



City of Vineland

Department of Health

Community Health Improvement Plan

Submitted by:

HOLLERAN

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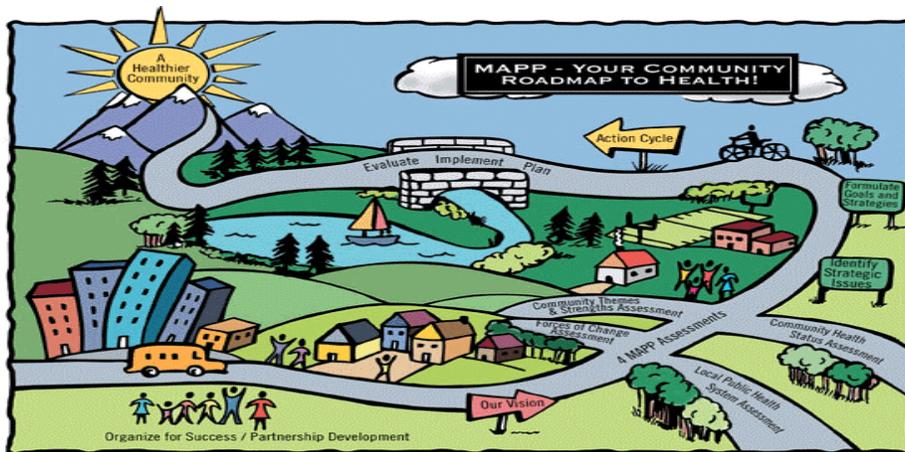
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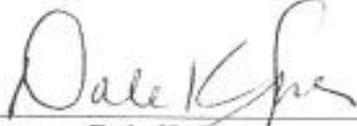
TO ALL PUBLIC HEALTH PARTNERS/RESIDENTS/INTERESTED PARTIES

The City of Vineland Department of Health leadership is pleased to present the Vineland Community Health Improvement Plan (V-CHIP). This plan is the result of a two year strategic planning process which prioritized public health issues in the community. Stakeholders from various area agencies and community-based organizations participated in a planning process known as "Mobilizing for Action through Planning and Partnerships" (MAPP), to develop a shared vision for improving the health and quality of life in the City of Vineland.

The end product of the first phase of this process is the Community Health Improvement Plan, which presents the public health issues of concern supported by the data gathered in recently completed community health assessments. The input from randomly selected households and in-person interviews collected from some 800 city residents was vital in identifying the top five (5) health issues and the related goals, objectives and strategies that became the plan.

We have reviewed and endorsed the V-CHIP and look forward to utilizing this document as the roadmap that will lead us to our goal of protecting and improving the health of our citizens.

The next phase of this process will involve the formation of "action committees" to address the priority issues identified. These committees, composed of individuals and groups, committed to improving the identified issues, will work together through the action phase to implement programs and policies for those strategies determined to be the most promising. Residents and community groups are encouraged to join the CHIP process by contacting our office for further information. Together we are going to make a difference in the City of Vineland.


Dale K. Jones
Health Director


George R. Saporio
Health Officer



Special arrangements for persons with disabilities may be made if requested in advance by contacting the Business Administrator's Office at 856-794-1144.

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Acknowledgements

The following organizations and agencies are commended for their involvement at various stages of the MAPP (*Mobilizing for Action through Planning & Partnerships*) process. Their commitment and enthusiasm has been critical in the success of the MAPP process in the City of Vineland.

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II. THE MAPP PROCESS

A. The MAPP Assessments

The MAPP (Mobilizing for Action through Planning and Partnerships) process outlines a comprehensive approach to assessing the health and well being of area residents. Specifically, the MAPP framework promotes various research phases and assessments to provide a 360 view of a particular town, county, or geographic area. The City of Vineland initiated the MAPP process in 2008 on the heels of conducting two comprehensive community-wide surveys that focused on the health risk factors of Vineland residents. The key MAPP components that the City of Vineland executed are as follows.

1. Forces of Change Assessment

2. Community Health Status Assessment

- *Behavioral Risk Factor Surveillance System (BRFSS) Study*
- *Hispanic/Latino Behavioral Risk Factors Surveillance System (BRFSS) Study*

While each assessment may identify similar themes within their findings, each of the assessments has a unique set of objectives and outcomes.

Forces of Change Assessment

The purpose of the Forces of Change Assessment is to identify what is occurring or might occur that affects the health of the community and local public health system. The discussion focused on forces within Vineland, New Jersey.

The session took place on June 6, 2008 and lasted approximately three

hours. Twenty one (21) individuals from various social service agencies, not-for-profit organizations, health departments and other health agencies participated in the session, which was held at the Vineland Department of Health conference room.

The attendees dialogued about the forces of change they perceive to exist in Vineland. The following list outlines the top seven prioritized “forces” identified by attendees.

- 1. Lack of consistent funding*
- 2. Poverty*
- 3. Teen pregnancy rates*
- 4. Increasing healthcare costs*
- 5. Transportation*
- 6. Child welfare issues*
- 7. Substance abuse*

Community Health Status Assessment

Behavioral Risk Factor Surveillance System (BRFSS) Study

The Vineland Department of Health requested that Holleran conduct a Behavioral Risk Factor Surveillance System (BRFSS) study among its adult community using the Centers for Disease Control and Prevention (CDC) BRFSS tool. The BRFSS is a national initiative headed by the CDC that assesses the health status and risk factors among the population.

The Vineland Department of Health coordinated with representatives from Holleran and customized the BRFSS tool to assess the needs of Vineland City. The tool was developed by selecting various core sections and modules from the standard BRFSS tool. Depending upon respondents’ answers to questions regarding diabetes, hypertension awareness, tobacco use, and others, interviews averaged 12 to 15 minutes in length.

A sampling strategy was developed by Holleran and approved by the Vineland Department of Health. The sampling strategy identified the number of completed surveys needed within the ZIP codes of the city. The final sample (490) yields an overall error rate of +/-4.4% at a 95% confidence level. Data collection took place between December 4 and December 21, 2007.

The survey findings yielded several areas of strength, as well as areas of opportunity for Vineland residents. Areas of strength and areas of opportunity were defined according to how Vineland compared to state and national statistics.

Areas of strength

- Having a personal doctor
- Having a routine checkup within the past year
- Drinking alcoholic beverages at least three days per week
- Having been tested for HIV
- Having been tested for HIV within the past year

Areas of opportunity

- Proportion of obese residents according to BMI
- General health status
- Participation in non-work-related physical activities or exercises
- Prevalence of diabetes
- Diagnosis of diabetes at less than 45 years of age
- Checking blood for glucose or sugar on a daily basis
- Health problems requiring the use of special equipment

Hispanic/Latino Behavioral Risk Factor Surveillance System (BRFSS) Study

The City of Vineland Department of Health also conducted a BRFSS study that focused solely on the health risk factors for the Hispanic/Latino

population in Vineland. A total of 301 Hispanic individuals who reside in Vineland City were interviewed to assess their health practices and health status. Face-to-face interviews were conducted between July 2006 and August 2007. Each interview lasted approximately 12-15 minutes depending upon what criteria were met by the respondents.

Similar to the all-resident BRFSS study, the survey findings yielded areas of strength, as well as areas of opportunity for the Hispanic/Lationa residents of Vineland City. Areas of strength and areas of opportunity were defined according to how Vineland compared to Hispanic and Latino residents from New Jersey and the nation as a whole.

Areas of strength for Vineland Hispanics/Latinos

- Having a personal doctor
- Flu vaccine
- Checking blood for glucose
- PSA tests

Areas of opportunity for Vineland Hispanics/Lations

- Proportion of “obese” residents
- General health status
- Physical health in the past 30 days
- Mental health in the past 30 days
- Not being able to see a doctor due to cost
- Health problem requiring special equipment
- Diabetes prevalence
- Taking a course in managing diabetes
- Quitting smoking
- Participation in physical activity for exercise
- Mammograms
- Pap tests
- Digital rectal exams

- Colonoscopy or Sigmoidoscopy
- Intimate partner physical violence
- Intimate partner threatened physical violence

Interested in more information?

Detailed summaries of the findings from each of the assessments are available for interested parties. The reports are available by contacting the City of Vineland Health Department at 856-794-4131 or on the website www.vldhealth.org

B. Identification of Strategic Issues

On July 17, 2008, approximately 17 individuals from various social service agencies, not-for-profit organizations, and other health agencies participated in a brainstorming/planning session, which was held at the Vineland Community Nursing Center.

The session began with an overview of the full MAPP process, reviewing the initial assessment phases already achieved within Vineland. A summary of the findings from two Behavioral Risk Factor Surveillance System (BRFSS) studies was reviewed as well as the conclusions from the Forces of Change assessment. The two BRFSS studies revealed statistics on the health status of all Vineland residents as well as the specific health needs of the Hispanic/Latino population within Vineland. The issues that arose out of that presentation, along with the themes identified in the June Forces of Change meeting, were discussed. Areas of significant overlap were identified.

As a large group, attendees verbalized the issues they viewed as significant within the city. The identified issues were driven in combination by a review of the assessment findings and attendee perspectives. Following the identification seven strategic issues, the attendees voted on the list and prioritized the seven issues. Attendees were asked to write down what they viewed as the three most significant issues. Based on the prioritization of the seven issues and the group's decision to consolidate a few of the issues into one, the following four issues were adopted as the key areas to focus upon in Vineland.

1. Access to healthcare/healthcare competency

- *Integrates cost of healthcare, poverty, transportation issues*

2. Obesity

- *Integrates diabetes, nutrition, physical activity*

3. Substance abuse

- *Integrates mental health, transportation, educational attainment, and navigation of the 'system'*

4. Teen pregnancy rates

- *Integrates educational attainment, transportation, needs of Hispanic/Latino females*

C. Development of Goals & Strategies

The attendees also met as small workgroups to discuss goals and strategies to address each of the four strategic issues. The following pages outline the four strategic issues and the goals that were identified for consideration. Additionally, specific suggestions regarding implementation details were put forth. It should be noted that the following goal statements and implementation details present recommendations. Final implementation strategies may be revised slightly to align with available resources, current initiatives, and changing trends.

1. Access to healthcare/healthcare competency

Goal Statement: Increase the awareness of options for medical resources.

Recommended Strategies:

1. Increase publication of health resource information.
 - a. **Implementation Details**
 - i. Contact Vineland health providers to determine possible resources and eligibility requirements.
 - ii. Work with the developing congress of Non-profits to make sure Vineland is included.
2. Develop public kiosk in a centrally accessible area.
 - a. **Implementation Details**
 - i. Locate a site where homeless and those living in poverty can easily access.
 - ii. Contact county wide healthcare providers to send in information.
3. Make 2-1-1 more accessible and keep up to date.
 - a. **Implementation Details**
 - i. Contact 2-1-1 administration to find out how to access from cell phone or public phone.
 - ii. Encourage providers to keep information current.
4. Expand existing transportation services for medical services (door-to-door)
 - a. **Implementation Details**
 - i. Create more public awareness about access link, CATs, and reduce fare for New Jersey transit through media (Spanish radio station), use of kiosk.
5. Funding for community health workers.
 - a. **Implementation Details**
 - i. Patient navigators
 - ii. Community health workers

2. Obesity

Goal Statement: There will be a 5% decrease in obesity and type 2 diabetes in families who participate in the community sponsored nutrition, wellness, and physical activity programming by 2010 as measured by BMI, waist measurements and blood glucose levels.

Recommended Strategies:

1. Implementation of Mayor's wellness program in community
 - a. **Implementation Details**
 - i. Representation from agencies, schools, community leaders, and businesses in the community.
 - ii. Develop public awareness through marketing of program.
2. Increase awareness of health risks of obesity and its linkage to type two diabetes and other chronic health diseases.
 - a. **Implementation Details**
 - i. Develop better message and delivery system for each targeted Vineland audience. Ex: Spanish, Russian
 - ii. Bring representatives from SJH and VHD and other agencies to faith based neighborhoods and ethnic centers.
 - iii. Sponsor community wide events to encourage healthy lifestyle changes and diabetes awareness. Ex: Activate Vineland.
3. Advocacy for policy planning changes and legislation.
 - a. **Implementation Details**
 - i. More bike and walk paths
 - ii. Safer communities, lights, sidewalks, police protection, city-sponsored walking clubs-safe streets
 - iii. More structured recesses in schools. STEPS activities in VPS.
 - iv. Neighborhood co-ops like vegetable gardens with city funding.
4. Enlist business communities like supermarkets, restaurants, and

shops to support health choices.

a. Implementation Details

- i. Incentives for healthy choices in supermarket and restaurants.
- ii. Cooking demonstrations for diabetics and healthy eating in supermarkets and restaurants.
- iii. Grants form banks and businesses, gift certificates, prizes (WII, bikes).
- iv. More support for new businesses that encourage low-cost family activities like miniature golf, skating, etc.
- v. Enlist businesses to have employee wellness programs-exercise during lunch, etc.

3. Substance abuse

Goal Statement: Decrease the use of ATOD and increase the knowledge of services available with in the city.

Recommended Strategies:

1. Create a list serve for professionals to be resources for referral.

a. Implementation Details

- i. Collect data and develop forum
- ii. Immediate turn around put on list serve and email to providers
- iii. Add to VHD website the provider info and their resources

2. Educate legislature for funding for providers and healthcare reimbursement for treatment.

a. Implementation Details

- i. Create public awareness by working with media of how insurance companies are dictating health care needs.
- ii. Meet with elected officials.

3. Prevent adolescent and young adult ATOD use.

- a. **Implementation Details**
 - i. Collaborate with substance abuse producers to work on prevention.
 - ii. Work with schools to reach out to teens.
 - iii. Providers as a collaborative work group apply for strategic prevention grant.
 - iv. Utilize persons in recovery as mentors.
4. Fund a cessation specialist position at the VHD.
 - a. **Implementation Details**
 - i. Find funding for specialist NRTS and DOC.
 - ii. Educate the public about FREE service.
 - iii. Collaborate with other tobacco prevention programs.
 - iv. Continue to collaborate with FQHC's and open arms and office of the aging
5. Collaborate with guidance centers like Hendrix House.
 - a. **Implementation Details**
 - b. CEAS committee membership (attend meetings) and involve them in working groups

4. Teen pregnancy rates

Goal Statement: Reducing teen birth rate by 2% over previous year due to increased knowledge of available programs and services.

Recommended Strategies:

1. Awareness of teen pregnancy issue in Vineland.

- a. **Implementation Details**

- Work shops
- After-school programs, activities
- Education
- Work with schools to reach out to teens
- Develop peer mentoring program between teen moms and at-risk youth
- Cultural differences (i.e. Hispanic lifestyles)

2. Prevention of teen pregnancy in Vineland.
 - a. **Implementation Details**
 - Prevention courses for young men and women
 - Teen PEP (Peer Education Program) use youth leaders
 - Testimonial (controlled) condom distribution
3. Diverting teens from getting pregnant.
 - a. **Implementation Details**
 - Passport to manhood (example of boys and girls club programs)
 - Smart girls (example of boys and girls club programs)
 - Training for social service agencies (work together)
 - Teen council (from schools) 18? Teens (*)
4. Interviewing with teens that are pregnant.
 - a. **Implementation Details**
 - Education (WIC, Impact)
 - New vizzions programs
 - Family care, women's care center, open arms
 - Legal issues/paternity/maternity
 - Transportation (bus loop in community)
5. Follow up with teens regarding pregnancy.
 - a. **Implementation Details**
 - Linkages to services
 - Determine how many teen pregnancies are evident (after care)

III. NEXT STEPS

It is anticipated that workgroups will be put into place to address each of the four strategic issues. Each workgroup will meet on a regular basis to develop action plans, provide committee updates, etc. The Community Health Improvement Plan (CHIP) will also drive strategic decisions within the City of Vineland Health Department. Additionally, it is encouraged that supporting agencies and organizations also utilized the CHIP as a guiding resource for initiatives that support the health and well-being of Vineland City residents.

The City of Vineland Community Health Improvement Plan will be refined and evaluated as necessary during the implementation phase. The various workgroups will evaluate the success of various programs and may modify goals and initiatives accordingly. While minor continuous refinement in the coming years is expected, it is anticipated that the entire MAPP process will be executed once again in approximately four years. The resulting product will be another Community Health Improvement Plan for the future of Vineland City and its residents.