

Linn County Health Improvement Plan

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For additional information, CONTACT:

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Community Priority

Social Determinants of Health

Goal #1 Increase access to properly maintained and affordable housing.

National Alignment

Healthy Homes and Healthy Communities

State Alignment

Healthy Homes

Objective 1-1 By June 1, 2017 a plan will be implemented to address the barriers that hard to house populations and those living under 30% of the area median income (AMI) face in relation to obtaining affordable housing.

Baseline Year	Baseline Value	Target Year	Target Value
2016	0% complete	2017	100% complete

Strategy 1-1.1 Collect existing data on barriers to accessing affordable housing among the targeted population across Linn County

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible

Waypoint, Linn County Community Services, United Way, Willis Dady

Target Date

6/1/2017

Strategy 1-1.2 Assess the barriers that landlords face that influence their willingness to rent to individuals in the defined population across Linn County

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

Eastern Iowa Health Center, Willis Dady

Target Date

6/1/2017

Strategy 1-1.3 Engage city staff in conversation regarding limitations and opportunities to support affordable housing in their jurisdiction

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

City of Cedar Rapids, Linn County Public Health

Target Date

6/1/2017

Strategy 1-1.4 Conduct a targeted assessment of the barriers experienced by the defined population related to accessing affordable housing

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

City of Cedar Rapids

Target Date

6/1/2017

Strategy 1-1.5 Analyze primary and secondary data and synthesize into a report

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

United Way, Linn County Public Health

Target Date

6/1/2017

Strategy 1-1.6 Use data to inform the development of a multi-level plan to address identified barriers to accessing housing among the target population

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Willis Dady

Target Date

6/1/2017

Strategy 1-1.7 Implement the multi-level plan

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Willis Dady

Target Date

6/1/2017

Objective 1-2 Between January 1, 2018 and January 1, 2019, 50% of individuals and families who enter into lease agreements associated with the affordable housing stock (section 8 vouchers, transitional housing) will have received tenant education on tenant rights, proper housing maintenance (cleaning), and building a positive rental resume.

Baseline
Year

2018

Baseline
Value

0%

Target
Year

2019

Target
Value

50%

Strategy 1-2.1 Identify and assess tenant education currently being conducted in the community (who is providing, curriculum, frequency, clientele, circumstance training is provided, culturally competent/tailored)

Strategy Type

Counseling & Education

Who's Responsible

Waypoint

Target Date

1/1/2019

Strategy 1-2.2 Investigate best practice tenant education curriculum and strategies to engage clientele

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Waypoint

Target Date

1/1/2019

Strategy 1-2.3 Investigate opportunities for additional trainings to occur (location, time)

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Waypoint

Target Date

1/1/2019

Strategy 1-2.4 Identify and assess demographics and language needs of current tenants to inform need for tailored education

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Cedar Rapids Community School District

Target Date

J1/1/2019

Strategy 1-2.5 Strategically expand upon current tenant education using multiple approaches

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Cedar Rapids Community School District

Target Date

1/1/2019

Strategy 1-2.6 Partner with affordable housing lead agencies to investigate a referral process for providing tenant education and connecting clients with other needed support resources

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

City of Cedar Rapids

Target Date

1/1/2019

Objective 1-3 By January 1, 2019 50% of the agencies in Linn County who provide in-home services will be trained to identify potential hazards within a client's home and will have the capacity to refer cases to applicable agencies or to provide education to clients in order to mitigate unsafe home conditions

Baseline Year	Baseline Value	Target Year	Target Value
2016	To be established	2019	50%

Strategy 1-3.1 Identify a list of social service and health care agencies that provide in-home services in Linn County

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.2 Develop a referral process and identify applicable agencies who may assist in addressing unsafe home conditions when identified

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.3 Investigate best practice curriculum and tools to identify potential hazards within the home environment

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.4 Develop a training process

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.5 Develop an evaluation and tracking process for hazard identification and mitigation referrals

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.6 Engage social service agencies and gain buy in from agency leaders to support the initiative

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.7 Provide training to social service agencies

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Strategy 1-3.8 Track program effectiveness

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

East Central Iowa Council of Governments, Linn County Public Health, Hawkeye Area Community Action Program, City of Cedar Rapids, Families First, Abbe Center, Mercy, Linn County Community Services Home Health

Target Date

1/1/2019

Goal #2 Increase access to care and community resources for vulnerable populations

National Alignment

Access to Health Services

State Alignment

Access to Quality Health Services and Support

Objective 2-1 By January 1, 2019 a plan will be implemented to address the gaps in transportation services and the barriers to transportation experienced by community members

Baseline Year

2016

Baseline Value

0% complete

Target Year

2019

Target Value

100% complete

Strategy 2-1.1 Convene county-wide transportation experts into a conversation in order to align transportation plans and outline gaps to services specific to vulnerable populations

Strategy Type

Address Social Determinant / Health Inequity

Who's Responsible

East Central Iowa Council of Governments - Transportation Advisory Group, Metropolitan Planning Organization, City of Cedar Rapids, Linn County, Four Oaks, Horizons

Target Date

1/1/2019

Strategy 2-1.2 Provide community education on available transportation resources

Strategy Type

Counseling & Education

Who's Responsible

East Central Iowa Council of Governments - Transportation Advisory Group, Metropolitan Planning Organization, City of Cedar Rapids, Linn County, Four Oaks, Horizons

Target Date

1/1/2019

Strategy 2-1.3 Provide education to community members and businesses on multi-modal transportation benefits and opportunities

Strategy Type

Counseling & Education

Who's Responsible

East Central Iowa Council of Governments - Transportation Advisory Group, Metropolitan Planning Organization, City of Cedar Rapids, Linn County, Four Oaks, Horizons

Target Date

1/1/2019

Strategy 2-1.4 Work with cities to address physical transportation service gaps in their jurisdictions

Strategy Type

Address Social Determinant / Health Inequity

Who's Responsible

East Central Iowa Council of Governments - Transportation Advisory Group, Metropolitan Planning Organization, City of Cedar Rapids, Linn County, Four Oaks, Horizons

Target Date

1/1/2019

Objective 2-2 By January 1, 2019 increase the number of practicing healthcare providers who accept Medicaid by 5%

Baseline Year	Baseline Value	Target Year	Target Value
2016	To be established	2019	5% increase

Strategy 2-2.1 Investigate opportunities to recruit and retain healthcare providers during early education and undergraduate programs

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Mercy, Eastern Iowa Health Center, UnityPoint, His Hands, University of Iowa Nurse Practitioner College

Target Date

1/1/2019

Strategy 2-2.2 Develop a plan to recruit and maintain primary care and healthcare staff

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Mercy, Eastern Iowa Health Center, UnityPoint, His Hands, University of Iowa Nurse Practitioner College

Target Date

1/1/2019

Strategy 2-2.3 Implement recruitment plan

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Mercy, Eastern Iowa Health Center, UnityPoint, His Hands, University of Iowa Nurse Practitioner College

Target Date

1/1/2019

Objective 2-3 Increase the number of social and health outreach services available to vulnerable populations by 10% prior to January of 2019

Baseline Year	Baseline Value	Target Year	Target Value
2016	To be established	2019	10% increase

Strategy 2-3.1 Assess the service needs and barriers of vulnerable populations in Linn County

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible

Willis Dady, Eastern Iowa Health Center, Iowa State University Extension, Four Oaks, Mercy, Linn County Public Health

Target Date

1/1/2019

Strategy 2-3.2 Identify services currently available to vulnerable populations across Linn County

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible

Willis Dady, Eastern Iowa Health Center, Mercy, Linn County Public Health

Target Date

1/1/2019

Strategy 2-3.3 Identify locations where off-site services may be provided to address access barriers

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Willis Dady, Four Oaks, Linn County Public Health

Target Date

1/1/2019

Strategy 2-3.4 Engage partners who may provide social and health services

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Eastern Iowa Health Center, Four Oaks, Linn County Public Health, Mercy

Target Date

1/1/2019

Strategy 2-3.5 **Develop marketing strategy to inform the community about available clinics** Strategy Type
 Counseling & Education

Who's Responsible
 Eastern Iowa Health Center, Mercy, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-3.6 **Use available off-site locations to hold satellite clinics and social services** Strategy Type
 Environmental / Policy / Systems Change

Who's Responsible
 Eastern Iowa Health Center, Mercy, Linn County Public Health

Target Date
 1/1/2019

Objective 2-4	By January 1, 2019 the utilization of primary and specialized care services among Medicaid patients will be increased by 10%	Baseline Year	Baseline Value	Target Year	Target Value
		2016	To be established	2019	10% increase

Strategy 2-4.1 **Investigate the impact of Medicaid modernization on access to primary and specialized care** Strategy Type
 Environmental / Policy / Systems Change

Who's Responsible
 Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-4.2 **Educate the community on the impacts of Medicaid modernization on access to primary and specialized care** Strategy Type
 Counseling & Education

Who's Responsible
 Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-4.3 **Develop a process for efficiently connecting vulnerable populations to needed services** Strategy Type
 Environmental / Policy / Systems Change

Who's Responsible
 Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-4.4 **Assess opportunities to reduce wait times for primary care appointments** Strategy Type
 Long-Lasting Protective Intervention

Who's Responsible
 Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-4.5 **Identify the rate of missed appointments among Medicaid patients** Strategy Type
 Clinical Intervention

Who's Responsible
 Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-4.6 **Assess reasons for missed medical appointments** Strategy Type
 Environmental / Policy / Systems Change

Who's Responsible
 Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health

Target Date
 1/1/2019

Strategy 2-4.7	Reduce the rate of missed appointments through the address of patient barriers	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health <u>Target Date</u> 1/1/2019								
Strategy 2-4.8	Work with providers to address barriers vulnerable populations face related to missed appointments and access to care	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Mercy, UnityPoint, Eastern Iowa Health Center, Hawkeye Area Community Action Program, Linn County Public Health <u>Target Date</u> 1/1/2019								
Objective 2-5	By January 31, 2018 a population health management system will be in place to connect vulnerable populations with needed resource and support services	<table border="1"> <thead> <tr> <th>Baseline Year</th> <th>Baseline Value</th> <th>Target Year</th> <th>Target Value</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>0% complete</td> <td>2018</td> <td>100% complete</td> </tr> </tbody> </table>	Baseline Year	Baseline Value	Target Year	Target Value	2016	0% complete	2018	100% complete
Baseline Year	Baseline Value	Target Year	Target Value							
2016	0% complete	2018	100% complete							
Strategy 2-5.1	Identify and assess existing referral systems in Linn County (community resource sheets, hospitals, clinics, non-profits)	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Linn County Public Health <u>Target Date</u> 1/31/2018								
Strategy 2-5.2	Identify gaps and opportunities for improvement with current referral process	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Linn County Public Health <u>Target Date</u> 1/31/2018								
Strategy 2-5.3	Identify and engage community referral sources	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Linn County Public Health <u>Target Date</u> 1/31/2018								
Strategy 2-5.4	Assess needs and barriers to well-being among vulnerable populations in targeted locations throughout Linn County	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Linn County Public Health <u>Target Date</u> 1/31/2018								
Strategy 2-5.5	Select a referral system to support community referrals	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Linn County Public Health <u>Target Date</u> 1/31/2018								
Strategy 2-5.6	Use assessment data to develop a responsive referral system	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Who's Responsible</u> Linn County Public Health <u>Target Date</u> 1/31/2018								

Strategy 2-5.7	Establish contracts between referral partners and the care coordination system host site	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Linn County Public Health	<u>Target Date</u> 1/31/2018
Strategy 2-5.8	Develop and disseminate client signed consent agreement to all referral partners	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Linn County Public Health	<u>Target Date</u> 1/31/2018
Strategy 2-5.9	Implement the developed care coordination system	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Linn County Public Health	<u>Target Date</u> 1/31/2018
Strategy 2-5.10	Evaluate the effectiveness of the care coordination system in connecting client to needed resources	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Linn County Public Health	<u>Target Date</u> 1/31/2018

Goal #3 Decrease the number of children who are negatively impacted by risk factors associated with Adverse Childhood Experiences (ACEs)

National Alignment	State Alignment
Health Related Quality of Life & Well-Being, Injury and Violence Prevention	Healthy Growth and Development, Interpersonal Violence

Objective 3-1	By January 1, 2019, 30% of child and youth-based organizations, school buildings, and primary healthcare providers in Linn County will have implemented a comprehensive program to prevent and mitigate the impact of ACEs	Baseline Year	Baseline Value	Target Year	Target Value
		2016	To be established	2019	30%

Strategy 3-1.1	Identify the number of child and youth-based organizations, school buildings, and primary healthcare providers in Linn County	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019

Strategy 3-1.2	Assess current trauma informed care practices, support services available to ensure child well-being, and curriculum to promote the use of positive coping mechanisms (social-emotional, conflict-resolution, stress reduction, mindfulness curricula) within the community (schools, child and youth-based organizations, and healthcare providers)	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019

Strategy 3-1.3	Promote, pilot, and implement school-based, evidence-based curriculum	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019
Strategy 3-1.4	Promote, pilot, and implement evidence-based curriculum in community youth-based organizations and early childhood centers	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019
Strategy 3-1.5	Educate child and youth-based organizations and providers about trauma informed care	<u>Strategy Type</u> Long-Lasting Protective Intervention
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019
Strategy 3-1.6	Train child and youth-based organizations and providers about trauma informed care	<u>Strategy Type</u> Long-Lasting Protective Intervention
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019
Strategy 3-1.7	Promote culturally responsive and inclusive positive parenting education and support programs	<u>Strategy Type</u> Clinical Intervention
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019
Strategy 3-1.8	Promote the adoption of the Centers for Disease Control and Prevention "Essentials for Childhood Framework" county-wide	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019
Strategy 3-1.9	Investigate and assess policies that may positively impact child and family well-being and resiliency	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC	<u>Target Date</u> 1/1/2019

Strategy 3-1.10 Promote the adoption of relevant policies

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

United Way, Cedar Rapids Community School District, College Community School District, Iowa BIG, Four Oaks, Tanager, Linn-Mar School District, Marion Independent Schools, Eastern Iowa Health Center, HACAP, ASAC

Target Date

1/1/2019

Community Priority

Behavioral Health

Goal #1 Increase access to mental health services		National Alignment	State Alignment			
		Mental Health and Mental Disorders	Mental Health and Mental Disorders			
Objective 1-1	By January 1, 2019, increase the percentage of healthcare prescribers who provide mental health services in Linn County by 10%	Baseline Year	Baseline Value	Target Year	Target Value	
		2016	To be established	2019	10% increase	
Strategy 1-1.1	Identify the current number of healthcare prescribers who provide mental health services to their patients and those who accept Medicaid	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Tanager Place, Mercy	<u>Target Date</u> 1/1/2019				
Strategy 1-1.2	Engage and educate primary care providers regarding their role in providing mental health services	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Mercy, UnityPoint	<u>Target Date</u> 1/1/2019				
Strategy 1-1.3	Assess barriers and concerns non-traditional prescribers face related to providing mental health services	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Mercy, UnityPoint, Linn County Public Health	<u>Target Date</u> 1/1/2019				
Strategy 1-1.4	Develop and implement a recruitment strategy to increase the number of mental health prescribers who are available in Linn County and those who provide Medicaid	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Mercy, UnityPoint	<u>Target Date</u> 1/1/2019				
Strategy 1-1.5	Implement advocacy efforts at the local and state levels	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Mercy, UnityPoint, Foundation 2, ASAC	<u>Target Date</u> 1/1/2019				
Objective 1-2	By January 1, 2019 there will be an increase in the number of available resources linking individuals to mental health services	Baseline Year	Baseline Value	Target Year	Target Value	
		2016	To be established	2019	To be established	
Strategy 1-2.1	Research and quantify current mental health referral processes	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Linn County Public Health	<u>Target Date</u> 1/1/2019				

Strategy 1-2.2	Research best practice methods for implementing crisis mental health services	<u>Strategy Type</u> Environmental / Policy / Systems Change	<u>Who's Responsible</u> Foundation 2	<u>Target Date</u> 1/1/2019	
Strategy 1-2.3	Develop and implement a procedure to increase crisis mental health service opportunities	<u>Strategy Type</u> Long-Lasting Protective Intervention	<u>Who's Responsible</u> Foundation 2	<u>Target Date</u> 1/1/2019	
Strategy 1-2.4	Educate the community about available mental health resources	<u>Strategy Type</u> Counseling & Education	<u>Who's Responsible</u> Foundation 2, Tanager Place, ASAC	<u>Target Date</u> 1/1/2019	
Strategy 1-2.5	Promote the use of mental health screenings within primary care offices	<u>Strategy Type</u> Clinical Intervention	<u>Who's Responsible</u> Mercy, Eastern Iowa Health Center, Abbe	<u>Target Date</u> 1/1/2019	
Strategy 1-2.6	Provide community members access to services through the use of telehealth services	<u>Strategy Type</u> Environmental / Policy / Systems Change	<u>Who's Responsible</u> Mercy, UnityPoint, Eastern Iowa Health Center, Abbe	<u>Target Date</u> 1/1/2019	
Objective 1-3	By January 1, 2019, there will be a 2% reduction in adults who report poor mental health	Baseline Year 2014	Baseline Value 33.9%	Target Year 2019	Target Value 31.9%
Strategy 1-3.1	Develop and implement a mental health awareness campaign that addresses stigma related to mental health issues	<u>Strategy Type</u> Clinical Intervention	<u>Who's Responsible</u> ASAC, Abbe, NAMI	<u>Target Date</u> 1/1/2019	
Strategy 1-3.2	Promote prevention and stigma reducing services through social services, youth & adolescent organizations, and faith based organizations	<u>Strategy Type</u> Clinical Intervention	<u>Who's Responsible</u> ASAC, Abbe, NAMI	<u>Target Date</u> 1/1/2019	
Strategy 1-3.3	Increase outreach and education to homeless, youth, and other at-risk populations	<u>Strategy Type</u> Counseling & Education	<u>Who's Responsible</u> ASAC, Abbe, NAMI	<u>Target Date</u> 1/1/2019	

Goal #2 Decrease the rate of suicide in Linn County

National Alignment

Mental Health and Mental Disorders

State Alignment

Mental Health and Mental Disorders - Suicide

Objective 2-1	By January 1, 2019 adult suicide rates will be decreased by 10%	Baseline Year	Baseline Value	Target Year	Target Value
		2011	11 per 100,000	2019	9.9 per 100,000

Strategy 2-1.1 Identify existing services in Linn County related to suicide prevention
Strategy Type
 Environmental / Policy / Systems Change
Who's Responsible
 Foundation 2, Suicide Prevention Coalition
Target Date
 1/1/2019

Strategy 2-1.2 Increase early intervention services
Strategy Type
 Environmental / Policy / Systems Change
Who's Responsible
 Mercy, Suicide Prevention Coalition
Target Date
 1/1/2019

Strategy 2-1.3 Promote and Expand upon existing suicide prevention efforts and programs
Strategy Type
 Long-Lasting Protective Intervention
Who's Responsible
 Mercy, Suicide Prevention Coalition
Target Date
 1/1/2019

Strategy 2-1.4 Partner with firearm dealers, Linn County Sheriff's office, and gun owner groups to incorporate suicide awareness as a basic part of firearm safety and responsible firearm ownership
Strategy Type
 Environmental / Policy / Systems Change
Who's Responsible
 Foundation 2, Suicide Prevention Coalition
Target Date
 1/1/2019

Objective 2-2	By January 1, 2019 increase community awareness and response to risk factors related to serious mental illness through education provided to 25% of middle and high schools, colleges/universities, local government, and healthcare providers in Linn County.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	To be established	2019	25%

Strategy 2-2.1 Assess current suicide prevention practices conducted within the community
Strategy Type
 Long-Lasting Protective Intervention
Who's Responsible
 Foundation 2
Target Date
 J1/1/2019

Strategy 2-2.2 Assess the current suicide prevention curriculum and practices implemented within the Linn County school system
Strategy Type
 Environmental / Policy / Systems Change
Who's Responsible
 Suicide Prevention Coalition, Cedar Rapids Community Schools
Target Date
 1/1/2019

Strategy 2-2.3 Standardize the implementation of evidence-based suicide prevention curriculum across all Linn County school districts
Strategy Type
 Environmental / Policy / Systems Change
Who's Responsible
 Suicide Prevention Coalition, Cedar Rapids Community Schools
Target Date
 1/1/2019

Strategy 2-2.4	Educate and train teachers, youth-based staff, and healthcare providers on identifying warning signs and behaviors related to serious mental health illness and referring patients to needed services	<u>Strategy Type</u> Clinical Intervention
	<u>Who's Responsible</u> Foundation 2, Four Oaks, Tanager	<u>Target Date</u> 1/1/2019
Strategy 2-2.5	Educate parents on identifying warning signs and behaviors related to serious mental health illness and the resources available in the community	<u>Strategy Type</u> Counseling & Education
	<u>Who's Responsible</u> Foundation 2, Four Oaks, Tanager	<u>Target Date</u> 1/1/2019
Strategy 2-2.6	Promote positive adult to child relationships to increase social connectedness	<u>Strategy Type</u> Long-Lasting Protective Intervention
	<u>Who's Responsible</u> Foundation 2	<u>Target Date</u> 1/1/2019
Strategy 2-2.7	Develop a marketing campaign to reduce mental health stigma	<u>Strategy Type</u> Long-Lasting Protective Intervention
	<u>Who's Responsible</u> ASAC	<u>Target Date</u> 1/1/2019

Goal #3 Decrease the rate of substance abuse among adults and adolescents

National Alignment	State Alignment
Substance Abuse	Addictive Behaviors

Objective 3-1	By January 1, 2019, the rate of binge and underage drinking will be reduced by 2%	Baseline Year	Baseline Value	Target Year	Target Value
		2014	8% adolescent 33.1% adult	2019	6% adolescent 31.1% adult
Strategy 3-1.1	Increase outreach and education to homeless population providers	<u>Strategy Type</u> Counseling & Education			
	<u>Who's Responsible</u> Area Substance Abuse Council, Continuum of Care, Mission of Hope	<u>Target Date</u> 1/1/2019			
Strategy 3-1.2	Establish a system to connect homeless and vulnerable populations with mental health and support services	<u>Strategy Type</u> Environmental / Policy / Systems Change			
	<u>Who's Responsible</u> Area Substance Abuse Council, Continuum of Care, Foundation 2, Mission of Hope	<u>Target Date</u> 1/1/2019			
Strategy 3-1.3	Increase outreach and education on Adult Binge Drinking through environmental strategies, identification, and referral to treatment	<u>Strategy Type</u> Environmental / Policy / Systems Change			
	<u>Who's Responsible</u> Area Substance Abuse Council	<u>Target Date</u> 1/1/2019			

Strategy 3-1.4	Identify the source adolescents use to obtain alcohol	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-1.5	Use adolescent alcohol access data to support the development of a comprehensive evidence-based alcohol prevention program	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-1.6	Increase outreach and education on youth alcohol use through environmental practices, identification, and referral to treatment	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-1.7	Ensure a support system is in place to ease care transitions following treatment	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-1.8	Investigate and assess policies that encourage a reduction in adolescent access to alcohol and binge drinking behaviors	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-1.9	Promote the adoption of relevant policies	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Objective 3-2	By January 1, 2019 the rate of marijuana use among adolescents will be reduced by 2%					
		Baseline Year	Baseline Value	Target Year	Target Value	
		2014	5%	2019	3%	
Strategy 3-2.1	Advocate to prevent legalization of marijuana	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-2.2	Increase outreach and education among adolescents to increase perception of harm regarding marijuana use	<u>Strategy Type</u> Counseling & Education				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			

Strategy 3-2.3	Increase outreach and education through environmental practices that prohibit accessibility to marijuana paraphernalia and marketing	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-2.4	Increase outreach and education on identification and referral to treatment	<u>Strategy Type</u> Clinical Intervention				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Strategy 3-2.5	Ensure a support system is in place to ease the transition for individuals recovering from substance abuse issues following treatment	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Area Substance Abuse Council		<u>Target Date</u> 1/1/2019			
Objective 3-3	By January, 1 2019 the rate of prescription drug abuse and misuse will be stabilized					
		<u>Baseline Year</u>	<u>Baseline Value</u>	<u>Target Year</u>	<u>Target Value</u>	
		2014	4%	2019	<=4%	
Strategy 3-3.1	Engage and partner with local law enforcement agencies, pharmacies, and physicians	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative		<u>Target Date</u> 1/1/2019			
Strategy 3-3.2	Assess current prescribing practices and protocols (Opioids and Benzodiazepines)	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative		<u>Target Date</u> 1/1/2019			
Strategy 3-3.3	Identify current networks and procedures in place to prevent prescription drug abuse and misuse prevention	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative		<u>Target Date</u> 1/1/2019			
Strategy 3-3.4	Identify opportunities to prevent misuse/abuse at the point of prescription	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative		<u>Target Date</u> 1/1/2019			
Strategy 3-3.5	Support and expand upon local regulation and prevention efforts of law enforcement agencies, pharmacies, and health care providers	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative		<u>Target Date</u> 1/1/2019			

Strategy 3-3.6	Increase outreach and education to increase perception of harm among youth <u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative	<u>Strategy Type</u> Counseling & Education <u>Target Date</u> 1/1/2019								
Strategy 3-3.7	Increase education on Count, Lock, and Disposal practices <u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 3-3.8	Increase outreach and education on identification and referral to treatment <u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative	<u>Strategy Type</u> Counseling & Education <u>Target Date</u> 1/1/2019								
Strategy 3-3.9	Ensure a support system is in place to ease the transition for individuals recovering from substance abuse issues following treatment <u>Who's Responsible</u> Cedar Rapids Police Department Heroin Initiative	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Target Date</u> 1/1/2019								
Objective 3-4	By January 1, 2019, reduce the percentage of adults and adolescents who currently use nicotine delivery products including cigars, cigarettes, smokeless tobacco, and electronic smoking devices by 2%	<table border="1"> <thead> <tr> <th>Baseline Year</th> <th>Baseline Value</th> <th>Target Year</th> <th>Target Value</th> </tr> </thead> <tbody> <tr> <td>2014</td> <td>Youth: Ecig=5%, Cigar=2%, Cigarette=3%</td> <td>2019</td> <td>Youth: Ecig=3%, Cigar=0%, Cigarette=1%</td> </tr> </tbody> </table>	Baseline Year	Baseline Value	Target Year	Target Value	2014	Youth: Ecig=5%, Cigar=2%, Cigarette=3%	2019	Youth: Ecig=3%, Cigar=0%, Cigarette=1%
Baseline Year	Baseline Value	Target Year	Target Value							
2014	Youth: Ecig=5%, Cigar=2%, Cigarette=3%	2019	Youth: Ecig=3%, Cigar=0%, Cigarette=1%							
Strategy 3-4.1	Identify the percentage of adults in Linn County who use electronic smoking devices <u>Who's Responsible</u> Area Substance Abuse Council	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Target Date</u> 1/1/2019								
Strategy 3-4.2	Promote evidence-based tobacco cessation strategies and outlets <u>Who's Responsible</u> Area Substance Abuse Council, Mercy	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Target Date</u> 1/1/2019								
Strategy 3-4.3	Work with school districts, colleges and worksites to improve campus regulation of nicotine use <u>Who's Responsible</u> Area Substance Abuse Council, Mercy	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 3-4.4	Partner with health care providers to increase tobacco screening in health care settings and referral to support services <u>Who's Responsible</u> Area Substance Abuse Council, Mercy	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Target Date</u> 1/1/2019								

Strategy 3-4.5	Develop a health communication and outreach plan to educate adolescents	<u>Strategy Type</u> Counseling & Education
	<u>Who's Responsible</u> Area Substance Abuse Council	<u>Target Date</u> 1/1/2019
Strategy 3-4.6	Investigate and assess policies that encourage a reduction in adolescent access to nicotine products and protect community members from unwanted exposure to second hand smoke and nicotine	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Area Substance Abuse Council, Cedar Rapids Wellbeing Committee	<u>Target Date</u> 1/1/2019
Strategy 3-4.7	Promote the adoption of relevant policies	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Area Substance Abuse Council	<u>Target Date</u> 1/1/2019
Strategy 3-4.8	Increase enforcement of regulations related to the access of electronic smoking devices among adolescents	<u>Strategy Type</u> Environmental / Policy / Systems Change
	<u>Who's Responsible</u> Area Substance Abuse Council	<u>Target Date</u> 1/1/2019

Community Priority

Health Promotion

Goal #1 Increase data sharing and effective use of technology among the local public health system in order to identify and address emerging health trends

National Alignment

Public Health Infrastructure - Data and Information Systems

State Alignment

Preparedness and Response - Technical and Communication Capacity

Objective 1-1	By July 1, 2016 the Together! Healthy Linn steering committee will approve an initial list of community health data and GIS mapping resources available within the local public health system	Baseline Year	Baseline Value	Target Year	Target Value
		2016	0% complete	2016	100% complete

Strategy 1-1.1 Engage community and GIS partners

Strategy Type
Clinical Intervention

Who's Responsible
Linn County Public Health, United Way

Target Date
7/1/2016

Strategy 1-1.2 Linn County Public Health will develop a draft of categorized data sources

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible
Linn County Public Health

Target Date
7/1/2016

Strategy 1-1.3 Subcommittee and community agencies will add sources to the list

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible
Together! Healthy Linn Health Promotion Subcommittee

Target Date
7/1/2016

Strategy 1-1.4 Steering committee will review list and identify additional data sources or data points

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible
Together! Healthy Linn Steering Committee

Target Date
7/1/2016

Objective 1-2	By January 1, 2017 a written process for data sharing among partners within the local public health system will be established	Baseline Year	Baseline Value	Target Year	Target Value
		2016	0% complete	2017	100% complete

Strategy 1-2.1 Create a data sharing document written by Linn County Attorney's office and shared among community partners

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible
Linn County Public Health

Target Date
1/1/2017

Strategy 1-2.2 Based on community health data list, create an initial roster of agencies that can provide data

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible
United Way, Linn County Public Health

Target Date
1/1/2017

Strategy 1-2.3	Draft written process for data sharing, which may be augmented by community partners to meet the legal needs of the partner <u>Who's Responsible</u> Together! Healthy Linn Health Promotion Subcommittee	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2017								
Objective 1-3	By January 1, 2019 community health data will be shared with community partners	<table border="1"> <thead> <tr> <th>Baseline Year</th> <th>Baseline Value</th> <th>Target Year</th> <th>Target Value</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>0%</td> <td>2019</td> <td>100%</td> </tr> </tbody> </table>	Baseline Year	Baseline Value	Target Year	Target Value	2016	0%	2019	100%
Baseline Year	Baseline Value	Target Year	Target Value							
2016	0%	2019	100%							
Strategy 1-3.1	Obtain signed data sharing documents from participating community partners <u>Who's Responsible</u> Linn County Public Health	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 1-3.2	Participating community partners will submit data to a centralized data hub at a specified time annually <u>Who's Responsible</u> Linn County Public Health	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 1-3.3	Data will be categorized by data type and level of confidentiality (confidential data may only be made available in aggregated form in order to protect private health information) <u>Who's Responsible</u> Linn County Public Health	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 1-3.4	All partners will identify significant emerging trends that need to be shared with all partners within the local public health system <u>Who's Responsible</u> Linn County Public Health	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 1-3.5	Disseminate relevant data to local elected bodies informing them of emerging trends <u>Who's Responsible</u> Linn County Public Health	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								

Goal #2 Decrease preventable diseases through health education in the community

Goal #2 Decrease preventable diseases through health education in the community	<u>National Alignment</u> Substance Abuse, Sexually Transmitted Diseases	<u>State Alignment</u> Addictive Behaviors, Acute Disease - Immunization and Infectious Disease
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Objective 2-1	By January 1, 2019 increase the number of people reached through substance abuse prevention education by 2%	<table border="1"> <thead> <tr> <th>Baseline Year</th> <th>Baseline Value</th> <th>Target Year</th> <th>Target Value</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>To be established</td> <td>2019</td> <td>2% increase</td> </tr> </tbody> </table>	Baseline Year	Baseline Value	Target Year	Target Value	2016	To be established	2019	2% increase
Baseline Year	Baseline Value	Target Year	Target Value							
2016	To be established	2019	2% increase							
Strategy 2-1.1	Collect data from Mercy, Unity Point, ASAC and district school systems for number of individuals reached through substance abuse education <u>Who's Responsible</u> ASAC, Cedar Rapids School District, Mercy, UnityPoint	<u>Strategy Type</u> Counseling & Education <u>Target Date</u> 1/1/2019								

Strategy 2-1.2	Identify barriers related to healthy decision making regarding substances <u>Who's Responsible</u> ASAC	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Target Date</u> 1/1/2019								
Strategy 2-1.3	Identify and assess current level of substance abuse education being provided across the community <u>Who's Responsible</u> ASAC	<u>Strategy Type</u> Counseling & Education <u>Target Date</u> 1/1/2019								
Strategy 2-1.4	Assess current substance use education and programming conducted across all school districts in Linn County <u>Who's Responsible</u> ASAC, Cedar Rapids School District	<u>Strategy Type</u> Counseling & Education <u>Target Date</u> 1/1/2019								
Strategy 2-1.5	Expand upon existing school based and community substance abuse education using evidence based curriculum <u>Who's Responsible</u> ASAC, Cedar Rapids School District	<u>Strategy Type</u> Clinical Intervention <u>Target Date</u> 1/1/2019								
Strategy 2-1.6	Provide education to the community regarding the current status of substance issues and how the issues may be prevented and addressed by targeted audiences (policy makers, healthcare and service providers, and community members) <u>Who's Responsible</u> ASAC	<u>Strategy Type</u> Environmental / Policy / Systems Change <u>Target Date</u> 1/1/2019								
Strategy 2-1.7	Implement social marketing campaigns <u>Who's Responsible</u> ASAC	<u>Strategy Type</u> Counseling & Education <u>Target Date</u> 1/1/2019								
Objective 2-2	By January 1, 2019 stabilize the positivity rate of Chlamydia, Syphilis, and HIV	<table border="1"> <thead> <tr> <th>Baseline Year</th> <th>Baseline Value</th> <th>Target Year</th> <th>Target Value</th> </tr> </thead> <tbody> <tr> <td>2014</td> <td>Chl=486, Syph=10.1, HIV 6.9 per 100,000 population</td> <td>2019</td> <td>Chl=486, Syph=10.1, HIV 6.9 per 100,000 population</td> </tr> </tbody> </table>	Baseline Year	Baseline Value	Target Year	Target Value	2014	Chl=486, Syph=10.1, HIV 6.9 per 100,000 population	2019	Chl=486, Syph=10.1, HIV 6.9 per 100,000 population
Baseline Year	Baseline Value	Target Year	Target Value							
2014	Chl=486, Syph=10.1, HIV 6.9 per 100,000 population	2019	Chl=486, Syph=10.1, HIV 6.9 per 100,000 population							
Strategy 2-2.1	Identify who is currently providing sexual health education and content <u>Who's Responsible</u> Cedar Rapids School District, Planned Parenthood, Linn County Public Health	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Target Date</u> 1/1/2019								

Strategy 2-2.2 Increase the number of organizations providing evidence based education on sexual health

Strategy Type
Counseling & Education

Who's Responsible

Cedar Rapids School District, Planned Parenthood, Linn County Public Health

Target Date

1/1/2019

Strategy 2-2.3 Implement social marketing campaigns to reduce stigma, increase awareness, and promote testing for sexually transmitted infections

Strategy Type
Counseling & Education

Who's Responsible

Planned Parenthood, Linn County Public Health

Target Date

1/1/2019

Strategy 2-2.4 Increase testing among high risk groups

Strategy Type
Clinical Intervention

Who's Responsible

Planned Parenthood, Linn County Public Health, Eastern Iowa Health Center

Target Date

1/1/2019

Goal #3 Decrease the incidence of chronic disease in Linn County

National Alignment

Nutrition and Weight Status, Physical Activity, Diabetes, Heart Disease and Stroke

State Alignment

Healthy Living - Nutrition and Food, Physical Activity, and Chronic Disease - Diabetes, Heart Disease and Stroke

Objective 3-1 By January 1, 2019 the percentage of residents who are overweight or obese will be stabilized

Baseline Year

2014

Baseline Value

Adults=68.6%
Child=49%

Target Year

2019

Target Value

Adults=68.6%
Child=49%

Strategy 3-1.1 Assess high risk populations

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

Linn County Public Health, Eastern Iowa Health Center

Target Date

1/1/2019

Strategy 3-1.2 Target high concentration areas of high risk groups for outreach opportunities

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

Linn County Public Health, Eastern Iowa Health Center

Target Date

1/1/2019

Strategy 3-1.3 Identify barriers for vulnerable population related to access of healthy foods and physical activity

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible

Linn County Public Health, Eastern Iowa Health Center

Target Date

1/1/2019

Strategy 3-1.4 Increase opportunities throughout the community to engage in physical activity based on assessment information and best practice methodology

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

Bike CR, Bike and Pedestrian Advisory Committee

Target Date

1/1/2019

Strategy 3-1.5	Increase the availability of affordable healthy foods	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Meals on Wheels, Feed Iowa First		<u>Target Date</u> 1/1/2019			
Strategy 3-1.6	Provide education on healthy food preparation	<u>Strategy Type</u> Clinical Intervention				
	<u>Who's Responsible</u> Feed Iowa First, Horizons		<u>Target Date</u> 1/1/2019			
Strategy 3-1.7	Educate and support healthcare providers within the school and health system in engaging in uncomfortable conversations with clients regarding weight management	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> UnityPoint, Mercy, Linn County Public Health, Cedar Rapids Schools, Eastern Iowa Health Center		<u>Target Date</u> 1/1/2019			
Strategy 3-1.8	Educate community partners (including elected bodies) for scope of issue and barriers	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> UnityPoint, Mercy, Linn County Public Health		<u>Target Date</u> 1/1/2019			
Strategy 3-1.9	Assess the current physical activity and healthy food practices in place in the school districts in Linn County	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> Linn County Public Health, Cedar Rapids Community Schools		<u>Target Date</u> 1/1/2019			
Strategy 3-1.10	Partner with school districts to expand upon current practices to align with best practice strategies to support healthy physical development	<u>Strategy Type</u> Long-Lasting Protective Intervention				
	<u>Who's Responsible</u> UnityPoint, Mercy, Linn County Public Health, Cedar Rapids Schools		<u>Target Date</u> 1/1/2019			
Strategy 3-1.11	Investigate and assess policies that support healthy living	<u>Strategy Type</u> Environmental / Policy / Systems Change				
	<u>Who's Responsible</u> Linn County Public Health		<u>Target Date</u> 1/1/2019			
Objective 3-2	By January 1, 2019 the percentage of adults with type 2 diabetes will be stabilized					
		Baseline Year	Baseline Value	Target Year	Target Value	
		2014	9.9%	2019	9.9%	
Strategy 3-2.1	Identify and assess current diabetes education and outreach services provided in the county	<u>Strategy Type</u> Counseling & Education				
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA		<u>Target Date</u> 1/1/2019			

Strategy 3-2.2	Conduct a comprehensive community assessment to identify those with diabetes and those at a higher risk for developing diabetes	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA <u>Target Date</u> 1/1/2019								
Strategy 3-2.3	Identify barriers for vulnerable populations to access and obtain diabetes education, medications, and management assistance	<u>Strategy Type</u> Clinical Intervention <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA <u>Target Date</u> 1/1/2019								
Strategy 3-2.4	Conduct outreach services to provide diabetes education (living with diabetes, using medication properly, and diet) to diabetics and their support system (Families, Friends, Worksites, etc.)	<u>Strategy Type</u> Clinical Intervention <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA <u>Target Date</u> 1/1/2019								
Strategy 3-2.5	Conduct targeted A1C screenings to support current diabetics and identify at-risk individuals and those who are unaware of their diabetic status	<u>Strategy Type</u> Clinical Intervention <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA <u>Target Date</u> 1/1/2019								
Strategy 3-2.6	Provide education on healthy diabetic friendly food preparation	<u>Strategy Type</u> Counseling & Education <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, YMCA <u>Target Date</u> 1/1/2019								
Strategy 3-2.7	Work with providers to improve early identification and referral of at-risk patients (pre-diabetic)	<u>Strategy Type</u> Clinical Intervention <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA <u>Target Date</u> 1/1/2019								
Strategy 3-2.8	Educate providers and pharmacists on support services available to help patients remove barriers to diabetes management	<u>Strategy Type</u> Long-Lasting Protective Intervention <u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center, YMCA <u>Target Date</u> 1/1/2019								
Objective 3-3	By January 1, 2019 the mortality rate attributed to heart disease and stroke among adults will be stabilized	<table border="1"> <thead> <tr> <th>Baseline Year</th> <th>Baseline Value</th> <th>Target Year</th> <th>Target Value</th> </tr> </thead> <tbody> <tr> <td>2014</td> <td>405 per 100,000</td> <td>2019</td> <td>405 per 100,000</td> </tr> </tbody> </table>	Baseline Year	Baseline Value	Target Year	Target Value	2014	405 per 100,000	2019	405 per 100,000
Baseline Year	Baseline Value	Target Year	Target Value							
2014	405 per 100,000	2019	405 per 100,000							

Strategy 3-3.1	Implement a community awareness campaign	<u>Strategy Type</u> Counseling & Education
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy	<u>Target Date</u> 1/1/2019
Strategy 3-3.2	Identify and assess current heart disease and stroke education provided in the county	<u>Strategy Type</u> Counseling & Education
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center	<u>Target Date</u> 1/1/2019
Strategy 3-3.3	Support and enhance current heart disease and stroke programs that prevent risk factors (high blood pressure, high blood cholesterol, tobacco use, physical inactivity, and poor nutrition)	<u>Strategy Type</u> Long-Lasting Protective Intervention
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center	<u>Target Date</u> 1/1/2019
Strategy 3-3.4	Partner with school districts to expand upon current practices to align with best practice strategies to support healthy physical development	<u>Strategy Type</u> Long-Lasting Protective Intervention
	<u>Who's Responsible</u> Cedar Rapids School District	<u>Target Date</u> 1/1/2019
Strategy 3-3.5	Identify barriers for vulnerable populations to access and obtain heart disease/stroke prevention education, medications, and management assistance	<u>Strategy Type</u> Clinical Intervention
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center	<u>Target Date</u> 1/1/2019
Strategy 3-3.6	Conduct outreach services to provide additional opportunities for blood pressure and cholesterol screening among at-risk populations	<u>Strategy Type</u> Clinical Intervention
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center	<u>Target Date</u> 1/1/2019
Strategy 3-3.7	Work with providers to improve early identification and referral of at-risk patients (pre-hypertensive, poor diet, etc.)	<u>Strategy Type</u> Clinical Intervention
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center	<u>Target Date</u> 1/1/2019
Strategy 3-3.8	Educate providers and pharmacists on support services available to help patients remove barriers to medication management	<u>Strategy Type</u> Clinical Intervention
	<u>Who's Responsible</u> Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center	<u>Target Date</u> 1/1/2019

Strategy 3-3.9 Promote tobacco cessation services

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Linn County Public Health, UnityPoint, Mercy, Eastern Iowa Health Center,
ASAC

Target Date

1/1/2019

Strategy 3-3.10 Work with local hospitals to ensure the availability of the latest treatment advances in stroke care

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Linn County Public Health, UnityPoint, Mercy

Target Date

1/1/2019

Strategy 3-3.11 Work with local employers to promote healthy worksites

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Iowa State Extension, Linn County Public Health, Cedar Rapids Community
Schools

Target Date

1/1/2019

Strategy 3-3.12 Work with local employers to ensure the availability of automatic external defibrillators and training of staff on how to use the device

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Linn County Public Health, Cedar Rapids Community Schools

Target Date

1/1/2019