PINELLAS COUNTY COMMUNITY HEALTH ACTION TEAM (CHAT)

Wednesday, September 12, 2012 10:00 AM - 12:00 PM

Pinellas County Health Department Mid-County Conference Center 8751 Ulmerton Road, Largo, FL 33771

MINUTES

Welcome and Introductions

Claude Dharamraj, MD, MPH, FAAP

Dr. Dharamraj convened the meeting, welcoming and thanking attendees for their participation. Each attendee introduced themself to the team. (see attached sign-in sheet for members in attendance)

Melissa announced potential CHAT members who plan to participate, but were unable to attend today's meeting: Thometta Cozart-Brooks from USF Center for Equal Health, Carrie Hepburn from Tampa Bay Healthcare Collaborative, Mary Twohey from Disability Achievement Center, Avery Rosnick-Slyker from Florida Covering Kids and Families, and a representative from Pinellas County Health and Human Services.

CHAT Purpose, Roles, and Vision

Claude Dharamraj, MD, MPH, FAAP

Dr. Dharamraj gave an introduction to CHAT, including purpose, roles, and responsibilities of the team. CHAT will be responsible for the development of a Community Health Improvement Plan (CHIP) for Pinellas County based upon results of the Community Health Assessment (CHA) that is underway. The CHA and CHIP are being sponsored by the Pinellas County Health Department and Florida Department of Health, but are community owned and driven. Most CHAT members and many other community partners have been involved since the assessment process began in 2011 through participation in the Local Public Health System Performance Assessment and/or collaborative engagement at the St. Petersburg College Collaborative Labs. The purpose of today's meeting is to review CHA results to date in preparation to begin work on the CHIP at future meetings.

Dr. Dharamraj also provided an overview of the Local Public Health System, the 2012-2015 State Health Improvement Plan (SHIP), and the core functions and essential services of public health. (see attached PowerPoint)





CHA, CHIP, and MAPP Overview

Melissa Van Bruggen

Melissa continued the introduction by providing an overview of the community health improvement planning process, including Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and Mobilizing for Action through Planning and Partnerships (MAPP). MAPP is a community driven and strategic approach to community health improvement planning that is being utilized as the framework for the Pinellas CHA and CHIP. The MAPP process is comprised of four assessments that will be reviewed today: Community Themes and Strengths Assessment, Local Public Health System Performance Assessment, Forces of Change Assessment, and Community Health Status Assessment. Each of these assessments has been conducted and Health Department Staff are currently working to compile all of the results into a Community Health Assessment report. (see attached PowerPoint)

Community Themes and Strengths

Rebecca Phillips

Rebecca provided an overview of the Pinellas County Community Themes and Strengths Assessment, which provides community perceptions and an understanding of the issues residents feel are important. Two primary approaches to invite community input were utilized: a collaborative engagement and a community survey.

The collaborative engagement was facilitated by St. Petersburg College Collaborative Labs on May 8, 2012 and attended by nearly 70 individuals representing more than 30 partner organizations. Participants assessed the 10 essential public health services including, themes, strengths, and forces of change the affect our community. The community survey assayed perceived community health, individual health, and other quality of life issues among county residents. More than 800 survey responses were collected from residents across the county. Survey collection spanned 5 weeks utilizing both paper and electronic surveys collected via the health department website, clinics, home visiting services, neighborhood family centers, and other partner organizations. Primary concerns of residents included addiction, access to care, obesity, and chronic diseases. (see attached PowerPoint for summary of assessment and survey results)

Community survey related questions for follow up:

- Can survey template be shared?
- Can complete survey results be shared?
- Can survey results be broken down by geographic areas such as zip codes, regions, and at-risk zones?
- Where did HIV/AIDS rank on the questions of health problems of concern in your community?





LPHS Performance Assessment Forces of Change

Melissa Van Bruggen

Melissa provided an overview of both the Local Public Health System Performance and Forces of Change Assessments.

The Pinellas County Local Public Health System Performance Assessment was facilitated by the Suncoast Health Council via two half day collaborative sessions on July 28 and August 11, 2011 whereby participants assessed the components, activities, competencies, and capacities of our local public health system. Performance scores improved from the last assessment in 8 of 10 essential service areas and 50% of essential services had optimal activity. (see attached PowerPoint for summary of assessment results)

The Pinellas County Forces of Change Assessment was conducted as part of the collaborative engagement facilitated by St. Petersburg College Collaborative Labs on May 8, 2012 as Rebecca described in the Community Themes and Strengths Assessment review. During the Forces of Change Assessment, participants worked with an assigned team to identify forces of change in Pinellas County and the threats and/or opportunities generated by these occurrences. Key forces identified were economic, political, social, technological, and legal/ethical, including aging population, rise in chronic disease rates, increase in addiction, declining budgets and reimbursement, health care and Medicaid reform, EHR, social media, and increasing regulations. (see attached PowerPoint for summary of assessment results)

Community Health Profile Report

Claude Dharamraj, MD, MPH, FAAP

Dr. Dharamraj provided an overview of the Pinellas County Community Health Status Assessment, which identifies priority community health and quality of life issues and provides an understanding of the health of those who live in the community. Results of the Status Assessment are presented in a Community Health Profile Report. Key data were reviewed for Pinellas, including demographics and population characteristics, health resources availability, leading causes of death, communicable disease, maternal and child health, oral health, substance abuse, social and mental health, physical activity, nutrition, and physical environment. (see attached PowerPoint for summary of assessment results)

Community Health Profile related questions for follow up:

• What is the infant mortality rate for Hispanic population in Pinellas?





Wrap Up, Q&A, Next Steps Claude Dharamraj, MD, MPH, FAAP

Dr. Dharamraj concluded the meeting by answering questions and discussing next steps, including future meeting dates and additional participants needed. CHAT will meet monthly until the CHIP is developed and implemented; once monitoring begins, we can move to quarterly meetings or as needed. Consensus was that second Wednesday monthly meetings work for the team, but afternoons would be better for some. Future meetings were set for second Wednesday from 2:00-4:00 PM at the Mid-County Conference Center with next meeting on October 10th.

Many additional team members were suggested and discussed, including representatives from law enforcement/emergency services; early learning, higher education/St. Petersburg College; Operation PAR, PEMHS, and/or substance abuse prevention coalition; county/parks; homeless coalition; and north county churches, possibly FAST representative. Health Department staff will follow up with some of these organizations, but the team is a working team and we don't want it getting too large at this stage. CHAT was organized with only one representative from a sector, although we have many partner organizations in all sectors of the community. One suggestion was to focus on providers/partners who are at prevention instead of treatment end of the spectrum. There was also a suggestion to develop strategic priorities and/or strategies first and then invite additional partners to the team as needed to implement and monitor strategies. Team members were in agreement with this suggested approach.

Next Meeting: October 10, 2012, 2:00 PM



