

# Strategic Plan and Community Health Improvement Plan Status Update

December 2, 2015

# Strategic Plan Status Update

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Healthy  
people,  
communities,  
and  
environments  
in Ramsey  
County



SAINT PAUL – RAMSEY COUNTY PUBLIC HEALTH

# Strategic Plan

2014 - 2018

## Strategic Planning Process

The SPRCPH strategic planning process featured four distinct phases: 1) Groundwork and Visioning, 2) Data Gathering and Review, 3) Goals and Objectives Development, and 4) Plan Monitoring and Performance. The graphic below explains the four phases.

### STRATEGIC PLANNING DEVELOPMENT PHASES

Groundwork and Visioning	Data Gathering and Review	Goals and Objectives Development	Plan Monitoring and Performance
Planning purpose, process & products	Data drivers	SOAR process	Strategy design
Roles & expectations	Employee survey	Strategic priorities	Tracking progress
Internal communications	Policymaker surveys & facilitated discussions	Goals	Communicating progress
Vision	Stakeholder interviews	Objectives	Annual review & update
Mission			QI connections
Values			CHIP connections

COMMUNICATION

## Strategic Plan

Goal 1:  
Advance health equity – the attainment of the highest level of health possible – for people of all ages and backgrounds in Ramsey County.

Goal 2:  
Improve the health and safety of people of all ages and backgrounds and the environment in Ramsey County.

Goal 3:  
Promote adaptive approaches to public health impacts of a changing climate.

Goal 4:  
Demonstrate strong leadership by identifying, articulating and addressing Ramsey County's public health priorities.

Goal 5:  
Strengthen the department's infrastructure to support a culture of excellence.

# Goal 1

**Advance health equity – the attainment of the highest level of health possible – for people of all ages and backgrounds in Ramsey County.**

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## Goal 1 - Objective 1:

Increase knowledge by at least 10% above baseline for all department staff of health inequities, the effects on the public's health, and relevance to their job roles and responsibilities, by July 1, 2016.



## **Baseline Survey**

- **Survey topics: health equity, climate change, adverse childhood experiences (ACEs) and violence.**
  - **Completed by 230 of the 357 staff (64%) by September 2015**
  - **Post-baseline survey on Health Equity will be administered in the summer of 2016.**
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## Saint Paul - Ramsey County Public Health Strategic Plan Combined Baseline Knowledge Survey



**Goal 1 of the Strategic Plan is to "advance health equity - the attainment of the highest level of health possible - for people of all ages and backgrounds in Ramsey County".**

Which of the following are social determinants of health? (Choose all that apply)

Definition: Social determinants of health are living and working conditions that influence individual and population health.

- ☐ The zip code in which you live
- ☐ Race and/or ethnicity
- ☐ Gender
- ☐ Occupation
- ☐ Education
- ☐ Income
- ☐ Sexual orientation

What is the SPRCPH definition of health equity? (Choose only one)

- ☐ Health Equity means attaining the highest level of health possible for all people in Ramsey County
- ☐ Health Equity means that everybody gets the same health insurance
- ☐ Health Equity means treating everyone the same
- ☐ Health Equity means not everyone has access to the same things

Which of the following is the best single measure of the health of a population, group or community? (Choose only one)

- ☐ Obesity
- ☐ Asthma
- ☐ Infant mortality
- ☐ Child protection referrals

Between 2006 and 2010, which racial group of women was five times more likely to receive late/no prenatal care compared to White women? (Choose only one)

- ☐ American Indian
- ☐ African American
- ☐ Hispanic
- ☐ Asian

African Americans across all income levels experience poorer health outcomes.

- ☐ True
- ☐ False



Which of these are examples of health disparities in Ramsey County? (Choose all that apply)

- ☐ White children have higher rates of asthma than Black children
- ☐ No or late-trimester prenatal care is higher among populations of color and American Indians compared to White women
- ☐ Black/African American infants are more likely to die before their first birthday than white infants
- ☐ Hmong and African American mothers participating in WIC have lower breast-feeding rates than other WIC mothers
- ☐ White youth reported more than other groups that alcohol use by a relative repeatedly caused family, health, job or legal problems
- ☐ Hispanic adults have higher rates of obesity than White adults

How do health disparities effect health equity? (Choose only one)

- ☐ Health disparities have nothing to do with the overall health of an individual
- ☐ People who experience health disparities don't try hard enough to overcome obstacles
- ☐ People who live in neighborhoods where there are few/no walking paths, street lights, parks or playgrounds suffer poorer health outcomes
- ☐ Health disparities are caused solely by forces that public health staff cannot control

## **Training, Education and Discussion Opportunities**

- **Pillsbury House Theater performed “Breaking Ice” at the October 21, 2015 all-staff meeting about race and health equity.**
  - **Discussions at team/staff meetings.**
  - **Health Equity Toolkit developed. The Toolkit includes sample guides for discussion, articles, activities, reports, and resources.**
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## Health Equity Toolkit

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### What is the Health Equity Toolkit?

A collection of resources made up of activities, articles, data, reports, websites, and video clips about bias, health disparities, health equity, housing, poverty, race, racism, and white privilege. The purpose of the toolkit is to expand all department staff knowledge around health equity and inequities, the effects health disparities have on the public's health and the relevance to staff job roles and responsibilities. The Health Equity Toolkit will help department staff expand understanding around applying a health equity lens when writing policy, hiring new staff, working with others, including the community and accomplishing day to day public health work.

It is recommended you begin with the “Are You New to Health Equity?” category. For more information about the Health Equity Toolkit or if you would like help facilitating a conversation/toolkit activity, please contact [Kathy Hedin](#) or 651-266-2461.

### Documents

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<input type="checkbox"/> Name	Modified	<input type="checkbox"/> Modified By	<input type="checkbox"/> Checked Out To
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#### **Category : Are You New to Health Equity?** (13)

0 Toolkit Recommendations	10/20/2015 9:09 AM	Hedin, Kathy
1 Definitions for Common Equity Terms	10/13/2015 3:55 PM	Hedin, Kathy
2 PowerPoint Health Equity Overview	10/20/2015 10:38 AM	Hedin, Kathy
3 Sample Guide 1	10/20/2015 10:39 AM	Hedin, Kathy

 **Category : Bias (2)**

<input type="checkbox"/> Activity Implicit Bias Activities	10/13/2015 3:57 PM	Hedin, Kathy
Activity MTVs Look Different	9/23/2015 8:17 AM	Hedin, Kathy

 **Category : Data and Reports (16)**

Policy Link Equity Atlas	10/6/2015 9:41 PM	Hedin, Kathy
Presentation Using data to advance health equity Minnesota Department of Health	10/1/2015 1:29 PM	Allen, Gina
Report Building-the-Case-for-Racial-Equity-in-the- Food-System Health Equity	9/23/2015 9:00 AM	Hedin, Kathy
Report Dane County Wisconsin Racial Equity Analysis and Recommendations	9/23/2015 9:01 AM	Hedin, Kathy
Report Health and Social Inequity in Santa Clara County	10/1/2015 2:23 PM	Allen, Gina
Report Health Inequities in Minnesota Wilder Foundation and BCBS	9/23/2015 9:02 AM	Hedin, Kathy
Report King County Equity Report 2013	9/23/2015 8:23 AM	Hedin, Kathy
Report Let's Talk About Race How Racially Explicit Messaging Can Advance Equity	10/8/2015 2:19 PM	Allen, Gina
Report MDH's White Paper on Income and Health	10/1/2015 2:19 PM	Allen, Gina
Report MDH's White Paper on Paid Leave and Health	10/1/2015 2:18 PM	Allen, Gina
Report Met Council Park Use Among Communities of Color	9/23/2015 8:23 AM	Hedin, Kathy
Report Michigan's Health Equity Status Report Focus on Maternal and Child Health	10/1/2015 2:20 PM	Allen, Gina
Report MN Community Measurement 2014 Communities of Care Report Somali, Hispanic, Asian, American Indian Data	9/23/2015 9:09 AM	Hedin, Kathy



## Goal 1 - Objective 2:

Create and implement an organizational framework within the department to ensure a focused approach to health equity, by December 31, 2015.

- **Connect workforce development, quality improvement, health in all policies, social determinants of health, and economic prosperity into a framework for health equity.**
- **Pieces of the framework developed for the Health Equity Toolkit.**
- **Health Equity Overview being developed by the Health Equity Team.**

### Goal 1 - Objective 3:

Identify one health disparity with a concentrated department-wide focus every two years beginning December 31, 2014.

- **The Health Equity (HE) Team proposed the department-wide focus of physical activity, approved by the Department Leadership Team in December 2014.**
- **A kick-off activity set in motion for 2015 did not materialize.**
- **HE Team will coordinate next efforts with the leaders of Goal 2, Objective 4 intending to continue this work in January 2016.**

## Goal 1 - Objective 4:

Establish annually a clear policy and advocacy agenda for the department to advance health equity and address structural racism, beginning July 30, 2014.





## Goal 1 - Objective 5:

Identify and implement up to three department strategies that promote economic prosperity in Ramsey County, by December 31, 2015.

**In November 2015, the Health Equity team began assessing current health equity work which connects to economic prosperity.**

# Goal 2

**Improve the health and safety  
of people of all ages and  
backgrounds and the  
environment in Ramsey  
County.**

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## Goal 2 - Objective 1:

Increase knowledge by at least 10% above baseline for department staff of the current research related to (1) adverse childhood experiences and (2) violence, including the effects on the public's health and relevance to their job roles and responsibilities, by December 31, 2017.

- **Training modules on violence and ACEs will be developed in 2016.**
- **Training will be planned for the all-staff meeting in October 2016, with follow-up training at division/ staff meetings.**
- **Follow-up staff survey to be administered the first quarter of 2017.**



## Saint Paul - Ramsey County Public Health Strategic Plan Combined Baseline Survey



**Goal 2 of Strategic Plan is to improve the health and safety of people of all ages and backgrounds and the environment in Ramsey County.**

The rate of assault injuries among 20-24 year olds in Ramsey County doubled between 2000 and 2011

- ☐ True ☐ False

Ramsey County has higher rates of assault injuries among teens and young adults than other metro counties and the state

- ☐ True ☐ False

According to the CDC National Center for Injury Prevention and Control, more than \_\_\_\_ per cent of women and men in the United States have experienced rape, physical violence and/or stalking by an intimate partner in their lifetime? (Select one for women and one for men.)

Women? (Choose only one)

- ☐ 24% ☐ 36% ☐ 52%

Men? (Choose only one)

- ☐ 15% ☐ 29% ☐ 35%

According to the CDC, intimate partner violence resulted in 2,340 deaths in 2007 in the US - accounting for 14% of all homicides. Of these deaths what percentage were (select one for women and one for men).

Women? (Choose only one)

- ☐ 50% ☐ 70% ☐ 90%

Men? (Choose only one)

- ☐ 10% ☐ 30% ☐ 50%



### Adverse Childhood Experiences Study (ACES)

Adverse Childhood Experiences Study (ACES) provides a score for people based on their childhood experiences of abuse, neglect and family dysfunction. ACES establishes a correlation between childhood maltreatment and later-life health and well-being.

The people included in the original ACE study were largely poor, unemployed and from minority and immigrant communities.

- ☐ True ☐ False

Over half of Minnesotans experiencing ACES had more than two ACES.

- ☐ True ☐ False

Minnesotans with more ACES were more likely to: (Choose all that apply)

- |   |  |
|---|--|
| <input type="radio"/> have rated their health as fair or poor       | <input type="radio"/> have been diagnosed with depression or anxiety |
| <input type="radio"/> have reported smoking and/or chronic drinking | <input type="radio"/> have been diagnosed with asthma                |
| <input type="radio"/> be obese                                      |  |

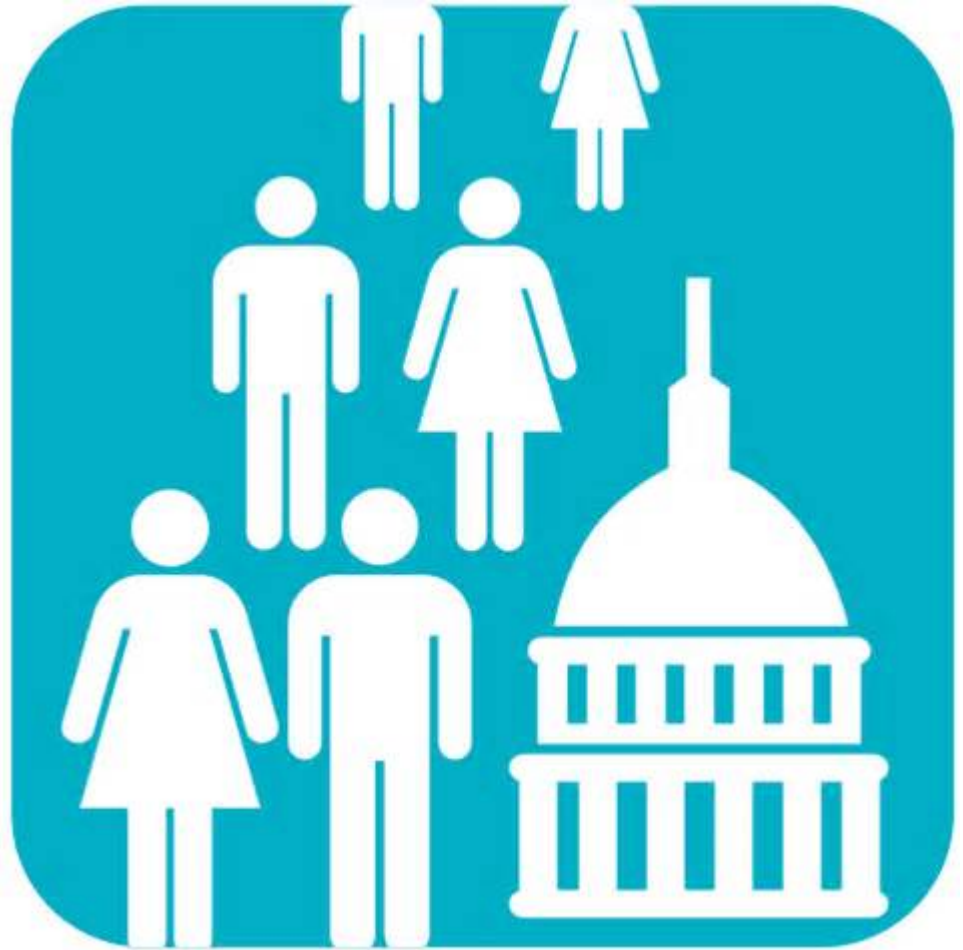
## Goal 2 - Objective 2:

Create and implement at least one joint strategy to improve evidence-based clinical preventive services with each Ramsey County – funded community clinic, by December 31, 2017.

- **Strategy: Build community clinic capacity to improve chronic disease prevention interventions.**
- **Work initiated with community clinics (Open Cities Health Center, La Clinica and Community Dental Care) to review current practice guidelines and identify best practices.**
- **Hmong Health Care Professionals Coalition initiated work to develop new guidelines. Medical experts assisting with guideline development.**

## Goal 2 – Objective 3:

Advocate for at least three public policy initiatives designed to improve health outcomes for residents in Ramsey County, on an annual basis beginning July 30, 2014.



- **Promoted legislative support and funding for: chronic disease prevention (SHIP); public health nurse home visiting, and family planning and STI prevention and treatment in 2014.**
  - **2016 legislative platform includes: support for statewide funding increase of the Local Public Health Grant, increasing MA reimbursement of public health home visiting, establishing a Medical Assistance benefit for asthma care for children and youth up to age 21, and support for permanent funding for SHIP grants.**
  - **Federal legislative platform items will be submitted January 2016.**
-



## Goal 2 – Objective 4:

Identify and implement at least one department-wide strategy to address one targeted health issue of concern, by December 31, 2016.

**Will coordinate efforts with Goal 1, Objective 3 to assist with the planning and implementation of a strategy around physical activity in January 2016.**

# Goal 3

**Promote adaptive approaches  
to public health impacts of a  
changing climate.**

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## Goal 3 – Objective 1:

Increase knowledge by at least 10% above baseline for department staff of how the climate is changing, the effects on the public's health, and their job roles and responsibilities in promoting adaptations to climate change, by December 15, 2015.



- **Baseline survey completed.**
  - **Three hour staff training on climate change and its consequences conducted at all-staff meeting on October 21, 2015.**
  - **Post-baseline survey administered to staff attending, with 218 surveys completed. Analysis of pre- and post-baseline survey results is currently underway.**
-



**Goal 3 of the Strategic Plan is to promote adaptive approaches to public health impacts of a changing climate.**

The terms "climate" and "weather" mean the same thing

☐ True ☐ False

**How much do you agree with the following statements?**

Response Definition: SD=Strongly Disagree D=Somewhat Disagree N=Neutral/Don't know A=Somewhat Agree SA=Strongly Agree	SD	D	N	A	SA
"Climate change" - the idea that the world's average temperature has been increasing over the past 150 years, may increase more in the future and that the world's climate may change as a result - is happening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ramsey County has experienced the impacts of climate change in the past 20 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a result of climate change, it is likely that Ramsey County will experience at least one serious public health problem in the next 20 years.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The public health impacts of climate change are likely to affect some Ramsey County residents more than others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**Please answer the following questions.**

1. Minnesota's average temperature has increased almost 2 degrees since temperature record keeping began in the late 1800s

- ☐ True ☐ False

Chronic health conditions such as asthma and cardiovascular diseases can be made worse by consequences associated with climate change.

- ☐ True ☐ False

The impacts of climate change are the same across all regions of the U.S.

- ☐ True ☐ False

Which of the following events in Minnesota have been attributed at least in part to climate change? (Choose all that apply)

- ☐ Snowstorms in July ☐ Heavier, more intense rainstorms ☐ Increased number of ice storms  
☐ Decreased number of heat waves ☐ Longer growing season



Which of the following public health issues are likely to be made worse by climate change?

Response Definition: Y=Yes N=No NS=Not sure	Y	N	NS
Foodborne diseases (e.g., E-coli, Salmonellosis)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anxiety, depression or other mental health conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Waterborne diseases (e.g., Giardiasis, Cryptosporidiosis etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Extreme weather events (e.g., tornadoes, floods, droughts)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heat waves and heat-related illnesses/death	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respiratory conditions (e.g. asthma)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vector-borne diseases (e.g., West Nile virus, Lyme disease etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Water supply and quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Forest fires or brush fires	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outdoor air pollution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disruptions of health care services due to climate-related events, such as floods and power outages	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food supply and safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Housing needs for residents displaced by extreme weather	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of health care services for refugees displaced by climate change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you think SPRCPH has a role in providing education to our clients/the community about the impact of :

Response Definition: Y=Yes N=No NS=Not sure	Y	N	NS
Climate Adaptation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Goal 3 – Objective 2:

Complete a vulnerability and risk assessment of the public health impacts associated with climate change, every two years beginning June 30, 2015.



- **Create a “state of the county” document related to climate change and public health impacts in Ramsey County as a precursor to the vulnerability assessment.**
  - **“Climate Change and Strategic Planning in Ramsey County” created and presented to the Community Health Services Advisory Committee in September 2014.**
  - **Vulnerability assessment, including GIS mapping, being prepared and targeted for completion 12/30/15. Anticipate presenting to the Ramsey County Board of Commissioners at a Board Workshop in March/April 2016, then shared with staff and the community.**
-

### Goal 3 – Objective 3:

Develop up to three department-specific priority climate change adaptation actions, including actions to improve department capacity to assess and build resilience to climate change risks, by December 31, 2015.

- **Anticipate identifying of up to three department-specific priority climate change adaptation actions by 12/30/15.**
- **Follow-up with Divisions to develop Climate Adaptation Plan targeted for March 2016.**

# Goal 4

**Demonstrate strong leadership  
by identifying, articulating and  
addressing Ramsey County's  
public health priorities.**

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## Goal 4 – Objective 1:

Develop an internal framework that supports a timely response to current and emerging public health and policy issues, by December 31, 2014.

- **Staff identified to be key contacts and subject matter experts (SMEs).**
- **Internal framework drafted, awaiting modification.**

## Goal 4 – Objective 2:

Create and communicate an annual public policy agenda that reflects a “health in all policies” commitment, beginning December 31, 2015.

- **2016 legislative platform includes: support for statewide funding increase of the Local Public Health Grant, increasing MA reimbursement of public health home visiting, establishing a Medical Assistance benefit for asthma care for children and youth up to age 21, and support for permanent funding for SHIP grants.**
- **Health in All Policies is a work in progress.**

## Goal 4 – Objective 3:

Convene community members to address at least one priority public health issue facing Ramsey County residents, on an annual basis beginning December 31, 2014.

- **Community members brought together to address several priority public health issues through the Community Health Improvement Plan (CHIP) Action Teams.**
- **Department staff facilitating the Access Action Team.**
- **The CHSAC is currently serving as the Action Team associated with the Nutrition/Weight/Active Living and Social Determinates of Health goal areas.**

## Goal 4 – Objective 4:

Create and implement a communication plan promoting departmental goals and priorities, and the value of public health in people's lives, by October 31, 2015.



- **Communication Plan designed to align with the department's Strategic Plan and refine coordination of department-wide communications.**
  - **Approved by the Department Leadership Team on October 14, 2015.**
  - **Notice of the Communication Plan posted in the November 25, 2015 department internal e-newsletter, and is posted on department's internal SharePoint site.**
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# Goal 5

**Strengthen the department's  
infrastructure to support a  
culture of excellence.**

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## Goal 5 – Objective 1:

Achieve and maintain national accreditation through the Public Health Accreditation Board (PHAB) that drives the continuous improvement of department programs and services, by June 30, 2015.



*Advancing  
public health  
performance*

- **Accreditation site visit held November 16 and 17, 2015.**
  - **PHAB Board will meet March 8, 2016 to consider SPRCPH status, and determine if the Department meets accreditation requirements, or if an Action Plan is required.**
  - **Action Plan submission April 2016.**
  - **Information that demonstrates compliance with the Action Plan will be submitted to PHAB for review May 2016, for PHAB Board determination in June 2016.**
-

## Goal 5 – Objective 2:

Create and implement a comprehensive workforce development plan that addresses training needs of the staff and the development of core public health competencies, by October 1, 2015.



- **Workforce Development Plan created and approved by Department Leadership Team March 2015. Key components are:**
    - **Core Competencies for Public Health**
    - **Strategic Plan related training**
    - **Follow-up to Organizational Self-Assessment**
    - **Specific Training from Strategic Plan Process**
    - **Required all-staff trainings**
-

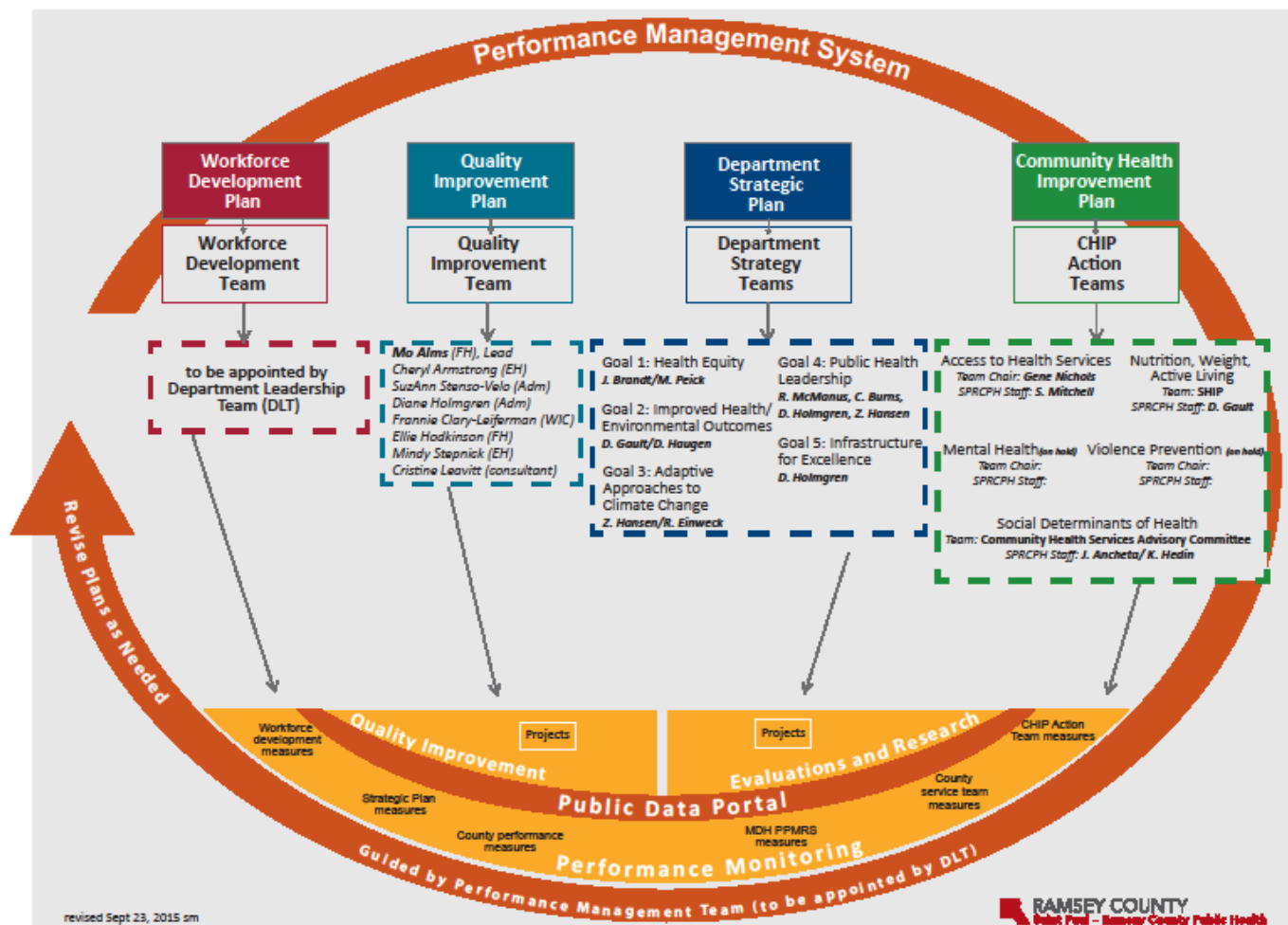
- **Workforce Development Team, representative of division staff, will be meeting in December 2015.**
  - **Create Plain Language orientation for new employees. Materials about Plain Language to be included in new employee orientation, and to make accessible to all existing staff, are in the process of being identified.**
  - **Plain Language education provided to current staff involved in development of materials and written information December 2014; additional training for health educators and communicators at a county-organized training April 30, 2015.**
-

### Goal 5 – Objective 3:

Create and implement a Performance Management System that enhances the effectiveness, efficiency and quality of programs and services, by December 15, 2014.

- **Performance Management System Policy adopted December 2014.**
- **Performance Mgmt System components:**
  - Strategic Plan
  - Community Health Improvement Plan
  - Quality Improvement Plan
  - Workforce Development Plan
  - Performance/Outcome Measures
  - Grant reporting
  - Reporting to the MN Dept of Health
  - Others

### Saint Paul-Ramsey County Public Health Performance Improvement



# Community Health Improvement Plan Status Update

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December 2, 2015

## Community Health Improvement Goals

Aligned with the vision, the CHIPC created the following five priority goals, with supporting objectives and preliminary strategies, to help transform the health of the community.

### Social Determinants of Health

Create social and physical environments that promote equity and good health for all people in Ramsey County.

### Nutrition, Weight and Active Living

Promote proper nutrition and healthy body weight for all people in Ramsey County.

### Access to Health Services

Ramsey County residents will access the appropriate level of health care services at the appropriate time.

### Mental Health/Mental Disorders/Behavioral Health

Improve mental health/mental disorders/behavioral health through prevention and by ensuring access to appropriate, quality mental health/mental disorders/behavioral health services for all people in Ramsey County.

### Violence Prevention

Prevent violence and intentional injuries, and reduce their consequences for all people in Ramsey County.

# Goal 1

**Create social and physical  
environments that promote  
equity and good health for all  
people in Ramsey County**

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## Goal 1 – Objective 1:

Reduce the percentage of the population living in poverty in Ramsey County from 17 percent to 10 percent by December 2018.

- Minnesota policymakers increased [the state's minimum wage effective August 2014.](#)

## Goal 1 – Objective 3:

Reduce the percentage of households paying 30 percent or more of income for monthly housing in Ramsey County from 38 percent to 28 percent by December 2018.

- The walking tour of the Rondo Neighborhood highlighted the affordable housing work of the [Aurora-St. Anthony Neighborhood Development Corporation](#)



## Goal 1 – Objective 5:

Increase safe, accessible, efficient, affordable transportation options (transit, walking, biking) in Ramsey County by 20 percent by December 2018.

- Conduct audit of existing, active transportation (walking, biking and transit) and make recommendations for a safe, accessible and efficient multimodal system

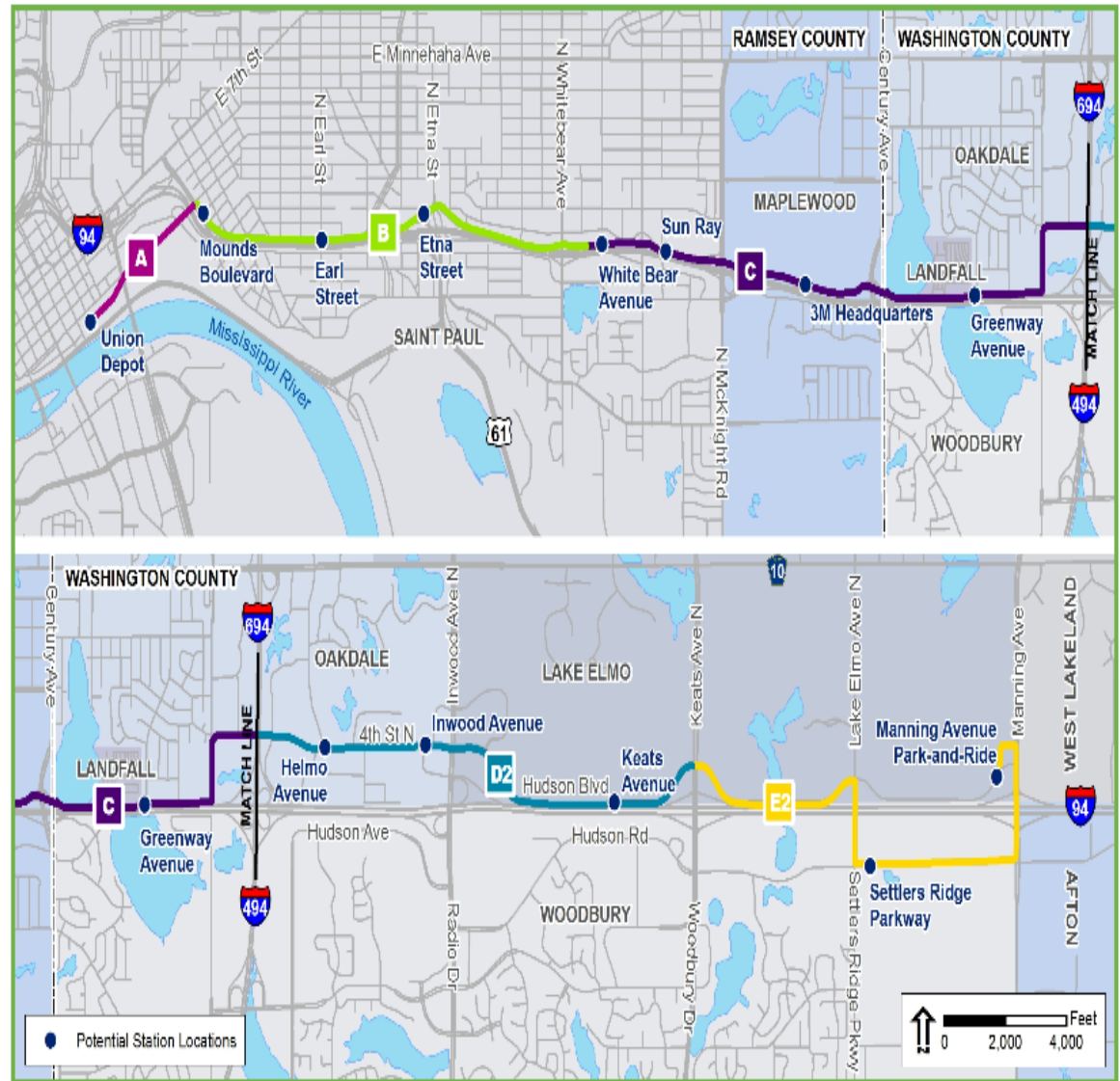


## Examples:

- \$150,000 of SHIP funding to Ramsey County Parks and Recreation Department
  - Board workshop December 2015 to review findings
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# Gateway Corridor Health Impact Assessment

- Ramsey-Washington Counties Joint Effort
- CHSAC took survey
- Heard Survey Results
- Presented information at the African American Leadership Forum



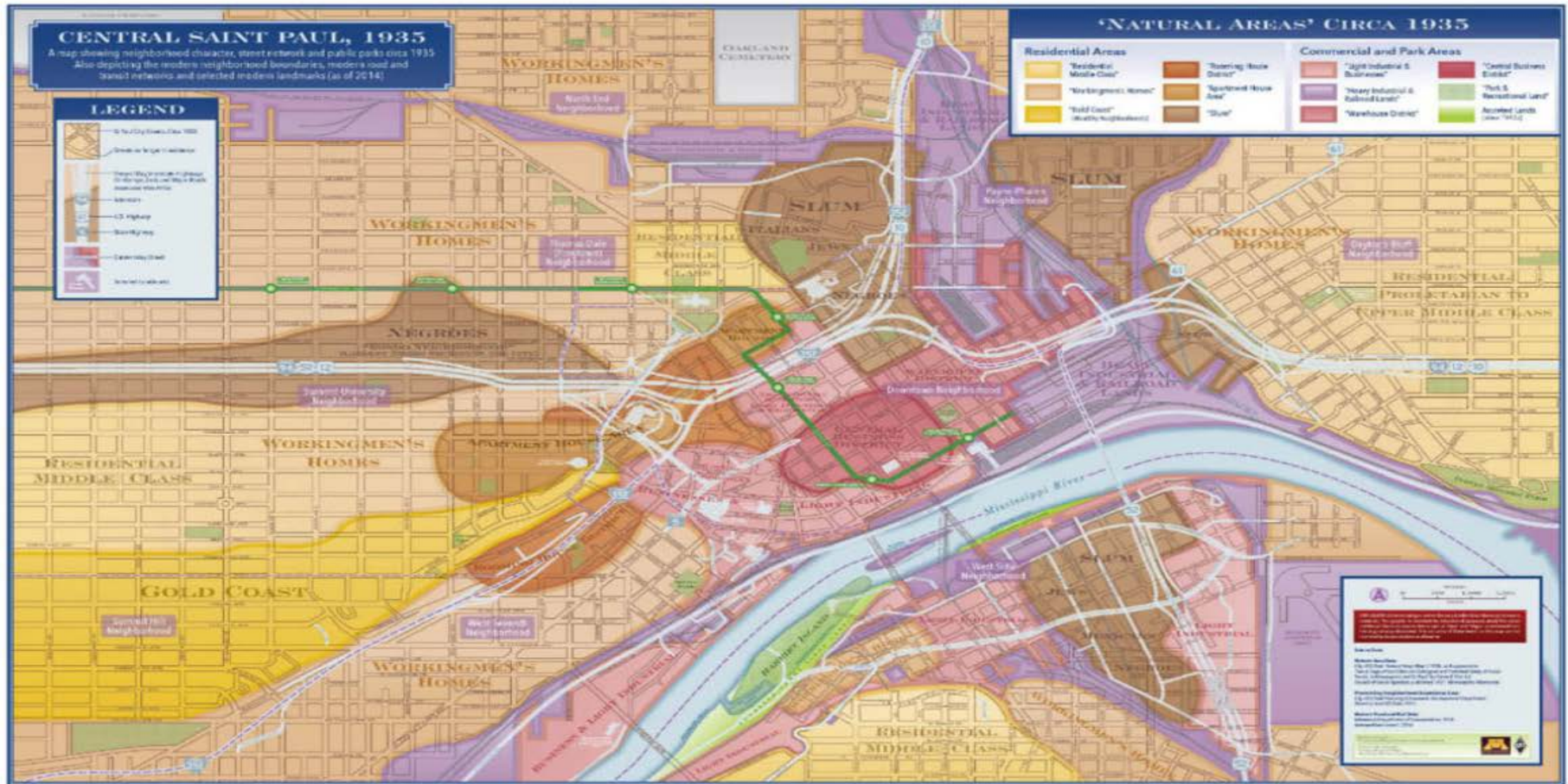
## Learning Together

- ✓ Video of Jeff and Chad to show how social and economic background of their parents impacted their well-being.
- ✓ Ms. Vanne Owens Hayes shared her experience growing up in Rondo neighborhood prior to the construction of I-94.
- ✓ Health Impact Assessment of the Gateway Corridor
- ✓ Walking Tour of Rondo Neighborhood with Nieeta Presley and Noel Nix (see above)
- ✓ Received an overview of the Equity Scorecard.



## Social Determinants of Health

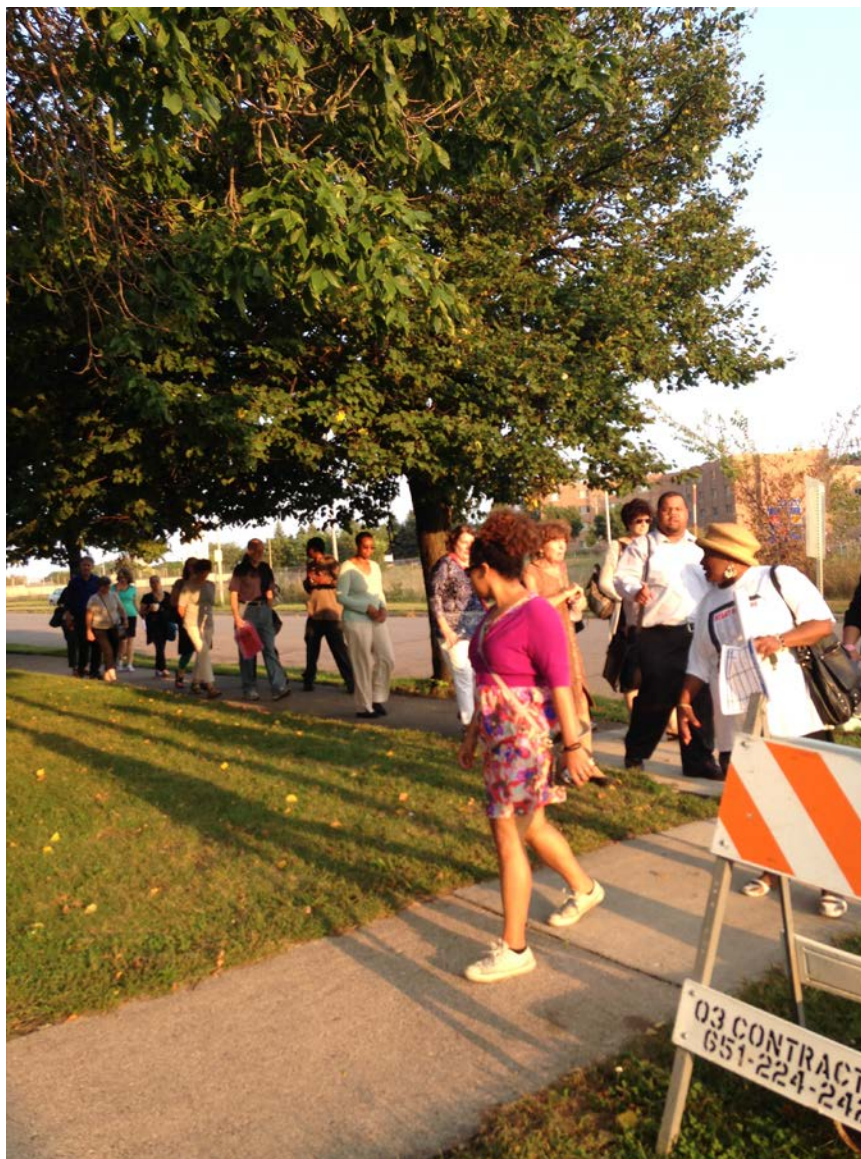
Different social and economic environments produced different health outcomes for two people



# Vanne Owens Hayes – Guest Speaker

- Rondo Neighborhood as a vital community rich in economic opportunities and social connections
- I-94 decimated homes, business, connections

# Walking Tour of Rondo Neighborhood



# Goal 2

**Promote proper nutrition and  
healthy body weight for all  
people in Ramsey County**

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# Statewide Health Improvement Plan

## SHIP 3 – SHIP 4 Strategies/ Community Contracts Comparison

	<u><b>SHIP 3 overview</b></u> <u><b>(11/1/13-10/31/15)</b></u>	<u><b>SHIP 4 plans</b></u> <u><b>(11/1/15-10/31/16)</b></u>
<u><b>SPRCPH Annual SHIP budget</b></u>	\$1,055,215 \$1,160,878 (w/one time supplemental funding)	\$968,157
<u><b>Required Strategies by MDH</b></u>	Healthy School Food, Active School Day, Tobacco Free Living, Worksite Wellness, Community-Clinical Linkages, and Advance Community Linkages with State & Federal Health Reform Initiatives; Healthy Food in Community, Community Active Living, Child Care	Healthy School Food, Active School Day, Tobacco Free Living (Smoke-free multi-unit housing (MUH) <b>OR</b> Point of Sale), Workplace Wellness, Health Care, Healthy Food in Community <b>OR</b> Community Active Living, Child Care (Optional)

# Goal 3

**Ramsey County residents will  
access the appropriate level of  
health care services at the  
appropriate time**

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- Update provided in October, 2015

## Goal 4

**Improve mental health/mental disorders/  
behavioral health through prevention  
and by ensuring access to appropriate,  
quality mental health health/mental  
disorders/ behavioral health for all  
people in Ramsey County**

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# Early Stage

- Ramsey County Commissioners recognized May as Mental Health Month.
  - Website <http://makeitok.org/>
  - Maureen Alms connecting with Mental Health Coordinator at MDH
  - Moving from intervention to prevention
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# Goal 5

**Prevent violence and intentional  
injuries, and reduce their  
consequences for all people in  
Ramsey County**

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# Plans

- Recruit members and organizations
- Quarterly meetings 2016 through 2018
- Review and update the recommendations in the CHIP
- Share best practices, program outcome data and identify connected approaches and common activities



RAMSEY COUNTY  
**Community Health  
Improvement Plan**  
2014 - 2018

Copies of the Strategic Plan and Community health Improvement Plan are available at:

<http://www.co.ramsey.mn.us/ph/pc/planning.htm>

Questions?

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