September 28, 2022, community members representing a diverse array of public health, public safety, hospital, healthcare providers, social service, political, and community organizations met in person to identify potential priority health needs of the community using the *Fairfield County 2022 Community Health Assessment*. Along with reviewing the data and insights presented in the 2022 CHA, participants also considered their personal experience and history with the community before identifying priority health issues.

Illuminology researchers helped to facilitate large and small group discussions during this meeting. To aid community members during their deliberations and discussion, the following criteria were shared for their consideration:

- **Equity**: Degree to which specific groups are affected by a health issue.
- **Size**: Number of persons affected, taking into account variance from benchmark data and targets.
- **Seriousness**: Degree to which the health issue leads to death, disability, and impairs one's quality of life.
- **Feasibility**: Ability of organization or individuals to reasonably combat the health issue given available resources. Related to the amount of control and knowledge (influence) organization(s) have on the issue.
- **Severity of the Consequences of Inaction**: Risks associated with exacerbation of the health issue if not addressed at the earliest opportunity.
- **Trends**: Whether or not the health issue is getting better or worse in the community over time.
- **Intervention**: Any existing multi-level public health strategies proven to be effective in addressing the health issue.
- **Value**: The importance of the health issue to the community.
- **Social Determinant / Root Cause**: Whether or not the health issue is a root cause or social determinant of health that impacts one or more health issues.

After a total of 13 health needs were identified by small groups, participants were asked to engage in a voting process to select the highest priority needs. In the first round of voting, each participant was given 5 votes to cast for the needs they perceived to be the highest priority. Needs receiving the least amount of votes were then eliminated, and participants were asked to vote again with two votes to cast. This resulted in all but four needs being eliminated.

Overall, 26 representatives participated in this voting process, coming to a clear consensus about the community's prioritized health needs.

The four health needs identified as a priority for the community were:

- Substance use treatment and prevention
- Mental health care access
- Community outreach, particularly to increase preventative health care and protective factors against chronic disease
- Transportation access

The other needs identified by the small groups and considered in this voting process included:

- Affordability and access to physical health care, including dental care and maternal
  and infant health care specifically. The lack of health care workforce was also
  mentioned in this vein, along with a need for more specialty care providers within the
  community. Health care delay due to stigma and education was also mentioned,
  along with access to health screenings.
- Decreased obesity rates, and attention to related chronic diseases.
- Access to affordable, healthy food.
- Access to safe, affordable activity and leisure spaces.
- A need for increased support within families.
- Issues specific to older adults, such as dementia screening, fall prevention, and inhome health care access.
- In the realm of mental and behavioral health care, early screening, treatment and
  education for individuals with high Adverse Childhood Experiences (ACEs) scores was
  mentioned, along with attention to the way ACES scores predispose individuals to
  heart disease and cancer.
- Building trauma informed organizations and providing trauma informed care.
- Identifying vulnerable populations.

For context, Ohio's 2020-2022 State Health Improvement Plan (SHIP) identified three priority health factors important to improving communities' health, with particular emphasis on **mental health and addiction, chronic disease, and maternal and infant health**. The three priority health factors include **community conditions, health behaviors, and access to care**, as shown below. For each of these priority health factors Ohio's 2020-2022 SHIP also identified specific areas of focus, which are listed in the table below. Overall, there is a good alignment between the prioritized health needs identified for Fairfield County and the priority health factors identified by Ohio's 2020-2022 SHIP:

- 1. Substance use treatment and prevention aligns with Ohio's health priority factor "health behaviors" as well as the priority health outcome of "mental health and addiction."
- 2. Mental health care access aligns with Ohio's health priority factor of "access to care" as well as the priority health outcome of "mental health and addiction."

3. Community outreach mentioned by session members referenced chronic diseases; this also aligns with Ohio's priority health outcomes.

While transportation access could be considered a "community condition," this was not explicitly outlined by Ohio's 2020-2022 SHIP.

#### Health Priority Factors and Outcomes Identified By Ohio's 2020-2022 SHIP

Health Priority Factors	Priority Health Outcomes
Community Conditions	Mental Health and Addiction
<ul> <li>Housing affordability and quality</li> <li>Poverty</li> <li>K-12 student success</li> <li>Adverse childhood experiences</li> </ul>	<ul><li>Depression</li><li>Suicide</li><li>Youth drug use</li><li>Drug overdose deaths</li></ul>
Health Behaviors	Chronic Disease
<ul><li>Tobacco/nicotine use</li><li>Nutrition</li><li>Physical activity</li></ul>	<ul><li>Heart disease</li><li>Diabetes</li><li>Childhood conditions (asthma, lead)</li></ul>
Access to Care	Maternal and Infant Health
<ul> <li>Health insurance coverage</li> <li>Local access to healthcare providers</li> <li>Unmet need for mental health care</li> </ul>	<ul><li>Preterm births</li><li>Infant mortality</li><li>Maternal morbidity</li></ul>

After the discussion of priority health needs, participants discussed the community's definition or vision of health. After reviewing the vision of health from the 2020 CHIP, all participants agreed that the vision statement from 2020 should stand:

### Fairfield County: An engaged community working together to achieve health and wellness for all who live, work, and play here.

Appendix B presents a list of community assets and resources that was developed during the 2022 CHA and Appendix C presents a list of community members who participated in this strategic planning process.

#### **Creating The Community Health Improvement Plan**

After identifying the four priority health needs, Fairfield County health stakeholders had the opportunity to indicate their interest in participating in work groups to develop three work plans (for the purposes of the CHIP, the priority health needs 1) substance use treatment and prevention and 2) mental health care access were collapsed). Then, the CHIP work group began their efforts to create the work plans that comprise the main portion of the CHIP. They considered the priorities and needs of residents in the community in order to identify goals, key measures, objectives, action steps, time frames, and accountable persons/organizations related to each priority area. The product of these meetings was a work plan for each of three prioritized health issues; these work plans define the actions of this CHIP. Detailed work plans can be found in Appendix A.

When drafting their work plans, the work groups were asked to consider the importance of including evidence based public health practices. Evidence based public health practices (EBPHPs) are tested programs, policies, and interventions that are proven to be most effective in successfully changing behavior. To ensure workgroup members considered these types of practices when developing this CHIP, relevant evidence-informed strategies from Ohio's 2020-2022 SHIP, National Prevention Strategy, Healthy People 2030, and RWJF's "What Works for Health" were shared with workgroup members for their consideration.

Each work group completed a "fishbone" root-cause analysis activity, during which they identified potential policies, environmental factors, systemic factors, and resource availability issues that function as root causes leading to each prioritized health need.

Next, the work group members were asked to consider the following three questions, which helped to identify the size and shape of the strategic action(s) that may be required to move the community's health closer to their vision for a healthy Fairfield County - a gap analysis. For each identified health priority:

- 1) Where are we now as a community?
- 2) Where do we want to be as a community?
- 3) How do we get from where we are to where we want to be?

Then, leading into the creation of the work plans, participants completed a goals and measures worksheet which helped them to think openly about goals and objectives to consider and how achievement might be measured.

After the CHIP report and work plans were drafted, the Fairfield County Health Department reviewed the documents and incorporated relevant information about currently existing organizations and actions occurring in the community.

Overviews of the CHIP goals, key measures, and objectives follow.

#### **Substance Use Treatment and Prevention and Mental Health Care Access**

Addressing and preventing addiction is important to the community, which could benefit from improved education around substance use and increased resources to help substance users avoid more health issues. Survey respondents and community leaders from the Fairfield 2022 Community Health Assessment brought up this issue, mentioning how the stigma associated with substance use and the lack of in-patient treatment facilities within the county are barriers to effective intervention.

CHA survey respondents and community leaders are also concerned with access to mental health treatment and the lack of a mental health workforce, along with specific mental health issues (anxiety, depression, suicide) and the mental health needs of specific populations (older adults, rural populations, and youth). As detailed in the community health assessment, around 20% of Fairfield County adult residents have ever been diagnosed with a depressive disorder, and nearly 30% with an anxiety disorder. In terms of residents' perceptions of the most important health issues, 26% mentioned drug or alcohol addiction or abuse and 20% mentioned mental health issues. Another potentially relevant issue cited by 20% of respondents as one of the most important health issues was lack of medical care access.

Two other key issues related to substance use and mental health are suicide and drug overdose deaths. According to the CHA, Fairfield County's suicide rate was 19.3/100,000 and the rate of drug overdose deaths was 37.9/100,000.

Community leaders called attention to the relationship between mental health and substance use, as well as the impact of COVID-19 on these issues.

These needs are very important to address because if unresolved, they will lead to additional health/wellness concerns and greater impact on the local, state, and national community.

**Goals:** Increase understanding/awareness of community-wide resources for mental health and substance use and decrease stigma toward mental health and substance use. Increase the number of mental health and substance use professionals in Fairfield County. Decrease the suicide rate in Fairfield County. Decrease the rate of drug overdose deaths in Fairfield County.

**Key measures:** Number of contacts to mental health and substance use resources within the community. Number of mental health and substance use professionals in Fairfield County. Number of suicide deaths/100,000 in Fairfield County. Number of drug overdose deaths/100,000 in Fairfield County.

#### **Objectives:**

- By January 2024, complete 6 outreach activities to increase awareness of mental health and substance use resources among local leaders and other local parties (e.g., schools, law enforcement/police and fire chiefs, village trustees, Meals on Wheels, utility companies), and via methods such as mayors' meetings and festivals, with the goal of reaching individuals who may be hard to reach (e.g., rural populations, older adults, and children).
- By January 2024, have at least 3 meetings to explore planning and funding for mental health and/or substance use peer support groups or coaching.
- By December 2025, increase behavioral health patients treated by the Fairfield Community Health Center by 50%.
- By January 2024, have at least 3 meetings to explore funding and planning for a program to incentivize nurse practitioners to add a mental health specialty.
- By December 2025, decrease the suicide rate to 12.8 per 100,000 population.
- By December 2025, decrease the drug overdose death rate to 20.7 deaths per 100,000.

#### **Community Outreach**

Community outreach includes health promotion and disease prevention programs designed to engage and empower individuals and communities to choose healthy behaviors and make changes that reduce the risk of developing chronic diseases and other morbidities. Activities include expanded community paramedicine, education about health resources such as free screenings, information about risk factors for chronic diseases, information about prenatal care, and increased awareness about opportunities to improve health and safety.

According to the Fairfield County 2022 Community Health Assessment, heart disease is the leading cause of mortality in Fairfield County (2021 rate of deaths from heart disease: 176.5), followed by cancer (2021 rate of deaths from cancer (C00-C97): 154.9). The most common chronic conditions reported by survey respondents were high blood pressure (37.9%), arthritis (27.2%), and high blood cholesterol (26.7%).

Community outreach is important because it could result in decreased incidence of health issues in the population through increased access to primary and preventative health care and healthy lifestyle resources.

**Goals:** Increase awareness of health resources and events in the community. Increase awareness, access, and use of prenatal care. Increase use of parks for improving health. Promote the adoption of modifiable risk behaviors including tobacco use, poor eating habits, and lack of physical activity, which contribute to the development of chronic disease. Increase access to paramedicine in Fairfield County.

**Key measures:** Number of people using health resources and number of people attending events. Proportion of pregnant individuals who seek and utilize prenatal health resources. Number of scheduled activities hosted by local parks; participation metrics of park activities. Number of opportunities for community members to receive health education programs and services. Number of hours spent weekly on paramedical activities.

#### **Objectives:**

- By January 2024, create a shared calendar between health organizations in the county and distribute resources to all organizations with the goal of increasing knowledge of health events and resources between organizations and within the wider public.
- By January 2024, schedule or increase awareness of 3 events to foster collaboration between health organizations, such as luncheons and other scheduled activities where local leaders in health and other areas can learn about each others' capabilities and resources.
- By January 2024, establish an active Healthy Communities Coalition to promote health and wellness including healthy eating and active living.
- By January 2024, understand potential methods to increase community awareness, access, and use of prenatal care.
- By January 2024, increase opportunities for outdoor physical activity and increase awareness of these resources within the community.
- By December 2025, increase health knowledge, access to screenings/health care by providing community members the opportunity to access information and screenings at community parks.
- By December 2025, increase the number of hours spent providing paramedical care in Fairfield County.

#### **Transportation Access**

Transportation along with mobility access includes a need for accessible, user-friendly transportation including more access to safe pedestrian and bike travel and transportation for economic development. Other transportation needs include a need for seniors and those with special transport needs (wheelchair users) as well as transport access for those in rural areas and those needing to travel across county lines. While Census data shows that a majority of households in the county have access to a vehicle, community leaders see a strong need for improved public transportation systems.

**Goals:** For people in the community to have affordable access to go where they want to, when they want (e.g., food pantries, grocery stores, jobs, medical appointments, community events, social/personal needs).

**Key measures:** Calls to Fairfield 2-1-1 and other agencies about transportation needs.

#### **Objectives:**

- By December 2025, have broad community agency collaboration for transportation and mobility funding, with inclusion of funding for bicyclists and pedestrian options.
- By December 2025, increase the activity of the Transportation Advisory Committee (more members, more meetings, and greater awareness).
- By December 2023, update the Fairfield County Active Transportation Plan.

The 2023-2025 Fairfield County Community Health Improvement Planning process aimed to identify the most pressing health issues in Fairfield County and bring stakeholders together to collaborate and create an actionable plan to address those issues. This plan presents priorities and associated goals and objectives to improve the health of Fairfield County. The detailed work plans that resulted from these collaborative efforts are located in Appendix A.

This CHIP will be monitored and updated annually to reflect accomplishments and new areas of need. Agencies and organizations are encouraged to align their agency strategic plans to this plan where appropriate. In addition, the plan will be displayed on the Fairfield County Health Department's CHIP Dashboard at https://scorecard.clearimpact.com/Scorecard/Embed/72212.

Lastly, Fairfield County residents and community organizations are encouraged to participate in and comment on this process. If you or your organization is interested in participating in or commenting on the CHIP, please contact Joe Ebel, Fairfield County Health Department, at 740-652-2858.

The following pages display the detailed CHIP work plans.

#### **Priority #1: Substance Use Treatment and Prevention and Mental Health Care Access**

Addressing and preventing addiction is important to the community, which could benefit from improved education around substance use and increased resources to help substance users avoid more health issues. Survey respondents and community leaders from the Fairfield 2022 Community Health Assessment brought up this issue, mentioning how the stigma associated with substance use and the lack of inpatient treatment facilities within the county are barriers to effective intervention.

CHA survey respondents and community leaders are also concerned with access to mental health treatment and the lack of a mental health workforce, along with specific mental health issues (anxiety, depression, suicide) and the mental health needs of specific populations (older adults, rural populations, and youth). As detailed in the community health assessment, around 20% of Fairfield County adult residents have ever been diagnosed with a depressive disorder, and nearly 30% with an anxiety disorder. In terms of residents' perceptions of the most important health issues, 26.2% mentioned drug or alcohol addiction or abuse and 19.8% mentioned mental health issues. Another potentially relevant issue cited by 19.5% of respondents as one of the most important health issues was lack of medical care access.

Two other key issues related to substance use and mental health are suicide and drug overdose deaths. According to the CHA, Fairfield County's suicide rate was 19.3 and the rate of drug overdose deaths was 37.9.

Community leaders called attention to the relationship between mental health and substance use, as well as the impact of COVID-19 on these issues.

These needs are very important to address because if unresolved, they will lead to additional health/wellness concerns and greater impact on the local, state, and national community (all).

**Goal 1.a:** Increase understanding/awareness of community-wide resources for mental health and substance use and decrease stigma toward mental health and substance use.

S.M.A.R.T. Objectives

✓ Specific ✓ Measurable ✓ Achievable & Actionable ✓ Relevant ✓ Time-oriented

How will you know it is done? Can WE measure it? Can it be done given the time frame and resources? Should it be done? When will it be done?

Can it be done?

Key Measure(s): Number of contacts to mental health and substance use resources within the community.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Healthy People 2030 Leading Health Indicators: Drug overdose deaths, suicides, adolescents with major depressive episodes (MDEs) who receive treatment, adults engaging in binge drinking of alcoholic beverages during the past 30 days

**Alignment with SHIP:** One of the 3 priority health outcomes is Mental Health and Addiction, including Depression, Suicide, Youth drug use, and Drug overdose deaths

Consideration of social determinants of health or health inequities: For Objective 1.a.1, work group members mentioned that having access to information about resources may be particularly challenging for individuals who don't have access to the internet (especially lower-income individuals, those who live in rural areas, or older adults). The 2022 Fairfield County CHA data support this perception: those with lower household income are more likely to report that not knowing of any services in their community is a barrier to getting help. Objective 1.a.1 involves strategies to ensure that these individuals have access to information.

Objective(s) that address **policy change(s)** needed to accomplish goal: For Objective 1.a.1, policies may need to change to ensure that between the Fairfield County Health Department and the Behavior Health Community Navigator there is enough time and resources to conduct the outreach. For Objective 1.a.2, the people/agencies responsible will explore potential policy changes to provide funding for the peer support groups or coaching.

S.M.A.R.T. Objectives

Specific

Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done?

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objectives Impact	Measure	Action Steps	Timeframe	Lead	Status
Objective 1.a.1: By January 2024, complete 6 outreach activities to increase awareness of mental health and substance use resources among local leaders and other local parties (e.g., schools, law enforcement/police and fire chiefs, village trustees, Meals on Wheels, utility companies), and via methods such as mayors' meetings and festivals, with the goal of reaching individuals who may be hard to reach (e.g., rural populations, older adults, and children).	Baseline: Some previous outreach via Meals on Wheels and using utility bills  Target: Present and/or set up booth at 3 or more events  Have direct contact with at least 3 community leaders to provide information	<ul> <li>Research meetings and events at which to have booth and/or presentations about mental health and substance use resources</li> <li>Research other ways to distribute mental health and substance use resource information (e.g., agencies providing information to their constituencies, public utilities providing information on utility bills)</li> <li>Contact local leaders to provide and/or discuss mental health and substance use resources</li> <li>Follow through to provide information based on research/contacts</li> </ul>	End: Ongoing (meet target by January 2024)	Fairfield County Health Department and the Behavioral Health Community Navigator	

#### S.M.A.R.T. Objectives

For a We measure it? Specific 

✓ Measurable 
✓ Achievable & Actionable 
✓ Relevant 
✓ Relevant 
✓ Time-oriented 

When will it be done? 

When will it be done?

Objective 1.a.2: By January 2024, have at least 3 meetings to explore planning and funding for mental health and/or substance use peer support groups or coaching.	Baseline: Mental health and/or substance use peer support groups or coaching not planned	<ul> <li>Explore benefits of peer support and coaching.</li> <li>Discuss funding options for creating the groups or coaching sessions.</li> </ul>	Start: January 2023 End: January 2024	Fairfield County Health Department, Fairfield Community Health Center, Fairfield Medical Center
	Target: At least 3 planning meetings	Establish details about how the groups or coaching sessions will be conducted.		

S.M.A.R.T. Objectives

✓ Specific ✓ Measurable ✓ Achievable & Actionable ✓ Relevant

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

When will it be done?

**☑**Time-oriented

Goal 1.b: Increase the number of mental health and substance use professionals in Fairfield County.

**Key Measure(s):** Number of mental health and substance use professionals in Fairfield County.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Healthy People 2030 Leading Health Indicators: Drug overdose deaths, suicides, adolescents with major depressive episodes (MDEs) who receive treatment, adults engaging in binge drinking of alcoholic beverages during the past 30 days

**Alignment with SHIP:** One of the 3 priority health outcomes is Mental Health and Addiction, including Depression, Suicide, Youth drug use, and Drug overdose deaths

**Consideration of social determinants of health or health inequities:** According to the 2022 Fairfield Community Health Assessment, lower income individuals were more likely to have poor mental health outcomes. For Objective 1.b.1, Fairfield Community Health Center's purpose "is to make sure everyone has access to quality, affordable healthcare, regardless of insurance or income status." Therefore, the increase in behavioral health treatment at FCHC will ensure that individuals who 1. may be more likely to have poor mental health outcomes and 2. may have a challenge paying for behavioral health care will have access to treatment.

Objective(s) that address **policy change(s)** needed to accomplish goal: For Objective 1.b.2, the people/agencies responsible will explore potential policy changes to provide funding for the program.

S.M.A.R.T. Objectives

Specific

**✓** Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done?

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objectives Impact	Measure	Action Steps	Timeframe	Lead	Status
Objective 1.b.1: By December 2025, increase behavioral health patients treated by the Fairfield Community Health Center	Baseline: x.x # of behavioral health patients treated each month by FCHC	Establish FCHC's psychiatric nurse practitioner as a preceptor	Start: After FCHC completes center expansion	Fairfield Community Health Center	
by 50%.	Target: Increase behavioral health patients treated each month by FCHC by 50%	Attract nurse practitioners who are trained in mental health to complete preceptorships at FCHC who will treat behavioral health patients as part of their preceptorships	End: Ongoing but target complete by December 2025		

S.M.A.R.T. Objectives

Specific Measurable

Achievable & Actionable

**✓** Relevant

Time-oriented

Objective 1.b.2: By January 2024, have at least 3 meetings to explore funding and planning for a program to incentivize nurse practitioners to add a mental health specialty.	Baseline: Program to incentivize nurse practitioners for adding a mental health specialty not planned	<ul> <li>Explore similar programs that have been implemented in other communities</li> <li>Explore potential funding options for programs</li> </ul>	Start: January 2023 End: January 2024	Fairfield County Health Department, Fairfield Community Health Center, ADAMH
	Target: At least 3 meetings to explore planning a program that incentivizes nurse practitioners to add a mental health specialty	Discuss details regarding how this type of program might be implemented in Fairfield County		

S.M.A.R.T. Objectives

✓ Specific ✓ Measurable ✓ Achievable & Actionable ✓ Relevant

How will you know it is done? Can WE measure it? Can it be done given the time frame and resources?

Should it be done?

When will it be done?

**▼**Time-oriented

**Goal 1.c:** Decrease the suicide rate in Fairfield County.

**Key Measure(s):** Number of suicide deaths/100,000 in Fairfield County.

Alignment with National Priorities: [Healthy People 2030, CDC 6|18] Suicide is a Healthy People 2030 Leading Health Indicator.

Alignment with SHIP: One of the 3 priority health outcomes is Mental Health and Addiction, including Suicide

**Consideration of social determinants of health or health inequities:** According to the 2022 Fairfield Community Health Assessment, lower income individuals were more likely to have poor mental health outcomes, which may contribute to suicide attempts.

Objective(s) that address **policy change(s)** needed to accomplish goal: For Objective 1.c.1, additional funding may be needed.

S.M.A.R.T. Objectives

Specific

**✓** Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

<b>Objectives Impact</b>	Measure	Action Steps	Timeframe	Lead	Status
Objective 1.c.1: By	Baseline: In 2021,	Suicide Prevention Coalition will	Start: TBD	Suicide Prevention	
December 2025, decrease	the suicide rate was	establish 9-8-8 suicide hotline.		Coalition, ADAMH,	
the suicide rate to 12.8 per	19.3.			potential other	
100,000 population.			End: TBD	partners.	
		Suicide Prevention Coalition will			
	Target: Suicide rate	conduct outreach to increase			
	of 12.8	awareness of 9-8-8 suicide hotline.			
		ADAMH to conduct training on menta health first aid - how to talk to people considering suicide.	I		

S.M.A.R.T. Objectives

**✓** Specific **✓** Measurable

Achievable & Actionable

Relevant

Time-oriented

**Goal 1.d:** Decrease the rate of drug overdose deaths in Fairfield County.

**Key Measure(s):** Number of drug overdoses deaths/100,000 in Fairfield County.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Drug overdose deaths is a Healthy People 2030 Leading Health Indicator.

Alignment with SHIP: One of the 3 priority health outcomes is Mental Health and Addiction, including Drug overdose deaths

**Consideration of social determinants of health or health inequities:** Some individuals may not have access to education and support regarding drug abuse; drug overdoses may decrease if education and support is more readily available.

Objective(s) that address **policy change(s)** needed to accomplish goal: For Objective 1.d.1, additional funding may be required.

S.M.A.R.T. Objectives

**✓** Specific

**✓** Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objectives Impact	Measure	Action Steps	Timeframe	Lead	Status
Objectives Impact Objective 1.d.1: By December 2025, decrease the drug overdose death rate to 20.7 deaths per 100,000.	Measure Baseline: In 2021, the drug overdose death rate was 37.9.  Target: Drug overdose death rate of 20.7.	<ul> <li>Project DAWN will conduct overdose education and Naloxone distribution.</li> <li>F.O.R.T. (Fairfield County Overdose Response Team) will provide services for those who have overdosed, those at risk for</li> </ul>	Timeframe Start: TBD End: TBD	Lead Project DAWN, F.O.R.T., Overdose Prevention Fairfield County PA.R.T. Coalition, and potential other agencies.	Status
		overdosed, those at risk for overdosing, and their families.			

S.M.A.R.T. Objectives

Specific Measurable Achievable & Actionable

**✓** Relevant

**▼**Time-oriented

#### **Priority #2: Community Outreach**

Community outreach includes health promotion and disease prevention programs designed to engage and empower individuals and communities to choose healthy behaviors and make changes that reduce the risk of developing chronic diseases and other morbidities. Activities include expanded community paramedicine, education about health resources such as free screenings, information about risk factors for chronic diseases, information about prenatal care, and increased awareness about opportunities to improve health and safety.

According to the Fairfield County 2022 Community Health Assessment, heart disease is the leading cause of mortality in Fairfield County (2021 rate of deaths from heart disease: 176.5), followed by cancer (2021 rate of deaths from cancer (C00-C97): 154.9). The most common chronic conditions reported by survey respondents were high blood pressure (37.9%), arthritis (27.2%), and high blood cholesterol (26.7%).

Community outreach is important because it could result in decreased incidence of health issues in the population through increased access to primary and preventative health care and healthy lifestyle resources.

Goal 2.a: Increase awareness of health resources and events in the community.

**Key Measure(s):** Number of people using health resources and number of people attending events.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Broadly, this goal aligns with national priorities because it seeks to increase health awareness generally.

**Alignment with SHIP:** Broadly, this goal aligns with the SHIP because it seeks to increase health awareness generally.

Consideration of social determinants of health or health inequities: Access to health care information may be limited for uninsured/underinsured population, and dependent on economic stability, educational attainment, access to technology, and generational habits.

S.M.A.R.T. Objectives

**✓** Specific

How will you know it is done?

**✓** Measurable

Achievable & Actionable

**✓** Relevant

**✓** Time-oriented

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objective(s) that address **policy change(s)** needed to accomplish goal: --

S.M.A.R.T. Objectives

**✓** Specific

Measurable

Achievable & Actionable

**✓** Relevant

**▼**Time-oriented

How will you know it is done?

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

<b>Objectives Impact</b>	Measure	Action Steps	Timeframe	Lead	Status
Objective 2.a.1:  By January 2024, create a shared calendar between health organizations in the county and distribute resources to all organizations with the goal of increasing knowledge of health events and resources between organizations and within the wider public.	Baseline: Current health resource directory awareness - estimated not to be widespread. No collaborative event calendar currently exists.  Target: Health resource directory is distributed to each health organization each time it's updated and event calendar is created.	<ul> <li>Create a process by which health organizations can add their events to an online calendar.</li> <li>Distribute health resource directory to health organizations from FCHD email list.</li> <li>Health organizations share the health resource directory and the event calendar via their social media channels or via physical methods with clients of health services and wider public.</li> </ul>	Start: January 2023 End: Ongoing (Meet target by January 2024)	Fairfield County Health Department	

S.M.A.R.T. Objectives

**✓** Specific **✓** Measurable

Achievable & Actionable

**✓** Relevant

**▼**Time-oriented

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objective 2.a.2:  By January 2024, schedule or increase  Baseline: Current amount of health organization networking events -	working 2023 Health
awareness of 3 events to foster collaboration between health organizations, such as luncheons and other scheduled activities where local leaders in health and other areas can learn about each others' capabilities and resources.  • Explore schedulir additional networ to give health organ an opportunity to and share information about existing networking events and/or schedule at least 3 events	ng events nizations ollaborate  End: Ongoing (Meet target by January 2024)

S.M.A.R.T. Objectives

**✓** Specific

How will you know it is done?

**✓** Measurable

Achievable & Actionable

Relevant

**✓** Time-oriented

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

**Goal 2.b:** Increase awareness, access, and use of prenatal care.

**Key Measure(s):** Proportion of pregnant individuals who seek and utilize prenatal health resources.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Healthy People 2030 target objectives: Increase the proportion of pregnant women who receive early and adequate prenatal care.

**Alignment with SHIP:** Maternal and infant health: preterm births, infant mortality, and maternal morbidity are priority health outcomes.

**Consideration of social determinants of health or health inequities:** Generational knowledge and habits around pregnancy, substance use, and access to health care may all impact individuals' utilization of prenatal health resources.

Objective(s) that address **policy change(s)** needed to accomplish goal: The people/agencies responsible for this objective will explore potential policy changes to provide funding for the increased awareness, access, and use of prenatal care.

S.M.A.R.T. Objectives

Specific

**✓** Measurable

Achievable & Actionable

**✓** Relevant

**✓** Time-oriented

How will you know it is done? Can \

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objectives Impact	Measure	Action Steps	Timeframe	Lead	Status
Objective 2.b.1:  By January 2024, understand potential methods to increase community awareness, access, and use of prenatal care.	Baseline: Limited conversations to learn about funding opportunities and methods to increase prenatal care  Target: At least 3 meetings to explore funding opportunities and methods to increase awareness, access, and use of prenatal care	<ul> <li>Conduct research and have conversations to learn about funding opportunities (United Way &amp; Fairfield County Health Department)</li> <li>Conduct research on evidence-based methods to increase utilization of prenatal health resources</li> </ul>	Start: January 2023 End: Ongoing (meet target by January 2024)	United Way / Fairfield County Health Department	

S.M.A.R.T. Objectives

Relevant

**▼**Time-oriented

**Goal 2.c:** Increase use of parks for improving health. Promote the adoption of modifiable risk behaviors including tobacco use, poor eating habits, and lack of physical activity, which contribute to the development of chronic disease.

**Key Measure(s):** Number of scheduled activities hosted by local parks; participation metrics of park activities. Number of opportunities for community members to receive health education programs or services.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] A Leading Health Indicator for Healthy People 2030 is "Adults who meet current minimum guidelines for aerobic physical activity and muscle-strengthening activity."

**Alignment with SHIP:** Physical activity is listed as a priority factor.

**Consideration of social determinants of health or heath inequities:** Many individuals who can benefit from information about physical activity resources may not have adequate access to social media/online resources where this information is shared or may not be tech savvy.

Objective(s) that address **policy change(s)** needed to accomplish goal: For Objective 2.c.2, Park District policy may need to change to fund programs and events.

S.M.A.R.T. Objectives

Specific

**✓** Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

Objectives Impact	Measure		Action Steps	Timeframe	Lead	Status
Objective 2.c.1:  By January 2024, increase opportunities for outdoor physical activity and increase awareness of these resources within the community.	Baseline: Existing scheduled outdoor activities hosted by parks.  Target: Create a resource detailing current and potential outdoor activity clubs and activities (e.g., weekly hikes) and share this with the community.	<ul> <li>Comination utilization in the community of the c</li></ul>	s host weekly hikes for munity to meet and e parks s share information at hiking clubs s share information at other outdoor activity s s consider other ideas acreasing outdoor ical activity	End: Ongoing (weekly hikes target by fall 2023)	Park District	

S.M.A.R.T. Objectives

**✓** Specific

Measurable

Achievable & Actionable

**✓** Relevant

**▼**Time-oriented

Objectives Impact	Measure	Action Steps	Timeframe	Lead	Status
Objective 2.c.2:  By December 2025, increase health knowledge, access to screenings/health care by providing community members the opportunity to access information and screenings at community parks.	Baseline: No explicit collaboration between Park District and the medical community.  Target: Have at least three events featuring cardiac arrest training and CPR training in area parks. Place AEDs in three community parks. Have at least two other events scheduled where community members can receive health education or services at local parks.	<ul> <li>Contact medical professionals and determine interest in collaborating</li> <li>Determine appropriateness of park venues to facilitate health information education / health service delivery and determine what is needed to make venues appropriate</li> <li>Schedule events at parks where medical professionals provide services</li> <li>Plan and schedule times for Community Heart Watch to host their mobile CPR/AED training unit at local parks</li> </ul>	Start: January 2023  End: Ongoing (Meet first two targets by January 2024. Meet third target by 2025)	Park District and Community Heart Watch	

S.M.A.R.T. Objectives

**✓** Specific **✓** Measurable

Achievable & Actionable

**✓** Relevant

**▼**Time-oriented

### Fairfield County Community Health Improvement Plan (CHIP) – Community Outreach Work Plan

**Goal 2.d:** Increase access to paramedicine in Fairfield County.

**Key Measure(s):** Number of hours spent weekly on paramedical activities.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Broadly, this goal aligns with national priorities because it seeks to increase health care access generally.

Alignment with SHIP: Broadly, this goal aligns with the SHIP because it seeks to increase health care access generally.

**Consideration of social determinants of health or heath inequities:** Those who are lower income, don't have access to social support, or don't have access to transportation may benefit from paramedicine.

Objective(s) that address **policy change(s)** needed to accomplish goal: Funding will be required to achieve Objective 2.d.1.

S.M.A.R.T. Objectives

Specific

**✓** Measurable

Achievable & Actionable

Relevant

**▼** Time-oriented

How will you know it is done?

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

# Fairfield County Community Health Improvement Plan (CHIP) – Community Outreach Work Plan

<b>Objectives Impact</b>	Measure		Action Steps	Timeframe	Lead	Status
Objective 2.d.1:	Baseline: Existing time	•	Explore funding for	Start: January	Violet Township	
	spent on paramedicine		additional paramedics in	2023	Fire Department	
By December 2025,	in Fairfield County.		the county		and potential	
increase the number of					other partners.	
hours spent providing paramedical care in Fairfield County.	Target: TBD	•	Explore changes in training or staffing to increase paramedical care.	End: December 2025		

S.M.A.R.T. Objectives

Specific Measurable

Achievable & Actionable

**✓** Relevant

Time-oriented

How will you know it is done?

Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

# **Work Plan HEAL Capacity Building**

Fairfield County Health Department 1550 Sheridan Dr. Lancaster, OH 43130



Community: Lancaster, Ohio

**Strategy: HEAL Capacity Building** 

### **Target Outcome:**

Increase community capacity by conducting PSE Assessments for Healthy Eating and Active Living (HEAL) and implement community

engagement for change.

Process Objectives	Related Activities	Agency or Person Responsible	Specific D for Each A Start		Evaluation Measures
1. By January 31, 2023, Fairfield County Health Department will complete Policy, Systems, and Environmental (PSE) change assessment for the city of Lancaster.	<ul> <li>Identify municipal and community partners in Fairfield County to engage in the active living assessment</li> <li>Identify community partners in Fairfield County to engage in the healthy eating assessment</li> <li>Invite community partners to participate in assessment review process</li> </ul>	Fairfield County Health Department Employees:  • Hannah Josefczyk, Health Educator	9/19/2022	1/31/2023	<ul> <li>Completed PSE         Assessment(s)</li> <li>List of community         partners for the         active living         assessment</li> <li>List of community         partners for the         healthy eating         assessment</li> <li>Completed review         of existing         community         planning         documents,</li> </ul>

Obtain and re	riew	policies, and plans
existing comr	unity	for both active
planning doc	ments,	living and healthy
policies, and	lans for	eating strategies
active living s	rategies	<ul> <li>Venue (virtual or in</li> </ul>
Obtain and re	riew	person) for
existing comr	unity	assessment review
planning doc	ments,	with community
policies, and		List of HEAL
healthy eatin		strategies for
strategies		implementation
Review infras	ructure	Meeting minutes
and environn		outlining attendees
assess curren		and summarizing
healthy food	ccess	discussion
strategies		Report summarizing
Secure venue	virtual	assessment findings
or in-person)	•	
assessment r		
with commun	tv	
partners for a	•	
living and hea		
access	,	
Convene mee	ing to	
conduct asse	-	
review		
Identify and of	ocument	
list of prioriti		
strategies for		
implementat		
Draft final rep		
detailing find		
the PSE chang	_	
assessment		
assessment		

	Submit summary report and assessment documents to ODH				
July 2022- Previous Health August 2022- Previous He webinar. September 2022- Identific assessment. Met with And Friday Huddle (9/30). Opportunities: n/a Challenges: People are ta	es were conducted in Lancaster, On Educator, Hannah Halfhill, attendealth Educator, Hannah Halfhill, attendealth Educator, Hannah Halfhill, attended community partners for healthy drea Cordle (County Administrator king a while to respond back aftering after it has been a week of no reties: None planned yet	ded HEAL Kickoff Eventended the PSE Assess  y eating and active livi  r, 9/27). Attended Con  asking questions. Oth	ment Tool webina ng. Emailed each բ nmunity Engageme	r and the Cor person identifent Template	nmunity Engagement fied to help complete PSE webinar (9/28). Attended the
October 2022: November 2022: December 2022: Opportunities: Challenges: Potential Solutions: Upcoming Planned Activi	es were conducted in Lancaster, Ol	hio, in Quarter 2:			
Q3: Q4:					
2. By January 31, 2023, Fairfield County Health Department will	Create list of resident groups for Community Group Inventory	Fairfield County Health Department Employees:	9/19/2022	1/31/2023	Completed list of community groups and contacts

complete a Community Group Inventory for the city of Lancaster.	<ul> <li>Identify community partners to assist with identifying relevant community-based organization in Lancaster</li> <li>Invite partners to share</li> <li>Update list with existing information and incorporate points of contact and new community organizations</li> <li>Submit final inventory to ODH</li> </ul>	Hannah     Josefczyk,     Health     Educator			
_	groups and potential partners we	-			
	ties։ Send out individual or a group	email to the list of co	ontacts and conver	ne a Healthy l	iving Coalition after section 3
of PSE Assessment. Q2:					
Q3:					
Q4:					
3. By April 28, 2023, Fairfield County Health Department will host one community event in the county to present results of PSE assessments	<ul> <li>Identify community partner to co-host event and assist with promotion</li> <li>Invite community partner to engage in event planning process</li> <li>Draft list of community partners and organizations to invite to community event</li> </ul>	Fairfield County Health Department Employees:  • Hannah Josefczyk, Health Educator	1/3/2023	4/28/2023	<ul> <li>List of organizations and partners to invite</li> <li>PSE summary presentation</li> <li>Promotional flyer</li> <li>Outline of event planning resource needs</li> <li>Meeting minutes summarizing attendees,</li> </ul>

and identify one HEAL priority area.  • Secure venue for event (virtual or in-person) • Identify incentives to encourage community participation • Create promotional materials for event • Outline resource needs to host event as applicable • Create presentation summarizing findings from PSE assessment • Identify tool and best practice to capture participant thoughts and opinions to select HEAL project strategy • Collect qualitative data to prioritize HEAL strategies • Conduct thematic analysis of qualitative data collected at community event • Create summary report of findings, including selected HEAL project • Submit summary report to ODH   Q1:  Q2:  Q3:  Q4:		
Q1: Q2: Q3:	_	(virtual or in-person)  Identify incentives to encourage community participation  Create promotional materials for event  Outline resource needs to host event as applicable  Create presentation summarizing findings from PSE assessment  Identify tool and best practice to capture participant thoughts and opinions to select HEAL project strategy  Collect qualitative data to prioritize HEAL strategies  Conduct thematic analysis of qualitative data collected at community event  Create summary report of findings, including selected HEAL project  Submit summary report to
Q2: Q3:		ODH
Q3:	Q1:	
	Q2:	
Q4:	Q3:	
	Q4:	

4. By April 28,	Identify potential	Fairfield County	1/3/2023	4/28/2023	Stakeholder list who
2023, Fairfield	community	Health	1,3,2023	1,20,2023	helped with completing
County Health	stakeholders in	Department			the Community
Department will	Lancaster to assist in	Employees:			Engagement Template
complete the	completing the	Hannah			<ul> <li>List of potential goals of</li> </ul>
Community	Community	Josefczyk,			implementing strategy
Engagement	Engagement Template	Health			Profile of community
Template for the	from Community	Educator			residents
city of Lancaster.	Organization Inventory				Chosen priority
	<ul> <li>Invite representatives</li> </ul>				population
	to assist in completing				<ul> <li>Chosen engagement</li> </ul>
	Template				activity for community
	<ul> <li>Identify potential goals</li> </ul>				Completed Community
	of implementing				Engagement Template
	strategy				
	<ul> <li>Review demographic</li> </ul>				
	data for Lancaster to				
	create a profile of				
	community residents				
	Identify priority				
	population for				
	intervention				
	• Identify				
	underrepresented				
	population(s) who will				
	be impacted by				
	strategy				
	<ul> <li>Identify priority communities and</li> </ul>				
	potential partners to				
	convene				
	Review previous				
	community				
	community			1	

Q1: Q2:	engagement efforts in Lancaster  • Assess efforts to determine what strategies worked or failed  • Identify potential barriers to community engagement efforts  • Select engagement activity to implement  • Submit completed Template to ODH				
Q4:  5. By June 30, 2023, Fairfield County Health Department will complete one Community Engagement Activity in the city of Lancaster.	<ul> <li>Review Community         Engagement Template         plan</li> <li>Identify and extend         invitation for community         leaders and agencies to         participate in planning of         community engagement         activity</li> <li>Secure venue for activity         (virtual or in-person), as         applicable</li> <li>Outline and secure needed         resources for event, as         applicable</li> </ul>	Fairfield County Health Department Employees:  • Hannah Josefczyk, Health Educator	3/6/2023	6/30/2023	<ul> <li>Project outline</li> <li>List of community leaders and agencies in Lancaster</li> <li>Summary report of HEAL project perceptions and priorities</li> <li>Photos of activity/event</li> </ul>

incentive commun  Create even distribute to solicit opinions, selected Lancaste  Conduct of qualita  Draft sun findings	thematic analysis		
Q1:	sport to ODII		
Q2:		 	
Q3:			

### Fairfield County Community Health Improvement Plan (CHIP) – Transportation Access Work Plan

### **Priority #3: Transportation Access**

Transportation along with mobility access includes a need for accessible, user-friendly transportation including more access to safe pedestrian and bike travel and transportation for economic development. Other transportation needs include a need for seniors and those with special transport needs (wheelchair users) as well as transport access for those in rural areas and those needing to travel across county lines. While census data shows that a majority of households in the county have access to a vehicle, community leaders see a strong need for improved public transportation systems.

**Goal 3.a** For people in the community have affordable access to get to go where they want, when they want (e.g., food pantries, grocery stores, jobs, medical appointments, community events, social/personal needs).

**Key Measure(s):** Calls to Fairfield 2-1-1 and other agencies about transportation needs.

**Alignment with National Priorities:** [Healthy People 2030, CDC 6|18] Broadly, this aligns with National Priorities because transportation and mobility access allow individuals to meet their health needs.

**Alignment with SHIP:** Broadly, this aligns with the SHIP because transportation and mobility access allow individuals to meet their health needs.

**Consideration of social determinants of health or health inequities:** Public transportation access is limited for those who work jobs with certain hours, like 3rd shift workers in industry or service positions. Rural individuals may have limited access to public transportation which affects their access to nutrition and other health resources. Many services are only accessible to those with Medicaid, and those with different insurance have more limited options for medical transportation.

S.M.A.R.T. Objectives

Specific

**✓** Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

### Fairfield County Community Health Improvement Plan (CHIP) – Transportation Access Work Plan

Objective(s) that address **policy change(s)** needed to accomplish goal: Objective 3.a.2 addresses changing policy that dictates the membership and meetings of the Transportation Advisory Committee.

Objectives Impact	Measure	Action Steps	Timeframe	Lead	Status
Objective 3.a.1: By December 2025, have broad community agency collaboration for transportation and mobility funding, with inclusion of funding for bicyclists and pedestrian options.	Baseline: Many local agencies are applying for funding separately and are unaware of what funding exists.  Target: All county agencies who are interested in/have a need for transportation funding are able to provide input if wanted and understand the sources of transportation funding.	<ul> <li>Learn about current transportation and mobility funding in the county.</li> <li>Reach out to County Commissioners to discuss funding.</li> <li>Research other local agencies to determine what they are doing and getting them involved.</li> <li>Identify partnerships for funding opportunities and eliminate duplication.</li> <li>Search ways to fund bike path improvements along with other walkways.</li> </ul>	End: December 2025	Lancaster Fairfield Public Transit and Fairfield County Health Department	

S.M.A.R.T. Objectives

✓ Specific ✓ Measurable ✓ Achievable & Actionable ✓ Relevant

Can it be done given the time frame and resources? Should it be done?

When will it be done?

**▼**Time-oriented

## Fairfield County Community Health Improvement Plan (CHIP) – Transportation Access Work Plan

the county are aware of the committee.	Objective 3.a.2: By December 2025, increase the activity of the Transportation Advisory Committee (more members, more meetings, and greater awareness).	Baseline: Current state of committee: some county agencies are unaware of the committee.  Target: Meetings and membership of the Transportation Advisory Committee increase by 10%. Agencies involved with transportation in the county are aware of the committee.	<ul> <li>Re-engage current members</li> <li>Invite and recruit new members</li> <li>Determine a set schedule for meetings</li> <li>Include additional pedestrian/bike topics into the committee</li> <li>Use maps to identify gaps in service</li> <li>Create maps for public use</li> <li>Address rural plan for transportation</li> </ul>	End: Ongoing (target by December 2025)	Fairfield County 2-1- 1 Mobility Manager and Lancaster Fairfield Public Transit	
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S.M.A.R.T. Objectives

**✓** Specific **✓** Measurable

Achievable & Actionable

Relevant

**▼**Time-oriented

How will you know it is done? Can WE measure it?

Can it be done given the time frame and resources?

Should it be done?

### **Work Plan Active Transportation Plan**

Fairfield County Health Department 1550 Sheridan Dr. Lancaster, OH 43130



Community: Lancaster, Ohio

**Strategy: Active Transportation Plan** 

### **Target Outcome:**

Existing conditions analysis and initial community engagement for the City of Lancaster provides an understanding of active transportation needs, vision and goals, as evidenced by community feedback, finalized vision and goals, and action plan for moving forward towards creating an Active Transportation Plan.

Process Objectives	Related Activities	Agency or Person	Specific for Each	Dates Activity	Evaluation Measures
		Responsible	Start	End	
By January 31, 2023,     Fairfield County Health     Department will have a     finalized workplan timeline.	<ul> <li>Contact Toole         Designs/Danielle</li> <li>Work with ODH to finalize         workplan</li> <li>Review ODOT guide and         template</li> <li>Watch AT Academy classes</li> </ul>	Fairfield County Health Department Employee: • Hannah Josefczyk, Health Educator	9/19/2022	1/31/2023	Completed workplan and timeline

### Q1: Nothing to report

Q2: The following activities were conducted in Lancaster, Ohio, in Quarter 2:

**October 2022**: Meeting with Sally and Danielle on 10/18 to talk about Active Transportation Planning for Lancaster. We set up monthly check in meetings.

and workplan. Revised timeline an December 2022: Challenges: finding information at Upcoming Planned Activities:	eline on 11/1 and sending it to Sally & Ind workplan 11/16.  Soout previous AT plans and work in the s		t with Sally- sl	ne provided s	uggestions on timeline
Q3:					
Q4:  2. By January 31,2023, Fairfield County Health Department will have formed or joined a steering committee that represents all members of the community.	<ul> <li>Hold conversations with City of Lancaster partners to understand level of interest and engagement and form a working group to create a plan</li> <li>Find community members/residents to join</li> <li>Ask those residents if they would join the committee</li> <li>Form/join committee</li> </ul>	Fairfield County Health Department Employee: • Hannah Josefczyk, Health Educator	9/19/2022	1/31/2023	<ul> <li>Steering committee</li> <li>List of members</li> </ul>
Q1: Nothing to report					
· ·	conducted in Lancaster, Ohio, in Quarter embers for steering committee started. ctivities:	r 2:			
Q3:					
Q4:					

3. By April 28, 2023, Fairfield County Health Department will have engaged the community and reached underrepresented communities.	•	Review existing plans and policies and collect data on non-motorized vehicle crashes, roadway inventory, local land use, etc.  Use Community Engagement template to choose community engagement activities that would be best for the community Identify underrepresented groups in the community and methods for reaching them Plan community engagement activities (define what we want to ask the community)  Conduct community engagement activities that reach underrepresented communities	Fairfield County Health Department Employee: • Hannah Josefczyk, Health Educator	1/3/2023	4/28/2023	•	Data collected in the community Members of the steering committee Completed community engagement activities and demographics of people reached
Q1:							
Q2:							
Q3:							
Q4:							
4. By April 28, 2023, Fairfield County Health Department will have developed a vision and goals for Active Transportation Planning.	•	Reference Walk.Bike.Ohio's vision and goals Create community specific vision and goals from community engagement activity Work with steering committee to create/ finalize vision and goals and present vision and goals to steering committee	Fairfield County Health Department Employee: • Hannah Josefczyk, Health Educator	1/3/2023	4/28/2023	•	Completed vision and goals Residents and community partners feedback on vision and goals Revised vision and goals based on feedback

•	Get feedback on vision and goals from residents and community partners Revise as needed Submit summary report and feedback to ODH				
Q1:				•	•
Q2:					
Q3: Q4:					
5. By June 30, 2023, Fairfield County Health Department will have created an inventory of existing conditions (plans, policies, mapping data, summary/map) and prepare data of findings.	<ul> <li>Review existing plans and policies (mapping data, summary/map of walking/biking facilities, need/demand analyses from ODOT, crash history)</li> <li>Complete table 2 and 3 of ATP Development Guide template</li> <li>Prepare data</li> <li>Final report of policies and data</li> <li>Submit summary report and assessment documents to ODH</li> </ul>	Fairfield County Health Department Employee: • Hannah Josefczyk, Health Educator	3/6/2023	6/30/2023	<ul> <li>Review of existing plans, policies and supportive programs that affect the planning area</li> <li>Prepared data</li> </ul>
Q1:	<u>'</u>		1		
Q2:					
Q3: Q4:					

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#### **Social Services**

- YMCA
- Fairfield County 2-1-1 Information and Referral Services
- Fairfield County Job and Family Services
- Catholic Social Services
- Faith-based communities
- Fairfield Center for disABILITIES
- United Way
- Big Brothers, Big Sisters
- Canal Winchester Human Services
- Lancaster-Fairfield Community Action Agency

### **Senior Services**

- Meals on Wheels
- New Horizons
- Central Ohio Area Agency on Aging

#### **Behavioral Health**

- ADAMH
- New Horizons
- The Recovery Center in Lancaster
- Mental Health America

### **Clinical Services**

- Fairfield Medical Center
- Diley Ridge Medical Center
- Fairfield Community Health Center
- The Recovery Center in Lancaster

### **Community**

- County parks
- Central Ohio Transit Authority
- Fun Bus

### **Schools & Universities**

- OSU extension Fairfield County
- Youth clubs
- Schools (general)
- After-school programs

### **Government**

- Fairfield County Health Department
- Parks and Recreation Department
- Lancaster-Fairfield Public Transit
- Fairfield County Commissioners
- Fairfield County Emergency Management and Homeland Security
- Fairfield County Veterans Service Commission

### **Law Enforcement**

- Project FORT/ Major Crimes Unit
- Criminal justice system (general)

### **Fairfield County Health Needs Prioritization Participants**

### **Fairfield County Health Department**

Joe Ebel Baylie Karmie Bobby Persinger Stephanie Fyffe

# Fairfield County Department of Job and Family Services

Melanie Culbertson

# Fairfield County 2-1-1 Information and Referral Services

Jeannette Curtis

### **Fairfield Medical Center**

Teri Watson Janae Miller Resa Tobin Mike Kallenberg

### **Meals on Wheels**

Anna Tobin

### **Fairfield County ADAMH Board**

Marcy Fields

### **Fairfield County District Library**

Helen Bolte

### **Mount Carmel Health System**

Candice Coleman

### **Violet Township Fire Department**

Jason Smith JD Postage

# Alzheimer's Association Central Ohio Chapter

Lindsay Blackburn

### **Fairfield Community Health Center**

Lisa Evangelista Julie Rutter

# Project F.O.R.T/Fairfield County Overdose Response Team, Major Crimes Unit

Scott Duff

# Fairfield County Emergency Management Agency

Garrett Bleu

# Lancaster-Fairfield Community Action Agency

Melissa Hillis

### **Fairfield County Protective Services**

Leah Miller

### **Fairfield County Board of Health**

Teresa Wood

#### **New Horizons Mental Health Services**

Renee Klautky

### **United Way of Fairfield County**

Carrie Woody

### Substance Use Treatment and Prevention/Mental Health Care Access Work Group

**Fairfield County Health Department** 

Kimberly Yeager Public Health Nurse

Bobby Persinger Health Promotion Supervisor/PIO

Stephanie Fyffe Director of Nursing

**Fairfield Community Health Center** 

Lisa Evangelista CEO
Fairfield County ADAMH Board

Toni Ashton Prevention Coordinator

**Fairfield Medical Center** 

Resa Tobin Community Educator

**OhioGuidestone** 

Amanda Wattenberg Regional Vice President

**Mount Carmel Health System** 

Candice Coleman Manager, Community Benefit

# Community Outreach (community paramedicine, health screenings, and education) Work Group

**Violet Township FD** 

JD Postage Community Paramedic

**Fairfield County Park District** 

Marcey Shafer Director

**Lancaster-Fairfield Community Action Agency** 

Melissa Hillis Health and Nutrition Coordinator

**Fairfield Medical Center** 

Teri Watson Community Outreach Coordinator

**United Way** 

Emily Cordle Campaign Coordinator

**Fairfield Community Health Center** 

Julie Rutter Chief Nursing Officer

### **Transportation Access Work Group**

Fairfield County 2-1-1

Jeannette Curtis Executive Director

Lancaster-Fairfield Community Action Agency

Courtney VanDyke Planner

**Job and Family Services** 

Krista Humphries Deputy Director

**United Way** 

Carrie Woody CEO