

Cascade County, Montana

Community Health Improvement Plan

*Healthy People, Healthy Community
Working Together for a Healthy
Great Falls & Cascade County*

2011-2014

Background and Process

In the spring of 2011, the Cascade City-County Health Department released a Community Health Assessment (CHA) for Cascade County. This Assessment evaluated the status of residents' health in eight areas: causes of death, chronic disease and disability, health and risk behaviors, communicable diseases, maternal and child health, environmental health, mental health and access to care.

The Community Health Assessment was released and distributed to 250 representatives from community agencies in local and state government, public health and health care, mental health, animal health, mental health, human services, education, law enforcement, elder care, child care and other community leaders.

Following the release and distribution of the 2011 Cascade County Community Health Assessment, representatives from 25 local agencies convened to evaluate the data presented in the Community Health Assessment, identify three priority health issues to improve and set goals, objectives and strategies for each health issue.

At the end of this community meeting, a Community Health Improvement Plan (CHIP) Steering Committee was formed and tasked to: review the results from the community meeting, approve this Community Health Improvement Plan, identify any necessary policy changes, report and track the progress of the CHIP, make decisions about future CHAs and CHIPs and link efforts across the community to aid in carrying out the goals and objectives of the CHIP.

This CHIP will focus on the three priority health issues identified at the community meeting and are listed in the table to the right.

Cascade County 2011 Priority Health Issues

Access to Care

Medical Care, Dental Care, and
Mental Health Care

Goal: To increase ease of access to health care for residents of Cascade County.

Substance Abuse

Alcohol Use, Tobacco Use, and
Legal and Illegal Drugs

Goal: To reduce the percent of Cascade County youths that use and abuse substances, including alcohol, tobacco and legal and illegal drugs.

Goal: To reduce the percentage of Cascade County adults that use and abuse substances, including alcohol, tobacco and legal and illegal drugs.

Obesity

Goal: To reduce the number of Cascade County residents who are overweight or obese.

Demographic Overview of Cascade County

Cascade County straddles the Missouri River in North Central Montana, about 60 miles from the eastern slope of the Rocky Mountains. The County seat is Great Falls, which holds about 80% of the population. Cascade County is 2,698 square miles of land and 14 square miles of water.

Cascade County is the fifth most populous county in Montana with a population of about 82,000 people. The County has a higher percentage of people age 65 and older, a higher percentage of males under age 18 and relatively fewer 18-24 year olds than the state as a whole. Approximately 92.7% of the population is White, 5.9% is American Indian/Alaska Native, 2.3% is Black/African American, 1.4% is Asian and 0.1% is Native Hawaiian/Islander.

The median household income in 2008 was \$42,528. The US Census Bureau estimates that 10.2% of families and 13.6% of individuals in Cascade County are living below poverty level.

2011 Community Health Assessment Highlights

Although the Community Health Assessment provides data for many different health areas, some specific data highlights are below.

- Cascade County's leading causes of death are cancers, heart disease and chronic lower respiratory disease.
- Nearly 2/3 of deaths due to injury are unintentional. About 1/3 of unintentional injury deaths are from motor vehicle crashes.
- About 40% of Cascade County residents are overweight. About 24% are obese.
- Almost 80% of residents do not consume adequate servings of fruits and vegetables.
- In 2010, about 25% of 10th and 12th graders surveyed reported coming to school drunk or high at least once in the past year.
- Estimates are that 15% of Cascade County residents under age 65 do not have health insurance.
- About 77% of Cascade County children age 24-25 months had received all the age appropriate ACIP recommended vaccines.
- Cascade County's Chlamydia and Gonorrhea incidence rates per 100,000 people have been consistently higher than the state as a whole since 2005.
- About 69% of pregnant women are receiving adequate prenatal care.



What is a Community Health Improvement Plan?

A Community Health Improvement Plan is a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process.

This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources.

A CHIP is critical for developing policies and defining actions to target efforts that promote health. It should define the vision for the health of the community inclusively and should be done in a timely way.

*- Public Health
Accreditation Board*

Community Health Improvement Plan: Priority Issues

What are the significant health issues in our community? That was the question facing our partners at a community meeting on April 20, 2011. Throughout the process, discussions focused on data, trends, observations and experience. The result is this Community Health Improvement Plan outlining 3 priority health issues that were determined to be those that are most actionable, have data to support the need and the most necessary to improve.



Access to Care: Medical, Dental and Mental Health

Areas of Cascade County qualify as medically underserved and have a shortage of health care providers. Additionally, the CHA reports that approximately 15% of Cascade County residents under the age of 65 do not have health insurance. Cost, distance and transportation, health literacy and access to information were all listed as barriers to care.

Substance Abuse: Alcohol, Tobacco and Legal/Illegal Drugs

Substance abuse is an issue effecting individuals across the lifespan. Prescription drug abuse, in particular, has become the leading drug abuse issue in Montana. Alcohol use and binge drinking in Montana adolescents and young adults is among the highest in the nation. Additionally, the reported use of marijuana in Cascade County middle and high school students has increased from 14.4% in 2008 to 17.9% in 2010.

Obesity: Children and Adults

Obesity is linked to several serious negative effects on health. Almost two out of three adults in Cascade County are overweight or obese. Good nutrition and physical exercise are both vital components in the fight against obesity. Cascade County residents are somewhat less likely than other Montanans to eat the recommended servings of fruits and vegetables every day. They also participate in less leisure time physical activity.

Interfacing with National Standards

Healthy People 2020

Healthy People is a set of goals and objectives designed to improve the health of people across the United States by guiding health promotion and disease prevention programs. *Healthy People* is released each decade; the goals and objectives that it includes are 10-year targets that use science-based benchmarks to track and monitor progress. *Healthy People's* vision is "a society in which all people live long, healthy lives."

Cascade County's CHIP shares and overlaps with many goals and objectives from *Healthy People 2020*. They are listed below.

- *Access to Health Services*: AHS-4.1, AHS-4.3, AHS-4.4
- *Substance Abuse*: SA-2.1, SA-2.3, SA-3.4, SA-3.5, SA-3.6, SA-12, SA-13.2, SA-14, SA-14.1, SA-14.2, SA-14.3, SA-14.4, SA-15, SA-19
- *Obesity*: NWS-8, NWS-9, NWS-10, NWS-10.1, NWS-10.2, NWS-10.3, NWS-10.4, NWS-14, NWS-15, PA-1

Public Health Accreditation Board Standards and Measures

PHAB is the accrediting body for national public health accreditation. The organization was created to manage and promote the national accreditation program. The goal of the national public health accreditation program is to improve and protect the health of the public by advancing the quality and performance of all health departments in the country – state, local, territorial and tribal. Public Health Accreditation is based on standards that health departments can put into practice to ensure they are providing the best services possible to keep their communities safe and healthy. Accreditation will drive public health departments to continuously improve their services and performance.

Cascade County's CHIP helps to meet the following Public Health Accreditation Board's Standards:

Standards 1.3B, 3.1B, 4.1B, 4.2B, 5.3L, 7.1B, and 7.2B

Priorities, Goals, Objectives & Strategies

Priorities: This is a health issue of major importance that our community has chosen to focus on improving.

Goals: Goals for each priority are desired ends to be accomplished. A goal is likely to be long term and should be stated in specific and verifiable terms.

Objectives: Objectives outline how much of what you hope to accomplish and by when. They should be specific, measurable, achievable, relevant and time-bound.

Strategies: A strategy is a specific course of action that the community has chosen to implement in order to accomplish a given objective. Oftentimes, several strategies have been identified in order to successfully accomplish a given objective.

Issue One: Access to Care, Including Medical, Dental and Mental Health

GOAL: Increase ease of access to health care for Cascade County residents.

OBJ 1: Determine the ratio of medical, dental and mental health providers to population in Cascade County, location of providers and barriers to care.

STRAT 1.1: Conduct a needs assessment that will provide data on these factors.

OBJ 2: Increase the number of medical providers available to serve Cascade County residents.

STRAT 2.1: Develop and implement hiring and sign-on incentives to attract providers to Cascade County.

STRAT 2.2: Develop and implement retention programs that will provide high quality providers with incentives to continue practicing in Cascade County.

OBJ 3: Increase the number of dental providers available to serve Cascade County residents.

STRAT 3.1: Develop and implement hiring and sign-on incentives to attract providers to Cascade County.

STRAT 3.2: Develop and implement retention programs that will provide high quality providers with incentives to continue practicing in Cascade County.

OBJ 4: Increase the number of mental health providers available to serve Cascade County residents.

STRAT 4.1: Develop and implement hiring and sign-on incentives to attract providers to Cascade County.

STRAT 4.2: Develop and implement retention programs that will provide high quality providers with incentives to continue practicing in Cascade County.

OBJ 5: Improve access to technology for patients in Cascade County.

STRAT 5.1: Improve providers' knowledge of and access to telehealth and other technology resources for patient use.

OBJ 6: Identify factors impacting Cascade County residents' insurance and health care coverage status.

STRAT 6.1: Conduct surveys to determine factors associated with and status of Cascade County residents eligible for federal/state assistance.

Issue Two: Substance Abuse, Including Alcohol, Tobacco and Legal/Illegal Drugs

GOAL 1: Reduce the percentage of Cascade County youths (ages 12-20) that use and abuse substances, including alcohol, tobacco and legal and illegal drugs.

OBJ 1: Reduce tobacco use in youth.

STRAT 1.1: Establish local ordinances to make tobacco less accessible and limit the effectiveness of tobacco marketing.

STRAT 1.2: Develop counter-marketing campaigns to educate youth.

STRAT 1.3: Set up focus groups with youth to determine the most effective messages and how to reach at-risk youth.

STRAT 1.4: Educate parents, and encourage them to be positive influences for their children.

OBJ 2: Reduce illegal and prescription drug abuse in youth.

STRAT 2.1: Encourage the use of prescription drug disposal drop boxes and events.

STRAT 2.2: Institute an awareness program for health care providers and perform X number of training sessions with physicians and pharmacists about how to talk to their patients about keeping their drugs secure.

STRAT 2.3: Set up focus groups with youth to determine the most effective messages and how to reach the at-risk youth.

STRAT 2.4: Educate parents, and encourage them to be positive influences for their children.

OBJ 3: Increase the percentage of adolescents who refrained from using alcohol for the first time.

STRAT 3.1: Develop and implement a social media campaign using Facebook to target youth.

STRAT 3.2: Limit alcohol accessibility by continuing with retail checks and Responsible Alcohol Sales and Service Training.

STRAT 3.3: Increase penalties for Minor in Possession citations.

STRAT 3.4: Set up focus groups with youth to determine the most effective messages and how to reach at-risk youth.

STRAT 3.5: Educate parents, and encourage them to be positive influences for their children.

OBJ 4: Increase the percentage of adolescents who refrained from binge drinking in grade 8 from 92% to 97%, grade 10 from 76% to 81% and grade 12 from 67% to 72%.

STRAT 4.1: Develop and implement a social media campaign using Facebook to target youth.

STRAT 4.2: Limit alcohol accessibility by continuing with retail checks and Responsible Alcohol Sales and Service Training.

STRAT 4.3: Increase penalties for Minor in Possession citations.

STRAT 4.4: Set up focus groups with youth to determine the most effective messages and how to reach at-risk youth.

STRAT 4.5: Educate parents, and encourage them to be positive influences for their children.

OBJ 5: Reduce the percentage of high school students in Cascade County who report using marijuana in the past 30 days from 23% to 18% in grade 10 and 22% to 17% in grade 12.

STRAT 5.1: Set up focus groups with youth to determine the most effective messages and how to reach at-risk youth.

STRAT 5.2: Educate parents, and encourage them to be positive influences for their children.

GOAL 2: Reduce the percentage of Cascade County adults (ages 21+) that use and abuse substances, including alcohol, tobacco and legal and illegal drugs.

OBJ 1: Reduce binge drinking among all adults from 13.3% to 8.3%.

STRAT 1.1: Develop and implement a social media campaign using Facebook to target adults.

OBJ 2: Reduce heavy drinking among all adults from 4.9% to 2%.

STRAT 2.1: Develop and implement a social media campaign using Facebook to target adults.

OBJ 3: Reduce the percentage of drug-induced deaths, including unintentional poisoning, from 13.4% to 8.4%.

STRAT 3.1: Encourage the use of prescription drug disposal drop boxes and events.

STRAT 3.2: Institute an awareness program for health care providers and perform X number of training sessions with physicians and pharmacists about how to talk to their patients about keeping their drugs secure.

OBJ 4: Achieve a rate of non-medical prescription drug abuse that is significantly below the State rate.

STRAT 4.1: Encourage the use of prescription drug disposal drop boxes and events.

STRAT 4.2: Institute an awareness program for health care providers and perform X number of training sessions with physicians and pharmacists about how to talk to their patients about keeping their drugs secure.

OBJ 5: Reduce the percentage of women who smoked during pregnancy from 20% to 18%.

STRAT 5.1: Establish local ordinances to make tobacco less accessible and limit the effectiveness of tobacco marketing.

STRAT 5.2: Develop counter-marketing campaigns to educate women.

Issue Three: Obesity

GOAL: Reduce the number of Cascade County residents that are overweight or obese.

OBJ 1: Increase from 21.1% to 40% the number of adults in Cascade County that eat the daily recommended five servings of fruit and vegetables.

STRAT 1.1: Increase access for all Cascade County residents to Community Gardens.

STRAT 1.2: Promote and increase education programs for those at nutritional risk.

OBJ 2: Decrease the percentage of Cascade County residents who did not participate in physical activity within the last 30 days from 17.4% to 10%.

STRAT 2.1: Create a built environment throughout Cascade County and the City of Great Falls that promotes walking, biking and other physical activity.

STRAT 2.2: Draw up Joint Use Agreements between City, County and private fitness facilities to provide easier access for all Cascade County residents.

STRAT 2.3: Develop and implement equipment donation programs to make athletic equipment more readily available to all Cascade County residents.

STRAT 2.4: Develop and implement community activities in neighborhood parks and recreational areas.

OBJ 3: Increase the percentage of residents with a BMI at or below 24.9 (normal) from 35.9% to 50%.

STRAT 3.1: Create a built environment throughout Cascade County and the City of Great Falls that promotes walking, biking and other physical activity.

STRAT 3.2: Draw up Joint Use Agreements between City, County and private fitness facilities to provide easier access for all Cascade County residents.

STRAT 3.3: Increase awareness of insurance benefits, incentive programs and activities that promote and reward healthy lifestyles.

To Download the Spreadsheet Version of the CHIP Issues, Goals, Objectives & Strategies, Click on the Icon(s) Below.



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Acknowledgements

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Cascade County Community Health Improvement Plan Steering Committee

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