

2023-2025 Putnam County Community Health Improvement Plan

Partners for a Healthy Putnam County Release Date: December 15, 2022

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Introduction

During a meeting in August 2021, the Partners for a Healthy Putnam County determined the need for a comprehensive community health assessment to provide updated primary, secondary, qualitative and quantitative data regarding the health of our community. The Putnam County Health Department facilitated the process to conduct the community health assessment, determine the priorities of the community and develop an improvement plan.

The graphic below describes the timeline for completing the Mobilizing for Action through Planning and Partnership (MAPP) process, which includes the completion of the *2023-2025 Putnam County Community Health Improvement Plan* (CHIP).

With data available from the 2021-2022 Community Health Assessment, the Partners for a Healthy Putnam County, along with interested community members, came together to identify the strategic priorities for our community. Workgroups then met over a four-month period to develop the Action Plan to address the strategic priorities.

The MAPP process, data related to the identified strategic priorities and the Action Plan to address those priorities are provided in more detail in this plan.



The Partners

The 2023-2025 Putnam County Community Health Improvement Plan was developed by representatives from partnering agencies and community members within the county. The Partners for a Healthy Putnam County were actively involved in the community health assessment, prioritization of health needs in our community and the development of the action plan to address the identified needs. The Partners for a Healthy Putnam County include:

Putnam County Health Department- Kim Rieman, Health Commissioner, Sherri Recker, Bridget Fischer, Allison Rosebrock

Putnam County Job and Family Services- Suzy Wischmeyer

Putnam County Council on Aging- Jodi Warnecke, Pam Jones and Mary Maas

Pathways Counseling Center- Donna Konst and Kesha Scott

Law Enforcement- Sheriff Brian Siefker, Jake Macke (Ottawa), Chief Jim Gulker (Kalida), Chief Arnie Hardy (Continental)

Putnam County Family and Children First- Beth Tobe, Mary Ricker

Putnam County Community Improvement Corp.-Amy Sealts

Putnam County YMCA- Aaron Baumgartner

Mercy St. Rita's- Tyler Smith, Lisa Brady, Beth Kiene

Putnam County Board of Developmental Disabilities- Beth Hempfling

Leipsic Community Center- Dana Schnipke

Putnam County Educational Service Center- Dr. Jan Osborn, Gary Herman

Community Members- Lisa Langhals

Alcohol, Drug and Mental Health Services Board- Jennifer Horstman

Putnam County EMA- Brian Hilvers

Ottawa Senior Citizens Association- Sue Barnhart

Crime Victim Services- Katlin Shuherk

HHWP Community Action- Jeanne Wenzinger

Lima Memorial Hospital- Mike Swick

Blanchard Valley Health System- BJ Pasztor

Schools- Ashley Schulte (O-G schools), Audrey Beining (Ottawa Elementary), Jackie Fields

(Ottawa Elementary), Michelle Leach (Ottoville School)

Many of these partners participated in workgroups to develop the Action Plan for the Community Health Improvement Plan and have committed to continuing work to implement the plan.

The Process

OVER VIEW OF THE MAPP FRAMEWORK

The Partners for a Healthy Putnam County continue to work toward the vision of a healthy community by "promoting healthy and active lifestyles to enhance the quality of life in Putnam County". In efforts to achieve a healthy community, the Partners once again implemented the Mobilizing for Action through Planning and Partnership (MAPP) model to conduct the assessments, identify resources and complete the Community Health Improvement Plan (CHIP). The Putnam County Health Department led the Partners through the process.

The MAPP Framework is an evidence-based, community-driven tool developed by the Centers for Disease Control and Prevention (CDC) and the National Association for County and City Health Officials (NACCHO) that includes six phases:

- > Organize for Success/Partnership Development
- Visioning
- Four MAPP Assessments
- Identify Strategic Issues
- Formulate Goals and Strategies
- > Action Cycle

ORGANIZING AND VISIONING

To begin the MAPP process, the Partners for a Healthy Putnam County met in August 2021 to review the progress of the 2018-2020 Community Health Improvement Plan (CHIP). It was at this meeting that the need to conduct the MAPP process to update the community health assessment and the current CHIP were discussed. The Partners agreed that an update was needed and the Putnam County Health Department (PCHD) would facilitate the process and work collaboratively with partners and the community to update the Community Health Assessment and the CHIP.

The vision statement is the inspiration, or framework, for planning. The vision of "promoting active and healthy lifestyles to enhance the quality of life in Putnam County" provides direction for the Partners while developing and implementing the 2023-2025 Putnam County Community Health Improvement Plan.

FOUR MAPP ASSESSMENTS

In August 2021, a committee was formed to begin organizing and planning for the MAPP process, which included the four assessments described below:

- The Community Health Status Assessment collects quantitative information on health status, quality of life and risk factors.
- The Community Themes and Strengths Assessment identifies what is important to community members, how quality of life is perceived and what assets does the community have that can be used to improve community health.
- The Local Public Health System Assessment is completed using the National Public Health Performance Standards Local Instrument. This assessment measures how well the local public health system delivers the 10 Essential Public Health Services.

The Forces of Change Assessment identifies all the forces associated with the opportunities and threats that can affect the community and local public health system, either now or in the future. Forces can be trends, factors or events.

The four assessments The Partners used are described below. The MAPP assessments are an integral part of the MAPP process as shown in the diagram:



Community Health Status Assessment

How healthy is our community?

What does the health status of the community look like?

The Community Health Status Assessment was conducted in the Winter of 2021. It was determined that there was a need for updated primary data, therefore, the Partners contracted with an outside organization, the Center for Marketing and Opinion Research (CMOR), to conduct a community health survey of adults in Putnam County. The CHA Advisory Committee, a small workgroup of partners, met throughout the summer 2021 to determine questions and methodology to be used for the survey. This assessment includes both primary and secondary data. Below is a snapshot of some of the findings from the CHA.

- Nearly half, 48.0%, of residents had at least one day in the past 30 days that their mental health was not good.
- A quarter of residents, 24.6%, eat fresh fruits or vegetables 2 or more times a day.
- 63.2% of residents reported having at least 1 alcoholic drink in the past 30 days.
- 77% of residents are overweight or obese.
- 20.6% of residents reported having been abused.

Community Themes and Strengths Assessment

What is important to the community?

How is quality of life perceived in the community?

What assets does the community have that can be used to improve community health?

A combination of focus group discussions with a variety of groups in the community and key informant surveys was used to conduct the Community Themes and Strengths Assessment. In an effort to obtain a good picture of the health of the community from the viewpoint of our residents, focus group discussions were conducted with a number of different groups including: senior citizens, Head Start parents, food pantry participants, school guidance counselors, atrisk youth, P.A.R.T.Y. youth, parents of at-risk youth, elementary teachers, police chiefs, ministers, Family Children First Council, and Task Force for Youth members.

The groups considered the health of the community as areas in which Putnam County is strong, such as good schools, strong faith-based, family-oriented, friendly communities and service-providing agencies. Throughout the focus group process, several themes were also identified by most or all of the groups as concerns for Putnam County. Those themes include:

- Mental Health
- Substance Use and Abuse
- Access to resources in the community (Awareness)
- Lack of supportive services
- Isolation

A key informant survey was also completed as part of the Community Themes and Strengths Assessment. The survey was provided to healthcare providers, mental health providers and representatives of area businesses. These individuals were asked to respond to a series of questions relating to health issues in Putnam County. Some of the questions were more specific, relating to the results of the community survey that had been completed. This was done to gather a better understanding of the role of the key informants in helping to address particular health issues.

Similar themes as those found in the focus groups were also identified by the county's key informants. Some of the top health issues were:

- Substance abuse and addiction issues
- Healthy living and obesity
- Mental Health
- COVID-19 related issues

The key informants were also asked to provide suggestions for ways to address some of the issues. More education on the various concerns was a common recommendation provided by those surveyed. The key 19 informants also acknowledged barriers, such as transportation, awareness of what is available, cost, personal unwillingness to seek care/Social norms.

Local Public Health System Assessment

What are the activities, competencies, and capacities of the local public health system?

How are the 10 Essential Public Health Services being provided to the community?

In December 2021, the Putnam County Health Department, along with members from the Partners for a Healthy Putnam County, participated in the Local Public Health System Assessment (LPHSA) to evaluate the current public health system within the community of Putnam County. Due to inability to meet in person and the barriers meeting virtually often causes, it was determined that the LPHSA would be completed through a survey. Partners were asked to review the 2019 LPHSA summaries for each of the 10 Essential Public Health Services. They then indicated to what extent (not at all, a little, about the same, some, a great deal) they feel the scores from the LPHSA 2019 reflect the current functioning of the public health system for each Essential Service. To ensure that health equity and health disparities were considered, portions of the *Health Equity Supplement* to the MAPP process were used.

During the Local Public Health System Assessment survey, the participants were asked to identify existing community assets and resources that are available in the Putnam County community. This information was helpful when conducting a gap analysis.

The intention of the LPHSA is to provide the following:

- Measure and summarize the performance of the current public health system in Putnam County using nationally established performance standards and a methodology to conduct the assessment.
- Improve and/or establish connections with existing and new community partners to establish and strengthen collaborations that could contribute to improving the public health in Putnam County.
- Provide information for quality improvement of the public health system, identify priorities for the development of the community health improvement plan and provide input that may help with the development and/or implementation of the health department's strategic plan

Several model standards were identified as possible areas for improvement as determined by the LPHSA performance scores and prioritization. These areas include: Research/Innovations, Mobilize Partnership, Develop Policies/Plans, and Enforce laws.

Forces of Change Assessment

What is occurring or might occur that affects the health of the community or the local public health system?

What specific threats or opportunities are generated by these occurrences?

The Forces of Change Assessment was conducted in February 2022. The members of the Partners for a Healthy Putnam County were asked to answer the following two questions through Survey Monkey:

- In thinking about forces of change changes that are outside of your control what is occurring or might occur that affects the health of community or the local public health system?
- What specific threats or opportunities are generated by these occurrences?

Some of the forces, or changes out of our control, that were identified include:

- Aging Population
- Younger population leaving area
- Shifting work styles (internet/e-commerce)
- Medicare/Medicaid Reimbursement
- Lack of Grocery Stores
- Inflation
- Political Climate
- Governmental Assistance
- Workforce Shortage

Presenting the findings of MAPP assessments

After conducting the four MAPP assessments, the Partners met in May 2022 to release the findings of the data. A final report of the Community Health Status Assessment was presented at a public meeting on May 12, 2022. Members of the Partners for a Healthy Putnam County, stakeholders and community members were invited to attend. This data was valuable as the Partners determined the strategic priorities, goals, objectives and strategies for the Community Health Improvement Plan. The Community Health Status Assessment report is available on the Putnam County Health Department website at www.putnamhealth.com.

A breakdown of health issues of the population, related health disparities among the population, and identified populations with an inequitable share of poorer health outcomes is provided in the assessment. This data allowed for consideration of these issues as the priorities for the next community health improvement plan were determined.

Data was also provided by the 2021 Pride Survey that is conducted with youth in grades 6, 8, 10 and 12. This survey is conducted through the Putnam County Task Force for Youth, a committee of individuals and organizations that focuses on providing healthy alternatives for the youth of the county. The Pride Survey provided information about youth risky behaviors and data in regards to healthy lifestyle behaviors.

After sharing the information and data from all four the MAPP assessments, a prioritization meeting was also held in May 2022. Members of the Partners for a Healthy Putnam County and the community were invited to participate in this phase of the process. The data was once again reviewed and a summary of the themes identified through the MAPP assessments was provided to the participants to help with the prioritization process.

Identify Strategic Priorities

In May 2022, Partners met for a prioritization meeting to identify several key issues and themes. A summary of the four MAPP assessments was provided to help in identifying themes across the four assessments. A discussion regarding the impact of these issues and the effects on the population, especially those with health disparities and those that experience health inequity, occurred during this meeting.

After reviewing the community health assessment data (primary, secondary, qualitative and quantitative), several issues were identified as areas of concern for the health of Putnam County.

During the prioritization process, the group also considered the following:

- What is the seriousness of the issue?
- o Does the issue affect certain populations in our community?
- Will we be able to make an impact?
- Does the issue align with the state of Ohio's improvement plan (SHIP) and national priorities?

Using the nominal group technique, the group considered and ranked their top five identified issues to determine the priorities for the community. Once the voting was complete and after some discussion, it was decided to address three priorities in the *2023-2025 Community Health Improvement Plan*.

Three strategic priorities identified:

- Mental Health and Addiction
- Health Behaviors
- Community Conditions

To help with the identification of gaps and possible opportunities for improvement, the group then conducted an assessment of the existing assets and resources of the new priorities. *See page 16-17*.

Formulate Goals and Strategies

Workgroups were then formed to develop an Action Plan with goals, objectives and strategies for each of the strategic priorities. Evidence-based public health practices, policy, environmental and systems change, as well as the state and national priorities, were considered as the workgroups developed the Action Plan. Priorities in the State of Ohio's Health Improvement Plan (SHIP) that are linked to the Putnam County plan are identified in the Action Plan. National priorities from Healthy People 2030 were also considered during the development of the Action Plan. As the workgroups met to develop the Action Plan, health inequities and social determinants of health were considered in the planning.

Upon completion of this phase, the health department compiled the Action Plan from all of the priorities into the *2023-2025 Putnam County Community Health Improvement Plan* (CHIP). This plan is presented to the Partners, stakeholders and community members as a working document to address the needs of our community. Partners, stakeholders and community members are encouraged to take an active role in implementing the goals and strategies identified in this plan.

Action Cycle

Now that the 2023-2025 Putnam County Community Health Improvement Plan (CHIP) is complete, it is time to put the plan into practice. Transparency and communication is vital in this phase, as different individuals, agencies and organizations are all working together to successfully implement the plan. If there are existing committees or task forces already working to address some of the identified priorities, those groups will help to guide the implementation of this plan. If new committees are needed, they will be developed to address the needs.

Evaluation is a key part of the Action Cycle. It is important to know how well Partners are meeting the goals and objectives of the CHIP. Therefore, Partners workgroups will provide quarterly updates on the progress of CHIP strategies. The progress will be recorded and tracked in the CHIP Action Plan. These updates could be shared at a workgroup meeting, communicated via email or phone call conversation. Strategies may need revised or new strategies may be added based on a completed objective, an emerging health issue or a change in resources and assets. These changes will be captured in the CHIP action plan. At the end of a calendar year a summary report of the CHIP's progress will be created and shared with community partners, stakeholders and members.

Alignment with State and National Priorities

STATE OF OHIO HEALTH IMPROVEMENT PLAN (SHIP)

In the guidance from the Ohio Department of Health, local health partners are encouraged to collaborate to develop an improvement plan that aligns with Ohio's State Health Improvement Plan. The use of the MAPP Framework is also encouraged during the assessment and planning phases. The MAPP Framework was implemented in Putnam County as encouraged by the Ohio Department of Health and the National Association of County and City Health Officials (NACCHO).

Ohio's 2020-2022 State Health Improvement Plan (SHIP) is a tool to strengthen state and local efforts improve health, well-being, and economic vitality in Ohio. The SHIP identifies three priority factors and three priority health outcomes that affect the overall health and well-being of children, families, and adults of all ages.

The three priority factors are:

- Community Conditions
- Health Behaviors
- Access to care

The three priority health outcomes are:

- Mental Health and Addiction
- Chronic Disease
- Maternal and Infant Health

By focusing on these priority topics, the goal of the SHIP is that all Ohioans reach their full health potential.

To align with the SHIP, local health departments and partners are encouraged to take a leadership role by identifying at least one priority factor and at least one priority health outcome as part of the local CHIP. The selection of these priorities should be guided by the needs that are identified through data collection and analysis and chosen through a collaborative process. The local entity should also address health equity by identifying priority populations for objectives and selecting strategies likely to reduce disparities and inequities whenever possible.

Through the MAPP framework and process for developing the *2023-2025 Putnam County Community Health Improvement Plan*, the following SHIP priority factors, priority outcomes and indicators were selected for alignment with the state plan:

Priority Factors/ Outcomes	Ohio Priority Topic	Ohio Indicator Name	Putnam County CHIP Strategy
Mental Health and Addiction	Suicide	MHA3. Youth suicide deaths. Number of deaths due to suicide for youth, ages 8-17, per 100,000 population (ODH Vital Statistics) MHA4. Adult suicide deaths. Number of deaths due to suicide for adults, ages 18 and older, per 100,000 population (ODH Vital Statistics)	 School based prevention program Educate teachers about depression and suicide in youth
		MHA4. Adult suicide deaths. Number of deaths due to suicide for adults, ages 18 and older, per 100,000 population (ODH Vital Statistics)	 Implement awareness campaign
	Youth drug use	MHA5. Youth alcohol use. Percent of high school students who have used alcohol within the past 30 days (YRBS)	 Media campaign
Chronic Disease/ Health Behaviors	Nutrition	HB3. Youth fruit consumption. Percent of high school students who did not eat fruit or drink 100% fruit juices during past 7 days (YRBS) HB4. Youth vegetable consumption. Percent of high school students who did not eat vegetables (excluding french fries, fried potatoes or potato chips) during past 7	
		eat vegetables (excluding	

Priority Factors/ Outcomes	Ohio Priority Topic	Ohio Indicator Name	Putnam County CHIP Strategy
Chronic Disease/ Health Behaviors	Physical Activity	HB5. Child physical activity. Percent of children, ages 6 through 11, who are physically active at least 60 minutes per day (NSCH) HB6. Adult physical activity. Percent of adults, age 18 and older, reporting no leisure time physical activity (BRFSS) *Measurements of objectives differ from PC CHIP but increasing physical activity is the common factor	 Utilize school-based programs to increase activity Promote creation and use of free exercise opportunities in local parks, community centers, etc. Increase knowledge through media campaign and creation of a local resource guide Use of exercise prescriptions from healthcare provider
Community Conditions	Adverse Childhood Experiences	CC6: Percent of children, ages 0-17, who have experienced two or more adverse experiences (NSCH) – no target percentage identified	 resources media campaign School based prevention programming
		CC7: Number of screened-in reports of child abuse and/or neglect, per 1,000 children in the population** (SACWIS, via ODJFS) – no target percentage identified	 Adult empowerment and awareness campaign and programming at worksites and public sites

HEALTHY PEOPLE 2030

In order to align with national standards, the Partners also considered information from the Healthy People 2030. Healthy People 2030's overarching goals are to:

- Attain healthy, thriving lives and well-being free of preventable disease, disability, injury, and premature death.
- Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all.
- Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.
- Promote healthy development, healthy behaviors, and well-being across all life stages.
- Engage leadership, key constituents, and the public across multiple sectors to take action and design policies that improve the health and well-being of all.

To reach those goals, the Healthy People 2030 plan of action prioritizes setting national goals and measurable objectives to guide evidence-based policies, programs, and other actions to improve health and well-being. Putnam County will align with these national goals to improve health and well-being for people of all ages and the communities in which they live by utilizing evidence-based programs and policies that are replicable, scalable, and sustainable.

The following table describes the areas of the CHIP which align with the Healthy People 2030 objectives.

Healthy People 2030 Priority	Healthy People 2030 Objective	Healthy People 2030 Evidence Based Strategy	Putnam County CHIP Strategy
Health equity	Increase the proportion of people with substance use and mental health disorders who get treatment for both-SU- 01	Substance Abuse and Mental Health Services Administration's National Helpline Treatment for Alcohol Problems: Finding and Getting Help	 Support efforts of mental health providers to expand and create innovative services for the community
Social Determinants of Health	Reduce the proportion of adolescents who drank alcohol in the past month-SU-10	School based prevention program for alcohol misuse in young people Alcohol impaired driving mass media campaign	 Partner with agencies to promote campaign on Parents Who Host Lose the Most or similar campaign to raise awareness of underage drinking

Healthy People 2030 Priority	Healthy People 2030 Objective	Healthy People 2030 Evidence Based Strategy	Putnam County CHIP Strategy
Health equity Social Determinants of Health	Reduce suicide attempts by adolescents-MHMD-01	Depression and Suicide Risk in Children and Adolescents Screening Suicide Prevention campaign	 Explore different suicide based evidence prevention services to educate professionals such as teachers, coaches, community leaders to identify and refer youth Increase awareness of support services/skills for youth
Health Equity Social Determinants of Health	Increase vegetable consumption by people aged 2 years and older — NWS-07 Increase fruit consumption by people aged 2 years and over — NWS-06	Nutrition: Gardening Interventions to Increase Vegetable Consumption Among Children	 Promote garden initiatives – provide information on the startup of gardens at schools, nursing homes, or other community locations Promote use of produce exchange program
Health Equity	Reduce fall-related deaths among older adults — IVP-08	Preventing Falls: A Guide to Implementing Effective Community-Based Fall Prevention Programs	 Offer one additional evidence-based fall prevention program
Health Equity	Reduce the proportion of adults who do no physical activity in their free time – PA-01	Physical Activity: Social Support Interventions in Community Settings	 Promote creation of groups such as walking/running clubs or groups to conduct free exercise instruction in community parks
		Physical Activity: Built Environment Approaches Combining Transportation System Interventions with Land Use and Environmental Design	• Evaluate and complete first steps for planning a new walking or bike path in the county
Social Determinants of Health	Increase the proportion of adolescents who do enough aerobic physical activity — PA-06	Physical Activity: Classroom-based Physical Activity Break Interventions	 Continue use of GoNoodle in schools and promote usage in two schools that are underutilizing

Healthy People 2030 Priority	Healthy People 2030 Objective	Healthy People 2030 Evidence Based Strategy	Putnam County CHIP Strategy
Injury and Violence Prevention	Promote and strengthen policies and programs to prevent falls, especially among older adults	Build public awareness about preventing falls, promote fall prevention programs in home and community settings, and educate older adults on how to prevent falls	 Increase offerings of Matter of Balance classes to 4-6 each year, targeting outlying areas of the county Offer one additional evidence-based fall prevention program Increase awareness through Fall Prevention Awareness Day, Senior Expo, and promote Ohio Department of Aging's Steady U website
	Reduce sexual or physical adolescent dating violence – IVP- 18	Teach safe and healthy relationship skills Create protective environments	 Teach safe and healthy relationship skills to youth in the schools by delivering a primary prevention curriculum for interpersonal violence Work with schools to implement a safe reporting mechanism for students
	Reduce the number of young adults who report 3 or more adverse childhood experiences – IVP-D03 Strengthen policies and programs to prevent violence	Engage influential adults and peers	 Conduct a combined awareness campaign with community partners to raise awareness of the prevalence of violence in Putnam County Bystander empowerment and education on how to recognize and intervene when someone needs help Evaluate new evidence-based programs to that would benefit the community by preventing violence Engage with local businesses, schools, and community agencies to assist with implementation of zero tolerance
Social and community context	Increase the proportion of adults who talk to family or friends about their health – HC/HIT-R04	Increase the proportion of adults who report having social support	 Conduct a community campaign to educate the public on how to recognize and respond to victims of violence Improve Awareness of Supportive

	Mass media and social	Services available to households with
	media can be used to help	grandparents, extended family, or
	promote health and well-	friends providing custodial care to
	being	children

PUTNAM COUNTY ASSETS AND RESOURCES

The ratio of population to primary care physicians is higher in Putnam County than the state; however, 88% of residents identify one person or group that they think of as their primary health care provider. There are 3 places that provide mental health services in Putnam County. One has a psychiatrist on staff while the others have psychologists or licensed counselors only. While there are 9 dentists in the county, Putnam is in need of significantly more.

There are no registered hospitals located in Putnam County. Hospitals in surrounding areas include Blanchard Valley Hospital, Bluffton Hospital, Mercy Health, Lima Memorial Health System, ProMedica Defiance Regional Hospital, serve patients from Putnam County. However, there is Mercy Ambulatory Care and Lima Memorial Urgent Care in Putnam County.

There are 9 school districts in the county with a graduation rate higher than the state, 98.1% compared to 91.4%. Guidance counselors are located in each school to assist with student referrals for services. Even though there are no institutions of higher learning located in the county, there are several colleges located in adjacent counties and limitless on-line options.

There are fitness facilities, boutique specialty facilities, a YMCA, and a community center with an indoor track located in the county. Currently, more facilities are being constructed. Some schools also open their weight room to the public at designated hours and allow people to walk in the halls after school for indoor activity. There are organized youth and adult sporting activities at the facilities including volleyball, basketball, pickleball, and group fitness classes. There is also an outdoor park with play equipment located in each town in the county with several communities having organized Run Clubs.

Putnam County was ranked the second highest county in the state for residents with religious affiliation. There are over 40 churches located within Putnam County. Faith leaders are involved in coalitions and partnership with healthcare and social agencies to promote programming.

There are 4 food pantries, several food distribution sites for donated food including affiliation with the West Ohio Food Bank, WIC, Meals on Wheels, and weekend food programs associated with the schools along with school gardens.

There are numerous coalitions in the county to promote social and health programming for adults and youth. Key agencies involved in these coalitions include: Pathways Counseling Center, Community Action Coalition, Help Me Grow, Health Dept., Job & Family Services, Crime Victim Services, WIC, YMCA, ADAMHS Board, Leipsic Community Center, Head Start, Council on Aging, Mercy Health, Educational Service Center, OSU Extension, Law Enforcement representatives, community members, school representatives, and Area Agency on Aging.

The major employers in Putnam County include: Mars Inc., Kalida Manufacturing Inc., Pro-Tec Coating Company Inc., Progressive Stamping, Production Products, Inc. Unverferth Manufacturing, Ottawa-Glandorf Local Schools, and Whirlpool Inc.

The following section describes the three strategic priorities of the 2023-2025 Community Health Improvement Plan in more detail.

Priority Outcome: Decrease community drug dependency/abuse

Goal: Increase community awareness of behavioral health services and programs.

Objective: By December 31, 2025, Putnam County residents will report a 3% increased awareness of health services and options.

In 2021 CHA, 36.8% of people in the community know about health services and options.

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
		Responsible	ractor	
1. Improve Awareness of	January 2023	Pathways Counseling		
Services A. Educate community agencies on behavioral health services offered in	– December 2025	Center		
the county. • Research "No Wrong Door" or		Health Dept.		
similar programs to promote and build support to improve the way residents access		Crime Victim Services		
services in the community.Train community partners on		Task Force for		
 the chosen program Promote the program 		Youth		
throughout the county to businessesBusinesses adopting No Wrong Door policy		Friends of Mental Health		
B. Conduct a combined awareness		Prevention Coalition		
campaign with community partners to raise awareness of health messages and services available in Putnam		Mercy Health		
County: Contract with a marketing		Council on Aging		
company to create a communication plan		Probate Court		

Secure funding			
8		FCFC	
Implement campaign		FUFU	
Evaluate effectiveness of			
campaign by questions on			
presentation evaluation form			
and the reach of the campaign			
C. Create a prevention program and			
intervention guide for schools'			
personnel			
 Assess prevention programs for 			
youth in the county			
 Share the guide with schools' 			
personnel to increase			
awareness and connect			
students to needed prevention			
resources			
2. Increase Awareness of	January 2023		
Support Groups in Putnam	– December		
County and Surrounding	2025		
Areas			
 Assess and research needed 			
support groups in the county			
 Partner with community 			
agencies to promote support			
groups on social media			
 Provide information to the court 			
system for distribution			
3. Increase awareness of support	January 2023		
services available to older adults to	– December		
reduce isolation and loneliness.	2025		
 Implement an awareness 			
campaign on services available			
to older adults to stay			
connected within the			
community. (Example:			
Telephone Reassurance,			
-			

Friendly Visitor, We Thrive Together, etc. 4. Increase opportunities for social engagement and inclusion for older adult residents of the county in order to reduce social isolation and loneliness.	January 2023 – December 2025		
 Implement an awareness campaign to increase civic engagement and volunteerism. Conduct educational workshops in outlying areas of the county to promote social engagement and inclusion. (elder abuse, scams, dementia, evidenced-based programs, etc.) Promote programs for staying active and involved, (Fitness programs, evidenced-based programs, senior center activities, etc.) Promote volunteer opportunities to keep older adult residents active and involved in the community. (United Way Volunteer Program, RSVP, evidenced-based program coaches, senior center activities, Medical Reserve Corp., etc.) 			

Priority Outcome: Decrease community drug dependency/abuse

Goal: Reduce the percentage of youth who engage in excessive drinking

Objective: By December 31, 2025, decrease the percentage of youth who engage in excessive drinking by 3%. According to the PRIDE survey in 2021, 29.7% of 12th grade students in high school reported drinking alcohol in the past 30 days.

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
 Increase awareness of excessive drinking Partner with faith-based partners and schools to: Support PARTY group in campaign targeting youth using data from the Pride survey and concerns in the schools Partner with Task Force for Youth to develop media messages for school newsletters and announcements Outreach and share behavioral health resources with faith-based partners Partner with agencies to promote campaign on Parents Who Host Lose the Most or similar campaign to raise awareness of underage drinking 	January 2023 – December 2025	PARTY group Task force for Youth Pathways PCHD Opiate Task Force Mercy Health	MHA5. Youth alcohol use	

Priority Outcome: *Decrease community drug dependency/abuse*

Goal: Increase access to treatment and recovery services

Objective: By December 31, 2025, increase awareness of treatment and recovery services available in Putnam County and inpatient services available outside the county by 5%.

In the 2021 CHA, 49.5% of residents reported being aware of drug and alcohol addiction treatment.

In the 2021 CHA, 49.5% of residents reporte	1	Status		
Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
		Responsible	Tactor	
1. Increase awareness of mental health and recovery services within the county	January 2023 – December 2025	Pathways		
A. Identify barriers to access to		Crime Victim Services		
services		Law enforcement		
 Conduct a multi-component 				
community campaign to raise awareness of services offered and how to overcome barriers within		Mercy Health		
 Putnam County: Inform agencies and businesses of the services 		Crime Victim Services		
Determine effective strategies for		ADAMHS Board Health		
targeted messagingDetermine method and timing of		Dept.		
campaign				
Implement campaign		PCCOA		
Evaluate effectiveness of campaign the number of people reached				
B. Have a representative from the				
CHIP group partake in the Putnam County transportation coalition				
2.Support efforts of mental health				
providers to expand and create	January 2023 –			
innovative services for the community	December 2025			

• Re	efer individuals seeking mental		
he	ealth services to Open Access hours		
at	t Pathways Counseling Center		
• Re	efer individuals seeking recovery		
ho	ousing after drug rehabilitation to		
Pa	athways Counseling Center		
• Re	efer individuals needing medication		
as	ssisted drug rehabilitation to		
ps	sychiatrist for services		

Priority Outcome: *Reduce Depression and Suicide*

Goal: *Reduce thoughts of attempting suicide*

Objective: By December 31, 2025, the number of attempted suicides will decrease 10% among Putnam County residents. According to the PRIDE survey in 2021, 12% of youth seriously thought about attempting suicide in the past 12 month. 2% of adults thought about committing suicide according to the 2021 Community Health Survey. In 2021, there were 49 suicide threats 911 calls and 3 suicide attempt calls.

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
 Explore different suicide-based evidence prevention services to educate professionals such as teachers, coaches, community leaders to identify and refer youth Explore funding opportunities for QPR or similar assessment Investigate, implement, suicide-based evidence prevention services/assessment in schools Present/train teachers, coaches, faith- based leaders Evaluate program/assessment 	January 2023 – December 2025	Pathways ADAMHS Board Mercy Health PCHD PCCOA	MHA3. Youth suicide deaths MHA4. Adult suicide deaths	

 2. Increase awareness of support services/skills for youth Investigate programs/interventions that teach resilience/coping skills in youth Present program/interventions in Putnam County Schools or extracurriculars Research and promote an awareness program of support services such as crisis text line, 988, or "Be Present" Implement awareness regarding suicide 	January 2023 – December 2025		
 and depression in older adults. Implement awareness campaign Provide training to older adults, their caregivers, and gatekeepers such as Physicians, Clergy, Council on Aging, Home Care Services, Long-Term care and Assisted Living Facilities Promote Annual Medicare Wellness Visit for Depression Screening. Explore the possibility of offering depression screenings and counseling services in the client's home or at the Council on Aging to reduce the stigma. Promote transportation services available for accessing counseling services. 	January 2023 – December 2025		

Priority Outcome: Decrease Obesity

Goal: Increase consumption of Fruits and Vegetables

Objective: By December 31, 2025, the percentage of adults who report consuming 5 or more servings of fruits and vegetables per day will increase to 8% and the percentage of youth who report consuming 5 or more servings per day will increase to 15%.

In 2021, 3.2% of adults reported consuming fruits and vegetables 5 or more times per day. The American Cancer Society recommends that adults eat at least 2 ½ cups (5 servings) of fruits and vegetables per day to reduce the risk of cancer and to maintain good health. In 2021, 11% of Putnam County students in grades 6, 8, 10 and 12 reported eating 5 or more servings of fruits and vegetables each day. (2021 Pride Survey).

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
 1. Improve Access A. Partner with at least two food pantries in Putnam County to: Encourage food drives of fruits and vegetables to have distributed through food pantries Determine alternative access for those with no transportation and unable to go to the food pantries (church volunteers deliver food, use of TLCC box truck, Council on Aging deliver to seniors) B. Work with partner organizations to develop and/or promote produce exchange programs at two locations 	January 2023 – December 2025	Putnam Co Health Dept The Leipsic Community Center Council on Aging Putnam Co Health Dept The Leipsic Community Center	HB3. Youth fruit consumption HB4. Youth vegetable consumption	
locations C. Work with at least one local agency, workplace, or school to		Mercy Health		

 develop a healthier food options for concessions policy D. Partner with healthcare community to: Screen for food insecurity and send eligible patients home with a "green prescription" and a "green box" 		Putnam Co Health Dept The Leipsic Community Center	
2. Increase Knowledge			
 A. Partner with school districts to: Provide nutrition education to include with weekend food bags at least once per month in two schools 	January 2023 – December 2025	All Agencies	
B. Partner with community			
 organizations to: Provide healthy recipes for those that use area food pantries Utilize social media platforms to educate on nutrition Promote garden initiatives – provide information on the startup of gardens at schools, nursing homes, 		School garden champions PCHD	
or other community locations C. Survey two workplaces in the county about availability of wellness benefits or incentives. Encourage		OSU Extension Office	

promotion of wellness incentives already in place or creation of benefits or incentives.			
 3. Improve Skills A. Partner with community organizations to: Conduct at least four "Cooking Matters" classes Conduct at least two "Cooking Matters for Teens" classes Provide two "Mini Cooking Matters" classes 	January 2023 – December 2025		

Priority Outcome: *Decrease Obesity*

Goal: Identify and promote opportunities for physical activity

Objective: By December 31, 2025, the number of adults who did not exercise at all in the past month will decrease to 22%. The number of youths who reported not being physically active (at least 60 minutes per day) in the last 7 days will decrease to 10%.

In 2021, 25.5% of adults reported not exercising at all in the past month. 41.9% of those who reported not have exercised in the past month had an income of under \$25,000.

In 2021, 12.1% of Putnam County students in grades 6, 8, 10, and 12 reported not being physically active (for 60 or more minutes) at all in the last 7 days. (2021 Pride Survey).

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
1. Increase				
 Opportunities/Access A. Partner with community organizations and schools to: Continue use of GoNoodle in schools and promote usage in two schools that are underutilizing Promote creation of groups such as walking/running clubs or groups to conduct free exercise instruction in community parks Offer Tai Chi classes Evaluate and complete first steps for planning a new walking or bike path in the county 	January 2023 – December 2025	Mercy Health YMCA Village Committees (Cultural Committee)		

	[
2. Increase Knowledge	January 2023	YMCA	
A. Partner with community	 December 	Putnam Co Health	
organizations and schools to:	2025	Dept	
 Utilize social media 		Live Well Physical	
platforms to share		Therapy LLC	
healthier lifestyle			
success stories from			
various age groups (ie			
CDC Move More)			
including what their			
goals and activities			
were.		Live Well Physical	
		Therapy LLC	
B. Partner with healthcare community			
to:			
 Create an electronic 			
resource guide with			
information for patients on		Mercy Health	
local therapists, fitness			
centers, nutrition			
counselors, etc. to be			
distributed to healthcare			
providers.			
 Promote the use of 			
"prescriptions" for			
physical activity. At			
least one physician			
office will participate.			

Priority Outcome: Decrease Falls Among Seniors

Goal: *Promote activity among those age 65 and older*

Objective: By December 31, 2025, the number of adults who fall on same level from slipping, tripping, and stumbling will decrease to 45.

In 2020, 59 falls were reported to be from slipping, tripping and stumbling. 92% of those were ages 70 and older. (Trauma Registry 2020)

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status
 1. Partner with organizations A. Provide Matter of Balance classes Train 3-5 lay leaders to teach the Matter of Balance class Increase offerings of Matter of Balance classes to 4-6 each year, targeting outlying areas of the county Promote classes through the medical community by "writing prescriptions" for fall prevention classes 	January 2023 – December 2025	Putnam County Health Dept Putnam County Council on Aging		
 2. Awareness efforts Fall Prevention Awareness Day Senior Expo Promote Ohio Department of Aging's Steady U website 	January 2023 – December 2025	Putnam County Health Dept Putnam County Council on Aging Ottawa Senior Center		
 3. Promote activity for older adults A. Offer one additional evidence- based fall prevention program 	January 2023 – December 2025	Putnam County Council on Aging Putnam County Health Dept YMCA		

Priority Outcome: *Decrease interpersonal violence*

Goal: Increase awareness of violence prevalence in the community

Objective: By December 31, 2025, the percentage of adults who report awareness of violence as a public health issue in our community will increase from 16.7% in 2021 to 20%.

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status update
1. Improve Awareness of Interpersonal	January 2023	Crime Victim	Community	
 Violence & Adverse Childhood Experiences A. Conduct a combined awareness campaign with community partners to raise awareness of health messages and services including the prevalence of violence in Putnam County Contract with a marketing company to create a communication plan Secure funding Assess agency and worksite willingness to put messages on social media and/or have presentation to staff Implement campaign Develop presentation for worksites and community groups, schools, faith leaders Evaluate effectiveness of campaign by questions on presentation evaluation form and the reach of the campaign 	– December 2025	Services Health Dept. HHWP Council on Aging	conditions: ACEs; violence prevention and crime deterrence	

Priority Topic: Community Conditions Action Plan								
Priority Outcome: Prevent interpersona	l violence							
Goal: Influence youth attitudes and beh	Goal: Influence youth attitudes and behaviors which result in a decrease in risk factors and an increase in							
protective factors related to interpersona	l violence							
Objective: By December 31, 2025, even	Objective: By December 31, 2025, every school in the county will be offered violence prevention programming.							
Strategies	Timeline	Person/Agency	ODH priority	Status update				
		Responsible	factor					
 Teach safe and healthy relationship skills in the schools A. Deliver a primary prevention curriculum for interpersonal violence Healthy and unhealthy relationship characteristics Boundary setting Asking for and receiving consent 	January 2023 – December 2025	Crime Victim Services Health Dept. HHWP Council on Aging	Community conditions: ACEs; Parenting, mentorship, and school based prevention					
 2. Bystander empowerment and education A. Deliver an educational program for adults in the workforce How to recognize and intervene when someone needs help 	January 2023 – December 2025							

Priority Outcome: *Decrease interpersonal violence*

Goal: Engage influential adults to create a protective environment

Objective: By December 31, 2025, the percentage of adults who report improved communication skills regarding interpersonal violence victims after attending educational presentation will be at least 50%.

Strategies	Timeline	Person/Agency	ODH priority	Status update
		Responsible	factor	
 Influence attitudes and behaviors that result in a decrease in social norms which accept violence in relationships A. Conduct a community campaign to educate the public on how to recognize and respond to victims of violence Research evidence based programs and/or best practices on communication techniques to trauma victims i.e. Bystander empowerment and education Incorporate messaging education in the presentation for worksites, community groups, and faith community leaders Determine method and timing of campaign Implement campaign Evaluate effectiveness of campaign by questions on presentation evaluation form 	January 2023 – December 2025	Crime Victim Services Health Dept. HHWP Council on Aging		
 2. Evaluate new programs or services that would benefit the community A. Search for evidence based programs being implemented for rural areas that may be applicable and beneficial to Putnam County, i.e. Handle with Care program, No Wrong Door, anonymous student reporting in schools 	January 2023 – December 2025			

Priority Outcome: *Decrease interpersonal violence*

Goal: Strengthen policies and programs to prevent violence

Objective: By December 31, 2025, at least one worksite, school, or community agency will adopt a policy prohibiting all types of violence on-site

Strategies	Timeline	Person/Agency Responsible	ODH priority factor	Status update
		I		
 Engage with local businesses, schools, and community agencies to assist with implementation of zero tolerance violence policy A. Assess existing policies regarding violence on-site including verbal, physical, sexual, emotional abuse B. Target or prioritize working with businesses that have limited to no policy. Would also assist businesses with strengthening existing policy C. Work with leadership at worksites to develop and implement the policy 	January 2023 – December 2025	Crime Victim Services Health Dept. HHWP Council on Aging		