*Improving Community Health through Planning and Partnerships*

Neslon Inter-Agency & Community Health Assessment Council

Nelson Center

8445 Thomas Nelson Highway

Lovingston, VA 22949

January 11, 2016

**Introductions/Attendees:**

Elizabeth Beasley (*Health Dept.)*

Denise Bonds (*Health Dept*.)

Bill Brem (*American Red Cross*)

Waverly Davis (*Comm. Investment. Collab.)*

Adrienne Haskins (*BRMC*)

Barbara Hutchinson (*United Way*)

Lucas Lyons (*JAUNT*)

Mark Travis (*DSS*)

Jackie Martin (*Sentara MJH*)

Sara Pennington (*RideShare*)

Pete Perdue (*SALT, NCCF, Bank On*)

Jillian Regan (*Health Dept.)*

Peggy Whitehead (BRMC)

**Planning District 10 MAPP2Health’s 2012 four community health priority issues:**

1. An increasing rate of obesity

2. Insufficient access to mental health and substance abuse services for segments of the population

3. Late and insufficient prenatal care and racial disparities in pregnancy outcomes

4. Tobacco use above the Healthy People 2020 goal

**Re-Introducing MAPP. What’s the Game Plan?** *(Facilitated by Elizabeth Beasley)*

* See attached **Council Responsibilities and MAPP Timeline** for additional information
* Process Timeline (also handed out at meeting)
* Consider your participation through the duration of MAPP; if willing, please sign the Locality Council Responsibilities Agreement (Agreement form handed out at meeting and attendees asked to sign acknowledgement)
* Follow Up: Need recommendations for Nelson IAC participation on MAPP Leadership Council

**What does a healthy community mean to you?** *(Facilitated by Jackie Martin)*

* Purpose -> Visioning will ensure the group is on the same page and we know where we’re going and what we want (i.e. our ultimate goal)
* See attached Word Cloud generated from Visioning Exercise
* Follow Up: Will circulate three visioning statements based on feedback from several groups for all MAPP members to choose one to guide the process

**Presentation and Discussion of Section I Data** *(Facilitated by Jillian Regan)*

* *See attached* **PowerPoint** and handouts for more information. Section I answers the following question:
* Who are we and what do we bring to the table?
  + Reviewed demographic, socioeconomic, health care access data
* Discussion/Questions:
* **Socioeconomic Indicators** Comments 🡪
* SNAP enrollment down, but Medicaid enrollment up
* SSDI benefit requirements changed: Ages between 18-49 work requirement
* Participant rate – would be eligible but didn’t apply or didn’t have the correct docs to be considered eligible
* Review trend for uninsured children by poverty level for 2011 and 2012
* For ACA enrollment, BRMC is trying to connect eligible children to DSS for enrollment
* **Healthcare Access Indicators Comments** 🡪
* Most uninsured adults are “in the gap” in Nelson County
* Any correlation between the people living below FPL and don’t have insurance? Yes, those are the people in the “gap” who make too much money to qualify for Medicaid, but not enough money to pay out of pocket for health insurance
* BRMC now has two pediatricians
* Any sense for how many people leave the county for their healthcare?

**Next Steps**

* Next meeting will cover Section II Strengths and Risks in Our Community (Quality of Life, Environmental Quality, Health Behaviors, Community Resources, and Community Safety)

**Next Meeting:**

February 8, 2016, 2 PM