Annual Community Health Improvement Plan
Report 2017
Lincoln Trail District Health Department

Hardin, LaRue, Marion, Meade, Nelson, and Washington Counties

“Good health and a safe environment”
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Background</td>
<td>2</td>
</tr>
<tr>
<td>Considerations for CHIP update</td>
<td>4</td>
</tr>
<tr>
<td>Progress on CHIP Priority Areas</td>
<td>5</td>
</tr>
<tr>
<td>Obesity</td>
<td>5</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>9</td>
</tr>
<tr>
<td>Revisions</td>
<td>14</td>
</tr>
<tr>
<td>Conclusion</td>
<td>14</td>
</tr>
<tr>
<td>References</td>
<td>18</td>
</tr>
</tbody>
</table>
Introduction

This is the annual report of the 2013 – 2017 Lincoln Trail District Health Department (LTDHD) Community Health Improvement Plan (CHIP). It reflects the activities and collaborative efforts of the LTDHD, community partners, and county coalitions. This document serves as a progress review on the strategies that were developed in 2013 and activities that have been implemented since then. It also captures the revisions made to the CHIP based on the evaluation of the goals, objectives, strategies, current and planned activities, performance measures, and available resources. This report references the 2013 – 2017 Community Health Assessment and Community Health Improvement Plan. The document can be found on LTDHD’s website: http://lincolntrailhealthdepartment.com/wp-content/uploads/2015/01/LTDHD-CHA-CHIP-final-2.pdf. While the CHIP is a community driven and collectively owned health improvement plan, LTDHD is charged with providing administrative support, tracking and collecting data, and preparing the annual report.
Background

The Lincoln Trail District Health Department utilized a community health assessment process based on Mobilizing for Action through Planning and Partnerships (MAPP). MAPP is a community-driven strategic planning process which helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is not an agency-focused assessment process; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.

The assessments used in the MAPP process include:

Community Health Status Assessment – collected local surveys for primary data, reviewed various data health indicators and compared it to the state of Kentucky to develop a picture of health status in the community.

Community Themes and Strengths Assessment - conducted focus groups and a dialogue group to get a deeper understanding of the issues residents felt were important.

Forces of Change Assessment - engaged stakeholders in a consensus process to identify “forces,” such as legislation, technology, and other impending changes that can affect the context in which the community and the public health system operate.

Local Public Health System Assessment – conducted focus groups to assess how well the local public health system is meeting the ten essential public health services.
The Lincoln Trail District Health Department augmented the MAPP process with a Three Perspective approach to gathering information. Data gathered in conjunction with the Community Health Status Assessment provided a Data Perspective on the health of each community. Information gathered during Community Forums, primarily attended by representatives of community partner organizations, provided the Organizational Perspective. In an effort to add the perspective of individual citizens of each county, both paper and electronic surveys were distributed with particular emphasis on disparate populations attending clinics throughout the region and through a multitude of community venues. These settings included school systems, local department and grocery stores, colleges and universities, health care providers, and health care systems throughout the district. Information from these surveys provided the Individual Perspective. In addition, the Local Public Health System Assessment was completed in each county utilizing the asset mapping approach.

Many health issues surfaced during the MAPP assessments, however, it is important to prioritize the areas that need to be focused on first. Strategic initiatives were chosen based on magnitude of the problem, comparison with state results, historical trends, economic and social impact, and capacity of the local public health system.
Considerations in the Upcoming CHIP

Revisions to the CHIP need to be made based on the new Community Health Assessment, careful review of the goals, objectives, strategies and measures of the 2018 – 2021 CHIP. Recommended changes have to be made based on the following parameters:

- Availability of data to monitor progress
- Availability of resources
- Community readiness
- Evident progress through monthly and quarterly reports
- Alignment with goals
Progress on CHIP Priority Areas

Obesity

- **About this priority:** Lincoln Trail District Health Department examined scope and status of obesity in the population of the Lincoln Trail District, compared to the state, and national health indicators. Evidence based strategies were used to address the priority areas of the CHIP and improve health outcomes in the district. The intended impact on obesity was to focus on behavior change and impact lifestyle changes, including exercise and healthy eating to improve the obesity health indicators. First, LTDHD assessed what fitness initiatives were currently active in the counties, then increase community collaboration to promote evidence based programs.

- **Priority Progress:** Through activity reports the community planning and health education team at LTDHD was able to track their performance in completion of physical fitness and healthy eating initiatives. Through collaboration with other agencies, and coalitions in the district. The counties of LaRue, Marion, and Meade were able to lower the rate of the lack of physical activity to lower than the rate of Kentucky. The counties of LaRue, Marion, and Washington were able to decrease the prevalence of obesity. These are huge milestones for half of the district. This does not mean that the efforts of other counties are overlooked, but will be reevaluated. The results of health indicators improving, can be due to a combination of factors. We cannot simply say it was only the LTDHD initiatives that improved health indicators alone. It is a community effort and this allows us as a community to see what strategies we can implement in our upcoming CHIP to reduce obesity.

<table>
<thead>
<tr>
<th>CHIP Strategic Initiative # 1: Reduce Obesity</th>
<th>Coordinating Agencies: Lincoln Trail District Health Department</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong></td>
<td><strong>Objectives</strong></td>
</tr>
<tr>
<td>1: Encourage lifestyles that include regular physical fitness activities</td>
<td>1: To inventory by July 2014, on a per-county basis, the physical fitness initiatives currently underway for adults and children.</td>
</tr>
<tr>
<td></td>
<td>2: To increase community members/organizations</td>
</tr>
<tr>
<td>Objective</td>
<td>Description</td>
</tr>
<tr>
<td>-----------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1:</td>
<td>To inventory by July 2014, on a per-county basis, the healthy eating initiatives currently underway for adults and children.</td>
</tr>
<tr>
<td>2:</td>
<td>Encourage lifestyles that include healthy eating.</td>
</tr>
<tr>
<td>4:</td>
<td>Through individual county and district wide-collaborative activity, implement 2 physical fitness initiatives for children ages 3-18 in each county by 2017.</td>
</tr>
</tbody>
</table>

Objective 3:  
Hardin: Managing Your Meals/Weight Loss Classes, 5-2-1-0  
LaRue: Born Learning Trail, Book Walk  
Marion: Halloween in the Park, United Way 5k  
Meade: Family Swim Party, Dad’s Trail Hike with Children  
Nelson: Matter of Balance Program, Go 365  
Washington: Unplug and Play, Walk on Washington  

Objective 4:  
Hardin: Managing Your Meals/Weight Loss Classes, 5-2-1-0 Curriculum  
LaRue: Born Learning Trail, Book Walk  
Marion: Halloween in the Park, United Way 5k  
Meade: Family Swim Party, Dad’s Trail Hike with Children  
Nelson: Matter of Balance Program, Go 365  
Washington: Unplug and Play, Walk on Washington  

2: To increase community members/organizations participating in healthy eating initiatives by a minimum of 2 in each county by 2017.

3: Through individual county and district wide-collaborative activity, implement 2 healthy eating initiatives for adults in each county by 2017.

4: Through individual county and district wide-collaborative activity, implement 2 healthy eating initiatives for children ages 3-18 in each county by 2017.

Baseline
Prevalence of Obesity:
Hardin – 31%
LaRue – 33%
Marion – 34%
Meade – 36%
Nelson – 30%
Washington – 32%
Kentucky – 33%
U.S. – N/A

Current Prevalence of Obesity:
Hardin – 33%
LaRue – **31%**
Marion – **27%**
Meade – 38%
Nelson – 34%
Washington – **25%**
Kentucky – 33%
U.S. – N/A

Objective 2: County coalitions are made up of members from agencies in the community that play a role in physical fitness initiatives.
Hardin – Panther Academy Afterschool PE, Sign of the Dove Church
LaRue – Livin Well LaRue (e.g. Informal Community Leader/Member, Community Outreach Coordinator from Kentucky State University)
Marion – Heartland Coalition (City of Lebanon, Extension Office)
Meade – Meade Moves (Parks and Recreation, Meade Activity Center)
Nelson – Media (PLG tv) and local library
Washington – Washington on Wellness (Passport Health Plan, Springfield Baptist Church)

Objective 3:
Hardin: Managing Your Meals/Weight Loss Classes, 5-2-1-0
LaRue: Family Dinner Table Project, Healthy Snacks Initiative
Marion: Nourishing Knowledge Books, Commodity Books
Meade: Fresh Stop, Biggest Winner
Nelson: Go 365, Spring Fling Weight Off
Washington: Winter Wellness Scorecard, Feeding America Food Distribution and Mobile Food Kitchen

Objective 4:
Hardin: Diabetes Kids Group, Farmer’s Market WIC vouchers
LaRue: Family Dinner Table Project, Healthy Snacks Initiative
Marion: Nourishing Knowledge Books, Farmer’s Market WIC vouchers
Meade: Fresh Stop, Nourishing Knowledge Books
Nelson: Spring Fling Weight Off, Farmer’s Market WIC vouchers
Washington: Winter Wellness Scorecard, Feeding America Food Distribution and Mobile Food Kitchen

3: Explore the possibility of targeting

1: Assess needs with each county-specific partnership group, for convening a

Baseline
Prevalence of Obesity:

Objective 1 revised: Assess needs with each coalition partnership to develop district wide obesity reduction strategies that will result in future policy and intervention changes. 2018-2021 Community Health
### Objective 1:

six-county, district-wide obesity reduction planning group for the development of policy and/or intervention district-wide by July 2014.

2: Identify a minimum of one grant opportunity to support district-wide obesity reduction activities by July 2017.

<table>
<thead>
<tr>
<th>County</th>
<th>Obesity Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin</td>
<td>33%</td>
</tr>
<tr>
<td>LaRue</td>
<td>31%</td>
</tr>
<tr>
<td>Marion</td>
<td>27%</td>
</tr>
<tr>
<td>Meade</td>
<td>34%</td>
</tr>
<tr>
<td>Nelson</td>
<td>34%</td>
</tr>
<tr>
<td>Washington</td>
<td>32%</td>
</tr>
<tr>
<td>Kentucky</td>
<td>33%</td>
</tr>
<tr>
<td>U.S.</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Current Prevalence of Obesity:

- Hardin – 33%
- LaRue – 31%
- Marion – 27%
- Meade – 38%
- Nelson – 34%
- Washington – 25%
- Kentucky – 33%
- U.S. – N/A

<table>
<thead>
<tr>
<th>County</th>
<th>Obesity Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardin</td>
<td>33%</td>
</tr>
<tr>
<td>LaRue</td>
<td>31%</td>
</tr>
<tr>
<td>Marion</td>
<td>27%</td>
</tr>
<tr>
<td>Meade</td>
<td>38%</td>
</tr>
<tr>
<td>Nelson</td>
<td>34%</td>
</tr>
<tr>
<td>Washington</td>
<td>25%</td>
</tr>
<tr>
<td>Kentucky</td>
<td>33%</td>
</tr>
<tr>
<td>U.S.</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Assessment will continue to work towards the modified version of this objective.

### Objective 2:

Community Health Action Team (CHAT) Grant (district wide opportunity)

- **Successes and Challenges:** Through this past fiscal year the community health improvement plan goals and objectives were implemented in a variety of ways. The community plan and health education team at LTDHD collaborated and participated with other lead coalitions and agencies to make the initiatives successful. As far as challenges, LTDHD and other health organizations faced the challenge of today’s culture. Healthy food options are expensive and not easily accessible. Face paced lifestyles and numerous obligations promote choices driven by convenience. Many of these choices result in negative health outcomes. Another challenge would be policy changes within physical activity in schools. The walkability and safety of neighborhoods were also a challenge for communities to be able to exercise. A local gym might not be an option for some community members. LTDHD tried to focus on giving the community members ideas and opportunities for growth in healthy lifestyle behaviors they can implement at home.
• **Next Steps:** No changes will be made to the current 2013-2017 CHIP. Continuation of Goal 3, objective 1. LTDHD is currently partnering with Breckinridge and Grayson County Health Departments to work on the upcoming 2018-2021 CHA and CHIP. This will allow us to break the silos in our communities and work together to create a healthier Lincoln Trail Region. The first CHA and CHIP was not aligned with the health department strategic plan. Our first priority has been to work with all levels of LTDHD staff in the development of agency plans, while using data to drive decisions on policy and improvements.

• **Alignment between CHIP and national priorities:**
  Healthier food access is a focus area of the district. Progress has been made of the following Healthy People 2020 Objectives:

  NWS-9 Reduce the proportion of adults who are obese
  
  NWS-10 Reduce the proportion of children and adolescents who are considered obese
  
  NWS-2 Increase the proportion of schools that offer nutritious foods and beverages outside of school meals (Policy implementation for SMART snacks in all schools in progress)
  
  NWS-2.1 Increase the proportion of schools that do not sell or offer calorically sweetened beverages to students
  
  NWS-2.2 Increase the proportion of school districts that require schools to make fruits or vegetables available whenever other food is offered or sold

**Substance Abuse**

• **About this priority:** Lincoln Trail District Health Department examined scope and status of substance abuse in the population of the Lincoln Trail District, compared to the state, and national health indicators. Evidence based strategies were used to address the priority areas of the CHIP and improve health outcomes in the district. The intended impact on substance abuse was to focus on prevention, including evidence based programs to improve the substance abuse health indicators. First, LTDHD looked at assessing what smoke-free workplaces and public places were currently active in the counties, then increased tobacco-free living initiatives in each county.

• **Priority Progress:** Through activity reports the community planning and health education team at LTDHD was able to track their performance in completion of tobacco free living initiatives through collaboration with other agencies, and coalitions in the district.
The counties of Washington, Marion, Nelson, and Elizabethtown Schools are 100% smoke-free. Washington and Nelson Counties were also able to reduce the adult smoking rate. This is a huge milestone for one-third of the district. Lowering the adult smoking rates in all counties will continue through assessment, monitoring, policy development, and evaluation. The results of health indicators improving, can be due to a combination of factors. We cannot say it was only the LTDHD initiatives that improved health indicators. It is a community effort and this allows us to see what strategies we can implement in our upcoming CHIP to reduce substance abuse.

<table>
<thead>
<tr>
<th>CHIP Strategic Initiative # 2: Reduce Substance Abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinating Agencies: Communicare Regional Prevention Center &amp; Lincoln Trail District Health Department</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Health Indicators</th>
<th>Activities and Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Encourage tobacco-free living</td>
<td>1: To inventory by July 2014, on a per county basis, the prevalence of smoke-free workplaces and public places. 2: To increase community members/organizations participating in tobacco-free living initiatives by a minimum of 2 in each county by July 2017. 3: Through individual county and district-wide collaborative activity, implement 2 smoke-free/smoking cessation initiatives for adults in each county by July 2017.</td>
<td>Baseline Adult Smoking: Hardin: 26% LaRue: 26% Marion: 27% Meade: 34% Nelson: 29% Washington: 24% Kentucky: 26% US: 19.3% Current Adult Smoking: Hardin: 30% LaRue: 30% Marion: 33% Meade: 35% Nelson: 26% Washington: 18% Kentucky: 27% U.S.: N/A</td>
<td>June 30, 2016-June 30, 2017: Objective 1 completed in 2014 among LTDHD and county coalitions. Objective 2: Hardin: Communicare RPC, Hardin County Schools, Hardin Memorial Health LaRue: Communicare RPC, Extension Office Marion: Communicare RPC, Marion County Schools Meade: Communicare RPC, Lynn’s Pins Bowling Alley Nelson: Communicare RPC, Bardstown Schools Washington: Communicare RPC, Washington County Schools, American Greetings Objective 3: Hardin: Smoking Cessation Classes, E-cigarette training Elizabethtown Schools 100% Smoke free policy LaRue: LaRue County Schools 100% Smoke-free policy</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td><strong>2: Reduce unauthorized access to prescription medication</strong></td>
<td><strong>1. To inventory by July 2014, on a per county basis, the prevalence and location of prescription medication “drop off” receptacles.</strong></td>
<td><strong>Baseline Drug Arrests:</strong> Hardin: 1,284 LaRue: 356 Marion: 920 Meade: 932 Nelson: 1,669 Washington: 862 Kentucky: 1,116 U.S.: Not available <strong>June 30, 2016-June 30, 2017: Objective 1 completed in 2014 among ASAP Boards led by Communicare Regional Prevention Center with participation by LTDHD and other community partners</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>2. To increase community members/organizations participated in awareness campaigns</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Objective 2:</strong> Prescription Drop boxes in all counties</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
for reduction of unauthorized access to prescription medication by a minimum of 2 in each county by July 2017.


Current Drug Arrests:
- Hardin: 1,660
- LaRue: 1989
- Marion: 2014
- Meade: 1664
- Nelson: 2,383
- Washington: 485
- Kentucky: 1,322
- U.S.: Not available

Sheriff’s offices and Police Departments in all counties
Meade County: Outreach to pharmacies and funeral homes regarding the location of the drop boxes

Objective 3:
- Hardin: Generation Rx Curriculum, D.A.R.E.
- LaRue: Red Ribbon Week, LaRue County Exposition Center Wellness Event
- Marion: Truth and Consequences, Student Drug Testing, Red Ribbon Week
- Meade: D.A.R.E, Safety Safari, Red Ribbon Week
- Nelson: Red Ribbon Week, Smoke Free Ad Campaign (PLG-tv), Too Good, Too Good For Violence
- Washington: Truth and Consequences, Student Drug Testing, Red Ribbon Week

3. Reduce underage drinking

1. To inventory by July 2014, on a per county, basis, the incidence of underage drinking prevention initiatives currently underway for youth.

Baseline Underage drinking: County level data not available
- Kentucky: 1,437

Current Underage drinking: County

June 30, 2016-June 30, 2017: Objective 1 completed in 2014 among ASAP Boards led by Communicare RPC.

Objective 2:
<table>
<thead>
<tr>
<th>Objective</th>
<th>Hardin: Communicare RPC, Law enforcement</th>
<th>Kentucky: 2,317</th>
</tr>
</thead>
<tbody>
<tr>
<td>LaRue:</td>
<td>LaRue County Schools, Community Action</td>
<td>Kentucky: 2,317</td>
</tr>
<tr>
<td>Marion:</td>
<td>Heartland Coalition (Circuit clerks,</td>
<td>Kentucky: 2,317</td>
</tr>
<tr>
<td></td>
<td>extension office)</td>
<td>Kentucky: 2,317</td>
</tr>
<tr>
<td>Meade:</td>
<td>Bradenburg City Police, Sherriff’s office</td>
<td>Kentucky: 2,317</td>
</tr>
<tr>
<td>Nelson:</td>
<td>Communicare RPC, law enforcement</td>
<td>Kentucky: 2,317</td>
</tr>
<tr>
<td>Washington:</td>
<td>Communicare RPC, law enforcement,</td>
<td>Kentucky: 2,317</td>
</tr>
<tr>
<td></td>
<td>PATH Coalition</td>
<td>Kentucky: 2,317</td>
</tr>
</tbody>
</table>

Objective 3:
- Hardin: After prom, Project Grad
- LaRue: Red Ribbon Week, LaRue County Exposition Center Wellness Event
- Marion: Red Ribbon Week, Drivers Education
- Meade: D.A.R.E., Project Grad
- Nelson: Underage Drinking Campaign (PLG-tv), Too Good, Too Good For Violence, MADDWalk
- Washington: Red Ribbon Week, Drivers Education
• **Successes and Challenges:** All public schools in the district were voted 100% smoke-free except Meade County Schools and West Point Independent in Hardin County. Wellness coalitions among the district are now progressing toward the use of evidence based programs. Our partnerships and collaborations have continued to grow in order to meet the needs of the community. Community partners now see the importance of data collection in driving program outcomes. However, local data collection remains in silos, and is an area we seek to improve upon.

• **Next Steps:** There are no current revisions to the LTDHD CHIP. The 2018-2021 CHA has shown us different focus areas regarding substance abuse in our region. The upcoming CHIP will address the data reflected in the rising epidemic of drug misuse in the Lincoln Trail Region. We plan to better capture data utilizing software and performance measurement capabilities.

• **Alignment between CHIP and national priorities:**
  
  TU-1 Reduce tobacco use by adults
  
  TU-2 Reduce tobacco use by adolescents
  
  SA-19 Reduce the past-year nonmedical use of prescription drugs
  
  SA-14 Reduce the proportion of persons engaging in binge drinking of alcoholic beverages

**Revisions**

No revisions were made at this time due to the development of the new Community Health Assessment. This second round of the CHA/CHIP we plan to more explicitly define outcome indicators and share our CHIP tracking system that is mutually agreed upon by community partners.

**Conclusion & Next Steps**

The CHIP serves as a roadmap for a continuous health improvement process for the local public health system by providing a framework for the two priority areas. It is not intended to be an all encompassed and static document. Beyond what is included in the CHIP, it is expected that
initiatives and efforts that are currently ongoing will continue. Progress of the work will be evaluated on an ongoing basis to identify areas for possible improvement or revision. Strategies that do not yield intended outcomes and measures that we cannot get data for will be revised. The CHIP will also continue to change and evolve over time as new information and insight emerge at the local, state and national levels. This is an exciting time for public and population health. By working together, we can have a significant impact on the community’s health, improving where we live, work and play and realize the vision of a healthier Lincoln Trail District.

The next comprehensive CHA process began in 2016, as Lincoln Trail District Health Department had chosen to follow the 4-year cycle required by the Public Health Accreditation Board (PHAB). The report and data from that assessment will be used for the Lincoln Trail District to create its second CHIP in late fall of 2017. The new CHIP will go into effect 2018 – 2021. We will formally bring community stakeholders and partners together at the end of 2018 to reexamine priorities and strategies to reflect the most updated CHIP for 2018-2021.
References


