Stark County Community Health Improvement Plan
2022 Evaluation Report

The Stark County Community Health Needs Assessment Advisory Committee was convened in 2010, to meet the requirements of the Affordable Care Act for nonprofit hospitals and Public Health Accreditation Board standards for health departments. The Advisory Committee is comprised of 23 actively engaged community agencies; including four health districts and two healthcare systems. The committee meets quarterly to:

- Develop Community Health Assessment (CHA) & Community Health Improvement Plan (CHIP)
- Evaluate CHIP implementation
- Review community data
- Discuss community successes & barriers aligning to CHIP priority health areas
- Organize Health Improvement Summit
- Identify emerging health issues
- Determine best approach to eliminate health inequities

The Stark County assessment process is an ongoing collaboration that includes:

- Primary & secondary data collection & analyze.
- Identification & prioritization of community health needs.
- Communication & engagement:
  - Increase community awareness
  - Reduce program overlap
  - Discuss emerging issues
  - Identify new data sources
  - Provide assessment updates
 - Distribute findings & outcomes

In 2018, the Advisory Committee began implementing the Mobilizing for Action through Planning and Partnerships (MAPP). MAPP is a strategic planning process that assists communities with prioritizing public health issues, identifying resources for addressing those issues and developing a shared CHIP. The underlying foundation of this evidence-based approach incorporates three significant components:

- Strategic Planning
- Collaboration
- Quality Improvement

In 2022, the Advisory Committee began utilizing the Culture of Health Action Framework, developed by the Robert Wood Johnson Foundation. The framework identifies priorities, organized under distinct action areas, for driving measurable, sustainable progress and improving the health and well-being of all people. The Culture of Health Action Framework focuses on:

1. Making health a shared value
2. Fostering cross-sector collaboration
3. Creating healthier, more equitable communities
4. Strengthening integration of health services & systems
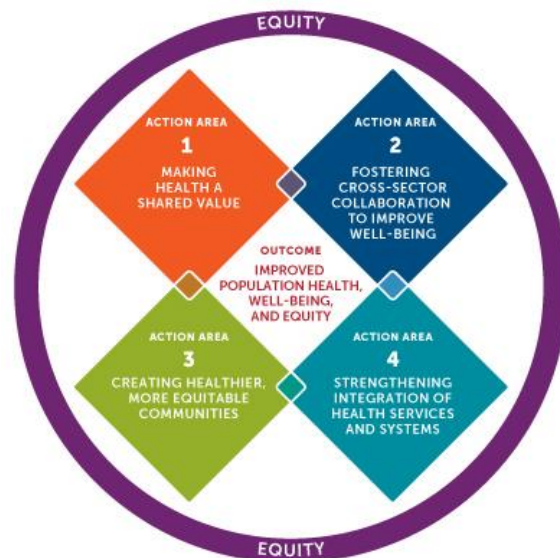
The Stark County Advisory Committee has developed multiple reports and organized several events since 2010. The following is a list of the most recent reports and activities completed:

- **_2022 CHA_**: The CHA provides a valuable overview of the health issues and status of county residents. The 2022 data was collected in five phases. The first phase consisted of a random sample telephone survey. The second phase consisted of reviewing and analyzing secondary data sources to identify areas of concern. The third phase consisted of a web survey of community leaders knowledgeable about public health. The fourth phase consisted of a community focus group addressing maternal health. The fifth and final phase consisted of data from six community meetings and 15 small focus groups addressing the social determinants around mental health. The 2022 CHA was utilized to develop the new CHIP.

- **_2020-2022 CHIP_**: The CHIP is a guide to improve the health of the community by addressing specific strategies and activities. The 2020-2022 community plan identifies health priorities, goals and long-term key measures used by community partners to guide project development, programs, and policies targeted to improve health outcomes. The priority health areas addressed within the 2020-2022 CHIP includes: Assess to Healthcare, Infant Mortality, Mental Health and Obesity & Healthy Lifestyles.

- **_2021 CHIP Evaluation Report_**: The Advisory Committee develops an annual evaluation report to document the progress being implemented within the community to identify gaps, areas of improvement, emerging health issues, and determine best approach to eliminate health inequities. The 2021 Evaluation Report documents the overall progress and challenges in achieving the goals, long-term measures and activities for each of the priority health areas addressed within the 2020-2022 CHIP.

- **_2023 Health Improvement Summit_**: The Advisory Committee organizes a Health Improvement Summit to provide updates, information and data to community members, agencies and stakeholders on the county's assessment process. The 2023 Summit included an overview of the collective behavioral health roadmap and identified strategies, a community health worker and peer recovery specialist panel discussion, as well as presentations on practical approaches to addressing social determinants of health and transforming systems for better health outcomes.

To view additional documentation developed by the Stark County Advisory Committee click on the link below:
https://starkhealth.org/government/offices/public_health/community_health_assessment.php

Priority: Access to Healthcare

Goal #1:   ALL PEOPLE HAVE EQUITABLE ACCESS TO HEALTHCARE

1) **Long Term Measure:** By December 2022, decrease the percent of respondents who report not having health insurance/Medicaid to 5%.

Baseline - 2019 CHA: 8% of respondents reported not having health insurance
Outcome - 2021 U.S. Census Bureau, American Community Survey 5-year Estimates: 6.2% of population without health insurance (civilian noninstitutionalized population)

Strategies/Inventions: *Health insurance improves access to care, limits out-of-pocket spending on healthcare services and makes healthcare costs more predictable. People with health insurance are less likely to delay or forgo needed care, seek care in emergency departments and experience financial hardship from medical debt. Expanding access to health insurance coverage reduces disparities in access to care, a critical factor for achieving health equity for all Stark County residents (2020-2022 State Health Improvement Plan).*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Maintain and/or Expand Eligibility for Medicaid	Stark County Job & Family Services (JFS)	Number of individuals on Medicaid - **111,627** • Managed Care - **96,601** • Fee for Service - **10,091** • Limited Programs - **4,935**
Insurance Enrollment Assistance (Adults & Children)	Access Health Stark County (AHSC), Stark County Community Action Agency (SCCAA), Toward Health Resiliency for Infant Vitality & Equity (THRIVE), JFS	Number of CHW pathways opened - **57** Number of CHW referrals - **57** Number of patients connected to health insurance - **22** Number of qualified entities who provide presumptive eligibility - **5**
Remove Barriers Through Cultural & Linguistic Services (CLAS Plan Strategies)	Stark Mental Health & Addition Recovery (StarkMHAR), Stark County Health Department (SCHD), AHSC	Number of patients utilizing translation services - **5** Number of clients assisted by bilingual CHW - **63** Develop universal way to translate documents - **Yes** • Bilingual CHWs • Universities/Colleges Number of cultural & linguistic trainings - **3** Number of Population-Based Trainings - **3** Number of participants trained - **240**

2) <u>Long Term Measure:</u> <u>By December 2022, increase the percent of respondents who report having a primary care provider by 10%.</u>

Baseline - 2019 CHA: 86% of respondents reported having one person or group that they think of as their doctor or health care provider; 76% of respondents indicated they receive their health care most often from a primary care doctor; 13.5% of respondents indicated they receive their health care most often from an ED/Urgent Care
Outcome: Data unavailable

Strategy/Intervention: *Ensuring local access to healthcare providers makes it easier for residents to get to primary and specialty healthcare services. Increasing access to local healthcare providers in underserved areas can reduce disparities in access to care and improve health outcomes (2020-2022 State Health Improvement Plan).*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Comprehensive & Coordinated Primary Care Medical Homes with a Focus on Cultural Competency (HRSA/UDS Measures)	Lifecare Family Health & Dental Center (LifeCare), My Community Health Center (MCHC), Alliance Family Health Center (AFHC), StarkMHAR	Number of integrated sites (physical/mental health services) **2 FQHCs** Percent of Medicaid patients per provider - **2022 data unavailable** Number of certified patient-centered medical homes - **3 FQHCs** Number of providers trained in cultural competency - **9**
Community Health Workers	AHSC, THRIVE, SCHD, SCCAA	Total Number of CHWs - **10** Number of Infant Mortality CHWs - **2** Number of Chronic Disease CHWs - **8** Number of agencies utilizing CHWs - **2022 data unavailable** Number of individuals assisted by CHWs - **2022 data unavailable** Number of agencies referring to a CHW - **2022 data unavailable**
Health Career Development/Recruitment for Disadvantaged Students and HRSA Shortage Areas	SCHD, Cleveland Clinic Mercy, MCHC, AHSC	Number of individuals completed CHW training - **6** Number of resident/student participants - **50** Number of disadvantaged students - **16** Number of rural students - **9** Number of non-traditional students - **7** Number of AHEC Scholars - **7** Total professional training hours received by Scholars - **9hrs**
Paramedicine (Pilot Project)	AHSC, Jackson Township Fire Department	Number of individual referrals - **27** Number of individuals enrolled - **11** Number of agencies implementing program model **2022 data unavailable**
Health Literacy Interventions	AHSC	Number of clients provided health literacy education - **2,223** Develop/Implement a CHW Health Literacy Training - **4**
Strengthening Stark Initiatives	Stark Community Foundation	**2022 data unavailable**

3) Long Term Measure: By December 2022, reduce the number of low-income respondents reporting they do not have access to reliable transportation by 7%.

Baseline - 2019 CHA: 90.3% of community leaders identified lack of transportation as a barrier that prevents residents from receiving necessary medical care; 94.9% of respondents reported having access to reliable transportation; 89% of non-white individuals reported have reliable transportation compared to 96% of white individuals; 86% of individuals with an income under $25,000 reported having reliable transportation.
Outcome: Data unavailable

Strategy/Intervention: *Expanding public transportation infrastructure may decrease disparities in access to services, employment, and recreation opportunities for individuals with low incomes, individuals with disabilities, and the elderly. Rural transportation services are a suggested strategy to increase mobility and access to health care for rural populations*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Public Transit Improvements	Creating Healthy Communities (CHC), Stark Area Regional Transit Authority (SARTA)	Number of bus shelters installed - **Completed 2020**
Transportation Policy (PESAC) (Assessing & Responding to Patient Needs)	Stark County Transportation Work Group	Number of agencies who adopt a policy - **0** Number of agencies who updated/improved a policy - **0** Number of patients utilizing transportation services - **80**
Strengthening Stark Initiatives	Stark Community Foundation	**2022 data unavailable**
Reduce Transportation Barriers	LifeCare, AHSC, Paramount Advantage, CareSource, THRIVE, AFHC	Number of patients utilizing transportation services - **80** Percent of patients who identify transportation as barrier - **2%** Number of transportation referrals - **239** Number of transportation pathways opened - **159** Number of transportation pathways closed **2022 data unavailable** Percent of clients who utilized expanded services **2022 data unavailable** Percent of clients provided transportation education **2022 data unavailable**

Priority: Mental Health

Goal #1: STARK COUNTY WILL HAVE ZERO SUICIDES.

1) **Long Term Measure**: By December 2022, decrease youth (7th-12th grade) suicide rates by 25%.

Baseline - StarkMHAR 2017-2019 Average: 4.7 Youth Suicide Rate
Outcome - StarkMHAR 2020-2022 Average: 1.3 Youth Suicide Rate

Strategy/Intervention: *Evidence-based trainings/programs/interventions/curriculums/strategies.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Identify & Support Individuals at Risk:		
Increase use of Columbia Suicide Severity Rating Scale (CSSRS) Screenings in School	Educational Service Center (ESC), StarkMHAR	Number of schools implementing CSSRS Number of students completed screening Number of students identified as high risk • **2022 data unavailable - all Stark County schools have school based mental health provider that utilizes CSSR-S with identified students.**
Gatekeeper Training (Question, Persuade, Refer - QPR)	StarkMHAR, Suicide Prevention Coalition	Number of trainings held - **19** Number of individuals trained - **448**
Crisis Intervention Team (CIT) Training	StarkMHAR	Number of 1st responders trained - **68 (59 officers/9 dispatchers)**
Lesson Harm & Prevent Future Risk:		
Critical Incident Stress Management	StarkMHAR	Number of outreaches - **25** Number of individuals reached - **70**
Create Protective Environments:		
Mental Health First Aid	StarkMHAR, National Alliance on Mental Illness, ESC	Number of individuals trained - **5** Number of trainings held - **2**
Increase Youth Connectedness	StarkMHAR, SCHD	NOYHS Results • **NOYHS was implemented in 2021; several connectedness measures improved.** • **Several schools participated in the Ohio Healthy Environments Survey (OHYES!) In 2022; no data has been received. OHYES! is a survey for 7th-12th grade students that measures the prevalence of behaviors and experiences posing risk to youth wellness.**

Social Media Campaign	StarkMHAR, ESC	Number of outreach efforts - **76** Types of outreach efforts - **Paid Advertisements/Organic Posts** Number of Impressions Made - **2,918,657**
K-12 Prevention Programming	ESC	Number of school districts implementing prevention programs: • **All county school districts are in the process of receiving training and implementing positive behavioral interventions & supports.** • **Most county school districts are implementing social & emotional learning curriculum content.**

2) <u>Long Term Measure:</u> <u>By December 2022, decrease adult suicide rates by 10%.</u>

Baseline - StarkMHAR 2017-2019 Average: 66.7 Suicide Rate
Outcome - StarkMHAR 2020-2022 Average: 58.7 Suicide Rate

Strategies/Inventions: *Evidence-based trainings/programs/interventions/strategies.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Identify & Support Individuals at Risk:		
Gatekeeper Training (Question, Persuade, Refer – QPR)	StarkMHAR, Suicide Prevention Coalition	Number of trainings held - **19** Number of individuals trained - **448**
Lesson Harm & Prevent Future Risk:		
Critical Incident Stress Management	StarkMHAR	Number of outreaches - **25** Number of individuals reached - **70**

3) <u>Long Term Measure:</u> <u>By December 2022, strengthen access & delivery of suicide care.</u>

Baseline/Outcome: Data unavailable

Strategies/Inventions: *Evidence-based trainings/programs/interventions/strategies.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Mobile Response	StarkMHAR	Number of youth outreaches - **1,068** Number of adult outreaches - **3,318**
Zero Suicide	StarkMHAR	Increase implementation of Zero Suicide framework - **8 agencies**

Care Team Model	ESC	Number of youth/families reached - **9,058 students** Number of connections made - **2022 data unavailable**
Counseling on Access to Lethal Means (CALM)	StarkMHAR, Aultman, Cleveland Clinic/Mercy, SCHD	Number of times CALM was implemented Number of EDs utilizing CALM Number of participants trained in CALM • **Hospitals are not engaged with CALM. COVID-19 drastically impacted the program ending implementation.**
School-Based Mental Health Services	StarkMHAR, ESC	Number of schools with school-based consultation services - **78** Number of schools with mental health treatment services - **78**
Strengthening Families	StarkMHAR, SCHD	Number of youth reached through referrals - **141** Number of evidence-based strategies implemented - **12** Number of skill-based strategies implemented - **14**

Goal #2: ALL RESIDENTS WILL HAVE SEAMLESS ACCESS TO MENTAL HEALTH SERVICES THROUGH INTEGRATED HEALTH

1) **Long Term Measure:** By December, 2022, reduce wait list time for initial behavioral health assessment & services.

    Baseline - 2019 StarkMHAR: Wait List Time - 5.42days Assessment, Counseling, Medical-Somatic
    Outcome - 2022 StarkMHAR: Wait List Time - 5.17days Assessment, Counseling, Medical-Somatic

    Strategies/Inventions: *Integration of behavioral and physical health care.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Mental Health System:		
Reduce wait list for initial behavioral health assessment	StarkMHAR, Funded Providers	Average wait list time reported by funded providers **Youth 4.43 days/Adult 5.95 days**
Reduce wait list for initial behavioral health counseling	StarkMHAR, Funded Providers	Average wait list time reported by funded providers **Youth 11.57 days/Adult 11.96 days**
Reduce wait list for initial behavioral health medical-somatic	StarkMHAR, Funded Providers	Average wait list time reported by funded providers **Youth 22.38 days/Adult 17.42 days**
Co-locations for behavioral health (facility providing both primary & behavioral health care)	StarkMHAR	Number of behavioral health co-locations - **2 FQHCs** Number of individuals receiving physical health services **2022 data unavailable**
Collaborative Focus (Integrated Physical/Behavioral Care)	StarkMHAR	**2022 data unavailable (stalled due to workforce shortages)**

Health Care System:		
CHWs	THRIVE, AHSC, SCCAA, SCHD	Number of agencies with CHWs - **5** Number of CHWs - **10**
Reduce wait list time for initial behavioral health assessment appointment	AFHC, MCHC, Aultman, Cleveland Clinic/Mercy	Percent of wait time for new mental health appointments > 10 days **0.7%** Identified barriers to accessing care - **2022 data unavailable**
Providers screening for behavioral health	MCHC, Cleveland Clinic Mercy, AFHC	Number of providers screening - **7** Number of individuals screened - **4,106**

2) **Long Term Measure:** By December, 2022, enhance system to assist individuals in behavioral health crisis.

Baseline/Outcome: Data unavailable

Strategies/Inventions: *Evidence-based trainings/programs/interventions/strategies.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Individuals Linked with a Community Behavioral Health or Primary Care Provider	Aultman, Cleveland Clinic Mercy, AHSC	Number of ER mental health care coordination referrals - **734** Number of mental health service pathways opened - **54** Number of mental health service pathways closed - **8**
Reduce Stigma (Marketing Campaign)	StarkMHAR	Number of individuals reached - **1,513,609** Number of outreach efforts - **4 primary campaigns** Types of outreach efforts: • **Newspaper (full page ads)** • **TV/Theater Ads** • **Newsymom Platform**

3) **Long Term Measure:** By December 2022, increase the mental health workforce by 20 licensees, while also reducing the turnover rate by 7%.

Baseline - 2019 StarkMHAR: 257 licensed (APN, LISW, LPC, LPCC, MSW/LSW) individuals within the mental health system
Outcome - 2022 StarkMHAR: 239 licensed (APN, LISW, LPC, LPCC, MSW/LSW) individuals within the mental health system

Strategy/Intervention: *Evidence-based trainings/programs/interventions/strategies*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Strengthening Stark Initiatives	Stark Community Foundation	**2022 data unavailable**
Internship Program Sustainability (Internship Stipends/Incentives)	StarkMHAR	Types of initiatives implemented - **Stipends/Incentives** Number of paid internships provided - **36 stipends**
Certified Peer Recovery Supporter	StarkMHAR	Number of peer supporters trained - **37** Number of peer supporters working within the system - **20** Number of Certified Peer Supports - **65**
Diverse Workforce Initiatives	StarkMHAR	Increase workforce diversity in the behavioral health system by 30% • **Baseline data was established November 2022; won't be released until November 2023**

Goal #3: STARK COUNTY WILL HAVE ZERO UNINTENTIONAL DRUG OVERDOSE DEATHS

1) **Long Term Measure:** By December 2022, reduce adult overdose deaths by 25%.

Baseline - Stark County Coroner's Office 2016-2018 Average: 93.3 Overdose Deaths
Outcome - Stark County Coroner's Office 2019-2021 Average: 126 Overdose Deaths

Strategy/Intervention: *Implementation of policy, systems and/or environmental change.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Strengthen Stark Initiatives	Stark Community Foundation	**2022 data unavailable**
Stark County Opiate Task Force (by-laws, strategic plan)	SCHD, StarkMHAR	Create by-laws - **Revised 2021** Update Strategic Plan - **Reviewed 2021** Number of meetings - **10** Number of new collaborating agencies - **10** • **In 2022, CCPH supported the creation of a community led coalition to represent and inform the black community on current overdose statistics/trends, overdose prevention strategies, harm reduction resources and linkages to care.**
Maintain Overdose Fatality Review (meetings, share data)	SCHD	Number of fatality review meetings - **4** Number of collaborating agencies - **13** Number of doses of opiates dispensed - **6.54m does per 100k residents** Number of overdose deaths - **159**

Maintain Community Response Plan (monitor epicenter, test plan)	SCHD	Number of alerts sent out and/or tested - **6**
Drug Overdose Awareness Campaign (high risk/high need populations)	SCHD	Number of people reached - **40,000 approximately** • **Post Card Mailings** • **Bus Ads** • **Posters** Number of social marketing outlets - **3**
Comprehensive & Sustainable Systems	SCHD, Provider Agencies	Number of new policies/procedures - **4** Number of individuals screened for SUD - **2,297** Number of referrals to treatment - **223** Number of referrals to wrap around services - **2022 data unavailable** Number of referrals to harm reduction services - **232** Number of referrals to peer recovery support services - **6** Number of referrals to case management services **2022 data unavailable**
Naloxone Distribution	Canton City Public Health (CCPH), SCHD	Number of community partners engaged - **41** Number of naloxone kits distributed - **3,506** Number of individuals trained to administer naloxone - **3,506** Number of known reversals - **347**
Stark Wide Approach to Prevention (SWAP) (Needle/Syringe Exchange Program)	CCPH	Number of unduplicated individuals reached - **398** Total number of visits - **4,901** Number of syringes returned - **166,456** Number of syringes distributed - **185,340**
HEALing Communities Grant	SCHD, StarkMHAR	**Healing Communities launched 12 initiatives focused on naloxone distribution, leave behind programs, MOUD strategies, safer prescribing practices and improved linages to services.**
Implement Overdose Detection Mapping Application Program (ODMAP)	StarkMHAR, SCHD Opiate & Addiction Task Force	Highlight Trends/Changes - **1 additional agency inputting data**

2) **Long Term Measure:** By December 2022, reduce youth alcohol and drug use by 15%.

Baseline - 2019 NOYHS: 41.6% of students reported using some substance in their lifetime; 17% in past 30 days.
Outcome - 2021 NOYHS: 32.4% of students reported using some substance in their lifetime; 12.9% in past 30 days.

Strategy/Intervention: *Evidence-based trainings/programs/interventions/curriculums/strategies.*

Activity/Program/Initiatives	Agency Responsible	2022 Accomplishments - Data & Narrative
School Interventions:		
Care Team Model	ESC	Number of school districts implementing prevention programs: • **All county school districts are in the process of receiving training and implementing positive behavioral interventions & supports.** • **Most county school districts are implementing social & emotional learning curriculum content.** Number of youth reached - **2022 data unavailable**
Community Interventions:		
Prevention Programming	StarkMHAR, Funded Provider	Types of prevention programs - **Evidence-based programming** • **Strong African American Families** • **All Stars** • **Coping & Support Training** • **Life Skills** Number of youth reached - **818**
Adolescent Smoking Cessation Program (Give It Up)	Aultman	Percent of adolescent graduation - **2022 data unavailable** Percent of adolescent quit success - **2022 data unavailable**
Alcohol Sale Enforcement	StarkMHAR	Number of compliance checks - **134** Percent of sales to minors - **12.7%**
Treatment Programming	StarkMHAR	Number of youth who received treatment services - **500**

Priority: Infant Mortality

Goal #1: ALL BABIES IN STARK COUNTY WILL CELEBRATE THEIR FIRST BIRTHDAY.

1) **Long Term Measure**: By December 2022, decrease/sustain the overall, Black, and White infant mortality rates to less than 6.0.

2) **Long Term Measure**: By December 2022, decrease/sustain the disparity/inequity rate ratio to less than 1.0.

Baseline - Preliminary 2019 Quarters 1-4-ODH: 4.9 Overall Infant Mortality Rate, 5.7 Non-Hispanic Black Infant Mortality Rate, 3.9 Non-Hispanic White Infant Mortality Rate
Outcome - Preliminary 2022 Quarters 1-4-ODH: 6.2 Overall Infant Mortality Rate, 25.5 Non-Hispanic Black Infant Mortality Rate, 3.9 Non-Hispanic White Infant Mortality Rate (*IMR based on counts less than 10 considered unstable)

Strategy/Intervention: *Evidence-based trainings/programs/interventions/curriculums/strategies.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Nurse Newborn Home Visiting Program	Alliance City Health Department	Percent of nursing clients screened - **2%** Number of clients referred to home visiting program - **0** Number of clients contacted in 72hrs of referral - **1** Provided education/brochures - **1** Number of client referrals made - **7**
CenteringPregnancy®	AFHC, MCHC	Number of participants - **2022 data unavailable** Number of groups - **2022 data unavailable** Number of patients served by CHW - **58**
Provide Legal Services to Low-Income New/Expecting Mothers	THRIVE Community Legal Aid	Number of referrals made Number of legal issues addressed Number of unduplicated women Number of African American women Number of new/expecting mothers • **2022 data unavailable**
Maternal Care & Safety Peer Support Group	Domestic Violence Project Inc	Number of pregnant African American clients Number of African American client's children >1 Percent of clients enrolled into other services • **2022 data unavailable**
Father Based Trainings	Early Childhood Resource Center (ECRC)	Number of fathers participating in <1 fatherhood program **2022 data unavailable**

Case Management Services	ECRC	Number of fathers with established Parenting Time Orders Number of established child support orders Number of completed child support order modifications • **2022 data unavailable**
Mentoring & Support Program	THRIVE, Mary Church Terrell Federated Club	Number of women enrolled into Sister Circle Number of women who completed Sister Circle • **2022 data unavailable**
Stark County Fatherhood Coalition	JFS	Number of Fathers involved in the Fatherhood Coalition - **460** Number of community events/activities planned - **11** Number of fathers that participated in events - **2,450** Number of fathers utilizing a CHW - **6**
Cultural & Linguistic Competency & Population-Based Trainings	StarkMHAR, THRIVE	Number of cultural & linguistic trainings - **3** Number of Population-Based Trainings - **3** Number of participants trained - **240** Number of African Americans participated in CLC trainings/sessions **2022 data unavailable**
Trauma Informed Care Training	StarkMHAR	Number of individuals trained in Trauma Informed Care - **677** Number of agencies trained in Trauma Informed Care - **146**
Rental Assistance Program	THRIVE, AHSC, Young Women's Christian Association of Canton	Number of women/families assisted by/referred to rental/mortgage assistance programs - **2022 data unavailable**
Community HUB Models	THRIVE, AHSC, SCCAA, SCHD	Number of active clients - **602 (487 female/115 male)** Number of new clients enrolled - **2022 data unavailable** Number of face-to-face/home/telehealth visits completed **2022 data unavailable** Number of completed post-partum pathways - **36** Number of completed medical home pathways - **5** Number of completed education pathways - **245** Number of completed pregnancy pathway - **34**
Tobacco Cessation Programs	SCHD, THRIVE, SCCAA	Number enrolled into tobacco cessation program - **22** Number referred to tobacco cessation program - **22** Number completed tobacco cessation program - **0**
Safe Sleep Initiative	SCHD	Number of agencies implementing safe sleep initiatives **2022 data unavailable**
OEI Social Determinants of Health Policy & Practice Changes	THRIVE	Implementation/Adoptions of SDOH Policies/Programs: • **Family Planning/Adolescent Health -** the Advisory Committee discussed and explored data related to well visits, adolescent

		violence, school-based health care centers, adolescent STI rates and adolescent birth rates. Community feedback was emailed to 31 individuals throughout 29 different organizations to gather additional information as to what may be contributing to the high adolescent STI and birth rates within Stark County.
OEI Neighborhood Navigator	THRIVE	Number of individuals identified during outreach activities - **30** Number of pregnant women who could benefit from Neighborhood Navigator services - **19** Number of pregnant women screened - **19** Number of pregnant women referred to community resources - **19** Number of pregnant women who obtained needed services - **19**

Priority: Obesity & Healthy Lifestyles

Goal: ALL STARK COUNTY RESIDENTS WILL HAVE EQUITABLE ACCESS TO ENVIRONMENTS SUPPORTING A HEALTHY LIFESTYLE AND MAKING HEALTHY CHOICES.

1) **Long Term Measure**: By December 2023, increase Stark County resident's consumption of fruits & vegetables by 5%

    Baseline - 2019 CHA: 86.7% consume fruits & vegetables, 15.8% of residents have difficulty getting needed food
    Outcome: Data unavailable

    Strategies/Interventions: *Increase access to healthy food options.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Increase the number of agencies adopting and implementing Food Service Guidelines	United Way of Greater Stark County, CHC	Number of agencies participating in FSG - **3**
Increase the amount of nutritional foods and physical activity opportunities for PreK-12	Ohio State University (OSU) Extension, SCHD, ECRC	Number of OHP designated centers - **Completed 2020** Number of individuals trained in OHP - **Completed 2020** Number of schools provided Youth EFNEP nutrition education - **7** Number of students completed Youth EFNEP nutrition program - **524** Number of step up to quality sites - **2022 data unavailable**
Increase the number of individuals receiving nutritional education	AHSC, OSU Extension	Number of AHSC clients referred to SNAP/food banks - **446** Number of individuals participated in OSUs SNAP-Ed program - **1207** Number of nutrition education materials provided - **10,059**
Work with retailers/community partners in identified food deserts to incorporate fresh foods at reasonable prices	CHC, StarkFresh	Number of retailers/community partners - **2022 data unavailable** Number of pre-made meals sold - **135** Number of vendors utilizing StarkFresh kitchen - **34** Number completed Eating Smart, Being Smart Program - **0** Number of Mobile Grocery Market stops - **0** Pounds of food sold through Mobile Market - **0** Number of individuals reached through Mobile Market - **0**
Increase the number of community gardens and/or expand capacity of existing community gardens	CHC, Aultman	Number of community gardens - **1** Pounds of produce produced - **2022 data unavailable**
Work with schools to incorporate healthy, local foods through the implementation of Farm to School programs	ESC	Number of schools who implemented Farm to School **2022 data unavailable** Percent of local foods purchased - **2022 data unavailable**
Increase the number of healthcare providers who are screening patients for food	Aultman, AHSC	Number of referrals provided - **2022 data unavailable** Number of individuals acting on referral - **2022 data unavailable**

insecurity and providing referrals		Percent of food insecure patients - **Average 11.4%**
Increase the number of farmers' markets that accept alternative forms of payment including: SNAP/EBT, WIC and Senior Nutrition Program Farmers Market (SNPFM) vouchers	CCPH (WIC), Stark County Food Council, Vantage Aging/Meals on Wheels	Number of farmers markets accepting alternative forms of payment - **14**
Work with providers to implement fruit and vegetable incentive programs	StarkFresh, OSU Extension, Vantage Aging/Meals on Wheels	Dollar amount of incentives distributed • Mobile Produce Perks - **0** • Temporary Assistance for Needy Families - **0** • Senior Farmers Market Nutrition Vouchers - **$12,500** Amount of incentives redeemed • Temporary Assistance for Needy Families - **0** • Senior Farmers Market Vouchers - **$6,900**
Create and maintain a comprehensive inventory of existing food systems in Stark County	Stark County Food Council	Creation of GIS map - **2022 data unavailable**

2) **Long Term Measure:** By December 2023, increase the prevalence of Stark County residents who report participating in physical activity by 5%.

Baseline - 2019 CHA: 78.8% have exercised in the past month; physical activity or exercise is defined as participation in activities outside your regular job such as walking, running, lifting weights, team sports, golf or gardening
Outcome: Data unavailable

Strategies/Interventions: *Increase opportunities for participation in physical activity.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Expand access to outdoor recreation areas by repairing or enhancing parks and playgrounds	CHC, Alliance Parks & Recreation, Stark Parks	Number of recreation areas improved/repaired - **3** Percentage of increase in park usage - **2022 data unavailable**
Develop Active Transportation Plan to encourage development supporting bike and pedestrian infrastructure and safety	Canton City Engineering, CHC	Adopt Active Transportation Plan - **Completed 2020** Number of infrastructure improvements - **2022 data unavailable**
Implement public transit improvements to increase the rates of people taking multi-modal trips	CHC, SARTA	Number of bus shelters installed - **Completed 2020**

Establish connectivity through expansion of bike & hike trails throughout the County	Canton City Engineering, Canton Parks & Recreation, CHC, Stark Parks	Number of improvements/projects completed - **Completed 2021** Percentage of increase in trail usage - **2022 data unavailable**

3) **Long Term Measure:** By December 2023, increase the prevalence of Stark County residents who report their health as excellent/good by 3%.

Baseline - 2019 CHA: 68.8% of residents rate their health as excellent/good
Outcome: Data unavailable

Strategies/Interventions: *Enhance programs supporting awareness of healthy choices.*

Activity/Program/Initiative	Agency Responsible	2022 Accomplishments - Data & Narrative
Assist Stark County worksites in creating/ implementing workplace wellness programs for employees	SCHD	Number of healthy workplace policies adopted/updated **2022 data unavailable**
Expand access to evidence-based programs promoting healthy lifestyle changes	Aultman, AHSC	Percent of increase in AHSC client's health rating who participated in home visiting program - **46.4%** Percent of high schools enrolled in Ambassador Program - **76%** Percent of high schools completed healthy assessment - **88%**
Expand the *Healthy Eating and Active Living (HEAL)* program & identify measures for sustainability	THRIVE, YMCA, Sisters of Charity	Number of HEAL classes provided Number of individuals reached • **2022 data unavailable**
Expand access to tobacco-cessation treatment programs	SCHD, Cleveland Clinic Mercy, Aultman, AHSC	Number of individuals enrolled - **266** Number of individuals completed program **2022 data unavailable** Number of referrals provided - **204** Number of clients who quit using tobacco - **1** Number of classes/sessions implemented - **2022 data unavailable** Number of clients received tobacco education - **60** Percent of adult graduation - **43%** Percent of adult quit success - **29%**
Implement education and awareness campaign about vaping, tobacco prevention and cessation	Beacon Charitable Pharmacy	Develop media campaign Number of individuals provided educational materials • **2022 data unavailable**

In 2022, the Stark County Community Health Needs Assessment Advisory Committee transitioned into the fourth assessment cycle. The new assessment cycle was implemented with a unique approach. In an effort to focus on one main priority area Thrive at Work, a consulting firm, facilitated a series of community conversations and work sessions to draw on strength-focused community building and collective impact methodologies. The conversations helped guide the development of a shared vision and community roadmap for positive health outcomes. Community stakeholders and members were engaged in discussion around the leading health needs and the social conditions impacting the community at the 2022 Health Improvement Summit. Summit participants identified and voted on the priorities to be addressed in the updated Community Health Improvement Plan (CHIP). The new CHIP will focus on behavioral health with a cross-cutting priority of access to care to improve health outcomes within the community.

A framework of 10 strategies or focus areas were narrowed down from the numerous ideas identified through the community conversations and work sessions. In 2023, Health Improvement Summit participants voted on five focus strategies to be included in the new CHIP:
1. No cell phone usage in schools
2. Funding to address non-treatment barriers when accessing behavioral health
3. Behavioral health supports for school district staff
4. Formalized partnerships among behavioral health providers and medical/urgent care sites
5. Digital technology platform to unity health and human services

Work will continue, throughout 2023, to further develop strategies, measurable objectives and activities addressing the two priority health areas. Implementation plans will be created highlighting the activities to be addressed within the new CHIP.