Nebraska Panhandle Community Health Improvement Plan

Regional Work Plan

Prepared by Megan Koppenhafer, Community Health Planner

CONTENTS

ABBREVIATIONS AND ACRONYMS

Abbreviations or acronyms you may encounter in this document are listed and defined below.

PPHD	Panhandle Public Health District
BBGH	Box Butte General Hospital
KHS	Kimball Health Services
MCCH	Morrill County Community Hospital
RWMC	Regional West Medical Center
GMH	Gordon Memorial Hospital
RWGC	Regional West Garden County
CCH	Chadron Community Hospital
SRMC	Sidney Regional Medical Center
PWWC	Panhandle Worksite Wellness Council
TFN	Tobacco Free Nebraska
HFA	Healthy Families America
FAST	Families and Schools Together
HP 2020	Healthy People 2020

INTRODUCTION

OVERVIEW OF MOBILIZING FOR ACTION THROUGH PLANNING AND PARTNERSHIPS

Mobilizing for Action through Planning and Partnerships (MAPP), a partnership-based framework, has been used for the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) development process in the Panhandle since 2011, and continued to be used for this round of the CHA and CHIP. MAPP emphasizes the partnership with all sectors of the public health system to evaluate the health status of the region it serves, identify priority areas, and develop plans for implementation.

The MAPP model has six key phases:

1. Organize for success/Partnership development
2. Visioning
3. Four MAPP assessments
    a. Community Themes and Strengths Assessment (CTSA)
    b. Local Public Health System Assessment
    c. Forces of Change Assessment
    d. Community Health Status Assessment
4. Identify strategic issues
5. Formulate goals and strategies
6. Take action (plan, implement, and evaluate)

This document contains detailed information on the "implementation" aspect of Phase 6. The full CHA and CHIP documents can be found at www.pphd.org. This is a living document that may change as activities are implemented; the date on which the document was last updated will always be listed on the cover page.

Implementation of the CHIP will take place from January 2018 to December 2020, and will be guided by this work plan document. This document contains specific activities that will be used to address the objectives identified in the CHIP, including:

- Measurable and time-framed targets
- Policy changes needed to accomplish health objectives
- Individuals and organizations that have accepted responsibility for implementing strategies

PRIORITY AREA OVERVIEW

Each section of this document contains information on a specific priority area, including:

- Objectives,
- Implementation plan,
- Strategies, and
- Partners

Objectives include a summary of the objectives from the CHIP. Specific data, goals, and sources can be found in the full CHIP.

Implementation Plan includes steps the region will take to move the needle on the objectives. The implementation plan includes SMART goals, performance measures, and lead partners.

Strategies includes evidence-based strategies that will be utilized to meet the goals in the implementation plan.

Partners includes the list of individuals and/or organizations that have committed to form a work group around each priority area. The individuals and/or organizations in these work groups have committed to:

- To take action on the priority area,
- Meet quarterly,
- Report progress bi-annually, and
- Participate in annual evaluations of the CHIP.

If you are interested in joining a work group, please contact:

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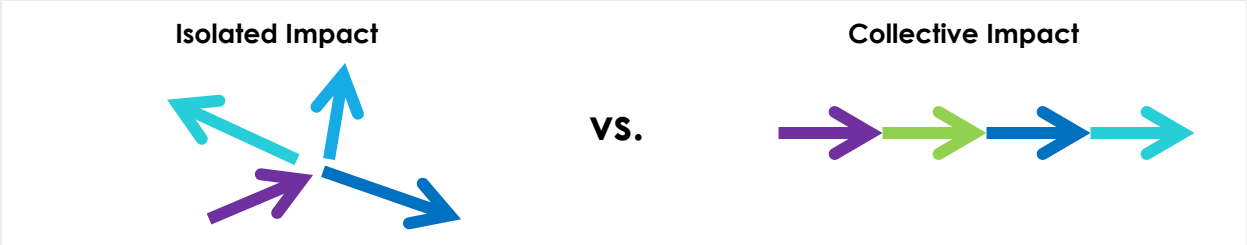
COLLECTIVE IMPACT

Collective impact is "the commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem".[1] For the CHIP, organizations from different sectors and geographic areas of the Panhandle have come together to make a difference in the health of Panhandle residents.

There are five key elements of collective impact that are crucial to implementation of the CHIP:[2]

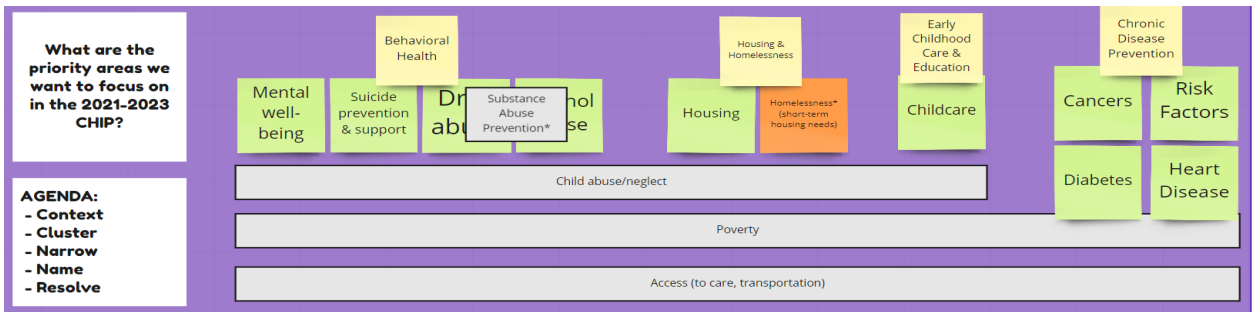
1. Common agenda
2. Measuring results consistently
3. Mutually reinforcing activities
4. Continuous communication
5. Backbone organizations

Collective impact is in contrary to "isolated impact". In isolated impact, "each organization is judged on its own potential to achieve impact, independent of the numerous other organizations that may also influence the issue."[2]



MUTUALLY REINFORCING ACTIVITIES

Many activities in this work plan are mutually reinforcing in that they address root causes of multiple priority areas. For example, tobacco use is a risk factor for chronic disease, thus activities intended to decrease tobacco use are pertinent to the chronic disease priority area; however, tobacco use is also an aspect of behavioral health and substance abuse. Although activities related to tobacco use impact both areas, they are listed in only one area in this document to avoid repetitiveness.



[1] Kania, J., & Kramer, M. (2011). Collective Impact. *Stanford Social Innovation Review*. Retrieved from: https://ssir.org/articles/entry/collective_impact

[2] The Collective Impact Framework. Retrieved from: http://www.collaborationforimpact.com/collective-impact/

EVALUATION

The Panhandle is committed to excellence, and uses evaluation to track actions and results to improve the work that we do. The CHIP Evaluation Plan is a combination of performance monitoring and outcome evaluation. Performance monitoring allows us to monitor our work to see if it has been implemented as planned and accomplished our goals, so we can make changes to improve the process. Outcome evaluation assesses the final outcomes of our work, to tell us if it was effective or ineffective, and sustainable and replicable.[3] The full evaluation plan can be found on our website at www.pphd.org.

[3] W.K. Kellogg Foundation. (2017). The Step-by-Step Guide to Evaluation: How to Become Savvy Evaluation Consumers. Retrieved from https://www.wkkf.org/resource-directory/resource/2010/w-k-kellogg-foundation-evaluation-handbook

PRIORITY AREA 1: BEHAVIORAL HEALTH

OBJECTIVES

- Increase depression screening by primary care providers (HP 2020: MHMD-11)
- Reduce the suicide death rate (HP 2020: MHMD-1)
- Reduce the proportion of adolescents in 8th, 10th, and 12th grade who used alcohol one or more times in their lifetime (HP 2020: SA-2.1)
- Reduce the proportion of adolescents in 8th, 10th, and 12th grade who used marijuana one or more times in their lifetime (HP 2020: SA-2.2)
- Reduce the proportion of persons engaging in binge drinking of alcoholic beverages (HP 2020: SA-1.4)

IMPLEMENTATION PLAN

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Reduce the percent of the population who have frequent mental distress by 1 percent annually	• # of implemented policies including follow ups from positive screenings for mental illness • Percent of the population who have frequent mental distress	December 2023	PPHD REGION 1 Behavioral Health
Increase the number of primary care providers who are trained in mental health first aid and QPR(at least one hospital hosts a training per year)	• # of hospital staff who have taken QPR • # of hospital staff who have taken mental health first aid	December 2023	BBGH KHS MCCH RWGC GMH
Track screening outcomes from school mental health AWARE grant program to determine number of screened individuals who got help at the end of three years	• # of students seeing a provider after being referred • Track why they aren't seeing a provider	December 2023	Chadron Public Schools WCHR PPHD
Research/compare different screening methods to determine highest accuracy by end of three years	• Develop a short report on findings	December 2022	PPHD
Strengthen relationships with law enforcement who encounter people with mental illness or suicidal ideation	• # of people referred to mental health services by law enforcement	December 2023	PPHD Local Law enforcement partners

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Substance Abuse			
Maintain compliance checks and passing percentages	• Annual percentage of businesses passing compliance checks	December 2023	PPHD
Increase number of people educated by safe alcohol events by 5% annually.	• # of RBST training attendees • # of TIPS training attendees	December 2023	PPHD Panhandle Partnership
Increase access to rehabilitation and protective services across the Panhandle	• # of drug-take back events • # of providers trained on safe opioid prescribing guidelines • # of community education events on dangers of opioids • # of providers using Suboxone waiver to prescribe medications • # health care systems providing naloxone • # of law enforcement offices participating in Paari program • # of substance abuse counselors across the region	December 2023	KHS RWMC PPHD CAPWN Region 1 BHA MCCH GMH CCH BBGH
Grow alcohol policy work group	• Develop community education/information campaign about binge drinking • Grow Panhandle Prevention HPP project	December 2023	Panhandle Prevention Coalition Panhandle Partnership
Develop screenings and short interventions with public health nurses when someone is suspected of excessive drinking	• Develop community education/information campaign about binge drinking (2-3 per year) • Train new public health nurse, develop a work plan and list of partners	December 2023	PPHD
Increase school participation in data collection by tying participation to other benefits	• Number of schools participating in youth risk survey	December 2023	PPHD

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Provide a network of education for those involved in underage drinking	• # of communities providing MIP education • # of communities providing education to those purchasing alcohol for minors	December 2023	PPHD Law Enforcement agencies
Increase and maintain school curriculums around underage substance use	• # of schools with programming	December 2023	PPHD
Increase awareness of drug use in schools	• # of school resource officers trained on substance use in minors • # of schools using vape detectors • # of schools using random drug testing	December 2023	PPHD School Partners

RESOURCES

- Health Communication and Social Marketing: Campaigns That Include Mass Media and Health-Related Product Distribution (Source: The Community Guide)
- Targeted School-based CBT programs to reduce depression and anxiety (Source: The Community Guide)
- Interventions to reduce depression among older adults (Source: The Community Guide)
- Collaborative care for the management of depressive disorders (source: The Community Guide)
- Preventive surveillance of substance use (Source: Community Preventive Services Task Force)
- Enhanced enforcement of laws prohibiting sales to minors (Source: The Community Guide)

PARTNERS

- Sidney Regional Medical Center
- Regional West Health Services
- Panhandle Public Health District
- Community Action Partnership of Western Nebraska
- Region 1 Behavioral Health Authority
- Gordon Memorial Health Services
- Box Butte General Hospital
- Chadron Community Hospital
- Kimball Health Services
- Regional West Garden County
- Educational Service Unit 13
- Morrill County Community Hospital
- Western Community Health Resources

PRIORITY 2: HOUSING AND HOMELESSNESS

OBJECTIVES

- Reduce the number of homeless individuals in the Panhandle
- Increase the number of individuals connected to housing
- Reduce Blood Lead Levels in children aged 1 to 5 years (Healthy People 2030, EH04)

IMPLEMENTATION PLAN

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Homelessness			
Create a network map of those experiencing homelessness	• Network map with resources being used and number of people experiencing homelessness	December 2023	Continuum of Care
Actively pursue funding opportunities for emergency housing funding	• # of funding applications submitted	December 2023	Continuum of Care
Host public information campaign to reduce stigma around homelessness	• # of campaigns hosted each year	December 2023	Continuum of Care Panhandle Partnership
Build up Habitat for Humanity program	• # of projects started each year	December 2023	Continuum of Care
Host public awareness campaigns about availability of housing options	• # of campaigns hosted each year	December 2023	Continuum of Care
Build relationships with city government, employers, and Housing Authority	• # of new partners joining each year	December 2023	Continuum of Care Local Governments Housing Authority
Research alternatives for section 8/ways to reduce stigma for landlords	• Fact sheet developed	December 2023	Continuum of Care
Develop 24/7 line assistance project for directing people to housing services	• Outline of project written	December 2023	Continuum of Care
Safe Housing			
Advocate for local governments to crack down on enforcing building codes especially in rentals	• # of council meetings attended • # of advocacy campaigns	December 2023	Continuum of Care

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Promote Owner Occupied Rehabilitation programs in Scotts Bluff and Morrill	• # of homes rehabilitated	December 2023	PADD City of Scottsbluff City of Morrill
Pursue Brownfields clean up grants to create safer communities	• # of grants written • # of projects cleaned up	December 2023	PPHD
Continue to build PPHD lead based paint testing program	• # of sites tested per year	December 2023	PPHD
Increase awareness of weatherization programs	• # of participants each year	December 2023	PPHD Continuum of Care
Increase smoke-free housing policies	• # of new policies each year	December 2023	PPHD
Continuuing Contractor trainings on lead clean up and rehab projects	• # of trainings held each year	December 2023	PPHD

STRATEGIES

- Continuum of Care (Source: Center for Evidence-Based Solutions to Homelessness)
- Rapid Re-Housing (Source: Center for Evidence-Based Solutions to Homelessness)
- EPA Brownfields Project
- Lead Safe Housing Project (Source: HUD)
- Housing First (Source: Center for Evidence-based Solutions to Homelessness)

PARTNERS

- Continuum of Care
- Housing Authority
- Local Governments

PRIORITY 3: EARLY CHILDHOOD CARE & EDUCATION

OBJECTIVES

- Increase quality childcare and preschool availability (based off of Buffett Early Childhood Institute findings)
- Reduce fatal and non-fatal child abuse and neglect (Healthy People 2030, IVP-15 & 16)

IMPLEMENTATION PLAN

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Strengthen relationships between providers and schools	• # of school systems trained in FAST	December 2023	Panhandle Learning Connections Early Childhood Panhandle Partnership
Strengthen evidence based practices for social and emotional development in use in child care facilities and preschools	• # of providers and schools trained in COS • # of programs trained in Read for Resilience and CHIME	December 2023	Systems of Care 0-8 Healthy Families
Increase number of programs that seeking continuing education.	• # of programs enrolled in Step up to Quality • # of participants at Early Childhood Conferences • # of participants in the Provider Support Group • # of providers completing required licensing training	December 2023	Systems of Care 0-8 Extension Panhandle Partnership
Increase number of programs trained in Rooted in Relationships	• # of programs engaged with coaches in 2018 • # of Sixpence programs completing annual trainings • # of early childhood programs completing annual trainings • # of Rooted in Relationships coaches	December 2023	Systems of Care 0-8

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Increase early referrals to Healthy Families	• # of new referral partners each year	December 2023	Healthy Families Systems of Care 0-8
Increase awareness and referrals to WCHR home visitation program	• # of participants in program each year	December 2023	WCHR Systems of Care 0-8
Increase Mental Health presence in schools	• # of schools with mental health provider	December 2023	Local Schools Systems of Care 0-8

STRATEGIES

- Child Care Quality Measures (Source: Step Up to Quality)
- Health Equity: Center-Based Early Childhood Education (Source: Community Preventive Services Task Force)
- Social-Emotional Development of Children (Source: Rooted in Relationships)

PARTNERS

- Buffet Early Childhood Institute
- Systems of Care 0-8
- Panhandle Schools

PRIORITY 4: CHRONIC DISEASE PREVENTION

OBJECTIVES

CANCER

- Increase the proportion of adults who were counseled about cancer screening consistent with current guidelines (HP 2020: C-18)
- Decrease the percent of people who have been told they have any type of cancer

DIABETES

- Reduce the annual number of new cases of diagnosed diabetes in the population (HP 2020: D-1)

CARDIOVASCULAR DISEASE

- Reduce the proportion of adults with hypertension (HP 2020: HD S 5.1)

CHRONIC DISEASE RISK & PROTECTIVE FACTORS

- Reduce the proportion of adults who are obese.
- Reduce the proportion of adults who engage in no leisure-time physical activity
- Reduce cigarette smoking by adults
- Reduce the initiation of e-cigarette use among adults
- Reduce use of cigarettes by adolescents (past month)
- Reduce use of smokeless tobacco products by adolescents (past month)

IMPLEMENTATION PLAN

Strategy/Plan	Performance Measures	Timeline	Lead Partners
	Cancer		
Continue promoting local and regional cancer awareness	• # of community education events for colorectal cancer • # of community education events for breast cancer • # of community education events for cervical cancer • Percent of people up to date on Cancer screenings	December 2023	BBGH GMH CCH RWGC MCCH SRMC RWMC
Increase individuals receiving reminder of preventive cancer screenings by 5% annually.	• # of portal reminders for colorectal cancer screening • # of portal reminders for mammograms • # of portal reminders for cervical cancer screening	December 2023	BBGH GMH RWMC SRMC
Increase or maintain referral rate and processes for FOBT kits	• #of FOBT kits distributed and completed	December 2023	GMH RWMC CCH MCCH

Strategy/Plan	Performance Measures	Timeline	Lead Partners
Increase radon prevention initiatives	• # of radon test kits distributed • % analysis rate • # radon communications	December 2023	PPHD Environmental Health Program
Maintain or increase safe sun practices, annually.	• # of pools providing shade structures • # of pools to which sunscreen and signage are distributed • # of pools with sun safety policy	December 2023	PPHD Pool Cool Program
Rebuild area health fairs	• # of health fairs	December 2023	GMH Panhandle Public Health District RWMC
	Diabetes		
Maintain or increase number of NDPP classes offered annually.	• # of NDPP classes offered annually • # of counties in which NDPP is offered	December 2023	BBGH RWMC KHS CCH NDPP
Increase Worksite Wellness participants	• # Participants	December 2023	CCH NDPP in the Panhandle KHS MCCH RWGC RWMC
Hire and train a new PPHD community health nurse to do screenings and referrals	• # of screenings	December 2023	PPHD
Increase Hospital trainings and referrals to the NDPP program	• # of NDPP meetings held at hospitals • # of referrals	December 2023	NDPP in the Panhandle BBGH
Increase use of Chronic Care Management	• # of participants	December 2023	CCH
	Heart Disease		
Expand availability of screening and education in the community	• # of pharmacies with blood pressure screening available • # of publicly available blood pressure monitors	December 2023	BBGH CCH Community Pharmacists
Maintain or increase capacity of blood pressure loaner program	• # of blood pressure machines available	December 2023	RWMC CCH
Increase community education opportunities	• Yearly dissemination of evidence-based materials in hospitals and pharmacies	December 2023	BBGH CCH Community Pharmacists PPHD

Strategy/Plan	Performance Measures	Timeline	Lead Partners
	• # of trainings on blood pressure management for providers • # of health fairs		
Increase walkable access	• AARP convenient transportation options (walk trips) from the livability index • Measure progress on new trails	December 2023	BBGH GMH RWGC PWWC
	Chronic Disease Risk & Protective Factors		
	Obesity Prevention		
Increase PWWC member worksites that offer health evaluations to employees by 1 annually.	• # of PWWC member worksites that offer HRA	December 2023	BBGH PWWC CCH KHS
Increase communities with walkable community plans by 1 annually.	• # of communities with a walkable community plan	December 2023	BBGH GMH RWGC PWWC
Increase walkable campuses by 1 annually.	• # of businesses with walkable campuses	December 2023	BBGH GMH RWGC PWWC
Increase number of NDPP class participants by 1 percent annually.	• Percent of class participants	December 2023	PPHD
Increase access to healthy foods and snacks in schools	• # of schools applying for Safeway mini grants • # of schools working with Appleseed on school nutrition and health equity	December 2023	PPHD
Strengthen healthier food access and sales in retail venues and community venues through increases availability (i.e., Fruit & vegetables and more low/no sodium options), improved pricing, placement, and promotion.	• Decrease the number of low income, low access tracts in the Panhandle (number can be found on USDA website) • Increase the number of people eating 5 or more fruits and vegetables per day • Maintain operation of Bountiful Baskets/Bundles program	December 2023	PPHD Local communities Main Street Market Fresh Foods
Explore evidenced based strategies for incorporating mindful eating and intuitive eating into healthy eating curricula	• Complete paper on category of strategies and provide recommendations. • Increase "My Plate" curriculum presence in schools	December 2023	PPHD

Strategy/Plan	Performance Measures	Timeline	Lead Partners
	Physical Activity		
Promote regular movement throughout the day - social media campaign	• One campaign per year	December 2023	PPHD
Promote Worksite Wellness challenges	• # of individual participants in each challenge	December 2023	PWWC
Maintain or build relationships between hospitals between hospitals/PPHD/community centers	• # of hospitals who report new relationships with community centers	December 2023	BBGH GMH CCH RWGC MCCH SRMC RWMC
Increase number health systems following best practice screening protocol for blood lead levels by 5% annually.	• # of health systems educated on best practice protocol • # of providers completing lead testing CEU offered locally in Panhandle	December 2023	PPHD
	Tobacco/Smoking		
Monitor smoking changes after passing of the menthol cigarette ban	• # of people who have ever smoked a cigarette	December 2023	PPHD
Continue providing smoking cessation classes and supports	• # of classes	December 2023	PPC
Improve and continue to build program around smoke-free units	• # of policies?	December 2023	PPHD
Host campaign on the effects of second-hand smoke – including lead exposure	• Host one campaign per year	December 2023	PPHD
Host campaign around e-cigarette use	• Host one campaign per year	December 2023	PPC
Incorporate Aspire Curriculum into school system	• # of schools using curriculum	December 2023	PPC
Update signage and policies so that tobacco free parks and fairs include e-cigarettes	• Update all signage over three year time span	December 2023	PPC
Increase number health systems following best practice screening protocol for blood lead levels by 5% annually.	• # of health systems educated on best practice protocol • # of providers completing lead testing CEU offered locally in Panhandle	December 2023	PPHD

STRATEGIES

- Cancer Screening: Multicomponent Interventions (Source: Community Preventive Services Task Force)
    - Colorectal Cancer
    - Breast Cancer
    - Cervical Cancer
- Vaccination Programs: Community-Based Interventions Implemented in Combination (Source: The Community Guide)
- Radon Screening and Mitigation (Source: American Cancer Society)
- Skin Cancer: Multicomponent Community-Wide Interventions (Source: Community Preventive Services Task Force)
- Tobacco Use and Secondhand Smoke Exposure (Source: Community Preventive Services Task Force) (See Section 3B section for detailed activities and objectives)
- Cardiovascular Disease: Team-Based Care to Improve Blood Pressure Control (Source: Community Preventive Services Task Force)
- Cardiovascular Disease: Self-Measured Blood Pressure Monitoring Interventions for Improved Blood Pressure Control - When Used Alone (Source: Community Preventive Services Task Force)
- Diabetes: Combined Diet and Physical Activity Promotion Programs to Prevent Type 2 Diabetes Among People at Increased Risk (Source: Community Preventive Services Task Force)
- Physical Activity: Built Environment Approaches Combining Transportation System Interventions with Land Use and Environmental Design (Source: Community Preventive Services Task Force)
- Physical Activity: Creating or Improving Places for Physical Activity (Source: Community Preventive Services Task Force)
- Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables (Source: CDC/NCCDPHP)
- Tobacco Use and Secondhand Smoke Exposure (Source: Community Preventive Services Task Force) (See Section 3B section for detailed activities and objectives)

PARTNERS

- Sidney Regional Medical Center
- Regional West Health Services
- Disability Rights Nebraska
- Western Community Health Resources
- Community Action Partnership of Western Nebraska
- Bayard Public schools
- Panhandle Health Group
- Scottsbluff Community Health
- Rural Nebraska Healthcare Network
- Gordon Memorial Health Services
- Box Butte General Hospital
- Panhandle Area Development District
- Chadron Community Hospital
- Regional West Garden County
- Kimball Health Services
- Educational Service Unit 13
- Morrill County Community Hospital
- Nebraska Extension
- Garden County Schools