



CLAY COUNTY

# PUBLIC HEALTH CENTER



## 2015 ANNUAL CHIP REPORT

PUBLISHED APRIL 2015  
CLAY COUNTY PUBLIC HEALTH CENTER



We are pleased to present to you the annual review of the 2013-15 Community Health Improvement Plan (CHIP). This report comes about through the collaborative efforts of many community partners in Clay County and the Clay County Public Health Center (CCPHC). Without their collaboration, this would not be possible.

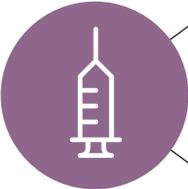
This report is a brief summary of the ongoing work on the CHIP. We continue to build the foundation to create an environment which empowers all people in Clay County to lead healthier lives. With the complexity and diversity of the varied communities in Clay County, we felt the health information needed to be specific to the community level and address the issue(s) the individual community prioritizes. We call each individual community specific approach a mini-CHIP. Each community is leading their health improvement efforts and CCPHC is a partner to assist in those efforts.

In 2013, multiple efforts to develop mini-CHIPs were started. Liberty Parks and Recreation initiated a mini-CHIP called the Liberty Community Health Action Team that focuses on nutrition, physical activity and social inclusion. Another is the Northland Maternal and Child Health Partnership that focuses on improving the health of pregnant women, new mothers and newborns/infants.

We are excited about progress made, but know there is much more work to be done.



The data collected as part of the Community Health Assessment shows that chronic disease is the leading cause of death in the Northland. The seriousness of this issue is recognized by the community at large as indicated by the high percentage of Northland Community Health Survey respondents who listed obesity (36.9%), heart attack and stroke (18.2%) and high blood pressure (10.4%) as serious community health problems in the Northland. Obesity, directly linked to many chronic health issues, ranked as the third most important health problem in the Northland. The following data provides insight into the impact of chronic diseases on Northland citizens and the health behaviors that may be influencing the health of the community.

	Platte	Clay	KC	MO	Healthy People 2020
<b>Heart Disease</b> MICA, 2012	121.1	151.6	165.2	191.5	103.5
	<b>Heart Disease</b> (mortality per 100,000)				
	149.6/100,000	165.5/100,000	187.9/100,000	181.0/100,000	161.4/100,000
<b>Cancer</b> MICA, 2012	<b>Mortality – Age adjusted Rates: All cancers: AAM, Total</b> (mortality per 100,000)				
	151/100,000	167.7/100,000	174.6/100,000	177.5/100,000	
	<b>Mortality – Age adjusted Rates: All cancers: White</b> (mortality per 100,000)				
	90.4@/100,000	104.9@/100,000	212.6/100,000	222.3/100,000	
	<b>Mortality – Age adjusted Rates: All cancers: Black/African American</b> (mortality per 100,000)				
<b>COPD</b> MICA–Chronic, 2012	38.9/100,000	51.1/100,000	48.7/100,000	51.6/100,000	
	<b>Chronic obstructive lung disease</b> (mortality per 100,000)				
	15.4/100,000	15.8/100,000	23.5/100,000	20.2/100,000	66.6/100,000
<b>Diabetes</b> MICA, 2011-2013	<b>Mortality – Age adjusted Rates: All cancers: AAM, Total</b> (mortality per 100,000)				
	14.0/100,000	15.5/100,000	18.3/100,000	18.6/100,000	
	<b>Mortality – Age adjusted Rates: All cancers: White</b> (mortality per 100,000)				
	91.9@/100,000	18.7@/100,000	36.1/100,000	38.0/100,000	
	<b>Mortality – Age adjusted Rates: All cancers: Black/African American</b> (mortality per 100,000)				

\* @ symbol indicates an unstable rate with fewer than 20 events.



**Goal 1:** Collaborate with the Kansas City, Mo. Health Department in the implementation of their CHIP for Kansas City residents in Clay County.

**Objective 1.1:** Evaluate potential opportunities for both agencies to share office space in Kansas City in Clay County. December 2012 - Dec. 31. 2015 and ongoing. **COMPLETED**

**Objective 1.2:** Collaborate in the provision of services to Kansas City residents in Clay County. **COMPLETED**

- Having an office in the Northland for the KCMO Health Department to serve Clay County residents increases food safety for restaurant patrons, as well as increases access for food handler training, once again improving food safety.
- CCPHC, KCMO and other metro health departments collaborated and received a grant to develop strategies to protect the region from Ebola, among other highly contagious diseases. Each health department has been assigned a capability and CCPHC has been assigned to work on a Medical Surge Work Plan to focus on personal protective equipment availability and waste management.
- Both KCMO and CCPHC collaborated on communicable disease outbreaks that crossed jurisdictional boundaries in 2015, protecting residents from becoming ill.

**Goal 2:** Evaluate the local public health system specific to the communities in Clay County.

**Objective 2.1:** Complete an evaluation of the effectiveness, accessibility and quality of personal health services. **COMPLETED**

**Objective 2.2:** Complete and evaluation of the effectiveness, accessibility and quality of population-based health services focusing on chronic disease beginning Jan. 1, 2013 and ongoing to June 30, 2015. **COMPLETED**

- Community Health Profiles for the communities of Gladstone, Liberty and Excelsior Springs have been completed. These documents outline key health issues in each community and provide a way for community residents to become involved in bettering the health of their community.
- An access to care assessment was conducted as part of the Community Health Assessment (CHA). The assessment looked at priorities identified in the Local Public Health System (LPHS) Assessment, Community Health Survey and the Community Health Forums. The assessment then aligned the focus of the data with the key indicators: demographics, social determinants of health, health resource availability/access to care, quality of life, behavioral risk factors, social and mental health and maternal and child health.
- The CCPHC emergency planner worked with the Clay County emergency manager to exercise Strategic National Stockpile (SNS) distribution to 11 closed Point of Dispensing Sites (PODS) in 2015.

**Goal 3:** Mobilize community partnerships to prioritize chronic disease health problems specific to a community.

**Objective 3.1:** Engage stakeholders in community partnerships from July 1, 2013 to Dec. 31, 2015.

**COMPLETED**

**Objective 3.2:** Develop and present specific Community Health Profiles to a minimum of three communities in Clay County beginning Jan. 1, 2013 and ongoing to June 30, 2015.

**COMPLETED**

- The Diversity Advisory Council on Health Equity (DACHE) continued to work to address access to care for diverse communities in Clay County. DACHE partnered with CCPHC and local emergency preparedness partners to conduct a table top exercise with 42 participants from diverse communities and agencies.
- Six community health forum meetings were held as part of the CHA process to gain direct feedback from residents on the health of their community.
- Community Health Profiles have been completed for Gladstone, Liberty, North Kansas City and Excelsior Springs. The profiles for Kearney and Smithville are expected to be completed in 2016.
- The Northland Health Alliance completed the 2015 Northland Community Health Assessment and has identified the issues of Access to Care, Mental Health/Substance Abuse and Chronic Disease as the top health issues affecting Northland residents.
- Community partners are engaged in coalitions, such as Liberty Alliance for Youth, focusing on marijuana, prescription drug abuse and underage drinking. Local public health system partners are focused on smoke-free air ordinances, lessening the barriers to health care access and mental health, among others.



**Goal 4:** Assist communities in developing chronic disease interventions necessary to support improvement in personal and population-based health.

**Objective 4.1:** Create public health/community development model to guide the implementation of each community by Dec. 31, 2013.

**COMPLETED**

**Objective 4.2:** Assist in the development of the Community Healthy Improvement Plan in at least one community in Clay County from 2014-15.

**COMPLETED**

**Objective 4.3:** Assist each community in monitoring the outcomes of the plan and complete an evaluation of effectiveness, accessibility and quality each year, ongoing through December 2015.

**COMPLETED**

**Objective 4.4:** Recommend altering intervention strategies, where appropriate, each year and ongoing through December 2015.

**COMPLETED**

- Community development conducted a Gladstone Parks Audit to assess the walkability of Gladstone's trails.
- In collaboration with CCPHC, a \$15,000 Health Impact Assessment Grant was awarded to assess street design, walkability and safety in Liberty.
- Air quality tests were conducted in Kearney restaurants and bars. The data was used to gain support for a clean air ordinance in Kearney. The ordinance became effective Oct. 1, 2015 because of overwhelming community support for clean air.



**Goal 5:** Assure CCPHC resources are aligned with the local public health system to meet identified needs in each Community Health Improvement Plan. **COMPLETED**

**Objective 5.1:** Complete an evaluation of the effectiveness, accessibility and quality of CCPHC programs and services currently offered by March 31, 2013 and ongoing through December 2015. **COMPLETED**

**Objective 5.2:** Integrate evaluation results from goal two objectives and goal five, objective 5.1 to assist in developing recommendations to the CCPHC Board of Trustees in April each year and ongoing through December 2015. **COMPLETED**

**Objective 5.3:** Monitor the outcomes of implemented Community Health Improvement Plans within one year after completion of each one. **COMPLETED**

**Objective 5.4:** Realign resources and alter intervention strategies where appropriate each year and ongoing through December 2015. **COMPLETED**

- Annual program assessments for CCPHC programs were completed August 2015. The assessments evaluated program alignment with the Core Public Health Functions, 10 Essential Services of Public Health, identified program trends and evaluated program operating costs.
- Work continues on making sure the Health Center focuses on delivering the best programs and services possible, this focus on performance management and quality improvement, lead the Health Center to becoming nationally accredited in 2015 by the Public Health Accreditation Board.
- Environmental Health Protection worked diligently to meet Food and Drug Administration standards and was able to meet Standard 7: Industry and Community Relations. This ensures solid relationships in times of routine operations or during times of a declared public health emergency. These open lines of communication ensure that the public is made aware of a potential environmental health safety issue as soon as possible.
- CCPHC began development of a new strategic plan in August 2015.





Mother & Child

The Northland Mother and Child Health Partnership (NMCHP) is represented by three local public health agencies, four hospitals, multiple service organizations and individuals from Clay and Platte Counties. The CCPHC led partnership began April 2013 and meets on a quarterly basis. In 2015, the members worked to set SMART goals for their three priority areas of breastfeeding, access to care and mental health.

### Priority 1: Breastfeeding

- Recruit 20 employers to have worksite lactation support policies in the Northland by Dec. 31, 2015. **Status: Ongoing**
- Develop a resource list of breastfeeding support in the Northland by Dec. 31, 2015. **Status: Ongoing**

### Priority 2: Access to Care

- Assess the capacity to receive new clients by OB/GYN, pediatric and primary practice providers in the Northland who accept Medicaid and self pay populations by Dec. 31, 2015. **Status: Ongoing**
- Assess number of OB/GYN, pediatric and family medicine providers in the Northland offering evening and weekend hours by Dec. 31, 2015. **Status: Ongoing**
- Assess the turnaround time of Medicaid eligibility by Dec. 31, 2015. **Status: Completed**

### Priority 3: Mental Health

- Assess number of mental health providers in the Northland by Dec. 31, 2015. **Status: Completed**
- Develop a process to connect Northland Health Care Access with Northland mental health providers by Dec. 31, 2015. **Status: Ongoing**



# Diversity

## Advisory Council for Health Equity

The Diversity Advisory Council for Health Equity (DACHE) was created with the purpose of providing a forum to diverse communities in the metro area, and specifically in Clay County, where their voices and needs can be heard in a non-judgmental way on health care issues, more specifically on access to care. To better serve all community members, sharing of experiences, issues and proposed solutions, needs to occur. Through DACHE, the Clay County Public Health Center and the local public health system (LPHS) is actively learning how to engage and support diverse communities in improving access to care issues.

The three main focus areas of (DACHE) are to improve communications during public health emergencies, understand the role of public health in the U.S. and to improve access to health care.

### Mission

The mission of DACHE is to facilitate the access to equitable health care and to provide culturally competent tools and information to members of the local public health system, so that all residents feel safe and have access to health care where they work, play, live and worship.

### Vision

Healthy people in all communities!



### Membership

Members of this council represent many diverse racial, ethnic and cultural groups:

- Native Americans
- African Americans
- Hispanics
- Somali
- Vietnamese
- Visually Impaired
- Foster Children
- Refugees
- LGBTQ+
- Homeless Communities

Other members include representation from local public health agencies, city governments, safety net providers and nonprofit groups; these members are interested in learning and understanding how to better serve diverse communities.



## Strategic Goals 2016

- Continue community education
  - Ideas, new topics and focus
  - Frequency of meetings
  - Opportunities to engage the community
- Community engagement
- Continue to work on emergency preparedness communications plan
- Branding and marketing – get our name out, capture new ideas, keep on radar, re-connect with past members no longer attending, emergency planner will continue to pursue other diverse groups

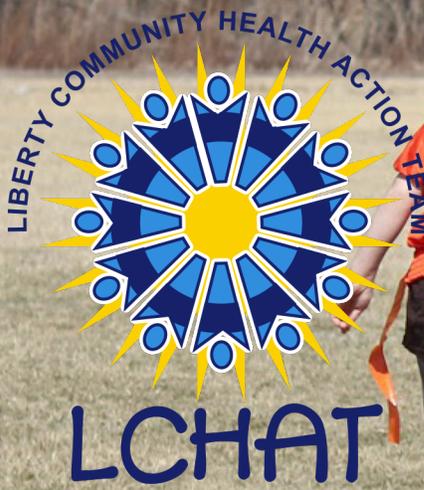
## Important Issues

- Visit with diverse communities and incorporate feedback into communication plan
  - Visit the local mosque
  - Training, classes and education
  - Building trust and establishing relationships
- Have health and safety components and not just health care
  - People need to feel comfortable approaching any helping organization i.e. law enforcement, health care and social service agencies

## 2015 Accomplishments

DACHE partnered with CCPHC and local emergency preparedness partners to conduct a table top exercise with 42 participants from diverse communities and agencies. The focus of the exercise was to develop and test communication strategies and plans to effectively reach diverse communities and access and functional needs (visually impaired, physical disability, etc.) populations during a health emergency. The feedback was incorporated in CCPHC's Risk Communications Plan.





LCHAT Updates

Liberty Community Health Action Team (LCHAT) is a coalition of community partners including a number of local businesses, individual community advocates, the City of Liberty, Clay County Public Health Center, Liberty Hospital, the Liberty Public School District and the parents who support it.

## Vision

Create a community where healthy behaviors are the easy and preferred choice.

## Key Performance Areas

- Promoting Healthy Eating
- Increasing Physical Activity
- Advancing Social Acceptance & Inclusion for all

LCHAT's goals and objectives for each performance area will shape public policies, practices and programs to improve the current health environment in Liberty, MO.

## Accomplishments

- Implemented a healthy food and beverage vending machine policy in Liberty Public Schools, the first to do so in the Kansas City metro.
- Established Liberty Parks and Recreation programs that promote physical activity in school facilities after the school day ends.
- Facilitated new park development through Liberty Parks and Recreation, who purchased three land parcels for assembly in a neighborhood that had previously not had access to a park.

## How Can You Help?

Are you a parent, business owner or community member that cares about making Liberty an empowering place to live, work and play? We invite you to join our cause.



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[www.lchat.org](http://www.lchat.org)

[www.facebook.com/libertycommunityhealthactionteam](https://www.facebook.com/libertycommunityhealthactionteam)

## Nutrition Team

**Goal: Select evidence based nutritional programs to increase healthier eating in those aged 10-14 in Liberty by 2017.**

**Objective 1:** Identify three nutrition priorities to focus on in the next year.

1. Increase fruit and vegetable consumption from 50% of students eating them 4+ times a week to 75%, 4+ times a week in Liberty Middle School students by December 2017.
2. By December 2017, Liberty School District will raise awareness among school buildings of the following selected School Wellness Policies:
  - Using teachers as positive, healthy role models.
  - Not withholding recess as a punishment.
  - Decreasing number of classroom parties & unhealthy treats.
3. Increase daily water consumption from 68% to 75% in students by 2017.

**Objective 2:** Research evidence based programs that deal with each nutrition priority identified.

**Objective 3:** Decide how and what health outcomes will be measured to determine change.

## Increasing Physical Activity Team

**Goal 1: Complete a walkable assessment of the community by June 2016.**

**Objective 1:** Inventory sidewalks and identify sidewalk gaps.

**Objective 2:** Conduct localized audits to assess condition and safety of sidewalks.

**Objective 3:** Use the Health Impact Assessment to identify policies to enhance walkability.

**Objective 4:** Develop survey to identify pedestrian crossings to determine improved safety.

**Objective 5:** Use social media to identify key barriers to walkability.

**Goal 2: Complete a bikeable assessment of the community by June 2017.**

**Objective 1:** Use the Health Impact Assessment to identify policies to enhance bikeability.

**Objective 2:** Assess and improve existing maps of bike routes.

**Objective 3:** Engage local bike groups and bike shops for input on enhancing bikeability.

**Objective 4:** Use the Bike Friendly Community website as a planning resource.

**Goal 3: Assess the availability and quality of natural and built assets for outdoor recreation by September 2016.**

**Objective 1:** Use Healthy Communities Research Group (HCRG) beta site findings to identify shortcomings.

**Objective 2:** Develop a Needs Assessment Survey to get public input.

**Objective 2A:** Determine nonexistent amenities for youth 10-14.

## Social Acceptance & Inclusion for All Team

**Goal 1: Use our personal and professional connections to meet with service providers to get them to partner with LCHAT by January 2017 and ongoing.**

**Goal 2: Develop framework to obtain data through school district regarding program needs, wants and gaps in services available for those aged 10-14. This may include student focus groups to gain input by December 2016.**

**Goal 3: Develop resources that connect community to service providers. This includes a "Service Providers" page on the LCHAT website and producing a "one stop shop" for services for Liberty residents by December 2018.**





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