Community Health Improvement Plan

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 workgroup 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 most issues facing the community, 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 MAPP process, it is not the “end” of the process. This is where the efforts in the previous phases begin to produce 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 the Centers for Disease Control and Prevention, 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 findings were then used to identify strategic issues, or priority areas of improvement needed in the counties, as perceived by the committee members. Following the identification of the strategic issues, an action plan for each county was created that emphasized the goals and strategies for improvement of the counties.

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 would 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 Center
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

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

### Wedco District Health Department Employees:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greg Bolin</td>
<td>Health Environmentalist</td>
</tr>
<tr>
<td>Spencer Cathey</td>
<td>Director of Administrative Services</td>
</tr>
<tr>
<td>Denise Hatfield</td>
<td>Home &amp; Community-Based Waiver Prog. Mgr.</td>
</tr>
<tr>
<td>Millie Jolly</td>
<td>Sr. Support Services Associate</td>
</tr>
<tr>
<td>Kristi Morris</td>
<td>Health Environmentalist</td>
</tr>
<tr>
<td>Jo Ritchie</td>
<td>HANDS Home Visitor</td>
</tr>
<tr>
<td>Janie Whitehead</td>
<td>Health Education/Diabetes Program Manager</td>
</tr>
</tbody>
</table>
Scott County

Elizabeth Anderson-Hogland  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
Vision and Values

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 health care 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 were the same. The areas determined by the communities to be behavioral 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 day to day determined those 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 (Adults)</td>
<td>35%</td>
<td>36%</td>
<td>31%</td>
<td>31%</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>

Obesity is linked to a sedentary lifestyle which leads to chronic diseases, such as heart disease, stroke, and diabetes; large health issues within each community.

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 among Kentucky’s 120 counties. These rankings include all aspects of quality of life in the counties, including environmental indicators.

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 to the previous year in numbers.

<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 taken from KIDS Count Data, the Center for Disease Control and the Kentucky Department of 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>

Wedco counties, with the exception of Scott, do have lower early childhood obesity than the state average of 15.6% but each county needs to improve before the rates start to climb, allowing for increases in childhood chronic illness.

**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, 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 of 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>Chronic Liver Disease and Cirrhosis</td>
<td>6</td>
<td>1</td>
<td>4</td>
<td>408</td>
</tr>
<tr>
<td>Chronic Lower Respiratory Diseases</td>
<td>9</td>
<td>1</td>
<td>20</td>
<td>2,818</td>
</tr>
<tr>
<td>Diabetes Mellitus</td>
<td>4</td>
<td>5</td>
<td>9</td>
<td>1,334</td>
</tr>
<tr>
<td>Diseases of the Heart</td>
<td>61</td>
<td>30</td>
<td>77</td>
<td>9,500</td>
</tr>
<tr>
<td>Influenza and Pneumonia</td>
<td>6</td>
<td>3</td>
<td>7</td>
<td>970</td>
</tr>
<tr>
<td>Malignant Neoplasms</td>
<td>40</td>
<td>25</td>
<td>84</td>
<td>9,478</td>
</tr>
<tr>
<td>Premature Death per population</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>Asthma Hospitalizations ages 0-17 (per 10,000)</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 charge 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 charge 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>

June 2013
Data was provided by Kids Count County Data Book, Kentucky Cancer Registry, Close to the Heart of Kentucky, County Health Ranking, and Kentucky Department of 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 previously had never experienced financial hardships. The uninsured population has increased considerably and meeting their needs for medications and access to care issues 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.

A survey was used to gather insight into issues of concern, as well as local assets and resources related to health and quality of life; to provide useful information for local programmatic and fiscal decision making; and to inform the development of this strategic community health improvement plan. 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 relationship to the 10 Essential Public Health Services. The results were:

<table>
<thead>
<tr>
<th>Service</th>
<th>Minimal</th>
<th>Moderate</th>
<th>Significant</th>
<th>Optimal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitor Health Status</td>
<td>19%</td>
<td>37%</td>
<td>38%</td>
<td>41%</td>
</tr>
<tr>
<td>Link to Health Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mobilize Partnerships</td>
<td></td>
<td>41%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop Policies/Plans</td>
<td></td>
<td></td>
<td>41%</td>
<td></td>
</tr>
<tr>
<td>Evaluate Services</td>
<td></td>
<td></td>
<td></td>
<td>41%</td>
</tr>
<tr>
<td>Diagnose/Investigate</td>
<td></td>
<td>45%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enforce Laws</td>
<td></td>
<td></td>
<td></td>
<td>45%</td>
</tr>
<tr>
<td>Research/Innovations</td>
<td></td>
<td></td>
<td>46%</td>
<td></td>
</tr>
<tr>
<td>Assure Workforce</td>
<td></td>
<td></td>
<td></td>
<td>49%</td>
</tr>
<tr>
<td>Educate/Empower</td>
<td></td>
<td></td>
<td></td>
<td>50%</td>
</tr>
</tbody>
</table>

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 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 and churches 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 a push to try and 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 the population, have led to greater medical costs due to patients seeking care via hospital emergency departments. 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 a 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, which in turn takes away tax dollars from the community. This also leads to greater expense to community members.

Harrison County has a higher cost for gasoline than most surrounding counties. The continued increase in fuel 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 relationship 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 evenly 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 population 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. There is a large population who 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 a 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 relationship to the 10 Essential Public Health Services. The results were:

- 1. Monitor Health Status: 23%
- 2. Diagnose/Investigate: 72%
- 3. Educate/Empower: 57%
- 4. Mobilize Partnerships: 37%
- 5. Develop Policies/Plans: 49%
- 6. Enforce Laws: 61%
- 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, 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 even on their ranking for neither positive nor 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.
Identification of Strategic Issues, Goals and Strategies

Harrison County

To address the strategic issues and the MAPP vision, the Community Assessment Committee chose to focus on only two goals to begin the changes. The members of the committee discussed several areas of concern, and then chose the focus areas by group consensus.

1) In order to mobilize the community partnerships to identify and solve health problems they need to link people to needed personal health services and assure the provision of health care when otherwise unavailable. Since it was discovered that many service partners did not know what other partners had available better communication was needed.
Objective – To increase the knowledge of community service agencies of available services within the community.

Strategies:
- Evaluate current information sources
- Research opportunities for cross marketing amongst agencies
- Obtain current updated service information
- Make information available to any partner agency
- Create partnerships to develop shared services for clientele
- Identify same services by inventory of service providers
- Develop a community services contact information book and make available to all service agencies.

2) During the task of monitoring health status to identify community health problems, and when diagnosing and investigating health problems and health hazards in the community, one of the biggest problems determined by committee members and the community survey was alcohol and drug abuse.

Objective – To address the drug and alcohol problems within the community in order to reduce the use and effects of usage.

Strategies:
- Work with established organizations to increase their current efforts
- Be present at community events with educational information
- Offer educational information to community members
- Work to decrease the availability to obtain drugs by repeated us of emergency room
- Create partnership to develop shared services for clientele
To address the strategic issues and the MAPP vision, the Community Assessment Committee chose to focus on only two goals to begin the changes. The members of the committee discussed several areas of concern, and then chose the focus areas by group consensus.

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Objective – To increase the knowledge of community service agencies of available services within the community.

Strategies:

June 2013
• Evaluate current information sources
• Research opportunities for cross marketing amongst agencies
• Obtain current updated service information
• Make information available to any partner agency
• Create partnerships to develop shared services for clientele
• Identify same services by inventory of service providers
• Develop a community services contact information book and make available to all service agencies.

2) In order to link community members to needed personal health services and assure the provision of health care when otherwise unavailable and to inform, educate, and empower people about health issues you must first get them to attend events that provide education and information.

Objective – To entice community members to attend health related community events.

Strategies:
• Be present at community events with educational information
• Focus on a medical need that is visible and perhaps painful to individual
• Bring dental coverage to community
• Create an event big enough and desirable enough that community members will come out and be a part of it.
• Create partnerships to create a community event to make the logistics of the event workable.
• Provide a needed service at little or no cost to the community members.
To address the strategic issues and the MAPP vision, the Community Assessment Committee chose to focus on only two goals to begin the changes. The members of the committee discussed several areas of concern, and then chose the focus areas by group consensus.

1) In order to mobilize the community partnerships to identify and solve health problems they need to link people to needed personal health services and assure the provision of health care when otherwise unavailable. Since it was discovered that many service partners did not know what other partners had available better communication was needed.

Objective – To increase the knowledge of community service agencies of available services within the community.

Strategies:
- Evaluate current information sources
- Research opportunities for cross marketing amongst agencies
• Obtain current updated service information
• Make information available to any partner agency
• Create partnerships to develop shared services for clientele
• Identify same services by inventory of service providers
• Develop a community services contact information book and make available to all service agencies.

2) By monitoring health status to identify community health problems it was determined that obesity and lack of physical exercise in children is a growing problem affecting Scott County, and if not addressed will continue to worsen and lead to multiple problems for the community’s future.

Objective – Create an event to address obesity and the lack of physical activity in children by involving adults and the family as a team.

Strategies:
• Be present at community events with educational information
• Promote weight loss and physical activity as a fun and slightly competitive activity
• Support existing programs who are addressing the issue
• Create partnerships to develop shared services for clientele
• Promote businesses with low or no cost activities to increase physical activity
• Involve families as part of the team to promote healthy lifestyles for children.

Action Plan

The action plan involves continuing plans for interventions, implementing those plans and evaluating them as well. Each committee is currently working in the Action Cycle. Some progress has been made addressing the priority issues and a condensed version of these implementations is noted. Evaluations will be done at the conclusion of each project and annually to determine changes or additional programs.

Harrison County

Increase awareness of social services available to service partners and county residence

The steps taken toward improving the knowledge among service partners of what is available for clientele was a collaborative effort between several service partners within Harrison County. A Community Resource notebook was developed using information gained from multiple sources and reviewed by all service agencies for accuracy. Wedco District Health Department
staff was able to develop and edit the information and format in a usable manner to best serve the public from suggestions made by staff and partners. A notebook was developed and hard copies and electronic copies were made available to community service agencies to be used by their staff and clientele. The notebook provided agency names, contact information, as well as a list of available services. This ensures that community partners are able to link people to needed personal health services and assure the provision of health care when otherwise unavailable. Also, information was given to service agencies regarding a monthly inter-agency meeting held in Harrison County; all were invited to attend in an effort to continue the networking and sharing of knowledge of current needs and activities.

Address the drug problems within the community in order to reduce the use and affects of usage

To address this large scale problem the committee will join with the existing ‘Champions’ committee who work towards a drug free Harrison County. All committee members contact information was sent to the Champions committee and asked to be placed on their distribution list for monthly updates and minutes of meetings. Committee members were requested to help with community events held by the Champions committee. The local hospital is working on policies and procedures to address patients who return repeatedly to the emergency department in order to try and obtain prescription drugs. This project is still being worked on and has met with some difficulty in receiving information from the Champions committee but efforts are continuing to get the two groups together.

Nicholas County

Increase awareness of social services available to service partners and county residence

The steps taken toward improving the knowledge among service partners of what is available for clientele was a collaborative effort between several service partners within Nicholas County. A Community Resource notebook was developed using information gained from multiple sources and reviewed by all service agencies for accuracy. Wedco District Health Department staff was able to develop and edit the information and format in a usable manner to best serve the public from suggestions made by staff and partners. A notebook was developed and hard copies and electronic copies were made available to community service agencies to be used by their staff and clientele. The notebook provided agency names, contact information, as well as a list of available services. This ensures community partners are able to link people to needed personal health services and assure the provision of health care when otherwise unavailable. Also, information was given to service agencies regarding a monthly inter-agency meeting held in Nicholas County; all were invited to attend in an effort to continue the networking and sharing of knowledge of current needs and activities.
Create a health related community event large enough to entice community members to attend

The committee contacted the Remote Area Medical group which brings in dental personnel and equipment, including instruments and chairs, to an area for a weekend clinic. The type of event would be a good opportunity for other service agencies to provide educational information to community members regarding available services, as well as education on chronic issues, such as diabetes. The Nicholas County Hospital sent personnel to visit a weekend clinic and they have taken the lead to contact the group. With the 2013 calendar filled it was requested that a representative of the group visit with the committee in order to view possible venues to use for the project and to be placed on the calendar for 2014. The project would take much cooperation from the entire community in order to provide housing and food for the large number of workers that would be needed. This would also help to bring the community into the project and assist with informing community members of the free services available to them. The committee is currently waiting on a representative to visit Nicholas County.

Scott County

Increase awareness of social services available to service partners and county residence

The steps taken toward improving the knowledge among service partners of what is available for clientele was a collaborative effort between several service partners within Scott County. A Community Resource notebook was developed using information gained from multiple sources and reviewed by all service agencies for accuracy. Wedco District Health Department staff was able to develop and edit the information and format in a usable manner to best serve the public from suggestions made by staff and partners. A notebook was developed and hard copies and electronic copies were made available to community service agencies to be used by their staff and clientele. The notebook provided agency names, contact information, as well as a list of available services. This ensures community partners are able to link people to needed personal health services and assure the provision of health care when otherwise unavailable. Also, information was given to service agencies regarding a monthly inter-agency meeting held in Scott County; all were invited to attend in an effort to continue the networking and sharing of knowledge of current needs and activities

Address the Obesity and Lack of Physical Activity in Children in Scott County

The committee took on a project to promote a healthy lifestyle by sponsoring a weight loss competition which was open to everyone. There was an initial kick off at the Pavilion with registration and weigh in. Participants were given a few requirements, such as participating in weekly weigh-ins for at least eight weeks of the competition, and to be weighed at official sites established by the committee. Businesses were solicited to help sponsor the competition and to
offer educational and physical activity classes for participants to attend free of charge. Three categories were established: Individual Female, Individual Male, and Team/Family. The competition was promoted as a healthy competition and an opportunity to begin the new year living a healthier lifestyle.

**The Process of MAPP**

MAPP is an effective and manageable strategic planning process for improving community health and safety; MAPP provides the framework for creating a truly community-driven initiative. Although Wedco District Health Department facilitates the process, community ownership is a fundamental component of MAPP. Broad community participation is essential because a wide range of organizations and individuals make up the public health system. The MAPP process brings these diverse interests together to collaboratively determine the most effective way to conduct public health activities. The public’s involvement leads to collective thinking and ultimately results in effective, sustainable solutions to complex problems. Throughout the MAPP process the public health system recognized that their greatest assets were the people who are committed to the improvement of the health and safety of their communities.

Wedco District Health Department will continue to work with community partners to review the goals, objectives and action steps. An evaluation of each county’s progress will be made in six months to determine the quality of the action and the need for updates and changes. The mission statement of the Community Assessment Committee, “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” will continue to encourage the committee to work in a positive direction to ensure a healthier and safer environment for the citizens of our counties.
Information and data gathered from the following sources:

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

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