Appendix 1 Poverty Calculations

How the Census Bureau Measures Poverty

Share

Following the Office of Management and Budget's (OMB) Statistical Policy Directive 14, the Census Bureau uses a set of money income thresholds that vary by family size and composition to determine who is in poverty. If a family's total income is less than the family's threshold, then that family and every individual in it is considered in poverty. The official poverty thresholds do not vary geographically, but they are updated for inflation using the Consumer Price Index (CPI-U). The official poverty definition uses money income before taxes and does not include capital gains or noncash benefits (such as public housing, Medicaid, and food stamps).

For historical information, see the History of the Poverty Measure page in the About section of the Poverty subtopic site.

The History of the Official Poverty Measure

Learn about the history of the poverty measure through OMB Statistical Policy Directive 14, several reports, & a visualization on the topic.

Money Income: Income Used to Compute Poverty Status

The income used to compute poverty status includes (before taxes):

- Earnings
- Unemployment compensation
- Workers' compensation
- Social Security

- Supplemental Security Income
- Public assistance
- Veterans' payments
- Survivor benefits
- Pension or retirement income
- Interest
- Dividends
- Rents
- Royalties
- Income from estates
- Trusts
- Educational assistance
- Alimony
- Child support
- Assistance from outside the household
- Other miscellaneous sources

Money income does not include:

- Capital gains or losses
- Noncash benefits (e.g. food stamps and housing subsidies)
- Tax credits

Poverty Thresholds: Measure of Need

Poverty thresholds are the dollar amounts used to determine poverty status.

The Census Bureau assigns each person or family one out of 48 possible poverty thresholds.

- Thresholds vary by the size of the family and age of the members.
- The same thresholds are used throughout the United States (they do not vary geographically).
- Thresholds are updated annually for inflation using the Consumer Price Index for All Urban Consumers (CPI-U).
- Although the thresholds in some sense reflect a family's needs, they are intended for use as a statistical yardstick, not as a complete description of what people and families need to live.

Table

Poverty Thresholds

Poverty Thresholds by Size of Family and Number of Related Children Under 18 Years Source: Current Population Survey (CPS)

Computation

To calculate total family income, the incomes of all related family members that live together are added up to determine poverty status. If an individual or group of individuals (such as housemates) are not living with family members, their own individual income is compared with their individual poverty threshold.

Thus, all family members have the same poverty status, and some families may be composed of single unrelated individuals.

If total family income:

- Is less than the poverty threshold for that family that family and everyone in it is considered to be in poverty.
- Equals or is greater than the poverty threshold the family is not considered to be in poverty.

People Whose Poverty Status Cannot Be Determined

Poverty status cannot be determined for people in:

- Institutional group quarters (such as prisons or nursing homes)
- College dormitories
- Military barracks
- Living situations without conventional housing (and who are not in shelters)

Additionally, poverty status cannot be determined for unrelated individuals under age 15 (such as foster children) because income questions are asked of people age 15 and older and, if someone is under age 15 and not living with a family member, we do not know their income. Since we cannot determine their poverty status, they are excluded from the "poverty universe" (table totals).

Example

Situation

Family A has five members: two children, one mother, one father, and one great-aunt.

Step 1: Determine the family's poverty threshold for that year

The family's 2021 poverty threshold (below) is \$33,148.

How the Census Bureau Measures Poverty

Appendix 2 Community Themes and Strengths Survey

	urvey Number ounty
	ACE-EH Address (Y/N)
sev the	ank you for taking part in this survey. The survey has several parts so that we can combine veral surveys into one document. This survey is voluntary; however, we hope that you will take time to answer our questions. Your answers will help us to make these services better and ore available to people who live in this county. Your answers are anonymous. Nobody will ntact you unless you ask them to.
	Demographics
1.	Do you consider yourself to be? Choose one
	Female Male Transgender
2.	Do you consider yourself to be? Choose one American Indian Asian Black Multiracial White
3. 4.	Do you consider yourself to be? Choose one Hispanic Non-Hispanic What is your age?
5.	Which area best describes where you live?
	Jefferson Residents
ŝ.	How many years have you lived in this county?
7.	Do you have access to internet and/or email at home? No Yes

Some high school
Some college/AA degree
Master's degree or higher
ork Part-time job
Student
Retired
Refugee assistance
Workforce assistance
Workforce assistance
Workforce assistance Other, please specify
Workforce assistance Other, please specify for? Check all that apply
Workforce assistance Other, please specify for? Check all that apply nily Rent or mortgage
Workforce assistance Other, please specify for? Check all that apply nily Rent or mortgage
Workforce assistance Other, please specify for? Check all that apply nily Rent or mortgage Transportation costs
Workforce assistance Other, please specify for? Check all that apply nily Rent or mortgage Transportation costs Elder care

My Health Care

12. What kind of health insurance do you have	e? Check all that apply
Insurance from an employer	Medicaid or Medicaid HMO
Insurance you pay for yourself like	
"Obama Care" or Affordable Care A	ct TRICARE, military or VA benefits
Indian or Tribal Health Services	Medicare
I do not have any health insurance	Other
13. How long has it been since your last visit t	o a doctor for a wellness exam or physical?
(Please don't include visits for injuries or i	llnesses)
Within past 12 months 1	to 2 years ago 2 to 5 years ago
5 or more years ago D	o not know/Not sure
14. How long has it been since your last denta	al exam or cleaning?
Within past 12 months 1	to 2 years ago 2 to 5 years ago
5 or more years ago	o not know/Not sure
Provider did not take my insurance Could not get an appointment soon enough Could not afford care Language barriers/could not communicate	
16. When you are sick, where do you go for he	ealth care?
Hospital emergency room	Community health center
My family doctor	Free clinic
Any available doctor	VA/military facility
Urgent care clinic	Health department
I usually go without care	Other
17. When a doctor prescribes medicine for yo Fill the prescription at the	u, what do you do?
pharmacy	Use herbal or natural therapies
Use leftover medicine at home	Go without medicine
Buy an over-the-counter medicine	Use someone else's medication

Community Life and Community Health

18. Which of the following do you consider to b	be the most important to make your county a
great community? Choose three	
Religious or spiritual values	Good schools
Clean water, air, etc.	Good race relations
Good public transportation	Active lifestyle/outdoor activities
	Social support services like food
	pantries, Salvation Army, Catholic
Affordable housing	Charities, etc.
Low numbers of homeless	Good employment opportunities
Low crime and safe neighborhoods	Access to healthy food
Arts and cultural events	Good place to raise children
19. Do you do any of the following? Check all t	that apply
Organized sports	Attend church regularly
Membership in local clubs	Volunteer with local groups
Visit the library	Register to vote
Attend local government meetings	Take classes to pursue education
Take classes to pursue a hobby	Exercise three times a week
	Use local rivers or lakes to swim,
Read books or magazines regularly	boat or fish
Garden as a hobby	Visit local parks
20. Which of the following do you consider to b	be the most important health issues for your
county? Choose three	,
Infectious diseases (hepatitis, TB,	Sexually transmitted diseases and
COVID, etc.)	HIV/AIDS
Obesity, overweight	Heart disease and stroke
Cancer	Respiratory, lung issues
Diabetes	Aging problems (mobility, vision)
	Infant birth issues (low birth-weight)
Dental issues	premature birth, birth defects
Accidental injuries	Motor vehicle crashes
Fire-arm related injuries	Domestic violence
Homicide	Homelessness
Suicide	Mental health issues
Teen pregnancy	Child abuse, neglect
Tobacco use	Drug use (prescribed and other)

21. Which of the following unhealthy behaviors county? Choose one	,
Poor eating habits/nutrition	Excess Weight
Lack of exercise	Not seeing a doctor or dentist
Not getting vaccines to prevent	
diseases	Unprotected/unsafe sex
Alcohol abuse	Drug Abuse
Tobacco Use	Homelessness
22. Which health care services are hard to get in	n your county? Check all that apply
Primary medical care (a primary	Specialty medical care (specialist
doctor or clinic)	doctors
Dental care including dentures	Mental health care
Hospital care	Emergency medical care
Laboratory services	X-rays or mammograms
Vision care	Prescriptions/Pharmacy services
Physical therapy/rehabilitation	Prenatal/OB/Labor and Delivery
Alternative therapy (herbal,	<u> </u>
acupuncture, etc.)	
cov	ID-19
23. Since the beginning of COVID-19 on March 1 changed?	1, 2020 how has your employment status
changed?	
changed? I work at the same place with the	I, 2020 how has your employment status I work at the same place but my hours have been reduced
changed?	I work at the same place but my hours have been reduced
changed? I work at the same place with the	I work at the same place but my hours have been reduced I lost my job and have not found
changed? I work at the same place with the same number of hours	I work at the same place but my hours have been reduced I lost my job and have not found
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19	I work at the same place but my hours have been reduced I lost my job and have not found
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I	I work at the same place but my hours have been reduced I lost my job and have not found
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I needed to take care of people who	I work at the same place but my hours have been reduced I lost my job and have not found another I am working from home
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I needed to take care of people who depend on me	I work at the same place but my hours have been reduced I lost my job and have not found another I am working from home
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I needed to take care of people who depend on me I was not employed before March 1	I work at the same place but my hours have been reduced I lost my job and have not found another I am working from home
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I needed to take care of people who depend on me I was not employed before March 1 and I am not employed now	I work at the same place but my hours have been reduced I lost my job and have not found another I am working from home
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I needed to take care of people who depend on me I was not employed before March 1 and I am not employed now 24. Since the beginning of COVID-19 on March 2	I work at the same place but my hours have been reduced I lost my job and have not found another I am working from home
changed? I work at the same place with the same number of hours I changed jobs because of COVID-19 I had to quit my job because I needed to take care of people who depend on me I was not employed before March 1 and I am not employed now 24. Since the beginning of COVID-19 on March 2	I work at the same place but my hours have been reduced I lost my job and have not found another I am working from home 1, 2020, have you been tested for COVID-19?

26.	If you have been tested, where did you	go? Check a	II that apply		
	CVS Pharmacy		The health d	epartment	
	Drive thru-testing in this count	у	Drive-thru testing in another county		
	Doctor's office		Hospital		
	Since the beginning of COVID-19 on Matold you had COVID-19?	rch 1, 2020 h	nave you or sor	meone in you	r home been
	No one in the house Yes, more than one person in t home, not including me Yes, both someone in my home		Yes, someon including me Yes, only me Yes, more th		
	me		home and m	e	
	If you had COVID-19, what medical care Did not seek medical care Received monoclonal therapy How effective are these actions to keep		Went to the Was hospital	doctor's offic lized	
		Not	Somewhat		Very
		Effective	Effective	Effective	Effective
	Wearing a face mask				
	Praying				
	Washing your hands with soap or using hand sanitizer				
	See a health care provider if you are sick				
	Seeing a health care provider if you are exposed to someone with COVID-19				
	Avoiding public spaces, gatherings and crowds				
	Avoiding contact with people who are at high-risk				
	Avoiding hospitals and clinics				
	Avoiding restaurants				
	Avoiding public transportation				
	Getting a vaccine and booster(s)				
30.	Have you received any COVID-19 vaccin No 1 dose		ed series (1 or	2)	3-4 shots

•		se reasons prevented you from getting the
vaccine? Check all that appl	•	To a consideration to a con-
Don't know where to	_	Transportation issues
My doctor told me no		Afraid of side effects
I think the vaccines a		I can't get time off from work
I had COVID so I don't		I can't go on my own (need help)
Don't trust the govern	iment	Other
32. Do you think your physical hea	alth has gotten	worse in the past two years because of COVID-
No	_ Yes	
33. Do you think your mental hea 19?	lth has gotten w	vorse in the past two years because of COVID-
No	Yes	
F	ood Access a	nd Nutrition
34. Do you get food for yourself a	nd/or the peop	e who live with you either by shopping or
through a foodbank?	.,	, , , , , , , , , , , , , , , , , , ,
No	Yes	
	_	
35. Where do you buy your food?		
Jefferson residents Check all	that apply	
Winn Dixie	Bob	and Jeff's
Dollar General	Jeff	erson Farmer's Market
Dollar Tree	Oth	er
	OR	
Madison residents Check all		
Winn Dixie	Bob and Jir	n's Other
Family Dollar	 Dollar Gene	
Dollar Tree	Clover Farn	ns
	_	
36. Do you receive SNAP benefits	?	
No	Yes	
27.5		
37. Do you get food from foodbar	iks, Farm Share, Yes	churches, and/or community gardens?

38.	Do you have your own garden?)	
-	No	Yes	
39.	How do you get to the grocery	store or source	e of food?
	Own vehicle	Ride	e with friend or family member
•	Big Bend Transit	Bicy	
-	Walk		er
40.	In the past year, were you ever	hungry becaus	se there was not enough money to buy food
	for your home?	0 ,	ζ , ,
_	No	Yes	
41	How often does the cost of foo	d ston vou from	n huving healthy food?
	All of the time		st of the time
•	Some of the time		e of the time
-	Some of the time		ic of the time
42.	In the past year, how often hav	ve you skipped	a meal or cut down on the size of your meal so
	that others in your house could	d eat?	
	All of the time	Mos	st of the time
•	Some of the time		ne of the time
-			
43.	How important do you think it	is to eat health	γ?
	Very important		ortant
•	Somewhat important		
-	<u> </u>		·
44.	What are the top three reason	s that prevent	you from eating healthier foods and being
	active? Choose three	•	_
	It is too expensive to c	ook/eat	
	healthy foods	00.14 cat	I do not know how to change my diet
•	Healthier food is not a	vailable in	Do not have time to cook or shop for
	my neighborhood		healthy food
•	Do not want to change	what Leat	I already eat healthy and am active
•	It is not safe to exercis	_	Cannot afford exercise equipment or
	neighborhood	· ,	gym membership
-	Do not know how muc	h more	8/p
	active I need to be		Do not have time to be more active
•	Do not want to be mo	re active	Tried before and failed to change
•	I am happy the way I a	·	Fear of failure

45. What would make healthier for	od choices easier	choices for you? Choose three						
Less expensive								
·	More of these items provided at my food bank/food pantry/delivery meal							
program A community garden in my neighborhood where I can learn to grow my own food More farmers markets or farm stand Knowing how to grow my own food/having space to grow food More time to prepare/cook meals More grocery stores near where I live/work More convenience stores that sell fruits, vegetables, and lean proteins								
								fruits, vegetables, and lean protein
						Knowing how to prepa	•	
						Knowing now to prepa	ire iruits, vegetar	oics, and ican protein
						46. How often do you eat fast food	ქ ?	
						Daily or more than one	ce a day	Several days a week
Once a week	<u> </u>	1-2 times a month						
Several times a year		Never						
47. How often do you eat home-co	ooked meals?							
Daily or more than one	ce a day	Several days a week						
Once a week		1-2 times a month						
Several times a year		Never						
Но	ousing and Nei	ghborhood						
40 M/hatia waxa awaa tii ina aitwa	-+:2							
48. What is your current living situ	ation?	Part have						
Own home		Rent home						
Live with friends/famil		Other						
49 For neonle renting homes: Is a	nart or all of your	rent paid for by the federal government or						
other source?	sait of all of your	Tent paid for by the reactar government of						
No	Yes							
	_ 163							
50. For people renting homes: ha	ve you had troub	le getting your landlord to make repairs?						
No	Yes							
	-							
51. Have you been homeless in the	e past year?							
No	Yes							
	-							
52. Do you feel safe in your home?								
No Yes								

53. Do you feel safe in your neig	ghborhood?
No	Yes
54. Does your neighborhood ha	ive good street lighting?
No	
55. Are there abandoned/parke	ed cars in your neighborhood that you think should be removed?
No	•
56. How would you rate the pol	lice service in your neighborhood?
Very good	Good
Fair	Poor
Not sure	
57. Do you have any of the follo	owing in your home?
Smoke detector	No Yes
Carbon monoxide detector	No Yes
Carbon monoxide detector Fire extinguisher	No Yes
58. What is the main source of	water for your home? Choose one
	•
Not sure	y water Private well Other
50. Which of the following best	describes the water that you drink at home most often?
Choose one	·
	Filtered tap water
Unfiltered tap water Bottled water	Other
60 Are there areas of standing	water near or around your home?
No	Yes Not sure
61. Do you know if there is cont	taminated water in your neighborhood?
No	Yes Not sure
62. Is your home connected to	a city sewer system or to a septic tank system? Choose one
City sewer system	Septic tank
Not sure	
63. Can you smell sewage or for	ul smelling water outside of your home?
No	- · · · · · · · · · · · · · · · · · · ·

64.	. Do you have problems with plumbing in your home?				
	No	Yes			
65.	Do you have problems wi home?	th toilets n	ot flushi	ng or flushing	slowly or overflowing in your
	No	Yes			
66.	Do you notice a foul smel	I from any	plumbin	g fixtures in yo	our home?
	No	Yes			
67.	How would you describe	the quality	of the a	ir you breathe	in your home?
	Very good			Good	
	Fair	-		Poor	
	Not sure	-		•	
68	Are any of these an issue	that affects	the air	quality in you	r home?
00.	Are any or these an issue	No	Yes	Not sure	
	Dust	140	103	Not suic	\dashv
	Pollen				_
	Chemicals/Pollutants				-
	Bad Smell				_
					_
	Tobacco Smoke				
69.	Do you currently have an	v mold spot	ts in vou	ır home larger	than a dollar bill?
	No	Yes		Not su	
70.	Are you concerned about	hugs in voi	ır home	.?	
	No	Yes		•	
		163			

Mental Health and Substance Use

71.	If I or an adult family	member ne	eeded mental health services, I know where to find services
	No	Yes	Where would you go?
72.	If I or an adult family find services	member ne	eeded alcohol or drug counseling services, I know where to
	No	Yes	Where would you go?
73.	I know where to find	mental hea	olth services or alcohol or drug counseling services for a
	child I care for		
	No child		
•	No		
-	Yes	Where wo	ould you go?
74.	I can tell when some	one is depre	essed.
	No		Yes
75.	I know someone who	o has bipola	r disorder.
	No		Yes
76.	I know someone who	o has schizo	phrenic disorder.
	No		Yes
77.	I would not tell anyo	ne close to	me if I had a mental illness.
	No		Yes
78.	I would not tell anyo	ne close to	me if I had a drug or alcohol problem.
	No		Yes
79.	If I had a mental illne county.	ess or drug o	or alcohol problem, I would look for treatment in another
	, No		Yes

Please check the box that represents your answer to each of the statements below

,		Slight		Moderate	Severe
During the past TWO (2) WEEKS , how much (or how	None	Rare, less	Mild	More than	Nearly
often) have you been bothered by the following	Not at	than a day	Several	half the	Every
problems?	all	or two	Days	days	Day
Little interest or pleasure in doing things?	<u> </u>	0	54,5	aays	24,
Feeling down, depressed or hopeless?					
Feeling more irritated, grouchy or angry than usual?					
Sleeping less than usual, but still have a lot of energy?					
Starting lots more projects than usual or doing more					
risky things than usual?					
Feeling nervous, anxious, frightened, worried or on					
edge?					
Feeling panic or being frightened?					
Avoiding situations that make you anxious?					
Unexplained aches and pains in your head, back,					
joints, abdomen or legs?					
Feeling that your illnesses are not being taken					
seriously enough?					
Thoughts of actually hurting yourself?					
Hearing things other people can't hear, such as voices					
even when no one was around?					
Feeling that someone could hear your thoughts, or					
that you could hear what another person was					
thinking?					
Problems with sleep that affected your sleep quality over all?					
Unpleasant thoughts, urges or images that repeatedly					
enter your mind?					
Feeling driven to perform certain behaviors or mental					
acts over and over again?					
Feeling detached or distant from yourself, your body,					
your physical surroundings or your memories?					
Not knowing who you really are or what you want					
out of life?					
Not feeling close to other people or enjoying your					
relationships with them?					
Drinking at least 4 drinks of any kind of alcohol in a					
single day?					
Using any tobacco products?					
Using any recreational drugs or prescription medicine					
that you do not have a prescription for?					

Appendix 3 Health Summit Agenda and Sign-in Sheet



2022 Community Health Needs Assessment Summit December 16, 2022 10:00 a.m. to 3:00 p.m.



AGENDA

Purpose:

To develop Madison County's Community Health Needs Assessment that will be used by agencies to plan priorities for the next three to five years.

Topic		Facilitator
10:00 a.m. to 10:15 a.m.	Welcome, Opening Remarks	Kimberly Allbritton & Tammy Stevens
10:15 a.m. to 10:30 a.m.	Overview of MAPP Process and Visioning Statement	Shamarial Roberson, DrPH, MPH
10:30 a.m. to 11:30 a.m.	Data Presentation • Health Indicators • Community Themes and Strengths	Pam Beck
11:30 a.m. to 12:30 p.m.	Forces of Change Assessment	Shamarial Roberson, DrPH, MPH
12:30 p.m. to 1:00 p.m.	Lunch Provided	
1:00 p.m. to 1:45 p.m.	Break Out Session • Identifying Community Priorities	Shamarial Roberson, DrPH, MPH
1:45 p.m. to 2:00 p.m.	Share Thoughts and Ideas from Break Out Session	Shamarial Roberson, DrPH, MPH
2:00 p.m. to 2:55 p.m.	Local Public Health Assessment	Pam Beck
2:55 p.m. to 3:00 p.m.	Closing Remarks	Kimberly Allbritton & Tammy Stevens
3:00 p.m.	Adjourn	



2022 Community Health Needs Assessment Summit December 16, 2022 10:00 a.m. to 3:00 p.m.



Sign In Sheet

Purpose:

To develop Madison County's Community Health Needs Assessment that will be used by agencies to plan priorities for the next three to five years.

<u>Name</u>	Organization/Title	<u>Email</u>	Signature
1. Allison Wiman	BBAITEC Executive Director	awiman@makendAbe	c. ora \$205
2. Alston Kelley			yana ta wa ana ana ana
3. Alyssa Crawford	FOOH Minority Aros Coord	rator alyssa crawford @	du
4. Annie Dyke		(i) (i) (ii) (ii)	
5. Beth Fuentes	ACT PROGRAM SUPERUISO	e elizabeth co apalacho	renteriona 1=
6. Betsy Rykard	BDOH - Jefferson - Chronic Ase	use Leila- Rukard O Fi bealth	or Rula Pylenl
7. Bill Gibson	(() () () () () () () () () (July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
8. Bobby Wilson	5. And the Control Samuely	299	
9. Brent Couch	a la de la companya d		4
10. Brittany Selph	Mcm H	bselphe membius	Britam Selph
11. Carissa Pepera	FOOH madison - TPS	Carissa Pepera@FDIHan	7
12. Caroline Gibson	FOOH Jefferson Madison - SWAT COORdington	Caroline. gibson @2 fl health. you	
13. Chastity McCarthy	FDOH Jefferso/Madison Supervisor	Chastity. McCarthy FLHeat	th. 900 Chastes her
14. Chelsey McCoy	FOOH madison-Program Mgr.	Chelsey micros of health gov	
15. Cumi Allen	POOH LIKE SON / Madron Program Mar	Cymiallene Alberth. and	In Al
16. Dawn Mcgriff		2911.	MOL. 118**
17. Donna Hagan	Exec. Director	Carried File	Dan And
18. Emily Kohler	BBAHEC/Tob. Program Man.	our exoliteral biglend when	org Employ Em

2022 Community Health Needs Assessment Summit December 16, 2022 10:00 a.m. to 3:00 p.m.



Sign In Sheet

Sign in Sneet				
<u>Name</u>	Organization/Title	<u>Email</u>	<u>Signature</u>	
19. Jackie Stubbs	and an analysis of the second	aspiral transport in		
20. Jeremias Hodge	Madison KHD / SRA/Healthea	1. Jeremeas. Hodge flhouth. gn	deremon Heal	
21. Karen Kocan	Madison Courty Man. Wasp	KKocan Pmem H. US	Aca Koe	
22. Karen Pennington	211/6/11			
23. Kechia Robinson	Kechia Robinso Boce Executive	e Assistant amadisancount fir	Kechia Rebai	
24. Kevin Angel	Madison County Memorial		The fly	
25. Khristian Johnson	Madisan CAP	Khristian. Ionnson Oflhealthg	w Khust and physic	
26. Kimberly Allbritton	FOOH Madison	Kimberly Allbritton @ 9/he		
27. La'Tavia McQuay	Mobile Wellness Unit	Imagage membus	Smilitary	
28. Lane Lunn	North Florida Medical Cente	45 Henn Entre one	John Line	
29. Lavonte McDaniel	Spalachee Center / poin	Lavante lamoned e you sien	lateral.	
30. Lee Jones	Town of GV/CED/CFO	LJonesonygraenville fl. com	full	
31. Lisa Hayes		13		
32. Lisa Sherry	DISC Village	lisa. shery@discvillage.org	d': 8e	
33. Lori Evans	menut	Vevans@memty us	Anni	
34. Matthew DiFede	HARRIE CHILLIAN I LOS MARION	P ² and all and the late	She to a she	
35. Michael Angeles	16	Long West and		
36. Nita Mitchell	FDOH Marisn / Jefferson	Skanotha mickhelle flkeath	an Shorthu Meter Key	
37. Pam Beck		0		
38. Patricia Blair	FOOH Madison	patricia bloir of the althe and	Patricia Plain	
39. Quinn Steele	FDOH Jefferson	guinh. Steple of the althor	0000	

2022 Community Health Needs Assessment Summit December 16, 2022 10:00 a.m. to 3:00 p.m.



Sign In Sheet

Name	Organization/Title	Email	Signature
	<u>Organization/Title</u>	<u>Elliali</u>	Signature
40. Robert Wilson		ž	, pt 1
41. Sophia Whaley			
42. Tammy Stevens	Ment	JStavensamenh. KS	0
43. Tonya Bell			
44. Travis Coker	NFMC	tooker@nfmc.org	de luck of or
45. Tyler Smith	10,000 000 000	,	
46. Jamie Fornest	DSR	Joseph Edsiconsultant.com	Jon
47. PAULE KOVARY	MADISON HEALTH AND REHAB CENTER	admin@madisonhealthandreha	bicom Clante. Xvan
48. Veronica Bruton	Florida Dept of Health	veronica bruton (02/1/00/1)	1. SOV COUR
49. RONNIE MOORE	MADISON BOCC	district3@Nadeonfl.com	Ronnie L Mion
50. Cameron Little	Jefferson & EH	Cameron little @ Flhealth.	ag/ Ce
51. Kechia			J • ,
52. Katheen Ham Am	Greenville City Vice Mayor	Kleen hamilton @g mail.com	Kathlew Hame for
53. CARL LIVINGSton	Greenville City Coural	LIVIND21780 gmxil.com	Vand Lynesopte
54. James Easton	DOY-Areg23	James, eastor & Aleathon	Gill 80
55. Frances Capelar	com Partner	. 0	0 7
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Appendix 4 Meeting Package with Data Slides

MADISON COUNTY HEALTH SUMMIT

DECEMBER 16, 2022

10:00 a.m. to 3:00 p.m.







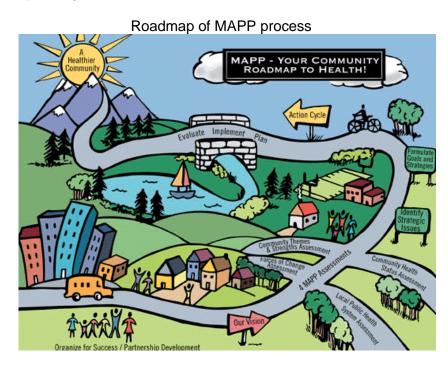




MAPP Process

Mobilizing for Action Through Planning and Partnerships (MAPP) Process

An overview of the Mobilizing for Action through Planning and Partnership (MAPP) process was discussed to educate the community about the development process of the Community Health Assessment (CHA). The MAPP process serves a resource to classify the priorities of the community and functions to identify resources to develop action plans in the community. This strategic planning tool, driven by the community, is conducted to assess the health within the community in order to identify issues and improve the well-being of the public. The MAPP process alters how we see public health planning and creates a health model focused on the community at large.



Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment, identifies issues that residents of the community deem as the most important, along with distinguishing any resources available to aid in improving the health of the community.

The Community Themes and Strengths Assessment was performed in 2022 by direct solicitation of residents to complete a standardized survey. Residents were approached at county school board meetings, county commission meetings, community events, health fairs and at local establishments. Residents had the option to complete a printed survey at the solicitation location or to access a survey monkey link to complete a survey on-line.

Community Health Status Assessment

The Community Health Status Assessment distinguishes and prioritizes quality of life and community health issues. Community participants will develop the Visioning Statement that





is included in the assessment, listen to data presentation on health indicators, and break into groups to discuss the major health indicator topic areas. At the end of the day, the group will vote to choose the three priority areas to address in the Community Health Improvement Plan that will begin January 2023.

Local Public Health System Assessment

The Local Public Health System Assessment puts the spotlight on the network of organizations and agencies in the community and how well the ten Essential Services (ES) are being delivered. This will be scheduled for January.

Forces of Change Assessment

The Forces of Change Assessment focuses on recognizing forces or factors/trends that will affect the health of the community and the local public health system. This is combined with the Community Health Status Assessment summit on December 16, 2022





Visioning Statement

Visioning Statement from 2017 Community Health Assessment

"Working together to make Madison County healthy through education, dedication, unity, and support."

Visioning Statement from 2020 Community Health Assessment (Madison County Memorial Hospital)

"Working Together to Make Madison County a Healthy and Vibrant Community."



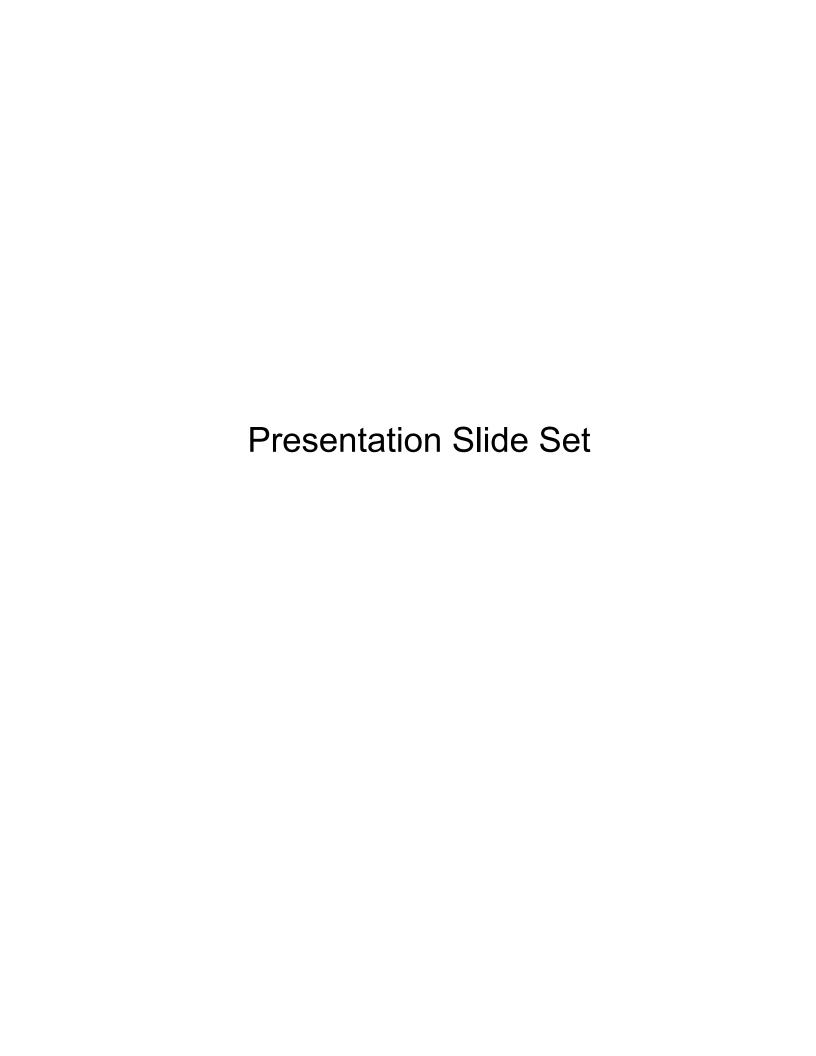


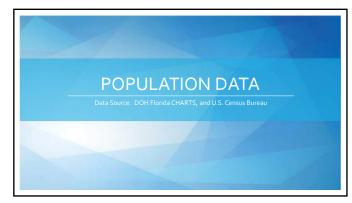
Presentation Questions

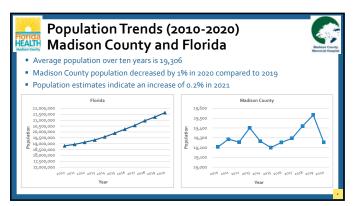
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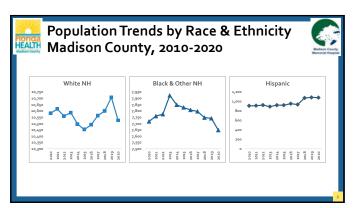
To develop Madison County's Community Health Needs Assessment that will be used by agencies to plan priorities for the next three to five years.

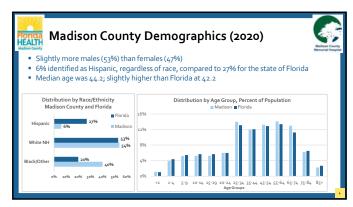
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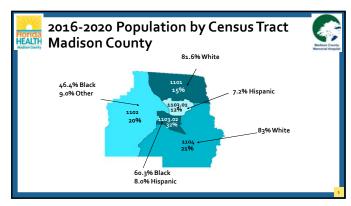




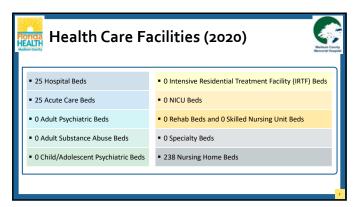


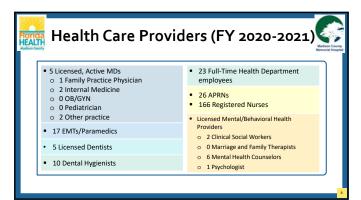




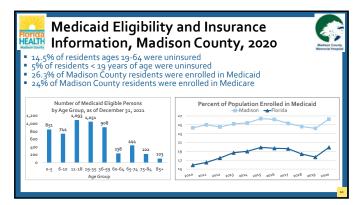


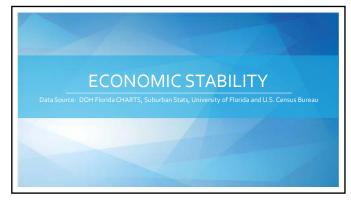


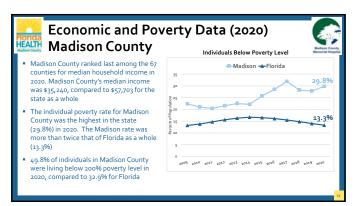


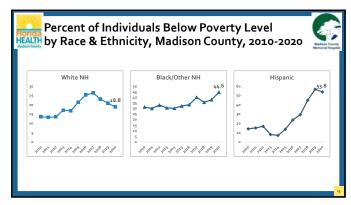


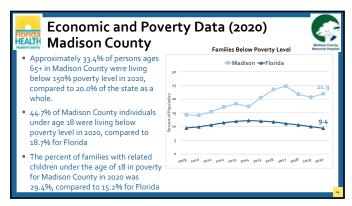


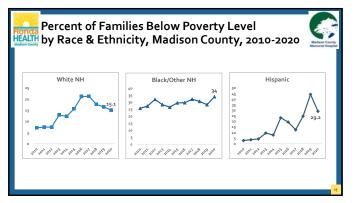


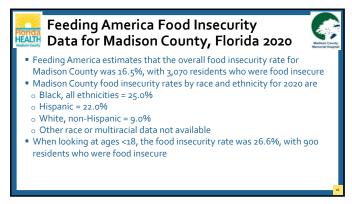


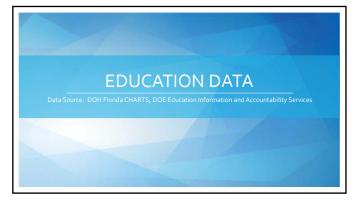


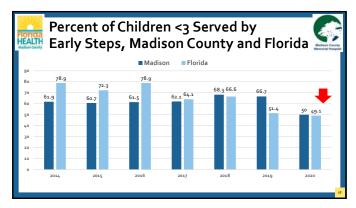


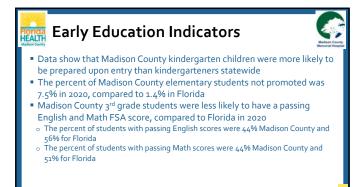


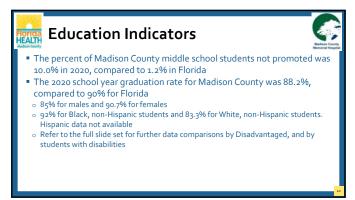


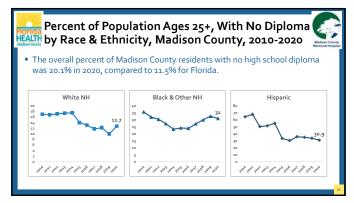


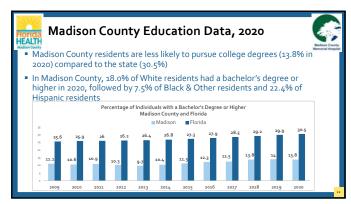


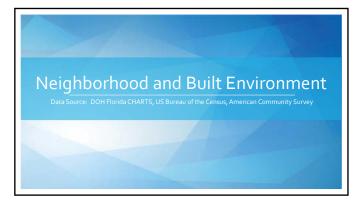


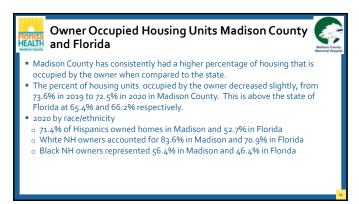


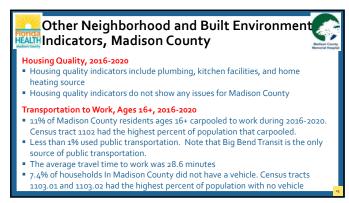




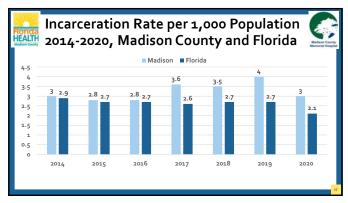


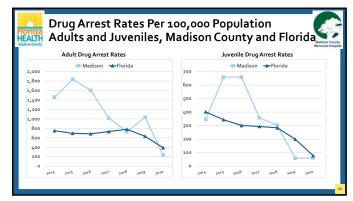




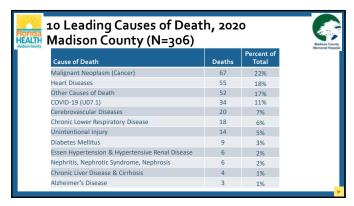


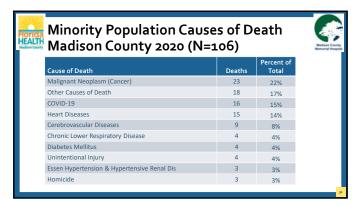


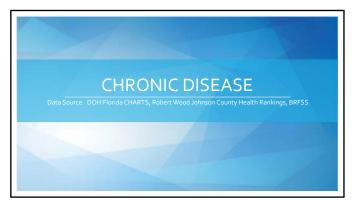


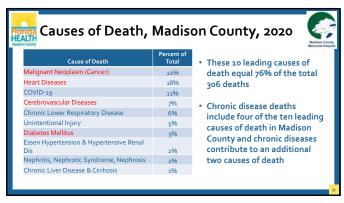


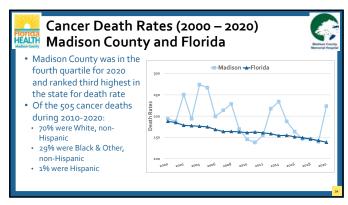


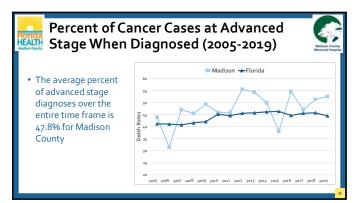


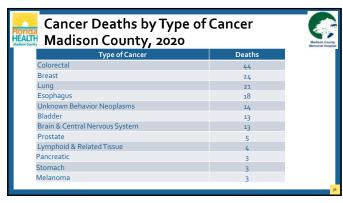


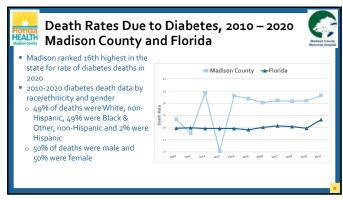


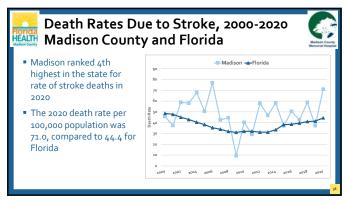


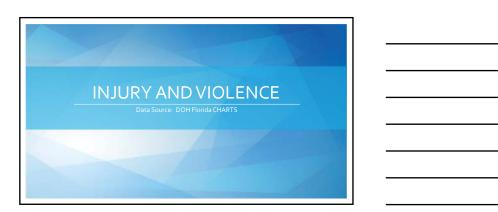


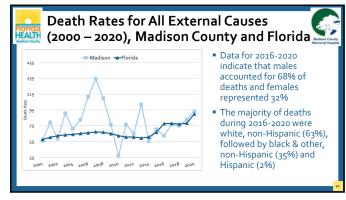




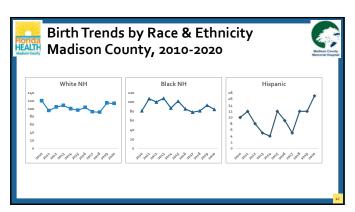


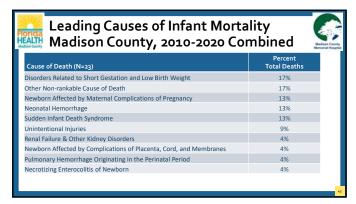




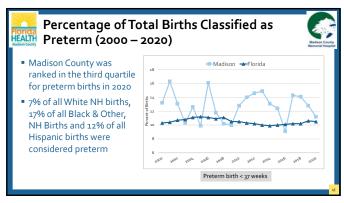


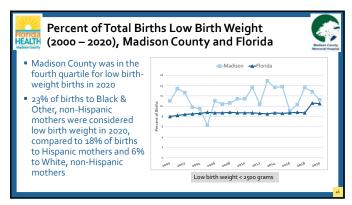


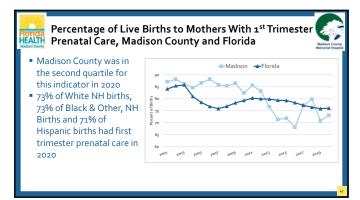


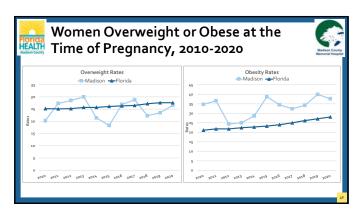


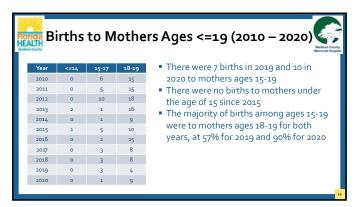


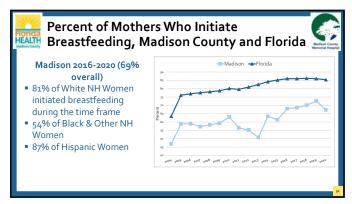


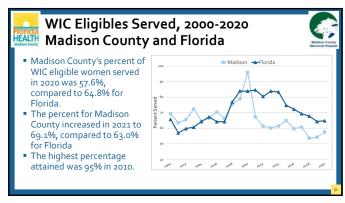


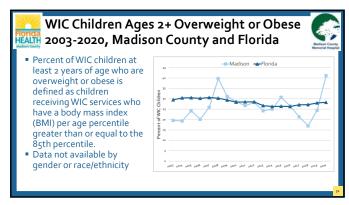


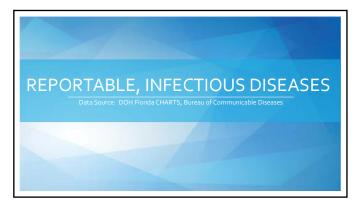


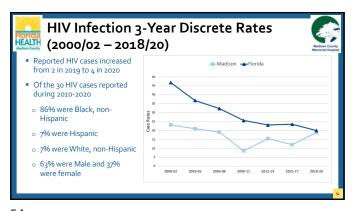


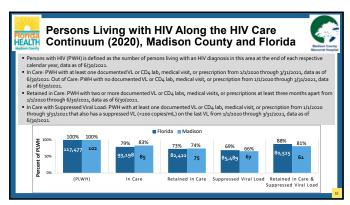


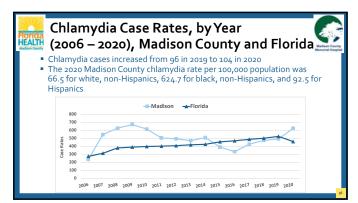


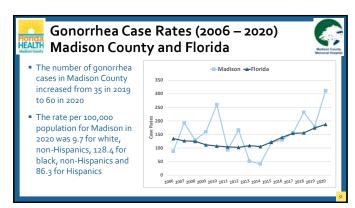


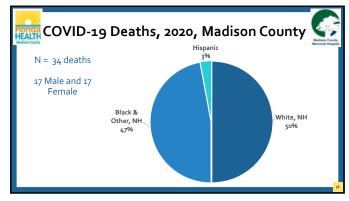




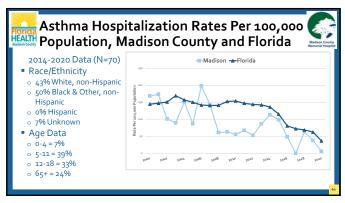




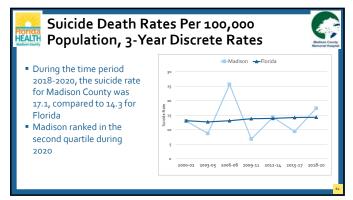


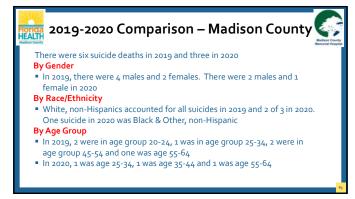


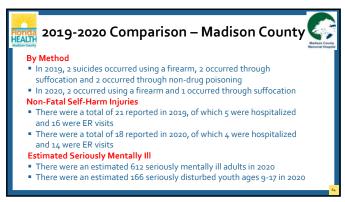


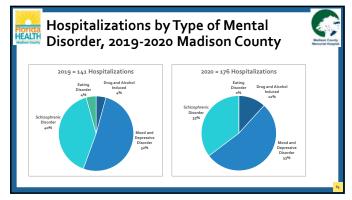


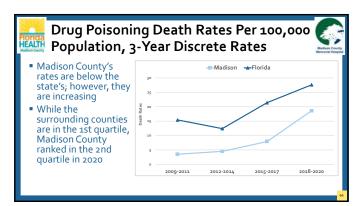




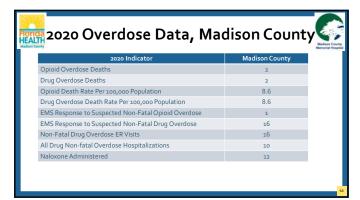


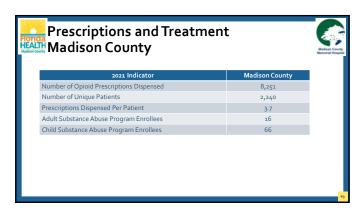


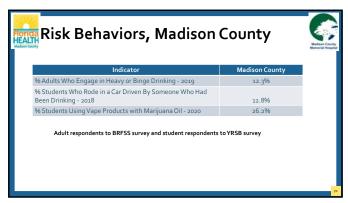


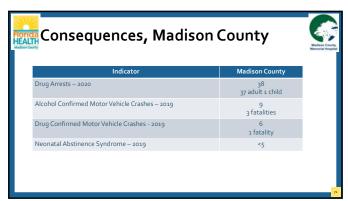




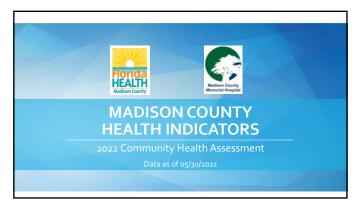


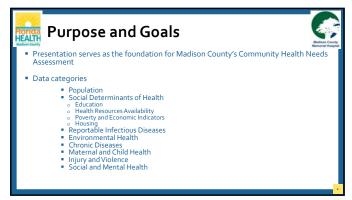




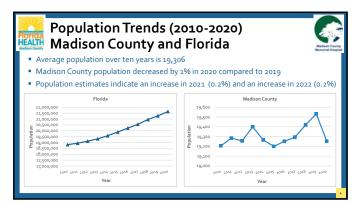


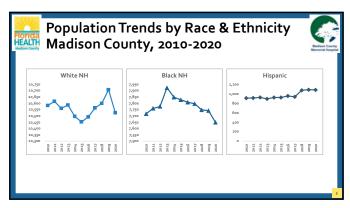


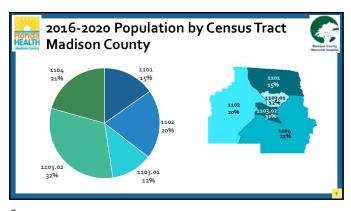


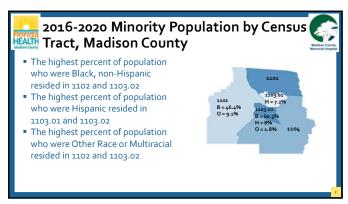


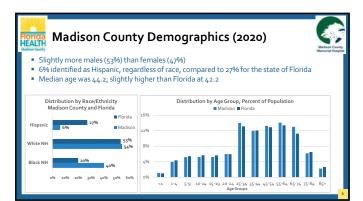






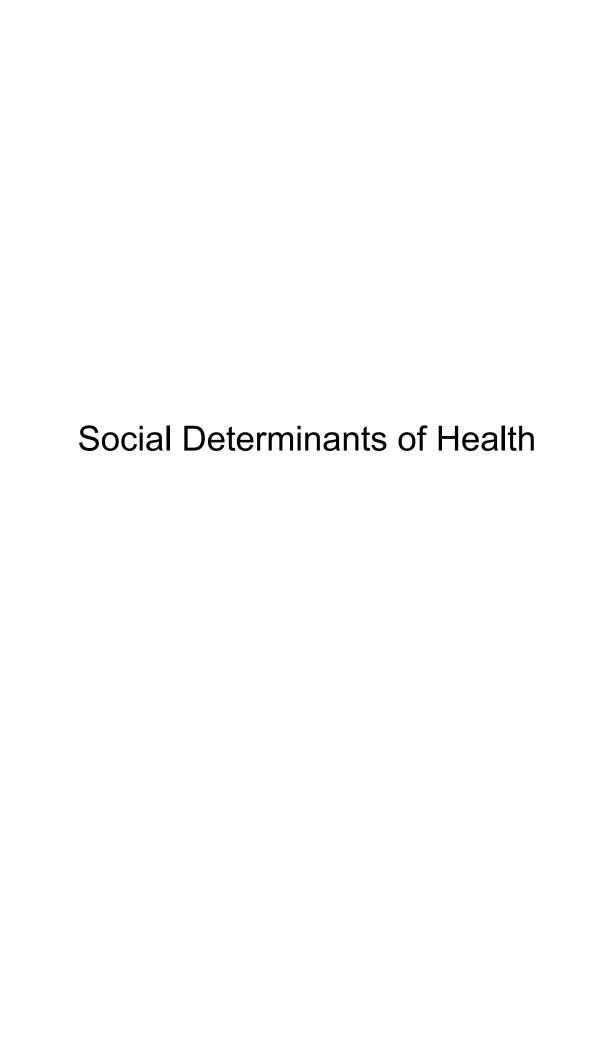




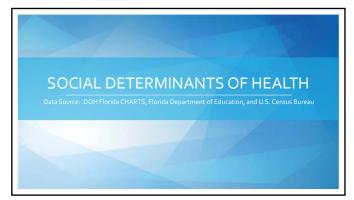


2016-2020 Demographics by Census Tract Percent of Total Population, Madison County											
Race	1101	1102	1103.01	1103.02	1104						
White	77-7	43.9	58.2	30.0	79-5						
Black	15.6	46.4	33.0	60.3	11.7						
Other	0.0	3.1	0.0	0.2	0.1						
Multiracial	0.4	6.0	1.7	1.6	1.0						
Hispanic (All Races)	6.3	0.5	7.2	8.0	7.1						
Gender	1101	1102	1103.01	1103.02	1104						
Males	51.3	46.0	47-5	66.2	47.7						
Females	48.7	54.0	52.5	33.8	52.3						

2016-202 Percent (
Age Group	1101	1102	1103.01	1103.02	1104	
< 5	3-3	5.9	6.0	5.0	3.6	
5-9	7-3	6.0	1.8	5-3	3.3	
10-14	0.7	10.6	6.3	2.5	8.2	
15-19	4.1	6.6	11.2	4.8	6.2	
20-24	2.7	4.7	2.4	6.5	4.7	
25-34	10.1	13.2	9.2	20.1	13.0	
35-44	10.8	9.0	12.7	14.8	8.6	
45-54	14.5	12.2	12.3	14.7	9.0	
55-59	4.6	8.5	10.2	5.6	9.5	
60-64	8.7	5.9	8.4	5-4	8.4	
65-74	21.7	11.6	12.9	8.5	15.4	
75+	11.4	5.9	6.6	6.9	10.1	







2



Introduction



- The Social Determinants of Health were introduced to the public through the Healthy People 2020 initiative.
- Healthy People 2030 Goal: Create social and physical environments that promote good health for all.
- Healthy People 2030 Social Determinants of Health definition, "The conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks."



Introduction



health and illness follow a social gradient: the lower the socioeconomic position, the worse the health."

National Academies of Sciences, Engineering and Medicine, "Nonprofit human service agencies are critical partners in efforts to bend the nation's health care cost curve because they address vulnerable populations' social and behavioral factors through the provision of a wide range of services, including access to safe, stable housing, nutritious food; counseling services; recreation programs; transportation; and advocance." transportation; and advocacy."

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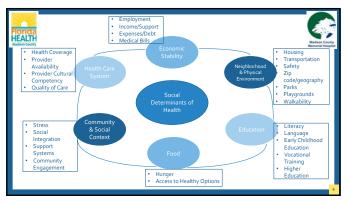


SDOH Categories



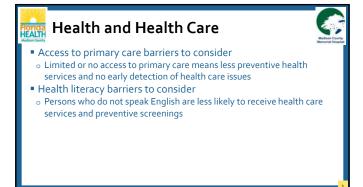
- The rationale is that in order to fix health care, you have to fix these items first
- \circ Education
- o Economic Stability
- o Food
- o Social and Community Context
- o Health & Health Care
- o Neighborhood and Built Environment

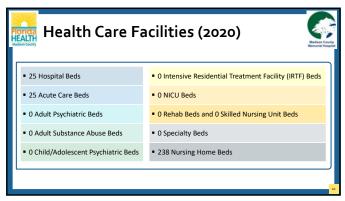
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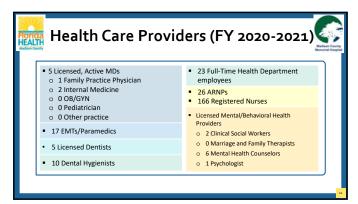


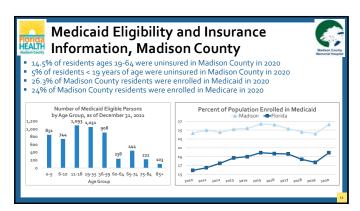


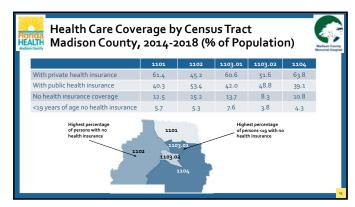


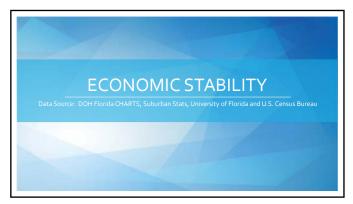




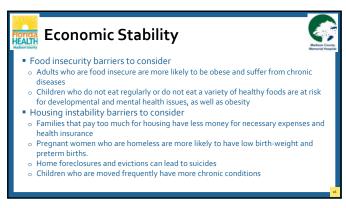


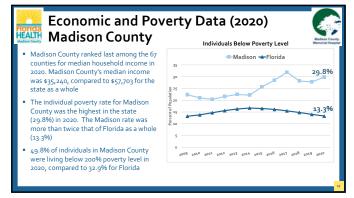


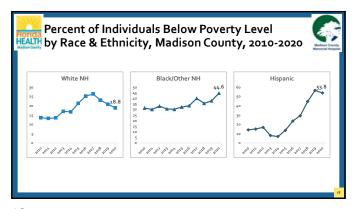


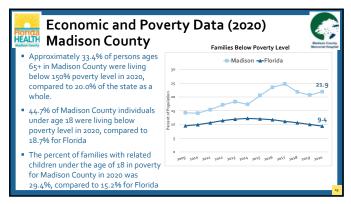


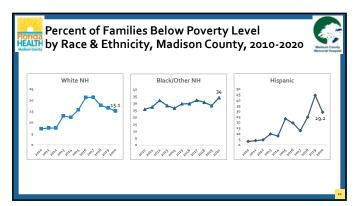


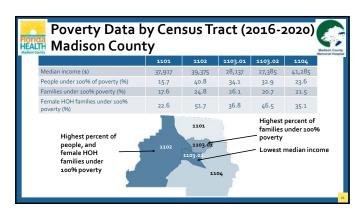


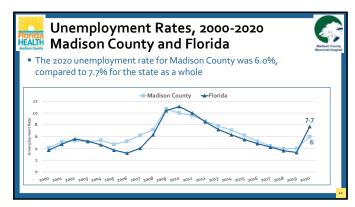


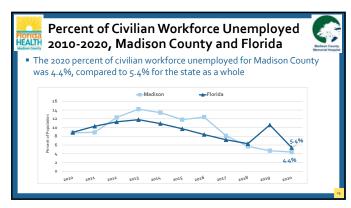


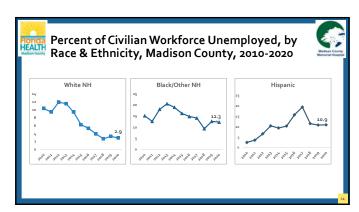




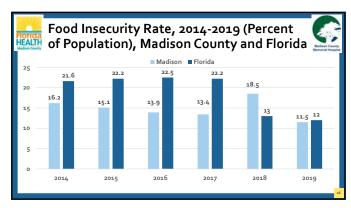


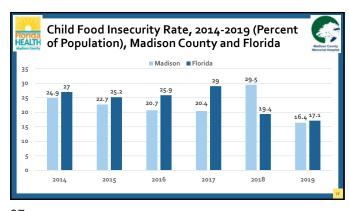


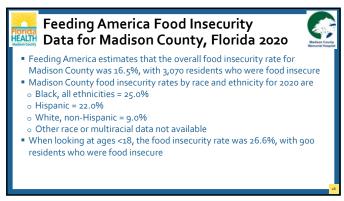


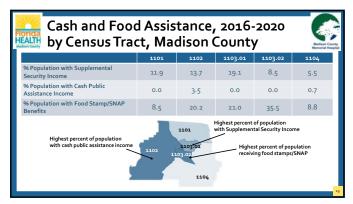






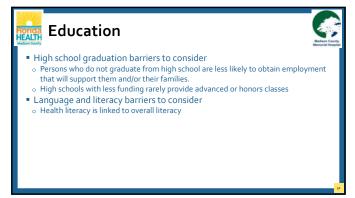


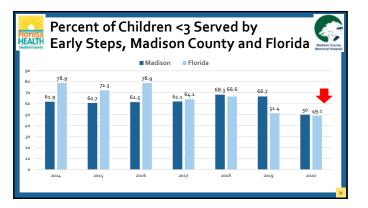


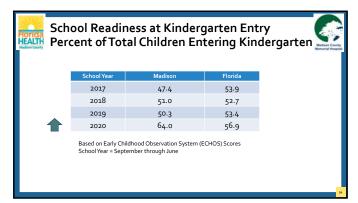


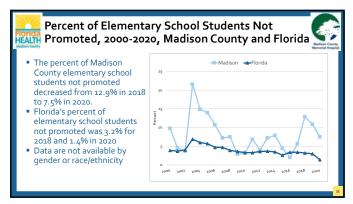


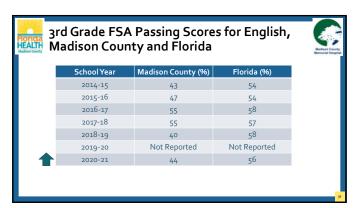


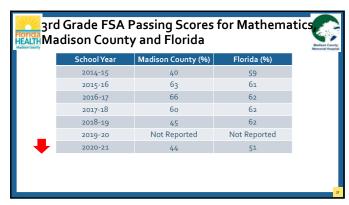


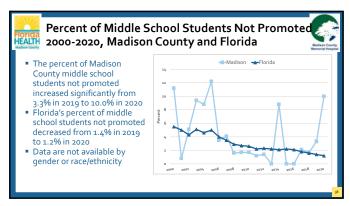


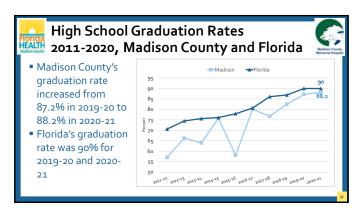




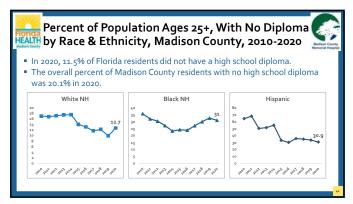


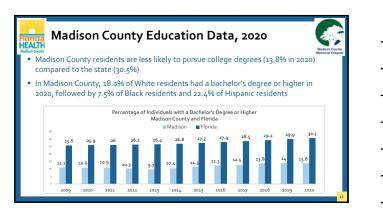


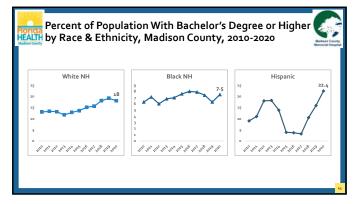


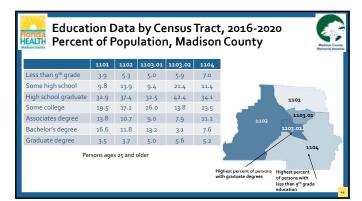


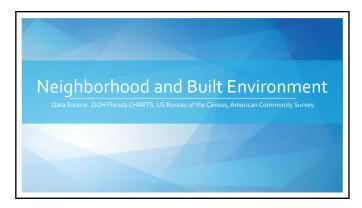
Graduation Rat Madison Count	tes by Demogra y and Florida	phics, 2020-2	.021
Gender	Madison County (%)	Florida (%)	
Overall	88.2	90.0	
Male	85.0	87.4	
Female	90.7	92.9	
Race/Ethnicity	Madison County (%)	Florida (%)	Hispanics no
Black, non-Hispanic	92.0	87.1	recorded for
White, non-Hispanic	83.3	91.8	Madison
Disability Status	Madison County (%)	Florida (%)	County
Disabled	96.0	82.3	
Not Disabled	86.5	91.2	
Disadvantaged Status	Madison County (%)	Florida (%)	
Disadvantaged	87.1	87.2	
Not Disadvantaged	89.0	94.0	

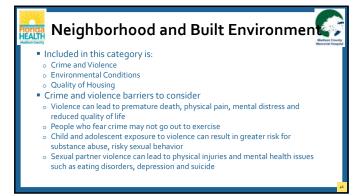


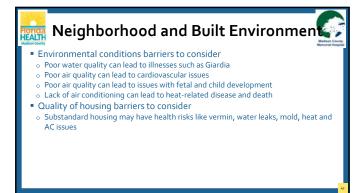


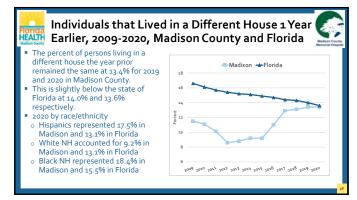


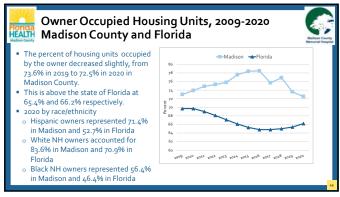


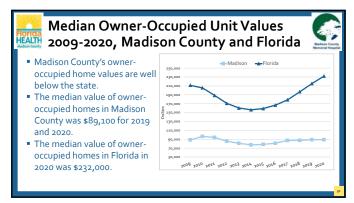


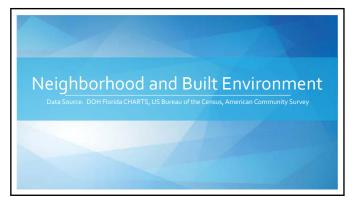




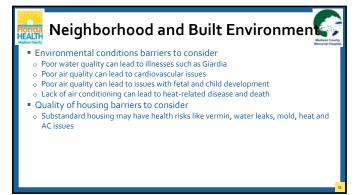


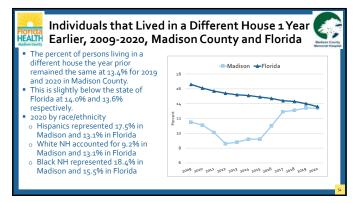


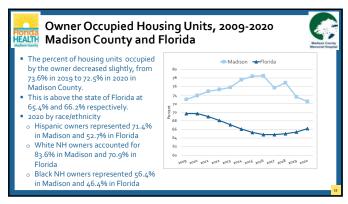


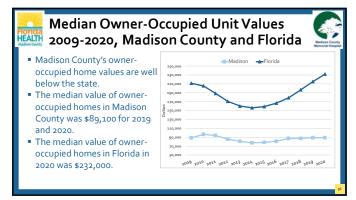


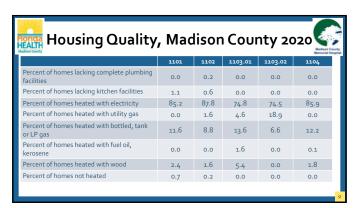


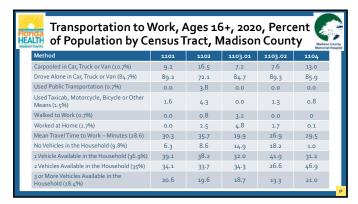








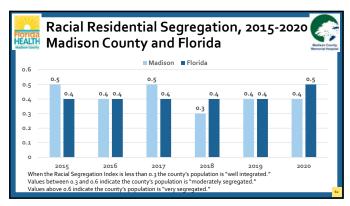


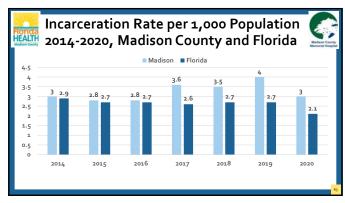


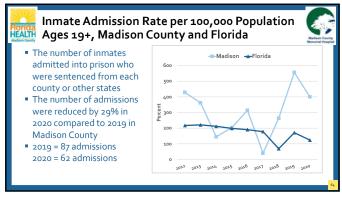


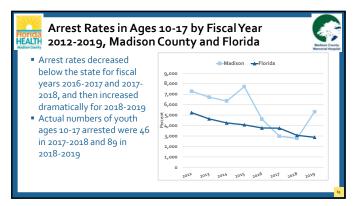


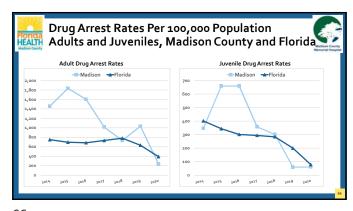


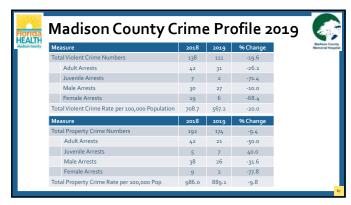


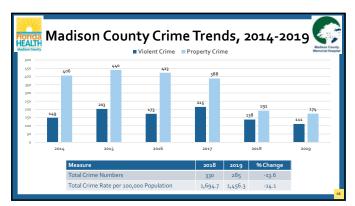


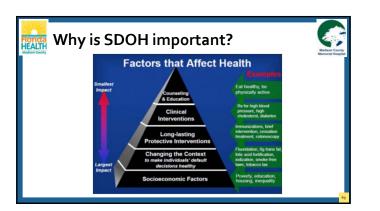


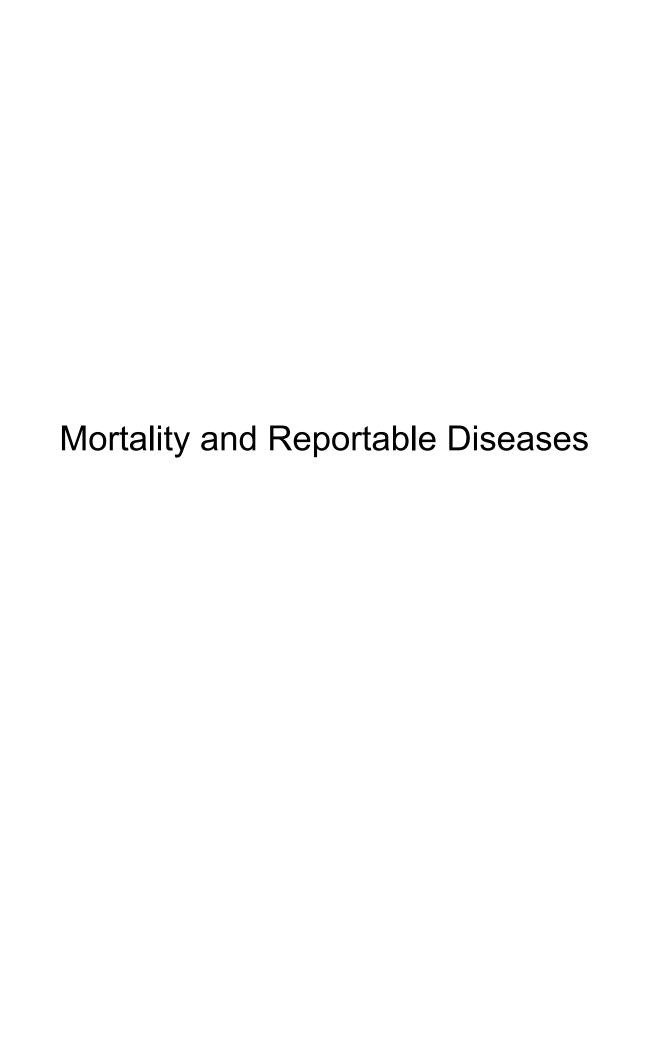


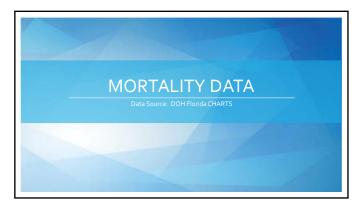




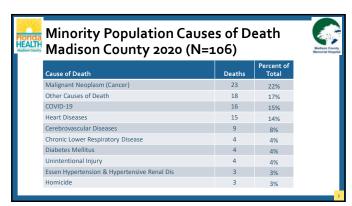




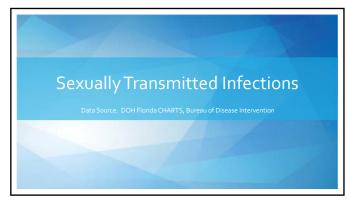


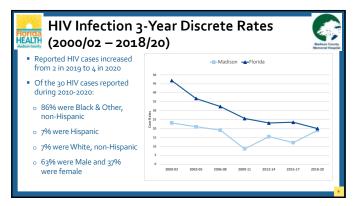


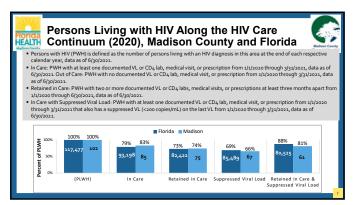
10 Leading Causes of Death, 2020 Madison County (N=306)			
Cause of Death	Deaths	Percent of Total	
Malignant Neoplasm (Cancer)	67	22%	
Heart Diseases	55	18%	
Other Causes of Death	52	17%	
COVID-19 (U07.1)	34	11%	
Cerebrovascular Diseases	20	7%	
Chronic Lower Respiratory Disease	18	6%	
Unintentional Injury	14	5%	
Diabetes Mellitus	9	3%	
Essen Hypertension & Hypertensive Renal Disease	6	2%	
Nephritis, Nephrotic Syndrome, Nephrosis	6	2%	
Chronic Liver Disease & Cirrhosis	4	1%	
Alzheimers Disease	3	1%	

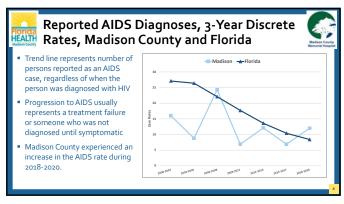


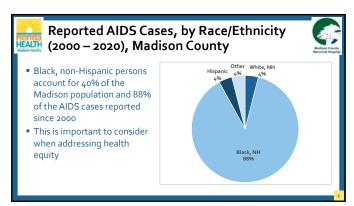


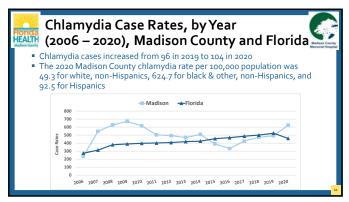


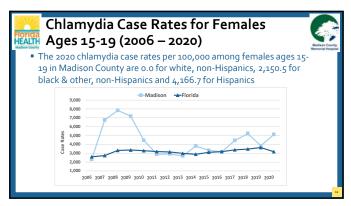


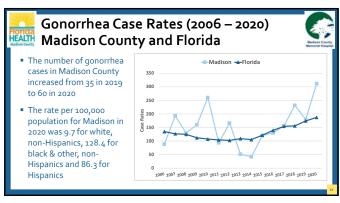


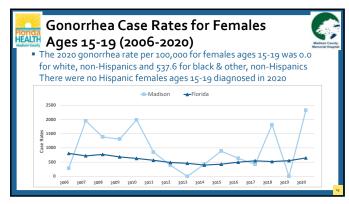


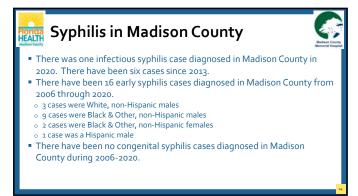


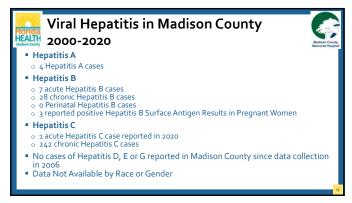


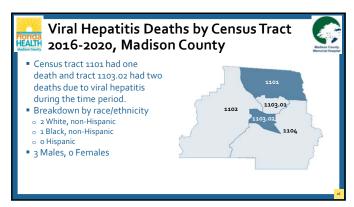


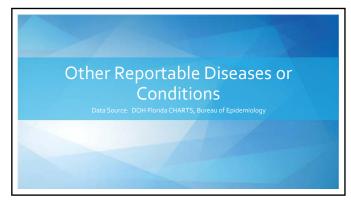


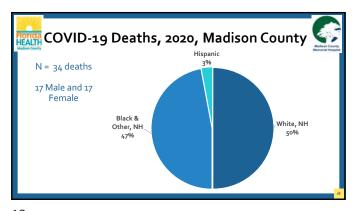


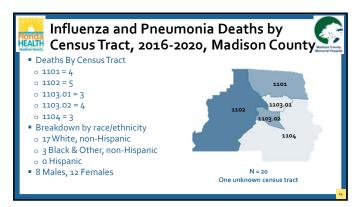


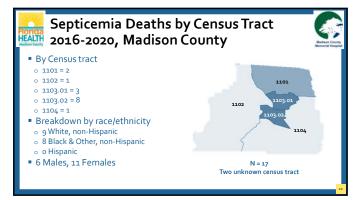


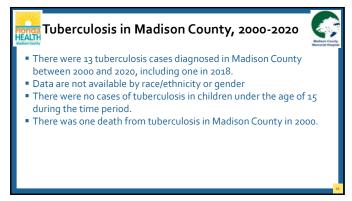


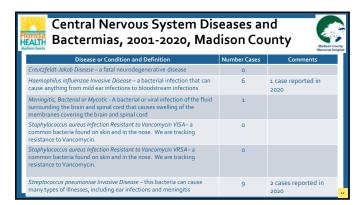


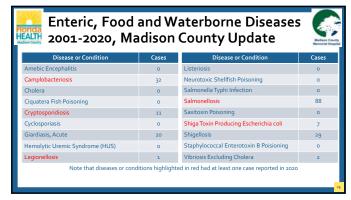


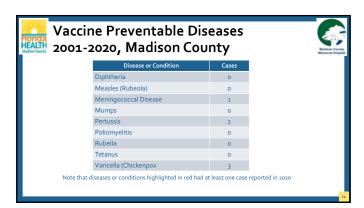




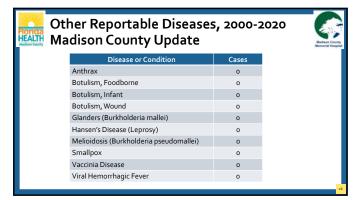




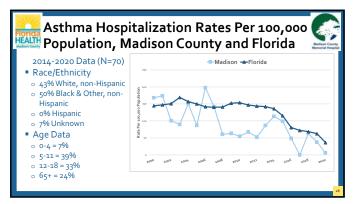


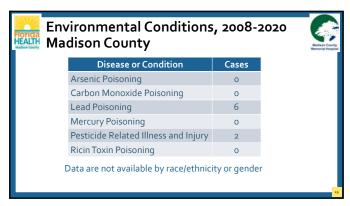




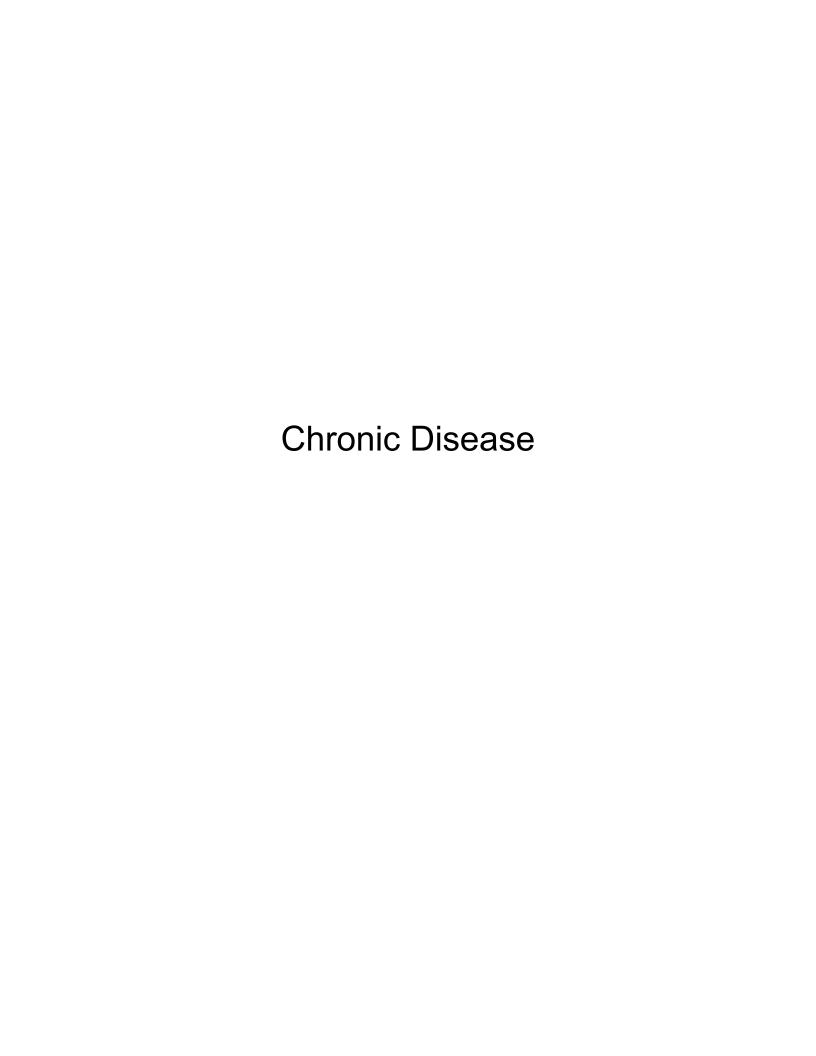


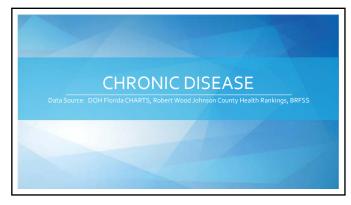






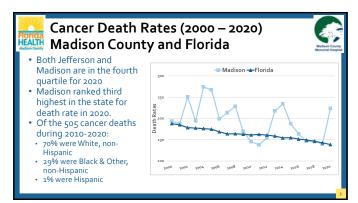


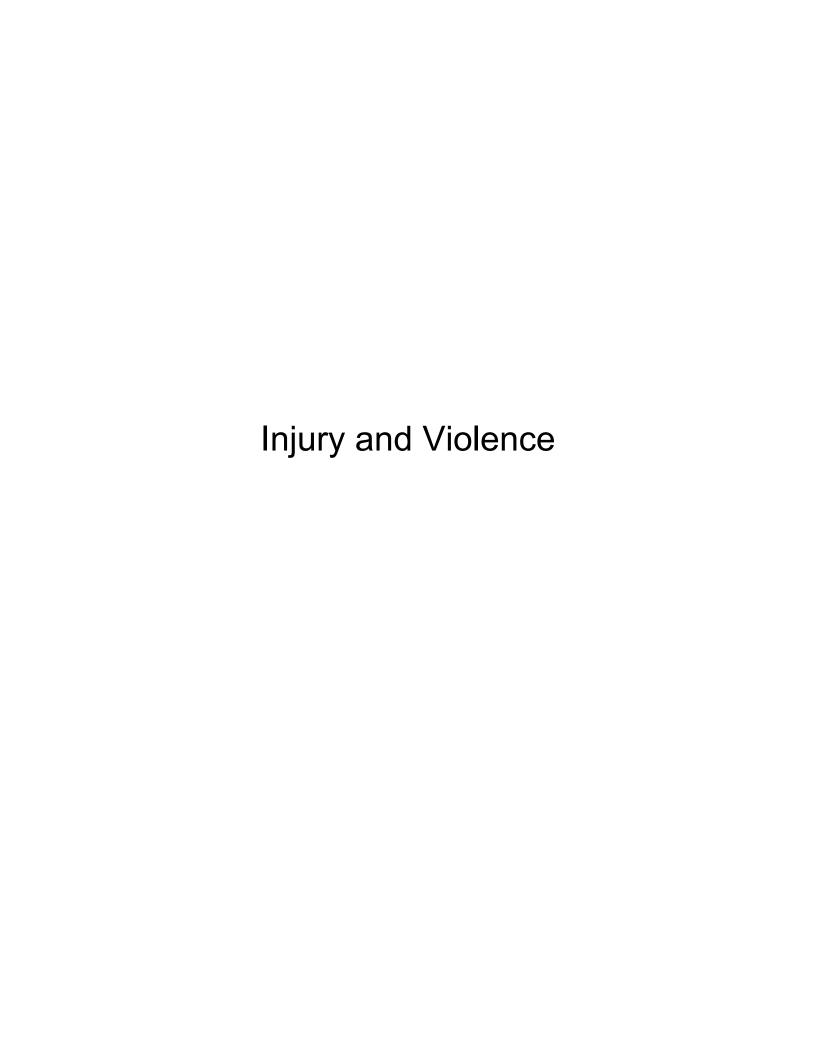




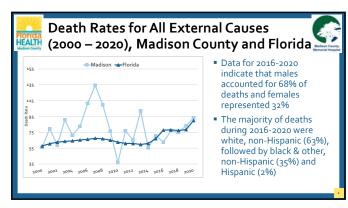
Causes of Death, Madison County, 2020 Cause of Deatl These 10 leading causes of Malignant Neoplasm (Cancer) death equal 76% of the total Heart Diseases 18% 306 deaths COVID-19 11% Cerebrovascular Diseases · Chronic disease deaths Chronic Lower Respiratory Disease 6% include four of the ten leading Unintentional Injury causes of death in Madison Diabetes Mellitus County and chronic diseases Essen Hypertension & Hypertensive Renal contribute to an additional 2% Nephritis, Nephrotic Syndrome, Nephrosis two causes of death 2% Chronic Liver Disease & Cirrhosis 1%

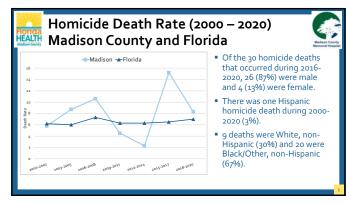
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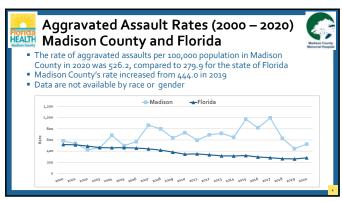


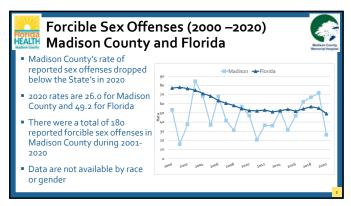


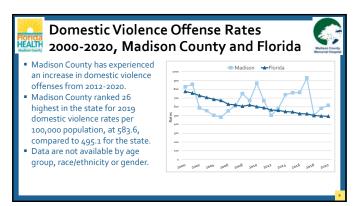


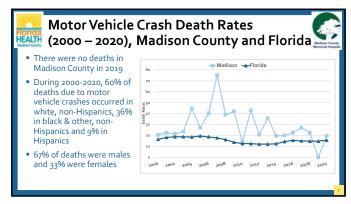


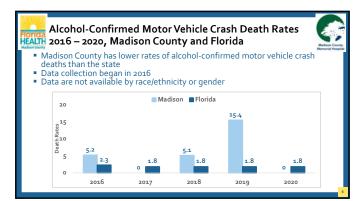


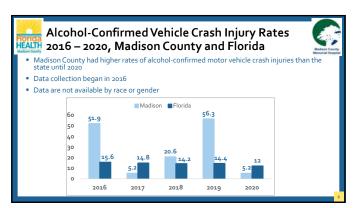


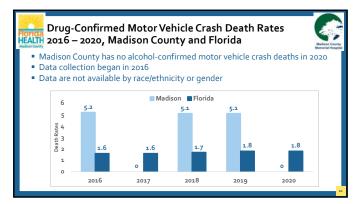


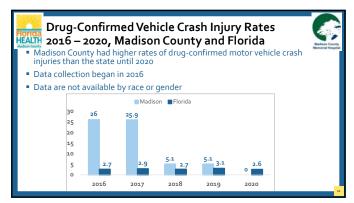


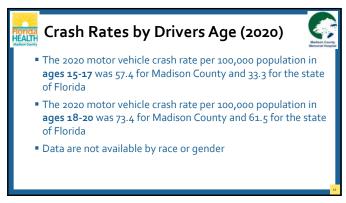


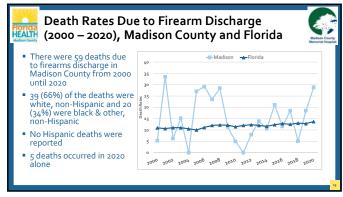




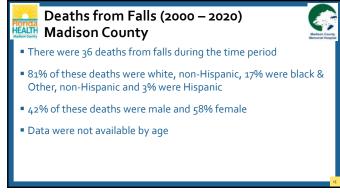








Drowning Deaths in Madison County (2000 – 2020) There were 15 deaths due to drowning in Madison County during 2000-2020 47% were white, non-Hispanic and 53% were black & other, non-Hispanic. There were no Hispanic deaths during the time frame 87% were male and 13% female Data by age are not available

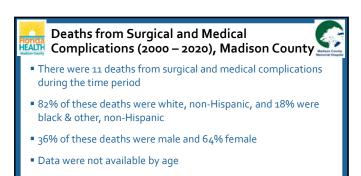


Deaths from Unintentional Fires (2000 – 2020), Madison County There were 8 deaths from unintentional fires during the time period 49% of these deaths were white, non-Hispanic, 13% were black &

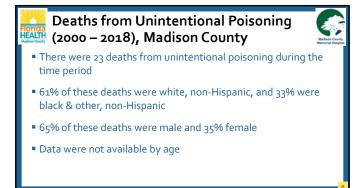
- other, non-Hispanic and 38% were Hispanic

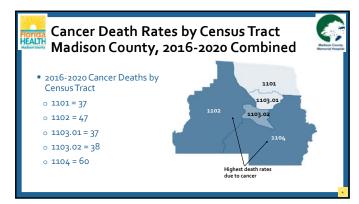
 62% of these deaths were male and 38% female
- Data were not available by age

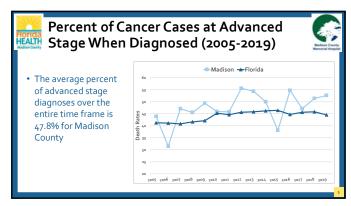
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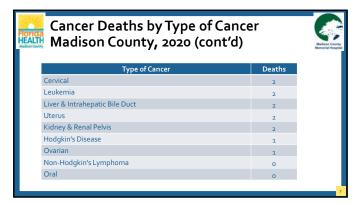
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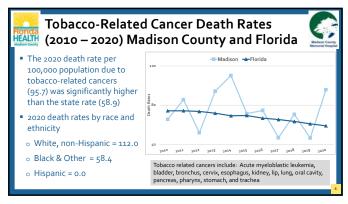


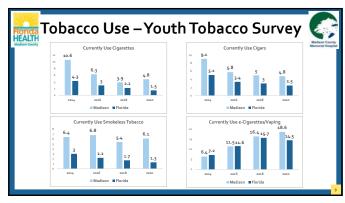


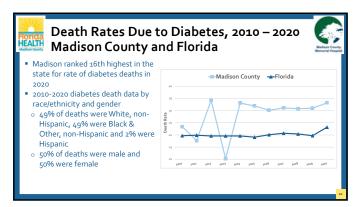


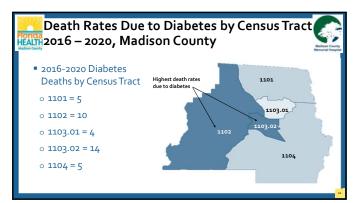
Madison County, 2020	
Type of Cancer	Deaths
olorectal	44
reast	24
ung	21
sophagus	18
Jnknown Behavior Neoplasms	14
Bladder	13
Brain & Central Nervous System	13
Prostate	5
ymphoid & Related Tissue	4
ancreatic	3
tomach	3
Melanoma	3

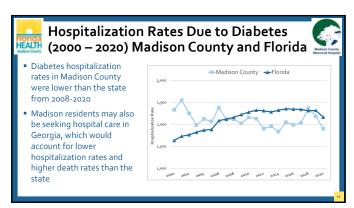


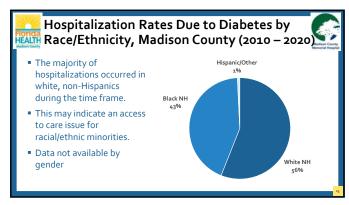


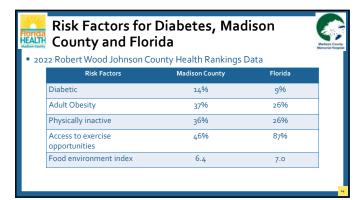


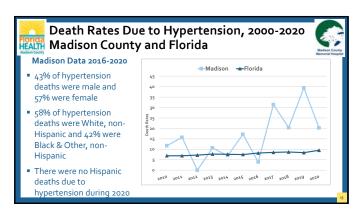


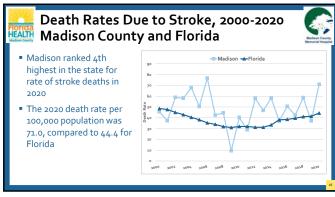


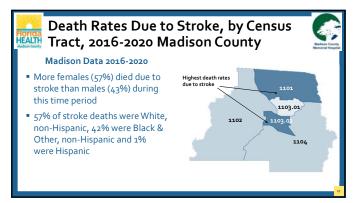


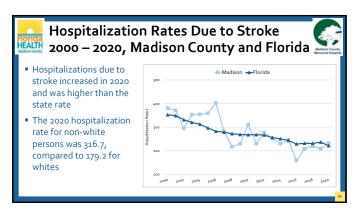




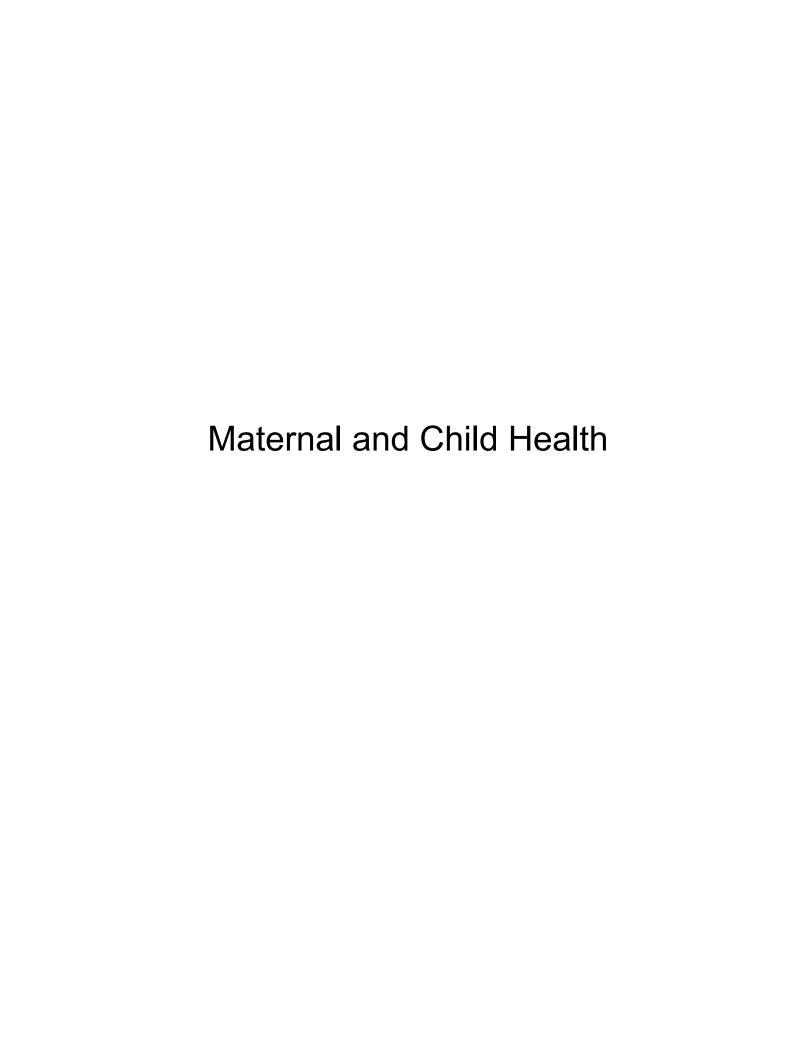




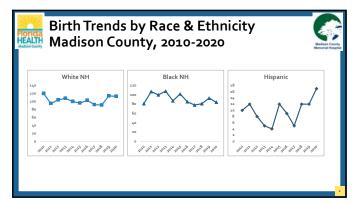




Risk Factors for Cardiova and Stroke, 2019 BRFSS	scular Dise	ase
	Madison County	Florida
Adults who are current smokers	16.9%	14.8%
Adults who are obese	44.5%	27.0%
Adults who are overweight	30.5%	37.6%
Physical Inactivity	36.0%	26.0%

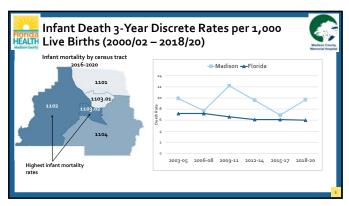


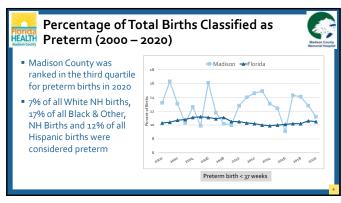


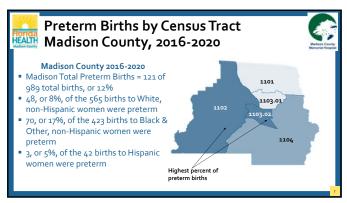


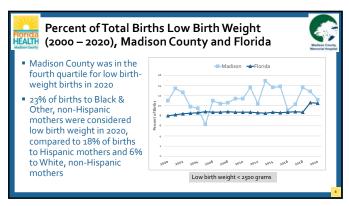
Leading Causes of Infant Morta Madison County, 2010-2020 Co	
Cause of Death (N=23)	Percent Total Deaths
Disorders Related to Short Gestation and Low Birth Weight	17%
Other Non-rankable Cause of Death	17%
Newborn Affected by Maternal Complications of Pregnancy	13%
Neonatal Hemorrhage	13%
Sudden Infant Death Syndrome	13%
Unintentional Injuries	9%
Renal Failure & Other Kidney Disorders	4%
Newborn Affected by Complications of Placenta, Cord, and Membranes	4%
Pulmonary Hemorrhage Originating in the Perinatal Period	4%
Necrotizing Enterocolitis of Newborn	4%

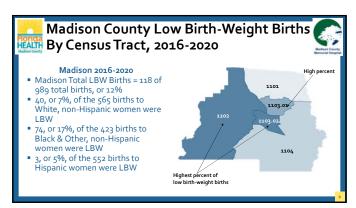


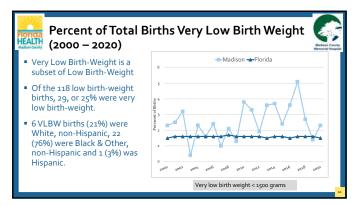


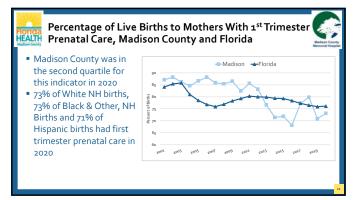


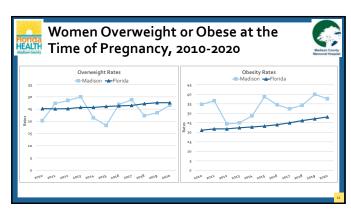




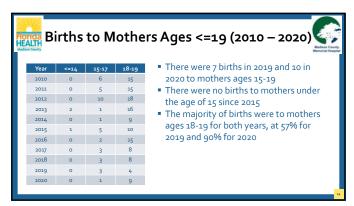


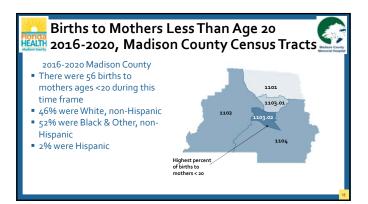


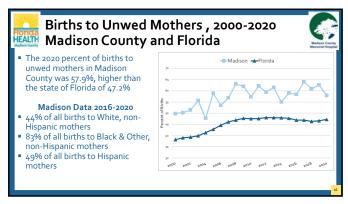


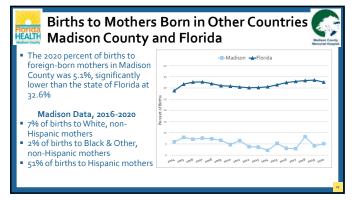


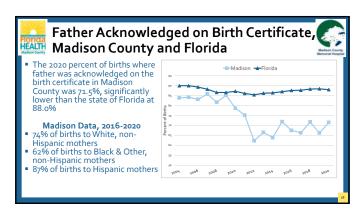


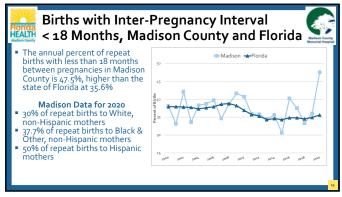


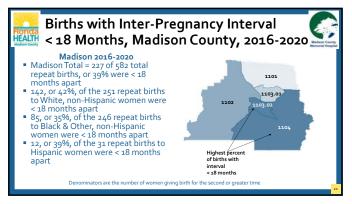


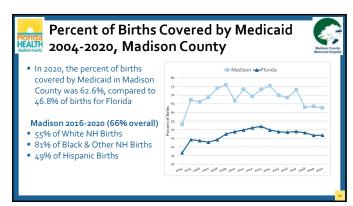


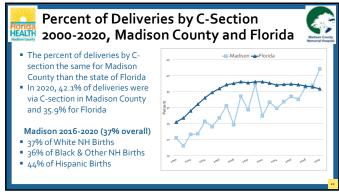


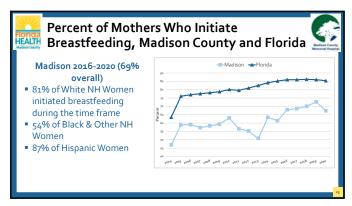


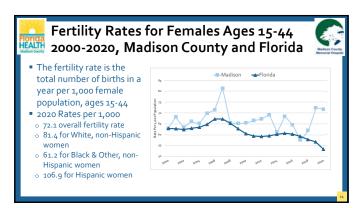


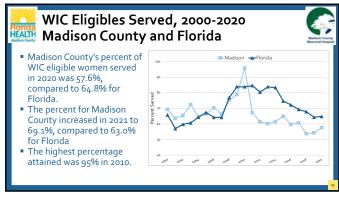


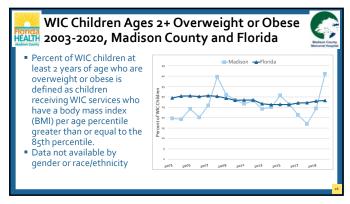


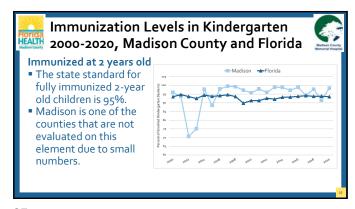


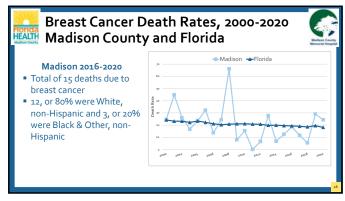




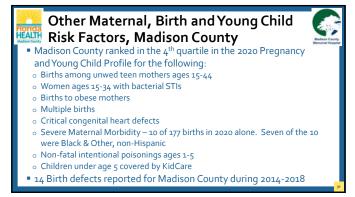


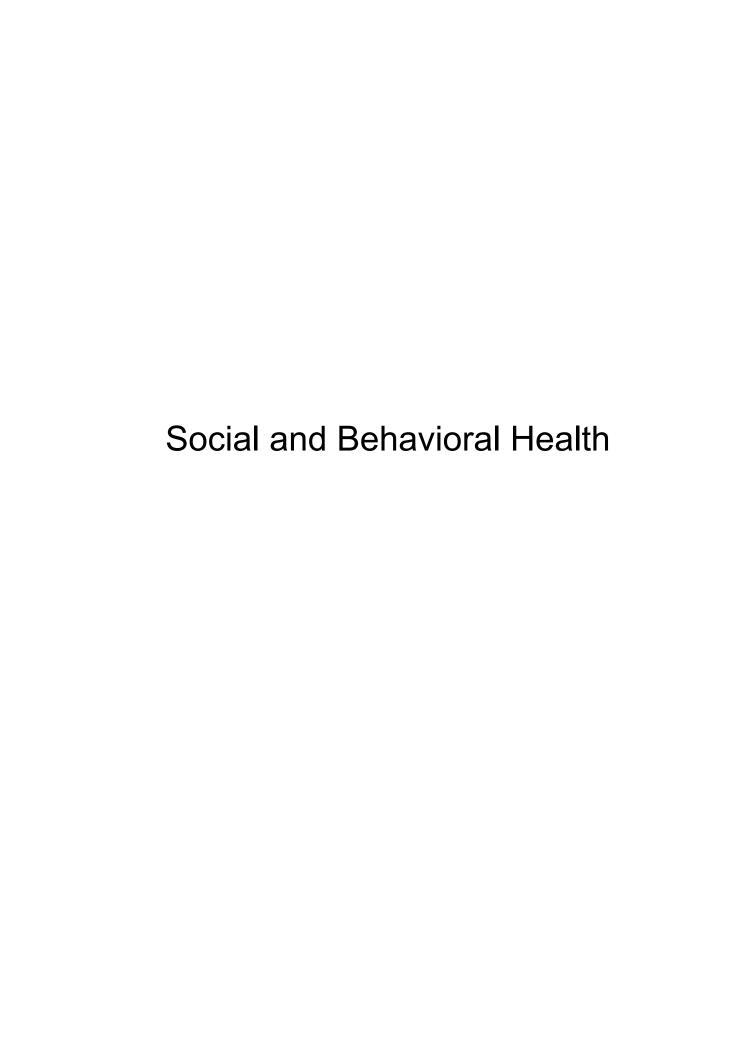




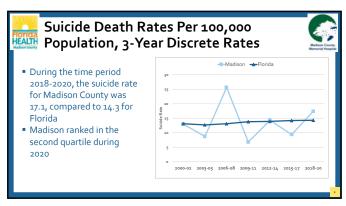


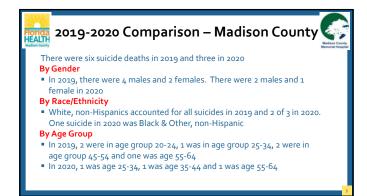




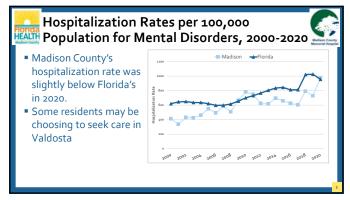


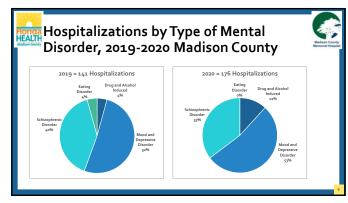


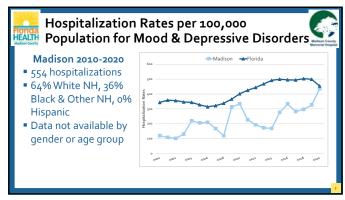


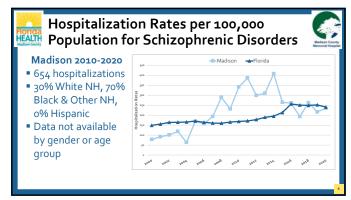


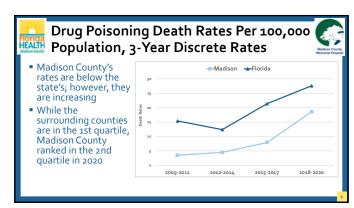


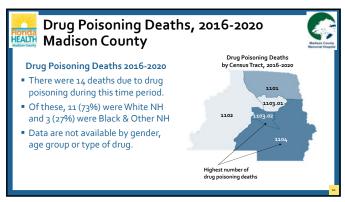


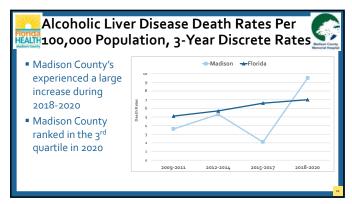


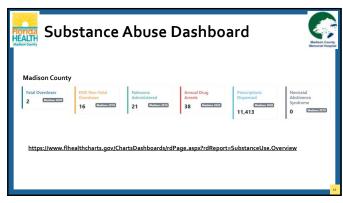


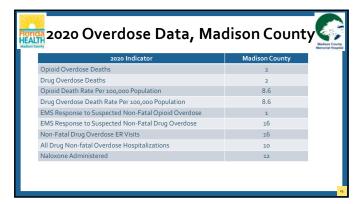


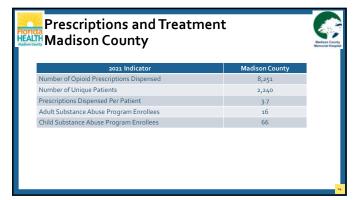


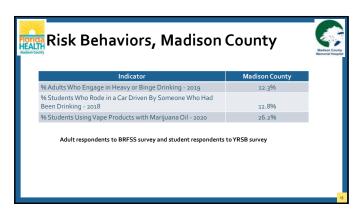












Indicator	Madison County
rug Arrests — 2020	38 37 adult 1 child
cohol Confirmed Motor Vehicle Crashes – 2019	9 3 fatalities
rug Confirmed Motor Vehicle Crashes - 2019	6 1 fatality
onatal Abstinence Syndrome – 2019	<5







Introduction to PACE-EH



- What is PACE-EH?
- o A methodology consisting of tasks to engage the public's involvement, collect necessary and relevant information pertaining to community environmental health status, rank issues and set local priorities for action
- How is the methodology applied?
- o 13 Tasks
- Does it work?
- $_{\odot}\,$ Results have been proven. In Florida, over 65 PACE initiatives have yielded \$50 million in improvements

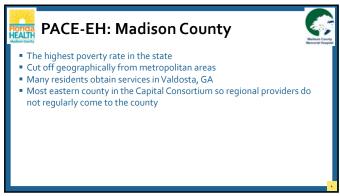
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🚃 Background



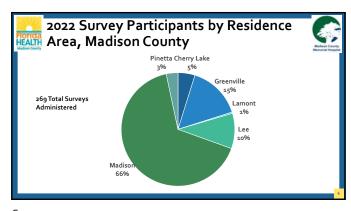
- DOH-Madison applied for PACE-EH funding and identified Neighborhood and Built Environment as the targeted issue
- Healthiest Weight Florida required a PACE-EH around Access to Healthy Foods
- The Community Themes and Strengths assessment was incorporated into the survey because DOH-Madison was developing Community Health Assessment in 2022
- The Community Health Improvement Plan Social and Behavioral Health subcommittee intended to survey county residents about depression and access to care prior to the advent of COVID-19. These questions were
- COVID-19 testing and vaccine questions were added at the request of the Health Equity program

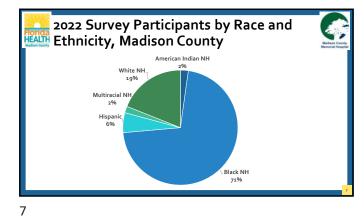


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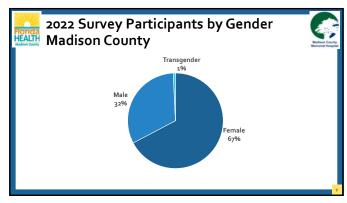


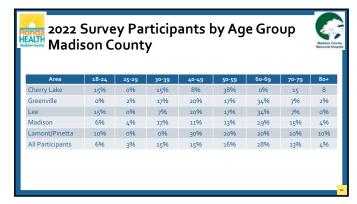
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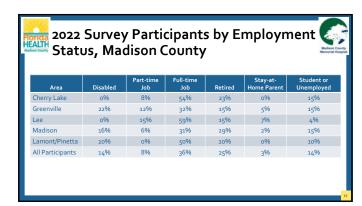


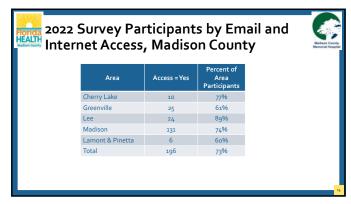
	Survey Par thnicity, N			Race
	American Indian	Black	Multiracial	White
Cherry Lake - 13	0%	31%	8%	53%
Greenville-41	0%	80%	0%	12%
Lee – 27	0%	26%	0%	67%
Madison - 178	3%	79%	2%	10%
Pinetta & Lamont - 10	0%	70%	0%	30%
	Hispanic			
Cherry Lake	8%			
Greenville	7%			
Lee	7%			
Madison	5%			
Pinetta & Lamont	0%			



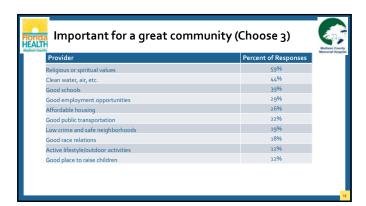


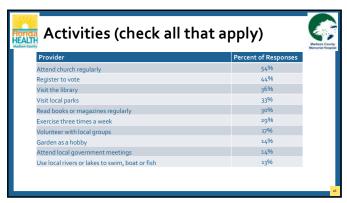
ivida	ison Co	Officy				Mamor
Area	Less Than High School	Some High School	Graduated Or GED	Some College/AA	Bachelor's Degree	Master's Degree/Highe
Cherry Lake	0%	0%	46%	38%	8%	8%
Greenville	12%	10%	46%	22%	7%	2%
Lee	0	11%	37%	22%	22%	7%
Madison	9%	9%	41%	20%	13%	8%
Lamont/Pinetta	0%	0%	20%	50%	10%	20%
All Participants	8%	9%	41%	23%	13%	7%



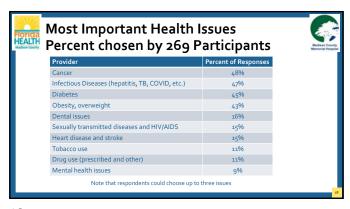


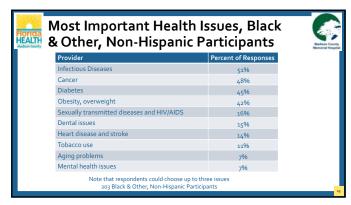


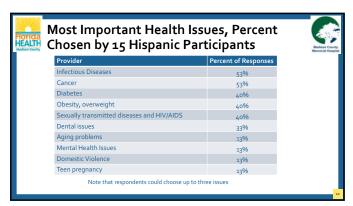


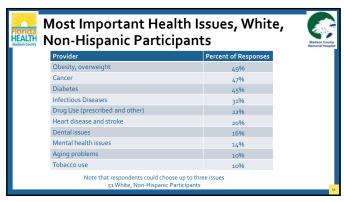


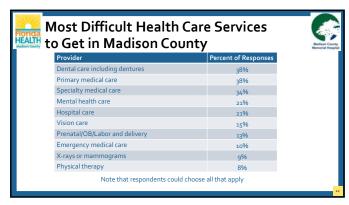


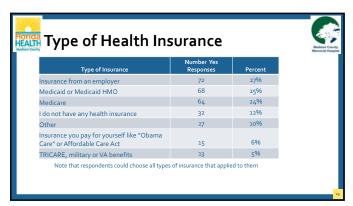


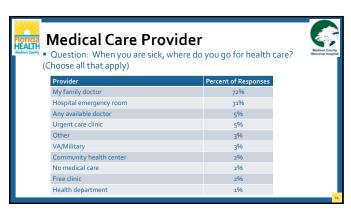


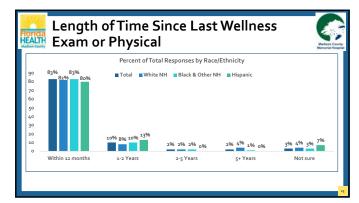




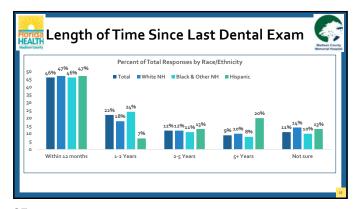


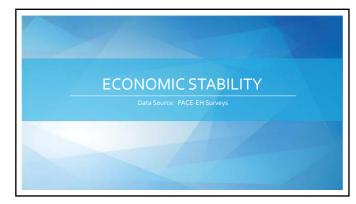


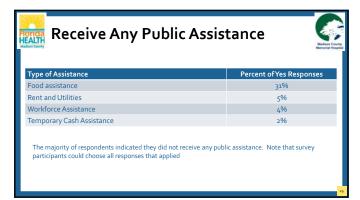


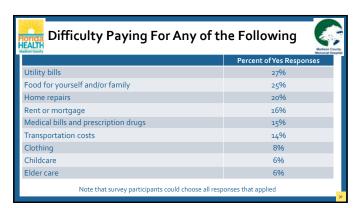


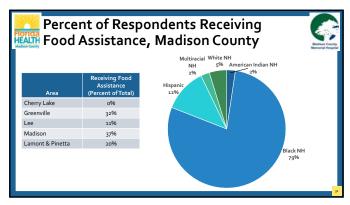
Type of Insurance	Number Yes Responses	Percent
ack of transportation	24	9%
ould not get an appointment soon enough	23	9%
rovider did not take my insurance	21	8%
lo insurance	21	8%
ould not afford care	20	7%
ould not get an evening or weekend ppointment	11	4%
Provider was not taking new patients	6	2%
anguage barriers/could not communicate	3	1%
ad medical care within 12 months	170	63%

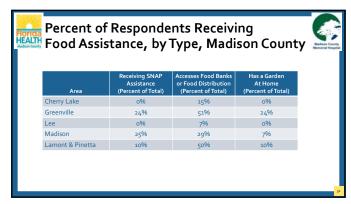


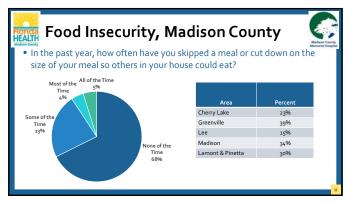




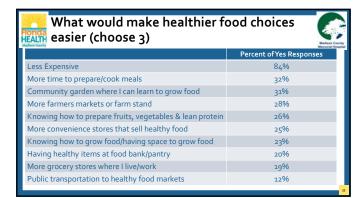


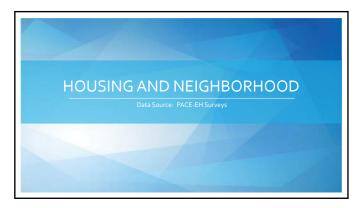


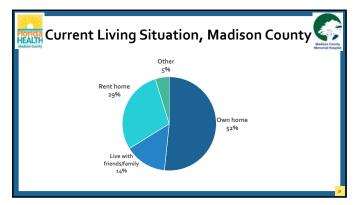








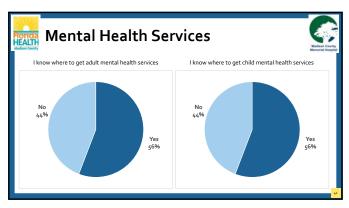


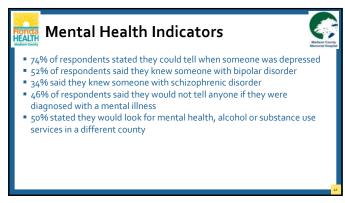


ırea	Own Home	Live with friends/family	Rent Home	Other
Cherry Lake - 13	62%	15%	15%	8%
Greenville - 41	51%	15%	22%	12%
Lee - 27	59%	15%	26%	0%
Madison - 178	49%	13%	34%	3%
Lamont & Pinetta - 10	60%	20%	10%	10%









		Slight, less		Moderate,	Severe,
ndicator	Not at all	than a day or two	Mild, several days	the days	nearly every day
ittle interest or pleasure in doing:	66%	12%	10%	9%	3%
Feeling down, depressed or nopeless?	72%	11%	8%	6%	3%
Feeling more irritated, grouchy or angry than usual?	71%	13%	9%	4%	3%
Sleeping less than usual, but still have a lot of energy?	65%	13%	12%	7%	3%
Starting lots more projects than usual or doing more risky things than	78%	12%	6%	3%	1%
Feeling nervous, anxious, frightened, worried or on edge?	74%	11%	5%	6%	4%

Mental hea	lth ass	essmei	nt (Pas	t 2 wee	eks)
Indicator	Not at all	Slight, less than a day or two	Mild, several days	Moderate, more than ½ the days	Severe, nearly every day
Feeling panic or being frightened?	81%	10%	4%	3%	2%
Avoiding situations that make you anxious?	66%	16%	4%	7%	7%
Unexplained aches and pains in your head, back, joints, abdomen or legs?	60%	17%	9%	9%	6%
Feeling that your illnesses are not being taken seriously enough?	79%	8%	6%	4%	4%
Thoughts of actually hurting yourself?	91%	2%	3%	2%	1%
Hearing things other people can't hear, such as voices even when no one was around?	91%	3%	2%	3%	1%

Indicator	Not at all	Slight, less than a day or	Mild, several days	Moderate, more than ½ the days	Severe, nearly every day
Feeling that someone could hear your thoughts, or that you could hear what another person was thinking?	89%	3%	3%	4%	1%
Problems with sleep that affected your sleep quality over all?	72%	12%	6%	7%	3%
Unpleasant thoughts, urges or images that repeatedly enter your mind?	87%	6%	3%	3%	1%
Feeling driven to perform certain behaviors or mental acts over and over again?	91%	4%	3%	2%	1%
Feeling detached or distant from yourself, your body, your physical surroundings or your memories?	86%	7%	4%	2%	1%

Mental health assessment					
ndicator	Not at all	Slight, less than a day or two	Mild, several days	Moderate, more than ½ the days	Severe, nearly every day
Not knowing who you really are or what you want out of life?	87%	4%	3%	3%	3%
Not feeling close to other people or enjoying your relationships with hem?	82%	9%	3%	3%	3%
Orinking at least 4 drinks of any kind of alcohol in a single day?	88%	5%	3%	2%	2%
Jsing any tobacco products?	82%	6%	2%	4%	6%
Using any recreational drugs or prescription medicine that you do not have a prescription for?	93%	5%	1%	1%	1%





2022 Community Health Needs Assessment Summit December 16, 2022



Break Out Session Questions

Purpose:

To develop Madison County's Community Health Needs Assessment that will be used by agencies to plan priorities for the next three to five years.

Which area(s) under this priority area do you feel are the most important?
 What do you think success would look like in five years?
 What are the barriers to achieving the success you have identified?
 What agencies and programs in Madison County are involved with this issue?
 Is there any additional information that would be useful in identifying the main issue or in measuring success?
 What are our next steps to address this issue?
 What Social Determinants of Health have an impact on this area?



2022 Community Health Needs Assessment Summit December 16, 2022



Voting Ballot

Purpose:

To develop Madison County's Community Health Needs Assessment that will be used by agencies to plan priorities for the next three to five years.

Please choose your top 3 priority areas that you would like to work on over the next 5 years.	ears.
Reportable Infectious Diseases (Please specify which disease or diseases you want to fo	ocus on
Chronic Disease (Please specify which disease or diseases you want to focus on)	
Maternal & Child Health (Please specify a specific area)	
Injury & Violence (Please specify a specific area)	
Social & Behavioral Health (Please specify a specific area)	



2022 Community Health Needs Assessment Summit December 16, 2022 10:00 a.m. to 3:00 p.m.



Evaluation

Purpose:

To develop Madison County's Community Health Needs Assessment that will be used by agencies to plan priorities for the next three to five years.

My opinions we	ere valued during this	meeting.	
Strongly Disag	•	Agree	Strongly Agree
[]	[]	[]	[]
There was enou	ugh time for me to pro	ovide input du	ring the meeting.
Strongly Disag	ree Disagree	Agree	Strongly Agree
[]	[]	[]	[]
The topics disc community.	cussed during the mee	eting met the r	needs of my
Strongly Disag	gree Disagree []	Agree []	Strongly Agree []
	good understanding of the contract on health outcomes		rminants of Health
Strongly Disag	gree Disagree	Agree	Strongly Agree
[]	[]	[]	[]
	you to participate in o lan committee meetin		/ Health
Not Likely	Somewhat Likely	Likely	Very likely
[]	[]		[]
Please list addit today and/or tra		community tha	at were not discussed
If you would like	e us to follow up with	you, please pr	ovide the following
Name/Email:			
Phone Numb	er:		

We are grateful for your attendance and your unwavering commitment to improving the health of Madison County.

THANK YOU FOR JOINING US!



Appendix 5 CHIP Distribution List

<u>Name</u>	<u>Organization</u>	<u>Email</u>
Alfred Martin	District 4 County Commissioner	<u>District4@madisoncountyfl.com</u>
Allison Wiman	Big Bend AHEC	awiman@bigbendahec.org
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