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EXECUTIVE SUMMARY

The Quay County Maternal Child & Community Health (MCCH) Council presents this description of the Council's Strategic 2010 – 2014 Community Health Improvement Plan. This plan includes the Council's vision statement for Quay County, an assessment of the broad health and well-being issues facing Quay County residents, a description of priorities based upon an analysis of available health data and the results of a community-wide priority survey, and finally, the 5-year plan of action resulting from these steps. Members of the Quay County MCCH Council are appointed annually by the Quay County Board of Commissioners and serve at will with no term limits.

The Council presents a vision for the future of Quay County: *Optimal quality of life for Quay County residents.*

The health and well-being highlights presented depict a challenging picture for Quay County residents:

- *At least 63% of deaths in Quay County are related to chronic health conditions: heart disease, cancer, respiratory disease, liver disease.*
- *Rates of obesity in both adults and children are higher than New Mexico.*
- *Rates of substance use by both adult and youth are higher than New Mexico.*
- *Teen sexual activity is higher than New Mexico.*
- *Adult and youth depression is among the highest in New Mexico.*
- *Quay County is considered a health professional, primary care, psychiatric, and dental shortage area.*

More detailed information can be obtained in the [Quay County Community Health Profile Update 2009](#) (available by calling the MCCH Office at 575-461-3506 or contacting Alida Brown, Council Coordinator, at alida@plateautel.net).

Analysis of the available data, community survey input, and the Council membership's broad knowledge of the Quay County communities produced the following Council 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*

Interventions chosen by the Quay County MCCH Council are evidence-based strategies. Generally, the MCCH Council works within the community in a System Change process with community partners. In this evidence-based process, the

Council takes a leadership role in community identification of specific evidence-based strategies dependent upon community will and capacity.

The Quay County MCCH Council invites you to read this document and join the Council and its partners in addressing the issues that have been identified as health and well-being priorities for Quay County, New Mexico.

Alida Brown, Coordinator

INTRODUCTION

Quay County Overview

Quay County, New Mexico is a frontier community of low population per square mile and high need. The challenges of meeting the health needs of this community are vast. Quay County's population is dropping and is expected to continue to do so into the next decade, at least. This population slump is the result of the exodus of young families who need to go elsewhere to make a living. Consequently, the population is not only dropping, but also aging. This leaves a population with greater than average health care needs.

Quay County is located in the rural part of Eastern New Mexico. Although (or perhaps because) within the county is the intersection of I-40 and State Hwy. 54, a major mainstay of the economy is the service industry. This industry, along with agriculture, offers the type of economy that often does not provide the primary support of adequate health care: medical insurance. So, a good portion of the population depends upon public insurance, while 24% have no insurance.

Although there are some things that cost less (housing, for example), there are many commodities that are very pricey, such as food and transportation/travel. For many Quay County residents, there is a 50 to 90 mile trip to the nearest town for grocery, health care, and pharmacy.

Quay County residents, as a whole, are committed to their communities and to each other. Volunteerism is high in this county. Neighbors watch out for each other. Schools and students are the center of the communities. While Quay County has the positive attributes of a rural American community of the mid-twentieth century, it also reflects the challenges of rural America in the 21st century.

Purpose of the Quay County Community Health Improvement Plan

The purpose of the Quay County Community Health Improvement Plan 2010 - 2014 is to provide the Quay County community with a concise picture of the current status of health and well being of residents. Additionally, this planning document provides the Quay County community and the Quay County MCCH Council with a summary of planned strategies and a guideline for evaluating progress over the next four years. Care has been taken when developing priorities and evidence-based strategies to assure community-wide input into these decisions.

Description of the Planning Process

The planning process that resulted in this 4-year planning document began with a data analysis by the members of the Quay County MCCH Council. All data relevant to the health and well-being of Quay County residents was gathered by the Coordinator and presented to the Council membership for input and analysis. The epidemiological data was made available by Federal and New Mexico agencies responsible for providing this information to the public. Various national and state advocacy groups made analysis of some of this data available. In addition to analyzing this secondary data, the MCCH Council membership evaluated the community assets and risk factors based upon their individual and group knowledge of Quay County communities.

Once this secondary data was gathered and analyzed, it was used to produce a survey document that not only informed the public about the major issues facing Quay County residents, but also sought the public's input in the process of setting the priorities delineated within this document. 1,000 surveys were distributed throughout Quay County through public places, group presentations, and personal delivery to those requesting such. 408 surveys were completed and compiled by MCH staff. The survey report was presented to the Quay County MCCH Council at a public meeting on January 27, 2009. At that meeting, the Council set four 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*

During February 2009, MCCH Council committees met to do the specific planning for each priority. These committees (Fitness & Nutrition, Substance Abuse, Teen Pregnancy, and Suicide Prevention) utilized the Problem Analysis process to determine Community Risk Factors and Consequences to assure that planned interventions reached the risk factors with the most impact on the community. In addition, each committee was responsible for the development of evidence-based strategies that were appropriate for Quay County communities. Appropriateness of these strategies required consideration of community resources, including community will and political climate. Each committee's portion of this Plan was presented to the Council at a public meeting on April 26, 2009. During that meeting, the Council membership approved of all components of this planning document.

The Quay County Community Improvement Plan 2010 – 2014 is the result of this effort. The Quay County MCCH Council believes it has met the goals of being thorough and inclusive in the development of this plan. All are invited to join the Council and its partners in addressing the priorities that this document outlines.

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.

Community Health Assessment Summary

| | Snapshot of Quay County | Implications |
|-----------------------------|--|--|
| Substance Abuse | <p>#1 in NM in estimated injectable drug use</p> <p>#1 in NM adult binge drinking</p> <p>#2 in NM adult heavy/ chronic drinking</p> <p>Youth drinking higher than NM and US; 33% before 13 yrs.</p> <p>15% youth smoke marijuana; 13% before 13 yrs.</p> <p>12% youth use painkillers & 7% use inhalants</p> <p>Tobacco: 28% youth are smokers (24% NM & 20% US)</p> <p>25% Quay Co youth begin before age 13 (NM 18%)</p> | <p><u>Hepatitis</u></p> <p><u>Violence</u></p> <p><u>Liver disease</u></p> <p><u>Respiratory Disease</u>: 3rd cause of death</p> <p><u>Asthma</u></p> |
| Suicide | <p>#2 in New Mexico for adult depression.</p> <p>24% high school youth depressed (<u>down from 29%</u>)</p> <p>10% attempted suicide (<u>down from 15%</u>)</p> <p>Mental health professional shortage area</p> | <p>Quay Co <u>suicide death</u> rates higher than NM & US</p> |
| Violence | <p># 2 in NM for reported Domestic Violence incidents</p> <p>50% of child abuse/neglect reports were substantiated (NM 25%)</p> <p>Quay Co high school dating violence higher than NM</p> <p>7% of high school students skipped school due to fear</p> | <p>Violence deeply affects child witnesses</p> <p><u>Bullying</u> often a culprit in depression</p> |
| Obesity | <p>31% of high school students obese or overweight (NM 24%)</p> <p>60% adults overweight or obese</p> <p><u>2nd in NM</u> for adult obesity (2004-2005) with 30.9% of Quay Co adults considered obese (NM 22%)</p> | <p>Leading causes of death: <u>Heart disease & cancer</u> rates higher than NM</p> <p><u>Diabetes death rate</u> 2x US and 30% higher than NM</p> <p><u>Arthritis</u> in adults higher than NM</p> |
| Health Care | <p>24% of Quay County residents have no health insurance coverage</p> <p>Transportation, esp. to out-of-town specialists.</p> <p>Identified shortage area: Primary Health Care, Health Care, Mental Health, & Dental Professional</p> | <p>Age-adjusted <u>death rate</u> higher than NM</p> |
| Mothers & Babies | <p><u>Increased</u> birth weight. Decreased low birth weight; less than NM</p> <p><u>Decreased</u> 1st Trimester prenatal care: 68% (71% NM and 84% US).</p> <p><u>Increasing</u> teen births</p> <p>50% of Quay Co high school youth have had sexual intercourse (NM 46%)</p> <p>34% of high school students currently sexually active (NM 31%)</p> | <p>Risk for <u>obesity</u></p> <p><u>Birth outcomes</u>, including infant mortality</p> <p>Risk to <u>family well-being</u></p> |

INCOME:

- Average weekly (2nd qtr. 2008) \$493.00 Quay Co; \$715.00 NM; \$690.00 Eastern NM
- Unemployment: (Nov 2008): 4.3% Quay Co; 3% Eastern NM
- Kid Poverty rate (2004): Quay Co. 20%; NM 17%
- Median Household Income \$24779.00 Quay Co; \$37838.00 NM

DEATHS:

For all residents:

1. Heart disease < NM
2. Cancer > NM
3. Chronic Lower Respiratory (2 x NM)
4. Accidents = NM
5. Cerebrovascular Disease < NM
6. Chronic Liver/Cirrhosis > NM

Male:

1. Cancer > NM
2. Heart disease < NM
3. Chronic respiratory 2 x NM & US
4. Accidents > NM
5. Cerebrovascular 2 x NM

Female:

1. Heart disease > NM
2. Cancer < NM
3. Respiratory > NM
4. Accidents < NM
5. Influenza/Pneumonia > NM

During January 2009, the Council conducted a community survey to ascertain the community’s ideas regarding the most critical community health issues. 1000 surveys were distributed with accompanying media to be sure that all residents had the opportunity to participate. 41% of the surveys were returned, which provided the Council with an excellent input in its decision-making around community health priorities. The community ranked the following community health issues:

- | | |
|--|-----------------------------|
| 1. Obesity and obesity-related disorders, 63% | 4. Allergies and asthma, 8% |
| 2. Substance abuse, 40% | 5. Depression, 7% |
| 3. Issues related to mothers and babies, including teen births, STDs, prenatal care, 25% | 6. Domestic violence, 6% |

Areas around health care access were included in survey responses:

- Lack of specialty care was cited by 31% of respondents
- Need for more doctors and more up-to-date care and equipment, 25%
- Drug & alcohol rehab & prevention, 17%
- Mental health services, 16%
- More affordable services, including pharmacy and dental (12%)

PRIORITY AREAS

As a result of this yearlong assessment and planning, the Quay County MCCH Council presents the following Council priorities chosen at a regularly scheduled, publicly advertised monthly Council meeting and established using the information documented herein.

1. **Obesity Prevention & Access to Services:** Obesity and related illnesses were identified by community survey as the most critical issue facing Quay County residents. High death rates from diabetes, heart disease, and cancer are all related to this priority. Quay County is the 15th highest county in New Mexico for diabetes-related deaths. In the recent Presbyterian Health Services “Gift to the Community” Diabetes Assessment, the primary issues facing those with diabetes and their families are: cost of care (including supplies), lack of affordable insurance, lack of affordable and healthy food, and lack of diabetes education.
2. **Substance Abuse Prevention & Access to Treatment:** Based upon review of relevant data, input from the communities, and the Council membership’s belief that substance abuse is pervasive in Quay County and affects ALL the other priorities negatively; substance abuse prevention and access to treatment are critical issues. Substance use by both adults and youth are higher than New Mexico. In fact, Quay County adults rank highly within the state in binge drinking (1st) and chronic heavy drinking (2nd). Quay County ranked with Rio Arriba County in 2006 for highest estimated rates of injection drug users in New Mexico.
3. **Teen Pregnancy Prevention & Access to Education & Services:** Progress has been made in the area of teen pregnancy in Quay County. However, as with the national rates, Quay County’s birth to teen rate is climbing. In looking at community assets around this issue, the Council determined that students are not getting enough information to make appropriate decisions and to adequately protect themselves from serious disease and consequences. In addition, access to health services is challenging to young people. The Council membership feels that this is an area where community efforts must be maintained in order to assure our children the best future.
4. **Suicide Prevention & Access to Mental Health Services:** The work of the MCCH Council within the schools in providing the evidence-based “Signs of Suicide” program to students and teachers has shown a positive trend (according to the Youth Risk & Resiliency Survey 2007) in the number of students who are depressed, are experiencing suicide ideation, have a suicide plan, or attempt suicide. The MCCH Council believes this success requires continued effort. In addition, bullying is an issue closely related to depression and requires continued work in partnership with Quay County schools.

COMMUNITY ACTION PLAN

Health Priority: **OBESITY PREVENTION & ACCESS TO SERVICES**

| <u>Goals</u> (Generally 4 yrs.) | <u>Objectives</u> (Usually 1 yr. Timed & measurable) | <u>Community Partners/Resources</u> | <u>Health Status Outcomes/Indicators</u> |
|---|---|---|---|
| Goal 1: Increase community opportunity for physical activity. | <p><u>Objective 1.1:</u> Work with community partners to co-sponsor annual community fitness events by June 2010.</p> <p><u>Objective 1.2:</u> Work with community partners to provide fitness program to 3 community groups by June 2010.</p> | <p>Mesalands Community College Quay Co. Extension Office City of Tucumcari New Mexico State University</p> | <p>Obesity-related morbidity and mortality data.</p> <p>Senior Fitness Test</p> |
| Goal 2: Increase community access to accurate nutrition and fitness information. | <p><u>Objective 2.1:</u> Work with community partners to continue provision of nutrition & fitness curriculum to Tucumcari Elementary students by June 2010.</p> <p><u>Objective 2.2:</u> Develop and implement community media campaign through June 2010.</p> | <p>Mesalands Community College Quay Co. Extension Office Quay County SUN Quay Broadcasters, Inc. Tucumcari Public Schools</p> | <p>YRRS nutrition & fitness-related data School BMI data</p> <p>Obesity-related morbidity and mortality data.</p> |
| Goal 3: Improve access to obesity-related health care system. | <p><u>Objective 3.1:</u> Work with community partners and consumers to improve access to the health care system (identify barriers to access to medical and specialty care and gaps in community services) for obesity-related illnesses with improvement implemented by June 2010.</p> <p><u>Objective 3.2:</u> Develop mechanism for ongoing monitoring of policies related to obesity reduction and prevention by June 2010.</p> | <p>Medical providers Health care consumers Presbyterian Health Services Foundation</p> | <p>Obesity-related morbidity and mortality data</p> <p>Ongoing system monitoring and evaluation</p> |

Health Priority: **SUBSTANCE ABUSE PREVENTION & ACCESS TO TREATMENT**

| <p>Goals (Generally 4 yrs.)</p> | <p>Objectives (Usually 1 yr. Timed & measurable)</p> | <p>Community Partners/Resources</p> | <p>Health Status Outcomes/Indicators</p> |
|--|---|---|---|
| <p>Goal 1: Decrease risk factors for underage drinking among Quay County youth.</p> | <p>Objective 1.1: Increase underage drinking law enforcement by June 2010. Objective 1.2: Increase Substance Abuse Committee membership by 2 members by June 2010. Objective 1.3: Increase community awareness of the implications of underage drinking by June 2010. Objective 1.4: Working with community partners, increase effectiveness of law enforcement system in addressing underage drinking by June 2010.</p> | <p>NM Children Youth & Families Dept., TeamBuilders Counseling Services, local law enforcement agencies, Mothers Against Drunk Driving, Quay Broadcasters, Freedom Newspapers.</p> | <p>YRRS Data related to consumption of alcohol Citations and outcomes local study</p> |
| <p>Goal 2: Strengthen regional and local substance abuse treatment system.</p> | <p>Objective 2.1: Partner with 8 counties to provide inpatient substance abuse treatment in Eastern New Mexico by June 2010. Objective 2.2: Working with community partners, increase opportunity for local treatment aftercare by June 2010</p> | <p>Curry, Roosevelt, De Baca, Quay, Harding, Union, Guadalupe, and San Miguel Counties, Dept of Health, ValueOptions, Health & Human Services Department, NM State Legislature.</p> | <p>Inpatient data Outpatient data from local providers</p> |

Health Priority: **TEEN PREGNANCY PREVENTION & ACCESS TO EDUCATION & SERVICES**

| <u>Goals</u> (Generally 4 yrs.) | <u>Objectives</u> (Usually 1 yr. Timed & measurable) | <u>Community Partners/Resources</u> | <u>Health Status</u> <u>Outcomes/Indicators</u> |
|---|---|---|---|
| Goal 1: Decrease risk behaviors that can lead to teen pregnancy and/or STDs. | <u>Objective 1.1: Advocate for improved school-based comprehensive health education to begin by Aug 2011.</u> | School nurses in four school districts, students, Department of Health, School Boards | YRRS data related to risky sexual behavior. Births to teens data STD data |
| Goal 2: Increase community involvement in teen health planning. | <u>Objective 2.1: Increase committee membership by 100% by June 2010.</u> | Mesalands Community College, Presbyterian Medical Services, students (high school and middle school), civic organizations, parents. | Committee roster and minutes. |
| Goal 3: Increase teen access to health care system. | <u>Objective 3.1: Work with community partners to analyze current teen health care system using the System Change Approach by June 2010.</u> | Medical providers, clinics, students. | Written report of the results of the current teen health care system analysis. |

Health Priority: **SUICIDE PREVENTION & ACCESS TO MENTAL HEALTH SERVICES**

| <u>Goals</u> (Generally 4 yrs.) | <u>Objectives</u> (Usually 1 yr. <u>Timed & measurable)</u> | <u>Community Partners/Resources</u> | <u>Health Status</u> <u>Outcomes/Indicators</u> |
|--|--|--|--|
| Goal 1: Decrease risk factors for youth suicide in Quay County. | <u>Objective 1.1: Work with community partners to continue to provide school-based suicide prevention programs by June 2010.</u> | New Mexico State University Tucumcari Public Schools San Jon Public Schools Altrusa International of Tucumcari Elks Club | YRRS Data related to depression, suicide ideation, suicide plan, and suicide attempts. |
| Goal 2: Assure appropriate response to behavioral health emergencies. | <u>Objective 2.1: Work with community partners to assure continuation of analysis and implementation of agreed-upon protocols by June 2010.</u> | New Mexico State Police, New Mexico Transportation Dept., Logan Police Department, Quay County Sheriff's Office, Tucumcari Police Department, Dan Trigg Memorial Hospital, Mental Health Resources, Mesalands Counseling, MCH-funded school-based services, TeamBuilders Counseling Services, Las Vegas Hospital, Pyramid, | Protocol objectives |