Community Health Improvement Plan
Leon County, Florida
Provisional Draft, 2018
2017 - 2022
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Aligned National & State: Goals, Objectives & Measures – See Appendix A

CDC’s Community Guide
CDC’s Winnable Battles
Healthy People 2020
State Health Improvement Plan
Introduction

A Community Health Improvement Plan (CHIP) is a long-term, systematic effort to address health issues in a community based on results from a community health assessment. The plan proposes priorities for action and is used by health and other governmental, education, and social service agencies and organizations to implement policies and programs that address health. Health is essential to well-being and full participation in society, and ill health can result in suffering, disability and loss of life. The economic impacts of health have become increasingly apparent. The health of our nation can be improved one community at a time through community engagement in ongoing health improvement planning.

A Community Health Improvement Plan guides policy and program decisions that enhance health and well-being. The plan reflects the understanding that the quality of the communities where we live, work, and play is as important to achieving good health as going to the doctor for a physical, proper nutrition, and adequate physical activity. There are many factors, or determinants, that affect health and have a tremendous influence on health outcomes.

This plan is designed to be implemented by community agencies and partners throughout the county. Working together we can reach our vision to be the healthiest state in the nation.

The Process

In the spring of 2011, DOH-Leon initiated a county-wide, community health assessment to determine public health priorities for the next five years. The health department chose the Mobilizing Action through Planning and Partnerships (MAPP) model to guide this comprehensive effort. MAPP is built on principles of broad community engagement and strategic planning, which prepare community partners to act together to address prioritized health issues and improve community health.

To assist with the process, DOH-Leon engaged two local health councils: Health Planning Council of Northeast Florida, who facilitated the overall assessment and community engagement processes; and Big Bend Health Council, who provided expertise on local health status data.

With results of the assessment in hand, several participants in the MAPP process split into work groups to develop goals, strategies, objectives, and initial activities to address the community health priorities. The results of their efforts were added to the community health improvement plan as the initial course of action/action steps. The work groups continued to meet and work on the activities that progress toward meeting the objective(s) for the goals. The 2012-2017 Leon County Community Health Improvement Plan (CHIP) was finalized in June 2013.

This combined effort identified three strategic health issues for the community:

1. Affordable Housing
2. Sustainable Employment
3. HIV/AIDS
4. Physical Activity
5. Nutrition
6. Maternal and Child Health
7. Mental Health

Within the MAPP process a Steering Committee was formed to help guide the assessment and implementation of the improvement plan. The following are organizations which have representatives serving on the Steering Committee:

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<thead>
<tr>
<th>Organization</th>
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<tr>
<td>Big Bend Cares</td>
<td>Florida A &amp; M University</td>
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<td>Big Bend Health Council</td>
<td>Leon County Health Department</td>
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<tr>
<td>Bond Community Health Center</td>
<td>Florida State University</td>
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<td>Capital Health Plan</td>
<td>Leon County Sheriff’s Office</td>
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<td>Capital Regional Medical Center</td>
<td>Frenchtown Revitalization Council</td>
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<td>Elder Care Services</td>
<td>Get Outdoors Florida</td>
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<td>Health Equity Alliance of Tallahassee</td>
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<td>Whole Child Leon</td>
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<td>The Foundation for Leon County Schools</td>
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<td>Tallahassee Memorial Hospital</td>
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2015 Plan Update

The CHIP is a living document and an ongoing process. As part of the CHIP process, an annual evaluation report is required to document successes, challenges/barriers, recommendations for changes in the goals, objectives or activities, and the creation of an updated version of the CHIP document. In addition, the annual report identifies the lead community group and the data source being used to monitor progress.

The 2013 Leon County Community Health Improvement Plan lacked project management, communication, and coordination with and between community partners and the community at large. While the Capital Coalition for Health may not have functioned as originally planned, another entity emerged to provide leadership.

The United Way of the Big Bend, in August 2013, created a Health Council comprised of executive level representatives from many community agencies that were also on the Capital Coalition for Health. The Health Council reports to the United Way Collective Impact Council, an arm of the United Way Board and the authority for funding priority related initiatives.
Tallahassee Memorial Hospital (Leon County) is required to complete a health needs assessment as one provision of the Patient Protection and Affordable Care Act of 2010 (ACA). This provision states that nonprofit hospitals will “conduct a community health needs assessment” and “adopt an implementation strategy” once every three years. The ACA also specifies that hospital assessments must “take into account input” from those who “represent the broad interests of the community (including) those with special knowledge of or expertise in public health.”¹ DOH-Leon and The United Way of the Big Bend are currently working with the hospital to meet their requirement and demonstrate the importance of conducting community health assessments every 3-5 years.

The focus on population-level health and the social determinants of health led the department to approach the upcoming assessment with a different focus: looking to the community for opportunities to collaborate with local organizations in conducting a robust community assessment and create a true community plan that could be used throughout the county. The current CHIP links the priorities identified by DOH-Leon, the Health Council, and Tallahassee Memorial Hospital.

2018 Goals and Objectives Update

Strategic Health Issue – Affordable Housing

According to the 2016 U.S. Census 5-Year Estimates, there were 111,111 occupied housing units in Leon County. About 58,014 (52.2 percent) of the housing units were owner-occupied and 53,097 (47.8 percent) were renter-occupied. Cost burdened households are households that pay more than 30 percent of their household income for rent or mortgage costs. About 44 percent of households (49,596 total households) paid more than 30 percent of income for housing.

In 2015-16, there were 866 Leon County Public School students who experienced homelessness. Of this number, 200 (23.1 percent) were living in an emergency or transition shelter; 597 (68.9 percent) were sharing housing with other persons due to loss of housing, economic hardship or a similar reason; and 48 (5.5 percent) were living in a hotel or motel. An estimated 21 percent (182 total) of homeless students were unaccompanied, not in the physical custody of a parent or legal guardian.

Goal AF1: Increase availability of safe and sanitary affordable housing units.

¹ http://www.recovery.gov/About/Pages/The_Act.aspx
Strategy AF1.1: Coordinate & Collaborate with local government, for profit and nonprofit entities committed to safe and sanitary affordable housing for Leon County residents \textit{(to be delineated from student housing)}.

- **Objective AF1.1:** Identify stakeholder groups to determine viability of collective impact.
  
  - **Objective AF1.1.1:** By September 30, 2018, establish coordinated list of resources in affordable housing sector.
  
  - **Objective AF1.1.2:** By December 31, 2018, identify implementation teams and assign strategies accordingly.
  
  - **Objective AF1.1.3:** By September 30, 2019, complete action plan.

Strategy AF1.2: Propose a program for the City and County to engage large employers in the effort to produce more affordable housing.

- **Objective AF1.2:** Encourage large employers to provide resources to support affordable housing.
  
  - **Objective AF1.2.1:** By September 30, 2018, understand the existing programs by looking at the Community snapshot of what’s available, identify targets to recruit and increase commitment by selected employers.
  
  - **Objective AF1.2.2:** By September 31, 2019, develop strategies that can be utilized to leverage employer participation.
  
  - **Objective AF1.1.3:** By September 30, 2019, complete action plan.

**Organization(s) Responsible:** Tallahassee-Leon County Affordable Housing Leadership Council: Affordable Housing Advisory Committee members, Leon County Affordable Housing Developer, Big Bend Habitat, Leon County, City of Tallahassee, Beatitude Foundation, Tallahassee Housing Authority, Leon County Schools, Ability 1st, Tallahassee Lenders Consortium, Big Bend Homeless Coalition, Bethel Community Development Corporation, Housing Finance Authority of Leon County, Tallahassee Urban League, City of Tallahassee Affordable Housing Consumer, Leon County Affordable Housing Consumer, City of Tallahassee Housing Developer, Big Bend Continuum of Care.

The ESSC-AHS would also like to invite the following to the discussion at some point:

Private Lenders (obtain at least 3), Board of Realtors, Representatives of HOAs (CONA/CANN), Frenchtown-Southside Advisory Committee and AREA (African American Realtors).
Strategic Health Issue – Sustainable Employment

According to the Florida Research and Economic Information Database Application (FREIDA), approximately 60 percent of the Leon County workforce are employed in: educational services, state government (excluding education and hospitals), healthcare and social assistance, retail trade and accommodation and food services. The top growing industries in Leon County are: arts, entertainment and recreation; construction; management of companies and enterprises; healthcare and social assistance; and professional, scientific and technical services. Each of these industries is projected to grow by more than 15 percent by 2023.

The percentage of households earning less than $10,000 per year in Leon County in 2016 was greater than the statewide percentage. Public health services are critical in communities where many residents do not make enough to live on. State government leaders and university faculty – many of whom receive health benefits -- contribute to the numbers making more than $100,000.

Income provides economic resources that frame choices about housing, education, child care, food and medical care. Poor families and individuals are most likely to live in unsafe homes and neighborhoods, often with limited access to healthy foods, employment options and quality schools.

**Compared to all Florida counties, Leon has the second highest ratio of income inequality in the state.** For the latest 5-year period, the income limit for the top earning 20 percent in the county is 5.4 times the income of the bottom 20 percent of the households.

The distribution of income in Leon County is fairly similar to that of the state as a whole, with some notable exceptions: the largest discrepancy is found in the lowest levels of income, with 10.7 percent of county households having income less than $10,000 compared to 7.5 percent for the state; the county has proportionally fewer households with income in the $50,000 - $74,999 range, with 16.5 percent compared to 18.3 percent for the state; and the county has proportionally more households with incomes in the $100,000-$149,999 range, with 12.3 percent compared to 11.2 percent for the state.

Improving job retention is essential for Leon County therefore, sustainable employment would be increased by helping the low-income earners or people in the community improve their skills thereby assisting them to progress from short-term, entry-level jobs to better jobs.

**Goal SE1:** Minimize barriers to sustainable employment.
Strategy SE1.1: Increase opportunities for employers and skilled candidates in targeted sectors.

- **Objective SE1.1:** Align the needs of employers with candidate skills and qualifications.
  - **Objective SE1.1.1:** By September 30, 2018, calculate community baseline.
  - **Objective SE1.1.2:** Immediate and ongoing, increase the number of individuals with sustainable employment opportunities.
  - **Objective SE1.1.3:** By December 31, 2018, increase number of direct pipeline work-based learning models.

Strategy SE1.2: Increase transportation opportunities for employees.

- **Objective SE1.2:** Determine limits of current public transportation system.
  - **Objective SE1.2.1:** By June 30, 2018, increased transportation options outside of Star Metro hours, decrease amount of time it takes to get from promise zone areas to employment centers, and increase transportation options outside of traditional work hours.

**Organization(s) Responsible:** Career Source Capital Region, Early Learning Coalition (ELC), Emergency Care Help Outreach (ECHO), Tallahassee Housing Authority (THA), Star Metro, City of Tallahassee, Bond Health Center, Neighborhood Medical Center, FSU College of Medicine, Leon County Schools- Lively and ACE, Care Point, Tallahassee Chamber of Commerce, Big Bend Minority Chamber of Commerce, TCC Center for Workforce Development, Office of Economic Vitality (OEV).

**Strategic Health Issue – HIV/ AIDS**

The prevention and control of communicable or infectious disease is essential to public health. Some communicable diseases, including HIV/AIDS and other sexually transmitted infections (STIs), have a markedly higher incidence rate in the county. **Among Florida’s counties, Leon had the 7th highest rate for HIV and the 8th highest rate for AIDS cases.** Racial disparity exists in new HIV and AIDS cases for Leon County, where blacks were about 10 times more likely than whites to be diagnosed with HIV and AIDS.

For the 2014-16 period, men who have sex with men (MSM) accounted for about 71 percent (147 diagnoses) of the new HIV positive diagnoses in Leon County, compared to 60 percent
statewide. Adults 20-29 years of age represent 50 percent of new HIV infections. Blacks accounted for 83 percent of HIV/AIDS deaths in Leon County. In addition, they were seven times more likely than whites to die from HIV/AIDS. Deaths from HIV/AIDS is an indication that medication is not managed properly or individuals may be out of care for extended periods of time.

**Goal HA1:** Reduce New HIV infection in Leon County.

**Strategy HA1.1:** Increase knowledge and availability of Pre-Exposure Prophylaxis (PrEP).

- **Objective HA1.1:** Reduce the number of new diagnosed by at least 10% from the baseline of 3 years average from 2014 in 2017 to 184 newly diagnosed by 2017-2020.
  - **Objective HA1.1.1:** By October 30, 2018, increase knowledge and awareness in PrEP to decrease new infections.
  - **Objective HA1.1.2:** By October 31, 2019, increase knowledge of PrEP.

**Strategy H/A1.2:** Increase PrEP marketing within the Leon County area.

- **Objective HA1.1:** Reduce the number of new diagnosed by at least 10% from the baseline of 3 years average from 2014 in 2016 to 184 newly diagnosed by 2017-2020.
  - **Objective HA1.2.1:** By September 1, 2018, increase knowledge of PrEp.
  - **Objective HA1.2.2:** By August 1, 2018, increase knowledge of PrEp.
  - **Objective HA1.2.3:** By January 30, 2019, increase knowledge of PrEp.
  - **Objective HA1.2.4:** By December 1, 2017 through 2022, increase knowledge of PrEp.
  - **Objective HA1.2.4:** By December 1, 2017 through 2022, increase of PrEp.

**Strategy HA1.3:** Develop a system for PrEP delivery within the Tallahassee area.

- **Objective HA1.1:** Reduce the number of new diagnosed by at least 10% from the baseline of 3 years average from 2014 in 2016 to 184 newly diagnosed by 2017-2020.
  - **Objective HA1.3.1:** By March 15, 2018, ............... 
  - **Objective HA1.3.2:** By March 30, 2018, ............... 
  - **Objective HA1.3.3:** By December 31, 2018, ............... 

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Goal HA2: Increase Access to Care for people newly diagnosed.

Strategy HA2.1: Establish a seamless system between testing and care treatment to facilitate access and ensure linkage.

- **Objective HA2.1**: Increase the number of newly diagnosed individuals who are linked to HIV medical care within one month of diagnosis to 100% from baseline (to be established) by Jan 1, 2018.
  - Objective HA2.1.1: By March 1, 2017, ............
  - Objective HA2.1.2: By December 30, 2017, ............
  - Objective HA2.1.3: By June 30, 2018, ............

Goal HA3: To stop the AIDS pandemic in Black communities by engaging and mobilizing Black institutions and individuals in efforts to confront HIV.

Strategy HA3.1: Connect community Members.

- **Objective HA3.1**: Establish Black Treatment Advocates Network (BTAN) in Leon County FL and surrounding counties.
  - Objective HA3.1.1: By December 30, 2017, ............

Strategy HA3.2: Successful launch the BTAN chapter.

- **Objective HA3.2**: Establish Black Treatment Advocates Network (BTAN) in Leon County FL and surrounding counties.
  - Objective HA3.2.1: By March 1, 2018, ....................
  - Objective HA3.2.2: By September 1, 2018, ....................
  - Objective HA3.2.3: By October 1, 2018, ....................
  - Objective HA3.2.4: By November 1, 2018, ....................
  - Objective HA3.2.5: By November 1, 2018, ....................
  - Objective HA3.2.6: By December 1, 2018, ....................
  - Objective HA3.2.7: By January 1, 2019, ....................

Goal HA4: Increase knowledge in the community of what services are available for people living with HIV.

Strategy HA3.1: Inform people of services available.

- **Objective HA3.1**: Decrease stigma of being HIV positive by increasing knowledge through outreach/education as evidence by??
  - Objective HA3.1.1: By December 30, 2017, ............
Objective HA3.2.1: By March 1, 2018, ........................

Objective HA3.2.2: By July 1, 2018, ........................  ☀

Objective HA3.2.3: By November 30, 2018, ........................  ☀

Objective HA3.2.7: By January 1, 2019, ........................  ☀

**Organization(s) Responsible:** Leon County Health Department, Ryan White Recipients
(Big Bend Cares, Neighborhood Medical Services, Bond Medical); MAACA, FSU Health Services, FAMU Health Services, AETC, AIDS Education and Training center, CBOs, Department of Health, Healthcare Providers, DOH/DIS Linkage coordinator, Community Partners, Members, BTAN, People living with HIV.

**Strategic Health Issue – Physical Activity**

Regular physical activity improves overall health by preventing many adverse health outcomes. Physical activity affects many health conditions, and the specific amounts and types of activity that benefit each condition vary.

In 2016, 64.32% of Leon County residents were overweight or obese, with Blacks having a higher percentage when compared to Whites. A difference was also seen between races regarding sedentary lifestyle. In terms of getting at least thirty minutes of physical activity daily, the percentage of respondents to the neighborhood survey (55%) was equal to the overall county.

**Goal PA1:** To promote walking as a way of maintaining health and managing chronic disease with an annual walk hosted by cross sector, community partners.

**Strategy PA1.1:**

- **Objective PA1.1:** By December 31, 2018, join efforts to organize one cross-sector community walk engaging neighborhoods, schools, churches and businesses.  ☀
  - **Objective PA1.1.1:** By August 2018, ........................  ☀
  - **Objective PA1.1.2:** By December 2018 ........................  ☀
  - **Objective PA1.2.1:** By January 2019 ........................  ☀
  - **Objective PA1.2.2:** By February – March 2019 ..........  ☀
  - **Objective PA1.2.3:** By April – May 2019 January 30, 2019 ..........  ☀
  - **Objective PA1.2.4:** By June-Aug 2019 ........................  ☀
Strategy PA1.2:

- **Objective PA2.1:** By December 31, 2022 hold one annual cross-sector community walk increasing participation by 20% from previous year or 100% from baseline. ☀️
  - **Objective PA1.2.1:** By December 2020................. ☀️

**Organization(s) Responsible:** Tallahassee Memorial HealthCare, Greater Bond Neighborhood, ECOP, CHIP Workgroup

**Strategic Health Issue – Nutrition**

Eating more fruits and vegetables adds nutrients to diets, reduces risk for chronic conditions, and helps to manage body weight.

According to the 2016 BRFSS 34.5% of Leon County adults had a healthy weight. Sixteen percent reported they consumed five or more servings of fruits or vegetables per day. This rate was lower than the state’s average of 18.3%, but the difference was not statistically significant. Among racial groups, Blacks were less likely to report they consumed five or more servings of fruits or vegetables per day. In comparison, 50% of respondents stated they consume five or more servings of fruits or vegetables per day on the neighborhood survey. This is significantly higher than the overall county rate.

Focus neighborhoods – Frenchtown, Macon and South City have community gardens that are different development stages. The gardens are supported by FAMU and UF/Leon County Cooperative Extension offices to assist communities in planting and producing reliable food items for consumption.

**Goal N1:**

**Strategy N1.1:**

- **Objective N1.1:** By December 31, 2018, assess current water/sugar-sweetened beverage consumption behaviors and organizational policies at two identified Title 1 Leon County Schools. ☀️
  - **Objective N1.1:** By June-August 2018, ............... ☀️
  - **Objective N1.2:** By January-March 2018, ............... ☀️
  - **Objective N1.3:** By August-October 2018, ............... ☀️
Objective N1.4: By December 31, 2018, ................

Objective N2.1: By January 1, 2019, increase awareness about the consumption of sugar-sweetened beverages and its associated risk. 🌟
- Objective N2.1: By August-October 2018, ................ 🌟
- Objective N2.2: By August-October 2018, ................ 🌟
- Objective N2.3: By August-October 2018, ................ 🌟
- Objective N2.4: By January 2019, ..................... 🌟
- Objective N2.5: By February 2019, ..................... 🌟

Objective N3.1: By May 30, 2019, decrease the number of teachers, staff and students who consume one or more sugar-sweetened beverages per day by 10% from baseline. 🌟
- Objective N1.1: By March 2019, ..................... 🌟

Objective N4.1: 🌟
- Objective N1.1: By June – August 2019, ................ 🌟
- Objective N1.2: By August 2019 - 2022, ................ 🌟

Organization(s) Responsible: TMH, ECOP, CHP, Champions, Members of Priority Area, Workgroup.

Strategic Health Issue – Maternal and Child Health

The well-being of mothers, infants and children determines the health of the next generation and can help predict future public health challenges for families, communities, and the healthcare system.

In the 2014-16 period, 60 infants died in Leon County before their first birthday. Significant and persistent disparities by race are found in Leon County. Both black and white infant mortality rates have decreased overall, but in the most recent period (2014-2016) black mothers were approximately two times more likely to have an infant die than white mothers.
For 2014-16, 10.2 percent of Leon County babies were born premature for an average of 311 babies per year. Looking at major racial differences in prematurity, black babies are 58 percent more likely to be born prematurely than white babies; a 12.7 percent black prematurity rate compared to 7.9 percent for white babies in 2014-16.

Overweight and obese women have increased risks of preterm birth, low birth weight and infant death. In addition, smoking before and during pregnancy is associated with low birth weight and heightened risk for sudden infant death, among other notable maternal complications.

For the 2014-16 period, 82.1 percent of all Leon County mothers initiated breastfeeding in the hospital, an increase from 76.3 percent since reporting began in 2004. Breastfeeding practices vary considerably by maternal race, age and education. Black mothers initiate breastfeeding at significantly lower rates than white mothers; for the latest reporting period, only 71.5 percent of black mothers in Leon County initiated breastfeeding compared to 89.6 percent of white mothers.

**Goal MCH1:** To Reduce Infant Mortality

**Strategy MCH1.1:** Develop cross-sector communication initiative to women concerning having a healthy baby.

- **Objective MCH1.1:** Improve infant mortality by 3% within Leon County by partnering with local MCH organizations to develop media campaigns, workshops and MCH materials for the community by 2022.
  - **Objective MCH1.1.1:** .................. ☀
  - **Objective MCH1.1.2:** .................. ☀
  - **Objective MCH1.1.3:** .................. ☀
  - **Objective MCH1.1.4:** .................. ☀

- **Objective MCH1.2:** Provide preconception workshops for non-pregnant females of reproductive ages.
  - **Objective MCH1.2.1:** By 2020, Identify organization that can partner to provide workshops for women. ☀
  - **Objective MCH1.2.2:** Every year, educate women on MCH initiatives through demonstrations and distribute infant products that educated women on infant health. ☀
  - **Objective MCH1.2.3:** By August-October 2018, ................. ☀
  - **Objective MCH1.2.4:** By January 2019, ................. ☀
  - **Objective MCH1.2.5:** By February 2019, ................. ☀
• **Objective MCH1.3.1**: By May 30, 2019, decrease the number of teachers, staff and students who consume one or more sugar-sweetened beverages per day by 10% from baseline.
  
  o **Objective MCH1.3.1**: By March 2019, .............

• **Objective MCH1.4**: 
  
  o **Objective MCH1.4.1**: By June – August 2019, ..............
  
  o **Objective MCH1.4.2**: By August 2019 - 2022, ...............

**Organization(s) Responsible**: TMH, ECOP, CHP, Champions, Members of Priority Area, Workgroup.

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*Strategic Health Issue – Mental Health*

Mental health is important at every stage of life. When people enjoy a sense of wellbeing and are free from mental illness, they are more likely to lead a productive life, maintain fulfilling relationships, participate in health-promoting behaviors, adapt to change, and cope with adversity.

The mental health questions were expanded to include information about specific categories of mental illness, including anxiety, depression and psychosis. These responses were notable for both broad levels of mental health issues and specific neighborhood issues. Broadly, all responses in this survey were significantly higher than national norms.

**Exhibit 11**: 
Mental Health among Focus Neighborhoods
In contrast to the state, Leon County whites were more likely to report that they had poor mental health and had a higher average number of poor mental health days than blacks. At both the county and state levels, black women had the highest average number of poor mental health days than other racial/ethnic groups and sex groups.

Leon County residents perceive slightly greater stress levels than people nationally. Local research found instances of stress related to where people live. Additionally, emergency rooms may be used for stress related symptoms by individuals without primary care. Women are more likely to visit the emergency room for a stress related illness.

**Goal MH1:**

**Strategy MH1.1: EVALUATE:** Develop recent surveys, regional mental health data (CHNA; UWBB Stress Survey; TMH Mental Health Attitudes Survey) findings into a comprehensive evaluation of regional behavioral health strengths and weaknesses.

- **Objective MH1.1:** Collect and integrate the findings of recent studies and other data into a comprehensive report. ☀
  - Objective MH1.1.1: Outline of key findings. ☀
  - Objective MH1.1.2: By January 1, 2018, complete final report. ☀

- **Objective MH1.2:** Modify the group’s goals as necessary. ☀

- **Objective MH1.3:** Present this report to the local community, healthcare stakeholders, and elected officials. ☀
  - Objective MH1.3.1: By June 30, 2016, give formal public presentation of report. ☀
• **Objective MH1.4**: Recommend a set of actions based on the report’s findings.

**Goal MH2:**

**Strategy MH2.1**: **EXPAND**: Expand the available pool of professional able to prescribe psychiatric medicine.

• **Objective MH2.1**: Support the current discussions between Apalachee, FSU, and TMD regarding the development of a psychiatric residency program in Tallahassee. ☀
  
  ○ **Objective MH2.1.1**: By January 1, 2019, development of psychiatric residency program at FSU College of Medicine. ☀

• **Objective MH2.2**: Engage the FSU College of Nursing to discuss enhancement of opportunities to train and employ psychiatric ARNPs. ☀
  
  ○ **Objective MH2.2.1**: By January 1, 2019, development of psychiatric ARNP specialty program at FSU College of Nursing. ☀

• **Objective MH2.3**: Develop a protocol linking non-prescriber mental health professionals with primary care physicians, to maximize the availability of medication.
  
  ○ **Objective MH2.3.1**: By June 30, 2018, development of community-wide voluntary protocol guiding the linking of family and general practice docs with non-prescribers to facilitate access to psychiatric medication. ☀

**Goal MH3:**

**Strategy MH3.1**: **EDUCATE**: Educate local communities about the availability and efficacy of non-prescriber professionals.

• **Objective MH3.1**: Develop an educational strategy to inform the public about the availability, benefits and success of mental health services. ☀
  
  ○ **Objective MH3.1.1**: By January 1, 2018, CEU offerings and public awareness campaign targeted to high intensity neighborhoods regarding efficacy of non-prescriber mental health treatment. ☀
• **Objective MCH2.1**: Partner with provider trade associations (FPS, NASW FL) to develop a messaging campaign around the benefits of non-prescriber treatment.

  o **Objective MCH2.1**: By January 1, 2018, CEU offerings and public awareness campaign targeted to high intensity neighborhoods regarding efficacy of non-prescriber mental health treatment.

  o **Objective MCH2.2**: CEU offerings and public awareness campaign targeted to high intensity neighborhoods regarding efficacy on non-prescriber mental health treatment.

• **Objective N3.1**: Partner with Big Bend 211, FSU, and the United Way to support the development of a comprehensive, tended data base of local mental health providers.

  o **Objective N1.1**: By June 30, 2018, Creation of ongoing mental health professional data base.

  o **Objective N1.1**: By January 1, 2018, CEU offerings and public awareness campaign targeted to high intensity neighborhoods regarding efficacy of non-prescriber mental health treatment.

  o **Objective N1.1**: By January 1, 2018, CEU offerings and public awareness campaign targeted to high intensity neighborhoods regarding efficacy on non-prescriber mental health treatment.

**Goal MH4:**

**Strategy MH4.1**: **ENGAGE**: Engage identified high behavioral health intensity communicates within Leon County to develop a concentrated, community sensitivity, and sustainable response to observed high need areas.

• **Objective MH4.1**: Identify key stakeholders in targeted High Intensity Communities.

  o **Objective MH4.1.1**: By December 1, 2017, Inclusion of community stakeholders in Engagement Committee Identify organization that can partner to provide workshops for women.

• **Objective MH4.2**: Engage stakeholders to develop a plan for community engagement to publicize the need health services.

  o **Objective 4.2.1**: By June 1, 2018, Development of neighborhood specific
strategies for community engagement in high intensity neighborhoods.

- **Objective MH4.3**: Develop a plan to expand and/or create necessary and/or create necessary access to services in High intensity communities.
  - **Objective MH4.3.1**: By December 30, 2018, Proposal to funding agencies and mental health service providers to expand services as necessary and appropriate in target neighborhoods.

**Organization(s) Responsible**: Committee Members particularly FSU, Apalachee, TMH, CRMC FSU College of Medicine, Center for Integrated Studies; Big Bend CBC; Health Department; Education Sub-Committee (TMH; CRMC; NAMI-T; Apalachee Center); Whole Child Leon; UWBB; Identified community stakeholders
### Appendix A: Alignment with National and State Goals, Objectives and Measures

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<thead>
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<tbody>
<tr>
<td><strong>Affordable Housing</strong></td>
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### Appendix A: Alignment with National and State Goals, Objectives and Measures contd.

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### Nutrition

**Goal OCD1:** Healthy People 2020 NWS-8 objective; CDC Winnable Battle: Nutrition, Physical Activity, and Obesity; State Health Improvement Plan

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### Maternal and Child Health

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