

COMMUNITY HEALTH PLANNING FOR AUSTIN/TRAVIS COUNTY

Community Health Assessment (CHA)/ Community Health Improvement Plan (CHIP)

Austin/Travis County Food Policy Board Monday May 13th, 6:00 PM Street Jones Building

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Ascension

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The University of Texas at Austin Dell Medical School

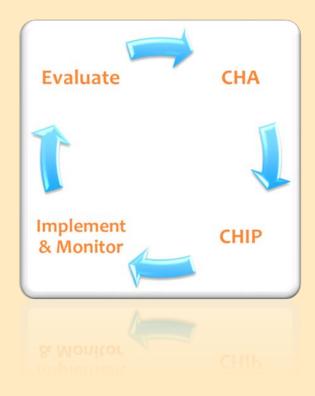


Health | School of Public Health AustinRegimalizations

III Integral Care

Community Health Planning Cycle

- Community Health Planning is an iterative process which includes compiling a Community Health Assessment (CHA) and a Community Health Improvement Plan (CHIP)
- CHA/CHIP Stages (5-year cycle)
 - Conduct and finalize the CHA
 - Develop the CHIP
 - Implement and monitor the CHIP
 - Evaluate the CHA/CHIP cycle
 - Repeat



CHIP Year 1 Implementation Phase

Four Priority Areas and Workgroups

- Access to Care
- Chronic Disease
- Sexual Health
- Mental and Behavioral Health
- Year 1 Action Plan
 - Finalized as of April 2019
 - Currently in Y1 Implementation Phase:
 - March 2019 February 2020
 - Workgroups have held their first meetings

CHA/CHIP AND HEALTHY FOOD ACCESS

Chronic Disease Workgroup

CD Workgroup Chairs:

- Joel Gross, It's Time Texas
- Jill Habegger-Cain, COA Parks and Recreation Dept.
- CD Workgroup Y1 Objectives
 - Objective 2.1: Decrease the % of people who have risk factors leading to chronic disease by 10% by 2023
 - Objective 2.5: By 2023, increase by 5% the number of safe, accessible, equitable, and culturally competent assets and opportunities for healthy food and physical activity. [Built Environment/Note: Healthy Food Access is being addressed by the Food Policy Board workgroup]

CHIP Chronic Disease Y1 Strategies

Priority Area 2: Chronic Disease

Goal 2: Prevent and reduce the occurrence and severity of chronic disease through collaborative approaches to health that create environments that support, protect, and improve the well-being of all communities

Year 1 Objectives	Voerfeureregies
Objective 2.1	2.1.1 Offer regular, free Community Fitness and "Healthy Living" classes (i.e. fitness, nutrition, etc.) at
Decrease the % of people who have risk ectors	convenient times and diverse locations to reach target communities. Ensure that programming is
leading to chronic disease by 10% by 2023.	culturally and ling initially appropriate.
	2.1.4 Engage worksites, education only childhood education and a indeveloping comprehensive
	policies and programs that promote healthy nutrition, physical activity, tobacco free campus, and
	Mother Friendly worksites.
Objective 2.5	2.5.3 Utilize community member input to improve existing data or assets and opportunities available for
By 2023, increase by 5% the number of safe,	physical activity (e.g., urban gardens, community gardens, green space, trails, parks, etc.) and
accessible, equitable, and culturally competent	increase access and awareness of these sites.
assets and opportunities for healthy food and	2.5.7 Advocate for and support ongoing efforts (e.g. Vision Zero Action Plan) to develop and enhance
physical activity.	safe, multimodal transportation options across the community, paying particular attention to
	efforts that increase healthy food access and opportunities for physical activity. Ensure that plans
	and development take into consideration issues of equity.

Possible Collaboration

- Chronic Disease Workgroup focus has shifted to physical activity to avoid duplication of efforts with Healthy Food Access. [See Strategy]
- Greater capacity for collaboration:
 - CHIP Chronic Disease Representatives at Healthy Food Access workgroup meetings
 - Chronic disease lens/target at Healthy Food Access workgroup meetings
 - Continuous communication and Healthy Food Access updates at CHIP Chronic Disease workgroup meetings.
 - Suggestions welcome...

THANK YOU