COMMUNITY HEALTH
Assessment

Initiative of the
Carroll, Gallatin, Owen and Pendleton Counties’
Health And Safety Partnerships
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Funding for the Three Rivers District Health Department’s implementation of MAPP and its activities was provided in part by the Foundation for a Healthy Kentucky.
EXECUTIVE SUMMARY

With our escalating health care costs and shrinking resources, Three Rivers has become more committed than ever to identifying public health issues and addressing those issues with policies to increase the quality of life in our communities. By utilizing the Mobilizing for Action through Planning and Partnerships (MAPP), we achieved our goal of initializing a comprehensive strategic planning process. We are pleased to present our Community Health Assessment (CHA), a combined effort by Three Rivers District Health Department and its Health and Safety Partnerships. These dedicated partnerships are comprised of committed citizens from a cross section of disciplines listed on pages 5-8. Our partners were dedicated to completing a broad range of assessments and developing a “real-time snapshot” of our counties’ health and safety status. From the assessments, several health and safety related issues that adversely impact our communities were identified. Our CHA not only provides a picture of the current health status of our community, but it also leads us to interventions for improving the health and safety of our residents. These improvements are a direct result of the collaboration of many dedicated people.

By following the MAPP process, the following four assessments were completed to achieve health and safety across our communities:

• National Public Health Performance Standards Program (NPHPSP): measures the capacity of the local public health system to conduct essential public health services.
• Community Themes and Strengths: a community health and safety survey that provides an in-depth look at the health related behaviors of the many different segments of the communities.
• Community Health Status: statistical information gathered from various sources to provide indicators of current health status in the community,
• Forces of Change Assessment: takes into account external forces of change, i.e. social, environmental, governmental and economic changes that have an impact on health services.

Analyzing the data from these assessments facilitated many conversations which led to developing our long-term, strategic health and safety plans. The plans are specific to each county and contain detailed goals and objectives directed at the most significant health issues in our communities. By prioritizing these goals, our partnerships can coordinate and properly allocate funds to where they will have the most beneficial impact.

We welcome your feedback to our Community Health Assessment and encourage you to learn more about TRDHD’s Health and Safety Partnerships. “Like” us on Facebook, follow us on Twitter, and visit us at www.trdhd.com to find out how Carroll, Gallatin, Owen and Pendleton Counties are becoming healthier!

Sincerely,

Georgia Heise, DrPH
District Director
The Three Rivers District Health Department (TRDHD) and the Health and Safety Partnerships (HSP) of each county in the district are committed to making a positive difference in the health and safety concerns of the residents. These HSP are engaged in community-wide strategic planning to improve the communities' health and safety. The goal is to prioritize public health issues and identify resources to address health, safety, and quality of life issues using the national Mobilizing for Action through Planning and Partnerships (MAPP) model.

The HSP 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 MAPP process, this project could not have started.

We are pleased to present the results of the recent Community Health Assessment to residents, community organizations and civic groups. This is the result of a three-year process culminating the HSP's decision to target the broadest areas of need to have the most impact on their communities. Several detours were taken along the journey and new roads were forced to be paved. Each county continues on the road to achieving a healthier and safer community for their residents.

Community leaders who participated in this process are listed on the following pages within their individual counties in this document.

The “Egg Chart” depicts a sample of some people and organizations that comprise the public health system.

Three Rivers District Health Department (TRDHD) is a collaboration of four rural counties, Carroll, Gallatin, Owen, and Pendleton, in the northern portion of the Commonwealth of Kentucky. Each county has a health center within its borders and serves an average of 11,280 residents. The District Office is situated in Owenton, Kentucky. A local board of health serves each county and a district board of health serves the entire district. A director oversees the district’s day-to-day operations and reports to the district board of health.

The service area for TRDHD covers 861.4 squares miles. The communities served have small populations in relation to their large geographic area. The population ratio is 50% male and 50% female. The majority of residents are Caucasian 97.6%, with Blacks representing 1.3% and Hispanic or Latino’s 1.5%.

There is minimal industry in the counties. The local schools are the largest employers in two of the four counties. Gallatin and Carroll have several large factories that provide employment for the area. Due to recent changes in the economy the District’s unemployment rate has grown from an average of 6.3% in April 2008 to 11.3% in June 2010.

The “Egg Chart” depicts a sample of some people and organizations that comprise the public health system.

Demographics

<table>
<thead>
<tr>
<th></th>
<th>Carroll</th>
<th>Gallatin</th>
<th>Owen</th>
<th>Pendleton</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>10,827</td>
<td>8,071</td>
<td>11,432</td>
<td>14,992</td>
</tr>
<tr>
<td>% Male</td>
<td>50.3</td>
<td>49.7</td>
<td>50.1</td>
<td>50.1</td>
</tr>
<tr>
<td>% Female</td>
<td>49.7</td>
<td>50.3</td>
<td>49.9</td>
<td>49.9</td>
</tr>
<tr>
<td>% Over 65 Years of Age</td>
<td>12.5</td>
<td>10.3</td>
<td>14.0</td>
<td>10.4</td>
</tr>
<tr>
<td>% White</td>
<td>95.2</td>
<td>96.7</td>
<td>97.0</td>
<td>98.4</td>
</tr>
<tr>
<td>% Black</td>
<td>1.9</td>
<td>1.6</td>
<td>1.1</td>
<td>0.5</td>
</tr>
<tr>
<td>% Hispanic</td>
<td>3.2</td>
<td>1.0</td>
<td>1.0</td>
<td>0.7</td>
</tr>
<tr>
<td>% Occupied Housing Units</td>
<td>88.8</td>
<td>86.3</td>
<td>76.4</td>
<td>89.8</td>
</tr>
<tr>
<td>Average Household Size</td>
<td>2.51</td>
<td>2.68</td>
<td>2.55</td>
<td>2.75</td>
</tr>
<tr>
<td>Per Capita Personal Income</td>
<td>$25,966</td>
<td>$22,506</td>
<td>$18,426</td>
<td>$21,234</td>
</tr>
<tr>
<td>% High School Graduation</td>
<td>68</td>
<td>68</td>
<td>68</td>
<td>73</td>
</tr>
</tbody>
</table>
The only federally qualified health center (FQHC) in the district is in Gallatin County. It was established from a grant after Gallatin County was targeted as a Medically Underserved Area in 2007. The District contains two hospitals, one in Carroll County and the other in Owen County. Most residents in the TRDHD district have to travel approximately one hour for specialty services. All counties in the district are designated Mental Health and Primary Care Health Professional Shortage Areas (HPSA). There are 18 primary care physicians and 12 dentists in the District. On average 22.5% of the population uses Medicaid services however only two dentists accept Medicaid or Passport.

Each county within Three River District Health Department has health issues distinctive to their populations. The rise of unemployment in all four counties 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 present a challenge. A focused emphasis on utilization of the Kentucky Prescription Assistance Program has enabled many unemployed individuals to obtain their much needed medications. This has been made available in each the four counties.

Health literacy issues in Carroll County, which has a higher Hispanic population, continues to be an issue of concern. A team consisting of representatives from the Jefferson County Technical College, Carroll County Health Department, Carroll County Community Development Center, Carroll County Memorial Hospital and North Key Mental Health Center are currently working on funding a resource individual which will give direction to those who speak English as a second language. This program will also include those who are unaware of all the resources that are available within their county. A partnership is being sought out with the penal system to mandate inmates, upon their release, to meet with this resource person to obtain information where help is available upon their release.

Diabetes is being addressed through a recently certified Diabetic Educator at Three Rivers. This educator partners with the University of Kentucky Family and Consumer Science Agents to present programs within each community. A concentrated effort to partner with local physicians for one-on-one referrals has also proved successful in each county.

The collaboration with the local school system has proved invaluable in making strides toward Smoke Free School Campus’. This expected struggle, due to being in the middle of the “tobacco belt” is one that has met many obstacles. The participation of school superintendents and other staff members on the health and safety partnership has bridged a gap that allowed great strides toward achieving this initiative.

Zumba (a Latin dance exercise) has proved to be an exciting program that has increased physical activity in our counties. Obesity continues to be an issue and this program is user friendly for all ages. By increasing physical activity we can hopefully affect many other challenges e.g. cardiovascular, obesity and others.

The MAPP process enabled partners to establish a systematic method to establish goals, objectives and action steps to improve the health and safety of their community. The four MAPP assessments were completed; The Community Themes and Strengths, Local Public Health System, Community Health Status and Forces of Change. The results of these assessments were compiled in a chart for each county. Community partners gathered for a regular monthly meeting where they arrived at the top six issues they felt were the most important to address. Six fishbowls labeled with each issue were placed on a table and partners were given two pennies. They were asked to give their two cents worth and drop those into the bowl which they felt needed to be a priority. Thus priorities were established for each county and are listed in the Goals, Objectives and Action Steps for each county. Monthly meetings are as follows:

- Carroll County Health and Safety Partnership - 3rd Tuesday monthly
- Gallatin County Collaboration for Better Health and Safety - 4th Monday monthly
- Owen Wellness Engagement Network (O.W.E.N.) - 3rd Wednesday monthly
- Pendleton County Community Service Alliance (CSA) - Last Wednesday of each month

Many efforts are being made by Three Rivers District Health Department and the public health system to change behaviors, affect lifestyle, and instill an understanding of what being healthy means today and how it will affect each individual’s future.
Mobilizing for Action through Planning and Partnerships (MAPP) is a strategic tool utilized by all four counties of the Three Rivers District Health Department. 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 is initiated when the local public health system (all those concerned about the health and safety of their community) organizes themselves, recruits participants, and prepares to implement MAPP. The second phase, Visioning, provides a framework for pursuing long-range community goals.

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 in identifying issues and formulating goals and strategies to address each issue.

Conducting MAPP should create a sustained community initiative that ultimately leads to community health improvement.
The Assessments
Local Public Health System Assessment

Each county participated in the National Public Health Performance Standards Program and found strengths as well as opportunities for improvement. The assessment was based upon the 10 Essential Public Health Services and how well the community was addressing each service. The 10 Essential Public Health 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

In each of the individual county’s section you will find a quick overview of the system’s performance in each of the 10 Essential Public Health Services (EPHS). Each site’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 (anyone concerned about the health and safety of their community) responded to assessment questions using the following response options below. These same categories are used in the reports to characterize levels of activity for Essential Services and model standards. The results are documented under each county in this document.

<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 is 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 capable of improving the health of populations. 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 a public health system through periodic assessments guided by model performance standards. This enables them to use resources more effectively and efficiently while improving health intervention services.
Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment identifies community assets, perceptions about quality of life in the community and themes that interest and engage the community. Three counties Carroll, Gallatin and Owen participated in the community survey which can be found in this document’s appendix. Pendleton County had previously participated in a community survey and used those statistics to target issues of importance. The surveys were distributed at community events, local banks, Community Action Center, libraries, schools and several other locations in the community. Pendleton County had previously participated in a community survey and used that data to identify issues of importance. You can find what the residents of each county listed as the top three health problems and risky behaviors in their county’s section of this document.

Community Health Status Assessment

This Community Health Status Assessment characterizes the health status of the community. It assists in answering the question “How healthy are we?” This assessment uses eleven core indicators to answer three questions: 1. Who are we and what do we have to offer? 2. What is contributing to the health of our community? 3. What is the status of our health? Data about health status, quality of life and risk factors was compiled in 2008 using the Assessment Protocol for Excellence in Public Health (APEXPH). The following eleven categories of data were analyzed:

- Demographic Characteristics
- Socioeconomic Characteristics
- Health Resource Availability
- Quality of Life
- Behavior Risk Factors
- Environmental Health Indicators
- Social and Mental Health
- Maternal and Child Health
- Death, Illness and Injury
- Infectious Disease
- Sentinel Events

Sources of data are available through national, state or local databases. The completed APEXPH for each county is available on the TRDHD website.

Forces Of Change Assessment

The Forces of Change Assessment identifies forces that are or will be affecting the community or the local public health system. It addresses uncontrollable factors that impact the environment, trends, legislation, funding shift, politics and other issues. The Forces of Change Assessment was conducted as a brainstorming session during a Health and Safety Partnership meeting in each of the four counties. Questions posed to identify Forces of Change were:

- What has occurred recently that may affect our local public health system or community?
- What may occur in the future?
- Are there any trends occurring that will have an impact? Describe the trends.
- What forces are occurring locally? Regionally? Nationally? Globally?
- What characteristics of our jurisdiction or state may pose an opportunity or threat?
- What may occur or has occurred that may pose a barrier to achieving the shared vision?

The results of these sessions can be found in each county’s section of this document.
Kentucky Health Facts

The Foundation for a Healthy Kentucky provides data for each county within the Commonwealth of Kentucky. This data addresses several indicators and are listed in the tables below. These indicators are:

- Social and Behavioral Indicators
- Health Outcomes
- Access to Care
- Maternal and Child Health

For those counties not having a sufficient number of responses to the survey methods, “county groups” were established to obtain more accurate data. These “county groups” were developed through a methodology which considered socioeconomic, demographic, and health-related statistics at the county level, together with geographical proximity and number of BRFSS respondents, to cluster counties based on similar characteristics. “County groups” are expected to provide more stable rates and reliable estimates for small areas in Kentucky. When “county group” data was used, an asterisk (*) was used for indication. Four bullets (****) indicate no data was available.

### Social & Behavioral Indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Carroll</th>
<th>Gallatin</th>
<th>Owen</th>
<th>Pendleton</th>
<th>Kentucky</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of Physical Activity (% of Adults)</td>
<td>29*</td>
<td>29*</td>
<td>29*</td>
<td>31</td>
<td>30</td>
<td>****</td>
</tr>
<tr>
<td>Prevalence of Obesity (% Adult Obesity)</td>
<td>33*</td>
<td>33*</td>
<td>33*</td>
<td>31</td>
<td>31</td>
<td>****</td>
</tr>
<tr>
<td>Prevalence of Overweight (% Adults)</td>
<td>66*</td>
<td>66*</td>
<td>66*</td>
<td>64</td>
<td>68</td>
<td>****</td>
</tr>
<tr>
<td>Recommended Fruit and Vegetable Intake (% Adults)</td>
<td>17.6*</td>
<td>17.6*</td>
<td>21.3</td>
<td>29.2</td>
<td></td>
<td>****</td>
</tr>
<tr>
<td>Prevalence of Smoking (% Adults)</td>
<td>27*</td>
<td>27*</td>
<td>27*</td>
<td>33</td>
<td>26</td>
<td>****</td>
</tr>
<tr>
<td>Tooth Loss (% of Adults missing 6 or More Teeth)</td>
<td>27*</td>
<td>27*</td>
<td>32</td>
<td>30</td>
<td></td>
<td>****</td>
</tr>
<tr>
<td>Limited Activities (% of Adults who could not perform work or household tasks due to physical, mental or emotional problems)</td>
<td>23*</td>
<td>23*</td>
<td>23*</td>
<td>38</td>
<td>25</td>
<td>****</td>
</tr>
<tr>
<td>Drug Arrest (per 100,000 population)</td>
<td>1,093</td>
<td>1,573</td>
<td>615</td>
<td>1,209</td>
<td>1,1430</td>
<td>****</td>
</tr>
<tr>
<td>Violent Crime Offenses (per 100,000 population)</td>
<td>420.3</td>
<td>187.6</td>
<td>216.4</td>
<td>185.6</td>
<td>267.0</td>
<td>469.0</td>
</tr>
<tr>
<td>Binge Drinking (% Adults)</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>9</td>
<td>11</td>
<td>****</td>
</tr>
</tbody>
</table>

Centers for Disease Control and Prevention (CDC) and Kentucky Department for Public Health. Behavioral Risk Factor Surveillance System Data as analyzed at the county level by the University of Kentucky Markey Cancer Control Program and College of Public Health. 2007-2009
### Health Outcomes

**Access to Care**

<table>
<thead>
<tr>
<th>Access to Care</th>
<th>Carroll</th>
<th>Gallatin</th>
<th>Owen</th>
<th>Pendleton</th>
<th>Kentucky</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Physicians</td>
<td>10</td>
<td>3</td>
<td>10</td>
<td>3</td>
<td>10,115</td>
<td>23.0</td>
</tr>
<tr>
<td>Primary Care Physicians</td>
<td>7</td>
<td>3</td>
<td>7</td>
<td>3</td>
<td>4,241</td>
<td></td>
</tr>
<tr>
<td>Physician Specialists</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>5,874</td>
<td></td>
</tr>
<tr>
<td>Registered Nurses</td>
<td>45</td>
<td>43</td>
<td>96</td>
<td>110</td>
<td>47,948</td>
<td></td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>2</td>
<td>2,797</td>
<td></td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>722</td>
<td></td>
</tr>
<tr>
<td>Pharmacists</td>
<td>4</td>
<td>3</td>
<td>6</td>
<td>8</td>
<td>4,524</td>
<td></td>
</tr>
<tr>
<td>Dentist</td>
<td>4</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>2,461</td>
<td></td>
</tr>
<tr>
<td>Uninsured Population (% adults under age 65)</td>
<td>18</td>
<td>22</td>
<td>25</td>
<td>25</td>
<td>19</td>
<td>22</td>
</tr>
<tr>
<td>% Population Medicaid Enrolled</td>
<td>24</td>
<td>25</td>
<td>22</td>
<td>19</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>Primary Care HPSAs</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>N/A</td>
</tr>
<tr>
<td>Dental HPSAs</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Mental HPSA</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>N/A</td>
</tr>
<tr>
<td>MUA/Ps</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Centers for Disease Control and Prevention (CDC) and Kentucky Department for Public Health. *Behavioral Risk Factor Surveillance System Data* as analyzed at the county level by the University of Kentucky Markey Cancer Control Program and College of Public Health. 2007-2009

### Access to Care

<table>
<thead>
<tr>
<th>Health Outcomes</th>
<th>Carroll</th>
<th>Gallatin</th>
<th>Owen</th>
<th>Pendleton</th>
<th>Kentucky</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious Disease</td>
<td>1.4</td>
<td>14.3</td>
<td>1.3</td>
<td>1.0</td>
<td>8.0</td>
<td>23.0</td>
</tr>
<tr>
<td>Motor Vehicle Deaths (per 100,000 miles driven)</td>
<td>3.4</td>
<td>1.8</td>
<td>0.5</td>
<td>1.4</td>
<td>2.1</td>
<td>1.5</td>
</tr>
<tr>
<td>Occupational Fatalities</td>
<td>13.6</td>
<td>0.0</td>
<td>6.8</td>
<td>0.0</td>
<td>8.0</td>
<td>5.0</td>
</tr>
<tr>
<td>Premature Deaths (Years of Potential Life Lost Prior to Age 75)</td>
<td>6,121.3</td>
<td>7,415.0</td>
<td>11,160.9</td>
<td>9,942.9</td>
<td>9,111.0</td>
<td>7,562.0</td>
</tr>
<tr>
<td>Mentally Unhealthy Days (per month)</td>
<td>4*</td>
<td>4*</td>
<td>4*</td>
<td>8</td>
<td>4</td>
<td>****</td>
</tr>
<tr>
<td>Less than Good Health (% Adults)</td>
<td>19*</td>
<td>19*</td>
<td>19*</td>
<td>42</td>
<td>22</td>
<td>****</td>
</tr>
<tr>
<td>Physically Unhealthy Days (per month)</td>
<td>5*</td>
<td>5*</td>
<td>5*</td>
<td>6</td>
<td>5</td>
<td>****</td>
</tr>
<tr>
<td>Prevalence of Hypertension (% Adults)</td>
<td>34.2*</td>
<td>34.2*</td>
<td>34.2*</td>
<td>35.5</td>
<td>****</td>
<td>****</td>
</tr>
<tr>
<td>Lung and Bronchus Cancer Deaths (age adjusted per 100,000)</td>
<td>74</td>
<td>98</td>
<td>83</td>
<td>72</td>
<td>75</td>
<td>****</td>
</tr>
<tr>
<td>Colorectal Cancer Deaths</td>
<td>****</td>
<td>****</td>
<td>****</td>
<td>30</td>
<td>20</td>
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<tr>
<td>Prevalence of Diabetes (% Adults)</td>
<td>8*</td>
<td>8*</td>
<td>8*</td>
<td>9</td>
<td>10</td>
<td>****</td>
</tr>
<tr>
<td>Prevalence of Asthma (% Adults)</td>
<td>15*</td>
<td>15*</td>
<td>15*</td>
<td>22</td>
<td>14</td>
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<tr>
<td>Heart Disease Deaths</td>
<td>266.7</td>
<td>317.0</td>
<td>298.3</td>
<td>243.2</td>
<td>224.0</td>
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<tr>
<td>Stroke Deaths</td>
<td>40.5</td>
<td>34.3</td>
<td>18.4</td>
<td>42.1</td>
<td>47.0</td>
<td>****</td>
</tr>
</tbody>
</table>

Centers for Disease Control and Prevention (CDC) and Kentucky Department for Public Health. *Behavioral Risk Factor Surveillance System Data* as analyzed at the county level by the University of Kentucky Markey Cancer Control Program and College of Public Health. 2007-2009
## Maternal & Child Health

<table>
<thead>
<tr>
<th>Metric</th>
<th>Carroll</th>
<th>Gallatin</th>
<th>Owen</th>
<th>Pendleton</th>
<th>Kentucky</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequacy of Prenatal Care (%)</td>
<td>84</td>
<td>89</td>
<td>86</td>
<td>90</td>
<td>85</td>
<td>75</td>
</tr>
<tr>
<td>Infant Mortality (per 100,000 live births)</td>
<td>2.5</td>
<td>2.8</td>
<td>7.4</td>
<td>9.1</td>
<td>6.7</td>
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<tr>
<td>Low Birth Weight (%) of live births</td>
<td>9</td>
<td>10</td>
<td>7</td>
<td>9</td>
<td>9</td>
<td>****</td>
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<tr>
<td>Teen Births (rate per 1,000 women ages 15-19)</td>
<td>89.0</td>
<td>86.9</td>
<td>63.9</td>
<td>44.6</td>
<td>52.1</td>
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<tr>
<td>Immunization Coverage (%) children 19-35 months of age</td>
<td>79</td>
<td>84</td>
<td>81.0</td>
<td>85</td>
<td>80</td>
<td>81</td>
</tr>
<tr>
<td>% of High School Students that Smoke</td>
<td>31</td>
<td>30</td>
<td>22</td>
<td>22</td>
<td>25</td>
<td>23</td>
</tr>
<tr>
<td>% Uninsured Children below age 19</td>
<td>9</td>
<td>13</td>
<td>14</td>
<td>14</td>
<td>10</td>
<td>****</td>
</tr>
<tr>
<td>Medicaid and KCHIP Enrollment**</td>
<td>77</td>
<td>83</td>
<td>56</td>
<td>94</td>
<td>****</td>
<td>****</td>
</tr>
</tbody>
</table>

**Counties were subsequently ranked (from 1 to 120) according to the percentage of children enrolled in KCHIP or Medicaid.

Centers for Disease Control and Prevention (CDC) and Kentucky Department for Public Health. Behavioral Risk Factor Surveillance System Data as analyzed at the county level by the University of Kentucky Markey Cancer Control Program and College of Public Health, 2007-2009

## Carroll County Partners

- Sandi Alexander  
  Carroll County Memorial Hospital
- Shelia Anderson  
  Carroll County Schools
- Grace Angotti  
  Carroll County Cooperative Extension Service
- Mark Bates  
  Carroll County Fiscal Court
- Jennifer Belisle  
  Northern Kentucky Community Action Center
- Denise Bingham  
  Three Rivers District Health Department
- Floyd Bowling  
  Carroll County Fiscal Court
- Christine Branstetter  
  Arkema
- Marketta Brock  
  Ghent Fire Department
- Julie Brown  
  Interim Healthcare
- Brooke Butcher  
  Family Worship Center
- Ray Clem  
  New Horizon’s Assisted Living
- Roy Clifford  
  Interim Care
- McKenzie Combs  
  Field Representative for Congressman Geoff Davis
- Sue Davis  
  NorthKey
- Peggy Dellaquila  
  Carroll County Senior Citizens
- Rachel Dermon  
  Three Rivers District Health Department
- Ellen Foster  
  Interim Care
- Jeff Fremin  
  Carroll County Schools
- Ashley Froman  
  Three Rivers District Health Department
- Ron Gillespie  
  Kentuckians Encouraging Youth to Succeed
- Gary Goetz  
  North Key
- Sharon Graves  
  The News Democrat
- Sister Paul Gohs  
  St. John Evangelist Catholic Church
- Georgia Heise  
  Three Rivers District Health Department
- Mike Humphrey  
  Carroll County Detention Center
- Robin Huesman  
  Family Ties Resource Center
- Lisa James  
  Superintendent Carroll County Schools
- Morgan Juett  
  Three Rivers District Health Department
Carroll County Partners (Cont.)

Dr. Richard Kates    Carrollton Chiropractor
Vickie Kemper       Northern Kentucky Community Action
Glenda Liter        Carroll County Schools
Joan Moore          Carroll County Community Development Cooperation
Allison Napier      Three Rivers District Health Department
Peggy Ogburn        Carroll County Memorial Hospital
Bill Osborne        Carroll Co. Board of Health
Denise Payton       Jefferson Community and Technical College
Justin Pittman      Three Rivers District Health Department
Christina Poole     Field Representative for Senator Geoff Davis
Kanute Rarey        Chief Executive Officer/Carroll County Hospital
Ben Smith           Carroll County Sheriff’s Office
Lonnie Sundermeyer  Lonnie’s Langniappe Catering
Judge Shorty Tomlinson    Carroll County Judge Executive
Rachel Troxell      Carroll County Chamber of Commerce
Julie Truckenmiller Carroll County Schools
April Roberts-Tywick Pritchard Committee
Alan Wade           Green Valley Health and Rehab Center
Kelly Warren        Carroll County Head Start
Charles Webb        Carroll County Emergency Management
Ed Webb             Carroll County Emergency Management
Charlie Webster     Webster’s Drugs
Tammy Welch         Carroll County Schools
David Wilhoite      Carroll County Coroner
Mike Wilhoite       Carrollton Police Department
M. Scott Williams   General Butler State Resort Park
Pam Williams        Carroll County Head Start
Rebecca Wilson      Three Rivers District Health Department
Bob Young           Citizens of Carroll County Faith Community

Carroll County
Local Public Health System Performance Assessment
Report of Results
3/06/2008

<table>
<thead>
<tr>
<th></th>
<th>Monitor Health Status to Identify Community Health Problems</th>
<th>51</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Diagnose and Investigate Health Problems and Health Hazards</td>
<td>71</td>
</tr>
<tr>
<td>3</td>
<td>Inform, Educate, and Empower People about Health Issues</td>
<td>48</td>
</tr>
<tr>
<td>4</td>
<td>Mobilize Community Partnerships to Identify and Solve Health Problems</td>
<td>28</td>
</tr>
<tr>
<td>5</td>
<td>Develop Policies and Plans that Support Individual and Community Health Efforts</td>
<td>54</td>
</tr>
<tr>
<td>6</td>
<td>Enforce Laws and Regulations that Protect Health and Ensure Safety</td>
<td>60</td>
</tr>
<tr>
<td>7</td>
<td>Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</td>
<td>36</td>
</tr>
<tr>
<td>8</td>
<td>Assure a Competent Public and Personal Health Care Workforce</td>
<td>56</td>
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<tr>
<td>9</td>
<td>Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services</td>
<td>40</td>
</tr>
<tr>
<td>10</td>
<td>Research for New Insights and Innovative Solutions to Health Problems</td>
<td>56</td>
</tr>
</tbody>
</table>

Overall Performance Score 50

Carroll County
Community Themes and Strengths Survey Results

<table>
<thead>
<tr>
<th>Health Problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancers</td>
</tr>
<tr>
<td>Alcohol/Drug Abuse</td>
</tr>
<tr>
<td>Heart Disease/Stroke</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Risky Behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Abuse</td>
</tr>
<tr>
<td>Drug Abuse</td>
</tr>
<tr>
<td>Tobacco Use</td>
</tr>
</tbody>
</table>
Carroll County
Forces of Change

What could affect our community improvement efforts that we may have no control over?

<table>
<thead>
<tr>
<th>Carroll</th>
</tr>
</thead>
<tbody>
<tr>
<td>Technology</td>
</tr>
<tr>
<td>Electronic Medical Records</td>
</tr>
<tr>
<td>Economy</td>
</tr>
<tr>
<td>Money/Funding</td>
</tr>
<tr>
<td>Water/Disaster</td>
</tr>
<tr>
<td>Aging Population</td>
</tr>
<tr>
<td>Transportation Needs</td>
</tr>
<tr>
<td>Changes in Family Unit</td>
</tr>
<tr>
<td>Decrease Community Support</td>
</tr>
<tr>
<td>Merging Hospitals</td>
</tr>
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</table>

Strengths and Challenges

<table>
<thead>
<tr>
<th></th>
<th>Strengths</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carroll</td>
<td>Low Diabetes</td>
<td>Physical Activity</td>
</tr>
<tr>
<td></td>
<td>Active Population</td>
<td>Uninsured Population</td>
</tr>
<tr>
<td></td>
<td>Low Breast Cancer Rate</td>
<td>Low Birth weight</td>
</tr>
<tr>
<td></td>
<td>Low Prostate Cancer Rate</td>
<td>Colorectal Cancer</td>
</tr>
<tr>
<td></td>
<td>High Smoking</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Poor Oral health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High Occupational Fatalities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High Cardiovascular Deaths</td>
<td></td>
</tr>
</tbody>
</table>

Carroll County Health and Safety Partnership

Carroll County will be a community with the availability of and access to all health and safety services. It will be a community that thinks well, eats well and moves well. A strong community collaborative will exist to address and improve health and safety issues.

Desires for CC:
- Good Schools
- Good Place to Raise Children
- Good Jobs / Healthy Economy

Health Problems:
- Cancers
- Alcohol/Drug Abuse
- Heart Disease/Stroke

How They View Themselves & Others:
-Somewhat Healthy CC Residents
-Somewhat Safe CC Residents

Risky Behaviors:
- Alcohol Abuse
- Drug Abuse
- Tobacco Use

Technology Change
- Electronic Medical Records

Economy
- Money/Funding
- Water/Disaster

Aging Population
- Hispanic Population
- Transportation Needs

High Incidence
- Cardiovascular deaths
- Uninsured Population

Low Physical Activity
- Low Birthweight
- Colorectal Cancer
- Poor Oral Health

Mobilize Partnerships
Link to Health Services
Evaluate Services

Community Themes and Strengths Assessment

Community Health Status Assessment

Local Public Health System Assessment

Forces of Change Assessment

Community Health Assessment
Carroll County Priority Health And Safety Issues

**Goals Objectives Strategies**

**Improve the oral health of Carroll County.**

<table>
<thead>
<tr>
<th>Conts</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
|       | Improve the oral health of Carroll County. | 1. Actively recruit more dentists in the area.*  
2. Partner with local and state agencies to provide dental healthcare to the community by providing dental health screening at schools through traveling dental agencies such as UK Dental Van, Big Smiles or Kids First.**  
3. Notify residents when community screening events will occur.***  
4. Identify the children in the county covered by Medicaid or Passport and disseminate information to their parents regarding which dentist in the area accept Medicaid or Passport and encourage them to receive biannual screening services.****  
5. Continue implementing fluoride varnish on appropriate ages within the health department's services.**  
6. Partner with local and state agencies to provide dental health education to the community through work with local groups and clubs by providing seminars, education materials and instruction on oral health, tooth brushing and biannual exams.*  
7. Ensure all second graders receive a toothbrush and toothpaste and are instructed on the proper way to brush their teeth. Get them to practice this after school breakfast and after school lunch as an adjunct to hand washing.** |

**Barriers to care will be identified by June, 2012.**

<table>
<thead>
<tr>
<th>Conts</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Barriers to care will be identified by June, 2012.</td>
<td>1. In a survey of community residents include questions regarding barriers to receiving dental healthcare in order to identify those which need to be addressed.*</td>
</tr>
</tbody>
</table>

**Increase the number of adults receiving dental screening services by 20% by 2013.**

<table>
<thead>
<tr>
<th>Conts</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
|       | Increase the number of adults receiving dental screening services by 20% by 2013. | 1. Inform, educate and empower residents regarding the importance of dental health.**  
2. Inform residents on community dental screening events.**  
3. Host dental screening events.**  
4. Inform residents of reduced dental rates in the area.***  
5. Identify and remove barriers to residents seeking dental care.* |

*National Prevention Strategy - Clinical and Community Preventive Services - Reduce barriers to accessing clinical and community preventive services, especially among populations at risk.  
**National Prevention Strategy - Clinical and Community Preventive Services - Support implementation of community based preventive services and enhance linkages with clinical care.  
***National Prevention Strategy - Clinical and Community Preventive Services - Use payment and reimbursement mechanisms to encourage delivery of preventive services.

Carroll County Priority Health And Safety Issues (Cont.)

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
|      | Participation in physical activity events will increase 20% by 2014. | 1. Partner with local groups to provide guidelines for physical activity and how to achieve goals.*  
2. Partner with schools to educate students on the need for physical activity and participate in a walkability survey.**  
3. Conduct a walkability survey, identify and address those impediments to walkability in the community.***  
4. Continue to promote Zumba, Walk Away the Pounds, Yoga and Splash into Health Clubs.****  
5. Sponsor and/or promote 5K races.****  
6. Continue to work on the Park to Park Trail Project.***  
7. Sponsor and/or promote biking events.****  
8. Incorporate the following in H.D. clinics and educate local physicians on the importance of: Aspirin, Blood Pressure Control, Cholesterol Reduction and Smoking Cessation (ABCS), also decreasing sodium, saturated and trans fat intake, and lifestyle interventions to modify risk factors such as obesity and physical activity.**** |

*National Prevention Strategy - Active Living - Assess physical activity levels and provide education, counseling and referrals.  
**National Prevention Strategy - Active Living - Promote and strengthen school and early learning policies and program that increase physical activities.  
***National Prevention Strategy - Active Living - Encourage community design and development that supports physical activity.  
****National Prevention Strategy - Clinical and Community Preventive Services - Support the National Quality Strategy’s focus on improving cardiovascular health.
<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| **Carroll County will be smoke free.** | Carroll County will be a smoke free community by June, 2016. | 1. Disseminate information regarding risks of smoking and secondhand smoke.*  
2. Educate public and small business owners regarding the effects of smoke free policies on business.*  
3. Assist business and individuals in smoke/tobacco free policy planning and implementation.*  
4. Attend advocacy trainings and public forums pertaining to tobacco usage.*  
5. Understand government functions and resources pertaining to tobacco free policies.*  
6. Educate other smoke free advocates about opposition arguments and effective responses.*  
7. Assist county government and Board of Health to develop enforcement plans for smoke free ordinances and regulations.* |
| **Tobacco use in minors will decrease 20% by June, 2014.** | | 1. Organize annual Kick Butts Day Programs in Middle School and/or High School.*  
2. Work with youth groups to educate minors on the hazards of smoking.*  
3. Work with youth groups to educate minors on the hazards of secondhand smoke.*  
4. Educate youth through school and youth groups on the health benefits of a smoke free community.*  
5. Advocate for enforcement of laws against tobacco sales to minors.*  
6. Campaign for Tobacco Free Kids.* |

*National Prevention Strategy - Tobacco Free Living - Use media to educate and encourage people to live tobacco free.  
** National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.  
Gallatin County Partners

Barry Alexander   Gallatin County Emergency Management
Rosie Allen    Gallatin County Extension Service
Winslow Baker    Gallatin County Community Development
Carole Brown    Gallatin County Sheriff’s Office
Pat Hendren Callen   Family Resource Center
Diane Coleman Three Rivers District Health Department
Adam Craft Triad Health Systems
Mary Jane Day    Community Resident
Conite Flowers Gallatin County Extension Service
Denny French    Gallatin County Judge’s Office
Barbara Finfrock Community Resident
Judge Kenny French Gallatin County Judge
Shirley French Gallatin County Library
Mark Garnett Garnett-New-McDonald Funeral Home
Joann Haymond    Community Resident
David Hull    Gallatin County Extension Service
Dr. Ben Kutnicki Warsaw Family Medicine
Sue LeGrand    Gallatin County Schools
Judy Morley    Gallatin County Board of Health
Mary Jo Mylor Community Resident
Marilyn Stevenson Gallatin County Senior Citizens
Lora Stewart    Gallatin County Extension Service
Pam Tudor    Family Resource Center
Charles Williams Kentucky Speedway
Betty Wright    Community Resident

Gallatin County
Local Public Health System Performance Assessment
Report of Results
3/04/2008

1 Monitor Health Status to Identify Community Health Problems 41
2 Diagnose and Investigate Health Problems and Health Hazards 76
3 Inform, Educate, and Empower People about Health Issues 64
4 Mobilize Community Partnerships to Identify and Solve Health Problems 73
5 Develop Policies and Plans that Support Individual and Community Health Efforts 76
6 Enforce Laws and Regulations that Protect Health and Ensure Safety 71
7 Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable 59
8 Assure a Competent Public and Personal Health Care Workforce 71
9 Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services 62
10 Research for New Insights and Innovative Solutions to Health Problems 71

Overall Performance Score 66

Gallatin County Community Themes and Strengths
Survey Results

Health Problems
Cancers
Alcohol/Drug Abuse
Teenage Pregnancy

Risky Behaviors
Alcohol Abuse
Drug Abuse
Tobacco Use
Gallatin County

Forces of Change

What could affect our community improvement efforts that we have no control over?

- Loss of Funding
- Stimulus Package
- Education Goals
- Lack of Dental Services and Transportation

Strengths and Challenges

<table>
<thead>
<tr>
<th>County</th>
<th>Strengths</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gallatin</td>
<td>Low Obesity</td>
<td>Uninsured Population</td>
</tr>
<tr>
<td></td>
<td>Good Oral Health</td>
<td>Low Birth weight</td>
</tr>
<tr>
<td></td>
<td>Low Diabetes</td>
<td>Cardiovascular Deaths</td>
</tr>
<tr>
<td></td>
<td>Active Population</td>
<td>Breast Cancer</td>
</tr>
<tr>
<td></td>
<td>Prostate Cancer</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High Smoking</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Low Physical Activity</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Limited Primary Care Physicians</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High Lung/Bronchus Cancer Rate</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High Colorectal Cancer Rate</td>
<td></td>
</tr>
</tbody>
</table>

Kentucky Institute of Medicine 2007
### Gallatin County Priority Health and Safety Issues

**Goal**

**Objectives**

**Strategies**

| Gallatin County residents will experience an increase in cancer screenings. | Breast cancer, cervical cancer, colorectal cancer and prostate cancer screenings in Gallatin County will increase 10% by 2013. | 1. Work with Gallatin County Women's Cancer Coalition to promote breast and cervical cancer screenings. *  
2. Work with local health care providers to promote cancer screenings. *  
3. Work with Gallatin County Collaboration for Better Health & Safety to promote cancer screenings. *  
4. Increase breast cancer screenings by offering the mobile mammogram van in more areas of the county e.g. Sparta, Glencoe. **  
5. Link the residents to cancer screening opportunities in the community. *  
6. Work with coalitions to promote cancer screening events. **  
7. Target the male population and educate them on the risk factors for prostate cancer. *  
8. Write and maintain a newspaper column on cancer in Gallatin County. *  
9. Disseminate brochures with information on these types of cancer at community events and venues. ***  
10. Utilize Faces of Colon Cancer Display. ***  
11. Continue smoking cessation classes. ****  
12. Educate policy makers in the county on how to become a smoke free community. *****  
13. Research current smoke free policies in public buildings and ensure their enforcement.  
14. Educate people about cancers and warning signs. ***  
15. Develop policies to support cancer screening initiatives. **  
16. Advocate for enforcement of laws against smoking in public buildings. **** |

---

*National Prevention Strategy - Clinical and Community Preventive Services - Support implementation of community-based preventive services and enhance linkages with clinical care.  
**National Prevention Strategy - Clinical and Community Preventive Services - Reduce barriers to accessing clinical and community preventive services, especially among populations at greatest risk.  
***National Prevention Strategy - Empowered People - Provide people with tools and information to make healthy choices.  
****National Prevention Strategy - Tobacco Free Living - Expand use of tobacco cessation services.  
******National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.

### Gallatin County Priority Health and Safety Issues (Cont.)

**Goal**

**Objectives**

**Strategies**

| Improve the cardiovascular health in Gallatin County by increasing physical activity. | Participation in Gallatin County physical activity events will increase 10% by 2013. | 1. Write and maintain a newspaper column which addresses physical activity and cardiovascular health. *  
2. Partner with local groups to provide guidelines for physical activity and how to achieve them. *  
3. Partner with schools to educate students on the need for physical activity and get them to participate in a walkability survey. **  
4. Disseminate brochures with information on healthy lifestyles. *  
5. Conduct a walkability survey, identify and work to address impediments to walkability in the community. ***  
6. Continue classes offering ways to increase physical activity (Zumba, weight management). ****  
7. Work with local groups to provide opportunities for physical activity. *  
8. Educate policy makers in the county on the need for bike lanes and walking trails. ***  
9. Research plans and policies that will afford residents of Gallatin County the opportunity to become physically active. *  
10. Increase safe walking areas in the county. ***  
11. Promote physical activity at all events. *  
12. Develop policies to support community physical activity. * |

---

* *National Prevention Strategy - Active Living - Assess physical activity levels and provide education, counseling and referrals.  
**National Prevention Strategy - Active Living - Promote and strengthen school and early learning policies and program that increase physical activities.  
***National Prevention Strategy - Active Living - Encourage community design and development that supports physical activity.  
****National Prevention Strategy - Clinical and Community Preventive Services - Support the National Quality Strategy’s focus on improving cardiovascular health.
### Gallatin County Priority Health and Safety Issues (Cont.)

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| Gallatin County will be a smoke free community. | Decrease the smoking rate in Gallatin County by 20% by 2013.                | 1. Write and maintain a newspaper column on the risk of smoking and benefits of a smoke free community.*  
2. Disseminate brochures with information on the risk of smoking and second hand smoke.*  
3. Work with Gallatin County Collaboration for Better Health and Safety to inform and educate the community on the hazards of smoking and the benefits of a smoke free environment.*  
4. Continue smoking cessation classes.*  
5. Continue to collaborate with Champions for a Drug-Free Gallatin County.*  
6. Facilitate the development of a Tobacco/Smoke Free Coalition in Gallatin County.*  
7. Educate policy makers in the county on how to become a smoke free community.*  
8. Research current smoke free policies in public buildings and ensure the enforcement of these policies.*  
9. Educate and work with school board officials to create a tobacco free campus.*** |

*National Prevention Strategy - Tobacco Free Living - Use media to educate and encourage people to live tobacco free.  
** National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.  
*** National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.  

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| Gallatin County will have low incidences of low birth weights. | Low birth weights will decrease 5% by 2013.                                  | 1. Write and maintain a newspaper column addressing causes for low birth weight and importance of preconception and prenatal care.*  
2. HANDS program will work to educate first time parents on prenatal care.*  
3. Disseminate brochures with information on healthy lifestyles while pregnant.*  
4. HANDS program will work with first time parents to increase compliance with prenatal care.*  
5. Work to eliminate barriers to obtaining prenatal care.*  
6. Continue smoking cessation classes.*  
7. Continue gestational diabetes self management classes.*  
8. Collaborate with Champions for a Drug Free Gallatin County.*  
9. Collaborate with local health care providers to obtain prenatal services for low income residents.*  
10. TRIAD, a Federally Qualified Health Center, will offer prenatal services for low income residents.*  
11. Develop a resource guide for assisting with their healthcare needs.*  
12. Increase WIC services.*  
13. Provide educational information and school programs on how to prevent unintended pregnancy, HIV and other STD’s.*  

*National Prevention Strategy - Reproductive and Sexual Health - Increase use of preconception and prenatal care.  
** National Prevention Strategy - Reproductive and Sexual Health - Support reproductive and sexual health services and support services for pregnant and parenting women.  
*** National Prevention Strategy - Reproductive and Sexual Health - Provide effective sexual health education, especially for adolescents.
**Gallatin County Priority Health and Safety Issues (Cont.)**

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gallatin County’s uninsured population will obtain needed medical care.</td>
<td>The uninsured population will indicate an established medical home by June, 2015. (10% decrease of those without medical homes)</td>
<td>1. Develop a resource guide to assist residents with their healthcare.* 2. Promote the Kentucky Prescription Assistance Program.* 3. Promote TRIAD, a FQHC, services.* 4. Collaborate with local healthcare providers to provide needed services at reduced rates.*</td>
</tr>
</tbody>
</table>

*National Prevention Strategy - Clinical and Community Preventive Services - Reduce barriers to accessing clinical and community preventive services, especially among populations at great risk.

---

**Owen County Partners**

- Sue Ayres
- Misty Bourne
- Shelby Carter
- Patti Clark
- Mark Cleveland
- Adam Craft
- Dawn Davis
- Lannis Garnett
- Veronica Gayle
- Pat Gibson
- Tonya Gayheart
- Glenna Hughes
- Dr. Larry Johnson
- Larry Karsner
- Judge Carolyn Keith
- Delbert Keith
- Gail Lawrence
- David Lilly
- Lisa McBurney
- Beverley Marcum
- Mike Mason
- Becky Merford
- Aileen Miller
- Beverly Miller
- Rick Morgan
- Jennifer Nippert
- Teresa Perry
- Bernie Poe
- Kathy Resetar
- Jessica Singleton
- Lainna Smalara
- Pam Smoot
- Rob Stafford
- Matt Stevens
- Daven Watkins
- Robert Walker
- Karen Wash
- Tony Watkins
- Lisa Wilhoite
- David Wotier
- Rhonda Young
- North Park Pharmacy
- Community Citizen
- Youth Service Center
- Hope’s Hands
- Superintendent/Owen County Schools
- Triad Health Systems
- Itron
- Emergency Medical Services
- Adult Education
- Youth Service Center
- Cabinet for Health and Family Services
- Hospice of the Bluegrass
- New Horizons Family Practice
- Emergency Medical Services
- Owen County Judge Executive
- Owen County Board of Health
- Harborside Healthcare
- Owen County Fire Department
- Owen County Senior Citizens
- Family Resource Center
- Itron
- Youth Service Center
- Board of Health
- New Horizons Medical Center
- Emergency Management
- Owen County Public Library
- Harborside Healthcare
- New Horizons Healthcare Systems
- Adult Education
- The News Herald
- Family Resource Center
- Harborside Healthcare
- Owen County Schools
- Field Representative for Congressman Geoff Davis
- First Baptist Church
- Owen County Board of Health
- Owen County Schools
- NorthKey
- Owen County Schools
- Mayor, City of Owenton
- Community Action Center
Owen County Local Public Health System Performance Assessment Report of Results 1/24/2008

<table>
<thead>
<tr>
<th>#</th>
<th>Objective</th>
<th>Score</th>
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<tbody>
<tr>
<td>1</td>
<td>Monitor Health Status to Identify Community Health Problems</td>
<td>77</td>
</tr>
<tr>
<td>2</td>
<td>Diagnose and Investigate Health Problems and Health Hazards</td>
<td>71</td>
</tr>
<tr>
<td>3</td>
<td>Inform, Educate, and Empower People about Health Issues</td>
<td>57</td>
</tr>
<tr>
<td>4</td>
<td>Mobilize Community Partnerships to Identify and Solve Health Problems</td>
<td>44</td>
</tr>
<tr>
<td>5</td>
<td>Develop Policies and Plans that Support Individual and Community Health Efforts</td>
<td>61</td>
</tr>
<tr>
<td>6</td>
<td>Enforce Laws and Regulations that Protect Health and Ensure Safety</td>
<td>48</td>
</tr>
<tr>
<td>7</td>
<td>Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</td>
<td>51</td>
</tr>
<tr>
<td>8</td>
<td>Assure a Competent Public and Personal Health Care Workforce</td>
<td>68</td>
</tr>
<tr>
<td>9</td>
<td>Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services</td>
<td>64</td>
</tr>
<tr>
<td>10</td>
<td>Research for New Insights and Innovative Solutions to Health Problems</td>
<td>50</td>
</tr>
</tbody>
</table>

Overall Performance Score 59

Owen County Community Themes and Strengths Survey Results

### Owen County Themes and Strengths

#### Health Problems
- Cancers
- Alcohol/Drug Abuse
- Heart Disease/Stroke

#### Risky Behaviors
- Alcohol Abuse
- Drug Abuse
- Tobacco Use

#### Survey Results

- **Owen County Health Problems**
  - Cancers
  - Alcohol/Drug Abuse
  - Heart Disease/Stroke

- **Risky Behaviors**
  - Alcohol Abuse
  - Drug Abuse
  - Tobacco Use

### Strengths and Challenges

#### Strengths

<table>
<thead>
<tr>
<th>County</th>
<th>Strengths</th>
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<tbody>
<tr>
<td>Owen</td>
<td>Low Motor Vehicle Deaths</td>
</tr>
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<td></td>
<td>Younger Patient Population</td>
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<tr>
<td></td>
<td>Low Lung/Bronchus Cancer Rate</td>
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#### Challenges

<table>
<thead>
<tr>
<th>County</th>
<th>Challenges</th>
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<tbody>
<tr>
<td>Owen</td>
<td>Obesity</td>
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<tr>
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<td>High School Graduation</td>
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<tr>
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<td>Availability of Primary Care Physicians</td>
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<td>Diabetes</td>
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<td>Colorectal Cancer</td>
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<td></td>
<td>Prostate Cancer</td>
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<tr>
<td></td>
<td>Low Physical Activity</td>
</tr>
<tr>
<td></td>
<td>Poor Oral Health</td>
</tr>
<tr>
<td></td>
<td>High Breast Cancer Rates</td>
</tr>
</tbody>
</table>

Owen County Forces of Change

What could affect our community improvement efforts that we have no control over?

- Technology Change
- Medicaid/Insurance Changes
- State Monies Shortfall
- Unemployment
- Environment
- Population Growth
- Transportation
- Changes in Family Structure
- Change in Local Government
Owen County will have become a healthier community.

Owen County's obesity rate will decrease 5% by June, 2013.

Owen County Health Rankings will improve by 1 place by June, 2012. (Currently 8)

1. Disseminate information to local organizations in Owen County on the obesity rates in the county.*
2. Disseminate information to local health care providers on the obesity rates in the county.*
3. Partner with Owen Wellness Engagement Network to disseminate information on healthy eating.**
4. Partner with Youth Service Centers to provide opportunities to educate the youth on obesity and healthy eating habits.**
5. Work with the Family Resource Center to be a resource for educational materials and seminars on healthy eating habits and obesity.**
6. Partner with the Owen County Diabetes Support Group to educate diabetics on obesity and healthy eating habits.**
7. Work with Hope's Hands to educate the public on obesity and provide them with the tools to assist in making healthy eating choices.**
8. Work with the Owen County Women's Cancer Coalition to disseminate information on healthy eating habits.**
9. Promote Recipes for Life (nutrition education for 5th grade) and 2nd Sunday event.**
10. Support PAC NOW (nutrition education at OC Schools).**
11. Disseminate educational information about healthy eating at community events (Sweet Owen Days, Back to School Bashes, Owen County Fair).**
12. Complete a Walkability Assessment in Owen County and address the obstacles identified.***
13. Encourage participation in the annual Congenital Heart Walk.
14. Encourage participation in the Waist Management TRALE.
15. Link people to First Baptist Church for walking trail, gym equipment, basketball court, Pilates and Aerobic Classes.****

*National Prevention Strategy - Empowered People - Provide people with tools and information to make healthy choices.
**National Prevention Strategy - Healthy Eating - Help people recognize and make healthy food and beverage choices.
***National Prevention Strategy - Active Living - Encourage community design and development that supports physical activity.
****National Prevention Strategy - Active Living - Facilitate access to safe, accessible, and affordable places for physical activity.
### Owen County Priority Health And Safety Issues

#### Goals

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| Relieve some of the stress of the unemployed by linking them to community services. | TRDHD Health and Wellness Center will refer 20 residents/monthly to other available resources. | 1. Disseminate information about the TRDHD services to local organizations in Owen County. (Owen Wellness Engagement Network Partnership, Youth Service Center, Family Resource Center, Owen County Diabetes Support Group, Hope’s Hands, Owen County Women’s Cancer Coalition)  
2. Disseminate information about TRDHD services to local health care providers.  
3. Submit articles and Public Service Announcements to local papers about TRDHD services.  
4. Promote Meeting the Needs services which include food pantry, clothing and financial assistance for other basic living needs.  
5. Link community members to Family and Youth Service Centers Back Pack Program through Owen County Schools.  
6. Link people to discount car seats to families receiving WIC resources.  
7. Maintain community resource directory.  
8. Refer 1st time parents to the Health Access Nurturing Development Services (HANDS)*** |
| The unemployed will obtain assistance fulfilling their prescription needs as evidenced by a 10% increased use of the KPAP by June, 2013. | | 1. Promote the KY Prescription Assistance Program (KPAP).*  
2. Work with healthcare providers to link community members to the KPAP.*  
3. Promote the Community Action Center’s St. Vincent DePaul’s prescription program.*  
4. Promote Faith Community Pharmacy in Northern Kentucky.* |

*National Prevention Strategy - Mental and Emotional Well-being - Provide individuals and families with the support necessary to maintain positive well-being.

**National Prevention Strategy - Mental and Emotional Well-being - Facilitate social connectedness and community engagement across the lifespan.

***National Prevention Strategy - Mental and Emotional Well-being - Promote positive childhood development, including positive parenting and violence-free homes.
### Owen County Priority Health and Safety Issues (Cont.)

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance abuse rates (tobacco, alcohol and drugs) will decrease in Owen County 5% by June, 2013.</td>
<td></td>
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</tr>
</tbody>
</table>
| Owen County cancer screenings will increase. | Owen Countyans' cancer screenings increase by 10% per cancer by June, 2013. | 1. Work with local organizations to disseminate educational materials on cancer.*  
2. Partner with local health care providers to provide information on cancer.*  
3. Disseminate educational information at community events.*  
4. Display Faces of Color Cancer yearly.*  
5. Participate in Relay for Life events.*  
6. Submit educational information to local business newsletters.*  
7. Work with local businesses to include educational information in their pay stubs.*  
8. Partner with the Women’s Cancer Coalition.**  
9. Continue to offer the mobile mammogram van.***  
10. Offer mobile mammogram van to more areas of the county.***  
11. Work with local health care providers to refer patients for cancer screening.*** |

*National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.  
**National Prevention Strategy - Empowered People - Provide people with tools and information to make healthy choices.  
***National Prevention Strategy - Preventing Drug Abuse and Excessive Alcohol Use - Support state, tribal, local, and territorial implementation and enforcement of alcohol control policies.  
****National Prevention Strategy - Preventing Drug Abuse and Excessive Alcohol Use - Create environments that empower.
Pendleton County Partners

Doug Beard    Southside Church of Christ
Laura Beard    Kentuckians Encouraging Youth to Succeed
Dana Daugherty   Kort Physical Therapy
JoEllen Dawson   Northern Kentucky Community Action
Janet Fields    Housing Authority
Wayne Keith    Camp Northward
Kenneth Kells    Jailer of Pendleton County
Laura Kenny    Women's Crisis Center
Kenna Knight    Pendleton County Extension Service
Martin Lemming   Chamber of Commerce
Bill Mitchell    Economic Development Corporation
JoEllen Mitchell   Pendleton County Schools
Mike Moore    Emergency Management
Craig Peoples    Sheriff of Pendleton County
Jackie Reynolds   Social Services
April Tywick-Roberts   Pritchard Committee
Kelly Staten    South Family Resource Center
Jim Thaxton    Three Rivers District Health Department
Pam Tribby    Hospice of Hope
Gary Veirs    Pendleton County Fiscal Court
Tracy Winkle    Falmouth Rest Home
Sarah Wolfe    Pendleton County Schools
Laurie Wolsing   Northern Kentucky Community Action Center
Darlene Wright    North Family Resource Center
Jack Wright    Pendleton County Industrial Authority
Bob Yost    Pendleton County School Systems

Pendleton County
Local Public Health System Performance Assessment
Report of Results
4/07/2008

Overall Performance Score 55

1 Monitor Health Status to Identify Community Health Problems 47
2 Diagnose and Investigate Health Problems and Health Hazards 65
3 Inform, Educate, and Empower People about Health Issues 67
4 Mobilize Community Partnerships to Identify and Solve Health Problems 57
5 Develop Policies and Plans that Support Individual and Community Health Efforts 55
6 Enforce Laws and Regulations that Protect Health and Ensure Safety 59
7 Link People to Needed Personal Health Services and Ensure the Provision of Health Care when Otherwise Unavailable 49
8 Assure a Competent Public and Personal Health Care Workforce 54
9 Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services 49
10 Research for New Insights and Innovative Solutions to Health Problems 49

Pendleton County Community Themes and Strengths
Survey Results

- Health Problems
  - Obesity
- Risky Behaviors
  - Alcohol Abuse
  - Drug Abuse
  - Tobacco Use
Pendleton County

Forces of Change

What could affect our community improvement efforts that we have no control over?

- Lack of Housing for Low Income Families
- Unemployment
- Lack of Dental Services
- Transportation

Strengths and Challenges

<table>
<thead>
<tr>
<th>County</th>
<th>Strengths</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pendleton</td>
<td>Low Smoking Rate</td>
<td>Obesity</td>
</tr>
<tr>
<td></td>
<td>Younger Patient Population</td>
<td>Motor Vehicle Deaths</td>
</tr>
<tr>
<td></td>
<td>Well Insured</td>
<td>High School Graduation</td>
</tr>
<tr>
<td></td>
<td>Low Breast Cancer Rates</td>
<td>Cardiovascular Deaths</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Premature Death</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lung/Bronchus Cancer</td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td>Poor Oral Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Limited Primary Care Physicians</td>
</tr>
<tr>
<td></td>
<td></td>
<td>High Diabetes</td>
</tr>
</tbody>
</table>

Pendleton County Community Service Alliance

To inspire the human service agencies throughout Pendleton County to make a positive difference in the lives of those in need in our community by collaboration, partnership, leveraging existing services and eliminating duplication of services.

Community Themes and Strengths Assessment

Resource Utilization
Lack of Transportation Sources
Lack of Jobs
Lack of Housing for Low Income Families
Lack of Dental Services

Local Public Health System Assessment

Monitor Health Status
Research/Innovations
Evaluate Services
Link to Health Services

Community Health Status Assessment

- Obesity
- Poor Oral Health

High Incidence
- Cardiovascular Deaths
- Premature Death
- Lung/Bronchus Cancer
- Colorectal Cancer
- Prostate Cancer

Low High School Graduation Rates

Unemployment

Lack of Transportation

Motor Vehicle Deaths
High Diabetes

High Diabetes
### Pendleton County Priority Health and Safety Issues

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| Improve farm safety. | Reduce number of injuries and fatalities on farms by 5% by June, 2012. | 1. Work with Extension Agriculture Agent to provide equipment safety seminars.*  
2. Partner with local insurance companies to educate students on farm equipment safety.*  
3. Partner with Future Farmers of America to provide educational opportunities on farm equipment safety.*  
4. Work with local community groups to inform them of the types of accidents occurring in the community and how to prevent them.*  
5. Educate the farming community on equipment safety.* |

*National Prevention Strategy - Injury and Violence Free Living - Provide individuals and families with the knowledge, skills, and tools to make safe choices that prevent violence and injuries.

### Pendleton County Priority Health and Safety Issues (Cont.)

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| Pendleton County will have a low incidence of motor vehicle crashes. | Decrease motor vehicle crashes by 5% by June, 2012. | 1. Partner with local law enforcement agencies to find out where most accidents occur.*  
2. Research the most common cause for why accidents occur in particular locations in the county.*  
3. Educate young drivers through school programs on the hazards of speeding and driving while impaired and texting.** |

*National Prevention Strategy - Promote and enhance policies and programs to increase safety and prevent injury in the workplace.  
**National Prevention Strategy - Tobacco Free Living - Use media to educate and encourage people to live tobacco free.

*National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.

*National Prevention Strategy - Tobacco Free Living - Expand use of tobacco cessation services.


### Goals Objectives Strategies

| 80% of Pendleton County students will graduate from high school as non-smokers. | Reduce tobacco initiation at the 6th grade level by 80% by June, 2012. | 1. Disseminate brochures with educational information on the risks of smoking and second hand smoke.*  
2. Educate and work with school board officials to create a tobacco free campus.**  
3. Continue TEG.*  
4. Educate students on the hazards of smoking.*  
5. Empower students by the 40 Developmental Assets Program to make health decision regarding tobacco use.  
6. Provide assistance for smoking cessation via Cooper Clayton Smoking Cessation programs.***  
7. Educate policy makers on how to become a smoke free community.*  
8. Initiate local Kick Butts Day.****  
9. Organize Sticker Shock Campaign.*  
10. Collaborate with Champions for a Drug Free Pendleton County.*  
11. Work with local law enforcement officials to ensure enforcement of laws preventing tobacco sales to minors.**** |

*National Prevention Strategy - Tobacco Free Living - Use media to educate and encourage people to live tobacco free.  
**National Prevention Strategy - Tobacco Free Living - Support comprehensive tobacco free and other evidence-based tobacco control policies.  
***National Prevention Strategy - Tobacco Free Living - Expand use of tobacco cessation services.  
**Pendleton County Priority Health and Safety Issues (Cont.)**

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Strategies</th>
</tr>
</thead>
</table>
| Improve the cardiovascular health of Pendleton County. | 5% decrease in heart related illness by June, 2012. | 1. Continue smoking cessation classes.*  
2. Continue diabetes self management classes. **  
3. Continue classes offering ways to increase physical activity (Zumba, weight management, healthy eating).***  
4. Promote “Take 10” program offered in elementary schools. ****  
5. Disseminate brochures with information on healthy lifestyles. *****  
6. Partner with Extension Service to focus on positive lifestyle changes. ******  
7. Encourage use of safe walking areas. *******  
8. Make use of existing physical fitness centers in schools and throughout the community. *******  
9. Educate the community on the benefits of physical activity. *******  
10. Initiate Forks over Knives program. ** |

*National Prevention Strategy - Tobacco Free Living - Expand use of tobacco cessation services.  
**National Prevention Strategy - Healthy Eating - Healthy people recognize and make healthy food and beverage choices.  
***National Prevention Strategy - Active Living - Facilitate access to safe, accessible, and affordable places for physical activity.  
****National Prevention Strategy - Active Living - Promote and strength school and early learning policies and program that increase physical activity.  
*****National Prevention Strategy - Empowered People - Provide people with tools and information to make healthy choices.  
******National Prevention Strategy - Empowered People - Provide people with tools and information to make health choices.  
*******National Prevention Strategy - Clinical and Community Preventive Services - Reduce barriers to accessing clinical and community preventive services, especially among populations at greatest risk.

Throughout the MAPP process the public health system recognized their greatest assets were the people who are committed to the improvement of the health and safety of their communities. Although monetary resources to achieve goals and objectives are provided by the various participating organizations and grants, it is the individual’s investment of time and energy that moves each community forward toward reaching their goals.

This Community Health Assessment (CHA) is available on the TRDHD Website and is distributed to Health and Safety partnerships in each community. It will also be distributed at local libraries, community events and will be available upon request. Plans are to present the findings of the CHA to organizations e.g. Rotary Clubs, Lions Club, Chambers of Commerce, Women’s Clubs and various other venues.
APPENDIX
Community Survey

__________________________
COUNTY HEALTH AND SAFETY PARTNERSHIP
County of Residence____________________

Please take a minute to complete the survey below. The purpose of this survey is to get your opinion about community health and safety issues in ______ County. The ______ County Health and Safety Partnership will use the results of this survey and other information to identify the most pressing problems which can be addressed through community action. If you have previously completed a survey, pass this on to someone who has not. Remember…your opinion is important! Thank you, and if you have questions, please contact us. (See contact information on last page.)

1. In the following list, what do you think are the 3 most important things needed for a healthy ______ County? (Those things which most improve the quality of life in a community.) Check only 3:

   [ ] Good place to raise children
   [ ] Low crime/safe neighborhoods
   [ ] Low level of child abuse
   [ ] Access to health care (e.g. family doctor)
   [ ] Parks and recreation
   [ ] Clean environment
   [ ] Affordable housing
   [ ] Arts and cultural events

In the following list, what do you think are the 3 greatest health problems in ______ County? (Those problems which have the greatest impact on overall community health.) Check only 3:

   [ ] Aging Problems (e.g. arthritis, injuries, hearing/vision loss, etc.)
   [ ] Low infant deaths
   [ ] Access to health care (e.g. family doctor)
   [ ] Motor Vehicle Crash
   [ ] Homicide
   [ ] Infant Death
   [ ] Suicide
   [ ] Teenage Pregnancy
   [ ] Alcohol/Drug Abuse

2. In the following list, what do you think are the 3 most risky behaviors in ______ County? (Those behaviors which have the greatest impact on overall community health.) Check only 3:

   [ ] Alcohol abuse
   [ ] Lack of exercise
   [ ] Tobacco Use
   [ ] Being overweight
   [ ] Poor eating habits
   [ ] Not using birth control
   [ ] Dropping out of school
   [ ] Not getting “shots” to prevent disease
   [ ] Not using seat belts/child safety seats
   [ ] Drug abuse
   [ ] Racism
   [ ] Unsafe Sex

3. How would you rate ______ County as a “Healthy County?”
   [ ] Very unhealthy
   [ ] Unhealthy
   [ ] Somewhat healthy
   [ ] Healthy
   [ ] Very healthy

4. How would you rate ______ County as a “Safe County?”
   [ ] Very unsafe
   [ ] Unsafe
   [ ] Somewhat safe
   [ ] Safe
   [ ] Very safe

5. How would you rate your own personal health?
   [ ] Very unhealthy
   [ ] Unhealthy
   [ ] Somewhat healthy
   [ ] Healthy
   [ ] Very healthy

6. How would you rate your own personal safety?
   [ ] Very unsafe
   [ ] Unsafe
   [ ] Somewhat safe
   [ ] Safe
   [ ] Very safe

Please answer question #8 – 16 so we can insure that we get opinion from a diverse group of citizens in ______ County in regard to health issues.

8. Age: [ ] 25 or less [ ] 26 – 39 [ ] 40 – 54 [ ] 55 – 64 [ ] 65 or over

9. Sex: [ ] Male [ ] Female

10. Marital Status: [ ] Married / Living Together [ ] Not Married / Single

11. Household Income: [ ] Less than $20,000 [ ] $20,000 to 29,999 [ ] $30,000 to 49,999 [ ] Over $50,000

12. Education: [ ] High school diploma or GED [ ] College degree or higher

14. Additional comments:

Please return the completed survey to the address below by December 31st. Additionally, if you would like more information about this community project, please contact us at the number below.

THANK YOU VERY MUCH FOR YOUR RESPONSE!
Summary

The four counties that comprise Three Rivers District Health Department have unique challenges and opportunities that are specific to their communities. Many resources are needed to address these now more than ever before due to the present economic climate. Fortunately a wonderful resource exists that is common to each of the counties within the Three Rivers' District and that is the people whose commitment to improve the health and safety of their communities remains strong and enduring.

This Community Health Assessment is not comprised of only data and statistics but also the concerns and issues the citizens have identified. The issues of “substance abuse” and “access to care” hang over our district like a fog that has taken residence here. Through the efforts of the health and safety partnerships that fog is beginning to lift slowly with some light shining through. The efforts, accomplishments, hope and dreams can be found in Three Rivers District Health Department’s Community Health Improvement Plan.

Over time, the data may change and will continue to be addressed, but the commitment of our citizens will remain the same as we come together to determine those issues we must give our highest priority.

Three Rivers District Health Department
510 South Main
Owenton, Kentucky 40359
(502-484-3412)

Carroll County Health Department
502-732-6641

Gallatin County Health Department
859-576-2844

Owen County Health Department
502-484-5735

Pendleton County Health Department
859-654-5985