



Annual Report 2014-2015



serving the City of Knoxville, Knox County, and the Town of Farragut

Community Health Council

Kristy Altman (chair)
Ellen Zavisca (chair-elect)
Karen Pershing (past chair)
Kindall Aaron
Dr. Martha Buchanan
Jim Dickson
Lara Fleming
Gaye Fortner
Pam Frye
Melissa Knight
Viren Lalka
Dr. Laurie Meschke
Dr. Joe Miles
Debbie Pinchok
Patricia Robledo
Eve Thomas
Karen Tindal
Lisa Wagoner
Dr. Regina Washington
Amanda Weber
Carlos Yunsan

Executive Summary

Together Healthy Knox (THK) is Knox County, Tennessee's community health improvement initiative. THK was initially convened by the Knox County Health Department (KCHD) in 2009, and has since transitioned to a community-driven model under the leadership of the Community Health Council (CHC), which serves the City of Knoxville, Knox County, and the Town of Farragut.

The THK initiative is an ongoing process of assessment, planning, and implementation. Every four to five years, the CHC and KCHD partner to conduct a large Community Health Assessment (CHA) which includes quantitative and qualitative data about disease rates, risky behaviors, quality of life, and community perspectives on health in Knox County. Data from the CHA are used to identify health priorities, and the CHC creates a Community Health Improvement Plan



(CHIP) to address those priorities. The CHC forms Action Teams to fill in action steps and implement the CHIP.

There were two major accomplishments under THK in the 2014-2015 fiscal year: 1) the completion of the Community Health Assessment and 2) evaluation of the top twenty health issues that emerged from the data, in preparation for selecting top priorities.

To see the final CHA report, please visit www.healthyknox.org.

Overview

Together Healthy Knox (THK) is Knox County, Tennessee's community health improvement initiative. Members from over sixty community agencies and organizations have been involved since the Knox County Health Department (KCHD) convened the effort in 2009, including many partners not traditionally associated with public health. THK's goal is to produce systems-based public health improvements over the long term that can be tracked by changes in assessment data. THK is an initiative of the Community Health Council (CHC) serving the City of Knoxville, Knox County, and the Town of Farragut.

Together Healthy Knox is currently in its second cycle of assessment, planning, and implementation. Each cycle lasts four to five years, and is based on the MAPP Model (see final section). There have been substantive changes in process and deliverables from THK 1.0 (the first cycle) to 2.0 (the second):

- More data synthesis
- Less time planning, more time doing
- Sharper focus on improving health outcomes
- More targeted recruitment of implementation partners
- Planned projects to be shorter-term and more actionable

Two major deliverables will result from THK 2.0: the Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP). The CHA is a comprehensive snapshot of health in Knox County, including both qualitative and quantitative data. The CHIP is a set of plans to address the top three to five most pressing health issues in the county, with partners across multiple sectors involved.

Goals & Accomplishments

From July 2014 to June 2015, the process accomplished two major goals: 1) completing the CHA report and 2) scoring all twenty top health issues in Knox County (in preparation for identifying the top three to five health priorities).

The CHA report draws on data and information from four assessments recommended under the MAPP Model (see final section):

- Community Health Status Assessment, completed by KCHD in 2015, provides quantitative data about disease rates, mortality, risky behaviors, environmental factors, and more.
- Community Themes & Strengths Assessment, completed by KCHD and partners in 2015, provides qualitative data about how residents perceive their quality of life and the state of health in the county, collected through key informant interviews (26), focus groups (12 focus groups, 155 participants), and a community survey (over 2,000 responses).
- Forces of Change Assessment, completed by the CHC in 2015, outlines the top five trends or factors that CHC members think will influence health in Knox County the most in the coming five years.



Community Health Council members examine and evaluate the top twenty health issues that emerged from CHA data. (June 18, 2015)



- Local Public Health System Assessment, completed by the CHC in 2014, provides perception-based information about how well local agencies and organizations work together to support health by providing essential services like monitoring health hazards in the community and creating policies and plans that support health. Information was collected at an assessment retreat in December 2014 with 55 attendees representing 33 local public health and health care organizations.

The CHA report is now available on the Together Healthy Knox website (www.healthyknox.org) and the Knox County Health Department website (www.knoxcounty.org/health). A summary of CHA findings was available for public input both online and in most Knox County YMCA's and Knox County Senior Centers from May 20 to June 20.

Prioritization Process

Epidemiologists at KCHD selected the top twenty health issues that emerged from CHA data in April 2015, and the CHC met in June to narrow down the list to the very top three to five priorities. Subject matter experts from across the community compiled fact sheets on each of the top twenty issues, and CHC members used the fact sheets to assign a score to each health issue on a scale of one to ten in four different areas, a scoring system based on the Hanlon method (National Association of County and City Health Officials, *Assessment Protocol for Excellence in Public Health* (1996), Appendix E). The Community Health Improvement Committee (of the CHC) will use these scores in July to determine the top three to five health priorities that will be the basis of the CHIP.

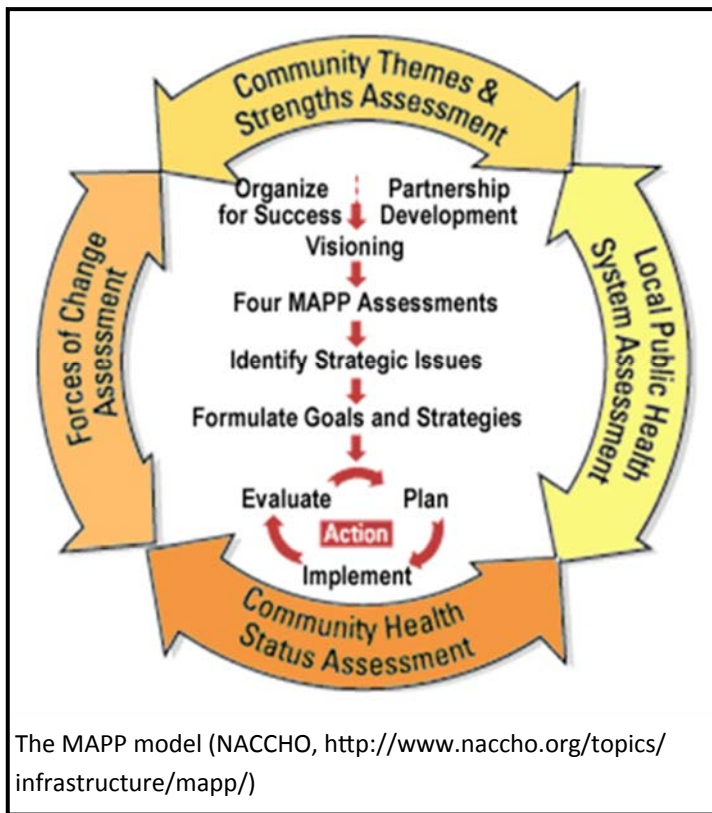
Looking Forward

In the next year, the CHC will draft goals and measurable objectives for the CHIP, and Action Teams will be formed to fill in action steps and begin implementation. The CHIP document is the major deliverable for next year.

MAPP & Together Healthy Knox

Together Healthy Knox follows the MAPP model (Mobilizing for Action through Planning and Partnerships) which was created by the Centers for Disease Control and Prevention (CDC) and the National Association of County and City Health Officials (NACCHO).

MAPP offers a framework for community-led strategic planning and implementation for health improvement, and is used by many communities across the United States. Our own MAPP process in Knox County is a recognized model for other municipalities: our work has been featured at national MAPP trainings and conferences every year since 2012.



Acknowledgements

Community Health Council:

Kindall Aaron, Childhood Obesity Coalition
Kristy Altman (current chair), Knoxville Track Club
Dr. Martha Buchanan, Knox County Health Department
Jim Dickson (former chair), YMCA of East Tennessee
Gaye Fortner, HealthCare 21 Business Coalition
Pam Frye, Harmony Family Center
Melissa Knight, InterFaith Health Clinic
Viren Lalka, Lalka Tax Services, LLC
Dr. Laurie Meschke, University of Tennessee
Dr. Joe Miles, University of Tennessee
Karen Pershing (immediate past chair), Metropolitan
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Debbie Pinchok, community volunteer
Patricia Robledo, City of Knoxville
Eve Thomas, Knoxville Police Department
Karen Tindal, community volunteer
Lisa Wagoner, Knox County Schools
Dr. Regina Washington, South College
Amanda Weber, Remote Area Medical Foundation
Carlos Yunsan, Kizer & Black, Attorneys, PLLC
Ellen Zavisca (chair-elect), Knoxville Regional
Transportation Planning Organization

Former CHC members:

David Brace, City of Knoxville
Mark Field (former chair), Knoxville Chamber
Ben Harrington, Mental Health Association of East
Tennessee
Dr. R. Mark Ray, Children's Ear, Nose & Throat
Specialists, PLLC

Elected Officials:

Knox County Mayor Tim Burchett
Knox County Commission
City of Knoxville Mayor Madeline Rogero
Knoxville City Council
Farragut Mayor Ralph McGill
Farragut Board of Mayor and Aldermen

KCHD executive staff:

Dr. Martha Buchanan, Director
Mark Miller, Deputy Director
Michael Holtz, Director of Community Assessment &
Health Promotion
Michelle Moyers, Director of Community Development &
Planning
Katharine Killen, Director of Community Relations

KCHD staff:

Sarah Bounse, Health Educator
Liliana Burbano, Health Educator
Kimberly Diehl, Office Manager
Ben Epperson, Program Manager
Jeannine Fort, Interpreter
Terri Geiser, Program Manager
Cynthia Hudson, Health Educator
Al Iannacone, Environmental Epidemiologist
Melissa Lee, Health Services Clerk
Fiona McAnally, Program Manager
Katheryne Nix, Health Educator
Mark Prather, Epidemiologist
Dan Proctor, Graphic Designer
Erin Read, Health Educator
Judy Roitman, Health Educator
Karen Stier, Health Educator
Roberta Sturm, Epidemiologist
Michael Thomas, Program Manager
Kerri Thompson, Health Educator
Alicia Verlinde, Epidemiologist

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