Partnership for a Health GEAUGA
Community Health Improvement Plan (CHIP) Planning Meeting
October 9, 2014
Geauga County Board of Mental Health & Recovery Services

Meeting Minutes

Attendees:
Brad Welch, Family First Council
Anne Anderson, Geauga County Board of DD
Jessica Boalt, Geauga County Department on Aging
Bob Weisdack, Geauga County Health District
Dan Mix, Geauga County Health District
Britney Ward, Hospital Council of NW Ohio
Susan Emens, Kent State University – Geauga Campus
Elaine Maro, Lake-Geauga Recovery Centers
Kathy Malobenski, Ledgemont Schools
George J. Pogan, Middlefield Care Center
Betsy Griffin, Starting Point
Dawn Damante, UH Geauga Medical Center
Julie Bogdan, UH Geauga Medical Center
Joanne Randall, United Way Services of Geauga County
Erwin Leffel, Health District Advisory Council
Andrea Gutka, WomenSafe
Amanda Andersky, Lake County Free Clinic
Irene McMullen, Munson Township
Catherine Whitright, Geauga County Resident
Susan Emes, Kent State University - Geauga
Vicki Clark, Ravenwood
DeAnna Tenney, Chagrin Falls Park
Cheryl Koncler, Probate / Juvenile Court
Dawn Farrell, Geauga Metro Housing
Suzi Kay, United Way of Geauga
Jim Clements, Catholic Charities

Handouts:
- Minutes from 9/25/2014 Meeting
- Work Assignment for Identifying Key Issues and Concerns – Geauga County
Britney Ward, Hospital Council of NW Ohio, chair, started the meeting at 10:05 AM

1. All members introduced themselves and their roles at their respective agencies.

2. Britney Ward reviewed the agenda for the next two meetings.

3. Britney Ward reviewed the procedure for identifying the key health issues in Geauga County stratified by age groups – Adult, Youth and Children.

**ADULT**

1. Healthcare access 97% @ risk highest risk 55-64 years 17
2. Healthcare coverage 41% @ risk highest risk < 30 females 15
3. Chronic Disease management 10
   a. Cardiovascular 53% 65 years and older males
   b. Diabetes 14% 65 years and older males
   c. Cancer 52% at risk
4. Drug Use 15
   a. Tobacco 14% highest 65 years and older males
   b. Alcohol 55% 30-64 years old male
   c. Marijuana 14% under 30 years old male
   d. Prescription misuse 9% under 30 years old male
5. Preventive Health Screenings 8
   a. Look for data in women’s health, men’s health, flu
6. Binge drinking 18% under 30 years old both genders 6
7. High cholesterol level 36% over 65 years old both genders 4
8. Water quality and testing 2% unsafe water supply 2
9. Personal disaster preparedness 1
10. Health literacy 5
11. Amish – more inclusion; learn from them 1
12. Adult weight status 9
   a. 60% overweight/obese over 65 years highest risk
   b. Physical inactivity 22% no activity
   c. Screen time 11.5 hour
13. Homeless adults and families 7% 18-60 years 5
   a. Point-to-point statistics; VA statistics; unemployment stats
14. Mental health 8
   a. Coping with stress 18%
   b. Suicidal thoughts; attempted suicide; suicides
16. PTSD & trauma  over 50 years old highest risk  
17. Working parents – what to do with children after school  
18. Safety – firearms in homes  45% under 30 years old highest risk  
19. Arthritis  343%  65 years and older highest risk  
20. Lack of resources for SES disadvantages families  
   a. Lack of affordable housing  
   b. Lack of services  
21. Lack of public transportation  
   a. Decreases access to healthcare  
   b. Increases problems with youth activity  

YOUTH  
1. Drug use  
   a. Marijuana  28%  17-18 years old  males  
   b. Other drugs  18%  14-16 years old  males  
2. Mental health  
   a. Depression  10%  14-16 years old  female  
   b. Contemplating suicide  9%  increases to 11% in 9th-12th grade  
3. Youth Weight Status  
   a. Physical inactivity  
   b. Screen time  
   c. Unhealthy eating  
4. Violence  carry a weapon in the last 30 days  14%  17-18 yrs old males  
5. Safety and support  seat belt use 59%  
6. Assaulted by g/f or b/f  7%  over 17 at greatest risk  
   a. Youth has intercourse when they did not want too 7%  
7. Bullying  14%  
8. Autism and special needs  
   a. Increasing number of diagnosis  
   b. Lack of services available  
   c. Mothers don’t work because no daycare will take autistic child  
   d. Individualized education plan (IEP)  13-18% per school  
   e. At DD this increases to 90%  
9. Going to bed hungry  
10. Eating disorders  
11. Lack of care or activity for youth after school  
12. Riding with an impaired driver  
   a. Geauga has a culture of alcohol use  
   b. Teen alcohol use is 18% above national levels  
   c. Parental attitude is 16% above national levels
d. Western part of county - higher teen use and parental approval
13. PTSD and trauma 6
14. Youth violence self-inflicted injury 18% 17-18 year old females 2
15. Depression in youth that have been bullied 29% 2
16. Teen pregnancy 2

CHILDREN
1. Going to bed hungry – lack of food 2
2. Mental health issues 10
   a. ADHD 0-11 year olds (Section 30 p. 1)
3. Access to healthcare 71% 0 – 5 years old Low SES 15
4. Lack of healthcare coverage – insurance gaps 16
5. Children’s Weight Status 10
   a. 24% physical inactivity
   b. Screen time
   c. 14% obese and 16% overweight
6. Extra curricula activity 1
   a. High cost of pay-to-play
   b. Lack of social options
   c. Lack of sleep for over-active children
7. Lack of family dynamic / family structure 3
   a. No family meals or structure – lack of well-mannered children
8. Allergies and asthma 4
9. Parental substance abuse 8
10. Bullying 30% 6-11 year olds 4
11. Parents reading to children 6
12. Affordable daycare and after school supervision 4

TOP ISSUES
Adults healthcare access 17
Youth drug use 17
Child healthcare coverage 16
Adult drug use 15
Adult healthcare coverage 15
Children access to care 15
Youth Alcohol 12
Youth mental health 12
Youth weight status 12
Adult chronic disease 10
Children weight status 10
Children mental health 10
Adult weight control 9
Transportation 9

**TOP ISSUES CATEGORIZED**
Healthcare access
Healthcare coverage
Healthy Weight all ages
Mental Health all ages
Drug use all ages
Adult chronic disease
Transportation

**Added**
Youth alcohol
Youth bullying
Youth and children autism and special needs

4. All committee members will receive a worksheet by email to rank the key health issues identified. All committee members are urged to complete the rankings and bring them to the October 23 meeting, where we will select the top two to five key health issues. The rankings will be based on three criteria:
   a. Magnitude – how many people does the problem affect, actually or potentially?
   b. Seriousness of consequences – What degree of disability or premature death occurs because of the problem? What are the potential burdens to your community, such as economic or social burdens?
   c. Feasibility – Is the problem amenable to interventions (i.e. is the intervention scientifically feasible as well as acceptable to the community?) What technology, knowledge, or resources are necessary to effect a change? Is the problem preventable?

5. The remaining scheduled meetings include:
   - October 23, 2014 at 10:30 AM
   - November 6, 2014 at 10:00 AM
   - November 20, 2014 at 10:30 AM
   - A tentative December 4, 2014 meeting at 10:30 AM was scheduled in case we need additional time
   - All meetings are at the Geauga County Board of Mental Health & Recovery Services