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Cleveland County
Health Department



COMMUNITY HEALTH IMPROVEMENT PLAN

Cleveland County, Oklahoma

January 2012



Creating
a State
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Cleveland County Health Department

Shari Kinney, DrPH, RN
Administrative Director

The 2012 “Cleveland County Health Improvement Plan” is the first Health Improvement Plan completed in Cleveland County. This plan is aligned with the “Oklahoma Health Improvement Plan” to address several key health priority areas relevant to Oklahomans and Cleveland County residents.

- Obesity Reduction
- Child Health
- Tobacco Prevention

The Cleveland County Health Department in partnership with the Cleveland County Turning Point Coalition, Moore Community Coalition, Noble Wellness Committee, Tobacco Free Cleveland County, Cleveland County Physical Activity and Nutrition Coalition, Healthy Community Coalition, United Way, Cleveland County Immunization Coalition, Cleveland County Fetal and Infant Mortality Action Team, and other community partners work to improve the health and well-being of Cleveland County residents.

This plan addresses the health status of Cleveland County residents’ goals for the 5 year strategic plan and strategies to strengthen communities, unite vision, reduce health disparities, and unify a community to promote a positive healthy environment to live, work, and play.

It is my sincere honor to serve you as administrative director and it is my hope that we can work together to improve the health of our county. Thank you all for your dedication and contribution to create a solution for a healthier Cleveland County.

Sincerely,

Shari Kinney, DrPH, RN
Cleveland County Health Department Administrative Director

CLEVELAND COUNTY BOARD OF HEALTH

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Executive Summary

Purpose

Oklahoma ranks at the bottom in many health status indicators and ranks 48th for overall health in the nation according to the 2011 United Health Foundation State Health Rankings. The state's poor health ranking is related to conditions that Oklahomans must live with every day. Poverty, lack of insurance, limited access to primary care, and inadequate prenatal care, along with associated risky health behaviors (low fruit and vegetable consumption, low physical activity, and a high prevalence of smoking) all contribute to the poor health status of our citizens. According to the "2011 Oklahoma State of the State's Health Report", it is estimated that if Oklahoma "matched" the national average in health status indicators, 5,320 lives would be saved each year.

The "2011 State of the State's Health Report" assigned grades to counties on specific health indicators as compared to the national average. Cleveland County met the national average in over half of the indicators in the "2011 State of the State's County Health Rankings". If the indicator met the national average, the county was given a "C". Cleveland County received a "C" for infant mortality rate, immunizations under 3 years of age, unintentional injury, and senior's flu vaccination. Rates that were better than the national rate were given an "A". Cleveland County received an "A" for percentage of seniors who received a pneumonia vaccine. Grades "D" and "F" were given for indicators worse than the national average. Cleveland County received an "F" in fruit and vegetable consumption, physical activity, smoking and leading causes of deaths in the areas of heart disease, stroke, cancer and diabetes.

The Oklahoma Health Improvement Plan

In 2008, the Oklahoma Legislature required the State Board of Health, through a senate resolution, to develop a comprehensive health improvement plan for the "general improvement of the physical, social and mental well being of all people in Oklahoma through a high-functioning public health system." As a result, the Oklahoma Health Improvement Plan (OHIP) was created, providing the framework for county health improvement plans.

The overall vision of OHIP involves partnerships with Oklahoma counties to improve health at the local level through a Community Health Improvement Plan (CHIP). From this challenge, the Cleveland County Health Department is collaborating with community partners and health entities to assess needs and strategically plan to improve the community's health.

Cleveland County's State of Health Report

As a part of the OHIP, the "2011 State of the County's Health Report" for Cleveland County was released. The report focuses on key health indicators in the areas of Mortality and Leading Causes of Death, Disease Rates, Risk Factors, Behaviors and Socioeconomic Factors, and changes in the statistics from the previous year. The report findings compare Cleveland County to the rest of Oklahoma and the United States. Although Cleveland County does fair better than most of Oklahoma, the state compares below the national average in most indicators. This plan takes in data from studies, reports and qualitative input from community members to identify priority areas for improvement. Both behavioral and social determinants are taken into consideration in analyzing problems and establishing priorities. The three priority areas identified are Tobacco Prevention, Obesity Reduction, and Children's Health.

Priority Areas

Tobacco Use Prevention

The Cleveland County Health Improvement Planning Committee is partnering with the Tobacco Free Cleveland County Coalition to address tobacco use prevention. This coalition builds on indicators in the Tobacco Settlement Endowment Trust (TSET) Tobacco Prevention grant in Cleveland County and the Healthy People 2020 objectives. These include: 1) Improve community-wide engagement, 2) Prevent youth initiation of tobacco use, 3) Promote cessation services, 4) Eliminate secondhand smoke exposure, 5) Advocate effective tobacco control policy, and 6) Use media more effectively. Key policy changes essential to accomplish the objectives include: passing of tobacco free parks in all of Cleveland County, Clean indoor air and youth access ordinances, 24/7 no tobacco use in Cleveland County schools, and Advocating for Restore of Local Control through the Oklahoma Legislature.

Obesity Reduction

The Cleveland County Health Improvement Planning Committee is working with the Nutrition and Fitness Coalition to address obesity reduction. The determinants of obesity in the United States are complex. A comprehensive approach to nutrition and fitness is needed to change social norms and influence the environments in which we live, work, and play. The obesity reduction work group recommendations endorse the Tobacco Settlement Endowment Trust (TSET) Nutrition and Fitness grant in Cleveland County and the Healthy People 2020 objectives. Their priorities include: 1) Improve community-wide engagement, 2) Improve access to & consumption of healthy, safe, and affordable food and beverages, 3) Encourage physical activity, 4) Increase school and out-of-school programs, and 5) Raise awareness about the importance of healthy eating and physical activity. Key policy changes needed to achieve the objectives below include: Support the Health Education in Schools Bill in the Oklahoma Legislature, after-school healthy eating and physical activity standards, and school and worksite healthy eating and physical activity standards.

Children's Health

The children's health priority area addresses three strategies based on both Healthy People 2020 objectives and community strategies that include: 1) Improve infant health outcomes; 2) Improve health outcomes for children age 1 year to 18 years old; and 3) Increase advocacy for health policy. The community coalitions addressing these strategies are: 1) Cleveland County Immunization Coalition, 2) Cleveland County Fetal and Infant Mortality Action Team, 3) Cleveland County Turning Point, 4) United Way Success by Six Health & Wellness Committee, 5) Noble Wellness Committee, 6) Noble Community Coalition, 7) Moore Community Coalition, 8) The Healthy Community Coalition, and 9) University of Oklahoma Southwest Prevention Center Area Resource Center. Key policy changes essential to accomplish chosen objectives include: Legislation to allow public health nurses to provide services using standing orders.

Future Actions & Recommendations

This plan includes information on partners and resources available in Cleveland County to collaborate and help address priority issues. Awareness and thoughtful application of the data along with input from community partners help provide opportunities to improve the health of our local citizens.

Another overall goal of this plan is to raise awareness of community health through increased communication, and strengthened collaborations; ultimately, reaching positive, measurable outcomes on the priority issues by 2017.

This plan will be reviewed annually and revised every five years, both to monitor progress toward identified goals, and to establish new goals and priorities as needed. Work groups and coalitions will develop action plans to address each priority issue and review objectives annually. In 2017 the Cleveland County Health Improvement Planning Committee will come together to revise the plan based on current community needs. The committee challenges our partners to work on these initial critical implementation strategies as we move forward.

Introduction & Background

The United Health Foundation defines health as “A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.” Achieving this requires action at the national, state, and county levels.

The Cleveland County Turning Point Coalition’s vision is “To achieve and sustain the Health and Wellness of all citizens in Cleveland County.” The mission is “To Create a Healthy Cleveland County through education, prevention, and active community partnerships.” The Health Improvement Planning team for Cleveland County adopted this mission and vision to lead them through the strategic planning process. This vision and mission cannot be accomplished by a single entity, but as a county-wide collaboration through awareness, setting goals and plans, with individuals taking action and evaluating the outcomes of that action.

Demographics and Data

Cleveland County has had a population boom, with a 23 percent increase over the last 10 years. Cleveland County has specifically seen increases in the Hispanic population with a 75% increase and the Asian population with a 36% increase from 2000 to 2010. Compared to the rest of the state, Cleveland County has a smaller percentage of children under 18, adults 65 and older, Hispanics or Latinos, African Americans, Native Americans and other races. Cleveland County has a higher percentage of adults 18-64 years, Caucasians, and Asians.

2010 Demographics	Oklahoma	%	Cleveland Co.	%
Total Population	3,751,351		255,755	
Age				
Under 18 Years	929,666	25%	59,176	23%
18-64 Years	2,314,970	62%	170,402	67%
65+ Years	506,715	14%	26,177	10%
Race/Ethnicity				
White	2,706,845	72%	202,811	79%
Hispanic or Latino	332,007	9%	17,892	7%
African American	277,644	7%	10,848	4%
Asian	65,076	2%	9,698	4%
American Indian & Alaska Native	321,687	9%	11,978	5%
Native Hawaiian & Pacific Islander	4,369	<1%	118	<1%
Other	154,409	4%	5,972	2%
Identified by two or more	221,321	6%	14,258	6%

*2010 Census Bureau Report

Framework

Mobilizing for Action through Planning and Partnerships (MAPP)

The Cleveland County community engaged in the strategic planning model: “Mobilizing for Action through Planning and Partnerships (MAPP)” to conduct community based assessments. The MAPP tool was developed by the National Association of County and City Health Officials (NACCHO) in cooperation with the Public Health Practice Program Office and Centers for Disease Control and Prevention (CDC). The outcome of this process is the Community Health Improvement Plan (CHIP).

Organize for Success/Partnership Development

The first phase in the MAPP process was to organize for success and develop partnerships. The Cleveland County Health Department staff along with community partners attended trainings to understand the MAPP process and how to educate the community on the process. The Cleveland County Turning Point (CCTP) Coalition and its subcommittees worked together to develop new partnerships and bring key stakeholders into the process. Together, they engaged in several strategic planning meetings. The coalition continues to grow and develop new partnerships to build broad representation.



Visioning

The Cleveland County Turning Point Coalition spent time at the initial CHIP meeting to discuss what a healthy Cleveland County would look like. After discussion it was decided that the current vision and mission would be used to drive the process.

MAPP Assessment Process

The Community Health Improvement Planning Team began meeting in the fall of 2010 to conduct four community health assessments in the third phase of the MAPP process. The assessments include:

1. Community Themes and Strengths Assessment
2. Local Public Health System Assessment
3. Forces of Change Assessment
4. Community Health Status Assessment

Identify Strategic Issues

This fourth phase of MAPP was done after reviewing the assessment data. Several priorities were found through the assessments. The CHIP committee member organizations were requested to vote on three emerging health issues. As a result, three priority areas were chosen: Tobacco Prevention, Obesity Reduction, and Children's Health.

Formulate Goals & Strategies

Once these priority areas were selected, the committee assessed current coalitions and activities occurring in the county. The tobacco prevention priority area fit with the Tobacco Free Cleveland County Coalition, obesity reduction fit with the Cleveland County Nutrition and Fitness coalition, and children's health fit into several local coalitions. The children's health priority area will be split into several different community coalitions; 1) Cleveland County Immunization Coalition; 2) Cleveland County Fetal and Infant Mortality Action Team; 3) Cleveland County Turning Point; 4) United Way Success by Six Health & Wellness Committee; 5) Noble Wellness Committee; 6) Noble Community Coalition; 7) Moore Community Coalition; 8) The Healthy Community Coalition; and 9) University of Oklahoma Southwest Prevention Center Area Resource Center. Community members volunteered to serve on priority area coalitions/work groups to develop action plans to address strategies.

Action Cycle

With the presentation of the CHIP to the community, the Action Phase of the MAPP process begins. Communication among public health organizations continues to be a need in the community and the group will be developing ways to encourage ongoing communication through social media and agency websites. Since health needs are constantly emerging, the plan will continue to be reviewed and revised over the next five years. Each coalition will be developing action plans and reviewing their objectives annually to monitor progress and assess strategies.



The Cleveland County Health Improvement Planning Committee works together to address Cleveland County community health issues.

Assessment Findings

I. The Community Themes and Strengths Assessment, designed to gather information from the community on perceived quality of life and community assets, was completed in a brainstorming session with the CHIP committee. This assessment resulted in a strong understanding of community issues and concerns, perceptions and a map of community assets within Cleveland County. Responses to the Community Themes and Strengths assessment included:

Strengths

- Abundance of Health/Education resources and potential partnerships
- Active and culturally diverse communities within the county
- County population continues to flourish as one of the ten best counties in Oklahoma for overall health

Weakness

- Lack of sidewalks, parks, and walking trails contribute to physical inactivity
- Unequal distribution of resources between the county seat and communities
- Insufficient opportunities for quality child care
- Inadequate mental health services available

Opportunities

- Local communities implementing master plans to implement physical activity resources, and land usage for health related businesses
- Community partnerships collaborating to work more efficiently at providing needs of the County
- Education/Transportation services to ensure economic and cultural growth

Threats

- Inadequate access and number to health food venues (i.e. whole food stores, fresh fruit/vegetable outlets, healthy choice restaurants)
- Abundance of fast food restaurant chains
- Increased class size K-12th grade contribute to the decreased education capacity

II. The Local Public Health System Assessment measures the capacity and performance of the public health system. This includes organizations and entities that contribute to the public's health, and are considered community health partners. The assessment was completed through a community forum and an online survey completed by community partners to answer questions in their expertise. This assessment showed how well essential services are provided in Cleveland County. Community health partners indicated the following areas of strengths:

- 69% feel there are an adequate amount of resources in the community investigating health problems and hazards.
- 60% think policy development that supports individual and community health efforts, is significant. Community coalitions and participants work vigorously with local school boards, city councils, legislators, and senators to pass policy to become a healthier community.
- 55% believe community agencies are informing, educating, and empowering people about health issues to promote health through newsletters, social media, and print and news media.

Community health partners indicated the following areas of improvement:

- 74% feel that research for new and innovative solutions to health problems is minimal.
- 42% feel that community agencies evaluating effectiveness, accessibility, and quality of personal and population based health services need improvement.

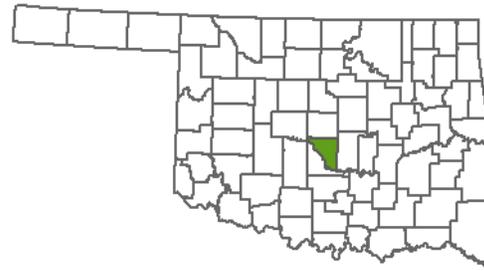
III. The Forces of Change Assessment focuses on identifying changes that affect the context in which the community and its public health system operate. This was completed in several brainstorming sessions with the CHIP committee. The community felt important issues to improve health in the community are tobacco prevention, obesity prevention, decrease poverty, and a focus on preventative health services. Some forces keeping the community from improving health and quality of life are not enough funding, priorities, politics, and lack of resources or staff. Also noted was the declining economy and more clients seeking assistance, more grandparents raising grandchildren, and more drug and alcohol abuse.

IV. The Community Health Status Assessment identifies priority community health and quality of life issues. These assessments were completed by using data from the “2011 State of the State’s Health Report” released by the Oklahoma Health Department, the Oklahoma Youth Risk Behavior Survey, the Oklahoma Prevention Needs Assessment, Oklahoma Department of Human Services, and United Way of Norman.

The 2008 Youth Risk Behavior Survey from Norman Public Schools showed that in the last 30 days, 30% of cigarette smokers smoked at least one cigarette every day compared to 58.3% statewide and 38% of Norman high school students bought their own cigarettes in a store or gas station compared to 20% statewide. The survey also showed, 14% were obese (students who were > or = to 95th percentile for body mass index), and 85% ate fruit and vegetables less than five times per day.

Cleveland County has rates better than the national average for Alzheimer’s disease, asthma, vaccination of seniors for pneumonia, low birth weight and poverty. In summary, critical health concerns for Cleveland County include higher rates of death than the national average for heart disease, chronic lower respiratory disease, higher rates of cancer incidence, lower rates of fruit and vegetable consumption, and rising obesity rates.

2011 State of the State and County Health Report



Cleveland County

Mortality and Leading Causes of Death

Age-adjusted total mortality rate was 5% lower than the state's rate.

Infant mortality rate was 27% lower than the state's rate, ranking the county eighth lowest (best) in state for infant mortality.

Had the second lowest rate of unintentional injury mortality and sixth lowest rate of suicide mortality of all state's counties.

Leading causes of death were heart disease, cancer and stroke.

Disease Rates

Prevalence of asthma was 28% lower than the state and 18% lower than national rates.

Risk Factors & Behaviors

Adults of Cleveland County experienced some of the fewest days whereby their activity was limited and had positive perceptions of their health.

Third lowest county rate of births to teens aged 15-17 years. 87% of pregnant females received early prenatal care.

Changes from Previous Year Report

Influenza/pneumonia mortality rate decreased 15%.

Prevalence of asthma among adults declined 19%.

Cigarette smoking has leveled and sales have increased.

Physically inactive adults increased 19%.

Diabetes among adults increased 72%.

Obese adults increased 21%

10% fewer children had completed the primary immunization series.

HEALTH INDICATORS	U.S.	OK	Cleveland Co.
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MORTALITY

INFANT (RATE PER 1,000)	6.8	8.6	6.3
TOTAL (RATE PER 100,000)	760.2	933	882.9

LEADING CAUSES OF DEATH

(RATE PER 100,000)	U.S.	OK	Cleveland Co.
HEART DISEASE	190.9	242.1	256
CANCER	178.4	198.3	175.8
STROKE	42.2	53.8	62.3
CHRONIC LOWER RESPIRATORY DISEASE	43.3	61.3	54
UNINTENTIONAL INJURY	40	58.5	38.2
DIABETES	22.5	29.4	23.5
INFLUENZA/PNEUMONIA	16.5	20.1	19.6
ALZHEIMER'S DISEASE	22.7	23.1	19.4
NEPHRITIS (KIDNEY DISEASE)	14.5	15.7	15.9
SUICIDE	11.3	14.7	9.8

DISEASE RATES

DIABETES PREVALENCE	8.3%	11.0%	9.1%
ASTHMA PREVALENCE	8.8%	10.0%	7.2%
CANCER INCIDENCE (RATE PER 100,000)	481.7	498.9	535

RISK FACTORS & BEHAVIORS

FRUIT/VEGETABLE CONSUMPTION	23.4%	14.6%	16.1%
NO PHYSICAL ACTIVITY	23.8%	31.4%	26.3%
SMOKING	17.9%	25.5%	21.6%
OBESITY	26.9%	32.0%	28.4%
IMMUNIZATIONS < 3 Yrs SENIORS FLU VACCINATION	70.1%	72.3%	70.7%
SENIORS PNEUMONIA VACCINATION	68.5%	72.1%	74.0%
LIMITED ACTIVITY DAYS (AVG)	4.3	5.2	4
POOR MENTAL HEALTH DAYS (AVG)	3.5	4.2	3.4
POOR PHYSICAL HEALTH DAYS (AVG)	3.6	4.3	3.5
GOOD OR BETTER HEALTH RATING	85.5%	80.4%	86.3%
TEEN FERTILITY (RATE PER 1,000)	22.1	30.4	12.9
FIRST TRIMESTER PRENATAL CARE	83.2%	76.3%	86.6%
LOW BIRTHWEIGHT	8.2%	8.2%	7.3%
ADULT DENTAL VISITS	71.3%	57.9%	69.3%
USUAL SOURCE OF CARE	81.0%	77.6%	82.1%

SOCIOECONOMIC FACTORS

NO INSURANCE	14.3%	19.8%	14.8%
POVERTY	13.2%	15.7%	11.4%

Priority Area - Tobacco

“An ounce of prevention is worth a pound of cure.”

- Benjamin Franklin

Tobacco use is known to be the single most preventable cause of premature death and is the leading cause of death in Oklahoma. It can increase the risk for a number of prevalent diseases.

The good news is that smoking is on the decline on the national and state level. According to America’s Health Rankings report, smoking in the past five years has decreased six percent, and cigarette sales in Oklahoma have decreased.



Community members participate in the "Tobacco Stops with Me" campaign during a 5K run in Moore.

But still, 23.7% of Oklahoma adults smoke, with 21.6% of Cleveland County smoking, well above the 17.9% national average.

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Tobacco use costs Oklahoman’s over \$2 billion in medical expenses and productivity every year.

- 2011 Oklahoma State of Health Report

Tobacco use is no longer just the problem of the individual but also the community as a whole. According to the Campaign for Tobacco Free Kids, annual health-care costs in Oklahoma directly caused by smoking are about \$1.16 billion. Residents’ state and federal tax burden from smoking-caused government expenditures is about \$550 per household.

According to the 2008 Youth Risk Behavior Survey (YRBS) nearly 700

Norman High school students participated in a survey indicating their use of tobacco. Of those, 38% indicated they bought their own cigarettes in a store or gas station and 30% of cigarette smokers smoke at least one cigarette every day. State-wide a total of 58% of students indicated they smoke at least one cigarette a day. We need to continue the encouraging efforts to reduce smoking.

With Cleveland County ranking above the national average on tobacco use, our community can be doing more to deter this dangerous habit.



Little Axe students proudly display to be a "Tobacco Free" school district.

Priority Area - Obesity

Life is not merely to be alive, but to be well.

~Marcus Valerius Martial

With obesity at epidemic levels, steps need to be taken to control this issue. While efforts continue on this front, communities must take efforts at the local level. Information to encourage, provide and educate on better nutrition and engage in more physical activities is a staple to reducing obesity and improving overall health.



School kids get active during the Coordinated Approach to Child Health (CATCH) Program.

In the past ten years, obesity increased from 19.7 percent to 32% of adults in Oklahoma. The Cleveland County obesity rate is at 28.4%, above the national average of 26.9%.



In the past ten years, obesity increased in Oklahoma from 19.7% to 32%.

- America's Health Ratings



The Oklahoma Youth Risk Behavior Survey shows our youth have been practicing poor habits with 85% of high school students not eating the recommended five servings of fruits and vegetables a day and 38% drinking soda at least one time per day. Statewide, 55% of high school students did not participate in physical activity for at least 60 minutes per day on five or more days in a week.

According to "Oklahoma's State of the State's Health Report", health care costs average \$395 more for a person under the age of 65 who is obese rather than a person of the same age who is not obese.

Estimated health care costs related to obesity for Cleveland County soar to almost \$17.5 million. These costs only go up when the 65 and over population are included.

With Cleveland County being over the national average in obesity, stroke, diabetes and lack of physical activity, it is clear obesity reduction is a priority in Cleveland County.



Priority Area – Child Health

“The first wealth is health” - Ralph Waldo Emerson

Our children are our future and their good health is a most precious value and asset. However, for the first time in history, children are not expected to live as long as their parents. Along with tobacco use and obesity, the focus is on other key areas for children including immunizations, infant mortality, injury prevention, and health education in schools.

More specifically, the targets are to reduce sleep-related deaths for infants, increase correct car seat usage and bike



Ole! Students take part in games and enjoy health benefits during after-school time.

● ● ●
Unintentional injuries are the leading cause of death for ages 5 to 44 in Cleveland County.

- State of County's Health Report



helmet use, increase immunizations, and

reduce access to substances of abuse. This wide-range of priorities most significantly affects the overall health and well-being of our children.

According to the 2008 Youth Risk Behavior Survey, 45% of Norman high school students surveyed said they had drank alcohol on one or more days in the last thirty days prior to the survey and 30% had five or more drinks of alcohol.

Safe driving for teens and adults carrying precious cargo is also vital. Seatbelts, correct child seat usage, helmets for cyclists, and not being distracted while driving are all key areas that impact unintentional injury numbers. According to the Oklahoma Safe Kids Coalition, four out of five car seats are not installed correctly.

Although Cleveland County fares better than the United States and Oklahoma statistics on immunizations, and infant deaths, more can always be done to invest and protect our children.



Strategic Plan - Tobacco

The Cleveland County health improvement planning committee is partnering with the Tobacco Free Cleveland County Coalition to address tobacco use prevention. The Tobacco Free Cleveland County Coalition builds on indicators in the Tobacco Settlement Endowment Trust (TSET) Tobacco Prevention grant in Cleveland County and the Healthy People 2020 objectives. These include: 1) Improve community wide engagement, 2) Prevent youth initiation of tobacco use, 3) Promote cessation services, and 4) Eliminate secondhand smoke exposure, 5) Advocate effective tobacco control policy, and 6) Effective use of media. Key policy changes essential to accomplish the objectives below include: passing of tobacco free parks in all of Cleveland County, Clean indoor air and youth access ordinances, 24/7 no tobacco use in Cleveland County schools, and Advocating for Restore of Local Control through the Oklahoma Legislature.

Objectives:

By 2016, reduce Cleveland County's adult smoking rate from 21.6% to 20%.

By 2016, reduce tobacco use in Cleveland County from 21.4% to 20%.

By 2016, increase annual average utilization of the Oklahoma Tobacco Helpline in Cleveland County from 139.75 to 150.

Strategy 1: Improve community wide engagement

- Increase coalition members that participate and promote activities and events related to tobacco prevention
- Increase community sectors or organizations represented addressing tobacco prevention
- Increase trainings provided to youth and adults related to tobacco prevention

Strategy 2: Prevent youth initiation of tobacco use

- Continue/expand Students Working Against Tobacco Groups
- Increase the number of schools, public or private, with a written 24/7 No Tobacco Use School Policy

Strategy 3: Promote tobacco cessation services

- Increase the use of 5A's Tobacco Cessation Counseling Program training with health care providers and use with clients
- Increase awareness and publicity for the 1800-Quit Now line
- Encourage providers to engage in tobacco cessation/encourage clients to understand benefits of tobacco cessation
- Promote and support the Quit Smart Cessation Program
- Sustain and grow Great American Smoke Out, Great American Spit Out, and Red Ribbon Week activities and awareness

Strategy 4: Eliminate secondhand smoke exposure

- Increase the number of member organizations and/or tobacco control partners that will implement the smoke free homes campaign
- Increase the awareness of the dangers of second and third-hand smoke

Strategy 5: Advocate effective tobacco control policy

- Promote and educate workplaces on tobacco free policies
- Increase indoor and outdoor voluntary smoke/tobacco free policies
- Reduce access to tobacco products
- Increase the number of tobacco free or smoke free park and/or recreation area policies

Strategy 6: Effective use of media

- Work with retailers on advertising placement
- Increase media pieces in newspaper, social media, radio, TV, and editorials that promote tobacco prevention

Strategic Plan - Obesity Reduction

The Cleveland County Health Improvement Planning Committee is working with the Nutrition and Fitness Coalition to address obesity reduction. The determinants of obesity in the United States are complex. A comprehensive approach to nutrition and fitness is needed to change social norms and influence the environments in which we live, work, and play. The obesity reduction work group recommendations endorse the Tobacco Settlement Endowment Trust (TSET) Nutrition and Fitness grant in Cleveland County and the Healthy People 2020 objectives. Their priorities include: 1) Improve community-wide engagement; 2) Improve access to & consumption of healthy, safe, and affordable food and beverages; 3) Encourage physical activity; 4) Increase school and out-of-school programs; and 5) Raise awareness about the importance of healthy eating and physical activity. Key policy changes needed to achieve the objectives below include: Support the Health Education in Schools Bill in the Oklahoma Legislature, after-school healthy eating and physical activity standards, and school and worksite healthy eating and physical activity standards.

Objectives:

By 2016, reduce Cleveland County's obesity rate from 28.4% to 27%.

By 2016, increase Cleveland County's fruit and vegetable consumption from 16.1% to 20%.

By 2016, increase Cleveland County's physical activity percent from 73.7% to 76%.

Strategy 1: Improve community wide engagement

- Increase coalition members that participate and promote activities and events related to obesity reduction
- Increase community sectors or organizations represented addressing obesity reduction
- Increase trainings provided to youth and adults related to obesity reduction
- Promote and increase Certified Healthy Restaurants & Communities

Strategy 2: Improve access to & consumption of healthy, safe, and affordable food and beverages

- Increase worksites, schools, and after-school programs with a nutrition policy supporting healthy eating
- Limit access to vending machines in schools/non-food fundraising
- Increase utilization and expand farmers markets
- Improve access to affordable healthy foods

Strategy 3: Encourage physical activity

- Increase communities with a land use or master plan that includes consideration for the safety and mobility of all users of all transportation systems
- Increase worksites, schools, and after-school programs with a policy that allows and encourages daily physical activity
- Increase walking programs/events
- Promote physical activity being included in every school day

Strategy 4: Increase school and out-of-school programs

- Implement before and after-school programs that encourage healthy eating and physical activity
- Support physical education in middle and high schools
- Increase Certified Healthy Schools
- Increase farm to school program

Strategy 5: Raise awareness about importance of healthy eating and physical activity to prevent obesity

- Increase media pieces in newspaper, social media, radio, TV, and editorials that promote healthy eating and active living messages
- Increase the proportion of clients who receive nutrition or weight education

Strategic Plan - Child Health

The children's health priority area addresses three strategies based on both Healthy People 2020 objectives and community strategies that include: 1) Improve infant health outcomes; 2) Improve health outcomes for children age 1 year to 18 years old; and 3) Increase advocacy for health policy. The community coalitions addressing these strategies are: 1) Cleveland County Immunization Coalition; 2) Cleveland County Fetal and Infant Mortality Action Team; 3) Cleveland County Turning Point; 4) United Way Success by Six Health & Wellness Committee; 5) Noble Wellness Committee; 6) Noble Community Coalition; 7) Moore Community Coalition; 8) The Healthy Community Coalition; and 9) University of Oklahoma Southwest Prevention Center Area Resource Center. Key policy changes essential to accomplish the objectives below include: Support the Health Education in Schools Bill in the Oklahoma Legislature.

Objectives:

By 2016, reduce Cleveland County's infant mortality rate from 6.3 to 6 per 100,000 population.

By 2016, reduce sleep-related deaths for infants.

By 2016, increase Cleveland County's immunizations < 3 years from 70.9% to 75%.

By 2016, increase car seat checks completed.

Strategy 1: Improve infant health outcomes

- Provide safe sleep education through workshops
- Perform infant death case reviews
- Provide car seat education and proper car seat installation
- Increase immunization rates through public events and media campaigns

Strategy 2: Improve health outcomes for children age 1 year to 18 years old

- Promote car seat and helmet use through safety events and media
- Provide car seats checks to community
- Collaborate with community partners to increase immunization awareness and rates
- Implement the Coordinated Approach to Child Health (CATCH) Program
- Educate health care providers and parents on the importance of infant immunizations and timely administration
- Provide smoke alarms and injury prevention education at no charge to the community
- Provide parenting resources and information through workshops or classes
- Address health inequities
- Offer healthy cooking classes to the community
- Encourage schools to provide health screenings with data collection
- Provide oral health education in schools and communities
- Host town hall forums to increase awareness about the issue of underage drinking & social host
- Reduce access to substances of abuse

Strategy 3: Increase advocacy for health policy

- Education on policy and advocacy opportunities
- Promote legislation changes through policy and advocacy
- Promote health education requirement in schools

Appendix

Cleveland County Health Improvement Planning Team

American Lung Association	Moore-Norman Technology Center
Cleveland County Health Department	Moore Public Schools
Cleveland County OSU Cooperative Extension Service	Noble Public Schools
Cleveland County Department of Human Services	Norman Public Schools
Cleveland County YMCA	Norman Regional Health System
Crossroads Youth & Family Services	Nottingham Apartments of Moore
Center for Children & Families	Norman Addiction & Information Center
City of Moore	OK Healthcare Authority
City of Noble	Oklahoma Institute for Child Advocacy
Cleveland County Pioneer Library System	Oklahoma Metro Transit
Copelin's Office Center	Oklahoma Parents as Teachers-Noble
Cleveland County Emergency Management Services	Rainbow Fleet
Department of Mental Health & Substance Abuse Services	Sarkeys Foundation
Girl Scouts of Western OK Association	Sodexo Nutrition Services
Health for Friends	Turning Point-Oklahoma State Department of Health
Infant Crisis Center	United Way of Norman
Moore Chamber of Commerce	University of Oklahoma

Cleveland County Board of Health

George Skinner, President
Peggy Stockwell
Michael Messerli
Thomas Thurston, MD
Alan Grubb



Community Initiatives and Resources

Cleveland County Turning Point, CCTP

Stephanie McGinnis
Community Health & Wellness Coordinator
Norman Regional Health System
901 North Porter Ave Norman, OK 73071
(405)307-3176 smcginnis@nrh-ok.com

Nutrition and Fitness Coalition

Sara Raney, Program Coordinator
Communities of Excellence Nutrition and Fitness Program
Norman Regional Health System
901 North Porter Ave Norman, OK 73071
(405)307-6602 sraney@nrh-ok.com
This grant through the Cleveland County Turning Point coalition (CCTP) will support the planning and implementation to promote healthy eating and physical activity.

Member Organizations:

Cleveland County Health Department, Cleveland County YMCA, OSU Cooperative Extension Service, Cleveland County Conservation District, City of Norman, City of Moore, Noble Public Schools, Oklahoma Healthcare Authority, United Way of Norman, Absentee Shawnee Tribe- REACH, NEXTEP Health Source, Center for Children & Families, Oklahoma Department of Mental Health & Substance Abuse, COCMHC, Oklahoma State Department of Health-Turning Point

Tobacco Free Cleveland County Coalition, TFCC

Travis Humphrey, Program Coordinator
Communities of Excellence Tobacco Program
Norman Regional Health System
901 North Porter Ave Norman, OK 73071
(405)912-3584 thumphrey@nrh-ok.com
This grant is in its 6th grant year and supports the planning and implementation of tobacco prevention and cessation.

Member Organizations:

Cleveland County Health Department, Norman Regional Health System, Sooner Success, American Lung Association City of Norman, City of Moore, City of Noble, City of Norman Police Department, University of Oklahoma, Southwest Prevention Coordinator, Big Brothers Big Sisters, Oklahoma Healthcare Authority, Medical Reserve Corps, Norman Public Schools, Moore Public Schools, Noble Public Schools, Oklahoma State Department of Health-Turning Point

Noble Wellness Coalition

Eva Dunn, Nutrition Services Coordinator
Noble Public Schools
(405) 872-5866 edunn@nobleps.com
The Noble Wellness Coalition focuses on the health of the citizens of Noble through Healthy Youth Screenings, bicycle and walking events, healthy cooking classes, promoting healthy nutrition policies and community gardens.

Member Organizations:

Cleveland County Health Department, Norman Regional Health System, Noble Public Schools, City of Noble, Oklahoma State Department of Health, Loving Care Hospice, Noble Chamber of Commerce, First Baptist Church of Noble, Noble-Oklahoma Parents As Teachers, Robin Stead-Attorney at Law, The University of Oklahoma, Health Exercise Science Division, Noble Police/Fire Department, Noble Chiropractic Care, Noble Pharmacy, Dental Lodge, The University of Oklahoma School of Nursing and Dentistry, Noble Farmer's Market, The Rock Fitness Center, Super C Grocery Store

Noble Community Coalition, NCC

Travis Humphrey, Program Coordinator
Communities of Excellence Tobacco Program
Norman Regional Health System
901 North Porter Ave Norman, OK 73071
(405)912-3584 thumphrey@nrh-ok.com
The Noble Community Coalition focuses on preventing substance abuse in the youth of Noble as well as improving children's health.

Member Organizations:

Noble Public Library, City of Noble, Cleveland County Health Department, Norman Regional Health System, Sooner Success, Noble Public Schools, Noble Police Department, McClain Bank, Office of Juvenile Affairs, Noble Parks Board National Guard, Norman Addiction & Information Center

Fetal Infant Mortality Action Team, FIMR

April Jewell, RN, Children First Program, Lead Nurse
Cleveland County Health Department
250 12th Ave NE Norman, OK 73071
405-579-2243 AprilJ@health.ok.gov
FIMR identifies factors associated with fetal death, determines barriers or gaps in service delivery, and develops recommendations for change. Cleveland County Community Action Team gathers information from the Case Review Team to put recommendations into action.

Member Organizations:

Cleveland County Health Department, Norman Regional Health System, Oklahoma City-County Health Department, Norman Pediatric Associates, United Way Success by Six, Center for Children and Families

Healthy Community Coalition, HCC

Stephanie McGinnis, RN
Norman Regional Health System

405-307-3176 smcginnis@nrh-ok.com

Healthy Community Coalition focuses on preventing obesity, hypertension, tobacco and improving nutrition.

Member Organizations:

Norman Regional Health System, Association of Central Oklahoma Governments, Arvest Bank, Bancfirst, City of Norman, Cleveland County OSU Extension Office, Cleveland County YMCA, Cleveland County Health Department, Health Back Home Health Care, Johnson Controls, Life care Oklahoma Home Health, Meals on Wheels, Moore Chamber of Commerce, Moore Norman Technology Center, Murrell, Hall, McIntosh & Co. PLLP, NCED – Marriott Postal Training Center, Norman Chamber of Commerce, New Look Media, Inc, Norman Public School System, Oklahoma Electric Cooperative, OfficeMax, Oklahoma State Department of Health, Rely On Rehab, Republic Bank & Trust, Sysco Foods of Oklahoma, United Way of Norman, University of Oklahoma, First American Bank

Moore Community Coalition, MCC

Kevin Walker
City of Moore

405-793-5000 KevinW@cityofmoore.com

The Moore Community Coalition focuses on preventing alcohol, tobacco, and other drugs, promotes walking & bicycle events, and improving child health.

Member Organizations:

Oklahoma Healthcare Authority, Moore Public Schools, Cleveland County Health Department, Norman Regional Health System, Oklahoma Department of Mental Health & Substance Abuse, Center for Children & Families, Moore Public Library, Platt College, Oklahoma Metro Transit, Moore Chamber of Commerce, Oklahoma State Department of Health-Turning Point, City of Moore, Crossroads Youth and Family Services, Department of Human Services, Moore-Norman Technology Center, Center for Children & Families

Cleveland County Immunization Coalition

Megan Scott

Cleveland County Health Department
250 12th Ave NE Norman, OK 73071

(405) 579-2252 MeganLS@health.ok.gov

The Cleveland County Immunization Coalition focuses on increasing childhood immunization rates.

Member Organizations:

Affordable Quality Care, Absentee Shawnee Tribal Clinic, MedImmune Pharmaceuticals, Merck Pharmaceuticals, Norman Pediatric Associates, Sanofi Pasteur Pharmaceuticals, GlaxoSmithKline Pharmaceuticals, Norman Public Schools Moore Public Schools, Oklahoma City County Health Department, Cleveland County Health Department, Novartis Pharmaceuticals

University of Oklahoma Southwest Prevention Center, Area Resource Prevention Center

Charlene Shroder

University Of Oklahoma

405-354-7899 Charlenes@ou.edu

The Area Prevention Resource center is the area prevention resource center focusing on preventing youth initiation of alcohol use and reducing adult binge drinking.

Member Organizations:

University of Oklahoma, Cleveland County Health Department, Norman Addiction Information Center, Norman Public Schools, Moore Public Schools, Oklahoma Department of Mental Health & Substance Abuse

United Way Success by Six Health and Wellness Committee

Christy Emig

United Way of Norman

405-364-3800 cemig@unitedway-norman.org

The Health & Wellness Committee focuses on the health of the early childhood population along with families.

Member Organizations:

Cleveland County Health Department, Norman Public Schools, Norman Regional Health System

Electronic Supporting Documents

Oklahoma Health Improvement Plan

http://www.ok.gov/health/organization/Board_of_Health/OHIP.html

Cleveland County State of the County's Health Report

<http://www.ok.gov/health/documents/Cleveland%20County%202010.pdf>

Oklahoma State of the State's Health Report

www.ok.gov/health/pub/boh/state/SOSH2011.pdf

Oklahoma Turning Point

www.okturningpoint.org

Get Fit Eat Smart Physical Activity and Nutrition State Plan

www.ok.gov/health/disease

Oklahoma State Plan for Tobacco Use Prevention and Cessation

www.ok.gov/health/documents/stateplan.pdf

2011 United Health Foundation Report

<http://www.americashealthrankings.org/OK/2011>

Youth Risk Behavior Survey

<http://www.norman.k12.ok.us/misc/yrebs/2008/>



Cleveland County Health Improvement Plan

For more information or to get involved, contact: Shari Kinney, DrPH, RN
Cleveland County Health Department (405) 321-4048

ShariK@Health.ok.gov <http://cleveland.health.ok.gov>

Scan Tag below for Cleveland County Health Department website:

