Our mission is to improve and protect the health, well-being and environment of the people of Clinton County.
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Executive Summary

Mission Statement

Our mission is to improve and protect the health, well-being and environment of the people of Clinton County.

The Clinton County Health Department has facilitated the Mobilizing for Action through Planning and Partnership (MAPP) in the community for the last nine years. The result was a comprehensive, widely distributed document that has been embraced by the members of the local public health system. The developed MAPP document also serves as the New York State Department of Health (NYSDOH) Community Health Assessment (CHA). The CHA includes the NYSDOH Prevention Agenda Objectives. Participants provided input into determining the priority areas to be worked on for the next four years. The Prevention Agenda areas selected mirror the selected MAPP priorities.

The MAPP process provides the outline for broad, community-based efforts to improve health by engaging the many partners that are already doing the work. This has been accomplished by working with all members of the local public health system in schools, local businesses, health care providers and many others.

A direct result of the MAPP process has been policy, system, and environment (built) change (PSE) throughout the community in a variety of sectors. The next step is to further build upon this effort by developing a Community Health Improvement Plan (CHIP) that will continue to serve as the “health roadmap” for future generations as a method to accomplish our mission. The CHIP will also serve as the guidance and working document for the local public health system to help outline planned objectives.

The 2004 MAPP identified several community health priorities: access to mental health, chronic disease and the shifting population as the focus areas. In 2009, the MAPP priorities identified were: access to health care and chronic disease (tobacco, nutrition and physical activity). The following pages will outline the specifics of how the county will target resources to reduce and prevent the health impact in these selected areas. The Spectrum of Prevention tool will form the basis for the effort by providing a Best Practices comprehensive approach in the community that supports PSE change. The identification of the Ten Essential Services in the process will further support the national public health directions applied to a local effort.

By focusing on the following identified priorities, the quality of life and level of personal health in our community will become stronger. The Clinton County CHIP and changes to community infrastructure will support PSE change in the following health areas:

- Access to Quality Healthcare
- Chronic Disease (Tobacco, Nutrition, Physical Activity)

These priorities will be the health initiatives for Clinton County to work on over the next four years.
What is MAPP?

Mobilizing for Action through Planning and Partnerships (MAPP) is a community-wide strategic planning tool for improving community health. MAPP is an initiative led by the National Association of County and City Health Officials, in collaboration with the Centers for Disease Control and Prevention (CDC). Facilitated by public health leadership, this tool helps communities prioritize public health issues and identify resources for addressing them.

MAPP is a process whereby programs, agencies, organizations and institutions may engage in partnerships for the good of the community. This process first began in the tri-county (Clinton, Essex and Franklin Counties) region in 2004-2005 during the last Community Health Assessment (CHA) process. Since then, Clinton County has worked towards further identifying and focusing on priorities specific to the region to improve health on a county-wide level.

The Community Drives the Process

Community ownership is the fundamental component of MAPP. Because the community's strengths, needs, and desires drive the process, MAPP provides the framework for creating a truly community-driven initiative. Community participation leads to collective thinking and, ultimately, results in effective, sustainable solutions to complex problems.

Broad community participation is essential because a wide range of organizations and individuals contribute to the public's health. Public, private, and voluntary organizations join community members and informal associations in the provision of local public health services.

The MAPP process brings these diverse interests together to collaboratively determine the most effective way to conduct public health activities.

To initiate the MAPP process, lead organizations in the community begin by organizing themselves and preparing to implement MAPP (Organize for Success/Partnership Development). Community-wide strategic planning requires a high level of commitment from partners, stakeholders, and the community residents who are recruited to participate.

The second phase of the MAPP process is Visioning. A shared vision and common values provide a framework for pursuing long-range community goals. During this phase, the community answers questions such as "What would we like our community to look like in 10 years?"

Next, the four MAPP Assessments are conducted providing critical insights into challenges and opportunities throughout the community:

The Community Themes and Strengths Assessment provides a deep understanding of the issues residents feel are important by answering the questions "What is important to our community?" "How is quality of life perceived in our community?" and "What assets do we have that can be used to improve community health?"

The Local Public Health System Assessment (LPHSA) is a comprehensive assessment of all of the organizations and entities that contribute to the public's health. The LPHSA answers the questions "What are the activities, competencies, and capacities of our local public health system?" and "How are the Essential Services being provided to our community?"
The Community Health Status Assessment identifies priority issues related to community health and quality of life. Questions answered during the phase include "How healthy are our residents?" and "What does the health status of our community look like?"

The Forces of Change Assessment focuses on the identification of forces such as legislation, technology, and other issues that affect the context in which the community and its public health system operates. This section answers the questions "What is occurring or might occur that affects the health of our community or the local public health system?" and "What specific threats or opportunities are generated by these occurrences?"

Once a list of challenges and opportunities has been generated from each of the four assessments, the next step is to Identify Strategic Issues. During this phase, participants identify linkages between the MAPP assessments to determine the most critical issues that must be addressed for the community to achieve its vision. After issues have been identified, participants Formulate Goals and Strategies for addressing each issue. The final phase of MAPP is the Action Cycle. During this phase, participants plan, implement, and evaluate. These activities build upon one another in a continuous, interactive manner to ensure continued success.

In the following MAPP model, the "phases" of the MAPP process are shown in the center of the model, while the four MAPP Assessments - the key content areas that drive the process - are shown in the four outer arrows.

Choosing a Direction

Interactive group discussion around available data framed by the MAPP Tool Chest for guidance, led to the identification of sixteen strategic issues. The sixteen strategic issues selected were based on the four MAPP assessment areas. Each member of the full MAPP committee was then provided with three votes and could cast each of their votes in the area they thought were priority issues in our community.

After the voting was complete, a final review and discussion focused around the top three selected strategic issues, formulating the issues into action statements.

The action statements developed were:

1. How can the local public health system ensure access to mental health services?
2. How can the local public health system effectively address the current rates of chronic disease?
3. How will the local public health system handle the expected population shift in the region?
In 2008, the New York State Department of Health and the Hospital Association of New York State agreed to merge the Community Health Assessment (CHA) and the hospital required Community Service Plan (CSP).

The 2008-2009 MAPP/CHA/CSP process for priority selection included the following:

1. **Data collection** using the NYS Prevention Agenda and other Community Health Assessment indicators by the Data Collection & Needs Assessment Committees (November 2008-June 2009)

2. **Compilation and analysis** of the Data by the Needs Assessment and Data Collection Committees (November 2008-June 2009)

3. **Selection of first round of priorities** using a prioritization matrix and strategy by the Leadership Committee and Hospital Partners (June 2009)

4. **Selection of final priorities** by sharing first round priorities with the Full MAPP Committee for their input in the form of focus groups. There were seven focus groups with representatives from Clinton, Essex and Franklin counties. Focus group information was reported back to the Full MAPP Committee and then compiled and reviewed again by the Leadership and Needs Assessment Committees. These committees weighed the data and focus group information in order to come to group consensus and select final priorities (August 2009).

The 2010-2013 Tri-County (Clinton, Essex, Franklin) priorities were defined as:

1. **Physical Activity/Nutrition/Tobacco (Chronic Disease)**

2. **Access to Quality Healthcare**
The Clinton County Action for Health Partnership was developed as a natural progression of the MAPP process. It was recognized that a county specific partnership was necessary to develop goals and action plans to achieve results. Additionally, timing allowed Clinton County to take advantage of a grant funded initiative through NACCHO (National Association of City and County Health Officials) to be recognized as an ACHIEVE Community.

The Clinton County Health Department was a successful ACHIEVE applicant in 2009 and was selected to establish or enhance community based partnerships to work on policy, system, and environment (built) change (PSE). The funding allowed a CHART (Community Health Action Response Team) Team to be trained on PSE. The CHART Team became an integral piece of the Action for Health group by assisting and supporting community based efforts. The CHART Team developed a CAP (Community Action Plan). The CAP was rolled into the Action for Health efforts therefore reinforcing PSE change in the community. The ACHIEVE activities were merged into the Action for Health Partnerships from 2009-2011.

Goals and Objectives for 2004-2009

The Action for Health/ACHIEVE Initiative developed objectives based on the earlier prioritization and data from the MAPP process. Using the Spectrum of Prevention to outline strategies, the group was able to focus on some broad community initiatives.

Spectrum of Prevention is a framework that can be used to address public health issues using seven strategies. These strategies account for the complexity of community health determinants and may be used to develop comprehensive approaches to address issues. While using these strategies is not a new concept to health practitioners, it is using the framework that reminds us of the many levels and multitude of partners with whom we must conduct our work in order to be effective in creating healthier communities.

The Spectrum of Prevention was used as a guide to develop the broad goals and objectives for each of the three priorities. These strategies were defined by each spectrum of prevention level. This ensured that the specified goals and objectives supported the health priorities Chronic Disease and Access to Quality Healthcare with multifaceted prevention initiatives.

Essential Public Health Services

The Essential Public Health Services provide a framework for the responsibilities of all local public health systems. As a nationally used tool, each of our objectives fall into one of the ten services, thereby aligning our goals with the national standards.

The 10 Essential Public Health Services, as defined by the CDC National Public Health Performance Standards Program, can be found in Appendix I. These services will be referenced for each objective in the priority improvement strategy charts.
The following diagram offers a definition of the Spectrum of Prevention first developed by Larry Cohen, then Director of the Prevention Program on Contra Costa County Health Services, a Public Health Department in California, based on the work of Dr. Marshall Swift, and adapted for the use of this document.

<table>
<thead>
<tr>
<th>Spectrum of Prevention</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influencing Policy &amp; Legislation</td>
<td>Changes in local, state &amp; federal laws have the potential for achieving the broadest impact across a community. Effective formal &amp; informal policies lead to widespread behavior change &amp; ultimately change social norms.</td>
</tr>
<tr>
<td>Mobilizing Neighborhoods &amp; Communities</td>
<td>A relatively young concept, this includes meeting with communities to prioritize community concerns such as violence, unemployment and keeping families together, so that these needs may be addressed along with the health department goals.</td>
</tr>
<tr>
<td>Changing Organizational Practices</td>
<td>Changes in internal regulations &amp; norms, allows organizations to affect the health &amp; safety of its members and the greater community.</td>
</tr>
<tr>
<td>Fostering Coalitions &amp; Networks</td>
<td>Coalitions &amp; expanded partnerships are vital to public health movements and can be powerful advocates for legislative and organizational change. From grassroots partners to governmental coalitions, all have the potential to develop a comprehensive strategy for prevention.</td>
</tr>
<tr>
<td>Educating Providers</td>
<td>Providers have influence within their fields of expertise to transmit information, skills, and motivation to their colleagues, patients &amp; clients. They can become front-line advocates for public health encouraging the adoption of healthy behaviors, screening for risks and advocating for policies and legislation.</td>
</tr>
<tr>
<td>Promoting Community Education</td>
<td>Community education goals include reaching the greatest number of people possible with a message as well as mass media to shape the public's understanding of health issues.</td>
</tr>
<tr>
<td>Strengthening Individual Knowledge &amp; Skills</td>
<td>This is the classic public health approach and involves nurses, educators and trained community members working directly with clients in their homes, community settings or clinics in order to promote health.</td>
</tr>
</tbody>
</table>

*Essential Public Health Services
The following charts contain descriptions of the previous strides that have been made on these health priorities. Each health priority is organized using the Spectrum of Prevention as a guide.

**Access to Mental Health Services**

| Influencing Policy & Legislation | Supported Timothy’s Law in NYS.  
| Advocated for changes in health insurance coverage for mental health services & programs. |
| Mobilizing Neighborhoods & Communities | Developed a social marketing plan to increase awareness of issues surrounding suicide and available resources.  
| Participated in two regional conferences in Lake Placid that provided workshops on mental illness in our region.  
| Facilitated SPEAK training opportunities for members of the community, local educators, and providers. |
| Changing Organizational Practices | Implemented Columbia Teen Screen in local school districts.  
| Developed and distributed the tri-county Child and Adolescent Mental Health and Substance Abuse Services Resources Directory. |
| Fostering Coalitions & Networks | Joined several existing community based coalitions/partnerships in the tri-county region that address drug and substance abuse issues along with other mental health issues.  
| Submission of several regional/county grant applications to address access to care issues related to mental/emotional health. |
| Educating Providers | Conducted a pilot program to determine if a standardized depression screening tool could be implemented in a pediatric office targeting children between the ages of 11-17.  
| Developed and conducted Gate Keeper suicide awareness training and education targeting providers, educators and members of the community on the available resources to effectively deal with issues related to suicide.  
| The North Country Healthy Heart Network (NCHHN) collaborated with providers to offer regular educational opportunities for providers in mental health settings. |
| Promoting Community Education | Participated in a comprehensive regional series of stories in the local Plattsburgh Press Republican on mental and emotional illness in the tri-county region and the available services.  
| Conducted several community presentations on tri-county mental/emotional health issues. |
| Strengthening Individual Knowledge & Skills | Conducted several professional presentations/trainings on the MAPP/CHA process to encourage collaboration.  
| Participated in several media outlet stories on MAPP/CHA to increase community membership understanding of this community collaboration.  
| Provided Community Resource Lists of providers to individual community members through worksite wellness initiatives of Adirondack Wellness Network. |
# Summary of Accomplishments for Clinton County (2004-2009)

## Chronic Disease (Tobacco Usage, Nutrition, Physical Activity)

| Influencing Policy & Legislation | Implemented tobacco-free policies for hospitals and nursing homes.  
Facilitated the adoption of “No Tobacco Sponsorship” policies in numerous local municipalities.  
Assisted several school districts as they developed and implemented their State Education required Nutrition and Physical Activity Policies.  
Reality Check programs worked to influence film and media outlets for tobacco marketing.  
Substance Abuse organizations tobacco-free grounds & treatment policies. |
|---|---|
| Mobilizing Neighborhoods & Communities | Provided mini-grant funding to local agencies/organizations to implement sustainable nutrition and physical activity opportunities.  
Nutrition and Physical Activity Self-Assessment for Child Care (NAPSACC) training and Coordinated Approach to Child Health (CATCH) trainings.  
NAPSACC consultants assisted childcare providers in developing and implementing nutrition and physical activity policies.  
Participating on the City of Plattsburgh Saranac Trails Project to establish a multi-purpose trail through the City of Plattsburgh along the Saranac River.  
Applications have been written and submitted for Built Environment grants to coordinate built environment changes in several communities.  
Community Garden plans underway.  
Rural health network grant awarded to NCHHN focusing on environmental changes to support healthy living. |
| Changing Organizational Practices | Collaboration with CVPH Medical Center, Clinton County Health Dept. and Joint Council for Economic Opportunity to establish a ADA Certified Diabetes Self-Management and Medical programs through the North Country Diabetes Project.  
Provided diabetes training in many local provider offices.  
NRT and materials provided to Substance Abuse organizations with training.  
North Country Heart Healthy Network (NCHHN) provided technical assistance & education to allow organizations to adopt evidence based tobacco dependence treatment office practices. |
| Fostering Coalitions & Networks | The ATFN tri-county partnership mobilized many members of the local public health system to address issues around second hand smoke and promotion of the NYSDOH Smokers Quit Line.  
Established the Eat Well, Play Hard Coalition to address physical activity and nutrition issues.  
Established the Clinton County Action for Health Committee for Chronic Disease (tobacco/nutrition/physical activity/built environment) issues.  
Conducted several professional presentations/training on the MAPP/CHA process to encourage collaboration. |
### Chronic Disease (Tobacco Usage, Nutrition, Physical Activity—continued)

<table>
<thead>
<tr>
<th>Descriptions</th>
<th>Accomplishments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Educating Providers</strong></td>
<td>Provided community agency training for staff participating in Kid Shape Program targeting families in the community dealing with childhood obesity. Provided training for school nurses and agencies, and pediatric provider offices on proper way to weigh and measure school age children using standardized methods and equipment. The North Country Healthy Heart Network collaborated with providers to offer regular educational opportunities for multi-level providers (MD, NP/PA, RN, LPN). Social Marketing Campaign—Don’t Be Silent About Smoking offered.</td>
</tr>
<tr>
<td><strong>Promoting Community Education</strong></td>
<td>Conducted a three part television series on diabetes. Established walking opportunities in the community and local school districts for student, staff and the general public. Social Marketing campaign for 1% or less milk with Stewarts &amp; P.C. Billboards about healthcare tobacco free grounds policy.</td>
</tr>
<tr>
<td><strong>Strengthening Individual Knowledge &amp; Skills</strong></td>
<td>Participated in several media outlet stories on MAPP/CHA to increase community membership understanding of this community collaboration. Conducted community diabetes screening activities. Participated in county and other fair opportunities as outreach opportunities to interact with and educate community members. Worksite Wellness HRAs administered to hundreds through Adirondack Wellness Network. Provided Community Resource Lists of providers to individual community members through worksite wellness initiatives of Adirondack Wellness Network. Billboards about healthcare tobacco free grounds policy also promote 1-866-NY QUITS info. Direct counseling offered by NCHHN.</td>
</tr>
</tbody>
</table>
### Population Shift (Aging Population)

<table>
<thead>
<tr>
<th>Influencing Policy &amp; Legislation</th>
<th>Supported state and national legislation providing resources to local communities to begin dealing with aging population issues.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobilizing Neighborhoods &amp; Communities</td>
<td>Implemented a tri-county training program through the Eastern Adirondack Health Care Network for community members to become facilitators in Arthritis Self-Management classes. Facilitated several media articles/stories related to aging issue. Increased dementia screening opportunities through the Eastern Adirondack Health Care Network</td>
</tr>
<tr>
<td>Changing Organizational Practices</td>
<td>Point of Entry into services for the elderly was developed and implemented as part of a state wide effort through local Office for the Aging. Participated in local health fair days/efforts to promote aging services and job opportunities.</td>
</tr>
<tr>
<td>Fostering Coalitions &amp; Networks</td>
<td>Continued Continuity of Care collaboration addressing aging issues.</td>
</tr>
<tr>
<td>Educating Providers</td>
<td>Conducted community education on issues related to the aging population targeting the workforce and area businesses. Conducted a regional workshop related to aging issues to increase knowledge and understanding of the issues.</td>
</tr>
<tr>
<td>Promoting Community Education</td>
<td>Fairs and other community gathering opportunities were used to begin introducing the concept on single point of entry. Fairs and community gatherings were used for educating community members as to the resources available to them or family members or friends as they age.</td>
</tr>
<tr>
<td>Strengthening Individual Knowledge &amp; Skills</td>
<td>Distributed educational material on the negative health effects of exposure to second hand smoke. Conducted several professional presentations/training on the MAPP/CHA process to encourage collaboration. Participated in several media outlet stories on MAPP/CHA to increase community membership understanding of this community collaboration.</td>
</tr>
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</table>
CLINTON COUNTY HEALTH DEPARTMENT

2010-2013 Focus Areas for Clinton County

- Access to Quality Healthcare
- Chronic Disease
Access to quality healthcare covers a range of issues, including adequate health insurance for all, physician and other provider supply and distribution, and preventive, diagnostic and healthcare treatment.

There are many regional factors that impact access, such as rural geography, population density, educational and employment opportunities, regional economics, transportation and more. All of these factors interact and impact access to quality healthcare in Clinton County and the region.

Access to quality healthcare, in turn, determines health outcomes from preconception throughout life, aging, and death. The targeted populations will be individuals who are less likely to have access to quality healthcare, such as women, senior citizens, low-income residents, families with young children, less educated residents, racial and ethnic minorities, and those without health insurance.

By selecting this as a priority, it provides the opportunity for hospitals, health departments and other partners to further develop and coordinate efforts to positively impact the factors and issues that comprise access to quality healthcare.

The percent of adults with health care coverage in Clinton County (90.7%) is higher than the state (86.3%) and national (85.5%) percentages.

Healthy People 2020 reported that 83.2% of persons had medical insurance in 2008, also aiming for a goal of 100% coverage.

Similarly, the percent of adults with a regular health care provider in Clinton County (87.3%) is higher than both the state (82.8%) and national (80.0%) percentages.

Healthy People 2020 reported that 76.3% of persons had a usual primary care provider in 2007, setting the goal for 83.9%.

Data taken from 2009 MAPP Document and Healthy People 2020.
### Access to Quality Healthcare Improvement Strategies

<table>
<thead>
<tr>
<th>Objective</th>
<th>Estimated Date of Completion</th>
<th>Method</th>
<th>Outcome</th>
<th>Partners</th>
<th>Essential Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Actively participate in service line meetings to support the Adirondack Medical Home Model currently being developed and implemented in Clinton County</td>
<td>December 2012</td>
<td>Fostering Coalitions &amp; Networks—<em>Systems</em></td>
<td>Dates and attendance at 3 meetings will be documented</td>
<td>CVPH Adirondack Medical Home CCHD</td>
<td>5</td>
</tr>
<tr>
<td>2. Assure public health safety net services such as HPV vaccine, HIV testing and counseling for all eligible Clinton County residents</td>
<td>December 2012</td>
<td>Educating Providers—<em>Systems</em></td>
<td>Fewer residents will go without important services</td>
<td>Primary Care Providers AIDS Council CCHD</td>
<td>9</td>
</tr>
<tr>
<td>3. Continue to support and promote early cancer screening opportunities through the NYSDOH/CCHD Cancer Screening Program for program eligible residents</td>
<td>December 2012</td>
<td>Strengthening Individual Knowledge &amp; Skills—<em>Systems</em></td>
<td>Program participant numbers will increase for all services provided by increased awareness of available services</td>
<td>CCHD CVPH</td>
<td>7</td>
</tr>
<tr>
<td>4. Provide 2-4 opportunities for preceptorships and/or internship experience for students in a variety of public health disciplines to promote career development</td>
<td>December 2012</td>
<td>Strengthening Individual Knowledge &amp; Skills—<em>Systems</em></td>
<td>Participants will pursue careers in public health system</td>
<td>CCHD CVPH Other local agencies</td>
<td>8</td>
</tr>
</tbody>
</table>
Chronic Disease

There are a wide variety of factors that contribute to the development of chronic diseases. Some of the most prevalent causes that have been identified nationally, state-wide, and county-wide are tobacco usage, inadequate nutrition, and lack of physical activity. By targeting these three areas, the high rates of chronic disease and resulting health complications can be decreased.

Tobacco Usage

In 2008, the percent of adult smokers living in Clinton County was 19.8%, a rate that exceeds the New York State Prevention Agenda Objective (NYS PAO) for 2013 and Health People 2020 Objectives. The high age-adjusted incidence rates of these diseases in Clinton County indicate that smoking is indeed an area of concern. Additionally, non-smokers in the presence of smoking individuals suffer from respiratory diseases and other negative health effects. By decreasing smoking rates in adolescents, adults, and prenatal women the prevalence of chronic disease can be prevented.

Nutrition & Physical Activity

The percentage of overweight and obese children and adults continues to increase in Clinton County, mirroring both state and national trends. It is clear that residents are regularly eating and drinking excessive calories while lacking adequate physical activity. In 2008, the percentage of obese (BMI>30) adults in Clinton County was 32.6%, with only 24.9% of adults reporting that they consume five or more fruits or vegetables per day. The Childhood Weight Collection Project conducted in 2006 reported that 43.4% of girls and 41.3% of boys (ages 2-19) were at-risk or overweight in Clinton County.

The percentages reported can only be improved by promoting overall lifestyle changes that support an increase in physical activity and healthy eating habits. These changes will be enforced through community partnerships, marketing campaigns, and local school involvement.
Clinton County shows a higher rate of smoking in adults (19.8%) than NYS (16.5%) but a lower rate than the US percent (20.6%). Healthy People 2020 is also aiming for 12% smoking rate for adults.

In 2011, Clinton County data indicated that 51% of preschool, 61% of elementary school, 63% of middle school, and 51% of high school children were in the elevated BMI percentile (>85%). Additionally, pooled data for all ages showed that 21% were ≥95th percentile.

The percent of adults who are obese is higher in Clinton County (32.6%) than in NYS (23.6%) but not the US (34.0%). Healthy People 2020 is aiming to decrease the obesity rate to 30.6% for adults.

The percent of adults engaged in some type of leisure time activity exceeds the NYS Prevention Agenda Objective (80%).

The percent of adults eating five or more fruits or vegetables per day in Clinton County (24.9%) is below the NYS Prevention Agenda Objective of 33%.

Data taken from 2009 MAPP Document and Healthy People 2020.
## Chronic Disease Improvement Strategies

<table>
<thead>
<tr>
<th>Objective</th>
<th>Estimated Date of Completion</th>
<th>Method</th>
<th>Outcome</th>
<th>Partners</th>
<th>Essential Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Continue work to establish a No Tobacco policy on all Clinton County property</td>
<td>December 2011</td>
<td>Influencing Policy &amp; Legislation—Policy</td>
<td>A defined policy will be in place for Clinton County properties</td>
<td>County Legislature CCHD ATFN</td>
<td>5</td>
</tr>
<tr>
<td>2. Establish 2 additional community gardens in Clinton County</td>
<td>September 2012</td>
<td>Mobilizing Neighborhoods &amp; Communities—Environment</td>
<td>Two locations will be identified and operational</td>
<td>CCHD OneWorkSource Town of Plattsburgh</td>
<td>5</td>
</tr>
<tr>
<td>3. Establish a task force to develop a tool for assessing/inventorying available physical activity opportunities throughout Clinton County for all ages</td>
<td>December 2012</td>
<td>Mobilizing Neighborhoods &amp; Communities—Systems</td>
<td>Assessment tool developed for future use in determining inventory of county based physical activity programs, activities, and events</td>
<td>CCHD SUNY Plattsburgh student interns Town of Plattsburgh Community Youth Commissions</td>
<td>5</td>
</tr>
<tr>
<td>4. Create a preliminary design for trail and bike connectivity in Clinton County</td>
<td>May 2013</td>
<td>Mobilizing Neighborhoods &amp; Communities—Environment</td>
<td>Completed design plan for trail and bike connectivity</td>
<td>Town of Plattsburgh City of Plattsburgh SRT Committee TDC Planning Office of Clinton County Town of Saranac</td>
<td>4</td>
</tr>
<tr>
<td>5. Implement changes in one area restaurant to offer healthier options when dining out</td>
<td>October 2012</td>
<td>Changing Organizational Practices—Systems</td>
<td>Changes will be incorporated into facility menu in one local eatery</td>
<td>CCHD Local restaurant SUNY Nutrition Dept. Local media AmeriCorps for the Adirondacks</td>
<td>3</td>
</tr>
</tbody>
</table>

*Community Health Improvement Plan, January 2012*  
ATFN: Adirondack Tobacco Free Network  
SRT: Saranac River Trail  
TDC: The Development Corporation
<table>
<thead>
<tr>
<th>Objective</th>
<th>Estimated Date of Completion</th>
<th>Outcome</th>
<th>Essential Service</th>
<th>Method</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 Establish policies in a minimum of three worksites for sugar-sweetened beverage and/or snack vending options for their employees</td>
<td>March 2012</td>
<td>Policies at 3 locations will be developed, signed and implemented</td>
<td>Changing Organizational Practices—Policy</td>
<td>Local Business</td>
<td>CCHD CVPH SUNY Plattsburgh Municipalities</td>
</tr>
<tr>
<td>7 Initiate changes in options at a minimum of one worksite with criteria-type vending for healthier food choices for their employees</td>
<td>September 2012</td>
<td>One worksite will have pre and post implemented changes in options for food</td>
<td>Changing Organizational Practices—Systems</td>
<td>Local business</td>
<td>CCHD CVPH</td>
</tr>
<tr>
<td>8 Establish a snack vending machine policy at CVPH for the entire facility</td>
<td>December 2012</td>
<td>Policy will be completed and fully implemented</td>
<td>Changing Organizational Practices—Policy</td>
<td>CVPH Foundation</td>
<td>CCHD</td>
</tr>
<tr>
<td>9 Introduce at least 3-5 worksites to food, beverage, and vending changes that can be implemented to impact employee health</td>
<td>February 2012</td>
<td>Dates and attendance at developed business workshop will be documented</td>
<td>Changing Organizational Practices—Policy</td>
<td>Development Corporation</td>
<td>CCHD</td>
</tr>
<tr>
<td>10 Assist three school districts in establishing and submitting plans for physical education to state education department for approval</td>
<td>June 2012</td>
<td>Three identified school districts will submit plans to the NY State Education Department</td>
<td>Changing Organizational Practices—Policy</td>
<td>CCHD—Healthy Schools NY</td>
<td>School districts</td>
</tr>
</tbody>
</table>
### Chronic Disease Improvement Strategies

<table>
<thead>
<tr>
<th>Objective</th>
<th>Estimated Date of Completion</th>
<th>Method</th>
<th>Outcome</th>
<th>Partners</th>
<th>Essential Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>December 2012</td>
<td>Involve four different agencies/individuals/organizations through a variety of venues to communicate about the sustainability of tobacco policies targeting youth</td>
<td>Fostering Coalitions &amp; Networks—Policy</td>
<td>Social marketing campaign will be conducted and sustainable tobacco policies will be planned</td>
<td>ATFN</td>
</tr>
<tr>
<td>12</td>
<td>June 2012</td>
<td>Open the Saranac River Trail to the public through an educational “launch” event</td>
<td>Promoting Community Education—Environment</td>
<td>SRT will be open and identified to community members</td>
<td>SRT Committee, City of Plattsburgh</td>
</tr>
<tr>
<td>13</td>
<td>January 2013</td>
<td>Develop a template and plan for sustainable grocery store tours incorporating WIC food items and healthier shopping for Clinton County larger markets</td>
<td>Strengthening Individual Knowledge &amp; Skills—Systems</td>
<td>Curriculum and business plan for sustainable tours will be completed</td>
<td>CCHD—WIC, CCHD—HPP, Grocery stores, Community participants, AmeriCorps for the Adirondacks</td>
</tr>
</tbody>
</table>
Conclusion

The local public health system in Clinton County has embraced the concepts and methods needed to effectively address the identified major health issues impacting our residents. It has become focused on the development and implementation of plans based on best practice models that have proven successful in other parts of New York State and the country. While we anticipate that benefits will not be demonstrated immediately, the established partnerships and collaborations have assured that favorable health change indicators ultimately will be seen.

Keeping these efforts dynamic within the community will be a challenge for everyone. The direction that has been paved by various groups has been institutionalized within their agencies’ strategic plans and some within their annual budgets. Ownership of the objectives identified and implemented is shared, along with the credit for the success.

The CHIP (Community Health Improvement Plan) will help to provide an additional bond of cooperation throughout the community, formulate a strategic and coordinated community plan for change, and serve as the future infrastructure for the local public health system to fulfill the mission.
Community Assets & Resources

The following organizations and groups have been used in the MAPP process and will be contacted for further assistance in the community health improvement plan process and implementation:

Local & State Government

Town Offices in Clinton County:
- Altona
- Ausable
- Beekmantown
- Black Brook
- Chazy
- Champlain
- Clinton
- City of Plattsburgh
- City of Plattsburgh Recreation Dept.
- Clinton County Mental Health Dept.
- Clinton County Nursing Home
- Clinton County Office for the Aging
- Clinton County Department of Social Services
- Clinton County Legislature
- Clinton County Board of Health
- Village of Champlain
- Village of Keeseville
- Village of Rouses Point
- Youth Bureau of Clinton County

Libraries

- Clinton County Library System

Schools

- CV Tech of Clinton County
- Technical Assistance Center of SUNY Plattsburgh
- SUNY Plattsburgh Fienberg Library
- SUNY Plattsburgh Presidents Office
- Clinton Community College

Community Based Organizations

- American Red Cross
- Advocacy and Resources Center
- Behavior Health Services North, Inc.
- Champlain Valley Family Center
- Eastern Adirondack Health Care Network
- Joint Council for Economic Opportunity
- Local Chambers of Commerce & Reps
- National Alliance on Mental Illness of Champlain Valley
- RSVP of Clinton County
- Senior Citizens Council of Clinton County

Hospital

- CVPH Medical Center
- CVPH Board of Directors
- Foundation of CVPH Medical Center

Health Care Providers

- North Country Home Services
- Planned Parenthood of the North Country NY
The following organizations and individuals participated in the assessment and prioritization of community health needs:

**MAPP 2004-2009 Clinton County Public Health Members**

**Leadership Committee**
Paula Calkins Lacombe, Director  
*Clinton County Health Department*

Laurie Williams  
*Clinton County Health Department*

Jerie Reid  
*Clinton County Health Department*

**Hospital Partners:**
Michael Hildebran  
*CVPH Medical Center*

**Data Collection Consultant Committee**
Theresa Bennett  
*CVPH Medical Library*

Victoria Zinser Duley  
*CVPH Medical Library*

**SUNY Plattsburgh Technical Assistance Center**
Theresa Bennett  
*CVPH Medical Library*

**SUNY Plattsburgh Nursing Program**
Anne Bongiorno, Instructor  
*CVPH Medical Library*

An Du, SUNY Student  
*CVPH Medical Library*

Theresa Oszust, SUNY Student  
*CVPH Medical Library*

Joanna Meyer, SUNY Student  
*CVPH Medical Library*

Chris Mikkelson, SUNY Student  
*CVPH Medical Library*

**Eastern Adirondack Health Care Network**
Lythia “Lee” Vera  
*CVPH Medical Library*

**Clinton County Health Department**
Laurie Williams  
*CVPH Medical Library*

**SUNY Albany School of Public Health**
Jennifer Sadd  
*CVPH Medical Library*

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**Action for Health Members**

American Cancer Association  
American Heart Association  
Behavioral Health Services North  
Child Care Coordinating Council  
City of Plattsburgh Recreation Department  
Clinton Community College  
Clinton County Health Department Administration  
Clinton County Health Department Home Care Services  
Clinton County Health Department Nutrition Services  
Clinton County Healthy Schools NY  
Clinton County Office for the Aging  
Clinton County Planning & Transportation  
Clinton County Youth Bureau  
Cornell Cooperative Extension & 4H Club  
CVPH Medical Center  
CVPH Medical Library  
Development Corporation  
Eastern Adirondack Health Care Network  
Family Connections of Clinton County  
Foundation of CVPH Medical Center  
Northeastern Clinton Central School Nurse  
PARC Wellness Center  
SUNY Plattsburgh Sports & Wellness Program  
SUNY Plattsburgh Nursing Department  
Town of Plattsburgh  
Town of Plattsburgh Planning Department  
Town of Plattsburgh Recreation Department  
United Way of Clinton and Franklin Counties
1. **Monitor** health status to identify and solve community health problems.

2. **Diagnose and investigate** health problems and health hazards in the community.

3. **Inform, educate, and empower** people about health issues.

4. **Mobilize** community partnerships and action to identify and solve health problems.

5. **Develop** policies and plans that support individual and community health efforts.

6. **Enforce** laws and regulations that protect health and ensure safety.

7. **Link** people to needed personal health services and assure the provision of health care when otherwise unavailable.

8. **Assure** competent public and personal health care workforce.

9. **Evaluate** effectiveness, accessibility, and quality of personal and population-based health services.

10. **Research** for new insights and innovative solutions to health problems
References


Available on the web at:

Local Public Health Sites:  www.clintonhealth.org  www.co.essex.ny.us/PublicHealth  www.franklincony.org

