Top Priorities as identified the Licking County Community Health Improvement Committee:

1. Behavioral Health
2. Chronic Disease
3. Access to Care
Introduction

The Licking County Community Health Improvement Committee (CHIC) was formed in April, 2010 and developed Licking County’s first Community Health Improvement Plan (CHIP) in 2011. The committee is comprised of over 20 local agencies working collaboratively to address the most prominent public health issues facing Licking County.

This is the third edition of the county’s CHIP, and as the committee has worked on this process over the past eight years, it has continued to learn and understand the process better, which has led to improved work being produced by the committee. CHIC members are aware that developing the plan is the easiest portion of the work, and the real work lies within actually accomplishing the goals contained in this plan.

CHIC members have adopted the Mobilizing for Partnerships through Planning and Partnerships (MAPP) process to develop all three versions of CHIPs. The process allows committee members to focus on data and make informed decisions based on the most pressing issues in the county. Every entity is strapped for resources and conducting the four assessments contained in the MAPP process provides the opportunity to combine resources and make the biggest impact possible. CHIC members completed the final MAPP assessment in 2018, and data from each of the four assessments was used to develop the priorities and associated goals and objectives contained in this document.

The public health system in Licking County is a robust network of entities striving to care for their customers and improve their quality of life. Having representatives from these organizations as members of the CHIC provides an excellent opportunity to capitalize on the expertise and passion of the individuals analyzing data and providing input related to items to be addressed in the CHIP.
Member Organizations

Licking County Health Department | Joe Ebel, Chad Brown, Greg Chumney, Kari Kennedy
Licking County Board of Health | Neisha Grubaugh
Licking Memorial Hospital | Jeanne Emmons, Brian Thatcher, Rebecca Lay
Pathways of Central Ohio/211 | Kristin McCloud
Heath City Schools | Dr. Trevor Thomas
Canal Market District | Jazz Glastra
Licking County Job and Family Services | Nathan Keirns
Mental Health America of Licking County | Penny Sitler
Mental Health Recovery for Knox and Licking Counties | Kay Spergel
Ohio State University | Shari Gallup
United Way of Licking County | Deb Dingus
Public at Large | Paddy Kutz
Licking County Children and Families First Council | Sylvia Friel
Licking County Infant Mortality Taskforce | Joe Ebel
Licking County Diabetes Forum | Shari Gallup, Diane Kintner

Licking County Wellness Coalition | Carrie McKee
Tobacco Use Reduction Network of Licking County | Chris Saylor
Food Pantry Network of Licking County | Chuck Moore
Hospice of Central Ohio | Melissa Owens
Licking County Healthcare Disaster Planning Coalition | Adam Masters
Licking County Prevention Partnership | Olivia Biggs
Licking County Addiction Taskforce | Kay Spergel
Prescription Drug Overdose Prevention Coalition | Todd Kirkpatrick
Overview of Licking County

Licking County is located in central Ohio and is just east of Columbus, the state capital. The county was established on January 30, 1808, and it is named after the Licking River. There are 39 political subdivisions in Licking County, three cities (Newark, Pataskala, and Heath), 11 villages, and 25 townships. The county’s population as of July 2017 according to the US Census was 173,448 people. The majority of the county is considered rural; however, the western portion of the county is experiencing an increase in development due to the expansion of State Route 161. Newark is the county seat, with a population of just over 49,000 people.

The major provider of healthcare services to the county’s population Licking Memorial Hospital, and it is also the largest employer in the county. Other major employers in Licking County include Owens Corning, State Farm, Park National Bank and Englefield Oil Company. Licking County has several institutions of higher learning including Denison University, the Ohio State University-Newark Campus, Mt. Vernon Nazarene University, Central Ohio Technical College. Additionally, the county has several unique attractions, namely the Newark Earthworks, which the largest complex of earthen enclosures in the world that were constructed by Native Americans. The county is also home to the Longaberger Basket Building, which is a seven-story building that is a replica of one of the company’s famous baskets.

Licking County has been experiencing a growth in population over the past several years, and this trend is expected to continue. With the expansion of the major highway leading to Columbus, additional commercial and residential development is expected to occur not only in the western portion of the county, but also extending into the central and eastern regions of the county as well. While development and growth can be a positive for a community, they can also present challenges regarding health concerns. CHIC members have recognized this potential concern and will remain vigilant to ensure that all of the public health needs of county residents are met.
Social Determinants of Health

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Individuals can experience lower health outcomes based on where they live, their socio-economic status, and having a physical disability. These individuals have difficulty accessing the resources they need to lead healthy lives, and as a result, are less likely to seek or access preventive care necessary to prevent potential catastrophic health events.

CHIC members are dedicated to developing not only physical environments where people can thrive in Licking County, but social environments as well. This will mean tackling this sometimes-complicated issue to help ensure these individuals have the best chance possible to lead healthy lives. Examples of social determinants that CHIC members will attempt to address include: improving access to healthcare when it is needed, reducing and ultimately eliminating transportation barriers, and addressing mental health concerns related to poverty and the resulting stress. These conditions can lead to increased disease rates (both chronic and infectious) that result in poorer health outcomes.

If an individual cannot access preventative care or see a medical professional when they have an illness, there is a greater chance that they will face health consequences and even a shorter lifespan. Additionally, if pregnant mothers cannot access prenatal care, there is a higher likelihood that their children may not be carried to term or face serious health issues as a result.

These issues persist in many if not all communities in the country, and it’s the public health system’s responsibility to work to address them. There is not an overnight solution to addressing social determinants of health, however ignoring this issue is not an option. During the prioritization process CHIC members were cognizant of the possible influences social determinants may have on the items that were considered priorities, and that they would likely need to be addressed in order to achieve positive outcomes. Individuals experiencing lessor health outcomes due to these items are often left behind, however CHIC members were clear during their deliberations regarding this plan that this would not be the case in Licking County.
Policy and System Changes for Alleviation of Health Inequity

Health inequities are systematic differences in the health status of different population groups. Tremendous evidence exists showing that social factors such as educational status, income level, ethnicity and gender all play a role in the health of an individual. This is the case in countries throughout the world regardless if the countries are rich or poor. An individual’s life expectancy can vary by wide margins based on where they live.

Health inequities can cause a significant financial burden as well due to the fact that minor health conditions are ignored and allowed to grow and become significant issues that are costlier to treat. The need to address these issues is high and they must be addressed at the public health system level in order for the change to be successful.

CHIC members discussed these issues during their prioritization process as well. Providing services and increasing the quality of life for individuals experiencing inequities was prevalent during each prioritization session. As indicated later in this plan, one objective the committee agreed on was not only increasing the number of tobacco cessation options for adults, but developing a referral network so that individuals can access these services when they are ready to quit using tobacco products.

However, the most significant issue regarding system level changes the committee agreed on is the need to address mental health in our community. This is the first time mental health has risen to the level of becoming a priority, and members of the CHIC other than mental health providers have realized its importance to public health. This is a dramatic systematic change that will ideally result in this issue being addressed and understood throughout the county.
MAPP Process

CHIC members have been using the MAPP process to develop the county’s CHIP since 2010. The MAPP process was developed by the National Association of County and City Health Officials and is a nationally recognized framework for community health improvement. MAPP is designed to conduct assessments at a public health system level and allow for the evaluation of data from across the system to effectively determine the public health priorities within a community. CHIC members have completed all four MAPP assessments, and data from each assessment was reviewed during the prioritization process.

The Community Health Assessment includes relevant primary and secondary data collected in a scientific manner that provide an accurate depiction of public health concerns in the county. However, the Community Themes and Strengths Assessment contains qualitative data that was captured during focus groups and community discussions that provide insight as to what the public thinks the problems are in the county. If these, two datasets do not match, it’s indicative of a communication issue or potentially an emerging concern that needs to be investigated more closely.

Data from the Local Public Health System Assessment evaluates how the system as a whole performs in regard to a wide variety of metrics. The assessment also provides an avenue to compare the Licking County Public Health System with others from across Ohio and the country and identify gaps in services that need to be offered to best serve county residents.

Finally, the Forces of Change Assessment serves as a vehicle to review and identify possible issues that are going to impact public health within the county. The forces identified could make a positive or negative impact and identifying them allows for the necessary plans to be developed and resources to be identified. CHIC members actively conducted all four assessments, and the group continues to embrace the MAPP process as a viable tool for developing its CHIP.
Prioritization Process

As the CHIC discussed the development of the county’s new CHIP, it became apparent to the members that determining the priorities for the plan was extremely important to the group. The priorities make a clear statement about what the experts and decision makers within the public health system think are the biggest concerns to health in our community. Coming to an agreement on the priorities and agreeing as a group was important so that the committee could speak with one voice about how to best improve public health in the county. This is a powerful message that will provide credibility to the plan, and more importantly, the initiatives that are designed to address the priorities.

The prioritization process began in early 2017 after the county’s CHA was published with updated data. CHIC members met to review the data in comparison to the data contained in the previous assessment. During this evaluation process, discussions about new priorities for the updated CHIP were held. At this time, the group began to look at data trends that both confirmed existing problems and shed light on new ones.

After this discussion took place, CHIC members met to review data from all four MAPP assessments the group had conducted. The data was compared to past MAPP assessments, and the most recent assessments were also compared to identify common themes. A document containing the themes was developed and distributed to CHIC members to review prior to a final prioritization meeting, and a survey was developed and distributed to CHIC members. The survey was designed to allow members to rate priorities based on the evaluation of data from the four MAPP assessments. CHIC members met to review the survey data, and to once again compare it to the data from the MAPP assessments. Once this evaluation was complete, the decision was made to include three priorities in the updated CHIP.
Priorities

The finalized priorities include:

1. Behavioral Health
2. Chronic Disease
3. Access to Care

Access to Care is the only priority to be carried forward from the past CHIPs. It was also the only item mentioned as a priority in each of the four MAPP assessments. Chronic Disease was included as a priority in the second version of the county’s CHIP, and it will contain goals and objectives regarding a variety of issues related to chronic diseases and health behaviors that influence chronic diseases. This is the first time Behavioral Health has been included as a priority in the CHIP. Its inclusion is indicative of an emerging issue coming to the forefront as a result of conducting the four MAPP assessments.

Data from the assessments gave a clear indication that this is a core issue that is the root cause of several considerable public health concerns in the county. Taking on this issue provides an insight as to how the CHIC operates. The committee adopted a nationally renown methodology, implemented it as designed, collected accurate data, and used the data to make informed decisions regarding the priorities, goals and objectives contained in this plan. CHIC members have the best interest of the people of Licking County in mind, and their actions in developing this plan is proof of their commitment.

Goals and Objectives

CHIC members developed goals and objectives designed to address each of the priorities listed above. They are all associated with either the Ohio State Health Improvement Plan (SHIP) or a national initiative. The targets for the objectives were also taken from the SHIP or a national initiative. The CHIC wanted to insure the plan is not only tied to these initiatives, but also relevant in terms of accurately addressing public health concerns. The goals and objectives are contained in the CHIP Action Plan and can be found in Appendix A of this document.
### Behavioral Health

**Justification:** Behavioral Health concerns regarding addiction and untreated depression and anxiety have been voiced by multiple CHIC members, and data was presented to justify its inclusion as a priority. It was identified a priority in the Community Themes and Strengths and Forces of Change Assessments conducted by CHIC members. Behavioral Health is also listed as a priority in the State Health Improvement Plan (SHIP). Behavioral Health is also included in Healthy People 2020, and specific objectives are included regarding depression and anxiety. Additionally, concerns with substance abuse are also contained in the SHIP and Healthy People 2020, which CHIC members determined should be included under the Behavioral Health priority.

**Goal:** Reduce the burden of addiction in Licking County & Reduce untreated depression and anxiety in Licking County.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Activities</th>
<th>Agency Responsible</th>
<th>Key Performance Indicators</th>
<th>Connection</th>
<th>Outcomes</th>
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<tbody>
<tr>
<td>By December 31, 2020, increase the number of individual referred for treatment after being treated for substance abuse in an emergency room and/or urgent care by 10%</td>
<td>Establish baseline number for number of individuals being treated</td>
<td>Mental Health America (MHA), Licking Memorial Hospital (LMH), Mental Health Recovery (MHR)</td>
<td>Number of referrals madeNumber of successful referrals made</td>
<td>SHIP, HP 2020, National Prevention Strategy</td>
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<tr>
<td>By December 31, 2019, develop an accurate data collection system to quantify the number of overdoses in Licking County</td>
<td>Develop network of data collection sources, Establish mechanism for reporting entities, Track reports weekly</td>
<td>Licking County Health Department (LCHD), LMH, MHA, MHR</td>
<td>Number of active reporting sites, Reporting of number of overdoses per month in Licking County</td>
<td>SHIP, HP 2020, National Prevention Strategy</td>
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<tr>
<td>By December 31, 2020, increase the number of depression and anxiety screenings conducted by primary care physicians by 15%</td>
<td>Assess the number of evidence-based screenings being conducted, Provide training for primary care physicians</td>
<td>LCHD, LMH, MHA, MHR</td>
<td>Number of screenings conducted</td>
<td>SHIP, HP 2020</td>
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<tr>
<td>By December 31, 2020, increase the number of depression and anxiety screenings conducted by pediatricians for adolescents by 15%</td>
<td>Assess the number of evidence-based screenings being conducted, Provide training for primary care physicians</td>
<td>LCHD, LMH, MHA, MHR</td>
<td>Number of screenings conducted</td>
<td>SHIP, HP 2020</td>
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</table>
Justification: Concerns related to Chronic Disease have been included in the past 2 CHIPS, and some of these issues continue to be a concern. Issues related to Obesity are identified in the 2017 Community Health Assessment (CHA) and the Forces of Change Assessment conducted by CHIC members. Additionally, Cancer was identified as a concern in the CHA. Tobacco Use and the diseases caused by its use were identified in the CHA, as well as the Community Themes and Strengths and Forces of Change Assessments. Chronic Disease is also a priority in the State Health Improvement Plan and it is contained in Healthy People 2020 and the National Prevention Strategy.

Goal: Decrease negative health conditions associated with obesity.

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<tbody>
<tr>
<td>By December 31, 2020, conduct a minimum of 8 educational classes</td>
<td>Research evidence-based Diabetes education materials, hold classes</td>
<td>Licking County Diabetes Forum</td>
<td>Number of classes held, Number of individuals participating in the classes</td>
<td>SHIP, National Prevention Strategy, HP 2020</td>
<td></td>
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<tr>
<td>By December 31, 2019, develop an inventory and online directory of all parks within Licking County</td>
<td>Research parks and activity locations in each political subdivision, Develop a searchable inventory by political subdivision, Promote online directory</td>
<td>Licking County Wellness Coalition</td>
<td>Online database developed, Number of database users tracked</td>
<td>National Prevention Strategy, HP 2020</td>
<td></td>
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<tr>
<td>By December 31, 2019, increase the number of retail food establishments offering fresh fruits and vegetables by 20%</td>
<td>Educate RFE operators regarding options for offering fresh fruit and vegetables, Assess increased number of facilities offering fresh fruits and vegetables</td>
<td>Licking County Wellness Coalition</td>
<td>Number of RFEs offering fresh fruits and vegetables</td>
<td>National Prevention Strategy, HP 2020</td>
<td></td>
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Justification: Concerns related to Chronic Disease have been included in the past 2 CHIPS, and some of these issues continue to be a concern. Issues related to Obesity are identified in the 2017 Community Health Assessment (CHA) and the Forces of Change Assessment conducted by CHIC members. Additionally, Cancer was identified as a concern in the CHA. Tobacco Use and the diseases caused by its use were identified in the CHA, as well as the Community Themes and Strengths and Forces of Change Assessments. Chronic Disease is also a priority in the State Health Improvement Plan and it is contained in Healthy People 2020 and the National Prevention Strategy.

Goal: Decrease the prevalence of tobacco use in Licking County.

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<tbody>
<tr>
<td>By December 31, 2020, Increase the number of pregnant women enrolled in tobacco counseling by 20%</td>
<td>Conduct outreach to pregnant women through OB/GYN offices. Enroll pregnant women in counseling</td>
<td>Tobacco Use Reduction Network of Licking County (TURN)</td>
<td>Number of women enrolled</td>
<td>National Prevention Strategy, HP 2020</td>
<td></td>
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<tr>
<td>By December 31, 2020, increase the number of adults enrolled in cessation counseling by 25%</td>
<td>Implement outreach campaign using CHIC members and primary physician offices. Enroll patients in counseling</td>
<td>TURN</td>
<td>Number of adults enrolled</td>
<td>National Prevention Strategy, HP 2020</td>
<td></td>
</tr>
<tr>
<td>By December 31, 2020, reduce the perception of E-Cigarettes as a safe alternative to cigarettes in high school students by 20%</td>
<td>Work with youth groups regarding the health effects of e-cigarettes. Conduct outreach regarding the health effects of e-cigarettes</td>
<td>TURN</td>
<td>Percent of students impacted</td>
<td>PRIDE Survey, CHA</td>
<td></td>
</tr>
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**Justification:** Concerns related to Chronic Disease have been included in the past 2 CHIPs, and some of these issues continue to be a concern. Issues related to Obesity are identified in the 2017 Community Health Assessment (CHA) and the Forces of Change Assessment conducted by CHIC members. Additionally, Cancer was identified as a concern in the CHA. Tobacco Use and the diseases caused by its use were identified in the CHA, as well as the Community Themes and Strengths and Forces of Change Assessments. Chronic Disease is also a priority in the State Health Improvement Plan and it is contained in Healthy People 2020 and the National Prevention Strategy.

**Goal: Decrease the burden of cancer in Licking County.**

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<tr>
<td>By December 31, 2020, Engage in a cancer initiative with the LMH Comprehensive Cancer Committee</td>
<td>Appoint a CHIC member as liaison to the CCC, Review data sources from CCC, Develop initiative based on data collected by CCC</td>
<td>LCHD, LMH</td>
<td>CHIC liaison appointed, Initiative developed, Number of people served by initiative</td>
<td>National Prevention Strategy, HP 2020</td>
<td></td>
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<tr>
<td>By December 31, 2019, hold a colorectal cancer screening event serving a minimum of 100 people</td>
<td>Identify testing location, Develop referral mechanism for abnormal test results</td>
<td>LCHD, LMH</td>
<td>Number of people served, Number of referrals made</td>
<td>HP 2020</td>
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**Justification:** Access to care has been a concern since the CHIC was formed in 2010. However, with the expansion of Medicaid in Ohio, the number of individuals without insurance fell dramatically from 2013 to 2017. Unfortunately, the number of individuals that could not use their health care when needed remained stagnant. Access to care was the only priority to be identified as a concern in all four MAPP assessments. It is also linked to the SHIP, National Prevention Strategy and Healthy People 2020.

**Goal:** Increase affordable health care options for Licking County residents.

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<tr>
<td>By December 31, 2019, conduct an assessment of data from health care providers to determine the most prevalent preventable conditions</td>
<td>Review data from ERs, urgent cares, Look Up Center, and other providers, Develop an assessment of preventative conditions</td>
<td>LCHD, LMH, Pathways of Central Ohio (PCO)</td>
<td>Assessment developed</td>
<td>SHIP, National Prevention Strategy, HP 2020</td>
<td></td>
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<tr>
<td>By December 31, 2020, develop an intervention based on assessment results</td>
<td>Develop and deliver initiative</td>
<td>LCHD, LMH, PCO</td>
<td>Number of people served by initiative</td>
<td>SHIP, National Prevention Strategy, HP 2020</td>
<td></td>
</tr>
<tr>
<td>By December 31, 2020, conduct a health impact assessment to determine the need for preventative adult dental care</td>
<td>Collect data from adult dental providers, Develop HIA, Report results of HIA to CHIC and the public</td>
<td>LCHD, LMH, PCO</td>
<td>HIA developed, Results reported</td>
<td>SHIP, National Prevention Strategy, HP 2020</td>
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Appendix B | References


