

COMMUNITY ACTION PLAN FOR SAN JUAN COUNTY

CREATED BY:
COMMUNITY HEALTH IMPROVEMENT COUNCIL
FOR SAN JUAN COUNTY
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Executive Summary

The Community Health Improvement Council (C.H.I.C) serves as the comprehensive community health improvement council for San Juan County. The mission of the C.H.I.C is to promote the health and well-being of all people in San Juan County and neighboring areas through broad-based dialogue, partnership, advocacy and unified action.

The purpose of the Community Health Improvement Action Plan is to create a four year planning guide for the Community Health Improvement Council and for San Juan County organizations and residents to help improve health within the County.

The planning process for the Community Action Plan for FY2011 through FY2014 began in 2008 when several community needs assessments were published. A County wide health summit was held on May 12, 2009 at the Farmington Civic Center. The main focus of the health summit was to gain dialogue and input from the community at large through round table discussions. After reviewing data from the San Juan County Community Profile, the Health Summit, as well as other community sources the C.H.I.C created a survey tool to rank the major issues in the community. The top five rankings from that survey are listed below:

1. Healthcare
2. Affordable Housing
3. Substance Abuse
4. High Rates of Poverty
5. Infant and Prenatal Health Care

On November 19, 2009 the committee voted to select access to care as a priority and to continue with the priority of healthy infant practices.

Access to Care

This priority was chosen due to the importance that access to care has on all aspects of a healthy lifestyle. The C.H.I.C has analyzed the data around ways to impact the issue of access to care in San Juan County and has found that the community sees a lack of awareness as a primary barrier.

The C.H.I.C has chosen a strategy to address this issue through a comprehensive campaign that educates organizations and residents of San Juan County on utilizing services and referrals to provide better access to care. Through the utilization of a GIS mapping of health issues in the County, the Community will be able to:

1. share information about local demographics and location of health and social services & resources;
2. better understand the spatial distribution of resources and related challenges of geographic access in rural areas; and
3. monitor changes in access over time.

The C.H.I.C will also work to share information among organizations and the general public. Organizations will be able to make use of the Community Dashboard website to access information to community data indicators, as well as community services.

Healthy Infant Practices

With San Juan County having a young population, it is important that the community works to make sure that children learn healthy habits early in life. The health of the youth population in a community is important in creating a future community that is as healthy as possible.

The Healthy Infant Practices campaign will educate parents and caregivers on the importance of healthy oral hygiene as part of the first step and then over the span of the four year plan will work to change social norms on oral health, eating habits and physical activities for young children ages 0 to 3.

The campaign will work to convince current dentists in San Juan County to participate in giving exams to children with Medicaid and other insurance providers. The Council expects to see an increase in dental caries in San Juan County within the first two years of the program as more children are examined and more problems are discovered but the C.H.I.C hopes to see a decrease within four years as the social norms campaign works to change perceptions of what are considered healthy behaviors regarding sippy cups, bottles, eating habits and physical activity of children ages 0 to 3.

Introduction

The Community Health Improvement Council (C.H.I.C) serves as the comprehensive community health improvement council for San Juan County. The C.H.I.C has received formal recognition from the San Juan County Board of Commissioners and works with County, City, Tribal and State governments on health planning and to address issues as they relate to the C.H.I.C's broad definition of health. The C.H.I.C is composed of individual citizens, groups, service providers and other agencies committed to improving the overall health of San Juan County.

I. Purpose of Community Action Plan

The purpose of the Community Health Improvement Action Plan is to create a four year planning guide for the Community Health Improvement Council and for San Juan County organizations and residents to help improve health within the County. The Community Action Plan was developed to help guide the C.H.I.C in determining goals and objectives of health issues that are impacting residents within San Juan County.

II. Community Description

San Juan County is situated on 5,500 square miles in the northwestern corner of New Mexico. In the heart of the Four Corners region, San Juan is bordered by Colorado to the North, Arizona to the West, and Utah at its northwestern tip. The western portion and areas of southeastern San Juan County are occupied by the Navajo Indian Reservation. San Juan County is a unique mixture which serves as a retail hub for northwest New Mexico and the Four Corners. Two thirds of the county area is Navajo Nation, one of the largest indigenous cultures in the United States with its own language, rich cultural heritage and government.

The Farmington area, and more generally, the tri-city area of Farmington-Aztec-Bloomfield, is a growing urban area. On the Navajo Nation, the community of Shiprock is a population center for the Shiprock Agency. However, much of the county is highly rural, with inherent challenges of access to services, as well as the benefits of a rural lifestyle appreciated by many residents.

San Juan's median age is younger overall than New Mexico and the nation, and has higher proportions of young people among Native American and Hispanic populations. San Juan County is unique in that it has a minority majority population. Graduation level and college preparedness is a state-wide concern. San Juan County has fewer residents who have achieved 4-year college and graduate degrees, despite the majority of high school students' intention to continue their education. The county also has a high school graduation rate that is below state and national benchmarks.

Poverty affects all areas of life, including health, educational attainment, stress and general well-being. San Juan County encompasses areas of extreme household and child poverty, coupled with unemployment and transportation

challenges. This is especially true for rural areas and parts of the Navajo Nation where poverty is 30% or higher, as well as poorer neighborhoods in Farmington.

III. Planning Process

The planning process for the Community Action Plan for FY2011 through FY2014 began in 2008 when several community needs assessments were published. The San Juan County Partnership Needs Assessment was published in early 2008 and the C.H.I.C used this document to create a listing of the issues that were identified as the most important to San Juan County residents. Through multiple council meetings there was dialogue around these issues and then the survey was created and sent out to C.H.I.C members, participants, as well as community members involved in health issues throughout San Juan County.

Once the top issues were identified as those that people felt the C.H.I.C should address, then planning for a County wide health summit began. The health summit was held on May 12, 2009 at the Farmington Civic Center. Community members interested in health issues were invited and the San Juan Regional Medical Center 2008 PRC Community Health Assessment, along with the San Juan County Partnership 2008 Needs Assessment were presented to the Community. The main focus of the health summit was to gain dialogue and input from the community at large through round table discussions. Each table had a different theme that was discussed. The tables included: food and housing; environmental issues; access to healthcare; chronic illness; dental; injury prevention; and, public safety. Data was collected through this narrative process and combined with data from the San Juan County Profile.

The data was reviewed by health council members and participants. Then additional dialogue and discussion was held at the Core Team meetings and at the monthly health council meetings. On November 19, 2009 the committee voted to select access to care as a priority and to continue with the priority of healthy infant practices.

The C.H.I.C consulted with Natalie F. Salvatore, PH.D. and Shannon Dee and a revision and update for the San Juan County Profile was completed in January 2010. The Council and Coordinator reviewed changes to the Profile and worked to update the Community Action Plan for San Juan County in January 2010, as well.

Vision Statement

The mission of the C.H.I.C is to promote the health and well-being of all people in San Juan County and neighboring areas through broad-based dialogue, partnership, advocacy and unified action.

I. Definition of Health

The C.H.I.C defines health in the broadest sense of the word. The Council believes that health is more than just the community's physical needs being met. The C.H.I.C agrees with the world health organization as it defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. The C.H.I.C created a wheel diagram that shows the spokes of the wheel that the Council believes to be vital to a healthy community. These spokes include transportation, undocumented citizens, education, veterans' health, environmental, senior issues, behavioral health, justice systems, health care, affordable housing, developmental disabilities, community emergency response, maternal child health and teen issues, and violence issues. The C.H.I.C strives to include all spokes of the wheel as part of the Council meetings and in decision making and planning.



II. Description of a Healthy San Juan County

The San Juan Community Health Improvement Council envisions healthy communities in which the following elements are increasingly evident:

- **Individual and Family Wellness**
Families and individuals are characterized by a high degree of wellness, as reflected in personal health and self-respect, inter-generational activities and relationships, family cohesiveness, family structures in which individual members find respect, nurturance and support, and ample opportunities for family activities in the community;
- **Community Wellness**
Community life is characterized by an overall condition of wellness, as reflected in a sense of inclusion and strong participation in the democratic process; public safety; the absence of violence, exploitation, discrimination, crime and substance abuse; protection of public health and the environment; cooperative leadership; and economic security and sustainability;
- **Cultural Respect**
There is a positive valuing, respect and inclusion of the diversity of cultures that comprise the county's communities; there is proportionate representation of those cultures in the benefits and responsibilities of community life.
- **Educational Quality**
Priority is placed on quality education for all residents, in recognition of the correlation between educational attainment and lifelong health, and with an emphasis on asset-based and success-oriented approaches to teaching and learning.
- **Access to Services**
Families and individuals have access to: food and housing; affordable and quality medical, dental and behavioral health services; and, socioeconomic support services.
- **Cooperative Spirit**
Value is placed on the "ethic of collaboration" as reflected in cooperation and partnership between and among agencies and governments, civic activity and service by citizens, commitment to participatory decision making and problem solving in the spirit of openness, inclusion, and goodwill between groups and individuals, and a shared commitment to ecological and economic sustainability.

Community Health Assessment

I. Summary of San Juan County Health Profile

Highlighted in the January 2010 Revision and Update of the San Juan County Community Health Profile are important health issues and opportunities for improvement in San Juan County. These include:

Community, Health Status, and Disparities

- Reduce financial burden and related stress, recognizing disparities experienced by Race/Ethnicity, by persons in rural environments of the county, renters, and uninsured.
- Build on community assets, including the rural lifestyle and “small-town” atmosphere, and residents’ appreciation of key facilities and agencies.
- Improve capacity, access to and/or utilization of prenatal care.
- Reduce risk behaviors (e.g., obesity, tobacco use, poor nutrition and physical inactivity).
- Build on protective factors (e.g., community involvement by youth, community centers and neighborhood attachment, exercise and well-being programs, parenting support).
- Increase preventative health care behaviors, such as early screenings, routine check-ups, oral care for children and adults, and flu vaccinations.
- Reduce substance abuse, recognizing the preventable contribution that alcohol-involvement makes to a range of community health problems, including chronic liver disease, accidental injury deaths, domestic violence, suicide and homicide.
- Increase understanding of the effects of and reduce the exposure to environmental health hazards, such as ozone, mercury and pollution (PM) emissions.

Health Related Services

- Increase awareness of services and resources in San Juan County, including health care services and programs, youth and family support services, prevention programs, financial assistance programs, recreational and community networking and peer support opportunities, among others.
- Support the expansion of public transportation, agency-provided transportation, and alternatives to single-driver commuting, such as carpooling.
- Increase information sharing between service agencies.
- Gain a better understanding of the intertwining issues of capacity and access to care in San Juan County, including level of awareness and access by residents in different areas of the county, and the degree to which barriers to care are overlapping.

II. Major Health Issues

Affordable Housing

DWELLINGS AND TYPE: In 2008, of the 40,000 occupied housing units, 76% were owner-occupied, 24% were renter-occupied, and an additional 6,000 units were vacant. In 2008, the majority of housing units in the county (56%) were single detached structures, followed by a relatively large proportion of mobile homes (33%). Approximately 3% of all housing units lacked plumbing, 3% lacked complete kitchen facilities and 11% lacked telephone service (American Community Survey, 2008).

HOUSING COST BURDEN: Approximately 1 of 3 San Juan County residents is considered housing cost-burdened: 27% of home owners with a mortgage are paying 30% or more of their income on housing; 35% of renters are doing so.

RENTERS' AND COST BURDEN: Renters are particularly cost-burdened, and this is especially true in urbanized areas of Farmington where a relatively short supply of rental housing is in high demand. According to HUD, households that pay greater than 50% of their income are considered in greatest need: 18% of renters in San Juan pay 50% or more of their income on housing costs (Farmington New Mexico 2009 Consolidated Plan: HUD Community Development Block Grant).

Deaths due to Injury

UNINTENTIONAL INJURY DEATH: Unintentional (accidental) injury deaths include deaths from accidental poisonings, falls, drowning, fatal motor vehicle crashes, and other injuries that result in death. Unintentional injury or accidents is the 3rd leading cause of death in San Juan County. In 2006, there were 100 unintentional injury deaths in San Juan County, 67 males and 33 females, with a rate of 86.5 for that year. The county's rate is significantly higher than state and national rates of 64 and 39 respectively. This pattern of results holds for rates aggregated across years, with a county rate of accidental death due to injury of 78.4 deaths per 100,000 for years 2003-2005, higher than New Mexico's rate of 62.3, and more than twice the national rate of 37.2.

Motor Vehicle Traffic Fatalities: A sub-set of unintentional injury deaths is motor vehicle accidents. Of the 100 injury deaths in 2006 in San Juan, 47 were motor vehicle accidents (males, 30 deaths; females, 17 deaths). San Juan County has a high rate of motor vehicle deaths, compared to New Mexico and the nation. With a rate of 37.3 deaths per 100,000 (in 2006), San Juan's rate of motor vehicle fatalities is significantly greater than New Mexico's rate of 22.7, and is well over twice the U.S. rate of 15.2 (in 2005).

Alcohol Involvement in Motor-Vehicle Fatalities: While San Juan County has a high rate of motor-vehicle fatalities overall, the relative level of alcohol-involvement is also markedly high. Of the 191 people killed on the roads in San

Juan County over a period of five years, from 2004 to 2008, 104 of them were in alcohol-related crash fatalities – that is over 54% alcohol-involvement. In other words, over half of the traffic fatalities involved alcohol. New Mexico's average alcohol-involvement for these years was 40%.

Youth Risk & Protective Behaviors: On the NM YRRS, youth in San Juan County report behaviors that contribute to unintentional injury at a level similar to New Mexico overall. In San Juan, 12.8% reported that they drove after drinking in the past 30 days; 27.7% rode with a driver who had been drinking.

Domestic Violence

CHILD ABUSE: In SFY2009, according to New Mexico Child Youth and Family Department, there were 452 substantiated allegations of child abuse in San Juan County. The majority of these, 68%, were cases of physical neglect. An additional 28.5% were physical abuse and 3.1% were sexual abuse. Over the last 6 years, rates of reported child abuse have not changed substantially.

Related Self-Report: Among respondents asked to report on what has happened to them and/or someone in their family in the last 12 months, the San Juan County Partnership Needs Assessment survey (2008) reported that 14% of the respondents reported that a child in the family was a victim of bullying; 6% indicated that a family member was a victim of child abuse, and 5.2% reported that a family member was a victim of sexual abuse.

DOMESTIC VIOLENCE: The 2008 Needs Assessment also found that 16% of respondents reported that they or a family member was a victim of domestic violence in the last 12 months. San Juan Regional Medical's Center's Community Health Survey reported similar findings, with 16.5% of respondents acknowledging that they have been threatened by physical violence by an intimate partner in the past five years, similar to reports found on national surveys (14.6%).

Healthcare

HEALTH CARE PROFESSIONALS – SHORTAGE DESIGNATION: Like 17 other counties in New Mexico, San Juan is a "whole county designated service area," that is, an area designated as having a shortage of primary medical care, dental or mental health providers.

Physicians: According to the New Mexico Health Policy Commission's annual report of health professionals in New Mexico, (2009), there were 161 Licensed Physicians residing in San Juan County in 2008, with a rate of 1.25 Physicians per 1,000 people. This is below New Mexico's rate of 2.22. Previous years' HPC reports suggest this is a *decrease* in the number of physicians, down from 218 in 2007.

Specialty Care Physicians: Of the 161 physicians, 69 are "Licensed Specialty Care Physicians," meaning they have a special practice area such as cardiovascular disease, urology, rheumatology, or other. With 69 Licensed

Specialty Care Physicians, San Juan has a rate of .54 per 1,000 people, about half New Mexico's rate of 1.09.

Nurses: In 2008, there were 840 Licensed RNs, a slight increase from 810 in 2007. San Juan's rate of 6.52 RNs per 1,000 is under the New Mexico rate of 7.98 RNs per 1,000 people.

GOING ELSEWHERE FOR CARE: According to SJRMC's Community Health Assessment, and corroborated by similar findings by SJCP Needs Assessment, approximately 25% of county survey respondents seek medical care elsewhere, for example, by traveling to Albuquerque or Durango. Most respondents expressed they went elsewhere to receive some type of *specialty* care, such as, Cardiology.

DENTISTS: Dentists are in particularly short supply in New Mexico, and San Juan County is no exception. In 2007, there were 56 dentists in San Juan County, resulting in a rate of 45 per 100,000 people. This is similar to New Mexico's rate of 46 dentists per 100,000 people. New Mexico is ranked 50th, that is, *worst* in the nation for dentists per capita.

High Rates of Poverty

POVERTY ESTIMATES: According to 3-year estimates (American Community Survey, 2006-2008), 17% of people, all ages, in San Juan County were living below the poverty level. This includes 22.5% of all children, and 19% of people 65 years and older.

HOUSHOLDS: Among family households, 13.5% are living below poverty. A particularly vulnerable population is female-headed households, of which 33.5% are living below poverty. Of female-headed households with dependent children, 43% are in poverty. Eight percent of married couples, and 9% of married couples with children, are living in poverty.

Infant and Prenatal Healthcare

LEVEL OF PRENATAL CARE: Figure 4.4 shows the percent of births by level of prenatal care. In 2007, San Juan ranked 33rd out of 33 NM counties for percent of births receiving a high level of prenatal care. For "low" prenatal care as well, San Juan ranked 33rd (with 33 being the *worst*.)

PRENATAL CARE IN FIRST TRIMESTER: Early prenatal care is a predictor of continuous care, as well as one of the best assurances of infant health. San Juan County compares very poorly to both the state and the nation on this indicator. In 2007, 50% of mothers received prenatal care in the first trimester, compared with 73% in the state and 84% in the nation. The CDC 2010 Healthy People target is 90%. Moreover, the proportion of mothers receiving first trimester care has been progressively *decreasing* in the past 15 years, according to San Juan Regional's Community Health Assessment Report, 2008.

Public Transportation

On San Juan County Partnership's Key Informant Survey (2008), when asked to describe any barriers that might prevent people from using existing services, 50% of the survey respondents listed transportation and its central role in access to services.

Transportation Patterns: According to 2006-2008 American Community Survey 3-Year estimates, 85% of workers in San Juan County drove to work alone, 10% carpooled, 3% worked at home, and a small number (0.5%) took public transportation to work. The remaining 2% accounted for all other alternative means of transportation (such as biking, walking, motorcycles). The average commute time it takes San Juan County residents to get to work is 22.4 minutes. These transportation patterns are similar to other rural counties in New Mexico.

According to the 2008 SJCP Needs Assessment, 42.8% of the respondents reside in Farmington, yet the majority (90%) of respondents reported they do "most of their shopping" in Farmington. When asked if they have a car they can use, 89.6% of the respondents reported they did.

Public Transportation: Limited alternative transportation options exist outside of Shiprock and the tri-city area of Farmington-Aztec-Bloomfield, The Red Apple Transit is a small but growing public transportation system primarily within Farmington, plus a daily route each to Kirtland, Aztec and to Bloomfield. In addition, the Navajo Transit is a public transportation provider with a single daily route from Shiprock to Farmington, operating Monday through Friday.

III. Ranking of Health Issues

After reviewing data from the San Juan County Community Profile, as well as other community sources the C.H.I.C created a survey tool to rank the major issues in the community. Member and participants of the C.H.I.C were asked to complete a survey, as well as other members of the community involved in health issues within San Juan County. The rankings from that survey are listed below:

1. Healthcare
2. Affordable Housing
3. Substance Abuse
4. High Rates of Poverty
5. Infant and Prenatal Health Care
6. Domestic Violence
7. Public Transportation
8. Deaths due to Injury

Priority Areas

I. Priority Selection and Rationale

The C.H.I.C has chosen two priority areas. Those areas are:

- *Access to Healthcare*
- *Healthy Infant Practices*

These priorities were chosen through a ranking and community input process. These areas are a component of a major issue identified in San Juan County Community Profile and are included in objectives listed in the Department of Health Fiscal Year 2011 Strategic Plan.

- *Access to Care*

This priority was chosen due to the importance that access to care has on all aspects of a healthy lifestyle. In the San Juan County Community Profile, the San Juan County Partnership Needs Assessment and the San Juan Regional Medical Center's 2008 Community Health Assessment all documents addressed barriers to access to care.

With the current economic conditions, access to care is especially important as there has been an increase in people needing access to services such as housing, transportation, financial help, medical and dental services, etc. These services are often needed quickly and are vital to the community being healthy.

- *Healthy Infant Practices*

It has been said that good health begins even before birth. San Juan County is ranked the worst county in New Mexico in terms of the level of prenatal care. Prenatal care is an indicator of healthy infants and yet only 50% of San Juan County mothers received care in the first trimester, well below the Healthy People 2010 target of 90%.

There are multiple factors in a healthy lifestyle. Having a good start in oral health, healthy eating habits, physical activity and preventative care is important to infants. Children in San Juan County are particularly less likely to be seen for routine medical check-ups (78%), significantly lower than national findings (91%). Preventative care is important because many diseases and chronic health issues can be found and treated before they become severe if they are detected early.

Starting out with healthy choices makes it easier for children to continue making good choices as they grow. Obesity and diabetes are both issues in a healthy lifestyle. Among youth reports on YRRS (2007), 15% of youth in San Juan County are obese, which is somewhat higher than New Mexico's 11% overall. An additional 14% are overweight. In all, 29% of San Juan County youth are overweight or obese.

Problem Analysis

- *Access to Care*

Multiple issues affect access to care in San Juan County, including: a shortage of general physicians, specialists, dentists as well as nurses. This leads to patients having a hard time making appointments in a timely manner. This also leads to patients seeking services outside of San Juan County.

Transportation is also an access to care issue in San Juan County. The majority of health services are provided in Farmington and surrounding areas, which means for many people that makes it hard for them to access health services when they do not have reliable transportation.

This priority also addresses the issue of poverty. According to the New Mexico Dept of Health (NM-IBIS) 2006 estimates, 28% of San Juan County residents under age 65 are uninsured. This is similar to New Mexico overall, at 25.8%, but significantly higher than the 17.8% national percentage.

During the 2009 Health Summit much of the discussion from community members and leaders centered on there not being enough information shared between organizations and the public on available services. The overall sentiment was that while there are services that are lacking in the County, there are many services that are not being fully utilized because the community does not have the information needed to access them. This was a major concern to participants at the Health Summit.

- *Healthy Infant Practices*

With San Juan County having a young population it is important that the community works to make sure that children learn healthy habits early in life. The health of the youth population in a community is important to creating a future community that is as healthy as possible.

Some important health issues for children in San Juan County include childhood dental caries, obesity and diabetes. One aspect of children's health is that it affects others in the community because the parents and caregivers must be educated and make the changes necessary for their children to be healthy.

It is vital that parents learn that early preventative care is cheaper and more effective in the long run than continuing with current practices and then having to address the issues in later life.

II. Strategies to Address Priority Areas

- *Access to Care*

The C.H.I.C has analyzed the data around ways to impact the issue of access to care in San Juan County and has found that the community sees a lack of awareness as a primary barrier. This lack of knowledge regarding current services is a concern to organizations as it leads to under-utilization of services.

The C.H.I.C has chosen a strategy to address this issue through a comprehensive campaign that educates organizations and residents of San Juan County on utilizing services and referrals to provide better access to care. Through the utilization of a GIS mapping of health issues in the County the Community will be able to:

1. share information about local demographics and location of health and social services & resources;
2. better understand the spatial distribution of resources and related challenges of geographic access in rural areas; and
3. monitor changes in access over time.

The C.H.I.C will also work to share information among organizations referral partners and within the general public. Organizations will be able to make use of the Community Dashboard website to access information to community data indicators, as well as community services.

As many of San Juan County residents do not have easy access to internet services, the Council will present access to services information through newspaper articles, community forums and the ECHO Hope Housing project.

- *Healthy Infant Practices*

The Healthy Infant Practices campaign will educate parents and caregivers on the importance of healthy oral hygiene as part of the first step and then over the span of the four year plan will work to change social norms on oral health, eating habits and physical activities for young children ages 0 to 3.

The campaign will work to convince current dentists in San Juan County to participate in giving exams to children with Medicaid and other insurance providers. The Council expects to see an increase in dental caries in San Juan County within the first two years of the program as more children are examined and more problems are discovered, but the C.H.I.C hopes to see a decrease within four years as the social norms campaign works to change perceptions of what are considered healthy behaviors regarding sippy cups, bottles, eating habits and physical activity of children ages 0 to 3.

Community Action Plan

Access to Care

<u>Goals</u>	<u>Objectives</u>	<u>Community Partners/Resources</u>	<u>Health Status Outcomes/Indicators</u>
<p>Goal 1:</p> <p>Increase the community's knowledge and use of resources in San Juan County.</p>	<p>Objective 1.1 Create a campaign that educates the public on resources offered by different organizations in the area and how they can utilize those resources by 2012.</p> <p>Objective 1.2 Partner with local agencies, community members, neighborhoods, etc to share information on programs, resources and opportunities in San Juan County through neighborhood meetings and community forums by 2014.</p> <p>Objective 1.3 Partner with ECHO Hope Housing Program to support financial literacy classes, homebuyer education classes, etc by 2010.</p>	<p>San Juan Regional Medical Center</p> <p>ECHO Hope Housing Program</p> <p>San Juan County Partnership</p>	<p>Identification of services and opportunities within San Juan County.</p> <p>Increased awareness of community services available and increased utilization of those services.</p> <p>Number of participants who complete certification and qualify to purchase a home in San Juan County.</p>

<p>Goal 2:</p> <p>Increase the sharing of information among practitioners, the community and local organizations.</p>	<p>Objective 2.1 Utilize GIS mapping/spatial analysis of access to care in order to: (1) share information about local demographics and location of health and social services & resources; (2) better understand the spatial distribution of resources and related challenges of geographic access in rural areas; (3) monitor changes in access over time by 2014.</p> <p>Objective 2.2 Partner with local organizations to expand on the Community Dashboard data website to: (1) include a section dedicated to Access to Care, with data and GIS maps; (2) highlight current key resources and community activities that address selected indicators, and (3) provide the SJCP “Youth and Family Resource Guide” and the CHIC “Community Health Profile” as PDF’s available on the Dashboard site. Create a plan for maintaining the site and for increasing its use by practitioners, local organizations, and the community by 2012.</p>	<p>San Juan County Partnership</p> <p>Center Point Studio Consultants (GIS and Data Visualization)</p>	<p>Awareness of Community Dashboard Data Website as a resource portal for obtaining data about San Juan County.</p> <p>Awareness of Access to Care GIS Map resources among practioners and agencies, and the use of those resources in guiding decisions.</p> <p>Number of visits to Community Dashboard website.</p> <p>Number of times the Resource Guide and Community Health Profile were accessed and downloaded.</p>
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Healthy Infant Practices

<u>Goals</u>	<u>Objectives</u>	<u>Community Partners/Resources</u>	<u>Health Status Outcomes/Indicators</u>
<p>Goal 1: Increase community education on healthy infant practices.</p>	<p>Objective 1.1 Create a sustainable committee on Healthy Infant Practices Project (HIPP) that meets regularly by 2011.</p> <p>Objective 1.2 Implement advertising campaign to educate the general public on healthy infant practices by 2012.</p> <p>Objective 1.3 Partner with San Juan Regional Medical Center to provide perinatal education and classes that promote breastfeeding and other healthy infant practices by 2010.</p>	<p>San Juan Regional Medical Center</p> <p>Northwest District Dental Society</p> <p>Kirtland Schools' Parents as Teachers</p> <p>Farmington Municipal Schools' Parents as Teachers</p>	<p>Increased number of members regularly attending HIPP meetings</p> <p>Number of pamphlets, Sippy cups and other educational advertisements distributed on a yearly basis</p>

<p>Goal 2:</p> <p>Improve dental health in children ages 0 to 3 years.</p>	<p>Objective 2.1 Increase the number of children seen by a dentist before the age of 3 by 2014.</p> <p>Objective 2.2: Increase participation by local dentists in seeing children ages 0 to 3 and in taking children with Medicaid by 2011.</p> <p>Objective 2.3 Work with local pediatricians to have children receive fluoride varnish at the one year exam by 2014.</p>	<p>San Juan Regional Medical Center</p> <p>Northwest District Dental Society</p> <p>San Juan College Dental Hygiene Program</p>	<p>Increase the number of children seen by age three by NWDDS dentists. This will be tracked by the CDT code D0145 (oral exam of child under age 3).</p> <p>Increase in number of dentists on Healthy Infant Practices Project referral guide.</p> <p>Decrease in number of children requiring reconstructive dental surgeries for childhood dental caries.</p> <p>Number of pediatricians offering fluoride varnish at the one year well child visit.</p>
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<p>Goal 3:</p> <p>Improve the health of children in San Juan County by addressing obesity and diabetes issues.</p>	<p>Objective 2.1 Collaborate with local organizations to offer better access to exercise and physical programs within the County.</p> <p>Objective 2.2 Create campaign to educate parents on healthy eating and exercise practices.</p> <p>Objective 2.3 Partner with San Juan College to offer parenting classes for San Juan County parents and promote healthy practices.</p>	<p>San Juan College Center for Workforce Training</p> <p>San Juan Regional Medical Center</p>	<p>Increase in number and awareness of classes/events involving physical activities offered for mothers and young children.</p>
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