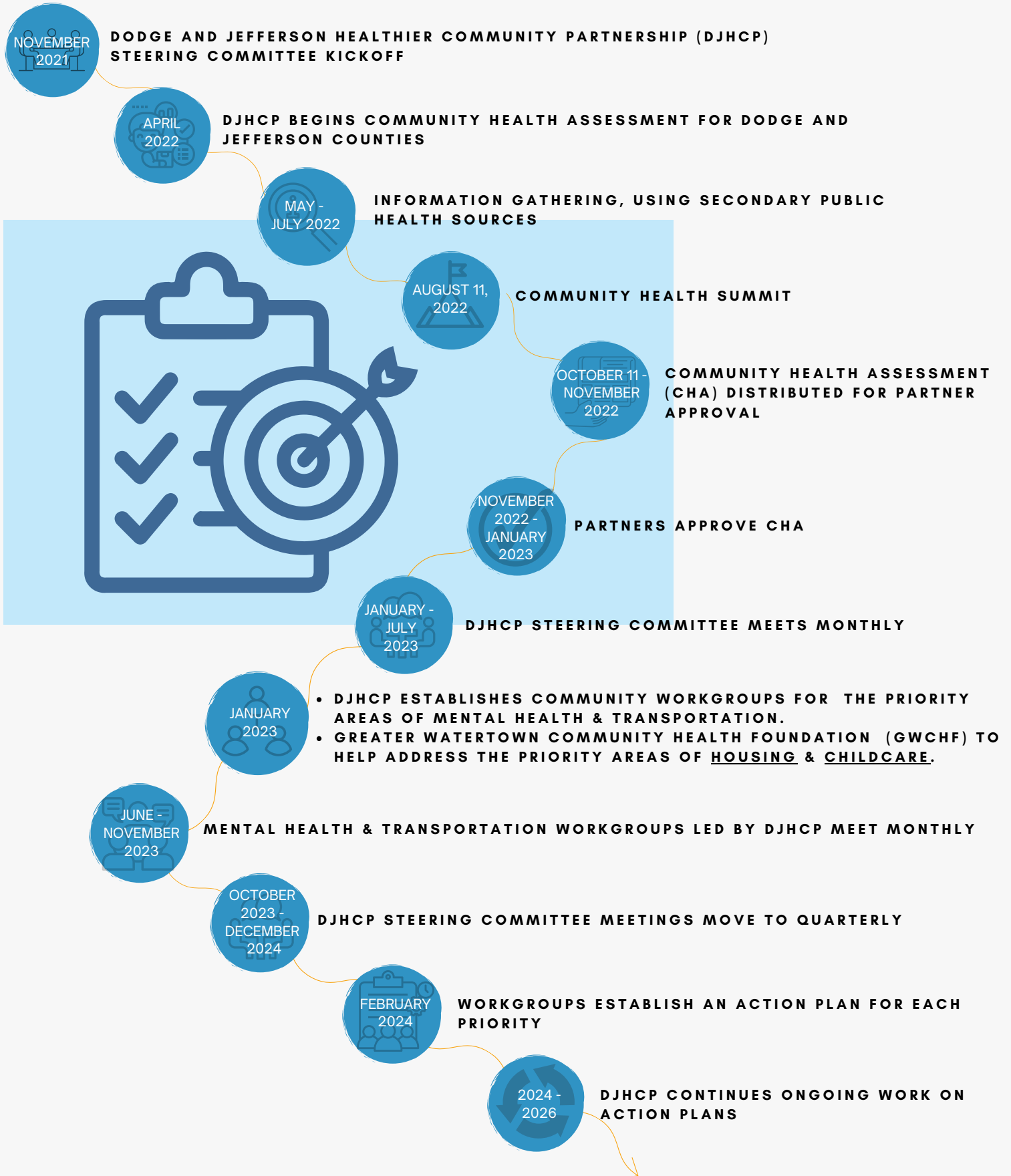


Community Health Assessment and Improvement Plan Timeline



Executive Summary

What is the CHIP and why is it necessary?

The Community Health Improvement Plan (CHIP) is an ongoing effort that uses the results from the Community Health Assessment (CHA), with the help of community partners, to develop and implement a long-term health plan that addresses the identified health needs of the communities.



The CHIP has been a Wisconsin state required document since 1993, and is required to be completed on a 5 year cycle for health departments or a 3 year cycle for hospitals. Working collectively with other community partners, including hospitals and clinics, the Dodge-Jefferson Healthier Community Partnership cycle is completed every 3 years. The outcome of the CHIP is to lead to the advancement of the health and wellbeing of the communities.

Who are the community partners?

The Dodge-Jefferson Healthier Community Partnership (DJHCP) leads the work of the Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP) by strategically guiding and leading the work of the action plan that will benefit the overall health of the communities. The organizations working together on the steering committee this cycle include the following:

- Dodge County Human Services & Health Department
 - Fort HealthCare
- Greater Watertown Community Health Foundation
 - Jefferson County Health Department
 - Marshfield Medical Center- Beaver Dam
 - Rock River Community Clinic
 - Watertown Department of Public Health
 - Watertown Regional Medical Center



Jefferson County Health Department





2023-2026

COMMUNITY HEALTH IMPROVEMENT PLAN

Priority Area: Access to Affordable Quality Mental Health Care

OVERALL OBJECTIVE

6.8.23 FIRST MENTAL HEALTH WORKGROUP MEETS AT MADISON COLLEGE IN WATERTOWN. INTRODUCTION OF THE COMMUNITY HEALTH ASSESSMENT/COMMUNITY HEALTH IMPROVEMENT PLAN AND RESULTS BASED ACCOUNTABILITY PROCESS. DATA WAS SHARED ON HOW THE COMMUNITIES ARE DOING AND WHY. THE QUESTION WAS ASKED: WHAT ARE THE QUALITY OF LIFE CONDITIONS WE WANT TO SEE FOR THE COMMUNITY AS IT RELATES TO MENTAL HEALTH & WELLBEING? (RESPONSES)

THE GROUP IDENTIFIES THE OVERALL OUTCOME:
TO HAVE ALL CHILDREN & FAMILIES WITHIN OUR COMMUNITY STABLE & CONNECTED.

8.8.23 EXISTING EFFORTS WERE SHARED OUT BY EACH ORGANIZATION, THE IMPORTANCE OF SOCIAL CONNECTEDNESS WAS INTRODUCED, AND THE GROUP DISCUSSED POPULATION LEVEL INDICATORS THAT ARE AVAILABLE TO SUPPORT THE WORK.

INDICATORS

9.26.23 THE GROUP DISCUSSED GAPS WITHIN THE COMMUNITY AND ESTABLISHED INDICATORS:

- 1) **DECREASE THE PERCENTAGE OF YOUTH REPORTING DEPRESSION/ANXIETY.**
- 2) **INCREASE THE NUMBER OF YOUTH RECEIVING HELP WHEN THEY NEED IT.**

STRATEGIES

10.17.23 REVIEW OF EXISTING EFFORTS & GAPS. EVIDENCE BASED PRACTICES WERE SHARED. BASED ON THIS INFORMATION AND PREVIOUSLY SHARED DATA, THE GROUP BRAINSTORMED STRATEGIES THAT WOULD SUPPORT THE PRIORITIES AND VOTED ON THE TOP 3:

- 1) **COUNTY-WIDE EVENTS TO SUPPORT SOCIAL CONNECTEDNESS**
- 2) **MENTAL HEALTH FIRST AID TRAINING FOR VOLUNTEERS/COMMUNITY MEMBERS**
- 3) **ADDRESSING FAMILY COPING SKILLS**

ACTION PLAN

11.7.23 MENTAL HEALTH WAS DEFINED AS A GROUP AND EACH ORGANIZATION DISCUSSED HOW THEY ARE ALREADY, OR HOW THEY WILL, IMPLEMENT THESE STRATEGIES. DISCUSSED PERFORMANCE MEASURES THAT WILL BE LOOKED AT BY EACH ORGANIZATION.

BEGIN TO CREATE THE ACTION PLAN FOR A SOCIALLY CONNECTED COMMUNITY.
WORKGROUP TO RECONVENE IN FEBRUARY.

12.23 -1.24 **DJHCP MENTAL HEALTH SUB-GROUPS CONTINUED MEETING TO DISCUSS THE PLAN FOR A SOCIALLY CONNECTED COMMUNITY.**

SOCIAL CONNECTEDNESS

2.13.24 DEEPER DIVE INTO SOCIAL CONNECTEDNESS. SHARED WHAT IS GOING ON AT A NATIONAL LEVEL. ASKED THE GROUP: WHAT DOES SOCIAL CONNECTION LOOK, FEEL, AND SOUND LIKE? **GROUP TO PARTNER WITH A NATIONAL ORGANIZATION, HEALTHY PLACES BY DESIGN**, AND RECONVENE IN JUNE FOR A COMMUNITY NARRATIVE WORKSHOP AND COMMUNITY LEADER BRIEFING.

3.24-6.24 **SEEK MORE INPUT FROM COMMUNITY MEMBERS ON SOCIAL CONNECTEDNESS.** FURTHER THESE EFFORTS BY WORKING WITH HEALTHY PLACES BY DESIGN TO LEARN ABOUT A COMMUNITY NARRATIVE, WORKSHOP COMMUNITY VALUES, FRAME COMMUNITY MESSAGES, AND CONDUCT COMMUNITY CONVERSATIONS TO IMPROVE SOCIAL CONNECTEDNESS.

2024 -2026 **ONGOING WORK ON ACTION PLAN.**



Jefferson County Health Department





2023-2026

COMMUNITY HEALTH IMPROVEMENT PLAN

Priority Area: Access to Affordable Reliable Transportation

OVERALL OBJECTIVE

6.8.23 FIRST TRANSPORTATION WORKGROUP MEETING MEETS AT MADISON COLLEGE IN WATERTOWN. THE QUESTION WAS ASKED: WHAT IS THE QUALITY OF LIFE CONDITIONS WE WANT FOR OUR COMMUNITY AS FAR AS TRANSPORTATION? COLLECTIVELY THE GROUP DECIDED: **ALL PEOPLE IN OUR COMMUNITY HAVE ACCESS TO SAFE, RELIABLE AND AFFORDABLE TRANSPORTATION OPTIONS.**

STRATEGIES

8.10.23 LOOKED AT EXISTING EFFORTS AND GAPS IN THE TWO COUNTIES. TWO PRIORITY STRATEGIES WERE CHOSEN BY THE WORKGROUP:

- 1) INCREASE ACCESS TO TRANSPORTATION FOR NON-EMERGENCY MEDICAL APPOINTMENTS
- 2) RAISE AWARENESS OF AVAILABLE TRANSPORTATION RESOURCES.

INDICATORS

9.14.23 REVIEWED AVAILABLE DATA AND CHOSE TWO INDICATORS TO FOCUS ON:

- 1) MISSED MEDICAL APPOINTMENTS DUE TO TRANSPORTATION
- 2) NUMBER OF COMMUNITY MEMBERS USING TRANSPORTATION FOR MEDICAL APPOINTMENTS.

DATA COLLECTION

10.12.23 DISCUSSED WHAT DATA IS NEEDED, WHO IT IS NEEDED FROM, AND WHO HAS THE CONNECTIONS TO GET IT. LOOKING FOR HELP FROM THE HEALTHCARE SYSTEMS, AND COUNTY & PRIVATE TRANSPORTATION SERVICES.

DATA COLLECTION IS THE START OF THE ACTION PLAN.

RESULTS BASED ACCOUNTABILITY FRAMEWORK

11.9.23 **DEEPER DIVE INTO TURN THE CURVE PLAN AND THE RBA PROCESS.** REVIEWED DATA COLLECTION - HOSPITALS TO START COLLECTION EFFORTS. BRAINSTORMING AND IDEA SHARING, LIST OF STRATEGIES DEVELOPED AND GROUP VOTED ON TOP 3.

ACTION PLAN

12.7.23 TWEAKED INDICATOR #1 TO "PERCENT OF MEDICAL APPOINTMENTS MISSED DUE TO TRANSPORTATION". THREE STRATEGIES WERE CHOSEN:

- 1) INCREASE DRIVER RECRUITMENT FOR PAID AND UNPAID DRIVERS
 - 2) INCREASE FUNDING FOR TRANSPORTATION SERVICES
 - 3) INCREASE AWARENESS OF TRANSPORTATION SERVICES TO CONSUMERS.
- START OF ACTION PLANNING.

2.8.24 **COMMITMENT FROM THE VARIOUS ENTITIES TO PROVIDE DATA.** CONTINUED DISCUSSION ON ACTIVITIES FOR EACH OF THE THREE STRATEGIES AND THEN COMMITMENT BY WORKGROUP PARTICIPANTS TO TAKE OWNERSHIP OF ACTIVITIES.

4.11.24 WHERE IS THE MOMENTUM? HOW CAN THE GROUP SUPPORT THIS? WHAT DO EACH OF THE VARIOUS ORGANIZATIONS NEED FROM THE WORKGROUP TO MOVE FORWARD WITH THEIR ACTION PLAN ACTIVITIES?

2024 -2026 **ONGOING WORK ON ACTION PLAN.**



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