

Williamson County, Texas

2009 ACHIEVE Community

Our Vision

- Williamson County is known for its role in providing a superior quality of life for its citizens.



Our Vision

- The heritage and values of our citizens are the basis of the strong sense of community that makes Williamson the most desirable county in which to live in the nation.



Historic Williamson

- The County has a lively history including Comanche, Apache and Tonkawa Indians, outlaws, Texas Rangers, the Chisholm Trail, cowboys and pioneers.



Immigration

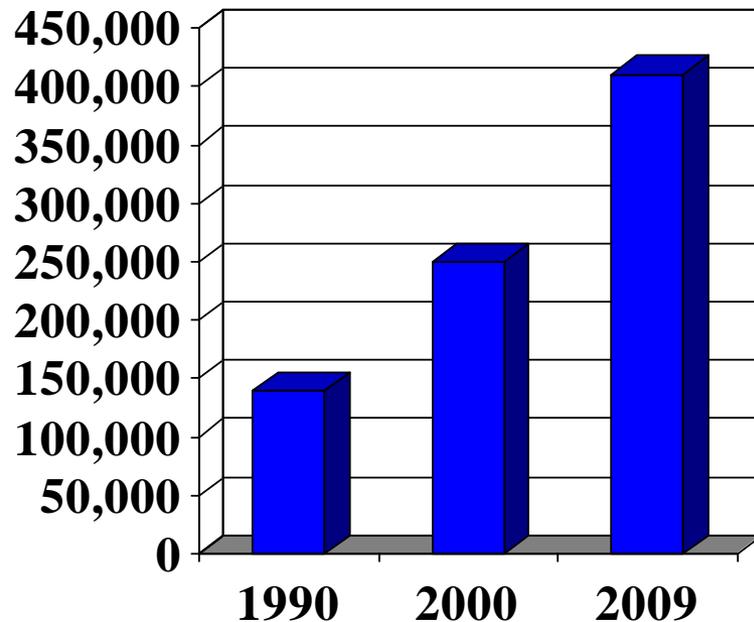
- 1880s came influx of Scandinavians, Germans, Czechs, and Austrians
- Mexican immigrants were 11% of the population in 1930 as well as in 1980



Cotton and Cattle

- The County is divided by IH-35 in more ways than one.
 - East side: Blackland Prairie is perfect soil for cotton. Grown on 73% of cropland in 1930. Ginned most cotton of any county in Texas except Ellis.
 - West side: Rugged Hill Country terrain is ranching country – cattle, sheep.

Who We Were, Who We Are Now



■ Total Population

- Second fastest growing county in Texas
- 9th fastest growing county in the U.S.
- 64.3% increase from 2000 to 2009

Community Snapshot

- Largest Employers
 - Three Main School Districts (11,690)
 - Dell Computer Holdings (10,384)
 - HEB Grocery Company (2,935)
 - Wal-Mart (1,803)
 - Sears (Teleserve) (1,492)
 - Williamson County (1,490)
- Hospitals
 - Six in four major cities
- Higher Education
 - Six in four major cities

US Census	Williamson County, Texas (90% CI)
2009 Pop. Estimate	410,686
White	80.3% (79.7 - 80.9)
Black	6.1% (6.0 - 6.2)
American Indian/ Alaska Native	0.5% (0.4 - 0.6)
Asian	4.1% (4.0 - 4.2)
Native Hawaiian/ Pacific Islander	0.1% (0.0 - 0.2)
Multiracial	2.5% (2.2 - 2.8)
Hispanic	20.8% (-)
Non-Hispanic White	67.1% (67.0 - 67.2)
Under 18 years old	28.4% (-)
65 years old and over	8.7% (8.6 - 8.8)
English-only not spoken at home	19.0% (18.4 - 19.6)
Foreign born persons	10.1% (9.6 - 10.6)
Persons below poverty level	6.2% (5.6 - 6.8)

US Census	Georgetown, TX (90% CI)	Finney County, KS (90% CI)	Taylor, TX (90% CI)	Allen County, KS (90% CI)	Thomas County, KS (90% CI)
2009 Pop. Estimate	50,891	42,074	16,106	13,203	7,343
White	83.9% (81.2 - 86.6)	84.0% (81.5 - 86.5)	77.7% (72.9 - 82.5)	93.8% (93.3 - 94.3)	96.4% (94.5 - 98.3)
Black	3.1% (1.9 - 4.3)	1.2% (1.0 - 1.4)	8.8% (5.7 - 11.9)	1.7% (1.0 - 2.4)	0.8% (0.2 - 1.6)
American Indian/ Alaska Native	0.7% (0.2 - 1.2)	0.5% (0.2 - 0.8)	0.0% (0.0 - 0.1)	0.3% (0.0 - 0.5)	1.4% (0.0 - 3.0)
Asian	1.8% (1.0 - 2.6)	2.6% (2.3 - 2.9)	2.5% (0.0 - 5.3)	0.3% (0.0 - 0.6)	0.3% (0.0 - 0.7)
Native Hawaiian/ Pacific Islander	0.0% (0.0 - 0.1)	0.0% (0.0 - 0.1)	0.1% (0.0 - 0.2)	0.0% (0.0 - 0.2)	0.0% (0.0 - 0.4)
Multiracial	2.2% (1.4 - 3.0)	1.6% (1.0 - 2.2)	0.7% (0.0 - 1.5)	2.8% (2.0 - 3.6)	0.8% (0.1 - 1.5)
Hispanic	21.9% (19.6 - 24.2)	44.1% (-)	34.1% (30.0 - 38.2)	2.5% (-)	2.9% (-)
Non-Hispanic White	71.3% (68.5 - 74.1)	50.8% (50.7 - 50.9)	54.1% (48.9 - 59.3)	92.7% (92.6 - 92.8)	94.2% (92.5 - 95.9)
Under 18 years old	22.0% (20.7 - 22.0)	32.0% (-)	26.8% (24.0 - 29.6)	22.5% (21.9 - 23.1)	22.6% (21.8 - 23.4)
65 years old and over	23.0% (21.7 - 24.3)	7.4% (7.2 - 7.6)	15.1% (12.5 - 17.7)	17.8% (17.5 - 18.1)	15.9% (15.5 - 16.3)
English-only not spoken at home	17.5% (15.2 - 19.8)	38.3% (36.4 - 40.2)	29.3% (24.7 - 33.9)	1.3% (0.7 - 1.9)	4.0% (2.4 - 5.6)
Foreign born persons	10.2% (8.0 - 12.4)	20.4% (18.8 - 22.0)	10.9% (7.6 - 14.2)	0.4% (0.0 - 0.8)	2.7% (1.4 - 4.0)
Persons below poverty level	6.7% (4.0 - 8.7)	14.3% (11.9 - 16.7)	19.5% (13.9 - 25.1)	13.1% (10.4 - 15.8)	13.3% (9.0 - 17.6)

BRFSS 2009	Williamson County, Texas (95% CI)	Allen County, Kansas (95% CI)	Finney County, Kansas (95% CI)	Thomas County, Kansas* (95% CI)
Current Smokers	12.2% (8.3 - 17.5)	19.3% (8.1 - 30.6)	25.9% (16.0 - 35.8)	14.5% (8.4 - 20.6)
Current Smokeless Tobacco Users	4.4% (2.6 - 7.4)	7.8% (0.1 - 15.6)	5.3% (0.0 - 11.1)	12.3% (6.2 - 18.4)
Overweight or Obese	66.0% (60.4 - 71.1)	60.4% (45.8 - 75.1)	70.6% (61.2 - 80.0)	67.4% (59.8 - 75.1)
Current Asthma	9.6% (6.8 - 13.2)	2.2% (0.0 - 4.6)	18.3% (9.2 - 27.4)	8.3% (4.0 - 12.5)
Diagnosed Diabetes	5.5% (4.0 - 7.6)	8.5% (3.9 - 13.2)	6.7% (3.1 - 10.3)	8.8% (5.6 - 11.9)
Diagnosed High Blood Pressure	24.2% (20.3 - 28.5)	26.3% (16.8 - 35.8)	27.3% (17.8 - 36.7)	29.9% (23.5 - 36.4)
Consumes 5 or more Fruits or Vegetables per Day	25.6% (20.8 - 31.1)	13.4% (6.1 - 20.7)	23.4% (14.2 - 32.5)	18.5% (12.5 - 24.4)
Not Participating in Recommended Physical Activity	46.9% (41.3 - 52.7)	50.3% (35.7 - 64.9)	45.2% (34.5 - 56.0)	52.2% (43.9 - 60.5)

***Note: Thomas County, Kansas was included in the Northwest BT Region**

Williamson County, Texas

- Selected as 2009 ACHIEVE Community
 - 1 of 43 total funded communities
 - 1 of 13 funded by National Association of Chronic Disease Directors

- Staff:
 - Cynthia A. Guerrero, M.Ed. – Coach
 - Melissa Cole, MS, CHES – Coordinator
 - Community Coaches (appointed)
 - Director, Parks & Recreation Department
City of Georgetown
 - *A Taylor Community Coach is not appointed at this time*

ACHIEVE Communities

- Kansas

- Wichita (2008)

- Texas

- El Paso (2010)
- Harris County – Aldine/Houston (2008)
- Nacogdoches (2009)
- Williamson County (2009)



WilCo Wellness Alliance

An ACHIEVE Community Coalition

Local ACHIEVE Process

- Countywide approach
- Initial focus on one city/community
- Replicating ACHIEVE model in each city/community
 1. Coalition/capacity building
 2. Community assessment
 3. Identification of priority areas and initiatives/projects
 4. Formation of steering groups and identification of project leads
 5. Implementation and evaluation of initiatives/projects

Coalition/Capacity Building

- Start with existing:
 - Coalitions
 - Partnerships
 - Collaborations

- Equal representation across sectors:
 - Community at Large
 - Community Institution/Organization
 - Healthcare
 - School
 - Worksite

- Mix of membership:
 - High level, decision makers
 - Hard working, go getters

Georgetown Coalition

- Launched June 4, 2009
- Approximately 50 members
 - 20-30 regular attendees
- Representatives from:
 - City/County Governments
 - County/State Health Departments
 - Board of Health
 - Hospitals
 - Clinics
 - Federally Qualified Health Center
 - Universities
 - School District
 - Head Start Agency
 - Parks & Recreation
 - Cooperative Extension
 - Nonprofit Organizations (i.e., United Way, Habitat for Humanity)
 - Community Action Agency
 - Restaurants

Georgetown Coalition

■ Priority areas:

- Physical activity in older adults
- Nutrition in community
- Overall health/wellness in adults

■ Initiatives:

- Exercise is Medicine
- Por Vida/For Life
- Worksite Wellness

Exercise is Medicine

- *Priority area: physical activity in older adults*

- Criteria (for pilot project):
 - Adults
 - Diagnosed with type 2 diabetes
 - On 2 or more medications
 - Next step is to increase or add medication

- Intervention: Prescription for Exercise
 - Complete physical activity readiness questionnaire
 - Receive Rx for exercise and education from healthcare professional
 - Receive Get Fit Kit and education/training from fitness professional
 - Kit contains exercise materials, resources, and exercise log
 - Maintain regular follow up for 6 months

Exercise is Medicine

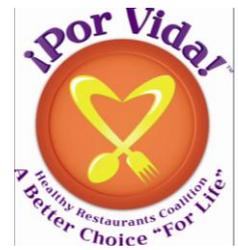


- Participating Clinics:
 - Federally Qualified Health Center
 - Private Physician Offices (2)

- Participating Fitness Professionals:
 - Parks & Recreation Department
 - Private Gym

- PSE Strategies
 - Policy: implement Exercise is Medicine on all diabetic patients
 - Systems: implement Exercise is Medicine in multi-location healthcare offices
 - Environmental: implement Rx and Get Fit Kit on consenting patients

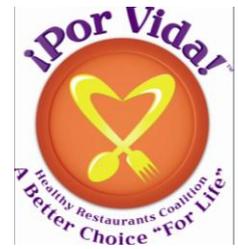
Por Vida/For Life



- *Priority area: nutrition in community*
- Adopted from the San Antonio Healthy Restaurants Coalition
- Criteria (adult entrée with sides):
 - ≤ 700 Total Calories
 - ≤ 23 g Total Fat
 - ≤ 8 g Saturated Fat
 - ≤ 0.5 g Trans-fat
 - ≤ 750 mg Sodium
 - No Fried Food

Note: Specific criteria exists for children's menu as well as adult single entrée item, side item, and beverages.

Por Vida/For Life



■ Intervention: Menu Labeling

- Submit menu item recipes for analysis (voluntary)
- Receive free nutritional counseling to alter recipes or create new ones
- Receive marketing items once at least 2 items are Por Vida approved

■ Participating Restaurants:

- Local restaurant

Note: Starting here and then recruiting from local restaurant coalition

■ PSE Strategies

- Policy: adopt Por Vida criteria for establishing menu items as healthy
- Systems: N/A
- Environmental: implement menu labeling and Por Vida restaurant identification (i.e., stickers, decals, table tents)

Worksite Wellness

- *Priority area: overall health/wellness in adults*

- Criteria
 - A minimum of 5 employees
 - Volunteers can be included

- Intervention: Worksite Wellness
 - Obtain support from management
 - Appoint a wellness coordinator
 - Conduct Worksite Wellness Interest Survey
 - Create a wellness committee
 - Develop an action and evaluation plan
 - Implement and evaluate activities
 - Develop and implement worksite wellness policies to support programs and activities
 - Evaluate annually

Worksite Wellness

- Participating Worksites:
 - Nonprofit Organization (small)
 - Community Action Agency (medium)
 - School District (large)
- PSE Strategies:
 - Policy: implement a worksite wellness policy in the worksite
 - Systems: implement worksite wellness in multi-location employer offices
 - Environmental: develop worksite wellness toolkit for employers

East Williamson County Coalition

- Launched January 20, 2011
- Approximately 20 members
- Representatives from:
 - City Government
 - County/State Health Departments
 - Board of Health
 - Hospitals
 - Clinics
 - Federally Qualified Health Center
 - School District
 - Head Start Agency
 - Cooperative Extension
 - Nonprofit Organizations (i.e., United Way)
 - Community Action Agency
 - Restaurants
 - Church

Short-Term Accomplishments

- Increased understanding of PSE change strategies
- Increased education/advocacy among decision makers
- Increased collaboration among key agencies or institutions
- Increased coordinating among ACHIEVE and other community work
- New leaders/acts of leadership emerged
- New resources obtained
- Increased community capacity

Long-Term Accomplishments

- Strong tobacco ordinance in City of Georgetown and Williamson County (government buildings)
- Formation of worksite wellness committees in some organizations (community institutions/organizations, schools)
- Increased referral base of patient resources (healthcare)
- Tobacco Cessation Survey (through local health department)
- Tobacco Cessation Program (through local health department)
- Preparing to launch Exercise is Medicine, Por Vida/For Life, and Worksite Wellness in early 2011
- Coalition serves as flagship for Community Health Improvement Process and Plan

Challenges (and how to deal with them!)

- Maintaining membership
 - We hold coalition meetings often in the beginning and then twice per year; steering groups meet approximately once per month
 - Maintain communication via phone, email, and SharePoint (website)
- Staffing shortage
 - Apply for funding!
- Data
 - Work with epidemiology and research specialist to analyze, interns and volunteers to gather (reduces burden on coalition staff time)

Preparations for Future Funding

- PSE-related Projects
 - Chronic Disease in the Community
 - National Association of Chronic Disease Directors/ACHIEVE
 - Obesity Prevention in Schools (pending)
 - Michael and Susan Dell Foundation and St. David's Foundation

Preparations for Future Funding

- Health Education Projects
 - Childhood Obesity and Weight Management
 - Dell Foundation, St. David's Foundation, American Academy of Pediatrics, Build a Bear Foundation
 - Chronic Disease Case Management
 - Texas Department of State Health Services
 - Tobacco Cessation
 - Williamson County
 - Child Injury Prevention
 - Texas Department of State Health Services
- Case Management Projects
 - Prenatal Services
 - Texas Department of State Health Services
 - Child Services
 - Texas Department of State Health Services

Questions?

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