

Community Health Improvement Plan

Mineral County 2016



**Mineral County Healthy Communities Coalition
Mineral County Health Department
Mineral Community Hospital**

Table of Contents

Acknowledgements.....	3
Overview.....	4
Mission.....	4
Vision for a Healthy Community	4
Priorities.....	4
Methodology	5
Priority Area- Substance Abuse	5
Goals.....	6
Strategies	6
Measurable Objectives	7
Goals.....	7
Strategies	7
Measurable Objectives	7
Substance Abuse/Alcohol resources.....	7
Priority Area- Unemployment	8
Goals.....	8
Strategies	8
Measurable Objectives	8
Unemployment Resources	8
Priority Area- Child Abuse and Neglect	9
Goals.....	9
Strategies	9
Measurable Objectives	10
Child Abuse and Neglect Resources-	10
Priority- Obesity.....	10
Goals.....	10
Strategies	10
Measurable Objectives	11
Obesity Resources-	11
Alignment	11

Acknowledgements

A huge thank you to all who worked on growing the Mineral County Community Health Improvement Plan to fruition.

Name	Organization
Amy Lommen, MS, CHES	Healthy Communities Coalition, Co-Coordinator
Carissa Kuhl	Healthy Communities Coalition, Co-Coordinator
Peggy Stevens, RN	Mineral County Health Department, Director
Jennifer Donovan, RN	Mineral County Health Department, Parents as Teachers/ Mineral County School Nurse
April Quinlan	Mineral County Health Department, Parents as Teachers
Laura Acker	Mineral County Health Department, Parents as Teachers
Louise Triplett	Mineral County Health Department, PHEP Coordinator
Barbara Jasper, RN	Mineral County Health Department, Tobacco
Mary Furlong	Mineral County Healthy Relationships Educator, MCSART
Monte Turner	Mineral Community Hospital, Health Communities Coalition
Ronald Gleason	Mineral Community Hospital, CEO
Stephanie Quick	Mineral County Prevention Specialist

Overview

Mission Our mission is to provide sustainable services promoting optimal health in Mineral County.

Vision for a Healthy Community A thriving community where people want to live.

Priorities



Methodology

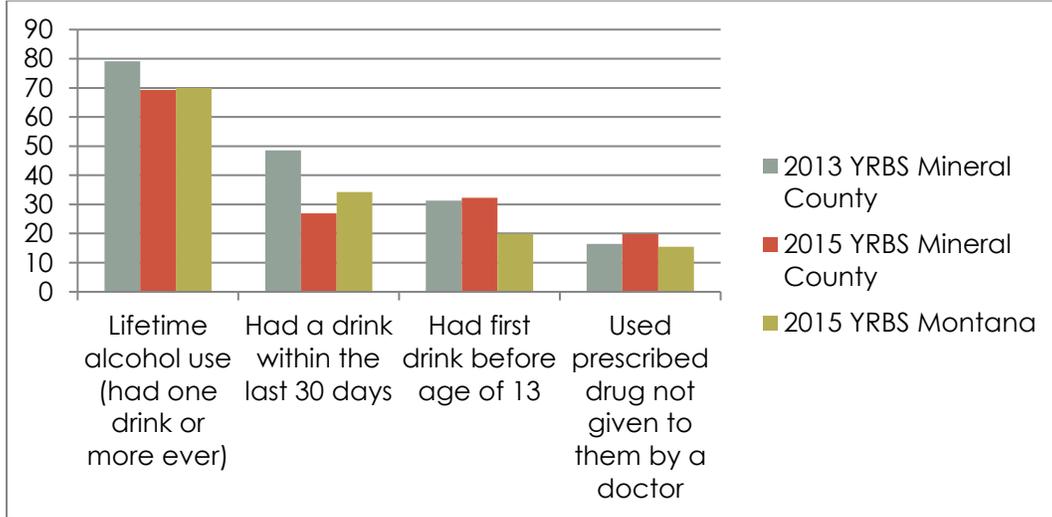
The Mineral County Health Department (MCHD), Mineral Community Hospital (MCH), and the Public Health and Safety Division (PHSD) collaborated in the spring of 2016 to conduct a Community Assessment for Public Health Emergency Response (CASPER); in which the goal was to collect primary data for a community health assessment (CHA). Ten to fifteen teams of 2-3 people conducted 140 household interviews. The 140 households were a sample of the 2,446 total households in Mineral County. Data was compiled from the CASPER to identify the most perceived serious health issues. The data was then presented to the Mineral County Healthy Communities Coalition (HCC) and the decision to move forward with the four priority areas was made. Those four major areas of concern for the residents of the communities within Mineral County were 1) Substance abuse, 2) Unemployment, 3) Child Abuse and Neglect, and 4) Obesity. These four health issues are the prioritized the Community Health Improvement Plan (CHIP). Task forces were assembled based on areas of expertise and interest, then goals and objectives were created as a guide to implement the CHIP by 2019 in Mineral County.

Priority Area- Substance Abuse

Substance abuse, including alcohol and illicit, legal, and prescribed drugs, is an extremely important topic to address as it affects every member of our county- from individuals to families; the effects can be felt within the communities and throughout the county. These sentiments are reflected within findings from the CHA. Almost 80 percent (79.3%) of participating households identified substance and alcohol abuse as the most serious health concern. Health outcomes related to substance abuse include an increased risk for motor vehicle crashes, domestic violence, crime, child abuse and neglect, and suicide. Substance abuse can cause loss of lives if not prevented, left untreated, or mismanaged.

Mineral County high school students rank equivalent or higher on many of the substance and alcohol use indicators on the Montana Youth Risk Behavior Survey (YRBS) than their statewide peers. While there were substantial changes from the 2013 to the 2015 YRBS (sample size doubled from 2013-2015), data shows that addressing substance abuse among our youth is imperative.

Table 1- 2013 and 2015 Mineral County YRBS and 2015 Montana YRBS for Substance Abuse



Goals

- Change the social norms surrounding alcohol and social events in Mineral County (providing alternatives to alcoholic events, public health campaign changing norms, etc.)
- Support existing programs for public health and alcohol use (DUI task force, public campaign regarding costs of DUI, MIP, etc.)
- Support/Implement curriculum for youth in and out of schools (in-school education, after school programs, summer programs, providing alternatives for children)
- Compliance with sales of alcohol to minors and over-serving at bars and restaurants (Support DUI task force with public campaigns)

Strategies

- ❖ Plan and implement 3 new non-alcohol related family events between August 2016 and December 2018 (movie nights, child/parent dances, etc.) {preferably to be recurring annually}
- ❖ Plan and implement a public health campaign regarding the costs (monetary, but also for children MIPs) of DUI, MIP, etc. (brochure, billboard, radio, schools, etc.) by May 2018
- ❖ Plan and implement alcohol abuse awareness in all Mineral County Schools by the end of the 2017/2018 school year.

Measurable Objectives

- ❖ Reduce the amount of children reporting lifetime alcohol use (one time) from 69.25% to 68% by 2019 YRBS reporting. (2015 YRBS) (MT 69.9%)
- ❖ Reduce the amount of children reporting having their first drink before they were 13 from 32.3% to 29%. (2015 YRBS) (MT 19.9%)
- ❖ Reduce current alcohol use (within last 30 days) reported by children from 26.9% to 25% by 2019 YRBS reporting. (2015 YRBS) (MT 34.2%)
- ❖ Establish a teen court in Mineral County by 2019.

Goals

- Public health campaign about dangers of prescription drugs (work with MCH to talk with patients, school campaign about pain medications and athletes) Decrease amount of children and youth reporting illicit/prescription drug misuse and abuse (in-school education, after school programs, summer programs, providing alternatives for children)

Strategies

- ❖ Plan and implement a public health campaign regarding dangers of prescription drugs to appear no later than May 2018. Include three types of media- billboards, brochures/flyers, pamphlets,
- ❖ Plan and implement in-school program and demonstrations geared towards education of what abuse/misuse is and how to prevent addiction from prescribed drugs.

Measurable Objectives

- ❖ Reduce the number of children reporting having taken prescription drugs without a doctor's prescription from 19.8% to 18% by 2017 YRBS reporting. (2015 YRBS) (MT 15.5%)

Substance Abuse/Alcohol resources

- ❖ Barb Jasper- tobacco
- ❖ Stephanie Quick- Mineral County Prevention Specialist
- ❖ Shawn Meekum- Frenchtown youth
- ❖ High School Counselors and PE teachers
- ❖ DUI task force- Ernie Ornelas
- ❖ Dess Clark- Alberton ANP
- ❖ Laurie Crawford
- ❖ Barbara Watt
- ❖ Alanon St. Regis

Priority Area- Unemployment

While unemployment isn't a health issue by itself, it is a risk factor for chronic conditions. Job loss and unemployment have a tremendous impact on mental and physical health; those who are unemployed are more likely to develop high blood pressure and heart disease than their employed counterparts. The stress of unemployment often changes health behaviors: eating more, drinking more, exercising less, and an increase in stress related behaviors like smoking. Unemployment rates consistently remain almost double that of Montana unemployment rates. In 2015 the average unemployment rate for Mineral County was 8.1%, while it was 4.7% statewide. That same trend follows into 2016 with 8% being the average Mineral County rate from January to July, and statewide the average is 4.4%.

Goals

- Work with town/planning councils to advertise Min. Co. as tourist destination (focus on natural resources)
- Work on beautification (possible grants for this?)
- Improve infrastructure to make the towns more usable/enjoyable (sidewalks, parks, destinations, "best-of" directories)
- Improve skill-building opportunities (TANIFF volunteer opportunities, technology workshops, opportunity resource guides, etc.)

Strategies

- ❖ Plan and implement 3 opportunities between August 2016 and August 2018 for community members in each section of the county (east, west, and central) to gain skills that will assist them in seeking employment.
- ❖ Meet with Mineral County Economic Development Council and County Commissioners on aggressively pursuing business relocation and development in Mineral County.

Measurable Objectives

- ❖ Decrease unemployment rate from 8% in 2016 to 7.5% in 2019

Unemployment Resources

- ❖ Superior Town Council
- ❖ Fire Dept./EMTs
- ❖ Mineral County Economic Development (Kevin Chamberlain)
- ❖ Missoula Resource Council
- ❖ Byron Quinlan- grant program hires for teens and low income

Priority Area- Child Abuse and Neglect

Child abuse and neglect is increasing at alarming rates; doubling from 2007-present. Many of the counties across Montana are understaffed, undertrained, and ill prepared to cope with the growing epidemic. Failing to address the issues related to child abuse and neglect can tax other systems such as the schools, mental health, and the courts. The Protect Montana Kids Commissioners found that in 2016, the number of foster kids has increased 100% from 2015 with over 1/3 of those placements due to parental drug use.

Goals

- Train staff how to report cases_(focus on stigma and worry that come along with reporting)
- Secondary/vicarious trauma training opportunities
- Trauma training for school officials and staff_(principle, health counselor, teachers, coaches, etc.)
- Offer coping mechanisms workshops for parents (maybe focus on generational trauma and historical trauma, and how to cope) (think breaking the cycle)
- Public health campaign on abuse (social stigma) and reporting suspicions
- Offer family friendly events with a supportive feel for parents_(dances, drive-ins, community game nights, etc.) (see in alcohol related objectives)
- Offer education in the schools about abuse (physical, mental, sexual, and neglect) at age appropriate levels_(empower children to speak up about their own abuses or others')

Strategies

- ❖ Provide at least one training to Home Visitors, Medical staff at MCH and Clinic, and Public Health Department employees on mandatory reporting for child abuse by May 2017.
- ❖ Offer community forum on vicarious/secondary trauma by May 2017.
- ❖ Women's support group; offender treatment; misdemeanor probation
- ❖ Increase awareness in schools regarding trauma informed care through training for staff in each of the schools in Mineral County. (Take baseline stats/ pre-post type)
- ❖ Plan and implement a public health campaign regarding child abuse and reporting for the lay person. Give steps to reporting, and when/where to report. Should be three types of media- billboard, pamphlet, commercial, handout, etc.)
- ❖ Offer a community forum by May 2017 for awareness regarding generational trauma, historical trauma, and resources Mineral County provides that assist with trauma.
- ❖ Work with each school in Mineral County to have a program in place regarding abuse to be utilized by 2017/2018 school year.

Measurable Objectives

- ❖ Increase the number of Court Appointed Special Advocates (CASAs) from 1 to 11 in Mineral County by May 2018.

Child Abuse and Neglect Resources-

- ❖ Director of CASA (TBD)
- ❖ Mary Furlong- Healthy Relationships, MCSART (MT Child Sexual Assault Team)
- ❖ School Counselors
- ❖ Youth Diversionary Team Court
- ❖ Youth Crisis Diversion Program (in Msla)
- ❖ CPS
- ❖ Dana Toole- MT DOJ

Priority- Obesity

According to the 2016 Robert Wood Johnson Foundation's State of Obesity, one in four adult Montanans are obese. Mineral County is designated as "frontier" based on population and density. Not only are many residents further from general and specialized medical care, they are also further away from affordable and/or fresh foods. Mineral County residents are more at risk for being obese than their urban counterparts based on their proximity to such resources.

Goals

- Support county-wide farmer's markets (public health campaign on cost savings for buying fresh/local and supporting local ag)
- Work with schools on menus and healthy choices
- Work with local food pantries to assist in any way they need.
- Tie into "unemployment" goal of improving built environment (sidewalks, access to gyms, etc.)
- Support existing groups (walking, running, hiking, biking, etc.)
- Public health campaign about exercising and health benefits (could tie into above goals)

Strategies

- ❖ Pool together a county wide recreation resource guide- specific to each "end"- to include trails, hiking groups, running groups, trail riding groups, rafting agencies, etc.
- ❖ Offer 3 free cooking workshops using fresh vegetables grown from Mineral County farmers (one in each end) by September 2018.
- ❖ Bring local CSA opportunities to Mineral County Residents by May 2018.

- ❖ Create a farm to table program for Mineral County Residents by May 2018.

Measurable Objectives

- ❖ Decrease amount of children who report not having any fruit in the past 7 days from 13.7% to 12% by YRBS 2019. (YRBS 2015) (MT 9.7%)
- ❖ Decrease amount of children who report not having any green salad in the past 7 days from 36.5% to 34% by YRBS 2019 reporting. (YRBS 2015) (32.5%)
- ❖ Decrease the amount of children who report not having any other vegetables in the past 7 days (not carrots, green salad, or potatoes) from 24.4% to 22% by YRBS 2019 reporting. (YRBS 2015) (MT 15.3%)
- ❖ Decrease amount of children reported as overweight from 24.6% to 22% by 2019 YRBS reporting. (YRBS 2015) (MT 15%)

Obesity Resources-

- Dave Jensen- school board/farmer
- Florence Evans- bountiful baskets
- Michael and Molly- Southside rd farmers in Alberton (CSA and farm-to-table)
- Food Banks
- SNAP benefits at markets
- FFA program
- Chera Antos
- Mineral Community Hospital- Monte Turner (walking/hiking programs)
- School cooking
- Extension office
- Natural grocers- help teach cooking courses
- Community gardens
- Adult circuit training

Alignment

The Mineral County Community Health Improvement Plan (CHIP) aligns with many of the Montana State Health Improvement Plan (SHIP) Priorities. The first priority of the Mineral County CHIP, substance abuse, falls directly within the scope of the SHIP goal of improving mental health and reducing substance abuse; found in the document "Big Sky. New Horizons. A Healthier Montana" (2013). Substance abuse is also one of the leading indicators in the CDC's Healthy People 2020 topics.

Our residents identified unemployment as a health topic. Though not traditionally a health topic, one can view this through many lenses as a health priority for our residents. When we identify social determinants to health, we can see how unemployment falls easily within this scope. "Social determinants to health are also one of the CDC's Healthy People 2020 leading health indicators. A range of personal, social, economic, and environmental factors contribute to individual and population health. For example, people with a quality education, stable employment, safe homes and neighborhoods, and access to preventive services tend to be healthier throughout their lives.¹ Conversely, poor health outcomes are often made worse by the interaction between individuals and their social and physical environment." (CDC HP 2020, 2016)

Child abuse and neglect was cited as the third most important health issue among our community members. The Montana SHIP recognizes the importance of the health of mothers, children, and infants. The CDC names one of the eleven leading indicators of health in their HP 2020 plan as injury and violence, and recognizes that child abuse and neglect fall under this important category.

Lastly, Mineral County residents identified obesity as the fourth most important health topic to address. The MT SHIP recognizes preventing, identifying, and managing chronic conditions as the first health priority for the state. While not listed as a priority for the CDC's Healthy People 2020, it is also woven within other indicators such as preventative care, social determinants to health, environmental quality, etc.