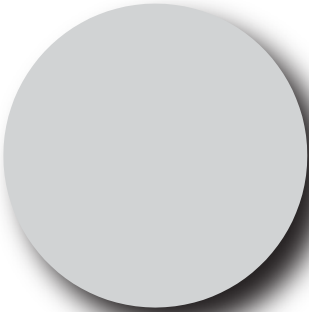
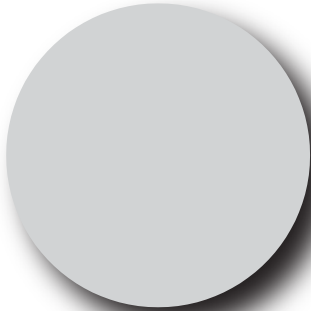
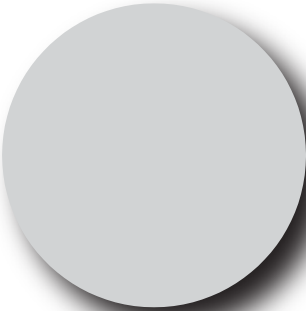
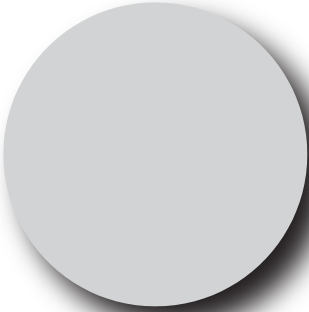


2017-2019 Community Health Improvement Plan

Williamson County, TX





To Our Valued Community Partners

Thank you for your dedication to making Williamson County an even healthier place to live, work, worship, learn, and play. As your public health department, the Williamson County and Cities Health District (WCCHD) is committed to working with you as a partner to realize the shared vision of “Healthy People Thriving in Healthy Communities.” The 2017-2019 Community Health Improvement Plan (CHIP) is our collective roadmap to making that vision a reality. The CHIP defines concrete goals and objectives that the community will measure and achieve to ensure progress.

The CHIP was built upon the foundation established by the 2016 Community Health Assessment (CHA). The 2016 CHA provided a comprehensive snapshot of the health status of Williamson County as told in both the data and the powerful stories of community members.

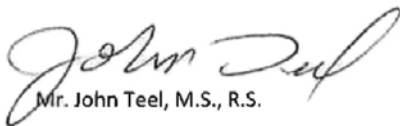
This CHIP belongs to you. The community identified the priorities, wrote the plan, and implemented the plan. Williamson County is a large and diverse place, and none of us can create this change alone. The shared ownership of community health among diverse stakeholders offers better mobilization and utilization of resources to achieve improvement. We are truly better, and stronger, together.

Sustained and broad community involvement is the key to achieving the goals set forth in this plan. Through the organizing structure of the WilCo Wellness Alliance (WWA), WCCHD will help to coordinate efforts and track progress against goals. WCCHD will also provide support staff and guidance so that the community partners can focus on action.

I encourage everyone to take part in improving the health of our county. Information on how to join the 500 plus members of the Alliance is available at www.HealthyWilliamsonCounty.org. Join today!

Community-level change is hard. However, when the community comes together, sees the Alliance in action, and witnesses the strength in numbers, I have no doubt that we will be able to make a real and measurable difference.

Very sincerely yours,



Mr. John Teel, M.S., R.S.

John Teel RS
Executive Director
Williamson County and Cities Health District



Mental Health



Access to Healthcare



**Awareness of
Healthcare Resources**



Active Living



Chronic Disease

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The dedication, expertise, and leadership of a large number of organizations and individuals made the 2017-2019 Williamson County Community Health Improvement Plan (CHIP) possible.

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The following organizations and individuals graciously provided support for this project:



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Williamson County 2017-2019 Community Health Improvement Plan

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WilCo Wellness Alliance Participating Organizations

Active Life HQ
AGE of Central Texas
Alcohol Anonymous
American Heart Association
Amerigroup
Austin Community College
Austin Oaks Hospital
Austin Public Health
Baylor Scott & White Health

Little Engine Homecare
Live Family Fit
Lone Star Circle of Care
Marathon Kids
Maximus
Medxcel Facilities Management
MomCare Network
Mothers Against Drunk Driving (MADD)
National Alliance of Mental Illness (NAMI) Austin

Williamson County 2017-2019 Community Health Improvement Plan

Bike Hutto
Bluebonnet Trails Community Services
Boys & Girls Club of Georgetown
Brazos Valley Council on Alcohol and Substance Abuse
Breast Cancer Resource Center
Capital Area Council of Governments
Capital Area Trauma Regional Advisory Council
Capital of Texas Alzheimer's Association
CATCH Global Foundation
Cedar Park Fire Department
Cedar Park Office of Emergency Management (OEM)
Cedar Park Police Department
Cedar Park Regional Medical Center
Celebrate Recovery
Central Texas Food Bank
Central Texas Perinatal Coalition
Child and Youth Behavioral Health Task Force
City of Cedar Park
City of Georgetown
City of Hutto
City of Leander
City of Liberty Hill
City of Round Rock
City of Taylor
Community Health Paramedicine
Cross Creek Hospital
Dairy MAX
Dell Children's Medical Center
Dickey Museum & Multipurpose Center
Elgin ISD
Florence Fire Department

Georgetown Area Parkinson's Support Group
Georgetown Behavioral Health Institute
Georgetown EMS
Georgetown Fire Department
Georgetown Health Foundation
Georgetown Housing Authority
Georgetown ISD

Georgetown OEM
Georgetown Project
Good Life Taylor
Greater Williamson County YMCA
Hays County Public Health

New Day Intervention Counseling
One Life Health Coaches
Opportunities for Williamson & Burnet Counties
Peers Of Faith
Phoenix House
Q.care ~ On Demand House Calls
Resurgent Pointe Counseling and Education Services
Rock Springs Hospital
RockPointe Church
Round Rock Christian Church
Round Rock Fire Department
Round Rock ISD
Round Rock OEM
Sacred Heart Community Clinic
Samaritan Health Ministries
Seton Healthcare Family
St. David's Healthcare
Strong Start – SAFE (Stop Abuse for Everyone)
Superior HealthPlan
Sustainable Food Center
Taylor Fire Department
Taylor ISD
Taylor OEM
Texas A&M Agrilife Extension Service
Texas A&M Health Science Center (TAMHSC)
TAMHSC Regional Partnership 8
Texas A&M University College of Medicine
Texas Department of Agriculture
Texas Department of State Health Services
Texas Division of Emergency Management
Texas Funeral Directors Association Disaster Response Team
Texas Health and Human Services
Texas Mother-Friendly Worksite Program
Texas State University
The Christi Center
The Georgetown Project
The Volunteer Center
The Williamson County Institute for Excellence in Nonprofit Inc.
United Way of Williamson County
University High School
Williamson County and Cities Health District
Williamson County
Williamson County Attorney's Office

Williamson County 2017-2019 Community Health Improvement Plan

Health Service Region 7	Williamson County Constables
Hope Alliance	Williamson County Emergency Communications
Hutto Fire Department	Williamson County EMS
Hutto Has Heart	Williamson County HAZMAT
Hutto ISD	Williamson County Justice of the Peace
Interagency Support Council of Eastern Williamson County, Inc.	Williamson County Juvenile Services
IT'S TIME TEXAS	Williamson County Mobile Healthcare Link
Jarrell ISD	Williamson County Mobile Outreach Team
Leander Fire Department	Williamson County OEM
Leander ISD	Williamson County PIO
Leander OEM	Williamson County Precinct Two
Liberty Hill ISD	Williamson County Sherriff's Office (WCSO)
LifeSteps Council on Alcohol and Drugs	WCSO Crisis Intervention Team (CIT)

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Authors: Melissa Tung (Lead) and Ray Langlois

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For more information or questions, please visit:
www.HealthyWilliamsonCounty.org

Executive Summary

Overview¹

According to the Public Health Accreditation Board (PHAB), a Community Health Improvement Plan (CHIP) is "a long-term, systematic effort to address public health problems on the basis of the results of community health assessment activities and the community health improvement process." A CHIP rallies community-wide efforts and targets resources to improve health. A CHIP looks outside the work of the local health agency to the work of the community. Williamson County and Cities Health District (WCCHD), in collaboration with the WilCo Wellness Alliance (WWA), developed the 2017-2019 Community Health Improvement Plan. The CHIP is Williamson County's plan to improving the health of its community.

WilCo Wellness Alliance (WWA)

The WWA is the county's health and wellness coalition. The WWA is a group of community partners and support agencies that works together to empower the community to lead healthier lives. Organizations that participate include city and county governments, non-profits, healthcare agencies, colleges, school districts, faith-based groups, healthcare providers, and businesses. The WWA oversees health improvement activities, recommends direction and priorities, and promotes ways for groups to rally around health issues.

The WWA consists of four community groups organized by location and nine working groups organized by subject area. Throughout the health improvement process, the WWA collected data, provided feedback, and developed goals, objectives, and strategies for the CHIP. The WWA will implement the CHIP to improve health outcomes and routinely monitor implementation to ensure progress.

Identifying the Top 5 Health Priorities

In June 2016, WCCHD, WWA, and local partners published an updated summary of the health status of the county also known as the 2016 Community Health Assessment (CHA). The CHA Team used the Mobilizing for Action through Planning and Partnerships (MAPP) framework to develop the CHA. MAPP is an evidence-based, systematic, and outcome-focused method of engaging local stakeholders. Through the 2016 CHA, the community determined the top five health priorities in the county.

The Top Five Health Priorities For Williamson County Are:

1. **Mental Health:** Prevention, early intervention, support, and treatment for mental illness
2. **Access to Healthcare:** Basic, affordable healthcare available for all residents
3. **Awareness of Healthcare Resources:** Available information and communication channels for resources
4. **Active Living:** Resources, access, and awareness for physical activity opportunities
5. **Chronic Disease:** Prevention, treatment, and management of chronic diseases

¹ References provided in the main document have been removed from the Executive Summary for brevity.

Developing Action Plans

The county developed health priority action plans by leveraging the existing framework of the WWA. Four community groups and nine working groups of the WWA worked together to develop these health priority action plans. Working groups brainstormed individual working group action plans with goals, objectives, and strategies to target one or more of the top five health priorities. Community groups provided progresses and challenges in tackling these priorities for their specific areas.

Working groups participated in workshops to develop and refine their action plans. Either the working group chairs or WCCHD staff facilitated each action planning session. Larger working groups identified smaller task forces to participate. Groups met between two and seven times and spent between four to fourteen hours developing their plans. The working groups used the “Wisconsin Action Plan” implementation template, first developed by the Wisconsin CHIP Infrastructure Project and later modified by Austin Public Health. The template provided a framework for working groups to develop goals, objectives, strategies, and performance indicators. The nine working group action plans are located in Appendix A.

Community groups provided feedback about the five health priorities in the four geographic regions of the county by identifying progresses and challenges for each priority. The CHIP Team synthesized results from the four groups and identified similar challenges between the groups. Feedback from community groups helped to narrow down specific areas of interest to target resources and services within each health priority.

Action Cycle (Planning, Implementation, and Evaluation)

Planning, implementation, and evaluation of progress on the 2017-2019 CHIP, hereafter referred to as the action cycle, is the next step in the health improvement process. The action cycle is a continuous process conducted annually from 2017 to 2019. Every year, working groups will plan, implement, and evaluate. First, groups will plan for implementation of strategies by assigning individuals and allocating resources to strategies. Second, groups will carry out those strategies. Third, groups will evaluate progress and address barriers to implementation of strategies. Feedback from earlier cycles will inform and improve later cycles.

Conclusion

Williamson County is a large and diverse place. No one group or individual can create change alone. Sustained and broad involvement is necessary to address the strategic health issues within the community. Solutions, like the issues, require the resources of many groups and individuals. The following guide demonstrates how the whole community can use the CHIP and participate in community health improvement.

How to Participate in Community Health Improvement

<p>How Can We All Participate in Community Health Improvement?</p> <ul style="list-style-type: none"> • Implement the CHIP by joining the WWA and participating in working and community groups 	
<p>How Can Local Government Participate?</p> <ul style="list-style-type: none"> • Incorporate CHIP into strategic and future planning • Advocate for policies and resources that improve the five health priorities 	<p>How Can Businesses and Employers Participate?</p> <ul style="list-style-type: none"> • Participate in Employee Wellness working group • Promote worksite wellness policies and resources that focus on the five health priorities
<p>How Can Health Care Systems, Insurers, and Clinicians Participate?</p> <ul style="list-style-type: none"> • Work to increase insurance coverage and access to healthcare to Medicaid, low income, and uninsured individuals, especially for mental health • Provide mental health services in the county 	<p>How Can Early Learning Centers, Schools, Colleges, and Universities Participate?</p> <ul style="list-style-type: none"> • Participate in School Health working group • Equip educators with skills to promote and improve health
<p>How Can Community, Non-Profit, and Faith-Based Organizations Participate?</p> <ul style="list-style-type: none"> • Align health improvement efforts with the CHIP • Leverage additional resources by referencing the CHIP 	<p>How Can Individuals and Families Participate?</p> <ul style="list-style-type: none"> • Practice and promote healthy behaviors in the community • Advocate for community health improvement in the places where you live, work, worship, play, and learn

Community-level change is hard. However, when the county comes together, sees the WWA in action, and witnesses strength in numbers, the community can make a real and measurable difference. The county is truly better, and stronger, together. Even though challenges lay ahead, the community strives to make the county a healthy place where residents live, work, worship, play, and learn.



Mental Health



Access to Healthcare



Awareness of Healthcare Resources



Active Living

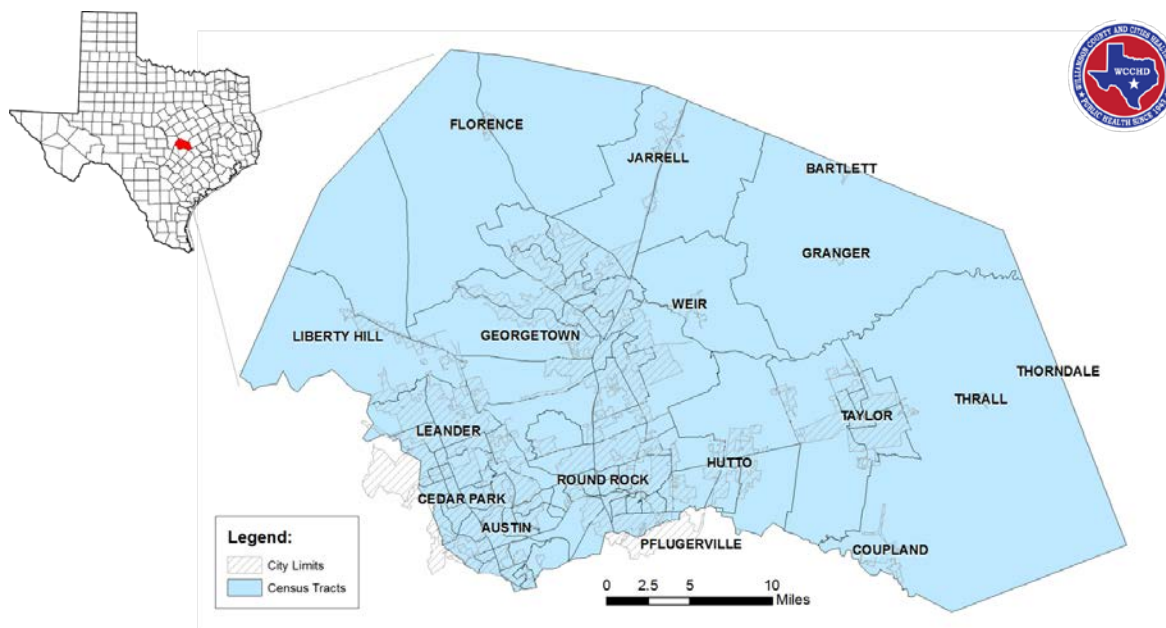


Chronic Disease

Introduction

Williamson County is a rapidly growing mid-sized county located in Central Texas just north of the state’s capitol of Austin (Figure 1). Burnet County borders Williamson County to the West. Bell County borders the county to the North. Milam and Lee Counties border the county to the East. Travis and Bastrop Counties border the county to the South. With a total estimated population in 2016 of 508,607 residents, the county has experienced dramatic population growth in the last decade. Demographic changes have accompanied the overall population growth, with large increases in Hispanic, Asian American, and aging populations (1).

Figure 1: Map of Williamson County, Texas



*Map Source: Public Health Initiatives and Planning Division, WCCHD; Created: July 2016
If you have any questions about this map, please contact wwa@wchd.org.*

As of 2016, the County Health Rankings ranked Williamson County in the top three healthiest counties in Texas for the sixth consecutive year (2). Out of 241 ranked counties, the county was third overall in health outcomes and third overall in health factors. The county was top ten for health behaviors (#8), clinical care (#4), and social and economic factors (#3). However, the county was ranked 135th for physical environment (2). Although the county tends to be healthier as compared to the state, disparities in community health continue to persist across the county (3).

In 2012, the county began the first cycle of the health improvement process to address these gaps in health (Figure 2). Williamson County published the 2013 Community Health Assessment (CHA) and identified the top ten health priorities. Afterwards, the county developed the 2014-2016 Community Health Improvement Plan (CHIP). Between 2014 and 2016, the community carried out this action plan. During the spring of 2015 and 2016, the CHIP Team and the WWA published annual progress reports of health improvement activities.

Figure 2: Community Health Improvement Process



Figure Source: Public Health Initiatives and Planning Division, WCCHD

2016 Community Health Assessment (CHA)

Figure 3: 2016 Williamson County Community Health Assessment

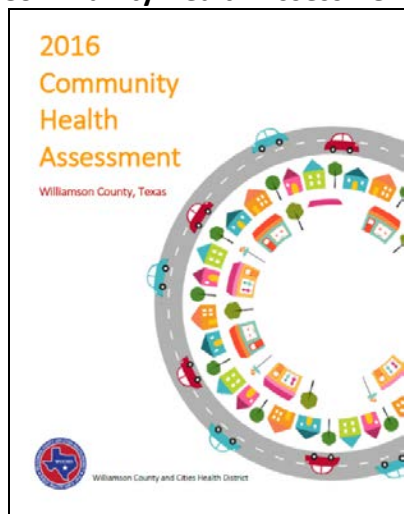


Figure Source: WCCHD, 2016

Community health improvement is a continual process with a new cycle beginning again February 2015. The county published a newly revised assessment of the health status of the community also known as the 2016 CHA (Figure 3).

Through the CHA, the Williamson County CHA Strategic Planning Team (hereafter referred to as the CHA Team) identified existing and emerging health needs, strengths and assets, key issues that affect quality of life, key forces of change, and priorities for improvement in the local public health system. The CHA Team also incorporated community feedback and lessons learned from the first cycle of health improvement into the new CHA.

The community identified the top five health priorities for future improvement efforts. The 2016 CHA sets the foundation for the 2017-2019 CHIP, which is the focus of this document.

2017-2019 Community Health Improvement Plan (CHIP)

The 2017-2019 CHIP is Williamson County's commitment and plan to improve the health of the community. According to the Public Health Accreditation Board (PHAB), a CHIP is "a long-term, systematic effort to address public health problems on the basis of the results of community health assessment activities and the community health improvement process"(4). A CHIP rallies community-wide efforts and targets resources to improve health for the next three years. A CHIP addresses the strengths, weaknesses, challenges, and opportunities that affect the health of the community (5). A CHIP looks outside the work of the local health agency to the work of the community (6).

WilCo Wellness Alliance

The WilCo Wellness Alliance (WWA) is the county’s health and wellness coalition. The WWA is a group of local partners and organizations that work together to empower the community to lead healthier lives. The WWA was formed in 2009 after it was chosen as an ACHIEVE (Action Communities for Health, Innovation, and EnVironmental changE) community.

The WWA consists of both community members and organizations. Organizations involve all sectors of life including city and county governments, non-profits, healthcare agencies and providers, colleges, school districts, faith-based groups, and businesses. The WWA monitors activities of the health improvement process, recommends strategic direction and priorities, and facilitates ways for groups to rally around health issues. WWA encourages membership for all groups and individuals focused on improving the lives of others. The coalition works to develop plans that benefit the entire county, not just WWA members.

The WWA and WCCHD designed the Healthy Communities Alignment Model to demonstrate the need for alignment among the CHA, the CHIP, and the local health coalition in order to create balance, inclusiveness, engagement and sustainability. The model embraces the view of forming a group of stakeholders around an action plan to address local health priorities. Throughout the health improvement process, the WWA collected data and provided feedback on goals, objectives, and strategies. The WWA will be responsible for implementing CHIP action plans to improve outcomes of the five health priorities as well as continuously monitoring implementation to ensure progress. Combined with this feedback, new community input and data will allow the WWA to develop a new CHIP (Figure 4).

Figure 4: Healthy Communities Alignment Model

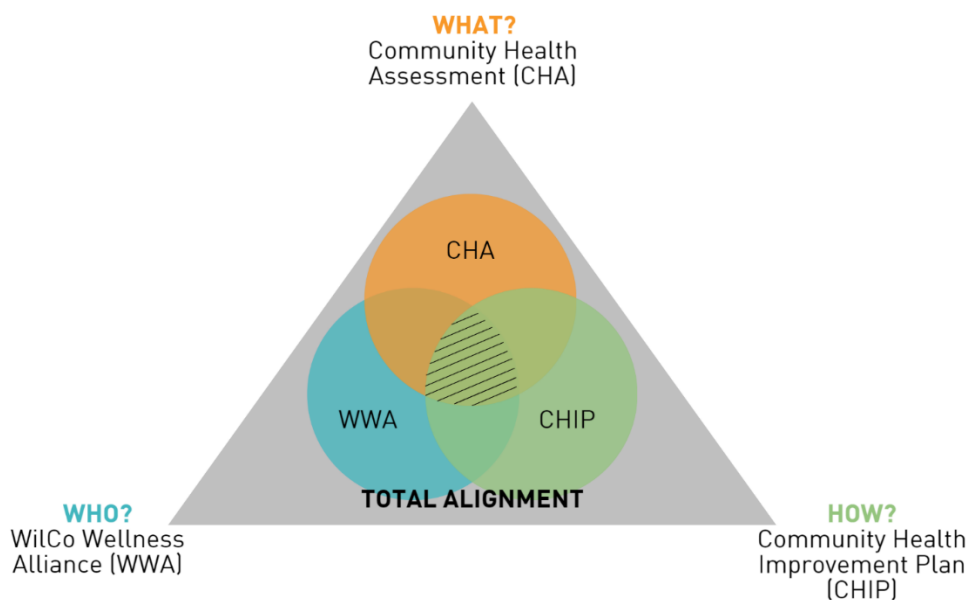


Figure Source: Public Health Initiatives and Planning Division, WCCHD

Working Groups

The WWA consists of four community groups and nine working groups (Figure 5) that collaborate to address the top five health priorities. Either WCCHD staff or external community partners support working groups. The WWA developed new working groups in response to the top ten health priorities identified in the 2013 CHA.

The working groups are:

Active Living: Active Living focuses on improving active living in the community. The group encourages the use of existing active living resources, creates awareness of new opportunities, and provides spaces for collaboration and information sharing around physical activity and the built environment.

Employee Wellness: Employee Wellness focuses on building a workplace that supports healthy lifestyles. The group improves and sustains employee health by focusing on prevention and wellness. Members work to recruit worksite wellness coordinators, human resources personnel, and supporting wellness agencies to network, collaborate, and build awareness.

Healthy Eating: Healthy Eating focuses on increasing the availability of healthy foods throughout the county. The group works to build awareness of healthy eating practices and to improve access to healthy foods. All organizations who seek to improve the healthy eating landscape for those in need are welcome.

Maternal and Infant Health: Maternal and Infant Health focuses on creating a healthy environment for the physical, mental, and emotional health of women and their families. The group works to improve access to healthcare, to increase collaboration of related healthcare organizations, and to promote continuity of care.

Mental Health Task Force (MHTF): MHTF has developed and coordinated behavioral health initiatives in Williamson County for the past ten years. The goal of the task force is to sustain a coordinated behavioral health system of care that focuses on prevention and early intervention, provides integrated services and access to care by eliminating barriers, reduces stigma through building awareness, and improves outcomes in a community that respects and preserves the rights of all and focuses on the whole person.

Subcommittees of the MHTF include the Child and Youth Behavioral Health Task Force, Alan's Hope Project for Suicide Prevention and Awareness, and the Professional Peer Review Committee. The Child and Youth Behavioral Health Task Force develops and coordinates prevention and early intervention systems of care for youth. Alan's Hope increases community awareness of resources and interventions available to the prevention of suicide. The Professional Peer Review Committee coordinates unified, integrated treatment planning for individuals with complex needs, such as mental health and chronic disease, across many care settings.

Public Health and Medical Preparedness Committee (PHaMP): PHaMP is a coalition that coordinates preparedness and response activities among emergency management agencies, public health, EMS, and healthcare organizations in order to rapidly diagnose, investigate, and respond to health problems and health hazards within Williamson County.

School Health: School Health promotes a coordinated approach to school health. The group will work to build collaboration between schools and community organizations and to increase awareness of resources.

Substance Abuse Collaborative: LifeSteps Substance Abuse Prevention Coalition “is committed to raising public awareness of the risks and consequences of underage drinking and drug abuse, educating the community about current and emerging drug trends, partnering with school districts, building liaisons with decision-makers, parents, the medical and faith communities, as well as law enforcement. [The coalition works] to develop, implement and support environmental strategies to reduce substance abuse. [The coalition] believes by working together, citizens can nurture social and environmental changes to make Williamson County a safer and healthier place, brightening the future of our children, youth and families.” For more information, visit <http://lifestepsCouncil.org/coalition/>.

Systems of Care (SOC): SOC focuses on innovative ways to build health systems’ capacity in the community. This group works to plan and develop integration between Williamson County providers participating in the Medicaid 1115 Waiver.

Figure 5: WilCo Wellness Alliance Coalition Model

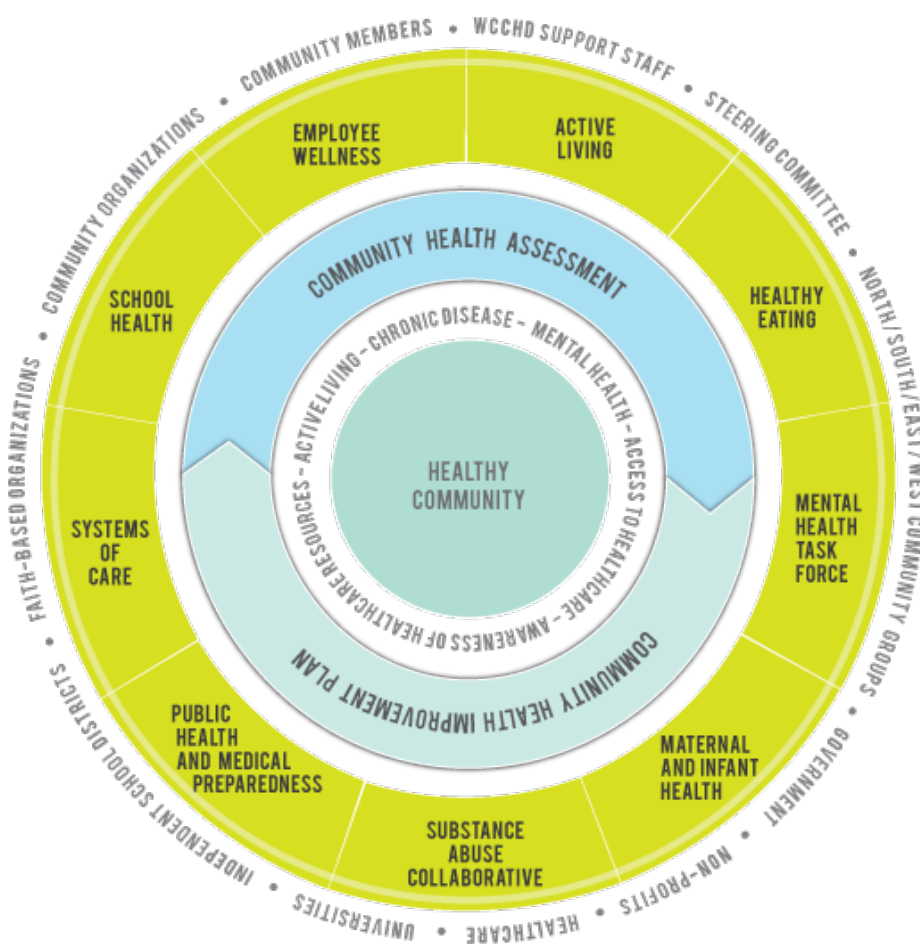
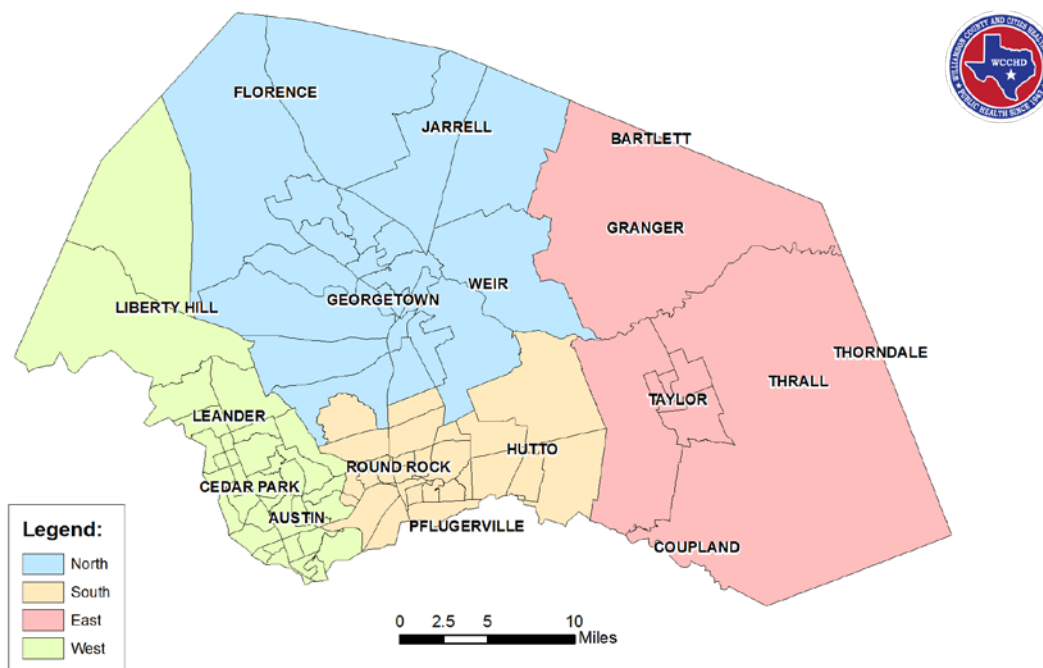


Figure Source: Marketing and Community Engagement Division, WCCHD

Community Groups

Due to unique needs in different parts of the county, the WWA organized community groups by geography: North, South, East, and West (Figure 6). The community groups meet between two to three times annually. At these meetings, community members share strengths, assets, needs, and current initiatives about their city and/or region. These groups provide feedback to help tailor CHIP initiatives to the specific needs of each geographic region.

Figure 6: WilCo Wellness Alliance Community Groups Geographic Areas



Map Source: Public Health Initiatives and Planning Division, WCCHD; Created: July 2016
If you have any questions about this map, please contact wwa@wcchd.org.

Community and Working Group Chairs

A community member voluntarily chairs each community group and working group. All chairs meet periodically to monitor activities of the community health improvement process as well as recommended strategic direction and priorities for improving the health of Williamson County and its communities.

Building, Strengthening, and Maintaining the WWA

In order to engage the community, the WWA will continue to build, strengthen, and maintain the coalition and its relationships with its members. The WWA will design several organization and meeting structures to attract and retain members and to build strong supportive networks. Methods include networking opportunities at every meeting, spotlight activities of member agencies through the Alliance in Action newsletter, and a planned structure of meetings, webinars, and newsletters. Chairs and members will have the opportunity to evaluate coalition events through formal and informal feedback channels. Support staff will maintain an up to date membership list through MailChimp. Staff will create avenues for new members to join the coalition. In addition, WWA will maintain and update the Healthy Williamson County website and hold an annual WWA Summit.

The Mobilizing for Action through Planning and Partnerships Framework

The National Association of County and City Health Officials (NACCHO) developed the Mobilizing for Action through Planning and Partnerships (MAPP) framework. MAPP provides an evidence-based, systematic, and outcome-focused method of engaging local stakeholders (7). MAPP helps communities prioritize public health issues, identify resources available, and take action. The WWA and the 2017-2019 Williamson County CHIP Strategic Planning Team (herein after known as the CHIP Team) used this process to build upon the 2014-2016 CHIP. The six phases of the MAPP process are shown in Figure 7. The 2016 CHA describes in detail the findings from the four MAPP assessments and the process of prioritizing health issues. The 2017-2019 CHIP describes phases four, five, and six of this process.

Figure 7: Mobilizing for Action through Planning and Partnerships (MAPP) Framework

1. Organize for Success and Partnership Development
2. Visioning
3. Four MAPP Assessments
 - Community Strengths and Themes
 - Forces of Change
 - Local Public Health Systems
 - Community Health Status
4. Identify Strategic Issues
5. Formulating Goals and Strategies
6. Action Cycle (Plan, Implement, and Evaluate) (8).

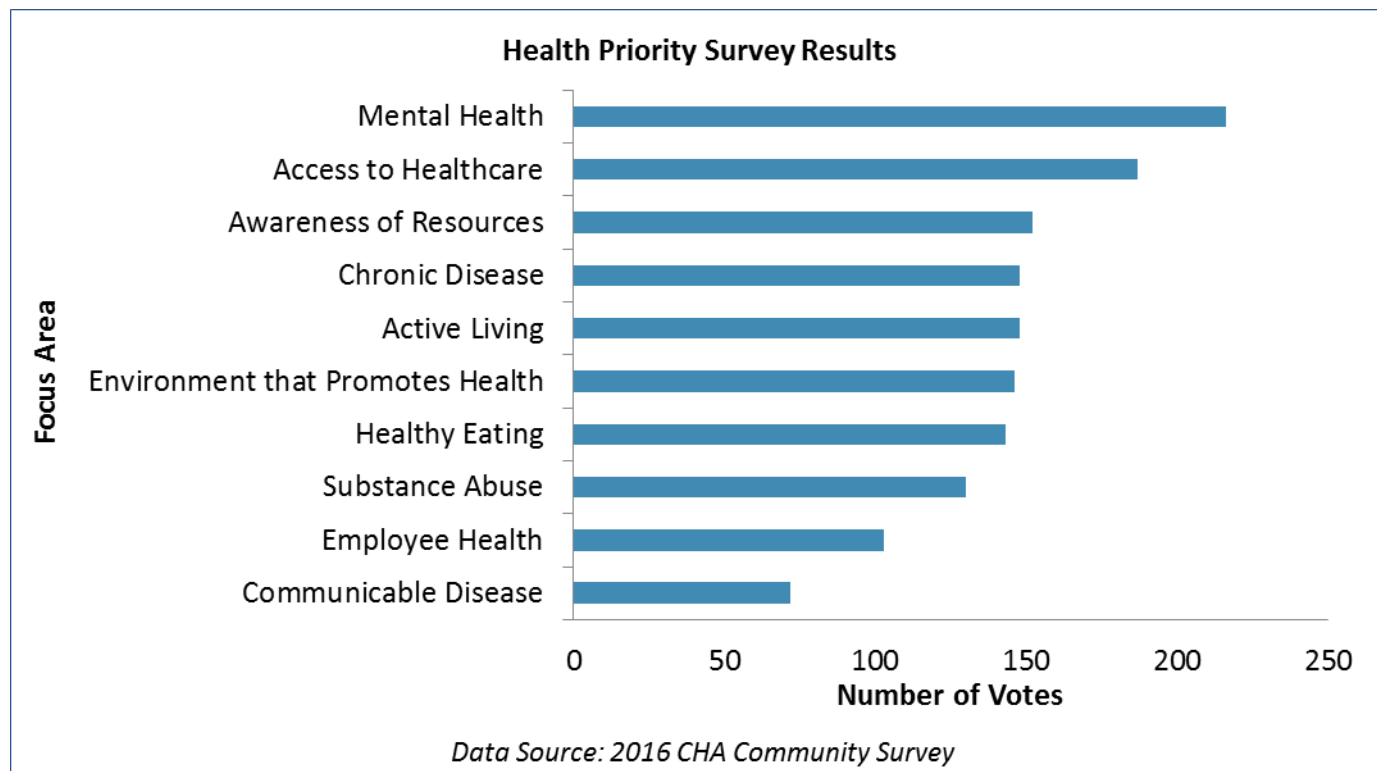


Figure Source: National Association of County and City Health Officials, 2016

Prioritization of Health Issues

The CHA Team used qualitative and quantitative data collected through the four MAPP assessments to identify strategic issues to bring forth to the community to determine health priorities. The CHA Team developed and sent a survey through email for community members, organizations, and stakeholders to vote on the most critical priorities for the county. Between November 13, 2015 and December 9, 2015, the CHA Team collected 291 surveys. The survey asked participants to choose the top five issues they felt were the most pressing. In addition, the survey asked which areas participants would most like to see countywide efforts focused to change and improve health. The community would address the five areas with the highest number of recorded votes in the CHIP. Figure 8 displays the full results of the ten identified focus areas and voting.

Figure 8: Health Priority Survey Results



The Top Five Health Priorities

After one month of polling through surveys, county residents and stakeholders determined the following five areas as the top issues for countywide efforts to improve health (Figure 9). The community identified Mental Health as the most important health priority in Williamson County.

Figure 9: Williamson County Top Five Health Priorities Infographic

1. **Mental Health**
Prevention, early intervention, support, and treatment for mental illness
2. **Access to Healthcare**
Basic, affordable healthcare available for all residents
3. **Awareness of Healthcare Resources**
Available information and communication channels for resources
4. **Active Living**
Resources, access, and awareness for physical activity opportunities
5. **Chronic Disease**
Prevention, treatment, and management of chronic diseases




Infographic Source: Public Health Initiatives and Planning Division, WCCHD

Alignment of Health Priorities

The CHIP Team aligned the top five health priorities with state and national priorities (Table 1). The National Prevention Strategy (NPS) and Healthy People 2020 (HP2020) outline national health priorities and provide guidelines and recommendations to tackle these health priorities. NPS focuses on prevention by integrating recommendations and actions across different settings (9). HP2020 establishes a nation-wide set of ten-year health promotion and disease prevention goals (10). The Texas Health and Human Services System (HHS) Strategic Plan 2015–2019, Volume 1 outlines state health priorities (11).

Mental health, the number one health priority of the county, aligned with both NPS (Mental and Emotional Well-Being), HP2020 (Mental Health), HHS (Provide behavioral health services), and the Texas Statewide Behavioral Health Strategic Plan. Access to healthcare aligned with HP2020 (Access to Health Services) and HHS (Provide Primary Care Services). Awareness of healthcare resources aligned with HP2020 (Social Determinants). Active Living aligned with both NPS (Active Living) and HP2020 (Physical Activity). Chronic Disease aligned with NPS (Healthy Eating), HP2020 (Nutrition and Clinical Preventive Services), and HHS (Health Promotion, Chronic Disease Prevention, and Specialty Care).

Table 1: Alignment of Williamson County Top Five Health Priorities with State and National Health Priorities

United States	<u>National Prevention Strategy*</u> Mental and Emotional Well-Being Active Living Healthy Eating	<u>Healthy People 2020^</u> Mental Health Access to Health Services Social Determinants Nutrition, Physical Activity, and Obesity Clinical Preventive Services
Texas	Health and Human Services System Strategic Plan 2015–2019, Volume 1: Department of State Health Services** <ul style="list-style-type: none"> Objective 2-2. Provide behavioral health services Objective 2-1. Provide Primary Care and Nutrition Services Objective 1-3. Health Promotion, Chronic Disease Prevention, and Specialty Care Texas Statewide Behavioral Health Strategic Plan	
Williamson County^^	 <div style="display: flex; justify-content: space-around; text-align: center;"> <div data-bbox="357 1480 544 1522"><i>Mental Health</i></div> <div data-bbox="633 1480 771 1564"><i>Access to Healthcare</i></div> <div data-bbox="876 1480 1047 1596"><i>Awareness of Healthcare Resources</i></div> <div data-bbox="1112 1480 1274 1522"><i>Active Living</i></div> <div data-bbox="1323 1480 1518 1522"><i>Chronic Disease</i></div> </div>	
<p><i>Data Sources: *Surgeon General. National Prevention Strategy [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/; ^Healthy People 2020 [Internet]. U.S. Department of Health and Human Services 2015 [cited 2015]. Available from: http://www.healthypeople.gov/; **Health and Human Services System Strategic Plan 2015–2019: Volume I. Texas Health and Human Services System; 2014. Report No.: 1</i></p> <p><i>Figure Sources: ^^Marketing and Community Engagement Division, WCCHD</i></p>		

Developing Action Plans (Formulating Goals, Objectives, and Strategies)

On June 6, 2016, the CHA Team published the 2016 CHA. From mid-June through the end of July, the CHIP Team presented the top five health priorities, the start of the new CHA/CHIP process, and the revised coalition model throughout the county. The WWA recruited community members and partner organizations to join working groups to develop action plans for the new 2017-2019 CHIP (Figure 10).

Figure 10: Timeline of CHIP Development

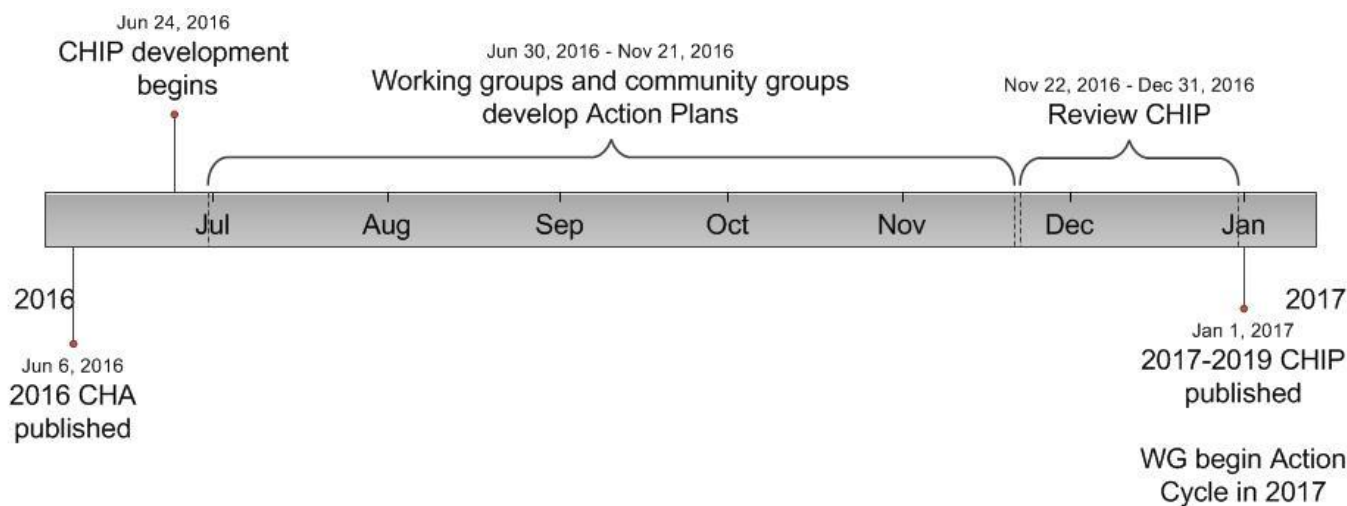


Figure Source: Public Health Initiatives and Planning Division, WCCHD

The community developed health priority action plans by leveraging the existing framework of the WWA. Four community groups and nine working groups of the WWA collaborated to develop these plans. Working groups developed strategies and objectives. Community groups provided progress and challenges in tackling these health priorities for their respective geographic areas.

Each working group developed an individual action plan to address one or more of the top five health priorities. From June 30, 2016 to November 21, 2016, the working groups participated in multiple sessions to develop action plans. Either the working group chairs or WCCHD staff facilitated each session. Larger working groups identified smaller task forces to participate. Working groups met between two and seven times and spent between four and fourteen hours developing their comprehensive action plans. The nine working group action plans are located in Appendix A: Working Group Action Plans.

Working groups used the “Wisconsin Action Plan” implementation template to develop their action plans. The Wisconsin CHIP Infrastructure Project first developed the template and Austin Public Health later modified it (12). The template provided a framework for groups to develop goals, objectives, strategies, and performance indicators. In addition, groups used goal and objective setting worksheets and decision-making matrices to determine objectives. Facilitators distributed CHA infographics and copies of the CHA to inform evidence-based decision-making. Facilitators emphasized collaboration and sustainability during action planning.

Working groups brainstormed one goal, three objectives, five or fewer strategies, and multiple short and long-term performance indicators for their action plans. According to the “Wisconsin Action Plan” template, goals are “a broad or general statement of desired change or end date”. Objectives are SMART, defined as Specific, Measurable, Achievable, Realistic, and Time-bound. Strategies are a broad collection of actions that could possibly achieve the objectives. Performance indicators measures how well a strategy or objective performed. Short-term indicators measures potential outcomes in one to three years. Long-term indicators measures potential outcomes in five years (12). Action plans were developed and approved through consensus of the members of the working groups.

In addition to working groups, community groups provided feedback about the five health priorities in the four geographic regions of the county. Community groups identified progresses and challenges to address the five health priorities. The CHIP Team synthesized results from the four groups and identified similar challenges. Feedback from groups helped to narrow down specific areas of interest for each health priority to target resources and services.

Afterwards, the CHIP Team compiled together objectives and strategies that targeted specific health priorities from the individual working group action plans and findings from the community groups to form the five health priority action plans. For example, the CHIP team compiled all objectives and strategies that targeted behavioral health to form the Mental Health Action Plan. The five health priority action plans are located under Health Priority Action Plans.

Action Cycle (Planning, Implementation, and Evaluation)

Planning, implementation, and evaluation of progress on the 2017-2019 CHIP, hereafter referred to as the action cycle, is the next step in the process. The action cycle is iterative and will occur every year from 2017 to 2019. First, working groups will plan for implementation of strategies developed in the action plans by assigning individuals and resources to strategies. Second, groups will carry out those strategies. Third, groups will evaluate progress and address barriers to implementation of strategies. Barriers could include lack of resources, community support, and policy changes (7) (Figure 11).

Planning: Working groups are responsible for implementing their own action plans. At the beginning of each year, working groups will brainstorm action steps for the year and assign responsibilities and tasks to member organizations. Working group members will also work to pool resources.

Implementation: Throughout the year, working groups will meet every other month to monitor progress of the action steps. Working groups will also report progress in meeting objectives every other month.

Evaluation: Working groups will evaluate progress at the end of every year. Groups will report on lessons learned, barriers, and challenges to implementing their strategies. Groups will collect data on short-term and long-term performance measures to determine if the needle has moved. The WWA and the CHIP Team will publish results to the community and share through the Healthy Williamson County website. At the end of the three-year implementation process, the WWA and the CHIP Team will conduct a final process and outcome evaluation to assess the impact of the CHIP.

Figure 11: Timeline of Potential Action Cycle (Planning, Implementation, and Evaluation) in 2017

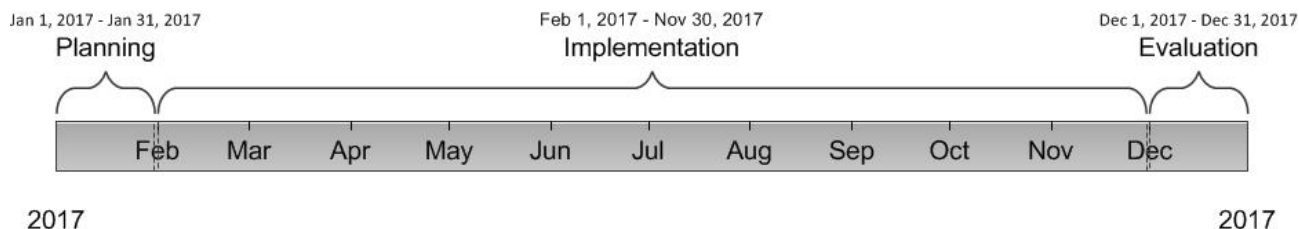


Figure Source: Public Health Initiatives and Planning Division, WCCHD

Sustainability

Sustainability is an important component to improving the health of the community and ensuring the success of health initiatives (13). Many working groups identified either sustainability or collaboration with internal and external partners as key objectives in their action plans. The Healthy Williamson County website will monitor performance indicators and objectives (Figure 12) and display action plans (Figure 13).

Figure 12: CHIP Objectives Tracking on Healthy Williamson County Website



Figure Source: Healthy Williamson County (www.healthywilliamsoncounty.org), 2016

Figure 13: Action Plans Tracking on Healthy Williamson County Website

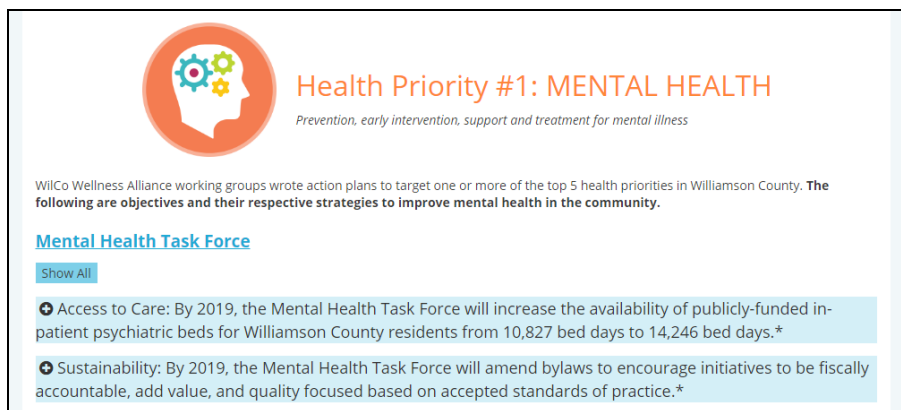


Figure Source: Healthy Williamson County (www.healthywilliamsoncounty.org), 2016

Health Priority Action Plans

Health Priority One: Mental Health Action Plan



Mental Health

Prevention, early intervention, support, and treatment for mental illness

“I know my mom had mental health issues and there’s not ... she actually had to go to a hospital, like a mental facility here. There wasn’t that many. If you’re on the waiting list. If somebody’s trying to harm themselves and they’re on a waiting list, what are you going to do? Help them when they’re dead, almost?” – Focus group participant

The Centers for Disease Control and Prevention (CDC) defines mental health as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” Mental health involves emotional, mental, and social well-being. Lack of good housing, safe neighborhoods, education, access to health care, fair jobs, and wages can increase risk for mental health issues (14).

Summary of 2016 CHA Findings

Through the 2016 CHA, the community recognized mental health as an important health priority in the county. The following are health indicators that demonstrate the need for improvement.

- **Quality of Life:** Adults in the county reported an average of 2.7 poor mental health days in the past 30 days, while adults in Texas reported an average of 3.0 days respectively. There is no HP2020 goal for this metric.
- **Intentional Self Harm (Suicide):** Suicide rates have increased 34.8% since 2005 in the county, from 8.9/100,000 in 2005-2009 to 12.0/100,000 in the most recent five-year period (2009-2013). The rate was also greater than the state rate of 11.6/100,000. For men, the rate was 18.9/100,000, and for non-Hispanic Whites, 17.5/100,000. This failed to meet the HP2020 target of 10.2/100,000.
- **Substance Abuse/Tobacco:** A smaller percentage of adults in Williamson County (12.0%) smoked cigarettes than in Texas (15.0%). The county meets the HP2020 target of 12.0%
- **Substance Abuse/Alcohol:** The percentages of adults that drink excessively were higher in the county (19.0%) than in Texas (17.0%). Still, the county met the HP2020 target of less than 25.4% of adults drinking excessively in the previous 30 days.
- **Mental Health Providers:** Williamson County had a lower ratio of mental health providers than in Texas. In the county, one provider existed for every 1,060 individuals compared to one for every 990 in Texas. There is no HP2020 goal for this metric.

Community Organizations

The Mental Health Task Force (MHTF), Child Youth Behavioral Health Task Force, LifeSteps Substance Abuse Collaborative, and the Public Health and Medical Preparedness Committee (PHaMP) developed objectives and strategies to improve mental health in the community. The four community groups provided feedback and insight into the challenges.

The following organizations, along with many advocates and stakeholders, have committed to improving mental health in the community.

Alcoholics Anonymous	Leander Fire Department	Texas A&M College of Medicine
Amerigroup	Leander ISD	Texas Alcoholic Beverage Commission
Austin Community College	Leander OEM	Texas Department of State Health Services
Austin Oaks Hospital	Liberty Hill ISD	Texas Divisions of Emergency Management
Austin Public Health	LifeSteps Council on Alcohol and Drugs	Texas Funeral Director Association Disaster Response Team
Baylor Scott & White Health	Lone Star Circle of Care	Texas Municipal Police Association
Belle Heart Foundation/Young People in Recovery	MAXIMUS	Texas NeuroRehab Center
Bluebonnet Trails Community Services	MomCare Network	The Christi Center
Boys & Girls Club	Mothers Against Drunk Driving	The Georgetown Project
Brazos Valley Council on Alcohol and Substance Abuse	NAMI Austin	The Key 2 Free
Capital Area Council of Governments	New Day Interventions and Counseling Opportunities For Williamson & Burnet Counties	The Volunteer Center
Capital Area Trauma Regional Advisory Council	Peers Of Faith	Travis County Underage Drinking Prevention Program
Capital of Texas Alzheimer's Association	Phoenix House	United Way
Cedar Park Fire Department	Resurgent Pointe LLC	University High School
Cedar Park OEM	Rock Springs Hospital	University of Texas at Austin
Cedar Park Police Department	RockPointe Church	UT Health Science Center
Cedar Park Regional Medical Center	Round Rock Area Serving Center	WCCHD
Celebrate Recovery	Round Rock Christian Church	WilCo Wellness Alliance
CenTex Perinatal Coalition	Round Rock Fire Department	Williamson County
Cross Creek Hospital	Round Rock ISD	Williamson County Attorney's Office
Dell Children's Medical Center	Round Rock OEM	Williamson County Constables
Dickey Museum and Multipurpose Center	Round Rock Opportunity Center	Williamson County Emergency Communications
First Baptist Georgetown	Seeds of Strength	Williamson County EMS
Florence Fire Department	Seton Healthcare Family	Williamson County HAZMAT
Georgetown Behavioral Health Institute	Southwestern University	Williamson County Institute for Excellence in Nonprofits
Georgetown EMS	Spirit Reins	Williamson County Justice of the Peace
Georgetown Fire Department	St. David's Healthcare	Williamson County Juvenile Services
Georgetown ISD	Taylor Fire Department	Williamson County Mobile Outreach Team
Georgetown OEM	Taylor ISD	Williamson County OEM
Georgetown Police Department	Taylor OEM	Williamson County PIO
Hays County Public Health	Texas A&M Health Science Center Regional Partnership 8	Williamson County Sherriff's Office (WCSSO)
Hutto Fire Department	Texas A&M University	WCSSO Crisis Intervention Team (CIT)
Hutto ISD		

Mental Health Task Force (MHTF)

For more information, refer to working group action plan: 5. Mental Health Task Force (Appendix A).

Access to Care: By 2019, the Mental Health Task Force will increase the availability of publicly-funded in-patient psychiatric beds for Williamson County residents from 10,827 bed days to 14,246 bed days.*

1. Seek strategies to increase flexibility in funding to expand options for recovery services in our system of care
2. Encourage the state to consider population growth in increasing funding**
3. Increase community knowledge and awareness of trauma-informed care as a means for boosting prevention and improving treatment. Intentionally drive the MHTF agenda toward awareness of trauma-informed care and improving treatment.**
4. Develop Medicaid Tracker for Adults as a pathway to reduce cost**
5. Advocate for increase in funding for tele-psychiatry in the legislative process**
6. Increase early intervention and prevention

Notes: *As of July 2016, Williamson County used only 38% (10,827 bed days) of the allocated 28,493 bed days at Austin State Hospital. Fiscal year ends August 31. Current waiting list for a bed is 41 days (Bluebonnet Trails Community Services).;

**Legislative Priority

Sustainability: By 2019, the Mental Health Task Force will amend bylaws to encourage initiatives to be fiscally accountable, add value, and quality focused based on accepted standards of practice.

1. For any Williamson County initiative requesting support of the Mental Health Task Force, they will be required to provide outcome data at least twice/year and are encouraged to:
 - Fiscal Accountability: Develop sustainability plan prior to implementation with re-evaluation every six months
 - Fiscal Accountability: Develop measurement of savings and/or positive financial impact for each intervention prior to implementation of intervention
 - Value and Quality: Develop pre- and post- satisfaction surveys by stakeholders for the intervention at specified intervals of time
 - Standard of Practice: Use national standards matched to intervention to ensure standard
2. Decrease uncompensated care by having a funding source
3. Tie each initiative to the needs assessment
4. Develop a process to determine which initiatives to support
5. Sustain cost of Aunt Bertha*

Notes: *Aunt Bertha is an electronic resource that connects clients to programs and services and allows navigators to refer services to clients. For more information, visit <http://about.auntbertha.com/mission>.

Coordinated Efforts: The Mental Health Task Force will continue to coordinate efforts of behavioral health organizations serving Williamson County residents to improve the behavioral health system.

1. Develop compendium of key players/organizations (including name, title and contact information) and identify roles and responsibilities of representatives from each organization through further development of Aunt Bertha
2. Expand Professional Peer Review Committee to improve collaboration among key organizations
3. Make resource map on Aunt Bertha
4. Identify and share models and best practices within partners/organizations in the county
5. Update bylaws of the MHTF
6. Link individuals with the Williamson County Women's Meetup Group as a resource/referral network

Substance Abuse Collaborative

For more information, refer to working group action plan: 8. Substance Abuse Collaborative (Appendix A).

Underage Drinking: Reduce/eliminate underage drinking in Williamson County.

1. Develop and promote an Issue Brief on Social Hosting
2. Develop a draft of a local Social Hosting Ordinance
3. Convene Coalition formation group and recruit Taylor coalition members
4. Recruit local youth for a leadership program
5. Provide outreach and education for retailers and restaurants

Marijuana Use by Youth: Reduce/eliminate marijuana use by youth in Williamson County as reported by school districts to the Texas Education Agency (TEA).

1. Collect and analyze school district and Texas School Survey (TSS) data, Courts, local admissions to treatment related to marijuana
2. Communicate/educate through social media outlets and Op-Ed articles
3. Promote marijuana prevention, early intervention, support, and treatment training for parents, students and community groups

Abuse and Misuse of Prescription Drugs: Reduce abuse and illicit use of over-the-counter (OTC) and prescription drugs as reported by local Poison Control Center, first responders, CDC and local hospitals and treatment centers.

1. Collect and analyze data related to abuse and misuse of prescription drugs
2. Create awareness related to abuse and misuse of prescription drugs
3. Advocate for safe and responsible disposal of medications
4. Create awareness related to overdose and its effects
5. Promote screening, brief intervention, and referral to treatment to health care providers

Public Health and Medical Preparedness Committee

For more information, refer to working group action plan:

6. Public Health and Medical Preparedness Committee (PHaMP) (*Appendix A*).

By 2019, PHaMP will coordinate mental health process for all local first responder agencies.

1. Develop mental health training for new employees of first responder agencies
2. Develop peer support groups within local first responder agencies
3. Develop mental health training for supervisors and leadership personnel within first responder agencies
4. Develop a local first responder mental health safety plan

By 2019, PHaMP will develop a coordinated community behavioral health response process.

1. Identify community response stakeholders
2. Develop and coordinate a community behavioral health response plan
3. Develop behavioral health training for community response stakeholders
4. Coordinate drills and exercises for response stakeholders
5. Ensure annual review and updating of the response process

Summary of Community Group Findings

Three out of the four community groups identified the following as challenges to improving mental health in the county:

1. Lack of mental health providers
2. Stigma towards mental health
3. Inadequate to lack of insurance coverage for mental health
4. Inadequate focus of mental health in schools

Health Priority Two: Access to Healthcare Action Plan



Access to Healthcare

Basic, affordable healthcare available for all residents

"[Access to healthcare is] terrible. You get sick and [are told], "Well, come next week." Well, if you're calling, it's because you're sick at that moment." – Focus group participant

Many barriers prevent access to healthcare such as lack of health insurance coverage, lack of availability of health care providers (e.g., primary care physicians, dentists, and mental health providers), lack of transportation, and inability to pay for health services. These barriers can lead to unmet health needs, delays in care, failure to receive preventive services, and increase preventable hospitalizations (15).

Summary of 2016 CHA Findings

Through the 2016 CHA, the community recognized access to healthcare as an important health priority in the county. The following are health indicators that demonstrate the need for improvement.

- ***Health Insurance:*** The percentage of uninsured persons in the county was lower than Texas across all groups in both adults and children. Still, 24.2% of Hispanics did not have health insurance as compared to 10.4% for non-Hispanic Whites, 13.6% for African Americans, and 12.9% for Asian Americans. Florence, Jarrell, Weir, Bartlett, Granger, as well as small areas in Georgetown, Taylor, and Round Rock had the highest percentages of uninsured individuals. The HP2020 goal is 0% uninsured, which the county failed to meet for all groups.
- ***Primary Care:*** Access to primary care in Williamson County has increased in the last decade to match ratios in Texas. In 2002, the county had a lower ratio of Primary Care Providers (PCPs) (47.6 PCPs per 100,000 population) as compared to Texas (61.5 PCPs per 100,000 population). By 2012, the county increased to 67.3 PCPs per 100,000 population, nearly matching the ratio in Texas (67.3 versus 67.4 per 100,000 population).
- ***Providers:*** One dentist existed for every 1,880 individuals in the county and in Texas. One mental health provider existed for every 1,060 individuals in the county compared to one for every 990 in Texas.

Participants in focus groups agreed that access to affordable healthcare was a major concern in their community. Many participants expressed frustration with insurance eligibility requirements and the lack of awareness regarding coverage. In addition, participants expressed concern over the cost of dental and vision services and access to services in the county.

Community Organizations

The Maternal and Infant Health working group, the Mental Health Task Force (MHTF), and primarily Systems of Care (SOC) developed objectives and strategies to improving access to healthcare in the community. The four community groups provided feedback and insight into the challenges.

The following organizations, along with many advocates and stakeholders, have committed to improving access to healthcare in the community.

Amerigroup	Lone Star Circle of Care	Texas A&M Health Science Center (TAMHSC)
Austin Oaks Hospital	MAXIMUS	TAMHSC Regional Partnership 8
Baylor Scott & White	MomCare Network	Texas Department of State Health Services
Bluebonnet Trails Community Services	NAMI Austin	Texas Mother-Friendly Worksite Program
Capital of Texas Alzheimer's Association	Opportunities For Williamson & Burnet Counties	Texas NeuroRehab Center
CenTex Perinatal Coalition	Peers Of Faith	Texas State University
Central Texas Food Bank	Q.care ~ On Demand House Calls	The Key 2 Free
Community Health Paramedicine	RockPointe Church	United Way of Williamson County
Cross Creek Hospital	Round Rock ISD	UT Health Science Center
Dell Children's Medical Center	Sacred Heart Community Clinic	WCCHD
Department of State Health Services	Samaritan Health Ministries	Williamson County Mobile Healthcare Link
First Baptist Georgetown	Seeds of Strength	Williamson County Mobile Outreach Team
Georgetown Behavioral Health Institute	Seton Healthcare Family	Williamson County Sherriff's Office (WCSO)
Georgetown ISD	Southwestern University	WCSO Crisis Intervention Team (CIT)
Leander ISD	Spirit Reins	WilCo Wellness Alliance
Liberty Hill ISD	St. David's Healthcare	Williamson County
LifeSteps Council on Alcohol and Drugs	Superior HealthPlan	Williamson County EMS
Little Engine Homecare	Texas A&M College of Medicine	Williamson County Juvenile Services

Maternal and Infant Health

For more information, refer to working group action plan: 4. Maternal and Infant Health (Appendix A).

Access to Healthcare: By 2019, Maternal and Infant Health working group will improve access to healthcare before, during, and after pregnancy for Williamson County women by identifying and sharing best practices.

1. Identify women in need (target population) and needs of target population
2. Identify organizational needs related to services, resources, and point of contacts of members that participate in working group.
3. Identify maternal, infant, and child health resources and best practices in Williamson County
4. Share maternal, infant, and child health resources and best practices in Williamson County

Mental Health Task Force

For more information, refer to working group action plan: 5. Mental Health Task Force (Appendix A).

Access to Care: By 2019, the Mental Health Task Force will increase the availability of publicly-funded in-patient psychiatric beds for Williamson County residents from 10,827 bed days to 14,246 bed days.*

1. Seek strategies to increase flexibility in funding to expand options for recovery services in our system of care
2. Encourage the state to consider population growth in increasing funding**
3. Increase community knowledge and awareness of trauma-informed care as a means for boosting prevention and improving treatment. Intentionally drive the MHTF agenda toward awareness of trauma-informed care and improving treatment.**
4. Develop Medicaid Tracker for Adults as a pathway to reduce cost**
5. Advocate for increase in funding for tele-psychiatry in the legislative process**
6. Increase early intervention and prevention

*Notes: * As of July 2016, Williamson County used only 38% (10,827 bed days) of the allocated 28,493 bed days at Austin State Hospital. Fiscal year ends August 31. Current waiting list for a bed is 41 days (Bluebonnet Trails Community Services).;*

***Legislative Priority*

Systems of Care

For more information, refer to working group action plan: 9. Systems of Care (Appendix A).

Coordination: By 2019, Systems of Care (SOC) will improve coordination efforts by ensuring that 100% of all SOC partners will use Aunt Bertha to search and refer.

1. Promote Aunt Bertha (search and referral functions) among organizations in Williamson County
2. Claim services on Aunt Bertha
3. Train SOC partners on Aunt Bertha referral process
4. Determine referral process among SOC partners
5. Determine progress by measuring search and referral functions

Sustainability: By 2019, all partners in Systems of Care will participate in a common Health Information Exchange (HIE).*

1. Encourage all hospitals (Seton, St. David's, Cedar Park, and Baylor Scott & White) to participate
2. Explore patient care record with Texas A&M to feed into large HIE
3. Explore opportunities for Systems of Care partners to build onto Health Data Exchange to share data and to share referrals
4. Identify benchmark data with other Regional Advisory Councils in the state

*Notes: *Health Information Exchange (HIE) allows health care professionals and patients from accessing medical records electronically quickly and securely. For more information, visit <https://www.healthit.gov/HIE>.*

Availability: By 2019, Systems of Care will increase number of community health and human services referral partners by 10%.

1. Determine current list of community health and human services referral partners
2. Develop list of potential community health and human services referral partners
3. Promote Aunt Bertha (search and referral functions) among organizations in Williamson County
4. Sign up community partners onto Aunt Bertha
5. Organize and coordinate Aunt Bertha training

Summary of Community Group Findings

Three out of the four community groups identified the following as challenges to improving access to health care in the county:

- Provider and service deserts
- Lack of services provided in native language
- Lack of communication of healthcare services and resources

Two out of the four community groups identified the following as challenges to improving access to health care in the county:

- Lack of transportation
- Inadequate health literacy
- Inadequate to lack of insurance coverage
- Shortage of providers that take on new patients and benefits

Health Priority Three: Awareness of Healthcare Resources Action Plan



Awareness of Healthcare Resources

Available information and communication channels for resources

“And here, one thinks that it's going to be really expensive. I mean, you don't know about the assistance. You don't know about the support. More than anything, it's lack of information.” - Focus group participant

A key need in the community is to increase awareness of healthcare resources and services in the county especially among disadvantaged and low-income individuals.

Summary of 2016 CHA Findings

Through the 2016 CHA, the community recognized awareness of healthcare resources as a key priority in the county. Many participants in focus groups expressed a need for increased awareness of health care, dental care, vision care, and childcare resources and services. Participants noted the lack of social services especially concerning health, housing, and education. With an increasing Spanish-speaking population in the county, participants voiced a need for more resources in Spanish and English as a second language classes and materials.

Community Organizations

Active Living, Employee Wellness, Healthy Eating, School Health, and Systems of Care developed objectives and strategies to improve awareness of healthcare resources in the community. Resources include active living, employee wellness, healthy eating, school health, and access to healthcare. The four community groups provided feedback and insight into the challenges.

The following organizations, along with many advocates and stakeholders, have committed to improving awareness of healthcare resources in the community.

American Heart Association	Hutto ISD	Seton Healthcare Family
Amerigroup	IT'S TIME TEXAS	St. David's Healthcare
Baylor Scott & White Health	Jarrell ISD	Superior HealthPlan
Bike Hutto	Leander ISD	Sustainable Food Center
Bluebonnet Trails Community Services	Liberty Hill ISD	Texas A&M AgriLife Extension Service
CAPCOG Aging and Disability Resource Center/Area Agency on Aging	LifeSteps Council on Alcohol and Drugs	Texas A&M College of Medicine
Capital of Texas Alzheimer's Association	Literacy Council of Williamson County	Texas A&M Health Science Center
CATCH Global Foundation	Live Family Fit	Texas Department of Agriculture
Central Texas Food Bank	Lone Star Circle of Care	Texas Department of State Health Services
City of Georgetown	Marathon Kids	Texas Health and Human Services
City of Hutto	Master Gardeners	Texas State University
City of Leander	MAXIMUS	The Key 2 Free

Community Health Paramedicine Dairy MAX, your local Dairy Council	One Life Health Coaches Opportunities for Williamson & Burnet Counties	WCCHD Williamson County Mobile Healthcare Link
Dell Children's Medical Center	Peers Of Faith	Williamson County Mobile Outreach Team
Elgin ISD Georgetown Housing Authority Georgetown ISD Good Life Taylor Hope Alliance	Q.care ~ On Demand House Calls Round Rock ISD Sacred Heart Community Clinic SAFE AUSTIN/Strong Start Samaritan Health Ministries	WilCo Wellness Alliance Williamson County Williamson County EMS

Active Living

For more information, refer to working group action plan: 1. Active Living (Appendix A).

Awareness of Resources: By 2019, the Active Living working group will work to increase participation in active living opportunities in Williamson County by 5%.*

1. Determine baseline of current number of active living opportunities and participation in active living opportunities in Williamson County.
2. Break down participation in active living opportunities by financial costs.
3. Promote It's Time Texas Choose Healthier app to all member organizations and register active living opportunities onto app.
4. Increase unique partnerships.

*Notes: *Active living opportunities defined as any traditional and non-traditional activities to exercise the body through space. These opportunities create and spotlight ways to incorporate physical activity and recreation activities for the public. In addition, these activities aim at encouraging a healthier lifestyle with diverse programs throughout Williamson County.*

Employee Wellness

For more information, refer to working group action plan: 2. Employee Wellness (Appendix A).

Awareness of Resources: By 2019, the Employee Wellness working group will increase awareness of employee health resources by identifying and sharing best practices in Williamson County.

1. Identify employee wellness best practices and opportunities to learn about employee wellness (such as health fairs, business groups, and educational opportunities).
2. Share best practices, opportunities, and resources through different methods (presentations, webinars, social media, resource guide, and website).
3. Establish bank of employee wellness resources.

Healthy Eating

For more information, refer to working group action plan: 3. Healthy Eating (Appendix A).

Awareness of Resources: By 2019, the Healthy Eating working group will increase awareness of healthy eating resources by identifying and sharing best practices and resources in Williamson County.

1. Identify best practices and resources related to gardens, grocery stores, farmer markets, schools,

restaurants, corner stores, childcare centers, and adult care facilities.

2. Identify gaps and needs in the county's food landscape.
3. Identify gold standard practices and resources in the county.
4. Connect best practices and resources with community partners.

School Health

For more information, refer to working group action plan: 7. School Health (Appendix A).

Awareness of Resources: By 2019, the School Health working group will increase awareness of school health resources by identifying and sharing best practices in Williamson County.

1. Utilize past needs assessments to evaluate school health needs in the county and among member organizations.
2. Organize opportunities to share best practices.
3. Identify and promote school health community resources through channels such as Aunt Bertha, google documents, MailChimp, newsletters, webinars.

Summary of Community Group Findings

Three out of the four community groups identified the following as challenges to improving access to health care in the county:

- Rapidly aging population
- Lack of connection and referral of individuals to appropriate resources
- Ineffective communication of resources to a very diverse population

Health Priority Four: Active Living Action Plan



Active Living

Resources, access, and awareness for physical activity opportunities

“They really need to fix some of the roads and actually put sidewalks in, because it’s extremely dangerous to walk this area.” – Focus group participant

Physical activity improves health and reduces the risk for disease. Recommended levels of physical activity for adults are either 150 minutes of moderate physical activity or 75 minutes of moderate to vigorous physical activity per week. Recommended level for children is 60 minutes of MVPA per day (16). Active living support involves creating and improving sidewalks, neighborhood parks/trails, and smoke-free places (17).

Summary of 2016 CHA Findings

Through the 2016 CHA, the community recognized active living as an important health priority in the county. The following are health indicators that demonstrate the need for improvement.

- *Physical Activity:* The number of adults participating in no leisure time physical activity has improved over time from a high of 20.7% in 2005 to 18.4% in 2012. This was nearly half the HP2020 goal of 32.6%. Williamson County consistently had a lower percentage of physically inactive adults than the state. Texas averaged 24.0% in 2012.
- *Environment:* In 2013, 9.5 recreation and fitness facilities existed for every 100,000 population as compared to 7.7 facilities in Texas. Williamson County consistently had more facilities per capita than the state since at least 2008. There is no HP2020 goal for this metric.

Community Organizations

The Active Living working group developed objectives and strategies to improve active living in the community. The four community groups provided feedback and insight into the challenges.

The following organizations, along with many advocates and stakeholders, have committed to improving active living in the community.

American Heart Association	Live Family Fit
Amerigroup	Marathon Kids
Baylor Scott & White Health	MAXIMUS
Bike Hutto	Peers Of Faith
CAPCOG Aging and Disability Resource Center/Area Agency on Aging	Q.care ~ On Demand House Calls
Capital of Texas Alzheimer's Association	Seton Healthcare Family
CATCH Global Foundation	St. David's Healthcare
City of Georgetown	Texas A&M AgriLife Extension Service
City of Hutto	Texas A&M Health Science Center
City of Leander	Texas Department of State Health Services
Georgetown Housing Authority	Texas Health and Human Services
Good Life Taylor	WCCHD
IT'S TIME TEXAS	WilCo Wellness Alliance
Leander ISD	Williamson County EMS

Active Living

For more information, refer to working group action plan: 1. Active Living (Appendix A).

Access: By 2019, the Active Living working group will increase trail mileage in Williamson County by 10%.

1. Encourage trail mileage growth in the county and advocate for trails as a health benefit.
2. Gather trail data on gaps, needs, master plans, and trail usage.
3. Increase awareness for existing trails in the county.
4. Identify resources of funding.
5. Advocate for trail maintenance.

Awareness of Resources: By 2019, the Active Living working group will work to increase participation in active living opportunities in Williamson County by 5%.*

1. Determine baseline of current number of active living opportunities and participation in active living opportunities in Williamson County.
2. Break down participation in active living opportunities by financial costs.
3. Promote It's Time Texas Choose Healthier app to all member organizations and register active living opportunities onto app.
4. Increase unique partnerships.

*Notes: *Active living opportunities defined as any traditional and non-traditional activities to exercise the body through space. These opportunities create and spotlight ways to incorporate physical activity and recreation activities for the public. In addition, these activities aim at encouraging a healthier lifestyle with diverse programs throughout Williamson County.*

Collaboration: By 2019, the Active Living working group will increase the number of organizations who participate in the working group.

1. Identify and recruit organizations that should be present at working group meetings.
2. Increase information sharing and networking of active living opportunities within member organizations.
3. Promote active living opportunities and campaigns through www.healthywilliamsoncounty.org, community calendar, and social media.
4. Share active living best and/or innovative practices within member organizations.
5. Register active living organizations and services on Aunt Bertha.

Summary of Community Group Findings

Three out of the four community groups identified the following as challenges to improving awareness of healthcare in the county:

- Inadequate funding
- Lack of facilities and active living infrastructure

Two out of the four community groups identified the following as challenges to improving awareness of healthcare in the county:

- Ineffective communication of active living resources and services

Health Priority Five: Chronic Disease Action Plan



Chronic Disease

Prevention, treatment, and management of chronic diseases

“Well, more than anything, it's diabetes.” (A disease that affects the community) – Focus group participant

Chronic diseases are one of the most “common, costly, and preventable of all health problems” (18). More than a quarter of all Americans and two out of every three older Americans have multiple chronic conditions. Treatment of these groups accounts for 66% of the country’s healthcare budget (19). Chronic diseases such as cancer, heart disease, stroke, chronic lower respiratory disease, and diabetes are the leading causes of death, disease, injury, and disability in the county.

Summary of 2016 CHA Findings

Through the 2016 CHA, the community recognized chronic disease as an important health priority in the county. The following are health indicators that demonstrate the need for improvement.

- **Heart disease:** Heart disease mortality rates have been declining and were consistently lower for the county (114.6/100,000) than the state (175.5/100,000). However, rates were higher for men and African Americans (144.1 and 145.1). All of these rates failed to meet the HP2020 target of 103.4 deaths per 100,000 population.
- **Stroke:** Stroke mortality rates in the county (32.1/100,000) were below both Texas (42.6/100,000) and the HP2020 target (34.8/100,000). The mortality rate in Hispanics (35.8/100,000) failed to meet the HP2020 goal.
- **Diabetes:** Diabetes death rates in the county at 11.2/100,000 were half the state rate of 22.0/100,000. Rates fell far below the HP2020 target of 66.6/100,000.
- **Blood Pressure and Cholesterol:** In the county, 27.2% of adults had high blood pressure and 35.4% had high cholesterol. Both percentages were lower than the state (30.0% and 41.8% respectively). Still, percentages failed to meet the HP2020 goals of 26.9% and 13.5%.

Community Organizations

Active Living, Employee Wellness, Healthy Eating, Maternal and Infant Health, and the School Health working groups developed objectives and strategies to improve chronic disease in the community. The four community groups provided feedback and insight into the challenges.

The following organizations, along with many advocates and stakeholders, have committed to improving chronic disease in the community.

Williamson County 2017-2019 Community Health Improvement Plan

American Heart Association	Hope Alliance	Seeds of Strength
Amerigroup	Hutto ISD	Seton Healthcare Family
Baylor Scott & White	IT'S TIME TEXAS	St. David's Healthcare
Baylor Scott & White Health	Jarrell ISD	Superior HealthPlan
Bike Hutto	Leander ISD	Sustainable Food Center
CAPCOG Aging and Disability Resource Center/Area Agency on Aging	Liberty Hill ISD	Texas A&M AgriLife Extension Service
Capital of Texas Alzheimer's Association	LifeSteps Council on Alcohol and Drugs	Texas A&M College of Medicine
CATCH Global Foundation	Literacy Council of Williamson County	Texas A&M Health Science Center (TAMHSC)
CenTex Perinatal Coalition	Little Engine Homecare	TAMHSC Regional Partnership 8
Central Texas Food Bank	Live Family Fit	Texas Department of Agriculture
City of Georgetown	Marathon Kids	Texas Department of State Health Services
City of Hutto	Master Gardeners	Texas Health and Human Services
City of Leander	MAXIMUS	Texas Mother-Friendly Worksite Program
Dairy MAX, your local Dairy Council	MomCare Network	Texas State University
Dell Children's Medical Center	One Life Health Coaches	The Key 2 Free
Department of State Health Services	Opportunities for Williamson & Burnet Counties	WCCHD
Elgin ISD	Peers Of Faith	WilCo Wellness Alliance
Georgetown Housing Authority	Q.care ~ On Demand House Calls	Williamson County
Georgetown ISD	Round Rock ISD	Williamson County EMS
Good Life Taylor	SAFE AUSTIN/Strong Start	

Active Living

For more information, refer to working group action plan: 1. Active Living (Appendix A).

Access: By 2019, the Active Living working group will increase trail mileage in Williamson County by 10%.

1. Encourage trail mileage growth in the county and advocate for trails as a health benefit
2. Gather trail data on gaps, needs, master plans, and trail usage
3. Increase awareness for existing trails in the county
4. Identify resources of funding
5. Advocate for trail maintenance

Awareness of Resources: By 2019, the Active Living working group will work to increase participation in active living opportunities in Williamson County by 5%.*

1. Determine baseline of current number of active living opportunities and participation in active living opportunities in Williamson County
2. Break down participation in active living opportunities by financial costs
3. Promote It's Time Texas Choose Healthier app to all member organizations and register active living opportunities onto app
4. Increase unique partnerships.

*Notes: *Active living opportunities defined as any traditional and non-traditional activities to exercise the body through space. These opportunities create and spotlight ways to incorporate physical activity and recreation activities for the public. In addition, these activities aim at encouraging a healthier lifestyle with diverse programs throughout Williamson County.*

Collaboration: By 2019, the Active Living working group will increase the number of organizations who participate in the working group.

1. Identify and recruit organizations that should be present at working group meetings
2. Increase information sharing and networking of active living opportunities within member organizations
3. Promote active living opportunities and campaigns through www.healthywilliamsoncounty.org, community calendar, and social media
4. Share active living best and/or innovative practices within member organizations
5. Register active living organizations and services on Aunt Bertha

Employee Wellness

For more information, refer to working group action plan: 2. Employee Wellness (Appendix A).

Awareness of Resources: By 2019, the Employee Wellness working group will increase awareness of employee health resources by identifying and sharing best practices in Williamson County.

1. Identify employee wellness best practices and opportunities to learn about employee wellness (such as health fairs, business groups, and educational opportunities)
2. Share best practices, opportunities, and resources through different methods (presentations, webinars, social media, resource guide, and website)
3. Establish bank of employee wellness resources

Capacity building: By 2019, the number of organizations participating in the Employee Wellness working group will double.

1. Identify employee wellness needs in the community
2. Identify resources and opportunities to meet those needs
3. Advocate for employee wellness in the county
4. Invite diverse organizations and businesses from the county to attend working group
5. Develop new or improve current worksite wellness programs of organizations that participate in working group

Collaboration: By 2019, the Employee Wellness working group will create solid relationships* with all professional organizations that provide employee wellness resources in Williamson County.

1. Utilize existing member networks to foster relationships.
2. Attend employee wellness events, conferences, and networking events.

*Notes: *A solid relationship between professional organizations is defined as a two-way relationship with working knowledge of the other professional organizations' services, resources, and point of contacts.*

Healthy Eating

For more information, refer to working group action plan: 3. *Healthy Eating (Appendix A)*.

Awareness of Resources: By 2019, the Healthy Eating working group will increase awareness of healthy eating resources by identifying and sharing best practices and resources in Williamson County.

1. Identify best practices and resources related to gardens, grocery stores, farmer markets, schools, restaurants, corner stores, childcare centers, and adult care facilities
2. Identify gaps and needs in the county's food landscape
3. Identify gold standard practices and resources in the county
4. Connect best practices and resources with community partners

Access: By 2019, the Healthy Eating working group will improve access to healthy foods by connecting families and individuals with community services and resources in Williamson County.*

1. Promote farmer markets, community gardens, food pantries in the community
2. Collaborate and connect with community members and partners to improve access to healthy foods
3. Recruit community members to participate in healthy eating efforts

Collaboration: By 2019, the Healthy Eating Working Group will create impactful relationships with all professional and community organizations that provide healthy eating resources in Williamson County.*

1. Identify and recruit organizations that should be present at working group meetings
2. Increase information sharing and networking of healthy eating opportunities within member organizations
3. Promote healthy eating opportunities and campaigns through www.healthywilliamsoncounty.org, community calendar, and social media
4. Share healthy eating best and/or innovative practices within member organizations.
5. Develop consistent messaging to promote healthy eating in the county

*Notes: *An impactful relationship between two professional/community organizations is defined as a relationship where communication is clear, both parties benefit, and community impact occurs through collaboration.*

Maternal and Infant Health

For more information, refer to working group action plan: 4. Maternal and Infant Health (Appendix A).

Continuity of Care: By 2019, the Maternal and Infant Health working group will encourage all maternal, infant, and child health initiatives in Williamson County to use evidence-based guidelines to align messages used for education.

1. Identify and provide accurate educational resources
2. Build working groups' knowledge of Aunt Bertha and additional tools
3. Identify sources of maternal, infant, and child health messaging in the community.
4. Align breastfeeding education and promotion messages among professionals (i.e. obstetricians, pediatricians, lactation consultants)

Access to Healthcare: By 2019, Maternal and Infant Health working group will improve access to healthcare before, during, and after pregnancy for Williamson County women by identifying and sharing best practices.

1. Identify women in need (target population) and needs of target population
2. Identify organizational needs related to services, resources, and point of contacts of members that participate in working group.
3. Identify maternal, infant, and child health resources and best practices in Williamson County
4. Share maternal, infant, and child health resources and best practices in Williamson County

Collaboration: By 2019, the Maternal and Infant Health working group will create solid relationships* with all professional organizations that provide maternal, infant, and child health resources in Williamson County.

1. Identify points of contact in professional organizations for women before, during, and after pregnancy
2. Develop outreach and networking opportunities for professional organizations
3. Build working knowledge of member organizations in working group and identify how they add value

*Notes: * Maternal and Infant Health working group defined a solid relationship between professional organizations as working knowledge of other professional organizations' services, resources, and point of contacts.*

School Health

For more information, refer to working group action plan: 7. School Health (Appendix A).

Awareness of Resources: By 2019, the School Health working group will increase awareness of school health resources by identifying and sharing best practices in Williamson County.

1. Utilize past needs assessments to evaluate school health needs in the county and among member organizations
2. Organize opportunities to share best practices
3. Identify and promote school health community resources through channels such as Aunt Bertha, google documents, MailChimp, newsletters, and webinars

Sustainability: By 2019, the School Health working group will create sustainability by doubling participation of school and community health organizations in the working group.

1. Promote school health initiatives (in the legislative sessions, outside organizations)
2. Identify ways to support School Health Advisory Councils (SHACs) and present at SHACs
3. Recruit diverse organizations that support school health and/or provide resources to the schools

Collaboration: By 2019, the School Health working group will create solid relationships with all member organizations that provide school health resources in Williamson County*

1. Develop networking resources. Establish school and organizational entry points
2. Create networking experiences for member organizations.
3. Support member initiatives

*Notes: *School Health working group defined solid relationships between member organizations as relationships with two-way communication.*

Summary of Community Group Findings

Two out of the four community groups identified the following as challenges to improving chronic disease in the county:

- Establishing healthy habits among the community
- Rapidly aging population
- Presence of food deserts

Conclusion

WCCHD, WWA, and our local partners hope that the 2017-2019 CHIP along with the 2016 CHA will increase support to improve the health of Williamson County. The 2017-2019 CHIP is the collective roadmap for the county from vision into reality. The concrete goals and objectives contained herein ensure that the community can measure and achieve progress.

Williamson County is a large and diverse place. No one group or individual can create change alone. Sustained and broad involvement is necessary to address the strategic health issues within the community. Solutions, like the issues, require the resources of many groups and individuals. The following guide demonstrates how the whole community can use the CHIP and participate in community health improvement.

How to Participate in Community Health Improvement

How Can We All Participate in Community Health Improvement? <ul style="list-style-type: none"> Implement the CHIP by joining the WWA and participating in working and community groups 	
How Can Local Government Participate? <ul style="list-style-type: none"> Incorporate CHIP into strategic and future planning Advocate for policies and resources that improve the five health priorities 	How Can Businesses and Employers Participate? <ul style="list-style-type: none"> Participate in Employee Wellness working group Promote worksite wellness policies and resources that focuses on the five health priorities
How Can Health Care Systems, Insurers, and Clinicians Participate? <ul style="list-style-type: none"> Work to increase insurance coverage and access to healthcare to Medicaid, low income, and uninsured individuals, especially for mental health Provide mental health services in the county 	How Can Early Learning Centers, Schools, Colleges, and Universities Participate? <ul style="list-style-type: none"> Participate in School Health working group Equip educators with skills to promote and improve health
How Can Community, Non-Profit, and Faith-Based Organizations Participate? <ul style="list-style-type: none"> Align health improvement efforts with the CHIP Leverage additional resources by referencing the CHIP 	How Can Individuals and Families Participate? <ul style="list-style-type: none"> Practice and promote healthy behaviors in the community Advocate for community health improvement in the places where you live, work, worship, play, and learn

Community-level change is hard. However, when the community comes together, sees the Alliance in action, and witnesses strength in numbers, the community can make a real and measurable difference on the health of the county. Williamson County is truly better, and stronger, together. Even though challenges lay ahead, Williamson County pledges to make the community a healthy place to live, work, worship, play, and learn.



Appendices

Appendix A: Working Group Action Plans

Alignment of Working Group Goals and Health Priorities

Active Living	
Provide increased access to active living resources and wellness opportunities to Williamson County residents.	
Employee Wellness	
Engage employees and employers in the community to provide and promote employee wellness and healthy worksite environments.	
Healthy Eating	
Promote access to and increase relevant knowledge of healthy eating in Williamson County.	
Maternal and Infant Health	
Improve the health and well-being of mothers, infants, and children by addressing the health and wellness of women before, during, and after pregnancy.	
Mental Health Task Force	
Strive to sustain a coordinated behavioral health system of care that: focuses on prevention and early intervention, provides integrated services and access to care by eliminating barriers, reduces stigma through building awareness, improves outcomes in a community that respects and preserves the rights of all and focuses on the whole person.	
Public Health and Medical Preparedness Committee	
Ensure coordinated preparedness and response activities among emergency management agencies, public health, EMS, and healthcare organizations in order to rapidly diagnose, investigate, and respond to health problems and health hazards within Williamson County.	
School Health	
Promote healthy living for the school community (students, staff, and families) to maximize personal success and well-being.	
Substance Abuse Collaborative	
Counteract influences that effect underage drinking and substance abuse.	
Systems of Care	
Provide a continuously improving system of access to quality healthcare for the community.	

1. Active Living

Health Priorities Involved:



Date(s) Created:	09/13/2016 – 10/11/2016
Date Reviewed/Updated:	

GOAL: Provide increased access to active living resources and wellness opportunities to Williamson County residents.

PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
1.1	Increase number of trail mileage.	Williamson County Trails Master Plan	Precinct 1 (P1): 52.5 miles, P2: 116.0 mi, P3: 66.9 mi, P4: 45.2 mi = 280.6 mi (June 2014)
1.2	Increase number of individuals who participate in active living opportunities.	Working group	Baseline data in 2017
1.3	Increase the number of organizations who participate in the working group.	MailChimp	27 organizations and 38 people subscribed (Oct 2016)
1.3	Increase number of members who attend working group meetings.	Working group attendance sheets	Average of 8.5 members per meeting (Oct 2016)
Long Term Indicators		Source	Baseline
Reduce the proportion of adults who engage in no leisure-time physical activity.		National Center for Chronic Disease Prevention and Health Promotion	Williamson County: 18.4%, TX: 24.0% (2012)
Increase the number of recreation and fitness facilities rate.		County Business Patterns	Williamson County: 9.5/100,000 pop., TX: 7.7 (2013)

OBJECTIVE #1.1: Access: By 2019, the Active Living working group will increase trail mileage in Williamson County by 10%.

BACKGROUND ON STRATEGY/OBJECTIVE:

<i>Evidence Base:</i>	<p><u>Williamson County Community Health Improvement Plan Second Year Progress Report 2014-2016</u></p> <p>Objective #1.1 was a continuation of previous 2014-2016 CHIP’s objectives:</p> <ol style="list-style-type: none"> 1. Identify comprehensive master plans that consider parks, trails, systems, sidewalks, and bicycle lanes. 2. Increase trail mileage from 15 miles to 20 miles. 3. Increase the number of parks, trails, and paths with educational and healthy messaging from two to five. <p>“In year one, Williamson County made available online comprehensive master plans and installed Williamson County Walking Trail signage in Berry Springs Park, San Gabriel Park, Williamson County Regional Park, Champion Park, and Hutto Parks.”</p> <p><u>National Prevention Strategy: Active Living*</u></p> <p>“Recommendations: 3. Facilitate access to safe, accessible, and affordable places for physical activity. What Can State, Tribal, Local and Territorial Governments Do?</p> <ul style="list-style-type: none"> • Convene partners (e.g., urban planners, architects, engineers, developers, transportation, law enforcement, public health) to consider health impacts when making transportation or land use decisions.”
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<i>Potential Partners:</i>	City park and recreation departments, city councils, park advisory boards, recreational activity associations like Bike Hutto
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
1.1.1	Encourage trail mileage growth in the county and advocate for trails as a health benefit.
1.1.2	Gather trail data on gaps, needs, master plans, and trail usage.
1.1.3	Increase awareness for existing trails in the county.
1.1.4	Identify resources of funding.
1.1.5	Advocate for trail maintenance.
<i>Data Source: *National Prevention Strategy: Active Living [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/active-living.html</i>	

OBJECTIVE #1.2:	Awareness of Resources: By 2019, the Active Living working group will work to increase participation in active living opportunities in Williamson County by 5%.*
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>Recommendations to Increase Physical Activity in Communities[^]</u> "Creation of or enhanced access to places for physical activity combined with informational outreach activities: strongly recommended. These interventions attempt to change the local environment to create opportunities for physical activity. Access to places for physical activity can be created or enhanced both by building trails or facilities and by reducing barriers (e.g., reducing fees or changing operating hours of facilities)."</p> <p><u>National Prevention Strategy: Active Living^{**}</u> "Recommendations: 1. Encourage community design and development that supports physical activity. What Can Community, Non-Profit, and Faith-Based Organizations Do? • Offer low or no-cost physical activity programs (e.g., intramural sports, physical activity clubs). • Develop and institute policies and joint use agreements that address liability concerns and encourage shared use of physical activity facilities (e.g., school gymnasiums, community recreation centers). • Offer opportunities for physical activity across the lifespan (e.g., aerobic and muscle strengthening exercise classes for seniors)."</p>
<i>Potential Partners:</i>	City park and recreation departments, grocery stores, clinics, doctor’s offices, bike shops, places where community members frequent, coffee shops, gyms
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
1.2.1	Determine baseline of current number of active living opportunities and participation in active living opportunities in Williamson County.
1.2.2	Break down participation in active living opportunities by financial costs.
1.2.3	Promote It's Time Texas Choose Healthier app to all member organizations and register active living opportunities onto app.
1.2.4	Increase unique partnerships.
<p><i>Notes: *Active living opportunities defined as any traditional and non-traditional activities to exercise the body through space. These opportunities create and spotlight ways to incorporate physical activity and recreation activities for the public. In addition, these activities aim at encouraging a healthier lifestyle with diverse programs throughout Williamson County.</i> <i>Data Source: [^]Task Force on Community Preventive Services. Recommendations to increase physical activity in communities. Am J Prev Med. 2002;22:67.; ^{**}National Prevention Strategy: Active Living [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/active-living.html</i></p>	

OBJECTIVE #1.3:	Collaboration: By 2019, the Active Living working group will increase the number of organizations who participate in the working group.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>Recommendations to Increase Physical Activity in Communities*</u></p> <p>"Community-wide campaigns: strongly recommended. Community-wide campaigns are sustained efforts with ongoing high visibility. These large-scale campaigns deliver messages that promote physical activity by using television, radio, newspaper columns and inserts, and trailers in movie theaters. They use many components and include individually focused efforts such as support and self-help groups; physical activity counseling; risk factor screening and education at worksites, schools, and community health fairs; and environmental activities such as community events and the creation of walking trails. Community-wide education is strongly recommended on the basis of its effectiveness in increasing physical activity and improving physical fitness among adults and children. Other positive effects include increases both in knowledge about exercise and physical activity and in intentions to be physically active. No harms were reported, and no qualifying economic information was identified from the literature."</p> <p><u>A Sustainability Planning Guide for Healthy Communities^</u></p> <p>"Benefits of Coalitions</p> <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations. • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change."
<i>Potential Partners:</i>	City park and recreation departments, working group members, grocery stores, clinics, doctor's offices, bike shops, places where community members frequent
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
1.3.1	Identify and recruit organizations that should be present at working group meetings.
1.3.2	Increase information sharing and networking of active living opportunities within member organizations.
1.3.3	Promote active living opportunities and campaigns through www.healthywilliamsoncounty.org , community calendar, and social media.
1.3.4	Share active living best and/or innovative practices within member organizations.
1.3.5	Register active living organizations and services on Aunt Bertha.
<p><i>Data Sources:</i> *Task Force on Community Preventive Services. Recommendations to increase physical activity in communities. Am J Prev Med. 2002;22:67.; ^Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from: https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf</p>	

2. Employee Wellness

Health Priorities Involved:



Date(s) Created:	09/1/2016 – 10/13/2016
Date Reviewed/Updated:	

GOAL:	Engage employees and employers in the community to provide and promote employee wellness and healthy worksite environments.
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PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
2.1	Increase number of best practices identified.	Working group	Baseline data in 2017
2.1	Increase number of best practices shared.	Working group	Baseline data in 2017
2.2	Increase number of organizations participating in working group.	MailChimp	25 organizations and 34 people subscribed (Oct 2016)
2.2	Increase number of members who attend working group meetings.	Working group attendance sheets	Average of 9.5 members per meeting (Oct 2016)
2.3	Increase number of relationships that provide employee wellness resources.	Working group	Baseline data in 2017
Long Term Indicators		Source	Baseline
Age-Adjusted Death Rate due to Heart Disease		Texas Department of State Health Services (DSHS)	Williamson County: 114.6 deaths/100,000 pop.; TX: 175.5 (2009-2013)
Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)		DSHS	Williamson County: 32.1 deaths/100,000 pop.; TX: 42.6 (2009-2013)
Age-Adjusted Death Rate due to Diabetes		DSHS	Williamson County: 11.2 deaths/100,000 pop.; TX: 22.0 (2009-2013)

OBJECTIVE #2.1:	<u>Awareness of Resources:</u> By 2019, the Employee Wellness working group will increase awareness of employee health resources by identifying and sharing best practices in Williamson County.
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BACKGROUND ON STRATEGY/OBJECTIVE:

<i>Evidence Base:</i>	<u>Workplace Wellness Programs Can Generate Savings*</u> “Our review of the evidence suggests that large employers adopting wellness programs see substantial positive returns, even within the first few years after adoption. Medical costs fall about \$3.27 for every dollar spent on wellness programs, and absentee day costs fall by about \$2.73 for every dollar spent. Although these benefits surely accrue in part to the employee, it is also likely that they accrue in part to the employer—in the form of either lower replacement costs for absent workers or an advantage in attracting workers to the firm.”
<i>Potential Partners:</i>	Major county employers (Dell, IBM), County and city governments, IT’S TIME TEXAS, Chambers of Commerce, leadership groups, business groups, YMCA

STRATEGIES:

Strat. #(s)	Description
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2.1.1	Identify employee wellness best practices and opportunities to learn about employee wellness (such as health fairs, business groups, and educational opportunities).
2.1.2	Share best practices, opportunities, and resources through different methods (presentations, webinars, social media, resource guide, and website).
2.1.3	Establish bank of employee wellness resources.
<i>Data Source: *Baicker K, Cutler D, Song, Z. Workplace Wellness Programs Can Generate Savings. Health Affairs. 2010;29(2):304.</i>	

OBJECTIVE #2.2:	Capacity building: By 2019, the number of organizations participating in the Employee Wellness working group will double.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Williamson County Community Health Improvement Plan Second Year Progress Report 2014-2016 Objective #2.2 is an expansion of a previous 2014-2016 CHIP objective: Increase the number of employers participating in comprehensive worksite wellness through the Employee Wellness Forum from four to ten. “In year one, Bluebonnet Trails, IT’S TIME TEXAS, City of Hutto, Williamson County Human Resources, Williamson County EMS, Georgetown ISD, The Caring Place and WCCHD participated in the Employee Wellness Forum. In year two, WWA assessed wellness among Bluebonnet Trails Community Services (BTCS) staff on topics such as healthcare system utilization, healthy eating, active living, physical health, and mental health through a Worksite Wellness Interest Survey.” <u>National Prevention Strategy: Active Living*</u> “Recommendations: 4. Support workplace policies and programs that increase physical activity.”
<i>Policy Change:</i>	Yes, involves changing wellness policies in organizations.
<i>Potential Partners:</i>	Major county employers (Dell, IBM), County and city governments, IT’S TIME TEXAS, Chambers of Commerce, leadership groups, business groups, independent school districts
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
2.2.1	Identify employee wellness needs in the community.
2.2.2	Identify resources and opportunities to meet those needs.
2.2.3	Advocate for employee wellness in the county.
2.2.4	Invite diverse organizations and businesses from the county to attend working group.
2.2.5	Develop new or improve current worksite wellness programs of organizations that participate in working group.
<i>Data Source: *National Prevention Strategy: Active Living [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/active-living.html</i>	

OBJECTIVE #2.3:	Collaboration: By 2019, the Employee Wellness working group will create solid relationships* with all professional organizations that provide employee wellness resources in Williamson County.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<u>A Sustainability Planning Guide for Healthy Communities^</u> “Benefits of Coalitions” <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations.

	<ul style="list-style-type: none"> • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change.”
<i>Potential Partners:</i>	Major county employers (Dell, IBM), County and city governments, IT’S TIME TEXAS, Chambers of Commerce, Leadership groups, business groups, employee wellness providers
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
2.3.1	Utilize existing member networks to foster greater relationships.
2.3.2	Attend employee wellness events, conferences, and networking events.
<p><i>Notes: *A solid relationship between professional organizations is defined as a two-way relationship with working knowledge of the other professional organizations’ services, resources, and point of contacts.</i></p> <p><i>Data Source: ^Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from:</i></p> <p><i>https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf.</i></p>	

3. Healthy Eating

Health Priorities Involved:



Date(s) Created:	09/22/2016 – 11/1/2016
Date Reviewed/Updated:	

GOAL: Promote access to and increase relevant knowledge of healthy eating in Williamson County.

PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
3.1	Increase number of best practices identified.	Working group	Baseline data in 2017
3.1	Increase number of best practices shared.	Working group	Baseline data in 2017
3.2	Increase number of connections between services and individuals.	Working group	Baseline data in 2017
3.2	Decrease household food insecurity.	Feeding America	Williamson County: 21.3%; TX: 25.6% (2014)
3.3	Increase number of impactful relationships with all professional organizations.	Working group	26 organizations and 43 people subscribed (Nov 2016)
3.3	Increase number of members who attend working group meetings.	Working group attendance sheets	Average of 11 members per meeting (Nov 2016)
Long Term Indicators		Source	Baseline
Age-Adjusted Death Rate due to Heart Disease		Texas Department of State Health Services (DSHS)	Williamson County: 114.6 deaths/100,000 pop.; TX: 175.5 (2009-2013)
Adults 20+ Who are Obese		Centers for Disease Control and Prevention (CDC)	Williamson County: 31.1%; TX: 28.0% (2013)
Age-Adjusted Death Rate due to Diabetes		DSHS	Williamson County: 11.2 deaths/100,000 pop.; TX: 22.0 (2009-2013)

OBJECTIVE #3.1:	<u>Awareness of Resources:</u> By 2019, the Healthy Eating working group will increase awareness of healthy eating resources by identifying and sharing best practices and resources in Williamson County.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>National Prevention Strategy: Healthy Eating*</u></p> <p>“Recommendations: 4. Help people recognize and make healthy food and beverage choices. What Can State, Tribal, Local and Territorial Governments Do?</p> <ul style="list-style-type: none"> • Work with hospitals, early learning centers, health care providers, and community-based organizations to implement breastfeeding policies and programs. <p>What Can Community, Non-Profit, and Faith-Based Organizations Do?</p> <ul style="list-style-type: none"> • Lead or convene city, county, and regional food policy councils to assess local community needs and expand programs (e.g., community gardens, farmers markets) that bring healthy foods, especially locally grown fruits and vegetables, to schools, businesses, and communities.”
<i>Potential Partners:</i>	Community food pantries, community gardens, grocery stores, farmer markets, schools, restaurants, corner stores, child care centers, adult care facilities, hospitals
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
3.1.1	Identify best practices and resources related to gardens, grocery stores, farmer markets, schools, restaurants, corner stores, childcare centers, and adult care facilities.
3.1.2	Identify gaps and needs in the county’s food landscape.
3.1.3	Identify gold standard practices and resources in the county.
3.1.4	Connect best practices and resources with community partners.
<i>Data Source: *National Prevention Strategy: Healthy Eating [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/healthy-eating.html</i>	

OBJECTIVE #3.2:	<u>Access:</u> By 2019, the Healthy Eating working group will improve access to healthy foods by connecting families and individuals with community services and resources in Williamson County.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>Williamson County Community Health Improvement Plan Second Year Progress Report 2014-2016</u></p> <p>Objective #3.2 is an expansion of a 2014-2016 objective: Increase collaborative partnerships that support awareness and utilization of community gardens, Farmers’ Markets, and other agricultural initiatives from 24 to 35.</p> <p>“In year one, Texas A&M AgriLife Extension Agency (46 adult and 300 youth classes) and WCCHD (12 classes) offered nutrition education programming. The working group also participated in public awareness campaigns focused on National Nutrition Month, community gardens, and other healthy eating related topics.”</p> <p><u>National Prevention Strategy: Healthy Eating*</u></p> <p>“Recommendations: 1. Increase access to healthy and affordable foods in communities.”</p>
<i>Potential Partners:</i>	Community food pantries, community gardens, grocery stores, farmer markets, schools, restaurants, corner stores, child care centers, adult care facilities, hospitals, Opportunities for Williamson & Burnet Counties (OWBC), independent school districts’ food services
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
3.2.1	Promote farmer markets, community gardens, food pantries in the community.
3.2.2	Collaborate and connect with community members and partners to improve access to healthy foods.
3.2.3	Recruit community members to participate in healthy eating efforts.
<i>Data Source: *National Prevention Strategy: Healthy Eating [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/healthy-eating.html</i>	

OBJECTIVE #3.3:	<u>Collaboration</u> : By 2019, the Healthy Eating Working Group will create impactful relationships with all professional and community organizations that provide healthy eating resources in Williamson County.*
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>A Sustainability Planning Guide for Healthy Communities</u>[^]</p> <p>“Benefits of Coalitions</p> <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations. • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change.” <p><u>National Prevention Strategy: Healthy Eating</u>**</p> <p>“Recommendations: 2. Implement organizational and programmatic nutrition standards and policies.”</p>
<i>Policy Change:</i>	Yes, develop consistent messaging among organizations.
<i>Potential Partners:</i>	Independent School Districts, faith-based organizations, community leaders, American Heart Association, Sustainable Food Center, hospitals, OWBC, Texas Women, Infants, and Children (WIC)
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
3.3.1	Identify and recruit organizations that should be present at working group meetings.
3.3.2	Increase information sharing and networking of healthy eating opportunities within member organizations.
3.3.3	Promote healthy eating opportunities and campaigns through www.healthywilliamsoncounty.org , community calendar, and social media.
3.3.4	Share healthy eating best and/or innovative practices within member organizations.
3.3.5	Develop consistent messaging to promote healthy eating in the county.
<p><i>Notes: *An impactful relationship between two professional/community organizations defined as a relationship where communication is clear, both parties benefit, and community impact occurs through collaboration.</i></p> <p><i>Data Source: ^Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from: https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf; **National Prevention Strategy: Healthy Eating [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/healthy-eating.html</i></p>	

4. Maternal and Infant Health

Health Priorities Involved:



Date(s) Created:	08/30/2016 – 10/4/2016
Date Reviewed/Updated:	

GOAL:	Improve the health and well-being of mothers, infants, and children by addressing the health and wellness of women before, during, and after pregnancy.
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PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
4.1	Increase the proportion of infants who are ever breastfed upon hospital discharge.	WIC Texas Infant Feeding Practices State Report	Williamson County: 83.3%; TX: 79.0-86.9% (Jan-May 2016)
4.1	Increase the proportion of infants who are exclusively breastfed through six months.	WIC Texas Infant Feeding Practices State Report	Williamson County: 21.3%; TX: 17.2-25.9% (Jan-May 2016)
4.1	Increase the proportion of infants who are breastfed at one year.	WIC Texas Infant Feeding Practices State Report	Williamson County: 26.9%; TX: 22.6-31.7% (Jan-May 2016)
4.2	Increase number of mothers who received early prenatal care in the first trimester.	Texas Department of State Health Services (DSHS)	Williamson County: 76.8%; TX: 59.2% (2013)
4.2	Increase number of best practices identified.	Working group	Baseline data in 2017
4.2	Increase number of best practices shared.	Working group	Baseline data in 2017
4.3	Increase number of professional organizations that provide maternal, infant, and child health resources	MailChimp	21 organizations and 32 people subscribed (Oct 2016)
4.3	Increase number of members who attend working group meetings.	Working group attendance sheets	Average of 9.5 members per meeting (Oct 2016)
Long Term Indicators		Source	Baseline
Decrease unintentional injury rates for infants.		DSHS	Williamson County: 3.4/10,000 pop.; TX: 3.4 (2012)
Decrease infant mortality rates		DSHS	Williamson County: 3.5 deaths/1,000 live births; TX: 5.8 (2013)
Decrease number of preterm live births		DSHS	Williamson County: 10.8%; TX: 12.0% (2013)
Decrease number of babies with low birth weight		DSHS	Williamson County: 7.6%; TX: 8.3% (2013)

OBJECTIVE #4.1:	<u>Continuity of Care:</u> By 2019, the Maternal and Infant Health working group will encourage all maternal, infant, and child health initiatives in Williamson County to use evidence-based guidelines to align messaging used for education.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<u>National Prevention Strategy: Healthy Eating*</u> “Recommendations: 5. Support policies and programs that promote breastfeeding. What Can State, Tribal, Local and Territorial Governments Do? <ul style="list-style-type: none"> • Work with hospitals, early learning centers, health care providers, and community-based organizations to implement breastfeeding policies and programs. What Can Businesses and Employers Do? <ul style="list-style-type: none"> • Adopt lactation policies that provide space and break time for breastfeeding employees (in accordance with the Affordable Care Act) and offer lactation management services and support (e.g., breastfeeding peer support programs).”
<i>Policy Change:</i>	Yes, advocate for policies that benefit maternal, infant, and child health.
<i>Potential Partners:</i>	Central Texas Perinatal Coalition, all professional organizations that provide maternal, infant, and child health resources in Williamson County
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
4.1.1	Identify and provide accurate educational resources.
4.1.2	Build working groups knowledge of Aunt Bertha and additional tools.
4.1.3	Identify sources of maternal, infant, and child health messaging in the community.
4.1.4	Align breastfeeding education and promotion messages among professionals (i.e. obstetricians, pediatricians, lactation consultants).
<i>Data Source: *National Prevention Strategy: Healthy Eating [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/healthy-eating.html</i>	

OBJECTIVE #4.2:	<u>Access to Healthcare:</u> By 2019, Maternal and Infant Health working group will improve access to healthcare before, during, and after pregnancy for Williamson County women by identifying and sharing best practices.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<u>Healthy People 2020: Maternal, Infant, and Child Health*</u> “Emerging Issues in Maternal, Infant, and Child Health: Recent efforts to address persistent disparities in maternal, infant, and child health have employed a ‘life course’ perspective to health promotion and disease prevention. At the start of the decade, fewer than half of all pregnancies are planned. Unintended pregnancy is associated with a host of public health concerns. In response, preconception health initiatives have been aimed at improving the health of a woman before she becomes pregnant through a variety of evidence-based interventions.”
<i>Potential Partners:</i>	Central Texas Perinatal Coalition, all professional organizations that provide maternal, infant, and child health resources in Williamson County
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
4.2.1	Identify women in need (target population) and needs of target population.
4.2.2	Identify organizational needs related to services, resources, and point of contacts of members that participate in working group.
4.2.3	Identify maternal, infant, and child health resources and best practices in Williamson County.
4.2.4	Share maternal, infant, and child health resources and best practices in Williamson County.
<i>Data Source: *Maternal, Infant, and Child Health [Internet]. Healthy People 2020. Available from: https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health.</i>	

OBJECTIVE #4.3:	<u>Collaboration:</u> By 2019, the Maternal and Infant Health working group will create solid relationships* with all professional organizations that provide maternal, infant, and child health resources in Williamson County.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>A Sustainability Planning Guide for Healthy Communities</u>[^]</p> <p>“Benefits of Coalitions</p> <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations. • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change.”
<i>Potential Partners:</i>	Before pregnancy: schools, colleges, daycares, worksites, churches, women shelters; During pregnancy: pregnancy help centers, obstetricians, hospitals, women shelters, food banks, lactation education, classes, WIC; After pregnancy: clinics, pediatricians, WIC
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
4.3.1	Identify points of contact in professional organizations for women before, during, and after pregnancy.
4.3.2	Develop outreach and networking opportunities for professional organizations.
4.3.3	Build working knowledge of member organizations in working group and identify how they add value.
<p><i>Notes: *Maternal and Infant Health working group defined a solid relationship between professional organizations as working knowledge of other professional organizations’ services, resources, and point of contacts.</i></p> <p><i>Data Source: ^Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from: https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf.</i></p>	

5. Mental Health Task Force

Health Priorities Involved:



Date(s) Created:	06/30/2016 – 09/29/2016
Date Reviewed/Updated:	

GOAL:	<ul style="list-style-type: none"> • Strive to sustain a coordinated behavioral health system of care that: <ul style="list-style-type: none"> • Focuses on prevention and early intervention • Provides integrated services and access to care by eliminating barriers • Reduces stigma through building awareness • Improves outcomes • in a community that respects and preserves the rights of all and focuses on the whole person.
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PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
5.1	Increase access to psychiatric hospital beds in Central Texas for Williamson County residents.	Local hospitals, Bluebonnet Trails Community Services (BTCS)	28,493 bed days allocated to BTCS, 38% bed days used (July 2016)
5.1	Decrease average wait time for psychiatric patients transferred from emergency department to psychiatric treatment.	Jail, local hospitals, BTCS	Baseline data in 2017
5.1	Increase amount of flexible funds for local private hospital beds.	Local private hospital beds, State legislature, BTCS	Baseline data in 2017
5.1	Increase number of locations providing tele-psychiatry/counseling/justice in community-based settings (including emergency rooms, schools and justice system).	Local hospitals, ISDs, Justice Systems, BTCS	Baseline data in 2017
5.2	Enhance quality of initiatives by amending MHTF bylaws.	MHTF	Amend bylaws (2016)
5.3	Increase number of MOUs with local schools for integrated behavioral and/or medical services.	ISDs, BTCS, Intervention Services, STARRY, Behavioral Health Hospitals	Baseline data in 2017
5.3	Develop and increase number of providers that are registered and track number of searches on Aunt Bertha.	Aunt Bertha, MHTF	Baseline data in 2017
Long Term Indicators		Source	Baseline
Encounters through tele-psychiatry with baseline of previous year with cumulative encounters at end of measurement year.		All providers serving through tele-psychiatry/-counseling/-justice	Baseline data in 2017

OBJECTIVE #5.1:	<u>Access to Care:</u> By 2019, the Mental Health Task Force will increase the availability of publicly-funded in-patient psychiatric beds for Williamson County residents from 10,827 bed days to 14,246 bed days.*
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>Considering the 85th Legislative Session: Behavioral Health Highlights^</u></p> <p><u>“Access to State Hospital Beds.</u> As the need to hospitalize forensic patients increases at state hospitals and consumes the civil bed capacity, access to state hospital beds remains at a critical level. The need for the state hospital beds is heightened especially as the state hospitals are the highest intensity level of care unmatched by other hospital systems in Texas. Bluebonnet Trails is able to maintain a 60% usage rate. Although we recognize that our crisis services support our success, we also recognize the major factor in the low utilization rate is due to an inability to admit persons to the state hospitals. We are focusing on jail-based competency restoration to reduce forensic admissions; working with our jails to provide assessments, psychiatric evaluations and medications; and stepping civil patients down to our local Extended Observation Rooms and crisis respite beds to open civil capacity. At this point, we do not feel a reallocation of hospital beds to community centers is the answer until we can understand the impact of this action on the statewide system. We suggest continued focus on local resources and innovative options be made available in our communities”</p> <p><u>“What is a Bed?” – Inpatient Needs in a Community Context**</u></p> <p>Rider 83 State Hospital Long Term Plan “recommends development of 570 beds in the near term and an additional 607 beds to keep pace with population growth through 2024.”</p> <p>“Maximize access to telehealth. Telehealth services by licensed practitioners should be made available throughout the full range of crisis diversion services, including mobile crisis, rather than only in licensed health facilities.”</p>
<i>Policy Change:</i>	<p>Yes, involves policy change.</p> <p><u>Considering the 85th Legislative Session: Behavioral Health Highlights^</u></p> <p><u>“Essential Community-Based Crisis Services and Access to Private Hospitals.</u> During the 80th, 82nd, 83rd and 84th Sessions, the legislature has supported expansion of crisis services through funding of local options and private psychiatric hospital beds. As DSHS bid out the services and awarded the options in regions of the state, not all areas of the state received funding. Please continue this support access to critical care through a competitive bid process to allow for a more robust response across Texas.</p> <p><u>Telemedicine.</u> To ensure timely access to critical care, we ask for continued support for allowing services through telemedicine for psychiatrists, psychologists and counselors – along with a reimbursement rate that sustains these professional services.”</p>
<i>Potential Partners:</i>	Local hospitals (St. David’s Georgetown, St. David’s Round Rock, Seton Williamson, Baylor Scott & White (BS&W) Round Rock, BS&W Taylor, Cedar Park Regional), local psychiatrists, Austin State Hospital, jail, local behavioral health organizations, Child and Youth Behavioral Health Task Force
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
5.1.1	Seek strategies to increase flexibility in funding to expand options for recovery services in our system of care.
5.1.2	Encourage the state to consider population growth in increasing funding.^
5.1.3	Increase community knowledge and awareness of trauma-informed care as a means for boosting prevention and improving treatment. Intentionally drive the MHTF agenda toward awareness of trauma-informed care and improving treatment.^
5.1.4	Develop Medicaid Tracker for Adults as a pathway to reduce cost.^
5.1.5	Advocate for increase in funding for tele-psychiatry in the legislative process.^

5.1.6	Increase early intervention and prevention.
<p><i>Notes: * As of July 2016, Williamson County used only 38% (10,827 bed days) of the allocated 28,493 bed days at Austin State Hospital. Fiscal year ends August 31. Current waiting list for a bed is 41 days (Bluebonnet Trails Community Services).; ^^Legislative Priority</i></p> <p><i>Data Sources: ^Bluebonnet Trails Community Services. Considering the 85th Texas Legislative Session: Behavioral Health Highlights. 2016.; **Meadows Mental Health Policy Institute. "What is a Bed?" – Inpatient Needs in a Community Context. 2015.</i></p>	

OBJECTIVE #5.2:	Sustainability: By 2019, the Mental Health Task Force will amend bylaws to encourage initiatives to be fiscally accountable, add value, and quality focused based on accepted standards of practice.
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BACKGROUND ON STRATEGY/OBJECTIVE:

<i>Evidence Base:</i>	<p><u>A Sustainability Planning Guide for Healthy Communities*</u></p> <p>"Benefits of Coalitions</p> <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations. • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change."
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<i>Policy Change:</i>	<p>Yes, involves policy change.</p> <p><u>Considering the 85th Legislative Session: Behavioral Health Highlights^</u></p> <p>"Continued support of the Medicaid 1115 Transformation Waiver Transition Year and Extension. Our charge is to continue to develop local, collaborative healthcare systems for people with serious mental illness, substance use disorders and intellectual and developmental disabilities."</p>
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<i>Potential Partners:</i>	Aunt Bertha, Regional Healthcare Partnership 8, local behavioral health organizations, Child and Youth Behavioral Health Task Force
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STRATEGIES:

<i>Strat. #(s)</i>	<i>Description</i>
5.2.1	<p>For any Williamson County initiative requesting support of the Mental Health Task Force, they will be required to provide outcome data at least twice/year and are encouraged to:</p> <ol style="list-style-type: none"> 1. Fiscal Accountability: Develop sustainability plan prior to implementation with re-evaluation every six months. 2. Fiscal Accountability: Develop measurement of savings and/or positive financial impact for each intervention prior to implementation of intervention. 3. Value and Quality: Develop pre- and post- satisfaction surveys by stakeholders for the intervention at specified intervals of time. 4. Standard of Practice: Use national standards matched to intervention to ensure standard.
5.2.2	Decrease uncompensated care by having a funding source.
5.2.3	Tie each initiative to the needs assessment.
5.2.4	Develop a process to determine which initiatives to support.
5.2.5	Sustain cost of Aunt Bertha.

*Data Source: *Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from: https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf.; ^Bluebonnet Trails Community Services. Considering the 85th Texas Legislative Session: Behavioral Health Highlights. 2016.*

OBJECTIVE #5.3:	Coordinated Efforts: The Mental Health Task Force will continue to actively coordinate efforts of behavioral health organizations serving Williamson County residents to improve the behavioral health system.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>Considering the 85th Legislative Session: Behavioral Health Highlights*</u></p> <p><u>“Access to Integrated Healthcare.</u> Currently sustained through 1115 Waiver funding, the UT Health Science Center along with the Meadows Mental Health Policy Institute are assessing the impact of the integrated healthcare projects across the state. We hope our legislators will consider the value of access to medical and behavioral health integration in our local schools and community-based clinics in order to promote health (improved health scores) and improve access to services at the time they are needed (ensuring an informed patient is able to make choices and reducing “no shows”). Sustaining this valued integration of medical and behavioral health providers allows for access to care when it is needed; prevention of developing chronic and costly health issues; and also mainstreams behavioral health and reduces the stigma so that persons will seek the care necessary to maintain health.</p> <p><u>Value of Collaborations.</u> We know we are strongest when we work alongside our partners. We are able to focus on our strengths, reduce our costs and provide innovative services that we are unable to accomplish on our own. Bluebonnet Trails is supported by the insights of our county task forces (informing our service array) including representatives from the Commissioners’ Courts, Sheriffs’ Offices, judicial systems, justice systems, ISDs, hospitals and provider networks. In addition, we partner with other centers and local partners in formulating a pharmacy services (reducing costs); working alongside managed care organization to educate them about our services and ensure reimbursement rates are attached to those services; developing integrated health outcomes with UT Health Science Center and the Meadows MH Policy Institute; and successfully implementing 20 Medicaid 1115 Waiver projects in partnership with our local hospitals, justice systems, and emergency medical and behavioral health services."</p> <p><u>A Guide to Understanding Mental Health Systems and Services in Texas^</u></p> <p>Best Practice: Integrated Primary, Mental Health, and Substance Use Care; Best Practice: Child and Family Mental Health System of Care</p>
<i>Policy Change:</i>	Yes, involves policy change.
<i>Potential Partners:</i>	Professional Peer Review Committee, Child Protective Services, Williamson County Women's Meetup Group, Aunt Bertha, behavioral health organizations, psychiatrists, Child and Youth Behavioral Health Task Force
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
5.3.1	Through further development of Aunt Bertha, develop compendium of key players/organizations (including name, title and contact information) and identify roles and responsibilities of representatives from each organization.
5.3.2	Expand Professional Peer Review Committee to improve collaboration among key organizations
5.3.3	Make resource map and compendium on Aunt Bertha.
5.3.4	Identify and share models and best practices within partners/organizations in the county.
5.3.5	Update bylaws of the MHTF.
5.3.6	Link individuals with the Williamson County Women's Meetup Group as a resource/referral network.
<i>Data Source: *Bluebonnet Trails Community Services. Considering the 85th Texas Legislative Session: Behavioral Health Highlights. 2016.; ^Hogg Foundation for Mental Health. A guide to understanding mental health systems and services in Texas. 2014. Available from http://www.hogg.utexas.edu</i>	

6. Public Health and Medical Preparedness Committee (PHaMP)

Health Priorities Involved:



Date(s) Created:	10/17/2016 – 11/21/2016
Date Reviewed/Updated:	

GOAL:	Ensure coordinated preparedness and response activities among emergency management agencies, public health, EMS, and healthcare organizations in order to rapidly diagnose, investigate, and respond to health problems and health hazards within Williamson County.
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PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
6.1	Engage private provider community.	PHaMP	Baseline in 2017.
6.1	Draft response guidelines developed.	PHaMP	Not developed (2016).
6.2	Draft response guidelines developed.	PHaMP	Not developed (2016).
6.3	Emergency management, health care, and public health utilize WebEOC and other communication platforms for exercises and real incidents.	PHaMP	Baseline in 2017.
6.3	Draft operational guideline developed.	PHaMP	Not developed (2016).
6.4	Draft operational guideline developed.	PHaMP	Not developed (2016).
6.5	Draft operational guideline developed.	PHaMP	Not developed (2016).
6.6	Draft operational guideline developed.	PHaMP	Not developed (2016).
Long Term Indicators		Source	Baseline
6.1	Operational guideline finalized and exercised.	PHaMP	Not developed (2016).
6.2	Operational guideline finalized and exercised.	PHaMP	Not developed (2016).
6.3	Operational guideline finalized and exercised.	PHaMP	Not developed (2016).
6.4	Operational guideline finalized and exercised.	PHaMP	Not developed (2016).
6.5	Operational guideline finalized and exercised.	PHaMP	Not developed (2016).
6.6	Operational guideline finalized and exercised.	PHaMP	Not developed (2016).

OBJECTIVE #6.1:	Information Sharing: By 2019, PHaMP will strengthen collaboration between the medical community and the public health community through improved information sharing.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Project Public Health Ready Public Health Preparedness Capabilities 2011 2017 Health Care Preparedness and Response Capabilities
<i>Potential Partners:</i>	WCCHD, local hospital personnel, Williamson County Medical Society, Travis County Medical Society
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
6.1.1	Coordinate the development of guidelines and procedures for sharing health information between WCCHD and local health providers via the Public Health Information Network.
6.1.2	Develop a Notifiable Disease Toolkit for local health providers.
6.1.3	Develop disease specific risk communication strategies for WCCHD and community response partners.

OBJECTIVE #6.2:	<u>Information Sharing:</u> By 2019, PHaMP will develop an information sharing process that ensures a common operating picture among emergency management and the public health/healthcare community within Williamson County.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Project Public Health Ready Public Health Preparedness Capabilities 2011 2017 Health Care Preparedness and Response Capabilities
<i>Potential Partners:</i>	WCCHD, Round Rock Fire Department, Round Rock Office of Emergency Management, Leander ISD, Seton Family of Hospitals
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
6.2.1	Develop resource request process for public health, EMS, and healthcare partners that adheres to local emergency management processes.
6.2.2	Improve local configuration of WebEOC for emergency management, public health, EMS, and healthcare partners.
6.2.3	Develop a local Information Sharing Plan for emergency management, public health, EMS, and healthcare partners.

OBJECTIVE #6.3:	<u>Emergency Response:</u> By 2019, PHaMP will develop evidence-based protocols/procedures for responding to infectious disease incidents.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Project Public Health Ready Public Health Preparedness Capabilities 2011 2017 Health Care Preparedness and Response Capabilities
<i>Potential Partners:</i>	WCCHD, Leander Office of Emergency Management, local ISD, EMS, local infection preventionists, Round Rock Office of Emergency Management
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
6.3.1	Develop white powder response guidelines and procedures for emergency management, local first responders, public health, and the healthcare community.
6.3.2	Develop local BioWatch response guidelines and procedures for emergency management, local first responders, public health, and the healthcare community.
6.3.3	Develop scalable Point of Distribution plans for emergency management, local first responders, public health, and the healthcare community.

OBJECTIVE #6.4:	<u>Emergency Response:</u> By 2019, PHaMP will develop a common strategy for the evacuation of an in-patient healthcare facility.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Project Public Health Ready Public Health Preparedness Capabilities 2011 2017 Health Care Preparedness and Response Capabilities
<i>Potential Partners:</i>	WCCHD, EMS, local fire departments, Emergency Management, local police departments, Capital Area Trauma Regional Advisory Council (CATRAC)
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
6.4.1	Develop a patient tracking process.
6.4.2	Coordinate large-scale patient transportation strategy.
6.4.3	Develop a healthcare facility evacuation response plan.

OBJECTIVE #6.5:	<u>Behavioral Health</u> : By 2019, PHaMP will coordinate mental health process for all local first responder agencies.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Project Public Health Ready Public Health Preparedness Capabilities 2011 2017 Health Care Preparedness and Response Capabilities
<i>Potential Partners:</i>	Round Rock Fire Department, WCCHD, Williamson County Mobile Outreach Team, Mental Health Task Force, Cedar Park Police Department, Williamson County EMS
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
6.5.1	Develop mental health training for new employees of first responder agencies.
6.5.2	Develop peer support groups within local first responder agencies.
6.5.3	Develop mental health training for supervisors and leadership personnel within first responder agencies.
6.5.4	Develop a local first responder mental health safety plan.

OBJECTIVE #6.6:	<u>Behavioral Health</u> : By 2019, PHaMP will develop a coordinated community behavioral health response process.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	Project Public Health Ready Public Health Preparedness Capabilities 2011 2017 Health Care Preparedness and Response Capabilities
<i>Potential Partners:</i>	Round Rock Fire Department, WCCHD, Williamson County Mobile Outreach Team, Mental Health Task Force, Cedar Park Police Department, Williamson County EMS, Bluebonnet Trails Community Services, private behavioral health providers
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
6.6.1	Identify community response stakeholders.
6.6.2	Develop and coordinate a community behavioral health response plan.
6.6.3	Develop behavioral health training for community response stakeholders.
6.6.4	Coordinate drills and exercises for response stakeholders.
6.6.5	Ensure annual review and updating of the response process.

7. School Health

Health Priorities Involved:



Date(s) Created:	09/15/2016 – 10/20/2016
Date Reviewed/Updated:	

GOAL:	Promote healthy living for the school community (students, staff, and families) to maximize personal success and well-being.
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PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
7.1	Increase number of best practices identified.	Working group	Baseline data in 2017.
7.1	Increase number of best practices shared.	Working group	Baseline data in 2017.
7.2	Increase number of school and community health organizations.	MailChimp	27 organizations and 48 people subscribed (Oct 2016)
7.2	Increase number of members who attend working group meetings.	Working group attendance sheets	Average of 13 members per meeting (Oct 2016)
7.2	Increase promotion of school health initiatives.	Working group	Baseline data in 2017.
7.3	Increase networking resources and opportunities.	Working group	Baseline data in 2017.
7.3	Increase SHAC presentations.	Working group	Baseline data in 2017.
Long Term Indicators		Source	Baseline
County all students graduation rate		Texas Education Agency (TEA)	Williamson County: 94.8%, TX: 89.0% (2014-2015)
High School Drop Out Rate		TEA	Williamson County: 1.9%, TX: 6.3% (2014-2015)

OBJECTIVE #7.1:	Awareness of Resources: By 2019, the School Health working group will increase awareness of school health resources by identifying and sharing best practices in Williamson County.
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BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p>National Prevention Strategy: Active Living*</p> <p>“What Can Early Learning Centers, Schools, Colleges, and Universities Do?”</p> <ul style="list-style-type: none"> • Provide daily physical education and recess that focuses on maximizing time physically active. • Participate in fitness testing (e.g., the President’s Challenge) and support individualized self-improvement plans. • Support walk and bike to schools programs (e.g., “Safe Routes to School”) and work with local governments to make decisions about selecting school sites that can promote physical activity. • Limit passive screen time. • Make physical activity facilities available to the local community.” <p>National Prevention Strategy: Mental and Emotional Well-being^</p> <p>“What Can Early Learning Centers, Schools, Colleges, and Universities Do?”</p> <ul style="list-style-type: none"> • Implement programs and policies to prevent abuse, bullying, violence, and social exclusion, build social connectedness, and promote positive mental and emotional health. • Implement programs to identify risks and early indicators of mental, emotional, and behavioral problems among youth and ensure that youth with such problems are referred to appropriate services.

	<ul style="list-style-type: none"> • Ensure students have access to comprehensive health services, including mental health and counseling services.”
<i>Potential Partners:</i>	Staff, families, students, school leaders, local businesses, SHACS, BTCS, other school districts, hospitals, local doctors, IT’S TIME TEXAS, Opportunities For Williamson & Burnet Counties, LifeSteps, police departments, EMS, fire departments, American Heart Association, The Georgetown Project, Texas A&M AgriLife Extension Service, state agencies, Dairy MAX, CATCH Global Foundation, Marathon Kids, NAMI Austin, faith based organizations, American Diabetes Association
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
7.1.1	Utilize past needs assessments to evaluate school health needs in the county and among member organizations.
7.1.2	Organize opportunities to share best practices.
7.1.3	Identify and promote school health community resources through channels such as Aunt Bertha, google documents, MailChimp, newsletters, webinars.
<i>Data Source: *National Prevention Strategy: Active Living [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/active-living.html; ^National Prevention Strategy: Mental and Emotional Well-being [Internet]. U.S. Department of Health and Human Services. Available from: http://www.surgeongeneral.gov/priorities/prevention/strategy/mental-and-emotional-well-being.html.</i>	

OBJECTIVE #7.2:	<u>Sustainability:</u> By 2019, the School Health working group will create sustainability by doubling participation of school and community health organizations in the working group.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>A Sustainability Planning Guide for Healthy Communities*</u></p> <p>“Benefits of Coalitions</p> <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations. • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change.”
<i>Policy Change:</i>	Yes, monitor school-health related legislative sessions.
<i>Potential Partners:</i>	Staff, families, students, school leaders, local businesses, SHACS, BTCS, other school districts, hospitals, local doctors, IT’S TIME TEXAS, Opportunities For Williamson & Burnet Counties, LifeSteps, police departments, EMS, fire departments, American Heart Association, The Georgetown Project, Texas A&M AgriLife Extension Service, state agencies, Dairy MAX, CATCH Global Foundation, Marathon Kids, NAMI Austin, faith based organizations, American Diabetes Association
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
7.2.1	Promote school health initiatives (in the legislative sessions, outside organizations).
7.2.2	Identify ways to support SHACs and present at SHACs.
7.2.3	Recruit diverse organizations that support school health and/or provide resources to the schools.
<i>Data Source: *Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from: https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf.</i>	

OBJECTIVE #7.3:	Collaboration: By 2019, the School Health working group will create solid relationships with all member organizations that provide school health resources in Williamson County.*
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<u>Whole School, Whole Community, Whole Child (WSCC)</u> [^] “The Whole School, Whole Community, Whole Child (WSCC) model expands on the eight elements of CDC’s coordinated school health approach and is combined with the whole child framework. CDC and ASCD developed this expanded model—in collaboration with key leaders from the fields of health, public health, education, and school health—to strengthen a unified and collaborative approach designed to improve learning and health in our nation’s schools.”
<i>Potential Partners:</i>	Staff, families, students, school leaders, local businesses, SHACS, BTCS, other school districts, hospitals, local doctors, IT’S TIME TEXAS, Opportunities For Williamson & Burnet Counties, LifeSteps, police departments, EMS, fire departments, American Heart Association, The Georgetown Project, Texas A&M AgriLife Extension Service, state agencies, Dairy MAX, CATCH Global Foundation, Marathon Kids, NAMI Austin, faith-based organizations, American Diabetes Association
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
7.3.1	Develop networking resources. Establish school and organizational entry points.
7.3.2	Create networking experiences for member organizations.
7.3.3	Support member initiatives.
<p><i>Notes: * School Health working group defined solid relationships between member organizations as relationships with two-way communication.</i></p> <p><i>Data Source: ^Whole School, Whole Community, Whole Child (WSCC) [Internet]. Centers for Disease Control and Prevention. 2015. Available from: http://www.cdc.gov/healthyschools/wsc/index.htm.</i></p>	

8. Substance Abuse Collaborative

Action Plan adapted from LifeSteps Coalition Strategic/Implementation Plan FY2016-2017. Visit LifeSteps Substance Abuse Prevention Coalition (<http://lifestepscoalition.org/coalition/>) for more information.

Health Priorities Involved:



Date(s) Created:	09/21/2016 – 10/19/2016
Date Reviewed/Updated:	

GOAL: Counteract influences that effect underage drinking (UAD) and substance abuse.

PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	
8.1.1	Increase community and law enforcement understanding of the scope of underage drinking	LifeSteps	
8.1.1	Increase community knowledge about underage drinking laws.	LifeSteps	
8.1.2	Approve a social hosting ordinance draft.	LifeSteps	
8.1.3	Approve draft plan for activities in Taylor by coalition.	LifeSteps	
8.1.4	Approve leadership program, name, logo, calendar and enrollment/ participation/ certification criteria.	LifeSteps	
8.1.5	Decrease in TABC compliance check failures rate.	LifeSteps	
8.2.1	Increase awareness of the scope of the problem.	LifeSteps	
8.2.2	Increase in perceived risk of marijuana usage.	LifeSteps	
8.2.3	Increase number of participants trained.	LifeSteps	
8.3.1	Approve Issue Brief and marketing campaign related to Rx abuse and misuse.	LifeSteps	
8.3.2	Increase knowledge of the problem.	LifeSteps	
8.3.3	Increase number of collected drugs and number of participants.	LifeSteps	
8.3.3	Increase number of local jurisdictions considering installing permanent collection boxes.	LifeSteps	
8.3.4	Increase number of individuals and organizations carrying naloxone.	LifeSteps	
8.3.4	Increase awareness of Rx abuse and overdose.	LifeSteps	
8.3.5	Approve partnership with WWA and other local medical organizations to plan action steps.	LifeSteps	
8.3.5	Increase number of providers implementing the Screening, Brief Intervention, and Referral to Treatment.	LifeSteps	
Long Term Indicators		Source	Baseline
Youth (6 th to 12 th grade) who Used Alcohol in Past 30 days		Texas School Survey (TSS) Region 7 and 8 Report	18.6% (Spring 2014)
Youth (6 th to 12 th grade) who Used Marijuana in Past 30 days		TSS Region 7 and 8 Report	6.9% (Spring 2014)

OBJECTIVE #8.1:	Underage Drinking: Reduce/eliminate underage drinking (UAD) in Williamson County.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	According to the Texas School Survey, alcohol continues to be the most used substance among youth in Region 7a. 46% of youth report having used alcohol at some point in their lives. By Grade 12, almost 35% of youth report using alcohol in the past 30-days. 32% get alcohol at parties. 28% get alcohol from friends. In the past 30-days, 11% of youth report binge drinking. Alcohol is the drug of choice among youth; it is readily available and easy to obtain. Adult community members are providing alcohol at parties (social access). Alcohol is easily taken from home for parties elsewhere.*
<i>Policy Change:</i>	Yes, develop a draft of a local Social Hosting ordinance.
<i>Potential Partners:</i>	Member organizations of LifeSteps Coalition, schools, WWA, local medical and behavioral health organizations, youth serving organizations, law enforcement agencies, religious or fraternal organizations, universities
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
8.1.1	Develop and promote an Issue Brief on Social Hosting.
8.1.2	Develop a draft of a local Social Hosting Ordinance.
8.1.3	Convene Coalition formation group and recruit Taylor coalition members.
8.1.4	Recruit local youth for a leadership program.
8.1.5	Outreach and education for retailers and restaurants.
<i>Data Source: *HHS Region 7 and 8 Report: 2014 [Internet]. Texas School Survey of Drug and Alcohol Use. Available from: http://www.texaschoolsurvey.org/Documents/Reports/Region/14Region7-8.pdf.</i>	

OBJECTIVE #8.2:	Marijuana Use by Youth: Reduce/eliminate marijuana use by youth in Williamson County as reported by school districts to the TEA.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	TSS and school climate surveys identified use of marijuana now surpasses youth tobacco usage. 39% of youth report at least one close friend uses marijuana. 30% report marijuana is “somewhat” or “very easy” to get. 77% of youth admitted to DSHS treatment facilities are for marijuana use. Students are using e-cigarettes to vape marijuana, as evidenced by an 85% increase in disciplinary actions related to tobacco and e-cigarettes. Youth do not perceive marijuana use as high-risk. TSS shows marijuana use surpasses youth tobacco use. Recent TSS and community surveys identify alcohol and marijuana as the two substances most abused by youth.*
<i>Potential Partners:</i>	Member organizations of LifeSteps Coalition, schools, WWA, local medical and behavioral health organizations, youth serving organizations, law enforcement agencies, religious or fraternal organizations, universities
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
8.2.1	Collect and analyze school district and TSS data, Courts, local admissions to treatment related to marijuana.
8.2.2	Communicate/educate through social media outlets and Op-Ed articles.
8.2.3	Promote marijuana prevention, early intervention, support, and treatment training for parents, students and community groups
<i>Data Source: *HHS Region 7 and 8 Report: 2014 [Internet]. Texas School Survey of Drug and Alcohol Use. Available from: http://www.texaschoolsurvey.org/Documents/Reports/Region/14Region7-8.pdf.</i>	

OBJECTIVE #8.3:	Abuse and Misuse of Prescription Drugs: Reduce abuse and illicit use of OTC and prescription drugs as reported by local Poison Control Center, first responders, CDC and local hospitals and treatment centers.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	CDC, TSS and Poison Control data reflect increases in the misuse of prescription and OTC drugs. 129 people die every day to overdose. 51 individuals died due to prescription pain relievers.
<i>Potential Partners:</i>	Member organizations of LifeSteps Coalition, schools, WWA, local medical and behavioral health organizations, youth serving organizations, law enforcement agencies, religious or fraternal organizations, universities
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
8.3.1	Collect and analyze data related to abuse and misuse of prescription drugs.
8.3.2	Create awareness related to abuse and misuse of prescription drugs.
8.3.3	Advocate for safe and responsible disposal of medications.
8.3.4	Create awareness related to overdose and its effects.
8.3.5	Promote screening, brief intervention, and referral to treatment to health care providers.

9. Systems of Care

Health Priorities Involved:



Date(s) Created:	07/13/2016 – 9/14/2016
Date Reviewed/Updated:	

GOAL: Provide a continuously improving system of access to quality healthcare for the community.

PERFORMANCE MEASURES			
Obj. #(s)	Short Term Indicators	Source	Baseline
9.1	Increase number of referrals on Aunt Bertha by community partners.	Aunt Bertha	Baseline data in 2017
9.1	Increase number of searches on Aunt Bertha by community partners.	Aunt Bertha	Baseline data in 2017
9.2	Increase number of partners participating in a common HIE.	Working group	Baseline data in 2017
9.3	Increase number of community health and human services referral partners on Aunt Bertha.	Aunt Bertha	Baseline data in 2017
Long Term Indicators		Source	Baseline
Increase the proportion of persons with health insurance.		American Community Survey	Williamson County: 85.6%; TX: 74.3% (2014)

OBJECTIVE #9.1: Coordination: By 2019, Systems of Care (SOC) will improve coordination efforts by ensuring that 100% of all SOC partners will use Aunt Bertha to search and refer.*

BACKGROUND ON STRATEGY/OBJECTIVE:

<i>Evidence Base:</i>	<p>Williamson County Community Health Improvement Plan Second Year Progress Report 2014-2016</p> <p>Aunt Bertha was a response to the CHIP 2014-2016 objective: Develop electronic patient referral protocols among diverse care providers in Williamson County.</p> <p>“In year two, Williamson County signed a contract with Aunt Bertha (www.wilco.org/communityresources) for a Williamson County -branded site that allows for referrals between providers as well as ZIP code level searches for community resources and social services. Aunt Bertha will provide the robust electronic patient referral capability needed by providers in the county.”</p> <p><u>A Sustainability Planning Guide for Healthy Communities^</u></p> <p>“Benefits of Coalitions</p> <ul style="list-style-type: none"> • Effective vehicles for exchanging knowledge and ideas. • Limit duplication of strategies and services. • Demonstrate and develop community support/concern for issues. • Maximize the power of individuals and groups through collective action. • Improve trust, communication, and collaboration among community agencies and sectors. • Mobilize diverse talents, resources, and strategies. • Build strength and cohesiveness by connecting individual activists and organizations. • Change community norms and standards concerning health-risk behaviors. • Promote Policy, Systems, and Environmental Change.”
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<i>Policy Change:</i>	Yes, involves changing organizational policies to search and refer using Aunt Bertha.
<i>Potential Partners:</i>	FQHCs, organizations in the WWA, hospitals, Head Starts, Independent School Districts, Round Rock Serving Center, local non-profit organizations
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
9.1.1	Promote Aunt Bertha (search and referral functions) among organizations in Williamson County.
9.1.2	Claim services on Aunt Bertha.
9.1.3	Train SOC partners on Aunt Bertha referral process.
9.1.4	Determine referral process among SOC partners.
9.1.5	Determine progress by measuring search and referral functions.
<p><i>Notes: *Aunt Bertha connects clients to programs and services and allows navigators to refer services to clients. For more information, visit http://about.auntbertha.com/mission.</i></p> <p><i>Data Source: ^Batan M, Butterfoss FD, Jaffe A, LaPier T. A Sustainability Planning Guide for Healthy Communities. Centers for Disease Control and Prevention (CDC); Available from: https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/pdf/sustainability_guide.pdf.</i></p>	

OBJECTIVE #9.2:	Sustainability: By 2019, all partners in Systems of Care will participate in a common Health Information Exchange (HIE).*
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>Principles and Strategy for Accelerating Health Information Exchange (HIE), The Office of the National Coordinator for Health Information Technology^</u></p> <p>“The use of HIE facilitates better communication and enables more coordinated and connected care across the full continuum of health delivery and payment settings. Effective communication and information sharing is essential to improving the quality of care, bettering health of communities, and lowering per capita costs.”</p>
<i>Policy Change:</i>	Yes, involves organizational policy changes to participate in HIE.
<i>Potential Partners:</i>	Local hospitals (St. David’s Georgetown, St. David’s Round Rock, Seton Williamson, Baylor Scott & White (BS&W) Round Rock, BS&W Taylor, Cedar Park Regional), 18 EMS providers in 11 county region, Texas A&M Health Science Center, Capital Area Trauma Regional Advisory Council (CATRAC)
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
9.2.1	Encourage all hospitals (Seton, St. David's, Cedar Park, and Baylor Scott & White) to participate.
9.2.2	Explore patient care record with Texas A&M to feed into large HIE.
9.2.3	Explore opportunities for Systems of Care partners to build onto Health Data Exchange to share data and to share referrals.
9.2.4	Identify benchmark data with other Regional Advisory Councils in the state.
<p><i>Notes: *Health Information Exchange (HIE) allows health care professionals and patients from accessing medical records electronically quickly and securely. For more information, visit https://www.healthit.gov/HIE.</i></p> <p><i>Data Source: ^The Office of the National Coordinator for Health Information Technology. Principles and Strategy for Accelerating Health Information Exchange (HIE). 2013. Available from: https://www.healthit.gov/sites/default/files/acceleratinghieprinciples_strategy.pdf.</i></p>	

OBJECTIVE #9.3:	<u>Availability:</u> By 2019, Systems of Care will increase number of community health and human services referral partners by 10%.
BACKGROUND ON STRATEGY/OBJECTIVE:	
<i>Evidence Base:</i>	<p><u>The Role of Patient Navigators in Eliminating Health Disparities*</u> “Patient navigation is a clinical tool that, when applied in the context of a biopsychosocial approach to health, particularly among ethnic populations, can play a significant role in improving individual and population health. Navigators are uniquely positioned to play an integral role in the changing environment of health care delivery by facilitating access to care, as well as addressing language and cultural barriers.”</p> <p><u>Care Coordination^</u> “Care coordination in the primary care practice involves deliberately organizing patient care activities and sharing information among all of the participants concerned with a patient's care to achieve safer and more effective care.”</p>
<i>Potential Partners:</i>	Austin Association of Community Health Workers, local hospitals, coalitions, religious organizations, assisted living, school clinics, home health, library, organizations in the WWA
STRATEGIES:	
<i>Strat. #(s)</i>	<i>Description</i>
9.3.1	Determine current list of community health and human services referral partners.
9.3.2	Develop list of potential community health and human services referral partners.
9.3.3	Promote Aunt Bertha (search and referral functions) among organizations in Williamson County.
9.3.4	Sign up community partners onto Aunt Bertha.
9.3.5	Organize and coordinate Aunt Bertha training.
<p><i>Data Source: *Natale-Pereira A, Enard KR, Nevarez L, Jones LA. The Role of Patient Navigators in Eliminating Health Disparities. Cancer. 2011;117:15.;^Agency for Healthcare Research and Quality. Care Coordination. 2016. Available from: http://www.ahrq.gov/professionals/prevention-chronic-care/improve/coordination/index.html</i></p>	

Appendix B: Works Cited

1. Texas Population Projections Program [Internet]. Tx Demographic Center. Available from: <http://osd.texas.gov/Data/TPEPP/Projections/>
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4. Community Health Assessments and Health Improvement Plans [Internet]. Centers for Disease Control and Prevention (CDC) 2015. Available from: <https://www.cdc.gov/stltpublichealth/cha/plan.html>
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Appendix D: List of Acronyms

ACHIEVE: Action Communities for Health, Innovation, and EnVironmental change

ASCD: Association for Supervision and Curriculum Development

BTCS: Bluebonnet Trails Community Services 7 years

CAPCOG: Capital Area Council of Governments

CATRAC: Capital Area Trauma Regional Advisory Council

CDC: Centers for Disease Control and Prevention

CHA: Community Health Assessment

CHIP: Community Health Improvement Plan

CIT: Crisis Intervention Team

DSHS: Texas Department of State Health Services

EMS: Emergency Medical Services

HHS: Texas Health and Human Services

HIE: Health Information Exchange

HP2020: Healthy People 2020

ISD: Independent School District

LifeSteps: LifeSteps Council on Alcohol and Drugs

MAPP: Mobilizing for Action through Planning and Partnerships

MADD: Mothers Against Drunk Driving

MHTF: Mental Health Task Force

NACCHO: National Association of County and City Health Officials

NAMI: National Alliance on Mental Illness

NPS: National Prevention Strategy

OEM: Office of Emergency Management

OTC: Over-the-counter

OWBC: Opportunities for Williamson & Burnet Counties

PCP: Primary Care Provider

PIO: Public Information Officer

PHAB: Public Health Accreditation Board

PHaMP: Public Health and Medical Preparedness Committee

SAFE: Stop Abuse for Everyone

SHAC: School Health Advisory Council

SOC: Systems of care

TEA: Texas Education Agency

TSS: Texas School Survey on Drugs and Alcohol

WCCHD: Williamson County and Cities Health District

WCSSO: Williamson County Sheriff's Office

WG: Working Group

WIC: Women, Infants, and Children

WilCo: Williamson County

WSCC: Whole School, Whole Community, Whole Child

WWA: WilCo Wellness Alliance

Appendix E: Glossary of Terms

Community Health Assessment (CHA): A systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation (6).

Community Health Improvement Plan (CHIP): A long-term, systematic effort to address public health problems on the basis of the results of community health assessment activities and the community health improvement process. This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources (6).

Coalition: Collection of individuals and organizations working together to achieve specific goals (13).

Texas Health and Human Services (HHS): In September 2016, Texas began transforming how it delivers health and human services to qualified Texans. The transformed HHS is made up of the following agencies and departments: Texas Health and Human Services, Internal Audit, Office of Inspector General, Texas Department of Aging and Disability Services, Texas Department of Family and Protective Services, Texas Department of State Health Services, and Texas Department of Assistive and Rehabilitative Services.

U.S. Department of Health and Human Services: The federal agency that oversees CMS (Centers for Medicare and Medicaid Services), which administers programs for protecting the health of all Americans, including Medicare, the Marketplace, Medicaid, and the Children's Health Insurance Program.

Goal: Broad or general statement of desired change or end date (12).

Health: State of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Health disparities: Preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations.

Health outcomes: Change in the health status of an individual, group or population that is attributable to a planned intervention or series of interventions, regardless of whether such an intervention was intended to change health status (12).

Healthy People 2020 (HP2020): Provides science-based, 10-year national objectives for improving the health of all Americans (10).

National Association of County and City Health Officials (NACCHO): An association with members from 2,800 local health departments across the United States that seeks health, equity, and security for all people in their communities through public health policies and services. NACCHO's mission is to be a leader, partner, catalyst, and voice for local health departments in order to ensure the conditions that promote health and equity, combat disease, and improve the quality and length of all lives (6).

National Prevention Strategy (NPS): Focuses on prevention “by integrating recommendations and actions across multiple settings to improve health and save lives” (9).

Objectives: Specific measurable products of your intervention. Objectives should be SMART: specific, measurable, achievable, realistic, and time-framed (12).

Percent: A ratio “out of 100.” Example: 75% means 75 out of 100.

Population: The total of all individuals in a given area.

Performance Measures: Measures that quantify how well a strategy’s tactic(s) are working or “performing” (12).

Qualitative data: Non-numerical information often presented in narrative form.

Rate: Occurrence of a disease within a population in a given time period expressed as a ratio. Example: 5.0 per 100,000 mean 5 cases for every 100,000 people.

Stakeholders: All persons, agencies and organizations with an investment or stake in the health of the community and the local public health system.

Strategy: General approach or a collection of actions that has a possible chance of achieving the objectives. Broad strategies allow for flexibility during implementation (12).

Women, Infants, and Children (WIC) Program: A federal program that provides nutritious foods, breastfeeding support and nutrition education to low-income pregnant, postpartum and breastfeeding women, and infants and children until 5 years of age who are found to be at nutritional risk.

Appendix F: Community and Working Group Members Participating in Action Planning Sessions

Community Groups

East

Content and Process Facilitators

Ray Langlois	Coalition Coordinator, WWA
Melissa Tung	Systems Analyst, WCCHD

Community Members

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Julie Rydell	Good Life Taylor

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Sara Jefferson	Program Manager, IT'S TIME TEXAS
Kathy Lesko	Community Outreach, Baylor, Scott, & White
Onnalita Sutton	Primary Prevention Coordinator, Hope Alliance

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Victoria Tuffentsamer	Case Manager, Opportunities for Williamson & Burnet Counties

Working Groups

Active Living

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Chelsea Couch	Texercise Coordinator, HHS
Josh Dodgen	Intern, WCCHD
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Caroline Hilbert	Programs Manager, IT'S TIME TEXAS
Kristen Hullum	Trauma Injury Prevention Coordinator, St. David's Round Rock Medical Center
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Mental Health Task Force

Content and Process Facilitators

Ray Langlois	Coalition Coordinator, WWA
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Melissa Tung	Systems Analyst, WCCHD

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Annie Burwell	Director, Williamson County Mobile Outreach Team and Williamson County Mobile Healthcare Link
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LifeSteps Substance Abuse Prevention Coalition

Content and Process Facilitators

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Appendix G: Document Revision Log

Table with 5 columns: Version Number, Date Approved, Approved by, Brief Description, and Affected Page Number(s). The first row contains data: 1.0, January 11, 2017, Matt Richardson, External Version 1 Published. The rest of the table is empty.