

Community Health Needs Assessment 2018-2020



Northeastern Arizona Innovative Workforce Solutions
is now...



Profile of Navajo County

Navajo County is located in northeastern Arizona. The area of the county is 9,960 square miles. About two-thirds of the area (6,633 square miles) is federally designated tribal land, including the Navajo Nation, Hopi, and White Mountain Apache Indian Reservation. The Navajo Nation and Hopi tribal land make up the northern half of the county and the White Mountain Apache Indian Reservation covers a strip at the south end of the county, as shown on the map to the right.⁵

In 2017, the county had 108,956 residents according to the U.S. Census. The population has remained relatively stable over the past six years with only three percent growth since 2012.⁶ The county is mostly rural with only three communities large enough to qualify as cities: Holbrook (the county seat), Show Low, and Winslow. Holbrook has a population near 5,000 and the other two cities have about 10,000 residents each. Holbrook and Winslow are situated on the heavily trafficked U.S. Interstate 40. Snowflake, Taylor and Pinetop-Lakeside are the only towns in the county, each with 4,000 to 5,000 residents. There are additional small communities in the county, such as Kykotsmovi Village in Hopi, Kayenta and Indian Wells in the Navajo Nation, and Fort Apache in the White Mountain Apache Indian Reservation. The county has 11 school districts, eight airports, 14 public libraries, and a Northland Pioneer College, which has campuses in Snowflake, Show Low, Holbrook and Winslow.

The climate is pleasant and conducive to numerous opportunities for outdoor activities, including hiking, biking, golfing skiing, hunting and more.

Overview

In January 2018, a group of organizations in Navajo County partnered together to conduct community health planning for Navajo County. Led by staff from the Navajo County Public Health Services District (NCPHSD), these agencies began the Mobilizing Action through Planning and Partnerships (MAPP) process, a “community-driven strategic planning process for improving community health.” The process includes multiple phases including organizing the group, creating a vision, assessing the community’s health, identifying issues, developing goals and strategies, and putting those strategies into action. The end goal is to create a public health system in which all organizations are coordinated and communicating with each other to make the system as efficient and effective as possible. (Participating individuals and agencies are included on the next page).

One part of the MAPP community health planning process is to conduct a community health assessment (CHA). The CHA examines health and healthcare, including residents’ and leaders’ views of the current state of health in the community as well as epidemiological data on health issues, births, deaths, and other related topics. The Navajo County CHA consisted of six separate research projects, each of which is described below. The results from these studies

are summarized in this report and the complete, detailed results are in the appendices, including detailed data tables covering much of the epidemiological data are presented in the full CHA report.

Community Health Assessment Organizational Partners

Summit Healthcare, North Country Healthcare (North Country), ChangePoint Integrated Health, Northland Pioneer College (NPC), Northeast Arizona Workforce Solutions (NAIWS), Navajo County Public Health Services District (NCPHSD)

Community Health Assessment Advisory Board/Stakeholders

Debra McGinty (NPC), Ron McArthur (Summit Healthcare CEO), Angie Fabian (Summit Healthcare Chief Marketing/Development Officer), Amanda Guay (North Country), Simonthal Francisco (Navajo Nation Epidemiology Center), Jeff Lee (NCPHSD Director), Jeff Oakes (ChangePoint), Bryan Layton (Navajo County), Nate Lemmon (Indian Health Services White Mountain Apache Tribe), Ava Linn (NCPHSD Nursing Services), Darcey McKee (NCPHSD Chronic Disease Self-Management & Tobacco), Stephanie Ray (NAIWS), Allison Hephner (NCPHSD) Nate Updike (ChangePoint), Paul Watson (NAIWS), Alan DeWitt, MD (Summit Healthcare, CMO), Ken Allen (Summit Healthcare, CPO)

Mobilizing Action Through Partnership and Planning (MAPP) Members

Tom Barela, Brandon Baxter (Northern Arizona Council of Governments), Jessica Beach (First Things First), Jimmy Bevell (Blue Vase Recovery Center), Debra Brackey (Hospice Compasses), Allison Brandon (North Country), Ralph Engler (NAMI), Isaac Garcia (North Country), Daniel Grant Brewer, D.O. (Summit Healthcare), Bob Hall (Winslow Chamber of Commerce), Jessica Hazen (NCPHSD), Robbie Koerperia (Holbrook Schools), Robert Hephner (Birdman Media), Greg Hackler (Hackler Chiropractic Center), Elizabeth Holler (Community Social Worker), Kendra Hook (NCPHSD), Jerry Howell (Business Owner), Deborah Huish (Child Consultation Health Consultant), Cynthia Husk (Vocational Rehabilitation), Jason Kelly (Northern Arizona Council On Aging), Fredda Kermes (Summit Healthcare), Janelle Linn (NCPHSD), Lynn Krigbaum (TRACKS), Deborah Lewis (Navajo County), Ivy Loney (Summit Healthcare), Don McMasters (Autism Foundation), Stephanie McQuillan (City of Show Low), Kim O'Farrell (NCPHSD), Stephanie Ray (NAIWS), Ashley Ryan (City of Show Low), Robert Schlesinger (NCPHSD), Michele Sgambelluri (NCPHSD Opioid Drug Project Program), Kay Shores (Blue Ridge High School), Vicky Solomon (Nexus Coalition for Drug Prevention), Dawn Stokes (North Country), Amy Stradling (NCPHSD Injury Prevention/Teen Health), Sunshine Tippets (Solterra Senior Living Center), Theresa Warren (Alice's Place), Adam Wolfe (NCPHSD), Kelly Wood (Pinetop Fire Marshal), Kathleen Wynn (NPC), Rosalva Zimmerman (Arizona Department of Economic Security)

CHA Survey Among Residents (CHA Community Survey)

A large scale (quantitative) survey of Navajo County residents was fielded in April and May 2018. The survey promoted through email lists, flyers, word-of-mouth, a promotional video, and radio advertisements. The survey was electronic with capacity for multiple respondents at a single computer for use at library, senior living, or other group settings. Paper versions were also available. The NCPHSD contacted representatives from all three of the largest tribal communities and asked them to forward the survey link further.

Over 1,100 individuals completed the survey, answering a variety of questions related to:

- The health status of the community
- Top community health concerns
- Importance of/need for various services
- Availability of services
- Current health insurance and healthcare status
- Demographics such as age, gender, etc.

Results from the survey will give the planning group direction on the community's strengths when it comes to health, where the needs are, and what barriers are keeping residents from optimal disease prevention practices (such as diet, exercise, vaccination, etc.) and healthcare.

Epidemiological Data

What is epidemiological data and why is it important to include in a health assessment?

Technically speaking, epidemiology is “the study of the distribution and determinants of health-related states or events (including disease), and the application of this study to the control of diseases and other health problems.”² For purposes of this report, epidemiological data is information about disease, health behaviors, and other health-related factors from a number of reliable sources. Examples of epidemiological data are leading causes of death, number of births, the number of residents diagnosed with diabetes in a given year, the number of residents with mental health issues, and more. The reason why it is important to consider these data when planning for public health is that these quantitative (largescale and numerically based) data provide a representative portrait of county health characteristics. They provide the answers to the questions: “How big is this issue?” or “How many residents are affected?”

Focus Groups among Residents (CHA Focus Groups)

While the survey and the epidemiological data provide the counts and percentages of health conditions among residents and groups of residents, discussions with residents provide the answers to the questions: “Why do we see these health and disease patterns?” “How does this happen?” and “How do you feel about it?” Group discussions allow participants to tell their stories about health and disease and these stories help explain why and how health conditions (healthy and unhealthy) occur. These are qualitative studies – they are on a much smaller scale than the survey or epidemiological data, but more in-depth.

There were two focus groups held among residents. The first discussion was held on March 27, 2018 at the Winslow Visitor Center (Chamber of Commerce) in Winslow, Arizona. Nine participants attended the discussion group. The second discussion was held on March 28, 2018 in Lakeside (near Show Low) at Solterra Senior Center. Ten participants attended the session in Lakeside. There was a professional facilitator and two NCPHSD staff serving as note-takers at each group and sessions were recorded so that verbatim (and anonymous) quotes could be taken from the recordings. The detailed results of the focus groups and the discussion guide used by the facilitator can be found in the appendices. Respondents were not given a monetary incentive but did receive a meal during the sessions and a blood pressure monitor as a gift after the close of the sessions.

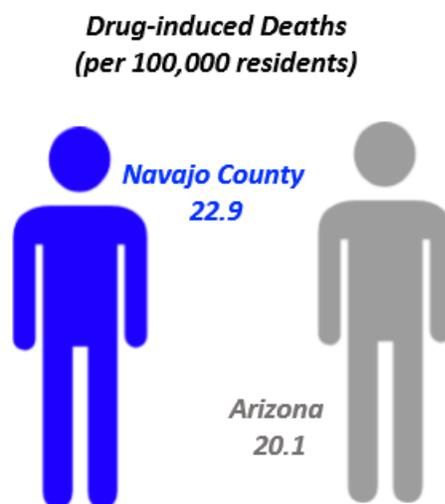
The participants represented a range of gender, age, race/ethnicity, marital status, parental status (those with and without children), working status (retired, working full-time, working part-time) and geography (residents of White River Apache Reservation, Heber/Overgaard, Show Low, Winslow, Taylor, and Lakeside). All participants signed consent forms agreeing to participate in the research voluntarily and to be audio taped. All text appearing in quotes in this report were taken verbatim from participants' comments and will be labeled "CHA Focus Groups."

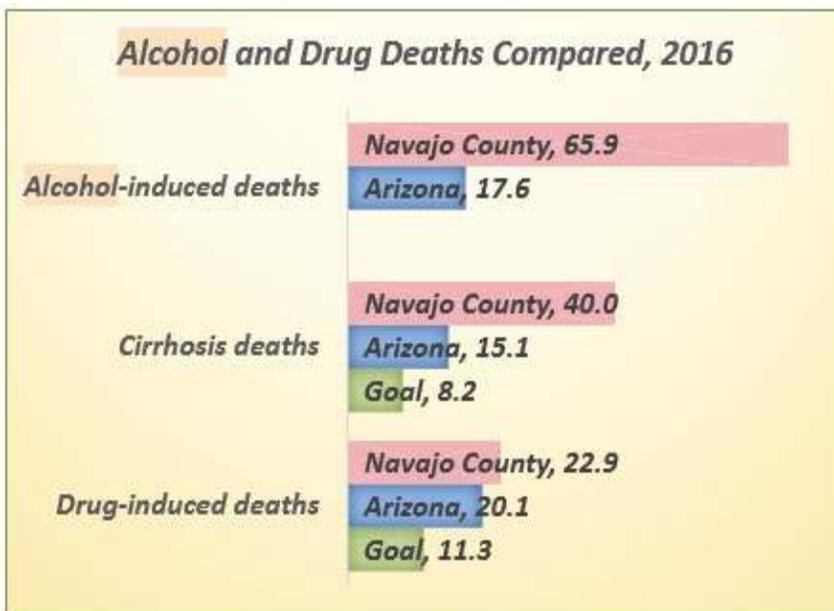
1. SUBSTANCE ABUSE

NEED: Address prevention and treatment resources available for substance abuse (alcohol, legal drugs, illegal drugs).

GOAL:

1. Reduce substance use among youth.
2. Create a sustainable, multi-agency consortium that will identify all resources and services for addressing prevention and treatment of substance abuse disorder and opioid use disorder, culminating with the pilot of Safe Stations at 100% of the 5 Timber Mesa fire stations in the project service area: Lakeside, Show Low (2), Linden and White Mountain Lake, by June 30, 2020, providing those affected by substance abuse disorder with a safe environment where they can access resources and services for treatment and recovery in a One-Stop setting.
3. Create a collaborative care model involving local and statewide health care agencies that care for substance abuse patients.





“Substance abuse including alcohol, opioids, illegal and prescription drugs” was the most frequently chosen issue as a top health priority and goal for Navajo County. Sixty-two percent of respondents chose this issue, more than 25 percentage points higher than any other issue. In addition, reducing substance abuse was the #1 or #2 ranked goal by males, females, whites, American Indians, Hispanics, and each of the age groups from 18 to 70 and older. Clearly, it is seen as a high priority by many in the community.

Navajo County is higher than Arizona when it comes to alcohol-related deaths and similar when it comes to drug-induced deaths, but the alcohol deaths are considerably higher than the drug deaths. Stated in terms of individual lives, there were 71 lives lost due to alcohol and 25 deaths due to drugs in Navajo County in 2016.

Committee Members

Name	Organization
Vicky Solomon (Chair)	Nexus Coalition for Drug Prevention
Allison Hephner	Community Project Management Services AZ
Amy Stradling	NCPHSD
Debra Robertson	Nexus Coalition for Drug Prevention
Brenda Willis	Nexus Coalition for Drug Prevention
Dan Roper	Veterans Administration Clinic
Tammy Moore	Lawyers Title/Realtors
Ivy Loney	Summit Healthcare
Jamie Amos	Summit Healthcare Pain Clinic
Angie Fabian	Summit Healthcare
Codie Sanders	NCPHSD Office of the Medical Examiner
Barry Agan	Whiteriver HIS
Mary Ann Antonini	Summit Healthcare Emergency Room
Kevin Lowry	Summit Healthcare Case Management
Jamie Amos, Office Manager for Dax Trujillo, MD	Summit Healthcare Pain Clinic
Avis Davis	Summit Healthcare Pharmacy

1st Quarter 2019 Update

- Completed a contact list for relevant individuals and organizations.
- Held 10 committee meetings from September 2018 - March 2019.
- Navajo County Public Health and Nexus Coalition held 165 prevention education.

- Placed over 214 media placements (radio, social media, video and print) with an estimated audience reach of 429,799. (media placed with Birdman, Facebook, YouTube, Audio Podcast, WMI.)

2nd Quarter 2019 Update

- Summit Healthcare received an Opioid Grant from HRSA for planning at a budget of \$200k. Summit Partnered with Navajo County Public Health, Nexus Coalition for Drug Prevention, Summit Healthcare Medical Associates (Integrated Behavioral Health and Pain Clinic), ChangePoint Integrated Health, Community Medical Services, Timber Mesa Fire and Medical District, Northeast AZ Police Association and Northeast AZ Fire Chief's Association to apply for Safe Stations - One Stop (SSOS) Grant. Our goal is to create a sustainable, multi-agency consortium that will identify all resources and services for addressing prevention and treatment of substance abuse disorder and opioid use disorder, culminating with the pilot of Safe Stations at 100% of the 5 Timber Mesa fires stations in the project service area: Lakeside, Show Low (2), Linden and White Mountain Lake, by June 30, 2020, providing those affected with substance abuse disorder with a safe environment where they can access resources and services for treatment and recovery on a One Stop setting.

3rd Quarter 2019 Update

- Opioid Planning Grant from HRSA for Safe Stations - One Stop: (Leading agency Summit Healthcare) partnering agency include: Summit Health Care Associates, Timber Mesa Fire & Medical, Show Low Police Department, Community Medical Services, ChangePoint Integrated Behavioral Health, Navajo County Attorney's Office, Navajo County Public Health Services District, Summit Health Care Pain Clinic, Community Project Management Services.
 - 6-24-2019: Inaugural Opioid Grant Planning Meeting - Safe Stations Consortium attending agencies included:
 - MOU between agencies was approved by Consortium and HRSA, signed and uploaded to HRSA
 - Consortium members identified representative from their agencies to serve on the SSOS Taskforce to meet the deliverables of the planning Grant
 - PSA of SSOS Goal and partnering agencies went out to media
 - 7-30-2019 First SSOS Taskforce Meeting
 - 8-27-2019 Second SSOS Taskforce Meeting
- Implementation of Whiteriver Reservation Training. Sonora Prevention/ Juliana, White Mt Housing Mike Lupe & Nexus partnered to provide a Whiteriver Naloxone/Fentanyl training for up to 100 persons Aug 14 & 15th. Location: WMAT Behavioral Health Services. Who will attend? August 14, 2019: 5 Bashas Security, 6 Game Rangers, 9

Housing Security, 9 DOC, 1 Jerry Kessay from Kerry Environmental Services, Mike Lupe, Juliana Willars Sonoran Prevention Works, Vicky Solomon/Brenda Willis Nexus, Randy Moffat NC Sheriff, 7 HOC Staff, 8 SanCarlos Housing, 1 Nurse SanCarlos. 15th: 8 Housing Security, 1 Game Rangers, 9 DOC, 6 San Carlos Nurse, Dominique & Mike Lupe WMHA, Juliana Willars Sonoran Prevention Works, Vicky Solomon/ Brenda Willis Nexus, Randy Moffat NC Sheriff, Kerry's Environmental Services George, 8 HOC Staff, 3 Maintenance Staff, 3 Rainbow Treatment Security, 8 San Carlos Housing

- ACE's Training in Flagstaff. ACE's Connection received a grant from Governors, Youth, Faith & Family (GOYFF) office to provide ACE's trainings and coach. Navajo County Nexus Coalition will be receiving an ACE's Training Coach for our communities.

4th Quarter 2019 Update

SSOS Consortium

- Total of 5 Consortium meetings
 - Bi Annual Consortium Strategic Planning Conference
- Developed SUD Resource Guide and Brochure
- Developed SUD Assessment of Target Areas including
 - Workforce Analysis
 - SWOT Analysis
 - Strategic Plan
- Increased Consortium Partners to include
 - ReCenter
 - Community Bridges Inc
 - Recovery Works
 - Care 1st
 - Steward Health

Nexus Coalition for Drug Prevention SUD prevention efforts

- We continue to collaborate with community stakeholders related to implementing the Community Health Implementation Plan. Focus continues be on the negative consequences of substance use, chronic disease, behavioral health, STDs, and Adverse Childhood Experiences.
- There was a community meeting with community leaders. As a result, a plan was established to develop a stress management workshop that creates peer support for individuals with mental health issues and help teachers focus on mental health awareness in the schools.
- We held meetings throughout the community to promotes activities including Love & Logic and Parent Teen University.
- Our Coalition continued to meet monthly. Information was presented by the Navajo

County Medical Investigator. She provided information about mortality rates and causes. NC provided an update on Safety Town. Staff from the MAT program updated the coalition about their activities.

- We are collaborating with KDH Research as they develop an evidenced-based youth vaping prevention program.
- We continue to plan for ACES training in Navajo County.
- SADD members from Blue Ridge High School agreed to volunteer and they helped with the Safety Village events.
- We partnered with Show Low, Blue Ridge and Snowflake High School Teens and will provide Over the County Safety Program that has a peer to peer education with the 5th grade classes of each area
- Show Low High School Student Council provided volunteers for Safety Village.
- We have started targeted outreach in the Snowflake/Taylor community.
- We are working with staff from the Fort Defiance Hospital (Navajo Nation). Mrs. Solomon will be providing TA related to a targeted response to the Opioid epidemic.
- We conducted a town hall with the topic of Strong Families, Thriving Children.

Multi Session Program Activities

- Seven sessions of Freshman University took place at Blue Ridge High School. Topics included recovery, mental health, and positive messaging.
- Nine sessions of Mpowrd took place at Blue Ridge Junior High. Topics included addictive behavior, making good decisions, 12 steps for healing, empowerment, leadership and prevention.
- A total of eighteen diversion sessions took place at Show Low High School, Snowflake High School, and Blue Ridge Junior High. Topics included underage drinking, cigarettes/vaping, and the harms of marijuana use.

Other Activities

- An assembly took place at Sequoia Charter school. It was focused on current drug trends related to marijuana, alcohol, and other drugs.
- Five community education sessions took place at Snowflake High School, George Washington Academy, ReCenter(Church), and Blue Ridge Junior High.
- Seven community events (including health fairs) took place in Show Low, Pinetop/Lakeside, and Snowflake/Taylor. Information about youth substance use prevention, how parents can talk to youth, and our services were distributed.
- We visited Navajo County medical offices and dropped off 200 packets of materials. The information provided medical providers strategies to talk with patients about substance use prevention.

- Rx Takeback events occurred at Summit Healthcare Hospital, Taylor Wal Mart, Holbrook Safeway, and Show Low, Snowflake & Pinetop Police Department. The Sheriff’s Office, Summit Healthcare and Young Marines supported these efforts.
- Two Safety Town and four Safety Village events took place at Sequoia School, George Washington Academy, Snowflake High School, Show Low High School, Blue Ridge High School, and Vernon Elementary. Media · 671 media activities took place during the quarter with a reach of 99,115,075 (NC Population is about 100,000 = 991 times per person for media within the county)

2. MENTAL HEALTH/EMOTIONAL HEALTH

NEED: To provide a comprehensive, accessible mental/emotional health care system for our communities. Lack of mental health resources in the communities.

GOAL: Lower suicide rates by 5% points in next 3-5 years.

1. Increase access to all programs and resources to all Navajo County residents
2. Create a collaborative care model involving local and statewide health care agencies that care for mental health patients.

Navajo County has a shortage of behavioral health providers to offer to the communities. Lack of resources for getting counseling and assistance with mental health issues. There is a connection between substance abuse and mental health. According to the National Institute on Drug Abuse, “Multiple national population surveys have found that about half of those who experience mental illness during their lives will also experience a substance use disorder and vice versa.”

Summertime Sadness

“I tried to make an appointment too and there were several times they tried to reschedule me. And, you know, I’m like, hypothetically, what if I’m, I’m suicidal! You know -- hello?”

“There’s a couple of counseling centers here, but, I tried to go once, and I made too much money. And I just threw a tantrum in the office! I really did, ‘cause didn’t have enough money to go hire a counselor in Flagstaff and I thought, ‘Well I’ll just go here.’ But I couldn’t.”

“We need more mental health, substance abuse education, assistance, providers and facilities to accommodate our needs to end the cycle and create independence and self-sufficiency.”

-- CHA Focus Groups

Committee Members

Name	Organization
Ralph Engler	National Alliance on Mental Illness (NAMI), White Mountains
Becky Montoya	Blue Ridge School District LPC, M.Ed., NCC
Allison Hephner	Navajo County Public Health Services District
Ivy Loney	Summit Health Care
Nathan Updike	WellCare

Rhonda Krouse	Snowflake Fire District
Dr. Mike Wright	Blue Ridge School District Superintendent
Kimberly O'Farrell	Navajo County Emergency Management
Angie Fabian	Summit Health Care
Shelly Ehmman (Chair)	ChangePoint Integrated Health
Brandon, Martineau	Heber Parent and Community Member

1st Quarter 2019 Update

- Team developed a coping skills presentation for parents and student that will be delivered separately to the parents at an evening event, students will receive at an assembly. To be completed Heber at Mogollon School District in April 2019.

2nd Quarter 2019 Update

- Heber Schools Stress Management Parent and Student Workshop
 - COMPLETE: 4/15/2019 24 Parents Attended
 - COMPLETE: 4/16/2019 173 Students
 - Both presentations were well received so much so that the Community Counsel on Mental Health next objective is to create peer support for mental health and provide tools for teacher to foster a culture of mental health awareness and support in all schools. This is meant to be a follow up to the Stress Management Parent and Student Workshops
- Schedule quarterly trainings with schools, faith organizations, employers, Safetalk, MHFA, CIT training, Parent & Youth Stress Management Training.
 - COMPLETE: CIT BeSafe/Randy Russel Training educating police and youth and adults with Developmental Disabilities how to interact safely.
 - IN PROCESS: School plans to be completed by 6/25/2019
 - IN PROCESS: Mental Health First Aid 6/30/2019

3rd Quarter 2019 Update

- ChangePoint presented Mental Health First Aid August 2nd to Sequoia and George Washington Academy schools administration and teachers
- Summit presented The Whole Brain Child to Sequoia and George Washington Academy school administration and teachers
- Community Council on Mental Health added Dr. Wright (Blue Ridge School Superintendent and Becky Montoya (Blue Ridge Councilor and certified youth presenter for Mental Health First AID)
- Community Council on Mental Health chair changed to Shelly Ehmman the COO of ChangePoint Integrated Health

4th Quarter 2019 Report

- Met each month to review processes and reviewing goals
- Reviewed the resilience training and progress in the schools
- Discussion regarding having a program for resilience training to refer to so that the schools are self-sustaining in this effort.
- Reviewed the Sanford Harmony. Will research how to support a TOT for the schools.
- Discussion of how to obtain outcomes and be able to share the information to obtain grants and funding for services.
- The above would assist group in promoting these services to the schools within the county.
- Developed a living calendar of goals.

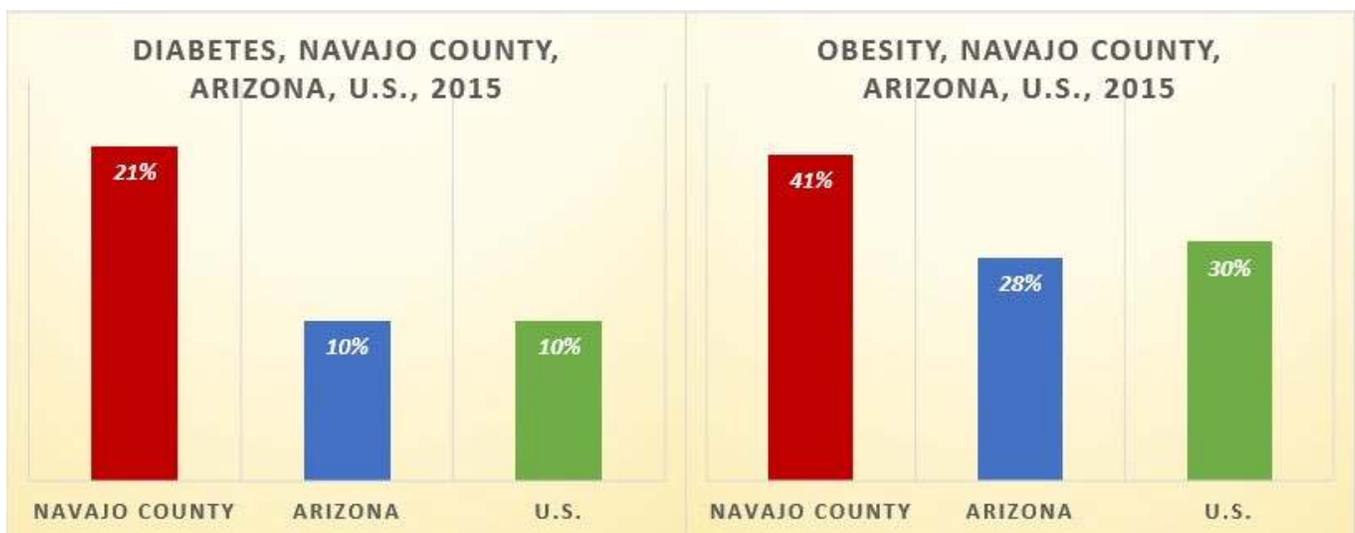
3. CHRONIC DISEASE MANAGEMENT

NEED: To educate the communities on healthy behaviors that prevent chronic diseases such as diabetes, heart disease, cancer and other chronic conditions.

GOAL: Increase number of community members actively engaged in health behaviors that prevent and/or manage chronic diseases

More than half of county households there is a person with a chronic health condition.

Leading types of cancer in Navajo County match the leading types in the state, but at lower rates. Breast, lung, prostate and colorectal cancer are the top four cancer diagnoses for Arizona and Navajo County. (Charts below represent Navajo County community members)



Committee Members

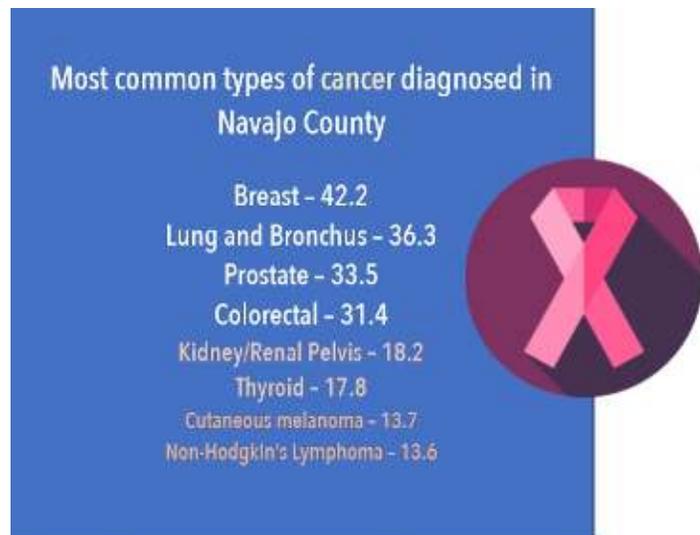
Name	Organization
Ken Allen (Chair)	Summit Healthcare
Dr. Travis Austin	Summit Healthcare Palliative Care
Kristi Iannucci	Summit Healthcare Para-telemed
Allison Hephner (Vice-Chair)	Community Project Management Services
Lynn Krigbaum	TRACKS
Briony Buchholz	Navajo County Public Health Nutrition
Jack Williams	Whiteriver Indian Health Services
Darcey McKee	NCPHSD Chronic Disease Self-Management
Ken Allen (Chair)	Summit Healthcare
Dr. Travis Austin	Summit Healthcare Palliative Care

1st Quarter 2019 Update

- Subcommittee did not meet in the first quarter due to a change in committee leadership. New leadership was identified, and first meeting was scheduled for 4/5/2019.

2nd Quarter 2019 Update

- 4/5/2019 Chronic Disease Action Plan was reviewed, and it was decided by the group to focus first on identifying the players, the services and the data. Once this information is obtained the action plan will be revised and implemented with goals that can be continuously evaluated and measured moving forward. Summit standardized formalized care pathways and stop light education on the major chronic illnesses. These are being worked on for distribution. After discharge patient is called to ensure care coordination. For the Summit Clinics and Dr. Thomson patients who are high risk and rising risk are care managed. Patients with two or more chronic illnesses have been reached out to proactively by the RN Care Coordinators and/or the behavioral health consultants and introduction is made to support any gaps in care.
- Summit is supporting more coordinated skilled nursing discharges working more closely with the Havens. A reduction in readmissions from 5.9% to 5.3% this past quarter was achieved. Summit was also the number one hospital in the state for lowest congestive heart failure readmissions. Super exciting as Mayo has asked us to come present to their congestive heart failure collaborative in May.
- Summit submitted a grant for more chronic care RN Care Coordinators.



- Working on a chronic care menu of services interventions to increase access to chronic disease support

3rd Quarter 2019 Update

- Additions to leadership included adding two more co-chairs to the subcommittee
- Developed a North County Chronic Disease Partnership with NCPHSD to help with outreach to be more inclusive of north county
- Assessed partnering agencies for chronic disease classes and employee wellness

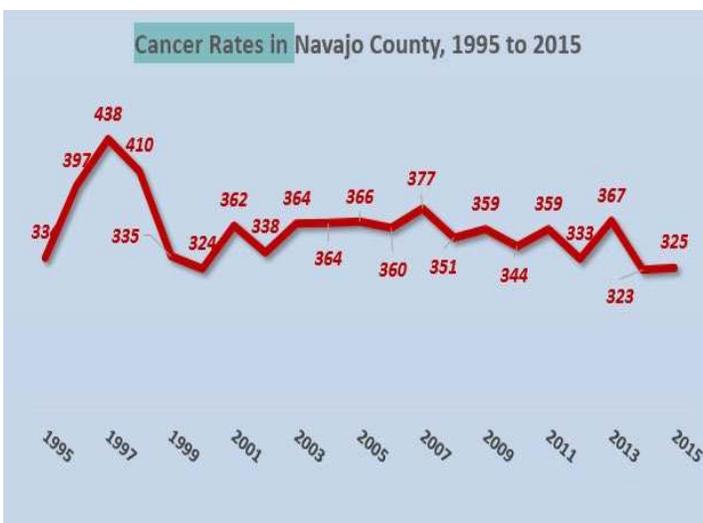
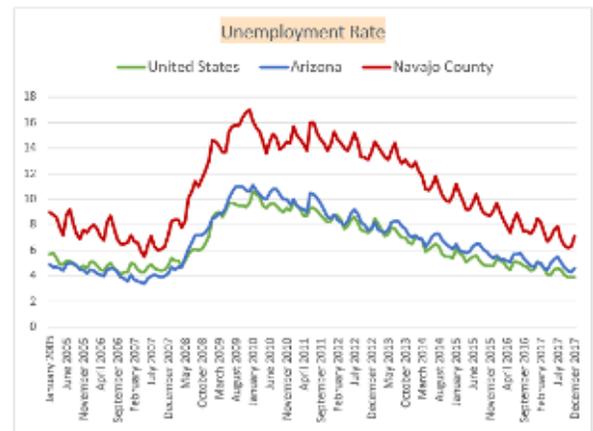
4th Quarter 2019 Update

- A new Chair and Co-Chair was identified to lead the committee
- Data was reviewed by the committee in October and it was decided to develop a new strategic plan for addressing chronic disease in Navajo County
- Strategic Plan was completed and committee is now working on the Action Plan for year 2020.
- Had three committee meetings in Quarter 4

4. POVERTY

NEED: 1 in 3 Navajo County residents’ lives in poverty. The unemployment rate is higher, and the median income is lower than they are for Arizona.

GOAL: Create a coordinated system for support for vulnerable populations (both virtual system and brick-and-mortar facilities).



Economic conditions are such that many Navajo County residents are living at or near poverty and others are working hard to make ends meet. The median income for a Navajo County resident is \$36,900 which is far less than the median income in Arizona (\$51,300) and the U.S. median income of \$55,300.

Committee Members

NAME	ORGANIZATION
Applegate, Jimmie	Show Low Chamber of Commerce/NACRN
Copeland, Lee and Kathy	White Mountain Coalition Against Homelessness
De La O, Veronica	Wellcare
Dobler, Kate (Vice Chair)	First Things First
Everingham, Ron	The Re:Center at the Church
Fabian, Angie	Summit Healthcare
Flake, Jennifer	Navajo County Public Health Services District
Gaffney, Michael	AZPBS
Harris, Justin	WellCare
Hephner, Allison	Community Project Management Services
Jaurique, Ernie	The Church
Julian, Steve	Navajo County
Krise, Dennine	NACOG – CSA
Lattimer, James	White Mountain Catholic Charities
Lewis, Lisa	Show Low Library/NACRN
Loney, Ivy	Summit Healthcare
Mannis, Kal	RAIN/NACRN
Mays, Lisa	PHN WRSY
McGinty, Debra	Northland Pioneer College
Medina, Kayli	Navajo County
Orozco, Mauricio	Care 1 st Arizona
Pierson, Sharon	DES
Ray, Stephanie (Chair)	ARIZONA@WORK Northeastern Arizona/NACRN
Robertson, Lisa	City of Show Low/NACRN
Scott, Eric	Navajo County Human Resources
Shores, Kay	Blue Ridge High School
Sorensen, John	IBEW/Local Workforce Development Board/NACRN
Sprengeler, Patricia	NACOG CSA/NACRN
Stokes, Dawn	North Country Healthcare
Todd, Leslie	North Country Healthcare
Updike, Nathan	Care 1 st /Wellcare
Williams, Pamela	The Re:Center at the Church/NACRN
Wynn, Kathy	NPC
Zimmerman, Rosalva	Arizona Department of Economic Services



1st Quarter 2019 Update

- February 2019 – Received a Community Service Block Grant (CSBG) of \$55,800, this funding stream has been allocated to wire the Navajo-Apache County Regional Network (NACRN) Center with high-grade technology and support
- In process of recruiting 2 Americorps Vistas
- In negotiations with City of Show Low for NACRN Center at 760 E McNeil in Show Low

2nd Quarter 2019 Update

- The Northeastern Arizona Community Resource Network (NACRN) was incorporated on May 28, 2019 with a 9-person Board of Directors
- NACRN Applied for an Innovation Challenge through the ASU/Amazon Cloud Innovation Center for development of a common intake and referral system for use by NACRN affiliates/area human service providers
- NACRN Executive Director and (1) Board Member traveled to Charlotte, North Carolina for a Public Human Services Association Retreat and to tour a new resource center there

3rd Quarter 2019 Update

- NACRN held 3 board meetings during 3rd Quarter of 2019
- August 2 – NACRN Board facilitates Poverty Subcommittee meeting to discuss common intake system requirements and determine what different levels of affiliate membership could be, i.e., usage of service provider portal vs. tenancy in community resource centers
- ADEQ Conducted Asbestos/Lead Assessment on buildings at the Show Low City Campus, including the proposed Community Resource Center building. Upon receiving the final assessment report, the Arizona Department of Environmental Quality has pre-approved funding through its Brownfields Program for abatement. The abatement is anticipated to include removal of all drywall and could include replacement of windows.
- The Northeastern Local Workforce Development Board approved a Memorandum of Understanding with NACRN, allowing allocation of time and resources to NACRN for development of a technology portal, creation of additional revenue streams, and increased partnerships with human service organizations. This partnership opens up funding for NACRN.
- NACRN's proposal was accepted by the ASU/Amazon Cloud Innovation Center to begin development of a system to remove silos between organizations, create common intake, track referrals, and begin tracking data for future programming/funding opportunities
- NACRN partnered with the American Public Human Services Association's Organizational Effectiveness Department to conduct strategic planning from September-December, 2019. This will create a roadmap and eventual strategic action plan around the

Human Services Value Curve, a framework that enhances service delivery of human service organizations. Kresge Foundation, one of the nation's largest grantmaking foundations, contributed \$8,000 to this effort.

- NACRN developed a basic project proposal package detailing the community resource center project for distribution to potential funding partners. NACRN staff and board members have had meetings with several potential large donors and are awaiting responses to requests for funding.
- NACRN has joined Moonshot, a business incubator in Flagstaff. This membership includes entrepreneurial training as well as the use of Moonshot as a fiscal agent. This allows NACRN to begin accepting donations immediately as a 501(c)3.
- NACRN submitted a \$300,000 grant application to Wellcare/Care 1st

4th Quarter 2019 Update

- NACRN partnered with the American Public Human Services Association's Organizational Effectiveness Department to conduct strategic planning from September-December, 2019. The APHSA facilitator developed a roadmap for each of the three components of NACRN: the virtual network, the community partner network, and the physical empowerment centers.
- NACRN continued the strategic planning process, using the APHSA road map as a guide. 3 Workgroups have been developed, one for each component of NACRN, and are headed by NACRN board members. The work groups will begin reaching out to partners for participation from the Poverty Subcommittee members as well as additional community stakeholders
- NACRN continued working with the AWS/ASU Cloud Innovation Center to begin development of the integrated software platform. A prototype is expected to be completed by Mid-March
- NACRN is in discussions with funders and developers for the software platform. It is anticipated a pilot project will begin in June, 2020
- NACRN continues to work with Care 1st/Well Care to secure funding for the construction costs for the Show Low Empowerment Center
- NACRN continues to add potential partners into the project - during 4th quarter conversations were held with organizations in attempts to secure education, after-school programming, and on-site child care components for the center
- The ADEQ Brownfields funding has been secured and abatement of the hazardous materials in the proposed empowerment center building will begin in July, 2020
- NACRN continues to work with the City of Show Low and an architect for the empowerment center. A preliminary design of the exterior and a portion of the interior has been completed and will be used in our marketing and fundraising efforts
- NACRN has connected with a mentor from the Moonshot Business Incubator who will assist in the development of marketing, fundraising, and business plans

5. SEXUALLY TRANSMITTED DISEASES

NEED: Sexually transmitted diseases – particularly chlamydia and gonorrhea – are a growing epidemic

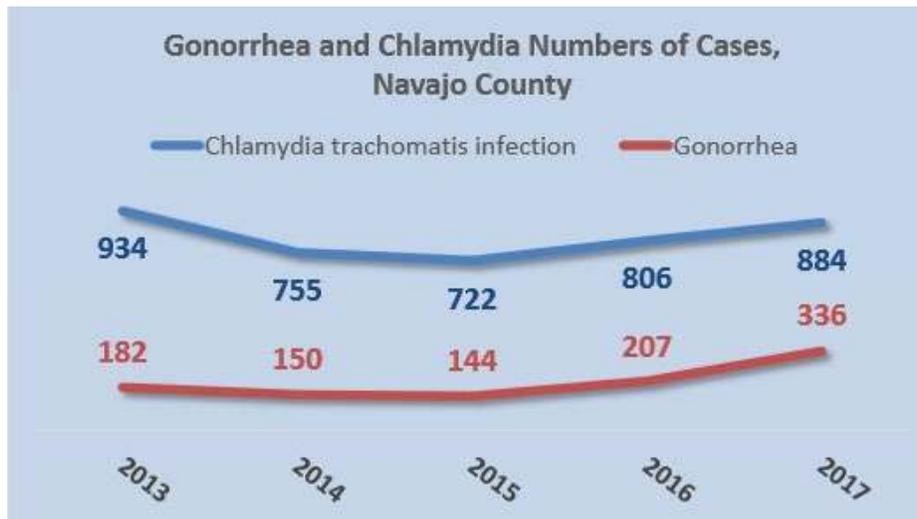
GOAL: Lower the rates of chlamydia, gonorrhea and syphilis

Perhaps the most important communicable disease issue in Navajo County is the rise in sexually transmitted diseases. The numbers of gonorrhea and chlamydia cases have been rising steadily after a low in 2014. Both the absolute numbers and the rate of these diseases is quite high. At 191 cases of gonorrhea per 100,000 residents in 2016, the rate of gonorrhea was 25% higher than Arizona’s rate (151) and the highest of all Arizona counties.¹⁴⁹ The chlamydia rate was even higher at 744 cases per 100,000 residents in 2016. This was the third highest county rate in Arizona.¹⁵⁰ In 2016 and 2017, the number of chlamydia cases jumped from 806 to 884.¹⁵¹ Assuming each infection represents one person during the year that is almost 1% of the entire population of Navajo County that contracted the disease in 2017.



Committee Members

Name	Organization
Janelle Linn (Chair)	NCPHSD
Edwin Rodriguez	NCPHSD
Eli Bierman	CDC-NCPHSD
Cathy Solomon	NCPHSD
Amy Stradling	NCPHSD
Nate Lemmon	Whiteriver IHS
Lillian Kavishe	Whiteriver IHS
Lance Gillespie	Community Member
Kelly Joe	Little Colorado Medical Center
Diana Anderson	Summit Healthcare
Zena Smith	Navajo County Social Hygiene
Jose Burgos	Hopi IHS
Jessie McGinnis	Summit Healthcare
Matthew Waite, DO	Summit Healthcare Family Medicine
Andrew Jones, MD	Summit Healthcare Pediatrics



1st Quarter 2019 Update

- Develop social media outreach campaign to improve awareness among high risk groups.
- Youth Adult Partnership (YAP) – bringing together students and other groups to advocate for comprehensive sex ed in schools & STD resources in the community.
- Testing services by bringing together resources and off-reservation testing services to community events and into schools.
- Contact NPC nursing to train nurses for nursing education.
- Teaching parents and providers how to talk to kids about sex.
- The Navajo Nation was onboarded to the web-based secure STD reporting and surveillance site, PRISM. This will greatly expedite STD surveillance for Navajo Nation cases.

2nd Quarter 2019 Update

- School nurses and health techs received STI up-dates and data at the Annual School Nurse & Public Health Nursing Meeting on April 11, 2019
 - Strategies for how schools can aid in STD solutions were discussed
- At the Annual Immunization Conference in Phoenix April 17th and 18th, Navajo County and Apache County were recognized as having the highest increase in HPV vaccination rates of any other county in Arizona. Our rates increased by greater than 4%, while most counties experienced declining HPV coverage rates. HPV, though not one of our target STDs, is still a STD and increased vaccine coverage rates protect our community against HPV related STDs and cancers.
 - For FY2019 both Navajo and Apache Counties selected increasing HPV coverage rates as their primary vaccine goal. This is believed to be a primary contributor to exceeding their goal to increase coverage rates by 1-2%

- Navajo County Public Health (NCPHSD) completed Expedited Partner Therapy (EPT) completed development of their EPT Program and implemented policy, procedure and are routinely practicing
 - The use of 340B federal drug pricing allows for inexpensive STD treatment options for the un-insured
 - NCPHSD is happy to share their policy with other organizations
- Two of the STD Workgroup team members attended the Arizona Rural Women's Healthy Symposium in Sedona June 25-27, 2019 and highlighted the syphilis outbreak occurring in Navajo County. Present at the symposium were representatives from ADHS, various tribal agencies, and the National Coalition of STD Directors (NCSO). This provided a broad audience to voice our concerns to and advocate for improved funding and strengthening of relationships with networking partners.
- On June 21, 2019 ADHS, Navajo County and Whiteriver IHS met to discuss PRISM onboarding for the White Mountain Apache Tribe to improve surveillance efforts for their jurisdiction.
- STD Workgroup met on April 15, 2019 and on June 3, 2019 where community strategies were further discussed. The group has decided to focus primarily on education this year. Target areas of education include: increased education in schools, for teens, for providers, for school health personnel and for community members
- On May 20, 2019, up-dated focus group information was shared at the Community Health Needs Stakeholder Meeting sponsored by Summit Healthcare
- On June 19, 2019 NCPHSD staff attended congenital syphilis training hosted by ADHS to improve surveillance, treatment and case-management efforts for congenital syphilis. It was determined at the June 3rd STD workgroup meeting that a congenital syphilis sub-workgroup was pertinent, given our current congenital syphilis situation.

3rd Quarter 2019 Update

- NCPHSD was approved additional Teen Health grant funding to create a PT health educator position. Interviews are being held. This will allow for increased education in schools.
- STD workgroup met on August 19, 2019.
 - Syphilis continues to exceed historical high limits in July and August is on target to do the same.
 - The congenital syphilis workgroup plans to be organized and meet by the end of the 4th quarter.
 - Currently seeking a provider to serve as part of the team. Possibility of approaching Dr. Jones &/or Courtney McKibbons, NP were discussed

- Strategies to increase screening were discussed, as well as ideas to increase funding for STD screening

Student Education Up-Date from STD Workgroup

- NC – Abstinence Plus Curriculum: 1 day a week for 6-8 weeks
 - June 2020 Goal – number of students taught (by ages group) between 7/1/18 and 6/30/19:
 - 11-13 yos – 515
 - 14-16 yos – 464
 - 17-19 yos – 13
 - Show Low High and Blue Ridge Junior High have shown interest, but NC currently does not have adequate staff due to personnel turnover
 - Heather would like to manage an Instagram account
 - Eli is continuing to try and get in contact with Lance from YAP
- NN has their own program
 - Would like to learn more for evaluation purposes
- Hopi Teen Clinic – Testing and Treatment for Adolescence
 - Allows teens to handle STDs without involving parents and provides education opportunities
- WMAT – Teen Pregnancy prevention program
 - Nurses teach in schools every other week – generally on prenatal info
- Sexual health and substance abuse resource Flier for students
 - School counselors can hand out to high risk students and can be posted in bathroom stalls
 - Include resources for the entire community – Establish direct contact with tribes for building out
 - Locate electronic document Allison was putting together

Provider Education Up-Date from STD Workgroup

- NPC – Deb McGinty interested in having nursing students develop a provider-focused training curriculum
 - Would be better received if nursing students educated nurses and physicians were taught by other clinical providers
 - Rotating RNs may be effective in training other nurses
 - NC PHNs can facilitate the curriculum development and sit-in on sessions to bridge gap between Nursing students and RNs

- Dr. Lisa B, State Medical Director, voiced willingness to visit the White Mountains and train physicians
 - Should be connected to Allen Dewitt, Summit Chief Medical director
- Nate will share with Eli an AZ-based online program for provider STI training
- Summit knowledge gaps according to Diana and Sara
 - Lab's knowledge of and training in RPR testing
 - Nursing staff not up to date on treatments and diagnostic considerations
 - Dr. Couch, from the valley, showed interest in training staff

4th Quarter 2019 Update

- Eli Bierman attended DIS Track C Training in October 2019 to improve partner interviewing and elicitation techniques. He also received training on interview formats and how to use the partner elicitation grid. He can now train others.
- STD workgroup met on October 28, 2019 and on December 16, 2019
 - Syphilis continued to exceed historical high limits in October, November and December.
 - The 2019 focus of the workgroup was to increase STD education to providers, students and the community. For 2020 the group's focus will shift to increase testing across Navajo County.
- Team Chair, Janelle Linn and Co-Chair, Eli Bierman were interviewed by Dr. Barela for his local TV show and discussed our local STD problem and the strategies being implemented to address the problem, as well as STI related education/information.
- NCPHSD staff and IHS public health staff continue to perform field visits in an attempt to complete contact investigations for syphilis cases.
- Janelle Linn attended the ADHS family planning grant summit and highlighted the need for family planning programs and clinics to incorporate routine STD testing as part of annual wellness and well woman exams, as well as providing funding to cover testing expenses.
- Janelle Linn attended the annual National Coalition of STD Directors STD conference in Alexandria, VA November 17th -22nd. HRSA and CDC are working together to develop the nation's first STD workplan. As part of this training Janelle participated in an economic evaluation training and will be applying lessons learned to perform an economic evaluation of NCPHSD's STD Program and use the findings to advocate for increased state and local STD funding, as well as write for STD grants.
 - Purpose is to advocate for funding and bring together professionals from around the country to identify national trends, discuss concerns and to receive education
 - STD federal action plan is still under development and feedback was collected at the conference – should be released sometime in 2020

- Feedback: gaps in providers collecting sexual histories and acting on patient complaints
- Providers detailed an initiative to create curriculums on collecting patient sexual histories and developing patient profiles
- Link to [STD Engage Plenary Session Videos](#)
- Breakout sessions topics included:
 - Partnering with youth and youth-focused programs
 - Novel Training on adolescent brain development and decision-making
 - STI co-occurring conditions (e.g. domestic abuse, drug use) and how to incorporate this information into investigations
 - Home test kits as a possible outreach method
- NCPHSD partnered with Whiteriver IHS Public Health Nursing and NPC Nursing Students and held a free STD and HIV testing event on November 23, 2019 as part of the Re-Center's local resource fair.
- On December 18, 2019 Summit Healthcare brought a professional speaker in for provider specific syphilis training.

Student Education Up-Date from STD Workgroup

- NC – Abstinence Plus Curriculum: 1 day a week for 6-8 weeks
 - Number of students taught (by ages group) between 7/1/19 and 12/31/19: **471**

STD Workgroup Member Updates

- **NCPHSD Teen Health Program**
 - Currently on winter break and interviewing for a new part time educator
 - Transitioning to a new evidence-based curriculum in July
 - Currently use Native STAND (@ high schools), Smart girls & Wise guys (6-8th grade)
 - Anticipating a decrease in enrollment due to the new curriculum's longer time commitment and community's familiarity with current programs
- **NCPHSD Nursing**
 - A vacant PHN position is reopening in response to increasing STI numbers
- **Summit Health**
 - Dr. Couch Presentation on Neonatal Syphilis – Wednesday, December 18th at 4:00pm in Conference Room 4, Summit Hospital (near the ER waiting room)
 - Summit is now able to do inhouse syphilis screening
 - RPRs and TPPA still need to be sent out

- **NPC**
 - Syphilis informational poster is up
 - Interested in interview training for students – normalizing conversations about sex and STIs
- **Hopi Health Care Center**
 - Difficulties in connecting patients to partners in syphilis case investigations
 - ADHS looking to put on a training in the spring and possibly a webinar in the meantime
- **Whiteriver Indian Hospital**
 - Two new nurses brought on to improve investigations and outreach
 - Supervisor is out on deployment for the next 4 months – Laura Enos is the acting supervisor
- **ADHS**
 - State is pushing for broader 3rd trimester pregnancy screening
 - 1/3 of AZ CS cases could have been prevented
 - Focusing on ERs to find women who aren't receiving prenatal care

Summary and Board Approval

Summit Healthcare Regional Medical Center continues to add value and improve community health needs throughout its programs on care for the communities we serve. Aligning the results from the community health needs assessment and prioritizing health concerns in the White Mountains, Summit Healthcare has identified key initiatives that work toward addressing these needs through this implementation plan. Summit Healthcare continues our efforts with community partners who are also involved with providing health care to the residents and visitors of the White Mountains.

Summit Healthcare's Governing Board has been informed of the Community Health Needs Assessment process and requirements. The Board fully understands its commitment to this mandate through the Patient Protection and Affordable Care Act, as a tax-exempt hospital, we must perform this assessment once every three years, as mentioned in opening paragraph.

Meetings with Supervisors

One meeting each with two elected officials were held in March 2018. The Navajo County Chief Health Officer, Jeff Lee, facilitated the one-on-one conversations. Each session started with the same questions that were asked in the resident focus groups, including

questions on the definition of a healthy community, the most important health problems/issues, and ideas on how to improve the health of the community.

Community Presentations

Over 20 community presentation were provided throughout Navajo County between November 2018 and February 2019. These recipient organization include: The towns and cities of Show Low, Holbrook, Winslow, Heber Overgaard, Snowflake, Taylor and Pinetop-Lakeside; the chambers of the same city and towns; the following partners Navajo County, Summit Health Care, Northland Pioneer College, ChangePoint Integrated Health and North Country Health Care; the following community meetings included White Mountain Business Owners Roundtable, Family Resilience Meeting CASA, Community Network Team, NASSA Special Education, Children with Special Needs Coalition and the Women's Club.