



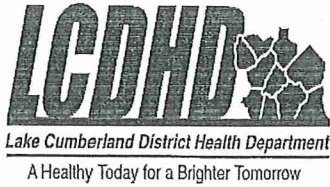
Lake Cumberland District Health Department

ADAIR COUNTY HEALTH CENTER
801 Westlake Drive • Columbia, KY 42728
Phone (270) 384-2286 • Fax (270) 384-4800
www.lcdhd.org

Agenda – Adair Co. Board of Health Meeting

Thursday, February 13, 2020 – 12:00 Noon CT

- 1) Call to order (Shantila)
 - 2) Approve Minutes (Shantila)
 - 3) District Director Report (Mr. Crabtree)
 - 4) Financial Report (Mr. Crabtree)
 - 5) Set tax rate for FY '20 – '21 (Mr. Crabtree)
 - 6) Set budget for FY '20 – '21 (Mr. Crabtree)
 - 7) Diabetes Update (Janet Cowherd)
 - 8) Health Education Update (Jelaine Harlow)
 - 9) Election of Officers
 - 10) Board Term Expirations
 - 11) Board Members on Dist. Board
 - 12) Adjournment (Shantila)
-



Lake Cumberland District Health Department

ADAIR COUNTY HEALTH CENTER
801 Westlake Drive • Columbia, KY 42728
Phone (270) 384-2286 • Fax (270) 384-4800
www.lcdhd.org

Minutes – Adair Co. Board of Health

Special – Called Meeting

Wednesday, June 12, 2019 – 12:00 noon

Adair Co. Health Dept. Conference Room

Board Members Present: Shantila Rexroat, Chairman; Matt Jackson, RPh; Debbie Cowan; Sheri Hutchison; Lee Ann Jessee; Dr. Jacob Burton, OD; Billy Coffey

Board Members Absent: Judge/Exec. Gale Cowan; Dr. Janella Brown, DMD; Dr. James Bergin, MD; Dr. Catherine Feese, MD; Dr. Gary Partin, MD

Others Present: Ronald Cimala; Marsha Lawhorn

Chairman Shantila Rexroat called the meeting to order. A quorum was present. The purpose of the meeting was to award a bid for the roof replacement due to storm damage. Minutes from the previous meetings were also approved.


Jacob Burton made a motion to approve the minutes from February 25, 2019 meeting, seconded by Billy Coffey. Lee Ann Jessee made a motion to approve the minutes from the April 15, 2019 Special Called Meeting, seconded by Debbie Cowan.

Three estimates were discussed for the roof replacement from C & B Roofing Company, KACo Claims, and Burris Home Improvement LLC. After discussion Billy Coffey made a motion to upgrade to a metal roof with Burris Home Improvement LLC, seconded by Jacob Burton. Motion carried unanimously. Chairman Shantila Rexroat declared the meeting adjourned.

SIGNED,


CHAIRMAN

SIGNED,


Digitally signed by
Shawn D. Crabtree
Date: 2019-07-09
18:55:58

SECRETARY

**Adair County Public Health Taxing District
Fiscal Year 2020-21**

Opening Balance Calculation

	Operating Fund	Capital Fund	Total	
Account Balance as of December 31, 2019	\$271,686.99	\$0.00	\$271,686.99	\$271,686.99
Projected Remaining 2019-20 Receipts				
Projected Tax Receipts	\$71,066.90	\$0.00	\$71,066.90	
Projected Interest Earned	\$1,018.83	\$0.00	\$1,018.83	
Projected Other Receipts	\$0.00	\$0.00	\$0.00	
Total Estimated Remaining 2020 Receipts	\$72,085.72	\$0.00	\$72,085.72	\$72,085.72
Total Funds Available	\$343,772.71	\$0.00	\$343,772.71	\$343,772.71
Projected Remaining 2019-20 Expenditures				
LCDHD Operations Expense - 1/2 Tax Assessment at 2.8 cents	\$111,203.00	\$0.00	\$111,203.00	
Advertising & Printing	\$292.00	\$0.00	\$292.00	
Professional Services (Audit)	\$0.00	\$0.00	\$0.00	
Maintenance & Repair	\$18,706.91	\$0.00	\$18,706.91	
Dues & Subscriptions (KPHA & KALBOH)	\$500.00	\$0.00	\$500.00	
Board Expense & Other Miscellaneous	\$500.00	\$0.00	\$500.00	
Furniture & Fixtures	\$3,500.00	\$0.00	\$3,500.00	
Equipment	\$14,200.00	\$0.00	\$14,200.00	
Total Estimated Remaining 2020 Expenditures	\$148,901.91	\$0.00	\$148,901.91	\$148,901.91
Estimated 2020-21 Opening Balance	\$194,870.80	\$0.00	\$194,870.80	\$194,870.80

Proposed Budgets For Period Beginning July 1, 2020 and Ending June 30, 2021

	Operating Fund	Capital Fund	Approved Budget @ Current Rate of \$0.03 per \$100 of Assessed Property Value	Proposed Break Even Budget @ \$0.035 per \$100 of Assessed Property Value	Proposed Surplus Budget @ \$0.037 per \$100 of Assessed Property Value
Estimated opening Balance	\$194,870.80	\$0.00	\$194,870.80	\$194,870.80	\$194,870.80
Budgeted Receipts (All Sources):					
Real Property Taxes	\$174,339.04		\$174,339.04	\$203,395.55	\$215,018.15
Tangible Personal Property Taxes	\$23,582.99		\$23,582.99	\$27,513.49	\$29,085.69
Motor Vehicle Taxes	\$31,864.10		\$31,864.10	\$37,174.78	\$39,299.06
Delinquent Tax Collections	\$2,982.44		\$2,982.44	\$2,982.44	\$2,982.44
Other Taxes - Telecommunications	\$3,200.00		\$3,200.00	\$3,200.00	\$3,200.00
Interest Income	\$1,162.01	\$0.00	\$1,162.01	\$1,449.24	\$1,564.13
Total Budgeted Receipts	\$237,130.58	\$0.00	\$237,130.58	\$275,715.50	\$291,149.47
Total Funds Available	\$432,001.38	\$0.00	\$432,001.38	\$470,586.30	\$486,020.27
Budgeted Expenditures:					
LCDHD Health Center Management Fee at 2.8 cents	\$225,755.00		\$225,755.00	\$225,755.00	\$225,755.00
Building Maintenance & Repair					
<i>Snow Removal (parking lot & sidewalks)</i>	\$1,000.00				
<i>Landscape Maintenance (Fall & Spring)</i>	\$1,000.00				
<i>Painting All Upstairs Floor</i>	\$12,000.00				
<i>Miscellaneous Maintenance & Repair</i>	\$14,000.00				
Total Building Maintenance & Repair	\$28,000.00		\$28,000.00	\$28,000.00	\$28,000.00
Furniture & Fixtures					
<i>Seasonal Décor</i>	\$250.00				
<i>Office Chairs (If Needed)</i>	\$1,500.00				
<i>Kitchen Supplies (If Needed)</i>	\$500.00				
<i>Miscellaneous Furniture & Fixtures</i>	\$2,500.00				
Total Furniture & Fixtures	\$4,750.00		\$4,750.00	\$4,750.00	\$4,750.00
Equipment					
<i>Miscellaneous Computers and Related Equipment</i>	\$9,200.00				
<i>Generator Maintenance</i>	\$1,400.00				
<i>Miscellaneous Equipment</i>	\$5,000.00				
Total Equipment	\$15,600.00		\$15,600.00	\$15,600.00	\$15,600.00
Professional Services (Next Audit of Taxing District Funds due FY 2021)	\$0.00		\$0.00	\$0.00	\$0.00
Advertisement & Printing (Newspaper & SPGE Publication)	\$300.00		\$300.00	\$300.00	\$300.00
Dues and Subscriptions (KALBOH & KPHA)	\$1,000.00		\$1,000.00	\$1,000.00	\$1,000.00
Miscellaneous (Board Members Meetings)	\$500.00		\$500.00	\$500.00	\$500.00
Total Budgeted Expenditures	\$275,905.00	\$0.00	\$275,905.00	\$275,905.00	\$275,905.00
Balance Remaining	\$156,096.38	\$0.00	\$156,096.38	\$194,681.30	\$210,115.27
Net Surplus/Deficit			(\$38,774.42)	(\$189.50)	\$15,244.47

Footnote: All tax receipts are budgeted at a 95% collection rate on the tax rate calculated per \$100 of property value. Interest is calculated at the current effective rate which is .75% for the money market account.

**Lake Cumberland District Health Department
Local Support Determinations for FY 2020-2021
Adair County Public Health Taxing District**

From 2019 Property Tax Assessment

	Total Property Subject to Taxation	Real Property Subject to Taxation	Personal Property Subject to Taxation	Motor Vehicle Property Subject to Taxation
F - Real Estate	595,443,663	595,443,663		
G - Tangible Personal	37,584,302		37,584,302	
H - PS Real Estate - Effective	16,272,268	16,272,268		
I - PS Tangible - Effective	40,501,265		40,501,265	
J - Distilled Spirits	0		0	
M - Motor Vehicles	111,803,861			111,803,861
N - Watercraft	3,494,819		3,494,819	
Aircraft	311,300		311,300	
Watercraft (Non-Commercial)	852,721		852,721	
Inventory in Transit	2,924		2,924	
Total	806,267,123	611,715,931	82,747,331	111,803,861
Tax Base (Total Divided by 100)	8,062,671	6,117,159	827,473	1,118,039
Tax Rate		\$ 0.0300	\$ 0.0300	\$ 0.0300
Total Projected Tax (Tax Base * Tax Rate)	241,880	183,515	24,824	33,541
Required Support @ .028	225,755	171,280	23,169	31,305
Tax Support for Land, Building & Equipment	16,125	12,234	1,655	2,236
Tax Projections @ 95% Collection Rate				
Real Property Projections	174,339			
Tangible Personal Property Projections	23,583			
Motor Vehicle Projections	31,864			
Total	229,786			

**Lake Cumberland District Health Department
Local Support Determinations for FY 2020-2021
Adair County Public Health Taxing District**

From 2019 Property Tax Assessment

	Total Property Subject to Taxation	Real Property Subject to Taxation	Personal Property Subject to Taxation	Motor Vehicle Property Subject to Taxation
F - Real Estate	595,443,663	595,443,663		
G - Tangible Personal	37,584,302		37,584,302	
H - PS Real Estate - Effective	16,272,268	16,272,268		
I - PS Tangible - Effective	40,501,265		40,501,265	
J - Distilled Spirits	0		0	
M - Motor Vehicles	111,803,861			111,803,861
N - Watercraft	3,494,819		3,494,819	
Aircraft	311,300		311,300	
Watercraft (Non-Commercial)	852,721		852,721	
Inventory in Transit	2,924		2,924	
Total	806,267,123	611,715,931	82,747,331	111,803,861
Tax Base (Total Divided by 100)	8,062,671	6,117,159	827,473	1,118,039
Tax Rate		\$ 0.0350	\$ 0.0350	\$ 0.0350
Total Projected Tax (Tax Base * Tax Rate)	282,193	214,101	28,962	39,131
Required Support @ .028	225,755	171,280	23,169	31,305
Tax Support for Land, Building & Equipment	56,439	42,820	5,792	7,826
Tax Projections @ 95% Collection Rate				
Real Property Projections	203,396			
Tangible Personal Property Projections	27,513			
Motor Vehicle Projections	37,175			
Total	268,084			

**Lake Cumberland District Health Department
Local Support Determinations for FY 2020-2021
Adair County Public Health Taxing District**

From 2019 Property Tax Assessment

	Total Property Subject to Taxation	Real Property Subject to Taxation	Personal Property Subject to Taxation	Motor Vehicle Property Subject to Taxation
F - Real Estate	595,443,663	595,443,663		
G - Tangible Personal	37,584,302		37,584,302	
H - PS Real Estate - Effective	16,272,268	16,272,268		
I - PS Tangible - Effective	40,501,265		40,501,265	
J - Distilled Spirits	0		0	
M - Motor Vehicles	111,803,861			111,803,861
N - Watercraft	3,494,819		3,494,819	
Aircraft	311,300		311,300	
Watercraft (Non-Commercial)	852,721		852,721	
Inventory in Transit	2,924		2,924	
Total	806,267,123	611,715,931	82,747,331	111,803,861
Tax Base (Total Divided by 100)	8,062,671	6,117,159	827,473	1,118,039
Tax Rate		\$ 0.0370	\$ 0.0370	\$ 0.0370
Total Projected Tax (Tax Base * Tax Rate)	298,319	226,335	30,617	41,367
Required Support @ .028	225,755	171,280	23,169	31,305
Tax Support for Land, Building & Equipment	72,564	55,054	7,447	10,062
Tax Projections @ 95% Collection Rate				
Real Property Projections	215,018			
Tangible Personal Property Projections	29,086			
Motor Vehicle Projections	39,299			
Total	283,403			

WORKSHEET FOR CERTIFICATION ASSESSMENT FOR LOCAL GOVERNMENT

CLASS OF PROPERTY

REAL ESTATE, TANGIBLE PERSONALTY, PUBLIC SERVICE AND DISTILLED SPIRITS

A 2018 Assessment of Adjusted Property At Full Rates			682,049,088
Net Change in	2019	86,938,800	
B 2019 Homestead Exemptions	2018	81,509,300	5,429,500
C 2018 Adjusted Tax Base			676,619,588
D 2019 Net Assessment Growth			13,181,910
E 2019 Total Valuation of Adjusted Property at Full Rates			689,801,498
	Property Subject to Taxation 2018	Net Assessment Growth	Property Subject to Taxation 2019
F Real Estate	\$581,819,496	19,053,667	\$595,443,663
G Tangible Personalty	34,882,542	2,701,760	37,584,302
H P.S. Co-Real Estate-Effective	25,736,892	(9,464,624)	16,272,268 *
P.S. Co.-Real Estate-100%	25,736,892	(9,464,624)	16,272,268 *
I P.S. Co.-Tang.-Effective	39,610,159	891,107	40,501,265 *
P.S. Co.-Tang.-100%	42,700,008	1,305,803	44,005,811 *
J Distilled Spirits	-	-	-
K Electric Plant Board	-	-	-
L Insurance Shares	-	-	-
M Motor Vehicles - Includes Public Service Motor Vehicles	108,329,924		111,803,861
N Watercraft	3,117,311		3,494,819
Net New Property: PVA Real Estate			8,336,900
P. S. Co. Real Estate-Effective			(9,464,624) *
Unmined Coal			-
Tobacco in Storage			-
Other Agricultural Products			-

The following tangible items are not included in line G. Aircraft and watercraft assessment may be taxed or exempted at your option. Inventory in transit may be taxed only by special districts.

Aircraft(Recreational & Non-Commercial)	311,300
Watercraft(Non-Commercial)	852,721
Inventory in transit	2,924

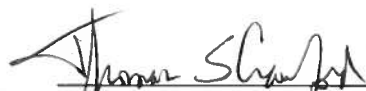
2018 R. E. Exonerations & Refunds	2,167,900
2018 Tangible Exonerations & Refunds	1,061,782

* Estimated Assessment
+ Increase Exonerations

I, Thomas S. Crawford, Director, Division of Local Support, certify that the above total is the equalized assessment of the different classes of property and the total assessment of ADAIR County as made by the Office of Property Valuation for 2019, subject to any increases or decreases that may hereafter be made as a result of the appeals to the Kentucky Board of Tax Appeals.

Witness my hand this

7-29-2019


 Thomas S. Crawford, Director
 Division of Local Support
 Office of Property Valuation
 Finance and Administration Cabinet

Taxing District	Tax Rate	Year	Revenues	Expenditures	Net Income/Loss	Bank Account Balance	Percentage of Increase/Decrease	Percentage of Annual Expenses Covered by Tax Revenue	Percentage of Annual Expenses in Excess of Tax Revenue	Bldg. Sq. Ft	Construction Cost @ \$215.00	Construction Cost/10	% of Reserve Need
Adair	\$0.030	2011	\$ 176,362.05	\$ 155,739.90	\$ 20,622.15	\$ 209,689.59		100%	0%				
		2012	\$ 208,495.96	\$ 209,241.65	\$ (745.69)	\$ 208,943.90	0%	100%	0%				
		2013	\$ 216,845.85	\$ 220,436.76	\$ (3,590.91)	\$ 205,352.99	-2%	98%	2%				
		2014	\$ 215,158.91	\$ 212,152.08	\$ 3,006.83	\$ 208,359.82	1%	100%	0%				
		2015	\$ 221,362.30	\$ 208,321.80	\$ 13,040.50	\$ 221,400.32	6%	100%	0%				
		2016	\$ 218,981.12	\$ 217,606.52	\$ 13,040.50	\$ 222,774.92	1%	100%	0%				
		2017	\$ 222,565.64	\$ 234,928.07	\$ (12,362.43)	\$ 210,412.49	-6%	95%	5%				
		2018	\$ 220,562.72	\$ 224,692.31	\$ (4,129.59)	\$ 206,282.90	-2%	98%	2%				
		2019	\$ 235,684.82	\$ 228,131.59	\$ 7,553.23	\$ 213,836.13	4%	100%	0%	10,845	\$ 2,331,675.00	\$ 233,167.50	92%
		μ	\$ 215,113.26	\$ 212,361.19	\$ 2,752.08	\$ 211,894.78							
Casey	\$0.043	2011	\$ 237,574.17	\$ 114,985.37	\$ 122,588.80	\$ 138,541.99		100%	0%				
		2012	\$ 247,924.81	\$ 170,292.47	\$ 77,632.34	\$ 216,174.33	36%	100%	0%				
		2013	\$ 252,295.48	\$ 169,728.85	\$ 82,566.63	\$ 298,740.96	28%	100%	0%				
		2014	\$ 247,380.71	\$ 176,819.38	\$ 70,561.33	\$ 369,302.29	19%	100%	0%				
		2015	\$ 261,373.84	\$ 200,095.03	\$ 61,278.81	\$ 430,581.10	14%	100%	0%				
		2016	\$ 269,572.29	\$ 178,972.13	\$ 90,600.16	\$ 521,181.26	17%	100%	0%				
		2017	\$ 273,914.44	\$ 191,024.91	\$ 82,889.53	\$ 604,070.79	14%	100%	0%				
		2018	\$ 273,696.22	\$ 196,947.43	\$ 76,748.79	\$ 680,819.58	11%	100%	0%				
		2019	\$ 318,449.10	\$ 193,730.40	\$ 124,718.70	\$ 805,538.28	15%	100%	0%	4,187	\$ 900,205.00	\$ 90,020.50	895%
		μ	\$ 264,686.78	\$ 176,955.11	\$ 87,731.68	\$ 451,661.18							
Clinton	\$0.035	2011	\$ 116,202.81	\$ 87,867.60	\$ 28,335.21	\$ 111,499.15		100%	0%				
		2012	\$ 161,742.57	\$ 139,766.60	\$ 21,975.97	\$ 133,475.12	16%	100%	0%				
		2013	\$ 168,576.78	\$ 147,041.29	\$ 21,535.49	\$ 155,010.61	14%	100%	0%				
		2014	\$ 169,844.80	\$ 142,090.30	\$ 27,754.50	\$ 182,765.11	15%	100%	0%				
		2015	\$ 163,111.64	\$ 140,070.60	\$ 23,041.04	\$ 205,806.15	11%	100%	0%				
		2016	\$ 170,384.82	\$ 149,560.36	\$ 20,824.46	\$ 226,630.61	9%	100%	0%				
		2017	\$ 172,093.31	\$ 145,559.99	\$ 26,533.32	\$ 253,163.93	10%	100%	0%				
		2018	\$ 167,752.72	\$ 171,341.49	\$ (3,588.77)	\$ 249,575.16	-1%	98%	2%				
		2019	\$ 186,702.76	\$ 175,151.12	\$ 11,551.64	\$ 261,126.80	4%	100%	0%	4,209	\$ 904,935.00	\$ 90,493.50	289%
		μ	\$ 164,045.80	\$ 144,272.15	\$ 19,773.65	\$ 197,672.52							
Cumberland	\$0.035	2011	\$ 79,402.91	\$ 61,821.51	\$ 17,581.40	\$ 65,347.14		100%	0%				
		2012	\$ 111,667.46	\$ 96,242.00	\$ 15,425.46	\$ 80,772.60	19%	100%	0%				
		2013	\$ 114,708.98	\$ 114,831.98	\$ (123.00)	\$ 80,649.60	0%	100%	0%				
		2014	\$ 119,085.31	\$ 97,008.94	\$ 22,076.37	\$ 102,725.97	21%	100%	0%				
		2015	\$ 117,208.75	\$ 96,586.60	\$ 20,622.15	\$ 123,348.12	17%	100%	0%				
		2016	\$ 122,373.28	\$ 118,901.32	\$ 3,471.96	\$ 126,820.08	3%	100%	0%				
		2017	\$ 123,778.01	\$ 143,003.58	\$ (19,225.57)	\$ 107,594.51	-18%	87%	13%				
		2018	\$ 126,050.13	\$ 132,076.09	\$ (6,025.96)	\$ 101,568.55	-6%	95%	5%				
		2019	\$ 127,976.42	\$ 111,817.78	\$ 16,158.64	\$ 117,727.19	14%	100%	0%	6,486	\$ 1,394,490.00	\$ 139,449.00	84%
		μ	\$ 115,805.69	\$ 108,032.20	\$ 7,773.49	\$ 100,728.20							
Green	\$0.034	2011	\$ 138,413.23	\$ 109,070.63	\$ 29,342.60	\$ 108,351.76		100%	0%				
		2012	\$ 142,882.49	\$ 151,709.98	\$ (8,827.49)	\$ 99,524.27	-9%	94%	6%				
		2013	\$ 152,090.47	\$ 143,711.44	\$ 8,379.03	\$ 107,903.30	8%	100%	0%				
		2014	\$ 141,318.06	\$ 131,384.68	\$ 9,933.38	\$ 117,836.68	8%	100%	0%				
		2015	\$ 145,982.64	\$ 126,382.41	\$ 19,600.23	\$ 137,436.91	14%	100%	0%				
		2016	\$ 149,910.61	\$ 127,673.72	\$ 22,236.89	\$ 159,673.80	14%	100%	0%				
		2017	\$ 143,692.46	\$ 132,194.83	\$ 11,497.63	\$ 171,171.43	7%	100%	0%				
		2018	\$ 165,539.78	\$ 152,169.86	\$ 13,369.92	\$ 184,541.35	7%	100%	0%				
		2019	\$ 160,566.04	\$ 139,953.23	\$ 20,612.81	\$ 205,154.16	10%	100%	0%	4,595	\$ 987,925.00	\$ 98,792.50	208%
		μ	\$ 148,932.86	\$ 134,916.75	\$ 14,016.11	\$ 143,510.41							

Taxing District	Tax Rate	Year	Revenues	Expenditures	Net Income/Loss	Bank Account Balance	Percentage of Increase/Decrease	Percentage of Annual Expenses Covered by Tax Revenue	Percentage of Annual Expenses in Excess of Tax Revenue	Bldg. Sq. Ft	Construction Cost @ \$215.00	Construction Cost/10	% of Reserve Need
McCreary	\$0.040	2011	\$ 184,076.80	\$ 155,877.44	\$ 28,199.36	\$ 293,302.01		100%	0%				
		2012	\$ 193,873.57	\$ 195,154.26	\$ (1,280.69)	\$ 292,021.32	0%	99%	1%				
		2013	\$ 192,101.76	\$ 187,218.54	\$ 4,883.22	\$ 296,904.54	2%	100%	0%				
		2014	\$ 177,438.07	\$ 149,970.48	\$ 27,467.59	\$ 324,372.13	8%	100%	0%				
		2015	\$ 196,835.96	\$ 151,420.18	\$ 45,415.78	\$ 369,787.91	12%	100%	0%				
		2016	\$ 195,250.85	\$ 188,962.06	\$ 6,288.79	\$ 376,076.70	2%	100%	0%				
		2017	\$ 195,363.46	\$ 154,919.22	\$ 40,444.24	\$ 416,520.94	10%	100%	0%				
		2018	\$ 200,555.23	\$ 179,116.53	\$ 21,438.70	\$ 437,959.64	5%	100%	0%				
		2019	\$ 231,978.73	\$ 204,619.27	\$ 27,359.46	\$ 465,319.10	6%	100%	0%	7,254	\$ 1,559,610.00	\$ 155,961.00	298%
		μ	\$ 196,386.05	\$ 174,139.78	\$ 22,246.27	\$ 363,584.92							
Pulaski	\$0.030	2011	\$ 768,661.39	\$ 703,676.35	\$ 64,985.04	\$ 469,096.12		100%	0%				
		2012	\$ 1,124,615.32	\$ 1,132,202.94	\$ (7,587.62)	\$ 461,508.50	-2%	99%	1%				
		2013	\$ 1,142,524.71	\$ 1,128,369.15	\$ 14,155.56	\$ 475,664.06	3%	100%	0%				
		2014	\$ 1,167,327.70	\$ 1,140,189.79	\$ 27,137.91	\$ 502,801.97	5%	100%	0%				
		2015	\$ 1,185,553.54	\$ 1,144,846.29	\$ 40,707.25	\$ 543,509.22	7%	100%	0%				
		2016	\$ 1,183,571.71	\$ 1,159,188.62	\$ 24,383.09	\$ 567,892.31	4%	100%	0%				
		2017	\$ 1,249,375.16	\$ 1,171,924.09	\$ 77,451.07	\$ 645,343.38	12%	100%	0%				
		2018	\$ 1,271,483.66	\$ 1,216,336.91	\$ 55,146.75	\$ 700,490.13	8%	100%	0%				
		2019	\$ 1,307,727.56	\$ 1,347,209.84	\$ (39,482.28)	\$ 661,007.85	-6%	97%	3%	20,435	\$ 4,393,525.00	\$ 439,352.50	150%
		μ	\$ 1,155,648.97	\$ 1,127,104.89	\$ 28,544.09	\$ 558,590.39							
Russell	\$0.045	2011	\$ 2,776,219.46	\$ 2,395,127.28	\$ 381,092.18	\$ 269,154.51		100%	0%				
		2012	\$ 615,169.29	\$ 871,030.89	\$ (255,861.60)	\$ 13,292.91	-1925%	71%	29%				
		2013	\$ 495,923.69	\$ 503,315.76	\$ (7,392.07)	\$ 5,900.84	-125%	99%	1%				
		2014	\$ 494,908.53	\$ 478,979.98	\$ 15,928.55	\$ 21,829.39	73%	100%	0%				
		2015	\$ 471,725.84	\$ 479,033.98	\$ (7,308.14)	\$ 14,521.25	-50%	98%	2%				
		2016	\$ 473,420.18	\$ 481,538.14	\$ (8,117.96)	\$ 6,403.29	-127%	98%	2%				
		2017	\$ 491,375.03	\$ 482,151.19	\$ 9,223.84	\$ 15,627.13	59%	100%	0%				
		2018	\$ 495,178.84	\$ 490,691.32	\$ 4,487.52	\$ 20,114.65	22%	100%	0%				
		2019	\$ 523,462.30	\$ 491,611.34	\$ 31,850.96	\$ 51,965.61	61%	100%	0%	11,922	\$ 2,563,230.00	\$ 256,323.00	20%
		μ	\$ 759,709.24	\$ 741,497.76	\$ 18,211.48	\$ 46,534.40							
Taylor	\$0.033	2011	\$ 527,838.64	\$ 399,190.86	\$ 128,647.78	\$ 125,032.69		100%	0%				
		2012	\$ 566,066.33	\$ 478,708.18	\$ 87,358.15	\$ 212,390.84	41%	100%	0%				
		2013	\$ 561,222.69	\$ 545,796.46	\$ 15,426.23	\$ 227,817.07	7%	100%	0%				
		2014	\$ 531,961.91	\$ 547,722.87	\$ (15,760.96)	\$ 212,056.11	-7%	97%	3%				
		2015	\$ 553,598.18	\$ 638,207.21	\$ (84,609.03)	\$ 127,447.08	-66%	87%	13%				
		2016	\$ 465,873.17	\$ 409,707.90	\$ 56,165.27	\$ 183,612.35	31%	100%	0%				
		2017	\$ 452,101.52	\$ 428,166.41	\$ 23,935.11	\$ 207,547.46	12%	100%	0%				
		2018	\$ 467,301.55	\$ 444,029.00	\$ 23,272.55	\$ 230,820.01	10%	100%	0%				
		2019	\$ 507,928.25	\$ 448,155.85	\$ 59,772.40	\$ 290,592.41	21%	100%	0%	15,771	\$ 3,390,765.00	\$ 339,076.50	86%
		μ	\$ 514,876.92	\$ 482,187.19	\$ 32,689.72	\$ 201,924.00							
Wayne	\$0.030	2011	\$ 246,997.96	\$ 247,767.03	\$ (769.07)	\$ 126,662.95		100%	0%				
		2012	\$ 254,564.94	\$ 255,114.99	\$ (550.05)	\$ 126,112.90	0%	100%	0%				
		2013	\$ 253,940.94	\$ 260,779.95	\$ (6,839.01)	\$ 119,273.89	-6%	97%	3%				
		2014	\$ 254,718.16	\$ 250,867.90	\$ 3,850.26	\$ 123,124.15	3%	100%	0%				
		2015	\$ 256,598.90	\$ 278,343.61	\$ (21,744.71)	\$ 101,379.44	-21%	92%	8%				
		2016	\$ 257,240.84	\$ 258,597.18	\$ (1,356.34)	\$ 100,023.10	-1%	99%	1%				
		2017	\$ 267,502.21	\$ 267,598.01	\$ (95.80)	\$ 99,927.30	0%	100%	0%				
		2018	\$ 270,796.59	\$ 261,519.07	\$ 9,277.52	\$ 109,204.82	8%	100%	0%				
		2019	\$ 277,360.66	\$ 265,265.77	\$ 12,094.89	\$ 121,299.71	10%	100%	0%	12,177	\$ 2,618,055.00	\$ 261,805.50	46%
		μ	\$ 259,969.02	\$ 260,650.39	\$ (681.37)	\$ 114,112.03							



STATEMENT IN ACCOUNT WITH

Janes Painting

110 East Fortune St. • Columbia, Ky. 42728

Kenneth Janes
270-384-2914
270-250-1394

Doug Janes
270-250-4619

Date 1-15 2020

Name Columbia Health Department

Address _____

Any Questions please contact Doug.

	TOTAL AMOUNT
Painting	
- Lobby	
- Bathrooms in Lobby	
- All reception area	
- Kitchen area	
- Hallway	
- All exam rooms	
- Blue Cabinets	
- All areas and rooms with the exception of one office * the side where Jelaine Harlow's office is located *	
All walls x 2 Coats	
All trim x 1 Coat	
Blue cabinets x 3 Coats	
labor ↓	
material	\$ 9600 ⁰⁰

Payment expected upon completion of job unless other arrangements are made.

ESTIMATE

From

JACK SCOTT PAINTING
P.O. BOX 551
COLUMBIA KY 42728

To

ADAIR Co. HEALTH DEPT
801 WESTLAKE DRIVE
COLUMBIA KY 42728

Estimate #

Estimate Date

Item	Description	Unit Price	Quantity	Amount
1	3 coats of PAINT			
2	WALLS + DOOR FRAMES			17,000. ⁰⁰

New Line CABINETS/entire upstairs
except ENVIRO OFFICE

Estimate Notes

Subtotal

17,000.⁰⁰

Total

Amount Paid

Estimate

17,000.⁰⁰

Population/Resources 2019-2020

Population

While Kentucky is ranked in the top ten unhealthiest states, our District is below the state average. Kentucky statewide population averages 34% in obesity (US – 29%) (1), 27 % in physical inactivity (US-22%) (1), and 13.8% with diabetes (2). Our district population averages 36.2 % in obesity, 32.1% in physical inactivity (an improvement from 33.6%), and 14.6 % with diabetes.(1) Our district includes ten of Kentucky’s 120 counties. Eight of these ten counties are Appalachian counties. Our district is primarily rural, covers 3,720 square miles geographically, and has a population of 209,231.

Compounding the health problems in our area, an average of 7.61 % are uninsured compared to the state average of 6.7%. The state average poverty rate is 16.9%, while in the Lake Cumberland District the average is 23.9%. Language other than English is spoken in 2.63% of homes in our district. Approximately 6.1% (12,728) of our district’s residents are veterans. ** We do not have a YMCA or many of the low cost health improvement opportunities offered in larger urban areas.

At present, the Diabetes Education Program is the only source of *free comprehensive* diabetes self-management education in the ten county district. Taylor County does one-on-one education at the local hospital and bills insurance. A pharmacy in Clinton County provides classes and bills insurance as well. Data has been compiled and evaluated to identify the greatest need of DSME classes in order to reach population and demands. (See attached table.) We have adjusted the frequency of the classes based on population, incidence of diabetes, available diabetes education in the county, previous history of class attendance, and staffing. We provide classes twice a year in all counties except Pulaski, which has classes 3 times a year.

Resources

The local health department facilities in nine of the ten counties have adequate meeting rooms for DSME classes with the exception being in Casey County. The DSME classes in Casey County are held at the County Extension Office Education Building or the Casey County Public Library free of charge. Three Diabetes Educators (RN, CDE’s,) teach DSME classes throughout the district. Interpreters are utilized for one-on-one education when non-English speaking individuals need assistance with diabetes education.

Data for 2019-2020 Diabetes Education Program Plan

County Ranking Based on Health Outcomes	County	**Population	(1) % Prevalance of Type 2 Diabetes	**Race	(1) % Obesity	(1)% Physical Inactivity
49	Adair	19,215	16	W 94.9% B 3 % H 2%	38	36
102	Casey	15,888	15	W 97.3% B 1 % H 3.1%	38	29
64	Clinton	10,206	15	W 97% B 0.6% H 3%	37	34
59	Cumberland	6,659	15	W 94.8% B 3% H 1.5%	34	33
40	Green	11,049	14	W 95.9 % B 2.1 % H 1.9%	37	32
116	McCreary	17,408	15	W 91.6% B 5.7% H 2.6%	36	35
62	Pulaski	64,623	14	W 96.4% B 1.2% H 2.6%	35	30
77	Russell	17,821	13	W 96.8% B 0.9% H 3.8%	32	29
57	Taylor	25,549	14	W 91.6% B 5.2% H 2.5%	33	31
91	Wayne	20,813	15	W 95.6% B 2% H 3.5%	40	32

1 Data from <http://www.countyhealthrankings.org/app/kentucky/2019/rankings> accessed 1/29/2020

2 Data from <http://stateofobesity.org/rates/> 2018 data accessed 1/29/2020

** Data from <https://www.census.gov/quickfacts-> accessed 1/29/2020

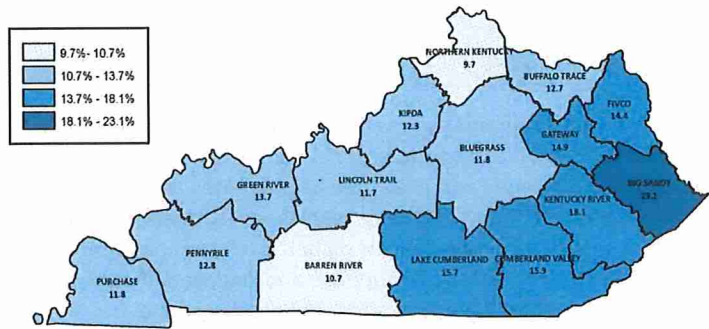
2019 Kentucky Diabetes Fact Sheet

DIABETES: A Public Health Epidemic

Diabetes is COMMON in Kentucky

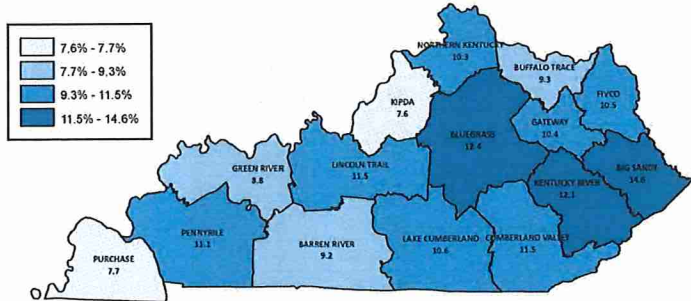
- From 2000 to 2017, diagnosed diabetes in KY adults has nearly doubled from 6.5% (198,052) to 12.9% (442,500 or 1 in 8)¹. KY ranks 7th highest in the U.S. for diabetes prevalence³. (Nationwide median: 10.5%)
- An estimated 147,500 adults are living with undiagnosed diabetes based on the national rate².
- In Appalachia, the adult rate for diagnosed diabetes is 17% compared to 11.2% in non-Appalachian counties.
- 3,352 youth had a diabetes diagnosis claim in the Kentucky Employees' Health Plan (278) and Medicaid (3,074)³.

Prevalence of Diagnosed Diabetes by Kentucky Regions 2017 Kentucky Behavioral Risk Factor Survey



Statewide Prevalence: 12.9%

Prevalence of Diagnosed Prediabetes by Kentucky Regions 2017 Kentucky Behavioral Risk Factor Survey



Statewide Prevalence: 10.2%

- Prediabetes occurs when blood sugar levels are higher than normal but not high enough for a diabetes diagnosis. It is a major risk factor for type 2 diabetes.
- As of 2017, 10.2% (288,000) Kentucky adults had diagnosed prediabetes (up from 8.4% in 2015)³.
- 812,000 adults are estimated to have undiagnosed prediabetes².
- An estimated 1 in 3 adults (33.9% or 1.1 million) have diagnosed or undiagnosed prediabetes².
- Gestational diabetes, a risk factor for prediabetes, was present in 5.6% (3,039) of Kentucky live births in 2016, and 10% (2,703) of Medicaid births in 2017³.

Diabetes is SERIOUS in Kentucky

- Diabetes can be associated with complications such as heart disease, stroke, blindness, kidney failure, lower-limb amputation and ketoacidosis. These can reduce length and quality of life.
- In 2016, KY had the 4th highest death rate in the U.S. due to diabetes. This is an increase from 14th in 2014. Diabetes is the 6th leading cause of death by disease in KY and the U.S. It is the 3rd leading cause of death by disease for African Americans in KY (2016).
- KY hospitals had 10,470 inpatient hospital discharges with a primary diagnosis of diabetes (2017).
- 49% (18,359) of hospital visits for cardiovascular disease listed diabetes as a secondary diagnosis (2017).
- KY inpatient hospital discharge data, where diabetes is listed as the primary diagnosis, shows other specified manifestations (includes hypoglycemia) and diabetic ketoacidosis or DKA as the most frequent reasons for hospitalization (2017).
- In 2017, 16,176 Kentuckians had an emergency department visit for diabetes that did not result in full hospitalization. These visits generated billed charges of approximately \$74 million³.
- Kentuckians with diabetes are more likely to have other chronic conditions and risks as shown below.

Diabetes Status and Co-existing Condition or Risk
2017 Kentucky Behavioral Risk Factor Survey

Diabetes Diagnosis	No Leisure Time Activity	Obese	Smoking	Hypertension	High Cholesterol	Coronary Heart Disease	All Natural Teeth Extracted	Depression	Arthritis	Asthma
Yes	49.2%	56.1%	22.8%	77.8%	66.5%	17.9%*	30.7%	34.8%	58.9%	18.5%
No	32.3%	30.9%	24.0%*	33.6%	33.1%	4.5%*	19.0%	22.7%	28.4%	9.6%

*Measures noted in green ink indicate the value is an improvement for that measure from previous data available from the same source.

Diabetes is COSTLY in Kentucky

- ◆ Nationally, people with diabetes have costs 2.3 times higher than in its absence⁴.
- ◆ Diabetes has the 3rd highest average cost for individual KY hospitalizations for common chronic diseases at \$35,493 (2017)³.
- ◆ 3rd highest overall cost of several common chronic diseases in the KY Medicaid population (2017).
- ◆ Diabetes is one of the most costly chronic conditions for both active employees and early retirees in the Kentucky Employees' Health Plan (KEHP) population, at almost \$174 million in combined medical and prescription drug costs in 2017³.
- ◆ Diabetes costs KY \$5.16 billion in total medical costs, lost work and wages (2017)⁴.

Diabetes is MANAGEABLE and in Many Cases PREVENTABLE

- ◆ Structured lifestyle change programs such as the National Diabetes Prevention Program have been proven to prevent or delay type 2 diabetes in adults with prediabetes or at high risk for the disease.
- ◆ Much of diabetes-related sickness and death can be prevented, delayed or reduced.
- ◆ Quality care from health care teams including aggressive treatment to manage A1C, blood pressure and cholesterol and promote smoking cessation is critical to reduce risks for diabetes-related complications.
- ◆ Diabetes self-management education and support, appropriate self-care and other risk reduction and behavior change strategies are also critical to achieve diabetes control and avoid complications.

The tables below show gaps that exist between current and desired clinical and self-care practices.

Reported Diabetes Care Practice Rates Among Adults with Diabetes						
Kentucky Behavioral Risk Factor Survey – 2014 and 2016 Data Not Collected for These Indicators						
Indicator	2011	2012	2013	2015	2017	2015
Within past year unless otherwise noted	Kentucky ¹	Kentucky ¹	Kentucky ¹	Kentucky ¹	Kentucky ¹	U.S. ⁵
Taken a diabetes self-management course	47.3%	49.0%	49.6%	48.0%	46.0%	54.8%*
A1C test checked \geq 1 time	84.0%	80.8%	89.2%	90.4%	94.5%*	NA
A1C test checked \geq 2 times	74.4%	73.4%	74.5%	74.1%	80.2%*	74.9%
Retinal or dilated eye exam	65.7%	61.0%	65.2%	67.3%	66.5%	70.1%*
Professional foot exam	64.7%	67.2%	72.1%	72.4%	75.9%*	75.7%*
Flu shot	61.2%	56.3%	58.3%	59.8%	56.4%	57.1%*
Pneumonia shot ever	61.4%	57.4%	62.1%	61.4%	67.4%*	64.7%*
Self-foot exam daily	68.3%	63.6%	67.9%	63.5%	64.0%*	60.4%
Self-blood glucose monitoring daily	68.9%	63.3%	69.7%	62.8%	62.0%	62.1%
Seeing a health professional for diabetes \geq 1 time	87.6%	84.7%	88.8%	88.4%	92.0%	89.3%

*Measures noted in green ink indicate the value is an improvement for that measure from previous data available from the same source.

2016, 2017 and 2018 Laboratory or Clinical Rates for Kentucky Adults with Diabetes				
Statewide Data Not Available but Below Are Various Population Subsets from Listed Available Reports				
Indicator	2017 Consolidated Measurement Report, Kentucky State Aggregate Report ⁶	Federally Qualified Health Center Data Report for Kentucky ⁷	2019 Kentucky Diabetes Report ³ Kentucky Medicaid Managed Care HEDIS Scores 2018	2018 HEDIS National Medicaid Benchmark (50 th Percentile) ³
Within the past year				
A1C test checked \geq 1 time	85%	Not Available	86.93%*	87.83%
A1C poor control > 9%	55%	27.74%*	47.18%	38.08%
A1C control < 8%	Not Available	59.17	43.22%	51.40%
A1C control < 7%	12%	Not Available	31.75%	35.07%
Blood pressure control < 140/90 mm/Hg	Not Available	Not Available	57.34%	63.26%

*Measures noted in green ink indicate the value is an improvement for that measure from previous data available from the same source.

For more statistics and information, see the latest *Kentucky Diabetes Report* and the *Diabetes Education Services Scorecard for Kentucky* at <https://chfs.ky.gov/agencies/dph/dpqi/cdpp/Pages/diabetes.aspx>.

Data References

1. Kentucky Department for Public Health and CDC. Kentucky Behavioral Risk Factor Survey Data. 2000, 2011, 2012, 2013, 2015 and 2017.
2. Centers for Disease Control and Prevention (CDC). National Diabetes Statistics Report, 2017. <https://www.cdc.gov/diabetes/data/statistics/statistics-report.html>
3. Kentucky Department for Public Health. 2019 Kentucky Diabetes Report.
4. American Diabetes Association. *Economic Costs of Diabetes in the U.S. in 2017*. Diabetes Care 2018; 41: 917-928.
5. CDC, Preventive Care Practices, 2015. <https://pis.cdc.gov/irasp/diabetes/DiabetesAtlas.html> (Latest national data accessible at this time.)
6. Kentuckiana Health Collaborative. *2017 Consolidated Measurement Report for Kentucky*. Aggregated 2016 claims data for Aetna, Anthem, Humana, WellCare and Passport
7. Human Resources and Services Administration. 2017 Health Center Data. <https://bphc.hrsa.gov/uds/datacenter.aspx?q=d&year=2017&state=KY#list>



Kentucky Public Health
Prevent. Promote. Protect.



DIABETES IN KENTUCKY

A Public Health Epidemic - 2020

Diabetes

1 in 7 or 474,500 (13.7%) adults have diagnosed diabetes

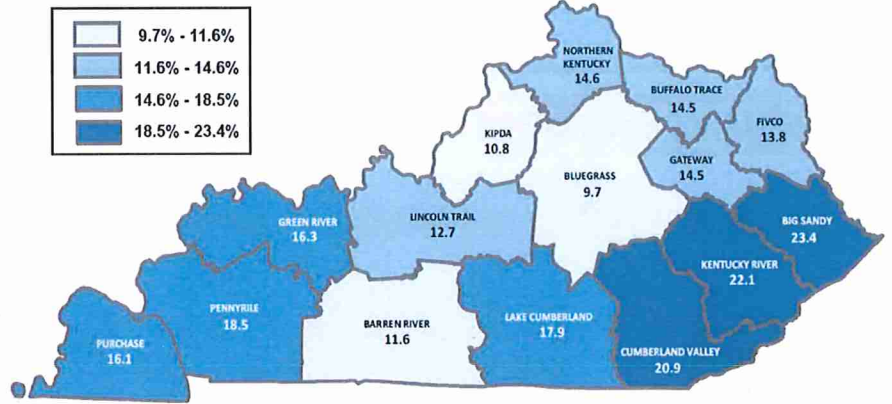


158,200 adults are estimated to have diabetes but are undiagnosed

632,700 with diagnosed and undiagnosed diabetes
1 of 4 don't know it

Prevalence of Diagnosed Diabetes by Kentucky Regions

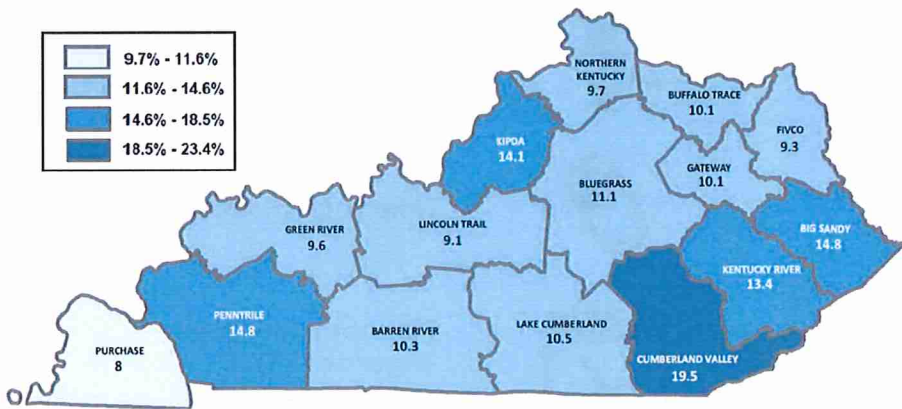
2018 Kentucky Behavioral Risk Factor Surveillance Survey



Statewide Prevalence: 13.7%
Nationwide Median: 10.9%

Prevalence of Diagnosed Prediabetes by Kentucky Regions

2018 Kentucky Behavioral Risk Factor Surveillance Survey



Statewide Prevalence: 11.8%

Prediabetes

1 in 9 or 331,335 (11.8%) adults have diagnosed prediabetes



812,000 adults are estimated to have prediabetes but are undiagnosed

1.1 million (1 in 3) with diagnosed and undiagnosed prediabetes
7 of 10 don't know it

Cost



\$5.16
BILLION

Total medical costs and lost work and wages for people with diagnosed diabetes in Kentucky

Higher risk of serious and costly complications



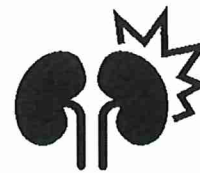
Heart Disease



Stroke



Loss of Toes, Feet or Legs



Kidney Disease



Blindness

Risk Factors for Type 2 Diabetes



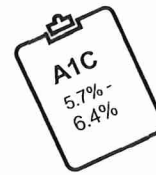
Overweight



45 and Older



Physically Inactive



Prediabetes



Family History

What Can You Do?

You can **PREVENT** or **DELAY** type 2 diabetes



Find out if you have prediabetes – See your health care provider to get your blood sugar tested



Attend a National Diabetes Prevention Program (DPP)



Make healthy food choices



Be more active



Lose weight if needed

Learn more at www.cdc.gov/diabetes/prevention or speak with your doctor

You can **MANAGE** diabetes and reduce risk for complications



Attend a self-management education and support program



Plan meals and make healthy food choices



Stay active



Take your medications



Monitor your blood sugar and other recommended care



Quit smoking

Learn more at <https://www.cdc.gov/diabetes/ndep> or speak

To find diabetes prevention or self-management education and support programs in your area, look on the Kentucky Diabetes Resource Directory at <https://prdweb.chfs.ky.gov/KYDiabetesResources/>

REFERENCES

Kentucky Department for Public Health. Kentucky Behavioral Risk Factor Surveillance Survey Data 2018.
Centers for Disease Control and Prevention (CDC). [National Diabetes Statistics Report, 2017](#).
American Diabetes Association. [Economic Costs of Diabetes in the U.S. in 2017](#). Diabetes Care 2018; 41: 917-928.

IMPROVE DIABETES OUTCOMES



KENTUCKY DIABETES NETWORK, INC.

www.KYdiabetes.net

Kentucky Diabetes Network

@KYDiabetes

Diabetes Self-management Education and Support (DSMES): Ongoing process of facilitating the knowledge, skill, and ability necessary for diabetes self-care. Includes activities that assist in implementing and sustaining the behaviors needed to manage diabetes.

60%

of people with diabetes have never received formal diabetes self-management education and support (DSMES).

AADE 16

Everyone with diabetes needs DSMES, but especially at these four critical times:

- 1 At diagnosis
- 2 Annual assessment of education, nutrition and emotional needs
- 3 When new complicating factors influence self-management
- 4 When transitions in care occur

Diabetes education helps your patients make better self-management decisions



Healthy Eating



Taking Medication



Being Active



Monitoring

Healthy Coping



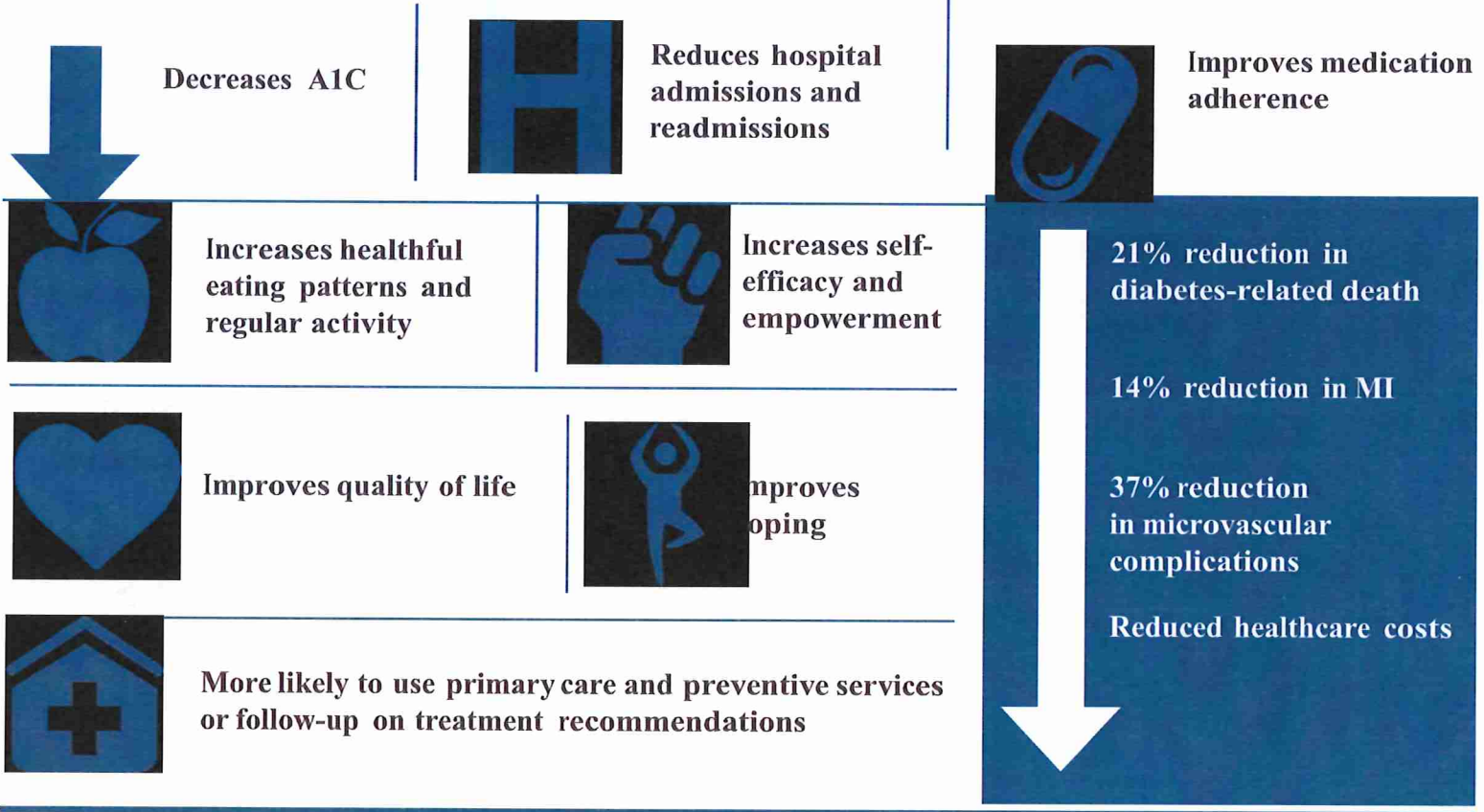
Problem Solving
(for hypo/hyperglycemia and sick days)



Reducing Risks
(for acute and chronic complications)



Evidence shows diabetes education:



A diabetes educator:

- is a licensed health care professional with training and experience pertinent to DSMES
- educates on diabetes
- provides ongoing support in diabetes self-care
- evaluates progress and communicates with providers

How do I refer a patient?

To learn more, visit www.kydiabetes.net or go to <https://prd.chfs.ky.gov/KYDiabetesResources/>
Or call 1-800-928-4416

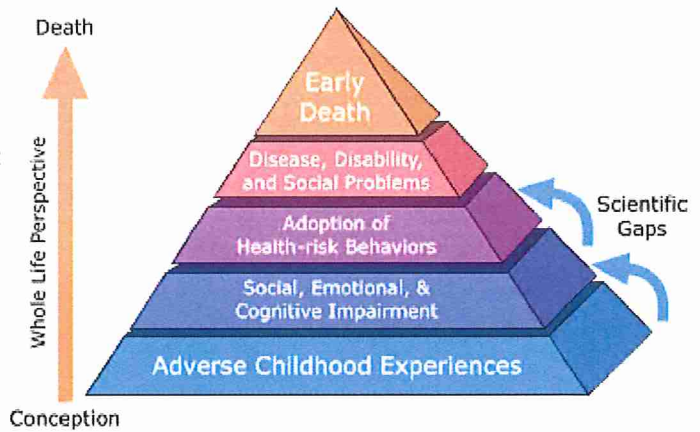
References:

1. ADA Standards of Medical Care in Diabetes – 2017. Diabetes Care 2017 Jan; 40 (Supplement 1).
2. Diabetes Care 2015 Jul; 38(7): 1372-1382.
3. 2017 National Standards for Diabetes Self-Management Education and Support. Diabetes Care 2017 July.

ADVERSE CHILDHOOD EXPERIENCES (ACEs)

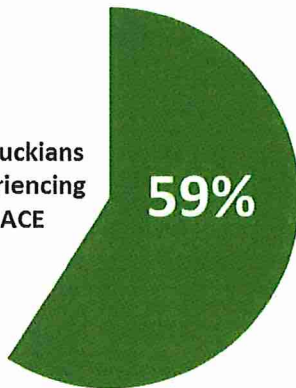
Adverse Childhood Experiences (ACEs)

Adverse childhood experiences (ACEs) are potentially traumatic events that can have negative, lasting effects on health and well-being including early death¹. These experiences range from physical, emotional, or sexual abuse to parental divorce or the incarceration of a parent or guardian. The original ACE Study was a research study conducted by Kaiser Permanente and the Centers for Disease Control and Prevention. Participants were recruited to the study between 1995 and 1997 and have been in long-term follow up for health outcomes. The study has demonstrated that ACEs are common, often occur together, and are associated with health and social problems as an adult^{2,3}.



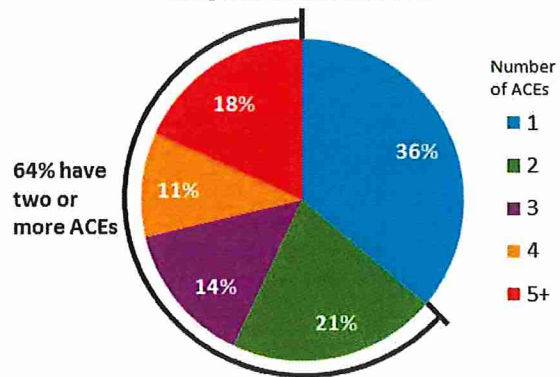
Prevalence of ACEs in Kentucky

59% of Kentuckians report experiencing at least one ACE



More than half (59%) of Kentucky residents have experienced at least one ACE. Of those that have experienced at least one ACE, 64% have experienced two or more ACEs.

Distribution of ACEs among those with at least one ACE

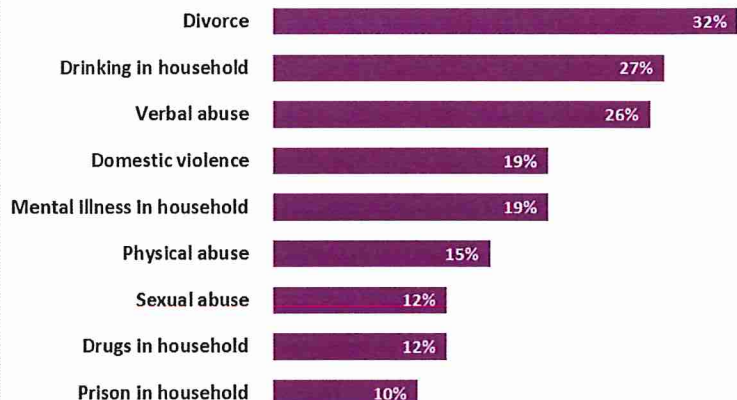


Data Source: Kentucky Behavioral Risk Factor Surveillance (KyBRFS); Year 2015

Common ACEs in Kentucky

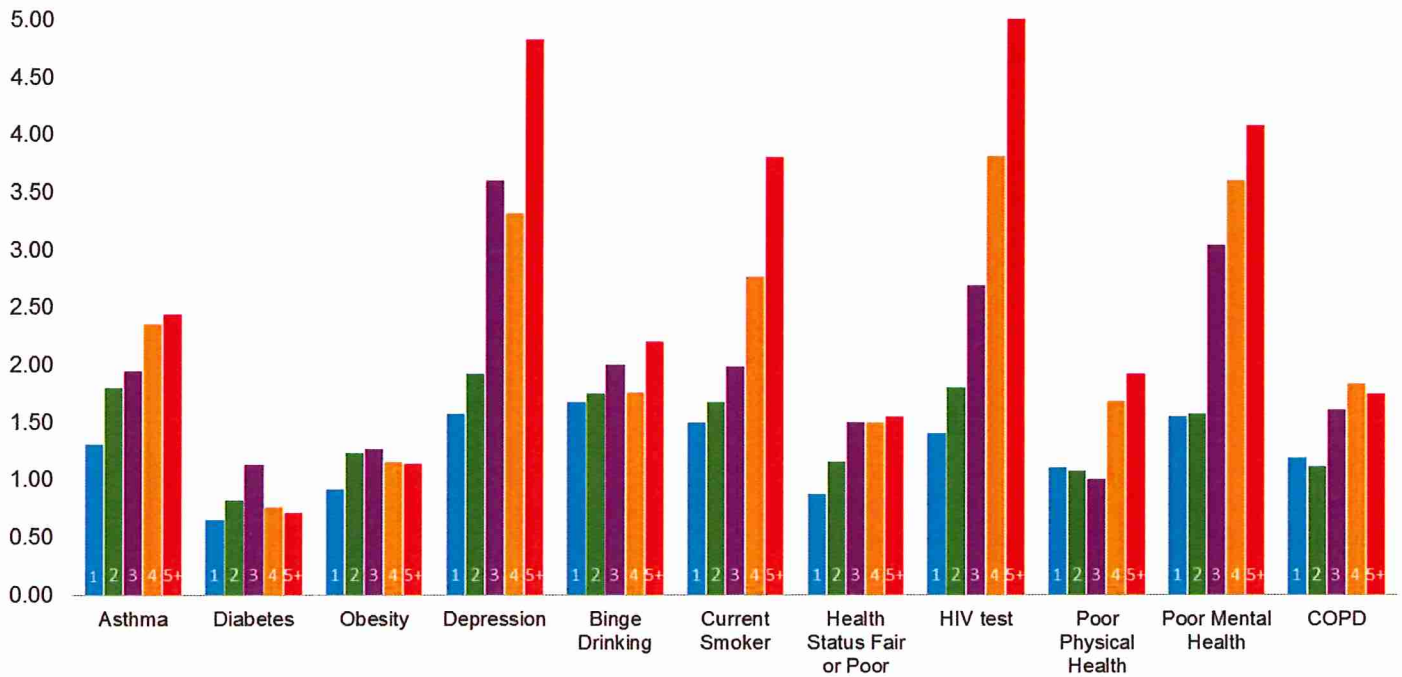
Data from the Kentucky Behavioral Risk Factor Surveillance (KyBRFS) indicates that several Kentucky adults experienced various types of ACEs. Of those experiencing at least one ACE, 32% experienced divorce in the household, 27% experienced drinking (problem drinker or alcoholism) in the household, and 26% experienced verbal abuse. These data suggest that ACEs are very common in Kentucky and should be addressed during routine health care visits.

Prevalence of Individual ACEs



Data Source: Kentucky Behavioral Risk Factor Surveillance (KyBRFS); Year 2015

Increased Risk of Condition/Behavior By Number of ACEs Present Compared to No ACEs



Data Source: Kentucky Behavioral Risk Factor Surveillance (KyBRFS); Year 2015

HIV test=Human Immunodeficiency Virus test

COPD=Chronic Obstructive Pulmonary Disease

This data supports addressing ACEs in the health care setting as well as in communities. A better understanding of the adverse events experienced by an individual during childhood could provide insight into their physical and mental health status as an adult. All families experience times of stress, and research demonstrates that children grow and learn best in families who have the supports and skills to deal with those times.

Source: Kentucky Department of Public Health, 2015

ACEs can have lasting effects on...

Health (obesity, diabetes, depression, suicide attempts, STDs, heart disease, cancer, stroke, COPD, broken bones)

Behaviors (smoking, alcoholism, drug use)

Life Potential (graduation rates, academic achievement, lost time from work)

ACEs have been found to have a graded dose-response relationship with 40+ outcomes to date.

*This pattern holds for the 40+ outcomes, but the exact risk values vary depending on the outcome.

Source: CDC, 2019

References:

- 1 Child Trends; Research Brief; Adverse Childhood Experiences; Year 2014
- 2 The Adverse Childhood Experiences (ACE) Study; Centers for Disease Control and Prevention. Retrieved Nov. 4, 2016
- 3 Adverse Childhood Experiences; Substance Abuse and Mental Health Services Administration, Rockville, MD; Retrieved Nov. 4, 2016

Office of Adolescent Health

Overview Two-Year Teen Pregnancy Prevention (TPP) Grant

July, 15 2019 - June 30, 2021

Awarded: \$986,000

Lake Cumberland District Health Department was awarded the Phase I Tier 1 projects to replicate programs that have been proven effective through rigorous evaluation to reduce teenage pregnancy, behavioral risk factors underlying teenage pregnancy, or other associated risk factors.

Reducing the Risk (RTR) will be implemented in all 12 high schools across Lake Cumberland

RTR will assist high school students to delay the initiation of sex or increase the use of protection against pregnancy and STD/HIV if they choose to have sex. This research-proven approach addresses skills such as risk assessment, communication, decision making, planning, refusal strategies and delay tactics.

Performance measures

- 95% of sites will implement the programs
- 60% of sexually active participants will report they are more likely to use protection to avoid pregnancy and/ or STD's
- 80% of participants from both programs will report the program was beneficial
- 90% of TOP participants will have eliminated at least 2 risk factors
- 80% of TOP participants report more confidence in handling challenging issues
- Decrease LCDHD teen birth rates by 5%
- Decrease LCDHD STD rates by 5% by practicing abstinence will help them achieve their career goals

Teen Outreach Program

Casey and McCreary Counties

Wyman's Teen Outreach Program® (TOP®) promotes the positive development of adolescents through curriculum-guided, interactive group discussions; positive adult guidance and support; and community service learning.

TOP is delivered by trained adult facilitators across a school year to groups of teens (called "TOP Clubs"). TOP is designed to meet the developmental needs of middle and high school teens and can be implemented in a variety of settings, including in-school, after-school, through community-based organizations or in systems and institutional settings, including residential facilities.

TOP curriculum is focused on key topics related to adolescent health and development, including building social, emotional, and life skills; developing a positive sense of self; and connecting with others.

Family & Youth Services Bureau Sexual Risk Avoidance Education (SRAE)

Overview of SRAE Program / Making a Difference (MAD)

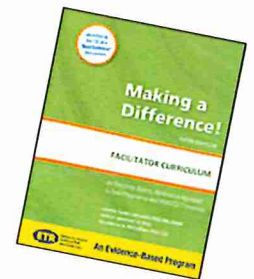
September 30, 2016 through October 1, 2019

Awarded: \$972,151

Lake Cumberland District Health Department was awarded the Sexual Risk Avoidance Education (SRAE) grant from the Family and Youth Services Bureau providing funding to implement Making a Difference (MAD) curriculum from September 30, 2016 through October 1, 2019.

Making the Difference (MAD) Program was implemented in all 14 middle schools across Lake Cumberland

- 13 School Districts
- 7,264 Unduplicated Middle School Students
- 1425 Behavioral Change Presentations
- 81% of the 7,264 adolescents reported that their belief of practicing abstinence will help them achieve their career goals
- 4% Teen birth rate decrease between 2017 and 2018



Building Resilient Youth Conference - July 25, 2019



THE TRUTH ABOUT ACEs

WHAT ARE THEY?

ACEs are
ADVERSE
CHILDHOOD
EXPERIENCES

The three types of ACEs include

ABUSE



Physical



Emotional



Sexual

NEGLECT



Physical



Emotional

HOUSEHOLD DYSFUNCTION



Mental Illness



Incarcerated Relative



Mother treated violently



Substance Abuse



Divorce

HOW PREVALENT ARE ACEs?

The ACE study* revealed the following estimates:

ABUSE



NEGLECT

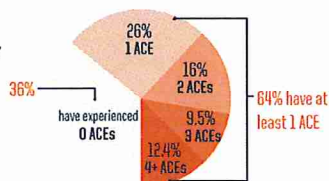


percentage of study participants that experienced a specific ACE

HOUSEHOLD DYSFUNCTION

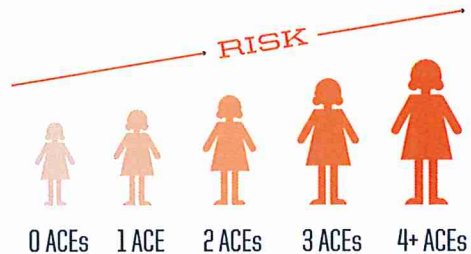


Of 17,000 ACE study participants:



WHAT IMPACT DO ACEs HAVE?

As the number of ACEs increases, so does the risk for negative health outcomes



Possible Risk Outcomes:

BEHAVIOR



PHYSICAL & MENTAL HEALTH

