

# Greene County Community Health Plan, 2009

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In December 2008, 40 community leaders convened to (1) review progress resulting from the implementation of the 2004 Greene County Community Health Plan, and (2) to establish critical health priorities yet to be resolved. These 40 community leaders represented primary and post secondary education, government, community based organizations, private business, and the health care system.

The mission of the Greene County Community Health Planning Steering Committee is to develop and oversee the implementation of a strategic plan to promote the health and well-being of citizens by advocating and actively pursuing affordable and accessible health care; addressing priority lifestyle and behavioral health concerns; and valuing and accessing the natural environment.

The Steering Committee reviewed current health data, and defined three areas of concern: lifestyle and behavioral health; access to health care for the un- and underinsured; and environmental health. The Steering Committee organized into task forces based on these three major issues.

Each task force met three times in February 2009, analyzing local data on the issues; identifying priorities and gaps in services and resources; and developing goals and strategies for each priority. Priority health issues according to each task force are presented in the table below.

## **Lifestyle and Behavioral Health**

- Child Health Promotion and Disease Prevention
- Prevention of HIV and STDs
- Connecting Patients to Community-based Wellness Information and Resources

## **Access to Health Care**

- Dental care for children under age 18 and males age 18-24
- Inadequate transportation services for accessing health care
- Healthcare services for those who are underinsured or uninsured

## **Environmental Health**

- Emergency Planning and Preparedness
- Recycling
- Access to the Natural Environment

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These nine priorities represent the most pressing public health issues for Greene County in 2009, and will be the focus of multiple strategic interventions over the next four years. This plan is designed as a roadmap to community health, and is a dynamic document that will change as conditions, resources, and the environment changes. The plan is presented to the Greene County community as a call to action—an opportunity for private/nonprofit/government agencies, academic/community/faith-based organizations, and citizens to become involved in a unified effort to improve the health and quality of life for youths and adults.

## **THANK YOU STEERING COMMITTEE**

The Greene County Combined Health District would like to thank the citizens and organizations who donated their time to make the community health planning initiative a success, and one which will benefit the health and well-being of all Greene County residents.

The following individuals participated in the planning:

- ❖ **Andrea Andersen**, American Cancer Society
- ❖ **Chrisbell Bednar**, Greene County Parks & Recreation
- ❖ **William Beeman**, Greene County Board of Health
- ❖ **Donald E. Brannen**, Greene County Combined Health District
- ❖ **Anita Crosswhite**, Green County Board of Health
- ❖ **Jean Debrosse**, Ohio State University Extension
- ❖ **Howard Drenth**, Greene Memorial Hospital
- ❖ **Carol Dondero**, Four Oaks Early Intervention
- ❖ **Greg Felder**, Greene Memorial Hospital
- ❖ **Kay Finch**, American Cancer Society
- ❖ **Robyn Fosnaugh**, Greene County Combined Health District
- ❖ **Laurie Fox**, Greene County Combined Health District
- ❖ **Sue Giga**, Greene County Family and Children First
- ❖ **Carol Gill**, Ohio Department of Health
- ❖ **Meg Gillis**, United Way
- ❖ **David Goldberg**, Greene Memorial Hospital
- ❖ **Melanie Hart**, Ohio State University Extension (Greene County)
- ❖ **Anne Henry**, American Cancer Society
- ❖ **June Johnson**, CareSource
- ❖ **Don Leeds**, Greene County Soil & Water Conservation District
- ❖ **Debbie Leopold**, Greene County Combined Health District
- ❖ **Charlene Luken**, CareSource
- ❖ **Mark McDonnell**, Greene County Combined Health District
- ❖ **Charlene Montague**, Greene County Combined Health District
- ❖ **Norma Nikkola**, Fairborn City Schools
- ❖ **Al Onushu**, Greene County Combined Health District
- ❖ **Sara Pappa**, Greene County Combined Health District
- ❖ **Beth Player**, Greene County Combined Health District
- ❖ **Karen Puterbaugh**, Greene County Council on Aging
- ❖ **Rhonda Reagh**, Greene County Children’s Services
- ❖ **Beth Rubin**, Greene County Department of Job and Family Services
- ❖ **Richard Schairbaum**, Greene County Combined Health District
- ❖ **Elaine Straley**, Greene County Board of Health
- ❖ **Nancy Terwoord**, Wright State University
- ❖ **Terry Thomas**, Greene County Educational Service Center
- ❖ **Bill Voskul**, Greene County Juvenile Court
- ❖ **Lynn Wolaver**, Greene County Board of Health
- ❖ **Sheryl Wynn**, Greene County Combined Health District
- ❖ **Richard Young**, TCN Behavioral Health Services

## LIFESTYLE AND BEHAVIORAL HEALTH

### STRATEGIC ISSUE 1: CHILD HEALTH PROMOTION AND DISEASE PREVENTION

**Goal:** Promote wellness and reduce diseases associated with diet and weight for Greene County children.

**Key Result Areas:** *An increased number of schools will adopt policies, practices, and programs that promote healthy eating and physical activity. The number of student referrals to physicians for high blood pressure, diabetes, etc., will be identified and aggregated for schools in the County to better inform need and progress.*

**Lead Agents:** Action for Healthy Kids, School Nurses, Greene County Fitness and Nutrition Task Force, School Wellness Committees, and GCCHD

**Strategies:**

1. Advance Greene County school wellness committees that address physical activity and nutrition through a coordinated school health program, and encourage school and community leadership to demonstrate a commitment to youth wellness.
  - a. Develop a website that makes wellness-focused promising practices and lesson plans easily accessible and promote that website.
  - b. Empower wellness committees by brokering the involvement of PTOs/PTAs, Greene County School Nurses, Head Start teachers, Athletes in Action representatives, home school and parochial school association members, food service managers, Ohio Nutrition Council members, Ohio Cooperative Extension Service, and The Children’s Hunger Alliance, among others.

**Current Situation:**

*Research shows that children with poor nutrition are more likely to score lower on tests, exhibit disruptive behavior, be hospitalized more frequently, and face obesity and other long-term health issues. Formerly relegated to adults, health risks due to overweight and obesity, such as cardiac disease and diabetes, are now affecting our youth. Nearly one in five of Ohio’s third grade public school students are overweight and an additional 17% are at risk for overweight. Even closer to home, Fairborn City Schools data show that roughly half of all 7th and 8th grade girls and nearly 60% of 7th and 8th grade boys are at risk for overweight or already have a body mass index (BMI) considered obese.*

*Because the great majority of children spend their days in schools or child care settings, and consume up to 50% of daily calories during school hours, strategies focus on schools, where we have a unique opportunity to influence children’s health options and choices.*

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- c. Provide building-level health data where possible to increase awareness and draw out champions for school wellness initiatives.
- d. Increase the impact of wellness education in the County by reaching out to home school and parochial school associations and even 4-H clubs.

**Partnering Agents:** Action for Healthy Kids, Greene County Schools

- 2. Develop a coalition of Greene County School Nurses to influence childhood overweight and obesity from Kindergarten to 12th grade.

- a. Focus on preventing chronic diseases associated with diet and weight.
- b. Provide resources, such as the “Building Healthy Student Bodies” (developed by Fairborn City Schools) program, to promote wellness lifestyle practices among youth.
- c. Develop a progress tracking system to assess student receptivity to programs and to gauge the level of student health improvement.



**Partnering Agents:** School nurses

- 3. Implement a social marketing campaign to educate parents and students about proper nutrition and exercise.
  - a. Identify and utilize the Youth Risk Behavior Surveillance System (YRBSS) and other existing data to develop appropriate material for the marketing campaign.
  - b. Pool resources in the County for a social marketing campaign to influence healthy childhood weight, making use of existing campaigns like “Eat Better, Do Better,” “Think your Drink” (which exposes the sugar content in every-day beverages), and “Ounce of Prevention.”
  - c. Target messages, information, and program ideas to the major transitional times in a child’s life—at 12 months of age or so when babies stop taking formula, when children begin preschool or kindergarten, when children are more open to adult guidance but beginning to make food selection choices for themselves (grades 3 and 4), and as children enter middle school.
  - d. Reinforce the integrated marketing campaign by delivering parenting programs about the importance of nutrition, regular physical activity, and how to cook healthy meals for the family.

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- i. Improve accessibility of nutrition information, nutrition education, and nutrition counseling.
  - ii. Strengthen the link between nutrition and physical activity in health promotion.
- e. Integrate message of the GCCHD and other Greene County Partner Agencies.

**Partnering Agents:** Greene County Schools, Ohio State Cooperative Extension Services, Council on Aging

4. Promote the use of no- or low-cost incentives to motivate participation in wellness programs.
- a. Use relationships with Channel 7 news to provide coverage on schools that implement successful wellness programs.
  - b. Look for every opportunity to uphold schools that win wellness awards, like Fairborn and Beavercreek City Schools' receipt of the Buckeye Best Healthy Schools Awards.
  - c. Implement a modified “Book IT!” program, “Walk to the Moon” program, etc., to reward children for healthy lifestyle choices.

**Partnering Agents:** Channel 7, Buckeye Best Healthy Schools Awards Program

5. Maintain a strong county-level nutrition monitoring program to provide accurate, reliable, timely, and comparable data to assess status and progress.

**Partnering Agents:** Health District, GMH, School nurses, ODJFS



## STRATEGIC ISSUE 2: PREVENTION OF HIV AND STDs

### **Current Situation:**

*Sexually Transmitted Diseases (STDs) are a public health concern in the U.S. and in Greene County. For example, the County's Chlamydia rate in 2005 was 191.4 cases per 100,000 people. This rate is up from 178.4 in 2002. Rates for females are about 2.8 times higher than for males, but the rate among males is increasing every year. Because Greene County has five institutions of higher education, the County has a substantial population that could be at risk, having differing levels of education and awareness about the risk.*

*Despite the burdens, costs, complications, and preventable nature of STDs, they remain a significant public health problem, largely unrecognized by the public. STDs cause many harmful, often irreversible, and costly clinical complications, such as reproductive health problems, fetal and perinatal health problems, and cancer (HP 2010). In addition, studies of the worldwide human immunodeficiency virus (HIV) pandemic link other STDs to a causal chain of events in the sexual transmission of HIV infection (HP 2010) A lack of sex education is correlated to teenage sexual activity and the transmission of STDs.*

*Due to a lack of HIV awareness as well as delays by individuals who may be infected or are at risk of infection in accessing counseling, testing, and care services, some populations do not perceive themselves to be at risk. As a result, some HIV-infected persons are not identified and provided care until late in the course of their infection (HP 2010). As a result, this lack of awareness and education can have a detrimental effect on the community.*

**Goal: Reduce the incidence of HIV and STDs among young adults, ages 18-22.**

**Key Result Areas:** *Stronger partnerships between GCCHD and Colleges and Universities in Greene County will result in: scheduled GCCHD presentations on healthy sexual behaviors, access to information distribution channels to large numbers of students, and GCCHD HIV test kits dispersed through student health clinics.*

**Lead Agent:** GCCHD

### **Strategies:**

1. Increase health education pertaining to responsible sexual behavior through incorporation of a wellness course in Greene County colleges and universities.
  - a. Begin with a review of the Central State University (CSU) wellness course curriculum and determine if responsible sexual behavior is or could be covered in the course.
  - b. Offer evaluation support to instructors of this course to assess knowledge gains and behavioral changes.
  - c. Plan for distributing the course to other colleges and universities in Greene County.

**Partnering Agents:** Central State University

2. Collaborate with Greene County colleges and universities to develop scheduled STD workshops and screening programs delivered in nontraditional settings at those institutions.

**Partnering Agents:** Colleges and universities in Greene County

3. Communicate basic information about responsible sexual behavior to full college and university populations via broadcast email messages or other viable means.
  - a. Share information gained with local school nurses.

**Partnering Agents:** Wellness directors of local colleges and universities

4. Develop Partnerships with college and university student health clinics to distribute health department HIV test kits.

**Partnering Agents:** Local colleges and universities, GCCHD



## **Current Situation:**

*The channels for communicating about health have changed significantly over time. These changes include dramatic increases in the number of health issues vying for public attention as well as consumer demands for more and better quality health information. One of the main challenges in the design of effective health communication programs is to identify the optimal contexts, channels, content, and reasons that will motivate people to pay attention to and use health information (HP 2010).*

*Because proper communication with patients and the stature of the physician's office will encourage better patient education and follow through, physician offices are a primary source for the dissemination of health information and community resources. Studies indicate that patients and consumers highly value information from their physician's office and want to know more (HP 2010). One example is the common health care system practice of sending test results directly to the patient. Patients need to review test results in the context of patient health behavior modifications as directed by a trained medical professional.*

## **STRATEGIC ISSUE 3: CONNECTING PATIENTS TO COMMUNITY-BASED WELLNESS INFORMATION AND RESOURCES**

**Goal: Establish physician and dentist offices as a point of patient communication and health information dissemination.**

**Key Result Areas:** *An increased number of physician and dental offices willing to distribute community-based health resources and referral information in their offices.*

**Lead Agents:** GMH and GCCHD

### **Strategies:**

1. Develop clear, candid, accurate, culturally and linguistically competent provider-patient communication resources. At a minimum, materials should be developed based on audience testing for need, cultural and linguistic competence, comprehension, and receptivity.
  - a. Use videos in waiting rooms to provide information on local resources.
  - b. Provide resource packets for doctors or other trained professionals to distribute to patients.
    - i. Develop materials in non-English languages such as brochures, booklets, and outreach materials to non-English speaking citizens.
    - ii. Use materials on the AMA website as a model for the approach.

- c. Provide referrals and treatment recommendations via patient prescriptions.
  - i. Develop prepared prescriptions for specific health issues. For example, a doctor's recommendation to exercise more frequently might be to "Contact GCCHD to develop an exercise and nutrition program."
  - ii. Elicit patient feedback on the content and design of the referral or recommendation.
  - iii. Design the prescription with a carbon copy for the patient file.
  - iv. Design a website so patients can access more information about their prescription and/or resources.
  - v. Make language services available to each individual with limited English proficiency who seeks services, regardless of the individual's language group in the community.
- d. Collaborate with hospitals that send out brochures as another channel for providing health information to the community.



**Partnering Agents:** Local colleges and universities with foreign language departments

- 2. Work with GMH-affiliated physicians to pursue effective avenues for the dissemination of health information and resources to patients. The quality of the resources can affect numerous outcomes, including patient adherence to recommendations and health status. After evaluating what works best, diffuse these practices to other physician offices.
  - a. Initiate the effort by convening a focus group or webinar session with GMH-affiliated physicians to obtain their guidance in material content and design.
  - b. Obtain information from The Ohio Medical Society on best practices in the area of health information dissemination and linking patients to community resources.
  - c. Collaborate with ancillary professionals, like nurses, medical technicians, and office managers to distribute materials.
  - d. Encourage carryover services by embedding contacts to patients 3-6 months after treatment in the approach.

**Partnering Agents:** Hospitals from Greene County and other surrounding counties

## ACCESS TO HEALTH CARE

### STRATEGIC ISSUE 1 – DENTAL CARE FOR CHILDREN UNDER AGE 18 AND MALES AGE 18-24

#### **Current Situation:**

*Oral health is an integral component of health throughout life and is the number 1 unmet health need in every state including Ohio. Millions of people in the US experience dental caries, periodontal diseases, and cleft lip and cleft palate, resulting in needless pain and suffering; difficulty in speaking, chewing, and swallowing; increased costs of care; loss of self-esteem; decreased economic productivity through lost work and school days; and, in extreme cases, death (HP2010).*

*Tobacco use, especially cigarette smoking, is a significant risk factor for periodontal disease, accounting for up to half of all cases of periodontitis. Recent research has suggested that bacteria associated with periodontal disease are associated with an increased risk of heart disease and stroke, premature births, and respiratory infection.*

*Currently 19,000 – 21,000 people in Greene County do not have access to dental services. An increase in access to dental care is needed especially for children who are either on Medicaid or uninsured and males, age 18-24, who are often not covered under Medicaid insurance. The Greene County Combined Health District (GCCHD) provides 1,400-1,600 dental services per year to those with Medicaid services and those who are uninsured.*

*GCCHD has partially addressed the problem through its safety-net dental clinic. This clinic is available to anyone, regardless of their ability to pay. However, the clinic faces several challenges including its small size which precludes it from receiving state financial support and makes it difficult for the dentist and assistants to work efficiently, thus affecting patient flow and impacting wait times. Furthermore, the lack of understanding among the underserved population about the importance of dental care, and the consequences of not seeking preventative care, falsely suppresses the unmet demand.*

*By the time dental services are sought, clients present with larger problems like oral pain, cavities, need for debridement of plaque and tartar, and even the need for oral surgery. One of the most common reasons to be seen in the ER is for acute dental pain. And the GCCHD dental clinic could serve more people if better oral health prevention choices were being made.*

**Goal: Reduce oral diseases and improve access to oral care services.**

**Key Result Areas:** *Expanding the GCCHD dental clinic so that it can meet state eligibility requirements for funding will improve dental care service delivery to the underserved. Relationships will be built with local dentists to encourage them to open their practice to Medicaid patients. Partnerships with college hygienist programs will be explored. A fluoride campaign will be developed. More dental care programs to the very young will be delivered. A social marketing campaign targeted at young adult males will be developed and implemented.*

**Lead Agent:** GCCHD

**Strategies:**

1. Expand the capacity of the public health dental clinic to provide care appropriate to the level of unmet need.
  - a. Obtain funding for an additional dental chair, which will increase efficiency, substantially reduce wait times, and meet the state standard thus making the clinic eligible for state funding.
  - b. In the mean time, explore the possibility of opening the dental clinic on Thursday evenings, when other public health clinics are open, to provide flexibility to working parents or in-school youth.
2. Establish relationships with local dentists who do not currently provide service or provide minimal openings to citizens with Medicaid insurance and encourage them to open their practice.
  - a. The relationship may begin with a smaller request, for example requesting toothbrushes and tooth paste from dentists to be distributed in schools where there is high need.
  - b. Perhaps GCCHD could establish a “donation tree” for toothbrushes, etc.
  - c. Encourage dentists to distribute information in their offices about dental community-based resources.
3. Develop partnerships with area colleges and universities that provide dental hygienist programs to determine if these programs would accept patients from Greene County  
**Partnering Agents:** Possibly Sinclair Community College, Ohio State
4. Increase the fluoridation level in public drinking water for communities within the County.
  - a. Ensure that fluoride in Greene County’s public drinking water supplies meet basic standards and provide education to the public about benefits to fluoride in

the water supply.<sup>1</sup> Due to the incorporation of fluoride, more people than ever before are keeping their natural teeth throughout their lifetime. About one-third of public water systems are not fluoridated, yet this can be the single most effective measure to protect against tooth decay.

- b. Initiate a grassroots campaign in Xenia that focuses on elected officials, influential leaders, and voters.
- c. Identify a champion for the effort.

**Partnering Agent:** Wright State University's CUPA

- 5. Identify and obtain funding for a Kids-only dentist program.
  - a. In the near term, partner with ThinkTV to determine if ThinkTV dental care materials can be used with preschool children in the County. Determine if Think TV would conduct a train-the-trainer program to build capacity in the County for teaching dental hygiene to preschoolers.
    - i. Train Partnership for Success students to deliver the message to preschoolers. Adjust the message so that trained students could also present dental hygiene's importance to their peers.
    - ii. The initiative could also target high school students who have an interest in a dental hygienist career.
  - b. Educate and influence the population that GCCHD serves and the underserved population to transition toward preventative services.
    - i. Educate mothers about oral health during prenatal visits
    - ii. Address early childhood risk factors such as "baby bottle tooth decay."

**Partnering Agent:** ThinkTV, Partnerships for Success



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<sup>1</sup> ADA, 2008

6. Develop a social marketing campaign to address adult male dental health issues by working with Time Warner Cable, airing messages on channel 7, targeting other TV stations like CMT and ESPN. Target soap operas because women often make the health appointments and decisions in a home.
  - a. Develop and distribute educational materials pertaining to dental hygiene.
    - i. One of the main reasons for ER visits is dental pain. Develop an ER protocol so that if a person presents at the ER with dental health issues; obtain permission to refer that patient for ongoing dental health treatment to the Public Health Dental Clinic.
  - b. Distribute dental health promotion materials at locations of importance to the young adult male such as the drivers' license bureau.
  - c. Explore organizing a major event to kick off the social marketing campaign that would engage the target population (like offering free hair cuts, clothes for the workplace, and so on).
  - d. Contact Medicaid HMOs to determine how many people take advantage of the free preventive dental service available to them each year.
  - e. Explore the use of APIAN software to better define the underserved population.

**Partnering Agent:** Time Warner Cable, Care Source (regarding part d), GreeneWorks, and GMH's Emergency Department



### STRATEGIC ISSUE 2 – INADEQUATE TRANSPORTATION SERVICES FOR ACCESSING HEALTH CARE

#### **Current Situation:**

*While Greene County's population is expected to grow 7.4% from 2000 to 2030, the senior population will increase 75% and one in five residents will have one or more disabilities by 2030. These changes will create an increasing demand on public transportation. Some of Greene County's public transportation needs are met through the Greene CATS Public Transit System. The system is a demand-response system and is open to the general Greene County public to and from any destination in Greene County with limited service into Clark and Montgomery counties. Reservations must be made no less than two days in advance to request regular curb-to-curb or disability door-to-door services; however, it is common for citizens to make reservations a week in advance and still be unable to gain access to the service due to limited transit resources. Greene CATS also operates a flex service route between Fairborn and Xenia that runs every 90 minutes, and is planning to add additional flex routes.*

*Local Greene County Senior Centers provide a large portion of transportation services to the elderly population. Currently, Beavercreek, Fairborn, Xenia, and Yellow Springs are the only cities/villages that offer transportation services to local constituents. Developing transportation services among the smaller senior centers in the County and increasing the capacity of the Greene CATS flex route may assist in closing the gap to local transportation issues.*

*Adequate transportation for children to obtain health care services is essential to both short-run and long-run economic vitality. In the short-run, child health outcomes are highly correlated with parental work absentee rates. In the long-run, children's health is critical to school attendance and associated academic successes. Perhaps more importantly, adequate health care access for children (including dental care access) is critical to the quality of overall family life. While child health care access is challenging in any setting, it is particularly vexing in rural areas where low population densities and longer transit distances increase transport costs.*

**Goal:** Improve access to health care services by addressing the inadequacy of transportation services.

**Key Result Areas:** *Added capacity to the County transit system's flex route and improved and extended human service transportation coordination in the rural portions of Greene County will result in better access to health care.*

**Lead Agent:** County Transportation Coordination Council

**Strategies:**

1. Develop a marketing campaign to educate the community about transportation services available and how they can be accessed.
  - a. Develop a resource packet, including information on Greene CATS, for doctors and dentists to distribute when providing care to patients who have transportation barriers.
  - b. Explore the possibility of quantifying the size of the unmet transit need by replicating the Ohio Family Health Survey locally.

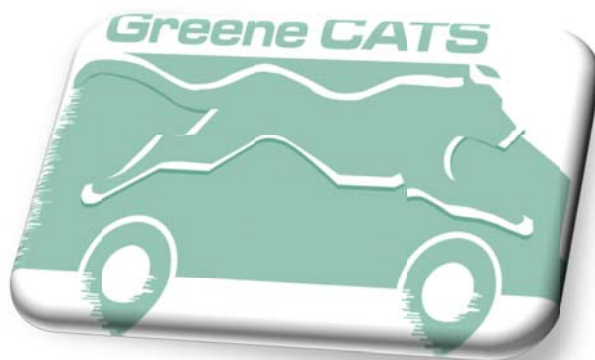
**Partnering Agents:** GCCHD, Channel 7, and Time Warner Cable

2. Increase utilization of existing flex system routes through improved coordination between transportation providers in the surrounding counties, medical facilities, and responsible government entities. Greene CATS intends to add three new flex routes in 2009.

**Partnering Agents:** Greene CATS

3. Explore the viability of organizing a volunteers program to transport people the rural portions of the County to health care services, by collaborating with faith-based and other organizations. Research a similar project that had been done in Fairborn for many years to obtain lessons learned.

**Partnering Agents:** Volunteer organizations, faith-based organizations



### STRATEGIC ISSUE 3 – HEALTHCARE SERVICES FOR THOSE WHO ARE UNDERINSURED OR UNINSURED

#### **Current Situation:**

*In 2008, the number of uninsured and underinsured adults in America was estimated at 72 million. This translates into 35 percent of Americans ages 19-64 who are uninsured and underinsured. In the 2008 Greene County Community Health Assessment, 17.0 percent of residents reported they had no health insurance (10.6%) or might be underinsured (6.4%) because they were prevented from seeing a doctor because of the cost. Uninsured population data collected by Greene Memorial Hospital, Job and Family Services, and GCCHD have different focal points. Therefore, agencies collecting this type of data would gain by combining data to better inform stakeholders about the uninsured population.*

*Uninsured citizens in particular use the ER for their primary medical care. This places a large financial strain on hospitals to provide service to those who may not have adequate insurance coverage to pay for hospital services. One solution proposed in many counties is to create a Federally Qualified Health Center (FQHC), which provides subsidized healthcare to uninsured and underinsured citizens. Obtaining FQHC funding is a highly competitive endeavor.*

*Hospitals can alleviate the strain on the system too. Greene Memorial Hospital has instituted a charity care policy for patients up to 300% of poverty without insurance. Similarly, the Department of Job and Family Services (DJFS) partners with the hospital on the charity care policy for patients up to 200% of poverty with dependents. Employers also play a role in easing the strain on the health care system, by developing and incentivizing wellness programs for employees.*

**Goal: Improve access to appropriate and high quality health care services.**

**Key Result Areas:** *The four initiatives described for this strategic issue are ambitious. Key results will be the implementation, on some scale, of 1 of the 2 initiatives.*

**Lead Agents:** GCCHD, GMH, and ODJFS

#### **Strategies:**

Support the Kettering Health Network's and GCCHD's efforts to pursue a FQHC for Greene County.

**Partnering Agents:** Kettering Health Network, GCCHD

Establish a county-wide data committee to combine Health Department, Ohio Department of Job & Family Services, and hospital data to best inform the County about the uninsured population.

**Partnering Agents:** ODJFS, GMH, GCCHD, FCFC, Schools, United Way, and the Wright State University School of Medicine

## ENVIRONMENTAL HEALTH

### STRATEGIC ISSUE 1 – EMERGENCY PLANNING AND PREPAREDNESS

**Goal:** Align the Greene County EMA and GCCHD emergency response planning initiatives.

**Key Result Areas:** *The Greene County Emergency Mitigation Plan and the GCCHD emergency response plan will be integrated. GCCHD staff will have increased practice with and understanding of emergency response protocol. Greene County residents will have web-based access to current emergency response information.*

**Lead agencies/personnel:** Greene County Environmental Health Director, Greene County EMA Director, The EMA Management Committee

**Strategies:**

1. Integrate the Greene County EMA and GCCHD emergency response plans.
  - a. Ensure that both plans are referenced in the other agency’s plan.
  - b. Educate all Greene County Combined Health District employees about current EMA policies and procedures.
  - c. Encourage (or require) all employees to read their personal copies of both emergency plans and understand procedures.
2. Establish and maintain communication with all Greene County emergency response organizations.
  - a. Unify emergency response departments, thus supporting the overarching goal of Greene County preparedness.

**Partnering Agents:** Greene County EMA, Red Cross, United Way

**Current Situation:**

*Environmental emergencies are incidents or events that threaten public safety, health, and welfare (NIEHS). The act of responding to emergencies includes organizing, coordinating, and directing resources to protect public health. The Emergency Management Agency (EMA) of Greene County currently serves as the focal point for which all other emergency response agencies revolve. The mission of the EMA is to provide comprehensive coverage to all Greene County residents.*

*The Greene County EMA’s website (<http://www.co.greene.oh.us/EMA/default.asp>) offers community members the capacity to link into several additional resources for emergency planning on a community, family, and individual level. The Greene County EMA produces an emergency response plan which encompasses the entire county. It is a separate document from the Greene County Combined Health District emergency response plan. The GCCHD also offers a website with links to additional sites and references. Beyond planning, in order to articulate goals, strengths, and weaknesses, the emergency planning community must test protocols, fine tune coordination, and practice specific response activities.*

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Test and evaluate emergency response plans as mandated.

- b. Create a comprehensive evaluation tool that may be used to maintain regular reviews of the GCCHD emergency plan.
- c. Participate in joint training exercises (i.e. mock emergencies) with the Greene County EMA.

**Partnering Agents:** EMA

- 3. Educate Greene County residents on emergency response planning and current practices.
  - a. Ensure website information is up-to-date.
  - b. Coordinate with homebuilders to include built-in storage containers, which are portable, for storage of perishable and nonperishable items in preparation for emergencies situations at home.

**Partnering Agents:** EMA, home builder associations, Council on Aging



F5 tornado, Xenia, Ohio, April 3, 1974 (photo: Fred Stewart, NOAA)

## STRATEGIC ISSUE 2: RECYCLING

**Goal:** Sustain and protect Greene County's natural resources.

**Key Result Areas:** At least two Greene County agencies will increase their recycling program efforts resulting in decreased solid waste disposal.

**Lead agencies/personnel:** Greene County Environmental Health Director and employee volunteer team leaders; The Environmental Services Division of the Greene County Sanitary Engineering Department, Greene County Solid Waste Management District Director; Recycling haulers and additional employees with knowledge of recycling needs; Greene County Commissioners and County Administrators

**Strategies:**

1. Promote dedicated recycling efforts among all GCCHD internal departments.
  - a. Identify departmental leaders who will organize recycling efforts and ensure program success. This champion will be responsible for educating staff on a regular basis and serving as the liaison between the department and the Greene County Sanitary Engineering Department.
  - b. Pending positive cost/benefit analysis, install recycling receptacles in all GCCHD office waiting areas.

**Partnering Agents:** GCCHD, two agencies to pilot a recycling and/or reuse program

**Current Situation:**

*Recycling turns materials that would otherwise become waste into valuable resources. Greene County benefits from having a materials recovery facility where recyclables are sorted and prepared into marketable commodities for manufacturing. Collecting used bottles, cans, and newspapers and taking them to the curb or to a collection facility is just the first in a series of steps that generates a host of financial, environmental, and social returns. Some of these benefits accrue locally as well as globally. The most effective method for the creation of sustainable communities proves to be engaging the citizenry. Successful community sustainability programs in Europe, the U.S., and elsewhere, have established programs that foster support and guide private sector and citizen-based sustainability efforts.*

*While recycling program publicity, promotion, and education must be ongoing, businesses and agencies can be role models to demonstrate the possibilities. The GCCHD will partner with Greene County Sanitary Engineering to establish itself as a role model for recycling, and then seek cross-agency participation with their community partners, before taking the initiative community-wide.*

2. Engage partnering agencies to participate with GCCHD in its recycling initiative.
  - a. Organize an initial meeting with the Environmental Services Division of the Greene County Sanitary Engineering Department to discuss recycling costs for pick up and/or savings, benefits, schedule of pick up, staff labor and time, and receptacle location/number of units. Participating parties should include county building representatives, haulers, commissioners, trustees, and the district director. Meeting(s), findings and benefits should be presented to the Greene County commissioners to promote county-wide efforts.
  - b. Brainstorm GCCHD recycling awareness initiatives that may be led or organized by the “Partnerships for Success” program and the Greene Green Group (“3 G”).

**Partnering Agents:** Greene County Engineering Department

3. Engage the full community in protecting the environment through recycling.
  - a. Promote community-sponsored recycling programs to increase public awareness and participation.
    - i. Explore the possibility of developing a grant program for cities, villages, and townships, perhaps funded by a portion of the solid waste district’s generation fees.
  - b. Build broad program support during the planning stages by seeking public input, and promoting the program to those active in community (such as service and civic clubs), and build political support.
  - c. Communicate clearly and in culturally competent ways, thus facilitating community awareness. Examples include brochures, mailings via water bills, or community cable access channels.
  - d. Make program participation as convenient as possible, keeping the program easy and user-friendly.
  - e. Learn from others’ experiences. Find out what other communities have accomplished and how they did it. For example, composting is one of the most significant means of reducing solid waste, with fall leaf collection being one of the single most impactful activities.

**Partnering Agents:** GCCHD



### STRATEGIC ISSUE 3 – ACCESS TO PARKS AND RECREATIONAL RESOURCES

#### **Current Situation:**

*Greene County houses a variety of playground and physical fitness facilities. However, community members are often unaware of how many opportunities are available for children and adults to remain active all year long. Neighborhoods with safe places for children to play after normal operating times are positive influencers of exercise and activity (Office of Healthy Ohio). Individuals are often less likely to travel far distances to use community wellness facilities, thus opportunities for physical activity should be easily accessible and promoted heavily in the community. Expanding access can be accomplished in many ways, such as encouraging community schools to revisit their policies and program options. Bellbrook Schools, for example, have found ways to open their school gym to community use by using parents and volunteers to oversee youth activities.*

*One barrier to playground use that often goes unnoticed is the incorporation of disability services. Research shows that funding continues to be one of the biggest obstacles to the acquisition of assistive technology for children with disabilities. In addition, national and state level money for community wellness campaigns and walkable communities is often untapped due to a lack of knowledge regarding what the issues are, where they are prevalent, and who is available to help.*

*Greene County, like other counties in Ohio, faces zoning policy issues that create barriers to safe physical activity. Sidewalks, for example, are nonexistent in some areas, which poses a safety threat to residents. In today's communities, maintaining healthy lifestyles by utilizing walk and bike paths is increasingly difficult. If the opportunity for physical activity (through subsequent infrastructure) is available in a neighborhood community, higher levels of exercise are usually found. Residents are 65 percent more likely to report walking in their neighborhood when sidewalks are available.*

*Integrating the use of the Greene County Transit Board (Greene CATS) as a community resource to access physical fitness opportunities in the County is also important. Transportation for this purpose increases social interaction, community engagement, and caring about the environment. This year, Greene CATS is working to install bike racks on their buses and hopes this will encourage more people to use their services to visit parks and bike trails, and the use of bike racks will be free of charge. Greene CATS will try to have the flex routes pass by locations where people can access the bike paths and so on.*

## Greene County Community Health Plan

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2009

**Goal:** Maximize community access to environmental, natural, and other assets in Greene County.

**Key Result Areas:** *The four initiatives developed for this strategic issue are diverse and therefore require unique resources and partnerships. The accomplishment of 3 of these 4 priority initiatives will underscore success and real progress toward the goal of increasing social interaction, community engagement, and care for the natural environment.*

**Lead agencies/personnel:** Greene County Combined Health District's Commissioner, Mark McDonnell; Greene County Parks and Recreation Department; Greene County Regional Planning Commission; Greene County Commissioners and County Administrators

**Strategies:**

1. Increase Greene CATS' involvement and leadership in promoting community-wide usage of Greene CATS transportation services.
  - a. Promote ways to utilize CATS while also promoting physical fitness
    - i. An example is bike racks on buses. Also, accessing other jurisdiction's natural resources by having more options for travel and leisure.
    - ii. Target moms who need positive activities for their kids to do during the summer.
    - iii. Promote ODNR's Get Fit Naturally website link, which directly links consumers to fitness and nutrition resources.

**Partnering Agent:** Greene CATS

2. Utilize playgrounds and gym facilities during non-operating hours (i.e. after school hours and during the summer months).
  - a. Address ADA compliance in park and recreational facilities within the Greene County political arena to ensure legislative mandates, thus enabling more families to visit more playgrounds.
    - i. Research funding sources at the state and federal level.
  - b. Encourage schools to provide and promote fitness and activity opportunities before, during, and after school hours for children and families.

**Partnering Agents:** Local schools, Parks and Rec. Department

3. Work with the Greene County Regional Planning Commission regarding zoning in Eastern Greene County, so that as that portion of the County develops, zoning to enable physical fitness is considered.
  - a. Set up a meeting between Greene County officials to determine a feasible course of action regarding access to park and recreational assets.
  - b. Establish formal committees for further investigation.

## Greene County Community Health Plan

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2009

- i. Address building progress being made in Eastern Greene County
- c. Research and meet with local jurisdictions that are addressing the issue of sidewalk placement.

**Partnering Agents:** Greene County Regional Planning Commission

- 4. Enhance GCCHD awareness of alternative funding sources, including state and national level initiatives.
  - a. Identify GCCHD departments which are capable of researching, proposing, and applying for grant opportunities from the Ohio Department of Transportation and the Ohio Department of Safety.
  - b. Consider promoting a link between funding and regulations for active living environments that promote walking and bicycling.

**Partnering Agents:** GCCHD

