BAKER COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

A plan for improving the health and well-being of Baker County residents.

Prepared by the Health Planning Council of Northeast Florida, Inc.
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ACKNOWLEDGEMENTS

The Florida Department of Health-Baker County and the Health Planning Council of Northeast Florida would like to extend gratitude to the organizations and individuals that dedicated their valuable time to complete this Community Health Improvement Plan. Thanks to their efforts Baker County is on the path to improving the health and well-being of its citizens.

- Baker County Press
- Baker County School Board
- Baker County Sheriff’s Office
- Baker Prevention Coalition
- Children’s Home Society
- City of Macclenny
- Community Hospice
- Ed Fraser Memorial Hospital
- Episcopal Children’s Services
- Faith-based Organizations
- First Coast Women’s Services
- Healthy Baker
- Healthy Families
- Hometown Journal
- Hubbard House
- Humana
- Nassau/Baker WIC
- Northeast Florida Area Health Education Centers (AHEC)
- Northeast Florida Healthy Start Coalition
- Northeast Florida State Hospital
- Women’s Center of Jacksonville
- YMCA
With guidance from the Health Planning Council of Northeast Florida (HPCNEF), Healthy Baker and the Florida Department of Health in Baker County (FDOH-Baker) developed this Community Health Improvement Plan (CHIP) as part of ongoing efforts to improve health in Baker County.

FDOH-Baker in partnership with ERCEGI, a nonprofit research and development organization, championed a Community Health Assessment (CHA) to identify and prioritize health issues in Baker County, utilizing a hybrid planning model - Mobilizing for Action through Planning and Partnerships (MAPP) Framework from the National Association of County & City Health Officials (NACCHO) and a grassroots mobilization campaign designed by ERCEGI. The CHA uses quantitative (e.g., disease incidence rates and mortality rates) and qualitative data (e.g., community input) to assess the health status of the community and determine which health issues will be the focus of health planning efforts for the next three to five years.

FDOH-Baker, with guidance and input from Healthy Baker and the community, decided the CHIP would focus on the following priority health issues after reviewing and discussing the data collected via the CHA:

- **Healthy Lifestyle & Behaviors** including obesity and related chronic diseases (e.g., diabetes and cancer), HPV vaccination, and tobacco and other substance use
- **Maternal & Child Health** including infant mortality and teen pregnancy
- **Public Safety** including unintentional injury, car seat usage, and water safety awareness

The purpose of the community health improvement planning process is to create goals, objectives, and strategies targeting the priority health issues identified in the CHA. To improve implementation and evaluation of the goals in this plan, Healthy Baker decided to utilize a balanced scorecard approach, which identifies goals, objectives, and strategies and sets measurable targets to move the community health improvement process forward.

The targets and measures outlined in the CHIP Action Plans at the end of this document were carefully selected through intensive workgroups with FDOH-Baker leadership and a workgroup with Healthy Baker that discussed all health issues. Many of the targets align with the national Healthy People 2020 initiative and with goals and objectives from the Florida State Health Improvement Plan. These national and statewide initiatives provide evidence-based benchmarks to track and monitor health, as well as best practices to guide health promotion and disease prevention efforts, which will ultimately help improve health outcomes in Baker County.

During the next steps of the MAPP health planning cycle, Healthy Baker and FDOH-Baker will continue to work together to address the three priority health issues outlined above. Healthy Baker and FDOH-Baker will plan for action, implement strategies, and evaluate progress. As a living document, the **2017 Baker County Community Health Improvement Plan** is flexible and can accommodate changes or updates as needed. Healthy Baker will re-assess and update the CHIP both quarterly and annually to best address the needs of the local community.
The creation of the Community Health Improvement Plan (CHIP) for Baker County serves as a reminder for how the collaboration between government officials, community leaders, public health professionals, and community advocates, as well as many other Baker County participants, can build public health infrastructure, aid and guide planning, and ultimately improve the health outcomes of Baker County. There are several suggested ways to use this CHIP to improve the well-being and quality of life for the Baker County community:

**Community Resident**
- Use this CHIP to compare your individual health with Baker County’s community health data
- Be an advocate in the community to support healthy lifestyles and behaviors
- Volunteer! Share your resources, time, or funding with your community
- Understand the top health priorities facing Baker County

**Health Care Professional**
- Understand the top health priorities facing Baker County
- Inform your patients/clients of community resources listed in the CHIP
- Be a resource for the community whether it be expertise, funding, time, or support

**Faith-based Organization**
- Understand the top health priorities facing Baker County
- Use this plan to improve the overall health (mind, body, and spirit) of your community
- Identify opportunities for your community or members to support, encourage, or participate with CHIP-related activities

**Government Official**
- Understand the top health priorities facing Baker County
- Participate in community efforts as laid out in the CHIP strategies
- Engage with other government officials to inform and promote your community’s health

**Educators**
- Understand the top health priorities facing Baker County
- Be a resource for the community whether it be expertise, funding, time, or support
- Engage the support of leaders, teachers, students, and parents

**Public Health Professionals**
- Understand the top health priorities facing Baker County
- Recognize how the Baker County community compares with peer counties, Florida, and the U.S. population as a whole
- Be a resource for the community whether it be expertise, funding, time, or support

**Employers**
- Understand the top health priorities facing Baker County
- Educate your team/staff on the importance of employee wellness and productivity
FDOH-Baker maintains strong relationships with multiple health and social services providers throughout the community. With aid from these partners as well as Healthy Baker and ECERGI, a nonprofit research and development organization, the 2015 Baker County Health Assessment (CHA) was created. The CHA results from a collaborative, systematic process to collect, analyze, interpret and use data to inform and mobilize communities, develop priorities, gather resources, and create a plan of action to improve the public’s health. The CHA process is the foundation for improving and promoting the health of Baker County’s residents. The information contained in this report collectively contributes to a comprehensive view of the health and quality of life of Baker County residents.

The Baker County CHA was launched in October 2014. The CHA used a hybrid planning model – the Mobilizing for Action through Planning and Partnerships (MAPP) Framework from the National Association of County & City Health Officials (NACCHO) and a grassroots mobilization campaign designed by ERCEGI. A MAPP Committee, known as the CHA Advisory Team, was formed by recruiting members from Healthy Baker, Inc. and included the quality assurance team from FDOH-Baker, an ERCEGI wellbeing and resiliency consultant, representatives from Ed Fraser Memorial Hospital, Humana, St. Johns River Rural Health Network, and Baker County Family YMCA.

Primary source data were collected through June 2015, while secondary data analysis, focus groups, and key informant interviews were conducted July through August. Data were presented to Healthy Baker in September, and community feedback was incorporated into the final report in November 2015. All of the processes and strategies were designed and monitored by the CHA Advisory Team.

The CHA identifies priority health and quality of life issues through extensive data reviews via both primary and secondary data collection and analysis, with input from Healthy Baker and community members. Questions answered by the assessment include:

- How healthy are our residents?
- What does the health status of our county look like?
- What strengths and opportunities exist to make Baker County a healthy community?
- What can we do to improve the resources in our community?

The MAPP Process
The CHA Advisory Team created the Community Health Assessment using the Mobilizing for Action through Planning and Partnerships (MAPP) process, developed by the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control (CDC), along with a grassroots mobilization campaign. MAPP is a community-driven, participatory process intended to bring together not only health care providers, but also mental health and social service agencies, public safety agencies, education and youth development organizations, recreation agencies, local governments, neighborhood associations, and civic groups to improve community health. By participating in the MAPP process, community stakeholders gain a greater awareness of their community and local health issues.

2 ERCEGI. (2015). Baker County Community Health Assessment (CHA).
MAPP Assessment

The MAPP process consists of four major assessments:

1. The **Forces of Change Assessment** identifies forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate.

2. The **Local Public Health System Assessment** focuses on all of the organizations and entities that contribute to the public’s health. The LPHSA answers the question, “What are the components, activities, competencies, and capacities of our local public health system?”

3. The **Community Themes and Strengths Assessment** provides an understanding of the health issues that residents feel are important, including quality of life.

4. The **Community Health Status Assessment** identifies priority community health and quality of life issues. Questions answered here include, “How healthy are our residents?” and “What does the health status of our community look like?”

The 2015 Baker County CHA incorporated two of the four MAPP assessments. Detailed information on the MAPP assessments can be found in the **2015 Baker County Community Health Assessment**, which is available on the Florida Department of Health in Baker County’s website at [http://Baker.floridahealth.gov/](http://Baker.floridahealth.gov/). A brief summary of each assessment is provided below.
Community Strengths & Themes Assessment

The Community Strengths and Themes Assessment generates direct feedback from community residents regarding observations of their own health, community health, and access to healthcare services. Themes and issues identified during this phase often offer insight into information discovered through other MAPP assessments.

Community surveys, community focus groups and data analysis provided the information needed to complete the Community Strengths and Themes Assessment. The CHA Advisory Team conducted two focus groups, one key informant group interview, one Town Hall meeting, and a community survey with the cooperation of FDOH-Baker. The CHA Advisory Team monitored community participation by population demographics and socioeconomic indicators. Percentage of population by age, gender, race, socioeconomic status, and geographic distribution were matched with the 2010 Census Data by leveraging partners who solicited survey participation from each of these demographic groups. A total of 1033 community members participated in the Baker County CHA. Participants were asked questions related to factors that contribute to 1) health status, 2) health issues, and 3) community resources. The findings provided qualitative information, revealing community sentiments regarding health status and services in Baker County.

Participant Demographics

Key leaders played a significant role in obtaining community participation in the Community Health Assessment. 52% of the participants were engaged by key individual and organizational stakeholders, while 38% came directly from FDOH-Baker. Of the 1,033 participants, 77% were female and 23% male. The age distribution was as follows: nearly 1% were under the age of 14, 1% were between the ages 14 and 18, over 6% were 19 to 24 years old, 66% were 25 to 55 years old, 17% were 56 to 65 years old, and over 9% were in the 66+ age group.

Community Health Status Assessment

According to the Florida MAPP Field Guide, the Community Health Status Assessment is intended to answer the questions:

- “How healthy are our residents?”
- “What does the health status of our community look like?”
- “What are the strengths and risks in our community that contribute to health?”

To answer these questions, HPCNEF staff reviewed the Baker County CHA and collected, analyzed, and reviewed additional secondary data describing population health in Baker County. When possible, data were compared to other known time periods and/or geographies.

How Does Baker County Compare?

County Health Rankings

County Health Rankings & Roadmaps, produced by the University of Wisconsin and Robert Wood Johnson Foundation, are a collection of reports that illustrate the overall health of counties in every state across the country and provide a comparison of counties within the same state. Two major

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4 Mobilizing for Action through Planning and Partnerships, Achieving Healthier Communities through MAPP: A User’s Handbook. Washington, DC.
categories exist for County Health Rankings: health outcomes and health factors. Health outcomes are measures that describe the current health status of a county. These health outcomes are influenced by a set of health factors. Health factors and their subsequent outcomes may be affected by community-based programs and policies designed to alter their distribution in the community. Counties can improve health outcomes by addressing all health factors with evidence-based programs and policies.5

The report ranks Florida counties according to their summary measures of health outcomes and health factors, as well as the components used to create each summary measure. Outcomes rankings are based on an equal weighting of mortality and morbidity measures. The summary health factors rankings are based on weighted scores of four types of factors: behavioral, clinical, social and economic, and environmental.

In 2017, Baker County ranked 39th out of the 67 Florida counties in health outcomes (which look at length of life and quality of life) and 44th of 67 counties in health factors. There were significant differences, however, when examining the individual rankings for each of the four topics considered for the health factors score. Health factors include health behaviors (ranked 62nd), clinical care (ranked 44th), social and economic factors (ranked 24th), and physical environment (ranked 35th). Figure 3 lists the four topics, along with the types of indicators included within each, and the corresponding rank for Baker County.

Figure 3. Baker County Health Factors Rankings, 2017

<table>
<thead>
<tr>
<th>HEALTH BEHAVIORS</th>
<th>CLINICAL CARE</th>
<th>SOCIO-ECONOMIC</th>
<th>PHYSICAL ENVIRONMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco</td>
<td>Access to Care</td>
<td>Education</td>
<td>Air Quality</td>
</tr>
<tr>
<td>Diet and Exercise</td>
<td>Quality of Care</td>
<td>Employment</td>
<td>Built Environment</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td></td>
<td>Income</td>
<td>Access to Healthy Food</td>
</tr>
<tr>
<td>High-Risk Sex</td>
<td></td>
<td>Family/Social Support</td>
<td>Liquor Stores</td>
</tr>
</tbody>
</table>


Leading Causes of Death in Baker County
Mortality rates are key indicators of the state of health of a community. Figure 4 shows the top nine causes of death in Baker County and the state of Florida. Cancer, heart disease, and chronic lower respiratory disease (CLRD) are the leading killers in Baker County. Baker has significantly higher mortality rates for chronic lower respiratory disease (71.4 versus 39.3 deaths per 100,000 population) and unintentional injury (61.3 versus 46.2 deaths per 100,000 population) than the Florida average.

Identifying Priority Health Issues

Top Health Issues Identified by Focus Groups

During the Baker Community Health Assessment process, community members and stakeholders participated in focus groups to provide community feedback related to health and healthcare issues. Participants identified the following issues when asked “What are the most significant health status concerns or unhealthy behaviors in this community?”

- Healthy lifestyle/behaviors (lack of physical activity, unhealthy diet/nutrition, obesity, diabetes, substance abuse/tobacco use for all ages)
- Teen pregnancy
- Youth mental health in the schools
- Poverty
- Transportation

Health Priorities Identified by FDOH-Baker and Healthy Baker

To select health priorities, FDOH-Baker and Healthy Baker reviewed key findings from the Baker County Community Health Assessment, discussing quantitative data (e.g., disease mortality rates, health behaviors, factors in the physical environment, quality of life indicators) and health issues identified through community input, such as the community survey. FDOH-Baker leadership met for two intensive workgroup sessions. In these sessions, leadership performed a first review of the data presented in the CHA and through other sources, and narrowed the focus of the Community Health Improvement Plan (CHIP) to three priority health issues: Healthy Lifestyle and Behaviors, Maternal and Child Health, and Public Safety. The three priority health issues and pertinent data were presented to the Healthy Baker
group in a meeting on June 12, 2017. Healthy Baker was asked for feedback on the issues via questions such as:

- “Are the health priority issues outlined important to the Baker County community?”
- “Do these health issues affect a large percentage of the Baker County population?”
- “Are the strategies for the health priority areas suitable?”

Healthy Baker members were given the opportunity to provide feedback verbally during the meeting, or via answering a printed questionnaire. No feedback was received via the written questionnaire, though feedback was provided verbally. Overall, Healthy Baker members agreed with FDOH-Baker that the three priority issues listed below were important and appropriate for Baker County to target for improvement in the CHIP:

- **Healthy Lifestyle & Behaviors** including obesity and related chronic diseases (e.g., diabetes and cancer), HPV vaccination, and tobacco and other substance use
- **Maternal & Child Health** including infant mortality and teen pregnancy
- **Public Safety** including unintentional injury, car seat usage, and water safety awareness

The following section of this plan – the Description of Priority Health Issues – highlights some of the data that led to the decision to focus on the above health issues.
**DESCRIPTION OF PRIORITY HEALTH ISSUES**

**Healthy Lifestyle and Behaviors**

Unhealthy lifestyle and behavior such as poor diet, inactivity, tobacco use, and excessive alcohol use are lead contributors to the development of heart disease, cancer, and stroke, all of which are leading causes of death in Baker County, with rates of these diseases meeting or exceeding the state average. The Healthy Lifestyle and Behaviors priority health issue focuses on reducing obesity and chronic disease in children and adults by promoting healthy lifestyle choices and reducing illness, disability, and death related to tobacco and other substance use.

**Obesity & Physical Activity**

According to the CDC, more than one-third (about 35%) of U.S. adults are obese. Understanding the cause of obesity is difficult because there are many contributing factors, including behavior (e.g., dietary habits and physical activity), exposures or genetics, the built environment, or education. Obesity is strongly linked to many of the leading causes of death in the world – heart disease, cancer, and stroke – and has a large financial toll on the healthcare system. Only 38% of Baker County residents report that they meet moderate physical activity recommendations. Physical activity indicators from the Behavioral Risk Factor Surveillance System (BRFSS), the nation’s system of health-related phone surveys, are below.

**Figure 5. Behavioral Risk Factor Surveillance System Indicators Related to Obesity/Physical Activity, 2013**

<table>
<thead>
<tr>
<th>Obesity &amp; Physical Activity</th>
<th>Baker</th>
<th>Florida</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults who meet moderate physical activity recommendations</td>
<td>38.2%</td>
<td>34.6%</td>
</tr>
<tr>
<td>Adults who meet vigorous physical activity recommendations</td>
<td>22.4%</td>
<td>26.0%</td>
</tr>
<tr>
<td>Adult who meet muscle strengthening recommendations</td>
<td>22.0%</td>
<td>29.6%</td>
</tr>
<tr>
<td>Adults with good physical health</td>
<td>85.3%</td>
<td>85.9%</td>
</tr>
</tbody>
</table>


**Nutrition & the Food Environment**

In Baker County, only 4.5% of the population lived within ½ mile of a healthy food source in 2013, compared to 32% of Floridians. According to BRFSS, only 19.3% of individuals in Baker County are getting the recommended 5 servings of fruits and vegetables per day, possibly explaining the top 3 conditions according to community survey results in the county- high blood pressure/ cholesterol, asthma and diabetes. Nutrition BRFSS indicators are below:

**Figure 6. Behavioral Risk Factor Surveillance System Indicators Related to Nutrition, 2013**

<table>
<thead>
<tr>
<th>Nutrition</th>
<th>Baker</th>
<th>Florida</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults who consumed 5 or more servings of fruits or vegetables per day</td>
<td>19.30%</td>
<td>18.30%</td>
</tr>
<tr>
<td>Adults who consumed 3 or more servings of vegetables per day</td>
<td>9.80%</td>
<td>17%</td>
</tr>
<tr>
<td>Adults who consumed 2 or more servings of fruit per day</td>
<td>27.20%</td>
<td>32.00%</td>
</tr>
</tbody>
</table>


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8 Baker County Community Health Assessment. (2015).
Tobacco Use

Tobacco is the largest cause of preventable morbidity and mortality in the United States.\(^9\) Approximately 18.2% of adults in Baker County were current smokers in 2013, greater than the state rate of 16.8%. BRFSS findings related to tobacco use are presented in Figure 7.

**Figure 7. Behavioral Risk Factor Surveillance System Indicators Related to Tobacco Use, 2013**

<table>
<thead>
<tr>
<th>Tobacco Use</th>
<th>Baker</th>
<th>Florida</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult current smokers who tried to quit smoking at least once in the past year</td>
<td>69.3%</td>
<td>61.1%</td>
</tr>
<tr>
<td>Adults who are current smokers</td>
<td>18.2%</td>
<td>16.8%</td>
</tr>
<tr>
<td>Adults who are formers smokers (currently quit smoking)</td>
<td>35.3%</td>
<td>28.1%</td>
</tr>
<tr>
<td>Adults who have never smoked</td>
<td>46.4%</td>
<td>55.0%</td>
</tr>
</tbody>
</table>


Chronic Lower Respiratory Disease

In 2013, chronic lower respiratory disease (CLRD) was the third leading cause of death in the United States. Fifteen million Americans reported having chronic obstructive pulmonary disease (COPD), a group of diseases that cause breathing-related problems including emphysema, chronic bronchitis, and some cases of asthma. Tobacco use is a key risk factor for the development of COPD, but exposure to air pollutants in the home/workplace, secondhand smoke, genetic factors, and respiratory infections are also causes.\(^{10}\)

Baker County has significantly higher chronic lower respiratory disease (CLRD) mortality rates than the state of Florida, doubling the state rate in 2005-08 through 2008-10 (Figure 8). Baker’s CLRD mortality rate remained high from 2013-15 at 66.7 deaths per 100,000 population.

**Figure 8. Chronic Lower Respiratory Disease Mortality Rate, All Races/ Ethnicities, 2003-2015**


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Lung Cancer

More people die from lung cancer than any other cancer in the United States. The CDC suggests smoking is the number one predictor for the development of lung cancer; cigarette smoking causes about 90% of lung cancer deaths.\(^{11}\) Figure 9 shows the lung cancer mortality rate for Baker County and Florida. Baker County has a greater mortality rate due to lung cancer than the Florida average, though there has been a decline in recent years.

![Figure 9. Lung Cancer Mortality Rate, All Races/Ethnicities, 2003-2015](image)


Maternal and Child Health

The health of mothers and their children is vital to creating a healthy world. Each year in the United States more than 600 women die from pregnancy related causes.\(^{12}\) The Maternal and Child Health priority area focuses on improving maternal and child health through health education and prevention strategies.

Infant Mortality

An estimated 4.5 million infants died worldwide in 2015.\(^{13}\) Infant mortality refers to the loss of a baby before their first birthday and is a key measure of population health. Pregnancy outcomes are influenced by a woman’s health and differ by factors such as race, ethnicity, age, location, health care access, education, and income.\(^{14}\) Figure 10 shows the infant mortality rate for Baker County and Florida from 2003-2015. The infant mortality rate in Baker County has been higher than the Florida average over the years.

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past decade, with a mortality rate of 10.5 infant deaths per 1,000 live births in Baker County from 2013-2015.

**Figure 10. Infant Mortality Rate (Per 1,000 Live Births), All Races/Ethnicities, 2003-2015**


**Teen Pregnancy**

In 2010, teen pregnancy and childbirth accounted for at least $443 million in cost to Florida taxpayers and $9.4 billion in costs to U.S. taxpayers (federal, state, and local) for increased health care and foster care, increased incarceration rates among children of teen parents, and lost tax revenue because of lower educational attainment and income among teen mothers.\(^\text{15}\) Baker County’s teen pregnancy rate (births to mothers ages 15-19) is almost double the Florida average (Figure 11).

**Figure 11. Births by Mothers Age, Ages 15-19, 3-Year Rolling Rates, 2003-2015**


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\(^{15}\) National Campaign to Prevent Teen and Unplanned Pregnancy, Counting It Up: The Public Costs of Teen Childbearing 2013.
Public Safety

Unintentional injuries are a leading cause of morbidity and mortality among adults and children in the United States. Unintentional injury affects all age groups. The leading cause of unintentional injury deaths by age group are drowning (ages 1-4), motor vehicle accidents (ages 5-24), poisoning (ages 25-64), and falls (ages 65+). Each year, among those 0 to 19 years of age, more than 12,000 people die from unintentional injuries and more than 9.2 million are treated in emergency departments for nonfatal injuries.¹⁶

Unintentional injury is the 4th leading cause of death in Baker (and the U.S.).¹⁷ There were 46 deaths per 100,000 population in Baker County from 2013-2015, compared to 42.1 deaths in Florida (Figure 12).

Figure 12. Unintentional Injury Death Rate (3-year Rolling Rate), 2003-2015


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The strategic focus of health planning in the community for the next three to five years is determined in Phases 1-4 of the Mobilizing for Action through Planning and Partnerships (MAPP) process. Phases 1-4 of MAPP involve collecting and analyzing data and gathering community input in order to determine a community’s priority health issues. A CHIP is formulated primarily in Phases 5) Goals & Strategies and 6) Action Cycle of the MAPP process. In Phase 5, the community formulates broad goal statements addressing the previously identified health issues, as well as more specific strategies related to each goal. Phase 6 involves planning, implementation, and evaluation. During Phase 6, the community creates an action plan which provides details on how goals and strategies will be achieved.

FDOH-Baker leadership met for two intensive workgroup sessions to identify three priority health issues that would become the focus of the Baker CHIP, and to create a draft of the CHIP Action Plans for each health issue. In the first workgroup session, leadership performed a review of the data from the Baker CHA, community surveys, and other sources, and narrowed the focus of the CHIP to the following priority health issues: Healthy Lifestyle and Behaviors, Maternal and Child Health, and Public Safety. The Health Planning Council of Northeast Florida (HPCNEF) facilitated a discussion of the purpose of strategic planning and the creation of goals, objectives, and strategies. HPCNEF provided example goals, objectives, and strategies, and guided the FDOH-Baker leadership through the process of goal creation for each health issue.

In a second workgroup session, DOH-Baker leadership developed objectives for each goal as well as strategies for each objective. In addition to generating strategies that could be used to achieve each goal, leadership brainstormed and described potential resources, lead persons/organizations, measures for tracking progress of a strategy, current performance levels, and targets for each strategy that are detailed in the CHIP Action Plans included at the end of this document.

Pertinent data for the three priority health issues, along with a draft of the CHIP Action Plans, were presented to the Healthy Baker group in a meeting on June 12, 2017. Healthy Baker was asked for feedback on the priority health issues and action plans, via questions such as:

- “Are the health priority issues outlined important to the Baker County community?”
- “Do these health issues affect a large percentage of the Baker County population?”
- “Are the strategies for the health priority areas suitable?”

Healthy Baker members were given the opportunity to provide feedback verbally during the meeting, or via answering a printed questionnaire. No feedback was received via the written questionnaire, though feedback was provided verbally. Overall, Healthy Baker members felt that the three priority issues listed below were important and appropriate for the Baker community to target for improvement in the CHIP:

- **Healthy Lifestyle & Behaviors** including obesity and related chronic diseases (e.g., diabetes and cancer), HPV vaccination, and tobacco and other substance use
- **Maternal & Child Health** including infant mortality and teen pregnancy
- **Public Safety** including unintentional injury, car seat usage, and water safety awareness
Healthy Baker also provided feedback on the CHIP Action Plans at the June 2017 meeting. Specifically, Healthy Baker members made suggestions regarding strategies, resources, and lead entities under the following objectives: adult healthy weight, HPC vaccination, adult tobacco use, infant mortality, teen birth rate, and unintentional injury. Where possible, the suggestions of Healthy Baker members were incorporated into the CHIP Action Plans. Some suggestions were not incorporated due to resource constraints, lack of an appropriate lead entity, duplication of work (i.e. another entity was already working on the strategy), or a lack of data to measure the strategy.

The goal of the CHIP is to not only outline health issues, future action steps, and strategies to improve the health of Baker County, but also to align with existing local, state, and national objectives, programs, projects, and organizations. Efforts were made to align Baker County with state and national objectives by referring to the Florida State Health Improvement Plan and the Healthy People 2020 initiative. Baker County also aligned their strategic issues with existing local programs and projects when possible. Alignment is illustrated in the CHIP Action Plans, using the symbols below:

■ This symbol represents alignment with the national Healthy People 2020 initiative.
▲ This symbol represents alignment with the Florida State Health Improvement Plan.
APPENDIX A. BAKER CHIP ACTION PLANS
## Health Issue Priority: Healthy Lifestyle & Behaviors

**Goal:** Reduce obesity and chronic disease in children and adults to enhance quality of life by promoting healthy lifestyle choices. (■)

**Objective:** Increase the percent of Baker **adults** who are at a **healthy weight** from 29.4% in 2013 to 30% by December 31, 2020. (■)

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Resources</th>
<th>Lead Entity</th>
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<th>Target</th>
</tr>
</thead>
</table>
| Continue to provide Nutrition class, and track the number of clients that attend classes to establish a baseline. Monitor BMI if applicable. | • Centers for Disease Control and Prevention (CDC) Curriculum  
• Health Department-Health Education BMI machine  
• My Plate curriculum  
• Health Educator  
• Community partners referring clients to nutrition classes  
• Women, Infants, and Children (WIC) | FDOH-Baker County | # of classes per year  
Baseline established | 2  | 2 |
| Produce and distribute “Keeping Baker Healthy” Newsletter quarterly.       | • Health Educator  
• Baker County School Board  
• School Health Coordinator  
• CDC, Florida Dept. of Health (state), various accredited information materials | FDOH-Baker County | # of times per year newsletter is distributed | 2  | 4 |
| Increase awareness of healthy weight activities (walking group, one-on-one lifestyle support services, nutrition group, Silver Sneakers, 5K walk/run, Healthy Eating Everyday Workshop) via communication and advertisement. | • Healthy Baker  
• Local newspapers  
• Baker County School Board  
• Ed Fraser Hospital  
• NE Florida State Hospital  
• FDOH-Baker County electronic sign  
• Community Health Fairs  
• Northeast FL Area Health Education Centers (AHEC) | FDOH-Baker County  
YMCA | # of times per year | 5  | 2 |

■ Represents alignment with the National Healthy People 2020 initiative  
▲ Represents alignment with the Florida State Health Improvement Plan
**Health Issue Priority: Healthy Lifestyle & Behaviors**

<table>
<thead>
<tr>
<th>Strategies</th>
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</tr>
</thead>
</table>
| Distribute Keeping Baker Healthy Newsletter to high school via school website. | • Health Educator  
• Baker County School Board  
• School Health Coordinator  
• Centers for Disease Control (CDC), Florida Dept. of Health (state), various accredited information materials | • FDOH-Baker County  
• Baker County School Board | # of times per year | 0 | 2 |
| Introduce 5210 to middle school during 16/17 school year. | • FDOH-Baker County School Health Coordinator  
• Baker County School Board  
• Health Educator | • FDOH-Baker County | # of times per year | 1 | 1 |
| Provide 5210 to middle school during 17/18 school year through health education classes. | • FDOH-Baker County School Health Coordinator  
• Baker County School Board  
• Health Educator/Healthiest Weight | • FDOH-Baker County  
• Baker County School Board | # of times per year | 0 | 1 |

■ Represents alignment with the National Healthy People 2020 initiative  
▲ Represents alignment with the Florida State Health Improvement Plan
# Health Issue Priority: Healthy Lifestyle & Behaviors

**Goal:** Reduce obesity and chronic disease in children and adults to enhance quality of life by promoting healthy lifestyle choices. (■)

**Objective:** Decrease the age-adjusted death rate for **diabetes** from 22.2 deaths in 2013-15 to 21.2 deaths per 100,000 by December 31, 2020. (■)

<table>
<thead>
<tr>
<th>Strategies</th>
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<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide at least 3 Diabetes Self-Management Education classes (DSME) per year.</td>
<td>• American Diabetes Association (ADA) Curriculum  • Registered Nurse Certified Diabetic Educator  • Certified Diabetic Educator Dietitian  • Community partners for referrals to class</td>
<td>• FDOH-Baker County</td>
<td># of times per year</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Track the number of annual health screenings/fairs.</td>
<td>• Community partners  • Baker County School Board  • State and local government  • Faith-based organizations  • Baker Sherriff’s Office</td>
<td>• FDOH-Baker County</td>
<td># of times per year</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

■ Represents alignment with the National Healthy People 2020 initiative  ▲ Represents alignment with the Florida State Health Improvement Plan
## Health Issue Priority: Healthy Lifestyle & Behaviors

### Goal:
Reduce obesity and chronic disease in children and adults to enhance quality of life by promoting healthy lifestyle choices. ■

### Objective:
Decrease the age-adjusted death rate for breast cancer from 35.3 deaths in 2013-15 to 34.3 deaths per 100,000 by December 31, 2020. ■

<table>
<thead>
<tr>
<th>Strategies</th>
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<th>Target</th>
</tr>
</thead>
</table>
| Track number of clients referred to Florida Breast and Cervical Cancer Early Detection Program. | • FDOH-Duval County  
• FDOH-Baker County medical staff | • FDOH-Baker County                      | # of clients enrolled       | 6            | 10     |
| Increase community awareness for mammogram screening.                      | • Local newspaper  
• FDOH-Baker County electronic sign  
• Healthy Baker website  
• Ed Fraser Hospital | • FDOH-Baker County  
• Ed Fraser Hospital | # of times per year awareness information is shared | 0            | 2      |

■ Represents alignment with the National Healthy People 2020 initiative  ▲ Represents alignment with the Florida State Health Improvement Plan

## Health Issue Priority: Healthy Lifestyle & Behaviors

### Goal:
Reduce obesity and chronic disease in children and adults to enhance quality of life by promoting healthy lifestyle choices. ■

### Objective:
Increase education and awareness about the HPV vaccine through community outreach, and increase the number of adolescents who received or completed the HPV vaccination series from 411 adolescents as of December 31, 2016 to 600 by December 31, 2020. ▲

<table>
<thead>
<tr>
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</tr>
</thead>
</table>
| Increase awareness of HPV vaccine and benefits among healthcare providers and the community. | • Centers for Disease Control and Prevention (CDC)  
• Florida Department of Health (state)  
• Vaccines for Children | • FDOH-Baker County                      | # of times information is shared | 0            | 2      |
| Track the number of Baker County adolescents who have received or completed HPV vaccination series. | • Florida Department of Health (state)  
• Vaccines for Children  
• Local medical providers  
• FDOH Florida Shots | • FDOH-Baker County  
• Vaccines for Children | # of adolescents who have received one or more HPV vaccine | 411 as of June 2017 | 600 by 2020 |
### Health Issue Priority: Healthy Lifestyle & Behaviors

**Goal:** Reduce illness, disability, and death related to tobacco and other substance use. (■) (▲)

**Objective:** Reduce the percent of youth age 11-17 who have smoked cigarettes in their lifetime from 24.1% in 2016 to 23% by December 31, 2020. (▲)

<table>
<thead>
<tr>
<th>Strategies</th>
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</tr>
</thead>
</table>
| Continue to provide tobacco counseling at each Dental Hygiene visit by monitoring 1008 monthly dental report. | • FDOH-Baker County  
• FDOH- Health Management Systems | • FDOH-Baker County | # of counseling sessions per year | 554 | 750 |
| Increase the number of anti-tobacco community outreach methods (e.g., advertisements, events) based on suggestions received through community input. One of these strategies will include a social marketing component. | • Local newspaper  
• FDOH-Baker electronic sign  
• Healthy Baker website  
• Bureau of Tobacco Free Florida | • FDOH-Baker County  
• Baker Tobacco Free Partnership | # of times per year | 3 | 3 |
| Provide Tobacco Education classes to youth who receive citations for underage use/possession of tobacco products. | • Baker County Sherriff’s Office  
• AmeriCorps Member  
• Baker County School Board | • Baker County Sherriff’s Office  
• FDOH-Baker County | # of times per year | 5 | 5 |

■ Represents alignment with the National Healthy People 2020 initiative  
▲ Represents alignment with the Florida State Health Improvement Plan
**Health Issue Priority: Healthy Lifestyle & Behaviors**

**Goal:** Reduce illness, disability, and death related to tobacco and other substance use. (◼) (▲)

**Objective:**
- Reduce the current smoking rate of adults from 18.2% to 17.8% by December 31, 2020. (Florida rate = 16.8%) (◼) (▲)
- Reduce the age-adjusted death rate for lung cancer from 47.5 deaths per 100,000 population in 2015 to 47 deaths by December 31, 2020. (◼)(▲)

<table>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Complete tobacco screening at each clinical visit (required for Electronic Health Record) at FDOH-Baker County, and track the number of patients referred for tobacco cessation services.</td>
<td>● FDOH-HMS Informatics</td>
<td>● FDOH-Baker County</td>
<td># of patients referred per year</td>
<td>90 in 2016</td>
<td>40 per year</td>
</tr>
<tr>
<td>Continue providing tobacco cessation classes at the FDOH-Baker County.</td>
<td>● Northeast FL Area Health Education Centers (AHEC)</td>
<td>● Northeast FL Area Health Education Centers (AHEC)</td>
<td># of classes per year</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Increase the number of Baker residents attending AHEC tobacco cessation classes.</td>
<td>● Northeast FL AHEC</td>
<td>● Northeast FL AHEC</td>
<td># of participants</td>
<td>74 in 2016</td>
<td>80</td>
</tr>
</tbody>
</table>

◼ Represents alignment with the National Healthy People 2020 initiative
▲ Represents alignment with the Florida State Health Improvement Plan
Health Issue Priority: Healthy Lifestyle & Behaviors

**Goal:** Reduce illness, disability, and death related to tobacco and other substance use. (■)

**Objective:** Reduce the percent of students who have used alcohol in their lifetime from 41.4% in 2016 to 40.4% by December 31, 2020. (■)

<table>
<thead>
<tr>
<th>Strategies</th>
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</tr>
</thead>
</table>
| Conduct “Responsible Vendor Training” (regarding selling tobacco and alcohol to under aged residents) for local retail stores and businesses. | • Nassau Alcohol Crime Drug Abatement Coalition (NACDAC)  
• Fernandina Beach police department  
• Bureau of Alcohol and Tobacco (ABT) | • Baker Prevention Coalition | # of trainings per year/quarter | 1 training completed | 4 trainings per year (1 per quarter) |
| Present the Alcohol Literacy Challenge to middle and high school students. | • Baker County School Board  
• Baker Prevention | • Hanley Foundation | # of grade levels at middle school and high school that complete the literacy challenge per year | 2 (presented to 6th and 9th grade) | 1 full grade level for middle and high school |
| Present “Know the Law” to middle and high school students. | • Community Coalition Alliance  
• FDOH-Baker County  
• Baker County School Board  
• School Resource officer | • Baker County Sherriff’s Office | # of students per year (combined middle & high school students) | 540+ | 540 |

■ Represents alignment with the National Healthy People 2020 initiative  
▲ Represents alignment with the Florida State Health Improvement Plan
# Health Issue Priority: Maternal and Child Health

**Goal:** Improve maternal and child health through health education and prevention strategies. (■)(▲)

**Objective:** Reduce the infant mortality rate (3-year rolling) from 11.9 deaths in 2015 to 11.4 deaths per 1,000 live births by December 31, 2020. (■)(▲)

<table>
<thead>
<tr>
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</tr>
</thead>
</table>
| Co-facilitate and participate in the Baker County Infant Mortality task force meeting 6 times per year. | • Baker County Healthy Start  
• FDOH-Baker County  
• Healthy Families  
• Women, Infants, and Children (WIC)  
• Hubbard House  
• First Coast Women’s Services  
• Early Steps  
• Wellcare  
• Molina  
• Baker Prevention Coalition  
• North East Florida Educational Consortium (NEFEC) | • Northeast Florida Healthy Start Coalition  
• FDOH-Baker County | # of meetings per year | 5 | 6 |
| Conduct safe sleep presentations throughout the community. | • WIC  
• Healthy Start Staff | • Northeast Florida Healthy Start Coalition  
• FDOH-Baker County | # of presentations per year | 2 | 4 |
| Increase the number of mothers who initiate breastfeeding. | • WIC  
• Healthy Start  
• Healthy Families | • WIC | Average annual % of mothers who initiate breastfeeding | 2016 average of 81% | 82% |

■ Represents alignment with the National Healthy People 2020 initiative  
▲ Represents alignment with the Florida State Health Improvement Plan
<table>
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</tr>
</thead>
</table>
| Maintain the number of youth completing Sexual Risk Avoidance-Abstinence Education and Positive Youth Development Education. | • Baker County School Board  
• Choosing the Best curriculum  
• FDOH Office of Adolescent Health | • FDOH-Baker County Health Education  
• Baker schools | # of youth completing classes | Average of 572 per year over past 3 years | 572 |
| Increase the number of participants in Parenting Support Classes (for parents, caregivers, or significant adults of adolescent youth) to encourage healthy choices. | • FDOH Office of Adolescent Health  
• Choosing the Best curriculum  
• Student Attendance Review Board  
• Baker Court System  
• Hanley Foundation | • FDOH-Baker County | # of participants | 48 | 105 |
| Establish Teen Pregnancy Task Force.                                      | • Baker County School Board (high school and middle school nurses)  
• Healthy Start  
• First Coast Women’s Center  
• Episcopal Children’s Services  
• Women’s Center of Jacksonville | • FDOH-Baker County | Creation of Task Force | 0 | 1 |

■ Represents alignment with the National Healthy People 2020 initiative  
▲ Represents alignment with the Florida State Health Improvement Plan
# Baker County Community Health Improvement Plan

## Health Issue Priority: Public Safety

**Goal:** Increase knowledge about public safety.

**Objective:** Decrease the *unintentional injury* age-adjusted death rate from 46.0 deaths per 100,000 in 2013-2015 to 45.0 deaths per 100,000 by December 31, 2020.

<table>
<thead>
<tr>
<th>Strategies</th>
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<th>Current Performance Level</th>
<th>Target</th>
</tr>
</thead>
</table>
| Increase the number of water safety awareness outreach efforts. | • Local newspaper  
• Healthy Baker website  
• FDOH-Baker digital sign  
• YMCA  
• Healthy Start  
• Healthy Families  
• Infant Mortality Task Force  
• Children’s Partnership Council | • YMCA  
• FDOH-state and Baker County | # of times information is shared | 0 | 2 |
| Assess community resources for car seat safety. | • Safe Kids  
• Sheriff’s Office  
• Fire/Rescue  
• Players Center for Child Health at Wolfson Children’s Hospital – leads Safe Kids Northeast Florida – offers workshops, safety checks for car seats  
• Certified car seat installers in surrounding counties  
• Children’s Partnership Council | • Infant Mortality Task Force | Resource list completed | 0 | 1 |
APPENDIX B. REFERENCES


Mobilizing for Action through Planning and Partnerships, Achieving Healthier Communities through MAPP: A User’s Handbook. Washington, DC.


