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**Quay County Maternal Child & Community Health Council**  
Quay County, New Mexico

**Vision Statement:**

Optimal Quality of Life for Quay County Residents

**Mission Statement**

Affecting Change to Improve the Quality of Life and Health of Quay County Residents

**Definition of Health**

Health is a balance of physical, emotional, social, spiritual, intellectual, and environmental well-being.

## **Summary of Council Assessment**

### **Council Development**

The Council Development portion of this document is based on the results of the Coalition Self-Assessment Survey (CSAS), which was offered to members online and in paper format during October 2008. Of the 35 members recruited to complete the survey, 32 members did so. This provides a strong voice of the Council membership in determining areas of strength and areas needing attention and improvement.

Member responses were overall positive:

- MCCH Council is essential in making significant progress in community health status changes.
- MCCH Council is primarily driven by goals/strategic plan.
- Membership supports decision-making process and leadership of both members and paid staff.
- Participation is high among members who believe they have a strong voice in the decisions/direction of the Council.
- Members believe there are significant things that would not happen in the community without the Council.

Areas which members identified in need to attention include; recognition in the community, continued efforts to assure membership representative of the communities, and internal Council processes.

### **Council Assessment & Prioritization**

The Council Assessment & Prioritization portion of this document represents the Council's role in maintaining an eye on the health and well-being of the Quay County community. Through the process of assessment of community needs and assets and ongoing evaluation, the Council meets its public responsibility of informing, planning, action, and evaluation.

### **Council Action**

The Council Action portion of this document represents the result of assessment documented in the Quay County Community Health Profile 2009 and the long-range planning documented in the Quay County Community Health Improvement Plan 2010 – 2014. This annual plan of action describes the evidence-based strategies necessary to help the community move forward in progress on the following priorities:

1. *Obesity Prevention & Access to Services*
2. *Substance Abuse Prevention & Access to Treatment*
3. *Teen Pregnancy Prevention & Access to Education & Services*
4. *Suicide Prevention & Access to Mental Health Services*

## A. Council Development

System/Capacity Outcomes (Consideration of these is REQUIRED)	Health Council Objectives (Usually one yr. & definitely measurable)	Health Council Action Steps	Indicators (REQUIRED—May add more)
<p><b>1. Planning:</b> The Health Council is recognized as a community health planning and information body or hub.</p>	<p><b>Objective 1.1:</b> Council membership appointed by Quay County Board of Commissioners by June 2010.  <b>Objective 1.2:</b> Request Quay County Board of Commissioners recognition of the Profile and Plan by June 2010.  <b>Objective 1.3:</b> Increase public awareness of Quay County MCCH Council by June 2010.</p>	<ol style="list-style-type: none"> <li>1. Presentation to Quay County Commissioners of membership roster, Profile, and Plan.</li> <li>2. Request liaison from County Commission to Council.</li> <li>3. Have membership speak to elected officials on issues of importance.</li> <li>4. Quarterly media exposure.</li> </ol>	<ul style="list-style-type: none"> <li>• Contacts with policy makers</li> <li>• Requests for resource directory</li> <li>• Requests for Community Health Profile &amp; Plan</li> </ul>
<p><b>2. Membership:</b> The Health Council has a stable, diverse, and growing membership.</p>	<p><b>Objective 2.1:</b> Increase representatives from underrepresented groups by 2 members by June 2010.  <b>Objective 2.2:</b> Update new member packet by June 2010.</p>	<ol style="list-style-type: none"> <li>1. Identify &amp; recruit potential members from underrepresented groups.</li> <li>2. Quarterly agendas will include a discussion of who needs to be at the table and identification of member assigned to contact them.</li> <li>3. A council member will adopt the new member.</li> <li>4. Update new member packet.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Health Council Roster</li> <li>▪ CSAS results</li> <li>▪ New Member Packet</li> </ul>
<p><b>3. Internal structures:</b> The Health Council is sustained and institutionalized with effective structures &amp; practices:</p> <ul style="list-style-type: none"> <li>• Leadership team</li> <li>• Committee structure</li> <li>• Effective meetings</li> <li>• Member participation</li> </ul>	<p><b>Council determined that no action is necessary, based upon the results of the CSAS FY 09.</b></p>		<ul style="list-style-type: none"> <li>• Leadership Team minutes</li> <li>• Committee minutes</li> <li>• Health Council minutes</li> <li>• CSAS results</li> </ul>
<p><b>4. Internal processes:</b> The Health Council uses productive group processes.</p>	<p><b>Objective 4.1:</b> Increase member support of decision-making and other internal processes by June 2010.</p>	<ol style="list-style-type: none"> <li>1. Research appropriate meeting mechanisms to be certain that all members have input during meetings.</li> <li>2. Implement chosen strategies.</li> </ol>	<ul style="list-style-type: none"> <li>▪ CSAS results</li> </ul>

## B. Community Assessment & Prioritization

System/Capacity Outcomes (Consideration of these is REQUIRED)	Health Council Objectives (Usually one yr. & measurable)	Health Council Action Steps	Indicators (REQUIRED—May add more)
<p><b>1. Community assessment:</b> The Health Council is able to assess community health strengths, needs, problems, and resources.</p>	<p><b>Objective 1.1: Update documents necessary to assess community strengths, needs, problems and resources by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Update Community Health Profile annually.</li> <li>2. Update MCCH Council Action Plan annually.</li> <li>3. Update Community Resource Directory annually.</li> <li>4. Distribute documents as appropriate.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Community Health Profile</li> <li>▪ Requests for resource directory</li> <li>▪ Requests for Community Health Profile &amp; Plan</li> </ul>
<p><b>2. Monitoring progress:</b> The Health Council is able to monitor progress in achieving outcomes:</p> <ul style="list-style-type: none"> <li>• Improving health</li> <li>• Improving community systems</li> </ul>	<p><b>Objective 2.1: Develop a mechanism by which the Council is able to monitor changes in availability of health resources and access to those resources by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Incorporate reviews of changes in services into Council meetings.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Process for monitoring outcomes</li> <li>▪ Process for monitoring changes in health systems</li> </ul>
<p><b>3. Emerging issues:</b> The Health Council has the capacity to respond to emerging issues.</p>	<p><b>Objective 3.1: Develop and implement mechanism to identify emerging health issues by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Schedule presentations at Council meetings from program/services, providers, etc. at monthly Council meeting and at appropriate committee meetings.</li> <li>2. Publicize Council meetings according to the Open Meetings Act.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Health Council minutes: discussions of emerging issues</li> <li>▪ Study/investigation of emerging issues</li> </ul>

## C. Community Action: OBESITY PREVENTION & ACCESS TO SERVICES

System/Capacity Outcomes (Consideration of these is REQUIRED)	Health Council Objectives (Usually one yr. & measurable)	Health Council Action Steps (Research-based)	Indicators (REQUIRED—May add more)
1. <b>Networks and partnerships</b> are built and/or enhanced.	<b>Objective 1.1: Increase Fitness &amp; Nutrition Committee membership to include 2 new key community partners by 2010.</b>	<ol style="list-style-type: none"> <li>1. Identify &amp; recruit key partners.</li> <li>2. Develop ongoing mechanism for monitoring membership.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Shared planning projects</li> <li>▪ New linkages between community entities</li> <li>▪ Joint initiatives established or strengthened</li> </ul>
2. <b>Community programs</b> are jointly developed or strengthened.	<p><b>Objective 2.1: Work with community partners to co-sponsor community fitness event by June 2010.</b></p> <p><b>Objective 2.2: Work with community partners to develop and coordinate evidence-based nutrition and fitness programs by June 2010</b></p> <p><b>Objective 2.4: Develop &amp; implement community media campaign by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Work with community partners to implement “Strong People” program to 3 groups.</li> <li>2. Work with community partners to provide “Organwise Guys” to Tucumcari Elementary students.</li> <li>3. Work with partners to develop a media tag line and plan.</li> <li>4. Work with partners to implement the media campaign.</li> </ol>	<ul style="list-style-type: none"> <li>▪ New programs jointly developed or implemented.</li> <li>▪ Activities related to on-going programs</li> </ul>
3. <b>Policies</b> are changed and/or constituencies are built for policy changes.	<p><b>Objective 3.1: Work with community partners and consumers to improve access to the health care system for obesity-related illnesses with improvement implemented by June 2010.</b></p> <p><b>Objective 3.2: Develop mechanism for ongoing monitoring of policies related to obesity reduction and prevention by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Using the System Change process, review the current health care system and policies related to access to care in Quay County.</li> <li>2. Identify specific aim to address identified problem areas.</li> <li>3. Research strategies used on similar aims in similar communities.</li> <li>4. Identify one strategy for focus during FY 11.</li> <li>5. Identify outcomes measure to be used.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Policy change initiatives supported and implemented.</li> <li>▪ Discussions of policy changes</li> <li>▪ Constituencies established or strengthened.</li> <li>▪ Advocacy strategies discussed or implemented</li> </ul>
4. <b>Funds</b> are received or leveraged in the community.	<p><b>Objective 4.1: Assure adequate funding for first year of media campaign by June 2010.</b></p> <p><b>Objective 4.2: Assure adequate funding for nutrition &amp; fitness programs by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Identify sources of financial support for media campaign, “Organwise Guys”, and “Strong People” programs.</li> <li>2. Work with community partners to obtain funding for above.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Technical assistance related to grant proposals provided</li> <li>▪ Endorsements of grant proposals considered</li> <li>▪ Joint applications for funding</li> <li>▪ Additional income</li> </ul>

### C. Community Action: SUBSTANCE ABUSE PREVENTION & ACCESS TO TREATMENT

System/Capacity Outcomes (Consideration of these is <b>REQUIRED</b> )	Health Council Objectives (Usually one yr. & measurable)	Health Council Action Steps (Research-based)	Indicators (REQUIRED—May add more)
1. <b>Networks and partnerships</b> are built and/or enhanced.	<b>Objective 1.1:</b> Increase Substance Abuse Committee membership to include 2 new key community partners by June 2010. <b>Objective 1.2:</b> Regional Substance Abuse Treatment inpatient facility receiving patients by June 2010.	1. Identify & recruit key partners for planning and implementation of underage drinking initiatives. 2. Assure Quay County representation on the Regional Substance Abuse Treatment Board.	<ul style="list-style-type: none"> <li>▪ Shared planning projects</li> <li>▪ New linkages between community entities</li> <li>▪ Joint initiatives established or strengthened</li> </ul>
2. <b>Community programs</b> are jointly developed or strengthened.	<b>Objective 2.1:</b> Increase community awareness of the implications of underage drinking by June 2010. <b>Objective 2.2:</b> Work with community partners to provide increased underage drinking law enforcement by June 2010. <b>Objective 2.3:</b> Work with community partners to increase community awareness of the implications of underage drinking by June 2010.	1. Council will provide committee coordination support, including assistance in the development and implementation of evaluation processes. 2. Council will work with community partners to implement underage drinking enforcement. 3. Develop annual media campaign re: underage-drinking implications. 4. Provide “Protecting You Protecting Me” to grades 1 – 5 in all four Quay Co. school districts by June 2010.	<ul style="list-style-type: none"> <li>▪ New programs jointly developed or implemented</li> <li>▪ Activities related to ongoing programs</li> <li>▪ Underage drinking citation and outcomes study</li> </ul>
3. <b>Policies</b> are changed and/or constituencies are built for policy changes.	<b>Objective 3.1:</b> Develop mechanism for ongoing monitoring of policies related to underage drinking law enforcement system by June 2010. <b>Objective 3.2:</b> Work with community partners and consumers to assess the current status of local substance abuse treatment system by June 2010.	1. Using the System Change process, review the current health care system and policies related to access to care. 2. Identify specific aim to address identified problem areas. 3. Research strategies used on similar aims in similar communities. 4. Identify one strategy for focus during FY 11. 5. Identify outcomes measure to be used.	<ul style="list-style-type: none"> <li>▪ Policy change initiatives advocacy</li> <li>▪ Discussions of policy changes</li> <li>▪ Constituencies established or strengthened</li> <li>▪ Advocacy strategies discussed or implemented</li> <li>▪ Written assessment of substance abuse treatment system</li> </ul>
4. <b>Funds</b> are received or leveraged in the community.	<b>Objective 4.1:</b> Assure continuation of CYFD Underage Enforcement funding to support ongoing efforts. <b>Objective 4.2:</b> Working with community partners, find adequate funding to support “Protecting You Protecting Me” curriculum implementation by June 2010.	1. Identify sources of financial support for “Protecting You Protecting Me” curriculum in four school districts. 2. Work with community partners to obtain funding for above.	<ul style="list-style-type: none"> <li>▪ Technical assistance related to grant proposals provided</li> <li>▪ Endorsements of grant proposals considered</li> <li>▪ Joint applications for funding</li> <li>▪ Additional income received</li> </ul>

## C. Community Action: TEEN PREGNANCY PREVENTION & ACCESS TO EDUCATION & SERVICES

System/Capacity Outcomes (Consideration of these is REQUIRED)	Health Council Objectives (Usually one yr. & measurable)	Health Council Action Steps (Research-based)	Indicators (REQUIRED—May add more)
1. <b>Networks and partnerships</b> are built and/or enhanced.	<b>Objective 1.1: Increase Teen Pregnancy Prevention Committee membership by 100% by June 2010.</b>	<ol style="list-style-type: none"> <li>1. Identify &amp; recruit key partners for planning and implementation of teen pregnancy prevention interventions.</li> <li>2. Recruit potential members.</li> <li>3. Develop a system of monitoring committee membership.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Shared planning projects</li> <li>▪ New linkages between community entities</li> <li>▪ Joint initiatives established or strengthened</li> <li>▪ Roster of Teen Pregnancy Prevention Committee</li> </ul>
2. <b>Community programs</b> are jointly developed or strengthened.	<b>Objective 2.1: Advocate for improved school-based comprehensive health education curriculum to begin by Aug 2011.</b>	<ol style="list-style-type: none"> <li>1. Using System Change process, assess current system.</li> <li>2. Identify gaps within the system.</li> <li>3. Research evidence-based interventions.</li> <li>4. Advocate for change in one school system.</li> </ol>	<ul style="list-style-type: none"> <li>▪ New programs jointly developed or implemented.</li> <li>▪ Activities related to ongoing programs</li> <li>▪ Development of new school health education curriculum</li> </ul>
3. <b>Policies</b> are changed and/or constituencies are built for policy changes.	<p><b>Objective 3.1: Work with community partners to improve youth access to health care access with improvement beginning by June 2010.</b></p> <p><b>Objective 3.2: Develop mechanisms for monitoring youth access to health care by June 2010.</b></p>	<ol style="list-style-type: none"> <li>1. Using the System Change process, review the current health care system and policies related to access to care in Quay County.</li> <li>2. Identify specific aim to address identified problem areas.</li> <li>3. Research strategies used on similar aims in similar communities.</li> <li>4. Identify one strategy for focus during FY 11.</li> <li>5. Identify outcomes measure to be used.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Policy change initiatives advocacy</li> <li>▪ Discussions of policy changes</li> <li>▪ Constituencies established or strengthened.</li> <li>▪ Advocacy strategies discussed or implemented</li> </ul>
4. <b>Funds</b> are received or leveraged in the community.	<b>Objective 4.1: Work with community partners to assure funds for ongoing committee work by June 2010.</b>	<ol style="list-style-type: none"> <li>1. Determine funding level needed to support initiatives.</li> <li>2. Work with community partners to: <ul style="list-style-type: none"> <li>▪ Assure funds for support for student/parent participation.</li> <li>▪ Assure funds for purchase of evidence-based intervention, i.e. curricula.</li> <li>▪ Work with the school to find sources of funding and personnel to fill the need for highly-qualified health educator.</li> </ul> </li> </ol>	<ul style="list-style-type: none"> <li>▪ Technical assistance related to grant proposals provided</li> <li>▪ Endorsements of grant proposals considered</li> <li>▪ Joint applications for funding</li> <li>▪ Additional income received</li> </ul>

### c. Community Action: SUICIDE PREVENTION & ACCESS TO MENTAL HEALTH SERVICES

System/Capacity Outcomes (Consideration of these is REQUIRED)	Health Council Objectives (Usually one yr. & measurable)	Health Council Action Steps (Research-based)	Indicators (REQUIRED—May add more)
1. <b>Networks and partnerships</b> are built and/or enhanced.	<b>Objective 1.1:</b> Work to include appropriate partners in the planning for school-based suicide prevention programs by June 2010.	1. Identify & recruit key partners for planning and implementation of school-based suicide prevention programs.	<ul style="list-style-type: none"> <li>▪ Shared planning projects</li> <li>▪ New linkages between community entities</li> <li>▪ Joint initiatives established or strengthened</li> </ul>
2. <b>Community programs</b> are jointly developed or strengthened.	<b>Objective 2.1:</b> Work with community partners to continue school-based suicide prevention programs by June 2010.	<ol style="list-style-type: none"> <li>1. Work with community partners to implement research-based “Signs of Suicide” program in four Quay County school districts.</li> <li>2. Work with community partners to provide “Steps to Respect” bullying prevention in Tucumcari Elementary School..</li> </ol>	<ul style="list-style-type: none"> <li>▪ New programs jointly developed or implemented.</li> <li>▪ Activities related to ongoing programs</li> </ul>
3. <b>Policies</b> are changed and/or constituencies are built for policy changes.	<p><b>Objective 3.1:</b> Work with community partners to assure continuation of analysis and implementation of agreed upon protocols by June 2010.</p> <p><b>Objective 3.2:</b> Develop mechanisms for monitoring youth access to health care by June 2010.</p>	<ol style="list-style-type: none"> <li>1. Using the System Change process, review the current health care system and policies related to access to care in Quay County.</li> <li>2. Identify specific aim to address identified problem areas</li> <li>3. Research strategies used on similar aims in similar communities.</li> <li>4. Identify one strategy for focus during FY 11.</li> <li>5. Identify outcomes measure to be used.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Policy change initiatives advocacy</li> <li>▪ Discussions of policy changes</li> <li>▪ Constituencies established or strengthened.</li> <li>▪ Advocacy strategies discussed or implemented</li> </ul>
4. <b>Funds</b> are received or leveraged in the community.	<b>Objective 4.1:</b> Assure continuation funding for school-based suicide prevention programs.	<ol style="list-style-type: none"> <li>1. Work with schools to identify sources of financial support for suicide prevention programs.</li> <li>2. Work with schools to obtain funding for above.</li> </ol>	<ul style="list-style-type: none"> <li>▪ Technical assistance related to grant proposals provided</li> <li>▪ Endorsements of grant proposals considered</li> <li>▪ Joint applications for funding</li> <li>▪ Additional income received</li> </ul>