



University Hospitals

2020-2022 Community Health Implementation Strategy

UH Portage Medical Center
Portage County, Ohio



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Adoption by the Board

University Hospitals adopted the UH Portage Medical Center Community Health Implementation Strategy on March 31, 2020.

Community Health Implementation Strategy Availability

The Implementation Strategy can be found on University Hospitals' website at www.UHhospitals.org/CHNA-IS or a hard copy can be mailed upon request at CommunityBenefit@UHhospitals.org.

Written Comments

Individuals are encouraged to submit written comments, questions or other feedback about the UH Portage Medical Center Implementation Strategy to CommunityBenefit@UHhospitals.org. Please make sure to include the name of the UH facility that you are commenting about and, if possible, a reference to the appropriate section within the Implementation Strategy.

Introduction

In 2019, University Hospitals Portage Medical Center conducted a joint community health needs assessment (a “CHNA”) with the Portage County Combined General Health District and the associated Portage County Community Health Partners. The CHNA was compliant with the requirements of Treas. Reg. §1.501(r) (“Section 501(r)”) and Ohio Revised Code (“ORC”) 3701.981. The 2019 CHNA serves as the foundation for developing an Implementation Strategy (“IS”) to address those needs that, (a) UH Portage Medical Center determined they are able to meet in whole or in part; (b) are otherwise part of UH’s mission; and (c) are not met (or are not adequately met) by other programs and services in the county. This IS identifies the means through which UH Portage Medical Center plans to address a number of the needs that are consistent with the hospital’s charitable mission as part of its community benefit programs. Likewise, UH Portage Medical Center is addressing some of these needs simply by providing care to all, regardless of ability to pay, every day. UH Portage Medical Center anticipates that the strategies may change and therefore, a flexible approach is best suited for the development of its response to the 2019 CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by UH Portage Medical Center in the IS. More specifically, since this IS was done in conjunction with the 2020-2022 Portage County Community Health Improvement Plan (CHIP), other community organizations will be addressing certain needs. The full Portage County CHIP can be found at <http://www.hcno.org/community-services/community-health-assessments/> and a list of the Portage County CHIP strategies can be found in Appendix A of this report.




In addition, UH Portage Medical Center worked together to align both its CHNA and IS with state plans. Ohio state law (ORC 3701.981) mandates that all hospitals must collaborate with their local health departments on community health assessments (a “CHA”) and community health improvement plans (a “CHIP”). Additionally, local hospitals must align with Ohio’s State Health Assessment (a “SHA”) and State Health Improvement Plan (a “SHIP”). This requires alignment of the CHNA and IS process timeline, indicators, and strategies. This local alignment must take place by October 2020.

Note: This symbol  will be used throughout the report when a priority, indicator or strategy directly aligns with the 2017-2019 SHIP.

This aligned approach has resulted in less duplication, increased collaboration and sharing of resources. This report serves as the 2020-2022 UH Portage Medical Center Community Health Implementation Strategy which aligns with the 2019 Portage County Community Health Improvement Plan and meets the state of Ohio’s October 1, 2020 deadline. This IS meets all the requirements set forth in Section 501(r).

The Portage County Combined General Health District, on behalf of the Portage County Community Health Partners (includes UH Portage Medical Center), hired the Hospital Council of Northwest Ohio (HCNO) to conduct the community health planning process which influenced the strategies outlined in this report and the development of the aligned Portage County Community Health Improvement Plan (“CHIP”). This report more clearly delineates the commitments made by UH Portage Medical Center.

UH Portage Medical Center is working with other partners in Portage County to address the following priorities which were identified in the 2019 UH CHNA:

1. Chronic disease 
2. Mental health, substance use and addiction 
3. Maternal, infant and child health 

Hospital Mission Statement

As a wholly owned subsidiary of University Hospitals, UH Portage Medical Center is committed to supporting the UH mission, “To Heal. To Teach. To Discover.” (the “Mission”), by providing a wide range of community benefits including clinical services, medical education and research. UH is an integrated

delivery system and thus can provide benefits by coordinating within and among various entities (“UH System”).

Community Served by the Hospital

The community has been defined as Portage County. Most (85%) of UH Portage Medical Center’s discharges are residents of Portage County. In addition, University Hospital collaborates with multiple stakeholders, most of which provide services at the county-level. For these two reasons, the county was defined as the community served by the hospital.

Alignment with Local and State Standards

Community Partners

The IS was done in collaboration with various agencies and service-providers within Portage County. From August to October 2019, the Portage County Community Health Partners reviewed many data sources concerning the health and social challenges that Portage County residents are facing. They determined priority issues which, if addressed, could improve future outcomes; determined gaps in current programming and policies; examined best practices and solutions; and determined specific strategies to address identified priority issues.

Portage County Community Health Partners:

- ACESSPointe Community Health Center
- Children’s Advantage
- Coleman Professional Services
- Family and Children First Council
- Hiram College
- Kent City Health Department
- Kent State University College of Nursing
- Kent State University College of Public Health & Center for Public Policy and Health
- Kent State University Health Services
- Mental Health & Recovery Board of Portage County
- Northeast Ohio Medical University (NEOMED)
- OhioCAN
- PARTA
- Portage County Board of Health
- Portage County Children’s Services
- Portage County Combined General Health District
- Portage County Job & Family Services
- Portage County Safe Communities Coalition
- Portage County School Districts
- Portage County Township Trustees
- Portage County Treasurer
- Portage County WIC
- Portage Fatherhood Initiative
- Portage Park District
- Portage Substance Abuse Community Coalition
- Sequoia Wellness
- Suicide Prevention Coalition of Portage County
- The Portage Foundation
- Townhall II
- University Hospitals Portage Medical Center
- United Way of Portage County

The community health improvement process was facilitated by Emily Golias, Community Health Improvement Coordinator, from Hospital Council of Northwest Ohio.

2019 CHNA Trends Summary Table

The 2019 CHNA is a 238-page report that consists of county-level primary and secondary data for Portage County. The following data are trends from the CHNA that support the priorities and strategies found in this IS. The full CHNA report can be found at: www.UHhospitals.org/CHNA-IS.

Adult Trend Summary




Adult Variables	Portage County 2016	Portage County 2019	Ohio 2017	U.S. 2017
Health Status				
Rated general health as good, very good, or excellent	83%	88%	81%	83%
Rated general health as excellent or very good	53%	47%	49%	51%
Rated general health as fair or poor	17%	12%	19%	18%
Rated mental health as not good on four or more days (in the past 30 days)	27%	33%	26%	24%
Rated physical health as not good on four or more days (in the past 30 days)	20%	23%	23%	22%
Average number of days that physical health was not good (in the past 30 days)	3.7	4.0	4.0*	3.7*
Average number of days that mental health was not good (in the past 30 days)	4.7	5.2	4.3*	3.8*
Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past 30 days)	28%	32%	24%	23%
Healthcare Coverage, Access, and Utilization				
Uninsured	10%	6%	9%	11%
Had one or more persons they thought of as their personal health care provider	80%	83%	81%	77%
Visited a doctor for a routine checkup (in the past 12 months)	61%	74%	72%	70%
Visited a doctor for a routine checkup (5 or more years ago)	8%	7%	7%	8%
Arthritis, Asthma, & Diabetes				
Ever been told by a doctor they have diabetes (not pregnancy-related)	11%	14%	11%	11%
Ever diagnosed with some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia	31%	37%	29%	25%
Had ever been told they have asthma	21%	15%	14%	14%
Cardiovascular Health				
Ever diagnosed with angina or coronary heart disease	9%	6%	5%	4%
Ever diagnosed with a heart attack, or myocardial infarction	4%	5%	6%	4%
Ever diagnosed with a stroke	2%	3%	4%	3%
Had been told they had high blood pressure	29%	35%	35%	32%
Had been told their blood cholesterol was high	38%	36%	33%	33%
Had their blood cholesterol checked within the last five years	73%	86%	85%	86%
Cancer				
Diagnosed with skin cancer	N/A	3%	6%	6%
Diagnosed with any type of cancer (other than skin cancer)	8%**	7%	7%	7%
Weight Status				
Overweight (BMI of 25.0 – 29.9)	30%	35%	34%	35%
Obese (includes severely and morbidly obese, BMI of 30.0 and above)	28%	38%	34%	32%

N/A – Not Available

Indicates alignment with the Ohio State Health Assessment

*2016 BRFSS as compiled by 2019 County Health Rankings

**Includes skin cancer. Please compare with caution.

Adult Variables	Portage County 2016	Portage County 2019	Ohio 2017	U.S. 2017
Alcohol Consumption				
Current drinker (had at least one drink of alcohol within the past 30 days)	62%	78%	54%	55%
Binge drinker (males having five or more drinks on one occasion, females having four or more drinks on one occasion) 	22%	27%	19%	17%
Tobacco Use				
Current smoker (smoked on some or all days) 	13%	16%	21%	17%
Former smoker (smoked 100 cigarettes in lifetime and now do not smoke)	23%	27%	24%	25%
Tried to quit smoking (on at least one day in the past year)	52%	66%	N/A	N/A
Current e-cigarette user (vaped on some or all days)	N/A	4%	5%	5%
Drug Use				
Used marijuana or hashish (in the past 6 months)	10%	8%*	N/A	N/A
Used drugs not prescribed for them or took more than prescribed to feel good, high, and/or more active or alert (in the past 6 months)	10%	6%*	N/A	N/A
Preventive Medicine				
Had a flu shot in the past year (age 65 and older)	88%	72%	63%	60%
Had a pneumonia vaccine (age 65 and older)	71%	76%	76%	75%
Had a clinical breast exam in the past two years (age 40 and older)	71%	62%	N/A	N/A
Had a mammogram in the past two years (age 40 and older)	71%	73%	74%*	72%*
Had a Pap test in the past three years (ages 21-65)	64%	66%	82%*	80%*
Had a PSA test in within the past year (age 40 and over)	56%	62%	39%*	40%*
Quality of Life				
Limited in some way because of physical, mental or emotional problem	21%	23%	21%*	21%*
Mental Health				
Felt sad or hopeless for two or more weeks in the past year	15%	17%	N/A	N/A
Seriously considered attempting suicide in the past year	6%	6%	N/A	N/A
Attempted suicide in the past year	5%	5%	N/A	N/A
Oral Health				
Visited a dentist or a dental clinic (within the past year) 	64%	71%	68%*	66%*
Visited a dentist or a dental clinic (5 or more years ago)	9%	10%	11%*	10%*









N/A – Not Available

 Indicates alignment with the Ohio State Health Assessment

*2016 BRFSS as compiled by 2019 County Health Rankings

**Includes skin cancer. Please compare with caution.


Portage County Youth Trend Summary



Youth Comparisons	Portage County 2016 (6 th -12 th)	Portage County 2019 (6 th -12 th)	Portage County 2019 (9 th -12 th)	U.S. 2017 YRBS (9 th -12 th)
Weight Control				
Obese 	15%	14%	14%	15%
Overweight 	15%	12%	13%	16%
Described themselves as slightly or very overweight	29%	25%	28%	32%
Were trying to lose weight	46%	44%	48%	47%
Exercised to lose weight (in the past 30 days)	47%	53%	58%	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight (in the past 30 days)	31%	26%	31%	N/A
Went without eating for 24 hours or more (in the past 30 days)	6%	9%	12%	13%**
Took diet pills, powders, or liquids without a doctor's advice (in the past 30 days)	2%	3%	4%	5%**
Vomited or took laxatives (in the past 30 days)	2%	4%	4%	4%**
Ate 5 or more servings of fruit and/or vegetables per day 	13%*	24%	22%	N/A
Ate 0 servings of fruits and/or vegetables per day 	7%*	5%	6%	N/A
Physically active at least 60 minutes per day on every day in past week	34%	31%	29%	26%
Physically active at least 60 minutes per day on 5 or more days in past week	54%	58%	58%	46%
Did not participate in at least 60 minutes of physical activity on any day in past week 	12%	8%	8%	15%
Watched 3 or more hours per day of television (on an average school day)	24%	17%	19%	21%
Unintentional Injuries and Violence				
Carried a weapon (in the past 30 days)	11%	11%	13%	16%
Carried a weapon on school property (in the past 30 days)	1%	2%	3%	4%
Threatened or injured with a weapon on school property (in the past 12 months)	5%	8%	9%	6%
Did not go to school because they felt unsafe (at school or on their way to or from school in the past 30 days)	4%	6%	5%	7%
Bullied (in past year)	43%	34%	31%	N/A
Bullied on school property (in past year)	33%	25%	19%	19%
Electronically bullied (in past year)	12%	9%	6%	15%
Were ever physically forced to have sexual intercourse (when they did not want to)	3%	2%	3%	7%
Experienced physical dating violence (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past 12 months)	2%	3%	3%	8%
Purposefully hurt themselves in their life	30%	23%	24%	N/A
Mental Health				
Felt sad or hopeless (almost every day for 2 or more weeks in a row so that they stopped doing some usual activities in the past 12 months) 	27%	32%	35%	32%
Seriously considered attempting suicide (in the past 12 months) 	18%	13%	15%	17%
Attempted suicide (in the past 12 months) 	9%	8%	8%	7%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (in the past 12 months)	2%	2%	3%	2%
Alcohol Consumption				
Ever drank alcohol (at least one drink of alcohol on at least 1 day during their life)	47%	48%	61%	60%
Current Drinker (at least one drink of alcohol on at least 1 day during the past 30 days)	18%	23%	32%	30%
Binge drinker (drank 5 or more drinks within a couple of hours on at least 1 day during the past 30 days)	9%	14%	20%	14%

N/A – Not Available

*Calculations differed year to year. Please compare with caution.

**Comparative YRBS data for U.S. is 2013

 Indicates alignment with Ohio SHA/SHIP


Youth Comparisons	Portage County 2016 (6 th -12 th)	Portage County 2019 (6 th -12 th)	Portage County 2019 (9 th -12 th)	U.S. 2017 YRBS (9 th -12 th)
Alcohol Consumption (cont.)				
Drank for the first time before age 13 (of all youth)	13%	17%	13%	16%
Obtained the alcohol they drank by someone giving it to them (of current drinkers)	32%	30%	32%	44%
Rode with a driver who had been drinking alcohol (in a car or other vehicle on 1 or more occasion during the past 30 days)	18%	14%	14%	17%
Drove when they had been drinking alcohol (in a car or vehicle, 1 or more times during the 30 days before the survey, among youth who had driven a car or other vehicle)	5%	7%	9%	6%
Tobacco Use				
Current smoker (smoked on at least 1 day during the past 30 days) 	6%	7%	10%	9%
Smoked cigarettes frequently (smoked on 20 or more days during the past 30 days)	1%	1%	2%	3%
Smoked cigarettes daily (smoked on all 30 days during the past 30 days)	1%	1%	1%	2%
Currently used an electronic vapor product (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on at least 1 day during the past 30 days)	N/A	27%	37%	13%
Used electronic vapor products frequently (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on 20 or more days during the past 30 days)	N/A	10%	16%	3%
Used electronic vapor products daily (including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens, on all 30 days during the past 30 days)	N/A	8%	12%	2%
Sexual Behavior				
Ever had sexual intercourse	27%	21%	34%	40%
Had sexual intercourse with four or more persons (of all youth during their life)	8%	5%	8%	10%
Had sexual intercourse before the age 13 (for the first time of all youth)	3%	3%	4%	3%
Used a condom (during last sexual intercourse)	54%	37%	40%	54%
Used birth control pills (during last sexual intercourse)	30%	23%	24%	21%
Used an IUD (during last sexual intercourse)	5%	2%	2%	4%
Used a shot, patch or birth control ring (during last sexual intercourse)	3%	5%	4%	5%
Did not use any method to prevent pregnancy (during last sexual intercourse)	11%	10%	10%	14%
Drug Use				
Currently used marijuana (in the past 30 days) 	11%	18%	26%	20%
Ever used methamphetamines (in their lifetime)	1%	1%	1%	3%
Ever used cocaine (in their lifetime)	2%	1%	1%	5%
Ever used heroin (in their lifetime)	1%	<1%	<1%	2%
Ever used inhalants (in their lifetime)	4%	6%	5%	6%
Ever used ecstasy (also called MDMA in their lifetime)	3%	1%	1%	4%
Misused medications that were not prescribed to them or to ok more to get high and/or feel more alert (in their lifetime)	7%	3%	4%	N/A
Ever took steroids without a doctor's prescription (in their lifetime)	1%	1%	1%	3%
Were offered, sold, or given an illegal drug on school property (in the past 12 months)	9%	11%	15%	20%
Personal Health				
Visited a dentist within the past year (for a check-up, exam, teeth cleaning, or other dental work)	74%	78%	78%	74%*
Visited a doctor or other healthcare professional (for a routine check-up in the past year)	75%	79%	78%	N/A

N/A – Not Available

 Indicates alignment with Ohio SHA/SHIP

*Comparative YRBS data for U.S. is 2013

Portage County Child Trend Summary

Child Comparisons	Portage County 2016 Ages 0-5	Portage County 2019 Ages 0-5	Ohio 2017 Ages 0-5	U.S. 2017 Ages 0-5	Portage County 2016 Ages 6-11	Portage County 2019 Ages 6-11	Ohio 2017 Ages 6-11	U.S. 2017 Ages 6-11
Health and Functional Status								
Rated health as excellent or very good	95%	97%	91%	93%	92%	99%	88%	90%
Dental care visit in the past year	79%	51%	41%**	60%**	89%	93%	89%	90%
Diagnosed with asthma 	10%	8%	9%±	4%	17%	16%	16%±	9%
Diagnosed with diabetes	0%	0%	N/A	<1%***	1%	0%	N/A	<1%***
Diagnosed with ADHD/ADD	3%	3%	2%* ±	2%*	9%	11%	13%	10%
Diagnosed with behavioral or conduct problems	3%	0%	3%* ±	4%*	5%	4%	13%	8%
Diagnosed with epilepsy or a seizure disorder	1%	3%	N/A	<1%***	<1%	0%	N/A	<1%***
Diagnosed with a brain injury, concussion, or head injury	0%	0%	N/A	<1%	2%	1%	N/A	<1%
Diagnosed with depression	0%	0%	N/A	<1%*	2%	1%	N/A	2%
Diagnosed with cerebral palsy	0%	2%	N/A	<1%***	0%	0%	N/A	<1%***
Diagnosed with anxiety problems	2%	3%	N/A	2%*	8%	7%	N/A	6%
Diagnosed with intellectual disability/mental retardation	N/A	5%	N/A	1%*	N/A	0%	N/A	1%
Diagnosed with learning disability	3%	3%	N/A	2%*	7%	3%	N/A	9%
Diagnosed with speech or language disorder	14%	18%	N/A	10%*	9%	9%	N/A	7%
Child had two or more health conditions	N/A	17%	7%	7%	N/A	11%	28%	21%
Health Care Access								
Had public insurance	24%	15%	28%±	32%	23%	17%	33%±	32%
Had one or more preventive care visits in past year	97%	98%	94%	89%	80%	92%	78%	80%
Had a personal doctor or nurse	81%	85%	75%	72%	76%	86%	72%	72%
Early Childhood (Ages 0-5)								
Never breastfed their child	18%	13%	19%	20%	N/A	N/A	N/A	N/A
Middle Childhood (Ages 6-11)								
Child did not miss any days of school because of illness or injury	N/A	N/A	N/A	N/A	22%	13%	26%±	30%
Parent definitely agreed that their child was safe at school	N/A	N/A	N/A	N/A	N/A	71%	80%	82%


*Ages 3-5

**Ages 1-5

***Ages 0-17

±Indicates Ohio 2016 data from the National Survey of Children's Health. 2017 Ohio data is not available.

N/A – Not Available

 Indicates alignment with the Ohio State Health Assessment




Child Comparisons	Portage County 2016 Ages 0-5	Portage County 2019 Ages 0-5	Ohio 2017 Ages 0-5	U.S. 2017 Ages 0-5	Portage County 2016 Ages 6-11	Portage County 2019 Ages 6-11	Ohio 2017 Ages 6-11	U.S. 2017 Ages 6-11
Family and Community Characteristics								
Family ate a meal together every day of the week	50%	50%	60%	54%	41%	39%	45%	44%
Parent definitely agreed that their child lives in a safe neighborhood	69%	72%	N/A	64%	60%	77%	N/A	65%
Two or more adverse childhood experiences	N/A	8%	13%	11%	N/A	8%	27%	21%

N/A – Not Available

Priority Health Needs

Reminder: This symbol  will be used throughout the report when a priority, indicator or strategy directly aligns with the 2017-2019 SHIP.

Priorities:

1. Mental health, substance use and addiction 
2. Chronic Disease (including obesity) 
3. Maternal, infant and child health 

Strategies to Address Health Needs

Mobilizing for Action through Planning and Partnerships (MAPP)

The planning and strategic development process was completed using the National Association of County and City Health Officials' (NACCHO) MAPP process. MAPP is a national, community-driven planning process for improving community health. This process was facilitated by HCNO in collaboration with various local agencies representing a variety of sectors.

The MAPP framework includes six phases which are listed below:





1. Organizing for success and partnership development
2. Visioning
3. The four assessments
4. Identifying strategic issues
5. Formulate goals and strategies
6. Action cycle

The MAPP process includes four assessments: community themes and strengths, forces of change, local public health system assessment, and the community health status assessment. These four assessments were used by the Portage County Community Health Partners to prioritize specific health issues and population groups which are the foundation of this plan. Additionally, input from UH Portage Medical Center's community outreach staff and hospital president was used to further determine the hospital's specific tactics.

The strategies listed on the following pages are done in alignment with the Portage County Community Health Improvement Plan. They reflect the specific strategies that UH Portage Medical Center will implement to address the identified priorities and achieve the anticipated county level outcomes. The resources being provided include staff time and expertise, health screening supplies and equipment, publicity for various events and other contributions as outlined in the following section.

University Hospitals Portage Medical Center
CHNA Priority: Mental Health and Addiction
Strategy 1: Youth alcohol/other drug prevention and mental health programs
Goal: Decrease substance use in Portage County.
Objective: By December 31, 2022, decrease youth usage of e-cigarettes, alcohol, and marijuana by 2%.
Action Steps: Years 1-3: <ul style="list-style-type: none"> • UH Portage Medical Center will be a resource to the substance use and addiction county committee. • UH Portage Medical Center will work with the committee to assess current vaping education services in Portage County. • Provide health education in support of youth vaping prevention. • UH Portage Medical Center will raise awareness regarding stress and anxiety management through education and hands-on experience and expression at career days, targeting over 200 8th graders in Portage schools. Students will receive beautiful coloring books and are encouraged to continue the activity at home. (Track number of participants.)
* Anticipated measurable outcome(s): <ul style="list-style-type: none"> • Decrease the percentage of Portage county youth that are current electronic vapor product users by 2% (baseline: 27% in the 2019 Portage County CHNA).
Indicator(s) used to measure progress: <ul style="list-style-type: none"> • Percent of Portage County youth that are current electronic vapor product users (HCNO household survey)
Collaboration and Partnerships: Mental Health and Recovery Board, Townhall II, Portage County Health District

** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

University Hospitals Portage Medical Center
CHNA Priority: Mental Health and Addiction 
Strategy 1: Links to cessation support 
Goal: Decrease tobacco use in Portage County.
Objective: By December 31, 2022, increase participation in tobacco cessation program(s) by 15%.
<p>Action Steps:</p> <p>Year 1:</p> <ul style="list-style-type: none"> • UH Portage Medical Center will work with the substance use and addiction county committee to collect baseline data on the availability of evidence-based tobacco cessation programs in Portage County and assess the need for more. • Working with other partners in Portage County, the hospital will promote and raise awareness of the tobacco cessation programs, as well as other resources, such as the Ohio Tobacco Quit Line, My Life My Quit, etc. (Track outcomes.) • Increase the number of participants (average of 20 participants), who enroll and attend the UH Portage Medical Center cessation class. (Track number of participants and outcomes.) • Increase percentage of participants who complete the full 5-week cycle of the class. • Working with other partners in Portage County, the hospital will investigate barriers to nicotine replacement therapy access. <p>Year 2:</p> <ul style="list-style-type: none"> • Continue efforts of Year 1. • Look for opportunities to reduce out-of-pocket costs for cessation therapies. • Ensure any new tobacco cessation programs are promoted. (Track publicity.) <p>Year 3:</p> <ul style="list-style-type: none"> • Continue efforts of Years 1 and 2.
<p>* Anticipated measurable outcome(s):</p> <ul style="list-style-type: none"> • Decrease the percentage of Portage County adults who are current smokers by 2% (baseline: 16% in the 2019 Portage County CHNA). • Decrease the percentage of Portage County youth who are current smokers by 2% (baseline: 7% in the 2019 Portage County CHNA). • Decrease the percentage of Portage County youth who are current electronic vapor product users by 2% (baseline: 27% in 2019 Portage County CHNA).
<p>Indicator(s) used to measure progress:</p> <ul style="list-style-type: none"> • Percent of Portage County adults that are current smokers (HCNO household survey)  • Percent of Portage County youth that are current smokers (HCNO household survey)  • Percent of Portage County youth that are current electronic vapor product users (HCNO household survey)
Collaboration and Partnerships: Kent City Health Department, Ohio Department of Health (ODH) funding, Portage County Health District

** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

University Hospitals Portage Medical Center
CHNA Priority: Chronic Disease
Strategy 1: Food insecurity screening and referral
Goal: Reduce food insecurity in Portage County.
Objective: Implement food insecurity screening and referral in at least three additional Portage County locations by December 31, 2022.
<p>Action Steps:</p> <p>Years 1-3:</p> <ul style="list-style-type: none"> • Use the USDA Hunger Vital Sign™ two-question screening tool for food insecurity when providing nutrition counseling for outpatient clinical nutrition services at UH Portage Medical Center and appropriate community outreach settings. (Track number of patients and positive results.) • In conjunction with local partners in Portage County, educate healthcare organizations on food insecurity, its impact on health, and the importance of screening and referral. • Work internally at UH to address food insecurity as part of routine medical visits on an individual and systems-based level. • Inform partners and patients about existing community resources and referral options such as United Way 211, Women, Infants and Children (WIC), Supplemental Nutrition Assistance Program (SNAP), school nutrition programs, food pantries and other resources. • Work with partners to implement the screening tool in at least one additional location with accompanying referral options and evaluation measures. Target screenings towards those who live in, or serve, economically disadvantaged populations. • UH Portage Medical Center will continue to provide nutrition education, offer the USDA summer lunch program which provides about 500 lunches to children and offer the backpack program which provides 700 snacks for the weekend during the school year. (Track number of meals/snacks.)
<p>* Anticipated measurable outcome(s):</p> <ul style="list-style-type: none"> • Decrease the percentage of Portage County households that are food insecure by 1% (baseline: 13.7% in the Map the Meal Gap).
<p>Indicator(s) used to measure progress:</p> <ul style="list-style-type: none"> • Percent of Portage County households that are food insecure (Map the Meal Gap, 2017 data)
<p>Collaboration and Partnerships: Northeast Ohio Medical University, Student OutReach to Area Residents (NEOMED SOAR), a student-run free clinic</p>

** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

University Hospitals Portage Medical Center
CHNA Priority: Chronic Disease
Strategy 2: Prediabetes screening and referral
Goal: Prevent diabetes in Portage County adults.
Objective: By December 31, 2022, increase the number of prediabetes screenings by 15%.
<p>Action Steps:</p> <p>Years 1-3:</p> <ul style="list-style-type: none"> • As a member of the chronic disease committee, the hospital will establish baseline data for prediabetes screenings conducted in Portage County. • Work with the committee to raise awareness of prediabetes screening, identification and make referrals through dissemination of the Prediabetes Risk Assessment. • Work with the committee to promote free/reduced cost screening events within the county. • UH Portage Medical Center will provide 200 free screenings and health education annually. (Track number screened and positive results.) • UH Portage Medical Center staff will refer individuals with increased risk of having prediabetes/diabetes to primary care and make referrals for other resources.
<p>* Anticipated measurable outcome(s):</p> <ul style="list-style-type: none"> • Decrease the percent of Portage County adults who have been told by a health professional that they have diabetes by 2% (baseline: 14% in the 2019 Portage County CHNA).
<p>Indicator(s) used to measure progress:</p> <ul style="list-style-type: none"> • Percent of Portage County adults who have been told by a health professional that they have diabetes (HCNO household survey)
Collaboration and Partnerships: AxessPointe, NEOMED SOAR





** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

University Hospitals Portage Medical Center
CHNA Priority: Chronic Disease
Strategy 3: Hypertension screening and follow up
Goals: Promote hypertension management in Portage County adults.
Objective: By December 31, 2022, increase hypertension medication adherence to 84%.
<p>Action Steps:</p> <p>Years 1-3:</p> <ul style="list-style-type: none"> As a member of the chronic disease committee, the hospital will gather data on hypertension management interventions currently used in Portage County. With the committee, UH Portage Medical Center will research barriers to medication adherence and best practices for hypertension management. UH Portage Medical Center will increase patient and community education on hypertension screening, treatment and the importance of routine follow-up with patients diagnosed with hypertension. As well as increase awareness about hypertension in general. UH Portage Medical Center will provide blood pressure screenings, counseling and information about resources to at least 500 Portage County adults. (Track number screened and positive results.)
<p>* Anticipated measurable outcome(s):</p> <ul style="list-style-type: none"> Increase the percentage of Portage County adults with hypertension who report currently taking medicine for their high blood pressure by 2% (baseline: 82% in the 2019 Portage County CHNA).
<p>Indicator(s) used to measure progress:</p> <ul style="list-style-type: none"> Percent of Portage County adults with hypertension who report currently taking medicine for their high blood pressure (HCNO household survey)
<p>Collaboration and Partnerships: Portage County Community Health Improvement Plan (CHIP) work group</p>

** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

University Hospitals Portage Medical Center
CHNA Priority: Chronic Disease
Strategy 4: Community gardens
Goal: Increase fruit and vegetable accessibility in Portage County.
Objective: By December 31, 2022, maintain four community gardens in Portage County prioritizing food deserts.
<p>Action Steps:</p> <p>Year 1:</p> <ul style="list-style-type: none"> • Along with other members of the chronic disease committee, the hospital will obtain baseline data regarding the number and location of school districts, churches, and other community organizations with community gardens. (Track number of gardens.) • The committee will assess the need for additional community gardens, focusing on food desert areas, secure volunteers and/or master gardeners and explore a potential partnership with OSU Extension. • The committee will continue to partner with the Kent State University School of Public Health and Portage County Master Gardeners at the Windham garden and Walls Elementary School garden in Kent, Ohio. <p>Year 2:</p> <ul style="list-style-type: none"> • Along with other members of the chronic disease committee, the hospital will research funding opportunities to increase the number of community gardens. • The committee will develop a sustainability plan to maintain existing and future community gardens year-round. • The committee will publicize current and future community gardens within the county. • The committee will update marketing materials on an annual basis. • The committee will implement one new community garden. <p>Year 3:</p> <ul style="list-style-type: none"> • Continue efforts from Year 2. • The committee will implement one new community garden. • Explore partnership opportunities to educate community members and families on gardening and healthy eating practices. <p>* Anticipated measurable outcome(s):</p> <ul style="list-style-type: none"> • Decrease the percentage of Portage County adults who report consuming 0 servings of fruit per day by 2% (baseline: 14% in the 2019 Portage County CHNA). • Decrease the percentage of Portage County adults who report consuming 0 servings of vegetables per day by 2% (baseline: 4% in the 2019 Portage County CHNA). • Decrease the percentage of Portage County youth who report consuming 0 servings of fruit per day by 2% (baseline: 11% in the 2019 Portage County CHNA). • Decrease the percentage of Portage County youth who report consuming 0 servings of vegetables per day by 2% (baseline: 15% in the 2019 Portage County CHNA).

Indicator(s) used to measure progress:

- Percent of Portage County adults who report consuming 0 servings of fruit per day (HCNO household survey) 
- Percent of Portage County adults who report consuming 0 servings of vegetables per day (HCNO household survey) 
- Percent of Portage County youth who report consuming 0 servings of fruit per day (HCNO household survey) 
- Percent of Portage County youth who report consuming 0 servings of vegetables per day (HCNO household survey) 

Collaboration and Partnerships: Portage County CHIP work group

** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

University Hospitals Portage Medical Center
CHNA Priority: Maternal, Infant and Child Health
Strategy 4: Reproductive health interventions
Goal: Increase sustainability of women’s reproductive health and wellness services in Portage County.
Objective: By December 31, 2022, implement a women’s reproductive health and wellness program to increase the use of reproductive health interventions for Medicaid-eligible residents in Portage County.
<p>Action Steps:</p> <p>Years 1-3:</p> <ul style="list-style-type: none"> • Work with county partners to connect UH Portage Medical Center patients and community members to valuable services promoting maternal and infant health. • UH Portage Medical Center will participate in women’s health focused events. • UH Portage Medical Center will host a women’s expo to include a pre-conception screening questionnaire and preventive screenings, target: 200 attendees. (Track number of attendees.) • Launch a UH Portage Medical Center Centering Pregnancy program, target: 90 participants. (Track number of participants and relevant health outcomes.)
<p>* Anticipated measurable outcome(s):</p> <ul style="list-style-type: none"> • Increase the number of Portage County women ages 21-65 years who had a pap smear in the past three years (baseline: 66% in the 2019 Portage County CHNA).
<p>Indicator(s) used to measure progress:</p> <ul style="list-style-type: none"> • Percent of Portage County women ages 21-65 years who had a pap smear in the past three years (HCNO household survey) • Survey question: Thinking back to their last pregnancy, 48% of women wanted to be pregnant then, 32% wanted to be pregnant sooner, 6% did not want to be pregnant then or any time in the future, 6% wanted to be pregnant later and 9% of women did not recall (HCNO household survey)
Collaboration and Partnerships: Portage County Health District, AxessPointe

** Outcomes are based on a variety of tactics occurring among the Portage County Community Health Partners to achieve the anticipated results at the county level.*

Significant Health Needs Not Being Addressed by the Hospital

UH Portage Medical Center is implementing strategies in collaboration with other partners in Portage County for all three priorities identified in the 2019 CHNA.

However the following strategies will not be directly addressed by UH Portage Medical Center as part of its Community Health Implementation Strategy because other county partners have agreed to take the lead based on their core expertise, prior experience and/or availability of existing resources (see full list of Portage County's strategies in Appendix A). Additionally, some strategies are not included in this IS because they do not meet the IRS definition of a non-profit hospital "community benefit" but are still addressed by the UH System. More specifically, they are required or expected of all hospitals based on licensure or accreditation, are a routine standard of clinical care or primarily benefit the organization rather than the community. This includes things such as mental health and substance disorder treatment, access to reproductive health services, connecting patients to health insurance as needed and having a smoke-free workplace policy. For example, employee in-service training, such as implicit bias training, does not meet the IRS definition of a "community benefit" because staff training primarily benefits the hospital, rather than the community. Regardless of this fact, University Hospitals values this work and has a Diversity Council, managed by senior leaders that is dedicated to developing and implementing strategies to address equity, diversity and inclusion system-wide. Lastly community outreach staff from UH Portage Medical Center remain engaged as thought-leaders on all the strategies as needed.

Mental health, substance use and addiction

- Assessing, developing and providing mental health resources to youth and adults in Portage County
- Screening for Adverse Childhood Experiences (ACEs) using a standardized tool
- Screening for suicide for patients 12 years of age or older using a standardized tool
- Community-based comprehensive plan to reduce alcohol and drug abuse
- Increase awareness and accessibility of treatment options for those with substance use disorder
- Safe communities campaign
- Tobacco-free policies
- Data sharing

Chronic disease

- Nutrition prescriptions
- Healthy eating practices through fostering self-efficacy
- Increase awareness of nutrition/physical activity resources
- Prescriptions for health
- Shared use (joint use agreements)
- Community fitness programs

Maternal, infant and child health

- Home visiting programs that begin prenatally
- Increase enrollment in WIC program
- Provide referrals/resources to all patients on health insurance access to ensure reproductive health
- Create and implement a Safe Kids Coalition plan

Cross-cutting factors

Social determinants of health

- Home improvement loan and grants
- Service-enriched housing
- Outreach to increase financial stability through free tax preparation services
- Financial literacy
- Increase transportation through a county transportation plan

Healthcare system and access

- School-based health centers
- Health transportation outreach
- Expand NEOMED SOAR (Northeast Ohio Medical University, Student OutReach to Area Residents, a student-run free clinic

Health Equity

- Implicit bias training

Community Collaborators

This IS was commissioned by University Hospitals in collaboration with the 2019 Portage County Community Health Improvement Plan process and the associated county partners; see Portage County Community Health Partners listed on page 4 of this report.

Qualifications of Consulting Company

The community health improvement process was facilitated by Emily Golias, Community Health Improvement Coordinator, at Hospital Council of Northwest Ohio (HCNO). HCNO is a 501(c)(3) non-profit regional hospital association founded in 1972 that represents and advocates on behalf of its member hospitals and health systems and provides collaborative opportunities to enhance the health status of the citizens of Northwest Ohio. HCNO is respected as a neutral forum for community health improvement. HCNO has a track record of addressing health issues and health disparities collaboratively throughout northwest Ohio, and the state. Local and regional initiatives include: county-wide health assessments, community health improvement planning, strategic planning, disaster preparedness planning, Northwest Ohio Regional Trauma Registry, Healthcare Heroes Recognition Program and the Northwest Ohio Pathways HUB.

The Community Health Improvement division of HCNO has been conducting community health assessments (CHAs), community health improvement plans (CHIPs) and facilitating outcome focused multi-sectorial collaborations since 1999. HCNO has completed more than 90 CHAs in 44 counties. The model used by HCNO can be replicated in any type of county and therefore has been successful at the local and regional level, as well as for urban, suburban and rural communities.

The HCNO Community Health Improvement Division has six full time staff members with Master's Degrees in Public Health (MPH), who are dedicated solely to CHAs, CHIPs and other community health improvement initiatives. HCNO also works regularly with professors at the University of Toledo, along with multiple graduate assistants to form a very experienced and accomplished team. The HCNO team has presented at multiple national, state and local conferences including the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System (BRFSS) conference, the Association of

Community Health Improvement (ACHI) national conference, the Ohio Hospital Association (OHA) state conference, the Ohio Association of Health Commissioners (AOHC) and others.

The aligned 2020-2022 UH Portage Medical Center IS was compiled and written by Danielle Price, Director, Community Health Engagement in the department of Government and Community Relations at University Hospitals. She oversees state and federal community benefit compliance for all UH medical centers. Ms. Price has a Bachelor's degree from the Wharton School of Business, University of Pennsylvania and a Master of Science in Social Administration (MSSA) degree from the Mandel School of Applied Social Science at Case Western Reserve University.

Contact

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Appendix A

2020-2022 Portage County Community Health Improvement Plan Strategies

Strategic Plan of Action

To work toward improving mental health, substance use and addiction outcomes, the following strategies are recommended:

Priority 1: Mental Health

Priority #1: Mental Health, Substance Use and Addiction				
Strategy 1: Assess, develop, and provide mental health resources to youth and adults in Portage County.				
Goal: Improve mental health outcomes.				
Objective: By December 31, 2022, decrease the percent of adults and youth feeling sad and hopeless by 2%.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Work with primary care providers and office staff to assess what information and/or materials they are lacking to provide better care for patients with mental health issues.</p> <p>Provide baseline for number of youths being assessed in the schools for mental health concerns.</p> <p>Develop awareness campaigns on counseling for depression and anxiety.</p> <p>Explore how to reach adults to help relieve anxiety due to financial/job stress.</p> <p>Access the County's supports for LGBTQ resources for youth, colleges, and adults.</p>	December 31, 2020	Adult, and youth	<p>1. Decrease adults feeling sad/hopeless by 2% (Baseline: 17% of adults felt sad/hopeless for two or more weeks, 2019 Portage County CHNA)</p> <p>2. Decrease youth feeling sad/hopeless by 2% (Baseline: 32% of youth felt sad/hopeless for two or more weeks, 2019 Portage County CHNA)</p>	Karyn Kravetz, Mental Health and Recovery Board
<p>Year 2: Continue efforts from year 1.</p>	December 31, 2021			
<p>Year 3: Continue efforts from years 1 and 2.</p>	December 31, 2022			
<p>Type of Strategy:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="radio"/> Social determinants of health <input type="radio"/> Public health system, prevention and health behaviors </div> <div style="width: 48%;"> <input checked="" type="radio"/> Healthcare system and access <input type="radio"/> Not SHIP Identified </div> </div>				
<p>Strategy identified as likely to decrease disparities?</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </div> <div style="width: 40%;"> <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified </div> </div>				
<p>Resources to address strategy: MHRB, Child Advantage, Townhall II, FSC, Coleman.</p>				

Priority #1: Mental Health, Substance Use and Addiction				
Strategy 2: Screening for Adverse Childhood Experiences (ACEs) using a standardized tool.				
Goal: Improve behavioral health outcomes.				
Objective: Implement ACEs screenings in five different Portage County locations by December 31, 2022.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/ Agency
<p>Year 1: Portage County Trauma Informed Care Collaboration will assess agencies, organizations, disciplines etc. who could benefit from implementation of the ACEs, provide training on ACEs implementation, and collect data on Portage County ACE outcomes.</p> <p>Adopt a community-wide screening tool for ACEs and target the screening towards those who serve economically disadvantaged and/or minority populations.</p> <p>Implement ACEs as part of intake at The Family Center for both children and parents/caregivers. Provide data on posttraumatic growth due to programming addressing impact of ACEs by reporting successful families and their ability to remain intact and complete programming.</p> <p>Provide community-based training on ACEs, the impact of trauma, and how the community can respond to trauma.</p> <p>Pilot the tool in at least one new entity.</p> <p>Collect baseline data on the number of adults and counselors that have been trained in TIC.</p> <p>Create a referral for all trauma specific service providers in the county.</p> <p>Portage County Trauma Informed Care Collaboration will identify prevention strategies to educate the community on awareness of negative impact of trauma to reduce occurrence of abuse/neglect, sexual abuse, and violence through community awareness event.</p> <p>Hold one community awareness event on the prevention of traumatic experiences.</p>	December 31, 2020	Adult and youth	Increase the number of adult trauma providers and trained trauma-certified counselors by 5% from baseline.	Nicole Thomas, Children's Advantage
Year 2: Continue efforts from year 1.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2.	December 31, 2022			
<p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input type="radio"/> Public health system, prevention and health behaviors <input checked="" type="radio"/> Healthcare system and access <input checked="" type="radio"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown/No Data <input checked="" type="radio"/> Not SHIP Identified </p>				
<p>Resources to address strategy: MHRB, Child Advantage, Townhall II, FSC, Coleman, for profit providers.</p>				

Priority #1: Mental Health, Substance Use and Addiction

Strategy 3: Screening for suicide for patients 12 or older using a standardized tool

Goal: Decrease suicide deaths.

Objective: Implement suicide screenings for patients 12 or older in five Portage County healthcare settings by December 31, 2022.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/ Agency
<p>Year 1: Introduce C-SSRS to healthcare providers such as primary care offices, FQHCs, emergency departments, and first responders. Evaluate current screening resources and referral networks. Prioritize providers serving at-risk populations.</p> <p>Train Portage County law enforcement in C-SSRS through four (4) regional trainings.</p> <p>Train 5-6 professionals in QPR (question, persuade, refer) to become trainers to conduct sessions in the community.</p> <p>Raise awareness of gun safety. Distribute Suicide Gun Safety cards to gun sellers, sportsman, etc.</p>	December 31, 2020	Adult and youth	<p>1. Adult suicide ideation: Decrease the percent of adults who report that they ever seriously considered attempting suicide within the past 12 months by 2% (Baseline: 6%, 2019 Portage County CHNA)</p> <p>2. Youth suicide ideation: Decrease the percent of youth who report that they ever seriously considered attempting suicide within the past 12 months by 2% (Baseline: 13%, 2019 Portage County CHNA)</p> <p>3. Firearm possession: Baseline: 47% Adults have a firearm in their home, 3% keep unlocked & unloaded (2019 Portage County CHNA)</p> <p>4. Decrease adults feeling sad/hopeless: (Baseline: 17% of adults felt sad/hopeless for two or more weeks. (2019 Portage County CHNA)</p>	<p>Bill Russell, Coleman</p> <p>Karyn Kravetz, Mental Health and Recovery Board</p>
Year 2: Evaluate and expand outcomes from year one.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2.	December 31, 2022			
Initiate conversations regarding the feasibility of integrating the screening tool into a system(s)-wide electronic medical record system.				

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Unknown/No Data
- Not SHIP Identified

Resources to address strategy: Mental Health & Recovery Board of Portage County, law enforcement, SAMSHA, OMHAS, Suicide Prevention Coalition, Portage County Health District, Townhall II, Coleman, FSC, CIT.

Priority #1: Mental Health, Substance Use and Addiction

Strategy 4: Youth alcohol/other drug prevention and mental health programs

Goal: Decrease substance use.

Objective: By December 31, 2022, decrease youth usage of e-cigarettes, alcohol, and marijuana by 2%.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/ Agency
<p>Year 1: Continue evidence-based prevention programming for youth and expand as funding allows.</p> <p>Advocate for youth mental health and alcohol/other drug prevention funding.</p> <p>Increase mental health prevention programs (Life Skills, Second Step, SAVE, PAX) in Portage County.</p> <p>Increase training for adults who work with children (school staff, coaches, clergy, etc.).</p> <p>Identify the needs of community centers (Skeels, King Kennedy, Windham Renaissance).</p> <p>Implement youth-led prevention projects.</p> <p>Assess current vaping education services in Portage County.</p>	December 31, 2020	Youth	<ol style="list-style-type: none"> Youth electronic vapor product user: Decrease the percentage of youth who currently use electronic vapor product by 2% (Baseline: 27%, 2019 Portage County CHNA) Youth alcohol use: Decrease the percentage of youth who drank one or more drinks of an alcoholic beverage in the past 30 days by 2% (Baseline: 23%, 2019 Portage County CHNA) Youth marijuana use: Decrease the percentage of youth who report using marijuana one or more time within the past 30 days by 2% (Baseline: 18%, 2019 Portage County CHNA) Decrease youth usage of e-cigarettes, alcohol, and marijuana: Youth 17 years and older currently have an increased alcohol use (47%), marijuana (41%) and e-cigarettes (51%). Decrease youth use of alcohol: 48% of youth had at least one drink of alcohol in their life, increasing to 78% of those ages 17 and older. (2019 Portage County CHNA) Decrease youth use of marijuana: 18% of Portage County youth used marijuana at least once in the past 30 days, increasing to 41% of those ages 17 and older. (2019 Portage County CHNA) 	<p>Sarah McCully, Townhall II</p> <p>Karyn Kravetz, Mental Health and Recovery Board</p>
<p>Year 2: Continue efforts from year 1.</p>	December 31, 2021			
<p>Year 3: Continue efforts from year 2.</p>	December 31, 2022			

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Unknown/No Data
- Not SHIP Identified

Resources to address strategy: MHRB, Townhall II, Portage County Health District, UH Portage Medical Center.

Priority #1: Mental Health, Substance Use and Addiction

Strategy 6: Increase awareness and accessibility of treatment options for those with substance use disorder.

Goal: Decrease substance use.

Objective: By December 31, 2022, establish MAT resources and referrals systems in Portage County.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/ Agency
<p>Year 1: Collect baseline data on the number of Ohio jails that offer Medication Assisted Treatment (MAT) and at what capacity; including MAT upon release from jail.</p> <p>Continue to offer and expand MAT and recovery housing in various locations throughout Portage County.</p> <p>Explore feasibility of Substance Use Disorder screening and referrals to community health in the Emergency Departments and Urgent Cares.</p> <p>Explore feasibility for continuing care programs in the schools and community.</p>	December 31, 2020	Adult	Baseline: 1. 5 MAT providers in Portage County. 2. 9 Recovery Houses in Portage County.	Rob Young, Townhall II Karyn Kravetz, Mental Health and Recovery Board
Year 2: Continue efforts of years 1.	December 31, 2021			
Year 3: Continue efforts of years 1 and 2.	December 31, 2022			

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Unknown/No Data
- Not SHIP Identified

Resources to address strategy: MHRB, Child Advantage, Townhall II, FSC, Coleman, for profit providers.

Priority #1: Mental Health, Substance Use and Addiction

Strategy 8: Tobacco-free policies

Goal: Decrease tobacco use.

Objective: By December 31, 2022, implement tobacco-free policies in at least three Portage County multi-unit housing units and at least one school.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Collect baseline data on which organizations, multi-unit housing facilities, schools parks, and other businesses currently have tobacco-free policies.</p> <p>Provide education to residents to assist with the transition of the multi-unit housing complexes to a tobacco-free policy.</p>	December 31, 2020	Adult and youth	<p>1. Adult cigarette smoking: Decrease the percentage of adults that are current smokers by 2% (Baseline: 16%, 2019 Portage County CHNA)</p> <p>2. Youth cigarette smoking: Decrease the percentage of youth that are current smokers by 2% (Baseline: 7%, 2019 Portage County CHNA)</p>	Mike Anguilano, Kent City Health Department
<p>Year 2: Begin efforts to adopt tobacco-free policy in parks, fairgrounds, schools and other public locations.</p> <p>Implement a 100% tobacco-free policy in at least 1 Portage County School District.</p>	December 31, 2021		<p>3. Youth electronic vapor product use: Decrease the percentage of youth that are current electronic vapor product users by 2% (Baseline: 27%, 2019 Portage County CHNA)</p>	
<p>Year 3: Continue efforts of years 1 and 2. Target 2 additional multi-unit housing complexes and additional school districts to adopt a tobacco-free housing policy.</p>	December 31, 2022			
<p>Type of Strategy:</p> <p> <input checked="" type="checkbox"/> Social determinants of health <input type="checkbox"/> Healthcare system and access <input type="checkbox"/> Public health system, prevention and health behaviors <input type="checkbox"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown/No Data <input type="checkbox"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Kent City Health Department, ODH funding, Portage County Health District.</p>				

Priority #1: Mental Health, Substance Use and Addiction				
Strategy 9: Links to cessation support				
Goal: Decrease tobacco use.				
Objective: By December 31, 2022, increase participation in tobacco cessation program(s) by 15%.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Collect baseline data on the availability of evidence-based tobacco cessation programs in Portage County and the need for more.</p> <p>Promote and raise awareness of the tobacco cessation programs, as well as other resources, such as the <u>Ohio Tobacco Quit Line, My Life My Quit, etc.</u></p> <p>Increase participation in the tobacco cessation programs by 7% from baseline.</p> <p>Increase percentage of participants who enroll and attend the first class.</p> <p>Increase percentage of participants who attend the first class and complete the full 5-week cycle.</p> <p>Investigate barriers to nicotine replacement therapy access.</p>	December 31, 2020	Adult	<p>1. Adult cigarette smoking: Decrease the percentage of adults that are current smokers by 2% (Baseline: 16%, 2019 Portage County CHNA)</p> <p>2. Youth cigarette smoking: Decrease the percentage of youth that are current smokers by 2% (Baseline: 7%, 2019 Portage County CHNA)</p> <p>3. Youth electronic vapor product use: Decrease the percentage of youth that are current electronic vapor product users by 2% (Baseline: 27%, 2019 Portage County CHNA)</p>	<p>Mike Anguilano, Kent City Health Department</p> <p>Ali Mitchell, Portage County Health District</p> <p>UH Portage Medical Center</p>
<p>Year 2: Continue efforts of year 1. Look for opportunities to reduce out of pocket costs for cessation therapies. Ensure any new tobacco cessation programs are promoted.</p>	December 31, 2021			
<p>Year 3: Continue efforts of years 1 and 2.</p>	December 31, 2022			
<p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input type="radio"/> Healthcare system and access <input checked="" type="radio"/> Public health system, prevention and health behaviors <input type="radio"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, Kent City Health Department, ODH funding, Portage County Health District.</p>				

Priority: Mental Health, Substance Use and Addiction				
Strategy 10: Data sharing				
Goal: Increase data sharing among Portage County organizations.				
Objective: By December 31, 2022, create and implement a written plan that addresses data sharing for coordination and continuity of care among Portage County agencies.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Work with local agencies to create a multidisciplinary committee and assess the barriers of data sharing for coordination and continuity of care and identify those barriers.</p> <p>Aggregate data sharing is useful at the micro and macro level. At the micro level, providers need this information to effectively plan and implement care, especially in transitions from agency to agency, or level of care to the next. At the macro level, officials and administrators can use this data to make population health-level decisions about program effectiveness, risk areas, gaps in care. This information can also be helpful in requesting funding or making new collaboration decisions.</p>	December 31, 2020	Adult, youth, and child	Increase the number of Portage County agencies participating in data-sharing by 10% (Baseline: TBD by Portage County)	John Garrity, Mental Health and Recovery Board Bill Russell, Coleman
Year 2: Continue efforts from year 1.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2.	December 31, 2022			
Priority area(s) the strategy addresses:				
<input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input type="checkbox"/> Not SHIP Identified				
Strategy identified as likely to decrease disparities?				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown/No Data <input type="checkbox"/> Not SHIP Identified				
Resources to address strategy: Mental Health & Recovery Board of Portage County, community agencies, hospitals, Portage County Health District, law enforcement.				

Priority #2: Chronic Disease

Strategy 2: Nutrition prescriptions

Goal: Increase fruit and vegetable consumption.

Objective: Implement nutrition prescription program in Portage County by December 31, 2022.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Research nutrition prescription programs and determine the feasibility of implementing them in local health care organizations.</p> <p>Explore the feasibility of creating a food pharmacy program that accepts nutrition prescriptions.</p>	December 31, 2020	Adult	1. Adult fruit consumption: Decrease the percentage of adults who report consuming 0 servings of fruit per day by 2% (Baseline: 14%, 2019 Portage County CHNA)	Stephanie Schulda, AxessPointe Janet Raber, NEOMED SOAR
<p>Year 2: Explore funding opportunities for integrating nutrition prescription programs into primary care venues, such as hospital clinics and FQHCs.</p> <p>Partner with local farmers markets and discuss the possibility of redeeming nutrition prescriptions at participating markets.</p> <p>Continue efforts from year 1.</p>	December 31, 2021		2. Adult vegetable consumption: Decrease the percentage of adults who report consuming 0 servings of vegetables per day by 2% (Baseline: 4%, 2019 Portage County CHNA)	
<p>Year 3: Continue efforts from years 1 and 2.</p> <p>Implement nutrition prescription program in Portage County.</p>	December 31, 2022			

Type of Strategy:

<input type="radio"/> Social determinants of health	<input checked="" type="radio"/> Healthcare system and access
<input type="radio"/> Public health system, prevention and health behaviors	<input type="radio"/> Not SHIP Identified

Strategy identified as likely to decrease disparities?

Yes No Unknown/No Data Not SHIP Identified

Resources to address strategy: Various coalitions, AxessPointe, NEOMED

Priority #2: Chronic Disease				
Strategy 3: Healthy eating practices through fostering self-efficacy				
Goal: Increase fruit and vegetable consumption.				
Objective: By December 31, 2022, at least one Cooking Matters class (per quarter) will be implemented in Portage County.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/ Agency
<p>Year 1: Continue to implement the Share Our Strength's Cooking Matters program through the Kent State University Nutrition Outreach Program.</p> <p>Work with at least one new organization, such as a school, senior center, or community center, to pilot an additional 6-week course of the Cooking Matters program. Offer the program to adults, youth, and families.</p> <p>Begin to implement Healthy MunchBunch in Portage County Schools with at least one new school to participate in the program. Healthy MunchBunch is a lunch time fruit and vegetable education program to increase fruits and vegetable consumption. Program will be measured by the change in fruit and vegetable consumption before and after program initiation.</p> <p>Measure knowledge gained through evaluations.</p> <p>Search for grants and funding opportunities to support efforts.</p>	December 31, 2020	Adult and youth	<p>1. Adult fruit consumption: Decrease the percentage of adults who report consuming 0 servings of fruit per day by 2% (Baseline: 14%, 2019 Portage County CHNA)</p> <p>2. Adult vegetable consumption: Decrease the percentage of adults who report consuming 0 servings of vegetables per day by 2% (Baseline: 4%, 2019 Portage County CHNA)</p> <p>3. Youth fruit consumption: Decrease the percentage of youth who report consuming 0 servings of fruit per day by 2% (Baseline: 11%, 2019 Portage County CHNA)</p>	Natalie Caine-Bish, Kent State University Nutrition Outreach Program
<p>Year 2: Continue efforts to implement at least one Cooking Matters class per quarter.</p> <p>Utilizing the Cooking Matters at the Store framework, conduct quarterly grocery store tours by a Registered Dietitian or Health Educator in grocery stores throughout the county.</p> <p>Measure knowledge gained through evaluations.</p> <p>Measure knowledge gained through evaluations.</p> <p>Continue to increase the number of schools each quarter participating in Healthy MunchBunch Programming.</p> <p>Continued work on finding grants and funding opportunities to support efforts.</p>	December 31, 2021		<p>4. Youth vegetable consumption: Decrease the percentage of youth who report consuming 0 servings of vegetables per day by 2% (Baseline: 15%, 2019 Portage County CHNA)</p>	

Priority #2: Chronic Disease				
Strategy 5: Hypertension screening and follow up				
Goal: Promote hypertension management in adults.				
Objective: By December 31, 2022, increase hypertension medication adherence by to 85%.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Gather data on hypertension management interventions currently used in Portage County.</p> <p>Research barriers to medication adherence and best practices for hypertension management.</p> <p>Increase patient/community education on hypertension screening, treatment, and the importance of routine follow up with patients diagnosed with hypertension.</p>	December 31, 2020	Adult	Hypertension management: Increase the percentage of adults with hypertension who report currently taking medicine for their high blood pressure by 2% (Baseline: 82%, 2019 Portage County CHNA)	UH Portage Medical Center
<p>Year 2: Continue efforts from year 1. Increase awareness of hypertension screening, treatment, and follow up.</p>	December 31, 2021			
<p>Year 3: Continue efforts of years 1 and 2.</p>	December 31, 2022			
<p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input checked="" type="radio"/> Healthcare system and access <input type="radio"/> Public health system, prevention and health behaviors <input type="radio"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Various coalitions, strong evaluation and data, sustainable funding, new partnerships, University medicine/public health program partnerships.</p>				

Priority #2: Chronic Disease

Strategy 6: Increase awareness of nutrition/physical activity resources

Goal: Decrease obesity.

Objective: By December 31, 2022, increase the number of Portage County providers utilizing the resource guide by 15% from baseline.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue to offer nutrition/physical activity resources to physicians and develop a local community resource for physician use when referring their patients. Include items such as cost and transportation options in the guide.</p> <ul style="list-style-type: none"> Establish a list/network of Portage County healthcare providers and organizations that would benefit from having a healthy eating, activity living (HEAL) resource guide. Develop a marketing plan for the HEAL guide. Develop and implement a sustainability plan to keep resources updated. 	December 31, 2020	Adult, youth, and child	<ol style="list-style-type: none"> Adult obesity: Decrease the percentage of adults who were obese by 2% (Baseline: 38%, 2019 Portage County CHNA) Youth obesity: Decrease the percentage of youth who were obese by 2% (Baseline: 14%, 2019 Portage County CHNA) Child obesity: Decrease the percentage of children who were obese by 2% (Baseline: 17%, 2019 Portage County CHNA) 	Amy Lee, NEOMED
<p>Year 2: Continue efforts of year 1, including marketing and sustaining the guide. Implement the marketing plan so that at least 50% of the providers/organizations on the list are notified and have received information on the guide.</p>	December 31, 2021			
<p>Year 3: Continue efforts of years 1 and 2, including marketing and sustaining the guide. Increase the number of stakeholders receiving information on the guide to 80%.</p>	December 31, 2022			

Type of Strategy:

- | | |
|--|--|
| <input type="radio"/> Social determinants of health | <input type="radio"/> Healthcare system and access |
| <input checked="" type="radio"/> Public health system, prevention and health behaviors | <input checked="" type="radio"/> Not SHIP Identified |

Strategy identified as likely to decrease disparities?

- Yes No Unknown/No Data Not SHIP Identified

Resources to address strategy: Various coalitions, strong evaluation and data, sustainable funding, new partnerships, University medicine/public health program partnerships.

Priority #2: Chronic Disease 

Strategy 7: Prescriptions for health 

Goal: Increase participation and active engagement with parks and programs.

Objective: By December 31, 2022, increase participation in the Parks Rx program by 13% from the baseline.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue to implement the Parks Rx program in Portage County.</p> <p>Increase participation among mental health and addiction communities. Increase participation by 3% from baseline.</p>	December 31, 2020	All populations	1. Adult physical inactivity: Decrease the percentage adults reporting no moderate intensity aerobic exercise in the past week by 2% (Baseline: 43%, 2019 Portage County CHNA) 2. Adult physical inactivity: Decrease the percentage adults reporting no vigorous intensity aerobic exercise in the past week by 2% (Baseline: 75%, 2019 Portage County CHNA) 3. Baseline: 104 participants in the 2019 session (Portage Park District)	Andrea Metzler, Portage Park District
<p>Year 2: Continue to monitor participation, offer new options for programming and strengthen programming models that are working with participants. Look at barriers to participation and form partnerships to help remove those barriers. Increase overall participation by 8% from baseline.</p>	December 31, 2021			
<p>Year 3: Continue efforts, offer new options for programming and strengthen programming models that are working with participants. Look at barriers to participation and form partnerships to help remove those barriers. Increase overall participation by 13% from baseline.</p>	December 31, 2022			

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Not SHIP Identified

Resources to address strategy: Coalition of agencies, funding/technical capacity, Portage Park District.

Priority #2: Chronic Disease				
Strategy 8: Community gardens				
Goal: Increase fruit and vegetable accessibility.				
Objective: By December 31, 2022, maintain four community gardens in Portage County prioritizing food deserts.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Obtain baseline data regarding how many school districts, churches, and other community organizations currently have community gardens and where they are located, such as the Windham garden.</p> <p>Identify need for additional community gardens, focusing on food desert areas, and secure volunteers and/or Master Gardeners (ex: potential partnership with OSU Extension).</p>	December 31, 2020	Adult and youth	<p>1. Adult fruit consumption: Decrease the percentage of adults who report consuming 0 servings of fruit per day by 2% (Baseline: 14%, 2019 Portage County CHNA)</p> <p>2. Adult vegetable consumption: Decrease the percentage of adults who report consuming 0 servings of vegetables per day by 2% (Baseline: 4%, 2019 Portage County CHNA)</p>	UH Portage Medical Center
<p>Year 2: Research grants and funding opportunities to increase the number of community gardens. Develop a sustainability plan to maintain existing and future community gardens year-round.</p> <p>Market current and future community gardens within the county (i.e. location, offerings, etc.). Update the marketing information on an annual basis.</p> <p>Implement 1 new community garden.</p>	December 31, 2021		<p>3. Youth fruit consumption: Decrease the percentage of youth who report consuming 0 servings of fruit per day by 2% (Baseline: 11%, 2019 Portage County CHNA)</p> <p>4. Youth vegetable consumption: Decrease the percentage of youth who report consuming 0 servings of vegetables per day by 2% (Baseline: 15%, 2019 Portage County CHNA)</p>	
<p>Year 3: Continue efforts from year 2. Implement 1 new community gardens.</p> <p>Explore partnership opportunities to educate community members and families on gardening and healthy eating practices.</p>	December 31, 2022			
<p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input checked="" type="radio"/> Public health system, prevention and health behaviors <input type="radio"/> Healthcare system and access <input type="radio"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, funding/technical capacity, university medicine/public health program partnerships.</p>				

Priority #2: Chronic Disease

Strategy 9: Shared use (joint use agreements)

Goal: Increase physical activity.

Objective: Implement at least three shared-use agreements by December 31, 2022.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Collect baseline data on how many Portage County schools, churches, businesses and other organizations currently offer shared use of their facilities (gym, track, etc.).</p> <p>Create an inventory of known organizations that possess physical activity equipment, space, and other resources.</p>	December 31, 2020	Adult, youth, and child	1. Adult physical inactivity: Decrease the percentage adults reporting no moderate intensity aerobic exercise in the past week by 2% (Baseline: 43%, 2019 Portage County CHNA)	Amy Lee, NEOMED
<p>Year 2: Collaborate with local organizations to create a proposal for a shared-use agreement.</p> <p>Initiate contact with potential organizations from the inventory. Implement at least one shared-use agreement for community use. Publicize the agreement and its parameters.</p>	December 31, 2021		2. Adult physical inactivity: Decrease the percentage adults reporting no vigorous intensity aerobic exercise in the past week by 2% (Baseline: 75%, 2019 Portage County CHNA)	
<p>Year 3: Continue efforts from years 1 and 2.</p> <p>Implement at least 2 additional shared-use agreements for community use in Portage County.</p>	December 31, 2022		3. Youth physical inactivity: Decrease the percent of youth who did not participate in at least 60 minutes of physical activity on at least one day in the past seven days by 2% (Baseline: 8%, 2019 Portage County CHNA)	
			4. Physical activity among young children: Increase the percentage of children who participated in at least 60 minutes of physical activity on every day in the past seven days by 2% (Baseline: 41%, 2019 Portage County CHNA)	

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Unknown/No Data
- Not SHIP Identified

Resources to address strategy: Various coalitions, strong evaluation and data, new partnerships, University medicine/public health program partnerships.

Priority #2: Chronic Disease				
Strategy 10: Community fitness programs				
Goal: Increase physical activity.				
Objective: By December 31, 2022, increase participation in organized physical activities by 15% from baseline.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue to offer organized physical activities to adults, youth, and children. Obtain baseline data on the type, amount, and locations of organized physical activities in the county, and how many people participate.</p> <p>Identify the need for additional organized physical activities in specific locations. Target underserved areas of the county.</p> <p>Increase participation in community fitness programs by 3% from baseline.</p>	December 31, 2020	Adult	<p>1. Adult physical inactivity: Decrease the percentage adults reporting no moderate intensity aerobic exercise in the past week by 2% (Baseline: 43%, 2019 Portage County CHNA)</p> <p>2. Adult physical inactivity: Decrease the percentage adults reporting no vigorous intensity aerobic exercise in the past week by 2% (Baseline: 75%, 2019 Portage County CHNA)</p> <p>3. Youth physical inactivity: Decrease the percent of youth who did not participate in at least 60 minutes of physical activity on at least one day in the past seven days by 2% (Baseline: 8%, 2019 Portage County CHNA)</p>	Jackie Smallridge, Sequoia Wellness
<p>Year 2: Continue efforts from year 1.</p> <p>Implement additional organized physical activities. Target underserved areas of the county.</p> <p>Increase participation in community fitness programs by 3% from year 1 baseline.</p>	December 31, 2021		<p>4. Physical activity among young children: Increase the percentage of children who participated in at least 60 minutes of physical activity on every day in the past seven days by 2% (Baseline: 41%, 2019 Portage County CHNA)</p>	
<p>Year 3: Continue efforts from years 1 and 2. Increase participation in community fitness programs by 3% from year 2 baseline.</p>	December 31, 2022			
<p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input type="radio"/> Healthcare system and access <input checked="" type="radio"/> Public health system, prevention and health behaviors <input type="radio"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, funding/technical capacity, university medicine/public health program partnerships.</p>				

Priority 3: Maternal, Infant, and Child Health

Priority #3: Maternal, Infant, and Child Health

Strategy 1: Reproductive health interventions

Goal: Increase sustainability of women's reproductive health and wellness services.

Objective: By December 31, 2022, implement a women's reproductive health and wellness program to increase the use of reproductive health interventions for Medicaid-eligible residents.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
Year 1: Implement activities to support infrastructure and sustainability of a women's reproductive health and wellness program. Activities to include insurance of billing infrastructure, Medicaid enrollment, direct health care services (family planning and prevention services, STI testing, pregnancy testing, and referrals).	December 31, 2020	Adults/Teens	1. Two-thirds (66%) of women ages 21-65 had a Pap smear in the past three years. (2019 Portage County CHNA) 2. One in five (20%) Portage County women had been pregnant in the past five years. (2019 Portage County CHNA) 3. Two-thirds (66%) of women ages 21-65 had a Pap smear in the past three years. (2019 Portage County CHNA)	Rosemary Ferraro, Portage County Health District Stephanie Schulda, AccessPointe
Year 2: Continue efforts from year 1.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2.	December 31, 2022		4. Thinking back to their last pregnancy, 48% of women wanted to be pregnant then, 32% wanted to be pregnant sooner, 6% did not want to be pregnant then or any time in the future, 6% wanted to be pregnant later, and 9% of women did not recall. (2019 Portage County CHNA)	
Type of Strategy:				
<input checked="" type="radio"/> Social determinants of health <input type="radio"/> Healthcare system and access <input type="radio"/> Public health system, prevention and health behaviors <input type="radio"/> Not SHIP Identified				
Strategy identified as likely to decrease disparities?				
<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified				
Resources to address strategy: Coalition of agencies, funding/technical capacity, UH Portage Medical Center.				

Priority #3: Maternal, Infant and Child Health

Strategy 2: Home visiting programs that begin prenatally

Goal: Improve pregnancy and birth outcomes.

Objective: By December 31, 2022, implement a prenatal/postpartum home visiting program to reduce preterm birth, low birth weight, and infant mortality.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
Year 1: Work with local agencies and health care organizations to develop a home visiting program in Portage County that provides support to pregnant mothers to achieve healthier pregnancies and births and stronger child development to ensure babies reach their first birthdays.	December 31, 2020	Adults/Teens	1. Total preterm births: Decrease the percentage of live births that are preterm (<37 weeks gestation) by 2% (Baseline: 9%, Ohio Department of Health, 2018)	Rosemary Ferraro, Portage County Health District
Year 2: Continue efforts from year 1. Work with local agencies to identify and enroll pregnant women into the program.	December 31, 2021		2. Low birth weight: Decrease the percentage of births in which the newborn weighed <2,500 grams by 2% (Baseline: 8%, Ohio Department of Health, 2018)	
Year 3: Continue efforts from years 1 and 2.	December 31, 2022		3. Infant mortality: Decrease the rate of infant deaths per 1,000 live births by 1 (Baseline: 8.1, Ohio Department of Health Infant Mortality Data: General Findings, 2017) 4. Increase the number of women who had a prenatal appointment in the first 3 months by 2% (Baseline: 88%, 2019 Portage County CHNA)	

Type of Strategy:
 Social determinants of health
 Public health system, prevention and health behaviors
 Healthcare system and access
 Not SHIP Identified

Strategy identified as likely to decrease disparities?
 Yes No Unknown/No Data Not SHIP Identified

Resources to address strategy: Coalition of agencies, funding/technical capacity.

Priority #3: Maternal, Infant and Child Health

Strategy 3: Increase enrollment in WIC program

Goal: Improve overall health outcomes and prevent nutrition-related illness among at-risk women, infants and children.

Objective: By December 31, 2022, increase WIC enrollment by 20%.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Conduct an assessment on WIC enrollment in the past 10 years and identify barriers to enrollment.</p> <p>Determine strategies to increase awareness and accessibility of WIC.</p>	December 31, 2020	Adult	<p>1. Total preterm births: Decrease the percentage of live births that are preterm (<37 weeks gestation) by 2% (Baseline: 9%, Ohio Department of Health, 2018)</p> <p>2. Low birth weight: Decrease the percentage of births in which the newborn weighed <2,500 grams by 2% (Baseline: 8%, Ohio Department of Health, 2018)</p> <p>3. Infant mortality: Decrease the rate of infant deaths per 1,000 live births by 1 (Baseline: 8.1, Ohio Department of Health Infant Mortality Data: General Findings, 2017)</p> <p>4. Decrease the number of women never breastfed by 2% (Baseline: 13%, 2019 Portage County CHNA)</p> <p>5. Decrease the rate of children classified as obese by 2%. Baseline: 17% of children were classified as obese (2019 Portage County CHNA)</p> <p>6. Decrease the rate of children 0-5 having two or more health conditions by 2%. Baseline: 17% children 0-5 had two or more health conditions compared to State rate of 7% (2019 Portage County CHNA)</p>	Amy Cooper, WIC
<p>Year 2: Continue efforts from year 1.</p> <p>Implement strategies to increase awareness and accessibility of WIC.</p>	December 31, 2021			
<p>Year 3: Continue efforts from years 1 and 2.</p>	December 31, 2022			

Type of Strategy:
 Social determinants of health
 Public health system, prevention and health behaviors
 Healthcare system and access
 Not SHIP Identified

Strategy identified as likely to decrease disparities?
 Yes No Unknown/No Data Not SHIP Identified

Resources to address strategy: Portage County WIC.

Priority #3: Maternal, Infant and Child Health

Strategy 4: Provide referrals/resources to all patients on health insurance access to ensure reproductive health care.

Goal: Improve birth outcomes.

Objective: By December 31, 2022, increase number of client referrals by 25%.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Work with community health workers (CHWs), home visitors, or patient navigators to connect women of childbearing age to health insurance, resources, and a medical home.</p> <p>Identify and mitigate barriers to care.</p> <p>Establish baseline for client referrals.</p>	December 31, 2020	Adult	All self-pay patients are referred to a CAC: 7% of parents uninsured. 29% do not have insurance. No individual data for women/pregnant or women/children. Only divided by family. (AxessPointe)	Stephanie Schulda, Cinnamon Young, and Sara Russo, AxessPointe
<p>Year 2: Increase efforts from year 1. Increase client referrals by 25%.</p>	December 31, 2021			
<p>Year 3: Increase efforts from years 1 and 2.</p>	December 31, 2022			
<p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input type="radio"/> Public health system, prevention and health behaviors <input checked="" type="radio"/> Healthcare system and access <input type="radio"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown/No Data <input type="radio"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, funding/technical capacity.</p>				

Priority #3: Maternal, Infant and Child Health

Strategy 5: Create and implement a Safe Kids Coalition plan

Goal: Reduce child injury.

Objective: By December 31, 2022, create and implement a plan with targeted activities for the Safe Kids coalition.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue to implement the Safe Kids coalition.</p> <p>Work with coalition members to create a plan to guide coalition planning, outreach and activities. Include strategies such as Safe Route to School, Child Passenger Safety, Safe Sleep, etc.</p>	December 31, 2020	Birth to 18 years of age	Reduce the number of nonfatal unintentional injuries among children ages 0-16 years by 5% (Baseline: 3,342 injuries in 2017, 2013-2018 Child Injury Review.	Ali Mitchell, Portage County Health District
<p>Year 2: Continue efforts from year 1. Implement strategies from the Safe Kids Coalition plan.</p>	December 31, 2021			
<p>Year 3: Continue efforts from years 1 and 2. Implement strategies from the Safe Kids Coalition plan.</p>	December 31, 2022			

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Unknown/No Data
- Not SHIP Identified

Resources to address strategy: Safe Kids Coalition, funding/technical capacity.

Cross-Cutting Strategies (Strategies that Address Multiple Priorities)

Social Determinants of Health

Cross-Cutting Factor: Social Determinants of Health				
Strategy 1: Home improvement loans and grants				
Goal: Decrease severe housing problems.				
Objective: By December 31, 2022, increase the number residents obtaining home improvement loans or grants by 5%.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
Year 1: Work with the Portage County Home Improvement Program to collect baseline data on the number of home improvement loans and grant opportunities available to Portage County residents, including local, state, and federal loans or grants.	December 31, 2020	Adult	Severe housing problems: Decrease the percentage of households that have one or more of the following problems: 1) housing unit lacks complete kitchen facilities; 2) housing unit lacks complete plumbing facilities; 3) household is severely overcrowded; and 4) monthly housing costs, including utilities, exceed 50% of monthly income by 2% (Baseline: 15%, 2019 County Health Rankings)	Brad Cromes, Portage County Treasurer
Year 2: Create a marketing plan to promote the housing program to Portage County residents, targeting economically disadvantaged communities. Provide technical assistance to residents throughout the process of procuring a home improvement loan or grant. Work with the Portage County Home Improvement Program to collect baseline data on the number residents obtaining home improvement loans or grants.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2. Increase the number residents obtaining home improvement loans or grants by 5%.	December 31, 2022			
Priority area(s) the strategy addresses:				
<input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input type="checkbox"/> Not SHIP Identified				
Strategy identified as likely to decrease disparities?				
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown/No Data <input type="checkbox"/> Not SHIP Identified				
Resources to address strategy: Portage County Treasurer's Office, various coalitions, Ohio Department of Commerce				

Cross-Cutting Factor: Social Determinants of Health

Strategy 2: Service-enriched housing

Goal: Increase economic self-sufficiency

Objective: By December 31, 2022, increase PMHA client’s ability to support their economic independence and stability.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Work with local service providers, partner agencies and other community resources to provide support to public housing residents to achieve economic independence and stability through education, employment, and financial literacy programs.</p> <p>Assist public housing residents to address barriers with access to internet, transportation, and child care services.</p> <p>Serve 50 public housing residents with connection to self-sufficiency goals.</p>	December 31, 2020	Adult	YEAR 1: Public housing residents served: 50 YEAR 2: Public housing residents served: 75 (cumulative) YEAR 3: Public housing residents served: 100 (cumulative)	Carolyn Budd and Sabrina Moss, Portage Metropolitan Housing Authority
<p>Year 2: Continue efforts from year 1.</p> <p>Serve and additional 25 public housing residents with connection to self-sufficiency goals.</p>	December 31, 2021			
<p>Year 3: Continue efforts from years 1 and 2.</p> <p>Serve and additional 25 public housing residents with connection to self-sufficiency goals.</p>	December 31, 2022			

Priority area(s) the strategy addresses:
 Mental Health, Substance Use and Addiction
 Chronic Disease
 Maternal, Infant and Child Health
 Not SHIP Identified

Strategy identified as likely to decrease disparities?
 Yes
 No
 Unknown/No Data
 Not SHIP Identified

Resources to address strategy: Portage Metro Housing Authority, various coalitions

Cross-Cutting Factor: Social Determinants of Health

Strategy 3: Outreach to increase financial stability through free tax preparation services.

Goal: Decrease poverty.

Objective: By December 31, 2022, increase use of free tax preparation services available to Portage County residents.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
Year 1: Collaborate with county agencies, such as United Way, to increase awareness about the myfreetaxes.com program and how it can reduce the tax burden for low-to-moderate income working people, and who is eligible.	December 31, 2020	Adult	Poverty: Decrease the percentage of individuals who live in households at or below the poverty threshold by 2% (Baseline: 15%, 2013-2017 U.S. Census Bureau, American Community Survey 5-year Estimates)	Maureen Gebhardt and Bill Childers, United Way
Year 2: Continue efforts from year 1. Implement awareness strategies identified in Year 1.	December 31, 2021			
Year 3: Continue efforts from year 1 and year 2.	December 31, 2022			

Priority area(s) the strategy addresses:

- Mental Health, Substance Use and Addiction
 Chronic Disease
 Maternal, Infant and Child Health
 Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
 No
 Unknown/No Data
 Not SHIP Identified

Resources to address strategy: United Way, various coalitions

Cross-Cutting Factor: Social Determinants of Health

Strategy 4 Financial literacy

Goal: Decrease poverty.

Objective: By December 31, 2022, offer multiple financial literacy classes throughout the year in Portage County.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue to implement financial literacy classes in Portage County.</p> <p>Expand the frequency of the classes and offer them annually. Target economically disadvantaged populations and schools.</p> <p>Provide Bridges Out of Poverty to 2 community agencies who serve individuals/families who live in households at or below poverty level.</p> <p>Provide 1 session of the Getting Ahead program to adult clients through the Children’s Advantage Family Center.</p> <p>Provide 1 session1 of the R-Rules program through the Children’s Advantage Family Center and in Portage County schools.</p>	December 31, 2020	Adult	Poverty: Decrease the percentage of individuals who live in households at or below the poverty threshold by 2% (Baseline: 15%, 2013-2017 U.S. Census Bureau, American Community Survey 5-year Estimates)	<p>Brad Cromes, Portage County Treasurer</p> <p>Nicole Thomas, Children’s Advantage</p>
Year 2: Continue efforts from year 1.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2.	December 31, 2022			
<p>Priority area(s) the strategy addresses:</p> <p> <input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input checked="" type="checkbox"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown/No Data <input checked="" type="checkbox"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, Funding/technical capacity, Portage County Treasurer Office, Children’s Advantage</p>				

Cross-Cutting Factor: Social Determinants of Health

Strategy 5: Increase transportation through a county transportation plan

Goal: Increase access to transportation

Objective: By December 31, 2022, create a strategic plan to address transportation needs.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
Year 1: Work with members of the Access to Care Coalition to review the 2018 transportation assessment and identify themes, needs and barriers.	December 31, 2020	Adult	Decrease the percentage of residents who reported having transportation problems monthly by 5% (Baseline: 58%, 2018 Portage County Transportation Assessment).	Mandy Berardinelli, Ohio Means Jobs
Year 1: Continue efforts from year 1. Work with members of the Access to Care Coalition to create a strategic plan to address transportation needs, as well as lack of awareness of current transportation opportunities.	December 31, 2021			
Year 1: Continue efforts from year 2. Implement strategies from the strategic plan and conduct another transportation assessment.	December 31, 2022			

Priority area(s) the strategy addresses:

- Mental Health, Substance Use and Addiction
 Chronic Disease
 Maternal, Infant and Child Health
 Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
 No
 Unknown/No Data
 Not SHIP Identified

Resources to address strategy: Coalition of agencies, funding/technical capacity.

Healthcare System and Access

Cross-Cutting Factor: Healthcare System and Access				
Strategy 1: School-based health centers (SBHC)				
Goal: Increase access to health care.				
Objective: By December 31, 2022, pilot a SBHC in at least one Portage County school district.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
Year 1: Research school-based health centers (SBHC) and explore the feasibility of implementing one in Portage County.	December 31, 2020	Youth and children	1. High school graduation: Increase the four-year graduation rate: Percent of incoming 9th graders who graduate in 4 years from a high school with a regular degree by 5% (Baseline: TBD by Portage County School Districts) 2. 67% age 18-24 have insurance. (2019 Portage County CHNA)	Randy Griffith, Maplewood Career Center
Year 2: Pilot a school-based health center within at least one school in Portage County.	December 31, 2021			
Year 3: Continue efforts from years 1 and 2.	December 31, 2022			
Priority area(s) the strategy addresses:				
<input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input type="checkbox"/> Not SHIP Identified				
Strategy identified as likely to decrease disparities?				
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown/No Data <input type="checkbox"/> Not SHIP Identified				
Resources to address strategy: Akron Children's Hospital				

Cross-Cutting Factor: Healthcare System and Access

Strategy 2: Health transportation outreach

Goal: Increase access to transportation

Objective: By December 31, 2022, expand transportation training to organizations serving Portage County residents.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue collaborating for annual all-day health transportation training to local organizations.</p> <p>Collaborate to create condensed version of annual training to increase staff trained.</p>	December 31, 2020	Adult	<p>1. Decrease the percentage of residents who reported having transportation problems monthly by 5% (Baseline: 58%, 2018 Portage County Transportation Assessment).</p> <p>2. Decrease percentage of residents who reported having transportation problems monthly by 5% (Baseline: 58%, 2018 Portage County Transportation Assessment).</p> <p>3. Portage County Non-Emergency Transportation (NET) usage rates (Baseline from Christine from 2018)</p>	<p>Clayton Popik, PARTA</p> <p>Christine Herra, Job and Family Services</p> <p>Karen Towne, Portage County Health District</p>
Year 2: Pilot condensed training to 3 organizations.	December 31, 2021			
Year 3: Expand efforts from year 2.	December 31, 2022			

Priority area(s) the strategy addresses:

- Mental Health, Substance Use and Addiction
 Chronic Disease
 Maternal, Infant and Child Health
 Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
 No
 Unknown/No Data
 Not SHIP Identified

Resources to address strategy: Coalition of agencies, funding/technical capacity.

Cross-Cutting Factor: Healthcare System and Access				
Strategy 3: Health insurance enrollment and outreach				
Goal: Increase health insurance enrollment.				
Objective: Enroll 15% of identified uninsured residents into a health insurance option by December 31, 2022.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Coordinate with community agencies to identify uninsured residents.</p> <p>Refer the uninsured resident and enroll them in the Health Insurance Marketplace, Medicare, Medicaid, or another health insurance option.</p> <p>Enroll 5% of identified uninsured residents into a health insurance option.</p>	December 31, 2020	Adults	Uninsured adults: Decrease the percent of adults who are uninsured by 1% (Baseline: 6%, 2019 Portage County CHNA)	Stephanie Schulda/ Cinnamon Young, AxessPointe
<p>Year 2: Continue efforts from year 1. Enroll an additional 5% of identified uninsured residents into a health insurance option.</p>	December 31, 2021			
<p>Year 3: Continue efforts from years 1 and 2. Enroll an additional 5% of identified uninsured residents into a health insurance option.</p>	December 31, 2022			
<p>Priority area(s) the strategy addresses:</p> <p> <input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input type="checkbox"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown/No Data <input type="checkbox"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, funding/technical capacity, university medicine/public health program partnerships.</p>				

Cross-Cutting Factor: Healthcare System and Access

Strategy 4: Expand SOAR Student-Run Free Clinic

Goal: Increase access to health care.

Objective: December 31, 2022, increase the number of days the SOAR Free Clinic is open to a total of six (6) days per month.

Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Continue to implement the SOAR Free Clinic. Expand hours of the SOAR clinic from three to four Saturdays each month.</p> <p>Promote health services of SOAR in underserved communities.</p>	December 31, 2020	Adults	Decrease the number of adults that did not receive medical care in the past 12 months due to cost/no insurance by 2% (Baseline: 29%, 2019 Portage County CHNA)	Janet Raber and Lacy Madison, SOAR
<p>Year 2: Continue efforts of year 1. Expand services with integration of Behavioral Health Counseling from Coleman at the clinics.</p> <p>Expand Social Determinants of Health screening and referral and tracking.</p> <p>Investigate the feasibility of Telemedicine.</p> <p>Investigate the feasibility of EMR.</p> <p>Add Physician Assistant Students from University of Mount Union to participate in clinic visits.</p>	December 31, 2021			
<p>Year 3: Continue efforts of years 1 and 2.</p> <p>Purchase equipment, develop curriculum/training and pilot Telemedicine at SOAR</p> <p>Provide specialty clinic days, once a month</p> <p>Develop a referral base for diagnostics and specialties at free or reduced cost.</p>	December 31, 2022			
<p>Priority area(s) the strategy addresses:</p> <p> <input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input checked="" type="checkbox"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown/No Data <input checked="" type="checkbox"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, funding/technical capacity, university medicine/public health program partnerships.</p>				

Health Equity

Cross-Cutting Factor: Health Equity				
Strategy 1: Implicit bias training				
Goal: Decrease discrimination				
Objective: By December 31, 2022, implement at least one implicit bias training per quarter.				
Action Step	Timeline	Priority Population	Indicator(s) to measure impact of strategy:	Lead Contact/Agency
<p>Year 1: Work with local stakeholders to create a formal implicit bias training detailing the association between implicit bias and inequity.</p> <p>Pilot the training in one location, such as a school, church, healthcare organization, local business or social service agency. Evaluate the training and make necessary changes.</p>	December 31, 2020	Adult	TBD by Portage County	Mike Thompson, Family and Community Services
<p>Year 2: Continue efforts from year 1. Implement the training at least once per quarter.</p>	December 31, 2021			
<p>Year 3: Continue efforts from years 1 and 2. Implement the training at least once per quarter.</p>	December 31, 2022			
<p>Priority area(s) the strategy addresses:</p> <p> <input checked="" type="checkbox"/> Mental Health, Substance Use and Addiction <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Maternal, Infant and Child Health <input checked="" type="checkbox"/> Not SHIP Identified </p>				
<p>Strategy identified as likely to decrease disparities?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown/No Data <input checked="" type="checkbox"/> Not SHIP Identified </p>				
<p>Resources to address strategy: Coalition of agencies, funding/technical capacity, university medicine/public health program partnerships.</p>				