

2016 Community Health Improvement Plan ANNUAL REPORT SUMMARY



In partnership with



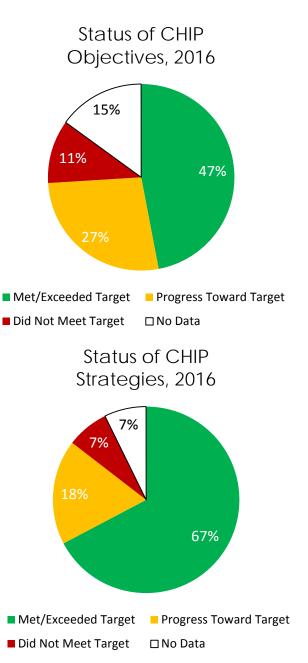
xecutive Summary

A Community Health Improvement Plan (CHIP) utilizes data from a Community Health Needs Assessment (CHNA) to help organizations develop comprehensive information about a community's current health status, needs and issues.¹ A CHIP can help a community justify

how and where to allocate resources to best meet the community need. Benefits include improved organization and community coordination and collaboration, increased knowledge about public health and the interconnectedness of activities, strengthened partnerships within state and local public health systems, identified strengths and weaknesses to address in quality improvement efforts, baselines on performance to use in preparing for accreditation, and benchmarks for public health practice improvement.²

The CHIP report is published annually and evaluates the progress of goals, strategies and objectives over the last year towards the four priorities of ACCESS TO HEALTHCARE AND SOCIAL SERVICES, BEHAVIORAL HEALTH, EDUCATION (K-12), **AND FOOD SECURITY**.² The CHIP is in it's first year of a triennium plan (2016-2018). This report will provide insight for the community to identify gaps in services, collaboration opportunities, potential for policy changes, and ways to remove social disparities and barriers to living healthy. Together, through collective impact strategies, Washoe County can enhance quality of life.

First year implementation of the inaugural Washoe County CHIP was very successful. Out of 55 strategies, 67% have already met or exceeded their targets.



¹ CDC (2015). Community Health Assessments & Health Improvement Plans. Retrieved from: <u>https://www.cdc.gov/stltpublichealth/cha/plan.html</u>.

² Washoe County Health District. (2015). Washoe County community health improvement plan: 2016-2018. Retrieved from: <u>https://www.washoecounty.us/health/files/data-publications-reports/CHIP%20-%20FINAL%2001.28.16.pdf</u>.

Additionally, almost half (47%) of the objectives outlined in the CHIP have been met or exceeded their targets.

Access to Health Care and Social Services

This priority was led by 10 community organizations to make movement on 13 strategies and 10 performance measures. Overarching goals for this priority include the development of a community health hub, increasing access to primary care, increasing coordination of care, increasing access to transportation and increasing the number of adults who receive their adult high school diploma. In the first year of implementation, 70% of the objectives have been met and 85% of the strategies have met or exceeded their targets. Major successes include:

- There was a 7.3% increase in 2015 (68.1% to 75.4%) of Washoe County residents who have a primary care provider as compared to 2014. This has already exceeded the 2018 target of 71.5%.
- There were four completed Family Health Festivals serving a total of 3,607 clients in the 89502 zip code with an average of 33 vendors participating.
- Community Health Alliance opened two new centers: The Center for Complex Care located on Crampton Street and the Sparks Health Center located on Oddie Boulevard.
- Northern Nevada HOPES opened their brand new Wellness Center and has already seen a 36% increase in their patient population (from February 2016 to November 2016).
- There was a 26.0% increase in the number of Washoe County residents who received their adult high school diploma from RISE Academy for Adult Achievement in the 2015-2016 school year, meeting their goal of 150 diplomas awarded.
- There was a 72.8% increase in the number of trips provided by private/not-for-profit organizations and a 23.7% increase in the number of reduced-rate or other discounted transit trips provided to seniors, disabled and low income residents in Washoe County.
- There was a development of a Nevada 2-1-1 strategic plan to improve coordination of care in Washoe County and throughout the rest of the State.
- Renown Health will be sustaining REMSA community services such as the Nurse Health Line, Community Paramedicine, and Ambulance Transport Alternatives.

Behavioral Health

This priority was led by 20 community organizations to make movement on 21 strategies and 32 performance measures. Overarching goals for this priority include improving access to behavioral health services, creating a healthier environment for youth and a reduction in youth substance use and abuse. In the first year of implementation, 63% of the objectives have been met and 71% of the strategies have met or exceed their targets. Major successes include:

- The UNR School of Medicine Department of Psychiatry opened their new Behavioral Health Patient Care Center on Neil Road. This allowed UNR to increase fellowships for students pursing the field of clinical mental health.
- Crossroads, a transitional housing program for those who need support to get sober, have 131 supportive transitional housing beds and 14 crisis intervention beds with plans to expand.
- Amendments to the anti-bullying bill put forth by Nevada's Legislature in 2015 has increased reporting of bullying incidents in Washoe County's schools.
- Washoe County School District has incorporated several behavioral health supports for their students including Multi-Tiered System of Supports (MTSS), the District Intervention Assistance Team (DIAT), and Social Emotional Learning (SEL).
- The Adverse Childhood Experiences (ACEs) screening tool has not only been added to the Youth Risk Behavior Surveillance System (YRBS), but is also being included in Washoe County School District's Child and Adolescent Needs and Strengths Screener (CANS) tool. The goal is to screen all seventh graders in the School District.
- Substance abuse prevention programs were very successful across Washoe County which may have contributed to a decrease in substance use among youth.

Education (K-12)

This priority was led by eight community partners to make movement on 11 strategies and 18 performance measures. Overarching goals for this priority include improving health outcomes to influence educational attainment and supporting student health through nutritious eating habits and physical activity. In the first year of implementation, 17% of the objectives have been met and 64% of the strategies have met or exceeded their targets. Major successes include:

- 77% of Washoe County students graduated in 2016. This is a 2% increase from the previous year.
- 66% of Native American/American Indian students graduated in 2016 which is a 14% increase from the previous year, exceeding the target of 53.3%.
- Washoe County School District adopted a Student Wellness Policy and the majority of schools reported compliance with 15 out the 16 wellness goals. In addition, 60.3% of schools reported hiring wellness coordinators at each school site.
- Communities in Schools (CIS), a supplemental support program for high risk youth, expanded into five schools in Washoe County and has already seen an 82% graduation rate among CIS students.
- New legislation in 2015 ecouraged Washoe County schools to improve literacy by grade three. As a result, all 62 elementary schools and five charter schools in Washoe County have designated learning strategists and have been undergoing intensive career development and trainings to better support their schools and implement the new legislation.

- Programs like Girls on the Run and the Wolf Pack Coaches Challenge made headway incorporating curricula to improve nutrition and physical activity in schools.
- Organizations such as the Education Alliance and United Way have partnered with key businesses and organizations to implement supplemental programs for Washoe County students.

Food Security

This priority was led by five community partners to make movement on 10 strategies and six performance measures. Overarching goals for this priority include implementing programs that address the immediate need for food and promote long-term health and to enhance home-delivered meal programs to seniors. In the first year of implementation, 17% of the objectives have been met and 30% of the strategies have met or exceeded their targets. Major successes include:

 The Northern Nevada Food Bank received grant and match funding equalling \$515,000 to develop a plan around food security for Washoe County. From this stemmed the Collaborating for Communities (C4C) Community Action Networks (CANs). These CANs target social determinants of health that influence food insecurity such as housing, income stability and food security. This group is developing a plan to increase access and knowledge of food sustenance programs in the 89502 zip code as well as develop a food prescription pilot with Renown Health and Community Health Alliance.

The CHIP is a living document that seeks to demonstrate the principles of collective impact, which is large-scale, cross-sector coordination with a common agenda, shared measurement/accountability, mutually reinforcing activities, continuous communication and backbone support.³ Many activities in the community have happened pushing Washoe County towards a more collective impact approach to improving health outcomes outlined in the CHIP. In the first year of implementation, the community has seen the development of the Family Health Festivals, a Medicaid Referral Pilot program to increase access and better coordination to primary care between Renown Health, the Community Health Alliance and Northern Nevada HOPES, and a project to increase coordination of care for Children in Transition (CIT) with community programs such as Communities in Schools, the Family Resource Centers and the CIT program at Washoe County School District. The community has also seen a leveraging of resources and agreement on mutually reinforcing activities such as the C4C CANs.

A shared vision to address local health issues contributing to poor health outcomes in Washoe County has been established. The community has identified a common agenda around the four health priorities: Access to healthcare and social services, behavioral health, education (K-12), and food security. Sixty-six objectives have been established to begin the structure of shared measurement. Evaluating and reporting on the first year of implementation has also established a system of accountability and transparency for the community. Many of the strategies within the CHIP were identified as mutually reinforcing activities to gain traction on the associated performance measures and this plan has greatly increased communication lines between organizations to break out of silos and begin the pathways of true collective impact and collaboration as demonstrated through many CHIP

³ Kania, J. & Kramer, M. (2011). Collective impact. Stanford social innovation review, 36-41.

related working groups. Lastly, the Washoe County Health District, Renown Health and Truckee Meadows Healthy Communities have stepped in to provide all leading agencies a backbone of support through staff time, funding, and strategic planning. The foundation for collective impact in Washoe County for optimized health of its citizens has been set.

The Full Report

The full report can be downloaded at the Washoe County Health District website: <u>https://www.washoecounty.us/health/data-publications-and-reports.php</u>