

**City of Carson City
Agenda Report**

Date Submitted: June 8, 2012

Agenda Date Requested: June 21, 2012

Time Requested: 15 Minutes

To: Carson City Board of Health
From: Health & Human Services (Marena Works)

Subject Title: For Possible Action: Presentation with possible action to accept the Carson City Community Health Improvement Plan.

Staff Summary: A local health department cannot be effective unilaterally. Accreditation standards would have us partner with other sectors and organizations to plan and share responsibility for community health improvement. The Community Health Improvement Plan (CHIP) shows participation by community partners', contains data from the Community Health Assessment (CHA), has proof that stakeholder discussions were held and shows evidence that participants developed a set of priority community health issues. While this is a five year plan, the CHIP is a living document and it is expected that addendums will be continually added during the five year time frame. The purpose of this plan is to target certain health and healthy community indicators to focus on with the intent of showing an improvement in these areas; this having the overall effect of a healthier community. Additionally, the Board of Health has a responsibility to protect and preserve the health of the population within its jurisdiction. The adoption of the CHIP gives direction to put health improvement plans into place.

Type of Action Requested: (check one)
 Resolution Ordinance
 Formal Action/Motion Other (Specify) Information Only

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: I move to accept the Carson City Community Health Improvement Plan.

Explanation for Recommended Board Action: While a local health department is responsible for protecting and promoting the health of the community it serves, it cannot act alone and must partner with other stakeholders to improve the health of the community. This document shows a collaborative planning process and aids those involved to have a shared sense of ownership and responsibility for the plan's success. This plan will provide guidance to our health department, our partners and stakeholders.

Applicable Statue, Code, Policy, Rule or Regulation: N/A

Fiscal Impact: N/A


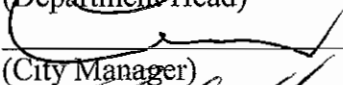
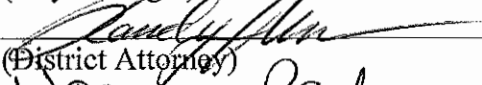
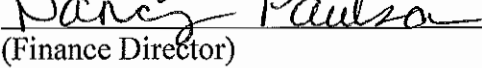
Explanation of Impact: N/A

Funding Source: N/A

Alternatives:

Supporting Material: Community Health Improvement Plan

Prepared By: Marena Works, MSN, MPH, APN

Reviewed By:  Date: 6/12/12
(Department Head)
 Date: 6/12/12
(City Manager)
 Date: 6/12/12
(District Attorney)
 Date: 6/12/12
(Finance Director)

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay
2) _____ _____

(Vote Recorded By)

Get Healthy Carson City!



www.carson.org

A 2020 Health Action Plan

A Community Health Improvement Plan

June 2012

Version 1.0

www.GetHealthyCarsonCity.org

cchhsinfo@carson.org

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Carson City Health Action Planning Committee

Stacey Giomi Carson City Fire Department
Sam Santillo Carson City School District
Diane Rush Carson Tahoe Health
Jim Peckham Friends in Service Helping (FISH)
Robert Galloway Nevada Appeal
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Vicki Hamilton Silver State Charter Middle and High Schools

Carson City Health and Human Services

Marena Works Director
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Dustin Boothe Epidemiologist
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Valerie Cahape Public Health Program Specialist

Partner Organizations (as of June 2012)

Alicia Hansen, public health consultant
Carson Area Wellness Association (CAWA)
Carson City Community Development
Carson City Fire Department
Carson City Health and Human Services
Carson City Juvenile Probation Department
Carson City Parks and Recreation
Carson City School District
Carson Mental Health Center
Carson Tahoe Health (CTH)
CTH Behavioral Health Services
CTH Diabetes Education
CTH MOM's Clinic
CTH Women's Health Institute
Community Counseling Center
Fitness for \$10
Friends in Service Helping (FISH)
Katie Roberts, D.M.V.
Lone Mountain Veterinary Hospital

Muscle Powered Carson City
Nevada Appeal
Nevada Public Health Foundation (NPHF)
Northern Nevada Dental Association
Partnership Carson City (PCC)
Physician Select Management
Ron Wood Family Resource Center
The Greenhouse Project
Thomas Gibbons, O.D.
Safe Routes to School
Sierra Dietetics
Sierra Family Health Center; Nevada Health Centers, Inc.
Sierra Surgery Hospital
Silver State Charter Schools
Soroptimist International of Carson City
United Latino Communities (ULC)
Western Nevada College

(This list will be updated as organizations commit to taking action.

*For the latest listing of organizations partnering on the "Get Healthy Carson City!" 2020 Action Plan,
go to www.GetHealthyCarsonCity.org/.)*

Table of Contents

Introduction	7
Background.....	7
Prevention Happens at All Levels.....	9
What You Can Do!	10
Priority Areas	11
Priority I: Access to Health Information and Health Care	13
Improving Access to Health Information – Health Resources in Carson City.....	13
Improving Access to Health Information – Health Data from Community Partners.....	17
Improving Access to Health Care – Oral Health	19
Improving Access to Health Care – Mental Health	21
Priority II: Chronic Disease	23
Diabetes (Type II).....	23
Smoking/Tobacco Cessation.....	25
Obesity.....	27
Priority III: Lifestyle and Behaviors.....	29
Teenage Pregnancy.....	29
Sexually Transmitted Diseases.....	31
Alcohol and Substance Abuse.....	33
Pedestrian and Bicycle Safety and Access.....	35
References.....	37
Appendix.....	41
Healthy People 2020 Objectives for Health Action Plan	41
Glossary of Terms and Abbreviations.....	45
Resources.....	47

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Introduction

Background

Public health is about protecting the health of the entire population. It is “the science of protecting and improving the health of communities through education, promotion of healthy lifestyles, and research for disease and injury prevention” (Association of Schools of Public Health, 2011). The 10 Essential Public Health Services, which provide a framework for what public health activities should be undertaken in all communities, are listed on page 46 in the Appendix.

The mission of Carson City Health and Human Services (CCHHS) is to protect and improve the quality of life for our community through disease prevention, education and support services. While governmental public health agencies, such as CCHHS, are a major contributor to the public health system, they are by no means the only provider. The public health system includes partners from “all public, private, and voluntary entities that contribute to the delivery of essential public health services within a jurisdiction.” The public health system consists of a broad spectrum of community members including:

- | | |
|---|---|
| Public health agencies | Public safety agencies |
| Healthcare providers | Recreation and arts-related organizations |
| Human service and charity organizations | Economic and philanthropic organizations |
| Education and youth development organizations | Environmental agencies or organizations |

(Centers for Disease Control and Prevention, 2007.)

In the fall of 2010, Carson City Health and Human Services led the community in the completion of the Centers for Disease Control and Prevention’s (CDC) local assessment instrument for conducting the *National Public Health Performance Standards Program (NPHPSP)* in Carson City. The completion of the assessment led to the development of a Carson City Health Action Planning Committee (“Get Healthy Carson City!”). The Committee consisted of a group of individuals who had participated in the NPHPSP and was tasked with completing a Community Health Improvement Plan (CHIP) that would serve as a long-term, systematic plan describing how the community would work together to improve the health of Carson City.

The Committee gathered and reviewed community health information, which included various governmental and non-governmental sources and information accumulated from the NPHPSP assessment. This review led the Committee to examine trends and issues that emerged and could be targeted to improve the health of residents in Carson City.

The Committee worked to identify priority areas for a health action plan by utilizing the following guiding questions:

Should we do it?	Appropriateness
How important is it?	Relevance
Can we do it?	Feasibility
What will we get out of it?	Impact

The draft Action Plan was presented to the community in January 2012 for feedback and to request commitment to action steps from the community partners. After a review of community feedback and a revision of objectives and timelines, the Committee finalized the CHIP, which was presented and approved at the June 21, 2012, Carson City Board of Health meeting.

Healthy People 2020

Healthy People is an initiative developed by a workgroup of federal agencies that provides science-based, 10-year national objectives for improving the health of all Americans. For three decades, *Healthy People* has established benchmarks and monitored progress over time in order to:

- Encourage collaborations across sectors
- Guide individuals toward making informed health decisions
- Measure the impact of prevention activities

Healthy People 2020 (HP2020), released in December of 2010, provides renewed focus on reducing health disparities through the determinants of health approach for health promotion and disease prevention. The HP2020 vision strives to identify nationwide health improvement priorities where action must be taken to achieve better health by the year 2020.

To align with national standards of health, the “Get Healthy Carson City!” action plan has used HP2020 objectives to organize and inspire local outcome objectives and action steps. Refer to the “Healthy People 2020 Objectives for Health Action Plan” section on [page 40](#) in the Appendix to see the specific HP2020 objectives that have been adopted for Carson City. These national objectives have either inspired Carson City’s goals, or are included as guidance for continued health improvement. More information on each of these, including links to evidence-based strategies for improvement, can be accessed online at www.healthypeople.gov/2020/topicsobjectives2020/.

Prevention Happens at All Levels

For each of the Priority Areas we present, the strategies follow the *Spectrum of Prevention* model (Contra Costa County, 2011). This model was originally developed by Larry Cohen in the 1980s for the Contra Costa Health Services Prevention Program in Contra Costa, California. The *Spectrum* expands prevention efforts beyond education models by promoting a multifaceted approach. The *Spectrum* has seven levels of prevention outlined as follows:

Level of Spectrum	Definition of Level
1. Strengthening Individual Knowledge and Skills	Enhancing an individual's capacity of preventing injury or illness and promoting health and safety
2. Promoting Community Education	Reaching groups of people with information and resources to promote health and safety
3. Educating Providers	Informing providers who will transmit skills and knowledge to others
4. Fostering Coalition and Networks	Bringing together groups and individuals for broader goals and greater impact
5. Mobilizing Neighborhoods and Community	Meeting with communities and sharing agendas, prioritizing community concerns as well as health department goals
6. Changing Organizational Practices	Adopting regulations and shaping norms to improve health and safety
7. Influencing Policy and Legislation	Developing strategies to change laws and policies to influence outcomes

These levels are complementary. By influencing and sustaining change at each level of the *Spectrum* instead of focusing on any single activity, greater effectiveness is achieved. As steps are taken to achieve each objective and as new strategies are adopted to reach our goals, it is important to try to take action at each of the seven levels of the *Spectrum* in order to create long-term, sustainable change.

What You Can Do!

The Committee realized we couldn't and shouldn't act alone. This "Get Healthy Carson City!" health action plan is an invitation to all Carson City residents and stakeholders. We cordially invite your participation at one or more of the *Spectrum* levels above. The Committee members and multiple community partners have already committed to action for improving each of the three priority areas. For each community issue, an "Adopt a Strategy" section has also been included to suggest and encourage additional activities towards meeting the overall goal.

We invite you to ask yourself the following questions and consider becoming involved with organized health improvement in Carson City:

What is your organization already doing to meet these goals?

Would your organization be interested in partnering to meet these goals?

What are additional strategies that could be adopted?

If you or your organization is interested in being included in the "Get Healthy Carson City!" health action plan, or for more information, please send us an email at cchhsinfo@carson.org.

Taking Action

This is a document that will grow, change and adapt as our community grows, changes and adapts. If you or your organization would like to be included in this community health action plan, we can add your name to the document. Please email cchhsinfo@carson.org and include your contact information and the Community Issue or Action Step in which you would like to be involved. A community lead has been identified for each of the "Action Steps," and this person will coordinate volunteers for each of these areas.

In order to make sure true progress is being made towards improving Carson City's health, it is important to set mileposts that create targets for accountability. These targets should be SMART (Specific, Measurable, Achievable, Realistic, Time-phased). The community lead will work with volunteers to create SMART objectives for each activity, and these mileposts will be included with the health action plan in a separate document which will be available by then end of 2012. (For more information on SMART Objectives, read the CDC's overview at <http://www.cdc.gov/healthyyouth/evaluation/pdf/brief3b.pdf> .)

The Committee and community leads will continue to meet regularly. Progress will be reviewed at least annually by the Committee and the action plan will be updated every three years to show how our community is improving the health of the citizens of Carson City. For the most current updates to the plan, plus an up-to-date list of involved partners, please visit www.GetHealthyCarsonCity.org

Carson City, let's get healthy together!

Priority Areas

Access to Health Information and Health Care

- Improving Access to Health Information
 - Health Resources in Carson City
 - Health Data from Community Partners
- Improving Access to Health Care
 - Oral Health
 - Mental Health

Chronic Disease Prevention

- Type II Diabetes
- Smoking/Tobacco Cessation
- Obesity

Lifestyle and Behaviors

- Teen Pregnancy
- Sexually Transmitted Diseases
- Alcohol and Substance Abuse
- Pedestrian and Bicycle Safety and Access

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Priority I: Access to Health Information and Health Care

Community Issue A: Improving Access to Health Information – Health Resources in Carson City

Justification:

“Health communication and health information technology are central to health care, public health, and the way our society views health. These processes make up the context and the ways professionals and the public search for, understand, and use health information, significantly impacting their health decisions and actions” (U.S. Department of Health and Human Services, 2011). During the course of the planning and data compilation process for the “2020 Health Action Plan,” workgroup members began to recognize gaps in their own knowledge regarding health information and resources in Carson City. This was especially true during discussions of services provided to low-income, uninsured or underinsured residents. In order to adequately address the health needs of the community and make improvements, a centralized, complete and up-to-date inventory of local health services is needed.

Outcome Objectives:

- Designate a website and supplementary materials that lists and links all community health resources in Carson City.
- Create a strategic plan that defines the management, marketing, and updating of a community health resource website.
- Uncover gaps in coverage and overlapping services through a review of the compilation of local health resources.

Action Steps:

- Set up a committee or coalition to develop and manage the survey process and identify gaps in coverage and overlapping services.
 - Lead organization: Kathy Bartosz, Partnership Carson City
 - Partners engaged in this action:
 - Alicia Hansen, public health consultant
 - Carson City Health and Human Services
 - Carson Tahoe Health
 - FISH
 - Nevada Appeal
 - Nevada Health Centers
 - Nevada Public Health Foundation
 - Ron Wood Family Resource Center
- Survey community health providers on services provided, with a focus on income, insurance, gender and age.
 - Lead organization: Mina Fiddymont, Carson Tahoe Health Women’s Health Institute and Marena Works, Carson City Health and Human Services

- Partners engaged in this action:
 - Alicia Hansen, public health consultant
 - Carson Area Wellness Association (CAWA)
 - Carson Mental Health Center
 - FISH
 - Nevada Appeal
 - Nevada Health Centers
 - Nevada Public Health Foundation
 - Partnership Carson City
 - Physician Select Management
 - Ron Wood Family Resource Center

- Create and/or designate an accessible and user-friendly website which categorizes all available services along with their contact information.
 - Lead organization: Kathy Bartosz, Partnership Carson City
 - Partners engaged in this action:
 - Alicia Hansen, public health consultant
 - Carson City Health and Human Services
 - Carson Tahoe Health
 - FISH
 - Fitness for \$10
 - Nevada Appeal
 - Nevada Public Health Foundation
 - Physician Select Management
 - Sierra Family Health Center
 - Sierra Surgery Hospital
 - Thomas Gibbons, O.D.

- Create a marketing plan and informational resources (e.g., brochures, social media) to promote usage and knowledge of website by community members and health service providers and distribute to community.
 - Lead organization: Tonya Champa, Nevada Appeal
 - Partners engaged in this action:
 - Alicia Hansen, public health consultant
 - Carson Area Wellness Association (CAWA)
 - Carson City Health and Human Services
 - Carson Mental Health Center
 - Carson Tahoe Health
 - FISH
 - Fitness for \$10
 - Nevada Health Centers
 - Nevada Public Health Foundation
 - Partnership Carson City
 - Sierra Surgery Hospital

Adopt a Strategy:

- Include a link to Carson City health resources website on organizational webpage.
- Link Carson City resources to other resources, including Nevada 211.
- Engage individuals and organizations within the community.
- Suggestions welcomed!



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Community Issue B:

Improving Access to Health Information – Health Data from Community Partners

Justification: Addressing and responding to health needs and improving the health of the citizens in Carson City cannot be accomplished without up-to-date data and information systems (U.S. Department of Health and Human Services, 2011). Many local organizations track health information and some local statistics can be collected from organizations such as the Nevada State Office of Rural Health or the Nevada State Health Division. Yet this data is not regularly compiled and compared in a comprehensive manner for our community; thus, we do not have a true perspective of local health outcomes and needs.

Outcome Objectives:

- Create a centralized process for collection and publication of Carson City health data.
- Identify gaps in data that are not currently being collected.
- Disseminate and interpret health information data to the community.

Action Steps:

- Determine standardized data requirements for health data collection in Carson City.
- Identify community partners who can contribute health data.
- Disseminate data standards and compilation deadlines community partners collecting health data.
 - Lead organization: Marena Works, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City Fire Department
 - Carson City Juvenile Probation Department
 - Carson City School District
 - Carson Tahoe Health
 - FISH
 - Nevada Health Centers
 - Physician Select Management
- Identify important data that is missing from currently available information
- Develop a plan to collect missing data.
 - Lead organization: Marena Works, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City Fire Department
 - Carson City School District
 - FISH
 - Nevada Health Centers
 - Physician Select Management
 - Thomas Gibbons, O.D.

- Collect health data from community partners every three years.
 - Lead organization: Marena Works, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson Tahoe Health
 - FISH
 - Nevada Appeal
 - Nevada Health Centers

- Release health data to community in the form of a new or existing community health assessment report within a year of data collection.
 - Lead organization: Local Public Health Assessment Workgroup
 - Partners engaged in this action:
 - All

Adopt a Strategy:

- Bring a mobile dental program annually or biannually to schools.
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Community Issue C: Improving Access to Health Care – Oral Health

Justification: Oral health is linked to overall health and well-being; however, socioeconomic factors can affect a person's ability to access oral health care. Limited access and availability of dental services can especially impact these populations, as well as those persons with disabilities or with chronic health conditions. A lack of awareness for the need for care can also affect oral health, as can be seen with the increase of tooth decay in preschool children. (U.S. Department of Health and Human Services, 2011.)

Nevada ranks 48th in the nation for adults who have visited a dentist in the last year, and 28.1% of 3rd grade students surveyed in 2009 had untreated tooth decay (Centers for Disease Control and Prevention, 2011). In the past year, dental coverage has been reduced or eliminated from many health insurance plans. Finally, although Carson City ranks as one of the highest counties in the state for the number of dentists and dental hygienists per 100,000 people (Griswold and Packham, 2011), data on populations served and acceptance of Medicaid is not readily available.

Outcome Objectives:

- Identify oral health access and needs for Carson City residents.
- Determine oral health providers who offer care to low-income/uninsured/underinsured.
- Increase awareness of the importance of good oral health practices.
- Develop a long-term community plan to provide care to low-income and/or uninsured/underinsured populations and to limit the financial burden for all involved.

Action Steps:

- Survey local dentists to see what services they offer, who they serve (i.e., Medicaid patients) and why they do or do not serve these populations.
 - Lead organization: Lori Benven, Northern Nevada Dental Association
 - Partners engaged in this action:
 - FISH
 - Nevada Public Health Foundation
 - Sierra Surgery Hospital
 - United Latino Communities
- Assess the proportion of programs in Carson City (e.g., in schools, to parents, at Senior Centers) that provide health education to prevent health problems in dental and oral health.
- Determine areas where increases in oral health education are necessary.
 - Lead organization: Lori Benven, Northern Nevada Dental Association
 - Partners engaged in this action:
 - Carson City School District
 - FISH
 - Nevada Health Centers
 - Nevada Public Health Foundation
 - Silver State Charter Schools
 - Thomas Gibbons, O.D.
 - United Latino Communities

- Working with a coalition of local dentists and health care providers, develop a community oral health plan that includes Health People 2020 objectives in order to improve access to dental health care for all Carson City citizens.
 - Lead organization: Lori Benvin, Northern Nevada Dental Association
 - Partners engaged in this action:
 - FISH
 - Nevada Health Centers
 - Nevada Public Health Foundation
 - Thomas Gibbons, O.D.
 - United Latino Communities

Adopt a Strategy:

- Provide marketing opportunities for oral health providers.
- Seek grants to facilitate adult extractions and relief from oral infection.
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Community Issue D: Improving Access to Health Care – Mental Health

Justification: Mental health issues affect all races, ages, genders and levels of income. Mental disorders are a common cause of disability and they play a major role in people’s ability to maintain good physical health (U.S. Department of Health and Human Services, 2011). According to the National Alliance on Mental Illness, Nevada’s mental health care system received a “D” grade. The state’s greatest challenges included keeping pace with growing populations, especially those that are ethnically or racially diverse, as well as providing adequate staffing and housing levels (2009). Studies have shown that over 90% of people who die from suicide have one or more psychiatric disorders (Screening for Mental Health, 2007). In Carson City, suicide was the 10th leading cause of death in 2010 (Griswold and Packham, 2011) and between January of 2009 and August of 2011, the number of suicides in Carson City almost doubled (Carson City Sheriff’s Office, 2011a). A lack of access to behavioral health resources and practitioners is seen as an urgent health care policy issue (Nevada Flex Program Advisory Committee, 2008). Access becomes even more important as budget cuts to mental health services shift the issues to emergency rooms, schools, and local jails and prisons.

Outcome Objectives:

- Identify mental health access and needs for Carson City residents.
- Determine mental health providers who offer care to low-income and/or uninsured/underinsured populations.

Action Steps:

- Survey and inventory counseling and treatment resources available for Carson City, including what services are provided and which providers accept Medicaid, and identify gaps in service.
 - Lead organization: Susie Whitman, Carson Tahoe Health Behavioral Health Services
 - Partners engaged in this action:
 - Carson City School District
 - Carson Mental Health Center
 - Community Counseling Center
 - Sierra Family Health Centers
- Create a plan to effectively deal with mental health issues faced by adults.
 - Lead organization: Susie Whitman, Carson Tahoe Health Behavioral Health Services
 - Partners engaged in this action:
 - Carson Mental Health Center
 - Nevada Health Centers

- Develop a written “resource list” that the community can use to address a variety of mental health-related scenarios.
 - Lead organization: Susie Whitman, Carson Tahoe Health Behavioral Health Services
 - Partners engaged in this action:
 - Carson City Juvenile Probation Department
 - Carson Mental Health Center
 - FISH
 - Sierra Surgery Hospital

Adopt a Strategy:

- Provide community outreach and distribute information.
- Partners can attend quarterly Carson Mental Health stakeholder meetings.
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Priority II: Chronic Disease

Community Issue E: Diabetes (Type II)

Justification: Nationally, Type II diabetes affects an estimated 23.5 million people and is the 7th leading cause of death (U.S. Department of Health and Human Services, 2011). A lack of education, few resources, and inadequate access to those resources, have locally compounded this nationwide epidemic. Type II diabetes is costly in terms of the financial burden, as well as to the community's overall quality of life. According to the 2011 National Diabetes Fact Sheet (National Center for Chronic Disease Prevention and Health Promotion, 2011), medical costs directly and indirectly associated with Type II diabetes totaled \$174 billion nationally in 2007. Locally, the Ross Clinic, which provides limited medical services for underprivileged and homeless individuals, reported that 37% of their patients had diabetes of unspecified types (FISH - Ross Clinic, 2011). Sierra Family Health Center, which provides primary care to the community, reported seeing 923 diagnoses of uncontrolled Type II diabetes and 486 diagnoses of controlled Type II diabetes between June 1, 2010 and May 31, 2011 (Carson City Health and Human Services, 2011). Increasing access to diabetes education programs to aid diagnosed patients in proper self-management of their diabetes, as well as programs to educate the community as to how to change their lifestyle and behaviors to avoid developing Type II diabetes, can make a major impact in our community's health.

Outcome Objectives:

- Increase access to diabetes education for persons diagnosed with Type II diabetes, particularly special populations, minority groups, and the uninsured.
- Increase access to educational classes and programs for community members at risk of developing Type II diabetes.

Action Steps:

- Recruit community partners to participate in a community group that diabetics can be referred to in order to receive education and support.
 - Lead organization: Michelle Cowee, Sierra Dietetics
 - Partners engaged in this action:
 - Carson Area Wellness Association (CAWA)
 - Carson City Health and Human Services
 - CTH Diabetes Education
 - Carson Tahoe Health Women's Health Institute
 - FISH
 - Fitness for \$10
 - Nevada Health Centers
 - Partnership Carson City
 - Thomas Gibbons, O.D.
 - United Latino Communities

- Distribute a broad-based diabetes education curriculum to all health based organizations and to service clubs and faith-based organizations identified by the planning team.
 - Lead organization: Michelle Cowee, Sierra Dietetics
 - Partners engaged in this action:
 - Carson Area Wellness Association (CAWA)
 - Carson City Health and Human Services
 - Carson Tahoe Diabetes Education
 - Carson Tahoe Health Women's Health Institute
 - FISH
 - Fitness for \$10
 - Katie Roberts, D.M.V.
 - Nevada Health Centers
 - Ron Wood Family Resource Center
 - Silver State Charter Schools
 - The Greenhouse Project
 - United Latino Communities
 - Western Nevada College

Adopt a Strategy:

- Promote diabetes resources available in the community.
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Community Issue F: Smoking/Tobacco Cessation

Justification: Tobacco products are both addictive and detrimental to one's personal health, as well as that of the community, yet tobacco use is the single most preventable cause of death and disease in the United States. Around 443,000 Americans die each year from tobacco-related illnesses, and tobacco use costs the U.S. over \$193 billion a year (U.S. Department of Health and Human Services, 2011).

According to an unpublished survey completed in 2011 at the Carson City Health and Human Services (CCHHS) clinic, tobacco use among CCHHS clients in Carson City (32%) was higher than the State average (22%) (Carson City Health and Human Services, 2011). Because of the strong connection between tobacco use (including exposure to second- and third-hand smoke) and severe health consequences, it has been determined that no amount of exposure to smoke is considered safe. It is important to develop and maintain tobacco cessation and education programs to reduce the number of people who begin using tobacco products, as well as to help those who do use tobacco permanently to quit. Over the last half-century, many nationally researched strategies have been identified revolving around policies to reduce tobacco use prevalence, health system changes, and social and environmental changes (U.S. Department of Health and Human Services, 2011).

Outcome Objectives:

- Increase awareness and attendance of tobacco cessation classes for adults and teens.
- Advocate for policies to reduce tobacco use and initiation among youth and adults.
- Increase community awareness of negative effects of tobacco use.

Action Steps:

- Increase awareness of existing tobacco cessation classes.
 - Lead organization: Cindy Hannah, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City School District
 - Carson Tahoe Health Women's Health Institute
 - Community Counseling Center
 - Nevada Health Centers
 - Sierra Surgery Hospital
 - Silver State Charter Schools
- Engage governing bodies in discussion of policies to reduce tobacco use among youth and adults.
 - Lead organization: Cindy Hannah, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City Parks and Recreation
 - Carson City School District
 - Carson Tahoe Health Women's Health Institute
 - Silver State Charter Schools

- Establish effective counter-marketing campaigns against tobacco use.
 - Lead organization: Cindy Hannah, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City Juvenile Probation Department
 - Carson City School District
 - Carson Tahoe Health Women's Health Institute
 - Silver State Charter Schools
 - United Latino Communities

Adopt a Strategy:

- Distribute smoking/tobacco education materials.
- Provide tobacco cessation services.
- Make your business, neighborhood or organization a "tobacco-free zone."
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Community Issue G: Obesity

Justification: Many different lifestyle and health factors contribute to the development of obesity. According to the American Heart Association, between 60% and 70% of Americans are either overweight or obese. Being obese puts people at a higher risk for developing acute health problems and chronic diseases. Also, statistics show nearly one in three U.S. children ages 2 to 19 are overweight or obese, putting them at a higher risk to develop chronic diseases that conventionally only affect adults (AHA, 2011).

Data from local health care providers show that these diseases pose the greatest threat to our community's overall health (Carson Tahoe Health, 2011; Sierra Family Medical Center, 2011). The prevalence of obesity is an issue that health care stakeholders must address to insure the general quality of life of our community.

Outcome Objectives:

- Promote education on proper exercise and nutritional strategies to reduce obesity.
- Develop partnerships to create and support obesity-combating programs and policies.

Action Steps:

- Develop nutrition and physical activity 'role model' programs for youth and teens.
- Distribute the 'role model' program to all public and private schools in Carson City through the physical education instructors or directly to each school's principal.
 - Lead organization: Sharon Vonnegut, Carson Area Wellness Association (CAWA)
 - Partners engaged in this action:
 - Carson City Health and Human Services
 - Carson City School District
 - Carson Tahoe Health Women's Health Institute
 - Fitness for \$10
 - Safe Routes to School
 - Sierra Dietetics
 - Silver State Charter Schools
 - The Greenhouse Project
 - United Latino Communities
- Continue to offer family-based nutrition and physical activity events and programs on an ongoing basis.
 - Lead organization: Sharon Vonnegut, Carson Area Wellness Association (CAWA)
 - Partners engaged in this action:
 - Carson City Health and Human Services
 - Carson City Parks and Recreation
 - Carson Tahoe Health Women's Health Institute

- Fitness for \$10
- Katie Roberts, D.M.V.
- Ron Wood Family Resource Center
- Sierra Dietetics

Adopt a Strategy:

- Promote programs and events.
- Change policies to allow food stamps to be accepted at farmers' markets.
- Engage individuals and organizations within the community.
- Suggestions welcomed!



Priority III: Lifestyle and Behaviors

Community Issue H: Teenage Pregnancy

Justification: The United States has the highest rate of teen pregnancy in the fully industrialized world. Of all the states, Nevada has one of the highest rates of pregnancy among women age 15-19 and also had a high rate of live births among women age 15-19. While Carson City's overall rate of pregnancy for all ages is lower than the national and state rate, the rate for women age 18-19 is much higher than the national average and very close to the state average for that age group. (Guttmacher Institute, 2010; Griswold & Packham, 2011.)

There are long term psychosocial and economic disadvantages for the teen mother (Hillis et al, 2004). Despite the fact that sexuality and family planning have been divisive political issues in this country, there is a near consensus that a reduction in teen pregnancy rates should be a health priority. There is strong evidence that comprehensive sex education can effectively delay sex among young people, and according to the results of a 2005–2006 nationally representative survey of U.S. adults, published in the *Archives of Pediatrics and Adolescent Medicine*, there is far greater support for comprehensive sex education (82%) than for the abstinence-only approach (36%), regardless of respondents' political leanings and frequency of attendance at religious services (Boonstra, 2007).

Outcome Objectives:

- Provide a community based education program that has been researched and proven to make a significant impact in reducing teenage pregnancy, for the community of Carson City.
- Implement a program to delay onset of sexual activity in adolescents
- Increase communication and teamwork amongst organizations providing services the area of teen pregnancy prevention

Suggested Actions:

- Identify evidence-based community programs that have made significant impacts in reducing teen pregnancy.
- Distribute and implement selected programs.
- Evaluate if the selected program is successful in Carson City.
 - Lead organization: Valerie Cauhape, City Health and Human Services
 - Partners engaged in this action:
 - Carson City School District
 - Carson Tahoe Health MOM'S Clinic
 - Silver State Charter Schools

- Develop a group of community organizations that provide services in teen pregnancy prevention and related adolescent health care in order to develop a framework of referrals and information sharing through resource lists and quarterly meetings.
- Increase education on the topic of pregnancy and other related social issues provided to teen parents through a variety of community organizations (e.g. faith-based organizations, hospitals, health clinics, schools).
 - Lead organization: Valerie Cauhape, City Health and Human Services
 - Partners engaged in this action:
 - Carson City School District
 - Carson Tahoe Health MOM'S Clinic
 - Juvenile Probation Department
 - Nevada Health Centers
 - Nevada Public Health Foundation
 - Partnership Carson City
 - Silver State Charter Schools
 - United Latino Communities
- Increase the number of community-based organizations providing population-based primary prevention services in unintended pregnancy and supporting teen parents and their children.
 - Lead organization: Valerie Cauhape, City Health and Human Services
 - Partners engaged in this action:
 - Carson Tahoe Health MOM'S Clinic
 - Katie Roberts, D.M.V.
 - Nevada Public Health Foundation
 - Physician Select Management
 - Ron Wood Family Resources Center
 - Silver State Charter Schools
 - Soroptimist International of Carson City

Adopt a Strategy:

- Promote available resources.
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Community Issue I: Sexually Transmitted Diseases

Justification: Sexually transmitted diseases (STDs) are a significant source of health problems in Nevada. According to local statistics, 76.4% of the reported cases of STDs in females, from 2005 to 2010, were from the age group of early childbearing age, 18 to 24 years (Carson City Health and Human Services, 2010). Among Northern Nevada adolescents and young adults, the rates of Chlamydia infection especially have been steadily rising. Chlamydia is easily treated with antibiotics, but the effects of untreated Chlamydia can include irreversible reproductive damage. In Nevada, the overall 2010 rate was 344.3 per 100,000 and, in Carson City, the overall 2010 rate was 315.1 per 100,000 (Carson City Health and Human Services, 2010). Chlamydia prevalence among sexually active persons aged 14-24 years is nearly three times the prevalence among those aged 25-39 years (Morbidity and Mortality Weekly Report, 2011). Because the majority of people infected with Chlamydia have no symptoms, it is critical to provide public health education about the importance of prevention and screening.

Prevention is an essential strategy for reducing sexually transmitted diseases and improving reproductive health. Prevention programs can effectively reduce high-risk sexual behaviors that lead to sexually transmitted disease infection (Rotheram-Borus et al., 2001). Research indicates that the most effective programs focus on a single age, gender, and /or ethnic group and incorporate a variety of strategies, including risk assessment, skills-building, and communication components.

Outcome Objectives:

- Promote the availability of sexually transmitted disease screening options, especially for adolescents and young adults.
- Expand community-based sexually transmitted disease prevention services specifically targeting identified population sub-groups.
- Promote the implementation of comprehensive sex education programs.
- Reduce the incidence of sexually transmitted diseases in Carson City.

Action Steps:

- Identify resources for sexually transmitted disease prevention education that can be tailored for use by various community groups, such as schools, clinics, service clubs, special interest groups, and churches.
 - Lead organization: Dustin Boothe, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City Juvenile Probation Department
 - Carson City School District
 - Partnership Carson City
 - Silver State Charter Schools
 - United Latino Communities

- Increase awareness of the importance of recommended sexually transmitted disease screenings through public education.
- Encourage health care providers to increase screening rates and improve patient education.
 - Lead organization: Dustin Boothe, Carson City Health and Human Services
 - Partners engaged in this action:
 - Carson City Juvenile Probation Department

Adopt a Strategy:

- Increase access and requirements for the HPV vaccination.
- Engage individuals and organizations within the community.
- Suggestions welcomed!



Community Issue J: Alcohol and Substance Abuse

Justification: It is estimated that 22 million Americans struggle with a drug or alcohol problem, and a majority of these people are unaware that they have a problem. Alcohol and substance abuse has cumulative effects at the social, physical, mental, and public health levels. These abuses affect communities by being linked to a substantial proportion of injuries and deaths from motor vehicle crashes, falls, fires, and drownings, as well as teenage pregnancy, sexually transmitted diseases, domestic abuse, crime, and suicide (U.S. Department of Health and Human Services, 2011).

Carson City has an annual average age-adjusted cirrhosis/liver disease mortality rate of 18.4 deaths per 100,000. This is higher than the 11.7 rate reported for Nevada and the 9.1 rate nationally. Seventy-five percent of Carson City high school students report they have had a drink of alcohol at least once, 54% agree or strongly agree that illegal drugs are a problem at their school, and 40% report they have used marijuana (Carson Tahoe Health Foundation, 2010).

Outcome Objectives:

- Promote responsible use of alcohol.
- Educate parents and teens on recognition of illegal substances.
- Educate the community on available alcohol and substance abuse resources.

Action Steps:

- Identify evidence-based community programs that have made significant impacts in reducing alcohol and substance abuse.
- Evaluate which of these programs could be successful in Carson City.
 - Lead organization: Kathy Bartosz, Partnership Carson City
 - Partners engaged in this action:
 - Carson City Juvenile Probation Department
 - Carson Mental Health Center
 - Community Counseling Center
 - Partnership Carson City
 - United Latino Communities
 - Western Nevada College
- Promote and monitor the conducting of regular compliance checks.
 - Lead organization: Kathy Bartosz, Partnership Carson City
 - Partners engaged in this action:
 - Carson City Juvenile Probation Department
 - Carson City School District
 - Community Counseling Center

- Inventory and promote available alcohol and substance abuse resources for youth and families.
 - Lead organization: Kathy Bartosz, Partnership Carson City
 - Partners engaged in this action:
 - Carson Mental Health Center
 - CTH Behavioral Health Services
 - Katie Roberts, D.M.V
 - Nevada Appeal
 - Partnership Carson City Steering Committee
 - Western Nevada College

Adopt a Strategy:

- Increase the number of community-based organizations providing population-based primary prevention services in substance abuse (HP 2020 #ECBP-10.5).
- Increase proportion of persons who are referred for follow-up for alcohol problems, drug problems after diagnosis, or treatment for one of these conditions in a hospital emergency department (HP 2020 #SA-9).
- Engage individuals and organizations within the community.
- Suggestions welcomed!

Community Issue K: Pedestrian and Bicycle Safety and Access

Justification: From 2005 to 2010, the Carson City Sheriff's Office recorded 50 pedestrian accidents and 49 bicycle accidents (Carson City Sheriff's Office, 2011b). According to a local Carson City-based nonprofit agency:

"Nevada's pedestrian fatality rate is almost twice the US average. Between 2000 and 2009, 541 people were killed while walking in Nevada – this makes the state the eighth most dangerous in the nation for walking, according to Transportation for America's 2011 'Dangerous by Design' report. Conditions are also hazardous for bicyclists. Urban streets and rural roads with high speed limits, a discontinuous bicycle and pedestrian transportation system, and careless drivers in a car-oriented culture make for dangerous conditions" (Muscle Powered Carson City, 2009).

In Nevada there has been recent legislative action to protect those using alternative transportation. During the 2011 session, two bills were passed by the Nevada Legislature to help improve pedestrian and bicycle safety. These include the Nevada Vulnerable Highway Users bill, which increases penalties for vehicle accidents with cyclists or pedestrians, and the "3-Foot Passing" Law requiring greater space allowance for cyclists on roadways. Alongside the public health issue of safety, increased pedestrian and bicycle access will also help towards reducing obesity and diabetes in our community, as well as for increasing a sense of community.

Outcome Objectives:

- Promote activities that encourage increased use of existing walking and biking trails.
- Creatively promote and improve pedestrian and bicycle safety and access.

Action Steps:

- Regularly publicize bike routes and activities using a variety of different methods.
 - Lead organization: Cortney Bloomer, Muscle Powered Carson City
 - Partners engaged in this action:
 - Carson City Community Development
 - Carson City Health and Human Services
 - Nevada Appeal
 - Physician Select Management
 - Safe Routes to School
- Develop and hold seasonal and annual community-wide biking/walking events and activities.
 - Lead organization: Cortney Bloomer, Muscle Powered Carson City
 - Partners engaged in this action:
 - Carson City Parks and Recreation
 - Katie Roberts, D.M.V.

- Improve citizen knowledge of bicycle and pedestrian safety laws.
 - Lead organization: Roger Moellendorf, Carson City Parks and Recreation
 - Partners engaged in this action:
 - Muscle Powered Carson City
 - Safe Routes to School
 - Western Nevada College

- Support initiatives to increase connectivity of sidewalks and bicycle paths.
 - Lead organization: Roger Moellendorf, Carson City Parks and Recreation
 - Partners engaged in this action:
 - Muscle Powered Carson City
 - Safe Routes to School

Adopt a Strategy:

- Include bike rides for city employees in the yearly 'get fit' competitions.
- Develop more safe routes to schools (e.g., walking school bus).
- Publish walking/biking routes in the community to be distributed to hotels, schools, etc.
- Participate in community events to promote walking/biking routes.
- Engage individuals and organizations within the community.
- Suggestions welcomed!

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Appendix

Healthy People 2020 Objectives for Health Action Plan

Community Issue A: Improving Access to Health Information – Health Resources in Carson City

- Increase the proportion of quality, health-related Websites (#HC/HIT-8)
- Increase social marketing in health promotion and disease prevention (#HC/HIT-13)

Community Issue B: Improving Access to Health Information – Health Data from Community Partners

- Increase the proportion of Healthy People 2020 objectives that are tracked regularly *at the local level* (#PHI-8)
 - Increase proportion of objectives that originally did not have baseline data but now have at least baseline data (#PHI-8.1)
 - Increase the proportion of objectives that have at least a baseline and one additional data point (#PHI-8.2)
 - Increase the proportion of objectives that are tracked at least every 3 years (#PHI-8.3)
- Increase the proportion of *Healthy People 2020 objectives* for which *local* data are released within 1 year of the end of data collection (#PHI-9)

Community Issue C: Improving Access to Health Care – Oral Health

- Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year (#OH-7)
- Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year (#OH-8)
- Increase the proportion of Federally Qualified Health Centers that have an oral health care program (#OH-10.1)
- Increase the proportion of preschools and *Early Head Start* programs that provide health education to prevent health problems in dental and oral health (#ECBP-1.8)
- Increase the proportion of elementary, middle and senior high schools that provide school health education to promote personal health and wellness in dental and oral health (#ECBP-4.2)

Community Issue D: Improving Access to Health Care – Mental Health

- Increase the proportion of children with mental health problems who receive treatment (#MHMD-6)
- Increase the proportion of adults with mental health disorders who receive treatment (MHMD-9)
 - Adults aged 18 years and older with serious mental illness (SMI) (#MHMD-9.1)
 - Adults aged 18 years and older with major depressive episode (#MHMD-9.2)
- Increase the number of community-based organizations providing population-based primary prevention services in mental illness (#ECBP-10.3)

Community Issue E: Type II Diabetes

- Reduce the annual number of new cases of diagnosed diabetes in the population (#D-1)
- Increase the proportion of persons with diagnosed diabetes who receive formal diabetes education (#D-14)
- Increase prevention behaviors in persons with pre-diabetes at high risk for diabetes (#D-16)

Community Issue F: Smoking/Tobacco Cessation

- Reduce tobacco use by adults (#TU-1)
- Reduce tobacco use by adolescents (#TU-2)
- Increase recent smoking cessation success by adult smokers (#TU-5)
- Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in tobacco use (#ECBP-10.4)

Community Issue G: Obesity

- Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in nutrition (#ECBP 10.8)
- Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in physical activity (#ECBP 10.9)
- Increase the proportion of local health departments that have established culturally appropriate and linguistically competent community health promotion and disease prevention programs (#ECBP-11)
- Reduce the proportion of adults who are obese (#NWS-9)
- Reduce the proportion of children and adolescents who are considered obese (#NWS-10)
- Increase the proportion of adults who are at a healthy weight (#NWS-8)
- Increase the proportion of older adults with reduced physical or cognitive function who engage in light, moderate or vigorous leisure-time physical activities (#OA-6)

Community Issue H: Teen Pregnancy

- Reduce the pregnancy rate among adolescent females ages 18 to 19 years (#FP-8.2)
- Increase the proportion of adolescents who receive formal instruction on reproductive health topics before they are 18 years old (#FP-12)
- Increase the number of community-based organizations providing population-based primary prevention services in unintended pregnancy (#ECBP-10.6)

Community Issue I: Sexually Transmitted Diseases

- Increase the proportion of sexually active persons aged 15 to 19 years who use condoms to both effectively prevent pregnancy and provide barrier protection against disease (#FP-10)

- Increase the proportion of sexually active persons aged 15 to 19 who use condoms and hormonal or intrauterine contraception to both effectively prevent pregnancy and provide barrier protection against disease (#FP-11)
- Increase the proportion of adolescents who receive formal instruction on reproductive health topics, such as sexually transmitted diseases, before they are 18 years old (#FP-12.7 and 12.8)
- Increase the proportion of college and university students who receive information from their institution on HIV, AIDS, and STD infection (#ECBP-7.8)
- Reduce the proportion of adolescents and young adults with Chlamydia trachomatis infections (#STD-1)

Community Issue J: Alcohol and Substance Abuse

- Increase the number of community-based organizations providing population-based prevention services in substance abuse (#ECBP-10.5)
- Increase the proportion of persons who are referred for follow-up care for alcohol problems, drug problems after diagnosis, or treatment for one of these conditions in a hospital emergency department (#SA-9)
- Reduce the proportion of persons engaging in binge drinking of alcoholic beverages (#SA-14)

Community Issue K: Pedestrian and Bicycle Safety and Access

- Increase the proportion of trips made by walking (#PA-13)
- Increase the proportion of trips made by bicycling (#PA-14)
- Increase legislative policies for the built environment that enhance access to and availability of physical activity opportunities (#PA-15)

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Glossary of Terms and Abbreviations

Terms

- **Action Steps** – Time-bound and measurable steps for achieving each “outcome objective.”
- **Adopt a Strategy** – Additional ideas for actions that address a “community issue”; these ideas are not specifically tied to the Health Action Plan, but rather are ideas the community can adopt to supplement the primary “outcome objectives” and “action steps.”
- **Community Health Improvement Plan (CHIP)** – As defined by the Public Health Accreditation Board, “a long-term, systematic effort to address health problems on the basis of the results of assessment activities and the community health improvement process.”; used by the health departments, in collaboration with community partners, to set priorities and coordinate and target resources.
- **Community Issue** – Specific health issues from within a “priority area”; “outcome objectives”, “action steps”, and “adopt a strategy!” are designed to address a community issue.
- **Health Action Plan** – Name developed to identify Carson City’s “CHIP.”
- **Lead Organization** - A designated individual who has agreed to organize the “partners engaged in this action” in order to make sure there is continued progress in each area of the action plan.
- **Outcome Objective** – General goals for health improvement for each specific community issue; each “community issue” has multiple “outcome objectives.”
- **Partners engaged in this action** – Community organizations with a shared interest who have committed to accomplishing specific “action steps.”
- **Priority Area** – A broad overarching category of general health categories composed of multiple community issues; for example “Priority Area II: Chronic Diseases.”
- **Strategic Plan** – A plan for accomplishing specific actions; includes task assignments and measurable and time-sensitive objectives; created for a specific purpose, and may be part of an overarching department strategic plan.

Abbreviations

- AHA American Heart Association
- CAAN Carson Agency Action Network
- CCHHS Carson City Health and Human Services
- CDC Centers for Disease Control and Prevention
- FISH Friends in Service Helping
- HP2020 Healthy People 2020
- LPHSPA Local Public Health System Performance Assessment
- NPHSP National Public Health Performance Standards Program
- PCC Partnership Carson City
- SFHC Sierra Family Health Center
- STD Sexually Transmitted Disease
- ULC United Latino Communities

Healthy People 2020 Objective Abbreviations

- D #8 - Diabetes
- ECBP #11 – Educational and Community-Based Programs
- FP #13 – Family Planning
- HC/HIT #18 – Health Communication and Health Information Technology
- MHMD #28 – Mental Health and Mental Disorders
- NWS #29 – Nutrition and Weight Status
- OA #31 – Older Adults
- OH #32 – Oral Health
- PA #33 – Physical Activity
- PHI #35 – Public Health Infrastructure
- STD #37 – Sexually Transmitted Diseases
- SA #40 – Substance Abuse
- TU #41 – Tobacco Use

Resources

Local Health Assessments

- Carson City Health and Human Services: *Local Public Health System Performance Assessment (LPHSPA)*, March 2011
- Carson Tahoe Health Foundation: *2010 PRC Community Health Assessment*

Community Organization Health Data

- Carson City Fire Department: *2010 Emergency Service Runs by Category*
- Carson City Sheriff's Office: *Manner of Death-Suicide*, January 2009–July 2011
- Carson Tahoe Health: *Top 10 Diagnoses*: June 2010–May 2011
- Friends In Service Helping (FISH), Ross Clinic: *Top 10 Treatment Issues, last 100 patients ending May 17, 2011*
- Nevada Health Centers, Inc.: *2009–2014 Health Care Plan*
- Sierra Family Health Center, Nevada Health Centers, Inc.: *Top 10 Diagnoses*: June 2010–May 2011

Ten Essential Public Health Services

The Core Public Health Functions Steering Committee developed the framework for the Essential Services in 1994. This steering committee included representatives from U.S. Public Health Service agencies and other major public health organizations.

The Essential Services provide a working definition of public health and a guiding framework for the responsibilities of local public health systems.

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

(Centers for Disease Control and Prevention, 2010.)

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Get Healthy Carson City!

A 2020 Health Action Plan

A Community Health Improvement Plan

June 2012
Version 1.0