LakeCounty
Health Department and
Community Health Center   Live Well Lake County

2016-2021

Live Well Lake County Community Health Improvement Plan Final Draft

Live Well Lake County Steering Committee
LAKE COUNTY HEALTH DEPARTMENT
SUMMER 2016

Contents

Residents of Lake County and Our Partners in Health:

Welcome and I am pleased that you have found Lake County's Community Health Improvement Plan (CHIP). This is our five year, systematic and focused plan that will lead to implementation of interventions to address our four identified public health priorities: cardiovascular disease and hypertension, obesity, behavioral health and diabetes. This plan is based on the results of several community health assessments and a community health improvement process. Lake County's vision is: "Achieving the highest level of health and wellness for all in Lake County." The strategies outlined in this plan are critical in providing guidance to the community on improving health. The plan is intended to engage and empower partners to implement coordinated efforts, and evaluate actions to assure success.

The purpose of this Community Health Improvement Plan is to:

- Identify our community health priorities;
- Focus our attention and resources on strategies to affect positive health outcomes;
- Monitor our progress in achieving these outcomes; and
- Improve our community's health.

Our community health improvement process was led by the Live Well Lake County Steering Committee with guidance from the Lake County Health Department and Community Health Center. The process utilized data from community health assessments completed in 2015 to identify the four key priority health issues. Objectives were created and then strategies for action were developed to ensure measurable and actionable health improvement. Implementation efforts are ongoing and will occur over the course of the next five years.

Lake County's CHIP is a call to action. The success of the community health improvement process relies on our engaged community members, partners, and stakeholders. All our community members and organizations can play a role in the process, whether it is through the understanding of the community priorities and spreading awareness or joining action teams to implement strategies. The community health improvement process looks beyond the performance of individual organizations serving specific segments of our community and concentrates on the activities and contributions of many organizations or community members on the overall improvement of our health. The Lake County Health Department and Community Health Center can provide facilitative guidance as you incorporate this CHIP into your own work plans. Contact us at healthassessment@lakecountyil.gov.

Mark Pfister, MSES, LEHP
Interim Executive Director
Lake County Health Department and Community Health Center

The Priorities

The Live Well Lake County Steering Committee has selected four community health priorities. These priorities are intended to align community efforts through funding and resource allocation and to create common targets for improvement. While this isn't a comprehensive list of all the issues facing the residents of Lake County, the priorities are intended to represent the focus of the health improvement work to be conducted for the next five years. The following outlines the priorities and supporting data. The infographics help tell the story of the priorities including prevalence/incidence of the condition, unequal burdens (health inequities), risk factors, and the level to which the health issue causes death.

1. ### CARDIOVASCULAR DISEASE AND HYPERTENSION
   Hypertension (high blood pressure) is a common, yet serious condition in which the force of the blood in a person's arteries is too high. This damages artery walls and the heart and when uncontrolled, can increase the risk of heart attack and stroke. Lifestyle risk factors for cardiovascular disease and hypertension include physical inactivity, being overweight or obese, eating too much salt, drinking too much alcohol, and using tobacco.

2. ### OBESITY
   Obesity means having too much body fat, and is most often caused by a combination of increased intake of high fat foods, physical inactivity, and genetic susceptibility. This condition is a major risk factor for developing cardiovascular disease, stroke, diabetes, and some cancers. It is also associated with poorer mental health outcomes and reduced quality of life.

3. ### BEHAVIORAL HEALTH CAPACITY AND INFRASTRUCTURE
   Behavioral health encapsulates both mental health, including serious mental illness, as well as substance abuse disorders. People with a mental health disorder are more likely to experience a substance use disorder and people with a substance use disorder are more likely to have a mental health disorder. Depression, binge drinking, and illicit drug use are prevalent. LCHD/CHC and the non-profit sector are at capacity and cannot keep up with demand for behavioral health services.

4. ### DIABETES
   Diabetes is a disease where there is too much sugar (also called glucose) in one's blood, which affects how one's body uses glucose. Glucose is vital to health because it's an important source of energy for the cells that make up muscles and tissues. It's also the brain's main source of fuel. Type 1 diabetes is a serious genetic condition. Type 2 diabetes is more common, yet serious condition. Uncontrolled diabetes can lead to cardiovascular disease; nerve, kidney, eye, skin and foot damage; amputations; and hearing impairment and has been linked to Alzheimer's disease. Lifestyle risk factors include physical inactivity, overweight, obesity, high blood pressure, and abnormal cholesterol and triglyceride levels.
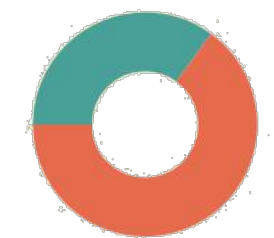
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CARDIOVASCULAR DISEASE AND HYPERTENSION

In Lake County

35% of Lake County adults have been diagnosed with hypertension [1]

that's over

181,000

adults with hypertension! [1]

CARDIOVASCULAR DISEASES 25% OF ALL DEATHS IN LAKE COUNTY & 19% OF EARLY DEATHS [2]

Nationally

29% of adults have hypertension

30% of adults have prehypertension [3]

48% of patients are not controlling their high blood pressure [4]

$733 average annual medical costs for treating hypertension [6]

An unequal burden

National rates vary by race and by gender:

46% of African American women

43% of African American men [5]

costs vary by race:

$981 average annual hypertension costs for an African American [6]

mortality varies by race:

African Americans in Lake County ages 45 to 74 are more than **2x** as likely as whites to die of heart disease [2]

Sources:

1. LCHD Community Health Status Assessment Survey 2015
2. Detailed Mortality Data, CDC WONDER (2010-2014), http://wonder.cdc.gov/
3. "High Blood Pressure Fact Sheet." CDC. 2011. http://www.cdc.gov/dhdsp/data_statistics/fact_sheets/docs/fs_bloodpressure.pdf
4. Nwankwo T, Yoon SS, Burt V, Gu Q. Hypertension among adults in the U.S. National Health and Nutrition Examination Survey, 2011-2012. NCHS Data Brief, No. 133. Hyattsville, MD: National Center for Health Statistics, Centers for Disease Control and Prevention, U.S Dept of Health and Human Services, 2013.
5. "High Blood Pressure Facts." CDC. Updated February, 2015. http://www.cdc.gov/bloodpressure/facts.htm
6. Davis, K. Expenditures for Hypertension among Adults Age 18 and Older, 2010. Estimates for the U.S. Civilian Noninstitutionalized Population. Statistical Brief #404. April 2013. Agency for Healthcare Research and Quality, Rockville, Md. http://www.meps.ahrq.gov/mepsweb/data_files/publications/st404/st404.shtml
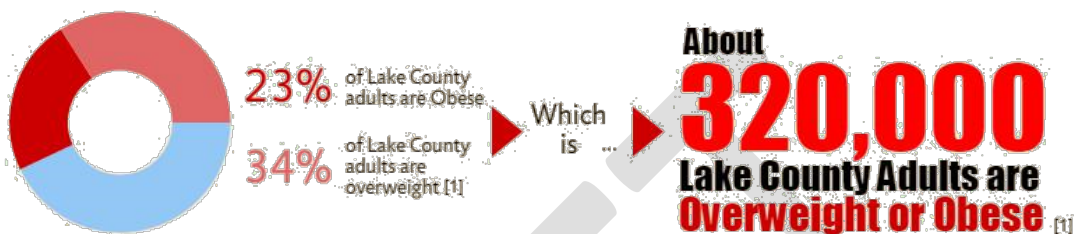
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OBESITY

23% of Lake County adults are Obese

34% of Lake County adults are overweight [1]

Which is ...

About **320,000** Lake County Adults are **Overweight or Obese** [1]

An unequal burden

Co-Morbidities

Lake County residents with only a **High School Degree** are

1.3 TIMES

more likely to be OBESE than **college graduates** [3]

National obesity rates are **58%** higher for adults with disabilities [2]

Communities in Lake County with a lower median household income have

60% higher rates of obesity [6]

$1,429 national average annual medical costs for a person with obesity [5]

Sleep Apnea

Lung Disease

Gallstones

Cancer

Gout

Stroke

Heart Disease

Diabetes

Pancreatitis

Arthritis

PEOPLE WITH OBESITY DIE 9.4 YEARS EARLIER [4]

Sources:
1. Illinois Secretary of State, Drivers License Data, 2014
2. "Disability and Obesity", CDC, http://www.cdc.gov/ncbddd/disabilityandhealth/obesity.html
3. Centers for Disease Control and Prevention (CDC), Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2010-2014. Illinois County Data - Round 5.
4. Greenberg, J. A. (2013), Obesity and early mortality in the United States. Obesity, 21: 405–412. doi: 10.1002/oby.20023
5. Morbidity and Mortality Weekly Report Vital Signs: State-Specific Obesity Prevalence Among Adults — United States, 2009.
http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5930a1.htm
6. Illinois Secretary of State, Drivers License Data, 2014.

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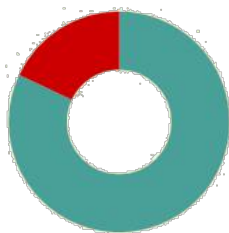
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BEHAVIORAL HEALTH

Depression

18% of Lake County adults have been diagnosed with Depression [1]
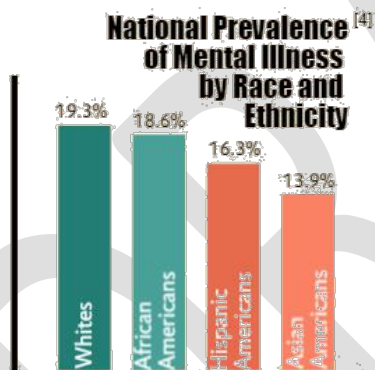
Which is...

Almost **100,000** Lake County Adults have been diagnosed with Depression [1]

**19.2%** of US adults with mental illness also have **Substance Abuse Disorder** [4]

National Prevalence [4] of Mental Illness by Race and Ethnicity

- Whites: 19.3%
- African Americans: 18.6%
- Hispanic Americans: 16.3%
- Asian Americans: 13.9%

An unequal burden

Non-Caucasian **53%**   Caucasian **38%**

Lake County adults who report having 1 or more days in a month where their mental health is not good [3]

$5,400 national average economic burden for a person with major depressive disorder [2]

Suicide
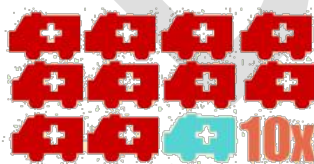
10x Lake County residents with depression are 10 times more likely to consider suicide [1]

SUICIDE **#10** CAUSE OF DEATH IN LAKE COUNTY [6]

Sources:
1. LCHD Community Health Status Assessment Survey, 2015.
2. Greenberg, Paul E., et al. "The economic burden of adults with major depressive disorder in the United States (2005 and 2010)." The Journal of clinical psychiatry 76.2 (2015): 155-162.
3. Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data, Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2010-2014.
4. Substance Abuse and Mental Health Services Administration, Results from the 2012 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-47, HHS Publication No. (SMA) 13-4805. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2013.
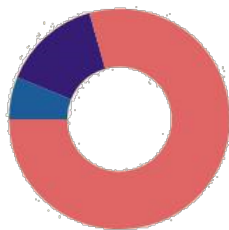6. Detailed Mortality Data, CDC WONDER (2010-2014). http://wonder.cdc.gov/

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DIABETES

Burden of Diabetes

6% of Lake County adults have been diagnosed with diabetes [1]

14% of Lake County adults have been diagnosed with pre-diabetes [2]

over **31,000** adults have been diagnosed with diabetes [1]

and about another **73,000** have been diagnosed with pre-diabetes [2]

$7,900 average annual diabetes costs for each person with diabetes [5]

Nationally, **up to 28%** of people with diabetes **don't know** they have it [4]

An unequal burden

Hispanics & African Americans are over **1.6x** as likely as whites to be diagnosed with diabetes [4]

African Americans ages 45-74 are **3x** more likely to die of diabetes than whites in Lake County [3]

DIABETES MELLITUS #6 LEADING CAUSE OF DEATH & #4 CAUSE OF EARLY DEATH IN LAKE COUNTY [3]

Sources:
1. LCHD Community Health Status Assessment Survey 2015
2. LCHD Community Health Status Assessment Survey 2015
3. Detailed Mortality Data, CDC WONDER, 2010-2014. http://wonder.cdc.gov/
4. "National Diabetes Statistics Report, 2014." CDC. 2014. http://www.cdc.gov/diabetes/pubs/statsreport14/national-diabetes-report-web.pdf
5. "The Cost of Diabetes," American Diabetes Association 2013. http://www.diabetes.org/advocacy/news-events/cost-of-diabetes.html

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PRIORITIZATION PROCESS (MODIFIED HANLON METHOD)

PURPOSE

The Lake County Health Department and Community Health Center (LCHD/CHC) used data to guide decision-making during the 2016 community health improvement process. LCHD/CHC adapted the recommended Hanlon Method from materials available through the National Association of County and City Health Officials (NACCHO)[1] to meet the needs of the Lake County assessment.

HANLON METHOD

The traditional Hanlon Method considers four criteria of individual health problems: size of the problem, seriousness of the problem, estimated effectiveness of the solution, and PEARL factors (propriety, economic feasibility, acceptability, resource availability, and legality). For the modified method, there is a focus only on the first two criteria (size and seriousness). Because of the variety of potential interventions for any health issue, we believe that it is more appropriate to allow participants in the planning process to select effective strategies after the driving health challenges in the community were selected so the priorities would be based on the highest areas of need. By initially utilizing size and seriousness, the data-driven process may reduce bias during prioritization of the most impactful health issues in Lake County.

SIZE

Size is scored on a scale of 1 to 10 and taken directly from the guiding document provided by NACCHO. Percent of population afflicted was either a prevalence or an incidence measure, depending on the health issue.

Rating	Percent of Population Afflicted
9-10	> 25%
7-8	10-24%
5-6	1-10%
3-4	0.1-0.9%
1-2	0.01-0.09%
0	< 0.01%

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[1] "Tip Sheet: Prioritizing Issues in a Community Health Improvement Process." Community Health Assessments and Community Health Improvement Plans for Accreditation Preparation Demonstration Project. Accessed at: http://archived.naccho.org/topics/infrastructure/CHAIP/upload/Final-Issue-Prioritization-Resource-Sheet.pdf

SERIOUSNESS

To remove as much subjectivity as possible from the "seriousness" criteria, specific values were enumerated. Morbidity, mortality, and health equity were deemed to be the values that drive seriousness. These designations allowed health equity to be incorporated into all future decisions throughout the process, assuring that vulnerable populations and communities receive the attention they need in order to be healthy. Each criteria is worth one point unless otherwise noted. The rubric is as follows:

Value	Criteria
Morbidity (3pts)	Does the condition reduce an individual's quality of life?
	Does the condition cost more than $300 annually in medical expenses?
	Does the condition cost more than $1000 annually in all related costs?
Mortality (3pts)	Does the condition contribute to early death in Lake County?
	Is it one of the identified top 15 rankable causes of death in Lake County? (1-5 rank = 2pts, 6-15 = 1pt)
Health Equity (3pts)	Is the condition more prevalent in disadvantaged populations?
	Is the morbidity burden greater in disadvantaged populations?
	Are disadvantaged populations more likely to die of this condition?
Comparability (1pt)	Relative to data available for other geographies (state or national), is Lake County better (0 pts), equivalent (0.5 pts), or worse (1 pt)?

SCORING

LCHD/CHC developed a comprehensive list of potential health issues using the results of the four community health needs assessments conducted in 2015. Priorities were assessed through literature review to determine the extent to which each health issue met each of the criteria. From this literature review, subscores for both size and seriousness were determined. The values were combined to calculate a composite score and priorities were ranked based on the following formula, which matches the guidance from the NACCHO document but excludes the effectiveness and feasibility measures:

$$\text{Hanlon Score = Size + (2 x Seriousness)}$$

TOP HEALTH ISSUES IN LAKE COUNTY

After assessing all identified potential priorities, LCHD/CHC identified the top eight health issues with their associated Hanlon Scores.

These health issues were presented as potential priorities for the Live Well Lake County Steering Committee to discuss and vote. At this point in the process, feasibility and the PEARL factors were taken into consideration. Each health issue was discussed in terms of feasibility (capacity, finances, and resources) and effectiveness (success and impact).

Hanlon Score	Top Eight Health Issues
27	Cardiovascular Disease and Hypertension
25	Obesity
23	Depression and Suicide
23	Diabetes
22	Asthma and COPD
22	Tobacco and Lung Cancer
21	Healthy Pregnancies
21	Kidney Disease

In order to assure an inclusive health issue, the Steering Committee selected to change "Depression and Suicide" to "Behavioral Health" to capture substance abuse issues. Using a prioritization matrix method, each Steering Committee member was given four votes to select their four top priorities. The Steering Committee members could only vote for each health issues once.

The Plan

The purpose of the community health improvement plan is to describe how LCHD/CHC and the community will work together to improve the health of our population. The plan is more comprehensive than the roles and responsibilities of LCHD/CHC alone, and the plan's development included participation of a broad set of stakeholders and partners.

The community health improvement plan provides guidance to LCHD/CHC, its partners, and stakeholders for improving the health of the population within LCHD/CHC's jurisdiction. The plan reflects the results of a participatory planning process that includes significant involvement from key sectors. The community is encouraged to use this Community Health Improvement Plan to prioritize existing activities, to set new priorities, and to integrate the CHIP into community organizations' work plans and strategic plans. The plan can also serve as the basis for partnership development and can facilitate collaboration.

The purpose of creating objectives (measurable metrics) is to assess and evaluate the community's efforts. This assures that the implementation of the community health improvement plan is appropriate and effective.

TERMINOLOGY

Term	Definition
Objective	A thing aimed at or sought; measurable
Outcome Objective	The way a thing turns out; a consequence; measurable
Strategic Issue	An important topic or problem; a plan of action or policy designed to achieve a major or overall aim
Impact Objective	A series of actions or steps taken in order to achieve a particular end; measureable
Intervention	An action carefully planned to achieve a specific end

THE PLAN

OUTCOME OBJECTIVES

Objective	Priority	Source
Reduce prevalence of Lake County adults who are obese by 10% from 23% to 21% by 2031	Obesity	Illinois Secretary of State (2014)
Reduce prevalence of Lake County adults who are overweight by 10% from 34% to 31% by 2031	Obesity	Illinois Secretary of State (2014)
Reduce prevalence of Lake County adults who have been diagnosed with diabetes by 10% from 6% to 5% by 2031	Diabetes	LCHD survey (2015)
Reduce the average annual count of emergency room visits due to diabetes by 10% from 1,686 per year to 1,518 per year by 2021	Diabetes	Illinois Hospital Discharge Survey, IDPH (2012-2014)
Reduce prevalence of Lake County adults who have been diagnosed with hypertension by 10% from 35% to 32% by 2031	Hypertension	LCHD survey (2015)
Reduce the average annual count of emergency room visits due to hypertension by 10% from 1,742 per year to 1,568 per year by 2021	Hypertension	Illinois Hospital Discharge Survey, IDPH (2014)
Reduce the percent of youth who report feeling so sad or hopeless almost every day for two weeks or more in a row that stopped them from doing some usual activities by 10% from 28% to 25% by 2021	Behavioral Health	Illinois Youth Survey (2012-2014)
Reduce the average annual count of all emergency room visits due to mental health diagnoses by 10% from 12,453 per year to 11,208 per year by 2021	Behavioral Health	Illinois Hospital Discharge Survey, IDPH (2014)
Reduce the proportion of adults who report having a day or more in the past month where their mental health status prevented them from carrying on usual activities by 10% from 14% to 13% by 2021	Behavioral Health	LCHD survey (2015)

STRATEGIC ISSUES AND IMPACT OBJECTIVES

STRATEGIC ISSUE: IMPROVE POLICIES, SYSTEMS, AND ENVIRONMENTS TO PROMOTE HEALTHY LIFESTYLES

Impact Objectives	Source
Reduce tobacco use among Lake County adults from 14.4% to 12.0% by 2021	Illinois BRFSS (Round 5 2014)
Increase the rate of adults who have completed high school or equivalent in 50% of census tracts that have <80% of adults (25+) who have high school degrees or higher by 5% by 2021	American Community Survey 5-year Average (2010-2014)
Reduce the rate of childhood poverty in 50% of census tracts with >22% childhood poverty rates by 5% by 2021	American Community Survey 5-year Average (2010-2014)
Increase the percent of Lake County municipalities that adopt Health in All Policies (HiAP) initiatives by 2021 (baseline to be developed)	Lake County Survey, (2016)

Potential evidence-based interventions to implement

Evidence-Based Intervention	Type of Intervention	Sectors Involved in Implementation	Sources
Enact Tobacco 21 ordinances	Policy	Government	Institute of Medicine, 2015
Implement tobacco free policies including e-cigarettes	Policy	Schools, Government, Health Care, Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations	Guide to Community Preventive Services, 2012
Provide access to educational/informational resources to promote healthy choices	Campaign, Informational	Schools, Government, Health Care, Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations	County Health Rankings, 2014
Improve access to and use of public transportation	Environment	Government	County Health Rankings, 2016
Incorporate Health Impact Assessments in planning new projects	Environment	Government, Health Care, Businesses, Non-Profit Organizations	National Prevention Council, US Department of Health and Human Services, 2011
Use zoning regulations to attract healthy food vendors and discourage unhealthy competition	Policy, Environment	Government, Businesses	National Prevention Council, US Department of Health and Human Services, 2011
Institute "Health in All Policies" initiatives	Policy	Schools, Government, Health Care, Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations	American Public Health Association, 2013

STRATEGIC ISSUE: INCREASE PHYSICAL ACTIVITY IN ADULTS AND YOUTH

Impact Objectives	Source
Increase the percent of adults who report any leisure time physical activity by 5% from 91% to 96% by 2021	LCHD Survey (2015)
Increase the percent of adults who report 30 minutes of exercise for more than 3 days a week by 10% from 68% to 75% by 2021	LCHD Survey (2015)
Increase the percent of 6th, 8th, 10th, and 12th grade students who report one or more days of physical activity in the past 7 days by 3% from 94% to 97% by 2021	Illinois Youth Survey (2014)
Increase the percent of 6th, 8th, 10th, and 12th grade students who get five or more days of physical activity per week by 10% from 60% to 66% by 2021	Illinois Youth Survey (2014)

Potential evidence-based interventions to implement

Evidence-Based Intervention	Type of Intervention	Sectors Involved in Implementation	Sources
Host community events to promote physical activity	Campaign, Informational	Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations	Institute of Medicine, 2012
Offer low or no-cost physical activity programs	Campaign, Informational	Schools, Government, Health Care, Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations	National Prevention Council, US Department of Health and Human Services, 2011
Implement walking campaigns/competitions	Campaign, Informational	Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations; Government	US Department of Health and Human Services, 2015
Improve infrastructure for walking and biking	Policy, Environment	Government	County Health Rankings, 2015
Improve playground environments to increase utilization	Policy, Environment	Government, Businesses	Institute of Medicine, 2012
Implement physical activity and wellness policies	Policy	Government, Health Care, Schools	Robert Wood Johnson Foundation, 2015
Increase active physical education minutes	Policy	Schools	National Prevention Council, US Department of Health and Human Services, 2011

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STRATEGIC ISSUE: IMPROVE AND PROMOTE NUTRITIONAL OPPORTUNITIES IN THE FOOD ENVIRONMENT

Impact Objectives	Source
Increase the percentage of adults in Lake County who eat five or more servings per day of fruits and vegetables by 10% from 15% to 17% by 2021	LCHD Survey (2015)
Increase the percentage of children in Lake County who eat two or more servings per day of fruits by 10% from 48% to 53% by 2021	Illinois Youth Survey (2014)
Increase the percentage of children in Lake County who eat three or more servings per day of vegetables by 40% from 20% to 28% by 2021	Illinois Youth Survey (2014)
Reduce the food insecurity rate in Lake County from 9.4% to 6.0% by 2021	Feeding America (2013)

Potential evidence-based interventions to implement

Evidence-Based Intervention	Type of Intervention	Sectors Involved in Implementation	Sources
Collaborate with community partners to make employees and dependents aware of local healthy eating resources	Campaign, Informational	Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations, Media	Centers for Disease Control and Prevention, 2013
Provide community information on eating healthy and physical activity	Campaign, Informational	Schools, Government, Health Care, Park Districts, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations, Media	Centers for Disease Control and Prevention, 2011
Develop community gardens in food deserts	Campaign, Informational, Environment	Schools, Businesses, Non-Profit Organizations, Foundations, Faith-Based Organizations,	Centers for Disease Control and Prevention, 2010
Implement nutrition standards for cafeterias and vending machines	Policy	Government, Schools, Businesses	Institute of Medicine, 2012
Increase access to healthy foods in schools	Policy	Schools	National Prevention Council, US Department of Health and Human Services, 2011

STRATEGIC ISSUE: IMPROVE CLINICAL INTERVENTIONS FOR CHRONIC DISEASES

Impact Objectives	Source
Increase the proportion of the diabetic population with an A1c value less than 7% by 2021 (baseline to be developed)	Lake County Healthcare Systems (2016)
Increase the proportion of adults with hypertension whose blood pressure is under control (<140/90) by 2021 (baseline to be developed)	Lake County Healthcare Systems (2016)
Increase the rates of adults over the age of 45 and who are overweight or obese who have been screened for pre-diabetes within the past three years by 2021 (baseline to be developed)	Lake County Healthcare Systems (2016)

Potential evidence-based interventions to implement

Evidence-Based Intervention	Type of Intervention	Sectors Involved in Implementation	Sources
Implement diabetes prevention programming	Clinical	Health Care, Government, Non-Profit Organizations	Centers for Disease Control and Prevention, 2016
Implement diabetes case management programs	Clinical	Health Care, Government, Non-Profit Organizations	Guide to Community Preventive Services, 2015
Increase access to sustainable diabetes self-management education and support services	Clinical	Health Care, Government, Non-Profit Organizations	Centers for Disease Control and Prevention, 2013
Team-based care for improving blood pressure control	Clinical	Health Care, Government	Guide to Community Preventive Services, 2012
Education on self-measured blood pressure monitoring	Clinical	Health Care, Government	Guide to Community Preventive Services, 2015
Implement clinical decision support systems	Clinical	Health Care, Government	Guide to Community Preventive Services, 2013

THE PLAN

STRATEGIC ISSUE: IMPROVE BEHAVIORAL HEALTH CAPACITY AND INFRASTRUCTURE IN LAKE COUNTY

Impact Objectives	Source
Increase the number of clients who utilize telepsychiatry services as unique individuals (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Reduce wait time for psychiatry appointments (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Increase the number of behavioral health clinical settings that integrate checking vital signs into the regular appointment workflow (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Increase the number of unique clients who receive physical health care in a behavioral health setting (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Reduce the proportion of behavioral health clients who have hypertension, diabetes or obesity (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Reduce the proportion of residents who have been diagnosed with any mental health condition and hypertension, diabetes, or obesity (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Increase the proportion of public schools in Lake County with behavioral health partnerships (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Increase the number of students receiving behavioral health services in the school environment (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Reduce school absenteeism (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Reduce number of disruptive behavior incidences in schools (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Reduce the proportion of individuals with mental illness who report that they have experienced discrimination based on their condition (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Increase number of individuals trained in mental health first aid (baseline to be developed)	Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)

Potential evidence-based interventions to implement

Evidence-Based Intervention	Type of Intervention	Sectors Involved in Implementation	Sources
Expand the use of telepsychiatry	Clinical	Health Care, Government, Non-Profit Organizations	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Integrate primary care into behavioral health	Clinical	Health Care, Government, Non-Profit Organizations	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Develop school based behavioral health services to increase access to services for youth	Clinical	Schools, Health Care, Government, Non-Profit Organizations	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)
Design and implement a public awareness campaign	Campaign, Informational	Health Care, Government, Non-Profit Organizations, Media	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016-2021)

Next Steps

As noted above, there are a number of evidence based interventions to tackle the four health priorities in the 2016-2021 CHIP. Six proposed Action Teams may be formed/enhanced:

> ➤ Walking
> ➤ Eat Well
> ➤ Diabetes Prevention
> ➤ Tobacco Prevention and Cessation
> ➤ Behavioral Health Capacity
> ➤ Health Literacy
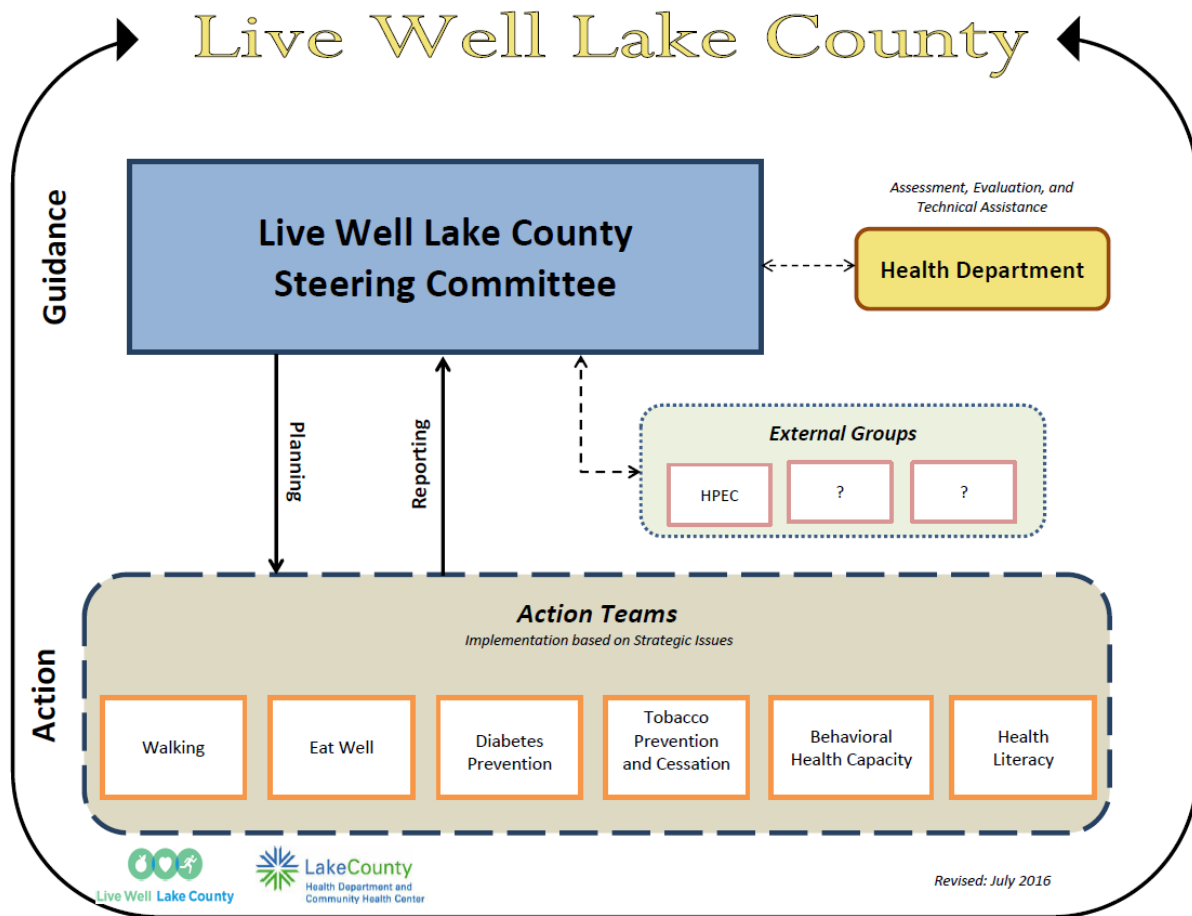
STRUCTURE AND CHARGE

Each Action Team will:

1. Be led by three co-chairs: an LCHD/CHC representative and two community members;
2. Develop and implement work plans containing evidence-based intervention(s) to address the identified health priority;
3. Be guided by the Live Well Lake County Steering Committee;
4. Assure and maintain fidelity to the evidence-based program/model;
5. Commit to continuous quality improvement; and
6. Report progress to the Live Well Lake County Steering Committee on a quarterly basis.

The Live Well Lake County Steering Committee will be engaged with the Action Teams to:

1. Provide, through LCHD/CHC, technical assistance with monitoring progress, evaluation and continuous quality improvement;
2. Identify and recruit organizations and individuals to the Action Teams; and
3. Provide guidance and assistance in work plan development and implementation.

The following diagram depicts the relationship between the Live Well Lake County Steering Committee and the Action Teams. The Steering Committee provides guidance, including planning and support to the Action Teams. LCHD/CHC provides on-going assessment, evaluation, and technical assistance to the Steering Committee. Action Teams report progress, concerns, and barriers to the Steering Committee. External groups will develop as a result of the Steering Committee's knowledge and connectedness.

Live Well Lake County

Guidance

Live Well Lake County Steering Committee

Assessment, Evaluation, and Technical Assistance

Health Department

Planning

Reporting

External Groups

HPEC | ? | ?

Action

Action Teams
Implementation based on Strategic Issues

| Walking | Eat Well | Diabetes Prevention | Tobacco Prevention and Cessation | Behavioral Health Capacity | Health Literacy |

Live Well Lake County

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Health Department and
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Revised: July 2016

Get Involved

Connect and Improve the Health of Lake County

1. Email:
   a. walking@lakecountyil.gov
   b. eatwell@lakecountyil.gov
   c. diabetesprevention@lakecountyil.gov
   d. tobacco@lakecountyil.gov
   e. behavioralhealthcapacity@lakecountyil.gov
   f. healthliteracy@lakecountyil.gov

2. Call or email Arlene Ryndak, Prevention Coordinator, at 847.377.8107 or aryndak@lakecountyil.gov

3. Contact any of the Live Well Lake County Steering Committee members listed below.

4. Go to our website: www.LiveWellLakeCounty.org

5. Request a Presentation

   Learn more about the vitality of the CHIP in person. A member of LCHD/CHC is available to present to organizations or individuals. Simply use one of the contact mechanisms listed above.

6. The Together Summit

The Together Summit is an annual call for "All Hands on Deck" to consider the collective impact we have **together** through the coordination of strategies to help Lake County be one of the healthiest and most resilient counties in our Nation.

Lake County collectively has robust community assets and passionate people who want to make a difference. The burden of unhealthiness and the cost of lives not realizing their full potential affects every service delivered and every product manufactured and sold. It affects the stability and sustainability of every community. That's why we call **together** participants from all sectors of our community to create inclusive, collective impact.

major corporations	private businesses	educators
social services	faith communities	park districts
health and hospital systems	libraries	food services
environmental advocates	philanthropy	health insurance
pharmaceutical	sports and recreation	armed forces
local governments	economic development	law enforcement
workforce development	transportation	planning
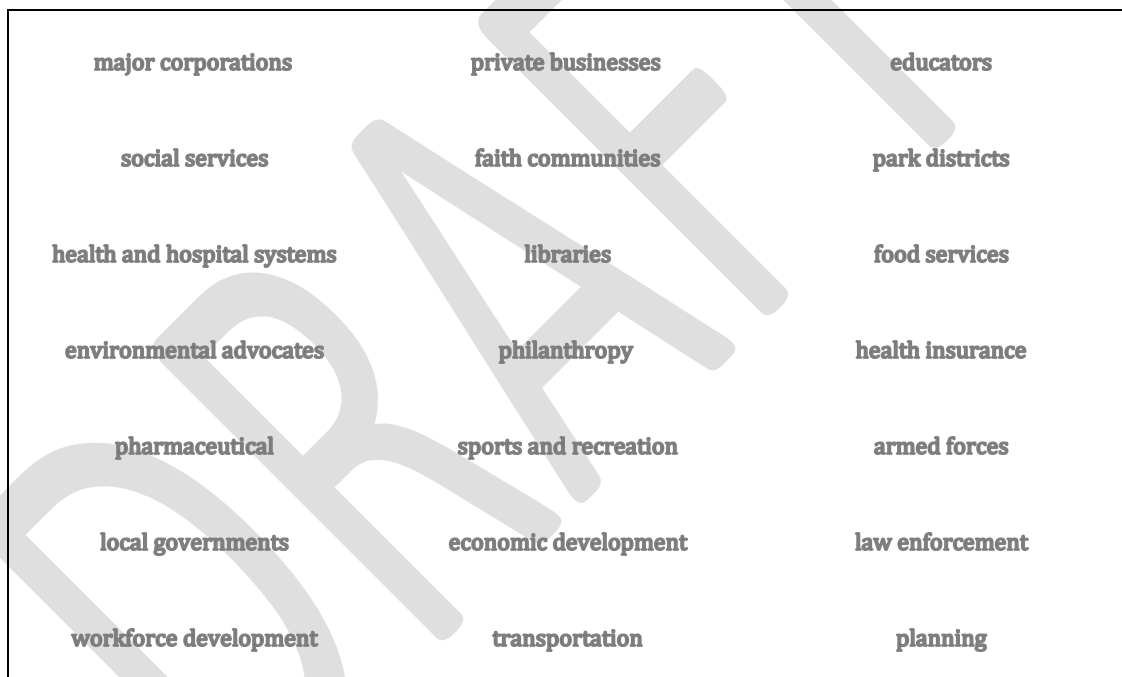
Live Well Lake County Steering Committee

The Live Well Lake County Steering committee is made up of representatives from a variety of community based organizations, government agencies, health care systems, and academic institutions. The purpose of the committee is to guide the community health assessment process, prioritize community issues, and collaborate with one another and with stakeholders outside of the committee to take action and improve the overall health and wellbeing of residents in Lake County.

Ernest Vasseur, Co-chair
Healthcare Foundation of Northern Lake County

Mark Pfister, Co-chair
Lake County Health Department and Community Health Center

Jeanne Ang
Advocate Health Care

Karen Colby
Alt: Holly Manprisio
Northwestern Memorial HealthCare

Mary C. Dominiak
Antioch Area Healthcare Accessibility Alliance

David Fries
Catholic Charities

Paul Geiselhart
Audubon Society

Tiffany Gonzalez
Lake County Housing Authority

Bruce Johnson
Nicasa

Ann Maine
Alt: Nan Buckardt
Lake County Forest Preserves

Megan McKenna Mejia
Mano a Mano Family Resource Center

Maggie Morales
The Lake County Community Foundation

David Reid
Lovell Federal Healthcare Center/ NAVSTA Great Lakes

Cheri Richardson
The Alliance for Human Services

Pastor Wade Stevenson
North Shore Baptist Ministers' Alliance

Tameka Wilson
YouthBuild Lake County

Sophie Twichell
National Recreation Foundation

Dr. K. Michael Welch
Alt: Naomi Parrella, M.D.
Rosalind Franklin University of Medicine and Science

Roycealee J. Wood
Alt: Gary Pickens
Lake County Regional Office of Education

APPENDIX

Appendix

EVIDENCE BASED INTERVENTION CITATIONS

Strategic Issue	Evidence-Based Intervention	Sources
Policies, Systems, and Environments	Enact Tobacco 21 ordinances	Institute of Medicine of the National Academies (2015). Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products. Retrieved from: http://www.nationalacademies.org/hmd/Reports/2015/TobaccoMinimumAgeReport.aspx
Policies, Systems, and Environments	Implement tobacco free policies including e-cigarettes	Guide to Community Preventive Services (2012). Reducing Tobacco Use and Secondhand Smoke Exposure: Smoke-Free Policies. Retrieved from: http://www.thecommunityguide.org/tobacco/smokefreepolicies.html
Policies, Systems, and Environments	Provide access to educational/informational resources to promote healthy choices	County Health Rankings (2014). Worksite obesity prevention interventions. Retrieved from: http://www.countyhealthrankings.org/policies/worksite-obesity-prevention-interventions.
Policies, Systems, and Environments	Improve access to and use of public transportation	County Health Rankings (2016). Public Transportation Systems. Retrieved from: http://www.countyhealthrankings.org/policies/public-transportation-systems.
Policies, Systems, and Environments	Incorporate Health Impact Assessments in planning new projects	National Prevention Council, US Department of Health and Human Services (2011). National Prevention Strategy. Retrieved from: http://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf.
Policies, Systems, and Environments	Use zoning regulations to attract healthy food vendors and discourage unhealthy competition	National Prevention Council, US Department of Health and Human Services (2011). National Prevention Strategy. Retrieved from: http://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf.
Policies, Systems, and Environments	Institute "Health in All Policies" initiatives	American Public Health Association (2013). Health In All Policies. Retrieved from: https://www.apha.org/~/media/files/pdf/factsheets/health_inall_policies_guide_169pages.ashx.
Physical Activity	Host community events to promote physical activity	Institute of Medicine (2012). Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation. Retrieved from: http://www.nap.edu/read/13275
Physical Activity	Offer low or no-cost physical activity programs	National Prevention Council, US Department of Health and Human Services (2011). National Prevention Strategy. Retrieved from: http://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf.
Physical Activity	Implement walking campaigns/competitions	US Department of Health and Human Services, (2015). Step It Up! The Surgeon General's Call to Action to Promote Walking and Walkable Communities. Retrieved from: http://www.surgeongeneral.gov/library/calls/walking-and-walkable-communities/exec-summary.html.
Physical Activity	Improve infrastructure for walking and biking	County Health Rankings (2015). Streetscape Design. Retrieved from: http://www.countyhealthrankings.org/policies/streetscape-design.
Physical Activity	Improve playground environments to increase utilization	Institute of Medicine (2012). Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation. Retrieved from: http://www.nap.edu/read/13275

Strategic Issue	Evidence-Based Intervention	Sources
Physical Activity	Implement physical activity and wellness policies	Robert Wood Johnson Foundation (2015). The State of Obesity: Better Policies for a Healthier America. Retrieved from: http://healthyamericans.org/assets/files/TFAH-2015-ObesityReport-final.22.pdf
Physical Activity	Increase active physical education minutes	National Prevention Council, US Department of Health and Human Services (2011). National Prevention Strategy. Retrieved from: http://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf.
Nutrition	Improve eating behaviors	Smarter Lunchrooms Movement http://smarterlunchrooms.org
Nutrition	Collaborate with community partners to make employees and dependents aware of local healthy eating resources	Centers for Disease Control and Prevention (2013). National Healthy Worksite Program: Community Partnerships Issue Brief Number 3. Retrieved from: https://www.cdc.gov/workplacehealthpromotion/tools-resources/pdfs/issue_brief_no_3_community_partnerships_3_6_13_final_508.pdf
Nutrition	Provide community information on eating healthy and physical activity	Centers for Disease Control and Prevention (2011). Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase Physical Activity in the Community. Retrieved from: http://www.cdc.gov/obesity/downloads/PA_2011_WEB.pdf
Nutrition	Develop community gardens in food deserts	Centers for Disease Control and Prevention (2010). Healthy Places: Community Gardens. Retrieved from: https://www.cdc.gov/healthyplaces/healthtopics/healthyfood/community.htm,
Nutrition	Implement nutrition standards for cafeterias and vending machines	Institute of Medicine (2012). Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation. Retrieved from: http://www.nap.edu/read/13275
Nutrition	Increase access to healthy foods in schools	National Prevention Council, US Department of Health and Human Services (2011). National Prevention Strategy. Retrieved from: http://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf.
Clinical Care	Implement diabetes prevention programming	Centers for Disease Control and Prevention (2016). National Diabetes Prevention Program. Retrieved from: http://www.cdc.gov/diabetes/prevention/about/index.html.
Clinical Care	Implement diabetes case management programs	Guide to Community Preventive Services (2015). Diabetes Prevention and Control: Case Management Interventions to Improve Glycemic Control. Retrieved from: http://www.thecommunityguide.org/diabetes/casemgmt.html.
Clinical Care	Increase access to sustainable diabetes self-management education and support services	Centers for Disease Control and Prevention (2013). Effective Public Health Strategies to Prevent and Control Diabetes. Retrieved from: http://www.cdc.gov/diabetes/pubs/pdf/PublicHealthCompedium.pdf.
Clinical Care	Team-based care for improving blood pressure control	Guide to Community Preventive Services (2012). Cardiovascular Disease Prevention and Control: Team-Based Care to Improve Blood Pressure Control. Retrieved from: http://www.thecommunityguide.org/cvd/teambasedcare.html

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Strategic Issue	Evidence-Based Intervention	Sources
Clinical Care	Education on self-measured blood pressure monitoring	Guide to Community Preventive Services (2015). Cardiovascular Disease Prevention and Control: Self-Measured Blood Pressure Monitoring Interventions for Improved Blood Pressure Control - When Used Alone. Retrieved from: http://www.thecommunityguide.org/cvd/SMBP-alone.html
Clinical Care	Implement clinical decision support systems	Guide to Community Preventive Services (2013). Cardiovascular Disease Prevention and Control: Clinical Decision-Support Systems (CDSS). Retrieved from: http://www.thecommunityguide.org/cvd/CDSS.html
Behavioral Health Capacity	Expand the use of telepsychiatry	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016 – 2021).
Behavioral Health Capacity	Integrate primary care into behavioral health	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016 – 2021).
Behavioral Health Capacity	Develop school based behavioral health services to increase access to services for youth	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016 – 2021).
Behavioral Health Capacity	Design and implement a public awareness campaign	Derived from Community Action Plan for Behavioral Health in Lake County, Illinois (2016 – 2021).