



HENRY COUNTY HEALTH PARTNERS

*Bringing diverse organizations together to improve the health of all
Henry County residents*

ACCESS TO HEALTHCARE

OBJECTIVE: Increase the number of Henry County residents getting preventive care by providing equitable health care services people use and understand by 2028.

STRATEGY: Increase culturally competent healthcare workforce across the county including in underserved communities.

2021 PROGRESS: Organized group of community health workers (CHW) who identified need for additional CHW and changes to funding system. Recognized need to promote CHW services through local healthcare providers and community leaders. Hired Spanish speaking CHW.

2022 PLANS: Review funding system for rural CHW. Train local healthcare workers on CHW referral process. Train CHW's on managed care plans. Hold outreach events to educate residents on the importance of preventive care.

ECONOMIC STABILITY

OBJECTIVE: Improve the economic stability of Henry County by creating a stable workforce through access to equitable jobs with opportunities for advancement, available daycare for all shifts, and affordable housing.

STRATEGIES: Develop sector-based workforce initiatives. Improve and expand childcare. Increase affordable housing.

2021 PROGRESS: Developed Employee Advocate program to support residents attain gainful employment. Evaluated local daycare availability and needs. Worked with local leaders to survey and assess current housing options.

2022 PLANS: Coordinate with local organizations to implement the workforce liaison position. Conduct resident survey to determine daycare needs. Look for opportunities and funding to expand low-income housing.

MENTAL HEALTH

OBJECTIVE: Reduce Henry County youth and adults with depression, and reduce Henry County youth and adults contemplating, attempting, and completing suicide by 2028.

STRATEGIES: Increase awareness of mental health, suicide, and depression. Increase awareness of community mental health resources.

2021 PROGRESS: Completed readiness assessment of suicide and depression. Developed plans to expand #4YourMentalHealth program. Identified NOCAC Resource Guide as listing for all services.

2022 PLANS: Implement regional #4YourMentalHealth program. Build and share resource guide with community.

SUBSTANCE MISUSE

OBJECTIVE: Reduce the number of unintentional drug overdose deaths by 2028.

STRATEGIES: Establish naloxone education and distribution plan. Create rapid response team. Provide information and referral line.

2021 PROGRESS: Launched Project DAWN - began distributing naloxone kits and training individuals on how to use them. Determined response teams needed.

2022 PLANS: Expand naloxone training, distribution, and education. Identify, screen, and train volunteers for response teams. Create response team resource kits. Identify referral line funding sources.

JOIN US! Be a part of the change in our community by joining Henry County Health Partners. Contact Sharon Meece (smeece@henrycohd.org)



Access to Healthcare Year End Report 2021

Community Health Priority: Access to Healthcare
Objective: Increase the number of Henry County residents getting preventative care by providing equitable health care services people use and understand by 2028.

Measure(s): Uninsured Population, Non-emergent ED Visits, Preventive Care Utilization

STRATEGY	PROGRESS REPORT	BETTER OFF (who and how many?)	2022 IMPROVEMENTS and PLANS																								
<p>A. Increase culturally competent healthcare workforce across the county including in underserved communities</p>	<ol style="list-style-type: none"> Identified community health workers as a direct way to meet clients where they are in a culturally competent and equitable way. Formed a work group of community health workers in local health care to determine what they need. Workgroup reported that the need is really community health workers (CHW). Patient advocates and discharge nurses provide support to the client while in the hospital and upon release, but not effective in promotion of preventative care or in longer term support of basic needs. Funding is an issue as the CHW Pathways HUB is gravely insufficient to support rural CHW's. Identified the need to promote services provided by HCHD's Henry County Cares CHW program through healthcare (providers, 1st responders, Urgent Care) and community leaders (pastors, community health partners etc.). HCHD hired a Spanish speaking CHW for Henry County Cares 	<table border="1"> <thead> <tr> <th>Pathway</th> <th>7/1/21-9/30/21</th> <th>10/1/21-12/31/21</th> </tr> </thead> <tbody> <tr> <td>Medical Home</td> <td>0</td> <td>2</td> </tr> <tr> <td>Medical Referral</td> <td>0</td> <td>19</td> </tr> <tr> <td>Housing</td> <td>1</td> <td>5</td> </tr> <tr> <td>Health Insurance</td> <td>0</td> <td>1</td> </tr> <tr> <td>Employment</td> <td>1</td> <td>4</td> </tr> <tr> <td>Social Service</td> <td>7</td> <td>58</td> </tr> <tr> <td>Education (health related)</td> <td>11</td> <td>44</td> </tr> </tbody> </table>	Pathway	7/1/21-9/30/21	10/1/21-12/31/21	Medical Home	0	2	Medical Referral	0	19	Housing	1	5	Health Insurance	0	1	Employment	1	4	Social Service	7	58	Education (health related)	11	44	<ol style="list-style-type: none"> Reach out to Hospital Council of Northwest Ohio to suggest review of funding for rural pathways. Provide a referral form for those in healthcare or leadership roles to refer residents to Henry County Cares. Hospital will train providers on Henry County Care CHW and referral form. Hospital will provide training videos on when to go to provider, urgent care, ER. Hospital will provide managed care/insurance benefit training to CHW's Plan outreach events to educate Henry County residents on preventative care.
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<p>B. Develop healthcare workforce</p>	<p>Tabled until 2022</p>																										

General Summary: Access to Healthcare is about getting people health care. It has been determined Henry County has: a hospital, an urgent care facility, a federally qualified health center, physicians and other health care providers, and a high percentage of residents have health insurance. The tools are in place. Residents must now access the healthcare they deserve by getting the preventative care they are entitled by establishing a provider through access to preventative care they will have better access when an acute medical issue arises as they are an established patient. This is done through education, community health workers and community leadership. This group membership has grown 67% from 15 to 25 members.



Economic Stability Year End Report 2021

Community Health Priority: Economic Stability

Objective: Improve the economic stability of Henry County by creating a stable workforce through access to equitable jobs with opportunities for advancement, available daycare for all shifts, and affordable housing by 2028.

Measure(s): Poverty, ALICE, Unemployment, Income, Turnover/Retention, Advancement

STRATEGIES	PROGRESS REPORT	Better Off (Who and how many)	2022 improvement and plans
<p>A. Develop sector-based workforce initiatives*</p>	<ol style="list-style-type: none"> 1. Proposed the Employee Advocate program to support residents to attain gainful employment. 2. The program engages the resident by assessing and providing support in the following areas: <ul style="list-style-type: none"> • Basic needs: housing, daycare, transportation, medical needs. • Soft skills: resume, interviewing skills etc. • Job Coaching: transportation, managing stressors 3. The program is a partnership between HCHD’s Social Support Community Health Worker program and HCTN Job Coaching Program. 4. The targeted populations are recent high school graduates and unemployed adults 5. Established employer partnerships with Sauder’s and Dairy Queen to test the program. 	<p>No one yet</p>	<ol style="list-style-type: none"> 1. Coordinate with JFS and CIC with implementing workforce liaison position. 2. Continue to work on this plan and secure funding. 3. Build relationships with local employers to increase employment. 4. Re-look at employment data as 2020 and 2021 data comes available and economy stabilizes from pandemic
<p>B. Improve and expand childcare*</p>	<ol style="list-style-type: none"> 1. Researched local daycare availability and found daycare leadership lack of certified and uncertified workforce is the barrier to expanding. Costs are low and need is high. 2. Determined daycares staffing was negatively affected by COVID 19 - first with loss of work due to shutdowns and then by loss of workers who went elsewhere and by isolation and quarantine as pandemic continues. 3. YWCA Heather Dunzweiler shared resources available to daycares through YWCA. Suggested a study through survey to determine residents’ daycare needs and wants. 4. Looking at infrastructure funding to expand daycare capacity. 	<p>No one yet</p>	<ol style="list-style-type: none"> 1. Will conduct resident survey to determine family needs.

C. Increase affordable housing*	<ol style="list-style-type: none"> 1. Working with local leaders on housing options. 2. Housing Brief written; the brief identified Henry County housing is among the oldest in the state and there is a shortage of low-income housing. 3. Survey on homeless conducted. 4. Learned from ODH leadership Laura Rooney, Roma Barickman, Mike Frazier about housing programs at the state level. 5. Learned locally within 4 counties recovery housing being built. 	No one yet	<ol style="list-style-type: none"> 1. Will continue to look for opportunities to expand housing in Henry County, especially low-income housing.
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General summary: This group has succeeded at building relationships and studying data and programs to support strategy development for Henry County. The membership has increased 114% from 14 members in 2020 to 30 members in 2021. A group working on homelessness merged into this group and provides additional information and strategy. However, this group struggles with getting the right decision makers at the table. Strategically planning new membership could provide significant gains for the group. Additional barriers include funding, and stronger partnerships to build stronger programs.



Mental Health Year End Report 2021

<p>Community Health Priority: Mental Health</p> <p>Objective: Reduce Henry County youth and adults with depression and reduce Henry County youth and adults contemplating, attempting, and completing suicide by 2028.</p> <p>Measure(s): Unmet need, self-reporting of sadness or hopelessness, depression, attempting suicide, number of suicide deaths.</p>			
STRATEGIES	PROGRESS REPORT	BETTER OFF (who and how many?)	2022 IMPROVEMENTS and PLANS
A. Increase community awareness of mental health, depression, and suicide in Henry County.	<ol style="list-style-type: none"> 1. Maumee Valley Guidance completed readiness assessment of suicide and depression within the county. 2. Result indicated Henry County is in Vague Awareness 3. Determined the need to educate on the many mental health services and resources available in Henry County through community events. 4. Strategies in place to work within existing program <i>For Your Mental Health</i> funded by the ADAMH's Board and in 4 northwest Ohio counties. 5. Each county will set up a health fair type booth at 3 community events to educate through activities, pass out items and materials, and interact with residents on mental health and suicide. 	Partners are better for having the completed study results to guide efforts.	<ol style="list-style-type: none"> 1. Implement the planned strategy in conjunction with Fulton, Williams, and Defiance through #4YMH program. 2. 3 events will be attended to educate public on mental health services.
B. Increase community awareness of mental health resources	<ol style="list-style-type: none"> 1. Building a resource guide for all services through NOCAC 	No one yet	<ol style="list-style-type: none"> 1. When the resource guide is built, it will be promoted by distributing a paper copy to families through the schools and to other residents at specific locations. 2. A URL link will be used to provide online access to all Henry Countians through posters and promotion.
<p>General Summary: Henry County is fortunate to have considerable behavioral health services. Through the workgroup it has been identified residents lack awareness of the services, programming, or how to access them. Educating to reducing the stigma of mental health issues and increase understanding of where and when to get help if needed is the focus of this initiative. Possible barriers include funding for event strategy, and lack of ownership of the resource guide. The group would also like to research the possibility of a suicide fatality review to more deeply understand community roles in reducing contemplation, attempts and completion. This group has grown by 67% since 2020 with 10 new members added to the roster for a total of 25.</p>			



Substance Misuse Year End Report 2021

Community Health Priority: Substance Misuse

Objective: Reduce the number of unintentional drug overdose deaths by 2028.

Measure(s): Unintentional Drug Overdose Deaths, Number of Drug Overdoses, Drug Charges, Recovery Program Graduates

STRATEGIES	PROGRESS REPORT	Better Off (who and how many?)	2022 improvements and plans
<p>A. Establish Naloxone education and distribution plans. *</p>	<ol style="list-style-type: none"> HCHD medical director signed protocol to distribute naloxone in Henry County. Henry County Health Department became a Project DAWN distribution site on September 14th, 2021, the only Northwest Ohio site. Project DAWN is an Ohio Department of Health program that provides naloxone to distribution sites for at no cost. HCHD received 36 kits and began distributing Naloxone to any individual who may be in the position to stop an overdose on November 18, 2021. A free kit and training is provided to each recipient. As of December 31, 2021, 19 kits had been distributed. A distribution process was written and 7 HCHD staff are trained to distribute naloxone. Three divisions have had training on the availability of naloxone at the health department. Northwest Signal ran a front-page article about Project Dawn on 12.21.21 in response to a BOH presentation and on 12.31.21 an article was written regarding the CHIP year end meeting focusing on reducing overdose deaths. A press release was sent to media and post were put on social media. Letters were sent to Henry County pharmacists and healthcare providers informing them on the availability naloxone kits at HCHD. Providers were provided with a “prescription pad” to prescribe a patient to get a kit. 	<p>Anyone in contact with opioids are at risk of overdose. Access to naloxone is indication all of Henry County is better off.</p> <p>Specifically,</p> <ul style="list-style-type: none"> 15 kits distributed at HCHD 4 kits distributed to local businesses 18 educated on naloxone 19 trained to administer Media campaign has been implemented 	<ol style="list-style-type: none"> Provide training and kits to Henry County businesses, schools, community locations Continue to educate the community through social media and media releases Train the remaining HCHD divisions (2) in 1st quarter of 2022 Continue to distribute naloxone kits Consider setting up additional distribution sites such as: community centers, first responders and other know partners
<p>B. Create Rapid Response Team/Support kits for loved ones</p>	<ol style="list-style-type: none"> Determined the need for 2 response teams 1) for non-fatal overdoses with peer support to encourage recovery and provide a naloxone kit and resources kit 2) fatal overdoses to provide comfort and grief support as well as a resource kit. Determined the items to be include included in each resource kit. 	<p>No one is yet better off.</p>	<ol style="list-style-type: none"> Identify volunteers for the response team. Identify screening and training of response team volunteers. Procure donations and purchase items for the kits.

	<ol style="list-style-type: none"> 3. Established the need for a support group for loved ones of fatal overdose. Coordinator established and location determined on 12.8.21 4. Identified a clergy member to be a part of the support group team 5. Create a resource a kit. The kit will include local addiction and social service resources and naloxone. 6. Developed a process for law enforcement to contact the Rapid Response team to respond to an overdose, fatal or non-fatal. 7. Determined how first responders, law enforcement and hospital to utilize the response teams during overdose. 8. Developed process for non-fatal and fatal response teams in contact and providing support. 		<ol style="list-style-type: none"> 4. Identify training for support group coordinator.
C. Provide Information and referral line	<ol style="list-style-type: none"> 1. Obtain funding for a 24-hour Information & Referral phone line (211) at the cost \$12,000 to provide a 1 call access to information for local services supporting equity in access to all services: physical health, mental health, food, housing transportation, crisis. 	No one is yet better off	<ol style="list-style-type: none"> 1. Continue to look for funding for Information and referral line in 2022
<p>General summary: Substance Misuse has had the largest increase in membership of any of the workgroups. A 127% increase in membership moving from 15 members in 2020 to 34 members in 2021. Members including 1st responders, law enforcement, recovery services, hospital, judicial courts and residents are active and committed to significant change. The barriers the group faces are 1) implementation of the Quick Response teams. Identifying qualified, vetted volunteers to cover 24/7 shifts may prove difficult 2) Ownership for the sustainability of the QRT teams. The group is researching an additional strategy for 2022: Fatal review to understand opportunities for community change in a more effective way.</p>			