



**2023 – 2025**

# **CHIP**

**Community Health  
Improvement Plan**



1867 W. Market Street, Akron, OH 44313

Updated October, 2023

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# A Letter from The Health Commissioner

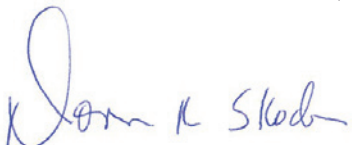
Summit County Public Health is proud to release The 2023-2025 Community Health Improvement Plan. Since 2011, a diverse coalition of community organizations, nonprofits, hospitals, healthcare providers, schools, faith leaders, businesses, elected officials and community residents have shown an impressive willingness to work together to improve the health and well-being of the Summit County community. This work culminates in a Community Health Improvement Plan (CHIP). The coordinated efforts of this robust network have undoubtedly improved the lives of countless Summit County residents.

Over 60 community partners worked over several months to collect and analyze data, identify priority issues, and plan evidence-based interventions to be implemented over the next 3 years. Though the goals and strategies contained in this document were selected through this rigorous process, we recognize that the CHIP is a living document that must be capable of responding to the evolving needs of the community. Building new partnerships and identifying new opportunities will be critical to achieving our goals.

The COVID-19 pandemic has highlighted some of our most pressing challenges, making it necessary that we continue to work together to find timely, creative and effective solutions. Now more than ever, these solutions must systematically target the root causes of inequity and address our community needs. By bringing together a diverse coalition of dedicated partners, thoughtfully analyzing available data, and engaging with the residents of Summit County, we are optimistic that we can achieve the goals set forth in this CHIP.

Let us express our deepest gratitude to all of those that have participated because without them this document would be meaningless. We invite all members of the Summit County community to join us in this important effort.

To a healthier tomorrow,

A handwritten signature in blue ink that reads "Donna Skoda". The signature is fluid and cursive, with the first name being the most prominent.

Donna Skoda, MS RD LD

Health Commissioner, Summit County Public Health

# Introduction

The Summit County Community Health Improvement Plan (CHIP) builds upon 2020-2022 CHIP priorities, goals and strategies. The 2023-2025 CHIP also aligns with the Ohio State Health Improvement Plan, as well as hospital and community partner implementation plans. The CHIP aims to highlight community priorities, strategies, and opportunities for expansion while building upon previous successes and adjusting for current challenges. The five 2023-2025 CHIP priorities are:

- Adolescent Health
- Aging Population
- Chronic Disease
- Maternal & Child Health
- Mental Health & Addiction

Each of these priorities, goals and strategies are directly impacted by two fundamental cross-cutting factors: the **Social Determinants Of Health**, which are the community conditions in which people are born, live, learn, work, and play, and **Health Equity**, which is a person's ability to reach their full potential without facing obstacles from socially determined circumstances.



Source: <https://www.cdc.gov/about/sdoh/index.html>

# 2023–2025 CHIP Priority Areas



Goal and strategy development took place within community coalitions that already existed for the purpose of reducing duplication. Many goals and strategies are similar to the ones from the 2020 CHIP cycle. Strategies in the 2023-2025 CHIP are reflective of past successes and current challenges. The CHIP does not replace or supersede any concurrent action planning document produced by the health department or any of our community partners. Though SCPH has been the organization responsible for coordinating the community health improvement process, it is not the sole organization responsible for CHIP implementation. In fact, we embarked on the community health improvement process intent on developing a CHIP that complemented the various other action planning efforts and/or documents produced by governmental and community partners.

SCPH's commitment to this effort can be seen through its work to build community capacity and developing collaborative partnerships with community stakeholders to address key population health issues.

Work in these areas yielded the following report documents and programmatic focus areas, some of which were used to help inform the CHIP: Full Term First Birthday Strategic Plan, Eviction Task Force Strategic Plan, Opiate Abatement Advisory Committee Abatement Plan, Opiate Task Force Strategic Plan, Suicide Prevention Coalition Strategic Plan, Summa Health CHNA Implementation Plan, Cleveland Clinic Akron General CHNA Implementation Plan, Akron Children's Hospital CHNA Implementation Plan, SCPH Strategic Plan, County of Summit Alcohol, Drug Addiction & Mental Health Services Board (ADM) Community Plan, Youth Violence Prevention Plan, and more.

The SCPH CHIP was developed through a process that meets all Public Health Accreditation Board (PHAB) standards to create a comprehensive community health improvement plan with measurable outcomes or indicators of health improvement and priorities for action; considerations of social determinants of health; causes of higher risks and poorer health outcomes and health inequities.

# Adolescent Health



Adolescence is a unique time where many lifestyle behaviors that contribute to or reduce risk for chronic disease and disability in adulthood are developed. There is also an evident need to address mental health and addiction early in adolescence to mitigate risk, bolster protective factors, and get people resources and treatment sooner rather than later.

The community's greatest asset in determining the needs of adolescents is the Youth Risk Behavior Survey (YRBS), first completed in 2013, and repeated in 5 year cycles. The YRBS will be administered to students in Summit County in the fall of 2023. This survey has provided valuable insight into the types of risks and protective factors that are prevalent among Summit County youth and how they have evolved over time. For example, cigarette smoking among high school students has dropped significantly, however despite the decline in traditional tobacco use, there has been

an increase in the use of e-cigarettes and other vaping products that deliver a higher dose of nicotine far more efficiently. The 2018 Summit County YRBS found that nearly half of the county's high school students have tried e-cigarettes at least once, which has led to an increase in youth-specific tobacco prevention and cessation strategies. Additionally, rates of substance use and other risky behaviors might have decreased for overall populations, but analysis of YRBS data shows that these rates are more troubling for vulnerable populations, like the LGBTQ+ population.

The COVID-19 pandemic created unique challenges for youth and adolescents as they found themselves having to learn and compete in new ways. While there is some data that show the beginning of COVID-19's impact on the education of children, the full effects of COVID-19 on educational outcomes will likely be seen in years to come.

**Adolescent Health Goal 1:** Reduce rates of substance use and abuse

**Adolescent Health Goal 2:** Reduce risky sexual behaviors

**Adolescent Health Goal 3:** Reduce youth violence (including self-inflicted)

**Adolescent Health Goal 4:** Reduce unintentional injuries

**Adolescent Health Goal 5:** Reduce the proportion of adolescents who are overweight or have obesity

# Aging Population



In 2010, Ohio's population was approximately 11.5 million. By 2050, the population is anticipated to reach 11.6 million, an increase of about 110,000 individuals or 1.0 percent. Ohio's population is expected to continue aging over the next few decades. In fact, the percentage of Ohioans age 60 and over is expected to increase from 19.8 percent of the total population in 2010 to 24.1 percent in 2050. In other words, almost one in four Ohioans will be age 60 and over in 2050. This increasing demographic has the potential to put a strain on resources in the community if not planned for appropriately. Chronic conditions such as chronic pain, arthritis, diabetes, and dementia, access to resources, and living conditions are some of the biggest factors impacting the health and wellbeing of the aging population.

Living a healthy lifestyle is essential to healthy aging and according to the 2019 Ohio Behavioral Risk Factor Surveillance System (BRFSS), approximately 72.6 percent of Ohioans age 65 or older have at least one chronic condition, while 43.2 percent have two or more (Ohio 2019 BRFSS Annual Report).

Chronic pain is one of the most prevalent chronic conditions especially in older adults. The BRFSS states

that in 2016, 30.5 percent of all Ohio adults reported that they have been told by a health professional that they have arthritis and 52 percent of adults age 65 and older have the diagnosis (Ohio 2019 BRFSS Annual Report). Arthritis is a major cause of chronic persistent pain and is the leading cause of disability among older adults in the nation. Arthritis reduces functionality, limits mobility and often interferes with activities of daily living. When older adults lose independence in these activities, they may become less able to live alone, leading to dependence on caregivers or a transition to long-term care.

11 percent of all Ohio adults reported being told by a healthcare professional that they have diabetes and 24.5 percent of adults age 65 and older have the diagnosis (Ohio 2019 BRFSS Annual Report). The impact of diabetes and arthritis for an older adult or adult with disability can cause daily limitations, frequent medical visits, decreased quality of life, increased medical costs and difficult emotions.

Summit County seniors had over 51,000 emergency room (ER) visits for a fall-related injury between 2014 and 2021 (approximately 6,300 per year). 82 per 1,000 ER visits from Summit County seniors were

# Aging Population (Continued)

fall-related in 2019, this decreased to 42.0 per 1,000 ER visits in 2020. The average age of Summit County residents who visited the ER for a fall-related injury was 80.5 years old and the average age of those who suffered fall-related deaths was 80.7 years old.

While fall-related injuries increased steadily from 2015 to 2019, fall-related deaths decreased 45 percent from 65 per 100,000 in 2014 to 35.9 in 2019. Fall-related deaths then sharply rose back to 65 per 100,000 from 2019 to 2020. There are two likely explanations for the one-year decline in fall-related ER visits and the increase in fall-related deaths among seniors. The trend appears to be related to the lockdowns imposed for COVID-19. First, it is possible that many seniors feared going to an ER after a fall due to the threat of being exposed to COVID-19; potentially increasing their risk of dying from fall-related injuries. Second, the need for vulnerable seniors to avoid exposure to COVID-19 reduced opportunities for healthy physical activity. Normal activities such as shopping, walking, or participating in exercise classes were all inhibited by 2020's community restrictions. Once lockdowns and other restrictions were phased out, ER visits for falls returned to prepandemic levels. Fall-related deaths have remained elevated.

In 2020, there were approximately 220,000 residents ages 65 and older living with Alzheimer's disease and related dementias (ADRD) in Ohio, and this number is expected to increase 13.6 percent by year 2025 (Alzheimer's Association, 2022). In Summit County there are 97,346 residents ages 65 and older. Of these individuals, an estimated 10.7 percent are currently living with ADRD (65 to 74 years = 2,914, 75 to 84 years = 3,347 & 85+ = 4,405). Alzheimer's disease is the 7th leading cause of death in Ohio and in Summit County. When combined with other forms of dementia, ADRD rose to the 4th leading cause of death in 2020 in Ohio and Summit County. According to the Alzheimer's Association, Ohio was one of the top 20 states for Alzheimer's mortality in 2021. The Alzheimer's disease and related dementia deaths in Summit County (675) represent 5.7 percent of the 11,937 Ohio ADRD deaths reported in 2020. Goals and strategies to mitigate risk factors associated with aging can help reduce the potential strain on the healthcare system and other community resources by ensuring that older adults have what they need to age successfully at home.

**Aging Population Goal 1:** Reduce unintentional injuries, including falls, among seniors/older adults

**Aging Population Goal 2:** Ensure older adults have access to information and services enabling them to successfully age safely and independently in the community

**Aging Population Goal 3:** Provide diverse, equitable and inclusive Alzheimer's disease and related dementia prevention, healthcare and long-term planning education to improve quality of life

**Aging Population Goal 4:** Educate, empower and assure that older adults, persons with disabilities and their caregivers have access to evidence based programming focused on active, healthy and safe living, enabling them to maintain their independence as long as possible

**Aging population Goal 5:** Reduce risk factors related to chronic disease among seniors/older adults



# Chronic Disease



Chronic diseases are non-communicable illnesses, like heart disease and stroke, cancer, or diabetes, that last one year or more. Chronic diseases are the leading causes of death and disability in America. Most chronic diseases can be prevented by eating well, being physically active, avoiding tobacco and excessive drinking, and getting regular health screenings. The current landscape of chronic diseases in Summit County presents both challenges and opportunities.

Tobacco use rates among adults in Summit County have remained unchanged in recent years, remaining at about one-in-five smokers. As previously noted the YRBS showed that 27.6 percent of high school and 9.4 percent of middle school students reported current use of any tobacco product. However, tobacco use is far more common among people with lower incomes. The more disadvantaged someone is, the more likely they are to smoke and to suffer from smoking-related disease and premature death. The ubiquity of tobacco in low-income populations reflects numerous social determinants of health; education, culture, and community are all factors that

affect people's ability to cut out tobacco. Reducing tobacco use among any segment of society produces enormous public health and economic benefits.

A key factor in healthy eating is access to affordable, nutritious food. Food insecurity is the lack of access, at times, to enough food for an active, healthy life. Feeding America estimates that the food insecurity rate in Summit County is 11.2 percent of the total population, 60,400 individuals. The child food insecurity rate is 14.9 percent, 16,950 children. The black (all ethnicities) food insecurity rate is 25 percent, with the white (non-Hispanic) food insecurity rate being 10 percent.

In Summit County, 5.4 percent of the population lives in a food desert. Food deserts are areas lacking access to fresh fruit, vegetables, and other healthy whole foods; they are often found in low-income communities due to a lack of grocery stores, farmers' markets, and healthy food providers. These areas tend to have local corner stores or gas stations that provide processed foods high in sugar and fat and very few, if any, fresh fruits

# Chronic Disease (Continued)

and vegetables. Additionally, 25.6 percent of the restaurants in Summit County are classified as fast food. This equates to a large percentage of Summit County residents who are unable to access healthy, adequate foods whether it be from stores or restaurants.

Approximately 34 percent of Summit County adults have a BMI of 30 or greater. Approximately one in four adults reported participating in no leisure-time

physical activity outside of work, despite 95 percent having adequate access to locations for physical activity. Access can be hindered by cost or other environmental factors. Feeling safe in your neighborhood is important for maintaining a healthy lifestyle. Perceived safety can determine if someone will engage in physical activity in their neighborhood and can be a factor that determines how much a community thrives.

**Chronic Disease Goal 1:** Reduce the prevalence of tobacco use

**Chronic Disease Goal 2:** Increase physical activity opportunities

**Chronic Disease Goal 3:** Strengthen access to healthy food

**Chronic Disease Goal 4:** Reduce the burden of pediatric asthma through community level interventions

# Maternal & Child Health



Infant mortality, or the death of an infant before their first birthday, is a fundamental measure of a community's health. Summit County has had an unacceptably high rate of infant mortality. The leading causes of infant mortality in Summit County in the last ten years were prematurity, sleep-related death, congenital defects, and other causes (which include a variety of accidental, medical and undetermined causes). This rate prompted a request to systematically address these rates and the significant disparity for African American families and their infants.

Full Term First Birthday (FTFB) is a collective impact collaborative that promotes services and resources to reduce racial inequities for Black families to promote infant vitality. The collaborative is made up of multi-sector organizations in Summit County that focus on the well-being of the community. The FTFB strategic planning process resulted in a five year set of strategic goals and objectives, along with a framework of action steps that are being further refined by workgroups. This strategic plan reflects data-informed and evidence-based strategies that were co-designed with community partners, experts and parents.

**Maternal & Child Health Goal 1:** Reduce the preterm birth rate

**Maternal & Child Health Goal 2:** Eliminate sleep-related deaths

**Maternal & Child Health Goal 3:** Reduce the number of pregnant individuals who utilize alcohol, tobacco or other drugs (ATOD)

**Maternal & Child Health Goal 4:** Ensure early access to prenatal care

**Maternal & Child Health Goal 5:** Use qualitative and quantitative data to educate, influence and impact policies and practices that will improve birth outcomes

# Mental Health & Addiction



A person's ability to manage stress, relate to others, and make healthy decisions are determining factors in their overall quality of life. In the wake of COVID-19, there was a heightened awareness on the importance of the mental wellbeing of every member of the community. The psychological, social, and emotional needs that contribute to a person's overall mental health have become a priority of agencies both in and outside of the behavioral health sector. An increased rate of suicide drove strategies dedicated to prevention, building resiliency in our youth population, and reducing the stigma of receiving mental health care by making behavioral health care more affordable and accessible to every member of the community. All too often, those who are struggling to manage mental health concerns are also at higher risk for substance misuse which can lead to addiction. Addiction is a chronic disease of the brain which

causes a person to engage in compulsive behaviors or use dangerous substances despite the harmful consequences.

The Summit County Alcohol, Drug Addiction and Mental Health Services Board (ADM) is responsible for planning, funding, monitoring, and evaluating services that provide treatment, prevention and support for people who experience alcoholism, drug addiction and/or mental illness. When an individual is struggling to manage day to day life for any reason, there is a full continuum of care available through the public and private network of healthcare providers in Summit County. A robust recovery network of licensed peer support agencies, self-help support groups, and others with lived experience of mental health and addiction related issues are available to help people navigate the resources they may need.

Project DAWN (Deaths Avoided With Naloxone) is a state-wide initiative through the Ohio Department of Health (ODH) to provide opioid overdose education and prevention. As a Project DAWN partner, Summit County Public Health provides naloxone, a medication to reverse overdose, free to the community. In effort to reach as many community members as possible, SCPH trains partners such as the ADM Board, behavioral health agencies, grassroots and peer recovery organizations, faith-based organizations, and first responder agencies to administer and distribute naloxone as service entities. In addition to naloxone, the Summit Safe program facilitated by SCPH provides services and sterile supplies to mitigate the spread of blood borne illnesses such as HIV and Hepatitis C.

Despite the rich landscape of harm reduction, treatment and recovery agencies, social support, and community resources, Summit County is still battling

an opioid epidemic. On average, Summit County has seen over 200 lives lost each year since 2016 due to the introduction of two highly potent synthetic opioids, fentanyl and carfentanyl. In an effort to hold the opioid manufacturers, distributors, and pharmaceutical companies responsible, multiple lawsuits have been settled at the state and federal levels. Summit County Executive Shapiro initiated one of the bellwether cases resulting in a multimillion dollar settlement for Summit and Cuyahoga Counties. Funds locally awarded are managed by the county and distributed through an RFP process facilitated by the Opiate Abatement Advisory Council. Specialized treatment programs in local emergency departments, programming for pregnant individuals with opioid use disorder, and funding focused on grassroots and peer recovery organizations are just a few of the ways this has gone directly into the community.

**Mental Health & Addiction Goal 1:** Reduce overdose deaths




**Mental Health & Addiction Goal 2:** Reduce suicide deaths

**Mental Health & Addiction Goal 3:** Increase workforce recruitment and retention strategies to support access to quality services to improve behavioral health outcomes

**Mental Health & Addiction Goal 4:** Ensure access to mental health and substance use treatment in the criminal justice setting

**Mental Health & Addiction Goal 5:** Prevent or delay the onset of substance use or mental illness/increase the perception of risk of substance abuse or other risky behaviors

# Health Equity

EQUALITY	EQUITY	JUSTICE
		
The assumption is that <b>everyone benefits from the same supports</b> . This is equal treatment.	<b>Everyone gets the supports they need</b> (this is the concept of "affirmative action"), thus producing equity.	All 3 can see the game without supports or accommodations because <b>the cause(s) of the inequity was addressed</b> . The systemic barrier has been removed.
Source: <a href="https://www.mobilizegreen.org/blog/2018/9/30/environmental-equity-vs-environmental-justice-whats-the-difference">https://www.mobilizegreen.org/blog/2018/9/30/environmental-equity-vs-environmental-justice-whats-the-difference</a>		

## Cross Cutting Factors – (factors that influence all priority areas)

According to the World Health Organization, health equity is defined as “the absence of unfair and avoidable or remediable differences in the health among population groups defined socially, economically, demographically or geographically” (World Health Organization, 2023). Research shows that issues such as poverty, unemployment, low educational attainment, inadequate housing, lack of public transportation, as well as exposure to violence and neighborhood deterioration (social or physical) determine health outcomes as well as contribute to health inequities (National Academy of Sciences, 2021).

The first step in achieving health equity includes a thorough analysis of health disparities, as well as the root causes of those disparities. All of the organizations working towards change in the priority areas have also dedicated a portion of their time and efforts into addressing disparities that impact the health of Summit County residents. Each priority area identified in the CHIP includes strategies targeted at achieving equity and/or reducing health disparities.

**Adolescent Health Equity Goal:** Address the increased risk for discrimination, violence, bullying, negative mental health and substance use among LGBTQ+ youth

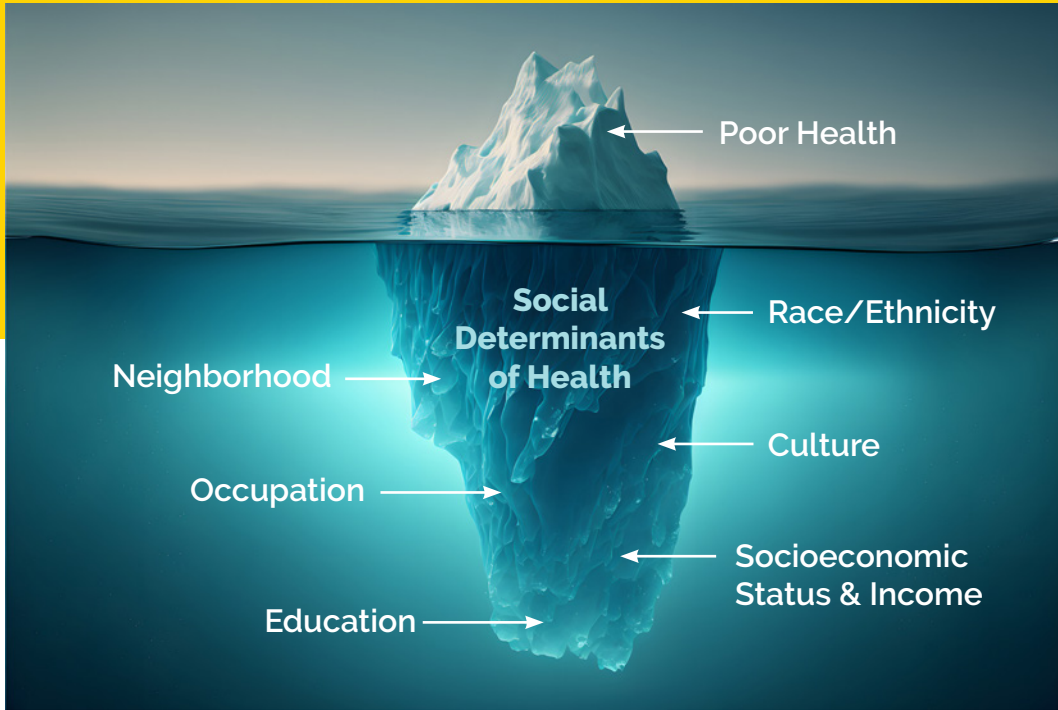
**Aging Population Health Equity Goal:** Provide diverse, equitable, and inclusive Alzheimer’s disease and related dementia prevention, health care, and long-term planning education to improve quality of life

**Chronic Disease Health Equity Goal:** Improve social conditions that cause health inequalities and inequities

**Maternal & Child Health Equity Goal:** Address structural racism that interplays between race, equity, and infant mortality by advancing consistent evidence and research-based cultural responsiveness and implicit bias curriculum across Summit County

**Mental Health & Addiction Health Equity Goal:** Promote Health Equity and reduce disparities across populations (eg: racial, ethnic and linguistic minorities, LGBTQ+) through collaboration, education and community involvement

# Social Determinants of Health



Though this community health improvement plan outlines specific targeted interventions to address priority populations, addressing broader socioeconomic factors is critical to improving the health of the entire Summit County population. SCPH is committed to reducing health disparities and improving health which requires focusing on the root causes and determinants of poor health in our community such as poverty,

education, employment, housing, access to health-care, clean air and water, and access to healthy foods. Many of these determinants are best addressed through policy intervention at various levels. For others, solutions lie in working with other public and private partners in sectors such as education, housing, law enforcement, justice, and community development.

# Healthcare Access & Quality



Healthcare access and quality includes key issues such as access to healthcare, access to primary care, health insurance coverage, and health literacy. Efforts to improve access and quality of care can have positive implications for any and all identified CHIP priorities, while a lack of access or poor-quality healthcare can contribute to poorer health outcomes, disparities and delayed treatment (Social Determinants of Health: Know What Affects Health, 2021). The

passage and implementation of the Affordable Care Act is an example of a policy change that had a direct impact on the number of uninsured in Summit County. However, simply having insurance coverage is not enough to ensure access and quality. Having a trusted, culturally competent, quality medical provider or medical home has a larger impact on health outcomes.

**Healthcare Access Goal 1:** Improve access to quality medical care



# Education Access & Quality



Education access and quality is the connection between education to health and quality of life. This domain includes key components such as high school graduation rates, enrollment in higher education or job training, language and literacy and early childhood education and development (Social Determinants of Health: Know What Affects Health, 2021).

Summit County has long prioritized early childhood education and development as a means to improve outcomes across the lifespan. An example of this is the Summit County First Things First initiative which is led by Summit Education Initiative. First Things First is a collaborative effort that includes partners from multiple sectors all with the goal of a comprehensive approach to early childhood readiness, education, and

development. The collaboration supports partnerships and communication with a variety of service providers and focuses on broad recommendations that can be adapted to meet local needs. The mission of First Things First is to address system gaps and to identify improvements needed to ensure young children in Summit County have the greatest opportunity for positive physical and mental health, early learning and developmental outcomes, and to ensure families have access to needed support services (First Things First, 2021). The tenants of this and all of Summit Education Initiative's (SEI) work is that every child graduates high school enrolled, employed or enlisted, thus leading to ongoing success in adulthood.

**Education Access & Quality Goal 1:** Ensure that all children enter kindergarten ready to learn

**Education Access & Quality Goal 2:** Increase the number of students exceeding the minimum passing level on the third grade reading assessment

**Education Access & Quality Goal 3:** Increase the number of eighth grade students demonstrating strong math skills

**Education Access & Quality Goal 4:** Ensure that all ninth graders have a good start in high school

**Education Access & Quality Goal 5:** Ensure that students graduate college and/or career ready

**Education Access & Quality Goal 6:** College and career persistence

# Social & Community Context



Summit County is home to numerous grassroots and community based organizations that engage in a collaborative neighborhood planning process. Through this collaboration, they help to determine the highest priority issues which threaten or limit an individual's ability to achieve optimal health from the perspective of the community as a whole. SCPH recognizes the importance of respecting

and responding to the way people comprehend, communicate, and make decisions across different cultural backgrounds. The health district works with trusted members of the community (faith-based, council members, and community-based organizations) to develop communication strategies that are culturally sensitive, linguistically appropriate, and the most effective mechanisms to reach targeted populations.

**Social & Community Context Goal 1:** Build and foster community engagement as a means to address health and wellbeing

# Economic Stability



Economic stability refers to the connection between the financial resources people have – income, cost of living, and socioeconomic status – and their health. This area includes key issues such as poverty, employment, food security and housing stability (Social Determinants of Health: Know What Affects Health, 2021). There are a variety of initiatives currently aimed at improving economic stability. They are highlighted below.

## **Elevate Greater Akron**

Elevate Greater Akron is the result of about a year of work among leaders at the City of Akron, Summit County and the Greater Akron Chamber focused on answering some questions about our economy and the best ways to drive opportunity for the region. There are five strategies being pursued that address small- and middle-market business growth: economic inclusion and opportunity; talent and skill development; downtown and job hub development; innovation and high potential start-ups; and improvement

of the ways in which we connect and leverage the resources that support business growth and success in our region on your behalf.

## **Upward Mobility**

In May 2021, the Urban Institute named Summit County as an Upward Mobility Cohort participant. As a cohort participant, Summit County will work to reduce racial and ethnic inequities, and support upward mobility from poverty. With continued support from the Bill and Melinda Gates Foundation, the Boosting Upward Mobility from Poverty project builds on Partnership's work by developing a draft set of actionable mobility metrics that communities can use to set priorities and catalyze action and by authoring a series of case studies exhibiting programs that have demonstrably "moved the needle" on improving economic and social mobility. Upcoming work will beta test the metrics in a set of communities and support broader community learning to create and bolster conditions that substantially boost upward mobility and narrow inequities for children, youth, and adults.

**Economic Stability Goal 1:** Promote strategies that increase business development, labor force participation and employment growth

**Economic Stability Goal 2:** Strengthen local safety net programs to increase food security and housing affordability

# Neighborhood & Built Environment



Factors impacting the quality of housing, access to transportation, availability of healthy foods, air and water quality and neighborhood crime and violence (Social Determinants of Health: Know What Affects Health, 2021).

Some strategies that affect neighborhoods and the built environment can be found in previous priority areas. For example, chronic disease and adolescent health both include strategies that address the built environment. In addition to those strategies, SCPH's Environmental Health Division employs a staff charged with ensuring the County's built environment is safe for its residents.

**Neighborhood & Built Environment Goal 1:** Improve air quality in Summit County

**Neighborhood & Built Environment Goal 2:** Reduce the overall housing with lead hazards in Summit County

# 2023-2025 CHIP Goals & Strategies

The 2026 Targets without "Reduction" are Healthy People 2030 goals.  
This is a living document and will be updated as new data is made available.

## ADOLESCENT HEALTH GOAL 1: REDUCE RATES OF SUBSTANCE USE AND ABUSE

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Youth smoking MS – (current user)	2.0%	N/A	10% Reduction	YRBS, 2018
Youth smoking HS – (current user)	5.8%	N/A	10% Reduction	YRBS, 2018
Youth alcohol use MS – (last 30 days)	6.0%	N/A	10% Reduction	YRBS, 2018
Youth alcohol use HS – (last 30 days)	23.8%	N/A	6.3%	YRBS, 2018
Alcohol or marijuana use HS – (last 30 days)	32.2%	N/A	5.8%	YRBS, 2018

Strategies	Lead Partner(s)
Adopt smoke-free/tobacco-free policies (schools, colleges, employers, housing, outdoor venues)	SCPH
Decrease accessibility and availability of tobacco to youth by increasing compliance rates with sales to minors laws	SCPH
Raise community awareness related to youth vaping, including training of both youth and their parents	SCPH, Cleveland Clinic-Akron General
Conduct paid and earned media campaigns around youth and adult cessation and tobacco policies	SCPH, Summit County Community Partnership
Provide school-aged youth with caring supportive adults as an additional resiliency building resource through mentoring programs	iCare Mentoring, City of Akron
Provide the opportunity for peer to peer education, skill-building, and positive socialization for youth	City of Akron
Expand programming in school setting aimed at increasing academic performance and preventing risky behaviors	Varies
Expand programming that supports positive activities for youth during high risk times, such as after school and during school breaks (Out-of-school time programming)	City of Akron, SEI
See Mental Health & Addiction for additional strategies regarding substance use and abuse	-

## ADOLESCENT HEALTH GOAL 2: REDUCE RISKY SEXUAL BEHAVIORS

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Condom use – middle school	46.3%	N/A	10% Increase	YRBS, 2018
Condom use most of the time, always during last 3 months – high school	53.3%	N/A	10% Increase	YRBS, 2018
Had first sexual encounter before age 13 – high school	3.4%	N/A	10% Reduction	YRBS, 2018
Never had sexual intercourse	64.3%	N/A	10% Increase	YRBS, 2018
Been pregnant or gotten someone pregnant – high school	2.3%	N/A	10% Reduction	YRBS, 2018
Teen birth rate	10.9 per 1,000	7.2 per 1,000	10% Reduction	ODH 2019

Strategies	Lead Partner(s)
Provide STI, HIV, and Hepatitis testing	SCPH, CANAPI, Equitas Health, Hospitals
Increase STI education opportunities throughout Region 4	SCPH
Increase STI testing through innovative methods, including home testing	SCPH
Promote and provide evidence based long acting reversible contraception (LARC) to minority and at risk populations	SCPH
Work to address gaps that were identified by a community needs assessment for the LGBTQ+ community	SCPH
Partner with Radio One to target at risk and minority populations to promote HIV testing, education and prevention, PrEP, and HIV care/treatment	Radio One, SCPH
Distribute condoms to community organizations and community members	SCPH
Create media and marketing campaigns that focuses on prevention of high risk sexual behaviors (unprotected sex, multiple partners, early initiation)	SCPH
Provide school-aged youth with caring supportive adults as an additional resiliency building resource through mentoring programs	iCare Mentoring, Man2Man Fatherhood Initiative, Koinonia

*(Continued on next page)*

**ADOLESCENT HEALTH GOAL 2: REDUCE RISKY SEXUAL BEHAVIORS (Continued)**

Strategies	Lead Partner(s)
Provide the opportunity for peer to peer education, skill-building, and positive socialization for youth	School systems
Expand programming in school setting aimed at increasing academic performance and preventing risky behaviors	Varies
Expand programming that supports positive activities for youth during high risk times, such as after school and during school breaks (Out-of-school time programming)	City of Akron, APD, My Brother's Keeper NEO

**ADOLESCENT HEALTH GOAL 3: REDUCE YOUTH VIOLENCE (INCLUDING SELF-INFLICTED)**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Engaged in physical fighting HS – (past 12 months)	22.4%	N/A	20.9%	YRBS, 2018
Victim of dating violence HS – (past 12 months, all students)	12.3%	N/A	11.4%	YRBS, 2018
Bullied in past 12 months (on school property)	20.4%	N/A	17.9%	YRBS, 2018
Carried weapon in past 30 days (gun, knife or club)	11.0%	N/A	3.7% (gun only)	YRBS, 2018
Engaged in intentional self-harm HS – (past 12 months)	18.0%	N/A	10% Reduction	YRBS, 2018

Strategies	Lead Partner(s)
Provide school-aged youth with caring supportive adults as an additional resiliency building resource through mentoring programs	iCare Mentoring, Man2Man Fatherhood Initiative, Koinonia
Provide the opportunity for peer to peer education, skill-building, and positive socialization for youth	Varies
Expand programming in school setting aimed at increasing academic performance and preventing risky behaviors	Varies
Expand programming that supports positive activities for youth during high risk times, such as after school and during school breaks (Out-of-school time programming)	City of Akron, APD, Peace Justice & Equity, My Brother's Keeper NEO
Provide one-on-one support to returning youth to assist with re-enrollment in school, job training and employment, housing, reconnecting with family and children	Summit County DJFS, Man2Man Fatherhood Initiative, Truly Reaching You, City of Akron, The Womb, Koinonia

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**ADOLESCENT HEALTH GOAL 3: REDUCE YOUTH VIOLENCE (INCLUDING SELF-INFLICTED)** (Continued)

Strategies	Lead Partner(s)
Develop and foster police-youth relations through community policing and neighborhood response teams	Akron Public Schools, Akron Police Department
Promote and enhance gun safety, awareness and reduction programs	Varies
Provide ongoing training and consultation to raise awareness of suicide as a public health issue and to educate the public on how to recognize and respond to someone who needs help	ADM Board, Suicide Prevention Coalition

**ADOLESCENT HEALTH GOAL 4: REDUCE UNINTENTIONAL INJURIES**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Suffered a blow or jolt to the head	-	-	-	YRBS, 2018
Got a concussion from sports	12.7%	N/A	10% Reduction	YRBS, 2018

Strategies	Lead Partner(s)
Identify and recruit members/member organizations that represent underserved sectors of the community	Akron Children's Hospital, Safe Kids Summit County Coalition
Implement population specific and culturally appropriate evidence-based strategies to address high-risk areas	Akron Children's Hospital, Safe Kids Summit County Coalition
Implement Return to Learn program in at least one Summit County school	Akron Children's Hospital, Safe Kids Summit County Coalition
Encourage schools to develop and implement Safe Routes to School Plan	SCPH, ODH, Ohio Department of Transportation, Akron Metropolitan Area Transportation Study

**ADOLESCENT HEALTH GOAL 5:  
REDUCE THE PROPORTION OF ADOLESCENTS WHO ARE OVERWEIGHT OR HAVE OBESITY**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Obese – HS	16.4%	N/A	15.5%	YRBS, 2018
Overweight – HS	17.0%	N/A	15.5%	YRBS, 2018

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**ADOLESCENT HEALTH GOAL 5:**

**REDUCE THE PROPORTION OF ADOLESCENTS WHO ARE OVERWEIGHT OR HAVE OBESITY (Continued)**

Strategies	Lead Partner(s)
Expand the adoption, implementation, and improvement of practices that make healthy foods more accessible and affordable	SCPH
Increase access to fresh produce options and address food insecurity through community gardens and food pantries	SCPH, Let's Grow Akron, Akron Canton Regional Foodbank
Engage diverse governmental partners and stakeholders to work together to improve health and safety through innovative land use, design policies, and active transportation planning	Akron Metropolitan Area Transportation Study, Ohio & Erie Canalway Association
Increase and enhance access to and utilization of inclusive-intergenerational play spaces, focusing on areas with high social vulnerability rates	Akron Parks Collaborative, Summit Metro Parks

**AGING POPULATION GOAL 1:**

**REDUCE UNINTENTIONAL INJURIES, INCLUDING FALLS, AMONG SENIORS/OLDER ADULTS**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Falls among senior citizens leading to death	51.4 per 100,000	65.1 per 100,000	63.4 per 100,000	ODH
ER visit rate resulting from falls among senior citizens	82.4 per 100,000	79.1 per 100,000	54.5 per 100,000	Epicenter

Strategies	Lead Partner(s)
Age Friendly Akron/Age Friendly Summit County initiatives to ensure that the built environment (sidewalks, parks, streets) is safe for all ages and abilities	Age Friendly Akron/Summit County
Senior Independent Living Coalition (SILC) falls prevention subcommittee strategies	SILC
Train healthcare provider agencies and/or community based organizations to screen and refer older adults to evidence based falls prevention programming	SCPH
Provide falls prevention outreach and education at senior/older adult community education events	SCPH, SILC

**AGING POPULATION GOAL 2: ENSURE OLDER ADULTS HAVE ACCESS TO INFORMATION AND SERVICES ENABLING THEM TO REMAIN SAFE AND INDEPENDENT IN THE COMMUNITY**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Resource directory of dementia and caregiving resources throughout the State of Ohio	-	-	-	SCPH, ODH

Strategies	Lead Partner(s)
In partnership with the OSU ADRD team, assess the capacity of provider services and supports	SCPH, OSU ADRD
The aging network will advocate at the state and federal level for funding and programming to address the gaps in services for older people, adults with disabilities and caregivers	SCPH, Aging Network
Market resources for older people, adults with disabilities and caregivers through aging provider social media and web-based platforms	SCPH, Aging Network

**AGING POPULATION GOAL 3: PROVIDE DIVERSE, EQUITABLE AND INCLUSIVE ALZHEIMER'S DISEASE AND RELATED DEMENTIA PREVENTION, HEALTHCARE AND LONG-TERM PLANNING EDUCATION TO IMPROVE QUALITY OF LIFE**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Number of older adults and minority older adults receiving preventative health care services and assessments for problems with memory or thinking	16.0%	-	26.0%	SCPH, 2019

Strategies	Lead Partner(s)
Provide targeted DEI Dementia Friends education to raise awareness of ADRD and decrease stigma among internal and external partners and the general population	SCPH, Dementia Friendly Summit County
Distribute the GSA KAERS Toolkit to health care and community based providers	SCPH
Provide DEI ADRD trainings through the Geriatric Workforce Enhancement Program	SCPH, NEOMED GWEP

**AGING POPULATION GOAL 4: EDUCATE, EMPOWER AND ASSURE THAT OLDER ADULTS, PERSONS WITH DISABILITIES AND THEIR CAREGIVERS HAVE ACCESS TO EVIDENCE BASED PROGRAMMING FOCUSED ON ACTIVE, HEALTHY AND SAFE LIVING ENABLING THEM TO MAINTAIN THEIR INDEPENDENCE FOR AS LONG AS POSSIBLE**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Increase in the number of evidence-based programs focused on the health care of older people	-	3	5	SCPH, 2023

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**AGING POPULATION GOAL 4: EDUCATE, EMPOWER AND ASSURE THAT OLDER ADULTS, PERSONS WITH DISABILITIES AND THEIR CAREGIVERS HAVE ACCESS TO EVIDENCE BASED PROGRAMMING FOCUSED ON ACTIVE, HEALTHY AND SAFE LIVING ENABLING THEM TO MAINTAIN THEIR INDEPENDENCE FOR AS LONG AS POSSIBLE** (Continued)

Strategies	Lead Partner(s)
SCPH BRI Care Consultation will expand service provision to accept referrals from the State Caregiver Center	SCPH, OSU ADRD
Provide hoarding educational trainings focused on evidence based treatment quarterly	SCPH

**AGING POPULATION GOAL 5: REDUCE RISK FACTORS RELATED TO CHRONIC DISEASE AMONG SENIORS/OLDER ADULTS**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Older adults (65+) told by a medical provider that they have diabetes	23%	-	10% Reduction	BRFSS, 2018

Strategies	Lead Partner(s)
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See Chronic Disease Goal 2 and Goal 3 and related strategies (page 28).

**CHRONIC DISEASE GOAL 1: REDUCE THE PREVALENCE OF TOBACCO USE**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Adult smoking	22.3%	23.0%	61%	CHR, 2019

Strategies	Lead Partner(s)
Adopt smoke-free/tobacco-free policies (schools, colleges, employers, housing, outdoor venues) to reduce the number of people exposed to secondhand smoke	SCPH
Decrease accessibility and availability of tobacco to youth by increasing compliance rates with sales to minors laws	SCPH
Facilitate the adoption of tobacco prevention screening and referral systems to reduce barriers to tobacco behavior change among populations with the highest rates of tobacco use	SCPH
Raise community readiness related to youth vaping, including training of both youth and their parents	SCPH, Cleveland Clinic Akron General
Conduct paid and earned media campaigns around youth and adult cessation and tobacco policies	SCPH, Summit County Community Partnership
Continue to monitor the public health research on the health impact of electronic cigarettes and vaping devices	SCPH

## CHRONIC DISEASE GOAL 2: INCREASE PHYSICAL ACTIVITY OPPORTUNITIES

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Percent of adults engaging in any exercise (2019)/proportion of adults who engage in no-leisure time physical activity (2017)	72.3%	74.0%	10% Increase	CHR, 2019
Expand activity programs for older adults and increase access to exercise opportunities	N/A	94.0%	10% Increase	CHR, 2019

Strategies	Lead Partner(s)
Engage diverse governmental partners and stakeholders to work together to improve health and safety through innovative land use, design policies, and active transportation planning	SCPH, Akron Metropolitan Area Transportation Study, Ohio & Erie Canalway Association
Increase and enhance access to and utilization of inclusive-intergenerational play spaces, focusing on areas with high social vulnerability rates	SCPH, Akron Parks Collaborative, Summit Metro Parks

## CHRONIC DISEASE GOAL 3: STRENGTHEN ACCESS TO HEALTHY FOOD

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Percent of population living in a food desert	8.7%	5.4%	10% Decrease	ERSI, SCPH, 2020 Census

Strategies	Lead Partner(s)
Expand the adoption, implementation, and improvement of practices that make healthy foods more accessible and affordable	SCPH, Akron Canton Regional Foodbank, Summit County Food Pantries
Increase access to fresh produce options and address food insecurity through community gardens and food pantries	SCPH, Let's Grow Akron, Akron Canton Regional Foodbank, Summit County Food Pantries

**CHRONIC DISEASE GOAL 4: REDUCE THE BURDEN OF  
PEDIATRIC ASTHMA THROUGH COMMUNITY LEVEL INTERVENTIONS**

<b>Outcome Measures:</b>	<b>2020 CHIP</b>	<b>2023 CHIP</b>	<b>CHIP 2026 Target</b>	<b>Source</b>
Percent of children with asthma diagnosis	21.5%	–	10% Reduction	BHP, 2019

<b>Strategies</b>	<b>Lead Partner(s)</b>
Offer smoking cessation education and resources for patients and families	Akron Children's Hospital, SCPH, Summa Health Systems
Ameliorate substandard housing to reduce environmental risks	SCPH, AMHA, County of Summit
Use medical-legal partnership to address landlord-tenant issues	Akron Children's Hospital, Summa Health System, Community Legal Aid
Improve medication management and compliance through education, care coordination, home health and technology	Akron Children's Hospital
Improve and standardize screening protocols to identify patients with asthma	Akron Children's Hospital
Leverage school health strategies for identification of unidentified and poorly controlled asthmatics	Akron Children's Hospital

**MATERNAL & CHILD HEALTH GOAL 1: REDUCE THE PRETERM BIRTH RATE**

<b>Outcome Measures:</b>	<b>2020 CHIP</b>	<b>2023 CHIP</b>	<b>CHIP 2026 Target</b>	<b>Source</b>
Preterm birth rate	10.3%	–	11.4%	SCPH, 2018
Percent of preterm births in Summit County	2.8%	–	10% Decrease	SCPH, 2018

<b>Strategies</b>	<b>Lead Partner(s)</b>
Increase screening for high-risk pregnant individuals for progesterone treatment	FTFB, Hospital Systems, Medical Providers
Support healthy birth spacing by increasing awareness of the full-range of efficacy based contraceptive options including LARC	FTFB, SCPH
Expand access to Summit County home visiting programs to identify needs and improve pregnancy outcomes	Help Me Grow, Pathways Hub, and other direct-service based programming
Initiate a community-wide information campaign with consistent messages to promote preconception health and safety, vaccinations, family planning/birth spacing and early prenatal care	FTFB

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## MATERNAL & CHILD HEALTH GOAL 1: REDUCE THE PRETERM BIRTH RATE (Continued)

Strategies	Lead Partner(s)
Promote birth spacing of 12-18 month intervals between pregnancies to improve birth outcomes	FTFB
Increase engaging opportunities to be supportive/involved in the health and wellness of the families and their children	FTFB
Expand the use of the Centering Pregnancy model within targeted high-risk neighborhoods	FTFB

## MATERNAL & CHILD HEALTH GOAL 2: ELIMINATE SLEEP-RELATED DEATHS

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Percent of infant deaths in Summit County that are sleep related	40.0%	30.0%	0	SCPH, 2019

Strategies	Lead Partner(s)
Expand Cribs for Kids program through awareness and toolkits to address safe sleep habits of parents and babies	FTFB
Continue to provide outreach and education to families (parents, siblings and grandparents) and daycare/home care providers on safe sleep practices through key messages and communication	FTFB
Systematically educate boots on the ground professionals (first responders, children's services, home visitors, WIC staff) on safe sleep education	FTFB

## MATERNAL & CHILD HEALTH GOAL 3: REDUCE THE NUMBER OF PREGNANT INDIVIDUALS WHO UTILIZE ALCOHOL, TOBACCO OR OTHER DRUGS (ATOD)

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
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See Mental Health and Addiction section for ATOD Outcome Measures (starting page 31).

Strategies	Lead Partner(s)
Expand access to evidence based tobacco cessation treatments for pregnant people	SCPH, ODH
Adopt smoke-free/tobacco-free policies (schools, colleges, employers, housing, outdoor venues)	SCPH
Expand Centering Pregnancy programs for pregnant individuals struggling with opioid related issues	Summa Health System, Cleveland Clinic

### MATERNAL & CHILD HEALTH GOAL 4: ENSURE EARLY ACCESS TO PRENATAL CARE

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
First trimester prenatal care	70%	74.2%	80.5%	ODH, 2021

Strategies	Lead Partner(s)
Utilize Summit County home-visiting programs to connect pregnant individuals and families to health insurance coverage	Help Me Grow, Pathways HUB, and other client based programming
Ensure eligible clients are enrolled into Medicaid	Department of Job and Family Services
Increase first trimester enrollment into maternal child health programming	FTFB, SCPH
Expand Centering Pregnancy Programs for high-risk populations	Summa Health System, Cleveland Clinic

### MATERNAL & CHILD HEALTH GOAL 5: USE QUALITATIVE AND QUANTITATIVE DATA TO EDUCATE, INFLUENCE AND IMPACT POLICIES AND PRACTICES THAT WILL IMPROVE BIRTH OUTCOMES

Strategies	Lead Partner(s)
Develop position statements for key policy issues identified by FTFB members	FTFB, SCPH
Meet with key state and federal policymakers to advocate for policy changes pertaining to maternal and child health	FTFB, SCPH
Meet with employer CEOs to advocate for family friendly corporate policies and practices	FTFB
Identify and partner with other coalitions within Ohio that are engaged with advocacy efforts to reduce infant mortality	FTFB

### MENTAL HEALTH & ADDICTION GOAL 1: REDUCE OVERDOSE DEATHS

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Opioid doses per capita	31.3 (2019)	-	-	OARRS
Percent of communities deploying Quick Response teams	80.0%	-	100%	ADM, 2020
Unused prescriptions collected	5,528 lbs (2020)	5,808 (2022)	-	Summit County Sheriff, 2022
DAWN kits distributed	3,156	6,422	7,500	ADM, SCPH, 2022

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**MENTAL HEALTH & ADDICTION GOAL 1: REDUCE OVERDOSE DEATHS** (Continued)

Strategies	Lead Partner(s)
Work to address collaboration, policies, and procedural issues to enhance access to detox services	ADM, OAAC
Address barriers to accessing residential AoD treatment	ADM, OAAC
Maintain an Overdose Fatality Review Board to identify and address community needs	SCPH, ADM, Law Enforcement, Medical Examiner, Community Stakeholders
Decrease the number of opioid prescriptions per capita	ADM, SCPH, OAAC
Decrease the access to unused prescription medications	ADM, SCPH, OAAC
Work to collaborate and enhance the use of Quick Response Teams in the community	ADM, SCPH, Law Enforcement
Continue to provide free community based access to naloxone	SCPH, ADM, Project DAWN, Community Stakeholders
Provide access to and promote the use of substance testing strips (e.g. fentanyl test strips) in the community and routine fentanyl testing in clinical settings	SCPH, OAAC
Promote and expand Syringe Services and Harm Reduction programming	SCPH, OAAC

**MENTAL HEALTH & ADDICTION GOAL 2: REDUCE SUICIDE DEATHS**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Suicide Rate	14.6 per 100,000 (2019)	15.6 per 100,000	12.8 per 100,000	ODH, 2021

Strategies	Lead Partner(s)
Improve care and outcomes for individuals at risk of suicide in health care systems	ADM
Facilitate coordination of local resources, increase awareness of suicide as a public health problem, increase awareness of suicide hotlines (988), and educate the community to recognize suicide risk factors through the Suicide Prevention Coalition (SPC)	ADM, SPC
Increase understanding in the community surrounding trauma and its effects	ADM, TICC
Work to further the youth suicide prevention strategic plan goals	ADM, Akron Children's Hospital



**MENTAL HEALTH & ADDICTION GOAL 3: INCREASE WORKFORCE  
RECRUITMENT AND RETENTION STRATEGIES TO SUPPORT ACCESS TO QUALITY  
SERVICES TO IMPROVE BEHAVIORAL HEALTH OUTCOMES**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Number of first responders trained in Crisis Intervention training	-	1,096	1,276	ADM, 2020
Percent of ADM system agencies employing evidence-based treatment programs	-	-	100%	ADM, 2020
Number of Emergency Departments with Medication Assisted Treatment Initiation Programs	2	-	4	Summa Health, 2020

Strategies	Lead Partner(s)
Work to implement Dual-Diagnosis Capability (DCC) principles within the network of care	ADM
Support agencies in the development and implementation of a full continuum of services	ADM
Maintain support for Medication Assisted Treatment availability in Outpatient Settings	ADM, OAAC
Use the Trauma Informed Care (TIC) Needs Assessment and Strategic Plan completed by the University of Akron for the implementation of best practices of TIC countywide	ADM, OAAC, University of Akron
Increase availability of Medication Assisted Treatment in the Emergency Department Setting	OAAC, Summa Health, CCAG
Strengthen relationships which allow referral efficacy to community recovery services such as Peer Support, residential treatment and housing from primary care providers	ADM, OAAC

**MENTAL HEALTH & ADDICTION GOAL 4: ENSURE ACCESS TO MENTAL HEALTH  
AND SUBSTANCE USE TREATMENT IN THE CRIMINAL JUSTICE SETTING**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Number of naloxone kits provided to incarcerated individuals upon release	-	27	expanded partners/ access	SCPH, Cuyahoga Falls Police Department
Number of referrals made for additional services with UniteUs for individuals being released from incarceration	-	-	-	SCPH, County of Summit

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**MENTAL HEALTH & ADDICTION GOAL 4: ENSURE ACCESS TO MENTAL HEALTH AND SUBSTANCE USE TREATMENT IN THE CRIMINAL JUSTICE SETTING** (Continued)

Strategies	Lead Partner(s)
Continue funding for Behavioral Health services in Summit County Jail and Juvenile Detention	ADM, Summit Psychological Associates, Summit County Jail
Provide linkage to community based treatment, recovery supports, supportive housing and other related needs upon release from incarceration	ADM, Summit Psychological Associates, Oriana House
Increase the availability of Medication Assisted Treatment and Naloxone in the jail settings and upon release from incarceration	ADM, OAAC, Summit Psychological Associates, SCPH
Continue support for adult/juvenile specialty court dockets through case management and support services	ADM, CSS, Oriana House

**MENTAL HEALTH & ADDICTION GOAL 5: PREVENT OR DELAY THE ONSET OF SUBSTANCE USE OR MENTAL ILLNESS/INCREASE THE PERCEPTION OF RISK OF SUBSTANCE ABUSE AND OTHER RISKY BEHAVIORS**

Strategies	Lead Partner(s)
Enhance awareness of the opiate epidemic and provide education about addiction in general through community collaboration	ADM, SCPH, SCOATF, OAAC
Information dissemination that focuses on awareness and knowledge of behavioral health and resources in Summit County to reduce stigma and negative beliefs/perceptions regarding behavioral health	ADM

**ADOLESCENT HEALTH EQUITY GOAL: ADDRESS THE INCREASED RISK FOR DISCRIMINATION, VIOLENCE, BULLYING, NEGATIVE MENTAL HEALTH AND SUBSTANCE USE AMONG LGBTQ+ YOUTH**

Strategies	Lead Partner(s)
Improve access to healthcare and care coordination to the LGBTQ+ community through the Summa Health Pride Clinic	Summa Health
Provide cultural competence training about caring for LGBTQ+ patients throughout Summa Health System	Summa Health
Provide STI, HIV, and Hepatitis C testing	SCPH, CANAPI
Promote and provide evidence based long acting reversible contraception (LARC) to minority and at risk populations	SCPH
Work to address gaps that were identified by a community needs assessment for the LGBTQ+ community	Kent State University, SCPH

**AGING POPULATION HEALTH EQUITY GOAL: PROVIDE DIVERSE, EQUITABLE, AND INCLUSIVE ALZHEIMER'S DISEASE AND RELATED DEMENTIA PREVENTION, HEALTH CARE, AND LONG-TERM PLANNING EDUCATION TO IMPROVE QUALITY OF LIFE**

Strategies	Lead Partner(s)
Provide geriatric and "Dementia Friends" training	SCPH
Incorporate "Brain Health" prevention into chronic disease prevention messaging	SCPH
Provide one presentation on the topic of Brain Health each year at events targeting older adults and/or senior service providers	SCPH
Provide targeted educational outreach related to early detection of memory and cognitive decline to 10 agencies providing services to older adults, including minority serving agencies	SCPH

**CHRONIC DISEASE HEALTH EQUITY GOAL: IMPROVE SOCIAL CONDITIONS THAT CAUSE HEALTH INEQUALITIES AND INEQUITIES**

Strategies	Lead Partner(s)
Cultivate, strengthen, and diversify strategic partnerships to more effectively address the social determinants of health and improve the health behaviors of residents	SCPH
Promote land use, inclusive play spaces, and transportation policies that create healthy built environments, promote equity, and prevent chronic diseases in areas that are disproportionately affected by poor health	SCPH, Akron Metropolitan Area Transportation Study, Akron Parks Collaborative, Summit Metro Parks, Ohio & Erie Canalway Association
Improve access to and affordability of healthy food options in all neighborhoods	SCPH, Let's Grow Akron, Akron Canton Regional Foodbank
Decrease access to the accessibility and availability of tobacco products in all neighborhoods	SCPH

**MATERNAL & CHILD HEALTH EQUITY GOAL: ADDRESS STRUCTURAL RACISM THAT INTERPLAYS BETWEEN RACE, EQUITY AND INFANT MORTALITY BY ADVANCING CONSISTENT EVIDENCE AND RESEARCH-BASED CULTURAL RESPONSIVENESS AND IMPLICIT BIAS CURRICULUM ACROSS SUMMIT COUNTY**

Strategies	Lead Partner(s)
Convene a diverse assessment team of community experts to identify individual or organizational needs and recommend strategies and resources to develop cultural responsiveness and effectively impact infant mortality	FTFB
Develop a recommended action plan and budget for the roll-out of system wide structural racism, implicit bias and cultural responsiveness training, beginning with the agencies with the FTFB collaborative	FTFB
Build the capacity of FTFB partner organizations to initiate and maintain training programs and activities	FTFB

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**MATERNAL & CHILD HEALTH EQUITY GOAL: ADDRESS STRUCTURAL RACISM THAT INTERPLAYS BETWEEN RACE, EQUITY AND INFANT MORTALITY BY ADVANCING CONSISTENT EVIDENCE AND RESEARCH-BASED CULTURAL RESPONSIVENESS AND IMPLICIT BIAS CURRICULUM ACROSS SUMMIT COUNTY (Continued)**

Strategies	Lead Partner(s)
Identify measurable outcomes and quality improvement strategies as a part of FTFB's ongoing training and education	FTFB
Build a culture of leadership that cultivates relationship-building among organizations and providers, and between those who serve and those being served	FTFB

**MENTAL HEALTH & ADDICTION HEALTH EQUITY GOAL: PROMOTE HEALTH EQUITY AND REDUCE DISPARITIES ACROSS POPULATIONS (E.G.: RACIAL, ETHNIC AND LINGUISTIC MINORITIES, LGBTQ+) THROUGH COLLABORATION, EDUCATION AND COMMUNITY INVOLVEMENT**

Strategies	Lead Partner(s)
Continued investment in training and evidenced based practice towards underserved populations for service providers	ADM
Implement training and education on CLAS Standards	ADM
Address the needs of foreign-born residents through collaboration with the Refugee Task Force and others, to provide services targeting these populations	ADM, Refugee Task Force

**HEALTHCARE ACCESS GOAL 1: IMPROVE ACCESS TO QUALITY MEDICAL CARE**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Percentage of adults without health insurance	7.0%	8.2%	7.6%	CMS, American Community Survey, 2018
Percentage of children without health insurance	4.0%	-	0%	CMS, American Community Survey, 2018

Strategies	Lead Partner(s)
Enroll all eligible adults and children into Medicaid	DJFS

**EDUCATION ACCESS & QUALITY GOAL 1: ENSURE THAT ALL CHILDREN ENTER KINDERGARTEN READY TO LEARN**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Kindergarten readiness	60.0%	48.0%	80.0%	SEI, 2023

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**EDUCATION ACCESS & QUALITY GOAL 1:  
ENSURE THAT ALL CHILDREN ENTER KINDERGARTEN READY TO LEARN** (Continued)

Strategies	Lead Partner(s)
Increase access to high quality preschool experiences	SEI, FTF
Measure and describe child development at the end of preschool	SEI, FTF
Increase the proportion of students who begin kindergarten on track for success	SEI, FTF

**EDUCATION ACCESS & QUALITY GOAL 2: INCREASE THE NUMBER OF STUDENTS  
EXCEEDING THE MINIMUM PASSING LEVEL ON THE THIRD GRADE READING ASSESSMENT**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Third grade reading, proficient or better	64.0%	65.0%	70.0%	SEI, 2023

Strategies	Lead Partner(s)
Identify schools or communities with the greatest need for literacy development support	SEI
Increase teacher capacity through literacy coaching	SEI
Identify and replicate effective volunteer tutoring programs	SEI

**EDUCATION ACCESS & QUALITY GOAL 3: INCREASE THE  
NUMBER OF EIGHTH GRADE STUDENTS DEMONSTRATING STRONG MATH SKILLS**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Eighth grade math, proficient or better	68.0%	54.0%	70.0%	SEI, 2023

Strategies	Lead Partner(s)
Increase student motivation and confidence	SEI
Help parents support their children at home	SEI
Develop high-quality, low stakes assessments	SEI

**EDUCATION ACCESS & QUALITY GOAL 4:  
ENSURE THAT ALL NINTH GRADERS HAVE A GOOD START IN HIGH SCHOOL**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Ninth grade success, percent of students with 3.0 GPA or higher and 6.5 credits	39.0%	42.0%	50.0%	SEI, 2023

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**EDUCATION ACCESS & QUALITY GOAL 4:  
ENSURE THAT ALL NINTH GRADERS HAVE A GOOD START IN HIGH SCHOOL** (Continued)

Strategies	Lead Partner(s)
Ensure that students miss no more than 8 days of school	SEI
Ensure students earn at least 6.5 credits by the end of ninth grade	SEI
Ensure students maintain a B or B+ average	SEI

**EDUCATION ACCESS & QUALITY GOAL 5:  
ENSURE THAT STUDENTS GRADUATE COLLEGE AND/OR CAREER READY**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Percent scoring 21 or higher on ACT	45.0%	40.0%	50.0%	SEI, 2023

Strategies	Lead Partner(s)
All students graduate from high school with a plan to be employed, enrolled or enlisted	SEI
All students who plan to attend college after high school will complete a FAFSA	SEI
Increase the proportion of students who earn a "college ready" score on college placement tests	SEI
College and Career Academies of Akron	Akron Public Schools, United Way of Summit County

**EDUCATION ACCESS & QUALITY GOAL 6: COLLEGE AND CAREER PERSISTENCE**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Percent of adults that persisted in accredited post-secondary programs	86.0%	82.0%	90.0%	SEI, 2023

Strategies	Lead Partner(s)
Recruit adults with college experience to return and earn a degree, in partnership with local employers	SEI
Award retroactive associate degrees to adults who did not complete a bachelor's degree program	SEI
Strengthen the transition from high school to post-secondary enrollment	SEI

**SOCIAL & COMMUNITY CONTEXT GOAL 1: BUILD AND FOSTER  
COMMUNITY ENGAGEMENT AS A MEANS TO ADDRESS HEALTH AND WELLBEING**

Strategies	Lead Partner(s)
Family resource centers at Akron Public Schools CLCs	Akron Public Schools, United Way of Summit County
Revitalize specific neighborhoods in Akron by strengthening and connecting assets, listening to neighbors and advocating for equitable action that will improve the quality of life	Neighborhood Network (NN), a program of Habitat for Humanity of Summit County
Facilitate neighbor-led creative place making, sustainability and health equity efforts throughout Akron	The Big Love Network, Akron Parks Collaborative, Akron Metropolitan Area Transportation Study, Ohio & Erie Canalway Association
Enhance and promote cultural, artistic and educational activities	The W.O.M.B.
Promote and facilitate discussion circles within Summit County in order to obtain community voice and include those with lived experience in planning and decision making	Project Ujima, SCPH
Develop and implement comprehensive outreach strategies that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs	SCPH
Establish new and strengthen existing cross-sector partnerships with stakeholders, provider referral networks, individuals, and youth to build capacity and efforts to advance equity	SCPH

**ECONOMIC STABILITY GOAL 1: PROMOTE STRATEGIES THAT INCREASE BUSINESS DEVELOPMENT,  
LABOR FORCE PARTICIPATION AND EMPLOYMENT GROWTH**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Unemployment Rate	4.6%	5.4%	4.5%	SCPH, 2023

Strategies	Lead Partner(s)
Increase access to employment with new programs such as the Recovery Friendly Workplace.	SCPH

**ECONOMIC STABILITY GOAL 2: STRENGTHEN LOCAL SAFETY NET PROGRAMS TO INCREASE  
FOOD SECURITY AND HOUSING AFFORDABILITY**

Outcome Measures:	2020 CHIP	2023 CHIP	CHIP 2026 Target	Source
Referrals made to 211 for housing services	N/A	22,376	10% increase	211
Referrals made to 211 for food access	N/A	29,566	10% increase	211

**NEIGHBORHOOD & BUILT ENVIRONMENT GOAL 1: IMPROVE AIR QUALITY IN SUMMIT COUNTY**

<b>Outcome Measures:</b>	<b>2020 CHIP</b>	<b>2023 CHIP</b>	<b>CHIP 2026 Target</b>	<b>Source</b>
Air quality compliance rate	88.0%	88.7%	90.0%	SCPH, 2023

<b>Strategies</b>	<b>Lead Partner(s)</b>
Educate the public on air quality issues	Akron Regional Air Quality Management District, SCPH
Provide public or industry educational trainings on open burning, fugitive dust and permitting	Akron Regional Air Quality Management District, SCPH
Increase the capacity of the Akron Regional Air Quality Management District	Akron Regional Air Quality Management District, SCPH

**NEIGHBORHOOD & BUILT ENVIRONMENT GOAL 2:  
REDUCE THE OVERALL HOUSING WITH LEAD HAZARDS IN SUMMIT COUNTY**

<b>Outcome Measures:</b>	<b>2020 CHIP</b>	<b>2023 CHIP</b>	<b>CHIP 2026 Target</b>	<b>Source</b>
Rate of positive lead tests (blood) in children	2.27 positive tests per 1,000 children	-	1.82 positive tests per 1,000 children	SCPH, 2019

<b>Strategies</b>	<b>Lead Partner(s)</b>
Utilize public funding through HUD and/or ODH to abate lead based paint hazards in 100 homes by December 31, 2025	SCPH
Increase the number of lead abated homes in areas outside the City of Akron, using the new Environmental Health Lead code and HUD Lead Based Paint Hazard Control (LBPHC) grant by December 31, 2025	SCPH
Provide messaging and education related to home based lead hazards, health related impacts, remedial strategies and prevention by December 31, 2025	SCPH



# Next Steps



## **Monitoring CHIP Priorities**

CHIP priorities will be monitored by the Summit Coalition for Community Health Improvement (SCCHI) on an ongoing basis. SCPH utilizes a variety of tools to monitor CHIP goals, strategies, and outcomes including a variety of data dashboards, maps, and data briefs. As health outcomes are routinely monitored, priorities may shift and require adjustments to meet those needs.

## **Evaluation of CHIP Strategies**

CHIP strategies will be evaluated based on outcome and process measures identified by lead agencies and/or coalitions. SCCHI will continue to work collaboratively with lead partners to use evaluation measures to identify and circumvent challenges, address any forces of change, and adapt to political or funding changes.

# Appendix 1 – Chip Partners

- Akron Area YMCA
- Akron Canton Regional Foodbank
- Akron Children's Hospital
- Akron Metropolitan Area Transportation Study
- Akron Metropolitan Housing Authority
- Akron Regional Interprofessional Area Health Education Center
- Akron Summit County Public Library
- American Cancer Society
- Asian Services in Action, Inc.
- AxessPointe Community Health Center
- CANAPI
- Child Guidance & Family Solutions
- City of Akron
- Cleveland Clinic Akron General
- Community Action Akron Summit
- Community Legal Aid
- County of Summit
- County of Summit Alcohol, Drug Addiction & Mental Health Services Board
- Direction Home Akron Canton Area Agency on Aging and Disabilities
- Greater Akron Chamber
- International Institute of Akron
- Kent State University College of Public Health
- Northeast Ohio Medical University
- Ohio Guidestone
- Project Learn of Summit County
- Summa Health System
- Summit County Developmental Disabilities Board
- Summit County Children's Services
- Summit Education Initiative
- Summit Metroparks
- The Blick Center
- United Way of Summit County

# Appendix 2 – Summit County Coalitions

This is not a fully comprehensive list of coalitions that exist in Summit County. However, these diverse coalitions bring together partners from multiple sectors across Summit County to improve the quality of life for residents.

- Akron Commission on Aging
- Akron Summit County Community Reinvestment Coalition
- Eviction Task Force
- First Things First
- Full Term First Birthday
- Hoarding Task Force
- Income Education Workforce Development
- Let's Move Summit County
- Maternal Depression Network
- Minority Health Advisory Committee
- Ohio Equity Institute/Better Birth Outcomes
- Opiate Abatement Advisory Counsel
- Opiate Task Force
- Refugee Task Force
- Reimagining Civic Commons
- Safe Kids Summit County
- Safe Routes to School
- Senior Independent Living Coalition
- Social Services Advisory Board
- Summit Food Coalition
- Summit County Trauma Informed Care Coalition
- Suicide Prevention Coalition
- Trauma Informed Care Coalition
- Welcoming Akron Summit County
- Youth Violence Prevention Steering Committee

# Appendix 3 – Acronyms

- ADM – County of Summit Alcohol, Drug Addiction & Mental Health Services Board
- AMHA – Akron Metropolitan Housing Authority
- APD – Akron Police Department
- ATOD – Alcohol, tobacco and other drugs
- BHP – Better Health Partnership
- BRFSS – Behavioral Risk Factor Surveillance System
- CCAG – Cleveland Clinic Akron General
- CHNA – Community Health Needs Assessment
- CHIP - Community Health Improvement Plan
- CHR – County Health Rankings
- CIT – Crisis Intervention Training
- CMS – Centers for Medicare and Medicaid Services
- CSS – Community Support Services
- DJFS – Department of Job and Family Services
- FTF – First Things First
- FTFB – Full Term First Birthday
- LGBTQ+ – Lesbian, Gay, Bisexual, Transgender, and Queer
- OAAC – Opiate Abatement Advisory Council
- OARRS – Ohio Automated Rx Reporting System
- ODH – Ohio Department of Health
- PHAB – Public Health Accreditation Board
- ROSC – Recovery-oriented system of care
- SCCHI – Summit Coalition for Community Health Improvement
- SCOATF – Summit County Opiate and Addiction Task Force
- SCPH – Summit County Public Health
- SEI – Summit Education Initiative
- SILC – Senior Independent Living Coalition
- SPC – Suicide Prevention Coalition
- SSAB – Social Services Advisory Board
- YRBS – Youth Risk Behavior Survey

# References

2023 – 2026 Strategic Action Plan on Aging (2022, October). Retrieved July 12, 2023, from Ohio Department of Aging: [https://aging.ohio.gov/static/State-Plan-2023 – 2026-Full-Documnet.pdf](https://aging.ohio.gov/static/State-Plan-2023-2026-Full-Documnet.pdf)

(2023). Retrieved from National Academy of Sciences: <https://www.ahealthierworld.jhu.edu/understand-health-equity>

(2023). Retrieved from County of Summit ADM Board: <https://www.admboard.org/>

Alzheimer's Association (2018). 2018 Alzheimer's Disease Facts and Figures.

Feeding America (2021). Retrieved June 21, 2023, from Feeding America: [feedingamerica.org](http://feedingamerica.org)

First Things First (2021). Retrieved June 21, 2023, from First Things First: [https://summitcountyfirstthingsfirst.org/?page\\_id=2067](https://summitcountyfirstthingsfirst.org/?page_id=2067)

Indicators (2021). Retrieved June 21, 2023, from Summit Education Initiative: <https://seisummit.org/our-evidence/>

Ohio Behavioral Risk Factor Surveillance System: 2019 Annual Report. Chronic Disease Epidemiology and Evaluation Section, Bureau of Health Improvement and Wellness, Ohio Department of Health, 2021.

Social Determinants of Health: Know What Affects Health (2022, December 8). Retrieved June 21, 2023, from Centers for Disease Control and Prevention: <https://www.cdc.gov/about/sdoh/index.html>

Summit County Community Health Needs Assessment. Retrieved June 2023, from Summit County Public Health. [www.scph.org/sites/default/files/editor/RPT/SCPH%20CHA%202022-FINAL.pdf](http://www.scph.org/sites/default/files/editor/RPT/SCPH%20CHA%202022-FINAL.pdf)

World Health Organization (2021). Social determinants of health. Retrieved June 21, 2023, from World Health Organization: [https://www.who.int/health-topics/social-determinants-of-health#tab=tab\\_3](https://www.who.int/health-topics/social-determinants-of-health#tab=tab_3)

What is Mental Health? (2023, April 24). Retrieved June 21, 2023, from U.S. Department of Health and Human Services, MentalHealth.gov: <https://www.samhsa.gov/mental-health>



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