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The CHIP Steering Committee of Pinal County embraces the following Vision and Values

**PCPHSD Mission**
To provide disease prevention, health promotion and nutrition services to the residents of Pinal County so they can live healthy and productive lives

**CHIP Vision**
To be the leading resource in the community to enhance connectivity and access for all in the quest for health improvement and equity

**Values**
- Promote a healthy and sustainable community, inclusive of all
- Serve as a hub to promote growth and connectivity of community resources
- Ensure ready access and high-quality customer service to all community members
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Executive Summary

The Pinal County Community Health Steering Committee is pleased to present the updated 2018 Community Health Improvement Plan (CHIP) to the county residents, community organizations, and local public health system partners.

Pinal County Public Health Services District has conducted this comprehensive strategic planning process following guidance from the Public Health Accreditation Board (PHAB) and utilizing the “Mobilizing for Action through Planning and Partnerships (MAPP)” framework. The first step in this process was to conduct a Community Health Needs Assessment (CHNA), which collected both qualitative and quantitative data as well as primary and secondary data on perceived health and community strengths and areas for improvement from the community and from the Local Public Health System.

The next phase is the development of the Community Health Improvement Plan. The CHIP addresses the needs of the citizens within the county. This plan should be used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. A Community Health Improvement Plan is critical for developing policies and defining actions to target efforts that promote health.

Goals and objectives relating to the priority areas as well as suggested strategies, barriers, and community resources comprise the health improvement plan. The Pinal County CHIP Steering Committee has identified a partnership of individuals and organizations to take responsibility and become involved in the implementation of strategies outlined in the CHIP. The CHIP Steering Committee has also identified measurable health outcomes to monitor the progress of implementing the proposed strategies.

The next steps are to continually monitor the progress in implementing the Community Health Improvement Plan in collaboration with stakeholders and partners. The document shall remain fluid document, with ongoing revisions based on evaluation results, newly developing or identified health issues, and changing resources.

Residents and community groups are encouraged to join the CHIP process as it enters the Action Phase. For more information, please refer to The Path Ahead on page 27 of this document. By collaborating on priority health issues, local residents and community organizations will exhibit their deep commitment towards ensuring Pinal County is a safe and healthy place to live and work.
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Pinal County CHNA/CHIP Steering Committee

Throughout the course of the planning timeline, many key stakeholders have been engaged to participate in contributing and reviewing data, joint priority setting, and development of metrics.

Core Committee Membership:
- Banner Health
- Pinal County Public Health Services District
- Sun Life Family Health Center

Additional Participation:
- Local Hospitals
  - Banner Casa Grande Medical Center
  - Banner Ironwood/Goldfield Medical Center
- Business Community
  - Casa Grande Chamber of Commerce
- Educational Institutions
  - University of Arizona – Pinal County Cooperative Extension
  - Central AZ College
  - Stanfield Elementary School
  - Eloy Elementary School District
  - Casa Grande Elementary School District
- Community Health
  - Sun Life Family Health Center
- Public Health
  - Pinal County Public Health Services District
    - CSA/Finance
    - Clinical/Nursing
    - Community Health
    - Environmental Health
    - Health Officer
    - Infectious Disease and Epidemiology
    - Nutrition/WIC
    - Public Health Emergency Preparedness and Response
- Private Health Care Foundation
  - Vitalyst Health Foundation
  - Government Officials
  - Pinal County Board of Supervisors
o City of Casa Grande, Mayor
o City Council, Casa Grande

❖ Social Services
  o United Way
  o GVAHEC at Empowerment Systems
  o Against Abuse, Inc.
  o Pinal Gila Community Child Services

❖ Mental Health Substance Abuse Coalition
  o Coolidge Youth Coalition
  o Casa Grande Alliance
The CHIP Process

In the spring of 2017, Pinal County Public Health Services District coordinated the organization of a CHNA/CHIP Steering Committee to oversee the review and revision of the Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP).

After reviewing the models/guidance available from the National Association of County & City Health Officials (NACCHO) and the Public Health Accreditation Board (PHAB), it was determined that the most comprehensive model available at the time was the Mobilizing for Action through Planning and Partnerships (MAPP). The MAPP is a strategic approach to community health improvement. This tool helps communities improve health and quality of life through community-wide and community-driven strategic planning. Through MAPP, communities seek to achieve optimal health by identifying and using their resources wisely, taking into account their unique circumstances and needs, and forming effective partnerships for strategic action. The MAPP tools can be easily adaptable to the needs of the County in the development and implementation of a Community Health Needs Assessment and Community Health Improvement Plan.

The Steering Committee followed the MAPP structure to engage collaboration with individuals, local partners and organizations, and the local public health system. A community health needs assessment is a collaborative process of collecting and analyzing data and information for use in educating and mobilizing communities, developing priorities, garnering resources, and planning actions to improve the population’s health.

The MAPP framework identified the following assessments:

- Community Themes and Strengths
- Local Public Health System Assessment
- Community Health Status Assessment
- Forces of Change Assessment

PCPHSD used a mixed methods approach to collecting data for the CHNA. A combination of primary and secondary data, surveys, and group discussions were used. All of the data was compiled into the Community Health Needs Assessment, which was then shared with the entire community. The Steering Committee then moved towards the development of a Community Health Improvement Plan. The CHIP addresses the needs of the citizens within the county. This plan should be used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. A Community Health Improvement Plan is critical for developing policies and defining actions to target efforts that promote health.

The Community Health Improvement Plan development began with a comprehensive review of the Community Health Assessment and related data. A Joint Priority Setting Meeting was conducted on March 17, 2017 to review this data and key findings, and to discuss current public health issues in Pinal
County and identify the community’s priority needs. Participants voted and selected the top three health priority areas for Pinal County.

- Physical Activity & Nutrition
- Substance Use and Dependency
- Mental Health

Subsequent meetings were held with the Community-wide Steering Committee on October 24, 2017 to sign the Pinal 2017 Charter and begin discussing key performance measures for the CHIP. PCPHSD Leadership Meetings were held on December 12, 2017 to review the draft CHNA and complete some of the MAPP assessments, and to continue discussing key performance measures for the CHIP, and on February 22, 2018 to develop concrete metrics for each of the three priority areas. These metrics were presented to the Community-wide Steering Committee on March 23, 2018 and refined for inclusion in the CHIP. Refer to Appendix A for all meeting agendas and sign in sheets.

With the presentation of the CHIP to the community, the Action Phase of the MAPP process begins. Interventions are likely to be multi-level, reaching the population through multiple channels, as well as multi-faceted, with behavioral, social and environmental aspects addressed for greater effectiveness. The Action Phase is projected to last three years, at which time progress toward objectives will be reported to the community. Since health needs are constantly emerging, the cyclical nature of the MAPP process allows the periodic identification of new priorities and the realignment of activities and resources to address them.
Joint Priority Setting

Pinal County Public Health, in partnership with Banner Health and Sun Life Family Health Centers, facilitated a Joint Priority Setting meeting in which representatives of community organizations were brought in for an interactive workshop to determine joint health priorities for the Community Health Needs Assessment. Upon reviewing the county demographic information, access to care indicators, mortality and morbidity statistics, as well as community health surveys and focus groups conducted by Sun Life Family Health Center, the CHNA partners developed a list of 10 proposed health priority areas for the county, shown in Figure 11.

Top 10 Proposed Health Priorities

During the Joint Priority Setting meeting, CHNA partners as well as community organizations engaged in interactive presentations and facilitated dialogue to come to consensus on the three priority areas based on the following criteria:

1. Magnitude and scope of problem
2. Increasing or decreasing data trends
3. Health disparities or inequality
4. Is it a Winnable Battle?

The results of the joint priority setting exercise are summarized in Figure 12, with Physical Activity and Nutrition, Mental Health, and Substance Abuse selected as the priority focus areas. Physical Activity and Nutrition was selected by 68% of exercise participants as the top health priority area for the county.
Figure 2: Results of the Joint Priority Setting exercise
Physical Activity and Nutrition

Physical Activity and Nutrition was identified as one of top three health issues facing Pinal County. The Center for Disease Control and Prevention (CDC) Division of Nutrition, Physical Activity, and Obesity (DNPAO) utilizes Body Mass Index (BMI), which is a number calculated from a person's weight and height, as a reliable indicator of body fatness for most people and is used to screen for weight categories that may lead to health problems. In adults, a BMI score of 25.0-29.9 is deemed overweight, and 30.0 and above is obese. From County Health Rankings in 2017, 32% of adults were reported as obese, surpassing the State of Arizona which reported 26%.

By focusing on improving nutrition and increasing physical activity, the county may reduce overweight and obesity, and improve the overall health of the community. From County Health Rankings in 2017, 25% of Pinal County adults aged 20 and over reported they were physically inactive (spent no leisure time conducting physical activity). The issue of obesity, focusing on nutrition and physical activity, is aligned with both state and national priorities. One of the health outcomes listed in the “Arizona’s Winnable Battles” from the Arizona Department of Health Services Strategic Map: 2014-2018 is to “Promote Nutrition and Physical Activity to Reduce Obesity.” In the Health People 2020 Report released by the U.S. Department of Health and Human Services, two of the key topic areas are: Nutrition and Weight Status, and Physical Activity.

Healthy People 2020: Nutrition and Weight Status
The Nutrition and Weight Status objectives for Healthy People 2020 reflect strong science supporting the health benefits of eating a healthful diet and maintaining a healthy body weight. The objectives also emphasize that efforts to change diet and weight should address individual behaviors, as well as the policies and environments that support these behaviors in settings such as schools, worksites, health care organizations, and communities. Americans with a healthful diet:

- Consume a variety of nutrient-dense foods within and across the food groups, especially whole grains, fruits, vegetables, low-fat or fat-free milk or milk products, and lean meats and other protein sources
- Limit the intake of saturated and trans fats, cholesterol, added sugars, sodium (salt), and alcohol
- Limit caloric intake to meet caloric needs

Why Are Nutrition and Weight Status Important?
Diet and body weight are related to health status. Good nutrition is important to the growth and development of children. A healthful diet also helps Americans reduce their risks for many health conditions, including:

- Overweight and obesity
PUBLIC HEALTH PRIORITY ISSUES

ISSUE ONE: Obesity – Nutrition and Physical Activity

- Malnutrition
- Iron-deficiency anemia
- Heart disease
- High blood pressure
- Dyslipidemia (poor lipid profiles)
- Type 2 diabetes
- Osteoporosis
- Oral disease
- Constipation
- Diverticular disease
- Some cancers

Individuals who are at a healthy weight are less likely to:

- Develop chronic disease risk factors, such as high blood pressure and dyslipidemia
- Develop chronic diseases, such as type 2 diabetes, heart disease, osteoarthritis, and some cancers
- Experience complications during pregnancy
- Die at an earlier age

Nutrition and Weight Status in Pinal County

Discussions about the root causes of obesity in Pinal County pertained to access to fruits, vegetables, and healthy food options. The 2017 County Health Rankings Report scored Pinal County’s food environment index measure at 7.3, which is lower than the national average of 8.4. The Food Environment Index relies on two indicators: first, limited access to healthy food, which estimates the percentage of the population that is low income and does not live close to a grocery store. Living close to a grocery store is defined differently in rural and nonrural areas; in rural areas, it means living less than 10 miles from a grocery store whereas in nonrural areas, it means less than 1 mile.
The 2016 Sun Life community health survey asked participants to evaluate Pinal County residents’ access to affordable fresh fruits and vegetables in the communities where they live. 48% of respondents indicated (Question 11a) that they were “Always” able to find fresh fruits and vegetables in their neighborhood. The follow up question (11 b) asked respondents how often they were able to find “affordable” fresh fruits and vegetables in their neighborhood. Only 21.9% indicated they “Always” found affordable fresh fruits and vegetables in their neighborhood. According to sources referenced in the 2017 Pinal County Health Rankings Report, not having access to healthy food options is related to negative health outcomes such as weight-gain and premature mortality.

Healthy People 2020: Physical Activity

The Physical Activity objectives for Healthy People 2020 reflect the strong state of the science supporting the health benefits of regular physical activity among youth and adults. Regular physical activity includes participation in moderate and vigorous physical activities and muscle-strengthening activities.

More than 80 percent of adults do not meet the guidelines for both aerobic and muscle-strengthening activities. Similarly, more than 80 percent of adolescents do not do enough aerobic physical activity to meet the guidelines for youth. Working together to meet Healthy People 2020 targets via a multidisciplinary approach is critical to increasing the levels of physical activity and improving health in the United States.

The Physical Activity objectives for 2020 highlight how physical activity levels are positively affected by:

- Structural environments, such as the availability of sidewalks, bike lanes, trails, and parks
- Legislative policies that improve access to facilities that support physical activity

Why Is Physical Activity Important?

Regular physical activity can improve the health and quality of life of Americans of all ages, regardless of the presence of a chronic disease or disability. Among adults and older adults, physical activity can lower the risk of:

- Early death
- Coronary heart disease
- Stroke
- High blood pressure
- Type 2 diabetes
- Breast and colon cancer
- Falls
Depression

Among children and adolescents, physical activity can:

- Improve bone health.
- Improve cardiorespiratory and muscular fitness.
- Decrease levels of body fat.
- Reduce symptoms of depression.

For people who are inactive, even small increases in physical activity are associated with health benefits.

Please see below for heart recommendations from the American Heart Association.
Pinal County trails both state and national trends for obesity and physical activity\(^1\). Food insecurity is an issue for all Arizonans, with state trends exceeding national trends. Pinal county has a lower food insecurity level than most Arizona counties at 14.7%. Nearly 1 in 4 children in Pinal County is food insecure, but the rate has declined over time.

Community Partners identified the following areas where efforts should be focused around Physical Activity and Nutrition:

1. **Health Care/Employee Health**
   - Strengthening partnerships to maximize impacts
   - WIC and food assistance program education and outreach
   - Develop a nutrition program
   - Cooking demos and healthy eating classes with a PCP Rx

2. **Community Design**
   - Improve infrastructure such as sidewalks, parks, and recreation
   - Incorporate walking, hiking and biking trails in city/county planning
   - Increase Farmers Markets, community or neighborhood gardens

3. **Schools**
   - Implement policies such as recess and access to healthy food/snacks
   - Improve safe walking and bike routes to school
   - K-12 health education curriculum

The following were also identified as activities and efforts which partner organizations are already engaged around Physical Activity and Nutrition:

- K-12 health education provided by UANN/Pinal County
- UANN gardening workshops for youth and adults
- Building a Community Center
- Diabetes education program
- CDSMP classes (Stanford model)
- Market on the Move
- WIC nutrition education
- Casa Grande Parks & Rec Let’s Move Coalition
- Educate youth athletes about nutrition and healthy behaviors
- Yearly fun run/walk

\(^1\) RWJF County Health Rankings, [http://www.countyhealthrankings.org](http://www.countyhealthrankings.org)
### Public Health Priority Issues

**Issue One: Obesity – Nutrition and Physical Activity**

- Health care workforce education and training
- CHW certificate training program
- Sponsoring Get Out and Play Day events
- CG chamber help get info on programs out to the business community

#### Priority Area 1: Physical Activity & Nutrition

**Goal 1: Decrease obesity rates in Pinal County based on Body Mass Index (BMI)**

**Performance Measures:**

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Indicator</th>
<th>Source(s)</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collect data collaboratively to get a better snapshot of Body Mass Index (BMI) in Pinal County</td>
<td>Number of submissions per entity, de-identified including age, gender, height/weight, and zip code (target 100/entity)</td>
<td>PCPHSD WIC, Banner, Sun Life</td>
<td>Quarterly</td>
</tr>
</tbody>
</table>

**Goal 2: Track physical activity and nutrition intervention strategies within Pinal County**

**Performance Measures:**

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Indicator</th>
<th>Source(s)</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase public awareness of nutrition and chronic disease self-management (CDSM) classes</td>
<td>Shared resources with public (track locations shared, update quarterly)</td>
<td>PCPHSD, Banner, Sun Life, Other partners</td>
<td>Quarterly</td>
</tr>
<tr>
<td>Increase attendance in nutrition and chronic disease self-management (CDSM) classes</td>
<td>Attendance numbers by classes (topic, date, location, attendance numbers)</td>
<td>PCPHSD, Banner, Sun Life, Other partners</td>
<td>Quarterly</td>
</tr>
<tr>
<td>Partner with primary care providers in the County to provide resources for high risk clients</td>
<td>Shared resources with the PCPs (track locations shared, update quarterly)</td>
<td>PCPHSD, Banner, Sun Life, Other partners</td>
<td>Quarterly</td>
</tr>
</tbody>
</table>
ISSUE TWO: Substance Use and Dependency

Substance Use and Dependency

Local data and community member feedback ranked Substance Abuse and Dependency as a priority issue in Pinal County, including alcohol, prescription drugs, and illicit drugs. In the 2017 County Health Rankings, 16% reported “excessive drinking,” which was on par with the state average of 16% but higher than the 12% Top U.S. Performers. Excessive Drinking measures the percentage of a county’s adult population that reports binge or heavy drinking in the past 30 days. Binge drinking is defined as a woman consuming more than four alcoholic drinks during a single occasion or a man consuming more than five alcoholic drinks during a single occasion. Heavy drinking is defined as a woman drinking more than one drink on average per day or a man drinking more than two drinks on average per day.

Additionally, 30% of motor vehicle crash deaths that occurred in Pinal County between 2011-2015 had alcohol involvement. Approximately 17,000 Americans are killed annually in alcohol-related motor vehicle crashes. Binge/heavy drinkers account for most episodes of alcohol-impaired driving. Which in turn reinforces the importance of this priority issue.

Drug Abuse
The Substance Abuse and Mental Health Services Administration (SAMHSA) National Survey on Drug Use and Health for years 2014-2015 in Arizona, reported illicit drug use in aged 12 years and older averaged: Marijuana (734,000), Cocaine (128,000), and Heroin (31,000)\(^2\). In 2016, there were 1497 drug overdose deaths in Arizona.

According to Healthy People 2020:
Almost 95 percent of people with substance use problems are considered unaware of their problem. Of those who recognize their problem, 273,000 have made an unsuccessful effort to obtain treatment. These estimates highlight the importance of increasing prevention efforts and improving access to treatment for substance abuse and co-occurring disorders.

Why Is Substance Abuse Important?
Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems. These problems include:

- Teenage pregnancy
- Human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS)
- Other sexually transmitted diseases (STDs)

PUBLIC HEALTH PRIORITY ISSUES

ISSUE TWO: Substance Use and Dependency

- Domestic violence
- Child abuse
- Motor vehicle crashes
- Physical fights
- Crime
- Homicide
- Suicide

Opioid Drug Misuse and Abuse
At the time of the development of this CHIP, Arizona, along with the rest of the United States is battling an unprecedented opioid epidemic. Opioids are powerful painkillers that can be highly addictive. In 2016, 790 Arizonans died from opioid overdoses. This is an average of more than 2 Arizonans per day. The trend shows a startling increase of 74 percent over the past four years. Data shows that 4 of 5 new heroin users start by misusing prescription painkillers. On June 5, 2017, the Governor declared that a State of Emergency exists in Arizona due to the Opioid Overdose Epidemic. This enabled the Arizona Attorney General’s Office to develop rules for opioid prescribing and treatment within health care institutions, the Arizona Department of Health Services to develop guidelines to educate providers on responsible prescribing practices, and Provide training to local law enforcement agencies on proper protocols for administering naloxone in overdose situations, among other deliverables.

The use and abuse of alcohol and other drugs clearly has an effect on the health of the community, and reinforces the importance of this priority issue

Substance abuse is a major area of concern for all Arizonans, including those living and working in Pinal County. In Pinal County, several organizations have been leading community efforts to prevent substance abuse including opioid abuse and use of tobacco, drugs and alcohol among children and teens.

Community Partners identified the following areas where efforts should be focused around Substance Abuse:

1. Treatment & Prevention
   - Public messaging on consequences of long term drug use and economic impact of opiate epidemic
   - Understand effects of poverty and generational abuse
   - Substance abuse facilities for youth treatment
   - School-based health centers and K-12 education
   - Opioid withdrawal assistance
   - Partner with civic and religious organizations
   - Integrate primary care, mental health, substance abuse treatment and services
   - Address behavioral health needs when applicable

2. Chronic Pain Management
   - Chronic Pain Provider/Program
   - Target providers with awareness of the issue
   - Provide training/education to dispense less controlled substances and refer patients to physical therapy or other methods for chronic pain management
   - More pain management case workers or care providers that work specifically with those suffering from chronic pain and controlled substance abuse issues

The following were identified as activities and efforts which partner organizations are already engaged around Substance Abuse:

- Public education
- Pinal County provides K-12 evidence-based prevention education
- Educate community on risks of addiction to pain medications
- Provide education at community events and schools
- Casa Grande Chamber help to get info out to business community
- Multidisciplinary committee to address pain medication use/abuse
- Chronic Disease Self-Management Pain Program (Stanford model)
- Train Community Health Workers at CAC
- Behavioral Health providers
- Pinal County Substance Abuse Council (includes 8 coalitions)
- Treatment Resource Center
## Public Health Priority Issues

### Priority Area 2: Substance Use and Dependency

#### Goal 1: Collect data on suspected opioid overdoses and deaths in Pinal County

<table>
<thead>
<tr>
<th>Performance Measures:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy</strong></td>
<td><strong>Indicator</strong></td>
</tr>
<tr>
<td>Collect number of suspected deaths due to opioid use in Pinal County on quarterly basis</td>
<td>Number of suspected deaths due to opioid use</td>
</tr>
<tr>
<td>Collect number of suspected non-fatal overdoses due to opioid use in Pinal County on quarterly basis</td>
<td>Number of suspected non-fatal overdoses due to opioid use</td>
</tr>
</tbody>
</table>

#### Goal 2: Collect data on substance abuse prevention activities in Pinal County

<table>
<thead>
<tr>
<th>Performance Measures:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy</strong></td>
<td><strong>Indicator</strong></td>
</tr>
<tr>
<td>Track the number of substance abuse prevention classes provided to K-12 students in Pinal County schools</td>
<td>Attendance numbers by classes (topic, date, location, attendance numbers)</td>
</tr>
<tr>
<td>Track the resources provided to K-12 students in Pinal County schools</td>
<td>Shared resources (track topics shared, locations shared, update quarterly)</td>
</tr>
<tr>
<td>Track the number of substance abuse prevention classes provided to the greater community</td>
<td>Attendance numbers by classes (topic, date, location, attendance numbers)</td>
</tr>
<tr>
<td>Track the substance abuse prevention resources provided to the greater community</td>
<td>Shared resources (track topics shared, locations shared, update quarterly)</td>
</tr>
</tbody>
</table>

PCPHSD: Pinal County Public Health Services Department
Banner: Banner University Medical Center
Sun Life: Sun Life Foundation
Mental Health

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

Over the course of your life, if you experience mental health problems, your thinking, mood, and behavior could be affected. Many factors contribute to mental health problems, including:

- Biological factors, such as genes or brain chemistry
- Life experiences, such as trauma or abuse
- Family history of mental health problems

In 2014:

- One in five American adults experienced a mental health issue
- One in 10 young people experienced a period of major depression
- One in 25 Americans lived with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression

Suicide is the 10th leading cause of death in the United States. It accounts for the loss of more than 41,000 American lives each year, more than double the number of lives lost to homicide.

Half of all mental health disorders show first signs before a person turns 14 years old, and three quarters of mental health disorders begin before age 24.

Unfortunately, less than 20% of children and adolescents with diagnosable mental health problems receive the treatment they need. Early mental health support can help a child before problems interfere with other developmental needs.

When employees with mental health problems receive effective treatment, it can result in:

- Lower total medical costs

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4 https://www.mentalhealth.gov/basics/myths-facts/index.html
5 https://www.samhsa.gov/data/
Public Health Priority Issues

Issue Three: Mental Health

- Increased productivity
- Lower absenteeism
- Decreased disability costs

Studies show that people with mental health problems get better and many recover completely. Recovery refers to the process in which people are able to live, work, learn, and participate fully in their communities. There are more treatments, services, and community support systems than ever before, and they work.

According to the National Survey of Substance Abuse Treatment Services (N-SSATS), about 45% of Americans seeking substance use disorder treatment have been diagnosed as having a co-occurring mental and substance use disorder.

For instance, data from SAMHSA’s National Survey on Drug Use and Health (NSDUH) — 2014 (PDF | 3.4 MB) show that in 2014, 15.7 million adults reported having a major depressive episode (MDE) in the past 12 months. Of those, about one-third of adults (33.2%) did not seek professional help during the previous 12 months.

Behavioral health is a key part of a person’s overall health, and includes emotional, psychological, and social well-being. Behavioral health conditions include mental and substance use disorders.

Many Americans go without needed behavioral health treatment. People with a mental disorder are more likely to experience a substance use disorder and people with a substance use disorder are more likely to have a mental disorder when compared with the general population. According to the National Survey of Substance Abuse Treatment Services (N-SSATS), about 45% of Americans seeking substance use disorder treatment have been diagnosed as having a co-occurring mental and substance use disorder.

Integrated treatment or treatment that addresses mental and substance use conditions at the same time is associated with lower costs and better outcomes such as:

- Reduced substance use
- Improved psychiatric symptoms and functioning
- Decreased hospitalization
- Increased housing stability
- Fewer arrests
- Improved quality of life
Community Partners identified the following areas where efforts should be focused around Mental Health:

1. Schools
   - Funding for support for counseling and social skills in schools
   - Teach mental health self-care strategies in schools, such as after school yoga meditation
   - Early education, detection and intervention
   - Health Care System
   - Integrate primary care, mental health, substance use treatment and services
   - Increase highly qualified and affordable behavioral and mental health care
   - Start an advocacy group for mental health with family members and providers
   - Recognition and options for getting diagnosed
   - More chronic/psych hospitals
   - Mental health “first aid” training of more people

2. Community and Other Special Populations
   - Understand affected populations: Who has mental health issues? Different considerations for different ages, owners, ethnicities, occupations?
   - Work with veterans to help with PTSD issues
   - Provide training to correctional facilities and link to services
The following were identified as activities and efforts which partner organizations are already engaged around Mental Health:

- Establishing a Mental Health Outpatient Clinic at Banner Casa Grande by 6/1/2017
- Behavioral Health/Primary Care integration
- Acute Care Behaviorist Program
- Behavioral Health (LCSW) in Primary Care
- Staff Behavioralists available to see patients
- All patients receive Mental Health screenings at each visit
- Medical school students placed at Behavioral Health facilities
- Partner with Cenpatico on SMI
- Pick up services for Mental Health referrals
- Referrals at Community Health Centers for Behavioral Health and Substance Abuse services

### Priority Area 3: Mental Health

#### Goal 1: Identify and promote Mental Health resources within Pinal County

#### Performance Measures:

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Indicator</th>
<th>Source(s)</th>
<th>Frequency</th>
</tr>
</thead>
</table>
| Track the number of mental health referrals within the county | Number of mental health referrals | • Sun Life  
  • Banner | Quarterly |
| Develop a list of Mental Health resources that can be shared within the County | Collect list of resources from partners and share information on County website and with partners (note: include information about PCSO Mental Health First Aid) | • PCPHSD  
  • Sun Life  
  • Banner | Quarterly |
The Path Ahead

By definition, the CHIP process is a cyclical progression toward community health improvement. With the completion of the Community Health Improvement Plan, participants will move to the Action Phase. This part of the cycle consists of monitoring performance measures and progress related to health improvement indicators. The CHNA/CHIP Steering Committee’s next step will be to collect data towards the agreed upon metrics on a quarterly basis, and to review and track progress.

As the CHIP continues to be implemented, the CHNA/CHIP Steering Committee will strive to bring more community members “to the table” who will help set measurable objectives, select strategies to reach them, and identify existing and new resources needed. Evaluation will remain foremost so that progress toward goals can be quantified. The level of achievement will result from the commitment of the task force members. All residents and community and civic organizations are invited to join the effort.

To become involved or for more information, please visit our website at www.pinalcountyaz.gov/publichealth.
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Appendix A: CHIP Meeting Agendas and Sign In Sheets

I. 3/17/17 Joint Priority Setting Meeting
II. 10/24/17 Joint CHNA/CHIP Meeting
III. 12/12/17 PCPHSD Leadership Team Meeting: CHNA/CHIP Overview
IV. 2/22/18 PCPHSD Leadership Team Meeting: CHIP Development
V. 3/23/18 Joint CHNA/CHIP Meeting
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### Meeting Agenda

**Joint Priority Setting Meeting**
*Cohesive Collaborating for the Good of the Community.*

**Date:** Friday, March 17, 2017  
**Time:** 3:00 p.m. - 5:00 p.m.  
**Location:** Banner Casa Grande Medical Center, Education Room  
**Hosted by:** Banner Casa Grande Medical Center, Sun Life Family Health Center and Pinal County Public Health Services District

*“Alone we can do so little. Together we can do so much.”*  
*Helen Keller*

<table>
<thead>
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<th>Time</th>
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| 3:00 p.m. - 3:15 p.m | **Welcome and Opening Remarks**  
|                 | • Rona Curphy, CEO, Banner Casa Grande Medical Center  
|                 | • Travis Robinette, CEO, Sun Life Family Health Center                           |
| 3:15 p.m. - 3:30 p.m | **Summary Key Findings**  
|                 | Brief presentations of methodologies and key findings presented by Sun Life Family Health Center and Banner Casa Grande Medical Center. |
| 3:30 p.m. - 3:45 p.m | **Overview of Current Public Health Issues in Pinal County**  
|                 | Presentation by Rachel Zenuk and Sam Packard of Pinal County Public Health Services District on current public health issues in Pinal County. |
| 3:45 p.m. - 4:45 p.m | **Identification of the Community’s Priority Needs**  
|                 | • Presentation of a list of ten potential priority areas based on Needs Assessment findings.  
|                 | • Participants will discuss and vote on the top three most important priorities using electronic audience response units. |
| 4:45 p.m. - 5:00 p.m | **Wrap Up and Next Steps**  
<p>|                 | Closing comments from Rona Curphy, CEO, Banner Casa Grande Medical Center and Travis Robinette, CEO, Sun Life Family Health Center. |</p>
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# JOINT PRIORITY SETTING MEETING - FRIDAY, MARCH 17, 2017

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CHIP

PINAL COUNTY Community Health Improvement Plan 35
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## JOINT PRIORITY SETTING MEETING - FRIDAY, MARCH 17, 2017

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<td>Zenuk</td>
<td>Rachel</td>
<td>Assistant Director, Community Health</td>
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McBride Don #3  City Council  Casa Grande Elementary School District
10/24/17 Joint CHNA/CHIP Meeting

JOINT CHNA/CHIP MEETING
Tuesday, October 24, 2017

AGENDA

8:00 a.m. – 8:15 a.m.  Welcome and Introductions
  ▪ Rona Curphy, CEO, Banner Casa Grande Medical Center
  ▪ Travis Robinette, CEO, Sun Life Family Health Center
  ▪ Shauna McIsaac, Director, Pinal County Public Health

8:15 a.m. – 9:00 a.m.  Celebrate 2017 Successes and Pinal CHNA Charter
  ▪ Discuss goals of charter and invite all organizations to sign the Pinal County Community Health Needs Assessment 2017 Charter to align efforts moving forward

9:00 a.m. – 9:45 a.m.  Identify Key Performance Measures for Top 3 Healthy Priority Areas
  ▪ Participants will discuss and vote on the key performance measures for each of the top health priority areas to track progress over next three years

9:45 a.m. – 10:00 a.m.  Wrap Up and Next Steps
### Sign-in Sheet

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<tr>
<td>Eliza Call</td>
<td>WHS/PCP+SD</td>
<td><a href="mailto:ecoll@wddond.com">ecoll@wddond.com</a> 1602.315.42102</td>
<td></td>
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<tr>
<td>Rachel Zenuk</td>
<td>Pinal County</td>
<td><a href="mailto:rachel.zenuk@pinalcountyaz.gov">rachel.zenuk@pinalcountyaz.gov</a> 520-840-6604</td>
<td>520-871-0366</td>
</tr>
<tr>
<td>Renee Lonzen-Benn</td>
<td>Sea Life Family Health Center</td>
<td><a href="mailto:renee@sffhc.org">renee@sffhc.org</a></td>
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<tr>
<td>Anne Rubel</td>
<td>Pinal County PH</td>
<td><a href="mailto:rube1@pinalcounty.gov">rube1@pinalcounty.gov</a> 520-559-2877</td>
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<tr>
<td>Paul Vacher</td>
<td>BCGMC</td>
<td><a href="mailto:pavanvacher@bannerhealth.com">pavanvacher@bannerhealth.com</a> 520-381-6629</td>
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<tr>
<td>Rayma Vilegas</td>
<td>BIMC/BCFMC</td>
<td><a href="mailto:rayma.vilegas@pinalcountyaz.gov">rayma.vilegas@pinalcountyaz.gov</a> 520-559-2848</td>
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<tr>
<td>Kim Paullis</td>
<td>BCGMC</td>
<td><a href="mailto:tevarpaullis@bannerhealth.com">tevarpaullis@bannerhealth.com</a> (623) 317-0440</td>
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<tr>
<td>Roni Coyer</td>
<td>BCGMC</td>
<td><a href="mailto:roni.coyer@bannerhealth.com">roni.coyer@bannerhealth.com</a> 520-381-6619</td>
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<tr>
<td>Madame Myrsee</td>
<td>Pinal County HD</td>
<td><a href="mailto:shawna.myrsee@bannerhealth.com">shawna.myrsee@bannerhealth.com</a> 520-810-6604</td>
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<td>Dan Stingle</td>
<td>BCGMC</td>
<td><a href="mailto:dan.stingle@bannerhealth.com">dan.stingle@bannerhealth.com</a> 520-381-6615</td>
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<tr>
<td>Dezirae Williams</td>
<td>Pinal County Public Health</td>
<td><a href="mailto:dezirae.williams@pinalcountyaz.gov">dezirae.williams@pinalcountyaz.gov</a> 520-483-8502</td>
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<td>Mike Gehman</td>
<td>Pinal County Superi</td>
<td><a href="mailto:mike.gehman@bannerhealth.com">mike.gehman@bannerhealth.com</a> 520-483-3700</td>
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<tr>
<td>Christina Geare</td>
<td>Banner</td>
<td><a href="mailto:christina.geare@bannerhealth.com">christina.geare@bannerhealth.com</a> 602-273-9700</td>
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<tr>
<td>Tim Collins</td>
<td>Sun Life Family Health Center</td>
<td><a href="mailto:tim.collins@slfhs.org">tim.collins@slfhs.org</a> 321-0302</td>
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Leadership Team Meeting:
CHNA/CHIP Overview

December 12, 2017
12:00PM-3:00PM

Agenda

I. Welcome and Introductions
II. Overview of Project Scope
III. Alphabet Soup: review of PHAB, CHA, CHIP, MAPP
IV. Visioning
V. Forces of Change
VI. Asset Mapping
VII. Priority Issues
   a. Discuss what PCHSD is currently doing to address
   b. Review goals and develop objectives and measures
VIII. Next Steps
| Name       | Signature | Division/Program | Environment  | Health  
|------------|-----------|------------------|--------------|---------
| Cheri Perez |           |                  | IDES         |         
| Matt Mason |           |                  | Nutrition    |         
| Hayley Vasquez |       |                  | Quality      |         
| Mike Readon |           |                  | Prevention   |         
| Rachel Zehner |       |                  | Health       |         
| Eliza All |           |                  | Community     |         
| Glenda    |           |                  |              |         
| Elle      |           |                  |              |         

Leadership Team Meeting: CHNA/CHIP Overview

Sign-In Sheet
December 12, 2017

Appendix B: Sign In Sheet
2/22/18 PCPHSD Leadership Team Meeting: CHIP Development

Leadership Team Meeting:
CHIP Development

February 22, 2018
11:00AM-12:00PM

Agenda

I. Welcome and Introductions

II. Review of Project Status

III. Development of CHIP Metrics
   a. Priority Area 1: Priority Area 1: Physical Activity & Nutrition
   b. Priority Area 2: Substance Use and Dependency
   c. Priority Area 3: Mental Health

IV. Next Steps

V. Adjourn
## Sign-In Sheet
February 22, 2018

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JOINT CHNA/CHIP MEETING
Tuesday, March 23, 2018

AGENDA

10:00 a.m. – 10:15 a.m.  Welcome and Introductions
   ▪ Rona Curphy, CEO, Banner Casa Grande Medical Center
   ▪ Travis Robinette, CEO, Sun Life Family Health Center
   ▪ Shauna McIsaac, Director, Pinal County Public Health

10:15 a.m. – 10:30 a.m.  Project Progress and Review of Priority Areas
   ▪ Pinal County Public Health Services District will provide an update on CHNA/CHIP project collaboration, progress, and review of the priority areas determined by the group in 2017

10:30 a.m. – 11:45 a.m.  Development of Priority Area Metrics
   ▪ Participants will discuss the key performance measures for each of the top health priority areas to track progress over next three years

11:45 a.m. – 12:00 p.m.  Wrap Up and Next Steps
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