# PINELLAS COUNTY Community Health Action Team

**September 12, 2012** 





SPONSORED BY: PINELLAS COUNTY HEALTH DEPARTMENT

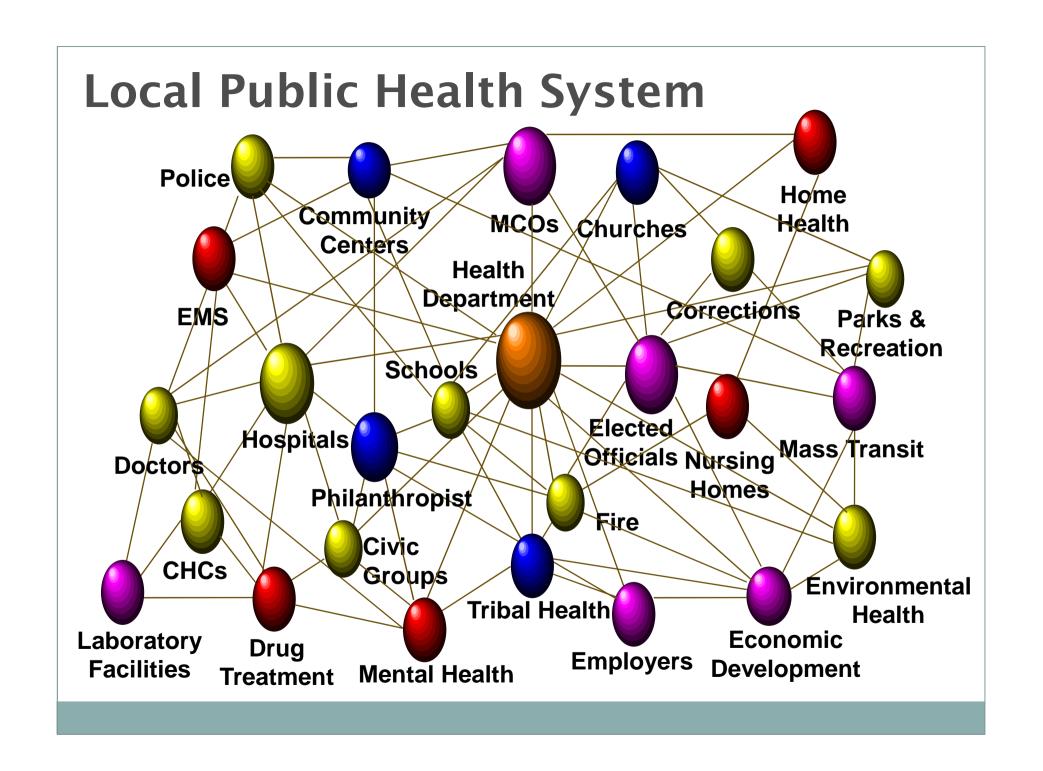
#### Introduction

- 2
- Who, what, where, when, why, and how
- Local Public Health System Overview
- State Health Improvement Plan
- CHA, CHIP, and MAPP overview
- Pinellas County Community Health Assessment overview

#### Introduction



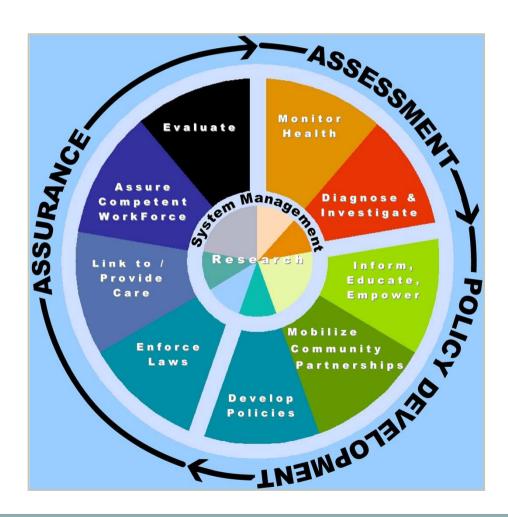
- Who: Community owned and led by CHAT
- What: Community Health Improvement Plan
- Where: Pinellas County
- When: 2013-2017 CHIP
- **Why**: core function of public health
- How: using the MAPP framework; based on CHA and other community assessments





Monitor Health Status Diagnose/Investigate Educate/Empower Mobilize Partnerships Develop Policies **Enforce Laws** Link to/Provide Care Assure Workforce **Evaluate Services** Research/Innovations

### Core Functions & Essential Services of Public Health



#### State Health Improvement Plan (SHIP)



- 2012-2015 SHIP
- Strategic Issue Areas:
  - 1. Health Protection
  - 2. Chronic Disease Prevention
  - 3. Community Redevelopment and Partnerships
  - 4. Access to Care
  - 5. Health Finance and Infrastructure

#### Community Health Assessment (CHA)

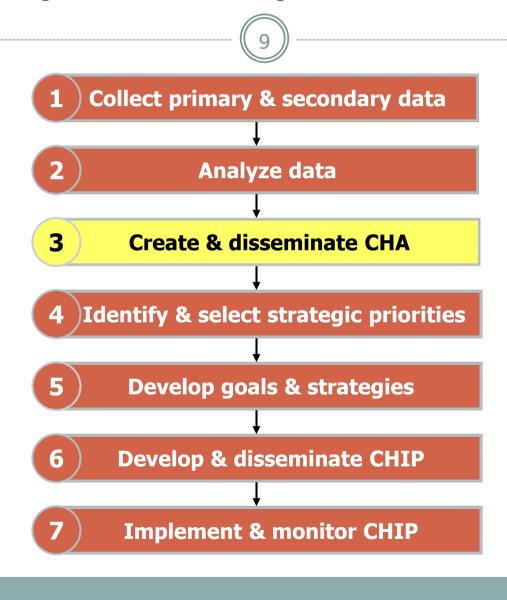


- The process of systematically collecting, analyzing, and using information to educate and mobilize communities, develop priorities, gather resources, and plan actions to impact health.
- Assessment is one of the core functions of public health and community health assessment is the foundation for improving and promoting healthier communities.

## Community Health Improvement Plan (CHIP)

- Long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process.
- Used by community partners to set priorities, coordinate and target resources, and outline strategies and structures to promote health.

#### **Community Health Improvement Planning**



#### **MAPP**



- Mobilizing for Action through Planning and Partnerships (MAPP)
- Community driven strategic approach to community health improvement planning developed by the National Association of County and City Health Officials.



#### MAPP ASSESSMENTS





#### Community Themes & Strengths

What is important to our community? Perceptions about quality of life? What assets do we have?

#### **Forces of Change**

What is occurring or might occur that will affect the LPHS or the community?

#### **Local Public Health System**

What are the activities, competencies, and capacities of our local public health system?

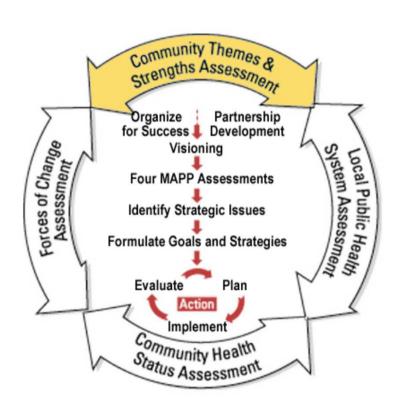
#### **Community Health Status**

What does our health status look like? How healthy are our residents?

IDENTIFY & SELECT STRATEGIC PRIORITIES

#### **Community Themes and Strengths**





The Community Themes and Strengths Assessment provides an understanding of the issues residents feel are important. It allows us to consider the concerns and perceptions of residents and ensure they have a sense of ownership and responsibility for the outcomes.

#### **Community Themes and Strengths**



#### Answers the following questions:

- What is important to our community?
- How is quality of life perceived in our community?
- What assets do we have that can be used to improve the health of our community?

#### **Community Themes and Strengths**



Understanding the experiences, perceptions, and priorities of community residents is a critical part of the MAPP process and offers valuable information when identifying overall priorities for improvement. Two primary approaches to invite community input were utilized:

- 1. Collaborative engagement
- 2. Community survey

#### **Collaborative Engagement**



- On May 8, 2012, Pinellas County Health Department sponsored a Community Health Assessment collaborative engagement using the Collaborative Labs at St. Petersburg College.
- Participants assessed the 10 Essential Public Health Services including themes, strengths, and forces of change that affect the local public health system.
- Nearly 70 community partners representing more than 30 organizations participated.

#### Stakeholders Represented

- Pinellas County Health Department
- Pinellas County
- Pinellas County Schools
- Tampa Bay Partnership
- Health and Human Services Coordinating Council
- Suncoast Health Council
- University of South Florida
- Tampa Bay Health Care Collaborative
- Juvenile Welfare Board
- Disability Achievement Center
- Pinellas County Medical Association
- Healthy Start Coalition of Pinellas
- Florida Covering Kids and Families
- Sickle Cell Disease Association
- Hispanic Leadership Council

- Pinellas County Sheriff's Office
- Molina Healthcare
- BayCare Health System
- All Children's Hospital
- Moffitt Cancer Center
- St. Petersburg Free Clinic
- Community Health Centers of Pinellas
- Directions for Living
- Personal Enrichment through Mental Health Services
- Suncoast Center
- Suncoast Hospice
- AIDS Service Association of Pinellas
- YMCA
- R'Club
- Neighborhood Family Centers

#### Methodology



- Revisited a recent visioning exercise conducted by the Pinellas County Health and Human Services Coordinating Council.
- Ten teams assessed an assigned "essential" area and identified the top three themes and strengths from their evaluations.
- Information was shared and discussed with the full group for additional feedback.

### Themes and Strengths Summary



ES	Theme	Strength
ES 1	<ul> <li>linking program performance measures to indicators</li> <li>development of health registries</li> </ul>	<ul><li>electronic data access</li><li>national and local collaboration</li><li>partnerships</li></ul>
ES 2	<ul> <li>improve distribution of surveillance results to providers</li> <li>require treatment compliance measures and compliance for behavioral health patients</li> </ul>	<ul> <li>social media</li> <li>additional county regulations facilitating investigation and oversight</li> </ul>
ES 3	<ul><li>creating health champions</li><li>accessibility</li></ul>	<ul><li>sharing information</li><li>repository of information</li></ul>
ES 4	<ul> <li>overcoming barriers to accessibility</li> <li>integrated health and social services</li> </ul>	<ul><li>local technology improvements</li><li>increased outreach initiatives</li></ul>

### Themes and Strengths Summary



ES	Theme	Strength
ES 5	<ul> <li>challenges of coordinating a collective 24 municipalities to maximize the use of existing resources</li> </ul>	<ul> <li>collaborative efforts of agencies and organization on grant opportunities and services</li> <li>health system that is nationally recognized</li> </ul>
ES 6	<ul> <li>health care debate</li> <li>limiting the role of government in health and welfare of citizens</li> </ul>	<ul> <li>leaders willing to support and create regulations to affect the health of the community</li> <li>private and public collaboration</li> </ul>
ES 7	<ul> <li>eliminating egos</li> <li>planning, coordinating, and collaborations must engage the end user</li> </ul>	numerous health care and service providers

### Themes and Strengths Summary

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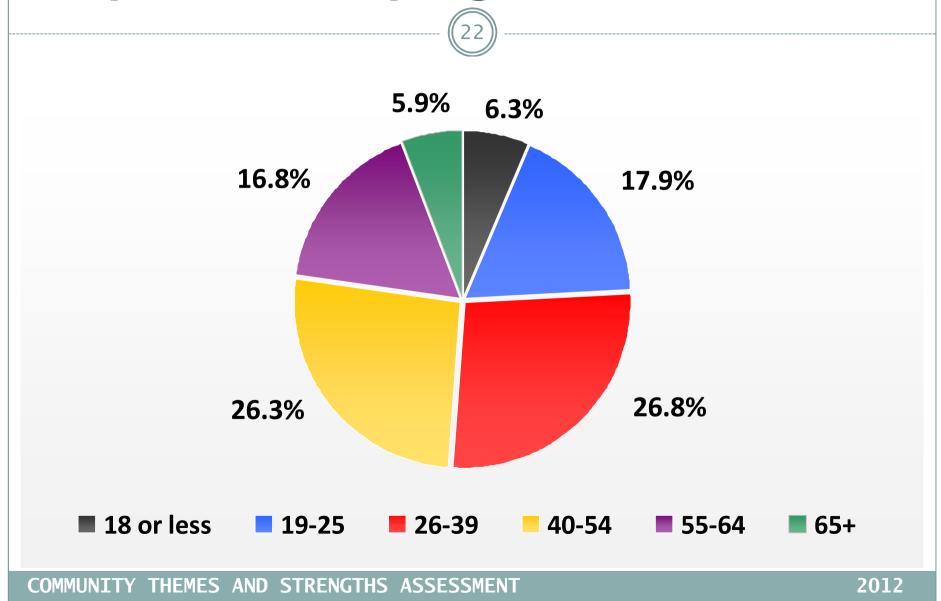
ES	Theme	Strength
ES 8	<ul> <li>culturally diverse and competent service providers</li> <li>public vs. private compensation</li> </ul>	<ul><li>academic partnerships</li><li>level of collaborations</li></ul>
ES 9	<ul> <li>reviewing and revising standards of care</li> <li>community and neighborhood standards that stress the health of all communities</li> </ul>	<ul> <li>multiple data sources</li> <li>resource rich community</li> <li>health department</li> <li>community centers</li> <li>residency programs</li> </ul>
ES 10	<ul> <li>community based organizations involvement in all phases of the research process</li> <li>limited life of funding/grants funding- limited sustainability of research, programs, and services</li> </ul>	<ul> <li>strong collaborative partnerships amongst academia, coalitions, task forces, councils</li> <li>number of higher education institutions</li> </ul>

#### **Community Survey**

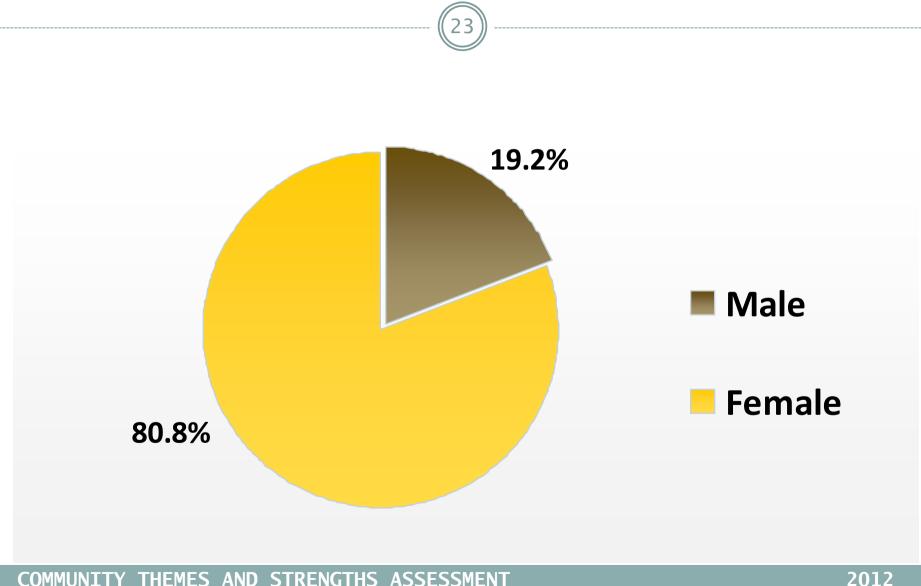


- The Pinellas County Community Themes and Strengths survey assayed perceived community health, individual health, and other quality of life issues among county residents.
- Survey was available in English and Spanish
- Survey collection spanned 5 weeks utilizing both paper and electronic surveys collected via the health department website, clinics, home visiting services, and partner organizations.

#### **Respondents by Age** (n=814)

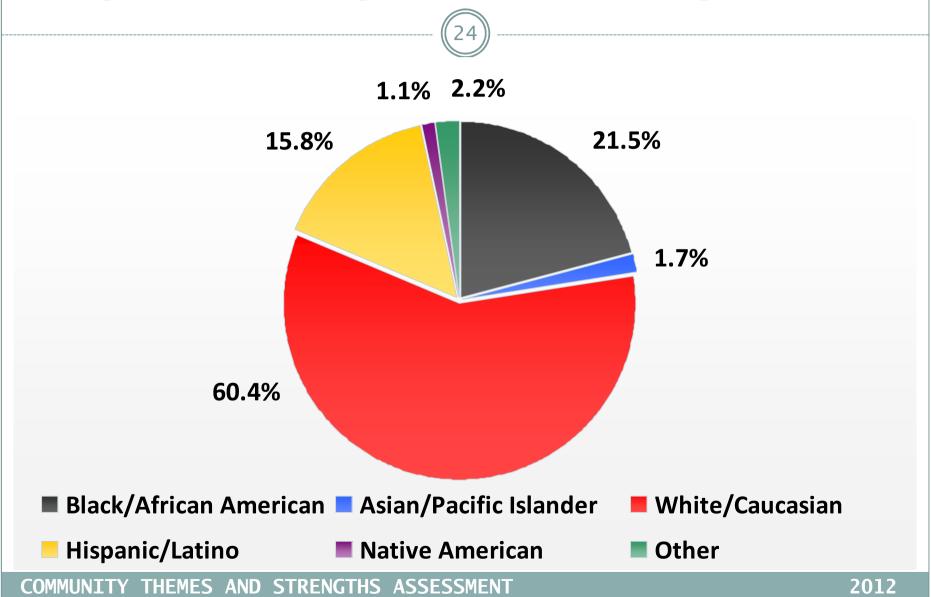


#### **Respondents by Gender** (n=795)



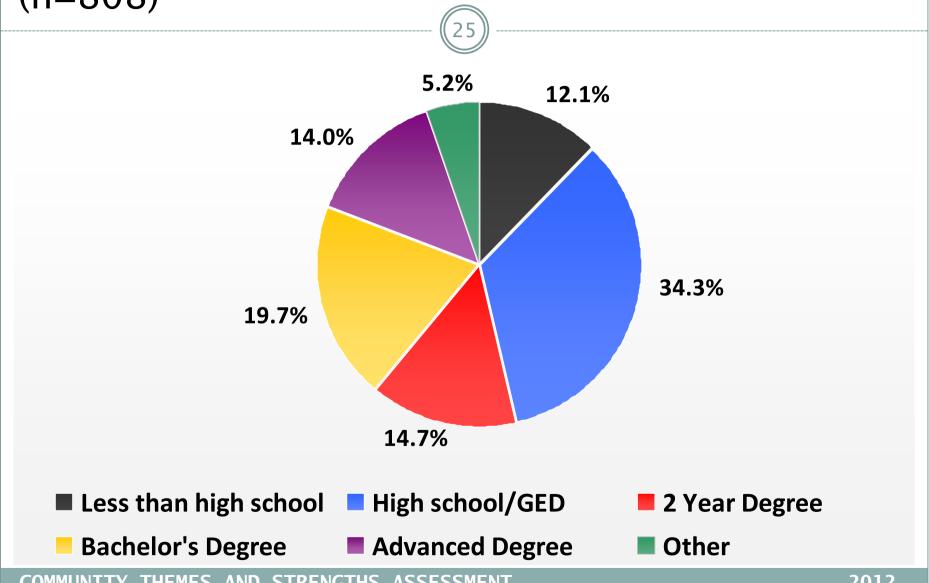
COMMUNITY THEMES AND STRENGTHS ASSESSMENT

#### Respondents by Race/Ethnicity (n=814)



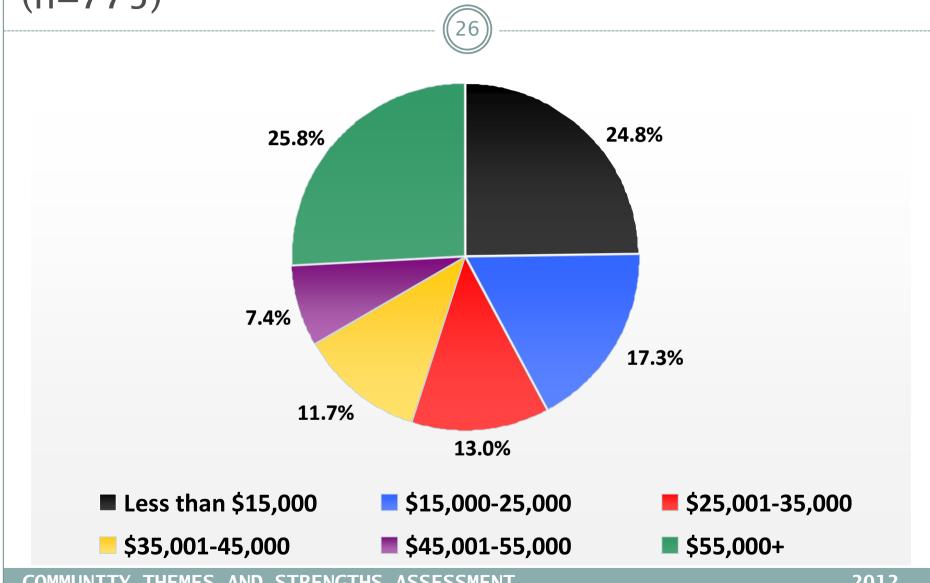
#### Respondents by Educational Attainment

(n=808)



#### Respondents by Household Income

(n=775)

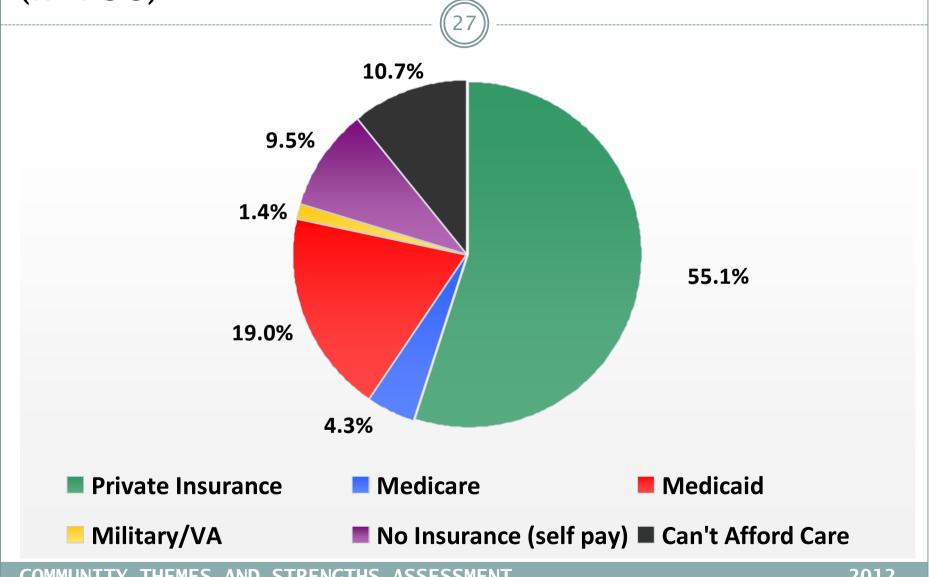


COMMUNITY THEMES AND STRENGTHS ASSESSMENT

2012

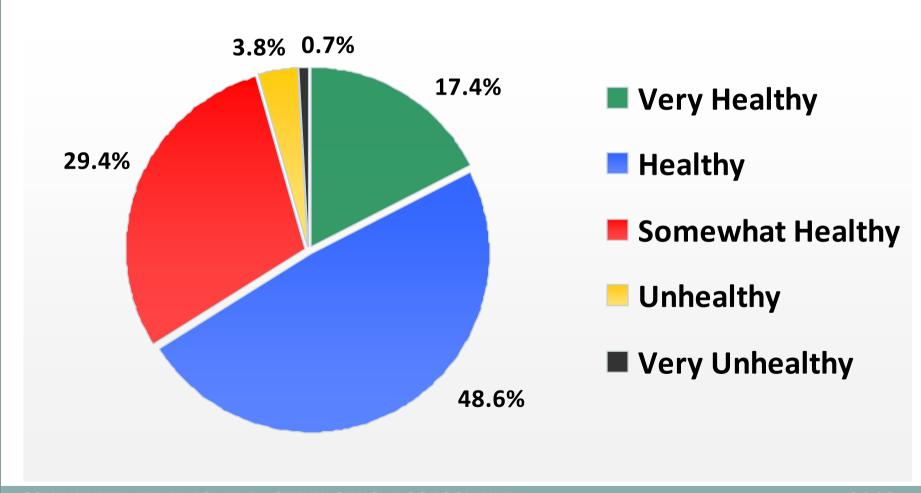
#### **How is Your Health Care Paid For?**

(n=798)



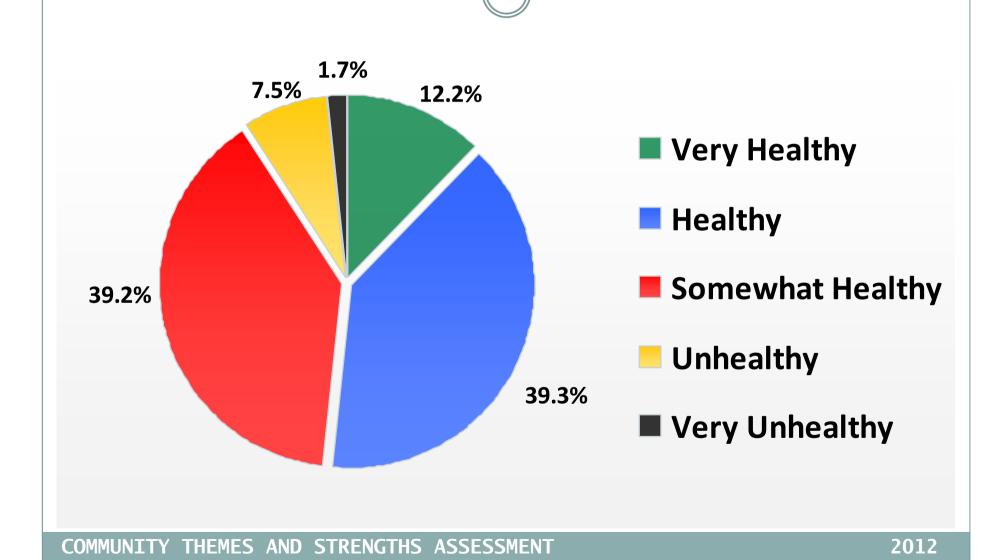
### **How Healthy are You?** (n=813)



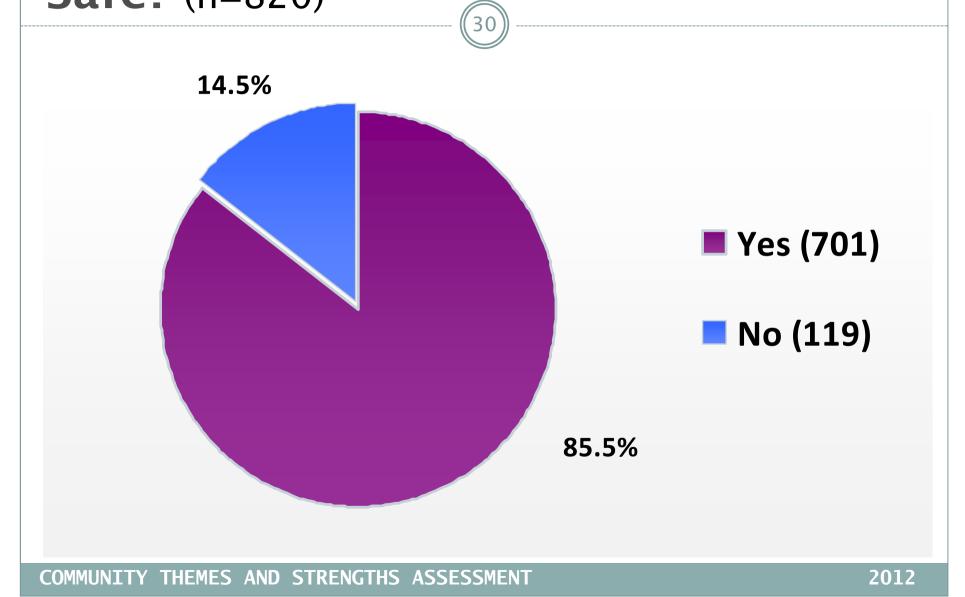


#### **How Healthy is Your Community?**

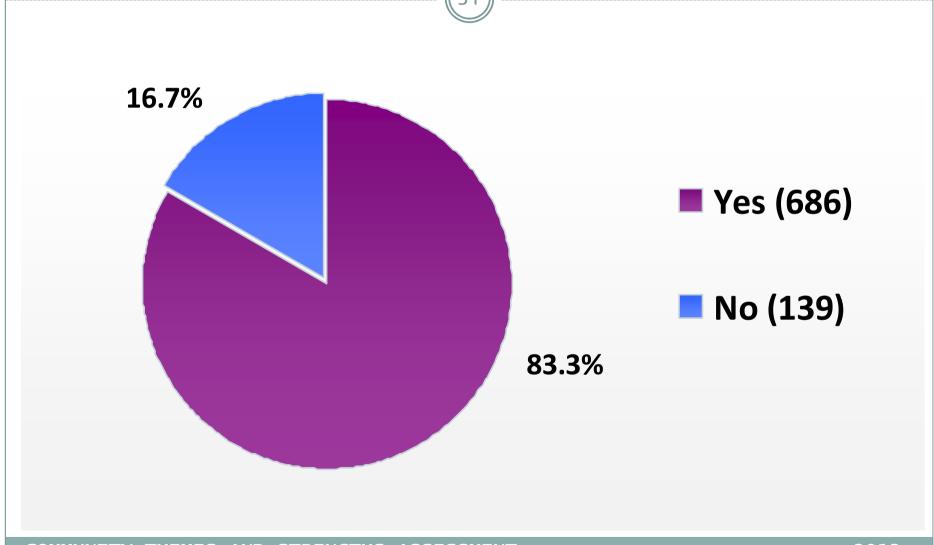
(n=827)



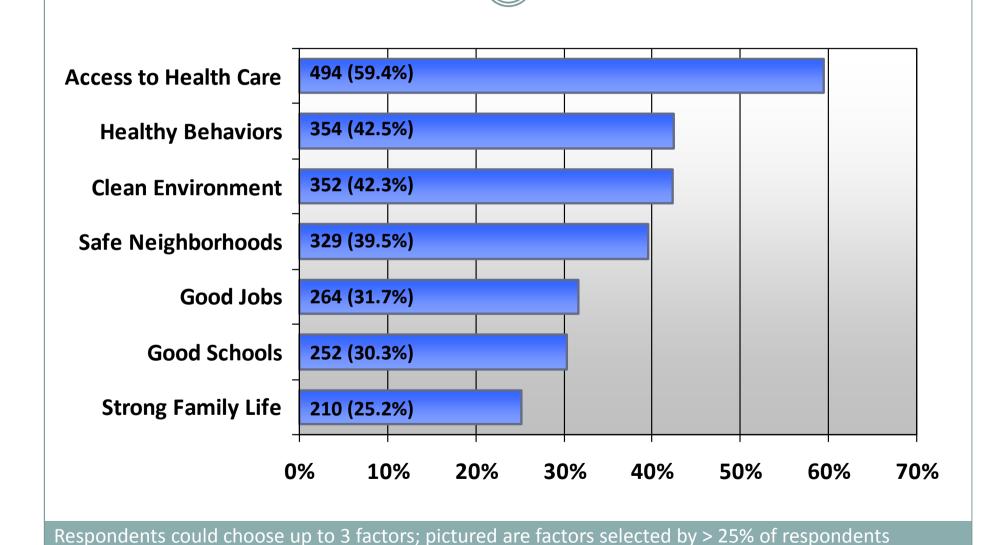
**Do You Think Your Community is Safe?** (n=820)



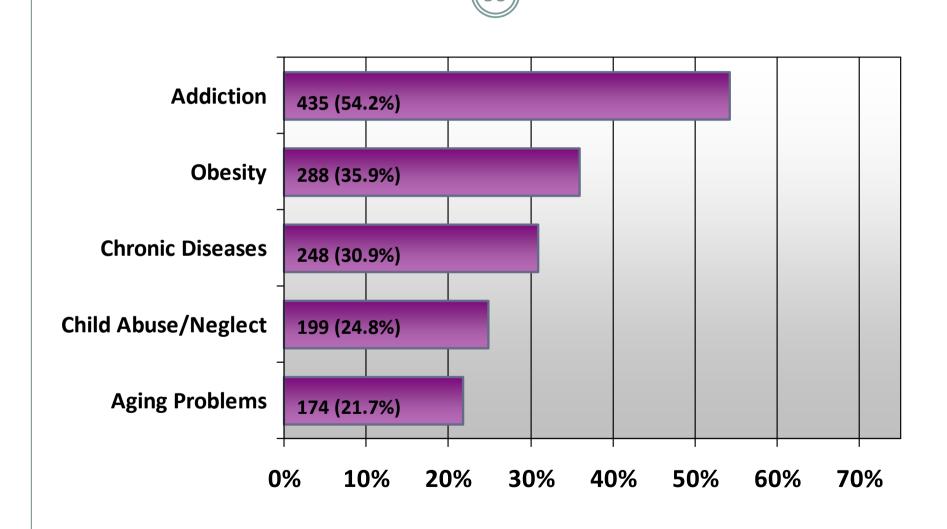
## Do You Think your Community is a Good Place to Raise Children? (n=825)



### Most Important Factors For a Healthy Community (n=832)

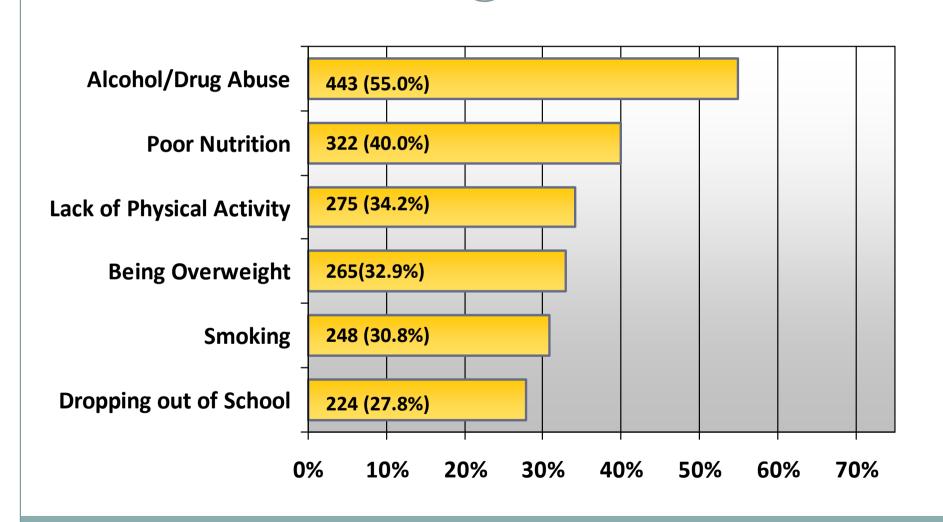


## Health Problems of Concern in Your Community (n=803)



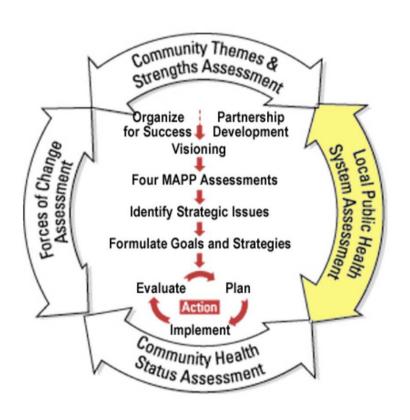
Respondents could choose up to 3 problems; pictured are problems selected by >20% of respondents

#### **Behaviors of Concern in Your Community** (n=805)



Respondents could choose up to 3 behaviors; pictured are behaviors selected by > 25% of respondents

### Local Public Health System Performance Assessment



The Local Public
Health System
Performance
Assessment focuses on
all of the organizations
and entities that
contribute to the public's
health in our community.

### Local Public Health System Performance Assessment

#### Answers the following questions:

- What are the components, activities, competencies, and capacities of our local public health system?
- How are the essential public health services being provided in our community?

**LPHSPA** 

## Local Public Health System Performance Assessment

- Sponsored by the Pinellas County Health Department and conducted by the Suncoast Health Council via 2 half day collaborative sessions on July 28 and August 11, 2011.
- Self assessment based on the CDC National Public Health Performance Standards Program (NPHPSP)





### Stakeholders Represented

- Pinellas County Health Department
- Suncoast Health Council
- Pinellas County
- City of St. Petersburg
- Juvenile Welfare Board
- Intercultural Advocacy Center
- Healthy Start Coalition of Pinellas
- Tampa Bay Health Care Collaborative
- Disability Achievement Center
- Allegany Franciscan Ministries

- BayCare Health System
- Bayfront Family Health Center
- Bon Secours Health System
- Bayshore Health and Homemaker Services
- St. Petersburg Free Clinic
- PEMHS
- Operation PAR
- Suncoast Hospice
- Neighborhood Family Centers
- Pinellas Suncoast Transit Authority

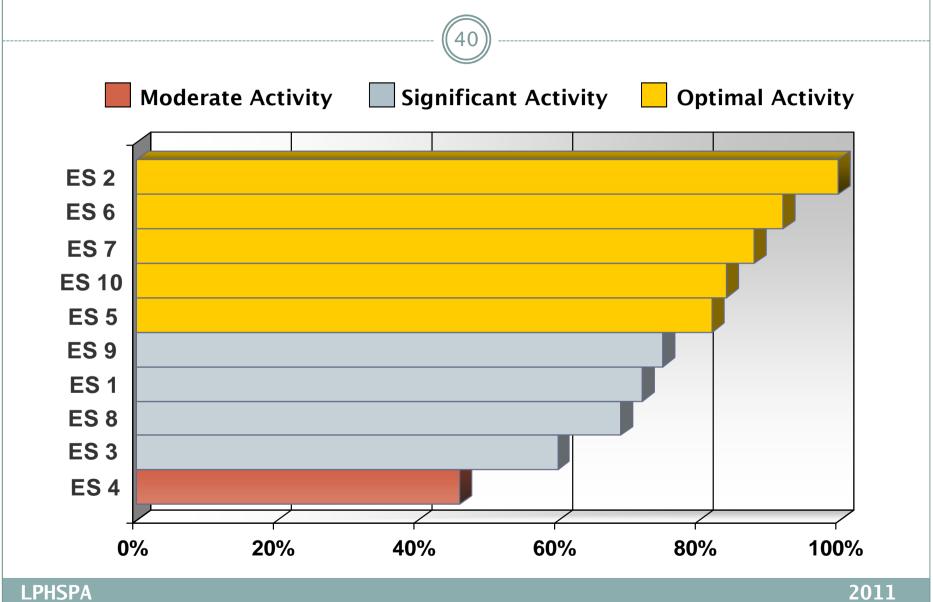
#### **LPHSPA Overall Results**



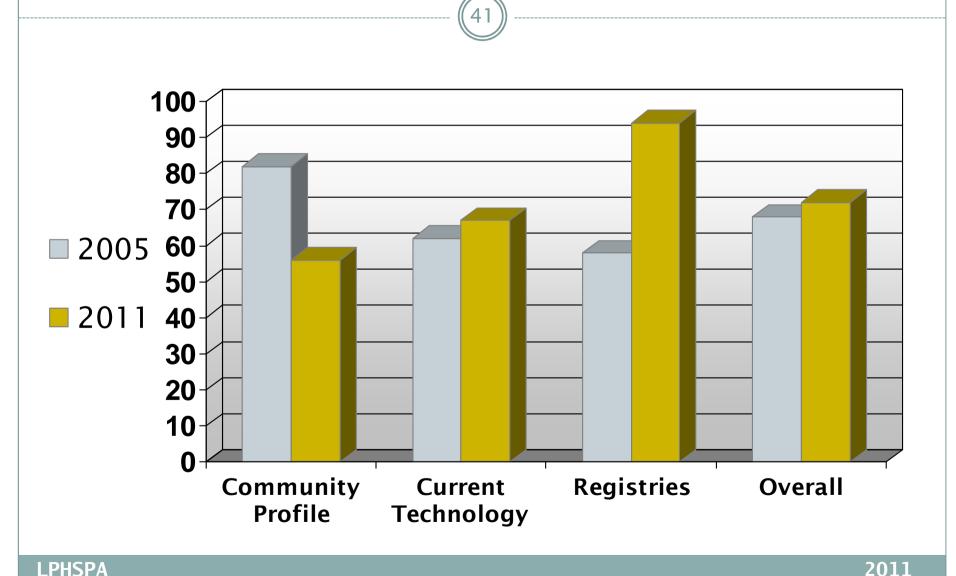
Essential Public Health Service (EPHS)			
1	Monitor health status to identify community health problems	<b>72</b> ↑	
2	Diagnose and investigate health problems/hazards	100 ↑	
3	Inform/Educate/Empower people about health issues	60 ↓	
4	Mobilize community partnerships to identify/solve health problems	46 ↓	
5	Develop policies/plans that support individual & community health	82 ↑	
6	Enforce laws and regulations that protect health & ensure safety	92 ↑	
7	Link people to needed health services and assure the provision of health care when otherwise unavailable	88 ↑	
8	Assure a competent public health workforce	69 ↑	
9	Evaluate effectiveness/accessibility/quality of health services	<b>75</b> ↑	
10	Research for new insights/innovative solutions to health problems	84 ↑	
Overall Performance Score			

LPHSPA

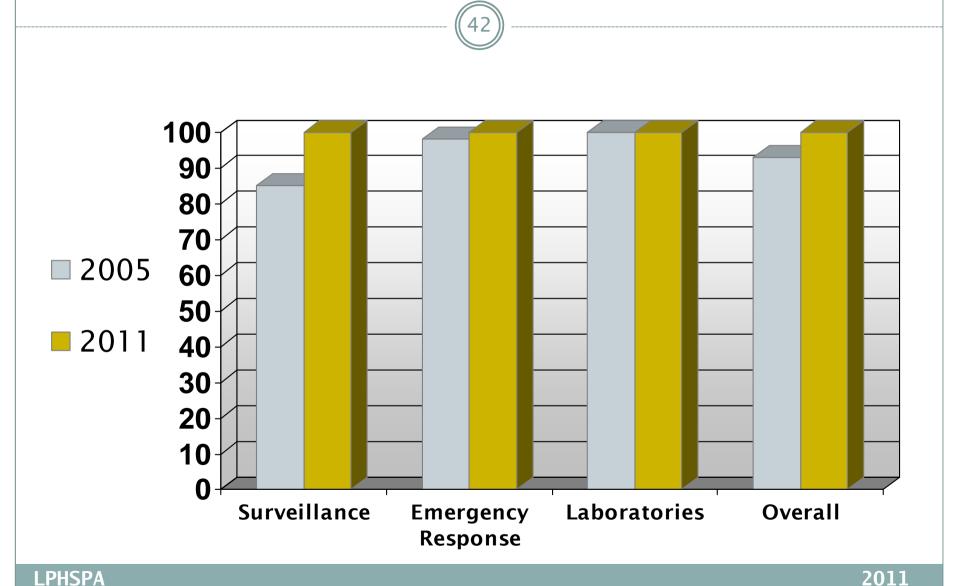
#### **LPHSPA Overall Results**



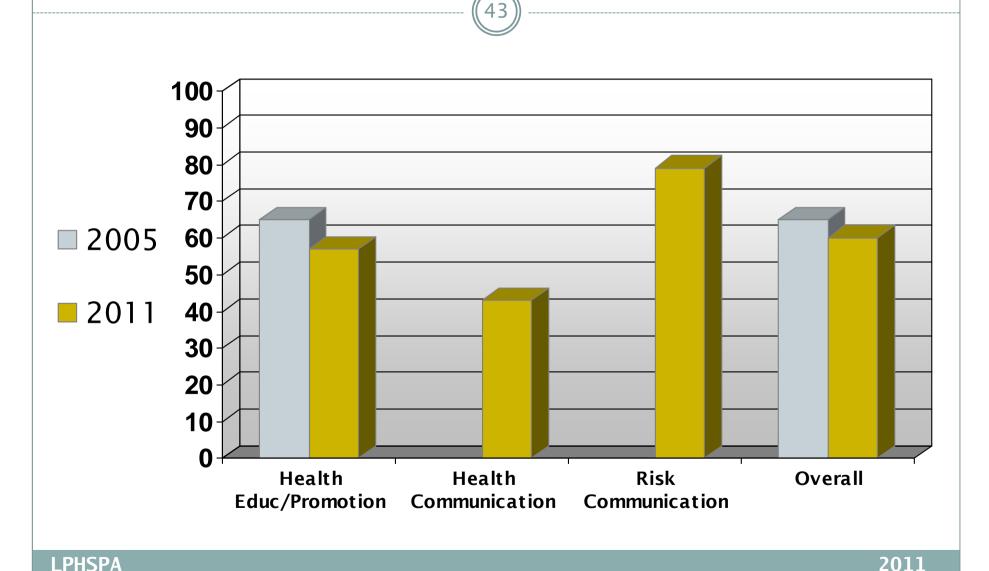
**ES 1:** Monitor health status to identify community health problems



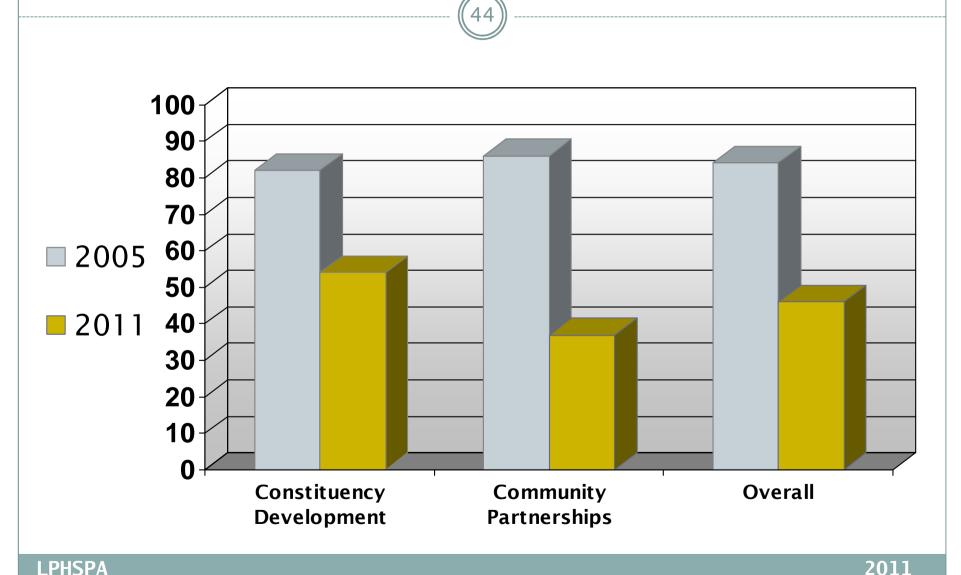
**ES 2:** Diagnose & investigate health problems & health hazards



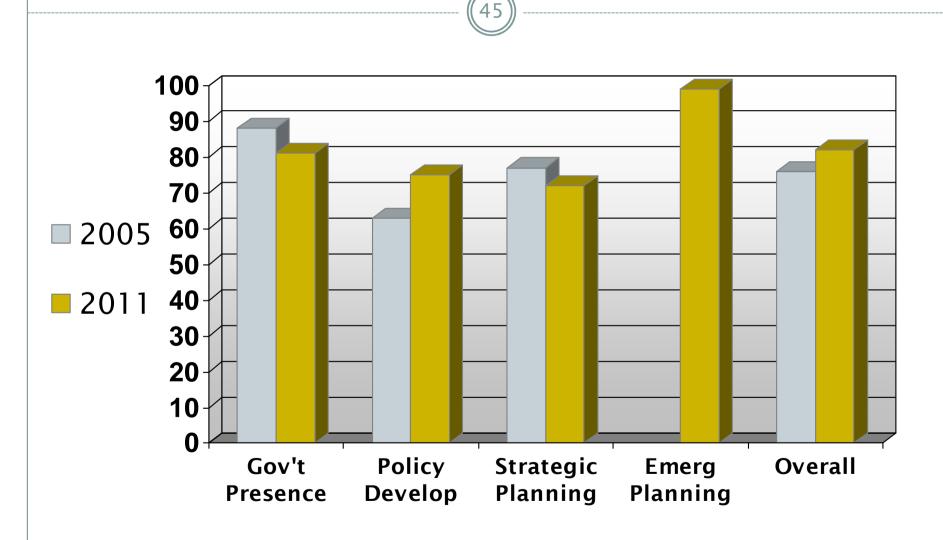
**ES 3**: Inform, educate, and empower people about health issues



ES 4: Mobilize community partnerships to identify and solve health problems



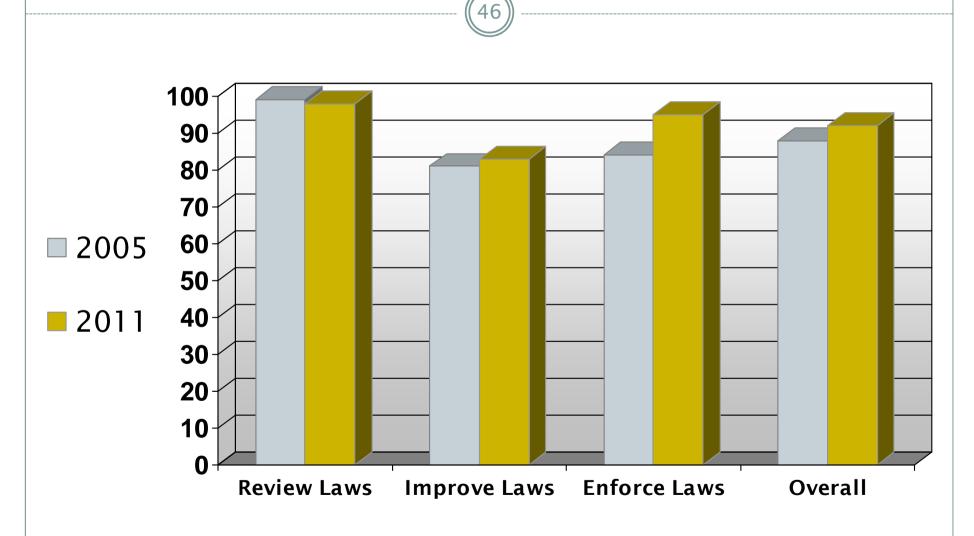
ES 5: Develop policies and plans to support individual and community health efforts



**LPHSPA** 

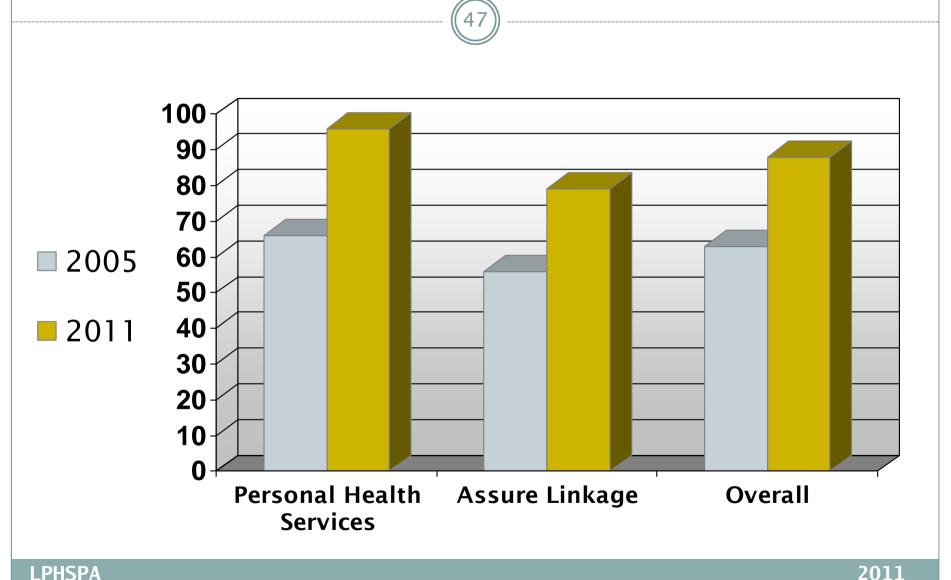
2011

**ES 6**: Enforce laws and regulations that protect health and ensure safety

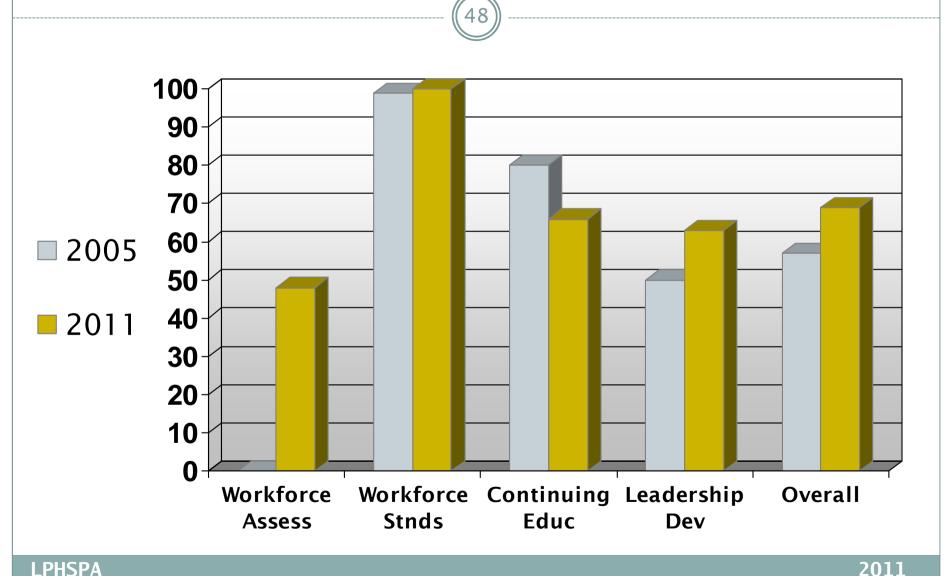


**LPHSPA** 

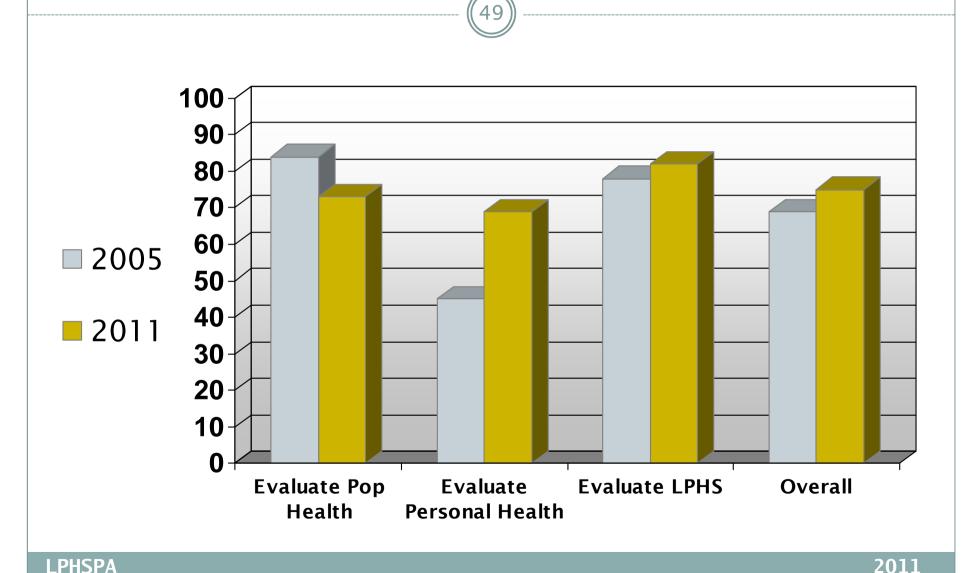
ES 7: Link people to personal health services and assure care when otherwise unavailable



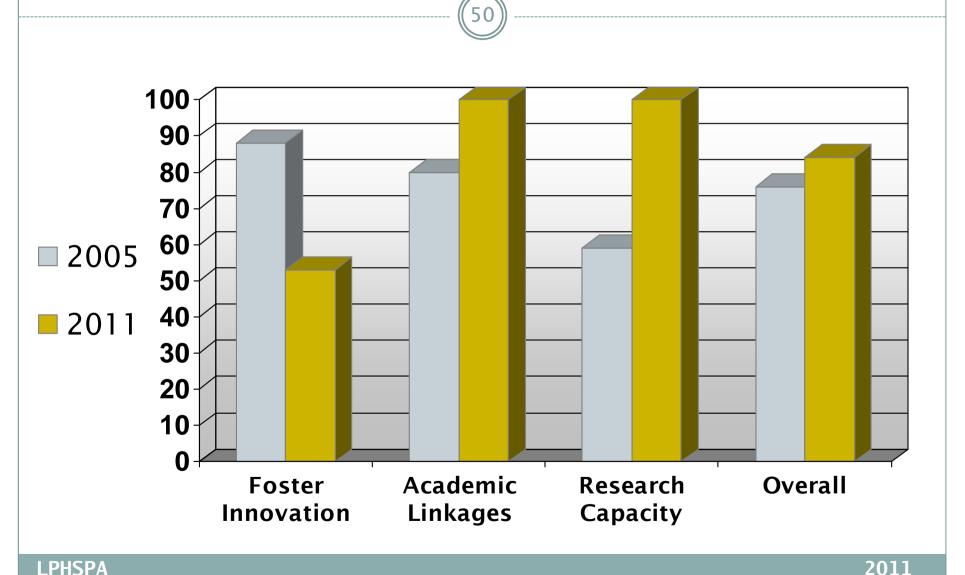
ES 8: Assure a competent public and personal health care workforce



ES 9: Evaluate effectiveness, accessibility, and quality of health services

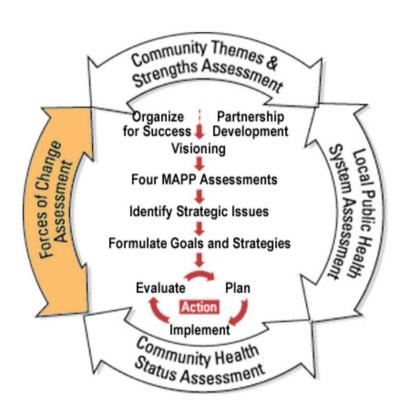


# ES 10: Research for new insights & innovative solutions to health problems



### Forces of Change Assessment





The Forces of Change Assessment (FOC) focuses on identifying forces such as trends, factors, events, and other impending changes that affect the context in which our community and public health system operate.

### Forces of Change Assessment



### FOC answers the following questions:

- What is occurring or might occur that affects the health of our community or the local public health system?
- What specific threats or opportunities are generated by these occurrences?



**SOCIAL** 

**ECONOMIC** 

**POLITICAL** 

**TECHNOLOGICAL** 

ENVIRONMENTAL

**SCIENTIFIC** 

**LEGAL** 

**ETHICAL** 

#### **Forces**

Forces are often social, economic, political, technological, environmental, scientific, legal, or ethical and influence the health and quality of life of our community and local public health system. Forces pose threats and/or create opportunities for our public health system and community.

### Pinellas County Forces of Change



- Conducted as part of the Community Health Assessment collaborative engagement on May 8th.
- Participants worked with an assigned team to identify forces of change in Pinellas County and the threats and/or opportunities generated by these occurrences.
- Each team had a partner team whose work they reviewed.
- 10 Essential Public Health Services were used as the framework



**SOCIAL** 

**ECONOMIC** 

**POLITICAL** 

**TECHNOLOGICAL** 

**ENVIRONMENTAL** 

**SCIENTIFIC** 

**LEGAL** 

**ETHICAL** 

### **Pinellas County Forces**

#### Key forces identified:

- Economy
- Health Care Reform
- Medicaid Reform
- Decreasing budgets at federal, state and local levels
- Declining reimbursement
- Technology development (EMR, common eligibility, social media)
- Outcomes driven funding
- Increasing regulations
- Aging population

### Pinellas County Threats/Challenges



#### Key Threats/Challenges posed from identified forces:

- Increased costs to implement reform
- Sustainability of programs and services
- Defunding of community programs
- Loss of personal choice
- Difficult to plan for changes and understand ramifications
- Misinformation due to media bias
- Limited local ordinances/decision making
- Increase in patients/decrease in providers

### **Pinellas County Opportunities**



#### Key opportunities created from identified forces:

- Increased awareness
- Impetus for collaboration; grassroots activism
- Shift to prevention focused care
- Increased accountability among providers
- Personal accountability encouraged
- Empowered patients
- Fostering innovation
- Increased access to healthcare coverage and possibly care
- Increased opportunities for data and information exchange

#### **Community Health Status Assessment**





The Community Health
Status Assessment
Identifies priority
community health and
quality of life issues.
It provides an
understanding of the
health of those who live
in the community.

#### **Community Health Status Assessment**



#### Answers the following questions:

- What are the socioeconomic factors impacting the health and quality of life of our community?
- How healthy are our residents?
- What are the leading causes of death and illness among residents?
- How do the lifestyle behaviors of our residents contribute to community's health status?
- How does the health status of our community compare to that of years past, other communities, and to the state and nation?

#### **Data Sources**



#### www.floridacharts.com



www.countyhealthrankings.org



#### http://www.healthytampabay.com



www.pinellasindicators.org

### **Pinellas County Demographics**

Population: 916,542

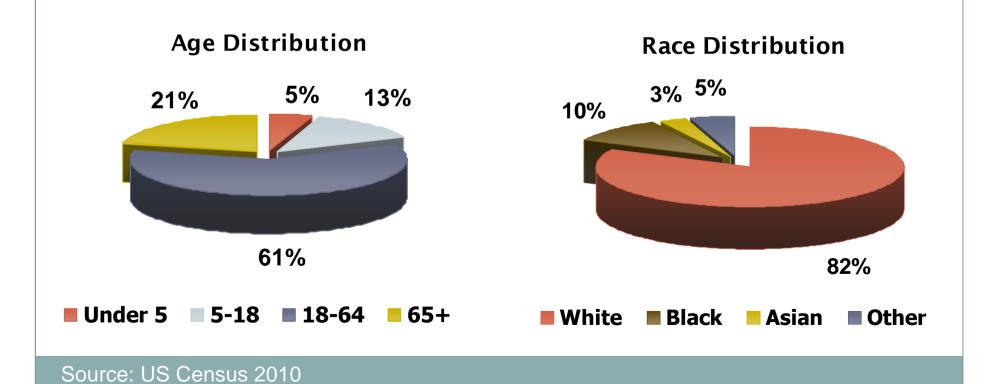
**Municipalities: 24** 

Average Household size: 2.16

Births per year: 8,300

**Females: 51.9%** 

Hispanic: 8%

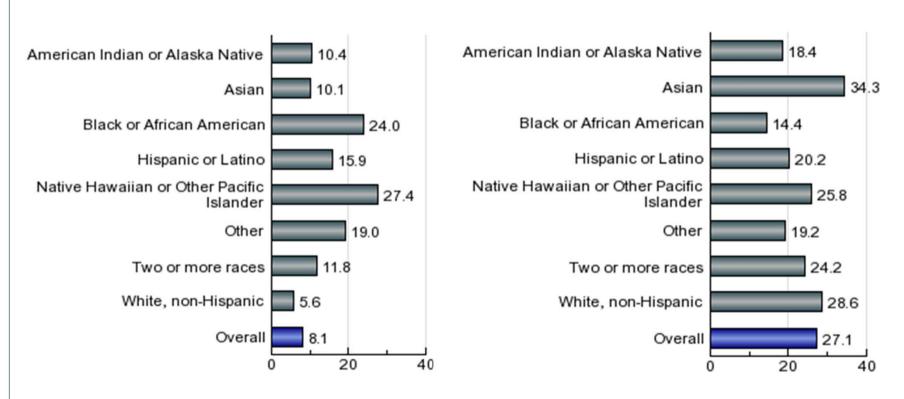


### **Population Characteristics**



## Families Living Below Poverty Level by Race/Ethnicity

## Adults 25+ with a Bachelor's Degree or Higher by Race/Ethnicity



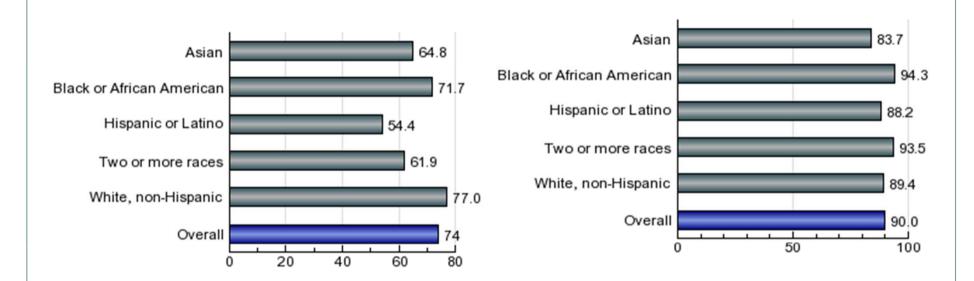
Source: US Census 2006 - 2010

### Health Resources Availability



## Adults with Health Insurance by Race/Ethnicity 2010

## Children with Health Insurance by Race/Ethnicity 2010



Source: US Census 2010

## **Health Resources Availability**



	Acute Care Beds Per 100,000			Long Term Beds Per 100,000		
County	2008	2009	2010	2008	2009	2010
Pinellas	374.3	376.1	367	868.3	872.4	873
Hillsborough	268.7	276.4	275	317.1	314.4	311.1
Pasco	216.1	214.9	221	447.4	445	442.5
Manatee	238.6	237.7	236	487.7	486	482.9
Orange	247.4	263.3	258	378	376	371
Duval	314.9	328.4	330	469.8	466.8	464

Source: County Health Rankings

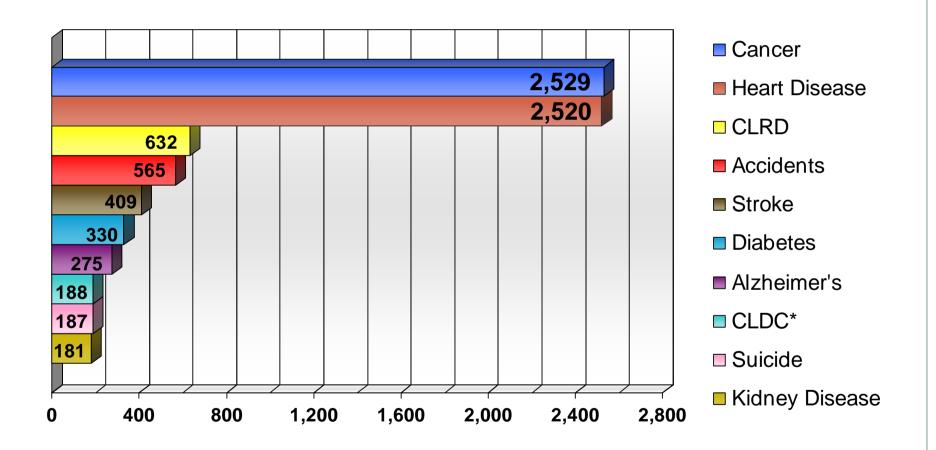
## **Health Resources Availability**



Number of physicians/100,000 pop	National Median	Pinellas
Primary Care Physicians	54.6	101.8
General /Family Practice Physicians	33.8	46.5
Internal Medicine Physicians	11.1	36.1
Pediatricians	4.3	19.2
Obstetricians/Gynecologists	3.4	10.1
General Surgeons	4.9	8.2
Psychiatrists	0.0	7.7
Specialists	31.7	183.2

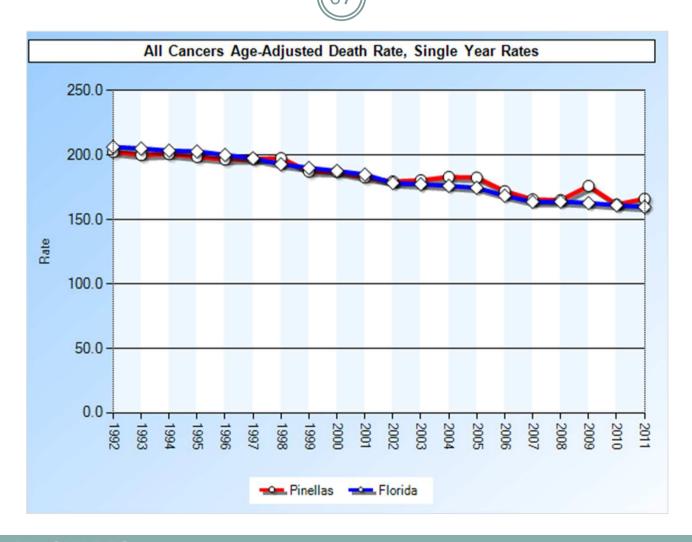
Source: HRSA

# **Leading Causes of Death Pinellas County, 2011**

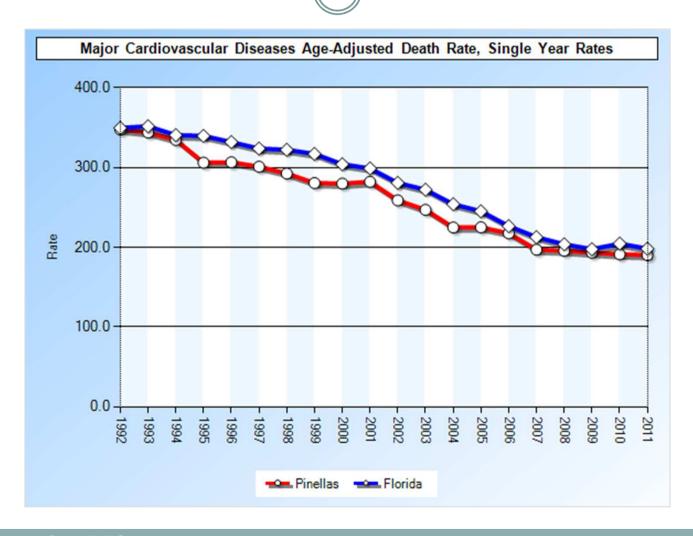


\*CLRD: chronic lower respiratory disease; CLDC: Chronic Liver Disease & Cirrhosis

## **Leading Causes of Death: Cancer**

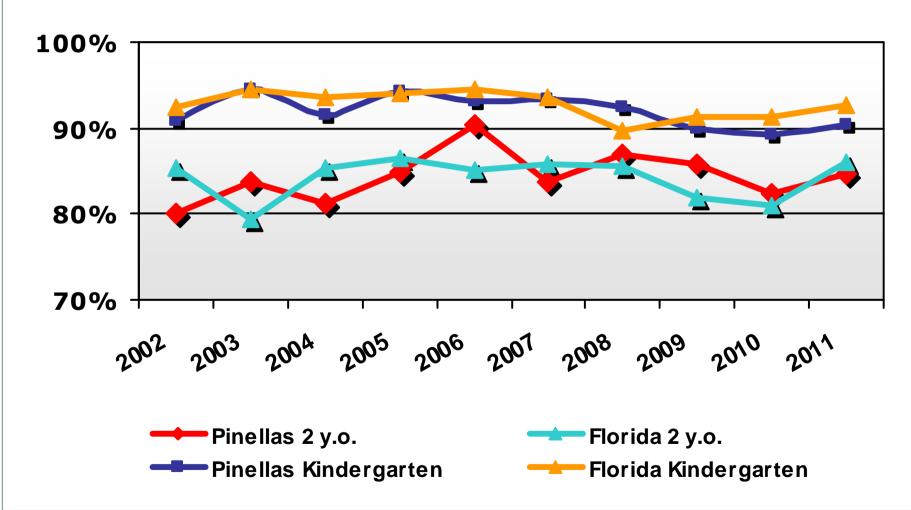


#### Leading Causes of Death: Cardiovascular Disease

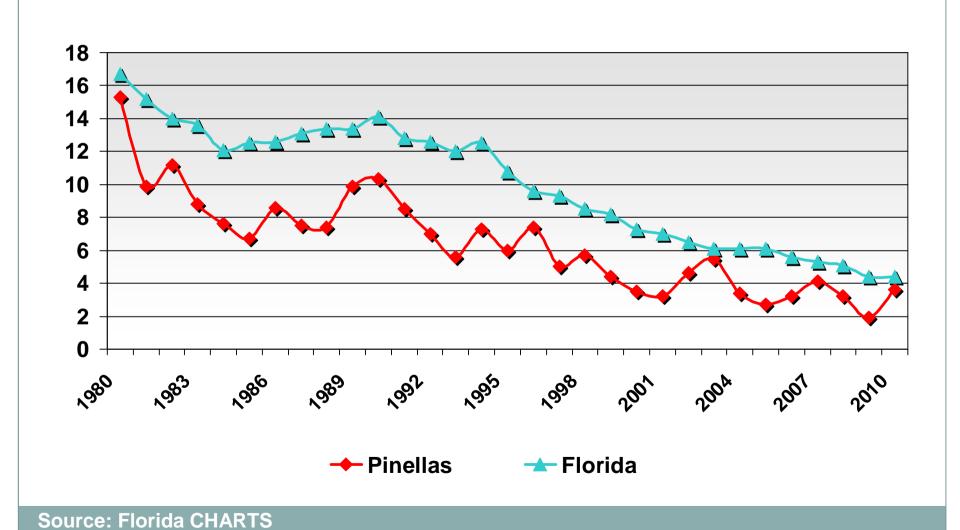


## Communicable Disease: % of Children Fully Immunized

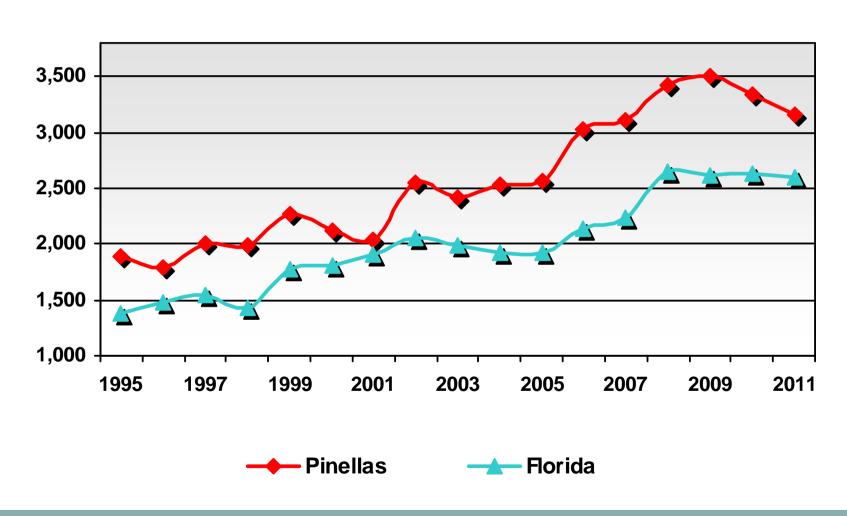




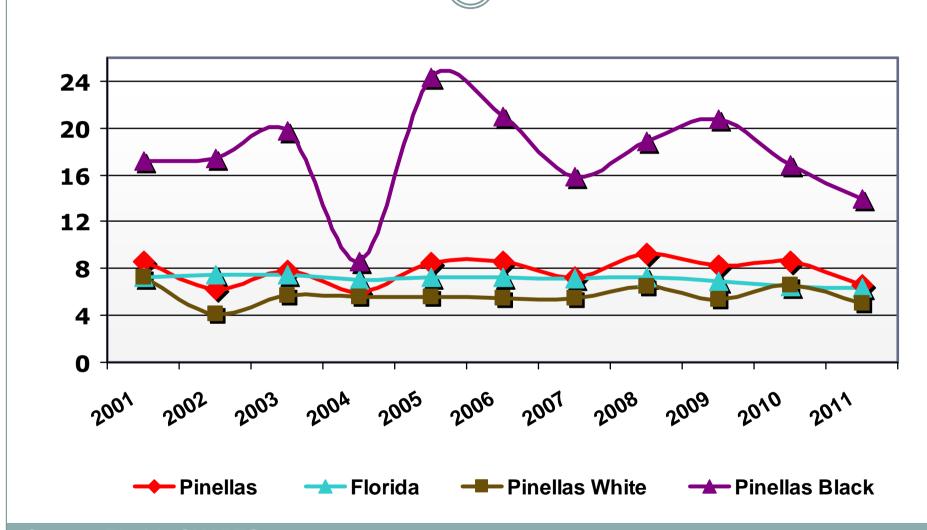
# Communicable Disease: TB Cases per 100,000



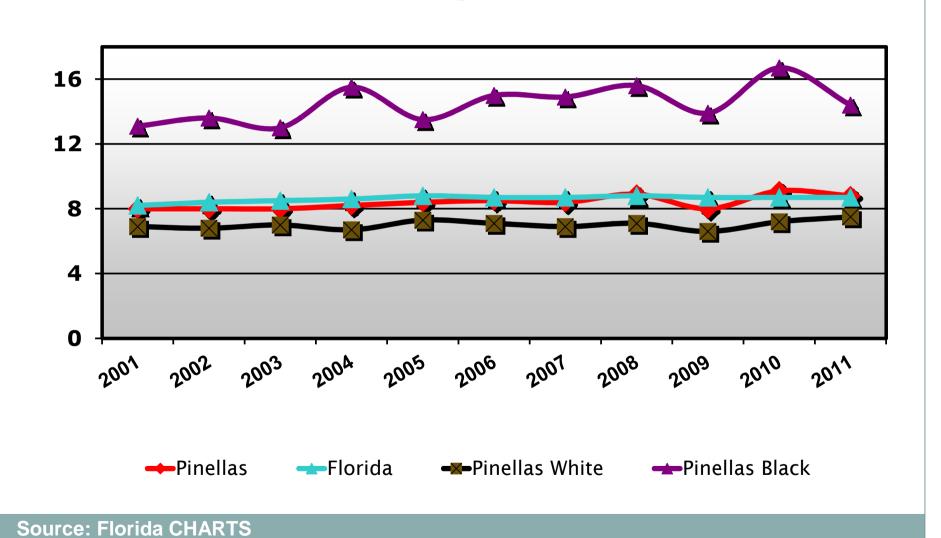
#### Communicable Disease: Bacterial STD Rate per 100,000 Women 15-34



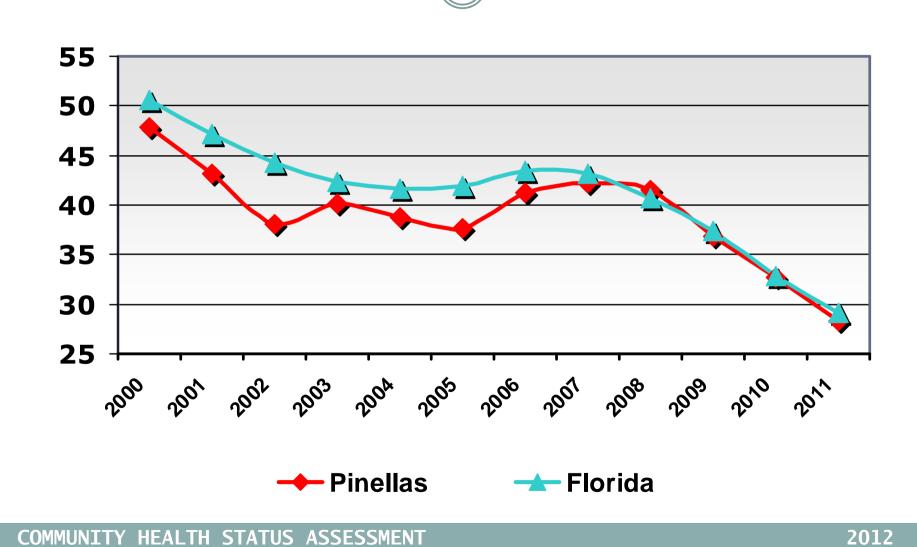
#### Maternal and Child Health: Infant Deaths per 1,000 Live Births



# Maternal and Child Health: % Low Birth Weight Infants

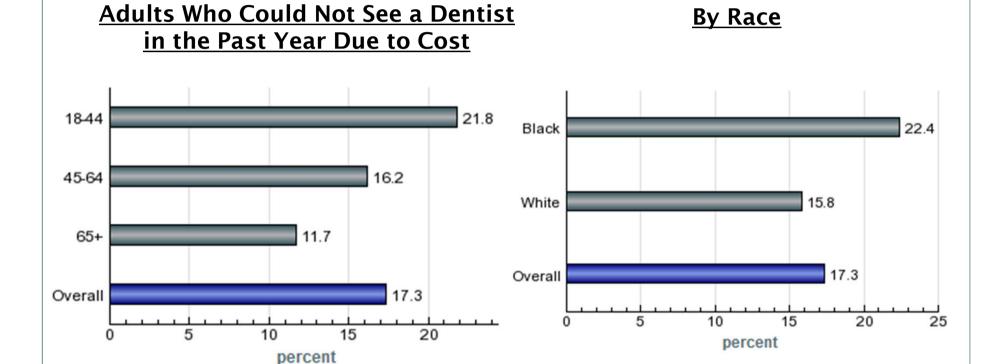


## Maternal and Child Health: Births per 1,000 females 15-19



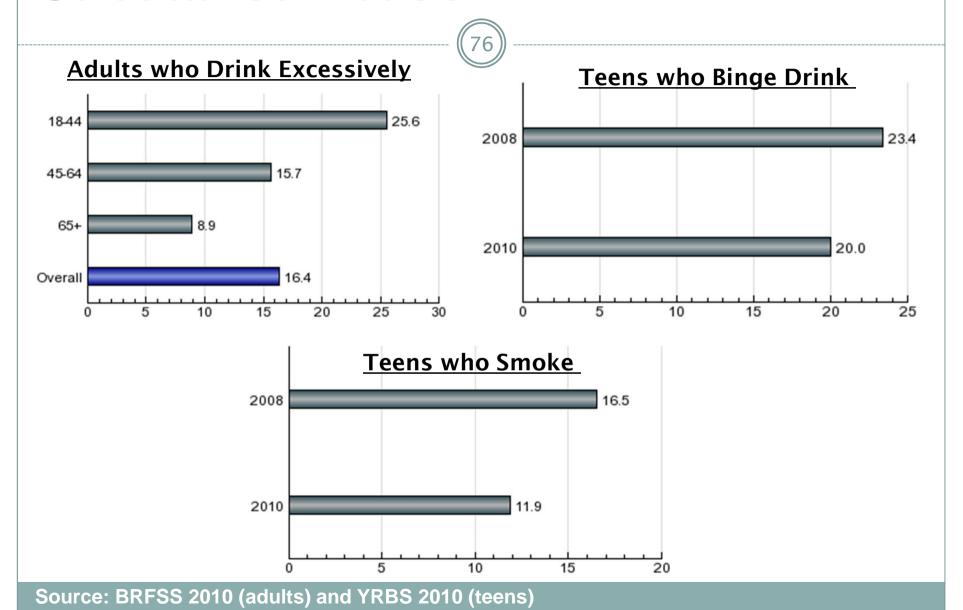
#### **Oral Health**





Source: BRFSS 2007

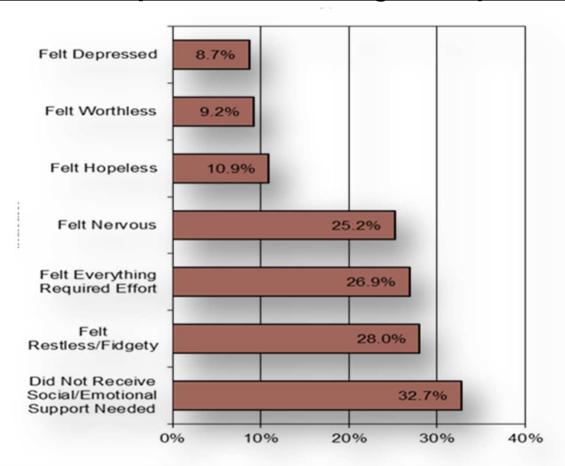
#### **Substance Abuse**



#### Social and Mental Health



#### Adults who reported the following in the past 30 days:

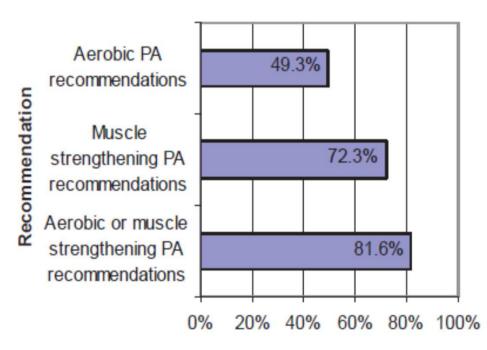


**Source: CPPW BRFSS 2010** 

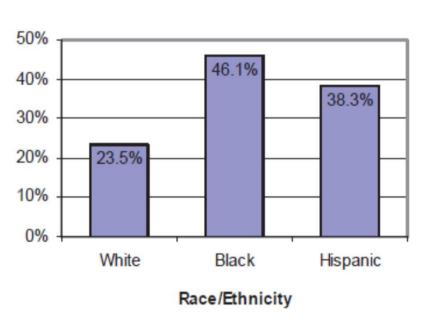
## **Physical Activity**



## Adults who did not meet recommendation for weekly aerobic activity



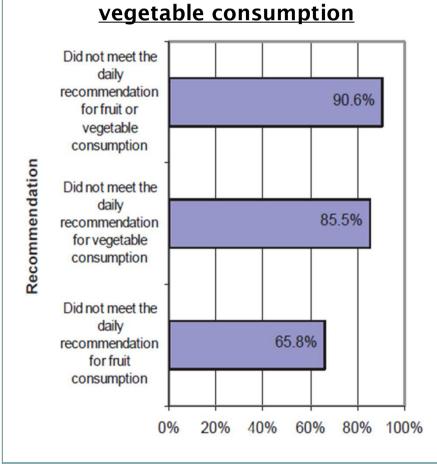
## Adults who reported no leisure time physical activity by race



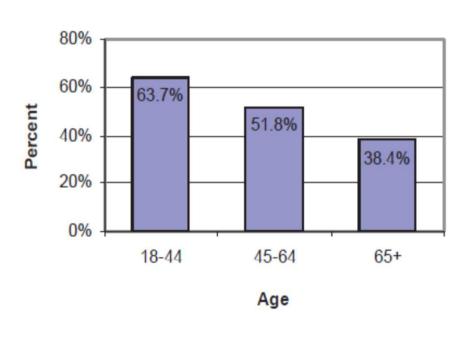
**Source: CPPW BRFSS 2010** 

#### **Nutrition**

## Adults who did not meet recommendations for fruit and



## Adults who ate at a fast food restaurant one or more times per week.



**Source: CPPW BRFSS 2010** 

## **Physical Environment**



Measures	2010 Rankings	2011 Rankings	2012 Rankings
Ranking	19	9	11
Air pollution particulate matter days	4	0	0
Air pollution ozone days	2	3	3
Access to recreational facilities	1	12	12
Limited access to healthy foods	-	8%	5%
Fast food restaurant density	-	-	41%

**Source: County Health Rankings** 

#### **Next Steps**

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- Additional team members?
- Meeting schedule: 2<sup>nd</sup> Wednesday monthly
- Finalize and disseminate CHA

