



	Helpful to achieving Public Health Goals	Challenges to achieving Public Health Goals
<b>Internal Origin (Attributes of the Local Public Health System)</b>	<p style="text-align: center;"><b>Strengths</b></p> <ul style="list-style-type: none"> <li>Multiple agencies successfully conduct a primary role in monitoring health status to identify community health problems, including Madison Health, Madison County Public Health (MCPH), Rocking Horse Community Health Center (FQHC), Madison County Prevention (MCP), Mental Health &amp; Recovery Board (MHRB), etc.</li> <li>MCPH, Adult Protective Services, Child Protective Services, &amp; the Diversion Program play a primary role in diagnosing and investigating health problems and health hazards at the community level, while the hospital, FQHC, MHRB &amp; their service providers, and FCFC play a secondary role. These agencies are supported by UW, Sheriff, Township Trustees, &amp; the school system. The leadership and coordination among these agencies is a strength.</li> <li>Madison County leaders define their performance as optimal in terms of informing, educating, and empowering people about health issues. Beyond the agencies cited above, each town has a community center playing a primary role in this effort along with libraries, schools, OSU Extension (via SNAP-Ed &amp; 4H), NAMI chapters, local media, and the Mayors offices.</li> <li>Developing policies and plans that support individual &amp; community health efforts is considered a strength and is led by MCPH, Madison Health, Sheriff's Office, City of London &amp; Mayor, Madison County Commissioners, FQHC, School districts, and MCP. Local government is "hands on" and partners with the local PH system.</li> <li>Enforcing laws &amp; regulations that protect health &amp; ensure safety is carried out by the local government, partnering with MCPH, Madison Health, FQHC, MRDD, Senior Care Agencies, &amp; MHRB. Each of these agencies perceives this as a primary role.</li> <li>Researching for new insights and innovative solutions to health problems is considered to be a strength. The FQHC created a new position in 2018 for an Innovations Research Coordinator—a doctor in Public Health who uses meaningful data to provide innovative care to the population served. Madison Health researches evidence-based practices such as telemedicine with OSU Medical Center regarding stroke response. FCFC is involved in research into the CompDrug MOMS program, which provides a 'one-stop' shop of services to women throughout pregnancy to meet both their addiction treatment and pregnancy needs. CompDrug is a federally recognized Opioid Treatment Program licensed by the Ohio Department of Mental Health and Addiction Services (OMHAS) and nationally accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF). The Ohio State University (OSU) is evaluating these Central Ohio interventions.</li> </ul>	<p style="text-align: center;"><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>Mobilizing community partnerships to identify and solve health problems is considered to be an area for improvement. Local public health leaders identify their continued challenge in solving health problems. Primary roles are held by the Family and Children First Council (FCFC), FQHC, MHRB, Madison Health (via local and Columbus area hospital partnerships), &amp; Madison County Prevention. Beyond mobilizing partnerships, solving health problems is impacted by resources both in the community and of the community, &amp; as a rural County, that's where Madison is challenged</li> <li>Linking people to needed personal health services, and assuring the provision of health care when otherwise unavailable, points to strengths and weaknesses. Being a small county, it is easier to link people to needed services, but being generally resourced challenged makes it more difficult to provide services to fill gaps. Five agencies see this as their primary role: Madison Health, MCPH, MHRB, Nationwide Children's, &amp; the FQHC, with 1 agency playing a secondary role (MCP). While there is still room for improvement, this essential service is much improved compared to 10 years ago and even 3 years ago with the addition of the FQHC.</li> <li>Assuring a competent public and personal health care workforce can be a difficult service for a community to take ownership of. In recent years, "no wrong door" training was broadly provided to Madison County agencies, especially to train frontline personnel in "warm hand-offs" of people who needed services not provided by the accessed agency. Workforce is a challenge in rural counties. Several agencies say they are a training ground for professionals who then go on to Columbus, etc., for bigger opportunities. Agencies like the FQHC &amp; hospital access outside specialists to fill gaps</li> <li>Evaluating the effectiveness, accessibility &amp; quality of personal and population-based health services is an area for improvement, but county agencies do have a commitment to implementing to fidelity evidence-based programs. Also, the hospital follows Press Ganey QA requirements; MCPH has instituted QI &amp; performance management systems; the MHRB is state mandated to evaluate effectiveness, accessibility, and quality of services to the public, as is the FQHC.</li> </ul>
<b>External Origin (Attributes of the community environment— CTSA Results)</b>	<p style="text-align: center;"><b>Opportunities</b></p> <ul style="list-style-type: none"> <li>Satisfied with the small town feel where everyone knows each other</li> <li>Services at the county level are accessible and centrally located</li> <li>Staff working in social &amp; human services wear many hats, and so clients don't get bounced around from one agency to the next</li> <li>Having collaborative communities</li> <li>We find the resources and we are accountable to the community for the resources we have.</li> <li>There is a sense of increasing levels of mutual trust and respect across agencies as evidenced by city mayors working together, technology use which enables access to information, and using transparency to impede conspiracy theories.</li> <li>Voter turnout and passing levies are evidence of civic involvement in Madison County.</li> <li>Madison County must be creative with the resources it has—the Access Cowling Project is a good example (an inclusive and handicap accessible playground at Cowling Park) <ul style="list-style-type: none"> <li>Investment in Cowling Park met its investment target of \$400,000 two years early</li> </ul> </li> <li>The community support for expansion of mental health services</li> <li>Township representation in joint government efforts</li> <li>Madison Health (hospital) engaged the community in its facility expansion plans</li> <li>The Prevention Carnival and the physical spaces such as parks and playgrounds, walking/hiking trails, and bike trails, campsites</li> <li>Trauma-informed care</li> <li>Prevention efforts with youth; national training and resources</li> </ul>	<p style="text-align: center;"><b>Threats or Needs</b></p> <ul style="list-style-type: none"> <li>Medicare and Medicaid possible changes; will Medicaid expansion in Ohio continue?</li> <li>Cost of long-term care and few people carry long term health care insurance</li> <li>Government regulations that restrict facilities from taking Medicaid patients</li> <li>Lack of sufficient workforce to provide care to older adults</li> <li>Insufficient health care workforce in general</li> <li>Schools are currently overwhelmed by the needs</li> <li>Opioid crisis</li> <li>Gaming culture</li> <li>Need for additional resources; the community needs to create a county-wide community foundation</li> </ul>