



***In conjunction with the
Champaign County CHIP:
Striving to make Champaign
County the Healthiest County in Ohio***

Vision

All residents and employees in Champaign County embrace healthy behaviors leading to lifelong wellness.

Mission

To provide shared resources and opportunities so all residents of Champaign County may attain their healthiest lifestyle.

Healthy Living Committee MINUTES

Date: April 5, 2018
Time: 3pm-4:30pm

Location: Conference Room C

Chair: Stacey Thomas BSN RN

Attendees: Stacey Thomas CHD, Paul Waldsmith YMCA, Elaine Dyer MERCY, Marcy Ivory MERCY REACH, Whitney Cushman MEMORIAL, Alex Keller CHD, Jason Kile URBANA DENTAL SMILES, Raymond Branstiter MERCY, Krista Bradley DARBY DENTAL SMILES.

Committee Goal: To encourage, educate, and support each person in pursuit of their optimum wellness, leading to continual improvement of the county health ranking (baseline 2017, #35).

TOPIC	DISCUSSION	Outcome/Next Steps/Accountable Person
Welcome/ Sign In	<ul style="list-style-type: none"> Introductions complete. New attendees: Jason Kile & Krista Bradley from Urbana & Darby Dental Smiles & Ray Branstiter from Mercy. 	
2017 Progress Report	<ul style="list-style-type: none"> 2017 CHIP Progress Report distributed to all committee members for review. 	<ul style="list-style-type: none"> To be published to website next week and distributed to each of the committees.
5, 2, 1, Almost None	<ul style="list-style-type: none"> Program Development Worksheet completed – see attached. 	<ul style="list-style-type: none"> See attached.
Diabetes reduction	<ul style="list-style-type: none"> Type 1 Juvenile diabetes camp scholarships – the information was given to each of the school nurses. At this time, only 1 Champaign County and 0 Clark County kids have applied. New e-mails have been sent to the school nurses, CHD has posted on Facebook, and Elaine has informed local pediatricians. YDDP training – Not discussed at this meeting Summer program for at-risk kids – Not discussed at this 	<ul style="list-style-type: none"> Stacey to send e-mail to healthy living committee so everyone can distribute the information. Paul Waldsmith to arrange YDDP training. Paul Waldsmith and Paul Weber to continue to work on summer program Stacey Logwood to get information about Mary Rutan clinic Baseline Data: Stacey Thomas – CHD class; Elaine Dyer – support group, hospital, chronic care clinic; Whitney Cushman – memorial



*In conjunction with the
Champaign County CHIP:
Striving to make Champaign
County the Healthiest County in Ohio*

Vision

All residents and employees in Champaign County embrace healthy behaviors leading to lifelong wellness.

Mission

To provide shared resources and opportunities so all residents of Champaign County may attain their healthiest lifestyle.

Healthy Living Committee MINUTES

TOPIC	DISCUSSION	Outcome/Next Steps/Accountable Person
	meeting <ul style="list-style-type: none"> Mary Rutan is bringing a weight management program to the Urbana Clinic. – not discussed at this meeting Diabetes Awareness Month (November) – Not discussed at this meeting Diabetes support group meets at hospital Plans discussed for flow chart of diabetes services in champaign county and to get baseline data.- Baseline Data from CHD: In 2017 23 people attended class, 6 were given individual counseling, and 7 presentations were completed by the health district. 	diabetes education <ul style="list-style-type: none"> NEXT MEETING: WE WILL WORK ON ORGANIZING RESOURCES AND DEVELOPING TOOLS FOR PHYSICIANS. PLEASE BRING ANY PERTINENT DIABETIC INFORMATION YOU MAY HAVE.
	<ul style="list-style-type: none"> New goals in development – to increase back to school vaccination rates; physical activity related goal 	<ul style="list-style-type: none"> More discussion at later time.
Access to Care	<ul style="list-style-type: none"> Memorial to have an urgent care in the new building – hours 9a-9p Request from group to have Gary Ledford from Champaign Transit Systems to come to a meeting to discuss county transportation plan. Also for faith based services – Pete Yost. 	<ul style="list-style-type: none"> More discussion at later time. Invite guests to meeting after further discussion and review of plan.
Tobacco	<ul style="list-style-type: none"> Marcy states that REACH services and tobacco cessation continues to struggle in Champaign County. Baseline data: 810 flyers distributed in 2017 and only 6 clients were seen. One challenge involves billing for insurance and that Medicare will only pay for individual counseling, not a group session. Goals for tobacco – Increase enrollment in tobacco cessation classes, increase marketing (worksite 	<ul style="list-style-type: none"> Gabe Jones – baseline Champaign #'s



***In conjunction with the
Champaign County CHIP:
Striving to make Champaign
County the Healthiest County in Ohio***

Vision

*All residents and employees in Champaign County embrace
healthy behaviors leading to lifelong wellness.*

Mission

*To provide shared resources and opportunities so all residents of
Champaign County may attain their healthiest lifestyle.*

Healthy Living Committee MINUTES

TOPIC	DISCUSSION	Outcome/Next Steps/Accountable Person
	wellness, incentives)	
Submitted by: Stacey Thomas		
Next meeting – Thursday 5/3/18 3pm Conference Room B		



Public Health
Prevent. Promote. Protect.

Striving to make Champaign County the healthiest county in Ohio



Healthy Living Committee Meeting Sign-In Sheet

4/5/18

Print Name	Sign Name	Organization	E-mail
Gabe Jones		CHD	gjones@champaignhd.com
Stacey Thomas		CHD	stthomas@champaignhd.com
Stacey Logwood		MHDAS	Slogwood@mhdas.org
Paul Waldsmith		YMCA	cfyceo@ctcn.net
Elaine Dyer		Mercy	DaleEDyar@mercy.com
Marcy Ivory		Mercy REACH	Marcylvory@mercy.com
Jennifer Post		YMCA	ymcafitness@ctcn.net
Whitney Cushman		Memorial	Whitney.Cushman@memorialohio.com
Alex Keller		CHD	akeller@champaignhd.com
Mary Collier		CHD	mcollier@champaignhd.com
Jason Kile		Urbana Dental Smiles	jason.e.kile@gmail.com
Dr. Jessica Kile		Urbana Dental Smiles	
Raymond Branstiter		Mercy	RPBranstiter@mercy.com

Krista Bradley

Darby Dental
Smiles

krista@darbydentalsmiles.com



Public Health
Prevent. Promote. Protect.

Champaign County Community Health Improvement Coalition

Final Report 2017

March 23, 2018

Partnering Agencies

- Mercy Health Urbana
- Champaign Family YMCA
- Family Children First Council
- Drug Free Youth Coalition
- Mental Health, Drug, and Alcohol Services Board
- WellSpring
- Champaign Health District
- United Way Madison-Champaign ESC
- Consolidated Care
- Carking Kitchen
- Urbana Family Medicine and Pediatrics

Inside this issue:

Overview	I
Healthy Living	2
Early Child Well-ness	3
Substance Abuse	4
Mental Health	6

In 2016, Champaign Health District (CHD) completed a Community Health Assessment (CHA) that provided a comprehensive evaluation of the health status and issues that exist in Champaign County. In order to address these issues, CHD created 4 task forces focused on the largest areas of need. Each task force has created logic models and plans of action to address these problems. The Community Health Improvement Plan (CHIP) is comprehensive and long-term and provides details for each goal, objective, and the steps that will be taken to implement each initiative.

Healthy Living

- Based on information from Champaign County's 2015 CHA, 74% of Champaign County residents report being obese or overweight. Currently, only 25% of manufacturing businesses offer obesity prevention and control worksite programs for their employees (Workplace Obesity Prevention Survey, June 2016). Therefore, the goal of the Healthy Living committee is to increase the use of best practice workplace wellness prevention policies and programs in Champaign County

Early Child Wellness

- The Early Childhood Committee has the following three objectives:
 1. Increase awareness of trauma's impact on the emotional and physical wellbeing of Champaign County youth
 2. Adopt and implement a mental health integrated, community-based data dashboard and resources system
 3. Increase the number of providers who are education about mental health assessment, treatment, referral, and integration of mental health into primary care

Mental Health

- In Champaign County, there are often unhealthy responses to life stressors. The cause of this is twofold:
 1. Access to services is lacking
 2. At-risk individuals go unidentified

Substance Abuse

- According to the 2013 Search Institute Survey, 15% of 8th graders in Champaign County have had at least one drink of alcohol in the past 30 days, and 9% have reported using marijuana in the last 30 days. This is likely due to the perceived boundaries and expectations of our youth.

To get involved with one of these committees, please email champaignhealth@gmail.com, or visit <http://www.champaignhd.com/calendar/> to view any upcoming meetings.

Healthy Living



Vision

All residents and employees in Champaign County embrace healthy behaviors leading to lifelong wellness.

Mission

To provide shared resources and opportunities so all residents of Champaign County may attain their healthiest lifestyle.

Committee Goal

To encourage, educate, and support each person in pursuit of their optimum wellness, leading to continual improvement of the county health ranking (baseline 2017, #35).

Throughout the year, we have intentionally entwined ourselves with other community partners and expanded our membership to include them. Through restructuring of the group, we have aligned with the Community Health Improvement Plan goals and established a vision, mission, and committee goal to guide us in the upcoming year. The committee participated in a number of community events in 2017, including Healthy Kids Day and the North Lewisburg Fireworks Celebration. At each event, several health related services and information were provided, such as vaccines, sports physicals, fitness tests, healthy food education, and information on many community services. The committee has completed and submitted an application for GuardCare, an Ohio National Guard initiative that provides free medical care and services to Ohio communities. Graham students are currently creating a promotional video supporting 5,2,1, Almost None, a nutrition program aimed toward youth encouraging healthy living (5 or more fruits and vegetables daily, 2 hours or less of screen time, 1 hour of physical activity, and almost none of items such as soft drinks, sports drinks, and fruit drinks that are not 100% fruit juice). We hope to expand this initiative to other schools in the county before the end of 2018.

The Healthy Living Committee goals for 2018 include focus on diabetes care and prevention, tobacco cessation, increasing access to care, and increasing physical activity among Champaign County residents.



Vision

Expectant parents are prepared for newborns, infants and toddlers to thrive and that all children are ready for school success.

Mission

Develop, streamline and coordinate early childhood systems of services for Champaign County families in an effort to promote wellness and healthy development of young children.

Committee Goal

Every child in Champaign County will be given the opportunity to thrive and be socially/emotionally ready to learn by school age as evidenced by universal screening efforts.

In 2017 Early Childhood Coordinating Committee (ECCC) has been addressing why our county kindergarteners are not socially-emotionally ready for kindergarten. The group has reviewed current screening tools being used in Early Intervention programs and preschools to see if they identify social-emotional needs or trauma. The following information had been collected:

- Early Intervention- Using ASQ3 (Ages and Stages Questionnaire, Third Edition) and SE (Social-Emotional)- but not every family
- YMCA- Using ASQ3
- Creative Center for Childcare- Using ASQ3
- Theresa's Gingerbread House (All 3 locations)- No screenings being done
- Kids Learning Place- ASQ3
- CPS- No screenings
- In-home providers- No screenings
- Little Strengths- No screenings
- Cardinal Corner- No screenings
- Madison-Champaign ESC- ASQ3

In further review, ASQ 3 and SE version don't identify or address trauma in Early Childhood. ECCC decided to have Early Intervention do ASQ-SE on all children that are referred to the program however, to date, we haven't had any children that were screened on the ASQ-SE- showing deficit for social emotional development. ECCC decided that we needed an evidenced based screening tool to be implemented in Champaign County in order to identify and address trauma and to better prepare our children for kindergarten. DECA and DECA-C were the screening tools that the group wants to implement in Champaign Co. Not only does it identify trauma in children birth to 5 but it will provide caregivers/teachers with interventions specialized for that child. In turn, this will improve their social emotional needs and make them better prepared for kindergarten. Grants are being applied for in order to implement the program county wide.

Kindergarten screening data is being gathered from the schools/health department in order to set a base line of where we are county wide in regards to social-emotional deficits. Some questions being asked are:

- How many children are being screened in the county for kindergarten?
- How many of those children have had preschool experience?
- Where are the infants and preschoolers geographically living in the county?
- How many of these kindergarten screeners coming in with an IEP and how many are on IEP by the end of the kindergarten year? If there's an increase- why? No preschool experience?

This data will be reevaluated at a time after the new screening tool has been in effect in order to determine the success rate of using the tool.

Substance Abuse

Vision

A Champaign County where families can be happy, healthy, and safe from the harms of opiates.

Mission

The Champaign County Opiate Task Force is a diverse group of stakeholders who are interested in the future health of our communities, advocate for the prevention of opiate abuse through education and recovery systems.

Core Values

Addiction is a disease; Addiction can happen to anyone; Addiction destroys families; Prevention is key; Treatment works; Recovery is possible; Every life matters.

OPIATE TASK FORCE:

In 2017, the Opiate Task Force made several presentations regarding drug prevention, addiction, youth data, and youth substance abuse. Opiate Task Force also provided trainings on several different topics, including Botvin LifeSkills elementary program (Mechanicsburg/Urbana), 40 Developmental Assets, and asset training. Members also participated in a Regional trauma workgroup to increase capacity for trauma-informed work in our communities.

The Opiate Task Force also secured approximately \$17,000 in funding for various initiatives, just as the expansion of evidence-based prevention in schools, security cameras for the Mechanicsburg School student parking lot, and Opiate Task Force coordination. \$12,000 of this funding went towards the purchase of Botvin LifeSkills materials to allow all teachers to have a newly developed prescription drug misuse module and additional high school curriculum manuals.

The task force also organized and help two collaborative Medication Take Back Days with Urbana Police Division, Kroger Pharmacy, Mary Rutan Hospital, and Champaign Health District. At these two events, the task force collected approximately 150 pounds of unused medication.

Mercy REACH coordinated for the use of Medication Assisted Treatment (MAT) at the Mercy Health Urbana hospital chronic care clinic. Additionally, a permanent drug drop box was added to the Mercy Hospital Emergency Room.



Substance Abuse

CHAMPAIGN COUNTY DRUG FREE YOUTH COALITION

EVALUATION COMMITTEE:

The Evaluation Committee secured \$80,000 in funding from Ohio Mental Health and Addiction Services (MHAS) for prescription drug misuse among children ages 12-18 and completed a community readiness assessment related to prescription drug misuse among this age group. The Evaluation committee provided asset trainings to the Champaign County Literacy Foundation and Madison-Champaign ESC, as well as created a webinar on Champaign County's Problem of Practice for the Strategic Prevention Framework (SPF) grant. Members of the Evaluation Committee participated in SPF grant site visits and technical assistance sessions, and grant face-to-face learning communities regarding assessment, community readiness, and data collection processes, and attended Community Anti-Drug Coalitions of America (CADCA) National Leadership forum.

CHAMPS YOUTH COUNCIL (formerly known as youth advisory council):

Both members and youths in this group were very involved in 2017. Members were in attendance at the Ohio Prevention Education Conference and presented a professional white paper on youth development. Youth members attended CADCA's National Leadership Academy and SAMSHA prevention day, as well visited Capitol Hill to advocate for substance abuse prevention funding. Another youth member attended the We Are the Majority Rally in Columbus, Ohio, to rally at the statehouse, and also attended Urbana City Schools open house events at Local and the Junior High for recruiting and information spreading. Both youth and adult leaders completed Substance Abuse Prevention Skills Training as they work toward becoming credentialed as prevention specialists. In fact, two people have already submitted for credentialing as prevention specialists!

In 2017, CHAMPS earned \$862.60 in Urbana Youth Sports Concession Sales, as well as \$100.00 in participating in The Giving Tree, by wrapping presents and distributing gifts for low-income youth and families in the community. CHAMPS changed 9 policies specific to drug/alcohol/tobacco code of conduct for players, spectators, coaches and to prohibit wearing clothing or paraphernalia that promotes alcohol tobacco or drugs. Youth recruitment events occurred at 4 intercounty football games where the CHAMPS youth painted faces for school spirit.

Mental Health



To instill hope, support healing, provide education, and preserve life.

The Champaign and Logan Counties Suicide Prevention Coalition had four areas of focus in 2017: Survivor Support, Education and Prevention, Media and Marketing, and Awareness.

SURVIVOR SUPPORT:

The free monthly Survivors of Suicide Support Group met 12 times in 2017. This group meets at Consolidated Care in West Liberty on the second Thursday of each month from 6:30-8:00 pm.

EDUCATION & PREVENTION:

The Suicide Prevention Coalition provided Gatekeeper training to teachers at Urbana and Triad Middle Schools which focused on QPR (Question, Persuade, Refer). Gatekeeper training was also offered at a county-wide professional development day for Champaign County education staff. As part of suicide prevention month in September, Mental Health First Aid Training was hosted by the coalition. All school districts in Champaign county entered into an MOU with the Suicide Prevention Coalition to allow Signs of Suicide Education and Screenings for Middle School students (6th grade) and High School students (9th grade). 656 middle and high school students received mental health education and 637 middle and high school students received a mental health screening. Education and screenings took place in all Champaign county school districts.

AMSR (Assessing and Managing Suicide Risk) Training was completed with members of Consolidated Care staff, Community health and wellness partners, and Adriel.

MEDIA & MARKETING:

Text Line kits, containing stickers, posters, and bracelets, were distributed to all middle and high schools in Champaign County to promote use of the Crisis Text Line. The coalition also funded a billboard and flyer campaign promoting Crisis Text Line use. The Urbana Daily Citizen regularly covered functions of the coalition.

AWARENESS:

For Suicide Prevention Month, the coalition hosted two events. An Awareness Ceremony that was held at Urbana University and the annual Color 5K, held at Ohio Caverns.

CHD Program Development Tool

	Background
1. Program/Project Name/Description <i>Core Comp: Program Planning Skills</i>	<p>5,2,1, Almost None</p> <p>The 5,2,1, Almost None Program focuses on healthy eating and physical activity as a means to prevent childhood obesity. The program consists of the following components:</p> <ul style="list-style-type: none"> • Eating FIVE or more servings of fruits and vegetables in a day • Spending no more than TWO hours a day in front of a screen • Getting ONE or more hours of physical activity a day • Drinking ALMOST NONE of sugary beverages
2. Project Purpose a) Why does the program exist? b) Does it align with strategic plan, mission/vision of agency, CHIP, state or national strategies, etc.? If so specify	<p>Overweight children are at an increased risk for developing a wide range of physical comorbidities, as well as emotional and social consequences, that have the potential to affect their health and quality of life, both now and in the future. Physical, emotional, and social implications as a result of excess body weight can include:</p> <ul style="list-style-type: none"> • Hypertension, elevated cholesterol, abnormal serum lipid levels • Insulin resistance and type 2 diabetes mellitus • Bone and joint problems • Shortness of breath that may make physical activity more difficult • Low self-esteem • Depression • Negative body image • Social stigma • Stereotyping • Discrimination • Teasing & bullying <p>In addition, risk factors which often begin during childhood (including high blood pressure, high cholesterol, and diabetes), can track into adulthood and lead to serious health problems such as cardiovascular disease. Reducing overweight and obesity during childhood and adolescence can help prevent serious health complications later in life.</p> <p>The 5,2,1, Almost None program aligns with the Healthy Living Committee Vision: All residents and employees in Champaign County embrace healthy behaviors leading to lifelong wellness</p> <p>And Mission: To provide shared resources and opportunities so all residents of Champaign County may attain their healthiest lifestyle.</p> <p>The program also aligns with the following goals of the committee:</p> <ul style="list-style-type: none"> • To encourage, educate, and support each person in pursuit of their optimum wellness, leading to continual improvement of the county health ranking. • To reduce the rate of diabetes among Champaign County residents. • To increase nutrition education among Champaign County residents. • To increase physical activity among Champaign County residents.
3. Program or Project Goals	<p>Overall Goal: Every Champaign County resident will be familiar with the 5, 2, 1, Almost None Program.</p>

CHD Program Development Tool

<p>What do you want to do through this program? What is one goal of this program?</p>	<p>Planned Timeline:</p> <ol style="list-style-type: none"> 1. For a 6 week period in the Spring of 2018, Graham 11th and 12th graders will learn the 5, 2, 1, Almost None Program, will develop games for 2nd & 3rd grade students to play as a learning tool, will develop a curriculum to teach the games, will complete pre & posttest on the 5,2,1, Almost None subject matter, and will complete a video aimed at elementary school children in order to promote the program. 2. Summer, 2018, the Healthy Living Committee will compile the information learned from the Graham High School students and will create a toolkit to present to elementary schools to introduce the program. 3. Fall 2018, the program will be introduced to 2nd and 3rd grade students at Graham elementary students, parents, and faculty and will continue throughout the 2018-2019 school year. 4. Summer 2019, The Healthy Living Committee will, based on the data collected from the program implementation at Graham Elementary, make any necessary changes to the program and will present it to the other Champaign County School systems for implementation at the beginning of the school year. 5. Fall 2019, the remaining county schools will implement the 5,2,1, Almost None program with all 2nd and 3rd graders.
<p>4. SMART Objective #1 related to this initiative/task Specific, Measurable, Achievable, Realistic and Time-based</p>	<p>For a 6 week period in the Spring of 2018, Graham 11th and 12th graders will learn the 5, 2, 1, Almost None Program, will develop games for 2nd & 3rd grade students to play as a learning tool, will develop a curriculum to teach the games, will complete pre & posttest on the 5,2,1, Almost None subject matter, and will complete a video aimed at elementary school children in order to promote the program.</p>
<p>5. Data Collection for SMART Objective #1:</p> <ol style="list-style-type: none"> a) How are you collecting data for objective above? b) How often are you collecting/ reporting data? c) Where is data reported? d) Who is responsible for collecting and reporting data? 	<p>Elaine Dyer has been in communication with the Nutrition program at Graham High School, which is the class completing the program. She will coordinate the completion of the project and the administration of the pre- & posttests.</p>
<p>See http://www.cdc.gov/healthcommunication/cdcyn</p>	<p>Development Requirements</p>

CHD Program Development Tool

ergylite.html for guidance	
<p>6. References/Data/Sources:</p> <p>Is there data to support the need of this program? Please list the data and the source of information.</p> <p><i>Core Comp: Assessment/Analysis</i></p>	<p>2015 High School Youth Risk Behavior Survey results relating to weight, body weight, dietary habits, and socioemotional status:</p> <ul style="list-style-type: none"> • % Champaign County (% State of Ohio) • 40.3% of students are overweight or obese (28.9%) • 37.1% of students describe themselves as slightly or very overweight (28.2%) • 14.2% of students did not eat fruit in the last 7 days. (5.1%) • 21.1% of students did not eat other vegetables not including potatoes, green salad, or carrots in the last 7 days (5.8%). • 73.6% of students drank a bottle, can, or glass of soda or pop at least one time per day for the last 7 days (20.5%) • 58.6% of students were physically active at least 60 minutes per day on LESS THAN 5 days in the last 7 (52%) • 23.1% of students watch 3 or more hours of television per day (28.2%) • 39.8% of students played video or computer games or used a computer for something not school related for more than 3 hours per day (37.3%)
<p>7. Evidence Based Public Health:</p> <p>Is evidence used in developing, implementing, evaluating and improving policies, programs or services? Are there existing best practices to support this initiative? See PHAB 10.1.1. List sources:</p> <p>Nemours Health & Prevention Services 5,2,1, Almost None. 2006. Nemours.org/growuphealthy.</p> <p><i>Core Comp: Public Health Sciences Skills</i></p>	<p>5,2,1,Almost None is an Evidence-Based program developed by Nemours Health and Prevention Services. According to Nemours' scientific overview of the program, overweight children are at an increased risk for developing a wide range of physical comorbidities, as well as emotional and social consequences, that have the potential to affect their health and quality of life, both now and in the future.</p> <p>Nemours Health & Prevention Services. (2018). <i>Nemours</i>. Retrieved from Grow Up Healthy: www.nemours.org/growuphealthy</p>
<p>8. Engage target audience in development:</p> <p>Describe ways the target audience was involved during the development (solicit review, input or</p>	<p>Target audiences will be involved in a variety of ways through the development process. The Graham High School students will be providing input and feedback by developing a curriculum to teach the elementary students while also learning the program themselves. Once the program is ready to be implemented in the elementary schools, several methods of audience interaction will be utilized, such as focus groups, informational meetings, surveys, and pre/posttests.</p>

CHD Program Development Tool

feedback) and provide documentation. See PHAB 3.1.2 (2-4)	
9. Literacy Has literacy of the clients been assessed? Is client feedback solicited about materials that the program uses? See PHAB 3.2.6.4/7.2.3.1 for number 9 & 10 <i>Core Comp: Communication</i>	All information that is being distributed to the elementary school students will be appropriate to their corresponding grade level. All other information will be at a 6 th grade reading level.
10. Cultural Competency How is Cultural Competency demonstrated? (e.g., language, culture, values, socioeconomic status, geography, education, race, gender, age, ethnicity, sexual orientation, profession, religious affiliation, mental and physical abilities, historical experiences) <i>Core Comp: Cultural Competency</i>	According to the US Census Bureau (2012-2016), Champaign County is 94.5% Caucasian, 2.3% African-American, 1.6% Hispanic or Latino with 98% of the county speaking English as their primary language. 11% of the county residents live in poverty. The program will be developed with the intention of addressing all residents of the county, regardless of cultural, physical, or social differences.
11. Population Health: How does the program address population health? If the program is clinical in nature what can be added to broaden the focus to a wider population?	The program is an educational program intended to change the population view of diet and exercise. The program works with large groups with the hope that the groups will then educate others in the community in order to eventually change the health culture of the county.
	Supportive Measures
12. Training: What training or workforce development is done for new or existing employees related to this initiative?	N/A

CHD Program Development Tool

<p>13. Process:</p> <p>a) Is there a SOP (procedure or process) written for this task?</p> <p>b) Where is it stored?</p>	<p>N/A</p>
<p>14. Customer Focus:</p> <p>What method is used to evaluate customer satisfaction for this initiative, project, or program?</p>	<p>Pre/Posttests, surveys, focus groups.</p>
<p>15. Quality Improvement:</p> <p>a) Is there existing Quality Assurance built into this program?</p> <p>b) What are ideas on how Quality Assurance for this new initiative be integrated?</p> <p><i>Core Comp: Leadership & Systems Thinking</i></p>	<p>The program will be reviewed annually and as needed during implementation so that the Plan, Do, Check, Act Process can be fulfilled and changes can be made as warranted.</p>
<p>16. Funding:</p> <p>What funding/resources support this program/project/initiative? What is the budget? (attach budget)</p> <p><i>Core Comp: Financial Planning/Management</i></p>	<p>N/A</p>
<p>17. Collaboration:</p> <p>Describe nature of collaboration with other agencies for this task if any.</p> <p><i>Core Comp: Community Dimensions of Practice</i></p>	<p>The program is being developed and facilitated by the Healthy Living Committee, which is made up of representatives of numerous facilities in the county. Collaboration will also take place with the school systems.</p>

CHD Program Development Tool

18. Visible Leadership- Employee Ownership: a) What department is responsible for this program? b) What staff is involved in this program?	Healthy Living Committee
Other notes?	
Completed By:	Healthy Living Committee
Completed Date:	April 5, 2018
Date approved by Leadership:	