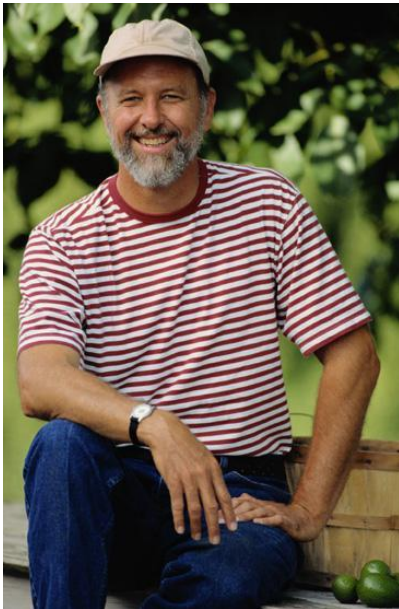




MARTIN COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN



SEPTEMBER 2012

MARTIN COUNTY HEALTH
COLLABORATIVE

Planning for a healthier Martin County

AN INVITATION TO THE COMMUNITY

The Martin County Health Collaborative is pleased to submit the Community Health Improvement Plan for Martin County. The development of this plan was an assessment process that brought together community representatives to identify priority community health issues. This plan should be used as a guide by the community, and used as a reference and foundation for the many health improvement efforts within the county. By implementing this plan over the next several years more people will receive critical health services, we will reduce health disparities, address the epidemic of obesity and reinforce Martin County as a great place to live.

Creating healthy communities requires a high level of mutual understanding and collaboration with community individuals and partner groups. This health plan is being presented to Martin County residents so that we can work together as partners to make our community a healthier place to live. It is with the participation of all residents who read and discuss this plan and assist with the strategies that we will assure a healthy community. We invite your participation and feed-back in this community health improvement effort.

We extend our gratitude to the many community partners who have spent numerous hours over the past several years to develop this plan. Their involvement and knowledge of our community has been instrumental in identifying the health issues for our community.

We thank you for taking the time to read this plan, to learn more about how you can help to assure a healthy community for yourself, your family and the members of the community.

Respectfully Submitted,

Mark J. Chittum, FACHE
Facilitator for
Martin County Health Collaborative

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Acknowledgements

The 2012 Martin County Community Health Improvement Plan is a collaborative effort of the many organizations and providers in the community with a commitment to improve the health of our residents. Listed below are the individuals who worked on the Improvement Plan either as a member of the Steering Committee and/or as a member of one or more of the subcommittees which developed the components of the plan. A complete list of community partners is listed in the Appendix. Much of the data upon which the plan is based comes from the 2010 Martin County Community Health Assessment prepared by Q-Q Associates. Finally, this Health Improvement Plan would not have been possible without the grant received from the Allegany Franciscan Ministries and the support of our Fiscal Agent, the United Way of Martin County.

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Community Health Improvement Plan

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MARTIN COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

EXECUTIVE SUMMARY

The Martin County Health Collaborative was established in 2009. The objective of the Collaborative is to improve the health of the residents of Martin County by conducting a health assessment and developing strategies to improve community health. With the completion of the Health Assessment in December of 2010 the Collaborative agreed to develop this Community Health Improvement Plan. The intent of this plan is to identify priority goals and strategies while fostering community partnerships in order to improve community health.

The Martin County Health Collaborative is a partnership of community agencies, providers and funders. The Steering Committee members include: Children Services Council of Martin County, Florida Community Health Centers, Martin County Board of County Commissioners, Martin County Council on Aging, Martin County Health Department, Martin County Healthy Start Coalition, Martin Health Systems, The United Way of Martin County and Volunteers in Medicine Clinic. The Collaborative is fortunate to have a broad spectrum of representatives from other community agencies playing an integral role in the development of the plan goals and strategies. Development of the plan is funded by a grant from the Allegany Franciscan Ministries with the United Way of Martin County as fiscal agent.

After reviewing the issues and recommendations contained in the Community Health Assessment three priority areas were identified for plan development. There is no specific timeframe for addressing the priority areas. Progress will be evaluated on a regular basis with revisions developed as needed.

The selected strategic priorities are:

- Education and awareness of existing health services
- Access to Primary Care Services
- Access to Mental Health and Substance Abuse Services

Community Health Improvement Plan

Within these three priorities five strategic issues were identified with goals and proposed strategies developed for each. This plan identifies each issue, a vision for the outcome, the goal and implementation strategies. Finally, there is a summary of action plans that are being developed.

The key to successful implementation of the Community Health Improvement Plan is collaboration among all segments of the Martin County community: government, community agencies, providers and funders. Fiscal resources are currently limited and no increase is expected in the near future. Thus the focus needs to be on improving the efficiency and effectiveness of existing services, limiting fragmentation and duplication, increasing public awareness of what services are currently available and using creative partnerships to enhance access and improve the health of Martin County residents.



Introduction

The Martin County Community Health Improvement Plan is prepared by the Martin County Health Collaborative and is a community-wide plan that identifies priority health issues and goals and strategies for addressing those issues. The plan is designed to guide health improvement activities within Martin County. It is intended to be a living document to be widely disseminated and updated as needed.

Martin County

Martin County encompasses approximately 556 miles bounded by Palm Beach County to the South, Lake Okeechobee to the west, St. Lucie County to the north and the Atlantic Ocean to the east. It includes the incorporated communities of Stuart, Sewall's Point and Jupiter Island and a number of unincorporated communities. The population in 2010 was 146,318 which is an increase of 15.5% from the 2000 population of 126,731. Martin County has an older population on average than the rest of Florida. Additional social and demographic data can be obtained from the Community Health Assessment.

Methodology

The Community Health Improvement Plan is the final stage of the MAPP process which is a strategic approach to community health improvement. MAPP stands for Mobilizing for Action through Planning and Partnerships, a nationally recognized approach to community health planning. The process incorporates previous planning activities over the past decade which culminated in the December 2010 Martin County Community Health Assessment. The Assessment included a demographic profile of Martin County, a community health profile, a Healthcare Access and Utilization profile, a community health survey and focus group surveys. The community health survey had 828 participants and the focus groups had 57 participants in five focus groups. Particular effort was made to ensure that minority and economically disadvantaged residents were included in the surveys. Based on the results of the community profile data and the community input from the survey and focus groups issues and recommendations were identified. These issues formed the basis for the development of the Community Health Improvement Plan.

Martin County Health Collaborative

Mission – To conduct a community health assessment, identify key issues and develop strategies to build a collaborative approach to improving and sustaining community health.

The Martin County Health Collaborative is a community-based organization composed of government agencies, social service agencies, healthcare providers and funders of community programs. They are joined together with the common purpose of developing partnerships to improve the health of the residents of Martin County. Working together they identified funding for the completion of the Community Health Assessment and the preparation of the Community Health Improvement Plan. They have also spent numerous hours participating in the Steering Committee and Subcommittees which have developed the goals and strategies for improving community health.

To develop the improvement plan the Collaborative established three subcommittees to examine the issues and recommendations contained in the health assessment. These subcommittees were assigned the task of evaluating the data, identifying the strategic issues/priorities, envisioning the outcome, developing goals and strategies and proposing action plans to implement the plan. The following is a summary of the issues, vision, goals and strategies that form the basis for the Community Health Improvement Plan and future implementation.

Issues, Visions, Goals and Strategies for a Healthier Martin County

The Community Health Assessment identified three issue areas for evaluation. They were: a) education and awareness of existing health services, b) access to primary care and c) access to mental health and substance abuse services. From these three areas the subcommittees identified five strategic issues and developed a vision for the future for each one.

Education and Awareness of Existing Health Services

Knowledge of community health resources is a continuing problem when addressing health issues in Martin County. Respondents to the Community Health Assessment Community Survey indicated that only 49.6% strongly or somewhat agreed that they knew how to get help for medical care. 51% knew where to go for substance abuse services and 55.5% knew where to go for mental health services.

The community health assessment focus groups supported the need for greater education awareness. As stated in the assessment “Participants felt that awareness of public health services was poor. They stated that there is not a network that provides the general public with enough information regarding health and social services.”

A recently completed survey on children and families by the Whole Child Connection reinforced the awareness problem. Respondents to the survey indicated a very low awareness of the major information and referral programs in the county.

To effectively address improved education and awareness the problem was divided into two strategic issues/health priorities. The first component addressed cooperation among services providers and the second addressed information and outreach to the public and nontraditional populations in the community

Strategic Issue/health priority 1 – How do we continue, facilitate and increase cooperation among Martin County Community programs, agencies and providers?

Vision – Martin County envisions a community where all service providers effectively and efficiently collaborate and share information to reduce fragmentation and duplication and provide the best possible services to Martin County residents.

Goal – Increase awareness of and coordination by health and social service providers regarding health and social services available for county residents.

Strategies

1. Promote “No Wrong Door” culture for access to services.
2. Develop education and awareness program to ensure that local providers and agencies are able to inform patients and clients of community services both within and outside their agencies.

Supporting Information – Martin County agencies have a good record of cooperation and working together. To maintain and increase this cooperation effective referral systems must be available. While ultimately a common application process is desirable, there is no funding for this type of system for the foreseeable future. The first step then is to take the existing referral systems and ensure they are as efficient and effective as possible. These agencies, Whole Child Connection, 2-1-1 and the Council on Aging will form the basis for connecting children, families and elders to needed services.

Two other aspects of an effective referral process must also be developed. The first aspect is ensuring that the agencies and providers are aware of the referral options for their patients/clients. The second aspect is for these agencies to assist in the referral process by becoming Community Advisors so that the application for services can start at any point of the system.

Strategic Issue/Health Priority 2 – How do we educate/reach out to the public and to nontraditional populations on available community health services?

Vision – Martin County envisions a community that thrives through access to and use of health information, services and support.

Goal – Increase awareness of health and related services available to Martin County residents.

Strategies

1. Create public information/social marketing campaign to inform Martin County residents on availability of and access to community health services.

Supporting Information – Martin County has a number of existing services that can be utilized by its residents. Barriers to understanding what is available exist due to culture, language, education levels and other factors. Understanding where and how residents obtain their information is also critical given the rise in electronic communication. Faith-based and other community centers also disseminate information to their people. Targeted and general information campaigns can be developed using diverse methods of communication to the public.

Access to Primary Care Services

The access to primary care services is multifaceted. The Community Health Assessment identified a number of health disparities in Martin County that disproportionately impacted non-whites compared to whites. Some health issues documented included: cancer, stroke, diabetes, pneumonia and influenza, HIV/AIDS, sexually transmitted diseases and teen pregnancies. Health disparities also existed for whites in the areas of higher rates of unintentional injuries and suicide. There are also a large number of residents who do not have any health insurance. The availability of primary care and specialists under the Medicaid program is also limited. Primary care services are available for low income individuals with or without Medicaid but the demand are high for reduced resources.

Prevention is another element in addressing access to primary care. There are high levels of obesity in both the child and adult population of Martin County. The prevalence of overweight children has cultural components that are exacerbated by lack of exercise and lack of healthy eating options. Reduction in obesity rates would significantly contribute to improving health in the community.

Based on these two aspects of improved health status, prevention and health care, two strategic issues/health priorities were developed.

Strategic Issue/Health Priority 3 – How do we decrease health disparities and improve the health of diverse communities in Martin County?

Vision – Martin County envisions a community where quality health services are available, affordable and accessible to all individuals and families

Goal – Martin County residents have on an equal basis the ability to quickly and efficiently obtain appropriate quality services from health care providers.

Strategies

1. Create collaborative approach to identifying and pursuing grant funds to address health service disparities in Martin County.
2. Promote solutions to address specific health disparities in Martin County.
3. Promote development of information on availability of health services.

Supporting Information – Improvements to access to primary care remain difficult due to the evolving changes in the healthcare system. To address the healthcare needs, creative thinking must be used to maximize partnerships and identify alternative funding.

Strategic Issue/Health Priority 4 – How do we promote healthy lifestyles including prevention, physical activities and healthy eating?

Vision – Martin County envisions a community that promotes a healthy lifestyle throughout the lifespan including proper nutrition, physical activity and reduction in obesity.

Goal – Promote wellness and prevention activities to assure Martin County residents have an opportunity to live a healthy lifestyle

Strategies

1. Utilize proven strategies to increase physical activity in the home, workplace and school.
2. Create collaborative plans in schools, health care providers and business to reduce being overweight, obesity and Type II diabetes.
3. Promote knowledge of reliable nutritional information and local resources to improve nutritional health.

Community Health Improvement Plan

Supporting Information – Prevention is integral to improving community health. Being overweight, obesity and lack of exercise increases the prevalence of certain chronic diseases leading to more frequent hospitalizations and higher healthcare costs. Disease prevention must focus on healthy food choices, increasing the use of park recreation activities available to our residents, and providing culturally appropriate information on the dangers of obesity.

Access to Mental Health and Substance Abuse Services

As reported by the Community Health Assessment community focus groups the respondents were dissatisfied with the availability of mental health and substance abuse services in the county. They felt that there were hardly any services available due to spending reductions. The respondents in the Community Survey included both mental health and substance abuse in their top 10 concerns for both difficulties in obtaining services and in the most important health issues facing the community.

Mental health and substance abuse services continue to be areas where program and funding reductions are significantly affecting services. As a result, one strategic issue was identified to focus on program preservation.

Strategic Issue/Health Priority 5 – How can Martin County maintain and improve access to, and awareness of mental health and substance abuse services?

Vision – Martin County envisions a community where mental health and substance abuse services are known, affordable and accessible.

Goal – Maintain and protect the availability of mental health and substance abuse services for Martin County residents.

Strategies

1. Promote effective methods for increased coordination among community providers and agencies to better utilize limited Martin County resources.
2. Identify grants and other alternative funding streams to support mental health and substance abuse services.
3. Enhance connectivity for those who suffer from mental illness and substance abuse to the primary care system.

4. Promote community awareness of mental health and substance abuse services.

Supporting Information – The effective delivery of mental health and substance abuse services has always been difficult. Insurance and other programs traditionally treated funding of physical and mental health separately. There are often different State and Federal agencies responsible for supporting mental health and substance abuse services leading to fragmentation and varying rules on services delivery. The perceived stigma also plays a significant role in the willingness of individuals to seek treatment. Programs related to gateway drugs, such as tobacco, are also important for a comprehensive approach to the issue. Finally, mental health patients often do not receive primary care services for physical problems leading to shorter lifespans.

Action Plans

The next step in the Community Health Improvement process is to transform planning into action. The subcommittees have already been working on specific programs to implement the strategies contained in the plan and improvements can already be identified. Listed in the Appendix are the action plans that are currently being reviewed and refined for possible implementation.

Appendix – Proposed Action Plans

1. Improve and enhance referral and access to health information resources in Martin County focusing on Whole Child Connection, 2-1-1 Palm Beach and Treasure Coast and Martin County Council on Aging.
2. Promote development of community advisors in community agencies and at providers to enhance “No Wrong Door” access to services.
3. Enhance communication and information exchange among local agencies and providers through regular use of existing newsletters, websites and related information mechanisms. Conduct regular information sharing meetings sponsored by the Martin County Health Collaborative, the Interagency Coalition and other forums.
4. Building upon the existing 2-1-1 process develop common card/brochure to distribute to residents with contact information for referral agencies. Brochure to be located at healthcare provider offices, libraries, churches and other community locations.
5. Increase the number of Martin County children with health insurance by developing mechanisms to enhance access to Kidcare insurance.
6. Identify grants and other programs to support screening of nontraditional populations in Martin County to reduce health disparities
7. Increase provider agency partnerships to provide health services such as Visiting Nurses working with social service agencies or mental health providers to enhance primary care.
8. Continue to support Volunteers in Medicine and determine ways to support service delivery.
9. Develop obesity reduction program possibly targeting Indiantown.
10. Promote physical exercise in the schools through expansion of the Peaceful Playground program.
11. Develop public information campaign to support action plans as needed.
12. Support New Horizon’s effort to improve primary care of mental health patients.
13. Develop Mental Health Collaborative in Martin County.
14. Institutionalize the Martin County Health Collaborative by establishing an administrative home and identifying funding support.