

Community Health Improvement Clay County Missouri



CCPHC Community Health Partners

CHIP Partners	Northland Mother & Child Health Partnership	Diversity Advisory Council on Health Equity
<p><i>City of Liberty</i> <i>Liberty Parks and Recreation</i> <i>Liberty Public Schools</i> <i>Liberty Hospital</i> <i>Saint Luke's Hospital</i> <i>North Kansas City Hospital</i> <i>City of Gladstone</i> <i>Northland HealthCare Alliance</i> <i>UMKC—Schools of Nursing, Dentistry and Pharmacy</i> <i>Samuel U. Rodgers Health Services</i> <i>Kansas City Health Commission</i> <i>Kansas City Health Department</i> <i>Tri-County Mental Health Services</i></p>	<p><i>KC and Platte Co. Health Depts.</i> <i>Tri-County Mental Health</i> <i>North Kansas City Hospital</i> <i>Liberty Hospital</i> <i>Excelsior Springs Hospital</i> <i>Cities of Liberty & Gladstone</i> <i>Mid-Continent Public Library</i> <i>Northland Community Foundation</i> <i>MCHC of Kansas City</i> <i>Children's Mercy Hospital</i> <i>Samuel U. Rodgers Health Services</i> <i>Cornerstone of Care</i> <i>MOSAIC Life Care</i> <i>MO Dept. of Health & Senior Services</i> <i>Triality Tots</i> <i>Signature Psychiatric Hospital</i> <i>Healthcare USA</i> <i>Excelsior Springs Job Corps</i> <i>Private Practice Therapy</i> <i>Saint Luke's Northland Hospital</i> <i>Center for Human Partnership</i></p>	<p><i>Coalition of Hispanic Women Against Cancer</i> <i>Cornerstone of Care</i> <i>KC Anti-Violence Project</i> <i>St. Luke's Hospital</i> <i>YMCA</i> <i>Lopez Language Services</i> <i>Metropolitan Community College System including Penn Valley Community College and Maple Woods Community College</i> <i>Catholic Charities</i> <i>UMKC School of Nursing</i> <i>Jewish Vocational Services</i> <i>African-American Legacy Center</i> <i>American Indian Council</i> <i>Region VII-Health & Human Services</i> <i>Jackson Co. Health Department</i> <i>Platte Co. Health Department</i> <i>Independence Health Dept.</i> <i>Wyandotte Co. Health Dept.</i> <i>Samuel U. Rodgers Health Services</i></p>



- Pictured above:
- 1) One of many walking trails under development or improvement in the City of Liberty as indicated by Trails and Greenway Master Plan.
 - 2) As part of the development of the Trails and Greenway Master Plan, a walking audit of some of the city's sidewalks and roadways was conducted.

...“We cannot pay future healthcare bills for lifestyle related behaviors (e.g.) inactivity, poor nutrition regimen, social isolation, etc. that are known to cause chronic illnesses and diseases.” ...

David M. Compton, MS, MPH, EdD Project Manager, GP RED/LCHAT, Professor Emeritus, Indiana University & University of Utah



2014 Annual Update



Published May 2015 by the Clay County Public Health Center
816-595-4200
www.clayhealth.com



Foreword

Many books and stories have been shared throughout the years about the “elephant in the room.” It has been related to teaching kids about cancer and alcoholism, human resources identifying problem staff in the workplace and about life in general. The elephant in the room denotes a larger than life issue that is impacting everyone, but no one wants to be the first to take care of the problem.

In the first part of the 20th Century, the majority of people were suffering or dying from communicable and infectious diseases. Thanks to advancements in public health, including vaccines and improved efforts to prevent food and water borne diseases, the death rate of transmissible diseases dramatically declined. During the 1900s, the average life span of American citizens increased from 45 years, to 75+ years. Researchers credited 25 of the 30 years of average life span improvements directly to the efforts of public health. These improvements have shifted what impacts our health from communicable disease, to chronic disease.

For Clay County residents, the number one cause of death is cancer, followed by heart disease, chronic obstructive pulmonary disease (COPD), diabetes and accidents/injuries. Based on this data, the Vision North 2010-2015 Community Health Assessment’s directive was for the Community Wellness Key Performance Area to target these conditions, with efforts that would lower rates of these diseases in Clay County.

With a population of nearly a quarter million people in Clay County, the public health agency and four local hospitals cannot tackle this “elephant” (leading causes of death) alone. Health improvement in Clay County must be addressed at the local level, with community leaders and citizens actively included in framing the solutions to improve community health outcomes. Preventing and/or minimizing the impact of chronic diseases such as cancer, heart disease, COPD and diabetes, as well as accidents/injuries require changes in behaviors and health policies.

Clay County Public Health Center (CCPHC) has adopted the Kansas City Mo. Community Health Commission’s Health Improvement Plan to work with the Kansas City population residing in Clay County. In addition, the cities of Liberty and Gladstone expressed interest into looking at what was occurring in their communities and addressing health issues. In 2013, the Liberty Community Health Action Team was formed to address obesity in 10-to-14 year old children, a major risk factor in three of the five leading causes of death in Clay County. In 2014, CCPHC worked with the City of Gladstone in identifying both health data, and community interest and engagement in health improvement. Three other community profiles are in production and will be released in 2015.

Someone once asked a hunter, “how do you eat an elephant?” His response, “One bite at a time!” We’re tackling this elephant (chronic disease and accidents/injuries), one bite (community) at a time.

“When there’s an elephant in the room, you can’t pretend it isn’t there and just discuss the ants.”
**Ellen Wittlinger,
Blind Faith**



“If you can’t talk about it—you can’t change it!”
**Matt Rawlins
from the book
“There’s An Elephant In The Room”**

Liberty Community Health Action Team

“The synergy developing across the LCHAT coalition will create even greater results in health improvement than if we were to each promote health alone.”

Janet Snook-Bartnik, Dir., Liberty Parks and Recreation

LCHAT has developed a set of goals and selected four for implementation. They are:

LCHAT Implementation Phase One

Implementation Goal: Focus Group Meetings/Community Input and Direction

Plan, schedule and host a minimum of three public focus group meetings with members of the community to discuss the LCHAT goals.

Determine if the goals set are ones that the community will support.

Recommend changes and adjustments to the goals based on public input.

Recommend an approach to implementation that will increase grass roots support and involvement.

Status: In progress, first scheduled April 7, 2015

Implementation Goal: Development of a Communications Plan

Develop the structure/skeleton of a communications plan that details possible media outlets and their target audiences.

Research media techniques, message framing, the potential impact of collective messaging and the like. Prepare short training sessions for LCHAT meetings.

Review the data collected to date to identify key statistics/issues of concern and their 2013-14 benchmarks for messaging to follow.

Begin to develop a logo for the coalition.

Status: Data sets on City of Liberty released October, 2014. Liberty Profile will be out for public comment in 2015.

Implementation Goal: School District Wellness Policy

Create a white paper outlining LCHAT's position as it relates to physical activity and nutrition in Liberty Schools.

Bring that paper back to the LCHAT for a formal vote, ensuring that it meets coalition intent.

Develop a letter congratulating the school district for developing a school wellness policy in alignment with the LCHAT position.

Deliver the congratulations to the school board at a board meeting.

Status: Completed.

Implementation Goal: Creation of a Coalition of Service Providers/“Tween” Advisory Group

Identify no fewer than 10 programs/service providers in the Liberty community.

Convene a meeting of those providers.

Produce a comprehensive resource listing of activities currently available to youth ages 10-to-14.

Work with Liberty Alliance For Youth (LAFY) to identify a “tween” advisory group to advise LCHAT on what opportunities they believe will increase physical activity among peers and communicate those ideas to the service provider coalition for discussion.

Status: Implementation of these activities began in 2014 and will not be evaluated until the latter part of 2015.

Student Wellness—Liberty Public Schools School vending machines get healthy makeover

“The district’s push to promote healthier snack options is part of the city of Liberty’s larger wellness initiative, GP RED/LCHAT. The joint effort of the school district, Liberty Hospital, Liberty Parks and Recreation and the Clay County Public Health Center promotes a healthier community.”

Jason Breit, Liberty Public School’s Director of Purchasing and Distribution



Liberty Community Health Action Team

LCHAT is a coalition of public and private organizations in the Liberty area working to improve the health and wellness of the community as a whole. To help map the course to that goal, the Liberty Community Health Action Team (LCHAT) survey asked community members:

- What are the most important factors for a community to be healthy?
- What are the most significant health problems in Liberty?
- What are the risk behaviors that are the greatest concern in our community?

“The growing body of knowledge in the field of public health makes one fact very clear – where you live matters to your health,” said Janet Bartnik, the City of Liberty’s director of Parks and Recreation. “The Robert Wood Johnson Foundation has collected and compiled the results of thousands of studies across the nation and has found that something as simple as your zip code can determine whether you’re likely to enjoy good health or not.”

The LCHAT is a coalition of public and private stakeholders participating in the Healthy Communities Research Group project led by four public partners: the City of Liberty, Clay County Public Health Center (CCPHC), Liberty Public Schools (LPS) and Liberty Hospital.

“LCHAT’s goal is to improve our zip codes’ health destiny,” Bartnik said. “By examining community policies, programs, practices and the built environment, LCHAT has identified opportunities for changing our health future in three key performance areas: improving nutrition regimen, increasing physical activity and fostering social acceptance and inclusion for all.”

With a mission to create a community in which the healthy choice is the easy and preferred choice, LCHAT has seen several early successes.

- LPS Board of Education approved a School Wellness Policy in 2014. This policy meets the Healthy, Hunger Free Kids Act of 2010, which provides staff with direction for nutrition promotion and education to teach the children of Liberty.
- The Liberty City Council approved a Trails and Greenways Master Plan in 2014. When paired with revisions to the Park Land Dedication requirements for new subdivision development and the Park Sales Tax capital improvements plan, the Trails and Greenways plan will increase the number of pedestrian trails connecting our neighborhoods to parks, schools and shopping, making regular exercise as simple as walking through the natural area in your neighborhood.
- LPS Board of Education adopted and implemented a Healthy Vending Policy. This places LPS as a leader among other districts in the Kansas City metro area in ensuring healthy choices are available and embracing the concept of educators modeling healthy behaviors for students.
- The Clay County Public Health Center released health data sets exclusive to the City of Liberty for comment. A Community Health Profile will be released in the Spring of 2015 that incorporates results from the survey and data and input from the steering committee of LCHAT.
- The Liberty Parks and Recreation Department worked with the University of Missouri Extension office to study patron preferences for healthy concessions through the Extension office’s Eat Smart in Parks program. The Department will be adding several healthy food options found to be most liked to the concessions menu in 2015.
- In 2015, the Liberty Parks and Recreation Department is implementing a new recreation programming strategy that requires programmers to identify desired outcomes from programs, prior to designing program structure and format.

Building a culture of health takes time and requires input from the community members served. LCHAT will use information from surveys, community forums and other sources to guide the coalition’s direction and strategies that focus on areas deemed to be of greatest importance.

Background

The following pages tell the story of progress made in improving the health of Clay County as we move forward with many partners throughout the public health system. Without these partners, the activities and outcomes would not have been possible.

The 27 members of the Community Wellness Key Performance Area (KPA) of the 2010 Vision North process were charged with taking the lead within the county to focus on “Prevention Leading to Wellness” that included engaging the community through a coordinated approach addressing nutrition, physical activity, mental health, oral health, vision and injuries. The overall approach would ultimately lead to reducing the rate of chronic disease in the county. Their report was released in the Vision North 2010-2015 report in August of 2011. Between August 2011 and November 2012, members of the Northland Healthcare Advisory Committee discussed how health could be improved in the Northland. In 2012, a Community Health Improvement Plan was released. Development and implementation of a coordinated approach to community wellness that focused on reducing chronic disease rates in Clay County was identified as a major goal. After a comprehensive review of the county wide health data sets, the following five priorities were selected based upon their current demonstrated ability of having the most impact on the morbidity & mortality of Clay County residents:

- Cancer
- Heart Disease
- Chronic Obstructive Pulmonary Disease (COPD)
- Diabetes
- Accidents/Non-Intentional Injuries

After the initial conditions were selected, another health data set was published and issues surrounding maternal and child health was added to the list of items to address. Three of the four hospitals in Clay County also adopted the five diseases and conditions in their respective Community Needs Assessments. During the 2014 site review from the National Public Health Accreditation Board, we recognized the need to improve our commitment to improve health equity and access to care for those from all cultural and linguistic backgrounds. Thus, this report will address the initial 2012 Community Health Improvement Plan, as well as areas that have been added, i.e. Northland Maternal and Child Health Partnership and the Diversity Advisory Council on Health Equity (DACHE).

Executive Summary

We are pleased to present to you the annual review of the **Clay County Missouri 2013-2015 Community Health Improvement Plan (CHIP)**. This report comes about through the collaborative effort by 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 the 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. A common approach used is the development of a county-wide CHIP to address these issues. For Clay County, this is not the preferred approach. With the complexity and diversity of the varied communities in Clay County, we felt the information needed to be drilled down to the community level and address the issue(s) the individual community prioritizes. We call each individual community specific approach a "Mini-CHIP." The community is driving the effort and CCPHC is a willing partner to assist in the efforts.

In 2013, multiple efforts to develop "Mini-CHIPS" were started. Liberty Parks and Recreation initiated a "Mini-CHIP," called Liberty Community Health Action Team (LCHAT) that focuses on obesity in 10-to-14 year olds. Another "Mini-CHIP" is the Northland Maternal and Child Partnership that focuses on improving the health of pregnant and new mothers and newborns/infants. The Gladstone Community Health profile has been developed and presented to the Gladstone City Council. They are in the beginning stages of developing "Mini-CHIPS" specific to Gladstone. Three other community health profiles are currently under development as we continue these efforts in Clay County.

Although we're excited about the progress made already, there is much more to be done. We anticipate more partnerships to be developed in 2015 that will strive to promote healthy communities!

Data & Trends

The annual County Health Rankings measure population health using vital health data, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income and teen births in nearly every county in America. The annual rankings provide a revealing snapshot of how health is influenced by where we live, learn, work and play. They provide a starting point for change in communities. It is up to the public health system to develop strategies that communities can use to move from education to action. The Clay County Public Health Center and its key partners are helping communities bring people together from all walks of life to look at the many factors that influence health, focus on strategies that we know work, learn from each other, and make changes that will have a lasting impact on health.

Once communities are engaged and help in setting a direction, the Health Center will work to develop evidence based programs, plans and activities within the community that will result in “winnable battles” that improve health and ultimately, the rankings. As you can see from the newly released 2015 County Health Rankings chart below—we are moving in the right direction for a healthier tomorrow. We need to continue initiatives and plans to assure conditions exist for people to be healthy.

2015 Clay County Health Rankings
(Note: Missouri rates are in parenthesis)

Health Outcomes

- Premature death rate—5,942 (7,714) - means years of potential life lost of people dying before age 75
- Poor or fair health—14% (16%)
- Poor physical health days—3.4 (3.7)
- Poor mental health days—4.0 (3.8)
- Low birth-weight babies—6.6% (8.0%)

Health Factors

- Adult smoking—21% (23%)
- Adult obesity—28% (31%)
- Physical inactivity—25% (26%)
- Access to exercise opportunities—92% (77%)
- Excessive drinking—17% (17%)
- Alcohol impaired driving deaths—29% (35%)
- Sexually transmitted infection rate—369 (462)
- Teen birth rate—31 (40)
- Uninsured—13% (16%)
- Preventable hospital stays—67 (65)
- Diabetic monitoring—87% (86%)
- Mammography screening—64% (62%)
- Violent crime rate —755 (452)
- Injury deaths—57 (74)
- Air pollution-particulate matter—8.8 (10.2)
- Driving alone to work—85% (81%)
- Income inequality—3.6 (4.6)



Clay County Health Rankings*
Five-Year Trends

Year	Health Outcomes** Ranking	Health Factors*** Ranking
2011	8	13
2012	10	13
2013	13	7
2014	12	7
2015	9	6

The lower the number, the better the ranking. Clay County ranks in the top quintile in the State of Missouri.

*Rankings are comparisons of 114 Missouri counties and the City of St. Louis.
 **Health outcomes represent how healthy a county is.
 ***Health Factors represent how healthy a county will be in the future.

(Provided by the Robert Wood Johnson Foundation and University of Wisconsin)

Diversity Advisory Committee on Health



Clay County Public Health Center convened the first meeting of DACHE on October 1, 2014 at the Gladstone Community Center. Since that time, the meetings have been held monthly—at different venues throughout the county. Assessments were made with input from the group as to which culture or language they represented and who else needed to be at the table. Each meeting includes a speaker from within the group talking about health care access issues for their particular population. In November, a special presentation was made on messaging about Ebola and what it means for different communities. A mission and vision for the group is in development, as well as planning a half day retreat/case study of accessing and understanding the health care system in 2015.

The three main focus areas of DACHE is to improve communications during public health emergencies, understanding the role of public health in the U.S. and to improve access to health care for all residents. A communication committee has taken the lead in working on a “What is Public Health?” for culturally diverse populations, and for developing “sound bytes” and training tools to share with medical clinics, public health agencies, pharmacies and hospitals on cultural sensitivity in working with people with limited English speaking skills or those with racial, ethnic or other barriers to care.

Populations represented at DACHE Meetings by Individuals and/or Organizations

Hispanic—Somalia—Sudanese—Asian languages—Cuban—Romanian—Russian—Bosnian—Croatian—Iraqis—Middle Eastern—Native American—African American—Nigerians—Vietnamese—Greeks—Guyana—Chilean—former Soviet Union—Pacific Islanders—Youth Refugees from Burma, Kayah, Bhutan and Sudan—LGBT—Homeless - Visually impaired—Foster Children—Interpreters—Language Services—Local public health departments—federally qualified health centers.

(see partners on page 12)

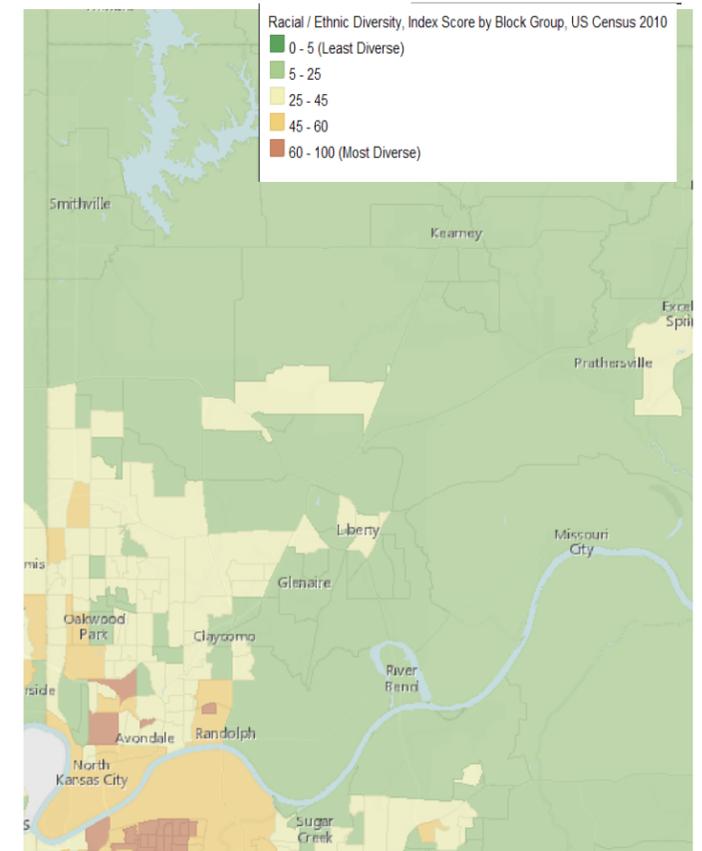
Library hosts its ‘Posada’
Photos/Article by Michael Alvarado, Dos Mundos Newspaper



On Dec. 13, 2014, the Mid-Continent Library Antioch Branch in Kansas City, Mo., hosted the 3rd Annual Posada. Organized by the City of Gladstone; the North Kansas City School District; the Clay County Public Health Center; and the Mexican Consulate of Kansas City, the celebration of the Mexican holiday tradition was a complete success among the community. During the celebration, health information regarding immunizations, WIC, and health clinic services was distributed. This information helps increase the awareness and access to health care services in each community.

“This is the third year that we (have) organized this event and we are planning to keep organizing it,” said Ximena Somoza, Clay County Public Health Center’s Section Chief of Health Policy and Planning. “I want to tell people to take advantage of these traditions. This event helps to open the door to our kids to read and to other type of arts.” During the event people were able to use the library facilities, and those who didn’t have a library card could get one. “With these events, we want to integrate our community,” Somoza said. “We also want to showcase our beautiful Hispanic traditions.”

Map Legend Clay County Diversity



Mother/Child Health Partnership

The Northland Mother/Child Health Partnership (NMCHP) is represented by three local public health agencies, four hospitals and multiple service organizations and individuals from Clay and Platte Counties. The CCPHC led partnership began April, 2013 and continues to meet monthly. During 2014, the members of the partnership worked on setting SMART objectives for their four (4) priority areas of breastfeeding, access to prenatal care, tobacco cessation/prevention and mental health.

- 1. Breastfeeding**—Businesses surveyed for Lactation Support Policies include: CCPHC, Platte County Health Department, Liberty Hospital, Samuel U. Rodgers Health Services, Liberty Community Center, St. Luke’s North and City of Gladstone.
- 2. Access to Prenatal Care**—From 2010 to 2012, both Missouri and Clay County showed a significant increase in “inadequate prenatal care rates.” Discussions facilitated by CCPHC between Samuel U. Rodgers and North Kansas City Hospital to share prenatal care information has improved data exchange for hospital delivery and birth certificate information.
- 3. Tobacco Cessation and Prevention**—The Northland Coalition has spent many hours with both Smithville and Kearney encouraging Clean Indoor Ordinances for businesses. While no final action has been taken or referendums approved, the local newspapers in both communities are keeping the information in the forefront.



4. Mental Health—Partner agency Tri-County Mental Health Services is the lead on this. Plans are to develop a strategic plan by June 2015 based on results of data and county-wide survey.



The City of Gladstone, Liberty Community Center, Platte Co. Health Department and the Center for Human Services (all members of the Northland MCH Partnership) received Silver or Bronze Level Award designation from the Greater KC MCH Coalition & MO Dept. of Health and Senior Services during the Business Case for Breastfeeding Annual Meeting. Clay County Public Health center received a Gold Level Certificate.

Missouri Kids Count—2014

Clay County ranked fourth out of 114 counties and the City of St. Louis in 2014 based on data provided through *Missouri Kids Count*. In 2013, the Clay County ranking was fifth in the State of Missouri.

Of significance to the Northland Maternal/Child Health Partnership are the following statistics:

- ↑ • There are 3,000 more children on free/reduced lunches (13,776) since 2009.
- ↔ • Number of low-birth weight infants has declined slightly since 2008.
- ↑ • Significant decrease in the number of teen births (23.4 per 1,000 rate—down from 31.6).
- ↑ • Number of high school dropouts decreased by half (from 326 to 152).
- ↓ • The percentage of children under 18 living in poverty doubled since the year 2000 (6.4% to 12.1%).
- ↑ • Children receiving public mental health services—increased from 439 to 711 from 2009-2013.
- ↓ • Accredited Child care facilities has decreased by 50% - from 20 to 10.

Progress on Goals & Objectives

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

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

Objective 1.2: Collaborate in the provision of services to Clay County residents in Kansas City, Missouri in Clay County. December 2012 - December 31, 2015 and ongoing.

- KC Health Commissioner engaged by Clay County to lead the National Public Health Performance Standard’s Local Assessment Report in early 2015.
- KCMO Health Department opens offices in Kansas City North, at Northland Neighborhoods Inc. offices. Environmental Health programs and classes now offered at that site. Missouri Birth and Death Records are also available at this site.
- Staff of CCPHC and the Kansas City Health Department are both participating in the Weighing In (Obesity Initiative) coordinated by Children’s Mercy Hospital Systems.
- Staff of KCMO Health Department actively engaged in community meetings with CCPHC in the Northland, including the Northland Mother & Child Health Partnership and The Northland Health Care Alliance.
- Staff are participating in the KC Data Collection Collaborative (KCDC) to standardize data collection and reporting for the Kansas City Metropolitan Service Area. The first report in 2014 focused on the 10 leading causes of death in the Kansas City Metropolitan Service Area.



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 beginning January 1, 2013 & ongoing to June 30, 2015.

Objective 2.2: Complete an evaluation of the effectiveness, accessibility and quality of population-based health services focusing on Chronic Disease beginning January 1, 2013 & ongoing to June 30, 2015.

- Draft Community Health Profiles were completed for Smithville, Kearney, Liberty and Excelsior Springs. Drafts will be released in 2015.
- Community development specialists at CCPHC hosted meetings with community leaders and consumers using the National Public Health Performance Standards as a guide.
- Updates of Clay County data in 2014 vs. 2011 for chronic diseases showed:
 - Cancer is still the leading cause of death for men and women, but is showing a slight decline.
 - Heart Disease is the second leading cause of death. The heart disease rate in men is nearly twice that of women. Inpatient hospitalization for heart disease is decreasing, but emergency department visits remain the same.
 - Chronic Lower Respiratory Disease (CLRD/COPD) rates are higher in Clay County as compared to the state. COPD is the leading specific cause of inpatient hospitalization and leading specific cause of ER visits, as a result of respiratory disease (higher than asthma visits).

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

Objective 3.1: Engage the stakeholders in community partnerships from July 1, 2013 to December 31, 2015.
Objective 3.2: Develop and present specific Community Health Profiles to a minimum of three communities in Clay County beginning January 1, 2013 and ongoing to June 30, 2015.

- Second year of LCHAT—see pp. 10-11
- Individual Community Health Profiles are being prepared for presentation in communities as data sets become available. Each profile utilizes data sets prepared by Epidemiology staff that contain health information at the zip code level. Profiles then use data organized around the social determinants of health and community health surveys.
 - Gladstone Profile presented to their city government
 - Liberty Profile in draft form late December—Release awaiting results of community survey and input from the Liberty Community Health Forum
 - Excelsior Springs, Smithville, Kearney data sets are in development
- Three hospitals incorporated CCPHC’s top chronic diseases and accidents/injuries in their Community Needs Assessment and are sharing primary data through the Northland Healthcare Alliance.
- Northland Healthcare Alliance formed to begin collecting primary and secondary data for analysis. This group will develop a 2015 Community Health Needs Assessment for Clay County.



Goal 4: Assist communities in developing Chronic Disease interventions necessary to support improvement in personal and population-based health.

Objective 4.1: Create a Public Health/Community Development Model to guide the implementation of each community by December 31, 2013.
Objective 4.2: Assist in the development of the Community Health Improvement Plan in at least one community in Clay County from 2014 to 2015.
Objective 4.3: Assist each community in monitoring the outcomes of the plan and complete an evaluation of the effectiveness, accessibility and quality of the plan each year, ongoing through December 2015.
Objective 4.4: Recommend altering intervention strategies, where appropriate, each year and ongoing through December 2015.

- Utilized Quality Improvement process in developing a Community Development Model following the MAPP process to standardize how the community health improvement plans are formed and implemented.
- Existing staff transitioned from other programs and trained in Community Development. Four staff received extensive training in community development from University of Missouri—Columbia.
- All community development specialists have been assigned to work with communities on health improvement initiatives.
- Surveys and community health forums began in late 2014.
- Liberty Community Health Action Team began in 2013 and is working on system changes throughout the City of Liberty (See LCHAT report on pp. 10-11).
- In October 2014, the Diversity Advisory Council on Health Equity was convened in Clay County to discuss barriers to health care access and public health emergency response (See DACHE report—p. 9) among diverse communities and cultures.

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

Objective 5.1: Complete an evaluation of the effectiveness, accessibility, and quality of CCPHC programs and services currently offered by March 31 of year and ongoing through December 2015.
Objective 5.2: Integrate the evaluation results from goal two objectives and goal five, objective 5.1 to assist in developing recommendations to the Clay County Public Health Center Board of Trustees in April of each year and ongoing through December 2015.
Objective 5.3: Monitor the outcomes of implemented Community Health Improvement Plans within one year after completion of each one.
Objective 5.4: Realign resources and alter intervention strategies where appropriate each year and ongoing through December 2015.



- CCPHC conducted a Customer Service Quality Improvement Project which engaged staff from programs across the health center to develop a comprehensive customer service plan, update our customer service survey and outline strategies to provide exceptional customer service.
- CCPHC’s Environmental Health Section engaged stakeholders to update our ordinance regarding the rules and regulations relating to swimming pools, spas and similar facilities in Clay County
 - The ordinance is now stronger and establishes requirements that better protect the health of Clay County citizens and visitors who enjoy public pools, spas and spray grounds.
- The Environmental Health Section now offers an Aquatics Operator training which teaches pool, spa and spray ground operators how to reduce the incidence of recreational water illnesses and injuries that occur to residents and visitors of Clay County.
- Our director of public health and our community development team have been key partners in the Community Health Assessment conducted by the Northland Healthcare Alliance.
 - The access to care portion of the assessment will outline the availability of personal health and population based health services in Clay County.
 - Data from the Community Health and Access to Care Assessments will be used to adjust intervention strategies and develop new goals when CCPHC leadership and the Board of Trustees develop a new Strategic Plan beginning in mid 2015.

First Community Health In Action Awards

The Community Health In Action (CHIA) Awards Luncheon was held October 14, 2014 to recognize people and organizations from the community who were working to improve health in Clay County. CCPHC facilitated the process, along with Liberty Hospital, North Kansas City Hospital, St. Luke’s Hospital and Excelsior Springs Medical Center.



Nominations resulted in 19 groups being recognized in one or more of the six categories below:

1. Health Policy - Tobacco
2. Health Policy - Obesity, Nutrition & Activity
3. Health Policy - Mental Health, Accidents/Injuries
4. New Community Health Initiatives targeting chronic diseases, accidents and injuries
5. Established Community Health Initiatives targeting chronic diseases, accidents and injuries
6. Individual Community Health Champion