



Charlotte County
**COMMUNITY HEALTH IMPROVEMENT
PLAN**

2021-2025
2023 Revision

Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

Joseph D. Pepe, Ed. D., MSA
County Health Department Director/Administrator



Effective January 1, 2021 through December 31, 2025

Revised June 2023

Acknowledgements

This Community Health Improvement Plan (CHIP) was developed by the Florida Department of Health in Charlotte County, FL (DOH-Charlotte) as part of the department's full community health assessment process. The CHIP was informed by the 2020 Charlotte County Community Health and Needs Assessment (CHNA) as well as insight drawn from community focus groups and community surveys.

We would like to extend our sincere thanks to the following agencies for their support, expert contributions, and partnership in the development and execution of this 5-year Community Health Improvement Plan for Charlotte County, Florida:

- Alzheimer's Association
- American Foundation for Suicide Prevention
- Area Agency for Aging of Southwest Florida
- Aspen University
- Boys & Girls Club of Charlotte County
- Big Brothers Big Sisters
- CAB
- Center for Abuse and Rape Emergencies (C.A.R.E.)
- Center for Progress and Excellence
- CareerSource Southwest Florida
- Charlotte 2-1-1
- Charlotte Behavioral Health Care
- Charlotte Community Foundation
- Charlotte County Board of County Commissioners
- Charlotte County Community Services
- Charlotte County Fire & EMS
- Charlotte County Friendship Centers
- Charlotte County Government
- Charlotte County Healthy Start Coalition
- Charlotte County Homeless Coalition
- Charlotte County Human Services
- Charlotte County Medical Society
- Charlotte County Public Libraries
- Charlotte County Public Schools
- Charlotte County Sheriff's Office
- Charlotte Sun News
- Charlotte County Transit
- Charlotte County Veterans Services
- Children's Network of Southwest Florida
- City of Punta Gorda
- Coastal Behavioral Healthcare
- Drug Free Charlotte County
- Drug Free Punta Gorda
- Englewood Community Care Clinic
- Early Learning Coalition of Florida's Heartland, Inc
- Englewood Community Coalition
- Family Health Centers of Southwest Florida
- Fawcett Memorial Hospital
- First United Methodist Church
- Florida SouthWestern State College
- Golisano Children's Hospital of Southwest Florida
- Goodwill of Southwest Florida
- Green D.O.T. Grove City Manor
- Gulf Coast Partnership
- Gulfcoast South Area Health Education Center
- Habitat for Humanity
- Harbour Heights Community
- Harry Chapin Food Bank
- Health Planning Council of Southwest Florida
- Healthy Lee
- Healthy Start
- JFCS of the Suncoast
- Kids Thrive Collaborative
- Lifelong Learning Institute
- Lutheran Services Florida
- Military Officers Association of America
- Millennium Physicians Group
- Peace River Elementary
- Pregnancy Careline
- Pregnancy Solutions
- Punta Gorda Housing Authority
- Sarasota Memorial Hospital
- ShorePoint Health
- Sky YMCA
- Southwest Florida Counseling Center
- Sunshine Health
- TEAM Punta Gorda
- The Cultural Center
- The Verandas Tobacco Free Florida
- Today Matters! Mental Health Ministries
- Trabue Woods Community
- United Way of Charlotte County
- University of South Florida
- Valerie's House
- Veterans Affairs
- Virginia B. Andes Volunteer Clinic



For more information on the contents of this report or to become involved in any project or program listed, email us at HealthyCharlotte@flhealth.gov or call us at 941-624-7200. You may also visit our website at <https://www.HealthyCharlotteCounty.org> and like us on Facebook: <https://www.facebook.com/CharlotteCountyCHIP>.

**CHIP
Objective
Holders**



Table of Contents

Acknowledgements.....	i
CHIP Objective Holders	ii
Table of Contents.....	iii
Executive Summary	1
What is a Community Health Improvement Plan?	3
2020 Community Health and Needs Assessment	4
Our Vision	5
Prioritization Process	6
Charlotte County Description	7
Income Profile	8
The Social Determinants of Health in Charlotte County.....	9
Charlotte County Health Rankings	13
CHIP Health Areas.....	14
Priority 1: Adverse Childhood Experiences (ACEs).....	15
Priority 2: Mental Wellbeing and Substance Abuse	16
Priority 3: Household Stability	17
Charlotte County’s Priority Areas	18
2021-2025 CHIP Action Plan	19
Completed Objectives.....	26
Conclusion	29
Appendices	30



Executive Summary

As defined by the Public Health Accreditation Board (PHAB), this Community Health Improvement Plan (CHIP) plan serves as a "long-term, systematic effort to address public health problems on the basis of the results of community health assessment activities and the community health improvement process". It provides goals, strategies, and objectives that help guide the community in their efforts to impact their health priority areas.

The Charlotte County Community Health and Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) are a collaborative effort by the members of Healthy Charlotte. Healthy Charlotte is comprised of representatives from agencies throughout Charlotte County, Florida, as well as private citizens. This group acknowledges that collaborative initiatives to address the social determinants of health (SDOHs) are the most effective way of reducing health disparities and striving towards improved quality of life. Healthy Charlotte's mission is to identify community health assets and issues in Charlotte County, set actionable strategies for priority health objectives, and monitor progress toward those objectives. Their overall purpose is to improve the quality of life for all Charlotte County residents. To achieve this, Healthy Charlotte community members and organizations, which include the Florida Department of Health in Charlotte County (DOH-Charlotte), are involved in the process of developing, monitoring, and revising the community's CHNA and CHIP. Healthy Charlotte is comprised of two groups: Stakeholders and Steering Committee. The Healthy Charlotte Stakeholders determine priority health issues, determine initiatives, and provide feedback to the Steering Committee. The Healthy Charlotte Steering Committee review and identify top priority issues from CHNA data, review and identify top evidence-based initiative, monitor progress of initiatives, and provide updates to the Stakeholders.

As part of DOH-Charlotte's commitment to the continued assessment and development of community-based interventions to improve the health and well-being of all residents, DOH-Charlotte, in collaboration with Healthy Charlotte, presents the following 2021-2025 Community Health Improvement Plan (CHIP) for Charlotte County, Florida. This plan was developed based on the 2020 Charlotte County Health and Needs Assessment (CHNA) completed in February 2020, in which, Charlotte County residents identified 9 strategic areas of concern within the community. These 9 strategic areas were prioritized and yielded the following top 5 health priority areas:

1. Child Abuse, Neglect, and Well-Being
2. Behavioral, Social, and Emotional Health and Trauma
3. Healthcare
4. Environment
5. Aging

These areas reflect the initial prioritization but community surveys from CHNA placed affordable housing as the first area of interest but had lower feasibility, impact, and assets than the other prioritized areas. More specifically, these community surveys reflected that 55% of survey respondents chose "affordable housing" as essential to a healthy lifestyle. With the COVID-19

pandemic, the affordable housing concerns that the nation, state, and Charlotte County are facing, or the impact of Hurricane Ian, Healthy Charlotte selected Household Stability as a priority area in the 2023 extended CHIP. This priority area of Household Stability would not only include affordable housing but would work to address income and housing disparities, food insecurities, and other household disparities Charlotte residents face, all of which were exacerbated by the COVID-19 pandemic and Hurricane Ian. The other two priority areas selected by Healthy Charlotte were the top two health priority areas identified through the CHNA.

Charlotte County's CHIP that was initially published in 2021-2023 included a sole priority focus on Adverse Childhood Experience (ACEs). As part of the annual revision process of the CHIP, Healthy Charlotte elected to extend the plan through 2025. This extension was chosen to include more priority areas, include a more quality of life lens, and align closer to the Charlotte's 2020 CHNA. In addition to the vigilant effort to address ACEs and create a trauma informed, the community incorporated two additional priority areas into the CHIP's action plan; this was done to identify root causes and align with state agency and national plans. From this, ACEs, Mental Wellbeing & Substance Abuse, and Household Stability are the three priority areas for Charlotte County 2021-2025 CHIP.

To address the three priority areas of ACEs, Mental Wellbeing & Substance Use, and Household Stability, Healthy Charlotte utilizes an Action Plan to reduce community disparities. These goals, strategies, and objectives outlined in the Action Plan represent the dedicated work of Charlotte County agencies and their efforts to reduce ACEs among our youth and adults to improve the mental wellbeing, substance abuse, and household stability of all citizens. Each agency objective aligns with national and/or state goals while also addresses the challenge of health disparities to improve overall health outcomes for Charlotte County's residents.

In addition to these three priority areas, the Charlotte County Department of Health is committed to the continued surveillance and assessment of all aspects of the county's health to reduce health disparities and strive towards improved quality of life.

To become involved in the work of Healthy Charlotte or to provide feedback on this report, please contact the Florida Department of Health in Charlotte County at HealthyCharlotte@flhealth.gov.

What is a Community Health Improvement Plan?

A Community Health Improvement Plan (CHIP) is the final phase in the overall Community Health and Needs Assessment (CHA) process. Though several strategic planning methods exist, the Florida Department of Health in Charlotte County was guided by the Mobilizing for Action through Planning and Partnerships (MAPP) method, which emphasizes community-wide engagement and quality of life efforts in each of its six phases.

Following the completion of a community health assessment, community health improvement plans establish accountable and intentional goals, strategies, and objectives that ensure the most meaningful intervention(s) to improve the public health focus identified during the CHA. Above all, CHIPs enable multisector collaborations to improve health and social outcomes for all members of a community including the marginalized and communities of concern (COC). In the MAPP process, the CHIP is phase 6: Action Cycle, where all action steps are both proactive and comprehensive in nature and provide for a continuous improvement process with shared community ownership.

The process to implement the strategies and objectives outlined within this plan is ongoing, and therefore, renders this a living document. Charlotte County's CHIP is monitored quarterly and reviewed/revised annually. It was elected by Healthy Charlotte in 2022 that the CHIP's annual revision incorporates an extension of the plan until 2025, to incorporate the Minority Health Plan efforts and expand the priority areas to align with the CHNA. The full 2021-2025 CHIP Action Plan for Charlotte County, FL can be found on page 20.

The MAPP Phases

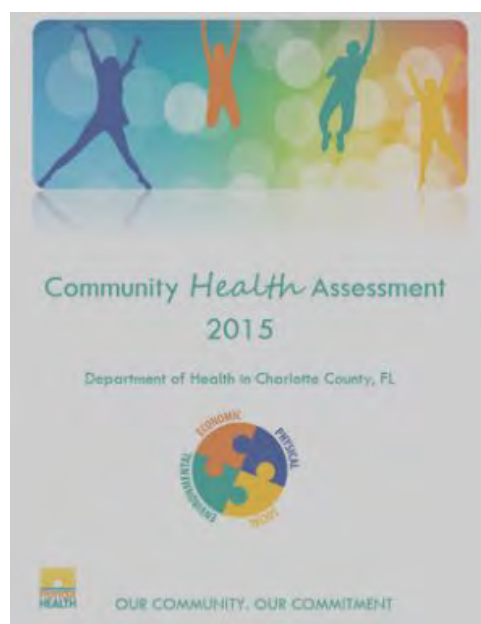
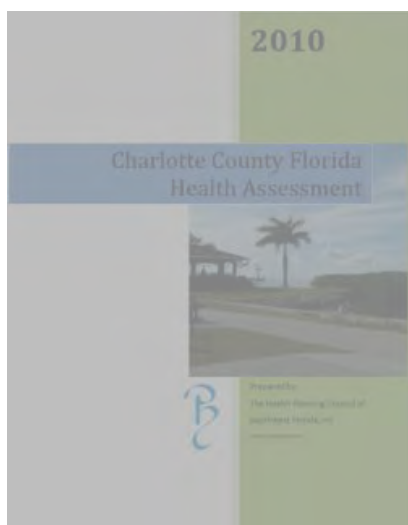


2020 Community Health and Needs Assessment

The Florida Department of Health in Charlotte County (DOH-Charlotte) conducted the 2020 Community Health and Needs Assessment (CHNA) between June 2019-March 2020 in partnership with Charlotte County Human Services (CCHS), Charlotte Behavioral Health Care (CBHC), United Way of Charlotte County (UWCC), and the Health Planning Council of Southwest Florida (HPCSWFL). The CHNA followed the Mobilizing for Action through Planning and Partnerships (MAPP) process, which provided a framework to maximize community collaboration and ensure equal outcomes for every population group. Throughout the 10-month process, Charlotte County residents and local agency and business representatives met to complete each phase of the MAPP process including 4 assessments, visioning, and the prioritization of strategic issues.

The complete 2020 Charlotte County Community Health and Needs Assessment (CHNA) Report can be accessed on the Florida Department of Health in Charlotte County website and remains in effect through June 31, 2025, with bi-annual updates to follow. Additionally, the CHNA report has been used to inform the development of this Community Health Improvement Plan and will also provide valuable insight to local agencies in their decision-making processes in the community for years to come. Charlotte County's next CHNA will begin the MAPP Process at the start of 2024 to be implemented in 2025-2030.

For more information on the 2020 Charlotte County Health and Needs Assessment or to obtain a copy please visit <https://charlotte.floridahealth.gov/programs-and-services/community-health-planning-and-statistics/community-health-status/index.html>.



2020 Community Health and Needs Assessment Report



Our Vision

One of the initial steps during the CHNA process in July 2019, included forming a vision. Residents established a vision for what they envision as health and well-being in Charlotte County. Using a word cloud, members developed the following vision:

“How would you describe a healthy community?”



"Charlotte County will be a vibrant, resilient community where all will be active, safe, and prosperous."

Prioritization Process

In early December 2019, community members met to identify the most pressing health and needs concerns within Charlotte County, FL. There were an initial 8 strategic areas:

1. Affordable Housing.
2. Behavioral, Social, and Emotional Health.
3. Cost of Living & Economic Wellness.
4. Child Abuse and Neglect.
5. Opportunities and Needs for Young Working Population.
6. Transportation.
7. Trauma-Informed Care.
8. Healthcare Costs.

The core group of partners tasked with leading the overall development process for the community health assessment met to consolidate the aforementioned strategic areas and create datasheets to help inform the community's decisions during the final prioritization process. The strategic issues were prioritized by community members using three criteria: impact, feasibility, and assets. The final top five priority areas were:

1. Child Abuse, Neglect & Well-Being
2. Behavioral, Social & Emotional Health Trauma
3. Healthcare
4. Environment
5. Aging

From both these prioritizations, while engaging in the creation of the Minority Health Plan in 2022, Healthy Charlotte identified the need to address priority areas of Mental Wellbeing and Substance Abuse as well as Household Stability. After the formulation of the Minority Health Plan, Healthy Charlotte conducted the annual revision process of the CHIP. From this in 2022, Healthy Charlotte elected to extend the plan through 2025. This extension was chosen to include more priority areas, include a more quality of life lens, and align closer to the Charlotte's 2020 CHNA. The vigilant effort to address ACEs and create a trauma informed/educated community continues in Charlotte County, however, two additional priority areas were added to the CHIP to identify root causes and align with state agency and national plans. From this, ACEs, Mental Wellbeing & Substance Abuse, and Household Stability are the three priority areas for Charlotte County extended 2021-2025 CHIP.

Charlotte County Description



Charlotte County, FL totals 680.9 square miles and is situated on the Southwest coast of the State of Florida with Sarasota County to its immediate north, Lee County to its south, and Desoto County to the northeast. Charlotte County consists of one municipality, Punta Gorda, and two Census- Designated Places (CDPs), Port Charlotte and Englewood.

The county has an estimated population of 184,837, of which, 74,548 are persons 65 years or over representing 40% of the overall county population¹. The county's median age is 60, up from 58.1 in 2019¹. The American Community Survey (ACS) reports that 84.3% of the population are White, 5.0% are Black or African American, 8.0% Hispanic, and 1.4% are Asian¹.

The civilian labor force is made up of approximately 36.9% of county residents, with retail trade, health care, social assistance and accommodation, and food services jobs².

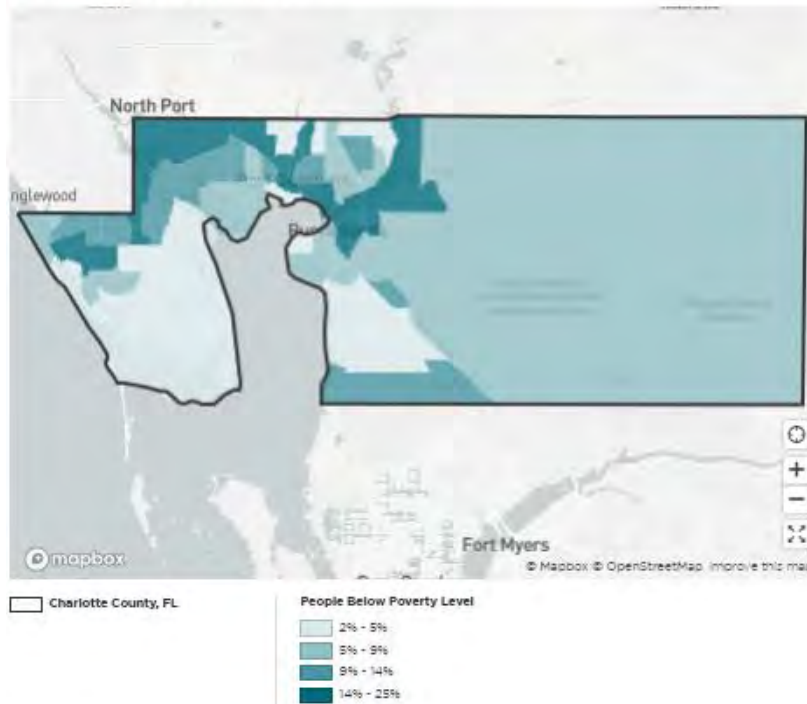
¹United States Census Bureau, 2017-2021, ACS 5-Year Estimates.

Income Profile

Economic well-being is essential to physical, emotional, and mental health. The consequences of insufficient income for a household may vary in degrees, but ultimately, it affects family and community stability and health.

The median household income for Charlotte County is \$57,887* and the per capita income is \$35,656*.

Population Living in Poverty



Sources: US Census Bureau ACS 5-year 2016-2020

ALICE (*Asset, Limited, Income Constrained, Employed*) represents households that earn income above the Federal Poverty Level (FPL) but still less than the minimum income necessary to live in their region. In Charlotte County, FL, 11% of households are in poverty and 30% are considered ALICE. This means that 34% of Charlotte County households are “barely making it;” they struggle to afford the everyday necessities, most likely have no savings, and are one emergency or accident away from poverty or even homelessness.

The average household income in Charlotte County is less than that of the state and the nation. The Together Charlotte 2018 Housing Report and the ALICE in Florida: A Financial Hardship Study 2020 Report demonstrates the burden of low wages and high housing costs in the state and the county. It shows that 75% of households under 25 years old and 78% of single-female-headed households with children in the state are below the ALICE Threshold.

Charlotte County Income Snapshot 2017-2021	Charlotte	Florida
Labor Force	42.5%	59.4%
Unemployment Rate	5.4%	5.3%
Median Household Income	\$57,887	\$61,777
Percent of Low-Income Households Severely Cost Burdened	12.3%	15.1%
Per Capita Income	\$35,656	\$35,216

*United States Census Bureau, ACS 5-Year Estimates 2017-2021

The Social Determinants of Health in Charlotte County, Florida

The Social Determinants of Health (SDOH) are social indicators traditionally placed within five main domains, each representative of the environments in which people "live, work, and play." The SDOH impact human health in more significant ways than traditional health measures. Therefore, they are now known to be a major contributor to overall health and life outcomes for individuals, while speaking to the wide-ranging health disparities experienced by vulnerable populations around the world.

Because the SDOH are the societal and environmental factors that determine health, they are interlinked with early childhood adversity and life opportunity. Understanding their impact will improve childhood outcomes and ensure a targeted and robust response to mitigating early childhood health disparities.

Social Determinants of Health



Economic Stability:

The foundation for health and well-being starts with stable employment and housing security. Eleven percent (11%) of Charlotte County households are in poverty and 30% are cost burdened. State-wide, communities experienced record low unemployment rates until March 2020, which marked the beginning of the economic downturn caused by the COVID-19 pandemic.

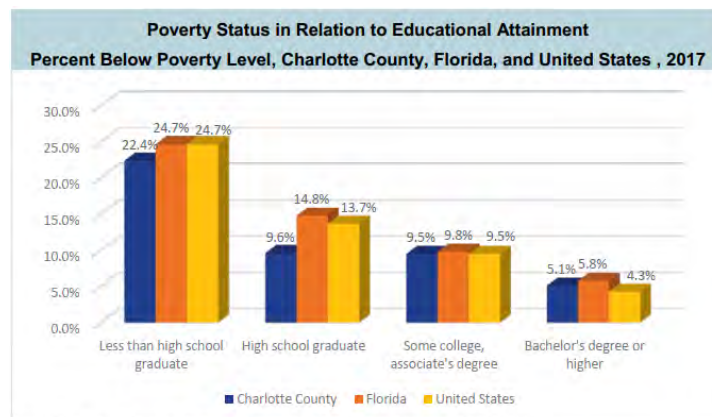
Renter-Occupied Housing Units with Gross Rent Costing 30% or More of Household Income, Percentage of Renter-occupied households, Single Year		
	Charlotte	Florida
Date Year	Percent (%)	Percent (%)
2020	58.9	56.4
2019	58.2	56.3
2018	58.7	56.7
2017	57.9	57.0
2016	56.2	57.4
2015	54.7	58.3
2014	55.3	59.0
2013	55.3	59.5
2012	55.1	59.6

FL Health Charts, 2020

Each of these economic factors contribute to higher health risks, poor health outcomes, and exacerbate health disparities already prevalent in vulnerable populations. Housing should represent a place of safety, stability, and shelter, not a place of stress, strain, or insecurity. When residents struggle to afford a place to live, that financial strain makes it harder to make other healthy choices, like eating a healthy diet or seeing a doctor when sick. Moreover, disruptive events, like suddenly losing your home, can become the trigger for a snowball of negative impacts on health, such as losing a job or health insurance, dropping out of school, or triggering mental health challenges.

Education Access and Quality:

Residents with more education are more likely to have jobs that provide health-promoting benefits such as health insurance, paid leave, and retirement. Conversely, people with less education are more likely to work in occupations with few benefits. Low-income residents who are struggling to access necessities, such as food and shelter, are unable to prioritize their education and long-term goals and are often stuck in a generational cycle of poverty.



Source: U.S. Census Bureau, American Community Survey 1-year Estimates, Table S1701

In 2020, the percent of pre-kindergarten children demonstrating school readiness in Charlotte County was 50.4% compared to the state percent of 56.9%. Charlotte's graduation rate is 90.4% and 90.7% of current residents have a high school diploma or higher.

Access to high quality education helps lay the foundation for healthier and longer lives while also countering the effects of generational trauma and poverty. Through education, children and adults alike, are equipped with life skills and community connections that increase their

capacity to thrive through a stable social environment. In Charlotte County, FL, schools also function as a bridge to various community initiatives including after school programs that provide additional support and mentorship to all youth including those from low SES households and at-risk youth.

Health Care Access and Quality:

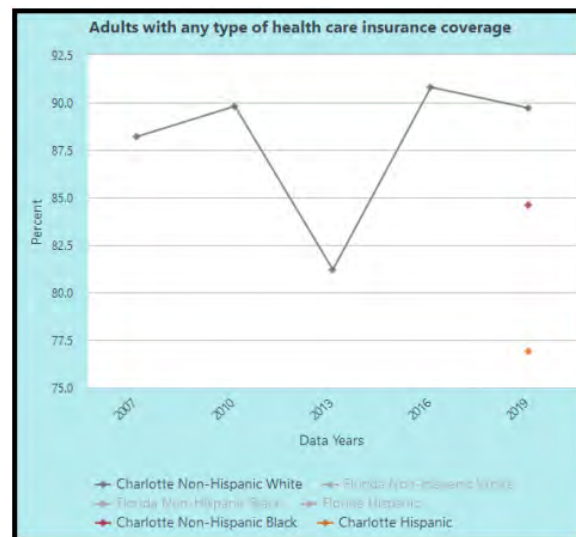
Access to adequate and specialized healthcare through insurance and affordable costs is essential to health and well-being as they promote preventative care and alleviate the financial burden of care in later life. Many Americans do not receive basic health care services. People without insurance may not be able to pay for medical care and prescriptions and are less likely to have a primary care physician. Because they lack a primary care physician, some people do not receive recommended healthcare services like preventative care. Other times, the healthcare professionals who offer services are too far away from where they live.

In Charlotte County, there is a gap between age 18-44 who have insurance versus that same age population that have a personal doctor (67.9% vs. 52.1%, respectively). Additionally, Charlotte County is in the 3rd quartile for rate of licensed family practice physicians per population and the rate of mental health professionals to population in the county is 63% that of the state. That is a significant challenge.

Many Charlotte County residents have disproportionately limited access to high-quality healthcare and often receive treatment in under-resourced settings such as community health centers and have limited access to mental health services. Those combatting health conditions face barriers such as limited in-county resources and transportation limitations.

Neighborhood and Built Environment:

The environment in which we live can either promote health and safety or contribute to poor health and become a breeding ground for violence and toxic stress. Disparities in quality of life is often more clearly seen and understood through differences in neighborhoods and built environments because of the inconsistency in the distribution of community resources, such as, schools, farmer's markets, clinics, restaurants, and bike/walk pathways. Charlotte County's built environment remains a major challenge for its residents. With no robust public transportation system and limited pathways to access



Florida Behavioral Risk Factor Surveillance System

Charlotte Non-Hispanic White: 89.7
 Charlotte Non-Hispanic White: 82.1
 Charlotte Non-Hispanic Black: 84.6

community resources by bike or on foot, the county is considered car-dependent which leaves zero-car and low-income households at a severe disadvantage.

2018 Transportation Disadvantaged Data		
Trips by Purpose		
	Charlotte County	Florida
Medical	14,443	4,744,140
Employment	18,354	3,752,285
Education/Training	14,682	2,805,745
Nutritional	11,596	3,925,897
Life-Sustaining/Other	12,353	7,286,786

Source: Florida Commission for the Transportation Disadvantaged

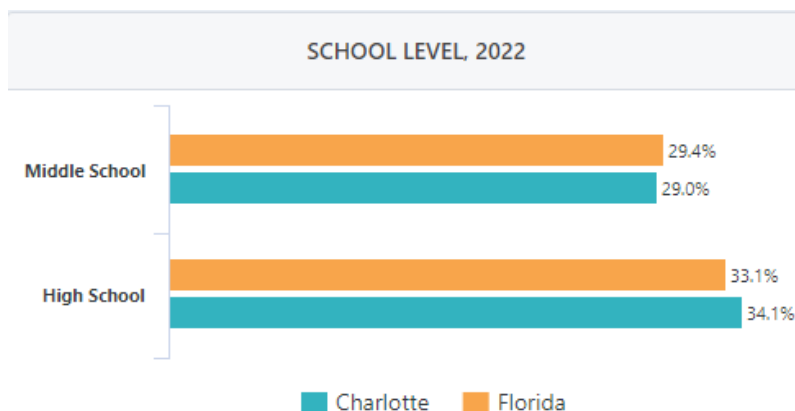
In terms of safety, the county rate of children experiencing child abuse is more than two times that of the state. Additionally, Charlotte County ranks 2nd in Florida for the highest rate of children experiencing abuse. Additionally, Charlotte ranks 3rd in the state for children experiencing neglect. Southwest Florida ranks 1st in the state for reported cases of sex trafficking. The county has seen a 105% increase in the verified cases of child maltreatment from 2009 to 2019. All these concerns, in addition to many others, contribute to an unsafe environment, especially for children, in Charlotte’s community. Food insecurity and/or the lack of nutritional food sources, lack of transportation, isolation, unstable housing conditions, the concerns of unsafe environment, neglect, domestic violence, maltreatment, and sex trafficking all contribute to poor health outcomes.

Social and Community Context:

The relationships and interactions people have with their loved ones, friends, coworkers, neighbors, and community can have a significant effect on their health and well-being. Healthy social connections challenge traumatic experiences and allow individuals to resist and recover, negating the long-term physiological effects of adverse experiences.

Many people deal with difficulties and risks that they cannot control, such as hazardous surroundings, discrimination, or difficulty affording necessities. Lifelong health and safety may suffer because of this. Positive interpersonal relationships can lessen these detrimental effects at home, at work, and in the community. According to the 2017 Charlotte County Senior Health Assessment, approximately 14% of Charlotte County seniors are isolated.

Students Who, in the Past Year, Felt Sad or Hopeless for Two or More Weeks



Health Outcomes

24

Measures: length of life (through YPLL) and quality of life*

Health Factors

17

Measures: health behaviors, clinical care, social/economic factors, and physical environment*

2nd

highest county of children experiencing abuse in Florida**

Charlotte County Health Rankings

3rd

highest county in children experiencing neglect in Florida^

Southwest FL

1st

in the State for reported cases of Sex Trafficking^^

*Rankings represent county standing out of 67 from County Health Rankings & Roadmaps, 2022

**FL Health CHARTS and DCF, Florida Safe Families Network Data Mart

^Out of 67 counties from DCF; Florida Child Welfare Measures; "Statistics for Charlotte County."

^^National Human Trafficking Hotline, 2020

CHIP Health Areas

Every five years, Charlotte County community partners facilitate a Community Health and Needs Assessment (CHNA) to identify health disparities and barriers. In 2020, the CHNA identified the following top 5 health priority areas in Charlotte County: Child Abuse, Neglect, and Well-Being; Behavioral, Social, and Emotional Health and Trauma; Healthcare; Environment; Aging. From this assessment and the resulting data, Charlotte County created a Community Health Improvement Plan (CHIP) to address and reduce these health disparities throughout the community. The CHIP is used by health and other government, educational, and human service agencies, in collaboration with community partners, to set priorities, coordinate action plans, and target resources. Charlotte County's 2021-2025 CHIP utilizes community-wide efforts to address three priority health areas: Adverse Childhood Experiences (ACEs), Mental Wellbeing and Substance Abuse, and Household Stability in order to improve community quality of life.



Priority 1: Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) are the traumatic events of childhood abuse and household dysfunction that a person experience before 18 years old¹. ACEs vary in scope and impact, however, their effect on the human body during its most important stages of development is consistent and now clear. Unaddressed trauma and toxic stress lead to developmental delays for children, disability, chronic illness, early death, and astronomical economic loss to communities. Therefore, the importance of a community-wide effort to challenge one of the most under recognized public health crises of our lifetime cannot be overstated. Charlotte County residents experience or have experienced abuse, neglect, household dysfunction as well as emotional, physical, and sexual abuse, parental divorce or death, domestic violence, and having incarcerated relatives. These increase the risk of poor health outcomes in Charlotte County residents and calls for a vigilant effort from the community to reduce ACEs and create a trauma informed community.

Charlotte County Health Disparities:

105%

INCREASE IN VERIFIED CHILD
MALTREATMENT CASES FROM 2009-2019

13%

OF CHARLOTTE COUNTY ADULTS WITNESSED
OR WERE VICTIMS OF DOMESTIC VIOLENCE
WHILE GROWING UP

32%

OF CHARLOTTE COUNTY RESIDENTS HAVE
EXPERIENCED PARENTAL DEATH OR DIVORCE

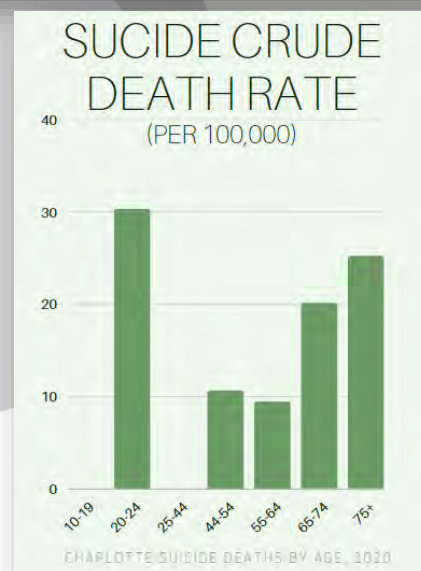
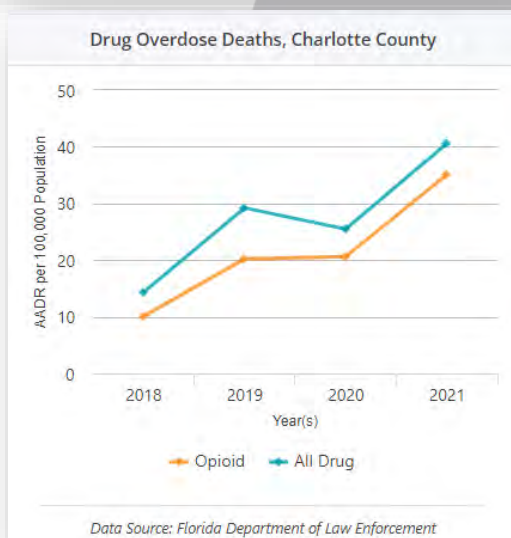
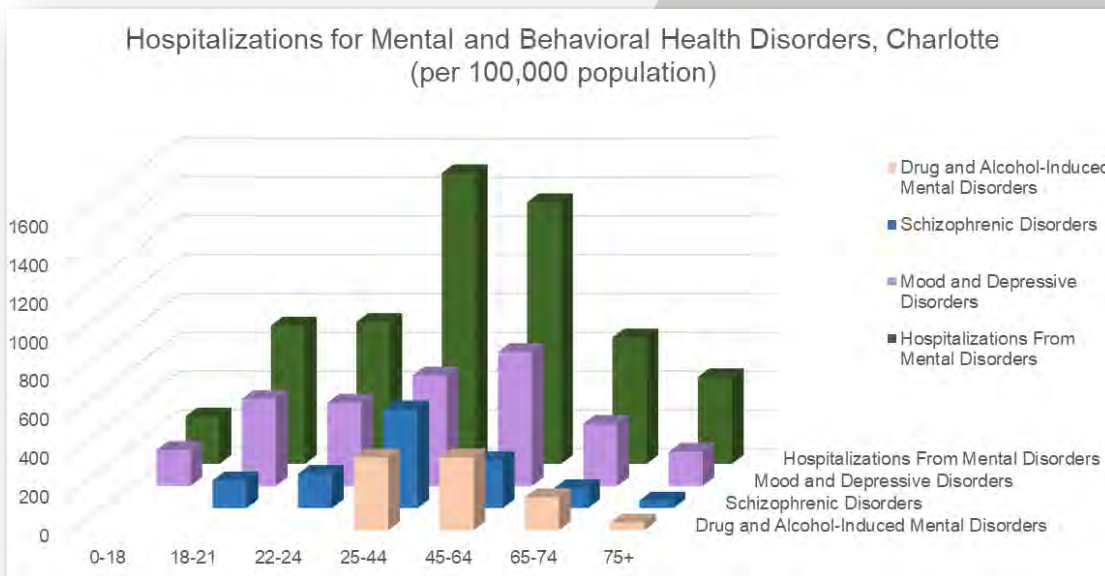
8.1

PER 10,000 CHILDREN IN CHARLOTTE COUNTY
ARE VICTIMS OF NEGLECT (COMPARED TO
STATE RATE OF 3.0 PER 10,000)

Priority 2: Mental Wellbeing and Substance Abuse

Behavioral health affects physical and overall health and includes mental health, substance abuse, and suicide risk. Behavioral health issues are symptoms of real, physical conditions occurring in the brain and can be addressed through mental health and mentorship programs, suicide prevention, and substance abuse interventions. Behavioral health plays a vital role in our well-being. With access to resources like mental health providers, residents can address their emotional, psychological, and social well-being. Improving mental health and decreasing substance use has positive effects for both the individual and the community. In Charlotte County, residents continuously face the challenges of limited providers, lack of transportation, and lack of other resources to address their mental health and substance concerns.

Charlotte County Health Disparities:

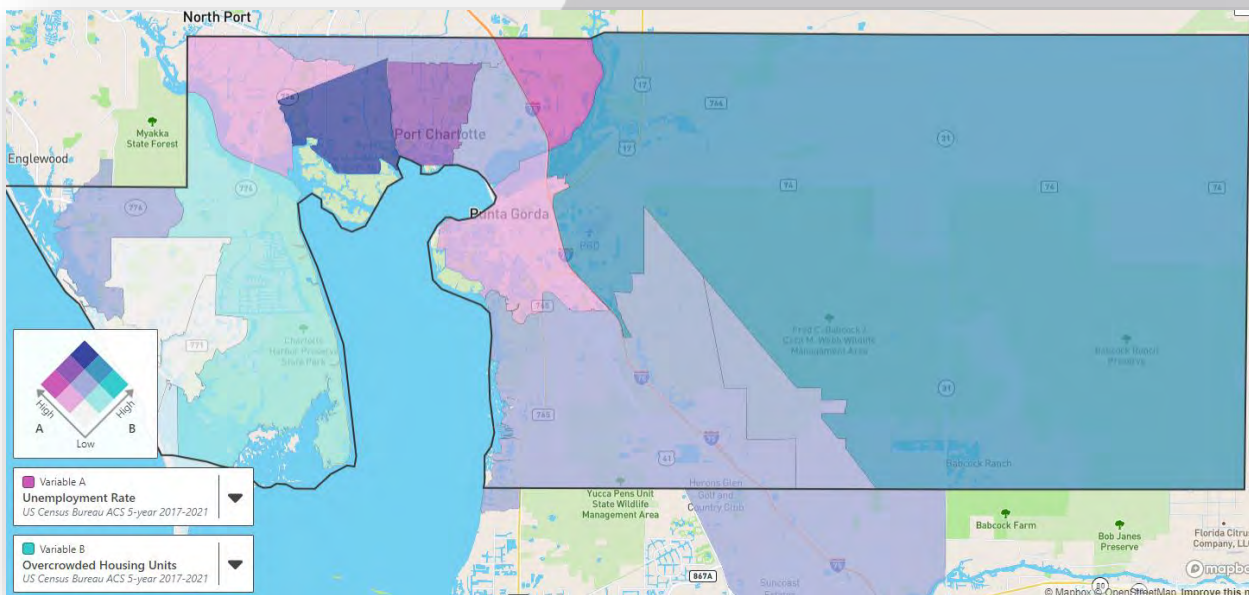


Priority 3: Household Stability

The household should represent a place of safety, stability, and shelter and not a place of stress, strain, or insecurity. When residents struggle to afford a place to live, that financial strain makes it harder to make other healthy choices, like eating a healthy diet or seeing a doctor when you're sick. Moreover, disruptive events, like suddenly losing your home or domestic issues, can lead to negative impacts on health, such as losing a job or health insurance, dropping out of school, susceptibility of disease, or having mental health challenges. Housing and household stability is an enormous issue that has been exacerbated by COVID-19 and Hurricane Ian. The county is continuously working to reduce the health barriers and disparities that perpetuate an unstable household in order to improve the community's overall wellbeing.

Charlotte County Health Disparities:

Unemployment rate and overcrowded housing units, *US Census 2017-2021*



Excessive Housing Costs, *US Census 2017-2021*



Home Rent is 30%+ of Income

54%

of Rented Homes

Charlotte County, FL

53%

of Rented Homes

Florida



Homeowner Costs are 30%+ of Income

22%

of Owned Homes

Charlotte County, FL

25%

of Owned Homes

Florida

Sources: *US Census Bureau ACS 5-year 2017-2021*

Charlotte County’s Priority Areas

The Community Health Improvement Plan (CHIP) at the Department of Health in Charlotte County (DOH-Charlotte) endeavors to align with state and national strategic goals to support consistent health service delivery and coherent community health priorities. The CHIP functions as the actionable arm to our overall community health assessment process.

In 2022, the DOH-Charlotte convened with Healthy Charlotte. Healthy Charlotte facilitated the CHIP process by using the National Association of City and County Health Officials’ Mobilizing for Action through Planning and Partnership (MAPP) strategic planning model. Subject matter experts from a diverse group of partner organizations conducted the four assessments outlined in the MAPP process. Individually, the assessment yielded in-depth analyses of factors and forces that impact population health. Taken together, the assessment findings contribute to a comprehensive view of health and overall quality of life in Charlotte County. Community members and organizations that represent community populations, health challenges, are experts in the three priority areas created a Community Health Improvement Action Plan. This group monitors the progress of the Action Plan quarterly and revises it annually.

Healthy Charlotte developed findings and presented these findings to the Steering Committee. The Steering Committee comprised a diverse leadership group representing 12 agencies and organizations in Charlotte County. The Steering Committee set priorities through a facilitated consensus process by looking for cross-cutting strategic issues that emerged from the four assessments. The Steering Committee reached consensus on three priority issue areas: Adverse Childhood Experiences (ACEs), Mental Wellbeing & Substance Abuse, and Household Stability. To address these priority health areas, Healthy Charlotte created a 2021-2025 Community Health Improvement Plan Action Plan, found on the following pages. As this incorporate the extension and annual of the CHIP, new or extended objectives are included in the action plan while all completed objectives from 2021, 2022, and the beginning of 2023 are listed in a separate table below.

Please refer to the table below for priority issue areas and goals developed by a workgroup of subject matter experts.

<u>Priority Issue Areas:</u>	<u>Strategies:</u>
<p>Adverse Childhood Experiences (ACEs) <i>Goal: Reducing ACEs and their long-term health effects through community awareness, trainings, outreach, and programs.</i></p>	1. Provide education opportunities to youth and adults that reduces ACEs by teaching skills to build resilience.
	2. Creating a trauma informed community to reduce ACEs and address health disparities.
	3. Ensure a strong start for children to reduce ACEs and address health disparities.
<p>Mental Wellbeing and Substance Abuse <i>Goal: Increase mental health well-being and substance abuse prevention by connecting Charlotte County residents to community activities, mentoring, and programs.</i></p>	1. Foster the social and emotional competence of families and youth by connecting them to resources aimed towards increasing mental wellbeing.
	2. Encouraging positive behavioral patterns through prevention strategies to minimize substance use in adolescents.
	3. Provide support, services, and resources on mental wellbeing and/or substance use through mentorship, guidance, and support groups.
<p>Household Stability <i>Goal: Strengthening household stability through communication, increased education, and resource opportunities.</i></p>	1. Enhancing community collaboration through access of services on housing development, economic resiliency, and data-driven education/coordination in order to improve household stability.

2021-2025 CHIP Action Plan

Priority 1: Adverse Childhood Experiences (ACEs)					
Goal: Provide education opportunities to youth and adults that reduces ACEs by teaching skills to build resilience.					
Strategy 1-1: Provide education opportunities to youth and adults that reduces ACEs by teaching skills to build resilience.					
Objectives	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
1.1.a.: By December 31, 2025, Boys and Girls Club of Port Charlotte students in the Teen Outreach Program will continue to demonstrate knowledge increase on the service-learning component of the Smart Moves curriculum from 75% in 2020 to ≥85% in 2025.	75%	≥85% (12/31/2025)	Boys and Girls Club of Port Charlotte		National Plan: Healthy People 2030 - EMC-D07 Agency Plan: SHIP- 3.4
1.1.b.: By December 31, 2025, Charlotte County Family Services Center (FSC) will develop a new hire orientation to educate staff on ACEs science from 0 orientation in 2022 to 1 in 2025.	0	1 (12/31/2025)	Charlotte County Family Services Center		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
1.1.c.: By December 31, 2025, Charlotte County Human Services (CCHS) will increase the percent of staff who deliver trauma informed care and are educated on ACEs science from 0% staff in 2020 to 100% staff in 2025.	0%	100% (12/31/2025)	Charlotte County Human Services		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
1.1.d.: By December 31, 2025, the Florida Department of Health in Charlotte County (DOH-Charlotte) will implement one annual Community Conversation (speakers on ACEs topics), from 0 in 2020 to 5 in 2025.	0	5 (12/31/2025)	Florida Department of Health in Charlotte County		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
1.1.e.: By December 31, 2025, the Florida Department of Health in Charlotte County (DOH-Charlotte) , in partnership with the Health Planning Council of Southwest FL, will increase the number of public and/or private screenings of ACEs related films in Charlotte County from 4 in 2020 to ≥9 by 2025.	4	≥9 (12/31/2025)	Florida Department of Health in Charlotte County		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4

Strategy 1-1: Provide education opportunities to youth and adults that reduces ACEs by teaching skills to build resilience.					
Objectives	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
1.1.f.: By December 31, 2025, the Florida Department of Health in Charlotte County (DOH-Charlotte) will increase the number of Charlotte County residents educated on ACEs science each year from 344 in 2020 to \geq 650 in 2025.	0%	100% (06/30/2021)	Florida Department of Health in Charlotte County		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
1.1.g.: By December 31, 2025, the Health Planning Council of Southwest Florida (HPCSWFL) , will increase the percent of staff who are ACEs science educated from <10% in 2020 to 100% in 2025.	0%	100% (12/31/2021)	Health Planning Council of Southwest Florida		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
Strategy 1-2: Creating a trauma informed community to reduce ACEs and address health disparities.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
1.2.a.: By December 31, 2025, Charlotte County Family Services Center (FSC) will increase the number of leased partners who individually conduct an assessment to ascertain if their agency is trauma informed from 0 agencies in 2022 to 5 in 2025.	0	5 (12/31/2025)	Charlotte County Family Services Center		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
1.2.b.: By December 31, 2024, Englewood Community Coalition, Inc. will increase the number of persons in West Charlotte County who have received ACEs/Trauma Informed Community training from 61 in 2022 to 140 persons by December 2024.	61	140 (12/31/2024)	Englewood Community Coalition, Inc.		National Plan: Healthy People 2030 - HC/HIT-R01 Agency Plan: SHIP- 3.4
Strategy 1-3: Ensure a strong start for children to reduce ACEs and address health disparities.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
1.3.a.: By September 30, 2024, Charlotte County Healthy Start Coalition, Inc. will increase the percent of individuals referred to CONNECT who are reached and who complete the intake and assessment forms from 50% in 2020 to >60% in 2024.	50%	>60 (09/30/2024)	Charlotte County Healthy Start Coalition, Inc.		Agency Plan: SHIP- 4.1

Strategy 1-3: Ensure a strong start for children to reduce ACEs and address health disparities.

Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
<p>1.3.b.: By December 31, 2023, Charlotte County Human Services (CCHS) will increase the number of participants in the At-Risk Youth Integration Committee that address services for children and families from 0 agencies in 2021 to 20 in 2023.</p>	0	20 (12/31/2023)	Charlotte County Human Services		<p>National Plan: Healthy People 2030 – AH-D01; ECBP-D07 Agency Plan: SHIP- 3.4</p>

Priority 2: Mental Wellbeing and Substance Abuse

Goal: Increase mental health well-being and substance abuse prevention by connecting Charlotte County residents to community activities, mentoring, and programs.

Strategy 2-1: Foster the social and emotional competence of families and youth by connecting them to resources aimed towards increasing mental wellbeing.

Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
<p>2.1.a.: By December 31, 2025, K-8 students of the Boys and Girls Club of Port Charlotte will continue to demonstrate knowledge increase on the emotional-social wellness component of the Smart Moves curriculum from 75% in 2020 ≥85% in 2025.</p>	75%	≥85% (12/31/2025)	Boys and Girls Club of Port Charlotte		<p>National Plan: Healthy People 2030 - EMC-D07 Agency Plan: SHIP- 5.3</p>
<p>2.1.b.: By December 31, 2025, Boys and Girls Club of Port Charlotte Passport to Manhood student participants will demonstrate knowledge increase on the curriculum from 75% in 2020 to ≥85% in 2025.</p>	75%	≥85% (12/31/2025)	Boys and Girls Club of Port Charlotte		<p>National Plan: Healthy People 2030 - EMC-D07 Agency Plan: SHIP- 5.3</p>
<p>2.1.c.: By December 31, 2025, Boys and Girls Club of Port Charlotte Girls on the Run student participants will demonstrate knowledge increase on the curriculum from 75% in 2020 to ≥85% in 2025.</p>	75%	≥85% (12/31/2025)	Boys and Girls Club of Port Charlotte		<p>National Plan: Healthy People 2030 - EMC-D07 Agency Plan: SHIP- 5.3</p>

Strategy 2-1: Foster the social and emotional competence of families and youth by connecting them to resources aimed towards increasing mental wellbeing.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
2.1.d.: By June 30, 2023, Charlotte County Public Schools (CCPS) will increase the number of staff certified in Youth Mental Health First Aid from 25% of staff members in 2020 to 90% of staff certified in 2023.	25%	90% (06/30/2023)	Charlotte County Public Schools		National Plan: Healthy People 2030 - AH-D01 Agency Plan: SHIP- 3.4
2.1.e.: By September 30, 2025, Drug Free Charlotte County (DFCC) , will increase the percentage of teens who complete the Life Skills Training who demonstrate an improvement in overall knowledge in goal setting, communication, and coping skills from 70% in 2020 to ≥70% by 2025.	70	≥70% (09/30/2025)	Drug Free Charlotte County		National Plan: Healthy People 2030 – EMC-1;D07 Agency Plan: SHIP- 5.2
Strategy 2-2: Encouraging positive behavioral patterns through prevention strategies to minimize substance use and enhance access to care.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
2.2.a.: By December 31, 2025, Charlotte Behavioral Health Care (CBHC) , will host one training for community members regarding substance use and access to care from 0 in 2022 to 1 in 2025.	0	1 (12/31/2025)	Charlotte Behavioral Health Care		National Plan: Healthy People 2030 – MHMD-07 Agency Plan: SHIP- 5.1; 5.3
2.2.b.: By December 31, 2025, Charlotte Behavioral Health Care (CBHC) , will increase the number of Narcan distributed from 1377 in 2022 to 2500 per year by 2025.	1377	2500 (12/31/2025)	Charlotte Behavioral Health Care		National Plan: Healthy People 2030 – SU-03 Agency Plan: SHIP- 5.3
2.2.c.: By December 31, 2025, Drug Free Punta Gorda (DFPG) will reduce 30-day alcohol use among Punta Gorda teens (grades 6-12) from 17% in 2020 to 11% in 2025.	17%	11% (12/31/2025)	Drug Free Punta Gorda		National Plan: Healthy People 2030 – SU-04 Agency Plan: SHIP- 5.3

Strategy 2-2: Encouraging positive behavioral patterns through prevention strategies to minimize substance use and enhance access to care.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
2.2.d.: By December 31, 2025, Drug Free Punta Gorda (DFPG) will reduce 30-day day prescription drug misuse among Punta Gorda teens (grades 6-12) from 7.5% in 2020 to 4.5% in 2025.	7.5%	4% (12/31/2025)	Drug Free Punta Gorda		National Plan: Healthy People 2030 – SU-05 Agency Plan: SHIP- 5.3
2.2.e.: By December 31, 2025, Drug Free Punta Gorda (DFPG) will reduce 30-day marijuana use among Punta Gorda teens (grades 6-12) from 15% in 2020 to 9% in 2025.	15%	9% (12/31/2025)	Drug Free Punta Gorda		National Plan: Healthy People 2030 – SU-06 Agency Plan: SHIP- 5.3
2.2.f.: By December 31, 2025, Drug Free Punta Gorda (DFPG) will reduce 30-day e-cig/vaping use among Punta Gorda teens (grades 6-12) from 19% in 2020 to 13% in 2025.	19%	13% (12/31/2025)	Drug Free Punta Gorda		National Plan: Healthy People 2030 – TU-06 Agency Plan: SHIP- 5.3
2.2.g.: By December 31, 2025, Drug Free Punta Gorda (DFPG) will increase coalition community capacity and collaboration, measured by a 2% increase in DFPG active membership from 78 in 2022 to 80 in 2025.	78	80 (12/31/2025)	Drug Free Punta Gorda		National Plan: Healthy People 2030 – SU-R01 Agency Plan: SHIP- 5.3
2.2.h.: By December 31, 2023, Englewood Community Coalition, Inc. will report an overall 2% increase of Middle School age youth in West Charlotte County's perception of the risks of alcohol use, based on an annual CORE survey from 90% in 2019 at L.A. Anger Middle School to 92% by 2023.	90%	92% (12/31/2023)	Englewood Community Coalition, Inc.		National Plan: Healthy People 2030 – SU-R01 Agency Plan: SHIP- 5.3
2.2.i.: By December 31, 2023, Englewood Community Coalition, Inc. will report an overall 2% increase of High School age youth in West Charlotte County's perception of the risks of alcohol use, based on an annual CORE survey from 86% in 2019 at Lemon Bay High School to 88% by 2023.	90%	92% (12/31/2023)	Englewood Community Coalition, Inc.		National Plan: Healthy People 2030 - SU-R01 Agency Plan: SHIP- 5.3

Strategy 2-3: Provide support, services, and resources on mental wellbeing and/or substance use through mentorship, guidance, and support groups.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
2.3.a.: By December 31, 2025, Charlotte Behavioral Health Care (CBHC) will conduct annual focus groups with participants of their Family Intensive (FIT) group from 0 focus groups in 2020 to ≥3 in 2025.	0	≥3 (12/31/2025)	Charlotte Behavioral Health Care		Agency Plan: SHIP- 5.1; 5.2; 5.3
2.3.b.: By December 31, 2025, the Florida Department of Health in Charlotte County (DOH-Charlotte) will establish a community tailored mentorship program for youth and veterans from 0 in 2022 to 1 in 2025.	0	1 (12/31/2025)	Florida Department of Health in Charlotte County		National Plan: Healthy People 2030 – EMC-D07; HC/HIT-R01; MHMD-01 Agency Plan: SHIP- 5.1; 5.2 Local Plan: Minority Health – Project 2
2.3.c.: By December 31, 2025, Kids Thrive Collaborative will increase the number of participants in the Leader Moms Initiative from 2 participants in 2022 to 8 in 2025.	2	8 (12/31/2025)	Kids Thrive Collaborative		National Plan: Healthy People 2030 – SU-01 Agency Plan: SHIP- 5.3
Priority 3: Household Stability					
Goal: Strengthening household stability through communication, increased education, and resource opportunities.					
Strategy 3-1: Enhancing community collaboration through access of services on housing development, economic resiliency, and data-driven education/coordination in order to improve household stability.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
3.1.a.: By December 31, 2025, Charlotte County Family Services Center (FSC) will develop an Integrated Client Services Model (ICSM) to streamline access to community services by increasing the number of priority areas from 3 in 2022 to 5 in 2025.	3	5 (12/31/2025)	Charlotte County Family Services Center		Agency Plan: SHIP- 6.4
3.1.b.: By December 31, 2025, Charlotte County Human Services (CCHS) will increase the number of organizations working on community housing development from 0 organizations in 2022 to 1 in 2025. (Hoping for this to be GCP)	0	1 (12/31/2025)	Charlotte County Human Services		National Plan: Healthy People 2030 – SDOH-04 Agency Plan: SHIP- 6.3

Strategy 3-1: Enhancing community collaboration through access of services on housing development, economic resiliency, policy recommendations, and data-driven education/coordination in order to improve household stability.					
Objectives:	Baseline Value	Target Value (Target Date)	Responsible Party	Objective Status	Alignment
<p>3.1.c.: By December 31, 2025, Charlotte County Human Services (CCHS) will become the lead agency in homeless prevention coordinated entry from 0 in 2022 to 1 in 2025.</p>	0	1 (12/31/2025)	Charlotte County Human Services		<p>National Plan: Healthy People 2030 – SDOH-04 Agency Plan: SHIP- 6.4</p>
<p>3.1.d.: By December 31, 2025, Charlotte County Human Services (CCHS) will increase the referrals of participants for the economic resiliency program from 0 referrals in 2022 to 20 in 2025.</p>	0	20 (12/31/2025)	Charlotte County Human Services		<p>Agency Plan: SHIP- 6.4</p>
<p>3.1.e.: By June 30, 2023, the Florida Department of Health in Charlotte County (DOH-Charlotte) will develop and sustain collaboration of information sharing between community partners by increasing community initiatives from 0 activities/initiatives in 2022 to 12 per year in 2023, and annually thereafter.</p> <ul style="list-style-type: none"> Activity 1: Increasing participation of community activities and initiatives that address Social Determinates of Health (SDOH), injury prevention, chronic disease, discuss policy recommendations, and health disparities, such as food access, education, housing, etc. 	0	12 (06/30/2023)	Florida Department of Health in Charlotte County		<p>National Plan: Healthy People 2030 – SDOH-04 Agency Plan: SHIP- 6.4 Local Plan: Minority Health- Project 1</p>

Completed Objectives

Throughout 2021, 2022, and the beginning of 2023, Healthy Charlotte and the CHIP objective holders have made significant progress on objectives that were included in the 2021-2023 CHIP. With the extension of the CHIP to 2025, the table below acknowledges all the accomplishments that community partners and organization have completed to reduce health disparities and address priority health areas. The county and Healthy Charlotte have made significant strides in addressing ACEs through many community strategies.

Completed Objectives

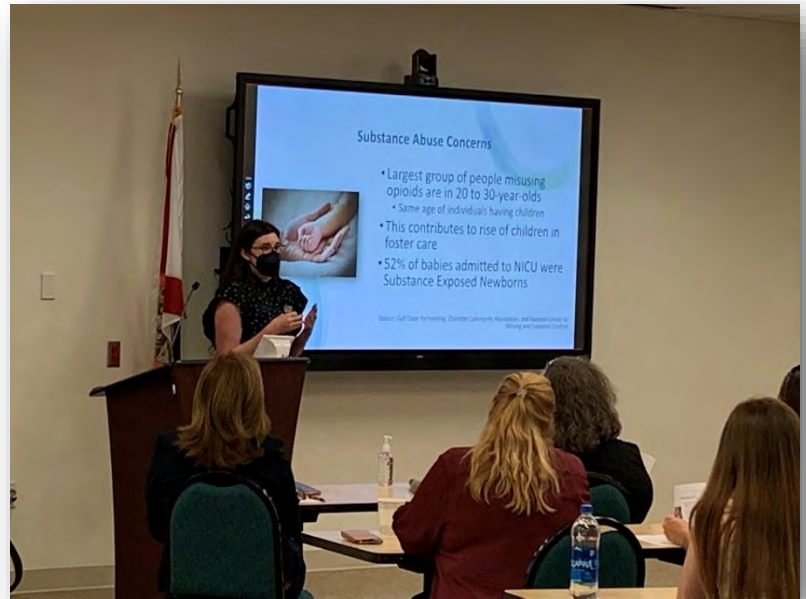
Completed Number	Completed Objective	Baseline	Target	Completed Date
1.1.b.	By December 31, 2021, Charlotte County Human Services (CCHS) and partners, will create one Integrated Client Services Model (ICSM) that serves youth and their families to improve adverse conditions in the home.	0	1	12/31/2023
1.1.c.	By December 31, 2023, the Charlotte County Family Services Center (FSC) will develop one Integrated Client Services Model (ICSM) to streamline access to community services from 0 ICSMs in 2020 to 1 full ICSM by 2023.	0	1	12/31/2023
1.1.d.	By June 30, 2021, Charlotte County Human Services (CCHS), will increase awareness of the Grandparents Raising Grandchildren program through staff education and community outreach at ≥ 2 community meetings from 0 in 2021.	0	≥ 2	06/30/2021
1.1.e.	By December 31, 2021, Charlotte County Human Services (CCHS), will increase participation in the Grandparents Raising Grandchildren program by 100% from 3 in 2020 to ≥ 6 in 2021.	3	≥ 6	12/31/2021
1.2.a.	By December 31, 2022, Florida Department of Health in Charlotte County (DOH-Charlotte) will increase the number of ACE campaign tools from 2 in 2020 to ≥ 5 by 2022.	2	≥ 5	12/31/2022
1.2.b.	By September 30, 2023, the Florida Department of Health in Charlotte County (DOH-Charlotte) will increase the number of community programs that use the ACE tools from 0 in 2020 to ≥ 5 by 2023.	0	≥ 5	06/30/2023
1.2.f.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day cigarette use among Punta Gorda high school schools (grades 9-12) by 1% from 9% in 2020 to 8% in 2021, and by 1% annually, thereafter.	9%	$\leq 8\%$	09/30/2021
1.2.g.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day alcohol use among Punta Gorda high school schools (grades 9-12) by 2% from 25% in 2020 to 23% in 2021, and by 2% annually, thereafter.	25%	$\leq 23\%$	09/30/2021
1.2.h.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day marijuana use among Punta Gorda middle school schools (grades 6-8) by 2% from 20% in 2020 to 18% in 2021, and by 2% annually, thereafter.	20%	$\leq 18\%$	09/30/2021

Completed Number	Completed Objective	Baseline	Target	Completed Date
1.2.i.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day prescription drug abuse among Punta Gorda high school schools (grades 9-12) by 1% from 10% in 2020 to 9% in 2021, and by 1% annually, thereafter.	10%	9%	09/30/2021
1.2.j.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day e-cigarette or other vapor device use among Punta Gorda high school schools (grades 9-12) by 2% from 22% in 2020 to 20% in 2021, and by 2% annually, thereafter.	22%	20%	09/30/2021
1.2.k.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day cigarette use among Punta Gorda middle school schools (grades 6-8) by 1% from 7% in 2020 to 6% in 2021, and by 1% annually, thereafter.	7%	6%	09/30/2021
1.2.l.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day alcohol use among Punta Gorda middle school schools (grades 6-8) by 2% from 12% in 2020 to 10% in 2021, and by 2% annually, thereafter.	12%	10%	09/30/2021
1.2.m.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day marijuana use among Punta Gorda middle school schools (grades 6-8) by 2% from 11% in 2020 to 9% in 2021, and by 2% annually, thereafter.	11%	9%	09/30/2021
1.2.n.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day prescription drug abuse among Punta Gorda middle school schools (grades 6-8) by 1% from 9% in 2020 to 8% in 2021, and by 1% annually, thereafter.	9%	8%	09/30/2023
1.2.o.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will reduce 30-day e-cigarette or other vapor device use among Punta Gorda middle school students (grades 6-8) by 2% from 14% in 2020 to 12% in 2021, and by 2% annually, thereafter.	14%	12%	09/30/2021
1.3.b.	By September 30, 2021, Kids Thrive Collaborative will increase the percentage of children who are part of the Kids Thrive Collaborative who score within the age-based developmental schedule from 75% in 2019 to >75% in 2021.	75%	>75%	09/30/2021
1.3.c.	By September 30, 2021, Kids Thrive Collaborative will increase the percentage of clients attending the Circle of Parents peer support group who show positive movement along at least 5 of the 8 categories of self-sufficiency assessed using the self-sufficiency matrix from 75% in 2019 > 75% in 2021.	75%	>75%	09/30/2021
1.4.c.	By June 30, 2023, Charlotte County Public Schools (CCPS) will increase the percentage of staff trained on teen mental health and coping strategies from 0% of staff in 2020 to 100% of staff by June 2023.	0%	100%	06/30/2023

Completed Number	Completed Objective	Baseline	Target	Completed Date
1.4.g.	By December 31, 2021, Charlotte County Family Services Center (FSC), will increase the percentage of FSC partners educated on ACEs science from 0% in 2020 to 100% of partners educated on ACEs in 2021.	0%	100%	12/31/2021
1.4.h.	By December 31, 2021, the Florida Department of Health in Charlotte County (DOH-Charlotte) will increase the number of Trauma-Informed Care trainings offered to staff and community partners from 0 in 2020 to >1 in 2021 and annually, thereafter.	0	>1	12/31/2021
1.4.i.	By December 31, 2023, Charlotte County Family Services Center (FSC), will increase the percentage of FSC partners who are trauma informed from 0% in 2020 to 100% of partners trauma informed by 2023.	0%	100%	06/30/2023
1.4.m.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will increase the Student Impact Team (S.I.T.) middle school participants by 100%, from 5 students in 2020 to 10 in 2021.	5	10	09/30/2021
1.4.n.	By September 30, 2021, Drug Free Punta Gorda (DFPG) will realize 10 middle schools and/or high school students recruited, drug-test, and remaining drug-free from 0 in 2020 to 10 in 2021.	0	10	09/30/2021
1.5.b.	By June 30, 2023, Charlotte County Public Schools (CCPS) will increase the number of teachers trained on "Creating a Trauma Sensitive Classroom" from 0 staff trained in 2020 to ≥200 staff trained by June 2023.	0	≥200	06/30/2023
1.6.a.	By June 30, 2023, Charlotte County Public Schools (CCPS) will increase the number of teachers trained on "Creating a Trauma Sensitive Classroom" from 0 teachers trained in 2020 to ≥200 teachers trained by June 2023.	0	≥200	06/30/2021
1.6.b.	By June 30, 2021, Charlotte County Human Services (CCHS), will cross train all members of the case management team on proper assessment and delivery of self-sufficiency and housing stability programs from 0% trained in 2019 to 100% trained by June 2021.	0%	100%	06/30/2021
1.6.c.	By December 31, 2021, Charlotte County Human Services (CCHS), will expand the Coordinated Entry program from 0 homelessness prevention service in 2020 to 1 in 2021.	0	1	12/31/2021
1.6.d.	By December 31, 2021, Charlotte County Human Services (CCHS), will increase the percentage of staff who are trauma sensitive and responsive from 0% of staff in 2020 to 100% of staff by 2021.	0%	100%	12/31/2021
1.6.e.	By December 31, 2023, Charlotte County Human Services (CCHS), will become a trauma-informed agency.	0	1	12/31/2023

Conclusion

The Charlotte County CHIP serves as a roadmap for a continuous health improvement process for the local public health system by providing a framework for the chosen strategic issue areas. It is not intended to be an exhaustive and static document. Healthy Charlotte will evaluate progress on an ongoing basis through quarterly discussions by community partners and necessary revisions to any objectives that are not on track. Additionally, Healthy Charlotte will conduct annual reviews and revisions based on input from community partners and create CHIP annual reports each year. The CHIP will continue to change and evolve over time as new information and insight emerge at the local, state, and national levels. By working together, we can have a significant impact on the community's health by improving where we live, work, and play. These efforts will allow us to realize the vision of a healthier Charlotte County. A big thank you to all of those involved in helping produce this document and address health disparities in the community.



Appendices



Healthy
CHARLOTTE

A. Healthy Charlotte Stakeholders Agenda

Healthy Charlotte and community members/organizations are involved in all steps of the MAPP process through developing, monitoring, and revising Charlotte's CHNA and CHIP. Documentation of their involvement is listed below.

Purpose:

Annual CHIP Meeting to approve the publishing of the 2021-2025 CHIP and elect Healthy Charlotte executive leads.

B. Healthy Charlotte Stakeholder Meeting Minutes