A Healthy Today for a Brighter Tomorrow.
Our Mission
The Lake Cumberland District Health Department will prevent illness and injury, promote good health practices, and assure a safe environment to protect and improve the health of our communities.

Our Vision
The Lake Cumberland District Health Department will be a progressive leader providing innovative solutions to achieve optimal health status for our communities.

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From the District Board of Health Chair

I have been honored and privileged to serve as Chairman of the Lake Cumberland District Board of Health in 2015. We have experienced many changes and have faced many challenges not only this past year, but over the last several years. I commend our Board Members, Executive Leadership, Employees and Staff all, for the hard work and dedication that has been necessary to keep Lake Cumberland District Health Department moving forward as our healthcare system continues to change around us daily.

All involved are to be commended and everyone has adapted well to the necessary changes that have had to take place to keep our Health Department District successful in providing healthcare to the citizens of the Lake Cumberland Region.

Hon. John A. Phelps, Jr.
Chairman
Lake Cumberland District
Health Department

From the Director

Evolution, innovation, shifting with the environment: all very exciting sounding words! Transformation, though, is a much more pleasant experience when we do so because we want to, not because we have to change. While we have made some proactive changes, unfortunately, the down-turned economy has forced us to change in some ways that are challenging.

We choose to move into Ryan White, Louisville Vitality, Passport EPSDT Outreach and Worksite Wellness. At the time of this writing, we are hiring our Ryan White staff. The Louisville Vitality project is churning – not only providing a positive community service, but also generating a surplus. The HANDS staff are performing the Passport EPSDT Outreach project, and, while it doesn’t generate a lot of revenues, it does more than cover its cost. We are in the middle of pilot testing our Worksite Wellness Program, hoping this will be an area of potential future growth.

We have also made some changes we would rather not have. We changed our traditional model of school health, resulting in far fewer staff. While this is saving the agency a significant amount of money, it was difficult to change a program we spent multiple decades building and fine-tuning.

We are also seeing a shrinking of funds and staff in our clinical programs.

Nevertheless, we continue to do well on programmatic and financial audits, patient satisfaction and employee satisfaction. In other words, the quality of the work we do, remains high. While we recognize employees desire a cost-of-living raise, we are thankful folks still like their jobs. Like most of you, I value my co-workers and our mission.

We have been fortunate the last two fiscal years to have performed better financially than expected, ending with surpluses. Therefore, our reserve has grown now almost back to capacity. Hopefully, the million dollar annual negative funding hits will stop so we can truly stabilize our financial condition.

Our preparations for accreditation have readied us for the impending PHAB site review. We expect to be accredited before next year’s Annual Report.

I am approaching fifteen years with the Lake Cumberland District Health Department. Only seven of sixty-one Local Health Department Directors have served in that capacity longer than me. I have found my time in public health to be rewarding, fulfilling and enjoyable. I believe in the importance of our mission and continue to be impressed by the resilience of our staff. May God bless us all.

Shawn Crabtree
MSSW, MPA
Director
Lake Cumberland District
Health Department
2015
LOCAL BOARDS OF HEALTH

The Lake Cumberland District Health Department is governed by a 30-member District Board of Health with representation from each county’s local board of health. The board is comprised of county judge executives, physicians, nurses, dentists, veterinarians, engineers, optometrists and citizen members, who are all pictured on the previous page. The following list is all the members of each county’s local board of health within the Lake Cumberland District.

**Adair County**
Hon. Michael Stephens
Janella Brown, DMD
Jacob Burton, OD
Martha Anne Burton, MD
Billy Coffey, Fiscal
Catherine Feese, MD
Ronnie Grant
Matt Jackson, RPh
Lee Ann Jessee
Gary Partin, MD
Shantila Rexroat, DVM
Cynthia Waggener, RN

**Cumberland County**
Hon. John Phelps, Jr.
Raymond Appleby
Janet Clark
Brian Dyer, DVM
Robert Flowers, DO
Betty Lee
Gina Lee-Watson, Fiscal
Mary McCoy
Joseph Michael Morgan, RPh
JM Stephenson, DMD
Gary White
Douglas Williams

**Pulaski County**
Hon. Steven Kelley
Reginald Chaney, PE
Rodney Dick, Fiscal
Hossein Fallahzadeh, MD
Patty Guinn, RPh
Bruce Jasper, DVM
Jim Muse, DMD
Harvey Schleter, OD
Keith Sinclair, MD
Gerard Weigel, MD
James Wesley
Rebecca Whitis, RN

**Taylor County**
Hon. Eddie Rogers
Donald Dabney, PE
Jerome Dixon, MD
Jay Eastridge, RPh
Arthur Haley, OD
Loretta Hash
Philip Hays, DVM
David Hesson, MD
Gayle Phillips, Fiscal
Marlene Richardson, DMD
Thomas Rogers, MD

**Casey County**
Hon. Randy Dial
Adlie Brown, DMD
Darin Cundiff
Gina Goode
Housam Haddad, MD
Linda Hamilton, Fiscal
Homer Hecht
Kay King, RN
Linda Lee
John Price, MD
Tony Price
Don Wilkey, DVM

**Green County**
Hon. John Frank
Charlie Allen, PE
Glenda Bagby, RN
Pam Bills
Garth Bobrowski, DMD
Devi Bradshaw, Fiscal
Teresa Collison, RPh
Shane DeSimone, MD
Mary DeSpain
Paul Patterson, OD
Mark Risen, MD
R Michael Shuffett, DVM

**Russell County**
Hon. Gary D. Robertson
Robert Bertram, MD
Connie Blankenship
Don Cooper
Karen Dalton, RN
Charles L. Gore, RPh
Stephanie Jones, MD
Richard Miles, MD
H. James Popplewell, DMD
Terry Waddell, Fiscal
C. Leslie Wade, DVM
Susanne Watkins, OD

**Wayne County**
Hon. Mike Anderson
William Breeding, DMD
Sarah Debord, APRN
Jeffery Dishman, Fiscal
Vesta Edwards
Lora Elam, RN
Ronald McFarland, MD
Kenneth Ramsey
James Sawyer, OD
Joe Silvers, RPh
Stephanie Southard, MD
James Upchurch, PE

**Clinton County**
Hon. Richard Armstrong
Judith Brown, RN
Heather Brown-Conner, OD
Susan Cash, DMD
Charles Dailey, DVM
Carol Denney
Lala Haddix
Frances Hay, Fiscal
William Powell, MD
Kent Shearer, RPh
Jake Staton, PE

**McCreary County**
Hon. Doug E. Stephens
Jerald Burgess, MD
Allan Chapman
Azalie Egnew
Tammie Emerson Johnson
Terry Allan Lawson
Stephen McKinley, OD
John Sandidge, RPh
Sue Singleton, Fiscal
Grady Wilson
Rita Wright
Rosalie Wright

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 Administration Department

Lake Cumberland District Health Department’s (LCDHD) Administrative Services Department recognized improved efficiencies by managing a challenging financial year in which we had budgeted a 1.39M deficit. Instead of ending the year with a deficit, over the course of the year, as the agency reduced expenditures, primarily in salaries, fringe, and contracts, we ended the year with a $511,524 surplus, with revenues decreasing by 5% ($872,875) over last year’s, while expenses increased by 1% ($88,112) over last year’s. At the end of the fiscal year, after adding in that surplus, our fund balance, which includes restricted and unrestricted funds, totaled $5,905,637.

The Administrative Services Department is also pleased to report we received our annual audit conducted by Ray, Foley, Hensley & Company which included no proposed audit adjustments or reportable findings. Additionally, they found the financial statements to be neutral, consistent, and clear.

Although the administrative tasks required in processing Medicaid claims continues to grow more complex with the five different Medicaid Managed Care Organizations administering the claims for the Medicaid Program, the Administrative Services team continues to manage the workload with no new staff members by being proactive in searching for efficiencies by Quality Improvement efforts as we endeavor to support the mission of LCDHD and Public Health. During the 2015 Fiscal Year, the Administrative Team conducted several documented quality improvement projects which were successful efforts to find ways to perform the same tasks, but in less time.

As the health departments’ role continues to evolve as a Public Health Partner in the larger picture of the Patient Protection and Affordable Care Act, the Administrative Services Department is committed to a transparent working environment that’s constantly seeking improvement while maintaining high standards.

Allowable Unrestricted Reserve Calculation

<table>
<thead>
<tr>
<th>Cost Center</th>
<th>CC#</th>
<th>Expense</th>
<th>Service Fees</th>
<th>Service Fee % of Total Expense</th>
<th>Non-Fee Program Expense</th>
<th>Fee for Service Program Expense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Service</td>
<td>500</td>
<td>310,152</td>
<td>1,305</td>
<td>0.42%</td>
<td>310,152</td>
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<tr>
<td>Public Facilities</td>
<td>520</td>
<td>90,277</td>
<td>9,622</td>
<td>10.66%</td>
<td>90,277</td>
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<tr>
<td>General Sanitation</td>
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<td>160,887</td>
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<td>160,887</td>
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<tr>
<td>Onsite Sewage</td>
<td>560</td>
<td>364,733</td>
<td>229,890</td>
<td>63.03%</td>
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<td>364,733</td>
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<td>Tanning Beds</td>
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<td>0</td>
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<td>0</td>
</tr>
<tr>
<td>Other Environmental</td>
<td>590</td>
<td>5,753</td>
<td>0</td>
<td>0.00%</td>
<td>5,753</td>
<td>0</td>
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<tr>
<td>Radon</td>
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<td>West Nile Virus</td>
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<td>0</td>
<td>100.00%</td>
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<tr>
<td>Winter Storm Response</td>
<td>598</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
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<td>0</td>
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<tr>
<td>Winter Storm Resp-Local</td>
<td>599</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
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<td>Dental Services</td>
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<td>86.42%</td>
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<td>16,937</td>
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<td>Asthma Education</td>
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<td>21,243</td>
<td>0</td>
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<td>Osteoporosis</td>
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<tr>
<td>PHER</td>
<td>726</td>
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<tr>
<td>Diabetes Case Management</td>
<td>728</td>
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<td>ESVAR-VHP</td>
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<tr>
<td>Ebola Coordination</td>
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<td>Diabetes Prevention Program</td>
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<td>19,138</td>
<td>16,759</td>
<td>87.57%</td>
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<td>19,138</td>
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</table>

All calculations are As of Period Ending June 30, 2015.
## Allowable Unrestricted Reserve Calculation (cont.)

<table>
<thead>
<tr>
<th>Cost Center</th>
<th>CC#</th>
<th>Expense</th>
<th>Service Fees Expense</th>
<th>Service Fee % of Total Expense</th>
<th>Non-Fee Program Expense</th>
<th>Fee for Service Program Expense</th>
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<tr>
<td>Oral Health Coalitions</td>
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<td>Community Health Action Team</td>
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<tr>
<td>KCCSP Outreach &amp; Education</td>
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<td>0</td>
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<tr>
<td>Coordinated School Health</td>
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<td>0</td>
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<td>Passport Referrals</td>
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<td>869</td>
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<td>Winter Storm</td>
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<td>1,148</td>
<td>0</td>
<td>0.00%</td>
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<td>Environmental Strike Team</td>
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<td>104</td>
<td>0</td>
<td>0.00%</td>
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<tr>
<td>KHREF</td>
<td>747</td>
<td>332</td>
<td>332</td>
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<tr>
<td>IEP School Services</td>
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<td>HPP Training Coordinator</td>
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<td>0</td>
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<td>Accreditation</td>
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<tr>
<td>PHEP Special Project</td>
<td>753</td>
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<td>0</td>
<td>100.00%</td>
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<td>PREP Reducing the Risk</td>
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<td>62,991</td>
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<tr>
<td>Regional EPI</td>
<td>757</td>
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<td>Humana Vitality</td>
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<td>263,615</td>
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<td>Regional Preparedness Coord</td>
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<tr>
<td>Smiling Schools Program</td>
<td>762</td>
<td>0</td>
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<td>Tobacco Free Schools</td>
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<td>MCH Coordinator</td>
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<td>7,831</td>
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<td>0.00%</td>
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<td>HANDS Expanded Multi-Gravida Families</td>
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<td>0.00%</td>
<td>1,050,019</td>
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<td>HANDS Expansion/Outreach</td>
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<td>Kentucky Colon Cancer Screening Project</td>
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<td>PHEP Special Project</td>
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<td>0.00%</td>
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<td>HBE Assistance</td>
<td>772</td>
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<td>0.00%</td>
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<td>0</td>
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<tr>
<td>Child Fatality Prevention</td>
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<td>685</td>
<td>0</td>
<td>0.00%</td>
<td>685</td>
<td>0</td>
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<tr>
<td>Pediatric/Adolescent</td>
<td>800</td>
<td>1,140,591</td>
<td>421,166</td>
<td>36.93%</td>
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<tr>
<td>Immunizations</td>
<td>801</td>
<td>0</td>
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<td>100.00%</td>
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<td>Family Planning</td>
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<td>Maternity Services</td>
<td>803</td>
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<td>203,194</td>
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<td>WIC Services</td>
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<tr>
<td>Medical Nutrition</td>
<td>805</td>
<td>102,089</td>
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<td>11.42%</td>
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<tr>
<td>Tuberculosis</td>
<td>806</td>
<td>298,801</td>
<td>72,747</td>
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<td>STD Services</td>
<td>807</td>
<td>149,111</td>
<td>47,045</td>
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<td>Diabetes</td>
<td>809</td>
<td>239,367</td>
<td>755</td>
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<td>Adult Services</td>
<td>810</td>
<td>237,714</td>
<td>54,558</td>
<td>22.95%</td>
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<td>Breast &amp; Cervical Cancer</td>
<td>813</td>
<td>250,323</td>
<td>57,532</td>
<td>22.98%</td>
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<tr>
<td>MCH Forum</td>
<td>816</td>
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<td>100.00%</td>
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<tr>
<td>Healthy Communities - Tobacco</td>
<td>817</td>
<td>350</td>
<td>0</td>
<td>0.00%</td>
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<td>0</td>
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<tr>
<td>Community Based Services</td>
<td>818</td>
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<td>0</td>
<td>0.00%</td>
<td>14</td>
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<tr>
<td>Bioterrorism - Focus Area A</td>
<td>821</td>
<td>77,607</td>
<td>0</td>
<td>0.00%</td>
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<tr>
<td>Bioterrorism - Focus Area B</td>
<td>822</td>
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<td>823</td>
<td>9,925</td>
<td>3,655</td>
<td>36.82%</td>
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<td>Bioterrorism - Focus Area F</td>
<td>824</td>
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<td>Bioterrorism - Focus Area G</td>
<td>825</td>
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<tr>
<td>Merck HPV Study</td>
<td>826</td>
<td>1,700</td>
<td>26,292</td>
<td>1,546.61%</td>
<td>1,700</td>
<td>0</td>
</tr>
</tbody>
</table>
## Allowable Unrestricted Reserve Calculation (cont.)

<table>
<thead>
<tr>
<th>Cost Center</th>
<th>CC#</th>
<th>Expense</th>
<th>Service Fees</th>
<th>Service Fee % of Total Expense</th>
<th>Non-Fee Program Expense</th>
<th>Fee for Service Program Expense</th>
</tr>
</thead>
<tbody>
<tr>
<td>U of L Social Media, Teen Moms and PPD</td>
<td>827</td>
<td>142</td>
<td>1,200</td>
<td>843.41%</td>
<td>0</td>
<td>142</td>
</tr>
<tr>
<td>Diabetes Outreach and Education</td>
<td>828</td>
<td>163,205</td>
<td>0</td>
<td>0.00%</td>
<td>163,205</td>
<td>0</td>
</tr>
<tr>
<td>Title III Geriatric Program</td>
<td>829</td>
<td>40,138</td>
<td>40,138</td>
<td>100.00%</td>
<td>0</td>
<td>40,138</td>
</tr>
<tr>
<td>Community Cancer Coalition</td>
<td>830</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Worksite Wellness Project</td>
<td>831</td>
<td>8,329</td>
<td>0</td>
<td>0.00%</td>
<td>8,329</td>
<td>0</td>
</tr>
<tr>
<td>Heart Disease &amp; Stroke Prevention</td>
<td>832</td>
<td>34,439</td>
<td>0</td>
<td>0.00%</td>
<td>34,439</td>
<td>0</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>833</td>
<td>44,294</td>
<td>0</td>
<td>0.00%</td>
<td>44,294</td>
<td>0</td>
</tr>
<tr>
<td>UK Research Cancer F/U</td>
<td>834</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Cervical Cancer Free KY</td>
<td>835</td>
<td>5,294</td>
<td>10,000</td>
<td>188.91%</td>
<td>0</td>
<td>5,294</td>
</tr>
<tr>
<td>Tobacco Prevention Project</td>
<td>836</td>
<td>87,532</td>
<td>1,546</td>
<td>1.77%</td>
<td>87,532</td>
<td>0</td>
</tr>
<tr>
<td>Abstinence Education</td>
<td>837</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>HAI Prevention (Infc. Prev. Conf)</td>
<td>838</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Marshall Univ. Diabetes Grant</td>
<td>839</td>
<td>74</td>
<td>7,397</td>
<td>10,013.20%</td>
<td>0</td>
<td>74</td>
</tr>
<tr>
<td>Breastfeeding Peer Counselor</td>
<td>840</td>
<td>56,918</td>
<td>0</td>
<td>0.00%</td>
<td>56,918</td>
<td>0</td>
</tr>
<tr>
<td>Federal Diabetes Today</td>
<td>841</td>
<td>46,651</td>
<td>0</td>
<td>0.00%</td>
<td>46,651</td>
<td>0</td>
</tr>
<tr>
<td>HIV Counseling &amp; Testing</td>
<td>842</td>
<td>2,413</td>
<td>0</td>
<td>0.00%</td>
<td>2,413</td>
<td>0</td>
</tr>
<tr>
<td>Healthy Start Project</td>
<td>848</td>
<td>51,269</td>
<td>0</td>
<td>0.00%</td>
<td>51,269</td>
<td>0</td>
</tr>
<tr>
<td>Pandemic Flu Summit</td>
<td>851</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>HANDS Project</td>
<td>853</td>
<td>1,996,393</td>
<td>1,931,652</td>
<td>96.76%</td>
<td>0</td>
<td>1,996,393</td>
</tr>
<tr>
<td>Arthritis</td>
<td>856</td>
<td>9,197</td>
<td>0</td>
<td>0.00%</td>
<td>9,197</td>
<td>0</td>
</tr>
<tr>
<td>Physical Activity</td>
<td>857</td>
<td>27</td>
<td>0</td>
<td>0.00%</td>
<td>27</td>
<td>0</td>
</tr>
<tr>
<td>Supplemental School Health</td>
<td>858</td>
<td>3,291,965</td>
<td>3,291,965</td>
<td>100.00%</td>
<td>0</td>
<td>3,291,965</td>
</tr>
<tr>
<td>MRC - ASPR Training</td>
<td>871</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TLC - Obesity Grant</td>
<td>872</td>
<td>527</td>
<td>0</td>
<td>0.00%</td>
<td>527</td>
<td>0</td>
</tr>
<tr>
<td>HPP Coordinators</td>
<td>875</td>
<td>25,388</td>
<td>0</td>
<td>0.00%</td>
<td>25,388</td>
<td>0</td>
</tr>
<tr>
<td>EPSDT Verbal Notification</td>
<td>883</td>
<td>18,519</td>
<td>16,494</td>
<td>89.06%</td>
<td>0</td>
<td>18,519</td>
</tr>
<tr>
<td>Core Assessment &amp; Policy Dev.</td>
<td>890</td>
<td>17,441</td>
<td>4,299</td>
<td>24.65%</td>
<td>17,441</td>
<td>0</td>
</tr>
<tr>
<td>Medicaid Match</td>
<td>891</td>
<td>896,267</td>
<td>566,178</td>
<td>63.17%</td>
<td>0</td>
<td>896,267</td>
</tr>
<tr>
<td>Minor Receipts</td>
<td>892</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Capital</td>
<td>894</td>
<td>0</td>
<td>0</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Allocable Direct</td>
<td>895</td>
<td>1,113,093</td>
<td>7,382</td>
<td>0.66%</td>
<td>1,113,093</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>16,295,676</td>
<td>7,576,041</td>
<td>46.49%</td>
<td>9,473,127</td>
<td>6,822,549</td>
</tr>
</tbody>
</table>

- Multiplier for Allowed Unrestricted Reserve: 30% 40%
- Allowed Unrestricted Reserve: $2,841,938 $2,729,019
- Allowed Non-Service Fee Restricted Reserves (30% of Total Non-Service Fee Expenses): $2,841,938
- Allowed Service Fee Restricted Reserves (40% of Total Service Fee Expenses): $2,729,019
- Total Allowed Unrestricted Reserve: $5,570,957.63
- Fiscal Year End Actual Unrestricted Reserve: $5,202,260.30
- Remaining Allowable Unrestricted Reserve: 368,697

### Description | FY2014       | FY2015      |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Unrestricted Reserve</td>
<td>$5,491,431.70</td>
<td>$5,707,957.63</td>
</tr>
<tr>
<td>Fiscal Year End Actual Unrestricted Reserve</td>
<td>4,907,890.95</td>
<td>5,202,260.30</td>
</tr>
<tr>
<td>Remaining Allowable Unrestricted Reserve</td>
<td>$583,540.75</td>
<td>$368,697.33</td>
</tr>
<tr>
<td>Total Program Restricted Reserves</td>
<td>$486,221.99</td>
<td>$703,377.06</td>
</tr>
<tr>
<td>Total Reserves</td>
<td>$5,394,112.94</td>
<td>$5,905,637.36</td>
</tr>
</tbody>
</table>
Lake Cumberland District Health Department
Statement of Revenues, Expenditures & Change in Fund Balance
As of Period Ending June 30, 2015

(Published in accordance with KRS 424.220 and 65.070. The following information may be inspected by the general public at 500 Bourne Ave., Somerset, KY from September 1, 2015 between the hours of 8:00 am to 4:30 pm.)

<table>
<thead>
<tr>
<th>Revenues:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>State</td>
<td>2,405,704</td>
</tr>
<tr>
<td>Federal</td>
<td>3,902,977</td>
</tr>
<tr>
<td>Local</td>
<td>2,931,831</td>
</tr>
<tr>
<td>Service Fees</td>
<td>7,517,671</td>
</tr>
<tr>
<td>Interest</td>
<td>49,017</td>
</tr>
<tr>
<td>State Restricted Previous Years' Carryover/Reserve Funds Used</td>
<td>0</td>
</tr>
<tr>
<td>Federal Restricted Previous Years' Carryover/Reserve Funds Used</td>
<td>65,292</td>
</tr>
<tr>
<td>Unrestricted Previous Years' Carryover/Reserve Funds Used</td>
<td>162,905</td>
</tr>
<tr>
<td><strong>Total Revenues:</strong></td>
<td><strong>$17,035,398</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditures:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary &amp; Leave</td>
<td>7,635,571</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>5,180,866</td>
</tr>
<tr>
<td>Independent Contractors</td>
<td>757,901</td>
</tr>
<tr>
<td>Travel</td>
<td>428,069</td>
</tr>
<tr>
<td>Space Occupancy</td>
<td>401,380</td>
</tr>
<tr>
<td>Office Administration</td>
<td>387,561</td>
</tr>
<tr>
<td>Medical Supplies</td>
<td>264,723</td>
</tr>
<tr>
<td>Automotive</td>
<td>5,079</td>
</tr>
<tr>
<td>Other</td>
<td>1,234,527</td>
</tr>
<tr>
<td>Capital Expenditures</td>
<td></td>
</tr>
<tr>
<td><strong>Total Expenditures:</strong></td>
<td><strong>$16,295,676</strong></td>
</tr>
</tbody>
</table>

| Excess Revenue over Expenditures (including Carryover/Reserve Funds) | 739,722 |
| Less State Restricted Previous Years’ Carryover Funds Used | 0 |
| Less Unrestricted Previous Years’ Carryover Funds Used | (65,292) |
| Unrestricted Previous Years’ Carryover/Reserve Funds Used | (162,905) |
| **Total Previous Year Carryover Funds Used** | **(228,197)** |

**Total Excess Revenue Over Expenditures** (Less Carryover Funds)   **$511,524.42**

**Fund Balance as of June 30, 2015**  **$5,905,637.36**
# Lake Cumberland District Health Department

## Revenue and Expense Summary Comparison to Prior Year

As of Period Ending June 30, 2015

<table>
<thead>
<tr>
<th></th>
<th>Current YTD Actual</th>
<th>Prior YTD Actual</th>
<th>Change</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State</td>
<td>2,405,704</td>
<td>2,542,356</td>
<td>(136,653)</td>
<td>-5%</td>
</tr>
<tr>
<td>Federal</td>
<td>3,902,977</td>
<td>3,965,031</td>
<td>(62,053)</td>
<td>-2%</td>
</tr>
<tr>
<td>Local</td>
<td>2,931,831</td>
<td>2,918,726</td>
<td>13,105</td>
<td>0%</td>
</tr>
<tr>
<td>Service Fees</td>
<td>7,566,689</td>
<td>7,670,889</td>
<td>(104,201)</td>
<td>-1%</td>
</tr>
<tr>
<td>Restricted Reserves</td>
<td>65,292</td>
<td>230,001</td>
<td>(164,709)</td>
<td>-72%</td>
</tr>
<tr>
<td>Unrestricted Reserves</td>
<td>162,905</td>
<td>581,269</td>
<td>(418,364)</td>
<td>-72%</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>17,035,398</td>
<td>17,908,273</td>
<td>(872,875)</td>
<td>-5%</td>
</tr>
<tr>
<td><strong>Expense</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salary &amp; Leave</td>
<td>7,635,571</td>
<td>8,179,030</td>
<td>(543,459)</td>
<td>-7%</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>5,180,866</td>
<td>4,569,510</td>
<td>611,355</td>
<td>13%</td>
</tr>
<tr>
<td>Independent Contractors</td>
<td>757,901</td>
<td>653,308</td>
<td>104,593</td>
<td>16%</td>
</tr>
<tr>
<td>Travel</td>
<td>428,069</td>
<td>411,709</td>
<td>16,360</td>
<td>4%</td>
</tr>
<tr>
<td>Space Occupancy</td>
<td>401,380</td>
<td>391,539</td>
<td>9,840</td>
<td>3%</td>
</tr>
<tr>
<td>Office Administration</td>
<td>387,561</td>
<td>385,698</td>
<td>1,863</td>
<td>0%</td>
</tr>
<tr>
<td>Medical Supplies</td>
<td>264,723</td>
<td>283,959</td>
<td>(19,236)</td>
<td>-7%</td>
</tr>
<tr>
<td>Automotive</td>
<td>5,079</td>
<td>7,882</td>
<td>(2,803)</td>
<td>-36%</td>
</tr>
<tr>
<td>Other</td>
<td>1,234,527</td>
<td>1,319,479</td>
<td>(84,952)</td>
<td>-6%</td>
</tr>
<tr>
<td><strong>Capital Expenditures</strong></td>
<td>5,450</td>
<td>(5,450)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Expense</strong></td>
<td>16,295,676</td>
<td>16,207,564</td>
<td>88,112</td>
<td>1%</td>
</tr>
<tr>
<td><strong>Excess/(Deficit) of Revenue over Expense</strong></td>
<td>739,722</td>
<td>1,700,708</td>
<td>(960,987)</td>
<td>-57%</td>
</tr>
<tr>
<td><strong>Less Restricted and Unrestricted Reserves Utilized</strong></td>
<td>(228,197)</td>
<td>(811,270)</td>
<td>583,073</td>
<td>-72%</td>
</tr>
<tr>
<td><strong>Actual Cash Surplus/(Deficit)</strong></td>
<td>511,524</td>
<td>889,438</td>
<td>(377,914)</td>
<td>-42%</td>
</tr>
</tbody>
</table>
The Diabetes Education Program has been busy this year providing educational displays and materials at health fairs, community events, and worksites, as well as educating the LCDHD community about diabetes via radio talk shows, payroll stuffers, and newspaper articles. Diabetes education was provided throughout the district with our AADE accredited self-management classes plus supplemental classes and support groups. Team members have actively participated in local health coalitions and the Kentucky Diabetes Network on the state level.

We have started a new program, the LIFE CHANGE diabetes prevention program, in Adair, Casey, and Clinton Counties with great success. This year-long program has proven to reduce the risk of type 2 diabetes by 58% and is a covered benefit for eligible members of the Kentucky Employees’ Health Plan (KEHP). We plan to expand this program in the coming year.

The STITCH Worksite Wellness program (funded by the three-year HSRA grant for diabetes prevention work-site wellness activities in Wayne and Clinton Counties at Patriot Industries) concluded this year with a total of 469 employees participating in some aspect of the project. Valuable lessons were learned from this project that can be used as we develop and expand the worksite wellness activities in our district.

At the beginning of 2015 LCDHD began a partnership with Humana Vitality to provide the Vitality Checks in Jefferson County for KEHP members. Contract staff was secured and screenings began early March. This venture has proven to be cost-effective and we hope to not only continue, but to expand this program next fiscal year. Additionally, diabetes team members began providing Vitality Checks for community KEHP members in the district.

The LCDHD Diabetes Education Program has adapted to the ever-changing needs and funding in public health. As we conclude this fiscal year we see that our program has expanded to cover not only diabetes prevention and education, but to include Vitality Checks and Worksite Wellness activities. So, we have changed our name to reflect our new roles –Wellness Outreach and Education. Our name has changed, but not our goals as we continue to strive to make our community healthier.
Clinical Services

The Lake Cumberland District Health Department (LCDHD) clinic nursing division has continued to provide quality health services the past year to the citizens of the LCDHD service area. The year has been full of both opportunities and challenges as budget constraints have resulted in staff attrition. Remaining staff have taken on new and ever evolving job duties.

As staff have been challenged working with fewer staff we have adopted a new system in scheduling our patients. We are in the second year of this process called same day scheduling (SDS), with SDS patients are instructed to come to the clinic or call for an appointment on the day they are seeking health department services. The patient is seen that day rather than schedule an appointment later in the week or sometimes up to 3 months in advance. As a result of SDS we are seeing a huge reduction in our “no show” rate and are able to maintain staff productivity.

We are in the second year of a 2 year grant to provide colon cancer screening to uninsured, eligible patients in our district. We have reached out to eligible clients through social marketing, newspaper, and radio ads all paid for through the grant we received. We continue to look for ways to find those who are uninsured and at high risk.

Our WIC program currently services approximately 8000 participants in the LCDHD. Each participant receives healthy foods, nutritional education, and referrals to other programs. The LCDHD WIC coordinator works with over 50 different stores and pharmacies who participate as vendors for WIC participants. The WIC program makes up over 50% of services that our clinics perform.

The breastfeeding and peer counselor program provides breastfeeding support throughout the district in various forms; support groups, phone call, home visits, health fairs, and one on one clinic visits.

The peer counselor program employs six peer counselors and provides support to clients in each of our ten counties.

Our prenatal program offers onsite prenatal care in 6 of the 10 LCDHD county health centers. Patients are able to receive quality services from a OB/GYN in their county of residence rather than travel to nearby county to receive care. Through a partnership with the University of Kentucky (UK); Russell, McCreary, and Wayne county are participating in Centering Pregnancy. Centering Pregnancy is a model of group healthcare. Health assessment, education, and support are provided in a group facilitated by a trained provider. Centering Pregnancy is an evidence based program proven to provide better patient outcomes for both mom and baby.

Recently LCDHD has begun preparing to provide Ryan White HIV/AIDS case management services to patients in the 10 county area as well in 21 additional counties east of our district. The Ryan White HIV/AIDS program was designed to address health care related needs to individuals who are HIV positive. The program helps clients find and utilize resources which will improve their overall health and quality of life.

We continue to provide family planning and cancer screening services to women in the LCDHD area. Women receive a full physical exam, education, counseling, and referral as needed. Women who meet income guidelines also receive assistance with additional testing and procedures such as mammogram, biopsy, etc. The clinic staff continue to provide immunizations for both adults and children, STD/HIV exams, TB screening and treatment, well child exams, lead screening, and medical nutrition therapy.

The LCDHD clinic nursing staff continues to strive to provide the best possible care to those in our communities.
Fiscal year 2015 has been a very good year for Lake Cumberland District Health Department H.A.N.D.S. program. As Director, I am extremely proud of the accomplishments of our team.

Lake Cumberland District H.A.N.D.S. remains the largest provider of H.A.N.D.S. services in the state of Kentucky; for both “First Time” families and “Multigravida” families. As we begin a new fiscal year, growth in both programs remains consistent. We currently provide home visitation and education to approximately 650 families enrolled in H.A.N.D.S. across our beautiful District.

We recently received some wonderful news from the H.A.N.D.S. central office in Frankfort, as Kentucky’s H.A.N.D.S. program applied for and received recognition from HOMVEE, as a federally approved home visitation program. This is very exciting news, as now, Kentucky’s H.A.N.D.S. can apply for and receive federal funding to support our program.

We have had very little staff turnover but, due to continued growth of H.A.N.D.S., several school nurses were transferred into the H.A.N.D.S. program and some additional staff have been hired. At this time, there are 50 folks working in H.A.N.D.S.. This additional staff will allow us to more effectively provide services to our H.A.N.D.S. families, in both programs.

Statistics compiled at the state level continue to show a reduction in premature and low birth weight babies and decreased instances of child abuse and neglect, as a direct result of the Kentucky H.A.N.D.S. program. One major focus of our program is baby’s brain development, which begins at birth.

Recently LCDHD H.A.N.D.S. was contacted by the University of Kentucky and asked to take part in a research project. This project will include LCDHD H.A.N.D.S., Wayne County and McCreary County Elementary Schools and the University Of Kentucky Department of Research and will evaluate the benefit of H.A.N.D.S. in preparing our enrolled children for school readiness. We are very excited to be a part of this project.

LCDHD H.A.N.D.S. has an amazing staff and our success and growth are a direct result of our staff’s desire and dedication to make a difference in the lives of our H.A.N.D.S. families and to educate our communities about the value of encouragement and support for new parents. Good things are happening in the lives of many new moms, dads and babies due to H.A.N.D.S.. As we begin FY 2016, the entire H.A.N.D.S. staff and I look forward to continued growth of our program and remain focused on our primarily goal: to help ALL new parents become the BEST parents they can be!!
Support Services

Another year has come and gone and our Clinic Support Staff continue to be as busy as ever providing support to the Clinic Providers through their daily routine of patient intake, check out, WIC issuance, medical record maintenance and many other duties. As with most departments in the agency, the Clinic Support Staff continue to do more with less. The past few years have been challenging to say the least.

Clinic Support Staff play a vital role in the day to day operations of the local health departments. Providing support to the Clinic Providers to enable them to provide effective and efficient patient care as well as supporting all other departments within the agency in various ways.

Same day scheduling has now been implemented in of 10 counties and seems to be going well.

In preparation for conversion to an electronic medical record, we have begun the processing of scanning inactive medical records and storing them in an electronic format. In the coming year we will more than likely begin using an electronic medical record which will be exciting as well as frustrating.

Quality improvement projects are being reviewed and will be put into place in the coming year.

I am proud to say that the Clinic Support Staff scores on Patient and Employee Satisfaction Surveys continue to remain high. We will continue to do our best to maintain our level of customer service.

Our Clinic Support Staff are a dedicated group of individuals and will continue to give their best efforts in carrying out the mission of the Lake Cumberland District Health Department.

School Health Program

The LCDHD School Health Program provides essential public health prevention and promotion services to the students, parents and school staff throughout our communities. Our public health school nurses are committed to providing the most comprehensive and efficient nursing care as possible to help decrease barriers to learning while improving community health. Our program, for the 2014-15 school year, consisted of forty eight satellite health department clinics which are located within twelve of our service area’s school districts. LCDHD provided registered nurses to staff these clinics at a contractual amount to the school board.

The LCDHD School Health Program offers a vast array of services, which include but are not limited to: assessment and treatment of illnesses, monitoring children with special health care needs/ chronic disease, emergent problem identification and treatment and asthma education. Referrals are given to primary care providers as indicated.

### 2014-2015 School Health Services Summary

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sick/acute visits</td>
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<tr>
<td>Daily medications</td>
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<tr>
<td>Diabetes</td>
<td>14,563</td>
</tr>
<tr>
<td>Asthma</td>
<td>2,606</td>
</tr>
<tr>
<td>Seizure</td>
<td>162</td>
</tr>
<tr>
<td>Allergies</td>
<td>128</td>
</tr>
<tr>
<td>Emergency-type visits</td>
<td>94</td>
</tr>
<tr>
<td>Well child exams</td>
<td>292</td>
</tr>
<tr>
<td>Required immunizations</td>
<td>3,020</td>
</tr>
<tr>
<td>Flu vaccine</td>
<td>2,421</td>
</tr>
<tr>
<td>KDE Required Screenings</td>
<td>3,201</td>
</tr>
<tr>
<td>Lice Screenings</td>
<td>4,524</td>
</tr>
<tr>
<td>MD referrals</td>
<td>647</td>
</tr>
<tr>
<td>Humana Vitality Checks (employees wellness)</td>
<td>3,307</td>
</tr>
</tbody>
</table>
The Preparedness Program of Lake Cumberland District Health Department has faced a very challenging year with the emergence of Ebola Virus Disease as a potential public health threat in the United States. Plans have been developed at the local, regional and state levels to ensure that our healthcare workers are prepared to respond and care for this highly infectious disease.

Last year, the Preparedness Program achieved 100% on the State Health Department Readiness Review, which means all program deliverables and requirements were met for the year. This is impressive due to the fact that funding and staffing levels are at all-time lows in the program. The Preparedness staff continue to do good work and make the most of every opportunity.

It is always important to build and strengthen local capacity and relationships with first responders, hospitals, long term care agencies, community organizations and other partners within the Lake Cumberland Region. The staff of the Preparedness Program at LCDHD are working diligently to build and maintain these relationships as well as the local capacity to detect and respond to events of public health significance.

The LCDHD Preparedness Program participated in the Region 14 Healthcare Preparedness Coalition Full Scale exercise in April 2015. This exercise involved numerous agencies from across the Lake Cumberland Region, including all nine hospitals, responding in a medical surge situation to set up an alternate care site. Additionally, the LCDHD Preparedness Program coordinates monthly redundant communication systems tests for the region and quarterly emergency notification drills for LCDHD staff and volunteers.

The Lake Cumberland District Medical Reserve Corps (LCDMRC) continues to train for situations in which the unit might be called upon to assist public health in an emergency response. These volunteers are valuable, pre-credentialed and trained resources that would be available to assist in a public health disaster or event.

The LCDHD Preparedness Program consists of 1 full-time Preparedness Manager and 1 full-time Epidemiologist.

For more information on Disaster Preparedness and Epidemiology, visit our website at www.lcdhd.org.
During the 2014-2015 fiscal year our epidemiologist, nursing and environmental staff investigated 103 reportable diseases and 14 outbreaks, 13 of which were in Long Term Care Facilities (LTCF). LTCFs are a perfect environment for spread of communicable disease; there were 6 gastrointestinal and 7 influenza outbreaks.

The 2014/15 flu vaccine was not a good match for the circulating flu virus strain (H3N2) and therefore afforded little protection during that season, causing higher rates of disease and hospitalization. When well matched, the flu vaccine is excellent at preventing serious consequences of influenza infection—such as pneumonia, hospitalization and death. The H3N2 strain is included in the 2015/16 vaccine, which should be much more protective this season. We encourage all individuals who are 65 years or older to receive the high dose flu vaccine as it induces a higher antibody response.

In order to aid LTCFs in their quest for prevention of disease and antibiotic resistance we have initiated a biannual focus group meeting with LTCF and hospital infection preventionists. Hopefully this will facilitate information sharing and enhance reporting of notifiable diseases.

We have also seen a dramatic increase in Hepatitis C (HCV) reporting. We are aware that Kentucky has the highest rates of HCV infections in the nation and that the major mode of transmission is via sharing contaminated syringes by IV drug users. Harm reduction strategies are being discussed in our district following the lead of Louisville and Lexington. We will also be able to provide HCV rapid testing in our clinics.

Christine Weyman, MD, PhD, FAAP
Medical Director

Environmental

Environmental Services has had another productive and positive year. We did lose one of our environmentalists in Casey County, but will be refilling that position in January. Otherwise we have a seasoned group of Senior Environmentalist that have proven most capable to deal with any situation that has presented itself thus far. We are very fortunate not to have the turnover in people and talent that other health departments face. A few years ago we decided that we wanted to empower our people to make the necessary decisions in their respective counties and now we are able to handle all of our problems in-house except for a very few. This is a very good thing in light of the fact that the state no longer has the technical consultant resources they once did to send into a county to assist.

This year we continue to see the resurgence of bedbugs in our communities. We have several complaints per week regarding the nuisance pests and are able to give advice on how to best get rid of them. There is no actual funding for bedbug remediation; however, we do provide education to the public. Along the same lines, mold continues to be a hot button issue. Like bedbugs there is no funding for remediation and the Health Department provides educational resources only.

The state legislation this year increased permit fees for all food service programs substantially. This increase should help our programs funding woes. According to the state, the increase was long overdue because Kentucky’s permit fees were much lower than other states. As the graph states, food service is our largest program and the fee increase will help with this vital program. As our society shifts from eating most meals at home to eating most meals in a restaurant, the potential for

(continued on the next page)
foodborne illness exponentially increases so the importance of food inspections increases.

We are still actively monitoring rabies and quarantining or submitting every animal that bites a person; inspecting all schools, mobile home parks, swimming pools, motels, tattoo and body piercing studios; investigating complaints whether it be rodent infestations or garbage and sewage; inspecting all installations of septic systems; and serve as the first point of contact and clearinghouse for all environmental issues. This is an incomplete list of what we do, but shows that we are involved deeply in our communities, and that the work we do touches everyone who lives in or visits the Lake Cumberland District.

Stuart Spillman, RS, REHS
Environmental Health Director

Environmental Inspections by Program 2014 - 2015

- Food Inspections: 1,881
- Public Facilities: 570
- Pool Monitoring: 82
- General Sanitation*: 528
- On-Site Sewage: 1,338
- Existing Septic Inspections: 208
- Follow-up Inspections of all types: 1,151

*including rabies and sewage complaints
Health Promotion and Policy

Health Promotion and Policy (HPP) Branch achieved great success in 2015. The Health Educators work diligently to make Lake Cumberland a healthier place to live, play and work. As the community representatives for LCDHD we maintain many roles such as advocates, educators, marketers, facilitators, and grant writers. Our days are busy, schedules are tight, jobs are challenging, rewards take time, environmental changes and policy implementation are slow; however, the health of our communities is improving.

How do we know they are improving?
1) Health Policy and Promotion Team
2) Health Coalitions
3) Education and Advocacy
4) Environmental and Policy Changes

Health Promotion and Policy accomplishments in 2015:

✓ Ten Health Coalitions on-going
✓ Ten Community Health Assessments (CHA) completed
✓ Ten County Health Improvement Plans (CHIP) completed
✓ Seven Community Health Education Plans completed
✓ Policy Implementation/Environmental Changes on-going
  • Tobacco Free Schools
  • Smoke Free Workplace
  • School Wellness Policies
  • Trail Town Certification
✓ PHAB Accreditation Domains completed
  • Domain 1
  • Domain 3
  • Domain 5
  • Domain 11

We look forward to the opportunities of the upcoming year. Our persistence and dedication are immense as we are committed to “Promoting Excellent Health That Lasts A Lifetime.”
District Services per Patient by Fiscal Year

Total Clinical Services by Program

- **WIC**: 23.62%
- **School Health**: 32.14%
- **Pediatrics**: 17.32%
- **Family Planning**: 6.62%
- **H.A.N.D.S.**: 5%
- **Maternity Services**: 3.71%
- **Nutrition Services**: 0.14%
- **Geriatrics**: 0.47%
- **Dental**: 0.24%
- **STDs**: 1.37%
- **Tuberculosis**: 2.02%
- **Cancer**: 1.49%

- **Adult Health**: 22,946
- **Cancer**: 5,819
- **Dental**: 951
- **Family Planning**: 25,927
- **Geriatrics**: 1,854
- **H.A.N.D.S.**: 19,589
- **Maternity Services**: 14,545
- **Nutrition Services**: 531
- **Pediatrics**: 67,866
- **School Health**: 125,907
- **STDs**: 5,367
- **Tuberculosis**: 7,923
- **WIC**: 92,552

**Unduplicated Individuals Receiving Clinical Services**: 43,923
Total Services per County by Fiscal Year

<table>
<thead>
<tr>
<th>County</th>
<th>FY 05-06</th>
<th>FY 06-07</th>
<th>FY 07-08</th>
<th>FY 08-09</th>
<th>FY 09-10</th>
<th>FY 10-11</th>
<th>FY 11-12</th>
<th>FY 12-13</th>
<th>FY 13-14</th>
<th>FY 14-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adair</td>
<td>43,867</td>
<td>41,280</td>
<td>48,316</td>
<td>49,673</td>
<td>57,616</td>
<td>53,870</td>
<td>49,388</td>
<td>45,204</td>
<td>31,300</td>
<td>26,913</td>
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<tr>
<td>Casey</td>
<td>39,393</td>
<td>42,950</td>
<td>48,797</td>
<td>48,841</td>
<td>49,826</td>
<td>43,747</td>
<td>43,002</td>
<td>39,475</td>
<td>32,252</td>
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<td>Clinton</td>
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<td>35,785</td>
<td>31,443</td>
<td>31,092</td>
<td>27,555</td>
<td>23,879</td>
<td>19,764</td>
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<tr>
<td>Cumberland</td>
<td>25,125</td>
<td>21,713</td>
<td>22,468</td>
<td>28,235</td>
<td>32,258</td>
<td>29,815</td>
<td>27,915</td>
<td>27,298</td>
<td>21,556</td>
<td>19,144</td>
</tr>
<tr>
<td>Green</td>
<td>42,362</td>
<td>40,245</td>
<td>41,069</td>
<td>41,974</td>
<td>44,621</td>
<td>38,900</td>
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<td>29,909</td>
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<td>McCreary</td>
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<td>70,701</td>
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<td>73,060</td>
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<td>67,273</td>
<td>63,474</td>
<td>51,734</td>
<td>48,021</td>
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<tr>
<td>Pulaski</td>
<td>172,989</td>
<td>178,137</td>
<td>188,757</td>
<td>186,738</td>
<td>181,768</td>
<td>156,144</td>
<td>145,035</td>
<td>132,943</td>
<td>109,721</td>
<td>94,916</td>
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<tr>
<td>Russell</td>
<td>61,950</td>
<td>56,282</td>
<td>64,194</td>
<td>65,611</td>
<td>67,057</td>
<td>57,378</td>
<td>54,584</td>
<td>51,086</td>
<td>44,718</td>
<td>27,406</td>
</tr>
<tr>
<td>Taylor</td>
<td>55,784</td>
<td>59,109</td>
<td>61,247</td>
<td>70,207</td>
<td>79,060</td>
<td>70,805</td>
<td>66,921</td>
<td>58,294</td>
<td>47,248</td>
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<tr>
<td>Wayne</td>
<td>58,411</td>
<td>62,236</td>
<td>67,682</td>
<td>66,343</td>
<td>71,148</td>
<td>66,007</td>
<td>65,679</td>
<td>63,035</td>
<td>53,193</td>
<td>47,331</td>
</tr>
</tbody>
</table>
Quality Improvement

The Lake Cumberland District Health Department submitted an application for voluntary national accreditation to the Public Health Accreditation Board (PHAB) in December 2014. The Accreditation Coordinator and Health Education Director attended the PHAB required training in February 2015 and all of the required documentation was submitted by July. The first review (a completeness review) has been completed by the PHAB accreditation specialist and the site visitors are now performing a final review of all the documentation. A PHAB site visit is scheduled in January 2016.

Revisions to the clinic utilization review tools continue to be made as needed to reflect the annual state updates to the Core Clinical Service Guide and Administrative Reference. These tools help assure that we remain in compliance with all the district and state requirements, as well as all federal guidelines. Peer reviews continue to be conducted quarterly in each county and district staff continue to complete an annual audit in each county using these tools. All ten counties were audited by the Division of Women’s Health from the Department of Public Health this year with excellent results.

The Safety Committee continues to promote health and safety in the workplace. Safety inspections are done annually and safety drills continue to be performed quarterly. The safety committee also developed several new policies that were approved by the District Board of Health last year.

Our patient satisfaction and employee satisfaction results remain very high. This is an indication that both our patients and our staff are pleased with the services we provide and the environment in which they work and receive care in spite of the financial struggles we have dealt with throughout the last several years.

Overall, the internal and external audit scores continue to be very good for all of our programs. We are very proud of these scores but still continue to strive for excellence in all areas.

PATIENT SATISFACTION SURVEY 2015

District Trend Report

<table>
<thead>
<tr>
<th>Interval</th>
<th>Start Date</th>
<th>End Date</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>T1</td>
<td>1/1/2003</td>
<td>12/31/2003</td>
<td>680</td>
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<tr>
<td>T2</td>
<td>1/1/2004</td>
<td>12/31/2004</td>
<td>425</td>
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<tr>
<td>T3</td>
<td>1/1/2006</td>
<td>12/31/2006</td>
<td>750</td>
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<tr>
<td>T4</td>
<td>1/1/2007</td>
<td>12/31/2007</td>
<td>559</td>
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<tr>
<td>T5</td>
<td>1/1/2008</td>
<td>12/31/2008</td>
<td>796</td>
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<tr>
<td>T6</td>
<td>1/1/2009</td>
<td>12/31/2009</td>
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<tr>
<td>T7</td>
<td>1/1/2010</td>
<td>12/31/2010</td>
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<tr>
<td>T8</td>
<td>1/1/2011</td>
<td>12/31/2011</td>
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<tr>
<td>T9</td>
<td>1/1/2012</td>
<td>12/31/2012</td>
<td>869</td>
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<tr>
<td>T10</td>
<td>1/1/2013</td>
<td>12/31/2013</td>
<td>826</td>
</tr>
<tr>
<td>T11</td>
<td>1/1/2014</td>
<td>12/31/2014</td>
<td>808</td>
</tr>
<tr>
<td>T12</td>
<td>1/1/2015</td>
<td>12/31/2015</td>
<td>603</td>
</tr>
</tbody>
</table>
1. How long did you wait until you were registered by the front desk/registration staff?

- 1. 0 - 5 mins.
- 2. 6 - 10 mins.
- 3. 11 - 15 mins.
- 4. 16 - 20 mins.
- 5. 20 mins. +

2. How long did you wait until you were called back?

- 1. 0 - 5 mins.
- 2. 6 - 10 mins.
- 3. 11 - 15 mins.
- 4. 16 - 20 mins.
- 5. 20 mins. +

3. How happy were you with how you were treated by the front desk/registration staff?

- 1. Very Unhappy
- 2. Unhappy
- 3. Neutral
- 4. Happy
- 5. Very Happy

4. How happy were you with how you were treated by the clinic staff?

- 1. Very Unhappy
- 2. Unhappy
- 3. Neutral
- 4. Happy
- 5. Very Happy
5. Did you have a physical exam today?

- Yes
- No

6. If you answered yes to question No. 5, how happy are you with the way the person who examined you today listened to you?

- Very Unhappy
- Unhappy
- Neutral
- Happy
- Very Happy

7. If you answered yes to question No. 5, how happy are you with the health care that the person who examined you today provided?

- Very Unhappy
- Unhappy
- Neutral
- Happy
- Very Happy

8. If you answered yes to question #5, how happy are you with the time the person who examined you today took to explain conditions and treatments?

- Very Unhappy
- Unhappy
- Neutral
- Happy
- Very Happy
9. How happy were you with the counseling and information you received?

10. How happy were you with the privacy provided to you during your visit?

11. Our hours are Monday - Friday 8 a.m. to 4:30 p.m. plus extended hours twice a month. Are you happy with these hours?

12. Are you charged for your services?
13. If so, are the charges reasonable?

1. Yes
2. No

14. Appointment

1. Yes
2. No

15. If the patient had an appointment, when did he/she arrive?

1. Early - On-time
2. 1 - 15 minutes late
3. 16 - 30 minutes late
4. over 30 minutes late

16. County

1. Adair
2. Casey
3. Clinton
4. Cumberland
5. Green
6. McCreaery
7. Pulaski
8. Russell
9. Taylor
10. Wayne

Int. Resp. Avg.

T1 195 1.10
T2 90 1.20
T3 172 1.10
T4 123 1.15
T5 131 1.17
T6 145 1.17
T7 155 1.17
T8 152 1.11
T9 164 1.15
T10 146 1.15
T11 89 1.20
T12 61 1.30

Int. Resp. Avg.

T1 548 1.04
T2 343 1.04
T3 688 1.07
T4 505 1.07
T5 705 1.05
T6 755 1.05
T7 768 1.07
T8 790 1.03
T9 792 1.07
T10 752 1.06
T11 756 1.09
T12 538 1.42

Int. Resp. Avg.

T1 585 1.15
T2 360 1.16
T3 670 1.10
T4 493 1.14
T5 692 1.13
T6 727 1.09
T7 726 1.09
T8 779 1.12
T9 754 1.18
T10 734 1.18
T11 721 1.12
T12 343 1.12

Int. Resp. Avg.

T1 675 6.01
T2 387 5.67
T3 728 6.22
T4 559 6.09
T5 796 6.12
T6 809 6.17
T7 822 6.30
T8 821 6.16
T9 840 6.22
T10 801 6.27
T11 806 6.33
T12 603 6.33
SAFETY MANAGEMENT PROGRAM 2015

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<th>Category</th>
<th>Ad</th>
<th>Ca</th>
<th>Cl</th>
<th>Cu</th>
<th>Gr</th>
<th>Mc</th>
<th>Pu</th>
<th>Ru</th>
<th>Ta</th>
<th>Wa</th>
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</thead>
<tbody>
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<td>Entrances/Exits</td>
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<td>100%</td>
<td>100%</td>
<td>100%</td>
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<tr>
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</tr>
<tr>
<td>Emergency Info/Doc</td>
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<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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</tr>
<tr>
<td>Fire Prevention</td>
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<td>100%</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>Hazard Communication</td>
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<td>100%</td>
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<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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</tr>
<tr>
<td>Electrical Systems</td>
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<td>100%</td>
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<td>100%</td>
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</tr>
<tr>
<td>Utilities &amp; Equip Mgmt</td>
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<td>100%</td>
<td>100%</td>
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<tr>
<td><strong>OVERALL</strong></td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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</table>

Overall Score: Percentage

![Graph Showing Overall Score for Each Location]
## UTILIZATION REVIEW: Clinics

### Medical Records Requirements

<table>
<thead>
<tr>
<th>Section</th>
<th>Previous Year</th>
<th>Current Year</th>
<th>Current Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>vs. District*</td>
<td>97%</td>
<td>98%</td>
<td>99%</td>
</tr>
</tbody>
</table>

### Immunization/Well Child

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Previous Year</th>
<th>Current Year</th>
<th>Current Month</th>
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### WIC

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### Prenatal Program Record Review

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### Family Planning

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## UTILIZATION REVIEW: Clinics

### Cancer Screening Program

<table>
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<td>Abnormal Pap. Follow-up</td>
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### STDs

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### TB

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### Period

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### Number of Questions Reviewed

<table>
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<tr>
<td>vs. District*</td>
<td>94%</td>
<td>96%</td>
<td>92%</td>
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*This reviews your scores against the average district review team scores for any charts (area) reviewed in any county for the same time period.*
The Human Resources (HR) Office continued to oversee the following:

- recruitment program and new employee orientation
- employee performance evaluation program
- employee benefit programs and required paperwork
- personnel actions in accordance with Local Health Merit System

The Human Resources Office has completed a Workforce Development Plan as part of the upcoming accreditation efforts. This plan indicates the many areas the agency is assisting employees such as new employee orientation, employee training, employee morale and incentives, as well as health and wellness programs.

It is rewarding to work with excellent dedicated staff within the HR Office and across our ten counties. I look forward to continuing to work with all of our employees in the future as they continue to make a difference in our communities each day.

Pam Godby, BS, MA
Human Resources Manager

Statistics for Fiscal Year 2014 - 2015
(November 2014 – November 2015)

HR Office is staffed with 2.5 FTE employees

The agency had 54 full time employees go off duty in the period

14 new full time employees were hired during the same period

Merit employees decreased by 40 full time employees from 221 to 181

Employee worksites reduced from 59 to 11

In addition LCDHD has assumed responsibility for 30 school sites under the new school health model. LCDHD conducts administrative oversight and quality assurance for these sites.
## 2015 EMPLOYEES

### ADAIR
- Akin, Rhonda G.
- Brendel, Jacquelyn M.
- Dillingham, Crystal G.
- Dye, Angela D.
- Greer, Destiny R.
- Hale, Pamela J.
- Harlow, Jelaine T.
- Kemp, Lisa A.
- Lawhorn, Marsha C.
- Matthews, Shannon M.
- Melson, Cynthia G.
- Patterson, Corey L.
- Walker, Julia B.
- Willis, LaDonna J.

### CASEY
- Bowmer, Natasha L.
- Brown, Lisa C.
- Coffman, Angelia M.
- Kane, Kimberly M.
- Porter, Sandra K.
- Stevens, Regina A.
- Watson-Wethington, Karen
- Wesley, Michelle L.
- Wilson, Kelly R.

### CLINTON
- Albertson, Vicky L.
- Arterburn, Jessica A.
- Beaty, Shannon G.
- Brown, Jennifer C.
- Flowers, Wanda P.
- Fryman, Etta G.
- Parrish, Donna J.
- Prater, Sabrina R.
- Thrasher, Christy J.

### CUMBERLAND
- Capps, Heather R.
- Coe, Raykesha N.
- England, Amanda J.
- Gibson, Sherri L.
- Long, Betty S.
- Nettles, Cindy J.
- Patterson, Chasity N.
- Riley, Martha J.

### DISTRICT
- Acey, Pamela J.
- Anderson, Lisa G.
- Baker, John T.
- Bourne, Shyla D.
- Bullock, Victoria L.
- Cook, William L.
- Copenhaver, Lauren F.
- Copenhaver, Melinda H.
- Crist, Joan
- Cross, DeAnn S.
- Dixon, Ashley E.
- Godby, Pamela A.
- Hamm, Priscilla J.
- Harris, Lisa A.
- Huckelby, Carol A.
- Jasper, Leah A.
- Livesay, Vickie F.
- McFeeters, Daniel J.
- McGowan, Michael D.
- Meece, Tina R.
- Munsey, Wilma J.
- Ramsey, Brian K.
- Silvers, Mary J.
- Simpson, Angela L.
- Smith, Melinda J.
- LHN 2
- SSSA 2
- Epidemiologist
- Nurse Supv 1
- Janitor
- SSsupv 1
- H Envir 2
- Janitor
- Nutrition Serv Supv
- Adm Sec
- Acct Clerk 3
- Accounting Supv
- Tech Speclst II
- Janitor
- Acct Clerk 2
- Admin Serv Mgr
- PH Dir 4
- Accounting Supv
- Adm Sec
- Acct Clerk 2
- Human Res Mgr
- PH Serv Coord
- Acct Clerk 3
- Adm Sec
- Dir Adm Ser
- Acct Clerk 3
- Information Mgr
- Maint Supv
- SSSA 2
- HR Assistant
- Tech Speclst I
- Acct Clerk 3
- Adm Sec
- Tech Speclst I
DISTRICT (cont.)
Sneed, Robyn L.
Thomas, Bethany A. Oursler
Tomlinson, Amy C.
Weyman, Christine
Young, Roger A.

GREEN
Bush, Kaylene W.
Davis, Lori R.
Durrett, Stella A.
Green, Timothy D.
Hodges, Jaclyn E.
Perkins, Sharon A.

McCREARY
Burke, Loretta L.
Creekmore, Tina A.
Farrington, Donna E.
Garner, Melissa K.
Gaskin, Jeanne F.
Keith, Gwendolyn E.
King, Tammy J.
Lair, Heather M.
Matthews, Lois A.
Miller, Mary E.
Roberts, Courtney L.
Simpson, Jarrod W.
Strunk, Rhonda M.
Trammell, Melissa K.
Tucker, Kimberly A.
Warman, Kimberly K.
Wells, Melissa A.
West, Christopher W.
Yadon, Sandra G.

PULASKI
Adams, Susan J.
Anderson, Jacqueline F.
Baker, Rebecca L.
Bender, Brigette E.
Burton, Patricia L.

Acct Clerk 3
Nurse Adminis
PH Preprdns Mgr
Med Dir
Maintenance Per

Chiswell, Rachel A.
Dacey, Peggy L.
Denney, Monica D.
Eaton, Marilyn L.
Gregory, Dorthy
Hall, Karen S.
Hall, Thomas J.
Hamilton, Jeremy S.
Harris, Jennifer Kay
Hickman, IV Jefferson
Hopkins, Angel D.
Jenkins, Tamara L.
Mayberry, Deborah E.
McGahan, Sabrina L.
McKnight, Belinda K.
Morris, Wilda C.
Osborne, Deana S.
Ping, Kathy J.
Pollitt, Shawnda D.
Poynter, Ashley M.
Poynter, Peggy L.
Price Jr., Ferlin S.
Spillman, Michael S.
Trull, Norma J.
Tuggle, April D.
Wesley, Sharon S.
West, Brian D.
Wiedeman, Devan A.

FSW III
SSSA 2
PH HANDS Spec
SSSA 2
Nurse Supv 1
Lab Tech
FSW 1
LHN 1
SSSA 2
LHN 2
H Educator 1
H Envir 2
LHN 1
Janitor
SSSupv 1
SSSA 2
LHN 4/Team Ldr
Janitor
LHN 2

FSW III
LHN 1
LHN 2
SSSupv 2
H Educator 3

PULASKI (cont.)
Catron, Tammy E.

H. Ed Director
Nurse Supv 1
PH HANDS Spec
SSSA 2
SSSA 2
LHN 4/Team Ldr
H Envir 2
LHN 2
SSSupv 1
LHN 2

SSSA 2
LHN 1
Nurse Supv 2
SSSA 2
Sr Clncl Asst
SSSA 2
LHN 2
SSSA 2
H Envir 2
APRN
Env Hlth Prog Mgr
LHN 4/Team Ldr
Lab Tech
PH HANDS Spec
LHN 2
SSSA 3-Env
PH HANDS Spec
SSSA 2
FSW III
SSSA 2
SSSA 2
Adm Sec
H Envir 2
Env Hlth Dir
LHN 2
FSW 2
LPN 2
Janitor
H Envir 1

Russell
Aaron, Tracy R.
Brockman, Beverly A.
Collins, Arlena BethAnn
Cummings, Candi L.
Curry, Ashley D.
Dial, Brenda S.
Dye, Jonathan P.
Heathman, Judy C.
Jones, Jane C.
Keen, Donna E.
RUSSELL (cont.)

Lee, Jamie L.
Mann-Polston, Connie M.
Roberson Daulton, Shirley A.
Smith, Melody A.
Spradlin, Connie L.
Tucker, Bonnie L.
Whitis, Sonya L.
Woodrum, Laura E.

Nurs Prog Mgr
PH HANDS Spec
H Educator 3
LHN 2
LHN 2
SSSA 2
LHN 2
Nurse Adminis

WAYNE

Atkinson, Rebecca R.
Bridgman, Ashley N.
Daniels, Shirley D.
East, Charlotte K.
Ferrell, Sylvia E.
Gregory, Lisa W.
Jones, Sandra L.
Lair, Heather M.
McGinnis, Danielle N.
Ramsey, Mary F.
Redman, Laura D.
Spears, Lora B.
Tucker, Anna Janae
Turner, Lori C.
Upchurch, Kristi D.
York, Nita J.

FSW III
H Educator 1
SSSA 2
SSSA 2
Nurse Adminis
LHN 4/Team Ldr
SSSupv 1
LHN 2
PH HANDS Spec
PH HANDS Spec
LHN 2
H Envir 2
LHN 4/Team Ldr
SSSA 2

TAYLOR

Arnold, Connie M.
Bender, Frances R.
Cowherd, Janet F
Dykes, Valerie A.
Franklin, Anita L.
Griffiths, Allison S.
Hall, Monica R.
Harrison, Megan R.
Lewis, Savannah L.
Milby, Janet L.
Murphy, Joyce C.
Pickett, Tammy G.
Warner, Samuel
Whitfill, Dawn P.
Wright, Tracy D.

LHN 4/Team Ldr
Nurse Supv 1
LHN 2
H Envir 2
LHN 2
SSSupv 1
LHN 2
LHN 2
PH HANDS Spec
SSSA 2
LPN 2
FSW III
Janitor
LHN 2
SSSA 2
Congratulations!

Michael Cash
Janitor
McCreary County
May 13, 2002 to May 31, 2015

Sharon Wesley
LPN II
Pulaski County
November 13, 1989 to June 30, 2015

Fay Delcamp
Nurse Supervisor 1
Wayne County
December 30, 1985 to January 31, 2015

Cheryl Clark
Support Supervisor I
Taylor County
August 19, 1991 to June 30, 2015

Carol Lane
Accounting Supervisor
District Office
April 27, 1981 to July 31, 2015
Lake Cumberland District Health Department
500 Bourne Avenue
PO Box 800
Somerset, KY 42501
(606) 678-4761
(606) 678-2708 (fax)
1-800-928-4416

Adair County Health Center
801 Westlake Drive
Columbia, KY 42728
(270) 384-2286
(270) 384-4800 (fax)

Casey County Health Center
199 Adams Street
Liberty, KY 42539
(606) 787-6911
(606) 787-2507 (fax)

Clinton County Health Center
131 Foothills Avenue
Albany, KY 42602
(606) 387-5711
(606) 387-7212 (fax)

Cumberland County Health Center
226 Copper Lane
Burkesville, KY 42717
(270) 864-2206
(270) 864-1232 (fax)
Green County Health Center
220 Industrial Park
PO Box 177
Greensburg, KY 42743
(270) 932-4341
(270) 932-6016 (fax)

McCreary County Health Center
119 Medical Lane
PO Box 208
Whitley City, KY 42653
(606) 376-2412
(606) 376-3815 (fax)

Pulaski County Health Center
45 Roberts Street
Somerset, KY 42501
(606) 679-4416
(606) 679-4419 (fax)

Russell County Health Center
211 Fruit of the Loom Drive
PO Box 378
Jamestown, KY 42629
(270) 343-2181
(270) 343-2183 (fax)

Taylor County Health Center
1880 N. Bypass Road
Campbellsville, KY 42718
(270) 465-4191
(270) 789-3873 (fax)

Wayne County Health Center
39 Jim Hill Service Road
Monticello, KY 42633
(606) 348-9349
(606) 348-7464 (fax)
A Healthy Today for a Brighter Tomorrow.