



COMMUNITY HEALTH IMPROVEMENT PLAN 2023-2027



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Acknowledgements

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Participating Agencies

Big Bend Area Health Education Center, Florida Department of Health Region 2B HIV/AIDS Program, Florida Department of Health Minority Health Program, Apalachee Center, Inc., Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc., UF Jefferson IFAS Extension Office, DISC Village, American Cancer Society, Jefferson County School District, North Florida College, ECB Publishing, Advantage Aging Solutions, TMH Memory Disorder Clinic, Jefferson County Fire Rescue, DSR Public Health Foundation

Participating agencies are representative of public and private health providers, child welfare, education, local government, local law enforcement, faith-based, social service, and mental health agencies that serve Jefferson County

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COMMUNITY HEALTH IMPROVEMENT PROCESS

The Department of Health in Jefferson County (DOH-Jefferson) utilized the Mobilizing for Action Through Planning and Partnership Process (MAPP) to develop the Community Health Assessment (CHA) and provide partners the information needed to choose health priority areas to address through the Community Health Improvement Plan (CHIP).

A Community Health Summit was held on February 2, 2023, in Monticello, Florida. Participants were given a meeting package that included 238 information slides on population demographics, socioeconomic barriers to health, chronic diseases, injury and violence, maternal and child health, reportable diseases, and social and behavioral health. A Community Themes and Strengths assessment to ascertain health priorities from residents was performed in 2022. Data slides from this assessment were also distributed to participants. A copy of meeting package with the slides is available in the Appendix.

The MAPP Forces of Change and Local Public Health Assessments were performed during the Community Health Summit. All of these data points were considered by participants during the breakout sessions. Participants broke out into groups by priority area to identify the issue(s) under the priority area, the barriers, the socioeconomic barriers, the definition of a successful outcome, next steps and the agencies involved.

After the break-out groups presented their findings, participants voted on the three priority areas to address in the next three to five years. The areas chosen to address were Chronic Disease, Maternal and Child Health, and Social and Mental Health. Listed below is the information from the break-out groups for all of the priority areas.

PRIORITY HEALTH ISSUES IDENTIFIED BY STAKEHOLDERS

Reportable Infectious Diseases

Issue	STDs in Adolescents
Barriers	School boards, funding opportunities, religion
Success	Reduced rate of STDs, Reduced number of teen pregnancies, Policy changes for sex education, Higher levels of sex education in schools, Access to preventive measures
Socioeconomic Barriers	Education, Social and Community Context
Next Steps	Educate school board and community, provide access to condoms and birth control, access to sex education
Agencies Involved	DOH-Jefferson and Madison Sexual Risk Avoidance Education Program, School board, Possible funders

Chronic Diseases

Issue	Diabetes, Obesity, Lung Cancer and Heart Disease
Barriers	Lack of providers, specialty care providers, limitations of insurance plans
Success	Decrease in rates, increase in available services and increase in health literacy
Socioeconomic Barriers	Transportation, Access to Care, Affordable Health Insurance, Provider Staff Turnover
Next Steps	Refer to CHIP committee for objectives and action plan, connect with faith-based leaders, utilize trusted businesses.
Agencies Involved	DOH-Jefferson, Local hospitals, Big Bend AHEC, Jefferson County School District, Extension Office, Local physicians

Maternal and Child Health

Issue	Access to newborn and child health care
Barriers	No full-time provider
Success	Access to local pediatrician five days per week
Socioeconomic Barriers	Access to health care, education, racial discrimination
Next Steps	Refer to CHIP Committee for objectives and action plan
Agencies Involved	DOH-Jefferson, Healthy Start Coalition of JMT, Private clinicians, Medical schools

Injury and Violence

Issue	Gun violence, domestic violence
Barriers	No background checks, no adequate training, lack of funding, no leadership
Success	Fewer school shootings, more security, more trainings, fewer social platforms, more gun laws
Socioeconomic Barriers	Access to mental health services
Next Steps	Impact children through schools
Agencies Involved	Law enforcement, School district, Department of Children and Families, Hospitals, Mental health agencies, EMS

Social and Behavioral Health

Issue	Service Provision in the School
Barriers	Access, lack of providers, stigma
Success	Increase in service provision, decrease in suicide and negative events, decrease in stigma, more trust
Socioeconomic Barriers	Transportation, access to services, health literacy
Next Steps	Education starting in elementary school, refer to CHIP committee for objectives and action plan
Agencies Involved	Apalachee Center, Inc., DISC Village, Private clinicians, Big Bend AHEC, Jefferson K-12 School, private schools

IDENTIFICATION OF COMMUNITY ASSETS AND RESOURCES

A more complete identification of community assets and resources will take place within each priority area subcommittee to avoid duplication of services and identify gaps in services. The DOH-Jefferson Minority Health Program will coordinate with 2-1-1 Big Bend to ensure that community resources are current and accurate. Below is an asset list that was generated during the Forces of Change Assessment

City/County Institutions	Associations/Organizations
Florida Department of Health - Jefferson County	Tallahassee Memorial Hospital
Jefferson Emergency Operations Center	Apalachee Center
Jefferson County Sheriff's Office	Healthy Start Coalition of Jefferson, Madison, Taylor Counties, Inc.
Jefferson Correctional Institution	Faith-based Community
Big Bend Transit	Kids Incorporated of the Big Bend
Jefferson Senior Citizens Center	Department of Children and Families
City and County Government	University of Florida County Extension Office
Jefferson County School District	Florida State University
Early Learning Coalition	Florida A&M University
Jefferson EMS	DISC Village
Legislative Delegation	Big Bend CARES
Shared Services Council	HCA Hospital
	TMH Physicians Partners

SETTING HEALTH PRIORITIES

Three CHIP subcommittees were formed to address Chronic Disease, Maternal and Child Health and Social and Behavioral Health. Each of the three subcommittees chose a chairperson from among community partners. DOH-Jefferson staff serve as support to the three chairpersons. The three CHIP subcommittees began meeting in March 2023 to develop goals, strategies, objectives, and action steps for each priority area. These were drafted during March through June 2023, and approved during June and July 2023. Initial meeting agendas and sign-in sheets are attached to this plan.

The Chronic Disease CHIP Subcommittee decided that it was important to generate an inventory of services provided for chronic diseases to prevent service duplication and identify gaps in services. After the inventory is completed, the next step would be to develop an interagency referral plan. At that point, the subcommittee can choose priority chronic diseases to address in an integrated manner.

Transportation and access to care barriers were resounding themes among all the subcommittee meetings, along with the need to have a comprehensive resource list. The DOH-Jefferson Minority Health Liaison and Minority Health staff will address these issues through an updated Minority Health Plan. Progress will be reported at quarterly meetings of each subcommittee.

All long-term goals, strategies, objectives and action steps are listed below by priority area.

CHRONIC DISEASE LONG-TERM GOAL 1

Reduce the incidence of chronic diseases by providing outreach, screening, and education services, as well as referrals to medical care.

STRATEGY 1

Prevent service duplication and identify service gaps in Jefferson and Madison Counties.

OBJECTIVE 1.1 AND ACTION STEPS

- Work with community partners to develop an inventory of chronic disease services provided in the area by March 31, 2024.
 - Develop a template that addresses outreach, screening, prevention education, self-management education, tobacco cessation and medical care for chronic diseases.
 - Identify service gaps and barriers to accessing services.
 - Work with 211 Big Bend to ensure that resource listing is correct.
- Method of measurement – Completed document is shared with partners and the community.
- Lead agency(ies) responsible for this objective – DOH-Jefferson and Madison

OBJECTIVE 1.2 AND ACTION STEPS

- Work with community partners to develop an interagency referral plan for chronic disease services provided in the area by June 30, 2024.
 - Develop a referral form template that can be used by all partners.
 - Include screening, prevention education, self-management education, tobacco cessation and medical care.
- Method of measurement – Completed document is shared with partners and the community.
- Lead agency(ies) responsible for this objective – DOH-Jefferson and Madison

MATERNAL AND CHILD HEALTH LONG-TERM GOAL

Decrease infant morbidity and mortality using maternal and child health data indicators and recommendations from Fetal & Infant Mortality Review (FIMR).

STRATEGY 1

Increase referrals to Healthy Start and wrap-around services by educating prenatal providers about resources available to Jefferson, Madison, and Taylor County patients.

OBJECTIVE 1.1 AND ACTION STEPS

- Increase prenatal referrals to Healthy Start by 10% from April 2023 baselines of 36 in Jefferson, 51 in Madison, and 16 in Taylor by January 31, 2025.
 - Collaborate with Leon County Healthy Start Coalition to host lunch and learn sessions with prenatal providers.
 - Plan schedule around the practices that see the majority of Jefferson, Madison, and Taylor patients, including TMH Family Residency.
 - Provide an overview of FIMR recommendations.
 - Discuss CONNECT.
 - Discuss the Healthy Start screening process and other methods of referrals.
 - Provide safe sleep materials and discuss safe sleep.
 - Provide referral information for mental health care and nutrition counseling.
 - Provide referral information for breastfeeding support.
 - Provide tobacco cessation referral materials and discuss the program.
- Method of measurement – annual count of Healthy Start clients in Well Family, sign-in sheets from lunch and learn sessions.
- Lead agency responsible for this objective – Healthy Start Coalition of Jefferson, Madison, and Taylor and Florida Department of Health Jefferson, Madison, and Taylor Healthy Start Programs

OBJECTIVE 1.2 AND ACTION STEPS

- Incorporate education videos into OB practice waiting room video loops or alternative for at least five (5) OB providers by January 31, 2025.

- Work with providers to determine the best option for patients to see instructional videos.
- Prioritize subject matter if there are limits to the number of videos we can submit.
- Develop videos as needed.
- Submit videos to providers in the requested format.
- Upload videos to county health department loops.
- Check to make sure providers have the necessary equipment to play the videos.
- Check on the video availability- what is already available to us that we do not have to develop.
- Method of measurement – listing of videos to be distributed, agreement letters with private practices.
- Lead agency responsible for this objective – Healthy Start Coalition of Jefferson, Madison, and Taylor and Florida Department of Health Jefferson, Madison, and Taylor Healthy Start Programs

STRATEGY 2

Reduce the number of Sudden Unexpected Infant Deaths and Suffocation/Strangulation deaths by educating new parents, extended family members and the community about safe sleep and the dangers of co-sleeping.

OBJECTIVE 2.1 AND ACTION STEPS

- Decrease the number of sudden unexpected infant deaths and unintentional suffocation in bed deaths by 25% by June 30, 2025.
(Baseline 2017-2021 SUID Deaths = 1+3+0, Unintentional suffocation/strangulation in bed = 0+2+0)
 - Assess any safe sleep initiatives performed in the community and identify gaps.
 - Create a safe sleep marketing campaign or identify an existing campaign and implement by January 31, 2025.
 - Print media includes brochures, posters, newspaper articles, grocery cart inserts.
 - Social media includes formatted graphics designed for social media posts.
 - Audio/visual media includes short video, radio advertisements.
 - Develop marketing campaign implementation strategy and timeline.
 - Child Abuse and Death Review Committee (CADR)
 - Utilize Buy Back Program
- Method of measurement – Florida CHARTS
- Lead agency responsible for this objective - Healthy Start Coalition of Jefferson, Madison, and Taylor, Florida Department of Health Jefferson, Madison, and Taylor Healthy Start Programs, and Home Visiting Advisory Council

OBJECTIVE 2.2 AND ACTION STEPS

- Annually, 100% of Healthy Start and OB clients with inadequate infant sleeping arrangements receive counseling about the dangers of co-sleeping and receive assistance to create an adequate infant sleeping arrangement.
 - Healthy Start staff educate each client about safe sleep prior to delivery.
 - Healthy Start staff perform at least * home visit(s) after delivery for each client that includes an assessment of infant sleeping arrangements.
 - Healthy Start staff will counsel all clients who do not have adequate sleeping arrangements about the dangers of co-sleeping.
 - Healthy Start staff will provide assistance to the client that results in an adequate infant sleeping space.
- Method of measurement – Well Family, Healthy Start Program Spreadsheet
- Lead agency responsible for this objective- Healthy Start Coalition of Jefferson, Madison, and Taylor and Florida Department of Health Jefferson, Madison, and Taylor Healthy Start Programs

STRATEGY 3

Improve birth outcomes by providing mental health counseling, nutrition counseling and tobacco cessation counseling to pregnant women.

OBJECTIVE 3.1 AND ACTION STEPS

- Increase the number of pregnant women attending prenatal classes in Jefferson, Madison, and Taylor from April 2023 baseline of seven (7) to fifteen (15) by June 30, 2024.
 - Host two prenatal class series that are held after business hours.
 - Advertise classes in the community and with private OB providers.
 - Provide incentives for attendees.
 - Have one session dedicated to mental health and have the counselor present.
 - Have one session dedicated to nutrition and have the nutritionist present.
 - Document referrals and utilize funding streams for women who cannot afford to pay.
- Method of measurement – sign-in sheets with total attendees
- Lead agency responsible for this objective - Florida Department of Health Jefferson and Madison

OBJECTIVE 3.2 AND ACTION STEPS

- Annually, 100% of county health department OB clients receive a depression assessment and referral to counseling if score indicates the need.
 - Healthy Start clients are referred using Healthy Start funding.
 - OB clients not enrolled in Healthy Start are referred using Healthy Babies funding.
 - Determine if telehealth is an option.
- Method of measurement – Well family and HMS
- Lead agency responsible for this objective- Florida Department of Health Jefferson and Madison

OBJECTIVE 3.3 AND ACTION STEPS

- Annually, 100% of county health department OB clients with a BMI of 30+ are referred to nutrition counseling.
 - Healthy Start clients are referred using Healthy Start funding.
 - OB clients not enrolled in Healthy Start are referred using Healthy Babies funding.
 - Determine if telehealth is an option.
- Method of measurement – Well family and HMS
- Lead agency responsible for this objective - Florida Department of Health Jefferson and Madison

OBJECTIVE 3.4 AND ACTION STEPS

- Annually, 100% of county health department OB clients who use tobacco products or have a household member who uses tobacco products are referred to tobacco cessation counseling.
 - Document referral to Big Bend AHEC
- Method of measurement – HMS
- Lead agency responsible for this objective – Florida Department of Health Jefferson and Madison

STRATEGY 4

Improve birth outcomes by increasing the percent of pregnant women who waited at least 18 months between pregnancies.

OBJECTIVE 4.1 AND ACTION STEPS

- Decrease the percent of pregnant women with an interpregnancy interval < 18 months by 10% using 2021 baselines of 33.3% for Jefferson County, 40.2% for Madison County and 46.5% for Taylor County by June 30, 2025.
 - Door to door campaigns twice annually
 - Develop post-partum bag for women with promotional items and education information. Distribute to private OB practices and direct distribution at CHDs.
 - Marketing campaign
- Method of measurement – Florida CHARTS
- Lead agency responsible for this objective - Healthy Start Coalition of Jefferson, Madison, and Taylor and Florida Department of Health Jefferson, Madison, and Taylor Healthy Start Programs

OBJECTIVE 4.2 AND ACTION STEPS

- Annually, 100% of county health department OB clients receive family planning information and education during post-partum visit.
 - Choice of birth control is documented.

- Client is educated about the health benefits of baby spacing.
 - Method of measurement – Well family and HMS
 - Lead agency responsible for this objective – - Healthy Start Coalition of Jefferson, Madison, and Taylor and Florida Department of Health Jefferson, Madison, and Taylor Healthy Start Programs
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SOCIAL AND BEHAVIORAL HEALTH LONG-TERM GOAL 1

Reduce undiagnosed mental, behavioral and emotional health disorders, and substance use disorders in adults and children in Jefferson and Madison Counties.

STRATEGY 1A

Partner with Jefferson Community Partnership Schools, Jefferson County School District, Madison County School District, Department of Children and Families, public health departments, private clinicians and local behavioral health providers to address identified behavioral health and substance use disorder needs of children, and to address wrap-around services for the family unit.

OBJECTIVE 1.1 AND ACTION STEPS

- 100% of school district students identified with mental, behavioral or emotional health issues, as well as substance use disorders, are referred to direct care and wrap-around services during the 2023-2024 school year.
 - Host meetings with each school district individually to assess unmet needs and develop an action plan prior to the start of the school year.
 - Incorporate the use of Community Action Teams (CAT)
 - Promote student services through school and community social media, public service announcements and school parent meetings.
 - Utilize the developed resource list to provide referrals.
 - Method of measurement – quarterly aggregate data reports (tracking and reporting)
 - Lead agency(ies) responsible for this objective – school districts, local providers
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OBJECTIVE 1.2 AND ACTION STEPS

- Establish a telehealth option for school district students and their parents/guardians to address mental, behavioral and emotional health, and substance use disorders during the 2023-2024 school year.
 - Develop a student telehealth plan with each school district individually that ensures parent/guardian consent and patient confidentiality.
 - The telehealth plan will incorporate parent/guardian telehealth appointments either at the school, at home or at a local telehealth kiosk (i.e., health department) to address family unit issues and access wrap-around services.
 - Obtain school district approval of the telehealth plan.
- Method of measurement – quarterly aggregate data reports summarizing the number of student and parent/guardian telehealth appointments. (tracking and reporting)

- Lead agency(ies) responsible for this objective – school districts, local behavioral health providers

STRATEGY 1B

Partner with law enforcement victim’s advocates, local veteran’s affairs offices, elder care services, private clinicians, local mental health and substance use disorder providers to address identified behavioral health and substance use disorder needs of adults, and to address wrap-around services for the family unit.

OBJECTIVE 1.3 AND ACTION STEPS

- Establish three sites within the county that can host a kiosk in a Health Insurance Portability and Accountability Act (HIPAA) compliant room so that individuals can obtain therapy services or complete intake assessments to access treatment by December 31, 2027.
 - Investigate venues that could host kiosks including health departments, libraries, faith-based organizations, Probation office or courthouse, etc.
 - Verify the number of providers that can utilize a kiosk.
 - Create scheduling protocols for agencies using the telehealth equipment.
- Method of measurement – quarterly reports in numbers of clients served per kiosk (tracking and reporting)
- Lead agency(ies) responsible for this objective – local providers, DOH-Jefferson

OBJECTIVE 1.4 AND ACTION STEPS

- Expand access for adult in-person services by establishing three locations in each county by December 31, 2027.
 - Query behavioral health and substance use disorder providers to get recommendations for locations.
 - Partner with faith-based facilities to establish a location for in-person services.
- Method of measurement – Listing of locations in social marketing campaigns.
- Lead agency(ies) responsible for this objective – local providers, partner churches, DOH-Jefferson

SOCIAL AND BEHAVIORAL HEALTH LONG-TERM GOAL 2

Increase public awareness of the issues pertaining to mental health and substance use disorders and how to access resources in these areas.

STRATEGY 2

Create a marketing campaign that includes public service announcements, resource fairs and education presentations to highlight mental health and substance use disorder awareness and resources.

OBJECTIVE 2.1 AND ACTION STEPS

- Create up to 3 public service announcements (PSAs) through print media, social networking platforms, radio, and billboards on the topics of mental health and/or substance use disorders by December 31, 2027.
 - Develop a list of each group member’s social media accounts to coordinate a social media campaign.
 - Work with an individual or agency to develop a marketing campaign or utilize an existing campaign.
 - Develop a presentation template for agencies to use to promote utilization of local resources.
- Method of measurement – verification of PSA materials presented at quarterly meetings.
- Lead individuals or agency(ies) responsible for this objective – CHIP members (specifically identified)

OBJECTIVE 2.2 AND ACTION STEPS

- Include mental health and substance use disorder resources as a component to an overall regional resource list by December 31, 2027.
 - Work with 2-1-1 Big Bend and other sites that maintain resource lists.
 - Survey CHIP members about resource needs that are commonly requested and/or not known to be available.
 - Resource listings available in print and/or online formats
 - Engagement with listed resource agencies to participate in the monthly Minority Health resource fairs.
- Method of measurement – tracking the number of resource events and the vendors that participate.
- Lead agency(ies) responsible for this objective – local providers, DOH-Jefferson Minority Health Liaison.

TRACKING PROGRESS

DOH-Jefferson will generate an action plan template to track all priority area objectives with input from partners. The action items will be reviewed and updated by each subcommittee during the quarter. DOH-Jefferson will provide quarterly updates through the Performance Improvement and Measurement System (PIMS). DOH-Jefferson will generate an annual progress report that incorporates any changes or additions to objectives in the CHIP. Annual progress reports will be posted on the DOH-Jefferson website and on partner websites.

ALIGNMENT WITH STATE HEALTH IMPROVEMENT PLAN AND HEALTHY PEOPLE 2020

The alignment is listed below by priority health area.

CHRONIC DISEASE

CHIP Objective	SHIP Alignment	Healthy People 2030 Alignment
Work with community partners to develop an inventory of chronic disease services provided in the area by March 31, 2024.	Improve cardiovascular health by reducing new cases, disability and death from heart disease, stroke and other related illnesses.	Increase the number of community organizations that provide prevention services — ECBP-D07
Work with community partners to develop an interagency referral plan for chronic disease services provided in the area by June 30, 2024.	Improve cardiovascular health by reducing new cases, disability and death from heart disease, stroke and other related illnesses.	Increase the number of community organizations that provide prevention services — ECBP-D07

MATERNAL AND CHILD HEALTH

CHIP Objective	SHIP Alignment	Healthy People 2030 Alignment
Increase prenatal referrals to Healthy Start by 10% from April 2023 baselines of 36 in Jefferson, 51 in Madison, and 16 in Taylor by January 31, 2025.	Maternal and Child Health - Reduce infant morbidity and mortality. Reduce maternal morbidity and mortality	Increase the proportion of pregnant women who receive early and adequate prenatal care — MICH-08 Increase the health literacy of the population — HC/HIT-R01
Incorporate education videos into OB practice waiting room video loops or alternative for at least five (5) OB providers by January 31, 2025.	Maternal and Child Health - Reduce infant morbidity and mortality. Reduce maternal morbidity and mortality	Increase the proportion of pregnant women who receive early and adequate prenatal care — MICH-08 Increase the health literacy of the population — HC/HIT-R01
Decrease the number of sudden unexpected infant deaths and unintentional suffocation in bed deaths by 25% by June 30, 2025.	Maternal and Child Health - Reduce infant morbidity and mortality.	Increase the proportion of infants who are put to sleep in a safe sleep environment — MICH-D03 Increase the proportion of infants who are put to sleep on their backs — MICH-14

CHIP Objective	SHIP Alignment	Healthy People 2030 Alignment
Annually, 100% of Healthy Start and OB clients with inadequate infant sleeping arrangements receive counseling about the dangers of co-sleeping and receive assistance to create an adequate infant sleeping arrangement.	Maternal and Child Health - Reduce infant morbidity and mortality.	Increase the proportion of infants who are put to sleep in a safe sleep environment — MICH-D03 Increase the proportion of infants who are put to sleep on their backs — MICH-14
Increase the number of pregnant women attending prenatal classes in Jefferson, Madison, and Taylor from April 2023 baseline of seven (7) to fifteen (15) by June 30, 2024.	Maternal and Child Health - Reduce infant morbidity and mortality. Reduce maternal morbidity and mortality	Increase the health literacy of the population — HC/HIT-R01
Annually, 100% of county health department OB clients receive a depression assessment and referral to counseling if score indicates the need.	Maternal and Child Health - Reduce maternal morbidity and mortality	Increase the proportion of women who get screened for postpartum depression — MICH-D01
Annually, 100% of county health department OB clients with a BMI of 30+ are referred to nutrition counseling.	Maternal and Child Health - Reduce infant morbidity and mortality. Reduce maternal morbidity and mortality	Increase the proportion of women who had a healthy weight before pregnancy — MICH-13
Annually, 100% of county health department OB clients who use tobacco products or have a household member who uses tobacco products are referred to tobacco cessation counseling.	Maternal and Child Health - Reduce infant morbidity and mortality. Reduce maternal morbidity and mortality	Increase abstinence from cigarette smoking among pregnant women — MICH-10 Increase successful quit attempts in pregnant women who smoke — TU-15
Decrease the percent of pregnant women with an interpregnancy interval < 18 months by 10% using 2021 baselines of 33.3% for Jefferson County, 40.2% for Madison County and 46.5% for Taylor County by June 30, 2025.	Improve preconception and interconception health	Reduce the proportion of pregnancies conceived within 18 months of a previous birth — FP-02
Annually, 100% of county health department OB clients receive family planning information and education during post-partum visit.	Improve preconception and interconception health	Increase the proportion of adolescent females at risk for unintended pregnancy who use effective birth control — FP-11

SOCIAL AND BEHAVIORAL HEALTH

CHIP Objective	SHIP Alignment	Healthy People 2030 Alignment
100% of school district students identified with mental, behavioral or emotional health issues, as well as substance use disorders, are referred to direct care and wrap-around services during the 2023-2024 school year.	Reduce the impact of pediatric mental, emotional and behavioral health disorders. Reduce suicide behaviors and death. Reduce substance use disorders and drug overdose deaths.	Increase the proportion of adolescents with depression who get treatment — MHMD-06 Increase the proportion of children and adolescents with symptoms of trauma who get treatment — AH-D02
Establish a telehealth option for school district students and their parents/guardians to address mental, behavioral and emotional health, and substance use disorders during the 2023-2024 school year.	Reduce the impact of pediatric mental, emotional and behavioral health disorders. Reduce suicide behaviors and death. Reduce substance use disorders and drug overdose deaths.	Increase the proportion of adolescents with depression who get treatment — MHMD-06 Increase the proportion of children and adolescents with symptoms of trauma who get treatment — AH-D02
Establish three sites within the county that can host a kiosk in a HIPAA compliant room so that individuals can obtain therapy services or complete intake assessments to access treatment by December 31, 2027.	Reduce the impact of adult mental, emotional and behavioral health disorders. Reduce suicide behaviors and death. Reduce substance use disorders and drug overdose deaths.	Increase the proportion of people with substance use and mental health disorders who get treatment for both — MHMD-07
Expand access for adult in-person services by establishing three locations in each county by December 31, 2027.	Reduce the impact of adult mental, emotional and behavioral health disorders. Reduce the impact of pediatric mental, emotional and behavioral health disorders. Reduce suicide behaviors and death. Reduce substance use disorders and drug overdose deaths.	Increase the proportion of people with substance use and mental health disorders who get treatment for both — MHMD-07

CHIP Objective	SHIP Alignment	Healthy People 2030 Alignment
<p>Create up to 3 public service announcements (PSAs) through print media, social networking platforms, radio, and billboards on the topics of mental health and/or substance use disorders by December 31, 2027.</p>	<p>Reduce the impact of adult mental, emotional and behavioral health disorders. Reduce the impact of pediatric mental, emotional and behavioral health disorders. Reduce suicide behaviors and death. Reduce substance use disorders and drug overdose deaths.</p>	<p>Increase the proportion of people with substance use and mental health disorders who get treatment for both — MHMD-07 Increase the number of state health departments that use social marketing in health promotion programs — HC/HIT-D01</p>
<p>Include mental health and substance use disorder resources as a component to an overall regional resource list by December 31, 2027.</p>	<p>Reduce the impact of adult mental, emotional and behavioral health disorders. Reduce the impact of pediatric mental, emotional and behavioral health disorders. Reduce suicide behaviors and death. Reduce substance use disorders and drug overdose deaths.</p>	<p>Increase the proportion of people with substance use and mental health disorders who get treatment for both — MHMD-07 Increase the number of state health departments that use social marketing in health promotion programs — HC/HIT-D01</p>



Appendices List

Meeting Package with Data

Committee Meeting Agendas and Sign-in Sheets

CHIP Partner List for Jefferson

JEFFERSON COUNTY HEALTH SUMMIT

February 3, 2023

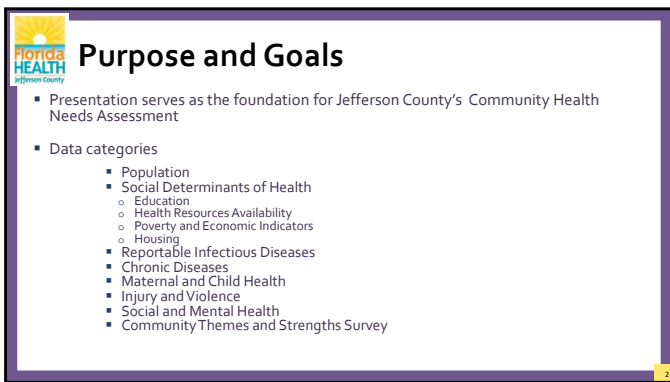
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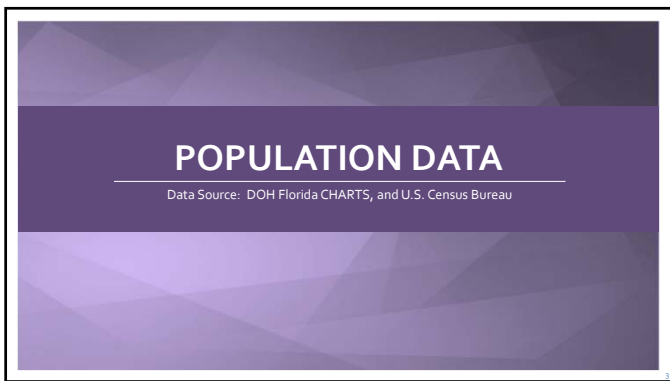
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Jefferson County



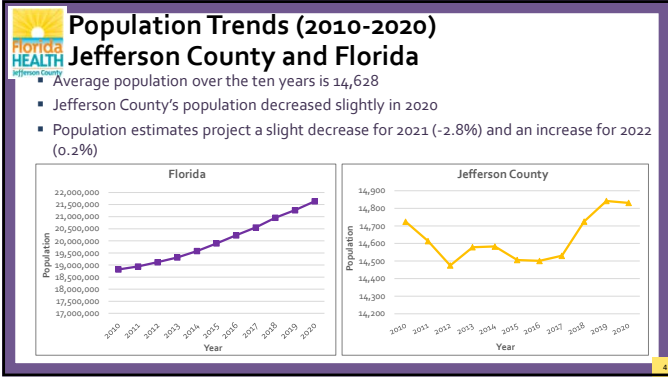
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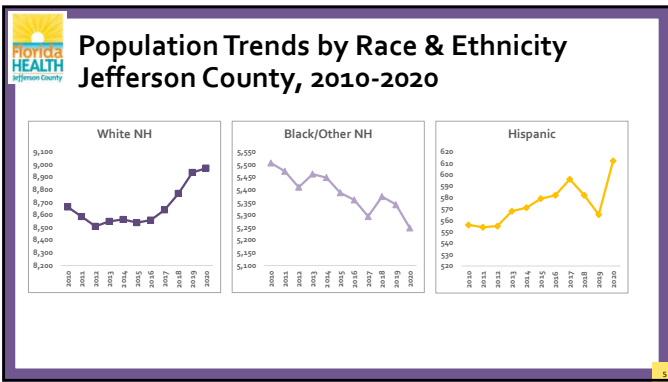
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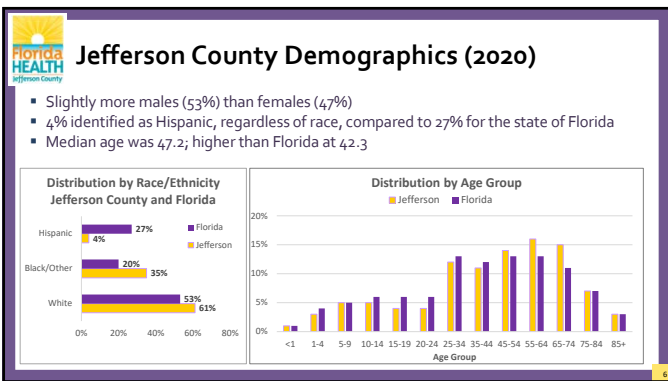
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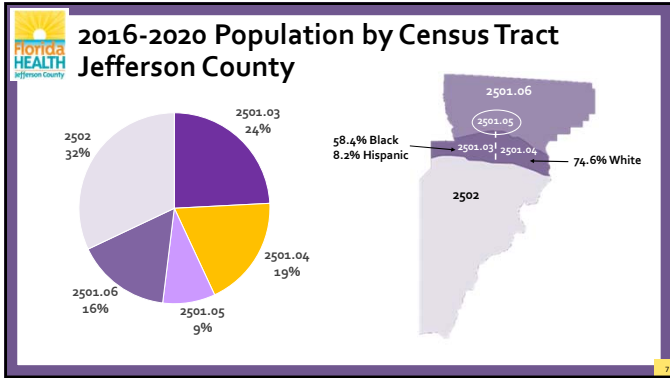
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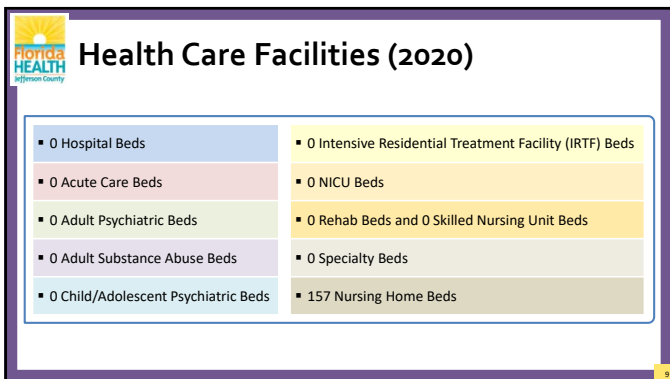
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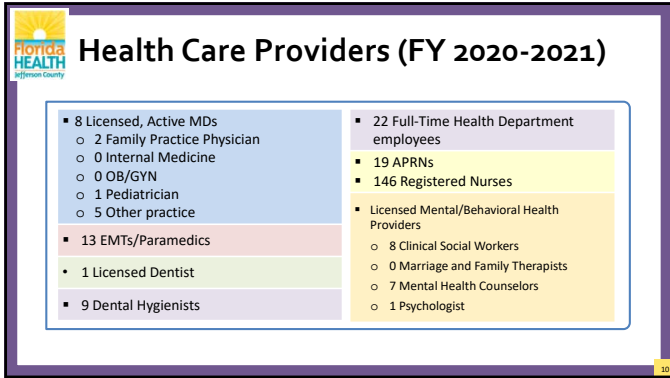
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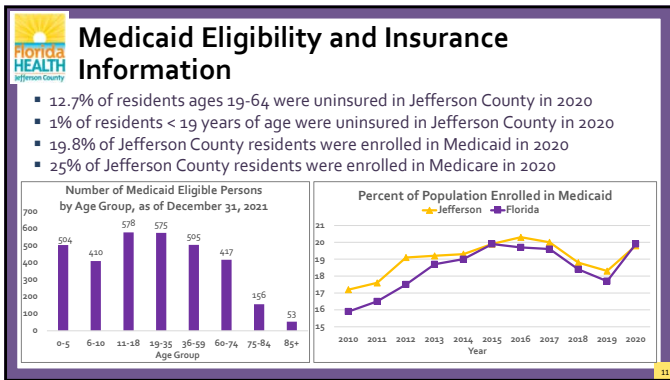
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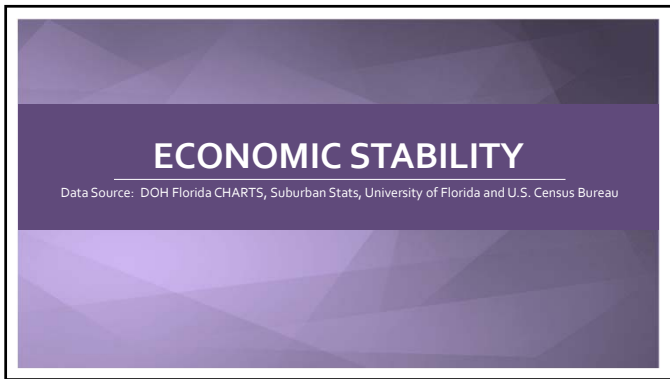
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12

Economic and Poverty Data (2020) Jefferson County

- Jefferson County ranked 26 of 67 counties for median household income. Median income increased from \$47,240 in 2019 to \$49,081 in 2020 (Median income for Florida was \$57,703)
- 34.9% of individuals in Jefferson County were living below 200% poverty level in 2020, compared to 32.9% for Florida
- 17.8% of persons ages 65+ in Jefferson County were living below 150% poverty level in 2020, compared to 20.0% for Florida

Individual Poverty

Year	Jefferson	Florida
2009	20.5	13.5
2010	18.5	14.0
2011	16.5	14.5
2012	18.5	15.5
2013	17.5	16.0
2014	17.5	16.5
2015	15.5	16.5
2016	15.5	15.5
2017	14.0	15.5
2018	14.0	14.0
2019	16.5	14.0
2020	34.9	32.9

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Percent of Individuals Below Poverty Level, by Race & Ethnicity, Jefferson County, 2010-2020

White NH

Year	Rate
2010	12.5
2011	13.0
2012	13.5
2013	9.5
2014	9.5
2015	8.5
2016	8.5
2017	8.5
2018	8.5
2019	9.5
2020	7.8

Black/Other NH

Year	Rate
2010	30.0
2011	23.0
2012	31.0
2013	31.0
2014	31.0
2015	31.0
2016	24.0
2017	24.0
2018	24.0
2019	31.0
2020	35.4

Hispanic

Year	Rate
2010	10.0
2011	10.0
2012	23.0
2013	17.0
2014	29.0
2015	29.0
2016	35.0
2017	38.0
2018	38.0
2019	26.0
2020	24.2

14

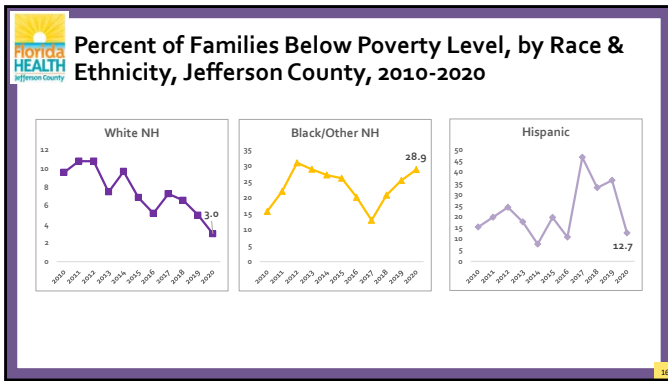
Economic and Poverty Data (2020) Jefferson County

- 27.8% of Jefferson County individuals under age 18 were living below poverty level in 2020, compared to 18.7% for Florida
- The percent of families with related children under the age of 18 in poverty for Jefferson County in 2020 was 20.8%, compared to 15.2% for Florida
- 42.4% of female head of household families with children under age 18 were living below poverty level in Jefferson County compared to 31.8% for Florida

Families Below Poverty

Year	Jefferson	Florida
2009	13.5	15.5
2010	11.5	16.0
2011	14.5	17.0
2012	17.5	18.0
2013	15.5	19.0
2014	16.5	19.5
2015	14.5	19.5
2016	11.5	18.5
2017	11.5	17.5
2018	12.5	17.0
2019	12.5	16.0
2020	20.8	15.2

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Feeding America Food Insecurity Data for Jefferson County, Florida 2020

- Feeding America estimates that the overall food insecurity rate for Jefferson County was 12.4%, with 1,770 residents who were food insecure
- Jefferson County food insecurity rates by race and ethnicity for 2020 are
 - Black, all ethnicities = 23.0%
 - White, non-Hispanic = 6.0%
 - Hispanic, Other race and multiracial data not available
- When looking at ages < 18, the food insecurity rate was 21.9% with 510 residents who were food insecure

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EDUCATION DATA

Data Source: DOH Florida CHARTS, DOE Education Information and Accountability Services

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Florida HEALTH
Jefferson County

Early Education Indicators

- In 2020, the percent of Jefferson County kindergarten children who were prepared upon entry was 32.3%, compared to 56.9% for Florida
- Some data were not reported for the years the schools were chartered to Somerset Academy
- In 2018, 12.2% of elementary school children were not promoted. This has not been reported since 2018
- Jefferson County 3rd grade students were less likely to have a passing English and Math FSA score, compared to Florida in school year 2020-21
 - The percent of students with passing English scores were 28% Jefferson County and 54% for Florida
 - The percent of students with passing Math scores were 43% Jefferson County and 51% for Florida

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Florida HEALTH
Jefferson County

Education Indicators

- The percent of Jefferson County middle school students not promoted was 16.3% in 2018, compared to 1.6% in Florida
- The 2020 school year graduation rate for Jefferson County was 81.8%, compared to 90% for Florida
 - 85% for males and 75% for females
 - 76% for Black, non-Hispanic students and 0% for White, non-Hispanic students. Hispanic data not available.
 - Refer to the full slide set for further data comparisons by Disadvantaged, and by students with disabilities

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Florida HEALTH
Jefferson County

Percent of Population Ages 25+ With No High School Diploma by Race & Ethnicity, Jefferson County, 2010-2020

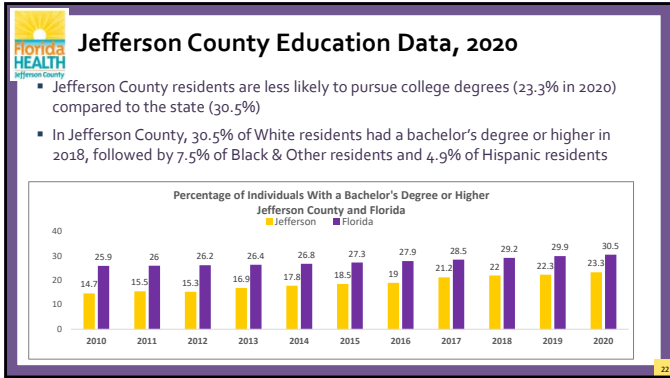
- In 2020, 11.5% of Florida residents did not have a high school diploma.
- The overall percent of Jefferson County residents with no high school diploma was 17.4% in 2020.

White NH

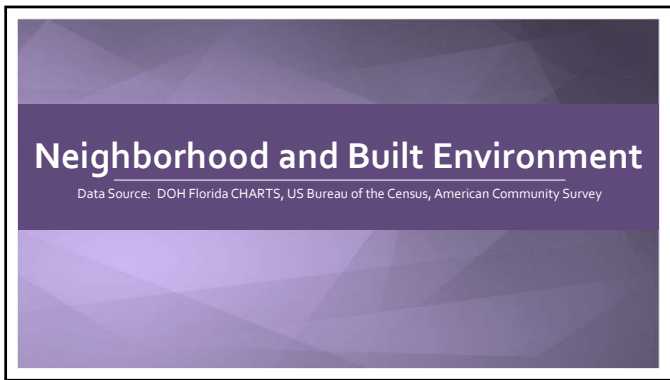
Black/Other NH

Hispanic

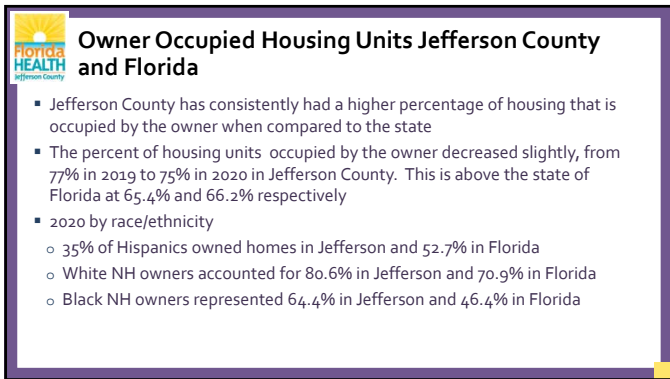
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Other Neighborhood and Built Environment Indicators, Jefferson County

Housing Quality, 2016-2020

- Housing quality indicators include plumbing, kitchen facilities, and home heating source
- 2.1% of homes in Jefferson County have no source for heat

Transportation to work, Ages 16+, 2016-2020

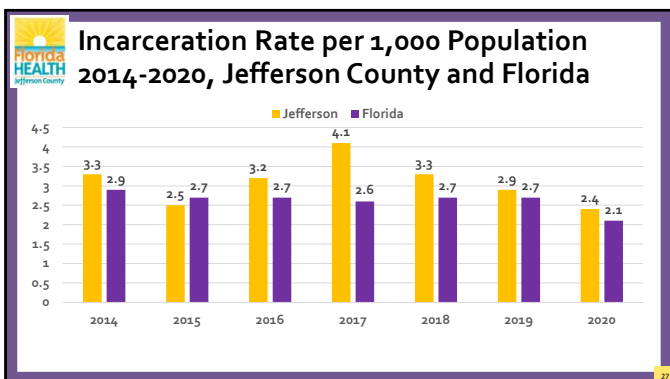
- 9.2% of Jefferson County residents ages 16+ carpoled to work during 2016-2020. Census tract 2502 had the highest percent of population that carpoled.
- 0% used public transportation. Note that Big Bend Transit is the only source of public transportation.
- The average travel time to work was 29.3 minutes
- 5.7% of households in Jefferson County did not have a vehicle. Census tracts 2501.04 and 2501.05 had the highest percent of population with no vehicle

25

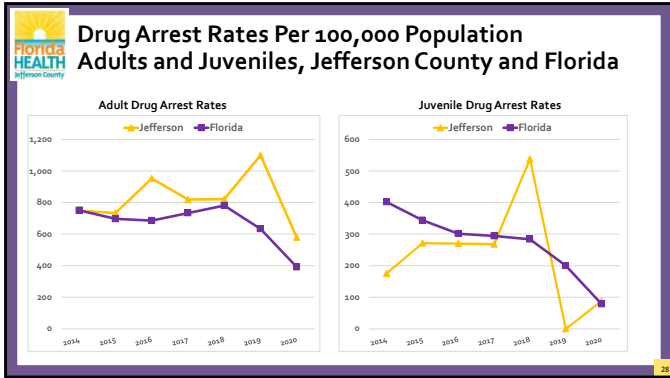
Social and Community Context

Data Source: DOH Florida CHARTS, Florida Department of Corrections, Florida Department of Juvenile Justice

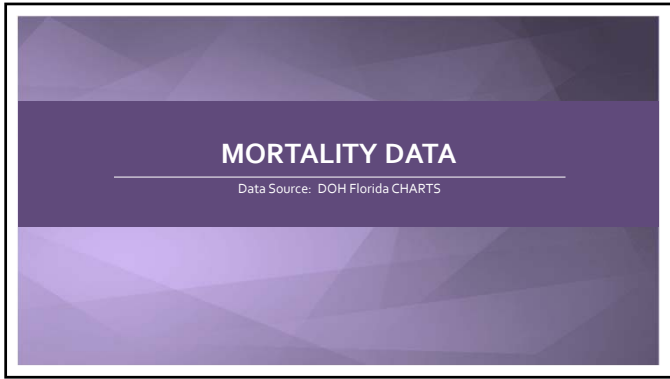
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10 Leading Causes of Death, 2020
Jefferson County (N=221)

Cause of Death	Deaths	Percent of Total
Malignant Neoplasm (Cancer)	46	21%
Heart Diseases	37	17%
COVID-19	13	6%
Diabetes Mellitus	12	5%
Cerebrovascular Diseases	7	3%
Chronic Lower Respiratory Diseases	7	3%
Unintentional Injury	7	3%
Influenza and Pneumonia	5	2%
Alzheimer's Disease	4	2%
Septicemia	4	2%
Suicide	4	2%


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Minority Population Causes of Death Jefferson County 2020 (N=70)

Cause of Death	Deaths	Percent of Total
Malignant Neoplasm (Cancer)	15	21%
Heart Diseases	13	19%
COVID-19	7	10%
Diabetes Mellitus	4	6%
Cerebrovascular Diseases	2	3%
Chronic Lower Respiratory Diseases	2	3%
Perinatal Period Conditions	2	3%

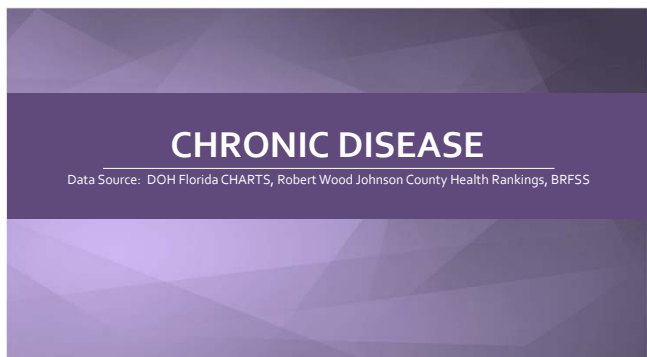
31



Minority Population Causes of Death Jefferson County 2020 (N=70)

Cause of Death	Deaths	Percent of Total
Alzheimer's Disease	1	1%
Anemias	1	1%
Essential Hypertension and Hypertensive Renal Disease	1	1%
In Situ, Benign and Uncertain or Unknown Behavior Neoplasms	1	1%
Influenza and Pneumonia	1	1%
Nutritional Deficiencies	1	1%
Septicemia	1	1%
Unintentional Injury	1	1%

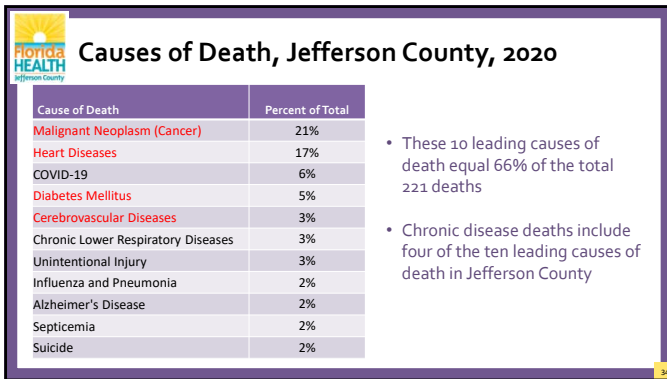
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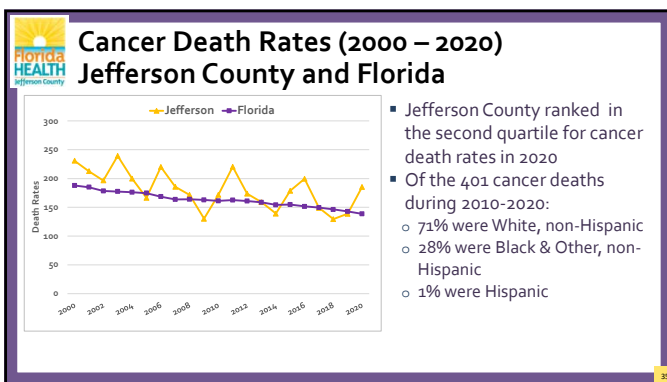
CHRONIC DISEASE

Data Source: DOH Florida CHARTS, Robert Wood Johnson County Health Rankings, BRFS

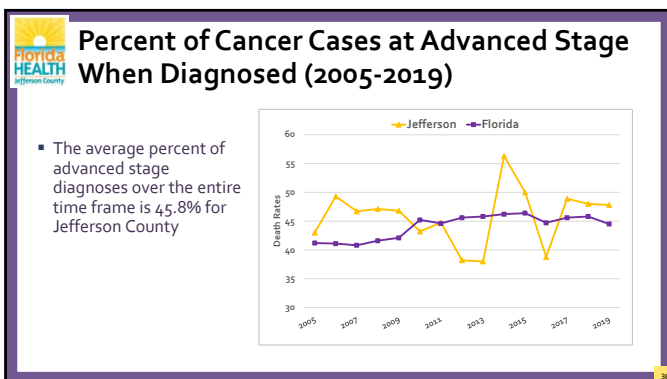
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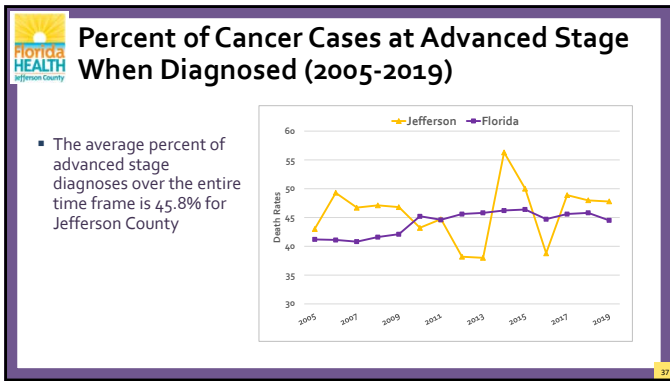
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Cancer Deaths by Type of Cancer Jefferson County, 2020

Florida HEALTH Jefferson County

Type of Cancer	Deaths
Lung	12
Bladder	3
Breast	3
Colorectal	3
Lymphoid & Related Tissue	3
Prostate	3
Cervical	2
Leukemia	2
Pancreatic*	2
Unknown Behavior Neoplasms	2
Brain & Central Nervous System	1

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Cancer Deaths by Type of Cancer Jefferson County, 2020 (cont'd)

Florida HEALTH Jefferson County

Type of Cancer	Deaths
Liver & Intrahepatic Bile Duct	1
Non-Hodgkin's Lymphoma	1
Ovarian	1
Stomach	1
Uterus	1
Esophagus	0
Hodgkin's Disease	0
Kidney & Renal Pelvis	0
Melanoma	0
Oral	0

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**Death Rates Due to Diabetes, 2000 – 2020
Jefferson County and Florida**

- Jefferson County ranked in the third quartile for diabetes deaths in 2020
- Diabetes Deaths 2010-2020 (Total of 73 deaths)
 - 38 or 52% were White, non-Hispanic, 35 or 48% were Black & Other, non-Hispanic, and 0% Hispanic
 - 42 or 58% were male and 31 or 42% were female

Year	Jefferson County	Florida
2000	40	20
2001	45	20
2002	20	20
2003	50	20
2004	25	20
2005	25	20
2006	50	20
2007	45	20
2008	20	20
2009	10	20
2010	45	20
2011	20	20
2012	10	20
2013	20	20
2014	20	20
2015	25	20
2016	45	20
2017	40	20
2018	25	20
2019	45	20
2020	55	20

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**Death Rates Due to Stroke, 2000 – 2020
Jefferson County and Florida**

- The Jefferson County death rate due to stroke has been lower than the state since 2018
- The 2020 rate per 100,000 population was 32.6, compared to 44.4 for Florida

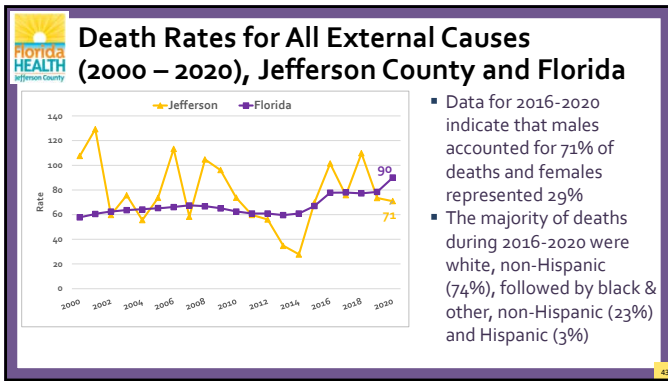
Year	Jefferson County	Florida
2000	70	50
2001	120	48
2002	80	45
2003	50	42
2004	65	40
2005	45	38
2006	55	35
2007	75	32
2008	45	30
2009	20	28
2010	65	25
2011	30	22
2012	50	20
2013	30	18
2014	45	15
2015	55	12
2016	30	10
2017	45	8
2018	30	6
2019	35	4
2020	32.6	44.4

41

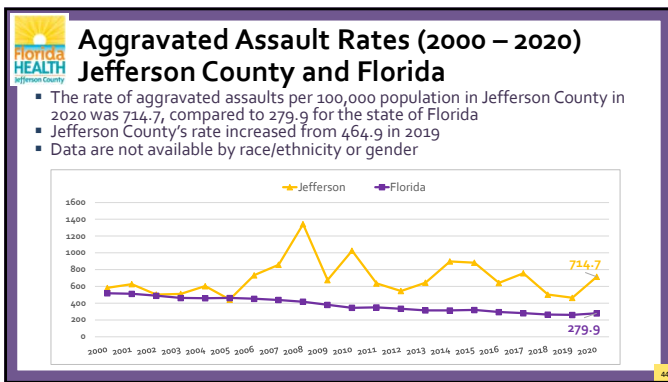
INJURY AND VIOLENCE

Data Source: DOH Florida CHARTS

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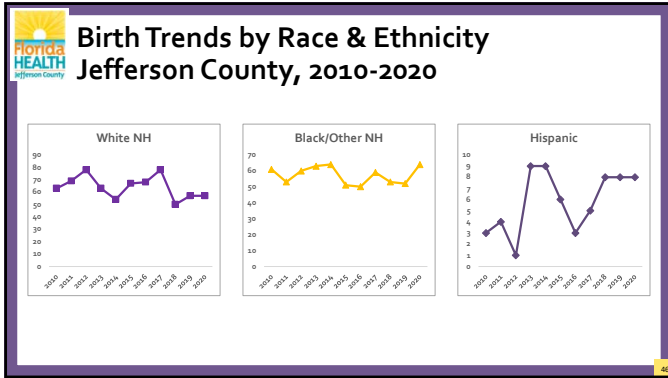
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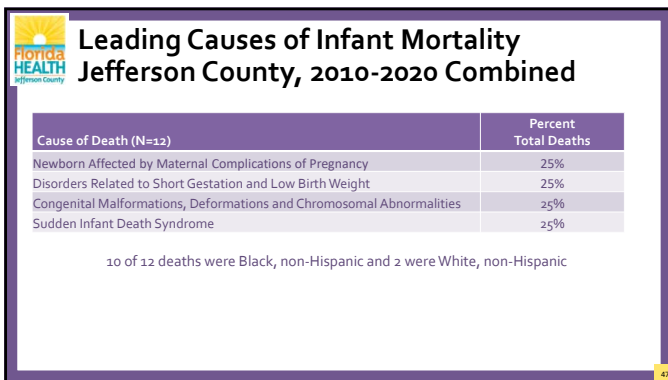
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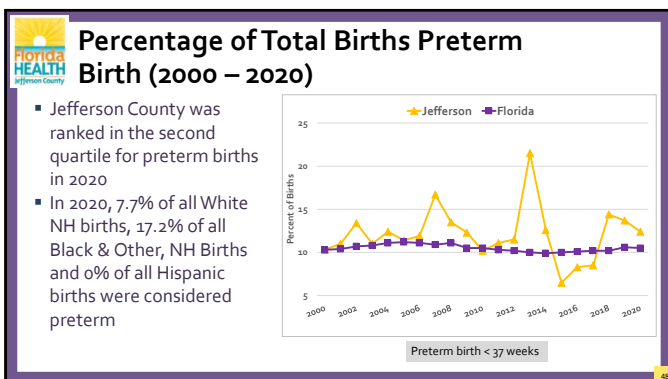
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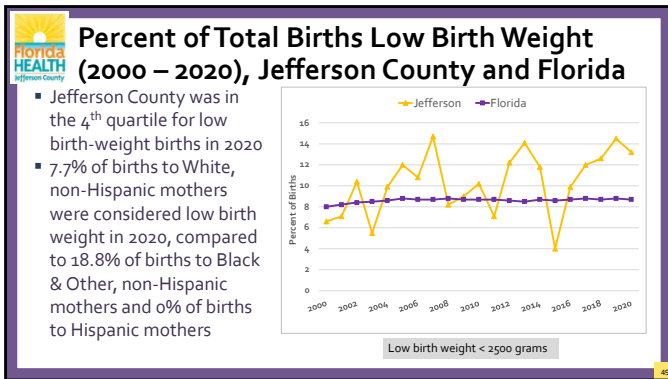
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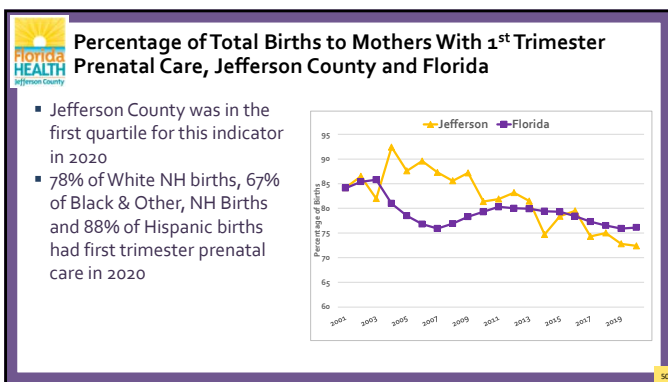
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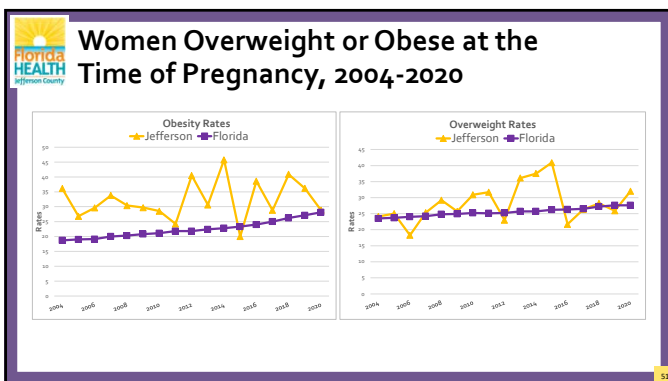
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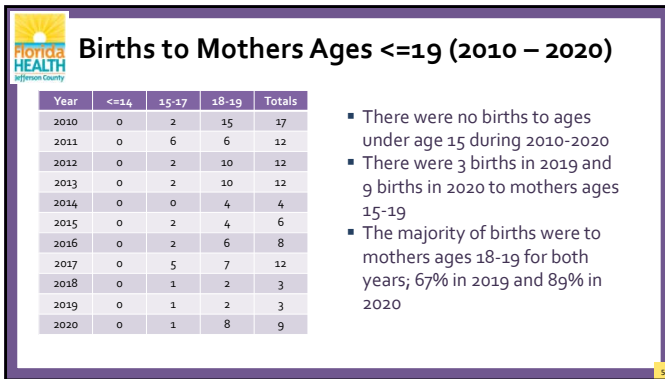
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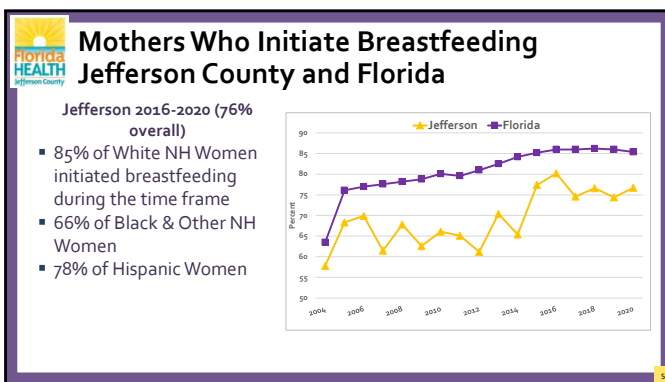
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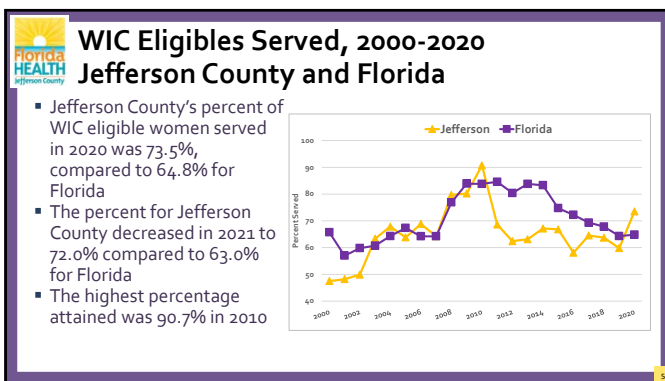
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WIC Children Ages 2+ Overweight or Obese
2003-2020, Jefferson County and Florida

- Percent of WIC children at least 2 years of age who are overweight or obese is defined as children receiving WIC services who have a body mass index (BMI) per age percentile greater than or equal to the 85th percentile.
- Data not available by gender or race/ethnicity

Year	Jefferson County (%)	Florida (%)
2003	26	30
2004	26	30
2005	28	30
2006	27	30
2007	23	30
2008	23	30
2009	24	29
2010	25	29
2011	31	29
2012	27	29
2013	34	28
2014	31	28
2015	22	28
2016	19	28
2017	19	28
2018	23	29
2019	28	29
2020	30	29

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REPORTABLE, INFECTIOUS DISEASES
 Data Source: DOH Florida CHARTS, Bureau of Communicable Diseases

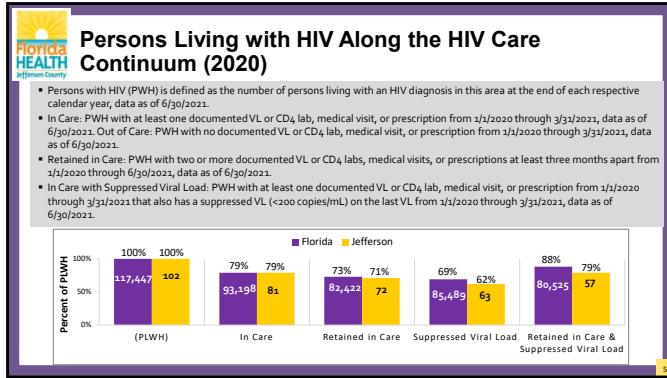
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HIV Infection 3-Year Discrete Rates
Jefferson County and Florida

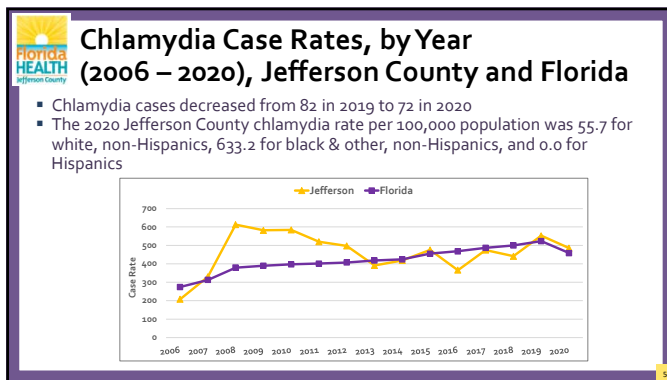
- There were 2 cases reported in 2019 and 2 in 2020
- Of the 22 HIV cases reported during 2010-2020:
 - 64% were Black & Other, non-Hispanic
 - 0% were Hispanic
 - 36% were White, non-Hispanic
 - 77% were Male and 23% were female

Year	Jefferson County Rate	Florida Rate
2000-02	31	47
2003-05	17	37
2006-08	18	33
2009-11	11	26
2012-14	13	24
2015-17	10	24
2018-20	14	20

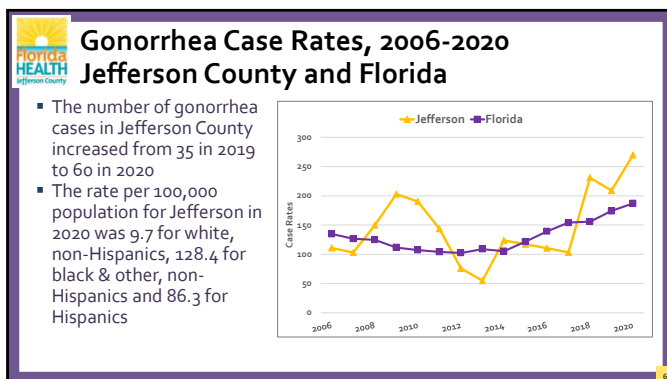
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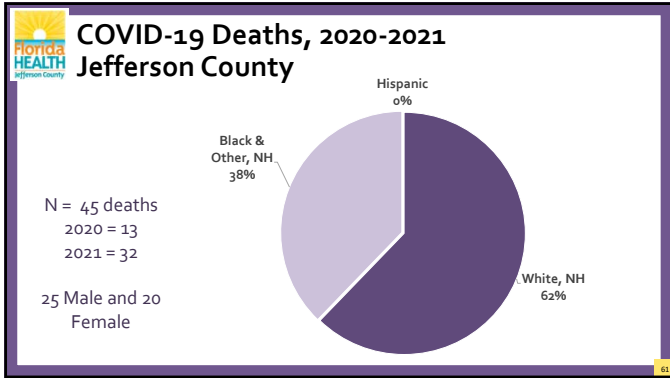
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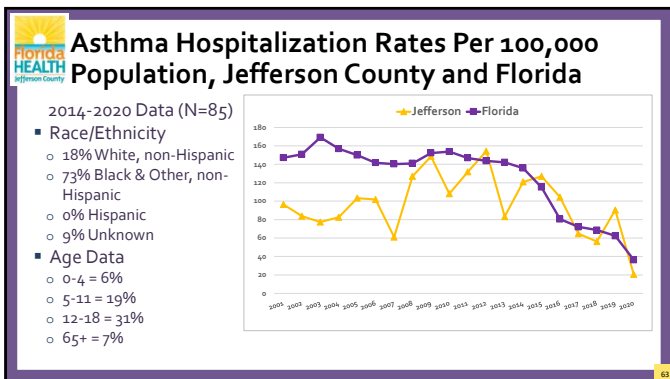
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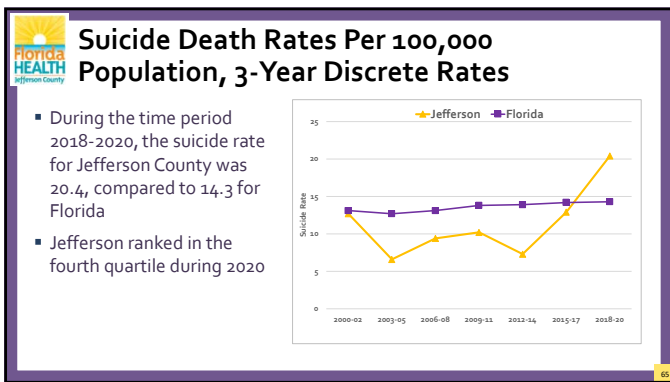


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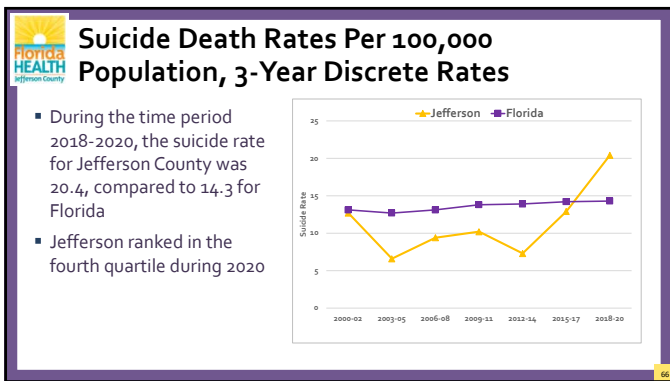
SOCIAL AND BEHAVIORAL HEALTH

Data Source: DOH Florida CHARTS

64



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2019-2020 Comparison – Jefferson County

- There were 4 suicide deaths in 2019 and 4 in 2020

By Gender

- There were 2 males and 2 females for both 2019 and 2020

By Race/Ethnicity

- White, non-Hispanics accounted for all 4 suicides in 2019 and in 2020

By Age Group

- In 2019, 1 was in age group 45-54, 1 was in age group 55-64 and two were ages 75+
- In 2020, 2 were ages 15-19 and 2 were ages 75+

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2019-2020 Comparison – Jefferson County

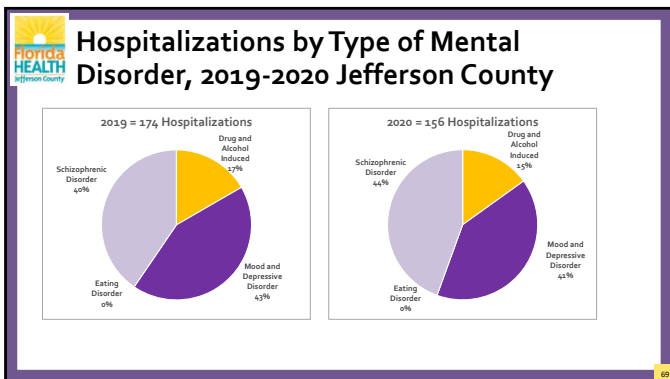
By Method

- In 2019, 1 suicide occurred using a firearm and 3 occurred through drug poisoning
- In 2020, all 4 occurred using a firearm

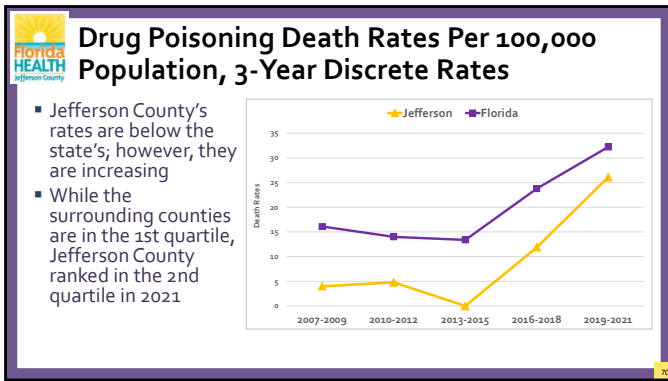
Non-Fatal Self-Harm Injuries

- There were a total of 18 reported in 2019, of which 7 were hospitalized and 11 were ER visits
- There were a total of <5 reported in 2020, all of which were hospitalized

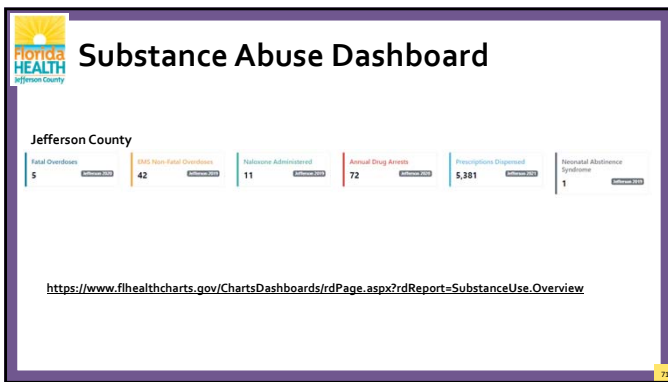
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2020 Overdose Data, Jefferson County

2020 Indicators	Jefferson
Opioid Overdose Deaths	1
Drug Overdose Deaths	5
Opioid Death Rate Per 100,000 Population	3.7
Drug Overdose Death Rate Per 100,000 Population	31.5
EMS Response to Suspected Non-Fatal Opioid Overdose	5
EMS Response to Suspected Non-Fatal Drug Overdose, Not Opioids	24
Non-Fatal Drug Overdose ER Visits	7
All Drug Non-fatal Overdose Hospitalizations	9
Naloxone Administered	7


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Prescriptions and Treatment, Jefferson County

2021 Indicators	Jefferson County
Number of Opioid Prescriptions Dispensed	4,113
Number of Unique Patients	1,343
Prescriptions Dispensed Per Patient	3.1
Adult Substance Abuse Program Enrollees	49
Child Substance Abuse Program Enrollees	353

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Risk Behaviors, Jefferson County

Indicators	Jefferson County
% Adults Who Engage in Heavy or Binge Drinking - 2019	18.7%
% Students Who Rode in a Car Driven By Someone Who Had Been Drinking - 2018	9.6%
% Students Using Vape Products with Marijuana Oil - 2020	n/a

Adult respondents to BRFSS survey and student respondents to YRBS survey

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Consequences, Jefferson County

Indicators	Jefferson County
Drug Arrests – 2020	72 71 adult 1 child
Alcohol Confirmed Motor Vehicle Crashes – 2019	7 1 fatality
Drug Confirmed Motor Vehicle Crashes - 2019	1 1 fatality
Neonatal Abstinence Syndrome – 2019	<5
Early Steps Clients Experiencing Neonatal Abstinence Syndrome – 2020	0

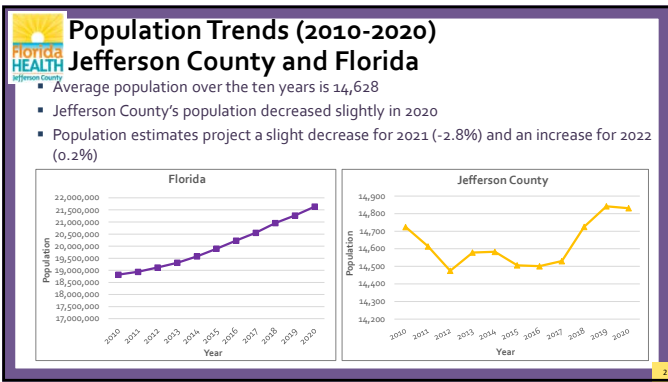
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Jefferson County Health Indicators

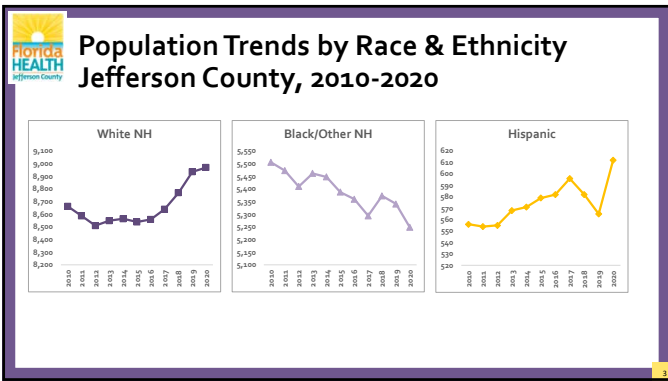
POPULATION DATA

Data Source: DOH Florida CHARTS, and U.S. Census Bureau

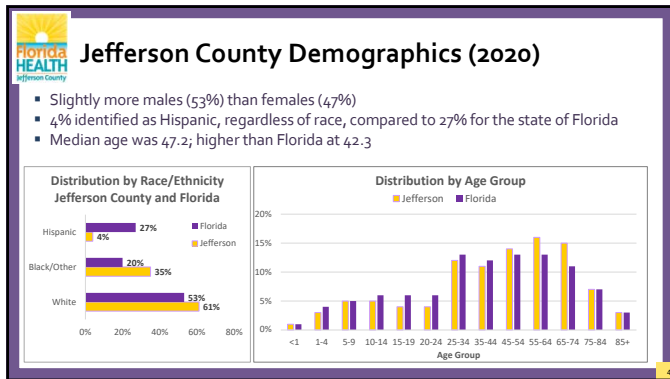
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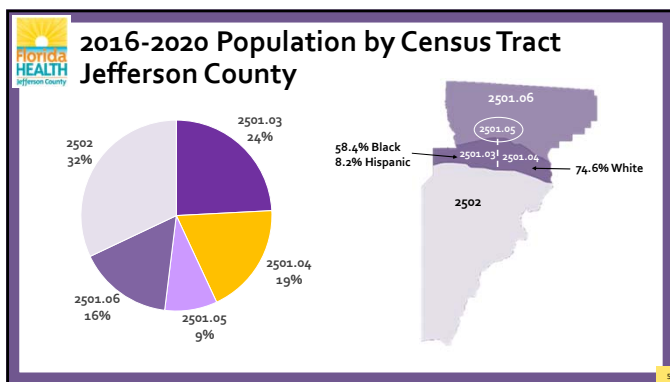
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5

2016-2020 Demographics by Census Tract Percent of Total Population, Jefferson County

Race/Ethnicity	2501.03	2501.04	2501.05	2501.06	2502
White	37.7	74.6	63.5	69.7	73.2
Black	58.4	20.3	34.3	28.6	24.8
Other	1.2	2.3	0.6	1.7	0.5
Multiracial	2.7	2.7	1.5	0.0	1.5
Hispanic (All Races)	8.2	6.5	1.2	3.3	1.1

Gender	2501.03	2501.04	2501.05	2501.06	2502
Males	74.3	47.1	40.2	44.6	49.2
Females	25.7	52.9	59.8	55.4	50.8

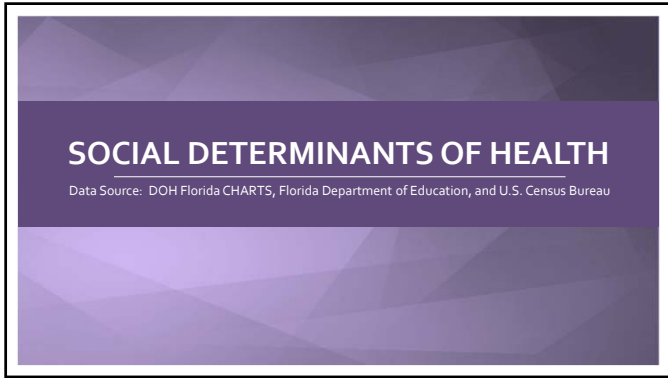
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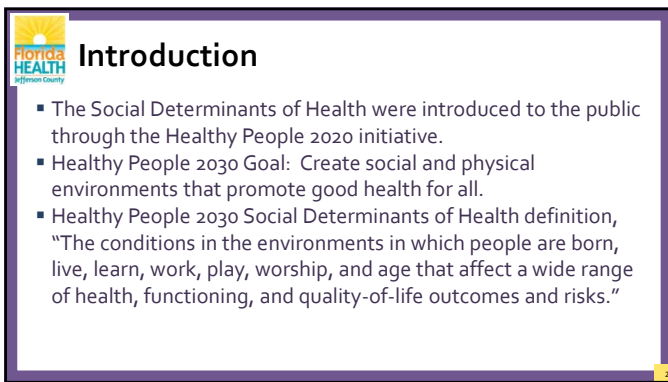
2016-2020 Demographics by Census Tract Percent of Total Population, Jefferson County

Age Group	2501.03	2501.04	2501.05	2501.06	2502
< 5	4.9	2.5	2.4	1.9	6.2
5-9	2.8	3.2	4.7	6.2	5.5
10-14	4.7	3.3	3.9	3.7	6.2
15-19	7.2	4.3	3.5	5.2	5.3
20-24	5.9	7.3	3.7	2	2.6
25-34	20.1	13.5	6.5	4.5	9
35-44	21.2	13.9	10.6	8.7	9.1
45-54	12.1	11.8	14.2	21.7	12.1
55-59	5.6	8.2	6	6.2	8.6
60-64	4.2	8.7	7.8	11.9	10
65-74	5.9	12.9	21.7	20	13.7
75+	5.6	10.4	15.2	8	11.7

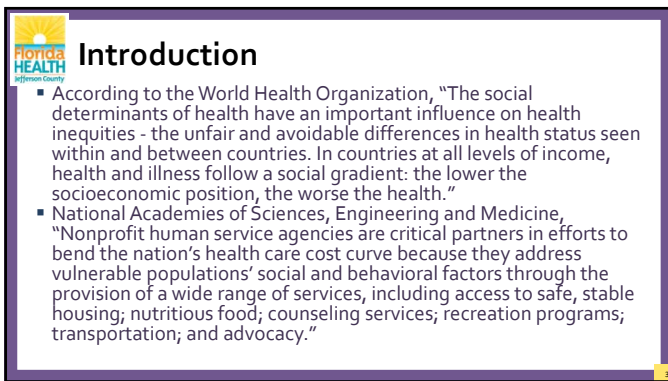
Social Determinants of Health



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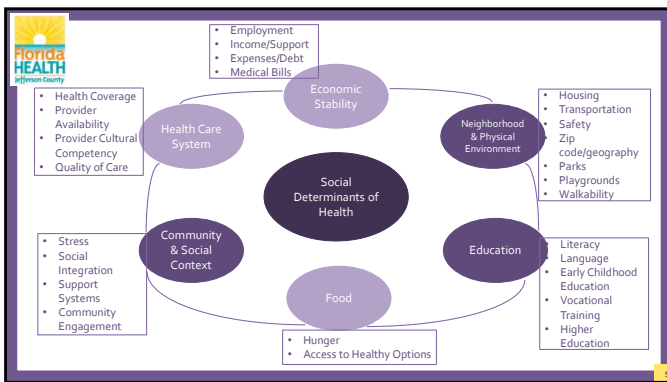
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SDOH Categories

- The rationale is that in order to fix health care, you have to fix these items first
 - Education
 - Economic Stability
 - Food
 - Social and Community Context
 - Health & Health Care
 - Neighborhood and Built Environment

4




5



Access to Health Care

Data Source: DOH Florida CHARTS, US Bureau of the Census, American Community Survey


6



Health and Health Care

- Included in this category are:
 - Access to Health Care
 - Access to Primary Care
 - Health Literacy
- Access to health care barriers to consider
 - Inadequate health insurance can result in lack of health care
 - Lack of insurance and/or high out-of-pocket costs means less preventive care
 - Lack of transportation means emergency only care
 - Physician shortages can mean longer wait times and delayed care


7



Health and Health Care

- Access to primary care barriers to consider
 - Limited or no access to primary care means less preventive health services and no early detection of health care issues
- Health literacy barriers to consider
 - Persons who do not speak English are less likely to receive health care services and preventive screenings

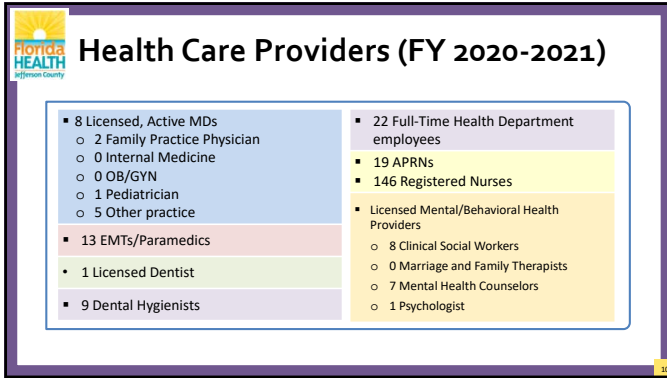
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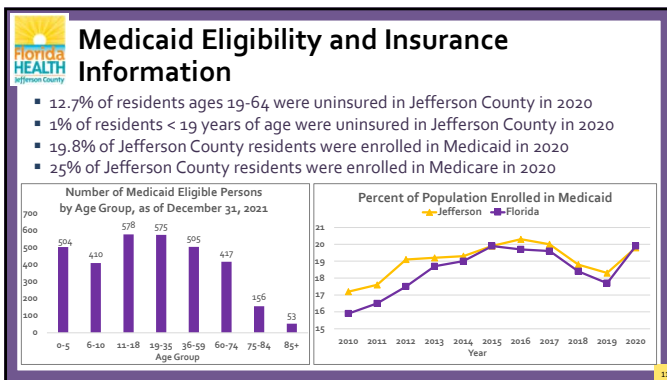
Health Care Facilities (2020)

▪ 0 Hospital Beds	▪ 0 Intensive Residential Treatment Facility (IRTF) Beds
▪ 0 Acute Care Beds	▪ 0 NICU Beds
▪ 0 Adult Psychiatric Beds	▪ 0 Rehab Beds and 0 Skilled Nursing Unit Beds
▪ 0 Adult Substance Abuse Beds	▪ 0 Specialty Beds
▪ 0 Child/Adolescent Psychiatric Beds	▪ 157 Nursing Home Beds

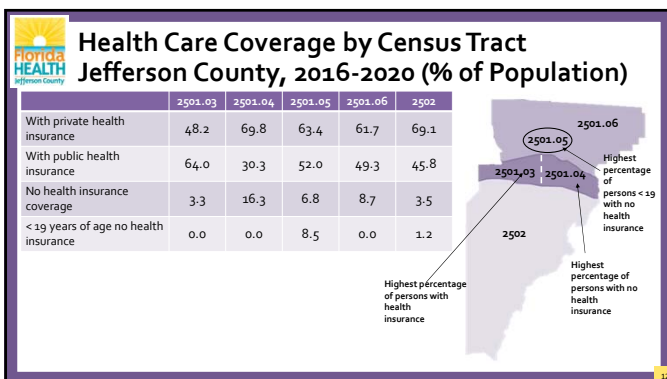
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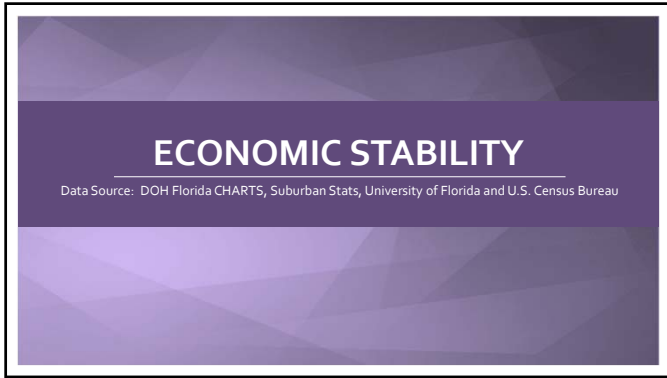
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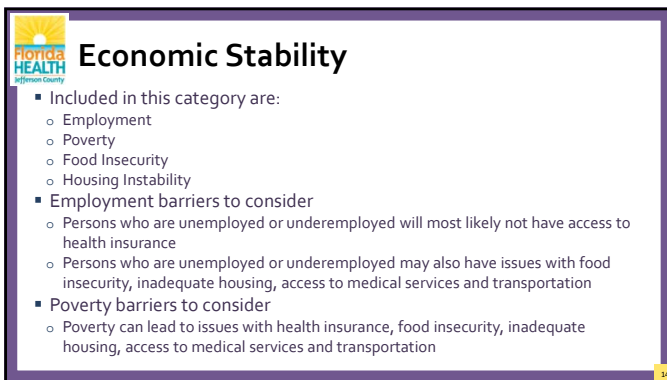
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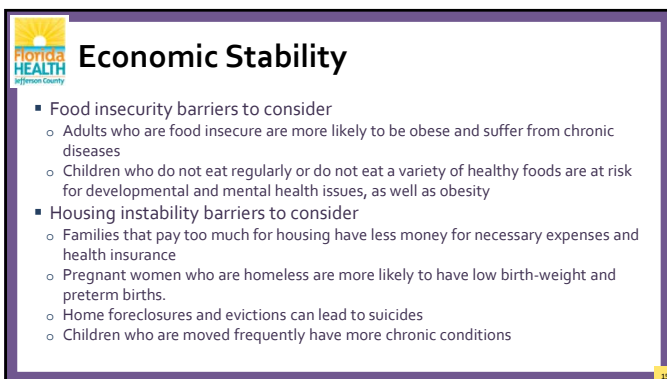
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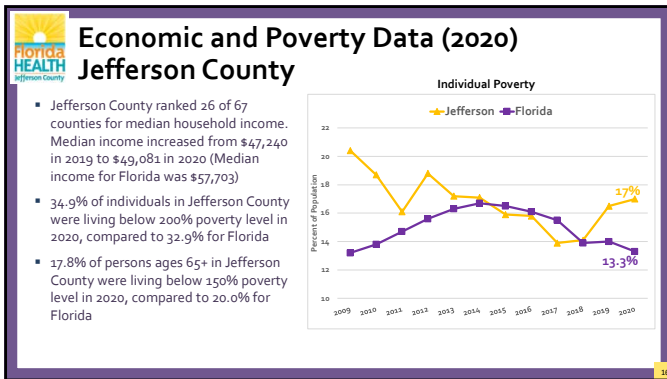
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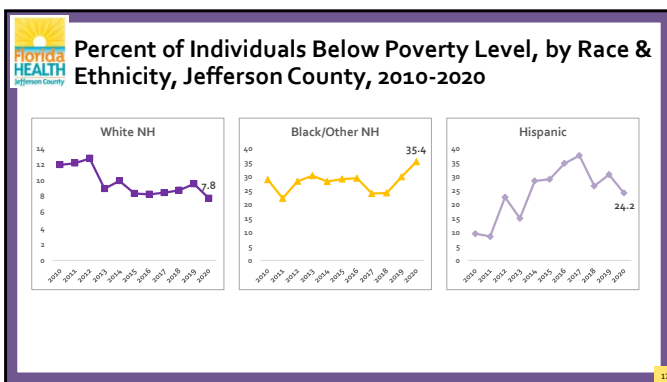
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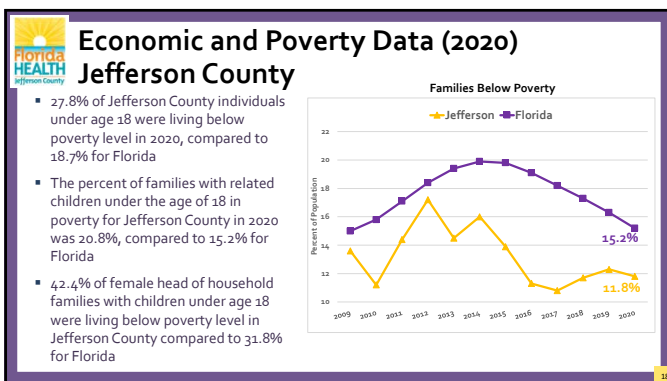
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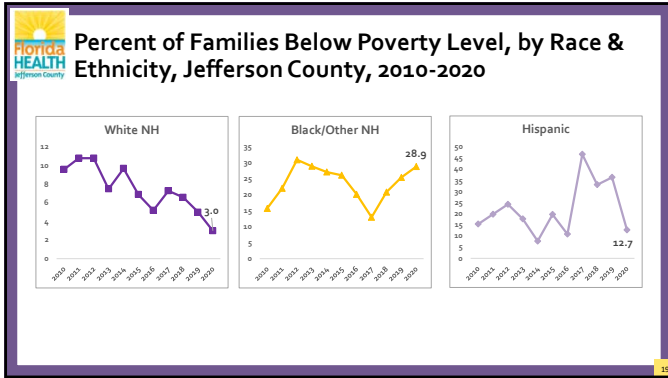
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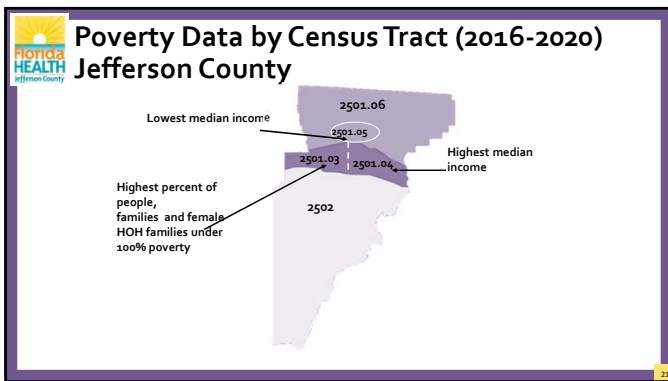


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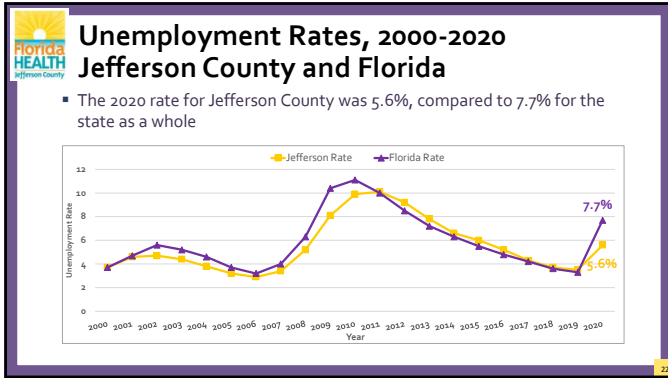
Poverty Data by Census Tract (2016-2020) Jefferson County

	2501.03	2501.04	2501.05	2501.06	2502
Median income (\$)	45,087	75,385	53,393	76,143	66,583
People under 100% of poverty (%)	38.3	11.1	19.6	9.5	14.7
Families under 100% poverty (%)	28.0	3.0	12.6	6.5	13.3
Female HOH families under 100% poverty (%)	32.7	25.4	21.7	33.3	37.4

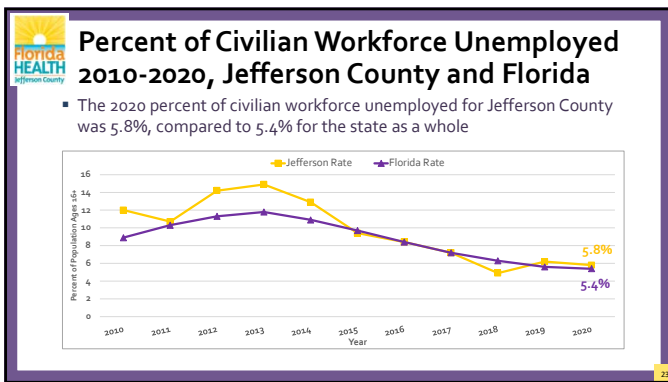
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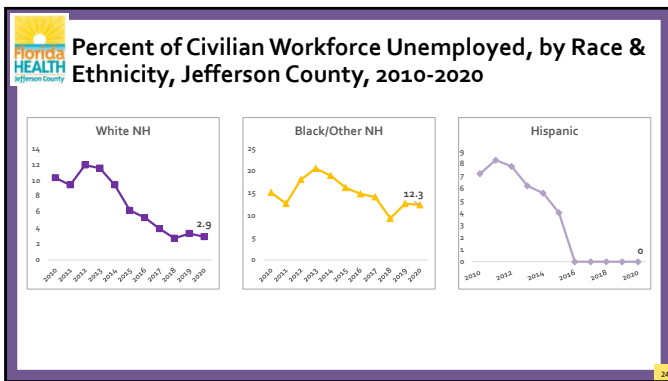
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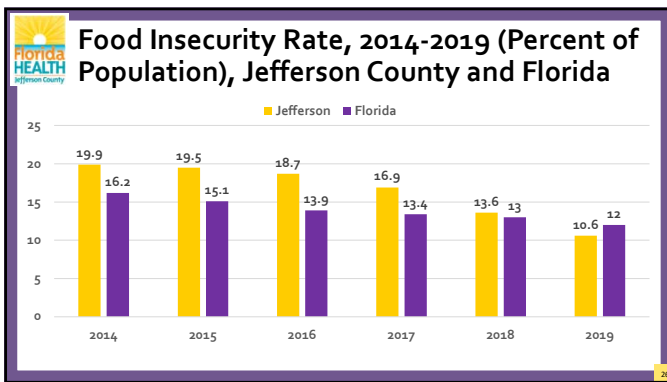
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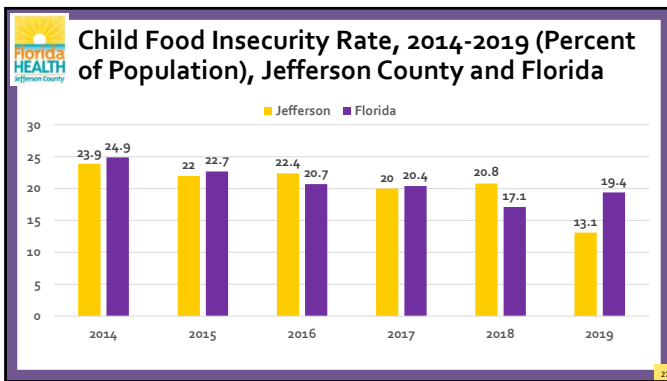
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Feeding America Food Insecurity Data for Jefferson County, Florida 2020

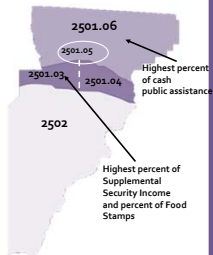
- Feeding America estimates that the overall food insecurity rate for Jefferson County was 12.4%, with 1,770 residents who were food insecure
- Jefferson County food insecurity rates by race and ethnicity for 2020 are
 - Black, all ethnicities = 23.0%
 - White, non-Hispanic = 6.0%
 - Hispanic, Other race and multiracial data not available
- When looking at ages < 18, the food insecurity rate was 21.9% with 510 residents who were food insecure

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Cash and Food Assistance, 2016-2020 by Census Tract, Jefferson County

	2501.03	2501.04	2501.05	2501.06	2502
% Population with Supplemental Security Income (6.1%)	17.2	0.5	6.4	6.6	5.0
% Population with Cash Public Assistance Income (2.1%)	3.8	0.0	0.7	6.4	1.0
% Population with Food Stamp/SNAP Benefits (11.9%)	29.8	7.2	14.2	8.8	9.1



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EDUCATION DATA

Data Source: DOH Florida CHARTS, DOE Education Information and Accountability Services


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Education

- Included in this category are:
 - Early Childhood Education and Development
 - Enrollment in Higher Education
 - High School Graduation
 - Language and Literacy
- Early childhood education and development barriers to consider
 - Children who do not receive early childhood education are less likely to read at grade level. This can lead to literacy and health literacy issues later in life.
- Enrollment in higher education barriers to consider
 - Lack of higher education can mean lesser-paying jobs with more safety hazards
 - Lack of higher education can result in lower quality housing
 - If literacy level is low, knowledge about health is also low
 - If parents did not attend college, it is less likely that the child will

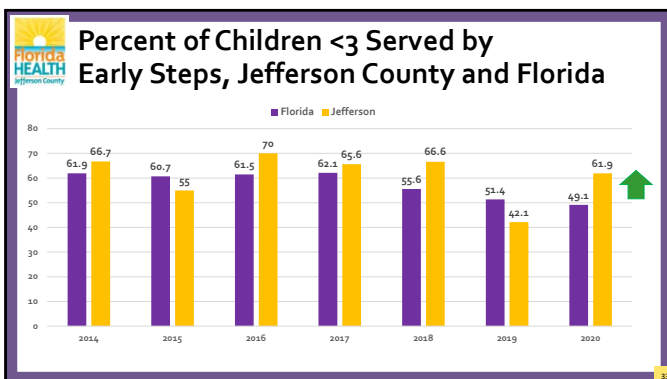
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Education

- High school graduation barriers to consider
 - Persons who do not graduate from high school are less likely to obtain employment that will support them and/or their families.
 - High schools with less funding rarely provide advanced or honors classes
- Language and literacy barriers to consider
 - Health literacy is linked to overall literacy

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School Readiness at Kindergarten Entry Percent of Total Children Entering Kindergarten

School Year	Jefferson	Florida
2017	30.8	53.9
2018	38.0	52.7
2019	29.8	53.4
2020	32.3	56.9

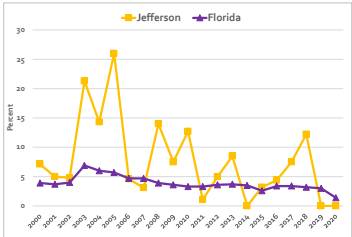
Based on Early Childhood Observation System (ECHOS) Scores
School Year = September through June

34




Elementary School Not Promoted 2000-2020, Jefferson County and Florida

- Data were not reported for Jefferson County for years 2019-2021
- Jefferson County schools operated through a charter as Jefferson Somerset K-12 from school year 2017-2018 through 2021-2022
- The Jefferson County school district began supervision again during 2022-2023




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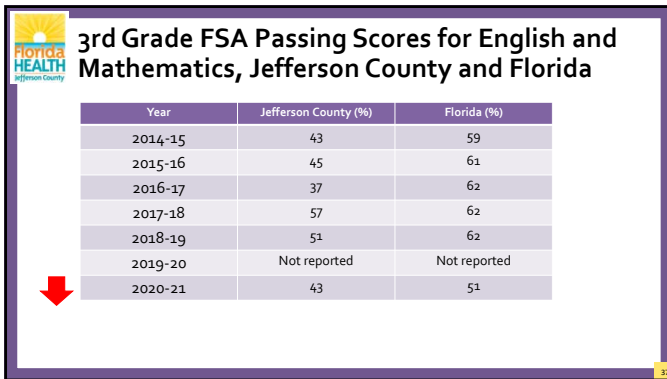


3rd Grade FSA Passing Scores for English and Mathematics, Jefferson County and Florida

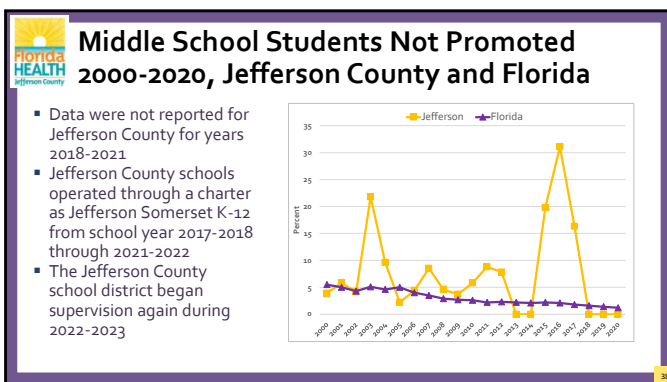
Year	Jefferson County (%)	Florida (%)
2014-15	25	54
2015-16	30	54
2016-17	41	58
2017-18	36	57
2018-19	45	58
2019-20	Not reported	Not reported
2020-21	28	54



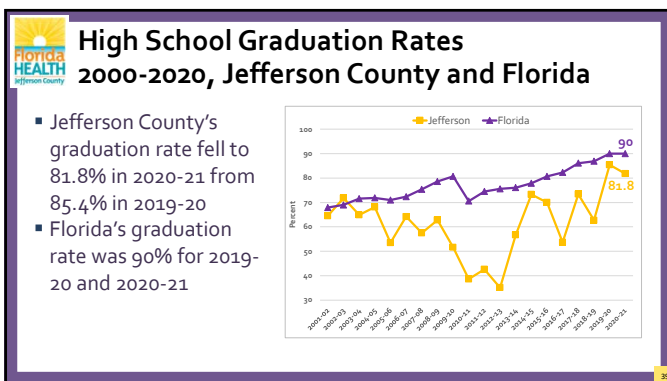
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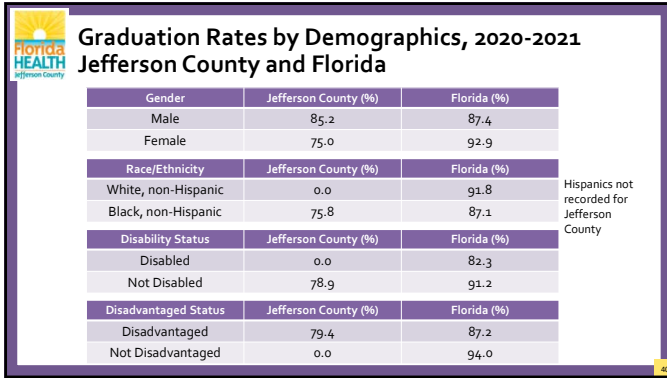
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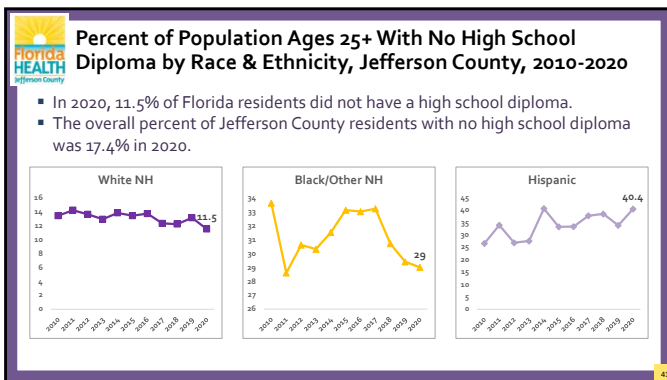
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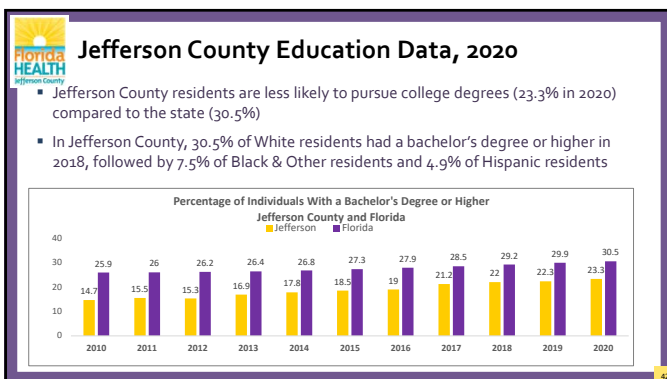
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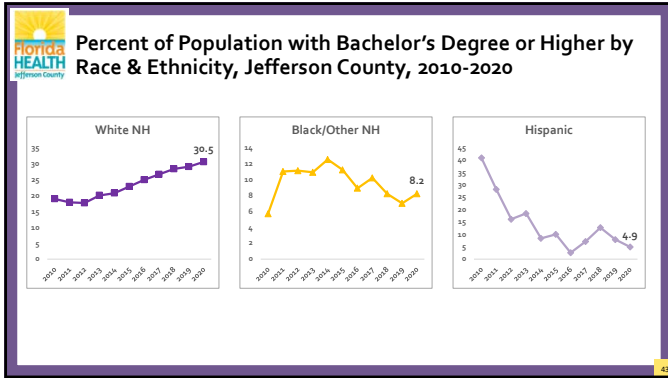
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Education Data by Census Tract, 2016-2020
Percent of Population Ages 25+, Jefferson County

	2501.03	2501.04	2501.05	2501.06	2502
Less than 9 th grade	9.6	3.6	2.4	2.1	3.5
Some high school	24.7	9.8	15.1	11.6	5.6
High school graduate	34.6	30.7	36.5	36.1	35.2
Some college	16.2	15	20.1	13.3	24
Associates degree	4.9	7.4	3.6	6.9	8.1
Bachelor's degree	7.3	21	13.2	16.3	16.5
Graduate degree	2.8	12.4	9.2	13.7	7.2

[Add map](#)

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Florida HEALTH
Jefferson County

Neighborhood and Built Environment

- Included in this category is:
 - Crime and Violence
 - Environmental Conditions
 - Quality of Housing
- Crime and violence barriers to consider
 - Violence can lead to premature death, physical pain, mental distress and reduced quality of life
 - People who fear crime may not go out to exercise
 - Child and adolescent exposure to violence can result in greater risk for substance abuse, risky sexual behavior
 - Sexual partner violence can lead to physical injuries and mental health issues such as eating disorders, depression and suicide

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Florida HEALTH
Jefferson County

Neighborhood and Built Environment

- Environmental conditions barriers to consider
 - Poor water quality can lead to illnesses such as Giardia
 - Poor air quality can lead to cardiovascular issues
 - Poor air quality can lead to issues with fetal and child development
 - Lack of air conditioning can lead to heat-related disease and death
- Quality of housing barriers to consider
 - Substandard housing may have health risks like vermin, water leaks, mold, heat and AC issues

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Florida HEALTH
Jefferson County

Individuals that Lived in a Different House 1 Year Earlier, 2009-2020, Jefferson County and Florida

- The percent of Jefferson County persons living in a different house the year prior remained decreased from 11.9% in 2019 to 10.6% in 2020.
- This is slightly below the state of Florida at 14.0% and 13.6% respectively.
- 2020 by race/ethnicity
 - Hispanics represented 16.6% in Jefferson and 13.1% in Florida
 - White NH accounted for 11.3% in Jefferson and 13.1% in Florida
 - Black NH represented 7.8% in Jefferson and 15.5% in Florida

Year	Jefferson County (%)	Florida (%)
2009	11.9	16.6
2010	15.5	16.6
2011	15.5	15.5
2012	15.5	15.5
2013	16.6	15.5
2014	10.6	15.5
2015	10.6	15.5
2016	10.6	15.5
2017	10.6	15.5
2018	10.6	15.5
2019	11.9	15.5
2020	10.6	13.6

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Owner-Occupied Housing Units, Percent of Occupied Housing Units 2009-2020 Jefferson County and Florida

- Jefferson County has consistently had higher percentages of owner-occupied housing units than the state.
- 2020 percentages by race/ethnicity
 - Hispanics - 35% in Jefferson compared to 52.7% Florida
 - White NH - 80.6% in Jefferson and 70.9% in Florida
 - Black NH - 64.4% in Jefferson and 46.5% in Florida

Year	Jefferson	Florida
2009	78	68
2010	77	68
2011	75	67
2012	77	67
2013	76	66
2014	75	65
2015	77	64
2016	78	64
2017	77	64
2018	77	64
2019	76	64
2020	75	65

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Median Owner-Occupied Unit Values, 2009-2020 Jefferson County and Florida

- Jefferson County's owner-occupied home values are well below the state.
- The median value of owner-occupied homes in Jefferson County was \$137,300 in 2020
- The median value of owner-occupied homes in Florida in 2020 was \$232,000.


Year	Jefferson	Florida
2009	125,000	200,000
2010	125,000	205,000
2011	125,000	190,000
2012	120,000	180,000
2013	115,000	170,000
2014	120,000	165,000
2015	125,000	160,000
2016	130,000	165,000
2017	125,000	175,000
2018	120,000	190,000
2019	130,000	210,000
2020	137,300	232,000

50

Housing Quality, Jefferson County 2020

	2501.03	2501.04	2501.05	2501.06	2502
Percent of homes lacking complete plumbing facilities	0.0	0.0	0.0	0.0	0.5
Percent of homes lacking kitchen facilities	0.0	0.0	0.0	0.0	0.5
Percent of homes heated with electricity	85.2	93.0	93.6	86.5	86.9
Percent of homes heated with bottled, tank or LP gas	12.3	4.5	3.1	8.8	8.8
Percent of homes heated with fuel oil, kerosene	1.1	1.5	0.0	0.0	0.0
Percent of homes heated with wood	0.0	0.0	3.4	3.2	2.4
Percent of homes not heated	0.0	0.5	0.0	1.5	0.9

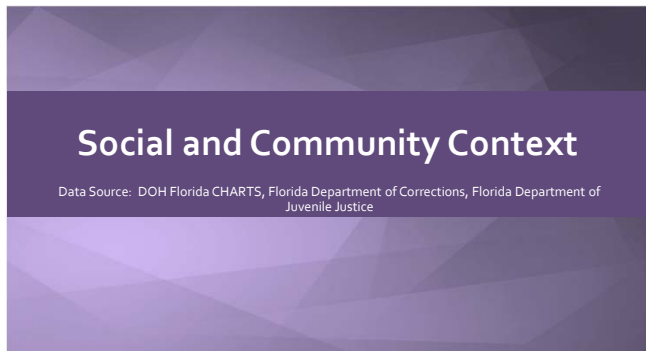
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Transportation to Work, Ages 16+, 2020, Percent of Population by Census Tract, Jefferson County

Method	2501.03	2501.04	2501.05	2501.06	2502
Carpooled in Car, Truck or Van (9.2%)	5.2	6.7	18.0	24.2	9.6
Drove Alone in Car, Truck or Van (82.5%)	92.0	88.1	71.3	74.8	82.9
Used Public Transportation (0.0%)	0.0	0.0	0.0	0.0	0.0
Other Means (0.8%)	2.1	0.0	4.1	0.0	0.7
Walked to Work (0.4%)	0.8	0.0	3.1	0.0	0.0
Worked at Home (4.3%)	0.0	5.2	3.5	1.0	6.8
Mean Travel Time to Work – Minutes (29.3)	20.5	28.7	29.9	30.7	31.4
No Vehicles in the Household (5.7%)	16.6	5.0	10.2	1.1	3.0
1 Vehicle Available in the Household (31.6%)	44.7	23.9	44.3	25.4	30.2
2 Vehicles Available in the Household (36.0%)	14.8	36.2	18.2	52.9	41.0
3 or More Vehicles Available in the Household (26.7%)	23.8	34.9	27.4	20.5	25.9


52



Social and Community Context

Data Source: DOH Florida CHARTS, Florida Department of Corrections, Florida Department of Juvenile Justice


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Social and Community Context

- Included in this category are:
 - Discrimination
 - Incarceration
 - Social Cohesion
- Discrimination barriers to consider
 - Discrimination can affect employment opportunities, access to care and access to adequate housing
 - Discrimination can result in toxic stress which leads to negative infant outcomes and cardiovascular issues

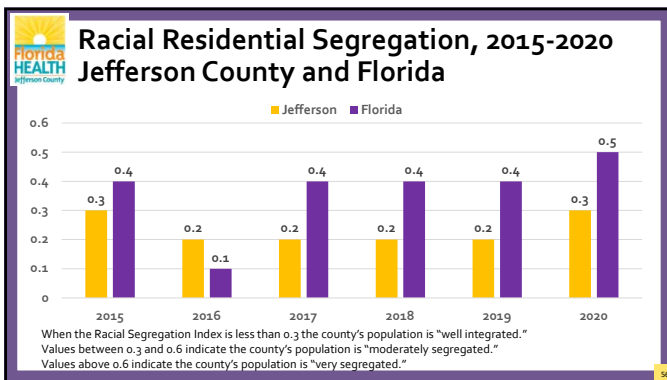
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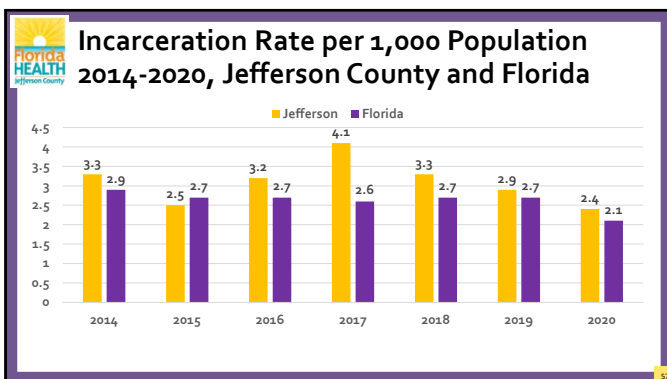
Social and Community Context

- Incarceration barriers to consider
 - Persons who were incarcerated have less chance of obtaining gainful employment
 - Persons who were incarcerated and have addictions issues may have health issues related to the addiction
 - Continuity of care for health conditions when incarcerated and released
- Social cohesion barriers to consider
 - Social networks can spread health behaviors, also known as social contagion. Examples are smoking, drinking and eating behaviors
 - Lack of social cohesion can lead to isolation, insomnia and emotional stress

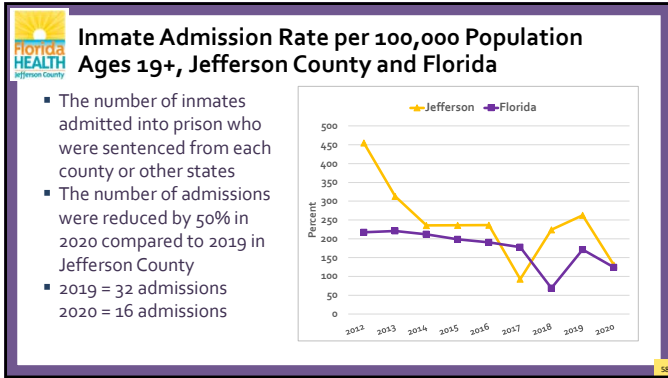
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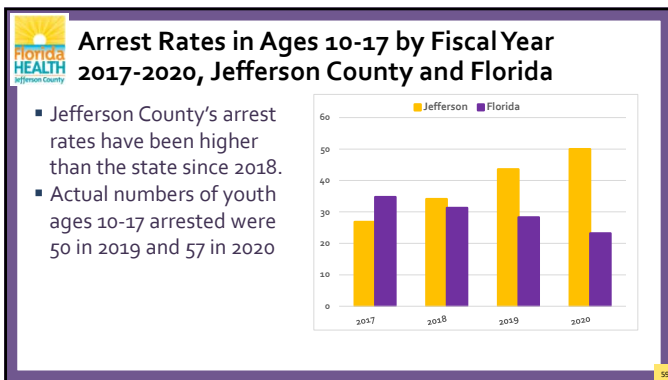
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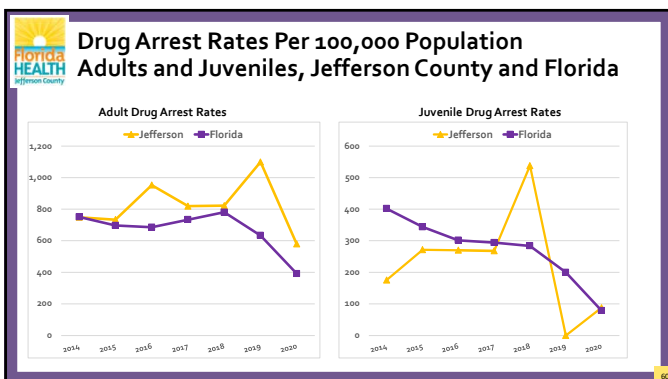
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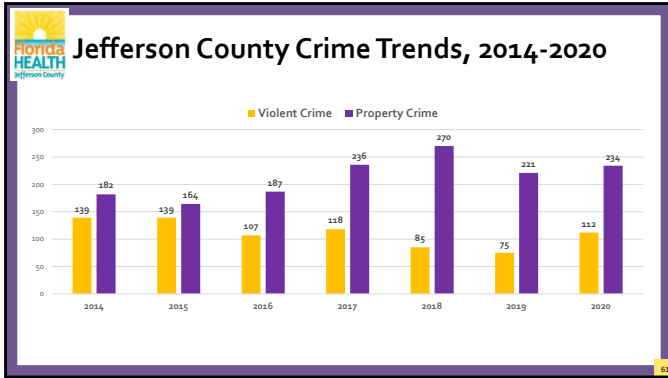
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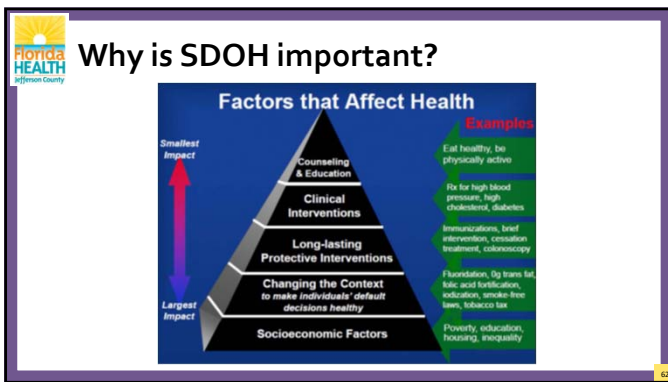
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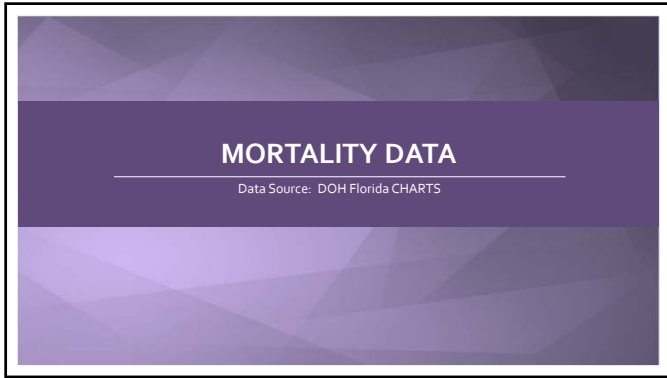


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Mortality and Reportable Diseases



1

**10 Leading Causes of Death, 2020
Jefferson County (N=221)**


Cause of Death	Deaths	Percent of Total
Malignant Neoplasm (Cancer)	46	21%
Heart Diseases	37	17%
COVID-19	13	6%
Diabetes Mellitus	12	5%
Cerebrovascular Diseases	7	3%
Chronic Lower Respiratory Diseases	7	3%
Unintentional Injury	7	3%
Influenza and Pneumonia	5	2%
Alzheimer's Disease	4	2%
Septicemia	4	2%
Suicide	4	2%

2

**Minority Population Causes of Death
Jefferson County 2020 (N=70)**

Cause of Death	Deaths	Percent of Total
Malignant Neoplasm (Cancer)	15	21%
Heart Diseases	13	19%
COVID-19	7	10%
Diabetes Mellitus	4	6%
Cerebrovascular Diseases	2	3%
Chronic Lower Respiratory Diseases	2	3%
Perinatal Period Conditions	2	3%

3



Minority Population Causes of Death Jefferson County 2020 (N=70)

Cause of Death	Deaths	Percent of Total
Alzheimer's Disease	1	1%
Anemias	1	1%
Essential Hypertension and Hypertensive Renal Disease	1	1%
In Situ, Benign and Uncertain or Unknown Behavior Neoplasms	1	1%
Influenza and Pneumonia	1	1%
Nutritional Deficiencies	1	1%
Septicemia	1	1%
Unintentional Injury	1	1%

4



5



6

HIV Infection 3-Year Discrete Rates Jefferson County and Florida

- There were 2 cases reported in 2019 and 2 in 2020
- Of the 22 HIV cases reported during 2010-2020:
 - 64% were Black & Other, non-Hispanic
 - 0% were Hispanic
 - 36% were White, non-Hispanic
 - 77% were Male and 23% were female

Year	Jefferson	Florida
2000-02	~30	~45
2003-05	~18	~38
2006-08	~20	~35
2009-11	~12	~28
2012-14	~15	~25
2015-17	~10	~25
2018-20	~18	~22

7

Persons Living with HIV Along the HIV Care Continuum (2020)

Persons with HIV (PWH) is defined as the number of persons living with an HIV diagnosis in this area at the end of each respective calendar year, data as of 6/30/2021.

- In Care: PWH with at least one documented VL or CD4 lab, medical visit, or prescription from 1/1/2020 through 3/31/2021, data as of 6/30/2021. Out of Care: PWH with no documented VL or CD4 lab, medical visit, or prescription from 1/1/2020 through 3/31/2021, data as of 6/30/2021.
- Retained in Care: PWH with two or more documented VL or CD4 labs, medical visits, or prescriptions at least three months apart from 1/1/2020 through 6/30/2021, data as of 6/30/2021.
- In Care with Suppressed Viral Load: PWH with at least one documented VL or CD4 lab, medical visit, or prescription from 1/1/2020 through 3/31/2021 that also has a suppressed VL (<200 copies/mL) on the last VL from 1/1/2020 through 3/31/2021, data as of 6/30/2021.

Metric	Florida (%)	Jefferson (%)
PLWH	100%	100%
In Care	79%	79%
Retained in Care	73%	71%
Suppressed Viral Load	69%	62%
Retained in Care & Suppressed Viral Load	88%	79%

8

Reported AIDS Cases Rates 3-Year Discrete Rates, Jefferson County and Florida

- Trend line represents number of persons reported as an AIDS case, regardless of when the person was diagnosed with HIV
- Progression to AIDS usually represents a treatment failure of someone who was not diagnosed until symptomatic
- Jefferson County experienced an increase in the AIDS rate during 2018-2020.

Year	Jefferson	Florida
2000-02	~10	~28
2003-05	~8	~27
2006-08	~25	~24
2009-11	~4	~20
2012-14	~15	~18
2015-17	~8	~15
2018-20	~13	~12

9

Reported AIDS Cases, by Race/Ethnicity (2000 – 2020), Jefferson County

- Black, non-Hispanic persons account for 35% of the Jefferson population and 82% of the AIDS cases reported since 2000
- This is important to consider when addressing health equity

Race/Ethnicity	Percentage of Cases
Black, NH	82%
White, NH	12%
Other	3%
Hispanic	3%

10

Chlamydia Case Rates, by Year (2006 – 2020), Jefferson County and Florida

- Chlamydia cases decreased from 82 in 2019 to 72 in 2020
- The 2020 Jefferson County chlamydia rate per 100,000 population was 55.7 for white, non-Hispanics, 633.2 for black & other, non-Hispanics, and 0.0 for Hispanics

Year	Jefferson County Case Rate	Florida Case Rate
2006	200	300
2007	300	350
2008	600	400
2009	580	400
2010	580	400
2011	550	400
2012	500	400
2013	450	400
2014	450	450
2015	480	480
2016	400	480
2017	480	480
2018	480	500
2019	550	500
2020	480	450

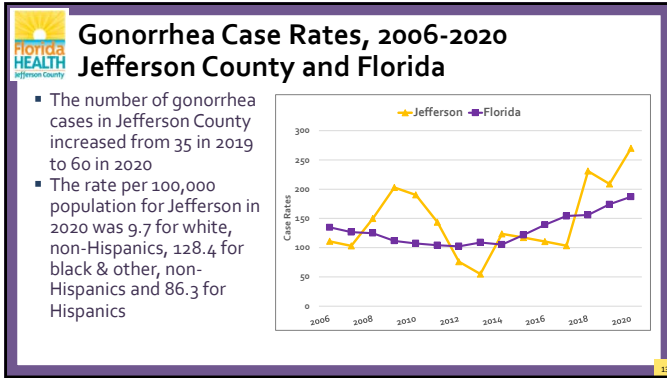
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Chlamydia Case Rates for Females Ages 15-19 (2006 – 2020), Jefferson County and Florida

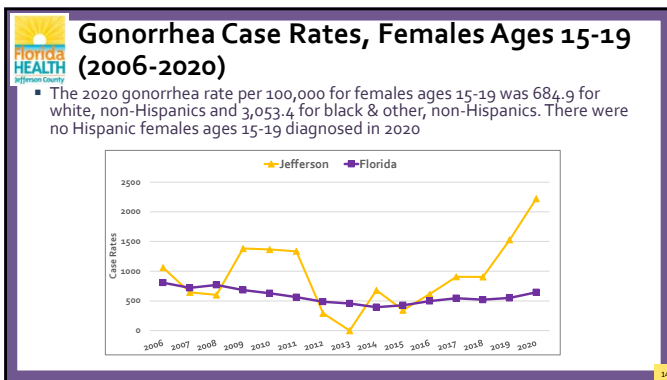
- The 2020 chlamydia case rates per 100,000 among females ages 15-19 in Jefferson County are 684.9 for white, non-Hispanics, 763.4 for black & other, non-Hispanics and 0.0 for Hispanics

Year	Jefferson County Case Rate	Florida Case Rate
2006	2,500.00	2,500.00
2007	3,500.00	2,500.00
2008	8,000.00	3,500.00
2009	6,500.00	3,500.00
2010	6,000.00	3,500.00
2011	6,500.00	3,500.00
2012	6,000.00	3,500.00
2013	5,500.00	3,500.00
2014	2,500.00	3,500.00
2015	3,000.00	3,500.00
2016	2,500.00	3,500.00
2017	4,500.00	3,500.00
2018	3,000.00	3,500.00
2019	5,500.00	3,500.00
2020	4,500.00	3,500.00

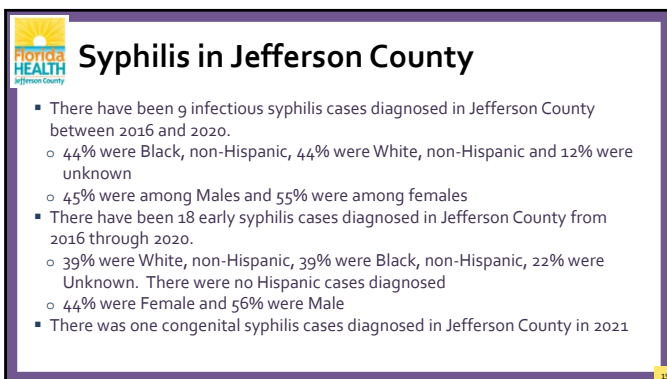
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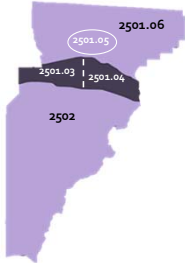
Viral Hepatitis

- **Hepatitis A**
 - 1 Hepatitis A case reported in 2015 and 3 cases reported in 2020
- **Hepatitis B**
 - 3 acute Hepatitis B cases reported between 2000 and 2020. Most recent case was 2013
 - 35 chronic Hepatitis B cases reported between 2000 and 2020
 - 4 reported positive Hepatitis B Surface Antigen Results in Pregnant Women between 2000 and 2020
- **Hepatitis C**
 - 1 acute Hepatitis C cases reported between 2000 and 2020. 1 reported in 2021.
 - 256 chronic Hepatitis C cases reported between 2000 and 2020
- No cases of Hepatitis D, E or G reported in Jefferson County since data collection in 2006
- Data Not Available by Race or Gender

16

Viral Hepatitis Deaths by Census Tract 2016-2020, Jefferson County

- Census tract 2501.03 had one death during the time period
- White, non-Hispanic male

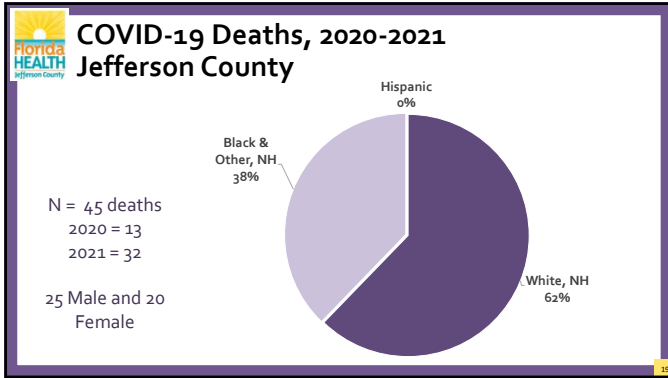


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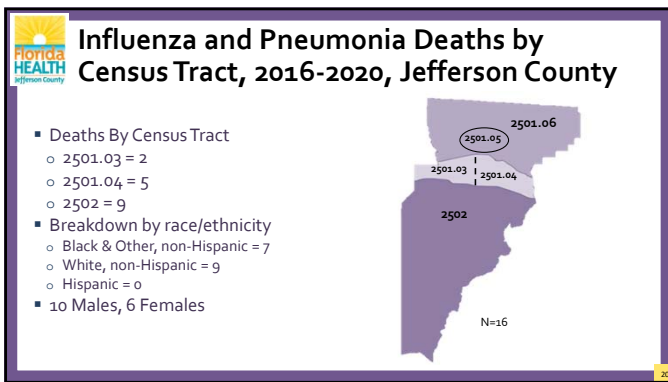
Other Reportable Diseases or Conditions

Data Source: DOH Florida CHARTS, Bureau of Epidemiology

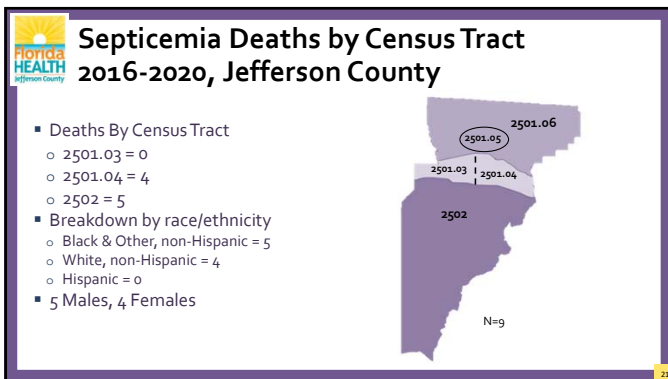
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21



Tuberculosis in Jefferson County, 2000-2020

- There were 5 tuberculosis cases diagnosed in Jefferson County between 2000 and 2020. The most recent case was 2008
- Data are not available by race/ethnicity or gender
- There were no cases of tuberculosis in children under the age of 15 during the time period.
- There was no deaths from tuberculosis in Jefferson County during the time frame.


22



Central Nervous System Diseases and Bacteremias, 2001-2020, Jefferson County

Disease or Condition and Definition	Number Cases	Comments
Creutzfeldt-Jakob Disease – a fatal neurodegenerative disease	0	
Haemophilus influenzae Invasive Disease – a bacterial infection that can cause anything from mild ear infections to bloodstream infections	4	Note one case in 2021
Meningitis, Bacterial or Mycotic - A bacterial or viral infection of the fluid surrounding the brain and spinal cord that causes swelling of the membranes covering the brain and spinal cord	2	
Staphylococcus aureus Infection Resistant to Vancomycin VISA– a common bacteria found on skin and in the nose. We are tracking resistance to Vancomycin.	0	
Staphylococcus aureus Infection Resistant to Vancomycin VRSA– a common bacteria found on skin and in the nose. We are tracking resistance to Vancomycin.	0	
Streptococcus pneumoniae Invasive Disease – this bacteria can cause many types of illnesses, including ear infections and meningitis	24	Most recent case 2019

23




Enteric, Food and Waterborne Diseases 2001-2020, Jefferson County

Disease or Condition	Cases	Disease or Condition	Cases
Amebic Encephalitis	0	Listeriosis	0
Campylobacteriosis	28	Neurotoxic Shellfish Poisoning	0
Cholera	0	Salmonella Paratyphi Infection	0
Ciguatera Fish Poisoning	0	Salmonella Typhi Infection	0
Cryptosporidiosis	6	Salmonellosis	97
Cyclosporiasis	0	Saxitoxin Poisoning	0
Giardiasis, Acute	17	Shiga Toxin Producing Escherichia coli	10
Hemolytic Uremic Syndrome (HUS)	1	Shigellosis	22
Legionellosis	4	Staphylococcal Enterotoxin B Poisoning	0
		Vibriosis Excluding Cholera	8

Note that diseases or conditions highlighted in red had at least one case reported in 2020

24




Vaccine Preventable Diseases 2001-2020, Jefferson County

Disease or Condition	Cases
Diphtheria	0
Measles (Rubeola)	0
Meningococcal Disease	0
Mumps	0
Pertussis	2
Poliomyelitis	0
Rubella	0
Tetanus	0
Varicella (Chickenpox)	11

Note that diseases or conditions highlighted in red had at least one case reported in 2020


25



Vectorborne and Zoonotic Diseases, 2001-2020 Jefferson County

Disease or Condition	Cases	Disease or Condition	Cases
Anaplasmosis	0	Q Fever (Coxiella burnetii)	0
Babesiosis	0	Rabies, Animal	7
Brucellosis	0	Rabies, Human	0
California Serogroup Virus Disease	0	Rabies, Possible Exposure	19
Dengue Fever	0	Rocky Mountain Spotted Fever	3
Eastern Equine Encephalitis	0	St. Louis Encephalitis	0
Ehrlichiosis	8	Trichinellosis	0
Hantavirus Infection	0	Tularemia (Francisella tularensis)	0
Leptospirosis	0	Typhus Fever	0
Malaria	1	Venezuelan Equine Encephalitis	0
Middle East Respiratory Syndrome	0	West Nile Virus	0
Plague	0	Western Equine Encephalitis	0
Psittacosis (Ornithosis)	0	Yellow Fever	0

26



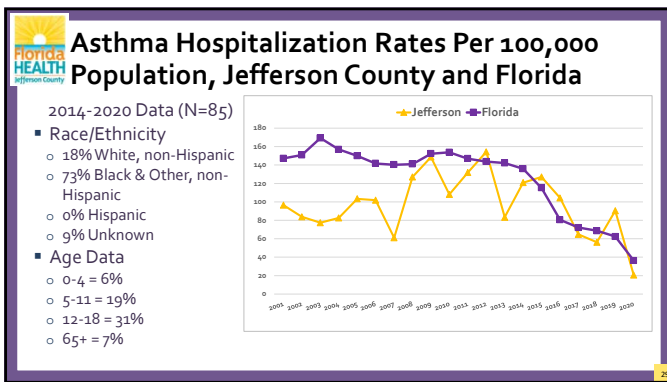
Other Reportable Diseases, 2000-2020 Jefferson County

Disease or Condition	Cases
Anthrax	0
Botulism, Foodborne	0
Botulism, Infant	0
Botulism, Wound	0
Glanders (Burkholderia mallei)	0
Hansen's Disease (Leprosy)	0
Melioidosis (Burkholderia pseudomallei)	0
Smallpox	0
Vaccinia Disease	0
Viral Hemorrhagic Fever	0

27



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29

Environmental Conditions, 2008-2020 Jefferson County

Disease or Condition	Cases
Arsenic Poisoning	0
Carbon Monoxide Poisoning	1
Lead Poisoning	2
Mercury Poisoning	0
Pesticide Related Illness and Injury	2
Ricin Toxin Poisoning	0

Data are not available by race/ethnicity or gender

30



Other Environmental Health Jefferson County 2020

- Unsatisfactory facility inspections
 - 0 of 3 biomedical waste facilities (0%)
 - 0 of 3 group care facilities (0%)
 - 0 of 13 institutional food service operations (0%)
 - 0 of 1 migrant or labor camps (0%)
 - 3 of 28 mobile home and RV parks (10.7%)
 - 0 of 10 swimming pool and spa facilities (0.0%)
 - 0 of 1 tanning facilities (0%)
 - No body piercing facilities

31

Chronic Disease

CHRONIC DISEASE

Data Source: DOH Florida CHARTS, Robert Wood Johnson County Health Rankings, BRFSS

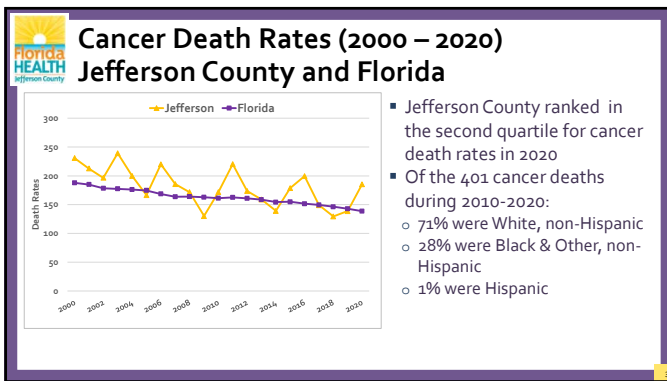
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Causes of Death, Jefferson County, 2020

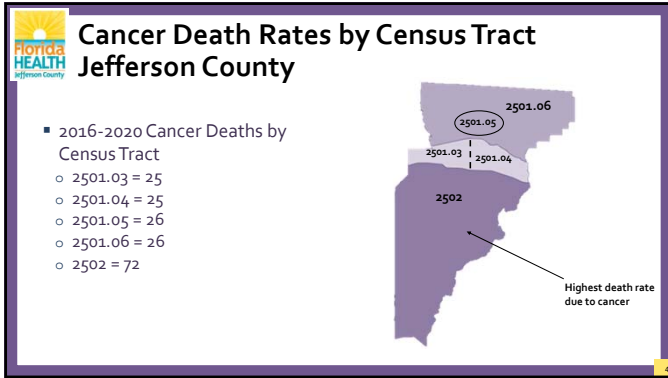
Cause of Death	Percent of Total
Malignant Neoplasm (Cancer)	21%
Heart Diseases	17%
COVID-19	6%
Diabetes Mellitus	5%
Cerebrovascular Diseases	3%
Chronic Lower Respiratory Diseases	3%
Unintentional Injury	3%
Influenza and Pneumonia	2%
Alzheimer's Disease	2%
Septicemia	2%
Suicide	2%

- These 10 leading causes of death equal 66% of the total 221 deaths
- Chronic disease deaths include four of the ten leading causes of death in Jefferson County

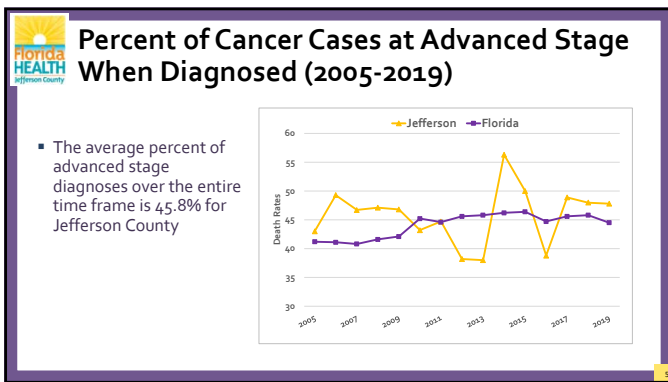
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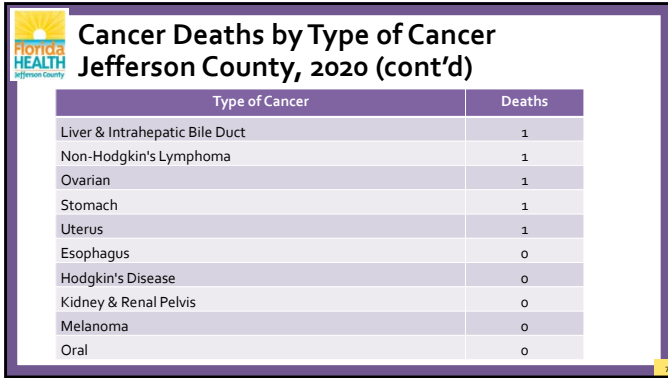


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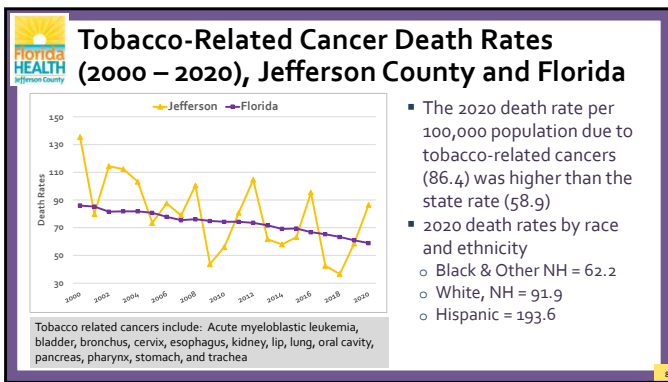
Cancer Deaths by Type of Cancer Jefferson County, 2020

Type of Cancer	Deaths
Lung	12
Bladder	3
Breast	3
Colorectal	3
Lymphoid & Related Tissue	3
Prostate	3
Cervical	2
Leukemia	2
Pancreatic*	2
Unknown Behavior Neoplasms	2
Brain & Central Nervous System	1

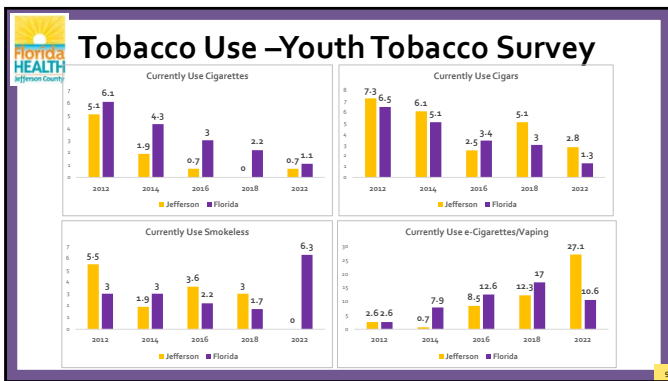
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Death Rates Due to Diabetes, 2000 – 2020 Jefferson County and Florida

- Jefferson County ranked in the third quartile for diabetes deaths in 2020
- Diabetes Deaths 2010-2020 (Total of 73 deaths)
 - 38 or 52% were White, non-Hispanic, 35 or 48% were Black & Other, non-Hispanic, and 0% Hispanic
 - 42 or 58% were male and 31 or 42% were female

Year	Jefferson County	Florida
2000	40	20
2001	35	20
2002	50	20
2003	25	20
2004	25	20
2005	25	20
2006	50	20
2007	40	20
2008	25	20
2009	10	20
2010	25	20
2011	25	20
2012	15	20
2013	25	20
2014	25	20
2015	25	20
2016	45	20
2017	40	20
2018	35	20
2019	45	20
2020	55	25

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Death Rates Due to Diabetes by Census Tract, 2016-2020, Jefferson County

- 2016-2020 Diabetes Deaths by Census Tract
 - 2501.03 = 9
 - 2501.04 = 8
 - 2501.05 = 7
 - 2501.06 = 7
 - 2502 = 17

Highest death rates due to diabetes

11

Hospitalization Rates Due to Diabetes (2000 – 2020) Jefferson County and Florida

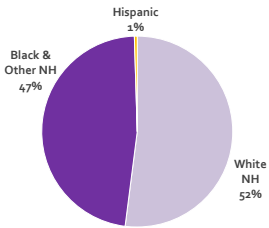
- The hospitalization rates for diabetes in Jefferson County have been higher than the state since 2009
- The Jefferson County hospitalization rate dropped in 2019 and 2020

Year	Jefferson County	Florida
2000	1,500	1,500
2001	1,500	1,500
2002	1,500	1,500
2003	1,500	1,500
2004	1,500	1,500
2005	1,500	1,500
2006	1,500	1,500
2007	1,500	1,500
2008	1,500	1,500
2009	1,500	1,500
2010	1,500	1,500
2011	1,500	1,500
2012	1,500	1,500
2013	1,500	1,500
2014	1,500	1,500
2015	1,500	1,500
2016	1,500	1,500
2017	1,500	1,500
2018	1,500	1,500
2019	1,500	1,500
2020	1,500	1,500

12

Hospitalization Rates Due to Diabetes by Race/Ethnicity, Jefferson County (2010 – 2020)

- The hospitalization rate for White, non-Hispanics was slightly higher than Black & Other, non-Hispanics during the time frame
- Black & Other non-Hispanics = 35% of the county's population and 47% of the hospitalizations
- Data are not available by gender



Hispanic 1%
Black & Other NH 47%
White NH 52%

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Risk Factors for Diabetes

- 2022 Robert Wood Johnson County Health Rankings Data

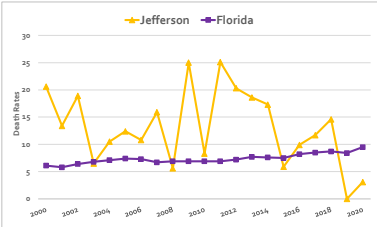
Risk Factors	Jefferson County	Florida
Diabetic	12%	9%
Adult Obesity	33%	26%
Physically Inactive	32%	26%
Access to Exercise Opportunities	43%	87%
Food Environment Index	7.8%	7%

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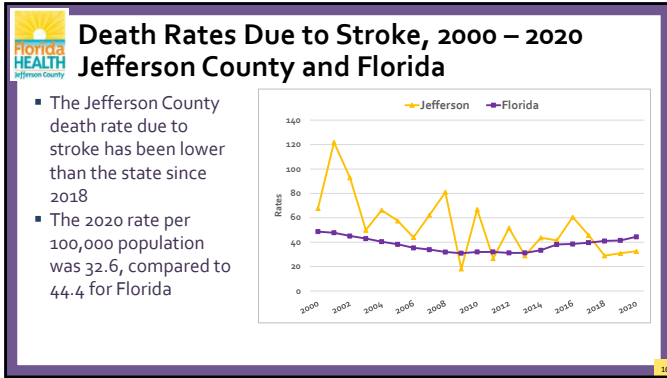
Death Rates Due to Hypertension, 2000-2020, Jefferson County and Florida

Jefferson Data 2016-2020

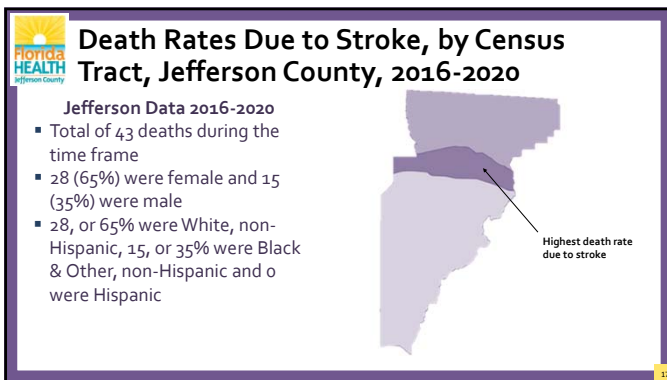
- 86% of hypertension deaths were male and 14% were female
- 57% of hypertension deaths were White, non-Hispanic and 43% were Black & Other, non-Hispanic
- There were no Hispanic deaths due to hypertension during 2016-2020



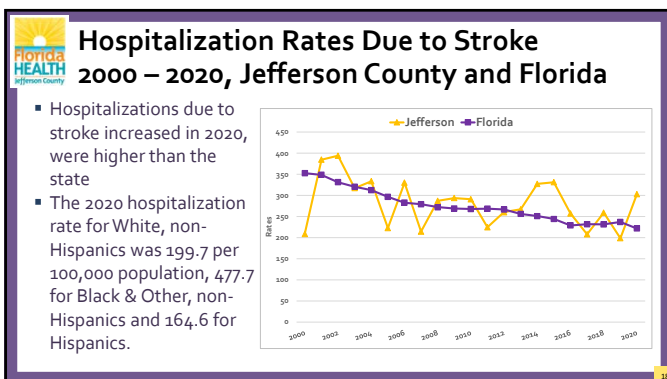
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Florida HEALTH Jefferson County

Deaths Rates Due to Heart Attack, 2010-2020, Jefferson County and Florida

Jefferson County Data 2010-2020

- Total of 91 deaths due to heart attacks
- 49 (54%) were White, non-Hispanic and 42 (46%) were Black & Other, non-Hispanic. There were no Hispanic deaths
- 58 (64%) were Male and 33 (36%) were Female

Year	Jefferson County	Florida
2010	28	28
2011	55	27
2012	40	27
2013	25	27
2014	65	26
2015	25	25
2016	50	25
2017	40	24
2018	45	23
2019	28	22
2020	45	22

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Florida HEALTH Jefferson County

Risk Factors for Cardiovascular Disease and Stroke (2022 RWJ and 2019 BRFSS)

	Jefferson County	Florida
Adult smokers (2022 RWJ)	23%	15%
Ever had a stroke (2019 BRFSS)	5.8%	3.6%
Ever had coronary heart disease (2019 BRFSS)	5.8%	4.7%
Ever had a heart attack (2019 BRFSS)	8.5%	4.7%
Inactive or insufficiently active adults (2016 BRFSS)	54.0%	56.7%

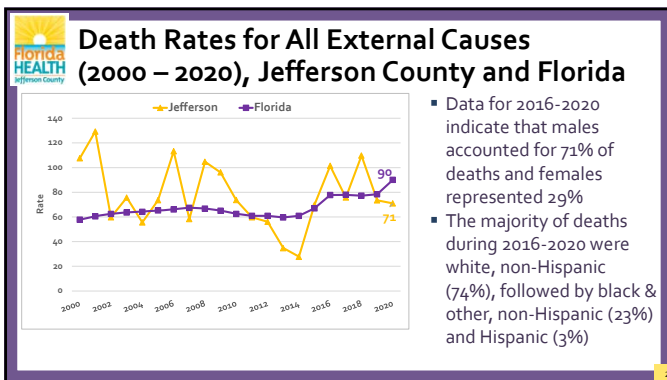
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Injury and Violence

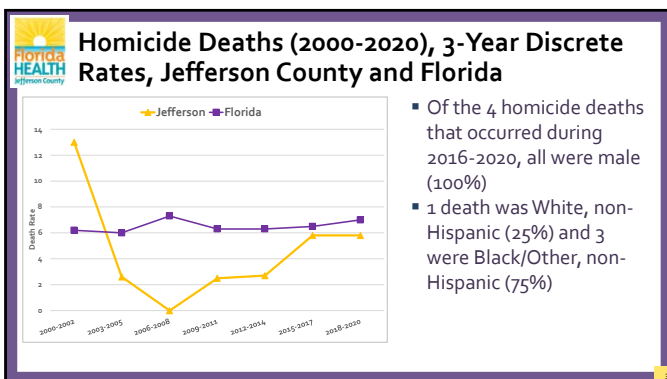
INJURY AND VIOLENCE

Data Source: DOH Florida CHARTS

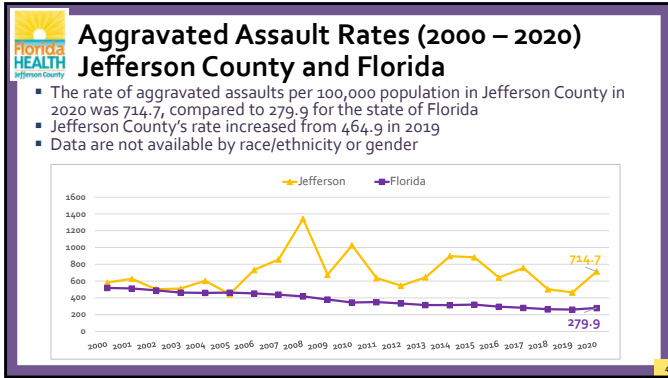
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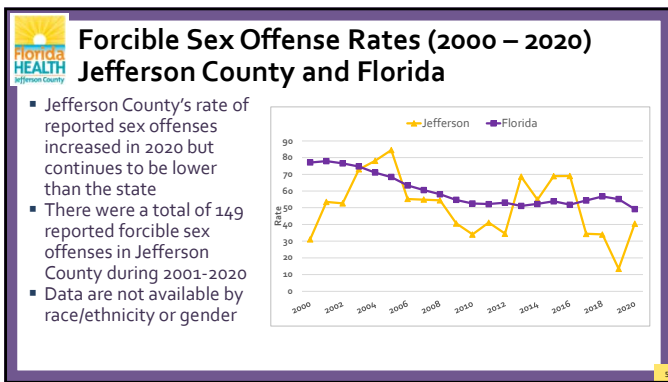
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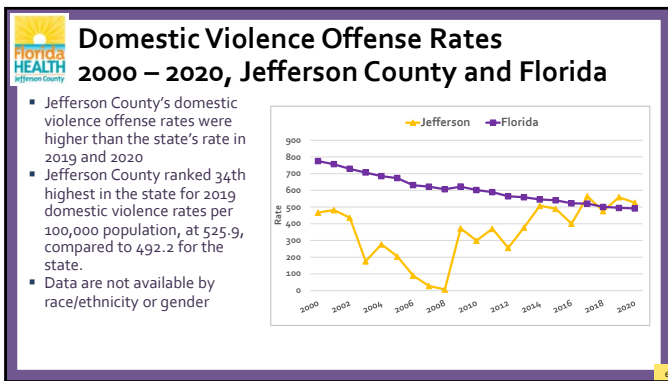
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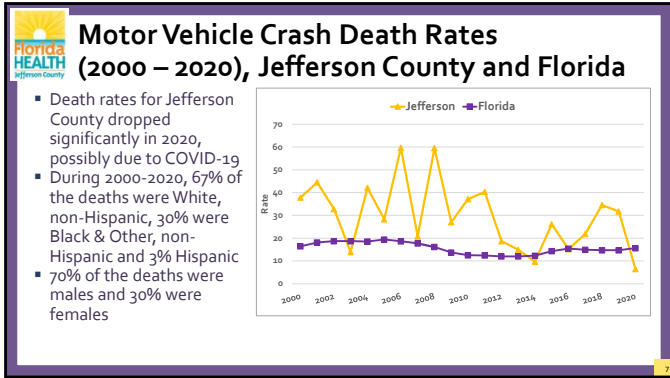
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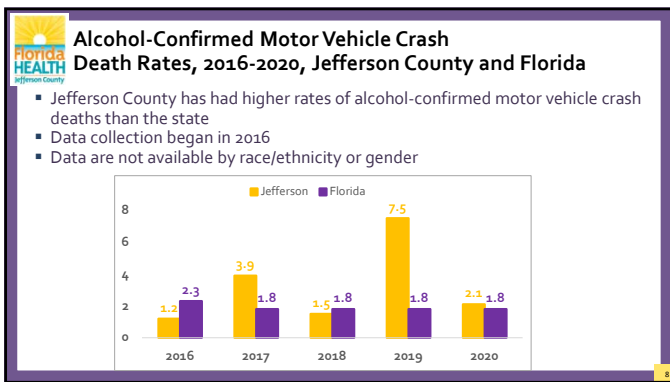
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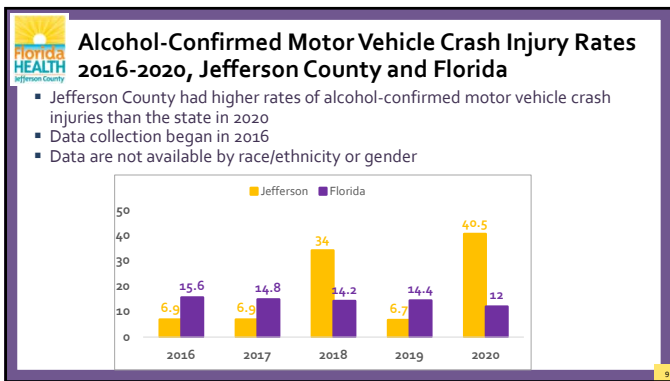
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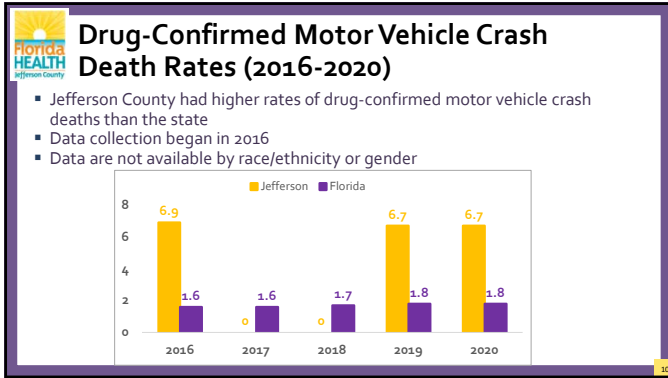
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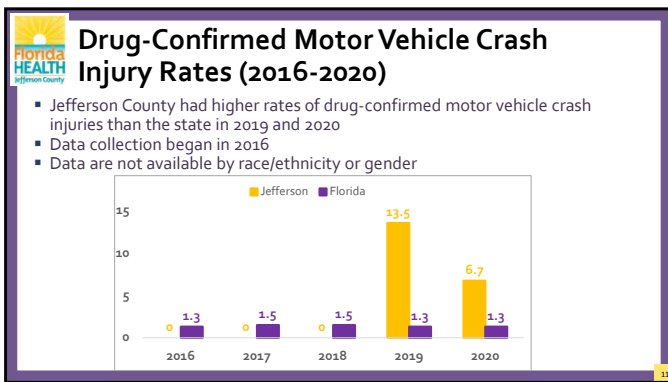
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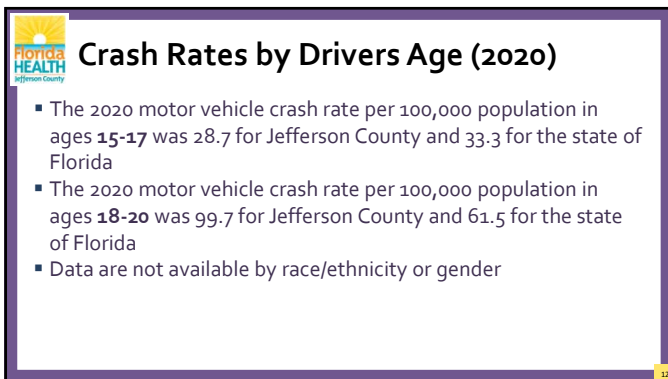
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Florida HEALTH
Jefferson County

Death Rates Due to Firearm Discharge (2000 – 2020), Jefferson County and Florida

- There were 38 deaths due to firearms discharge in Jefferson County from 2000 until 2020
- 30 (79%) of the deaths were White, non-Hispanic, and 8 (21%) were Black & Other, non-Hispanic
- No Hispanic deaths were reported
- 5 occurred in 2020 alone

Year	Jefferson County Rate	Florida Rate
2000	10	12
2001	12	12
2002	42	12
2003	10	11
2004	10	11
2005	10	11
2006	10	11
2007	10	11
2008	15	11
2009	15	11
2010	15	11
2011	15	11
2012	10	11
2013	10	11
2014	10	11
2015	10	11
2016	15	11
2017	15	11
2018	15	11
2019	15	11
2020	38	11

13

Florida HEALTH
Jefferson County

Drowning Deaths in Jefferson County (2000 – 2020)

- There were seven deaths due to drowning in Jefferson County during 2000-2020
- 72% were Black & Other, non-Hispanic, 14% were White, non-Hispanic, and 14% were Hispanic
- 86% were male and 14% female
- Data by age are not available


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Florida HEALTH
Jefferson County

Deaths from Falls (2000 – 2020) Jefferson County

- There were 34 deaths from falls in 2000-2020
- 91% of these deaths were White, non-Hispanic, 3% were Black & Other, non-Hispanic and 6% were Hispanic
- 53% of these deaths were male and 47% female
- Data were not available by age

15




Deaths from Unintentional Fires (2000 – 2020), Jefferson County

- There were 10 deaths from unintentional fires during the time period
- 60% of these deaths were white, non-Hispanic, 40% were Black & Other, non-Hispanic and 0% were Hispanic
- 60% of these deaths were male and 40% female
- Data were not available by age

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16




Deaths from Surgical and Medical Complications (2000 – 2020), Jefferson County

- There were 4 deaths from surgical and medical complications during the time period
- 66% of these deaths were white, non-Hispanic, and 34% were black & Other, non-Hispanic
- 25% of these deaths were male and 75% female
- Data were not available by age

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Deaths from Unintentional Poisoning (2000 – 2020), Jefferson County

- There were 23 deaths from unintentional poisoning during the time period
- 65% of these deaths were white, non-Hispanic, 30% were Black & Other, non-Hispanic, and 5% Hispanic
- 70% of these deaths were male and 30% female
- Data were not available by age

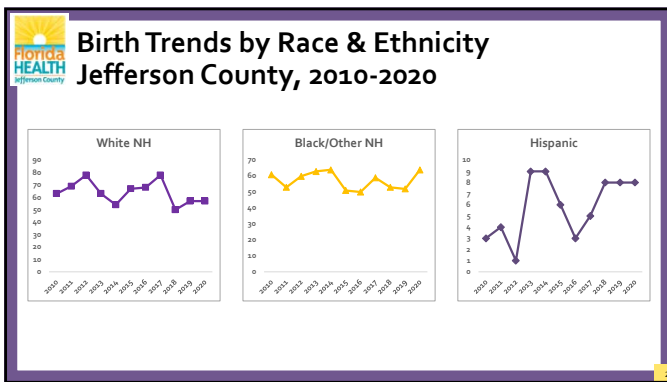
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Maternal and Child Health



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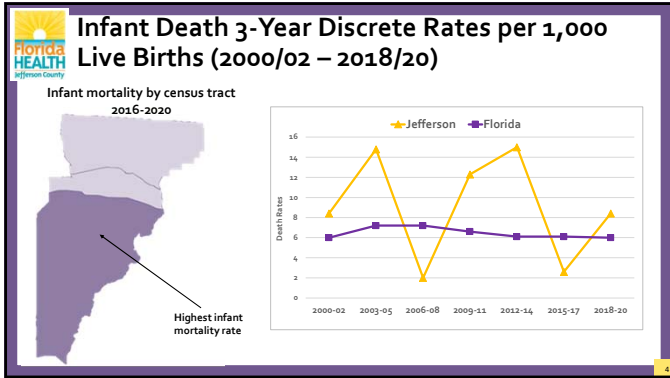
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**Leading Causes of Infant Mortality
Jefferson County, 2010-2020 Combined**

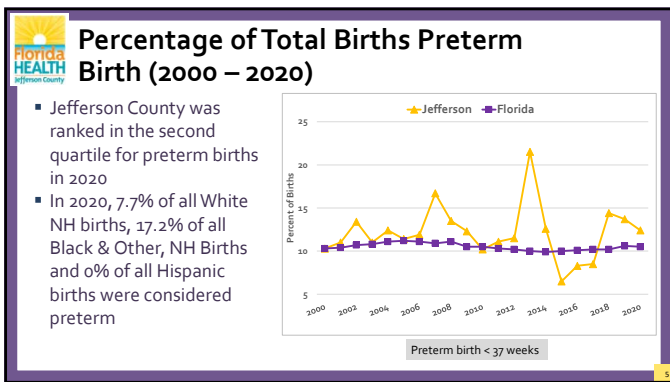
Cause of Death (N=12)	Percent Total Deaths
Newborn Affected by Maternal Complications of Pregnancy	25%
Disorders Related to Short Gestation and Low Birth Weight	25%
Congenital Malformations, Deformations and Chromosomal Abnormalities	25%
Sudden Infant Death Syndrome	25%

10 of 12 deaths were Black, non-Hispanic and 2 were White, non-Hispanic

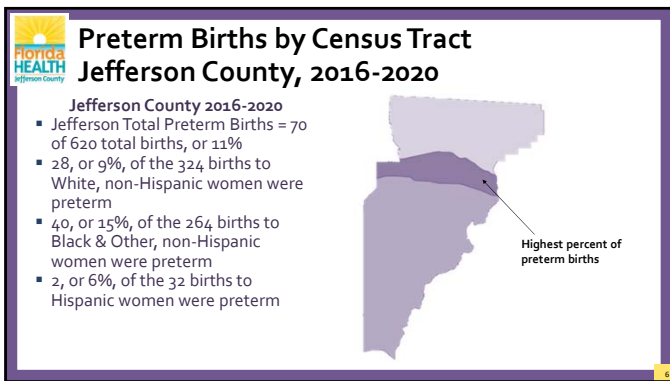
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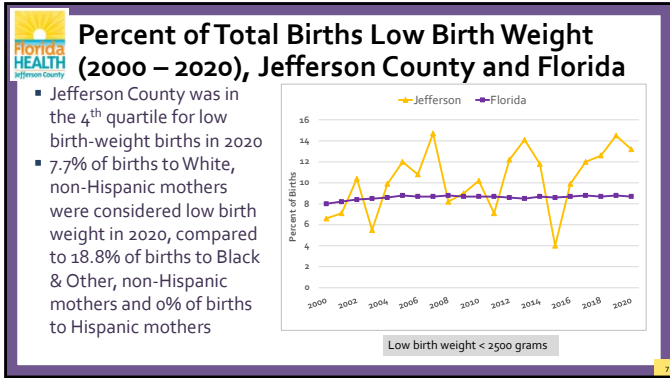
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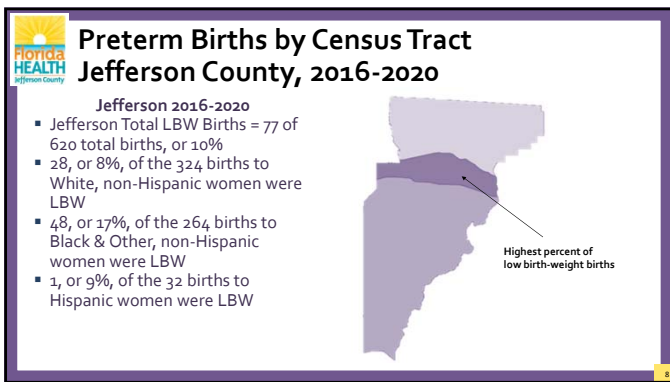
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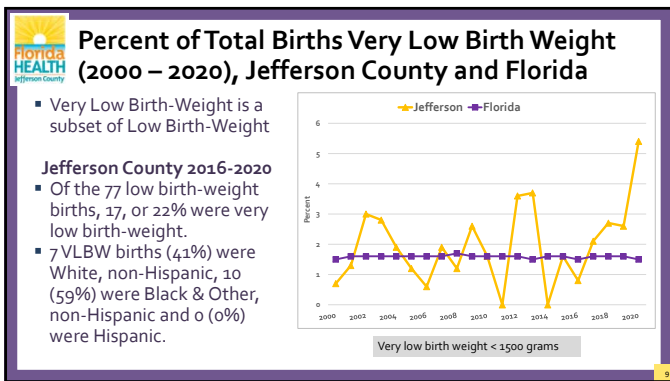
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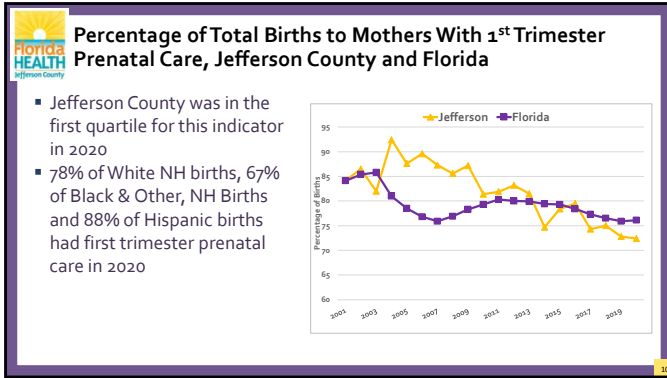
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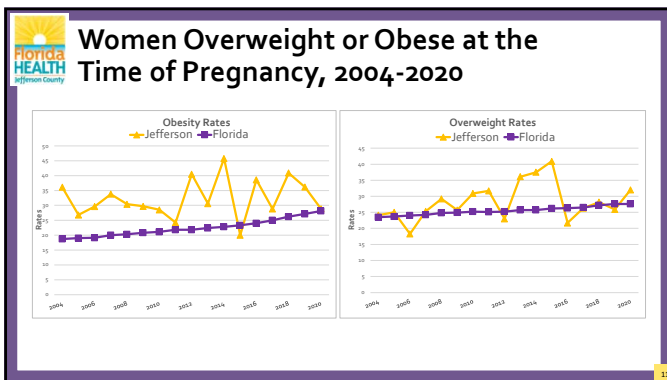
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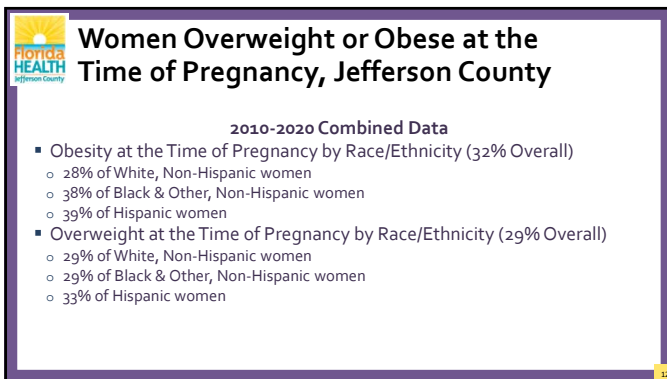
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Births to Mothers Ages <=19 (2010 – 2020)

Year	<=14	15-17	18-19	Totals
2010	0	2	15	17
2011	0	6	6	12
2012	0	2	10	12
2013	0	2	10	12
2014	0	0	4	4
2015	0	2	4	6
2016	0	2	6	8
2017	0	5	7	12
2018	0	1	2	3
2019	0	1	2	3
2020	0	1	8	9

- There were no births to ages under age 15 during 2010-2020
- There were 3 births in 2019 and 9 births in 2020 to mothers ages 15-19
- The majority of births were to mothers ages 18-19 for both years; 67% in 2019 and 89% in 2020

13

Births to Mothers Less Than Age 20 2016-2020, Jefferson County Census Tracts

2016-2020 Jefferson County

- There were 35 births to mothers ages < 20 during this time frame
- 20% were White, non-Hispanic
- 74% were Black & Other, non-Hispanic
- 6% were Hispanic

Highest percent of births to mothers < 20

14

Births to Unwed Mothers, 2000-2020 Jefferson County and Florida

- The 2020 percent of births to unwed mothers in Jefferson County was 56.6%, higher than the state of Florida of 47.2%

Jefferson Data 2016-2020

- 35% of all births to White, non-Hispanic mothers
- 85% of all births to Black & Other, non-Hispanic mothers
- 66% of all births to Hispanic mothers

15

Florida HEALTH
Jefferson County

Births to Mothers Born in Other Countries Jefferson County and Florida

- The 2020 percent of births to foreign-born mothers in Jefferson County was 7.0%, significantly lower than the state of Florida at 32.6%

Jefferson Data, 2016-2020

- 9% of births to White, non-Hispanic mothers
- 2% of births to Black & Other, non-Hispanic mothers
- 59% of births to Hispanic mothers

Year	Jefferson	Florida
2004	7.0	32.6
2005	7.0	32.6
2006	7.0	32.6
2007	7.0	32.6
2008	7.0	32.6
2009	7.0	32.6
2010	7.0	32.6
2011	7.0	32.6
2012	7.0	32.6
2013	7.0	32.6
2014	7.0	32.6
2015	7.0	32.6
2016	7.0	32.6
2017	7.0	32.6
2018	7.0	32.6
2019	7.0	32.6
2020	7.0	32.6

16

Florida HEALTH
Jefferson County

Father Acknowledged on Birth Certificate, Jefferson County and Florida

- The 2020 percent of births where father was acknowledged on the birth certificate in Jefferson County was 77.5%, significantly lower than the state of Florida at 88.0%

Jefferson Data, 2016-2020

- 91% of births to White, non-Hispanic mothers
- 65% of births to Black & Other, non-Hispanic mothers
- 88% of births to Hispanic mothers

Year	Jefferson	Florida
2004	90.0	88.0
2005	90.0	88.0
2006	79.5	88.0
2007	80.0	88.0
2008	81.0	88.0
2009	76.0	88.0
2010	81.0	88.0
2011	81.0	88.0
2012	74.0	88.0
2013	81.0	88.0
2014	79.0	88.0
2015	81.0	88.0
2016	84.0	88.0
2017	76.0	88.0
2018	83.0	88.0
2019	84.0	88.0
2020	77.5	88.0

17

Florida HEALTH
Jefferson County

Births with Inter-Pregnancy Interval < 18 Months, Jefferson County and Florida

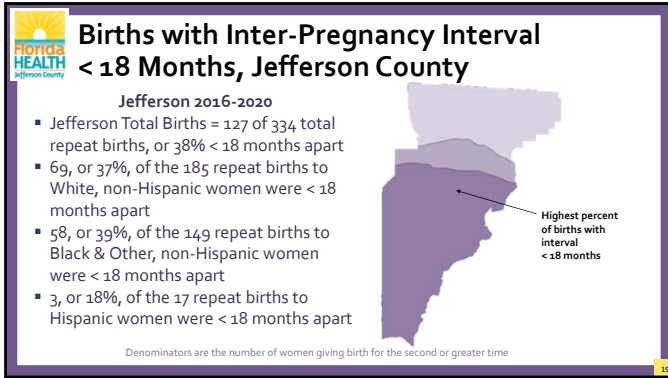
- The annual percent of repeat births with less than 18 months between pregnancies in Jefferson County is 27.8%, lower than the state of Florida at 35.6%

Jefferson Data 2020

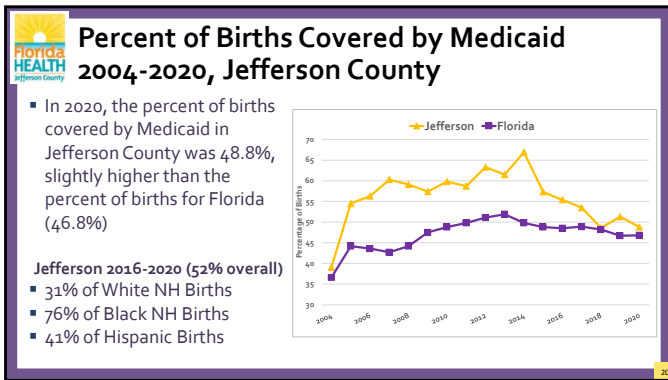
- 25% of repeat births among White, non-Hispanic mothers
- 38% of repeat births among Black & Other, non-Hispanic mothers
- 16% of repeat births among Hispanic mothers

Year	Jefferson	Florida
2000	38.0	35.6
2001	27.8	35.6
2002	35.0	35.6
2003	42.0	35.6
2004	35.0	35.6
2005	35.0	35.6
2006	42.0	35.6
2007	27.8	35.6
2008	35.0	35.6
2009	42.0	35.6
2010	35.0	35.6
2011	35.0	35.6
2012	35.0	35.6
2013	35.0	35.6
2014	45.0	35.6
2015	35.0	35.6
2016	35.0	35.6
2017	42.0	35.6
2018	35.0	35.6
2019	42.0	35.6
2020	27.8	35.6

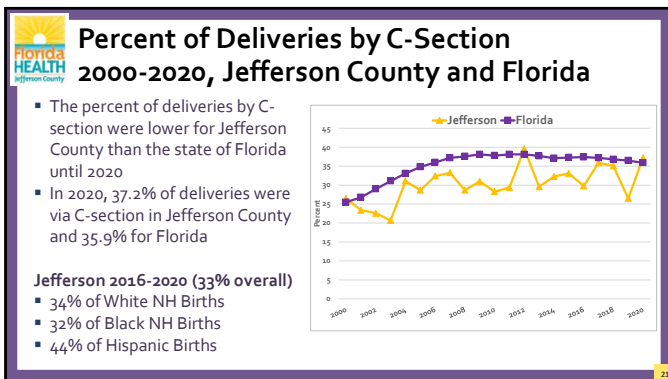
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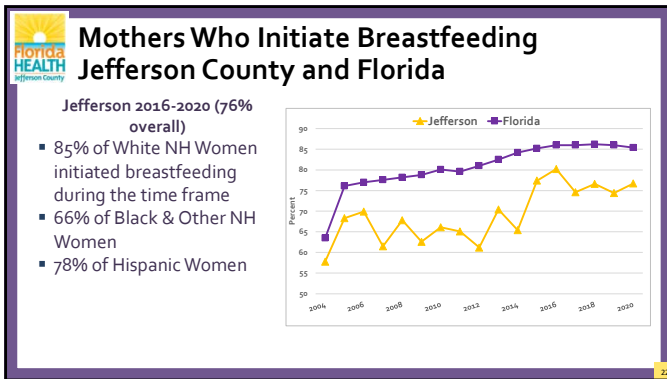
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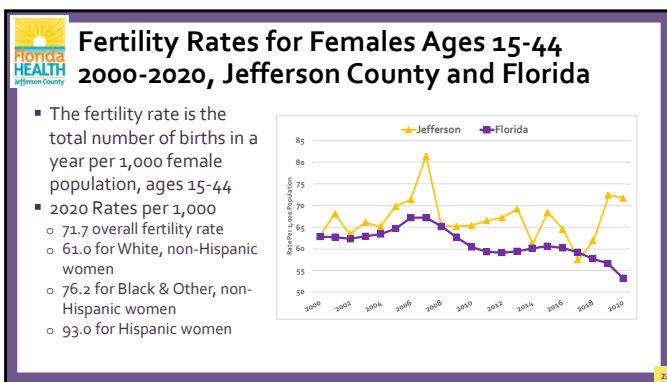
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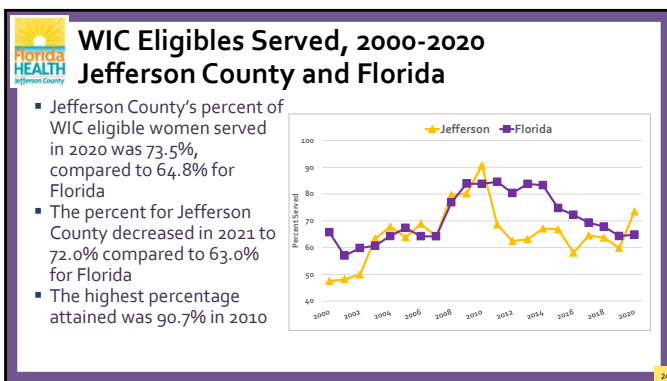
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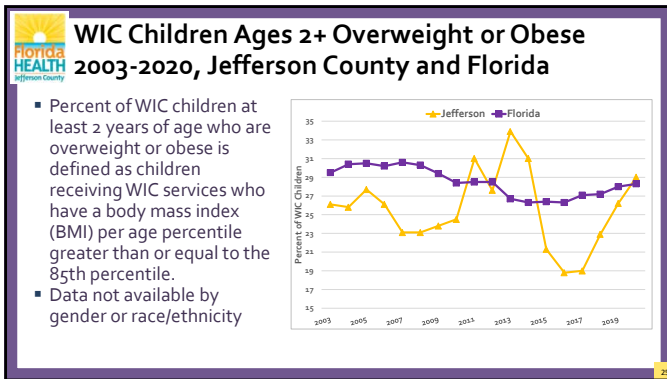
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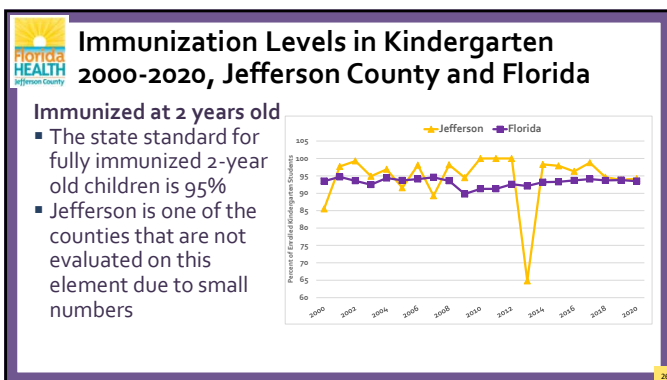
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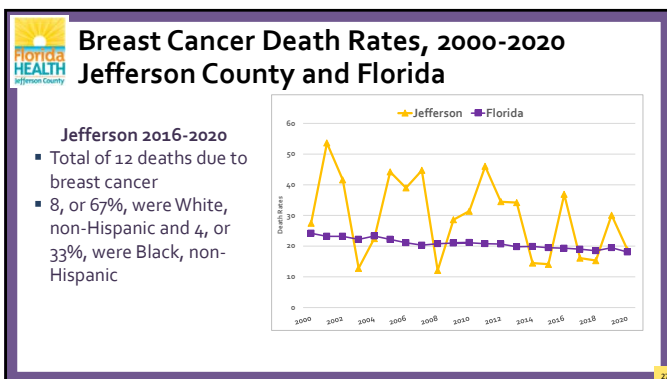
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Cervical and Ovarian Cancer Deaths, Jefferson County, 2000-2020


Ovarian Cancer

- Total of 21 deaths due to ovarian cancer
- 11, or 52% were White, non-Hispanic and 10, or 48% were Black, non-Hispanic
- There were no Hispanic deaths during the time frame

Cervical Cancer

- There have been 4 deaths due to cervical cancer
- 1, or 25% was White, non-Hispanic and 3, or 75% were Black, non-Hispanic
- There were no Hispanic deaths due to cervical cancer during this time frame

28



Other Maternal, Birth and Young Child Risk Factors, Jefferson County

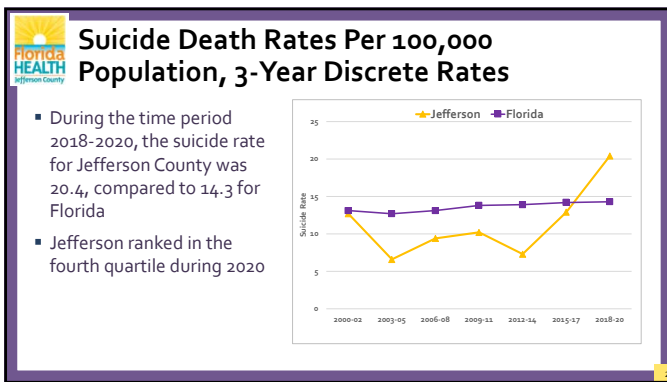
- Jefferson County ranked in the 4th quartile in the 2020 Pregnancy and Young Child Profile for the following:
 - Births among unwed teen mothers ages 15-19
 - Females ages 17+ with pap smear in previous year
 - Women 15-34 with bacterial sexually transmitted diseases
 - Asthma hospitalizations in ages < 1, in ages 1-5
 - Severe Maternal Morbidity
 - Children in foster care ages 1-4
 - Children participating in pre-K programs
 - Children with disabilities receiving services
- 9 Birth defects reported for Jefferson County during 2014-2018

29

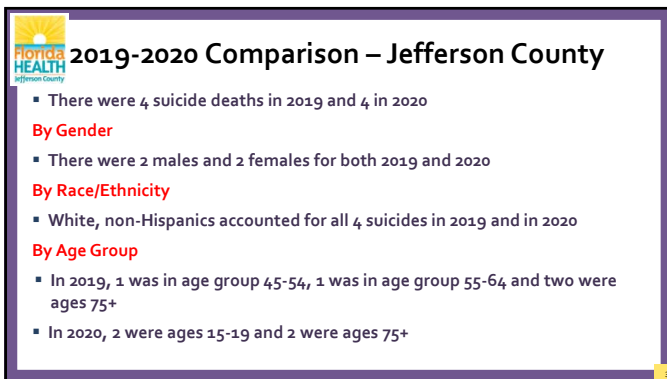
Social and Behavioral Health



1



2



3

2019-2020 Comparison – Jefferson County

By Method

- In 2019, 1 suicide occurred using a firearm and 3 occurred through drug poisoning
- In 2020, all 4 occurred using a firearm

Non-Fatal Self-Harm Injuries

- There were a total of 18 reported in 2019, of which 7 were hospitalized and 11 were ER visits
- There were a total of <5 reported in 2020, all of which were hospitalized

4

Hospitalization Rates per 100,000 Population for Mental Disorders, 2000-2020

Jefferson County's hospitalization rates were above the state of Florida from 2018-2020

Year	Jefferson County	Florida
2000	500	500
2001	800	500
2002	600	500
2003	600	500
2004	600	500
2005	950	500
2006	600	500
2007	600	500
2008	600	500
2009	600	500
2010	600	500
2011	600	500
2012	900	500
2013	600	500
2014	600	500
2015	600	500
2016	600	500
2017	600	500
2018	600	500
2019	1200	800
2020	1100	900

5

Hospitalizations by Type of Mental Disorder, 2019-2020 Jefferson County

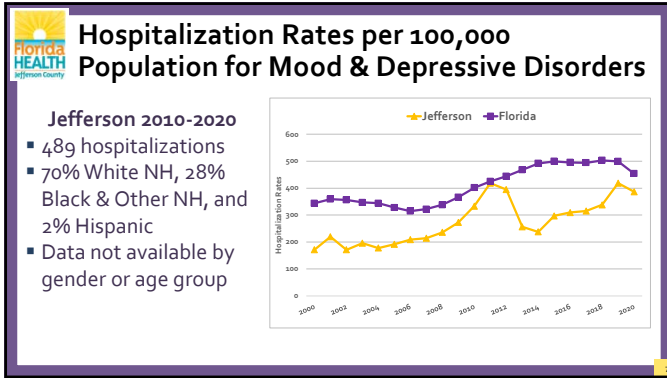
2019 = 174 Hospitalizations

Disorder	Percentage
Schizophrenic Disorder	40%
Mood and Depressive Disorder	43%
Drug and Alcohol Induced	17%
Eating Disorder	0%

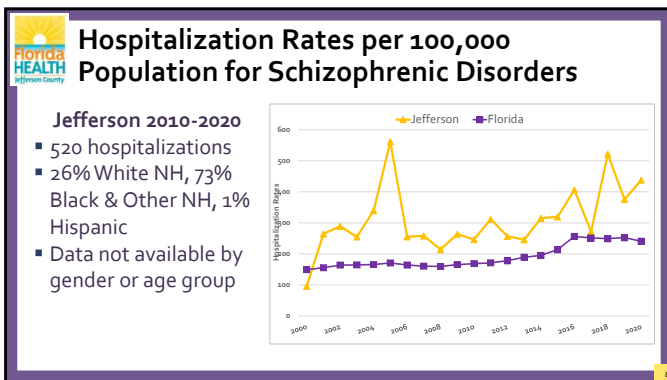
2020 = 156 Hospitalizations

Disorder	Percentage
Schizophrenic Disorder	44%
Mood and Depressive Disorder	41%
Drug and Alcohol Induced	15%
Eating Disorder	0%

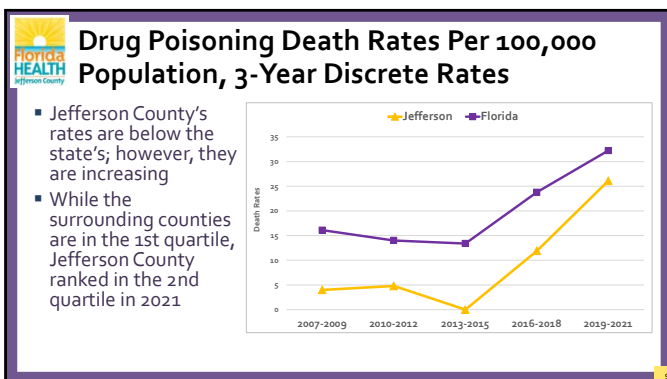
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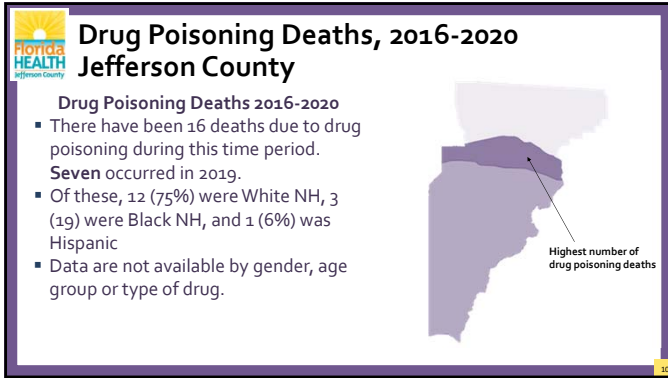
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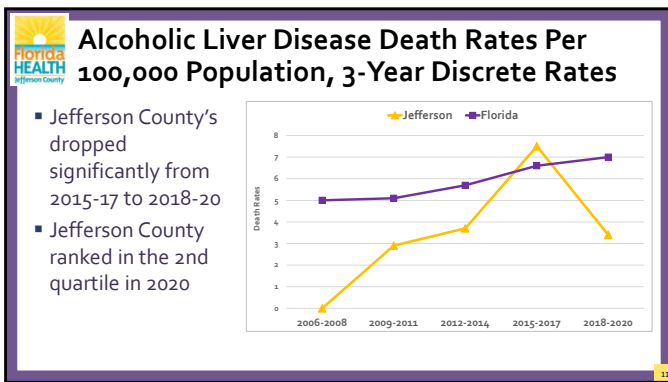
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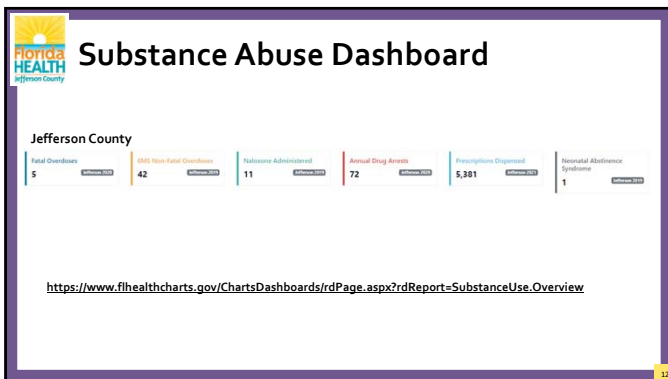
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12



2020 Overdose Data, Jefferson County

2020 Indicators	Jefferson
Opioid Overdose Deaths	1
Drug Overdose Deaths	5
Opioid Death Rate Per 100,000 Population	3-7
Drug Overdose Death Rate Per 100,000 Population	31-5
EMS Response to Suspected Non-Fatal Opioid Overdose	5
EMS Response to Suspected Non-Fatal Drug Overdose, Not Opioids	24
Non-Fatal Drug Overdose ER Visits	7
All Drug Non-fatal Overdose Hospitalizations	9
Naloxone Administered	7


13



Prescriptions and Treatment, Jefferson County

2021 Indicators	Jefferson County
Number of Opioid Prescriptions Dispensed	4,113
Number of Unique Patients	1,343
Prescriptions Dispensed Per Patient	3.1
Adult Substance Abuse Program Enrollees	49
Child Substance Abuse Program Enrollees	353

14




Risk Behaviors, Jefferson County

Indicators	Jefferson County
% Adults Who Engage in Heavy or Binge Drinking - 2019	18.7%
% Students Who Rode in a Car Driven By Someone Who Had Been Drinking - 2018	9.6%
% Students Using Vape Products with Marijuana Oil - 2020	n/a

Adult respondents to BRFSS survey and student respondents to YRBS survey

15

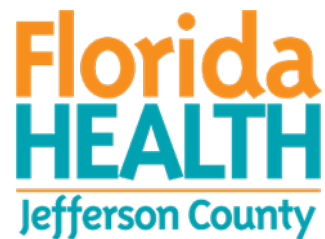


Consequences, Jefferson County

Indicators	Jefferson County
Drug Arrests – 2020	72 71 adult 1 child
Alcohol Confirmed Motor Vehicle Crashes – 2019	7 1 fatality
Drug Confirmed Motor Vehicle Crashes - 2019	1 1 fatality
Neonatal Abstinence Syndrome – 2019	<5
Early Steps Clients Experiencing Neonatal Abstinence Syndrome – 2020	0

We are grateful for your attendance and your unwavering commitment to improving the health of Jefferson County.

THANK YOU FOR JOINING US!





Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Maternal and Child Health
Florida Department of Health Jefferson County
March 22, 2023, 10:00 a.m. to 11:00 a.m.

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Donna Hagan, Committee Chair
Sign In	Donna Hagan, Committee Chair
Data Review	Pam Beck
Overview of FIMR <ul style="list-style-type: none">History and PurposeCRT and CAG Overview of 2022 Recommendations Choosing 2023-2024 CAG Initiatives	Donna Hagan, Committee Chair
Develop Objectives	Donna Hagan, Committee Chair
Group Updates	Donna Hagan, Committee Chair
Next Meeting Date	Donna Hagan, Committee Chair
Meeting Evaluation	Donna Hagan, Committee Chair
Adjourn	Donna Hagan, Committee Chair



Maternal and Child Health Committee Meeting

March 22, 2023



Purpose: Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

<u>Name</u>	<u>Organization</u>	<u>Email Address</u>
1. Brandi Turner	Healthy Families Seven Rivers	bturner@healthystartjmt.org
2. LAURA BLUE	HEALTHY START COALITION JMT	lblue@healthystartjmt.org
3. Anna Messick	Tobacco Prevention	anna.messick@flhealth.gov
4. Brenda Carlton	Taylor County School Bd	brenda.carlton@Taylor.k12.fl.us
5. Lavonte m Daniel	Appalachee Center - Primary Care	lavontem54@apalacheecenter.org
6. Pam Beck	DOH - Jefferson & Madison	pam.beck@flhealth.gov
7. Shanellha Mitchell	DOH - Jeff & Madison	shanelha.mitchell@flhealth.gov
8. Tonya Bell	HSCJMT	tbell@healthystartjmt.org
9. Kimberly Allbritton	DOH Jefferson / Madison	kumbury.allbritton@flhealth.gov
10. Chelsey McCoy	FDH Jefferson + Madison	Chelsey.mccoy@flhealth.gov
11. Debra Saenz		
12. Donna Hagan	HSCJMT	dhagan@healthystartjmt.org
13.		
14.		



Florida Department of Health in Jefferson & Madison County
Social and Behavioral Health Committee Meeting
Florida Department of Health in Jefferson County
April 25, 2023, 10:00 a.m.

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Lisa Sherry, Committee Chair
Sign In	Chelsey McCoy
Determine Member Roles (Co-Chair, Secretary)	Lisa Sherry, Committee Chair
Develop Goals and Objectives	Pam Beck
Group Updates	Group
Next Meeting Date	Lisa Sherry, Committee Chair
Meeting Evaluation	Chelsey McCoy
Adjourn	Lisa Sherry, Committee Chair



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Social and Behavioral Health
Florida Department of Health in Jefferson County
April 25, 2023, 10:00 a.m.

Sign in Sheet

Name	Organization	Email Address	Signature
1. Debbie Saenz	Children's Medical Services: Title V Program	debra.saenz@flhealth.gov	Online
* 2. Chelsea Vogtle	Big Bend AHEC	cvogtle@bigbendahec.org	
3. Kevin Angel	Madison County Memorial Hospital	kangel@mcmh.us	
4. Shanetha Mitchell	FDOH	Shanetha.mitchell@flhealth.gov	
5. Dr. Jennifer Bellotti	Full Spectrum ABA	drbellottibcbad@fullspectrumaba.com	
6. Caroline Gibson	DOH in Jefferson and Madison	caroline.gibson@flhealth.gov	
7. Marie Rigdon	Jefferson County Sheriff's Office	marie.rigdon@jcso-fl.org	Marie Rigdon
8. Lavonte McDaniel	Apalachee Center-Madison Primary Care	lavontem54@apalacheecenter.org	
9. Carissa Pepera	FDOH-Madison	carissa.pepera@flhealth.gov	Online
10. Kathy Barrett	Early Steps	kathy.barrett@chsfl.org	
11. Anna Messick	FDOH-Jefferson	anna.messick@flhealth.gov	Online
12. Tammy Wells Stevens	Madison County Memorial Hospital	tstevens@mcmh.us	
13. Charles Allen Clayton	Madison County Fire Rescue	fireco@madisoncountyfl.com	
14. Karen Nazworth	Big Bend AHEC	knazworth@bigbendahec.org	Online
15. Jan Cherry	North Florida Child Development	jcherry@floridachildren.org	



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Social and Behavioral Health
Florida Department of Health in Jefferson County
April 25, 2023, 10:00 a.m.

Sign in Sheet

16. Lisa Sherry	DISC Village	lisa.sherry@discvillage.org	<i>Lisa Sherry</i>
17. Shanice Hayes	Early Steps	shanice.hayes@chsfl.org	
18. Emily Kohler	Big Bend AHEC	ekohler@bigbendahec.org	<i>online</i>
19. Colin Vareene	Madison County Memorial Hospital	cvareene@mcmh.us	
20. Sophia Whaley	NFW Health Network	sophia.whaley@nwfhealth.org	
21. Pam Beck	FDOH-Jefferson and Madison	pam.beck@flhealth.gov	<i>Pam Beck</i>
22. Chelsey McCoy	FDOH-Jefferson and Madison	chelsey.mccoy@flhealth.gov	<i>Chelsey McCoy</i>
23. Kimberly Allbritton	FDOH-Jefferson and Madison	kimberly.allbritton@flhealth.gov	
24. Kelli Mercer	HCA	kelli.mercer@hcahealthcare.com	<i>online</i>
25. Bibi Ramons	NFW Health Network	beatriz.ramos@nwfhealth.org	<i>online</i>
26. Jessica Brantley	Disc Village	jessica.brantley@discvillage.org	
27. Patricia Blair	Honey Lake Clinic	pblair@honeylakeclinic.com	<i>online</i>
28. Shalona Hearn	Department of Children and Families	shalona.hearns@myflfamilies.com	<i>Shalona Hearn</i>
29. Dr. Shamarial Roberson	DSR Consultants	sroberson@dsrconsultant.com	
30. Patricia Hall	The Butterfly Effect Mentoring Program	butterflygirls1@yahoo.com	
31. Nicole Dempsey	VA	nicole.dempsey@va.gov	<i>Nicole M Dempsey</i>
32. Yolanda Gillette	Big Bend AHEC		
33. Allyn Howard	Jefferson County Schools	ahoward@jeffersonschools.net	



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Social and Behavioral Health
Florida Department of Health in Jefferson County
April 25, 2023, 10:00 a.m.

Sign in Sheet

34.	See Singleton	Florida Therapy Services	SSingleton@flatherapy.com	
35.				
36.				
37.				
38.				
39.				
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Microsoft Teams Attendees 4/25/2023

Saenz, Debra	Debra.Saenz@flhealth.gov
Beatriz Ramos	beatriz.ramos@NWFHealth.org
Emily Kohler	ekohler@bigbendahec.org
Allbritton, Kimberly	Kimberly.Allbritton@flhealth.gov
Lesley Fry	No email listed and do not have one on file.
Messick, Anna	Anna.Messick@flhealth.gov
Pepera, Carissa	Carissa.Pepera@flhealth.gov
Kelli Mercer (Guest)	kelli.mercer@hcahealthcare.com
Shamarial Roberson	sroberson@dsrconsultant.com
Patricia Blair	pblair@honeylakeclinic.com
Janice Hawkins	JHAWKINS@SunshineHealth.com
Tori R. Woods	Tori.Woods@sunshinehealth.com
Karen Nazworth	knazworth@bigbendahec.org



**Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Chronic Disease
Florida Department of Health Jefferson County Conference Room
May 23, 2023, 2:00 p.m. to 3:30 p.m.**

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Storm Goodlin, Committee Chair
Sign In	Storm Goodlin, Committee Chair
Data Review	Pam Beck
Develop Objectives	Group
Group Updates	Group
Next Meeting Date	Storm Goodlin, Committee Chair
Meeting Evaluation	Chelsey McCoy
Adjourn	Storm Goodlin, Committee Chair



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Chronic Disease
Florida Department of Health Jefferson County Conference Room
May 23, 2023, 2:00 p.m. to 3:30 p.m.

Sign in Sheet

<u>Name</u>	<u>Organization</u>	<u>Email Address</u>	<u>Signature</u>
1. Alisha Mughal	Bureau of Chronic Disease Prevention	alisha.mughal@flhealth.gov	Virtual
2. Anna Messick	FDOH Jefferson	anna.messick@flhealth.gov	
3. Betsy Rykard	FDOH Jefferson and Madison	leila.rykard@flhealth.gov	Betsy Rykard
4. Carissa Pepera	FDOH Madison	carissa.pepera@flhealth.gov	Virtual
5. Caroline Gibson	FDOH Jefferson and Madison	caroline.gibson@flhealth.gov	
6. Charles Allen Clayton	Madison County Fire Rescue	fireco@madisoncountyfl.com	
7. Chelsey McCoy	FDOH Jefferson and Madison	chelsey.mccoy@flhealth.gov	Chelsey McCoy
8. Colin Vareene	Madison County Memorial Hospital	cvareene@mcmh.us	
9. James Holland	North Florida College	hollandj@nfc.edu	
10. Jan Cherry	North Florida Child Development	jcherry@floridachildren.org	
11. Kechia L Robinson	Madison County Board of County Commissioners	assistant@madisoncountyfl.com	Kechia Robinson
12. Kelly S Williams	Big Bend Hospice	kswilliams@bigbendhospice.org	_____
13. Kevin Angel	Madison County Memorial Hospital	kangel@mcmh.us	
14. Kimberly Allbritton	FDOH Jefferson and Madison	kimberly.allbritton@flhealth.gov	Virtual
15. Lavonte McDaniel	Apalachee Center-Madison Primary Care	lavontem54@apalacheecenter.org	LA McDaniel



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Chronic Disease
Florida Department of Health Jefferson County Conference Room
May 23, 2023, 2:00 p.m. to 3:30 p.m.

Sign in Sheet

16. Pam Beck	FDOH Jefferson and Madison	pam.beck@flhealth.gov	<i>Pam Beck</i>
17. Shanetha Mitchell	FDOH Jefferson and Madison	Shanetha.mitchell@flhealth.gov	<i>Shanetha Mitchell</i>
18. Storm Goodlin	American Cancer Society	storm.goodlin@cancer.org	<i>Storm Goodlin</i>
19. Tammy Stevens	Madison County Memorial Hospital	tstevens@mcmh.us	<i>Virtual</i>
20. Tristan Hope	FDOH Jefferson	tristan.hope@flhealth.gov	
21. <i>Tonya Bell</i>	<i>HSCJMT</i>	<i>tbell@healthystartjmt.org</i>	<i>Tonya Bell</i>
22.			
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**Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Maternal and Child Health
Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc.
June 27, 2023, 2:00 p.m. to 3:30 p.m.**

AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Donna Hagan, Committee Chair
Sign In	Donna Hagan, Committee Chair
Approve March Meeting Minutes	Group
Review Community Action Group Annual Action Plan	Donna Hagan, Committee Chair
Review Proposed Objectives	Group
Group Updates	Donna Hagan, Committee Chair
Next Meeting Date	Donna Hagan, Committee Chair
Meeting Evaluation	Donna Hagan, Committee Chair
Adjourn	Donna Hagan, Committee Chair



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Maternal and Child Health
Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc.
June 27, 2023, 2:00 p.m. to 3:30 p.m.

Sign in Sheet

<u>Name</u>	<u>Organization</u>	<u>Email Address</u>	<u>Signature</u>
Afaf Qasem	Tallahassee Memorial HealthCare	afaf.qasem@tmh.org	
Alisha Mughal	Bureau of Chronic Disease Prevention	alisha.mughal@flhealth.gov	
Anna Messick	FDOH Jefferson	anna.messick@flhealth.gov	
Carissa Pepera	FDOH Madison	carissa.pepera@flhealth.gov	
Chelsey McCoy	FDOH Jefferson and Madison	chelsey.mccoy@flhealth.gov	Chelsey McCoy
Colin Vareene	Madison County Memorial Hospital	cvareene@mcmh.us	
Cumi Allen	FDOH Jefferson and Madison	cumi.allen@flhealth.gov	
Debbie Saenz	Children's Medical Services: Title V Program	debra.saenz@flhealth.gov	TEAMS
Donna Hagan	Healthy Start Coalition	dhagan@healthystartjmt.org	
Jan Cherry	North Florida Child Development	jcherry@floridachildren.org	
Janice Hawkins	Sunshine Health	jhawkins@sunshinehealth.com	
Kevin Angel	Madison County Memorial Hospital	kangel@mcmh.us	
Kimberly Allbritton	FDOH Jefferson and Madison	kimberly.allbritton@flhealth.gov	ATTENDED
Lavonte McDaniel	Apalachee Center-Madison Primary Care	lavontem54@apalacheecenter.org	TEAMS
Lorri G Swafford	FDLRS NEFEC	swaffordl@nefec.org	



Florida Department of Health in Jefferson & Madison County
Community Health Improvement Plan Meeting-Maternal and Child Health
Healthy Start Coalition of Jefferson, Madison and Taylor Counties, Inc.
 June 27, 2023, 2:00 p.m. to 3:30 p.m.

Sign in Sheet

Margie Evans		576@gmail.com	
Pam Beck	FDOH Jefferson and Madison	pam.beck@flhealth.gov	
Shanetha Mitchell	FDOH Jefferson and Madison	Shanetha.mitchell@flhealth.gov	<i>Shanetha Mitchell</i>
Shanice Hayes	Early Steps	shanice.hayes@chsfl.org	
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<i>Shanae Prutchett</i>	<i>Disc Village</i>		<i>Shanae Prutchett</i>
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<i>Christina DeSilva</i>			<i>TEAMS</i>
<i>Catherine Brunson</i>			<i>TEAMS</i>

Lorraine Buffington

TEAMS



Florida Department of Health in Jefferson & Madison County
Social and Behavioral Health Committee Meeting
Florida Department of Health in Jefferson County
July 25, 2023, 10:00 a.m.



AGENDA

Purpose:

Community partners meet to discuss the Community Health Improvement Plan priority areas and plan activities to address the priority areas.

Topic	Lead
Welcome/Call to Order	Lisa Sherry, Committee Chair
Sign In	Chelsey McCoy
Approval of April Meeting Minutes	Group
Vote on Goal and Objectives	Lisa Sherry, Committee Chair
Form Work Groups	Pam Beck
Group Updates	Group
Next Meeting Date	Lisa Sherry, Committee Chair
Meeting Evaluation	Chelsey McCoy
Adjourn	Lisa Sherry, Committee Chair

Sign in Sheet

<u>Name</u>	<u>Organization</u>	<u>Email Address</u>	<u>Signature</u>
Lavonte McDaniel	Apalachee Center-Madison Primary Care	lavontem54@apalacheecenter.org	
Murel Polee	Apalachee Center-Jefferson	murel.poleeiii@gmail.com	
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Emily Kohler	Big Bend AHEC	ekohler@bigbendahec.org	virtual
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Sign in Sheet

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