Community Health Assessment

2013

An Initiative of Wedco District Health Department

Harrison, Nicholas and Scott Counties
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Mobilizing for Action through Planning & Partnerships

Mobilizing for Action through Planning and Partnerships (MAPP) is a strategic tool utilized by the three Wedco District Health Department Counties. This tool helps communities work together to improve health and quality of life through community-wide strategic planning. It was developed between 1997 and 2000 by a work group consisting of local health officials, Centers for Disease Control and Prevention (CDC) representatives, community representatives and academicians. The MAPP model shown below was developed by the National Association of County and City Health Officials (NACCHO) in cooperation with the Public Health Practice Program Office and the CDC. Using the MAPP process, communities identify their resources, take into account their unique circumstances and needs, and form effective partnerships for strategic action.

The illustrated roadmap depicts the roads the community will travel when working with MAPP. The MAPP process consists of six phases, and is initiated when the local public health system (all those concerned about the health and safety of their community, not just the local health department) organizes for the planning process, recruits participants, and prepares to implement MAPP. The second phase is visioning, which provides a framework for pursuing the long-range community goals.

The third phase of MAPP consists of four assessments: Community Themes and Strengths, Local Public Health System, Community Health Status and Forces of Change. These provide critical insights into the challenges and opportunities throughout the community. The assessments assist the participants during the fourth and fifth phases of the MAPP process; identifying the issues the community faces, and then formulating goals and strategies to address each issue.

The next phase of the MAPP process is the action cycle, in which planning, implementation, and evaluation are linked. Though this phase is the sixth and final phase of the process, it is not the “end” of the process. This is where the efforts in the previous phases begin to process results visible to all in the community.
Executive Summary

The Wedco District MAPP project began in the Spring of 2011 and is supported by the Wedco District Health Department. Committee members followed a community health improvement planning model developed by NACCHO in cooperation with CDC, called Mobilizing for Action through Planning and Partnerships (MAPP). The committees assessed Cynthiana/Harrison County, Carlisle/Nicholas County, and Georgetown/Scott County individually for their strengths and needs and formulated a plan to address identified concerns.

Data collected during the four MAPP assessments: Community Themes & Strengths Assessment, Local Public Health System Assessment, Community Health Status Assessment and Forces of Change Assessment; informed the entire process. Wedco MAPP is continuously organizing for success through partnership development and began by conducting organizational meetings and determining a vision for each community. Wedco MAPP analyzed all assessment data, identified priority health issues and created a plan specifying program, policy, systems and environmental change strategies to improve the health of each Wedco county.

This document presents the findings of the four MAPP assessments that were initially collected by MAPP committee members between July 2011 and December 2012.

The Wedco District Health Department and the Community Health Partners of each county in the district are committed to making a positive difference in the health and safety concerns of the citizens. The goal of the Partners is to prioritize public health issues and identify resources to address health, safety and quality of life issues using the MAPP model.

The Partners consist of representatives from a broad cross-section of each county’s service providers, as well as active community members. Without their commitment and dedication to the process, this project could not have been possible.
County Assessment Committee Members

Harrison County

Becky Allen          Bullard
Zona Babb            Harrison Memorial Hospital
Alex Barnett         Harrison County Judge Executive
Angela Burns         Bluegrass Rape Crisis Center
Kathy Brown          Cedar Ridge Heath Campus
Gary Brunker         Cynthiana City Commissioner
Traci Carr           Cynthiana Vision Center
Rose Clifford        Harrison Memorial Hospital
Penny Coleman        Harrison Memorial Hospital
Connie Copes         Housing Authority of Cynthiana
Linda Huesing        Bullard
Chief Ray Johnson    Cynthiana Police Department
Bob Laytart          Cynthiana E-911
Missy Lutz           Harrison Fiscal Court Magistrate
Lauren Mattox        Maysville Community College/Licking Valley
Steve Moses          Cynthiana City Mayor
Rachel Northcutt     Family Court System
Julie Plummer        Blue Grass Energy
Lisa Ramsey          Hospice of the Bluegrass
Wendy Reeder         Harrison Memorial Hospital
Martha Short         Housing Authority
Ed Taylor            Harrison County Board of Education
Angel Wagner         Family Court System

Wedco District Health Department Employees:
Greg Bolin           Health Environmentalist
Debbie Bradford      Clinic Nurse Supervisor
Spencer Cathey       Director of Administrative Services
Crystal Caudill-Miller Director of Public Health
Tony Hall            Health Education
Elizabeth Ritchey    HANDS Supervisor
Janie Whitehead      Health Education/Diabetes Program Manager
Nicholas County

John Anderson  Nicholas County Board of Health
Sandy Bailey    Nicholas County Hospital
Doug Bechanan  Nicholas County Schools
Angela Burns   Bluegrass Rape Crisis Center
Jennifer Foster Nicholas County Hospital
Georgia Gilvin Nicholas County Hospital
Shawn Hatton   Nicholas County Senior Citizens
Paula Hunter   Nicholas County Schools
Virginia Kingsolver Nicholas County Community Member
Dr. Wendall Kingsolver Nicholas County Board of Health
Dawn Letcher  Nicholas County Attorney
Kenneth Lyons  Nicholas County Judge Executive
Barry Papania  Nicholas County Hospital
Angle Scholch  Community Action
Dr. Bob Sparks Nicholas County Board of Health
Adam Tubbs   Nicholas County Extension Service

Wedco District Health Department Employees:
Greg Bolin    Health Environmentalist
Spencer Cathey Director of Administrative Services
Denise Hatfield Home & Community-Based Waiver Prog, Mgr.
Millie Jolly  Sr. Support Services Associate
Kristi Morris  Health Environmentalist
Jo Ritchie    HANDS Home Visitor
Janie Whitehead Health Education/Diabetes Program Manager
Scott County

Elizabeth Anderson-Hoagland  Bluegrass Prevention Center,
SCAD Michelle Anderson  Scott County Housing Authority
Carrie Apple  Scott County Schools
Kim Barber  Scott County Housing Authority
Paula Brathwaite  Scott County Housing Authority
Angela Burns  Bluegrass Rape Crisis Center
Hannah Caudill  Coventry Care
Claude Christensen  Sadieville Mayor
Ella Coleman  Community Member
Arin Cox  Kentucky Courts
Kitty Dougoud  Georgetown Chamber of Commerce
Laura Eastes  Georgetown News Graphic Newspaper
Judy Feeback  Active Day of Georgetown
Tina Foster  Kentucky Courts
Jared Hollon  Scott County Government
Garnett Jones  Hispanic Initiative
John Jones  Georgetown Scott County EMS
Joi Jones  Scott County Schools
David Klee  Scott County Board of Health
Shannon Likens  The Studio
Connie Minch  Scott County Extension Service
Geri Remley  Scott County Parks and Recreation
Debora Smith  Scott County Housing Authority
Terry Smith  Scott County Parks and Recreation
Beth Stone  Nia
Sharon Watts  Georgetown Community Hospital
Cindy Wesley  Georgetown Community Hospital
Anita Woods  Scott County Schools

Wedco District Health Department Employees:
Crystal Caudill-Miller  Director of Public Health
Tony Hall  Health Education
Donna Long  Clinic Nurse Supervisor
Gene Thomas  Environmental Director
Laurie Tucker  HANDS Nurse
Mission

To promote healthy people who strive to be productive, life-long learners in a safe, healthy community built upon trust, offering quality health care and a high quality of life for every citizen.

The Assessments

Local Public Health System Assessment

Each county participated in the National Public Health Performance Standards Program (NPHPSP) developed by the CDC (2007) and partnered with American Public Health Association, Association of State and Territorial Health Officials, National Association of County and City Health Officials, National Association of Local Boards of Health, National Network of Public Health Institutes, and Public Health Foundation. The purpose of the assessment was to identify our public health systems’ strengths and weaknesses and then decide upon opportunities for continuous improvement.

The “jelly-bean” chart depicts a sample of various people and organizations that comprise the public health system. The local health department is only one of the partners in the county public health system, which also includes other governmental agencies, health care providers, human service organizations, schools and universities, faith institutions, youth development organizations, economic and philanthropic organizations, environmental agencies, and many others. The NPHPSP instrument was completed in a one day session for each county individually.

The NPHPSP assessment was based on the 10 Essential Public Health Services and how well the community was addressing each service. The 10 Essential Services are:

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public healthcare workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

The National Public Health Performance Standards Program has several benefits. They include.

- Improving organizational and community communication
- Promoting cohesion and collaboration among system members
- Providing the essential service context for public health issues
- Providing a benchmark for public health practice improvements

Each county’s responses to the questions should indicate how well the model standard, which portrays the highest level of performance of “gold standard” – 100%, is being met. System partners responded to assessment questions using the response options below. These same categories are used in the reports to characterize levels of activity for Essential Services and Model Standards.

<table>
<thead>
<tr>
<th>No Activity</th>
<th>0% or absolutely no activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimal Activity</td>
<td>Greater than zero, but no more than 25% of the activity described within the question is met</td>
</tr>
<tr>
<td>Moderate Activity</td>
<td>Greater than 25%, but no more than 50% of the activity described within the question is met</td>
</tr>
<tr>
<td>Significant Activity</td>
<td>Greater than 50%, but no more than 75% of the activity described within the question is met</td>
</tr>
<tr>
<td>Optimal Activity</td>
<td>Greater than 75% of the activity described within the question is met</td>
</tr>
</tbody>
</table>

The challenges of preventing illness and improving health are ongoing and complex. The ability to meet these challenges rests on the capacity and performance of public health systems. Public health performance standards are intended to guide the development of stronger public health systems which are capable of improving the health of the population. The development of high-performing public health systems will increase the likelihood that all citizens have access to a defined optimal level of public health services. Public health leaders can improve collaboration and integration among the many components of public health system through periodic assessments guided by model performance standards. This enables them to use resources more effectively while improving health intervention services.
**Community Health Status Assessment**

**Demographics**

Wedco District Health Department is a collaboration of four rural counties; Bourbon (for Home Health only), Harrison, Nicholas, and Scott. Wedco is located in the central portion of the Commonwealth of Kentucky. Each county has a health center within its borders. The District Administrative office is located in Cynthiana, Kentucky. A local board of health serves each county and a district board of health services the entire district as the Governing Body. A director oversees the district’s day-to-day operations and reports to the District Board of Health.

The service area for Wedco District Health Department covers 792 square miles. The communities served range from small rural to larger business and industry. The population distribution is nearly 50% male and 50% female. The majority of residents are Caucasian with growing African-American and Hispanic populations.

Industry in the counties range from extremely limited to a large car manufacturing company. The local school systems are among the largest employers in the three counties.

Data was gathered from the 2010 U. S. Census.

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons 18 years old and under</td>
<td>5,057</td>
<td>1,882</td>
<td>14,098</td>
</tr>
<tr>
<td>Persons 65 years and older</td>
<td>2,812</td>
<td>1,110</td>
<td>4,367</td>
</tr>
<tr>
<td>% Female</td>
<td>51</td>
<td>50.4</td>
<td>50.7</td>
</tr>
<tr>
<td>% Male</td>
<td>48.9</td>
<td>49.7</td>
<td>49.5</td>
</tr>
<tr>
<td>Caucasian/White persons</td>
<td>18,037</td>
<td>6,983</td>
<td>42,405</td>
</tr>
<tr>
<td>Black persons</td>
<td>385</td>
<td>41</td>
<td>2,468</td>
</tr>
<tr>
<td>Hispanic</td>
<td>337</td>
<td>98</td>
<td>1,994</td>
</tr>
<tr>
<td>Occupied Housing Units</td>
<td>7,343</td>
<td>2,809</td>
<td>17,408</td>
</tr>
<tr>
<td>Renter-Occupied Housing Units</td>
<td>2,170</td>
<td>701</td>
<td>5,072</td>
</tr>
<tr>
<td>Median Household Income</td>
<td>$42,415</td>
<td>$36,910</td>
<td>$58,595</td>
</tr>
<tr>
<td>High School Graduation- in 4 years</td>
<td>89%</td>
<td>82%</td>
<td>83%</td>
</tr>
<tr>
<td>Some College aged 25-44</td>
<td>45%</td>
<td>35%</td>
<td>62%</td>
</tr>
</tbody>
</table>
Behavioral Risk

Wedco surveyed members of the individual communities. Each community determined that alcohol and other drug abuse is the number one behavior risk that affects the health of the community. The other areas that were in the top five were in different order within the counties but the top five were the same. The areas determined by communities to be the behavior risks that affect the health of the community were: Poor Diet/Inactivity, Chronic Diseases, Obesity, and Child Abuse/Neglect. Although the national surveys may not show these areas as large problems, the citizens living in the communities determined these areas as the issues to address.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
<th>KY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity (Adults)</td>
<td>30%</td>
<td>34%</td>
<td>33%</td>
<td>33%</td>
</tr>
<tr>
<td>Lack of Physical Activity</td>
<td>35%</td>
<td>36%</td>
<td>31%</td>
<td>31%</td>
</tr>
<tr>
<td>(Adults)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mammograms</td>
<td>54%</td>
<td>57%</td>
<td>62%</td>
<td>63%</td>
</tr>
<tr>
<td>STD (per 100,000)</td>
<td>295</td>
<td>15</td>
<td>182</td>
<td>311</td>
</tr>
<tr>
<td>Teen Birth Rate (per 1,000)</td>
<td>67</td>
<td>73</td>
<td>42</td>
<td>52</td>
</tr>
<tr>
<td>Drug Arrests</td>
<td>180</td>
<td>134</td>
<td>347</td>
<td>61,413</td>
</tr>
</tbody>
</table>

Environmental Health Indicators

The physical environment directly impacts health and quality of life. Clean air and water are examples of environmental factors that influence health. Additionally, access to healthy foods and recreational opportunities are also environmental factors impacting health. For example, “physical activity levels are positively affected by structural environments, such as the availability of sidewalks, bike lanes, trains and parks.” (U.S. Department of Health and Human Services, 2011)

The County Health Rankings for the individual counties placed Harrison as 59th, Nicholas as 110th, and Scott as 7th overall among Kentucky’s 120 counties. These rankings include all aspects of quality of life in the counties, including environmental indicators. The specific physical environment factors place Harrison as 23rd, Nicholas as 3rd, and Scott as 63rd in Kentucky.

Health Resource Availability

Each Wedco community has one community hospital within their boundaries. Harrison Memorial Hospital is a 61 bed facility, Nicholas County Hospital has 16 beds available, and Georgetown Community Hospital is a 75 bed facility. Although the hospitals are expanding their programs, patients
with a major health issue or trauma are often sent to larger facilities in Lexington, Louisville, or Cincinnati, Ohio.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
<th>KY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Physicians</td>
<td>1,248:1</td>
<td>3,447:1</td>
<td>1,540:1</td>
<td>1,232:1</td>
</tr>
<tr>
<td>Mental Health Providers</td>
<td>18,717:1</td>
<td>6,894:0</td>
<td>4,963:1</td>
<td>3,909:1</td>
</tr>
<tr>
<td>Dentists</td>
<td>3,121:1</td>
<td>7,143:0</td>
<td>3,107:1</td>
<td></td>
</tr>
<tr>
<td>Forego Care Due to Cost (% Adults)</td>
<td>16%</td>
<td>16%</td>
<td>18%</td>
<td>17%</td>
</tr>
<tr>
<td>Uninsured Population</td>
<td>17%</td>
<td>26%</td>
<td>13%</td>
<td>17%</td>
</tr>
</tbody>
</table>

**Social and Mental Health**

Social and mental health factors can directly or indirectly influence overall health status, as well as individual and community quality of life. Mental health conditions and overall psychological well-being and safety may be influenced by substance abuse and violence within the home and within the community. The 2010 Kentucky Crime Report indicates that the counties are remaining at about the same level in numbers as the previous year.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
<th>KY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Related Collisions</td>
<td>10</td>
<td>4</td>
<td>9</td>
<td>1,617</td>
</tr>
<tr>
<td>Collisions Involving Drinking Drivers</td>
<td>25</td>
<td>2</td>
<td>41</td>
<td>4,762</td>
</tr>
<tr>
<td>DUI Convictions</td>
<td>62</td>
<td>52</td>
<td>118</td>
<td>24,899</td>
</tr>
<tr>
<td>Homicide Rate (per 100,000)</td>
<td>1.1 – Rank 112 in state</td>
<td>9.5 – Rank 12 in state</td>
<td>3.4 – Rank 69 in state</td>
<td>5.0</td>
</tr>
<tr>
<td>Suicide Rate (per 100,000)</td>
<td>12.5 – Rank 79 in state</td>
<td>17.2 – Rank 36 in state</td>
<td>10.3 – Rank 98 in state</td>
<td>15.08</td>
</tr>
<tr>
<td>Child Neglect Investigations</td>
<td>124</td>
<td>104</td>
<td>282</td>
<td>37,132</td>
</tr>
<tr>
<td>Physical Abuse Investigations</td>
<td>38</td>
<td>15</td>
<td>83</td>
<td>10,674</td>
</tr>
<tr>
<td>Sexual Abuse Investigations</td>
<td>10</td>
<td>5</td>
<td>35</td>
<td>3,097</td>
</tr>
</tbody>
</table>

**Maternal and Child Health**

One of the most significant areas for monitoring and comparison relates to the health of vulnerable populations: infants and children. This category focuses on birth data and outcomes as
well as mortality data for infants and children. Because maternal care is correlated with birth outcomes, measures of maternal access to, and/or utilization of, care is included. Births to teen mothers are a critical indicator of increased risk for both mother and child. Data was compiled from KIDS Count Data, the Center for Disease Control and the Kentucky Department for Public Health.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant mortality within 1st year. (per 1,000 live births)</td>
<td>10.7</td>
<td>3.1</td>
<td>4.1</td>
</tr>
<tr>
<td>Births to mothers receiving early and regular prenatal care</td>
<td>65%</td>
<td>62%</td>
<td>71%</td>
</tr>
<tr>
<td>Births to adolescents</td>
<td>627</td>
<td>627</td>
<td>1,664</td>
</tr>
<tr>
<td>Births to mothers who smoked during pregnancy</td>
<td>39%</td>
<td>39%</td>
<td>21%</td>
</tr>
<tr>
<td>Repeat births to teens</td>
<td>12 (26%)</td>
<td>5 (too low to calculate)</td>
<td>6 (10%)</td>
</tr>
<tr>
<td>Low Birth weight (% &lt; 2500g)</td>
<td>10.9%</td>
<td>8.8%</td>
<td>8.6%</td>
</tr>
<tr>
<td>High Birth weight (% &gt; 4000g)</td>
<td>6.7%</td>
<td>6.9%</td>
<td>5.1%</td>
</tr>
<tr>
<td>Ever Breastfed</td>
<td>36.7%</td>
<td>23.5%</td>
<td>39.0%</td>
</tr>
<tr>
<td>Smoking in Household</td>
<td>18.3%</td>
<td>58.2%</td>
<td>16.0%</td>
</tr>
<tr>
<td>Children receiving food stamps (monthly average)</td>
<td>1,280</td>
<td>573</td>
<td>2,912</td>
</tr>
<tr>
<td>Early Childhood Obesity (≥ 95th percentile)</td>
<td>11.5%</td>
<td>9.8%</td>
<td>16.7%</td>
</tr>
</tbody>
</table>

**Death, Illness and Injury**

Health status in a community is measured in terms of mortality (rates of death within a population) and morbidity (rates of the incidence and prevalence of disease). Mortality may be represented by crude rates, or age-adjusted rates; by degree of premature death (years of productive life lost); and by cause (disease- cancer and non- cancer, or injury- intentional, unintentional). Morbidity may be represented by age- adjusted incidence of cancer and chronic disease. According to the Kentucky Department for Public Health, the leading cause of death in Harrison and Nicholas counties is attributed to diseases of the heart. Scott County’s leading cause of death is Malignant Neoplasm followed closely by diseases of the heart.

<table>
<thead>
<tr>
<th>Mortality</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
<th>KY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accidents (unintentional injuries)</td>
<td>5</td>
<td>5</td>
<td>13</td>
<td>2,253</td>
</tr>
<tr>
<td>Alzheimer’s Disease</td>
<td>6</td>
<td>1</td>
<td>13</td>
<td>1,329</td>
</tr>
<tr>
<td>Cerebrovascular Disease</td>
<td>9</td>
<td>4</td>
<td>21</td>
<td>1,973</td>
</tr>
<tr>
<td>Health Condition</td>
<td>Harrison</td>
<td>Nicholas</td>
<td>Scott</td>
<td>KY</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>----------</td>
<td>----------</td>
<td>-------</td>
<td>-----</td>
</tr>
<tr>
<td><strong>Chronic Liver Disease and Cirrhosis</strong></td>
<td>6</td>
<td>1</td>
<td>4</td>
<td>408</td>
</tr>
<tr>
<td><strong>Chronic Lower Respiratory Diseases</strong></td>
<td>9</td>
<td>1</td>
<td>20</td>
<td>2,818</td>
</tr>
<tr>
<td><strong>Diabetes Mellitus</strong></td>
<td>4</td>
<td>5</td>
<td>9</td>
<td>1,334</td>
</tr>
<tr>
<td><strong>Diseases of the Heart</strong></td>
<td>61</td>
<td>30</td>
<td>77</td>
<td>9,500</td>
</tr>
<tr>
<td><strong>Influenza and Pneumonia</strong></td>
<td>6</td>
<td>3</td>
<td>7</td>
<td>970</td>
</tr>
<tr>
<td><strong>Malignant Neoplasms</strong></td>
<td>40</td>
<td>25</td>
<td>84</td>
<td>9,478</td>
</tr>
<tr>
<td><strong>Premature Death per population</strong></td>
<td>9,976</td>
<td>13,938</td>
<td>6,510</td>
<td>8,781</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Morbidity</th>
<th>Harrison</th>
<th>Nicholas</th>
<th>Scott</th>
<th>KY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Asthma Hospitalizations ages 0-17 (per 10,000)</strong></td>
<td>16</td>
<td>9</td>
<td>34</td>
<td>6,965</td>
</tr>
<tr>
<td><strong>Cancer</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incidence Rates</td>
<td>590</td>
<td>239</td>
<td>956</td>
<td>1224,459</td>
</tr>
<tr>
<td>Breast</td>
<td>12</td>
<td>&gt;5</td>
<td>25</td>
<td>2,967</td>
</tr>
<tr>
<td>Cervical</td>
<td>&gt;5</td>
<td>0</td>
<td>&gt;5</td>
<td>304</td>
</tr>
<tr>
<td>Uterine</td>
<td>&gt;5</td>
<td>&gt;5</td>
<td>0</td>
<td>248</td>
</tr>
<tr>
<td>Colon and Rectum Cancer</td>
<td>26</td>
<td>7</td>
<td>32</td>
<td>4,388</td>
</tr>
<tr>
<td>Prostate</td>
<td>12</td>
<td>12</td>
<td>19</td>
<td>1,984</td>
</tr>
<tr>
<td><strong>Cardiovascular Disease</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CVD number of hospitalization</td>
<td>363</td>
<td>144</td>
<td>533</td>
<td>81,468</td>
</tr>
<tr>
<td>Average length of hospital stay in days</td>
<td>3.83</td>
<td>3.78</td>
<td>4.05</td>
<td>4.60</td>
</tr>
<tr>
<td>Average charger per hospitalization</td>
<td>$24,148</td>
<td>$20,141</td>
<td>$29,094</td>
<td>$31,860</td>
</tr>
<tr>
<td>Total charges billed</td>
<td>$8,765,813</td>
<td>$2,900,281</td>
<td>$15,507,080</td>
<td>$2,595,598,446</td>
</tr>
<tr>
<td><strong>Heart Disease</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of hospitalizations</td>
<td>276</td>
<td>124</td>
<td>418</td>
<td>63,313</td>
</tr>
<tr>
<td>Average length of hospital stay in days</td>
<td>3.55</td>
<td>3.53</td>
<td>3.79</td>
<td>4.50</td>
</tr>
<tr>
<td>Average charger per hospitalization</td>
<td>$24,584</td>
<td>$19,862</td>
<td>$28,899</td>
<td>$32,185</td>
</tr>
<tr>
<td>Total charges billed</td>
<td>$6,785,240</td>
<td>$2,462,830</td>
<td>$12,079,857</td>
<td>$2,037,748,816</td>
</tr>
<tr>
<td><strong>Stroke</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of hospitalizations</td>
<td>63</td>
<td>10</td>
<td>59</td>
<td>10,542</td>
</tr>
<tr>
<td>Average length of hospital stay in days</td>
<td>4.67</td>
<td>4.90</td>
<td>5.80</td>
<td>5.06</td>
</tr>
<tr>
<td>Average charger per hospitalization</td>
<td>$23,973</td>
<td>$18,907</td>
<td>$33,429</td>
<td>$27,850</td>
</tr>
<tr>
<td>Total charges billed</td>
<td>$1,510,302</td>
<td>$189,073</td>
<td>$1,972,288</td>
<td>$293,596,207</td>
</tr>
</tbody>
</table>
Data was provided by Kids Count County Data Book, Kentucky Cancer Registry, Close to the Heart of Kentucky, County Health Ranking, and Kentucky Department for Public Health. This data helps to show how each community has their individual strengths and weaknesses and helps identify focus areas to bring about a healthy community. Each county within the WEDCO District has health issues distinctive to their populations. The rise of unemployment has presented an increased burden on families that had never experienced financial hardships. The uninsured population has increased considerably and meeting their needs for medications and access to care presents a challenge. A focus on utilization of the Kentucky Prescription Assistance Program and the Journey and Scott County Medical Missions enabled many unemployed individuals to obtain their much needed care.

**Community Themes and Strengths Assessment**

The purpose of this assessment was to gain a better understanding of community perceptions about health and quality of life; to provide useful information for local programmatic and fiscal decision-making; and to inform the development of the strategic community health improvement plan. This survey was used to gather insight into issues of concern, as well as local assets and resources related to health and quality of life. A University of Kentucky doctoral student helped in the delivery of the survey and compilation of the results data. More detail and the results can be found reported with the individual county information.

**Forces of Change Assessment**

Wedco District Health Department conducted a Forces of Change Assessment in 2012. During the Forces of Change Assessment all city and county governing officials, health department personnel, local and district Board of Health members, and all service agency personnel were asked about the forces that they were up against and had no control over and how that would affect them in the coming year. The findings are listed with the individual county information.
Harrison County

Local Public Health System Performance Assessment

The results of the local public health system partners’ assessment helped to determine the areas that were excelling or lacking in the Harrison County community in relation to the 10 Essential Public Health Services. The results were:

- Monitor Health Status: Minimal (19%), Moderate (37%)
- Link to Health Services: Minimal (37%), Moderate (38%)
- Mobilize Partnerships: Minimal (38%), Moderate (41%)
- Develop Policies/Plans: Minimal (41%), Moderate (41%)
- Evaluate Services: Minimal (41%), Moderate (45%)
- Diagnose/Investigate: Minimal (45%), Moderate (46%)
- Enforce Laws: Minimal (46%), Moderate (49%)
- Research/Innovations: Minimal (49%), Moderate (50%)
- Assure Workforce: Minimal (50%), Moderate (50%)
- Educate/Empower: Minimal (50%), Moderate (50%)

Some areas of relatively low performance may be enhanced through the Harrison County Partners initiative, including assessing the community partners and bringing in additional agencies to find out what is available and what the needs are in the community. With the additional information, groups can be formed to begin addressing the most pressing issues for the Harrison County community.

Community Themes and Strengths Survey Results

The Community Themes and Strengths Survey was made available to the general public, ages 18 and older who live, work, learn or shop in Harrison County, through electronic survey and paper copy. One hundred and twenty-seven community members participated in the survey along with 136 high school seniors who were chosen as a focus group.

While there are areas that need improvement within the community, Harrison County has
several areas of strengths that make community members proud.

Physical Activity is an area where there is great need for community members and there are several businesses that offer adults and children an opportunity to exercise and pursue their personal interest for a fee. The community also has a parks and recreation committee which offers activities year round for children and adults. With the newly forming Parks and Recreation Department, the city and county officials have informed community members that more will be offered. The Chamber of Commerce, Harrison Memorial Hospital and Wedco District Health Department have offered opportunities for 5K run/walk events that are open to everyone for a small entry fee.

There are several areas where community members can do their own walking, jogging, or running program within the city at no cost. The Battlegrove Cemetery has people walking within their property during the day with paved walkways that offer areas of differing elevation and beautiful scenery to take in while walking. The area around the High School, Middle School, and Southside Elementary school is available before and after school with limited traffic. The old football stadium track is used by several members of the public during times that it is open.

The Veterans Flat Run Park has a wonderful walking trail that has trails with different degrees of difficulty depending on your level of physical ability. This park has great potential and the community is ready for more development within the park. The community is using the park for entertainment purposes and has seen a large growth in the number of community members using the park.

When asked about what activity they would participate in if available or what activity was requested, the largest response was for a community swimming pool. If the pool was indoors it could be used year round in any weather and hold activities for all ages and levels of physical ability.

Community members are proud of the small town atmosphere and friendliness, as well as the community involvement, especially in times of crisis. The schools, churches, businesses and other community partners join together to help meet the needs of the community.

The historical value of the town is appreciated and the buildings are being maintained in keeping with the historical era at the time the buildings were constructed. This is a great asset to the preservation of the community. There has been increased interest to improve the condition of the Main Street area which has been needed for several years.
Forces of Change

Cuts in Medicare, as well as fewer doctors providing services to that population, have led to greater medical costs due to patients seeking care via hospital emergency departments. Funding cuts are leading to greater cost, as an end result. Kentucky changed to a managed care system in 2012 and the difficulty in receiving payment has caused great concern and the possibility of many providers making the difficult decision to no longer accept those patients or to close their offices completely. Many services are no longer being covered, and if they are covered the payment is not received for many months, or not at all. Many patients in Harrison County took Coventry Cares because they did not charge a co-pay; this will be changing for 2013, placing more of a burden on patients who do not have the funds, and most likely delaying medical care. Nearly every provider in Harrison County will only accept Coventry Cares, so in truth the patients do not have a choice in the coverage they choose.

Continued lack of new businesses coming into the county increases the need for residents to leave the community in order to earn their living. This results in decreased tax dollars for the community, contributing to a greater expense to community members.

Harrison County has a higher cost for gasoline than most surrounding counties. The continued increase in fuel cost leads to reduced funds for other items to be purchased. This has a definite economic impact on the entire community.

The most prevalent Force of Change is continued budget cuts which affect the ability to provide services, as well as a large number of community members in need of free or low cost services.
Nicholas County

Local Public Health System Performance Assessment

The results of the local public health system partners’ assessment helped to determine the areas that were excelling or lacking in the Nicholas County community in relation to the 10 Essential Public Health Services. The results were:

Mobilizing Partnerships received the lowest score by the participants for the lack of groups working together to plan and carry out programs and activities.

Community Themes and Strengths Survey Results

While the Community Themes and Strengths Assessment revealed that the overall quality of life in Nicholas County is perceived to be good, there are areas identified for improvement. Nicholas County is perceived to be a good place to raise children and to grow old; a safe place with a network of support for individuals and families. One of the main areas of concern is the economic opportunities available in the community (i.e. locally owned and operated businesses, jobs with career growth, job training/higher education opportunities, affordable housing, reasonable commute, etc).

Citizens, both the general public and the high school seniors were equally satisfied as not satisfied with the health care system in the community in areas of access, cost, availability, quality, options in health care, etc.
Both the general public and the high school seniors felt all individuals and groups have the opportunity to contribute to and participate in the community’s quality of life, but the students did not feel all residents perceive that they-individually or collectively- can make the community a better place to live.

Citizens did not have a defined opinion on the levels of mutual trust and respect increasing among community partners; a sense of civic responsibility and engagement of civic pride, or if they were satisfied with the community environment. The results were very close to even on those topics.

In looking at what made citizens the proudest in their community it was disturbing that the top answers of high school seniors when asked was “nothing”. In order to keep young people in the community they need to feel pride and a reason to continue their future within the Nicholas County community.

Both the general public and the high school seniors believe one of the most important issues to be addressed to improve the health and quality of life in the community was drug abuse. Both groups also felt the main issue keeping the community from doing what needs to be done to improve, was drugs in the community. The general public saw lack of jobs as another issue hindering the community, while the students expressed concern that apathy, not caring, and laziness were also big issues.

**Forces of Change**

The community has a large number of members with heart disease and high blood pressure. Most of the life-time residents worked in the tobacco and hay fields, and smoking is very prevalent.

There are no free medical clinics in the county. The health department has a physician who sees patients on a sliding scale fee system, two and a half days each month. A large number of people do not qualify for government assistance and do not have insurance or income to obtain medical care for preventative care or acute care. There are few physicians and no obstetric providers in the county.

Cuts in Medicare have lead to greater medical issues that will be seen as emergency situations and, in turn, cost much more money. Funding cuts are leading to greater costs as an end result. Kentucky changed to a managed care system in 2012 and the difficulty in receiving payment has caused great concern and the possibility of many providers making the difficult decision to
no longer accept those patients or to close their offices completely. Many services are no longer being covered, and if they are covered, often times the payment is not received for many months or at all.

Many patients in Nicholas County took Coventry Cares medical coverage because they did not charge a co-pay. This will be changing for 2013, placing more of a burden on patients who do not have the funds for a co-pay, which will delay medical care.

There is no major industry in the community and the previous large employer closed several years ago. Continued lack of businesses coming into the county creates the need for residents to leave the community in order to earn their living. This in turn, takes away much needed tax dollars from the community, and leads to greater expense to community members.

The most prevalent Force of Change is continued lack of industry and budget cuts which affect the ability to provide services, as well as a large number of community members in need of free or low cost services.
Scott County

Local Public Health System Performance Assessment

The results of the local public health system partners’ assessment helped to determine the areas that were excelling or lacking in the Scott County community in relation to the 10 Essential Public Health Services. The results were:

1. Monitor Health Status 23%
2. Diagnose/Investigate 72%
3. Educate/Empower 61%
4. Mobilize Partnerships 37%
5. Develop Policies/Plans 49%
6. Enforce Laws 57%
7. Link to Health Services 43%
8. Assure Workforce 51%
9. Evaluate Services 29%
10. Research/Innovations 43%

Some areas of relatively low performance may be enhanced through the Scott County Connection initiative, including assessing the community partners and bringing in additional agencies to find out what is available and what the needs are to the community. With the additional information, groups can be formed to begin addressing the most pressing issues for the Scott County community.

Community Themes and Strengths Survey Results

The Community Themes and Strengths Assessment revealed that the overall quality of life in Scott County is perceived to be good. Scott County is perceived to be a good place to raise children and to grow old, with a network of support for individuals and families.

The Community was seen to be a safe place to live, with streets and roads in good repair. Most buildings in town are historical in their appearance and several have been recently repaired with well kept landscaping.
Community members felt all individuals and groups had the opportunity to contribute to and participate in the community’s quality of life, but were equal in their ranking for neither positive or negative response that all residents perceive that they-individually or collectively-can make the community a better place to live.

Access to health care and other services, along with alcohol and other drug abuse, and poor diet with inactivity were the areas of the most concern for Georgetown and Scott County.

**Forces of Change**

The community has been fortunate to have the generosity of the Toyota Manufacturing personnel and the increased tax base from all the workers and spin off industries that located in Scott County. However, with the drop in the economy the auto industry took a big hit. Further, the safety issue with the Camry, which is produced in the Georgetown plant, has made the sales decrease by a higher margin. Though, the forecast for sales improvement does provide a greater opportunity for additional donated funds to be given to the community.

The community has a large number of physicians and a large pediatric practice that draws patients from surrounding counties. There is one free clinic that is operated with assistance from the Georgetown Hospital and volunteer physicians and nurses.

Although the median household income is substantial there are many families that remain in need of medical insurance and care. There is also a large Hispanic population in the county with a great need for medical care, as they have no health insurance.

The most prevalent Force of Change is continued federal and state budget cuts which affect the ability to provide services, as well as a large population of community members who need housing and medical services, including mental health services.
Information and data gathered from the following sources:

Centers for Disease Control and Prevention Close to the Heart of Kentucky
County Health Rankings
Franklin County Health Department
KIDS County, County Data Book
Kentucky Cancer Registry
Kentucky Department for Public Health Kentucky Health Facts
Kentucky State Police
National Association of County and City Health Officials
Three Rivers District Health Department
U. S. Census 2010

Wedco District Health Department MAPP Contact Information:

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