

Planning Report Liaison
 Name of liaison
 Email of liaison
 E-mail:

Patricia C. Hunt
 RN BSN MPH
phunt@washingt
oncountyny.gov

Priority	Focus Area (select one from drop down list)	Goal Focus Area (select one from drop down list)	Objectives	Disparities	Interventions	Family of Measures	Projected (or completed) Year 1 Intervention	Projected Year 2	Projected Year 3 Interventions	Implementation Partner (Please select one partner from the dropdown list per row)	Partner Role(s) and Resources
Prevent Chronic Diseases	Focus Area 3: Tobacco prevention	Goal 3.1 Prevent initiation of tobacco use	1. By December of 2021 reduce the percentage of adults that smoke from, 22.3% to 20%	Poverty, Low SES, ALICE	See Below						
Prevent Chronic Diseases	Focus Area 3: Tobacco prevention	Goal 3.1 Prevent initiation of tobacco use	Decrease the rate of Chronic lower Respiratory disease deaths per 100,000 from 78.3 to 74.3 or by 5% by December 31, 2021.	Poverty, Low SES, ALICE	Establish a collaborative with Adirondack health Institute (AHI) AFTN program to enhance regional partnership, communications and coordination of evidenced based policy focused comprehensive tobacco prevention and control efforts. Assure efforts respect and reflect the	track number of media messages, outreach activities, functions attended or interactions with the community and numbers reached with messaging.	Deveolp appropriate partnerships, gather information. Analyze data, begin development of interventions, programs and outreach as appropriate.	Deliver information,education , outreach . Assess reach and effectiveness via evaluative methods developed, utilize PDSA cycles as appropriate and effective to make any needed mid-course changes	Assess overall effectiveness , evaluate sustainability	Community-based organizations	Leadership Advisory, transformational financial and human capital.
		Goal 3.2 Promote tobacco use cessation	Decrease the prevalence of any tobacco use by high school students by 25% (4%to 3%) by December 2021 via the data comparison of the Student Substance Use Survey completed by the Warren/Washington County Council for Prevention.		Support advocacy for policies to reduce the impact of tobacco, nicotine and vaping in low SES, ALICE communities. Partner with local Reality Check program to support and promote implementation of evidenced based youth education , materials and media /social media campaigns.	Track number advocacy opportunities , number reached.	evaluate advocacy opportunities, work to get through county political process to garner support of elected officials. Choose appropriate opportunity(s) and begin to develop partnership and plan finalize plan	deliver advocacy and or support appropriate advocacay efforts.	Track policy or environmental changes attributed to advocacy Evaluate effectiveness and sustainability of activities.	Community-based organizations	Leadership Advisory, transformational financial and human capital.
			Decrease the prevalence of vaping use of electronically delivered nicotine and other substances from 15.2% to		Educate, decision makers, and the community about the dangers of secondhand smoke exposure and aerosol	Number of and type of educational campaigns, reach and impact	Engage Policy/decision makers in development Work with AHI and community partners to offer forums in schools and public meeting places re:	Evaluate reach and effect of forums /community discussions. Assess next steps, community need for follow up information, assess and implement best form of	assess prevalence of vaping via qualitative assement sustainability and effective success of intervention community , knowledge, attitude, beliefs related	Community-based organizations	Leadership Advisory, transformational financial and human capital.
					Work with the Living Tobacco Free initiative and Reality Check program to support the implementation of policies that protect youth from marketing in the retail environment. Increase awareness of Medicaid benefits for smoking cessation including counseling and medication. Educate and mobilize community Members, business leaders and local	track number of individuals utilizing tobacco cessation services, and medication Track Reality check activities, number of adolescents involved and reach.	Assess community needs related to education and resources-partner with AHI AFTN and Reality Check programs to inform process. Develop a plan for education and outreach based on assessment findings. research evidenced based interventions develop plan for education begin messaging /seek feedback make necessary adjustments (PDSA)	implement delivery of education, social media and community based messaging.	Evaluate efforts assess impact sustainability of actions	Community-based organizations	Leadership Advisory, transformational financial and human capital.

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					Promote access to tobacco cessation programs for youth and adults.					Community-based organizations	
					Promote utilization of the NYS Quitline resources.	number of quit line calls or measure of utilization	Market and message re: Quit Line availability assess number of calls/utilization.	Market and message re: Quit Line availability assess number of calls/utilization.	Market and message re: Quit Line availability assess number of calls/utilization.	Community-based organizations	Leadership Advisory, transformational financial and human capital.
					Partner with AHI -AFTN project on Baseline Community assessment local data project to address tobacco retail density and advance health equitable	Harness the strength and reach of the regional PHIP program and document efforts surrounding	Participate in planning workgroup - conduct three community focus groups adolescents, pregnant/parenting women and at risk group engaged in SUD diversion or drug court. Incorporate outcomes in efforts to	Develop partnerships and action plans based on assessed community need. Develop implementation plan	Evaluate effectiveness of intervention(s) Program impact -set metrics assess sustainability	Community-based organizations	Leadership Advisory, transformational financial and human capital.
						account for the number of policy and environmental changes that occur as a result of regional efforts around tobacco and vaping control.	number/types of changes made	number/types of changes made	number/types of changes made	CBO	Leadership Advisory, transformational financial and human capital.

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Promote Well-Being and Prevent Mental and Substance Use Disorders	Focus Area 2: Prevent Mental and Substance User Disorders	Prevent opioid and other substance misuse and death.	Increase public awareness regarding the risks and stigma of substance use. Expand Community engagement around harm reduction, substance use prevention, treatment and recovery.	Poverty, low SES, ALICE	Partner with, support and promote work of the NAS/SUD subcommittee of Hometown vs Heroin and addiction to produce public service messages re: substance use, prevention and services. Continue community and provider education re: the physiological and brain changes that occur with substance use disorder. Engage local health providers as spokespeople. Support life skill training	Hold community forums to engage in conversation, identify knowledge level and education needs. Track number of forum participants Work with local media to highlight positive stories of hope and recovery. Track media stories Improve access to educational materials that are health literate to improve understanding of SUD	Partner with Adirondack Health Institute opioid reduction work group to create and hold community forums to gather data and information re: message creation. Explore desire and effectiveness of a stigma reduction workgroup. Engage other community partners to engage in championing awareness work,	Create educational and media campaigns in collaboration with community partners based on the community feedback Stigma workgroup to assess interest, research evidence base and literation to inform anti stigma work.	Based on evaluation of effort and community feedback make any needed changes to outreach /educational materials.	Community-based organizations	Advisory, leadership, transformational human and financial capital
					Collaborate with the NYSDOH AIDS Institute and Office of Drug user health investigating the potential of a planning grant for regional analysis and recommendations re: housing and wrap around services model for SUD	Develop and report/White paper of recommendations for services and housing plan for SUD women, infant and children.	Secure the collaboration with the DOSH AIDS Institute and ODUH. Develop regional workgroup of the Neonatal Abstinence Syndrome subcommittee . Engage interested members to inform work. Begin assessment work ?SWOT analysis Develop concept paper	Pursue potential funding and implementation of concept paper recommendations Evaluate the ability to make the concept(s) a reality Begin implementation planning	Complete implementation planning secure approvals evaluate sustainability of funding Begin implementation	Community-based organizations	Advisory, leadership, transformational human and financial capital
			Reduce adolescent substance use initiation through strengthening protective factors and reducing risk factor for abuse. Become a trauma informed region		Provide education to reduce risk, create educational opportunities in the region ,Design a regional curriculum that can be adopted by schools and health departments and CBOs in the region Convene individuals working on youth health	number of educational sessions held. Track design and implementation of number of organizations reached and number using materials. Develop inventory of organizations.	Work with regional partners to convene a work group to research literature, evidence base, Design region specific curriculum. Identify pilot sites -recruit districts to pilot	Begin pilot of new curriculum- collect implementation data, numbers reached, satisfaction, replication. Evaluate, implement mid course corrections	Expand sites for delivery track total numbers reached, satisfaction Evaluate program sustainability.	Community-based organizations	Advisory, leadership, transformational human and financial capital
			By December 31, 2021 reduce rate of overdose deaths by 50%. 2017- 1 death 2018-3 deaths Reduce outpt. ED visits for		Increase access to MAT Increase access to Naloxone Partner with AHI to develop a regional work group to inventory	# MAT providers # new MAT providers	Collaborate with AHI opioid response strategic planning group to inventory current providers, and need Educate community about Naloxone availability, use and training	Promote training for gap filling providers. # of trainings held and number attended.	Evaluate utilization of any new training sites and number of Narcan doses distributed and where in the region to assess for regional availability.	Community-based organizations	Advisory, leadership, transformational human and financial capital

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			Prevent and address adverse childhood experiences (ACES). Build Community resilience.		Work with AHI to assess the baseline to current community knowledge, to improve knowledge of the level of existing trauma informed training and education levels. Determine where key community members are and how best to met specific training needs. Assess prevalence of ACES among children and adults in the community and as clients. Partner with other governmental and CBO agencies to	work with Council for Prevention to determine ACES baseline for school children based on the 2019 School survey data. Annual policy and procedure review.	Partner with AHI and the Council for Prevention to assess community knowledge of ACES and needs. Based on the results of the assessment develop gap filling educational interventions/programs based on need. conduct a literature search to evaluate the evidence and evidenced based interventions related to community education. Select and develop an educational program/strategy develop evaluation measures develop a data collection pilot and engage partners	Implement/distribute education/information re; trauma informed care/ training completer program development, develop community implementation schedule of interested parties.	assess effectiveness, satisfaction and sustainability.	Community-based organizations	Advisory, leadership, transformational human and financial capital

