

Pinellas County CHIP: 2016-17										
Access to Care										
Goal	Strategy	Objective	Activity 2016-17	Process Measure 2016-17	Coordinating Agency	Partner Agencies	Outcome Measure(s)	July - September 2016	October - December 2016	
AC 1: Provide equal access to appropriate health care services and providers	1.1: Address barriers in accessing existing health care services and consumer utilization in underserved communities	1.1.1: By Dec 31, 2017, decrease the percentage of Pinellas adults who are unable to access a health care provider due to cost from 16% (2010) to 14.4%.	1. Promote Direct Connect Partnership between PSTA and Uber to community partners (including TD late shift). 2. Implement St. Petersburg Police Dept. Mobile Resource Bus Connection.	1. Promote program and PSTA events to a minimum of one community group per quarter. 2. Publicize mobile resource bus to community partners each month. Track and increase number of residents connected to resources during the August 2016-July 2017 CHIP period.	1. PSTA 2. Healthy St. Pete	1. Uber, DOH-Pinellas 2. Foundation for a Healthy St. Pete, DOH-Pinellas, SPPD	Adults who had a medical checkup in the past year	1. Information shared with CHAT in September 2016 about Transportation Disadvantaged (TD) late shift PSTA rides. 2. Bus location publicized to partners by Healthy St. Pete during July, August, and September. 46 total walk-ups for this quarter.	1. No updates this quarter. 2. The bus was active in October and November. 22 total walkups.	
	1.2: Develop and implement a standardized training program for Community Health Workers.	1.2.1: By Dec 31, 2017, increase the number of trained Community Health Workers (CHWs) in Pinellas by 25% over baseline.	Strategy met: <a href="http://licertificationboard.org/certifications/certified-community-health-worker-cchw/">http://licertificationboard.org/certifications/certified-community-health-worker-cchw/</a>					15% of identified CHWs have enrolled in or completed a standardized training	1. Updated workgroup at the annual CHIP update in August that this measure has been completed. Representatives from the CHW Coalition and SPC will continue to attend CHAT meetings and keep community partners updated about CHW progress in Pinellas County.	1. No update.
	1.3: Promote the completion of a cultural and linguistic competence organizational self-assessment to improve access to culturally competent care.	1.3.1: By Dec 31, 2016, decrease the percentage of Pinellas adults who believe they would receive better medical care if they belonged to a different race/ethnic group from 7% (2010) to 6.3%.	1. Implement Cultural & Linguistic Competency Initiative	1. 4 organizations complete CLC program led by TBHC.	Tampa Bay Healthcare Collaborative	Collaborative Labs USF Public Health	CLC cohort completed	1. DOH-Pinellas joined the CLC cohort program. Meetings began in September 2016.	1. DOH-Pinellas continues to assess its cultural competency via surveys of clients and staff. Results available and reported in early 2017.	
AC 2: Use health information technology to improve collaboration among providers and increase efficiency in services to consumers	2.1: Improve communication among providers and care coordinators through data integration.	2.1.1: -By Dec. 31, 2017, explore at least 2 data integration initiatives in Pinellas County.	1. Identify providers enrolled in Direct Trust and encourage its use as an HIE. 2. Implement electronic Pinellas County Health Program application and make available at community partner organizations.	1. Increase # of providers identified 2. Increase # organizations making electronic application available	1. DOH-Pinellas 2. Pinellas County Human Services	1. USF Health 2. DOH Pinellas, hospitals, community organizations	At least four new partnerships developed between social service and medical agencies in Pinellas County.	1. No change this quarter. 2. The PCHP e-app will be available online and at DOH locations on the lobby computers. Human Services will also have computers available in their offices for clients to apply. Clients can complete the application from any device connected to the internet, anywhere. The 'go-live' date is Feb. 1, 2017. Clients will be able to apply for PCHP, MMU, and get contact information for other services in the community.	1. DOH-Pinellas is now enrolled in Direct Trust for Health Information Exchanges. Work is continuing to identify community partners in the Direct Trust network willing to accept transmittals. DOH-Pinellas has received a directory of all current Florida providers in the Direct Trust and partners are being contacted in regards to their use of HIE. 2. Go-live date still scheduled for early 2017.	

AC 3: Reduce infant mortality and morbidity	3.1: Raise awareness among providers and consumers on the importance and benefits of being healthy prior to pregnancy.	3.1.1: By Dec 31, 2017, decrease the percentage of low-birth weight (less than 2,500 grams) infants in Pinellas from 8.9% (2010-2012) to 8%.	1. Implement Figuring it Out for the Child. 2. Use Fetal Infant Mortality Review data to identify trends and educate women of childbearing age in Pinellas.	1. Increase the number of pregnant couples seen each year to 100. 2. Identify trends in losses and offer interventions in the form of educational materials to all 32 Pinellas OB offices and Healthy Start Care Coordinators	1. USFSP - Lisa Negrini 2. Healthy Start Coalition - Michele Schaefer	1. CHCP, DOH-Pinellas, Healthy Start, Mt. Zion 2. FIMR Partners	<ul style="list-style-type: none"> <li>• Reduce teen pregnancy rates in Pinellas</li> <li>• Reduce teen STD rates in Pinellas</li> <li>• Reduced rate of low birth rate babies in sample group of FOFC</li> <li>• Decrease in child deaths</li> </ul>	1. Transitional quarter; revising activity. 2. Delivery of educational materials to all OB providers, distribution of HALO sacks to all our care coordinators to use as a teaching tool when teaching safe sleep guidelines and to encourage parents to not use blankets, distribution of Prevent Needless Death Campaign materilas to interested parties that included 11 OB offices, 7 Pediatric providers and all Pinellas Pregnancy Centers, Official letter sent to all Pediatric providers informing them how many babies had died in the last three years due to unsafe sleep environments and encourage them to use consistent messaging by AAP, distribution of toothbrushes for mom and baby for all care coordinators to use as a teaching tool when encouraging dental health.	1. 50 couples have been seen in the FIOC intervention. 2. Delivery of educational materials to all OB providers, special distribution and special addition to our materials request form about pre-eclampsia, update or our Resource Guide, planning and finalizing a new Beds 4 Babies program to be officially launched 1/17, safe sleep survey that was started the second quarter of 2015-16 year has been completed and currently being analyzed.
	3.3: Address disparities in Black and Hispanic infant mortality.	3.3.1: By Dec 31, 2017, reduce the infant mortality rate of Black infants in Pinellas from 13.9 per 1,000 live births (2010-2012) to 11.5 per 1,000 live births. 3.3.2: By Dec 31, 2017, reduce the infant mortality rate of Hispanic infants in Pinellas from 8.1 per 1,000 live births (2010-2012) to 7.3 per 1,000 live births.	1. Build Florida Healthy Babies Task Force.	Convene group minimum of quarterly and create action plan.	DOH-Pinellas	IFMHC, JWB, JCACH, Healthy Start	<p>Increase membership of the CAN and Hispanic Outreach Center.</p> <p>Reduce the number of infant deaths due to unsafe sleeping practices.</p> <p>Increase percentage of Pinellas mothers receiving prenatal care.</p>	1. Healthy Babies task force met on 8/9/2016 and 9/13/2016.	1. Notified that funding will be available from DOH for Healthy Babies in 2017. No activity this quarter.

Pinellas County CHIP: 2016-17  
Behavioral Health

Goal	Strategy	Objective	Activity 2016-17	Process Measure 2016-17	Coordinating Agency	Partner Agencies	Outcome Measure(s)	July - September 2016	October - December 2016
BH 1: Increase access to behavioral health services	1.1: Strengthen the integration of behavioral and primary health care service delivery.	1.1.1: By Dec 31, 2016, increase the percentage of Pinellas adults who always or usually receive the social and emotional support they need from 81.3% (2010) to 89.4%.	1. Continue implementation of pilot program to engage and provide services to the top 33 utilizers of Pinellas County's public Baker Act and jail facilities.	1 a. #/% Clients engaged and enrolled in pilot b. #/% of clients who receive therapy indicated in treatment plan	Pinellas County Human Services; Administrative Forum	Local Behavioral Health providers	Increased integration among behavioral healthcare providers.	1. 26 patients have been enrolled in the pilot. Therapy information is not available at this time, but the evaluator will be reviewing the information.	1. 26 patients remain enrolled. Therapy information will be available sometime in the new year.
	1.2: Integrate trauma-informed care practices across care settings with emphasis on Adverse Childhood Experiences (ACEs).	1.2.1: By Dec 31, 2017, reduce the rate of non-fatal hospitalizations for self-inflicted injuries from 82.0 per 100,000 (2008-2010) to 65.6 per 100,000 among Pinellas youth 12-18.	1. Promote provider and agency education on trauma-informed approaches and practices.	1. Hold two trainings for providers in Pinellas County.	1. Peace4Tarpon,	1. National Center for Trauma-Informed Care, DOH-Pinellas	200 health professionals educated on trauma-informed care principles  4 new organizations distributing Trauma-Informed Care materials	1. S.A.F.E. Training held this quarter by Peace4Tarpon for parents, with aim of trying to lessen ACE scores for kids. Suncoast First Responder's summit held in September, with aim of addressing stress and secondary trauma in our first responders. Three additional trainings held in September. Total attendees of trainings for this quarter: 165.	Three trainings held in October-December, including at the P4T Forum. Total attendees: 88.
	1.3: Engage targeted at-risk populations to better understand behavioral health care needs and prevent barriers to access	1.3.1: By Dec 31, 2017, decrease the suicide age-adjusted death rate in Pinellas from 17.7 per 100,000 (2010-2012) to 16.2 per 100,000.	1. Examine Pinellas County suicide data to identify additional trends or areas of concern.	1. Analyze data and determine the need for an in-depth report.	1. Pinellas County	1. BayCare, DOH-Pinellas	Identify gaps in behavioral healthcare access.	1. Pinellas County completed an initial review of the data to identify surface-level correlations and areas of note. BayCare, Pinellas, and DOH-Pinellas will determine next steps during Q4.	1. Presentation made to the Admin Forum regarding suicides. Baycare to lead a project starting in 2017; more information to follow next quarter.
	2.1: Advocate for changes in policy and practices related to substance abuse, including more stringent regulations for prescription drugs classified as controlled substances.	2.1.1: By Dec 31, 2017, reduce the number of accidental drug or toxin related deaths in Pinellas from 201 (2012) to 181.	Objective met. Accidental drug-related deaths for 2014 was 166, and for 2015 was 179. DOH-Pinellas will maintain connection with Administrative Forum and Regional Council and track their work on policy-related advocacy.						

BH 2: Reduce substance abuse among children and adults	2.2: Raise awareness among providers, parents, youth, and businesses on emerging substance abuse trends to improve and inform practices.	2.2.1: By Dec 31, 2016, reduce the number of Pinellas youth who report lifetime drug use from 31.1% (2012) to 27.9%.	1. Implement a campaign to educate <b>parents, businesses, and youth</b> on medical marijuana and the dangers of emerging designer drugs and prescription drugs	1. Educational materials distributed/parents educated 2. Number of businesses educated 3. Number of youth led groups who receive campaign materials	LiveFree/Pinellas County Justice & Consumer Services	LiveFree! Coalition members	Improved understanding of emerging designer drugs among youth and adults.		
	2.3: Increase access to substance abuse services for prenatal and postpartum women.	2.3.1: By Dec 31, 2017, reduce the rate of Neonatal Abstinence Syndrome in Pinellas from 27.1 per 1,000 births (2009-2011) to per 24.4 per 1,000 births.	1. Work with OB-GYNs to provide warnings to their patients on the dangers of substance use/abuse while pregnant and provide supports to address underlying issues. 2. Collect current data on drugs to which newborns are most frequently exposed.	1. Offer education and materials to all 32 OB providers in Pinellas County. 2. Produce a 2015-16 report on trends of substance exposure to newborns.	1. Healthy Start Coalition 2. Substance Exposed Newborns task force; USFSP (Amanda Moore-Krummerich, PEMHS)	1. Operation PAR, Healthy Start Coalition, Birth Hospitals, BayCare, DOH-Pinellas, Motivating New Moms 2. Healthy Families	More information available on NAS in Pinellas County.	1. HSC continues to provide materials to all 32 OB offices. 2. SEN is in the process of reviewing the raw numbers for 2015-2016 as of August 2016, and will share the report when completed.	1. HSC continues to provide materials to all 32 OB offices. 2. SEN is in the process of reviewing the raw numbers for 2015-2016, and will share the report when completed.
BH 3: Reduce violence among children and families	3.1: Promote community programs that maximize healthy development and interaction among children, families, schools, and communities.	3.1.1: By Dec 31, 2017, reduce the rate of Pinellas children under 18 experiencing child abuse from 24.0 per 1,000 (2012) to 16.9 per 1,000.	1. Promote JWB's Prevent Needless Deaths campaign. 2. Hold trauma informed care trainings for local MCH care providers.	1. Distribute booklets to local birthing hospitals (St. Pete General; Bayfront Baby Place; Morton Plant Hospital - CLW; & Mease Countryside) and at least ten daycare providers. 2. At least three trainings held in Pinellas (one at DOH-Pinellas)	1. JWB 2. USFSP	1. Hillsborough Children's Board; Local MCH providers and agencies 2. MCH providers	Common screening policies/practices for violence and trauma	1. Pending. 2. Transitional quarter - no updates.	1. Pending. 2. 8 TIC trainings conducted this quarter by USFSP

	3.2: Promote awareness, training, and advocacy to improve and inform practices related to domestic violence.	3.2.1.: By December 31, 2017, reduce the domestic violence rate in Pinellas from 772.8 per 100,000 (2009-2011) to 695.5 per 100,000	1. Educate community healthcare providers on domestic violence policies and preventive practices.	1. Hold at least two Being a Better Bystander trainings countywide.	1. Domestic Violence Task Force	1. DVTF partners	Greater number of DOH-Pinellas staff educated on DV prevention and preventive practices.	1. No training scheduled yet; reached out to DVTF to begin process.	1. DOH-Pinellas connected with DVTF and will schedule a BBB training for early 2017.
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Pinellas County CHIP: 2016-17  
Health Promotion & Disease Prevention

Goal	Strategy	Objective	Activity 2016-17	Process Measure 2016-17	Coordinating Agency	Partner Agencies	Outcome Measure(s)	July - September 2016	October - December 2016
HPDP 1: Increase the percentage of adults and children who are at a healthy weight	1.1: Promote healthy eating habits and active lifestyles in adults.	1.1.1: By Dec 31, 2017, decrease the percentage of Pinellas adults who are either overweight or obese from 65.6% (2010) to 59%.	<ol style="list-style-type: none"> <li>1. Provide educational sessions to DOH-Pinellas clients demonstrating healthy and culturally appropriate cooking and grocery shopping on a budget.</li> <li>2. Promote usage of county parks, trails, and recreational facilities.</li> <li><del>3. Implement Diabetes Prevention Program referral project.</del></li> <li>3. Implement Humana Vitality in Pinellas County Schools.</li> <li>4. Explore data sharing between DOH-Pinellas and hospital systems regarding obesity rates.</li> </ol>	<ol style="list-style-type: none"> <li>1. Conduct four education series annually for DOH clients, as documented by sign-in sheets and post-session surveys.</li> <li>2. DOH-Pinellas collaborates with recreation departments to update brochures annually and disseminate 1500 brochures to the community.</li> <li><del>3. Increase referrals in Pinellas County by 50% through physician letter campaign, AMA partnership, etc.</del></li> <li>3. Increase Silver Status from 18% - 30%.</li> <li>4. Hold at least one meeting to explore data sharing regarding rate of obese patients in BayCare hospital system.</li> </ol>	<ol style="list-style-type: none"> <li>1. UF/IFAS Extension Pinellas County</li> <li>2. DOH-Pinellas</li> <li><del>3. YMCA (Kieran Gabel)</del></li> <li>3. PCS</li> <li>4. DOH-Pinellas</li> </ol>	<ol style="list-style-type: none"> <li>1. DOH-Pinellas</li> <li>2. Pinellas County Parks &amp; Conservation Resources, Municipal Governments</li> <li><del>3. BayCare</del></li> <li>3. YMCA, Physicians, Walgreens</li> <li>4. BayCare (Dr. Cynthia Miller)</li> </ol>	Increased percentage of adults who report exercising regularly.	<ol style="list-style-type: none"> <li>1. A total of 6 sessions were conducted (2 per month). This will continue for 2017.</li> <li>2. Brochures are updated and currently being distributed by the PICH team.</li> <li>3. No updates this quarter.</li> <li>4. No meetings took place this quarter.</li> </ol>	<ol style="list-style-type: none"> <li>1. A total of 6 sessions were conducted at St. Pete and Mid County health departments.</li> <li>2. Brochures are updated and currently being distributed by the PICH team.</li> <li>3. No update this quarter; staff change at PCS.</li> <li>4. DOH-Pinellas met with local hospitals to explore overall data sharing; more targeted discussion to follow in early 2017.</li> </ol>
	1.2: Promote healthy eating habits and active lifestyles in children.	<p>1.2.1: By Dec 31, 2017, increase the proportion of Pinellas children (1st, 3rd, 6th grade) who are at a healthy weight from 65.1% (2010 - 2011) to 71.6%.</p> <p>1.2.2: 1.2.2: By Dec 31, 2017, increase the percentage of Pinellas middle and high school students who are at a healthy weight from 67.3% (2012) to 73.4%.**</p>	<ol style="list-style-type: none"> <li>1. Conduct inventory based self-assessments of Pinellas County Schools on the Alliance for Healthier Generation guidelines</li> <li>2. Create data report of BMI at each grade level.</li> </ol>	<ol style="list-style-type: none"> <li>1. 1. Increase in number of schools that adopt Alliance for a Healthier Generation standards.</li> <li>2. Analyze BMI data starting at 3rd grade.</li> </ol>	<ol style="list-style-type: none"> <li>1. Pinellas County Schools</li> <li>2. Pinellas County Schools</li> </ol>	<ol style="list-style-type: none"> <li>1. Alliance for a Healthier Generation, DOH-Pinellas</li> <li>2. DOH-Pinellas</li> </ol>	<p>Increased percentage of children who report exercising regularly.</p> <p>Increase number of children who report eating recommended daily values of fruits and vegetables.</p>	<ol style="list-style-type: none"> <li>1. No updates this quarter.</li> <li>2. No updates this quarter.</li> </ol>	<ol style="list-style-type: none"> <li>1. No update this quarter; staff change at PCS.</li> <li>2. No update this quarter; staff change at PCS.</li> </ol>
	2.1: Promote screening,	2.1.1: By Dec 31, 2017, increase the percentage of Pinellas adults age 50 or older who received a colorectal screening in the past five years from 73.5% (2010) to 80.9%.	<ol style="list-style-type: none"> <li>1. Examine disparities in colorectal cancer incidence, conduct research with priority populations, and implement multilevel interventions using the community-based prevention marketing framework.</li> </ol>	<ol style="list-style-type: none"> <li>1. Meet bimonthly to implement program and track progress</li> </ol>	<ol style="list-style-type: none"> <li>1. USF-Florida Prevention Research Center</li> </ol>	<ol style="list-style-type: none"> <li>1. DOH-Pinellas, DOH-Hillsborough, Community Health Worker Coalition, community members, American Cancer Society, Blue Cross Blue Shield, Moffitt, Florida Cancer Data System, Southwest Florida Cancer Collaborative</li> </ol>	Number of adults educated about the importance of colorectal cancer screening.	CCC met on July 26, 2016.	<ol style="list-style-type: none"> <li>1. CCC met on November 3, 2016. Upcoming meetings include January 31, 2017 to review Revised Model-created from Group Modeling Workshops, and April 4, 2017 for Marketing Plan Workshop to discuss and decide on best marketing approach/strategy.</li> </ol>

HPDP 2: Increase behaviors that improve chronic disease health outcomes	education, and referral to treatment related to cancer.	2.1.2: By Dec 31, 2017, increase the percentage of Pinellas women age 40 or older who received a mammogram in the past year from 61.5% (2010) to 67.7%.	1. Distribute educational materials to promote awareness of the Florida Breast and Cervical Cancer Early Detection Program, Mammography Voucher Program and general screening recommendations to women above 40 in Pinellas County.	1. Educate community via at least 20 locations in Pinellas County from July 2016-June 2017.	1. DOH-Pinellas	1. TBCCN Partners St Pete Free Clinic Komen BayCare SW Florida Cancer Control Collaborative	Adults who have had a clinical breast exam	1. Total number education sessions: 6 Total number of participants: 141	1. Total number education sessions: 6 Total number of participants: 200
	2.2: Promote screening, education, and referral to treatment related to heart disease.	2.2.1: By Dec 31, 2017, decrease deaths due to heart disease in Pinellas from 155.5 per 100,000 (2010-2012) to 139.9 per 100,000.	1. Train 7% of the Pinellas County population in Hands-Only™ CPR training via education in the community and in schools.  2. Refer diagnosed prediabetes patients at local hospitals to the CDC's National Diabetes Prevention Program, run locally as the YMCA's Diabetes Prevention Program.	1. Increase number of citizens educated by 7%; establish baseline of bystander CPR data from local emergency response services.  2. Increase number of regularly referring providers (physician offices, health systems) by 30 between the SunCoast and St. Pete regions.	1. American Heart Association  2. YMCA of St. Pete, YMCA of the Suncoast	1. Healthy St. Pete, AHA board, BayCare, DOH-Pinellas, Pinellas County Schools  2. Local physicians and hospital systems.	Reduce obesity rates and increase physical activity in Pinellas County adults  Reduce diabetes prevalence.	1. Q3&4: TOTAL since 7/2015: 79,853 (54,544 certified/ 25,309 Hand-Only trained) Q3&4 breakdown: 15,267 certified/9,200 Hand-Only trained  2. No updates this quarter.	1. Q3&4: TOTAL since 7/2015: 79,853 (54,544 certified/ 25,309 Hand-Only trained) Q3&4 breakdown: 15,267 certified/9,200 Hand-Only trained.  Pinellas Population: 929,048 Percent trained to date: 8.595%. Exceeded goal of 7%!  2. 11 new referring physician offices for YMCA DPP since September of 2016. Goal of 30 by June 2017 is on target.
	2.3: Promote activities to reduce tobacco use and exposure in adults and youth.	2.3.1: By Dec 31, 2017, increase the number of committed never smokers amount Pinellas youth, ages 11 - 17 from 64.1% (2012) to 70.5%.	1. Create and maintain local SWAT chapters.  2. Survey tobacco retail outlets about point of sale advertising.	1. SWAT Clubs at 10 middle/high schools will conduct at least 50 outreach activities will be completed each year.  2. The DOH Pinellas Tobacco Program will survey 300 local retailers in Pinellas county.	DOH-Pinellas –Tobacco Free Program/SWAT Coordinator	Pinellas County Schools, Tobacco Free Coalition	Increased number of students involved in SWAT  Increase in the number of SWAT outreach activities	1. 8 SWAT clubs conducted 15 outreach activities during this quarter.  2. Pending	1. 8 SWAT clubs conducted 25 outreach activities during this quarter.  2. Pending.
	2.3.2: By Dec. 31, 2016, decrease the percentage of Pinellas adults who are current smokers from 19.3% (2010) to 17.0%.	1. Distribute "Quitkits" to clients who are smokers within Florida Department of Health in Pinellas clinics  2. Educate local policymakers, businesses, and community organizations about tobacco use.  3. Meet quarterly with Tobacco Free Campus Task Force at local universities/colleges.	1. 2500 Quitkits will be distributed  2. At least 2 tobacco worksite wellness policies will be adopted  3. Minimum of four meetings will be held.	1. DOH-Pinellas – Tobacco Free Program  2. DOH-Pinellas  3. DOH-Pinellas	1. Area Health Education Center (AHEC)  2. Worksites, Housing  3. St. Petersburg College	Increased number of smoke free/tobacco free policies adopted  Increased # of new partnerships	1. 785 quit kits were distributed to smokers. Many were distributed at health fairs and to programs providing services to smokers.  2. Habitat for Humanity, has gone tobacco-free (7/1/16) and adopted and implemented tobacco-free policies. In addition to being tobacco-free at their administrative offices, the policies include their construction worksites as well. In addition, Campbell Landings, a retirement community in St. Petersburg, removed their designated smoking area on their grounds and went smoke-free on September 1st. The implementation of their smoke-free policies was accomplished smoothly and utilizing "best practices" developed by Pinellas staff.	During this period, three of the Pinellas County Housing Authority properties have gone smoke free. In addition, policy is being developed for another Tobacco Free Worksite to go smoke-free. Habitat for Humanity of Pinellas has adopted policies and is a Tobacco Free Worksite and has included properties where they are constructing houses.	

<p>HPDP 3: Increase protection against the spread of infectious disease</p>	<p>3.1: Provide targeted education on the benefits of receiving immunizations to increase the percentage of children who are fully immunized.</p>	<p>3.1.1: By Dec 31, 2017, increase the percentage of Pinellas two-year-olds who are fully immunized from 75.3% (2012/2013) to 90%.</p> <p>3.1.2: By Dec 31, 2017, increase the percentage of Pinellas Kindergarteners who are fully immunized from 89.8% (2012/2013) to 94%.</p>	<ol style="list-style-type: none"> <li>1. Assess (or Strengthen) Current Partnership for Collaboration and Define Roles and Responsibilities</li> <li>2. Market use of State Immunization Information Systems (IIS)</li> <li>3. Identify and conduct effective outreach and educational activities</li> <li>4. Develop/adopt/adapt consistent messaging plan</li> </ol>	<ol style="list-style-type: none"> <li>1. Documentation of quarterly meetings and development of sharepoint/web portal</li> <li>2. Quarterly updates of educational opportunities and percentage of providers using IIS in Pinellas County</li> <li>3. Quarterly updates on parent surveys, educational materials, schedule of outreach events, and vaccine administration</li> <li>4. Quarterly updates on messaging plan progress, and development of toolkit materials</li> </ol>	<p>DOH-Pinellas</p>	<ol style="list-style-type: none"> <li>1. DOH-Pinellas PITCH Pinellas County Schools American Cancer Society/Cancer Collaborative JWB Municipality Leaders (support)</li> <li>2. DOH-Pinellas State Immunization – Field Staff State Immunizations – FLSHOTS (training staff) FLSHOTS vendor (marketing partner) PITCH (support)</li> <li>3. DOH-Pinellas Pinellas County Schools PITCH Community Health Centers/FQHC Moffitt Cancer Center ACS/Cancer Collaborative, Additional support: OB/GYNs, Nursing Schools, Faithbased Nursing, Medical associations</li> </ol>	<p>Increase the number of health care providers represented on PITCH</p> <p>100% of Pinellas County providers will complete the training course</p> <p>Improve Pinellas County Schools Immunization Report Card scores by 10%</p>	<p>Pending</p>	<p>Pending</p>
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Pinellas County CHIP: 2016-17 Healthy Communities & Environments									
Goal	Strategy	Objective	Activity 2016-17	Process Measure 2016-17	Coordinating Agency	Partner Agencies	Outcome Measure(s)	July - September 2016	October - December 2016
HCE 1: Establish integrated planning and assessment processes that promote health in community level policies and plans	1.1: Include a public health component in community planning processes to increase awareness and opportunity of the built environment's impact on healthy behaviors.	1.1.1: By Dec 31, 2016, increase activity related to the development of policies and plans that support individual and community health within Pinellas from a score of 82% (2012) to 90%.	1. Educate policymakers on "health in all policies" and HIA, including topics related to public health, development, the built environment.  2. Support the inclusion of a health component in local policies and plans.	1. 3 meetings or events advocating for the importance of a health element in comprehensive plans will be conducted; Research conducted on when and how local policies are updated.  2. Health written into at least three city and/or county plans or policy.	1. DOH-Pinellas  2. DOH-Pinellas	1. City and county governments, MPO  2. City and county governments, MPO	Health in All Policies approach codified in at least one city or county.	1. DOH-Pinellas met with the City of St. Pete regarding Health in All Policies. City of Largo is creating a Medical Arts District Plan, which will have several health-related elements.  2. St. Pete and Largo are pending; updates likely in early 2017.	1. DOH-Pinellas invited to present with DOH-Hillsborough  2. No updates this quarter - St. Pete and Largo are pending; more information on progress is likely in early 2017.
	2.1: Promote options for access to nutritious foods throughout Pinellas County.	2.1.1: By Dec 31, 2016, increase the percentage of Pinellas adults who meet both of the daily recommendations for fruit and vegetable consumption from 9.3% (2010) to 11.5%.	1. Support development of local city policies related to food access.  2. Promote healthy and affordable food options to communities countywide.	1. Assist at least one city with identifying model language to implement mobile produce vending and/or healthy corner stores.  2. Promote healthy vending via adoption of AHA guidelines for healthy vending by businesses; Good Neighbor Store designations adopted by a minimum of 2 stores.	1. DOH-Pinellas  2. DOH-Pinellas	1. Municipal governments  2. AHA, Municipal Governments	Adults at a healthy weight	1. The City of St. Petersburg developed a Good Neighbor Store plan in Summer 2016 to increase availability of healthy foods and beverages at local community markets and "corner stores." However, it has been challenging to obtain buy-in from the community in order to implement the plan. The plan will no longer be implemented through the Partnerships to Improve Community Health (PICH) program, but will instead be housed within the internal "Healthy St. Pete" initiative. Their commitment to furthering this endeavor specifically and policy, system, and environmental improvements to improve health in general is championed by the deputy mayor and the director of Parks and Recreation.  2. In terms of promotion, DOH-Pinellas made an important link with communities countywide by starting its first social media account on Twitter (@HealthyPinellas). Although still in its infancy in terms of followers for an urban health department (326 as of 1/17/2017), it has allowed DOH-Pinellas to reach new audiences and expand its portfolio of communication strategies. In the Fall of 2016, DOH-Pinellas released its updated Guide to Farmers Markets & Produce Stands. Over 5000 were distributed to partners and individuals countywide.	1. The PICH program worked with the City of St. Petersburg to identify model language and develop a Good Neighbor Store plan, although the implementation has yet to occur.  2. DOH-Pinellas continues to distribute Guide to Farmers Markets. Good Neighbor Store designation has not been formally adopted yet by store in St. Petersburg.
HCE 2: Increase access to nutritious and affordable foods	2.2: Support a focused effort to increase access to nutritious and affordable foods for children.	2.2.1: By Dec 31, 2017, increase the percentage of Pinellas middle school students who consume at least five servings of fruits and vegetables a day from 21.2% (2012/2013) to 23.3%.	1. Promote Smart Snacks in Schools.  2. Implementation of Fun Bites program.  3. Implement new grant (pending funding) for nutrition education.	1. Training and handbook developed; increase from 75% to 100% compliance by June 2017.  2. At least two municipalities will implement Fun Bites (little league, café, etc.)  3. Gardening, Myplate, general nutrition education implemented in elementary schools	1. Pinellas County Schools (Peggy Johns)  2. DOH-Pinellas  3. UF IFAS Extension Office (Nan Jensen)	1. DOH-Pinellas (PICH grant); Alliance for a Healthier Generation  2. Healthy St. Pete (Gillian Cutro)  3. Pinellas County Schools (Peggy Johns)	Students at a healthy weight	1. Schools continue to implement Smart Snacks. Compliance will be reported at the end of 2016.  2. Two municipalities have implemented Fun Bites: St. Pete and Largo.  3. No update.	1. 115 out of 120 schools in the Pinellas County Schools District have adopted Smart Snacks in School guidelines. 95% compliance as of end of 2016.  2. As of January 2017, 15 recreation centers or recreation programs have implemented the Fun Bites program. In terms of municipalities, five have implemented Fun Bites (Largo, St. Petersburg, Palm Harbor CSA, Clearwater, Seminole).  3. Pending.

<p><b>HCE 3:</b> Increase access to safe opportunities for physical activity</p>	<p>3.1: Promote collaborative efforts to form safe transportation linkages to schools, work, home, and recreation.</p>	<p>3.1.1: By Dec 31, 2017, complete 15 transportation linkages in Pinellas through infrastructure and programming improvements.</p> <p>3.1.2: By Dec 31, 2016, decrease the percentage of Pinellas adults who were sedentary, or did not participate in any leisure-time activity in the past 30 days from 25.5% (2010) to 22%.</p>	<p>1. Increase the number of infrastructure improvements for bicycle and pedestrian safety as well as park and trail access.</p> <p>2. Maintain and update a list of city/county parks and recreational areas where the community can participate in free or low cost areas for physical activity.</p>	<p>1. Complete 5 environmental improvements that focus on safe physical activity within Pinellas County, including an increase of Auxiliary Ranger hours.</p> <p>2. Brochure/flyer updated at least once per year and number distributed</p>	<p>1. MPO</p> <p>2. DOH-Pinellas</p>	<p>1. City &amp; County Governments, DOH-Pinellas, Pinellas County Parks and Conservation.</p> <p>2. City and County Municipalities, 211-Tampa Bay Cares</p>	<p>Increased park attendance and trail use.</p> <p>Increase in adults and children reporting regular physical activity</p>	<p>1. Activity met; fitness zones and bike fix-it stations added to several municipalities.</p> <p>2. List maintained and updated by CHIP evaluator. Brochure was updated for 2016.</p>	<p>1. A total of 45 parks or recreation areas have received infrastructure improvements (e.g., a fitness zone, wayfinding sign, bike fix-it station, or bike rack).</p> <ul style="list-style-type: none"> <li>• 6 Fitness Zones were added</li> <li>• 14 bike fix-it stations were added</li> <li>• 230 new bike racks were added</li> <li>• 36 wayfinding signs were added</li> </ul> <p>2. No further updates to brochure have been created.</p>
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