

A photograph of a community health transformation event. In the foreground, a woman with brown hair and sunglasses on her head, wearing a blue polo shirt with a name tag that reads "Mary Ellen" and a Clinton Foundation logo, is focused on filling a large wicker basket with green leafy vegetables. She is wearing a black wristband and a beaded bracelet. In the background, several other people are visible under a white tent. A woman with blonde hair is seen from the back, wearing a red and orange patterned shirt. To her right, an older woman with white hair and sunglasses is wearing a blue and white striped shirt. Further back, a woman in a green shirt is also visible. The scene is outdoors with trees in the background.

Northeast Florida

Five years of Community Health Transformation

The Clinton Foundation would like to
recognize the PGA TOUR and
THE PLAYERS Championship for their
support and dedication in working
to improve the health outcomes for
Northeast Florida residents.

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INTRODUCTION

In communities across the country, the Clinton Health Matters Initiative (CHMI) sees a wide range of organizations and actors who are all making a concerted effort to improve health and wellness in their community. These include local governments; hospitals, doctors, and others in the provider community; local nonprofits and support groups; and members of the local business community, among many others. However, many of these efforts are siloed and lack broad communication and collaboration across sectors that could improve impact. CHMI's collective action approach provides a neutral, collaborative, and effective framework to improve the health of the region.

This is the specific role that CHMI fills – working in communities across the United States, helping unite regional stakeholders around a common strategic plan to improve the health and wellness of their residents, and helping implement that plan. CHMI brings together a wide range of interested organizations, groups and individuals in the community, charts common goals and objectives for improving health, ensures coordination and brokers resources to support programs that achieve these goals. This coalition building and coordination translates to more effective community action, and more impactful progress in improving the health of the community.

CHMI works with regions disproportionately impacted by chronic disease to improve health outcomes and close gaps in health disparities. Northeast Florida is the third community where CHMI embarked upon this work – the other focus communities for CHMI's model include Adams County, Mississippi; Central Arkansas (Little Rock); Coachella Valley, California; Greater Houston, Texas; Knox County, Illinois; and San Diego, California.

CHMI takes a careful and deliberate approach to building out the strategic plan and identifying ways to improve health outcomes. In each community, they:

1. **EVALUATE THE COMMUNITY:** CHMI takes an intensive look at the community's overall health and wellness, including an examination of community and population health indicators to determine areas of greatest asset and need.
2. **BRING THE COMMUNITY TOGETHER:** CHMI convenes key stakeholders from across sectors to hear more about what organizations and leaders have been doing and what their priorities are.
3. **MAP OUT A BLUEPRINT FOR ACTION:** CHMI works collaboratively with these stakeholders to chart a local Blueprint for Action, which includes key priority areas and specific recommendations.
4. **HELP IMPLEMENT SOLUTIONS:** For the actions that CHMI has identified in the Blueprint for Action, they work across sectors to help implement these solutions.
5. **BRING MORE RESOURCES TO BEAR:** CHMI works with national, regional, and local experts and programs to leverage additional resources that will help advance priority actions in the local Blueprint for Action.

CHMI has a proven record of success in communities across the United States. CHMI's unique Community Health Model improves health infrastructure, policies, and outcomes by leveraging the capacity of partner agencies, aligning regional resources, and instilling a cross-sector collaborative model. CHMI's model leverages the knowledge base and community connections of a regional director, who is hired from within the community to lead the development and execution of a regional Blueprint for Action.

CHMI & NORTHEAST FLORIDA

The Northeast Florida region includes the five counties that make up the Jacksonville Metropolitan Area: Baker, Clay, Duval, Nassau, and St. Johns counties. The region is more than 3,000 square miles in size and is home to nearly 1.4 million people, the majority of whom live in Jacksonville, the most populous city in the state.

The region is diverse in its geography, demography, and infrastructure. It is a hub for bio-science research including robust research in genetic medicine at the Mayo Clinic and revolutionary proton beam cancer treatment at University of Florida Health. Northeast Florida also has natural assets to leverage. Jacksonville boasts more green space than any other city in the United States, with an urban park system that measures more than 80,000 acres. The moderate climate and proximity to the water make Jacksonville a popular location for water sports and golf, with the PGA TOUR headquarters located in nearby Ponte Vedra Beach.

Northeast Florida is also home to extreme wealth disparities, which impact employment, educational attainment, access to healthy foods, and other important assets for community health. According to the 2010 census, Northeast Florida was home to one census tract with an average household income of \$200,001, while several other census tracts had averages under \$15,000 per household.¹ When CHMI's work began in 2013 there were also significant gaps in educational attainment across the five counties, with Duval County Public School's graduation rate at 63 percent and St. Johns County at 87 percent; that gap has narrowed significantly with Duval increasing its rate to 81 percent and St. Johns increasing to 91 percent in 2017.² Furthermore, coming demographic shifts present Northeast Florida with a number of challenges. Most notably, the senior population is projected to double by 2020, creating a greater need for health care services for those seniors and often poorer health outcomes for their caregivers who neglect their own health to care for their loved one.

Due in large part to these vast disparities, the region was in a prime position to begin the community health transformation work with CHMI, and in 2013, the Clinton Foundation announced a partnership with the PGA TOUR and THE PLAYERS Championship to launch CHMI's Community Health Transformation model in Northeast Florida.

After an extensive listening tour including meetings with hospitals and care providers, community nonprofits, business leaders, public officials, school districts and institutions of higher learning, public health departments and others, in December of 2013, CHMI facilitated a planning session among leaders from the public, private, and social sectors to create a regional Blueprint for Action - a strategic plan outlining 45 Bold Action Steps to improve local health and wellness. The Bold Action Steps addressed the entirety of the social determinants of health, including health behaviors, clinical care, social and economic factors, and the built environment. Following the identification of these priorities, CHMI has acted as a neutral convener for partnerships of purpose to address the Bold Action Steps. Community stakeholders have worked together to implement collaborative projects to make positive health outcomes more attainable for all residents. Representative projects include: expanding fresh food access in food deserts, strengthening pedestrian safety and physical activity by improving data used to inform infrastructure changes and expanding bikeways and trails, and networking across health care, law enforcement, business and social sectors to prevent and treat substance use disorder. While health challenges continue, the willingness of many and varied stakeholders to direct resources toward these collaborations and others aligned with the Blueprint has had a positive impact for Northeast Florida residents.

EVALUATING THE COMMUNITY'S NEEDS AND ASSETS

At the onset of CHMI's five-year engagement in each community, it conducts a landscape assessment to understand baseline health conditions and provide valuable data that identifies the current opportunities and threats within the community. Through data collection and analysis, stakeholder interviews and the review of existing plans, CHMI builds a tailored strategy, approach and engagement model designed to improve the

¹ United States Census Bureau

² Florida Department of Education, 2017



health of a community. The first phase of this process in Northeast Florida began in August of 2013, relying on key community leaders and stakeholders to provide local context to supplement national or higher order data related to health outcomes. Recognizing that the County Health Rankings pointed to disparate health outcomes at the county level, but not necessarily by neighborhood, CHMI made an effort to understand where disproportionate health outcomes occurred. Local information was obtained through the county health department offices, the Northeast Florida Regional Planning Council, the Northeast Florida Health Planning Council, the former Jacksonville Metropolitan Community Benefit Partnership, Jacksonville Community Council, Inc. and other local organizations.

In parallel with CHMI's data collection efforts, the regional director conducted a listening tour and met with more than 300 individuals and organizations. This is the first opportunity CHMI had to introduce the Community Health Transformation model to Northeast Florida and explain the process and purpose of the program. These interviews were vital to building relationships with key decision makers to engage them in the initiative. They were also vital to learning what work existed, what successes the region already had achieved, what needs persisted, and what capacity was lacking. The interviews were conducted at the start of the CHMI's engagement with the region, after which there was continued dialogue leading up to (and continuing long after) the Blueprint workshop in December of 2013.

Community leaders were generous with their time, information – and honesty. Through one-on-one, in-person interviews, CHMI learned what each believed were the key health priorities to be addressed, where they saw themselves and their agencies contributing to improving health outcomes, and what challenges existed in bringing people together across sectors to address a common goal.

BRINGING TOGETHER STAKEHOLDERS IN NORTHEAST FLORIDA

In the second phase of the Community Health Transformation process, the regional director brings together community decision makers and content area experts for workshops where they identify, discuss, and ultimately prioritize key goals (Bold Action Steps) that they believe could lead to improved health outcomes. The Bold Action Steps are purposefully designed to be audacious and ambitious – CHMI wants every community to strive to achieve greater than expected health outcomes.

On December 18, 2013, a one-day workshop was facilitated by CHMI staff with participation by 150 community decision makers, stakeholders, and content area experts. The day began with an overview of health in the region, provided by Dr. John Armstrong, then Florida Surgeon General. Attendees were assigned to one of nine working groups and spent the remainder of the day participating in a series of facilitated conversations designed to identify five audacious, ambitious Bold Action Steps per group. The nine working groups were based upon the health factors that contribute to individuals' health and longevity as defined by the County Health Rankings model, including:

- Education, Employment and Income
- Family and Social Supports
- Community Safety
- Substance Abuse, Tobacco and Alcohol Use
- Healthy Eating and Food Quality
- Physical Activity
- Sexual Activity
- Clinical Care: Access to Care and Quality of Care
- Environmental Quality and Built Environment

By using the County Health Rankings model, a baseline data frame was created to improve indicators in the areas of health behaviors, clinical care issues, social and economic factors, and the physical environment – all of which contribute to health outcomes. To inform decision making, CHMI provided each group with a one-page overview of local health indicators that pertained to their topic and invited a local content expert to assist with an overview of that particular area and answer questions as they arose. (For a list of content experts, see Appendix 1.) At the end of the workshop, each group reported out to the larger audience their vision and Bold Action Steps.

Following the workshop, these 45 Bold Action Steps were combined with the background data and analysis to create a community consensus document intended to guide CHMI's implementation work in the region over the next five years. On July 10, 2014, the resulting Northeast Florida Blueprint for Action was released to the community. The Blueprint incorporated key recommendations, Bold Action Steps, made during the December workshop by a diverse array of individuals, who included local health and education practitioners, policymakers, hospital and clinic administrators, public health workers, philanthropists, nonprofit organizations, and local community leaders, among others.

HELPING IMPLEMENT SOLUTIONS IN NORTHEAST FLORIDA

CHMI's Blueprints for Action are defined by a series of action steps that have been identified and developed by and with the community. Execution of these action steps is facilitated by one full-time regional director and implemented by members of the community working individually and collectively to accomplish the Bold Action Steps in alignment with one another. CHMI manages the work in each region through specific action including:

- Convening across sectors
- Network and relationship building
- Managing steering committee and working groups
- Managing communication between stakeholders
- Recommending best practices from local and national examples
- Addressing barriers to success
- Identifying funding opportunities

- Connecting to Clinton Foundation national partners
- Leveraging Clinton Foundation communications and marketing platforms to elevate work
- Representing the community to the Clinton Foundation
- Representing the Clinton Foundation in the community

The 45 Bold Action steps contained in the Northeast Florida Blueprint for Action were designed to address the social determinants of health, including health behaviors, clinical care, social and economic factors and the built environment. CHMI asked, specifically, for these goals to not only be ambitious but to be inclusive of known and emerging community initiatives to uplift ongoing efforts and support promising practices. The Bold Action Steps also addressed a broad array of community needs, some of which the community had indicated that they had wanted to solve for many years and others which were ideas new to the region or its stakeholders. Some Bold Actions were articulated with knowledge that the necessary changes were unlikely to happen but important to stakeholders to include. Others were adopted with the knowledge that they could be achieved with the right attention and resources.

The size and scope of the Northeast Florida region, along with the ambitious Bold Action Steps, called for an advisory group of leaders who could assist the regional director in prioritizing work and gaining valuable awareness about aligned efforts in the region. In partnership with the PGA TOUR and PLAYERS Championship, the Northeast Florida region established a Steering Committee that helped to shape the early work, provided guidance on past and present efforts, and lent support to gaining traction for new collaboration. The Steering Committee was made up of CEOs and executives from hospitals, corporations, nonprofit institutions, and the public sector.

The following sections highlight the key successes and accomplishments over the course of the last five years of CHMI's work, in collaboration with community stakeholders, to facilitate the implementation of the region's Blueprint for Action.



BLUEPRINT SOLUTIONS: FOOD AND NUTRITION

A basic element for good health is access to healthy food and agriculture is the second largest industry in the state of Florida. Northeast Florida farms supply fresh fruits and vegetables locally, nationally and across the globe, yet many Northeast Florida residents are food insecure, meaning they do not know when they will have their next meal or how it will be provided. In the Blueprint, stakeholders established the overall goal that, "Northeast Florida makes the healthy choice the easy choice." A diverse group of stakeholders came forward to assist in advancing this goal.

ABC Market: In 2015, stakeholders approached CHMI with the need for increased access to fresh foods in the beach communities of Jacksonville. The Mayport area of Atlantic Beach is a USDA defined food desert where people live more than a mile from a grocery store. To increase sustainable access to fresh foods, CHMI brought together Dig Local Network, Atlantic Beach Urban Farms, Beaches Area Assistance Ministries

(BEAM), Jacksonville University, and the City of Atlantic Beach to launch the Atlantic Beach City Market or the ABC Market, a weekly pop-up farmers' market where local vendors sell fruits, vegetables, and prepared foods to neighborhood residents. Dig Local, the market organizer, offers a program to double SNAP benefits for recipients, so beneficiaries can buy up to \$40 dollars of produce for \$20 in benefits with each visit to the market.

Youth-Led Obesity Reduction: Obese children and teens are more likely to be obese as adults, and in the Northeast region of Florida, 80 percent of obese teenagers were found to be obese at age 25.³ Student leaders from the [I'M A STAR Foundation](#) quickly came forward to lead an effort to reduce childhood obesity. In 2014, in partnership with the Department of Health, the Alliance for a Healthier Generation, Florida Blue and CHMI, the youth led a summit to gather feedback and build a strategic plan to lower childhood obesity rates. Their identified strategies included creating healthier corner stores, annual Let's Move events and hosting the then-U.S. Surgeon General, Vivek Murthy, in Jacksonville to raise awareness about reducing obesity among Jacksonville's youth. All of these actions were conceived, designed and executed by the student leaders including attendance by over 7,000 Northeast Florida citizens at annual Let's Move events since 2012.

Aligning and Coordinating Efforts: Early on in the implementation phase, CHMI began convening stakeholders interested in food access and nutrition. With common cause and a commitment to working collectively, the group named themselves the Growing Health Alliance. After discussion and coordination of smaller projects the Alliance decided to host a Food Summit, inviting interested organizations from throughout the five-county region to set priorities toward the goal of making the healthy choice the easy choice for all Northeast Floridians. At the Summit, attendees decided to establish the Northeast Food Hunger and Nutrition Network, a single network that would align and coordinate efforts. The Network acts as a sustainable resource for data and research coordination, a neutral convener for solving complex barriers and a facilitator for collective solutions to inequities in hunger, fresh food access, and opportunities for optimum nutrition. One ongoing collaborative project is the Northeast Florida Hunger map, a four-phase, web-based, interactive map of food and nutrition needs and assets in Northeast Florida. The map will become more robust as data collection continues. See phase one of the map [here](#).



BLUEPRINT SOLUTIONS: MENTAL WELL-BEING

Mental well-being and health services appear in Bold Action Steps across social determinants including Education, Employment and Income, Access to Care, Substance Use and Community Safety. At the same time CHMI was listening and learning about the state of health in Northeast Florida, the Jacksonville Community Council, Inc. (JCCI) was conducting a deep inquiry regarding mental health. As a result of their findings and in alignment with the Blueprint for Action, CHMI organized a working group focused on the integration of mental and physical health. This working group was led by CHMI for two years before leadership was assumed by Lutheran Services Florida (LSF), the Mental Health Managing Entity for the region. LSF is now leading the Behavioral Health Consortium to align and integrate programs, initiatives and care.

Telehealth: With a shortage of mental health professionals, CHMI led several inquiry efforts into expanding telehealth. This is a priority identified in the Blueprint for Action, and has the potential to increase access

³ Jacksonville Community Council Incorporated, Inc. (2008) Infant Mortality. Jacksonville, FL

and adherence in behavioral health care. CHMI brought representatives from the Veterans Administration (VA) to present to the working group, explored the use of telehealth in school-based health centers and connected Northeast Florida stakeholders to stakeholders in Houston operating [ETHAN](#). Ultimately, the policy environment in Florida is not conducive for telehealth and stakeholders were not successful in advocating for policy change that would encourage expanded use.

Reducing Stigma: In 2017, the Jacksonville Nonprofit Hospital Partnership, a collaboration of the five largest nonprofit hospitals in the region, launched a three-year initiative to certify 10,000 Northeast Florida residents in Mental Health First Aid. By training 10,000 residents, the partnership intends to increase awareness, reduce stigma and promote informed referrals to mental health treatment. The effort is on track to meet its goal. CHMI assists with the promotion of this initiative by encouraging organizations to host trainings and residents to participate. To help residents better understand substance use and abuse and to reduce stigma surrounding substance use disorder, the drug free coalitions worked to integrate the Screening Brief Intervention and Referral to Treatment (SBIRT) tool in a variety of settings. Expanding substance use screening normalizes conversations regarding substance use disorder and allows individuals to have more comprehensive preventative treatment and earlier intervention. Overall, of the SBIRT clients who scored medium risk on the assessment and were provided the appropriate interventions, 85 percent had moved to low-risk substance use behavior within 90 days at rescreening. (WellScreen Evaluation/Report)

Aligning and Coordinating Efforts: The severity of the opioid epidemic in Northeast Florida called for a region-wide approach. The [Northeast Florida Opioid and Heroin Task Force](#) brings together the public, private and social sectors including law enforcement, health care providers, community-based organizations, employers and others to provide a coordinated effort to promote prevention, curb addiction and expand effective interventions. CHMI has provided valuable expertise such as the Harvard course, provided online, for physicians and lay people to learn more about substance use disorder prevention and intervention and promoted the work of the task force at their 2016 Annual Activation Summit with an announcement by President Clinton.

Mindfulness: Self-care is important to overall health, including mental well-being. Educators are often under extreme stress as teachers and public schools are asked to do more and more for students. CHMI brokered a partnership with Headspace, a mindfulness and meditation app, to distribute free year-long subscriptions for school-based staff to the school districts in Northeast Florida. Duval County is finalizing an MOU with Headspace and two additional districts are in talks for implementation. Duval County Public Schools expects to distribute subscriptions to educators in January of 2019.

BLUEPRINT SOLUTIONS: FAMILY AND SOCIAL SUPPORTS

Child Friendly Cities: Based on the agreements reached at the Convention on the Rights of the Child and the Child Friendly work supported internationally by UNICEF, Jacksonville is working to become the first [Child Friendly City](#) in the US by integrating and operationalizing a child friendly framework in major systems such as juvenile justice, public education, city services and child welfare. A Child Friendly City will ensure: No child is discriminated against; the best interests of children are considered in all decisions; optimal health and development; families are supported in their roles to ensure optimal outcomes for their children; children have a voice and are listened to; access to high quality education and health care services; and children are protected from exploitation in whatever form in private and public sector venues. With networking assistance from the CHMI regional director, stakeholders partnered with the school system in 2015 to launch a 10-school pilot for the Child Friendly Schools initiative.

Healthy Relationship Education: Florida statute requires all public school students be taught about dating violence and healthy relationships and stakeholders recognized the need for a study of relationship violence in Northeast Florida. CHMI identified the [One Love Foundation](#), a national organization that has an evidence-based program to educate young people to recognize and safely intervene in unhealthy relationships, and stakeholders agreed to support implementation of their program in Universities and high schools to deliver healthy relationship education.

BLUEPRINT SOLUTIONS: COMMUNICATIONS AND TECHNOLOGY

Stakeholders identified advancements in the technology and communications sectors as key areas of opportunity to drive systemic and behavioral changes and improve health outcomes. As mentioned above, efforts to deploy telehealth were not successful but other efforts to expand technology and leverage communications did result in beneficial outcomes for the region's residents.

Data-Driven Pedestrian Safety: Pedestrian safety is important to increasing mobility, physical activity, resident interaction and reducing motor vehicle traffic in communities. Jacksonville is consistently toward the top of the list in the Dangerous by Design study that tracks pedestrian injuries and fatalities. When Health 2.0 approached CHMI to participate in its [Building Healthy Communities](#) initiative, the regional director brought together a group of partners to design a proposal centered on improving pedestrian safety. Health 2.0 included the Jacksonville proposal in its initial round of award recipients and the partnership selected to work with Numina to track real-time data about pedestrian activity at 11 of the highest incident crossings in Jacksonville. Collecting data over time can inform infrastructure changes based on demonstrated bike and pedestrian habits. The City of Jacksonville continues to use manual counts and is continuing conversations with Numina regarding use of their technology.

Mission1Million: Maintaining a healthy weight contributes to positive health outcomes. The Duval County Medical Society led an effort to launch [Mission1Million](#), a behavior change campaign, to encourage Northeast Florida Residents to lose excess weight. CHMI assisted in program development and recruited organizations to adopt the campaign. The communications campaign launched in conjunction with a visit from the then-U.S. Surgeon General, Dr. Vivek Murthy. The campaign engages individuals through earned media and allows registrants to record their weight loss through self-reporting. Through September of 2018, nearly 4,000 participants had lost almost 80,000 pounds.

Skill Building for Counselors and Child Services: In 2016, through a partnership with the National Resource Center for Healthy Marriage and Strong Families initiated by CHMI, over 30 child services providers received training on engaging families and caregivers. The training kicked off with an all-day in-person meeting. Following the in-person meeting, participants were given electronic resources and offered technical assistance through webinars and other virtual connectivity. This virtual connectivity allows participants to continue to connect easily with a national resource.

BRINGING NATIONAL RESOURCES TO BEAR IN NORTHEAST FLORIDA

The Clinton Health Matters Annual Activation Summit was held in the Coachella Valley in partnership with the Humana Challenge in 2012-2015 and in partnership with the Career Builder Challenge in 2016. Each year, the Summit brought together over 400 thought leaders from across the nation to discuss the most current and emerging health issues and solutions. At the 2014, 2015 and 2016 Summits, invitations went to Northeast Florida stakeholders and a small number of individuals were able to attend. Through the Summits,

CHMI connected local thought leaders with nationally recognized experts from various disciplines impacting health and with counterparts from other CHMI regions to share best practices and lessons learned. In addition, at the 2016 Summit a video highlighting work in Northeast Florida premiered.

In addition to the Activation Summits, CHMI hosted a national event focused on childhood obesity in 2015. CHMI held the Closing the Gap Summit in partnership with the Robert Wood Johnson Foundation in Newark. Five Northeast Florida Stakeholders attended and were able to learn best practices in the reduction of childhood obesity, understand where needs and disparities persist and connect to leaders in the field.

Two additional CHMI technical assistance platforms were offered in the region: the Employee Health Improvement Program and the College Health Program.

[**The Employee Health Improvement Program \(EHI\)**](#) is a no-cost offering to employers and was offered to employers in Northeast Florida in 2015. The initial meeting, hosted in partnership with the PGA TOUR, brought together over 40 participants to discuss issues surrounding employee wellness and to learn more about CHMI's efforts and two local leaders in Employee Wellness: The PGA TOUR and Marks Grey. In 2016, CHMI hosted a second forum to introduce the toolkit and encourage engagement in ongoing work. This meeting was followed by a series of six webinars held over the course of six months with program materials distributed monthly in conjunction with each webinar. The webinars included technical assistance on building support, creating action plans, implementation and celebrating success.

[**The College Campus Health program**](#) launched in Northeast Florida in June of 2017; Florida State College at Jacksonville and the University of Florida committed to implement the program. This no-cost platform includes assessment, action planning and implementation. It allows schools to customize their focus based upon health needs (physical health and nutrition, sexual health or mental health including substance abuse) and provides them with the tools and national experts to institute best practices at their campuses.

Northeast Florida received significant support to advance work to curb substance abuse, de-stigmatize substance use disorder and increase prevention and harm reduction efforts. Led by [**Drug Free Duval**](#) and the Nassau Alcohol, Crime and Drug Abatement Coalition (NACDAC), the Harvard online course was promoted for physicians and lay people. Fernandina Beach First Responders and the [**Community Coalition Alliance**](#) benefited from NARCAN donations from Adapt Pharma. And, in late 2018, the Opioids and Faith initiative was launched to engage clergy in understanding the opioid epidemic and equip them to respond in supportive ways with their congregations.

In addition to CHMI, Too Small To Fail and the Alliance for a Healthier Generation, both initiatives within the Clinton Foundation, had a presence in the Northeast Florida Region. Too Small To Fail (TSTF) focuses on building early literacy through talking, reading and singing with children. In October 2017, TSTF donated 100 tote bags, books and tip sheets to the Azalea Project, an initiative of the Northeast Florida Healthy Start Coalition committed to providing outreach, education and support services to high-risk women of childbearing age in an effort to break the cycle of substance abuse and reduce infant mortality. The regional director then led an early literacy training with about 30 women at the Azalea Project.

[**The Alliance for a Healthier Generation \(Healthier Generation\)**](#) was active in connecting to Nassau County schools for their Healthy Schools Program but had difficulty connecting with eligible schools in Duval County. CHMI was able to connect Healthier Generation with Duval County Public Schools and facilitate adoption and launch of the four-year program in 48 Duval County schools. Later all 171 schools were given access to Healthier Generation's online platform for assessment and implementation.

During the Northeast Florida Implementation, President Clinton visited twice to see the work and speak to stakeholders. The first visit was in November of 2015 in conjunction with a [Progress Report Town Hall](#) where the President spoke to stakeholders about pressing needs in Northeast Florida, the power of collaboration and the opportunity for significant improvements in health outcomes. The second was in October 2017 for a site visit during which President Clinton met with clients from the Azalea Project, learned about innovative prescription and drug administration protocols at Orange Park Medical Center, saw the SBIRT tool in action and discussed the advantages of universal substance use screening, and met students from the Hunger Fighters who repurpose unused food from cafeterias at University of North Florida and area hospitals for homebound HIV patients. The President's interest in the work of Northeast Florida stakeholders served to further elevate the success to a broader audience and sustain momentum for organizations involved with implementation.



NORTHEAST FLORIDA BLUEPRINT CONVENING CONTENT AREA EXPERTS

Clinical Care: Access to Care and Quality of Life

Nikole Helvy, MS HAS, Senior Vice President of Operations
Health Planning Council of Northeast Florida

Community Safety

Ben Warner, President & CEO
Jacksonville Community Council Inc.

Disease Prevention: Sexual Activity

Joy E. Burgess, RN, MSN
Manager, The Center for Academic Success, Chamberlain College of Nursing

Employment, Education & Income

Melanie Patz, Vice President of Community Impact
United Way of Northeast Florida

Family & Social Support

Larry West, Chief Operating Officer
Family Support Services

Healthy Eating & Food Quality

Laureen Husband, Director Healthy Jacksonville
Florida Health Department in Duval County

Physical Activity

George Babish, Senior Vice President for Organizational Advancement
YMCA of Northeast Florida

The Physical Environment: Built Environment & Environmental Quality

Carolyn Clark
Urban Land Institute

Substance Abuse & Alcohol & Tobacco Use

Susan J Woodford MS, CPP, Executive Director
Nassau Alcohol, Crime, & Drug Abatement Clinic

CONCLUSION

CHMI is humbled at the impact we and our community stakeholders have achieved as a result of the deep engagement and collaboration around shared goals. Together CHMI and its partners have made significant progress on many of the priorities of the region's Blueprint for Action, which includes the successes outlined above and many other efforts that collectively improved the landscape of health in Northeast Florida. We are particularly proud of the network of partners that have coalesced in the past five years – a network that crosses sectors, industries, and issue areas that will serve as the basis of continued collaboration and collective action in the years to come. The next section provides an outline of what to expect next, additional details on lessons learned by CHMI, and specific feedback from CHMI's evaluation team on the impact of this program.

SUSTAINABILITY/WHAT'S NEXT

From the onset, CHMI worked with Northeast Florida stakeholders to deploy sustainable solutions for addressing health disparities. Throughout the deployment of the model, CHMI focused on unlocking community capacity to create systems change as well as adding to that capacity with technical assistance and national partners. The coalition has made much progress; still, when the work was launched in 2013, we knew that transforming community health takes time. Our process acts as an accelerator and a catalyst. But, at the release of this report, the work has not finished. As highlighted in this report, many Northeast Florida agencies are engaged in ongoing projects and they, in addition to others, are committed to continuing those efforts.

The networks and coalitions created and supported through CHMI's work in Northeast Florida will continue collaborating to make further strides toward increasing fresh food access, broadening behavioral health services and expanding affordable and accessible housing among other areas. There is an ongoing commitment to addressing health disparities throughout the region and work in which CHMI will continue to engage.

- The Northeast Florida Opioid and Heroin Task Force will continue to coordinate efforts to curb substance abuse with leadership from Dr. Jodie Graves and Drug Free Duval.
- The Food, Hunger and Nutrition Network will continue at the University of North Florida.
- Colleges that have completed their assessments and action plans as a part of the College Health Program will have continued technical assistance and connectivity to national experts at Power to Decide and the American Academy of Nutrition and Dietetics among others.
- CHMI will continue to work on reducing stigma and raising awareness for substance use disorders in Northeast Florida by engaging with community faith leaders. Faith leaders are a trusted source of support and information. They influence attitudes and practices in communities across the U.S., and as such, are a vital part of the solution to confronting the opioid epidemic. CHMI is building networks of faith leaders representing different faith traditions, and equips them with the knowledge, skills, and resources needed to organize, reduce stigma of addiction, and fight substance use disorders in their communities.

LESSONS LEARNED

It became clear as the work of the Blueprint for Action began that many of the Bold Action Steps could be addressed in combination, or across multiple sectors, and in some cases led to solutions and successes beyond the Bold Action Step identified. Therefore, working in groups based upon a single social determinant

(such as “Healthy Eating” or “Physical Activity”) was not as effective as approaching the Bold Action Steps by bringing together the appropriate stakeholders needed to make change specific to one, or several inter-related, Bold Action(s). Early themes identified in the Bold Actions were mental and behavioral health, multi-modal transportation including bikeways and greenways, technology and communications and engaging youth. Projects such as 904MissionOneMillion leveraged technology and communications to engage individuals in behavior change that spanned physical activity, healthy eating, family, and social supports as well as employment, education, and income.

CHMI was unable to gain traction on some of the Bold Action Steps despite the high level of collaboration and engagement occurring over the past five years. Lack of movement through the Blueprint implementation process does not minimize the need to address these issues; rather, we believe that this demonstrates a lack of resources needed (leadership support, staffing capacity, funding capacity) to bring about desired change. Stakeholders wisely recognized these deficits and chose to direct their energies toward more attainable goals. To help identify these issues early in the process in future communities, CHMI has instituted a feasibility study, timeline and resource identification for each proposed Bold Action Step, so that stakeholders can make more informed decisions about Bold Action adoption. The incorporation of this knowledge as the Blueprint is written will help guide the approach, preparing the community for realistic outcomes and helping to better identify what progress can be obtained over time.

One of the biggest challenges in community work is the inability to insulate efforts from changes in leadership. When these changes occur, work may be delayed or abandoned completely. A new leader to an organization may continue to support the priorities of the Blueprint but needs time to adjust to her/his new role. Alternatively, the new leader may not have the same priorities as her/his predecessor. CHMI has experienced both situations and acknowledges that it is an element of implementation that cannot be easily predicted or prevented.

Finally, Northeast Florida is the largest geographically of CHMI’s Community Health Transformation regions with the most government seats adopted to date. While Northeast Florida in many ways is a cohesive and collaborative community, CHMI understands that the diversity of urban, rural and suburban neighborhoods within a region may have the same challenges but not need the same solutions. CHMI’s experience in Northeast Florida has helped to hone their focus on context-specific and equitable solutions, providing a roadmap that is customized to meet the needs of subsets of our regions. With the help of CHMI’s evaluators at Wake Forest University, they have identified the need for stakeholders to adopt a small set of community change metrics that stakeholders can both influence and monitor to better understand the collective efforts of all projects, initiatives and programs implemented as a result of a community Blueprint. The community change metrics should not ignore diversity and equity, quite the opposite; they will serve to keep diversity and equity in focus to promote progress in the handful of areas that matter most to communities.

OBSERVATIONS FROM THE WAKE FOREST EVALUATION TEAM

The Clinton Foundation engaged an independent team of researchers from Wake Forest School of Medicine in September 2016 to evaluate the CHMI’s Community Health Transformation program. The Wake Forest team examined how the CHMI model is being implemented within the six participating communities as well as the effect that the CHMI process has had on the development of work that has the potential to improve community health. The Foundation uses findings from the evaluation to assess the effectiveness of the CHMI model, to make refinements to the model, and to understand the conditions that need to be in place for the model to be most effective.

Across the CHMI sites, the Wake Forest team has observed that the initiative is stimulating new health improvement work and adding momentum to projects that pre-dated CHMI. In Northeast Florida, CHMI has

contributed to the development of a number of notable health-improvement projects, including increasing access to healthier choices, encouraging behavior change, utilizing technology, and creating lasting networks for sustained engagement. These projects took shape, became more strategic, expanded their reach, and/or enhanced their sustainability over the past five years.

To understand CHMI's specific contributions, the Evaluation Team examined five bodies of work where key informants indicated that CHMI had made a difference. These five bodies of work are:

1. The Northeast Florida Food, Hunger, and Nutrition Network
2. A set of substance-use prevention projects associated with Drug Free Duval
3. An initiative that uses information technology to make intersections safer for pedestrians and bicyclists
4. A new farmers market in Atlantic Beach
5. The Mission1Million campaign to promote physical activity and healthy eating

Based on interviews with informants directly involved in these projects, the Evaluation Team believes that Clinton Foundation resources, especially the regional director, were significant contributors to each of these five bodies of work. The regional director added value by assisting with the design of programs and projects, by providing critical forms of project management, and by bringing in needed resources and partners. In addition helping to advance specific projects, she played an active role in developing networks of people with shared interests, building new organizations and helping those groups identify opportunities and set strategic direction.

When local leaders came together in the CHMI Blueprinting session in 2013, they identified a broad set of aspirational goals for improving the health of Northeast Florida. Over the past five years, a diverse mix of organizations from throughout the region have come together and taken actions that have generated tangible payoffs. The CHMI regional director played a critical role in stimulating new work and in providing needed resources and expertise as that work took shape. While much has been accomplished as a result of the Northeast Florida CHMI project, much more remains to be done in order to achieve the highly ambitious goals that local leaders staked out for themselves. The CHMI process has played an important role in setting the stage for the next phase of work – by cultivating new programs, networks, collaborative problem-solving, and initiative-taking. The networks and coalitions that CHMI has helped foster, expand and strengthen will continue to serve as venues for local stakeholders to develop and implement strategies to address food insecurity, nutrition, and substance use.

TIMELINE

JANUARY 2013

CHMI, The PGA TOUR and THE PLAYERS Championship partner to establish a community transformation region in the five-county area of Northeast Florida.

OCTOBER 2013

Baptist Health, Brooks Rehabilitation, Mayo Clinic, St. Vincent's Healthcare and UF Health Jacksonville co-sponsor a launch event to introduce the Clinton Health Matters Initiative to the Northeast Florida Community.

OCTOBER-DECEMBER 2013

CHMI conducts listening sessions with over 300 individuals, organizations and public institutions to learn about the state of health and current efforts and obstacles in NEFL.

DECEMBER 2013

CHMI hosts a day-long Blueprint Convening with stakeholders from across the region to set priorities in each of the nine social determinant areas.

MAY 2014

Five stakeholders from NEFL join leaders from across the country at the Closing the Gap Summit sponsored by CHMI and the Robert Wood Johnson Foundation to discuss continued efforts to decrease childhood obesity.

JULY 2014

CHMI releases the Northeast Florida Blueprint for Action outlining priorities for actionable change set by the community.

NOVEMBER 2014

The NEFL CHMI Steering Committee is formed to advise the Blueprint implementation across the five counties.

DECEMBER 2014

CHMI supports the Youth Led Childhood Obesity Summit hosted by I'M A STAR student leaders. Students from across Northeast Florida attend to shape a student-led strategic action plan to reduce childhood obesity.

JANUARY 2015

Several Northeast Florida stakeholders attend the annual CHMI Activation Summit in Indian Wells, California. Three stakeholders speak about their efforts to improve health and well-being as part of the focus on Community Transformation.

MARCH 2015

CHMI and Jacksonville Systems of Care convene a meeting for stakeholders including school districts, child welfare, health care, and juvenile justice to meet with UNICEF leaders in the Convention on the Rights of the Child and the resulting Child Friendly Framework.

AUGUST 2015

In partnership with the PGA TOUR, CHMI hosts an Employee Health Improvement Forum that engaged 40 representatives from local businesses in building cultures of health in their organizations.

OCTOBER 2015

CHMI brings together the One Love Foundation and Northeast Florida Healthy Start Coalition to present at the Delores Barr Weaver Policy Center's See the Girl Summit. The CHMI led session discusses innovation

and partnership and gives One Love and Healthy Start an opportunity to present their work and call participants to action.

NOVEMBER 2015

CHMI makes its first NEFL progress report to the community.

NOVEMBER 2015

CHMI facilitates a partnership between the Northeast Florida Healthy Start Coalition and Care Message, a HIPAA compliant text messaging platform to provide client services. This partnership provides an alternative communication tool for hard to reach clients.

JANUARY 2016

At CHMI's 2017 Annual Activation Summit, CHMI, Drug Free Duval, and ADAPT Pharma commit to increasing access to naloxone for community organizations, college campuses, and government agencies with the goal of saving lives, reducing stigma, and supporting harm reduction efforts.

FEBRUARY 2016

Drug Free Duval and CHMI bring together 40 organizations for an information session on the Screening Brief Intervention and Referral to Treatment (SBIRT) tool. Organizations are offered agency training sessions and technical assistance if they choose to implement the tool.

APRIL 2016

Health 2.0 selects a collaborative including CHMI, the Health Planning Council, City of Jacksonville and Jacksonville University, as a recipient of the Technology for Healthy Communities grant. The collaborative partners with Numina to install data sensors to track pedestrian activity at high incidence intersections allowing for increased data-based decision making for infrastructure improvements.

APRIL 2016

The Duval County Medical Society launches 904 MissionOneMillion, a communications campaign to promote weight loss through behavior change and healthy habits. The Campaign engages individuals and institutions to make small and big changes toward encouraging better health and well-being.

AUGUST 2016

CHMI hosts a second Employee Health Improvement Forum that engaged 35 representatives from local businesses in building cultures of health in their organizations. Following this forum, CHMI engages business representatives in a series of six webinars to receive resources and technical assistance for leveraging organizational change.

SEPTEMBER 2016

CHMI partners with the National Resource Center for Healthy Marriage and Strong Families to host a full-day Integration Institute training for NEFL direct service organizations throughout the five counties. The training includes instruction to increase awareness of the importance of healthy relationship skills and share promising practices regarding integration of these interpersonal (communication and conflict resolution) and critical (parenting and financial education) skills into educational settings.

OCTOBER 2016

The I'M A STAR Foundation and the Jacksonville Transit Authority establish a partnership to reduce food deserts in Jacksonville through fresh fruit and vegetable sales at the Rosa Parks transit station. The partnership advances student leaders' #fitoverfatUSA campaign, teaches entrepreneurship and offers a convenient point of sale for bus riders.

NOVEMBER 2016

CHMI, Mayo Clinic and UNF host a Food Insecurity and Healthy Eating Workday bringing together sometimes disparate groups working on aligned challenges regarding food production, distribution, access, and education. Attendees agree to pursue replication of the Tampa Bay Network to end Hunger in Northeast Florida.

NOVEMBER 2016

In partnership with Jacksonville Systems of Care, Duval County Public Schools and the Jacksonville Children's Commission, a Child Friendly Schools pilot launches in 10 Duval County schools.

APRIL 2017

Dig Local in partnership with Atlantic Beach Urban Farms, the City of Atlantic Beach, Baptist Health, BEAM, CHMI, and Jacksonville University launches the ABC Market, a weekly local produce and prepared foods market in the food desert of Mayport.

JUNE 2017

CHMI launches the College Health program, a four-year assessment, action planning and technical assistance program to build a culture of health on campus through policy, systems, and practice change. Initial cohort participants in are University of North Florida and Florida State College at Jacksonville.

OCTOBER 2017

President Clinton visits Northeast Florida to highlight the work of stakeholders in promoting early learning, addressing substance abuse and increasing food access and nutrition. As part of the visit, Too Small To Fail contributed 100 tote bags filled with early literacy materials to the Azalea Project and Adapt contributed 500 units of NARCAN to prevention coalitions who will conduct substance abuse signs and symptoms training for community members.

JANUARY 2018

CHMI visited the Azalea Project, an initiative of the Northeast Florida Healthy Start Coalition supporting women in freedom from substance abuse, to deliver early literacy training on talking, reading, and singing with young children to 30 mothers.

JUNE 2018

CHMI hosts a Sustainability Forum at Jacksonville University to highlight the successes of efforts to date and facilitate planning for future opportunities that stakeholders will sustain in Northeast Florida. The Forum included discussions on Nutrition, Housing, Mental and Behavioral Health, Substance Use, and Parks and Pedestrians.

OCTOBER 2018

CHMI establishes a partnership with OneJax to engage faith leaders in addressing the Opioid Crisis. Through the partnership, CHMI and OneJax will engage faith leaders from diverse backgrounds to support them in supporting their congregants affected by substance use disorder.

DECEMBER 2018

Duval County Public Schools partners with Headspace, a partnership brokered by CHMI, to distribute free year-long subscriptions to all educators in 171 schools and the district office. The Clay and St. John's county school districts also are contemplating partnership.

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To the members of the Northeast Florida Steering Committee, your commitment to informing and prioritizing the work was invaluable to honing our efforts and focusing capacity.

To the countless stakeholders who have contributed and will contribute to building a healthier Northeast Florida, our work would not exist without your willingness, grit and expertise. Thank you for caring enough to collaborate.