



## **Pike County Health Coalition Meeting Minutes**

**Website:** [www.pikecountyhealthcoalition.com](http://www.pikecountyhealthcoalition.com)

**Monday December 2, 2019**

**at Adena Pike Medical Center**

The meeting was called to order at 8:30 a.m. by Kim Jones, Director of Community Health of Adena Regional Medical Center and Nichole Smith, Accreditation Coordinator of Pike County General Health District. Kim welcomed everyone. The sign-in for the meeting indicated twenty-one (21) in attendance. The meeting ended at 1:00 p.m.

**Attendees:** Melanie Swisher, Brandi Hawthorne, Genna Scott, Ginny Dickerson, Susan Fish, Ryan Williams, Matt Brewster, Mona Minor, Linda Rigsby, Sherri Chancey, Rita Auton, Cynthia Brushart, Tammy Jones, Brooke Coriell, Andrea Hendrix, Cindy Balzer, Kim Jones, Kevin Shoemaker, Tabatha Tong, Nichole Smith, Dave Zanni

### **Opening Remarks**

Nichole Smith started the meeting with introductions from everyone in attendance. She then reviewed the overview of the day on materials that would be covered. She then spoke about the Pike County Health Coalition and why the coalition was formed. She then spoke on the topic of population outcomes and gave a brief explanation of what that is.

### **Community Health Assessment Overview**

Kim then began to lead this portion of the meeting to address the coalition of what the Community Health Assessment (CHA) was and why we continue to provide this to the community. She then reviewed the national model process the coalition used to formulate the 2019 Community Health Assessment. She stated the Mobilizing Action through Planning and Partnership (M.A.P.P) process was a six phase process utilized that guides the assessment of the community's health needs and the development of a community health improvement plan (CHIP).

Over 600 Community Health Assessment surveys were completed at various community stakeholder agencies. Five (5) community leader stakeholder interviews were completed as well as two (2) community focus groups.

The top health priorities that affect the community's health the most were the following: mental health, substance use disorder, nutrition and fitness improvement, tobacco and vaping prevention, social factors of health (transportation, housing, and access to care), child safety, and teen pregnancy prevention.

The top causes of death are heart disease, cancer, unintentional injury, pulmonary-respiratory disease, stroke, diabetes.

The top health behaviors and conditions are smoking, vaping and tobacco use, obesity, poor mental health, alcohol and substance use/abuse, poor nutrition, poor physical activity levels, poor dental health, and teen pregnancy.

The top environmental factors are economics and poverty, educational attainment, basic needs access (housing, food and transportation) safety, add healthcare access.

Kim then explained to the coalition the Community Themes & Strengths Assessment. Two focus groups were formulated to help complete this assessment. One focus groups was done at Shyville Senior Living Center with 4 participants 55 and older. They gave current and life-long experiences of their health background. Several take-a-ways from this focus group was they felt “forgotten”, they have taken on extended family members, and do not feel supported or feel viewed as “worth” supporting. The second focus group was 25 participants from Scioto Paint Valley Mental Health Center and focused on the mental health and substance abuse disorders. Stigma around behavioral and mental health, additional resources for wellness, better accessibility for health care with the stigma, and getting equitable health care was the topics of concern for this targeted population.

Nichole Smith presented the following slide on the Local Public Health Assessment for the Local Public Health System. She went on to address what this assessment looks like if the health system worked together to ensure The 10 Essential Services as well as measuring the performance of the local public health system. She stated Pike County performance score for the local public health system was 52%. The score was highest in Essential Service 7 and lowest in Essential Service 6 &9. Essential Service 7 was greater as the result of the linkage of people to needed personal health services. Essential Service 6 was the result of the review and improvement of laws and Essential Service 9 was the result of the local public health system not having a coordinated performance management system.

The last assessment that was addressed was the Forces of Change Assessment. This assessment was presented to identify forces such as social, economic, political, technological, environmental, scientific legal, and ethical. This is when the coalition members reflected on what trends have occurred to create opportunities and threats and what recently has affected our local public health system. The coalition was provided a worksheet to brainstorm.

### **FOCA Worksheet**

Nichole presented the information regarding the FOCA worksheet. The targeted groups that may have been identified throughout the top priority factors, top causes of death, top causes of environmental health, and top health behaviors. She asked the group to reflect on the community member audience on what may occur in the future, the trends that may have an impact, what forces are occurring locally, regionally, and nationally, and what barriers may pose an opportunity and threat? She then presented the group an example of the FOCA Chart and how this would look in our county. That the group would work on a SWOT Analysis to formulate the FOCA Chart. The coalition members then were given a Post It Note pad and began discussing the top priorities from the identified CHA survey. Kim then began to ask the group what factors present forces out of control and forces that we can control while having the group stick the Post Its Notes to a poster with the top priorities for mental health and substance abuse disorders.

Nichole Smith then began to continue to follow for the additional priorities of nutrition and fitness improvements, tobacco and vaping prevention, social factors of health, child safety, and teen pregnancy prevention.

Rita Auton began to discuss the Pike Healthy Lifestyle Initiative. She stated what the PHLI members were doing for their organization and what they continue to provide the local community. She stated how they have provided "My Plates Program" for the local third graders in all of the Pike County School Districts. Nichole then provided to the coalition members the performance information PHLI had been working on with throughout 2018-2019 school year. The PHLI organization had provided over 386 plates to the third grade students of Pike County to begin baseline data. She provided pictures of how the school nurses would present a brief presentation to the local third graders on personal hygiene and nutrition. The school nurse would play a game with students on these topics. At the end of the game the students would then receive a My Plate and USDA nutritional information. The plates that are provided to students are from the members of the PHLI by sponsoring community and fitness events to all Pike County residents. This money would then be taken to purchase the portion controlled plates for students. Rita then discussed that they are always trying to work with the local community for donations and spoke how the PHLI was organized. Kevin Shoemaker stated he would be willing to see if the workers from SODI would be willing to help in this obesity priority initiative.

### **Identify Health Priorities**

Nichole moved onto the social factors of health and began to speak to the coalition about the priorities, accomplishments, and uncompleted tasks from the previous CHA. She stated that many of the priorities that we have discussed are still in vitally important to help make progress in our community. Nichole further reported to the coalition that the previous Community Health Improvement Priorities were drug abuse, tobacco, and obesity. It would be best to concentrate on working on these previous priorities and move to add these additional priorities. This would allow the coalition to continue providing quality improvement and improved performance for the community. She then asked for a consensus from the group moving forward if they would like to continue to do this or add these additional priorities separately. Matt Brewster spoke and stated that he felt that it would be easier for the coalition to move forward by continuing with the current priorities and revamping the CHIP work plan by adding those additional topics as a subcategory. Dave Zanni agreed that the more that the coalition would take on the other priorities could undergo further complications. The group was in favor of the priorities to remain as Drug Abuse/Substance Abuse and provide key indicators referring to aspects of mental health, Tobacco/Vaping with key indicators referring to aspects in teen pregnancy and child safety, and Obesity/Nutrition & Fitness Improvement with key indicators referring to aspects in social factors of health.

### **Implementation Strategies**

Nichole then went on to briefly discuss the implementation strategies for these priorities. As the coalition moves forward she spoke on the goal for the coalition moving forward for the priorities. The strategies moving forward would focus on objectives, measures, action steps, timeframe, and progress reporting. This would be a brief overview at the next meeting at the Pike County Health Coalition. She spoke about the coalition looking at national objectives. The Healthy People 2020 was set by the US Department of Health and Human Services. The objectives would be based on the 12 Leading Health Indicator Topics from Healthy People 2020. She provided an example of the national objective and then

discussed briefly on how the coalition would create action steps moving forward throughout the year to meet our objectives. Nichole then stated that it would take at least 5 years' worth of data for the coalition to make progress. She stated the time frame was of importance to make sure the performance indicators were being reported to the provide quality improvement issue on what of strategies were working and what was not working. Progress reporting from the priority sub-committees would also be valuable in understanding if the activities are being completed at the scheduled time from the community priority subcommittee work group members.

### **Subcommittee Work Groups**

Nichole then went on to address the subcommittees and expectations of accountability. How each subcommittee would need to have evaluations and reporting of progress? The evaluation would need to address what would be evaluated, what worked well, what didn't, what would improve projects, and what would be considered successful and the conclusions that were drawn. She then went on to elaborate on the software provided from the Ohio Department of Health from the Office of Prevention and Innovation to the Pike County General Health District.

This software would help give indicators of population and performance accountability, as well as help in potential audit information for the health district. PCGHD would use Clear Impact Performance Management System. She then elaborated on the difference of population and performance accountability and what questions to consider on these topics. This software was a leading software program system that is recognized by organizations such as the National Institute of Health (NIH) and US Health Resources and Services Administration (HRSA). The coalition was given an example of the system and how it would reflect the Healthy People 2020 objectives.

Nichole then provided a brief overview of the performance management definitions such as result, indicator, and performance measures. PCGHD would be using a results based accountability program to track the population and performance accountability of the county as well as community health improvement priorities and the health district strategic plan. She explained that community partners from county agencies are wanting to measure how successful their programs are performing and this was a way for all community agencies to be able to share information and provide data information for potential grants, then it would be beneficial to all partners in aspects of funding opportunities.

The agency reporting would be the lead on the subcommittee representing the community priority. The coalition would have to have a report from the subcommittees monthly. The subcommittee would get a report quarterly on the performance indicators for the priority, annual report would be given on the priority, and a local public health assessment would be assessed of the agencies involved.

### **Wrap Up & Evaluation**

Nichole stated that more details would be discussed at additional coalition meetings on the subcommittee work groups and performance indicators. She asked the coalition members to please fill out the evaluation for the meeting and the results would be shared at the next meeting.

### **Next Meeting**

The group discussed the next meeting would be January 14, 2018 at 2:30 at the Pike County General Health District.

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**The coalition is encouraged to check the Pike County Health Coalition website. The next meeting date will be determined at a later date and will be posted on the coalition website. The location of the next meeting will be held at the Pike County General Health District.**