GMPHP

Greater Mercer Public Health *Partnership*

COMMUNITY HEALTH IMPROVEMENT PLAN

ACKNOWLEDGMENTS

The Greater Mercer Public Health Partnership would like to recognize and thank the following organizations and community partners for participating in the planning sessions that led to the identification of the Community Health Priorities and Implementation Plan outlined in this report.

Greater Mercer Public Health Partnership Executive Board:

Mary Jo Abbondanza	St Francis Medical Center
Karen Buda	Community Well
Stephanie Carey	Health Officer Hopewell/Pennington Borough
Carol Chamberlain	Health Officer Lawrence Health Department
Jeremye Cohen	Capital Health Medical Center
Peter Crowley	Princeton Chamber of Commerce
Ann Dorocki	Mercer County Human Services
Robert English	Health Officer Hopewell Health Department
Diane Grillo	Robert Wood Johnson - Hamilton Hospital
Jeff Grosser	Health Officer Princeton Health Department
Darlene Hanley	St Lawrence Rehabilitation Center
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Jill Swanson	West Windsor/Hightstown/Robbinsville Health Department
Yvette Graffie-Cooper	Health Officer Trenton Health Department
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GREATER MERCER PUBLIC HEALTH PARTNERSHIP MEMBER ORGANIZATIONS:

- Advancing Opportunities
- Advocate for Mom and Dad
- Aging Advisors LLC
- AHA Senior Director Community Health
- Aim Coordinator - Henry J Austin
- Attitudes in Reverse
- Big Brother Big Sister of Mercer County
- Cancer Society
- Capital Health - Community Health
- Capital Health Alcohol and Drug Counselor
- Capital Health Community Relations
- Capital Health- Director of Planning
- Capital Health Foundation
- Capital Health-Dir. Clinical Integration
- Catholic Charities
- Central Jersey Family Health Consortium
- Chief of Addiction Services, Mercer County
- Chief of Police Hopewell
- Children's Home Society
- CHOP
- Christina Seix Academy
- Community Activist
- Community Resident
- CSN Pond Road MS
- Director Mercer County TRADE Transportation
- Director Phoenix Behavioral Health
- Director Senior Center Robbinsville
- EmPower Mercer
- Encourage Kids
- ETS
- Ewing Health Department
- GMPHP
- Greater Mercer TMA
- Gwynedd Mercy University
- Hamilton Area YMCA
- Hamilton Health Officer
- Health Coach
- Healthcare Quality Strategies Inc.
- Home Front
- Hopewell Board of Health
- Hopewell Public Health Nurse/Capital Health Comm. Education
- Hopewell Valley Health Department
- Hunterdon County & Mercer Chronic Disease Coalition
- Interfaith Caregivers of Mercer County
- Jewish Family and Child Services
- Lakeview Child Center
- Lawrence Hopewell Trail
- Lawrence Public Health Nurse
- Lawrence Township Health Department
- Lawrenceville Presbyterian Church
- Lawrenceville School Board
- Manager Senior and Social Services
- Medina Community Clinic
- Mental Health Educator
- Mercer Council Alcoholism and Drug Addiction
- Mercer County Freeholder
- Mercer County Human Services
- Mercer County Mental Health Administrator
- Mercer County Office of Economic Development
- Mercer County Parks Naturalist
- Montgomery Health Department
- NAMI of Mercer County
- New Jersey Partnership for Healthy Kids
- NJ Futures Program Manager
- PACF
- Pastor New Gen Church
- Pennington Board of Health
- Phoenix - Program Director
- Physician
- Presbyterian Church Lawrenceville
- Prevention Specialist - Rider University
- Princeton Chamber of Commerce
- Princeton Community Housing
- Princeton Health Department
- Princeton Health Officer
- Princeton House
- Retired Health Educator
- Retired lawyer, Ellarslie Museum
- Robert Wood Johnson Community Education
- Rutgers - Adjunct Professor of Epidemiology
- Rutgers University
- RWJ Hamilton
- St Francis Medical Center
- St Lawrence Rehabilitation Center
- TCNJ – Substance Abuse
- TCNJ Professor
- TCNJ Public Health
- TCNJ School of Nursing
- TCNJ's Alcohol and Drug Education Program
- Terhune Orchards
- The Watershed
- Thomas Edison State College
- Trenton Health Department
- Trenton Health Team Population Health - Manager
- Trenton School Nurse
- Trinity Cathedral Church
- United Way of Greater Mercer County
- Viocare
- West Windsor Health Department

INTRODUCTION

The Community Health Improvement Plan (CHIP) was developed by the Greater Mercer Public Health Partnership (GMPHP), a collaboration of hospitals, health departments, the Mercer County Department of Health & Human Services, and other not-for-profit organizations to measurably improve the health of residents of the Greater Mercer County community. The development of the CHIP began in September of 2018, following completion of the Community Health Assessment (CHA) that identified significant health needs for Mercer County. The process included a combination of data collection and analysis of primary and secondary source data. This process resulted in the Community Advisory Board (CAB) and Executive Board identifying Mercer County's priority health areas to be addressed in a plan for collaboratively improving the community's health. The issues included:

- Underserved Populations/Health Equity
- Mental Health and Substance Abuse
- Food Security/Obesity
- Chronic Disease
- Safe Transportation/Safe Recreational Spaces
- Maternal and Child Health

Following a root cause analysis and review of evidence-based interventions that aligned with the health priority areas, the Board agreed that GMPHP's overall priority area for the next three years was "to help Mercer County residents achieve and maintain a healthy weight and lifestyle throughout their lives", and that this would serve as the overarching priority area encompassing all the identified priority areas.

This document explains the goals, objectives and strategies for addressing the priority areas identified. This CHIP is not intended to represent all activities that are undertaken by our CAB members or all that will be conducted by the hospitals, GMPHP or its community partners. Other needs identified in the CHA will be addressed through other activities or deferred as limited resources are deployed to address agreed upon priorities. This is a living document that will be amended as additional data and resources are identified.

HOW DID GMPHP ARRIVE AT ITS PRIORITIES?

The process of developing the CHIP began with the collection and analysis of a wide range of community health data, known as the Community Health Assessment (CHA). The process which is both quantitative and qualitative took place from February to August 2018 and included data from various sources, surveys and focus groups representing geographic areas across Mercer County.

Specifically, the CHA used detailed secondary public health and demographic data at the State, county and municipality or zip code levels, as well as primary data collected through a community health survey, a focus group of public health officers and other members of the Greater Mercer Public Health Partnership, and five focus groups of 55 community members.

As part of its CHA, Greater Mercer Public Health Partnership held a Community "World Café" Listening Session on April 25, 2018. Participants defined a healthy community as having these factors:

- Access to healthy food
- Walkable communities, safe streets
- Little or no disease in the population
- Employment
- Health knowledge and awareness
- Mental health awareness
- Safe recreation
- Built/clean environment
- Access to health systems

The GMPHP used the data collected through the CHA to determine the County's top health issues. After obtaining feedback from the membership, the Executive Board identified Mercer County's priority health areas.

Prioritization was based upon capacity, resources, competencies, and needs specific to the population of Mercer County. The selected issues are within GMPHP's purview, competency and resources to impact in a meaningful manner.

The complete CHA, which served as the foundation for developing this CHIP, can be found in its entirety at www.healthymercer.org.

The development of the CHIP began in September 2018, following identification of the County's top priority issues.

PURPOSE

GMPHP's mission is to measurably improve the health of residents of the Greater Mercer County area. The CHIP presents an action-oriented guide for the GMPHP and community partners to work together to implement programs that can positively impact the health of the County and its residents.

Collaborating through GMPHP presents a unique opportunity to amplify the efforts of individual organizations and combines strengths as we purposefully work toward the common goals identified in the CHIP.

PROCESS

In August, the Community Advisory Board met to rank priority areas for action using a voting process that asked members to rank each of the health issues identified in the CHA using various criteria including:

- The number of people impacted
- Risk of morbidity or mortality associated with the problem
- The impact of the problem on vulnerable populations
- Progress could be made in a 3-year period
- Community capability/competency to impact the problem (e.g., availability of assets and resources)

The Board reviewed the results of the prioritization process over two meetings. Root cause analysis was performed for each of the identified priority areas and an analysis was undertaken of evidence-based strategies that would address the priority issues. The root cause analysis exercise and discussion arrived at consensus that the overarching priority was ***to assist Mercer County residents achieve a healthy weight and lifestyle throughout their lives.*** The Board also decided to look at how residents were impacted throughout their lifespan and to focus goals, objectives and strategies on the following life stages:

- Maternal/Child Health
- School-Aged Children
- Adults
- Seniors

Community Advisory Board members were asked to participate in the process of developing the goals, objectives and strategies and in identifying community assets and resources to assist residents achieve a healthy lifestyle throughout their lives. Each of the four groups continued meeting on a regular basis to develop the action plan for each life stage. Each of the action steps has a dedicated organization or individual committed to the strategy and each has a measurable outcome.

The CHIP, included in this document, represents the final outcome of the process. The draft CHIP was shared with the Greater Mercer Public Health Partnership, for review and comment. Feedback from this review is incorporated into the CHIP.

CONSIDERATIONS

The development of the CHIP encompassed multiple components to ensure delivery of a comprehensive improvement plan relevant to the health needs of the community. While this CHIP focuses on Mercer County, the health priorities in this document are reflective of the national and statewide health backdrops. *Healthy People 2020* is the federal government's plan to promote a healthier nation over the decade. For more information on *Healthy People 2020* visit **www.healthypeople.gov**.

Healthy New Jersey 2020 (HNJ2020), the State Health Improvement Plan (SHIP) was the result of a multiyear process to obtain input from a diverse group of stakeholders from throughout the State. The SHIP includes over one hundred health improvement objectives. The HNJ 2020 leading health indicators have been the focus of the state's effort over the last several years. These indicators include:

- Access to health care
- Improve birth outcomes
- Increase childhood vaccination
- Reduce the burden of heart disease and stoke
- Prevent obesity

These leading health indicators are related to the state's overarching goals of:

1. Achieving high quality, longer lives free of preventable disease disability, injury and premature death.
2. Achieving health equity, eliminate disparities and improve health for all people.
3. Creating social and physical environments that promote good health for all.
4. Promoting quality of life, healthy development and healthy behaviors across all life stages.

Similarly, the overarching goal of the 2018 GMPHP Plan "to help Mercer County residents achieve a healthy weight and lifestyle throughout their lives", is viewed as an underlying issue related to each of the state's 4 overarching goals. The importance of maintaining a healthy weight is a significant factor in many preventable diseases and disabilities. Eating a healthy diet and getting regular exercise is important to promote quality of life and healthy development, and are behaviors which are important across all stages of life. Creating environments which promote heathy lifestyles and ensure safe spaces for

physical and social activities is similarly important for maintaining healthy lifestyles. Lastly ensuring all people have access to good nutritional food to maintain appropriate weight helps to reduce many of the health disparities that exist in our communities.

Three of the 6 leading health indicators for New Jersey have met the targets set forth in the SHIP plan these include: birth outcomes, teen obesity and deaths due to heart disease. Access to primary care, childhood immunization and adult obesity targets are yet to be achieved. GMPHP believes that it's overarching goal to help Mercer County residents achieve a healthy weight and lifestyle through their lives is paramount to reducing adult obesity; that access to care must be viewed broadly, and not just with regard to medical care, but also with regard to access to services that promote a healthy lifestyle. Lastly, GMPHP believes that achieving lifestyle changes that promote healthy behaviors translates to a variety of health behaviors including healthy diet, exercise and health behavioral changes that promote early screening, detection and vaccination against diseases.

To identify measures of success at the start, the planning process incorporated the S.M.A.R.T. (Specific Measurable Achievable Relevant and Timely) goal-setting framework. Additionally, the process included a root cause analysis for each health priority. The health priorities and strategies were also compared with the County Health Rankings to help ensure that the actions identified in the CHIP will help to foster the overall mission of the Greater Mercer Public Health Partnership.

To track implementation of the CHIP and ensure progress, members of the Greater Mercer Public Health Partnership identified as community assets and resources within the plan, will report progress to the Coalition on a quarterly basis.

OVERARCHING PRIORITY: To Achieve and Maintain a Healthy Weight and Lifestyle

Overview

Maintaining a healthy weight is important for health. In addition to lowering the risk of heart disease, stroke, diabetes and high blood pressure it can also lower the risk of several different cancers. An individual's weight, waist size and the amount of weight gained since one's mid 20's can have serious health implications. These factors can strongly influence an individual's chances of developing many diseases and conditions including: Cardiovascular disease, heart attack, stroke; Diabetes; Cancer; Arthritis; Gallstones; Asthma; Cataracts; Infertility; Snoring; and Sleep Apnea.

The key to achieving and maintaining a healthy weight isn't about short-term dieting changes. It's about a lifestyle that includes healthy eating, regular physical activity and balancing the number of calories you consume with the number if calories your body uses.

Poor nutrition and a lack of a healthy diet pattern, and regular physical activity, are health behaviors that contribute to obesity. A healthy diet pattern is one that emphasizes eating whole grains, fruits, vegetables, lean protein, low fat and fat-free dairy products, and drinking water.

Assets and Resources

The following organizations and individuals represent the community assets and resources identified within the action plans which follow:

- Children's Futures
- Children Home Society
- Capital Health Medical Center
- Penn Medicine Princeton Health
- Greater Mercer Public Health Partnership members and staff
- Central Jersey Family Health Consortium
- Trenton Free Public Library
- The College of New Jersey
- New Jersey Breast Feeding Consortium
- Homefront
- Mercer County Health Officer Association
- Mercer Council on Alcoholism and Drug Addiction
- Mercer County Superintendents
- Private School Headmasters
- Greater Mercer Transportation Management Association
- Mercer County Health Officers
- Henry J. Austin Health Centers
- Empower
- Princeton Health Department
- Montgomery Health Department
- Health Care Quality Institute
- Robert Wood Johnson University Hospital Hamilton
- St. Francis Medical
- St. Lawrence Rehabilitation Hospital
- Princeton Breast Cancer Resource Center
- Trenton Health Department
- Mercer County Office on Aging
- Mercer Home Health Care
- Meals on Wheels
- Alzheimer's Association
- Rutgers Cooperative Extension Family and Community Health Service
- American Cancer Society
- Jewish Family Children's Services
- NJ SNAP

Greater Mercer Public Health Partnership

Overarching Priority: Assist Mercer County Residents Achieve a Healthy Weight and Lifestyle Throughout Their Lives.

Priority Group I – Maternal and Child Health

GOAL I: REDUCE THE PREVALENCE OF MENTAL HEALTH ISSUES IN PREGNANT AND POST-PARUM WOMEN.

Key CHNA Findings:

- An estimated 10% of women experience depression during pregnancy and 1 in 8-10 experience post-partum depression within the first year after childbirth, miscarriage or still birth.

Objective:

1.1 Reduce the percent of pregnant women who experience depression during pregnancy from 10% to 8%, and the 11% of women who develop post-partum depression to 9%.

	Strategy	Performance Indicator	Responsible Party
1.1a	Support the formation of a mental health clinic coordinated by a social worker certified in clinical psychology.	• Clinic started in July 2018 at Children's Futures – Wednesdays 9-4 pm.	a) June Gray - Children's Futures
1.1b	Inform the CAB community and non-profits about this service by posting information on the GMPHP website and communicating with the CAB.	• # of notices sent out to CAB members and community	b) Carol Nicholas - GMPHP
1.1c	Provide trauma informed counseling to 15 clients monthly at Children's Futures.	• # of clients receiving services	c) June Gray – Children's Futures
1..1d	Provide Trauma Yoga to one woman a week.	• # of clients receiving services	d) June Gray- Children's Futures
1.1e	Create a directory of emergency services for post-partum women and disperse to WIC sites, and Family Success Centers.	• Directory dispensed to sites	e) Heather Foley – Children's Home Society

GOAL II: TO PREVENT & REDUCE UNHEALTHY WEIGHT THROUGH STRATEGIES THAT PROMOTE BREASTFEEDING, ESPECIALLY AMONG THE UNDERSERVED.

Key CHNA Findings:

- NJPRAMS cites any breastfeeding at 8 weeks of age at 50.9% in New Jersey. This is a leading priority in Healthy NJ 2020 Plan (State Health Improvement Plan).
- Studies suggest that employers save an average of $3 for every dollar invested in workplace supports for breastfeeding (Dinour 2017).

Objectives: Federal and State Health Improvement plans are:

2.1 Increase the proportion of infants who are breastfed at 6 months to 60%.
2.2 Increase the proportion of infants who are breastfed at 1 year to 30%.
2.3 Increase the proportion of infants who breastfeed exclusively through 3 months to 45%.
2.4 Increase the proportion of infants who breastfeed exclusively through 6 months to 20%.
2.5 Increase the percentage of municipality administration and planning staff trained on ACA worksite breastfeeding requirements by 2021
2.6 Promote legislated worksite breastfeeding policy to 20 businesses in Mercer County each year.
2.7 Identify and implement evidence-based technology to improve maternal child health, by 2020.

	Strategy	Performance Indicator	Responsible Party
2.1-2.5a	Research all of the support services in Mercer County and have CAB members update their information on the Zipmilk website.	• # of resources added to the website in 2019.	a) Children's Home Society Children's Futures Capital Health Medical Center Princeton Medical Center La Leche League GMPHP CAB members
2.1-2.5b	Develop a plan for distribution of Zipmilk.org website information in Mercer County clinics, physician offices, hospitals, GMPHP and member websites.	• # of outlets promoting the Zipmilk flyers. • Plan developed. • Plan implemented.	b) Maternal/Child Committee Member websites
2.1-2.5c	Identify the baseline rate of exclusive breastfeeding at discharge by June 2019 and again in June 2021, at Princeton Medical Center, and Capital Health Medical Center.	• Baseline identified.	c) Melanie Miller – Capital Health Medical Center Ellen Winkle – Princeton Medical Center
2.1-2.5d	Offer education to provider sites regarding community supports and AAP guidelines by December 2019.	• # of provider sites contacted. • # of provider sites trained. • # of providers watching webinar.	d) Joan O. Martin – Children's Home Society Webinar by CJFHC 2/26/19 "Implicit Bias & Clinical Breastfeeding Care" (Melanie Miller presenting) Recording will also be available to view for CEUs.

	Strategy	Performance Indicator	Responsible Party
2.1-2.5e	Educate new mothers at discharge about their breastfeeding rights. Let them know about accommodations such as the Mamava Pod at the Trenton Free Public Library.	• # of mothers educated offered. • Track the use of the Mamava.	e) Melanie Miller – Capital Health Medical Center Ellen Winkle – Princeton Medical Center Joan O. Martin – Children's Home Society Patricia Hall – Trenton Free Public Library
2.1-2.5f	Develop 3 peer support groups for mothers/partners to support breastfeeding for infants 0-6 months by 2020.	• # of support groups developed.	f) Joan O. Martin - Children's Home Society CJFHC in collaboration with Henry J Austin
2.1-2.5g	Offer provider education on breastfeeding and breastfeeding support services/resources and culturally/linguistically competent tools to prenatal care providers, FQHC, and WIC clinics by 2020.	• # of programs and attendees.	g) Joan O. Martin – Children's Home Society
2.1-2.5h	Offer education to 5-10 preschools and day care centers to educate caregivers about breastfeeding, normal infant stools, and nutritional needs.	• # of attendees and programs.	h) Jessica Libove – Children's Home Society
2.1-2.5i	Identify the differences in breastfeeding by race and ethnicity, by 3/1/19.	• Data, statistics and report.	i) Joan Martin – Children's Home Society Melanie Miller – Capital Health Medical Center Ellen Winkle- Princeton Medical Center
2.1-2.5j	Public health intern will conduct focus groups to uncover attitudes and barriers to breastfeeding among racial/ethnic groups in Mercer County by 12/1/20	• Focus group report.	j) Brenda Seals – TCNJ Joan Martin – Children's Home Society

	Strategy	Performance Indicator	Responsible Party
2.1-2.5k	Use information provided by focus groups to develop culturally and linguistically competent tools to support breastfeeding by 6/1/20.	• Toolkit.	k) Joan O. Martin – Children's Home Society Maternal/Child Committee
2.1-2.5l	Distribute culturally and linguistically appropriate breastfeeding support/education for families at 5 or more sites by 2021.	• # of programs offered.	l) Maternal/Child Committee. Joan O. Martin – Children's Home Society
2.6a	Create a flyer about the Affordable Care Act Lactation Room Availability Mandate Encourage employers to tailor workplace support policies for breastfeeding to fit their company's budget and resources.	• Flyer created by 2020	a) Jessica Libove – New Jersey Breastfeeding Coalition
2.6b	Present flyer and breastfeeding legislation to Princeton Chamber of Commerce meetings, and possibly speak at their meeting.	• Have a table at business meeting to promote flyer.	b) Carol Nicholas – GMPHP Joan O. Martin – Children's Home Society
2.6c	Assist HomeFront management to develop a breastfeeding policy in the shelter and teach policy to staff.	• Policy in place and staff training taking place.	c) Janine Green/Ilsa Lord - HomeFront Jessica Libove Children's Home Society Carol Nicholas – GMPHP
2.6d	Provide flyer and education to all of the Mercer County Municipal Administration and Planning Department Staff about the Affordable Care Act Lactation Room Availability Mandate.	• # of Health Officer presentations to their Administration.	d) Stephanie Carey – Mercer County Health Officer Association
2.7	Review the available apps that could help maternal/child health by improving knowledge, access to care, and early referral to medical assistance, by 2020.	• Report on apps by 2020.	Maternal Child Committee

Overarching Priority: Assist Mercer County Residents Achieve a Healthy Weight and Lifestyle Throughout Their Lives.

Priority Group II – School-Aged Children

GOAL III: TO REDUCE SUBSTANCE ABUSE RISK FACTORS AND INCREASE PROTECTIVE FACTORS IN SCHOOL-AGED CHILDREN.

Key CHNA Findings:

- In 2013, 12.9% of New Jersey teens were current smokers.
- In 2013, 39.3% of New Jersey teens drank alcohol.
- In 2013, 21% report currently using marijuana.
- In 2013, 30.7% of teens were offered, sold or given an illegal drug on school property.

Objective:

3.1 Increase substance abuse and protective factor knowledge in school-aged children by 10% as determined by pre- and post-tests, of evidence-based education programs.

	Strategy	Performance Indicator	Responsible Party
3.1a	Teach the evidence-based program "Protecting Me, Protecting You" program to 250-375 K-5 students.	• # of student participants.	a) Vanessa DeRosa – MCADA
3.1b	Teach the evidence-based Life Skills Training program to 250-375 6th-8th grade students annually that prepares adolescents to say no to drugs, peer pressure, alcohol, and tobacco.	• # of student participants.	b) Amy Argiriou - MCADA
3.1c	Working with the Student Assistance Counselors, form a Youth Tobacco Action Group in 2019.	• # of group meetings.	c) Malissa Arnold - MCADA
3.1d	Educate the parents, staff, and community about the long-term effects of vaping.	• # of events and attendees.	

	Strategy	Performance Indicator	Responsible Party
3.1e	Update the school substance abuse policies in preparation for the upcoming State marijuana laws, and ensure they are educational and less punitive.	• Policy complete.	e) Malissa Arnold - MCADA
3.1f	Organize an "Education Forum" for school administration in 2019.	• # of attendees.	f) Malissa Arnold – MCADA
3.1g	Look at the school substance abuse policies to ensure they are more educational, and less punitive.	• Policy complete.	g) Malissa Arnold - MCADA
3.1h	Meet with superintendents and headmasters to encourage availability of "Screening/Brief Intervention/Referral to Treatment" (SBIRT) programs in schools.	• # of schools offering SBIRT. • # of students utilizing SBIRT. • % SBIRT rate in X amount of school districts.	h) Mercer County School Superintendents Private School Headmasters
3.1i	Local health departments inspect all tobacco establishments for age of sale enforcement annually.	• # of establishments inspected. • # of establishments in compliance.	i) Mercer County Health Officer Assoc. Stephanie Carey

GOAL IV: TO PREVENT AND REDUCE CHILDHOOD OBESITY THROUGH THE PROMOTION OF COMPLETE STREETS AND VISION ZERO INITIATIVES FOCUSED ON SAFE WALKING/BIKING TO SCHOOL.

Key CHNA Findings:

- 14% of New Jersey teens reported being overweight in 2013, and 8.5% were obese.
- In 2013, 11.6% of teens were not physically active for at least 1 hour on at least 1 day a week.

Objective:

4.1 Increase the number of students walking and biking to school in Mercer County by 20%, by 2021.

	Strategy	Performance Indicator	Responsible Party
4.1a	Obtain an inventory of current safety conditions of paths to school by 2020.	• Inventory list.	a) Ian Henderson – GMTMA Jerry Foster
4.1b	Ask county schools to supply a baseline survey of walking and cycling students. Update and tally the number of walkers and cyclists by 2021.	• Lists created.	b) Ian Henderson – GMTMA Jerry Foster
4.1c	Reach out to schools to conduct walkability audits for input into School Travel Plans.	• # of walkability audits completed. • # of School Travel Plans created.	c) Ian Henderson - GMTMA Jerry Foster
4.1d	Reach out to at least 2 schools annually to promote support for the Walking School Bus Program from 2019-2021.	• # of schools approached.	d) Ian Henderson – GMTMA Jerry Foster Cherie Hooks - Isles
4.1e	Participating schools will market Walking School Bus Program via social media and other means from 2019-21.	• # of participating schools. • # of social media posts.	e) Ian Henderson – GMTMA
4.1f	Determine the baseline Walking School Bus Program app used in 2018 and increase the use by 20%, by June 2021.	• # of Walking School Bus app registrations.	f) Ian Henderson -- GMTMA
4.1g	Ask GMPHP to adopt a Safe Routes to School Resolution by 2020.	• Resolution adopted.	g) Ian Henderson – GMTMA Carol Nicholas - GMPHP
4.1h	Reach out to at least 2 school districts per year to adopt Safe Routes to School Resolutions.	• # of school districts that adopted Safe Routes to School Resolutions.	h) Ian Henderson – GMTMA Jerry Foster – GMTMA Cherie Hooks

	Strategy	Performance Indicator	Responsible Party
4.1i	Provide presentations to 5 new schools, churches, and other local organizations regarding the safe routes to school program each year to promote the number of children walking or biking to school.	• # of presentations.	i) Ian Henderson – GMTMA Jerry Foster Cherie Hooks - Isles
4.1j	Recruit at least 1 school per year to participate in the "Kids to Council Empowerment Program", outlining results of their walkability audits to their town council, by 2021.	• # of schools presenting each year.	j) Ian Henderson - GMTMA

GOAL V: IMPROVE SAFETY ON ROADS AND BIKE PATHS TO CREATE RECREATIONAL ALTERNATIVES TO PROMOTE HEALTHY LIFESTYLES FOR CHILDREN.

Key CHNA Findings:

- In 2018, there were 714 auto crashes involving a minor.
- In 2013, 11.6% of teens reported less than 1 hour of physical activity at least 1 day a week.

Objective:

5.1 Reduce roadway fatalities to zero by 2021.

	Strategy	Performance Indicator	Responsible Party
5.1a	Present Vision Zero history and goals to the GMPHP Board meeting in January 2019, and request a Resolution of Support.	• Board meeting adoption of resolution.	a) Cheryl Kastrenakes – GMTMA Carol Nicholas - GMPHP
5.1b	Prepare a template for the Health Officers of every township to present the Vision Zero movement to the town councils.	• # of Health Officers who presented to their councils.	b) Mercer County Health Officers
5.1c	Follow up to at least 2 municipalities per year to request they adopt Vision Zero policies by 2021.	• # of municipalities that adopt policies.	c) Ian Henderson - GMTMA
5.1d	Provide technical assistance to two local organizations seeking grants for making engineering modifications to streets that promote walkability, by 2021.	• # of modifications that improve safe walkability and cycling.	d) Ian Henderson - GMTMA
5.1e	Ask partners to promote walking and cycling via social media outlets, their websites, and hand-outs at outreach events.	• # of events promoted annually.	e) GMTMA GMPHP CAB members

GOAL VI: IMPROVE ACCESS TO CARE OF SCHOOL-AGED CHILDREN.

Key CHNA Findings:

- Children aged 1-5 had mean blood levels of 3.4 ug/dL.
- 50% of respondents earning an income of under $25,000 did not have dental screening.
- 2% of survey respondents reported difficulty finding a dentist.
- 41% of children in Mercer county are eligible for free school lunches.

Objective:

6.1 Reduce mean blood levels in children aged 1 to 5 years from 3.4 ug/dL (Baseline) to 1.5 ug/dL (Target).
6.2 Improve oral hygiene and early referrals to dental care in underserved areas, by 2021.
6.3 Increase availability of wellness clinics in an underserved area, by 2021.

	Strategy	Performance Indicator	Responsible Party
6.1a	Provide "Chip Goes Exploring" curriculum to students in 5 child care centers a year.	• # of students attending program. • # of students who can list 2 preventative actions they can take.	a) Isles – Cherie Hooks
6.1b	Provide a 5-hour Eco-Healthy Child Care ® Train the Trainer (TtT) Curriculum to 5 schools each year, which offers information on 11 core content areas: pesticides, poor air quality, household chemicals, lead, mercury, furniture and carpets, art supplies, plastics, arsenic, radon and recycling. The TtT prepares individuals to become an EHCC resource for their localized communities.	• # of school staff trained each year.	b) Isles – Andre Thomas
6.2a	TCNJ will "train the trainer", 50 student nurses to go into Trenton schools and maternal child settings, to screen for poor oral hygiene. They will teach good hygiene techniques and refer to dental services. They will be certified "Smiles for Life" a National Oral Health Curriculum.	• # students screened.	a) Ellen Rudowsky – TCNJ
6.2b	Create a traveling oral health display for screening events in 2019.	•	

	Strategy	Performance Indicator	Responsible Party
6.3a	Develop a plan to start a school-based health center in Trenton.	• Identify existing models. • Identify potential funders. • Identify best-demonstrated practices. • Plan for the development of a school-based clinic.	e) Empower School Superintendent Henry J. Austin FQHC DOH Trenton Human Services – Shakira Abdul Ali
6.3b	Develop a school-based Health Center by December 31, 2021.	• Opening of a school-based clinic.	

Overarching Priority: Assist Mercer County Residents Achieve a Healthy Weight and Lifestyle Throughout Their Lives.

Priority Group III – Adults

GOAL VII: ADDRESS ADULT MENTAL HEALTH AND SUBSTANCE ABUSE CONCERNS THROUGH PREVENTION, HEALTH PROMOTION AND TREATMENT.

Key CHNA Findings:

- The percent of Mercer County residents reporting 14 days or more where their mental health was not good was 16.9%
- 14.9% of Mercer County residents report depression.
- 5.5% of Mercer County residents report heavy drinking.
- The inpatient substance abuse treatment and Emergency Department use rate increased between 2013-2016.

Objective:

7.1 Increase the proportion of people seeking treatment for mental health and substance abuse by 10%.

	Strategy	Performance Indicator	Responsible Party
7.1a	Train 75 Nurses and 25 Public Health Students in Mental Health First Aid, by December 31, 2019.	• # of students completing MHFA training.	a) The College of New Jersey Dr. Brenda Seals
7.1b	Identify current number of mental health providers who have evening hours and who accept insurances.	• List of mental health providers with evenings hours. • List of mental health providers who accept insurance. • Lists published on GMPHP's website and shared with members.	b) Children's Futures GMPHP – Carol Nicholas
7.1c	Work with providers to encourage them to offer evening hours and accept insurance.	• # of mental health providers with evenings hours. • # of mental health providers who accept insurance.	c) Children's Futures Montgomery Township Health Department

GOAL VIII: PREVENT AND REDUCE OBESITY THROUGH STRATEGIES THAT PROMOTE HEALTH.

Key CHNA Findings:

- Nearly 34% of Mercer County residents report BMI $\geq$ 30.
- Obesity was the top health concern mentioned by community survey respondents.
- The percentage of Mercer County residents reporting no leisure time physical activity increased by nearly 10 percentage points between 2014 and 2016.

Objectives:

8.1 Increase the number of adults who report any leisure time physical activity by 5% from 66.3% to 69.9%, by December 31, 2021.

8.2 Reduce overweight and obesity prevalence by 5% from 33.7% to 32.0%, by December 31, 2011.

	Strategy	Performance Indicator	Responsible Party
8.1	Create a pilot program to encourage exercise "prescriptions" of 25 physician referrals to community exercise opportunities, annually.	• Number of Grand Rounds or Physician Education programs provided on increasing physical activity. • # of referrals to exercise prescriptions issued.	Capital Health Regional Center Dr. Hassan Dr. Choudhary Princeton Health Department Montgomery Health Dept. Carol Nicholas Devangi Patel
8.2a	Organize Trenton Ciclovia with partners for September 21st, 2019.	• Event planned and executed. • # of people participating.	a) Adrian Diogo – HCQI Tri-State Circuit GMTMA Trenton Health Team GMPHP Trenton Free Public Library Isles Trenton Museum
8.2b	Local Health Departments work with Mayors Wellness Campaign to organize a physical activity event in their jurisdiction. E.g. Move Your Way.	• # of events. • # of attendees. • # of social media outreach efforts (e.g., tweets, FB posts).	a) Montgomery Twp. Health Dept. Princeton Health Dept. Mercer County Health Officers Assoc.

GOAL IX: IMPROVE ACCESS & AWARENESS OF HEALTH CARE AND TRANSPORTATION SERVICES FOR THOSE LIVING & WORKING IN MERCER COUNTY INCLUDING UNDERSERVED POPULATIONS.

Key CHNA Findings:

- In 2018, there were 807 car crashes involving adults.
- Among survey respondents, access to transportation services received among the lowest rating for community services. This was particularly true for males, minorities and low income residents.

Objectives:

9.1 Reduce roadway fatalities to zero, by 2021.

	Strategy	Performance Indicator	Responsible Party
9.1a	Educate public and policymakers to demand greater safety on our roads through outreach and marketing by the GMPHP member organizations by December 2020.	Creation of GMPHP media messaging toolkit which will include sample press releases and social media materials.	a) Greater Mercer Transportation Association
9.1b	Adoption of Vision Zero Policy by December 31, 2019	• # of municipalities outreached. • resolutions adopted.	b) Greater Mercer Transportation Association
9.1c	Conduct Walking Audits in 5 Municipalities by 6/30/2020.	• # of walking audits completed.	c) Greater Mercer Transportation Association
9.1d	Present findings to 5 Elected Bodies by 6/30/2020.	• # of safety problems fixed.	d) GMTMA partnering with Local Health/Planning Officials
9.1e	Provide funding to improve at least two of five selected audit locations by December 2021.	• Implemented improvement.	e) Greater Mercer Transportation Association
9.1f	Gather and analyze crash data to report findings to the public on transportation safety issues.	• High incident map w/fatality and severe injury corridors. • Creation of online interactive map for public.	f) Greater Mercer Transportation Association

GOAL X: REDUCE THE IMPACT OF CHRONIC DISEASE THROUGH EDUCATION, PREVENTION AND CASE MANAGEMENT.

Key CHNA Findings:

- 14% of Mercer County survey respondents report chronic disease as their top health concern.

Objectives:

10.1 Implement a health literacy program in zip codes of high chronic disease prevalence in 2019.

10.2 Increase participation in chronic disease prevention and self-management programs, by 2021.

	Strategy	Performance Indicator	Responsible Party
10.1a	Plan and Implement Pilot Health Literacy Program in Community Settings that serve underserved populations by December 31, 2019.	• Grant funding. • # of libraries offering programs. • # of ESL programs. • # of blood pressure screenings.	a) The College of New Jersey Trenton Free Public Library Princeton Breast Resource Center Capital Health Trenton Health Department
10.1b	Create Pilot Health Information Resource Bags for Diabetes, Heart Disease, Stroke, Hypertension, COPD, Mental Health, Breastfeeding, Cancer.	• # of Bags created. • # of Bags checked out.	b) Trenton Free Public Library National Network of Libraries of Medicine GMPHP
10.2a	Train the Capital Health resident physicians to include referrals to evidence-based chronic disease prevention and management programs on their checklist/SOPs by December 2019.	• Training. • # of practices with referral SOP. • # of referrals provided.	a) Capital Health Health Care Quality Strategies
10.2b	Develop a joint marketing plan for all providers of evidence-based chronic disease prevention and management programs in the service area by December 31, 2019.	• Resource list of all agencies hosting programs.	b) GMPHP Health Care Quality Strategies Princeton Health Department

Overarching Priority: Assist Mercer County Residents Achieve a Healthy Weight and Lifestyle Throughout Their Lives.

Priority Group IV – Seniors

GOAL XI: TO IMPROVE ACCESS TO MENTAL HEALTH SERVICES AND REDUCE SUBSTANCE ABUSE AMONG SENIORS.

Key CHNA Findings:

- The percent of Mercer County residents reporting 14 days or more where their mental health was not good was 16.9%
- 14.9% of Mercer County residents report depression.
- 5.5% of Mercer County residents report heavy drinking.
- The inpatient substance abuse treatment and Emergency Department use rate increased between 2013-2016.

Objective:

11.1 Implement the "Building Our Largest Dementia Infrastructure for Alzheimer's" BOLD Act Policy Framework Bill 52076 December 31, 2018.

	Strategy	Performance Indicator	Responsible Party
11.1a	Organize "Alternatives to Pain Medication" talks at the nutrition programs, senior housing, apartment complexes, and assisted living centers.	• # of participants in lectures.	a) Barbara Sprechman – MCADA
11.1b	Advertise medication collection days, the location of the medication collection boxes, and how to obtain a Deterra Bag for the shut-ins.	• # of pounds of medication collected annually. • # of Deterra bags dispensed.	b) Eileen Doremus – Office on Aging Mary Jane Darcy – Mercer Home Health Care Sasa Montano - Meals on Wheels
11.3c	Organize presentations to seniors on dementia/ Alzheimer's Disease, diagnosis, treatment, community support/resources, caregiver support each year.	• # of participants attending lectures.	c) Robyn Kohn – Alzheimer's Assoc.
11.3d	Design and distribute brochures about dementia/Alzheimer's Disease available for shut-ins.	• # of flyers distributed to shut-ins.	d) Robyn Kohn- Alzheimer Assoc. Sasa Montano - Meals on Wheels Mary Jane Darcy – Mercer Home Health Care

	Strategy	Performance Indicator	Responsible Party
11.e	Alzheimer Association will lead an educational lecture for CAB members and health care workers on the implications of the new dementia legislation passed in December 2018.	• # of attendees. • Program lecture delivered.	e) Robyn Kohn – Alzheimer Assoc. Carol Nicholas – GMPHP Karen Buda – Community Well
11.f	Provide a "Resiliency Enhancement" lecture for seniors at a nutrition center in 2019.	• # of attendees to program.	f) Michele Madiou – Mercer County Human Services
11.g	Provide information to the staff of the senior centers and Meals on Wheels staff, to help them recognize signs and symptoms of stress, and recognize when seniors are in need of support, and how to refer for services.	• # of attendees to the program.	g) Michele Madiou – Mercer County Human Services.

GOAL XII: TO PREVENT AND REDUCE CHRONIC DISEASE THROUGH NUTRITION AND HEALTHY LIFESTYLE EDUCATION.

Key CHNA Findings:

- 14% of Mercer County residents report chronic disease as their top health concern.
- 21% of survey respondents indicated they worry about whether their food would last before they got money to buy more; and 13% rely on community supper or food pantry or meal assistance programs.

Objectives:

12.1 Increase the nutrition education and health screenings at nutrition centers, by 10%, by 2021.

12.2 Increase nutrition education and access to screenings by 10% annually, for Meals on Wheels recipients.

	Strategy	Performance Indicator	Responsible Party
12.1a	Distribute 1,200 educational placemats that were developed at the GMPHP to the nutrition centers once a month. The themes include stroke prevention, fall prevention, healthy eating, tips to remember medication, flu, energy in/energy out, emergency preparedness, senior depression, senior hydration, signs of Alzheimer's, tobacco cessation, hearing.	• # of placemats dispensed each month.	a) GMPHP Board will share photocopying responsibilities
12.1b	Provide 1 nutrition education and healthy lifestyle presentation once a month at senior nutrition sites each year.	• # of programs offered. • # of attendees.	b) Michelle Brill – Rutgers Cooperative Extension – Family and Community Health Science
12.1c	Provide a pain medication alternatives education program to 300 seniors, and information about pill bottles with a timer on the cap, and other tips for remembering to take medication by December 31, 2019.	• # of pill bottles distributed.	c) Barbara Sprechman - MCADA
12.2a	In Q2, work with the Cancer Society, the public health nurses, and non-profits to develop a program on interventions, screening and prevention.	• # of programs and attendees. • Operational Plan for Screening Program.	a) Maureen Kuhn Mary Rosner Lauren Stabinsky Mary Jo Abbondanza
12.2b	Based on the results of the committee work, programs and materials will be presented in the Q3 and Q4.	• # of materials distributed	b) Maureen Kuhn – Cancer Society
12.2c	Provide a diabetes self-management program at a senior center in 2019.	• # of participants. • Pre- and post-test.	c) Marie Ruina-Courel – Healthcare Quality Strategies Inc.

GOAL XIII: TO SUPPORT AND ENHANCE THE NUTRITIONAL HEALTH OF SENIORS.

Key CHNA Findings:

- 21% of survey respondents indicated worry about whether their food would last before they got money to buy more; and 13% rely on community supper or food pantry or meal assistance programs.

Objective:

13.1 Advocate to support the Food Desert Elimination Act A4700 in 2018.
13.2 Improve the quality of food donations to the local food pantries.
13.1 Increase access to high quality fresh food in pounds, to seniors experiencing food insecurity.

	Strategy	Performance Indicator	Responsible Party
13.1a	GMPHP sent a letter of support to NJ legislature for the Food Dessert Bill.	• Letter sent December 2018.	a) Jeremye Cohen – GMPHP
13.1b	Follow-up with work group to implement actions determined by the Legislature, in 2019.		
13.2a	Develop a culturally, linguistically appropriate flyer promoting healthy foods to donate to a food pantry.	• Flyer formed and promoted.	a) Beth Englezos – Jewish Family Children Services
13.2b	Research the availability of the RWJ Food Van to do an event in an underserved area in 2019.	• Event booked in 2019.	b) Diane Grillo - GMPHP
13.3a	Provide and post information at Senior Centers and Senior Housing about the location of farmers markets in Mercer County.	• # of postings at Senior Centers.	a) Eileen Doremus- Office on Aging
13.3b	Distribute the Mercer Street Friends list of food pantries to CAB members, stakeholders, community centers, town websites, churches, by promoting http://mercerstreetfriends.org/food-bank/where-to-find-help/	• # of CAB members.	b) Carol Nicholas - GMPHP
13.3c	Deliver between 2 and 4 nutrition education lessons or series at senior housing sites that receive the Commodity Supplemental Food Program through Mercer Street Friends in 2019.*	• # of participants in program and number of programs.	c) Joan Healy - NJ SNAP-ED

*On-going programming subject to grant funding in Yrs. 2 & 3.

GOAL XIV: IMPROVE ACCESS & AWARENESS OF TRANSPORTATION SERVICES TO HEALTH CARE IN MERCER COUNTY.

Key CHNA Findings:

- Among survey respondents, access to transportation services received among the lowest rating for community services. This was particularly true for males, minorities and low income residents.

Objectives:

14.1 Increase the use of public transportation and Ride Provide among seniors, by 10%.

	Strategy	Performance Indicator	Responsible Party
14.1a	Update Mobility guide.	• Guide updated and available on GMTMA and GMPHP website.	a) Cheryl Kastrenakes - GMTMA
14.1b	Launch new guide via email distribution to all members of the GMPHP.		b) Carol Nicholas – GMPHP
14.1c	Advocate for specific transportation service.	• Advocacy Campaign initiated.	c) Cheryl Kastrenakes -- GMTMA
14.1d	Conduct travel instruction for seniors, people with disabilities and low-income individuals.	• # of sessions.	d) Cheryl Kastrenakes - GMTMA
14.1e	Hold travel instruction, Connect to Transit seminars for case managers, health care providers and others working with the targeted populations.	• # of participants.	e) Cheryl Kastrenakes - GMTMA