

Norfolk Community Health Improvement Plan: Action Plans for 2017-2022



Priority Area 1.
Create Safe
Communities Free of
Community Violence

Priority Area 2.
Prevent Chronic
Diseases

Priority Area 3.
Prevent Sexually
Transmitted Infections
and Teen Pregnancy

Norfolk Health District
VDH VIRGINIA
DEPARTMENT
OF HEALTH



Revised January 2019

Submitted by:

Toxcel

Priority Area 1. Create Safe Communities Free of Community Violence

*Indicates more information about the policy, initiative or program can be found in the Glossary for the Norfolk CHIP at end of document.

Goal 1: Reduce concentrated poverty and neighborhood isolation.		
Objective 1: By 2022, reduce Norfolk’s rate (per 100,000) of violent crime from 584 to 526.		
Strategy	Action Steps	Key Partners
<p>1.1.1. Strengthen neighbor and community connections by developing opportunities for working together to improve the community.</p>	<ul style="list-style-type: none"> • Expand NRHA’s Safe Spaces* program and other programs for youth, particularly within neighborhoods that experience high levels of violence and high levels of child abuse. • Expand and strengthen NRHA programs to build support and community relationships with residents (including St. Paul corridor) • Meet with community and civic leaders to discuss ways to increase perception of safety in these spaces (e.g., increased street lighting, greening vacant lots, replacing broken windows, installing community garden in park) • Include an outreach component to all initiatives that focuses on elderly and homebound residents to improve their perceptions of safety • Launch initiative to “renew” a community playground 	<p>Civic Leagues, other neighborhood/ resident groups, churches, businesses, Recreation Centers, Nighthawks Program, Norfolk Police Department, ODU, NSU, TCC, Norfolk Commonwealth Attorney’s Office Community Collaboration Center</p>
<p>1.1.2. Build interpersonal relationships between colleges and universities and surrounding neighborhoods through activities and events that purposefully include neighborhood residents.</p>	<ul style="list-style-type: none"> • Build on the success of the NRHA/NSU mural project. NSU will paint murals at NRHA sites in collaboration with NRHA residents to provide service learning experience for NSU students and community engagement opportunities for NRHA residents (in particular, youth). • Incorporate activities that better merge NSU, EVMS, ODU, and TCC with their surrounding neighborhoods (site visits, onsite programs, etc.) 	<p>Virginia Wesleyan College, Old Dominion University (ODU), and Tidewater Community College (TCC), Norfolk State University (NSU), Norfolk Redevelopment Housing Authority (NRHA), Eastern Virginia Medical School (EVMS), City of Norfolk, Civic Leagues, Sentara College of Health Services</p>

Goal 2: Every child feels nurtured, cared for and safe in their homes and neighborhoods.

Objective 2: By 2022, reduce Norfolk’s rate (per 1,000 children) of child abuse and neglect from 4.9 to 4.4.

Strategy	Action Steps	Key Partners
<p>1.2.1. Expand capacity of Norfolk schools and community partners to support mental wellness among school-aged children</p>	<ul style="list-style-type: none"> • Identify universal early behavioral health screening policy and practices in schools and other health providers and/or explore if behavioral health questions can be incorporated into existing health screenings • Research and clarify best practices and processes in schools and with providers for early screening and evaluation of behavioral health needs of young children • Share feedback with United Way working group regarding early screening and identification of behavioral health needs of children and explore possibility of collaborating. • Prioritize mental health support services for children in low SES areas 	<p>Norfolk Public Schools, United Way, CSB, NRHA, youth-serving groups and organizations, churches, anti-bullying programs, HRCHC, Norfolk Prevention Coalition, Virginia Modeling Analysis and Simulation Center (VMASC – ODU)</p>
<p>1.2.2. Advocate for programs and interventions to address the adverse impact of accumulated trauma on children</p>	<ul style="list-style-type: none"> • Research evidence-based practices on trauma-informed training for staff, parents, and children • Provide training for staff, parents, and children • Explore existing youth development programs and potential to expand on current successes • Educate community and teachers on effects of trauma on children • Establish “No Hit Zones” in hospitals, public buildings and other community spaces 	<p>Norfolk Public Schools, Norfolk Police Department, NDSS, private providers, churches, Hampton Roads Trauma Informed Care, HRCHC</p>

Priority Area 2. Chronic Disease Prevention

Goal 1: Integrate health into all city and school policies in order to ensure health opportunities for all that address the root causes impacting their health and quality of life.		
<p>Objective 1: By 2022, the City of Norfolk and Norfolk Public Schools will have established a formal system to intentionally incorporate health considerations into all city and school plans and policy processes.</p> <p>Objective 2: By 2022, increase the percent of adults >=18 years who report that their physical health is good or very good by 5% across <i>all census tracts</i>.</p> <p>Objective 3: By 2022, increase the percent of adults >=18 years who report that their mental health is good or very good by 5% across <i>all census tracts</i>.</p> <p>Objective 4: By 2025, increase life expectancy estimates by 2 years in 25% of the census tracts with the lowest life expectancy averages in Norfolk.</p>		
Strategy	Action Steps	Key Partners
<p>2.1.1. Advance a “Health in All Policy”* agenda to begin integrating health into Norfolk’s planning and decision-making processes</p>	<ul style="list-style-type: none"> • Work to build buy-in and support of HiAP from key leadership and decision makers within the City of Norfolk and Norfolk Public Schools through meetings and presentations • Cultivate a partnership with the Norfolk Department of City Planning to integrate health into its new Master Plan • NDPH will participate in City’s housing committee to support St. Paul corridor transition for residents • Develop partnerships with other city departments interested in supporting HiAP • Research funding opportunities for implementation 	<p>NDPH, NPS School Board, School Superintendent, City Manager and Deputies, Executive Directors of NPS, City Council, City Legislative Liaison, Leadership team and staff from Norfolk City Departments</p>
<p>2.1.2. Align Norfolk Public Schools policies and practices with good health, including policies on wellness, recess, and suicide prevention as well as support of staff wellness</p>	<ul style="list-style-type: none"> • Review and develop an inventory list of policies to be developed/updated with target timelines, including Employee Wellness Policies • Identify a School Wellness Champion to meet with City to plan integration of NPS into City Wellness Program • Expand Mental Health First Aid and ASIST Trainings across Norfolk schools 	<p>School Health Advisory Board, NDPH, Parent Liaison, Superintendent of Schools, NPS School Board, School Wellness Champion, Community Services Board</p>

Strategy	Action Steps	Key Partners
2.1.3. Design and implement a system to evaluate health impacts of Norfolk planning and policy proposals (e.g., health impacts of affordable housing policy, community design)	<ul style="list-style-type: none"> • Build NDPH team and their partners' skills in evaluating health impacts of planning and policy processes • Research modelling processes, existing tools and best practices (e.g., health impact assessments) • Research studies in progress and related funding sources • Develop a set of standards for evaluating proposed planning and policy changes to ensure changes have a healthier impact 	ODU Modeling Simulation Center, NDPH, The Brock Institute at EVMS, Sentara's Chronic Disease Work Group, Department of City Planning, Department of Transportation, NRHA, RPO, Hampton Roads Community Health Center
2.1.4. Adopt a resolution to increase Norfolk's tobacco tax and allocate some of the additional revenue towards smoking cessation	<ul style="list-style-type: none"> • Develop a white paper to inform City Leadership on tobacco products and issues, including their connections with youth health and other health effects • Incorporate VA sales data from State Taskforce and experiences from other jurisdictions that have raised tobacco tax (e.g., Alexandria) • Coordinate with Norfolk Healthcare Collaborative and City Manager's office to garner support for tobacco tax • Explore options to advocate state to tax electronic cigarettes 	Department of Behavioral Health and Developmental Services, NPS, NDPH, City Manager or Deputy, Legislative Liaison, Youth Group or representative, Norfolk State Tidewater Community College, Rotary, Downtown Business Association, City Economic Development, CINCH, Norfolk Healthcare Collaborative
Goal 2: Prevent and manage chronic disease by increasing patients access and utilization of primary and preventive care		
Objective 1: By 2022, increase by 10% across <i>all</i> census tracts, the adults aged >18 years who report visiting the doctor for routine checkup within the past year		
2.2.1. Increase patients knowledge of what they're entitled to/eligible for, services that are available (e.g., Medicaid eligibility), and their rights (e.g., immigrant rights/fears at ER)	<ul style="list-style-type: none"> • Work with insurance providers to develop a multimedia public service announcement highlighting key plan features • Utilize Community Lay Workers to share information with community • Partner with schools to share handouts at PTA meetings and Fall Semester Orientation 	Insurance providers, Norfolk Public Schools, hospitals, Hampton Roads Community Health Center - OUTREACH

Priority Area 3. Prevent Sexually Transmitted Infections & Teen Pregnancy

Goal 1: Increase education and awareness about prevalence and prevention of STI/Teen Pregnancy		
<p>Objective 1: By 2022, reduce the number of newly diagnoses cases of HIV in Norfolk from 72 to 54.</p> <p>Objective 2: By 2022, reduce the rate of chlamydia diagnoses in Norfolk from 323 new cases per 100,000 population to 290.7 new cases per 100,000 population.</p> <p>Objective 3: By 2022, reduce Norfolk’s teen pregnancy rate from 27.9 to 25.1 pregnancies per 1,000 females ages 15-19.</p> <p>Objective 4: By 2022, reduce Norfolk’s Black teen pregnancy rate (32.1 per 1,000 females ages 15-19).</p>		
Strategy	Action Steps	Key Partners
<p>3.1.1. Improve and increase health communication related to sexual health (including STIs and teen pregnancy), access to community resources and services available</p>	<ul style="list-style-type: none"> • Map STI incidence by neighborhood • Launch a collaboration between public and private providers to develop outreach and communication strategies and messages that target the needs of special populations (e.g., parents and teens, victims of human trafficking, inmates, etc.) • Utilize zip code statistics to target messages to certain neighborhoods and groups • Partner with relevant social networks to target key audiences • Partner with NDSS and NDPH WIC* to incorporate STI information into their classes. • Target parents at NDSS and NRHA appointments by conducting classes during recertification and eligibility process • Meet with churches to develop ways to effectively provide information to their congregation 	<p>Norfolk State University (NSU), Norfolk Department of Social Services (NDSS), Norfolk Department of Public Health (NDPH), Norfolk Redevelopment Housing Authority (NRHA), Communicare, Community Health Center (HRCHC), Norfolk Public Schools, home visiting programs</p>
<p>3.1.2. Increase acceptability and availability of preventive measures (e.g. condoms, LARCs*)</p>	<ul style="list-style-type: none"> • Conduct scan of locations, types of condoms offered and opportunities for youth to access contraception • Develop plan to increase accessibility and utilization of preventive measures • Build off expertise of LGBT LIFE CENTER/LGBTQ Center on Sexual Health 	<p>HRCHC, EOV, Park Place, Communicare, LGBT Life Center, Hampton Roads Pride, High School/College Graduate Student Associations, minority sorority and fraternity groups to assist with community ventures and community service events, TCC Norfolk</p>

Goal 2: Increase access to and utilization of sexual health services

Objective 1: By 2022, reduce the number of newly diagnoses cases of HIV in Norfolk from 72 to 54.

Objective 2: By 2022, reduce the rate of chlamydia diagnoses in Norfolk from 323 new cases per 100,000 population to 290.7 new cases per 100,000 population.

Objective 3: By 2022, reduce Norfolk’s teen pregnancy rate from 27.9 to 25.1 pregnancies per 1,000 females ages 15-19.

Objective 4: By 2022, reduce Norfolk’s Black teen pregnancy rate (32.1 per 1,000 females ages 15-19).

Strategy	Action Steps	Key Partners
<p>3.2.1. Increase facilities and services in areas with no health facilities or sexual health services</p>	<ul style="list-style-type: none"> • Map locations of health services in Norfolk to identify underserved neighborhoods and communities • Launch mobile health bus to provide health services in areas without access • Expand hours of clinics in underserved areas or high priority areas by offering services on Saturday or after work • Engage key partners (e.g., Housing authority,) to host preventive clinics in high-need communities • Provide hotline or Livechat for 24/7 access to resources 	<p>Hampton Roads Community Health Center (HRCHC), EVMS Medical Students, LGBT Life Center</p>
<p>3.2.2. Expand knowledge of services available</p>	<ul style="list-style-type: none"> • Develop tip sheet for school nurses, counselors, libraries, MAPP* partners • Develop and launch PSAs for social media • Set-up website that highlights local services available 	<p>HRCHC, student leaders at all levels in middle/high schools and colleges</p>
<p>3.2.3. Reduce the stigma of accessing STD/HIV Services at the Norfolk Department of Public Health</p>	<ul style="list-style-type: none"> • Conduct and assessment of people’s perception of utilizing the health department STD clinic as it relates to stigma of STIs and seeking services (e.g., optical impression when entering NDPH STD clinic, personal perceptions of public care in the STD clinic, health insurance, clinical environment) • Utilize data to structure messages to reduce stigma of access to STD clinic 	<p>NDPH</p>

Goal 3: Increase advocate for school, local and state policies that improve sexual health

Objective 5: By 2022, reduce the percent of young people who believe it is important not to be sexually active by 5%. [Baseline to be established by Developmental Assets or YRBSS]

Strategy	Action Steps	Key Partners
<p>3.3.1. Expand school curriculum to include self-esteem, good decision making, healthy sexual relationships and life skills education</p>	<ul style="list-style-type: none"> • Collaborate with School Health Advisory Committee to develop plans for changes to sexual education • Define healthy relationships, sexual consent and dating violence (Refer to Biden Foundation) • Examine family life education data related to content, participation and effectiveness at the local and state level • Collect data using the development asset profile alternating with the YRBSS to assess and track student support and needs • Identify evidence-based curriculum and opportunities for integrating life skills education into school curriculum • Train teachers in evidence-based curriculum • Track implementation 	<p>Norfolk Public Schools, NCWAO Community Collaboration Center, Hampton Roads Community Health Center, clergy, recreation centers, YMCA</p>
<p>3.3.2. Increase advocacy with local leaders to provide effective sexual education in middle and high schools</p>	<ul style="list-style-type: none"> • Work with teen groups, including minority and LGBTQ, as advocates for change to curriculum • Advocate at the state level to take action on Abstinence only interpretation and legislation 	<p>Norfolk Public Schools, NDPH/VDH, State legislators, Church youth groups, LGBTQ Center, Gay Straight Alliance (GSA), PFLAG</p>
<p>3.3.3. Develop school-wide policies on sexual health</p>	<ul style="list-style-type: none"> • Establish a Safe Zone for LGBTQ in secondary and higher education institutions including trade schools • Collect data using the development asset profile alternating with the YRBSS to assess and track student support, strength and needs • Partner with local colleges (ODU, NSU) who have created similar initiatives 	<p>Norfolk Public Schools, ODU, NSU</p>