

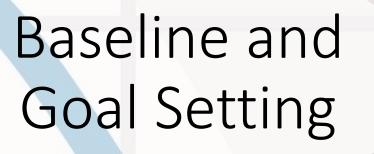
# Healthy Montgomery 2023 Goal Setting











• U.S. baseline: 2005-2008; HP 2020

MD baseline: 2013 MD; MD SHIP 2017

• MoCo baseline: 2016-2017; HM 2023

# Methods – HP 2020 Example

Target-Setting Method	Number of Objectives	% of Total	Targets Met	% of Targets Met
10 percent improvement	576	62.2%	210	36.5%
Specific percentage point improvement	26	2.8%	8	30.8%
Maintain the baseline value	13	1.4%	4	30.8%
Minimal statistical significance	50	5.4%	12	24.0%
Projection/trend analysis	78	8.4%	17	21.8%
Consistency with national programs,				
regulations, policies, and laws	80	8.6%	17	21.3%
Retention of Healthy People 2010 target	10	1.1%	2	20.0%
Total coverage/elimination	83	9.0%	5	6.0%
Modeling	10	1.1%	0	0.0%
Total	926	100%	275	29.7%

# Methods – MD SHIP Example

	Measure	2013	Proposed 2017 Goal	Target Setting Method (2013 data used as baseline for target calculations
1.	Reduce infant mortality	6.6	6.3	5% improvement to hit HP 2020 target
2.	Reduce the percent of low birth weight births	8.5	8.0	6% improvement=1/2 of 2020 target
3.	Reduce rate of sudden unexpected infant deaths (SUIDs)**	0.90	0.86	5% improvement to hit HP 2020 target
4.	Reduce the teen birth rate (ages 15-19)	19.3	17.8	60% of previous improvement
5.	Increase the % of pregnancies starting care in the 1 <sup>st</sup> trimester	61.9	66.9	8% improvement
6.	Increase the proportion of children who receive blood lead screenings	66.2	69.5	5% improvement
7.	Increase the % entering kindergarten ready to learn***	83.0	85.5	3% improvement
8.	Increase the %of students who graduate high school***	86.4	88.6	2.5% improvement (modest since we are above
9.	Increase the % of adults who are physically active	48.0	50.4	5% improvement
10.	Increase the % of adults who are at a healthy weight	35.9	36.6	2.5% improvement
11.	Reduce the % of children who are considered obese (high school only)	11.0	10.7	2.5% improvement
12.	Reduce the % of adults who are current smokers	16.3	15.5	5% improvement
13.	Reduce the % of youths using any kind of tobacco product (high school only)	16.9	15.2	10% improvement

## Methods

## Criteria for goal setting

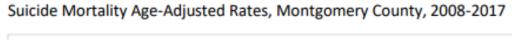
- Comparison with HP2020 and MD SHIP 2017
- Magnitude of differences
- Trends over time
- Feasibility of changes
- Ongoing and continuing surveillance and evaluation

## Methods

• Did we reach the goals of HP2020 and MD SHIP?

Measure	Montgomery County 2016 Rate	HP2020 Goal	Did MoCo Achieve this goal?	MD SHIP 2017 Goal	Did MoCo Achieve this goal?
Suicide Mortality	6.2 per 100,000 population	10.2 per 100,000 population	Yes	9.0 per 100,000 population	Yes

Measure	Montgomery County 2016 Rate	Montgomery County Trend 2008-16	HP2020 Goal	Did MoCo Achieve this goal?	MD SHIP 2017 Goal	Did MoCo Achieve this goal?	Method
Suicide Mortality	6.2 per 100,000 population	Fluctuating	10.2 per 100,000 population	Yes	9.0 per 100,000 population	Yes	2.5% Improvement



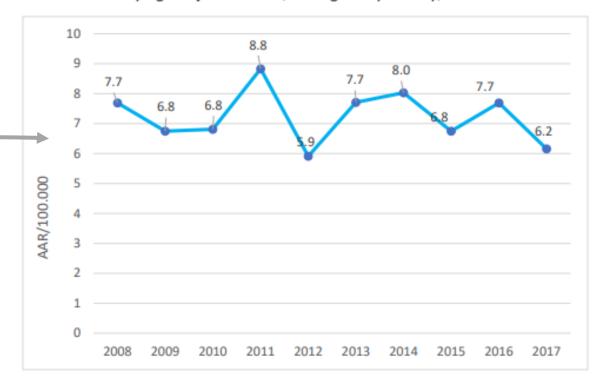


Table 1. Healthy Montgomery Core Measures by Topic Area

Maternal and Infant Health	Late/No Prenatal Care Infant Mortality Preterm Births	lı
	Preterm Births	11
Behavioral health	Mental Health Related ER Visit Suicide Mortality Drug-Induced Mortality Substance Abuse ER Visit	
Chronic Disease	Obesity: Adults who are Overweight or Obese Diabetes: Diabetes Mortality Diabetes ER Visit Cardiovascular health: Heart Disease Mortality Heart disease ER Visit High Blood Pressure Prevalence Chronic Lower Respiratory Disease ER Chro	•

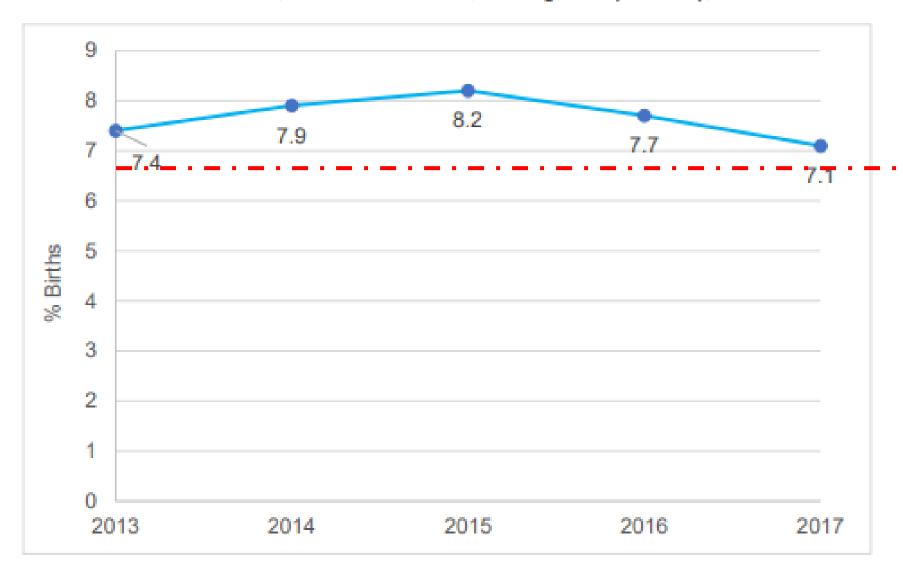
Infectious Disease

Incidence of TB
Incidence of Chlamydia
Incidence of Gonorrhea
Incidence of Syphilis
Incidence of HIV

Injury

Firearm Hospitalization Fall Mortality Fall Hospitalization Fall ER Visit Motor Vehicle ER Visit

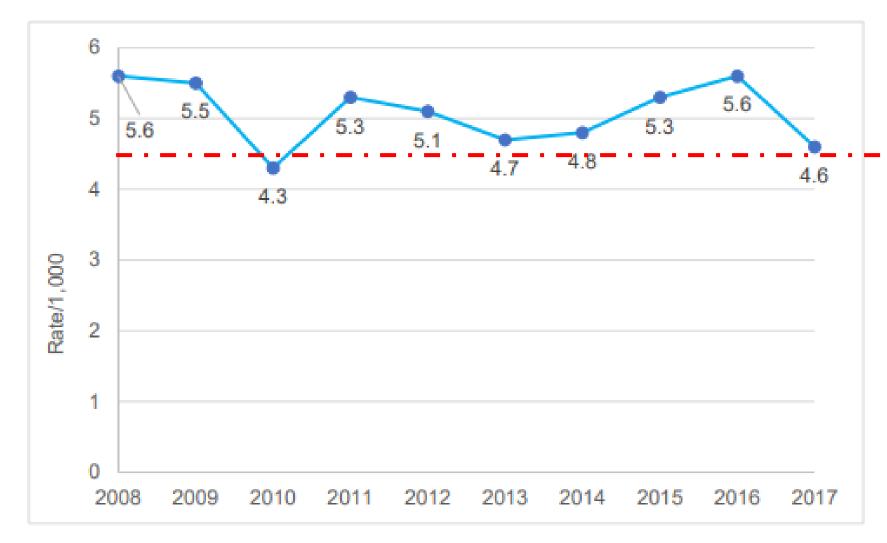
## Percent Births with Late/No Prenatal Care, Montgomery County, 2013-2017



<b>HM 2023 goal</b>	
6.7	

HP2020	MD SHIP 2017
22.1	33.1

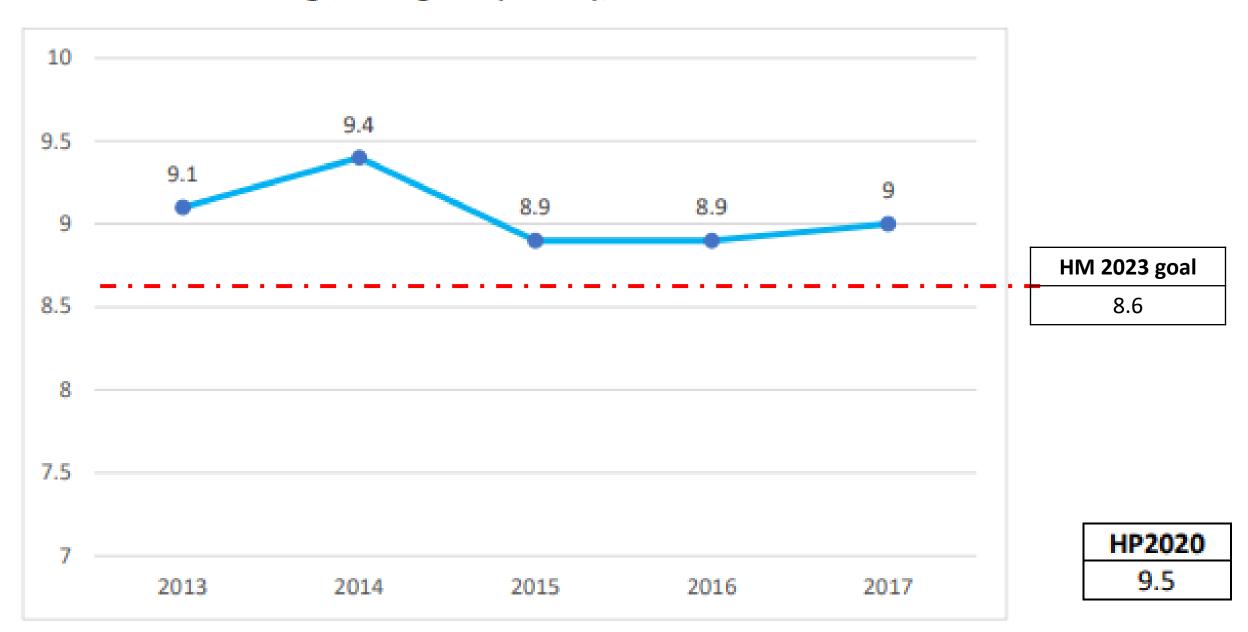
## Infant Mortality Rates, Montgomery County, 2008-2017



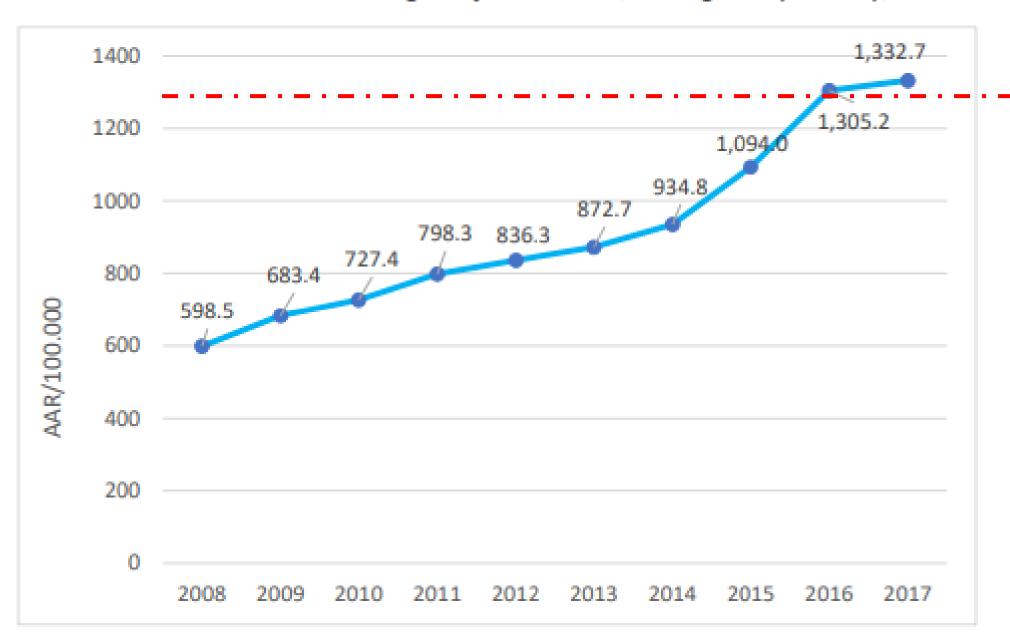
<b>HM 2023 goal</b>	
4.5	

HP2020	<b>MD SHIP 2017</b>
6.0	6.3

## Preterm Birth Percentage, Montgomery County, 2013-2017



## Mental Health Related ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017

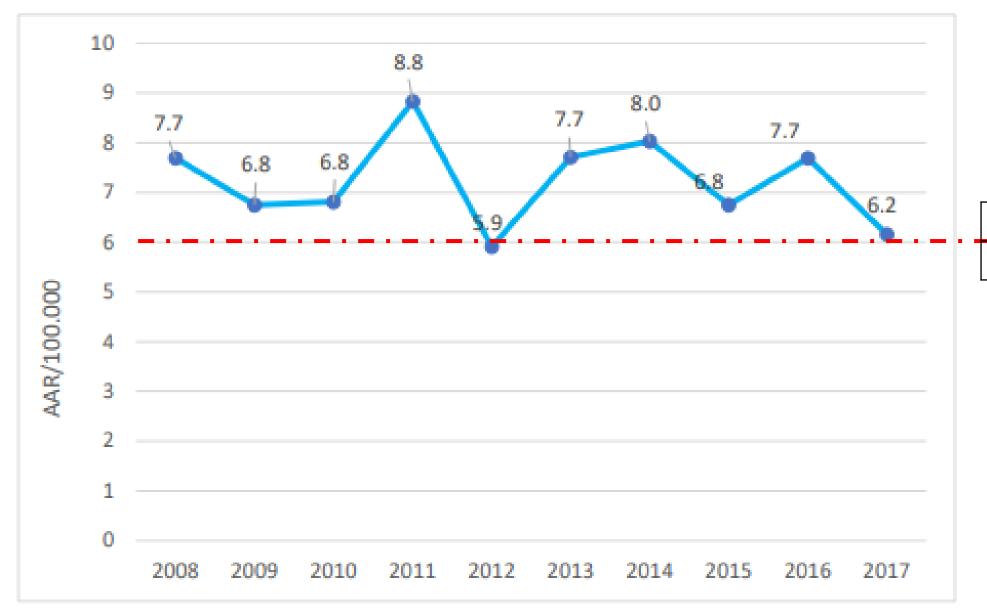


**HM 2023 goal** 1299.4

MD SHIP 2017

3,152.6

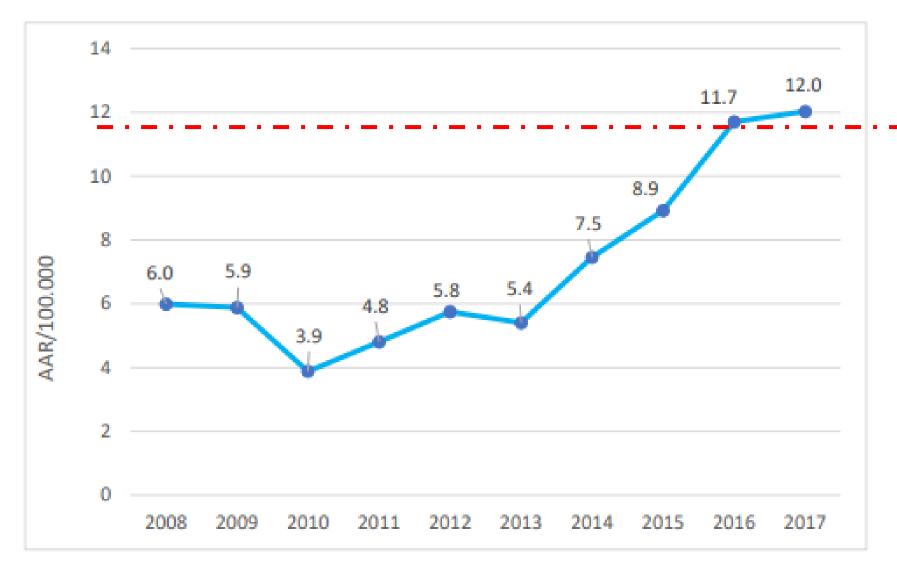
## Suicide Mortality Age-Adjusted Rates, Montgomery County, 2008-2017



НМ	<b>2023</b> goal	
	6.0	

HP2020	MD SHIP 2017
10.2	9.0

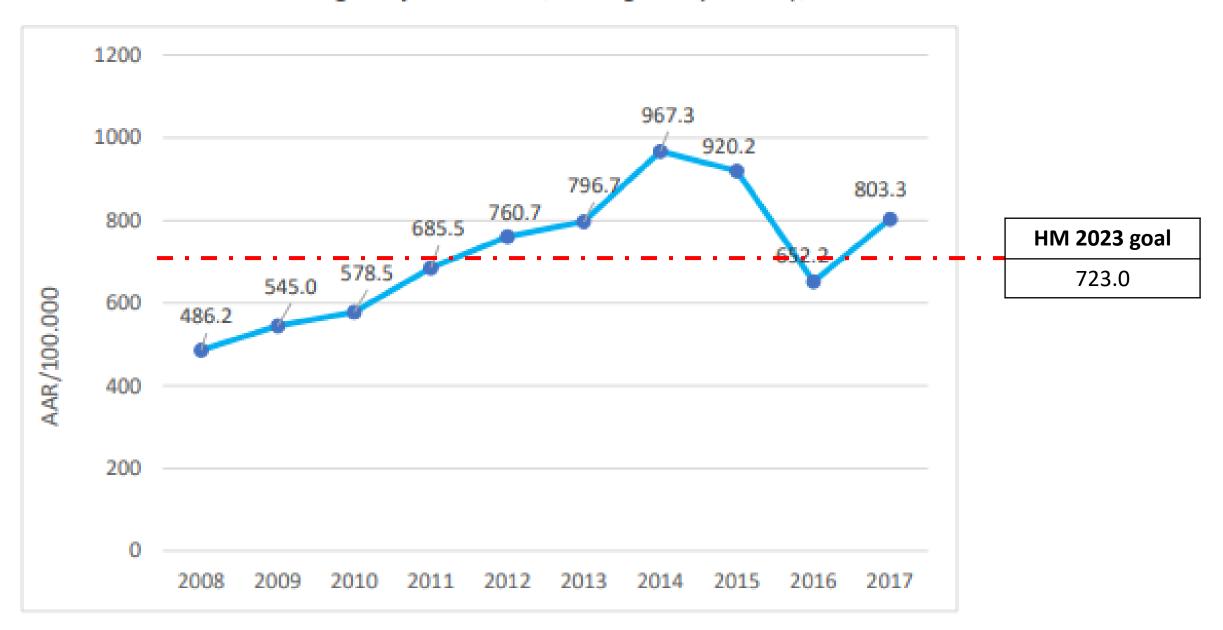
#### Drug-Induced Mortality Age-Adjusted Rates, Montgomery County, 2008-2017



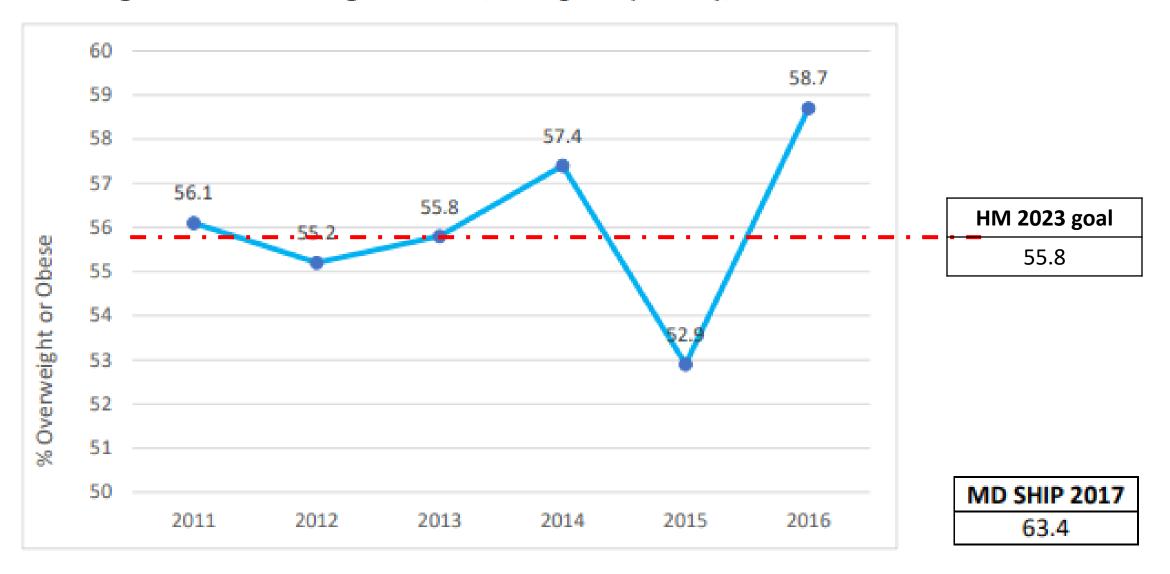
НМ	2023 goal	
	11 7	

HP2020	<b>MD SHIP 2017</b>
11.3	12.6

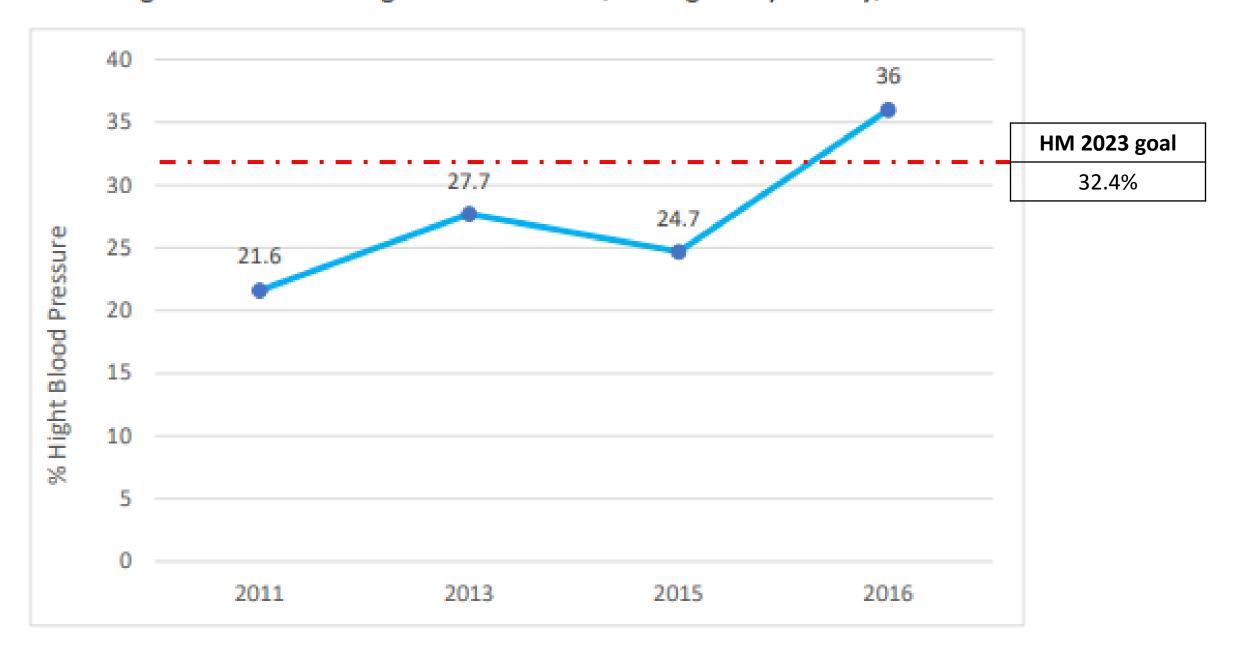
## Substance Abuse ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017



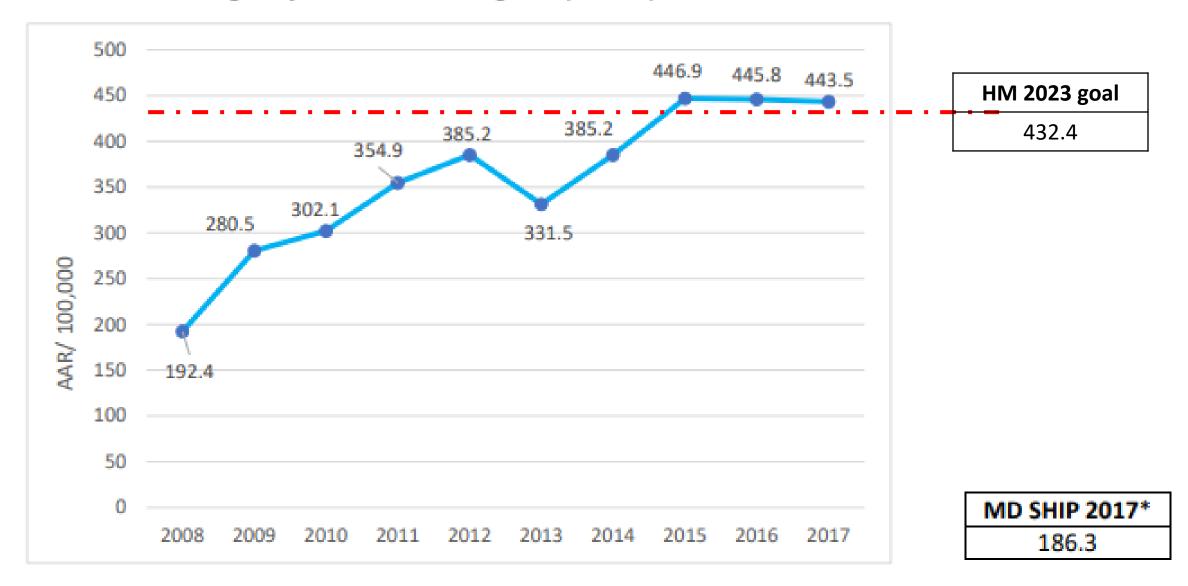
#### Percentage of Adults Overweight or Obese, Montgomery County, 2011-2016



## Percentage of Adults with High Blood Pressure, Montgomery County, 2011-2016

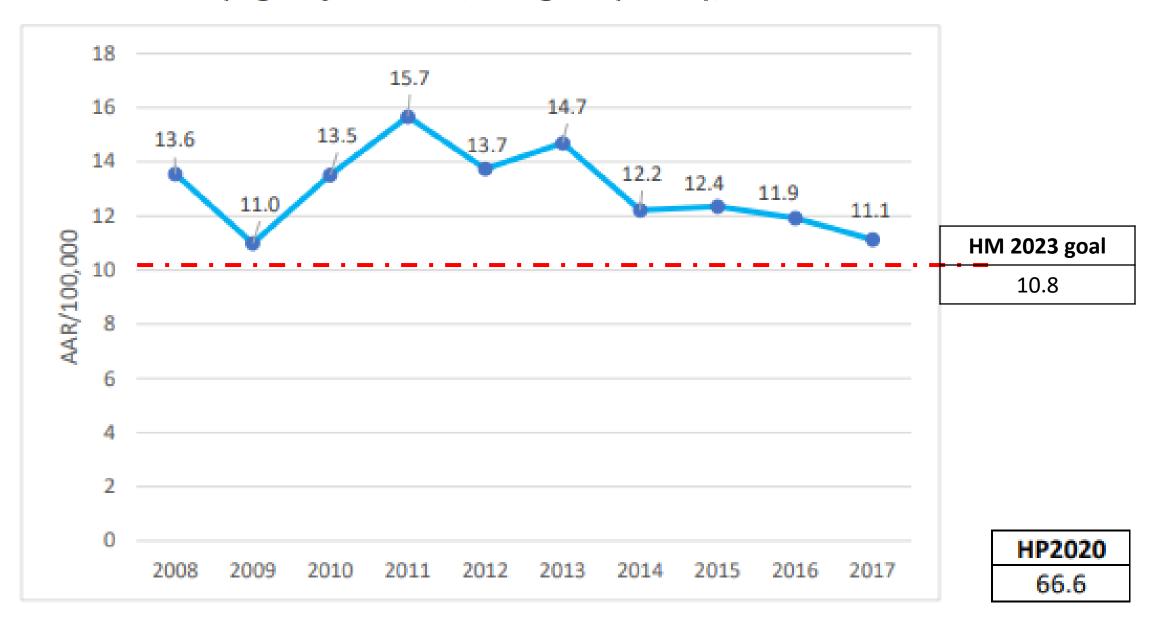


#### Diabetes ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017

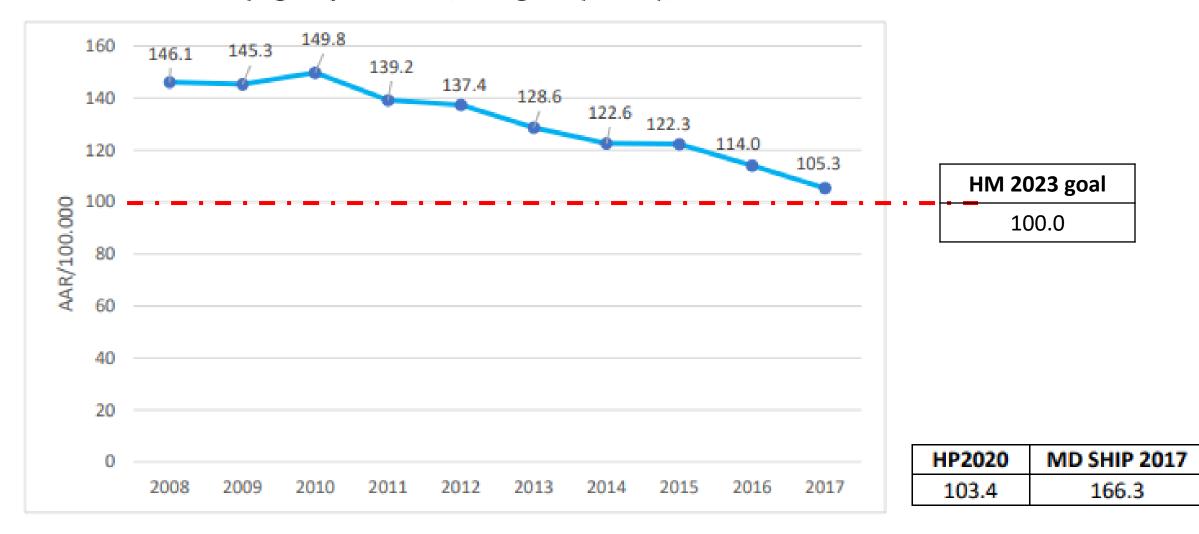


Different methodology may have been used.

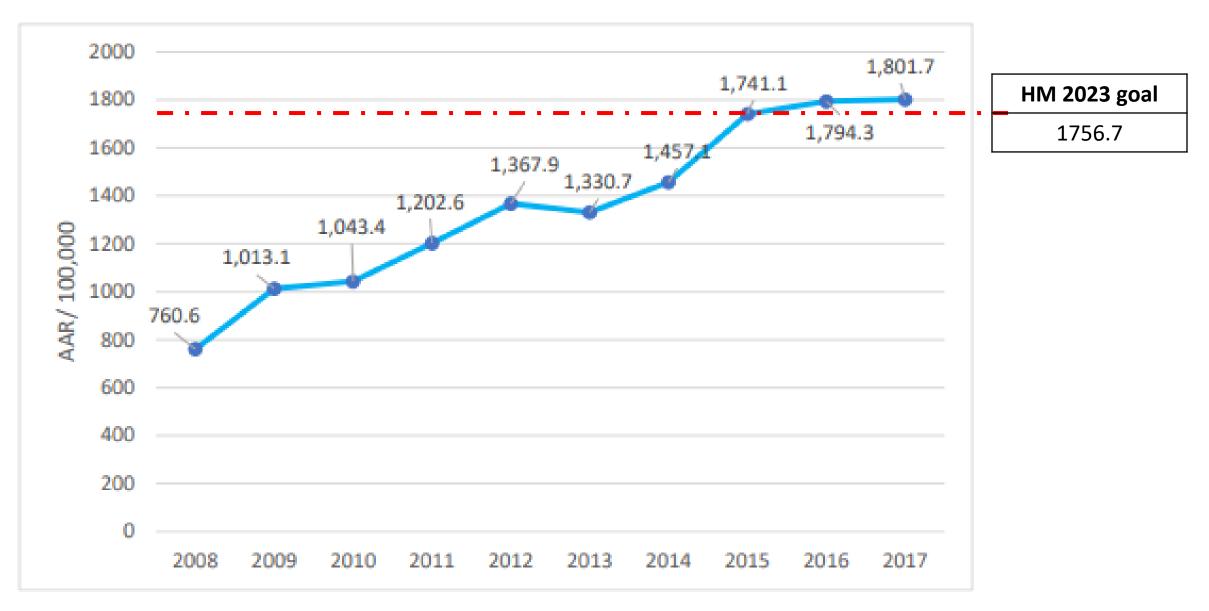
## Diabetes Mortality Age-Adjusted Rates, Montgomery County, 2008-2017



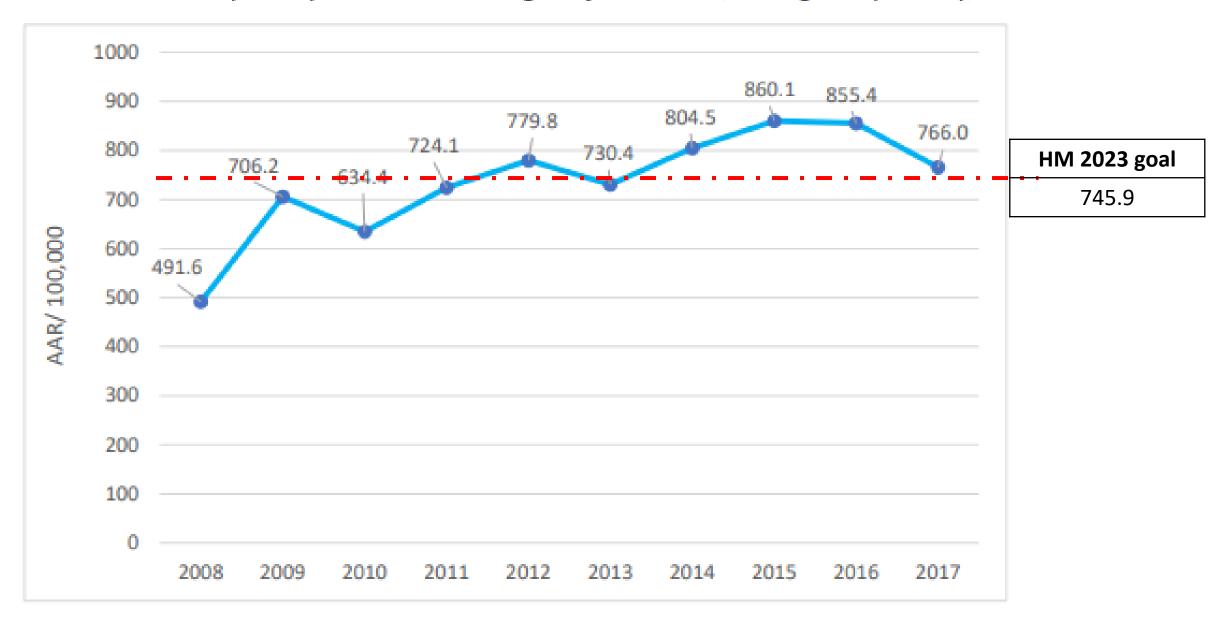
#### Heart Disease Mortality Age-Adjusted Rates, Montgomery County, 2008-2017



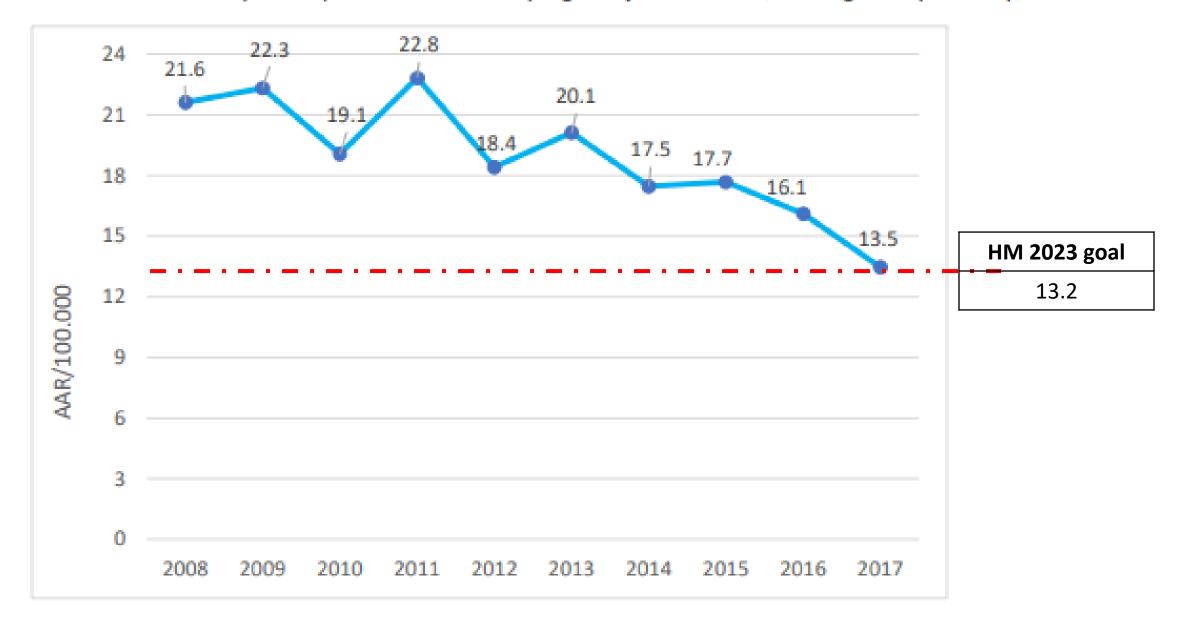
## Heart Disease ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017



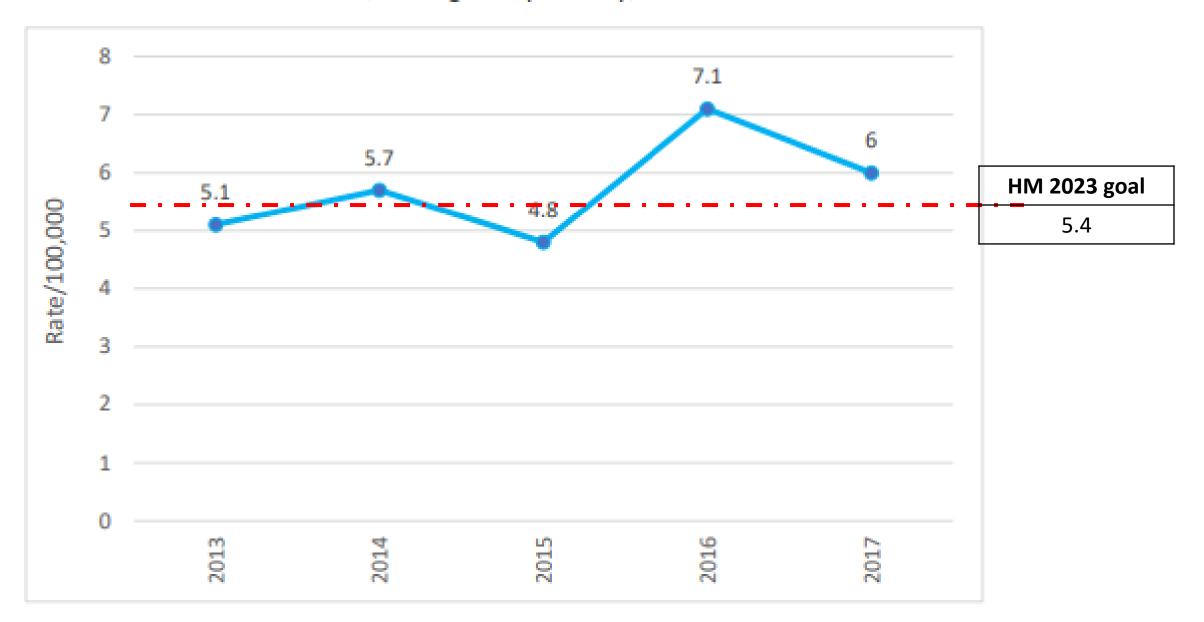
#### Chronic Lower Respiratory Disease ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017



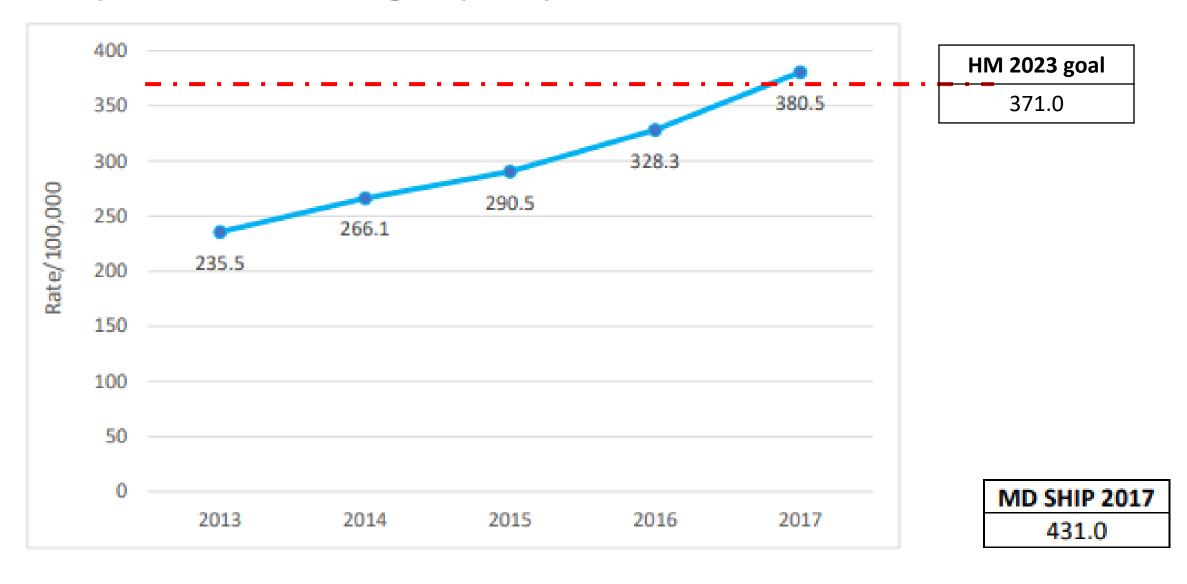
## Chronic Lower Respiratory Disease Mortality Age-Adjusted Rates, Montgomery County, 2008-2017



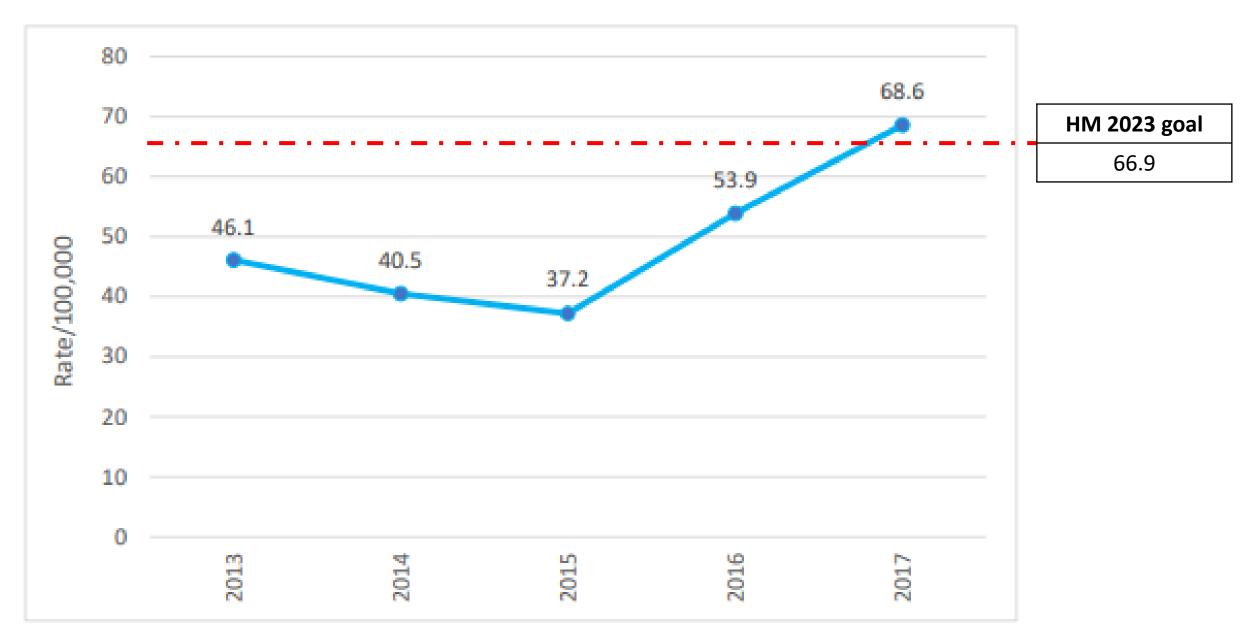
## Tuberculosis Incidence Rates, Montgomery County, 2013-2017



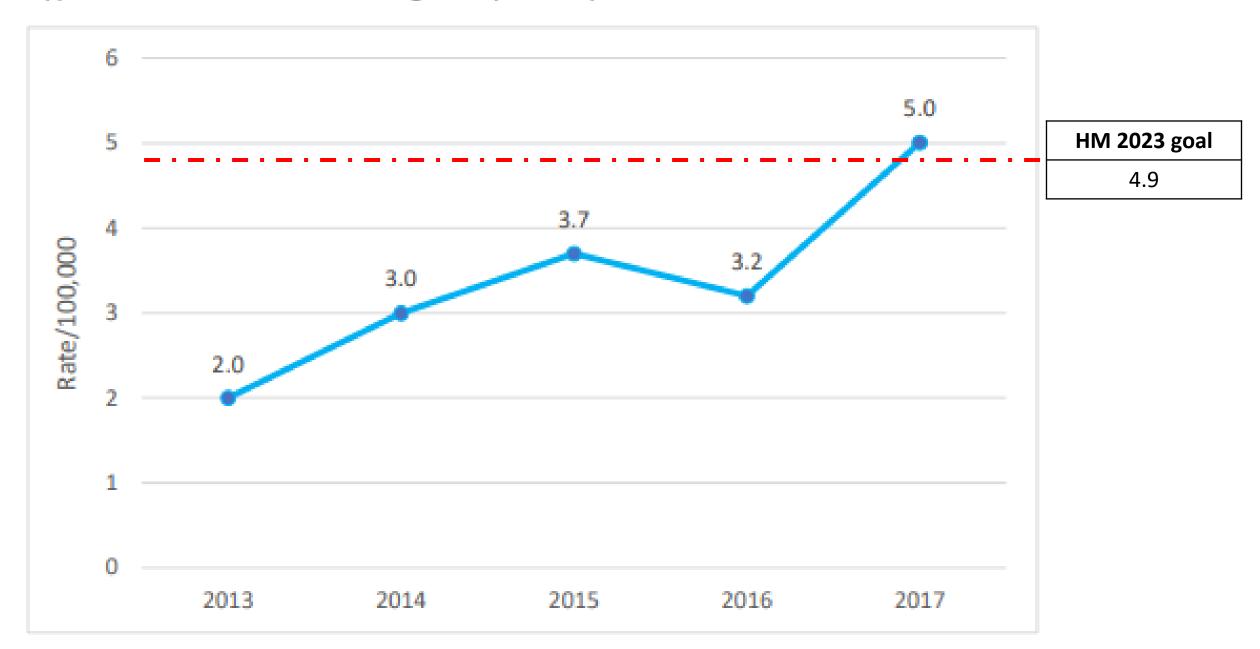
## Chlamydia Incidence Rates, Montgomery County, 2013-2017



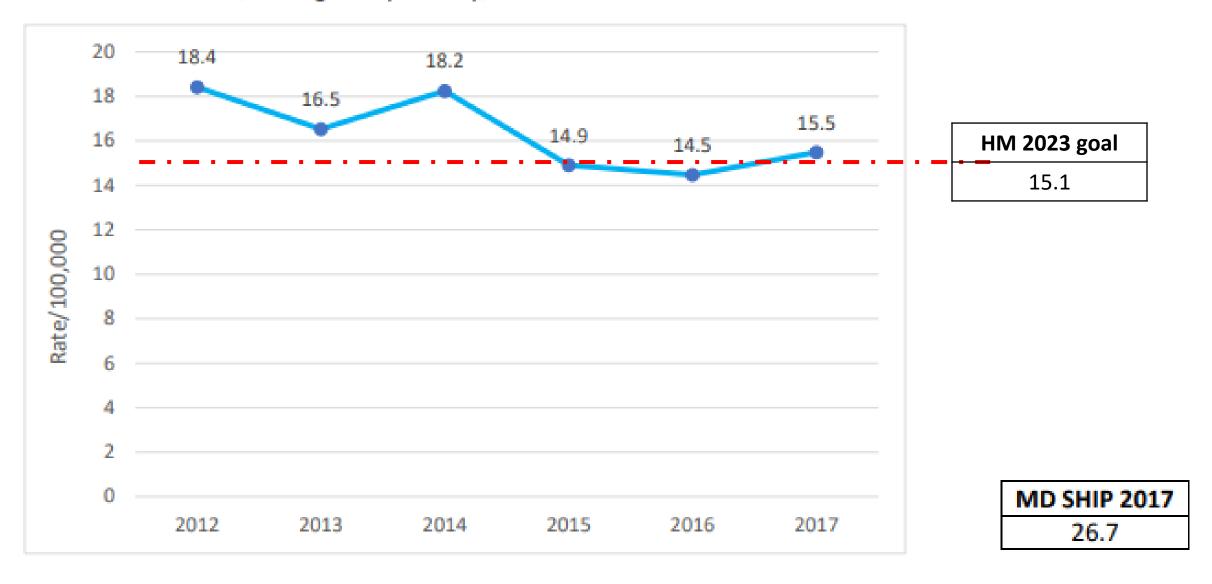
## Gonorrhea Incidence Rates, Montgomery County, 2013-2017



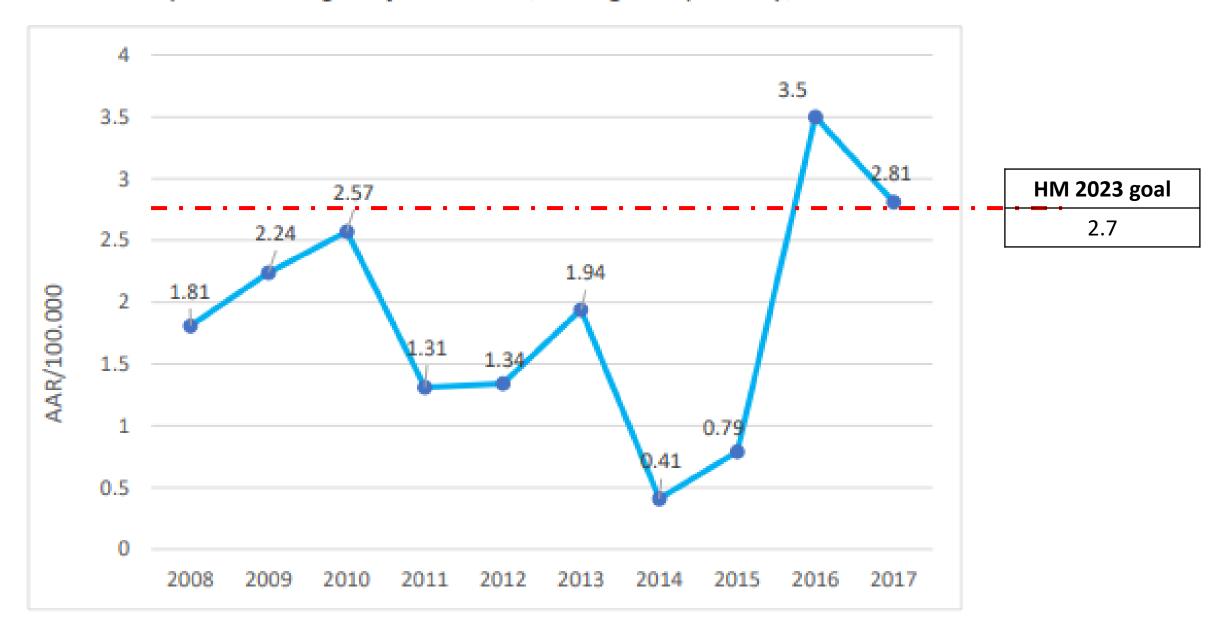
## Syphilis Incidence Rates, Montgomery County, 2012-2017



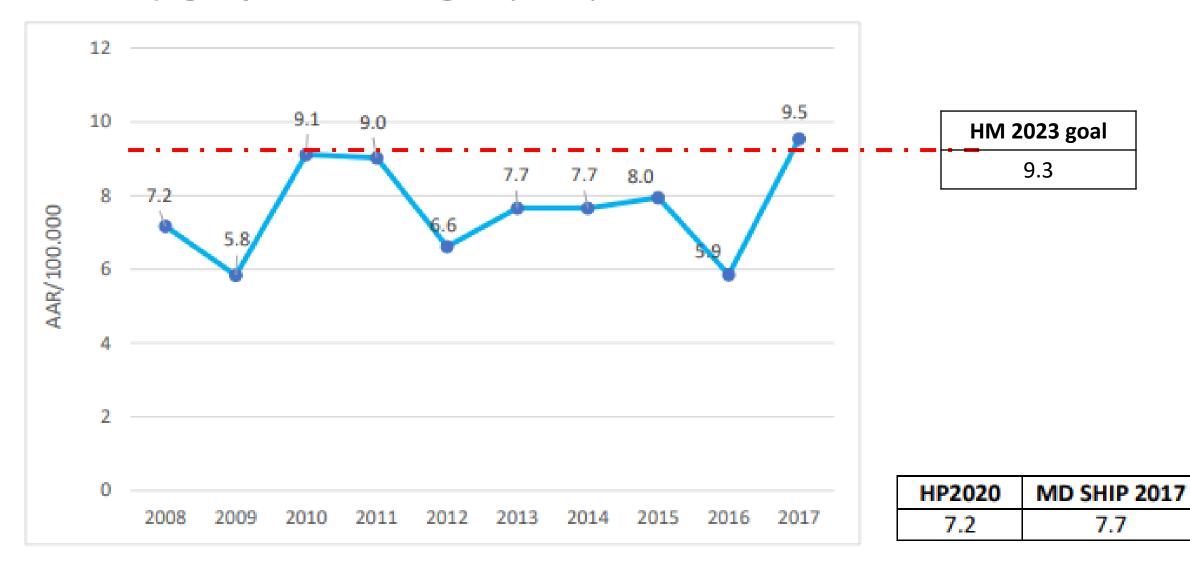
## HIV Incidence Rates, Montgomery County, 2012-2017



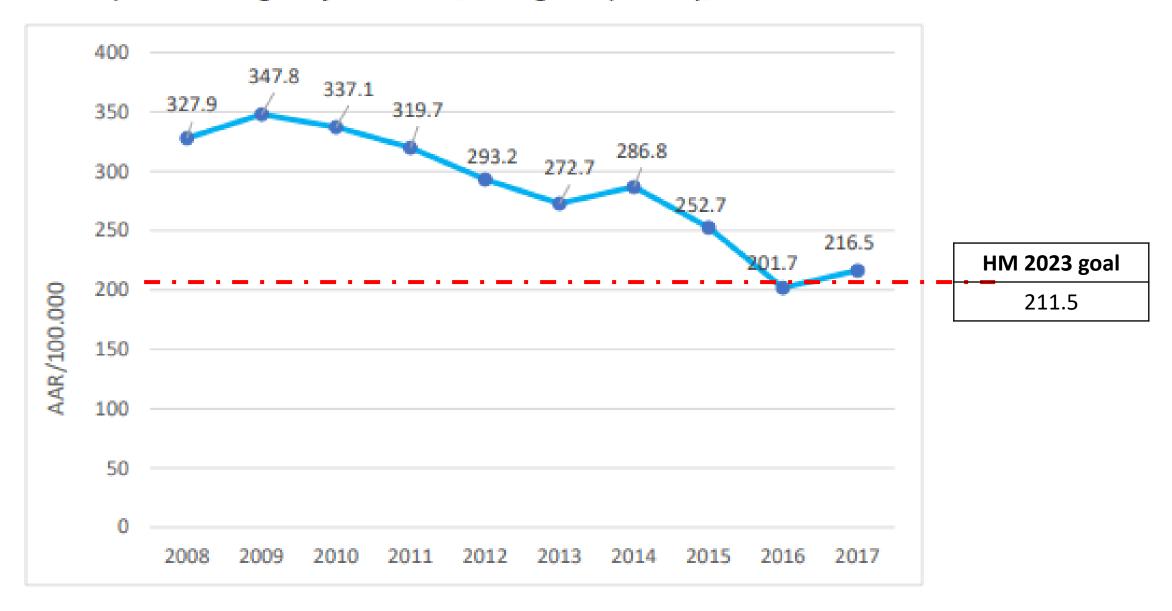
## Firearm Hospitalization Age-Adjusted Rates, Montgomery County, 2008-2017



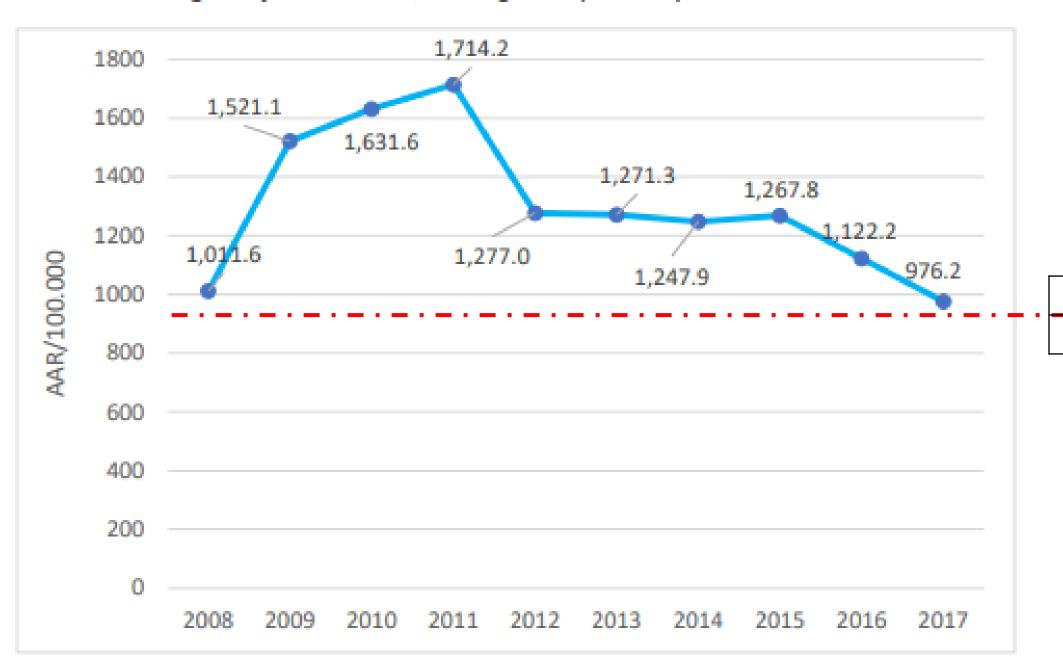
#### Fall Mortality Age-Adjusted Rates, Montgomery County, 2008-2017



## Fall Hospitalization Age-Adjusted Rates, Montgomery County, 2008-2017



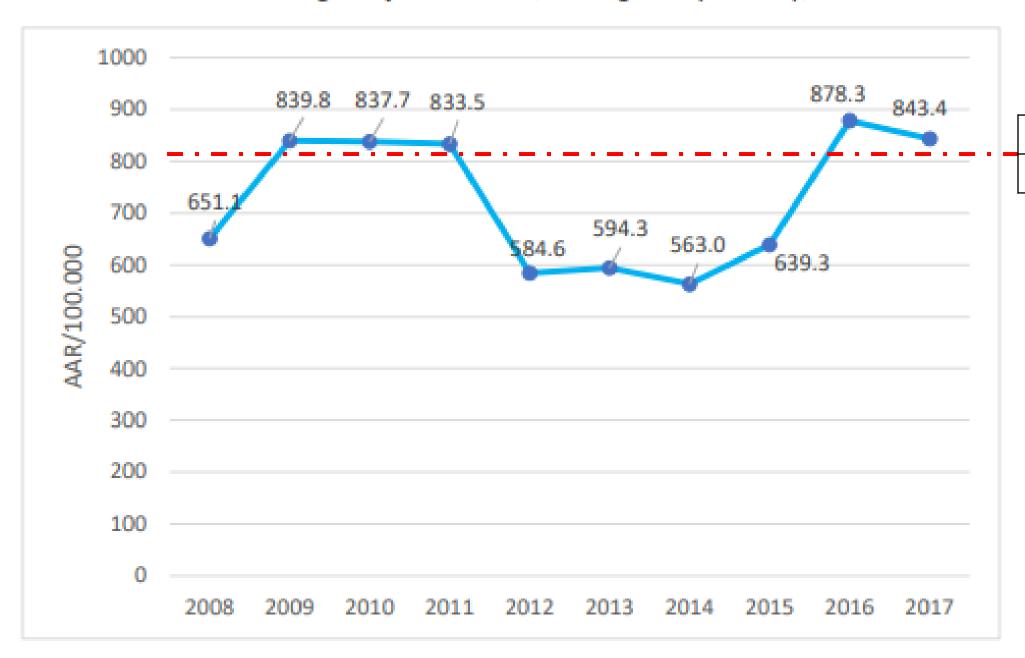
## Fall ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017



HM 2023 goal

951.8

## Motor Vehicle ER Visit Age-Adjusted Rates, Montgomery County, 2008-2017



**HM 2023 goal** 

822.3

Category	Measures/Indicators	HP2020 Goal	MD SHIP 2017 Goal	MD 2017	MoCo 2017	MoCo 2023 Goal
	Mothers who received "early and adequte prenatal care"	77.6 Percent	66.90%	92.5%	92.90%	93.3%
Maternal and Infant Health	Infant Mortality	6.0 infant deaths per 1,000	6.3/1,000	6.5	4.6	4.5
	Preterm Births	9.4 percent	-	10.5%	9.0%	8.60%
	ER Visits for Mental Health	-	2986.7/100,000	2586.1	1332.7	1299.4
Behavioral health	Suicide (mortality)	10.2 suicides per 100,000	9.0/100,000	9.9	6.2	6
benavioral fleatin	Drug-Induced Mortality	11.3 deaths per 100,000	12.6/100,000	24.1(2014-16)	12.0	11.7
	Substance abuse ER	-	1327.1	687.94	803.3	723.0
	Obesity: Adults who are overweight or obese Diabetes: ER visits for diabetes Diabetes Mellitus Mortality	30.5 percent - 66.6 deaths per 100,000	63.40% 172.9/100,000 -	65.0% (2015) 797.97 19.6	58.7(2016) 443.5 11.1	55.8% 432.4 10.8
Chronic Disease	Cardiovascular health:	102 A death a result 00 000	155 2/100 000	164.6	105.2	100
	Heart disease mortality	103.4 deaths per 100,000	166.3/100,000			
	High blood pressure prevalence Heart disease ER Visit	-	-			
	Chronic Lower Respiratory Disease Mortality		-			
	Chronic Lower Respiratory Disease ER Visit	- 2986.7/100,000 2586.1 1332.7 129 10.2 suicides per 100,000 9.0/100,000 9.9 6.2 6 11.3 deaths per 100,000 12.6/100,000 24.1(2014-16) 12.0 11 - 1327.1 687.94 803.3 723  30.5 percent 63.40% 65.0% (2015) 58.7(2016) 55.7  - 172.9/100,000 797.97 443.5 432 66.6 deaths per 100,000 166.3/100,000 164.6 105.3 10 3007.35 1801.7 175 102.6 - 30.5 13.5 13 56.8 - 1906.3 766 746  1.0 new case per 100,000 - 3.4 (2018and17) 6.0 5 431.0/100,000 552.1 380.5 373 194.8 - 181.4 68.6 66 6.7 - 9.5 5.0 4. 32855 (count) 26.7/100,000 17.2 15.5 15	746.9			
	Cili offic Lower Respiratory Disease ER Visit	30.0	-	1900.5	700	740.9
	ТВ	1.0 new case per 100.000	_	3.4 (2018and17)	6.0	5.4
	Incidence of Chlamydia	- 2986.7/100,000 2586 10.2 suicides per 100,000 9.0/100,000 9.9 11.3 deaths per 100,000 12.6/100,000 24.1(201 - 1327.1 687.9  30.5 percent 63.40% 65.0% (3.40% 65.0% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.40% 65.0% (3.			371.0	
Infectious Disease	Incidence of Gonorrhea	194.8				66.9
	Incidence of Syphilis	6.7	-		5.0	4.9
	Incidence of HIV rate	32855 (count)	26.7/100,000	17.2	15.5	15.1
Firearm Fall Mor	Firearm Hospitalization	18.6	-	11.6	2.8	2.7
	Fall Mortality	7.2 deaths per 100,000	7.7/100,000	х		9.3
	Fall Hopitalization	-	-	354.37	216.5	211.5
	Fall ER	-	-	2101.24	976.2	951.8
	Motor Vehicle ER	694.3	-	1317.85	843.4	822.3

			2023 Goals by Gender			
Category	Measures/Indicators	Overall	Females	Male		
Maternal and Infant Health	Mothers who received early prenatal care	94.7%	-	-		
	Infant Mortality	5.5	-	-		
	Preterm Births	8.6%	-	-		
	ER Visits for Mental Health	1086.6	1098.8	888		
Maternal and Infant Health  Behavioral Health  Chronic Disease  Infectious Disease	Suicide (mortality)	6.8	3.2	10.		
Benavioral Health	Drug-Induced Mortality	10.4	6.2	14		
	Substance abuse ER	701.5	551	886		
	Diabetes:					
	ER visits for diabetes	429.3	402.7	400		
	Diabetes Mellitus Mortality	13.0	9.5	13.		
Characia Diagram	Cardiovascular health:					
Chronic Disease	Heart disease mortality	116.4	34.8	119		
	Heart disease ER Visit	1749.5	1619.0	1576		
	Chronic Lower Respiratory Disease Mortality	16.1	14.7	13.		
	Chronic Lower Respiratory Disease ER Visit	746.7	785.2	689		
	ТВ	5.3	4.9	5.		
Behavioral Health  Chronic Disease	Incidence of Chlamydia	275.9	359.4	173		
Infectious Disease	Incidence of Gonorrhea	49.1	31.6	65.		
	Incidence of Syphilis (pimary and secondary)	2.8	0.2	6.		
	Incidence of HIV rate	14.8	10.3	19.		
	Firearm Hospitalization	2.2	1.0	3.		
Injury	Fall Mortality	7.9	6.6	7.5		
	Fall Hopitalization	225.9	174.0	220		
	Fall ER	1067.5	1067.1	926		
	Motor Vehicle ER	706.2	754.8	659		

			2023 Goa	Is by Race/Eth	nicity	
Category	Measures/Indicators	Overall	NH-White	NH-Black	Hispanic	Asia
Maternal and Infant Health	Mothers who received early prenatal care	94.7%	97.9%	90.2%	93.2%	96.2
	Infant Mortality	5.5	3.9	9	4.7	3.2
	Preterm Births	8.6%	7.9%	10.1%	8.4%	8.0
Behavioral Health	ER Visits for Mental Health	1086.6	1107.3	1583.1	907.4	292
	Suicide (mortality)	6.8	10.1	4.8	3.0	4.
	Drug-Induced Mortality	10.4	15.9	8.6	4.4	3.
	Substance abuse ER	701.5	646	1037.5	784.3	120
	Diabetes:					
	ER visits for diabetes	429.3	243.9	919.4	576.2	146
	Diabetes Mellitus Mortality	13.0	11.3	25.3	10.8	7.
Chronic Disease	Cardiovascular health:					
Cilionic Disease	Heart disease mortality	116.4	126.5	135.0	61.4	59
	Heart disease ER Visit	1749.5	1267.6	3256.6	1575.0	560
	Chronic Lower Respiratory Disease Mortality	16.1	19.4	14.4	4.6	4.
	Chronic Lower Respiratory Disease ER Visit	746.7	489.7	1486.0	803.2	177
	ТВ	5.3	0.6	11.3	5.2	12
	Incidence of Chlamydia	275.9	32.7	199.8	112.2	26
Infectious Disease	Incidence of Gonorrhea	49.1	7.6	76.1	16.4	6.
	Incidence of Syphilis (pimary and secondary)	2.8	1.6	6.6	2.3	1.
Incidence of	Incidence of HIV rate	14.8	4.2	50.1	14.4	-
Injury	Firearm Hospitalization	2.2	1.1	6.5	1.9	0.
	Fall Mortality	7.9	8.6	6.2	5.8	4.
	Fall Hopitalization	225.9	245.2	161.2	147.6	84
	Fall ER	1067.5	1097.9	1033.3	1005.5	222
	Motor Vehicle ER	706.2	402.6	1277.8	973.3	227

## Plan of Action

- 1. Set County-specific goals and measurable objectives to guide evidence-based policies, programs and other actions to improve health and well-being.
- 2. Provide data that is accurate, timely, accessible, and can drive targeted actions to address regions and populations with poor health or at high risk for poor health in the future.
- 3. Foster impact through public and private efforts to improve health and well-being for people of all ages and the communities in which they live.
- 4. Provide tools for the public, programs, policy makers and others to evaluate progress toward improving health and well-being.
- 5. Share and support the implementation of evidence-based programs and policies that are replicable, scalable and sustainable.
- 6. Report annually on progress through 2023.
- 7. Stimulate research and innovation toward meeting HM 2023 goals and highlight critical research, data, and evaluation needs.
- 8. Facilitate development and availability of affordable means of health promotion, disease prevention, and treatment