



Community Health Improvement Plan

Walla Walla County 2011-2013

Compiled and facilitated by the Walla Walla County Health Department. Community Health Improvement Plan (CHIP) developed through a collaborative process with numerous key stakeholders and community members.



Community Health Improvement Plan

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Definition

A community health improvement process uses community health assessment (CHA) data to identify priority issues, develop and implement strategies for action, and establish structures to ensure measurable health improvement, which are often outlined in the form of a community health improvement plan (CHIP)

MAPP/CHIP Process

Recognizing Walla Walla County's population growth and changing demographics, and the impact that growth would have on our public health and health care systems, WWCHD invited a broad coalition of key community leaders to participate in an organized process of strategic planning to improve the health of residents of the Blue Mountain Region. Using the National Association of City County Health Officer's (NACCHO) strategic planning tool, Mobilizing for Action through Planning and Partnerships (MAPP), the road to improvement began. This process led to the establishment of a CHIP and the launching of action groups to address the priorities outlined in the CHIP.

MAPP/CHIP Mission & Core Values



MISSION

Our mission is to strengthen our communities' health through the MAPP/CHIP process.

CORE VALUES:

Focus on the Public's Health

Encompass the Blue Mountain Region

Generate Data Driven Decisions

Embrace Diversity

Exercise Inclusiveness

Employ Collaboration

Promote sustainability of solutions to identified problems.



Timeline

August 2006 - April 2008 – Phases 1-3

- Organizing for success and partnership development
- Visioning – development of a mission and core values
- Performing assessments (see explanation on next page)

November 2009 – February 2010 – Phase 4

- Identification of strategic issues
- Funding awarded to WWCHD for development of a CHIP

February 2010 - January 2011 – Phase 5

- Formulation of goals and strategies for addressing the strategic issues
- CHIP development merged with MAPP process

January 2011 – November 2011 – Phase 6

- Determination of CHIP by analysis of both a public vote and a data based tool (Hanlon Method)

December 2011 – Phase 6

- The action cycle – a stage of planning, implementation, and evaluation
- Action groups are launched to address the CHIP



Assessments

Four assessments were conducted in Phase 3 of the MAPP process. These assessments are illustrated in the diagram below:

- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Community Health Status Assessment
- Local Public Health System Assessment



Three strategic issues emerged out of these assessments as areas of importance for the Walla Walla Community. These include *Increasing Community Collaboration*, *Decreasing Rates of Chronic Disease*, and *Increasing Access to Care*. Under these strategic issues were a number of goals, or strategies, that were recommended in order to address the overarching strategic issues just named. These goals or strategies are listed below by strategic issue.



Goals and Strategies Chart

GOAL: To Increase COMMUNITY COLLABORATION within Walla Walla

STRATEGIES

- Increase Social Networking in the area of Elder Care
- Increase Social Networking in area of Mentoring
- Increase Social Networking in area of Transportation
- Increase Social Structure in area of Homelessness
- Increase Prevention Education for Communicable Disease
- Increase Prevention Education for Unintentional Injury
- Increase Prevention Education of Teen Pregnancy
- Increase Prevention Education of Teen Substance Abuse
- Increase Prevention Education of Gang/Violence
- Increase Prevention Education in Womens' Health
- Increase Prevention Education in Mens' Health
- Increase Prevention Education in area of Adult Substance Use
- Increase Access to Resources for Teen and Adult Job Opportunities
- Increase Access to Resources for Prenatal Care
- Increase Access to Resources for Parenting Skills
- Increase Access to Resources for Affordable Housing

GOAL: Decrease CHRONIC DISEASE within Walla Walla County

STRATEGIES

- Increase Mental Health by lowering Suicide (Self-Harm) rates
- Increase Mental Health by lowering Teen Contemplation of Suicide rates
- Decrease Substance Abuse of Alcohol
- Decrease Substance Abuse of Tobacco
- Decrease Substance Abuse of Prescriptions
- Lower rates of Obesity through Better Nutrition
- Lower rates of Obesity through increased Physical Activity

GOAL: Decrease CHRONIC DISEASE within Walla Walla County

STRATEGIES

- Increase Preventative Services in area of Annual Exams
- Increase Preventative Services in area of Screenings
- Increase Preventative Services in area of Womens' Health
- Increase Preventative Services in area of Mens' Health
- Increase Preventative Services in area of Oral Health
- Increase Number of Available Psychiatric Services
- Increase Eligibility for Psychiatric Services
- Increase Services for Adolescent Substance Abuse Treatment
- Increase Access to Medical Services



How We Prioritized Strategies for the CHIP

The CHIP began to overlap with the MAPP process following Phase 5. At this point, the goals and strategies needed to be prioritized by their impact on our community and the potential for interventions. Two methods were employed in order to achieve this outcome.

Community Vote

The community vote provided all willing community members with the opportunity to provide input on which strategies should be selected for the CHIP.

Hanlon Method

The Hanlon Method is a data driven statistical tool that we used to compliment the community's feedback in the vote.

Key strategies are identified and become our Community Health Improvement Plan

Community Vote

Five venues for voting were selected over a period of three months:

- **Airport** – 4/28/2011
 - 28 voters
- **County chambers** – 5/5/2011
 - 23 voters
- **Farmers market** – 5/21/2011
 - 73 voters
- **WW Public Library** – 6/15/2011
 - 25 voters
- **Survey Monkey** – 7/19/2011
 - 106 voters

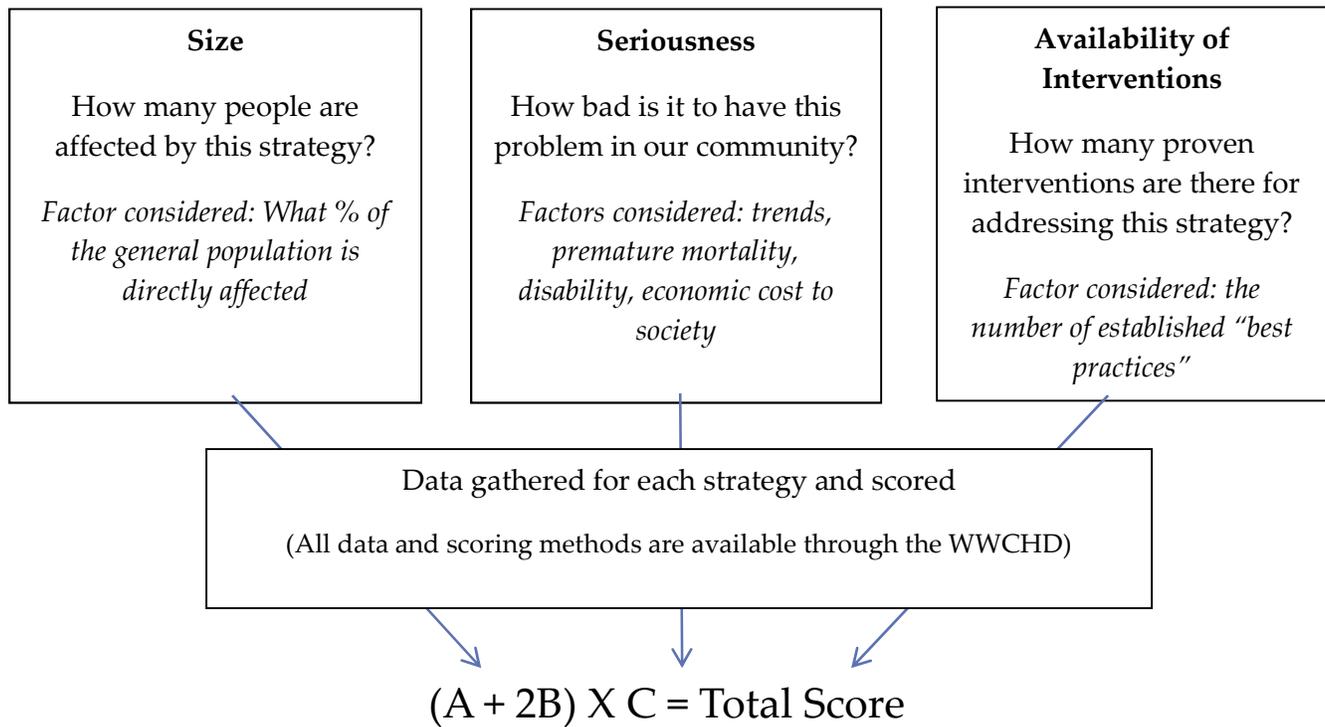
Each participant was asked to vote for the five strategies they felt should be included in the CHIP.

Goal: Decrease CHRONIC DISEASE within Walla Walla County		VOTE HERE
Strategy: Lower rates of OBESITY through BETTER NUTRITION		
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Community Health Indicator Report 2010</p> <p>Indicator: The percent of teens who are considered obese. Obese includes students who are in the top 15% for body mass index by age and gender.</p> <p>Indicator: Percent of adults age 18 and older who have a body mass index (BMI) greater than 35.</p> <p>GOAL: Teen Obesity: A reduction of 16.1% of adolescents age 12-19 considered obese. Adult Overweight & Obese: A reduction of 20.6% of adults considered obese.</p> </div> <div style="width: 50%;"> <p>Eating a colorful variety of fresh, frozen, canned, and dried fruits and vegetables (including 100% juice) is an easy and positive step in helping to lead a healthy life. Eating more fruits and veggies matters when it comes to maintaining a healthy weight—and it may even reduce your family's risk of many diseases, including heart disease, high blood pressure, and some cancers.</p> <p>Source: http://www.walla-wallacounty.com/healthier.org/</p> </div> </div>		
Strategy: Lower rates of OBESITY through increased PHYSICAL ACTIVITY		
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Community Health Indicator Report 2010</p> <p>Indicator: Percent of teens who engage in 60 minutes of physical activity everyday.</p> </div> <div style="width: 50%;"> <p>Physical activity is an essential component of a healthy lifestyle. In combination with healthy eating, it can help prevent a range of chronic diseases, including heart disease, cancer, and stroke, the three leading causes of death.</p> </div> </div>		

An example of a voting poster, which presented data on the scope of the issue in our community as well as background information about the topic.



Hanlon Method



Results

COMMUNITY RANKING	RANK	HANLON RANKING
Increase Prevention Education of Gang/Violence	1	Lower rates of Obesity through increased Physical Activity
Increase Number of Available Psychiatric Services	2	Lower rates of Obesity through Better Nutrition
Lower rates of Obesity through increased Physical Activity	3	Increase Prevention Education for Communicable Disease
Lower rates of Obesity through Better Nutrition	4	Increase Prevention Education of Teen Pregnancy
Increase Prevention Education of Teen Pregnancy	5	Increase Prevention Education of Gang/Violence
Increase Prevention Education of Teen Substance Abuse	6	Increase Prevention Education of Teen Substance Abuse
Increase Services for Adolescent Substance Abuse Treatment	7	Increase Preventative Services in area of Screenings
Increase Access to Resources for Parenting Skills	8	Increase Number of Available Psychiatric Services
Increase Eligibility for Psychiatric Services	9	Increase Social Structure in area of Homelessness
Increase Social Structure in area of Homelessness	10	Increase Preventative Services in area of Women's Health

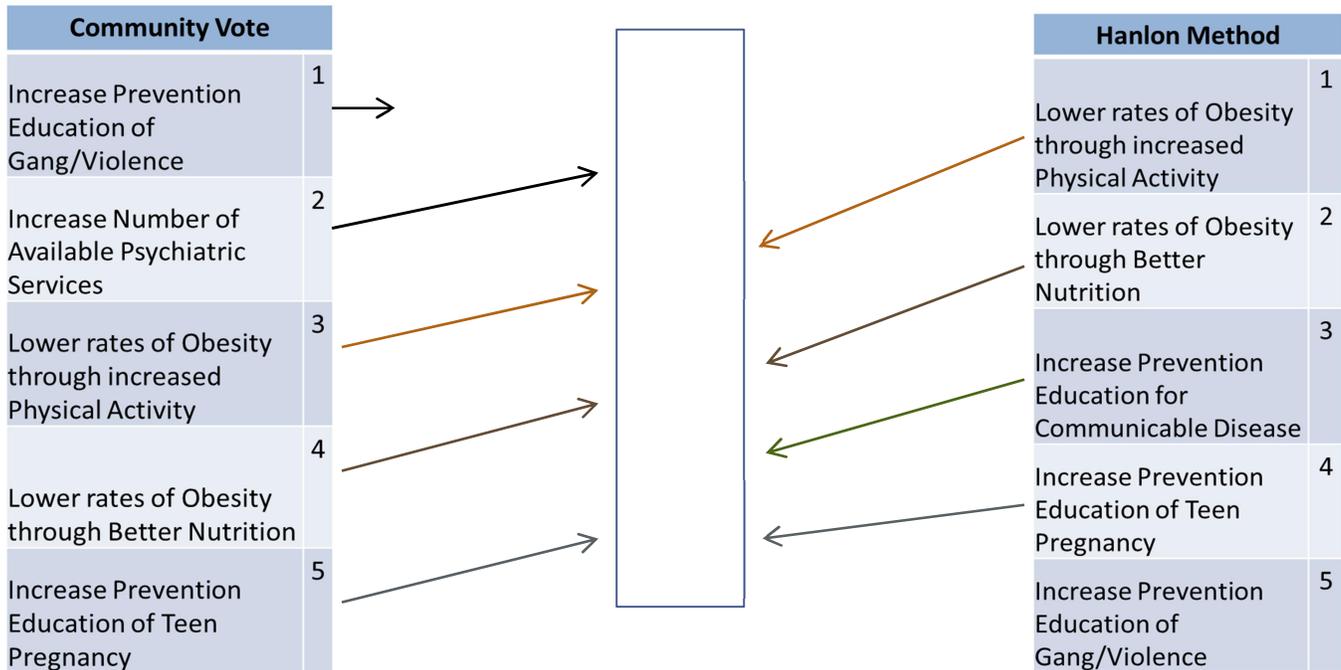
Community Health Improvement Plan



Increase Mental Health by lowering Suicide (Self-Harm) rates	11	Decrease Substance Abuse of Tobacco
Increase Access to Resources for Teen and Adult Job Opportunities	12	Increase Mental Health by lowering Teen Contemplation of Suicide rates
Increase Social Networking in the area of Elder Care	13	Increase Mental Health by lowering Suicide (Self-Harm) rates
Increase Access to Medical Services	14	Increase Prevention Education for Unintentional Injury
Increase Access to Resources for Affordable Housing	15	Decrease Substance Abuse of Alcohol
Decrease Substance Abuse of Alcohol	16	Increase Services for Adolescent Substance Abuse Treatment
Increase Mental Health by lowering Teen Contemplation of Suicide rates	17	Increase Access to Resources for Teen and Adult Job Opportunities
Decrease Substance Abuse of Prescriptions	18	Increase Social Networking in the area of Elder Care
Increase Prevention Education for Communicable Disease	19	Increase Prevention Education in Women's Health
Increase Access to Resources for Prenatal Care	20	Increase Access to Medical Services
Increase Preventative Services in area of Oral Health	21	Increase Social Networking in area of Transportation
Increase Prevention Education in area of Adult Substance Use	22	Increase Prevention Education in Men's Health
Increase Social Networking in area of Mentoring	23	Increase Eligibility for Psychiatric Services
Decrease Substance Abuse of Tobacco	24	Increase Preventative Services in area of Men's Health
Increase Preventative Services in area of Annual Exams	25	Increase Social Networking in area of Mentoring
Increase Prevention Education for Unintentional Injury	26	Increase Prevention Education in area of Adult Substance Use
Increase Preventative Services in area of Screenings	27	Increase Preventative Services in area of Oral Health
Increase Social Networking in area of Transportation	28	Increase Preventative Services in area of Annual Exams
Increase Preventative Services in area of Women's Health	29	Increase Access to Resources for Prenatal Care
Increase Prevention Education in Women's Health	30	Increase Access to Resources for Parenting Skills
Increase Prevention Education in Men's Health	31	Increase Access to Resources for Affordable Housing
Increase Preventative Services in area of Men's Health	32	Decrease Substance Abuse of Prescriptions
COMMUNITY COLLABORATION	ACCESS TO CARE	CHRONIC DISEASE



Thought Process for the CHIP



Community Health Improvement Plan

1. Lower rates of obesity through increased physical activity and better nutrition
2. Increase prevention education for communicable disease
3. Increase access to psychiatric services
4. Increase prevention education for teen pregnancy



Moving Forward with Action Groups

Action groups have been created to address each of the health priorities in the CHIP. The communicable disease and teen pregnancy action groups have been combined because of overlapping goals and objectives. Below are preliminary sets of potential overarching goals that were created by the action groups.

Obesity Action Group:

- a. Increase access to high quality nutritious foods
 - i. Target the worksite and healthy food options available, including healthier options for vending machines.
 - ii. Establish additional community gardens and programs to encourage their use.
 - iii. Create new distribution methods for healthy, low cost foods in convenient locations.
 - iv. Ensure that children in schools have access to healthy foods and an environment that encourages their consumption.
- b. Increase community knowledge about healthy foods and food preparation through education
 - i. Create cooking classes to increase knowledge about how to prepare wholesome food.
 - ii. Establish a social norms campaign to address people's perceptions of food and risk factors for obesity.
- c. Increase opportunities for consistent physical activity in our community
 - i. Expand opportunities for youth and at risk populations to enroll in programs that encourage physical activity.

Communicable Disease and Teen Pregnancy Action Group:

- a. Identify and implement a best practice(s) for youth education about risky sexual behavior, communicable disease, and pregnancy. This could also involve the parents of youth.
- b. Ensure that all providers in the community have up to date best practices and guidelines relating to communicable diseases. This could include treatment procedures, reporting, talking with patients, knowledge of community resources, etc.
- c. Explore more venues for providing educational information about communicable disease. The target of these efforts would be the general population.
- d. Launch a social norms campaign that addresses misconceptions about what types of risky behaviors are common and accepted.



Access to Psychiatric Services Action Group:

- a. Due to the recent sales and use tax increase in Walla Walla County for mental health and chemical dependency, the Blue Mountain Action Council, as the result of a Community Council study, is facilitating the access to psychiatric services action group. We will use their action plan as a part of our Community Health Improvement Plan.

Resources

NACCHO website on the MAPP process:

<http://www.naccho.org/topics/infrastructure/MAPP/index.cfm>

PHAB standards for accreditation:

http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1_0.pdf

“Our journey through MAPP and the initial Community Health Improvement Plan has been a long but productive process. We look forward to working with all of our community partners in improving the health of the citizens of Walla Walla County and the surrounding area.”

~Harvey Crowder, DVM, MS
Public Health Administrator
Walla Walla County Health Department