

*Blueprint for Health Improvement & Health- Enabled Prosperity*  
*Approved January 7, 2016 by the Southwest Virginia Health Authority*

The *Blueprint for Health Improvement & Health – Enabled Prosperity* reflects the collaborative work of community members and organizations in identifying priority goals and strategies for population health improvement in Southwest Virginia. The aims and goals outlined in this document are ambitious, achievable, measurable, and intended to be attained by 2020. They apply to a geographic “region” that includes the counties of Lee, Scott, Wise, Dickenson, Buchanan, Tazewell, Russell, Washington, Smyth, and cities of Norton and Bristol.

**Aim 1.0: Healthy Starts for Children**

**Goal 1.1:** Decrease by .5% across the region, the percent of children who do not meet the PALS K benchmarks in the fall of kindergarten and require literacy interventions, with no jurisdiction exceeding 20% failure to meet the benchmark

**Goal 1.2:** Increase percent of third graders who pass the Standards of Learning third grade reading assessment to 80% or better, with no sustained decline in any jurisdiction

**Goal 1.3:** Increase the percentage of children aged 19 to 35 months who receive the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella and pneumococcal conjugate vaccine (PCV) to 80%

**Goal 1.4:** Increase percent of boys and girls, age 13-17, who receive three doses of HPV vaccine, to 80%

**Goal 1.5:** Increase number of children, ages 1-18, who receive preventive oral health services

**Goal 1.6:** Decrease rate of child abuse and neglect across the region

**Goal 1.7:** Decrease infant mortality rate across the region

**Goal 1.8:** Decrease total preterm births across the region

**Goal 1.9:** Increase percent of women who receive early (first trimester) and adequate prenatal care to 80%

*Blueprint for Health Improvement & Health- Enabled Prosperity*  
*Approved January 7, 2016 by the Southwest Virginia Health Authority*

**Goal 1.10:** Decrease percent of women who use alcohol and/or tobacco use during pregnancy

**Goal 1.11:** Decrease number of children born with Neonatal Abstinence Syndrome

**Goal 1.12:** Decrease teen pregnancy rate by 25% in all jurisdictions, with no jurisdiction trending upward

**Goal 1.13:** Increase percent of women who initiate breastfeeding

**Aim 2.0: Healthy Minds**

**Goal 2.1:** Increase the number of certified or licensed professionals treating mental health and substance use disorders (SUD), including core mental health professionals, as defined by HRSA, sufficient to eliminate the Mental Health Professions Shortage Area Designation in the region. Core mental health professionals as defined by HRSA include psychiatrists, clinical psychologists, clinical social workers, psychiatric nurse specialists, and marriage and family therapists.

**Goal 2.2:** Increase access to diverse services for SUD treatment, including intensive outpatient, inpatient and residential

**Goal 2.3:** Increase the number of people who receive specialty treatment for SUD in the region

**Goal 2.4:** Decrease number of drug/poison deaths in the region

**Goal 2.5:** Decrease suicide rate to equal or below state rate of 12.9 per 100,000

**Aim 3.0: Healthy Behaviors**

**Goal 3.1:** Increase the percent of adults who receive an annual influenza vaccine to 70%

**Goal 3.2:** Decrease percent of adults in the region who are overweight or obese to equal or below the state goal of 63%.

**Goal 3.3:** Decrease percent of children in the region who are overweight, or obese ( BMI > 85% for age and gender)

*Blueprint for Health Improvement & Health- Enabled Prosperity*  
*Approved January 7, 2016 by the Southwest Virginia Health Authority*

**Goal 3.4:** Decrease percent of adults who did not participate in any physical activity during the last 30 days to no more than 20% across the region

**Goal 3.5:** Increase percent of high school graduates who are enrolled in an institute of higher education within 16 months after graduation to equal the state goal of 75%. Institutes of higher education can include, but are not limited to, universities, colleges, institutes of technology, vocational schools and trade schools.

**Goal 3.6:** Decrease the percent of adults who report using tobacco to no more than 12% across the region

**Goal 3.7:** Decrease initiation of alcohol, tobacco, and other drugs (ATOD), including e-cigs in adolescents

**Goal 3.8:** Increase access to oral health care services using traditional and innovative models of oral health care delivery, to include a sufficient number of dentists to eliminate the Dental Health Professions Shortage Area Designation.

**Goal 3.9:** Decrease rate of avoidable deaths from heart disease, stroke, or hypertensive disease in the region equal to or below the state goal of 40 per 100,000

**Goal 3.10:** Decrease morbidity and mortality (age-adjusted) related to diabetes

**Aim 4.0: Healthy Communities**

**Goal 4.1:** Decrease rate of unemployment across the region

**Goal 4.2:** Increase households with access to high speed internet to equal or above the state goal of 72%

**Goal 4.3:** Decrease percent of households that are food insecure for some part of the year to no greater than 10%

**Goal 4.4:** Create a model for collaboration across agencies and organizations to share data and resources for the purpose of population health improvement

*Blueprint for Health Improvement & Health- Enabled Prosperity*  
*Approved January 7, 2016 by the Southwest Virginia Health Authority*

**Goal 4.5:** Increase number of communities that adopt policies, environmental and systems changes (PES) to support healthy living

**Aim 5.0: Effective System of Health Care**

**Goal 5.1:** Increase access to certified specialty care providers, with a focus on endocrinology, cardiology, pulmonary, and oncology

**Goal 5.2:** Increase percent of adults appropriately screened for colon, cervical, and breast cancer based on standards of care

**Goal 5.3:** Increase the number of hospitals in the region meeting the state goal for prevention of hospital-onset *C.difficile* infections to 100%

**Goal 5.4:** Decrease hospitalizations for ambulatory care sensitive conditions to no greater than 1100 per 100,000

**Goal 5.5:** Increase Health Information Exchange (HIE) in regional health systems serving upper east Tennessee and Southwest Virginia